# CLEARSCRIPT FORMULARY

January 1, 2027

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## What is the ClearScript Standard Formulary?

The ClearScript Formulary is a list of drugs selected by physician and pharmacist subject matter experts who collaboratively support the Pharmacy and Therapeutics (P&T) Committee. Coverage for the drugs included on the ClearScript Formulary is determined by your benefit plan design. It is important to note that this formulary is not a complete list of medications and not all listed drugs may be covered by your plan. Please refer to the benefit documents provided by your employer or health plan for information on your specific benefit coverage and copays. You may also contact the Member Service Center at the number on the back of your ID card for more information.

## How is the formulary and clinical review criteria developed?

The formulary and clinical review criteria are developed based on the recommendations of the P&T Committee. This committee meets quarterly to review and select drugs and clinical criteria for additions to the formulary based on drug safety, effectiveness, scientific evidence and standards of practice, therapeutic need, and cost.

## Can the Formulary (drug list) change?

Drugs may be added or removed from the formulary during the year. The plan may notify affected members if a drug is removed from the formulary, moves to a higher cost-sharing tier, or when prior authorization and/or step therapy requirements are added. If the Food and Drug Administration (FDA) deems a drug on the formulary to be unsafe or the drug's manufacturer removes the drug from the market, the plan will immediately remove the drug from the formulary.

## What are generic drugs?

The plan covers both brand name and generic drugs provided they are prescribed per FDA approved indications and in accordance with your plan's benefit design. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs. Generic drugs appear in the formulary listing with all lower-case letters and *italicized* (i.e., *terbutaline oral tablet 2.5 mg*). Brand drugs appear in the formulary listing with all upper-case letters (i.e., DIPHEN ORAL ELIXIR 12.5 MG/5ML).

## Are there any restrictions on coverage of drugs on the formulary?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits are noted throughout the Formulary listing using the following symbols:

| Symbol | Guideline | Description |
|---|---|---|
| **AGE** | Age Restriction | Coverage depends upon member age |
| **PA** | Prior Authorization | Requires specific physician request and clinical criteria be met for prescription to be covered |
| **QL** | Quantity Limit | Prescription quantity limits for specific drugs and/or time period needed for coverage |
| **ST** | Step Therapy | Coverage requires a trial of certain clinically appropriate alternative drug(s) before obtaining the prescribed drug |
| **SP** | Specialty Drug | Coverage may require dispensing from a specialty pharmacy. Specialty copay/coinsurance applies according to benefit plan |

Drugs requiring prior authorization or step therapy may require your doctor to request a clinical review to determine coverage. Your doctor can submit a request for clinical review on your behalf by contacting the number on the back of your ID card or by completing the Authorization Request form found on the ClearScript.org member page.

Clinical review decisions are based on criteria developed by peer – reviewed publications, evidence-based research, and widely accepted medical practice.

## Tier Benefit Design

A tier benefit design is where you are responsible for a portion of the cost of a prescription drug based on the drug's tier and copayment or coinsurance. Your health plan or employer determines your out-of-pocket costs or copayments for each tier. If you are prescribed a drug on a higher tier, discuss any covered lower tier options with your doctor to help save on drug costs.

Specialty drugs may be covered at a higher copay or coinsurance.

- Tier 1: Generic medications
- Tier 2: Preferred brand medications
- Tier 3: Non-preferred brand medications
- Tier 4: Specialty generic medications
- Tier 5: Specialty preferred brand medications
- Tier 6: Specialty non-preferred brand medications
- ACA Tier: Per the Affordable Care Act (ACA), some medications qualify as preventive under the Essential Health Benefit (EHB). **ACA Tier** indicates the medication qualifies as preventive under the ACA/EHB.

  For plans with an ACA benefit, these medications are covered at $0 copay. If your plan does not participate in ACA coverage, some drugs in this tier may not be covered by your plan.

## How do I fill my specialty medication?

Specialty medications are typically used to treat rare or chronic conditions and often require special handling. They cost more than other drugs and may have the highest copayment applied.

To ensure the safest, most clinically appropriate and cost-effective dispensing of these medications, your plan may require you to fill your prescriptions at a designated specialty pharmacy. Specialty pharmacies provide personalized care and offer convenient delivery to your home or other approved location.

Please refer to your benefit documents for details regarding Specialty Medications or call our Member Service Center at the number on the back of your ID card to find out where you can have prescriptions for specialty medications filled.

## General Exclusions:

Many plans have specific benefit inclusions, exclusions, copayments, or a lack of coverage, which are reflected in other Plan Benefit Documents.

The Formulary applies only to outpatient drugs provided to members and does not apply to medications used at inpatient settings. Please refer to your benefit plan documents for details regarding benefit exclusions or call our Member Service Center at the number on the back of your ID card.

Examples of benefit exclusions include:

- Over the Counter (OTC) medications
- Anti-Obesity drugs
- Medical food/nutritional supplements
- Non-Diabetic supplies/Diagnostic supplies/Ostomy supplies/Devices
- Disposable Needles & Syringes (Non-Insulin related)
- Any drug products used for cosmetic purposes
- Experimental drug products or any drug product used in an experimental manner
- Repackaged drugs and institutional use drugs (e.g., hospital use)
- Lifestyle drugs (e.g., sexual dysfunction, infertility)
- Non self-administered injectable drug products

## What if a drug is not on the Formulary?

If a drug is not included on the formulary, you can:

1. Contact ClearScript at the number on the back of your ID card to request a list of similar drugs covered by the plan. Show it to your doctor and ask the doctor to prescribe a similar covered drug that that is determined by your doctor to be an appropriate alternative drug.

2. Contact your plan to determine your options.

## Can I appeal a coverage decision?

If you are not satisfied with a coverage decision, you have the right to file an appeal according to the process outlined in your plan's Summary Plan Document. Please refer to your benefit plan documents for information on your Rights of Appeal, how to file an appeal, the appeal process and the appeal levels available to you.

If you decide to file an appeal, you will be asked to provide written information to support your appeal. The appeal will be reviewed by different individuals than those who made the original decision.

**For more information about the ClearScript Formulary**

call our Member Service Center at the number on the back of your ID card.

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| Drug | Status | Notes |
|---|---|---|
| **Allergy** | | |
| **2Nd Gen Antihistamine & Decongestant Combinations** | | |
| CLARINEX-D 12 HOUR ORAL TABLET, ER MULTIPHASE 12 HR 2.5-120 MG | Tier 3 | ST: TRIAL OF DESLORATADINE OR LEVOCERTIRIZINE TABLET REQUIRED |
| **Allergenic Extracts, Therapeutics** | | |
| GRASTEK SUBLINGUAL TABLET 2,800 BAU | Tier 2 | PA; QL (1 EA per 1 day) |
| ODACTRA SUBLINGUAL TABLET 12 SQ-HDM | Tier 2 | PA; QL (1 EA per 1 day) |
| ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY | Tier 2 | PA; QL (1 EA per 1 day) |
| PALFORZIA (LEVEL 0) ORAL CAPSULE, SPRINKLE 1 MG | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 1) ORAL CAPSULE, SPRINKLE 3 MG (1 MG X 3) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 2) ORAL CAPSULE, SPRINKLE 6 MG (1 MG X 6) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 3) ORAL CAPSULE, SPRINKLE 12 MG (1 MG X 2, 10 MG X 1) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 4) ORAL CAPSULE, SPRINKLE 20 MG | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 5) ORAL CAPSULE, SPRINKLE 40 MG (20 MG X 2) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 6) ORAL CAPSULE, SPRINKLE 80 MG (20 MG X 4) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 7) ORAL CAPSULE, SPRINKLE 120 MG (20 MG X 1, 100 MG X 1) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 8) ORAL CAPSULE, SPRINKLE 160 MG (20 MG X 3, 100 MG X1) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 9) ORAL CAPSULE, SPRINKLE 200 MG (100 MG X 2) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 10) ORAL CAPSULE, SPRINKLE 240 MG (20 MG X 2, 100 MG X 2) | Tier 5 | PA; SP |
| PALFORZIA (LEVEL 11 UP-DOSE) ORAL POWDER IN PACKET 300 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| PALFORZIA INITIAL (1-3 YRS) ORAL CAPSULE, SPRINKLE 0.5/1/1.5/3 MG | | Tier 5 | PA; SP |
| PALFORZIA INITIAL (4-17 YRS) ORAL CAPSULE, SPRINKLE 0.5/1/1.5/3/6 MG | | Tier 5 | PA; SP |
| PALFORZIA LEVEL 11 MAINTENANCE ORAL POWDER IN PACKET 300 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| RAGWITEK SUBLINGUAL TABLET 12 AMB A 1 UNIT | | Tier 2 | PA; QL (1 EA per 1 day) |
| **Antihistamines - 1St Generation** | | | |
| *carbinoxamine maleate oral liquid 4 mg/5 ml* | (Carbzah) | Tier 1 | Age (Min 2 Years) |
| *carbinoxamine maleate oral suspension,extended rel 12 hr 4 mg/5 ml* | (Karbinal ER) | Tier 1 | ST: TRIAL OF IMMEDIATE-RELEASE CARBINOXAMINE MALEATE ORAL SOLUTION REQUIRED.; QL (960 ML per 30 days); Age (Min 2 Years) |
| *carbinoxamine maleate oral tablet 4 mg* | | Tier 1 | Age (Min 2 Years) |
| CARBZAH ORAL LIQUID 4 MG/5 ML | (carbinoxamine maleate) | Tier 1 | Age (Min 2 Years) |
| *clemastine oral tablet 2.68 mg* | (Clemsza) | Tier 1 | |
| CLEMSZA ORAL TABLET 2.68 MG | (clemastine) | Tier 1 | |
| *cyproheptadine oral syrup 2 mg/5 ml* | | Tier 1 | |
| *cyproheptadine oral tablet 4 mg* | | Tier 1 | |
| DIPHEN ORAL ELIXIR 12.5 MG/5 ML | (diphenhydramine hcl) | Tier 1 | |
| *diphenhydramine hcl oral elixir 12.5 mg/5 ml* | (Diphen) | Tier 1 | |
| *hydroxyzine hcl oral solution 10 mg/5 ml* | | Tier 1 | |
| *hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg* | | Tier 1 | |
| *hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| *promethazine oral syrup 6.25 mg/5 ml* | | Tier 1 | |
| *promethazine oral tablet 12.5 mg, 25 mg, 50 mg* | | Tier 1 | |
| **Antihistamines - 2Nd Generation** | | | |
| *cetirizine oral solution 1 mg/ml* | (Allergy Relief (cetirizine)) | Tier 1 | |
| *desloratadine oral tablet 5 mg* | (Clarinex) | Tier 1 | |
| *desloratadine oral tablet,disintegrating 2.5 mg, 5 mg* | | Tier 1 | ST: TRIAL OF DESLORATADINE OR LEVOCERTIRIZINE TABLET REQUIRED. |

| Drug | | Status | Notes |
|---|---|---|---|
| *levocetirizine oral solution 2.5 mg/5 ml* | (Xyzal) | Tier 1 | ST: TRIAL OF DESLORATADINE TABLET, LEVOCETIRIZINE TABLET, OR CETIRIZINE SOLUTION IN THE PAST 120 DAYS |
| *levocetirizine oral tablet 5 mg* | (24HR Allergy Relief) | Tier 1 | |
| **Nasal Antihistamine** | | | |
| *azelastine nasal spray,non-aerosol 137 mcg (0.1 %)* | | Tier 1 | |
| *olopatadine nasal spray,non-aerosol 0.6 %* | | Tier 1 | |
| **Nasal Antihistamine & Anti-Inflam. Steroid Comb.** | | | |
| *azelastine-fluticasone nasal spray,non-aerosol 137-50 mcg/spray* | (Dymista) | Tier 1 | ST: TRIAL OF FLUTICASONE OR FLUNISOLIDE (NASAL FORMULATION) IN THE PAST 120 DAYS; QL (23 GM per 30 days) |
| **Nasal Anti-Inflammatory Steroids** | | | |
| *flunisolide nasal spray,non-aerosol 25 mcg (0.025 %)* | | Tier 1 | QL (25 ML per 30 days) |
| *fluticasone propionate nasal spray,suspension 50 mcg/actuation* | (24 Hour Allergy Relief) | Tier 1 | |
| *mometasone nasal spray,non-aerosol 50 mcg/actuation* | (Allergy Nasal (mometasone)) | Tier 1 | |
| QNASL NASAL HFA AEROSOL INHALER 40 MCG/ACTUATION | | Tier 2 | ST: TRIAL OF NASAL FLUNISOLIDE OR FLUTICASONE REQUIRED; QL (6.8 GM per 30 days) |
| QNASL NASAL HFA AEROSOL INHALER 80 MCG/ACTUATION | | Tier 2 | ST: TRIAL OF NASAL FLUNISOLIDE OR FLUTICASONE REQUIRED; QL (10.6 GM per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| XHANCE NASAL AEROSOL BREATH ACTIVATED 93 MCG/ACTUATION | | Tier 2 | ST: TRIAL OF ONE OF THE FOLLOWING INTRANASAL CORTICOSTEROIDS : MOMETASONE, FLUTICASONE PROPIONATE, OR FLUNISOLIDE IN THE PAST 120 DAYS; QL (32 ML per 30 days) |
| **Antiemesis/Antivertigo** | | | |
| **Antiemetic, Cannibinoid-Type** | | | |
| *dronabinol oral capsule 10 mg, 2.5 mg, 5 mg* | (Marinol) | Tier 1 | QL (2 EA per 1 day) |
| **Antiemetic/Antivertigo Agents** | | | |
| AKYNZEO (NETUPITANT) ORAL CAPSULE 300-0.5 MG | | Tier 2 | QL (1 EA per 21 days) |
| *aprepitant oral capsule 125 mg* | | Tier 1 | QL (1 EA per 21 days) |
| *aprepitant oral capsule 40 mg* | | Tier 1 | QL (1 EA per 28 days) |
| *aprepitant oral capsule 80 mg* | (Emend) | Tier 1 | QL (2 EA per 21 days) |
| *aprepitant oral capsule,dose pack 125 mg (1)- 80 mg (2)* | (Emend) | Tier 1 | QL (3 EA per 21 days) |
| COMPRO RECTAL SUPPOSITORY 25 MG | (prochlorperazine) | Tier 1 | |
| *doxylamine-pyridoxine (vit b6) oral tablet,delayed release (dr/ec) 10-10 mg* | (Diclegis) | Tier 1 | QL (120 EA per 30 days) |
| EMEND ORAL SUSPENSION FOR RECONSTITUTION 125 MG (25 MG/ ML FINAL CONC.) | | Tier 2 | PA; QL (3 EA per 21 days) |
| *granisetron hcl oral tablet 1 mg* | | Tier 1 | ST: TRIAL OF ONDANSETRON TABLETS OR ODT REQUIRED.; QL (10 EA per 21 days) |
| *meclizine oral tablet 12.5 mg* | | Tier 1 | |
| *meclizine oral tablet 25 mg* | (Dramamine (meclizine)) | Tier 1 | |
| *meclizine oral tablet,chewable 25 mg* | (Antivert) | Tier 1 | |
| *ondansetron hcl oral solution 4 mg/5 ml* | | Tier 1 | QL (150 ML per 21 days) |
| *ondansetron hcl oral tablet 4 mg, 8 mg* | | Tier 1 | |
| *ondansetron oral tablet,disintegrating 4 mg, 8 mg* | | Tier 1 | |
| *prochlorperazine maleate oral tablet 10 mg, 5 mg* | (Compazine) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *prochlorperazine rectal suppository 25 mg* | (Compro) | Tier 1 | |
| *promethazine rectal suppository 12.5 mg, 25 mg* | (Promethegan) | Tier 1 | |
| PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG, 50 MG | (promethazine) | Tier 1 | |
| SANCUSO TRANSDERMAL PATCH WEEKLY 3.1 MG/24 HOUR | | Tier 3 | ST: TRIAL OF ONDANSETRON TABLETS OR ODT REQUIRED.; QL (1 EA per 21 days) |
| *scopolamine base transdermal patch 3 day 1 mg over 3 days* | (Transderm-Scop) | Tier 1 | |
| *trimethobenzamide oral capsule 300 mg* | | Tier 1 | |
| VARUBI ORAL TABLET 90 MG | | Tier 2 | QL (2 EA per 21 days) |
| **Asthma And Copd** | | | |
| **Anticholinergic, Orally Inhaled Short Acting** | | | |
| ATROVENT HFA INHALATION HFA AEROSOL INHALER 17 MCG/ACTUATION | (ipratropium bromide) | Tier 2 | QL (25.8 GM per 30 days) |
| *ipratropium bromide inhalation solution 0.02 %* | | Tier 1 | |
| **Anticholinergics, Orally Inhaled Long Acting** | | | |
| INCRUSE ELLIPTA INHALATION BLISTER WITH DEVICE 62.5 MCG/ACTUATION | (umeclidinium) | Tier 2 | QL (30 EA per 30 days) |
| SPIRIVA RESPIMAT INHALATION MIST 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION | | Tier 2 | QL (4 GM per 30 days) |
| *tiotropium bromide inhalation capsule, w/inhalation device 18 mcg* | (Spiriva with HandiHaler) | Tier 1 | QL (30 EA per 30 days) |
| YUPELRI INHALATION SOLUTION FOR NEBULIZATION 175 MCG/3 ML | | Tier 3 | QL (90 ML per 30 days) |
| **Beta-Adrenergic Agents** | | | |
| *albuterol sulfate oral syrup 2 mg/5 ml* | | Tier 1 | |
| *albuterol sulfate oral tablet 2 mg, 4 mg* | | Tier 1 | |
| *terbutaline oral tablet 2.5 mg, 5 mg* | | Tier 1 | |
| **Beta-Adrenergic Agents, Inhaled, Short Acting** | | | |
| *albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation* | (Ventolin HFA) | Tier 1 | 6.7gm/Pkg; QL (20.1 GM per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml* | | Tier 1 | |
| *levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml* | | Tier 1 | |
| *levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation* | (Xopenex HFA) | Tier 1 | |
| **Beta-Adrenergic Agents, Inhaled, Ultra-Long Acting** | | | |
| STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION | | Tier 2 | QL (4 GM per 30 days) |
| **Beta-Adrenergic Agents, Orally Inhaled,Long Acting** | | | |
| *arformoterol inhalation solution for nebulization 15 mcg/2 ml* | (Brovana) | Tier 1 | ST: TRIAL OF SEREVENT, STRIVERDI, OR PERFOROMIST IN THE PAST 120 DAYS; QL (120 ML per 30 days) |
| *formoterol fumarate inhalation solution for nebulization 20 mcg/2 ml* | (Perforomist) | Tier 1 | QL (120 ML per 30 days) |
| SEREVENT DISKUS INHALATION BLISTER WITH DEVICE 50 MCG/DOSE | | Tier 2 | QL (60 EA per 30 days) |
| **Beta-Adrenergic And Anticholinergic Combinations** | | | |
| ANORO ELLIPTA INHALATION BLISTER WITH DEVICE 62.5-25 MCG/ACTUATION | (umeclidinium-vilanterol) | Tier 2 | QL (60 EA per 30 days) |
| COMBIVENT RESPIMAT INHALATION MIST 20-100 MCG/ACTUATION | | Tier 2 | 4gm/Pkg |
| *ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml* | | Tier 1 | |
| STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION | | Tier 2 | QL (4 GM per 30 days) |
| **Beta-Adrenergic And Glucocorticoid Combinations** | | | |
| ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION | (fluticasone propion-salmeterol) | Tier 2 | QL (12 GM per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| AIRSUPRA INHALATION HFA AEROSOL INHALER 90-80 MCG/ACTUATION | | Tier 2 | 10.7gm/Pkg; QL (32.1 GM per 30 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 100-25 MCG/DOSE, 200-25 MCG/DOSE | (fluticasone furoate-vilanterol) | Tier 2 | QL (60 EA per 30 days) |
| BREO ELLIPTA INHALATION BLISTER WITH DEVICE 50-25 MCG/DOSE | | Tier 2 | QL (60 EA per 30 days) |
| BREYNA INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION | (budesonide-formoterol) | Tier 1 | QL (30.9 GM per 30 days) |
| *budesonide-formoterol inhalation hfa aerosol inhaler 160-4.5 mcg/actuation, 80-4.5 mcg/actuation* | (Breyna) | Tier 1 | QL (30.9 GM per 30 days) |
| DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION, 50-5 MCG/ACTUATION | | Tier 2 | QL (39 GM per 30 days) |
| DULERA INHALATION HFA AEROSOL INHALER 200-5 MCG/ACTUATION | | Tier 2 | QL (13 GM per 30 days) |
| *fluticasone propion-salmeterol inhalation aerosol powdr breath activated 113-14 mcg/actuation, 232-14 mcg/actuation, 55-14 mcg/actuation* | | Tier 1 | QL (1 EA per 30 days) |
| *fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose* | (Wixela Inhub) | Tier 1 | QL (60 EA per 30 days) |
| WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE | (fluticasone propion-salmeterol) | Tier 1 | QL (60 EA per 30 days) |
| **Beta-Adrenergic-Anticholinergic-Glucocort, Inhaled** | | | |
| BREZTRI AEROSPHERE INHALATION HFA AEROSOL INHALER 160-18-4.8 MCG/ACTUATION, 160-9-4.8 MCG/ACTUATION | | Tier 2 | QL (10.7 GM per 30 days) |
| TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 100-62.5-25 MCG | | Tier 2 | QL (60 EA per 30 days) |
| TRELEGY ELLIPTA INHALATION BLISTER WITH DEVICE 200-62.5-25 MCG | | Tier 2 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Glucocorticoids, Orally Inhaled** | | | |
| ARNUITY ELLIPTA INHALATION BLISTER WITH DEVICE 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION | (fluticasone furoate) | Tier 2 | QL (30 EA per 30 days) |
| ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION, 50 MCG/ACTUATION | | Tier 2 | QL (13 GM per 30 days) |
| ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60) | | Tier 2 | QL (1 EA per 30 days) |
| *beclomethasone dipropionate inhalation aerosol 40 mcg/actuation, 80 mcg/actuation* | | Tier 1 | QL (17.4 GM per 30 days) |
| *budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml, 1 mg/2 ml* | (Pulmicort) | Tier 1 | QL (120 ML per 30 days) |
| *fluticasone propionate inhalation blister with device 100 mcg/actuation, 50 mcg/actuation* | | Tier 1 | QL (60 EA per 30 days) |
| *fluticasone propionate inhalation blister with device 250 mcg/actuation* | | Tier 1 | QL (120 EA per 30 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 110 mcg/actuation* | | Tier 1 | QL (12 GM per 30 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 220 mcg/actuation* | | Tier 1 | QL (24 GM per 30 days) |
| *fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation* | | Tier 1 | QL (21.2 GM per 30 days) |
| QVAR REDIHALER INHALATION HFA AEROSOL BREATH ACTIVATED 40 MCG/ACTUATION, 80 MCG/ACTUATION | | Tier 2 | QL (21.2 GM per 30 days) |
| **Interleukin-4(Il-4) Receptor Alpha Antagonist, Mab** | | | |
| DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML | | Tier 5 | PA; SP |
| DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML | | Tier 5 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Interleukin-5(Il-5) Receptor Alpha Antagonist, Mab** | | | |
| FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML | | Tier 5 | PA; SP |
| FASENRA SUBCUTANEOUS SYRINGE 10 MG/0.5 ML, 30 MG/ML | | Tier 5 | PA; SP |
| **Leukotriene Receptor Antagonists** | | | |
| *montelukast oral granules in packet 4 mg* | (Singulair) | Tier 1 | |
| *montelukast oral tablet 10 mg* | (Singulair) | Tier 1 | |
| *montelukast oral tablet,chewable 4 mg, 5 mg* | (Singulair) | Tier 1 | |
| *zafirlukast oral tablet 10 mg, 20 mg* | | Tier 1 | |
| **Mast Cell Stabilizers** | | | |
| *cromolyn oral concentrate 100 mg/5 ml* | (Gastrocrom) | Tier 1 | |
| **Mast Cell Stabilizers, Orally Inhaled** | | | |
| *cromolyn inhalation solution for nebulization 20 mg/2 ml* | | Tier 1 | |
| **Monoclonal Antibodies To Immunoglobulin E(Ige)** | | | |
| OMLYCLO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML, 75 MG/0.5 ML | | Tier 5 | PA; SP |
| **Monoclonal Antibody - Interleukin-5 Antagonists** | | | |
| NUCALA SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML | | Tier 5 | PA; SP |
| NUCALA SUBCUTANEOUS RECON SOLN 100 MG | | Tier 5 | PA; SP |
| NUCALA SUBCUTANEOUS SYRINGE 100 MG/ML, 40 MG/0.4 ML | | Tier 5 | PA; SP |
| **Phosphodiesterase-4 (Pde4) Inhibitors** | | | |
| JASCAYD ORAL TABLET 18 MG, 9 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| OHTUVAYRE INHALATION SUSPENSION FOR NEBULIZATION 3 MG/2.5 ML | | Tier 6 | PA; SP; QL (5 ML per 1 day) |
| *roflumilast oral tablet 250 mcg, 500 mcg* | (Daliresp) | Tier 1 | QL (1 EA per 1 day) |
| **Respiratory Aids,Devices,Equipment** | | | |
| ACE AEROSOL CLOUD ENHANCER SPACER | (inhalational spacing device) | Tier 3 | |
| AEROBIKA OSCILLATING PEP SYSTM DEVICE | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| AEROCHAMBER MECHANICAL VENT SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER MINI SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER MV SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER PLUS FLOW-VU SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER PLUS FLOW-VU,L MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS FLOW-VU,M MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS FLOW-VU,S MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS Z STAT LG MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS Z STAT MD MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS Z STAT SM MSK SPACER | | Tier 3 | |
| AEROCHAMBER PLUS Z STAT SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER Z-STAT PLUS-FLW SG SPACER | (inhalational spacing device) | Tier 3 | |
| AEROCHAMBER2GO SPACER | (inhalational spacing device) | Tier 3 | |
| AEROECLIPSE II NEBULIZER | (nebulizers) | Tier 3 | |
| AEROECLIPSE XL NEBULIZER | (nebulizers) | Tier 3 | |
| AERONEB GO NEBULIZER | (nebulizers) | Tier 3 | |
| AEROTRACH PLUS SPACER | (inhalational spacing device) | Tier 3 | |
| AEROVENT PLUS SPACER | (inhalational spacing device) | Tier 3 | |
| ALTERA NEBULIZER HANDSET | (nebulizers) | Tier 3 | |
| ALTERA NEBULIZER SYSTEM | (nebulizers) | Tier 3 | |
| ASTHMAPACK CHILDREN'S KIT | | Tier 3 | |
| AURA PORTANEB | (nebulizers) | Tier 3 | |
| BREATHERITE MDI SPACER SPACER | (inhalational spacing device) | Tier 3 | |
| BREATHERITE SPACER-MASK, NEO. SPACER | | Tier 3 | |
| BREATHERITE SPACER-MASK,ADULT SPACER | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| BREATHERITE SPACER-MASK,CHILD SPACER | | Tier 3 | |
| BREATHERITE SPACER-MASK,INFANT SPACER | | Tier 3 | |
| BREATHERITE SPACER-MASK,S.CHLD SPACER | | Tier 3 | |
| BREATHERITE VALVED MDI CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| BREATHERITE VALVED MDI SPACER SPACER | (inhalational spacing device) | Tier 3 | |
| CLEVER CHOICE CHAMBER-LRG MASK SPACER | | Tier 3 | |
| CLEVER CHOICE CHAMBER-MED MASK SPACER | | Tier 3 | |
| CLEVER CHOICE CHAMBER-SM MASK SPACER | | Tier 3 | |
| CLEVER CHOICE NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| CLEVER CHOICE WHISPER AIRE PED DEVICE | (nebulizer and compressor) | Tier 3 | |
| COMFORTSEAL LARGE MASK DEVICE | | Tier 3 | |
| COMFORTSEAL MEDIUM MASK DEVICE | | Tier 3 | |
| COMFORTSEAL SMALL MASK DEVICE | | Tier 3 | |
| COMPACT SPACE CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| COMPACT SPACE CHAMBER-LRG MASK SPACER | | Tier 3 | |
| COMPACT SPACE CHAMBER-MED MASK SPACER | | Tier 3 | |
| COMPACT SPACE CHAMBER-SM MASK SPACER | | Tier 3 | |
| COMP-AIR NEBULIZER COMPRESSOR DEVICE | (nebulizer and compressor) | Tier 3 | |
| DEVILBISS DISPOSABLE NEBULIZER | (nebulizers) | Tier 3 | |
| DEVILBISS PULMO-AIDE COMPRESSR DEVICE | | Tier 3 | |
| DEVILBISS PULMOMATE COMPRESSOR DEVICE | | Tier 3 | |
| DEVILBISS TRAVELER COMPRESSOR DEVICE | (nebulizer and compressor) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| EASIVENT HOLDING CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| EASIVENT MASK LARGE DEVICE | | Tier 3 | |
| EASIVENT MASK MEDIUM DEVICE | | Tier 3 | |
| EASIVENT MASK SMALL DEVICE | | Tier 3 | |
| EASY NEB COMPRESSOR NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| EBASE CONTROLLER DEVICE | | Tier 3 | |
| FLEXICHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| FLEXICHAMBER-LG CHILD MASK DEVICE | | Tier 3 | |
| FLEXICHAMBER-SM ADULT MASK DEVICE | | Tier 3 | |
| FLEXICHAMBER-SM CHILD MASK DEVICE | | Tier 3 | |
| HOME NEBULIZER PLUS SIDESTREAM DEVICE | (nebulizer and compressor) | Tier 3 | |
| INNOSPIRE DELUXE DEVICE | (nebulizer and compressor) | Tier 3 | |
| INNOSPIRE ELEGANCE DEVICE | (nebulizer and compressor) | Tier 3 | |
| INNOSPIRE ESSENCE DEVICE | (nebulizer and compressor) | Tier 3 | |
| INNOSPIRE GO NEBULIZER | (nebulizers) | Tier 3 | |
| INNOSPIRE MINI DEVICE | (nebulizer and compressor) | Tier 3 | |
| INSPIRACHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| INSPIRACHAMBER WITH MASK-LARGE SPACER | | Tier 3 | |
| INSPIRACHAMBER WITH MASK-MED SPACER | | Tier 3 | |
| INSPIRACHAMBER WITH MASK-SMALL SPACER | | Tier 3 | |
| LC PLUS | (nebulizers) | Tier 3 | |
| LC PLUS NEBULIZER-PED MASK | (nebulizers) | Tier 3 | |
| LITE TOUCH-MEDIUM MASK DEVICE | | Tier 3 | |
| LITEAIRE MDI CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| LITETOUCH-LARGE MASK DEVICE | | Tier 3 | |
| LITETOUCH-SMALL MASK DEVICE | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| MC 300 NEBULIZER W-MOUTHPIECE | (nebulizers) | Tier 3 | |
| MC 300 NEBULIZER-UNVRSL TUBING | (nebulizers) | Tier 3 | |
| MICROAIR MESH NEBULIZER | (nebulizers) | Tier 3 | |
| MICROCHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| MICROSPACER SPACER | (inhalational spacing device) | Tier 3 | |
| MINI PLUS NEBULIZER | (nebulizers) | Tier 3 | |
| MINI WRIGHT PEAK FLOW METER DEVICE | (peak flow meter) | Tier 3 | |
| *nebulizer and compressor device* | (Clever Choice Nebulizer) | Tier 3 | |
| OMBRA COMPRESSOR SYSTEM DEVICE | (nebulizer and compressor) | Tier 3 | |
| OPTICHAMBER ADULT MASK-LARGE DEVICE | | Tier 3 | |
| OPTICHAMBER DIAMOND LG MASK SPACER | | Tier 3 | |
| OPTICHAMBER DIAMOND VHC SPACER | (inhalational spacing device) | Tier 3 | |
| OPTICHAMBER DIAMOND-MED MSK SPACER | | Tier 3 | |
| OPTICHAMBER DIAMOND-SML MASK SPACER | | Tier 3 | |
| PARI LC SPRINT NEBULIZER SET | (nebulizers) | Tier 3 | |
| PARI LC SPRINT SINUS | (nebulizers) | Tier 3 | |
| PARI TREK S COMBO PACK DEVICE | (nebulizer and compressor) | Tier 3 | |
| PARI TREK S COMPACT COMPRESSOR DEVICE | (nebulizer and compressor) | Tier 3 | |
| PEDIATRIC BEAR NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| PEDIATRIC COMP-AIR COMPRES NEB DEVICE | (nebulizer and compressor) | Tier 3 | |
| PFLEX INSPIRATORY TRAINER DEVICE | | Tier 3 | |
| POCKET CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| PRIMEAIRE SPACER | (inhalational spacing device) | Tier 3 | |
| PROCARE COMPRESSOR NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| PROCARE PEDIATRIC NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| PROCARE SPACER WITH ADULT MASK SPACER | | Tier 3 | |
| PROCARE SPACER WITH CHILD MASK SPACER | | Tier 3 | |
| PROCHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| PRODIGY MINI-MIST NEBULIZER | (nebulizers) | Tier 3 | |
| PRONEB MAX COMPRESSOR-LC PLUS DEVICE | (nebulizer and compressor) | Tier 3 | |
| PRONEB MAX COMPRESSR-LC SPRINT DEVICE | (nebulizer and compressor) | Tier 3 | |
| PROVENT NASAL DEVICE | | Tier 3 | |
| PROVENT STARTER NASAL DEVICE | | Tier 3 | |
| PULMO-AIDE COMPRESSOR DEVICE | | Tier 3 | |
| PULMONEB LT COMPRESSOR NEBUL DEVICE | (nebulizer and compressor) | Tier 3 | |
| PUREAIR MINI NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| QUAKE VIBRATORY PEP DEVICE | | Tier 3 | |
| RITEFLO AEROCHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| SAMI THE SEAL DEVICE | (nebulizer and compressor) | Tier 3 | |
| SIDESTREAM | (nebulizers) | Tier 3 | |
| SIDESTREAM NEBULIZER | (nebulizers) | Tier 3 | |
| SIDESTREAM PLUS | (nebulizers) | Tier 3 | |
| SILICONE MASK - INFANT DEVICE | | Tier 3 | |
| SINUSTAR NEBULIZER | (nebulizers) | Tier 3 | |
| SMARTNEB COMPRESSOR NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| SOOTHENEB COMPRESSOR NEBULIZER DEVICE | (nebulizer and compressor) | Tier 3 | |
| SOOTHENEB MESH NEBULIZER | (nebulizers) | Tier 3 | |
| SPACE CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| SPACE CHAMBER WITH LARGE MASK SPACER | | Tier 3 | |
| SPACE CHAMBER WITH MEDIUM MASK SPACER | | Tier 3 | |
| SPACE CHAMBER WITH SMALL MASK SPACER | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| SUNRISE COMPRESSOR-NEBULIZER DEVICE | | Tier 3 | |
| THRESHOLD IMT TRAINER DEVICE | | Tier 3 | |
| THRESHOLD PEP DEVICE DEVICE | | Tier 3 | |
| TRUZONE PEAK FLOW METER DEVICE | (peak flow meter) | Tier 3 | |
| VIOS AEROSOL DELIVERY SYSTEM DEVICE | (nebulizer and compressor) | Tier 3 | |
| VORTEX HOLDING CHAMBER SPACER | (inhalational spacing device) | Tier 3 | |
| VORTEX VHC PEDIATRIC MASK SPACER | | Tier 3 | |
| WILLIS THE WHALE COMPRESSR NEB DEVICE | (nebulizer and compressor) | Tier 3 | |
| **Thymic Stromal Lymphopoietin (Tslp) Inhibitors** | | | |
| TEZSPIRE SUBCUTANEOUS PEN INJECTOR 210 MG/1.91 ML (110 MG/ML) | | Tier 5 | PA; SP |
| TEZSPIRE SUBCUTANEOUS SYRINGE 210 MG/1.91 ML (110 MG/ML) | | Tier 5 | PA; SP |
| **Xanthines** | | | |
| *caffeine citrate oral solution 60 mg/3 ml (20 mg/ml)* | | Tier 1 | |
| THEO-24 ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG, 200 MG, 300 MG, 400 MG | | Tier 2 | |
| *theophylline oral elixir 80 mg/15 ml* | | Tier 1 | |
| *theophylline oral solution 80 mg/15 ml* | | Tier 1 | |
| *theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg* | | Tier 1 | |
| *theophylline oral tablet extended release 24 hr 400 mg, 600 mg* | | Tier 1 | |
| **Autonomic Nervous System Disorders** | | | |
| **Alzheimer's Therapy, Nmda Receptor Antagonists** | | | |
| *memantine oral capsule,sprinkle,er 24hr 14 mg, 21 mg, 28 mg, 7 mg* | | Tier 1 | ST: TRIAL OF MEMANTINE IMMEDIATE RELEASE TABLETS IN THE PAST 120 DAYS; QL (30 EA per 30 days) |
| *memantine oral solution 2 mg/ml* | | Tier 1 | QL (300 ML per 30 days) |
| *memantine oral tablet 10 mg, 5 mg* | | Tier 1 | QL (60 EA per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| *memantine oral tablets,dose pack 5-10 mg* | Tier 1 | QL (49 EA per 28 days) |
| NAMENDA XR ORAL CAP,SPRINKLE,ER 24HR DOSE PACK 7-14-21-28 MG | Tier 2 | ST: TRIAL OF MEMANTINE IMMEDIATE RELEASE TABLETS IN THE PAST 120 DAYS; QL (28 EA per 28 days) |
| **Alzheimer's Thx,Nmda Recept Antag & Cholines Inhib** | | |
| *memantine-donepezil oral capsule,sprinkle,er 24hr 14-10 mg, 21-10 mg, 28-10 mg* (Namzaric) | Tier 1 | ST: TRIAL OF DONEPEZIL AND MEMANTINE IN THE PAST 365 DAYS.; QL (1 EA per 1 day) |
| NAMZARIC ORAL CAPSULE,SPRINKLE,ER 24HR 7-10 MG | Tier 3 | ST: TRIAL OF DONEPEZIL AND MEMANTINE IN THE PAST 365 DAYS.; QL (1 EA per 1 day) |
| **Amyloid Directed Monoclonal Antibody** | | |
| LEQEMBI IQLIK SUBCUTANEOUS AUTO-INJECTOR 360 MG/1.8 ML | Tier 6 | PA; SP; QL (7.2 ML per 28 days) |
| LEQEMBI IQLIK SUBCUTANEOUS AUTO-INJECTOR 500 MG/2.5 ML ( 250MG/1.25MLX2) | Tier 6 | PA; SP; QL (10 ML per 28 days) |
| **Cholinesterase Inhibitors** | | |
| *donepezil oral tablet 10 mg, 23 mg, 5 mg* (Aricept) | Tier 1 | |
| *donepezil oral tablet,disintegrating 10 mg, 5 mg* | Tier 1 | |
| *galantamine oral capsule,ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg* | Tier 1 | QL (30 EA per 30 days) |
| *galantamine oral solution 4 mg/ml* | Tier 1 | PA; QL (200 ML per 30 days) |
| *galantamine oral tablet 12 mg, 4 mg, 8 mg* | Tier 1 | QL (60 EA per 30 days) |
| *pyridostigmine bromide oral syrup 60 mg/5 ml* (Mestinon) | Tier 1 | |
| *pyridostigmine bromide oral tablet 30 mg* | Tier 1 | |
| *pyridostigmine bromide oral tablet 60 mg* (Mestinon) | Tier 1 | |
| *pyridostigmine bromide oral tablet extended release 105 mg* | Tier 3 | |
| *pyridostigmine bromide oral tablet extended release 180 mg* (Mestinon Timespan) | Tier 1 | |
| *rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *rivastigmine transdermal patch 24 hour 13.3 mg/24 hour, 4.6 mg/24 hour, 9.5 mg/24 hour* | (Exelon Patch) | Tier 1 | QL (30 EA per 30 days) |
| ZUNVEYL ORAL TABLET,DELAYED RELEASE (DR/EC) 10 MG, 15 MG, 5 MG | | Tier 3 | ST: TRIAL OF GENERIC GALANTAMINE TABS OR GALANTAMINE ER CAPS IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| **Neonatal Fc Receptor (Fcrn) Inhibitors** | | | |
| VYVGART HYTRULO SUBCUTANEOUS SYRINGE 1,000 MG-10,000 UNIT/5 ML | | Tier 6 | PA; SP |
| **Behavioral Health - Antidepressants** | | | |
| **Alpha-2 Receptor Antagonist Antidepressants** | | | |
| *mirtazapine oral tablet 15 mg, 30 mg* | (Remeron) | Tier 1 | |
| *mirtazapine oral tablet 45 mg, 7.5 mg* | | Tier 1 | |
| *mirtazapine oral tablet,disintegrating 15 mg, 30 mg, 45 mg* | (Remeron SolTab) | Tier 1 | |
| **Antidepressant - Nmda Receptor Antagonist** | | | |
| SPRAVATO NASAL SPRAY,NON-AEROSOL 56 MG (28 MG X 2), 84 MG (28 MG X 3) | | Tier 5 | PA; SP |
| **Antidepressant - Postpartum Depression (Ppd)** | | | |
| ZURZUVAE ORAL CAPSULE 20 MG, 25 MG | | Tier 5 | PA; SP; QL (28 EA per 14 days) |
| ZURZUVAE ORAL CAPSULE 30 MG | | Tier 5 | PA; SP; QL (14 EA per 14 days) |
| **Maois - Non-Selective & Irreversible** | | | |
| MARPLAN ORAL TABLET 10 MG | | Tier 3 | |
| *phenelzine oral tablet 15 mg* | (Nardil) | Tier 1 | |
| *tranylcypromine oral tablet 10 mg* | (Parnate) | Tier 1 | |
| **Monoamine Oxidase(Mao) Inhibitors** | | | |
| EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR | | Tier 3 | ST: TRIAL OF PHENELZINE, TRANYLCYPROMINE, OR MARPLAN IN THE PREVIOUS 120 DAYS; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Ndma Receptor Antagonist And Ndri Comb** | | | |
| AUVELITY ORAL TABLET, IR AND ER, BIPHASIC 45-105 MG | | Tier 3 | QL (2 EA per 1 day) |
| AUVELITY ORAL TABLET,IR ER BIPHASIC,DOSEPACK 30 MG-105 MG /45 MG-105 MG | | Tier 3 | QL (51 EA per 29 days) |
| **Norepinephrine And Dopamine Reuptake Inhib (Ndris)** | | | |
| *bupropion hcl oral tablet 100 mg, 75 mg* | | Tier 1 | |
| *bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg* | (Wellbutrin XL) | Tier 1 | |
| *bupropion hcl oral tablet extended release 24 hr 450 mg* | | Tier 1 | ST: TRIAL OF BUPROPION HCL ER (XL), BUPROPION HCL, OR BUPROPION HCL ER (SR) IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *bupropion hcl oral tablet sustained-release 12 hr 100 mg, 150 mg, 200 mg* | (Wellbutrin SR) | Tier 1 | |
| **Selective Serotonin Reuptake Inhibitor (Ssris)** | | | |
| *citalopram oral solution 10 mg/5 ml* | | Tier 1 | |
| *citalopram oral tablet 10 mg, 20 mg, 40 mg* | (Celexa) | Tier 1 | |
| *escitalopram oxalate oral solution 5 mg/5 ml* | | Tier 1 | |
| *escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg* | (Lexapro) | Tier 1 | |
| *fluoxetine oral capsule 10 mg, 20 mg* | (Prozac) | Tier 1 | |
| *fluoxetine oral capsule 40 mg* | | Tier 1 | |
| *fluoxetine oral capsule,delayed release(dr/ec) 90 mg* | | Tier 1 | |
| *fluoxetine oral solution 20 mg/5 ml (4 mg/ml)* | | Tier 1 | |
| *fluoxetine oral tablet 10 mg, 20 mg, 60 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *fluvoxamine oral capsule,extended release 24hr 100 mg, 150 mg* | | Tier 1 | ST: TRIAL OF PAROXETINE, FLUOXETINE, CITALOPRAM, SERTRALINE, ESCITALOPRAM, OR FLUVOXAMINE IR REQUIRED.; QL (2 EA per 1 day) |
| *fluvoxamine oral tablet 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| *paroxetine hcl oral suspension 10 mg/5 ml* | | Tier 1 | |
| *paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg* | (Paxil) | Tier 1 | |
| *paroxetine hcl oral tablet extended release 24 hr 12.5 mg, 25 mg, 37.5 mg* | (Paxil CR) | Tier 1 | |
| *sertraline oral concentrate 20 mg/ml* | (Zoloft) | Tier 1 | |
| *sertraline oral tablet 100 mg, 25 mg, 50 mg* | (Zoloft) | Tier 1 | |
| **Serotonin-2 Antagonist/Reuptake Inhibitors (Saris)** | | | |
| *nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg* | | Tier 1 | |
| RALDESY ORAL SOLUTION 10 MG/ML | | Tier 3 | PA; QL (40 ML per 1 day) |
| *trazodone oral tablet 100 mg, 150 mg, 300 mg, 50 mg* | | Tier 1 | |
| **Serotonin-Norepinephrine Reuptake-Inhib (Snris)** | | | |
| *desvenlafaxine oral tablet extended release 24 hr 100 mg, 50 mg* | | Tier 1 | ST: TRIAL OF 2 OF THE FOLLOWING: GENERIC PAROXETINE HCL, VENLAFAXINE ER OR IR, FLUOXETINE, CITALOPRAM, SERTRALINE, ESCITALOPRAM, MIRTAZAPINE, OR BUPROPRION IN THE PAST 365 DAYS.; QL (1 EA per 1 day) |
| *desvenlafaxine succinate oral tablet extended release 24 hr 100 mg, 25 mg, 50 mg* | (Pristiq) | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| DRIZALMA SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG | Tier 3 | ST: TRIAL OF GENERIC DULOXETINE IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *duloxetine oral capsule,delayed release(dr/ec) 20 mg, 30 mg, 60 mg* | Tier 1 | |
| *duloxetine oral capsule,delayed release(dr/ec) 40 mg* | Tier 1 | ST: TRIAL OF GENERIC DULOXETINE TWO 20MG CAPSULES REQUIRED.; QL (1 EA per 1 day) |
| FETZIMA ORAL CAPSULE,EXT REL 24HR DOSE PACK 20 MG (2)- 40 MG (26) | Tier 2 | QL (1 EA per 1 day) |
| FETZIMA ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 20 MG, 40 MG, 80 MG | Tier 2 | QL (1 EA per 1 day) |
| *venlafaxine besylate oral tablet extended release 24hr 112.5 mg* | Tier 1 | ST: TRIAL OF ONE OF THE FOLLOWING: BUPROPION, CITALOPRAM, ESCITALOPRAM, FLUOXETINE, MIRTAZAPINE, PAROXETINE, SERTRALINE, VENLAFAXINE, DESVENLAFAXINE, FLUVOXAMINE, OR DULOXETINE IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| *venlafaxine oral capsule,extended release 24hr 150 mg, 37.5 mg, 75 mg* (Effexor XR) | Tier 1 | |
| *venlafaxine oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg* | Tier 1 | |
| *venlafaxine oral tablet extended release 24hr 150 mg, 225 mg, 37.5 mg, 75 mg* | Tier 1 | |
| **Ssri & 5Ht1a Partial Agonist Antidepressant** | | |
| *vilazodone oral tablet 10 mg, 20 mg, 40 mg* (Viibryd) | Tier 1 | |
| **Ssri & Serotonin Receptor Modulator Antidepressant** | | |
| TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG | Tier 2 | QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Tricyclic Antidepressant/Benzodiazepine Combinatns** | | | |
| *amitriptyline-chlordiazepoxide oral tablet 12.5-5 mg, 25-10 mg* | | Tier 1 | |
| **Tricyclic Antidepressant/Phenothiazine Combinatns** | | | |
| *perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg* | | Tier 1 | |
| **Tricyclic Antidepressants & Rel. Non-Sel. Ru-Inhib** | | | |
| *amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg* | | Tier 1 | |
| *clomipramine oral capsule 25 mg, 50 mg, 75 mg* | (Anafranil) | Tier 1 | |
| *desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *doxepin oral concentrate 10 mg/ml* | | Tier 1 | |
| *imipramine hcl oral tablet 10 mg, 25 mg, 50 mg* | | Tier 1 | |
| *imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg* | | Tier 1 | |
| *nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *nortriptyline oral solution 10 mg/5 ml* | | Tier 1 | |
| *protriptyline oral tablet 10 mg, 5 mg* | | Tier 1 | |
| *trimipramine oral capsule 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| **Behavioral Health - Other** | | | |
| **Adrenergics, Aromatic, Non-Catecholamine** | | | |
| *amphetamine sulfate oral tablet 10 mg, 5 mg* | (Evekeo) | Tier 1 | QL (4 EA per 1 day) |
| *dextroamphetamine sulfate oral capsule, extended release 10 mg* | (Dexedrine Spansule) | Tier 1 | QL (4 EA per 1 day) |
| *dextroamphetamine sulfate oral capsule, extended release 15 mg* | (Dexedrine Spansule) | Tier 1 | QL (120 EA per 30 days) |
| *dextroamphetamine sulfate oral capsule, extended release 5 mg* | | Tier 1 | QL (60 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *dextroamphetamine sulfate oral solution 5 mg/5 ml* | (ProCentra) | Tier 1 | QL (1800 ML per 30 days) |
| *dextroamphetamine sulfate oral tablet 10 mg, 5 mg* | (Zenzedi) | Tier 1 | QL (4 EA per 1 day) |
| *dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 7.5 mg* | (Zenzedi) | Tier 1 | ST: TRIAL OF DEXTROAMPHETAMINE SULFATE IR 5MG OR 10MG TABLETS OR DEXTROAMPHETAMINE SOLUTION IN THE PAST 120 DAYS; QL (4 EA per 1 day) |
| *dextroamphetamine sulfate oral tablet 20 mg* | (Zenzedi) | Tier 1 | ST: TRIAL OF DEXTROAMPHETAMINE SULFATE IR 5MG OR 10MG TABLETS OR DEXTROAMPHETAMINE SOLUTION IN THE PAST 120 DAYS; QL (3 EA per 1 day) |
| *dextroamphetamine sulfate oral tablet 30 mg* | (Zenzedi) | Tier 1 | ST: TRIAL OF DEXTROAMPHETAMINE SULFATE IR 5MG OR 10MG TABLETS OR DEXTROAMPHETAMINE SOLUTION IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| *dextroamphetamine-amphetamine oral capsule, er triphasic 24 hr 12.5 mg, 25 mg, 37.5 mg, 50 mg* | (Mydayis) | Tier 1 | QL (1 EA per 1 day) |
| *dextroamphetamine-amphetamine oral capsule,extended release 24hr 10 mg, 15 mg, 5 mg* | (Adderall XR) | Tier 1 | QL (1 EA per 1 day) |
| *dextroamphetamine-amphetamine oral capsule,extended release 24hr 20 mg, 25 mg, 30 mg* | (Adderall XR) | Tier 1 | QL (2 EA per 1 day) |
| *dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg* | (Adderall) | Tier 1 | QL (2 EA per 1 day) |
| *lisdexamfetamine oral capsule 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg* | (Vyvanse) | Tier 1 | QL (1 EA per 1 day) |
| *lisdexamfetamine oral tablet,chewable 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg* | (Vyvanse) | Tier 1 | QL (1 EA per 1 day) |
| *methamphetamine oral tablet 5 mg* | (Desoxyn) | Tier 1 | QL (150 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Anti-Alcoholic Preparations** | | | |
| *acamprosate oral tablet,delayed release (dr/ec) 333 mg* | | Tier 1 | |
| *disulfiram oral tablet 250 mg, 500 mg* | | Tier 1 | |
| **Anti-Anxiety - Benzodiazepines** | | | |
| ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML | | Tier 2 | |
| *alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg* | (Xanax) | Tier 1 | |
| *alprazolam oral tablet extended release 24 hr 0.5 mg, 1 mg, 2 mg, 3 mg* | | Tier 1 | |
| *alprazolam oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg* | | Tier 1 | |
| *clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg* | | Tier 1 | |
| DIAZEPAM INTENSOL ORAL CONCENTRATE 5 MG/ML | (diazepam) | Tier 1 | |
| *diazepam oral concentrate 5 mg/ml* | (Diazepam Intensol) | Tier 1 | |
| *diazepam oral solution 5 mg/5 ml (1 mg/ml)* | | Tier 1 | |
| *diazepam oral tablet 10 mg, 2 mg, 5 mg* | (Valium) | Tier 1 | |
| LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML | (lorazepam) | Tier 1 | |
| *lorazepam oral concentrate 2 mg/ml* | (Lorazepam Intensol) | Tier 1 | |
| *lorazepam oral tablet 0.5 mg, 1 mg, 2 mg* | (Ativan) | Tier 1 | |
| *oxazepam oral capsule 10 mg, 15 mg, 30 mg* | | Tier 1 | |
| **Anti-Anxiety Drugs** | | | |
| *buspirone oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg* | | Tier 1 | |
| *meprobamate oral tablet 200 mg, 400 mg* | | Tier 1 | |
| **Anti-Mania Drugs** | | | |
| EQUETRO ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG | | Tier 3 | |
| *lithium carbonate oral capsule 150 mg, 300 mg, 600 mg* | | Tier 1 | |
| *lithium carbonate oral tablet 300 mg* | | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| *lithium carbonate oral tablet extended release 300 mg* (Lithobid) | Tier 1 | |
| *lithium carbonate oral tablet extended release 450 mg* | Tier 1 | |
| *lithium citrate oral solution 8 meq/5 ml* | Tier 1 | |
| **Anti-Narcolepsy & Anti-Cataplexy,Sedative-Type Agt** | | |
| LUMRYZ ORAL EXTEND RELEASE GRANULES,PACKET 4.5 GRAM, 6 GRAM, 7.5 GRAM, 9 GRAM | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| LUMRYZ STARTER PACK ORAL GRANULES ER PACKET, DOSE PACK 4.5-6-7.5 GRAM | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| *sodium oxybate oral solution 500 mg/ml* (Xyrem) | Tier 6 | PA; SP; QL (18 ML per 1 day) |
| XYWAV ORAL SOLUTION 0.5 GRAM/ML | Tier 6 | PA; SP; QL (18 ML per 1 day) |
| **Antipsych,Dopamine Antag.,Diphenylbutylpiperidines** | | |
| *pimozide oral tablet 1 mg, 2 mg* | Tier 1 | |
| **Antipsychotic-Atypical,D3/D2 Partial Ag-5Ht Mixed** | | |
| VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG | Tier 2 | QL (1 EA per 1 day) |
| **Antipsychotics, Atyp, D2 Partial Agonist/5Ht Mixed** | | |
| ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 720 MG/2.4 ML | Tier 2 | QL (2.4 ML per 42 days) |
| ABILIFY ASIMTUFII INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 960 MG/3.2 ML | Tier 2 | QL (3.2 ML per 42 days) |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 300 MG | Tier 2 | QL (1 EA per 26 days) |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL RECON 400 MG | Tier 2 | QL (2 EA per 26 days) |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 300 MG | Tier 2 | QL (1 EA per 26 days) |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 400 MG | Tier 2 | QL (2 EA per 26 days) |

| Drug | Status | Notes |
|---|---|---|
| *aripiprazole oral solution 1 mg/ml* | Tier 1 | ST: TRIAL OF TWO GENERIC SSRIS, SNRIS OR ATYPICAL ANTI-PSYCHOTICS REQUIRED.; QL (30 ML per 1 day) |
| *aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg* (Abilify) | Tier 1 | |
| *aripiprazole oral tablet,disintegrating 10 mg* | Tier 1 | ST: TRIAL OF TWO GENERIC SSRIS, SNRIS OR ATYPICAL ANTI-PSYCHOTICS REQUIRED.; QL (3 EA per 1 day) |
| *aripiprazole oral tablet,disintegrating 15 mg* | Tier 1 | ST: TRIAL OF TWO GENERIC SSRIS, SNRIS OR ATYPICAL ANTI-PSYCHOTICS REQUIRED.; QL (2 EA per 1 day) |
| ARISTADA INITIO INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 675 MG/2.4 ML | Tier 2 | |
| ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 1,064 MG/3.9 ML | Tier 2 | QL (3.9 ML per 14 days) |
| ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 441 MG/1.6 ML | Tier 2 | QL (1.6 ML per 14 days) |
| ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 662 MG/2.4 ML | Tier 2 | QL (2.4 ML per 14 days) |
| ARISTADA INTRAMUSCULAR SUSPENSION,EXTENDED REL SYRING 882 MG/3.2 ML | Tier 2 | QL (3.2 ML per 14 days) |
| REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | Tier 2 | QL (1 EA per 1 day) |
| **Antipsychotics, Dopamine & Serotonin Antagonists** | | |
| ADASUVE INHALATION AEROSOL POWDR BREATH ACTIVATED 10 MG | Tier 5 | SP |
| *loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg* | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| **Antipsychotics,Atypical,Dopamine,& Serotonin Antag** | | |
| *asenapine maleate sublingual tablet 10 mg, 2.5 mg, 5 mg* (Saphris) | Tier 1 | QL (2 EA per 1 day) |
| CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG | Tier 2 | QL (1 EA per 1 day) |
| *clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg* (Clozaril) | Tier 1 | |
| *clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg* | Tier 1 | QL (3 EA per 1 day) |
| ERZOFRI INTRAMUSCULAR SYRINGE 117 MG/0.75 ML | Tier 2 | QL (0.75 ML per 21 days) |
| ERZOFRI INTRAMUSCULAR SYRINGE 156 MG/ML, 351 MG/2.25 ML | Tier 2 | QL (1 ML per 21 days) |
| ERZOFRI INTRAMUSCULAR SYRINGE 234 MG/1.5 ML | Tier 2 | QL (1.5 ML per 21 days) |
| ERZOFRI INTRAMUSCULAR SYRINGE 39 MG/0.25 ML | Tier 2 | QL (0.25 ML per 21 days) |
| ERZOFRI INTRAMUSCULAR SYRINGE 78 MG/0.5 ML | Tier 2 | QL (0.5 ML per 21 days) |
| FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG | Tier 3 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (2 EA per 1 day) |
| FANAPT TITRATION PACK A ORAL TABLETS,DOSE PACK 1MG(2)-2MG(2)- 4MG(2)-6MG(2) | Tier 3 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (8 EA per 28 days) |
| FANAPT TITRATION PACK B ORAL TABLETS,DOSE PACK 1 MG(6)-2MG(2)- 6 MG(2)-8 MG(2) | Tier 3 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (12 EA per 28 days) |
| FANAPT TITRATION PACK C ORAL TABLETS,DOSE PACK 1 MG(4)-2 MG(2) -6 MG (2) | Tier 3 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (8 EA per 28 days) |

| Drug | Status | Notes |
|---|---|---|
| INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,092 MG/3.5 ML | Tier 2 | QL (3.5 ML per 166 days) |
| INVEGA HAFYERA INTRAMUSCULAR SYRINGE 1,560 MG/5 ML | Tier 2 | QL (5 ML per 166 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 117 MG/0.75 ML | Tier 2 | QL (0.75 ML per 21 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 156 MG/ML | Tier 2 | QL (1 ML per 21 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 234 MG/1.5 ML | Tier 2 | QL (1.5 ML per 21 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 39 MG/0.25 ML | Tier 2 | QL (0.25 ML per 21 days) |
| INVEGA SUSTENNA INTRAMUSCULAR SYRINGE 78 MG/0.5 ML | Tier 2 | QL (0.5 ML per 21 days) |
| INVEGA TRINZA INTRAMUSCULAR SYRINGE 273 MG/0.88 ML | Tier 2 | QL (0.88 ML per 70 days) |
| INVEGA TRINZA INTRAMUSCULAR SYRINGE 410 MG/1.32 ML | Tier 2 | QL (1.32 ML per 70 days) |
| INVEGA TRINZA INTRAMUSCULAR SYRINGE 546 MG/1.75 ML | Tier 2 | QL (1.75 ML per 70 days) |
| INVEGA TRINZA INTRAMUSCULAR SYRINGE 819 MG/2.63 ML | Tier 2 | QL (2.63 ML per 70 days) |
| *lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg* (Latuda) | Tier 1 | |
| LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG | Tier 3 | ST: TRIAL OF ONE GENERIC ATYPICAL ANTIPSYCHOTIC IN THE PAST 365 DAYS; QL (1 EA per 1 day) |
| *olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg* (Zyprexa) | Tier 1 | |
| *olanzapine oral tablet,disintegrating 10 mg, 15 mg, 20 mg, 5 mg* (Zyprexa Zydis) | Tier 1 | |
| *paliperidone oral tablet extended release 24hr 1.5 mg* | Tier 1 | QL (1 EA per 1 day) |
| *paliperidone oral tablet extended release 24hr 3 mg, 9 mg* (Invega) | Tier 1 | QL (1 EA per 1 day) |
| *paliperidone oral tablet extended release 24hr 6 mg* (Invega) | Tier 1 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| PERSERIS SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 120 MG, 90 MG | | Tier 3 | QL (1 EA per 28 days) |
| *quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg* | (Seroquel) | Tier 1 | |
| *quetiapine oral tablet 150 mg* | | Tier 1 | |
| *quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg* | (Seroquel XR) | Tier 1 | |
| *risperidone microspheres intramuscular suspension,extended rel recon 12.5 mg/2 ml, 25 mg/2 ml, 37.5 mg/2 ml, 50 mg/2 ml* | (Risperdal Consta) | Tier 1 | QL (1 EA per 14 days) |
| *risperidone oral solution 1 mg/ml* | (Risperdal) | Tier 1 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (16 ML per 1 day) |
| *risperidone oral tablet 0.25 mg* | | Tier 1 | |
| *risperidone oral tablet 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg* | (Risperdal) | Tier 1 | |
| *risperidone oral tablet,disintegrating 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg* | | Tier 1 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (2 EA per 1 day) |
| *risperidone oral tablet,disintegrating 4 mg* | | Tier 1 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (4 EA per 1 day) |
| SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24 HOUR, 5.7 MG/24 HOUR, 7.6 MG/24 HOUR | | Tier 3 | ST: TRIAL OF TWO GENERIC ATYPICAL ANTIPSYCHOTICS REQUIRED IN THE PAST 365 DAYS; QL (1 EA per 1 day) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 100 MG/0.28 ML | | Tier 2 | QL (0.28 ML per 28 days) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 125 MG/0.35 ML | | Tier 2 | QL (0.35 ML per 28 days) |

