



CareSource[®]

CareSource Ohio Medicaid

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INTRODUCTION

We are pleased to provide the 2020 **CareSource Medicaid Formulary** as a useful reference and informational tool. This document can assist medical providers in selecting clinically-appropriate and cost-effective products for their patients. While all Ohio Medicaid drugs are covered by CareSource, this is a list of preferred medications.

The drugs represented have been reviewed by a National Pharmacy and Therapeutics (P&T) Committee and then approved by a local Pharmacy, Therapeutics and Technology (PT&T) Committee for inclusion. The document is reflective of current medical practice as of the date of review.

The information contained in this document and its appendices is provided solely for the convenience of medical providers. We do not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. This document is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in his or her choice of prescription drugs. All the information in the document is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

We assume no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the National Guideline Clearinghouse site at <http://www.guideline.gov>, on the websites listed under each therapeutic class and on the sites listed in the WEBSITES section of this publication.

PREFACE

The document is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action. Products are listed by generic name with brand name for reference only. Unless the cited drug is available as an injectable or an exception is specifically noted, generally, all applicable dosage forms and strengths of the drug cited are included in the document.

PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The services of an independent National Pharmacy and Therapeutics (P&T) Committee are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of experts from across the United States. The P&T Committee's voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Employees with

significant clinical expertise are invited to meet with the P&T Committee, but no employee may vote on issues before the P&T Committee. Voting members of the P&T Committee must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

In addition to the National P&T Committee review, the CareSource Pharmacy Therapeutics and Technology (PT&T) Committee makes formulary recommendations based upon the needs of regional member demographics. The CareSource PT&T Committee is comprised of the Plan's Medical Directors, Pharmacy staff and representatives from the medical community.

DRUG LIST PRODUCT DESCRIPTIONS

To assist in understanding which specific strengths and dosage forms on the document are covered, examples are noted below. The general principles shown in the examples can usually be extended to other entries in the document. Any exceptions are noted.

Listed products on the document generally include all strengths and dosage forms of the cited brand- name product.

pregabalin

Lyrica

Oral capsules, oral solution and all strengths of Lyrica would be included in this listing.

When a strength, dosage or different formulation is specified, only that specific strength, dosage or formulation may be covered. Other strengths/dosage/formulations, including injectable dosage forms of the reference product, are not covered.

colestipol tabs

Colestid

The generic-name oral tablet formulation is on the document. From this entry, the oral packets and granules cannot be assumed to be on the list unless there is a separate entry.

Extended-release and delayed-release products require their own entry.

metformin

Glucophage

The immediate-release product listing of Glucophage alone would not include the extended-release product Glucophage XR.

metformin ext-rel

Glucophage XR

A separate entry for Glucophage XR confirms that the extended-release product is on the document.

Dosage forms on the document will be consistent with the category and use where listed.

neomycin/polymyxin B/hydrocortisone

Cortisporin

Since Cortisporin is listed only in the OTIC section, it is limited to the otic solution and suspension. From this entry the topical cream cannot be assumed to be on the list unless there is an entry for this product in the DERMATOLOGY section of the document.

GENERIC SUBSTITUTION

Generic substitution is a pharmacy action whereby a generic version is dispensed rather than a prescribed brand-name product. **Boldface type** indicates generic availability. However, not all strengths or dosage forms of the generic name in boldface type may be generically available. In most instances, a brand-name drug

for which a generic product becomes available will become non-formulary, with the generic product covered in its place, upon release of the generic product onto the market. However, the document is subject to state specific regulations and rules regarding generic substitution and mandatory generic rules apply where appropriate.

Generic drugs are usually priced lower than their brand-name equivalents and should be considered the first line of prescribing subject to applicable rules. Prescription generic drugs are:

- Approved by the U.S. Food and Drug Administration for safety and effectiveness, and are manufactured under the same strict standards that apply to brand-name drugs.
- Tested in humans to assure the generic is absorbed into the bloodstream in a similar rate and extent compared to the brand-name drug (bioequivalence). Generics may be different from the brand in size, color and inactive ingredients, but this does not alter their effectiveness or ability to be absorbed just like the brand-name drug.
- Manufactured in the same strength and dosage form as the brand-name drugs.

When a generic drug is substituted for a brand-name drug, you can expect the generic to produce the same clinical effect and safety profile as the brand-name drug (therapeutic equivalence).

PLAN DESIGN

The document represents a closed formulary plan design. The medications listed on the document are covered by the plan as represented. Certain medications on the list are covered if utilization management criteria are met (i.e. Step Therapy, Prior Authorization, Quantity Limits, etc); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity. If a medication is not listed on the document, a formulary exception may be requested for coverage. Medical necessity or formulary exception requests will be reviewed based on drug-specific prior authorization criteria or standard non-formulary prescription request criteria.

NOTICE

The information contained in this document is proprietary. The information may not be copied in whole or in part without written permission. ©2019. All rights reserved.

This document contains references to brand-name prescription drugs that are trademarks or registered trademarks of pharmaceutical manufacturers.

CareSource does not operate the websites/organizations listed here, nor is it responsible for the availability or reliability of the websites' content. These listings do not imply or constitute an endorsement, sponsorship or recommendation by CareSource.

Please be advised that this document is updated periodically and changes may appear prior to their effective date to allow for client notification.

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List of Abbreviations

1: Preferred generic product

2: Preferred brand product

ACA: Affordable Care Act.

LA: Limited Availability. This prescription may be available only at certain pharmacies. For more information, please call Customer Service.

OTC: Over the Counter. An OTC drug is a non-prescription drug.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the 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, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements / Limits
ANTI - INFECTIVES		
ANTIFUNGAL AGENTS		
<i>clotrimazole mucous membrane</i>	1	
<i>fluconazole</i>	1	
<i>flucytosine</i>	1	
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>ketoconazole oral</i>	1	
<i>nystatin oral suspension</i>	1	
<i>nystatin oral tablet</i>	1	
<i>terbinafine hcl oral</i>	1	QL
ANTIVIRALS		
<i>abacavir oral tablet</i>	1	
<i>abacavir-lamivudine</i>	1	
<i>abacavir-lamivudine-zidovudine</i>	1	
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension 200 mg/5 ml</i>	1	
<i>acyclovir oral tablet</i>	1	
<i>adefovir</i>	1	PA
<i>amantadine hcl</i>	1	
ATRIPLA	2	
BARACLUDE ORAL SOLUTION	2	PA
BIKTARVY	2	QL
CIMDUO	2	

Drug Name	Drug Tier	Requirements / Limits
COMPLERA	2	
DELSTRIGO	2	QL
DESCOVY	2	
DOVATO	2	QL
<i>efavirenz</i>	1	
EMTRIVA	2	
<i>entecavir</i>	1	PA
EPIVIR HBV ORAL SOLUTION	2	
EVOTAZ	2	
GENVOYA	2	
ISENTRESS HD	2	QL
ISENTRESS ORAL POWDER IN PACKET	2	
ISENTRESS ORAL TABLET	2	QL
ISENTRESS ORAL TABLET,CHEWABLE	2	
JULUCA	2	QL
KALETRA ORAL TABLET	2	
<i>lamivudine oral tablet 100 mg</i>	1	
<i>lopinavir-ritonavir</i>	1	
MAVYRET	2	PA
NORVIR ORAL POWDER IN PACKET	2	QL
NORVIR ORAL SOLUTION	2	
ODEFSEY	2	
<i>oseltamivir</i>	1	QL
PIFELTRO	2	QL

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
PREZCOBIX	2	
PREZISTA ORAL SUSPENSION	2	QL
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG	2	
RELENZA DISKHALER	2	QL
REYATAZ ORAL CAPSULE 150 MG, 200 MG, 300 MG	2	
REYATAZ ORAL POWDER IN PACKET	2	
<i>ribavirin oral capsule</i>	1	PA
<i>ribavirin oral tablet 200 mg</i>	1	
<i>rimantadine</i>	1	
<i>ritonavir</i>	1	
SOFOSBUVIR-VELPATASVIR	2	PA
SYMFI	2	
SYMFI LO	2	
SYNAGIS	2	PA
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY	2	
TRIUMEQ	2	
TRUVADA	2	
<i>valacyclovir</i>	1	
<i>valganciclovir</i>	1	
VIREAD ORAL TABLET 150 MG, 200 MG	2	

Drug Name	Drug Tier	Requirements / Limits
<i>zidovudine</i>	1	
CEPHALOSPORINS		
<i>cefaclor oral capsule</i>	1	
<i>cefaclor oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml</i>	1	PA
<i>cefaclor oral tablet extended release 12 hr</i>	1	
<i>cefadroxil oral capsule</i>	1	
<i>cefadroxil oral suspension for reconstitution 250 mg/5 ml, 500 mg/5 ml</i>	1	
<i>cefadroxil oral tablet</i>	1	
<i>cefdinir</i>	1	
<i>cefprozil oral suspension for reconstitution</i>	1	PA
<i>cefprozil oral tablet</i>	1	
<i>cefuroxime axetil oral tablet</i>	1	
<i>cephalexin oral capsule 250 mg, 500 mg</i>	1	
<i>cephalexin oral suspension for reconstitution</i>	1	
<i>cephalexin oral tablet</i>	1	
ERYTHROMYCINS / OTHER MACROLIDES		
<i>azithromycin oral</i>	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
<i>clarithromycin</i>	1	
<i>ery-tab oral tablet, delayed release (dr/ec) 250 mg, 333 mg</i>	1	
<i>erythrocin (as stearate) oral tablet 250 mg</i>	1	
<i>erythromycin ethylsuccinate oral suspension for reconstitution</i>	1	
<i>erythromycin ethylsuccinate oral tablet</i>	1	
<i>erythromycin oral</i>	1	
MISCELLANEOUS ANTIINFECTIVES		
<i>albendazole</i>	1	PA
ALINIA	2	PA; QL
ARIKAYCE	2	PA
<i>atovaquone</i>	1	
<i>atovaquone-proguanil</i>	1	QL
<i>chloroquine phosphate</i>	1	PA; QL
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hcl</i>	1	
<i>clindamycin pediatric</i>	1	
COARTEM	2	QL
<i>dapsone oral</i>	1	
<i>ethambutol</i>	1	
<i>hydroxychloroquine</i>	1	
<i>isoniazid oral</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>ivermectin oral</i>	1	
KITABIS PAK	2	PA
<i>mefloquine</i>	1	QL
<i>metronidazole oral</i>	1	
NEBUPENT	2	PA
<i>neomycin</i>	1	
<i>paromomycin</i>	1	
<i>pentamidine inhalation</i>	1	PA
<i>praziquantel</i>	1	
PRIFTIN	2	PA
<i>primaquine</i>	1	QL
<i>pyrazinamide</i>	1	
<i>quinine sulfate</i>	1	
<i>rifabutin</i>	1	
<i>rifampin oral</i>	1	
SIRTURO	2	PA
<i>tobramycin in 0.225 % nacl</i>	1	PA
TOBRAMYCIN WITH NEBULIZER	2	PA
TRECTOR	2	PA
PENICILLINS		
<i>amoxicillin oral capsule, tablet</i>	1	
<i>amoxicillin oral suspension for reconstitution</i>	1	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	1	
<i>amoxicillin-pot clavulanate</i>	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
<i>ampicillin oral capsule 500 mg</i>	1	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	2	
<i>dicloxacillin</i>	1	
<i>penicillin v potassium</i>	1	
QUINOLONES		
<i>ciprofloxacin</i>	1	PA
<i>ciprofloxacin hcl oral</i>	1	
<i>levofloxacin oral</i>	1	
<i>ofloxacin oral tablet 300 mg, 400 mg</i>	1	QL
SULFA'S / RELATED AGENTS		
<i>sulfadiazine</i>	1	
<i>sulfamethoxazole-trimethoprim oral</i>	1	
<i>sulfatrim</i>	1	
TETRACYCLINES		
<i>doxycycline hyclate oral capsule</i>	1	
<i>doxycycline hyclate oral tablet 100 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	1	
<i>doxycycline monohydrate oral suspension for reconstitution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg</i>	1	
<i>minocycline oral capsule</i>	1	
<i>tetracycline</i>	1	
VIBRAMYCIN ORAL SYRUP	2	
URINARY TRACT AGENTS		
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
<i>trimethoprim</i>	1	
VANCOMYCIN		
FIRVANQ	2	PA
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
ADJUNCTIVE AGENTS		
<i>leucovorin calcium oral</i>	1	
MESNEX ORAL	2	
VISTOGARD	2	PA
ANTINEOPLASTIC / IMMUNOSUPPRESSANT DRUGS		
<i>abiraterone</i>	1	PA
AFINITOR DISPERZ	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
AFINITOR ORAL TABLET 10 MG	2	PA
ALECENSA	2	PA
ALUNBRIG	2	PA
<i>anastrozole</i>	1	
ASPARLAS	2	PA
AZASAN	2	
<i>azathioprine</i>	1	
BALVERSA	2	PA
<i>bexarotene</i>	1	PA
<i>bicalutamide</i>	1	
BOSULIF	2	PA
BRAFTOVI	2	PA
CABOMETYX	2	PA
CALQUENCE	2	PA
<i>capecitabine</i>	1	PA
CAPRELSA	2	PA
COMETRIQ	2	PA
COPIKTRA	2	PA
COTELLIC	2	PA
<i>cyclophosphamide oral capsule</i>	1	PA
<i>cyclosporine modified</i>	1	
<i>cyclosporine oral capsule</i>	1	
DAURISMO	2	PA
DROXIA	2	PA
ELIGARD	2	PA
ELIGARD (3 MONTH)	2	PA
ELIGARD (4 MONTH)	2	PA

