Blue Medicare Rx Enhanced℠ (PDP)

Enhanced plan (employer group)

2026 Formulary

(List of Covered Drugs or "Drug List")

- Benefits, premiums, deductibles, and/or copayments/coinsurance may change on January 1, 2027.
- This information may be available in a different format. Please contact Customer Service at the number listed below if you need plan information in another format or language.
- The formulary and pharmacy network may change at any time. You will receive notice when necessary.
- An updated formulary is located on our website at **BlueCrossNC.com/Members/Medicare/Forms-Library**. You may also call Customer Service for updated information.
- **Important message about what you pay for vaccines** – Our plan covers most adult Part D vaccines at no cost to you. Call Customer Service for more information.
- **Important message about what you pay for insulin** – You won't pay more than $35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on.

PLEASE READ:
THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

This formulary was updated on 10/01/2026.

For more recent information or other questions, please contact Customer Service:

Blue Medicare Rx Enhanced℠ (PDP)

888-247-4142 (TTY users should call 711)
8 a.m. – 8 p.m. daily

or visit **BlueCrossNC.com/Members/Medicare**

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BlueCross BlueShield of North Carolina

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

When this Drug List (formulary) refers to "we," "us", or "our," it means Blue Cross and Blue Shield of North Carolina (Blue Cross NC). When it refers to "plan" or "our plan," it means Blue Medicare Rx EGWP Complete (PDP).

This document includes a Drug List (formulary) for our plan which is current as of 10/01/2026. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2026, and from time to time during the year.

What is the Blue Medicare Rx EGWP Complete formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by us in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Our plan will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Blue Medicare Rx EGWP Complete network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

For a complete listing of all prescription drugs covered by Blue Medicare Rx EGWP Complete, please visit our website or call us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

Can the formulary change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: BlueCrossNC.com/Members/Medicare/Forms-Library.

Changes that can affect you this year*:* In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary, but immediately move it to a different cost-sharing tier or add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Blue Medicare Rx EGWP Complete’s formulary?” Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product, or move it to a different cost-sharing tier, or both. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change.

  If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Blue Medicare Rx EGWP Complete’s formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of 10/01/2026. To get updated information about the drugs covered by Blue Medicare Rx EGWP Complete please contact us. Our contact information appears on the front and back cover pages. Formulary publications are updated and posted on our website (BlueCrossNC.com/Members/Medicare/Forms-Library) on a monthly basis with applicable changes, including negative changes.

How do I use the formulary?

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

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Cardiovascular Agents. If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 147. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

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

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

For discussion of drug types, please see the Evidence of Coverage, Chapter 3, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.”

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Our plan requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from our plan before you fill your prescriptions. If you don’t get approval, our plan may not cover the drug.

- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 60 tablets/30 days per prescription for losartan potassium tablet 25mg. This may be in addition to a standard one-month or three-month supply.

- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, our plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, our plan will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask our plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the Blue Medicare Rx EGWP Complete's formulary?" on page iv for information about how to request an exception.

What if my drug is not on the formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Service and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Customer Service for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by our plan.

- You can ask our plan to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Blue Medicare Rx EGWP Complete's formulary?

You can ask our plan to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.

- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, our plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

- You can ask us to cover a formulary drug at a lower cost-sharing level unless the drug is on the specialty tier. If approved, this would lower the amount you must pay for your drug.

Generally, our plan will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a tiering or formulary exception, including an exception to a coverage restriction. ***When you request an exception, your prescriber will need to explain the medical reasons why you need the exception.*** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a *31*-day emergency supply of that drug while you pursue a formulary exception.

You may have changes that take you from one treatment setting to another. During this level of care change, drugs may be prescribed that are not covered by your plan. If this happens, you and your doctor must use your plan's exception and appeals processes. However, when you are admitted to, or discharged from, a long-term care setting, you may not have access to the drugs you were previously given. You may get a refill upon admission or discharge to prevent a gap in care.

For more information

For more detailed information about your Blue Medicare Rx EGWP Complete prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Blue Medicare Rx EGWP Complete, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or visit http://www.medicare.gov.

Blue Medicare Rx EGWP Complete formulary

The formulary below provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 147.

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

The information in the Requirements/Limits column tells you if our plan has any special requirements for coverage of your drug.

The Drug Table includes a column titled, “Drug Tier.” This column indicates what tier each drug is listed under. The following copayments and coinsurances are associated with the corresponding tiers if you receive the drugs at an in-network pharmacy. These copayments and coinsurances apply during the Initial Coverage Phase. Refer to your Evidence of Coverage for details about your benefits during the Catastrophic Coverage Stage.

PDP1

Drug Tier	Preferred Retail Pharmacy for a **30**-day supply	Standard Retail/Mail Order Pharmacy for a **30**-day supply	Preferred Mail Order Pharmacy for a **90**-day supply	Long Term Care Pharmacy for a **31**-day supply
Tier 1 – Preferred Generic Drugs	$0 copayment	$14 copayment	$8 copayment	$14 copayment
Tier 2 – Generic Drugs	$10 copayment	$20 copayment	$20 copayment	$20 copayment
Tier 3 – Preferred Brand Drugs	$15 copayment	$25 copayment	$30 copayment	$25 copayment
Tier 4 – Non-Preferred Drugs	$30 copayment	$40 copayment	$60 copayment	$40 copayment
[a]Tier 5 – Specialty Drugs	33% coinsurance	33% coinsurance	N/A	33% coinsurance

[a] Tier 5 Specialty Drugs are limited to a 30 day-supply per fill.

You can find information on what the symbols and abbreviations on the drug list mean in the table below.

BD = Drugs that may be covered under Medicare Part B or Part D depending on the circumstance. These drugs require prior authorization to determine coverage under Part B or Part D. Information may need to be provided that describes the use or the place where the drug is received to determine coverage.
PA = Prior Authorization
QL = Quantity Limits
ST = Step Therapy
# = High Risk Medication (HRM). Medicine that may be unsafe in patients greater than 65 years of age. Our formulary does include coverage for some of these drugs, but alternatives may be found in lower co-pay tiers. Please discuss with your doctor if there are alternatives to these medications that would be appropriate for you to use.
* = Limited Distribution Drug. This prescription may be available only at certain pharmacies. For more information consult your Pharmacy Directory or call Customer Service at 1-888-247-4142, 7 days a week, 8am - 8pm. TTY users should call 711.

† = Split fill indicated drug. This high-cost medication is indicated with a cross (†) for you to request a 2-week supply (partial fill) of medication versus a full month. This partial fill may allow for copay savings if the medicine causes severe side effects, and you stop taking it or have a dosage change. If there are no side effects, you may only pay the rest of your monthly copay when you pick up the remaining 2-week supply, if applicable.

2026 Dosage Form Abbreviations Key	
act	actuation
ad	adsorbed
adjuv	adjuvant
aepb	aerosol powder blister
aer, aers, aero	aerosol
afib/afl	atrial fibrillation/atrial flutter
app	applicator
ba, br act, breath act, breath activ	breath activated
bau	bioequivalent allergy unit
cap, caps	capsules
cart	cartridge
cd	continuous delivery
chew tab	chewable tablets
cpcr	controlled release capsule
conc	concentrate
conj	conjugate, conjugated
crm	cream
crys	crystals
deter	deterrent
disint, disintegr	disintegrating
dr	delayed-release
ec	enteric coated
el, elu	enzyme-linked immunosorbent assay
er, extended, extended rel, xr	extended release
ext	extract
gm	gram
gu	genitourinary
hr	hour
ig	immunoglobulin
im	intramuscular
inh, inhal	inhalation
inj	injection

ir	index of reactivity
iv	intravenous
l	liter
la	long acting
lipo	lipophilic
lf, lfu	flocculation units
liq, liqd	liquid
maint	maintenance
mcg	microgram
meq	milliequivalent
misc	miscellaneous
mg	milligram
ml	milliliter
nebu	nebules
oc	oral contraceptive
oin, oint	ointment
omv	outer membrane vesicles
op, ophth	ophthalmic
osm	osmotic
pah	pulmonary arterial hypertension
pak, pk	pack
pf	preservative-free
pfu	plaque forming units
pow, powd	powder
pmdd	premenstrual dysphoric disorder
pref	prefilled
pttw	patch twice weekly
ptwk	patch weekly
recomb	recombinant
refrig	refrigerate
sl	sublingual
sol, soln	solution
supp, suppos	suppositories
sus, susp	suspension
syr	syringe
tab, tabs	tablets
tbcr	controlled release tablet
tbdp	dispersible tablet
tbec	enteric coated tablet

tbpk	tablet pack
td	transdermal
ther	therapy
titr	titration
tl	translingual
unt, ut	unit
va	vaginal
vac, vacc	vaccine

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
acetaminophen w/ codeine soln 120-12 mg/5ml	1	QL (2700 mls/30 days)
acetaminophen w/ codeine tab 300-15 mg, 300-30 mg	2	QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-60 mg	2	QL (180 tablets/30 days)
ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE - acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	4	QL (300 capsules/30 days)
allzital - butalbital-acetaminophen tab 25-325 mg#	2	QL (360 tablets/30 days)
ARTHROTEC 50 - diclofenac w/ misoprostol tab delayed release 50-0.2 mg	4	QL (120 tablets/30 days)
ARTHROTEC 75 - diclofenac w/ misoprostol tab delayed release 75-0.2 mg	4	QL (90 tablets/30 days)
ascomp/codeine - butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg#	2	PA (>=65 yr), QL (180 capsules/30 days)
bac - butalbital-acetaminophen-caffeine tab 50-325-40 mg#	2	QL (180 tablets/30 days)
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	3	PA, QL (60 films/30 days)
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr	2	PA, QL (4 patches/28 days)
butalbital-acetaminophen cap 50-300 mg#	2	QL (180 capsules/30 days)
butalbital-acetaminophen tab 50-300 mg, 50-325 mg#	2	QL (180 tablets/30 days)
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg, 50-325-40-30 mg#	2	PA (>=65 yr), QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine cap 50-300-40 mg, 50-325-40 mg#	2	QL (180 capsules/30 days)
butalbital-acetaminophen-caffeine tab 50-325-40 mg#	2	QL (180 tablets/30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg#	2	PA (>=65 yr), QL (180 capsules/30 days)
butalbital-aspirin-caffeine cap 50-325-40 mg#	2	QL (180 capsules/30 days)
BUTALBITAL/ACETAMINOPHEN/CAFFEINE - butalbital-acetaminophen-caffeine soln 50-325-40 mg/15ml#	4	QL (2700 mls/30 days)
butorphanol tartrate nasal soln 10 mg/ml	2	QL (48 mls/30 days)
BUTRANS - buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr	4	PA, QL (4 patches/28 days)
CAMBIA - diclofenac potassium (migraine) packet 50 mg	5	QL (9 packets/30 days)
CELEBREX - celecoxib cap 50 mg, 100 mg, 200 mg	4	QL (60 capsules/30 days)
CELEBREX - celecoxib cap 400 mg	4	QL (30 capsules/30 days)
celecoxib cap 50 mg, 100 mg, 200 mg	2	QL (60 capsules/30 days)
celecoxib cap 400 mg	2	QL (30 capsules/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg, 60 mg	4	QL (180 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
codeine sulfate tab 30 mg	2	QL (180 tablets/30 days)
CONZIP - tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	4	PA, QL (30 capsules/30 days)
DEMEROL - meperidine hcl inj 25 mg/ml, 50 mg/ml#	4	BD
DICLOFENAC EPOLAMINE - diclofenac epolamine patch 1.3%	4	PA
diclofenac potassium (migraine) packet 50 mg	2	QL (9 packets/30 days)
diclofenac potassium cap 25 mg	2	QL (120 capsules/30 days)
diclofenac potassium tab 25 mg	5	QL (240 tablets/30 days)
diclofenac potassium tab 50 mg	2	QL (120 tablets/30 days)
diclofenac sodium soln 1.5%	1	PA
diclofenac sodium soln 2%	5	PA
diclofenac sodium tab delayed release 25 mg	2	QL (240 tablets/30 days)
diclofenac sodium tab delayed release 50 mg	2	QL (120 tablets/30 days)
diclofenac sodium tab delayed release 75 mg	2	QL (60 tablets/30 days)
diclofenac sodium tab er 24hr 100 mg	2	QL (60 tablets/30 days)
diclofenac w/ misoprostol tab delayed release 50-0.2 mg	2	QL (120 tablets/30 days)
diclofenac w/ misoprostol tab delayed release 75-0.2 mg	2	QL (90 tablets/30 days)
diflunisal tab 500 mg	2	QL (90 tablets/30 days)
DILAUDID - hydromorphone hcl liqd 1 mg/ml	4	QL (1440 mls/30 days)
DILAUDID - hydromorphone hcl tab 2 mg, 4 mg, 8 mg	4	QL (180 tablets/30 days)
DOLOBID - diflunisal tab 250 mg	5	QL (90 tablets/30 days)
DOLOBID - diflunisal tab 375 mg	5	QL (120 tablets/30 days)
ELYXYB - celecoxib oral soln 120 mg/4.8ml (25 mg/ml)	4	QL (12 bottles/30 days)
endocet - oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg	2	QL (360 tablets/30 days)
endocet - oxycodone w/ acetaminophen tab 7.5-325 mg	2	QL (240 tablets/30 days)
endocet - oxycodone w/ acetaminophen tab 10-325 mg	2	QL (180 tablets/30 days)
etodolac cap 200 mg	2	QL (150 capsules/30 days)
etodolac cap 300 mg	2	QL (90 capsules/30 days)
etodolac tab er 24hr 400 mg, 500 mg	2	QL (60 tablets/30 days)
etodolac tab er 24hr 600 mg	2	QL (30 tablets/30 days)
etodolac tab 400 mg, 500 mg	2	QL (60 tablets/30 days)
FENOPROFEN CALCIUM - fenoprofen calcium cap 200 mg	4	QL (480 capsules/30 days)
fenoprofen calcium cap 400 mg	2	QL (240 capsules/30 days)
fenoprofen calcium cap 300 mg	5	QL (300 capsules/30 days)
fenopron - fenoprofen calcium cap 300 mg	5	QL (300 capsules/30 days)
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr, 100 mcg/hr	2	PA, QL (15 patches/30 days)
FIORICET - butalbital-acetaminophen-caffeine cap 50-300-40 mg#	4	QL (180 capsules/30 days)
FLECTOR - diclofenac epolamine patch 1.3%	4	PA

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

Drug Name	Drug Tier	Requirements/Limits
flurbiprofen tab 100 mg	2	QL (90 tablets/30 days)
hydrocodone bitartrate cap er 12hr 10 mg	2	PA, QL (60 capsules/30 days)
hydrocodone bitartrate cap er 12hr 15 mg	2	PA, QL (60 capsules/30 days)
hydrocodone bitartrate cap er 12hr 20 mg	2	PA, QL (60 capsules/30 days)
hydrocodone bitartrate cap er 12hr 30 mg	2	PA, QL (60 capsules/30 days)
hydrocodone bitartrate cap er 12hr 40 mg	2	PA, QL (60 capsules/30 days)
hydrocodone bitartrate cap er 12hr 50 mg	2	PA, QL (60 capsules/30 days)
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate tab er 24hr deter 120 mg	5	PA, QL (30 tablets/30 days)
hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	2	PA, QL (30 tablets/30 days)
hydrocodone bitartrate tab er 24hr deter 100 mg	5	PA, QL (30 tablets/30 days)
HYDROCODONE BITARTRATE/ACETAMINOPHEN - hydrocodone-acetaminophen soln 10-300 mg/15ml	4	QL (2025 mls/30 days)
HYDROCODONE BITARTRATE/ACETAMINOPHEN - hydrocodone-acetaminophen tab 2.5-325 mg	4	QL (240 tablets/30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	2	QL (2700 mls/30 days)
hydrocodone-acetaminophen tab 10-325 mg, 7.5-300 mg, 7.5-325 mg, 10-300 mg	2	QL (180 tablets/30 days)
hydrocodone-acetaminophen tab 5-300 mg, 5-325 mg	2	QL (240 tablets/30 days)
hydrocodone-ibuprofen tab 10-200 mg	2	QL (150 tablets/30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	2	QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg	4	QL (150 tablets/30 days)
hydromorphone hcl liqd 1 mg/ml	2	QL (1440 mls/30 days)
hydromorphone hcl preservative free (pf) inj 10 mg/ml	2	BD
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	2	PA, QL (30 tablets/30 days)
hydromorphone hcl tab 2 mg, 4 mg, 8 mg	2	QL (180 tablets/30 days)
HYSINGLA ER - hydrocodone bitartrate tab er 24hr deter 20 mg, 30 mg, 40 mg, 60 mg	4	PA, QL (30 tablets/30 days)
HYSINGLA ER - hydrocodone bitartrate tab er 24hr deter 80 mg, 100 mg	5	PA, QL (30 tablets/30 days)
ibu - ibuprofen tab 400 mg	1	QL (240 tablets/30 days)
ibu - ibuprofen tab 600 mg	1	QL (150 tablets/30 days)
ibu - ibuprofen tab 800 mg	1	QL (120 tablets/30 days)
IBUPROFEN - ibuprofen tab 300 mg	5	QL (300 tablets/30 days)
ibuprofen susp 100 mg/5ml	2	
ibuprofen tab 400 mg	1	QL (240 tablets/30 days)
ibuprofen tab 600 mg	1	QL (150 tablets/30 days)
ibuprofen tab 800 mg	1	QL (120 tablets/30 days)
ibuprofen-famotidine tab 800-26.6 mg	2	QL (90 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
INDOCIN - indomethacin susp 25 mg/5ml#	5	QL (1200 mls/30 days)
indocin - indomethacin suppos 50 mg	5	QL (120 suppositories/30 days)
indomethacin cap er 75 mg#	1	QL (60 capsules/30 days)
indomethacin cap 25 mg#	2	QL (240 capsules/30 days)
indomethacin cap 50 mg#	2	QL (120 capsules/30 days)
indomethacin suppos 50 mg	5	QL (120 suppositories/30 days)
indomethacin susp 25 mg/5ml#	5	QL (1200 mls/30 days)
JOURNAVX - suzetrigine tab 50 mg	4	QL (29 tablets/90 days)
KETOPROFEN - ketoprofen cap 25 mg	5	QL (360 capsules/30 days)
KETOPROFEN - ketoprofen cap 50 mg	4	QL (180 capsules/30 days)
KETOPROFEN - ketoprofen cap 75 mg	5	QL (120 capsules/30 days)
KETOPROFEN ER - ketoprofen cap er 24hr 200 mg	4	QL (30 capsules/30 days)
ketorolac tromethamine tab 10 mg#	1	
levorphanol tartrate tab 2 mg, 3 mg	5	QL (120 tablets/30 days)
LICART - diclofenac epolamine patch 24hr 1.3%	4	PA
LODINE - etodolac tab 400 mg	4	QL (60 tablets/30 days)
lofena - diclofenac potassium tab 25 mg	5	QL (240 tablets/30 days)
LURBIRO - flurbiprofen tab 100 mg	5	QL (90 tablets/30 days)
MECLOFENAMATE SODIUM - meclofenamate sodium cap 50 mg	4	QL (240 capsules/30 days)
MECLOFENAMATE SODIUM - meclofenamate sodium cap 100 mg	4	QL (120 capsules/30 days)
mefenamic acid cap 250 mg	2	QL (150 capsules/30 days)
MELOXICAM - meloxicam susp 7.5 mg/5ml	5	QL (3 bottles/30 days)
meloxicam cap 5 mg	4	QL (60 capsules/30 days)
meloxicam cap 10 mg	2	QL (30 capsules/30 days)
meloxicam tab 7.5 mg	1	QL (60 tablets/30 days)
meloxicam tab 15 mg	1	QL (30 tablets/30 days)
meperidine hcl inj 100 mg/ml#	2	BD
meperidine hcl inj 25 mg/ml, 50 mg/ml#	2	BD
methadone hcl soln 10 mg/5ml	2	QL (450 mls/30 days)
methadone hcl soln 5 mg/5ml	2	QL (900 mls/30 days)
methadone hcl tab 5 mg	2	QL (180 tablets/30 days)
methadone hcl tab 10 mg	2	QL (360 tablets/30 days)
morphine sulfate cap er 24hr 10 mg	2	PA, QL (60 capsules/30 days)
morphine sulfate cap er 24hr 100 mg	2	PA, QL (60 capsules/30 days)
morphine sulfate cap er 24hr 20 mg	2	PA, QL (60 capsules/30 days)
morphine sulfate cap er 24hr 50 mg	2	PA, QL (60 capsules/30 days)
morphine sulfate cap er 24hr 60 mg	2	PA, QL (60 capsules/30 days)
morphine sulfate cap er 24hr 80 mg	2	PA, QL (60 capsules/30 days)

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Drug Name	Drug Tier	Requirements/Limits
MORPHINE SULFATE ER - morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	4	PA, QL (30 capsules/30 days)
morphine sulfate oral soln 10 mg/5ml	2	QL (2700 mls/30 days)
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	2	QL (270 mls/30 days)
morphine sulfate oral soln 20 mg/5ml	2	QL (1350 mls/30 days)
morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg	2	PA, QL (90 tablets/30 days)
morphine sulfate tab 15 mg	2	QL (360 tablets/30 days)
morphine sulfate tab 30 mg	2	QL (180 tablets/30 days)
MS CONTIN - morphine sulfate tab er 15 mg, 30 mg	4	PA, QL (90 tablets/30 days)
MS CONTIN - morphine sulfate tab er 60 mg	5	PA, QL (90 tablets/30 days)
nabumetone tab 500 mg	2	QL (120 tablets/30 days)
nabumetone tab 750 mg	2	QL (60 tablets/30 days)
NAPRELAN - naproxen sodium tab er 24hr 375 mg (base equiv)	4	QL (120 tablets/30 days)
NAPRELAN - naproxen sodium tab er 24hr 500 mg (base equiv)	5	QL (90 tablets/30 days)
naproxen sodium tab er 24hr 375 mg (base equiv)	2	QL (120 tablets/30 days)
naproxen sodium tab er 24hr 500 mg (base equiv)	2	QL (90 tablets/30 days)
naproxen sodium tab er 24hr 750 mg (base equiv)	2	QL (60 tablets/30 days)
naproxen sodium tab 275 mg	2	QL (150 tablets/30 days)
naproxen sodium tab 550 mg	2	QL (90 tablets/30 days)
naproxen susp 125 mg/5ml	2	QL (1800 mls/30 days)
naproxen tab ec 375 mg	2	QL (120 tablets/30 days)
naproxen tab ec 500 mg	2	QL (90 tablets/30 days)
naproxen tab 250 mg	1	QL (180 tablets/30 days)
naproxen tab 375 mg	1	QL (120 tablets/30 days)
naproxen tab 500 mg	1	QL (90 tablets/30 days)
naproxen-esomeprazole magnesium tab dr 375-20 mg, 500-20 mg	5	QL (60 tablets/30 days)
NUCYNTA - tapentadol hcl tab 50 mg, 75 mg	4	QL (180 tablets/30 days)
NUCYNTA - tapentadol hcl tab 100 mg	5	QL (180 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg	4	PA, QL (60 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 100 mg, 150 mg, 200 mg, 250 mg	5	PA, QL (60 tablets/30 days)
ORUDIS - ketoprofen cap 75 mg	5	QL (120 capsules/30 days)
oxaprozin tab 600 mg	2	QL (90 tablets/30 days)
OXYCODONE AND ACETAMINOPHEN - oxycodone w/ acetaminophen tab 7.5-300 mg	5	QL (240 tablets/30 days)
oxycodone hcl cap 5 mg	2	QL (360 capsules/30 days)
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	2	QL (270 mls/30 days)
oxycodone hcl soln 5 mg/5ml	2	QL (5400 mls/30 days)
oxycodone hcl tab 5 mg	2	QL (360 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
oxycodone hcl tab 10 mg, 15 mg, 20 mg, 30 mg	2	QL (180 tablets/30 days)
OXYCODONE HYDROCHLORIDE - oxycodone hcl tab abuse deter 5 mg	5	QL (360 tablets/30 days)
OXYCODONE HYDROCHLORIDE - oxycodone hcl tab abuse deter 10 mg, 15 mg, 30 mg	5	QL (180 tablets/30 days)
OXYCODONE HYDROCHLORIDE/ACETAMINOPHEN - oxycodone w/ acetaminophen soln 5-325 mg/5ml	4	QL (1800 mls/30 days)
oxycodone w/ acetaminophen tab 2.5-300 mg	2	QL (360 tablets/30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg	2	QL (360 tablets/30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	2	QL (240 tablets/30 days)
oxycodone w/ acetaminophen tab 10-325 mg	2	QL (180 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 5-300 mg	5	QL (360 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 10-300 mg	5	QL (180 tablets/30 days)
OXYCONTIN - oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	3	PA, QL (60 tablets/30 days)
OXYCONTIN - oxycodone hcl tab er 12hr deter 60 mg, 80 mg	3	PA, QL (120 tablets/30 days)
oxymorphone hcl tab 5 mg, 10 mg	2	QL (180 tablets/30 days)
OXYMORPHONE HYDROCHLORIDE ER - oxymorphone hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg	4	PA, QL (60 tablets/30 days)
OXYMORPHONE HYDROCHLORIDE ER - oxymorphone hcl tab er 12hr 40 mg	5	PA, QL (60 tablets/30 days)
PERCOCET - oxycodone w/ acetaminophen tab 5-325 mg	5	QL (360 tablets/30 days)
PERCOCET - oxycodone w/ acetaminophen tab 7.5-325 mg	5	QL (240 tablets/30 days)
PERCOCET - oxycodone w/ acetaminophen tab 10-325 mg	5	QL (180 tablets/30 days)
piroxicam cap 10 mg	2	QL (60 capsules/30 days)
piroxicam cap 20 mg	2	QL (30 capsules/30 days)
PROLATE - oxycodone w/ acetaminophen soln 10-300 mg/5ml	5	QL (900 mls/30 days)
PROLATE - oxycodone w/ acetaminophen tab 5-300 mg	5	QL (360 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 7.5-300 mg	5	QL (240 tablets/30 days)
PROLATE - oxycodone w/ acetaminophen tab 10-300 mg	5	QL (180 tablets/30 days)
RELAFEN DS - nabumetone tab 1000 mg	5	QL (60 tablets/30 days)
ROXICODONE - oxycodone hcl tab 15 mg	4	QL (180 tablets/30 days)
ROXICODONE - oxycodone hcl tab 30 mg	5	QL (180 tablets/30 days)
ROXYBOND - oxycodone hcl tab abuse deter 5 mg	5	QL (360 tablets/30 days)
ROXYBOND - oxycodone hcl tab abuse deter 10 mg, 15 mg, 30 mg	5	QL (180 tablets/30 days)
SPRIX - ketorolac tromethamine nasal spray 15.75 mg/spray	5	
sulindac tab 150 mg, 200 mg	2	QL (60 tablets/30 days)
tapentadol hcl tab 50 mg, 75 mg	2	QL (180 tablets/30 days)
tapentadol hcl tab 100 mg	5	QL (180 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
TAPENTADOL HYDROCHLORIDE - tapentadol hcl soln 20 mg/ml (base equivalent)	4	QL (900 mls/30 days)
TAPENTADOL HYDROCHLORIDE ER - tapentadol hcl tab er 12hr 50 mg	4	PA, QL (60 tablets/30 days)
TAPENTADOL HYDROCHLORIDE ER - tapentadol hcl tab er 12hr 100 mg, 150 mg, 200 mg, 250 mg	5	PA, QL (60 tablets/30 days)
TENCON - butalbital-acetaminophen tab 50-325 mg#	4	QL (180 tablets/30 days)
TOLECTIN DS - tolmetin sodium cap 400 mg	5	QL (120 capsules/30 days)
TOLECTIN 600 - tolmetin sodium tab 600 mg	4	QL (90 tablets/30 days)
TOLMETIN SODIUM - tolmetin sodium cap 400 mg	4	QL (120 capsules/30 days)
TOLMETIN SODIUM - tolmetin sodium tab 200 mg	5	QL (180 tablets/30 days)
TOLMETIN SODIUM - tolmetin sodium tab 600 mg	5	QL (90 tablets/30 days)
TRAMADOL HCL ER - tramadol hcl cap er 24hr biphasic release 100 mg, 200 mg, 300 mg	4	PA, QL (30 capsules/30 days)
tramadol hcl tab er 24hr biphasic release 200 mg	2	PA, QL (30 tablets/30 days)
tramadol hcl tab er 24hr biphasic release 300 mg	2	PA, QL (30 tablets/30 days)
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	2	PA, QL (30 tablets/30 days)
tramadol hcl tab 50 mg	1	QL (240 tablets/30 days)
tramadol hcl tab 100 mg	2	QL (120 tablets/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl oral soln 5 mg/ml	4	QL (2400 mls/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl tab 25 mg	4	QL (180 tablets/30 days)
TRAMADOL HYDROCHLORIDE - tramadol hcl tab 75 mg	4	QL (120 tablets/30 days)
tramadol-acetaminophen tab 37.5-325 mg	2	QL (240 tablets/30 days)
TREZIX - acetaminophen-caffeine-dihydrocodeine cap 320.5-30-16 mg	4	QL (300 capsules/30 days)
VYSCOXA - celecoxib oral susp 10 mg/ml	5	QL (1200 mls/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg	4	PA, QL (60 capsules/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 36 mg	5	PA, QL (240 capsules/30 days)
xyvona - levorphanol tartrate tab 2 mg, 3 mg	5	QL (120 tablets/30 days)
ZIPSOR - diclofenac potassium cap 25 mg	5	QL (120 capsules/30 days)
ZYBIC - meloxicam susp 7.5 mg/5ml	5	QL (3 bottles/30 days)
Anesthetics		
lidocaine hcl laryngotracheal soln 4%	2	
lidocaine hcl soln 4%	2	PA, QL (150 mls/30 days)
lidocaine hcl viscous soln 2%	2	
lidocaine oint 5%	2	PA, QL (100 grams/30 days)
lidocaine patch 5%	2	PA, QL (90 patches/30 days)
lidocaine-prilocaine cream 2.5-2.5%	2	PA, QL (60 grams/30 days)
lidocan - lidocaine patch 5%	2	PA, QL (90 patches/30 days)

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Drug Name	Drug Tier	Requirements/Limits
tridacaine iii - lidocaine patch 5%	2	PA, QL (90 patches/30 days)
ZTLIDO - lidocaine patch 1.8% (36 mg)	4	PA, QL (90 patches/30 days)
Anti-Addiction/Substance Abuse Treatment Agents		
acamprosate calcium tab delayed release 333 mg	2	
buprenorphine hcl sl tab 2 mg (base equiv)	2	QL (480 tablets/30 days)
buprenorphine hcl sl tab 8 mg (base equiv)	2	QL (120 tablets/30 days)
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	2	QL (480 films/30 days)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	2	QL (240 films/30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	2	QL (120 films/30 days)
buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	2	QL (90 films/30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	2	QL (480 tablets/30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	2	QL (120 tablets/30 days)
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	2	
CHANTIX - varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	4	
CHANTIX CONTINUING MONTH PAK - varenicline tartrate tab 1 mg (base equiv)	4	
CHANTIX STARTING MONTH PAK - varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	4	
disulfiram tab 250 mg, 500 mg	2	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	4	
lofexidine hcl tab 0.18 mg (base equivalent)	2	QL (228 tablets/14 days)
LUCEMYRA - lofexidine hcl tab 0.18 mg (base equivalent)	5	QL (228 tablets/14 days)
naloxone hcl inj 0.4 mg/ml, 4 mg/10ml	2	
naloxone hcl soln cartridge 0.4 mg/ml	2	
naloxone hcl soln prefilled syringe 0.4 mg/ml, 2 mg/2ml	2	
naltrexone hcl tab 50 mg	2	
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	4	
OPVEE - nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)	4	
REXTOVY - naloxone hcl nasal spray 4 mg/0.25ml	4	
REZENOPY - naloxone hcl nasal spray 10 mg/0.11ml	4	
SUBOXONE - buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)	4	QL (480 films/30 days)
SUBOXONE - buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)	4	QL (240 films/30 days)
SUBOXONE - buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)	4	QL (120 films/30 days)
SUBOXONE - buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)	4	QL (90 films/30 days)
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	2	
varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	2	

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Drug Name	Drug Tier	Requirements/Limits
VIVITROL - naltrexone for im extended release susp 380 mg	5	
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq)	4	QL (1380 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 1.4-0.36 mg (base eq)	4	QL (690 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 2.9-0.71 mg (base eq)	4	QL (360 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 5.7-1.4 mg (base eq)	4	QL (180 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 8.6-2.1 mg (base eq)	4	QL (120 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 11.4-2.9 mg (base eq)	4	QL (90 tablets/30 days)
ZURNAI - nalmefene hcl soln auto-injector 1.5 mg/0.5ml (base equiv)	4	
Antibacterials		
amikacin sulfate inj 500 mg/2ml (250 mg/ml), 1 gm/4ml (250 mg/ml)	2	
amoxicillin (trihydrate) cap 250 mg, 500 mg	1	
amoxicillin (trihydrate) chew tab 125 mg	1	
amoxicillin (trihydrate) chew tab 250 mg	1	
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1	
amoxicillin (trihydrate) tab 500 mg, 875 mg	1	
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	2	
amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	2	
amoxicillin & k clavulanate tab 250-125 mg, 500-125 mg, 875-125 mg	2	
AMOXICILLIN/POTASSIUM CLAVULANATE - amoxicillin & k clavulanate chew tab 200-28.5 mg, 400-57 mg	4	
ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm, 3 (2-1) gm	2	
ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm	2	
ampicillin & sulbactam sodium for iv soln 3 (2-1) gm, 15 (10-5) gm	2	
ampicillin cap 500 mg	2	
AMPICILLIN SODIUM - ampicillin sodium for iv soln 2 gm	2	
ampicillin sodium for inj 1 gm, 2 gm	2	
ampicillin sodium for iv soln 1 gm	2	
ampicillin sodium for iv soln 10 gm	2	
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	5	PA, QL (28 vials/28 days)
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	4	

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

Drug Name	Drug Tier	Requirements/Limits
AUGMENTIN ES-600 - amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	4	
avidoxy - doxycycline monohydrate tab 100 mg	2	
AVYCAZ - ceftazidime-avibactam sodium for iv soln 2.5 gm (2-0.5 gm)	5	
AZACTAM - aztreonam for inj 2 gm	4	
azithromycin for susp 100 mg/5ml, 200 mg/5ml	2	
azithromycin iv for soln 500 mg	2	
azithromycin tab 250 mg, 500 mg, 600 mg	1	
aztreonam for inj 1 gm, 2 gm	2	
BACTRIM - sulfamethoxazole-trimethoprim tab 400-80 mg	4	
BACTRIM DS - sulfamethoxazole-trimethoprim tab 800-160 mg	4	
BAXDELA - delafloxacin meglumine for iv soln 300 mg (base equiv)	5	
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	5	
BICILLIN C-R - penicillin g benzathine & procaine inj susp 1200000 unit/2ml	4	
BICILLIN C-R - penicillin g benzathine & procaine inj 900000-300000 unt/2ml	4	
BICILLIN L-A - penicillin g benzathine im susp pref syr 600000 unit/ml, 2400000 unit/4ml, 1200000 unit/2ml	4	
BLUJEPA - gepotidacin mesylate tab 750 mg	5	
CEFACLOR - cefaclor for susp 250 mg/5ml	4	
cefaclor cap 250 mg	2	
cefaclor cap 500 mg	2	
CEFACLOR ER - cefaclor monohydrate tab er 12hr 500 mg	4	
cefadroxil cap 500 mg	2	
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	2	
cefadroxil tab 1 gm	2	
cefazolin sodium (bulk) for inj 100 gm	2	
cefazolin sodium (bulk) for inj 300 gm	2	
cefazolin sodium for inj 500 mg, 1 gm, 10 gm	2	
cefazolin sodium for iv soln 1 gm	2	
cefazolin sodium for iv soln 1 gm and dextrose 4% (50 ml)	2	
cefazolin sodium-dextrose iv solution 1 gm/50ml-4%	2	
cefdinir cap 300 mg	2	
cefdinir for susp 125 mg/5ml, 250 mg/5ml	2	
cefepime hcl for inj 1 gm	2	
cefepime hcl for iv soln 1 gm and dextrose 5% (50 ml)	2	
cefepime hcl for iv soln 2 gm and dextrose 5% (50 ml)	2	
cefepime hcl for iv soln 2 gm	2	

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

Drug Name	Drug Tier	Requirements/Limits
cefepime hcl iv soln 1 gm/50ml	2	
cefepime hcl iv soln 2 gm/100ml	2	
CEFIXIME - cefixime tab 400 mg	4	
cefixime cap 400 mg	2	
cefixime for susp 100 mg/5ml, 200 mg/5ml	2	
cefotetan disodium for inj 1 gm	2	
cefotetan disodium for inj 2 gm	2	
cefoxitin sodium for iv soln 1 gm, 2 gm, 10 gm	2	
cefoxitin sodium iv for soln 1 gm and dextrose 4% (50 ml)	2	
cefoxitin sodium iv for soln 2 gm and dextrose 2.2% (50 ml)	2	
cefpodoxime proxetil for susp 100 mg/5ml	2	
cefpodoxime proxetil for susp 50 mg/5ml	2	
cefpodoxime proxetil tab 100 mg, 200 mg	2	
cefprozil for susp 125 mg/5ml, 250 mg/5ml	2	
cefprozil tab 250 mg, 500 mg	2	
ceftaroline fosamil for iv soln 400 mg, 600 mg	5	
ceftazidime for inj 6 gm	2	
ceftazidime for inj 1 gm	2	
ceftazidime for iv soln 2 gm	2	
ceftriaxone sodium (bulk) for inj 100 gm	2	
ceftriaxone sodium for inj 250 mg	1	
ceftriaxone sodium for inj 500 mg, 1 gm, 2 gm, 10 gm	2	
ceftriaxone sodium for iv soln 1 gm and dextrose 3.74% 50 ml	2	
ceftriaxone sodium for iv soln 2 gm and dextrose 2.22% 50 ml	2	
ceftriaxone sodium for iv soln 1 gm, 2 gm	2	
ceftriaxone sodium in dextrose inj 20 mg/ml	2	
ceftriaxone sodium in dextrose inj 40 mg/ml	2	
cefuroxime axetil tab 250 mg, 500 mg	2	
cefuroxime sodium for inj 750 mg	2	
cefuroxime sodium for iv soln 1.5 gm	2	
cephalexin cap 250 mg, 500 mg, 750 mg	1	
cephalexin for susp 125 mg/5ml, 250 mg/5ml	2	
cephalexin tab 250 mg, 500 mg	2	
CIPRO - ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml), 500 mg/5ml (10%) (10 gm/100ml)	4	
CIPRO - ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv)	4	
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv), 750 mg (base equiv)	1	

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

Drug Name	Drug Tier	Requirements/Limits
ciprofloxacin 200 mg/100ml in d5w	2	
ciprofloxacin 400 mg/200ml in d5w	2	
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	4	
clarithromycin tab er 24hr 500 mg	2	
clarithromycin tab 250 mg, 500 mg	2	
CLEOCIN - clindamycin hcl cap 75 mg, 150 mg, 300 mg	4	
CLEOCIN - clindamycin phosphate vaginal cream 2%	4	
CLEOCIN - clindamycin phosphate vaginal suppos 100 mg	4	
CLEOCIN PEDIATRIC GRANULES - clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	4	
CLEOCIN PHOSPHATE - clindamycin phosphate inj 300 mg/2ml, 600 mg/4ml, 900 mg/6ml	4	
CLEOCIN-T - clindamycin phosphate lotion 1%	4	
clindacin - clindamycin phosphate foam 1%	2	
clindacin etz pledgets - clindamycin phosphate swab 1%	2	
clindacin-p - clindamycin phosphate swab 1%	2	
CLINDAGEL - clindamycin phosphate gel 1% (once-daily)	4	
clindamycin hcl cap 75 mg, 150 mg, 300 mg	1	
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	2	
clindamycin phosphate foam 1%	2	
clindamycin phosphate gel 1% (once-daily), 1% (twice-daily)	2	
clindamycin phosphate in d5w iv soln 300 mg/50ml, 600 mg/50ml, 900 mg/50ml	2	
clindamycin phosphate in nacl 0.9% iv soln 300 mg/50ml	2	
clindamycin phosphate in nacl 0.9% iv soln 600 mg/50ml	2	
clindamycin phosphate in nacl 0.9% iv soln 900 mg/50ml	2	
clindamycin phosphate inj 300 mg/2ml, 600 mg/4ml, 900 mg/6ml	2	
clindamycin phosphate lotion 1%	2	
clindamycin phosphate soln 1%	2	
clindamycin phosphate swab 1%	2	
clindamycin phosphate vaginal cream 2%	2	
CLINDESSE - clindamycin phosphate (one dose) vaginal cream 2%	4	
colistimethate sod for inj 150 mg (colistin base activity)	2	
dalbavancin hcl for iv soln 500 mg (base equivalent)	5	
DALVANCE - dalbavancin hcl for iv soln 500 mg (base equivalent)	5	
daptomycin for iv soln 350 mg, 500 mg	2	
demeclocycline hcl tab 150 mg, 300 mg	2	
dicloxacillin sodium cap 250 mg, 500 mg	2	

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

Drug Name	Drug Tier	Requirements/Limits
DIFICID - fidaxomicin for susp 40 mg/ml	5	QL (1 bottle/10 days)
DIFICID - fidaxomicin tab 200 mg	5	QL (20 tablets/10 days)
DORYX MPC - doxycycline hyclate tab delayed release 60 mg	4	
doxycycline hyclate cap 50 mg, 100 mg	2	
doxycycline hyclate for inj 100 mg	2	
doxycycline hyclate tab delayed release 50 mg, 75 mg, 100 mg, 150 mg, 200 mg	2	
doxycycline hyclate tab 20 mg, 50 mg, 75 mg, 100 mg, 150 mg	2	
doxycycline monohydrate cap 50 mg, 75 mg, 100 mg, 150 mg	2	
doxycycline monohydrate for susp 25 mg/5ml	2	
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg, 150 mg	2	
doxy 100 - doxycycline hyclate for inj 100 mg	2	
e.e.s. 400 - erythromycin ethylsuccinate tab 400 mg	2	
ertapenem sodium for inj 1 gm (base equivalent)	2	
ERY - erythromycin pads 2%	4	
erythrocin lactobionate - erythromycin lactobionate for inj500 mg	2	
erythromycin ethylsuccinate for susp 200 mg/5ml, 400 mg/5ml	2	
erythromycin gel 2%	2	
erythromycin soln 2%	2	
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	2	
erythromycin tab 250 mg, 500 mg	2	
erythromycin w/ delayed release particles cap 250 mg	2	
fidaxomicin tab 200 mg	5	QL (20 tablets/10 days)
FIRVANQ - vancomycin hcl for oral soln 25 mg/ml (base equivalent)	4	QL (600 mls/30 days)
FIRVANQ - vancomycin hcl for oral soln 50 mg/ml (base equivalent)	4	QL (1200 mls/30 days)
fosfomycin tromethamine powd pack 3 gm (base equivalent)	2	
gentamicin in saline inj 1.2 mg/ml	2	
gentamicin sulfate inj 40 mg/ml	2	
GENTAMICIN SULFATE/0.9% SODIUM CHLORIDE - gentamicin in saline inj 1 mg/ml, 1.6 mg/ml	4	
HIPREX - methenamine hippurate tab 1 gm	4	
HUMATIN - paromomycin sulfate cap 250 mg	5	
imipenem-cilastatin intravenous for soln 500 mg	2	
IMIPENEM/CILASTATIN - imipenem-cilastatin intravenous for soln 250 mg	3	
IMPAVIDO - miltefosine cap 50 mg	5	
ISOTONIC GENTAMICIN - gentamicin in saline inj 0.8 mg/ml	4	
levofloxacin in d5w iv soln 250 mg/50ml, 500 mg/100ml, 750 mg/150ml	2	

