

Blue Shield Promise Cal MediConnect Plan (Medicare-Medicaid Plan)

2020 List of Covered Drugs (Formulary)

Counties: Los Angeles & San Diego

This formulary was updated on **10/28/2019** . For more recent information or other questions, please contact Blue Shield Promise Cal MediConnect Plan Member Services at 1-855-905-3825 (TTY: 711), from 8:00 a.m. – 8:00 p.m., seven days a week, or visit: www.blueshieldca.com/promise/calmediconnect.

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Blue Shield Promise Cal MediConnect Plan | 2020 List of Covered Drugs (Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs and over-the-counter drugs and items are covered by Blue Shield Promise Cal MediConnect Plan. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Blue Shield Promise Cal MediConnect Plan. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

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A. Disclaimers

This is a list of drugs that members can get in Blue Shield Promise Cal MediConnect.

- ❖ Blue Shield Promise Cal MediConnect is a health plan that contracts with both Medicare and Medi-Cal to provide benefits of both programs to enrollees.
- ❖ The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- ❖ Benefits and/or copays may change on January 1 of each year.
- ❖ You can always check Blue Shield Promise Cal MediConnect's up-to-date List of Covered Drugs online at www.blueshieldca.com/promise/calmediconnect or by calling 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week.
- ❖ Limitations, copays, and restrictions may apply. For more information, call Blue Shield Promise Cal MediConnect Member Services or read the Blue Shield Promise Cal MediConnect Member Handbook.
- ❖ Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.
- ❖ **Español (Spanish):** ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY: 711) De 8:00 a.m. a 8:00 p.m., los siete días de la semana.
- ❖ **繁體中文 (Chinese):** 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY: 711) 每周七天办公，每天早上 8:00 至晚上 8:00。这是免费电话。
- ❖ **Tiếng Việt (Vietnamese):** CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY: 711) 8 giờ sáng–8 giờ tối, 7 ngày trong tuần. HOẶC Ban.
- ❖ **Tagalog (Tagalog – Filipino):** PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY: 711) Mula 8am-8pm, 7 araw sa isang lingo.
- ❖ **한국어 (Korean):** 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY: 711) 번으로 전화해 주십시오. 번으로 전화해 주십시오, 오후 8 시, 7 일 주일 오전 8 시..
- ❖ **Հայերեն (Armenian):** Ուշադրութեամբ խոսելու էք հայերէն, ապա ձեզ անվճար կարող են տրամադրվել լեզվական աջակցության ծառայություններ: Զանգահարեք Blue



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY (հեռախոսիչ)՝ 711) Իր 8:00 – 20:00, շաբաթը լիք օր

❖ **فارسی (Persian/Farsi):**

❖ **توجه:** اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد. با 1-855-905-3825 (TTY: 711) تماس بگیرید. صبح تا 8 شب، همه روزه هفته 8

❖ **Русский (Russian):** ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (телетайп: 711) С 8:00 до 20:00, без выходных.

❖ **日本語 (Japanese):** 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY:711) まで、お電話にてご連絡ください。毎日 8am~8pm

❖ **العربية (Arabic):**

❖ **ملحوظة:** إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (رقم هاتف الصم والبكم: 711) من الساعة 8:00 صباحًا حتى 8:00 مساءً طوال أيام الأسبوع

❖ **ਪੰਜਾਬੀ (Panjabi):** ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY:711) 'ਤੇ ਕਾਲ ਕਰੋ। ਸਵੇਰੇ 8 ਵਜੇ ਤੋਂ ਸ਼ਾਮ 8 ਵਜੇ ਤੱਕ, ਹਫ਼ਤੇ ਵਿੱਚ 7 ਦਿਨ

❖ **ខ្មែរ (Cambodian/Khmer):** ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសាដោយមិនគិតល្អៗ គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ Blue Shield Promise Cal MediConnect Plan 1-855-905-3825 (TTY:711) ចាប់ពីម៉ោងម៉ោង 8:00 ព្រឹក ដល់ ម៉ោង 8:00 យប់ ជ្រាំពីរថ្ងៃក្នុងមួយសប្តាហ៍។

❖ You can get this document for free in other formats, such as large print, braille, or audio. Call 1-855-905-3825 (TTY users should call 711). 8:00 a.m. – 8:00 p.m., seven days a week. The call is free.

❖ You can make a standing request to get materials in a language other than English or in an alternate format now and in the future. To make a request, please contact Blue Shield Promise Cal MediConnect Plan Member Services.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

B. Frequently Asked Questions (FAQ)

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

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

The drugs on the Drug List are the drugs covered by Blue Shield Promise Cal MediConnect Plan. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Blue Shield Promise Cal MediConnect Plan will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a Blue Shield Promise Cal MediConnect Plan network pharmacy.
- In some cases, you have to do something before you can get a drug (see question B4 below).

You can also see an up-to-date list of drugs that we cover on our website at www.blueshieldca.com/promise/calmediconnect or call Member Services at 1-855-905-3825.

B2. Does the Drug List ever change?

Yes, and Blue Shield Promise Cal MediConnect Plan must follow Medicare and Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year.

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

- Decide to require or not require prior approval for a drug. (Prior approval is permission from Blue Shield Promise Cal MediConnect Plan before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, see question B4.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

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

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

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

- You can always check Blue Shield Promise Cal MediConnect Plan's up to date Drug List online at www.blueshieldca.com/promise/calmediconnect.
- You can also call Member Services to check the current Drug List at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week.

B3. What happens when there is a change to the Drug List?

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

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug but your cost for the new drug will stay the same or will be lower. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please see question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know that the drug has been taken off the Drug List and instruct you on what to do next.

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



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- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is new to the market and
 - Replace a brand name drug currently on the Drug List or
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

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

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

- If there is a similar drug on the Drug List you can take instead or
- Whether to ask for an exception from these changes. To learn more about exceptions, see question B10.

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

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

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from Blue Shield Promise Cal MediConnect Plan before you fill your prescription. Blue Shield Promise Cal MediConnect Plan may not cover the drug if you do not get approval.
- **Quantity limits:** Sometimes Blue Shield Promise Cal MediConnect Plan limits the amount of a drug you can get.
- **Step therapy:** Sometimes Blue Shield Promise Cal MediConnect Plan requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages 1 - 102 . You can also get more information by visiting our web site at www.blueshieldca.com/promise/calmediconnect. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

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

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

The *List of Covered Drugs* on page 1 – 102 has a column labeled “Necessary actions, restrictions, or limits on use.”

B6. What happens if we change our rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?

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

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

There are two ways to find a drug:

- You can search alphabetically (if you know how to spell the drug), **or**
- You can search by medical condition.

To search **alphabetically**, go to the Index of Covered Drugs section. You can find it in the index that begins on page 103 . 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.

To search **by medical condition**, find the section labeled “List of drugs by medical condition” on page xv . The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular agents. That is where you will find drugs that treat heart conditions.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

B8. What if the drug you want to take is not on the Drug List?

If you don't see your drug on the Drug List, call Member Services at 1-855-905-3825 (TTY: 711) from 8:00 a.m. – 8:00 p.m., seven days a week and ask about it. If you learn that Blue Shield Promise Cal MediConnect Plan will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. He or she can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please see questions B10-B12 for more information about exceptions.

B9. What if you are a new Blue Shield Promise Cal MediConnect Plan member and can't find your drug on the Drug List or have a problem getting your drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of Blue Shield Promise Cal MediConnect Plan. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

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

We will cover a 30 day supply of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior approval by Blue Shield Promise Cal MediConnect Plan, **or**
- you are taking a drug that is part of a step therapy restriction.

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

- We will cover one 31 day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Blue Shield Promise Cal MediConnect Plan member.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

- This is in addition to the temporary supply during the first 90 days you are a member of Blue Shield Promise Cal MediConnect Plan.

Transition Policy

In circumstances where a beneficiary is changing from one treatment setting to another, Blue Shield Promise Cal MediConnect Plan will ensure a fast process for approving non-formulary Part D drugs. This process shall also apply to formulary Part D drugs that require prior authorization or step-therapy. Examples of level of care changes are: beneficiaries who are discharged from a hospital to a home; beneficiaries who end their skilled nursing facility Medicare Part A stay and who need to revert to their Part D plan formulary; beneficiaries who end a long-term care facility stay and return to the community; and, beneficiaries who are discharged from psychiatric hospitals with medication regimens that are highly individualized.

B10. Can you ask for an exception to cover your drug?

Yes. You can ask Blue Shield Promise Cal MediConnect Plan to make an exception to cover a drug that is not on the Drug List.

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

- For example, Blue Shield Promise Cal MediConnect Plan may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.

B11. How can you ask for an exception?

To ask for an exception, call Member Services. Member services will work with you and your provider to help you ask for an exception. You can also read Chapter 9, of the *Member Handbook* to learn more about exceptions.

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

First, we must get a statement from your prescriber supporting your request for an exception. After we get the statement, we will give you a decision on your exception request within 72 hours.

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



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

B13. What are generic drugs?

Generic drugs are made up of the same ingredients as brand name drugs. They usually cost less than the brand name drug and their names are less commonly known. Generic drugs are approved by the Food and Drug Administration (FDA).

Blue Shield Promise Cal MediConnect Plan covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for “over-the-counter”. Blue Shield Promise Cal MediConnect Plan covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Blue Shield Promise Cal MediConnect Plan Drug List to see what OTC drugs are covered.

B15. Does Blue Shield Promise Cal MediConnect Plan cover non-drug OTC products?

Blue Shield Promise Cal MediConnect Plan covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include Vortex Adult Mask or Microchamber.

You can read the Blue Shield Promise Cal MediConnect Plan Drug List to see what non-drug OTC products are covered.

B16. What is your copay?

You can read the Blue Shield Promise Cal MediConnect Plan Drug List to learn about the copay for each drug. Blue Shield Promise Cal MediConnect Plan members living in nursing homes or other long-term care facilities will have no copays. Some members getting long-term care in the community will also have no copays.

Copays are listed by tiers. Tiers are groups of drugs with the same copay. Co-pay amount will vary depending on your level of Medi-Cal eligibility.

Tier	Description	Co-payment	
		30-day supply	90-day supply
Tier 1	Preferred Generic drugs	\$0	\$0
Tier 2	Generic drugs	\$0 to \$3.60 copay	\$0 to \$3.60 copay
Tier 3	Brand name drugs	\$0 to \$8.95 copay	\$0 to \$8.95 copay
Tier 4	Non-Medicare Rx / Over-the-counter (OTC) drugs	\$0 copay	\$0 copay



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B17. What are drug tiers?

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are preferred generic drugs.
- Tier 2 drugs are generic drugs
- Tier 3 drugs are brand name drugs.
- Tier 4 drugs are Non-Medicare drugs and Over-the -Counter (OTC) drugs.

C. List of Covered Drugs

The following list of covered drugs gives you information about the drugs covered by Blue Shield Promise Cal MediConnect Plan. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 103 . The Index alphabetically lists all drugs covered by Blue Shield Promise Cal MediConnect Plan.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., ELIQUIS) and generic drugs are listed in lower-case italics (e.g., *simvastatin*).

The information in the "Necessary actions, restrictions, or limits on use" column tells you if Blue Shield Promise Cal MediConnect Plan has any rules for covering your drug.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

LEGEND

TIER	NAME
1	Preferred Generic
2	Generic
3	Brand
4	Non-Medicare Rx/OTC Drugs

SYMBOL	NAME	DESCRIPTION
LA	Limited Access	This prescription may be available only at certain pharmacies. For more information, call Blue Shield Promise Cal MediConnect Plan Member Services.
PA	Prior Authorization	You (or your physician) are required to get prior authorization from Blue Shield Promise Cal MediConnect Plan before you fill your prescription for this drug. Without prior approval Blue Shield Promise Cal MediConnect Plan may not cover this drug.
QL	Quantity Limit	Blue Shield Promise Cal MediConnect Plan limits the quantity to be covered within a specific time frame for this drug.
ST	Step Therapy	Before Blue Shield Promise Cal MediConnect Plan will provide coverage for this drug, you must first try another drug(s) on the formulary to treat your medical condition. This drug may only be covered if the other drug(s) does not work for you.



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

SYMBOL	NAME	DESCRIPTION
BvD	Part B vs Part D	This drug may be eligible for payment under Medicare Part B or Part D. You (or your physician) are required to get prior authorization from Blue Shield Promise Cal MediConnect Plan to determine that this drug is covered under Medicare Part D before you fill your prescription for this drug. Without prior approval, Blue Shield Promise Cal MediConnect Plan may not cover this drug.
MO	Maintenance Drug	This is a maintenance drug. Up to a 90-day supply of this drug is available through our network mail-order pharmacy, and through some of our network retail pharmacies. For more information call Blue Shield Promise Cal MediConnect Plan Member Services.
NPD	Non-Part D Drug	This drug is covered by Medi-Cal and is not a "Part D drug." If you have questions, call Blue Shield Promise Cal MediConnect Plan Member Services.

Note: The NPD next to a drug means the drug is not a "Part D drug." You will not be required to pay a copay for these drugs. These drugs also have different rules for appeals.

- An appeal is a formal way of asking us to review a decision we made about your coverage and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Medi-Cal.
- If you or your doctor disagrees with our decision, you can appeal. If you ever have a question, call Member Services at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. You can also read Chapter 9, of the *Member Handbook* to learn how to appeal a decision.

D. List of Drugs by Medical Condition

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



If you have questions, please call Blue Shield Promise Cal MediConnect Plan at 1-855-905-3825 (TTY: 711), 8:00 a.m. to 8:00 p.m. seven days a week. The call is free. **For more information**, visit www.blueshieldca.com/promise/calmediconnect.

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ANALGESICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NONSTEROIDAL ANTI-INFLAMMATORY DRUGS		
<i>celecoxib (100 mg capsule, 200 mg capsule, 400 mg capsule, 50 mg capsule)</i>	Tier 2	MO
<i>diclofenac potassium 50 mg tablet</i>	Tier 2	
<i>diclofenac sodium (100 mg tab er 24h, 25 mg tablet dr, 50 mg tablet dr, 75 mg tablet dr)</i>	Tier 2	
<i>diflunisal 500 mg tablet</i>	Tier 2	
<i>etodolac (200 mg capsule, 300 mg capsule, 400 mg tab er 24h, 400 mg tablet, 500 mg tab er 24h, 500 mg tablet, 600 mg tab er 24h)</i>	Tier 2	MO
<i>flurbiprofen (100 mg tablet, 50 mg tablet)</i>	Tier 2	
<i>ibuprofen (400 mg tablet, 600 mg tablet, 800 mg tablet)</i>	Tier 2	MO
<i>indomethacin (25 mg capsule, 50 mg capsule, 75 mg capsule er)</i>	Tier 2	PA
<i>ketoprofen (50 mg capsule, 75 mg capsule)</i>	Tier 2	
<i>ketorolac tromethamine 10 mg tablet</i>	Tier 2	PA, QL (20 PER 30 DAYS)
<i>meclofenamate sodium (100 mg capsule, 50 mg capsule)</i>	Tier 2	
<i>meloxicam (15 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
<i>nabumetone (500 mg tablet, 750 mg tablet)</i>	Tier 2	
<i>naproxen (250 mg tablet, 375 mg tablet, 375 mg tablet dr, 500 mg tablet, 500 mg tablet dr)</i>	Tier 2	MO
<i>piroxicam (10 mg capsule, 20 mg capsule)</i>	Tier 2	
<i>sulindac (150 mg tablet, 200 mg tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANALGESICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OPIOID ANALGESICS, LONG-ACTING		
<i>fentanyl (100 mcg/hr patch td72, 12 mcg/hr patch td72, 25 mcg/hr patch td72, 50mcg/hr patch td72, 75mcg/hr patch td72)</i>	Tier 2	ST, QL (10 PER 30 DAYS OVER TIME)
<i>methadone hcl (10 mg tablet, 5 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>methadone hcl 10 mg/5 ml solution</i>	Tier 2	QL (600 PER 30 DAYS)
<i>methadone hcl 5 mg/5 ml solution</i>	Tier 2	QL (1200 PER 30 DAYS)
<i>morphine sulfate (15 mg tablet er, 30 mg tablet er)</i>	Tier 2	QL (90 PER 30 DAYS)
<i>morphine sulfate 100 mg tablet er</i>	Tier 2	QL (30 PER 30 DAYS)
<i>morphine sulfate 60 mg tablet er</i>	Tier 2	QL (60 PER 30 DAYS)
<i>oxycodone hcl (10 mg tab er 12h, 15 mg tab er 12h, 20 mg tab er 12h, 30 mg tab er 12h, 40 mg tab er 12h)</i>	Tier 2	PA, QL (60 PER 30 DAYS)
OXYCONTIN (ER 15 MG TABLET, ER 30 MG TABLET)	Tier 3	PA, QL (60 PER 30 DAYS)
OPIOID ANALGESICS, SHORT-ACTING		
<i>acetaminophen with codeine 120-12mg/5 solution</i>	Tier 2	QL (1800 PER 30 DAYS)
<i>acetaminophen with codeine phosphate (300mg-15mg tablet, 300mg-30mg tablet, 300mg-60mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>butalbit/acetamin/caff/codeine 50-325-30 capsule</i>	Tier 2	PA, QL (180 PER 30 DAYS)
<i>codeine sulfate (15 mg tablet, 30 mg tablet, 60 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>fentanyl citrate (600 mcg lozenge hd, 800 mcg lozenge hd)</i>	Tier 2	PA, QL (30 PER 30 DAYS)
<i>fentanyl citrate 200 mcg lozenge hd</i>	Tier 2	PA, QL (120 PER 30 DAYS)
<i>fentanyl citrate 400 mcg lozenge hd</i>	Tier 2	PA, QL (60 PER 30 DAYS)
<i>hydrocodone bitartrate/acetaminophen (10mg-325mg tablet, 2.5-325 mg tablet, 5 mg-325mg tablet, 7.5-325 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANALGESICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>hydrocodone bitartrate/acetaminophen (2.5-108/5 solution, 5-217mg/10 solution, 7.5-325/15 solution)</i>	Tier 2	QL (1800 PER 30 DAYS)
<i>hydrocodone/ibuprofen (10mg-200mg tablet, 5mg-200mg tablet, 7.5-200 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>hydromorphone hcl (2 mg tablet, 4 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>hydromorphone hcl 8 mg tablet</i>	Tier 2	QL (90 PER 30 DAYS)
<i>hydromorphone hcl/pf (10 mg/ml ampul, 10 mg/ml vial)</i>	Tier 2	
LAZANDA (100 MCG NASAL SPRAY, 300 MCG NASAL SPRAY)	Tier 3	PA, QL (75 PER 30 DAYS)
<i>meperidine hcl (100 mg tablet, 50 mg tablet)</i>	Tier 2	PA, QL (120 PER 30 DAYS)
<i>meperidine hcl 50 mg/5 ml solution</i>	Tier 2	PA, QL (600 PER 30 DAYS)
<i>morphine sulfate (15 mg tablet, 30 mg tablet)</i>	Tier 3	QL (120 PER 30 DAYS)
<i>morphine sulfate 10 mg/5 ml solution</i>	Tier 2	QL (1800 PER 30 DAYS)
<i>morphine sulfate 100 mg/5ml solution</i>	Tier 2	QL (180 PER 30 DAYS)
<i>morphine sulfate 20 mg/5 ml solution</i>	Tier 2	QL (900 PER 30 DAYS)
<i>oxycodone hcl (10 mg tablet, 10mg/0.5ml syringe, 15 mg tablet, 20 mg tablet, 20 mg/ml oral conc, 5 mg capsule, 5 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>oxycodone hcl 30 mg tablet</i>	Tier 2	QL (60 PER 30 DAYS)
<i>oxycodone hcl 5 mg/5 ml solution</i>	Tier 2	QL (250 PER 30 DAYS)
<i>oxycodone hcl/acetaminophen (10mg-325mg tablet, 5 mg-325mg tablet, 7.5-325 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>oxycodone hcl/acetaminophen 5-325/5 ml solution</i>	Tier 2	QL (600 PER 30 DAYS)
<i>oxycodone hcl/aspirin 4.8355-325 tablet</i>	Tier 2	QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANALGESICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tramadol hcl 50 mg tablet</i>	Tier 2	QL (240 PER 30 DAYS)
<i>tramadol hcl/acetaminophen 37.5-325mg tablet</i>	Tier 2	QL (240 PER 30 DAYS)

ANESTHETICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LOCAL ANESTHETICS		
<i>lidocaine 5 % adh. patch</i>	Tier 2	PA, QL (90 PER 30 DAYS OVER TIME)
<i>lidocaine 5 % oint. (g)</i>	Tier 2	QL (50 PER 30 DAYS OVER TIME)
<i>lidocaine hcl (2 % jel/pf app, 2 % jelly(ml), 2 % solution, 4 % solution, 40 mg/ml solution)</i>	Tier 2	
<i>lidocaine/prilocaine (2.5 %-2.5% cream (g), 2.5 %-2.5% kit)</i>	Tier 2	QL (30 PER 30 DAYS OVER TIME)
NAYZILAM 5 MG NASAL SPRAY	Tier 3	QL (10 PER 30 DAYS)

ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALCOHOL DETERRENTS/ANTI-CRAVING		
<i>acamprosate calcium 333 mg tablet dr</i>	Tier 2	MO
<i>disulfiram (250 mg tablet, 500 mg tablet)</i>	Tier 2	MO
<i>naltrexone hcl 50 mg tablet</i>	Tier 2	
VIVITROL 380 MG VIAL + DILUENT	Tier 3	BvD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT AGENTS

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
OPIOID DEPENDENCE TREATMENTS		
<i>buprenorphine hcl 2 mg tab sub</i>	Tier 2	QL (12 PER 1 DAYS)
<i>buprenorphine hcl 8 mg tab sub</i>	Tier 2	QL (3 PER 1 DAYS)
<i>buprenorphine hcl/naloxone hcl (2 mg-0.5mg film, 4mg-1 mg film)</i>	Tier 2	QL (5 PER 1 DAYS), MO
<i>buprenorphine hcl/naloxone hcl (8 mg-2 mg film, 8 mg-2 mg tab sub)</i>	Tier 2	QL (3 PER 1 DAYS), MO
<i>buprenorphine hcl/naloxone hcl 12 mg-3 mg film</i>	Tier 2	QL (2 PER 1 DAYS), MO
<i>buprenorphine hcl/naloxone hcl 2 mg-0.5mg tab sub</i>	Tier 2	QL (12 PER 1 DAYS), MO
OPIOID REVERSAL AGENTS		
<i>naloxone hcl (0.4 mg/ml cartridge, 0.4 mg/ml vial, 1 mg/ml syringe)</i>	Tier 2	
NARCAN 4 MG NASAL SPRAY	Tier 3	QL (2 PER 1 DAYS)
SMOKING CESSATION AGENTS		
<i>bupropion hcl 150 mg tab er 12h</i>	Tier 2	
CHANTIX (0.5 MG TABLET, 1 MG CONT MONTH BOX, 1 MG TABLET, STARTING MONTH BOX)	Tier 3	
NICOTROL CARTRIDGE INHALER	Tier 3	
NICOTROL NS 10 MG/ML SPRAY	Tier 3	