Drug Name	Drug Tier	Requirements / Limits
ELIGARD (6 MONTH)	2	PA
EMCYT	2	PA
ERIVEDGE	2	PA
ERLEADA	2	PA
<i>erlotinib</i>	1	PA
<i>etoposide oral</i>	1	
<i>everolimus (antineoplastic)</i>	1	PA
<i>exemestane</i>	1	
FARYDAK	2	PA
<i>flutamide</i>	1	
<i>gengraf oral capsule 100 mg, 25 mg</i>	1	
<i>gengraf oral solution</i>	1	
GILOTRIF	2	PA
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	2	PA
HERCEPTIN HYLECTA	2	PA
HYCAMTIN ORAL	2	PA
<i>hydroxyurea</i>	1	
IBRANCE ORAL CAPSULE	2	PA
ICLUSIG	2	PA
IDHIFA	2	PA
<i>imatinib</i>	1	PA
IMBRUVICA ORAL CAPSULE	2	PA; QL
IMBRUVICA ORAL TABLET 140 MG	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
IMBRUVICA ORAL TABLET 280 MG, 420 MG, 560 MG	2	PA; QL
INLYTA	2	PA
INREBIC	2	PA
IRESSA	2	PA
JAKAFI	2	PA
KANJINTI	2	PA
KISQALI	2	PA
KISQALI FEMARA CO-PACK	2	PA
LENVIMA	2	PA
<i>letrozole</i>	1	PA
LEUKERAN	2	
LONSURF	2	PA
LORBRENA	2	PA
LYNPARZA ORAL TABLET	2	PA
LYSODREN	2	
MATULANE	2	
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml), 625 mg/5 ml</i>	1	
<i>megestrol oral tablet</i>	1	
MEKINIST	2	PA
MEKTOVI	2	PA
<i>melphalan</i>	1	PA
<i>mercaptopurine</i>	1	
<i>methotrexate sodium</i>	1	
<i>methotrexate sodium (pf) injection solution</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MVASI	2	PA
<i>mycophenolate mofetil</i>	1	
<i>mycophenolate sodium</i>	1	
MYLERAN	2	
NERLYNX	2	PA
NEXAVAR	2	PA
<i>nilutamide</i>	1	PA
NINLARO	2	PA
NUBEQA	2	PA
<i>octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	1	PA
ODOMZO	2	PA
PIQRAY	2	PA
POMALYST	2	PA
PURIXAN	2	PA
REVLIMID	2	PA
RITUXAN	2	PA
RITUXAN HYCELA	2	PA
ROZLYTREK	2	PA
RUBRACA	2	PA
RUXIENCE	2	PA
RYDAPT	2	PA
SANDIMMUNE ORAL SOLUTION	2	
<i>sirolimus</i>	1	
SOLTAMOX	2	PA
SPRYCEL	2	PA
STIVARGA	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
SUPPRELIN LA	2	PA
SUTENT	2	PA
SYNRIBO	2	PA
TABLOID	2	PA
<i>tacrolimus oral</i>	1	
TAFINLAR	2	PA
TAGRISO	2	PA
TALZENNA	2	PA
<i>tamoxifen</i>	1	
TARGRETIN TOPICAL	2	PA; QL
TASIGNA	2	PA
<i>temozolomide</i>	1	PA
THALOMID	2	PA
TIBSOVO	2	PA
<i>toremifene</i>	1	PA
<i>tratinostat (chemotherapy)</i>	1	
TREXALL	2	PA
TRUXIMA	2	PA
TURALIO	2	PA
TYKERB	2	PA
VANTAS	2	PA
VENCLEXTA	2	PA
VENCLEXTA STARTING PACK	2	PA
VERZENIO	2	PA
VITRAKVI	2	PA
VIZIMPRO	2	PA
VOTRIENT	2	PA
XALKORI	2	PA
XOSPATA	2	PA

Drug Name	Drug Tier	Requirements / Limits
XPOVIO	2	PA
XTANDI	2	PA
YONSA	2	PA
ZEJULA	2	PA
ZELBORAF	2	PA
ZIRABEV	2	PA
ZOLADEX	2	PA
ZOLINZA	2	PA
ZORTRESS	2	PA
ZYDELIG	2	PA
ZYKADIA ORAL TABLET	2	PA
ZYTIGA ORAL TABLET 500 MG	2	PA
AUTONOMIC / CNS DRUGS, NEUROLOGY / PSYCH		
ANTICONVULSANTS		
<i>carbamazepine oral capsule, er multiphase 12 hr</i>	1	
<i>carbamazepine oral suspension 100 mg/5 ml</i>	1	
<i>carbamazepine oral tablet</i>	1	
<i>carbamazepine oral tablet extended release 12 hr</i>	1	
<i>carbamazepine oral tablet, chewable</i>	1	
<i>clonazepam oral tablet</i>	1	
DIACOMIT	2	PA
<i>diazepam rectal</i>	1	
DILANTIN	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
<i>divalproex</i>	1	
EPIDIOLEX	2	PA
<i>epitol</i>	1	
EQUETRO	2	
<i>ethosuximide</i>	1	
FYCOMPA ORAL SUSPENSION	2	ST
FYCOMPA ORAL TABLET	2	ST; QL
<i>gabapentin oral capsule</i>	1	QL
<i>gabapentin oral solution</i>	1	
<i>gabapentin oral tablet 600 mg, 800 mg</i>	1	QL
<i>lamotrigine oral tablet</i>	1	
<i>lamotrigine oral tablet, chewable dispersible</i>	1	
<i>levetiracetam oral solution</i>	1	
<i>levetiracetam oral tablet</i>	1	
NAYZILAM	2	
<i>oxcarbazepine</i>	1	
<i>phenobarbital</i>	1	
<i>phenytoin oral suspension</i>	1	
<i>phenytoin oral tablet, chewable</i>	1	
<i>phenytoin sodium extended</i>	1	
<i>pregabalin</i>	1	QL
<i>primidone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>roweepra oral tablet 500 mg</i>	1	
<i>vigabatrin oral powder packet</i>	1	PA
<i>topiramate oral tablet</i>	1	
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt) oral solution</i>	1	
VIMPAT ORAL SOLUTION	2	ST
VIMPAT ORAL TABLET	2	ST
<i>zonisamide</i>	1	
ANTIPARKINSONISM AGENTS		
<i>benztropine oral</i>	1	
<i>bromocriptine</i>	1	
<i>carbidopa</i>	1	
<i>carbidopa-levodopa oral tablet</i>	1	
<i>carbidopa-levodopa oral tablet extended release</i>	1	
<i>entacapone</i>	1	
<i>pramipexole oral tablet</i>	1	
<i>ropinirole oral tablet</i>	1	
<i>selegiline hcl</i>	1	
<i>trihexyphenidyl</i>	1	
MIGRAINE / CLUSTER HEADACHE THERAPY		
<i>migergot</i>	1	
<i>naratriptan</i>	1	QL
<i>rizatriptan</i>	1	QL

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
<i>sumatriptan</i>	1	QL
<i>sumatriptan succinate oral</i>	1	QL
<i>sumatriptan succinate subcutaneous cartridge</i>	1	QL
<i>sumatriptan succinate subcutaneous pen injector</i>	1	QL
<i>sumatriptan succinate subcutaneous solution</i>	1	QL
<i>sumatriptan succinate subcutaneous syringe 6 mg/0.5 ml</i>	1	QL
MISCELLANEOUS NEUROLOGICAL THERAPY		
AUSTEDO	2	PA
COPAXONE SUBCUTANEOUS SYRINGE	2	
<i>dalfampridine</i>	1	
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	
<i>galantamine</i>	1	
GILENYA ORAL CAPSULE 0.5 MG	2	
<i>memantine oral tablet</i>	1	
MEMANTINE ORAL TABLETS,DOSE PACK	2	

Drug Name	Drug Tier	Requirements / Limits
<i>rivastigmine capsules</i>	1	
<i>tetrabenazine</i>	1	PA
MUSCLE RELAXANTS / ANTISPASMODIC THERAPY		
<i>baclofen oral tablet 10 mg, 20 mg</i>	1	
BACLOFEN ORAL TABLET 5 MG	2	
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	1	
<i>dantrolene oral</i>	1	
<i>meprobamate</i>	1	PA
<i>methocarbamol oral</i>	1	
<i>pyridostigmine bromide oral syrup</i>	1	
PYRIDOSTIGMINE BROMIDE ORAL TABLET 30 MG	2	
<i>pyridostigmine bromide oral tablet 60 mg</i>	1	
<i>pyridostigmine bromide oral tablet extended release</i>	1	
<i>tizanidine oral tablet</i>	1	
NARCOTIC ANALGESICS		
<i>acetaminophen-codeine oral solution 120 mg-12 mg /5 ml (5 ml), 120-12 mg/5 ml, 300 mg-30 mg /12.5 ml</i>	1	QL
<i>acetaminophen-codeine oral tablet</i>	1	QL
<i>ascomp with codeine</i>	1	QL