| Drug | Status | Notes |
|---|---|---|
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 150 MG/0.42 ML | Tier 2 | QL (0.42 ML per 56 days) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 200 MG/0.56 ML | Tier 2 | QL (0.56 ML per 56 days) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 250 MG/0.7 ML | Tier 2 | QL (0.7 ML per 56 days) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 50 MG/0.14 ML | Tier 2 | QL (0.14 ML per 28 days) |
| UZEDY SUBCUTANEOUS SUSPENSION,EXTENDED REL SYRING 75 MG/0.21 ML | Tier 2 | QL (0.21 ML per 28 days) |
| *ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg* (Geodon) | Tier 1 | |
| **Antipsychotics,Dopamine Antagonists, Thioxanthenes** | | |
| *thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg* | Tier 1 | |
| **Antipsychotics,Dopamine Antagonists,Butyrophenones** | | |
| *haloperidol lactate oral concentrate 2 mg/ml* | Tier 1 | |
| *haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg* | Tier 1 | |
| **Antipsychotics,Dopamine Antagonst,Dihydroindolones** | | |
| *molindone oral tablet 10 mg, 5 mg* | Tier 1 | QL (4 EA per 1 day) |
| *molindone oral tablet 25 mg* | Tier 1 | QL (9 EA per 1 day) |
| **Anti-Psychotics,Phenothiazines** | | |
| *chlorpromazine oral concentrate 100 mg/ml, 30 mg/ml* | Tier 1 | |
| *chlorpromazine oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg* | Tier 1 | |
| *fluphenazine hcl oral concentrate 5 mg/ml* | Tier 1 | |
| *fluphenazine hcl oral elixir 2.5 mg/5 ml* | Tier 1 | |
| *fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg* | Tier 1 | |
| *perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| *trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg* | | Tier 1 | |
| **Barbiturates** | | | |
| *phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)* | | Tier 1 | |
| *phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg* | | Tier 1 | |
| **Hsdd Agents-Mixed Serotonin Agonist/Antagonists** | | | |
| ADDYI ORAL TABLET 100 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| VYLEESI SUBCUTANEOUS AUTO-INJECTOR 1.75 MG/0.3 ML | | Tier 3 | PA; QL (2.4 ML per 30 days) |
| **Hypnotics, Melatonin Mt1/Mt2 Receptor Agonists** | | | |
| HETLIOZ LQ ORAL SUSPENSION 4 MG/ML | | Tier 6 | PA; SP; QL (5 ML per 1 day) |
| *ramelteon oral tablet 8 mg* | (Rozerem) | Tier 1 | ST: TRIAL OF ZOLPIDEM IR (AMBIEN), ZALEPLON (SONATA) OR ESZOPICLONE (LUNESTA) REQUIRED WITHIN THE PAST 120 DAYS |
| *tasimelteon oral capsule 20 mg* | (Hetlioz) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| **Narcolepsy And Sleep Disorder Therapy Agents** | | | |
| *armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg* | (Nuvigil) | Tier 1 | QL (1 EA per 1 day) |
| *modafinil oral tablet 100 mg* | (Provigil) | Tier 1 | QL (1 EA per 1 day) |
| *modafinil oral tablet 200 mg* | (Provigil) | Tier 1 | QL (2 EA per 1 day) |
| SUNOSI ORAL TABLET 150 MG, 75 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| **Narcolepsy Tx-H3-Recept.Antagonist/Inverse Agonist** | | | |
| WAKIX ORAL TABLET 17.8 MG, 4.45 MG | | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| **Narcotic Antagonists** | | | |
| KLOXXADO NASAL SPRAY,NON-AEROSOL 8 MG/ACTUATION | | Tier 2 | QL (4 EA per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| LOTREXONE ORAL CAPSULE 1.5 MG, 4.5 MG | Tier 3 | |
| *naloxone injection syringe 0.4 mg/ml, 1 mg/ml* | Tier 1 | |
| NALTREX ORAL CAPSULE 1.5 MG, 4.5 MG | Tier 3 | |
| *naltrexone oral tablet 50 mg* | Tier 1 | |
| OPVEE NASAL SPRAY,NON-AEROSOL 2.7 MG/ACTUATION | Tier 3 | QL (4 EA per 30 days) |
| ZIMHI INJECTION SYRINGE 5 MG/0.5 ML | Tier 3 | QL (2 ML per 30 days) |
| ZURNAI INJECTION AUTO-INJECTOR 1.5 MG/0.5 ML | Tier 3 | QL (2 ML per 30 days) |
| **Sedative-Hypnotics - Benzodiazepines** | | |
| *estazolam oral tablet 1 mg, 2 mg* | Tier 1 | |
| *flurazepam oral capsule 15 mg, 30 mg* | Tier 1 | |
| *midazolam oral syrup 2 mg/ml* | Tier 1 | |
| *quazepam oral tablet 15 mg* (Doral) | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING ORAL GENERICS: ZOLPIDEM TABLETS, ZALEPLON, ESZOPICLONE, TEMAZEPAM OR FLURAZEPAM WITHIN THE PAST 120 DAYS. |
| *temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg* (Restoril) | Tier 1 | |
| *triazolam oral tablet 0.125 mg, 0.25 mg* | Tier 1 | |
| **Sedative-Hypnotics,Non-Barbiturate** | | |
| BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG | Tier 2 | ST: TRIAL OF ZOLPIDEM TARTRATE, ESZOPICLONE, OR ZALEPLON IN THE LAST 130 DAYS; QL (1 EA per 1 day) |
| DAYVIGO ORAL TABLET 10 MG, 5 MG | Tier 2 | ST: TRIAL OF ZOLPIDEM TARTRATE, ESZOPICLONE, OR ZALEPLON IN THE LAST 130 DAYS; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *doxepin oral tablet 3 mg* | (Silenor) | Tier 1 | ST: TRIAL OF ZOLPIDEM, ZALEPLON, ESZOPICLONE, DOXEPIN SOLUTION, OR DOXEPIN 10MG CAPSULE REQUIRED.\|TRIAL OF ZOLPIDEM, ZALEPLON, ESZOPICLONE, DOXEPIN SOLUTION, OR DOXEPIN 10MG CAPSULE REQUIRED; QL (1 EA per 1 day) |
| *doxepin oral tablet 6 mg* | (Silenor) | Tier 1 | ST: TRIAL OF ZOLPIDEM, ZALEPLON, ESZOPICLONE, DOXEPIN SOLUTION, OR DOXEPIN 10MG CAPSULE REQUIRED.; QL (1 EA per 1 day) |
| *eszopiclone oral tablet 1 mg, 2 mg, 3 mg* | (Lunesta) | Tier 1 | QL (1 EA per 1 day) |
| QUVIVIQ ORAL TABLET 25 MG, 50 MG | | Tier 3 | ST: TRIAL OF ZOLPIDEM TARTRATE, ESZOPICLONE, OR ZALEPLON IN THE LAST 130 DAYS; QL (1 EA per 1 day) |
| *zaleplon oral capsule 10 mg, 5 mg* | | Tier 1 | QL (1 EA per 1 day) |
| *zolpidem oral tablet 10 mg, 5 mg* | (Ambien) | Tier 1 | QL (1 EA per 1 day) |
| *zolpidem oral tablet,ext release multiphase 12.5 mg, 6.25 mg* | (Ambien CR) | Tier 1 | QL (1 EA per 1 day) |
| *zolpidem sublingual tablet 1.75 mg, 3.5 mg* | | Tier 1 | ST: TRIAL OF ZOLPIDEM TARTRATE, ESZOPICLONE, OR ZALEPLON IN THE LAST 130 DAYS; QL (1 EA per 1 day) |
| **Selective Serotonin 5-Ht2a Inverse Agonists (Ssia)** | | | |
| NUPLAZID ORAL CAPSULE 34 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| NUPLAZID ORAL TABLET 10 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Ssri &Antipsych,Atyp,Dopamine&Serotonin Antag Comb** | | | |
| *olanzapine-fluoxetine oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg* | | Tier 1 | QL (1 EA per 1 day) |
| **Tx For Adhd - Selective Alpha-2A Receptor Agonist** | | | |
| *clonidine hcl oral tablet extended release 12 hr 0.1 mg* | | Tier 1 | |
| *guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg* | (Intuniv ER) | Tier 1 | |
| ONYDA XR ORAL SUSPENSION,EXTEND RELEASE 24HR 0.1 MG/ML | | Tier 3 | ST: TRIAL OF A GENERIC NON-STIMULANT AGENT FOR ADHD (ATOMOXETINE, CLONIDINE ER, GUANFACINE ER) OR ATONCY IN THE PAST 120 DAYS; QL (4 ML per 1 day) |
| **Tx For Attention Deficit-Hyperact(Adhd)/Narcolepsy** | | | |
| AZSTARYS ORAL CAPSULE 26.1 MG-5.2 MG, 39.2 MG- 7.8 MG, 52.3 MG-10.4 MG | | Tier 2 | ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| COTEMPLA XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H 17.3 MG, 8.6 MG | (methylphenidate) | Tier 3 | ST: TRIAL OF AZSTARYS OR JORNAY PM IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| COTEMPLA XR-ODT ORAL TABLET,DISINTEG ER BIPHASE 24H 25.9 MG | (methylphenidate) | Tier 3 | ST: TRIAL OF AZSTARYS OR JORNAY PM IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| *dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg* | (Focalin XR) | Tier 1 | QL (1 EA per 1 day) |
| *dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg* | (Focalin) | Tier 1 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| JORNAY PM ORAL CAPSULE,DEL REL,EXT REL SPRINK 100 MG, 20 MG, 40 MG, 60 MG, 80 MG | | Tier 2 | ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 40 mg, 50 mg, 60 mg* | (Metadate CD) | Tier 1 | QL (1 EA per 1 day) |
| *methylphenidate hcl oral capsule, er biphasic 30-70 30 mg* | (Metadate CD) | Tier 1 | QL (2 EA per 1 day) |
| *methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 40 mg, 60 mg* | | Tier 1 | QL (1 EA per 1 day) |
| *methylphenidate hcl oral capsule,er biphasic 50-50 20 mg* | (Ritalin LA) | Tier 1 | QL (1 EA per 1 day) |
| *methylphenidate hcl oral capsule,er biphasic 50-50 30 mg* | | Tier 1 | QL (2 EA per 1 day) |
| *methylphenidate hcl oral solution 10 mg/5 ml, 5 mg/5 ml* | (Methylin) | Tier 1 | |
| *methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg* | (Ritalin) | Tier 1 | QL (90 EA per 30 days) |
| *methylphenidate hcl oral tablet extended release 10 mg* | | Tier 1 | QL (3 EA per 1 day) |
| *methylphenidate hcl oral tablet extended release 20 mg* | | Tier 1 | QL (90 EA per 30 days) |
| *methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 54 mg* | (Concerta) | Tier 1 | QL (1 EA per 1 day) |
| *methylphenidate hcl oral tablet extended release 24hr 36 mg* | (Concerta) | Tier 1 | QL (2 EA per 1 day) |
| *methylphenidate hcl oral tablet,chewable 10 mg* | | Tier 1 | QL (6 EA per 1 day) |
| *methylphenidate hcl oral tablet,chewable 2.5 mg, 5 mg* | | Tier 1 | QL (90 EA per 30 days) |
| *methylphenidate oral tablet,disinteg er biphase 24h 17.3 mg, 8.6 mg* | (Cotempla XR-ODT) | Tier 1 | ST: TRIAL OF AZSTARYS OR JORNAY PM IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *methylphenidate oral tablet,disinteg er biphase 24h 25.9 mg* | (Cotempla XR-ODT) | Tier 1 | ST: TRIAL OF AZSTARYS OR JORNAY PM IN THE PAST 120 DAYS; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| *methylphenidate transdermal patch 24 hour 10 mg/9 hr, 15 mg/9 hr, 20 mg/9 hr, 30 mg/9 hr* (Daytrana) | Tier 1 | ST: TRIAL OF ORAL METHYLPHENIDATE CD, ER OR LA FORMULATION OR METHYLPHENIDATE SUSPENSION/SOLUTION REQUIRED.; QL (1 EA per 1 day) |
| QUILLICHEW ER ORAL TABLET,CHEW,IR-ER.BIPHASIC24HR 20 MG, 40 MG | Tier 3 | ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| QUILLICHEW ER ORAL TABLET,CHEW,IR-ER.BIPHASIC24HR 30 MG | Tier 3 | ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| QUILLIVANT XR 25 MG/5 ML SUSP 5 MG/ML (25 MG/5 ML) | Tier 3 | 120mL Bottle; ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (240 ML per 30 days) |
| QUILLIVANT XR 25 MG/5 ML SUSP 5 MG/ML (25 MG/5 ML) | Tier 3 | 150mL Bottle; ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (300 ML per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| QUILLIVANT XR 25 MG/5 ML SUSP 5 MG/ML (25 MG/5 ML) | Tier 3 | 180mL Bottle; ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (360 ML per 30 days) |
| QUILLIVANT XR 25 MG/5 ML SUSP 5 MG/ML (25 MG/5 ML) | Tier 3 | 60mL Bottle; ST: TRIAL OF 1 OF THE FOLLOWING: GENERIC LISDEXAMFETAMINE, METHYLPHENIDATE ER/LA/CD, OR DEXTROAMPHETAMINE/ AMPHETAMINE XR/ER IN THE PAST 120 DAYS; QL (60 ML per 30 days) |
| **Tx For Attention Deficit-Hyperact.(Adhd), Nri-Type** | | |
| *atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg* | Tier 1 | |
| QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR 100 MG | Tier 3 | ST: TRIAL OF ATOMOXETINE, CLONIDINE ER (KAPVAY), GUANFACINE ER (INTUNIV), GENERIC IR METHYLPHENIDATE, DEXMETHYLPHENIDATE OR DEXTROAMPHETAMINE/ AMPHETAMINE IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR 150 MG | Tier 3 | ST: TRIAL OF ATOMOXETINE, CLONIDINE ER (KAPVAY), GUANFACINE ER (INTUNIV), GENERIC IR METHYLPHENIDATE, DEXMETHYLPHENIDATE OR DEXTROAMPHETAMINE/ AMPHETAMINE IN THE PAST 120 DAYS; QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| QELBREE ORAL CAPSULE,EXTENDED RELEASE 24HR 200 MG | | Tier 3 | ST: TRIAL OF ATOMOXETINE, CLONIDINE ER (KAPVAY), GUANFACINE ER (INTUNIV), GENERIC IR METHYLPHENIDATE, DEXMETHYLPHENIDATE OR DEXTROAMPHETAMINE/ AMPHETAMINE IN THE PAST 120 DAYS; QL (3 EA per 1 day) |
| **Cardiovascular Disease - Arrhythmia** | | | |
| **Antiarrhythmics** | | | |
| *amiodarone oral tablet 100 mg, 200 mg* | (Pacerone) | Tier 1 | |
| *amiodarone oral tablet 400 mg* | | Tier 1 | |
| *disopyramide phosphate oral capsule 100 mg, 150 mg* | (Norpace) | Tier 1 | |
| *dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg* | (Tikosyn) | Tier 1 | |
| *flecainide oral tablet 100 mg, 150 mg, 50 mg* | | Tier 1 | |
| *mexiletine oral capsule 150 mg, 200 mg, 250 mg* | | Tier 1 | |
| MULTAQ ORAL TABLET 400 MG | | Tier 2 | |
| PACERONE ORAL TABLET 100 MG, 200 MG | (amiodarone) | Tier 1 | |
| *propafenone oral capsule,extended release 12 hr 225 mg, 325 mg, 425 mg* | | Tier 1 | |
| *propafenone oral tablet 150 mg, 225 mg, 300 mg* | | Tier 1 | |
| *quinidine gluconate oral tablet extended release 324 mg* | | Tier 1 | |
| *quinidine sulfate oral tablet 200 mg, 300 mg* | | Tier 1 | |
| **Cardiovascular Disease - Cardiac Stimulant** | | | |
| **Digitalis Glycosides** | | | |
| *digoxin oral solution 50 mcg/ml (0.05 mg/ml)* | | Tier 3 | |
| *digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)* | (Lanoxin) | Tier 1 | |
| *digoxin oral tablet 62.5 mcg (0.0625 mg)* | (Lanoxin) | Tier 1 | PA; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| LANOXIN ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG) | (digoxin) | Tier 3 | |
| LANOXIN ORAL TABLET 62.5 MCG (0.0625 MG) | (digoxin) | Tier 3 | PA; QL (1 EA per 1 day) |
| **Cardiovascular Disease - Hypertension** | | | |
| **Ace Inhibitor/Calcium Channel Blocker Combination** | | | |
| *amlodipine-benazepril oral capsule 10-20 mg* | (Lotrel) | Tier 1 | |
| *amlodipine-benazepril oral capsule 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg* | | Tier 1 | |
| *trandolapril-verapamil oral tablet, ir - er, biphasic 24hr 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg* | | Tier 1 | |
| **Ace Inhibitor/Thiazide & Thiazide-Like Diuretic** | | | |
| *benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg* | (Lotensin HCT) | Tier 1 | |
| *benazepril-hydrochlorothiazide oral tablet 5-6.25 mg* | | Tier 1 | |
| *captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg* | | Tier 1 | |
| *enalapril-hydrochlorothiazide oral tablet 10-25 mg* | (Vaseretic) | Tier 1 | |
| *enalapril-hydrochlorothiazide oral tablet 5-12.5 mg* | | Tier 1 | |
| *fosinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg* | | Tier 1 | |
| *lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg* | (Zestoretic) | Tier 1 | |
| *quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg* | | Tier 1 | |
| **Alpha/Beta-Adrenergic Blocking Agents** | | | |
| *carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg* | (Coreg) | Tier 1 | |
| *carvedilol phosphate oral capsule, er multiphase 24 hr 10 mg, 20 mg, 40 mg, 80 mg* | (Coreg CR) | Tier 1 | QL (1 EA per 1 day) |
| *labetalol oral tablet 100 mg, 200 mg, 300 mg, 400 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Alpha-Adrenergic Blocking Agents** | | | |
| CARDURA XL ORAL TABLET EXTENDED RELEASE 24HR 4 MG, 8 MG | | Tier 3 | |
| *doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg* | (Cardura) | Tier 1 | |
| *phenoxybenzamine oral capsule 10 mg* | | Tier 4 | PA; SP; QL (168 EA per 14 days) |
| *prazosin oral capsule 1 mg, 2 mg, 5 mg* | | Tier 1 | |
| *terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg* | | Tier 1 | |
| TEZRULY ORAL SOLUTION 1 MG/ML | | Tier 3 | PA; QL (20 ML per 1 day) |
| **Angioten.Receptr Antag./Cal.Chanl Blkr/Thiazide Cb** | | | |
| *amlodipine-valsartan-hcthiazid oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg* | (Exforge HCT) | Tier 1 | |
| *olmesartan-amlodipin-hcthiazid oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg* | (Tribenzor) | Tier 1 | |
| **Angiotensin Receptor Antag./Thiazide Diuretic Comb** | | | |
| *candesartan-hydrochlorothiazid oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg* | (Atacand HCT) | Tier 1 | |
| *irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg* | (Avalide) | Tier 1 | |
| *losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg* | (Hyzaar) | Tier 1 | |
| *olmesartan-hydrochlorothiazide oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg* | (Benicar HCT) | Tier 1 | |
| *telmisartan-hydrochlorothiazid oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg* | (Micardis HCT) | Tier 1 | |
| *valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg* | (Diovan HCT) | Tier 1 | |
| **Angiotensin Receptor Antgnst & Calc.Channel Blockr** | | | |
| *amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg* | (Azor) | Tier 1 | |
| *amlodipine-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg* | (Exforge) | Tier 1 | |
| *telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antihypertensives, Ace Inhibitors** | | | |
| *benazepril oral tablet 10 mg, 20 mg, 40 mg* | (Lotensin) | Tier 1 | |
| *benazepril oral tablet 5 mg* | | Tier 1 | |
| *captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg* | | Tier 1 | |
| *enalapril maleate oral solution 1 mg/ml* | (Epaned) | Tier 1 | PA; QL (40 ML per 1 day) |
| *enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg* | (Vasotec) | Tier 1 | |
| *fosinopril oral tablet 10 mg, 20 mg, 40 mg* | | Tier 1 | |
| *lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg* | (Zestril) | Tier 1 | |
| *moexipril oral tablet 15 mg, 7.5 mg* | | Tier 1 | |
| *perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg* | | Tier 1 | |
| QBRELIS ORAL SOLUTION 1 MG/ML | | Tier 3 | PA; QL (40 ML per 1 day) |
| *quinapril oral tablet 10 mg, 20 mg, 40 mg, 5 mg* | | Tier 1 | |
| *ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg* | | Tier 1 | |
| *trandolapril oral tablet 1 mg, 2 mg, 4 mg* | | Tier 1 | |
| **Antihypertensives, Angiotensin Receptor Antagonist** | | | |
| ARBLI ORAL SUSPENSION 10 MG/ML | | Tier 3 | PA; QL (10 ML per 1 day) |
| *azilsartan medoxomil oral tablet 40 mg, 80 mg* | (Edarbi) | Tier 1 | ST: TRIAL OF ACE INHIBITOR, ACE-I COMBO, ARB, OR ARB COMBO REQUIRED |
| *candesartan oral tablet 16 mg, 32 mg, 4 mg, 8 mg* | (Atacand) | Tier 1 | |
| *irbesartan oral tablet 150 mg, 300 mg* | (Avapro) | Tier 1 | |
| *irbesartan oral tablet 75 mg* | | Tier 1 | |
| *losartan oral tablet 100 mg, 25 mg, 50 mg* | (Cozaar) | Tier 1 | |
| *olmesartan oral tablet 20 mg, 40 mg, 5 mg* | (Benicar) | Tier 1 | |
| *telmisartan oral tablet 20 mg* | | Tier 1 | |
| *telmisartan oral tablet 40 mg, 80 mg* | (Micardis) | Tier 1 | |
| *valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg* | (Diovan) | Tier 1 | |
| **Antihypertensives, Ganglionic Blockers** | | | |
| VECAMYL ORAL TABLET 2.5 MG | | Tier 6 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antihypertensives, Miscellaneous** | | | |
| *metyrosine oral capsule 250 mg* | | Tier 4 | PA; SP |
| **Antihypertensives, Sympatholytic** | | | |
| *clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg* | | Tier 1 | |
| *clonidine transdermal patch weekly 0.1 mg/24 hr* | (Catapres-TTS-1) | Tier 1 | |
| *clonidine transdermal patch weekly 0.2 mg/24 hr* | (Catapres-TTS-2) | Tier 1 | |
| *clonidine transdermal patch weekly 0.3 mg/24 hr* | (Catapres-TTS-3) | Tier 1 | |
| *guanfacine oral tablet 1 mg, 2 mg* | | Tier 1 | |
| JAVADIN ORAL SOLUTION 0.02 MG/ML (20 MCG/ML) | | Tier 3 | PA; QL (120 ML per 1 day) |
| *methyldopa oral tablet 250 mg, 500 mg* | | Tier 1 | |
| **Antihypertensives, Vasodilators** | | | |
| *hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| *minoxidil oral tablet 10 mg, 2.5 mg* | | Tier 1 | |
| **Antihypertensives,Endothelin Receptor Antagonists** | | | |
| VANRAFIA ORAL TABLET 0.75 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Beta-Adrenergic Blocking Agents** | | | |
| *acebutolol oral capsule 200 mg, 400 mg* | | Tier 1 | |
| *atenolol oral tablet 100 mg, 25 mg, 50 mg* | (Tenormin) | Tier 1 | |
| *betaxolol oral tablet 10 mg, 20 mg* | | Tier 1 | |
| *bisoprolol fumarate oral tablet 10 mg, 2.5 mg, 5 mg* | | Tier 1 | |
| HEMANGEOL ORAL SOLUTION 4.28 MG/ML | | Tier 6 | PA; SP; QL (360 ML per 30 days) |
| KAPSPARGO SPRINKLE ORAL CAPSULE,SPRINKLE,ER 24HR 100 MG, 200 MG, 25 MG, 50 MG | | Tier 3 | |
| LOPRESSOR ORAL SOLUTION 10 MG/ML | | Tier 3 | PA; QL (45 ML per 1 day) |
| *metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg* | (Toprol XL) | Tier 1 | |
| *metoprolol tartrate oral tablet 100 mg, 50 mg* | (Lopressor) | Tier 1 | |
| *metoprolol tartrate oral tablet 12.5 mg* | (Lopressor) | Tier 3 | QL (4 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *metoprolol tartrate oral tablet 25 mg, 37.5 mg, 75 mg* | | Tier 1 | |
| *nadolol oral tablet 20 mg, 40 mg, 80 mg* | | Tier 1 | |
| *nebivolol oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg* | (Bystolic) | Tier 1 | |
| *pindolol oral tablet 10 mg, 5 mg* | | Tier 1 | |
| *propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg* | (Inderal LA) | Tier 1 | |
| *propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)* | | Tier 1 | |
| *propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg* | | Tier 1 | |
| SOTALOL AF ORAL TABLET 120 MG, 160 MG, 80 MG | (sotalol) | Tier 1 | |
| *sotalol oral tablet 120 mg, 160 mg, 80 mg* | (Sotalol AF) | Tier 1 | |
| *sotalol oral tablet 240 mg* | | Tier 1 | |
| SOTYLIZE ORAL SOLUTION 5 MG/ML | | Tier 3 | 250mL Bottle; ST: TRIAL OF SOTALOL TABLETS REQUIRED WITHIN THE PAST 120 DAYS; QL (64 ML per 1 day) |
| *timolol maleate oral tablet 10 mg, 20 mg, 5 mg* | | Tier 1 | |
| **Beta-Adrenergic Blocking Agents/Thiazide & Related** | | | |
| *atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg* | | Tier 1 | |
| *bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg* | | Tier 1 | |
| *metoprolol ta-hydrochlorothiaz oral tablet 100-25 mg, 100-50 mg, 50-25 mg* | | Tier 1 | |
| **Calcium Channel Blocking Agents** | | | |
| *amlodipine oral tablet 10 mg, 2.5 mg, 5 mg* | (Norvasc) | Tier 1 | |
| CARDAMYST NASAL SPRAY,NON-AEROSOL 70 MG/2 SPRAY | | Tier 3 | QL (2 EA per 1 FILL) |
| CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG | (diltiazem hcl) | Tier 1 | |
| CONJUPRI ORAL TABLET 2.5 MG | (levamlodipine) | Tier 3 | PA; QL (1 EA per 1 day) |
| *diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg* | (DILT-XR) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *diltiazem hcl oral capsule,extended release 12 hr 120 mg, 60 mg, 90 mg* | | Tier 1 | |
| *diltiazem hcl oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg* | (Tiadylt ER) | Tier 1 | |
| *diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg* | (Cartia XT) | Tier 1 | |
| *diltiazem hcl oral capsule,extended release 24hr 360 mg* | (Cardizem CD) | Tier 1 | |
| *diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg* | (Cardizem) | Tier 1 | |
| *diltiazem hcl oral tablet 90 mg* | | Tier 1 | |
| *diltiazem hcl oral tablet extended release 24 hr 120 mg* | (Cardizem LA) | Tier 1 | |
| *diltiazem hcl oral tablet extended release 24 hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg* | (Matzim LA) | Tier 1 | |
| DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG | (diltiazem hcl) | Tier 1 | |
| *felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg* | | Tier 1 | |
| *isradipine oral capsule 2.5 mg, 5 mg* | | Tier 1 | |
| *levamlodipine oral tablet 2.5 mg, 5 mg* | (Conjupri) | Tier 1 | PA; QL (1 EA per 1 day) |
| MATZIM LA ORAL TABLET EXTENDED RELEASE 24 HR 180 MG, 240 MG, 300 MG, 360 MG, 420 MG | (diltiazem hcl) | Tier 1 | |
| *nicardipine oral capsule 20 mg, 30 mg* | | Tier 1 | |
| *nifedipine oral capsule 10 mg, 20 mg* | | Tier 1 | |
| *nifedipine oral tablet extended release 24hr 30 mg, 60 mg* | (Procardia XL) | Tier 1 | |
| *nifedipine oral tablet extended release 24hr 90 mg* | | Tier 1 | |
| *nifedipine oral tablet extended release 30 mg, 60 mg, 90 mg* | | Tier 1 | |
| *nimodipine oral capsule 30 mg* | | Tier 1 | QL (12 EA per 1 day) |
| *nimodipine oral solution 60 mg/20 ml* | | Tier 4 | PA; SP; QL (2520 ML per 21 days) |
| *nisoldipine oral tablet extended release 24 hr 17 mg, 34 mg, 8.5 mg* | (Sular) | Tier 1 | |
| *nisoldipine oral tablet extended release 24 hr 20 mg, 25.5 mg, 30 mg, 40 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| NORLIQVA ORAL SOLUTION 1 MG/ML | | Tier 3 | PA; QL (10 ML per 1 day) |
| NYMALIZE ORAL SOLUTION 60 MG/10 ML | | Tier 3 | PA; QL (1260 ML per 21 days) |
| NYMALIZE ORAL SYRINGE 30 MG/5 ML, 60 MG/10 ML | | Tier 3 | PA; QL (1260 ML per 21 days) |
| TIADYLT ER ORAL CAPSULE,EXTENDED RELEASE 24 HR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG | (diltiazem hcl) | Tier 1 | |
| *verapamil oral capsule, 24 hr er pellet ct 100 mg, 200 mg, 300 mg* | | Tier 1 | |
| *verapamil oral capsule,ext rel. pellets 24 hr 120 mg, 180 mg, 240 mg, 360 mg* | | Tier 1 | |
| *verapamil oral tablet 120 mg, 40 mg, 80 mg* | | Tier 1 | |
| *verapamil oral tablet extended release 120 mg, 180 mg, 240 mg* | | Tier 1 | |
| **Loop Diuretics** | | | |
| *bumetanide oral tablet 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *ethacrynic acid oral tablet 25 mg* | (Edecrin) | Tier 1 | PA |
| FUROSCIX SUBCUTANEOUS KIT 80 MG/10 ML | | Tier 6 | PA; SP; QL (1 EA per 1 FILL) |
| *furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)* | | Tier 1 | |
| *furosemide oral tablet 20 mg, 40 mg, 80 mg* | (Lasix) | Tier 1 | |
| *torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg* | | Tier 1 | |
| **Potassium Sparing Diuretics** | | | |
| *amiloride oral tablet 5 mg* | | Tier 1 | |
| *eplerenone oral tablet 25 mg, 50 mg* | | Tier 1 | |
| KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG | | Tier 2 | QL (1 EA per 1 day) |
| *spironolactone oral suspension 25 mg/5 ml* | (CaroSpir) | Tier 1 | PA; QL (20 ML per 1 day) |
| *spironolactone oral tablet 100 mg, 25 mg, 50 mg* | (Aldactone) | Tier 1 | |
| *triamterene oral capsule 100 mg, 50 mg* | (Dyrenium) | Tier 1 | |
| **Potassium Sparing Diuretics In Combination** | | | |
| *amiloride-hydrochlorothiazide oral tablet 5-50 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *spironolacton-hydrochlorothiaz oral tablet 25-25 mg* | | Tier 1 | |
| *triamterene-hydrochlorothiazid oral capsule 37.5-25 mg* | | Tier 1 | |
| *triamterene-hydrochlorothiazid oral tablet 37.5-25 mg, 75-50 mg* | | Tier 1 | |
| **Pulm Anti-Htn,Soluble Guanylate Cyclase Stimulator** | | | |
| ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG | | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Pulm.Anti-Htn,Sel.C-Gmp Phosphodiesterase T5 Inhib** | | | |
| ALYQ ORAL TABLET 20 MG | (tadalafil (pulm. hypertension)) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| *sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml* | | Tier 1 | PA |
| *sildenafil (pulm.hypertension) oral tablet 20 mg* | (Revatio) | Tier 1 | PA |
| *tadalafil (pulm. hypertension) oral tablet 20 mg* | (Alyq) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| **Pulmonary Anti-Htn, Endothelin Receptor Antagonist** | | | |
| *ambrisentan oral tablet 10 mg, 5 mg* | (Letairis) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| *bosentan oral tablet 125 mg, 62.5 mg* | (Tracleer) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| *bosentan oral tablet for suspension 32 mg* | (Tracleer) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| *macitentan oral tablet 10 mg* | (Opsumit) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| **Pulmonary Antihyper Agent, Actriia-Fc** | | | |
| WINREVAIR SUBCUTANEOUS KIT 120 MG (60 MG X 2), 45 MG, 60 MG, 90 MG (45 MG X 2) | | Tier 6 | PA; SP; QL (1 EA per 21 days) |
| **Pulmonary Antihypertensives, Prostacyclin-Type** | | | |
| ORENITRAM MONTH 1 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG (42) | | Tier 5 | PA; SP |
| ORENITRAM MONTH 2 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG (210) | | Tier 5 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| ORENITRAM MONTH 3 TITRATION KT ORAL TABLET EXTENDED REL,DOSE PACK 0.125 MG (126)- 0.25 MG(42)- 1MG | Tier 5 | PA; SP |
| ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG | Tier 5 | PA; SP |
| REMODULIN INJECTION SOLUTION 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML (treprostinil sodium) | Tier 6 | PA; SP |
| *treprostinil sodium injection solution 1 mg/ml, 10 mg/ml, 2.5 mg/ml, 5 mg/ml* (Remodulin) | Tier 4 | PA; SP |
| UPTRAVI ORAL TABLET 1,000 MCG, 1,200 MCG, 1,400 MCG, 1,600 MCG, 400 MCG, 600 MCG, 800 MCG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| UPTRAVI ORAL TABLET 100 MCG | Tier 5 | PA; SP; QL (16 EA per 1 day) |
| UPTRAVI ORAL TABLET 150 MCG | Tier 5 | PA; SP |
| UPTRAVI ORAL TABLET 200 MCG | Tier 5 | PA; SP; QL (8 EA per 1 day) |
| UPTRAVI ORAL TABLETS,DOSE PACK 200 MCG (140)- 800 MCG (60) | Tier 5 | PA; SP; QL (200 EA per 28 days) |
| YUTREPIA INHALATION CAPSULE, W/INHALATION DEVICE 106 MCG, 26.5 MCG, 53 MCG, 79.5 MCG | Tier 5 | PA; SP; QL (1 EA per 28 days) |
| **Pulmonary Htn-Endothelin Recept Antg-Cgmp Pde5 Inh** | | |
| OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Renin Inhibitor, Direct** | | |
| *aliskiren oral tablet 150 mg, 300 mg* (Tekturna) | Tier 1 | |
| **Thiazide And Related Diuretics** | | |
| *chlorthalidone oral tablet 25 mg, 50 mg* | Tier 1 | |
| DIURIL ORAL SUSPENSION 250 MG/5 ML | Tier 3 | |
| HEMICLOR ORAL TABLET 12.5 MG | Tier 3 | |
| *hydrochlorothiazide oral capsule 12.5 mg* | Tier 1 | |
| *hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg* | Tier 1 | |
| *indapamide oral tablet 1.25 mg, 2.5 mg* | Tier 1 | |
| INZIRQO ORAL SUSPENSION FOR RECONSTITUTION 10 MG/ML | Tier 3 | PA; QL (320 ML per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *metolazone oral tablet 10 mg, 2.5 mg, 5 mg* | | Tier 1 | |
| THALITONE ORAL TABLET 15 MG | | Tier 3 | |
| **Vasodilators, Combination** | | | |
| *isosorbide-hydralazine oral tablet 20-37.5 mg* | (BiDil) | Tier 1 | |
| **Cardiovascular Disease - Lipid Irregularity** | | | |
| **Antihyperlip.Hmg Coa Reduct Inhib&Cholest.Ab.Inhib** | | | |
| *ezetimibe-rosuvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-5 mg* | (Roszet) | Tier 1 | QL (1 EA per 1 day) |
| *ezetimibe-simvastatin oral tablet 10-10 mg* | (Vytorin 10-10) | Tier 1 | |
| *ezetimibe-simvastatin oral tablet 10-20 mg* | (Vytorin 10-20) | Tier 1 | |
| *ezetimibe-simvastatin oral tablet 10-40 mg* | (Vytorin 10-40) | Tier 1 | |
| *ezetimibe-simvastatin oral tablet 10-80 mg* | (Vytorin 10-80) | Tier 1 | PA; QL (1 EA per 1 day) |
| ROSZET ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-5 MG | (ezetimibe-rosuvastatin) | Tier 3 | QL (1 EA per 1 day) |
| **Antihyperlipidemic - Apo B-100 Synthesis Inhibitor** | | | |
| REDEMPLO SUBCUTANEOUS SYRINGE 25 MG/0.5 ML | | Tier 5 | PA; SP; QL (0.5 ML per 90 days) |
| TRYNGOLZA SUBCUTANEOUS AUTO-INJECTOR 50 MG/0.8 ML, 80 MG/0.8 ML | | Tier 5 | PA; SP; QL (0.8 ML per 28 days) |
| **Antihyperlipidemic - Atp Citrate Lyase Inhibitor** | | | |
| NEXLETOL ORAL TABLET 180 MG | | Tier 2 | ST: TRIAL OF GENERIC STATIN IN THE PREVIOUS 120 DAYS |
| **Antihyperlipidemic - Hmg Coa Reductase Inhibitors** | | | |
| ATORVALIQ ORAL SUSPENSION 20 MG/5 ML (4 MG/ML) | | Tier 3 | PA |

| Drug | | Status | Notes |
|---|---|---|---|
| *atorvastatin oral tablet 10 mg, 20 mg* | (Lipitor) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *atorvastatin oral tablet 40 mg, 80 mg* | (Lipitor) | Tier 1 | |
| FLOLIPID ORAL SUSPENSION 20 MG/5 ML (4 MG/ML) | (simvastatin) | Tier 3 | PA; QL (5 ML per 1 day) |
| FLOLIPID ORAL SUSPENSION 40 MG/5 ML (8 MG/ML) | | Tier 3 | PA; QL (5 ML per 1 day) |
| *fluvastatin oral capsule 20 mg* | | ACA Tier | ST: TRIAL OF 2 OF THE FOLLOWING REQUIRED: ATORVASTATIN, LOVASTATIN, PRAVASTATIN, OR SIMVASTATIN; $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS; QL (2 EA per 1 day) |
| *fluvastatin oral capsule 40 mg* | | ACA Tier | ST: TRIAL OF 2 OF THE FOLLOWING REQUIRED: ATORVASTATIN, LOVASTATIN, PRAVASTATIN, OR SIMVASTATIN; $0 COPAY IF QUANTITY 2 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| *fluvastatin oral tablet extended release 24 hr 80 mg* (Lescol XL) | ACA Tier | ST: TRIAL OF 2 OF THE FOLLOWING REQUIRED: ATORVASTATIN, LOVASTATIN, PRAVASTATIN, OR SIMVASTATIN; $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS; QL (1 EA per 1 day) |
| *lovastatin oral tablet 10 mg, 20 mg* | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *lovastatin oral tablet 40 mg* | ACA Tier | $0 COPAY IF QUANTITY 2 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *pitavastatin calcium oral tablet 1 mg, 2 mg, 4 mg* (Livalo) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *pravastatin oral tablet 10 mg, 80 mg* | | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *pravastatin oral tablet 20 mg, 40 mg* | | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS; QL (1 EA per 1 day) |
| *rosuvastatin oral tablet 10 mg, 5 mg* | (Crestor) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *rosuvastatin oral tablet 20 mg, 40 mg* | (Crestor) | Tier 1 | |
| *simvastatin oral tablet 10 mg, 20 mg, 40 mg* | (Zocor) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *simvastatin oral tablet 5 mg* | | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, AGE 40-75 YEARS, AND NO HISTORY OF CARDIOVASCULAR SECONDARY PREVENTION MEDICATIONS IN 120 DAYS |
| *simvastatin oral tablet 80 mg* | | Tier 1 | PA; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antihyperlipidemic - Mtp Inhibitor** | | | |
| JUXTAPID ORAL CAPSULE 10 MG, 5 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| JUXTAPID ORAL CAPSULE 2 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| JUXTAPID ORAL CAPSULE 20 MG, 30 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| **Antihyperlipidemic - Pcsk9 Inhibitors** | | | |
| REPATHA PUSHTRONEX SUBCUTANEOUS WEARABLE INJECTOR 420 MG/3.5 ML | | Tier 2 | ST: TRIAL OF GENERIC STATIN IN THE PREVIOUS 120 DAYS; QL (10.5 ML per 84 days) |
| REPATHA SURECLICK SUBCUTANEOUS PEN INJECTOR 140 MG/ML | | Tier 2 | ST: TRIAL OF GENERIC STATIN IN THE PREVIOUS 120 DAYS; QL (6 ML per 84 days) |
| REPATHA SYRINGE SUBCUTANEOUS SYRINGE 140 MG/ML | | Tier 2 | ST: TRIAL OF GENERIC STATIN IN THE PREVIOUS 120 DAYS; QL (6 ML per 84 days) |
| **Antihyperlipidemic-Acly And Choles Absorp Inhib** | | | |
| NEXLIZET ORAL TABLET 180-10 MG | | Tier 2 | ST: TRIAL OF GENERIC STATIN IN THE PREVIOUS 120 DAYS |
| **Bile Salt Sequestrants** | | | |
| *cholestyramine (with sugar) oral powder 4 gram* | (Questran) | Tier 1 | |
| *cholestyramine (with sugar) oral powder in packet 4 gram* | (Questran) | Tier 1 | |
| CHOLESTYRAMINE LIGHT ORAL POWDER 4 GRAM | (cholestyramine) | Tier 1 | |
| CHOLESTYRAMINE LIGHT ORAL POWDER IN PACKET 4 GRAM | (cholestyramine) | Tier 1 | |
| *colesevelam oral powder in packet 3.75 gram* | (WelChol) | Tier 1 | |
| *colesevelam oral tablet 625 mg* | (WelChol) | Tier 1 | |
| *colestipol oral granules 5 gram* | (Colestid) | Tier 1 | |
| *colestipol oral packet 5 gram* | | Tier 1 | |
| *colestipol oral tablet 1 gram* | (Colestid) | Tier 1 | |
| PREVALITE ORAL POWDER 4 GRAM | (cholestyramine) | Tier 1 | |
| PREVALITE ORAL POWDER IN PACKET 4 GRAM | (cholestyramine) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Lipotropics** | | | |
| *ezetimibe oral tablet 10 mg* | (Zetia) | Tier 1 | QL (1 EA per 1 day) |
| *fenofibrate micronized oral capsule 130 mg, 134 mg, 200 mg, 43 mg, 67 mg* | | Tier 1 | |
| *fenofibrate nanocrystallized oral tablet 145 mg, 48 mg* | | Tier 1 | |
| *fenofibrate oral tablet 160 mg, 54 mg* | | Tier 1 | |
| *fenofibric acid (choline) oral capsule,delayed release(dr/ec) 135 mg, 45 mg* | | Tier 1 | |
| *fenofibric acid oral tablet 105 mg, 35 mg* | (Fibricor) | Tier 1 | |
| *gemfibrozil oral tablet 600 mg* | (Lopid) | Tier 1 | |
| *icosapent ethyl oral capsule 0.5 gram* | (Vascepa) | Tier 1 | QL (8 EA per 1 day) |
| *icosapent ethyl oral capsule 1 gram* | (Vascepa) | Tier 1 | QL (4 EA per 1 day) |
| *niacin oral tablet 500 mg* | (Niacor) | Tier 1 | |
| *niacin oral tablet extended release 24 hr 1,000 mg, 500 mg, 750 mg* | | Tier 1 | |
| NIACOR ORAL TABLET 500 MG | (niacin) | Tier 1 | |
| *omega-3 acid ethyl esters oral capsule 1 gram* | (Lovaza) | Tier 1 | ST: TRIAL OF GENERIC FENOFIBRATE IN THE PAST 120 DAYS; QL (4 EA per 1 day) |
| **Cardiovascular Disease - Miscellaneous Agents** | | | |
| **Adrenergic Vasopressor Agents** | | | |
| *droxidopa oral capsule 100 mg, 200 mg, 300 mg* | (Northera) | Tier 4 | SP; ST: TRIAL OF MIDODRINE OR FLUDROCORTISONE IN THE PAST 120 DAYS; QL (6 EA per 1 day) |
| *midodrine oral tablet 10 mg, 2.5 mg, 5 mg* | | Tier 1 | |
| **Angiotensin Recept-Neprilysin Inhibitor Comb(Arni)** | | | |
| ENTRESTO SPRINKLE ORAL PELLET 15-16 MG, 6-6 MG | | Tier 3 | QL (8 EA per 1 day) |
| *sacubitril-valsartan oral tablet 24-26 mg* | (Entresto) | Tier 1 | QL (6 EA per 1 day) |
| *sacubitril-valsartan oral tablet 49-51 mg, 97-103 mg* | (Entresto) | Tier 1 | QL (2 EA per 1 day) |
| **Antianginal & Anti-Ischemic Agents,Non-Hemodynamic** | | | |
| *ranolazine oral tablet extended release 12 hr 1,000 mg, 500 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antianginal, Heart Rate Reducing, I(F) Inhibitor** | | | |
| CORLANOR ORAL SOLUTION 5 MG/5 ML | | Tier 2 | QL (15 ML per 1 day) |
| *ivabradine oral tablet 5 mg, 7.5 mg* | (Corlanor) | Tier 1 | ST: TRIAL OF METOPROLOL SUCCINATE, BISOPROLOL, OR CARVEDILOL REQUIRED IN THE PAST 120 DAYS.; QL (2 EA per 1 day) |
| **Antihyperlip - Hmg-Coa&Calcium Channel Blocker Cb** | | | |
| *amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg* | (Caduet) | Tier 1 | QL (1 EA per 1 day) |
| *amlodipine-atorvastatin oral tablet 2.5-10 mg, 2.5-20 mg, 2.5-40 mg* | | Tier 1 | QL (1 EA per 1 day) |
| **Cardiac Myosin Inhibitor** | | | |
| CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Protein Stabilizers** | | | |
| ATTRUBY ORAL TABLET 356 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| VYNDAMAX ORAL CAPSULE 61 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Soluble Guanylate Cyclase (Sgc) Stimulator** | | | |
| VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| **Cardiovascular Disease - Vasodilation** | | | |
| **Vasodilators,Coronary** | | | |
| *isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg* | | Tier 1 | |
| *isosorbide dinitrate oral tablet 40 mg* | (Isordil) | Tier 1 | |
| *isosorbide dinitrate oral tablet 5 mg* | (Isordil Titradose) | Tier 1 | |
| *isosorbide mononitrate oral tablet 10 mg, 20 mg* | | Tier 1 | |
| *isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg* | | Tier 1 | |
| NITRO-BID TRANSDERMAL OINTMENT 2 % | (nitroglycerin) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg* | (Nitrostat) | Tier 1 | |
| *nitroglycerin transdermal ointment 2 %* | (Nitro-Bid) | Tier 1 | |
| *nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr* | (Nitro-Dur) | Tier 1 | |
| *nitroglycerin translingual spray,non-aerosol 400 mcg/spray* | (Nitrolingual) | Tier 1 | |
| NITROMIST TRANSLINGUAL AEROSOL,SPRAY 400 MCG/SPRAY | (nitroglycerin) | Tier 3 | |
| NITRO-TIME ORAL CAPSULE, EXTENDED RELEASE 2.5 MG, 6.5 MG, 9 MG | (nitroglycerin) | Tier 1 | |
| **Vasodilators,Peripheral** | | | |
| *ergoloid oral tablet 1 mg* | | Tier 1 | |
| **Contraception/Oxytocics** | | | |
| **Contraceptives, Intravaginal, Systemic** | | | |
| ANNOVERA VAGINAL RING 0.15-0.013 MG/24 HOUR | | ACA Tier | |
| ELURYNG VAGINAL RING 0.12-0.015 MG/24 HR | (etonogestrel-ethinyl estradiol) | ACA Tier | |
| ENILLORING VAGINAL RING 0.12-0.015 MG/24 HR | (etonogestrel-ethinyl estradiol) | ACA Tier | |
| *etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr* | (EluRyng) | ACA Tier | |
| HALOETTE VAGINAL RING 0.12-0.015 MG/24 HR | (etonogestrel-ethinyl estradiol) | ACA Tier | |
| **Contraceptives,Implantable** | | | |
| NEXPLANON SUBDERMAL IMPLANT 68 MG | | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 IN 365 DAYS |
| **Contraceptives,Injectable** | | | |
| DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML | | ACA Tier | $0 COPAY IF DAY SUPPLY LIMITED TO 90; QL (0.65 ML per 84 days) |
| *medroxyprogesterone intramuscular suspension 150 mg/ml* | (Depo-Provera) | ACA Tier | $0 COPAY IF DAY SUPPLY LIMITED TO 90; QL (1 ML per 84 days) |
| *medroxyprogesterone intramuscular syringe 150 mg/ml* | (Depo-Provera) | ACA Tier | $0 COPAY IF DAY SUPPLY LIMITED TO 90; QL (1 ML per 84 days) |
| **Contraceptives,Intravaginal** | | | |
| PHEXX VAGINAL GEL 1.8-1-0.4 % | | ACA Tier | QL (60 GM per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| VAGINAL CONTRACEPTIVE FILM VAGINAL FILM 28 % | | ACA Tier | |
| VCF CONTRACEPTIVE FILM VAGINAL FILM 28 % | | ACA Tier | |
| VCF CONTRACEPTIVE GEL VAGINAL GEL 4 % | | ACA Tier | |
| **Contraceptives,Oral** | | | |
| AFIRMELLE ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AFTER PILL ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| AFTERA ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| ALTAVERA (28) ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ALYACEN 1/35 (28) ORAL TABLET 1-35 MG-MCG | (norethindrone-ethin estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ALYACEN 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AMETHIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| AMETHYST (28) ORAL TABLET 90-20 MCG (28) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| APRI ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ARANELLE (28) ORAL TABLET 0.5/1/0.5-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ASHLYNA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| AUBRA EQ ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUBRA ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUROVELA 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUROVELA 1/20 (21) ORAL TABLET 1-20 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUROVELA 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUROVELA FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AUROVELA FE 1-20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| AVERI ORAL TABLET 0.15 MG-0.03 MG (21)/36.5 MG(7) | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AVIANE ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AYUNA ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| AZURETTE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| BALZIVA (28) ORAL TABLET 0.4-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| BLISOVI 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| BLISOVI FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| BLISOVI FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| BRIELLYN ORAL TABLET 0.4-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CAMILA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CAMRESE LO ORAL TABLETS,DOSE PACK,3 MONTH 0.1 MG-20 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| CAMRESE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| CAZIANT (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CHARLOTTE 24 FE ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CHATEAL EQ (28) ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CRYSELLE (28) ORAL TABLET 0.3-30 MG-MCG | (norgestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CYRED EQ ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| CYRED ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| DASETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG | (norethindrone-ethin estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| DASETTA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| DAYSEE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| DEBLITANE ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *desog-e.estradiol/e.estradiol oral tablet 0.15-0.02 mgx21 /0.01 mg x 5* | (Azurette (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| DOLISHALE ORAL TABLET 90-20 MCG (28) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *drospirenone-e.estradiol-lm.fa oral tablet 3-0.02-0.451 mg (24) (4)* | (Beyaz) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *drospirenone-e.estradiol-lm.fa oral tablet 3-0.03-0.451 mg (21) (7)* | (Tydemy) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *drospirenone-ethinyl estradiol oral tablet 3-0.02 mg* | (Jasmiel (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *drospirenone-ethinyl estradiol oral tablet 3-0.03 mg* | (Syeda) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ECONTRA EZ ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| ECONTRA ONE-STEP ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| ELINEST ORAL TABLET 0.3-30 MG-MCG | (norgestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ELLA ORAL TABLET 30 MG | | ACA Tier | |
| EMZAHH ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ENPRESSE ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10) | (levonorg-eth estrad triphasic) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ENSKYCE ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ERRIN ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ESTARYLLA ORAL TABLET 0.25-0.035 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg* | (Kelnor 1/35 (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg* | (Valtya) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| FALMINA (28) ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| FEIRZA ORAL TABLET 1 MG-20 MCG (21)/75 MG (7), 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| FEMLYV ORAL TABLET,DISINTEGRATING 1 MG- 20 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| FINZALA ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| GALBRIELA ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4) | (noreth-ethinyl estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| GEMMILY ORAL CAPSULE 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| HAILEY 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| HAILEY FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| HAILEY FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| HAILEY ORAL TABLET 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| HEATHER ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ICLEVIA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| INCASSIA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| INTROVALE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| ISIBLOOM ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JAIMIESS ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| JASMIEL (28) ORAL TABLET 3-0.02 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JENCYCLA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JOLESSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| JOYEAUX ORAL TABLET 0.1 MG-0.02 MG (21)/IRON (7) | (levonorgest-eth.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (28 EA per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| JULEBER ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JUNEL 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JUNEL FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JUNEL FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| JUNEL FE 24 ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| KAITLIB FE ORAL TABLET,CHEWABLE 0.8MG-25MCG(24) AND 75 MG (4) | (noreth-ethinyl estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| KALLIGA ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| KARIVA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| KELNOR 1/35 (28) ORAL TABLET 1-35 MG-MCG | (ethynodiol diac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| KURVELO (28) ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LARIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LARIN 1/20 (21) ORAL TABLET 1-20 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LARIN 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LARIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LARIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LESSINA ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LEVONEST (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10) | (levonorg-eth estrad triphasic) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *levonorgest-eth.estradiol-iron oral tablet 0.1 mg-0.02 mg (21)/iron (7)* | (Joyeaux) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (28 EA per 28 days) |
| *levonorgestrel oral tablet 1.5 mg* | (After Pill) | ACA Tier | |
| *levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg* | (Afirmelle) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| *levonorgestrel-ethinyl estrad oral tablet 0.15-0.03 mg* | (Altavera (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *levonorgestrel-ethinyl estrad oral tablet 90-20 mcg (28)* | (Amethyst (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *levonorgestrel-ethinyl estrad oral tablets,dose pack,3 month 0.15 mg-30 mcg (91)* | (Iclevia) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| *levonorg-eth estrad triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)* | (Enpresse) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG (24)/10 MCG (2) | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LOJAIMIESS ORAL TABLETS,DOSE PACK,3 MONTH 0.1 MG-20 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| LORYNA (28) ORAL TABLET 3-0.02 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LOW-OGESTREL (28) ORAL TABLET 0.3-30 MG-MCG | (norgestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LO-ZUMANDIMINE (28) ORAL TABLET 3-0.02 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LUIZZA ORAL TABLET 1-20 MG-MCG, 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LUTERA (28) ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LYLEQ ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| LYZA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MARLISSA (28) ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MELEYA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MIBELAS 24 FE ORAL TABLET,CHEWABLE 1 MG-20 MCG(24) /75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MICROGESTIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MICROGESTIN 1/20 (21) ORAL TABLET 1-20 MG-MCG | (norethindrone ac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MICROGESTIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MICROGESTIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| MILI ORAL TABLET 0.25-0.035 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MINZOYA ORAL TABLET 0.1 MG-0.02 MG (21)/IRON (7) | (levonorgest-eth.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (28 EA per 28 days) |
| MONO-LINYAH ORAL TABLET 0.25-0.035 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| MY CHOICE ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| MY WAY ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| NATAZIA ORAL TABLET 3 MG/2 MG-2 MG/ 2 MG-3 MG/1 MG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NEW DAY ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| NEXTSTELLIS ORAL TABLET 3 MG-14.2 MG (28) | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (1 EA per 1 day) |
| NIKKI (28) ORAL TABLET 3-0.02 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NORA-BE ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *noreth-ethinyl estradiol-iron oral tablet,chewable 0.8mg-25mcg(24) and 75 mg (4)* | (Galbriela) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone (contraceptive) oral tablet 0.35 mg* | (Camila) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone ac-eth estradiol oral tablet 1.5-30 mg-mcg* | (Aurovela 1.5/30 (21)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg* | (Aurovela 1/20 (21)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone-e.estradiol-iron oral capsule 1 mg-20 mcg (24)/75 mg (4)* | (Gemmily) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone-e.estradiol-iron oral tablet 1.5 mg-30 mcg (21)/75 mg (7)* | (Aurovela Fe 1.5/30 (28)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norethindrone-e.estradiol-iron oral tablet,chewable 1 mg-20 mcg(24) /75 mg (4)* | (Charlotte 24 Fe) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.025 mg* | (Tri-Lo-Estarylla) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-0.035mg (28)* | (Tri-Estarylla) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| *norgestimate-ethinyl estradiol oral tablet 0.25-0.035 mg* | (Estarylla) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG (21) | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG | (norethindrone-ethin estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NORTREL 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NYLIA 1/35 (28) ORAL TABLET 1-35 MG-MCG | (norethindrone-ethin estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| NYLIA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| OPCICON ONE-STEP ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| OPILL ORAL TABLET 0.075 MG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| OPTION-2 ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| ORQUIDEA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| PHILITH ORAL TABLET 0.4-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| PIMTREA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| PORTIA 28 ORAL TABLET 0.15-0.03 MG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| RECLIPSEN (28) ORAL TABLET 0.15-0.03 MG | (desogestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| RIVELSA ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ROSYRAH ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-20 MCG/ 0.15 MG-25 MCG | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| SETLAKIN ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (91) | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |
| SHAROBEL ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| SIMLIYA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| SIMPESSE ORAL TABLETS,DOSE PACK,3 MONTH 0.15 MG-30 MCG (84)/10 MCG (7) | (l norgest/e.estradiol-e.estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (91 EA per 84 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| SLYND ORAL TABLET 4 MG (28) | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS; QL (28 EA per 28 days) |
| SPRINTEC (28) ORAL TABLET 0.25-0.035 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| SYEDA ORAL TABLET 3-0.03 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TAKE ACTION ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| TARINA 24 FE ORAL TABLET 1 MG-20 MCG (24)/75 MG (4) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TARINA FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TARINA FE 1-20 EQ (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TILIA FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28) | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LEGEST FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28) | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28) | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-SPRINTEC (28) ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28) | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-0.025 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-0.035MG (28) | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TULANA ORAL TABLET 0.35 MG | (norethindrone (contraceptive)) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TURQOZ (28) ORAL TABLET 0.3-30 MG-MCG | (norgestrel-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| TYBLUME ORAL TABLET,CHEWABLE 0.1 MG- 20 MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| TYDEMY ORAL TABLET 3-0.03-0.451 MG (21) (7) | (drospirenone-e.estradiol-lm.fa) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VALTYA ORAL TABLET 1-35 MG-MCG, 1-50 MG-MCG | (ethynodiol diac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VELIVET TRIPHASIC REGIMEN (28) ORAL TABLET 0.1/.125/.15-25 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VESTURA (28) ORAL TABLET 3-0.02 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VIENVA ORAL TABLET 0.1-20 MG-MCG | (levonorgestrel-ethinyl estrad) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VIORELE (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VOLNEA (28) ORAL TABLET 0.15-0.02 MGX21 /0.01 MG X 5 | (desog-e.estradiol/e.estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VYFEMLA (28) ORAL TABLET 0.4-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| VYLIBRA ORAL TABLET 0.25-0.035 MG | (norgestimate-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| WERA (28) ORAL TABLET 0.5-35 MG-MCG | | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| WYMZYA FE ORAL TABLET,CHEWABLE 0.4MG-35MCG(21) AND 75 MG (7) | (noreth-ethinyl estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| XARAH FE ORAL TABLET 1-20(5)/1-30(7) /1MG-35MCG (9) | (norethindrone-e.estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| XELRIA FE ORAL TABLET,CHEWABLE 0.4MG-35MCG(21) AND 75 MG (7) | (noreth-ethinyl estradiol-iron) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| YOUR CHOICE ORAL TABLET 1.5 MG | (levonorgestrel) | ACA Tier | |
| ZARAH ORAL TABLET 3-0.03 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ZOVIA 1-35 (28) ORAL TABLET 1-35 MG-MCG | (ethynodiol diac-eth estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| ZUMANDIMINE (28) ORAL TABLET 3-0.03 MG | (drospirenone-ethinyl estradiol) | ACA Tier | $0 COPAY IF QUANTITY 28 IN 21 DAYS |
| **Contraceptives,Transdermal** | | | |
| GWYN LO TRANSDERMAL PATCH WEEKLY 220-20 MCG/24 HR | | ACA Tier | |
| *norelgestromin-ethin.estradiol transdermal patch weekly 150-35 mcg/24 hr* | (Xulane) | ACA Tier | |
| TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24 HR | | ACA Tier | |

| Drug | | Status | Notes |
|---|---|---|---|
| XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR | (norelgestromin-ethin.estradiol) | ACA Tier | |
| ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24 HR | (norelgestromin-ethin.estradiol) | ACA Tier | |
| **Diaphragms/Cervical Cap** | | | |
| CAYA CONTOURED VAGINAL DIAPHRAGM 65-80 MM | | ACA Tier | |
| FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM | | ACA Tier | |
| **Intra-Uterine Devices (Iud's)** | | | |
| KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 17.5 MCG/24 HR (5 YRS) 19.5 MG | | ACA Tier | |
| LILETTA INTRAUTERINE INTRAUTERINE DEVICE 20.4 MCG/24 HR (8 YRS) 52 MG | | ACA Tier | |
| MIRENA INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/24HR (UP TO 8 YRS) 52 MG | | ACA Tier | |
| MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE 175 SQUARE MM | | ACA Tier | |
| PARAGARD T 380A INTRAUTERINE INTRAUTERINE DEVICE 380 SQUARE MM | | ACA Tier | |
| PARAGARD T380A (SINGLE HAND) INTRAUTERINE INTRAUTERINE DEVICE 380 SQUARE MM | | ACA Tier | |
| SKYLA INTRAUTERINE INTRAUTERINE DEVICE 14 MCG/24 HR (3 YRS) 13.5 MG | | ACA Tier | |
| **Oxytocics** | | | |
| CERVIDIL VAGINAL INSERT, EXTENDED RELEASE 10 MG | | Tier 3 | |
| *methylergonovine oral tablet 0.2 mg* | | Tier 1 | QL (28 EA per 30 days) |
| PREPIDIL VAGINAL GEL 0.5 MG/3 G | | Tier 3 | |
| **Cough And Cold** | | | |
| **1St Gen Antihistamine & Decongestant Combinations** | | | |
| *promethazine-phenylephrine oral syrup 6.25-5 mg/5 ml* | (Promethazine VC) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **1St Gen Antihist-Decongest-Anticholinergic Comb** | | | |
| RESPA-AR ORAL TABLET EXTENDED RELEASE 12 HR 8-90-0.24 MG | | Tier 1 | |
| **Antitussives,Non-Narcotic** | | | |
| *benzonatate oral capsule 100 mg, 150 mg, 200 mg* | | Tier 1 | |
| **Narcotic Antituss-1St Gen. Antihistamine-Decongest** | | | |
| HISTEX-AC ORAL SYRUP 2.5-10-10 MG/5 ML | | Tier 3 | Age (Min 12 Years) |
| MAR-COF BP ORAL LIQUID 2-30-7.5 MG/5 ML | | Tier 1 | Age (Min 12 Years) |
| MAXI-TUSS CD ORAL LIQUID 4-10-10 MG/5 ML | | Tier 3 | Age (Min 12 Years) |
| POLY-TUSSIN AC ORAL LIQUID 4-10-10 MG/5 ML | | Tier 3 | Age (Min 12 Years) |
| RYDEX ORAL LIQUID 1.3-10-6.3 MG/5 ML | | Tier 1 | Age (Min 12 Years) |
| **Narcotic Antituss-Decongestant-Expectorant Comb** | | | |
| CODITUSSIN DAC ORAL LIQUID 30-10-200 MG/5 ML | | Tier 3 | Age (Min 12 Years) |
| GUAIFENESIN DAC ORAL SYRUP 30-10-100 MG/5 ML | | Tier 1 | Age (Min 12 Years) |
| **Narcotic Antitussive-1St Generation Antihistamine** | | | |
| DURATUSS AC ORAL LIQUID 1-10 MG/5 ML | | Tier 3 | |
| *hydrocodone-chlorpheniramine oral suspension,extended rel 12 hr 10-8 mg/5 ml* | | Tier 1 | QL (10 ML per 1 day); Age (Min 18 Years) |
| *promethazine-codeine oral syrup 6.25-10 mg/5 ml* | | Tier 1 | QL (30 ML per 1 day); Age (Min 18 Years) |
| TUXARIN ER ORAL TABLET EXTENDED RELEASE 12 HR 8-54.3 MG | | Tier 3 | ST: TRIAL OF PROMETHAZINE/CODEINE REQUIRED IN THE PREVIOUS 120 DAYS.; QL (2 EA per 1 day); Age (Min 18 Years) |
| **Narcotic Antitussive-Anticholinergic Comb.** | | | |
| *hydrocodone-homatropine oral solution 5-1.5 mg/5 ml* | (Hycodan (with homatropine)) | Tier 1 | QL (30 ML per 1 day); Age (Min 18 Years) |