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

Drug Name	Drug Tier	Requirements/Limits
levofloxacin oral soln 25 mg/ml	2	
levofloxacin tab 250 mg, 500 mg, 750 mg	1	
LIKMEZ - metronidazole susp 500 mg/5ml	4	
linezolid for susp 100 mg/5ml	5	PA
linezolid in sodium chloride iv soln 600 mg/300ml-0.9%	2	
linezolid iv soln 600 mg/300ml (2 mg/ml)	2	
linezolid tab 600 mg	2	PA
MACROBID - nitrofurantoin monohydrate macrocrystalline cap 100 mg#	4	
meropenem & sodium chloride 0.9% for iv soln 1 gm/50ml	2	
meropenem & sodium chloride 0.9% for iv soln 500 mg/50ml	2	
meropenem iv for soln 500 mg, 1 gm	2	
methenamine hippurate tab 1 gm	2	
METRONIDAZOLE - metronidazole tab 125 mg	4	
metronidazole cap 375 mg	2	
metronidazole iv soln 500 mg/100ml	2	
metronidazole tab 250 mg, 500 mg	1	
metronidazole vaginal gel 0.75%	2	
minocycline hcl cap 50 mg, 75 mg, 100 mg	2	
minocycline hcl tab er 24hr 135 mg	2	
minocycline hcl tab er 24hr 45 mg	2	
minocycline hcl tab er 24hr 55 mg, 65 mg, 80 mg, 105 mg, 115 mg	2	
minocycline hcl tab er 24hr 90 mg	2	
minocycline hcl tab 50 mg, 75 mg, 100 mg	2	
mondoxyne nl - doxycycline monohydrate cap 100 mg	2	
moxifloxacin hcl iv solution 400 mg/250ml (base equiv)	2	
moxifloxacin hcl tab 400 mg (base equiv)	2	
moxifloxacin hcl 400 mg/250ml in sodium chloride 0.8% inj	2	
nafcillin sodium for inj 1 gm, 2 gm	2	
nafcillin sodium for iv soln 10 gm	2	
nafcillin sodium in dextrose inj 2 gm/100ml	2	
neomycin sulfate tab 500 mg	2	
NITROFURANTOIN - nitrofurantoin susp 50 mg/5ml#	5	
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg#	2	
nitrofurantoin monohydrate macrocrystalline cap 100 mg#	2	
nitrofurantoin susp 25 mg/5ml#	5	
NUVESSA - metronidazole vaginal gel 1.3%	4	
NUZYRA - omadacycline tosylate iv for soln 100 mg (base equivalent)	5	PA

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Drug Name	Drug Tier	Requirements/Limits
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	5	PA
OFLOXACIN - ofloxacin tab 300 mg	4	
ofloxacin tab 400 mg	2	
ORLYNVAH - sulopenem etzadroxil-probenecid tab 500-500 mg	5	
OXACILLIN SODIUM - oxacillin sodium in dextrose inj 2 gm/50ml	4	
oxacillin sodium for inj 1 gm (base equivalent), 2 gm (base equivalent)	2	
oxacillin sodium for iv soln 10 gm (base equivalent)	2	
penicillin g potassium for inj 5000000 unit, 20000000 unit	2	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE - penicillin g potassium inj 40000 unit/ml in dextrose	3	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE - penicillin g potassium inj 60000 unit/ml in dextrose	4	
PENICILLIN G SODIUM - penicillin g sodium for inj 5000000 unit	4	
penicillin v potassium for soln 125 mg/5ml	2	
penicillin v potassium for soln 250 mg/5ml	2	
penicillin v potassium tab 250 mg, 500 mg	1	
pfizerpen - penicillin g potassium for inj 5000000 unit, 20000000 unit	2	
piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)	2	
piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm), 4.5 gm (4-0.5 gm), 13.5 gm (12-1.5 gm), 40.5 gm (36-4.5 gm)	2	
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/NACL - piperacillin-tazobactam &nacl 0.3% for iv sol 3-0.375gm/50ml	2	
PIPERACILLIN SODIUM/TAZOBACTAM SODIUM/NACL - piperacillin-tazobactam &nacl 0.45% for iv sol 2-0.25gm/50ml, 4-0.5gm/100ml	2	
polymyxin b sulfate for inj 500000 unit	2	
PRIMAXIN IV - imipenem-cilastatin intravenous for soln 500 mg	4	
SEYSARA - sarecycline hcl tab 60 mg (base equivalent), 100 mg (base equivalent)	5	
SEYSARA - sarecycline hcl tab 150 mg (base equivalent)	4	
SIVEXTRO - tedizolid phosphate for iv soln 200 mg	5	
SIVEXTRO - tedizolid phosphate tab 200 mg	5	PA
SOLOSEC - secnidazole granules packet 2 gm	4	
STREPTOMYCIN SULFATE - streptomycin sulfate for inj 1 gm	5	
sulfadiazine tab 500 mg	5	
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	2	
sulfamethoxazole-trimethoprim tab 400-80 mg, 800-160 mg	1	
targadox - doxycycline hyclate tab 50 mg	2	
tazicef - ceftazidime for inj 1 gm	2	

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Drug Name	Drug Tier	Requirements/Limits
tazicef - ceftazidime for iv soln 1 gm	2	
tazicef - ceftazidime for iv soln 6 gm	2	
tazicef - ceftazidime for iv soln 2 gm	2	
TEFLARO - ceftaroline fosamil for iv soln 400 mg, 600 mg	5	
tetracycline hcl cap 250 mg, 500 mg	2	
TETRACYCLINE HYDROCHLORIDE - tetracycline hcl tab 250 mg, 500 mg	5	
tigecycline for iv soln 50 mg	2	
tinidazole tab 250 mg, 500 mg	1	
TOBRAMYCIN SULFATE - tobramycin sulfate inj 10 mg/ml (base equivalent)	3	
tobramycin sulfate for inj 1.2 gm	2	
tobramycin sulfate inj 80 mg/2ml (40 mg/ml) (base equiv), 1.2 gm/30ml (40 mg/ml) (base equiv)	2	
trimethoprim tab 100 mg	2	
TYGACIL - tigecycline for iv soln 50 mg	5	
UNASYN - ampicillin & sulbactam sodium for inj 3 (2-1) gm	4	
UNASYN BULK PACK - ampicillin & sulbactam sodium for iv soln 15 (10-5) gm	4	
VABOMERE - meropenem-vaborbactam for iv soln 2 gm (1-1 gm)	4	
VANCOCIN - vancomycin hcl cap 125 mg (base equivalent)	4	QL (120 capsules/30 days)
VANCOCIN - vancomycin hcl cap 250 mg (base equivalent)	4	QL (240 capsules/30 days)
vancomycin hcl cap 125 mg (base equivalent)	2	QL (120 capsules/30 days)
vancomycin hcl cap 250 mg (base equivalent)	2	QL (240 capsules/30 days)
vancomycin hcl for iv soln 100 gm (base equivalent)	2	
vancomycin hcl for iv soln 500 mg (base equivalent), 750 mg (base equivalent), 1 gm (base equivalent), 5 gm (base equivalent), 10 gm (base equivalent)	2	
vancomycin hcl for oral soln 25 mg/ml (base equivalent)	2	QL (600 mls/30 days)
vancomycin hcl for oral soln 50 mg/ml (base equivalent)	2	QL (1200 mls/30 days)
VANDAZOLE - metronidazole vaginal gel 0.75%	3	
XACIATO - clindamycin phosphate vaginal gel 2%	4	
XIFAXAN - rifaximin tab 200 mg	4	PA, QL (9 tablets/30 days)
ZEMDRI - plazomicin sulfate iv soln 500 mg/10ml (50 mg/ml) (base eq)	5	
ZERBAXA - ceftolozane-tazobactam for inj 1.5 gm (1-0.5 gm)	5	
ZEVTERA - ceftobiprole medocaril for iv soln 667 mg	5	
ZITHROMAX - azithromycin for susp 200 mg/5ml	4	
ZITHROMAX - azithromycin tab 250 mg, 500 mg	4	
ZITHROMAX TRI-PAK - azithromycin tab 500 mg	4	

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Drug Name	Drug Tier	Requirements/Limits
ZITHROMAX Z-PAK - azithromycin tab 250 mg	4	
ZOSYN - piperacillin sod-tazobactam sod in dex iv soln 2-0.25gm/50ml	4	
ZYVOX - linezolid for susp 100 mg/5ml	4	PA
ZYVOX - linezolid iv soln 600 mg/300ml (2 mg/ml)	4	
Anticonvulsants		
APTIOM - eslicarbazepine acetate tab 200 mg, 400 mg	5	QL (30 tablets/30 days)
APTIOM - eslicarbazepine acetate tab 600 mg, 800 mg	5	QL (60 tablets/30 days)
BANZEL - rufinamide susp 40 mg/ml	5	
BANZEL - rufinamide tab 200 mg, 400 mg	5	
brivaracetam oral soln 10 mg/ml	2	QL (2 bottles/30 days)
brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	2	QL (60 tablets/30 days)
BRIVIACT - brivaracetam oral soln 10 mg/ml	5	QL (2 bottles/30 days)
BRIVIACT - brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	5	QL (60 tablets/30 days)
CARBAMAZEPINE - carbamazepine chew tab 200 mg	4	
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	2	
carbamazepine chew tab 100 mg	2	
carbamazepine susp 100 mg/5ml	2	
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	2	
carbamazepine tab 200 mg	2	
CARBATROL - carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	4	
CELONTIN - methsuximide cap 300 mg	4	
clobazam suspension 2.5 mg/ml	2	PA (>=65 yr), QL (480 mls/30 days)
clobazam tab 10 mg, 20 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
DEPAKOTE - divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	4	
DEPAKOTE ER - divalproex sodium tab er 24 hr 250 mg, 500 mg	4	
DEPAKOTE SPRINKLES - divalproex sodium cap delayed release sprinkle 125 mg	4	
DIACOMIT - stiripentol cap 250 mg, 500 mg*	5	
DIACOMIT - stiripentol packet 250 mg, 500 mg*	5	
diazepam rectal gel delivery system 2.5 mg, 10 mg, 20 mg	2	QL (5 twin pack(s)/30 days)
DILANTIN - phenytoin sodium extended cap 30 mg, 100 mg	4	
DILANTIN INFATABS - phenytoin chew tab 50 mg	4	
DILANTIN-125 - phenytoin susp 125 mg/5ml	4	
divalproex sodium cap delayed release sprinkle 125 mg	2	
divalproex sodium tab delayed release 125 mg	1	

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Drug Name	Drug Tier	Requirements/Limits
divalproex sodium tab delayed release 250 mg, 500 mg	2	
divalproex sodium tab er 24 hr 250 mg, 500 mg	2	
ELEPSIA XR - levetiracetam tab er 24hr 1000 mg	4	
ELEPSIA XR - levetiracetam tab er 24hr 1500 mg	5	
EPIDIOLEX - cannabidiol soln 100 mg/ml*	5	PA
EPRONTIA - topiramate oral soln 25 mg/ml	4	
eslicarbazepine acetate tab 200 mg, 400 mg	5	QL (30 tablets/30 days)
eslicarbazepine acetate tab 600 mg, 800 mg	5	QL (60 tablets/30 days)
ethosuximide cap 250 mg	2	
ethosuximide soln 250 mg/5ml	2	
felbamate susp 600 mg/5ml	2	
felbamate tab 400 mg, 600 mg	2	
FELBATOL - felbamate tab 400 mg	5	
FELBATOL - felbamate tab 600 mg	4	
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	5	PA, QL (360 mls/30 days)
FYCOMPA - perampanel susp 0.5 mg/ml	4	QL (2 bottles/28 days)
FYCOMPA - perampanel tab 2 mg	4	QL (30 tablets/30 days)
FYCOMPA - perampanel tab 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	QL (30 tablets/30 days)
gabapentin cap 100 mg	1	QL (1080 capsules/30 days)
gabapentin cap 200 mg	5	QL (540 capsules/30 days)
gabapentin cap 300 mg	1	QL (360 capsules/30 days)
gabapentin cap 400 mg	1	QL (270 capsules/30 days)
gabapentin oral soln 250 mg/5ml	2	QL (2160 mls/30 days)
gabapentin tab 600 mg	2	QL (180 tablets/30 days)
gabapentin tab 800 mg	2	QL (135 tablets/30 days)
GABARONE - gabapentin tab 100 mg	5	QL (1080 tablets/30 days)
GABARONE - gabapentin tab 400 mg	5	QL (270 tablets/30 days)
KEPPRA - levetiracetam oral soln 100 mg/ml	4	
KEPPRA - levetiracetam tab 250 mg, 500 mg, 750 mg	4	
KEPPRA - levetiracetam tab 1000 mg	5	
KEPPRA XR - levetiracetam tab er 24hr 500 mg, 750 mg	4	
lacosamide oral solution 10 mg/ml	2	
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	2	
LAMICTAL - lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	4	
LAMICTAL CHEWABLE DISPERSIBLE - lamotrigine tab chewable dispersible 5 mg	4	
LAMICTAL CHEWABLE DISPERSIBLE - lamotrigine tab chewable dispersible 25 mg	5	

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

Drug Name	Drug Tier	Requirements/Limits
LAMICTAL ODT - lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	4	
LAMICTAL STARTER/NOT TAKING CARBAMAZEPINE - lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	4	
LAMICTAL STARTER/TAKING CARBAMAZEPINE/NOT TAKING VALPROATE - lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	5	
LAMICTAL STARTER/TAKING VALPROATE - lamotrigine tab 35 x 25 mg starter kit	4	
LAMICTAL XR - lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	4	
LAMICTAL XR - lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	4	
LAMICTAL XR - lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	5	
LAMICTAL XR - lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg	4	
LAMICTAL XR - lamotrigine tab er 24hr 200 mg, 250 mg, 300 mg	5	
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	2	
lamotrigine tab chewable dispersible 5 mg, 25 mg	2	
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	2	
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	2	
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	2	
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg	2	
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	1	
lamotrigine tab 35 x 25 mg starter kit	2	
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	2	
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	5	
LEVETIRACETAM - levetiracetam tab disintegrating soluble 250 mg, 500 mg	4	
levetiracetam oral soln 100 mg/ml	2	
levetiracetam tab er 24hr 500 mg, 750 mg	2	
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	2	
LYRICA - pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg	4	QL (90 capsules/30 days)
LYRICA - pregabalin cap 225 mg, 300 mg	4	QL (60 capsules/30 days)
LYRICA - pregabalin soln 20 mg/ml	4	QL (900 mls/30 days)
LYRICA CR - pregabalin tab er 24hr 82.5 mg, 165 mg	4	QL (30 tablets/30 days)
LYRICA CR - pregabalin tab er 24hr 330 mg	4	QL (60 tablets/30 days)
methsuximide cap 300 mg	2	
MOTPOLY XR - lacosamide cap er 24hr 100 mg, 150 mg	4	

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

Drug Name	Drug Tier	Requirements/Limits
MOTPOLY XR - lacosamide cap er 24hr 200 mg	5	
MYSOLINE - primidone tab 50 mg, 250 mg	5	
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	4	QL (10 bottles/30 days)
NEURONTIN - gabapentin cap 100 mg	4	QL (1080 capsules/30 days)
NEURONTIN - gabapentin cap 300 mg	4	QL (360 capsules/30 days)
NEURONTIN - gabapentin cap 400 mg	4	QL (270 capsules/30 days)
NEURONTIN - gabapentin oral soln 250 mg/5ml	4	QL (2160 mls/30 days)
NEURONTIN - gabapentin tab 600 mg	5	QL (180 tablets/30 days)
NEURONTIN - gabapentin tab 800 mg	5	QL (135 tablets/30 days)
ONFI - clobazam suspension 2.5 mg/ml	5	PA (>=65 yr), QL (480 mls/30 days)
ONFI - clobazam tab 10 mg, 20 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	2	
oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	2	
oxcarbazepine tab 150 mg, 300 mg, 600 mg	2	
OXTELLAR XR - oxcarbazepine tab er 24hr 150 mg, 300 mg	4	
OXTELLAR XR - oxcarbazepine tab er 24hr 600 mg	5	
perampanel susp 0.5 mg/ml	2	QL (2 bottles/28 days)
perampanel tab 2 mg	2	QL (30 tablets/30 days)
perampanel tab 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	QL (30 tablets/30 days)
phenobarbital elixir 20 mg/5ml#	2	
phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg#	2	
phenytek - phenytoin sodium extended cap 200 mg, 300 mg	2	
phenytoin chew tab 50 mg	2	
phenytoin infatabs - phenytoin chew tab 50 mg	2	
phenytoin sodium extended cap 100 mg, 200 mg, 300 mg	2	
phenytoin susp 125 mg/5ml	2	
pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg	2	QL (90 capsules/30 days)
pregabalin cap 225 mg, 300 mg	2	QL (60 capsules/30 days)
pregabalin soln 20 mg/ml	2	QL (900 mls/30 days)
pregabalin tab er 24hr 82.5 mg, 165 mg	2	QL (30 tablets/30 days)
pregabalin tab er 24hr 330 mg	2	QL (60 tablets/30 days)
PRIMIDONE - primidone tab 125 mg	4	
primidone tab 50 mg, 250 mg	2	
relgaabi - gabapentin cap 200 mg	5	QL (540 capsules/30 days)
relgaabi - gabapentin cap 300 mg	5	QL (360 capsules/30 days)
relgaabi - gabapentin cap 400 mg	5	QL (270 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
roweepra - levetiracetam tab 500 mg	2	
rufinamide susp 40 mg/ml	2	
rufinamide tab 200 mg	2	
rufinamide tab 400 mg	5	
SABRIL - vigabatrin powd pack 500 mg*	5	QL (180 packets/30 days)
SABRIL - vigabatrin tab 500 mg*	5	QL (180 tablets/30 days)
SPRITAM - levetiracetam tab disintegrating soluble 250 mg, 500 mg	4	
SUBVENITE - lamotrigine oral susp 10 mg/ml	5	
subvenite - lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	1	
subvenite starter kit/blue - lamotrigine tab 35 x 25 mg starter kit	2	
subvenite starter kit/green - lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	5	
subvenite starter kit/orange - lamotrigine tab 25 mg (42) &100 mg (7) starter kit	2	
SYMPAZAN - clobazam oral film 5 mg	4	PA (>=65 yr), QL (240 films/30 days)
SYMPAZAN - clobazam oral film 10 mg, 20 mg	5	PA (>=65 yr), QL (60 films/30 days)
TEGRETOL - carbamazepine susp 100 mg/5ml	4	
TEGRETOL - carbamazepine tab 200 mg	4	
TEGRETOL-XR - carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	4	
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg	2	
TOPAMAX - topiramate tab 25 mg, 50 mg	4	
TOPAMAX - topiramate tab 100 mg, 200 mg	5	
TOPAMAX SPRINKLE - topiramate sprinkle cap 15 mg	4	
TOPAMAX SPRINKLE - topiramate sprinkle cap 25 mg	5	
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 200 mg	2	
topiramate cap er 24hr sprinkle 150 mg	4	
topiramate cap er 24hr 25 mg, 50 mg, 100 mg	2	
topiramate cap er 24hr 200 mg	5	
topiramate oral soln 25 mg/ml	2	
topiramate sprinkle cap 15 mg, 25 mg, 50 mg	2	
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg	1	
TRILEPTAL - oxcarbazepine susp 300 mg/5ml (60 mg/ml)	5	
TRILEPTAL - oxcarbazepine tab 150 mg, 300 mg	4	
TRILEPTAL - oxcarbazepine tab 600 mg	5	
TROKENDI XR - topiramate cap er 24hr 25 mg, 50 mg, 100 mg	4	
TROKENDI XR - topiramate cap er 24hr 200 mg	5	

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

Drug Name	Drug Tier	Requirements/Limits
valproate sodium oral soln 250 mg/5ml (base equiv)	2	
valproic acid cap 250 mg	2	
VALTOCO 10 MG DOSE - diazepam nasal spray 10 mg/0.1 ml	4	QL (5 twin pack(s)/30 days)
VALTOCO 15 MG DOSE - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	4	QL (5 twin pack(s)/30 days)
VALTOCO 20 MG DOSE - diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	5	QL (5 twin pack(s)/30 days)
VALTOCO 5 MG DOSE - diazepam nasal spray 5 mg/0.1 ml	4	QL (5 twin pack(s)/30 days)
*vigabatrin powd pack 500 mg**	5	QL (180 packets/30 days)
*vigabatrin tab 500 mg**	5	QL (180 tablets/30 days)
*vigadrone - vigabatrin powd pack 500 mg**	5	QL (180 packets/30 days)
*vigadrone - vigabatrin tab 500 mg**	5	QL (180 tablets/30 days)
VIGAFYDE - vigabatrin oral soln 100 mg/ml	5	QL (5 bottles/30 days)
VIMPAT - lacosamide oral solution 10 mg/ml	5	
VIMPAT - lacosamide tab 50 mg	4	
VIMPAT - lacosamide tab 100 mg, 150 mg, 200 mg	5	
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	5	
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	5	
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg	4	
XCOPRI - cenobamate tab titration pack 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	5	
XCOPRI - cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	5	
ZARONTIN - ethosuximide cap 250 mg	4	
ZARONTIN - ethosuximide soln 250 mg/5ml	4	
ZONEGRAN - zonisamide cap 25 mg	4	
ZONEGRAN - zonisamide cap 100 mg	5	
ZONISADE - zonisamide oral susp 100 mg/5ml (20 mg/ml)	4	
zonisamide cap 25 mg, 50 mg, 100 mg	2	
ZTALMY - ganaxolone susp 50 mg/ml*	5	PA, QL (10 bottles/30 days)
Antidementia Agents		
ARICEPT - donepezil hydrochloride tab 5 mg, 10 mg, 23 mg	4	
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	2	
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg	1	
EXELON - rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	4	
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	4	
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg	2	

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

Drug Name	Drug Tier	Requirements/Limits
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	2	
memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg	2	PA (<=29 yr)
memantine hcl oral solution 2 mg/ml	2	PA (<=29 yr)
memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack	2	PA (<=29 yr)
memantine hcl tab 5 mg, 10 mg	2	PA (<=29 yr)
memantine hcl-donepezil hcl cap er 24hr 14-10 mg, 21-10 mg, 28-10 mg	2	
NAMZARIC - memantine hcl-donepezil hcl cap er 24hr 7-10 mg, 14-10 mg, 21-10 mg, 28-10 mg	3	
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	2	
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	2	
ZUNVEYL - benzgalantamine gluconate tab delayed release 5 mg, 10 mg, 15 mg	4	
Antidepressants		
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#	2	
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg#	2	
ANAFRANIL - clomipramine hcl cap 25 mg, 75 mg#	4	
ANAFRANIL - clomipramine hcl cap 50 mg#	5	
APLENZIN - bupropion hbr tab er 24hr 174 mg, 348 mg, 522 mg	5	QL (30 tablets/30 days)
AUVELITY - dextromethorphan hbr-bupropion hcl tab er 45-105 mg	5	QL (60 tablets/30 days)
AUVELITY TITRATION PACK - dextromethorphan-bupropion tab er pack 30-105 & 45-105 mg	5	QL (1 box/28 days)
bupropion hcl tab er 12hr 100 mg	2	QL (90 tablets/30 days)
bupropion hcl tab er 12hr 150 mg, 200 mg	2	QL (60 tablets/30 days)
bupropion hcl tab er 24hr 150 mg	2	QL (90 tablets/30 days)
bupropion hcl tab er 24hr 300 mg	2	QL (30 tablets/30 days)
bupropion hcl tab 75 mg	2	QL (60 tablets/30 days)
bupropion hcl tab 100 mg	2	QL (120 tablets/30 days)
BUPROPION HYDROCHLORIDE ER (XL) - bupropion hcl tab er 24hr 450 mg	4	QL (30 tablets/30 days)
CELEXA - citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv)	4	QL (45 tablets/30 days)
CELEXA - citalopram hydrobromide tab 40 mg (base equiv)	4	QL (30 tablets/30 days)
CHLORDIAZEPOXIDE/AMITRIPTYLINE - chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg#	4	PA (>=65 yr)
citalopram hydrobromide cap 30 mg	2	QL (30 capsules/30 days)
citalopram hydrobromide oral soln 10 mg/5ml	2	QL (600 mls/30 days)
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv)	1	QL (45 tablets/30 days)
citalopram hydrobromide tab 40 mg (base equiv)	1	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
clomipramine hcl cap 25 mg, 50 mg, 75 mg#	2	
desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#	2	
DESVENLAFAXINE ER - desvenlafaxine tab er 24hr 50 mg, 100 mg	4	QL (30 tablets/30 days)
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2	QL (30 tablets/30 days)
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg#	2	
doxepin hcl conc 10 mg/ml#	2	
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 20 mg (base eq), 40 mg (base eq), 60 mg (base eq)	4	QL (60 capsules/30 days)
DRIZALMA SPRINKLE - duloxetine hcl cap delayed release sprinkle 30 mg (base eq)	4	QL (90 capsules/30 days)
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 60 mg (base eq)	2	QL (60 capsules/30 days)
duloxetine hcl enteric coated pellets cap 30 mg (base eq), 40 mg (base eq)	2	QL (90 capsules/30 days)
DULOXETINE HYDROCHLORIDE - duloxetine hcl enteric coated pellets cap 80 mg (base eq), 90 mg (base eq), 120 mg (base eq)	4	QL (30 capsules/30 days)
EFFEXOR XR - venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	4	QL (60 capsules/30 days)
EFFEXOR XR - venlafaxine hcl cap er 24hr 75 mg (base equivalent)	4	QL (90 capsules/30 days)
EFFEXOR XR - venlafaxine hcl cap er 24hr 150 mg (base equivalent)	4	QL (30 capsules/30 days)
EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	5	PA, QL (30 patches/30 days)
ESCITALOPRAM OXALATE - escitalopram oxalate cap 15 mg (base equiv)	4	QL (30 capsules/30 days)
escitalopram oxalate soln 5 mg/5ml (base equiv)	2	QL (600 mls/30 days)
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv)	1	QL (45 tablets/30 days)
escitalopram oxalate tab 20 mg (base equiv)	1	QL (30 tablets/30 days)
EXXUA - gepirone hcl tab er 24hr 18.2 mg, 36.3 mg, 54.5 mg, 72.6 mg	5	QL (30 tablets/30 days)
EXXUA TITRATION PACK - gepirone hcl tab er 24hr 18.2 mg	5	QL (32 tablets/30 days)
FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	4	QL (30 capsules/30 days)
FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	4	QL (28 capsules/28 days)
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg	4	QL (4 capsules/28 days)
fluoxetine hcl cap 10 mg	1	QL (90 capsules/30 days)
fluoxetine hcl cap 20 mg	1	QL (120 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
fluoxetine hcl cap 40 mg	1	QL (60 capsules/30 days)
fluoxetine hcl solution 20 mg/5ml	2	QL (600 mls/30 days)
fluoxetine hcl tab 10 mg	2	QL (90 tablets/30 days)
fluoxetine hcl tab 20 mg	2	QL (120 tablets/30 days)
fluoxetine hcl tab 60 mg	2	QL (30 tablets/30 days)
fluvoxamine maleate cap er 24hr 100 mg, 150 mg	2	QL (60 capsules/30 days)
fluvoxamine maleate tab 25 mg, 50 mg	2	QL (30 tablets/30 days)
fluvoxamine maleate tab 100 mg	2	QL (90 tablets/30 days)
imipramine hcl tab 10 mg, 25 mg, 50 mg#	2	
imipramine pamoate cap 75 mg, 100 mg, 125 mg, 150 mg#	2	
LEXAPRO - escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv)	4	QL (45 tablets/30 days)
LEXAPRO - escitalopram oxalate tab 20 mg (base equiv)	4	QL (30 tablets/30 days)
MARPLAN - isocarboxazid tab 10 mg	4	
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg	2	QL (30 tablets/30 days)
mirtazapine tab 7.5 mg, 30 mg, 45 mg	1	QL (30 tablets/30 days)
mirtazapine tab 15 mg	1	QL (45 tablets/30 days)
NARDIL - phenelzine sulfate tab 15 mg	4	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 250 mg	4	
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 100 mg, 150 mg, 200 mg	3	
NORPRAMIN - desipramine hcl tab 10 mg, 25 mg#	4	
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg#	2	
nortriptyline hcl soln 10 mg/5ml#	2	
PAMELOR - nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg#	5	
PARNATE - tranylcypromine sulfate tab 10 mg	5	
paroxetine hcl oral susp 10 mg/5ml (base equiv)#	2	QL (900 mls/30 days)
paroxetine hcl tab er 24hr 12.5 mg#	2	QL (30 tablets/30 days)
paroxetine hcl tab er 24hr 25 mg, 37.5 mg#	2	QL (60 tablets/30 days)
paroxetine hcl tab 10 mg, 40 mg#	2	QL (45 tablets/30 days)
paroxetine hcl tab 20 mg#	2	QL (30 tablets/30 days)
paroxetine hcl tab 30 mg#	2	QL (60 tablets/30 days)
PAXIL - paroxetine hcl tab 10 mg, 40 mg#	4	QL (45 tablets/30 days)
PAXIL - paroxetine hcl tab 20 mg#	4	QL (30 tablets/30 days)
PAXIL - paroxetine hcl tab 30 mg#	4	QL (60 tablets/30 days)
PAXIL CR - paroxetine hcl tab er 24hr 12.5 mg#	4	QL (30 tablets/30 days)
PAXIL CR - paroxetine hcl tab er 24hr 25 mg, 37.5 mg#	4	QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
PERPHENAZINE/AMITRIPTYLINE - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg#	4	
phenelzine sulfate tab 15 mg	2	
PRISTIQ - desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	4	QL (30 tablets/30 days)
protriptyline hcl tab 5 mg, 10 mg#	2	
RALDESY - trazodone hcl oral soln 50 mg/5ml	4	QL (1200 mls/30 days)
REMERON - mirtazapine tab 15 mg	4	QL (45 tablets/30 days)
REMERON - mirtazapine tab 30 mg	4	QL (30 tablets/30 days)
REMERON SOLTAB - mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg	4	QL (30 tablets/30 days)
sertraline hcl cap 150 mg	2	QL (30 capsules/30 days)
sertraline hcl cap 200 mg	2	QL (30 capsules/30 days)
sertraline hcl oral concentrate for solution 20 mg/ml	2	QL (300 mls/30 days)
sertraline hcl tab 25 mg, 50 mg	1	QL (45 tablets/30 days)
sertraline hcl tab 100 mg	1	QL (60 tablets/30 days)
tranylcypromine sulfate tab 10 mg	2	
trazodone hcl tab 50 mg, 100 mg, 150 mg	1	
trazodone hcl tab 300 mg	2	
trimipramine maleate cap 25 mg, 50 mg, 100 mg#	2	
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	4	QL (30 tablets/30 days)
VENLAFAXINE BESYLATE ER - venlafaxine besylate tab er 24hr 112.5 mg	4	QL (60 tablets/30 days)
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	1	QL (60 capsules/30 days)
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	2	QL (90 capsules/30 days)
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	2	QL (30 capsules/30 days)
venlafaxine hcl tab er 24hr 37.5 mg (base equivalent)	2	QL (60 tablets/30 days)
venlafaxine hcl tab er 24hr 75 mg (base equivalent)	2	QL (90 tablets/30 days)
venlafaxine hcl tab er 24hr 150 mg (base equivalent), 225 mg (base equivalent)	2	QL (30 tablets/30 days)
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	2	QL (90 tablets/30 days)
VIIBRYD - vilazodone hcl tab 10 mg, 20 mg, 40 mg	4	QL (30 tablets/30 days)
vilazodone hcl tab 10 mg, 20 mg, 40 mg	2	QL (30 tablets/30 days)
WELLBUTRIN SR - bupropion hcl tab er 12hr 100 mg	4	QL (90 tablets/30 days)
WELLBUTRIN SR - bupropion hcl tab er 12hr 150 mg, 200 mg	4	QL (60 tablets/30 days)
WELLBUTRIN XL - bupropion hcl tab er 24hr 150 mg	5	QL (90 tablets/30 days)
WELLBUTRIN XL - bupropion hcl tab er 24hr 300 mg	5	QL (30 tablets/30 days)
ZOLOFT - sertraline hcl oral concentrate for solution 20 mg/ml	4	QL (300 mls/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
ZOLOFT - sertraline hcl tab 25 mg, 50 mg	4	QL (45 tablets/30 days)
ZOLOFT - sertraline hcl tab 100 mg	4	QL (60 tablets/30 days)
ZURZUVAE - zuranolone cap 20 mg, 25 mg	5	QL (28 capsules/365 days)
ZURZUVAE - zuranolone cap 30 mg	5	QL (14 capsules/365 days)
Antiemetics		
aprepitant capsule therapy pack 80 & 125 mg	2	BD
aprepitant capsule 40 mg, 80 mg, 125 mg	2	BD
BONJESTA - doxylamine-pyridoxine tab er 20-20 mg#	4	PA (>=65 yr)
chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	2	PA (>=65 yr)
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	2	PA (>=65 yr)
compro - prochlorperazine suppos 25 mg	2	
DICLEGIS - doxylamine-pyridoxine tab delayed release 10-10 mg#	4	PA (>=65 yr)
doxylamine-pyridoxine tab delayed release 10-10 mg#	2	PA (>=65 yr)
dronabinol cap 2.5 mg, 5 mg, 10 mg	2	BD
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	4	BD
EMEND BIPACK - aprepitant capsule 80 mg	4	BD
EMEND TRIPACK - aprepitant capsule therapy pack 80 & 125 mg	4	BD
granisetron hcl tab 1 mg	2	BD
GRANISOL - granisetron hcl oral soln 2 mg/10ml (base equivalent)	5	BD
MARINOL - dronabinol cap 2.5 mg	4	BD
meclizine hcl tab 12.5 mg, 25 mg, 50 mg#	2	
NEREUS - tradipitant capsule 85 mg	5	PA, QL (8 capsules/30 days)
ondansetron hcl oral soln 4 mg/5ml	2	
ondansetron hcl tab 4 mg, 8 mg	2	
ONDANSETRON ODT - ondansetron orally disintegrating tab 16 mg	4	
ondansetron orally disintegrating tab 4 mg, 8 mg	2	
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	2	PA (>=65 yr)
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	2	
prochlorperazine suppos 25 mg	2	
promethazine hcl oral soln 6.25 mg/5ml#	2	
promethazine hcl suppos 12.5 mg, 25 mg#	2	
promethazine hcl tab 12.5 mg, 25 mg, 50 mg#	2	
PROMETHEGAN - promethazine hcl suppos 50 mg#	4	
promethegan - promethazine hcl suppos 12.5 mg, 25 mg#	2	
SANCUSO - granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	5	
scopolamine td patch 72hr 1 mg/3days#	2	PA (>=65 yr)
TRANSDERM SCOP - scopolamine td patch 72hr 1 mg/3days#	4	PA (>=65 yr)

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

Drug Name	Drug Tier	Requirements/Limits
trimethobenzamide hcl cap 300 mg	2	
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	4	BD
Antifungals		
AMBISOME - amphotericin b liposome iv for susp 50 mg	5	BD
AMPHOTERICIN B - amphotericin b for iv soln 50 mg	4	BD
amphotericin b liposome iv for susp 50 mg	5	BD
ANCOBON - flucytosine cap 250 mg, 500 mg	5	PA
caspofungin acetate for iv soln 50 mg, 70 mg	2	
ciclodan - ciclopirox solution 8%	2	QL (6.6 mls/30 days)
ciclopirox gel 0.77%	2	
ciclopirox olamine cream 0.77% (base equiv)	2	
ciclopirox olamine susp 0.77% (base equiv)	2	
ciclopirox shampoo 1%	2	
ciclopirox solution 8%	2	QL (6.6 mls/30 days)
clotrimazole cream 1%	2	
clotrimazole soln 1%	2	
clotrimazole troche 10 mg	2	
CRESEMBA - isavuconazonium sulfate cap 74.5 mg, 186 mg	5	PA
DIFLUCAN - fluconazole for susp 40 mg/ml	4	
ECONAZOLE NITRATE - econazole nitrate foam 1%	5	
econazole nitrate cream 1%	2	
ERAXIS - anidulafungin for iv soln 50 mg, 100 mg	4	
ERTACZO - sertaconazole nitrate cream 2%	4	QL (60 grams/30 days)
EXELDERM - sulconazole nitrate cream 1%	4	
EXELDERM - sulconazole nitrate solution 1%	4	
fluconazole for susp 10 mg/ml, 40 mg/ml	2	
fluconazole in nacl 0.9% inj 200 mg/100ml, 400 mg/200ml	2	
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg	1	
flucytosine cap 250 mg	5	PA
flucytosine cap 500 mg	2	PA
griseofulvin microsize susp 125 mg/5ml	2	
griseofulvin microsize tab 500 mg	2	
GRISEOFULVIN ULTRAMICROSIZE - griseofulvin ultramicrosize tab 165 mg	5	
griseofulvin ultramicrosize tab 125 mg, 250 mg	2	
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	4	
itraconazole cap 100 mg	2	QL (120 capsules/30 days)
itraconazole oral soln 10 mg/ml	5	QL (1200 mls/30 days)
JUBLIA - efinaconazole soln 10%	4	QL (8 mls/30 days)

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Drug Name	Drug Tier	Requirements/Limits
ketoconazole cream 2%	2	
ketoconazole foam 2%	2	
ketoconazole shampoo 2%	2	
ketoconazole tab 200 mg	2	
ketodan - ketoconazole foam 2%	2	
klayesta - nystatin topical powder 100000 unit/gm	2	
LULICONAZOLE - luliconazole cream 1%	4	
LUZU - luliconazole cream 1%	4	
micafungin sodium for iv soln 50 mg, 100 mg	2	
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	4	
naftifine hcl cream 1%	2	
naftifine hcl cream 2%	2	
naftifine hcl gel 2%	2	
NAFTIN - naftifine hcl gel 2%	4	
NOXAFIL - posaconazole for delayed release susp packet 300 mg	5	PA
nyamyc - nystatin topical powder 100000 unit/gm	2	
nystatin cream 100000 unit/gm	2	
nystatin oint 100000 unit/gm	2	
nystatin susp 100000 unit/ml	2	
nystatin tab 500000 unit	2	
nystatin topical powder 100000 unit/gm	2	
nystop - nystatin topical powder 100000 unit/gm	2	
oxiconazole nitrate cream 1%	2	
OXISTAT - oxiconazole nitrate lotion 1%	4	
posaconazole iv soln 300 mg/16.7ml (18 mg/ml)	2	PA
posaconazole susp 40 mg/ml	5	PA
posaconazole tab delayed release 100 mg	5	PA
SPORANOX - itraconazole cap 100 mg	5	QL (120 capsules/30 days)
tavaborole soln 5%	2	QL (10 mls/30 days)
terbinafine hcl tab 250 mg	1	QL (30 tablets/30 days)
terconazole vaginal cream 0.4%, 0.8%	2	
terconazole vaginal suppos 80 mg	2	
TOLSURA - itraconazole cap 65 mg	5	QL (120 capsules/30 days)
VFEND - voriconazole for susp 40 mg/ml	5	PA
VFEND IV - voriconazole for inj 200 mg	4	PA
VIVJOA - oteseconazole cap therapy pack 150 mg (12 weeks)	4	PA
voriconazole for inj 200 mg	2	PA
voriconazole for susp 40 mg/ml	2	PA

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

Drug Name	Drug Tier	Requirements/Limits
voriconazole tab 50 mg, 200 mg	2	PA
Antigout Agents		
allopurinol tab 100 mg, 300 mg	1	
allopurinol tab 200 mg	2	
colchicine cap 0.6 mg	2	
colchicine tab 0.6 mg	2	
colchicine w/ probenecid tab 0.5-500 mg	2	
febuxostat tab 40 mg, 80 mg	2	QL (30 tablets/30 days)
GLOPERBA - colchicine oral soln 0.6 mg/5ml	4	
MITIGARE - colchicine cap 0.6 mg	4	
probenecid tab 500 mg	2	
ULORIC - febuxostat tab 40 mg, 80 mg	4	QL (30 tablets/30 days)
Antimigraine Agents		
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml	3	PA, QL (2 pens/30 days)
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 140 mg/ml	3	PA, QL (1 pen/30 days)
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	4	PA, QL (3 pens/90 days)
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	4	PA, QL (3 syringes/90 days)
almotriptan malate tab 6.25 mg, 12.5 mg	2	QL (12 tablets/30 days)
BREKIYA - dihydroergotamine mesylate soln auto-inj 1 mg/ml	5	PA, QL (24 pens/28 days)
CAFERGOT - ergotamine w/ caffeine tab 1-100 mg	5	
dihydroergotamine mesylate nasal spray 4 mg/ml	5	PA, QL (8 mls/28 days)
eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)	2	QL (12 tablets/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	3	PA, QL (2 pens/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml	3	PA, QL (3 syringes/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml	3	PA, QL (2 syringes/30 days)
ERGOMAR - ergotamine tartrate sl tab 2 mg	5	PA, QL (20 tablets/28 days)
ergotamine w/ caffeine tab 1-100 mg	2	
frovatriptan succinate tab 2.5 mg (base equivalent)	2	QL (18 tablets/30 days)
IMITREX - sumatriptan succinate tab 25 mg, 50 mg, 100 mg	4	QL (18 tablets/30 days), ST
IMITREX STATDOSE REFILL - sumatriptan succinate solution cartridge 4 mg/0.5ml	4	QL (12 doses/30 days)
IMITREX STATDOSE REFILL - sumatriptan succinate solution cartridge 6 mg/0.5ml	5	QL (12 doses/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
IMITREX STATDOSE SYSTEM - sumatriptan succinate solution auto-injector 4 mg/0.5ml	4	QL (12 doses/30 days)
IMITREX STATDOSE SYSTEM - sumatriptan succinate solution auto-injector 6 mg/0.5ml	5	QL (12 doses/30 days)
MAXALT - rizatriptan benzoate tab 10 mg (base equivalent)	4	QL (18 tablets/30 days), ST
MAXALT-MLT - rizatriptan benzoate oral disintegrating tab 10 mg (base eq)	4	QL (18 tablets/30 days), ST
MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg	4	
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	2	QL (18 tablets/30 days)
NURTEC - rimegepant sulfate tab disint 75 mg	3	PA, QL (16 tablets/30 days)
ONZETRA XSAIL - sumatriptan succinate exhaler powder 11 mg/ nosepiece	4	QL (32 inhalers/30 days)
QULIPTA - atogepant tab 10 mg, 30 mg, 60 mg	5	PA, QL (30 tablets/30 days)
RELPAX - eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)	4	QL (12 tablets/30 days), ST
rizatriptan benzoate oral disintegrating tab 5 mg (base eq), 10 mg (base eq)	2	QL (18 tablets/30 days)
rizatriptan benzoate tab 5 mg (base equivalent), 10 mg (base equivalent)	2	QL (18 tablets/30 days)
sumatriptan nasal spray 5 mg/act, 20 mg/act	2	QL (12 units (2 packages)/30 days)
sumatriptan succinate inj 6 mg/0.5ml	2	QL (10 doses/30 days)
sumatriptan succinate solution auto-injector 6 mg/0.5ml	2	QL (12 doses/30 days)
sumatriptan succinate solution cartridge 4 mg/0.5ml	2	QL (12 doses/30 days)
sumatriptan succinate solution cartridge 6 mg/0.5ml	2	QL (12 doses/30 days)
sumatriptan succinate tab 25 mg, 50 mg, 100 mg	2	QL (18 tablets/30 days)
sumatriptan-naproxen sodium tab 85-500 mg	2	QL (18 tablets/30 days)
SYMBRAVO - meloxicam-rizatriptan tab 20-10 mg	4	QL (7 tablets/30 days)
TOSYMRA - sumatriptan nasal spray 10 mg/act	4	QL (18 units/30 days)
TREXIMET - sumatriptan-naproxen sodium tab 85-500 mg	4	QL (18 tablets/30 days), ST
TRUDHESA - dihydroergotamine mesylate hfa nasal aerosol 0.725 mg/act	5	PA, QL (12 mls/28 days)
UBRELVY - ubrogepant tab 50 mg, 100 mg	3	PA, QL (16 tablets/30 days)
ZAVZPRET - zavegepant hcl nasal spray 10 mg/act	4	PA, QL (8 units/30 days)
ZEMBRACE SYMTOUCH - sumatriptan succinate solution auto-injector 3 mg/0.5ml	5	QL (24 pens/30 days)
ZOLMITRIPTAN - zolmitriptan nasal spray 2.5 mg/spray unit	4	QL (2 spray unit device(s)/30 days)
zolmitriptan nasal spray 5 mg/spray unit	2	QL (2 spray unit device(s)/30 days)
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg	2	QL (12 tablets/30 days)
zolmitriptan tab 2.5 mg, 5 mg	2	QL (12 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
ZOMIG - zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	4	QL (2 spray unit device(s)/30 days)
zomig - zolmitriptan tab 2.5 mg, 5 mg	2	QL (12 tablets/30 days)
Antimyasthenic Agents		
MESTINON - pyridostigmine bromide oral soln 60 mg/5ml	5	
MESTINON - pyridostigmine bromide tab 60 mg	5	
MESTINON TIMESPAN - pyridostigmine bromide tab er 180 mg	5	
PYRIDOSTIGMINE BROMIDE - pyridostigmine bromide tab 30 mg	4	
pyridostigmine bromide oral soln 60 mg/5ml	2	
pyridostigmine bromide tab er 180 mg	2	
pyridostigmine bromide tab 60 mg	2	
Antimycobacterials		
CYCLOSERINE - cycloserine cap 250 mg	5	
dapsone tab 25 mg, 100 mg	2	
ethambutol hcl tab 100 mg, 400 mg	2	
isoniazid syrup 50 mg/5ml	2	
isoniazid tab 100 mg, 300 mg	1	
PRETOMANID - pretomanid tab 200 mg	4	
PRIFTIN - rifapentine tab 150 mg	4	
pyrazinamide tab 500 mg	2	
rifabutin cap 150 mg	2	
rifampin cap 150 mg, 300 mg	2	
rifampin for inj 600 mg	2	
rifapentine tab 150 mg	2	
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)*	5	
Antineoplastics		
abiraterone acetate tab 250 mg	2	PA, QL (120 tablets/30 days)
abiraterone acetate tab 500 mg†	5	PA, QL (60 tablets/30 days)
abirtega - abiraterone acetate tab 250 mg	2	PA, QL (120 tablets/30 days)
AFINITOR - everolimus tab 2.5 mg, 7.5 mg, 10 mg†	5	PA, QL (30 tablets/30 days)
AFINITOR - everolimus tab 5 mg†	5	PA, QL (60 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 2 mg, 5 mg	5	PA, QL (60 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 3 mg	5	PA, QL (90 tablets/30 days)
AKEEGA - niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg†	5	PA, QL (60 tablets/30 days)
ALECENSA - alectinib hcl cap 150 mg (base equivalent)*	5	PA, QL (240 capsules/30 days)
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg*	5	PA, QL (30 tablets/30 days)
ALUNBRIG - brigatinib tab 30 mg*	5	PA, QL (120 tablets/30 days)
ALUNBRIG - brigatinib tab 90 mg, 180 mg*	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
anastrozole tab 1 mg	1	
ARIMIDEX - anastrozole tab 1 mg	5	
AROMASIN - exemestane tab 25 mg	5	
AUGTYRO - repotrectinib cap 40 mg	5	PA, QL (180 capsules/30 days)
AUGTYRO - repotrectinib cap 160 mg	5	PA, QL (60 capsules/30 days)
AVMAPKI FAKZYNJA CO-PACK - avutometinib cap 0.8 mg & defactinib tab 200 mg therapy pack	5	PA, QL (66 tablets/28 days)
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg†	5	PA, QL (30 tablets/30 days)
BALVERSA - erdafitinib tab 3 mg†	5	PA, QL (90 tablets/30 days)
BALVERSA - erdafitinib tab 4 mg†	5	PA, QL (60 tablets/30 days)
BALVERSA - erdafitinib tab 5 mg†	5	PA, QL (30 tablets/30 days)
bexarotene cap 75 mg†	5	PA
bexarotene gel 1%	5	PA
bicalutamide tab 50 mg	2	
BOSULIF - bosutinib cap 50 mg	5	PA, QL (330 capsules/30 days)
BOSULIF - bosutinib cap 100 mg	5	PA, QL (180 capsules/30 days)
BOSULIF - bosutinib tab 100 mg†	5	PA, QL (180 tablets/30 days)
BOSULIF - bosutinib tab 400 mg, 500 mg†	5	PA, QL (30 tablets/30 days)
bosutinib tab 100 mg†	5	PA, QL (180 tablets/30 days)
bosutinib tab 400 mg, 500 mg†	5	PA, QL (30 tablets/30 days)
BRAFTOVI - encorafenib cap 75 mg*	5	PA, QL (180 capsules/30 days)
BRUKINSA - zanubrutinib cap 80 mg	5	PA, QL (120 capsules/30 days)
BRUKINSA - zanubrutinib tab 160 mg	5	PA, QL (60 tablets/30 days)
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
CALQUENCE - acalabrutinib maleate tab 100 mg*†	5	PA, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 100 mg*	5	PA, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 300 mg*	5	PA, QL (30 tablets/30 days)
CASODEX - bicalutamide tab 50 mg	4	
CAVHANZA - nilotinib tab disint 60 mg, 80 mg	5	PA, QL (112 tablets/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit*	5	PA, QL (56 capsules/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit*	5	PA, QL (112 capsules/28 days)
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit*	5	PA, QL (84 capsules/28 days)
COPIKTRA - duvelisib cap 15 mg, 25 mg*	5	PA, QL (56 capsules/28 days)
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)*	5	PA, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide tab 50 mg	3	BD
cyclophosphamide cap 25 mg, 50 mg	2	BD