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
<i>butalbital compound w/codeine</i>	1	QL
<i>butalbital-acetaminop-caf-cod oral capsule 50-325-40-30 mg</i>	1	QL
<i>butalbital-acetaminophen-caff oral capsule 50-325-40 mg</i>	1	QL
<i>butalbital-acetaminophen-caff oral tablet 50-325-40 mg</i>	1	QL
<i>butalbital-aspirin-caffeine oral capsule</i>	1	QL
BUTRANS	2	PA , QL
<i>codeine sulfate oral tablet</i>	1	QL
<i>codeine-butalbital-asa-caff</i>	1	QL
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	1	QL
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	1	QL
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	1	QL
<i>hydromorphone oral liquid</i>	1	QL
<i>hydromorphone oral tablet</i>	1	QL
<i>hydromorphone rectal</i>	1	QL
<i>lorcet (hydrocodone)</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>lorcet hd</i>	1	QL
<i>lorcet plus oral tablet 7.5-325 mg</i>	1	QL
<i>morphine concentrate oral solution</i>	1	QL
<i>morphine oral solution</i>	1	QL
<i>morphine oral tablet</i>	1	QL
<i>morphine oral tablet extended release</i>	1	PA; QL
<i>morphine rectal</i>	1	QL
<i>oxycodone oral capsule</i>	1	QL
<i>oxycodone oral concentrate</i>	1	QL
<i>oxycodone oral solution</i>	1	QL
<i>oxycodone oral tablet</i>	1	QL
<i>oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg</i>	1	QL
<i>oxycodone-aspirin</i>	1	QL
SUBLOCADE	2	PA
TRAMADOL ORAL TABLET 100 MG	2	QL
<i>tramadol oral tablet 50 mg</i>	1	QL
<i>tramadol-acetaminophen</i>	1	QL
<i>zebutal oral capsule 50-325-40 mg</i>	1	QL

NON-NARCOTIC ANALGESICS

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
BUNAVAIL	2	QL
<i>buprenorphine-naloxone</i>	1	QL
<i>butorphanol tartrate nasal</i>	1	QL
<i>celecoxib</i>	1	PA
<i>diclofenac potassium</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical gel 1 %</i>	1	QL
<i>diflunisal</i>	1	
<i>etodolac</i>	1	
<i>flurbiprofen oral tablet 100 mg</i>	1	
<i>ibuprofen</i>	1	
<i>ibuprofen oral suspension</i>	1	
<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	1	
INDOCIN	2	
<i>indomethacin oral</i>	1	
<i>ketorolac oral</i>	1	QL
<i>meclofenamate</i>	1	
<i>mefenamic acid</i>	1	
<i>meloxicam oral tablet</i>	1	
<i>nabumetone</i>	1	
<i>naloxone injection solution</i>	1	QL
<i>naloxone injection syringe</i>	1	QL
<i>naltrexone</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>naproxen oral suspension</i>	1	PA
<i>naproxen oral tablet</i>	1	
<i>naproxen sodium oral tablet 275 mg, 550 mg</i>	1	
NARCAN NASAL SPRAY, NON-AEROSOL 4 MG/ACTUATION	2	QL
<i>oxaprozin</i>	1	
<i>piroxicam</i>	1	
SUBOXONE	2	QL
<i>sulindac</i>	1	
VIVITROL	2	QL
ZUBSOLV	2	QL
PSYCHOTHERAPEUTIC DRUGS		
ABILIFY MAINTENA	2	
<i>alprazolam oral tablet</i>	1	
<i>alprazolam ER/XR oral tablet</i>	1	
<i>amitriptyline</i>	1	
<i>amitriptyline-chlordiazepoxide</i>	1	
<i>amoxapine</i>	1	
APTENSIO XR	2	
<i>aripiprazole oral tablet</i>	1	QL
ARISTADA	2	QL
ARISTADA INITIO	2	QL
<i>atomoxetine</i>	1	QL
<i>bupropion hcl oral tablet</i>	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
<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	1	QL
BUPROPION HCL ORAL TABLET EXTENDED RELEASE 24 HR 450 MG	2	
<i>bupropion hcl oral tablet sustained-release 12 hr</i>	1	
<i>bupropion</i>	1	
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine oral</i>	1	
<i>citalopram</i>	1	
<i>clorazepate dipotassium</i>	1	
<i>clozapine oral tablet</i>	1	
<i>desipramine</i>	1	
<i>dexmethylphenidate</i>	1	QL
<i>dextroamphetamine oral capsule, extended release</i>	1	QL
<i>dextroamphetamine oral tablet</i>	1	QL
<i>dextroamphetamine-amphetamine</i>	1	QL
<i>diazepam intensol</i>	1	
<i>diazepam oral concentrate</i>	1	
<i>diazepam oral solution 5 mg/5 ml (1 mg/ml)</i>	1	
<i>diazepam oral tablet</i>	1	
<i>doxepin oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>doxepin oral concentrate</i>	1	
<i>duloxetine oral capsule, delayed release(dr/ec) 20 mg, 30 mg, 60 mg</i>	1	
<i>escitalopram oxalate</i>	1	
<i>estazolam</i>	1	QL
FANAPT ORAL TABLET	2	ST; QL
FANAPT ORAL TABLETS,DOSE PACK	2	ST
<i>fluoxetine oral capsule</i>	1	
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg, 20 mg</i>	1	
<i>fluphenazine decanoate</i>	1	
<i>fluphenazine hcl</i>	1	
<i>flurazepam</i>	1	QL
<i>fluvoxamine oral tablet</i>	1	
<i>guanfacine oral tablet extended release 24 hr</i>	1	QL
<i>guanidine</i>	1	PA
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate oral</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	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
INVEGA SUSTENNA	2	
INVEGA TRINZA	2	QL
LATUDA	2	ST
<i>lithium carbonate</i>	1	
<i>lithium citrate oral solution 8 meq/5 ml</i>	1	
<i>lorazepam intensol</i>	1	
<i>lorazepam oral</i>	1	
<i>loxapine succinate</i>	1	
<i>maprotiline</i>	1	
<i>methylphenidate hcl oral capsule, er biphasic 30-70</i>	1	QL
<i>methylphenidate hcl oral capsule,er biphasic 50-50 10 mg, 60 mg</i>	1	
<i>methylphenidate hcl oral capsule,er biphasic 50-50 20 mg, 30 mg, 40 mg</i>	1	QL
<i>methylphenidate hcl oral tablet</i>	1	QL
<i>methylphenidate hcl oral tablet extended release</i>	1	QL
<i>methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg</i>	1	QL
METHYLPHENIDATE HCL ORAL TABLET EXTENDED RELEASE 24HR 72 MG	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>midazolam (pf) injection</i>	1	PA
<i>midazolam injection</i>	1	PA
<i>midazolam oral syrup 2 mg/ml</i>	1	PA
<i>mirtazapine</i>	1	
<i>modafinil</i>	1	PA
<i>nefazodone</i>	1	QL
<i>nortriptyline</i>	1	
<i>olanzapine oral tablet</i>	1	QL
<i>oxazepam</i>	1	
<i>paroxetine hcl oral tablet</i>	1	
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
PERSERIS	2	
<i>pimozide</i>	1	
<i>protriptyline</i>	1	
<i>quetiapine oral tablet</i>	1	QL
<i>quetiapine oral tablet extended release 24 hr</i>	1	ST; QL
QUILLICHEW ER	2	PA
RISPERDAL CONSTA	2	
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	
<i>risperidone oral tablet, disintegrating</i>	1	
SAPHRIS	2	ST; QL

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
<i>sertraline</i>	1	
<i>temazepam oral capsule 15 mg, 30 mg</i>	1	QL
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
<i>tranylcypromine</i>	1	
<i>trazodone oral tablet 100 mg, 150 mg, 50 mg</i>	1	
<i>triazolam</i>	1	QL
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	1	
<i>venlafaxine oral capsule, extended release 24hr</i>	1	
<i>venlafaxine oral tablet</i>	1	
VYVANSE ORAL CAPSULE	2	QL
VYVANSE ORAL TABLET, CHEWABLE	2	PA; QL
<i>zaleplon</i>	1	QL
<i>ziprasidone hcl</i>	1	QL
<i>zolpidem oral tablet</i>	1	QL
ZYPREXA RELPREVV	2	
CARDIOVASCULAR, HYPERTENSION / LIPIDS		
ANTIARRHYTHMIC AGENTS		
<i>amiodarone oral tablet 200 mg</i>	1	
<i>disopyramide phosphate oral capsule</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>dofetilide</i>	1	
<i>flecainide</i>	1	
<i>mexiletine</i>	1	PA
NORPACE CR	2	
<i>pacerone oral tablet 200 mg</i>	1	
<i>propafenone</i>	1	
<i>quinidine gluconate oral</i>	1	
<i>quinidine sulfate oral tablet</i>	1	
<i>sotalol af</i>	1	
<i>sotalol oral</i>	1	
ANTIHYPERTENSIVE THERAPY		
<i>acebutolol</i>	1	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	1	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthiazid</i>	1	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
<i>betaxolol oral</i>	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
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
<i>bumetanide oral</i>	1	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	1	
<i>clonidine</i>	1	
<i>clonidine hcl oral tablet</i>	1	
DEMSER	2	PA
<i>diltiazem hcl oral capsule, extended release 12 hr</i>	1	
<i>diltiazem hcl oral capsule, extended release 24 hr</i>	1	
<i>diltiazem hcl oral capsule, extended release 24hr</i>	1	
<i>diltiazem hcl oral tablet</i>	1	
DIURIL	2	
<i>doxazosin</i>	1	
<i>enalapril maleate</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
EPANED ORAL SOLUTION	2	
<i>eplerenone</i>	1	
<i>felodipine</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide oral solution 10 mg/ml, 40 mg/5 ml (8 mg/ml)</i>	1	
<i>furosemide oral tablet</i>	1	
<i>guanfacine oral tablet</i>	1	
HEMANGEOL	2	
<i>hydralazine oral</i>	1	
<i>hydrochlorothiazide</i>	1	
<i>indapamide</i>	1	
<i>irbesartan</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>labetalol oral</i>	1	
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	1	
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
<i>metoprolol - hydrochlorothiazide</i>	1	
<i>metoprolol tartrate oral</i>	1	
<i>minoxidil oral</i>	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
<i>moexipril</i>	1	
<i>nadolol</i>	1	
<i>nadolol-bendroflumethiazide oral tablet 80-5 mg</i>	1	
<i>nicardipine oral</i>	1	QL
<i>nifedipine</i>	1	
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	1	PA
<i>pindolol</i>	1	QL
<i>prazosin</i>	1	QL
<i>propranolol oral</i>	1	
<i>propranolol-hydrochlorothiazide</i>	1	
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
<i>spironolactone</i>	1	
<i>spironolactone-hydrochlorothiazide</i>	1	
<i>taztia xt</i>	1	
<i>telmisartan-amlodipine</i>	1	
<i>terazosin</i>	1	
<i>tiadylt er oral capsule,extended release 24 hr 120 mg, 180 mg, 240 mg, 300 mg, 420 mg</i>	1	
<i>timolol maleate oral</i>	1	QL
<i>torse mide oral</i>	1	
<i>trandolapril</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>trandolapril-verapamil</i>	1	
<i>triamterene</i>	1	
<i>triamterene-hydrochlorothiazide oral capsule 37.5-25 mg</i>	1	
<i>triamterene-hydrochlorothiazide oral tablet 37.5-25 mg</i>	1	QL
<i>triamterene-hydrochlorothiazide oral tablet 75-50 mg</i>	1	
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
<i>verapamil oral capsule,ext rel. pellets 24 hr</i>	1	
<i>verapamil oral tablet 120 mg, 80 mg</i>	1	
<i>verapamil oral tablet 40 mg</i>	1	QL
<i>verapamil oral tablet extended release</i>	1	
CARDIAC GLYCOSIDES		
<i>digitek</i>	1	
<i>digox</i>	1	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	1	
<i>digoxin oral tablet</i>	1	
COAGULATION THERAPY		
<i>aminocaproic acid oral</i>	1	
BRILINTA	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
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
<i>dipyridamole oral</i>	1	
DOPTELET (10 TAB PACK)	2	PA
DOPTELET (15 TAB PACK)	2	PA
DOPTELET (30 TAB PACK)	2	PA
ELIQUIS	2	
ELIQUIS DVT-PE TREAT 30D START	2	
<i>enoxaparin</i>	1	
<i>heparin (porcine) injection solution 10,000 unit/ml</i>	1	
<i>heparin, porcine (pf) intravenous syringe 10 unit/ml, 100 unit/ml</i>	1	
<i>jantoven</i>	1	
<i>pentoxifylline</i>	1	
<i>phytonadione (vitamin k1) oral tablet 5 mg</i>	1	QL
PRADAXA	2	
<i>prasugrel</i>	1	
PROMACTA	2	PA
<i>warfarin</i>	1	
XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	2	
XARELTO ORAL TABLET 2.5 MG	2	PA

