



HealthPartners[®] Formulary

2025 Formulary

(List of covered drugs)



For current information on the Drug List, visit healthpartners.com/pharmacy.

Effective: January 1st, 2025

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What's the drug list?

This is the list of medicines (sometimes called a formulary) covered by your health plan. The drug list is reviewed by a team of experts every three months for new medicines, safety alerts and other updates.

Who decides what's on the drug list?

The HealthPartners Pharmacy and Therapeutics Committee manage the list. This team of experts focuses on safety, effectiveness and affordability. Visit healthpartners.com/pharmacy for more information.

How do you use the drug list?

The medicines are listed in alphabetical order by type of medicine starting on page 4.

Generic medicines are in *lowercase italics* (e.g., *cephalexin*). These medicines are safe and effective but cost less than brand medicines.

Brand medicines are in ALL CAPS (e.g., KEFLEX) and are more costly than generic medicines.

The **Tier** is used to determine how much a medicine will cost you. For exact cost information,

- Find the tier status for your medicine.
- Review your Summary of Plan Benefits or contract for the copay or coinsurance for that Tier Status. Or,
- Log on to your *myHealthPartners* account to check your pharmacy benefits.

T1 - Formulary Low Cost Generics - Depending on your plan, these medicines might be covered at the lowest copay or coinsurance.

T2 - Formulary High Cost Generics - Depending on your plan, these medicines may cost more than the Formulary Low Cost Generics, but less than Formulary Brands.

T3 - Formulary Brands - Brand medicines are more expensive than generic medicines. Depending on your plan, these medicines might be covered at a higher copay or coinsurance than generic medicines.

What's a Specialty Medicine?

Specialty medicines are usually prescribed by doctors whose focus is on the treatment of chronic and complex diseases. These medicines usually require more management, have a high price and aren't always stocked at retail pharmacies. Prescriptions for these medicines must be filled at a specialty pharmacy and are often covered at a different benefit than non-specialty medicines. Log on to your *myHealthPartners* account and click on *My plan benefits* on the Medical Plan tab to check your benefits for specialty medicines.

What do the abbreviations under *Limits & Restrictions* mean?

Special information about the medicine you're researching for. The abbreviations let you know there might be a special program or rule for the medicine. Use this key to help you navigate the drug list:

- PA - Prior Authorization Required
 - ST - Step Therapy Required
 - AL1 - Age Limit
 - AQ1 - Age Quantity Limit
 - QL - Quantity Limit
 - NP – Non-Preferred Drug
 - SC - Smoking Cessation Benefit
 - WL - Weight Loss Benefit
 - ONC - Oncology Benefit
 - OH - Oncology Health
 - TD - Trial Drug Program
 - S - Specialty
-

Why do you need prior authorization (PA) for some medicines?

Even though some medicines are on the drug list, they need to meet the HealthPartners prior authorization criteria in order for the medicine to be covered by your pharmacy benefits.

What's Step Therapy (ST)?

Some medicines are on the drug list, but you need to try one or more other medicines first. HealthPartners covers a medicine with step therapy, if you've already tried the other medicine(s). If you haven't, you or your doctor will need to get approval from HealthPartners before the medicine will be covered by your lowest brand, generic or specialty copay or coinsurance.

What's an Age Limit (AL1)?

An age edit means some medicines are only covered if you're within a specific age range. If you're not in the approved age range, you or your doctor will need to request approval from HealthPartners for your medicine to be covered.

What's an Age Quantity Limit (AQ1)?

An age quantity limit means some medicines have a quantity limit that only applies to a specific age range. If you're not in the approved age range, you or your doctor will need to request approval from HealthPartners for your medicine to be covered.

What's a Non-Preferred Drug?

A non-preferred drug is on the formulary but may assess a higher cost share. Log on to your secure account to check your benefits.

What's a Quantity Limit (QL)?

This means HealthPartners limits the amount of the medicine you'll get each time you fill your prescription. The quantity limit may be less than the day supply listed in your contract or Summary Plan Description. Requests above the quantity limit will be reviewed for medical necessity and include an evaluation of the diagnosis, alternatives previously tried, prior use of the requested product within quantity limit, and evidence of efficacy and safety at the quantity requested.