ANTIBACTERIALS

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
AMINOGLYCOSIDES		
<i>amikacin sulfate 500 mg/2ml vial</i>	Tier 2	
<i>gentamicin sulfate (0.3 % drops, 0.3 % oint. (g), 40 mg/ml vial)</i>	Tier 2	
<i>neomycin sulfate 500 mg tablet</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>paromomycin sulfate 250 mg capsule</i>	Tier 2	
<i>streptomycin sulfate 1 g vial</i>	Tier 2	
<i>tobramycin 0.3 % drops</i>	Tier 2	
<i>tobramycin sulfate (1.2 g vial, 40 mg/ml vial)</i>	Tier 2	
ANTIBACTERIALS, OTHER		
<i>clindamycin hcl (150 mg capsule, 300 mg capsule)</i>	Tier 2	
<i>clindamycin phosphate (1 % gel (gram), 1 % lotion, 1 % med. swab, 1 % solution, 150 mg/ml vial, 2 % cream/appl, 300 mg/2ml vial port)</i>	Tier 2	
<i>colistin (colistimethate na) 150 mg vial</i>	Tier 2	PA
<i>daptomycin 500 mg vial</i>	Tier 2	PA
<i>erythromycin/benzoyl peroxide 3 %-5 % gel (gram)</i>	Tier 2	
<i>linezolid (100 mg/5ml susp recon, 600 mg tablet)</i>	Tier 2	PA
<i>linezolid in dextrose 5% 600mg/300 piggyback</i>	Tier 2	PA
<i>linezolid-0.9% sodium chloride 600mg/300 piggyback</i>	Tier 2	PA
<i>methenamine hippurate 1 g tablet</i>	Tier 2	
METRO IV 500 MG/100 ML	Tier 2	
<i>metronidazole (0.75 % gel w/appl, 250 mg tablet, 500 mg tablet)</i>	Tier 2	
<i>metronidazole/sodium chloride 500mg/0.1l piggyback</i>	Tier 2	
<i>mupirocin 2 % oint. (g)</i>	Tier 2	QL (22 PER 30 DAYS OVER TIME)
<i>nitrofurantoin macrocrystal (100 mg capsule, 25 mg capsule, 50 mg capsule)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nitrofurantoin monohyd/m-cryst 100 mg capsule</i>	Tier 2	
SIVEXTRO 200 MG TABLET	Tier 3	PA
SIVEXTRO 200 MG VIAL	Tier 3	BvD
<i>tigecycline 50 mg vial</i>	Tier 2	
<i>trimethoprim 100 mg tablet</i>	Tier 2	
<i>vancomycin hcl (1 g vial, 1 g vial port, 10 g vial, 125 mg capsule, 250 mg capsule)</i>	Tier 2	
XIFAXAN 200 MG TABLET	Tier 3	PA
XIFAXAN 550 MG TABLET	Tier 3	PA, MO
BETA-LACTAM, CEPHALOSPORINS		
<i>cefaclor (125 mg/5ml susp recon, 250 mg capsule, 250 mg/5ml susp recon, 375 mg/5ml susp recon, 500 mg capsule, 500 mg tab er 12h)</i>	Tier 2	
<i>cefadroxil (1 g tablet, 250 mg/5ml susp recon, 500 mg capsule, 500 mg/5ml susp recon)</i>	Tier 2	
<i>cefazolin sodium (1 g vial, 1 g vial port, 10 g vial, 100 g bulkbaginj, 20 g vial, 300g bulkbaginj, 500 mg vial)</i>	Tier 2	
<i>cefazolin sodium/dextrose, iso-osmotic (1 g/50 ml froz.piggy, 1 g/50 ml piggyback)</i>	Tier 2	
<i>cefdinir 300 mg capsule</i>	Tier 2	
<i>cefepime hcl (1 g vial, 2 g vial)</i>	Tier 2	
<i>cefepime hcl in dextrose 5 % in water (in dextrose 5 % 1 g/50 ml piggyback, in dextrose 5 % 2 g/50 ml piggyback)</i>	Tier 2	
<i>cefepime hcl in iso-osmotic dextrose (in iso-osm dextrose 1 g/50 ml froz.piggy, in iso-osm dextrose 2 g/100 ml froz.piggy)</i>	Tier 2	
<i>cefotaxime sodium (1 g vial, 2 g vial, 500 mg vial)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cefoxitin sodium 1 g vial</i>	Tier 2	BvD
<i>cefoxitin sodium/dextrose, iso 1 g/50 ml piggyback</i>	Tier 2	BvD
<i>cefpodoxime proxetil (100 mg tablet, 100 mg/5ml susp recon, 200 mg tablet, 50 mg/5 ml susp recon)</i>	Tier 2	
<i>cefprozil (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tablet)</i>	Tier 2	
<i>ceftazidime (1 g vial, 1 g vial port, 2 g vial, 2 g vial port, 6 g vial)</i>	Tier 2	
<i>ceftazidime in dextrose 5% and water (in dextrose 5% water 1 g/50 ml piggyback, in dextrose 5% water 2 g/50 ml piggyback)</i>	Tier 2	
<i>ceftriaxone sodium (1 g vial, 1 g vial port, 10 g vial, 100 g bulk bag inj, 2 g vial, 2 g vial port, 250 mg vial, 500 mg vial)</i>	Tier 2	
<i>ceftriaxone sodium in iso-osmotic dextrose (in is-osm dextrose 1 g/50 ml froz. piggy, in is-osm dextrose 1 g/50 ml piggyback, in is-osm dextrose 2 g/50 ml froz. piggy, in is-osm dextrose 2 g/50 ml piggyback)</i>	Tier 2	
<i>cefuroxime axetil (250 mg tablet, 500 mg tablet)</i>	Tier 2	
<i>cefuroxime sodium (1.5 g vial, 7.5 g vial, 750 mg vial)</i>	Tier 2	
<i>cephalexin (125 mg/5ml susp recon, 250 mg capsule, 250 mg tablet, 250 mg/5ml susp recon, 500 mg capsule, 500 mg tablet, 750 mg capsule)</i>	Tier 2	
TEFLARO (400 MG VIAL, 600 MG VIAL)	Tier 3	
BETA-LACTAM, OTHER		
<i>aztreonam 1 g vial</i>	Tier 2	
<i>ertapenem sodium 1 g vial</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>imipenem/cilastatin sodium (250 mg vial, 500 mg vial)</i>	Tier 2	
<i>meropenem (1 g vial, 500 mg vial)</i>	Tier 2	
<i>meropenem in 0.9 % sodium chloride (1 g/50 ml piggyback, 500mg/50ml piggyback)</i>	Tier 2	
BETA-LACTAM, PENICILLINS		
<i>amoxicillin (125 mg tab chew, 125 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg capsule, 250 mg tab chew, 250 mg/5ml susp recon, 400 mg/5ml susp recon, 500 mg capsule, 500 mg tablet, 875 mg tablet)</i>	Tier 2	
<i>amoxicillin/potassium clavulanate (200-28.5/5 susp recon, 200-28.5mg tab chew, 250-125 mg tablet, 250-62.5/5 susp recon, 400-57mg tab chew, 400-57mg/5 susp recon, 500-125 mg tablet, 600-42.9/5 susp recon, 875-125 mg tablet)</i>	Tier 2	
<i>ampicillin sodium (1 g vial, 1 g vial port, 10 g vial, 125 mg vial)</i>	Tier 2	
<i>ampicillin sodium/sulbactam sodium (1.5 g vial, 1.5 g vial port, 15 g vial, 3 g vial, 3 g vial port)</i>	Tier 2	
<i>ampicillin trihydrate 500 mg capsule</i>	Tier 2	
BICILLIN C-R (1.2 MILLION UNIT, 900-300 SYRINGE)	Tier 3	
BICILLIN L-A (1,200,000 UNITS, 2,400,000 UNITS, 600,000 UNIT/ML)	Tier 3	
<i>dicloxacillin sodium (250 mg capsule, 500 mg capsule)</i>	Tier 2	
<i>nafcillin in dextrose, iso-osm 1 g/50 ml froz.piggy</i>	Tier 2	
<i>nafcillin sodium (1 g vial, 1 g vial port)</i>	Tier 2	
<i>penicillin g potassium (g potassium 20mm unit vial, g potassium 5mm unit vial)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>penicillin g sodium 5mm unit vial</i>	Tier 2	
<i>penicillin v potassium (125 mg/5ml soln recon, 250 mg tablet, 250 mg/5ml soln recon, 500 mg tablet)</i>	Tier 2	
<i>piperacillin sodium/tazobactam sodium (13.5 g vial, 2.25 g vial, 2.25 g vial port, 3.375 g vial, 3.375 g vial port, 4.5 g vial, 4.5 g vial port, 40.5 g vial)</i>	Tier 2	
MACROLIDES		
<i>azithromycin (1 g packet, 100 mg/5ml susp recon, 200 mg/5ml susp recon, 250 mg tablet, 500 mg tablet, 500 mg vial, 500 mg vial port)</i>	Tier 2	
<i>azithromycin 600 mg tablet</i>	Tier 2	QL (8 PER 30 DAYS OVER TIME)
<i>clarithromycin (125 mg/5ml susp recon, 250 mg tablet, 250 mg/5ml susp recon, 500 mg tab er 24h, 500 mg tablet)</i>	Tier 2	
E.E.S. 400 FILMTAB	Tier 2	
ERYTHROCIN 250 MG FILMTAB	Tier 2	
ERYTHROCIN LACTOBIONATE (500 MG ADDVAN VIAL, LACT 500 MG VIAL)	Tier 3	
<i>erythromycin base (250 mg capsule dr, 250 mg tablet, 5 mg/gram oint. (g), 500 mg tablet)</i>	Tier 2	
<i>erythromycin base in ethanol (in ethanol 2 % gel (gram), in ethanol 2 % med. swab, in ethanol 2 % solution)</i>	Tier 2	
<i>erythromycin ethylsuccinate 400 mg tablet</i>	Tier 2	
ZMAX 2 G/60 ML ORAL SUSPENSION	Tier 3	QL (60 PER 30 DAYS)
QUINOLONES		
<i>ciprofloxacin 500 mg/5ml sus mc rec</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ciprofloxacin hcl (0.2 % droperette, 0.3 % drops, 100 mg tablet, 250 mg tablet, 500 mg tablet, 750 mg tablet)</i>	Tier 2	
<i>ciprofloxacin in 5 % dextrose 200mg/0.1l piggyback</i>	Tier 2	
<i>ciprofloxacin lactate 400mg/40ml vial</i>	Tier 2	
<i>ciprofloxacin/ciprofloxacin hcl (1000 mg tbmp 24hr, 500 mg tbmp 24hr)</i>	Tier 2	
<i>levofloxacin (25 mg/ml vial, 250 mg tablet, 250mg/10ml solution, 500 mg tablet, 500mg/20ml solution, 750 mg tablet)</i>	Tier 2	
<i>levofloxacin/dextrose 5 % in water (in dextrose 5 % 500mg/0.1l piggyback, in dextrose 5 % 750mg/.15l piggyback)</i>	Tier 2	
<i>moxifloxacin hcl (0.5 % drops, 400 mg tablet)</i>	Tier 2	
<i>ofloxacin (0.3 % drops, 300 mg tablet, 400 mg tablet)</i>	Tier 2	
SULFONAMIDES		
BLEPH-10 10% EYE DROPS	Tier 2	
<i>silver sulfadiazine 1 % cream (g)</i>	Tier 2	
SSD 1% CREAM	Tier 2	
<i>sulfacetamide sodium (10 % drops, 10 % oint. (g))</i>	Tier 2	
<i>sulfadiazine 500 mg tablet</i>	Tier 2	
<i>sulfamethoxazole/trimethoprim (200-40mg/5 oral susp, 400mg-80mg tablet, 800-160 mg tablet, 800-160/20 oral susp)</i>	Tier 2	
TETRACYCLINES		
<i>demeclocycline hcl (150 mg tablet, 300 mg tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>doxycycline hyclate (100 mg capsule, 100 mg tablet, 150 mg tablet, 20 mg tablet, 50 mg capsule, 75 mg tablet)</i>	Tier 2	
<i>doxycycline hyclate 100 mg vial</i>	Tier 2	BvD
<i>doxycycline monohydrate (100 mg capsule, 100 mg tablet, 50 mg capsule, 50 mg tablet)</i>	Tier 2	
<i>minocycline hcl (100 mg capsule, 100 mg tablet, 50 mg capsule, 50 mg tablet, 75 mg capsule, 75 mg tablet)</i>	Tier 2	
<i>tetracycline hcl (250 mg capsule, 500 mg capsule)</i>	Tier 2	

ANTICONVULSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTICONVULSANTS, OTHER		
BRIVIACT (10 MG TABLET, 10 MG/ML ORAL SOLN, 100 MG TABLET, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET)	Tier 3	PA, MO
BRIVIACT 50 MG/5 ML VIAL	Tier 3	PA
EPIDIOLEX 100 MG/ML SOLUTION	Tier 3	PA, LA
<i>levetiracetam (100 mg/ml solution, 1000 mg tablet, 250 mg tablet, 500 mg tablet, 500 mg/5ml solution, 750 mg tablet)</i>	Tier 2	MO
<i>levetiracetam 500 mg tab er 24h</i>	Tier 2	QL (180 PER 30 DAYS), MO
<i>levetiracetam 500 mg/5ml vial</i>	Tier 2	PA
<i>levetiracetam 750 mg tab er 24h</i>	Tier 2	QL (120 PER 30 DAYS), MO
SPRITAM (1,000 MG TABLET, 250 MG TABLET, 500 MG TABLET, 750 MG TABLET)	Tier 3	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTICONVULSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CALCIUM CHANNEL MODIFYING AGENTS		
CELONTIN 300 MG KAPSEAL	Tier 3	MO
<i>ethosuximide (250 mg capsule, 250 mg/5ml solution)</i>	Tier 2	MO
<i>zonisamide (100 mg capsule, 25 mg capsule, 50 mg capsule)</i>	Tier 2	MO
GAMMA-AMINOBUTYRIC ACID (GABA) AUGMENTING AGENTS		
<i>clobazam (10 mg tablet, 2.5 mg/ml oral susp, 20 mg tablet)</i>	Tier 2	PA, MO
DIASTAT 2.5 MG PEDI SYSTEM	Tier 3	QL (5 PER 30 DAYS)
DIASTAT ACUDIAL (12.5-15-20 MG, 5-7.5-10 MG KT)	Tier 3	
<i>diazepam (12.5-15-20 kit, 5-7.5-10mg kit)</i>	Tier 2	
<i>diazepam 2.5 mg kit</i>	Tier 2	QL (5 PER 30 DAYS)
<i>divalproex sodium (125 mg cap dr spr, 125 mg tablet dr, 250 mg tab er 24h, 250 mg tablet dr, 500 mg tab er 24h, 500 mg tablet dr)</i>	Tier 2	MO
<i>gabapentin (100 mg capsule, 250 mg/5ml solution, 300 mg capsule, 300 mg/6ml solution, 400 mg capsule, 600 mg tablet, 800 mg tablet)</i>	Tier 2	MO
GABITRIL (12 MG TABLET, 16 MG TABLET)	Tier 3	MO
<i>phenobarbital (100 mg tablet, 15 mg tablet, 16.2 mg tablet, 20 mg/5 ml elixir, 30 mg tablet, 32.4 mg tablet, 60 mg tablet, 64.8 mg tablet, 97.2mg tablet)</i>	Tier 2	PA, MO
<i>primidone (250 mg tablet, 50 mg tablet)</i>	Tier 2	MO
SYMPAZAN (10 MG FILM, 20 MG FILM)	Tier 3	PA, QL (2 PER 1 DAYS)
SYMPAZAN 5 MG FILM	Tier 3	PA, QL (2 PER 1 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTICONVULSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tiagabine hcl (12 mg tablet, 16 mg tablet, 2 mg tablet, 4 mg tablet)</i>	Tier 2	MO
<i>valproic acid (as sodium salt) (valproate sodium) (250 mg/5ml solution, 500mg/10ml solution)</i>	Tier 2	MO
<i>valproic acid (as sodium salt) 500 mg/5ml vial</i>	Tier 2	BvD
<i>valproic acid 250 mg capsule</i>	Tier 2	MO
<i>vigabatrin 500 mg powd pack</i>	Tier 2	PA, LA
<i>vigabatrin 500 mg tablet</i>	Tier 2	PA
GLUTAMATE REDUCING AGENTS		
<i>felbamate (400 mg tablet, 600 mg tablet, 600 mg/5ml oral susp)</i>	Tier 2	PA, MO
FYCOMPA (10 MG TABLET, 12 MG TABLET, 2 MG TABLET, 4 MG TABLET, 8 MG TABLET)	Tier 3	PA, QL (30 PER 30 DAYS), MO
FYCOMPA 0.5 MG/ML ORAL SUSP	Tier 3	PA, QL (720 PER 30 DAYS), MO
FYCOMPA 6 MG TABLET	Tier 3	PA, QL (60 PER 30 DAYS), MO
<i>lamotrigine (100 mg tablet, 150 mg tablet, 200 mg tablet, 25 mg tablet, 25 mg tb chw dsp, 5 mg tb chw dsp)</i>	Tier 2	MO
<i>lamotrigine 25mg (35) tab ds pk</i>	Tier 2	
<i>topiramate (100 mg cap spr 24, 150 mg cap spr 24, 200 mg cap spr 24, 25 mg cap spr 24, 50 mg cap spr 24)</i>	Tier 2	PA, MO
<i>topiramate (100 mg tablet, 15 mg cap sprink, 200 mg tablet, 25 mg cap sprink, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
SODIUM CHANNEL AGENTS		
APTIOM (200 MG TABLET, 400 MG TABLET)	Tier 3	PA, QL (30 PER 30 DAYS)
APTIOM 600 MG TABLET	Tier 3	PA, QL (60 PER 30 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTICONVULSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
APTIOM 800 MG TABLET	Tier 3	PA
BANZEL (200 MG TABLET, 40 MG/ML SUSPENSION)	Tier 3	PA, MO
BANZEL 400 MG TABLET	Tier 3	PA
<i>carbamazepine (100 mg cpmp 12hr, 100 mg tab chew, 100 mg tab er 12h, 100 mg/5ml oral susp, 200 mg cpmp 12hr, 200 mg tab er 12h, 200 mg tablet, 300 mg cpmp 12hr, 400 mg tab er 12h)</i>	Tier 2	MO
DILANTIN (100 MG CAPSULE, 30 MG CAPSULE, 50 MG INFATAB)	Tier 3	MO
DILANTIN 125 MG/5 ML SUSP	Tier 3	MO
<i>fosphenytoin sodium (100mg pe/2 vial, 500 pe/10 vial)</i>	Tier 2	
<i>oxcarbazepine (150 mg tablet, 300 mg tablet, 300 mg/5ml oral susp, 600 mg tablet)</i>	Tier 2	MO
OXTELLAR XR (150 MG TABLET, 300 MG TABLET, 600 MG TABLET)	Tier 3	PA, MO
PEGANONE 250 MG TABLET	Tier 3	MO
PHENYTEK (200 MG CAPSULE, 300 MG CAPSULE)	Tier 3	MO
<i>phenytoin (100 mg/4ml oral susp, 125 mg/5ml oral susp, 50 mg tab chew)</i>	Tier 2	MO
<i>phenytoin sodium (50 mg/ml ampul, 50 mg/ml syringe, 50 mg/ml vial)</i>	Tier 2	BvD
<i>phenytoin sodium extended (100 mg capsule, 200 mg capsule, 300 mg capsule)</i>	Tier 2	MO
TEGRETOL XR 100 MG TABLET	Tier 3	MO
VIMPAT (10 MG/ML SOLUTION, 100 MG TABLET, 150 MG TABLET, 200 MG TABLET, 50 MG TABLET)	Tier 3	PA, MO
VIMPAT 200 MG/20 ML VIAL	Tier 3	PA, QL (200 PER 5 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIDEMENTIA AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIDEMENTIA AGENTS, OTHER		
<i>ergoloid mesylates 1 mg tablet</i>	Tier 2	PA, MO
CHOLINESTERASE INHIBITORS		
<i>donepezil hcl (10 mg tab rapdis, 10 mg tablet, 5 mg tab rapdis, 5 mg tablet)</i>	Tier 2	MO
<i>rivastigmine (13.3mg/24h patch td24, 4.6mg/24hr patch td24, 9.5mg/24hr patch td24)</i>	Tier 2	MO
<i>rivastigmine tartrate (1.5 mg capsule, 3 mg capsule, 4.5 mg capsule, 6 mg capsule)</i>	Tier 2	MO
N-METHYL-D-ASPARTATE (NMDA) RECEPTOR ANTAGONIST		
<i>memantine hcl (10 mg tablet, 2 mg/ml solution, 5 mg tablet)</i>	Tier 2	MO
<i>memantine hcl (14 mg cap spr 24, 21 mg cap spr 24, 28 mg cap spr 24, 7 mg cap spr 24)</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>memantine hcl 5 mg-10 mg tab ds pk</i>	Tier 2	

ANTIDEPRESSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIDEPRESSANTS, OTHER		
<i>amitriptyline hcl/chlordiazepoxide (12.5mg-5mg tablet, 25 mg-10mg tablet)</i>	Tier 2	MO
<i>bupropion hcl (100 mg tab sr 12h, 100 mg tablet, 150 mg tab sr 12h, 200 mg tab sr 12h, 300 mg tab er 24h, 75 mg tablet)</i>	Tier 2	MO
<i>bupropion hcl 150 mg tab er 24h</i>	Tier 2	QL (30 PER 30 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIDEPRESSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>mirtazapine (15 mg tab rapdis, 15 mg tablet, 30 mg tab rapdis, 30 mg tablet, 45 mg tab rapdis, 45 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
<i>perphenazine/amitriptyline hcl (2 mg-10 mg tablet, 2 mg-25 mg tablet, 4 mg-25 mg tablet, 4 mg-50 mg tablet, 4mg-10mg tablet)</i>	Tier 2	PA, MO
SPRAVATO (56 MG DOSE PACK, 84 MG DOSE PACK)	Tier 3	PA
MONOAMINE OXIDASE INHIBITORS		
EMSAM (12 MG/24 HOURS PATCH, 6 MG/24 HOURS PATCH, 9 MG/24 HOURS PATCH)	Tier 3	PA
MARPLAN 10 MG TABLET	Tier 3	MO
<i>phenelzine sulfate 15 mg tablet</i>	Tier 2	MO
<i>tranylcypromine sulfate 10 mg tablet</i>	Tier 2	MO
SSRIS/SNRIS (SELECTIVE SEROTONIN REUPTAKE INHIBITOR/SEROTONIN AND NOREPINEPHRINE REUPTAKE INHIBITOR)		
<i>citalopram hydrobromide (10 mg tablet, 10 mg/5 ml solution, 20 mg tablet, 20 mg/10ml solution, 40 mg tablet)</i>	Tier 2	MO
<i>desvenlafaxine (100 mg tab er 24, 100 mg tab er 24h, 50 mg tab er 24, 50 mg tab er 24h)</i>	Tier 2	PA, MO
<i>desvenlafaxine fumarate (100 mg tab er 24, 50 mg tab er 24)</i>	Tier 2	PA, MO
<i>desvenlafaxine succinate (100 mg tab er 24h, 25 mg tab er 24h, 50 mg tab er 24h)</i>	Tier 2	PA, MO
<i>escitalopram oxalate (10 mg tablet, 20 mg tablet, 5 mg tablet, 5 mg/5 ml solution)</i>	Tier 2	MO
FETZIMA (ER 120 MG CAPSULE, ER 20 MG CAPSULE, ER 40 MG CAPSULE, ER 80 MG CAPSULE)	Tier 3	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIDEPRESSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FETZIMA 20-40 MG TITRATION PAK	Tier 3	PA
<i>fluoxetine hcl (10 mg capsule, 10 mg tablet, 20 mg capsule, 20 mg tablet, 20 mg/5 ml solution, 40 mg capsule, 90 mg capsule dr)</i>	Tier 2	MO
<i>fluvoxamine maleate (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>maprotiline hcl (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	Tier 2	MO
<i>nefazodone hcl (100 mg tablet, 150 mg tablet, 200 mg tablet, 250 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>paroxetine hcl (10 mg tablet, 20 mg tablet, 30 mg tablet, 40 mg tablet)</i>	Tier 2	MO
PAXIL 10 MG/5 ML SUSPENSION	Tier 3	MO
<i>sertraline hcl (100 mg tablet, 20 mg/ml oral conc, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>trazodone hcl (100 mg tablet, 150 mg tablet, 300 mg tablet, 50 mg tablet)</i>	Tier 2	MO
TRINTELLIX (10 MG TABLET, 20 MG TABLET, 5 MG TABLET)	Tier 3	PA, MO
<i>venlafaxine hcl (100 mg tablet, 150 mg cap er 24h, 25 mg tablet, 37.5 mg cap er 24h, 37.5 mg tablet, 50 mg tablet, 75 mg cap er 24h, 75 mg tablet)</i>	Tier 2	MO
VIIIBRYD (10 MG TABLET, 20 MG TABLET, 40 MG TABLET)	Tier 3	PA, MO
VIIIBRYD 10-20 MG STARTER PACK	Tier 3	PA
TRICYCLICS		
<i>amitriptyline hcl (10 mg tablet, 100 mg tablet, 150 mg tablet, 25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	Tier 2	PA, MO
<i>amoxapine (100 mg tablet, 150 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIDEPRESSANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clomipramine hcl (25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	Tier 2	PA, MO
<i>desipramine hcl (10 mg tablet, 100 mg tablet, 150 mg tablet, 25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	Tier 2	MO
<i>doxepin hcl (10 mg capsule, 10 mg/ml oral conc, 100 mg capsule, 150 mg capsule, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	Tier 2	PA, MO
<i>imipramine hcl (10 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	PA, MO
<i>imipramine pamoate (100 mg capsule, 125 mg capsule, 150 mg capsule, 75 mg capsule)</i>	Tier 2	PA, MO
<i>nortriptyline hcl (10 mg capsule, 10 mg/5 ml solution, 20 mg/10ml solution, 25 mg capsule, 50 mg capsule, 75 mg capsule)</i>	Tier 2	MO
<i>protriptyline hcl (10 mg tablet, 5 mg tablet)</i>	Tier 2	MO
SURMONTIL (100 MG CAPSULE, 25 MG CAPSULE, 50 MG CAPSULE)	Tier 3	PA, MO
<i>trimipramine maleate (100 mg capsule, 25 mg capsule, 50 mg capsule)</i>	Tier 2	PA, MO

ANTIEMETICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIEMETICS, OTHER		
<i>meclizine hcl (12.5 mg tablet, 25 mg tablet)</i>	Tier 2	
<i>metoclopramide hcl (10 mg tablet, 10 mg/10ml solution, 5 mg tablet, 5 mg/5 ml solution)</i>	Tier 2	
<i>perphenazine (16 mg tablet, 2 mg tablet, 4 mg tablet, 8 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIEMETICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>prochlorperazine 25 mg supp.rect</i>	Tier 2	
<i>prochlorperazine edisylate 5 mg/ml vial</i>	Tier 2	
<i>prochlorperazine maleate (10 mg tablet, 5 mg tablet)</i>	Tier 2	
<i>promethazine hcl (12.5 mg supp.rect, 25 mg supp.rect, 50 mg supp.rect, 50 mg tablet)</i>	Tier 2	PA
<i>scopolamine 1 mg/3 day patch td 3</i>	Tier 2	PA
EMETOGENIC THERAPY ADJUNCTS		
<i>aprepitant (125 mg capsule, 125mg-80mg cap ds pk, 40 mg capsule, 80 mg capsule)</i>	Tier 2	PA
<i>dronabinol (10 mg capsule, 2.5 mg capsule, 5 mg capsule)</i>	Tier 2	PA
EMEND 125 MG POWDER PACKET	Tier 3	PA
<i>granisetron hcl 1 mg tablet</i>	Tier 2	BvD
<i>ondansetron (4 mg tab rapdis, 8 mg tab rapdis)</i>	Tier 2	BvD
<i>ondansetron hcl (24 mg tablet, 4 mg tablet, 4 mg/5 ml solution, 8 mg tablet)</i>	Tier 2	BvD

ANTIFUNGALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIFUNGALS		
ABELCET 100 MG/20 ML VIAL	Tier 3	BvD
AMBISOME 50 MG VIAL	Tier 3	BvD
<i>amphotericin b 50 mg vial</i>	Tier 2	BvD
<i>caspofungin acetate (50 mg vial, 70 mg vial)</i>	Tier 2	PA
<i>ciclopirox 0.77 % gel (gram)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIFUNGALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ciclopirox 8 % solution</i>	Tier 2	PA
<i>ciclopirox olamine (0.77 % cream (g), 0.77 % suspension)</i>	Tier 2	
<i>clotrimazole (1 % cream (g), 1 % solution, 10 mg troche)</i>	Tier 2	
<i>econazole nitrate 1 % cream (g)</i>	Tier 2	
ERAXIS (WATER DILUENT) (100 MG VIAL, 50 MG VIAL)	Tier 3	
<i>fluconazole (10 mg/ml susp recon, 100 mg tablet, 150 mg tablet, 200 mg tablet, 40 mg/ml susp recon, 50 mg tablet)</i>	Tier 2	
<i>fluconazole in dextrose, iso-osmotic (in dextrose, iso-os 200mg/0.1l piggyback, in dextrose, iso-os 400mg/0.2l piggyback)</i>	Tier 2	
<i>fluconazole in sodium chloride, iso-osmotic (in nacl, iso-osm 200mg/0.1l pggybk btl, in nacl, iso-osm 200mg/0.1l piggyback, in nacl, iso-osm 400mg/0.2l pggybk btl, in nacl, iso-osm 400mg/0.2l piggyback)</i>	Tier 2	
<i>flucytosine (250 mg capsule, 500 mg capsule)</i>	Tier 2	
<i>griseofulvin ultramicrosize (125 mg tablet, 250 mg tablet)</i>	Tier 2	
<i>griseofulvin, microsize (125 mg/5ml oral susp, 500 mg tablet)</i>	Tier 2	
<i>itraconazole 100 mg capsule</i>	Tier 2	PA
<i>ketoconazole (2 % cream (g), 2 % shampoo, 200 mg tablet)</i>	Tier 2	
<i>miconazole nitrate 200 mg supp.vag</i>	Tier 2	
NATACYN EYE DROPS	Tier 3	PA
<i>nystatin (100000/g cream (g), 100000/g oint. (g), 100000/g powder, 100000/ml oral susp, 500k unit tablet)</i>	Tier 2	
<i>nystatin/triamcinolone acetone (cream (g), oint. (g))</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIFUNGALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>terbinafine hcl 250 mg tablet</i>	Tier 2	
<i>terconazole (0.4 % cream/appl, 0.8 % cream/appl, 80 mg supp.vag)</i>	Tier 2	
<i>voriconazole (200 mg tablet, 200 mg/5ml susp recon, 50 mg tablet)</i>	Tier 2	PA
<i>voriconazole 200 mg vial</i>	Tier 2	