Drug Name	Drug Tier	Requirements / Limits
XARELTO ORAL TABLETS,DOSE PACK	2	
LIPID/CHOLESTEROL LOWERING AGENTS		
<i>atorvastatin</i>	1	
<i>cholestyramine (with sugar)</i>	1	
<i>cholestyramine light</i>	1	
<i>colestipol oral tablet</i>	1	
<i>ezetimibe</i>	1	QL
<i>fenofibrate nanocrystallized oral tablet 145 mg, 48 mg</i>	1	
<i>gemfibrozil</i>	1	
JUXTAPID	2	PA
<i>lovastatin</i>	1	
NIASPAN EXTENDED-RELEASE	2	
<i>omega-3 acid ethyl esters</i>	1	PA
<i>pravastatin</i>	1	
<i>prevalite</i>	1	
<i>rosuvastatin</i>	1	
<i>simvastatin oral tablet</i>	1	
MISCELLANEOUS CARDIOVASCULAR AGENTS		
ENTRESTO	2	PA
<i>ranolazine</i>	1	ST
NITRATES		
<i>isosorbide dinitrate oral tablet</i>	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
<i>isosorbide mononitrate</i>	1	
MINITRAN	2	
<i>nitro-bid</i>	1	
<i>nitroglycerin sublingual</i>	1	
<i>nitroglycerin transdermal patch 24 hour</i>	1	
<i>nitroglycerin translingual spray, non-aerosol</i>	1	
<i>Nitroglycerin CR/ER capsule</i>	1	

DERMATOLOGICALS/TOPICAL THERAPY

ANTIPSORIATIC / ANTISEBORRHEIC

<i>calcipotriene scalp</i>	1	QL
<i>calcipotriene topical cream</i>	1	QL
<i>calcipotriene topical ointment</i>	1	QL
<i>calcipotriene-betamethasone topical ointment</i>	1	
COSENTYX	2	ST
COSENTYX (2 SYRINGES)	2	ST
COSENTYX PEN	2	ST
COSENTYX PEN (2 PENS)	2	ST
<i>selenium sulfide topical lotion</i>	1	

BURN THERAPY

<i>silver sulfadiazine</i>	1	
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Drug Name	Drug Tier	Requirements / Limits
<i>ssd</i>	1	

KERATOLYTICS

<i>salicylic acid topical gel</i>	1	
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MISCELLANEOUS DERMATOLOGICALS

<i>ammonium lactate topical lotion</i>	1	QL
<i>doxepin topical</i>	1	
DRYSOL	2	
DRYSOL DAB-O-MATIC	2	
FLUOROPLEX	2	PA
<i>fluorouracil topical cream 5 %</i>	1	QL
<i>fluorouracil topical solution 2 %</i>	1	QL
<i>fluorouracil topical solution 5 %</i>	1	
<i>imiquimod topical cream in packet</i>	1	PA; QL
PANRETIN	2	PA
<i>pimecrolimus</i>	1	ST; QL
<i>podofilox</i>	1	QL
PROTOPIC	2	ST
REGRANEX	2	PA; QL
<i>urea topical cream 20 %, 40 %</i>	1	
UREA TOPICAL LOTION 10%, 40 %	2	QL
VALCHLOR	2	PA; QL
VASELINE WHITE PETROLEUM	2	

THERAPY FOR ACNE

<i>avita topical cream</i>	1	PA; QL
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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
AVITA TOPICAL GEL	2	PA; QL
AZELEX	2	
<i>bp 10-1</i>	1	
<i>clindamycin phosphate topical gel</i>	1	
CLINDAMYCIN PHOSPHATE TOPICAL GEL, ONCE DAILY	2	
<i>clindamycin phosphate topical lotion</i>	1	
<i>clindamycin phosphate topical solution</i>	1	
<i>clindamycin-benzoyl peroxide</i>	1	
DIFFERIN TOPICAL CREAM	2	PA
DIFFERIN TOPICAL GEL 0.1 %	2	PA; OTC
DIFFERIN TOPICAL GEL WITH PUMP	2	PA
DIFFERIN TOPICAL LOTION	2	PA
<i>erythromycin with ethanol topical gel</i>	1	
<i>erythromycin with ethanol topical solution</i>	1	
<i>erythromycin-benzoyl peroxide</i>	1	
<i>metronidazole topical cream</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>metronidazole topical gel 0.75 %</i>	1	QL
<i>metronidazole topical lotion</i>	1	
<i>neuac</i>	1	
<i>rosadan topical cream</i>	1	
<i>rosadan topical gel</i>	1	QL
<i>sss 10-5 topical cream</i>	1	
<i>sulfacetamide sodium-sulfur topical cleanser 10-5 % (w/w)</i>	1	QL
<i>sulfacetamide sodium-sulfur topical cleanser 9-4 %, 9-4.5 %, 9.8-4.8 %</i>	1	
<i>sulfacetamide sodium-sulfur topical cream 10-2 %, 10-5 % (w/w)</i>	1	QL
<i>sulfacetamide sodium-sulfur topical suspension 8-4 %</i>	1	
TAZORAC	2	PA
<i>tretinoin microspheres</i>	1	PA
<i>tretinoin topical cream</i>	1	PA; QL
<i>tretinoin topical gel 0.01 %, 0.025 %</i>	1	PA; QL
<i>tretinoin topical gel 0.05 %</i>	1	PA
TOPICAL ANESTHETICS		

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
<i>lidocaine hcl mucous membrane jelly</i>	1	QL
<i>lidocaine hcl mucous membrane jelly in applicator</i>	1	QL
<i>lidocaine hcl topical cream 3 %, 4%</i>	1	QL
<i>lidocaine topical adhesive patch, medicated 5 %</i>	1	QL
<i>lidocaine viscous</i>	1	QL
<i>lidocaine-prilocaine topical cream</i>	1	QL
TOPICAL ANTIBACTERIALS		
<i>gentamicin topical</i>	1	
<i>mupirocin ointment</i>	1	QL
<i>sulfacetamide sodium (acne)</i>	1	
TOPICAL ANTIFUNGALS		
<i>ciclodan topical cream</i>	1	
<i>ciclodan topical solution</i>	1	QL
<i>ciclopirox topical cream</i>	1	
<i>ciclopirox topical gel</i>	1	QL
<i>ciclopirox topical shampoo</i>	1	
<i>ciclopirox topical solution</i>	1	QL
<i>ciclopirox topical suspension</i>	1	QL
<i>clotrimazole topical</i>	1	QL
<i>clotrimazole-betamethasone topical cream</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>clotrimazole-betamethasone topical lotion</i>	1	
<i>econazole</i>	1	
<i>ketconazole topical cream</i>	1	QL
<i>ketconazole topical shampoo</i>	1	QL
<i>nyamyc</i>	1	QL
<i>nystatin topical cream</i>	1	
<i>nystatin topical ointment</i>	1	
<i>nystatin topical powder</i>	1	QL
<i>nystatin-triamcinolone</i>	1	
<i>nystop</i>	1	QL
TOPICAL ANTIVIRALS		
<i>acyclovir topical</i>	1	QL
DENAVIR	2	PA; QL
TOPICAL CORTICOSTEROIDS		
<i>ala-cort topical cream 1 %</i>	1	QL
<i>amcinonide topical cream</i>	1	
<i>amcinonide topical lotion</i>	1	
<i>betamethasone valerate topical cream</i>	1	
<i>betamethasone valerate topical lotion</i>	1	
<i>betamethasone valerate topical ointment</i>	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
<i>clobetasol scalp</i>	1	
<i>clobetasol topical cream</i>	1	
<i>clobetasol topical foam</i>	1	
<i>clobetasol topical gel</i>	1	
<i>clobetasol topical lotion</i>	1	
<i>clobetasol topical ointment</i>	1	
<i>clobetasol topical shampoo</i>	1	QL
<i>clobetasol topical spray,non-aerosol</i>	1	
<i>clobetasol-emollient</i>	1	
<i>desonide topical cream</i>	1	
<i>desonide topical ointment</i>	1	
<i>diflorasone</i>	1	QL
<i>fluocinolone and shower cap</i>	1	QL
<i>fluocinolone topical cream 0.01 %</i>	1	QL
<i>fluocinolone topical oil</i>	1	
<i>fluocinolone topical solution</i>	1	QL
<i>fluocinonide topical cream 0.05 %</i>	1	
<i>fluocinonide topical gel</i>	1	
<i>fluocinonide topical ointment</i>	1	
<i>fluocinonide topical solution</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
<i>fluocinonide-e</i>	1	QL
<i>fluocinonide-emollient</i>	1	QL
<i>fluticasone propionate topical cream</i>	1	QL
<i>fluticasone propionate topical ointment</i>	1	QL
<i>hydrocortisone topical cream 1 %</i>	1	QL
<i>hydrocortisone topical cream 2.5 %</i>	1	
<i>hydrocortisone topical lotion 2.5 %</i>	1	
<i>hydrocortisone topical ointment 1 %</i>	1	QL
<i>hydrocortisone topical ointment 2.5 %</i>	1	
<i>hydrocortisone-min oil-wht pet</i>	1	QL
<i>hydrocortisone-pramoxine topical cream</i>	1	
<i>mometasone topical</i>	1	
<i>prednicarbate topical cream</i>	1	QL
<i>triamcinolone acetonide topical cream</i>	1	QL
<i>triamcinolone acetonide topical lotion</i>	1	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	1	QL