What's the Trial Drug Program (TD)?

The trial drug program is for new prescriptions for certain medicines due to:

- Side effects
- High cost
- High potential for waste

Your first 6 fills of a trial drug may be limited to less than a month supply. If the medicine works well, you'll get the rest of your month supply. If a copay applies to the medicine, you'll pay no more than one copay for each one month supply.

What's the Weight Loss Benefit (WL)?

This type of medicine may have limits on the amount you get or may not be covered under all plans. Log on to your *myHealthPartners* account and click on *My plan benefits* on the Medical Plan tab to check your benefits for weight loss. Weight Loss medicines are listed on the drug list under the Weight Loss medicine category.

What's the Oncology Benefit (ONC)?

These are oncology (cancer) medicines that must be filled at a specialty pharmacy. Log on to your secure account to check your benefits for coverage details.

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ALPHA-ADRENERGIC BLOCKING AGENT(SYMPATH)		
NON-SEL.ALPHA-ADRENERGIC BLOCKING AGENTS		
<i>dihydroergotamine mesylate 1 mg/ml ampul</i>	Formulary High Cost Generics	QL 24 MG (AMPS) / 28 DAYS PA NP Non-Preferred Drug
<i>ergoloid mesylates</i>	Formulary High Cost Generics	PA
ERGOMAR	Formulary Brands	QL 20 TABS / 30 DAYS PA NP Non-Preferred Drug
<i>ergotamine tartrate/caffeine</i>	Formulary High Cost Generics	QL 40 TABS / 30 DAYS PA NP Non-Preferred Drug
<i>phenoxybenzamine hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
SELECTIVE ALPHA-1-ADRENERGIC BLOCK.AGENT		
<i>alfuzosin hcl</i>	Formulary High Cost Generics	
<i>silodosin</i>	Formulary High Cost Generics	
<i>tamsulosin hcl</i>	Formulary Low Cost Generics	
ANALGESICS AND ANTIPYRETICS		
NON-OPIOID ANALGESICS		
<i>butalbital/acetaminophen 50mg-325mg tablet</i>	Formulary High Cost Generics	QL 6 TABS / 1 DAY
TENCON	Formulary High Cost Generics	QL 6 TABS / 1 DAY
OPIOID AGONISTS (28:08)		
<i>acetaminophen with codeine 300mg/12.5 solution</i>	Formulary High Cost Generics	QL 60 ML / 1 DAY AL1 At least 12 yrs old OP Opioid Program

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>acetaminophen with codeine phosphate (acetaminophen with codeine 120-12mg/5 solution, acetaminophen with codeine 240-24/10 solution)</i>	Formulary Low Cost Generics	<ul style="list-style-type: none"> QL 60 ML / 1 DAY AL1 At least 12 yrs old
<i>acetaminophen with codeine phosphate (acetaminophen with codeine 300mg-15mg tablet, acetaminophen with codeine 300mg-30mg tablet, acetaminophen with codeine 300mg-60mg tablet)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 8 TABS / 1 DAY AL1 At least 12 yrs old OP Opioid Program
<i>acetaminophen/caffeine/dihydrocodeine bitartrate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 8 CAPS / 1 DAY PA AL1 At least 12 yrs old NP Non-Preferred Drug OP Opioid Program
ASCOMP WITH CODEINE	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 CAPS / 1 DAY AL1 At least 12 yrs old OP Opioid Program
<i>benzhydrocodone hcl/acetaminophen</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> PA NP Non-Preferred Drug
<i>butalbit/acetamin/caff/codeine 50-300-30 capsule</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 CAPS / 1 DAY PA AL1 At least 12 yrs old NP Non-Preferred Drug OP Opioid Program
<i>butalbit/acetamin/caff/codeine 50-325-30 capsule</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 TABS / 1 DAY AL1 At least 12 yrs old OP Opioid Program
<i>codeine phosphate/butalbital/aspirin/caffeine</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 CAPS / 1 DAY AL1 At least 12 yrs old OP Opioid Program
<i>codeine sulfate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 8 TABS / 1 DAY AL1 At least 12 yrs old OP Opioid Program