ANTIGOUT AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIGOUT AGENTS		
<i>allopurinol (100 mg tablet, 300 mg tablet)</i>	Tier 2	MO
<i>colchicine 0.6 mg tablet</i>	Tier 2	QL (4 PER 1 DAYS), MO
COLCRYS 0.6 MG TABLET	Tier 3	QL (4 PER 1 DAYS), MO
<i>probenecid 500 mg tablet</i>	Tier 2	MO
<i>probenecid/colchicine 500-0.5 mg tablet</i>	Tier 2	MO

ANTIMIGRAINE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ERGOT ALKALOIDS		
<i>dihydroergotamine mesylate 0.5mg/spry spray/pump</i>	Tier 2	PA
<i>ergotamine tartrate/caffeine 1 mg-100mg tablet</i>	Tier 2	QL (40 PER 28 DAYS)
<i>ergotamine tartrate/caffeine 2-100mg supp.rect</i>	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIMIGRAINE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SEROTONIN (5-HT) 1B/1D RECEPTOR AGONISTS		
<i>rizatriptan benzoate (10 mg tab rapdis, 10 mg tablet, 5 mg tab rapdis, 5 mg tablet)</i>	Tier 2	QL (12 PER 30 DAYS)
<i>sumatriptan 20 mg spray</i>	Tier 2	QL (9 PER 30 DAYS)
<i>sumatriptan 5 mg spray</i>	Tier 2	QL (12 PER 30 DAYS)
<i>sumatriptan succinate (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	QL (9 PER 30 DAYS)
<i>sumatriptan succinate (4 mg/0.5ml cartridge, 4 mg/0.5ml pen injctr, 6 mg/0.5ml cartridge, 6 mg/0.5ml pen injctr)</i>	Tier 2	QL (4 PER 30 DAYS)

ANTIMYASTHENIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PARASYMPATHOMIMETICS		
<i>guanidine hcl 125 mg tablet</i>	Tier 2	
<i>pyridostigmine bromide 60 mg tablet</i>	Tier 2	MO

ANTIMYCOBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIMYCOBACTERIALS, OTHER		
<i>dapsone (100 mg tablet, 25 mg tablet)</i>	Tier 2	MO
<i>rifabutin 150 mg capsule</i>	Tier 2	
ANTITUBERCULARS		
<i>ethambutol hcl (100 mg tablet, 400 mg tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIMYCOBACTERIALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>isoniazid (100 mg tablet, 300 mg tablet, 50 mg/5 ml solution)</i>	Tier 2	
PASER GRANULES 4 GM PACKET	Tier 3	
PRIFTIN 150 MG TABLET	Tier 3	
<i>pyrazinamide 500 mg tablet</i>	Tier 2	
<i>rifampin (150 mg capsule, 300 mg capsule, 600 mg vial)</i>	Tier 2	
RIFATER TABLET	Tier 3	
TRECTOR 250 MG TABLET	Tier 3	

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALKYLATING AGENTS		
BENDEKA 100 MG/4 ML VIAL	Tier 3	PA
<i>busulfan 60 mg/10ml vial</i>	Tier 2	BvD
<i>cyclophosphamide (25 mg capsule, 50 mg capsule)</i>	Tier 3	BvD
GLEOSTINE (10 MG CAPSULE, 100 MG CAPSULE, 40 MG CAPSULE, 5 MG CAPSULE)	Tier 3	PA
HEXALEN 50 MG CAPSULE	Tier 3	PA
LEUKERAN 2 MG TABLET	Tier 3	
MATULANE 50 MG CAPSULE	Tier 3	LA
<i>melphalan hcl 50 mg vial</i>	Tier 2	BvD
TEMODAR 100 MG VIAL	Tier 3	BvD
TREANDA (100 MG VIAL, 25 MG VIAL)	Tier 3	PA
VALCHLOR 0.016% GEL	Tier 3	PA, LA
YONDELIS 1 MG VIAL	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIANDROGENS		
<i>abiraterone acetate 250 mg tablet</i>	Tier 2	PA
<i>bicalutamide 50 mg tablet</i>	Tier 2	MO
ERLEADA 60 MG TABLET	Tier 3	PA, LA
<i>flutamide 125 mg capsule</i>	Tier 2	MO
<i>nilutamide 150 mg tablet</i>	Tier 2	PA, MO
NUBEQA 300 MG TABLET	Tier 3	PA, QL (4 PER 1 DAYS)
XTANDI 40 MG CAPSULE	Tier 3	PA, LA
YONSA 125 MG TABLET	Tier 3	PA, LA
ZYTIGA 500 MG TABLET	Tier 3	PA, LA
ANTIANGIOGENIC AGENTS		
POMALYST (1 MG CAPSULE, 2 MG CAPSULE, 3 MG CAPSULE, 4 MG CAPSULE)	Tier 3	PA, LA
REVLIMID (10 MG CAPSULE, 15 MG CAPSULE, 2.5 MG CAPSULE, 20 MG CAPSULE, 25 MG CAPSULE, 5 MG CAPSULE)	Tier 3	PA, LA
THALOMID (100 MG CAPSULE, 150 MG CAPSULE, 200 MG CAPSULE, 50 MG CAPSULE)	Tier 3	PA
ANTIESTROGENS/MODIFIERS		
EMCYT 140 MG CAPSULE	Tier 3	
<i>fulvestrant 250 mg/5ml syringe</i>	Tier 2	
SOLTAMOX (10 MG/5 ML SOLN, 20 MG/10 ML SOLN)	Tier 3	PA, MO
<i>tamoxifen citrate (10 mg tablet, 20 mg tablet)</i>	Tier 2	MO
<i>toremifene citrate 60 mg tablet</i>	Tier 2	
ANTIMETABOLITES		
ALIMTA (100 MG VIAL, 500 MG VIAL)	Tier 3	BvD
<i>clofarabine 20 mg/20ml vial</i>	Tier 2	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DROXIA (200 MG CAPSULE, 300 MG CAPSULE, 400 MG CAPSULE)	Tier 3	MO
ELITEK 1.5 MG VIAL	Tier 3	BvD
<i>fluorouracil (1 g/20 ml vial, 2.5 g/50ml vial, 5 g/100 ml vial, 500mg/10ml vial)</i>	Tier 2	BvD
<i>fluorouracil (2 % solution, 5 % cream (g), 5 % solution)</i>	Tier 2	
FOLOTYN (20 MG/ML VIAL, 40 MG/2 ML VIAL)	Tier 3	BvD
<i>gemcitabine hcl (1 g vial, 1 g/26.3ml vial, 100 mg/ml vial, 2 g vial, 2 g/52.6ml vial, 200 mg vial, 200mg/5.26 vial)</i>	Tier 2	BvD
<i>hydroxyurea 500 mg capsule</i>	Tier 2	MO
LONSURF (15 MG-6.14 MG TABLET, 20 MG-8.19 MG TABLET)	Tier 3	PA, LA
<i>mercaptopurine 50 mg tablet</i>	Tier 2	MO
PURIXAN 20 MG/ML ORAL SUSP	Tier 3	PA, LA, MO
TABLOID 40 MG TABLET	Tier 3	PA
ANTINEOPLASTICS, OTHER		
ALUNBRIG (180 MG TABLET, 30 MG TABLET, 90 MG TABLET, 90 MG-180 MG TAB PACK)	Tier 3	PA, LA
<i>amifostine crystalline 500 mg vial</i>	Tier 2	PA
<i>arsenic trioxide 12 mg/6 ml vial</i>	Tier 2	BvD
<i>azacitidine 100 mg vial</i>	Tier 2	BvD
BALVERSA 3 MG TABLET	Tier 3	PA, LA, QL (3 PER 1 DAYS)
BALVERSA 4 MG TABLET	Tier 3	PA, LA, QL (2 PER 1 DAYS)
BALVERSA 5 MG TABLET	Tier 3	PA, LA, QL (1 PER 1 DAYS)
<i>bleomycin sulfate (15 unit vial, 30 unit vial)</i>	Tier 2	BvD
<i>bortezomib 3.5 mg vial</i>	Tier 2	BvD
COPIKTRA (15 MG CAPSULE, 25 MG CAPSULE)	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dactinomycin 0.5 mg vial</i>	Tier 2	BvD
<i>decitabine 50 mg vial</i>	Tier 2	BvD
<i>docetaxel (160 mg/8ml vial, 160mg/16ml vial, 20 mg/2 ml vial, 200mg/10ml vial, 20mg/ml(1) vial, 80 mg/4 ml vial, 80 mg/8 ml vial)</i>	Tier 2	BvD
ERWINAZE 10,000 UNITS VIAL	Tier 3	PA
HALAVEN 1 MG/2 ML VIAL	Tier 3	BvD
IDHIFA (100 MG TABLET, 50 MG TABLET)	Tier 3	PA, LA
IMLYGIC (1 MILLION PFU/ML VIAL, 100 MILLION PFU/ML VL)	Tier 3	PA
INREBIC 100 MG CAPSULE	Tier 3	PA, QL (4 PER 1 DAYS)
ISTODAX 10 MG KIT	Tier 3	BvD
<i>leucovorin calcium (10 mg tablet, 15 mg tablet, 25 mg tablet, 5 mg tablet)</i>	Tier 2	
<i>leucovorin calcium (100 mg vial, 200 mg vial, 350 mg vial, 50 mg vial, 500 mg vial)</i>	Tier 2	BvD
<i>levoleucovorin calcium (10 mg/ml vial, 175 mg vial, 50 mg vial)</i>	Tier 2	BvD
LYSODREN 500 MG TABLET	Tier 3	MO
MARQIBO KIT	Tier 3	PA
<i>mitoxantrone hcl 2 mg/ml vial</i>	Tier 2	BvD, MO
NINLARO (2.3 MG CAPSULE, 3 MG CAPSULE, 4 MG CAPSULE)	Tier 3	PA
ONCASPAR 3,750 UNIT/5 ML VIAL	Tier 3	BvD
ONIVYDE 43 MG/10 ML VIAL	Tier 3	PA
<i>oxaliplatin (100 mg vial, 100mg/20ml vial, 50 mg vial, 50 mg/10ml vial)</i>	Tier 2	BvD
<i>paclitaxel 6 mg/ml vial</i>	Tier 2	BvD
PROLEUKIN 22 MILLION UNIT VIAL	Tier 3	BvD
<i>romidepsin 10 mg/2 ml vial</i>	Tier 2	BvD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RUBRACA (200 MG TABLET, 250 MG TABLET, 300 MG TABLET)	Tier 3	PA, LA
RYDAPT 25 MG CAPSULE	Tier 3	PA
SYLATRON (200 MCG KIT, 300 MCG KIT, 600 MCG KIT)	Tier 3	PA
SYNRIBO 3.5 MG/ML VIAL	Tier 3	PA
<i>thiotepa 15 mg vial</i>	Tier 2	BvD
TIBSOVO 250 MG TABLET	Tier 3	PA, LA
TRISENOX (10 MG/10 ML AMPULE, 12 MG/6 ML VIAL)	Tier 3	BvD
TURALIO 200 MG CAPSULE	Tier 3	PA, LA, QL (4 PER 1 DAYS)
VELCADE 3.5 MG VIAL	Tier 3	BvD
VITRAKVI (100 MG CAPSULE, 20 MG/ML SOLUTION, 25 MG CAPSULE)	Tier 3	PA, LA
VIZIMPRO (15 MG TABLET, 30 MG TABLET, 45 MG TABLET)	Tier 3	PA, LA
VYXEOS 44 MG-100 MG VIAL	Tier 3	PA
XOSPATA 40 MG TABLET	Tier 3	PA, LA
XPOVIO 100 MG ONCE WEEKLY DOSE	Tier 3	PA, QL (20 PER 28 DAYS OVER TIME)
XPOVIO 60 MG ONCE WEEKLY DOSE	Tier 3	PA, QL (12 PER 28 DAYS OVER TIME)
XPOVIO 80 MG ONCE WEEKLY DOSE	Tier 3	PA, QL (16 PER 28 DAYS OVER TIME)
XPOVIO 80 MG TWICE WEEKLY DOSE	Tier 3	PA, QL (32 PER 28 DAYS OVER TIME)
ZALTRAP (100 MG/4 ML VIAL, 200 MG/8 ML VIAL)	Tier 3	PA
ZOLADEX 10.8 MG IMPLANT SYRN	Tier 2	BvD
ZOLADEX 3.6 MG IMPLANT SYRN	Tier 3	BvD
ZOLINZA 100 MG CAPSULE	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AROMATASE INHIBITORS, 3RD GENERATION		
<i>anastrozole 1 mg tablet</i>	Tier 2	MO
<i>exemestane 25 mg tablet</i>	Tier 2	MO
<i>letrozole 2.5 mg tablet</i>	Tier 2	MO
ENZYME INHIBITORS		
LORBRENA (100 MG TABLET, 25 MG TABLET)	Tier 3	PA, LA
PIQRAY (250 MG DAILY DOSE, 300 MG DAILY DOSE)	Tier 3	PA, QL (2 PER 1 DAYS)
PIQRAY 200 MG DAILY DOSE	Tier 3	PA, QL (1 PER 1 DAYS)
<i>topotecan hcl (4 mg vial, 4 mg/4 ml vial)</i>	Tier 2	BvD
MOLECULAR TARGET INHIBITORS		
AFINITOR (10 MG TABLET, 2.5 MG TABLET, 5 MG TABLET, 7.5 MG TABLET)	Tier 3	PA
AFINITOR DISPERZ (2 MG TABLET, 3 MG TABLET, 5 MG TABLET)	Tier 3	PA
ALECENSA 150 MG CAPSULE	Tier 3	PA, LA
ALIQOPA 60 MG VIAL	Tier 3	PA
BELEODAQ 500 MG VIAL	Tier 3	BvD
BOSULIF (100 MG TABLET, 400 MG TABLET, 500 MG TABLET)	Tier 3	PA
BRAFTOVI (50 MG CAPSULE, 75 MG CAPSULE)	Tier 3	PA, LA
CABOMETYX (20 MG TABLET, 40 MG TABLET, 60 MG TABLET)	Tier 3	PA, LA
CALQUENCE 100 MG CAPSULE	Tier 3	PA, LA
CAPRELSA (100 MG TABLET, 300 MG TABLET)	Tier 3	PA, LA
COMETRIQ (100 MG DAILY-DOSE PK, 140 MG DAILY-DOSE PK, 60 MG DAILY-DOSE PACK)	Tier 3	PA, LA
COTELLIC 20 MG TABLET	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CYRAMZA (100 MG/10 ML VIAL, 500 MG/50 ML VIAL)	Tier 3	PA
DAURISMO (100 MG TABLET, 25 MG TABLET)	Tier 3	PA, LA
ERIVEDGE 150 MG CAPSULE	Tier 3	PA, LA
<i>erlotinib hcl (100 mg tablet, 150 mg tablet)</i>	Tier 2	PA, QL (1 PER 1 DAYS)
<i>erlotinib hcl 25 mg tablet</i>	Tier 2	PA, QL (3 PER 1 DAYS)
FARYDAK (10 MG CAPSULE, 15 MG CAPSULE, 20 MG CAPSULE)	Tier 3	PA, LA
GILOTRIF (20 MG TABLET, 30 MG TABLET, 40 MG TABLET)	Tier 3	PA, LA
IBRANCE (100 MG CAPSULE, 125 MG CAPSULE, 75 MG CAPSULE)	Tier 3	PA, LA
ICLUSIG (15 MG TABLET, 45 MG TABLET)	Tier 3	PA, LA
<i>imatinib mesylate (100 mg tablet, 400 mg tablet)</i>	Tier 2	PA
IMBRUVICA (140 MG CAPSULE, 140 MG TABLET, 280 MG TABLET, 420 MG TABLET, 560 MG TABLET, 70 MG CAPSULE)	Tier 3	PA, LA
INLYTA (1 MG TABLET, 5 MG TABLET)	Tier 3	PA, LA
IRESSA 250 MG TABLET	Tier 3	PA, LA
JAKAFI (10 MG TABLET, 15 MG TABLET, 20 MG TABLET, 25 MG TABLET, 5 MG TABLET)	Tier 3	PA, LA
JEVTANA 60 MG/1.5 ML KIT	Tier 3	BvD
KISQALI (200 MG DAILY DOSE, 400 MG DAILY DOSE, 600 MG DAILY DOSE)	Tier 3	PA
KYPROLIS (10 MG VIAL, 30 MG VIAL, 60 MG VIAL)	Tier 3	PA
LENVIMA (10 MG DAILY DOSE, 12 MG DAILY DOSE, 14 MG DAILY DOSE, 18 MG DAILY DOSE, 20 MG DAILY DOSE, 24 MG DAILY DOSE, 4 MG CAPSULE, 8 MG DAILY DOSE)	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LYNPARZA (100 MG TABLET, 150 MG TABLET, 50 MG CAPSULE)	Tier 3	PA, LA
MEKINIST (0.5 MG TABLET, 2 MG TABLET)	Tier 3	PA, LA
MEKTOVI 15 MG TABLET	Tier 3	PA, LA
NERLYNX 40 MG TABLET	Tier 3	PA, LA
NEXAVAR 200 MG TABLET	Tier 3	PA, LA
ODOMZO 200 MG CAPSULE	Tier 3	PA, LA
SPRYCEL (100 MG TABLET, 140 MG TABLET, 20 MG TABLET, 50 MG TABLET, 70 MG TABLET, 80 MG TABLET)	Tier 3	PA
STIVARGA 40 MG TABLET	Tier 3	PA, LA
SUTENT (12.5 MG CAPSULE, 25 MG CAPSULE, 37.5 MG CAPSULE, 50 MG CAPSULE)	Tier 3	PA
TAFINLAR (50 MG CAPSULE, 75 MG CAPSULE)	Tier 3	PA, LA
TAGRISSO (40 MG TABLET, 80 MG TABLET)	Tier 3	PA, LA
TALZENNA (0.25 MG CAPSULE, 1 MG CAPSULE)	Tier 3	PA, LA
TASIGNA (150 MG CAPSULE, 200 MG CAPSULE, 50 MG CAPSULE)	Tier 3	PA
TYKERB 250 MG TABLET	Tier 3	PA, LA
VENCLEXTA (10 MG TABLET, 50 MG TABLET)	Tier 3	PA, LA, MO
VENCLEXTA 100 MG TABLET	Tier 3	PA, LA
VENCLEXTA STARTING PACK	Tier 3	PA, LA
VERZENIO (100 MG TABLET, 150 MG TABLET, 200 MG TABLET, 50 MG TABLET)	Tier 3	PA, LA
VOTRIENT 200 MG TABLET	Tier 3	PA, LA
XALKORI (200 MG CAPSULE, 250 MG CAPSULE)	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ZEJULA 100 MG CAPSULE	Tier 3	PA
ZELBORAF 240 MG TABLET	Tier 3	PA, LA
ZYDELIG (100 MG TABLET, 150 MG TABLET)	Tier 3	PA, LA
ZYKADIA 150 MG CAPSULE	Tier 3	PA, LA, QL (3 PER 1 DAYS)
ZYKADIA 150 MG TABLET	Tier 3	PA, QL (3 PER 1 DAYS)
MONOCLONAL ANTIBODY/ANTIBODY-DRUG CONJUGATE		
ARZERRA (1,000 MG/50 ML VIAL, 100 MG/5 ML VIAL)	Tier 3	PA
AVASTIN (100 MG/4 ML VIAL, 400 MG/16 ML VIAL)	Tier 3	BvD
BAVENCIO 200 MG/10 ML VIAL	Tier 3	PA
BESPOUSA 0.9 MG VIAL	Tier 3	PA
BLINCYTO 35MCG VIAL+STABILIZER	Tier 3	PA
DARZALEX (100 MG/5 ML VIAL, 400 MG/20 ML VIAL)	Tier 3	PA
EMPLICITI (300 MG VIAL, 400 MG VIAL)	Tier 3	PA
GAZYVA 1,000 MG/40 ML VIAL	Tier 3	PA
HERCEPTIN (150 MG VIAL, 440 MG VIAL)	Tier 3	BvD
HERCEPTIN HYLECTA 600MG-10,000	Tier 3	PA, QL (5 PER 21 DAYS OVER TIME)
IMFINZI (120 MG/2.4 ML VIAL, 500 MG/10 ML VIAL)	Tier 3	PA
KADCYLA (100 MG VIAL, 160 MG VIAL)	Tier 3	PA
KEYTRUDA 100 MG/4 ML VIAL	Tier 3	PA
LARTRUVO (190 MG/19 ML VIAL, 500 MG/50 ML VIAL)	Tier 3	PA
LIBTAYO 350 MG/7 ML VIAL	Tier 3	PA
LUMOXITI 1 MG VIAL	Tier 3	PA
MYLOTARG 4.5 MG VIAL	Tier 3	BvD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTINEOPLASTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OPDIVO (100 MG/10 ML VIAL, 240 MG/24 ML VIAL, 40 MG/4 ML VIAL)	Tier 3	PA
PERJETA 420 MG/14 ML VIAL	Tier 3	PA
POLIVY 140 MG VIAL	Tier 3	PA
PORTRAZZA 800 MG/50 ML VIAL	Tier 3	PA
POTELIGEO 20 MG/5 ML VIAL	Tier 3	PA
RITUXAN (100 MG/10 ML VIAL, 500 MG/50 ML VIAL)	Tier 3	PA
RITUXAN HYCELA (1,400 MG-23,400, 1,600 MG-26,800)	Tier 3	PA
SYLVANT (100 MG VIAL, 400 MG VIAL)	Tier 3	PA
TECENTRIQ 1,200 MG/20 ML VIAL	Tier 3	PA
UNITUXIN 17.5 MG/ 5 ML VIAL	Tier 3	PA
YERVOY (200 MG/40 ML VIAL, 50 MG/10 ML VIAL)	Tier 3	PA
RETINOIDS		
<i>bexarotene 75 mg capsule</i>	Tier 2	
PANRETIN 0.1% GEL	Tier 3	PA
TARGRETIN 1% GEL	Tier 3	
<i>tretinoin 10 mg capsule</i>	Tier 2	PA
TREATMENT ADJUNCTS		
ELITEK 7.5 MG VIAL	Tier 3	BvD
MESNEX 400 MG TABLET	Tier 3	

ANTIPARASITICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTHELMINTHICS		
<i>albendazole 200 mg tablet</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPARASITICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BILTRICIDE 600 MG TABLET	Tier 3	
<i>ivermectin 3 mg tablet</i>	Tier 2	
<i>praziquantel 600 mg tablet</i>	Tier 2	
ANTIPROTOZOALS		
ALINIA 500 MG TABLET	Tier 3	PA
<i>atovaquone 750 mg/5ml oral susp</i>	Tier 2	
<i>atovaquone/proguanil hcl (250-100 mg tablet, 62.5-25 mg tablet)</i>	Tier 2	
<i>chloroquine phosphate (250 mg tablet, 500 mg tablet)</i>	Tier 2	
DARAPRIM 25 MG TABLET	Tier 3	LA
<i>hydroxychloroquine sulfate 200 mg tablet</i>	Tier 2	MO
<i>mefloquine hcl 250 mg tablet</i>	Tier 2	
NEBUPENT 300 MG INHAL POWDER	Tier 3	PA, MO
PENTAM 300 VIAL	Tier 3	PA
<i>pentamidine isethionate 300 mg vial-neb</i>	Tier 2	PA, MO
<i>primaquine phosphate 26.3 mg tablet</i>	Tier 3	
PEDICULICIDES/SCABICIDES		
<i>lindane 1 % shampoo</i>	Tier 2	
<i>permethrin 5 % cream (g)</i>	Tier 2	