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

Drug Name	Drug Tier	Requirements/Limits
DANZITEN - nilotinib tartrate tab 71 mg (base equivalent), 95 mg (base equivalent)†	5	PA, QL (112 tablets/28 days)
dasatinib tab 20 mg†	5	PA, QL (90 tablets/30 days)
dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg†	5	PA, QL (30 tablets/30 days)
DAURISMO - glasdegib maleate tab 25 mg (base equivalent)†	5	PA, QL (60 tablets/30 days)
DAURISMO - glasdegib maleate tab 100 mg (base equivalent)†	5	PA, QL (30 tablets/30 days)
DROXIA - hydroxyurea cap 200 mg, 300 mg, 400 mg	4	
ENSACOVE - ensartinib hcl cap 25 mg (base equivalent), 100 mg (base equivalent)	5	PA, QL (60 capsules/30 days)
ERIVEDGE - vismodegib cap 150 mg*†	5	PA, QL (30 capsules/30 days)
ERLEADA - apalutamide tab 60 mg*	5	PA, QL (120 tablets/30 days)
ERLEADA - apalutamide tab 240 mg*	5	PA, QL (30 tablets/30 days)
erlotinib hcl tab 25 mg (base equivalent)†	5	PA, QL (60 tablets/30 days)
erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent)†	5	PA, QL (30 tablets/30 days)
EULEXIN - flutamide cap 125 mg	5	
everolimus tab for oral susp 2 mg, 5 mg	5	PA, QL (60 tablets/30 days)
everolimus tab for oral susp 3 mg	5	PA, QL (90 tablets/30 days)
everolimus tab 2.5 mg, 7.5 mg, 10 mg†	5	PA, QL (30 tablets/30 days)
everolimus tab 5 mg†	5	PA, QL (60 tablets/30 days)
exemestane tab 25 mg	2	
FARESTON - toremifene citrate tab 60 mg (base equivalent)	5	
FEMARA - letrozole tab 2.5 mg	4	
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)*	5	PA, QL (21 capsules/28 days)
FRUZAQLA - fruquintinib cap 1 mg	5	PA, QL (84 capsules/28 days)
FRUZAQLA - fruquintinib cap 5 mg	5	PA, QL (21 capsules/28 days)
GAVRETO - pralsetinib cap 100 mg†	5	PA, QL (120 capsules/30 days)
gefitinib tab 250 mg†	5	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
GLEEVEC - imatinib mesylate tab 100 mg (base equivalent)†	5	PA, QL (90 tablets/30 days)
GLEEVEC - imatinib mesylate tab 400 mg (base equivalent)†	5	PA, QL (60 tablets/30 days)
GLEOSTINE - lomustine cap 10 mg, 40 mg	4	
GLEOSTINE - lomustine cap 100 mg	5	
GOMEKLI - mirdametinib cap 1 mg	5	PA, QL (168 capsules/28 days)
GOMEKLI - mirdametinib cap 2 mg	5	PA, QL (84 capsules/28 days)
GOMEKLI - mirdametinib tab for oral susp 1 mg	5	PA, QL (168 tablets/28 days)
HERNEXEOS - zongertinib tab 60 mg	5	PA, QL (180 tablets/60 days)
HYDREA - hydroxyurea cap 500 mg	4	

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

Drug Name	Drug Tier	Requirements/Limits
hydroxyurea cap 500 mg	2	
HYRNUO - sevabertinib tab 10 mg	5	PA, QL (120 tablets/30 days)
IBRANCE - palbociclib cap 125 mg*	5	PA, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg*	5	PA, QL (21 tablets/28 days)
IBTROZI - taletrectinib adipate cap 200 mg	5	PA, QL (90 capsules/30 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)*†	5	PA, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
imatinib mesylate tab 100 mg (base equivalent)†	4	PA, QL (90 tablets/30 days)
imatinib mesylate tab 400 mg (base equivalent)†	5	PA, QL (60 tablets/30 days)
IMBRUVICA - ibrutinib cap 70 mg*	5	PA, QL (30 capsules/30 days)
IMBRUVICA - ibrutinib cap 140 mg*	5	PA, QL (120 capsules/30 days)
IMBRUVICA - ibrutinib oral susp 70 mg/ml*	5	PA, QL (3 bottles/30 days)
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg*	5	PA, QL (30 tablets/30 days)
IMKELDI - imatinib mesylate oral soln 80 mg/ml (base equivalent)	5	PA, QL (2 bottles/28 days)
INLURIYO - imlunestrant tosylate tab 200 mg	5	PA, QL (60 tablets/30 days)
INLYTA - axitinib tab 1 mg*†	5	PA, QL (180 tablets/30 days)
INLYTA - axitinib tab 5 mg*†	5	PA, QL (120 tablets/30 days)
INQOVI - decitabine-cedazuridine tab 35-100 mg	5	PA, QL (5 tablets/28 days)
INREBIC - fedratinib hcl cap 100 mg†	5	PA, QL (120 capsules/30 days)
IRESSA - gefitinib tab 250 mg*†	5	PA, QL (30 tablets/30 days)
ITOVEBI - inavolisib tab 3 mg	5	PA, QL (60 tablets/30 days)
ITOVEBI - inavolisib tab 9 mg	5	PA, QL (30 tablets/30 days)
IWILFIN - eflornithine hcl tab 192 mg	5	PA, QL (240 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)*†	5	PA, QL (60 tablets/30 days)
JAKAFI XR - ruxolitinib phosphate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent), 33 mg (base equivalent), 44 mg (base equivalent), 55 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 50 mg†	5	PA, QL (30 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 100 mg†	5	PA, QL (60 tablets/30 days)
KISQALI - ribociclib succinate tab pack 200 mg daily dose	5	PA, QL (21 tablets/28 days)
KISQALI - ribociclib succinate tab pack 400 mg daily dose (200 mg tab)	5	PA, QL (42 tablets/28 days)
KISQALI - ribociclib succinate tab pack 600 mg daily dose (200 mg tab)	5	PA, QL (63 tablets/28 days)
KOMZIFTI - ziftomenib cap 200 mg†	5	PA, QL (90 capsules/30 days)
KOSELUGO - selumetinib sulfate cap sprinkle 5 mg	5	PA, QL (600 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
KOSELUGO - selumetinib sulfate cap sprinkle 7.5 mg	5	PA, QL (360 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 10 mg	5	PA, QL (240 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 25 mg	5	PA, QL (120 capsules/30 days)
KRAZATI - adagrasib tab 200 mg*†	5	PA, QL (180 tablets/30 days)
lapatinib ditosylate tab 250 mg (base equiv)	5	PA, QL (180 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 80 mg†	5	PA, QL (60 tablets/30 days)
LAZCLUZE - lazertinib mesylate tab 240 mg†	5	PA, QL (30 tablets/30 days)
LEDERLE LEUCOVORIN - leucovorin calcium tab 5 mg	2	
lenalidomide caps 2.5 mg	5	PA, QL (30 capsules/30 days)
lenalidomide cap 5 mg, 10 mg	5	PA, QL (30 capsules/30 days)
lenalidomide cap 15 mg, 20 mg, 25 mg	5	PA, QL (21 capsules/28 days)
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)*	5	PA, QL (30 capsules/30 days)
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)*	5	PA, QL (60 capsules/30 days)
LENVIMA 18 MG DAILY DOSE - lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)*	5	PA, QL (60 capsules/30 days)
LENVIMA 24 MG DAILY DOSE - lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)*	5	PA, QL (90 capsules/30 days)
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)*	5	PA, QL (30 capsules/30 days)
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)*	5	PA, QL (60 capsules/30 days)
letrozole tab 2.5 mg	1	
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg	2	
LEUKERAN - chlorambucil tab 2 mg	5	
LIFYORLI - relacorilant cap pak 1 x 25 mg & 1 x 100 mg (125 mg dose)	5	PA, QL (18 capsules/28 days)
LIFYORLI - relacorilant cap pak 2 x 25 mg & 1 x 100 mg (150 mg dose)	5	PA, QL (27 capsules/28 days)
lomustine cap 10 mg, 40 mg	2	
lomustine cap 100 mg	5	
LONSURF - trifluridine-tipiracil tab 15-6.14 mg	5	PA, QL (100 tablets/28 days)
LONSURF - trifluridine-tipiracil tab 20-8.19 mg	5	PA, QL (80 tablets/28 days)
LORBRENA - lorlatinib tab 25 mg†	5	PA, QL (90 tablets/30 days)
LORBRENA - lorlatinib tab 100 mg†	5	PA, QL (30 tablets/30 days)
LUMAKRAS - sotorasib tab 120 mg*†	5	PA, QL (240 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
LUMAKRAS - sotorasib tab 240 mg*†	5	PA, QL (120 tablets/30 days)
LUMAKRAS - sotorasib tab 320 mg*†	5	PA, QL (90 tablets/30 days)
LYNPARZA - olaparib tab 100 mg, 150 mg*†	5	PA, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	5	
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose)*	5	PA, QL (84 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (16 mg daily dose)*	5	PA, QL (112 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (20 mg daily dose)*	5	PA, QL (140 tablets/28 days)
MATULANE - procarbazine hcl cap 50 mg*	5	PA
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	5	PA, QL (13 bottles/28 days)
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)*	5	PA, QL (90 tablets/30 days)
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
MEKTOVI - binimetinib tab 15 mg*	5	PA, QL (180 tablets/30 days)
mercaptopurine susp 2000 mg/100ml (20 mg/ml)	5	
mercaptopurine tab 50 mg	2	
mesna tab 400 mg	5	
MESNEX - mesna tab 400 mg	5	
MODEYSO - dordaviprone hcl cap 125 mg	5	PA, QL (20 capsules/28 days)
NERLYNX - neratinib maleate tab 40 mg (base equivalent)*†	5	PA, QL (180 tablets/30 days)
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
nilotinib hcl cap 50 mg (base equivalent)†	5	PA, QL (120 capsules/30 days)
nilotinib hcl cap 150 mg (base equivalent), 200 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
nilutamide tab 150 mg	5	
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	5	PA, QL (3 capsules/28 days)
NUBEQA - darolutamide tab 300 mg†	5	PA, QL (120 tablets/30 days)
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
OGSIVEO - nirogacestat hydrobromide tab 100 mg, 150 mg†	5	PA, QL (56 tablets/28 days)
OJEMDA - tovorafenib for oral susp 25 mg/ml	5	PA, QL (8 bottles/28 days)
OJEMDA - tovorafenib tab 100 mg	5	PA, QL (24 tablets/28 days)
OJJAARA - momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	5	PA, QL (30 tablets/30 days)
ONUREG - azacitidine tab 200 mg, 300 mg	5	PA, QL (14 tablets/28 days)
ORGOVYX - relugolix tab 120 mg*	5	PA, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 86 mg	5	PA, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 345 mg	5	PA, QL (30 tablets/30 days)
PANRETIN - alitretinoin gel 0.1%	5	PA

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Drug Name	Drug Tier	Requirements/Limits
pazopanib hcl tab 200 mg (base equiv)†	5	PA, QL (120 tablets/30 days)
PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	5	PA, QL (14 tablets/21 days)
PHYRAGO - dasatinib tab 20 mg†	5	PA, QL (90 tablets/30 days)
PHYRAGO - dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg†	5	PA, QL (30 tablets/30 days)
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	5	PA, QL (30 tablets/30 days)
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	5	PA, QL (60 tablets/30 days)
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	5	PA, QL (60 tablets/30 days)
pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	5	PA, QL (21 capsules/28 days)
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg*	5	PA, QL (21 capsules/28 days)
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)*	5	
QINLOCK - ripretinib tab 50 mg	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 40 mg†	5	PA, QL (90 tablets/30 days)
RETEVMO - selpercatinib tab 80 mg, 120 mg, 160 mg†	5	PA, QL (60 tablets/30 days)
REVLIMID - lenalidomide caps 2.5 mg*	5	PA, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 5 mg, 10 mg*	5	PA, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 15 mg, 20 mg, 25 mg*	5	PA, QL (21 capsules/28 days)
REVUFORJ - revumenib citrate tab 25 mg	5	PA, QL (240 tablets/30 days)
REVUFORJ - revumenib citrate tab 110 mg	5	PA, QL (120 tablets/30 days)
REVUFORJ - revumenib citrate tab 160 mg	5	PA, QL (60 tablets/30 days)
REZLIDHIA - olutasidenib cap 150 mg*†	5	PA, QL (60 capsules/30 days)
ROMVIMZA - vimseltinib cap 14 mg, 20 mg, 30 mg	5	PA, QL (8 capsules/28 days)
ROZLYTREK - entrectinib cap 100 mg†	5	PA, QL (150 capsules/30 days)
ROZLYTREK - entrectinib cap 200 mg†	5	PA, QL (90 capsules/30 days)
ROZLYTREK - entrectinib pellet pack 50 mg	5	PA, QL (336 packets/28 days)
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)*†	5	PA, QL (120 tablets/30 days)
RYDAPT - midostaurin cap 25 mg	5	PA, QL (240 capsules/30 days)
SCEMBLIX - asciminib hcl tab 20 mg	5	PA, QL (60 tablets/30 days)
SCEMBLIX - asciminib hcl tab 40 mg	5	PA, QL (240 tablets/30 days)
SCEMBLIX - asciminib hcl tab 100 mg	5	PA, QL (120 tablets/30 days)
SIKLOS - hydroxyurea tab 100 mg	4	
SIKLOS - hydroxyurea tab 1000 mg	5	
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	4	
sorafenib tosylate tab 200 mg (base equivalent)†	5	PA, QL (120 tablets/30 days)
SPRYCEL - dasatinib tab 20 mg†	5	PA, QL (90 tablets/30 days)
SPRYCEL - dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg†	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
STIVARGA - regorafenib tab 40 mg*	5	PA, QL (84 tablets/28 days)
sunitinib malate cap 12.5 mg (base equivalent)†	5	PA, QL (90 capsules/30 days)
sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
SUTENT - sunitinib malate cap 12.5 mg (base equivalent)†	5	PA, QL (90 capsules/30 days)
SUTENT - sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
TABLOID - thioguanine tab 40 mg	5	
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	5	PA, QL (120 tablets/30 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)*	5	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	5	PA, QL (4 bottles/28 days)
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)*†	5	PA, QL (30 tablets/30 days)
TALZENNA - talazoparib tosylate cap 0.1 mg (base equivalent), 0.35 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)*†	5	PA, QL (30 capsules/30 days)
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	2	
TARGRETIN - bexarotene cap 75 mg†	5	PA
TARGRETIN - bexarotene gel 1%	5	PA
TASIGNA - nilotinib hcl cap 50 mg (base equivalent)†	5	PA, QL (120 capsules/30 days)
TASIGNA - nilotinib hcl cap 150 mg (base equivalent), 200 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
TEPMETKO - tepotinib hcl tab 225 mg*†	5	PA, QL (60 tablets/30 days)
THALOMID - thalidomide cap 50 mg	5	PA, QL (90 capsules/30 days)
THALOMID - thalidomide cap 100 mg	5	PA, QL (120 capsules/30 days)
TIBSOVO - ivosidenib tab 250 mg*†	5	PA, QL (60 tablets/30 days)
toremifene citrate tab 60 mg (base equivalent)	2	
torpenz - everolimus tab 2.5 mg, 7.5 mg, 10 mg†	5	PA, QL (30 tablets/30 days)
torpenz - everolimus tab 5 mg†	5	PA, QL (60 tablets/30 days)
tretinoin cap 10 mg	5	PA
TRUQAP - capivasertib tab therapy pack 160 mg, 200 mg	5	PA, QL (4 boxes/28 days)
TRUQAP - capivasertib tab 200 mg	5	PA, QL (64 tablets/28 days)
TUKYSA - tucatinib tab 50 mg	5	PA, QL (300 tablets/30 days)
TUKYSA - tucatinib tab 150 mg	5	PA, QL (120 tablets/30 days)
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	5	PA, QL (120 capsules/30 days)
TYKERB - lapatinib ditosylate tab 250 mg (base equiv)*	5	PA, QL (180 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)*	5	PA, QL (1 tube/30 days)
VANFLYTA - quizartinib dihydrochloride tab 17.7 mg, 26.5 mg*	5	PA, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 10 mg*	3	PA, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 50 mg*	5	PA, QL (30 tablets/30 days)
VENCLEXTA - venetoclax tab 100 mg*	5	PA, QL (180 tablets/30 days)
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg*	5	PA, QL (1 pack (42 tablets)/28 days)
VEPPANU - vepdegestrant tab 100 mg, 200 mg	5	PA, QL (30 tablets/30 days)
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg*	5	PA, QL (60 tablets/30 days)
VIJOICE - alpelisib (pros) oral granules packet 50 mg	5	PA, QL (30 packets/30 days)
VIJOICE - alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	5	PA, QL (1 pack/28 days)
VIJOICE - alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	5	PA, QL (30 tablets/30 days)
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)*†	5	PA, QL (180 capsules/30 days)
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)*†	5	PA, QL (60 capsules/30 days)
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)*	5	PA, QL (300 mls/30 days)
VONJO - pacritinib citrate cap 100 mg*†	5	PA, QL (120 capsules/30 days)
VORANIGO - vorasidenib tab 10 mg	5	PA, QL (60 tablets/30 days)
VORANIGO - vorasidenib tab 40 mg	5	PA, QL (30 tablets/30 days)
VOTRIENT - pazopanib hcl tab 200 mg (base equiv)*†	5	PA, QL (120 tablets/30 days)
XALKORI - crizotinib cap sprinkle 20 mg, 50 mg*†	5	PA, QL (120 capsules/30 days)
XALKORI - crizotinib cap sprinkle 150 mg*†	5	PA, QL (180 capsules/30 days)
XALKORI - crizotinib cap 200 mg, 250 mg*†	5	PA, QL (120 capsules/30 days)
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)†	5	PA, QL (90 tablets/30 days)
XPOVIO - selinexor tab therapy pack 10 mg (40 mg once weekly), 80 mg (80 mg once weekly)	5	PA, QL (1 box/28 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)*	5	PA, QL (1 box/28 days)
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)*	5	PA, QL (1 box/28 days)
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)*	5	PA, QL (1 box/28 days)
XROMI - hydroxyurea oral soln 100 mg/ml	4	
XTANDI - enzalutamide cap 40 mg*†	5	PA, QL (120 capsules/30 days)
XTANDI - enzalutamide tab 40 mg*†	5	PA, QL (120 tablets/30 days)
XTANDI - enzalutamide tab 80 mg*†	5	PA, QL (60 tablets/30 days)
YONSA - abiraterone acetate micronized tab 125 mg*†	5	PA, QL (120 tablets/30 days)
yulithira - everolimus tab 2.5 mg, 7.5 mg, 10 mg†	2	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
yulithira - everolimus tab 5 mg†	2	PA, QL (60 tablets/30 days)
ZEJULA - niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
ZELBORAF - vemurafenib tab 240 mg*	5	PA, QL (240 tablets/30 days)
ZOLINZA - vorinostat cap 100 mg†	5	PA, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg, 150 mg*	5	PA, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg*†	5	PA, QL (90 tablets/30 days)
ZYTIGA - abiraterone acetate tab 250 mg*	5	PA, QL (120 tablets/30 days)
ZYTIGA - abiraterone acetate tab 500 mg*†	5	PA, QL (60 tablets/30 days)
Antiparasitics		
albendazole tab 200 mg	2	
atovaquone susp 750 mg/5ml	2	PA, QL (600 mls/30 days)
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg	2	
BENZNIDAZOLE - benznidazole tab 12.5 mg, 100 mg	4	
BILTRICIDE - praziquantel tab 600 mg	4	
chloroquine phosphate tab 250 mg	2	
chloroquine phosphate tab 500 mg	2	
COARTEM - artemether-lumefantrine tab 20-120 mg	4	
DARAPRIM - pyrimethamine tab 25 mg	5	PA
EMVERM - mebendazole chew tab 100 mg	4	
hydroxychloroquine sulfate tab 100 mg, 200 mg, 300 mg, 400 mg	2	
IVERMECTIN - ivermectin tab 6 mg	4	PA
ivermectin tab 3 mg	2	PA
KRINTAFEL - tafenoquine succinate tab 150 mg (base equivalent)	4	
LAMPIT - nifurtimox tab 30 mg, 120 mg	4	
MALARONE - atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg	4	
mefloquine hcl tab 250 mg	2	
MEPRON - atovaquone susp 750 mg/5ml	5	PA, QL (600 mls/30 days)
NEBUPENT - pentamidine isethionate for nebulization soln 300 mg	4	BD
nitazoxanide tab 500 mg	4	QL (20 tablets/30 days)
PENTAM 300 - pentamidine isethionate for inj soln 300 mg	4	
pentamidine isethionate for inj soln 300 mg	2	
pentamidine isethionate for nebulization soln 300 mg	2	BD
PLAQUENIL - hydroxychloroquine sulfate tab 200 mg	4	
praziquantel tab 600 mg	2	
primaquine phosphate tab 26.3 mg (15 mg base)	2	
pyrimethamine tab 25 mg	5	PA
quinine sulfate cap 324 mg	2	PA

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Drug Name	Drug Tier	Requirements/Limits
SOVUNA - hydroxychloroquine sulfate tab 200 mg, 300 mg	4	
STROMECTOL - ivermectin tab 3 mg	4	PA
Antiparkinson Agents		
amantadine hcl cap 100 mg	2	
amantadine hcl soln 50 mg/5ml	2	
amantadine hcl tab 100 mg	2	
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml*	5	PA, QL (60 mls/30 days)
apomorphine hcl soln cartridge 30 mg/3ml	5	PA, QL (60 mls/30 days)
AZILECT - rasagiline mesylate tab 0.5 mg (base equiv)	4	
AZILECT - rasagiline mesylate tab 1 mg (base equiv)	5	
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg#	2	
bromocriptine mesylate cap 5 mg (base equivalent)	2	
bromocriptine mesylate tab 2.5 mg (base equivalent)	2	
carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	2	
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	2	
carbidopa & levodopa tab 10-100 mg, 25-100 mg, 25-250 mg	2	
carbidopa tab 25 mg	2	
carbidopa-levodopa-entacapone tabs 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	2	
CARBIDOPA/LEVODOPA ER - carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	4	
CREXONT - carbidopa & levodopa cap er 35-140 mg, 52.5-210 mg, 70-280 mg, 87.5-350 mg	4	
DHIVY - carbidopa & levodopa tab 25-100 mg	4	
DUOPA - carbidopa-levodopa enteral susp 4.63-20 mg/ml	5	BD
entacapone tab 200 mg	2	
GOCOVRI - amantadine hcl cap er 24hr 68.5 mg (base equivalent)†	5	PA, QL (30 capsules/30 days)
GOCOVRI - amantadine hcl cap er 24hr 137 mg (base equivalent)†	5	PA, QL (60 capsules/30 days)
INBRIJA - levodopa inhal powder cap 42 mg	5	PA, QL (300 capsules/30 days)
LODOSYN - carbidopa tab 25 mg	5	
NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	4	
NOURIANZ - istradefylline tab 20 mg, 40 mg	5	PA, QL (30 tablets/30 days)
ONAPGO - apomorphine hcl soln cartridge 98 mg/20ml	5	PA, QL (600 mls/30 days)
ONGENTYS - opicapone cap 25 mg, 50 mg	4	
PARLODEL - bromocriptine mesylate cap 5 mg (base equivalent)	4	
PARLODEL - bromocriptine mesylate tab 2.5 mg (base equivalent)	4	

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Drug Name	Drug Tier	Requirements/Limits
pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	2	
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1	
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)	2	
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)	2	
ropinirole hydrochloride tab 0.25 mg, 1 mg, 3 mg, 5 mg	2	
ropinirole hydrochloride tab 0.5 mg, 2 mg, 4 mg	1	
RYTARY - carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	4	
selegiline hcl cap 5 mg	2	
selegiline hcl tab 5 mg	2	
SINEMET - carbidopa & levodopa tab 10-100 mg, 25-100 mg	4	
TASMAR - tolcapone tab 100 mg	5	
tolcapone tab 100 mg	5	
trihexyphenidyl hcl oral soln 0.4 mg/ml#	2	PA (>=65 yr)
trihexyphenidyl hcl tab 2 mg, 5 mg#	2	PA (>=65 yr)
ZELAPAR - selegiline hcl orally disintegrating tab 1.25 mg	5	
Antipsychotics		
ABILIFY - aripiprazole tab 2 mg, 5 mg	4	PA (>=65 yr), QL (45 tablets/30 days)
ABILIFY - aripiprazole tab 10 mg, 15 mg, 20 mg, 30 mg	4	PA (>=65 yr), QL (30 tablets/30 days)
ABILIFY ASIMTUFII - aripiprazole im er susp prefilled syringe 720 mg/2.4ml, 960 mg/3.2ml	5	QL (1 syringe/56 days)
ABILIFY MAINTENA - aripiprazole im for er susp prefilled syringe 300 mg, 400 mg	5	QL (1 syringe/28 days)
ABILIFY MAINTENA - aripiprazole im for extended release susp 300 mg, 400 mg	5	QL (1 vial/28 days)
aripiprazole oral solution 1 mg/ml	2	PA (>=65 yr), QL (750 mls/30 days)
aripiprazole orally disintegrating tab 10 mg, 15 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
aripiprazole tab 2 mg, 5 mg	2	PA (>=65 yr), QL (45 tablets/30 days)
aripiprazole tab 10 mg, 15 mg, 20 mg, 30 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 441 mg/1.6ml, 662 mg/2.4ml, 882 mg/3.2ml	5	QL (1 syringe/28 days)
ARISTADA - aripiprazole lauroxil im er susp prefilled syr 1064 mg/3.9ml	5	QL (1 syringe/56 days)

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Drug Name	Drug Tier	Requirements/Limits
ARISTADA INITIO - aripiprazole lauroxil im er susp prefilled syr 675 mg/2.4ml	5	QL (1 syringe/42 days)
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	2	PA (>=65 yr), QL (60 tablets/30 days)
BYSANTI - milsaperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
BYSANTI TITRATION PACK A - milsaperidone tab therapy pack 1 mg & 2 mg & 4 mg & 6 mg	4	PA (>=65 yr), QL (1 pack/28 days)
BYSANTI TITRATION PACK B - milsaperidone tab therapy pack 1 mg & 2 mg & 6 mg & 8 mg	4	PA (>=65 yr), QL (1 pack/28 days)
BYSANTI TITRATION PACK C - milsaperidone tab therapy pack 1 mg & 2 mg & 6 mg	4	PA (>=65 yr), QL (1 pack/28 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	5	QL (30 capsules/30 days)
clozapine orally disintegrating tab 12.5 mg	2	PA (>=65 yr), QL (90 tablets/30 days)
clozapine orally disintegrating tab 25 mg, 100 mg	2	PA (>=65 yr), QL (270 tablets/30 days)
clozapine orally disintegrating tab 150 mg	2	PA (>=65 yr), QL (180 tablets/30 days)
clozapine orally disintegrating tab 200 mg	2	PA (>=65 yr), QL (120 tablets/30 days)
clozapine tab 25 mg, 50 mg	2	PA (>=65 yr), QL (90 tablets/30 days)
clozapine tab 100 mg	2	PA (>=65 yr), QL (270 tablets/30 days)
clozapine tab 200 mg	2	PA (>=65 yr), QL (120 tablets/30 days)
CLOZARIL - clozapine tab 25 mg	4	PA (>=65 yr), QL (90 tablets/30 days)
CLOZARIL - clozapine tab 100 mg	5	PA (>=65 yr), QL (270 tablets/30 days)
COBENFY - xanomeline tartrate-trospium chloride cap 50-20 mg, 100-20 mg, 125-30 mg	5	PA, QL (60 capsules/30 days)
COBENFY STARTER PACK - xanomeline-trospium chloride cap pack 50-20 mg & 100-20 mg	5	PA, QL (1 pack/28 days)
ERZOFRI - paliperidone palmitate er susp pref syr 39 mg/0.25ml	4	QL (1 kit/28 days)
ERZOFRI - paliperidone palmitate er susp pref syr 78 mg/0.5ml, 117 mg/0.75ml, 156 mg/ml, 234 mg/1.5ml	5	QL (1 kit/28 days)
ERZOFRI - paliperidone palmitate er susp pref syr 351 mg/2.25ml	5	QL (1 kit/180 days)
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
FANAPT TITRATION PACK A - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	4	PA (>=65 yr), QL (7 packs (56 tablets)/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
FANAPT TITRATION PACK B - iloperidone tab 1 mg & 2 mg & 6 mg & 8 mg titration pak	4	PA (>=65 yr), QL (1 pack/28 days)
FANAPT TITRATION PACK C - iloperidone tab 1 mg & 2 mg & 6 mg titration pak	4	PA (>=65 yr), QL (1 pack/28 days)
fluphenazine decanoate inj 25 mg/ml	2	PA (>=65 yr)
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	3	PA (>=65 yr)
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	2	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl elixir 2.5 mg/5ml	3	PA (>=65 yr)
FLUPHENAZINE HYDROCHLORIDE - fluphenazine hcl inj 2.5 mg/ml	4	PA (>=65 yr)
GEODON - ziprasidone hcl cap 20 mg	4	PA (>=65 yr), QL (90 capsules/30 days)
GEODON - ziprasidone hcl cap 40 mg	5	PA (>=65 yr), QL (90 capsules/30 days)
GEODON - ziprasidone hcl cap 60 mg, 80 mg	5	PA (>=65 yr), QL (60 capsules/30 days)
GEODON - ziprasidone mesylate for inj 20 mg (base equivalent)	4	PA (>=65 yr), QL (60 vials/30 days)
haloperidol decanoate im soln 50 mg/ml, 100 mg/ml	2	PA (>=65 yr)
haloperidol lactate inj 5 mg/ml	2	PA (>=65 yr)
haloperidol lactate oral conc 2 mg/ml	2	PA (>=65 yr)
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	2	PA (>=65 yr)
INVEGA - paliperidone tab er 24hr 3 mg, 9 mg	4	PA (>=65 yr), QL (30 tablets/30 days)
INVEGA - paliperidone tab er 24hr 6 mg	4	PA (>=65 yr), QL (60 tablets/30 days)
INVEGA HAFYERA - paliperidone palmitate er susp pref syr 1,092 mg/3.5ml, 1,560 mg/5ml	5	QL (1 kit/180 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 39 mg/0.25ml	4	QL (1 kit/28 days)
INVEGA SUSTENNA - paliperidone palmitate er susp pref syr 78 mg/0.5ml, 117 mg/0.75ml, 156 mg/ml, 234 mg/1.5ml	5	QL (1 kit/28 days)
INVEGA TRINZA - paliperidone palmitate er susp pref syr 273 mg/0.88ml, 410 mg/1.32ml, 546 mg/1.75ml, 819 mg/2.63ml	5	QL (1 kit/84 days)
LATUDA - lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
LATUDA - lurasidone hcl tab 80 mg	5	PA (>=65 yr), QL (60 tablets/30 days)
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	2	PA (>=65 yr)
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg	2	PA (>=65 yr), QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
lurasidone hcl tab 80 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
LYBALVI - olanzapine-samidorphan l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	4	PA (>=65 yr)
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)*	5	PA, QL (30 capsules/30 days)
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)*	5	PA, QL (30 tablets/30 days)
olanzapine for im inj 10 mg	2	PA (>=65 yr), QL (90 vials/30 days)
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
olanzapine tab 2.5 mg, 5 mg	1	PA (>=65 yr), QL (45 tablets/30 days)
olanzapine tab 7.5 mg, 10 mg	2	PA (>=65 yr), QL (45 tablets/30 days)
olanzapine tab 15 mg, 20 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
OPIPZA - aripiprazole oral film 2 mg	5	PA (>=65 yr), QL (30 films/30 days)
OPIPZA - aripiprazole oral film 5 mg, 10 mg	5	PA (>=65 yr), QL (90 films/30 days)
paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
paliperidone tab er 24hr 6 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
PERSERIS - risperidone subcutaneous for er susp prefilled syr 90 mg, 120 mg	5	QL (1 syringe/28 days)
pimozide tab 1 mg, 2 mg	2	PA (>=65 yr)
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg	3	PA (>=65 yr), QL (150 tablets/30 days)
quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
quetiapine fumarate tab er 24hr 150 mg, 200 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
quetiapine fumarate tab 25 mg	1	PA (>=65 yr), QL (120 tablets/30 days)
quetiapine fumarate tab 50 mg, 100 mg, 200 mg	2	PA (>=65 yr), QL (120 tablets/30 days)
quetiapine fumarate tab 300 mg, 400 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	5	PA (>=65 yr), QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
RISPERDAL - risperidone soln 1 mg/ml	4	PA (>=65 yr), QL (480 mls/30 days)
RISPERDAL - risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg	4	PA (>=65 yr), QL (60 tablets/30 days)
RISPERDAL - risperidone tab 4 mg	4	PA (>=65 yr), QL (120 tablets/30 days)
RISPERDAL CONSTA - risperidone microspheres for im extended rel susp 12.5 mg, 25 mg	4	QL (2 vials/28 days)
RISPERDAL CONSTA - risperidone microspheres for im extended rel susp 37.5 mg, 50 mg	5	QL (2 vials/28 days)
risperidone microspheres for im extended rel susp 12.5 mg, 25 mg, 37.5 mg	2	QL (2 vials/28 days)
risperidone microspheres for im extended rel susp 50 mg	5	QL (2 vials/28 days)
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	4	PA (>=65 yr), QL (60 tablets/30 days)
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg	2	PA (>=65 yr), QL (60 tablets/30 days)
risperidone orally disintegrating tab 4 mg	2	PA (>=65 yr), QL (120 tablets/30 days)
risperidone soln 1 mg/ml	2	PA (>=65 yr), QL (480 mls/30 days)
risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg	1	QL (60 tablets/30 days)
risperidone tab 4 mg	1	QL (120 tablets/30 days)
SAPHRIS - asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	4	PA (>=65 yr), QL (60 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	5	PA (>=65 yr), QL (30 patches/30 days)
SEROQUEL - quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg	4	PA (>=65 yr), QL (120 tablets/30 days)
SEROQUEL - quetiapine fumarate tab 300 mg, 400 mg	4	PA (>=65 yr), QL (60 tablets/30 days)
SEROQUEL XR - quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg	4	PA (>=65 yr), QL (60 tablets/30 days)
SEROQUEL XR - quetiapine fumarate tab er 24hr 150 mg, 200 mg	4	PA (>=65 yr), QL (30 tablets/30 days)
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	2	PA (>=65 yr)
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	2	PA (>=65 yr)
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	2	PA (>=65 yr)
UZEDY - risperidone subcutaneous er susp pref syr 50 mg/0.14ml, 75 mg/0.21ml, 100 mg/0.28ml, 125 mg/0.35ml	5	QL (1 syringe/28 days)
UZEDY - risperidone subcutaneous er susp pref syr 150 mg/0.42ml, 200 mg/0.56ml, 250 mg/0.7ml	5	QL (1 syringe/56 days)