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENDOCET 10-325 MG TABLET	Formulary High Cost Generics	<p>QL 5 TABS / 1 DAY</p> <p>OP Opioid Program</p>
ENDOCET 5-325 MG TABLET	Formulary High Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>OP Opioid Program</p>
ENDOCET 7.5-325 MG TABLET	Formulary High Cost Generics	<p>QL 7 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>fentanyl (fentanyl 12 mcg/hr patch td72, fentanyl 25 mcg/hr patch td72, fentanyl 50mcg/hr patch td72, fentanyl 75mcg/hr patch td72, fentanyl 100 mcg/hr patch td72)</i>	Formulary High Cost Generics	<p>PA</p>
<i>hydrocodone bitartrate (hydrocodone bitartrate 10 mg cap er 12h, hydrocodone bitartrate 15 mg cap er 12h, hydrocodone bitartrate 20 mg cap er 12h, hydrocodone bitartrate 30 mg cap er 12h, hydrocodone bitartrate 40 mg cap er 12h, hydrocodone bitartrate 50 mg cap er 12h)</i>	Formulary High Cost Generics	<p>PA</p> <p>OP Opioid Program</p>
<i>hydrocodone bitartrate/acetaminophen (hydrocodone/acetaminophen 2.5-108/5 solution, hydrocodone/acetaminophen 5-217mg/10 solution, hydrocodone/acetaminophen 7.5-325/15 solution)</i>	Formulary High Cost Generics	<p>QL 120 ML / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydrocodone bitartrate/acetaminophen (hydrocodone/acetaminophen 7.5-325 mg tablet, hydrocodone/acetaminophen 10mg-325mg tablet)</i>	Formulary High Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydrocodone/acetaminophen 5 mg-325mg tablet</i>	Formulary Low Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydrocodone/ibuprofen 7.5-200 mg tablet</i>	Formulary High Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydromorphone hcl (hydromorphone hcl 8 mg tab er 24h, hydromorphone hcl 12 mg tab er 24h, hydromorphone hcl 16 mg tab er 24h, hydromorphone hcl 32 mg tab er 24h)</i>	Formulary High Cost Generics	<p>PA</p>
<i>hydromorphone hcl 1 mg/ml liquid</i>	Formulary High Cost Generics	<p>QL 17 ML / 1 DAY</p> <p>OP Opioid Program</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydromorphone hcl 2 mg tablet</i>	Formulary High Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydromorphone hcl 3 mg supp.rect</i>	Formulary High Cost Generics	<p>QL 8 SUPP / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydromorphone hcl 4 mg tablet</i>	Formulary High Cost Generics	<p>QL 4 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>hydromorphone hcl 8 mg tablet</i>	Formulary High Cost Generics	<p>QL 2 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>levorphanol tartrate</i>	Formulary High Cost Generics	<p>PA</p> <p>OP Opioid Program</p>
<i>methadone hcl (methadone hcl 5 mg tablet, methadone hcl 5 mg/5 ml solution, methadone hcl 10 mg tablet, methadone hcl 10 mg/5 ml solution, methadone hcl 10 mg/ml oral conc, methadone hcl 40 mg tablet sol)</i>	Formulary High Cost Generics	PA
METHADONE INTENSOL	Formulary High Cost Generics	PA
METHADOSE 40 MG TABLET DISPR	Formulary High Cost Generics	PA
<i>morphine sulfate (morphine sulfate 15 mg tablet er, morphine sulfate 30 mg tablet er, morphine sulfate 60 mg tablet er, morphine sulfate 100 mg tablet er, morphine sulfate 200 mg tablet er)</i>	Formulary High Cost Generics	PA
<i>morphine sulfate (morphine sulfate 5 mg supp.rect, morphine sulfate 10 mg supp.rect, morphine sulfate 20 mg supp.rect, morphine sulfate 30 mg supp.rect)</i>	Formulary High Cost Generics	<p>QL 8 SUPP / 1 DAY</p> <p>OP Opioid Program</p>
<i>morphine sulfate 10 mg/5 ml solution</i>	Formulary High Cost Generics	<p>QL 30 ML / 1 DAY</p> <p>OP Opioid Program</p>
<i>morphine sulfate 100 mg/5ml solution</i>	Formulary High Cost Generics	<p>QL 4 ML / 1 DAY</p> <p>OP Opioid Program</p>