ANTIPARKINSON AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTICHOLINERGICS		
<i>benztropine mesylate (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPARKINSON AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>trihexyphenidyl hcl (2 mg tablet, 2 mg/5 ml elixir, 5 mg tablet)</i>	Tier 2	PA, MO
ANTIPARKINSON AGENTS, OTHER		
<i>amantadine hcl (100 mg capsule, 100 mg tablet, 50 mg/5 ml solution)</i>	Tier 2	MO
<i>carbidopa/levodopa/entacapone (12.5-50 mg tablet, 18.75-75mg tablet, 25-100-200 tablet, 31.25-125 tablet, 37.5-150mg tablet, 50-200-200 tablet)</i>	Tier 2	ST, MO
<i>entacapone 200 mg tablet</i>	Tier 2	ST, MO
<i>tolcapone 100 mg tablet</i>	Tier 2	ST, MO
DOPAMINE AGONISTS		
APOKYN 30 MG/3 ML CARTRIDGE	Tier 3	PA, LA
<i>bromocriptine mesylate (2.5 mg tablet, 5 mg capsule)</i>	Tier 2	MO
<i>pramipexole di-hcl (0.125 mg tablet, 0.25 mg tablet, 0.5 mg tablet, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet)</i>	Tier 2	MO
<i>ropinirole hcl (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet)</i>	Tier 2	MO
DOPAMINE PRECURSORS/L-AMINO ACID DECARBOXYLASE INHIBITORS		
<i>carbidopa 25 mg tablet</i>	Tier 2	MO
<i>carbidopa/levodopa (10mg-100mg tablet, 25mg-100mg tablet, 25mg-100mg tablet er, 25mg-250mg tablet, 50mg-200mg tablet er)</i>	Tier 2	MO
MONOAMINE OXIDASE B (MAO-B) INHIBITORS		
<i>rasagiline mesylate 0.5 mg tablet</i>	Tier 2	PA, QL (30 PER 30 DAYS), MO
<i>rasagiline mesylate 1 mg tablet</i>	Tier 2	PA, MO
<i>selegiline hcl (5 mg capsule, 5 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPSYCHOTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
1ST GENERATION/TYPICAL		
<i>chlorpromazine hcl (10 mg tablet, 100 mg tablet, 200 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>chlorpromazine hcl 25 mg/ml ampul</i>	Tier 2	BvD
<i>fluphenazine decanoate 25 mg/ml vial</i>	Tier 2	BvD, MO
<i>fluphenazine hcl (1 mg tablet, 10 mg tablet, 2.5 mg tablet, 2.5 mg/5ml elixir, 5 mg tablet)</i>	Tier 2	MO
<i>fluphenazine hcl 2.5 mg/ml vial</i>	Tier 2	BvD
<i>fluphenazine hcl 5 mg/ml oral conc</i>	Tier 2	
<i>haloperidol (0.5 mg tablet, 1 mg tablet, 10 mg tablet, 2 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>haloperidol decanoate (100 mg/ml ampul, 100 mg/ml vial)</i>	Tier 2	MO
<i>haloperidol decanoate (50 mg/ml ampul, 50 mg/ml vial)</i>	Tier 2	BvD, MO
<i>haloperidol lactate (5 mg/ml ampul, 5 mg/ml syringe, 5 mg/ml vial)</i>	Tier 2	BvD
<i>haloperidol lactate 2 mg/ml oral conc</i>	Tier 2	MO
<i>loxapine succinate (10 mg capsule, 25 mg capsule, 5 mg capsule, 50 mg capsule)</i>	Tier 2	MO
<i>molindone hcl (10 mg tablet, 25 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>pimozide (1 mg tablet, 2 mg tablet)</i>	Tier 2	MO
<i>thioridazine hcl (10 mg tablet, 100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	PA, MO
<i>thiothixene (1 mg capsule, 10 mg capsule, 2 mg capsule, 5 mg capsule)</i>	Tier 2	MO
<i>trifluoperazine hcl (1 mg tablet, 10 mg tablet, 2 mg tablet, 5 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPSYCHOTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
2ND GENERATION/ATYPICAL		
ABILIFY MAINTENA (ER 300 MG SYR, ER 300 MG VL, ER 400 MG SYR, ER 400 MG VL)	Tier 3	PA
<i>aripiprazole (10 mg tablet, 15 mg tablet, 2 mg tablet, 5 mg tablet)</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>aripiprazole (20 mg tablet, 30 mg tablet)</i>	Tier 2	MO
<i>aripiprazole 1 mg/ml solution</i>	Tier 2	QL (900 PER 30 DAYS), MO
<i>aripiprazole 10 mg tab rapdis</i>	Tier 2	QL (30 PER 30 DAYS)
<i>aripiprazole 15 mg tab rapdis</i>	Tier 2	QL (60 PER 30 DAYS)
ARISTADA (ER 1064 MG/3.9 ML SYR, ER 441 MG/1.6 ML SYRN, ER 662 MG/2.4 ML SYRN, ER 882 MG/3.2 ML SYRN)	Tier 3	PA
ARISTADA INITIO ER 675 MG/2.4	Tier 3	PA
FANAPT (1 MG TABLET, 10 MG TABLET, 12 MG TABLET, 2 MG TABLET, 4 MG TABLET, 6 MG TABLET, 8 MG TABLET)	Tier 3	PA, MO
FANAPT TITRATION PACK	Tier 3	PA
GEODON 20 MG/ML VIAL	Tier 3	PA
INVEGA SUSTENNA (117 MG/0.75 ML, 156 MG/ML SYRG, 234 MG/1.5 ML)	Tier 3	PA
INVEGA SUSTENNA (39 MG/0.25 ML, 78 MG/0.5 ML)	Tier 3	PA, MO
INVEGA TRINZA (273 MG/0.875 ML, 410 MG/1.315 ML, 546 MG/1.75 ML, 819 MG/2.625 ML)	Tier 3	PA
LATUDA (120 MG TABLET, 20 MG TABLET, 40 MG TABLET, 60 MG TABLET, 80 MG TABLET)	Tier 3	PA
NUPLAZID (10 MG TABLET, 17 MG TABLET, 34 MG CAPSULE)	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPSYCHOTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>olanzapine (10 mg tab rapdis, 10 mg tablet, 15 mg tab rapdis, 15 mg tablet, 2.5 mg tablet, 20 mg tab rapdis, 20 mg tablet, 5 mg tab rapdis, 5 mg tablet, 7.5 mg tablet)</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>olanzapine 10 mg vial</i>	Tier 2	BvD
<i>paliperidone (6 mg tab er 24, 9 mg tab er 24)</i>	Tier 2	PA, QL (60 PER 30 DAYS), MO
<i>paliperidone 1.5 mg tab er 24</i>	Tier 2	PA, QL (240 PER 30 DAYS), MO
<i>paliperidone 3 mg tab er 24</i>	Tier 2	PA, QL (120 PER 30 DAYS), MO
PERSERIS (ER 120 MG SYRINGE KIT, ER 90 MG SYRINGE KIT)	Tier 3	PA
<i>quetiapine fumarate (100 mg tablet, 200 mg tablet, 25 mg tablet, 300 mg tablet, 400 mg tablet, 50 mg tablet)</i>	Tier 2	QL (90 PER 30 DAYS), MO
REXULTI (0.25 MG TABLET, 0.5 MG TABLET, 1 MG TABLET, 2 MG TABLET, 3 MG TABLET, 4 MG TABLET)	Tier 3	PA
RISPERDAL CONSTA (12.5 MG SYR, 25 MG SYR)	Tier 3	BvD, MO
RISPERDAL CONSTA (37.5 MG SYR, 50 MG SYR)	Tier 3	BvD
<i>risperidone (0.25 mg tab rapdis, 0.25 mg tablet, 0.5 mg tab rapdis, 0.5 mg tablet, 1 mg tab rapdis, 1 mg tablet, 2 mg tab rapdis, 2 mg tablet, 3 mg tab rapdis, 3 mg tablet, 4 mg tab rapdis, 4 mg tablet)</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>risperidone 1 mg/ml solution</i>	Tier 2	QL (240 PER 30 DAYS), MO
SAPHRIS (10 MG TAB SUBLINGUAL, 2.5 MG TAB SUBLINGUAL, 5 MG TAB SUBLINGUAL)	Tier 3	PA
VRAYLAR (1.5 MG CAPSULE, 3 MG CAPSULE, 4.5 MG CAPSULE, 6 MG CAPSULE)	Tier 3	PA
<i>ziprasidone hcl (20 mg capsule, 40 mg capsule)</i>	Tier 2	QL (60 PER 30 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIPSYCHOTICS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ziprasidone hcl (60 mg capsule, 80 mg capsule)</i>	Tier 2	QL (120 PER 30 DAYS), MO
ZYPREXA RELPREVV (300 MG VL KIT, 405 MG VL KIT)	Tier 3	PA
ZYPREXA RELPREVV 210 MG VL KIT	Tier 3	PA, MO
TREATMENT-RESISTANT		
<i>clozapine (100 mg tab rapdis, 100 mg tablet, 12.5 mg tab rapdis, 150 mg tab rapdis, 200 mg tab rapdis, 200 mg tablet, 25 mg tab rapdis, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
VERSACLOZ 50 MG/ML SUSPENSION	Tier 3	PA, QL (18 PER 1 DAYS)

ANTISPASTICITY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTISPASTICITY AGENTS		
<i>baclofen (10 mg tablet, 20 mg tablet)</i>	Tier 2	MO
<i>dantrolene sodium (100 mg capsule, 25 mg capsule, 50 mg capsule)</i>	Tier 2	MO
<i>tizanidine hcl (2 mg tablet, 4 mg tablet)</i>	Tier 2	MO

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-CYTOMEGALOVIRUS (CMV) AGENTS		
<i>valganciclovir hcl 450 mg tablet</i>	Tier 2	
ZIRGAN 0.15% OPHTHALMIC GEL	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-HEPATITIS B (HBV) AGENTS		
<i>adefovir dipivoxil 10 mg tablet</i>	Tier 2	PA
BARACLUDE 0.05 MG/ML SOLUTION	Tier 3	PA, MO
<i>entecavir (0.5 mg tablet, 1 mg tablet)</i>	Tier 2	PA
EPIVIR HBV 25 MG/5 ML SOLN	Tier 3	PA, MO
<i>lamivudine 100 mg tablet</i>	Tier 2	MO
VEMLIDY 25 MG TABLET	Tier 3	PA
ANTI-HEPATITIS C (HCV) AGENTS, DIRECT ACTING AGENTS		
EPCLUSA 400 MG-100 MG TABLET	Tier 3	PA
HARVONI 45-200 MG TABLET	Tier 3	PA, QL (1 PER 1 DAYS)
HARVONI 90-400 MG TABLET	Tier 3	PA
MAVYRET 100-40 MG TABLET	Tier 3	PA
VOSEVI 400-100-100 MG TABLET	Tier 3	PA
ANTI-HEPATITIS C (HCV) AGENTS, OTHER		
INTRON A (10 MILLION UNITS VIL, 18 MILLION UNIT/3 ML, 18 MILLION UNITS VIL, 25 MILLION UNIT/2.5ML, 50 MILLION UNITS VIL)	Tier 3	PA, LA
PEGASYS (180 MCG/0.5 ML SYRINGE, 180 MCG/ML VIAL)	Tier 3	PA
PEGASYS PROCLICK 180 MCG/0.5	Tier 3	PA
<i>ribavirin (200 mg capsule, 200 mg tablet, 400 mg tablet, 600 mg tablet)</i>	Tier 2	PA
ANTI-HIV AGENTS		
CIMDUO 300-300 MG TABLET	Tier 3	
SYMFI 600-300-300 MG TABLET	Tier 3	
TEMIXYS 300-300 MG TABLET	Tier 3	
ANTI-HIV AGENTS, INTEGRASE INHIBITORS (INSTI)		
BIKTARVY 50-200-25 MG TABLET	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GENVOYA TABLET	Tier 3	
ISENTRESS 100 MG POWDER PACKET	Tier 3	QL (300 PER 30 DAYS), MO
ISENTRESS 100 MG TABLET CHEW	Tier 3	QL (180 PER 30 DAYS), MO
ISENTRESS 25 MG TABLET CHEW	Tier 3	QL (120 PER 30 DAYS), MO
ISENTRESS 400 MG TABLET	Tier 3	
ISENTRESS HD 600 MG TABLET	Tier 3	
STRIBILD TABLET	Tier 3	
TIVICAY (25 MG TABLET, 50 MG TABLET)	Tier 3	
TIVICAY 10 MG TABLET	Tier 3	MO
ANTI-HIV AGENTS, NON-NUCLEOSIDE REVERSE TRANSCRIPTASE INHIBITORS (NNRTI)		
ATRIPLA TABLET	Tier 3	
COMPLERA TABLET	Tier 3	
DELSTRIGO 100-300-300 MG TAB	Tier 3	
EDURANT 25 MG TABLET	Tier 3	QL (30 PER 30 DAYS)
<i>efavirenz (200 mg capsule, 600 mg tablet)</i>	Tier 2	
<i>efavirenz 50 mg capsule</i>	Tier 2	MO
INTELENCE (100 MG TABLET, 200 MG TABLET)	Tier 3	
INTELENCE 25 MG TABLET	Tier 3	MO
<i>nevirapine (100 mg tab er 24h, 200 mg tablet, 400 mg tab er 24h, 50 mg/5 ml oral susp)</i>	Tier 2	MO
ODEFSEY TABLET	Tier 3	
PIFELTRO 100 MG TABLET	Tier 3	
RESCRIPTOR (100 MG TABLET, 200 MG TABLET)	Tier 3	MO
SYMFI LO 400-300-300 MG TABLET	Tier 3	
VIRAMUNE 50 MG/5 ML SUSP	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-HIV AGENTS, NUCLEOSIDE AND NUCLEOTIDE REVERSE TRANSCRIPTASE INHIBITORS (NRTI)		
<i>abacavir sulfate (20 mg/ml solution, 300 mg tablet)</i>	Tier 2	MO
<i>abacavir sulfate/lamivudine 600-300mg tablet</i>	Tier 2	MO
<i>abacavir/lamivudine/zidovudine 150-300 mg tablet</i>	Tier 2	
<i>didanosine (200 mg capsule dr, 250 mg capsule dr, 400 mg capsule dr)</i>	Tier 2	MO
EMTRIVA (10 MG/ML SOLUTION, 200 MG CAPSULE)	Tier 3	MO
<i>lamivudine (10 mg/ml solution, 150 mg tablet, 300 mg tablet)</i>	Tier 2	MO
<i>lamivudine/zidovudine (150-300 mg tablet, 150-300mg tablet)</i>	Tier 2	MO
RETROVIR 200 MG/20 ML VIAL	Tier 3	
<i>stavudine (15 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	Tier 2	MO
<i>tenofovir disoproxil fumarate 300 mg tablet</i>	Tier 2	MO
TRUVADA (100 MG-150 MG TABLET, 133 MG-200 MG TABLET, 167 MG-250 MG TABLET, 200 MG-300 MG TABLET)	Tier 3	
VIDEX (2 GM PEDIATRIC SOLN, 4 GM PEDIATRIC SOLN)	Tier 3	MO
VIDEX EC 125 MG CAPSULE	Tier 3	MO
VIREAD (150 MG TABLET, 200 MG TABLET, 250 MG TABLET, POWDER)	Tier 3	
ZERIT 1 MG/ML SOLUTION	Tier 3	MO
<i>zidovudine (10 mg/ml syrup, 100 mg capsule, 300 mg tablet)</i>	Tier 2	MO
ANTI-HIV AGENTS, OTHER		
DESCOVY 200-25 MG TABLET	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DOVATO 50-300 MG TABLET	Tier 3	QL (30 PER 30 DAYS)
FUZEON 90 MG VIAL	Tier 3	
JULUCA 50-25 MG TABLET	Tier 3	
SELZENTRY (150 MG TABLET, 300 MG TABLET, 75 MG TABLET)	Tier 3	
SELZENTRY (20 MG/ML ORAL SOLN, 25 MG TABLET)	Tier 3	MO
TRIUMEQ 600-50-300 MG TABLET	Tier 3	
TROGARZO 200 MG/1.33 ML VIAL	Tier 3	BvD
TYBOST 150 MG TABLET	Tier 3	MO
ANTI-HIV AGENTS, PROTEASE INHIBITORS		
APTIVUS (100 MG/ML SOLUTION, 250 MG CAPSULE)	Tier 3	
<i>atazanavir sulfate (150 mg capsule, 200 mg capsule, 300 mg capsule)</i>	Tier 2	
CRIXIVAN (200 MG CAPSULE, 400 MG CAPSULE)	Tier 3	MO
EVOTAZ 300 MG-150 MG TABLET	Tier 3	
<i>fosamprenavir calcium 700 mg tablet</i>	Tier 2	
INVIRASE 200 MG CAPSULE	Tier 3	QL (300 PER 30 DAYS), MO
INVIRASE 500 MG TABLET	Tier 3	
KALETRA 100-25 MG TABLET	Tier 3	MO
KALETRA 200-50 MG TABLET	Tier 3	
LEXIVA 50 MG/ML SUSPENSION	Tier 3	MO
<i>lopinavir/ritonavir 400-100/5 solution</i>	Tier 2	MO
NORVIR (100 MG POWDER PACKET, 100 MG SOFTGEL CAP, 80 MG/ML SOLUTION)	Tier 3	MO
PREZCOBIX 800 MG-150 MG TABLET	Tier 3	
PREZISTA (150 MG TABLET, 75 MG TABLET)	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANTIVIRALS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PREZISTA (600 MG TABLET, 800 MG TABLET)	Tier 3	
PREZISTA 100 MG/ML SUSPENSION	Tier 3	QL (360 PER 30 DAYS), MO
REYATAZ 50 MG POWDER PACKET	Tier 3	
<i>ritonavir 100 mg tablet</i>	Tier 2	MO
SYMTUZA 800-150-200-10 MG TAB	Tier 3	
VIRACEPT (250 MG TABLET, 625 MG TABLET)	Tier 3	
ANTI-INFLUENZA AGENTS		
<i>oseltamivir phosphate (45 mg capsule, 75 mg capsule)</i>	Tier 2	QL (42 PER 180 DAYS OVER TIME)
<i>oseltamivir phosphate 30 mg capsule</i>	Tier 2	QL (84 PER 180 DAYS OVER TIME)
<i>oseltamivir phosphate 6 mg/ml susp recon</i>	Tier 2	QL (1080 PER 365 DAYS OVER TIME)
RELENZA 5 MG DISKHALER	Tier 3	QL (60 PER 180 DAYS OVER TIME)
<i>rimantadine hcl 100 mg tablet</i>	Tier 2	
TAMIFLU 6 MG/ML SUSPENSION	Tier 3	QL (1080 PER 365 DAYS OVER TIME)
ANTIHERPETIC AGENTS		
<i>acyclovir (200 mg capsule, 200 mg/5ml oral susp, 400 mg tablet, 800 mg tablet)</i>	Tier 2	MO
<i>acyclovir 5 % cream (g)</i>	Tier 2	QL (30 PER 30 DAYS OVER TIME)
<i>acyclovir 5 % oint. (g)</i>	Tier 2	QL (30 PER 30 DAYS)
<i>acyclovir sodium 50 mg/ml vial</i>	Tier 2	BvD
DENAVIR 1% CREAM	Tier 3	PA
<i>trifluridine 1 % drops</i>	Tier 2	
<i>valacyclovir hcl (1000 mg tablet, 500 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ANXIOLYTICS

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
ANXIOLYTICS, OTHER		
<i>buspirone hcl (10 mg tablet, 15 mg tablet, 30 mg tablet, 5 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
<i>meprobamate (200 mg tablet, 400 mg tablet)</i>	Tier 2	PA
BENZODIAZEPINES		
<i>alprazolam (0.25 mg tablet, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>clonazepam (0.125 mg tab rapdis, 0.25 mg tab rapdis, 0.5 mg tab rapdis, 0.5 mg tablet, 1 mg tab rapdis, 1 mg tablet, 2 mg tab rapdis, 2 mg tablet)</i>	Tier 2	MO
<i>clorazepate dipotassium (3.75 mg tablet, 7.5 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>clorazepate dipotassium 15 mg tablet</i>	Tier 2	QL (180 PER 30 DAYS)
<i>diazepam (10 mg tablet, 2 mg tablet, 5 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)
<i>diazepam 5 mg/5 ml solution</i>	Tier 2	QL (1200 PER 30 DAYS)
<i>lorazepam (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	QL (120 PER 30 DAYS)

BIPOLAR AGENTS

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
MOOD STABILIZERS		
<i>lithium carbonate (150 mg capsule, 300 mg capsule, 300 mg tablet, 300 mg tablet er, 450 mg tablet er, 600 mg capsule)</i>	Tier 2	MO
<i>lithium citrate 8 meq/5 ml solution</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD GLUCOSE REGULATORS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTIDIABETIC AGENTS		
<i>acarbose 100 mg tablet</i>	Tier 2	QL (90 PER 30 DAYS), MO
<i>acarbose 25 mg tablet</i>	Tier 2	QL (360 PER 30 DAYS), MO
<i>acarbose 50 mg tablet</i>	Tier 2	QL (180 PER 30 DAYS), MO
AVANDIA (2 MG TABLET, 4 MG TABLET)	Tier 3	PA, MO
CYCLOSET 0.8 MG TABLET	Tier 3	PA, MO
<i>glimepiride 1 mg tablet</i>	Tier 1	QL (240 PER 30 DAYS), MO
<i>glimepiride 2 mg tablet</i>	Tier 1	QL (120 PER 30 DAYS), MO
<i>glimepiride 4 mg tablet</i>	Tier 1	QL (60 PER 30 DAYS), MO
<i>glipizide (10 mg tab er 24, 5 mg tablet)</i>	Tier 1	QL (60 PER 30 DAYS), MO
<i>glipizide (10 mg tablet, 5 mg tab er 24)</i>	Tier 1	QL (120 PER 30 DAYS), MO
<i>glipizide 2.5 mg tab er 24</i>	Tier 1	QL (240 PER 30 DAYS), MO
<i>glipizide/metformin hcl (2.5-500 mg tablet, 5 mg-500mg tablet)</i>	Tier 1	QL (120 PER 30 DAYS), MO
<i>glipizide/metformin hcl 2.5-250 mg tablet</i>	Tier 1	QL (240 PER 30 DAYS), MO
<i>glyburide 1.25 mg tablet</i>	Tier 1	PA, QL (480 PER 30 DAYS), MO
<i>glyburide 2.5 mg tablet</i>	Tier 1	PA, QL (240 PER 30 DAYS), MO
<i>glyburide 5 mg tablet</i>	Tier 1	PA, QL (120 PER 30 DAYS), MO
<i>glyburide, micronized 1.5 mg tablet</i>	Tier 1	PA, QL (240 PER 30 DAYS), MO
<i>glyburide, micronized 3 mg tablet</i>	Tier 1	PA, QL (120 PER 30 DAYS), MO
<i>glyburide, micronized 6 mg tablet</i>	Tier 1	PA, QL (60 PER 30 DAYS), MO
<i>glyburide/metformin hcl (2.5-500 mg tablet, 5 mg-500mg tablet)</i>	Tier 1	PA, QL (120 PER 30 DAYS), MO
<i>glyburide/metformin hcl 1.25-250mg tablet</i>	Tier 1	PA, QL (240 PER 30 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD GLUCOSE REGULATORS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INVOKAMET (150-1,000 MG TABLET, 150-500 MG TABLET, 50-1,000 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
INVOKAMET 50-500 MG TABLET	Tier 3	QL (4 PER 1 DAYS), MO
INVOKAMET XR (150-1,000 MG TAB, 150-500 MG TABLET, 50-1,000 MG TAB, 50-500 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
INVOKANA 100 MG TABLET	Tier 3	QL (2 PER 1 DAYS), MO
INVOKANA 300 MG TABLET	Tier 3	QL (1 PER 1 DAYS), MO
JANUMET (50-1,000 MG TABLET, 50-500 MG TABLET)	Tier 3	QL (60 PER 30 DAYS), MO
JANUMET XR (100-1,000 MG TABLET, 50-1,000 MG TABLET)	Tier 3	QL (60 PER 30 DAYS), MO
JANUMET XR 50-500 MG TABLET	Tier 3	QL (30 PER 30 DAYS), MO
JANUVIA (100 MG TABLET, 25 MG TABLET, 50 MG TABLET)	Tier 3	QL (30 PER 30 DAYS), MO
JARDIANCE (10 MG TABLET, 25 MG TABLET)	Tier 3	QL (1 PER 1 DAYS), MO
JENTADUETO (2.5 MG-1000 MG TAB, 2.5 MG-500 MG TAB, 2.5 MG-850 MG TAB)	Tier 3	QL (60 PER 30 DAYS), MO
JENTADUETO XR 2.5 MG-1,000 MG	Tier 3	QL (60 PER 30 DAYS), MO
JENTADUETO XR 5 MG-1,000 MG TB	Tier 3	QL (30 PER 30 DAYS), MO
<i>metformin hcl (1000 mg tablet, 750 mg tab er 24h)</i>	Tier 1	QL (60 PER 30 DAYS), MO
<i>metformin hcl 500 mg tab er 24h</i>	Tier 1	QL (120 PER 30 DAYS), MO
<i>metformin hcl 500 mg tablet</i>	Tier 1	QL (150 PER 30 DAYS), MO
<i>metformin hcl 850 mg tablet</i>	Tier 1	QL (90 PER 30 DAYS), MO
<i>miglitol 100 mg tablet</i>	Tier 2	QL (90 PER 30 DAYS), MO
<i>miglitol 25 mg tablet</i>	Tier 2	QL (360 PER 30 DAYS), MO
<i>miglitol 50 mg tablet</i>	Tier 2	QL (180 PER 30 DAYS), MO
<i>nateglinide (120 mg tablet, 60 mg tablet)</i>	Tier 2	MO
OZEMPIC 0.25-0.5 MG DOSE PEN	Tier 3	QL (1.5 PER 28 DAYS OVER TIME), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD GLUCOSE REGULATORS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OZEMPIC 1 MG DOSE PEN	Tier 3	QL (3 PER 28 DAYS OVER TIME), MO
<i>pioglitazone hcl (15 mg tablet, 30 mg tablet, 45 mg tablet)</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>repaglinide (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	MO
SYMLINPEN 120 PEN INJECTOR	Tier 3	PA, MO
SYMLINPEN 60 PEN INJECTOR	Tier 3	PA, MO
SYNJARDY (12.5-1,000 MG TABLET, 12.5-500 MG TABLET, 5-1,000 MG TABLET, 5-500 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
SYNJARDY XR (10-1,000 MG TABLET, 12.5-1,000 MG TAB, 5-1,000 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
SYNJARDY XR 25-1,000 MG TABLET	Tier 3	QL (1 PER 1 DAYS), MO
TANZEUM (30 MG PEN INJECT, 50 MG PEN INJECT)	Tier 3	MO
<i>tolazamide (250 mg tablet, 500 mg tablet)</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>tolbutamide 500 mg tablet</i>	Tier 2	QL (180 PER 30 DAYS), MO
TRADJENTA 5 MG TABLET	Tier 3	QL (30 PER 30 DAYS), MO
TRULICITY (0.75 MG/0.5 ML PEN, 1.5 MG/0.5 ML PEN)	Tier 3	QL (2 PER 28 DAYS OVER TIME), MO
VICTOZA 2-PAK 18 MG/3 ML PEN	Tier 3	QL (6 PER 30 DAYS OVER TIME), MO
VICTOZA 3-PAK 18 MG/3 ML PEN	Tier 3	QL (9 PER 30 DAYS OVER TIME), MO
GLYCEMIC AGENTS		
BAQSIMI (3 MG SPRAY ONE PACK, 3 MG SPRAY TWO PACK)	Tier 3	QL (2 PER 30 DAYS OVER TIME)
GLUCAGEN 1 MG HYPOKIT	Tier 3	
GLUCAGON 1 MG EMERGENCY KIT	Tier 3	QL (2 PER 30 DAYS)
PROGLYCEM 50 MG/ML ORAL SUSP	Tier 3	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD GLUCOSE REGULATORS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INSULINS		
HUMALOG (100 UNIT/ML VIAL, 100 UNITS/ML CARTRIDGE)	Tier 3	MO
HUMALOG 100 UNITS/ML KWIKPEN	Tier 3	MO
HUMALOG 200 UNITS/ML KWIKPEN	Tier 3	MO
HUMALOG MIX 50-50 KWIKPEN	Tier 3	MO
HUMALOG MIX 50-50 VIAL	Tier 3	MO
HUMALOG MIX 75-25 KWIKPEN	Tier 3	MO
HUMALOG MIX 75-25 VIAL	Tier 3	MO
HUMULIN 70-30 VIAL	Tier 3	MO
HUMULIN 70/30 KWIKPEN	Tier 3	MO
HUMULIN N 100 UNIT/ML VIAL	Tier 3	MO
HUMULIN N 100 UNITS/ML KWIKPEN	Tier 3	MO
HUMULIN R 100 UNIT/ML VIAL	Tier 3	MO
HUMULIN R 500 UNITS/ML VIAL	Tier 3	
LANTUS 100 UNIT/ML VIAL	Tier 3	MO
LANTUS SOLOSTAR 100 UNIT/ML	Tier 3	MO
NOVOLIN 70-30 (100 UNIT/ML VIAL, RELION VIAL)	Tier 3	MO
NOVOLIN N (N 100 UNIT/ML VIAL, RELION N 100 UNIT/ML)	Tier 3	MO
NOVOLIN R (R 100 UNIT/ML VIAL, RELION R 100 UNIT/ML)	Tier 3	MO
NOVOLOG (100 UNIT/ML CARTRIDGE, 100 UNIT/ML VIAL)	Tier 3	MO
NOVOLOG 100 UNIT/ML FLEXPEN	Tier 3	MO
NOVOLOG MIX 70-30 FLEXPEN SYRN	Tier 3	MO
NOVOLOG MIX 70-30 VIAL	Tier 3	MO
TOUJEO MAX SOLOSTR 300 UNIT/ML	Tier 3	MO
TOUJEO SOLOSTAR 300 UNIT/ML	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTICOAGULANTS		
COUMADIN (1 MG TABLET, 10 MG TABLET, 2 MG TABLET, 2.5 MG TABLET, 3 MG TABLET, 4 MG TABLET, 5 MG TABLET, 6 MG TABLET, 7.5 MG TABLET)	Tier 3	MO
ELIQUIS (2.5 MG TABLET, 5 MG TABLET)	Tier 3	MO
ELIQUIS 5 MG STARTER PACK	Tier 3	
<i>enoxaparin sodium (100 mg/ml syringe, 120mg/0.8ml syringe, 150 mg/ml syringe, 30mg/0.3ml syringe, 40mg/0.4ml syringe, 60mg/0.6ml syringe, 80mg/0.8ml syringe)</i>	Tier 2	
<i>fondaparinux sodium (10mg/0.8ml syringe, 2.5 mg/0.5 syringe, 5mg/0.4ml syringe, 7.5mg/0.6 syringe)</i>	Tier 2	PA
FRAGMIN (10,000 UNITS/ML SYRING, 12,500 UNITS/0.5 ML, 15,000 UNITS/0.6 ML, 18,000 UNITS/0.72 ML, 2,500 UNITS/0.2 ML SYR, 5,000 UNITS/0.2 ML SYR, 7,500 UNITS/0.3 ML SYR, 95,000 UNITS/3.8 ML VL)	Tier 3	
<i>heparin sodium, porcine (1000/ml vial, 10000/ml vial, 20000/ml vial, 5000/ml vial)</i>	Tier 2	
PRADAXA (110 MG CAPSULE, 150 MG CAPSULE, 75 MG CAPSULE)	Tier 3	QL (2 PER 1 DAYS), MO
<i>warfarin sodium (1 mg tablet, 10 mg tablet, 2 mg tablet, 2.5 mg tablet, 3 mg tablet, 4 mg tablet, 5 mg tablet, 6 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
XARELTO (10 MG TABLET, 15 MG TABLET, 2.5 MG TABLET, 20 MG TABLET)	Tier 3	MO
XARELTO STARTER PACK	Tier 3	
BLOOD FORMATION MODIFIERS		
<i>anagrelide hcl (0.5 mg capsule, 1 mg capsule)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DOPTELET ((10 TAB PK) 20 MG TAB, (15 TAB PK) 20 MG TAB)	Tier 3	PA, LA
DOPTELET (30 TAB PK) 20 MG TAB	Tier 3	PA, LA, QL (2 PER 1 DAYS)
GRANIX (300 MCG/0.5 ML SAFE SYR, 300 MCG/0.5 ML SYRINGE, 480 MCG/0.8 ML SAFE SYR, 480 MCG/0.8 ML SYRINGE)	Tier 3	PA
LEUKINE 250 MCG VIAL	Tier 3	PA
MIRCERA 100 MCG/0.3 ML SYRINGE	Tier 3	PA, LA, MO
NEULASTA (6 MG/0.6 ML SYRINGE, ONPRO 6 MG/0.6 ML KIT)	Tier 3	PA
NEUPOGEN (300 MCG/0.5 ML SYR, 300 MCG/ML VIAL, 480 MCG/0.8 ML SYR, 480 MCG/1.6 ML VIAL)	Tier 3	PA
PROCRIT (10,000 UNITS/ML VIAL, 20,000 UNITS/ML VIAL, 40,000 UNITS/ML VIAL)	Tier 3	PA
PROCRIT (2,000 UNITS/ML VIAL, 3,000 UNITS/ML VIAL, 4,000 UNITS/ML VIAL)	Tier 3	PA, MO
PROMACTA (12.5 MG SUSPEN PACKET, 12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET, 75 MG TABLET)	Tier 3	PA, LA
RETACRIT (10,000 UNIT/ML VIAL, 2,000 UNIT/ML VIAL, 3,000 UNIT/ML VIAL, 4,000 UNIT/ML VIAL, 40,000 UNIT/ML VIAL)	Tier 3	PA, MO
TAVALISSE (100 MG TABLET, 150 MG TABLET)	Tier 3	PA, LA
ZARXIO (300 MCG/0.5 ML SYRINGE, 480 MCG/0.8 ML SYRINGE)	Tier 3	PA
HEMOSTASIS AGENTS		
<i>tranexamic acid 650 mg tablet</i>	Tier 2	PA, MO
PLATELET MODIFYING AGENTS		
<i>aspirin/dipyridamole 25mg-200mg cpmp 12hr</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