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

Drug Name	Drug Tier	Requirements/Limits
VERSACLOZ - clozapine susp 50 mg/ml	5	PA (>=65 yr), QL (540 mls/30 days)
VRAYLAR - cariprazine hcl cap 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	4	QL (30 capsules/30 days)
ziprasidone hcl cap 20 mg, 40 mg	2	QL (90 capsules/30 days)
ziprasidone hcl cap 60 mg, 80 mg	2	QL (60 capsules/30 days)
ziprasidone mesylate for inj 20 mg (base equivalent)	2	PA (>=65 yr), QL (60 vials/30 days)
ZYPREXA - olanzapine for im inj 10 mg	4	PA (>=65 yr), QL (90 vials/30 days)
ZYPREXA - olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg	4	PA (>=65 yr), QL (45 tablets/30 days)
ZYPREXA - olanzapine tab 15 mg, 20 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
ZYPREXA ZYDIS - olanzapine orally disintegrating tab 5 mg, 10 mg	4	PA (>=65 yr), QL (30 tablets/30 days)
ZYPREXA ZYDIS - olanzapine orally disintegrating tab 15 mg, 20 mg	5	PA (>=65 yr), QL (30 tablets/30 days)
Antispasticity Agents		
baclofen oral soln 10 mg/5ml	2	
baclofen oral soln 5 mg/5ml	2	
baclofen susp 25 mg/5ml	5	
baclofen tab 5 mg, 10 mg, 15 mg, 20 mg	2	
DANTRIUM - dantrolene sodium cap 25 mg	4	
dantrolene sodium cap 25 mg, 50 mg, 100 mg	2	
FLEQSUVY - baclofen susp 25 mg/5ml	5	
ONTRALFY - tizanidine hcl oral soln 2 mg/5ml (base equivalent)	4	
OZOBAX DS - baclofen oral soln 10 mg/5ml	5	
tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)	2	
tizanidine hcl tab 2 mg (base equivalent), 4 mg (base equivalent)	1	
TIZANIDINE HYDROCHLORIDE - tizanidine hcl cap 8 mg (base equivalent)	5	
ZANAFLEX - tizanidine hcl cap 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent)	4	
ZANAFLEX - tizanidine hcl cap 8 mg (base equivalent)	5	
ZANAFLEX - tizanidine hcl tab 4 mg (base equivalent)	4	
Antivirals		
abacavir sulfate soln 20 mg/ml (base equiv)	2	QL (960 mls/30 days)
abacavir sulfate tab 300 mg (base equiv)	2	QL (60 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
abacavir sulfate-lamivudine tab 600-300 mg	2	QL (30 tablets/30 days)
acyclovir cap 200 mg	1	
acyclovir cream 5%	2	PA, QL (30 grams/30 days)
acyclovir oint 5%	2	PA, QL (30 grams/30 days)
acyclovir sodium iv soln 50 mg/ml	2	BD
acyclovir susp 200 mg/5ml	2	
acyclovir tab 400 mg, 800 mg	1	
adefovir dipivoxil tab 10 mg	2	
APTIVUS - tipranavir cap 250 mg	5	QL (120 capsules/30 days)
atazanavir sulfate cap 150 mg (base equiv), 300 mg (base equiv)	2	QL (30 capsules/30 days)
atazanavir sulfate cap 200 mg (base equiv)	2	QL (60 capsules/30 days)
BARACLUDE - entecavir oral soln 0.05 mg/ml	4	
BARACLUDE - entecavir tab 0.5 mg, 1 mg	5	
BIKTARVY - bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	5	QL (30 tablets/30 days)
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	5	QL (30 tablets/30 days)
COMPLERA - emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	5	QL (30 tablets/30 days)
darunavir tab 600 mg	2	QL (60 tablets/30 days)
darunavir tab 800 mg	2	QL (30 tablets/30 days)
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	5	QL (30 tablets/30 days)
DENAVIR - penciclovir cream 1%	4	
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	5	QL (30 tablets/30 days)
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	5	QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	5	QL (30 tablets/30 days)
EDURANT PED - rilpivirine hcl tab for oral susp 2.5 mg (base equivalent)	5	QL (180 tablets/30 days)
efavirenz tab 600 mg	2	QL (30 tablets/30 days)
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	2	QL (30 tablets/30 days)
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	5	QL (30 tablets/30 days)
EFAVIRENZ/LAMIVUDINE/TENOFOVIR DISOPROXIL FUMARATE - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	5	QL (30 tablets/30 days)
emtricitabine caps 200 mg	2	QL (30 capsules/30 days)
emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	5	QL (30 tablets/30 days)
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 200-300 mg	2	QL (30 tablets/30 days)
emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg	5	QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg	4	QL (30 tablets/30 days)
EMTRIVA - emtricitabine caps 200 mg	4	QL (30 capsules/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml	4	QL (850 mls/30 days)
entecavir tab 0.5 mg, 1 mg	2	
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	5	PA
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg	5	PA
EPIVIR - lamivudine oral soln 10 mg/ml	4	QL (960 mls/30 days)
EPIVIR - lamivudine tab 150 mg	4	QL (60 tablets/30 days)
EPIVIR - lamivudine tab 300 mg	4	QL (30 tablets/30 days)
etravirine tab 100 mg	5	QL (60 tablets/30 days)
etravirine tab 200 mg	2	QL (60 tablets/30 days)
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	5	QL (30 tablets/30 days)
famciclovir tab 125 mg, 250 mg, 500 mg	2	
fosamprenavir calcium tab 700 mg (base equiv)	5	QL (120 tablets/30 days)
GENVOYA - elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	5	QL (30 tablets/30 days)
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	5	PA
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	5	PA
HEPCLUDEX - bulevirtide acetate-gmod for subcutaneous inj 8.5 mg	5	PA, QL (30 vials/30 days)
IDVYNSO - doravirine-islatravir tab 100-0.25 mg	5	QL (30 tablets/30 days)
INTELENCE - etravirine tab 25 mg	4	QL (120 tablets/30 days)
INTELENCE - etravirine tab 100 mg, 200 mg	5	QL (60 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	3	QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	5	QL (60 packets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	5	QL (60 tablets/30 days)
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	5	QL (60 tablets/30 days)
JULUCA - dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	5	QL (30 tablets/30 days)
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	5	QL (480 mls/30 days)
KALETRA - lopinavir-ritonavir tab 100-25 mg	4	QL (300 tablets/30 days)
KALETRA - lopinavir-ritonavir tab 200-50 mg	5	QL (120 tablets/30 days)
lamivudine oral soln 10 mg/ml	2	QL (960 mls/30 days)
lamivudine tab 100 mg (hbv)	2	
lamivudine tab 150 mg	2	QL (60 tablets/30 days)
lamivudine tab 300 mg	2	QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
lamivudine-zidovudine tab 150-300 mg	2	QL (60 tablets/30 days)
LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	5	PA
LIVTENCITY - maribavir tab 200 mg*	5	QL (120 tablets/30 days)
lopinavir-ritonavir tab 100-25 mg	2	QL (300 tablets/30 days)
lopinavir-ritonavir tab 200-50 mg	2	QL (120 tablets/30 days)
maraviroc tab 150 mg	5	QL (60 tablets/30 days)
maraviroc tab 300 mg	5	QL (120 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	5	PA
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	5	PA
nevirapine susp 50 mg/5ml	2	QL (1200 mls/30 days)
nevirapine tab er 24hr 400 mg	2	QL (30 tablets/30 days)
nevirapine tab 200 mg	2	QL (60 tablets/30 days)
NORVIR - ritonavir powder packet 100 mg	4	QL (360 packets/30 days)
NORVIR - ritonavir tab 100 mg	4	QL (360 tablets/30 days)
ODEFSEY - emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	5	QL (30 tablets/30 days)
oseltamivir phosphate cap 30 mg (base equiv)	2	QL (168 capsules/365 days)
oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv)	2	QL (84 capsules/365 days)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	2	QL (1080 mls/365 days)
PAXLOVID - nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak	2	QL (11 tablets/30 days)
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	2	QL (20 tablets/30 days)
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	2	QL (30 tablets/30 days)
penciclovir cream 1%	2	
PIFELTRO - doravirine tab 100 mg	5	QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg, 480 mg	5	QL (30 tablets/30 days)
PREZCOBIX - darunavir-cobicistat tab 675-150 mg, 800-150 mg	5	QL (30 tablets/30 days)
PREZISTA - darunavir oral susp 100 mg/ml	5	QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg	4	QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	5	QL (180 tablets/30 days)
PREZISTA - darunavir tab 600 mg	5	QL (60 tablets/30 days)
PREZISTA - darunavir tab 800 mg	5	QL (30 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	4	QL (6 boxes/365 days)
RETROVIR - zidovudine cap 100 mg	4	QL (180 capsules/30 days)
RETROVIR - zidovudine syrup 10 mg/ml	4	QL (1920 mls/30 days)
REYATAZ - atazanavir sulfate cap 200 mg (base equiv)	5	QL (60 capsules/30 days)
REYATAZ - atazanavir sulfate cap 300 mg (base equiv)	5	QL (30 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	5	QL (240 packets/30 days)
ribavirin cap 200 mg	2	
ribavirin tab 200 mg	2	
rilpivirine hcl tab 25 mg (base equivalent)	5	QL (30 tablets/30 days)
ritonavir tab 100 mg	2	QL (360 tablets/30 days)
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	5	QL (60 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	5	QL (1840 mls/30 days)
SELZENTRY - maraviroc tab 150 mg	5	QL (60 tablets/30 days)
SELZENTRY - maraviroc tab 300 mg	5	QL (120 tablets/30 days)
SOFOSBUVIR/VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	5	PA
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	5	PA
SOVALDI - sofosbuvir tab 200 mg, 400 mg	5	PA
STRIBILD - elvitegrav-cobic-emtricitab-tenofovdf tab 150-150-200-300 mg	5	QL (30 tablets/30 days)
SUNLENCA - lenacapavir sodium tab therapy pack 4 x 300 mg	5	QL (4 tablets/28 days)
SUNLENCA - lenacapavir sodium tab therapy pack 5 x 300 mg	5	QL (5 tablets/28 days)
SUNLENCA - lenacapavir sodium tab 300 mg	5	QL (4 tablets/28 days)
SYMFI - efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	5	QL (30 tablets/30 days)
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	5	QL (30 tablets/30 days)
TAMIFLU - oseltamivir phosphate cap 75 mg (base equiv)	4	QL (84 capsules/365 days)
TAMIFLU - oseltamivir phosphate for susp 6 mg/ml (base equiv)	4	QL (1080 mls/365 days)
tenofovir disoproxil fumarate tab 300 mg	2	QL (30 tablets/30 days)
TIVICAY - dolutegravir sodium tab 50 mg (base equiv)	5	QL (60 tablets/30 days)
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	5	QL (360 tablets/30 days)
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg	5	QL (30 tablets/30 days)
TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	4	QL (180 tablets/30 days)
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	5	QL (30 tablets/30 days)
valacyclovir hcl tab 500 mg, 1 gm	2	
VALCYTE - valganciclovir hcl for soln 50 mg/ml (base equiv)	5	
valganciclovir hcl for soln 50 mg/ml (base equiv)	5	
valganciclovir hcl tab 450 mg (base equivalent)	2	
VALTREX - valacyclovir hcl tab 500 mg, 1 gm	4	
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	5	
VIRACEPT - nelfinavir mesylate tab 250 mg	5	QL (270 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
VIRACEPT - nelfinavir mesylate tab 625 mg	5	QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	5	QL (240 grams/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg, 300 mg	5	QL (30 tablets/30 days)
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	5	PA
XERESE - acyclovir-hydrocortisone cream 5-1%	5	
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose)	4	QL (4 tablets/365 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 80 mg (80 mg dose)	4	QL (2 tablets/365 days)
ZIAGEN - abacavir sulfate soln 20 mg/ml (base equiv)	4	QL (960 mls/30 days)
zidovudine cap 100 mg	2	QL (180 capsules/30 days)
zidovudine syrup 10 mg/ml	2	QL (1920 mls/30 days)
zidovudine tab 300 mg	2	QL (60 tablets/30 days)
ZOVIRAX - acyclovir cream 5%	4	PA, QL (30 grams/30 days)
ZOVIRAX - acyclovir oint 5%	4	PA, QL (30 grams/30 days)
Anxiolytics		
ALPRAZOLAM INTENSOL - alprazolam conc 1 mg/ml	4	QL (300 mls/30 days)
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg	2	QL (120 tablets/30 days)
alprazolam orally disintegrating tab 2 mg	2	QL (150 tablets/30 days)
alprazolam tab er 24hr 0.5 mg, 1 mg	1	QL (30 tablets/30 days)
alprazolam tab er 24hr 2 mg	1	QL (150 tablets/30 days)
alprazolam tab er 24hr 3 mg	1	QL (90 tablets/30 days)
alprazolam tab 0.25 mg, 0.5 mg, 1 mg	1	QL (120 tablets/30 days)
alprazolam tab 2 mg	1	QL (150 tablets/30 days)
alprazolam xr - alprazolam tab er 24hr 0.5 mg, 1 mg	1	QL (30 tablets/30 days)
alprazolam xr - alprazolam tab er 24hr 2 mg	1	QL (150 tablets/30 days)
alprazolam xr - alprazolam tab er 24hr 3 mg	1	QL (90 tablets/30 days)
ATIVAN - lorazepam tab 0.5 mg, 1 mg	5	PA (>=65 yr), QL (120 tablets/30 days)
ATIVAN - lorazepam tab 2 mg	5	PA (>=65 yr), QL (150 tablets/30 days)
BUCAPSOL - buspirone hcl cap 5 mg, 7.5 mg, 10 mg, 15 mg	5	
buspirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg	2	
buspirone hcl tab 7.5 mg	1	
BUSPIRONE HYDROCHLORIDE - buspirone hcl tab 2.5 mg, 12.5 mg	5	
chlordiazepoxide hcl cap 5 mg, 10 mg	1	PA (>=65 yr), QL (120 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
chlordiazepoxide hcl cap 25 mg	1	PA (>=65 yr), QL (360 capsules/30 days)
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	2	QL (90 tablets/30 days)
clonazepam orally disintegrating tab 2 mg	2	QL (300 tablets/30 days)
clonazepam tab 0.5 mg, 1 mg	1	QL (120 tablets/30 days)
clonazepam tab 2 mg	1	QL (300 tablets/30 days)
clorazepate dipotassium tab 3.75 mg	2	PA (>=65 yr), QL (120 tablets/30 days)
clorazepate dipotassium tab 7.5 mg	2	PA (>=65 yr), QL (360 tablets/30 days)
clorazepate dipotassium tab 15 mg	2	PA (>=65 yr), QL (180 tablets/30 days)
diazepam conc 5 mg/ml	2	PA (>=65 yr), QL (240 mls/30 days)
diazepam intensol - diazepam conc 5 mg/ml	2	PA (>=65 yr), QL (240 mls/30 days)
diazepam oral soln 1 mg/ml	2	PA (>=65 yr), QL (1200 mls/30 days)
diazepam tab 2 mg, 5 mg, 10 mg	1	PA (>=65 yr), QL (120 tablets/30 days)
hydroxyzine hcl syrup 10 mg/5ml#	2	PA (>=65 yr)
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg#	2	PA (>=65 yr)
hydroxyzine pamoate cap 100 mg#	2	PA (>=65 yr)
hydroxyzine pamoate cap 25 mg, 50 mg#	2	PA (>=65 yr)
KLONOPIN - clonazepam tab 0.5 mg, 1 mg	4	QL (120 tablets/30 days)
KLONOPIN - clonazepam tab 2 mg	4	QL (300 tablets/30 days)
lorazepam conc 2 mg/ml	2	PA (>=65 yr), QL (150 mls/30 days)
lorazepam intensol - lorazepam conc 2 mg/ml	2	PA (>=65 yr), QL (150 mls/30 days)
lorazepam tab 0.5 mg, 1 mg	1	PA (>=65 yr), QL (120 tablets/30 days)
lorazepam tab 2 mg	1	PA (>=65 yr), QL (150 tablets/30 days)
LOREEV XR - lorazepam cap er 24hr sprinkle 1 mg, 1.5 mg	4	PA (>=65 yr), QL (30 capsules/30 days)
LOREEV XR - lorazepam cap er 24hr sprinkle 2 mg	4	PA (>=65 yr), QL (150 capsules/30 days)
LOREEV XR - lorazepam cap er 24hr sprinkle 3 mg	4	PA (>=65 yr), QL (90 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
oxazepam cap 10 mg, 15 mg, 30 mg	2	PA (>=65 yr), QL (120 capsules/30 days)
VALIUM - diazepam tab 2 mg, 5 mg, 10 mg	4	PA (>=65 yr), QL (120 tablets/30 days)
XANAX - alprazolam tab 0.25 mg, 0.5 mg, 1 mg	4	QL (120 tablets/30 days)
XANAX - alprazolam tab 2 mg	4	QL (150 tablets/30 days)
XANAX XR - alprazolam tab er 24hr 2 mg	4	QL (150 tablets/30 days)
Bipolar Agents		
EQUETRO - carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	4	
lithium carbonate cap 150 mg, 300 mg	1	
lithium carbonate cap 600 mg	1	
lithium carbonate tab er 300 mg, 450 mg	2	
lithium carbonate tab 300 mg	1	
lithium oral solution 8 meq/5ml	2	
LITHOBID - lithium carbonate tab er 300 mg	4	
olanzapine-fluoxetine hcl cap 3-25 mg, 6-50 mg, 12-25 mg, 12-50 mg	2	PA (>=65 yr), QL (30 capsules/30 days)
olanzapine-fluoxetine hcl cap 6-25 mg	2	PA (>=65 yr), QL (60 capsules/30 days)
Blood Glucose Regulators		
acarbose tab 25 mg	2	QL (360 tablets/30 days)
acarbose tab 50 mg	2	QL (180 tablets/30 days)
acarbose tab 100 mg	2	QL (90 tablets/30 days)
ACTOPLUS MET - pioglitazone hcl-metformin hcl tab 15-850 mg	4	QL (90 tablets/30 days)
ACTOS - pioglitazone hcl tab 15 mg (base equiv)	4	QL (90 tablets/30 days)
ACTOS - pioglitazone hcl tab 30 mg (base equiv), 45 mg (base equiv)	4	QL (30 tablets/30 days)
ADMELOG - insulin lispro inj soln 100 unit/ml	4	QL (60 mls/30 days)
ADMELOG SOLOSTAR - insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	4	QL (20 pens/30 days)
AFREZZA - insulin regular (human) inh powd 90 x 8 unit & 90 x 12 unit	5	QL (720 cartridges/30 days)
AFREZZA - insulin regular (human) inh powd 60x4 & 60x8 & 60x12 ut/cart	5	QL (900 cartridges/30 days)
AFREZZA - insulin regular (human) inhal powd 90 x 4 unit & 90 x 8 unit	5	QL (1080 cartridges/30 days)
AFREZZA - insulin regular (human) inhalation powder 4 unit/ cartridge	4	QL (1530 cartridges/30 days)
AFREZZA - insulin regular (human) inhalation powder 8 unit/ cartridge	4	QL (810 cartridges/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
AFREZZA - insulin regular (human) inhalation powder 12 unit/ cartridge	5	QL (540 cartridges/30 days)
ALCOHOL SWABS	3	PA
ALOGLIPTIN - alogliptin benzoate tab 6.25 mg (base equiv), 12.5 mg (base equiv), 25 mg (base equiv)	4	QL (30 tablets/30 days)
ALOGLIPTIN/METFORMIN HCL - alogliptin-metformin hcl tab 12.5-500 mg	4	QL (60 tablets/30 days)
ALOGLIPTIN/METFORMIN HYDROCHLORIDE - alogliptin-metformin hcl tab 12.5-1000 mg	4	QL (60 tablets/30 days)
ALOGLIPTIN/PIOGLITAZONE - alogliptin-pioglitazone tab 12.5-30 mg, 25-15 mg, 25-30 mg, 25-45 mg	3	QL (30 tablets/30 days)
APIDRA - insulin glulisine inj 100 unit/ml	4	QL (6 vials/30 days)
APIDRA SOLOSTAR - insulin glulisine soln pen-injector inj 100 unit/ml	4	QL (20 pens/30 days)
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/dose	4	QL (4 devices/30 days)
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/dose	4	QL (4 devices/30 days)
BASAGLAR KWIKPEN - insulin glargine soln pen-injector 100 unit/ml	4	QL (20 pens/30 days)
BRYNOVIN - sitagliptin hydrochloride oral soln 25 mg/ml	4	QL (1 bottle/30 days)
CYCLOSET - bromocriptine mesylate tab 0.8 mg (base equivalent)	4	QL (180 tablets/30 days)
dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	2	QL (30 tablets/30 days)
dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg	2	QL (60 tablets/30 days)
dapagliflozin tab 5 mg, 10 mg	2	QL (30 tablets/30 days)
DAPAGLIFLOZIN/SAXAGLIPTIN - dapagliflozin-saxagliptin tab 10-5 mg	4	QL (30 tablets/30 days)
diazoxide susp 50 mg/ml	2	
DUETACT - pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg#	4	QL (30 tablets/30 days)
FARXIGA - dapagliflozin tab 5 mg, 10 mg	3	QL (30 tablets/30 days)
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	3	QL (6 vials/30 days)
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	3	QL (20 pens/30 days)
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	3	QL (60 mls/30 days)
FIASP PUMPCART - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	3	QL (60 mls/30 days)
GAUZE PADS 2" X 2"	3	PA
GLIMEPIRIDE - glimepiride tab 3 mg#	4	QL (60 tablets/30 days)
glimepiride tab 1 mg#	1	QL (240 tablets/30 days)
glimepiride tab 2 mg#	1	QL (120 tablets/30 days)
glimepiride tab 4 mg#	1	QL (60 tablets/30 days)
GLIPIZIDE - glipizide tab 2.5 mg	4	QL (480 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
GLIPIZIDE - glipizide tab 15 mg	4	QL (60 tablets/30 days)
glipizide tab er 24hr 2.5 mg	1	QL (240 tablets/30 days)
glipizide tab er 24hr 5 mg	1	QL (120 tablets/30 days)
glipizide tab er 24hr 10 mg	1	QL (60 tablets/30 days)
glipizide tab 5 mg	1	QL (240 tablets/30 days)
glipizide tab 10 mg	1	QL (120 tablets/30 days)
glipizide-metformin hcl tab 2.5-250 mg	1	QL (240 tablets/30 days)
glipizide-metformin hcl tab 2.5-500 mg, 5-500 mg	1	QL (120 tablets/30 days)
glucagon for inj 1 mg	2	QL (4 kits/30 days)
glucagon hcl for inj 1 mg	2	QL (4 kits/30 days)
GLUCOTROL XL - glipizide tab er 24hr 5 mg	4	QL (120 tablets/30 days)
glyburide tab 1.25 mg#	2	QL (480 tablets/30 days)
glyburide tab 2.5 mg#	2	QL (240 tablets/30 days)
glyburide tab 5 mg#	2	QL (120 tablets/30 days)
glyburide-metformin tab 1.25-250 mg#	2	QL (240 tablets/30 days)
glyburide-metformin tab 2.5-500 mg, 5-500 mg#	2	QL (120 tablets/30 days)
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	4	QL (30 tablets/30 days)
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	3	QL (4 syringes/30 days)
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	3	QL (4 syringes/30 days)
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	3	QL (4 vials/30 days)
GVOKE PFS - glucagon subcutaneous soln pref syringe 1 mg/0.2ml	3	QL (4 syringes/30 days)
HUMALOG - insulin lispro inj soln 100 unit/ml	3	QL (60 mls/30 days)
HUMALOG - insulin lispro soln cartridge 100 unit/ml	3	QL (20 cartridges/30 days)
HUMALOG JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	3	QL (20 pens/30 days)
HUMALOG KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	3	QL (20 pens/30 days)
HUMALOG MIX 50/50 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	3	QL (20 pens/30 days)
HUMALOG MIX 75/25 - insulin lispro prot & lispro inj 100 unit/ml (75-25)	3	QL (6 vials/30 days)
HUMALOG MIX 75/25 KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	3	QL (20 pens/30 days)
HUMULIN N - insulin nph (human) (isophane) inj 100 unit/ml	3	QL (60 mls/30 days)
HUMULIN N KWIKPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3	QL (20 pens/30 days)
HUMULIN R - insulin regular (human) inj 100 unit/ml	3	QL (60 mls/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
HUMULIN R U-500 (CONCENTRATED) - insulin regular (human) inj 500 unit/ml	3	BD
HUMULIN R U-500 KWIKPEN - insulin regular (human) soln pen-injector 500 unit/ml	3	QL (20 pens/30 days)
HUMULIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3	QL (60 mls/30 days)
HUMULIN 70/30 KWIKPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3	QL (20 pens/30 days)
INSULIN GLARGINE-YFGN - insulin glargine-yfgn inj 100 unit/ml	4	QL (6 vials/30 days)
INSULIN GLARGINE-YFGN - insulin glargine-yfgn soln pen-injector 100 unit/ml	4	QL (20 pens/30 days)
INSULIN INJECTION DEVICE	3	
INSULIN LISPRO - insulin lispro inj soln 100 unit/ml	4	QL (60 mls/30 days)
INSULIN LISPRO JUNIOR KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	4	QL (20 pens/30 days)
INSULIN LISPRO KWIKPEN - insulin lispro soln pen-injector 100 unit/ml (1 unit dial)	4	QL (20 pens/30 days)
INSULIN LISPRO PROTAMINE/INSULIN LISPRO KWIKPEN - insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	4	QL (20 pens/30 days)
INSULIN SYRINGE/NEEDLE	3	PA
INVOKAMET - canagliflozin-metformin hcl tab 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	4	QL (60 tablets/30 days)
INVOKAMET XR - canagliflozin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 150-500 mg, 150-1000 mg	4	QL (60 tablets/30 days)
INVOKANA - canagliflozin tab 100 mg	4	QL (60 tablets/30 days)
INVOKANA - canagliflozin tab 300 mg	4	QL (30 tablets/30 days)
JANUMET - sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	3	QL (60 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	3	QL (30 tablets/30 days)
JANUMET XR - sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg	3	QL (60 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	3	QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	3	QL (30 tablets/30 days)
JENTADUETO - linagliptin-metformin hcl tab 2.5-500 mg, 2.5-850 mg, 2.5-1000 mg	3	QL (60 tablets/30 days)
JENTADUETO XR - linagliptin-metformin hcl tab er 24hr 2.5-1000 mg	3	QL (60 tablets/30 days)
JENTADUETO XR - linagliptin-metformin hcl tab er 24hr 5-1000 mg	3	QL (30 tablets/30 days)
LANTUS - insulin glargine inj 100 unit/ml	3	QL (6 vials/30 days)
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml	3	QL (20 pens/30 days)
liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	2	PA, QL (3 pens/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
LYUMJEV - insulin lispro-aabc inj 100 unit/ml	3	QL (6 vials/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-injector 200 unit/ml	3	QL (20 pens/30 days)
LYUMJEV KWIKPEN - insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	3	QL (20 pens/30 days)
MERILOG - insulin aspart-szjj subcutaneous soln 100 unit/ml	4	QL (6 vials/30 days)
MERILOG SOLOSTAR - insulin aspart-szjj soln pen-injector 100 unit/ml	4	QL (20 pens/30 days)
metformin hcl oral soln 500 mg/5ml	2	QL (765 mls/30 days)
metformin hcl tab er 24hr 500 mg	1	QL (120 tablets/30 days)
metformin hcl tab er 24hr 750 mg	1	QL (60 tablets/30 days)
metformin hcl tab er 24hr osmotic 500 mg	2	QL (120 tablets/30 days)
metformin hcl tab er 24hr osmotic 1000 mg	2	QL (60 tablets/30 days)
metformin hcl tab er 24hr modified release 500 mg	2	QL (120 tablets/30 days)
metformin hcl tab er 24hr modified release 1000 mg	2	QL (60 tablets/30 days)
metformin hcl tab 500 mg	1	QL (150 tablets/30 days)
metformin hcl tab 625 mg	5	QL (120 tablets/30 days)
metformin hcl tab 750 mg	5	QL (90 tablets/30 days)
metformin hcl tab 850 mg	1	QL (90 tablets/30 days)
metformin hcl tab 1000 mg	1	QL (75 tablets/30 days)
miglitol tab 100 mg	2	QL (90 tablets/30 days)
miglitol tab 25 mg	2	QL (360 tablets/30 days)
miglitol tab 50 mg	2	QL (180 tablets/30 days)
MOUNJARO - tirzepatide soln auto-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	3	PA, QL (4 pens/28 days)
nateglinide tab 60 mg	2	QL (180 tablets/30 days)
nateglinide tab 120 mg	2	QL (90 tablets/30 days)
NOVOLIN N - insulin nph (human) (isophane) inj 100 unit/ml	3	QL (60 mls/30 days)
NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ml	3	QL (60 mls/30 days)
NOVOLIN R - insulin regular (human) inj 100 unit/ml	3	QL (60 mls/30 days)
NOVOLIN R FLEXPEN - insulin regular (human) soln pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLIN R FLEXPEN RELION - insulin regular (human) soln pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLIN R RELION - insulin regular (human) inj 100 unit/ml	3	QL (60 mls/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3	QL (60 mls/30 days)
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3	QL (20 pens/30 days)
NOVOLIN 70/30 FLEXPEN RELION - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	3	QL (20 pens/30 days)
NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)	3	QL (60 mls/30 days)
NOVOLOG - insulin aspart inj soln 100 unit/ml	3	QL (6 vials/30 days)
NOVOLOG FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLOG FLEXPEN RELION - insulin aspart soln pen-injector 100 unit/ml	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	3	QL (6 vials/30 days)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	3	QL (20 pens/30 days)
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	3	QL (6 vials/30 days)
NOVOLOG PENFILL - insulin aspart soln cartridge 100 unit/ml	3	QL (20 cartridges/30 days)
NOVOLOG RELION - insulin aspart inj soln 100 unit/ml	3	QL (6 vials/30 days)
OMNIPOD DASH INTRO KIT (GEN 4) - insulin infusion disposable pump kit	3	PA, QL (1 kit/720 days)
OMNIPOD DASH PDM KIT (GEN 4) - insulin infusion disposable pump kit	3	PA, QL (1 kit/720 days)
OMNIPOD DASH PODS (GEN 4) - insulin infusion disposable pump reservoir	3	PA, QL (15 pods/30 days)
OMNIPOD 5 DEXCOM G7G6 INTRO KIT (GEN 5) - insulin infusion disposable pump kit	3	PA, QL (1 kit/720 days)
OMNIPOD 5 DEXCOM G7G6 PODS (GEN 5) - insulin infusion disposable pump reservoir	3	PA, QL (15 pods/30 days)
OMNIPOD 5 LIBRE INTRO KIT - insulin infusion disposable pump kit	3	PA, QL (1 kit/720 days)
OMNIPOD 5 LIBRE PODS - insulin infusion disposable pump reservoir	3	PA, QL (15 pods/30 days)
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	3	PA, QL (1 pen/28 days)
OZEMPIC - semaglutide tab 1.5 mg, 4 mg, 9 mg	3	PA, QL (30 tablets/30 days)
pioglitazone hcl tab 15 mg (base equiv)	1	QL (90 tablets/30 days)
pioglitazone hcl tab 30 mg (base equiv), 45 mg (base equiv)	1	QL (30 tablets/30 days)
pioglitazone hcl-glimepiride tab 30-2 mg, 30-4 mg#	2	QL (30 tablets/30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg	2	QL (90 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
PROGLYCEM - diazoxide susp 50 mg/ml	5	
repaglinide tab 0.5 mg	1	QL (960 tablets/30 days)
repaglinide tab 1 mg	1	QL (480 tablets/30 days)
repaglinide tab 2 mg	1	QL (240 tablets/30 days)
REZVOGLAR KWIKPEN - insulin glargine-aglr soln pen-injector 100 unit/ml	4	QL (20 pens/30 days)
RYBELSUS - semaglutide tab 3 mg, 7 mg, 14 mg	3	PA, QL (30 tablets/30 days)
saxagliptin hcl tab 2.5 mg (base equiv), 5 mg (base equiv)	2	QL (30 tablets/30 days)
saxagliptin-metformin hcl tab er 24hr 2.5-1000 mg	2	QL (60 tablets/30 days)
saxagliptin-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg	2	QL (30 tablets/30 days)
SEGLUROMET - ertugliflozin-metformin hcl tab 2.5-500 mg	4	QL (120 tablets/30 days)
SEGLUROMET - ertugliflozin-metformin hcl tab 2.5-1000 mg, 7.5-500 mg, 7.5-1000 mg	4	QL (60 tablets/30 days)
SEMGLEE - insulin glargine-yfgn inj 100 unit/ml	4	QL (6 vials/30 days)
SEMGLEE - insulin glargine-yfgn soln pen-injector 100 unit/ml	4	QL (20 pens/30 days)
SITAGLIPTIN - sitagliptin tab 25 mg, 50 mg, 100 mg	4	QL (30 tablets/30 days)
sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2	QL (30 tablets/30 days)
sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	2	QL (30 tablets/30 days)
sitagliptin phosphate-metformin hcl tab er 24hr 50-1000 mg	2	QL (60 tablets/30 days)
sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg	2	QL (60 tablets/30 days)
SITAGLIPTIN/METFORMIN HYDROCHLORIDE - sitagliptin free base-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg	4	QL (60 tablets/30 days)
SITAGLIPTIN/METFORMIN HYDROCHLORIDE - sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg	4	QL (30 tablets/30 days)
SITAGLIPTIN/METFORMIN HYDROCHLORIDE - sitagliptin free base-metformin hcl tab 50-500 mg, 50-1000 mg	4	QL (60 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	3	QL (6 pens/30 days)
STEGLATRO - ertugliflozin l-pyroglutamic acid tab 5 mg (base equiv), 15 mg (base equiv)	4	QL (30 tablets/30 days)
STEGLUJAN - ertugliflozin-sitagliptin tab 5-100 mg, 15-100 mg	4	QL (30 tablets/30 days)
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	3	QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	3	QL (30 tablets/30 days)
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	3	QL (60 mls/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	3	QL (60 mls/30 days)
TRADJENTA - linagliptin tab 5 mg	3	QL (30 tablets/30 days)
TRESIBA - insulin degludec inj 100 unit/ml	3	QL (6 vials/30 days)
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	3	QL (20 pens/30 days)
TRIJARDY XR - empagliflozin-linaglip-metformin tab er 24hr 12.5-2.5-1000mg	4	QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	4	QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	4	QL (30 tablets/30 days)
TRULICITY - dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	3	PA, QL (4 pens/28 days)
V-GO 20 - insulin infusion disposable pump kit 20 unit/24hr	3	PA, QL (30 kits/30 days)
V-GO 30 - insulin infusion disposable pump kit 30 unit/24hr	3	PA, QL (30 kits/30 days)
V-GO 40 - insulin infusion disposable pump kit 40 unit/24hr	3	PA, QL (30 kits/30 days)
VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	4	PA, QL (3 pens/30 days)
XIGDUO XR - dapagliflozin free bas-metformin hcl tab er 24hr 2.5-1000 mg	3	QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	3	QL (30 tablets/30 days)
XIGDUO XR - dapagliflozin free base-metformin hcl tab er 24hr 5-1000 mg	3	QL (60 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	4	QL (5 pens/30 days)
ZITUVIMET - sitagliptin free base-metformin hcl tab 50-500 mg, 50-1000 mg	4	QL (60 tablets/30 days)
ZITUVIMET XR - sitagliptin free base-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg	4	QL (60 tablets/30 days)
ZITUVIMET XR - sitagliptin free base-metformin hcl tab er 24hr 100-1000 mg	4	QL (30 tablets/30 days)
ZITUVIO - sitagliptin tab 25 mg, 50 mg, 100 mg	4	QL (30 tablets/30 days)
Blood Products and Modifiers		
AGRYLIN - anagrelide hcl cap 0.5 mg	4	
ALVAIZ - eltrombopag choline tab 9 mg (base equiv), 18 mg (base equiv), 36 mg (base equiv), 54 mg (base equiv)†	5	PA
anagrelide hcl cap 0.5 mg, 1 mg	2	
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 100 mcg/ml, 200 mcg/ml	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml	4	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	5	PA
ARIXTRA - fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml	4	QL (30 syringes/90 days)
ARIXTRA - fondaparinux sodium subcutaneous inj 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml	5	QL (30 syringes/90 days)
ARMLUPEG - pegfilgrastim-unne soln prefilled syringe 6 mg/0.6ml	5	PA
aspirin-dipyridamole cap er 12hr 25-200 mg	2	
BRILINTA - ticagrelor tab 60 mg, 90 mg	4	
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	5	
cilostazol tab 50 mg, 100 mg	2	
clopidogrel bisulfate tab 75 mg (base equiv)	1	
clopidogrel bisulfate tab 300 mg (base equiv)	2	
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq)	2	QL (60 capsules/30 days)
dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	2	QL (120 capsules/30 days)
dipyridamole tab 25 mg, 50 mg, 75 mg#	2	
DOPTELET - avatrombopag maleate tab 20 mg (base equiv)	5	PA
DOPTELET SPRINKLE - avatrombopag maleate cap sprinkle 10 mg (base equiv)	5	PA
EFFIENT - prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)	4	
ELIQUIS - apixaban cap sprinkle 0.15 mg	3	QL (74 capsules/30 days)
ELIQUIS - apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)	3	QL (560 tablets/28 days)
ELIQUIS - apixaban tab for oral susp 0.5 mg	3	QL (560 tablets/28 days)
ELIQUIS - apixaban tab 2.5 mg	3	QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg	3	QL (74 tablets/30 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	3	QL (74 tablets/30 days)
eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	5	PA
eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	5	PA
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml	2	QL (30 syringes/90 days)
EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	4	PA
FILKRI - filgrastim-laha soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5	PA
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml	2	QL (30 syringes/90 days)

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

Drug Name	Drug Tier	Requirements/Limits
fondaparinux sodium subcutaneous inj 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml	5	QL (30 syringes/90 days)
FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml	4	QL (30 syringes/90 days)
FRAGMIN - dalteparin sodium soln prefilled syr 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	5	QL (30 syringes/90 days)
FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml	4	QL (30 vials/90 days)
FRAGMIN - dalteparin sodium subcutaneous soln 95000 unit/3.8ml	5	QL (10 vials/90 days)
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	5	PA
FYLNETRA - pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	5	PA
GRANIX - tbo-filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5	PA
GRANIX - tbo-filgrastim subcutaneous inj 300 mcg/ml	5	PA
heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml	2	
heparin sodium (porcine) pf inj 5000 unit/ml	2	
heparin sodium (porcine) pf inj 1000 unit/ml	2	
jantoven - warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1	
LEUKINE - sargramostim lyophilized for inj 250 mcg	5	PA
LOVENOX - enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 120 mg/0.8ml	4	QL (30 syringes/90 days)
LOVENOX - enoxaparin sodium inj soln pref syr 100 mg/ml, 150 mg/ml	5	QL (30 syringes/90 days)
MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	4	PA
MULPLETA - lusutrombopag tab 3 mg	5	PA
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	5	PA
NEULASTA ONPRO KIT - pegfilgrastim soln prefill syr/infusion dev 6 mg/0.6ml	5	PA
NEUPOGEN - filgrastim inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	5	PA
NEUPOGEN - filgrastim soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml (600 mcg/ml)	5	PA
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	5	PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml	3	PA
NIVESTYM - filgrastim-aafi soln prefilled syringe 480 mcg/0.8ml	5	PA
NYPOZI - filgrastim-txid soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5	PA
NYVEPRIA - pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	5	PA

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Drug Name	Drug Tier	Requirements/Limits
PLAVIX - clopidogrel bisulfate tab 75 mg (base equiv)	4	
PRADAXA - dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq)	4	QL (60 capsules/30 days)
PRADAXA - dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	4	QL (120 capsules/30 days)
PRADAXA - dabigatran etexilate mesylate pellet pack 20 mg, 150 mg	5	QL (60 packets/30 days)
PRADAXA - dabigatran etexilate mesylate pellet pack 30 mg, 40 mg, 50 mg, 110 mg	5	QL (120 packets/30 days)
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv)	2	
PROCRIT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml	4	PA
PROCRIT - epoetin alfa inj 20000 unit/ml, 40000 unit/ml	5	PA
PROMACTA - eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)*	5	PA
PROMACTA - eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)*	5	PA
REBLOZYL - luspatercept-aamt for subcutaneous inj 25 mg, 75 mg	5	PA
RELEUKO - filgrastim-ayow soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	4	PA
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	4	PA
rivaroxaban for susp 1 mg/ml	2	QL (4 bottles/30 days)
rivaroxaban tab 2.5 mg	2	QL (60 tablets/30 days)
ROLVEDON - eflapegrastim-xnst soln prefilled syringe 13.2 mg/0.6ml	5	PA
SAVAYSA - edoxaban tosylate tab 15 mg (base equivalent), 30 mg (base equivalent), 60 mg (base equivalent)	4	QL (30 tablets/30 days)
STIMUFEND - pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	5	PA
TAVALISSE - fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	5	PA
ticagrelor tab 60 mg, 90 mg	2	
tranexamic acid tab 650 mg	2	
UDENYCA - pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	5	PA
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	5	PA
UDENYCA ONBODY - pegfilgrastim-cbqv soln prefill syr/infusion dev 6 mg/0.6ml	5	PA
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1	
WAYRILZ - rilzabrutinib tab 400 mg	5	PA
XARELTO - rivaroxaban for susp 1 mg/ml	3	QL (4 bottles/30 days)
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	3	QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
XARELTO - rivaroxaban tab 10 mg, 20 mg	3	QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	3	QL (51 tablets/30 days)
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	5	PA
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	5	PA
Cardiovascular Agents		
acebutolol hcl cap 200 mg, 400 mg	2	
acetazolamide cap er 12hr 500 mg	2	
acetazolamide tab 125 mg, 250 mg	2	
ALDACTONE - spironolactone tab 25 mg, 50 mg, 100 mg	4	
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	2	QL (30 tablets/30 days)
amiloride & hydrochlorothiazide tab 5-50 mg	2	
amiloride hcl tab 5 mg	2	
amiodarone hcl tab 100 mg, 200 mg, 400 mg	2	
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1	
amlodipine besylate-atorvastatin calcium tab 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	2	
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg	1	
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg	1	QL (30 tablets/30 days)
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg	1	QL (30 tablets/30 days)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	2	QL (30 tablets/30 days)
ARBLI - losartan potassium oral susp 10 mg/ml	4	QL (2 bottles/30 days)
ATACAND - candesartan cilexetil tab 4 mg, 8 mg, 16 mg	4	QL (60 tablets/30 days)
ATACAND - candesartan cilexetil tab 32 mg	4	QL (30 tablets/30 days)
ATACAND HCT - candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg	4	QL (30 tablets/30 days)
atenolol & chlorthalidone tab 50-25 mg, 100-25 mg	1	
atenolol tab 25 mg, 50 mg, 100 mg	1	
ATORVALIQ - atorvastatin calcium susp 20 mg/5ml (4mg/ml) (base equiv)	4	QL (600 mls/30 days)
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	1	QL (45 tablets/30 days)
atorvastatin calcium tab 80 mg (base equivalent)	1	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
AVALIDE - irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg	4	QL (30 tablets/30 days)
AVAPRO - irbesartan tab 150 mg, 300 mg	4	QL (30 tablets/30 days)
azilsartan medoxomil tab 40 mg, 80 mg	2	QL (30 tablets/30 days)
AZOR - amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg	4	QL (30 tablets/30 days)
BAXFENDY - baxdrostat tab 1 mg, 2 mg	4	PA, QL (30 tablets/30 days)
benazepril & hydrochlorothiazide tab 5-6.25 mg, 10-12.5 mg, 20-12.5 mg, 20-25 mg	1	
benazepril hcl tab 5 mg, 10 mg, 20 mg, 40 mg	1	
BENICAR - olmesartan medoxomil tab 5 mg	4	QL (60 tablets/30 days)
BENICAR - olmesartan medoxomil tab 20 mg, 40 mg	4	QL (30 tablets/30 days)
BENICAR HCT - olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg	4	QL (30 tablets/30 days)
BETAPACE - sotalol hcl tab 80 mg, 120 mg, 160 mg	4	
BETAPACE AF - sotalol hcl (afib/afl) tab 80 mg, 120 mg, 160 mg	4	
betaxolol hcl tab 10 mg, 20 mg	2	
BIDIL - isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	4	
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg	1	
BISOPROLOL FUMARATE - bisoprolol fumarate tab 2.5 mg	4	
bisoprolol fumarate tab 5 mg, 10 mg	2	
bumetanide inj 0.25 mg/ml	2	
bumetanide tab 0.5 mg, 1 mg, 2 mg	2	
BYSTOLIC - nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)	4	
CADUET - amlodipine besylate-atorvastatin calcium tab 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg, 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	4	
CAMZYOS - mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg*	5	PA, QL (30 capsules/30 days)
candesartan cilexetil tab 4 mg, 8 mg, 16 mg	1	QL (60 tablets/30 days)
candesartan cilexetil tab 32 mg	1	QL (30 tablets/30 days)
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg	2	QL (30 tablets/30 days)
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1	
CARDAMYST - etripamil nasal soln 2 x 70 mg/dose	5	PA, QL (3 boxes/180 days)
CARDIZEM - diltiazem hcl tab 30 mg, 60 mg, 120 mg	4	
CARDIZEM CD - diltiazem hcl coated beads cap er 24hr 120 mg, 300 mg	4	
CARDIZEM CD - diltiazem hcl coated beads cap er 24hr 180 mg, 240 mg, 360 mg	5	

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Drug Name	Drug Tier	Requirements/Limits
CARDIZEM LA - diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	4	
CARDURA - doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg	4	QL (60 tablets/30 days)
CAROSPIR - spironolactone susp 25 mg/5ml	4	
cartia xt - diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg	2	
carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg	2	
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	1	
chlorthalidone tab 25 mg, 50 mg	2	
cholestyramine light powder packets 4 gm	2	
cholestyramine light powder 4 gm/dose	2	
cholestyramine powder packets 4 gm	2	
cholestyramine powder 4 gm/dose	2	
choline fenofibrate cap dr 45 mg (fenofibric acid equiv)	2	QL (60 capsules/30 days)
choline fenofibrate cap dr 135 mg (fenofibric acid equiv)	2	QL (30 capsules/30 days)
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1	
CLONIDINE HYDROCHLORIDE - clonidine hcl tab 0.05 mg	4	
CLONIDINE HYDROCHLORIDE ER - clonidine tab er 24hr 0.17 mg	4	
clonidine td patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr	2	
colesevelam hcl packet for susp 3.75 gm	2	QL (30 packets/30 days)
colesevelam hcl tab 625 mg	2	
COLESTID - colestipol hcl tab 1 gm	4	
colestipol hcl granule packets 5 gm	2	
colestipol hcl granules 5 gm	2	
colestipol hcl tab 1 gm	2	
COREG - carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	4	
COREG CR - carvedilol phosphate cap er 24hr 10 mg, 20 mg, 40 mg, 80 mg	4	
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	3	PA, QL (600 mls/30 days)
CORLANOR - ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	3	PA, QL (60 tablets/30 days)
COZAAR - losartan potassium tab 25 mg, 50 mg	4	QL (60 tablets/30 days)
COZAAR - losartan potassium tab 100 mg	4	QL (30 tablets/30 days)
CRESTOR - rosuvastatin calcium tab 5 mg, 10 mg, 20 mg	4	QL (45 tablets/30 days), ST
CRESTOR - rosuvastatin calcium tab 40 mg	4	QL (30 tablets/30 days), ST
dichlorphenamide tab 50 mg	5	PA, QL (120 tablets/30 days)
digoxin inj 0.25 mg/ml#	2	
digoxin oral soln 0.05 mg/ml#	2	QL (150 mls/30 days)

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Drug Name	Drug Tier	Requirements/Limits
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)#	2	QL (30 tablets/30 days)
dilt-xr - diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	2	
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	2	
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	2	
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	2	
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	2	
diltiazem hcl tab er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	2	
diltiazem hcl tab 30 mg, 60 mg, 90 mg, 120 mg	2	
DIOVAN - valsartan tab 40 mg, 80 mg, 160 mg	4	QL (60 tablets/30 days)
DIOVAN - valsartan tab 320 mg	4	QL (30 tablets/30 days)
DIOVAN HCT - valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg	4	QL (30 tablets/30 days)
disopyramide phosphate cap 100 mg, 150 mg#	2	
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)	2	
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg	2	QL (60 tablets/30 days)
droxidopa cap 100 mg, 200 mg, 300 mg	2	PA
DYRENIUM - triamterene cap 50 mg, 100 mg	4	
EDARBI - azilsartan medoxomil tab 40 mg, 80 mg	4	QL (30 tablets/30 days)
EDARBYCLOR - azilsartan medoxomil-chlorthalidone tab 40-12.5 mg, 40-25 mg	4	QL (30 tablets/30 days)
EDECRIN - ethacrynic acid tab 25 mg	4	
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg, 10-25 mg	1	
enalapril maleate oral soln 1 mg/ml	4	
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg	1	
ENBUMYST - bumetanide nasal spray 0.5 mg/0.1ml	4	
ENTRESTO - sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	3	QL (240 capsules/30 days)
ENTRESTO - sacubitril-valsartan tab 24-26 mg	3	QL (180 tablets/30 days)
ENTRESTO - sacubitril-valsartan tab 49-51 mg, 97-103 mg	3	QL (60 tablets/30 days)
eplerenone tab 25 mg, 50 mg	2	
ethacrynic acid tab 25 mg	2	
EVKEEZA - evinacumab-dgnb iv soln 345 mg/2.3ml (150 mg/ml), 1200 mg/8ml (150 mg/ml)	5	PA
EXFORGE - amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg	4	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
EXFORGE HCT - amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg	4	QL (30 tablets/30 days)
ezetimibe tab 10 mg	2	QL (30 tablets/30 days)
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	1	QL (30 tablets/30 days)
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	2	
FENOFIBRATE - fenofibrate cap 50 mg	4	QL (60 capsules/30 days)
FENOFIBRATE - fenofibrate cap 150 mg	4	QL (30 capsules/30 days)
fenofibrate micronized cap 43 mg	1	QL (60 capsules/30 days)
fenofibrate micronized cap 67 mg, 130 mg, 134 mg, 200 mg	2	QL (30 capsules/30 days)
fenofibrate tab 40 mg, 48 mg, 54 mg	2	QL (60 tablets/30 days)
fenofibrate tab 120 mg, 145 mg, 160 mg	2	QL (30 tablets/30 days)
FILSPARI - sparsentan tab 200 mg	5	PA, QL (30 tablets/30 days)
FILSPARI - sparsentan tab 400 mg	5	PA, QL (60 tablets/30 days)
flecainide acetate tab 50 mg, 100 mg, 150 mg	2	
FLOLIPID - simvastatin susp 20 mg/5ml (4 mg/ml)	4	QL (150 mls/30 days)
FLOLIPID - simvastatin susp 40 mg/5ml (8 mg/ml)	4	QL (300 mls/30 days)
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	2	QL (60 capsules/30 days)
fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	2	QL (30 tablets/30 days)
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	1	
fosinopril sodium tab 10 mg, 20 mg, 40 mg	1	
FUROSCIX - furosemide subcutaneous cartridge kit 80 mg/10ml	4	
FUROSCIX READYFLOW - furosemide subcutaneous soln auto-injector 80 mg/ml	4	
furosemide inj 10 mg/ml	2	
furosemide oral soln 8 mg/ml	2	
furosemide oral soln 10 mg/ml	1	
furosemide tab 20 mg, 40 mg, 80 mg	1	
gemfibrozil tab 600 mg	1	QL (60 tablets/30 days)
guanfacine hcl tab 1 mg, 2 mg#	2	
HEMANGEOL - propranolol hcl oral soln 4.28 mg/ml (3.75 mg/ml base equiv)	5	
HEMICLOR - chlorthalidone tab 12.5 mg	4	
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1	
hydrochlorothiazide cap 12.5 mg	1	
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1	
HYZAAR - losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg	4	QL (30 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
icosapent ethyl cap 0.5 gm	2	QL (240 capsules/30 days)
icosapent ethyl cap 1 gm	2	QL (120 capsules/30 days)
indapamide tab 1.25 mg, 2.5 mg	1	
INDERAL LA - propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg	5	
INDERAL XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	5	
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	5	
INPEFA - sotagliflozin tab 200 mg, 400 mg	4	QL (30 tablets/30 days)
INZIRQO - hydrochlorothiazide for susp 10 mg/ml	4	
irbesartan tab 75 mg, 150 mg, 300 mg	1	QL (30 tablets/30 days)
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg	1	QL (30 tablets/30 days)
isosorbide dinitrate tab 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	2	
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	2	
isosorbide mononitrate tab er 24hr 30 mg, 60 mg	1	
isosorbide mononitrate tab er 24hr 120 mg	2	
isosorbide mononitrate tab 10 mg	2	
isosorbide mononitrate tab 20 mg	1	
isradipine cap 2.5 mg, 5 mg	2	
ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	2	PA, QL (60 tablets/30 days)
JAVADIN - clonidine hcl oral soln 100 mcg/5ml	4	
JUXTAPID - lomitapide mesylate cap 2 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)*	5	PA
KAPSPARGO SPRINKLE - metoprolol succ cap er 24hr sprinkle 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	4	
KATERZIA - amlodipine benzoate oral susp 1 mg/ml (base equivalent)	4	
KERENDIA - finerenone tab 10 mg, 20 mg, 40 mg	3	PA, QL (30 tablets/30 days)
KEVEYIS - dichlorphenamide tab 50 mg*	5	PA, QL (120 tablets/30 days)
labetalol hcl tab 100 mg, 200 mg, 300 mg, 400 mg	2	
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)#	4	QL (30 tablets/30 days)
LASIX - furosemide tab 20 mg, 40 mg, 80 mg	4	
LASIX ONYU - furosemide subcutaneous cartridge kit 80 mg/2.67ml	4	
LEROCHOL - lerodalcibep-liga subcutaneous soln pref syr 300 mg/1.2ml	4	PA, QL (1 syringe/28 days)
LESCOL XL - fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	4	QL (30 tablets/30 days), ST