<i>morphine sulfate 15 mg tablet</i>	Formulary High Cost Generics	<p>QL 5 TABS / 1 DAY</p> <p>OP Opioid Program</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>morphine sulfate 20 mg/5 ml solution</i>	Formulary High Cost Generics	<p>QL 20 ML / 1 DAY</p> <p>OP Opioid Program</p>
<i>morphine sulfate 30 mg tablet</i>	Formulary High Cost Generics	<p>QL 2 TABS / 1 DAY</p> <p>OP Opioid Program</p>
MORPHINE SULFATE IR 15 MG TAB (BRAND)	Formulary Brands	<p>QL 5 TABS / 1 DAY</p> <p>OP Opioid Program</p>
MORPHINE SULFATE IR 30 MG TAB (BRAND)	Formulary Brands	<p>QL 2 TABS / 1 DAY</p> <p>OP Opioid Program</p>
NUCYNTA 100 MG TABLET	Formulary Brands	<p>QL 2 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p> <p>OP Opioid Program</p>
NUCYNTA 50 MG TABLET	Formulary Brands	<p>QL 4 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p> <p>OP Opioid Program</p>
NUCYNTA 75 MG TABLET	Formulary Brands	<p>QL 3 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p> <p>OP Opioid Program</p>
<i>oxycodone hcl (oxycodone hcl 10 mg tab er 12h, oxycodone hcl 20 mg tab er 12h, oxycodone hcl 30 mg tablet)</i>	Formulary High Cost Generics	<p>PA</p>
<i>oxycodone hcl (oxycodone hcl 15 mg tablet, oxycodone hcl 15 mg tablet orl)</i>	Formulary High Cost Generics	<p>QL 3 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>oxycodone hcl (oxycodone hcl 40 mg tab er 12h, oxycodone hcl 80 mg tab er 12h)</i>	Formulary Low Cost Generics	<p>PA</p>
<i>oxycodone hcl 10 mg tablet</i>	Formulary High Cost Generics	<p>QL 5 TABS / 1 DAY</p> <p>OP Opioid Program</p>
<i>oxycodone hcl 20 mg tablet</i>	Formulary High Cost Generics	<p>QL 2 TABS / 1 DAY</p> <p>OP Opioid Program</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>oxycodone hcl 20 mg/ml oral conc</i>	Formulary High Cost Generics	QL 2 ML / 1 DAY OP Opioid Program
<i>oxycodone hcl 5 mg capsule</i>	Formulary High Cost Generics	QL 8 CAPS / 1 DAY OP Opioid Program
<i>oxycodone hcl 5 mg tablet</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY OP Opioid Program
<i>oxycodone hcl 5 mg/5 ml solution</i>	Formulary Low Cost Generics	QL 40 ML / 1 DAY OP Opioid Program
<i>oxycodone hcl/acetaminophen 10mg-325mg tablet</i>	Formulary High Cost Generics	QL 5 TABS / 1 DAY OP Opioid Program
<i>oxycodone hcl/acetaminophen 5 mg-325mg tablet</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY OP Opioid Program
<i>oxycodone hcl/acetaminophen 7.5-325 mg tablet</i>	Formulary High Cost Generics	QL 7 TABS / 1 DAY OP Opioid Program
OXYCONTIN	Formulary Brands	PA
<i>oxymorphone hcl (oxymorphone hcl 5 mg tab er 12h, oxymorphone hcl 7.5 mg tab er 12h, oxymorphone hcl 10 mg tab er 12h, oxymorphone hcl 15 mg tab er 12h, oxymorphone hcl 20 mg tab er 12h, oxymorphone hcl 30 mg tab er 12h, oxymorphone hcl 40 mg tab er 12h)</i>	Formulary High Cost Generics	PA
<i>oxymorphone hcl 10 mg tablet</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY PA OP Opioid Program
<i>oxymorphone hcl 5 mg tablet</i>	Formulary High Cost Generics	QL 5 TABS / 1 DAY PA OP Opioid Program
<i>tramadol er 100 mg tablet (generic for ryzolt)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY PA AL1 At least 12 yrs old
<i>tramadol er 200 mg tablet (generic for ryzolt)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY PA AL1 At least 12 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tramadol er 300 mg tablet (generic for ryzolt)</i>	Formulary High Cost Generics	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl 50 mg tablet</i>	Formulary Low Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>AL1 At least 12 yrs old</p> <p>OP Opioid Program</p>