BLOOD PRODUCTS/MODIFIERS/VOLUME EXPANDERS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BRILINTA (60 MG TABLET, 90 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
<i>cilostazol (100 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>clopidogrel bisulfate 75 mg tablet</i>	Tier 2	MO
<i>dipyridamole (25 mg tablet, 50 mg tablet, 75 mg tablet)</i>	Tier 2	PA, MO

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ALPHA-ADRENERGIC AGONISTS		
<i>clonidine (0.1mg/24hr patch tdwk, 0.2mg/24hr patch tdwk, 0.3mg/24hr patch tdwk)</i>	Tier 2	MO
<i>clonidine hcl (0.1 mg tablet, 0.2 mg tablet, 0.3 mg tablet)</i>	Tier 2	MO
<i>guanfacine hcl (1 mg tablet, 2 mg tablet)</i>	Tier 2	PA, MO
<i>methyldopa (250 mg tablet, 500 mg tablet)</i>	Tier 2	PA, MO
<i>midodrine hcl (10 mg tablet, 2.5 mg tablet, 5 mg tablet)</i>	Tier 2	
NORTHERA (100 MG CAPSULE, 200 MG CAPSULE, 300 MG CAPSULE)	Tier 3	PA, LA
ALPHA-ADRENERGIC BLOCKING AGENTS		
<i>doxazosin mesylate (1 mg tablet, 2 mg tablet, 4 mg tablet, 8 mg tablet)</i>	Tier 2	MO
<i>prazosin hcl (1 mg capsule, 2 mg capsule, 5 mg capsule)</i>	Tier 2	MO
<i>terazosin hcl (1 mg capsule, 10 mg capsule, 2 mg capsule, 5 mg capsule)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil (16 mg tablet, 32 mg tablet, 4 mg tablet, 8 mg tablet)</i>	Tier 2	MO
<i>irbesartan (150 mg tablet, 300 mg tablet, 75 mg tablet)</i>	Tier 1	MO
<i>losartan potassium (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 1	MO
<i>olmesartan medoxomil (20 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>telmisartan (20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
<i>valsartan (160 mg tablet, 320 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
ANGIOTENSIN-CONVERTING ENZYME (ACE) INHIBITORS		
<i>benazepril hcl (10 mg tablet, 20 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>captopril (100 mg tablet, 12.5 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 1	MO
<i>enalapril maleate (10 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>fosinopril sodium (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	Tier 1	MO
<i>lisinopril (10 mg tablet, 2.5 mg tablet, 20 mg tablet, 30 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>moexipril hcl (15 mg tablet, 7.5 mg tablet)</i>	Tier 1	MO
<i>perindopril erbumine (2 mg tablet, 4 mg tablet, 8 mg tablet)</i>	Tier 1	MO
<i>quinapril hcl (10 mg tablet, 20 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>ramipril (1.25 mg capsule, 10 mg capsule, 2.5 mg capsule, 5 mg capsule)</i>	Tier 1	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>trandolapril (1 mg tablet, 2 mg tablet, 4 mg tablet)</i>	Tier 1	MO
ANTIARRHYTHMICS		
<i>amiodarone hcl (100 mg tablet, 200 mg tablet, 400 mg tablet)</i>	Tier 2	MO
<i>disopyramide phosphate (100 mg capsule, 150 mg capsule)</i>	Tier 2	PA, MO
<i>dofetilide (125 mcg capsule, 250 mcg capsule, 500 mcg capsule)</i>	Tier 2	PA, MO
<i>flecainide acetate (100 mg tablet, 150 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>mexiletine hcl (150 mg capsule, 200 mg capsule, 250 mg capsule)</i>	Tier 2	MO
MULTAQ 400 MG TABLET	Tier 3	PA, MO
PACERONE (100 MG TABLET, 400 MG TABLET)	Tier 2	MO
<i>propafenone hcl (150 mg tablet, 225 mg tablet, 300 mg tablet)</i>	Tier 2	MO
<i>quinidine gluconate 324 mg tablet er</i>	Tier 2	MO
<i>quinidine sulfate (200 mg tablet, 300 mg tablet)</i>	Tier 2	MO
<i>sotalol hcl (120 mg tablet, 160 mg tablet, 240 mg tablet, 80 mg tablet)</i>	Tier 2	MO
BETA-ADRENERGIC BLOCKING AGENTS		
<i>acebutolol hcl (200 mg capsule, 400 mg capsule)</i>	Tier 2	MO
<i>atenolol (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 1	MO
<i>betaxolol hcl (10 mg tablet, 20 mg tablet)</i>	Tier 2	MO
<i>bisoprolol fumarate (10 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>carvedilol (12.5 mg tablet, 25 mg tablet, 3.125 mg tablet, 6.25 mg tablet)</i>	Tier 1	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>labetalol hcl (100 mg tablet, 200 mg tablet, 300 mg tablet)</i>	Tier 2	MO
<i>metoprolol succinate (100 mg tab er 24h, 25 mg tab er 24h, 50 mg tab er 24h)</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>metoprolol succinate 200 mg tab er 24h</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>metoprolol tartrate (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 1	MO
<i>nadolol (20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
<i>pindolol (10 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>propranolol hcl (10 mg tablet, 120 mg cap sa 24h, 160 mg cap sa 24h, 20 mg tablet, 40 mg tablet, 60 mg cap sa 24h, 60 mg tablet, 80 mg cap sa 24h, 80 mg tablet)</i>	Tier 2	MO
<i>timolol maleate (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 2	MO
CALCIUM CHANNEL BLOCKING AGENTS		
<i>amlodipine besylate (10 mg tablet, 2.5 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>diltiazem hcl (120 mg cap er 12h, 120 mg cap er 24h, 120 mg cap er deg, 120 mg cap sa 24h, 120 mg tablet, 180 mg cap er 24h, 180 mg cap er deg, 180 mg cap sa 24h, 240 mg cap er 24h, 240 mg cap er deg, 240 mg cap sa 24h, 30 mg tablet, 300 mg cap er 24h, 300 mg cap sa 24h, 360 mg cap er 24h, 360 mg cap sa 24h, 420 mg cap sa 24h, 60 mg cap er 12h, 60 mg tablet, 90 mg cap er 12h, 90 mg tablet)</i>	Tier 2	MO
<i>felodipine (10 mg tab er 24h, 2.5 mg tab er 24h, 5 mg tab er 24h)</i>	Tier 2	MO
<i>isradipine (2.5 mg capsule, 5 mg capsule)</i>	Tier 2	MO
<i>nicardipine hcl (20 mg capsule, 30 mg capsule)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nifedipine (30 mg tab er 24, 30 mg tablet er, 60 mg tab er 24, 60 mg tablet er, 90 mg tab er 24, 90 mg tablet er)</i>	Tier 2	MO
<i>verapamil hcl (100 mg cap24h pct, 120 mg cap24h pel, 120 mg tablet, 120 mg tablet er, 180 mg cap24h pel, 180 mg tablet er, 200 mg cap24h pct, 240 mg cap24h pel, 240 mg tablet er, 300 mg cap24h pct, 360 mg cap24h pel, 40 mg tablet, 80 mg tablet)</i>	Tier 2	MO
CARDIOVASCULAR AGENTS, OTHER		
<i>aliskiren hemifumarate 150 mg tablet</i>	Tier 2	PA, QL (2 PER 1 DAYS), MO
<i>aliskiren hemifumarate 300 mg tablet</i>	Tier 2	PA, QL (1 PER 1 DAYS), MO
<i>amiloride/hydrochlorothiazide 5 mg-50 mg tablet</i>	Tier 2	MO
<i>amlodipine besylate/benazepril hcl (10 mg-20mg capsule, 10 mg-40mg capsule, 2.5mg-10mg capsule, 5 mg-10 mg capsule, 5 mg-20 mg capsule, 5 mg-40 mg capsule)</i>	Tier 1	QL (30 PER 30 DAYS), MO
<i>amlodipine besylate/olmesartan medoxomil (10 mg-20mg tablet, 10 mg-40mg tablet, 5 mg-20 mg tablet, 5 mg-40 mg tablet)</i>	Tier 2	MO
<i>amlodipine besylate/valsartan (10mg-160mg tablet, 10mg-320mg tablet, 5 mg-160mg tablet, 5 mg-320mg tablet)</i>	Tier 1	MO
<i>amlodipine besylate/valsartan/hydrochlorothiazide (10-160-25 tablet, 10-320-25 tablet, 10mg-160mg tablet, 5-160-12.5 tablet, 5-160-25mg tablet)</i>	Tier 2	MO
<i>atenolol/chlorthalidone (100mg-25mg tablet, 50 mg-25mg tablet)</i>	Tier 1	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>benazepril hcl/hydrochlorothiazide (10-12.5mg tablet, 20 mg-25mg tablet, 20-12.5 mg tablet, 5-6.25mg tablet)</i>	Tier 1	MO
<i>bisoprolol fumarate/hydrochlorothiazide (10-6.25mg tablet, 2.5-6.25mg tablet, 5-6.25mg tablet)</i>	Tier 2	MO
<i>candesartan cilexetil/hydrochlorothiazide (16-12.5mg tablet, 32-12.5mg tablet, 32mg-25mg tablet)</i>	Tier 2	MO
<i>captopril/hydrochlorothiazide (25 mg-15mg tablet, 25 mg-25mg tablet, 50 mg-15mg tablet, 50 mg-25mg tablet)</i>	Tier 1	MO
CORLANOR (5 MG TABLET, 7.5 MG TABLET)	Tier 3	PA, MO
CORLANOR 5 MG/5 ML ORAL SOLN	Tier 3	PA, QL (20 PER 1 DAYS), MO
DEMSEER 250 MG CAPSULE	Tier 3	PA
<i>digoxin 125 mcg tablet</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>digoxin 250 mcg tablet</i>	Tier 2	MO
<i>digoxin 50 mcg/ml solution</i>	Tier 3	MO
<i>enalapril maleate/hydrochlorothiazide (10 mg-25mg tablet, 5mg-12.5mg tablet)</i>	Tier 1	MO
ENTRESTO (24 MG-26 MG TABLET, 49 MG-51 MG TABLET, 97 MG-103 MG TABLET)	Tier 3	QL (2 PER 1 DAYS), MO
<i>fosinopril sodium/hydrochlorothiazide (10-12.5mg tablet, 20-12.5 mg tablet)</i>	Tier 1	MO
<i>irbesartan/hydrochlorothiazide (150-12.5mg tablet, 300-12.5mg tablet)</i>	Tier 1	MO
<i>lisinopril/hydrochlorothiazide (10-12.5mg tablet, 20 mg-25mg tablet, 20-12.5 mg tablet)</i>	Tier 1	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>losartan potassium/hydrochlorothiazide (100-12.5mg tablet, 100mg-25mg tablet, 50-12.5 mg tablet)</i>	Tier 1	MO
<i>methyldopa/hydrochlorothiazide (250mg-15mg tablet, 250mg-25mg tablet)</i>	Tier 2	PA, MO
<i>metoprolol tartrate/hydrochlorothiazide (100mg-25mg tablet, 100mg-50mg tablet, 50 mg-25mg tablet)</i>	Tier 1	MO
<i>moexipril hcl/hydrochlorothiazide (15-12.5mg tablet, 15-25mg tablet, 7.5-12.5mg tablet)</i>	Tier 1	MO
<i>olmesartan medoxomil/hydrochlorothiazide (20-12.5 mg tablet, 40 mg-25mg tablet, 40-12.5 mg tablet)</i>	Tier 2	MO
<i>pentoxifylline 400 mg tablet er</i>	Tier 2	MO
<i>propranolol hcl/hydrochlorothiazide (40 mg-25mg tablet, 80 mg-25mg tablet)</i>	Tier 2	MO
<i>quinapril hcl/hydrochlorothiazide (10-12.5mg tablet, 20 mg-25mg tablet, 20-12.5 mg tablet)</i>	Tier 1	MO
RANEXA (ER 1,000 MG TABLET, ER 500 MG TABLET)	Tier 3	MO
<i>ranolazine (1000 mg tab er 12h, 500 mg tab er 12h)</i>	Tier 2	MO
<i>spironolact/hydrochlorothiazid 25 mg-25mg tablet</i>	Tier 2	MO
TEKTURNA HCT (150-12.5 MG TAB, 150-25 MG TABLET, 300-12.5 MG TAB, 300-25 MG TABLET)	Tier 3	PA, MO
<i>triamterene/hydrochlorothiazide (37.5-25 mg capsule, 37.5-25 mg tablet, 50 mg-25mg capsule, 75 mg-50mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>valsartan/hydrochlorothiazide (160-12.5mg tablet, 160-25mg tablet, 320-12.5mg tablet, 320mg-25mg tablet, 80-12.5mg tablet)</i>	Tier 1	MO
VYNDAMAX 61 MG CAPSULE	Tier 3	PA, QL (1 PER 1 DAYS)
VYNDAQEL 20 MG CAPSULE	Tier 3	PA, QL (4 PER 1 DAYS)
DIURETICS, CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide (125 mg tablet, 250 mg tablet, 500 mg capsule er)</i>	Tier 2	MO
DIURETICS, LOOP		
<i>bumetanide (0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	MO
<i>bumetanide 0.25 mg/ml vial</i>	Tier 2	
<i>furosemide (10 mg/ml solution, 20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
<i>furosemide (10 mg/ml syringe, 10 mg/ml vial)</i>	Tier 2	
<i>torseamide (10 mg tablet, 100 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 2	MO
DIURETICS, POTASSIUM-SPARING		
<i>amiloride hcl 5 mg tablet</i>	Tier 2	MO
<i>epplerenone (25 mg tablet, 50 mg tablet)</i>	Tier 2	PA, MO
<i>spironolactone (100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
DIURETICS, THIAZIDE		
<i>chlorothiazide (250 mg tablet, 500 mg tablet)</i>	Tier 2	MO
<i>chlorthalidone (25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>hydrochlorothiazide (12.5 mg capsule, 12.5 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>indapamide (1.25 mg tablet, 2.5 mg tablet)</i>	Tier 2	MO
<i>methyclothiazide 5 mg tablet</i>	Tier 2	MO
<i>metolazone (10 mg tablet, 2.5 mg tablet, 5 mg tablet)</i>	Tier 2	MO
DYSLIPIDEMICS, FIBRIC ACID DERIVATIVES		
<i>fenofibrate (120 mg tablet, 160 mg tablet, 40 mg tablet, 54 mg tablet)</i>	Tier 2	MO
<i>fenofibrate nanocrystallized (145mg tablet, 160 mg tablet, 48 mg tablet)</i>	Tier 2	MO
<i>fenofibrate, micronized (134 mg capsule, 200 mg capsule, 67 mg capsule)</i>	Tier 2	MO
<i>gemfibrozil 600 mg tablet</i>	Tier 2	MO
DYSLIPIDEMICS, HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium (10 mg tablet, 20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
<i>lovastatin (10 mg tablet, 20 mg tablet, 40 mg tablet)</i>	Tier 1	MO
<i>pravastatin sodium (10 mg tablet, 20 mg tablet, 40 mg tablet, 80 mg tablet)</i>	Tier 1	MO
<i>rosuvastatin calcium (10 mg tablet, 20 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 1	MO
<i>simvastatin (10 mg tablet, 20 mg tablet, 40 mg tablet, 5 mg tablet, 80 mg tablet)</i>	Tier 1	MO
DYSLIPIDEMICS, OTHER		
<i>cholestyramine (with sugar) (4 g powd pack, 4 g powder)</i>	Tier 2	MO
<i>cholestyramine/aspartame (4 g powd pack, 4 g powder)</i>	Tier 2	MO
<i>colesevelam hcl (3.75 g powd pack, 625 mg tablet)</i>	Tier 2	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CARDIOVASCULAR AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>colestipol hcl (1 g tablet, 5 g granules, 5 g packet)</i>	Tier 2	MO
<i>ezetimibe 10 mg tablet</i>	Tier 2	MO
<i>ezetimibe/simvastatin (10 mg-10mg tablet, 10 mg-20mg tablet, 10 mg-40mg tablet, 10 mg-80mg tablet)</i>	Tier 2	MO
<i>niacin (1000 mg tab er 24h, 500 mg tab er 24h, 750 mg tab er 24h)</i>	Tier 2	PA, MO
<i>omega-3 acid ethyl esters 1 g capsule</i>	Tier 2	MO
REPATHA 140 MG/ML SURECLICK	Tier 3	PA, MO
REPATHA 140 MG/ML SYRINGE	Tier 3	PA, MO
REPATHA 420 MG/3.5ML PUSHTRONX	Tier 3	PA, MO
VASCEPA (0.5 GM CAPSULE, 1 GM CAPSULE)	Tier 3	MO
VASODILATORS, DIRECT-ACTING ARTERIAL		
<i>hydralazine hcl (10 mg tablet, 100 mg tablet, 25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>minoxidil (10 mg tablet, 2.5 mg tablet)</i>	Tier 2	MO
VASODILATORS, DIRECT-ACTING ARTERIAL/VENOUS		
<i>isosorbide dinitrate (10 mg tablet, 20 mg tablet, 30 mg tablet, 40 mg tablet er, 5 mg tablet)</i>	Tier 1	MO
<i>isosorbide mononitrate (10 mg tablet, 120 mg tab er 24h, 20 mg tablet, 30 mg tab er 24h, 60 mg tab er 24h)</i>	Tier 2	MO
<i>nitroglycerin (0.1mg/hr patch td24, 0.2mg/hr patch td24, 0.3 mg tab subl, 0.4 mg tab subl, 0.4mg/hr patch td24, 0.6 mg tab subl, 0.6mg/hr patch td24)</i>	Tier 2	MO
NITROSTAT (0.3 MG TABLET SL, 0.4 MG TABLET SL, 0.6 MG TABLET SL)	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CENTRAL NERVOUS SYSTEM AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, AMPHETAMINES		
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate (10 mg cap er 24h, 10 mg tablet, 12.5 mg tablet, 15 mg cap er 24h, 15 mg tablet, 20 mg cap er 24h, 20 mg tablet, 25 mg cap er 24h, 30 mg cap er 24h, 30 mg tablet, 5 mg cap er 24h, 5 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
<i>dextroamphetamine sulfate (10 mg capsule er, 10 mg tablet, 15 mg capsule er, 5 mg capsule er, 5 mg tablet)</i>	Tier 2	MO
ATTENTION DEFICIT HYPERACTIVITY DISORDER AGENTS, NON-AMPHETAMINES		
<i>atomoxetine hcl (10 mg capsule, 100 mg capsule, 18 mg capsule, 25 mg capsule, 40 mg capsule, 60 mg capsule, 80 mg capsule)</i>	Tier 2	PA, MO
<i>clonidine hcl 0.1 mg tab er 12h</i>	Tier 2	PA, MO
<i>dexmethylphenidate hcl (10 mg cpbp 50-50, 10 mg tablet, 15 mg cpbp 50-50, 2.5 mg tablet, 20 mg cpbp 50-50, 25 mg cpbp 50-50, 30 mg cpbp 50-50, 35 mg cpbp 50-50, 40 mg cpbp 50-50, 5 mg cpbp 50-50, 5 mg tablet)</i>	Tier 2	ST, MO
<i>guanfacine hcl (1 mg tab er 24h, 2 mg tab er 24h, 3 mg tab er 24h, 4 mg tab er 24h)</i>	Tier 2	PA, MO
<i>methylphenidate hcl (10 mg tablet, 10 mg tablet er, 20 mg tablet, 20 mg tablet er, 5 mg tablet)</i>	Tier 2	MO
<i>methylphenidate hcl (18 mg tab er 24, 27 mg tab er 24, 36 mg tab er 24, 54 mg tab er 24)</i>	Tier 2	ST, MO
CENTRAL NERVOUS SYSTEM, OTHER		
<i>NUEDEXTA 20-10 MG CAPSULE</i>	Tier 3	PA
<i>riluzole 50 mg tablet</i>	Tier 2	PA, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CENTRAL NERVOUS SYSTEM AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>tetrabenazine (12.5 mg tablet, 25 mg tablet)</i>	Tier 2	
FIBROMYALGIA AGENTS		
<i>duloxetine hcl (20 mg capsule dr, 30 mg capsule dr, 60 mg capsule dr)</i>	Tier 2	MO
<i>duloxetine hcl 40 mg capsule dr</i>	Tier 2	ST, MO
<i>pregabalin (100 mg capsule, 150 mg capsule, 20 mg/ml solution, 200 mg capsule, 225 mg capsule, 25 mg capsule, 300 mg capsule, 50 mg capsule, 75 mg capsule)</i>	Tier 2	MO
SAVELLA (100 MG TABLET, 12.5 MG TABLET, 25 MG TABLET, 50 MG TABLET)	Tier 3	PA, MO
SAVELLA TITRATION PACK	Tier 3	PA
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO (14 MG TABLET, 7 MG TABLET)	Tier 3	PA, LA
AVONEX (30 MCG VIAL KIT, PREFILLED SYR 30 MCG KT)	Tier 3	PA
AVONEX PEN 30 MCG/0.5 ML KIT	Tier 3	PA
BETASERON 0.3 MG KIT	Tier 3	PA
<i>dalfampridine 10 mg tab er 12h</i>	Tier 2	PA, MO
EXTAVIA (0.3 MG KIT, 0.3 MG VIAL)	Tier 3	PA
GILENYA 0.5 MG CAPSULE	Tier 3	PA
<i>glatiramer acetate (20 mg/ml syringe, 40 mg/ml syringe)</i>	Tier 2	PA
PLEGRIDY (125 MCG/0.5 ML SYRINGE, SYRINGE STARTER PACK)	Tier 3	PA, LA
PLEGRIDY PEN (125 MCG/0.5 ML PEN, PEN INJ STARTER PACK)	Tier 3	PA, LA
REBIF (22 MCG/0.5 ML SYRINGE, 44 MCG/0.5 ML SYRINGE, TITRATION PACK)	Tier 3	PA
REBIF REBIDOSE (22 MCG/0.5 ML, 44 MCG/0.5 ML, TITRATION PACK)	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