| Drug | | Status | Notes |
|---|---|---|---|
| *hydrocodone-homatropine oral tablet 5-1.5 mg* | (Hycodan (with homatropine)) | Tier 1 | QL (6 EA per 1 day); Age (Min 18 Years) |
| HYDROMET ORAL SOLUTION 5-1.5 MG/5 ML | (hydrocodone-homatropine) | Tier 1 | QL (30 ML per 1 day); Age (Min 18 Years) |
| **Narcotic Antitussive-Expectorant Combination** | | | |
| *codeine-guaifenesin oral liquid 10-100 mg/5 ml* | (G Tussin AC) | Tier 1 | Age (Min 12 Years) |
| CODITUSSIN AC ORAL LIQUID 10-200 MG/5 ML | (codeine-guaifenesin) | Tier 1 | Age (Min 12 Years) |
| G TUSSIN AC ORAL LIQUID 10-100 MG/5 ML | (codeine-guaifenesin) | Tier 1 | Age (Min 12 Years) |
| GUAIFENESIN AC ORAL LIQUID 10-100 MG/5 ML | (codeine-guaifenesin) | Tier 1 | Age (Min 12 Years) |
| MAR-COF CG ORAL LIQUID 7.5-225 MG/5 ML | | Tier 1 | Age (Min 12 Years) |
| MAXI-TUSS AC ORAL LIQUID 10-100 MG/5 ML | (codeine-guaifenesin) | Tier 1 | Age (Min 12 Years) |
| NINJACOF-XG ORAL LIQUID 8-200 MG/5 ML | | Tier 1 | Age (Min 12 Years) |
| **Non-Narc Antituss-1St Gen. Antihistamine-Decongest** | | | |
| BROMFED DM ORAL SYRUP 2-30-10 MG/5 ML | (brompheniramine-pseudoeph-dm) | Tier 1 | |
| *brompheniramine-pseudoeph-dm oral syrup 2-30-10 mg/5 ml* | (Bromfed DM) | Tier 1 | |
| **Non-Narc Antitussive-1St Gen Antihistamine Comb.** | | | |
| *promethazine-dm oral solution 6.25-15 mg/5 ml* | | Tier 1 | |
| **Dermatology - Acne** | | | |
| **Acne Agents,Systemic** | | | |
| ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG | (isotretinoin) | Tier 1 | |
| AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG | (isotretinoin) | Tier 1 | |
| CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG | (isotretinoin) | Tier 1 | |
| *isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg* | (Accutane) | Tier 1 | |
| ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG | (isotretinoin) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Acne Agents,Topical** | | | |
| ACIOXIAY TOPICAL CREAM 15-4 % | (azelaic acid-niacinamide) | Tier 3 | |
| ADAINZOXIA TOPICAL GEL 0.3-2.5-4 % | (adapalene-benzoyl perox-niacin) | Tier 3 | |
| ADALINA TOPICAL GEL 5-4 % | (spironolactone-niacinamide) | Tier 3 | |
| *adapalene-benzoyl peroxide topical gel with pump 0.1-2.5 %, 0.3-2.5 %* | | Tier 1 | |
| ADERMICA HP TOPICAL GEL 0.05-2.5-1-2 % | | Tier 3 | |
| ADERMICA TOPICAL GEL 0.025-2.5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| ADMIRAZOL DUAL TOPICAL CREAM 6-5-2 % | | Tier 3 | |
| ADMIRAZOL HP DUAL TOPICAL CREAM 8.5-5-2 % | | Tier 3 | |
| ADMIRAZOL HP TOPICAL CREAM 8.5-5-2 % | | Tier 3 | |
| ADMIRAZOL TOPICAL CREAM 6-5-2 % | | Tier 3 | |
| ALIXI HP TOPICAL CREAM 8.5-4 % | | Tier 3 | |
| ALIXI TOPICAL CREAM 6-4 % | | Tier 3 | |
| ALOMIRA HP TOPICAL GEL 0.1-5-1-2 % | | Tier 3 | |
| ALOMIRA LP TOPICAL GEL 0.025-5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| ALOMIRA TOPICAL GEL 0.05-5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| ALURIS HP PLUS TOPICAL CREAM 0.1-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |
| ALURIS HP TOPICAL CREAM 0.1-4 % | | Tier 3 | |
| ALURIS LP PLUS TOPICAL CREAM 0.025-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |
| ALURIS LP TOPICAL CREAM 0.025-4 % | (tretinoin-niacinamide) | Tier 3 | |
| ALURIS PLUS TOPICAL CREAM 0.05-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |
| ALURIS TOPICAL CREAM 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| ALURIS TOPICAL GEL 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| ALUXOF DUAL TOPICAL GEL 0.025-5-1-2-2 % | | Tier 3 | |
| ALUXOF HP TOPICAL GEL 0.1-10-2-4-4 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| ALUXOF TOPICAL GEL 0.05-10-2-4-4 % | | Tier 3 | |
| APEXOL HP TOPICAL SUSPENSION 5-10 % | (salicylic acid-sulfacetamide) | Tier 3 | |
| APEXOL TOPICAL SUSPENSION 2-8 % | (salicylic acid-sulfacetamide) | Tier 3 | |
| APHORIA TOPICAL GEL 0.3-2.5-4 % | (adapalene-benzoyl perox-niacin) | Tier 3 | |
| APORIX TOPICAL GEL 1-4 % | (clindamycin-niacinamide) | Tier 3 | |
| APORIX TOPICAL LOTION 1-4 % | (clindamycin-niacinamide) | Tier 3 | |
| ARTILIS HP TOPICAL GEL 5-1-4 % | (benzoyl per-clindamycin-niacin) | Tier 3 | |
| ARTILIS TOPICAL GEL 2.5-1-4 % | (benzoyl per-clindamycin-niacin) | Tier 1 | |
| AUGUSTIL TOPICAL GEL 0.025-1-2-4 % | (tretinoin-clinda-spiron-niacin) | Tier 3 | |
| AVIDORA HP TOPICAL CREAM 0.05-1-4 % | | Tier 3 | |
| AVIDORA TOPICAL CREAM 0.025-1-4 % | (tretinoin-clindamycin-niacin) | Tier 3 | |
| AVIDORA TOPICAL SOLUTION 0.025-1-4 % | | Tier 3 | |
| AWANIS TOPICAL CREAM 0.025-8.5-2 % | | Tier 3 | |
| AZALTA HP TOPICAL GEL 0.05-5-2 % | (tretinoin-spironolact-niacin) | Tier 3 | |
| AZALTA TOPICAL GEL 0.025-5-2 % | (tretinoin-spironolact-niacin) | Tier 3 | |
| AZELEX TOPICAL CREAM 20 % | | Tier 3 | PA |
| CABTREO TOPICAL GEL 0.15-3.1-1.2 % | | Tier 3 | PA |
| *clindamycin-benzoyl peroxide topical gel 1.2 %(1 % base) -5 %* | (Neuac) | Tier 1 | |
| *clindamycin-benzoyl peroxide topical gel 1-5 %* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *clindamycin-benzoyl peroxide topical gel with pump 1.2 %(1 % base) -3.75 %* | (Onexton) | Tier 1 | ST: TRIAL OF ONE TOPICAL GENERIC CLINDAMYCIN, ERYTHROMYCIN, METRONIDAZOLE, BENZOYL PEROXIDE, SULFACETAMIDE AND COMBINATIONS, OR AZELAIC ACID GEL IN THE PAST 120 DAYS |
| *clindamycin-benzoyl peroxide topical gel with pump 1.2-2.5 %* | (Acanya) | Tier 1 | ST: TRIAL OF GENERIC CLINDAMYCIN/BENZOYL PEROXIDE GEL REQUIRED |
| *clindamycin-benzoyl peroxide topical gel with pump 1-5 %* | | Tier 1 | |
| *clindamycin-tretinoin topical gel 1.2-0.025 %* | (Veltin) | Tier 1 | ST: TRIAL OF ONE TOPICAL GENERIC CLINDAMYCIN, ERYTHROMYCIN, METRONIDAZOLE, BENZOYL PEROXIDE, SULFACETAMIDE AND COMBINATIONS, OR AZELAIC ACID GEL IN THE PAST 120 DAYS |
| *dapsone topical gel 5 %, 7.5 %* | | Tier 1 | |
| *dapsone topical gel with pump 7.5 %* | (Aczone) | Tier 1 | |
| DEOXIA TOPICAL GEL 1-4 % | (clindamycin-niacinamide) | Tier 3 | |
| DEOXIA TOPICAL LOTION 1-4 % | (clindamycin-niacinamide) | Tier 3 | |
| DEOXIADEMTAR TOPICAL GEL 0.025-1-2-4 % | (tretinoin-clinda-spiron-niacin) | Tier 3 | |
| DEOXIATAR TOPICAL SOLUTION 0.025-1-4 % | | Tier 3 | |
| DEOXIAVAR TOPICAL CREAM 0.05-1-4 % | | Tier 3 | |
| DIADIMAXIA TOPICAL CREAM 6-5-2 % | | Tier 3 | |
| DIADIMAXIA TOPICAL GEL 6-5-2 % | (dapsone-spironolactone-niacin) | Tier 3 | |
| DIAOXIA TOPICAL CREAM 6-4 % | | Tier 3 | |
| DIAOXIA TOPICAL GEL 6-4 % | (dapsone-niacinamide) | Tier 3 | |
| DIASAXIATAR TOPICAL CREAM 0.025-8.5-2 % | | Tier 3 | |
| DIASAXIATAR TOPICAL GEL 0.025-8.5-2 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| DIASDIMAXIA TOPICAL CREAM 8.5-5-2 % | | Tier 3 | |
| DIASDIMAXIA TOPICAL GEL 8.5-5-2 % | (dapsone-spironolactone-niacin) | Tier 3 | |
| DIASOXIA TOPICAL CREAM 8.5-4 % | | Tier 3 | |
| DIASOXIA TOPICAL GEL 8.5-4 % | (dapsone-niacinamide) | Tier 3 | |
| DIMOXIA TOPICAL GEL 5-4 % | (spironolactone-niacinamide) | Tier 3 | |
| DRAXACE TOPICAL SUSPENSION 2-8 % | (salicylic acid-sulfacetamide) | Tier 3 | |
| DRAXACEY TOPICAL SUSPENSION 2-8 % | (salicylic acid-sulfacetamide) | Tier 3 | |
| DRIXECE TOPICAL SUSPENSION 5-10 % | (salicylic acid-sulfacetamide) | Tier 3 | |
| IDYYXIATAR TOPICAL GEL 0.025-5 % | | Tier 3 | |
| INZDEAXIATAR TOPICAL GEL 0.025-2.5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| INZDEAXIAVAR TOPICAL GEL 0.05-2.5-1-2 % | | Tier 3 | |
| INZDEOXIA TOPICAL GEL 2.5-1-4 % | (benzoyl per-clindamycin-niacin) | Tier 3 | |
| LOUNZDOMDIOXIATAR TOPICAL GEL 0.05-10-2-4-4 % | | Tier 3 | |
| MELZARA TOPICAL CREAM 10-6-2 % | | Tier 3 | |
| NEUAC KIT TOPICAL COMBO PACK,CREAM AND GEL 1.2-5 % | | Tier 3 | |
| NEUAC TOPICAL GEL 1.2 %(1 % BASE) -5 % | (clindamycin-benzoyl peroxide) | Tier 1 | |
| ONZDEAXIADEMTAR TOPICAL GEL 0.025-5-1-2-2 % | | Tier 3 | |
| ONZDEAXIADEMVAR TOPICAL GEL 0.05-5-1-2-2 % | | Tier 3 | |
| ONZDEAXIATAR TOPICAL GEL 0.025-5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| ONZDEAXIAVAR TOPICAL GEL 0.05-5-1-2 % | (tretinoin-benzoyl-clinda-niac) | Tier 3 | |
| ONZDEAXIAZAR TOPICAL GEL 0.1-5-1-2 % | | Tier 3 | |
| ONZDEOXIA TOPICAL GEL 5-1-4 % | (benzoyl per-clindamycin-niacin) | Tier 3 | |
| OXIATAR TOPICAL CREAM 0.025-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| OXIAVARRY TOPICAL CREAM 0.05-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |
| OXIAVARY TOPICAL CREAM 0.1-4 % | | Tier 3 | |
| OXIAZAR TOPICAL CREAM 0.1-0.5-4 % | (tretinoin-hyaluronate-niacin) | Tier 3 | |
| RUMILO TOPICAL CREAM 15-4 % | (azelaic acid-niacinamide) | Tier 3 | |
| SAROXIA TOPICAL CREAM 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| SIRVANA TOPICAL GEL 0.025-5 % | | Tier 3 | |
| SORIXIA TOPICAL CREAM 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| *sulfacetamide sodium (acne) topical suspension 10 %* | (Klaron) | Tier 1 | |
| TARDEOXIA TOPICAL CREAM 0.025-1-4 % | (tretinoin-clindamycin-niacin) | Tier 3 | |
| TARDIMAXIA TOPICAL GEL 0.025-5-2 % | (tretinoin-spironolact-niacin) | Tier 3 | |
| TAROXIA TOPICAL CREAM 0.025-4 % | (tretinoin-niacinamide) | Tier 3 | |
| TAROXIA TOPICAL GEL 0.025-4 % | (tretinoin-niacinamide) | Tier 3 | |
| UNZDOMDIOXIAZAR TOPICAL GEL 0.1-10-2-4-4 % | | Tier 3 | |
| VARDIMAXIA TOPICAL GEL 0.05-5-2 % | (tretinoin-spironolact-niacin) | Tier 3 | |
| VAROXIA TOPICAL CREAM 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| VAROXIA TOPICAL GEL 0.05-4 % | (tretinoin-niacinamide) | Tier 3 | |
| **Keratolytic-Glucocorticoid Combinations** | | | |
| VANOXIDE-HC TOPICAL SUSPENSION 5-0.5 % | | Tier 2 | |
| **Rosacea Agents, Topical** | | | |
| AVEIDA TOPICAL GEL 1-1 % | | Tier 3 | |
| AVEIDAOXIA TOPICAL GEL 1-1-4 % | (ivermectin-metronidazol-niacin) | Tier 3 | |
| *azelaic acid topical gel 15 %* | | Tier 1 | |
| BAXONIL TOPICAL OINTMENT 1-2 % | | Tier 3 | |
| *brimonidine topical gel with pump 0.33 %* | | Tier 1 | |
| DAZAVEIDAOXIA TOPICAL GEL 0.25-1-1-4 % | | Tier 3 | |
| DAZOMON TOPICAL GEL 0.25 % | | Tier 3 | |
| FINACEA TOPICAL FOAM 15 % | | Tier 2 | |
| IDARAN TOPICAL OINTMENT 1-2 % | | Tier 3 | |
| *ivermectin topical cream 1 %* | (Soolantra) | Tier 1 | ST: TRIAL OF FINACEA GEL OR FOAM REQUIRED |

| Drug | | Status | Notes |
|---|---|---|---|
| *metronidazole topical cream 0.75 %* | (Rosadan) | Tier 1 | |
| *metronidazole topical gel 0.75 %* | (Rosadan) | Tier 1 | |
| *metronidazole topical gel 1 %* | | Tier 1 | |
| *metronidazole topical gel with pump 1 %* | | Tier 1 | |
| *metronidazole topical lotion 0.75 %* | | Tier 1 | |
| REMYDA TOPICAL GEL 0.25 % | | Tier 3 | |
| RENSOTI TOPICAL CREAM 1-1-4 % | | Tier 3 | |
| RESTIMO TOPICAL GEL 1-1 % | | Tier 3 | |
| ROCELIX TOPICAL CREAM 1-4 % | | Tier 3 | |
| ROSADAN TOPICAL CREAM 0.75 % | (metronidazole) | Tier 1 | |
| ROSITARA TOPICAL GEL 1-1-4 % | (ivermectin-metronidazol-niacin) | Tier 3 | |
| ROVIS TOPICAL GEL 0.25-1-1-4 % | | Tier 3 | |
| **Topical Antiandrogenic Agents** | | | |
| WINLEVI TOPICAL CREAM 1 % | | Tier 3 | PA; QL (60 GM per 30 days) |
| **Topical Preparations,Antibacterials** | | | |
| BASADROX TOPICAL GEL IN PACKET | | Tier 3 | |
| DERMAZENE TOPICAL CREAM IN PACKET 1-1 % | | Tier 3 | |
| *hydrocortisone-iodoquinol topical cream 1-1 %* | (Corti-Sav) | Tier 1 | |
| *hydrocortisone-iodoquinol-aloe topical cream in packet 1.9-1 %* | (Vytone) | Tier 1 | |
| IODOFLEX TOPICAL PADS, MEDICATED 0.9 % | | Tier 3 | |
| IODOSORB TOPICAL GEL 0.9 % | | Tier 3 | |
| LUGOLS TOPICAL SOLUTION 5-10 % | (iodine-potassium iodide) | Tier 1 | |
| NORMLGEL AG TOPICAL GEL 0.11 % | | Tier 3 | |
| *silver nitrate topical solution 0.5 %, 25 %, 50 %* | | Tier 1 | |
| STRONG IODINE TOPICAL SOLUTION 5-10 % | (iodine-potassium iodide) | Tier 1 | |
| **Vitamin A Derivatives** | | | |
| *adapalene topical cream 0.1 %* | | Tier 1 | |
| *adapalene topical gel 0.3 %* | | Tier 1 | |
| *adapalene topical gel with pump 0.3 %* | | Tier 1 | |
| *adapalene topical lotion 0.1 %* | | Tier 1 | Age (Max 39 Years) |
| ALTRENO TOPICAL LOTION 0.05 % | | Tier 3 | Age (Max 39 Years) |
| *tretinoin microspheres topical gel 0.04 %, 0.1 %* | | Tier 1 | Age (Max 39 Years) |

| Drug | | Status | Notes |
|---|---|---|---|
| *tretinoin microspheres topical gel with pump 0.04 %, 0.1 %* | | Tier 1 | Age (Max 39 Years) |
| *tretinoin microspheres topical gel with pump 0.08 %* | (Retin-A Micro Pump) | Tier 1 | ST: TRIAL OF GENERIC TRETINOIN MICROSPHERES 0.04% AND 0.10% REQUIRED; Age (Max 39 Years) |
| *tretinoin topical cream 0.025 %, 0.05 %, 0.1 %* | (Retin-A) | Tier 1 | |
| *tretinoin topical gel 0.01 %, 0.025 %* | (Retin-A) | Tier 1 | |
| *tretinoin topical gel 0.05 %* | (Atralin) | Tier 1 | |
| **Vitamin A Derivatives, Topical Acne Agents** | | | |
| ALVOX HP TOPICAL CREAM 0.1-4 % | (tazarotene-niacinamide) | Tier 3 | |
| ALVOX TOPICAL CREAM 0.05-4 % | (tazarotene-niacinamide) | Tier 3 | |
| ETHOXIA TOPICAL CREAM 0.05-4 % | (tazarotene-niacinamide) | Tier 3 | |
| ITHOXIA TOPICAL CREAM 0.1-4 % | (tazarotene-niacinamide) | Tier 3 | |
| **Dermatology - Antiinfective** | | | |
| **Topical Antibiotics** | | | |
| AMZEEQ TOPICAL FOAM 4 % | | Tier 3 | ST: TRIAL OF ONE TOPICAL GENERIC CLINDAMYCIN, ERYTHROMYCIN, METRONIDAZOLE, BENZOYL PEROXIDE, SULFACETAMIDE AND COMBINATIONS, OR AZELAIC ACID GEL IN THE PAST 120 DAYS; Age (Min 9 Years) |
| BATIZIA TOPICAL OINTMENT 2-2 % | (mupirocin-lidocaine) | Tier 3 | |
| CENTANY AT TOPICAL OINTMENT KIT 2 % | | Tier 3 | |
| *clindamycin phosphate topical foam 1 %* | (Clindacin) | Tier 1 | |
| *clindamycin phosphate topical gel 1 %* | | Tier 1 | |
| *clindamycin phosphate topical gel, once daily 1 %* | (Clindagel) | Tier 1 | |
| *clindamycin phosphate topical lotion 1 %* | (Cleocin T) | Tier 1 | |
| *clindamycin phosphate topical solution 1 %* | | Tier 1 | QL (180 ML per 1 FILL) |
| *clindamycin phosphate topical swab 1 %* | (Clindacin ETZ) | Tier 1 | |
| ERY PADS TOPICAL SWAB 2 % | (erythromycin with ethanol) | Tier 1 | |
| *erythromycin with ethanol topical gel 2 %* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *erythromycin with ethanol topical solution 2 %* | | Tier 1 | QL (180 ML per 1 FILL) |
| *erythromycin-benzoyl peroxide topical gel 3-5 %* | (Benzamycin) | Tier 1 | |
| *gentamicin topical cream 0.1 %* | | Tier 1 | QL (90 GM per 1 FILL) |
| *gentamicin topical ointment 0.1 %* | | Tier 1 | QL (90 GM per 1 FILL) |
| *mupirocin calcium topical cream 2 %* | | Tier 1 | QL (90 GM per 1 FILL) |
| *mupirocin topical ointment 2 %* | (Centany) | Tier 1 | QL (90 GM per 1 FILL) |
| NANRAN TOPICAL OINTMENT 2-2 % | (mupirocin-lidocaine) | Tier 3 | |
| XEPI TOPICAL CREAM 1 % | | Tier 3 | ST: TRIAL OF MUPIROCIN OINTMENT REQUIRED IN PREVIOUS 120 DAYS |
| **Topical Antifungal/Antiinflammatory,Steriod Agent** | | | |
| *clotrimazole-betamethasone topical cream 1-0.05 %* | | Tier 1 | |
| *clotrimazole-betamethasone topical lotion 1-0.05 %* | | Tier 1 | |
| DELIBON TOPICAL CREAM 2-2.5 % | (ketoconazole-hydrocortisone) | Tier 3 | |
| DIONARIS TOPICAL SHAMPOO 0.77-0.05-3 % | (ciclopirox-clobetasol-salicyl) | Tier 3 | |
| DIVENDO TOPICAL SHAMPOO 0.77-0.05 % | (ciclopirox-clobetasol) | Tier 3 | |
| DIYRA TOPICAL SHAMPOO 0.77-0.05-0.2 % | | Tier 3 | |
| DOREVI TOPICAL SHAMPOO 0.77-0.05-3-0.2 % | | Tier 3 | |
| HAXCHLO TOPICAL SHAMPOO 0.77-0.05 % | (ciclopirox-clobetasol) | Tier 3 | |
| HAXCHLODREX TOPICAL SHAMPOO 0.77-0.05-3 % | (ciclopirox-clobetasol-salicyl) | Tier 3 | |
| PHEYO TOPICAL CREAM 2-2.5 % | (ketoconazole-hydrocortisone) | Tier 3 | |
| **Topical Antifungal-Antibiotic-Anti-Inflamm Steroid** | | | |
| DAZINIA TOPICAL CREAM 2-1-2.5 % | (ketoconazole-iodoquinol-hc) | Tier 3 | |
| PHEODOYO TOPICAL CREAM 2-1-2.5 % | (ketoconazole-iodoquinol-hc) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Topical Antifungals** | | | |
| CICLODAN KIT TOPICAL COMBO PACK 0.77 % | | Tier 3 | |
| *ciclopirox topical cream 0.77 %* | (Ciclodan) | Tier 1 | QL (180 GM per 1 FILL) |
| *ciclopirox topical gel 0.77 %* | | Tier 1 | |
| *ciclopirox topical shampoo 1 %* | | Tier 1 | |
| *ciclopirox topical solution 8 %* | (Ciclodan) | Tier 1 | QL (19.8 ML per 1 FILL) |
| *ciclopirox topical suspension 0.77 %* | (Loprox (as olamine)) | Tier 1 | QL (180 ML per 1 FILL) |
| *ciclopirox-ure-camph-menth-euc topical solution 8 %* | (Ciclodan Kit) | Tier 1 | QL (19.8 ML per 1 FILL) |
| *clotrimazole topical cream 1 %* | (Antifungal (clotrimazole)) | Tier 1 | |
| *clotrimazole topical solution 1 %* | (Athlete's Foot (clotrimazole)) | Tier 1 | |
| DAFILOR TOPICAL SHAMPOO 0.77-2 % | (ciclopirox-salicylic acid) | Tier 3 | |
| DENVITA TOPICAL CREAM 2-4 % | (ketoconazole-niacinamide) | Tier 3 | |
| DIFMETIOXRIME TOPICAL SOLUTION 4-2-1-4 % | (flucona-ibuprof-itracon-terbin) | Tier 3 | |
| *econazole nitrate topical cream 1 %* | | Tier 1 | QL (170 GM per 1 FILL) |
| EXELDERM TOPICAL CREAM 1 % | (sulconazole) | Tier 2 | |
| EXELDERM TOPICAL SOLUTION 1 % | (sulconazole) | Tier 2 | |
| EXODERM TOPICAL LOTION 25-1 % | | Tier 1 | |
| FENOVIA TOPICAL SOLUTION 4-2-1-4 % | (flucona-ibuprof-itracon-terbin) | Tier 3 | |
| FERVINA TOPICAL LOTION 3-5-20 % | | Tier 3 | |
| FIDILA TOPICAL SHAMPOO 2-2 % | | Tier 3 | |
| FILOMA TOPICAL SOLUTION 8-1-1 % | | Tier 3 | |
| FRIVO TOPICAL CREAM 1-4 % | (econazole-niacinamide) | Tier 3 | |
| HAXDRAX TOPICAL SHAMPOO 0.77-2 % | (ciclopirox-salicylic acid) | Tier 3 | |
| HEXIOUNYL TOPICAL LOTION 3-5-20 % | | Tier 3 | |
| HIXDEFRIMA TOPICAL SOLUTION 8-1-1 % | | Tier 3 | |
| IMIOXIA TOPICAL CREAM 1-4 % | (econazole-niacinamide) | Tier 3 | |
| *ketoconazole topical cream 2 %* | | Tier 1 | QL (180 GM per 1 FILL) |
| *ketoconazole topical shampoo 2 %* | | Tier 1 | QL (360 ML per 1 FILL) |
| KETODAN KIT TOPICAL COMBO PACK 2 % | | Tier 3 | |
| KLAYESTA TOPICAL POWDER 100,000 UNIT/GRAM | (nystatin) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *luliconazole topical cream 1 %* | (Luzu) | Tier 1 | ST: TRIAL OF KETOCONAZOLE AND CLOTRIMAZOLE CREAM REQUIRED.; QL (60 GM per 28 days) |
| *miconazole nitrate-zinc ox-pet topical ointment 0.25-15-81.35 %* | (Vusion) | Tier 1 | |
| *naftifine topical cream 1 %* | | Tier 1 | |
| *naftifine topical cream 2 %* | | Tier 1 | QL (180 GM per 1 FILL) |
| *naftifine topical gel 2 %* | (Naftin) | Tier 1 | |
| NYAMYC TOPICAL POWDER 100,000 UNIT/GRAM | (nystatin) | Tier 1 | |
| *nystatin topical cream 100,000 unit/gram* | | Tier 1 | |
| *nystatin topical ointment 100,000 unit/gram* | | Tier 1 | QL (90 GM per 1 FILL) |
| *nystatin topical powder 100,000 unit/gram* | (Klayesta) | Tier 1 | |
| *nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%* | | Tier 1 | |
| *nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%* | | Tier 1 | QL (180 GM per 1 FILL) |
| NYSTOP TOPICAL POWDER 100,000 UNIT/GRAM | (nystatin) | Tier 1 | |
| *oxiconazole topical cream 1 %* | | Tier 1 | QL (180 GM per 1 FILL) |
| OXISTAT TOPICAL LOTION 1 % | | Tier 3 | |
| PHEDRAX TOPICAL SHAMPOO 2-2 % | | Tier 3 | |
| PHEOXIA TOPICAL CREAM 2-4 % | (ketoconazole-niacinamide) | Tier 3 | |
| *sulconazole topical cream 1 %* | (Exelderm) | Tier 1 | |
| *sulconazole topical solution 1 %* | (Exelderm) | Tier 1 | |
| *tavaborole topical solution with applicator 5 %* | | Tier 1 | PA |
| **Topical Antiparasitics** | | | |
| *malathion topical lotion 0.5 %* | (Ovide) | Tier 1 | |
| *permethrin topical cream 5 %* | | Tier 1 | |
| *spinosad topical suspension 0.9 %* | (Natroba) | Tier 1 | |
| ULESFIA TOPICAL LOTION 5 % | | Tier 3 | |
| **Topical Antivirals** | | | |
| *acyclovir topical ointment 5 %* | (Zovirax) | Tier 1 | |
| **Topical Sulfonamides** | | | |
| ABENOR HP TOPICAL LOTION 15-4 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| ABENOR TOPICAL CREAM 10-4 % | (sulfacetamide-niacinamide) | Tier 3 | |
| CLEANSING WASH TOPICAL CLEANSER 10-4-10 % | (sulfacetamide sod-sulfur-urea) | Tier 1 | |
| ECEOXIA TOPICAL CREAM 10-4 % | (sulfacetamide-niacinamide) | Tier 3 | |
| OXIAICE TOPICAL LOTION 15-4 % | | Tier 3 | |
| *silver sulfadiazine topical cream 1 %* | (SSD) | Tier 1 | |
| SSD TOPICAL CREAM 1 % | (silver sulfadiazine) | Tier 1 | |
| SSS 10-5 TOPICAL CREAM 10-5 % (W/W) | (sulfacetamide sodium-sulfur) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 10-2 %* | (Avar LS) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)* | (Avar) | Tier 1 | QL (1419 GM per 1 FILL) |
| *sulfacetamide sodium-sulfur topical cleanser 8-4 %* | | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 9.8-4.8 %* | (Plexion) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 9-4 %* | (Sumaxin) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cleanser 9-4.5 %* | (Sumadan) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical cream 10-5 % (w/w)* | (SSS 10-5) | Tier 1 | |
| *sulfacetamide sodium-sulfur topical suspension 8-4 %* | (SulfaCleanse 8-4) | Tier 1 | |
| *sulfacetamide sod-sulfur-urea topical cleanser 10-5-10 %* | | Tier 1 | QL (1419 ML per 1 FILL) |
| SULFACLEANSE 8-4 TOPICAL SUSPENSION 8-4 % | (sulfacetamide sodium-sulfur) | Tier 1 | |
| SULFAMYLON TOPICAL CREAM 85 MG/G | | Tier 3 | |
| SUMADAN XLT TOPICAL COMBO PACK,CLEANSER AND CREAM 9 %-4.5 % -SPF 25 | (sulfact na-sul-avobnz-otn-ocsa) | Tier 3 | |
| **Dermatology - Antiinflammatory** | | | |
| **Interleukin-13 (Il-13) Inhibitors, Mab** | | | |
| ADBRY SUBCUTANEOUS AUTO-INJECTOR 300 MG/2 ML | | Tier 5 | PA; SP |
| ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML | | Tier 5 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| EBGLYSS PEN SUBCUTANEOUS PEN INJECTOR 250 MG/2 ML | Tier 5 | PA; SP |
| EBGLYSS SYRINGE SUBCUTANEOUS SYRINGE 250 MG/2 ML | Tier 5 | PA; SP |
| **Interleukin-31(Il-31)Receptor Alpha Antagonist,Mab** | | |
| NEMLUVIO SUBCUTANEOUS PEN INJECTOR 30 MG | Tier 5 | PA; SP |
| **Top. Anti-Inflam.,Phosphodiesterase-4 (Pde4) Inhib** | | |
| EUCRISA TOPICAL OINTMENT 2 % | Tier 2 | PA; QL (100 GM per 30 days) |
| ZORYVE TOPICAL CREAM 0.05 %, 0.15 % | Tier 2 | PA; QL (60 GM per 30 days) |
| ZORYVE TOPICAL FOAM 0.3 % | Tier 2 | PA; QL (60 GM per 30 days) |
| **Topical Anti-Inflammatory Steroidal** | | |
| ACIOXIA TOPICAL GEL 0.1-0.5 % | Tier 3 | |
| ALA-CORT TOPICAL CREAM 1 % (hydrocortisone) | Tier 1 | |
| ALA-SCALP TOPICAL LOTION 2 % (hydrocortisone) | Tier 1 | ST: TRIAL OF GENERIC HYDROCORTISONE 2.5% LOTION IN THE PAST 120 DAYS |
| *alclometasone topical cream 0.05 %* | Tier 1 | |
| *alclometasone topical ointment 0.05 %* | Tier 1 | |
| *amcinonide topical cream 0.1 %* | Tier 1 | ST: TRIAL OF BETAMETHASONE 0.1% OINT, FLUTICASONE 0.005% OINT, TRIAMCINOLONE 0.5% (OINT, CREAM), OR MOMETASONE 0.1% OINT IN THE PAST 120 DAYS. |
| *betamethasone dipropionate topical cream 0.05 %* | Tier 1 | |
| *betamethasone dipropionate topical lotion 0.05 %* | Tier 1 | |
| *betamethasone dipropionate topical ointment 0.05 %* | Tier 1 | |
| *betamethasone valerate topical cream 0.1 %* | Tier 1 | |
| *betamethasone valerate topical foam 0.12 %* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *betamethasone valerate topical lotion 0.1 %* | | Tier 1 | |
| *betamethasone valerate topical ointment 0.1 %* | | Tier 1 | |
| *betamethasone, augmented topical cream 0.05 %* | | Tier 1 | |
| *betamethasone, augmented topical gel 0.05 %* | | Tier 1 | |
| *betamethasone, augmented topical lotion 0.05 %* | | Tier 1 | |
| *betamethasone, augmented topical ointment 0.05 %* | (Diprolene (augmented)) | Tier 1 | |
| CAPEX TOPICAL SHAMPOO 0.01 % | | Tier 3 | |
| CHLOHUX TOPICAL SHAMPOO 0.05-2 % | (clobetasol-levocetirizine) | Tier 3 | |
| CHLOOXIA TOPICAL CREAM 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |
| CHLOOXIA TOPICAL OINTMENT 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |
| CHLOOXIA TOPICAL SOLUTION 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |
| *clobetasol scalp solution 0.05 %* | | Tier 1 | |
| *clobetasol topical cream 0.05 %* | | Tier 1 | |
| *clobetasol topical foam 0.05 %* | | Tier 1 | |
| *clobetasol topical gel 0.05 %* | | Tier 1 | |
| *clobetasol topical lotion 0.05 %* | | Tier 1 | |
| *clobetasol topical ointment 0.05 %* | | Tier 1 | |
| *clobetasol topical shampoo 0.05 %* | (Clodan) | Tier 1 | |
| *clobetasol topical spray,non-aerosol 0.05 %* | | Tier 1 | |
| *clobetasol-emollient topical cream 0.05 %* | | Tier 1 | |
| *clobetasol-emollient topical foam 0.05 %* | (Tovet Emollient) | Tier 1 | |
| *clocortolone pivalate topical cream 0.1 %* | | Tier 1 | ST: TRIAL OF MOMETASONE 0.1% CREAM/SOLN OR TRIAMCINOLONE 0.1 % CREAM/OINT IN THE PAST 120 DAYS |
| CLODAN KIT TOPICAL KIT,SHAMPOO AND CLEANSER 0.05 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| CORDRAN TAPE LARGE ROLL TOPICAL TAPE 4 MCG/CM2 | | Tier 3 | ST: TRIAL OF 1 OF THE FOLLOWING: BETAMETHASONE AUGMENTED (OINT, GEL, LOTION), FLUOCINONIDE 0.1% CREAM, CLOBETASOL (SPRAY, LOTION, GEL, OINT, CRM, SOLN), OR HALOBETASOL 0.05% (CREAM, OINT) IN PAST 120 DAS; QL (2 EA per 30 days) |
| *desonide topical cream 0.05 %* | | Tier 1 | |
| *desonide topical gel 0.05 %* | | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS |
| *desonide topical lotion 0.05 %* | | Tier 1 | |
| *desonide topical ointment 0.05 %* | | Tier 1 | |
| *desoximetasone topical cream 0.05 %, 0.25 %* | (Topicort) | Tier 1 | |
| *desoximetasone topical gel 0.05 %* | (Topicort) | Tier 1 | |
| *desoximetasone topical ointment 0.05 %, 0.25 %* | (Topicort) | Tier 1 | |
| *desoximetasone topical spray,non-aerosol 0.25 %* | (Topicort) | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: BETAMETHASONE AUGMENTED 0.05% (CRM, GEL, LTN, OINT), DESOXIMETASONE (CRM,GEL,OINT), FLUOCINONIDE (CRM,GEL), CLOBETASOL (EXCEPT FOAM/SHAMPOO), OR HALOBETASOL (CRM,OINT) |
| DIVINIX TOPICAL CREAM 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| DIVINIX TOPICAL OINTMENT 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |
| DIVINIX TOPICAL SOLUTION 0.05-4 % | (clobetasol-niacinamide) | Tier 3 | |
| DOMELA TOPICAL CREAM 0.01-4 % | (fluocinolone-niacinamide) | Tier 3 | |
| DYNOMA TOPICAL CREAM 0.05-4 % | | Tier 3 | |
| EVESSE TOPICAL LOTION 0.1 % | (hydrocortisone butyrate) | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS; QL (236 ML per 30 days) |
| *fluocinolone and shower cap scalp oil 0.01 %* | (Derma-Smoothe/FS Scalp Oil) | Tier 1 | |
| *fluocinolone topical cream 0.01 %* | | Tier 1 | |
| *fluocinolone topical cream 0.025 %* | (Synalar) | Tier 1 | |
| *fluocinolone topical oil 0.01 %* | (Derma-Smoothe/FS Body Oil) | Tier 1 | |
| *fluocinolone topical ointment 0.025 %* | (Synalar) | Tier 1 | |
| *fluocinolone topical solution 0.01 %* | (Synalar) | Tier 1 | |
| *fluocinonide topical cream 0.05 %* | | Tier 1 | |
| *fluocinonide topical cream 0.1 %* | (Vanos) | Tier 1 | |
| *fluocinonide topical gel 0.05 %* | | Tier 1 | |
| *fluocinonide topical ointment 0.05 %* | | Tier 1 | |
| *fluocinonide topical solution 0.05 %* | | Tier 1 | |
| FLUOCINONIDE-E TOPICAL CREAM 0.05 % | (fluocinonide-emollient) | Tier 1 | |
| *fluocinonide-emollient topical cream 0.05 %* | (Fluocinonide-E) | Tier 1 | |
| FLUOXIA TOPICAL CREAM 0.05-4 % | | Tier 3 | |

| Drug | Status | Notes |
|---|---|---|
| *flurandrenolide topical cream 0.05 %* | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS |
| *flurandrenolide topical lotion 0.05 %* | Tier 1 | |
| *flurandrenolide topical ointment 0.05 %* | Tier 1 | ST: TRIAL OF MOMETASONE 0.1% CREAM/SOLN OR TRIAMCINOLONE 0.1 % CREAM/OINT IN THE PAST 120 DAYS; QL (180 GM per 30 days) |
| *fluticasone propionate topical cream 0.05 %* | Tier 1 | |
| *fluticasone propionate topical lotion 0.05 %* (Beser) | Tier 1 | |
| *fluticasone propionate topical ointment 0.005 %* | Tier 1 | |
| *halcinonide topical cream 0.1 %* (Halog) | Tier 1 | ST: TRIAL OF ONE OF THE FOLLOWING: BETAMETHASONE 0.05% OINTMENT OR AUGMENTED CREAM, FLUOCINONIDE 0.05% (GEL, OINT, SOLUTION, CREAM), OR DESOXIMETASONE (CREAM, GEL, OINT) IN THE PREVIOUS 120 DAYS. |

| Drug | | Status | Notes |
|---|---|---|---|
| *halcinonide topical solution 0.1 %* | (Halog) | Tier 1 | ST: TRIAL OF ONE OF THE FOLLOWING: BETAMETHASONE 0.05% OINTMENT OR AUGMENTED CREAM, FLUOCINONIDE 0.05% (GEL, OINT, SOLUTION, CREAM), OR DESOXIMETASONE (CREAM, GEL, OINT) IN THE PREVIOUS 120 DAYS. |
| *halobetasol propionate topical cream 0.05 %* | | Tier 1 | |
| *halobetasol propionate topical ointment 0.05 %* | | Tier 1 | |
| HALOG TOPICAL SOLUTION 0.1 % | (halcinonide) | Tier 3 | ST: TRIAL OF ONE OF THE FOLLOWING: BETAMETHASONE 0.05% OINTMENT OR AUGMENTED CREAM, FLUOCINONIDE 0.05% (GEL, OINT, SOLUTION, CREAM), OR DESOXIMETASONE (CREAM, GEL, OINT) IN THE PREVIOUS 120 DAYS. |
| *hydrocortisone butyrate topical cream 0.1 %* | | Tier 1 | |
| *hydrocortisone butyrate topical lotion 0.1 %* | (Evesse) | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS; QL (236 ML per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *hydrocortisone butyrate topical ointment 0.1 %* | | Tier 1 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS |
| *hydrocortisone butyrate topical solution 0.1 %* | | Tier 1 | |
| *hydrocortisone topical cream 1 %* | (Ala-Cort) | Tier 1 | |
| *hydrocortisone topical cream 2.5 %* | | Tier 1 | |
| *hydrocortisone topical cream with perineal applicator 1 %* | | Tier 1 | |
| *hydrocortisone topical cream with perineal applicator 2.5 %* | (Procto-Med HC) | Tier 1 | |
| *hydrocortisone topical lotion 2 %* | (Ala-Scalp) | Tier 1 | ST: TRIAL OF GENERIC HYDROCORTISONE 2.5% LOTION IN THE PAST 120 DAYS |
| *hydrocortisone topical lotion 2.5 %* | | Tier 1 | |
| *hydrocortisone topical ointment 1 %* | (Anti-Itch (HC)) | Tier 1 | |
| *hydrocortisone topical ointment 2.5 %* | | Tier 1 | |
| *hydrocortisone topical solution 2.5 %* | (Texacort) | Tier 1 | ST: TRIAL OF GENERIC HYDROCORTISONE 2.5% LOTION IN THE PAST 120 DAYS |
| *hydrocortisone valerate topical cream 0.2 %* | | Tier 1 | |
| *hydrocortisone valerate topical ointment 0.2 %* | | Tier 1 | ST: TRIAL OF MOMETASONE 0.1% CREAM/SOLN OR TRIAMCINOLONE 0.1 % CREAM/OINT IN THE PAST 120 DAYS |
| ILEXOR TOPICAL SHAMPOO 0.05-2 % | (clobetasol-levocetirizine) | Tier 3 | |
| *mometasone topical cream 0.1 %* | | Tier 1 | |
| *mometasone topical ointment 0.1 %* | | Tier 1 | |
| *mometasone topical solution 0.1 %* | | Tier 1 | |
| NUCORT TOPICAL LOTION 2 % | (hydrocortisone acet-aloe vera) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| PANDEL TOPICAL CREAM 0.1 % | | Tier 3 | ST: TRIAL OF 1 OF THE FOLLOWING: FLUTICASONE 0.05% CRM, TRIAMCINOLONE (0.1% LTN, 0.025% OINT), DESONIDE 0.05% OINT, HYDROCORTISONE 0.2% CRM, OR BETAMETHASONE (0.05% LTN, 0.1% CRM) IN THE PAST 120 DAYS; QL (160 GM per 30 days) |
| *prednicarbate topical cream 0.1 %* | | Tier 1 | |
| PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 % | (hydrocortisone) | Tier 1 | |
| PROCTOSOL HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 % | (hydrocortisone) | Tier 1 | |
| PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 % | (hydrocortisone) | Tier 1 | |
| SCALACORT DK TOPICAL COMBO PACK 2-2-2 % | | Tier 2 | |
| SERNIVO TOPICAL SPRAY WITH PUMP 0.05 % | | Tier 3 | ST: TRIAL OF MOMETASONE 0.1% CREAM/SOLN OR TRIAMCINOLONE 0.1 % CREAM/OINT IN THE PAST 120 DAYS |
| SYNALAR CREAM KIT TOPICAL CREAM 0.025 % | | Tier 3 | QL (375 GM per 30 days) |
| SYNALAR OINTMENT KIT TOPICAL COMBO PACK,OINTMENT AND CREAM 0.025 % | | Tier 3 | QL (375 GM per 30 days) |
| SYNALAR TS TOPICAL KIT 0.01 % | | Tier 3 | |
| TELIORA TOPICAL GEL 0.1-0.5 % | | Tier 3 | |
| TETOXIA TOPICAL CREAM 0.01-4 % | (fluocinolone-niacinamide) | Tier 3 | |
| *triamcinolone acetonide topical aerosol 0.147 mg/gram* | (Kenalog) | Tier 1 | |
| *triamcinolone acetonide topical cream 0.025 %, 0.1 %* | | Tier 1 | |
| *triamcinolone acetonide topical cream 0.5 %* | (Triderm) | Tier 1 | QL (454 GM per 30 days) |
| *triamcinolone acetonide topical lotion 0.025 %, 0.1 %* | | Tier 1 | |
| *triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| TRIDERM TOPICAL CREAM 0.5 % | (triamcinolone acetonide) | Tier 1 | QL (454 GM per 30 days) |
| **Topical Anti-Inflammatory, Nsaids** | | | |
| *diclofenac epolamine transdermal patch 12 hour 1.3 %* | (Flector) | Tier 1 | |
| *diclofenac sodium topical drops 1.5 %* | | Tier 1 | QL (300 ML per 28 days) |
| *diclofenac sodium topical gel 1 %* | (Arthritis Pain (diclofenac)) | Tier 1 | QL (900 GM per 28 days) |
| *diclofenac sodium topical solution in metered-dose pump 20 mg/gram /actuation(2 %)* | | Tier 1 | ST: TRIAL OF DICLOFENAC 1% GEL OR DICLOFENAC 1.5% DROPS IN THE PAST 120 DAYS; QL (224 GM per 28 days) |
| KERAXA TOPICAL GEL 3-2-4 % | (diclofenac-hyaluronate-niacin) | Tier 3 | |
| ROAOXIA TOPICAL GEL 3-2-4 % | (diclofenac-hyaluronate-niacin) | Tier 3 | |
| **Topical Janus Kinase (Jak) Inhibitors** | | | |
| OPZELURA TOPICAL CREAM 1.5 % | | Tier 2 | PA; QL (60 GM per 30 days) |
| **Dermatology - Miscellaneous** | | | |
| **Antiperspirants** | | | |
| DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 % | (aluminum chloride) | Tier 3 | |
| DRYSOL TOPICAL SOLUTION 20 % | (aluminum chloride) | Tier 3 | |
| **Antiseborrheic Agents** | | | |
| PLEXION NS TOPICAL SHAMPOO 9.8 % | (sulfacetamide sodium) | Tier 3 | |
| *selenium sulfide topical lotion 2.5 %* | | Tier 1 | |
| *selenium sulfide topical shampoo 2.25 %, 2.3 %* | | Tier 1 | |
| *sulfacetamide sodium topical cleanser 10 %* | | Tier 1 | |
| *sulfacetamide sodium topical cleanser, gel 10 %* | | Tier 1 | |
| *sulfacetamide sodium topical shampoo 10 %* | | Tier 1 | |
| *sulfacetamide sodium topical shampoo 9.8 %* | (Plexion NS) | Tier 1 | |
| **Antiseptics,Miscellaneous** | | | |
| *guaiacol liquid* | | Tier 3 | |
| **Emollients** | | | |
| *ammonium lactate topical cream 12 %* | | Tier 1 | |
| *ammonium lactate topical lotion 12 %* | (AmLactin) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| KERASTAT TOPICAL GEL 5 % | | Tier 3 | |
| MB HYDROGEL TOPICAL KIT,CREAM AND GEL 96.53-3-0.4 -0.066 % | | Tier 1 | |
| NEW DAY SKIN SPRAY TOPICAL EMULSION | | Tier 3 | |
| XCLAIR TOPICAL CREAM | | Tier 3 | |
| **Iodine Antiseptics** | | | |
| BETADINE OPHTHALMIC PREP OPHTHALMIC (EYE) SOLUTION 5 % | (povidone-iodine) | Tier 3 | |
| *povidone-iodine ophthalmic (eye) solution 5 %* | (Betadine Ophthalmic Prep) | Tier 1 | |
| **Irrigants** | | | |
| *acetic acid irrigation solution 0.25 %* | | Tier 1 | |
| *lactated ringers irrigation solution* | | Tier 3 | |
| *neomycin-polymyxin b gu irrigation solution 40 mg-200,000 unit/ml* | | Tier 1 | |
| *ringer's irrigation solution* | | Tier 1 | |
| *sodium chloride irrigation solution 0.9 %* | (Sterile Saline) | Tier 1 | |
| *sorbitol irrigation solution 3 %* | | Tier 1 | |
| *sorbitol-mannitol transurethral solution 2.7-0.54 gram/100 ml* | | Tier 1 | |
| VASHE IRRIGATION IRRIGATION SOLUTION 0.033 % | | Tier 3 | |
| *water for irrigation, sterile irrigation solution* | (Curity Sterile Water) | Tier 1 | |
| **Irritants/Counter-Irritants** | | | |
| *methyl salicylate oil* | (Wintergreen Oil) | Tier 1 | |
| *methyl salicylate topical liquid* | | Tier 1 | |
| WINTERGREEN OIL OIL | (methyl salicylate) | Tier 1 | |
| **Keratolytics** | | | |
| *benzoyl peroxide topical foam 9.8 %* | (BenzePrO) | Tier 1 | |
| BPO TOPICAL GEL 8 % | (benzoyl peroxide) | Tier 1 | |
| CEM-UREA TOPICAL GEL 45 % | (urea) | Tier 1 | |
| METDRAY TOPICAL GEL 17-2 % | | Tier 3 | |
| NENDRUX TOPICAL GEL 40-5 % | | Tier 3 | |
| PACNEX HP TOPICAL PADS, MEDICATED 7 % | | Tier 3 | |
| PACNEX LP TOPICAL PADS, MEDICATED 4.25 % | | Tier 3 | |
| PODOCON TOPICAL LIQUID 25 % | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *podofilox topical gel 0.5 %* | (Condylox) | Tier 1 | ST: TRIAL OF 0.5% PODOFILOX SOLUTION REQUIRED; QL (0.5 GM per 1 day) |
| *podofilox topical solution 0.5 %* | | Tier 1 | QL (0.5 ML per 1 day) |
| PR BENZOYL PEROXIDE TOPICAL CLEANSER 7 % | | Tier 1 | |
| PRONAL TOPICAL GEL 10-40 % | | Tier 3 | |
| *salicylic acid topical cream 6 %* | (Salimez) | Tier 1 | |
| *salicylic acid topical cream,extended release 6 %* | | Tier 1 | |
| *salicylic acid topical film forming liquid w/appl 27.5 %* | (Virasal) | Tier 1 | |
| *salicylic acid topical film-forming soln er w/ appl 28.5 %* | (UltraSal-ER) | Tier 1 | |
| *salicylic acid topical foam 6 %* | | Tier 1 | |
| *salicylic acid topical liquid 26 %* | | Tier 1 | |
| *salicylic acid topical lotion 6 %* | | Tier 1 | |
| *salicylic acid topical lotion,extended release 6 %* | | Tier 1 | |
| *salicylic acid topical ointment 3 %* | | Tier 1 | |
| *salicylic acid topical shampoo 6 %* | (Keralyt) | Tier 1 | |
| SALIMEZ FORTE TOPICAL CREAM 10 % | | Tier 3 | |
| *silver nitrate applicators topical stick 75-25 %* | | Tier 1 | |
| *silver nitrate topical solution 10 %* | | Tier 1 | |
| URAMAXIN GT TOPICAL KIT,CREAM AND GEL 45 % | | Tier 3 | |
| URAMAXIN TOPICAL FOAM 20 % | | Tier 3 | |
| URAMAXIN TOPICAL LOTION 45 % | (urea) | Tier 3 | |
| UREA NAIL STICK TOPICAL SOLUTION 50 % | (urea) | Tier 1 | |
| *urea topical cream 39 %* | (Uredeb) | Tier 1 | |
| *urea topical cream 40 %* | | Tier 1 | |
| *urea topical cream 45 %* | (Uramaxin) | Tier 1 | |
| *urea topical cream 50 %* | (Ure-K) | Tier 1 | |
| *urea topical foam 35 %* | | Tier 1 | |
| *urea topical gel 45 %* | (CEM-Urea) | Tier 1 | |
| *urea topical lotion 40 %* | | Tier 1 | |
| WAYZEN TOPICAL GEL 40-5 % | | Tier 3 | |
| WELERIS TOPICAL GEL 17-2 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| WENIXRA TOPICAL OINTMENT 5-30 % | | Tier 3 | |
| XALIX TOPICAL FILM-FORMING SOLN ER W/ APPL 28 % | | Tier 3 | |
| XIRUN TOPICAL GEL 10-40 % | | Tier 3 | |
| **Oxidizing Agents** | | | |
| HYPOCYN ANTIPRURITIC TOPICAL SPRAY GEL 0.012 % | | Tier 3 | |
| RENOVAR IRRIGATION IRRIGATION SOLUTION | | Tier 3 | |
| RENOVAR TOPICAL SOLUTION | | Tier 3 | |
| **Protectives** | | | |
| GENADUR (WITH LEXINAL) KIT 2,500 MCG | | Tier 3 | |
| PHARMABASE BARRIER TOPICAL OINTMENT 9.38 % | | Tier 1 | |
| PR CREAM TOPICAL CREAM | | Tier 1 | |
| RECEDO TOPICAL GEL | | Tier 3 | |
| VASELINE WHITE PETROLEUM TOPICAL OINTMENT IN PACKET | (white petrolatum) | Tier 1 | |
| WOUNDGELHA MATRIX TOPICAL GEL 2.5 % | | Tier 3 | |
| *zinc oxide topical ointment 20 %* | (Endit (zinc oxide)) | Tier 1 | |
| *zinc oxide topical paste 25 %* | | Tier 1 | |
| **Topical Anti-Inflammatory Steroid-Local Anesthetic** | | | |
| ANALPRAM-HC TOPICAL LOTION 2.5-1 % | | Tier 2 | |
| EPIFOAM TOPICAL FOAM 1-1 % | | Tier 3 | ST: TRIAL OF HYDROCORTISONE-PRAMOXINE 2.5%-1% CREAM IN THE PAST 120 DAYS |
| *hydrocortisone-pramoxine topical cream 2.5-1 %* | | Tier 1 | |
| *lidocaine hcl-hydrocortison ac topical cream 3-0.5 %* | (Lidocort) | Tier 1 | |
| PRAMOSONE TOPICAL CREAM 1-1 % | (hydrocortisone-pramoxine) | Tier 2 | ST: TRIAL OF HYDROCORTISONE-PRAMOXINE 2.5%-1% CREAM IN THE PAST 120 DAYS |
| PRAMOSONE TOPICAL LOTION 1-1 %, 2.5-1 % | | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| PRAMOSONE TOPICAL OINTMENT 1-1 % | | Tier 2 | ST: TRIAL OF HYDROCORTISONE-PRAMOXINE 2.5%-1% CREAM IN THE PAST 120 DAYS |
| PRAMOSONE TOPICAL OINTMENT 2.5-1 % | (hydrocortisone-pramoxine) | Tier 2 | |
| **Topical Antineoplastic & Premalignant Lesion Agnts** | | | |
| *bexarotene topical gel 1 %* | (Targretin) | Tier 4 | PA; SP |
| *diclofenac sodium topical gel 3 %* | | Tier 1 | |
| *fluorouracil topical cream 0.5 %* | (Carac) | Tier 1 | PA |
| *fluorouracil topical cream 5 %* | (Efudex) | Tier 1 | |
| *fluorouracil topical solution 2 %, 5 %* | | Tier 1 | |
| KLISYRI (250 MG) TOPICAL OINTMENT IN PACKET 1 % | | Tier 3 | QL (5 EA per 1 FILL) |
| KLISYRI (350 MG) TOPICAL OINTMENT IN PACKET 1 % | | Tier 3 | QL (5 EA per 1 FILL) |
| PANRETIN TOPICAL GEL 0.1 % | | Tier 6 | SP; QL (60 GM per 28 days) |
| TOLAK TOPICAL CREAM 4 % | | Tier 2 | |
| VALCHLOR TOPICAL GEL 0.016 % | | Tier 5 | PA; SP |
| **Topical Local Anesthetics** | | | |
| ANACAINE TOPICAL OINTMENT 10 % | | Tier 3 | |
| ANASTIA TOPICAL LOTION 2.75 % | | Tier 3 | |
| CETACAINE TOPICAL AEROSOL,SPRAY 2 %-2 %-14 % (200 MG/SEC) | | Tier 3 | |
| DERMACINRX LIDOCAN TOPICAL ADHESIVE PATCH,MEDICATED 5 % | (lidocaine) | Tier 1 | QL (90 EA per 30 days) |
| DERMACINRX LIDOGEL TOPICAL GEL 2.8 % | | Tier 3 | |
| DERMACINRX LIDOREX TOPICAL GEL 2.8 % | | Tier 3 | |
| ENZNONUTY TOPICAL OINTMENT 10-10-20 % | | Tier 3 | |
| *ethyl chloride topical aerosol,spray 100 %* | | Tier 1 | |
| L.E.T.(LIDO-EPINEPH BIT-TETRA) TOPICAL GEL 4-0.09-0.5 % | | Tier 1 | |
| L.E.T.(LIDO-EPINEPH BIT-TETRA) TOPICAL GEL 4-0.18-0.5 % | | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| L.E.T.(LIDO-RACEPINEPH-TETRA) TOPICAL GEL 4-0.05-0.5 % | | Tier 1 | |
| L.E.T.(LIDO-RACEPINEPH-TETRA) TOPICAL SOLUTION 4-0.05-0.5 % | (lidocaine-racepinep-tetracaine) | Tier 1 | |
| *lidocaine hcl laryngotracheal solution 4 %* | | Tier 1 | |
| *lidocaine hcl topical cream 3 %* | (Dermacinrx Lidocaine) | Tier 1 | |
| *lidocaine topical adhesive patch,medicated 5 %* | (DermacinRx Lidocan) | Tier 1 | QL (90 EA per 30 days) |
| *lidocaine topical ointment 5 %* | | Tier 1 | QL (240 GM per 30 days) |
| *lidocaine-prilocaine topical cream 2.5-2.5 %* | | Tier 1 | |
| LIDOCAN III TOPICAL ADHESIVE PATCH,MEDICATED 5 % | (lidocaine) | Tier 1 | QL (90 EA per 30 days) |
| LIDOCAN IV TOPICAL ADHESIVE PATCH,MEDICATED 5 % | (lidocaine) | Tier 1 | QL (90 EA per 30 days) |
| LIDOCAN V TOPICAL ADHESIVE PATCH,MEDICATED 5 % | (lidocaine) | Tier 1 | QL (90 EA per 30 days) |
| LIDOPIN TOPICAL CREAM 3.25 % | | Tier 3 | |
| LIDTOPIC MAX TOPICAL CREAM, METERED-DOSE APPLICATOR 10 % | | Tier 3 | |
| LIDTOPIC TOPICAL CREAM, METERED-DOSE APPLICATOR 7.5 % | | Tier 3 | |
| NOBELA TOPICAL OINTMENT 10-10-20 % | | Tier 3 | |
| NOLIRA TOPICAL CREAM 23-7 % | | Tier 3 | |
| NUMBONEX TOPICAL LOTION 2.75 % | | Tier 3 | |
| NYNUTEY TOPICAL CREAM 23-7 % | | Tier 3 | |
| PRAKETAMIDE TOPICAL CREAM, METERED-DOSE APPLICATOR 5 % | | Tier 3 | |
| REGENECARE TOPICAL GEL 2 % | | Tier 3 | |
| TRANZAREL TOPICAL GEL 4 % | | Tier 3 | |
| **Topical Preparations,Miscellaneous** | | | |
| KEFUNOVA TOPICAL CREAM 5-0.005 % | | Tier 3 | |
| **Topical/Mucous Membr./Subcut. Enzymes** | | | |
| SANTYL TOPICAL OINTMENT 250 UNIT/GRAM | | Tier 3 | PA |
| **Dermatology - Psoriasis/Eczema** | | | |
| **Antipsoriatic Agents,Systemic** | | | |
| *acitretin oral capsule 10 mg, 17.5 mg, 25 mg* | | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| BIMZELX AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 160 MG/ML, 320 MG/2 ML | Tier 5 | PA; SP |
| BIMZELX SUBCUTANEOUS SYRINGE 160 MG/ML, 320 MG/2 ML | Tier 5 | PA; SP |
| ICOTYDE ORAL TABLET 200 MG | Tier 5 | PA; SP |
| *methoxsalen oral capsule,liqd-filled,rapid rel 10 mg* | Tier 1 | |
| SKYRIZI SUBCUTANEOUS PEN INJECTOR 150 MG/ML | Tier 5 | PA; SP |
| SKYRIZI SUBCUTANEOUS SYRINGE 150 MG/ML, 55 MG/0.37 ML | Tier 5 | PA; SP |
| SOTYKTU ORAL TABLET 6 MG | Tier 5 | PA; SP |
| SPEVIGO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML | Tier 6 | PA; SP |
| TALTZ AUTOINJECTOR (2 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML | Tier 5 | PA; SP |
| TALTZ AUTOINJECTOR (3 PACK) SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML | Tier 5 | PA; SP |
| TALTZ AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 80 MG/ML | Tier 5 | PA; SP |
| TALTZ SYRINGE SUBCUTANEOUS SYRINGE 20 MG/0.25 ML, 40 MG/0.5 ML, 80 MG/ML | Tier 5 | PA; SP |
| **Antipsoriatics Agents** | | |
| *calcipotriene scalp solution 0.005 %* (Pellix) | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| *calcipotriene topical cream 0.005 %* | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| *calcipotriene topical ointment 0.005 %* | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| *calcitriol topical ointment 3 mcg/gram* | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| DIOOXIA TOPICAL CREAM 0.005-4 % | Tier 3 | |
| DRITHOCREME HP TOPICAL CREAM 1 % | Tier 2 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |

| Drug | | Status | Notes |
|---|---|---|---|
| PELLIX SCALP SOLUTION 0.005 % | (calcipotriene) | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| PURAZIL TOPICAL CREAM 0.005-4 % | | Tier 3 | |
| *tazarotene topical cream 0.05 %* | (Tazorac) | Tier 1 | Age (Max 39 Years) |
| *tazarotene topical cream 0.1 %* | (Tazorac) | Tier 1 | |
| *tazarotene topical gel 0.05 %* | (Tazorac) | Tier 1 | Age (Max 39 Years) |
| *tazarotene topical gel 0.1 %* | (Trilitas) | Tier 1 | Age (Max 39 Years) |
| TRILITAS TOPICAL GEL 0.1 % | (tazarotene) | Tier 1 | Age (Max 39 Years) |
| VTAMA TOPICAL CREAM 1 % | | Tier 2 | PA; QL (60 GM per 30 days) |
| ZITHRANOL TOPICAL SHAMPOO 1 % | | Tier 3 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| ZORYVE TOPICAL CREAM 0.3 % | | Tier 2 | PA; QL (60 GM per 30 days) |
| **Il-23 Receptor Antagonist, Monoclonal Antibody** | | | |
| OMVOH PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML, 200 MG/2 ML (100 MG/ML X 2), 300MG/3ML(100MG /ML-200 MG/2ML) | | Tier 5 | PA; SP |
| OMVOH SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML, 200 MG/2 ML (100 MG/ML X 2), 300MG/3ML(100MG /ML-200 MG/2ML) | | Tier 5 | PA; SP |
| SKYRIZI INTRAVENOUS SOLUTION 60 MG/ML | | Tier 5 | PA; SP |
| SKYRIZI SUBCUTANEOUS WEARABLE INJECTOR 180 MG/1.2 ML (150 MG/ML), 360 MG/2.4 ML (150 MG/ML) | | Tier 5 | PA; SP |
| TREMFYA INTRAVENOUS SOLUTION 200 MG/20 ML (10 MG/ML) | | Tier 5 | PA; SP |
| TREMFYA ONE-PRESS SUBCUTANEOUS AUTO-INJECTOR 100 MG/ML | | Tier 5 | PA; SP |
| TREMFYA PEN INDUCTION PK(2PEN) SUBCUTANEOUS PEN INJECTOR 200 MG/2 ML | | Tier 5 | PA; SP |
| TREMFYA PEN SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 200 MG/2 ML | | Tier 5 | PA; SP |
| TREMFYA SUBCUTANEOUS SYRINGE 100 MG/ML, 200 MG/2 ML | | Tier 5 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Topical Agents,Miscellaneous** | | | |
| L-MESITRAN SOFT TOPICAL GEL 40 % | | Tier 3 | |
| MUSCUSOLICE TOPICAL CREAM, METERED-DOSE APPLICATOR 2 %, 5 % | | Tier 3 | |
| NEURAPTINE TOPICAL CREAM, METERED-DOSE APPLICATOR 10 % | | Tier 3 | |
| OCM TOPICAL OINTMENT IN PACKET | | Tier 3 | |
| SIVORA TOPICAL CREAM 0.3 % | | Tier 3 | |
| **Topical Immunosuppressive Agents** | | | |
| ELYZIA (WITH HYALURONATE) TOPICAL CREAM 0.1-1-4 % | (tacrolimus-hyaluronate-niacin) | Tier 3 | |
| ELYZIA TOPICAL OINTMENT 0.1-4 % | (tacrolimus-niacinamide) | Tier 3 | |
| HOVYN TOPICAL SOLUTION 0.1 % | | Tier 3 | |
| HYFTOR TOPICAL GEL 0.2 % | | Tier 6 | PA; SP |
| NUJO TOPICAL SOLUTION 0.1 % | | Tier 3 | |
| NUJU TOPICAL CREAM 0.1 % | (tacrolimus-vehicle base no.238) | Tier 3 | |
| OXIANUJO (WITH HYALURONATE) TOPICAL CREAM 0.1-1-4 % | (tacrolimus-hyaluronate-niacin) | Tier 3 | |
| OXIANUJO TOPICAL OINTMENT 0.1-4 % | (tacrolimus-niacinamide) | Tier 3 | |
| *pimecrolimus topical cream 1 %* | | Tier 1 | ST: TRIAL OF GENERIC MOMETASONE CREAM OR OINTMENT, CLOBETASOL CREAM OR OINTMENT, HYDROCORTISONE 1% OR 2.5% CREAM OR OINTMENT, OR TRIAMCINOLONE 0.1% OR 0.5% OINTMENT IN THE PAST 120 DAYS |
| *tacrolimus topical ointment 0.03 %, 0.1 %* | | Tier 1 | ST: TRIAL OF GENERIC MOMETASONE CREAM OR OINTMENT, CLOBETASOL CREAM OR OINTMENT, HYDROCORTISONE 1% OR 2.5% CREAM OR OINTMENT, OR TRIAMCINOLONE 0.1% OR 0.5% OINTMENT IN THE PAST 120 DAYS |