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Drug Name	Drug Tier	Requirements/Limits
LIPITOR - atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent)	4	QL (45 tablets/30 days), ST
LIPITOR - atorvastatin calcium tab 80 mg (base equivalent)	4	QL (30 tablets/30 days), ST
LIPOFEN - fenofibrate cap 50 mg	4	QL (60 capsules/30 days)
LIPOFEN - fenofibrate cap 150 mg	4	QL (30 capsules/30 days)
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	1	
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	1	
LIVALO - pitavastatin calcium tab 1 mg, 2 mg	4	QL (45 tablets/30 days)
LIVALO - pitavastatin calcium tab 4 mg	4	QL (30 tablets/30 days)
LODOCO - colchicine (cardiovascular) tab 0.5 mg	4	
LOPID - gemfibrozil tab 600 mg	4	QL (60 tablets/30 days)
LOPRESSOR - metoprolol tartrate oral soln 10 mg/ml	4	
LOPRESSOR - metoprolol tartrate tab 12.5 mg, 50 mg, 100 mg	4	
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg	1	QL (30 tablets/30 days)
losartan potassium tab 25 mg, 50 mg	1	QL (60 tablets/30 days)
losartan potassium tab 100 mg	1	QL (30 tablets/30 days)
LOTENSIN - benazepril hcl tab 10 mg, 20 mg, 40 mg	4	
LOTREL - amlodipine besylate-benazepril hcl cap 5-10 mg	4	
lovastatin tab 10 mg, 20 mg, 40 mg	1	QL (60 tablets/30 days)
LOVAZA - omega-3-acid ethyl esters cap 1 gm	4	
matzim la - diltiazem hcl tab er 24hr 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	2	
methazolamide tab 25 mg, 50 mg	2	
METHYLDOPA - methyldopa tab 500 mg#	4	
methyldopa tab 250 mg#	4	
metolazone tab 2.5 mg, 5 mg, 10 mg	2	
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	2	
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	1	
METOPROLOL TARTRATE - metoprolol tartrate tab 12.5 mg	4	
metoprolol tartrate tab 25 mg, 37.5 mg, 50 mg, 75 mg, 100 mg	1	
metyrosine cap 250 mg	5	
mexiletine hcl cap 150 mg, 200 mg, 250 mg	2	
MICARDIS HCT - telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg	4	QL (30 tablets/30 days)
MICARDIS HCT - telmisartan-hydrochlorothiazide tab 80-12.5 mg	4	QL (60 tablets/30 days)
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	2	

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

Drug Name	Drug Tier	Requirements/Limits
minoxidil tab 2.5 mg, 10 mg	2	
moexipril hcl tab 7.5 mg, 15 mg	1	
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	3	
MYQORZO - aficamten tab 5 mg, 10 mg, 15 mg, 20 mg	5	PA, QL (30 tablets/30 days)
nadolol tab 20 mg, 40 mg, 80 mg	2	
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent)	2	
NEXICLON XR - clonidine tab er 24hr 0.17 mg	4	
NEXLETOL - bempedoic acid tab 180 mg	3	PA, QL (30 tablets/30 days)
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	3	PA, QL (30 tablets/30 days)
NIACIN - niacin (antihyperlipidemic) tab 500 mg	4	
niacin tab er 500 mg (antihyperlipidemic)	2	QL (30 tablets/30 days)
niacin tab er 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic)	2	QL (60 tablets/30 days)
NIACOR - niacin (antihyperlipidemic) tab 500 mg	4	
nicardipine hcl cap 20 mg, 30 mg	2	
nifedipine cap 10 mg, 20 mg#	2	
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	2	
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg	2	
NIMODIPINE - nimodipine oral soln 60 mg/20ml (3 mg/ml)	5	
nimodipine cap 30 mg	2	
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	2	
nitro-bid - nitroglycerin oint 2%	2	
NITRO-DUR - nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	4	
NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	5	
nitroglycerin oint 2%, 0.4%	2	
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	2	
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	2	
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	2	
NITROLINGUAL - nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	4	
NITROSTAT - nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	4	
NORLIQVA - amlodipine besylate oral soln 1 mg/ml (base equivalent)	4	
NORPACE - disopyramide phosphate cap 100 mg, 150 mg#	4	
NORTHERA - droxidopa cap 100 mg, 200 mg, 300 mg*	5	PA
NORVASC - amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	4	

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

Drug Name	Drug Tier	Requirements/Limits
NYMALIZE - nimodipine oral soln 6 mg/ml	5	
olmesartan medoxomil tab 5 mg	1	QL (60 tablets/30 days)
olmesartan medoxomil tab 20 mg, 40 mg	1	QL (30 tablets/30 days)
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg	1	QL (30 tablets/30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg	2	QL (30 tablets/30 days)
omega-3-acid ethyl esters cap 1 gm	2	
ormalvi - dichlorphenamide tab 50 mg	5	PA, QL (120 tablets/30 days)
pacerone - amiodarone hcl tab 100 mg, 200 mg	2	
pentoxifylline tab er 400 mg	2	
perindopril erbumine tab 2 mg	1	
perindopril erbumine tab 4 mg	1	
perindopril erbumine tab 8 mg	1	
phenoxybenzamine hcl cap 10 mg	5	
pindolol tab 5 mg, 10 mg	2	
pitavastatin calcium tab 1 mg, 2 mg	2	QL (45 tablets/30 days)
pitavastatin calcium tab 4 mg	2	QL (30 tablets/30 days)
PRALUENT - alirocumab subcutaneous solution auto-injector 75 mg/ml, 150 mg/ml*	4	PA, QL (2 pens/28 days)
pravastatin sodium tab 10 mg, 20 mg, 40 mg	1	QL (45 tablets/30 days)
pravastatin sodium tab 80 mg	1	QL (30 tablets/30 days)
prazosin hcl cap 1 mg, 2 mg, 5 mg	2	
prevalite - cholestyramine light powder packets 4 gm	2	
prevalite - cholestyramine light powder 4 gm/dose	2	
PROCARDIA XL - nifedipine tab er 24hr osmotic release 30 mg, 60 mg	4	
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg	2	
propafenone hcl tab 150 mg, 225 mg, 300 mg	2	
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg	2	
propranolol hcl oral soln 20 mg/5ml	2	
propranolol hcl oral soln 40 mg/5ml	2	
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	2	
QBRELIS - lisinopril oral soln 1 mg/ml	5	
QUESTRAN - cholestyramine powder packets 4 gm	4	
QUESTRAN - cholestyramine powder 4 gm/dose	4	
QUESTRAN LIGHT - cholestyramine light powder 4 gm/dose	4	
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg	1	
quinapril-hydrochlorothiazide tab 10-12.5 mg	1	

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

Drug Name	Drug Tier	Requirements/Limits
quinapril-hydrochlorothiazide tab 20-12.5 mg	1	
quinapril-hydrochlorothiazide tab 20-25 mg	1	
quinidine gluconate tab er 324 mg	2	
quinidine sulfate tab 200 mg	2	
quinidine sulfate tab 300 mg	2	
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg	1	
ranolazine tab er 12hr 500 mg, 1000 mg	2	QL (60 tablets/30 days)
RECTIV - nitroglycerin oint 0.4%	4	
REDEMPLO - plozasiran sodium subcut soln pref syr 25 mg/0.5ml (base eq)	5	PA, QL (1 syringe/84 days)
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	3	PA, QL (6 syringes/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	3	PA, QL (6 pens/28 days)
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg	1	QL (45 tablets/30 days)
rosuvastatin calcium tab 40 mg	1	QL (30 tablets/30 days)
sacubitril-valsartan tab 24-26 mg	2	QL (180 tablets/30 days)
sacubitril-valsartan tab 49-51 mg, 97-103 mg	2	QL (60 tablets/30 days)
SDAMLO - amlodipine besylate for oral soln 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	5	
simvastatin tab 5 mg, 10 mg, 40 mg	1	QL (45 tablets/30 days)
simvastatin tab 20 mg	1	QL (60 tablets/30 days)
simvastatin tab 80 mg	1	QL (30 tablets/30 days)
SOAANZ - torsemide tab 40 mg	4	
sotalol hcl (afib/afl) tab 80 mg	1	
sotalol hcl (afib/afl) tab 120 mg, 160 mg	2	
sotalol hcl tab 80 mg	1	
sotalol hcl tab 120 mg, 160 mg, 240 mg	2	
SOTYLIZE - sotalol hcl oral solution 5 mg/ml	4	
spironolactone & hydrochlorothiazide tab 25-25 mg	1	
spironolactone susp 25 mg/5ml	2	
spironolactone tab 25 mg, 50 mg, 100 mg	1	
SULAR - nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	4	
TEKTURNA - aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	4	QL (30 tablets/30 days)
telmisartan tab 20 mg, 40 mg, 80 mg	1	QL (30 tablets/30 days)
telmisartan-amlodipine tab 40-10 mg	2	QL (30 tablets/30 days)
telmisartan-amlodipine tab 40-5 mg	2	QL (30 tablets/30 days)
telmisartan-amlodipine tab 80-10 mg	2	QL (30 tablets/30 days)
telmisartan-amlodipine tab 80-5 mg	2	QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg	1	QL (30 tablets/30 days)
telmisartan-hydrochlorothiazide tab 80-12.5 mg	1	QL (60 tablets/30 days)
TENORMIN - atenolol tab 25 mg, 50 mg, 100 mg	4	
terazosin hcl cap 1 mg (base equivalent)	1	QL (90 capsules/30 days)
terazosin hcl cap 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1	QL (60 capsules/30 days)
TEZRULY - terazosin hcl oral soln 1 mg/ml (base equivalent)	4	QL (4 bottles/30 days)
THALITONE - chlorthalidone tab 15 mg	4	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 120 mg	2	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 180 mg	2	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 240 mg	2	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 300 mg	2	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 360 mg	2	
tiadylt er - diltiazem hcl extended release beads cap er 24hr 420 mg	2	
TIAZAC - diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	4	
TIKOSYN - dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)	4	
timolol maleate tab 5 mg, 10 mg, 20 mg	2	
TOPROL XL - metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	4	
torsemide tab 5 mg, 10 mg, 20 mg, 100 mg	1	
trandolapril tab 1 mg, 2 mg, 4 mg	1	
trandolapril-verapamil hcl tab er 1-240 mg	1	
trandolapril-verapamil hcl tab er 2-180 mg	1	
trandolapril-verapamil hcl tab er 2-240 mg	1	
trandolapril-verapamil hcl tab er 4-240 mg	1	
triamterene & hydrochlorothiazide cap 37.5-25 mg	1	
triamterene & hydrochlorothiazide tab 37.5-25 mg, 75-50 mg	1	
triamterene cap 50 mg, 100 mg	2	
TRIBENZOR - olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg	4	QL (30 tablets/30 days)
TRYNGOLZA - olezarsen sod subcut soln auto-inject 80 mg/0.8ml (base eq)	5	PA, QL (1 pen/28 days)

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Drug Name	Drug Tier	Requirements/Limits
TRYVIO - aprocitentan tab 12.5 mg	4	PA, QL (30 tablets/30 days)
valsartan oral soln 4 mg/ml	5	QL (20 bottles/30 days)
valsartan tab 40 mg, 80 mg, 160 mg	1	QL (60 tablets/30 days)
valsartan tab 320 mg	1	QL (30 tablets/30 days)
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg	1	QL (30 tablets/30 days)
VANRAFIA - atrasentan hcl tab 0.75 mg	5	PA, QL (30 tablets/30 days)
VASCEPA - icosapent ethyl cap 0.5 gm	3	QL (240 capsules/30 days)
VASCEPA - icosapent ethyl cap 1 gm	3	QL (120 capsules/30 days)
VASERETIC - enalapril maleate & hydrochlorothiazide tab 10-25 mg	4	
VASOTEC - enalapril maleate tab 2.5 mg, 5 mg, 10 mg	4	
VASOTEC - enalapril maleate tab 20 mg	5	
VECAMYL - mecamylamine hcl tab 2.5 mg	5	
verapamil hcl cap er 24hr 100 mg	2	
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg	2	
verapamil hcl cap er 24hr 200 mg	2	
verapamil hcl cap er 24hr 300 mg	2	
verapamil hcl cap er 24hr 360 mg	2	
verapamil hcl tab er 120 mg, 180 mg, 240 mg	2	
verapamil hcl tab 40 mg, 80 mg, 120 mg	1	
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	3	QL (30 tablets/30 days)
VYTORIN - ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	4	QL (30 tablets/30 days), ST
WEGOVY - semaglutide (weight management) tab 1.5 mg, 4 mg, 9 mg	5	PA, QL (60 tablets/180 days)
WEGOVY - semaglutide (weight management) tab 25 mg	5	PA, QL (30 tablets/30 days)
WEGOVY - semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml, 1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml	5	PA, QL (4 pens/28 days)
WELCHOL - colesevelam hcl packet for susp 3.75 gm	4	QL (30 packets/30 days)
WELCHOL - colesevelam hcl tab 625 mg	4	
WIDAPLIK - amlodipine-telmisartan-indapamide tab 1.25-10-0.625 mg, 2.5-20-1.25 mg, 5-40-2.5 mg	4	QL (30 tablets/30 days)
ZESTORETIC - lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	4	
ZESTRIL - lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg	4	
ZETIA - ezetimibe tab 10 mg	4	QL (30 tablets/30 days)
ZOCOR - simvastatin tab 10 mg, 40 mg	4	QL (45 tablets/30 days), ST
ZOCOR - simvastatin tab 20 mg	4	QL (60 tablets/30 days), ST
ZYPITAMAG - pitavastatin magnesium tab 2 mg (base equiv)	4	QL (45 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
ZYPITAMAG - pitavastatin magnesium tab 4 mg (base equiv)	4	QL (30 tablets/30 days)
Central Nervous System Agents		
ADDERALL - amphetamine-dextroamphetamine tab 5 mg, 7.5 mg	4	QL (60 tablets/30 days)
ADDERALL - amphetamine-dextroamphetamine tab 20 mg	4	QL (90 tablets/30 days)
ADDERALL XR - amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg	4	QL (30 capsules/30 days)
ADZENYS XR-ODT - amphetamine tab extended release disintegrating 3.1 mg, 6.3 mg	4	QL (60 tablets/30 days)
ADZENYS XR-ODT - amphetamine tab extended release disintegrating 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg	4	QL (30 tablets/30 days)
amphetamine sulfate tab 5 mg	2	QL (90 tablets/30 days)
amphetamine sulfate tab 10 mg	2	QL (180 tablets/30 days)
amphetamine tab extended release disintegrating 3.1 mg, 6.3 mg	2	QL (60 tablets/30 days)
amphetamine tab extended release disintegrating 9.4 mg, 12.5 mg, 15.7 mg, 18.8 mg	2	QL (30 tablets/30 days)
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg	2	QL (30 capsules/30 days)
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg	2	QL (60 tablets/30 days)
amphetamine-dextroamphetamine tab 20 mg	2	QL (90 tablets/30 days)
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg	2	QL (30 capsules/30 days)
AMPYRA - dalfampridine tab er 12hr 10 mg*†	5	PA
ARYNTA - lisdexamfetamine dimesylate oral solution 10 mg/ml	4	QL (210 mls/30 days)
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv)	2	QL (60 capsules/30 days)
atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)	2	QL (30 capsules/30 days)
ATOMOXETINE HYDROCHLORIDE - atomoxetine hcl soln 4mg/ml (base equiv)	4	QL (7 bottles/28 days)
ATONCY - atomoxetine hcl soln 4mg/ml (base equiv)	4	QL (7 bottles/28 days)
AUBAGIO - teriflunomide tab 7 mg, 14 mg*†	5	PA, QL (30 tablets/30 days)
AUSTEDO - deutetrabenazine tab 6 mg*	5	PA, QL (60 tablets/30 days)
AUSTEDO - deutetrabenazine tab 9 mg, 12 mg*	5	PA, QL (120 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 6 mg, 12 mg, 24 mg*	5	PA, QL (30 tablets/30 days)
AUSTEDO XR - deutetrabenazine tab er 24hr 18 mg, 30 mg, 36 mg, 42 mg, 48 mg	5	PA, QL (30 tablets/30 days)
AUSTEDO XR PATIENT TITRATION KIT - deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	5	PA, QL (1 kit/28 days)
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	5	PA, QL (1 kit/28 days)
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	5	PA, QL (1 kit/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
AZSTARYS - serdexmethylphenidate-dexmethylphenidate cap 26.1-5.2 mg, 39.2-7.8 mg, 52.3-10.4 mg	4	PA, QL (30 capsules/30 days)
BAFIERTAM - monomethyl fumarate capsule delayed release 95 mg*	5	PA, QL (120 capsules/30 days)
BETASERON - interferon beta-1b for inj kit 0.3 mg	5	PA, QL (15 vials/ syringes/30 days)
cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)	5	PA
clonidine hcl tab er 12hr 0.1 mg	2	QL (120 tablets/30 days)
CONCERTA - methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg	4	PA, QL (30 tablets/30 days)
CONCERTA - methylphenidate hcl tab er osmotic release (osm) 36 mg	4	PA, QL (60 tablets/30 days)
COPAXONE - glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA, QL (30 syringes/30 days)
COPAXONE - glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA, QL (12 syringes/28 days)
COTEMPLA XR-ODT - methylphenidate tab extended release disintegrating 8.6 mg	4	PA, QL (30 tablets/30 days)
COTEMPLA XR-ODT - methylphenidate tab extended release disintegrating 17.3 mg, 25.9 mg	4	PA, QL (60 tablets/30 days)
dalfampridine tab er 12hr 10 mg†	2	PA
DAYTRANA - methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr	4	PA, QL (30 patches/30 days)
DEXEDRINE - dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg	5	QL (120 capsules/30 days)
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	2	PA, QL (30 capsules/30 days)
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	2	PA, QL (60 tablets/30 days)
dextroamphetamine sulfate cap er 24hr 5 mg	2	QL (90 capsules/30 days)
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg	2	QL (120 capsules/30 days)
dextroamphetamine sulfate oral solution 5 mg/5ml	2	QL (1800 mls/30 days)
dextroamphetamine sulfate tab 2.5 mg, 5 mg, 7.5 mg, 15 mg, 20 mg	2	QL (90 tablets/30 days)
dextroamphetamine sulfate tab 10 mg	2	QL (180 tablets/30 days)
dextroamphetamine sulfate tab 30 mg	2	QL (60 tablets/30 days)
dextromethorphan hbr-quinidine sulfate cap 20-10 mg	5	PA, QL (60 capsules/30 days)
dimethyl fumarate capsule delayed release 120 mg, 240 mg	2	PA, QL (60 capsules/30 days)
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	2	PA, QL (60 capsules/30 days)
DYANAVEL XR - amphetamine extended release susp 2.5 mg/ml	4	QL (240 mls/30 days)
DYANAVEL XR - amphetamine tab extended release 5 mg, 10 mg, 15 mg, 20 mg	4	QL (30 tablets/30 days)
edaravone inj 30 mg/100ml (0.3 mg/ml)	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
EVEKEO - amphetamine sulfate tab 5 mg	4	QL (90 tablets/30 days)
EVEKEO - amphetamine sulfate tab 10 mg	4	QL (180 tablets/30 days)
fingolimod hcl cap 0.5 mg (base equiv)	2	PA, QL (30 capsules/30 days)
FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	5	PA, QL (300 tablets/30 days)
FLUOXETINE HYDROCHLORIDE - fluoxetine hcl (pmdd) tab 10 mg, 20 mg	4	
FOCALIN - dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	4	PA, QL (60 tablets/30 days)
FOCALIN XR - dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	4	PA, QL (30 capsules/30 days)
gabapentin (once-daily) tab 300 mg, 450 mg	2	PA, QL (30 tablets/30 days)
gabapentin (once-daily) tab 600 mg	2	PA, QL (90 tablets/30 days)
gabapentin (once-daily) tab 750 mg, 900 mg	2	PA, QL (60 tablets/30 days)
GILENYA - fingolimod hcl cap 0.25 mg (base equiv), 0.5 mg (base equiv)	5	PA, QL (30 capsules/30 days)
glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA, QL (30 syringes/30 days)
glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA, QL (12 syringes/28 days)
glatopa - glatiramer acetate soln prefilled syringe 20 mg/ml	5	PA, QL (30 syringes/30 days)
glatopa - glatiramer acetate soln prefilled syringe 40 mg/ml	5	PA, QL (12 syringes/28 days)
GRALISE - gabapentin (once-daily) tab 300 mg, 450 mg	3	PA, QL (30 tablets/30 days)
GRALISE - gabapentin (once-daily) tab 600 mg	3	PA, QL (90 tablets/30 days)
GRALISE - gabapentin (once-daily) tab 750 mg, 900 mg	3	PA, QL (60 tablets/30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)#	2	QL (30 tablets/30 days)
HORIZANT - gabapentin enacarbil tab er 300 mg, 600 mg	4	PA, QL (60 tablets/30 days)
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	5	PA, QL (1 pack/28 days)
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	5	PA, QL (30 capsules/30 days)
INGREZZA - valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	5	PA, QL (30 capsules/30 days)
INTUNIV - guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)#	4	QL (30 tablets/30 days)
JORNAY PM - methylphenidate hcl cap delayed er 24hr 20 mg (pm), 40 mg (pm), 60 mg (pm), 80 mg (pm), 100 mg (pm)	4	PA, QL (30 capsules/30 days)
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	5	PA, QL (4 pens/28 days)
lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	2	QL (30 capsules/30 days)
lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	2	QL (30 tablets/30 days)
LYNKUET - elinzanetant cap 60 mg	4	PA, QL (60 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)	5	PA
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	5	PA, QL (120 tablets/30 days)
MAYZENT - siponimod fumarate tab 1 mg (base equiv), 2 mg (base equiv)	5	PA, QL (30 tablets/30 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	4	PA, QL (1 pack/28 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	4	PA, QL (1 pack/28 days)
METADATE CD - methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	4	PA, QL (30 capsules/30 days)
methamphetamine hcl tab 5 mg	2	PA, QL (150 tablets/30 days)
METHYLIN - methylphenidate hcl soln 5 mg/5ml	4	PA, QL (450 mls/30 days)
METHYLIN - methylphenidate hcl soln 10 mg/5ml	4	PA, QL (900 mls/30 days)
METHYLPHENIDATE ER ODT - methylphenidate tab extended release disintegrating 8.6 mg	4	PA, QL (30 tablets/30 days)
METHYLPHENIDATE ER ODT - methylphenidate tab extended release disintegrating 17.3 mg, 25.9 mg	4	PA, QL (60 tablets/30 days)
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	2	PA, QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la), 60 mg (la), 10 mg (xr), 15 mg (xr), 20 mg (xr), 30 mg (xr), 40 mg (xr), 50 mg (xr), 60 mg (xr)	2	PA, QL (30 capsules/30 days)
methylphenidate hcl chew tab 2.5 mg, 5 mg	2	PA, QL (90 tablets/30 days)
methylphenidate hcl chew tab 10 mg	2	PA, QL (180 tablets/30 days)
methylphenidate hcl soln 5 mg/5ml	2	PA, QL (450 mls/30 days)
methylphenidate hcl soln 10 mg/5ml	2	PA, QL (900 mls/30 days)
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg, 72 mg	2	PA, QL (30 tablets/30 days)
methylphenidate hcl tab er osmotic release (osm) 36 mg	2	PA, QL (60 tablets/30 days)
methylphenidate hcl tab er 24hr 18 mg	2	PA, QL (30 tablets/30 days)
methylphenidate hcl tab er 24hr 27 mg	2	PA, QL (30 tablets/30 days)
methylphenidate hcl tab er 24hr 36 mg	2	PA, QL (60 tablets/30 days)
methylphenidate hcl tab er 24hr 54 mg	2	PA, QL (30 tablets/30 days)
methylphenidate hcl tab er 10 mg, 20 mg	2	PA, QL (90 tablets/30 days)
methylphenidate hcl tab 5 mg, 10 mg, 20 mg	2	PA, QL (90 tablets/30 days)
METHYLPHENIDATE HYDROCHLORIDE ER (OSM) - methylphenidate hcl tab er osmotic release (osm) 45 mg, 63 mg	4	PA, QL (30 tablets/30 days)
methylphenidate td patch 10 mg/9hr, 15 mg/9hr, 20 mg/9hr, 30 mg/9hr	2	PA, QL (30 patches/30 days)
milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	2	QL (1 pack/30 days)

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Drug Name	Drug Tier	Requirements/Limits
milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	2	QL (60 tablets/30 days)
MYDAYIS - amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5 mg, 25 mg, 37.5 mg, 50 mg	4	QL (30 capsules/30 days)
NUEDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	5	PA, QL (60 capsules/30 days)
ONYDA XR - clonidine hcl extended release susp 0.1 mg/ml	4	QL (120 mls/30 days)
paroxetine mesylate cap 7.5 mg (base equiv)#	2	QL (30 capsules/30 days)
PLEGRIDY - peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	5	PA, QL (2 pens/28 days)
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	5	PA, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	5	PA, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	5	PA, QL (2 pens/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	5	PA, QL (2 syringes/28 days)
PONVORY - ponesimod tab 20 mg*	5	PA, QL (30 tablets/30 days)
PONVORY 14-DAY STARTER PACK - ponesimod tab starter pack 2,3,4,5,6,7,8,9 &10 mg*	5	PA, QL (1 pack/28 days)
procentra - dextroamphetamine sulfate oral solution 5 mg/5ml	2	QL (1800 mls/30 days)
QELBREE - viloxazine hcl cap er 24hr 100 mg, 200 mg	4	QL (90 capsules/30 days)
QELBREE - viloxazine hcl cap er 24hr 150 mg	4	QL (60 capsules/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 20 mg, 40 mg	4	PA, QL (30 tablets/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 30 mg	4	PA, QL (60 tablets/30 days)
QUILLIVANT XR - methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	4	PA, QL (360 mls/30 days)
RADICAVA ORS - edaravone oral susp 105 mg/5ml*	5	PA
RADICAVA ORS STARTER KIT - edaravone oral susp 105 mg/5ml*	5	PA
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	5	PA, QL (12 syringes/28 days)
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	5	PA, QL (12 syringes/28 days)
REBIF REBIDOSE TITRATION PACK - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	5	PA, QL (1 box/28 days)
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	5	PA, QL (1 box/28 days)
RELEXXII - methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 45 mg, 54 mg, 63 mg, 72 mg	4	PA, QL (30 tablets/30 days)
RELEXXII - methylphenidate hcl tab er osmotic release (osm) 36 mg	4	PA, QL (60 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
riluzole tab 50 mg	2	
RITALIN - methylphenidate hcl tab 5 mg, 10 mg, 20 mg	4	PA, QL (90 tablets/30 days)
RITALIN LA - methylphenidate hcl cap er 24hr 10 mg (la), 30 mg (la), 40 mg (la)	4	PA, QL (30 capsules/30 days)
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	4	QL (60 tablets/30 days)
SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	4	QL (1 pack/30 days)
SKYCLARYS - omaveloxolone cap 50 mg	5	PA, QL (90 capsules/30 days)
TASCENSO ODT - fingolimod lauryl sulfate tablet disintegrating 0.25 mg, 0.5 mg	5	PA, QL (30 tablets/30 days)
TECFIDERA - dimethyl fumarate capsule delayed release 120 mg, 240 mg	5	PA, QL (60 capsules/30 days)
TECFIDERA STARTER PACK - dimethyl fumarate capsule dr starter pack 120 mg & 240 mg	5	PA, QL (60 capsules/30 days)
TEGLUTIK - riluzole susp 50 mg/10ml	5	
teriflunomide tab 7 mg, 14 mg†	5	PA, QL (30 tablets/30 days)
tetrabenazine tab 12.5 mg	2	PA, QL (240 tablets/30 days)
tetrabenazine tab 25 mg	5	PA, QL (120 tablets/30 days)
TIGLUTIK - riluzole susp 50 mg/10ml	5	
TONMYA - cyclobenzaprine hcl sublingual tab 2.8 mg	5	
VEOZAH - fezolinetant tab 45 mg	4	PA, QL (30 tablets/30 days)
VUMERITY - diroximel fumarate capsule delayed release 231 mg	5	PA, QL (120 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	4	QL (30 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	4	QL (30 tablets/30 days)
XELSTRYM - dextroamphetamine td patch 4.5 mg/9hr, 9 mg/9hr, 13.5 mg/9hr, 18 mg/9hr	4	QL (30 patches/30 days)
XENAZINE - tetrabenazine tab 12.5 mg	5	PA, QL (240 tablets/30 days)
XENAZINE - tetrabenazine tab 25 mg	5	PA, QL (120 tablets/30 days)
zenzedi - dextroamphetamine sulfate tab 2.5 mg, 5 mg, 7.5 mg, 15 mg, 20 mg	2	QL (90 tablets/30 days)
zenzedi - dextroamphetamine sulfate tab 10 mg	2	QL (180 tablets/30 days)
zenzedi - dextroamphetamine sulfate tab 30 mg	2	QL (60 tablets/30 days)
ZEPOSIA - ozanimod hcl cap 0.92 mg	5	PA, QL (30 capsules/30 days)
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	5	PA, QL (1 kit/28 days)
ZEPOSIA 7-DAY STARTER PACK - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	5	PA, QL (1 pack/28 days)
Dental and Oral Agents		
cevimeline hcl cap 30 mg	2	
chlorhexidine gluconate soln 0.12%	1	

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Drug Name	Drug Tier	Requirements/Limits
EVOXAC - cevimeline hcl cap 30 mg	4	
kourzeq - triamcinolone acetonide dental paste 0.1%	2	
oralone dental paste - triamcinolone acetonide dental paste0.1%	2	
periogard - chlorhexidine gluconate soln 0.12%	1	
pilocarpine hcl tab 5 mg, 7.5 mg	2	
SALAGEN - pilocarpine hcl tab 5 mg, 7.5 mg	4	
triamcinolone acetonide dental paste 0.1%	2	
Dermatological Agents		
ABSORICA - isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	4	PA
ABSORICA LD - isotretinoin micronized cap 8 mg, 16 mg, 24 mg, 32 mg	5	PA
ACANYA - clindamycin phosphate-benzoyl peroxide gel 1.2-2.5%	4	
accutane - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	2	PA
acitretin cap 10 mg, 17.5 mg, 25 mg	2	
ACZONE - dapsone gel 7.5%	4	
ADAPALENE - adapalene pads 0.1%	4	PA, QL (28 pads/28 days)
adapalene cream 0.1%	2	PA, QL (45 grams/30 days)
adapalene gel 0.3%	2	PA, QL (45 grams/30 days)
adapalene-benzoyl peroxide gel 0.1-2.5%, 0.3-2.5%	2	
ADBRY - tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	5	PA
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml*	5	PA
AKLIEF - trifarotene cream 0.005%	4	PA, QL (45 grams/30 days)
ala-cort - hydrocortisone cream 1%	1	
ALA-SCALP - hydrocortisone lotion 2%	4	QL (118.4 mls/30 days)
alclometasone dipropionate cream 0.05%	2	QL (120 grams/30 days)
alclometasone dipropionate oint 0.05%	2	QL (120 grams/30 days)
ALTRENO - tretinoin lotion 0.05%	4	PA, QL (45 grams/30 days)
AMCINONIDE - amcinonide cream 0.1%	4	QL (120 grams/30 days)
amnesteem - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	2	PA
AMZEEQ - minocycline hcl micronized foam 4%	4	
ARAZLO - tazarotene (acne) lotion 0.045%	4	PA, QL (45 grams/30 days)
ATRALIN - tretinoin gel 0.05%	4	PA, QL (45 grams/30 days)
azelaic acid gel 15%	2	
AZELEX - azelaic acid cream 20%	4	
BENZAMYCIN - benzoyl peroxide-erythromycin gel 5-3%	4	
benzoyl peroxide-erythromycin gel 5-3%	2	

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Drug Name	Drug Tier	Requirements/Limits
BETAMETHASONE DIPROPIONATE AUGMENTED - betamethasone dipropionate augmented gel 0.05%	3	QL (200 grams/28 days)
betamethasone dipropionate augmented cream 0.05%	2	QL (200 grams/28 days)
betamethasone dipropionate augmented lotion 0.05%	2	QL (210 mls/30 days)
betamethasone dipropionate augmented oint 0.05%	2	QL (200 grams/28 days)
betamethasone dipropionate cream 0.05%	2	QL (135 grams/30 days)
betamethasone dipropionate lotion 0.05%	2	QL (120 mls/30 days)
betamethasone dipropionate oint 0.05%	2	QL (135 grams/30 days)
betamethasone valerate aerosol foam 0.12%	2	QL (150 grams/30 days)
betamethasone valerate cream 0.1% (base equivalent)	2	QL (135 grams/30 days)
betamethasone valerate lotion 0.1% (base equivalent)	2	QL (120 mls/30 days)
betamethasone valerate oint 0.1% (base equivalent)	2	QL (135 grams/30 days)
brimonidine tartrate gel 0.33% (base equivalent)	2	
BRYHALI - halobetasol propionate lotion 0.01%	4	QL (200 grams/28 days)
CABTREO - adapalene-benzoyl peroxide-clindamycin gel 0.15-3.1-1.2%	4	
CALCIPOTRIENE - calcipotriene foam 0.005%	4	QL (120 grams/30 days)
calcipotriene cream 0.005%	2	QL (120 grams/30 days)
calcipotriene oint 0.005%	2	QL (120 grams/30 days)
calcipotriene soln 0.005% (50 mcg/ml)	2	QL (120 mls/30 days)
calcipotriene-betamethasone dipropionate oint 0.005-0.064%	2	
calcipotriene-betamethasone dipropionate susp 0.005-0.064%	2	
calcitrene - calcipotriene oint 0.005%	2	QL (120 grams/30 days)
CALCITRIOL - calcitriol oint 3 mcg/gm	4	
claravis - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	2	PA
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	2	
clindamycin phosphate-benzoyl peroxide gel 1-5%, 1.2-2.5%, 1.2-3.75%	2	
clindamycin phosphate-tretinoin gel 1.2-0.025%	2	
CLOBETASOL PROPIONATE - clobetasol propionate cream 0.025%	5	QL (200 grams/30 days)
clobetasol propionate cream 0.05%	2	QL (210 grams/28 days)
clobetasol propionate e - clobetasol propionate emollient base cream 0.05%	2	QL (210 grams/28 days)
clobetasol propionate emollient - clobetasol propionate emollient base cream 0.05%	2	QL (210 grams/28 days)
clobetasol propionate emollient base cream 0.05%	2	QL (210 grams/28 days)
clobetasol propionate emulsion foam 0.05%	2	QL (200 grams/28 days)
clobetasol propionate foam 0.05%	2	QL (200 grams/28 days)
clobetasol propionate gel 0.05%	2	QL (210 grams/28 days)

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Drug Name	Drug Tier	Requirements/Limits
clobetasol propionate lotion 0.05%	2	QL (177 mls/28 days)
clobetasol propionate oint 0.05%	2	QL (210 grams/28 days)
clobetasol propionate shampoo 0.05%	2	QL (236 mls/30 days)
clobetasol propionate soln 0.05%	2	QL (200 mls/28 days)
clobetasol propionate spray 0.05%	2	QL (236 mls/28 days)
clocortolone pivalate cream 0.1%	2	QL (135 grams/30 days)
clodan - clobetasol propionate shampoo 0.05%	2	QL (236 mls/30 days)
clotrimazole w/ betamethasone cream 1-0.05%	2	
clotrimazole w/ betamethasone lotion 1-0.05%	2	
CONDYLOX - podofilox gel 0.5%	4	
CORDRAN - flurandrenolide tape 4 mcg/sqcm	4	QL (2 boxes/30 days)
CROTAN - crotamiton lotion 10%	5	PA
dapsone gel 5%, 7.5%	2	
DERMA-SMOOTHE/FS BODY - fluocinolone acetonide oil 0.01% (body oil)	4	QL (118.28 mls/30 days)
DERMA-SMOOTHE/FS SCALP - fluocinolone acetonide oil 0.01% (scalp oil)	4	QL (118.28 mls/30 days)
desonide cream 0.05%	2	QL (120 grams/30 days)
desonide gel 0.05%	2	QL (120 grams/30 days)
desonide lotion 0.05%	2	QL (118 mls/30 days)
desonide oint 0.05%	2	QL (120 grams/30 days)
desoximetasone cream 0.05%, 0.25%	2	QL (120 grams/30 days)
desoximetasone gel 0.05%	2	QL (120 grams/30 days)
desoximetasone oint 0.05%, 0.25%	2	QL (120 grams/30 days)
desoximetasone spray 0.25%	2	QL (100 mls/30 days)
diclofenac sodium (actinic keratoses) gel 3%	2	PA
DIFFERIN PUMP - adapalene gel 0.3%	4	PA, QL (45 grams/30 days)
DIFLORASONE DIACETATE - diflorasone diacetate cream 0.05%	4	QL (120 grams/30 days)
diflorasone diacetate oint 0.05%	2	QL (120 grams/30 days)
DIPROLENE - betamethasone dipropionate augmented oint 0.05%	4	QL (200 grams/28 days)
doxepin hcl cream 5%	2	PA
doxycycline (rosacea) cap delayed release 40 mg	2	
DUOBRII - halobetasol propionate-tazarotene lotion 0.01-0.045%	3	
EMROSI - minocycline hcl micronized (rosacea) capsule er 24hr 40 mg	5	
ENSTILAR - calcipotriene-betamethasone dipropionate foam 0.005-0.064%	5	
EPIDUO FORTE - adapalene-benzoyl peroxide gel 0.3-2.5%	4	
EPSOLAY - benzoyl peroxide cream 5%	4	

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

Drug Name	Drug Tier	Requirements/Limits
EUCRISA - crisaborole oint 2%	4	PA
EURAX - crotamiton cream 10%	4	PA
evesse - hydrocortisone butyrate lotion 0.1%	2	QL (118 mls/30 days)
FILSUVEZ - birch triterpenes gel 10%	5	PA
FINACEA - azelaic acid foam 15%	4	
fluocinolone acetonide cream 0.01%, 0.025%	2	QL (120 grams/30 days)
fluocinolone acetonide oil 0.01% (body oil), 0.01% (scalp oil)	2	QL (118.28 mls/30 days)
fluocinolone acetonide oint 0.025%	2	QL (120 grams/30 days)
fluocinolone acetonide soln 0.01%	2	QL (120 mls/30 days)
fluocinonide cream 0.05%	2	QL (120 grams/30 days)
fluocinonide cream 0.1%	2	QL (240 grams/28 days)
fluocinonide emulsified base cream 0.05%	2	QL (120 grams/30 days)
fluocinonide gel 0.05%	2	QL (120 grams/30 days)
fluocinonide oint 0.05%	2	QL (120 grams/30 days)
fluocinonide soln 0.05%	2	QL (120 mls/30 days)
FLUOROURACIL - fluorouracil cream 0.5%	5	QL (30 grams/30 days)
FLUOROURACIL - fluorouracil soln 2%	3	QL (10 mls/30 days)
fluorouracil cream 5%	2	QL (40 grams/30 days)
fluorouracil soln 5%	2	QL (10 mls/30 days)
FLURANDRENOLIDE - flurandrenolide lotion 0.05%	4	QL (120 mls/30 days)
fluticasone propionate cream 0.05%	2	QL (120 grams/30 days)
fluticasone propionate lotion 0.05%	2	QL (120 mls/30 days)
fluticasone propionate oint 0.005%	2	QL (120 grams/30 days)
gentamicin sulfate cream 0.1%	2	
gentamicin sulfate oint 0.1%	2	
halcinonide cream 0.1%	2	QL (120 grams/30 days)
halcinonide soln 0.1%	2	QL (120 mls/30 days)
HALOBETASOL PROPIONATE - halobetasol propionate lotion 0.05%	4	QL (240 mls/30 days)
halobetasol propionate cream 0.05%	2	QL (200 grams/28 days)
halobetasol propionate foam 0.05%	2	QL (200 grams/28 days)
halobetasol propionate oint 0.05%	2	QL (200 grams/28 days)
HALOG - halcinonide cream 0.1%	4	QL (120 grams/30 days)
HALOG - halcinonide soln 0.1%	4	QL (120 mls/30 days)
HYDROCORTISONE - hydrocortisone lotion 2%	4	QL (118.4 mls/30 days)
HYDROCORTISONE - hydrocortisone soln 2.5%	4	QL (120 mls/30 days)
HYDROCORTISONE ACETATE - hydrocortisone acetate cream 2.5%	5	QL (56.8 grams/30 days)
hydrocortisone butyrate cream 0.1%	2	QL (135 grams/30 days)

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Drug Name	Drug Tier	Requirements/Limits
hydrocortisone butyrate lotion 0.1%	2	QL (118 mls/30 days)
hydrocortisone butyrate oint 0.1%	2	QL (135 grams/30 days)
hydrocortisone butyrate soln 0.1%	2	QL (120 mls/30 days)
hydrocortisone cream 1%	1	
hydrocortisone cream 2.5%	1	QL (454 grams/30 days)
hydrocortisone lotion 2.5%	2	QL (118 mls/30 days)
hydrocortisone oint 1%	1	
hydrocortisone oint 2.5%	1	QL (454 grams/30 days)
hydrocortisone valerate cream 0.2%	2	QL (120 grams/30 days)
hydrocortisone valerate oint 0.2%	2	QL (120 grams/30 days)
HYFTOR - sirolimus gel 0.2%*	5	PA
imiquimod cream 3.75%, 5%	2	PA
isotretinoin cap 10 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg	2	PA
ivermectin cream 1%	2	PA
KLARON - sulfacetamide sodium lotion 10% (acne)	4	
KLISYRI - tirbanibulin ointment 1%	5	QL (5 packs/30 days)
lactic acid (ammonium lactate) cream 12%	2	
lactic acid (ammonium lactate) lotion 12%	2	
lexette - halobetasol propionate foam 0.05%	2	QL (200 grams/28 days)
malathion lotion 0.5%	2	
METHOXSALEN - methoxsalen rapid cap 10 mg	5	
metronidazole cream 0.75%	2	
metronidazole gel 0.75%, 1%	2	
metronidazole lotion 0.75%	2	
MIRVASO - brimonidine tartrate gel 0.33% (base equivalent)	4	
mometasone furoate cream 0.1%	2	QL (135 grams/30 days)
mometasone furoate oint 0.1%	2	QL (135 grams/30 days)
mometasone furoate solution 0.1% (lotion)	2	QL (120 mls/30 days)
mupirocin calcium cream 2%	2	QL (30 grams/30 days)
mupirocin oint 2%	2	QL (30 grams/30 days)
NATROBA - spinosad susp 0.9%	4	
NEO-SYNALAR - neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	4	
neuac - clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	2	
NORITATE - metronidazole cream 1%	5	
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	2	
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	2	