CENTRAL NERVOUS SYSTEM AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TECFIDERA (DR 120 MG CAPSULE, DR 240 MG CAPSULE, STARTER PACK)	Tier 3	PA, LA

DENTAL AND ORAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DENTAL AND ORAL AGENTS		
<i>chlorhexidine gluconate 0.12 % mouthwash</i>	Tier 2	
<i>pilocarpine hcl (5 mg tablet, 7.5 mg tablet)</i>	Tier 2	MO
<i>triamcinolone acetonide 0.1 % paste (g)</i>	Tier 2	

DERMATOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DERMATOLOGICAL AGENTS		
<i>acitretin (10 mg capsule, 25 mg capsule)</i>	Tier 2	PA
<i>acitretin 17.5 mg capsule</i>	Tier 2	
<i>adapalene 0.1 % gel (gram)</i>	Tier 2	
<i>ammonium lactate 12 % lotion</i>	Tier 2	
AVITA 0.025% GEL	Tier 2	PA
<i>calcipotriene (0.005 % cream (g), 0.005 % solution)</i>	Tier 2	PA, QL (60 PER 30 DAYS)
<i>clotrimazole/betamethasone dipropionate (1 %-0.05 % cream (g), 1 %-0.05 % lotion)</i>	Tier 2	
<i>diclofenac sodium 1 % gel (gram)</i>	Tier 2	PA, MO
<i>diclofenac sodium 3 % gel (gram)</i>	Tier 2	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

DERMATOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fluorouracil 0.5 % cream (g)</i>	Tier 2	
<i>imiquimod 3.75 % crm md pmp</i>	Tier 2	PA
<i>imiquimod 5 % cream pack</i>	Tier 2	PA, QL (12 PER 30 DAYS OVER TIME)
<i>isotretinoin (10 mg capsule, 20 mg capsule, 30 mg capsule, 40 mg capsule)</i>	Tier 2	PA
<i>methoxsalen 10 mg cap lq rap</i>	Tier 2	PA
<i>metronidazole (0.75 % cream (g), 0.75 % gel (gram), 0.75 % lotion)</i>	Tier 2	
PICATO (0.015% GEL, 0.05% GEL)	Tier 3	PA
<i>pimecrolimus 1 % cream (g)</i>	Tier 2	PA, QL (30 PER 30 DAYS)
<i>podofilox 0.5 % solution</i>	Tier 2	
RECTIV 0.4% OINTMENT	Tier 3	PA
REGRANEX 0.01% GEL	Tier 3	PA, QL (15 PER 30 DAYS OVER TIME)
SANTYL OINTMENT	Tier 3	QL (180 PER 30 DAYS OVER TIME)
<i>selenium sulfide 2.5 % lotion</i>	Tier 2	
STELARA (45 MG/0.5 ML SYRINGE, 45 MG/0.5 ML VIAL, 90 MG/ML SYRINGE)	Tier 3	PA
<i>tacrolimus (0.03 % oint. (g), 0.1 % oint. (g))</i>	Tier 2	PA
<i>tazarotene 0.1 % cream (g)</i>	Tier 2	PA
TAZORAC (0.05% CREAM, 0.05% GEL, 0.1% GEL)	Tier 3	PA
TOLAK 4% CREAM	Tier 3	PA
<i>tretinoin (0.01 % gel (gram), 0.025 % cream (g), 0.025 % gel (gram), 0.05 % cream (g), 0.05 % gel (gram), 0.1 % cream (g))</i>	Tier 2	PA
ZYCLARA 2.5% CREAM PUMP	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ELECTROLYTES/MINERALS/METALS/VITAMINS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ELECTROLYTES/MINERALS/METALS/VITAMINS		
<i>0.9 % sodium chloride (0.9 % pgybk prt, 0.9 % pgy vl prt, 0.9 % 0.9 % iv soln)</i>	Tier 2	
AMINOSYN II 15% IV SOLUTION	Tier 3	BvD
AMINOSYN-HBC 7% IV SOLUTION	Tier 3	BvD
AMINOSYN-PF 7% IV SOLUTION	Tier 3	BvD
<i>deferasirox (125 mg tab disper, 250 mg tab disper, 500 mg tab disper)</i>	Tier 2	PA
<i>dextrose 10 % in water (10 % in water 10 % dehp fr bg, 10 % in water 10 % iv soln)</i>	Tier 2	
<i>dextrose 2.5 % and 0.45 % nacl 2.5%-0.45% iv soln</i>	Tier 2	
<i>dextrose 5 % and 0.3 % nacl 5 %-0.3 % iv soln</i>	Tier 2	
<i>dextrose 5 % and 0.9 % nacl 5 %-0.9 % iv soln</i>	Tier 2	
<i>dextrose 5 % in water (5 % in water pgybk prt, 5 % in water pgy vl prt, 5 % in water 5 % iv soln, 5 % in water 5 % vial)</i>	Tier 2	
<i>dextrose 5 %-0.2 % sod chlorid 5 %-0.2 % iv soln</i>	Tier 2	
<i>dextrose 5 %-0.45 % sod chlrd 5 %-0.45 % iv soln</i>	Tier 2	
<i>fluoride (sodium) (0.25(0.55) tab chew, 0.5(1.1)mg tab chew, 1mg(2.2mg) tab chew)</i>	Tier 2	MO
FLUORITAB 1 MG TABLET CHEW	Tier 2	MO
FREAMINE HBC 6.9% IV SOLN	Tier 3	BvD
INTRALIPID (20% IV FAT EMUL, 30% IV FAT EMUL)	Tier 3	BvD
KLOR-CON M15 TABLET	Tier 2	MO
<i>magnesium sulfate 4 meq/ml vial</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ELECTROLYTES/MINERALS/METALS/VITAMINS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>multivit-mins60/iron fum/folic 27 mg-1 mg tablet</i>	Tier 2	
NEPHRAMINE 5.4% IV SOLUTION	Tier 3	BvD
<i>pnv no.118/iron fumarate/fa 29 mg-1 mg tab chew</i>	Tier 2	MO
<i>pnv119/iron fum/folic/docusate 29-1-25 mg tablet</i>	Tier 2	MO
<i>potassium chloride (10 meq capsule er, 10 meq tab er prt, 10 meq tablet er, 20 meq tab er prt, 20 meq tablet er, 20meq/15ml liquid, 40meq/15ml liquid, 8 meq capsule er, 8 meq tablet er)</i>	Tier 2	MO
<i>potassium chloride (2 meq/ml ampul, 2 meq/ml vial)</i>	Tier 2	
<i>potassium chloride in 0.9%nacl 20 meq/l iv soln</i>	Tier 2	
<i>potassium chloride in 5 % dextrose in water (in d5w 20 meq/l iv soln, in d5w 40 meq/l iv soln)</i>	Tier 2	
<i>potassium chloride in dextrose 5 %-0.45 % sodium chloride (20 meq/l iv soln, 30 meq/l iv soln, 40 meq/l iv soln)</i>	Tier 2	
<i>potassium chloride in lr-d5 20 meq/l iv soln</i>	Tier 2	
<i>potassium chloride/d5-0.2%nacl 20 meq/l iv soln</i>	Tier 2	
<i>potassium chloride/d5-0.3%nacl 20 meq/l iv soln</i>	Tier 2	
<i>potassium chloride/d5-0.9%nacl 20 meq/l iv soln</i>	Tier 2	
PREMASOL (10% IV SOLUTION, 6% IV SOLUTION)	Tier 3	BvD
PRENATAL PLUS IRON TABLET	Tier 2	MO
PUREFE PLUS CAPSULE	Tier 2	
<i>sodium chloride 0.45 % (0.45 % pgybk prt, 0.45 % 0.45 % iv soln)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

ELECTROLYTES/MINERALS/METALS/VITAMINS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sodium chloride irrig solution 0.9 % irrig soln</i>	Tier 2	
<i>sodium polystyrene sulfon/sorb 15 g/60 ml oral susp</i>	Tier 2	
<i>sodium polystyrene sulfonate (15 g/60 ml oral susp, 30 g/120ml enema, 50 g/200ml enema, powder)</i>	Tier 2	
SPS (15 GM/60 ML SUSPENSION, 30 GM/120 ML ENEMA SUSP)	Tier 2	
SYPRINE 250 MG CAPSULE	Tier 3	PA
TPN ELECTROLYTES VIAL	Tier 3	BvD
TRAVASOL 10% SOLN VIAFLEX	Tier 3	BvD
<i>trientine hcl 250 mg capsule</i>	Tier 2	PA
TROPHAMINE 10% IV SOLUTION	Tier 3	BvD

GASTROINTESTINAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTISPASMODICS, GASTROINTESTINAL		
<i>dicyclomine hcl (10 mg capsule, 20 mg tablet)</i>	Tier 2	MO
<i>glycopyrrolate (1 mg tablet, 2 mg tablet)</i>	Tier 2	MO
GASTROINTESTINAL AGENTS, OTHER		
<i>cromolyn sodium 20 mg/ml oral conc</i>	Tier 2	
<i>diphenoxylate hcl/atropine sulfate (2.5-.025/5 liquid, 2.5-.025mg tablet)</i>	Tier 2	
<i>loperamide hcl 2 mg capsule</i>	Tier 2	MO
MOVANTI (12.5 MG TABLET, 25 MG TABLET)	Tier 3	QL (1 PER 1 DAYS)
RELISTOR (12 MG/0.6 ML SYRINGE, 12 MG/0.6 ML VIAL, 8 MG/0.4 ML SYRINGE)	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

GASTROINTESTINAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ursodiol (250 mg tablet, 300 mg capsule, 500 mg tablet)</i>	Tier 2	MO
HISTAMINE2 (H2) RECEPTOR ANTAGONISTS		
<i>cimetidine (200 mg tablet, 300 mg tablet, 400 mg tablet, 800 mg tablet)</i>	Tier 2	MO
<i>cimetidine hcl 300 mg/5ml solution</i>	Tier 2	MO
<i>famotidine (20 mg tablet, 40 mg tablet)</i>	Tier 2	MO
<i>nizatidine (150 mg capsule, 300 mg capsule)</i>	Tier 2	MO
<i>ranitidine hcl (15 mg/ml syrup, 150 mg capsule, 150 mg tablet, 300 mg capsule, 300 mg tablet)</i>	Tier 2	MO
IRRITABLE BOWEL SYNDROME AGENTS		
<i>alosetron hcl (0.5 mg tablet, 1 mg tablet)</i>	Tier 2	PA
AMITIZA (24 MCG CAPSULES, 8 MCG CAPSULE)	Tier 3	PA, MO
LAXATIVES		
<i>lactulose (10 g/15 ml solution, 20 g/30 ml solution)</i>	Tier 2	MO
<i>peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride (236-22.74g soln recon, 240-22.72g soln recon)</i>	Tier 2	
<i>sodium chloride/nahco3/kcl/peg 420g soln recon</i>	Tier 2	
PROTECTANTS		
<i>misoprostol (100 mcg tablet, 200 mcg tablet)</i>	Tier 2	MO
<i>sucralfate 1 g tablet</i>	Tier 2	MO
PROTON PUMP INHIBITORS		
<i>lansoprazole (15 mg capsule dr, 30 mg capsule dr)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

GASTROINTESTINAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>omeprazole (10 mg capsule dr, 20 mg capsule dr)</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>omeprazole 40 mg capsule dr</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>pantoprazole sodium (20 mg tablet dr, 40 mg tablet dr)</i>	Tier 2	MO

GENETIC OR ENZYME DISORDER: REPLACEMENT, MODIFIERS, TREATMENT

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GENETIC OR ENZYME DISORDER: REPLACEMENT, MODIFIERS, TREATMENT		
CARBAGLU 200 MG DISPER TABLET	Tier 3	PA, LA
CREON (DR 12,000 UNITS CAPSULE, DR 24,000 UNITS CAPSULE, DR 3,000 UNITS CAPSULE, DR 6,000 UNITS CAPSULE)	Tier 3	MO
CREON DR 36,000 UNITS CAPSULE	Tier 3	
CYSTADANE 1 GRAM/1.7 ML POWDER	Tier 3	LA, MO
KUVAN (100 MG POWDER PACKET, 100 MG TABLET, 500 MG POWDER PACKET)	Tier 3	PA, LA
<i>miglustat 100 mg capsule</i>	Tier 2	PA
<i>nitisinone (10 mg capsule, 2 mg capsule, 5 mg capsule)</i>	Tier 2	PA
ORFADIN (10 MG CAPSULE, 2 MG CAPSULE, 20 MG CAPSULE, 5 MG CAPSULE)	Tier 3	PA, LA, MO
<i>sodium phenylbutyrate 500 mg tablet</i>	Tier 2	PA, MO
SUCRAID 8,500 UNITS/ML SOLN	Tier 3	PA, LA, MO
ZENPEP (DR 10,000 UNIT CAPSULE, DR 15,000 UNIT CAPSULE, DR 20,000 UNIT CAPSULE, DR 25,000 UNIT CAPSULE, DR 3,000 UNIT CAPSULE, DR 40,000 UNIT CAPSULE, DR 5,000 UNIT CAPSULE)	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

GENITOURINARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTISPASMODICS, URINARY		
MYRBETRIQ (ER 25 MG TABLET, ER 50 MG TABLET)	Tier 3	PA, MO
<i>oxybutynin chloride (10 mg tab er 24, 15 mg tab er 24, 5 mg tab er 24, 5 mg tablet, 5 mg/5 ml syrup)</i>	Tier 2	MO
<i>tolterodine tartrate (1 mg tablet, 2 mg tablet)</i>	Tier 2	ST, QL (60 PER 30 DAYS), MO
<i>tolterodine tartrate (2 mg cap er 24h, 4 mg cap er 24h)</i>	Tier 2	ST, QL (30 PER 30 DAYS), MO
<i>tropium chloride 20 mg tablet</i>	Tier 2	ST, MO
BENIGN PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl 10 mg tab er 24h</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>dutasteride 0.5 mg capsule</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>finasteride 5 mg tablet</i>	Tier 2	QL (30 PER 30 DAYS), MO
<i>tamsulosin hcl 0.4 mg capsule</i>	Tier 2	QL (60 PER 30 DAYS), MO
GENITOURINARY AGENTS, OTHER		
<i>bethanechol chloride (10 mg tablet, 25 mg tablet, 5 mg tablet, 50 mg tablet)</i>	Tier 2	
CYSTAGON (150 MG CAPSULE, 50 MG CAPSULE)	Tier 3	PA, LA, MO
DEPEN 250 MG TITRATAB	Tier 3	PA
<i>penicillamine 250 mg capsule</i>	Tier 2	PA, QL (16 PER 1 DAYS)
<i>potassium citrate (10 meq tablet er, 5 meq tablet er)</i>	Tier 2	MO
THIOLA 100 MG TABLET	Tier 3	MO
THIOLA EC (EC 100 MG TABLET, EC 300 MG TABLET)	Tier 3	PA
PHOSPHATE BINDERS		
<i>calcium acetate (667 mg capsule, 667 mg tablet)</i>	Tier 2	MO
RENAGEL 400 MG TABLET	Tier 3	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

GENITOURINARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sevelamer carbonate 800 mg tablet</i>	Tier 2	MO
<i>sevelamer hcl (400 mg tablet, 800 mg tablet)</i>	Tier 2	MO

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)		
<i>alclometasone dipropionate (0.05 % cream (g), 0.05 % oint. (g))</i>	Tier 2	
<i>betamethasone dipropionate (0.05 % cream (g), 0.05 % gel (gram), 0.05 % lotion, 0.05 % oint. (g))</i>	Tier 2	
<i>betamethasone dipropionate/propylene glycol (0.05 % cream (g), 0.05 % lotion, 0.05 % oint. (g))</i>	Tier 2	
<i>betamethasone valerate (0.1 % cream (g), 0.1 % lotion, 0.1 % oint. (g))</i>	Tier 2	
<i>clobetasol propionate (0.05 % cream (g), 0.05 % oint. (g), 0.05 % solution)</i>	Tier 2	
<i>clobetasol propionate/emoll 0.05 % cream (g)</i>	Tier 2	
<i>cortisone acetate 25 mg tablet</i>	Tier 2	
<i>desonide (0.05 % cream (g), 0.05 % lotion, 0.05 % oint. (g))</i>	Tier 2	
<i>desoximetasone (0.05 % cream (g), 0.05 % gel (gram), 0.25 % cream (g), 0.25 % oint. (g))</i>	Tier 2	
<i>dexamethasone (0.5 mg tablet, 0.5 mg/5ml elixir, 0.5 mg/5ml solution, 0.75 mg tablet, 1 mg tablet, 1.5 mg tablet, 2 mg tablet, 4 mg tablet, 6 mg tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diflorasone diacetate (0.05 % cream (g), 0.05 % oint. (g))</i>	Tier 2	
<i>fludrocortisone acetate 0.1 mg tablet</i>	Tier 2	MO
<i>fluocinolone acetonide (0.01 % cream (g), 0.01 % solution, 0.025 % cream (g), 0.025 % oint. (g))</i>	Tier 2	
<i>fluocinonide (0.05 % cream (g), 0.05 % gel (gram), 0.05 % oint. (g), 0.05 % solution)</i>	Tier 2	
<i>fluocinonide/emollient base 0.05 % cream (g)</i>	Tier 2	
<i>fluticasone propionate (0.005 % oint. (g), 0.05 % cream (g))</i>	Tier 2	
<i>halobetasol propionate (0.05 % cream (g), 0.05 % oint. (g))</i>	Tier 2	
<i>hydrocort/min oil/petrolat, wht 1 % oint. (g)</i>	Tier 2	
<i>hydrocortisone (1 % cream (g), 1 % crm/pe app, 1 % oint. (g), 2.5 % cream (g), 2.5 % crm/pe app, 2.5 % lotion, 2.5 % oint. (g))</i>	Tier 2	
<i>hydrocortisone (10 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>hydrocortisone valerate (0.2 % cream (g), 0.2 % oint. (g))</i>	Tier 2	
KORLYM 300 MG TABLET	Tier 3	PA, LA
<i>methylprednisolone (16 mg tablet, 32 mg tablet, 4 mg tab ds pk, 4 mg tablet, 8 mg tablet)</i>	Tier 2	
<i>mometasone furoate (0.1 % cream (g), 0.1 % oint. (g), 0.1 % solution)</i>	Tier 2	
<i>prednisolone 15 mg/5 ml solution</i>	Tier 2	
<i>prednisolone sodium phosphate (10 mg/5 ml solution, 15 mg/5 ml solution, 20 mg/5 ml solution, 25 mg/5 ml solution, 5 mg/5 ml solution)</i>	Tier 2	
<i>prednisone (1 mg tablet, 10 mg tablet, 2.5 mg tablet, 20 mg tablet, 5 mg tablet)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (ADRENAL)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>triamcinolone acetonide (0.025 % cream (g), 0.025 % lotion, 0.025 % oint. (g), 0.1 % cream (g), 0.1 % lotion, 0.1 % oint. (g), 0.5 % cream (g), 0.5 % oint. (g))</i>	Tier 2	
TRIDESILON 0.05% CREAM	Tier 2	

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)		
<i>desmopressin (nonrefrigerated) 10/spray spray/pump</i>	Tier 2	MO
<i>desmopressin acetate (0.1 mg tablet, 0.1 mg/ml solution, 0.2 mg tablet, 10/spray spray/pump)</i>	Tier 2	MO
GENOTROPIN (12 MG CARTRIDGE, 5 MG CARTRIDGE, MINIQUEL 0.4 MG, MINIQUEL 0.6 MG, MINIQUEL 0.8 MG, MINIQUEL 1 MG, MINIQUEL 1.2 MG, MINIQUEL 1.4 MG, MINIQUEL 1.6 MG, MINIQUEL 1.8 MG, MINIQUEL 2 MG)	Tier 3	PA
GENOTROPIN MINIQUEL 0.2 MG	Tier 3	PA, MO
HUMATROPE (12 MG CARTRIDGE, 24 MG CARTRIDGE, 5 MG VIAL)	Tier 3	PA
HUMATROPE 6 MG CARTRIDGE	Tier 3	PA, MO
INCRELEX 40 MG/4 ML VIAL	Tier 3	PA, LA
NORDITROPIN FLEXPON (10 MG/1.5, 15 MG/1.5, 30 MG/3 ML, 5 MG/1.5)	Tier 3	PA
NUTROPIN AQ NUSPIN (10 INJECTOR, 20 INJECTOR)	Tier 3	PA
SAIZEN (5 MG VIAL, 8.8 MG CLICK.EASY CARTG, 8.8 MG VIAL)	Tier 3	PA
SAIZEN 8.8 MG SAIZENPREP CART	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (PITUITARY)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SEROSTIM (4 MG VIAL, 5 MG VIAL, 6 MG VIAL)	Tier 3	PA, LA
ZORBTIVE 8.8 MG VIAL	Tier 3	PA

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANABOLIC STEROIDS		
ANADROL-50 TABLET	Tier 3	PA
<i>oxandrolone (10 mg tablet, 2.5 mg tablet)</i>	Tier 2	PA, MO
ANDROGENS		
ANDRODERM (2 MG/24HR PATCH, 4 MG/24HR PATCH)	Tier 3	PA, MO
AVEED 750 MG/3 ML VIAL	Tier 3	PA, MO
<i>danazol (100 mg capsule, 200 mg capsule, 50 mg capsule)</i>	Tier 2	
<i>methyltestosterone 10 mg capsule</i>	Tier 2	PA, MO
<i>testosterone (12.5/1.25g gel md pmp, 50 mg (1%) gel (gram), 50 mg (1%) gel packet)</i>	Tier 2	PA, MO
<i>testosterone cypionate (100 mg/ml vial, 200 mg/ml vial)</i>	Tier 2	PA, MO
ESTROGENS		
ALORA (0.025 MG PATCH, 0.1 MG PATCH)	Tier 3	MO
COMBIPATCH (0.05-0.14 MG PTCH, 0.05-0.25 MG PTCH)	Tier 3	MO
<i>desog-e.estradiol/e.estradiol 21-5 (28) tablet</i>	Tier 2	MO
<i>desogestrel-ethinyl estradiol (0.15-0.03 tablet, 7 days x 3 tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>estradiol (.025mg/24h patch tds, .0375mg/24 patch tds, .075mg/24h patch tds, 0.01 % cream/appl, 0.05mg/24h patch tds, 0.1mg/24hr patch tds)</i>	Tier 2	MO
<i>estradiol (.025mg/24h patch tdw, .0375mg/24 patch tdw, .075mg/24h patch tdw, 0.05mg/24h patch tdw, 0.06mg/24h patch tdw, 0.1mg/24hr patch tdw, 0.5 mg tablet, 1 mg tablet, 2 mg tablet)</i>	Tier 2	PA, MO
<i>estradiol/norethindrone acetate (0.5-0.1 mg tablet, 1 mg-0.5mg tablet)</i>	Tier 2	MO
<i>estropipate (0.75 mg tablet, 1.5 mg tablet, 3 mg tablet)</i>	Tier 2	PA, MO
<i>ethinyl estradiol/drospirenone (0.02-3(28) tablet, 0.03mg-3mg tablet)</i>	Tier 2	MO
<i>ethynodiol diacetate-ethinyl estradiol (1 mg-35mcg tablet, 1 mg-50mcg tablet)</i>	Tier 2	MO
<i>levonorgestrel-ethinyl estradiol (0.1-0.02mg tablet, 0.15-0.03 tablet, 0.15-0.03 tbdspk 3mo, 6-5-10 tablet, 90-20 mcg tablet)</i>	Tier 2	MO
MENEST (0.3 MG TABLET, 0.625 MG TABLET, 1.25 MG TABLET)	Tier 3	PA, MO
<i>norethindrone acetate-ethinyl estradiol (0.5mg-2.5 tablet, 1.5-0.03mg tablet, 1mg-20mcg tablet, 1mg-5mcg tablet)</i>	Tier 2	MO
<i>norethindrone acetate-ethinyl estradiol/ferrous fumarate (1.5-30(21) tablet, 1mg-20(21) tablet, 1mg-20(24) tablet, 5-7-9-7 tablet)</i>	Tier 2	MO
<i>norethindrone-ethinyl estradiol (0.4-0.035 tablet, 0.5-0.035 tablet, 1 mg-35mcg tablet, 7 days x 3 tablet, 7-9-5 tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (SEX HORMONES/MODIFIERS)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>norgestimate-ethinyl estradiol (0.25-0.035 tablet, 7daysx3 28 tablet, 7daysx3 lo tablet)</i>	Tier 2	MO
<i>norgestrel-ethinyl estradiol (0.3-0.03mg tablet, 0.5 mg-50 tablet)</i>	Tier 2	MO
PREMARIN (0.3 MG TABLET, 0.45 MG TABLET, 0.625 MG TABLET, 0.9 MG TABLET, 1.25 MG TABLET)	Tier 3	PA, MO
PREMARIN VAGINAL CREAM-APPL	Tier 3	MO
PREMPHASE 0.625-5 MG TABLET	Tier 3	PA, MO
PREMPRO (0.3 MG-1.5 MG TABLET, 0.45-1.5 MG TABLET, 0.625-2.5 MG TABLET, 0.625-5 MG TABLET)	Tier 3	PA, MO
PROGESTINS		
DEPO-PROVERA 400 MG/ML VIAL	Tier 3	MO
<i>medroxyprogesterone acetate (10 mg tablet, 150 mg/ml syringe, 150 mg/ml vial, 2.5 mg tablet, 5 mg tablet)</i>	Tier 2	MO
<i>megestrol acetate (20 mg tablet, 40 mg tablet)</i>	Tier 2	
<i>megestrol acetate (400mg/10ml oral susp, 625mg/5ml oral susp)</i>	Tier 2	MO
<i>norethindrone 0.35 mg tablet</i>	Tier 2	MO
<i>norethindrone acetate 5 mg tablet</i>	Tier 2	MO
<i>progesterone, micronized (100 mg capsule, 200 mg capsule)</i>	Tier 2	MO
SELECTIVE ESTROGEN RECEPTOR MODIFYING AGENTS		
OSPHENA 60 MG TABLET	Tier 3	PA, MO
<i>raloxifene hcl 60 mg tablet</i>	Tier 2	QL (30 PER 30 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HORMONAL AGENTS, STIMULANT/REPLACEMENT/MODIFYING (THYROID)		
<i>levothyroxine sodium (100 mcg tablet, 112 mcg tablet, 125 mcg tablet, 137 mcg tablet, 150 mcg tablet, 175 mcg tablet, 200 mcg tablet, 25 mcg tablet, 300 mcg tablet, 50 mcg tablet, 75 mcg tablet, 88 mcg tablet)</i>	Tier 2	MO
LEVOXYL (100 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 25 MCG TABLET, 50 MCG TABLET, 75 MCG TABLET, 88 MCG TABLET)	Tier 3	MO
<i>liothyronine sodium (25 mcg tablet, 5 mcg tablet, 50 mcg tablet)</i>	Tier 2	MO
SYNTHROID (100 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 137 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 25 MCG TABLET, 300 MCG TABLET, 50 MCG TABLET, 75 MCG TABLET, 88 MCG TABLET)	Tier 3	MO
UNITHROID (100 MCG TABLET, 112 MCG TABLET, 125 MCG TABLET, 150 MCG TABLET, 175 MCG TABLET, 200 MCG TABLET, 25 MCG TABLET, 300 MCG TABLET, 50 MCG TABLET, 75 MCG TABLET, 88 MCG TABLET)	Tier 3	MO