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
<i>triamcinolone acetonide topical ointment 0.05 %</i>	1	
<i>triderm topical cream</i>	1	QL
TOPICAL ENZYMES		
SANTYL	2	QL
TOPICAL SCABICIDES / PEDICULICIDES		
NATROBA	2	QL
<i>permethrin topical cream</i>	1	
DIAGNOSTICS / MISCELLANEOUS AGENTS		
IRRIGATING SOLUTIONS		
SORBITOL IRRIGATION	2	PA
MISCELLANEOUS AGENTS		
<i>acamprosate</i>	1	
<i>acetic acid irrigation</i>	1	
<i>anagrelide</i>	1	
<i>caffeine citrate oral</i>	1	PA
CARBAGLU	2	PA
CHEMET	2	
<i>deferasirox oral tablet 125 mg, 250 mg, 500 mg</i>	1	PA
<i>deferasirox oral tablet, dispersible</i>	1	PA
<i>disulfiram</i>	1	
<i>kionex (with sorbitol)</i>	1	
<i>levocarnitine oral tablet</i>	1	PA; QL

Drug Name	Drug Tier	Requirements / Limits
LITHOSTAT	2	PA
<i>midodrine</i>	1	
<i>nitisinone</i>	1	PA
<i>pilocarpine hcl oral</i>	1	
<i>riluzole</i>	1	PA
<i>sevelamer carbonate</i>	1	ST
<i>sevelamer hcl</i>	1	ST
<i>sodium chloride 0.9 % (flush) injection syringe</i>	1	
<i>sodium chloride 0.9 % intravenous</i>	1	
<i>sodium chloride irrigation</i>	1	
<i>sodium polystyrene (sorb free)</i>	1	
<i>sodium polystyrene sulfonate oral powder</i>	1	
<i>sps (with sorbitol)</i>	1	
<i>sterile water for injection</i>	1	
<i>water for inject, bacteriostat</i>	1	
<i>water for injection, sterile injection solution</i>	1	
SMOKING DETERRENTS		
<i>bupropion hcl (smoking deter)</i>	1	
CHANTIX	2	
CHANTIX CONTINUING MONTH BOX	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
CHANTIX STARTING MONTH BOX	2	
NICOTROL	2	
NICOTROL NS	2	
EAR, NOSE / THROAT MEDICATIONS		
MISCELLANEOUS AGENTS		
<i>azelastine nasal</i>	1	
<i>chlorhexidine gluconate mucous membrane</i>	1	
<i>denta 5000 plus</i>	1	
<i>fluoride (sodium) dental gel</i>	1	
<i>ipratropium bromide nasal</i>	1	
<i>olopatadine nasal</i>	1	
<i>oralone</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium fluoride 5000 plus</i>	1	
<i>triamcinolone acetonide dental</i>	1	
MISCELLANEOUS OTIC PREPARATIONS		
<i>acetic acid otic (ear)</i>	1	
<i>ofloxacin otic (ear)</i>	1	
OTIC STEROID / ANTIBIOTIC		
CIPRO HC	2	
CIPRODEX	2	
<i>neomycin-polymyxin-hc otic (ear)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
ENDOCRINE/DIABETES		
ADRENAL HORMONES		
<i>cortisone</i>	1	
<i>decadron oral tablet</i>	1	
<i>dexamethasone intensol</i>	1	
<i>dexamethasone oral elixir</i>	1	
<i>dexamethasone oral solution</i>	1	
<i>dexamethasone oral tablet</i>	1	
<i>fludrocortisone</i>	1	
<i>hydrocortisone oral</i>	1	
<i>methylprednisolone</i>	1	
<i>prednisolone oral solution 15 mg/5 ml</i>	1	
<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	1	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
ANTITHYROID AGENTS		
<i>methimazole oral tablet 10 mg, 5 mg</i>	1	
<i>propylthiouracil</i>	1	
SSKI	2	
DIABETES THERAPY		
<i>acarbose</i>	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
ACTOPLUS MET XR ORAL TABLET, ER MULTIPHASE 24 HR 15-1,000 MG	2	ST
BAQSIMI	2	PA; QL
FREESTYLE INSULINX STRIP	2	OTC; QL
FREESTYLE INSULINX TEST STRIPS	2	OTC; QL
FREESTYLE LITE STRIPS	2	OTC; QL
FREESTYLE TEST	2	OTC; QL
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
GLUCAGEN HYPOKIT	2	QL
GLUCAGON (HCL) EMERGENCY KIT	2	QL
GLUCAGON EMERGENCY KIT (HUMAN)	2	QL
<i>glyburide</i>	1	QL
<i>glyburide micronized</i>	1	QL
<i>glyburide-metformin</i>	1	QL
GLYSET	2	ST
HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 200 UNIT/ML (3 ML)	2	QL

Drug Name	Drug Tier	Requirements / Limits
HUMALOG MIX 50-50 INSULN U-100	2	QL
HUMALOG MIX 50-50 KWIKPEN	2	QL
INSULIN LISPRO PROTAMINE - INSULIN LISPRO (authorized generic of HUMALOG MIX 75-25 KWIKPEN)	2	QL
HUMALOG MIX 75-25(U-100)INSULN	2	QL
HUMULIN 70/30 U-100 INSULIN	2	QL
HUMULIN 70/30 U-100 KWIKPEN	2	QL
HUMULIN R REGULAR U-100 INSULN	2	QL
HUMULIN R U-500 (CONC) INSULIN	2	QL
HUMULIN R U-500 (CONC) KWIKPEN	2	QL
INSULIN ASP PRT-INSULIN ASPART (authorized generic of NOVOLOG MIX 70/30)	2	QL
INSULIN ASPART U-100 (authorized generic of NOVOLOG)	2	QL
INSULIN LISPRO (authorized generic of HUMALOG, HUMALOG JUNIOR)	2	QL
JANUMET	2	ST

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Drug Name	Drug Tier	Requirements / Limits
JANUMET XR	2	ST
JANUVIA	2	ST
JARDIANCE	2	ST
JENTADUETO	2	ST
LANCETS	2	OTC; QL
LANCING DEVICE	2	OTC; QL
LANTUS SOLOSTAR U-100 INSULIN	2	QL
LANTUS U-100 INSULIN	2	
LEVEMIR FLEXTOUCH U-100 INSULN	2	
LEVEMIR U-100 INSULIN	2	
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	
<i>nateglinide</i>	1	
NOVOLIN 70/30 U-100 INSULIN	2	QL
NOVOLIN 70-30 FLEXPEN U-100	2	QL
NOVOLIN R FLEXPEN	2	
NOVOLIN R REGULAR U-100 INSULN	2	QL
<i>pioglitazone</i>	1	
<i>pioglitazone-metformin</i>	1	
PRECISION XTRA TEST	2	OTC; QL

Drug Name	Drug Tier	Requirements / Limits
<i>repaglinide</i>	1	
<i>repaglinide-metformin</i>	1	
SYMLINPEN 120	2	ST
SYMLINPEN 60	2	ST
SYNJARDY	2	ST
TRADJENTA	2	ST
TRESIBA FLEXTOUCH U-100	2	ST; QL
TRESIBA FLEXTOUCH U-200	2	ST; QL
TRESIBA U-100 INSULIN	2	ST; QL
TRULICITY	2	ST; QL
VICTOZA 2-PAK	2	ST; QL
VICTOZA 3-PAK	2	ST; QL
MISCELLANEOUS HORMONES		
ANADROL-50	2	PA
ANDRODERM	2	PA
<i>cabergoline</i>	1	
<i>calcitonin (salmon) nasal spray</i>	1	
<i>calcitriol oral</i>	1	
<i>cinacalcet</i>	1	
<i>danazol</i>	1	
DDAVP NASAL SOLUTION	2	
<i>desmopressin nasal spray with pump</i>	1	
<i>desmopressin nasal spray, non-aerosol</i>	1	
<i>desmopressin oral</i>	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
KUVAN	2	PA
ORLISSA	2	PA
SAMSCA	2	PA
SYNAREL	2	PA
testosterone transdermal gel 1 %	1	PA; QL
testosterone cypionate injection	1	PA
testosterone enanthate injection	1	PA
testosterone transdermal gel in packet 1 % (25 mg/2.5gram), 1 % (50 mg/5 gram)	1	PA; QL
miglustat	1	PA
THYROID HORMONES		
ARMOUR THYROID	2	
levothyroxine oral	1	
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg	1	
liothyronine oral	1	
np thyroid	1	
thyroid (pork)	1	
unithroid	1	
GASTROENTEROLOGY		
ANTIDIARRHEALS / ANTISPASMODICS		
dicyclomine oral capsule	1	

Drug Name	Drug Tier	Requirements / Limits
dicyclomine oral solution	1	
dicyclomine oral tablet	1	
diphenoxylate-atropine	1	
ed-spaz	1	
glycopyrrolate oral tablet 1 mg, 2 mg	1	
hyoscyamine sulfate oral	1	
hyoscyamine sulfate sublingual	1	
hyosyne	1	
loperamide oral capsule	1	QL
methscopolamine	1	
oscimin	1	
oscimin sl	1	
oscimin sr	1	
MISCELLANEOUS GASTROINTESTINAL AGENTS		
AKYNZEO (NETUPITANT)	2	PA; QL
AMITIZA	2	ST
APRISO	2	
balsalazide	1	
budesonide oral	1	
chlordiazepoxide-clidinium capsule	1	
colocort	1	
compro	1	
constulose	1	
CREON	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
<i>cromolyn oral</i>	1	
<i>dronabinol</i>	1	PA
EMEND ORAL CAPSULE 40 MG, 80 MG	2	QL
EMEND ORAL CAPSULE,DOSE PACK	2	QL
<i>enulose</i>	1	
<i>gavilyte-c</i>	1	
<i>gavilyte-g</i>	1	
<i>gavilyte-n</i>	1	
<i>generlac</i>	1	
GOLYTELY ORAL POWDER IN PACKET	2	
<i>hydrocortisone rectal</i>	1	
<i>hydrocortisone topical cream with perineal applicator</i>	1	
<i>hydrocortisone-pramoxine rectal cream</i>	1	
<i>lactulose oral solution</i>	1	
LINZESS ORAL CAPSULE 145 MCG, 290 MCG	2	ST
<i>meclizine oral tablet 12.5 mg, 25 mg</i>	1	
<i>mesalamine oral capsule (with del rel tablets)</i>	1	
<i>mesalamine oral capsule,extended release 24hr</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>mesalamine rectal enema</i>	1	
<i>mesalamine with cleansing wipe</i>	1	
<i>metoclopramide hcl oral solution</i>	1	
<i>metoclopramide hcl oral tablet</i>	1	
MOVANTIK	2	ST
<i>ondansetron</i>	1	
<i>ondansetron hcl oral solution</i>	1	
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram</i>	1	
<i>peg-electrolyte soln</i>	1	
PENTASA	2	
<i>polyethylene glycol 3350</i>	1	
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>procto-med hc</i>	1	
<i>proctosol hc topical</i>	1	
<i>proctozone-hc</i>	1	
<i>sulfasalazine</i>	1	
TRANSDERM-SCOP	2	
<i>trilyte with flavor packets</i>	1	
<i>trimethobenzamide oral</i>	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
<i>ursodiol</i>	1	
ZENPEP ORAL CAPSULE, DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 - 63,000 UNIT, 20,000-63,000-84,000 UNIT, 25,000-79,000-105,000 UNIT, 3,000-10,000 - 14,000-UNIT, 40,000-126,000-168,000 UNIT, 5,000-17,000-24,000 UNIT	2	