| Drug | | Status | Notes |
|---|---|---|---|
| VEVEN TOPICAL CREAM 0.1 % | (tacrolimus-vehicle base no.238) | Tier 3 | |
| **Topical Vit D Analog/Antiinflammatory, Steroidal** | | | |
| *calcipotriene-betamethasone topical ointment 0.005-0.064 %* | | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| *calcipotriene-betamethasone topical suspension 0.005-0.064 %* | (Attero) | Tier 1 | ST: TRIAL OF TOPICAL CORTICOSTEROID REQUIRED |
| DIOCHLOY TOPICAL SOLUTION 0.05-0.005 % | (clobetasol-calcipotriene) | Tier 3 | |
| ENSTILAR TOPICAL FOAM 0.005-0.064 % | | Tier 2 | |
| PLENURA TOPICAL SOLUTION 0.05-0.005 % | (clobetasol-calcipotriene) | Tier 3 | |
| **Diabetes** | | | |
| **Antihypergly, (Dpp-4) Inhibitor & Biguanide Comb.** | | | |
| *sitagliptin phos-metformin oral tablet 50-1,000 mg, 50-500 mg* | (Janumet) | Tier 1 | QL (2 EA per 1 day) |
| *sitagliptin phos-metformin oral tablet, er multiphase 24 hr 100-1,000 mg* | (Janumet XR) | Tier 1 | QL (1 EA per 1 day) |
| *sitagliptin phos-metformin oral tablet, er multiphase 24 hr 50-1,000 mg, 50-500 mg* | (Janumet XR) | Tier 1 | QL (2 EA per 1 day) |
| **Antihypergly,Incretin Mimetic(Glp-1 Recep.Agonist)** | | | |
| *exenatide subcutaneous pen injector 10 mcg/dose(250 mcg/ml) 2.4 ml* | | Tier 1 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (2.4 ML per 30 days) |
| *exenatide subcutaneous pen injector 5 mcg/dose (250 mcg/ml) 1.2 ml* | | Tier 1 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (1.2 ML per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| *liraglutide subcutaneous pen injector 0.6 mg/0.1 ml (18 mg/3 ml)* (Victoza 2-Pak) | Tier 1 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (9 ML per 30 days) |
| OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG | Tier 2 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (1 EA per 1 day) |
| OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML) | Tier 2 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (3 ML per 28 days) |
| RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG | Tier 2 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (1 EA per 1 day) |
| TRULICITY SUBCUTANEOUS PEN INJECTOR 0.75 MG/0.5 ML, 1.5 MG/0.5 ML, 3 MG/0.5 ML, 4.5 MG/0.5 ML | Tier 2 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (2 ML per 28 days) |
| **Antihyperglycemc-Sod/Gluc Cotransport2(Sglt2)Inhib** | | |
| *dapagliflozin oral tablet 10 mg, 5 mg* (Farxiga) | Tier 1 | QL (1 EA per 1 day) |
| JARDIANCE ORAL TABLET 10 MG, 25 MG | Tier 2 | QL (1 EA per 1 day) |
| **Antihyperglycemic - Dopamine Receptor Agonists** | | |
| CYCLOSET ORAL TABLET 0.8 MG | Tier 3 | ST: TRIAL OF METFORMIN(GLUCOPHAGE), METFORMIN ER, GLYBURIDE/METFORMIN (GLUCOVANCE) OR GLIPIZIDE/METFORMIN (METAGLIP) WITHIN THE PAST 180 DAYS; QL (6 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| **Antihyperglycemic - Incretin Mimetics Combination** | | |
| MOUNJARO SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML | Tier 2 | PA; DIAGNOSIS CODE FOR MEDICALLY ACCEPTED INDICATION REQUIRED OR SUBMIT A PA REQUEST; QL (0.5 ML per 7 days) |
| **Antihyperglycemic, Alpha-Glucosidase Inhib (N-S)** | | |
| *acarbose oral tablet 100 mg, 25 mg, 50 mg* | Tier 1 | |
| *miglitol oral tablet 100 mg, 25 mg, 50 mg* | Tier 1 | |
| **Antihyperglycemic, Dpp-4 Inhibitors** | | |
| *sitagliptin phosphate oral tablet 100 mg, 25 mg, 50 mg* (Januvia) | Tier 1 | QL (1 EA per 1 day) |
| **Antihyperglycemic, Insulin-Release Stimulant Type** | | |
| *glimepiride oral tablet 1 mg, 2 mg, 4 mg* | Tier 1 | |
| *glipizide oral tablet 10 mg, 5 mg* | Tier 1 | |
| *glipizide oral tablet 2.5 mg* | Tier 1 | QL (2 EA per 1 day) |
| *glipizide oral tablet extended release 24hr 10 mg, 2.5 mg, 5 mg* | Tier 1 | |
| *glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg* | Tier 1 | |
| *nateglinide oral tablet 120 mg, 60 mg* | Tier 1 | |
| *repaglinide oral tablet 0.5 mg, 1 mg, 2 mg* | Tier 1 | |
| **Antihyperglycemic, Insulin-Response Enhancer (N-S)** | | |
| *pioglitazone oral tablet 15 mg, 30 mg, 45 mg* (Actos) | Tier 1 | |
| **Antihyperglycemic, Sglt-2 & Dpp-4 Inhibitor Comb.** | | |
| GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG | Tier 2 | QL (1 EA per 1 day) |
| **Antihyperglycemic,Biguanide Type(Non-Sulfonylurea)** | | |
| *metformin oral solution 500 mg/5 ml* (Riomet) | Tier 1 | PA; QL (20 ML per 1 day) |
| *metformin oral tablet 1,000 mg, 500 mg, 850 mg* | Tier 1 | |
| *metformin oral tablet extended release 24 hr 500 mg, 750 mg* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antihyperglycemic,Insulin & Glp-1 Receptor Agonist** | | | |
| SOLIQUA 100/33 SUBCUTANEOUS INSULIN PEN 100 UNIT-33 MCG/ML | | Tier 2 | QL (15 ML per 25 days) |
| XULTOPHY 100/3.6 SUBCUTANEOUS INSULIN PEN 100 UNIT-3.6 MG /ML (3 ML) | | Tier 2 | QL (15 ML per 28 days) |
| **Antihyperglycemic,Insulin-Rel Stim.& Biguanide Cmb** | | | |
| *glipizide-metformin oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg* | | Tier 1 | |
| *glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg* | | Tier 1 | |
| **Antihyperglycemic,Insulin-Response & Release Comb.** | | | |
| *pioglitazone-glimepiride oral tablet 30-2 mg, 30-4 mg* | (DUETACT) | Tier 1 | ST: TRIAL OF METFORMIN, PREFERRED SULFONYLUREA OR PREFERRED METFORMIN/SULFONYL UREA COMBO REQUIRED WITHIN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| **Antihyperglycemic-Glucocorticoid Receptor Blocker** | | | |
| KORLYM ORAL TABLET 300 MG | (mifepristone) | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *mifepristone oral tablet 300 mg* | (Korlym) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| **Antihyperglycemic-Sglt2 Inhibitor & Biguanide Comb** | | | |
| *dapagliflozin-metformin oral tablet, ir - er, biphasic 24hr 10-500 mg, 5-500 mg* | (Xigduo XR) | Tier 1 | QL (1 EA per 1 day) |
| SYNJARDY ORAL TABLET 12.5-1,000 MG, 12.5-500 MG, 5-1,000 MG, 5-500 MG | | Tier 2 | QL (2 EA per 1 day) |
| SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG, 25-1,000 MG | | Tier 2 | QL (1 EA per 1 day) |
| SYNJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-1,000 MG, 5-1,000 MG | | Tier 2 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-1,000 MG | (dapagliflozin-metformin) | Tier 2 | QL (1 EA per 1 day) |
| XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 2.5-1,000 MG | | Tier 2 | QL (2 EA per 1 day) |
| XIGDUO XR ORAL TABLET, IR - ER, BIPHASIC 24HR 5-1,000 MG | (dapagliflozin-metformin) | Tier 2 | QL (2 EA per 1 day) |
| **Antihyperglycm,Insul-Resp.Enhancer & Biguanide Cmb** | | | |
| *pioglitazone-metformin oral tablet 15-500 mg* | | Tier 1 | ST: TRIAL OF METFORMIN, PREFERRED SULFONYLUREA OR PREFERRED METFORMIN/SULFONYL UREA COMBO REQUIRED WITHIN THE PAST 120 DAYS; QL (3 EA per 1 day) |
| *pioglitazone-metformin oral tablet 15-850 mg* | (Actoplus MET) | Tier 1 | ST: TRIAL OF METFORMIN, PREFERRED SULFONYLUREA OR PREFERRED METFORMIN/SULFONYL UREA COMBO REQUIRED WITHIN THE PAST 120 DAYS; QL (3 EA per 1 day) |
| **Antihypergly-Sglt-2 Inhib,Dpp-4 Inhib,Biguanide Cb** | | | |
| TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 10-5-1,000 MG, 25-5-1,000 MG | | Tier 2 | QL (1 EA per 1 day) |
| TRIJARDY XR ORAL TABLET, IR - ER, BIPHASIC 24HR 12.5-2.5-1,000 MG, 5-2.5-1,000 MG | | Tier 2 | QL (2 EA per 1 day) |
| **Blood Sugar Diagnostics** | | | |
| CONTOUR NEXT TEST STRIPS STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| CONTOUR PLUS TEST STRIP STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| CONTOUR TEST STRIPS STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| FREESTYLE INSULINX STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| FREESTYLE INSULINX TEST STRIPS STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| FREESTYLE LITE STRIPS STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| FREESTYLE PRECISION NEO STRIPS STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| FREESTYLE TEST STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| PRECISION XTRA TEST STRIP | (blood sugar diagnostic) | Tier 2 | QL (200 EA per 30 days) |
| **Diabetic Supplies** | | | |
| ASSURE TITANIUM GLUCOSE SYSTEM | (blood-glucose meter) | Tier 3 | |
| AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN | | Tier 3 | |
| AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN | | Tier 3 | |
| AUTOPEN 2 TO 42 UNITS SUBCUTANEOUS INSULIN PEN | | Tier 3 | |
| BIGFOOT UNITY KIT | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-ADMELOG DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-APIDRA DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-ASPART DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-BASAGLAR DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-FIASP DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-HUMALOG DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-LANTUS DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-LISPRO DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-LYUMJEV DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-NOVOLOG DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-TOUJEO DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-TOUJEOMX DEVICE | | Tier 3 | |
| BIGFOOT UNITY PEN CAP-TRESIBA DEVICE | | Tier 3 | |
| CEQUR SIMPLICITY DEVICE 1 UNIT (240 UNIT) | | Tier 2 | QL (4 EA per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| CEQUR SIMPLICITY DEVICE 2 UNIT (200 UNIT), 2 UNIT (240 UNIT) | Tier 2 | QL (10 EA per 30 days) |
| CEQUR SIMPLICITY INSERTER | Tier 2 | QL (1 EA per 365 days) |
| DEXCOM G7 15 DAY SENSOR DEVICE | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 30 days) |
| DEXCOM G7 RECEIVER | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (1 EA per 365 days) |
| DEXCOM G7 SENSOR DEVICE | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (3 EA per 30 days) |
| FREESTYLE LIBRE 14 DAY READER | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (1 EA per 365 days) |
| FREESTYLE LIBRE 14 DAY SENSOR KIT | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 28 days) |
| FREESTYLE LIBRE 2 PLUS SENSOR DEVICE | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 28 days) |
| FREESTYLE LIBRE 2 READER | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (1 EA per 365 days) |
| FREESTYLE LIBRE 2 SENSOR KIT | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 28 days) |
| FREESTYLE LIBRE 3 PLUS SENSOR DEVICE | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 28 days) |
| FREESTYLE LIBRE 3 READER | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (1 EA per 365 days) |

| Drug | Status | Notes |
|---|---|---|
| FREESTYLE LIBRE 3 SENSOR DEVICE | Tier 2 | HISTORY OF INSULIN USE OR SUBMIT A PA EXCEPTION REQUEST; QL (2 EA per 28 days) |
| GLUCOCOM AUTOLINK | Tier 3 | |
| GUARDIAN 4 GLUCOSE SENSOR DEVICE | Tier 3 | PA |
| GUARDIAN 4 TRANSMITTER DEVICE | Tier 3 | PA |
| GUARDIAN LINK 3 TRANSMITTER DEVICE | Tier 3 | PA |
| GUARDIAN SENSOR 3 DEVICE | Tier 3 | PA |
| ILET INFUSION KIT-FLEX 23" COMBO PACK | Tier 2 | |
| ILET INFUSION KIT-INSET 23" COMBO PACK | Tier 2 | |
| ILET INFUSION KIT-INSET 32" COMBO PACK | Tier 2 | |
| ILET INFUSION-CONTACT DTCH 23" COMBO PACK | Tier 2 | |
| ILET INSULIN PUMP | Tier 2 | PA |
| ILET STARTER KIT CONTACT KIT | Tier 2 | |
| ILET STARTER KIT-INSET KIT | Tier 2 | |
| INPEN (FOR HUMALOG) BLUE SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| INPEN (FOR HUMALOG) GREY SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| INPEN (NOVOLOG OR FIASP) BLUE SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| INPEN (NOVOLOG OR FIASP) GREY SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| INPEN (NOVOLOG OR FIASP) PINK SUBCUTANEOUS INSULIN PEN | Tier 2 | |
| MEDTRONIC EXT INFUSION SET 23" INFUSION SET | Tier 3 | |
| MEDTRONIC EXT INFUSION SET 32" INFUSION SET | Tier 3 | |
| MEDTRONIC EXT INFUSION SET 43" INFUSION SET | Tier 3 | |
| MINIMED 780G INSULIN PUMP | Tier 3 | PA |
| MINIMED FLEX | Tier 3 | PA |

| Drug | Status | Notes |
|---|---|---|
| MINIMED MIO ADVANCE INF SET23" INFUSION SET | Tier 3 | |
| MINIMED MIO ADVANCE INF SET43" INFUSION SET | Tier 3 | |
| MINIMED QUICK SET 18" INFUSION SET | Tier 3 | |
| MINIMED QUICK SET 23" INFUSION SET | Tier 3 | |
| MINIMED QUICK SET 32" INFUSION SET | Tier 3 | |
| MINIMED QUICK SET 43" INFUSION SET | Tier 3 | |
| MINIMED SILHOUETTE 18" INFUSION SET | Tier 3 | |
| MINIMED SILHOUETTE 23" INFUSION SET | Tier 3 | |
| MINIMED SILHOUETTE 32" INFUSION SET | Tier 3 | |
| MINIMED SILHOUETTE 43" INFUSION SET | Tier 3 | |
| MINIMED SURE T 18" INFUSION SET | Tier 3 | |
| MINIMED SURE T 23" INFUSION SET | Tier 3 | |
| MINIMED SURE T 32" INFUSION SET | Tier 3 | |
| NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN | Tier 3 | |
| OMNIPOD 5 (LIBRE 2/3 PLUS) SUBCUTANEOUS CARTRIDGE | Tier 2 | |
| OMNIPOD 5 G6-G7 INTRO KT(GEN5) SUBCUTANEOUS CARTRIDGE | Tier 2 | QL (1 EA per 365 days) |
| OMNIPOD 5 G6-G7 PODS (GEN 5) SUBCUTANEOUS CARTRIDGE | Tier 2 | |
| OMNIPOD 5 INTRO (LIBRE2/3PLUS) SUBCUTANEOUS CARTRIDGE | Tier 2 | QL (1 EA per 365 days) |
| OMNIPOD DASH INTRO KIT (GEN 4) SUBCUTANEOUS CARTRIDGE | Tier 2 | QL (1 EA per 365 days) |
| OMNIPOD DASH PDM KIT (GEN 4) | Tier 2 | QL (1 EA per 365 days) |
| OMNIPOD DASH PODS (GEN 4) SUBCUTANEOUS CARTRIDGE | Tier 2 | |
| SIMPLERA SENSOR DEVICE | Tier 3 | PA |
| SIMPLERA SYNC SENSOR DEVICE | Tier 3 | PA |
| T:SLIM X2 CONTROL-IQ | Tier 3 | PA |
| TANDEM MOBI AUTOSOFT 30 KT 23" COMBO PACK | Tier 2 | |

| Drug | Status | Notes |
|---|---|---|
| TANDEM MOBI AUTOSOFT XC KIT 5" COMBO PACK | Tier 2 | |
| TANDEM MOBI AUTOSOFT XC KT 23" COMBO PACK | Tier 2 | |
| TANDEM MOBI AUTOSOFT30 14PK 23 COMBO PACK | Tier 2 | |
| TANDEM MOBI AUTOSOFTXC 14PK 23 COMBO PACK | Tier 2 | |
| TANDEM MOBI AUTOSOFTXC 14PK 5" COMBO PACK | Tier 2 | |
| TANDEM MOBI SYSTEM | Tier 2 | PA |
| TANDEM MOBI TRUSTEEL KIT 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM ASFT 30 PK10 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM ASFT 30 PK14 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM ASFT XC PK10 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM ASFT XC PK14 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM TRUSTL PK10 23" COMBO PACK | Tier 2 | |
| TANDEM T:SLIM X2 STARTER KIT | Tier 2 | PA |
| TWIIST RFL(INFUS-CSST-NDL-SYR) KIT | Tier 2 | |
| TWIIST STARTER KIT KIT | Tier 2 | QL (1 EA per 365 days) |
| V-GO 20 DEVICE | Tier 2 | |
| V-GO 30 DEVICE | Tier 2 | |
| V-GO 40 DEVICE | Tier 2 | |
| **Hyperglycemics** | | |
| BAQSIMI NASAL SPRAY,NON-AEROSOL 3 MG/ACTUATION | Tier 2 | QL (4 EA per 1 FILL) |
| *diazoxide oral suspension 50 mg/ml* (Proglycem) | Tier 1 | |
| GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN 1 MG | Tier 1 | ST: TRIAL OF BAQSIMI OR GVOKE IN THE PAST 120 DAYS; QL (4 EA per 1 FILL) |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 2 | QL (0.4 ML per 1 FILL) |

| Drug | Status | Notes |
|---|---|---|
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 2 | QL (0.8 ML per 1 FILL) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 0.5 MG/0.1 ML | Tier 2 | QL (0.4 ML per 1 FILL) |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS AUTO-INJECTOR 1 MG/0.2 ML | Tier 2 | QL (0.8 ML per 1 FILL) |
| GVOKE PFS 1-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 2 | QL (0.8 ML per 1 FILL) |
| GVOKE PFS 2-PACK SYRINGE SUBCUTANEOUS SYRINGE 1 MG/0.2 ML | Tier 2 | QL (0.8 ML per 1 FILL) |
| GVOKE SUBCUTANEOUS SOLUTION 1 MG/0.2 ML | Tier 2 | QL (0.8 ML per 1 FILL) |
| **Insulins** | | |
| AFREZZA INHALATION CARTRIDGE WITH INHALER 12 UNIT, 4 UNIT, 4 UNIT (90)/ 8 UNIT (90), 4 UNIT/8 UNIT/ 12 UNIT (60), 8 UNIT, 8 UNIT (90)/ 12 UNIT (90) | Tier 3 | PA; QL (180 EA per 28 days) |
| FIASP FLEXTOUCH U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | Tier 2 | QL (30 ML per 28 days) |
| FIASP PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (3 ML) | Tier 2 | QL (30 ML per 28 days) |
| FIASP PUMPCART SUBCUTANEOUS CARTRIDGE 100 UNIT/ML (1.6 ML) | Tier 2 | QL (40 ML per 28 days) |
| FIASP U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML | Tier 2 | QL (40 ML per 28 days) |
| HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML) | Tier 2 | QL (12 ML per 28 days) |
| HUMALOG MIX 50-50 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (50-50) | Tier 2 | QL (30 ML per 28 days) |
| HUMALOG MIX 75-25(U-100)INSULN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (75-25) | Tier 2 | QL (40 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML | | Tier 2 | QL (30 ML per 28 days) |
| HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30) | | Tier 2 | QL (40 ML per 28 days) |
| HUMULIN 70/30 U-100 KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30) | | Tier 2 | QL (30 ML per 28 days) |
| HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | | Tier 2 | QL (30 ML per 28 days) |
| HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML | | Tier 2 | QL (40 ML per 28 days) |
| HUMULIN R REGULAR U-100 INSULN INJECTION SOLUTION 100 UNIT/ML | | Tier 2 | QL (40 ML per 28 days) |
| HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML) | | Tier 2 | QL (24 ML per 28 days) |
| *insulin glargine-yfgn subcutaneous insulin pen 100 unit/ml (3 ml)* | (Semglee(insulin glarg-yfgn)Pen) | Tier 2 | QL (30 ML per 28 days) |
| *insulin glargine-yfgn subcutaneous solution 100 unit/ml* | (Semglee(insulin glargine-yfgn)) | Tier 2 | QL (40 ML per 28 days) |
| *insulin lispro protamin-lispro subcutaneous insulin pen 100 unit/ml (75-25)* | (Humalog Mix 75-25 KwikPen) | Tier 1 | QL (30 ML per 28 days) |
| *insulin lispro subcutaneous insulin pen 100 unit/ml* | (Admelog SoloStar U-100 Insulin) | Tier 1 | QL (30 ML per 28 days) |
| *insulin lispro subcutaneous insulin pen, half-unit 100 unit/ml* | (Humalog Junior KwikPen U-100) | Tier 1 | QL (30 ML per 28 days) |
| *insulin lispro subcutaneous solution 100 unit/ml* | (Admelog U-100 Insulin lispro) | Tier 1 | QL (40 ML per 28 days) |
| LYUMJEV KWIKPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML | | Tier 2 | QL (30 ML per 28 days) |
| LYUMJEV KWIKPEN U-200 INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML) | | Tier 2 | QL (12 ML per 28 days) |
| LYUMJEV U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML | | Tier 2 | QL (40 ML per 28 days) |
| NOVOLIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30) | | Tier 2 | QL (40 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| NOVOLIN 70-30 FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30) | | Tier 2 | QL (30 ML per 28 days) |
| NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | | Tier 2 | QL (30 ML per 28 days) |
| NOVOLIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML | | Tier 2 | QL (40 ML per 28 days) |
| NOVOLIN R FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | | Tier 2 | QL (30 ML per 28 days) |
| NOVOLIN R REGULAR U100 INSULIN INJECTION SOLUTION 100 UNIT/ML | | Tier 2 | QL (40 ML per 28 days) |
| NOVOLOG FLEXPEN U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | (insulin aspart u-100) | Tier 2 | QL (30 ML per 28 days) |
| NOVOLOG MIX 70-30 U-100 INSULN SUBCUTANEOUS SOLUTION 100 UNIT/ML (70-30) | (insulin asp prt-insulin aspart) | Tier 2 | QL (40 ML per 28 days) |
| NOVOLOG MIX 70-30FLEXPEN U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (70-30) | (insulin asp prt-insulin aspart) | Tier 2 | QL (30 ML per 28 days) |
| NOVOLOG PENFILL U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML | (insulin aspart u-100) | Tier 2 | QL (30 ML per 28 days) |
| NOVOLOG U-100 INSULIN ASPART SUBCUTANEOUS SOLUTION 100 UNIT/ML | (insulin aspart u-100) | Tier 2 | QL (40 ML per 28 days) |
| REZVOGLAR KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | | Tier 3 | ST: TRIAL OF INSULIN GLARGINE-YFGN, TOUJEO OR TRESIBA IN THE PAST 120 DAYS; QL (30 ML per 28 days) |
| TOUJEO MAX U-300 SOLOSTAR SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (3 ML) | (insulin glargine u-300 conc) | Tier 2 | QL (18 ML per 28 days) |
| TOUJEO SOLOSTAR U-300 INSULIN SUBCUTANEOUS INSULIN PEN 300 UNIT/ML (1.5 ML) | (insulin glargine u-300 conc) | Tier 2 | QL (13.5 ML per 28 days) |
| TRESIBA FLEXTOUCH U-100 SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML) | (insulin degludec) | Tier 2 | QL (30 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| TRESIBA FLEXTOUCH U-200 SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML) | (insulin degludec) | Tier 2 | QL (18 ML per 28 days) |
| TRESIBA U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML | (insulin degludec) | Tier 2 | QL (40 ML per 28 days) |
| **Ear - General Disorders** | | | |
| **Ear Preparations Anti-Inflammatory** | | | |
| *fluocinolone acetonide oil otic (ear) drops 0.01 %* | (DermOtic Oil) | Tier 1 | |
| **Ear Preparations, Misc. Anti-Infectives** | | | |
| *acetic acid otic (ear) solution 2 %* | | Tier 1 | |
| CORTANE-B TOPICAL LOTION 1-1-0.1 % | | Tier 3 | |
| *hydrocortisone-acetic acid otic (ear) drops 1-2 %* | | Tier 1 | |
| **Ear Preparations,Antibiotics** | | | |
| *ciprofloxacin hcl otic (ear) dropperette 0.2 %* | (Cetraxal) | Tier 1 | |
| CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSION 3.3-3-10-0.5 MG/ML | | Tier 3 | |
| *neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%* | | Tier 1 | |
| *neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%* | | Tier 1 | |
| *ofloxacin otic (ear) drops 0.3 %* | | Tier 1 | |
| **Otic Preparations,Anti-Inflammatory-Antibiotics** | | | |
| *ciprofloxacin-dexamethasone otic (ear) drops,suspension 0.3-0.1 %* | | Tier 1 | |
| *ciprofloxacin-fluocinolone otic (ear) solution 0.3-0.025 % (0.25 ml)* | (Otovel) | Tier 1 | |
| *ciprofloxacin-hydrocortisone otic (ear) drops,suspension 0.2-1 %* | (Cipro HC) | Tier 1 | |
| **Electrolyte Regulation** | | | |
| **Arginine Vasopressin (Avp) Receptor Antagonists** | | | |
| *tolvaptan oral tablet 15 mg* | (Samsca) | Tier 4 | SP; QL (30 EA per 365 days) |
| *tolvaptan oral tablet 30 mg* | (Samsca) | Tier 4 | SP; QL (60 EA per 365 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Electrolyte Depleters** | | | |
| *calcium acetate(phosphat bind) oral capsule 667 mg* | | Tier 1 | |
| *calcium acetate(phosphat bind) oral tablet 667 mg* | | Tier 1 | |
| KIONEX ORAL SUSPENSION 15 GRAM/60 ML | (sodium polystyrene sulfonate) | Tier 1 | |
| *lanthanum oral tablet,chewable 1,000 mg, 500 mg, 750 mg* | (Fosrenol) | Tier 1 | |
| LOKELMA ORAL POWDER IN PACKET 10 GRAM | | Tier 2 | QL (34 EA per 30 days) |
| LOKELMA ORAL POWDER IN PACKET 5 GRAM | | Tier 2 | QL (1 EA per 1 day) |
| *sevelamer carbonate oral powder in packet 0.8 gram, 2.4 gram* | (Renvela) | Tier 1 | |
| *sevelamer carbonate oral tablet 800 mg* | (Renvela) | Tier 1 | |
| *sevelamer hcl oral tablet 400 mg, 800 mg* | | Tier 1 | |
| *sodium polystyrene sulfonate oral powder 15 gram* | | Tier 1 | |
| *sodium polystyrene sulfonate oral suspension 15 gram/60 ml* | (Kionex) | Tier 1 | |
| SPS (WITH SORBITOL) ORAL SUSPENSION 15-20 GRAM/60 ML | | Tier 1 | |
| SPS (WITH SORBITOL) RECTAL ENEMA 30-40 GRAM/120 ML | | Tier 3 | |
| VELTASSA ORAL POWDER IN PACKET 1 GRAM | | Tier 3 | PA; QL (12 EA per 1 day) |
| VELTASSA ORAL POWDER IN PACKET 16.8 GRAM, 8.4 GRAM | | Tier 3 | PA; QL (1 EA per 1 day) |
| **Potassium Replacement** | | | |
| EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ | | Tier 3 | |
| EFFER-K ORAL TABLET, EFFERVESCENT 25 MEQ | (potassium bicarb-citric acid) | Tier 1 | |
| KLOR-CON M10 ORAL TABLET,ER PARTICLES/CRYSTALS 10 MEQ | (potassium chloride) | Tier 1 | |
| KLOR-CON M15 ORAL TABLET,ER PARTICLES/CRYSTALS 15 MEQ | (potassium chloride) | Tier 1 | |
| KLOR-CON M20 ORAL TABLET,ER PARTICLES/CRYSTALS 20 MEQ | (potassium chloride) | Tier 1 | |
| *potassium chloride oral capsule, extended release 10 meq, 8 meq* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *potassium chloride oral liquid 20 meq/15 ml, 40 meq/15 ml* | | Tier 1 | |
| *potassium chloride oral packet 20 meq* | (Klor-Con) | Tier 1 | |
| *potassium chloride oral tablet extended release 10 meq* | (Klor-Con 10) | Tier 1 | |
| *potassium chloride oral tablet extended release 15 meq, 20 meq* | | Tier 1 | |
| *potassium chloride oral tablet extended release 8 meq* | (Klor-Con 8) | Tier 1 | |
| *potassium chloride oral tablet,er particles/crystals 10 meq* | (Klor-Con M10) | Tier 1 | |
| *potassium chloride oral tablet,er particles/crystals 15 meq* | (Klor-Con M15) | Tier 1 | |
| *potassium chloride oral tablet,er particles/crystals 20 meq* | (Klor-Con M20) | Tier 1 | |
| **Sodium/Saline Preparations** | | | |
| BD POSIFLUSH NORMAL SALINE 0.9 INJECTION SYRINGE | (sodium chloride 0.9 % (flush)) | Tier 1 | |
| NORMAL SALINE FLUSH INJECTION SYRINGE | (sodium chloride 0.9 % (flush)) | Tier 1 | |
| *sodium chlor 0.9% bacteriostat injection solution 0.9 %* | | Tier 1 | |
| *sodium chloride 0.45 % intravenous parenteral solution 0.45 %* | | Tier 1 | |
| *sodium chloride 0.9 % (flush) injection syringe* | (BD PosiFlush Normal Saline 0.9) | Tier 1 | |
| *sodium chloride 0.9 % injection solution* | | Tier 1 | |
| *sodium chloride 0.9 % intravenous parenteral solution* | | Tier 1 | |
| *sodium chloride 0.9 % intravenous piggyback* | | Tier 1 | |
| *sodium chloride injection syringe 0.9 %* | | Tier 1 | |
| **Endocrine Disorder - Fertility** | | | |
| **Drugs To Treat Impotency** | | | |
| *avanafil oral tablet 100 mg, 200 mg, 50 mg* | (Stendra) | Tier 1 | ST: TRIAL OF GENERIC VIAGRA IN THE PAST 120 DAYS; QL (1 EA per 5 days) |
| CAVERJECT IMPULSE INTRACAVERNOSAL KIT 10 MCG, 20 MCG | | Tier 3 | QL (1 EA per 5 days) |
| CAVERJECT INTRACAVERNOSAL RECON SOLN 20 MCG, 40 MCG | | Tier 3 | QL (1 EA per 5 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| CAVERJECT INTRACAVERNOSAL SYRINGE 10 MCG, 20 MCG | | Tier 3 | QL (1 EA per 5 days) |
| EDEX INTRACAVERNOSAL KIT 10 MCG, 20 MCG, 40 MCG | | Tier 3 | QL (3 EA per 30 days) |
| IFE-BIMIX 30/1 INTRACAVERNOSAL SOLUTION 30 MG- 1 MG/ML | (papav-phentolamine in water) | Tier 1 | |
| *sildenafil oral tablet 100 mg, 25 mg, 50 mg* | (Viagra) | Tier 1 | QL (1 EA per 5 days) |
| *tadalafil oral tablet 10 mg, 20 mg* | (Cialis) | Tier 1 | QL (1 EA per 5 days) |
| *tadalafil oral tablet 2.5 mg* | | Tier 1 | PA; QL (1 EA per 1 day) |
| *tadalafil oral tablet 5 mg* | (Cialis) | Tier 1 | PA; QL (1 EA per 1 day) |
| TRI-MIX (PAPAVRN-PHNTLMN-PGE1) INTRACAVERNOSAL RECON SOLN 150 MG-5 MG- 50 MCG | | Tier 3 | |
| **Fertility Stimulating Preparations,Non-Fsh** | | | |
| *clomiphene citrate oral tablet 50 mg* | (MiloPhene) | Tier 1 | |
| MILOPHENE ORAL TABLET 50 MG | (clomiphene citrate) | Tier 1 | |
| **Follicle Stim./Luteinizing Hormones** | | | |
| MENOPUR SUBCUTANEOUS RECON SOLN 75 UNIT | | Tier 5 | SP |
| **Follicle-Stimulating Hormone (Fsh)** | | | |
| FOLLISTIM AQ SUBCUTANEOUS CARTRIDGE 300 UNIT/0.36 ML, 600 UNIT/0.72 ML, 900 UNIT/1.08 ML | | Tier 6 | SP; ST: TRIAL OF GONAL-F OR GONAL-F-RFF REQUIRED IN THE PAST 120 DAYS |
| GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 300 UNIT/0.48 ML, 450 UNIT/0.72 ML, 900 UNIT/1.44 ML | | Tier 5 | SP |
| GONAL-F SUBCUTANEOUS RECON SOLN 450 UNIT | | Tier 5 | SP |
| **Human Chorionic Gonadotropin (Hcg)** | | | |
| *chorionic gonadotropin, human intramuscular recon soln 10,000 unit* | (Pregnyl) | Tier 3 | ST: TRIAL OF NOVAREL OR OVIDREL REQUIRED IN THE PAST 120 DAYS |
| NOVAREL INTRAMUSCULAR RECON SOLN 5,000 UNIT | | Tier 2 | |
| OVIDREL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML | | Tier 2 | |
| PREGNYL INTRAMUSCULAR RECON SOLN 10,000 UNIT | (chorionic gonadotropin, human) | Tier 3 | ST: TRIAL OF NOVAREL OR OVIDREL REQUIRED IN THE PAST 120 DAYS |

| Drug | Status | Notes |
|---|---|---|
| **Pregnancy Facilitating/Maintaining Agent,Hormonal** | | |
| CRINONE VAGINAL GEL 8 % | Tier 2 | |
| *progesterone micronized vaginal insert 100 mg* (Endometrin) | Tier 1 | |
| **Endocrine Disorder - Other** | | |
| **Adrenal Steroid Inhibitors** | | |
| ISTURISA ORAL TABLET 1 MG | Tier 6 | PA; SP; QL (8 EA per 1 day) |
| ISTURISA ORAL TABLET 5 MG | Tier 6 | PA; SP; QL (12 EA per 1 day) |
| **Adrenocorticotrophic Hormones** | | |
| ACTHAR INJECTION GEL 80 UNIT/ML | Tier 6 | PA; SP |
| ACTHAR SELFJECT SUBCUTANEOUS PEN INJECTOR 40 UNIT/0.5 ML, 80 UNIT/ML | Tier 6 | PA; SP |
| CORTROPHIN GEL INJECTION GEL 80 UNIT/ML | Tier 6 | PA; SP |
| CORTROPHIN GEL SUBCUTANEOUS SYRINGE 40 UNIT/0.5 ML, 80 UNIT/ML | Tier 6 | PA; SP |
| **Antidiuretic And Vasopressor Hormones** | | |
| *desmopressin nasal spray with pump 10 mcg/spray (0.1 ml)* | Tier 1 | |
| *desmopressin nasal spray,non-aerosol 10 mcg/spray (0.1 ml), 150 mcg/spray (0.1 ml)* | Tier 1 | |
| *desmopressin oral tablet 0.1 mg, 0.2 mg* (DDAVP) | Tier 1 | |
| NOCDURNA (MEN) SUBLINGUAL TABLET,DISINTEGRATING 55.3 MCG | Tier 3 | QL (1 EA per 1 day) |
| NOCDURNA (WOMEN) SUBLINGUAL TABLET,DISINTEGRATING 27.7 MCG | Tier 3 | QL (1 EA per 1 day) |
| **Antineoplastic Lhrh(Gnrh) Agonist,Pituitary Suppr.** | | |
| ELIGARD (4 MONTH) SUBCUTANEOUS SYRINGE 30 MG | Tier 5 | PA; SP |
| ELIGARD SUBCUTANEOUS SYRINGE 7.5 MG (1 MONTH) | Tier 5 | PA; SP |
| *leuprolide subcutaneous kit 1 mg/0.2 ml* | Tier 4 | PA; SP |
| **Bone Formation Stim. Agents - Parathyroid Hormone** | | |
| *teriparatide subcutaneous pen injector 20 mcg/dose (560mcg/2.24ml)* (Bonsity) | Tier 4 | PA; SP; QL (2.24 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Bone Formation Stimulating Agts - Pth Rel Peptides** | | | |
| TYMLOS SUBCUTANEOUS PEN INJECTOR 80 MCG (3,120 MCG/1.56 ML) | | Tier 5 | PA; SP; QL (1.56 ML per 30 days) |
| **Bone Resorption Inhibitor & Vitamin D Combinations** | | | |
| FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT, 70 MG- 5,600 UNIT | | Tier 3 | QL (1 EA per 7 days) |
| **Bone Resorption Inhibitors** | | | |
| *alendronate oral solution 70 mg/75 ml* | | Tier 1 | QL (75 ML per 7 days) |
| *alendronate oral tablet 10 mg, 35 mg, 5 mg* | | Tier 1 | |
| *alendronate oral tablet 70 mg* | (Fosamax) | Tier 1 | |
| *calcitonin (salmon) injection solution 200 unit/ml* | (Miacalcin) | Tier 1 | |
| *calcitonin (salmon) nasal spray,non-aerosol 200 unit/actuation* | | Tier 1 | |
| *ibandronate oral tablet 150 mg* | | Tier 1 | |
| OSENVELT SUBCUTANEOUS SOLUTION 120 MG/1.7 ML (70 MG/ML) | | Tier 5 | PA; SP; QL (1.7 ML per 28 days) |
| *raloxifene oral tablet 60 mg* | (Evista) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY AND 35 YEARS OF AGE OR OLDER; QL (1 EA per 1 day) |
| *risedronate oral tablet 150 mg* | (Actonel) | Tier 1 | ST: TRIAL OF GENERIC ALENDRONATE AND IBANDRONATE REQUIRED; QL (1 EA per 30 days) |
| *risedronate oral tablet 30 mg, 5 mg* | | Tier 1 | ST: TRIAL OF GENERIC ALENDRONATE AND IBANDRONATE REQUIRED; QL (1 EA per 1 day) |
| *risedronate oral tablet 35 mg* | (Actonel) | Tier 1 | ST: TRIAL OF GENERIC ALENDRONATE AND IBANDRONATE REQUIRED; QL (1 EA per 7 days) |
| *risedronate oral tablet,delayed release (dr/ec) 35 mg* | (Atelvia) | Tier 1 | ST: TRIAL OF GENERIC ALENDRONATE AND IBANDRONATE REQUIRED; QL (1 EA per 7 days) |

| Drug | Status | Notes |
|---|---|---|
| STOBOCLO SUBCUTANEOUS SYRINGE 60 MG/ML | Tier 5 | PA; SP; QL (1 ML per 1 FILL) |
| **Calcimimetic,Parathyroid Calcium Enhancer** | | |
| *cinacalcet oral tablet 30 mg, 60 mg* (Sensipar) | Tier 4 | SP |
| *cinacalcet oral tablet 90 mg* (Sensipar) | Tier 4 | SP; QL (4 EA per 1 day) |
| **Growth Hormone Receptor Antagonists** | | |
| SOMAVERT SUBCUTANEOUS RECON SOLN 10 MG, 15 MG, 20 MG, 25 MG, 30 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Growth Hormone Releasing Hormone (Ghrh) & Analogs** | | |
| EGRIFTA SV SUBCUTANEOUS RECON SOLN 2 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| EGRIFTA WR SUBCUTANEOUS KIT 11.6 MG | Tier 6 | PA; SP; QL (1 EA per 28 days) |
| **Growth Hormones** | | |
| GENOTROPIN MINIQUICK SUBCUTANEOUS SYRINGE 0.2 MG/0.25 ML, 0.4 MG/0.25 ML, 0.6 MG/0.25 ML, 0.8 MG/0.25 ML, 1 MG/0.25 ML, 1.2 MG/0.25 ML, 1.4 MG/0.25 ML, 1.6 MG/0.25 ML, 1.8 MG/0.25 ML, 2 MG/0.25 ML | Tier 5 | PA; SP |
| GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG/ML (36 UNIT/ML), 5 MG/ML (15 UNIT/ML) | Tier 5 | PA; SP |
| NORDITROPIN FLEXPRO SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML) | Tier 5 | PA; SP |
| OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML) | Tier 6 | PA; SP |
| OMNITROPE SUBCUTANEOUS RECON SOLN 5.8 MG | Tier 6 | PA; SP |
| SKYTROFA SUBCUTANEOUS CARTRIDGE 0.7 MG, 1.4 MG, 1.8 MG, 11 MG, 13.3 MG, 2.1 MG, 2.5 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG | Tier 5 | PA; SP |
| SOGROYA SUBCUTANEOUS PEN INJECTOR 10 MG/1.5 ML (6.7 MG/ML), 15 MG/1.5 ML (10 MG/ML), 5 MG/1.5 ML (3.3 MG/ML) | Tier 5 | PA; SP; QL (6 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Hyperparathyroid Tx Agents - Vitamin D Analog-Type** | | | |
| *doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg* | | Tier 1 | |
| *paricalcitol oral capsule 1 mcg, 2 mcg* | (Zemplar) | Tier 1 | |
| *paricalcitol oral capsule 4 mcg* | | Tier 1 | |
| RAYALDEE ORAL CAPSULE,EXTENDED RELEASE 24 HR 30 MCG | | Tier 2 | QL (2 EA per 1 day) |
| **Insulin-Like Growth Factor-1 (Igf-1) Hormones** | | | |
| INCRELEX SUBCUTANEOUS SOLUTION 10 MG/ML | | Tier 6 | PA; SP |
| **Leptin Hormone Analogs** | | | |
| MYALEPT SUBCUTANEOUS RECON SOLN 5 MG/ML (FINAL CONC.) | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Lhrh (Gnrh) Antagonist,Estrogen And Progestin Comb** | | | |
| MYFEMBREE ORAL TABLET 40-1-0.5 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| ORIAHNN ORAL CAPSULE, SEQUENTIAL 300-1-0.5MG(AM) /300 MG(PM) | | Tier 2 | PA; QL (2 EA per 1 day) |
| **Lhrh(Gnrh) Agonist Analog Pituitary Suppressants** | | | |
| SYNAREL NASAL SPRAY,NON-AEROSOL 2 MG/ML | | Tier 6 | PA; SP |
| **Lhrh(Gnrh) Antagonist,Pituitary Suppressant Agents** | | | |
| *cetrorelix subcutaneous kit 0.25 mg* | (Cetrotide) | Tier 4 | SP |
| FYREMADEL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML | (ganirelix) | Tier 4 | SP |
| *ganirelix subcutaneous syringe 250 mcg/0.5 ml* | (Fyremadel) | Tier 4 | SP |
| ORILISSA ORAL TABLET 150 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| ORILISSA ORAL TABLET 200 MG | | Tier 2 | PA; QL (2 EA per 1 day) |
| **Natriuretic Peptides** | | | |
| VOXZOGO SUBCUTANEOUS RECON SOLN 0.4 MG, 0.56 MG, 1.2 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| YUVIWEL SUBCUTANEOUS RECON SOLN 1.3 MG, 2.8 MG | | Tier 6 | PA; SP; QL (1 EA per 28 days) |
| YUVIWEL SUBCUTANEOUS RECON SOLN 5.5 MG | | Tier 6 | PA; SP; QL (2 EA per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Parathyroid Hormones** | | | |
| YORVIPATH SUBCUTANEOUS PEN INJECTOR 168 MCG/0.56 ML | | Tier 6 | PA; SP; QL (1.12 ML per 28 days) |
| YORVIPATH SUBCUTANEOUS PEN INJECTOR 294 MCG/0.98 ML | | Tier 6 | PA; SP; QL (1.96 ML per 28 days) |
| YORVIPATH SUBCUTANEOUS PEN INJECTOR 420 MCG/1.4 ML | | Tier 6 | PA; SP; QL (2.8 ML per 28 days) |
| **Pituitary Suppressive Agents** | | | |
| *cabergoline oral tablet 0.5 mg* | | Tier 1 | |
| CRENESSITY ORAL CAPSULE 100 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| CRENESSITY ORAL CAPSULE 25 MG, 50 MG | | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| CRENESSITY ORAL SOLUTION 50 MG/ML | | Tier 6 | PA; SP; QL (8 ML per 1 day) |
| *danazol oral capsule 100 mg, 200 mg, 50 mg* | | Tier 1 | |
| **Endocrine Disorder - Thyroid** | | | |
| **Antithyroid Preparations** | | | |
| *methimazole oral tablet 10 mg, 5 mg* | | Tier 1 | |
| *propylthiouracil oral tablet 50 mg* | | Tier 1 | |
| **Iodine Containing Agents** | | | |
| LUGOLS ORAL SOLUTION 5 % | | Tier 3 | |
| *potassium iodide oral solution 1 gram/ml* | (SSKI) | Tier 1 | |
| SSKI ORAL SOLUTION 1 GRAM/ML | (potassium iodide) | Tier 1 | |
| STRONG IODINE ORAL SOLUTION 5 % | | Tier 1 | |
| **Thyroid Hormones** | | | |
| AMERITHROID ORAL TABLET 90 MG | (thyroid (pork)) | Tier 1 | |
| EUTHYROX ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG | (levothyroxine) | Tier 1 | |
| *levothyroxine oral capsule 100 mcg, 112 mcg, 125 mcg, 13 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg* | (Tirosint) | Tier 1 | ST: TRIAL OF GENERI LEVOTHYROXINE TABLET IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| *levothyroxine oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg* | (Levo-T) | Tier 1 | |
| LIOMNY ORAL TABLET 25 MCG, 5 MCG, 50 MCG | (liothyronine) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *liothyronine oral tablet 25 mcg, 5 mcg, 50 mcg* | (Liomny) | Tier 1 | |
| THYQUIDITY ORAL SOLUTION 20 MCG/ML | | Tier 3 | PA; QL (20 ML per 1 day) |
| TIROSINT ORAL CAPSULE 37.5 MCG, 44 MCG, 62.5 MCG | | Tier 3 | ST: TRIAL OF GENERI LEVOTHYROXINE TABLET IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML | | Tier 3 | PA; QL (2 ML per 1 day) |
| **Eye - General Disorders** | | | |
| **Eye Antibiotic, Glucocorticoid And Nsaid Comb.** | | | |
| *prednisoln sp-moxiflox-bromfen ophthalmic (eye) drops 1-0.5-0.075 %* | | Tier 1 | |
| *prednisolon-moxiflox-ketorolac ophthalmic (eye) drops 1-0.5-0.5 %* | | Tier 1 | |
| **Eye Antibiotic-Corticoid Combinations** | | | |
| *neomycin-bacitracin-poly-hc ophthalmic (eye) ointment 3.5-400-10,000 mg-unit/g-1%* | | Tier 1 | |
| *neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension 3.5mg/ml-10,000 unit/ml-0.1 %* | (Maxitrol) | Tier 1 | |
| *neomycin-polymyxin b-dexameth ophthalmic (eye) ointment 3.5 mg/g-10,000 unit/g-0.1 %* | | Tier 1 | |
| *neomycin-polymyxin-hc ophthalmic (eye) drops,suspension 3.5-10,000-10 mg-unit-mg/ml* | | Tier 1 | |
| PRED-G S.O.P. OPHTHALMIC (EYE) OINTMENT 0.3-0.6 % | | Tier 3 | |
| TOBRADEX OPHTHALMIC (EYE) OINTMENT 0.3-0.1 % | | Tier 2 | |
| *tobramycin-dexamethasone ophthalmic (eye) drops,suspension 0.3-0.1 %* | | Tier 1 | |
| *tobramycin-lotepred ophthalmic (eye) drops,suspension 0.3-0.5 %* | (Zylet) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Eye Antihistamines** | | | |
| *azelastine ophthalmic (eye) drops 0.05 %* | | Tier 1 | QL (12 ML per 30 days) |
| *epinastine ophthalmic (eye) drops 0.05 %* | | Tier 1 | QL (10 ML per 30 days) |
| *olopatadine ophthalmic (eye) drops 0.1 %* | (Eye Allergy Itch-Redness Rlf) | Tier 1 | |
| *olopatadine ophthalmic (eye) drops 0.2 %* | (Advanced Eye Relief (olopatad)) | Tier 1 | QL (3 ML per 30 days) |
| **Eye Antiinflammatory Agents** | | | |
| *bromfenac ophthalmic (eye) drops 0.07 %* | (Prolensa) | Tier 1 | ST: TRIAL OF GENERIC KETOROLAC OR DICLOFENAC OPHTHALMMIC DROPS IN THE PAST 120 DAYS; QL (3 ML per 16 days) |
| *bromfenac ophthalmic (eye) drops 0.075 %* | (BromSite) | Tier 1 | ST: TRIAL OF GENERIC KETOROLAC OR DICLOFENAC OPHTHALMMIC DROPS IN THE PAST 120 DAYS; QL (5 ML per 16 days) |
| *bromfenac ophthalmic (eye) drops 0.09 %* | | Tier 1 | ST: TRIAL OF GENERIC KETOROLAC OR DICLOFENAC OPHTHALMMIC DROPS IN THE PAST 120 DAYS; QL (3.4 ML per 16 days) |
| *clobetasol ophthalmic (eye) drops,suspension 0.05 %* | (Byqlovi) | Tier 1 | ST: TRIAL OF GENERIC OPHTHALMIC FLUOROMETHOLONE 0.1%, DEXAMETHASONE 0.1%, OR PREDNISOLONE 1% IN THE PAST 120 DAYS; QL (3.5 ML per 14 days) |
| *dexamethasone sodium phosphate ophthalmic (eye) drops 0.1 %* | | Tier 1 | QL (15 ML per 14 days) |
| *diclofenac sodium ophthalmic (eye) drops 0.1 %* | | Tier 1 | QL (10 ML per 14 days) |
| *difluprednate ophthalmic (eye) drops 0.05 %* | (Durezol) | Tier 1 | QL (10 ML per 14 days) |
| EYSUVIS OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 % | | Tier 2 | QL (8.3 ML per 14 days) |
| *fluorometholone ophthalmic (eye) drops,suspension 0.1 %* | (FML Liquifilm) | Tier 1 | QL (10 ML per 14 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *flurbiprofen sodium ophthalmic (eye) drops 0.03 %* | | Tier 1 | |
| *ketorolac ophthalmic (eye) drops 0.4 %* | (Acular LS) | Tier 1 | QL (20 ML per 30 days) |
| *ketorolac ophthalmic (eye) drops 0.5 %* | (Acular) | Tier 1 | QL (20 ML per 30 days) |
| LOTEMAX OPHTHALMIC (EYE) OINTMENT 0.5 % | | Tier 2 | QL (7 GM per 14 days) |
| LOTEMAX SM OPHTHALMIC (EYE) DROPS,GEL 0.38 % | | Tier 2 | QL (10 GM per 14 days) |
| *loteprednol etabonate ophthalmic (eye) drops,gel 0.5 %* | (Lotemax) | Tier 1 | QL (10 GM per 14 days) |
| *loteprednol etabonate ophthalmic (eye) drops,suspension 0.2 %* | | Tier 1 | ST: TRIAL OF GENERIC OPHTHALMIC FLUOROMETHOLONE 0.1%, DEXAMETHASONE 0.1%, OR PREDNISOLONE 1% IN THE PAST 120 DAYS; QL (10 ML per 14 days) |
| *loteprednol etabonate ophthalmic (eye) drops,suspension 0.5 %* | | Tier 1 | QL (20 ML per 14 days) |
| MAXIDEX OPHTHALMIC (EYE) DROPS,SUSPENSION 0.1 % | | Tier 3 | ST: TRIAL OF GENERIC OPHTHALMIC FLUOROMETHOLONE 0.1%, DEXAMETHASONE 0.1%, OR PREDNISOLONE 1% IN THE PAST 120 DAYS; QL (25 ML per 14 days) |
| *prednisolone acetate ophthalmic (eye) drops,suspension 1 %* | (Pred Forte) | Tier 1 | QL (20 ML per 14 days) |
| *prednisolone sod ph-bromfenac ophthalmic (eye) drops 1-0.075 %* | | Tier 1 | |
| *prednisolone sodium phosphate ophthalmic (eye) drops 1 %* | | Tier 1 | QL (20 ML per 14 days) |
| **Eye Antivirals** | | | |
| *trifluridine ophthalmic (eye) drops 1 %* | | Tier 1 | ST: TRIAL OF ORAL ACYCLOVIR, VALACYCLOVIR OR FAMCICLOVIR IN THE PAST 120 DAYS |
| **Eye Local Anesthetics** | | | |
| ALTACAINE OPHTHALMIC (EYE) DROPS 0.5 % | (tetracaine hcl) | Tier 1 | |
| ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS 0.25-0.4 % | (fluorescein-benoxinate) | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| *fluorescein-benoxinate ophthalmic (eye) drops 0.3-0.4 %* | Tier 1 | |
| *fluorescein-proparacaine ophthalmic (eye) drops 0.25-0.5 %* | Tier 1 | |
| *tetracaine hcl (pf) ophthalmic (eye) drops 0.5 %* | Tier 1 | |
| *tetracaine hcl ophthalmic (eye) drops 0.5 %* (Altacaine) | Tier 1 | |
| **Eye Sulfonamides** | | |
| BLEPHAMIDE S.O.P. OPHTHALMIC (EYE) OINTMENT 10-0.2 % | Tier 2 | |
| *sulfacetamide sodium ophthalmic (eye) drops 10 %* | Tier 1 | |
| *sulfacetamide-prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)* | Tier 1 | |
| **Eye Vasoconstrictors (Rx Only)** | | |
| *phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %* | Tier 1 | |
| UPNEEQ (PF) OPHTHALMIC (EYE) DROPPERETTE 0.1 % | Tier 3 | PA |
| **Nicotinic Recept.Partial Agonist, Alpha4beta2 Spec** | | |
| TYRVAYA NASAL SPRAY, METERED, NON-AEROSOL 0.03 MG/SPRAY | Tier 2 | PA; QL (8.4 ML per 1 day) |
| **Ophthalmic (Eye) Antiparasitics** | | |
| XDEMVY OPHTHALMIC (EYE) DROPS 0.25 % | Tier 5 | PA; SP; QL (10 ML per 1 FILL) |
| **Ophthalmic Antibiotics** | | |
| *bacitracin ophthalmic (eye) ointment 500 unit/gram* | Tier 1 | |
| *bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram* | Tier 1 | |
| BESIVANCE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.6 % (besifloxacin) | Tier 2 | |
| CILOXAN OPHTHALMIC (EYE) OINTMENT 0.3 % | Tier 2 | |
| *ciprofloxacin hcl ophthalmic (eye) drops 0.3 %* | Tier 1 | |
| *erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)* | Tier 1 | |
| *gatifloxacin ophthalmic (eye) drops 0.5 %* | Tier 1 | |
| *gentamicin ophthalmic (eye) drops 0.3 %* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *levofloxacin ophthalmic (eye) drops 0.5 %, 1.5 %* | | Tier 1 | |
| *moxifloxacin ophthalmic (eye) drops 0.5 %* | (Vigamox) | Tier 1 | |
| *moxifloxacin ophthalmic (eye) drops, viscous 0.5 %* | | Tier 1 | |
| *neomycin-bacitracin-polymyxin ophthalmic (eye) ointment 3.5-400-10,000 mg-unit-unit/g* | | Tier 1 | |
| *neomycin-polymyxin-gramicidin ophthalmic (eye) drops 1.75 mg-10,000 unit-0.025mg/ml* | | Tier 1 | |
| *ofloxacin ophthalmic (eye) drops 0.3 %* | (Ocuflox) | Tier 1 | |
| *polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml* | | Tier 1 | |
| *tobramycin ophthalmic (eye) drops 0.3 %* | | Tier 1 | |
| TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 % | | Tier 2 | |
| **Ophthalmic Antifungal Agents** | | | |
| NATACYN OPHTHALMIC (EYE) DROPS,SUSPENSION 5 % | | Tier 3 | |
| **Ophthalmic Anti-Inflammatory Immunomodulator-Type** | | | |
| *cyclosporine ophthalmic (eye) dropperette 0.05 %* | (Restasis) | Tier 1 | QL (60 EA per 30 days) |
| RESTASIS OPHTHALMIC (EYE) DROPPERETTE 0.05 % | (cyclosporine) | Tier 1 | QL (60 EA per 30 days) |
| VERKAZIA OPHTHALMIC (EYE) DROPPERETTE 0.1 % | | Tier 3 | PA; QL (4 EA per 1 day) |
| XIIDRA OPHTHALMIC (EYE) DROPPERETTE 5 % | | Tier 2 | QL (60 EA per 30 days) |
| **Ophthalmic Human Nerve Growth Factor (Hngf)** | | | |
| OXERVATE OPHTHALMIC (EYE) DROPS 0.002 % | | Tier 6 | PA; SP |
| **Ophthalmic Mast Cell Stabilizers** | | | |
| *cromolyn ophthalmic (eye) drops 4 %* | | Tier 1 | QL (50 ML per 30 days) |
| **Eye - Glaucoma** | | | |
| **Carbonic Anhydrase Inhibitors** | | | |
| *acetazolamide oral capsule, extended release 500 mg* | | Tier 1 | |
| *acetazolamide oral tablet 125 mg, 250 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *methazolamide oral tablet 25 mg, 50 mg* | | Tier 1 | |
| **Miotics/Other Intraoc. Pressure Reducers** | | | |
| *apraclonidine ophthalmic (eye) drops 0.5 %* | | Tier 1 | |
| *betaxolol ophthalmic (eye) drops 0.5 %* | | Tier 1 | |
| BETOPTIC S OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 % | | Tier 3 | |
| *bimatoprost ophthalmic (eye) drops 0.03 %* | | Tier 1 | QL (2.5 ML per 25 days) |
| *brimonidine ophthalmic (eye) drops 0.1 %, 0.15 %* | (Alphagan P) | Tier 1 | |
| *brimonidine ophthalmic (eye) drops 0.2 %* | | Tier 1 | |
| *brimonidine-dorzolamide ophthalmic (eye) drops 0.1-2 %* | | Tier 1 | |
| *brimonidine-dorzol-bimatoprost ophthalmic (eye) drops 0.1-2-0.01 %* | | Tier 1 | |
| *brimonidine-timolol ophthalmic (eye) drops 0.2-0.5 %* | (Combigan) | Tier 1 | |
| *brinzolamide ophthalmic (eye) drops,suspension 1 %* | (Azopt) | Tier 1 | |
| *carteolol ophthalmic (eye) drops 1 %* | | Tier 1 | |
| *dorzolamide ophthalmic (eye) drops 2 %* | | Tier 1 | |
| *dorzolamide-timolol (pf) ophthalmic (eye) dropperette 2-0.5 %* | (Cosopt (PF)) | Tier 1 | ST: TRIAL OF DORZOLAMIDE/TIMOLOL (NON-COSOPT PF FORMULATION) REQUIRED; QL (2 EA per 1 day) |
| *dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml* | (Cosopt) | Tier 1 | |
| IOPIDINE OPHTHALMIC (EYE) DROPPERETTE 1 % | | Tier 3 | |
| *latanoprost ophthalmic (eye) drops 0.005 %* | (Xalatan) | Tier 1 | |
| *levobunolol ophthalmic (eye) drops 0.5 %* | | Tier 1 | |
| LUMIGAN OPHTHALMIC (EYE) DROPS 0.01 % | (bimatoprost) | Tier 1 | QL (2.5 ML per 25 days) |
| PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 % | | Tier 6 | SP |
| *pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *pilocarpine hcl ophthalmic (eye) drops 1.25 %* | (Vuity) | Tier 1 | QL (10 ML per 30 days) |
| QLOSI OPHTHALMIC (EYE) DROPPERETTE 0.4 % | | Tier 3 | ST: TRIAL OF ONE GENERIC PILOCARPINE OPHTHALMIC SOLUTION IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| *tafluprost (pf) ophthalmic (eye) dropperette 0.0015 %* | (Zioptan (PF)) | Tier 1 | QL (1 EA per 1 day) |
| *timolol maleate (pf) ophthalmic (eye) dropperette 0.25 %, 0.5 %* | (Timoptic Ocudose (PF)) | Tier 1 | QL (2 EA per 1 day) |
| *timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %* | | Tier 1 | |
| *timolol maleate ophthalmic (eye) drops, once daily 0.5 %* | | Tier 1 | |
| *timolol maleate ophthalmic (eye) gel forming solution 0.25 %, 0.5 %* | | Tier 1 | |
| *timolol ophthalmic (eye) drops 0.5 %* | (Betimol) | Tier 1 | |
| *timolol-bimatoprost ophthalmic (eye) drops 0.5-0.01 %* | | Tier 1 | |
| *timolol-brimon-dorzol-bimatop ophthalmic (eye) drops 0.5-0.1-2-0.01 %* | | Tier 1 | |
| *timolol-brimonidine-dorzolamid ophthalmic (eye) drops 0.5-0.1-2 %* | | Tier 1 | |
| *timolol-dorzolamide-bimatopros ophthalmic (eye) drops 0.5-2-0.01 %* | | Tier 1 | |
| *travoprost ophthalmic (eye) drops 0.004 %* | (Travatan Z) | Tier 1 | QL (2.5 ML per 25 days) |
| VIZZ OPHTHALMIC (EYE) DROPPERETTE 1.44 % | | Tier 3 | ST: TRIAL OF ONE GENERIC PILOCARPINE OPHTHALMIC SOLUTION IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| YUVEZZI OPHTHALMIC (EYE) DROPPERETTE 2.75-0.1 % | | Tier 3 | ST: TRIAL OF ONE GENERIC PILOCARPINE OPHTHALMIC SOLUTION IN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| **Mydriatics** | | | |
| *atropine ophthalmic (eye) drops 0.01 %, 0.025 %, 1 %* | | Tier 1 | |
| *atropine sulfate (pf) ophthalmic (eye) dropperette 1 %* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| CYCLOGYL OPHTHALMIC (EYE) DROPS 0.5 % | (cyclopentolate) | Tier 3 | |
| CYCLOMYDRIL OPHTHALMIC (EYE) DROPS 0.2-1 % | | Tier 3 | |
| *cyclopentolate ophthalmic (eye) drops 1 %* | (Cyclogyl) | Tier 1 | |
| *cyclopen-tropic-phenyleph-watr ophthalmic (eye) drops 1-1-2.5 %* | | Tier 1 | |
| *cyclopent-tropic-phen-ketr-wat ophthalmic (eye) drops 1 %-1 %-10 %-0.5 %, 1 %-1 %-2.5 %- 0.5 %* | | Tier 1 | |
| *cyclop-trop-propa-phen-ket-wat ophthalmic (eye) drops 1 %-1 %-0.1 %-2.5 %-0.4 %* | | Tier 1 | |
| HOMATROPAIRE OPHTHALMIC (EYE) DROPS 5 % | (homatropine hbr) | Tier 1 | |
| *phenyleph-tropicamide in water ophthalmic (eye) drops 2.5-1 %* | | Tier 1 | |
| *tropicamide ophthalmic (eye) drops 0.5 %* | | Tier 1 | |
| *tropicamide ophthalmic (eye) drops 1 %* | (Mydriacyl) | Tier 1 | |
| **Ophthalmic Antifibrotic Agents** | | | |
| MITOSOL OPHTHALMIC (EYE) KIT 0.2 MG | | Tier 3 | |
| **Eye - Miscellaneous** | | | |
| **Artificial Tears** | | | |
| MIEBO (PF) OPHTHALMIC (EYE) DROPS 100 % | | Tier 2 | |
| **Ophthalmic Cystine Depleting Agents** | | | |
| CYSTADROPS OPHTHALMIC (EYE) DROPS 0.37 % | | Tier 5 | PA; SP; QL (20 ML per 28 days) |
| CYSTARAN OPHTHALMIC (EYE) DROPS 0.44 % | | Tier 5 | PA; SP; QL (60 ML per 28 days) |
| **Fluid Replacement** | | | |
| **Nucleic Acid/Nucleotide Supplements** | | | |
| XURIDEN ORAL GRANULES IN PACKET 2 GRAM | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| **Gout And Related Diseases** | | | |
| **Colchicine** | | | |
| *colchicine oral capsule 0.6 mg* | (Mitigare) | Tier 1 | QL (2 EA per 1 day) |
| *colchicine oral tablet 0.6 mg* | (Colcrys) | Tier 1 | |
| GLOPERBA ORAL SOLUTION 0.6 MG/5 ML | | Tier 3 | PA; QL (10 ML per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Hyperuricemia Tx - Purine Inhibitors** | | | |
| *allopurinol oral tablet 100 mg* | (Zyloprim) | Tier 1 | |
| *allopurinol oral tablet 300 mg* | | Tier 1 | |
| *febuxostat oral tablet 40 mg, 80 mg* | (Uloric) | Tier 1 | |
| **Uricosuric Agents** | | | |
| *probenecid oral tablet 500 mg* | | Tier 1 | |
| *probenecid-colchicine oral tablet 500-0.5 mg* | | Tier 1 | |
| **Hematological Disorders** | | | |
| **Agents To Tx Thrombotic Thrombocytopenic Purpura** | | | |
| CABLIVI INJECTION KIT 11 MG | | Tier 6 | PA; SP |
| **Anticoagulants,Coumarin Type** | | | |
| JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG | (warfarin) | Tier 1 | |
| *warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg* | | Tier 1 | |
| **Antifibrinolytic Agents** | | | |
| *aminocaproic acid oral solution 250 mg/ml (25 %)* | (Amicar) | Tier 1 | |
| *aminocaproic acid oral tablet 1,000 mg, 500 mg* | (Amicar) | Tier 1 | |
| *tranexamic acid oral tablet 650 mg* | | Tier 1 | |
| **Antihemophilic Factors** | | | |
| ADVATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT | | Tier 5 | SP |
| ADYNOVATE INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT, 750 (+/-) UNIT | | Tier 5 | SP |
| AFSTYLA INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT RANGE, 1,500 (+/-) UNIT RANGE, 2,000 (+/-) UNIT RANGE, 2,500 (+/-) UNIT RANGE, 250 (+/-) UNIT RANGE, 3,000 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE | | Tier 5 | SP |