HORMONAL AGENTS, SUPPRESSANT (PITUITARY)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HORMONAL AGENTS, SUPPRESSANT (PITUITARY)		
<i>cabergoline 0.5 mg tablet</i>	Tier 2	MO
ELIGARD (22.5 MG SYRINGE KIT, 30 MG SYRINGE KIT, 45 MG SYRINGE KIT, 7.5 MG SYRINGE KIT)	Tier 3	MO
FIRMAGON 2 X 120 MG KIT	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, SUPPRESSANT (PITUITARY)

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
FIRMAGON 80 MG KIT	Tier 3	MO
<i>leuprolide acetate 1 mg/0.2ml kit</i>	Tier 2	
LUPRON DEPOT (DEPOT 11.25 MG 3MO KIT, DEPOT 22.5 MG 3MO KIT, DEPOT 3.75 MG KIT, DEPOT 45 MG 6MO KIT, DEPOT 7.5 MG KIT, DEPOT-4 MONTH KIT)	Tier 3	
LUPRON DEPOT-PED (11.25 MG 3MO, 11.25 MG KIT, 15 MG KIT, 30 MG 3MO KIT, 7.5 MG KIT)	Tier 3	
<i>octreotide acetate (100 mcg/ml ampul, 100 mcg/ml vial, 1000mcg/ml vial, 200 mcg/ml vial, 50 mcg/ml ampul, 50 mcg/ml vial, 500 mcg/ml ampul, 500 mcg/ml vial)</i>	Tier 2	BvD, MO
SIGNIFOR (0.3 MG/ML AMPULE, 0.6 MG/ML AMPULE, 0.9 MG/ML AMPULE)	Tier 3	PA, LA
SIGNIFOR LAR (10 MG KIT, 10 MG VIAL, 30 MG KIT, 30 MG VIAL)	Tier 3	PA
SOMATULINE DEPOT (120 MG/0.5 ML, 60 MG/0.2 ML, 90 MG/0.3 ML)	Tier 3	PA
SOMAVERT (10 MG VIAL, 15 MG VIAL, 20 MG VIAL, 25 MG VIAL, 30 MG VIAL)	Tier 3	PA
SYNAREL 2 MG/ML NASAL SPRAY	Tier 3	PA
TRELSTAR (11.25 MG VIAL, 22.5 MG VIAL, 3.75 MG VIAL)	Tier 3	BvD

HORMONAL AGENTS, SUPPRESSANT (THYROID)

Name of drug	What the drug will cost you(tier level)	Necessary actions, restrictions, or limits on use
ANTITHYROID AGENTS		
<i>methimazole (10 mg tablet, 5 mg tablet)</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

HORMONAL AGENTS, SUPPRESSANT (THYROID)

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>propylthiouracil 50 mg tablet</i>	Tier 2	MO

IMMUNOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANGIOEDEMA AGENTS		
HAEGARDA (2,000 UNIT VIAL, 3,000 UNIT VIAL)	Tier 3	PA, LA
<i>icatibant acetate 30 mg/3 ml syringe</i>	Tier 2	PA
RUCONEST 2,100 UNIT VIAL	Tier 3	PA
IMMUNE SUPPRESSANTS		
ASTAGRAF XL (0.5 MG CAPSULE, 1 MG CAPSULE, 5 MG CAPSULE)	Tier 3	PA, MO
<i>azathioprine 50 mg tablet</i>	Tier 2	BvD, MO
<i>azathioprine sodium 100 mg vial</i>	Tier 2	BvD
<i>cyclosporine (100 mg capsule, 25 mg capsule)</i>	Tier 2	BvD, MO
<i>cyclosporine 250 mg/5ml ampul</i>	Tier 2	BvD
<i>cyclosporine, modified (100 mg capsule, 100 mg/ml solution, 25 mg capsule, 50 mg capsule)</i>	Tier 2	BvD, MO
ENBREL (25 MG KIT, 25 MG/0.5 ML SYRINGE, 50 MG/ML SYRINGE)	Tier 3	PA
ENBREL 50 MG/ML SURECLICK	Tier 3	PA
ENVARSUS XR (0.75 MG TABLET, 1 MG TABLET, 4 MG TABLET)	Tier 3	PA, MO
HUMIRA (10 MG/0.2 ML SYRINGE, 20 MG/0.4 ML SYRINGE, 40 MG/0.8 ML SYRINGE)	Tier 3	PA
HUMIRA PEDI CROHN 40 MG/0.8 ML	Tier 3	PA
HUMIRA PEN 40 MG/0.8 ML	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

IMMUNOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMIRA PEN CROHN-UC-HS 40 MG	Tier 3	PA
HUMIRA PEN PS-UV-ADOL HS 40 MG	Tier 3	PA
HUMIRA(CF) (10 MG/0.1 ML SYRING, 20 MG/0.2 ML SYRING, 40 MG/0.4 ML SYRING)	Tier 3	PA
HUMIRA(CF) PEDIATRIC CROHN'S (80-40 MG, 80MG/0.8)	Tier 3	PA
HUMIRA(CF) PEN 40 MG/0.4 ML	Tier 3	PA
HUMIRA(CF) PEN CRHN-UC-HS 80MG	Tier 3	PA
HUMIRA(CF) PEN PS-UV-AHS 80-40	Tier 3	PA
KINERET 100 MG/0.67 ML SYRINGE	Tier 3	PA
<i>methotrexate sodium 2.5 mg tablet</i>	Tier 2	MO
<i>methotrexate sodium 25 mg/ml vial</i>	Tier 2	
<i>methotrexate sodium/pf (1 g vial, 25 mg/ml vial)</i>	Tier 2	
<i>mycophenolate mofetil (200 mg/ml susp recon, 250 mg capsule, 500 mg tablet)</i>	Tier 2	BvD, MO
<i>mycophenolate sodium (180 mg tablet dr, 360 mg tablet dr)</i>	Tier 2	BvD, MO
NULOJIX 250 MG VIAL	Tier 3	BvD
PROGRAF (0.2 MG GRANULE PACKET, 1 MG GRANULE PACKET)	Tier 3	PA, MO
PROGRAF 5 MG/ML AMPULE	Tier 3	BvD
<i>sirolimus (1 mg/ml solution, 2 mg tablet)</i>	Tier 2	BvD
<i>sirolimus 0.5 mg tablet</i>	Tier 2	QL (30 PER 30 DAYS), BvD, MO
<i>sirolimus 1 mg tablet</i>	Tier 2	BvD, MO
<i>tacrolimus (0.5 mg capsule, 1 mg capsule, 5 mg capsule)</i>	Tier 2	BvD, MO
XATMEP 2.5 MG/ML ORAL SOLUTION	Tier 3	PA, MO
XELJANZ (10 MG TABLET, 5 MG TABLET)	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

IMMUNOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XELJANZ XR 11 MG TABLET	Tier 3	PA
ZORTRESS (0.25 MG TABLET, 0.5 MG TABLET, 0.75 MG TABLET, 1 MG TABLET)	Tier 3	PA
IMMUNIZING AGENTS, PASSIVE		
BIVIGAM LIQUID 10% VIAL	Tier 3	PA
CARIMUNE NF NANOFILTERED (12 GM VIAL, 6 GM VIAL)	Tier 3	PA
GAMMAGARD LIQUID 10% VIAL	Tier 3	PA
GAMMAGARD S-D (10 G (IGA<1) SOL, 5 G (IGA<1) SOLN)	Tier 3	PA
GAMUNEX-C (1 GRAM/10 ML VIAL, 10 GRAM/100 ML VIAL, 2.5 GRAM/25 ML VIAL, 20 GRAM/200 ML VIAL, 5 GRAM/50 ML VIAL)	Tier 3	PA
IMMUNOMODULATORS		
ACTIMMUNE 100 MCG/0.5 ML VIAL	Tier 3	PA, LA
ARCALYST 220 MG INJECTION	Tier 3	PA, LA
KEVZARA (150 MG/1.14 ML SYRINGE, 200 MG/1.14 ML SYRINGE)	Tier 3	PA
<i>leflunomide (10 mg tablet, 20 mg tablet)</i>	Tier 2	MO
OTEZLA (28 DAY STARTER PACK, 30 MG TABLET, STARTER PACK)	Tier 3	PA
RIDAURA 3 MG CAPSULE	Tier 3	MO
SIMULECT 20 MG VIAL	Tier 3	BvD
VACCINES		
ACTHIB (VIAL, WITH DILUENT)	Tier 3	
ADACEL TDAP (SYRINGE, VIAL)	Tier 3	
BCG VACCINE (TICE STRAIN) VIAL	Tier 3	
BEXSERO PREFILLED SYRINGE	Tier 3	
BOOSTRIX TDAP (SYRINGE, VIAL)	Tier 3	
DAPTACEL DTAP VACCINE	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

IMMUNOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DIPHTHERIA-TETANUS TOXOIDS-PED	Tier 3	
ENGERIX-B 20 MCG/ML SYRN	Tier 3	BvD
ENGERIX-B PEDI 10 MCG/0.5 SYRN	Tier 3	BvD
FLUARIX QUAD 2018-2019 SYRINGE	Tier 3	
FLUBLOK QUAD 2018-2019 SYRINGE	Tier 3	
FLULAVAL QUAD 2018-2019 (SYR, VIAL)	Tier 3	
FLUZONE QUAD 2018-2019 (SYRINGE, VIAL)	Tier 3	
GARDASIL 9 (9 SYRINGE, 9 VIAL)	Tier 3	
HAVRIX (1,440 UNITS/ML SYRINGE, 1,440 UNITS/ML VIAL, 720 UNIT/0.5 ML SYRINGE, 720 UNITS/0.5 ML VIAL)	Tier 3	
HIBERIX VACCINE WITH DILUENT	Tier 3	
IMOVAX RABIES VACCINE+DILUENT	Tier 3	
INFANRIX DTAP VIAL	Tier 3	
IPOL VIAL	Tier 3	
IXIARO (6 MCG/0.5 ML SYRINGE, 6 UNIT(6 MCG)/0.5ML SYR)	Tier 3	
KINRIX (TIP-LOK SYRINGE, VIAL)	Tier 3	
M-M-R II VACCINE WITH DILUENT	Tier 3	
MENACTRA VIAL	Tier 3	
MENVEO A-C-Y-W-135-DIP VIAL KT	Tier 3	
PEDIARIX 0.5 ML SYRINGE	Tier 3	
PEDVAXHIB VACCINE VIAL	Tier 3	
PENTACEL ACTHIB COMPONENT VIAL	Tier 3	
PENTACEL DTAP-IPV COMPONENT VL	Tier 3	
PENTACEL VIAL KIT	Tier 3	
PNEUMOVAX 23 (23 SYRINGE, 23 VIAL)	Tier 3	
PREVNAR 13 SYRINGE	Tier 3	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

IMMUNOLOGICAL AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PROQUAD VIAL	Tier 3	
QUADRACEL DTAP-IPV VIAL	Tier 3	
RABAVERT RABIES VACC W-DILUENT	Tier 3	
RECOMBIVAX HB (10 MCG/ML SYR, 10 MCG/ML VIAL, 40 MCG/ML VIAL, 5 MCG/0.5 ML SYR)	Tier 3	BvD
ROTARIX VACCINE SUSPENSION	Tier 3	
ROTATEQ VACCINE	Tier 3	
SHINGRIX VIAL KIT	Tier 3	QL (2 PER 365 DAYS OVER TIME)
TDVAX VIAL	Tier 3	
TENIVAC SYRINGE	Tier 3	
TRUMENBA 120 MCG/0.5 ML VACCIN	Tier 3	
TWINRIX VACCINE SYRINGE	Tier 3	BvD
TYPHIM VI (25 MCG/0.5 ML AL, 25 MCG/0.5 ML SYRNG)	Tier 3	
VAQTA (25 UNITS/0.5 ML SYRINGE, 25 UNITS/0.5 ML VIAL, 50 UNITS/ML SYRINGE, 50 UNITS/ML VIAL)	Tier 3	
VARIVAX VACCINE WITH DILUENT	Tier 3	
XOFLUZA (20 MG TAB (40 MG DOSE), 40 MG TAB (80 MG DOSE))	Tier 3	QL (2 PER 180 DAYS OVER TIME)
YF-VAX (1 DOSE VIAL, 5 DOSE VIAL)	Tier 3	
ZOSTAVAX VIAL	Tier 3	

INFLAMMATORY BOWEL DISEASE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
AMINOSALICYLATES		
<i>balsalazide disodium 750 mg capsule</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

INFLAMMATORY BOWEL DISEASE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DIPENTUM 250 MG CAPSULE	Tier 3	MO
<i>mesalamine (1000 mg supp.rect, 4 g/60 ml enema)</i>	Tier 2	MO
<i>mesalamine 400 mg cap(drtab)</i>	Tier 2	QL (12 PER 1 DAYS), MO
<i>mesalamine w/cleansing wipes 4 g/60 ml enema kit</i>	Tier 2	MO
PENTASA (250 MG CAPSULE, 500 MG CAPSULE)	Tier 3	QL (480 PER 30 DAYS), MO
GLUCOCORTICOIDS		
<i>budesonide 3 mg capdr - er</i>	Tier 2	
<i>hydrocortisone 100mg/60ml enema</i>	Tier 2	
SULFONAMIDES		
<i>sulfasalazine (500 mg tablet, 500 mg tablet dr)</i>	Tier 2	MO

METABOLIC BONE DISEASE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
METABOLIC BONE DISEASE AGENTS		
<i>alendronate sodium (10 mg tablet, 40 mg tablet, 5 mg tablet)</i>	Tier 1	QL (30 PER 30 DAYS), MO
<i>alendronate sodium (35 mg tablet, 70 mg tablet)</i>	Tier 1	QL (4 PER 28 DAYS), MO
<i>calcitonin, salmon, synthetic 200/spray spray/pump</i>	Tier 2	PA, MO
<i>calcitriol (0.25 mcg capsule, 0.5 mcg capsule)</i>	Tier 2	BvD, MO
<i>cinacalcet hcl (60 mg tablet, 90 mg tablet)</i>	Tier 2	PA, MO
<i>cinacalcet hcl 30 mg tablet</i>	Tier 2	PA, QL (30 PER 30 DAYS), MO
<i>doxercalciferol 0.5 mcg capsule</i>	Tier 2	QL (30 PER 30 DAYS), BvD, MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

METABOLIC BONE DISEASE AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>doxercalciferol 1 mcg capsule</i>	Tier 2	QL (90 PER 30 DAYS), BvD, MO
<i>doxercalciferol 2.5 mcg capsule</i>	Tier 2	BvD, MO
<i>etidronate disodium (200 mg tablet, 400 mg tablet)</i>	Tier 2	MO
FORTEO 600 MCG/2.4 ML PEN INJ	Tier 3	PA, QL (3 PER 28 DAYS)
<i>ibandronate sodium 150 mg tablet</i>	Tier 2	QL (1 PER 30 DAYS), MO
NATPARA (100 MCG DOSE CARTRIDGE, 25 MCG DOSE CARTRIDGE, 50 MCG DOSE CARTRIDGE, 75 MCG DOSE CARTRIDGE)	Tier 3	PA, LA
<i>paricalcitol (1 mcg capsule, 2 mcg capsule, 4 mcg capsule)</i>	Tier 2	MO
PROLIA 60 MG/ML SYRINGE	Tier 3	PA, MO
<i>risedronate sodium (35 mg tablet, 35 mg tablet dr)</i>	Tier 2	QL (4 PER 28 DAYS), MO
<i>risedronate sodium 150 mg tablet</i>	Tier 2	QL (1 PER 30 DAYS), MO
<i>risedronate sodium 5 mg tablet</i>	Tier 2	QL (30 PER 30 DAYS), MO
TYMLOS 80 MCG DOSE PEN INJECTR	Tier 3	PA
XGEVA 120 MG/1.7 ML VIAL	Tier 3	PA
<i>zoledronic acid 4 mg vial</i>	Tier 2	MO
<i>zoledronic acid 4 mg/5 ml vial</i>	Tier 2	BvD, MO
<i>zoledronic acid in mannitol and water for injection (5 mg/100ml pggyl btl, 5 mg/100ml piggyback)</i>	Tier 2	
ZOMETA 4 MG/100 ML INJECTION	Tier 3	BvD

MISCELLANEOUS THERAPEUTIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MISCELLANEOUS THERAPEUTIC AGENTS		
<i>alcohol 70% pads</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

MISCELLANEOUS THERAPEUTIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>gauze bandage 2" x 2" bandage</i>	Tier 2	
<i>insulin pen needles</i>	Tier 2	MO
<i>insulin syringe 0.3 ml</i>	Tier 2	MO
<i>insulin syringe 0.5 ml</i>	Tier 2	MO
<i>insulin syringe 1 ml</i>	Tier 2	MO

OPHTHALMIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OPHTHALMIC AGENTS, OTHER		
<i>bacitracin/polymyxin b sulfate 500-10k/g oint. (g)</i>	Tier 2	
CYSTARAN 0.44% EYE DROPS	Tier 3	PA, LA
LACRISERT 5 MG EYE INSERT	Tier 3	
<i>neomycin sulf/bacitracin/poly 3.5mg-400 oint. (g)</i>	Tier 2	
<i>neomycin/bacit/p-myx/hydrocort 3.5-10k-1 oint. (g)</i>	Tier 2	
<i>neomycin/polymyxin b sulfate/dexamethasone (0.1 % drops susp, 3.5-10k-.1 oint. (g))</i>	Tier 2	
<i>neomycin/polymyxin b/hydrocort 3.5-10k-10 drops susp</i>	Tier 2	
<i>neomycin/polymyxn b/gramicidin 1.75mg-10k drops</i>	Tier 2	
<i>polymyxin b sulf/trimethoprim 10000-1/ml drops</i>	Tier 2	
<i>proparacaine hcl 0.5 % drops</i>	Tier 2	
RESTASIS 0.05% EYE EMULSION	Tier 3	PA, QL (64 PER 30 DAYS), MO
RESTASIS MULTIDOSE 0.05% EYE	Tier 3	PA, QL (5.5 PER 30 DAYS), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

OPHTHALMIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>sulfacetamide/prednisolone sp 10 %-0.23% drops</i>	Tier 2	
<i>tobramycin/dexamethasone 0.3 %-0.1% drops susp</i>	Tier 2	
OPHTHALMIC ANTI-ALLERGY AGENTS		
<i>azelastine hcl 0.05 % drops</i>	Tier 2	
<i>cromolyn sodium 4 % drops</i>	Tier 2	
<i>olopatadine hcl 0.1 % drops</i>	Tier 2	QL (5 PER 30 DAYS)
<i>olopatadine hcl 0.2 % drops</i>	Tier 2	
OPHTHALMIC ANTI-INFLAMMATORIES		
<i>bromfenac sodium 0.09 % drops</i>	Tier 2	
<i>dexamethasone sodium phosphate 0.1 % drops</i>	Tier 2	
<i>diclofenac sodium 0.1 % drops</i>	Tier 2	
<i>fluorometholone 0.1 % drops susp</i>	Tier 2	
<i>flurbiprofen sodium 0.03 % drops</i>	Tier 2	
<i>ketorolac tromethamine (0.4 % drops, 0.5 % drops)</i>	Tier 2	
<i>loteprednol etabonate 0.5 % drops susp</i>	Tier 2	
MAXIDEX 0.1% EYE DROPS	Tier 3	
<i>prednisolone acetate 1 % drops susp</i>	Tier 2	
<i>prednisolone sodium phosphate 1 % drops</i>	Tier 2	
OPHTHALMIC ANTIGLAUCOMA AGENTS		
ALPHAGAN P 0.1% DROPS	Tier 3	MO
AZOPT 1% EYE DROPS	Tier 3	MO
<i>betaxolol hcl 0.5 % drops</i>	Tier 2	MO
<i>brimonidine tartrate (0.15 % drops, 0.2 % drops)</i>	Tier 2	MO
<i>carteolol hcl 1 % drops</i>	Tier 2	MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

OPHTHALMIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>dorzolamide hcl 2 % drops</i>	Tier 2	QL (10 PER 30 DAYS), MO
<i>dorzolamide hcl/timolol maleate 22.3-6.8/1 drops</i>	Tier 2	QL (10 PER 30 DAYS), MO
<i>levobunolol hcl 0.5 % drops</i>	Tier 2	MO
<i>methazolamide (25 mg tablet, 50 mg tablet)</i>	Tier 2	MO
<i>metipranolol 0.3 % drops</i>	Tier 2	MO
PHOSPHOLINE IODIDE 0.125%	Tier 3	MO
<i>pilocarpine hcl (1 % drops, 2 % drops, 4 % drops)</i>	Tier 2	MO
<i>timolol maleate (0.25 % drops, 0.25 % sol-gel, 0.5 % drops, 0.5 % sol-gel)</i>	Tier 2	MO
OPHTHALMIC PROSTAGLANDIN AND PROSTAMIDE ANALOGS		
<i>latanoprost 0.005 % drops</i>	Tier 2	MO
TRAVATAN Z 0.004% EYE DROP	Tier 3	QL (5 PER 30 DAYS OVER TIME), MO

OTIC AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OTIC AGENTS		
<i>fluocinolone acetonide oil 0.01 % drops</i>	Tier 2	
<i>hydrocortisone/acetic acid 1 %-2 % drops</i>	Tier 2	
<i>neomycin sulfate/polymyxin b sulfate/hydrocortisone (drops susp, solution)</i>	Tier 2	

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

RESPIRATORY TRACT/PULMONARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-INFLAMMATORIES, INHALED CORTICOSTEROIDS		
<i>budesonide (0.25mg/2ml ampul-neb, 0.5 mg/2ml ampul-neb, 1 mg/2 ml ampul-neb)</i>	Tier 2	PA, MO
FLOVENT DISKUS (100 MCG DISKUS, 250 MCG DISKUS, 50 MCG DISKUS)	Tier 3	MO
FLOVENT HFA (HFA 110 MCG INHALER, HFA 220 MCG INHALER, HFA 44 MCG INHALER)	Tier 3	MO
<i>flunisolide 25 mcg spray</i>	Tier 2	MO
<i>fluticasone propionate 50 mcg spray susp</i>	Tier 2	MO
PULMICORT FLEXHALER (180 MCG FLEXHALER, 90 MCG FLEXHALER)	Tier 3	MO
QVAR REDHALER (40 MCG, 80 MCG)	Tier 3	MO
ANTIHISTAMINES		
<i>azelastine hcl 137 mcg spray/pump</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>clemastine fumarate 2.68 mg tablet</i>	Tier 2	PA
<i>cyproheptadine hcl 4 mg tablet</i>	Tier 2	PA
<i>desloratadine 5 mg tablet</i>	Tier 2	MO
<i>hydroxyzine hcl (10 mg tablet, 10 mg/5 ml solution, 25 mg tablet, 50 mg tablet, 50 mg/25ml solution)</i>	Tier 2	PA
<i>promethazine hcl (12.5 mg tablet, 25 mg tablet, 6.25mg/5ml syrup)</i>	Tier 2	PA
ANTILEUKOTRIENES		
<i>montelukast sodium (10 mg tablet, 4 mg tab chew, 5 mg tab chew)</i>	Tier 2	MO
<i>zafirlukast (10 mg tablet, 20 mg tablet)</i>	Tier 2	QL (60 PER 30 DAYS), MO
BRONCHODILATORS, ANTICHOLINERGIC		
ATROVENT 17 MCG HFA INHALER	Tier 3	MO
INCRUSE ELLIPTA 62.5 MCG INH	Tier 3	QL (30 PER 30 DAYS OVER TIME), MO