<i>tramadol hcl er 100 mg capsule (generic for conzip)</i>	Formulary High Cost Generics	<p>QL 3 CAPS / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl er 100 mg tablet (generic for ultram er)</i>	Formulary High Cost Generics	<p>QL 3 TABS / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl er 200 mg capsule (generic for conzip)</i>	Formulary High Cost Generics	<p>QL 1 CAP / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl er 200 mg tablet (generic for ultram er)</i>	Formulary High Cost Generics	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl er 300 mg capsule (generic for conzip)</i>	Formulary High Cost Generics	<p>QL 1 CAP / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl er 300 mg tablet (generic for ultram er)</i>	Formulary High Cost Generics	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p>
<i>tramadol hcl/acetaminophen</i>	Formulary High Cost Generics	<p>QL 8 TABS / 1 DAY</p> <p>PA</p> <p>AL1 At least 12 yrs old</p> <p>OP Opioid Program</p>
OPIOID PARTIAL AGONISTS		
<i>buprenorphine</i>	Formulary High Cost Generics	<p>PA</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>buprenorphine hcl 2 mg tab subl</i>	Formulary High Cost Generics	QL 12 TABS / 1 DAY
<i>buprenorphine hcl 8 mg tab subl</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>buprenorphine hcl/naloxone hcl (buprenorphine hcl/naloxone hcl 2 mg-0.5mg film, buprenorphine hcl/naloxone hcl 4mg-1mg film, buprenorphine hcl/naloxone hcl 8 mg-2 mg film)</i>	Formulary High Cost Generics	QL 3 FILMS / 1 DAY
<i>buprenorphine hcl/naloxone hcl (buprenorphine hcl/naloxone hcl 2 mg-0.5mg tab subl, buprenorphine hcl/naloxone hcl 8 mg-2 mg tab subl)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>buprenorphine hcl/naloxone hcl 12 mg-3 mg film</i>	Formulary High Cost Generics	QL 2 FILMS / 1 DAY
<i>pentazocine hcl/naloxone hcl</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY PA OP Opioid Program
ANOREXIGENIC AGENTS		
AMPHETAMINE DERIVATIVES		
LOMAIRA	Formulary High Cost Generics	QL 3 TABS / 1 DAY WL Weight Loss
<i>phentermine hcl (phentermine hcl 30 mg capsule, phentermine hcl 37.5 mg capsule)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY WL Weight Loss
<i>phentermine hcl 15 mg capsule</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY WL Weight Loss
<i>phentermine hcl 37.5 mg tablet</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY WL Weight Loss
ANOREXIGENICS;RESPIRATORY,CNS STIMULANTS		
AMPHETAMINES		
<i>amphetamine sulfate</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY PA NP Non-Preferred Drug
<i>dextroamp-amphetamin 15 mg tab (generic adderall)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dextroamp-amphetamin 20 mg tab (generic adderall)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate (dextroamphetamine/amphetamine 5 mg cap er 24h, dextroamphetamine/amphetamine 10 mg cap er 24h, dextroamphetamine/amphetamine 15 mg cap er 24h, dextroamphetamine/amphetamine 20 mg cap er 24h, dextroamphetamine/amphetamine 25 mg cap er 24h, dextroamphetamine/amphetamine 30 mg cap er 24h)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate (dextroamphetamine/amphetamine 5 mg tablet, dextroamphetamine/amphetamine 7.5 mg tablet, dextroamphetamine/amphetamine 10 mg tablet, dextroamphetamine/amphetamine 12.5 mg tablet)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>dextroamphetamine sulfate (dextroamphetamine sulfate 5 mg capsule er, dextroamphetamine sulfate 10 mg capsule er, dextroamphetamine sulfate 15 mg capsule er)</i>	Formulary High Cost Generics	QL 4 CAPS / 1 DAY