ULCER THERAPY

<i>cimetidine</i>	1	
<i>cimetidine hcl oral</i>	1	
<i>famotidine oral suspension</i>	1	
<i>famotidine oral tablet 20 mg, 40 mg</i>	1	
<i>lansoprazole oral capsule, delayed release(dr/ec)</i>	1	QL
<i>misoprostol</i>	1	
NEXIUM PACKET	2	
<i>nizatidine oral capsule</i>	1	
<i>nizatidine oral solution</i>	1	
<i>omeprazole oral capsule, delayed release(dr/ec)</i>	1	QL
<i>pantoprazole oral</i>	1	QL

Drug Name	Drug Tier	Requirements / Limits
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET	2	PA; QL
<i>ranitidine hcl oral capsule</i>	1	
<i>ranitidine hcl oral syrup</i>	1	
<i>ranitidine hcl oral tablet 150 mg, 300 mg</i>	1	
<i>sucralfate</i>	1	

IMMUNOLOGY, VACCINES / BIOTECHNOLOGY

BIOTECHNOLOGY DRUGS

ACTIMMUNE	2	PA
ARCALYST	2	PA
AVONEX INTRAMUSCULAR PEN INJECTOR KIT	2	
AVONEX INTRAMUSCULAR SYRINGE KIT	2	
BETASERON SUBCUTANEOUS KIT	2	
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	2	PA
GENOTROPIN	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
GENOTROPIN MINIQUICK	2	PA
INTRON A INJECTION	2	PA
NORDITROPIN FLEXPRO	2	PA
PEGASYS	2	PA
PEGINTRON SUBCUTANEOUS KIT 50 MCG/0.5 ML	2	PA
REBIF (WITH ALBUMIN)	2	
REBIF REBIDOSE	2	
REBIF TITRATION PACK	2	
RETACRIT	2	PA
SYLATRON SUBCUTANEOUS KIT 200 MCG, 300 MCG	2	PA
UDENYCA	2	PA
GRASTEK	2	PA
ORALAIR SUBLINGUAL TABLET 300 INDX REACTIVITY	2	PA
MUSCULOSKELETAL / RHEUMATOLOGY		
GOUT THERAPY		
<i>allopurinol</i>	1	
COLCHICINE ORAL CAPSULE	2	PA; QL
<i>colchicine oral tablet</i>	1	PA; QL
<i>probenecid</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>probenecid-colchicine</i>	1	
OSTEOPOROSIS THERAPY		
<i>alendronate oral tablet 10 mg, 35 mg, 5 mg, 70 mg</i>	1	
<i>ibandronate oral</i>	1	
<i>raloxifene</i>	1	
OTHER RHEUMATOLOGICALS		
ENBREL MINI	2	PA
ENBREL SUBCUTANEOUS RECON SOLN	2	PA; QL
ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5)	2	PA; QL
ENBREL SUBCUTANEOUS SYRINGE 50 MG/ML (1 ML)	2	PA
ENBREL SURECLICK	2	PA
HUMIRA	2	PA
HUMIRA PEN	2	PA
HUMIRA PEN CROHNS-UC-HS START	2	PA
HUMIRA PEN PSOR-UVEITS-ADOL HS	2	PA
HUMIRA(CF)	2	PA
HUMIRA(CF) PEDI CROHNS STARTER	2	PA
HUMIRA(CF) PEN CROHNS-UC-HS	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
HUMIRA(CF) PEN PSOR-UV-ADOL HS	2	PA
HUMIRA(CF) PEN SUBCUTANEOUS PEN INJECTOR KIT 40 MG/0.4 ML	2	PA
<i>leflunomide</i>	1	
<i>penicillamine capsule</i>	1	
RIDAURA	2	

OBSTETRICS / GYNECOLOGY

ESTROGENS / PROGESTINS

ALORA	2	QL
<i>amabelz</i>	1	
<i>camila</i>	1	
CLIMARA PRO	2	
COMBIPATCH	2	
CRINONE	2	
<i>deblitane</i>	1	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION 400 MG/ML	2	
<i>dotti transdermal patch semiweekly 0.025 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>dotti transdermal patch semiweekly 0.0375 mg/24 hr</i>	1	
<i>errin</i>	1	
<i>estradiol oral</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	1	QL
<i>estradiol transdermal patch semiweekly 0.0375 mg/24 hr</i>	1	
<i>estradiol transdermal patch weekly</i>	1	
<i>estradiol vaginal cream</i>	1	
<i>estradiol-norethindrone acet</i>	1	
ESTRING	2	
<i>estrogens-methyltestosterone</i>	1	
FEMHRT LOW DOSE	2	
<i>fyavolv</i>	1	
<i>heather</i>	1	
<i>incassia</i>	1	
<i>jencycla</i>	1	
<i>jinteli</i>	1	
<i>lopreeza oral tablet 1-0.5 mg</i>	1	
<i>lyza</i>	1	
<i>medroxyprogesterone intramuscular</i>	1	QL
<i>medroxyprogesterone oral</i>	1	
MENEST	2	
<i>mimvey</i>	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
<i>nora-be</i>	1	
<i>norethindrone (contraceptive)</i>	1	
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg</i>	1	
<i>norlyda</i>	1	
PREMARIN ORAL	2	
PREMARIN VAGINAL	2	
PREMPHASE	2	
PREMPRO	2	
<i>progesterone</i>	1	
<i>progesterone micronized</i>	1	
<i>sharobel</i>	1	
<i>tulana</i>	1	
MISCELLANEOUS OB/GYN		
CLEOCIN VAGINAL SUPPOSITORY	2	
<i>clindamycin phosphate vaginal</i>	1	
CLINDESSE	2	
<i>eluryng</i>	1	
<i>etonogestrel-ethinyl estradiol</i>	1	
<i>metronidazole vaginal</i>	1	QL
<i>miconazole-3 vaginal suppository</i>	1	
<i>terconazole</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>tranexamic acid oral</i>	1	
<i>vandazole</i>	1	QL
<i>xulane</i>	1	
ORAL CONTRACEPTIVES / RELATED AGENTS		
<i>afirmelle</i>	1	
<i>altavera (28)</i>	1	
<i>alyacen 1/35 (28)</i>	1	
<i>alyacen 7/7/7 (28)</i>	1	
<i>amethia</i>	1	
<i>amethia lo</i>	1	
<i>apri</i>	1	
<i>aranelle (28)</i>	1	
<i>ashlyna</i>	1	
<i>aubra</i>	1	
<i>aubra eq</i>	1	
<i>aurovela 1.5/30 (21)</i>	1	
<i>aurovela 1/20 (21)</i>	1	
<i>aurovela 24 fe</i>	1	
<i>aurovela fe 1.5/30 (28)</i>	1	
<i>aurovela fe 1-20 (28)</i>	1	
<i>aviane</i>	1	
<i>ayuna</i>	1	
<i>azurette (28)</i>	1	
<i>balziva (28)</i>	1	
<i>bekyree (28)</i>	1	
<i>blisovi 24 fe</i>	1	
<i>blisovi fe 1.5/30 (28)</i>	1	
<i>blisovi fe 1/20 (28)</i>	1	
<i>briellyn</i>	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
<i>camrese</i>	1	
<i>camrese lo</i>	1	
<i>caziant (28)</i>	1	
<i>chateal (28)</i>	1	
<i>chateal eq (28)</i>	1	
<i>cryselle (28)</i>	1	
<i>cyclafem 1/35 (28)</i>	1	
<i>cyclafem 7/7/7 (28)</i>	1	
<i>cyred</i>	1	
<i>cyred eq</i>	1	
<i>dasetta 1/35 (28)</i>	1	
<i>dasetta 7/7/7 (28)</i>	1	
<i>daysee</i>	1	
WIDE-SEAL DIAPHRAGM 65	2	QL
WIDE-SEAL DIAPHRAGM 70	2	QL
WIDE-SEAL DIAPHRAGM 75	2	QL
WIDE-SEAL DIAPHRAGM 80	2	QL
WIDE-SEAL DIAPHRAGM 85	2	QL
WIDE-SEAL DIAPHRAGM 90	2	QL
WIDE-SEAL DIAPHRAGM 95	2	QL
<i>desog- e.estradiol/e.estradiol</i>	1	
<i>desogestrel-ethinyl estradiol</i>	1	
<i>drospirenone- e.estradiol-lm.fa</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>drospirenone-ethinyl estradiol</i>	1	
<i>elinest</i>	1	
ELLA	2	QL
<i>emoquette</i>	1	
<i>enpresse</i>	1	
<i>enskyce</i>	1	
<i>estarylla</i>	1	
<i>ethynodiol diac-eth estradiol</i>	1	
<i>falmina (28)</i>	1	
<i>femynor</i>	1	
<i>gianvi (28)</i>	1	
<i>hailey</i>	1	
<i>hailey 24 fe</i>	1	
<i>introvale</i>	1	
<i>isibloom</i>	1	
<i>jasmiel (28)</i>	1	
<i>jolessa</i>	1	
<i>juleber</i>	1	
<i>junel 1.5/30 (21)</i>	1	
<i>junel 1/20 (21)</i>	1	
<i>junel fe 1.5/30 (28)</i>	1	
<i>junel fe 1/20 (28)</i>	1	
<i>junel fe 24</i>	1	
<i>kalliga</i>	1	
<i>kariva (28)</i>	1	
<i>kelnor 1/35 (28)</i>	1	
<i>kelnor 1-50</i>	1	
<i>kurvelo (28)</i>	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
<i>l norgest/e.estradiol-e.estradiol oral tablets,dose pack,3 month 0.10 mg-20 mcg (84)/10 mcg (7), 0.15 mg-30 mcg (84)/10 mcg (7)</i>	1	
<i>larin 1.5/30 (21)</i>	1	
<i>larin 1/20 (21)</i>	1	
<i>larin 24 fe</i>	1	
<i>larin fe 1.5/30 (28)</i>	1	
<i>larin fe 1/20 (28)</i>	1	
<i>larissia</i>	1	
<i>leena 28</i>	1	
<i>lessina</i>	1	
<i>levonest (28)</i>	1	
<i>levonorgestrel-ethinyl estradiol oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg</i>	1	
<i>levonorgestrel-ethinyl estradiol oral tablets,dose pack,3 month</i>	1	
<i>levonorg-eth estradiol triphasic</i>	1	
<i>levora-28</i>	1	
<i>lillow (28)</i>	1	
<i>loryna (28)</i>	1	
<i>low-ogestrel (28)</i>	1	
<i>lo-zumandimine (28)</i>	1	
<i>lutra (28)</i>	1	
<i>marlissa (28)</i>	1	
<i>microgestin 1.5/30 (21)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>microgestin 1/20 (21)</i>	1	
<i>microgestin fe 1.5/30 (28)</i>	1	
<i>microgestin fe 1/20 (28)</i>	1	
<i>mili</i>	1	
<i>mono-linyah</i>	1	
<i>necon 0.5/35 (28)</i>	1	
<i>nikki (28)</i>	1	
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	1	
<i>norethindrone-e.estradiol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	1	
<i>norgestimate-ethinyl estradiol oral tablet 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg</i>	1	
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35 (21)</i>	1	
<i>nortrel 1/35 (28)</i>	1	
<i>nortrel 7/7/7 (28)</i>	1	
<i>ocella</i>	1	
<i>ogestrel (28)</i>	1	QL
<i>orsythia</i>	1	
<i>philith</i>	1	
<i>pimtrea (28)</i>	1	
<i>pirmella</i>	1	
<i>portia 28</i>	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
<i>previfem</i>	1	
<i>reclipsen (28)</i>	1	
<i>setlakin</i>	1	
<i>simliya (28)</i>	1	
<i>simpesse</i>	1	
SLYND	2	
<i>sprintec (28)</i>	1	
<i>sronyx</i>	1	
<i>syeda</i>	1	
<i>tarina 24 fe</i>	1	
<i>tarina fe 1/20 (28)</i>	1	
<i>tarina fe 1-20 eq (28)</i>	1	
<i>tilia fe</i>	1	
<i>tri femynor</i>	1	
<i>tri-estarylla</i>	1	
<i>tri-legest fe</i>	1	
<i>tri-linyah</i>	1	
<i>tri-mili</i>	1	
<i>tri-previfem (28)</i>	1	
<i>tri-sprintec (28)</i>	1	
<i>trivora (28)</i>	1	
<i>tri-vylibra</i>	1	
<i>Rajani</i>	1	
<i>velivet triphasic regimen (28)</i>	1	
<i>vienva</i>	1	
<i>viorele (28)</i>	1	
<i>vyfemla (28)</i>	1	
<i>vylibra</i>	1	
<i>wera (28)</i>	1	
<i>zarah</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>zovia 1/35e (28)</i>	1	
<i>zumandimine (28)</i>	1	
OXYTOCICS		
<i>methergine</i>	1	
<i>methylergonovine oral</i>	1	
OPHTHALMOLOGY		
ANTIBIOTICS		
<i>ak-poly-bac</i>	1	
<i>bacitracin-polymyxin b ophthalmic (eye)</i>	1	
CILOXAN OPHTHALMIC (EYE) OINTMENT	2	
<i>ciprofloxacin hcl ophthalmic (eye)</i>	1	
<i>erythromycin ophthalmic (eye)</i>	1	
<i>gentamicin ophthalmic (eye) drops</i>	1	
<i>moxifloxacin ophthalmic (eye) drops</i>	1	
NATACYN	2	QL
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	1	
<i>ofloxacin ophthalmic (eye)</i>	1	QL
<i>polycin</i>	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
<i>polymyxin b sulf-trimethoprim</i>	1	
<i>tobramycin</i>	1	
TOBREX OPHTHALMIC (EYE) OINTMENT	2	
ANTIVIRALS		
<i>trifluridine</i>	1	
ZIRGAN	2	PA
BETA-BLOCKERS		
<i>betaxolol ophthalmic (eye)</i>	1	
<i>carteolol</i>	1	
<i>levobunolol ophthalmic (eye) drops 0.5 %</i>	1	
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	1	
CYCLOPLEGIC MYDRIATICS		
<i>atropine ophthalmic (eye) drops</i>	1	
<i>atropine ophthalmic (eye) ointment</i>	1	
<i>cyclopentolate ophthalmic (eye) drops 0.5 %, 1 %</i>	1	
<i>tropicamide</i>	1	
DIRECT ACTING MIOTICS		
<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	1	