| Drug | Status | Notes |
|---|---|---|
| ALPHANATE INTRAVENOUS RECON SOLN 1,000 (400 VWF) UNIT/10 ML, 1,500 (600 VWF) UNIT/10 ML, 2,000 (800 VWF) UNIT/10 ML, 250 (100 VWF) UNIT/5 ML, 500 (200 VWF) UNIT/5 ML | Tier 6 | SP |
| ALTUVIIIO INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 4000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| ELOCTATE INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 5,000 UNIT, 500 UNIT, 6,000 UNIT, 750 UNIT | Tier 5 | SP |
| ESPEROCT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| FEIBA NF INTRAVENOUS RECON SOLN 1,750-3,250 UNIT, 350-650 UNIT, 700-1,300 UNIT | Tier 6 | SP |
| HEMOFIL M HIGH INTRAVENOUS RECON SOLN 801-1,500 UNIT | Tier 6 | SP |
| HEMOFIL M LOW INTRAVENOUS RECON SOLN 220-400 UNIT | Tier 6 | SP |
| HEMOFIL M MID INTRAVENOUS RECON SOLN 401-800 UNIT | Tier 6 | SP |
| HEMOFIL M SUPER HIGH INTRAVENOUS RECON SOLN 1,501-2,000 UNIT | Tier 6 | SP |
| HUMATE-P INTRAVENOUS RECON SOLN 1,000-2,400 UNIT, 250-600 UNIT, 500-1,200 UNIT | Tier 6 | SP |
| JIVI INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 4,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| KOATE INTRAVENOUS RECON SOLN 250 (+/-) UNIT, 500 (+/-) UNIT | Tier 6 | SP |
| KOGENATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |

| Drug | Status | Notes |
|---|---|---|
| KOVALTRY INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| NOVOEIGHT INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| NOVOSEVEN RT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 2 MG (2,000 MCG), 5 MG (5,000 MCG), 8 MG (8,000 MCG) | Tier 6 | SP |
| NUWIQ INTRAVENOUS RECON SOLN 1,500 UNIT, 1000 UNIT, 2,000 UNIT, 2,500 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 500 UNIT | Tier 6 | SP |
| OBIZUR INTRAVENOUS RECON SOLN 500 (+/-) UNIT RANGE | Tier 6 | SP |
| RECOMBINATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT | Tier 6 | SP |
| SEVENFACT INTRAVENOUS RECON SOLN 1 MG (1,000 MCG), 2 MG (2,000 MCG), 5 MG (5,000 MCG) | Tier 6 | SP |
| WILATE INTRAVENOUS RECON SOLN 1,000-1,000 UNIT, 500-500 UNIT | Tier 6 | SP |
| XYNTHA INTRAVENOUS SOLUTION 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| XYNTHA SOLOFUSE INTRAVENOUS SYRINGE 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| **Blood Factors,Miscellaneous** | | |
| VONVENDI INTRAVENOUS RECON SOLN 1,300 (+/-) UNIT RANGE, 650 (+/-) UNIT RANGE | Tier 6 | SP |
| **Citrates As Anticoagulants** | | |
| *sodium citrate in 0.9 % nacl solution 0.5 %* | Tier 1 | |
| *sodium citrate intra-catheter syringe 4 % (5 ml)* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Direct Factor Xa Inhibitors** | | | |
| ELIQUIS DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 5 MG (74 TABS) | | Tier 2 | QL (74 EA per 30 days) |
| ELIQUIS ORAL TABLET 2.5 MG | | Tier 2 | QL (2 EA per 1 day) |
| ELIQUIS ORAL TABLET 5 MG | | Tier 2 | QL (74 EA per 30 days) |
| ELIQUIS ORAL TABLET FOR SUSPENSION 0.5 MG, 1.5 MG (0.5 MG X 3), 2 MG (0.5 MG X 4) | | Tier 2 | QL (32 EA per 1 day) |
| ELIQUIS SPRINKLE ORAL CAPSULE, SPRINKLE 0.15 MG | | Tier 2 | QL (4 EA per 1 day) |
| *rivaroxaban oral suspension for reconstitution 1 mg/ml* | (Xarelto) | Tier 1 | QL (20 ML per 1 day) |
| *rivaroxaban oral tablet 2.5 mg* | (Xarelto) | Tier 1 | QL (2 EA per 1 day) |
| XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9) | | Tier 2 | QL (51 EA per 30 days) |
| XARELTO ORAL SUSPENSION FOR RECONSTITUTION 1 MG/ML | (rivaroxaban) | Tier 2 | QL (20 ML per 1 day) |
| XARELTO ORAL TABLET 10 MG, 20 MG | (rivaroxaban) | Tier 2 | QL (1 EA per 1 day) |
| XARELTO ORAL TABLET 15 MG, 2.5 MG | (rivaroxaban) | Tier 2 | QL (2 EA per 1 day) |
| **Factor Ix Complex (Pcc) Preparations** | | | |
| PROFILNINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT | | Tier 6 | SP |
| **Factor Ix Preparations** | | | |
| ALPHANINE SD INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 500 (+/-) UNIT | | Tier 6 | SP |
| ALPROLIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 4,000 UNIT, 500 UNIT | | Tier 5 | SP |
| BENEFIX INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT | | Tier 5 | SP |
| IDELVION INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 250 (+/-) UNIT, 3,500 (+/-) UNIT, 500 (+/-) UNIT | | Tier 5 | SP |

| Drug | Status | Notes |
|---|---|---|
| IXINITY INTRAVENOUS RECON SOLN 1,000 UNIT, 1,500 UNIT, 3,000 UNIT, 500 UNIT | Tier 6 | SP |
| REBINYN INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 2,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT | Tier 5 | SP |
| RIXUBIS INTRAVENOUS RECON SOLN 1,000 UNIT, 2,000 UNIT, 250 UNIT, 3,000 UNIT, 500 UNIT | Tier 6 | SP |
| **Factor X Preparations** | | |
| COAGADEX INTRAVENOUS RECON SOLN 250 (+/-) UNIT RANGE, 500 (+/-) UNIT RANGE | Tier 6 | SP |
| **Factor Xiii Preparations** | | |
| CORIFACT INTRAVENOUS RECON SOLN 1,000-1,600 UNIT | Tier 6 | SP |
| TRETTEN INTRAVENOUS RECON SOLN 2,500 UNIT | Tier 6 | SP |
| **Hematinics,Other** | | |
| RETACRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML | Tier 5 | PA; SP; QL (12 ML per 28 days) |
| RETACRIT INJECTION SOLUTION 40,000 UNIT/ML | Tier 5 | PA; SP; QL (4 ML per 28 days) |
| **Hemophilia Treatment Agents,Non-Factor Replacement** | | |
| ALHEMO PEN SUBCUTANEOUS PEN INJECTOR 150 MG/1.5 ML (100 MG/ML), 300 MG/3 ML (100 MG/ML), 60 MG/1.5 ML (40 MG/ML) | Tier 6 | PA; SP |
| HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7 ML, 12 MG/0.4 ML, 150 MG/ML, 30 MG/ML, 300 MG/2 ML (150 MG/ML), 60 MG/0.4 ML | Tier 6 | PA; SP |
| HYMPAVZI PEN SUBCUTANEOUS PEN INJECTOR 150 MG/ML | Tier 6 | PA; SP; QL (8 ML per 28 days) |
| HYMPAVZI PEN SUBCUTANEOUS PEN INJECTOR 75 MG/0.5 ML | Tier 6 | PA; SP; QL (2.5 ML per 28 days) |
| QFITLIA PEN SUBCUTANEOUS PEN INJECTOR 50 MG/0.5 ML | Tier 6 | PA; SP |
| QFITLIA SUBCUTANEOUS SOLUTION 20 MG/0.2 ML | Tier 6 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Hemorrheologic Agents** | | | |
| *pentoxifylline oral tablet extended release 400 mg* | | Tier 1 | |
| **Heparin And Related Preparations** | | | |
| *enoxaparin subcutaneous solution 300 mg/3 ml* | (Lovenox) | Tier 1 | QL (30 ML per 30 days) |
| *enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml* | (Lovenox) | Tier 1 | |
| *fondaparinux subcutaneous syringe 10 mg/0.8 ml* | (Arixtra) | Tier 1 | QL (24 ML per 30 days) |
| *fondaparinux subcutaneous syringe 2.5 mg/0.5 ml* | (Arixtra) | Tier 1 | QL (15 ML per 30 days) |
| *fondaparinux subcutaneous syringe 5 mg/0.4 ml* | (Arixtra) | Tier 1 | QL (12 ML per 30 days) |
| *fondaparinux subcutaneous syringe 7.5 mg/0.6 ml* | (Arixtra) | Tier 1 | QL (18 ML per 30 days) |
| *heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml* | | Tier 1 | |
| *heparin (porcine) injection syringe 5,000 unit/ml* | | Tier 1 | |
| HEPARIN LOCKFLUSH(PORCINE)(PF) INTRAVENOUS SYRINGE 10 UNIT/ML, 100 UNIT/ML | (heparin, porcine (pf)) | Tier 1 | |
| *heparin, porcine (pf) injection solution 1,000 unit/ml* | | Tier 1 | |
| *heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml, 5,000 unit/ml* | | Tier 1 | |
| *heparin, porcine (pf) intravenous syringe 1 unit/ml* | | Tier 1 | |
| *heparin, porcine (pf) intravenous syringe 10 unit/ml, 100 unit/ml* | (Heparin LockFlush(Porcine)(PF)) | Tier 1 | |
| **Human Monoclonal Antibody Complement(C5) Inhibitor** | | | |
| EMPAVELI SUBCUTANEOUS SOLUTION 1,080 MG/20 ML | | Tier 6 | PA; SP |
| FABHALTA ORAL CAPSULE 200 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| TAVNEOS ORAL CAPSULE 10 MG | | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| VOYDEYA ORAL TABLET 100 MG, 150 MG (50 MG X 1-100 MG X 1) | | Tier 6 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| ZILBRYSQ SUBCUTANEOUS SYRINGE 16.6 MG/0.416 ML | | Tier 6 | PA; SP; QL (0.416 ML per 1 day) |
| ZILBRYSQ SUBCUTANEOUS SYRINGE 23 MG/0.574 ML | | Tier 6 | PA; SP; QL (0.574 ML per 1 day) |
| ZILBRYSQ SUBCUTANEOUS SYRINGE 32.4 MG/0.81 ML | | Tier 6 | PA; SP; QL (0.81 ML per 1 day) |
| **Hypoxia Inducible Factor Prolyl Hydroxylase Inh.** | | | |
| VAFSEO ORAL TABLET 150 MG | | Tier 3 | PA; QL (4 EA per 1 day) |
| VAFSEO ORAL TABLET 300 MG | | Tier 3 | PA; QL (2 EA per 1 day) |
| **Leukocyte (Wbc) Stimulants** | | | |
| FULPHILA SUBCUTANEOUS SYRINGE 6 MG/0.6 ML | | Tier 5 | PA; SP |
| LEUKINE INJECTION RECON SOLN 250 MCG | | Tier 6 | PA; SP |
| NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML | | Tier 5 | PA; SP |
| NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML | | Tier 5 | PA; SP |
| UDENYCA ONBODY SUBCUTANEOUS SYRINGE, W/ WEARABLE INJECTOR 6 MG/0.6 ML | | Tier 6 | PA; SP |
| **Plasma Proteins** | | | |
| RYPLAZIM INTRAVENOUS RECON SOLN 68.8 MG | | Tier 6 | PA; SP |
| **Platelet Aggregation Inhibitors** | | | |
| ADULT ASPIRIN REGIMEN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG | (aspirin) | ACA Tier | |
| ADULT LOW DOSE ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG | (aspirin) | ACA Tier | |
| ASPIRIN CHILDRENS ORAL TABLET,CHEWABLE 81 MG | (aspirin) | ACA Tier | |
| *aspirin oral tablet,chewable 81 mg* | (Aspirin Childrens) | ACA Tier | |
| *aspirin oral tablet,delayed release (dr/ec) 81 mg* | (Adult Aspirin Regimen) | ACA Tier | |
| *aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg* | | Tier 1 | |
| BAYER LOW DOSE ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG | (aspirin) | ACA Tier | |

| Drug | | Status | Notes |
|---|---|---|---|
| CHILDREN'S ASPIRIN ORAL TABLET,CHEWABLE 81 MG | (aspirin) | ACA Tier | |
| *cilostazol oral tablet 100 mg, 50 mg* | | Tier 1 | |
| *clopidogrel oral tablet 300 mg* | | Tier 1 | QL (1 EA per 1 FILL) |
| *clopidogrel oral tablet 75 mg* | (Plavix) | Tier 1 | |
| *dipyridamole oral tablet 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *prasugrel hcl oral tablet 10 mg, 5 mg* | (Effient) | Tier 1 | |
| ST JOSEPH ASPIRIN ORAL TABLET,CHEWABLE 81 MG | (aspirin) | ACA Tier | |
| ST. JOSEPH ASPIRIN ORAL TABLET,DELAYED RELEASE (DR/EC) 81 MG | (aspirin) | ACA Tier | |
| *ticagrelor oral tablet 60 mg* | (Brilinta) | Tier 1 | QL (2 EA per 1 day) |
| *ticagrelor oral tablet 90 mg* | (Brilinta) | Tier 1 | |
| ZONTIVITY ORAL TABLET 2.08 MG | | Tier 3 | QL (1 EA per 1 day) |
| **Platelet Reducing Agents** | | | |
| *anagrelide oral capsule 0.5 mg* | (Agrylin) | Tier 1 | |
| *anagrelide oral capsule 1 mg* | | Tier 1 | |
| **Pyruvate Kinase Activators** | | | |
| AQVESME ORAL TABLET 100 MG | | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG | | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| PYRUKYND ORAL TABLETS,DOSE PACK 20 MG (7)- 5 MG (7), 50 MG (7)-20 MG (7) | | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| **Sickle Cell Anemia Agents** | | | |
| DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG | | Tier 3 | PA |
| ENDARI ORAL POWDER IN PACKET 5 GRAM | (glutamine (sickle cell)) | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| *glutamine (sickle cell) oral powder in packet 5 gram* | (Endari) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| SIKLOS ORAL TABLET 1,000 MG, 100 MG | | Tier 3 | PA |
| XROMI ORAL SOLUTION 100 MG/ML | | Tier 3 | PA |
| **Spleen Tyrosine Kinase Inhibitors** | | | |
| TAVALISSE ORAL TABLET 100 MG, 150 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| **Thrombin Inhibitors,Selective,Direct, & Reversible** | | |
| *dabigatran etexilate oral capsule 110 mg, 150 mg, 75 mg* (Pradaxa) | Tier 1 | QL (2 EA per 1 day) |
| **Thrombopoietin Receptor Agonists** | | |
| ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG | Tier 5 | PA; SP |
| DOPTELET (10 TAB PACK) ORAL TABLET 20 MG | Tier 5 | PA; SP |
| DOPTELET (15 TAB PACK) ORAL TABLET 20 MG | Tier 5 | PA; SP |
| DOPTELET (30 TAB PACK) ORAL TABLET 20 MG | Tier 5 | PA; SP |
| DOPTELET SPRINKLE ORAL CAPSULE, SPRINKLE 10 MG | Tier 5 | PA; SP |
| *eltrombopag olamine oral powder in packet 12.5 mg, 25 mg* (Promacta) | Tier 4 | PA; SP |
| *eltrombopag olamine oral tablet 12.5 mg, 25 mg, 50 mg, 75 mg* (Promacta) | Tier 4 | PA; SP |
| MULPLETA ORAL TABLET 3 MG | Tier 6 | PA; SP; QL (7 EA per 1 FILL) |
| **Topical Hemostatics** | | |
| AVITENE FLOUR TOPICAL POWDER | Tier 3 | |
| AVITENE TOPICAL POWDER IN PACKET | Tier 3 | |
| AVITENE TOPICAL SHEET 35 X 35 MM, 70 X 35 MM, 70 X 70 MM | Tier 3 | |
| ENDO AVITENE TOPICAL SHEET 10 MM, 5 MM | Tier 3 | |
| EVICEL TOPICAL SOLUTION 800-1,200 UNIT /ML(5 ML X 2) | Tier 3 | |
| MONSEL'S TOPICAL SOLUTION 0.2 TO 0.22 GRAM/ML IRON | Tier 3 | |
| MONSEL'S TOPICAL SOLUTION WITH APPLICATOR 0.2 TO 0.22 GRAM/ML | Tier 1 | |
| SYRINGE AVITENE TOPICAL POWDER | Tier 3 | |
| ULTRAFOAM TOPICAL SPONGE 2 X 6.25 X 7 CM-CM-MM, 8 X 12.5 X 1 CM, 8 X 12.5 X 3 CM-CM-MM, 8 X 6.25 X 1 CM | Tier 3 | |
| **Vitamin K Preparations** | | |
| *phytonadione (vitamin k1) oral tablet 5 mg* | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Hormonal Deficiency** | | | |
| **Androgenic Agents** | | | |
| JATENZO ORAL CAPSULE 158 MG, 198 MG | | Tier 3 | PA; QL (4 EA per 1 day) |
| JATENZO ORAL CAPSULE 237 MG | | Tier 3 | PA; QL (2 EA per 1 day) |
| KYZATREX ORAL CAPSULE 150 MG, 200 MG | | Tier 3 | PA; QL (4 EA per 1 day) |
| METHITEST ORAL TABLET 10 MG | (methyltestosterone) | Tier 3 | PA |
| *methyltestosterone oral capsule 10 mg* | | Tier 1 | PA |
| *testosterone cypionate intramuscular oil 100 mg/ml, 200 mg/ml* | (Depo-Testosterone) | Tier 1 | PA; QL (10 ML per 28 days) |
| *testosterone enanthate intramuscular oil 200 mg/ml* | | Tier 1 | PA; QL (5 ML per 28 days) |
| *testosterone transdermal gel 50 mg/5 gram (1 %)* | (Testim) | Tier 1 | PA; QL (10 GM per 1 day) |
| *testosterone transdermal gel in metered-dose pump 10 mg/0.5 gram /actuation* | | Tier 1 | PA; QL (4 GM per 1 day) |
| *testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)* | (Vogelxo) | Tier 1 | PA; QL (10 GM per 1 day) |
| *testosterone transdermal gel in metered-dose pump 20.25 mg/1.25 gram (1.62 %)* | (AndroGel) | Tier 1 | PA; QL (5 GM per 1 day) |
| *testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1.62 % (40.5 mg/2.5 gram)* | | Tier 1 | PA; QL (5 GM per 1 day) |
| *testosterone transdermal gel in packet 1 % (50 mg/5 gram)* | (Vogelxo) | Tier 1 | PA; QL (10 GM per 1 day) |
| *testosterone transdermal gel in packet 1.62 % (20.25 mg/1.25 gram)* | | Tier 1 | PA; QL (1.25 GM per 1 day) |
| *testosterone transdermal solution in metered pump w/app 30 mg/actuation (1.5 ml)* | | Tier 1 | PA; QL (6 ML per 1 day) |
| TLANDO ORAL CAPSULE 112.5 MG | | Tier 3 | PA; QL (4 EA per 1 day) |
| XYOSTED SUBCUTANEOUS AUTO-INJECTOR 100 MG/0.5 ML, 50 MG/0.5 ML, 75 MG/0.5 ML | | Tier 2 | PA; QL (2 ML per 28 days) |
| **Estrogen & Progestin With Antimineralocorticoid Cb** | | | |
| ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG | | Tier 3 | |
| **Estrogen & Selective Estrogen Recept Mod(Serm)Comb** | | | |
| DUAVEE ORAL TABLET 0.45-20 MG | | Tier 2 | QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Estrogen And Progestin Combinations** | | | |
| BIJUVA ORAL CAPSULE 0.5-100 MG | | Tier 2 | QL (1 EA per 1 day) |
| BIJUVA ORAL CAPSULE 1-100 MG | | Tier 2 | QL (30 EA per 30 days) |
| **Estrogen/Androgen Combinations** | | | |
| COVARYX H.S. ORAL TABLET 0.625-1.25 MG | (estrogens-methyltestosterone) | Tier 1 | |
| COVARYX ORAL TABLET 1.25-2.5 MG | (estrogens-methyltestosterone) | Tier 1 | |
| EEMT HS ORAL TABLET 0.625-1.25 MG | (estrogens-methyltestosterone) | Tier 1 | |
| EEMT ORAL TABLET 1.25-2.5 MG | (estrogens-methyltestosterone) | Tier 1 | |
| *estrogens-methyltestosterone oral tablet 0.625-1.25 mg* | (Covaryx H.S.) | Tier 1 | |
| *estrogens-methyltestosterone oral tablet 1.25-2.5 mg* | (Covaryx) | Tier 1 | |
| **Estrogenic Agents** | | | |
| ABIGALE LO ORAL TABLET 0.5-0.1 MG | (estradiol-norethindrone acet) | Tier 1 | |
| ABIGALE ORAL TABLET 1-0.5 MG | (estradiol-norethindrone acet) | Tier 1 | |
| COMBIPATCH TRANSDERMAL PATCH SEMIWEEKLY 0.05-0.14 MG/24 HR, 0.05-0.25 MG/24 HR | | Tier 2 | QL (2 EA per 7 days) |
| *conjugated estrogens oral tablet 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg* | (Premarin) | Tier 1 | |
| DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML | (estradiol cypionate) | Tier 3 | |
| DOTTI TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR | (estradiol) | Tier 1 | QL (2 EA per 7 days) |
| ELESTRIN TRANSDERMAL GEL IN METERED-DOSE PUMP 0.87 GRAM/ACTUATION | | Tier 3 | ST: TRIAL OF GENERIC CLIMARA, MINIVELLE, OR VIVELLE-DOT IN THE PAST 120 DAYS; QL (52 GM per 30 days) |
| *estradiol oral tablet 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *estradiol transdermal gel in metered-dose pump 1.25 gram/actuation* | (EstroGel) | Tier 1 | QL (37.5 GM per 30 days) |
| *estradiol transdermal gel in packet 0.25 mg/0.25 gram (0.1 %), 0.5 mg/0.5 gram (0.1 %), 0.75 mg/0.75 gram (0.1%)* | (Divigel) | Tier 1 | QL (30 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *estradiol transdermal gel in packet 1 mg/gram (0.1 %)* | (Divigel) | Tier 1 | QL (30 GM per 30 days) |
| *estradiol transdermal gel in packet 1.25 mg/1.25 gram (0.1 %)* | (Divigel) | Tier 1 | QL (37.5 GM per 30 days) |
| *estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr* | (Dotti) | Tier 1 | QL (2 EA per 7 days) |
| *estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr* | (Climara) | Tier 1 | QL (1 EA per 7 days) |
| *estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml* | (Delestrogen) | Tier 1 | |
| *estradiol valerate intramuscular oil 40 mg/ml* | | Tier 1 | |
| *estradiol-norethindrone acet oral tablet 0.5-0.1 mg* | (Abigale Lo) | Tier 1 | |
| *estradiol-norethindrone acet oral tablet 1-0.5 mg* | (Abigale) | Tier 1 | |
| FYAVOLV ORAL TABLET 0.5-2.5 MG-MCG, 1-5 MG-MCG | (norethindrone ac-eth estradiol) | Tier 1 | |
| JINTELI ORAL TABLET 1-5 MG-MCG | (norethindrone ac-eth estradiol) | Tier 1 | |
| LYLLANA TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR | (estradiol) | Tier 1 | QL (2 EA per 7 days) |
| MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24 HR | | Tier 3 | QL (1 EA per 7 days) |
| MIMVEY ORAL TABLET 1-0.5 MG | (estradiol-norethindrone acet) | Tier 1 | |
| *norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg* | (Fyavolv) | Tier 1 | |
| PREMPHASE ORAL TABLET 0.625 MG (14)/ 0.625MG-5MG(14) | | Tier 2 | QL (1 EA per 1 day) |
| PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG | | Tier 2 | QL (1 EA per 1 day) |
| **Menopausal Symptoms Suppressant - Ssris** | | | |
| *paroxetine mesylate(menop.sym) oral capsule 7.5 mg* | | Tier 1 | ST: TRIAL OF PAROXETINE HCL OR VENLAFAXINE REQUIRED; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Menopausal Symptoms Suppressant-Nk3 Receptor Antag** | | | |
| VEOZAH ORAL TABLET 45 MG | | Tier 3 | QL (1 EA per 1 day) |
| **Progestational Agents** | | | |
| CRINONE VAGINAL GEL 4 % | | Tier 2 | |
| GALLIFREY ORAL TABLET 5 MG | (norethindrone acetate) | Tier 1 | |
| *medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg* | (Provera) | Tier 1 | |
| *norethindrone acetate oral tablet 5 mg* | (Gallifrey) | Tier 1 | |
| *progesterone intramuscular oil 50 mg/ml* | | Tier 1 | |
| *progesterone micronized oral capsule 100 mg, 200 mg* | (Prometrium) | Tier 1 | |
| **Immunization** | | | |
| **Antisera** | | | |
| GAMMAGARD LIQUID ERC INJECTION SOLUTION 10 % | | Tier 5 | PA; SP |
| GAMMAGARD LIQUID INJECTION SOLUTION 10 % | | Tier 5 | PA; SP |
| GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %) | | Tier 6 | PA; SP |
| GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %) | | Tier 5 | PA; SP |
| HIZENTRA SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %) | | Tier 6 | PA; SP |
| HIZENTRA SUBCUTANEOUS SYRINGE 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %) | | Tier 6 | PA; SP |
| HYQVIA SUBCUTANEOUS SOLUTION 10 GRAM /100 ML (10 %), 2.5 GRAM /25 ML (10 %), 20 GRAM /200 ML (10 %), 30 GRAM /300 ML (10 %), 5 GRAM /50 ML (10 %) | | Tier 6 | PA; SP |
| XEMBIFY SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %) | | Tier 5 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| **Covid-19 Vaccines** | | |
| COMIRNATY 2026-2027(5-11Y)(PF) INTRAMUSCULAR SUSPENSION 10 MCG/0.3 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| COMIRNATY 2026-27 (12Y UP)(PF) INTRAMUSCULAR SYRINGE 30 MCG/0.3 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| MNEXSPIKE 2026-2027 (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.2 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| NUVAXOVID 2026-2027 (PF) INTRAMUSCULAR SYRINGE 5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| SPIKEVAX 2026-2027(12Y UP)(PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| SPIKEVAX 2026-27 (6M-11Y) (PF) INTRAMUSCULAR SYRINGE 25 MCG/0.25 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Enteric Virus Vaccines** | | |
| IPOL INJECTION SUSPENSION 40-8-32 UNIT/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ROTARIX ORAL SUSPENSION 10EXP6 CCID50 /1.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ROTATEQ VACCINE ORAL SOLUTION 2 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Gram Negative Cocci Vaccines** | | |
| BEXSERO INTRAMUSCULAR SYRINGE 50-50-50-25 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | Status | Notes |
|---|---|---|
| MENQUADFI (PF) INTRAMUSCULAR SOLUTION 10 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR KIT 10-5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| MENVEO A-C-Y-W-135-DIP (PF) INTRAMUSCULAR SOLUTION 10-5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PENBRAYA (PF) INTRAMUSCULAR KIT 5-120 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PENMENVY MEN A-B-C-W-Y (PF) INTRAMUSCULAR KIT 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| TRUMENBA INTRAMUSCULAR SYRINGE 120 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Gram Positive Cocci Vaccines** | | |
| CAPVAXIVE (PF) INTRAMUSCULAR SYRINGE 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PNEUMOVAX-23 INJECTION SYRINGE 25 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PREVNAR 20 (PF) INTRAMUSCULAR SYRINGE 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| VAXNEUVANCE (PF) INTRAMUSCULAR SYRINGE 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Influenza Virus Vaccines** | | |
| FLUAD 2026-2027 (65 YR UP)(PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | Status | Notes |
|---|---|---|
| FLUARIX 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUBLOK 2026-2027 (PF) INTRAMUSCULAR SYRINGE 135 MCG (45 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUCELVAX 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLULAVAL 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUMIST 2026-2027 NASAL NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUMIST HOME 2026-2027 NASAL (HOME ADMIN) NASAL SPRAY SYRINGE 10EXP6.5-7.5 FF UNIT/0.2 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUZONE 2026-2027 (PF) INTRAMUSCULAR SYRINGE 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUZONE 2026-2027 INTRAMUSCULAR SUSPENSION 45 MCG (15 MCG X 3)/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| FLUZONE HIGH-DOSE 2026-27 (PF) INTRAMUSCULAR SYRINGE 180 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Vaccine/Toxoid Preparations,Combinations** | | |
| ACTHIB (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SUSPENSION 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | Status | Notes |
|---|---|---|
| ADACEL(TDAP ADOLESN/ADULT)(PF) INTRAMUSCULAR SYRINGE 2 LF-(2.5-5-3-5 MCG)-5LF/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| BOOSTRIX TDAP INTRAMUSCULAR SYRINGE 2.5-8-5 LF-MCG-LF/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| DAPTACEL (DTAP PEDIATRIC) (PF) INTRAMUSCULAR SUSPENSION 15-10-5 LF-MCG-LF/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| HIBERIX (PF) INTRAMUSCULAR RECON SOLN 10 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| INFANRIX (DTAP) (PF) INTRAMUSCULAR SYRINGE 25-58-10 LF-MCG-LF/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| KINRIX (PF) INTRAMUSCULAR SYRINGE 25 LF-58 MCG-10 LF/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| M-M-R II (PF) SUBCUTANEOUS RECON SOLN 1,000-12,500 TCID50/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PEDVAX HIB (PF) INTRAMUSCULAR SOLUTION 7.5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PENTACEL (PF) INTRAMUSCULAR KIT 15LF-20MCG-5LF- 62 DU/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PRIORIX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3.4-4.2- 3.3CCID50/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PROQUAD (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 10EXP3-4.3-3- 3.99 TCID50/0.5 | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | Status | Notes |
|---|---|---|
| QUADRACEL (PF) INTRAMUSCULAR SUSPENSION 15 LF-48 MCG- 5 LF UNIT/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| QUADRACEL (PF) INTRAMUSCULAR SYRINGE 15 LF-48 MCG- 5 LF UNIT/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| TENIVAC (PF) INTRAMUSCULAR SUSPENSION 5 LF UNIT- 2 LF UNIT/0.5ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| TENIVAC (PF) INTRAMUSCULAR SYRINGE 5-2 LF UNIT/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| VAXELIS (PF) INTRAMUSCULAR SYRINGE 15 UNIT-5 UNIT- 10 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Viral/Tumorigenic Vaccines** | | |
| ABRYSVO (PF) INTRAMUSCULAR RECON SOLN 120 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| AREXVY (PF) INTRAMUSCULAR SUSPENSION FOR RECONSTITUTION 120 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ENGERIX-B (PF) INTRAMUSCULAR SUSPENSION 20 MCG/ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ENGERIX-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| ENGERIX-B PEDIATRIC (PF) INTRAMUSCULAR SYRINGE 10 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| GARDASIL 9 (PF) INTRAMUSCULAR SUSPENSION 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | Status | Notes |
|---|---|---|
| GARDASIL 9 (PF) INTRAMUSCULAR SYRINGE 0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| HAVRIX (PF) INTRAMUSCULAR SYRINGE 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| HEPLISAV-B (PF) INTRAMUSCULAR SYRINGE 20 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| MRESVIA (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| PEDIARIX (PF) INTRAMUSCULAR SYRINGE 10 MCG-25LF-25 MCG-10LF/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| RECOMBIVAX HB (PF) INTRAMUSCULAR SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| RECOMBIVAX HB (PF) INTRAMUSCULAR SYRINGE 10 MCG/ML, 5 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| SHINGRIX (PF) INTRAMUSCULAR SYRINGE 50 MCG/0.5 ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| TWINRIX (PF) INTRAMUSCULAR SYRINGE 720 ELISA UNIT- 20 MCG/ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| VAQTA (PF) INTRAMUSCULAR SUSPENSION 25 UNIT/0.5 ML, 50 UNIT/ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| VAQTA (PF) INTRAMUSCULAR SYRINGE 25 UNIT/0.5 ML, 50 UNIT/ML | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |

| Drug | | Status | Notes |
|---|---|---|---|
| VARIVAX (PF) SUBCUTANEOUS SUSPENSION FOR RECONSTITUTION 1,350 UNIT/0.5 ML | | ACA Tier | $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Immunosuppression/Modulation** | | | |
| **Immunomodulators** | | | |
| ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5 ML | | Tier 6 | PA; SP |
| BESREMI PEN SUBCUTANEOUS PEN INJECTOR 500 MCG/0.5 ML | | Tier 6 | PA; SP; QL (1 ML per 28 days) |
| BESREMI SUBCUTANEOUS SYRINGE 500 MCG/ML | | Tier 6 | PA; SP; QL (2 ML per 28 days) |
| *imiquimod topical cream in packet 5 %* | | Tier 1 | |
| KAZURI TOPICAL GEL 5-0.05-1 % | (imiquimod-tretinoin-levocetir) | Tier 3 | |
| KERIDA TOPICAL GEL 5-0.1-30 % | | Tier 3 | |
| KYNARA TOPICAL GEL 5-1-2 % | (imiquimod-levocetirizin-niacin) | Tier 3 | |
| QUIDROXZAR TOPICAL GEL 5-0.1-30 % | | Tier 3 | |
| QUIHOXAXIA TOPICAL GEL 5-1-2 % | (imiquimod-levocetirizin-niacin) | Tier 3 | |
| QUIHOXVAR TOPICAL GEL 5-0.05-1 % | (imiquimod-tretinoin-levocetir) | Tier 3 | |
| **Immunosuppressant-Interferon Gamma Inhibitor, Mab** | | | |
| SAPHNELO PEN SUBCUTANEOUS AUTO-INJECTOR 120 MG/0.8 ML | | Tier 5 | PA; SP; QL (3.2 ML per 28 days) |
| SAPHNELO SUBCUTANEOUS SYRINGE 120 MG/0.8 ML | | Tier 5 | PA; SP; QL (3.2 ML per 28 days) |
| **Immunosuppressives** | | | |
| *azathioprine oral tablet 100 mg, 75 mg* | (Azasan) | Tier 1 | |
| *azathioprine oral tablet 50 mg* | (Imuran) | Tier 1 | |
| *cyclosporine modified oral capsule 100 mg, 25 mg* | (Gengraf) | Tier 1 | |
| *cyclosporine modified oral capsule 50 mg* | | Tier 1 | |
| *cyclosporine modified oral solution 100 mg/ml* | (Neoral) | Tier 1 | |
| *cyclosporine oral capsule 100 mg, 25 mg* | (Sandimmune) | Tier 1 | |
| *everolimus (immunosuppressive) oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg* | (Zortress) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| GENGRAF ORAL CAPSULE 100 MG, 25 MG | (cyclosporine modified) | Tier 1 | |
| LUPKYNIS ORAL CAPSULE 7.9 MG | | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| *mycophenolate mofetil oral capsule 250 mg* | (CellCept) | Tier 1 | |
| *mycophenolate mofetil oral suspension for reconstitution 200 mg/ml* | (CellCept) | Tier 1 | |
| *mycophenolate mofetil oral tablet 500 mg* | (CellCept) | Tier 1 | |
| *mycophenolate sodium oral tablet,delayed release (dr/ec) 180 mg, 360 mg* | (Myfortic) | Tier 1 | |
| MYHIBBIN ORAL SUSPENSION 200 MG/ML | | Tier 3 | PA; QL (15 ML per 1 day) |
| NEORAL ORAL CAPSULE 100 MG, 25 MG | (cyclosporine modified) | Tier 3 | |
| NEORAL ORAL SOLUTION 100 MG/ML | (cyclosporine modified) | Tier 3 | |
| PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG | (tacrolimus) | Tier 3 | |
| PROGRAF ORAL GRANULES IN PACKET 0.2 MG, 1 MG | | Tier 2 | |
| SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG | (cyclosporine) | Tier 3 | |
| *sirolimus oral solution 1 mg/ml* | | Tier 1 | |
| *sirolimus oral tablet 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg* | (Prograf) | Tier 1 | |
| *tacrolimus oral capsule,extended release 24hr 0.5 mg, 1 mg, 5 mg* | (Astagraf XL) | Tier 1 | ST: TRIAL OF GENERIC TACROLIMUS IN THE PAST 120 DAYS |
| **Rho Kinase Inhibitor** | | | |
| REZUROCK ORAL TABLET 200 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Infectious Disease - Bacterial** | | | |
| **Absorbable Sulfonamides** | | | |
| *sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml* | (Sulfatrim) | Tier 1 | |
| *sulfamethoxazole-trimethoprim oral tablet 400-80 mg* | (Bactrim) | Tier 1 | |
| *sulfamethoxazole-trimethoprim oral tablet 800-160 mg* | (Bactrim DS) | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| SULFATRIM ORAL SUSPENSION 200-40 MG/5 ML (sulfamethoxazole-trimethoprim) | Tier 1 | |
| **Betalactams** | | |
| CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML | Tier 6 | PA; SP; QL (84 ML per 56 days) |
| **Carbapenems (Thienamycins)** | | |
| ORLYNVAH ORAL TABLET 500-500 MG | Tier 3 | PA; QL (2 EA per 1 day) |
| **Cephalosporins - 1St Generation** | | |
| *cefadroxil oral capsule 500 mg* | Tier 1 | |
| *cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml* | Tier 1 | |
| *cefadroxil oral tablet 1 gram* | Tier 1 | |
| *cephalexin oral capsule 250 mg, 500 mg, 750 mg* | Tier 1 | |
| *cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml* | Tier 1 | |
| *cephalexin oral tablet 250 mg, 500 mg* | Tier 1 | |
| **Cephalosporins - 2Nd Generation** | | |
| *cefaclor oral capsule 250 mg, 500 mg* | Tier 1 | |
| *cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml* | Tier 1 | |
| *cefaclor oral tablet extended release 12 hr 500 mg* | Tier 1 | |
| *cefprozil oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml* | Tier 1 | |
| *cefprozil oral tablet 250 mg, 500 mg* | Tier 1 | |
| *cefuroxime axetil oral tablet 250 mg, 500 mg* | Tier 1 | |
| **Cephalosporins - 3Rd Generation** | | |
| *cefdinir oral capsule 300 mg* | Tier 1 | |
| *cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml* | Tier 1 | |
| *cefixime oral capsule 400 mg* | Tier 1 | |
| *cefixime oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml* | Tier 1 | |
| *cefpodoxime oral suspension for reconstitution 100 mg/5 ml, 50 mg/5 ml* | Tier 1 | |
| *cefpodoxime oral tablet 100 mg, 200 mg* | Tier 1 | |
| SUPRAX ORAL SUSPENSION FOR RECONSTITUTION 500 MG/5 ML | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| SUPRAX ORAL TABLET,CHEWABLE 100 MG, 200 MG | | Tier 2 | |
| **Chemotherapeutics, Antibacterial, Misc.** | | | |
| *fosfomycin tromethamine oral packet 3 gram* | | Tier 1 | |
| *methenamine hippurate oral tablet 1 gram* | | Tier 1 | |
| *methenamine mandelate oral tablet 0.5 gram, 1 gram* | | Tier 1 | |
| *methen-sod phos-meth blue-hyos oral tablet 81.6-40.8-0.12 mg* | (Urogesic-Blue) | Tier 1 | |
| PRIMSOL ORAL SOLUTION 50 MG/5 ML | | Tier 2 | |
| *trimethoprim oral tablet 100 mg* | | Tier 1 | |
| URELLE ORAL TABLET 81-10.8-40.8 MG | | Tier 3 | |
| URETRON D-S ORAL TABLET 81.6-10.8-40.8 MG | | Tier 2 | |
| URIBEL TABS ORAL TABLET 81.6-0.12-10.8 MG | | Tier 3 | |
| URIMAR-T ORAL TABLET 120-10.8-0.12 MG | | Tier 3 | |
| UROGESIC-BLUE ORAL TABLET 81.6-40.8-0.12 MG | (methen-sod phos-meth blue-hyos) | Tier 1 | |
| URO-MP ORAL CAPSULE 118-10-40.8-36 MG | | Tier 1 | |
| **Fecal Microbiota Transplantation (Fmt)** | | | |
| VOWST ORAL CAPSULE 1 X 10EXP6 TO 3 X 10EXP7 CELL | | Tier 6 | PA; SP; QL (12 EA per 3 days) |
| **Macrolides** | | | |
| *azithromycin oral packet 1 gram* | | Tier 1 | |
| *azithromycin oral suspension for reconstitution 100 mg/5 ml* | | Tier 1 | |
| *azithromycin oral suspension for reconstitution 200 mg/5 ml* | (Zithromax) | Tier 1 | |
| *azithromycin oral tablet 250 mg, 500 mg* | (Zithromax) | Tier 1 | |
| *azithromycin oral tablet 600 mg* | | Tier 1 | |
| *clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml* | | Tier 1 | |
| *clarithromycin oral tablet 250 mg, 500 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *clarithromycin oral tablet extended release 24 hr 500 mg* | | Tier 1 | |
| DIFICID ORAL SUSPENSION FOR RECONSTITUTION 40 MG/ML | | Tier 2 | QL (10 ML per 1 day) |
| DIFICID ORAL TABLET 200 MG | (fidaxomicin) | Tier 1 | QL (20 EA per 10 days) |
| E.E.S. 400 ORAL TABLET 400 MG | (erythromycin ethylsuccinate) | Tier 1 | |
| ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 250 MG, 500 MG | (erythromycin) | Tier 1 | |
| ERYTHROCIN (AS STEARATE) ORAL TABLET 250 MG | (erythromycin stearate) | Tier 1 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml* | (E.E.S. Granules) | Tier 1 | |
| *erythromycin ethylsuccinate oral suspension for reconstitution 400 mg/5 ml* | (EryPed 400) | Tier 1 | |
| *erythromycin ethylsuccinate oral tablet 400 mg* | (E.E.S. 400) | Tier 1 | |
| *erythromycin oral capsule,delayed release(dr/ec) 250 mg* | | Tier 1 | |
| *erythromycin oral tablet 250 mg, 500 mg* | | Tier 1 | |
| *erythromycin oral tablet,delayed release (dr/ec) 250 mg, 333 mg, 500 mg* | (Ery-Tab) | Tier 1 | |
| *fidaxomicin oral tablet 200 mg* | (Dificid) | Tier 1 | QL (20 EA per 10 days) |
| **Nitrofuran Derivatives** | | | |
| *nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg* | | Tier 1 | |
| *nitrofurantoin monohyd/m-cryst oral capsule 100 mg* | (Macrobid) | Tier 1 | |
| *nitrofurantoin oral suspension 25 mg/5 ml* | (Furadantin) | Tier 1 | PA; QL (560 ML per 7 days) |
| **Oxazolidinones** | | | |
| *linezolid oral suspension for reconstitution 100 mg/5 ml* | (Zyvox) | Tier 1 | |
| *linezolid oral tablet 600 mg* | | Tier 1 | |
| SIVEXTRO ORAL TABLET 200 MG | | Tier 2 | PA |
| **Penicillins** | | | |
| *amoxicillin oral capsule 250 mg, 500 mg* | | Tier 1 | |
| *amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml* | | Tier 1 | |
| *amoxicillin oral tablet 500 mg, 875 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *amoxicillin oral tablet,chewable 125 mg, 250 mg* | | Tier 1 | |
| *amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 400-57 mg/5 ml* | | Tier 1 | |
| *amoxicillin-pot clavulanate oral suspension for reconstitution 250-62.5 mg/5 ml* | (Augmentin) | Tier 1 | |
| *amoxicillin-pot clavulanate oral suspension for reconstitution 600-42.9 mg/5 ml* | (Augmentin ES-600) | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet 250-125 mg, 875-125 mg* | | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet 500-125 mg* | (Augmentin) | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet extended release 12 hr 1,000-62.5 mg* | | Tier 1 | |
| *amoxicillin-pot clavulanate oral tablet,chewable 200-28.5 mg, 400-57 mg* | | Tier 1 | |
| *ampicillin oral capsule 500 mg* | | Tier 1 | |
| *dicloxacillin oral capsule 250 mg, 500 mg* | | Tier 1 | |
| MOXATAG ORAL TABLET, ER MULTIPHASE 24 HR 775 MG | (amoxicillin) | Tier 3 | |
| *penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml* | | Tier 1 | |
| *penicillin v potassium oral tablet 250 mg, 500 mg* | | Tier 1 | |
| PIVYA ORAL TABLET 185 MG | | Tier 3 | PA; QL (21 EA per 1 FILL) |
| **Pleuromutilin Derivatives** | | | |
| XENLETA ORAL TABLET 600 MG | | Tier 3 | PA; QL (2 EA per 1 day) |
| **Quinolones** | | | |
| BAXDELA ORAL TABLET 450 MG | | Tier 3 | PA |
| CIPRO ORAL SUSPENSION,MICROCAPSULE RECON 250 MG/5 ML, 500 MG/5 ML | (ciprofloxacin) | Tier 2 | |
| *ciprofloxacin hcl oral tablet 100 mg, 750 mg* | | Tier 1 | |
| *ciprofloxacin hcl oral tablet 250 mg, 500 mg* | (Cipro) | Tier 1 | |
| *ciprofloxacin oral suspension,microcapsule recon 250 mg/5 ml, 500 mg/5 ml* | (Cipro) | Tier 1 | |
| *levofloxacin oral solution 250 mg/10 ml* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *levofloxacin oral tablet 250 mg, 500 mg, 750 mg* | | Tier 1 | |
| *moxifloxacin oral tablet 400 mg* | | Tier 1 | |
| *ofloxacin oral tablet 400 mg* | | Tier 1 | |
| **Tetracyclines** | | | |
| *demeclocycline oral tablet 150 mg, 300 mg* | | Tier 1 | |
| *doxycycline hyclate oral capsule 100 mg* | | Tier 1 | |
| *doxycycline hyclate oral capsule 50 mg* | (Morgidox) | Tier 1 | |
| *doxycycline hyclate oral tablet 100 mg* | | Tier 1 | |
| *doxycycline hyclate oral tablet 150 mg* | | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 150 MG TABLET REQUIRED |
| *doxycycline hyclate oral tablet 50 mg* | (Targadox) | Tier 1 | ST: TRIAL OF DOXYCYCLINE HYCLATE 50MG CAPSULE OR DOXYCYCLINE MONOHYDRATE 50MG CAPSULES OR TABLETS REQUIRED |
| *doxycycline hyclate oral tablet 75 mg* | | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 75MG TABLET REQUIRED |
| *doxycycline monohydrate oral capsule 100 mg* | (Mondoxyne NL) | Tier 1 | |
| *doxycycline monohydrate oral capsule 150 mg* | | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 50, 75 OR 100MG TABLET OR 50, 100 MG CAPSULE IN THE PAST 120 DAYS |
| *doxycycline monohydrate oral capsule 50 mg* | | Tier 1 | |
| *doxycycline monohydrate oral capsule 75 mg* | (Mondoxyne NL) | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 75MG TABLET REQUIRED |
| *doxycycline monohydrate oral capsule,ir - delay rel,biphase 40 mg* | (Oracea) | Tier 1 | PA; QL (1 EA per 1 day) |
| *doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml* | | Tier 1 | |
| *doxycycline monohydrate oral tablet 100 mg* | (Avidoxy) | Tier 1 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *doxycycline monohydrate oral tablet 150 mg* | | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 50, 75 OR 100MG TABLET OR 50, 100 MG CAPSULE IN THE PAST 120 DAYS |
| *doxycycline monohydrate oral tablet 50 mg, 75 mg* | | Tier 1 | |
| EMROSI ORAL CAPSULE,IR -EXTEND REL,BIPHASE 40 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| *minocycline oral capsule 100 mg, 50 mg, 75 mg* | | Tier 1 | |
| *minocycline oral tablet 100 mg, 50 mg, 75 mg* | | Tier 1 | |
| *minocycline oral tablet extended release 24 hr 105 mg, 115 mg, 135 mg, 45 mg, 55 mg, 65 mg, 80 mg, 90 mg* | | Tier 1 | ST: TRIAL OF GENERIC MINOCYCLINE IR REQUIRED; QL (1 EA per 1 day) |
| MONDOXYNE NL ORAL CAPSULE 100 MG | (doxycycline monohydrate) | Tier 1 | |
| MONDOXYNE NL ORAL CAPSULE 75 MG | (doxycycline monohydrate) | Tier 1 | ST: TRIAL OF GENERIC DOXYCYCLINE MONOHYDRATE 75MG TABLET REQUIRED |
| NUZYRA ORAL TABLET 150 MG | | Tier 3 | PA; QL (30 EA per 14 days) |
| *tetracycline oral capsule 250 mg, 500 mg* | | Tier 1 | |
| **Infectious Disease - Fungal** | | | |
| **Antifungal Agents** | | | |
| *clotrimazole mucous membrane troche 10 mg* | | Tier 1 | |
| CRESEMBA ORAL CAPSULE 186 MG | | Tier 3 | PA; QL (2 EA per 1 day) |
| CRESEMBA ORAL CAPSULE 74.5 MG | | Tier 3 | PA; QL (5 EA per 1 day) |
| *fluconazole oral suspension for reconstitution 10 mg/ml* | | Tier 1 | |
| *fluconazole oral suspension for reconstitution 40 mg/ml* | (Diflucan) | Tier 1 | |
| *fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg* | | Tier 1 | |
| *flucytosine oral capsule 250 mg, 500 mg* | (Ancobon) | Tier 1 | |
| *itraconazole oral capsule 100 mg* | (Sporanox) | Tier 1 | |
| *itraconazole oral solution 10 mg/ml* | | Tier 1 | |
| *ketoconazole oral tablet 200 mg* | | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| NOXAFIL ORAL SUSP,DELAYED RELEASE FOR RECON 300 MG | Tier 3 | PA |
| ORAVIG BUCCAL MUCO-ADHESIVE BUCCAL TABLET 50 MG | Tier 3 | |
| *posaconazole oral suspension 200 mg/5 ml (40 mg/ml)* | Tier 1 | PA |
| *posaconazole oral tablet,delayed release (dr/ec) 100 mg* | Tier 1 | PA |
| *terbinafine hcl oral tablet 250 mg* | Tier 1 | |
| VIVJOA ORAL CAPSULE 150 MG | Tier 3 | PA; QL (18 EA per 84 days) |
| *voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)* (Vfend) | Tier 1 | |
| *voriconazole oral tablet 200 mg, 50 mg* | Tier 1 | |
| **Antifungal Antibiotics** | | |
| *griseofulvin microsize oral suspension 125 mg/5 ml* | Tier 1 | |
| *griseofulvin microsize oral tablet 500 mg* | Tier 1 | |
| *griseofulvin ultramicrosize oral tablet 125 mg, 250 mg* | Tier 1 | |
| *nystatin oral suspension 100,000 unit/ml* | Tier 1 | |
| *nystatin oral tablet 500,000 unit* | Tier 1 | |
| **Infectious Disease - Miscellaneous** | | |
| **Aminoglycosides** | | |
| ARIKAYCE INHALATION SUSPENSION FOR NEBULIZATION 590 MG/8.4 ML | Tier 6 | PA; SP; QL (8.4 ML per 1 day) |
| *neomycin oral tablet 500 mg* | Tier 1 | |
| TOBI PODHALER INHALATION CAPSULE, W/INHALATION DEVICE 28 MG | Tier 5 | PA; SP; QL (224 EA per 28 days) |
| *tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml* (Tobi) | Tier 4 | PA; SP; QL (280 ML per 28 days) |
| *tobramycin inhalation solution for nebulization 300 mg/4 ml* (Bethkis) | Tier 4 | PA; SP; QL (224 ML per 28 days) |
| *tobramycin with nebulizer inhalation solution for nebulization 300 mg/5 ml* (Kitabis Pak) | Tier 4 | PA; SP; QL (280 ML per 28 days) |
| **Antibacterial Agents,Miscellaneous** | | |
| *glycine urologic solution irrigation solution 1.5 %* | Tier 1 | |
| **Antileprotics** | | |
| *dapsone oral tablet 100 mg, 25 mg* | Tier 1 | |
| THALOMID ORAL CAPSULE 100 MG, 50 MG | Tier 5 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Anti-Mycobacterium Agents** | | | |
| *ethambutol oral tablet 100 mg, 400 mg* | | Tier 1 | |
| *isoniazid oral solution 50 mg/5 ml* | | Tier 1 | |
| *isoniazid oral tablet 100 mg, 300 mg* | | Tier 1 | |
| *pyrazinamide oral tablet 500 mg* | | Tier 1 | |
| *rifabutin oral capsule 150 mg* | | Tier 1 | |
| **Antitubercular Antibiotics** | | | |
| *cycloserine oral capsule 250 mg* | | Tier 1 | |
| *pretomanid oral tablet 200 mg* | | Tier 3 | QL (1 EA per 1 day) |
| PRIFTIN ORAL TABLET 150 MG | (rifapentine) | Tier 3 | |
| *rifampin oral capsule 150 mg, 300 mg* | | Tier 1 | |
| *rifapentine oral tablet 150 mg* | (Priftin) | Tier 1 | |
| SIRTURO ORAL TABLET 100 MG | | Tier 6 | PA; SP; QL (24 EA per 28 days) |
| SIRTURO ORAL TABLET 20 MG | | Tier 6 | PA; SP; QL (120 EA per 28 days) |
| **Lincosamides** | | | |
| *clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg* | (Cleocin HCl) | Tier 1 | |
| *clindamycin palmitate hcl oral recon soln 75 mg/5 ml* | (Clindamycin Pediatric) | Tier 1 | |
| CLINDAMYCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML | (clindamycin palmitate hcl) | Tier 1 | |
| **Rifamycins And Related Derivative Antibiotics** | | | |
| XIFAXAN ORAL TABLET 200 MG | | Tier 3 | PA |
| XIFAXAN ORAL TABLET 550 MG | | Tier 2 | QL (3 EA per 1 day) |
| **Vancomycin And Derivatives** | | | |
| *vancomycin oral capsule 125 mg* | (Vancocin) | Tier 1 | QL (77 EA per 28 days) |
| *vancomycin oral capsule 250 mg* | (Vancocin) | Tier 1 | QL (112 EA per 1 FILL) |
| *vancomycin oral recon soln 25 mg/ml* | (Firvanq) | Tier 1 | QL (300 ML per 1 FILL) |
| *vancomycin oral recon soln 50 mg/ml* | (Firvanq) | Tier 1 | QL (600 ML per 1 FILL) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Infectious Disease - Parasitic** | | | |
| **2Nd Gen. Anaerobic Antiprotozoal-Antibacterial** | | | |
| SOLOSEC ORAL GRANULES DEL RELEASE IN PACKET 2 GRAM | | Tier 3 | ST: TRIAL OF TWO OF THE FOLLOWING GENERICS: ORAL METRONIDAZOLE TABLETS, ORAL CLINDAMYCIN CAPSULES, INTRAVAGINAL METRONIDAZOLE GEL, INTRAVAGINAL CLINDAMYCIN CREAM IN THE PAST 365 DAYS; QL (1 EA per 30 days) |
| *tinidazole oral tablet 250 mg, 500 mg* | | Tier 1 | |
| **Amebacides** | | | |
| HUMATIN ORAL CAPSULE 250 MG | (paromomycin) | Tier 2 | PA |
| **Anaerobic Antiprotozoal-Antibacterial Agents** | | | |
| LIKMEZ ORAL SUSPENSION 500 MG/5 ML | | Tier 3 | PA; QL (400 ML per 10 days) |
| *metronidazole oral capsule 375 mg* | | Tier 1 | |
| *metronidazole oral tablet 250 mg, 500 mg* | | Tier 1 | |
| **Anthelmintics** | | | |
| *albendazole oral tablet 200 mg* | | Tier 1 | |
| EMVERM ORAL TABLET,CHEWABLE 100 MG | (mebendazole) | Tier 2 | PA |
| *ivermectin oral tablet 3 mg* | (Stromectol) | Tier 1 | |
| *ivermectin oral tablet 6 mg* | | Tier 1 | |
| *praziquantel oral tablet 600 mg* | | Tier 1 | |
| **Antimalarial Drugs** | | | |
| ARAKODA ORAL TABLET 100 MG | | Tier 3 | |
| *atovaquone-proguanil oral tablet 250-100 mg* | (Malarone) | Tier 1 | |
| *atovaquone-proguanil oral tablet 62.5-25 mg* | (Malarone Pediatric) | Tier 1 | |
| *chloroquine phosphate oral tablet 250 mg, 500 mg* | | Tier 1 | |
| COARTEM ORAL TABLET 20-120 MG | | Tier 3 | |
| *hydroxychloroquine oral tablet 100 mg* | | Tier 1 | QL (180 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *hydroxychloroquine oral tablet 200 mg* | (Sovuna) | Tier 1 | QL (100 EA per 30 days) |
| *hydroxychloroquine oral tablet 300 mg* | (Sovuna) | Tier 1 | QL (60 EA per 30 days) |
| *hydroxychloroquine oral tablet 400 mg* | | Tier 1 | QL (60 EA per 30 days) |
| KRINTAFEL ORAL TABLET 150 MG | | Tier 2 | QL (2 EA per 1 FILL) |
| *mefloquine oral tablet 250 mg* | | Tier 1 | |
| *primaquine oral tablet 26.3 mg (15 mg base)* | | Tier 2 | |
| *pyrimethamine oral tablet 25 mg* | (Daraprim) | Tier 4 | PA; SP |
| *quinine sulfate oral capsule 324 mg* | (Qualaquin) | Tier 1 | |
| SOVUNA ORAL TABLET 200 MG | (hydroxychloroquine) | Tier 2 | QL (100 EA per 30 days) |
| SOVUNA ORAL TABLET 300 MG | (hydroxychloroquine) | Tier 3 | QL (60 EA per 30 days) |
| **Antiparasitics** | | | |
| ALINIA ORAL SUSPENSION FOR RECONSTITUTION 100 MG/5 ML | | Tier 3 | QL (50 ML per 1 day) |
| *nitazoxanide oral tablet 500 mg* | (Alinia) | Tier 1 | QL (2 EA per 1 day) |
| **Antiprotozoal Drugs,Miscellaneous** | | | |
| *atovaquone oral suspension 750 mg/5 ml* | (Mepron) | Tier 1 | |
| *benznidazole oral tablet 100 mg, 12.5 mg* | | Tier 1 | |
| IMPAVIDO ORAL CAPSULE 50 MG | | Tier 2 | PA; QL (84 EA per 28 days) |
| LAMPIT ORAL TABLET 120 MG, 30 MG | | Tier 3 | |
| *pentamidine inhalation recon soln 300 mg* | (Nebupent) | Tier 1 | |
| **Infectious Disease - Viral** | | | |
| **Antiretroviral - Capsid Inhibitors** | | | |
| SUNLENCA ORAL TABLET 300 MG | | Tier 3 | PA |
| SUNLENCA SUBCUTANEOUS SOLUTION 309 MG/ML | | Tier 3 | PA |
| **Antiretroviral-Integrase Inhibitor And Nnrti Comb.** | | | |
| CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 400 MG/2 ML- 600 MG/2 ML | | Tier 5 | SP; QL (4 ML per 30 days); Age (Min 12 Years) |
| CABENUVA INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML- 900 MG/3 ML | | Tier 5 | SP; QL (6 ML per 30 days); Age (Min 12 Years) |
| JULUCA ORAL TABLET 50-25 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| **Antiretroviral-Integrase Inhibitor And Nrti Comb.** | | | |
| DOVATO ORAL TABLET 50-300 MG | | Tier 5 | SP; QL (1 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| **Antiretroviral-Nucleoside,Nucleotide,Protease Inh.** | | |
| SYMTUZA ORAL TABLET 800-150-200-10 MG | Tier 5 | SP; QL (1 EA per 1 day) |
| **Antiviral - Main Protease (Mpro) Inhibitor** | | |
| PAXLOVID ORAL TABLETS,DOSE PACK 150 MG (10)- 100 MG (10), 150 MG (6)- 100 MG (5) | Tier 2 | QL (20 EA per 28 days); Age (Min 12 Years) |
| PAXLOVID ORAL TABLETS,DOSE PACK 300 MG (150 MG X 2)-100 MG | Tier 2 | QL (30 EA per 28 days); Age (Min 12 Years) |
| **Antiviral Monoclonal Antibodies** | | |
| BEYFORTUS INTRAMUSCULAR SYRINGE 100 MG/ML, 50 MG/0.5 ML | ACA Tier | PA; $0 COPAY WITH RESTRICTIONS THAT APPLY ACCORDING TO CDC GUIDANCE |
| **Antiviral Nucleotide Analogs** | | |
| LAGEVRIO (EUA) ORAL CAPSULE 200 MG | Tier 1 | QL (40 EA per 29 days); Age (Min 18 Years) |
| **Antivirals, General** | | |
| *acyclovir oral capsule 200 mg* | Tier 1 | |
| *acyclovir oral suspension 200 mg/5 ml* | Tier 1 | |
| *acyclovir oral tablet 400 mg, 800 mg* | Tier 1 | |
| *famciclovir oral tablet 125 mg, 250 mg, 500 mg* | Tier 1 | |
| LIVTENCITY ORAL TABLET 200 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *oseltamivir oral capsule 30 mg, 45 mg* | Tier 1 | |
| *oseltamivir oral capsule 75 mg* (Tamiflu) | Tier 1 | |
| *oseltamivir oral suspension for reconstitution 6 mg/ml* (Tamiflu) | Tier 1 | |
| PREVYMIS ORAL PELLETS IN PACKET 120 MG, 20 MG | Tier 3 | PA; QL (4 EA per 1 day) |
| PREVYMIS ORAL TABLET 240 MG, 480 MG | Tier 3 | PA; QL (1 EA per 1 day) |
| RELENZA DISKHALER INHALATION BLISTER WITH DEVICE 5 MG/ACTUATION | Tier 3 | QL (40 EA per 180 days) |
| TEMBEXA ORAL SUSPENSION 10 MG/ML | Tier 2 | |
| TEMBEXA ORAL TABLET 100 MG | Tier 2 | |
| *valacyclovir oral tablet 1 gram, 500 mg* (Valtrex) | Tier 1 | |
| *valganciclovir oral recon soln 50 mg/ml* (Valcyte) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *valganciclovir oral tablet 450 mg* | | Tier 1 | |
| XOFLUZA ORAL TABLET 40 MG | | Tier 2 | QL (4 EA per 180 days) |
| XOFLUZA ORAL TABLET 80 MG | | Tier 2 | QL (2 EA per 180 days) |
| **Antivirals, Hiv-Spec, Non-Peptidic Protease Inhib** | | | |
| APTIVUS ORAL CAPSULE 250 MG | | Tier 3 | QL (4 EA per 1 day) |
| *darunavir oral tablet 600 mg* | (Prezista) | Tier 4 | SP; QL (2 EA per 1 day) |
| *darunavir oral tablet 800 mg* | (Prezista) | Tier 4 | SP; QL (1 EA per 1 day) |
| PREZISTA ORAL SUSPENSION 100 MG/ML | | Tier 5 | SP; QL (400 ML per 30 days) |
| PREZISTA ORAL TABLET 150 MG | | Tier 5 | SP; QL (8 EA per 1 day) |
| PREZISTA ORAL TABLET 75 MG | | Tier 5 | SP; QL (16 EA per 1 day) |
| **Antivirals, Hiv-Spec, Nucleoside-Nucleotide Analog** | | | |
| CIMDUO ORAL TABLET 300-300 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| DESCOVY ORAL TABLET 120-15 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| DESCOVY ORAL TABLET 200-25 MG | | ACA Tier | $0 COPAY IF USED FOR HIV PREP TX. OTHER RESTRICTIONS MAY APPLY.; QL (1 EA per 1 day) |
| *emtricitabine-tenofovir (tdf) oral tablet 100-150 mg, 133-200 mg, 167-250 mg* | (Truvada) | Tier 4 | SP; QL (1 EA per 1 day) |
| *emtricitabine-tenofovir (tdf) oral tablet 200-300 mg* | (Truvada) | ACA Tier | $0 COPAY IF USED FOR HIV PREP TX. OTHER RESTRICTIONS MAY APPLY.; QL (1 EA per 1 day) |
| **Antivirals, Hiv-Spec., Nucleoside Analog, Rti Comb** | | | |
| *abacavir-lamivudine oral tablet 600-300 mg* | | Tier 4 | SP; QL (1 EA per 1 day) |
| *lamivudine-zidovudine oral tablet 150-300 mg* | | Tier 4 | SP; QL (2 EA per 1 day) |
| **Antivirals, Hiv-Specific, Ccr5 Co-Receptor Antag.** | | | |
| *maraviroc oral tablet 150 mg* | (Selzentry) | Tier 4 | SP; QL (2 EA per 1 day) |
| *maraviroc oral tablet 300 mg* | (Selzentry) | Tier 4 | SP; QL (4 EA per 1 day) |
| SELZENTRY ORAL SOLUTION 20 MG/ML | | Tier 3 | QL (31 ML per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antivirals, Hiv-Specific, Cd4 Attachment Inhibitor** | | | |
| RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HR 600 MG | | Tier 3 | PA; QL (2 EA per 1 day) |
| **Antivirals, Hiv-Specific, Non-Nucleoside, Rti** | | | |
| EDURANT PED ORAL TABLET FOR SUSPENSION 2.5 MG | | Tier 5 | SP; QL (180 EA per 30 days) |
| *efavirenz oral tablet 600 mg* | | Tier 4 | SP; QL (1 EA per 1 day) |
| *etravirine oral tablet 100 mg* | (Intelence) | Tier 4 | SP; QL (4 EA per 1 day) |
| *etravirine oral tablet 200 mg* | (Intelence) | Tier 4 | SP; QL (2 EA per 1 day) |
| INTELENCE ORAL TABLET 25 MG | | Tier 5 | SP; QL (4 EA per 1 day) |
| *nevirapine oral suspension 50 mg/5 ml* | | Tier 4 | SP; QL (1200 ML per 30 days) |
| *nevirapine oral tablet 200 mg* | | Tier 4 | SP; QL (2 EA per 1 day) |
| *nevirapine oral tablet extended release 24 hr 400 mg* | | Tier 4 | SP; QL (1 EA per 1 day) |
| *rilpivirine hcl oral tablet 25 mg* | (Edurant) | Tier 1 | QL (1 EA per 1 day) |
| **Antivirals, Hiv-Specific, Nucleoside Analog, Rti** | | | |
| *abacavir oral solution 20 mg/ml* | (Ziagen) | Tier 4 | SP; QL (960 ML per 30 days) |
| *abacavir oral tablet 300 mg* | | Tier 4 | SP; QL (2 EA per 1 day) |
| *emtricitabine oral capsule 200 mg* | (Emtriva) | ACA Tier | $0 COPAY IF USED FOR HIV PREP TX. OTHER RESTRICTIONS MAY APPLY.; QL (1 EA per 1 day) |
| EMTRIVA ORAL SOLUTION 10 MG/ML | | Tier 3 | QL (850 ML per 30 days) |
| *lamivudine oral solution 10 mg/ml* | (Epivir) | Tier 4 | SP; QL (960 ML per 30 days) |
| *lamivudine oral tablet 150 mg* | (Epivir) | Tier 4 | SP; QL (2 EA per 1 day) |
| *lamivudine oral tablet 300 mg* | (Epivir) | Tier 4 | SP; QL (1 EA per 1 day) |
| *zidovudine oral capsule 100 mg* | (Retrovir) | Tier 4 | SP; QL (6 EA per 1 day) |
| *zidovudine oral syrup 10 mg/ml* | (Retrovir) | Tier 4 | SP; QL (1920 ML per 30 days) |
| *zidovudine oral tablet 300 mg* | | Tier 4 | SP; QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antivirals, Hiv-Specific, Nucleotide Analog, Rti** | | | |
| *tenofovir disoproxil fumarate oral tablet 300 mg* | (Viread) | ACA Tier | $0 COPAY IF USED FOR HIV PREP TX. OTHER RESTRICTIONS MAY APPLY.; QL (1 EA per 1 day) |
| VIREAD ORAL POWDER 40 MG/SCOOP (40 MG/GRAM) | | Tier 5 | SP; QL (240 GM per 30 days) |
| VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| **Antivirals, Hiv-Specific, Protease Inhibitor Comb** | | | |
| *lopinavir-ritonavir oral tablet 100-25 mg* | (Kaletra) | Tier 4 | SP; QL (10 EA per 1 day) |
| *lopinavir-ritonavir oral tablet 200-50 mg* | (Kaletra) | Tier 4 | SP; QL (4 EA per 1 day) |
| **Antivirals, Hiv-Specific, Protease Inhibitors** | | | |
| *atazanavir oral capsule 150 mg* | | Tier 4 | SP; QL (2 EA per 1 day) |
| *atazanavir oral capsule 200 mg* | (Reyataz) | Tier 4 | SP; QL (2 EA per 1 day) |
| *atazanavir oral capsule 300 mg* | (Reyataz) | Tier 4 | SP; QL (1 EA per 1 day) |
| EVOTAZ ORAL TABLET 300-150 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| *fosamprenavir oral tablet 700 mg* | | Tier 4 | SP; QL (4 EA per 1 day) |
| NORVIR ORAL POWDER IN PACKET 100 MG | | Tier 5 | SP; QL (12 EA per 1 day) |
| REYATAZ ORAL POWDER IN PACKET 50 MG | | Tier 5 | SP; QL (5 EA per 1 day) |
| *ritonavir oral tablet 100 mg* | (Norvir) | Tier 4 | SP; QL (12 EA per 1 day) |
| VIRACEPT ORAL TABLET 250 MG, 625 MG | | Tier 3 | QL (4 EA per 1 day) |
| **Antivirals,Hiv-1 Integrase Strand Transfer Inhibtr** | | | |
| APRETUDE INTRAMUSCULAR SUSPENSION,EXTENDED RELEASE 600 MG/3 ML (200 MG/ML) | (cabotegravir) | ACA Tier | $0 COPAY IF QUANTITY 0.15 IN 1 DAY, FILL OF 7 IN 365 DAYS, AND NO HISTORY OF HIV TREATMENT IN 120 DAYS; QL (21 ML per 365 days); Age (Min 12 Years) |
| ISENTRESS HD ORAL TABLET 600 MG | | Tier 5 | SP; QL (2 EA per 1 day) |
| ISENTRESS ORAL POWDER IN PACKET 100 MG | | Tier 5 | SP; QL (2 EA per 1 day) |
| ISENTRESS ORAL TABLET 400 MG | | Tier 5 | SP; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| ISENTRESS ORAL TABLET,CHEWABLE 100 MG | Tier 5 | SP; QL (6 EA per 1 day) |
| ISENTRESS ORAL TABLET,CHEWABLE 25 MG | Tier 5 | SP; QL (24 EA per 1 day) |
| TIVICAY ORAL TABLET 50 MG | Tier 5 | SP; QL (2 EA per 1 day) |
| TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG | Tier 5 | SP; QL (6 EA per 1 day) |
| **Artv Cmb Nucleoside,Nucleotide,&Non-Nucleoside Rti** | | |
| *efavirenz-emtricitabin-tenofov oral tablet 600-200-300 mg* | Tier 4 | SP; QL (1 EA per 1 day) |
| *efavirenz-lamivu-tenofov disop oral tablet 400-300-300 mg* | Tier 4 | SP; QL (1 EA per 1 day) |
| *efavirenz-lamivu-tenofov disop oral tablet 600-300-300 mg* (Symfi) | Tier 4 | SP; QL (1 EA per 1 day) |
| *emtricita-rilpivirine-tenof df oral tablet 200-25-300 mg* (Complera) | Tier 4 | SP; QL (1 EA per 1 day) |
| ODEFSEY ORAL TABLET 200-25-25 MG | Tier 5 | SP; QL (1 EA per 1 day) |
| **Arv Cmb-Nrti,N(T)Rti, Integrase Inhibitor** | | |
| BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG | Tier 5 | SP; QL (1 EA per 1 day) |
| GENVOYA ORAL TABLET 150-150-200-10 MG | Tier 5 | SP; QL (1 EA per 1 day) |
| STRIBILD ORAL TABLET 150-150-200-300 MG | Tier 3 | QL (1 EA per 1 day) |
| **Arv Comb-Nrtis & Integrase Inhibitor** | | |
| TRIUMEQ ORAL TABLET 600-50-300 MG | Tier 5 | SP; QL (1 EA per 1 day) |
| TRIUMEQ PD ORAL TABLET FOR SUSPENSION 60-5-30 MG | Tier 5 | SP; QL (6 EA per 1 day) |
| **Hep C - Ns5a, Ns3/4A, Nucleotide Ns5b Inhib Combo** | | |
| VOSEVI ORAL TABLET 400-100-100 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Hep C Virus - Ns5a & Ns5b Polymerase Inhib. Combo.** | | |
| EPCLUSA ORAL PELLETS IN PACKET 150-37.5 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| EPCLUSA ORAL PELLETS IN PACKET 200-50 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| EPCLUSA ORAL TABLET 200-50 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| EPCLUSA ORAL TABLET 400-100 MG | (sofosbuvir-velpatasvir) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| HARVONI ORAL PELLETS IN PACKET 33.75-150 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| HARVONI ORAL PELLETS IN PACKET 45-200 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| HARVONI ORAL TABLET 45-200 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| HARVONI ORAL TABLET 90-400 MG | (ledipasvir-sofosbuvir) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Hepatitis B Treatment Agents** | | | |
| *adefovir oral tablet 10 mg* | | Tier 4 | SP; QL (1 EA per 1 day) |
| BARACLUDE ORAL SOLUTION 0.05 MG/ML | | Tier 5 | SP; QL (630 ML per 30 days) |
| *entecavir oral tablet 0.5 mg, 1 mg* | (Baraclude) | Tier 4 | SP; QL (1 EA per 1 day) |
| *lamivudine oral tablet 100 mg* | | Tier 1 | QL (1 EA per 1 day) |
| VEMLIDY ORAL TABLET 25 MG | | Tier 5 | SP; QL (1 EA per 1 day) |
| **Hepatitis C Treatment Agents** | | | |
| PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML | | Tier 5 | PA; SP; QL (4 ML per 28 days) |
| PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML | | Tier 5 | PA; SP; QL (4 ML per 28 days) |
| *ribavirin oral capsule 200 mg* | | Tier 1 | |
| *ribavirin oral tablet 200 mg* | | Tier 1 | |
| **Hepatitis C Virus- Ns5a And Ns3/4A Inhibitor Comb** | | | |
| MAVYRET ORAL PELLETS IN PACKET 50-20 MG | | Tier 5 | PA; SP; QL (5 EA per 1 day) |
| MAVYRET ORAL TABLET 100-40 MG | | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Inflammatory Disease** | | | |
| **Anti-Arthritic And Chelating Agents** | | | |
| *penicillamine oral capsule 250 mg* | (Cuprimine) | Tier 4 | PA; SP |
| *penicillamine oral tablet 250 mg* | (Depen Titratabs) | Tier 4 | PA; SP |
| **Anti-Arthritic, Folate Antagonist Agents** | | | |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 10 MG/0.2 ML | | Tier 2 | QL (0.8 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 12.5 MG/0.25 ML | | Tier 2 | QL (1 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 15 MG/0.3 ML | | Tier 2 | QL (1.2 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 17.5 MG/0.35 ML | | Tier 2 | QL (1.4 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 20 MG/0.4 ML | | Tier 2 | QL (1.6 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 22.5 MG/0.45 ML | | Tier 2 | QL (1.8 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 25 MG/0.5 ML | | Tier 2 | QL (2 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 30 MG/0.6 ML | | Tier 2 | QL (2.4 ML per 28 days) |
| RASUVO (PF) SUBCUTANEOUS AUTO-INJECTOR 7.5 MG/0.15 ML | | Tier 2 | QL (0.6 ML per 28 days) |
| **Anti-Flam. Interleukin-1 Receptor Antagonist** | | | |
| ARCALYST SUBCUTANEOUS RECON SOLN 220 MG | | Tier 6 | PA; SP |
| KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML | | Tier 6 | PA; SP |
| **Anti-Inflammatory Tumor Necrosis Factor Inhibitor** | | | |
| *adalimumab-aaty subcutaneous auto-injector, kit 40 mg/0.4 ml* | (Yuflyma(CF) Autoinjector) | Tier 5 | PA; SP |
| *adalimumab-aaty subcutaneous auto-injector, kit 80 mg/0.8 ml* | (adalimumab-aaty(CF) AI Crohns) | Tier 5 | PA; SP |
| *adalimumab-aaty subcutaneous syringe kit 20 mg/0.2 ml, 40 mg/0.4 ml* | (Yuflyma(CF)) | Tier 5 | PA; SP |
| ADALIMUMAB-AATY(CF) AI CROHNS SUBCUTANEOUS AUTO-INJECTOR, KIT 80 MG/0.8 ML | (adalimumab-aaty) | Tier 5 | PA; SP |
| *adalimumab-adaz subcutaneous syringe 10 mg/0.1 ml* | (Hyrimoz(CF)) | Tier 6 | PA; SP |
| *adalimumab-ryvk subcutaneous auto-injector, kit 40 mg/0.4 ml, 80 mg/0.8 ml* | (Simlandi(CF) Autoinjector) | Tier 5 | PA; SP |
| CIMZIA POWDER FOR RECONST SUBCUTANEOUS KIT 400 MG (200 MG X 2 VIALS) | | Tier 6 | PA; SP |
| CIMZIA STARTER KIT SUBCUTANEOUS SYRINGE KIT 400 MG/2 ML (200 MG/ML X 2) | | Tier 6 | PA; SP |
| CIMZIA SUBCUTANEOUS SYRINGE KIT 200 MG/ML, 400 MG/2 ML (200 MG/ML X 2) | | Tier 6 | PA; SP |
| ENBREL MINI SUBCUTANEOUS CARTRIDGE 50 MG/ML (1 ML) | | Tier 5 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5 ML | Tier 5 | PA; SP |
| ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML) | Tier 5 | PA; SP |
| ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML) | Tier 5 | PA; SP |
| SIMPONI SUBCUTANEOUS PEN INJECTOR 100 MG/ML, 50 MG/0.5 ML | Tier 6 | PA; SP |
| SIMPONI SUBCUTANEOUS SYRINGE 100 MG/ML, 50 MG/0.5 ML | Tier 6 | PA; SP |
| ZYMFENTRA SUBCUTANEOUS PEN INJECTOR KIT 120 MG/ML | Tier 6 | PA; SP |
| ZYMFENTRA SUBCUTANEOUS SYRINGE KIT 120 MG/ML | Tier 6 | PA; SP |
| **Anti-Inflammatory, Pyrimidine Synthesis Inhibitor** | | |
| *leflunomide oral tablet 10 mg, 20 mg* (Arava) | Tier 1 | |
| **Anti-Inflammatory,Phosphodiesterase-4(Pde4) Inhib.** | | |
| OTEZLA ORAL TABLET 20 MG, 30 MG | Tier 5 | PA; SP |
| OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)- 20 MG (51), 10 MG (4)-20 MG (4)-30 MG (47) | Tier 5 | PA; SP |
| OTEZLA XR INITIATION ORAL TABLET AND TABLET ER DOSE PACK 10-20-30-75 MG | Tier 5 | PA; SP |
| OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG | Tier 5 | PA; SP |
| **Anti-Inflammatory/Antiarthritics Agents, Misc.** | | |
| EUFLEXXA INTRA-ARTICULAR SYRINGE 10 MG/ML(MW 2.4 -3.6 MILLION) | Tier 2 | PA; QL (12 ML per 180 days) |
| SYNVISC INTRA-ARTICULAR SYRINGE 16 MG/2 ML | Tier 2 | PA; QL (12 ML per 180 days) |
| SYNVISC-ONE INTRA-ARTICULAR SYRINGE 48 MG/6 ML | Tier 2 | PA; QL (12 ML per 180 days) |
| **Antinflammatory, Sel.Costim.Mod.,T-Cell Inhibitor** | | |
| ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML | Tier 6 | PA; SP; QL (4 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML | | Tier 6 | PA; SP; QL (4 ML per 28 days) |
| ORENCIA SUBCUTANEOUS SYRINGE 50 MG/0.4 ML | | Tier 6 | PA; SP; QL (1.6 ML per 28 days) |
| ORENCIA SUBCUTANEOUS SYRINGE 87.5 MG/0.7 ML | | Tier 6 | PA; SP; QL (2.8 ML per 28 days) |
| **Bradykinin B2 Receptor Antagonists** | | | |
| *icatibant subcutaneous syringe 30 mg/3 ml* | (Sajazir) | Tier 4 | PA; SP; QL (18 ML per 1 FILL) |
| SAJAZIR SUBCUTANEOUS SYRINGE 30 MG/3 ML | (icatibant) | Tier 4 | PA; SP; QL (18 ML per 1 FILL) |
| **C1 Esterase Inhibitors** | | | |
| BERINERT INTRAVENOUS KIT 500 UNIT (10 ML) | | Tier 6 | PA; SP; QL (40 EA per 28 days) |
| CINRYZE INTRAVENOUS RECON SOLN 500 UNIT (5 ML) | | Tier 5 | PA; SP; QL (40 EA per 28 days) |
| HAEGARDA SUBCUTANEOUS RECON SOLN 2,000 UNIT, 3,000 UNIT | | Tier 5 | PA; SP |
| RUCONEST INTRAVENOUS RECON SOLN 2,100 UNIT | | Tier 6 | PA; SP; QL (8 EA per 1 FILL) |
| **Glucocorticoids** | | | |
| AGAMREE ORAL SUSPENSION 40 MG/ML | | Tier 6 | PA; SP; QL (7.69 ML per 1 day) |
| ALKINDI SPRINKLE ORAL CAPSULE, SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG | | Tier 6 | PA; SP |
| BETALOAN SUIK KIT 6 MG/ML | | Tier 3 | |
| *budesonide oral capsule,delayed,extend.release 3 mg* | | Tier 1 | |
| *budesonide oral tablet,delayed and ext.release 9 mg* | (Uceris) | Tier 1 | ST: TRIAL OF BALSALAZIDE REQUIRED. |
| *cortisone oral tablet 25 mg* | | Tier 1 | |
| *deflazacort oral suspension 22.75 mg/ml* | (Jaythari) | Tier 4 | PA; SP; QL (1.3 ML per 1 day) |
| *deflazacort oral tablet 18 mg* | (Jaythari) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| *deflazacort oral tablet 30 mg, 36 mg, 6 mg* | (Jaythari) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML | | Tier 3 | |
| *dexamethasone oral elixir 0.5 mg/5 ml* | | Tier 1 | |
| *dexamethasone oral solution 0.5 mg/5 ml* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg* | | Tier 1 | |
| DEXONTO IONTOPHORETIC SOLUTION 0.4 % | | Tier 3 | |
| EMFLAZA ORAL SUSPENSION 22.75 MG/ML | (deflazacort) | Tier 6 | PA; SP; QL (1.3 ML per 1 day) |
| *hydrocortisone oral tablet 10 mg, 20 mg, 5 mg* | (Cortef) | Tier 1 | |
| JAYTHARI ORAL SUSPENSION 22.75 MG/ML | (deflazacort) | Tier 4 | PA; SP; QL (1.3 ML per 1 day) |
| JAYTHARI ORAL TABLET 18 MG | (deflazacort) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| JAYTHARI ORAL TABLET 30 MG, 36 MG, 6 MG | (deflazacort) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| KENALOG INJECTION SUSPENSION 10 MG/ML | (triamcinolone acetonide) | Tier 3 | |
| KENALOG-80 INJECTION SUSPENSION 80 MG/ML | (triamcinolone acetonide) | Tier 3 | |
| KYMBEE ORAL SUSPENSION 22.75 MG/ML | (deflazacort) | Tier 4 | PA; SP; QL (1.3 ML per 1 day) |
| KYMBEE ORAL TABLET 18 MG | (deflazacort) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| KYMBEE ORAL TABLET 30 MG, 36 MG, 6 MG | (deflazacort) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| MEDROL ORAL TABLET 2 MG | | Tier 2 | |
| MEDROLOAN II SUIK KIT 40 MG/ML | | Tier 3 | |
| MEDROLOAN SUIK KIT 40 MG/ML | | Tier 3 | |
| *methylprednisolone oral tablet 16 mg, 4 mg, 8 mg* | (Medrol) | Tier 1 | |
| *methylprednisolone oral tablet 32 mg* | | Tier 1 | |
| *methylprednisolone oral tablets,dose pack 4 mg* | (Medrol (Pak)) | Tier 1 | |
| *prednisolone oral solution 15 mg/5 ml* | | Tier 1 | |
| *prednisolone sodium phosphate oral solution 10 mg/5 ml, 15 mg/5 ml (3 mg/ml), 25 mg/5 ml (5 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)* | | Tier 1 | |
| *prednisolone sodium phosphate oral solution 20 mg/5 ml (4 mg/ml)* | (Veripred 20) | Tier 1 | |
| *prednisolone sodium phosphate oral tablet,disintegrating 10 mg, 15 mg, 30 mg* | (Orapred ODT) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML | | Tier 2 | |
| *prednisone oral solution 5 mg/5 ml* | | Tier 1 | |
| *prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg* | | Tier 1 | |
| *prednisone oral tablets,dose pack 10 mg, 5 mg* | | Tier 1 | |
| PYQUVI ORAL SUSPENSION 22.75 MG/ML | (deflazacort) | Tier 4 | PA; SP; QL (1.3 ML per 1 day) |
| TARPEYO ORAL CAPSULE,DELAYED RELEASE(DR/EC) 4 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| *triamcinolone acetonide injection suspension 10 mg/ml, 40 mg/ml* | (Kenalog) | Tier 1 | |
| TRILOAN II SUIK KIT 40 MG/ML | | Tier 3 | |
| TRILOAN SUIK KIT 40 MG/ML | | Tier 3 | |
| **Gold Salts** | | | |
| *auranofin oral capsule 3 mg* | (Ridaura) | Tier 1 | |
| RIDAURA ORAL CAPSULE 3 MG | (auranofin) | Tier 3 | |
| **Immunomodulator,B-Lymphocyte Stim(Blys)-Spec Inhib** | | | |
| BENLYSTA SUBCUTANEOUS AUTO-INJECTOR 200 MG/ML | | Tier 6 | PA; SP; QL (4 ML per 28 days) |
| BENLYSTA SUBCUTANEOUS SYRINGE 200 MG/ML | | Tier 6 | PA; SP; QL (4 ML per 28 days) |
| **Interleukin-6 (Il-6) Receptor Inhibitors** | | | |
| AVTOZMA AUTOINJECTOR SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML | | Tier 5 | PA; SP |
| AVTOZMA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML | | Tier 5 | PA; SP |
| ENSPRYNG SUBCUTANEOUS SYRINGE 120 MG/ML | | Tier 6 | PA; SP; QL (1 ML per 28 days) |
| KEVZARA SUBCUTANEOUS PEN INJECTOR 150 MG/1.14 ML, 200 MG/1.14 ML | | Tier 6 | PA; SP |
| KEVZARA SUBCUTANEOUS SYRINGE 200 MG/1.14 ML | | Tier 6 | PA; SP |
| **Janus Kinase (Jak) Inhibitors** | | | |
| LITFULO ORAL CAPSULE 50 MG | | Tier 5 | PA; SP |
| OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG | | Tier 6 | PA; SP |
| RINVOQ LQ ORAL SOLUTION 1 MG/ML | | Tier 5 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HR 15 MG, 30 MG, 45 MG | | Tier 5 | PA; SP |
| *tofacitinib oral solution 1 mg/ml* | (Xeljanz) | Tier 4 | PA; SP |
| *tofacitinib oral tablet 10 mg, 5 mg* | (Xeljanz) | Tier 4 | PA; SP |
| *tofacitinib oral tablet extended release 24 hr 11 mg, 22 mg* | (Xeljanz XR) | Tier 4 | PA; SP |
| **Mineralocorticoids** | | | |
| *fludrocortisone oral tablet 0.1 mg* | | Tier 1 | |
| **Monoclonal Antibody-Human Interleukin 12/23 Inhib** | | | |
| STEQEYMA SUBCUTANEOUS SOLUTION 45 MG/0.5 ML | | Tier 5 | PA; SP |
| STEQEYMA SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML | | Tier 5 | PA; SP |
| *ustekinumab-aekn subcutaneous syringe 45 mg/0.5 ml, 90 mg/ml* | (Selarsdi) | Tier 5 | PA; SP |
| YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5 ML | | Tier 5 | PA; SP |
| YESINTEK SUBCUTANEOUS SYRINGE 45 MG/0.5 ML, 90 MG/ML | | Tier 5 | PA; SP |
| **Nsaids (Cox Non-Specific Inhib)& Prostaglandin Cmb** | | | |
| *diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 50-200 mg-mcg* | (Arthrotec 50) | Tier 1 | |
| *diclofenac-misoprostol oral tablet,ir,delayed rel,biphasic 75-200 mg-mcg* | (Arthrotec 75) | Tier 1 | |
| **Nsaids, Cyclooxygenase 2 Inhibitor - Type** | | | |
| *celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg* | (Celebrex) | Tier 1 | |
| VYSCOXA ORAL SUSPENSION 10 MG/ML | | Tier 3 | PA; QL (40 ML per 1 day) |
| **Nsaids, Cyclooxygenase Inhibitor-Type** | | | |
| *diclofenac potassium oral tablet 50 mg* | | Tier 1 | |
| *diclofenac sodium oral tablet extended release 24 hr 100 mg* | | Tier 1 | |
| *diclofenac sodium oral tablet,delayed release (dr/ec) 25 mg, 50 mg, 75 mg* | | Tier 1 | |
| *etodolac oral capsule 200 mg, 300 mg* | | Tier 1 | |
| *etodolac oral tablet 400 mg* | (Lodine) | Tier 1 | |
| *etodolac oral tablet 500 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *etodolac oral tablet extended release 24 hr 400 mg, 500 mg, 600 mg* | | Tier 1 | |
| *flurbiprofen oral tablet 100 mg* | (Lurbiro) | Tier 1 | |
| IBU ORAL TABLET 400 MG, 600 MG, 800 MG | (ibuprofen) | Tier 1 | |
| *ibuprofen oral suspension 100 mg/5 ml* | (Children's Advil) | Tier 1 | |
| *ibuprofen oral tablet 400 mg, 600 mg, 800 mg* | (IBU) | Tier 1 | |
| *indomethacin oral capsule 25 mg, 50 mg* | | Tier 1 | |
| *indomethacin oral capsule, extended release 75 mg* | | Tier 1 | |
| *indomethacin rectal suppository 100 mg* | | Tier 1 | |
| *ketoprofen oral capsule 25 mg, 50 mg* | | Tier 1 | |
| *ketoprofen oral capsule 75 mg* | (Orudis) | Tier 1 | |
| *ketoprofen oral capsule,ext rel. pellets 24 hr 200 mg* | | Tier 1 | |
| *ketorolac injection solution 15 mg/ml, 30 mg/ml, 30 mg/ml (1 ml)* | | Tier 1 | |
| *ketorolac injection syringe 15 mg/ml, 30 mg/ml* | | Tier 1 | |
| *ketorolac intramuscular solution 60 mg/2 ml* | | Tier 1 | |
| *ketorolac intramuscular syringe 60 mg/2 ml* | | Tier 1 | |
| *ketorolac oral tablet 10 mg* | | Tier 1 | QL (20 EA per 5 days) |
| LURBIRO ORAL TABLET 100 MG | (flurbiprofen) | Tier 1 | |
| *meclofenamate oral capsule 100 mg, 50 mg* | | Tier 1 | |
| *mefenamic acid oral capsule 250 mg* | | Tier 1 | |
| *meloxicam oral tablet 15 mg, 7.5 mg* | | Tier 1 | |
| *nabumetone oral tablet 500 mg, 750 mg* | | Tier 1 | |
| *naproxen oral tablet 250 mg, 375 mg* | | Tier 1 | |
| *naproxen oral tablet 500 mg* | (Naprosyn) | Tier 1 | |
| *naproxen oral tablet,delayed release (dr/ec) 375 mg, 500 mg* | (EC-Naprosyn) | Tier 1 | |
| *naproxen sodium oral tablet 275 mg* | | Tier 1 | |
| *naproxen sodium oral tablet 550 mg* | (Anaprox DS) | Tier 1 | |
| *oxaprozin oral tablet 600 mg* | | Tier 1 | |
| *piroxicam oral capsule 10 mg, 20 mg* | | Tier 1 | |
| *sulindac oral tablet 150 mg, 200 mg* | | Tier 1 | |
| *tolmetin oral capsule 400 mg* | (Tolectin DS) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *tolmetin oral tablet 200 mg* | | Tier 1 | |
| *tolmetin oral tablet 600 mg* | (Tolectin 600) | Tier 1 | |
| TORONOVA II SUIK KIT 30 MG/ML | | Tier 3 | |
| TORONOVA SUIK KIT 30 MG/ML | | Tier 3 | |
| **Plasma Kallikrein Inhibitors** | | | |
| DAWNZERA SUBCUTANEOUS AUTO-INJECTOR 80 MG/0.8 ML | | Tier 5 | PA; SP; QL (0.8 ML per 28 days) |
| EKTERLY ORAL TABLET 300 MG | | Tier 5 | PA; SP; QL (8 EA per 1 FILL) |
| ORLADEYO ORAL CAPSULE 110 MG, 150 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| ORLADEYO ORAL PELLETS IN PACKET 108 MG, 132 MG, 72 MG, 96 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| TAKHZYRO SUBCUTANEOUS SYRINGE 150 MG/ML, 300 MG/2 ML (150 MG/ML) | | Tier 5 | PA; SP; QL (4 ML per 28 days) |
| **Local Anesthesia** | | | |
| **Local Anesthetics** | | | |
| *lidocaine hcl mucous membrane solution 2 %, 4 % (40 mg/ml)* | | Tier 1 | |
| MARVONA SUIK (PF) KIT 0.5 % (5 MG/ML) | | Tier 3 | |
| **Lower Gastrointestinal Disorders - Bowel Inflammat** | | | |
| **Bowel Antiinflamatory Agents** | | | |
| *sulfadiazine oral tablet 500 mg* | | Tier 1 | |
| **Chronic Inflam. Colon Dx, 5-A-Salicylat,Rectal Tx** | | | |
| *mesalamine rectal enema 4 gram/60 ml* | (Rowasa) | Tier 1 | |
| *mesalamine rectal suppository 1,000 mg* | (Canasa) | Tier 1 | |
| *mesalamine with cleansing wipe rectal enema kit 4 gram/60 ml* | (Rowasa) | Tier 1 | |
| **Drug Tx-Chronic Inflam. Colon Dx,5-Aminosalicylat** | | | |
| *balsalazide oral capsule 750 mg* | (Colazal) | Tier 1 | |
| *mesalamine oral capsule, extended release 250 mg, 500 mg* | (Pentasa) | Tier 1 | |
| *mesalamine oral capsule,extended release 24hr 0.375 gram* | (Apriso) | Tier 1 | |
| *mesalamine oral tablet,delayed release (dr/ec) 1.2 gram* | (Lialda) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *mesalamine oral tablet,delayed release (dr/ec) 800 mg* | | Tier 1 | |
| PENTASA ORAL CAPSULE, EXTENDED RELEASE 500 MG | (mesalamine) | Tier 3 | |
| *sulfasalazine oral tablet 500 mg* | (Azulfidine) | Tier 1 | |
| *sulfasalazine oral tablet,delayed release (dr/ec) 500 mg* | (Azulfidine EN-tabs) | Tier 1 | |
| **Hemorrhoidal Prep, Anti-Infam Steroid/Local Anesth** | | | |
| ANALPRAM-HC SINGLES RECTAL CREAM 2.5-1 % (4G) | (hydrocortisone-pramoxine) | Tier 1 | |
| *hydrocortisone-pramoxine rectal cream 1-1 %, 2.5-1 %* | (Analpram-HC) | Tier 1 | |
| *hydrocortisone-pramoxine rectal cream 2.5-1 % (4g)* | (Analpram-HC Singles) | Tier 1 | |
| *lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %* | | Tier 1 | |
| *lidocaine hcl-hydrocortison ac rectal gel 3 %-2.5 % (7 gram)* | | Tier 1 | |
| *lidocaine hcl-hydrocortison ac rectal kit 3-0.5 %, 3-1 % (7 gram), 3-2.5 % (7 gram)* | | Tier 1 | |
| *lidocaine-hydrocortisone-aloe rectal gel 2.8-0.55 %* | | Tier 1 | |
| PROCORT RECTAL CREAM 1.85-1.15 % | | Tier 3 | |
| PROCTOFOAM HC RECTAL FOAM 1-1 % | | Tier 2 | |
| **Ibs Agents,Mixed Opioid Recep Agonists/Antagonists** | | | |
| VIBERZI ORAL TABLET 100 MG, 75 MG | | Tier 2 | QL (2 EA per 1 day) |
| **Integrin Receptor Antagonist, Monoclonal Antibody** | | | |
| ENTYVIO PEN SUBCUTANEOUS PEN INJECTOR 108 MG/0.68 ML | | Tier 6 | PA; SP |
| **Irritable Bowel Agents,Guanylate Cylase-C Agonist** | | | |
| LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG | | Tier 2 | QL (1 EA per 1 day) |
| TRULANCE ORAL TABLET 3 MG | | Tier 2 | QL (1 EA per 1 day) |
| **Local Anorectal Nitrate Preparations** | | | |
| *nitroglycerin rectal ointment 0.4 % (w/w)* | (Rectiv) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Rectal Preparations** | | | |
| ANUCORT-HC RECTAL SUPPOSITORY 25 MG | (hydrocortisone acetate) | Tier 1 | |
| *hydrocortisone acetate rectal suppository 25 mg* | (Anucort-HC) | Tier 1 | |
| *hydrocortisone acetate rectal suppository 30 mg* | (Hemmorex-HC) | Tier 1 | |
| **Rectal/Lower Bowel Prep.,Glucocort. (Non-Hemorr)** | | | |
| *budesonide rectal foam 2 mg/actuation* | (Uceris) | Tier 1 | |
| CORTIFOAM RECTAL FOAM 10 % (80 MG) | | Tier 2 | |
| *hydrocortisone rectal enema 100 mg/60 ml* | (Cortenema) | Tier 1 | |
| **Lower Gastrointestinal Disorders - Other** | | | |
| **Ammonia Inhibitors** | | | |
| CARBAGLU ORAL TABLET, DISPERSIBLE 200 MG | (carglumic acid) | Tier 6 | PA; SP |
| *carglumic acid oral tablet, dispersible 200 mg* | (Carbaglu) | Tier 4 | PA; SP |
| ENULOSE ORAL SOLUTION 10 GRAM/15 ML | (lactulose) | Tier 1 | |
| GENERLAC ORAL SOLUTION 10 GRAM/15 ML | (lactulose) | Tier 1 | |
| *glycerol phenylbutyrate oral liquid 1.1 gram/ml* | (Ravicti) | Tier 4 | PA; SP; QL (17.5 ML per 1 day) |
| LITHOSTAT ORAL TABLET 250 MG | | Tier 3 | |
| OLPRUVA ORAL PELLETS IN PACKET 2 GRAM, 3 GRAM, 5 GRAM | | Tier 6 | PA; SP; QL (12 EA per 1 day) |
| OLPRUVA ORAL PELLETS IN PACKET 4 GRAM | | Tier 6 | PA; SP; QL (15 EA per 1 day) |
| OLPRUVA ORAL PELLETS IN PACKET 6 GRAM, 6.67 GRAM | | Tier 6 | PA; SP; QL (9 EA per 1 day) |
| PHEBURANE ORAL GRANULES 483 MG/GRAM | | Tier 6 | PA; SP; QL (41.5 GM per 1 day) |
| RAVICTI ORAL LIQUID 1.1 GRAM/ML | (glycerol phenylbutyrate) | Tier 6 | PA; SP; QL (17.5 ML per 1 day) |
| *sodium phenylbutyrate oral powder 0.94 gram/gram* | (Buphenyl) | Tier 4 | PA; SP; QL (21.3 GM per 1 day) |
| *sodium phenylbutyrate oral tablet 500 mg* | (Buphenyl) | Tier 4 | PA; SP; QL (40 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Antidiarrheal - G.I. Chloride Channel Inhibitors** | | | |
| MYTESI ORAL TABLET,DELAYED RELEASE (DR/EC) 125 MG | | Tier 5 | SP; ST: TRIAL OF ANTI-RETROVIRAL THERAPY REQUIRED.; QL (2 EA per 1 day) |
| **Antidiarrheal - Tryptophan Hydroxylase Inhibitor** | | | |
| XERMELO ORAL TABLET 250 MG | | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Antidiarrheals** | | | |
| *diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml* | | Tier 1 | |
| *diphenoxylate-atropine oral tablet 2.5-0.025 mg* | (Lomotil) | Tier 1 | |
| *loperamide oral capsule 2 mg* | (Anti-Diarrheal (loperamide)) | Tier 1 | |
| *opium tincture oral tincture 10 mg/ml (morphine)* | | Tier 1 | |
| **Bile Salts** | | | |
| CHOLBAM ORAL CAPSULE 250 MG, 50 MG | | Tier 6 | PA; SP |
| CTEXLI ORAL TABLET 250 MG | | Tier 6 | PA; SP |
| *ursodiol oral capsule 300 mg* | | Tier 1 | |
| *ursodiol oral tablet 250 mg* | | Tier 1 | |
| *ursodiol oral tablet 500 mg* | (URSO Forte) | Tier 1 | |
| **Ileal Bile Acid Transporter (Ibat) Inhibitor** | | | |
| BYLVAY ORAL CAPSULE 1,200 MCG, 400 MCG | | Tier 6 | PA; SP |
| BYLVAY ORAL PELLET 200 MCG, 600 MCG | | Tier 6 | PA; SP |
| LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML | | Tier 6 | PA; SP |
| LIVMARLI ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG | | Tier 6 | PA; SP |
| **Irritable Bowel Synd. Agent,5Ht-3 Antagonist-Type** | | | |
| *alosetron oral tablet 0.5 mg, 1 mg* | (Lotronex) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Laxatives And Cathartics** | | | |
| CLENPIQ ORAL SOLUTION 10 MG-3.5 GRAM- 12 GRAM/175 ML | | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (350 ML per 1 FILL) |
| CONSTULOSE ORAL SOLUTION 10 GRAM/15 ML | (lactulose) | Tier 1 | |
| GAVILYTE-C ORAL RECON SOLN 240-22.72-6.72 -5.84 GRAM | (peg 3350-electrolytes) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (4000 ML per 1 FILL) |
| GAVILYTE-G ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM | (peg 3350-electrolytes) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (4000 ML per 1 FILL) |
| GAVILYTE-N ORAL RECON SOLN 420 GRAM | (peg-electrolyte soln) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (4000 ML per 1 FILL) |
| *lactulose oral solution 10 gram/15 ml* | (Constulose) | Tier 1 | |
| *lubiprostone oral capsule 24 mcg* | | Tier 1 | QL (2 EA per 1 day) |
| *lubiprostone oral capsule 8 mcg* | (Amitiza) | Tier 1 | QL (4 EA per 1 day) |
| *peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram* | (GaviLyte-G) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (4000 ML per 1 FILL) |

| Drug | | Status | Notes |
|---|---|---|---|
| *peg3350-sod sul-nacl-kcl-asb-c oral powder in packet 100-7.5-2.691 gram* | (MoviPrep) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (1 EA per 1 FILL) |
| *peg-electrolyte soln oral recon soln 420 gram* | (GaviLyte-N) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (4000 ML per 1 FILL) |
| PLENVU ORAL POWDER IN PACKET, SEQUENTIAL 140-9-5.2 GRAM | | ACA Tier | ST: TRIAL OF SUTAB, CLENPIQ OR GENERIC BOWEL PREP IN THE LAST 120 DAYS; $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, 45-75 YEARS OF AGE, AND TRIAL OF CLENPIQ, SUTAB, OR A GENERIC BOWEL PREP; QL (3 EA per 1 FILL) |
| *sodium,potassium,mag sulfates oral recon soln 17.5-3.13-1.6 gram* | (Suprep Bowel Prep Kit) | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (354 ML per 1 FILL) |
| SUFLAVE ORAL RECON SOLN 178.7-7.3-0.5 GRAM | | ACA Tier | ST: TRIAL OF SUTAB, CLENPIQ OR GENERIC BOWEL PREP IN THE LAST 120 DAYS; $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, 45-75 YEARS OF AGE, AND TRIAL OF CLENPIQ, SUTAB, OR A GENERIC BOWEL PREP; QL (2 EA per 1 FILL) |

| Drug | Status | Notes |
|---|---|---|
| SUTAB ORAL TABLET 1.479-0.188-0.225 GRAM | ACA Tier | $0 COPAY IF QUANTITY IS LIMITED TO 1 TREATMENT COURSE, FILL OF 2 IN 365 DAYS, AND 45-75 YEARS OF AGE; QL (24 EA per 1 FILL) |
| **Narcotic Antagonists, Peripherally-Acting** | | |
| *alvimopan oral capsule 12 mg* | Tier 1 | |
| MOVANTIK ORAL TABLET 12.5 MG, 25 MG | Tier 2 | QL (1 EA per 1 day) |
| SYMPROIC ORAL TABLET 0.2 MG | Tier 2 | QL (1 EA per 1 day) |
| **Ppar Agonist** | | |
| IQIRVO ORAL TABLET 80 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| LIVDELZI ORAL CAPSULE 10 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Sbs - Glucagon-Like Peptide-2 (Glp-2) Analogs** | | |
| GATTEX 30-VIAL SUBCUTANEOUS KIT 5 MG | Tier 5 | PA; SP |
| GATTEX ONE-VIAL SUBCUTANEOUS KIT 5 MG | Tier 5 | PA; SP |
| **Medical Supplies** | | |
| **Bandages And Related Supplies** | | |
| ACESO AG TOPICAL BANDAGE 4 X 4 " | Tier 3 | |
| ACTICOAT DRESSING TOPICAL BANDAGE 16 X 16 ", 4 X 4 ", 4 X 48 ", 4 X 8 ", 8 X 16 " | Tier 3 | |
| ALLEVYN LIFE DRESSING TOPICAL BANDAGE 4 X 4 " | Tier 3 | |
| CARRASYN HYDROGEL WOUND DRESS TOPICAL GEL | Tier 3 | |
| CURAFIL GEL WOUND TOPICAL GEL | Tier 3 | |
| CURITY AMD (WITH POLYHEXAMETH) TOPICAL SPONGE 0.2 %- 2" X 2" | Tier 3 | |
| CURITY AMD (WITH POLYHEXAMETH) TOPICAL STRIP 0.2 %- 1/2" X 3 FEET | Tier 3 | |
| CURITY AMD TOPICAL BANDAGE 1 X 5 "-YARD, 1/4 X 36 " | Tier 3 | |

| Drug | Status | Notes |
|---|---|---|
| CURITY IODOFORM PACKING STRIP TOPICAL BANDAGE 1 X 5 "-YARD, 1/2 X 5 "-YARD, 1/4 X 5 "-YARD, 2 X 5 "-YARD | Tier 3 | |
| DYNAFOAM AG TOPICAL BANDAGE 4 X 4 " | Tier 3 | |
| DYNAGINATE AG TOPICAL BANDAGE 12 ", 2 X 2 ", 4 X 5 ", 4 X 8 " | Tier 3 | |
| KERAGEL TOPICAL GEL | Tier 3 | |
| KERLIX AMD TOPICAL BANDAGE 0.2 %- 4.5" X 4.1 YARD | Tier 3 | |
| KERLIX AMD TOPICAL SPONGE 0.2 %- 6" X 6.75" | Tier 3 | |
| OASIS WOUND MATRIX FENESTRATED TOPICAL SHEET 3 X 3.5 CM, 3 X 7 CM | Tier 3 | |
| OASIS WOUND MATRIX MESHED TOPICAL SHEET 5 X 7 CM, 7 X 10 CM, 7 X 20 CM | Tier 3 | |
| PETROLEUM GAUZE TOPICAL BANDAGE | Tier 3 | |
| RESTORE CALCIUM ALGINATE TOPICAL BANDAGE 4 X 4 3/4 " | Tier 3 | |
| RESTORE TOPICAL BANDAGE 1 X 12 ", 2 X 2 " | Tier 3 | |
| SILIGENTLE AG TOPICAL BANDAGE 2 X 2 ", 4 X 4 ", 4 X 5 ", 6 X 6 " | Tier 3 | |
| SIOXD OR TOPICAL SHEET 2.5 " | Tier 3 | |
| SIOXD TOPICAL SHEET 2.5 " | Tier 3 | |
| SPECTRAGEL TOPICAL GEL | Tier 3 | |
| THERAHONEY TOPICAL BANDAGE 4 X 5 " | Tier 3 | |
| XEROFORM PETROLATUM DRESSING TOPICAL BANDAGE 4 X 4 ", 5 X 9 " | Tier 3 | |
| **Catheters And Related Devices** | | |
| ADVANCE PLUS INTERMITTENT 10 FR, 10-16 FR-", 12 FR, 12-16 FR-", 16-16 FR-", 18-16 FR-", 6-16 FR-", 8-16 FR-" | Tier 3 | |
| ADVANCE PLUS INTERMITTENT 14-16 FR-" (catheter) | Tier 3 | |
| ADVANCE PLUS INTERMITTENT COMBO PACK 6 FR, 8 FR- 16" | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| APOGEE IC INTERMIT CATHETER 14-6 FR-" | | Tier 3 | |
| APOGEE PLUS INTERMITT CATHETER 16-16 FR-" | | Tier 3 | |
| CURITY DRAINAGE BAG 2,000 ML | | Tier 3 | |
| DOVER COATED LATEX FOLEY COMBO PACK | | Tier 3 | |
| DOVER LATEX FOLEY CATHETER 16 FR, 28 FR | | Tier 3 | |
| DOVER RED RUBBER ROBINSON CATH 8 FR | | Tier 3 | |
| DOVER UNIVERSAL TRAY | (catheterization tray) | Tier 3 | |
| FEMALE CATHETER 14 FR | | Tier 3 | |
| KENGUARD FOLEY CATHETER 18-16 FR-" | | Tier 3 | |
| KENGUARD FOLEY CATHETER TRAY | (catheterization tray) | Tier 3 | |
| LOFRIC 12-16 FR-" | | Tier 3 | |
| LOFRIC 14-16 FR-" | (catheter) | Tier 3 | |
| LOFRIC ORIGO 14-16 FR-" | (catheter) | Tier 3 | |
| LOFRIC PRIMO NELATON CATHETER 16-16 FR-" | | Tier 3 | |
| LOFRIC SENSE NELATON CATHETER 14-6 FR-" | | Tier 3 | |
| MAGIC3 INTERMITTENT CATHETER 10-16 FR-", 12-16 FR-" | | Tier 3 | |
| MONO-FLO DRAINAGE BAG 2,000 ML | | Tier 3 | |
| ROBINSON CLEAR VINYL CATHETER 16 FR | | Tier 3 | |
| SELF-CATHETER, FEMALE 14 FR | | Tier 3 | |
| SILASTIC FOLEY CATHETER 20 FR | | Tier 3 | |
| SPEEDICATH (FEMALE) 16 FR | | Tier 3 | |
| TOUCH-TROL 10 FR | | Tier 3 | |
| VAPRO PLUS INTERMITT CATHETER COMBO PACK 12 FR- 8", 14 FR- 16", 14 FR- 8" | | Tier 3 | |
| **Diabetic Supplies** | | | |
| UNISTIK 3 DUAL LANCET 18 GAUGE | | Tier 2 | |
| **Durable Medical Equipment,Misc** | | | |
| AIRS ADULT AEROSOL MASK | (nebulizer accessories) | Tier 3 | |
| AIRS PEDIATRIC DISPOSABLE MASK | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 1000 KIT | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 1000 PFT FILTER | (nebulizer accessories) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| ALL FLOW 3000 KIT | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 3000 PFT FILTER | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 4000 KIT | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 4000 PFT FILTER | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 5000 KIT | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 5000 PFT FILTER | (nebulizer accessories) | Tier 3 | |
| ALL FLOW 6000 PFT FILTER | (nebulizer accessories) | Tier 3 | |
| AMIELLE VAGINAL TRAINER KIT | | Tier 3 | |
| ARGYLE TRACHEOSTOMY CARE TRAY | | Tier 3 | |
| CLEVER CHOICE NEB KIT-ADULT | (nebulizer accessories) | Tier 3 | |
| CLEVER CHOICE NEB KIT-CHILD | (nebulizer accessories) | Tier 3 | |
| ENFIT MEDICAL STRAW | | Tier 3 | |
| INNOSPIRE REPLACEMENT FILTER | (nebulizer accessories) | Tier 3 | |
| INSPIRATION ELITE FILTER | (nebulizer accessories) | Tier 3 | |
| NOSE CLIP | (nebulizer accessories) | Tier 3 | |
| PARI BABY CONV KIT - SIZE 1 KIT | | Tier 3 | |
| PARI BABY CONV KIT - SIZE 2 KIT | | Tier 3 | |
| PARI BABY CONV KIT - SIZE 3 KIT | | Tier 3 | |
| PARI TREK S PORTABLE PWR KIT | (nebulizer accessories) | Tier 3 | |
| PILLOW MASK CHILD | (nebulizer accessories) | Tier 3 | |
| PRO COMFORT TENS ELECTRODE PAD | | Tier 3 | |
| PRO-CEPTION VAGINAL | | Tier 3 | |
| PRONEB ULTRA II FILTER ASSEM | (nebulizer accessories) | Tier 3 | |
| REUSABLE NEBULIZER KIT KIT | | Tier 3 | |
| RUBBER MOUTHPIECE | (nebulizer accessories) | Tier 3 | |
| SAMI THE SEAL MASK | (nebulizer accessories) | Tier 3 | |
| SIDESTREAM MASK | (nebulizer accessories) | Tier 3 | |
| SILICONE MASK | (nebulizer accessories) | Tier 3 | |
| **Durable Medical Equipment,Misc(Group 1)** | | | |
| ACCU-CHEK FASTCLIX LANCET DRUM | (lancets) | Tier 2 | |
| ACCU-CHEK SAFE-T-PRO PLUS 23 GAUGE | | Tier 2 | |
| ACCU-CHEK SOFTCLIX LANCETS | (lancets) | Tier 2 | |
| ACTI-LANCE LANCETS 17 GAUGE, 23 GAUGE | | Tier 2 | |
| ACTI-LANCE LANCETS 28 GAUGE | (lancets) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| ADVANCED TRAVEL LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| ADVANTAGE SAFETY LANCET 28 GAUGE | (lancets) | Tier 2 | |
| ADVOCATE LANCET 21 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| ADVOCATE LANCET 23 GAUGE | | Tier 2 | |
| AGAMATRIX ULTRA-THIN LANCET 33 GAUGE | (lancets) | Tier 2 | |
| ALTERNATE SITE LANCET 26 GAUGE | (lancets) | Tier 2 | |
| ASSURE LANCE 25 GAUGE | | Tier 2 | |
| ASSURE LANCE 28 GAUGE | (lancets) | Tier 2 | |
| ASSURE LANCE PLUS 21 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| ASSURE LANCE PLUS 25 GAUGE | | Tier 2 | |
| BD MICROTAINER LANCET 1.5 X 2 MM | | Tier 2 | |
| BD MICROTAINER LANCET 21 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| BULLSEYE MINI SAFETY LANCETS 21 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| BULLSEYE MINI SAFETY LANCETS 25 GAUGE | | Tier 2 | |
| BUTTERFLY TOUCH LANCET 30 GAUGE | (lancets) | Tier 2 | |
| CAREONE ULTRA THIN LANCET | (lancets) | Tier 2 | |
| CARESENS LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| CARETOUCH SAFETY LANCETS 26 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| CARETOUCH TWIST LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| CHOSEN LANCET 30 GAUGE | (lancets) | Tier 2 | |
| CHOSEN SAFETY LANCET 28 GAUGE | (lancets) | Tier 2 | |
| CLEVER CHEK LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| COAGUCHEK LANCETS | (lancets) | Tier 2 | |
| COMFORT EZ LANCETS 23 GAUGE | | Tier 2 | |
| COMFORT EZ LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| COMFORT TOUCH PLUS SAFETY LANC 30 GAUGE | (lancets) | Tier 2 | |
| COMFORT TOUCH ULT THIN LANCETS 31 GAUGE | | Tier 2 | |
| DROPLET LANCETS 30 GAUGE | (lancets) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| DROPSAFE ACTI-LANCE 23 GAUGE | | Tier 2 | |
| DROPSAFE MEDLANCE PLUS 30 GAUGE | (lancets) | Tier 2 | |
| EASY COMFORT LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| EASY COMFORT SAFETY LANCET 30 GAUGE | (lancets) | Tier 2 | |
| EASY TOUCH SAFETY LANCETS 21 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| EASY TOUCH SAFETY LANCETS 23 GAUGE, 32 GAUGE | | Tier 2 | |
| EASY TOUCH TWIST LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| EASY TOUCH TWIST LANCETS 32 GAUGE | | Tier 2 | |
| EASY TWIST AND CAP LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| EMBRACE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| EMBRACE SAFETY LANCET 21 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| EZ SMART LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| FINGERSTIX LANCETS | (lancets) | Tier 2 | |
| FONDCIRCLE LANCET 30 GAUGE | (lancets) | Tier 2 | |
| FORACARE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| FREESTYLE LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| FREESTYLE UNISTIK 2 | (lancets) | Tier 2 | |
| GLUCOCOM LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| GOJJI LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| INCONTROL SUPER THIN LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| INCONTROL ULTRA THIN LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| INJECT EASE LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| INVACARE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| *lancets* | (Accu-Chek Fastclix Lancet Drum) | Tier 2 | |
| *lancets 26 gauge, 30 gauge* | (Advocate Lancet) | Tier 2 | |
| *lancets 28 gauge* | (Acti-Lance Lancets) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *lancets 33 gauge* | (AgaMatrix Ultra-Thin Lancet) | Tier 2 | |
| LANCETS,THIN 28 GAUGE | (lancets) | Tier 2 | |
| MEDLANCE PLUS LANCETS 21 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| MEDLANCE PLUS LANCETS 25 GAUGE | | Tier 2 | |
| MEDLANCE PLUS SPECIAL BLADE 0.8 X 2 MM | | Tier 2 | |
| MICRO THIN LANCETS 33 GAUGE | (lancets) | Tier 2 | |
| MICROLET LANCET | (lancets) | Tier 2 | |
| MICROLET NEXT LANCET 28 GAUGE | (lancets) | Tier 2 | |
| MOBI BLOOD GLUCOSE TWIST LANCT 30 GAUGE | (lancets) | Tier 2 | |
| MOBILE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| MONOLET LANCETS 21 GAUGE | (lancets) | Tier 2 | |
| MONOLET THIN LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| MYGLUCOHEALTH LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| NOVA SAFETY LANCETS 23 GAUGE | | Tier 2 | |
| NOVA SAFETY LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| NOVA SUREFLEX LANCETS | (lancets) | Tier 2 | |
| ON CALL LANCET 30 GAUGE | (lancets) | Tier 2 | |
| ONETOUCH DELICA PLUS LANCET 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| ONETOUCH DELICA SAFETY LANCET 30 GAUGE | (lancets) | Tier 2 | |
| ONETOUCH ULTRASOFT 2 LANCET 30 GAUGE | (lancets) | Tier 2 | |
| ON-THE-GO LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| PERFECT POINT SAFETY LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| PIP LANCET 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| PRESSURE ACTIVATED LANCETS 21 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| PRO COMFORT LANCET 30 GAUGE | (lancets) | Tier 2 | |
| PRO COMFORT LANCET 31 GAUGE | | Tier 2 | |
| PRO COMFORT SAFETY LANCET 30 GAUGE | (lancets) | Tier 2 | |
| PRODIGY LANCETS 26 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| PRODIGY TWIST TOP LANCET 28 GAUGE | (lancets) | Tier 2 | |
| PURE COMFORT LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| PURE COMFORT SAFETY LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| PUSH BUTTON SAFETY LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| RELIAMED LANCET 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| RELIAMED SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| RIGHTEST GL300 LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| SAFETY LANCETS 21 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| SAFETY-LET LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| SENSILANCE 21 GAUGE, 26 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| SINGLE-LET | (lancets) | Tier 2 | |
| SMARTEST LANCET | (lancets) | Tier 2 | |
| SOLUS V2 LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| STERILANCE TL 30 GAUGE | (lancets) | Tier 2 | |
| STERILANCE TL 32 GAUGE | | Tier 2 | |
| SUPER THIN LANCETS 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| SURE COMFORT LANCETS 18 GAUGE, 23 GAUGE | | Tier 2 | |
| SURE COMFORT LANCETS 21 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| SURE-LANCE , 26 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| SURE-LANCE ULTRA THIN 30 GAUGE | (lancets) | Tier 2 | |
| SURE-TOUCH LANCET | (lancets) | Tier 2 | |
| TECHLITE LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| TELCARE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| THIN LANCETS 26 GAUGE | (lancets) | Tier 2 | |
| TRUE COMFORT LANCET 30 GAUGE | (lancets) | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| TRUE-COMFORT SAFETY LANCET 30 GAUGE | (lancets) | Tier 2 | |
| TRUEPLUS LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| TWIST LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| TWIST LANCETS 32 GAUGE | | Tier 2 | |
| ULTILET BASIC LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| ULTILET CLASSIC LANCETS , 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| ULTILET LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| ULTILET SAFETY LANCETS 23 GAUGE | | Tier 2 | |
| ULTRA THIN II LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| ULTRA THIN LANCETS , 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| ULTRA THIN LANCETS 31 GAUGE | | Tier 2 | |
| ULTRA TLC LANCETS | (lancets) | Tier 2 | |
| ULTRA-CARE LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| ULTRALANCE LANCETS 26 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| ULTRA-THIN II LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| UNILET COMFORTOUCH LANCET , 26 GAUGE | (lancets) | Tier 2 | |
| UNILET GP LANCET | (lancets) | Tier 2 | |
| UNILET LANCET 28 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| UNILET LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| UNILET SUPER THIN LANCETS 30 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 2 EXTRA LANCET 21 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 2 NORMAL LANCET 21 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 3 COMFORT LANCET 28 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 3 EXTRA LANCET 21 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 3 GENTLE 30 GAUGE | (lancets) | Tier 2 | |
| UNISTIK 3 NORMAL LANCET 23 GAUGE | | Tier 2 | |
| UNISTIK COMFORT LANCETS 28 GAUGE | (lancets) | Tier 2 | |
| UNISTIK CZT LANCET 23 GAUGE | | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| UNISTIK CZT LANCET 28 GAUGE | (lancets) | Tier 2 | |
| UNISTIK EXTRA LANCETS 21 GAUGE | (lancets) | Tier 2 | |
| UNISTIK NORMAL LANCETS 23 GAUGE | | Tier 2 | |
| UNISTIK PRO LANCET 21 GAUGE, 28 GAUGE | (lancets) | Tier 2 | |
| UNISTIK PRO LANCET 25 GAUGE | | Tier 2 | |
| UNISTIK SAFETY 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| UNISTIK TOUCH LANCETS 21 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| UNISTIK TOUCH LANCETS 23 GAUGE | | Tier 2 | |
| UNIVERSAL 1 LANCETS 26 GAUGE | (lancets) | Tier 2 | |
| VERIFINE SAFETY LANCET MINI 21 GAUGE, 28 GAUGE, 30 GAUGE | (lancets) | Tier 2 | |
| VERIFINE SAFETY LANCET MINI 23 GAUGE | | Tier 2 | |
| VERIFINE UNIVERSAL LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE | (lancets) | Tier 2 | |
| VIVAGUARD LANCET 30 GAUGE | (lancets) | Tier 2 | |
| VIVAGUARD SAFETY LANCET 28 GAUGE | (lancets) | Tier 2 | |
| **Feeding Devices** | | | |
| ENFIT IRRIGAT SYRINGE-CONTAINR KIT | | Tier 3 | |
| *enteral connector, enfit* | | Tier 3 | |
| ENTERAL GRAVITY BAG SET-ENFIT | | Tier 3 | |
| KANGAROO 924 SAFETY SCREW | (pump set) | Tier 3 | |
| KANGAROO EPUMP SET | | Tier 3 | |
| KANGAROO GRAVITY SET | | Tier 3 | |
| RELIZORB CARTRIDGE | | Tier 3 | |
| **Incontinence Supplies** | | | |
| FLEXI-SEAL SIGNAL FMS RECTAL | | Tier 3 | |
| TENSCARE ITOUCH SURE VAGINAL DEVICE | | Tier 3 | |
| **Medical Supplies,Miscellaneous** | | | |
| MAD NASAL ATOMIZER NASAL DEVICE | | Tier 3 | |
| VARITHENA ADMINISTRATION PACK | | Tier 3 | |

| Drug | Status | Notes |
|---|---|---|
| **Medical Supplies,Miscellaneous(Group 2)** | | |
| EAR POPPER INFLATION DEVICE NASAL DEVICE | Tier 3 | |
| PCCA ACCUPEN-15 DEVICE | Tier 3 | |
| PROVATE PELVIC ORGAN SUPPORT VAGINAL 61 MM, 67 MM, 73 MM, 79 MM, 85 MM, 91 MM | Tier 3 | |
| YONI FIT BLADDER SUPPORT VAGINAL 34-38 MM, 34-38-42 MM, 42-45 MM, 45-48-52 MM, 48-52 MM | Tier 3 | |
| **Parenteral Administration Sets** | | |
| ADD-VANTAGE ADDAPTOR | Tier 3 | |
| BD INSYTE AUTOGUARD INFUSION SET 22 GAUGE X 1", 24 GAUGE X 3/4" | Tier 3 | |
| BD SAF-T-INTIMA INFUSION SET 22 GAUGE X 3/4" | Tier 3 | |
| INSUFLON INFUSION SET 25 X 18 MM | Tier 3 | |
| INSYTE IV CATHETER INFUSION SET 14 X 1.75 ", 20 X 1.16 " | Tier 3 | |
| I-PORT | Tier 3 | |
| IVENIX ADMIN SET 2INLET 2YSITE INFUSION SET (iv administration set) | Tier 3 | |
| IVENIX ADMIN SET 2INLET Y-SITE INFUSION SET (iv administration set) | Tier 3 | |
| IVENIX ADMIN SET SINGLE-INLET INFUSION SET (iv administration set) | Tier 3 | |
| MONOJECT LUER ADAPTER INTRAVENOUS ADMIX ACCESSORY | Tier 3 | |
| NEXIVA INFUSION SET 18 X 1 1/4 ", 18 X 1 3/4 ", 20 GAUGE X 1", 20 X 1 1/4 ", 20 X 1 3/4 ", 22 GAUGE X 1", 24 GAUGE X 3/4", 24 X 0.56 " | Tier 3 | |
| **Syringes And Accessories** | | |
| EXTENDED RESERVOIR 3 ML | Tier 3 | |
| *insulin u-500 syringe-needle syringe 1/2 ml 31 gauge x 15/64"* | Tier 2 | |
| INTERLINK LEVER LOCK CANNULA | Tier 3 | |
| KENDALL DISINFECTANT CAP | Tier 3 | |
| PARADIGM RESERVOIR 1.8 ML, 3 ML | Tier 3 | |
| ULTRA-FINE INS SYR (HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16" | Tier 2 | |