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

Drug Name	Drug Tier	Requirements/Limits
ONEXTON - clindamycin phosphate-benzoyl peroxide gel 1.2-3.75%	4	
OPZELURA - ruxolitinib phosphate cream 1.5%	5	PA
ORACEA - doxycycline (rosacea) cap delayed release 40 mg	3	
OTEZLA - apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg	5	PA, QL (1 pack/180 days)
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg*	5	PA, QL (1 pack/180 days)
OTEZLA - apremilast tab 20 mg	5	PA, QL (60 tablets/30 days)
OTEZLA - apremilast tab 30 mg*	5	PA, QL (60 tablets/30 days)
OTEZLA XR - apremilast tab er 24hr 75 mg	5	PA, QL (30 tablets/30 days)
OTEZLA/OTEZLA XR 28 DAY TREATMENT INITIATION PACK - apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg	5	PA, QL (1 pack/180 days)
OVIDE - malathion lotion 0.5%	4	
oxymetazoline hcl cream 1%	2	
permethrin cream 5%	2	
pimecrolimus cream 1%	2	PA
podofilox gel 0.5%	2	
podofilox soln 0.5%	2	
PRUDOXIN - doxepin hcl cream 5%	4	PA
PRURADIK - crotamiton lotion 10%	5	PA
QBREXZA - glycopyrronium tosylate pad 2.4% (base equivalent)	4	PA, QL (1 box/30 days)
RETIN-A - tretinoin cream 0.025%, 0.05%, 0.1%	4	PA, QL (45 grams/30 days)
RETIN-A - tretinoin gel 0.01%, 0.025%	4	PA, QL (45 grams/30 days)
RETIN-A MICRO - tretinoin microsphere gel 0.06%	4	PA, QL (50 grams/30 days)
RETIN-A MICRO PUMP - tretinoin microsphere gel 0.08%	4	PA, QL (50 grams/30 days)
RHOFADE - oxymetazoline hcl cream 1%	4	
SANTYL - collagenase oint 250 unit/gm	3	QL (180 grams/30 days)
selenium sulfide lotion 2.5%	2	
SILVADENE - silver sulfadiazine cream 1%	4	
silver sulfadiazine cream 1%	2	
SOFDRA - sofpironium bromide gel 12.45%	4	PA, QL (1 bottle/30 days)
SOOLANTRA - ivermectin cream 1%	4	PA
SORILUX - calcipotriene foam 0.005%	4	QL (120 grams/30 days)
SPINOSAD - spinosad susp 0.9%	4	
ssd - silver sulfadiazine cream 1%	2	
sulfacetamide sodium lotion 10% (acne)	2	
SULFAMYLON - mafenide acetate cream 85 mg/gm	4	
SYNALAR - fluocinolone acetonide cream 0.025%	4	QL (120 grams/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
SYNALAR - fluocinolone acetonide oint 0.025%	4	QL (120 grams/30 days)
TACLONEX - calcipotriene-betamethasone dipropionate susp 0.005-0.064%	5	
tacrolimus oint 0.03%, 0.1%	2	PA
TAZAROTENE - tazarotene (acne) foam 0.1%	4	PA, QL (100 grams/30 days)
tazarotene cream 0.05%, 0.1%	2	PA, QL (60 grams/30 days)
tazarotene gel 0.05%, 0.1%	2	PA, QL (100 grams/30 days)
TAZORAC - tazarotene cream 0.05%, 0.1%	4	PA, QL (60 grams/30 days)
TAZORAC - tazarotene gel 0.05%, 0.1%	4	PA, QL (100 grams/30 days)
TEXACORT - hydrocortisone soln 2.5%	4	QL (120 mls/30 days)
TOPICORT - desoximetasone oint 0.05%	4	QL (120 grams/30 days)
TOPICORT - desoximetasone spray 0.25%	4	QL (100 mls/30 days)
tovet - clobetasol propionate emulsion foam 0.05%	2	QL (200 grams/28 days)
tretinoin cream 0.025%, 0.05%, 0.1%	2	PA, QL (45 grams/30 days)
tretinoin gel 0.01%, 0.025%, 0.05%	2	PA, QL (45 grams/30 days)
tretinoin microsphere gel 0.04%	2	PA, QL (50 grams/30 days)
tretinoin microsphere gel 0.06%, 0.08%	2	PA, QL (50 grams/30 days)
tretinoin microsphere gel 0.1%	2	PA, QL (50 grams/30 days)
triamcinolone acetonide aerosol soln 0.147 mg/gm	2	QL (126 grams/30 days)
triamcinolone acetonide cream 0.025%	1	QL (454 grams/30 days)
triamcinolone acetonide cream 0.1%, 0.5%	2	QL (454 grams/30 days)
triamcinolone acetonide lotion 0.025%, 0.1%	2	QL (120 mls/30 days)
triamcinolone acetonide oint 0.025%, 0.1%	2	QL (454 grams/30 days)
triamcinolone acetonide oint 0.05%	2	QL (430 grams/30 days)
triamcinolone acetonide oint 0.5%	2	QL (120 grams/30 days)
triderm - triamcinolone acetonide cream 0.5%	2	QL (454 grams/30 days)
trilitas - tazarotene gel 0.1%	2	PA, QL (100 grams/30 days)
TWYNEO - tretinoin-benzoyl peroxide cream 0.1-3%	4	
ULTRAVATE - halobetasol propionate lotion 0.05%	4	QL (240 mls/30 days)
VANOS - fluocinonide cream 0.1%	5	QL (240 grams/28 days)
VECTICAL - calcitriol oint 3 mcg/gm	4	
VEREGEN - sinecatechins oint 15%	5	
VTAMA - tapinarof cream 1%	5	PA
WINLEVI - clascoterone cream 1%	4	PA
ZELSUVMI - berdazimer sodium gel 10.3%	5	PA
zenatane - isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg	2	PA
ZIANA - clindamycin phosphate-tretinoin gel 1.2-0.025%	4	
ZILXI - minocycline hcl micronized foam 1.5%	4	
ZONALON - doxepin hcl cream 5%	4	PA

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Drug Name	Drug Tier	Requirements/Limits
ZORYVE - roflumilast cream 0.05%, 0.15%, 0.3%	4	PA
ZORYVE - roflumilast foam 0.3%	4	PA
ZYCLARA - imiquimod cream 3.75%	5	PA
ZYCLARA PUMP - imiquimod cream 3.75%	5	PA
Electrolytes/Minerals/Metals/Vitamins		
CARBAGLU - carglumic acid soluble tab 200 mg*	5	PA
carglumic acid soluble tab 200 mg	5	PA
CHEMET - succimer cap 100 mg	4	
CLINIMIX E 2.75%/DEXTROSE 5% - amino acid electrolyte w/cal infusion 2.75% in d5w	4	BD
CLINIMIX E 4.25%/DEXTROSE 10% - amino acid electrolyte w/cal infusion 4.25% in d10w	4	BD
CLINIMIX E 4.25%/DEXTROSE 5% - amino acid electrolyte w/cal infusion 4.25% in d5w	4	BD
CLINIMIX E 5%/DEXTROSE 15% - amino acid electrolyte w/cal infusion 5% in d15w	4	BD
CLINIMIX E 5%/DEXTROSE 20% - amino acid electrolyte w/cal infusion 5% in d20w	4	BD
CLINIMIX 4.25%/DEXTROSE 10% - amino acid infusion 4.25% in d10w	4	BD
CLINIMIX 4.25%/DEXTROSE 5% - amino acid infusion 4.25% in d5w	4	BD
CLINIMIX 5%/DEXTROSE 15% - amino acid infusion 5% in d15w	4	BD
CLINIMIX 5%/DEXTROSE 20% - amino acid infusion 5% in d20w	4	BD
CLINOLIPID - fat emulsion plant based (soy/olive) iv emulsion 20%	4	BD
CUVRIOR - trientine tetrahydrochloride tab 300 mg	5	PA, QL (300 tablets/30 days)
deferasirox granules packet 90 mg, 180 mg, 360 mg†	5	PA
deferasirox tab for oral susp 125 mg†	2	PA
deferasirox tab for oral susp 250 mg, 500 mg†	5	PA
deferasirox tab 90 mg, 180 mg†	2	PA
deferasirox tab 360 mg†	4	PA
deferiprone tab 500 mg, 1000 mg†	5	PA
dextrose inj 10%	1	
dextrose inj 5%	2	
DEXTROSE 10%/SODIUM CHLORIDE 0.2% - dextrose 10% w/ sodium chloride 0.2%	4	
DEXTROSE 10%/SODIUM CHLORIDE 0.45% - dextrose 10% w/ sodium chloride 0.45%	4	
dextrose 2.5% w/ sodium chloride 0.45%	2	
dextrose 5% w/ sodium chloride 0.2%	1	
dextrose 5% w/ sodium chloride 0.45%	2	

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Drug Name	Drug Tier	Requirements/Limits
dextrose 5% w/ sodium chloride 0.9%	2	
electrolyte-a solution	2	
electrolyte-148 solution	2	
EXJADE - deferasirox tab for oral susp 125 mg, 250 mg, 500 mg*†	5	PA
FERRIPROX - deferiprone oral soln 100 mg/ml	5	PA
FERRIPROX - deferiprone tab 1000 mg†	5	PA
FERRIPROX TWICE-A-DAY - deferiprone (twice daily) tab 1000 mg†	5	PA
INTRALIPID - fat emulsion plant based (soy) iv emulsion 20%, 30%	4	BD
ISOLYTE-P/DEXTROSE 5% - electrolyte-p in d5w soln	4	
ISOLYTE-S - electrolyte-s solution	4	
ISOLYTE-S PH 7.4 - electrolyte-s (ph 7.4) solution	4	
JADENU - deferasirox tab 90 mg, 180 mg, 360 mg*†	5	PA
JADENU SPRINKLE - deferasirox granules packet 90 mg, 180 mg, 360 mg*†	5	PA
JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	5	PA
JYNARQUE - tolvaptan tab 15 mg, 30 mg	5	PA
kcl 20 meq/l (0.149%) in nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	2	
kcl 20 meq/l (0.15%) in nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in nacl 0.9% inj	2	
kcl 40 meq/l (0.3%) in nacl 0.9% inj	2	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.225% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj	2	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	2	
kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj	2	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj	2	
kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj	2	
kionex - sodium polystyrene sulfonate susp 15 gm/60ml	2	
klor-con - potassium chloride powder packet 20 meq	2	
klor-con m10 - potassium chloride microencapsulated crys ertab 10 meq	2	
klor-con m15 - potassium chloride microencapsulated crys ertab 15 meq	2	
klor-con m20 - potassium chloride microencapsulated crys ertab 20 meq	2	
klor-con 8 - potassium chloride tab er 8 meq (600 mg)	2	
klor-con 10 - potassium chloride tab er 10 meq	2	

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Drug Name	Drug Tier	Requirements/Limits
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	3	
magnesium sulfate inj 50%	2	
multiple electrolytes injection type 1 - electrolyte-a solution	2	
NUTRILIPID - fat emulsion plant based (soy) iv emulsion 20%	4	BD
PLASMA-LYTE A - electrolyte-a solution	4	
PLASMA-LYTE 148 - electrolyte-148 solution	4	
POKONZA - potassium chloride oral soln 5% (10 meq/15ml)	5	
POKONZA - potassium chloride powder packet 10 meq, 15 meq	5	
potassium chloride cap er 8 meq, 10 meq	2	
POTASSIUM CHLORIDE ER - potassium chloride tab er 15 meq	4	
potassium chloride inj 10 meq/100ml	2	
potassium chloride inj 20 meq/100ml	2	
potassium chloride inj 40 meq/100ml	2	
potassium chloride inj 2 meq/ml, 10 meq/50ml, 20 meq/50ml	2	
potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq	2	
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	2	
potassium chloride powder packet 20 meq	2	
potassium chloride tab er 8 meq (600 mg), 10 meq, 20 meq (1500 mg)	2	
potassium chloride 20 meq/l (0.15%) in dextrose 5% inj	2	
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS - potassium chloride 20 meq/l (0.15%) in d5w lactated ringers	3	
potassium citrate tab er 5 meq (540 mg), 10 meq (1080 mg), 15 meq (1620 mg)	2	
PREMASOL - amino acid infusion 10%	4	BD
SAMSCA - tolvaptan (hyponatremia) tab 15 mg, 30 mg	5	PA
sodium chloride irrigation soln 0.9%	2	
sodium chloride iv soln 0.45%, 0.9%, 3%, 5%	2	
sodium chloride preservative free (pf) inj 0.9%	2	
sodium polystyrene sulfonate powder	2	
sodium polystyrene sulfonate susp 15 gm/60ml	2	
sps - sodium polystyrene sulfonate rectal susp 30 gm/120ml	2	
sps - sodium polystyrene sulfonate susp 15 gm/60ml	2	
SYPRINE - trientine hcl cap 250 mg†	5	PA, QL (240 capsules/30 days)
tolvaptan (hyponatremia) tab 15 mg, 30 mg	5	PA
tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	5	PA

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Drug Name	Drug Tier	Requirements/Limits
tolvaptan tab 15 mg, 30 mg	5	PA
TPN ELECTROLYTES - parenteral electrolyte conc	4	BD
TRAVASOL - amino acid infusion 10%	4	BD
trientine hcl cap 250 mg†	5	PA, QL (240 capsules/30 days)
TRIENTINE HYDROCHLORIDE - trientine hcl cap 500 mg	5	PA, QL (120 capsules/30 days)
TROPHAMINE - amino acid infusion 10%	4	BD
UROCIT-K 10 - potassium citrate tab er 10 meq (1080 mg)	4	
UROCIT-K 15 - potassium citrate tab er 15 meq (1620 mg)	4	
VELTASSA - patiromer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	3	
Gastrointestinal Agents		
ACIPHEX - rabeprazole sodium ec tab 20 mg	4	QL (30 tablets/30 days), ST
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv)	2	PA, QL (60 tablets/30 days)
AMITIZA - lubiprostone cap 8 mcg	4	QL (120 capsules/30 days)
AMITIZA - lubiprostone cap 24 mcg	4	QL (60 capsules/30 days)
amoxicil cap &clarithro tab &lansopraz cap dr 500 &500 &30mg	2	
bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg	2	
CARAFATE - sucralfate tab 1 gm	4	
cimetidine hcl soln 300 mg/5ml	2	
cimetidine tab 200 mg, 300 mg, 400 mg, 800 mg	2	
CLENPIQ - sod picosulfate-mg ox-citric ac sol 10 mg-3.5 gm-12 gm/175ml	4	
constulose - lactulose solution 10 gm/15ml	2	
CUVPOSA - glycopyrrolate oral soln 1 mg/5ml	4	
CYTOTEC - misoprostol tab 100 mcg, 200 mcg	4	
DEXILANT - dexlansoprazole cap delayed release 30 mg, 60 mg	4	QL (30 capsules/30 days)
dexlansoprazole cap delayed release 30 mg, 60 mg	2	QL (30 capsules/30 days)
dicyclomine hcl cap 10 mg#	2	PA (>=65 yr)
dicyclomine hcl oral soln 10 mg/5ml#	2	PA (>=65 yr)
dicyclomine hcl tab 20 mg#	2	PA (>=65 yr)
DICYCLOMINE HYDROCHLORIDE - dicyclomine hcl tab 40 mg	4	PA (>=65 yr)
diphenoxylate w/ atropine tab 2.5-0.025 mg#	2	PA (>=65 yr)
DIPHENOXYLATE/ATROPINE - diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml#	4	PA (>=65 yr)
enulose - lactulose (encephalopathy) solution 10 gm/15ml	2	
esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq)	2	QL (30 capsules/30 days)
esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg	2	QL (30 packets/30 days)
esomeprazole magnesium for delayed release susp pack 2.5 mg	2	QL (30 packets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
famotidine for susp 40 mg/5ml	2	
famotidine tab 20 mg, 40 mg	1	
GATTEX - teduglutide (rdna) for inj kit 5 mg*	5	PA
gavilyte-c - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	2	
gavilyte-g - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	
gavilyte-n/flavor pack - peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
generlac - lactulose (encephalopathy) solution 10 gm/15ml	2	
GIMOTI - metoclopramide hcl nasal spray 15 mg/act*	5	
GLYCATE - glycopyrrolate tab 1.5 mg	4	
GLYCOPYRROLATE - glycopyrrolate tab 1.5 mg	5	
glycopyrrolate oral soln 1 mg/5ml	2	
glycopyrrolate tab 1 mg, 2 mg	2	
GOLYTELY - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	4	
IBSRELA - tenapanor hcl tab 50 mg	5	QL (60 tablets/30 days)
IQIRVO - elafibranor tab 80 mg	5	PA, QL (30 tablets/30 days)
KONVOMEP - omeprazole-sodium bicarbonate for oral susp 2-84 mg/ml	4	QL (600 mls/30 days)
kristalose - lactulose oral crystal packet 10 gm, 20 gm	2	
lactulose (encephalopathy) solution 10 gm/15ml	2	
lactulose oral crystal packet 10 gm, 20 gm	2	
lactulose solution 10 gm/15ml	2	
lansoprazole cap delayed release 15 mg, 30 mg	2	QL (30 capsules/30 days)
lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg	2	QL (30 tablets/30 days)
LINZESS - linaclotide cap 72 mcg, 145 mcg, 290 mcg	3	QL (30 capsules/30 days)
LIVMARLI - maralixibat chloride oral soln 9.5 mg/ml, 19 mg/ml*	5	PA
LIVMARLI - maralixibat chloride tab 10 mg, 15 mg, 20 mg, 30 mg*	5	PA
LOMOTIL - diphenoxylate w/ atropine tab 2.5-0.025 mg#	4	PA (>=65 yr)
loperamide hcl cap 2 mg	2	
LOTRONEX - alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv)	5	PA, QL (60 tablets/30 days)
lubiprostone cap 8 mcg	2	QL (120 capsules/30 days)
lubiprostone cap 24 mcg	2	QL (60 capsules/30 days)
methscopolamine bromide tab 2.5 mg, 5 mg#	2	
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	2	
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	1	
misoprostol tab 100 mcg, 200 mcg	2	

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Drug Name	Drug Tier	Requirements/Limits
MOTEGRITY - prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent)	4	QL (30 tablets/30 days)
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	3	QL (30 tablets/30 days)
MOVIPREP - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	4	
MYALEPT - metreleptin for subcutaneous inj 11.3 mg*	5	PA
MYTESI - crofelemer tab delayed release 125 mg	5	
NEXIUM - esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq)	4	QL (30 capsules/30 days), ST
NEXIUM - esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg	4	QL (30 packets/30 days), ST
NEXIUM - esomeprazole magnesium for delayed release susp pack 2.5 mg	4	QL (30 packets/30 days), ST
nizatidine cap 150 mg	2	
nizatidine cap 300 mg	2	
omeprazole cap delayed release 10 mg	1	QL (30 capsules/30 days)
omeprazole cap delayed release 20 mg, 40 mg	1	QL (60 capsules/30 days)
omeprazole-sodium bicarbonate cap 20-1100 mg, 40-1100 mg	2	QL (30 capsules/30 days)
omeprazole-sodium bicarbonate powd pack for susp 20-1680 mg, 40-1680 mg	5	QL (30 packs/30 days)
pantoprazole sodium ec tab 20 mg (base equiv)	1	QL (30 tablets/30 days)
pantoprazole sodium ec tab 40 mg (base equiv)	1	QL (60 tablets/30 days)
pantoprazole sodium for delayed release susp packet 40 mg	2	QL (30 packs/30 days)
peg-3350/electrolytes/ascorbate - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	1	
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1	
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	1	
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	1	
PEPCID - famotidine tab 20 mg, 40 mg	4	
PREVACID - lansoprazole cap delayed release 30 mg	4	QL (30 capsules/30 days), ST
PREVACID SOLUTAB - lansoprazole tab delayed release orally disintegrating 15 mg, 30 mg	4	QL (30 tablets/30 days), ST
PRILOSEC - omeprazole magnesium for delayed release susp packet 2.5 mg	4	QL (90 packets/30 days)
PRILOSEC - omeprazole magnesium for delayed release susp packet 10 mg	4	QL (120 packets/30 days)
PROTONIX - pantoprazole sodium ec tab 20 mg (base equiv)	4	QL (30 tablets/30 days), ST
PROTONIX - pantoprazole sodium ec tab 40 mg (base equiv)	4	QL (60 tablets/30 days), ST
PROTONIX - pantoprazole sodium for delayed release susp packet 40 mg	4	QL (30 packs/30 days), ST

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Drug Name	Drug Tier	Requirements/Limits
prucalopride succinate tab 1 mg (base equivalent), 2 mg (base equivalent)	2	QL (30 tablets/30 days)
PYLERA - bismuth subcit-metronidazole-tetracycline cap 140-125-125 mg	4	
rabeprazole sodium ec tab 20 mg	2	QL (30 tablets/30 days)
RANITIDINE HYDROCHLORIDE - ranitidine hcl tab 150 mg, 300 mg	4	
REGLAN - metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	4	
RELISTOR - methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)	5	PA, QL (18 mls/30 days)
RELISTOR - methylnaltrexone bromide soln pref syr 8 mg/0.4ml, 12 mg/0.6ml	5	PA, QL (30 syringes/30 days)
RELISTOR - methylnaltrexone bromide tab 150 mg	5	PA, QL (90 tablets/30 days)
RELTONE - ursodiol cap 200 mg	5	
RELTONE - ursodiol cap 400 mg	4	
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	2	
sucralfate susp 1 gm/10ml	2	
sucralfate tab 1 gm	2	
SUFLAVE - peg 3350-kcl-nacl-na sulfate-mag sulfate for soln 178.7 gm	4	
SUPREP BOWEL PREP KIT - sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	4	
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	4	
SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	4	PA, QL (30 tablets/30 days)
TALICIA - amoxicillin-rifabutin-omeprazole cap dr 250-12.5-10 mg	4	
TRULANCE - plecanatide tab 3 mg	4	QL (30 tablets/30 days)
URSO FORTE - ursodiol tab 500 mg	4	
URSODIOL - ursodiol cap 200 mg, 400 mg	5	
ursodiol cap 300 mg	2	
ursodiol tab 250 mg, 500 mg	2	
URSOLIGN - ursodiol cap 150 mg	5	
VIBERZI - eluxadoline tab 75 mg, 100 mg	5	PA, QL (60 tablets/30 days)
VOQUEZNA - vonoprazan fumarate tab 10 mg, 20 mg	4	QL (30 tablets/30 days)
VOQUEZNA DUAL PAK - amoxicillin cap 500 mg & vonoprazan tab 20 mg therapy pack	4	
VOQUEZNA TRIPLE PAK - amoxicillin cap & clarithromycin tab & vonoprazan tab pack	4	
VOWST - fecal microbiota spores, live-brpk caps	5	PA, QL (12 capsules/56 days)
XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	5	PA, QL (90 tablets/30 days)
XIFAXAN - rifaximin tab 550 mg	5	PA, QL (90 tablets/30 days)

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Drug Name	Drug Tier	Requirements/Limits
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
AQNEURSA - levacetylleucine for susp packet 1 gm	5	PA, QL (120 packets/30 days)
AQVESME - mitapivat sulfate tab 100 mg	5	PA, QL (60 tablets/30 days)
ARALAST NP - alpha1-proteinase inhibitor (human) for iv soln 500 mg, 1000 mg*	5	PA
ATTRUBY - acoramidis hcl tab pack 356 mg (712 mg twice daily)	5	PA, QL (112 tablets/28 days)
betaine powder for oral solution	5	
BUPHENYL - sodium phenylbutyrate oral powder 3 gm/teaspoonful	5	PA
BUPHENYL - sodium phenylbutyrate tab 500 mg	5	PA
BYLVAY - odevixibat cap 400 mcg, 1200 mcg*	5	PA
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 200 mcg, 600 mcg*	5	PA
CARNITOR - levocarnitine oral soln 1 gm/10ml (10%)	4	
CARNITOR - levocarnitine tab 330 mg	4	
CARNITOR SF - levocarnitine oral soln 1 gm/10ml (10%)	4	
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	5	PA, QL (60 capsules/30 days)
CEREZYME - imiglucerase for inj 400 unit*	5	PA
CHOLBAM - cholic acid cap 50 mg, 250 mg	5	
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	3	
cromolyn sodium oral conc 100 mg/5ml	2	
CRYSVITA - burosumab-twza inj 10 mg/ml, 20 mg/ml, 30 mg/ml	5	PA
CYSTADANE - betaine powder for oral solution	5	
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg*	4	PA
DAYBUE - trofinetide oral soln 200 mg/ml	5	PA, QL (8 bottles/30 days)
DAYBUE STIX - trofinetide oral powder packet 5000 mg, 6000 mg	5	PA, QL (120 packets/30 days)
DAYBUE STIX - trofinetide oral powder packet 8000 mg	5	PA, QL (60 packets/30 days)
DOJOLVI - triheptanoin oral liquid 100%	5	
DUVYZAT - givinostat hcl oral susp 8.86 mg/ml	5	PA, QL (3 bottles/30 days)
ELELYSO - taliglucerase alfa for inj 200 unit*	5	PA
ENDARI - glutamine (sickle cell) powd pack 5 gm*	5	PA, QL (180 packets/30 days)
EVRYSDI - risdiplam for soln 0.75 mg/ml	5	PA, QL (240 mls/30 days)
EVRYSDI - risdiplam tab 5 mg	5	PA, QL (30 tablets/30 days)
GALAFOLD - migalastat hcl cap 123 mg (base equivalent)	5	PA, QL (14 capsules/28 days)
GASTROCROM - cromolyn sodium oral conc 100 mg/5ml	4	
GLASSIA - alpha1-proteinase inhibitor (human) inj 1000 mg/50ml	5	PA
GLASSIA - alpha1-proteinase inhibitor (human) iv soln 4 gm/200ml, 5 gm/250ml	5	PA
glutamine (sickle cell) powd pack 5 gm	5	PA, QL (180 packets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
glycerol phenylbutyrate liquid 1.1 gm/ml	5	PA
HARLIKU - nitisinone (aku) tab 2 mg	5	
javygtor - sapropterin dihydrochloride powder packet 100 mg, 500 mg†	5	PA
javygtor - sapropterin dihydrochloride tab 100 mg†	5	PA
JOENJA - leniolisib phosphate tab 70 mg	5	PA, QL (60 tablets/30 days)
KUVAN - sapropterin dihydrochloride powder packet 100 mg, 500 mg*†	5	PA
KUVAN - sapropterin dihydrochloride tab 100 mg*†	5	PA
KYGEVVI - doxecitine-doxribtimine powder pack 2-2 gm	5	
levocarnitine oral soln 1 gm/10ml (10%)	2	
levocarnitine tab 330 mg	2	
LIVDELZI - seladelpar lysine cap 10 mg	5	PA, QL (30 capsules/30 days)
LOARGYS - pegzilarginase-nbln inj soln 2 mg/0.4ml (5 mg/ml)	5	PA
*miglustat cap 100 mg**	5	PA, QL (180 capsules/30 days)
MIPLYFFA - arimoclomol citrate cap 47 mg, 62 mg, 93 mg, 124 mg	5	PA, QL (90 capsules/30 days)
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg	5	
NITYR - nitisinone tab 2 mg, 5 mg, 10 mg*	5	
OLPRUVA - sodium phenylbutyrate packet for susp 2 gm therapy pack	5	PA
OLPRUVA - sodium phenylbutyrate packet for susp 3 gm therapy pack	5	PA
OLPRUVA - sodium phenylbutyrate packet for susp 4 gm therapy pack	5	PA
OLPRUVA - sodium phenylbutyrate packet for susp 5 gm therapy pack	5	PA
OLPRUVA - sodium phenylbutyrate packet for susp 6 gm therapy pack	5	PA
OLPRUVA - sodium phenylbutyrate packet for susp 6.67 gm therapy pack	5	PA
OPFOLDA - miglustat (gaa deficiency) cap 65 mg	4	
ORFADIN - nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg*	5	
ORFADIN - nitisinone susp 4 mg/ml*	5	
OXLUMO - lumasiran sodium subcutaneous soln 94.5 mg/0.5ml	5	PA
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	5	PA
PANCREAZE - pancrelipase (lip-prot-amyl) dr cap 2600-8800-15200 unit, 4200-14200-24600 unit, 10500-35500-61500 unit, 16800-56800-98400 unit, 21000-54700-83900 unit	4	
PANCREAZE - pancrelipase (lip-prot-amyl) dr cap 37000-97300-149900 unit	5	

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

Drug Name	Drug Tier	Requirements/Limits
PERTZYE - pancrelipase (lip-prot-amyl) dr cap 4000-14375-15125 unit, 8000-28750-30250 unit, 16000-57500-60500 unit	4	
PERTZYE - pancrelipase (lip-prot-amyl) dr cap 24000-86250-90750 unit	5	
PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm*	5	PA
PROCYSBI - cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	5	PA
PROCYSBI - cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	5	PA
PROLASTIN-C - alpha1-proteinase inhibitor (human) inj 1000 mg/20ml*	5	PA
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg*	5	PA, QL (56 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg*	5	PA, QL (7 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg*	5	PA, QL (14 tablets/28 days)
RAVICTI - glycerol phenylbutyrate liquid 1.1 gm/ml*	5	PA
REVCOVI - elapegademase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)*	5	PA
REZDIFFRA - resmetirom 60 mg tab	5	PA, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 80 mg tab	5	PA, QL (30 tablets/30 days)
REZDIFFRA - resmetirom 100 mg tab	5	PA, QL (30 tablets/30 days)
RIVFLOZA - nedosiran sodium subcutaneous soln pref syr 128 mg/0.8ml, 160 mg/ml	5	PA
RIVFLOZA - nedosiran sodium subcutaneous soln 80 mg/0.5ml	5	PA
sapropterin dihydrochloride powder packet 100 mg, 500 mg†	5	PA
sapropterin dihydrochloride tab 100 mg†	5	PA
SEPHIENCE - sepiapterin powder packet 250 mg, 1000 mg	5	PA
sodium phenylbutyrate oral powder 3 gm/teaspoonful	5	PA
sodium phenylbutyrate tab 500 mg	5	PA
SOHONOS - palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	5	
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml*	5	PA
SUCRAID - sacrosidase soln 8500 unit/ml*	5	PA
VIOKACE - pancrelipase (lip-prot-amyl) tab 10440-39150-39150 unit	4	
VIOKACE - pancrelipase (lip-prot-amyl) tab 20880-78300-78300 unit	5	
VOXZOGO - vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg*	5	PA, QL (30 vials/30 days)
VOYXACT - sibeprenlimab-szsi subcutaneous soln pref syringe 400 mg/2ml	5	PA, QL (1 syringe/28 days)
VPRIV - velaglucerase alfa for inj 400 unit	5	PA

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Drug Name	Drug Tier	Requirements/Limits
VYKAT XR - diazoxide choline tab er 24hr 25 mg	5	PA, QL (120 tablets/30 days)
VYKAT XR - diazoxide choline tab er 24hr 75 mg	5	PA, QL (210 tablets/30 days)
VYKAT XR - diazoxide choline tab er 24hr 150 mg	5	PA, QL (90 tablets/30 days)
VYNDAMAX - tafamidis cap 61 mg	5	PA, QL (30 capsules/30 days)
WAINUA - eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	5	PA
WELIREG - belzutifan tab 40 mg*†	5	PA, QL (90 tablets/30 days)
*yargesa - miglustat cap 100 mg**	5	PA, QL (180 capsules/30 days)
YUVIWEL - navepegritide for subcutaneous inj 1.3 mg, 2.8 mg	5	PA, QL (4 vials/28 days)
YUVIWEL - navepegritide for subcutaneous inj 5.5 mg	5	PA, QL (8 vials/28 days)
ZAVESCA - miglustat cap 100 mg*	5	PA, QL (180 capsules/30 days)
zelvysia - sapropterin dihydrochloride powder packet 100 mg, 500 mg†	5	PA
ZEMAIRA - alpha1-proteinase inhibitor (human) for iv soln 1000 mg, 4000 mg, 5000 mg*	5	PA
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	3	
ZOKINVY - lonafarnib cap 50 mg, 75 mg	5	PA, QL (120 capsules/30 days)
Genitourinary Agents		
alfuzosin hcl tab er 24hr 10 mg	1	QL (30 tablets/30 days)
AVODART - dutasteride cap 0.5 mg	4	QL (30 capsules/30 days)
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	2	
CARDURA XL - doxazosin mesylate tab er 24 hr 4 mg (base equiv), 8 mg (base equiv)	4	QL (30 tablets/30 days)
CIALIS - tadalafil tab 5 mg	4	PA, QL (30 tablets/30 days)
CUPRIMINE - penicillamine cap 250 mg	5	
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)	2	QL (30 tablets/30 days)
DEPEN TITRATABS - penicillamine tab 250 mg	5	
dutasteride cap 0.5 mg	2	QL (30 capsules/30 days)
dutasteride-tamsulosin hcl cap 0.5-0.4 mg	2	QL (30 capsules/30 days)
ELMIRON - pentosan polysulfate sodium caps 100 mg	4	PA
fesoterodine fumarate tab er 24hr 4 mg, 8 mg	2	QL (30 tablets/30 days)
finasteride tab 5 mg	1	QL (30 tablets/30 days)
GEMTESA - vibegron tab 75 mg	4	QL (30 tablets/30 days)
JALYN - dutasteride-tamsulosin hcl cap 0.5-0.4 mg	5	QL (30 capsules/30 days)
LILETTA - levonorgestrel iud 20.1 mcg/day (initial) (52 mg total)	3	
LITHOSTAT - acetohydroxamic acid tab 250 mg	4	

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Drug Name	Drug Tier	Requirements/Limits
MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml	3	QL (3 bottles/28 days)
MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg	3	QL (30 tablets/30 days)
NEXPLANON - etonogestrel subdermal implant 68 mg	3	
oxybutynin chloride solution 5 mg/5ml	2	QL (600 mls/30 days)
oxybutynin chloride tab er 24hr 5 mg	2	QL (30 tablets/30 days)
oxybutynin chloride tab er 24hr 10 mg	2	QL (90 tablets/30 days)
oxybutynin chloride tab er 24hr 15 mg	2	QL (60 tablets/30 days)
oxybutynin chloride tab 2.5 mg	2	QL (90 tablets/30 days)
oxybutynin chloride tab 5 mg	2	QL (120 tablets/30 days)
OXYTROL - oxybutynin td patch twice weekly 3.9 mg/24hr	4	QL (8 patches/28 days)
penicillamine cap 250 mg	5	
penicillamine tab 250 mg	5	
PHEXX - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	4	
PROSCAR - finasteride tab 5 mg	4	QL (30 tablets/30 days)
silodosin cap 4 mg, 8 mg	2	QL (30 capsules/30 days)
SKYLA - levonorgestrel releasing iud 14 mcg/day (13.5 mg total)	4	
solifenacin succinate tab 5 mg, 10 mg	2	QL (30 tablets/30 days)
tadalafil tab 2.5 mg, 5 mg	1	PA, QL (30 tablets/30 days)
tamsulosin hcl cap 0.4 mg	1	QL (60 capsules/30 days)
THIOLA - tiopronin tab 100 mg	5	
THIOLA EC - tiopronin tab delayed release 100 mg, 300 mg	5	
tiopronin tab delayed release 100 mg, 300 mg	5	
tiopronin tab 100 mg	5	
tolterodine tartrate cap er 24hr 2 mg, 4 mg	2	QL (30 capsules/30 days)
tolterodine tartrate tab 1 mg, 2 mg	2	QL (60 tablets/30 days)
TOVIAZ - fesoterodine fumarate tab er 24hr 4 mg, 8 mg	4	QL (30 tablets/30 days), ST
trospium chloride cap er 24hr 60 mg	2	QL (30 capsules/30 days)
trospium chloride tab 20 mg	2	QL (60 tablets/30 days)
UROXATRAL - alfuzosin hcl tab er 24hr 10 mg	4	QL (30 tablets/30 days)
venxxiva - tiopronin tab delayed release 100 mg, 300 mg	5	
VESICARE - solifenacin succinate tab 5 mg, 10 mg	4	QL (30 tablets/30 days)
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ACTHAR - corticotropin inj gel 80 unit/ml*	5	PA
ACTHAR GEL - corticotropin subcutaneous gel pen-injector 40 unit/0.5ml, 80 unit/ml	5	PA
AGAMREE - vamorolone oral susp 40 mg/ml	5	PA, QL (3 bottles/30 days)
ALKINDI SPRINKLE - hydrocortisone cap sprinkle 0.5 mg*	4	

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

Drug Name	Drug Tier	Requirements/Limits
ALKINDI SPRINKLE - hydrocortisone cap sprinkle 1 mg, 2 mg, 5 mg*	5	
CORTEF - hydrocortisone tab 5 mg, 10 mg, 20 mg	4	
CORTROPHIN - corticotropin inj gel 80 unit/ml*	5	PA
CORTROPHIN - corticotropin subcutaneous gel prefilled syringe 80 unit/ml*	5	PA
CORTROPHIN - corticotropin subcutaneous gel prefilled syr 40 unit/0.5ml*	5	PA
CRENESSITY - crinecerfont cap 25 mg, 50 mg, 100 mg	5	PA, QL (60 capsules/30 days)
CRENESSITY - crinecerfont oral soln 50 mg/ml	5	PA, QL (4 bottles/30 days)
deflazacort susp 22.75 mg/ml	5	PA
deflazacort tab 6 mg, 18 mg, 30 mg, 36 mg	5	PA
dexamethasone elixir 0.5 mg/5ml	2	
dexamethasone soln 0.5 mg/5ml	2	
dexamethasone tab therapy pack 1.5 mg (35)	2	
dexamethasone tab therapy pack 1.5 mg (51)	2	
dexamethasone tab therapy pack 1.5 mg (21)	2	
dexamethasone tab 0.5 mg	1	
dexamethasone tab 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	2	
DEXLYT - dexamethasone tab 0.25 mg	5	
EMFLAZA - deflazacort susp 22.75 mg/ml	5	PA
EMFLAZA - deflazacort tab 6 mg, 18 mg, 30 mg, 36 mg	5	PA
fludrocortisone acetate tab 0.1 mg	2	
HEMADY - dexamethasone tab 20 mg	4	
hidex 6-day - dexamethasone tab therapy pack 1.5 mg (21)	2	
hydrocortisone tab 5 mg, 10 mg, 20 mg	2	
jaythari - deflazacort susp 22.75 mg/ml	5	PA
jaythari - deflazacort tab 6 mg, 18 mg, 30 mg, 36 mg	5	PA
KHINDIVI - hydrocortisone oral soln 1 mg/ml	5	
kymbee - deflazacort susp 22.75 mg/ml	5	PA
kymbee - deflazacort tab 6 mg, 18 mg, 30 mg, 36 mg	5	PA
MEDROL - methylprednisolone tab 2 mg, 4 mg, 8 mg, 16 mg	4	
MEDROL DOSEPAK - methylprednisolone tab therapy pack 4 mg (21)	4	
methylprednisolone tab therapy pack 4 mg (21)	2	
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg	2	
ORAPRED ODT - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	4	

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

Drug Name	Drug Tier	Requirements/Limits
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv), 5 mg/5ml (base equiv), 10 mg/5ml (base equiv), 20 mg/5ml (base equiv)	2	
PREDNISOLONE SODIUM PHOSPHATE ODT - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	4	
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	2	
prednisolone soln 15 mg/5ml	2	
prednisolone tab 5 mg	2	
PREDNISONE DR - prednisone tab delayed release 1 mg, 2 mg, 5 mg	5	PA
PREDNISONE INTENSOL - prednisone conc 5 mg/ml	4	
prednisone oral soln 5 mg/5ml	2	
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	1	
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	1	
pyquvi - deflazacort susp 22.75 mg/ml	5	PA
TAPERDEX 12-DAY - dexamethasone tab therapy pack 1.5 mg (49)	4	
TAPERDEX 7-DAY - dexamethasone tab therapy pack 1.5 mg (27)	4	
taperdex 6-day - dexamethasone tab therapy pack 1.5 mg (21)	2	
TARPEYO - budesonide delayed release cap 4 mg*	5	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
CHORIONIC GONADOTROPIN - chorionic gonadotropin for im inj 10000 unit	4	PA
DDAVP - desmopressin acetate inj 4 mcg/ml	4	
DDAVP - desmopressin acetate preservative free (pf) inj 4 mcg/ml	4	
DDAVP - desmopressin acetate tab 0.1 mg, 0.2 mg	4	
DESMODA - desmopressin acetate oral soln 0.05 mg/ml	5	
desmopressin acetate inj 4 mcg/ml	2	
desmopressin acetate nasal spray soln 0.01%	2	
desmopressin acetate nasal spray soln 0.01% (refrigerated)	2	
desmopressin acetate preservative free (pf) inj 4 mcg/ml	2	
desmopressin acetate tab 0.1 mg, 0.2 mg	2	
GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	5	PA
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 0.2 mg	4	PA
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
HUMATROPE - somatropin for inj cartridge 6 mg (18 unit), 12 mg (36 unit), 24 mg	5	PA
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)*	5	
ISTURISA - osilodrostat phosphate tab 1 mg	5	PA, QL (240 tablets/30 days)
ISTURISA - osilodrostat phosphate tab 5 mg	5	PA, QL (360 tablets/30 days)
NGENLA - somatrogon-ghla solution pen-injector 24 mg/1.2ml (20 mg/ml), 60 mg/1.2ml (50 mg/ml)	5	PA
NORDITROPIN FLEXPRO - somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	5	PA
NOVAREL - chorionic gonadotropin for im inj 5000 unit	4	PA
OMNITROPE - somatropin for inj 5.8 mg	5	PA
OMNITROPE - somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	5	PA
PREGNYL - chorionic gonadotropin for im inj 10000 unit	4	PA
SEROSTIM - somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	5	PA
SKYTROFA - lonapegsomatropin-tcgd for subcutaneous inj cartridge 0.7 mg, 1.4 mg, 1.8 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, 11 mg	5	PA
SKYTROFA - lonapegsomatropin-tcgd for subcutaneous inj cart 13.3 mg	5	PA
SOGROYA - somapacitan-beco solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml	5	PA
ZOMACTON - somatropin for inj 10 mg	4	PA
ZOMACTON - somatropin for subcutaneous inj 5 mg	4	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
abigale - estradiol & norethindrone acetate tab 1-0.5 mg#	2	
abigale lo - estradiol & norethindrone acetate tab 0.5-0.1 mg#	2	
ACTIVELLA - estradiol & norethindrone acetate tab 1-0.5 mg#	4	
afirmelle - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
altavera - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
alyacen 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#	2	
alyacen 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	2	
amethyst - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	
ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg#	4	
ANNOVERA - segesterone ace-ethinyl estradiol va ring 0.15-0.013 mg/24hr	4	
apri - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
aranelle - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
ashlyna - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	
aubra eq - levonorgestrel & ethinyl estradiol tab 0.1 mg-20mcg	2	
aurovela fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg	2	
aurovela fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
aurovela 1/20 - norethindrone ace & ethinyl estradiol tab 1mg-20 mcg	2	
aurovela 1.5/30 - norethindrone ace & ethinyl estradiol tab1.5 mg-30 mcg	2	
aurovela 24 fe - norethindrone ace-ethinyl estradiol-fe tab1 mg-20 mcg (24)	2	
AVEED - testosterone undecanoate im inj in oil 750 mg/3ml (250mg/ml)	4	PA
AVERI - desogestrel-ethinyl estradiol-fe tab 0.15-0.03 mg	4	
aviane - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
ayuna - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
AZMIRO - testosterone cypionate im soln pref syringe in oil 200 mg/ml	4	PA
azurette - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
BALCOLTRA - levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)	4	
balziva - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	
BEYAZ - drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	4	
BIJUVA - estradiol-progesterone cap 0.5-100 mg, 1-100 mg#	4	
blisovi fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
blisovi fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
blisovi 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	
briellyn - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	
camila - norethindrone tab 0.35 mg	2	
camrese - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	
camrese lo - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	
charlotte 24 fe - norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	
chateal eq - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
CLIMARA - estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	4	
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day#	4	
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day#	4	
CRINONE - progesterone vaginal gel 4%, 8%	4	PA
cryselle - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
cryselle-28 - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
cyred eq - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
danazol cap 50 mg, 100 mg, 200 mg	2	PA
dasetta 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#	2	
dasetta 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	2	
daysee - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab0.01mg(7)	2	
deblitane - norethindrone tab 0.35 mg	2	
DELESTROGEN - estradiol valerate im in oil 10 mg/ml, 20 mg/ml	4	
delyla - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
DEPO-ESTRADIOL - estradiol cypionate im in oil 5 mg/ml	4	
DEPO-PROVERA CONTRACEPTIVE - medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	4	
DEPO-PROVERA CONTRACEPTIVE - medroxyprogesterone acetate im susp 150 mg/ml	4	
DEPO-SUBQ PROVERA 104 - medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	3	
depo-testosterone - testosterone cypionate im inj in oil 100 mg/ml	2	PA
depo-testosterone - testosterone cypionate im inj in oil 200 mg/ml	2	PA
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
DIVIGEL - estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)#	4	
dolishale - levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	
dotti - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	2	
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#	2	
drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
drospirenone-ethinyl estradiol tab 3-0.03 mg#	2	
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg#	4	