Drug Name	Drug Tier	Requirements / Limits
MISCELLANEOUS OPTHALMOLOGICS		
<i>azelastine ophthalmic (eye)</i>	1	
<i>cromolyn ophthalmic (eye)</i>	1	
<i>olopatadine ophthalmic (eye)</i>	1	
RESTASIS TRAYS	2	ST
NON-STEROIDAL ANTI-INFLAMMATORY AGENTS		
<i>diclofenac sodium ophthalmic (eye)</i>	1	
<i>flurbiprofen sodium</i>	1	
<i>ketorolac ophthalmic (eye) drops 0.4 %</i>	1	QL
<i>ketorolac ophthalmic (eye) drops 0.5 %</i>	1	
ORAL DRUGS FOR GLAUCOMA		
<i>acetazolamide</i>	1	
<i>methazolamide</i>	1	
OTHER GLAUCOMA DRUGS		
AZOPT	2	ST
COMBIGAN	2	ST
<i>dorzolamide</i>	1	
<i>dorzolamide-timolol</i>	1	
<i>latanoprost</i>	1	
SIMBRINZA	2	
TRAVATAN Z	2	ST
STEROID-ANTIBIOTIC COMBINATIONS		
<i>neomycin-polymyxin b-dexameth</i>	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
TOBRADEX	2	
STEROIDS		
<i>dexamethasone sodium phosphate ophthalmic (eye)</i>	1	
<i>fluorometholone</i>	1	
FML S.O.P.	2	QL
PRED MILD	2	
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic (eye)</i>	1	
STEROID-SULFONAMIDE COMBINATIONS		
<i>sulfacetamide-prednisolone</i>	1	
SULFONAMIDES		
<i>sulfacetamide sodium ophthalmic (eye) drops</i>	1	
SYMPATHOMIMETICS		
ALPHAGAN P OPTHALMIC (EYE) DROPS 0.1 %	2	ST
ALPHAGAN P OPTHALMIC (EYE) DROPS 0.15 %	2	
<i>brimonidine ophthalmic (eye) drops 0.2 %</i>	1	
RESPIRATORY AND ALLERGY		
ANTI-HISTAMINE / ANTI-ALLERGENIC AGENTS		

Drug Name	Drug Tier	Requirements / Limits
<i>benzonatate oral capsule 100 mg, 200 mg</i>	1	
<i>brompheniramine-pseudoeph-dm oral syrup</i>	1	
<i>cetirizine oral solution 1 mg/ml</i>	1	PA
<i>clemastine oral tablet 2.68 mg</i>	1	
<i>codeine-guaifenesin</i>	1	
<i>cyproheptadine</i>	1	
<i>diphenhydramine hcl oral elixir</i>	1	
<i>epinephrine injection auto-injector 0.15 mg/0.3 ml, 0.3 mg/0.3 ml labeler 49502</i>	1	QL
<i>g tussin ac</i>	1	QL
<i>guaiaatussin ac</i>	1	QL
<i>guaifenesin ac</i>	1	QL
<i>hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml</i>	1	QL
HYDROCODONE-HOMATROPINE ORAL SYRUP 5-1.5 MG/5 ML (5 ML)	2	QL
<i>hydrocodone-homatropine oral tablet</i>	1	QL
<i>hydromet</i>	1	QL
<i>hydroxyzine hcl oral solution 10 mg/5 ml</i>	1	
<i>hydroxyzine hcl oral tablet</i>	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
<i>hydroxyzine pamoate</i>	1	
<i>phenadoz</i>	1	
<i>promethazine oral</i>	1	
<i>promethazine rectal suppository 12.5 mg, 25 mg</i>	1	
<i>promethazine vc</i>	1	
<i>promethazine-codeine</i>	1	QL
<i>promethazine-dm</i>	1	
<i>promethazine-phenyleph-codeine</i>	1	QL
<i>promethazine-phenylephrine</i>	1	
<i>promethegan rectal suppository 12.5 mg, 25 mg</i>	1	
SYMJEPI	2	
<i>virtussin ac</i>	1	QL
<i>virtussin dac</i>	1	QL
PULMONARY AGENTS		
ALBUTEROL SULFATE INHALATION HFA AEROSOL INHALER	2	QL
<i>albuterol sulfate inhalation solution for nebulization 0.63 mg/3 ml</i>	1	PA; QL
<i>albuterol sulfate inhalation solution for nebulization 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml</i>	1	QL
<i>albuterol sulfate oral</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>alyq</i>	1	PA
<i>ambrisentan</i>	1	PA
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ACTUATION (30), 220 MCG/ACTUATION (120), 220 MCG/ACTUATION (14), 220 MCG/ACTUATION (30), 220 MCG/ACTUATION (60)	2	
ATROVENT HFA	2	QL
BEVESPI AEROSPHERE	2	
<i>budesonide inhalation</i>	1	PA; QL
CHILDREN'S FLONASE ALLERGY RLF	2	OTC
COMBIVENT RESPIMAT	2	QL
<i>cromolyn inhalation</i>	1	QL
DULERA INHALATION HFA AEROSOL INHALER 100-5 MCG/ACTUATION , 200-5 MCG/ACTUATION	2	QL
DULERA INHALATION HFA AEROSOL INHALER 50-5 MCG/ACTUATION	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
ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	2	
ESBRIET	2	PA
FLONASE ALLERGY RELIEF	2	OTC
FLOVENT DISKUS	2	QL
FLOVENT HFA	2	QL
<i>flunisolide nasal spray, non-aerosol 25 mcg (0.025 %)</i>	1	QL
<i>fluticasone propionate nasal</i>	1	
<i>fluticasone propion-salmeterol inhalation blister with device labeler 66993</i>	1	QL
<i>ipratropium bromide inhalation</i>	1	QL
<i>ipratropium-albuterol</i>	1	QL
KALYDECO	2	PA
<i>metaproterenol oral syrup</i>	1	
<i>montelukast</i>	1	
OFEV	2	PA
ORKAMBI	2	PA
PROAIR RESPICLICK	2	
PULMICORT FLEXHALER	2	
PULMOZYME	2	PA
SEREVENT DISKUS	2	QL

Drug Name	Drug Tier	Requirements / Limits
<i>sildenafil (pulm.hypertension) oral suspension for reconstitution</i>	1	PA
<i>sildenafil (pulm.hypertension) oral tablet</i>	1	PA; QL
<i>sodium chloride inhalation</i>	1	
SPIRIVA RESPIMAT	2	QL
SPIRIVA WITH HANDIHALER	2	QL
SYMBICORT	2	
SYMDEKO	2	PA
<i>tadalafil (pulm.hypertension)</i>	1	PA
<i>terbutaline oral</i>	1	
THEO-24	2	
<i>theophylline oral elixir</i>	1	
<i>theophylline oral solution</i>	1	
<i>theophylline oral tablet extended release 12 hr</i>	1	
<i>theophylline oral tablet extended release 24 hr</i>	1	
TRACLEER ORAL TABLET	2	PA
TRIKAFTA	2	PA
UTIBRON NEOHALER	2	
<i>zafirlukast</i>	1	ST