| Drug | | Status | Notes |
|---|---|---|---|
| ULTRA-FINE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 31 GAUGE X 15/64" | (insulin syringe-needle u-100) | Tier 2 | |
| **Miscellaneous Agents** | | | |
| **Amyloidosis Agents-Transthyretin (Ttr) Suppression** | | | |
| WAINUA SUBCUTANEOUS AUTO-INJECTOR 45 MG/0.8 ML | | Tier 6 | PA; SP; QL (0.8 ML per 30 days) |
| **Anaphylaxis Therapy Agents** | | | |
| AUVI-Q INJECTION AUTO-INJECTOR 0.1 MG/0.1 ML | | Tier 2 | QL (2 EA per 365 days) |
| AUVI-Q INJECTION AUTO-INJECTOR 0.15 MG/0.15 ML, 0.3 MG/0.3 ML | (epinephrine) | Tier 2 | QL (2 EA per 365 days) |
| *epinephrine injection auto-injector 0.15 mg/0.15 ml, 0.3 mg/0.3 ml* | (Auvi-Q) | Tier 1 | QL (4 EA per 1 FILL) |
| *epinephrine injection auto-injector 0.15 mg/0.3 ml* | (EpiPen Jr) | Tier 1 | QL (4 EA per 1 FILL) |
| NEFFY NASAL SPRAY,NON-AEROSOL 1 MG/SPRAY (0.1 ML), 2 MG/SPRAY (0.1 ML) | | Tier 2 | QL (4 EA per 1 FILL) |
| **Cxcr4 Chemokine Receptor Antagonist** | | | |
| XOLREMDI ORAL CAPSULE 100 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| **Genetic D/O Tx-Exon Inclusion Antisense Oligonucle** | | | |
| EVRYSDI ORAL RECON SOLN 0.75 MG/ML | | Tier 6 | PA; SP; QL (8 ML per 1 day) |
| EVRYSDI ORAL TABLET 5 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Parasympathetic Agents** | | | |
| *bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg* | | Tier 1 | |
| *cevimeline oral capsule 30 mg* | (Evoxac) | Tier 1 | |
| *pilocarpine hcl oral tablet 5 mg, 7.5 mg* | (Salagen (pilocarpine)) | Tier 1 | |
| **Pharmacological Chaperone-Alpha-Galactosid.A Stabz** | | | |
| GALAFOLD ORAL CAPSULE 123 MG | | Tier 6 | PA; SP; QL (14 EA per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Pku Treatment Agents - Phenylalanine Ammonia Lyase** | | | |
| PALYNZIQ SUBCUTANEOUS SYRINGE 10 MG/0.5 ML | | Tier 5 | PA; SP; QL (0.5 ML per 1 day) |
| PALYNZIQ SUBCUTANEOUS SYRINGE 2.5 MG/0.5 ML | | Tier 5 | PA; SP; QL (1 ML per 7 days) |
| PALYNZIQ SUBCUTANEOUS SYRINGE 20 MG/ML | | Tier 5 | PA; SP; QL (3 ML per 1 day) |
| **Pku Tx Agent-Cofactor Of Phenylalanine Hydroxylase** | | | |
| JAVYGTOR ORAL POWDER IN PACKET 100 MG, 500 MG | (sapropterin) | Tier 4 | SP |
| JAVYGTOR ORAL TABLET,SOLUBLE 100 MG | (sapropterin) | Tier 4 | SP |
| KUVAN ORAL POWDER IN PACKET 100 MG, 500 MG | (sapropterin) | Tier 5 | SP |
| KUVAN ORAL TABLET,SOLUBLE 100 MG | (sapropterin) | Tier 5 | SP |
| *sapropterin oral powder in packet 100 mg, 500 mg* | (Javygtor) | Tier 4 | SP |
| *sapropterin oral tablet,soluble 100 mg* | (Javygtor) | Tier 4 | SP |
| SEPHIENCE ORAL POWDER IN PACKET 1,000 MG, 250 MG | | Tier 6 | PA; SP |
| ZELVYSIA ORAL POWDER IN PACKET 100 MG, 500 MG | (sapropterin) | Tier 4 | SP |
| **Systemic Enzyme Inhibitors** | | | |
| ARALAST NP INTRAVENOUS RECON SOLN 1,000 MG, 500 MG | | Tier 6 | PA; SP |
| GLASSIA INTRAVENOUS SOLUTION 20 MG/ML (2 %) | | Tier 6 | PA; SP |
| JOENJA ORAL TABLET 70 MG | | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| PROLASTIN-C INTRAVENOUS SOLUTION 1,000 MG (+/-)/20 ML | | Tier 6 | PA; SP |
| VIJOICE ORAL GRANULES IN PACKET 50 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| VIJOICE ORAL TABLET 125 MG, 50 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| VIJOICE ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1) | | Tier 6 | PA; SP; QL (56 EA per 28 days) |
| ZEMAIRA INTRAVENOUS RECON SOLN 1,000 MG, 4,000 MG, 5,000 MG | | Tier 6 | PA; SP |
| ZOKINVY ORAL CAPSULE 50 MG, 75 MG | | Tier 6 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Thyroid Hormone Receptor (Thr) Agonist** | | | |
| REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Topical Anticholinergic Hyperhidrosis Tx Agents** | | | |
| QBREXZA TOPICAL TOWELETTE 2.4 % | | Tier 3 | PA; QL (1 EA per 1 day) |
| SOFDRA TOPICAL GEL WITH PUMP 12.45 % (72 MG /ACTUATION) | | Tier 3 | PA; QL (1.34 ML per 1 day) |
| **Neoplastic Disease** | | | |
| **Alkylating Agents** | | | |
| ALKERAN ORAL TABLET 2 MG | (melphalan) | Tier 6 | SP |
| *cyclophosphamide oral capsule 25 mg, 50 mg* | | Tier 4 | SP |
| *cyclophosphamide oral tablet 50 mg* | | Tier 4 | SP |
| *hydroxyurea oral capsule 500 mg* | (Hydrea) | Tier 1 | |
| LEUKERAN ORAL TABLET 2 MG | | Tier 5 | SP |
| *lomustine oral capsule 10 mg, 100 mg, 40 mg* | (Gleostine) | Tier 4 | PA; SP |
| MYLERAN ORAL TABLET 2 MG | | Tier 5 | SP |
| *temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg* | | Tier 4 | PA; SP |
| **Antiandrogenic Agents** | | | |
| *abiraterone oral tablet 250 mg* | (Abirtega) | Tier 4 | PA; SP |
| *abiraterone oral tablet 500 mg* | (Zytiga) | Tier 4 | PA; SP |
| ABIRTEGA ORAL TABLET 250 MG | (abiraterone) | Tier 4 | PA; SP |
| *bicalutamide oral tablet 50 mg* | (Casodex) | Tier 1 | |
| ERLEADA ORAL TABLET 240 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| ERLEADA ORAL TABLET 60 MG | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *nilutamide oral tablet 150 mg* | | Tier 4 | SP |
| NUBEQA ORAL TABLET 300 MG | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| XTANDI ORAL CAPSULE 40 MG | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| XTANDI ORAL TABLET 40 MG | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| XTANDI ORAL TABLET 80 MG | | Tier 5 | PA; SP; QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| YONSA ORAL TABLET 125 MG | (abiraterone, submicronized) | Tier 6 | PA; SP |
| **Antimetabolites** | | | |
| *capecitabine oral tablet 150 mg, 500 mg* | | Tier 4 | PA; SP |
| INQOVI ORAL TABLET 35-100 MG | | Tier 6 | PA; SP; QL (5 EA per 28 days) |
| JYLAMVO ORAL SOLUTION 2 MG/ML | | Tier 3 | PA |
| LONSURF ORAL TABLET 15-6.14 MG | | Tier 5 | PA; SP; QL (100 EA per 28 days) |
| LONSURF ORAL TABLET 20-8.19 MG | | Tier 5 | PA; SP; QL (80 EA per 28 days) |
| *mercaptopurine oral suspension 20 mg/ml* | (Purixan) | Tier 4 | SP; ST: TRIAL OF MERCAPTOPURINE TABLET REQUIRED. |
| *mercaptopurine oral tablet 50 mg* | | Tier 1 | |
| *methotrexate sodium (pf) injection solution 25 mg/ml* | | Tier 1 | |
| *methotrexate sodium injection solution 25 mg/ml* | | Tier 1 | |
| *methotrexate sodium oral tablet 2.5 mg* | | Tier 1 | |
| ONUREG ORAL TABLET 200 MG, 300 MG | | Tier 6 | PA; SP; QL (14 EA per 28 days) |
| TABLOID ORAL TABLET 40 MG | (thioguanine) | Tier 5 | SP |
| TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG | | Tier 3 | |
| XATMEP ORAL SOLUTION 2.5 MG/ML | | Tier 3 | PA; QL (120 ML per 60 days) |
| **Antineoplastic Aromatase Inhibitors** | | | |
| *anastrozole oral tablet 1 mg* | (Arimidex) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY AND 35 YEARS OF AGE OR OLDER |
| *exemestane oral tablet 25 mg* | (Aromasin) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY AND 35 YEARS OF AGE OR OLDER |
| *letrozole oral tablet 2.5 mg* | (Femara) | Tier 1 | |
| **Antineoplastic - Braf Kinase Inhibitors** | | | |
| BRAFTOVI ORAL CAPSULE 75 MG | | Tier 6 | PA; SP |
| OJEMDA ORAL SUSPENSION FOR RECONSTITUTION 25 MG/ML | | Tier 6 | PA; SP; QL (96 ML per 28 days) |
| OJEMDA ORAL TABLET 400 MG/WEEK (100 MG X 4), 500 MG/WEEK (100 MG X 5), 600 MG/WEEK (100 MG X 6) | | Tier 6 | PA; SP; QL (24 EA per 28 days) |

| Drug | Status | Notes |
|---|---|---|
| TAFINLAR ORAL CAPSULE 50 MG, 75 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| TAFINLAR ORAL TABLET FOR SUSPENSION 10 MG | Tier 5 | PA; SP; QL (30 EA per 1 day) |
| ZELBORAF ORAL TABLET 240 MG | Tier 5 | PA; SP; QL (8 EA per 1 day) |
| **Antineoplastic - Hedgehog Pathway Inhibitor** | | |
| DAURISMO ORAL TABLET 100 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| DAURISMO ORAL TABLET 25 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| ERIVEDGE ORAL CAPSULE 150 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| ODOMZO ORAL CAPSULE 200 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Antineoplastic - Janus Kinase (Jak) Inhibitors** | | |
| JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG, 22 MG, 33 MG, 44 MG, 55 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Antineoplastic - Kras Protein Inhibitor** | | |
| KRAZATI ORAL TABLET 200 MG | Tier 5 | PA; SP; QL (6 EA per 1 day) |
| LUMAKRAS ORAL TABLET 120 MG | Tier 5 | PA; SP; QL (8 EA per 1 day) |
| LUMAKRAS ORAL TABLET 240 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| LUMAKRAS ORAL TABLET 320 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| RASONQUE ORAL TABLET 100 MG, 150 MG | Tier 6 | PA; SP |
| **Antineoplastic - Mek1 And Mek2 Kinase Inhibitors** | | |
| COTELLIC ORAL TABLET 20 MG | Tier 5 | PA; SP; QL (63 EA per 28 days) |
| GOMEKLI ORAL CAPSULE 1 MG | Tier 6 | PA; SP; QL (8 EA per 1 day) |
| GOMEKLI ORAL CAPSULE 2 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| GOMEKLI ORAL TABLET FOR SUSPENSION 1 MG | Tier 6 | PA; SP; QL (8 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| KOSELUGO ORAL CAPSULE 10 MG | | Tier 6 | PA; SP; QL (10 EA per 1 day) |
| KOSELUGO ORAL CAPSULE 25 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| KOSELUGO ORAL CAPSULE, SPRINKLE 5 MG | | Tier 6 | PA; SP; QL (20 EA per 1 day) |
| KOSELUGO ORAL CAPSULE, SPRINKLE 7.5 MG | | Tier 6 | PA; SP; QL (13 EA per 1 day) |
| MEKINIST ORAL RECON SOLN 0.05 MG/ML | | Tier 5 | PA; SP; QL (42 ML per 1 day) |
| MEKINIST ORAL TABLET 0.5 MG | | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| MEKINIST ORAL TABLET 2 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| MEKTOVI ORAL TABLET 15 MG | | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| **Antineoplastic - Mtor Kinase Inhibitors** | | | |
| *everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg* | (Torpenz) | Tier 4 | PA; SP |
| *everolimus (antineoplastic) oral tablet for suspension 2 mg, 3 mg, 5 mg* | (Afinitor Disperz) | Tier 4 | PA; SP |
| TORPENZ ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG | (everolimus (antineoplastic)) | Tier 4 | PA; SP |
| YULITHIRA ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG | (everolimus (antineoplastic)) | Tier 4 | PA; SP |
| **Antineoplastic - Topoisomerase I Inhibitors** | | | |
| HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG | | Tier 5 | SP |
| **Antineoplastic Immunomodulator Agents** | | | |
| *lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg* | (Revlimid) | Tier 4 | PA; SP |
| *pomalidomide oral capsule 1 mg, 2 mg, 3 mg, 4 mg* | (Pomalyst) | Tier 4 | PA; SP; QL (21 EA per 28 days) |
| **Antineoplastic Lhrh(Gnrh) Antagonist,Pituit.Supprs** | | | |
| FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 120 MG | | Tier 6 | SP; QL (2 EA per 365 days) |
| FIRMAGON KIT W DILUENT SYRINGE SUBCUTANEOUS RECON SOLN 80 MG | | Tier 6 | SP; QL (1 EA per 30 days) |

| Drug | Status | Notes |
|---|---|---|
| ORGOVYX ORAL TABLET 120 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Antineoplastic Systemic Enzyme Inhibitors** | | |
| ALECENSA ORAL CAPSULE 150 MG | Tier 5 | PA; SP; QL (8 EA per 1 day) |
| ALUNBRIG ORAL TABLET 180 MG, 90 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| ALUNBRIG ORAL TABLET 30 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| ALUNBRIG ORAL TABLETS,DOSE PACK 90 MG (7)- 180 MG (23) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| AUGTYRO ORAL CAPSULE 160 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| AUGTYRO ORAL CAPSULE 40 MG | Tier 5 | PA; SP; QL (8 EA per 1 day) |
| AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| BALVERSA ORAL TABLET 3 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| BALVERSA ORAL TABLET 4 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| BALVERSA ORAL TABLET 5 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| BOSULIF ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (6 EA per 1 day) |
| BOSULIF ORAL CAPSULE 50 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| *bosutinib oral tablet 100 mg* (Bosulif) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| *bosutinib oral tablet 400 mg, 500 mg* (Bosulif) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| BRUKINSA ORAL TABLET 160 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| CABOMETYX ORAL TABLET 20 MG, 60 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| CABOMETYX ORAL TABLET 40 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| CAPRELSA ORAL TABLET 100 MG (vandetanib) | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| CAPRELSA ORAL TABLET 300 MG (vandetanib) | Tier 6 | PA; SP; QL (1 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| COMETRIQ ORAL CAPSULE 100 MG/DAY(80 MG X1-20 MG X1), 140 MG/DAY(80 MG X1-20 MG X3), 60 MG/DAY (20 MG X 3/DAY) | Tier 5 | PA; SP; QL (112 EA per 28 days) |
| COPIKTRA ORAL CAPSULE 15 MG, 25 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| DANZITEN ORAL TABLET 71 MG, 95 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *dasatinib oral tablet 100 mg, 140 mg, 50 mg, 70 mg, 80 mg* (Sprycel) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| *dasatinib oral tablet 20 mg* (Sprycel) | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| ENSACOVE ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| ENSACOVE ORAL CAPSULE 25 MG | Tier 5 | PA; SP; QL (9 EA per 1 day) |
| *erlotinib oral tablet 100 mg, 25 mg* | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| *erlotinib oral tablet 150 mg* | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG | Tier 6 | PA; SP; QL (21 EA per 28 days) |
| FRUZAQLA ORAL CAPSULE 1 MG | Tier 5 | PA; SP; QL (84 EA per 28 days) |
| FRUZAQLA ORAL CAPSULE 5 MG | Tier 5 | PA; SP; QL (21 EA per 28 days) |
| GAVRETO ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *gefitinib oral tablet 250 mg* (Iressa) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG (afatinib) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| HERNEXEOS ORAL TABLET 60 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| HYRNUO ORAL TABLET 10 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG | Tier 6 | PA; SP; QL (21 EA per 28 days) |
| IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG | Tier 6 | PA; SP; QL (21 EA per 28 days) |
| IBTROZI ORAL CAPSULE 200 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| *imatinib oral tablet 100 mg, 400 mg* (Gleevec) | Tier 4 | PA; SP |
| IMBRUVICA ORAL CAPSULE 140 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| IMBRUVICA ORAL CAPSULE 70 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| IMBRUVICA ORAL SUSPENSION 70 MG/ML | Tier 5 | PA; SP; QL (7.2 ML per 1 day) |
| IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| IMKELDI ORAL SOLUTION 80 MG/ML | Tier 6 | PA; SP |
| INLYTA ORAL TABLET 1 MG | Tier 5 | PA; SP; QL (6 EA per 1 day) |
| INLYTA ORAL TABLET 5 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| INREBIC ORAL CAPSULE 100 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| ITOVEBI ORAL TABLET 3 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| ITOVEBI ORAL TABLET 9 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| IWILFIN ORAL TABLET 192 MG | Tier 6 | PA; SP; QL (8 EA per 1 day) |
| JAYPIRCA ORAL TABLET 100 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| JAYPIRCA ORAL TABLET 50 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1) | Tier 5 | PA; SP; QL (21 EA per 28 days) |
| KISQALI ORAL TABLET 400 MG/DAY (200 MG X 2) | Tier 5 | PA; SP; QL (42 EA per 28 days) |
| KISQALI ORAL TABLET 600 MG/DAY (200 MG X 3) | Tier 5 | PA; SP; QL (63 EA per 28 days) |
| KOMZIFTI ORAL CAPSULE 200 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| *lapatinib oral tablet 250 mg* (Tykerb) | Tier 4 | PA; SP |
| LAZCLUZE ORAL TABLET 240 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| LAZCLUZE ORAL TABLET 80 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| LENVIMA ORAL CAPSULE 10 MG/DAY (10 MG X 1), 12 MG/DAY (4 MG X 3), 14 MG/DAY(10 MG X 1-4 MG X 1), 18 MG/DAY (10 MG X 1-4 MG X2), 20 MG/DAY (10 MG X 2), 24 MG/DAY(10 MG X 2-4 MG X 1), 4 MG, 8 MG/DAY (4 MG X 2) | Tier 5 | PA; SP |
| LORBRENA ORAL TABLET 100 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| LORBRENA ORAL TABLET 25 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| LYNPARZA ORAL TABLET 100 MG, 150 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| LYTGOBI ORAL TABLET 12 MG/DAY (4 MG X 3), 16 MG/DAY (4 MG X 4), 20 MG/DAY (4 MG X 5) | Tier 5 | PA; SP; QL (5 EA per 1 day) |
| NERLYNX ORAL TABLET 40 MG | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| *nilotinib hcl oral capsule 150 mg, 200 mg, 50 mg* (Tasigna) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG | Tier 5 | PA; SP; QL (3 EA per 28 days) |
| OGSIVEO ORAL TABLET 100 MG, 150 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| *pazopanib oral tablet 200 mg* (Votrient) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| *pazopanib oral tablet 400 mg* | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG | Tier 6 | PA; SP |
| PIQRAY ORAL TABLET 200 MG/DAY (200 MG X 1) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| PIQRAY ORAL TABLET 250 MG/DAY (200 MG X1-50 MG X1), 300 MG/DAY (150 MG X 2) | Tier 5 | PA; SP; QL (56 EA per 28 days) |
| QINLOCK ORAL TABLET 50 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| RETEVMO ORAL TABLET 120 MG, 160 MG, 80 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| RETEVMO ORAL TABLET 40 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| REVUFORJ ORAL TABLET 110 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| REVUFORJ ORAL TABLET 160 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| REVUFORJ ORAL TABLET 25 MG | Tier 6 | PA; SP; QL (8 EA per 1 day) |
| ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG | Tier 6 | PA; SP; QL (8 EA per 28 days) |
| ROZLYTREK ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (5 EA per 1 day) |
| ROZLYTREK ORAL CAPSULE 200 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| ROZLYTREK ORAL PELLETS IN PACKET 50 MG | Tier 5 | PA; SP; QL (12 EA per 1 day) |
| RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| RYDAPT ORAL CAPSULE 25 MG | Tier 5 | PA; SP |
| SCEMBLIX ORAL TABLET 100 MG, 20 MG, 40 MG | Tier 5 | PA; SP |
| *sorafenib oral tablet 200 mg* (Nexavar) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| STIVARGA ORAL TABLET 40 MG | Tier 5 | PA; SP; QL (84 EA per 28 days) |
| *sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg* (Sutent) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| TABRECTA ORAL TABLET 150 MG, 200 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| TAGRISSO ORAL TABLET 40 MG, 80 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| TEPMETKO ORAL TABLET 225 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| TRUQAP ORAL TABLET 160 MG, 200 MG | Tier 5 | PA; SP; QL (64 EA per 28 days) |
| TUKYSA ORAL TABLET 150 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| TUKYSA ORAL TABLET 50 MG | Tier 6 | PA; SP; QL (10 EA per 1 day) |
| TURALIO ORAL CAPSULE 125 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG | Tier 5 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| VITRAKVI ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| VITRAKVI ORAL CAPSULE 25 MG | Tier 5 | PA; SP; QL (6 EA per 1 day) |
| VITRAKVI ORAL SOLUTION 20 MG/ML | Tier 5 | PA; SP; QL (10 ML per 1 day) |
| VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| VONJO ORAL CAPSULE 100 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| XOSPATA ORAL TABLET 40 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| ZYDELIG ORAL TABLET 100 MG, 150 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| ZYKADIA ORAL TABLET 150 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Antineoplastic,Histone Deacetylase Inhibitors,Hdis** | | |
| ZOLINZA ORAL CAPSULE 100 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| **Antineoplastic-B Cell Lymphoma-2(Bcl-2) Inhibitors** | | |
| VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG | Tier 5 | PA; SP |
| VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG-100 MG | Tier 5 | PA; SP |
| **Antineoplastic-Enzyme Inhib, Antiandrogen Comb.** | | |
| AKEEGA ORAL TABLET 100-500 MG, 50-500 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| **Antineoplastic-Hypoxia Inducible Factor (Hif) Inh** | | |
| WELIREG ORAL TABLET 40 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| **Antineoplastic-Isocitrate Dehydrogenase Inhibitors** | | |
| IDHIFA ORAL TABLET 100 MG, 50 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| REZLIDHIA ORAL CAPSULE 150 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| TIBSOVO ORAL TABLET 250 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| VORANIGO ORAL TABLET 10 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| VORANIGO ORAL TABLET 40 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Antineoplastics,Miscellaneous** | | |
| *etoposide oral capsule 50 mg* (VePesid) | Tier 1 | |
| LYSODREN ORAL TABLET 500 MG | Tier 5 | SP |
| MATULANE ORAL CAPSULE 50 MG | Tier 5 | SP |
| *tretinoin (antineoplastic) oral capsule 10 mg* | Tier 4 | SP |
| **Antineoplastic-Select Inhib Of Nuclear Exp (Sine)** | | |
| XPOVIO ORAL TABLET 100 MG/WEEK (50 MG X 2), 40MG TWICE WEEK (40 MG X 2), 80 MG/WEEK (40 MG X 2), 80 MG/WEEK (80 MG X 1) | Tier 6 | PA; SP; QL (8 EA per 28 days) |
| XPOVIO ORAL TABLET 40 MG/WEEK (10 MG X 4) | Tier 6 | PA; SP; QL (16 EA per 28 days) |
| XPOVIO ORAL TABLET 60 MG/WEEK (60 MG X 1) | Tier 6 | PA; SP; QL (4 EA per 28 days) |
| XPOVIO ORAL TABLET 60MG TWICE WEEK (120 MG/WEEK) | Tier 6 | PA; SP; QL (24 EA per 28 days) |
| XPOVIO ORAL TABLET 80MG TWICE WEEK (160 MG/WEEK) | Tier 6 | PA; SP; QL (32 EA per 28 days) |
| **Chemotherapy Rescue/Antidote Agents** | | |
| *leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg* | Tier 1 | |
| *mesna oral tablet 400 mg* (Mesnex) | Tier 1 | |
| **Photoactivated, Antineopls. & Premalignant Lesions** | | |
| AMELUZ TOPICAL GEL 10 % | Tier 3 | |
| LEVULAN TOPICAL SOLUTION 20 % | Tier 3 | |
| **Selective Estrogen Receptor Modulators (Serm)** | | |
| INLURIYO ORAL TABLET 200 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |
| ORSERDU ORAL TABLET 345 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| ORSERDU ORAL TABLET 86 MG | | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| SOLTAMOX ORAL SOLUTION 20 MG/10 ML | | Tier 2 | |
| *tamoxifen oral tablet 10 mg, 20 mg* | | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY AND 35 YEARS OF AGE OR OLDER |
| *toremifene oral tablet 60 mg* | (Fareston) | Tier 4 | SP; QL (1 EA per 1 day) |
| VEPPANU ORAL TABLET 100 MG, 200 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Selective Retinoid X Receptor Agonists (Rxr)** | | | |
| *bexarotene oral capsule 75 mg* | (Targretin) | Tier 4 | PA; SP |
| **Steroid Antineoplastics** | | | |
| *megestrol oral tablet 20 mg, 40 mg* | | Tier 1 | |
| **Neurological Disease - Miscellaneous** | | | |
| **Agents To Treat Multiple Sclerosis** | | | |
| AVONEX INTRAMUSCULAR PEN INJECTOR 30 MCG/0.5 ML | | Tier 5 | PA; SP; QL (2 ML per 28 days) |
| AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML | | Tier 5 | PA; SP; QL (1 EA per 28 days) |
| AVONEX INTRAMUSCULAR SYRINGE 30 MCG/0.5 ML | | Tier 5 | PA; SP; QL (2 ML per 28 days) |
| AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML | | Tier 5 | PA; SP; QL (1 EA per 28 days) |
| BETASERON SUBCUTANEOUS KIT 0.3 MG | | Tier 5 | PA; SP; QL (14 EA per 28 days) |
| *cladribine(multiple sclerosis) oral tablet 10 mg* | (Mavenclad (10 tablet pack)) | Tier 4 | PA; SP |
| COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML | (glatiramer) | Tier 5 | PA; SP; QL (12 ML per 28 days) |
| *dimethyl fumarate oral capsule,delayed release(dr/ec) 120 mg, 120 mg (14)- 240 mg (46), 240 mg* | (Tecfidera) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| *fingolimod oral capsule 0.5 mg* | (Gilenya) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| GILENYA ORAL CAPSULE 0.25 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| *glatiramer subcutaneous syringe 20 mg/ml* | (Glatopa) | Tier 4 | PA; SP; QL (1 ML per 1 day) |
| *glatiramer subcutaneous syringe 40 mg/ml* | (Glatopa) | Tier 4 | PA; SP; QL (12 ML per 28 days) |

| Drug | Status | Notes |
|---|---|---|
| GLATOPA SUBCUTANEOUS SYRINGE 20 MG/ML (glatiramer) | Tier 4 | PA; SP; QL (1 ML per 1 day) |
| GLATOPA SUBCUTANEOUS SYRINGE 40 MG/ML (glatiramer) | Tier 4 | PA; SP; QL (12 ML per 28 days) |
| KESIMPTA PEN SUBCUTANEOUS PEN INJECTOR 20 MG/0.4 ML | Tier 5 | PA; SP |
| MAYZENT ORAL TABLET 0.25 MG, 1 MG, 2 MG | Tier 5 | PA; SP |
| MAYZENT STARTER(FOR 1MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (7 TABS) | Tier 5 | PA; SP |
| MAYZENT STARTER(FOR 2MG MAINT) ORAL TABLETS,DOSE PACK 0.25 MG (12 TABS) | Tier 5 | PA; SP |
| PLEGRIDY INTRAMUSCULAR SYRINGE 125 MCG/0.5 ML | Tier 5 | PA; SP |
| PLEGRIDY SUBCUTANEOUS PEN INJECTOR 125 MCG/0.5 ML | Tier 5 | PA; SP; QL (1 ML per 28 days) |
| PLEGRIDY SUBCUTANEOUS PEN INJECTOR 63 MCG/0.5 ML- 94 MCG/0.5 ML | Tier 5 | PA; SP |
| PLEGRIDY SUBCUTANEOUS SYRINGE 125 MCG/0.5 ML | Tier 5 | PA; SP; QL (1 ML per 28 days) |
| PLEGRIDY SUBCUTANEOUS SYRINGE 63 MCG/0.5 ML- 94 MCG/0.5 ML | Tier 5 | PA; SP |
| REBIF (WITH ALBUMIN) SUBCUTANEOUS SYRINGE 22 MCG/0.5 ML, 44 MCG/0.5 ML | Tier 5 | PA; SP; QL (6 ML per 28 days) |
| REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 22 MCG/0.5 ML, 44 MCG/0.5 ML | Tier 5 | PA; SP; QL (6 ML per 28 days) |
| REBIF REBIDOSE SUBCUTANEOUS PEN INJECTOR 8.8MCG/0.2ML-22 MCG/0.5ML (6) | Tier 5 | PA; SP |
| REBIF TITRATION PACK SUBCUTANEOUS SYRINGE 8.8MCG/0.2ML-22 MCG/0.5ML (6) | Tier 5 | PA; SP |
| *teriflunomide oral tablet 14 mg, 7 mg* (Aubagio) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| VUMERITY ORAL CAPSULE,DELAYED RELEASE(DR/EC) 231 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| **Agts Tx Neuromusc Transmission Dis,Pot-Chan Blkr** | | |
| *dalfampridine oral tablet extended release 12 hr 10 mg* (Ampyra) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| FIRDAPSE ORAL TABLET 10 MG | Tier 6 | PA; SP; QL (10 EA per 1 day) |
| **Amyotrophic Lateral Sclerosis Agents** | | |
| RADICAVA ORS ORAL SUSPENSION 105 MG/5 ML | Tier 6 | PA; SP; QL (50 ML per 28 days) |
| RADICAVA ORS STARTER KIT SUSP ORAL SUSPENSION 105 MG/5 ML | Tier 6 | PA; SP; QL (50 ML per 28 days) |
| *riluzole oral tablet 50 mg* | Tier 1 | |
| TEGLUTIK ORAL SUSPENSION 50 MG/10 ML | Tier 6 | PA; SP; QL (20 ML per 1 day) |
| TIGLUTIK ORAL SUSPENSION 50 MG/10 ML | Tier 6 | PA; SP; QL (20 ML per 1 day) |
| **Fibromyalgia Agents,Serotonin-Norepineph Ru Inhib** | | |
| *milnacipran oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg* (Savella) | Tier 1 | ST: TRIAL OF TWO: AMITRIPTYLINE TABS, CYCLOBENZAPRINE IR TABS, DULOXETINE (20, 30, 60MG) CAPS, GENERIC GABAPENTIN IR TABS/CAPS OR PREGABALIN IR CAPS IN THE PAST 365 DAYS; QL (2 EA per 1 day) |
| *milnacipran oral tablets,dose pack 12.5 mg (5)-25 mg(8)-50 mg(42)* (Savella) | Tier 1 | ST: TRIAL OF TWO: AMITRIPTYLINE TABS, CYCLOBENZAPRINE IR TABS, DULOXETINE (20, 30, 60MG) CAPS, GENERIC GABAPENTIN IR TABS/CAPS OR PREGABALIN IR CAPS IN THE PAST 365 DAYS; QL (2 EA per 1 day) |
| **Glypromate (Gpe) Analogs** | | |
| DAYBUE ORAL SOLUTION 200 MG/ML | Tier 6 | PA; SP; QL (120 ML per 1 day) |
| DAYBUE STIX ORAL POWDER IN PACKET 5,000 MG, 6,000 MG | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| DAYBUE STIX ORAL POWDER IN PACKET 8,000 MG | Tier 6 | PA; SP; QL (2 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| **Heat Shock Protein (Hsp) Modulating Agents** | | |
| MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Metabolic Disease Enzyme Replacement, Mocd** | | |
| NULIBRY INTRAVENOUS RECON SOLN 9.5 MG | Tier 6 | PA; SP |
| **Movement Disorders(Drug Therapy)** | | |
| INGREZZA INITIATION PK(TARDIV) ORAL CAPSULE,DOSE PACK 40 MG (7)- 80 MG (21) | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| INGREZZA SPRINKLE ORAL CAPSULE, SPRINKLE 40 MG, 60 MG, 80 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| *tetrabenazine oral tablet 12.5 mg, 25 mg* (Xenazine) | Tier 4 | PA; SP |
| **Neuropathic Agents** | | |
| *pregabalin oral tablet extended release 24 hr 165 mg, 82.5 mg* (Lyrica CR) | Tier 1 | ST: TRIAL OF 2 OF THE FOLLOWING REQUIRED: GABAPENTIN, A TRICYCLIC ANTIDEPRESSANT, DULOXETINE, VENLAFAXINE, VALPROIC ACID, PREGABALIN IR, OR DIVALPROEX.; QL (3 EA per 1 day) |
| *pregabalin oral tablet extended release 24 hr 330 mg* (Lyrica CR) | Tier 1 | ST: TRIAL OF 2 OF THE FOLLOWING REQUIRED: GABAPENTIN, A TRICYCLIC ANTIDEPRESSANT, DULOXETINE, VENLAFAXINE, VALPROIC ACID, PREGABALIN IR, OR DIVALPROEX.; QL (2 EA per 1 day) |
| **Nuclear Factor Erythroid 2-Rel. Factor 2 Activator** | | |
| SKYCLARYS ORAL CAPSULE 50 MG | Tier 6 | PA; SP; QL (3 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Pseudobulbar Affect (Pba) Agents, Nmda Antagonists** | | | |
| *dextromethorphan-quinidine oral capsule 20-10 mg* | (Nuedexta) | Tier 1 | PA; QL (2 EA per 1 day) |
| **Sphingosine 1-Phosphate (S1p) Receptor Modulator** | | | |
| ZEPOSIA ORAL CAPSULE 0.92 MG | | Tier 6 | PA; SP |
| ZEPOSIA STARTER KIT (28-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG-0.46 MG -0.92 MG (21) | | Tier 6 | PA; SP |
| ZEPOSIA STARTER PACK (7-DAY) ORAL CAPSULE,DOSE PACK 0.23 MG (4)- 0.46 MG (3) | | Tier 6 | PA; SP |
| **Oral/Pharyngeal Disorders** | | | |
| **Dental Aids And Preparations** | | | |
| *chlorhexidine gluconate mucous membrane mouthwash 0.12 %* | (Periogard) | Tier 1 | |
| ORALONE DENTAL PASTE 0.1 % | (triamcinolone acetonide) | Tier 1 | |
| PERIOGARD MUCOUS MEMBRANE MOUTHWASH 0.12 % | (chlorhexidine gluconate) | Tier 1 | |
| Q-CARE RX Q2 KIT 0.12 % | | Tier 3 | |
| Q-CARE RX Q4 KIT 0.12 % | | Tier 3 | |
| *triamcinolone acetonide dental paste 0.1 %* | (Oralone) | Tier 1 | |
| **Nose Preparations, Miscellaneous (Rx)** | | | |
| *ipratropium bromide nasal spray,non-aerosol 21 mcg (0.03 %), 42 mcg (0.06 %)* | | Tier 1 | |
| **Periodontal Collagenase Inhibitors** | | | |
| *doxycycline hyclate oral tablet 20 mg* | | Tier 1 | |
| **Other Drugs** | | | |
| **Abortifacient,Progesterone Receptor Antagonist-Typ** | | | |
| MIFEPREX ORAL TABLET 200 MG | (mifepristone) | Tier 3 | |
| *mifepristone oral tablet 200 mg* | (Mifeprex) | Tier 1 | |
| **Agents For Stomatological Use** | | | |
| DEBACTEROL MUCOUS MEMBRANE SOLUTION 30-50 % | | Tier 3 | |
| **Antineoplastic - Glucocorticoid Receptor Antag.** | | | |
| LIFYORLI ORAL CAPSULE 125 MG/DAY(100 MG X1-25MG X1), 150 MG/DAY(100 MG X1-25MG X2) | | Tier 6 | PA; SP |

| Drug | Status | Notes |
|---|---|---|
| **Antineoplastic - Systemic Enzyme Inhibitors Combs** | | |
| AVMAPKI-FAKZYNJA ORAL COMBO PACK 0.8-200 MG | Tier 6 | PA; SP; QL (66 EA per 28 days) |
| **Antineoplastic Systemic Enzyme Activators** | | |
| MODEYSO ORAL CAPSULE 125 MG | Tier 6 | PA; SP; QL (20 EA per 28 days) |
| **Antipsychotics, Muscarinic Agonist/Antagonist Comb** | | |
| COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG | Tier 3 | ST: TRIAL OF A GENERIC ATYPICAL ANTIPSYCHOTIC, CAPLYTA, REXULTI OR VRAYLAR IN THE PAST 120 DAYS; QL (2 EA per 1 day) |
| COBENFY STARTER PACK ORAL CAPSULE,DOSE PACK 50 MG-20 MG /100 MG-20 MG | Tier 3 | ST: TRIAL OF A GENERIC ATYPICAL ANTIPSYCHOTIC, CAPLYTA, REXULTI OR VRAYLAR IN THE PAST 120 DAYS |
| **Antiretroviral - Capsid Inhibitors (Prep)** | | |
| YEZTUGO ORAL TABLET 300 MG | Tier 3 | |
| YEZTUGO SUBCUTANEOUS SOLUTION 309 MG/ML | Tier 3 | |
| **Antiretroviral-Integrase And Capsid Inhibitor Comb** | | |
| BIXLENVO ORAL TABLET 75-50 MG | Tier 3 | |
| **Appetite Stim. For Anorexia,Cachexia,Wasting Synd.** | | |
| *megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)* | Tier 1 | |
| *megestrol oral suspension 625 mg/5 ml (125 mg/ml)* | Tier 1 | ST: TRIAL OF MEGESTROL ACETATE 40MG/ML SUSPENSION REQUIRED |
| **Artv Cmb - Nucleoside Analogs & Non-Nucleoside Rti** | | |
| IDVYNSO ORAL TABLET 100-0.25 MG | Tier 2 | QL (1 EA per 1 day) |
| **Blood Collection Set With Local Anesthetics** | | |
| CADIRA COMPLIANT BLOOD STAT KIT 21 GAUGE X 3/4" -2.5 %-2.5 % | Tier 3 | |

| Drug | Status | Notes |
|---|---|---|
| LIDO BDK KIT 21 GAUGE X 1"- 2.5 %-<br>2.5 % | Tier 3 | |
| **Blood Testing Preparations,In-Vitro** | | |
| COAGUCHEK XS | Tier 3 | |
| **Cardiolipin Binding Agents** | | |
| FORZINITY SUBCUTANEOUS<br>SOLUTION 80 MG/ML | Tier 6 | PA; SP; QL (3.5 ML per 7 days) |
| **Coloring Agents And Dyes** | | |
| *methylene blue (bulk-solid) powder* | Tier 3 | |
| **Conception Assistance Supplies** | | |
| CONCEPTION KIT | Tier 3 | |
| **Condoms** | | |
| AIMSCO LATEX CONDOM DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| DUREX AVANTI BARE REAL FEEL | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| DUREX EXTRA SENSITIVE CONDOM<br>DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| DUREX TROPICAL CONDOM DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| FANTASY CONDOM DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| FC2 FEMALE CONDOM | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO LUBRICATED CONDOMS<br>DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO MICROTHIN AQUA LUBE<br>CON DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO MICROTHIN CONDOMS<br>DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO MICROTHIN LARGE<br>CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO TEXTURED CONDOMS<br>DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| KIMONO THIN LUBRICATED<br>CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| TROJAN BARESKIN DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| TROJAN ULTRA RIBBED CONDOM<br>DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |
| TRUE COVER CONDOM DEVICE | ACA Tier | IF QL=60 THEN $0<br>COPAY |

| Drug | Status | Notes |
|---|---|---|
| TRUSTEX LATEX CONDOM DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| TRUSTEX LUBRICATED CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| TRUSTEX NON-LUB CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| TRUSTEX-RIA LUB/SPERMICIDE DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| TRUSTEX-RIA LUBRICATED CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| TRUSTEX-RIA NON-LUB CONDOMS DEVICE | ACA Tier | IF QL=60 THEN $0 COPAY |
| **Cryopreservative Agents** | | |
| CRYOSERV SOLUTION 99 % | Tier 3 | |
| **Cystic Fibrosis - Inhaled Osmotic Agents** | | |
| BRONCHITOL INHALATION CAPSULE, W/INHALATION DEVICE 40 MG | Tier 6 | SP; ST: TRIAL OF INHALED 7% SODIUM CHLORIDE SOLUTION IN THE PAST 120 DAYS.; QL (20 EA per 1 day) |
| **Diagnostic Test Devices And Supplies** | | |
| *eua patient assessment* | Tier 3 | |
| **Digital Therapeutics, Software** | | |
| NATURAL CYCLES DIGITAL APP | ACA Tier | |
| **Dipeptidyl Peptidase 1 (Dpp1) Inhibitor** | | |
| BRINSUPRI ORAL TABLET 10 MG, 25 MG | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Drugs To Treat Hereditary Tyrosinemia** | | |
| HARLIKU ORAL TABLET 2 MG | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| *nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg* (Orfadin) | Tier 4 | PA; SP |
| NITYR ORAL TABLET 10 MG, 2 MG, 5 MG | Tier 5 | PA; SP |
| ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG (nitisinone) | Tier 5 | PA; SP |
| ORFADIN ORAL SUSPENSION 4 MG/ML | Tier 5 | PA; SP |
| **Drugs To Tx Gaucher Dx-Type 1, Substrate Reducing** | | |
| CERDELGA ORAL CAPSULE 84 MG | Tier 5 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| *miglustat oral capsule 100 mg* | (Yargesa) | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| OPFOLDA ORAL CAPSULE 65 MG | | Tier 6 | PA; SP; QL (8 EA per 28 days) |
| YARGESA ORAL CAPSULE 100 MG | (miglustat) | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| **Environment Allergens And Irritants, Other** | | | |
| T.R.U.E. TEST ALLERGEN TOPICAL ADHESIVE PATCH,MEDICATED | | Tier 3 | |
| **Eye Antibiotic And Nsaid Combinations** | | | |
| *moxifloxacin-bromfenac ophthalmic (eye) drops 0.5-0.075 %* | | Tier 1 | |
| **Factor Xii Inhibitors** | | | |
| ANDEMBRY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 200 MG/1.2 ML | | Tier 5 | PA; SP; QL (1.2 ML per 30 days) |
| **General Anesthetics,Inhalant** | | | |
| *desflurane inhalation liquid 100 %* | (Suprane) | Tier 1 | |
| *isoflurane inhalation liquid 99.9 %* | (Terrell) | Tier 1 | |
| *sevoflurane inhalation liquid 99.97 %* | (Ultane) | Tier 1 | |
| SUPRANE INHALATION LIQUID 100 % | (desflurane) | Tier 3 | |
| TERRELL INHALATION LIQUID 99.9 % | (isoflurane) | Tier 1 | |
| **General Inhalation Agents** | | | |
| HYPER-SAL INHALATION SOLUTION FOR NEBULIZATION 3.5 % | | Tier 3 | |
| NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 3 % | (sodium chloride) | Tier 1 | |
| NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 % | | Tier 3 | |
| *sodium chloride inhalation solution for nebulization 0.9 %, 10 %* | | Tier 1 | |
| *sodium chloride inhalation solution for nebulization 3 %* | (NebuSal) | Tier 1 | |
| *sodium chloride inhalation solution for nebulization 7 %* | (Hyper-Sal) | Tier 1 | |
| **Genetic Disorder Therapy - Hdac Inhibitor** | | | |
| DUVYZAT ORAL SUSPENSION 8.86 MG/ML | | Tier 6 | PA; SP; QL (12 ML per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Genetic Disorder Therapy - Pyrimidine Analogs** | | | |
| KYGEVVI ORAL POWDER IN PACKET 4 GRAM | | Tier 6 | PA; SP |
| **Homeopathic Drugs** | | | |
| AURUMHEEL ORAL DROPS | | Tier 3 | |
| CANTHARIS COMPOSITUM ORAL DROPS | | Tier 3 | |
| CRALONIN ORAL DROPS | | Tier 3 | |
| EYE ORAL TABLET,SOLUBLE | | Tier 3 | |
| LAMIOFLUR ORAL DROPS | | Tier 3 | |
| PLANTAGO-HOMACCORD ORAL DROPS | | Tier 3 | |
| POPULUS COMPOSITUM ORAL DROPS | | Tier 3 | |
| PSORINOHEEL ORAL DROPS | | Tier 3 | |
| RENEEL ORAL TABLET,SOLUBLE | | Tier 3 | |
| SABAL-HOMACCORD ORAL DROPS | | Tier 3 | |
| SYZYGIUM COMPOSITUM ORAL DROPS | | Tier 3 | |
| VERTIGOHEEL ORAL DROPS | | Tier 3 | |
| VERTIGOHEEL ORAL TABLET,SOLUBLE | | Tier 3 | |
| **Metabolic Deficiency Agents** | | | |
| AQNEURSA ORAL GRANULES IN PACKET 1 GRAM | | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| *betaine oral powder 1 gram/scoop* | (Cystadane) | Tier 4 | PA; SP; QL (20 GM per 1 day) |
| *levocarnitine (with sugar) oral solution 100 mg/ml* | (Carnitor) | Tier 1 | |
| *levocarnitine oral solution 100 mg/ml* | (Carnitor (sugar-free)) | Tier 1 | |
| *levocarnitine oral tablet 330 mg* | (Carnitor) | Tier 1 | |
| **Metabolic Disease Enzyme Replace, Hypophosphatasia** | | | |
| STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45 ML, 28 MG/0.7 ML, 40 MG/ML, 80 MG/0.8 ML | | Tier 5 | PA; SP |
| **Metabolic Dx Enzyme Replacemt,Sev.Comb.Immune Def.** | | | |
| REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5 ML (1.6 MG/ML) | | Tier 6 | PA; SP |

| Drug | | Status | Notes |
|---|---|---|---|
| **Metallic Poison,Agents To Treat** | | | |
| CHEMET ORAL CAPSULE 100 MG | | Tier 3 | |
| CUVRIOR ORAL TABLET 300 MG | | Tier 6 | PA; SP; QL (10 EA per 1 day) |
| *deferasirox oral granules in packet 180 mg, 360 mg, 90 mg* | (Jadenu Sprinkle) | Tier 4 | PA; SP |
| *deferasirox oral tablet 180 mg, 360 mg, 90 mg* | (Jadenu) | Tier 4 | PA; SP |
| *deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg* | (Exjade) | Tier 4 | PA; SP |
| *deferiprone oral tablet 1,000 mg* | (Ferriprox) | Tier 4 | PA; SP |
| *deferiprone oral tablet 500 mg* | | Tier 4 | PA; SP |
| GALZIN ORAL CAPSULE 25 MG (ZINC), 50 MG (ZINC) | | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| *trientine oral capsule 250 mg* | (Syprine) | Tier 4 | PA; SP; QL (8 EA per 1 day) |
| *trientine oral capsule 500 mg* | | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| **Needles/Needleless Devices** | | | |
| AUTOSHIELD DUO PEN NEEDLE NEEDLE 30 GAUGE X 3/16" | | Tier 2 | |
| NANO 2ND GEN PEN NEEDLE NEEDLE 32 GAUGE X 5/32" | (pen needle, diabetic) | Tier 2 | |
| NANO PEN NEEDLE NEEDLE 32 GAUGE X 5/32" | (pen needle, diabetic) | Tier 2 | |
| ULTRA-FINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4" | (pen needle, diabetic) | Tier 2 | |
| UNIFINE PENTIPS NEEDLE 32 GAUGE X 5/32" | (pen needle, diabetic) | Tier 2 | |
| **Novel Bacterial Topoisomerase Inhibitors (Nbti)** | | | |
| BLUJEPA ORAL TABLET 750 MG | | Tier 3 | PA; QL (4 EA per 1 day) |
| **Ointment/Cream Bases** | | | |
| RADIAGEL TOPICAL GEL | | Tier 3 | |
| **Ophthalmic Trpm8 Agonists** | | | |
| TRYPTYR OPHTHALMIC (EYE) DROPPERETTE 0.003 % | | Tier 2 | QL (2 EA per 1 day) |
| **Oral Lipid Supplements** | | | |
| DOJOLVI ORAL LIQUID 8.3 KCAL/ML | | Tier 6 | PA; SP |
| **Oral Mucositis/Stomatitis Agents** | | | |
| ORAMAGICRX MUCOUS MEMBRANE MOUTHWASH | | Tier 3 | |

| Drug | Status | Notes |
|---|---|---|
| **Saliva Stimulant Agents** | | |
| NUMOISYN MUCOUS MEMBRANE LOZENGE 0.3 GRAM | Tier 3 | |
| **Saliva Substitute Agents** | | |
| NUMOISYN MUCOUS MEMBRANE LIQUID | Tier 3 | |
| **Sexual Dysfunction Devices** | | |
| RAPPORT VACUUM THERAPY KIT | Tier 3 | |
| **Skin Tissue Replacement** | | |
| GRAFIX CORE TOPICAL SHEET 1.5 X 2 CM, 14 MM, 16 MM, 2 X 3 CM, 3 X 4 CM, 5 X 5 CM | Tier 3 | |
| GRAFIX PRIME TOPICAL SHEET 1.5 X 2 CM, 14 MM, 16 MM, 2 X 3 CM, 3 X 4 CM, 5 X 5 CM | Tier 3 | |
| GRAFIX XC TOPICAL SHEET 7.5 X 15 CM | Tier 3 | |
| MIRO3D FIBERS TOPICAL POWDER 100 MG, 500 MG, 700 MG | Tier 3 | |
| MIRO3D TOPICAL SHEET 10 X 2 X 2 CM, 10 X 5 X 2 CM, 2 X 2 X 2 CM, 3 X 3 X 2 CM, 4 X 4 X 2 CM, 5 X 2 X 2 CM, 5 X 5 X 2 CM, 6 X 5 X 2 CM, 7 X 5 X 2 CM, 8 X 5 X 2 CM | Tier 3 | |
| MIRODERM FENESTRATED PLUS TOPICAL SHEET 3 X 3 CM, 5 X 5 CM, 8 X 15 CM, 8 X 8 CM | Tier 3 | |
| MIRODERM FENESTRATED TOPICAL SHEET 2 X 2 CM, 2 X 3 CM, 3 X 3 CM, 4 X 4 CM, 5 X 5 CM, 8 X 15 CM, 8 X 8 CM | Tier 3 | |
| MIRODRY WOUND MATRIX TOPICAL SHEET 10 X 2 CM, 10 X 5 CM, 2 X 2 CM, 3 X 3 CM, 4 X 4 CM, 5 X 2 CM, 5 X 5 CM, 5 X 7 CM, 6 X 5 CM, 8 X 5 CM | Tier 3 | |
| MIROTRACT TOPICAL SHEET 3 MM X 5 CM, 3 MM X 9 CM, 5 MM X 5 CM, 5 MM X 9 CM | Tier 3 | |
| STRAVIX TOPICAL SHEET 2 X 4 CM, 3 X 6 CM | Tier 3 | |
| TRUSKIN TOPICAL SHEET 2 X 4 CM, 4 X 8 CM | Tier 3 | |
| **Solvents** | | |
| *isopropyl alcohol solution 70 %* (Alcohol, Rubbing) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *isopropyl alcohol solution 91 %, 99 %* | | Tier 3 | |
| MURI-LUBE OIL | | Tier 3 | |
| **Somatostatic Agents** | | | |
| MYCAPSSA ORAL CAPSULE,DELAYED RELEASE(DR/EC) 20 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| *octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml* | (Sandostatin) | Tier 4 | SP |
| *octreotide acetate injection solution 200 mcg/ml* | | Tier 4 | SP |
| *octreotide acetate injection syringe 100 mcg/ml (1 ml), 50 mcg/ml (1 ml)* | | Tier 4 | SP |
| PALSONIFY ORAL TABLET 20 MG, 30 MG | | Tier 6 | PA; SP |
| SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML) | | Tier 6 | PA; SP; QL (2 ML per 1 day) |
| **Support Hosiery** | | | |
| T.E.D. ANTI-EMBOLISM STOCKING | (compres.stocking,knee,reg,smal) | Tier 3 | |
| T.E.D. KNEE LENGTH-S-REGULAR | (compres.stocking,knee,reg,smal) | Tier 3 | |
| **Suspending Agents** | | | |
| *hydroxypropyl cellulose powder* | | Tier 3 | |
| **Topical Nitric Oxide Releasing Agents** | | | |
| ZELSUVMI TOPICAL GEL 10.3 % | | Tier 3 | PA |
| **Treatment Of Hyperphagia In Prader-Willi Syndrome** | | | |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR 150 MG | | Tier 6 | PA; SP; QL (3 EA per 1 day) |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR 25 MG | | Tier 6 | PA; SP; QL (4 EA per 1 day) |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HR 75 MG | | Tier 6 | PA; SP; QL (7 EA per 1 day) |
| **Wound Healing Agents, Local** | | | |
| FILSUVEZ TOPICAL GEL 10 % | | Tier 6 | PA; SP |
| **Other Respiratory Disorders** | | | |
| **Antifibrotic Therapy - Pyridone Analogs** | | | |
| *pirfenidone oral capsule 267 mg* | | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| *pirfenidone oral tablet 267 mg, 801 mg* | (Esbriet) | Tier 4 | PA; SP; QL (3 EA per 1 day) |

| Drug | Status | Notes |
|---|---|---|
| *pirfenidone oral tablet 534 mg* | Tier 4 | PA; SP; QL (3 EA per 1 day) |
| **Cystic Fib.Transmemb Conduct.Reg.(Cftr)Potentiator** | | |
| KALYDECO ORAL GRANULES IN PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| KALYDECO ORAL TABLET 150 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| **Cystic Fibrosis-Cftr Potentiator & Corrector Comb.** | | |
| ALYFTREK ORAL TABLET 10-50-125 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| ALYFTREK ORAL TABLET 4-20-50 MG | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| ORKAMBI ORAL GRANULES IN PACKET 100-125 MG, 150-188 MG, 75-94 MG | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| SYMDEKO ORAL TABLETS, SEQUENTIAL 100-150 MG (D)/ 150 MG (N), 50-75 MG (D)/ 75 MG (N) | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| TRIKAFTA ORAL GRANULES IN PACKET, SEQUENTIAL 100-50-75MG (D) /75 MG (N), 80-40-60 MG (D) /59.5 MG (N) | Tier 5 | PA; SP; QL (2 EA per 1 day) |
| TRIKAFTA ORAL TABLETS, SEQUENTIAL 100-50-75 MG(D) /150 MG (N), 50-25-37.5 MG (D)/75 MG (N) | Tier 5 | PA; SP; QL (3 EA per 1 day) |
| **Mucolytics** | | |
| *acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)* | Tier 1 | |
| PULMOZYME INHALATION SOLUTION 1 MG/ML | Tier 5 | PA; SP |
| **Pulmonary Fibrosis - Systemic Enzyme Inhibitors** | | |
| *nintedanib oral capsule 100 mg, 150 mg* (Ofev) | Tier 4 | PA; SP; QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Pain Management - Analgesics** | | | |
| **Analgesic, Non-Salicylate & Barbiturate Comb.** | | | |
| *butalbital-acetaminophen oral tablet 50-300 mg* | | Tier 1 | ST: TRIAL OF GENERIC BUTALBITAL/ACETAMINOPHEN 50MG-325MG COMBINATION PRODUCT REQUIRED WITHIN 120 DAYS; QL (6 EA per 1 day) |
| *butalbital-acetaminophen oral tablet 50-325 mg* | (Tencon) | Tier 1 | |
| TENCON ORAL TABLET 50-325 MG | (butalbital-acetaminophen) | Tier 1 | |
| **Analgesic, Salicylate, Barbiturate,& Xanthine Cmb** | | | |
| *butalbital-aspirin-caffeine oral capsule 50-325-40 mg* | | Tier 1 | |
| *butalbital-aspirin-caffeine oral tablet 50-325-40 mg* | | Tier 1 | |
| **Analgesic,Non-Salicylate,Barbiturate,&Xanthine Cmb** | | | |
| *butalbital-acetaminophen-caff oral capsule 50-300-40 mg* | (Fioricet) | Tier 1 | |
| *butalbital-acetaminophen-caff oral capsule 50-325-40 mg* | | Tier 1 | |
| *butalbital-acetaminophen-caff oral tablet 50-325-40 mg* | | Tier 1 | |
| FIORICET ORAL CAPSULE 50-300-40 MG | (butalbital-acetaminophen-caff) | Tier 1 | |
| **Analgesic/Antipyretics, Salicylates** | | | |
| *diflunisal oral tablet 500 mg* | | Tier 1 | |
| *salsalate oral tablet 500 mg, 750 mg* | | Tier 1 | |
| **Analgesics Narcotic, Anesthetic Adjunct Agents** | | | |
| *sufentanil-ketamine nasal spray with pump 3 mcg-3 mg/ spray (0.05 ml), 9 mcg-9 mg/ spray (0.1 ml)* | | Tier 1 | |
| **Analgesics, Narcotic Agonist And Nsaid Combination** | | | |
| *hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg* | | Tier 1 | |
| **Analgesics, Non-Narcotics** | | | |
| JOURNAVX ORAL TABLET 50 MG | | Tier 3 | PA |

| Drug | | Status | Notes |
|---|---|---|---|
| **Analgesics,Narcotics** | | | |
| BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG | (buprenorphine hcl) | Tier 2 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *belladonna alkaloids-opium rectal suppository 16.2-30 mg, 16.2-60 mg* | | Tier 1 | |
| *buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour* | (Butrans) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (4 EA per 28 days) |
| *butorphanol nasal spray,non-aerosol 10 mg/ml* | | Tier 1 | |
| *codeine sulfate oral tablet 15 mg, 30 mg* | | Tier 1 | QL (12 EA per 1 day); Age (Min 12 Years) |
| *codeine sulfate oral tablet 60 mg* | | Tier 1 | QL (6 EA per 1 day); Age (Min 12 Years) |
| *fentanyl citrate buccal lozenge on a handle 1,200 mcg, 200 mcg* | | Tier 1 | PA; QL (120 EA per 30 days) |
| *fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour* | | Tier 1 | PA; ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS |
| *hydrocodone bitartrate oral capsule, oral only, er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr 100 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg* | (Hysingla ER) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day) |
| *hydrocodone bitartrate oral tablet,oral only,ext.rel.24 hr 120 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day) |
| *hydromorphone oral liquid 1 mg/ml* | (Dilaudid) | Tier 1 | |
| *hydromorphone oral tablet 2 mg, 4 mg, 8 mg* | (Dilaudid) | Tier 1 | |
| *hydromorphone oral tablet extended release 24 hr 12 mg, 16 mg, 8 mg* | | Tier 1 | PA; ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *hydromorphone oral tablet extended release 24 hr 32 mg* | | Tier 1 | PA; ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *hydromorphone rectal suppository 3 mg* | | Tier 1 | |
| *levorphanol tartrate oral tablet 2 mg* | (Xyvona) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS |
| *meperidine oral solution 50 mg/5 ml* | | Tier 1 | QL (30 ML per 1 day) |
| *meperidine oral tablet 50 mg* | | Tier 1 | QL (6 EA per 1 day) |
| METHADONE INTENSOL ORAL CONCENTRATE 10 MG/ML | (methadone) | Tier 1 | QL (4 ML per 1 day) |
| *methadone oral concentrate 10 mg/ml* | (Methadone Intensol) | Tier 1 | QL (4 ML per 1 day) |
| *methadone oral solution 10 mg/5 ml* | | Tier 1 | QL (20 ML per 1 day) |
| *methadone oral solution 5 mg/5 ml* | | Tier 1 | QL (40 ML per 1 day) |
| *methadone oral tablet 10 mg* | | Tier 1 | QL (4 EA per 1 day) |
| *methadone oral tablet 5 mg* | | Tier 1 | QL (8 EA per 1 day) |
| *methadone oral tablet,soluble 40 mg* | (Methadose) | Tier 1 | QL (1 EA per 1 day) |
| METHADOSE ORAL TABLET,SOLUBLE 40 MG | (methadone) | Tier 1 | QL (1 EA per 1 day) |
| *morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)* | | Tier 1 | PA |
| *morphine oral capsule, er multiphase 24 hr 120 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *morphine oral capsule, er multiphase 24 hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day) |
| *morphine oral solution 10 mg/5 ml (2 mg/ml), 20 mg/5 ml (4 mg/ml)* | | Tier 1 | |
| *morphine oral tablet 15 mg* | | Tier 1 | |
| *morphine oral tablet 30 mg* | | Tier 2 | |
| *morphine oral tablet extended release 100 mg, 200 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (3 EA per 1 day) |
| *morphine oral tablet extended release 15 mg, 30 mg, 60 mg* | (MS Contin) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (3 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg* | | Tier 1 | |
| NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG | (tapentadol) | Tier 2 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *oxycodone oral capsule 5 mg* | | Tier 1 | |
| *oxycodone oral concentrate 20 mg/ml* | | Tier 1 | PA |
| *oxycodone oral solution 5 mg/5 ml* | | Tier 1 | |
| *oxycodone oral tablet 10 mg, 20 mg, 5 mg* | | Tier 1 | |
| *oxycodone oral tablet 15 mg, 30 mg* | (Roxicodone) | Tier 1 | |
| *oxycodone oral tablet, oral only 10 mg, 15 mg, 30 mg, 5 mg* | (RoxyBond) | Tier 1 | |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 20 mg, 40 mg* | (OxyContin) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *oxycodone oral tablet,oral only,ext.rel.12 hr 80 mg* | (OxyContin) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (4 EA per 1 day) |
| *oxymorphone oral tablet 10 mg, 5 mg* | | Tier 1 | |
| *oxymorphone oral tablet extended release 12 hr 10 mg, 15 mg, 20 mg, 5 mg, 7.5 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| *oxymorphone oral tablet extended release 12 hr 30 mg, 40 mg* | | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (4 EA per 1 day) |
| *pentazocine-naloxone oral tablet 50-0.5 mg* | | Tier 1 | |
| ROXYBOND ORAL TABLET, ORAL ONLY 10 MG, 15 MG, 30 MG, 5 MG | (oxycodone) | Tier 3 | |
| *tapentadol oral tablet 100 mg, 50 mg, 75 mg* | (Nucynta) | Tier 1 | QL (6 EA per 1 day) |
| *tramadol oral solution 5 mg/ml* | (Qdolo) | Tier 1 | PA; QL (80 ML per 1 day) |
| *tramadol oral tablet 50 mg* | | Tier 1 | QL (8 EA per 1 day); Age (Min 12 Years) |

| Drug | Status | Notes |
|---|---|---|
| *tramadol oral tablet extended release 24 hr 100 mg* | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (3 EA per 1 day); Age (Min 12 Years) |
| *tramadol oral tablet extended release 24 hr 200 mg, 300 mg* | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day); Age (Min 12 Years) |
| *tramadol oral tablet, er multiphase 24 hr 100 mg* | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (3 EA per 1 day); Age (Min 12 Years) |
| *tramadol oral tablet, er multiphase 24 hr 200 mg, 300 mg* | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (1 EA per 1 day); Age (Min 12 Years) |
| XTAMPZA ER ORAL CAP,SPRINKL,ER12HR(DONT CRUSH) 13.5 MG, 18 MG, 9 MG | Tier 2 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (2 EA per 1 day) |
| XTAMPZA ER ORAL CAP,SPRINKL,ER12HR(DONT CRUSH) 27 MG | Tier 2 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (4 EA per 1 day) |
| XTAMPZA ER ORAL CAP,SPRINKL,ER12HR(DONT CRUSH) 36 MG | Tier 2 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS; QL (8 EA per 1 day) |
| XYVONA ORAL TABLET 2 MG (levorphanol tartrate) | Tier 1 | ST: TRIAL OF SHORT-ACTING OPIOID FOR AT LEAST 7 CONSECUTIVE DAYS |
| **Antimigraine Preparations** | | |
| AIMOVIG AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 140 MG/ML, 70 MG/ML | Tier 2 | PA; QL (1 ML per 28 days) |
| AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML | Tier 2 | PA; QL (1.5 ML per 28 days) |
| AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML | Tier 2 | PA; QL (1.5 ML per 28 days) |