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

Drug Name	Drug Tier	Requirements/Limits
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)#	4	
elinest - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
eluryng - etonogestrel-ethinyl estradiol va ring 0.12-0.015mg/24hr	2	
emzahh - norethindrone tab 0.35 mg	2	
enilloring - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	
enskyce - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
errin - norethindrone tab 0.35 mg	2	
estarylla - norgestimate & ethinyl estradiol tab 0.25 mg-35mcg	2	
ESTRACE - estradiol vaginal cream 0.01%	4	
estradiol & norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg#	2	
estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)#	2	
estradiol tab 0.5 mg, 1 mg, 2 mg#	1	
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)#	2	
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	2	
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	2	
estradiol vaginal cream 0.01%	2	
estradiol vaginal tab 10 mcg	2	
estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml	2	
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	4	
estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg#	2	
etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	2	
EVAMIST - estradiol transdermal spray 1.53 mg/spray#	4	
EVISTA - raloxifene hcl tab 60 mg	4	
falmina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
feirza 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
feirza 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
FEMLYV - norethindrone ace & ethinyl estradiol tab disint 1 mg-20 mcg	4	
FEMRING - estradiol acetate vaginal ring 0.05 mg/24hr, 0.1 mg/24hr	4	
finzala - norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	

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

Drug Name	Drug Tier	Requirements/Limits
fyavolv - norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg#	2	
fyavolv - norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg#	1	
galbriela - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg#	2	
gallifrey - norethindrone acetate tab 5 mg	2	
gemmily - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)	2	
hailey fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
hailey fe 1.5/30 - norethindrone ace & ethinyl estradiol-fetab 1.5 mg-30 mcg	2	
hailey 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
hailey 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)	2	
heather - norethindrone tab 0.35 mg	2	
iclevia - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	
IMVEXXY MAINTENANCE PACK - estradiol vaginal insert 4 mcg, 10 mcg	4	
IMVEXXY STARTER PACK - estradiol vaginal insert starter pack 4 mcg, 10 mcg	4	
incassia - norethindrone tab 0.35 mg	2	
INTRAROSA - prasterone vaginal insert 6.5 mg	4	PA
introvale - levonorgestrel & ethinyl estradiol (91-day) tab0.15-0.03 mg	2	
isibloom - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
jaimiess - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	
jasmiel - drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
JATENZO - testosterone undecanoate cap 158 mg, 198 mg, 237 mg	4	PA
jencycla - norethindrone tab 0.35 mg	2	
jinteli - norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg#	1	
jolessa - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	
joyeaux - levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20mcg (21)	2	
juleber - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
junel fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
junel fe 24 - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	

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Drug Name	Drug Tier	Requirements/Limits
junel fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
junel 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
junel 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
kaitlib fe - norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg#	2	
kalliga - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
kariva - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
kelnor 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	2	
kurvelo - levonorgestrel & ethinyl estradiol tab 0.15 mg-30mcg	2	
KYZATREX - testosterone undecanoate cap 150 mg, 200 mg	4	PA
larin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
larin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
larin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
larin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
larin 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	
leena - norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg	2	
lessina - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
levonest - levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	2	
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg	2	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	2	
levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20 mcg (21)	2	
LO LOESTRIN FE - norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	4	
lo-zumandimine - drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
loestrin fe 1/20 - norethindrone ace & ethinyl estradiol-fetab 1 mg-20 mcg	2	
loestrin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
loestrin 1/20-21 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
loestrin 1.5/30-21 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
lojaimiess - levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	2	
loryna - drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
low-ogestrel - norgestrel & ethinyl estradiol tab 0.3 mg-30mcg	2	
luizza 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
luizza 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
lutera - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
lyleq - norethindrone tab 0.35 mg	2	
lyllana - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	2	
lyza - norethindrone tab 0.35 mg	2	
marlissa - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	2	
medroxyprogesterone acetate im susp 150 mg/ml	2	
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg	1	
megestrol acetate susp 40 mg/ml#	2	
megestrol acetate susp 625 mg/5ml#	2	
megestrol acetate tab 20 mg, 40 mg#	2	
meleya - norethindrone tab 0.35 mg	2	
MENOSTAR - estradiol td patch weekly 14 mcg/24hr#	4	
METHITEST - methyltestosterone oral tab 10 mg	4	PA
methyltestosterone cap 10 mg	5	PA
mibelas 24 fe - norethindrone ace-eth estradiol-fe chew tab1 mg-20 mcg (24)	2	
microgestin fe 1/20 - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
microgestin fe 1.5/30 - norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg	2	
microgestin 1/20 - norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
microgestin 1.5/30 - norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg	2	
mili - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
mimvey - estradiol & norethindrone acetate tab 1-0.5 mg#	2	
MINIVELLE - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	4	

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

Drug Name	Drug Tier	Requirements/Limits
minzoya - levonorgestrel-ethinyl estradiol-fe tab 0.1 mg-20mcg (21)	2	
mono-linyah - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
NATAZIA - estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	4	
necon 0.5/35-28 - norethindrone & ethinyl estradiol tab 0.5mg-35 mcg	2	
NEXTSTELLIS - drospirenone-estetrol tab 3-14.2 mg	4	
nikki - drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
nora-be - norethindrone tab 0.35 mg	2	
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg	2	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg#	2	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	2	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	2	
norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)	2	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	2	
norethindrone acetate tab 5 mg	2	
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg#	2	
norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg#	1	
norethindrone tab 0.35 mg	2	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg	2	
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg	2	
norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
norlyroc - norethindrone tab 0.35 mg	2	
nortrel 0.5/35 (28) - norethindrone & ethinyl estradiol tab0.5 mg-35 mcg	2	
nortrel 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#	2	
nortrel 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	2	
NUVARING - etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	4	
nylia 1/35 - norethindrone & ethinyl estradiol tab 1 mg-35 mcg#	2	
nylia 7/7/7 - norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg	2	
orquidea - norethindrone tab 0.35 mg	2	
OSPHENA - ospemifene tab 60 mg	4	PA
philith - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
pimtrea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
portia-28 - levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg#	3	
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	3	
PREMPHASE - conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)#	3	
PREMPRO - conjugated estrogen-medroxyprogest acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg#	3	
progesterone cap 100 mg, 200 mg	2	
PROMETRIUM - progesterone cap 100 mg, 200 mg	4	
PROVERA - medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg	4	
raloxifene hcl tab 60 mg	2	
reclipsen - desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	2	
rivelsa - levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	
rosyrah - levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	2	
SAFYRAL - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#	4	
setlakin - levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	2	
sharobel - norethindrone tab 0.35 mg	2	
simliya - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
simpesse - levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	2	
SLYND - drospirenone tab 4 mg	4	
sprintec 28 - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
syeda - drospirenone-ethinyl estradiol tab 3-0.03 mg#	2	
tarina fe 1/20 eq - norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg	2	
tarina 24 fe - norethindrone ace-ethinyl estradiol-fe tab 1mg-20 mcg (24)	2	
taysofy - norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24)	2	
TESTIM - testosterone td gel 50 mg/5gm (1%)	4	PA, QL (60 units/30 days)
testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml	2	PA
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	3	PA
testosterone td gel 20.25 mg/1.25gm (1.62%)	2	PA, QL (30 packets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
testosterone td gel 25 mg/2.5gm (1%)	2	PA, QL (90 packets/30 days)
testosterone td gel 50 mg/5gm (1%)	2	PA, QL (60 units/30 days)
testosterone td gel 12.5 mg/act (1%)	2	PA, QL (4 pump bottles/30 days)
testosterone td gel 40.5 mg/2.5gm (1.62%)	2	PA, QL (60 packets/30 days)
testosterone td gel 20.25 mg/act (1.62%)	2	PA, QL (2 pump bottles/30 days)
testosterone td soln 30 mg/act	2	PA, QL (2 pump bottles/30 days)
tilia fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	
TLANDO - testosterone undecanoate cap 112.5 mg	4	PA
tri-estarylla - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
tri-legest fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	
tri-linyah - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
tri-lo-estarylla - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
tri-lo-marzia - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
tri-lo-mili - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
tri-lo-sprintec - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
tri-mili - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
tri-sprintec - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
tri-vylibra - norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	2	
tri-vylibra lo - norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	2	
turqoz - norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg	2	
TWIRLA - levonorgestrel-ethinyl estradiol td ptwk 120-30 mcg/24hr	4	
TYBLUME - levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	4	
tydemy - drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg#	2	
VAGIFEM - estradiol vaginal tab 10 mcg	4	
valtya 1/50 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg	2	
valtya 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
velivet - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	2	
vestura - drospirenone-ethinyl estradiol tab 3-0.02 mg	2	
vienva - levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	2	
viorele - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
VIVELLE-DOT - estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr#	4	
VOGELXO - testosterone td gel 50 mg/5gm (1%)	4	PA, QL (60 units/30 days)
VOGELXO PUMP - testosterone td gel 12.5 mg/act (1%)	4	PA, QL (4 pump bottles/30 days)
volnea - desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	2	
vyfemla - norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg	2	
vylibra - norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	2	
wera - norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg	2	
wymzya fe - norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2	
xarah fe - norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg	2	
xelria fe - norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	2	
xulane - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	
XYOSTED - testosterone enanthate solution auto-injector 50 mg/0.5ml, 75 mg/0.5ml, 100 mg/0.5ml	4	PA
YASMIN 28 - drospirenone-ethinyl estradiol tab 3-0.03 mg#	4	
YAZ - drospirenone-ethinyl estradiol tab 3-0.02 mg	4	
yuvafem - estradiol vaginal tab 10 mcg	2	
zafemy - norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	2	
zovia 1/35 - ethynodiol diacetate & ethinyl estradiol tab 1mg-35 mcg	2	
zumandimine - drospirenone-ethinyl estradiol tab 3-0.03 mg#	2	
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
CYTOMEL - liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg	4	
LEVOTHYROXINE SODIUM - levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	4	
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	1	
levoxyl - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	1	
liomny - liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg	2	

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Drug Name	Drug Tier	Requirements/Limits
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg	2	
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	3	
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	4	
TIROSINT - levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	4	
TIROSINT-SOL - levothyroxine sodium oral solution 13 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, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	4	
unithroid - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	1	
Hormonal Agents, Suppressant (Adrenal or Pituitary)		
cabergoline tab 0.5 mg	2	
ELIGARD - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	4	PA, QL (1 kit/84 days)
ELIGARD - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	4	PA, QL (1 kit/112 days)
ELIGARD - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	4	PA, QL (1 kit/168 days)
ELIGARD - leuprolide acetate for subcutaneous inj kit 7.5 mg	4	PA, QL (1 kit/28 days)
FIRMAGON - degarelix acetate for inj 80 mg (base equiv)	4	PA
FIRMAGON - degarelix acetate for inj 120 mg/vial (240 mg dose)	5	PA
KORLYM - mifepristone tab 300 mg*	5	PA, QL (120 tablets/30 days)
leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)	2	PA, QL (2 kits/28 days)
LUPRON DEPOT (1-MONTH) - leuprolide acetate for inj kit 3.75 mg, 7.5 mg	5	PA, QL (1 kit/28 days)
LUPRON DEPOT (3-MONTH) - leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	5	PA, QL (1 kit/84 days)
LUPRON DEPOT (4-MONTH) - leuprolide acetate (4 month) for inj kit 30 mg	5	PA, QL (1 kit/112 days)
LUPRON DEPOT (6-MONTH) - leuprolide acetate (6 month) for inj kit 45 mg	5	PA, QL (1 kit/168 days)
LUPRON DEPOT-PED (1-MONTH) - leuprolide acetate for inj pediatric kit 7.5 mg	5	PA, QL (1 kit/28 days)
LUPRON DEPOT-PED (3-MONTH) - leuprolide acetate (3 month) for inj pediatric kit 11.25 mg	5	PA, QL (1 kit/84 days)
LUPRON DEPOT-PED (6-MONTH) - leuprolide acet (6 month) for im inj pediatric kit 45 mg	5	PA, QL (1 kit/168 days)
LUTRATE DEPOT - leuprolide acetate (3 month) for inj 22.5 mg	4	PA, QL (1 kit/84 days)
mifepristone tab 300 mg	5	PA, QL (120 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
MYCAPSSA - octreotide acetate cap delayed release 20 mg	5	PA
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg#	5	PA
octreotide acetate for im inj kit 10 mg, 20 mg, 30 mg	5	PA
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 200 mcg/ml (0.2 mg/ml), 500 mcg/ml (0.5 mg/ml), 1000 mcg/ml (1 mg/ml)	2	PA
octreotide acetate subcutaneous soln pref syr 100 mcg/ml	2	PA
octreotide acetate subcutaneous soln pref syr 50 mcg/ml	2	PA
octreotide acetate subcutaneous soln pref syr 500 mcg/ml	2	PA
ORIAHNN - elagolix-estrad-noreth 300-1-0.5mg & elagolix 300mg cap pack#	5	PA
ORILISSA - elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	5	PA
PALSONIFY - paltusotine hcl tab 20 mg, 30 mg	5	PA
RECORLEV - levoketoconazole tab 150 mg*	5	PA, QL (240 tablets/30 days)
SANDOSTATIN - octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)	4	PA
SANDOSTATIN LAR DEPOT - octreotide acetate for im inj kit 10 mg, 20 mg, 30 mg	5	PA
SIGNIFOR - pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)*	5	PA
SIGNIFOR LAR - pasireotide pamoate for im er susp 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv)*	5	PA
SOMATULINE DEPOT - lanreotide acetate extended release inj 60 mg/0.2ml, 90 mg/0.3ml, 120 mg/0.5ml	5	PA
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)*	5	PA
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	5	
TRELSTAR MIXJECT - triptorelin pamoate for im susp 3.75 mg, 11.25 mg, 22.5 mg	4	PA
VABRINTY - leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	5	PA, QL (1 kit/84 days)
VABRINTY - leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	5	PA, QL (1 kit/112 days)
VABRINTY - leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	5	PA, QL (1 kit/168 days)
VABRINTY - leuprolide acetate for subcutaneous inj kit 7.5 mg	5	PA, QL (1 kit/28 days)
Hormonal Agents, Suppressant (Thyroid)		
methimazole tab 5 mg, 10 mg	1	

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Drug Name	Drug Tier	Requirements/Limits
propylthiouracil tab 50 mg	2	
Immunological Agents		
ABRILADA - adalimumab-afzb prefilled syringe kit 20 mg/0.4ml	5	PA, QL (2 syringes/28 days)
ABRILADA - adalimumab-afzb prefilled syringe kit 40 mg/0.8ml	5	PA, QL (6 syringes/28 days)
ABRILADA 1-PEN KIT - adalimumab-afzb auto-injector kit 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
ABRILADA 2-PEN KIT - adalimumab-afzb auto-injector kit 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
ABRYSVO - rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	1	QL (1 vaccine/lifetime)
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	5	PA, QL (4 syringes/28 days)
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	5	PA, QL (4 pens/28 days)
ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	1	
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)*	5	PA
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	1	
ADACEL - tet-diph-acell pertuss ad pref syr 5-2-15.5 lf-mcg/0.5ml	1	
ADALIMUMAB-AACF (2 PEN) - adalimumab-aacf auto-injector kit 40 mg/0.8ml	5	PA, QL (2 kits/28 days)
ADALIMUMAB-AACF (2 SYRINGE) - adalimumab-aacf prefilled syringe kit 40 mg/0.8ml	4	PA, QL (2 kits/28 days)
ADALIMUMAB-AACF STARTER PACK/CD/UC/HS (6 PEN) - adalimumab-aacf auto-injector kit 40 mg/0.8ml	5	PA, QL (1 kit/180 days)
ADALIMUMAB-AACF STARTER PACK/PSORIASIS/UVEITIS (4 PEN) - adalimumab-aacf auto-injector kit 40 mg/0.8ml	5	PA, QL (1 kit/180 days)
ADALIMUMAB-AATY CD/UC/HS STARTER - adalimumab-aaty auto-injector kit 80 mg/0.8ml	5	PA, QL (1 kit/180 days)
ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
ADALIMUMAB-AATY 1-PEN KIT - adalimumab-aaty auto-injector kit 80 mg/0.8ml	5	PA, QL (2 pens/28 days)
ADALIMUMAB-AATY 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
ADALIMUMAB-AATY 2-SYRINGE KIT - adalimumab-aaty prefilled syringe kit 20 mg/0.2ml	5	PA, QL (2 syringes/28 days)
ADALIMUMAB-AATY 2-SYRINGE KIT - adalimumab-aaty prefilled syringe kit 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln auto-injector 80 mg/0.8ml	5	PA, QL (2 pens/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml	5	PA, QL (2 syringes/28 days)
ADALIMUMAB-ADAZ - adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
ADALIMUMAB-FKJP - adalimumab-fkjp auto-injector kit 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
ADALIMUMAB-FKJP - adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml	5	PA, QL (2 syringes/28 days)
ADALIMUMAB-FKJP - adalimumab-fkjp prefilled syringe kit 40 mg/0.8ml	3	PA, QL (6 syringes/28 days)
AMJEVITA - adalimumab-atto soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (4 pens/28 days)
AMJEVITA - adalimumab-atto soln auto-injector 80 mg/0.8ml	5	PA, QL (3 pens/28 days)
AMJEVITA - adalimumab-atto soln prefilled syringe 10 mg/0.2ml, 20 mg/0.2ml	5	PA, QL (2 syringes/28 days)
AMJEVITA - adalimumab-atto soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (4 syringes/28 days)
ANDEMBRY - garadacimab-gxii soln auto-injector 200 mg/1.2ml	5	PA, QL (2 pens/30 days)
ANZUPGO - delgocitinib cream 20 mg/gm (2%)	5	PA, QL (2 tubes/30 days)
ARAVA - leflunomide tab 10 mg, 20 mg	5	
ARCALYST - rilonacept for inj 220 mg*	5	PA, QL (8 vials/28 days)
AREXVY - rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	1	QL (1 vaccine/lifetime; >=18 yr)
ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	4	BD
ATGAM - lymphocyte immune globulin anti-thymocyte g inj 50 mg/ml(eq)	5	BD
AURANOFIN - auranofin cap 3 mg	5	
AVTOZMA - tocilizumab-anoh subcutaneous soln auto-inj 162 mg/0.9ml	5	PA, QL (4 pens/28 days)
AVTOZMA - tocilizumab-anoh subcutaneous soln pref syr 162 mg/0.9ml	5	PA, QL (4 syringes/28 days)
azasan - azathioprine tab 75 mg, 100 mg	2	BD
azathioprine tab 50 mg, 75 mg, 100 mg	2	BD
BCG VACCINE - bcg vaccine for inj soln 50 mg	1	
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	5	PA, QL (8 pens/28 days)
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	5	PA, QL (8 syringes/28 days)
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit*	5	PA, QL (10 vials/30 days)
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	5	PA, QL (2 syringes/28 days)
BESREMI PEN - ropeginterferon alfa-2b-njft soln pen inj 500 mcg/0.5ml	5	PA, QL (2 pens/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	1	
BIMZELX - bimekizumab-bkzx subcutaneous soln auto-injector 160 mg/ml	5	PA, QL (1 pen/28 days)
BIMZELX - bimekizumab-bkzx subcutaneous soln auto-injector 320 mg/2ml	5	PA, QL (3 pens/28 days)
BIMZELX - bimekizumab-bkzx subcutaneous soln prefilled syr 160 mg/ml	5	PA, QL (1 syringe/28 days)
BIMZELX - bimekizumab-bkzx subcutaneous soln prefilled syr 320 mg/2ml	5	PA, QL (3 syringes/28 days)
BIVIGAM - immune globulin (human) iv soln 5 gm/50ml	5	BD, PA
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	1	
CELLCEPT - mycophenolate mofetil cap 250 mg	5	BD
CELLCEPT - mycophenolate mofetil for oral susp 200 mg/ml	5	BD
CELLCEPT - mycophenolate mofetil tab 500 mg	5	BD
CIBINQO - abrocitinib tab 50 mg, 100 mg, 200 mg	5	PA, QL (30 tablets/30 days)
CIMZIA - certolizumab pegol for inj kit 2 x 200 mg	5	PA, QL (2 kits/28 days)
CIMZIA (1 SYRINGE) - certolizumab pegol prefilled syringe kit 200 mg/ml	5	PA, QL (6 syringes/28 days)
CIMZIA (2 SYRINGE) - certolizumab pegol prefilled syringe kit 200 mg/ml	5	PA, QL (6 syringes/28 days)
CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 200 mg/ml	5	PA, QL (6 syringes/28 days)
CINRYZE - c1 esterase inhibitor (human) for iv inj 500 unit*	5	PA, QL (20 vials/30 days)
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)*	5	PA, QL (8 syringes/28 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml	5	PA, QL (4 syringes/28 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 150 mg/ml*	5	PA, QL (8 syringes/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)*	5	PA, QL (8 pens/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml*	5	PA, QL (8 pens/28 days)
COSENTYX UNOREADY - secukinumab subcutaneous soln auto-injector 300 mg/2ml*	5	PA, QL (4 pens/28 days)
CUTAQUIG - immune globulin (human)-hipp subcutaneous inj 1 gm/6ml, 1.65 gm/10ml, 2 gm/12ml, 3.3 gm/20ml, 4 gm/24ml, 8 gm/48ml	5	BD, PA
cyclosporine cap 25 mg, 100 mg	2	BD
cyclosporine modified cap 25 mg, 50 mg, 100 mg	2	BD
cyclosporine modified oral soln 100 mg/ml	2	BD

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

Drug Name	Drug Tier	Requirements/Limits
CYLTEZO - adalimumab-adbm auto-injector kit 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (4 pens/28 days)
CYLTEZO - adalimumab-adbm prefilled syringe kit 10 mg/0.2ml, 20 mg/0.4ml	5	PA, QL (2 syringes/28 days)
CYLTEZO - adalimumab-adbm prefilled syringe kit 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (4 syringes/28 days)
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	1	
DAWNZERA - donidalorsen sodium subcutaneous soln auto-inj 80 mg/0.8ml	5	PA, QL (1 pen/28 days)
DENGVAXIA - dengue virus vaccine live tetravalent for subcutaneous susp	1	
DUPIXENT - dupilumab subcutaneous soln auto-injector 200 mg/1.14ml	5	PA, QL (3 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln auto-injector 300 mg/2ml	5	PA, QL (4 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	5	PA, QL (3 syringes/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 300 mg/2ml	5	PA, QL (4 syringes/28 days)
EBGLYSS - lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml	5	PA
EBGLYSS - lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml	5	PA
EKTERLY - sebetralstat tab 300 mg	5	PA, QL (8 tablets/30 days)
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	5	BD, PA, QL (10 vials/30 days)
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	5	PA, QL (8 vials/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	5	PA, QL (4 syringes/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	5	PA, QL (8 syringes/28 days)
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	5	PA, QL (8 cartridges/28 days)
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	5	PA, QL (8 pens/28 days)
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	1	BD
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	1	BD
ENTYVIO PEN - vedolizumab soln auto-injector 108 mg/0.68ml	5	PA, QL (2 pens/28 days)
ENVARSUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg	4	BD
ENVARSUS XR - tacrolimus tab er 24hr 4 mg	5	BD
ERVEBO - ebola zaire virus vaccine live im susp	1	
everolimus tab 0.25 mg, 0.5 mg	2	BD
everolimus tab 0.75 mg, 1 mg	5	BD
FABHALTA - iptacopan hcl cap 200 mg	5	PA, QL (60 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
FIRAZYR - icatibant acetate subcutaneous soln pref syr 30 mg/3ml	5	PA, QL (6 syringes/30 days)
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	5	BD, PA
GAMMAGARD LIQUID ERC - immune globulin (human) iv or subcutaneous soln 5 gm/50ml, 10 gm/100ml	5	BD, PA
GAMMAGARD S/D IGA LESS THAN 1MCG/ML - immune globulin (human) iv for soln 5 gm, 10 gm	5	BD, PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	5	BD, PA
GAMMAPLEX - immune globulin (human) iv soln 5 gm/100ml, 10 gm/200ml, 20 gm/400ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	5	BD, PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	5	BD, PA
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac im susp	1	
GARDASIL 9 - human papillomavirus (hpv) 9-valent recomb vac susp pref syr	1	
gengraf - cyclosporine modified cap 25 mg, 100 mg	2	BD
HADLIMA - adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (6 syringes/28 days)
HADLIMA PUSHTOUCH - adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit*	5	PA, QL (27 vials/28 days)
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 3000 unit*	5	PA, QL (18 vials/28 days)
HAVRIX - hepatitis a vaccine susp prefilled syr 720 el unit/0.5ml, 1440 el unit/ml	1	
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	1	BD
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	1	
HULIO - adalimumab-fkjp auto-injector kit 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
HULIO - adalimumab-fkjp prefilled syringe kit 20 mg/0.4ml	5	PA, QL (2 syringes/28 days)
HUMIRA - adalimumab prefilled syringe kit 10 mg/0.1ml	5	PA, QL (2 syringes/28 days)
HUMIRA - adalimumab prefilled syringe kit 20 mg/0.2ml, 40 mg/0.8ml, 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
HUMIRA PEN - adalimumab auto-injector kit 40 mg/0.8ml, 40 mg/0.4ml, 80 mg/0.8ml	5	PA, QL (4 pens/28 days)
HUMIRA PEN-CD/UC/HS STARTER - adalimumab auto-injector kit 80 mg/0.8ml	5	PA, QL (1 kit/180 days)

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

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN-PS/UV STARTER - adalimumab auto-injector kit 80 mg/0.8ml & 40 mg/0.4ml	5	PA, QL (1 kit/180 days)
HYRIMOZ - adalimumab-adaz soln auto-injector 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
HYRIMOZ - adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml	5	PA, QL (2 syringes/28 days)
HYRIMOZ - adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
HYRIMOZ PEDIATRIC CROHN'S DISEASE STARTER PACK - adalimumab-adaz soln prefilled syr 80 mg/0.8ml & 40 mg/0.4ml	5	PA, QL (1 kit/180 days)
HYRIMOZ PEDIATRIC CROHNS DISEASE STARTER PACK - adalimumab-adaz soln prefilled syringe 80 mg/0.8ml	5	PA, QL (3 pens/180 days)
HYRIMOZ PLAQUE PSORIASIS STARTER PACK - adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	5	PA, QL (1 kit/180 days)
HYRIMOZ PLAQUE PSORIASIS/UVEITIS STARTER PACK - adalimumab-adaz soln auto-injector 80 mg/0.8ml & 40 mg/0.4ml	5	PA, QL (1 kit/180 days)
HYRIMOZ SENSOREADY CD/UC/HS STARTER PACK - adalimumab-adaz soln auto-injector 80 mg/0.8ml	5	PA, QL (3 pens/180 days)
HYRIMOZ SENSOREADY PENS - adalimumab-adaz soln auto-injector 80 mg/0.8ml	5	PA, QL (2 pens/28 days)
icatibant acetate subcutaneous soln pref syr 30 mg/3ml	5	PA, QL (6 syringes/30 days)
ICOTYDE - icotrokinra hcl tab 200 mg	5	PA, QL (30 tablets/30 days)
ILUMYA - tildrakizumab-asmn subcutaneous soln pref syringe 100 mg/ml	5	PA, QL (6 syringes/365 days)
IMOVAX RABIES (H.D.C.V.) - rabies virus vaccine, hdc for inj susp	1	BD
IMULDOSA - ustekinumab-srlf iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
IMULDOSA - ustekinumab-srlf soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
IMULDOSA - ustekinumab-srlf soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
IMURAN - azathioprine tab 50 mg	4	BD
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	1	
IPOL INACTIVATED IPV - poliovirus vaccine, ipv inj susp	1	
IXIARO - japanese encephalitis vaccine inactivated adsorbed inj	1	
JYLAMVO - methotrexate oral soln 2 mg/ml	4	
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	1	BD
KEVZARA - sarilumab subcutaneous soln prefilled syringe 200 mg/1.14ml	5	PA, QL (2 syringes/28 days)
KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	5	PA, QL (2 pens/28 days)
KINERET - anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	5	PA
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	1	
leflunomide tab 10 mg, 20 mg	2	

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

Drug Name	Drug Tier	Requirements/Limits
LEQSELVI - deuruxolitinib phosphate tab 8 mg (base equiv)	5	PA, QL (60 tablets/30 days)
LITFULO - ritlecitinib tosylate cap 50 mg (base equiv)	5	PA, QL (28 capsules/28 days)
LUPKYNIS - voclosporin cap 7.9 mg*	5	PA, QL (180 capsules/30 days)
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	1	
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	1	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	1	
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	1	
methotrexate sodium for inj 1 gm	2	
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)	1	
methotrexate sodium inj 250 mg/10ml (25 mg/ml)	1	
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	1	
methotrexate sodium tab 2.5 mg (base equiv)	2	
MRESVIA - rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	1	QL (1 vaccine/lifetime; >=18 yr)
mycophenolate mofetil cap 250 mg	2	BD
mycophenolate mofetil for oral susp 200 mg/ml	5	BD
mycophenolate mofetil tab 500 mg	2	BD
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	2	BD
MYFORTIC - mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	4	BD
MYHIBBIN - mycophenolate mofetil oral susp 200 mg/ml	5	BD
NEMLUVIO - nemolizumab-ilto for subcutaneous auto-injector 30 mg	5	PA, QL (2 pens/28 days)
NEORAL - cyclosporine modified cap 25 mg, 100 mg	4	BD
NEORAL - cyclosporine modified oral soln 100 mg/ml	4	BD
OCTAGAM - immune globulin (human) iv soln 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 10 gm/200ml, 2 gm/20ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	5	BD, PA
OLUMIANT - baricitinib tab 1 mg, 2 mg, 4 mg	5	PA, QL (30 tablets/30 days)
OMVOH - mirikizumab-mrkz subcutaneous auto-inj 100 mg/ml & 200mg/2ml	5	PA, QL (2 pens/28 days)
OMVOH - mirikizumab-mrkz subcutaneous pref syr 100 mg/ml & 200mg/2ml	5	PA, QL (2 syringes/28 days)
OMVOH - mirikizumab-mrkz subcutaneous sol prefill syringe 200 mg/2ml	5	PA, QL (1 syringe/28 days)
OMVOH - mirikizumab-mrkz subcutaneous soln auto-injector 200 mg/2ml	5	PA, QL (1 pen/28 days)
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	5	PA, QL (4 syringes/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	5	PA, QL (4 pens/28 days)
ORLADEYO - berotralstat hcl cap 110 mg, 150 mg*	5	PA, QL (30 capsules/30 days)
ORLADEYO - berotralstat hcl pellet pack 72 mg, 96 mg, 108 mg, 132 mg	5	PA, QL (28 packets/28 days)
OTULFI - ustekinumab-aauz iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
OTULFI - ustekinumab-aauz soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
OTULFI - ustekinumab-aauz soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
OTULFI - ustekinumab-aauz subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
PANZYGA - immune globulin (human)-ifas iv soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	5	BD, PA
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	1	
PEDVAXHIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	1	
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	5	PA
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	5	PA
PENBRAYA - meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	1	
PENMENVY - meningococcal acwy (oligo conj)-mening b (rcmb) vacc for inj	1	
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	1	
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	1	
PRIVIGEN - immune globulin (human) iv soln 20 gm/200ml	5	BD, PA
PROGRAF - tacrolimus cap 0.5 mg, 1 mg	4	BD
PROGRAF - tacrolimus cap 5 mg	5	BD
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	4	BD
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	1	
PYZCHIVA - ustekinumab-ttwe iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
PYZCHIVA - ustekinumab-ttwe soln auto-injector 45 mg/0.5ml	4	PA, QL (3 pens/84 days)
PYZCHIVA - ustekinumab-ttwe soln auto-injector 90 mg/ml	5	PA, QL (3 pens/84 days)
PYZCHIVA - ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
PYZCHIVA - ustekinumab-ttwe soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
PYZCHIVA - ustekinumab-ttwe subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
QIVIGY - immune globulin (human)-kthm iv soln 5 gm/50ml, 10 gm/100ml	5	BD, PA

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

Drug Name	Drug Tier	Requirements/Limits
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	1	
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	1	
RABAVERT - rabies vaccine, pcec for inj	1	BD
RASUVO - methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml	4	PA
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	1	BD
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	1	BD
REZUROCK - belumosudil mesylate tab 200 mg*	5	PA, QL (30 tablets/30 days)
RHAPSIDO - remibrutinib tab 25 mg	5	PA, QL (60 tablets/30 days)
RIDAURA - auranofin cap 3 mg	3	
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg	5	PA, QL (30 tablets/30 days)
RINVOQ - upadacitinib tab er 24hr 45 mg	5	PA, QL (84 tablets/180 days)
RINVOQ LQ - upadacitinib oral soln 1 mg/ml	5	PA, QL (2 bottles/30 days)
ROTARIX - rotavirus vaccine, live oral susp	1	
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	1	
RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	5	PA, QL (8 vials/30 days)
sajazir - icatibant acetate subcutaneous soln pref syr 30 mg/3ml	5	PA, QL (6 syringes/30 days)
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	4	BD
SAPHNELO - anifrolumab-fnia soln prefilled syringe 120 mg/0.8ml	5	PA, QL (4 syringes/28 days)
SAPHNELO PEN - anifrolumab-fnia soln auto-injector 120 mg/0.8ml	5	PA, QL (4 pens/28 days)
SELARSDI - ustekinumab-aekn iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
SELARSDI - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
SELARSDI - ustekinumab-aekn soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
SELARSDI - ustekinumab-aekn subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
SHINGRIX - zoster vac recomb adjuvanted im susp pref syr 50 mcg/0.5ml	1	QL (2 vaccines/lifetime; >=18 yr)
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	1	QL (2 vaccines/lifetime; >=18 yr)
SILIQ - brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	5	PA, QL (3 syringes/28 days)
SIMLANDI - adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml	5	PA, QL (2 syringes/28 days)
SIMLANDI - adalimumab-ryvk prefilled syringe kit 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)

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

Drug Name	Drug Tier	Requirements/Limits
SIMLANDI 1-PEN KIT - adalimumab-ryvk auto-injector kit 80 mg/0.8ml	5	PA, QL (3 pens/28 days)
SIMLANDI 2-PEN KIT - adalimumab-ryvk auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 50 mg/0.5ml	5	PA, QL (1 pen/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	5	PA, QL (3 pens/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	5	PA, QL (1 syringe/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	5	PA, QL (3 syringes/28 days)
sirolimus oral soln 1 mg/ml	2	BD
sirolimus tab 0.5 mg, 1 mg, 2 mg	2	BD
SKYRIZI - risankizumab-rzaa iv soln 600 mg/10ml (60 mg/ml)	5	PA, QL (6 vials/180 days)
SKYRIZI - risankizumab-rzaa soln prefilled syringe 55 mg/0.37ml, 150 mg/ml	5	PA, QL (6 syringes/365 days)
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	5	PA, QL (7 cartridges/365 days)
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	5	PA, QL (6 pens/365 days)
SOTYKTU - deucravacitinib tab 6 mg	5	PA, QL (30 tablets/30 days)
SPEVIGO - spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml, 300 mg/2ml	5	PA
STELARA - ustekinumab inj 45 mg/0.5ml	5	PA, QL (3 vials/84 days)
STELARA - ustekinumab iv soln 130 mg/26ml (5 mg/ml) (for iv infusion)	5	PA, QL (4 vials/180 days)
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	PA, QL (3 syringes/84 days)
STEQEYMA - ustekinumab-stba iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
STEQEYMA - ustekinumab-stba soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
STEQEYMA - ustekinumab-stba soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
STEQEYMA - ustekinumab-stba subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	2	BD
tacrolimus cap 0.5 mg, 1 mg, 5 mg	2	BD
TAKHZYRO - lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	5	PA, QL (2 syringes/28 days)
TALTZ - ixekizumab subcutaneous soln auto-injector 80 mg/ml	5	PA, QL (4 pens/28 days)
TALTZ - ixekizumab subcutaneous soln prefilled syringe 20 mg/0.25ml, 40 mg/0.5ml	5	PA, QL (1 syringe/28 days)
TALTZ - ixekizumab subcutaneous soln prefilled syringe 80 mg/ml	5	PA, QL (4 syringes/28 days)
TAVNEOS - avacopan cap 10 mg*	5	PA, QL (180 capsules/30 days)
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lf/0.5ml	1	BD

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Drug Name	Drug Tier	Requirements/Limits
THYMOGLOBULIN - anti-thymocyte globulin for iv soln 25 mg (lymphocyte ig)	5	BD
TICOVAC - tick-borne encephalit vac inact susp pref syr 1.2 mcg/0.25ml, 2.4 mcg/0.5ml	1	
tofacitinib citrate oral soln 1 mg/ml (base equivalent)	5	PA, QL (1 bottle/24 days)
tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	5	PA, QL (30 tablets/30 days)
tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	5	PA, QL (60 tablets/30 days)
TREMFYA - guselkumab soln auto-injector 200 mg/2ml	5	PA, QL (1 pen/28 days)
TREMFYA - guselkumab soln pen-injector 100 mg/ml	5	PA, QL (3 pens/56 days)
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	5	PA, QL (3 syringes/56 days)
TREMFYA - guselkumab soln prefilled syringe 200 mg/2ml	5	PA, QL (1 syringe/28 days)
TREMFYA INDUCTION PACK FOR CROHNS DISEASE/ ULCERATIVE COLITIS - guselkumab soln auto-injector 200 mg/2ml	5	PA, QL (6 pens/180 days)
TREMFYA PEN - guselkumab soln auto-injector 100 mg/ml	5	PA, QL (3 pens/56 days)
TREXALL - methotrexate sodium tab 5 mg (base equiv), 7.5 mg (base equiv), 10 mg (base equiv), 15 mg (base equiv)	4	
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	1	
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	1	
TYENNE - tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	5	PA, QL (4 pens/28 days)
TYENNE - tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	5	PA, QL (4 syringes/28 days)
TYPHIM VI - typhoid vi polysaccharide vacc im soln pref syr 25 mcg/0.5ml	1	
USTEKINUMAB - ustekinumab inj 45 mg/0.5ml	5	PA, QL (3 vials/84 days)
USTEKINUMAB - ustekinumab iv soln 130 mg/26ml (5 mg/ml) (for iv infusion)	5	PA, QL (4 vials/180 days)
USTEKINUMAB - ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	PA, QL (3 syringes/84 days)
USTEKINUMAB-AEKN - ustekinumab-aekn soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
USTEKINUMAB-AEKN - ustekinumab-aekn soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
USTEKINUMAB-TTWE - ustekinumab-ttwe iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
USTEKINUMAB-TTWE - ustekinumab-ttwe soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	PA, QL (3 syringes/84 days)
USTEKINUMAB-TTWE - ustekinumab-ttwe subcutaneous soln 45 mg/0.5ml	5	PA, QL (3 vials/84 days)

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

Drug Name	Drug Tier	Requirements/Limits
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	1	
VAQTA - hepatitis a vaccine susp prefilled syr 25 unit/0.5ml, 50 unit/ml	1	
VARIVAX - varicella virus vac live for inj 1350 pfu/0.5ml	1	
VAXCHORA - cholera vaccine live attenuated for oral susp	1	
VELSIPITY - etrasimod arginine tab 2 mg	5	PA, QL (30 tablets/30 days)
VIMKUNYA - chikungunya virus vac rcmb vlp im susp pref syr 40 mcg/0.8ml	1	
VIVOTIF - typhoid vaccine cap delayed release	1	
VOYDEYA - danicopan tab therapy pack 50 mg & 100 mg	5	PA, QL (1 box/30 days)
VOYDEYA - danicopan tab 100 mg	5	PA, QL (180 tablets/30 days)
VYVGART HYTRULO - efgartigimod alf-hyalur-qvfc pref syr 1000-10000 mg-unit/5ml	5	PA, QL (4 syringes/28 days)
WEZLANA - ustekinumab-auub inj 45 mg/0.5ml	5	PA, QL (3 vials/84 days)
WEZLANA - ustekinumab-auub iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
WEZLANA - ustekinumab-auub soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	5	PA, QL (3 syringes/84 days)
XATMEP - methotrexate oral soln 2.5 mg/ml	4	BD
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	5	PA, QL (1 bottle/24 days)
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	5	PA, QL (60 tablets/30 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	5	PA, QL (30 tablets/30 days)
XEMBIFY - immune globulin (human)-klhw subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 10 gm/50ml	5	BD, PA
XOLAIR - omalizumab for inj 150 mg*	5	PA
XOLAIR - omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml*	5	PA
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml*	5	PA
XOLREMDI - mavorixafor cap 100 mg	5	PA, QL (120 capsules/30 days)
YESINTEK - ustekinumab-kfce iv soln 130 mg/26ml (5 mg/ml) (for iv inf)	5	PA, QL (4 vials/180 days)
YESINTEK - ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml	4	PA, QL (3 syringes/84 days)
YESINTEK - ustekinumab-kfce soln prefilled syringe 90 mg/ml	5	PA, QL (3 syringes/84 days)
YESINTEK - ustekinumab-kfce subcutaneous soln 45 mg/0.5ml	4	PA, QL (3 vials/84 days)
YF-VAX - yellow fever vaccine for subcutaneous suspension	1	
YIMMUGO - immune globulin (human)-dira iv soln 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	5	BD, PA
YUFLYMA CD/UC/HS STARTER - adalimumab-aaty auto-injector kit 80 mg/0.8ml	5	PA, QL (1 kit/180 days)

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

Drug Name	Drug Tier	Requirements/Limits
YUFLYMA 1-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
YUFLYMA 1-PEN KIT - adalimumab-aaty auto-injector kit 80 mg/0.8ml	5	PA, QL (2 pens/28 days)
YUFLYMA 2-PEN KIT - adalimumab-aaty auto-injector kit 40 mg/0.4ml	5	PA, QL (4 pens/28 days)
YUFLYMA 2-SYRINGE KIT - adalimumab-aaty prefilled syringe kit 40 mg/0.4ml	5	PA, QL (4 syringes/28 days)
YUSIMRY - adalimumab-aqvh soln auto-injector 40 mg/0.8ml	5	PA, QL (6 pens/28 days)
ZILBRYSQ - zilucoplan sodium subcutaneous soln pref syr 16.6 mg/0.416ml, 23 mg/0.574ml, 32.4 mg/0.81ml	5	PA, QL (30 syringes/30 days)
ZORTRESS - everolimus tab 0.25 mg, 0.75 mg	4	BD
ZORTRESS - everolimus tab 0.5 mg, 1 mg	5	BD
ZYMFENTRA 1-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	5	PA, QL (2 pens/28 days)
ZYMFENTRA 2-PEN - infliximab-dyyb soln auto-injector kit 120 mg/ml	5	PA, QL (2 pens/28 days)
ZYMFENTRA 2-SYRINGE - infliximab-dyyb soln prefilled syringe kit 120 mg/ml	5	PA, QL (2 syringes/28 days)
Inflammatory Bowel Disease Agents		
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal cream 1-1%, 2.5-1%	4	
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	4	QL (59 mls/30 days)
ANUSOL-HC - hydrocortisone perianal cream 2.5%	4	QL (454 grams/30 days)
APRISO - mesalamine cap er 24hr 0.375 gm	4	QL (120 capsules/30 days)
AZULFIDINE - sulfasalazine tab 500 mg	4	
AZULFIDINE EN-TABS - sulfasalazine tab delayed release 500 mg	4	
balsalazide disodium cap 750 mg	2	
budesonide delayed release particles cap 3 mg	2	PA, QL (90 capsules/30 days)
budesonide rectal foam 2 mg/act	2	
budesonide tab er 24hr 9 mg	5	PA, QL (30 tablets/30 days)
CANASA - mesalamine suppos 1000 mg	5	
DIPENTUM - olsalazine sodium cap 250 mg	5	
hydrocortisone acetate w/ pramoxine perianal cream 1-1%	2	
hydrocortisone enema 100 mg/60ml	2	
hydrocortisone perianal cream 1%	1	
hydrocortisone perianal cream 2.5%	1	QL (454 grams/30 days)
LIALDA - mesalamine tab delayed release 1.2 gm	4	QL (120 tablets/30 days)
mesalamine cap dr 400 mg	2	QL (180 capsules/30 days)
mesalamine cap er 24hr 0.375 gm	2	QL (120 capsules/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
mesalamine cap er 250 mg	2	QL (480 capsules/30 days)
mesalamine cap er 500 mg	2	QL (240 capsules/30 days)
mesalamine enema 4 gm	2	
mesalamine rectal enema 4 gm & cleanser wipe kit	2	
mesalamine suppos 1000 mg	2	
mesalamine tab delayed release 800 mg	2	QL (180 tablets/30 days)
mesalamine tab delayed release 1.2 gm	2	QL (120 tablets/30 days)
PENTASA - mesalamine cap er 250 mg	4	QL (480 capsules/30 days)
PENTASA - mesalamine cap er 500 mg	4	QL (240 capsules/30 days)
procto-med hc - hydrocortisone perianal cream 2.5%	1	QL (454 grams/30 days)
proctocort - hydrocortisone perianal cream 1%	1	
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	4	
proctosol hc - hydrocortisone perianal cream 2.5%	1	QL (454 grams/30 days)
proctozone-hc - hydrocortisone perianal cream 2.5%	1	QL (454 grams/30 days)
ROWASA - mesalamine rectal enema 4 gm & cleanser wipe kit	4	
SFROWASA - mesalamine sulfite-free (sf) enema 4 gm/60ml	4	
sulfasalazine tab delayed release 500 mg	2	
sulfasalazine tab 500 mg	2	
UCERIS - budesonide rectal foam 2 mg/act	4	
UCERIS - budesonide tab er 24hr 9 mg	5	PA, QL (30 tablets/30 days)
Metabolic Bone Disease Agents		
ACTONEL - risedronate sodium tab 35 mg	4	QL (4 tablets/28 days)
ACTONEL - risedronate sodium tab 150 mg	4	QL (1 tablet/28 days)
alendronate sodium oral soln 70 mg/75ml	2	QL (300 mls/28 days)
alendronate sodium tab 10 mg	1	QL (120 tablets/30 days)
alendronate sodium tab 35 mg, 70 mg	1	QL (4 tablets/28 days)
ATELVIA - risedronate sodium tab delayed release 35 mg	4	QL (4 tablets/28 days)
AUKELSO - denosumab-kyqq inj 120 mg/1.7ml	5	PA
BILDYOS - denosumab-nxxp inj soln prefilled syringe 60 mg/ml	4	PA
BILPREVDA - denosumab-nxxp inj 120 mg/1.7ml	5	PA
BINOSTO - alendronate sodium effervescent tab 70 mg	4	QL (4 tablets/28 days)
BOMYNTRA - denosumab-bnht inj soln prefilled syringe 120 mg/1.7ml	5	PA
BOMYNTRA - denosumab-bnht inj 120 mg/1.7ml	5	PA
BONSITY - teriparatide soln pen-inj 560 mcg/2.24ml	5	PA
BOSAYA - denosumab-kyqq inj soln prefilled syringe 60 mg/ml	4	PA
calcitonin (salmon) nasal soln 200 unit/act	2	
calcitriol cap 0.25 mcg, 0.5 mcg	2	