UROLOGICALS

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
ANTICHOLINERGICS / ANTISPASMODICS		
<i>flavoxate</i>	1	
<i>oxybutynin chloride</i>	1	
OXYTROL	2	
<i>solifenacin</i>	1	ST
BENIGN PROSTATIC HYPERPLASIA(BPH) THERAPY		
<i>finasteride oral tablet 5 mg</i>	1	
<i>tamsulosin</i>	1	
CHOLINERGIC STIMULANTS		
<i>bethanechol chloride</i>	1	
MISCELLANEOUS UROLOGICALS		
<i>cytra k crystals</i>	1	
ELMIRON	2	
<i>methen-sod phos-meth blue-hyos</i>	1	
<i>potassium citrate</i>	1	
URELLE	2	
<i>urin ds</i>	1	
<i>ustell</i>	1	
<i>utira-c</i>	1	
URINARY ANESTHETICS		
<i>phenazopyridine oral tablet 100 mg, 200 mg</i>	1	
VITAMINS, HEMATINICS / ELECTROLYTES		
ELECTROLYTES		
<i>calcium acetate(phosphate bind)</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>effer-k oral tablet, effervescent 25 meq</i>	1	
GALZIN	2	PA
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
<i>klor-con sprinkle</i>	1	
PHOSLYRA	2	
<i>potassium chloride oral</i>	1	
VITAMINS / HEMATINICS		
<i>cyanocobalamin (vitamin b-12) injection</i>	1	
<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	1	
<i>folic acid oral tablet 1 mg</i>	1	
KOSHER PRENATAL PLUS IRON	2	
<i>m-natal plus</i>	1	
<i>mynatal</i>	1	
<i>mynatal advance</i>	1	
<i>pnv 29-1</i>	1	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
PRENATAL 19 CHEWABLE	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
<i>prenatal plus</i>	1	
<i>prenatal vitamin plus low iron</i>	1	
<i>preplus</i>	1	
<i>pretab</i>	1	

Drug Name	Drug Tier	Requirements / Limits
<i>se-natal-19 chewable</i>	1	
THRIVITE RX	2	
TRICARE	2	
<i>trinatal rx 1</i>	1	
<i>vitamin d2</i>	1	

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

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prednisolone	25	PULMOZYME.....	40	ropinirole	10
prednisolone acetate	38	PURIXAN	8	rosadan.....	21
prednisolone sodium phosphate	25, 38	pyrazinamide	5	rosuvastatin.....	19
prednisone	25	pyridostigmine bromide	11	roweepra	10
prednisone intensol.....	25	PYRIDOSTIGMINE		ROZLYTREK	8
pregabalin	10	BROMIDE.....	11	RUBRACA.....	8
PREMARIN	33	Q		RUXIENCE.....	8
PREMPHASE	33	quetiapine	15	RYDAPT	8
PREMPRO	33	QUILLICHEW ER.....	15	S	
prenatal vitamin plus low iron	42	quinapril.....	18	SABRIL.....	10
preplus	42	quinapril-hydrochlorothiazide	18	salicylic acid	20
pretab.....	42	quinidine gluconate	16	SAMSCA.....	28
prevalite.....	19	quinidine sulfate	16	SANDIMMUNE.....	8
previfem	36	quinine sulfate	5	SANTYL	24
PREZCOBIX.....	4	R		SAPHRIS.....	15
PREZISTA	4	raloxifene.....	31	selegiline hcl.....	10
PRIFTIN.....	5	ramipril	18	selenium sulfide.....	20
primaquine.....	5	ranitidine hcl.....	30, 32	se-natal-19	42
primidone	10	ranolazine	19	SEREVENT DISKUS	40
PROAIR RESPICLICK	40	REBIF (WITH ALBUMIN).31		sertraline	16
probenecid.....	31	REBIF REBIDOSE	31	setlakin.....	36
probenecid-colchicine	31	REBIF TITRATION PACK.31		sevelamer carbonate	24
prochlorperazine.....	29	reclipsen (28).....	36	sevelamer hcl.....	24
prochlorperazine maleate	29	REGANEX	20	sf 5000 plus.....	25
procto-med hc.....	29	RELENZA DISKHALER	4	sharobel.....	33
proctosol hc	29	repaglinide.....	27	sildenafil (pulm.hypertension)	40
proctozone-hc	29	repaglinide-metformin.....	27	silver sulfadiazine.....	20
progesterone	33	RESTASIS.....	37	SIMBRINZA	37
progesterone micronized	33			simliya (28).....	36
				simpesse.....	36
				simvastatin.....	19

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sirolimus.....	8	sumatriptan succinate.....	11	thiothixene.....	16
SIRTURO.....	5	SUPPRELIN LA.....	9	THRIVITE RX.....	42
SLYND.....	36	SUTENT.....	9	thyroid (pork).....	28
sodium chloride.....	24, 40	syeda.....	36	tiadylt er.....	18
sodium chloride 0.9 %.....	24	SYLATRON.....	31	TIBSOVO.....	9
sodium chloride 0.9 % (flush)	24	SYMBICORT.....	40	tilia fe.....	36
sodium fluoride 5000 plus.....	25	SYMDEKO.....	40	timolol maleate.....	18, 37
sodium polystyrene (sorb free)	24	SYMFI.....	4	TIVICAY.....	4
sodium polystyrene sulfonate	24	SYMFI LO.....	4	tizanidine.....	11
SOFOSBUVIR- VELPATASVIR.....	4	SYMJEPI.....	39	TOBRADEX.....	38
solifenacin.....	41	SYMLINPEN 120.....	27	tobramycin.....	37
SOLTAMOX.....	8	SYMLINPEN 60.....	27	tobramycin in 0.225 % nacl....	5
SORBITOL.....	24	SYNAGIS.....	4	TOBRAMYCIN WITH NEBULIZER.....	5
sotalol.....	16	SYNAREL.....	28	TOBEX.....	37
sotalol af.....	16	SYNJARDY.....	27	topiramate.....	10
SPIRIVA RESPIMAT.....	40	SYNRIBO.....	9	toremifene.....	9
SPIRIVA WITH HANDIHALER.....	40	T		torsemide.....	18
spironolactone.....	18	TABLOID.....	9	TRACLEER.....	40
spironolacton-hydrochlorothiaz	18	tacrolimus.....	9	TRADJENTA.....	27
sprintec (28).....	36	tadalafil (pulm. hypertension)	40	tramadol.....	12
SPRYCEL.....	8	TAFINLAR.....	9	TRAMADOL.....	12
sps (with sorbitol).....	24	TAGRISSO.....	9	tramadol-acetaminophen.....	12
sronyx.....	36	TALZENNA.....	9	trandolapril.....	18
ssd.....	20	tamoxifen.....	9	trandolapril-verapamil.....	18
SSKI.....	25	tamsulosin.....	41	tranexamic acid.....	33
sss 10-5.....	21	TARGRETIN.....	9	TRANSDERM-SCOP	29
sterile water for injection.....	24	tarina 24 fe.....	36	tranycypromine.....	16
STIVARGA.....	8	tarina fe 1/20 (28).....	36	TRAVATAN Z.....	37
SUBLOCADE.....	12	tarina fe 1-20 eq (28).....	36	trazodone.....	16
SUBOXONE	13	TASIGNA.....	9	TRECTOR.....	5
sucalfate.....	30	TAZORAC.....	21	TRESIBA FLEXTOUCH U- 100.....	27
sulfacetamide sodium.....	38	taztia xt.....	18	TRESIBA FLEXTOUCH U- 200.....	27
sulfacetamide sodium (acne).....	22	telmisartan-amlodipine.....	18	TRESIBA U-100 INSULIN.....	27
sulfacetamide sodium-sulfur.....	21	temazepam.....	16	tretinoin.....	21
sulfacetamide-prednisolone.....	38	temozolomide.....	9	tretinoin (chemotherapy).....	9
sulfadiazine.....	6	tenofovir disoproxil fumarate.....	4	tretinoin microspheres.....	21
sulfamethoxazole-trimethoprim	6	terazosin.....	18	TREXALL.....	9
sulfasalazine.....	29	terbinafine hcl.....	3	tri femynor.....	36
sulfatrim.....	6	terbutaline.....	40	triamcinolone acetonide.....	23, 24, 25
sulindac.....	13	terconazole.....	33	triamterene.....	18
sumatriptan.....	11	testosterone.....	28	triamterene-hydrochlorothiazid	18
		tetrabenazine.....	11	triazolam.....	16
		tetracycline.....	6	TRICARE.....	42
		THALOMID.....	9		
		THEO-24.....	40		
		theophylline.....	40		
		thioridazine.....	16		

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triderm.....	24	valsartan-hydrochlorothiazide		WIDE-SEAL DIAPHRAGM	
tri-estarylla.....	36	18	80.....	34
trifluoperazine.....	16	vancomycin.....	6	WIDE-SEAL DIAPHRAGM	
trifluridine.....	37	vandazole.....	33	85.....	34
trihexyphenidyl.....	10	VANTAS.....	9	WIDE-SEAL DIAPHRAGM	
tri-legest fe.....	36	VASELINE WHITE		90.....	34
tri-linyah.....	36	PETROLEUM.....	20	WIDE-SEAL DIAPHRAGM	
trilyte with flavor packets.....	29	velivet triphasic regimen (28)		95.....	34
trimethobenzamide.....	29	36	X	
trimethoprim.....	6	VENCLEXTA.....	9	XALKORI.....	9
tri-mili.....	36	VENCLEXTA STARTING		XARELTO.....	19
trimipramine.....	16	PACK.....	9	XOSPATA.....	9
trinatal rx 1.....	42	venlafaxine.....	16	XPOVIO.....	9
tri-previfem (28).....	36	verapamil.....	18	XTANDI.....	9
tri-sprintec (28).....	36	VERZENIO.....	9	xulane.....	33
TRIUMEQ.....	4	VIBRAMYCIN.....	6	Y	
trivora (28).....	36	VICTOZA 2-PAK.....	27	YONSA.....	9
tri-vylibra.....	36	VICTOZA 3-PAK.....	27	Z	
tropicamide.....	37	vienva.....	36	zafirlukast.....	40
TRULICITY.....	27	VIMPAT.....	10	zaleplon.....	16
TRUVADA.....	4	viorele (28).....	36	zarah.....	36
TRUXIMA.....	9	VIREAD.....	4	ZAVESCA.....	28
tulana.....	33	virtussin ac.....	39	zebutal.....	12
TURALIO.....	9	virtussin dac.....	39	ZEJULA.....	9
TYKERB.....	9	VISTOGARD.....	6	ZELBORAF.....	9
U		vitamin d2.....	42	ZENPEP.....	30
UDENYCA.....	31	VITRAKVI.....	9	zidovudine.....	4
unithroid.....	28	VIVITROL.....	13	ziprasidone hcl.....	16
urea.....	20	VIZIMPRO.....	9	ZIRABEV.....	9
UREA.....	20	VOTRIENT.....	9	ZIRGAN.....	37
URELLE.....	41	vyfemla (28).....	36	ZOLADEX.....	9
urin ds.....	41	vylibra.....	36	ZOLINZA.....	9
ursodiol.....	30	VYVANSE.....	16	zolpidem.....	16
ustell.....	41	W		zonisamide.....	10
UTIBRON NEOHALER.....	40	warfarin.....	19	ZORTRESS.....	9
utira-c.....	41	water for inject, bacteriostat.....	24	zovia 1/35e (28).....	36
V		water for injection, sterile.....	24	ZUBSOLV.....	13
valacyclovir.....	4	wera (28).....	36	zumandimine (28).....	36
VALCHLOR.....	20	WIDE-SEAL DIAPHRAGM		ZYDELIG.....	9
valganciclovir.....	4	65.....	34	ZYKADIA.....	9
valproic acid.....	10	WIDE-SEAL DIAPHRAGM		ZYPREXA RELPREVV.....	16
valproic acid (as sodium salt)		70.....	34	ZYTIGA.....	9
.....	10	WIDE-SEAL DIAPHRAGM			
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