| Drug | Status | Notes |
|---|---|---|
| *almotriptan malate oral tablet 12.5 mg, 6.25 mg* | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| *dihydroergotamine injection solution 1 mg/ml* | Tier 1 | ST: TRIAL OF ONE OF THE FOLLOWING: SUMATRIPTAN INJECTION [CARTRIDGE, PEN, SYRINGE], SUMATRIPTAN INTRANASAL OR ZOLMITRIPTAN INTRANASAL IN THE PAST 120 DAYS; QL (15 ML per 14 days) |
| *dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)* (Migranal) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (8 ML per 28 days) |
| *eletriptan oral tablet 20 mg, 40 mg* (Relpax) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| ELYXYB ORAL SOLUTION 120 MG/4.8 ML (25 MG/ML) | Tier 3 | PA; QL (38.4 ML per 30 days) |
| EMGALITY PEN SUBCUTANEOUS PEN INJECTOR 120 MG/ML | Tier 2 | PA; QL (1 ML per 28 days) |
| EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 120 MG/ML | Tier 2 | PA; QL (1 ML per 28 days) |
| *ergotamine-caffeine oral tablet 1-100 mg* (Cafergot) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (10 EA per 7 days) |
| *frovatriptan oral tablet 2.5 mg* | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| *naratriptan oral tablet 1 mg, 2.5 mg* | Tier 1 | QL (18 EA per 30 days) |
| NURTEC ODT ORAL TABLET,DISINTEGRATING 75 MG | Tier 2 | PA; QL (18 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| *rizatriptan oral tablet 10 mg* | (Maxalt) | Tier 1 | QL (27 EA per 30 days) |
| *rizatriptan oral tablet 5 mg* | | Tier 1 | QL (27 EA per 30 days) |
| *rizatriptan oral tablet,disintegrating 10 mg* | (Maxalt-MLT) | Tier 1 | QL (27 EA per 30 days) |
| *rizatriptan oral tablet,disintegrating 5 mg* | | Tier 1 | QL (27 EA per 30 days) |
| *sumatriptan nasal spray,non-aerosol 20 mg/actuation* | | Tier 1 | QL (18 EA per 30 days) |
| *sumatriptan nasal spray,non-aerosol 5 mg/actuation* | | Tier 1 | QL (36 EA per 30 days) |
| *sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg* | (Imitrex) | Tier 1 | QL (18 EA per 30 days) |
| *sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml* | (Imitrex STATdose Pen) | Tier 1 | QL (18 ML per 30 days) |
| *sumatriptan succinate subcutaneous solution 6 mg/0.5 ml* | | Tier 1 | QL (18 ML per 30 days) |
| UBRELVY ORAL TABLET 100 MG, 50 MG | | Tier 2 | PA; QL (16 EA per 30 days) |
| *zolmitriptan nasal spray,non-aerosol 2.5 mg, 5 mg* | (Zomig) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| *zolmitriptan oral tablet 2.5 mg, 5 mg* | (Zomig) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| *zolmitriptan oral tablet,disintegrating 2.5 mg, 5 mg* | | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| ZOMIG ORAL TABLET 2.5 MG, 5 MG | (zolmitriptan) | Tier 1 | ST: TRIAL OF ORAL SUMATRIPTAN OR RIZATRIPTAN REQUIRED IN PREVIOUS 180 DAYS; QL (18 EA per 30 days) |
| **Calcitonin Gene-Related Peptide (Cgrp) Inhibitors** | | | |
| EMGALITY SYRINGE SUBCUTANEOUS SYRINGE 300 MG/3 ML (100 MG/ML X 3) | | Tier 2 | PA; QL (3 ML per 28 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Narc.& Non-Sal.Analgesic,Barbiturate &Xanthine Cmb** | | | |
| *butalbital-acetaminop-caf-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg* | | Tier 1 | QL (6 EA per 1 day); Age (Min 12 Years) |
| **Narcotic & Salicylate Analgesics, Barb.& Xanthine** | | | |
| ASCOMP WITH CODEINE ORAL CAPSULE 30-50-325-40 MG | (codeine-butalbital-asa-caff) | Tier 1 | QL (6 EA per 1 day); Age (Min 12 Years) |
| *codeine-butalbital-asa-caff oral capsule 30-50-325-40 mg* | (Ascomp with Codeine) | Tier 1 | QL (6 EA per 1 day); Age (Min 12 Years) |
| **Narcotic Analgesic & Non-Salicylate Analgesic Comb** | | | |
| *acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml* | | Tier 1 | QL (150 ML per 1 day); Age (Min 12 Years) |
| *acetaminophen-codeine oral solution 300 mg-30 mg /12.5 ml* | | Tier 1 | Age (Min 12 Years) |
| *acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg* | | Tier 1 | QL (12 EA per 1 day); Age (Min 12 Years) |
| *acetaminophen-codeine oral tablet 300-60 mg* | | Tier 1 | QL (6 EA per 1 day); Age (Min 12 Years) |
| ENDOCET ORAL TABLET 10-325 MG, 2.5-325 MG, 5-325 MG, 7.5-325 MG | (oxycodone-acetaminophen) | Tier 1 | QL (12 EA per 1 day) |
| *hydrocodone-acetaminophen oral solution 10-300 mg/15 ml* | | Tier 1 | QL (200 ML per 1 day) |
| *hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml* | | Tier 1 | QL (184 ML per 1 day) |
| *hydrocodone-acetaminophen oral tablet 10-300 mg, 5-300 mg, 7.5-300 mg* | | Tier 1 | QL (13 EA per 1 day) |
| *hydrocodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg* | | Tier 1 | QL (12 EA per 1 day) |
| *oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg* | (Endocet) | Tier 1 | QL (12 EA per 1 day) |
| PERCOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | (oxycodone-acetaminophen) | Tier 1 | QL (12 EA per 1 day) |
| *tramadol-acetaminophen oral tablet 37.5-325 mg* | | Tier 1 | QL (10 EA per 1 day); Age (Min 12 Years) |
| **Narcotic Withdrawal Therapy Agents** | | | |
| *buprenorphine hcl sublingual tablet 2 mg, 8 mg* | | Tier 1 | QL (3 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *buprenorphine-naloxone sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg* | (Suboxone) | Tier 1 | |
| *buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg* | | Tier 1 | QL (3 EA per 1 day) |
| ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG | | Tier 2 | QL (1 EA per 1 day) |
| ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG | | Tier 2 | QL (2 EA per 1 day) |
| **Opioid Withdrawal Ther, Alpha-2 Adrenergic Agonist** | | | |
| *lofexidine oral tablet 0.18 mg* | (Lucemyra) | Tier 1 | PA; QL (264 EA per 18 days) |
| **Parkinsons Disease** | | | |
| **Antiparkinsonism Drugs,Anticholinergic** | | | |
| *benztropine oral tablet 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *trihexyphenidyl oral elixir 0.4 mg/ml* | | Tier 1 | |
| *trihexyphenidyl oral tablet 2 mg, 5 mg* | | Tier 1 | |
| **Antiparkinsonism Drugs,Other** | | | |
| *amantadine hcl oral capsule 100 mg* | | Tier 1 | |
| *amantadine hcl oral solution 50 mg/5 ml* | | Tier 1 | |
| *amantadine hcl oral tablet 100 mg* | | Tier 1 | |
| *apomorphine subcutaneous cartridge 10 mg/ml* | (APOKYN) | Tier 4 | PA; SP; QL (2 ML per 1 day) |
| *bromocriptine oral capsule 5 mg* | | Tier 1 | |
| *bromocriptine oral tablet 2.5 mg* | | Tier 1 | |
| *carbidopa-levodopa oral capsule, extended release 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg* | (Rytary) | Tier 1 | ST: TRIAL OF GENERIC CARBIDOPA/LEVODOPA ER (25MG-100 MG, 50MG-200 MG) IN THE PAST 120 DAYS; QL (10 EA per 1 day) |
| *carbidopa-levodopa oral tablet 10-100 mg* | (Sinemet) | Tier 1 | |
| *carbidopa-levodopa oral tablet 25-100 mg* | (Dhivy) | Tier 1 | |
| *carbidopa-levodopa oral tablet 25-250 mg* | | Tier 1 | |
| *carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *carbidopa-levodopa oral tablet,disintegrating 10-100 mg, 25-100 mg, 25-250 mg* | | Tier 1 | |
| *carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg* | | Tier 1 | |
| DUOPA J-TUBE INTESTINAL PUMP SUSPENSION 4.63-20 MG/ML | | Tier 6 | PA; SP; QL (100 ML per 1 day) |
| *entacapone oral tablet 200 mg* | | Tier 1 | |
| INBRIJA INHALATION CAPSULE, W/INHALATION DEVICE 42 MG | | Tier 6 | PA; SP; QL (10 EA per 1 day) |
| ONAPGO SUBCUTANEOUS CARTRIDGE 4.9 MG/ ML | | Tier 6 | PA; SP; QL (20 ML per 1 day) |
| ONGENTYS ORAL CAPSULE 25 MG, 50 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| *pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg* | | Tier 1 | |
| *pramipexole oral tablet extended release 24 hr 0.375 mg, 0.75 mg, 4.5 mg* | | Tier 1 | ST: TRIAL OF PRAMIPEXOLE IR OR ROPINIROLE IR REQUIRED.; QL (1 EA per 1 day) |
| *pramipexole oral tablet extended release 24 hr 1.5 mg, 2.25 mg, 3 mg, 3.75 mg* | (Mirapex ER) | Tier 1 | ST: TRIAL OF PRAMIPEXOLE IR OR ROPINIROLE IR REQUIRED.; QL (1 EA per 1 day) |
| *rasagiline oral tablet 0.5 mg* | (Azilect) | Tier 1 | QL (1 EA per 1 day) |
| *rasagiline oral tablet 1 mg* | (Azilect) | Tier 1 | |
| *ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg* | | Tier 1 | |
| *ropinirole oral tablet extended release 24 hr 12 mg, 2 mg, 4 mg, 6 mg, 8 mg* | | Tier 1 | ST: TRIAL OF PRAMIPEXOLE IR OR ROPINIROLE IR REQUIRED.; QL (1 EA per 1 day) |
| *selegiline hcl oral capsule 5 mg* | | Tier 1 | |
| *selegiline hcl oral tablet 5 mg* | | Tier 1 | |
| *tolcapone oral tablet 100 mg* | (Tasmar) | Tier 1 | ST: TRIAL OF COMTAN (ENTACAPONE) REQUIRED.; QL (3 EA per 1 day) |
| VYALEV CONTIN. SUBCUTANEOUS INFUSION SOLUTION 12-240 MG/ML | | Tier 6 | PA; SP; QL (20 ML per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| ZELAPAR ORAL TABLET,DISINTEGRATING 1.25 MG | | Tier 3 | ST: TRIAL OF GENERIC SELEGILINE CAPSULES OR TABLETS IN THE PREVIOUS 120 DAYS; QL (2 EA per 1 day) |
| **Decarboxylase Inhibitors** | | | |
| *carbidopa oral tablet 25 mg* | (Lodosyn) | Tier 1 | |
| **Seizure Disorder** | | | |
| **Anticonvulsant - Benzodiazepine Type** | | | |
| *clobazam oral suspension 2.5 mg/ml* | (Onfi) | Tier 1 | QL (480 ML per 30 days) |
| *clobazam oral tablet 10 mg, 20 mg* | (Onfi) | Tier 1 | QL (2 EA per 1 day) |
| *clonazepam oral tablet 0.5 mg, 1 mg, 2 mg* | (Klonopin) | Tier 1 | |
| *clonazepam oral tablet,disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg* | | Tier 1 | |
| *diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg* | | Tier 1 | |
| *midazolam intramuscular auto-injector 10 mg/0.7 ml* | | Tier 3 | QL (7 ML per 30 days) |
| NAYZILAM NASAL SPRAY,NON-AEROSOL 5 MG/SPRAY (0.1 ML) | | Tier 2 | PA; QL (10 EA per 30 days) |
| VALTOCO NASAL SPRAY,NON-AEROSOL 10 MG/SPRAY (0.1 ML), 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2), 5 MG/SPRAY (0.1 ML) | | Tier 2 | PA; QL (10 EA per 30 days) |
| **Anticonvulsant - Cannabinoid Type** | | | |
| EPIDIOLEX ORAL SOLUTION 100 MG/ML | | Tier 5 | SP; ST: TRIAL OF ONE OF THE FOLLOWING GENERIC ANTICONVULSANTS: CLOBAZAM, VALPROIC ACID DERIVATIVES, LAMOTRIGINE, LEVETIRACETAM, TOPIRAMATE, VIGABATRIN, CARBAMAZEPINE, AND OXCARBAZEPINE IN THE LAST 365 DAYS |
| **Anticonvulsants** | | | |
| *brivaracetam oral solution 10 mg/ml* | (Briviact) | Tier 1 | QL (600 ML per 30 days) |
| *brivaracetam oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg* | (Briviact) | Tier 1 | QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg* | (Carbatrol) | Tier 1 | |
| *carbamazepine oral suspension 100 mg/5 ml* | (Tegretol) | Tier 1 | |
| *carbamazepine oral tablet 200 mg* | (Tegretol) | Tier 1 | |
| *carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg* | (Tegretol XR) | Tier 1 | |
| *carbamazepine oral tablet,chewable 100 mg, 200 mg* | | Tier 1 | |
| CARBATROL ORAL CAPSULE, ER MULTIPHASE 12 HR 100 MG, 200 MG, 300 MG | (carbamazepine) | Tier 3 | |
| DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HR 250 MG, 500 MG | (divalproex) | Tier 3 | |
| DEPAKOTE ORAL TABLET,DELAYED RELEASE (DR/EC) 125 MG, 250 MG, 500 MG | (divalproex) | Tier 3 | |
| DEPAKOTE SPRINKLES ORAL CAPSULE, DELAYED REL SPRINKLE 125 MG | (divalproex) | Tier 3 | |
| DIACOMIT ORAL CAPSULE 250 MG | | Tier 6 | PA; SP; QL (12 EA per 1 day) |
| DIACOMIT ORAL CAPSULE 500 MG | | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| DIACOMIT ORAL POWDER IN PACKET 250 MG | | Tier 6 | PA; SP; QL (12 EA per 1 day) |
| DIACOMIT ORAL POWDER IN PACKET 500 MG | | Tier 6 | PA; SP; QL (6 EA per 1 day) |
| DILANTIN EXTENDED ORAL CAPSULE 100 MG | (phenytoin sodium extended) | Tier 3 | |
| DILANTIN INFATABS ORAL TABLET,CHEWABLE 50 MG | (phenytoin) | Tier 3 | |
| DILANTIN ORAL CAPSULE 30 MG | | Tier 3 | |
| DILANTIN-125 ORAL SUSPENSION 125 MG/5 ML | (phenytoin) | Tier 3 | |
| *divalproex oral capsule, delayed rel sprinkle 125 mg* | (Depakote Sprinkles) | Tier 1 | |
| *divalproex oral tablet extended release 24 hr 250 mg, 500 mg* | (Depakote ER) | Tier 1 | |
| *divalproex oral tablet,delayed release (dr/ec) 125 mg, 250 mg, 500 mg* | (Depakote) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *eslicarbazepine oral tablet 200 mg, 400 mg* | (Aptiom) | Tier 1 | QL (1 EA per 1 day) |
| *eslicarbazepine oral tablet 600 mg, 800 mg* | (Aptiom) | Tier 1 | QL (2 EA per 1 day) |
| *ethosuximide oral capsule 250 mg* | (Zarontin) | Tier 1 | |
| *ethosuximide oral solution 250 mg/5 ml* | (Zarontin) | Tier 1 | |
| *felbamate oral suspension 600 mg/5 ml* | | Tier 1 | |
| *felbamate oral tablet 400 mg, 600 mg* | (Felbatol) | Tier 1 | |
| FINTEPLA ORAL SOLUTION 2.2 MG/ML | | Tier 6 | PA; SP; QL (11.8 ML per 1 day) |
| *gabapentin oral capsule 100 mg* | (Neurontin) | Tier 1 | |
| *gabapentin oral capsule 300 mg, 400 mg* | (Relgaabi) | Tier 1 | |
| *gabapentin oral solution 250 mg/5 ml* | (Neurontin) | Tier 1 | PA; QL (72 ML per 1 day) |
| *gabapentin oral solution 250 mg/5 ml (5 ml), 300 mg/6 ml (6 ml)* | | Tier 1 | PA; QL (72 ML per 1 day) |
| *gabapentin oral tablet 600 mg, 800 mg* | (Neurontin) | Tier 1 | |
| *lacosamide oral solution 10 mg/ml* | (Vimpat) | Tier 1 | |
| *lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg* | (Vimpat) | Tier 1 | |
| LAMICTAL XR STARTER (BLUE) ORAL TABLET EXTENDED REL,DOSE PACK 25 MG (21) -50 MG (7) | | Tier 3 | |
| LAMICTAL XR STARTER (GREEN) ORAL TABLET EXTENDED REL,DOSE PACK 50 MG(14)-100MG (14)-200 MG (7) | | Tier 3 | |
| LAMICTAL XR STARTER (ORANGE) ORAL TABLET EXTENDED REL,DOSE PACK 25MG (14)-50 MG (14)-100MG (7) | | Tier 3 | |
| *lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg* | (Lamictal) | Tier 1 | |
| *lamotrigine oral tablet disintegrating, dose pk 25 mg (21) -50 mg (7)* | (Lamictal ODT Starter (Blue)) | Tier 1 | |
| *lamotrigine oral tablet disintegrating, dose pk 25 mg(14)-50 mg (14)-100 mg (7)* | (Lamictal ODT Starter (Orange)) | Tier 1 | |
| *lamotrigine oral tablet disintegrating, dose pk 50 mg (42) -100 mg (14)* | (Lamictal ODT Starter (Green)) | Tier 1 | |
| *lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg* | (Lamictal XR) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg* | (Lamictal) | Tier 1 | |
| *lamotrigine oral tablet,disintegrating 100 mg, 200 mg, 25 mg, 50 mg* | (Lamictal ODT) | Tier 1 | |
| *lamotrigine oral tablets,dose pack 25 mg (35)* | (Lamictal Starter (Blue) Kit) | Tier 1 | |
| *lamotrigine oral tablets,dose pack 25 mg (42) -100 mg (7)* | (Lamictal Starter (Orange) Kit) | Tier 1 | |
| *lamotrigine oral tablets,dose pack 25 mg (84) -100 mg (14)* | (Lamictal Starter (Green) Kit) | Tier 1 | |
| *levetiracetam oral solution 100 mg/ml* | (Keppra) | Tier 1 | |
| *levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg* | (Keppra) | Tier 1 | |
| *levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg* | (Keppra XR) | Tier 1 | |
| *methsuximide oral capsule 300 mg* | (Celontin) | Tier 1 | |
| *oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)* | (Trileptal) | Tier 1 | |
| *oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg* | (Trileptal) | Tier 1 | |
| *oxcarbazepine oral tablet extended release 24 hr 150 mg, 300 mg* | (Oxtellar XR) | Tier 1 | ST: TRIAL OF 2 AGENTS (CARBAMAZEPINE, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM IR OR ER, OXCARBAZEPINE, TOPIRAMATE, ZONISAMIDE, VALPROIC ACID OR DIVALPROEX) REQUIRED.; QL (3 EA per 1 day) |
| *oxcarbazepine oral tablet extended release 24 hr 600 mg* | (Oxtellar XR) | Tier 1 | ST: TRIAL OF 2 AGENTS (CARBAMAZEPINE, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM IR OR ER, OXCARBAZEPINE, TOPIRAMATE, ZONISAMIDE, VALPROIC ACID OR DIVALPROEX) REQUIRED.; QL (4 EA per 1 day) |
| *perampanel oral suspension 0.5 mg/ml* | (Fycompa) | Tier 1 | QL (680 ML per 28 days) |
| *perampanel oral tablet 10 mg, 12 mg, 8 mg* | (Fycompa) | Tier 1 | QL (30 EA per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| *perampanel oral tablet 2 mg* | (Fycompa) | Tier 1 | QL (120 EA per 30 days) |
| *perampanel oral tablet 4 mg, 6 mg* | (Fycompa) | Tier 1 | QL (60 EA per 30 days) |
| PHENYTEK ORAL CAPSULE 200 MG, 300 MG | (phenytoin sodium extended) | Tier 1 | |
| *phenytoin oral suspension 125 mg/5 ml* | (Dilantin-125) | Tier 1 | |
| *phenytoin oral tablet,chewable 50 mg* | (Dilantin Infatabs) | Tier 1 | |
| *phenytoin sodium extended oral capsule 100 mg* | (Dilantin Extended) | Tier 1 | |
| *phenytoin sodium extended oral capsule 200 mg, 300 mg* | (Phenytek) | Tier 1 | |
| *pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg* | (Lyrica) | Tier 1 | |
| *pregabalin oral solution 20 mg/ml* | (Lyrica) | Tier 1 | PA; QL (30 ML per 1 day) |
| *primidone oral tablet 125 mg* | | Tier 1 | |
| *primidone oral tablet 250 mg, 50 mg* | (Mysoline) | Tier 1 | |
| RELGAABI ORAL CAPSULE 300 MG, 400 MG | (gabapentin) | Tier 1 | |
| *rufinamide oral suspension 40 mg/ml* | (Banzel) | Tier 1 | ST: TRIAL OF VALPROIC ACID OR DIVALPROEX OR CLOBAZAM IN THE PAST 120 DAYS; QL (80 ML per 1 day) |
| *rufinamide oral tablet 200 mg* | (Banzel) | Tier 1 | ST: TRIAL OF VALPROIC ACID OR DIVALPROEX OR CLOBAZAM IN THE PAST 120 DAYS; QL (16 EA per 1 day) |
| *rufinamide oral tablet 400 mg* | (Banzel) | Tier 1 | ST: TRIAL OF VALPROIC ACID OR DIVALPROEX OR CLOBAZAM IN THE PAST 120 DAYS; QL (8 EA per 1 day) |
| SUBVENITE ORAL SUSPENSION 10 MG/ML | | Tier 3 | PA |
| TEGRETOL ORAL SUSPENSION 100 MG/5 ML | (carbamazepine) | Tier 3 | |
| TEGRETOL ORAL TABLET 200 MG | (carbamazepine) | Tier 3 | |
| TEGRETOL XR ORAL TABLET EXTENDED RELEASE 12 HR 100 MG, 200 MG, 400 MG | (carbamazepine) | Tier 3 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *tiagabine oral tablet 12 mg, 2 mg, 4 mg* | | Tier 1 | ST: TRIAL OF 2 AGENTS (CARBAMAZEPINE, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TOPIRAMATE, ZONISAMIDE, VALPROIC ACID OR DIVALPROEX REQUIRED; QL (4 EA per 1 day) |
| *tiagabine oral tablet 16 mg* | | Tier 1 | ST: TRIAL OF 2 AGENTS (CARBAMAZEPINE, GABAPENTIN, LAMOTRIGINE, LEVETIRACETAM, OXCARBAZEPINE, TOPIRAMATE, ZONISAMIDE, VALPROIC ACID OR DIVALPROEX REQUIRED; QL (3 EA per 1 day) |
| *topiramate oral capsule, sprinkle 15 mg, 25 mg* | (Topamax) | Tier 1 | |
| *topiramate oral capsule, sprinkle 50 mg* | | Tier 1 | |
| *topiramate oral capsule,extended release 24hr 100 mg* | (Trokendi XR) | Tier 1 | QL (3 EA per 1 day) |
| *topiramate oral capsule,extended release 24hr 200 mg* | (Trokendi XR) | Tier 1 | QL (2 EA per 1 day) |
| *topiramate oral capsule,extended release 24hr 25 mg* | (Trokendi XR) | Tier 1 | QL (8 EA per 1 day) |
| *topiramate oral capsule,extended release 24hr 50 mg* | (Trokendi XR) | Tier 1 | QL (7 EA per 1 day) |
| *topiramate oral capsule,sprinkle,er 24hr 100 mg* | | Tier 1 | ST: TRIAL OF TOPIRAMATE IMMEDIATE RELEASE TABLETS/SPRINKLE CAPSULES.; QL (3 EA per 1 day) |
| *topiramate oral capsule,sprinkle,er 24hr 150 mg, 200 mg* | | Tier 1 | ST: TRIAL OF TOPIRAMATE IMMEDIATE RELEASE TABLETS/SPRINKLE CAPSULES.; QL (2 EA per 1 day) |

| Drug | | Status | Notes |
|---|---|---|---|
| *topiramate oral capsule,sprinkle,er 24hr 25 mg* | | Tier 1 | ST: TRIAL OF TOPIRAMATE IMMEDIATE RELEASE TABLETS/SPRINKLE CAPSULES.; QL (1 EA per 1 day) |
| *topiramate oral capsule,sprinkle,er 24hr 50 mg* | | Tier 1 | ST: TRIAL OF TOPIRAMATE IMMEDIATE RELEASE TABLETS/SPRINKLE CAPSULES.; QL (7 EA per 1 day) |
| *topiramate oral solution 25 mg/ml* | (Eprontia) | Tier 1 | PA |
| *topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg* | (Topamax) | Tier 1 | |
| *valproic acid (as sodium salt) oral solution 250 mg/5 ml* | | Tier 1 | |
| *valproic acid oral capsule 250 mg* | | Tier 1 | |
| *vigabatrin oral powder in packet 500 mg* | (Vigadrone) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| *vigabatrin oral tablet 500 mg* | (Vigadrone) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| VIGADRONE ORAL POWDER IN PACKET 500 MG | (vigabatrin) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| VIGADRONE ORAL TABLET 500 MG | (vigabatrin) | Tier 4 | PA; SP; QL (6 EA per 1 day) |
| VIGAFYDE ORAL SOLUTION 100 MG/ML | | Tier 6 | PA; SP; QL (30 ML per 1 day) |
| XCOPRI MAINTENANCE PACK ORAL TABLET 250MG/DAY(150 MG X1-100MG X1), 350 MG/DAY (200 MG X1-150MG X1) | | Tier 2 | QL (2 EA per 1 day) |
| XCOPRI ORAL TABLET 100 MG, 150 MG, 25 MG, 50 MG | | Tier 2 | QL (1 EA per 1 day) |
| XCOPRI ORAL TABLET 200 MG | | Tier 2 | QL (2 EA per 1 day) |
| XCOPRI TITRATION PACK ORAL TABLETS,DOSE PACK 12.5 MG (14)-25 MG (14), 150 MG (14)- 200 MG (14), 50 MG (14)- 100 MG (14) | | Tier 2 | QL (1 EA per 1 day) |
| ZONISADE ORAL SUSPENSION 100 MG/5 ML | | Tier 3 | PA; QL (30 ML per 1 day) |
| *zonisamide oral capsule 100 mg, 25 mg* | (Zonegran) | Tier 1 | |
| *zonisamide oral capsule 50 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Neuroactive Steroid Gaba-A Receptor Modulator** | | | |
| ZTALMY ORAL SUSPENSION 50 MG/ML | | Tier 6 | PA; SP; QL (36 ML per 1 day) |
| **Skeletal Muscle Disorder** | | | |
| **Agents To Tx Periodic Paralysis - Carbon Anhyd Inh** | | | |
| *dichlorphenamide oral tablet 50 mg* | (Ormalvi) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| KEVEYIS ORAL TABLET 50 MG | (dichlorphenamide) | Tier 5 | PA; SP; QL (4 EA per 1 day) |
| ORMALVI ORAL TABLET 50 MG | (dichlorphenamide) | Tier 4 | PA; SP; QL (4 EA per 1 day) |
| **Retinoic Acid Receptor (Rar) Agonists** | | | |
| SOHONOS ORAL CAPSULE 1 MG, 1.5 MG, 10 MG, 2.5 MG, 5 MG | | Tier 6 | PA; SP |
| **Skeletal Muscle Relaxants** | | | |
| ATMEKSI ORAL SUSPENSION 750 MG/5 ML | | Tier 3 | PA; QL (54 ML per 1 day) |
| *baclofen oral solution 10 mg/5 ml (2 mg/ml)* | (Ozobax DS) | Tier 1 | PA; QL (40 ML per 1 day) |
| *baclofen oral solution 5 mg/5 ml* | (Ozobax) | Tier 1 | PA; QL (80 ML per 1 day) |
| *baclofen oral tablet 10 mg, 20 mg, 5 mg* | | Tier 1 | |
| *carisoprodol oral tablet 250 mg, 350 mg* | (Soma) | Tier 1 | |
| *carisoprodol-aspirin oral tablet 200-325 mg* | | Tier 1 | |
| *chlorzoxazone oral tablet 500 mg* | | Tier 1 | |
| *cyclobenzaprine oral tablet 10 mg, 5 mg* | | Tier 1 | |
| *cyclobenzaprine oral tablet 7.5 mg* | (Fexmid) | Tier 1 | |
| *dantrolene oral capsule 100 mg, 50 mg* | | Tier 1 | |
| *dantrolene oral capsule 25 mg* | (Dantrium) | Tier 1 | |
| *metaxalone oral tablet 400 mg, 800 mg* | | Tier 1 | |
| *methocarbamol oral tablet 500 mg, 750 mg* | | Tier 1 | |
| *orphenadrine citrate oral tablet extended release 100 mg* | | Tier 1 | |
| *tizanidine oral capsule 2 mg, 4 mg, 6 mg* | (Zanaflex) | Tier 1 | |
| *tizanidine oral tablet 2 mg* | | Tier 1 | |
| *tizanidine oral tablet 4 mg* | (Zanaflex) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Smoking Cessation** | | | |
| **Smoking Deterrent Agents (Ganglionic Stim,Others)** | | | |
| *nicotine (polacrilex) buccal gum 2 mg* | (Quit 2) | ACA Tier | $0 COPAY IF QUANTITY 24 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine (polacrilex) buccal gum 4 mg* | (Quit 4) | ACA Tier | $0 COPAY IF QUANTITY 24 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine (polacrilex) buccal lozenge 2 mg* | (Quit 2) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine (polacrilex) buccal lozenge 4 mg* | (Quit 4) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine (polacrilex) buccal mini lozenge 2 mg, 4 mg* | (Nicorette) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine transdermal patch 24 hour 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr* | (Nicoderm CQ) | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| *nicotine transdermal patch, td daily, sequential 21-14-7 mg/24 hr* | | ACA Tier | $0 COPAY IF QUANTITY 1 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| NICOTROL NS NASAL SPRAY,NON-AEROSOL 10 MG/ML | | ACA Tier | $0 COPAY IF QUANTITY 10 IN 2 DAYS, LIMITED TO 180 DAYS SUPPLY IN 365, 18 YEARS OF AGE OR OLDER, AND TRIAL OF NICOTINE TRANSDERMAL PATCH; QL (10 ML per 2 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| QUIT 2 BUCCAL GUM 2 MG | (nicotine (polacrilex)) | ACA Tier | $0 COPAY IF QUANTITY 24 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| QUIT 2 BUCCAL LOZENGE 2 MG | (nicotine (polacrilex)) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| QUIT 4 BUCCAL GUM 4 MG | (nicotine (polacrilex)) | ACA Tier | $0 COPAY IF QUANTITY 24 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| QUIT 4 BUCCAL LOZENGE 4 MG | (nicotine (polacrilex)) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| STOP SMOKING AID BUCCAL LOZENGE 2 MG, 4 MG | (nicotine (polacrilex)) | ACA Tier | $0 COPAY IF QUANTITY 20 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |
| **Smoking Deterrent-Nicotinic Recept.Partial Agonist** | | | |
| *varenicline tartrate oral tablet 0.5 mg, 1 mg* | (Chantix) | ACA Tier | $0 COPAY IF QUANTITY 2 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER; QL (2 EA per 1 day) |
| *varenicline tartrate oral tablets,dose pack 0.5 mg (11)- 1 mg (42)* | (Chantix Starting Month Box) | ACA Tier | $0 COPAY IF QUANTITY 53 IN 28 DAYS, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER; QL (2 EA per 1 day) |
| **Smoking Deterrents, Other** | | | |
| *bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg* | | ACA Tier | $0 COPAY IF QUANTITY 2 IN 1 DAY, LIMITED TO 180 DAYS SUPPLY IN 365, AND 18 YEARS OF AGE OR OLDER |

| Drug | | Status | Notes |
|---|---|---|---|
| **Upper Gastrointestinal Disorders - Digestive** | | | |
| **Gastric Enzymes** | | | |
| SUCRAID ORAL SOLUTION 8,500 UNIT/ML | | Tier 6 | PA; SP |
| **Pancreatic Enzymes** | | | |
| CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 - 60,000 UNIT, 24,000-76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000-114,000- 180,000 UNIT, 6,000-19,000 -30,000 UNIT | | Tier 2 | |
| ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 3,000-10,000 -14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000- 24,000 UNIT, 60,000-189,600- 252,600 UNIT | | Tier 2 | |
| **Upper Gastrointestinal Disorders - Spastic Disease** | | | |
| **Anticholinergics/Antispasmodics** | | | |
| *dicyclomine oral capsule 10 mg* | | Tier 1 | |
| *dicyclomine oral solution 10 mg/5 ml* | | Tier 1 | |
| *dicyclomine oral tablet 20 mg* | | Tier 1 | |
| **Belladonna Alkaloids** | | | |
| ED-SPAZ ORAL TABLET,DISINTEGRATING 0.125 MG | (hyoscyamine sulfate) | Tier 1 | |
| *hyoscyamine sulfate oral drops 0.125 mg/ml* | (Hyosyne) | Tier 1 | |
| *hyoscyamine sulfate oral elixir 0.125 mg/5 ml* | (Hyosyne) | Tier 1 | |
| *hyoscyamine sulfate oral tablet 0.125 mg* | (Oscimin) | Tier 1 | |
| *hyoscyamine sulfate oral tablet extended release 12 hr 0.375 mg* | (Levbid) | Tier 1 | |
| *hyoscyamine sulfate oral tablet,disintegrating 0.125 mg* | (Ed-Spaz) | Tier 1 | |
| *hyoscyamine sulfate sublingual tablet 0.125 mg* | (Oscimin SL) | Tier 1 | |
| HYOSYNE ORAL DROPS 0.125 MG/ML | (hyoscyamine sulfate) | Tier 1 | |
| HYOSYNE ORAL ELIXIR 0.125 MG/5 ML | (hyoscyamine sulfate) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *methscopolamine oral tablet 2.5 mg, 5 mg* | | Tier 1 | |
| OSCIMIN ORAL TABLET 0.125 MG | (hyoscyamine sulfate) | Tier 1 | |
| OSCIMIN SL SUBLINGUAL TABLET 0.125 MG | (hyoscyamine sulfate) | Tier 1 | |
| SYMAX DUOTAB ORAL TABLET,EXT RELEASE MULTIPHASE 0.125 MG-0.25 MG (0.375 MG) | (hyoscyamine sulfate) | Tier 3 | |
| **Upper Gastrointestinal Disorders - Ulcer Disease** | | | |
| **Anticholinergics,Quaternary Ammonium** | | | |
| *chlordiazepoxide-clidinium oral capsule 5-2.5 mg* | (Librax (with clidinium)) | Tier 1 | |
| DARTISLA ORAL TABLET,DISINTEGRATING 1.7 MG | | Tier 3 | ST: TRIAL OF GLYCOPYRROLATE 2 MG IN THE PAST 120 DAYS.; QL (4 EA per 1 day); Age (Min 18 Years) |
| *glycopyrrolate oral solution 1 mg/5 ml (0.2 mg/ml)* | (Cuvposa) | Tier 1 | |
| *glycopyrrolate oral tablet 1 mg* | (Robinul) | Tier 1 | |
| *glycopyrrolate oral tablet 2 mg* | (Robinul Forte) | Tier 1 | |
| **Anti-Ulcer Preparations** | | | |
| *misoprostol oral tablet 100 mcg, 200 mcg* | (Cytotec) | Tier 1 | |
| *sucralfate oral suspension 100 mg/ml* | | Tier 1 | |
| *sucralfate oral tablet 1 gram* | (Carafate) | Tier 1 | |
| **Anti-Ulcer-H.Pylori Agents** | | | |
| *amoxicil-clarithromy-lansopraz oral combo pack 500-500-30 mg* | | Tier 1 | QL (112 EA per 10 days) |
| *bismuth subcit k-metronidz-tcn oral capsule 140-125-125 mg* | (Pylera) | Tier 1 | |
| OMECLAMOX-PAK ORAL COMBO PACK 20 MG-500 MG- 500 MG (40) | | Tier 3 | |
| TALICIA ORAL CAPSULE,IR - DELAY REL,BIPHASE 10-250-12.5 MG | | Tier 3 | QL (168 EA per 14 days); Age (Min 18 Years) |
| VOQUEZNA DUAL PAK ORAL COMBO PACK 20 MG (28)- 500 MG (84) | | Tier 3 | PA; QL (112 EA per 14 days) |
| VOQUEZNA TRIPLE PAK ORAL COMBO PACK 20-500-500 MG | | Tier 3 | PA; QL (112 EA per 14 days) |
| **Histamine H2-Receptor Inhibitors** | | | |
| *cimetidine hcl oral solution 300 mg/5 ml* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *cimetidine oral tablet 200 mg* | (Acid Reducer (cimetidine)) | Tier 1 | |
| *cimetidine oral tablet 300 mg, 400 mg, 800 mg* | | Tier 1 | |
| *famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)* | | Tier 1 | |
| *famotidine oral tablet 20 mg* | (Acid Controller) | Tier 1 | |
| *famotidine oral tablet 40 mg* | (Pepcid) | Tier 1 | |
| *nizatidine oral capsule 150 mg, 300 mg* | | Tier 1 | |
| **Intestinal Motility Stimulants** | | | |
| GIMOTI NASAL SPRAY WITH PUMP 15 MG/SPRAY | | Tier 6 | PA; SP; QL (9.8 ML per 28 days) |
| *metoclopramide hcl oral solution 5 mg/5 ml* | | Tier 1 | |
| *metoclopramide hcl oral tablet 10 mg, 5 mg* | (Reglan) | Tier 1 | |
| *prucalopride oral tablet 1 mg, 2 mg* | (Motegrity) | Tier 1 | QL (1 EA per 1 day) |
| **Potassium-Competitive Acid Blockers (Pcabs)** | | | |
| VOQUEZNA ORAL TABLET 10 MG, 20 MG | | Tier 3 | PA; QL (1 EA per 1 day) |
| **Proton-Pump Inhibitors** | | | |
| ACIPHEX SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 10 MG | (rabeprazole) | Tier 3 | ST: TRIAL OF OMEPRAZOLE, LANSOPRAZOLE OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| ACIPHEX SPRINKLE ORAL CAPSULE, DELAYED REL SPRINKLE 5 MG | | Tier 3 | ST: TRIAL OF OMEPRAZOLE, LANSOPRAZOLE OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *dexlansoprazole oral capsule,biphase delayed releas 30 mg, 60 mg* | (Dexilant) | Tier 1 | ST: TRIAL OF OMEPRAZOLE, LANSOPRAZOLE OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *esomeprazole magnesium oral capsule,delayed release(dr/ec) 20 mg* | (Acid Reducer (esomeprazole)) | Tier 1 | |
| *esomeprazole magnesium oral capsule,delayed release(dr/ec) 40 mg* | (Nexium) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *esomeprazole magnesium oral granules dr for susp in packet 10 mg, 2.5 mg, 20 mg, 5 mg* | (Nexium Packet) | Tier 1 | QL (1 EA per 1 day) |
| *esomeprazole magnesium oral granules dr for susp in packet 40 mg* | (Nexium Packet) | Tier 1 | QL (2 EA per 1 day) |
| *lansoprazole oral capsule,delayed release(dr/ec) 15 mg* | (Acid Reducer (lansoprazole)) | Tier 1 | |
| *lansoprazole oral capsule,delayed release(dr/ec) 30 mg* | (Prevacid) | Tier 1 | |
| *lansoprazole oral tablet,disintegrat, delay rel 15 mg, 30 mg* | (Prevacid SoluTab) | Tier 1 | |
| *omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg, 40 mg* | | Tier 1 | |
| *omeprazole-sodium bicarbonate oral capsule 20-1.1 mg-gram* | (Zegerid OTC) | Tier 1 | |
| *omeprazole-sodium bicarbonate oral capsule 40-1.1 mg-gram* | | Tier 1 | |
| *pantoprazole oral granules dr for susp in packet 40 mg* | (Protonix) | Tier 1 | ST: TRIAL OF OMEPRAZOLE, LANSOPRAZOLE OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS |
| *pantoprazole oral tablet,delayed release (dr/ec) 20 mg, 40 mg* | (Protonix) | Tier 1 | |
| *rabeprazole oral capsule, delayed rel sprinkle 10 mg* | (AcipHex Sprinkle) | Tier 1 | ST: TRIAL OF OMEPRAZOLE, LANSOPRAZOLE OR PANTOPRAZOLE WITHIN THE PAST 120 DAYS; QL (1 EA per 1 day) |
| *rabeprazole oral tablet,delayed release (dr/ec) 20 mg* | (AcipHex) | Tier 1 | |
| **Urinary Tract - Functional Disorders** | | | |
| **Benign Prostatic Hypertrophy/Micturition Agents** | | | |
| *alfuzosin oral tablet extended release 24 hr 10 mg* | (Uroxatral) | Tier 1 | |
| *dutasteride oral capsule 0.5 mg* | (Avodart) | Tier 1 | |
| *finasteride oral tablet 5 mg* | (Proscar) | Tier 1 | |
| *silodosin oral capsule 4 mg, 8 mg* | | Tier 1 | |
| *tamsulosin oral capsule 0.4 mg* | | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Bph Agents,5-Alpha-Red Inh & Alpha-1-Adr Antg Cmb** | | | |
| *dutasteride-tamsulosin oral capsule, er multiphase 24 hr 0.5-0.4 mg* | (Jalyn) | Tier 1 | ST: TRIAL OF FINASTERIDE 5MG, ALFUZOSIN, DOXAZOSIN, PRAZOSIN, SILODOSIN, TAMSULOSIN OR TERAZOSIN REQUIRED. |
| **Cystine-Depleting Agents, Nephropathic Cystinosis** | | | |
| CYSTAGON ORAL CAPSULE 150 MG, 50 MG | | Tier 6 | SP |
| **Endothelin-Angiotensin Receptor Antagonist** | | | |
| FILSPARI ORAL TABLET 200 MG, 400 MG | | Tier 5 | PA; SP; QL (1 EA per 1 day) |
| **Kidney Stone Agents** | | | |
| THIOLA EC ORAL TABLET,DELAYED RELEASE (DR/EC) 100 MG, 300 MG | (tiopronin) | Tier 6 | PA; SP |
| *tiopronin oral tablet 100 mg* | (Thiola) | Tier 4 | PA; SP |
| *tiopronin oral tablet,delayed release (dr/ec) 100 mg, 300 mg* | (Venxxiva) | Tier 4 | PA; SP |
| VENXXIVA ORAL TABLET,DELAYED RELEASE (DR/EC) 100 MG, 300 MG | (tiopronin) | Tier 4 | PA; SP |
| **Overactive Bladder Agents, Beta-3 Adrenergic Recep** | | | |
| *mirabegron oral suspension,extended rel recon 8 mg/ml* | (Myrbetriq) | Tier 1 | |
| MYRBETRIQ ORAL SUSPENSION,EXTENDED REL RECON 8 MG/ML | (mirabegron) | Tier 2 | |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HR 25 MG, 50 MG | (mirabegron) | Tier 1 | QL (1 EA per 1 day) |
| **Oxalosis Agent - Oxalate Inhibitor, Sirna Based** | | | |
| RIVFLOZA SUBCUTANEOUS SOLUTION 80 MG/0.5 ML (160 MG/ML) | | Tier 6 | PA; SP; QL (1 ML per 30 days) |
| RIVFLOZA SUBCUTANEOUS SYRINGE 128 MG/0.8 ML | | Tier 6 | PA; SP; QL (0.8 ML per 30 days) |
| RIVFLOZA SUBCUTANEOUS SYRINGE 160 MG/ML | | Tier 6 | PA; SP; QL (1 ML per 30 days) |

| Drug | | Status | Notes |
|---|---|---|---|
| **Polycystic Kidney Disease Agent, Avp Recep. Antag** | | | |
| JYNARQUE ORAL TABLET 15 MG | (tolvaptan (polycys kidney dis)) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| JYNARQUE ORAL TABLET 30 MG | (tolvaptan (polycys kidney dis)) | Tier 4 | PA; SP; QL (1 EA per 1 day) |
| JYNARQUE ORAL TABLETS, SEQUENTIAL 15 MG (AM)/ 15 MG (PM), 30 MG (AM)/ 15 MG (PM), 45 MG (AM)/ 15 MG (PM), 60 MG (AM)/ 30 MG (PM), 90 MG (AM)/ 30 MG (PM) | (tolvaptan (polycys kidney dis)) | Tier 4 | PA; SP; QL (2 EA per 1 day) |
| **Urinary Ph Modifiers** | | | |
| K-PHOS NO 2 ORAL TABLET 305-700 MG | | Tier 3 | |
| K-PHOS ORIGINAL ORAL TABLET,SOLUBLE 500 MG | | Tier 3 | |
| ORACIT ORAL SOLUTION 490-640 MG/5 ML | (sodium citrate-citric acid) | Tier 3 | |
| *potassium citrate oral tablet extended release 10 meq (1,080 mg)* | (Urocit-K 10) | Tier 1 | |
| *potassium citrate oral tablet extended release 15 meq* | (Urocit-K 15) | Tier 1 | |
| *potassium citrate oral tablet extended release 5 meq (540 mg)* | | Tier 1 | |
| RENACIDIN IRRIGATION SOLUTION 1980.6 MG-59.4 MG-980.4MG/30ML | | Tier 3 | |
| UROQID-ACID NO.2 ORAL TABLET 500-500 MG | | Tier 3 | |
| **Urinary Tract Anesthetic/Analgesic Agnt (Azo-Dye)** | | | |
| *phenazopyridine oral tablet 100 mg, 200 mg* | (Pyridium) | Tier 1 | |
| **Urinary Tract Antispasmodic, M(3) Selective Antag.** | | | |
| *darifenacin oral tablet extended release 24 hr 15 mg, 7.5 mg* | | Tier 1 | |
| *solifenacin oral tablet 10 mg, 5 mg* | (Vesicare) | Tier 1 | |
| **Urinary Tract Antispasmodic/Antiincontinence Agent** | | | |
| *fesoterodine oral tablet extended release 24 hr 4 mg, 8 mg* | (Toviaz) | Tier 1 | QL (1 EA per 1 day) |
| *flavoxate oral tablet 100 mg* | | Tier 1 | |
| *oxybutynin chloride oral syrup 5 mg/5 ml* | | Tier 1 | |

| Drug | Status | Notes |
|---|---|---|
| *oxybutynin chloride oral tablet 2.5 mg, 5 mg* | Tier 1 | |
| *oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg* | Tier 1 | |
| OXYTROL TRANSDERMAL PATCH SEMIWEEKLY 3.9 MG/24 HR | Tier 3 | ST: TRIAL OF OXYBUTYNIN IR/XR AND MYRBETRIQ IN THE PAST 365 DAYS |
| *tolterodine oral capsule,extended release 24hr 2 mg, 4 mg* | Tier 1 | |
| *tolterodine oral tablet 1 mg, 2 mg* | Tier 1 | |
| *trospium oral capsule,extended release 24hr 60 mg* | Tier 1 | |
| *trospium oral tablet 20 mg* | Tier 1 | |
| **Vaginal Disorders** | | |
| **Vaginal Antibiotics** | | |
| CLEOCIN VAGINAL SUPPOSITORY 100 MG | Tier 3 | ST: TRIAL OF TWO OF THE FOLLOWING GENERICS: ORAL METRONIDAZOLE TABLETS, ORAL CLINDAMYCIN CAPSULES, INTRAVAGINAL METRONIDAZOLE GEL, INTRAVAGINAL CLINDAMYCIN CREAM IN THE PAST 365 DAYS; QL (3 EA per 30 days) |
| *clindamycin phosphate vaginal cream 2 %* (Cleocin) | Tier 1 | |
| CLINDESSE VAGINAL CREAM,EXTENDED RELEASE 2 % | Tier 3 | ST: TRIAL OF TWO OF THE FOLLOWING GENERICS: ORAL METRONIDAZOLE TABLETS, ORAL CLINDAMYCIN CAPSULES, INTRAVAGINAL METRONIDAZOLE GEL, INTRAVAGINAL CLINDAMYCIN CREAM IN THE PAST 365 DAYS |
| *metronidazole vaginal gel 0.75 % (37.5mg/5 gram)* (Vandazole) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| NUVESSA VAGINAL GEL 1.3 % (65 MG/5 GRAM) | (metronidazole) | Tier 3 | ST: TRIAL OF TWO OF THE FOLLOWING GENERICS: ORAL METRONIDAZOLE TABLETS, ORAL CLINDAMYCIN CAPSULES, INTRAVAGINAL METRONIDAZOLE GEL, INTRAVAGINAL CLINDAMYCIN CREAM IN THE PAST 365 DAYS |
| **Vaginal Antifungals** | | | |
| GYNAZOLE-1 VAGINAL CREAM 2 % | | Tier 2 | |
| MICONAZOLE-3 VAGINAL SUPPOSITORY 200 MG | | Tier 1 | |
| *terconazole vaginal cream 0.4 %, 0.8 %* | | Tier 1 | |
| *terconazole vaginal suppository 80 mg* | | Tier 1 | |
| **Vaginal Antiseptics** | | | |
| FEM PH VAGINAL GEL 0.9-0.025 % | | Tier 3 | |
| RELAGARD VAGINAL GEL 0.9-0.025 % | | Tier 3 | |
| **Vaginal Estrogen For Sexual Dysfunction** | | | |
| IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG | | Tier 3 | ST: TRIAL OF ONE GENERIC ESTRADIOL CREAM AND ONE GENERIC ESTRADIOL VAGINAL TABLETS IN THE PAST 365 DAYS; QL (18 EA per 28 days) |
| IMVEXXY STARTER PACK VAGINAL INSERT, DOSE PACK 10 MCG, 4 MCG | | Tier 3 | ST: TRIAL OF ONE GENERIC ESTRADIOL CREAM AND ONE GENERIC ESTRADIOL VAGINAL TABLETS IN THE PAST 365 DAYS; QL (18 EA per 28 days) |
| **Vaginal Estrogen Preparations** | | | |
| *estradiol vaginal cream 0.01 % (0.1 mg/gram)* | (Estrace) | Tier 1 | |
| *estradiol vaginal tablet 10 mcg* | (Yuvafem) | Tier 1 | |
| PREMARIN VAGINAL CREAM 0.625 MG/GRAM | | Tier 2 | |
| YUVAFEM VAGINAL TABLET 10 MCG | (estradiol) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| **Vitamin And/Or Mineral Deficiency** | | | |
| **Fluoride Preparations** | | | |
| CLINPRO 5000 DENTAL PASTE 1.1 % | (fluoride (sodium)) | Tier 3 | |
| DENTA 5000 PLUS DENTAL CREAM 1.1 % | (fluoride (sodium)) | Tier 1 | |
| DENTA 5000 PLUS SENSITIVE DENTAL PASTE 1.1-5 % | (sodium fluoride-pot nitrate) | Tier 1 | |
| DENTAGEL DENTAL GEL 1.1 % | (fluoride (sodium)) | Tier 1 | |
| FLORIVA (FLUORIDE-VITAMIN D3) ORAL DROPS 0.25 MG (0.55 MG)-400 UNIT/ML | | Tier 3 | |
| *fluoride (sodium) dental cream 1.1 %* | (Denta 5000 Plus) | Tier 1 | |
| *fluoride (sodium) dental gel 1.1 %* | (DentaGel) | Tier 1 | |
| *fluoride (sodium) dental paste 1.1 %* | (Sodium Fluoride 5000 Dry Mouth) | Tier 1 | |
| *fluoride (sodium) dental solution 0.2 %* | (PreviDent) | Tier 1 | |
| *fluoride (sodium) oral drops 0.5 mg (1.1 mg sod.fluorid)/ml* | | ACA Tier | $0 COPAY IF AGE 6 MONTHS TO 6 YEARS |
| *fluoride (sodium) oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid), 1 mg (2.2 mg sod. fluoride)* | (Ludent Fluoride) | ACA Tier | $0 COPAY IF AGE 6 MONTHS TO 6 YEARS |
| FLUORIDEX DAILY DEFENSE DENTAL PASTE 1.1 % | (fluoride (sodium)) | Tier 3 | |
| FLUORIDEX SENSITIVITY RELIEF DENTAL PASTE 1.1-5 % | (sodium fluoride-pot nitrate) | Tier 3 | |
| FLUORIMAX 5000 DENTAL PASTE 1.1 % | (fluoride (sodium)) | Tier 3 | |
| FLUORIMAX 5000 SENSITIVE DENTAL PASTE 1.1-5 % | (sodium fluoride-pot nitrate) | Tier 3 | |
| GEL-KAM DENTAL GEL 0.4 % | (stannous fluoride) | Tier 1 | |
| JUST RIGHT 5000 DENTAL PASTE 1.1 % | (fluoride (sodium)) | Tier 3 | |
| PERIO MED DENTAL SOLUTION 0.63 % | (stannous fluoride) | Tier 3 | |
| PHOS-FLUR DENTAL SOLUTION 0.02 % (0.044 % SOD. FLUORIDE) | | Tier 3 | |
| SF 5000 PLUS DENTAL CREAM 1.1 % | (fluoride (sodium)) | Tier 1 | |
| SF DENTAL GEL 1.1 % | (fluoride (sodium)) | Tier 1 | |
| SODIUM FLUORIDE 5000 DRY MOUTH DENTAL PASTE 1.1 % | (fluoride (sodium)) | Tier 1 | |
| SODIUM FLUORIDE 5000 PLUS DENTAL CREAM 1.1 % | (fluoride (sodium)) | Tier 1 | |

| Drug | | Status | Notes |
|---|---|---|---|
| *sodium fluoride-pot nitrate dental paste 1.1-5 %* | (Denta 5000 Plus Sensitive) | Tier 1 | |
| **Folic Acid Preparations** | | | |
| *folic acid oral tablet 1 mg* | | Tier 1 | |
| *folic acid oral tablet 400 mcg* | (PureVita Folic Acid) | ACA Tier | |
| *folic acid oral tablet 800 mcg* | | ACA Tier | |
| PUREVITA FOLIC ACID ORAL TABLET 400 MCG | (folic acid) | ACA Tier | |
| **Mineral Replacement,Miscellaneous** | | | |
| ZYCUBO SUBCUTANEOUS RECON SOLN 2.9 MG | | Tier 6 | PA; SP; QL (1 EA per 1 day) |
| **Prenatal Vitamin Preparations** | | | |
| ATABEX ONE ORAL CAPSULE,DELAYED RELEASE(DR/EC) 27 MG IRON- 1,000 MCG DFE | | ACA Tier | |
| BAL-CARE DHA ESSENTIAL ORAL COMBO PACK,TABLET AND CAP,DR 27 MG IRON-1 MG -374 MG | | ACA Tier | |
| BAL-CARE DHA ORAL COMBO PACK,TABLET AND CAP,DR 27-1-430 MG | | ACA Tier | |
| CADEAU DHA ORAL CAPSULE 29 MG IRON- 1 MG-150 MG | | ACA Tier | |
| COMPLETE NATAL DHA ORAL COMBO PACK 29 MG IRON- 1 MG-200 MG | | ACA Tier | |
| COMPLETENATE ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG | | ACA Tier | |
| KPN ORAL TABLET 9 MG IRON- 267 MCG | | ACA Tier | |
| MASONATAL PRENATAL ORAL TABLET 28 MG IRON- 800 MCG | | ACA Tier | |
| MINI PRENATAL ORAL TABLET 6.75 MG IRON- 200 MCG | | ACA Tier | |
| M-NATAL PLUS ORAL TABLET 27 MG IRON- 1 MG | (pnv,calcium 72-iron-folic acid) | ACA Tier | |
| MYNATAL ADVANCE ORAL TABLET 90-1-50 MG | | ACA Tier | |
| MYNATAL ORAL CAPSULE 65 MG IRON- 1 MG | | ACA Tier | |
| MYNATAL ORAL TABLET 90-1-50 MG | | ACA Tier | |

| Drug | Status | Notes |
|---|---|---|
| MYNATAL PLUS ORAL TABLET 65 MG IRON- 1 MG | ACA Tier | |
| MYNATAL-Z ORAL TABLET 65 MG IRON- 1 MG | ACA Tier | |
| MYNATE 90 PLUS ORAL TABLET EXTENDED RELEASE 90 MG IRON-1 MG | ACA Tier | |
| OBSTETRIX DHA ORAL COMBO PACK,TABLET AND CAP,DR 29 MG IRON-1 MG -50 MG | ACA Tier | |
| OBSTETRIX DHA PRENATAL DUO ORAL COMB PACK,TABLET DR,CAPSULE DR 29 MG IRON- 1,700 MCG DFE | ACA Tier | |
| OBSTETRIX EC ORAL TABLET,DELAYED RELEASE (DR/EC) 29 MG IRON- 1,700 MCG DFE, 29 MG IRON-1 MG -50 MG | ACA Tier | |
| ONE-A-DAY PRENATAL ADVANCED ORAL COMBO PACK 27 MG IRON-800 MCG-110 MG | ACA Tier | |
| ONE-A-DAY PRENATAL-1 ORAL CAPSULE 27 MG IRON- 800 MCG-235 MG | ACA Tier | |
| *pnv no.95-ferrous fumarate-fa oral tablet 28 mg iron- 800 mcg* (Prenatal) | ACA Tier | |
| PNV-DHA + DOCUSATE ORAL CAPSULE 27-1.25-55-300 MG | ACA Tier | |
| PNV-SELECT ORAL TABLET 27-1 MG | ACA Tier | |
| PR NATAL 400 EC ORAL COMBO PACK,TABLET AND CAP,DR 29-1-400 MG | ACA Tier | |
| PR NATAL 400 ORAL COMBO PACK 29-1-400 MG | ACA Tier | |
| PR NATAL 430 EC ORAL COMBO PACK,TABLET AND CAP,DR 29-1-430 MG | ACA Tier | |
| PR NATAL 430 ORAL COMBO PACK 29 MG IRON-1 MG -430 MG | ACA Tier | |
| PRENATA ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG | ACA Tier | |
| PRENATABS FA ORAL TABLET 29-1 MG | ACA Tier | |
| PRENATABS RX ORAL TABLET 29 MG IRON- 1 MG | ACA Tier | |

| Drug | | Status | Notes |
|---|---|---|---|
| PRENATAL + DHA ORAL COMBO PACK 28 MG IRON- 975 MCG-200 MG, 28 MG IRON-800 MCG-200 MG | | ACA Tier | |
| PRENATAL 19 (WITH DOCUSATE) ORAL TABLET 29 MG IRON- 1 MG-25 MG | | ACA Tier | |
| PRENATAL 19 ORAL TABLET 29 MG IRON- 1 MG | | ACA Tier | |
| PRENATAL 19 ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG | | ACA Tier | |
| PRENATAL COMPLETE ORAL TABLET 14 MG IRON- 400 MCG | | ACA Tier | |
| PRENATAL ESSENTIALS ORAL CAPSULE 6 MG IRON- 272 MCG DFE | | ACA Tier | |
| PRENATAL FORMULA ORAL TABLET 9 MG IRON- 267 MCG | | ACA Tier | |
| PRENATAL FORMULA-DHA ORAL CAPSULE 28 MG-800 MCG- 200 MG | | ACA Tier | |
| PRENATAL MULTI ORAL TABLET 27-800 MG-MCG | | ACA Tier | |
| PRENATAL MULTI-DHA (ALGAL OIL) ORAL CAPSULE 27MG IRON- 800 MCG-250 MG | | ACA Tier | |
| PRENATAL MULTI-DHA(WITH VIT K) ORAL CAPSULE 27 MG IRON-800 MCG-260 MG | | ACA Tier | |
| PRENATAL MULTIVITAMINS ORAL TABLET 28 MG IRON- 800 MCG | (pnv no.95-ferrous fumarate-fa) | ACA Tier | |
| PRENATAL ONE DAILY ORAL TABLET 27 MG IRON- 800 MCG | | ACA Tier | |
| PRENATAL ORAL TABLET 28 MG IRON- 800 MCG | (pnv no.95-ferrous fumarate-fa) | ACA Tier | |
| PRENATAL ORAL TABLET 28-800 MG-MCG | | ACA Tier | |
| PRENATAL PLUS (CALCIUM CARB) ORAL TABLET 27 MG IRON- 1 MG | (pnv,calcium 72-iron-folic acid) | ACA Tier | |
| PRENATAL PLUS DHA ORAL COMBO PACK 27 MG IRON-1 MG -312 MG-250 MG | | ACA Tier | |
| PRENATAL PLUS ORAL TABLET 29 MG IRON- 1 MG | (pnv,calcium 72-iron,carb-folic) | ACA Tier | |
| PRENATAL PLUS VITAMIN-MINERAL ORAL TABLET 27 MG IRON- 1 MG | | ACA Tier | |

| Drug | | Status | Notes |
|---|---|---|---|
| PRENATAL TABLET ORAL TABLET 28 MG IRON- 800 MCG | (prenatal vit-iron fum-folic ac) | ACA Tier | |
| *prenatal vit no.179-iron-folic oral tablet 28 mg iron- 800 mcg* | | ACA Tier | |
| PRENATAL VITAMIN ORAL TABLET 27 MG IRON- 0.8 MG, 27 MG IRON- 800 MCG | | ACA Tier | |
| PRENATAL VITAMIN PLUS LOW IRON ORAL TABLET 27 MG IRON- 1 MG | (pnv,calcium 72-iron-folic acid) | ACA Tier | |
| PRENATAL VITAMIN WITH MINERALS ORAL TABLET 28 MG IRON- 800 MCG | (prenatal vit-iron fum-folic ac) | ACA Tier | |
| *prenatal vit-iron fum-folic ac oral tablet 28 mg iron- 800 mcg* | (Prenatal Tablet) | ACA Tier | |
| PRENATAL WITH DHA-FOLIC ACID ORAL TABLET,CHEWABLE 400-32.5 MCG-MG | | ACA Tier | |
| PROVIDA OB ORAL CAPSULE 40 MG IRON- 1.25 MG | | ACA Tier | |
| SE-NATAL 19 CHEWABLE ORAL TABLET,CHEWABLE 29 MG IRON- 1 MG | | ACA Tier | |
| SE-NATAL 19 ORAL TABLET 29 MG IRON- 1 MG | | ACA Tier | |
| SIMILAC PRENATAL ORAL COMBO PACK 27 MG IRON-800 MCG-200 MG | | ACA Tier | |
| STUART ONE ORAL CAPSULE 27 MG IRON- 800 MCG-200 MG | | ACA Tier | |
| THERANATAL COMPLETE ORAL COMBO PACK 27 MG IRON- 1 MG-150 MG | | ACA Tier | |
| THERANATAL ONE ORAL CAPSULE 27 MG IRON-1000 MCG-300 MG | | ACA Tier | |
| THERANATAL ORAL TABLET 27 MG IRON- 1 MG | | ACA Tier | |
| THERANATAL PLUS ORAL COMBO PACK 27 MG IRON- 1 MG-300 MG | | ACA Tier | |
| THRIVITE RX ORAL TABLET 29 MG IRON- 1 MG | | ACA Tier | |
| TRICARE ORAL TABLET 27 MG IRON-1 MG | | ACA Tier | |
| TRINATAL RX 1 ORAL TABLET 60 MG IRON-1 MG | | ACA Tier | |
| TRINATE ORAL TABLET 28 MG IRON-1 MG | | ACA Tier | |

| Drug | | Status | Notes |
|---|---|---|---|
| ULTRA PRENATAL PLUS DHA ORAL CAPSULE 27 MG-800 MCG- 250 MG-200 MG | | ACA Tier | |
| WESTAB PLUS ORAL TABLET 27 MG IRON- 1 MG | (pnv,calcium 72-iron-folic acid) | ACA Tier | |
| WOMEN'S PRENATAL PLUS DHA ORAL COMBO PACK 28 MG-975 MCG-200 MG | | ACA Tier | |
| **Prenatal Vitamins Without Iron** | | | |
| ONE-A-DAY PRENATAL ORAL TABLET,CHEWABLE 400 MCG- 25 MG | | ACA Tier | |
| P2I PRENATAL WITH CHOLINE ORAL CAPSULE 4.25 MG IRON- 333.5 MCG DFE | | ACA Tier | |
| PRENATAL GUMMIES ORAL TABLET,CHEWABLE 400 MCG-35 MG-25 MG-5 MG | | ACA Tier | |
| PRENATAL ORAL TABLET,CHEWABLE 400 MCG | | ACA Tier | |
| THERANATAL OVAVITE ORAL COMBO PACK 18-1-125 MG-MG-UNIT | | ACA Tier | |
| VITAFOL GUMMIES ORAL TABLET,CHEWABLE 3.33 MG IRON-0.33 MG | | ACA Tier | |
| **Vitamin D Preparations** | | | |
| *calcitriol oral capsule 0.25 mcg, 0.5 mcg* | | Tier 1 | |
| *calcitriol oral solution 1 mcg/ml* | (Rocaltrol) | Tier 1 | |
| **Weight Reduction** | | | |
| **Anorexic Agents** | | | |
| *benzphetamine oral tablet 50 mg* | | Tier 1 | QL (3 EA per 1 day); Age (Min 18 Years) |
| *diethylpropion oral tablet 25 mg* | | Tier 1 | QL (3 EA per 1 day); Age (Min 18 Years) |
| *diethylpropion oral tablet extended release 75 mg* | | Tier 1 | QL (1 EA per 1 day); Age (Min 18 Years) |
| LOMAIRA ORAL TABLET 8 MG | (phentermine) | Tier 1 | QL (3 EA per 1 day); Age (Min 18 Years) |
| *phendimetrazine tartrate oral capsule, extended release 105 mg* | | Tier 1 | QL (1 EA per 1 day); Age (Min 18 Years) |
| *phendimetrazine tartrate oral tablet 35 mg* | | Tier 1 | QL (6 EA per 1 day); Age (Min 18 Years) |
| *phentermine oral capsule 15 mg, 30 mg, 37.5 mg* | | Tier 1 | QL (1 EA per 1 day); Age (Min 18 Years) |

| Drug | | Status | Notes |
|---|---|---|---|
| *phentermine oral tablet 37.5 mg* | | Tier 1 | QL (1 EA per 1 day); Age (Min 18 Years) |
| *phentermine oral tablet 8 mg* | (Lomaira) | Tier 1 | QL (3 EA per 1 day); Age (Min 18 Years) |
| *phentermine-topiramate oral capsule, er multiphase 24 hr 11.25-69 mg, 15-92 mg, 3.75-23 mg, 7.5-46 mg* | (Qsymia) | Tier 1 | PA; QL (1 EA per 1 day) |
| **Anti-Obesity - Incretin Mimetics Combination** | | | |
| ZEPBOUND SUBCUTANEOUS PEN INJECTOR 10 MG/0.5 ML, 12.5 MG/0.5 ML, 15 MG/0.5 ML, 2.5 MG/0.5 ML, 5 MG/0.5 ML, 7.5 MG/0.5 ML | | Tier 2 | PA; QL (2 ML per 28 days) |
| **Anti-Obesity - Melanocortin 4 Receptor Agonists** | | | |
| IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML | | Tier 6 | PA; SP; QL (0.3 ML per 1 day) |
| **Anti-Obesity Glucagon-Like Peptide-1 Recep Agonist** | | | |
| FOUNDAYO ORAL TABLET 0.8 MG, 14.5 MG, 17.2 MG, 2.5 MG, 5.5 MG, 9 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| *liraglutide (weight loss) subcutaneous pen injector 3 mg/0.5 ml (18 mg/3 ml)* | (Saxenda) | Tier 1 | PA; QL (0.5 ML per 1 day) |
| WEGOVY HD SUBCUTANEOUS PEN INJECTOR 7.2 MG/0.75 ML | | Tier 2 | PA; QL (3 ML per 28 days) |
| WEGOVY ORAL TABLET 1.5 MG, 25 MG, 4 MG, 9 MG | | Tier 2 | PA; QL (1 EA per 1 day) |
| WEGOVY SUBCUTANEOUS PEN INJECTOR 0.25 MG/0.5 ML, 0.5 MG/0.5 ML, 1 MG/0.5 ML | | Tier 2 | PA; QL (2 ML per 28 days) |
| WEGOVY SUBCUTANEOUS PEN INJECTOR 1.7 MG/0.75 ML, 2.4 MG/0.75 ML | | Tier 2 | PA; QL (3 ML per 28 days) |
| **Fat Absorption Decreasing Agents** | | | |
| *orlistat oral capsule 120 mg* | (Xenical) | Tier 1 | PA; QL (3 EA per 1 day) |

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