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

Drug Name	Drug Tier	Requirements/Limits
calcitriol oral soln 1 mcg/ml	2	
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	2	PA
CONEXXENCE - denosumab-bnht inj soln prefilled syringe 60 mg/ml	4	PA
doxercalciferol cap 0.5 mcg	1	
doxercalciferol cap 1 mcg	1	
doxercalciferol cap 2.5 mcg	1	
ENOBY - denosumab-qbde inj soln prefilled syringe 60 mg/ml	4	PA
EVENITY - romosozumab-aqqg inj soln prefilled syringe 105 mg/1.17ml	5	PA
FORTEO - teriparatide soln pen-inj 560 mcg/2.24ml	5	PA
FOSAMAX - alendronate sodium tab 70 mg	4	QL (4 tablets/28 days)
FOSAMAX PLUS D - alendronate sodium-cholecalciferol tab 70-2800 mg-unit, 70-5600 mg-unit	4	QL (4 tablets/28 days)
ibandronate sodium tab 150 mg (base equivalent)	2	QL (1 tablet/28 days)
JUBBONTI - denosumab-bbdz inj soln prefilled syringe 60 mg/ml	4	PA
JUBEREQ - denosumab-desu inj 120 mg/1.7ml	5	PA
OSENVELT - denosumab-bmwo inj 120 mg/1.7ml	5	PA
OSPOMYV - denosumab-dssb inj soln prefilled syringe 60 mg/ml	4	PA
OSVYRTI - denosumab-desu inj soln prefilled syringe 60 mg/ml	4	PA
paricalcitol cap 1 mcg, 2 mcg, 4 mcg	2	
PROLIA - denosumab inj soln prefilled syringe 60 mg/ml	4	PA
RAYALDEE - calcifediol cap er 30 mcg	5	
risedronate sodium tab delayed release 35 mg	2	QL (4 tablets/28 days)
risedronate sodium tab 5 mg, 30 mg	2	QL (30 tablets/30 days)
risedronate sodium tab 35 mg	2	QL (4 tablets/28 days)
risedronate sodium tab 150 mg	2	QL (1 tablet/28 days)
ROCALTROL - calcitriol cap 0.25 mcg, 0.5 mcg	4	
ROCALTROL - calcitriol oral soln 1 mcg/ml	4	
SENSIPAR - cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	5	PA
STOBOCLO - denosumab-bmwo inj soln prefilled syringe 60 mg/ml	4	PA
TERIPARATIDE - teriparatide soln pen-inj 560 mcg/2.24ml (Alvogen)	5	PA
teriparatide soln pen-inj 560 mcg/2.24ml	5	PA
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	5	PA
WYOST - denosumab-bbdz inj 120 mg/1.7ml	5	PA
XGEVA - denosumab inj 120 mg/1.7ml	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
XTRENBO - denosumab-qbde inj 120 mg/1.7ml	4	PA
YORVIPATH - palopegteriparatide pen-inj 168 mcg/0.56ml (teriparatide eq), 294 mcg/0.98ml (teriparatide eq), 420 mcg/1.4ml (teriparatide eq)	5	PA, QL (2 pens/28 days)
ZEMPLAR - paricalcitol cap 1 mcg, 2 mcg	4	
Ophthalmic Agents		
ACULAR - ketorolac tromethamine ophth soln 0.5%	4	
ACULAR LS - ketorolac tromethamine ophth soln 0.4%	4	
ACUVAIL - ketorolac tromethamine (pf) ophth soln 0.45%	4	
ALPHAGAN P - brimonidine tartrate ophth soln 0.1%, 0.15%	3	
ALREX - loteprednol etabonate ophth susp 0.2%	4	
apraclonidine hcl ophth soln 0.5% (base equivalent)	2	
atropine sulfate ophth soln 1%	2	
AZASITE - azithromycin ophth soln 1%	3	
azelastine hcl ophth soln 0.05%	2	
AZOPT - brinzolamide ophth susp 1%	4	
bacitracin-polymyxin b ophth oint	2	
bacitracin-polymyxin-neomycin-hc ophth oint 1%	2	
bepotastine besilate ophth soln 1.5%	2	
BEPREVE - bepotastine besilate ophth soln 1.5%	4	
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)	3	
betaxolol hcl ophth soln 0.5%	2	
BETIMOL - timolol ophth soln 0.5%	3	
BETOPTIC-S - betaxolol hcl ophth susp 0.25%	4	
bimatoprost ophth soln 0.03%	2	QL (15 mls/75 days)
brimonidine tartrate ophth soln 0.1%	3	
brimonidine tartrate ophth soln 0.15%	2	
brimonidine tartrate ophth soln 0.2%	1	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	2	
brinzolamide ophth susp 1%	2	
bromfenac sodium ophth soln 0.07% (base equivalent), 0.075% (base equivalent), 0.09% (base equiv) (once-daily)	2	
BROMSITE - bromfenac sodium ophth soln 0.075% (base equivalent)	4	
carteolol hcl ophth soln 1%	2	
CEQUA - cyclosporine (ophth) soln 0.09% (pf)	4	PA, QL (60 vials/30 days)
CILOXAN - ciprofloxacin hcl ophth oint 0.3%	4	
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	2	
COMBIGAN - brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	3	

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

Drug Name	Drug Tier	Requirements/Limits
COSOPT - dorzolamide hcl-timolol maleate ophth soln 2-0.5%	4	
COSOPT PF - dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%	4	
cromolyn sodium ophth soln 4%	2	
cyclosporine (ophth) emulsion 0.05% (pf)	3	QL (60 vials/30 days)
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)*	5	PA, QL (4 bottles/28 days)
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)*	5	PA, QL (4 bottles/28 days)
dexamethasone sodium phosphate ophth soln 0.1%	2	
diclofenac sodium ophth soln 0.1%	2	
difluprednate ophth emulsion 0.05%	2	
dorzolamide hcl ophth soln 2%	2	
dorzolamide hcl-timolol maleate ophth soln 2-0.5%	1	
dorzolamide hcl-timolol maleate pf ophth soln 2-0.5%	2	
DUREZOL - difluprednate ophth emulsion 0.05%	4	
ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml*	5	PA
epinastine hcl ophth soln 0.05%	2	
erythromycin ophth oint 5 mg/gm	2	
EYSUVIS - loteprednol etabonate ophth susp 0.25%	3	PA
FLAREX - fluorometholone acetate ophth susp 0.1%	4	
fluorometholone ophth susp 0.1%	2	
flurbiprofen sodium ophth soln 0.03%	2	
FML FORTE - fluorometholone ophth susp 0.25%	4	
FML LIQUIFILM - fluorometholone ophth susp 0.1%	4	
gatifloxacin ophth soln 0.5%	2	
gentamicin sulfate ophth soln 0.3%	2	
ILEVRO - nepafenac ophth susp 0.3%	4	
INVELTYS - loteprednol etabonate ophth susp 1%	3	
IOPIDINE - apraclonidine hcl ophth soln 1% (base equivalent)	4	
ISTALOL - timolol maleate ophth soln 0.5% (once-daily)	4	
IYUZEH - latanoprost (pf) ophth soln 0.005%	4	QL (90 single-use container(s)/90 days)
ketorolac tromethamine ophth soln 0.4%	2	
ketorolac tromethamine ophth soln 0.5%	2	
latanoprost ophth soln 0.005%	1	QL (15 mls/75 days)
levobunolol hcl ophth soln 0.5%	2	
LEVOFLOXACIN - levofloxacin ophth soln 0.5%	4	
LOTEMAX - loteprednol etabonate ophth oint 0.5%	3	

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Drug Name	Drug Tier	Requirements/Limits
LOTEMAX - loteprednol etabonate ophth susp 0.5%	4	
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	4	
loteprednol etabonate ophth gel 0.5%	2	
loteprednol etabonate ophth susp 0.2%, 0.5%	2	
loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	2	
LUMIGAN - bimatoprost ophth soln 0.01%	3	QL (15 mls/75 days)
MAXIDEX - dexamethasone ophth susp 0.1%	4	
MAXITROL - neomycin-polymyxin-dexamethasone ophth oint 0.1%	4	
MAXITROL - neomycin-polymyxin-dexamethasone ophth susp 0.1%	4	
MIEBO - perfluorohexyloctane ophth soln 1.338 gm/ml	3	PA, QL (1 bottle/30 days)
moxifloxacin hcl ophth soln 0.5% (base eq) (2 times daily)(generic for Moxeza)	2	
moxifloxacin hcl ophth soln 0.5% (base equiv)(generic for Vigamox)	2	
NATACYN - natamycin ophth susp 5%	4	
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	2	
neomycin-polymyxin-dexamethasone ophth oint 0.1%	2	
neomycin-polymyxin-dexamethasone ophth susp 0.1%	2	
NEOMYCIN/POLYMYXIN/GRAMICIDIN - neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	3	
NEOMYCIN/POLYMYXIN/HYDROCORTISONE - neomycin-polymyxin-hc ophth susp	4	
NEVANAC - nepafenac ophth susp 0.1%	4	
OCUFLOX - ofloxacin ophth soln 0.3%	4	
ofloxacin ophth soln 0.3%	2	
OXERVATE - cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	5	PA
pilocarpine hcl ophth soln 1%, 2%, 4%	2	
pilocarpine hcl ophth soln 1.25%	2	QL (15 mls/90 days)
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	1	
PRED FORTE - prednisolone acetate ophth susp 1%	4	
PRED MILD - prednisolone acetate ophth susp 0.12%	4	
prednisolone acetate ophth susp 1%	2	
prednisolone sodium phosphate ophth soln 1%	2	
PROLENSA - bromfenac sodium ophth soln 0.07% (base equivalent)	3	
RESTASIS - cyclosporine (ophth) emulsion 0.05% (pf)	3	QL (60 vials/30 days)
RESTASIS MULTIDOSE - cyclosporine (ophth) emulsion 0.05% (pf)	3	QL (2 bottles/30 days)
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%	3	QL (15 mls/75 days)
ROCKLATAN - netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%	3	QL (15 mls/75 days)

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Drug Name	Drug Tier	Requirements/Limits
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	3	
sulfacetamide sodium ophth soln 10%	2	
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	2	
tafluprost preservative free (pf) ophth soln 0.0015%	2	QL (90 single-use container(s)/90 days)
timolol maleate in ocudose - timolol maleate preservative free ophth soln 0.5%	2	
timolol maleate ophth gel forming soln 0.25%, 0.5%	2	
timolol maleate ophth soln 0.25%, 0.5%	1	
timolol maleate ophth soln 0.5% (once-daily)	2	
timolol maleate preservative free ophth soln 0.25%, 0.5%	2	
timolol ophth soln 0.5%	2	
TIMOPTIC OCUDOSE - timolol maleate preservative free ophth soln 0.25%, 0.5%	4	
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%	4	
TOBRADEX ST - tobramycin-dexamethasone ophth susp 0.3-0.05%	4	
tobramycin ophth soln 0.3%	2	
tobramycin-dexamethasone ophth susp 0.3-0.1%	2	
TOBREX - tobramycin ophth oint 0.3%	4	
TRAVATAN Z - travoprost ophth soln 0.004% (benzalkonium free) (bak free)	4	QL (15 mls/75 days)
travoprost ophth soln 0.004% (benzalkonium free) (bak free)	2	QL (15 mls/75 days)
TRIFLURIDINE - trifluridine ophth soln 1%	3	
TRYPTYR - acoltremon ophth soln 0.003%	4	PA, QL (60 vials/30 days)
TYRVAYA - varenicline tartrate nasal soln 0.03 mg/act	4	PA, QL (2 bottles/30 days)
VERKAZIA - cyclosporine (ophth) emulsion 0.1%	5	PA, QL (120 vials/30 days)
VEVYE - cyclosporine (ophth) soln 0.1%	4	PA, QL (1 bottle/30 days)
VIGAMOX - moxifloxacin hcl ophth soln 0.5% (base equiv)	4	
VUITY - pilocarpine hcl ophth soln 1.25%	4	QL (15 mls/90 days)
VYZULTA - latanoprostene bunod ophth soln 0.024%	4	QL (15 mls/75 days)
XALATAN - latanoprost ophth soln 0.005%	4	QL (15 mls/75 days)
XDEMVY - lotilaner ophth soln 0.25%	5	PA
XELPROS - latanoprost ophth emulsion 0.005%	4	QL (15 mls/75 days)
XIIDRA - lifitegrast ophth soln 5%	3	PA, QL (60 containers/30 days)
ZERVIATE - cetirizine hcl ophth soln 0.24% (base equiv)	4	
ZIOPTAN - tafluprost preservative free (pf) ophth soln 0.0015%	4	QL (90 single-use container(s)/90 days)
ZIRGAN - ganciclovir ophth gel 0.15%	4	

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Drug Name	Drug Tier	Requirements/Limits
ZOLYMBUS - bimatoprost preservative free (pf) ophth gel 0.01%	4	QL (90 single-use container(s)/90 days)
ZYLET - loteprednol etabonate-tobramycin ophth susp 0.5-0.3%	3	
Otic Agents		
acetic acid otic soln 2%	2	
CIPRO HC - ciprofloxacin-hydrocortisone otic susp 0.2-1%	4	
ciprofloxacin hcl otic soln 0.2% (base equivalent)	2	
ciprofloxacin-dexamethasone otic susp 0.3-0.1%	2	
ciprofloxacin-hydrocortisone otic susp 0.2-1%	2	
DERMOTIC - fluocinolone acetonide (otic) oil 0.01%	4	
fluocinolone acetonide (otic) oil 0.01%	2	
hydrocortisone w/ acetic acid otic soln 1-2%	2	
neomycin-polymyxin-hc otic soln 1%	2	
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	2	
ofloxacin otic soln 0.3%	2	
XTORO - finafloxacin otic susp 0.3%	4	
Respiratory Tract/Pulmonary Agents		
acetylcysteine inhal soln 10%, 20%	2	BD
ADCIRCA - tadalafil tab 20 mg (pah)	5	PA, QL (60 tablets/30 days)
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg*	5	PA, QL (90 tablets/30 days)
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	4	QL (1 inhaler/30 days), ST
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	3	QL (1 inhaler/30 days)
AIRSUPRA - albuterol-budesonide inhalation aerosol 90-80 mcg/act	4	QL (3 inhalers/30 days)
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	2	QL (2 inhalers/30 days)
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	2	BD
albuterol sulfate syrup 2 mg/5ml	2	
albuterol sulfate tab 2 mg, 4 mg	2	
ALVESCO - ciclesonide inhal aerosol 80 mcg/act	4	QL (1 inhaler/30 days)
ALVESCO - ciclesonide inhal aerosol 160 mcg/act	4	QL (2 inhalers/30 days)
ALYFTREK - vanzacaftor-tezacaftor-deutivacaftor tab 4-20-50 mg	5	PA, QL (84 tablets/28 days)
ALYFTREK - vanzacaftor-tezacaftor-deutivacaftor tab 10-50-125 mg	5	PA, QL (56 tablets/28 days)
alyq - tadalafil tab 20 mg (pah)	2	PA, QL (60 tablets/30 days)
*ambrisentan tab 5 mg, 10 mg**	2	PA, QL (30 tablets/30 days)
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	3	QL (1 package/30 days)
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	2	BD

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Drug Name	Drug Tier	Requirements/Limits
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	3	QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 120 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 14 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 30 METERED DOSES - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	3	QL (1 inhaler/30 days)
ASMANEX TWISTHALER 60 METERED DOSES - mometasone furoate inhal powd 220 mcg/act (breath activated)	3	QL (1 inhaler/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	4	QL (2 inhalers/30 days)
AUVI-Q - epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	4	
azelastine hcl nasal spray 0.1% (137 mcg/spray)	2	QL (2 bottles/30 days)
azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	2	QL (1 bottle/30 days)
BECLOMETHASONE DIPROPIONATE HFA - beclomethasone diprop inhal aero soln 40 mcg/act (50/valve)	4	QL (1 inhaler/30 days)
BECLOMETHASONE DIPROPIONATE HFA - beclomethasone diprop inhal aers 100 mcg/act (80/delivery)	4	QL (2 inhalers/30 days)
BETHKIS - tobramycin nebu soln 300 mg/4ml	5	BD, PA
BEVESPI AEROSPHERE - glycopyrrolate-formoterol fumarate aerosol 9-4.8 mcg/act	4	QL (1 inhaler/30 days)
bosentan tab for oral susp 32 mg	5	PA, QL (120 tablets/30 days)
*bosentan tab 62.5 mg, 125 mg**	5	PA, QL (60 tablets/30 days)
BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	3	QL (1 package/30 days)
breyna - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act	2	QL (3 inhalers/30 days)
breyna - budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act	2	QL (3 inhalers/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	3	QL (1 inhaler/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-18-4.8 mcg/act	3	QL (1 inhaler/30 days)
BRINSUPRI - brensocatib tab 10 mg, 25 mg	5	PA, QL (30 tablets/30 days)
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml	2	BD
budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	2	QL (3 inhalers/30 days)
CARBINOXAMINE MALEATE - carbinoxamine maleate soln 4 mg/5ml#	4	PA (>=65 yr)

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Drug Name	Drug Tier	Requirements/Limits
CARBINOXAMINE MALEATE ER - carbinoxamine maleate extended release susp 4 mg/5ml#	4	PA (>=65 yr)
carbinoxamine maleate tab 4 mg#	1	PA (>=65 yr)
carbinoxamine maleate tab 6 mg#	5	PA (>=65 yr)
CARBZAH - carbinoxamine maleate soln 4 mg/5ml#	5	PA (>=65 yr)
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)*	5	PA
cetirizine hcl oral soln 1 mg/ml (5 mg/5ml)	2	
CINQAIR - reslizumab iv infusion soln 100 mg/10ml (10 mg/ml)	5	PA
CLARINEX - desloratadine tab 5 mg	4	
CLARINEX-D 12 HOUR - desloratadine & pseudoephedrine tab er 12hr 2.5-120 mg	4	
CLEMASTINE FUMARATE - clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)#	5	PA (>=65 yr)
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg#	4	PA (>=65 yr)
CLEMSZA - clemastine fumarate tab 2.68 mg#	5	PA (>=65 yr)
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	4	QL (2 inhalers/30 days)
CORPHENA - dexchlorpheniramine maleate oral soln 2 mg/5ml#	5	
cromolyn sodium soln nebu 20 mg/2ml	2	BD
cyproheptadine hcl syrup 2 mg/5ml#	2	PA (>=65 yr)
cyproheptadine hcl tab 4 mg#	2	PA (>=65 yr)
DALIRESP - roflumilast tab 250 mcg, 500 mcg	4	PA, QL (30 tablets/30 days)
DESLORATADINE - desloratadine oral soln 0.5 mg/ml	5	
DESLORATADINE ODT - desloratadine tab orally disintegrating 2.5 mg, 5 mg	4	
desloratadine tab 5 mg	1	
DUAKLIR PRESSAIR - aclidinium br-formoterol fum aero pow br act 400-12 mcg/act	4	QL (1 inhaler/30 days)
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	3	QL (3 inhalers/30 days)
DYMISTA - azelastine hcl-fluticasone prop nasal spray 137-50 mcg/act	4	QL (1 bottle/30 days)
elixophyllin - theophylline elixir 80 mg/15ml	2	
EOHILIA - budesonide oral suspension 2 mg/10ml	5	PA
EPINEPHRINE - epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000)	3	
EPINEPHRINE - epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)(authorized generic for Adrenaclick 0.3 mg/0.3 mL)	2	
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	2	
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)(generic for EpiPen 2-Pak)	2	

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

Drug Name	Drug Tier	Requirements/Limits
EPIPEN 2-PAK - epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000)	4	
EPIPEN-JR 2-PAK - epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000)	4	
ESBRIET - pirfenidone tab 267 mg*	5	PA, QL (270 tablets/30 days)
ESBRIET - pirfenidone tab 801 mg*	5	PA, QL (90 tablets/30 days)
FASENRA - benralizumab subcutaneous soln prefilled syringe 10 mg/0.5ml, 30 mg/ml	5	PA, QL (1 syringe/28 days)
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	5	PA, QL (1 pen/28 days)
flunisolide nasal soln 25 mcg/act (0.025%)	2	QL (3 bottles/30 days)
FLUTICASONE FUROATE ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	4	QL (30 blisters/30 days)
FLUTICASONE PROPIONATE DISKUS - fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act	4	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE DISKUS - fluticasone propionate aer pow ba 250 mcg/act	4	QL (4 inhalers/30 days)
FLUTICASONE PROPIONATE HFA - fluticasone propionate hfa inhal aer 110 mcg/act	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE HFA - fluticasone propionate hfa inhal aer 220 mcg/act	3	QL (2 inhalers/30 days)
fluticasone propionate hfa inhal aero 44 mcg/act	2	QL (1 inhaler/30 days)
fluticasone propionate nasal susp 50 mcg/act	2	QL (1 bottle/30 days)
FLUTICASONE PROPIONATE/SALMETEROL - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	3	QL (1 inhaler/30 days)
FLUTICASONE PROPIONATE/SALMETEROL HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	4	QL (1 inhaler/30 days)
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	2	QL (1 inhaler/30 days)
formoterol fumarate soln nebu 20 mcg/2ml	2	BD
GRASTEK - timothy grass pollen allergen ext sl tab 2800 bau	4	PA, QL (30 tablets/30 days)
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	3	QL (30 blisters/30 days)
ipratropium bromide hfa inhal aerosol 17 mcg/act	2	QL (2 inhalers/30 days)
ipratropium bromide inhal soln 0.02%	2	BD
ipratropium bromide nasal soln 0.03% (21 mcg/spray)	2	QL (2 bottles/30 days)
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	2	QL (3 bottles/30 days)
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	2	BD
JASCAYD - nerandomilast tab 9 mg, 18 mg	5	PA, QL (60 tablets/30 days)
KALYDECO - ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg*	5	PA, QL (60 packets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
KALYDECO - ivacaftor tab 150 mg*	5	PA, QL (60 tablets/30 days)
KARBINAL ER - carbinoxamine maleate extended release susp 4 mg/5ml#	4	PA (>=65 yr)
KITABIS PAK - tobramycin nebu soln 300 mg/5ml	5	BD, PA
LETAIRIS - ambrisentan tab 5 mg, 10 mg*	5	PA, QL (30 tablets/30 days)
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)	2	BD
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	2	BD
LEVALBUTEROL TARTRATE HFA - levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	4	QL (2 inhalers/30 days)
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	2	
levocetirizine dihydrochloride tab 5 mg	1	
macitentan tab 10 mg	5	PA, QL (30 tablets/30 days)
mometasone furoate nasal susp 50 mcg/act	2	QL (2 bottles/30 days)
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)	2	
montelukast sodium oral granules packet 4 mg (base equiv)	2	
montelukast sodium tab 10 mg (base equiv)	1	
NEFFY - epinephrine nasal spray 1 mg/0.1ml, 2 mg/0.1ml	4	
nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)†	5	PA, QL (60 capsules/30 days)
NUCALA - mepolizumab for inj 100 mg*	5	PA, QL (3 vials/28 days)
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml*	5	PA, QL (3 pens/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml*	5	PA, QL (1 syringe/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 100 mg/ml*	5	PA, QL (3 syringes/28 days)
ODACTRA - dust mite mixed ext sl tab 12 sq-hdm	4	PA, QL (30 tablets/30 days)
OFEV - nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)*†	5	PA, QL (60 capsules/30 days)
OHTUVAYRE - ensifentrine inhalation susp 3 mg/2.5ml	5	BD, PA, QL (60 ampules/30 days)
olopatadine hcl nasal soln 0.6%	2	QL (1 bottle/30 days)
OMNARIS - ciclesonide nasal susp 50 mcg/act	4	QL (1 inhaler/30 days)
OPSUMIT - macitentan tab 10 mg*	5	PA, QL (30 tablets/30 days)
OPSYNVI - macitentan-tadalafil tab 10-20 mg, 10-40 mg	5	PA, QL (30 tablets/30 days)
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv)	4	PA
ORENITRAM - treprostinil diolamine tab er 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	5	PA
ORENITRAM TITRATION KIT MONTH 1 - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg	5	PA

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

Drug Name	Drug Tier	Requirements/Limits
ORENITRAM TITRATION KIT MONTH 2 - treprostinil tab er titr pk (mo2) 126 x0.125mg & 210 x0.25mg	5	PA
ORENITRAM TITRATION KIT MONTH 3 - treprostinil tab er titr pk(mo3)126x0.125mg&42x0.25mg&84x1mg	5	PA
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg*	5	PA, QL (60 packets/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg*	5	PA, QL (120 tablets/30 days)
PERFOROMIST - formoterol fumarate soln nebu 20 mcg/2ml	5	BD
PIRFENIDONE - pirfenidone tab 534 mg	5	PA, QL (90 tablets/30 days)
pirfenidone cap 267 mg	5	PA, QL (270 capsules/30 days)
pirfenidone tab 267 mg	2	PA, QL (270 tablets/30 days)
pirfenidone tab 801 mg	5	PA, QL (90 tablets/30 days)
PROAIR RESPICLICK - albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)	4	QL (2 canisters/30 days)
promethazine & phenylephrine syrup 6.25-5 mg/5ml#	2	
PULMICORT - budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml	4	BD
PULMICORT FLEXHALER - budesonide inhal aero powd 90 mcg/act (breath activated)	4	QL (1 inhaler/30 days)
PULMICORT FLEXHALER - budesonide inhal aero powd 180 mcg/act (breath activated)	4	QL (2 inhalers/30 days)
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	5	BD
QNASL - beclomethasone dipropionate nasal aerosol 80 mcg/act	4	QL (1 inhaler/30 days)
QNASL CHILDRENS - beclomethasone dipropionate nasal aerosol 40 mcg/act	4	QL (1 inhaler/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act	3	QL (1 inhaler/30 days)
QVAR REDIHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act	3	QL (2 inhalers/30 days)
REVATIO - sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)	5	PA, QL (90 vials/30 days)
REVATIO - sildenafil citrate tab 20 mg	5	PA, QL (90 tablets/30 days)
roflumilast tab 250 mcg, 500 mcg	2	PA, QL (30 tablets/30 days)
RYALTRIS - olopatadine hcl-mometasone furoate nasal susp 665-25 mcg/act	4	QL (1 bottle/30 days)
RYCLORA - dexchlorpheniramine maleate oral soln 2 mg/5ml#	4	
ryvent - carbinoxamine maleate tab 6 mg#	2	PA (>=65 yr)
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	3	QL (1 inhaler/30 days)
sildenafil citrate for suspension 10 mg/ml	2	PA, QL (224 mls/30 days)
sildenafil citrate iv soln 10 mg/12.5ml (base equivalent)	5	PA, QL (90 vials/30 days)
sildenafil citrate tab 20 mg	2	PA, QL (90 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
SINGULAIR - montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)	4	
SINGULAIR - montelukast sodium oral granules packet 4 mg (base equiv)	4	
SINGULAIR - montelukast sodium tab 10 mg (base equiv)	4	
SPIRIVA HANDIHALER - tiotropium bromide inhal cap 18 mcg (base equiv)	4	QL (30 capsules/30 days), ST
SPIRIVA RESPIMAT - tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act	3	QL (1 inhaler/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	3	QL (1 canister/30 days)
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	4	QL (1 cartridge/30 days)
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	4	QL (3 inhalers/30 days), ST
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	5	PA, QL (60 tablets/30 days)
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	5	PA, QL (60 tablets/30 days)
tadalafil tab 20 mg (pah)	2	PA, QL (60 tablets/30 days)
TADLIQ - tadalafil oral susp 20 mg/5ml (pah)	5	PA, QL (2 bottles/30 days)
terbutaline sulfate tab 2.5 mg, 5 mg	2	
TEZSPIRE - tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	5	PA, QL (1 pen/28 days)
THEO-24 - theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	4	
theophylline elixir 80 mg/15ml	2	
THEOPHYLLINE ER - theophylline tab er 12hr 100 mg, 200 mg	4	
theophylline soln 80 mg/15ml	2	
theophylline tab er 12hr 300 mg, 450 mg	2	
theophylline tab er 24hr 400 mg, 600 mg	2	
tiotropium bromide inhal cap 18 mcg (base equiv)	2	QL (30 capsules/30 days)
TOBI - tobramycin nebu soln 300 mg/5ml	5	BD, PA
TOBI PODHALER - tobramycin inhal cap 28 mg	5	PA
tobramycin nebu soln 300 mg/5ml, 300 mg/4ml	5	BD, PA
TRACLEER - bosentan tab for oral susp 32 mg*	5	PA, QL (120 tablets/30 days)
TRACLEER - bosentan tab 62.5 mg, 125 mg*	5	PA, QL (60 tablets/30 days)
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	3	QL (60 blisters/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	5	PA, QL (60 packets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	5	PA, QL (60 packets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	5	PA, QL (90 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg &ivacaftor 150 mg tbpk	5	PA, QL (90 tablets/30 days)
TUDORZA PRESSAIR - aclidinium bromide aerosol powd breath activated 400 mcg/act	4	QL (1 inhaler/30 days)
TYVASO DPI INSTITUTIONAL KIT - treprostinil inh powder 16 mcg/cartridge, 32 mcg/cartridge, 48 mcg/cartridge, 64 mcg/cartridge, 80 mcg/cartridge*	5	PA, QL (1 pack/28 days)
TYVASO DPI MAINTENANCE KIT - treprostinil inh powder 16 mcg/cartridge, 32 mcg/cartridge, 48 mcg/cartridge, 64 mcg/cartridge, 80 mcg/cartridge, 112 x 32mcg & 112 x 64mcg, 112 x 48mcg & 112 x 64mcg, 112 x 48mcg & 112 x 80mcg*	5	PA, QL (1 pack/28 days)
TYVASO DPI TITRATION KIT - treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg*	5	PA, QL (1 pack/28 days)
UMECLIDINIUM ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	4	QL (30 blisters/30 days)
UPTRAVI - selexipag tab 100 mcg, 150 mcg*	5	PA, QL (560 tablets/30 days)
UPTRAVI - selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg*	5	PA, QL (60 tablets/30 days)
UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)*	5	PA, QL (1 pack (200 tablets)/28 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	3	QL (2 inhalers/30 days)
WINREVAIR - sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	5	PA, QL (1 kit/21 days)
wixela inhub - fluticasone-salmeterol aer powder ba 100-50 mcg/act	2	QL (1 inhaler/30 days)
wixela inhub - fluticasone-salmeterol aer powder ba 250-50 mcg/act	2	QL (1 inhaler/30 days)
wixela inhub - fluticasone-salmeterol aer powder ba 500-50 mcg/act	2	QL (1 inhaler/30 days)
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act	4	QL (2 bottles/30 days)
XOPENEX HFA - levalbuterol tartrate inhal aerosol 45 mcg/act (base equiv)	4	QL (2 inhalers/30 days)
YUPELRI - revefenacin nebulizing solution 175 mcg/3ml	5	BD
YUTREPIA - treprostinil sodium inhal cap 26.5 mcg, 53 mcg, 79.5 mcg, 106 mcg	5	PA, QL (140 capsules/28 days)
zafirlukast tab 10 mg, 20 mg	2	
zileuton tab er 12hr 600 mg	5	
Skeletal Muscle Relaxants		
AMRIX - cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg#	5	
ATMEKSI - methocarbamol oral susp 750 mg/5ml	5	
chlorzoxazone tab 250 mg#	5	

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

Drug Name	Drug Tier	Requirements/Limits
chlorzoxazone tab 375 mg, 750 mg#	2	
chlorzoxazone tab 500 mg#	1	
cyclobenzaprine hcl cap er 24hr 15 mg, 30 mg#	2	
cyclobenzaprine hcl tab 5 mg, 7.5 mg, 10 mg#	2	
fexmid - cyclobenzaprine hcl tab 7.5 mg#	2	
METAXALONE - metaxalone tab 640 mg#	4	
metaxalone tab 400 mg, 800 mg#	2	
methocarbamol tab 500 mg, 750 mg#	2	
methocarbamol tab 1000 mg#	5	
NORGESIC - orphenadrine w/ aspirin & caffeine tab 25-385-30 mg#	5	
NORGESIC FORTE - orphenadrine w/ aspirin & caffeine tab 50-770-60 mg#	5	
orphenadrine citrate tab er 12hr 100 mg#	2	
ORPHENADRINE/ASPIRIN/CAFFEINE - orphenadrine w/ aspirin & caffeine tab 25-385-30 mg#	5	
tanlor - methocarbamol tab 1000 mg#	5	
Sleep Disorder Agents		
AMBIEN - zolpidem tartrate tab 5 mg, 10 mg#	4	QL (30 tablets/30 days)
AMBIEN CR - zolpidem tartrate tab er 6.25 mg, 12.5 mg#	4	QL (30 tablets/30 days)
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg	2	PA, QL (30 tablets/30 days)
BELSOMRA - suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	3	PA, QL (30 tablets/30 days)
DAYVIGO - lemborexant tab 5 mg, 10 mg	3	PA, QL (30 tablets/30 days)
doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	2	QL (30 tablets/30 days)
EDLUAR - zolpidem tartrate sl tab 5 mg, 10 mg#	4	QL (30 tablets/30 days)
estazolam tab 1 mg, 2 mg	2	PA (>=65 yr), QL (30 tablets/30 days)
eszopiclone tab 1 mg, 2 mg, 3 mg#	1	QL (30 tablets/30 days)
FLURAZEPAM HYDROCHLORIDE - flurazepam hcl cap 15 mg, 30 mg	4	PA (>=65 yr), QL (30 capsules/30 days)
HETLIOZ - tasimelteon capsule 20 mg*	5	PA, QL (30 capsules/30 days)
HETLIOZ LQ - tasimelteon oral susp 4 mg/ml*	5	PA, QL (158 mls/30 days)
LUMRYZ - sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm*	5	PA, QL (30 packets/30 days)
LUMRYZ STARTER PACK - sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak*	5	PA, QL (28 packets/28 days)
LUNESTA - eszopiclone tab 1 mg, 2 mg, 3 mg#	4	QL (30 tablets/30 days)
modafinil tab 100 mg, 200 mg	2	PA, QL (30 tablets/30 days)
NUVIGIL - armodafinil tab 50 mg	4	PA, QL (30 tablets/30 days)
NUVIGIL - armodafinil tab 150 mg, 200 mg, 250 mg	5	PA, QL (30 tablets/30 days)

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

Drug Name	Drug Tier	Requirements/Limits
PROVIGIL - modafinil tab 100 mg, 200 mg	5	PA, QL (30 tablets/30 days)
QUVIVIQ - daridorexant hcl tab 25 mg, 50 mg	4	PA, QL (30 tablets/30 days)
ramelteon tab 8 mg	2	QL (30 tablets/30 days)
RESTORIL - temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg	4	QL (30 capsules/30 days)
ROZEREM - ramelteon tab 8 mg	4	QL (30 tablets/30 days)
SILENOR - doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	4	QL (30 tablets/30 days)
sodium oxybate oral solution 500 mg/ml	5	PA, QL (540 mls/30 days)
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	4	PA, QL (30 tablets/30 days)
tasimelteon capsule 20 mg	5	PA, QL (30 capsules/30 days)
temazepam cap 7.5 mg, 22.5 mg	2	QL (30 capsules/30 days)
temazepam cap 15 mg, 30 mg	1	QL (30 capsules/30 days)
WAKIX - pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	5	PA, QL (60 tablets/30 days)
XYREM - sodium oxybate oral solution 500 mg/ml*	5	PA, QL (540 mls/30 days)
XYWAV - calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml*	5	PA, QL (540 mls/30 days)
zaleplon cap 5 mg#	2	QL (30 capsules/30 days)
zaleplon cap 10 mg#	2	QL (60 capsules/30 days)
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 2.5 mg/0.5ml	5	PA, QL (4 pens/180 days)
ZEPBOUND - tirzepatide (weight mngmt) soln auto-injector 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	5	PA, QL (4 pens/28 days)
ZEPBOUND - tirzepatide (weight mngmt) soln 2.5 mg/0.5ml	4	PA, QL (4 vials/180 days)
ZEPBOUND - tirzepatide (weight mngmt) soln 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	4	PA, QL (4 vials/28 days)
ZEPBOUND KWIKPEN - tirzepatide (weight mngmt) soln pen-injector 2.5 mg/0.6ml	5	PA, QL (1 pen/180 days)
ZEPBOUND KWIKPEN - tirzepatide (weight mngmt) soln pen-injector 5 mg/0.6ml, 7.5 mg/0.6ml, 10 mg/0.6ml, 12.5 mg/0.6ml, 15 mg/0.6ml	5	PA, QL (1 pen/28 days)
ZOLPIDEM TARTRATE - zolpidem tartrate cap 7.5 mg	4	QL (30 capsules/30 days)
zolpidem tartrate sl tab 1.75 mg#	2	QL (30 tablets/30 days)
zolpidem tartrate sl tab 3.5 mg#	2	QL (30 tablets/30 days)
zolpidem tartrate tab er 6.25 mg, 12.5 mg#	1	QL (30 tablets/30 days)
zolpidem tartrate tab 5 mg, 10 mg#	2	QL (30 tablets/30 days)

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ATTENTION: If you speak any of the following languages, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-888-247-4142 (TTY: 711), or speak to your provider.

Spanish / Español
ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayudas y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 1-888-247-4142 (TTY: 711) o hable con su proveedor.

Chinese / 中文
注意：如果您说中文，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。致电 1-888-247-4142 (TTY: 711) 或咨询您的服务提供商。

Vietnamese / Việt
LƯU Ý: Nếu quý vị nói tiếng Việt, các dịch vụ hỗ trợ ngôn ngữ được cấp miễn phí. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo định dạng dễ tiếp cận cũng được cung cấp miễn phí. Vui lòng gọi theo số 1-888-247-4142 (Người khuyết tật: 711) hoặc trao đổi với nhà cung cấp dịch vụ của quý vị.

Korean / 한국어
알림: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 1-888-247-4142 (TTY: 711) 번으로 전화하거나 서비스 제공업체에 문의하십시오.

French / Français
ATTENTION: Si vous parlez français, vous pouvez bénéficier de services d'assistance gratuits. Vous avez également à votre disposition des outils et services supplémentaires vous permettant de fournir des informations dans un format accessible, sans frais. Appelez le 1-888-247-4142 (TTY: 711) ou parlez à votre fournisseur.

Arabic / العربية
تنبيه: إذا كنت تتحدث اللغة العربية، تتوفر لك خدمات مساعدة لغوية مجانية. كما تتوفرمساعدة وخدمات إضافية مناسبة لتقديم المعلومات بتنسيقات يمكن الوصول إليها مجانًا. يُرجى الاتصال على الرقم 1-888-247-4142 (TTY: 711)
أو تحدث مع مزود الخدمة الخاص بك

Hmong / Lus Hmoob
LUG CEEV TSHWJ XEEB: yog has tas koj has lug Hmoob muaj cov kev paab cuam txhais lug pub dlawb rua koj. Cov kev paab hab cov kev paab cuam ntxiv kws tsim nyog txhawm rua muab lug qha paub ua cov hom ntaub ntawv kws tuaj yeem nkaag cuag tau rua los kuj yeej tseem muaj paab dlawb tsis xaam tug nqe dlaab tsi tuab yaam nkaus. Hu rua 1-888-247-4142 (TTY: 711) los yog thaam nrug koj tug kws muab kev saib xyuas khu mob.

Russian / РУССКИЙ
ВНИМАНИЕ: Если Вы говорите на русском, то Вам доступны бесплатные услуги языковой поддержки. Соответствующие инструменты и информационные сервисы также предоставляются бесплатно. Позвоните по телефону 1-888-247-4142 (TTY: 711) или обратитесь к своему поставщику услуг.

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Blue Medicare PDP[SM]

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

BlueCross BlueShield of North Carolina

Tagalog
PAALALA: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng serbisyong tulong sa wika. Magagamit din nang libre ang mga naaangkop na auxiliary na tulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na format. Tumawag sa 1-888-247-4142 (TTY: 711) o makipag-usap sa iyong provider.

Gujarati / ગુજરાતી
ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હોવ તો, મફત ભાષાકીય સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. યોગ્ય ઑક્ઝિલરી સહાય અને ઍક્સેસિબલ ફૉર્મેટમાં માહિતી પૂરી પાડવા માટેની સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. 1-888-247-4142 (TTY: 711) પર કૉલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.

Mon-Khmer, Cambodian / ភាសាខ្មែរ
កំណត់ចំំណាំ៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ សេវាកម្មជំនួយភាសាឥតគិតថ្លៃគឺមានផ្តល់ជូនសម្រាប់អ្នក។ ជំនួយ និងសេវាកម្មសមរម្យ ក្នុងការផ្តល់ព័ត៌មានតាមទម្រង់ដែលអាចចូលប្រើប្រាស់បានក៏មានផ្តល់ជូនដោយឥតគិតថ្លៃផងដែរ។ សូមទូរស័ព្ទទៅលេខ 1-888-247-4142 (TTY: 711) និយាយទៅកាន់អ្នកផ្តល់សេវារបស់អ្នក។

German / Deutsch
WICHTIGER HINWEIS: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistenzdienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Rufen Sie 1-888-247-4142 (TTY: 711) oan oder sprechen Sie mit Ihrem Provider.

Hindi / हिंदी
ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध होती हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 1-888-247-4142 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

Laotian / ລາວ
ເຊີນຊາບ: ຖ້າທ່ານເວົ້າພາສາ ລາວ, ຈະມີບໍລິການຊ່ວຍດ້ານພາສາແບບບໍ່ເສຍຄ່າໃຫ້ທ່ານ. ມີເຄື່ອງຊ່ວຍ ແລະ ການບໍລິການແບບບໍ່ເສຍຄ່າທີ່ ເໝາະສົມເພື່ອໃຫ້ຂໍ້ມູນໃນຮູບແບບທີ່ສາມາດເຂົ້າເຖິງໄດ້. ໂທຫາເບີ 1-888-247-4142 (TTY: 711) ຫຼື ລົມກັບຜູ້ໃຫ້ບໍລິການຂອງທ່ານ.

Japanese / 日本語
お知らせ：日本語をお話しの場合、無料の言語支援サービスをご利用いただけます。アクセス可能な形式で情報を提供するための適切な補助的なサポートやサービスも無料でご利用いただけます。1-888-247-4142 (TTY: 711) にお電話いただくか、プロバイダーにお問い合わせください。

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Blue Medicare Rx Enhanced℠ (PDP)

Enhanced plan (employer group)

An updated formulary is located on our website at **BlueCrossNC.com/Members/Medicare/Forms-Library**. You may also call Customer Service for updated information.

This formulary was updated on 10/01/2026.

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For more recent information or other questions, please contact Customer Service:

Blue Medicare Rx Enhanced℠ (PDP)

888-247-4142 (TTY users should call 711)
8 a.m. – 8 p.m. daily

or visit **BlueCrossNC.com/Members/Medicare**

BlueCross BlueShield of North Carolina