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

RESPIRATORY TRACT/PULMONARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ipratropium bromide 0.2 mg/ml solution</i>	Tier 2	BvD, MO
<i>ipratropium bromide 21 mcg spray</i>	Tier 2	MO
<i>ipratropium bromide 42 mcg spray</i>	Tier 2	
SPIRIVA 18 MCG CP-HANDIHALER	Tier 3	QL (30 PER 30 DAYS), MO
SPIRIVA RESPIMAT (1.25 MCG INH, 2.5 MCG INH)	Tier 3	QL (4 PER 30 DAYS), MO
BRONCHODILATORS, SYMPATHOMIMETIC		
<i>albuterol 90mg hfa inhaler (generic proair)</i>	Tier 2	QL (17 PER 30 DAYS OVER TIME), MO
<i>albuterol sulfate (0.63mg/3ml vial-neb, 1.25mg/3ml vial-neb, 2.5 mg/0.5 vial-neb, 2.5 mg/3ml vial-neb, 5 mg/ml solution)</i>	Tier 2	BvD, MO
<i>albuterol sulfate (2 mg tablet, 2 mg/5 ml syrup, 4 mg tab er 12h, 4 mg tablet, 8 mg tab er 12h)</i>	Tier 2	MO
<i>epinephrine (0.15/0.15 auto injct, 0.15mg/0.3 auto injct, 0.3mg/0.3 auto injct)</i>	Tier 2	
<i>levalbuterol hcl (0.31mg/3ml vial-neb, 0.63mg/3ml vial-neb, 1.25mg/0.5 vial-neb, 1.25mg/3ml vial-neb)</i>	Tier 2	PA, MO
<i>metaproterenol sulfate (10 mg tablet, 10 mg/5 ml syrup, 20 mg tablet)</i>	Tier 2	MO
SEREVENT DISKUS 50 MCG	Tier 3	PA, MO
STRIVERDI RESPIMAT INHAL SPRAY	Tier 3	MO
<i>terbutaline sulfate (2.5 mg tablet, 5 mg tablet)</i>	Tier 2	MO
CYSTIC FIBROSIS AGENTS		
CAYSTON 75 MG INHAL SOLUTION	Tier 3	PA, LA
KALYDECO (150 MG TABLET, 25 MG GRANULES PACKET, 50 MG GRANULES PACKET, 75 MG GRANULES PACKET)	Tier 3	PA, LA, QL (2 PER 1 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

RESPIRATORY TRACT/PULMONARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ORKAMBI (100 MG-125 MG TABLET, 200 MG-125 MG TABLET)	Tier 3	PA, LA
SYMDEKO 100/150 MG-150 MG TABS	Tier 3	PA, LA
SYMDEKO 50/75 MG-75 MG TABLETS	Tier 3	PA, LA, QL (2 PER 1 DAYS)
<i>tobramycin in 0.225% sod chlor 300 mg/5ml ampul-neb</i>	Tier 2	PA
<i>tobramycin/nebulizer 300 mg/5ml ampul-neb</i>	Tier 2	PA
MAST CELL STABILIZERS		
<i>cromolyn sodium 20 mg/2 ml ampul-neb</i>	Tier 2	BvD, MO
PHOSPHODIESTERASE INHIBITORS, AIRWAYS DISEASE		
DALIRESP (250 MCG TABLET, 500 MCG TABLET)	Tier 3	PA, MO
THEO-24 (ER 100 MG CAPSULE, ER 200 MG CAPSULE, ER 300 MG CAPSULE, ER 400 MG CAPSULE)	Tier 3	MO
<i>theophylline anhydrous (100 mg tab er 12h, 200 mg tab er 12h, 300 mg tab er 12h, 400 mg tab er 24h, 600 mg tab er 24h, 80 mg/15ml elixir, 80 mg/15ml solution)</i>	Tier 2	MO
PULMONARY ANTIHYPERTENSIVES		
ADEMPAS (0.5 MG TABLET, 1 MG TABLET, 1.5 MG TABLET, 2 MG TABLET, 2.5 MG TABLET)	Tier 3	PA, LA
<i>ambrisentan (10 mg tablet, 5 mg tablet)</i>	Tier 2	PA, LA, QL (1 PER 1 DAYS)
<i>bosentan 125 mg tablet</i>	Tier 2	PA, LA, QL (2 PER 1 DAYS)
<i>bosentan 62.5 mg tablet</i>	Tier 2	PA, LA, QL (4 PER 1 DAYS)
<i>sildenafil citrate 20 mg tablet</i>	Tier 2	PA, MO
<i>tadalafil 20 mg tablet</i>	Tier 2	PA
TRACLEER 32 MG TABLET FOR SUSP	Tier 3	PA, LA, QL (120 PER 30 DAYS)

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

RESPIRATORY TRACT/PULMONARY AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UPTRAVI (1,000 MCG TABLET, 1,200 MCG TABLET, 1,400 MCG TABLET, 1,600 MCG TABLET, 200 MCG TABLET, 200-800 TITRATION PACK, 400 MCG TABLET, 600 MCG TABLET, 800 MCG TABLET)	Tier 3	PA, LA
RESPIRATORY TRACT AGENTS, OTHER		
<i>acetylcysteine 200 mg/ml vial</i>	Tier 2	BvD
ANORO ELLIPTA 62.5-25 MCG INH	Tier 3	PA, QL (60 PER 30 DAYS), MO
BEVESPI AEROSPHERE INHALER	Tier 3	QL (10.7 PER 28 DAYS OVER TIME), MO
COMBIVENT RESPIMAT 20-100 MCG	Tier 3	QL (8 PER 30 DAYS), MO
ESBRIET (267 MG CAPSULE, 267 MG TABLET, 801 MG TABLET)	Tier 3	PA, LA
<i>fluticasone propionate/salmeterol xinafoate (100-50 mcg blst w/dev, 250-50 mcg blst w/dev, 500-50 mcg blst w/dev)</i>	Tier 2	QL (60 PER 30 DAYS), MO
<i>fluticasone propionate/salmeterol xinafoate (113-14 mcg aer pow ba, 232-14 mcg aer pow ba, 55-14 mcg aer pow ba)</i>	Tier 2	QL (1 PER 30 DAYS), MO
<i>ipratropium/albuterol sulfate 0.5-3mg/3 ampul-neb</i>	Tier 2	BvD, MO
OFEV (100 MG CAPSULE, 150 MG CAPSULE)	Tier 3	PA, LA
PULMOZYME 1 MG/ML AMPUL	Tier 3	BvD
<i>tobramycin in 0.225% sod chlor 300 mg/5ml ampul-neb</i>	Tier 2	PA
TRELEGY ELLIPTA 100-62.5-25	Tier 3	QL (60 PER 30 DAYS OVER TIME), MO
XOLAIR 150 MG VIAL	Tier 3	PA
ZEMAIRA 1,000 MG VIAL	Tier 3	PA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

SKELETAL MUSCLE RELAXANTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SKELETAL MUSCLE RELAXANTS		
<i>carisoprodol (250 mg tablet, 350 mg tablet)</i>	Tier 2	PA, QL (90 PER 30 DAYS)
<i>chlorzoxazone 500 mg tablet</i>	Tier 2	PA
<i>cyclobenzaprine hcl (10 mg tablet, 5 mg tablet)</i>	Tier 2	PA, QL (90 PER 30 DAYS)
<i>methocarbamol (500 mg tablet, 750 mg tablet)</i>	Tier 2	PA

SLEEP DISORDER AGENTS

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
GABA RECEPTOR MODULATORS		
<i>temazepam (15 mg capsule, 30 mg capsule)</i>	Tier 2	QL (30 PER 30 DAYS)
<i>triazolam (0.125 mg tablet, 0.25 mg tablet)</i>	Tier 2	QL (30 PER 30 DAYS)
<i>zaleplon (10 mg capsule, 5 mg capsule)</i>	Tier 2	
<i>zolpidem tartrate (10 mg tablet, 5 mg tablet)</i>	Tier 2	QL (30 PER 30 DAYS)
SLEEP DISORDERS, OTHER		
HETLIOZ 20 MG CAPSULE	Tier 3	PA, LA
<i>modafinil (100 mg tablet, 200 mg tablet)</i>	Tier 2	PA, MO
<i>ramelteon 8 mg tablet</i>	Tier 2	
XYREM 500 MG/ML ORAL SOLUTION	Tier 3	PA, LA

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ABREVA 10% CREAM	Tier 4	QL (2 PER 30 DAYS), NPD
ALLI 60 MG CAPSULE	Tier 4	PA, NPD
<i>aluminum hydroxide 320 mg/5ml oral susp</i>	Tier 4	NPD
ARTIFICIAL TEARS 1.4% DROPS	Tier 4	NPD
<i>asa/calcium carb/mag/aluminum 500 mg tablet</i>	Tier 4	NPD
<i>ascorbate calcium 500 mg tablet</i>	Tier 4	NPD
<i>ascorbic acid ((100 mg tablet, 1000 mg tablet, 250 mg tablet), 100 mg tablet, 1000 mg tablet)</i>	Tier 4	NPD
<i>aspirin ((300 mg supp.rect, 325 mg tablet dr, 500 mg tablet dr, 600 mg supp.rect, 81 mg tab chew, 81 mg tablet dr), 300 mg supp.rect, 325 mg tablet dr, 500 mg tablet dr, 600 mg supp.rect, 81 mg tab chew)</i>	Tier 4	NPD
<i>aspirin 325mg tablet</i>	Tier 4	NPD
<i>aspirin 81mg tablet</i>	Tier 4	NPD
<i>aspirin/calcium carbonate/mag 325 mg tablet</i>	Tier 4	NPD
<i>bacitracin 500 unit/g oint. (g)</i>	Tier 4	NPD
<i>bacitracin zinc 500 unit/g oint. (g)</i>	Tier 4	NPD
<i>bacitracin zinc/polymyxin b 500-10k/g oint. (g)</i>	Tier 4	NPD
<i>bacitracin/polymyxin b sulfate 500-10k/g oint. (g)</i>	Tier 4	NPD
<i>benzonatate ((100 mg capsule, 200 mg capsule), 100 mg capsule)</i>	Tier 4	NPD
<i>benzoyl peroxide ((10 % cleanser, 10 % gel (gram)), 10 % cleanser)</i>	Tier 4	NPD
<i>bisacodyl ((10 mg supp.rect, 5 mg tablet dr), 10 mg supp.rect)</i>	Tier 4	NPD
<i>bismuth subsalicylate ((262 mg tab chew, 262 mg tablet, 525mg/15ml oral susp), 262 mg tab chew, 262 mg tablet)</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>calamine/zinc oxide 8 %-8 % lotion</i>	Tier 4	NPD
<i>calcium carbonate ((215(500)mg tab chew, 260mg(648) tablet, 300mg(750) tab chew), 215(500)mg tab chew, 260mg(648) tablet)</i>	Tier 4	NPD
<i>calcium carbonate ((tab chew, tablet, 600 mg tablet), tab chew, tablet)</i>	Tier 4	NPD
<i>calcium carbonate/cholecalciferol (vitamin d3) (carbonate/cholecalciferol (vitamin d3) (250 mg-125 tablet, 500 mg-125 tablet, 500 mg-200 tablet, 500 mg-400 tablet, 500 mg-600 tablet), carbonate/vitamin d3 250 mg-125 tablet, carbonate/vitamin d3 500 mg-125 tablet, carbonate/vitamin d3 500 mg-200 tablet, carbonate/vitamin d3 500 mg-400 tablet)</i>	Tier 4	NPD
<i>calcium gluconate ((45(500) mg tablet, 60(650) mg tablet), 45(500) mg tablet)</i>	Tier 4	NPD
<i>cetirizine hcl ((10 mg tablet, 5 mg tablet), 10 mg tablet)</i>	Tier 4	NPD
<i>chlorpheniramine maleate 2 mg/5 ml syrup</i>	Tier 4	PA, NPD
<i>clotrimazole ((1 % cream/appl, 2 % cream/appl), 1 % cream/appl)</i>	Tier 4	NPD
<i>codeine phosphate/guaifenesin ((10-100mg/5 liquid, 20-200/10 liquid), 10-100mg/5 liquid)</i>	Tier 4	NPD
<i>condoms, latex, lubricated each</i>	Tier 4	QL (24 PER 30 DAYS), NPD
<i>cromolyn sodium 5.2 mg spray/pump</i>	Tier 4	NPD
<i>cyanocobalamin (vitamin b-12) 500 mcg tablet</i>	Tier 4	NPD
<i>dextrose 4 g tab chew</i>	Tier 4	NPD
<i>diphenhydramine hcl ((25 mg capsule, 25 mg tablet), 25 mg capsule)</i>	Tier 4	PA, NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diphenhydramine hcl 12.5mg/5ml liquid</i>	Tier 4	NPD
<i>docusate sodium ((100 mg capsule, 250 mg capsule, 50 mg/5 ml liquid), 100 mg capsule, 250 mg capsule)</i>	Tier 4	NPD
DOK ((100 MG SOFTGEL, 250 MG SOFTGEL), 100 MG SOFTGEL)	Tier 4	NPD
EARWAX TREATMENT 6.5% DROPS	Tier 4	NPD
<i>electrolytes/dextrose solution</i>	Tier 4	NPD
<i>ergocalciferol (vitamin d2) ((400 tablet, 50000 capsule, 8000/ml drops), 400 tablet, 50000 capsule)</i>	Tier 4	NPD
<i>famotidine 10 mg tablet</i>	Tier 4	NPD
<i>ferrous sulfate ((134 mg tablet, 15 mg/ml drops, 220 (44)/5 solution, 300 mg/5ml liquid, 324(65)mg tablet dr, 325(65) mg tablet, 325(65) mg tablet dr), 134 mg tablet, 15 mg/ml drops, 220 (44)/5 solution, 300 mg/5ml liquid, 324(65)mg tablet dr, 325(65) mg tablet)</i>	Tier 4	NPD
<i>fexofenadine hcl ((180 mg tablet, 60 mg tablet), 180 mg tablet)</i>	Tier 4	NPD
<i>folic acid ((0.4 mg tablet, 0.8 mg capsule, 0.8 mg tablet, 1 mg tablet), 0.4 mg tablet, 0.8 mg capsule, 0.8 mg tablet)</i>	Tier 4	NPD
<i>glycerin ((adult supp.rect, pediatric supp.rect), adult supp.rect)</i>	Tier 4	NPD
<i>hydrocortisone ((0.5 % cream (g), 0.5 % oint. (g)), 0.5 % cream (g))</i>	Tier 4	NPD
<i>hydrocortisone acetate 0.5 % cream (g)</i>	Tier 4	NPD
<i>hydrocortisone/aloe vera 1 % cream (g)</i>	Tier 4	NPD
<i>ibuprofen ((100 mg tab chew, 100 mg tablet, 200 mg capsule, 200 mg tablet, 50 mg/1.25 drops susp), 100 mg tab chew, 100 mg tablet, 200 mg capsule, 200 mg tablet)</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>inhaler, assist devices spacer</i>	Tier 4	QL (2 PER 365 DAYS), NPD
<i>inhaler, assist device, accessory each</i>	Tier 4	QL (2 PER 365 DAYS), NPD
<i>ketotifen fumarate 0.025 % drops</i>	Tier 4	NPD
<i>levonorgestrel 1.5 mg tablet</i>	Tier 4	NPD
<i>loperamide hcl ((1 mg/5 ml liquid, 1mg/7.5ml liquid, 2 mg tablet), 1 mg/5 ml liquid, 1mg/7.5ml liquid)</i>	Tier 4	NPD
<i>loratadine ((10 mg tab rapdis, 10 mg tablet), 10 mg tab rapdis)</i>	Tier 4	NPD
<i>mag/aluminum/sod bicarb/alginc 20 mg-80mg tab chew</i>	Tier 4	NPD
<i>magnesium carb/aluminum hydrox 105-160mg tab chew</i>	Tier 4	NPD
<i>magnesium citrate solution</i>	Tier 4	NPD
<i>magnesium gluconate 27 mg(500) tablet</i>	Tier 4	NPD
<i>magnesium hydroxide/aluminum hydroxide/simethicone (mag hydrox/aluminum hyd/simeth 200-200-20 oral susp, magnesium hydroxide/aluminum hydroxide/simethicone (200-200-20 oral susp, 400-400-40 oral susp))</i>	Tier 4	NPD
<i>meclizine hcl 25 mg tab chew</i>	Tier 4	NPD
<i>mecobalamin 5000 mcg tab rapdis</i>	Tier 4	NPD
<i>miconazole nitrate ((100 mg supp.vag, 2 % cream/appl), 100 mg supp.vag)</i>	Tier 4	NPD
MURO-128 5% EYE DROPS	Tier 4	NPD
NASAL DECON(P-EPHED)30 MG/5 ML	Tier 4	NPD
NASAL DECONGESTANT 30 MG TAB	Tier 4	NPD
<i>neomycin sulfate/bacitracin zinc/polymyxin b (neomycin sulfate/bacitracin zinc/polymyxin b (oint pack, oint. (g)), neomycin/bacitracin/polymyxinb 3.5-400-5k oint pack)</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>neomycin/polymyxin b/pramoxine 3.5-10k-10 cream (g)</i>	Tier 4	NPD
<i>niacin ((100 mg tablet, 1000 mg tablet er, 250 mg capsule er, 250 mg tablet, 250 mg tablet er, 50 mg tablet, 500 mg capsule er, 500 mg tablet, 500 mg tablet er, 750 mg tablet er), 100 mg tablet, 1000 mg tablet er, 250 mg capsule er, 250 mg tablet, 250 mg tablet er, 50 mg tablet, 500 mg capsule er, 500 mg tablet, 500 mg tablet er)</i>	Tier 4	NPD
<i>niacinamide 500 mg tablet</i>	Tier 4	NPD
<i>nicotine 14mg patch</i>	Tier 4	QL (84 PER 365 DAYS), NPD
<i>nicotine 21mg patch</i>	Tier 4	QL (84 PER 365 DAYS), NPD
<i>nicotine 2mg gum</i>	Tier 4	PA, NPD
<i>nicotine 4mg gum</i>	Tier 4	PA, NPD
<i>nicotine 7mg patch</i>	Tier 4	QL (84 PER 365 DAYS), NPD
NIX COMPLETE LICE KIT	Tier 4	NPD
<i>nonoxynol 9 (9 (9 12.5 % foam/appl, 9 3 % jelly/appl, 9 4 % gel/pf app), 9 12.5 % foam/appl, 9 3 % jelly/appl)</i>	Tier 4	NPD
<i>omega-3 fatty acids 1000 mg capsule</i>	Tier 4	NPD
<i>omeprazole 20 mg tablet dr</i>	Tier 4	QL (60 PER 30 DAYS), NPD
<i>permethrin 1 % liquid</i>	Tier 4	NPD
<i>phentermine hcl ((15 mg capsule, 30 mg capsule), 15 mg capsule)</i>	Tier 4	PA, NPD
<i>phytonadione (vit k1) 100 mcg tablet</i>	Tier 4	NPD
<i>piperonyl butox/pyrethr/permet 4-.33-.5% kit</i>	Tier 4	NPD
<i>piperonyl butoxide/pyrethrins 4%-0.33% shampoo</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pnv no.121/iron/folic acid 28mg-0.8mg tablet</i>	Tier 4	NPD
<i>pnv no.133/ferrous fum/folic 28mg-0.8mg tablet</i>	Tier 4	NPD
<i>pnv no.95/ferrous fum/folic ac 28mg-0.8mg tablet</i>	Tier 4	NPD
<i>polyethylene glycol 3350 (3350 (3350 17g powd pack, 3350 17g/dose powder), 3350 17g powd pack)</i>	Tier 4	NPD
<i>polyvinyl alcohol 1.4 % drops</i>	Tier 4	NPD
<i>prenatal no.137/iron/folic acid 27mg-0.8mg tablet</i>	Tier 4	NPD
<i>prenatal no.137/iron/folic acid 27mg-0.8mg tablet</i>	Tier 4	NPD
<i>prenatal vit no.130/iron/folic 27mg-0.8mg tablet</i>	Tier 4	NPD
<i>prenatal vit/iron fum/folic ac 27mg-0.8mg tablet</i>	Tier 4	NPD
<i>prenatal vits96/iron fum/folic 27mg-0.8mg tablet</i>	Tier 4	NPD
<i>promethazine hcl/codeine 6.25-10/5 syrup</i>	Tier 4	PA, QL (240 PER 30 DAYS), NPD
<i>promethazine/dextromethorphan 6.25-15/5 syrup</i>	Tier 4	PA, NPD
<i>promethazine/phenyleph/codeine 6.25-5-10 syrup</i>	Tier 4	PA, NPD
<i>pseudoephedrine hcl ((30 mg tablet, 30 mg/5 ml liquid, 60 mg tablet), 30 mg tablet, 30 mg/5 ml liquid)</i>	Tier 4	NPD
<i>pyrantel pamoate 50 mg/ml oral susp</i>	Tier 4	NPD
<i>pyridoxine hcl (vitamin b6) ((100 mg tablet, 200 mg tablet er, 250 mg tablet, 50 mg tablet, 500 mg tablet), 100 mg tablet, 200 mg tablet er, 250 mg tablet, 50 mg tablet)</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
QSYMIA ((11.25 MG-69 MG CAPSULE, 15 MG-92 MG CAPSULE, 3.75 MG-23 MG CAPSULE, 7.5 MG-46 MG CAPSULE), 11.25 MG-69 MG CAPSULE, 15 MG-92 MG CAPSULE, 3.75 MG-23 MG CAPSULE)	Tier 4	PA, NPD
<i>ranitidine hcl 75 mg tablet</i>	Tier 4	NPD
<i>riboflavin (vitamin b2) ((100 mg tablet, 50 mg tablet), 100 mg tablet)</i>	Tier 4	NPD
RID ((1-2-3 KIT, KIT), COMPLETE 1-2-3 LICE KIT)	Tier 4	NPD
SAXENDA 18 MG/3 ML PEN	Tier 4	PA, NPD
<i>selenium sulfide 1 % shampoo</i>	Tier 4	NPD
<i>sennosides 8.6 mg tablet</i>	Tier 4	NPD
SILACE 50 MG/5 ML LIQUID	Tier 4	NPD
<i>simethicone ((125 mg capsule, 40mg/0.6ml drops susp, 80 mg tab chew), 125 mg capsule, 40mg/0.6ml drops susp)</i>	Tier 4	NPD
<i>sodium bicarbonate 325 mg tablet</i>	Tier 4	NPD
<i>sodium chloride ((2 % drops, 5 % drops), 2 % drops)</i>	Tier 4	NPD
<i>sodium chloride 0.65 % spray</i>	Tier 4	NPD
<i>sodium/potassium/sod chl drops</i>	Tier 4	NPD
STOOL SOFTENER ((100 MG CAPSULE, 100 MG SOFTGEL, 250 MG SOFTGEL), 100 MG CAPSULE, 100 MG SOFTGEL)	Tier 4	NPD
TAKE ACTION 1.5 MG TABLET	Tier 4	NPD
<i>thiamine hcl 100 mg tablet</i>	Tier 4	NPD
<i>tioconazole 6.5 % oin/pf app</i>	Tier 4	NPD
<i>tolnaftate 1 % cream (g)</i>	Tier 4	NPD
<i>triamcinolone acetonide 55 mcg spray</i>	Tier 4	NPD
TRIPLE ANTIBIOTIC ((CURAD OINT, MEDI-FIRST, MEDICHOICE, OINTMENT, OINTMENT PKT), CURAD OINT, MEDI-FIRST, MEDICHOICE, OINTMENT)	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

Non-Part D Drugs

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>triprolidine/pseudoephedrine 2.5mg-60mg tablet</i>	Tier 4	PA, NPD
<i>vitamin a 10000 unit capsule</i>	Tier 4	NPD
<i>vitamin e (dl,tocopheryl acet) 400 unit capsule</i>	Tier 4	NPD
<i>vitamin e 400 unit capsule</i>	Tier 4	NPD
<i>vitamin e acetate 400 unit capsule</i>	Tier 4	NPD

You can find information on what the symbols and abbreviations in this table mean by going to pages xiv - xv and reading the explanation provided in the legends.

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Civil Rights Coordinator
601 Potrero Grande Dr.
Monterey Park, CA 91755
Phone: (844) 883-2233 (TTY: 711)
Fax: (323) 889-2228
Email: BSCPHPCivilRights@blueshieldca.com

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U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

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PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-905-3825 (TTY: 711).

العربية (Arabic):

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-855-905-3825 (رقم هاتف الصم والبكم: 711).

ພາສາລາວ (Lao):

ໂປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ເສັຽຄ່າ, ແມ່ນມີຮ່ວມໃຫ້ທ່ານ. ໂທ 1-855-905-3825 (TTY: 711).

日本語 (Japanese):

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-855-905-3825 (TTY:711) まで、お電話にてご連絡ください。

ภาษาไทย (Thai):

เรียน: ถ้าคุณพูดภาษาไทยคุณสามารถใช้บริการช่วยเหลือทางภาษาได้ฟรี โทร 1-855-905-3825 (TTY: 711).

ਪੰਜਾਬੀ ਦੇ (Punjabi):

ਧਿਆਨ ਦਿਓ: ਜੇ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਸਹਾਇਤਾ ਸੇਵਾ ਤੁਹਾਡੇ ਲਈ ਮੁਫਤ ਉਪਲਬਧ ਹੈ। 1-855-905-3825 (TTY: 711) 'ਤੇ ਕਾਲ ਕਰੋ।

ខ្មែរ (Cambodian)

ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្អល គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 1-855-905-3825 (TTY: 711)។

Հայերեն (Armenian)

Ուշադրություն՝ Եթե խոսում եք հայերեն, ապա ձեզ անվճար կարող են տրամադրվել լեզվապետական աջակցությունները: Ձանգահարեք 1-855-905-3825 (TTY (հեռախոսի)՝711):

This formulary was updated on 10/28/2019. For more recent information or other questions, please contact Blue Shield Promise Cal MediConnect Plan Member Services at 1-855-905-3825 (TTY: 711), from 8:00 a.m. – 8:00 p.m., seven days a week, or visit www.blueshieldca.com/promise/calmediconnect.