<i>dextroamphetamine sulfate (dextroamphetamine sulfate 5 mg tablet, dextroamphetamine sulfate 10 mg tablet)</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>dextroamphetamine/amphetamine 30 mg tablet</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>lisdexamfetamine dimesylate (lisdexamfetamine dimesylate 10 mg capsule, lisdexamfetamine dimesylate 20 mg capsule, lisdexamfetamine dimesylate 30 mg capsule)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>lisdexamfetamine dimesylate (lisdexamfetamine dimesylate 10 mg tab chew, lisdexamfetamine dimesylate 20 mg tab chew, lisdexamfetamine dimesylate 30 mg tab chew)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lisdexamfetamine dimesylate (lisdexamfetamine dimesylate 40 mg capsule, lisdexamfetamine dimesylate 50 mg capsule, lisdexamfetamine dimesylate 60 mg capsule, lisdexamfetamine dimesylate 70 mg capsule)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>lisdexamfetamine dimesylate (lisdexamfetamine dimesylate 40 mg tab chew, lisdexamfetamine dimesylate 50 mg tab chew, lisdexamfetamine dimesylate 60 mg tab chew)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
ANOREXIGENIC AGENTS		
CONTRAVE	Formulary Brands	PA WL Weight Loss
QSYMIA (QSYMIA 7.5 MG-46 MG CAPSULE, QSYMIA 11.25 MG-69 MG CAPSULE, QSYMIA 15 MG-92 MG CAPSULE)	Formulary Brands	QL 2 CAPS / 1 DAY PA WL Weight Loss
QSYMIA 3.75 MG-23 MG CAPSULE	Formulary Brands	QL 4 CAPS / 1 DAY PA WL Weight Loss
RESPIRATORY AND CNS STIMULANTS		
<i>atomoxetine hcl (atomoxetine hcl 10 mg capsule, atomoxetine hcl 18 mg capsule, atomoxetine hcl 25 mg capsule, atomoxetine hcl 40 mg capsule)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>atomoxetine hcl (atomoxetine hcl 60 mg capsule, atomoxetine hcl 80 mg capsule, atomoxetine hcl 100 mg capsule)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>dexmethylphenidate hcl (dexmethylphenidate hcl 2.5 mg tablet, dexmethylphenidate hcl 5 mg tablet, dexmethylphenidate hcl 10 mg tablet)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>dexmethylphenidate hcl (dexmethylphenidate hcl 25 mg cpbp 50-50, dexmethylphenidate hcl 30 mg cpbp 50-50, dexmethylphenidate hcl 35 mg cpbp 50-50, dexmethylphenidate hcl 40 mg cpbp 50-50)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexmethylphenidate hcl (dexmethylphenidate hcl 5 mg cbbp 50-50, dexmethylphenidate hcl 10 mg cbbp 50-50, dexmethylphenidate hcl 15 mg cbbp 50-50, dexmethylphenidate hcl 20 mg cbbp 50-50)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
METADATE ER	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>methylphenidate er 10 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>methylphenidate er 15 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>methylphenidate er 20 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>methylphenidate er 30 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>methylphenidate er 40 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>methylphenidate er 50 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>methylphenidate er 60 mg cap (authorized generic)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>methylphenidate hcl (methylphenidate hcl 10 mg cbbp 30-70, methylphenidate hcl 10 mg cbbp 50-50, methylphenidate hcl 10 mg csbp 40-60, methylphenidate hcl 15 mg csbp 40-60, methylphenidate hcl 20 mg cbbp 30-70, methylphenidate hcl 20 mg cbbp 50-50, methylphenidate hcl 20 mg csbp 40-60, methylphenidate hcl 30 mg cbbp 30-70, methylphenidate hcl 30 mg cbbp 50-50, methylphenidate hcl 30 mg csbp 40-60)</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
<i>methylphenidate hcl (methylphenidate hcl 18 mg tab er 24, methylphenidate hcl 27 mg tab er 24, methylphenidate hcl 36 mg tab er 24)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>methylphenidate hcl (methylphenidate hcl 40 mg cbbp 30-70, methylphenidate hcl 40 mg cbbp 50-50, methylphenidate hcl 40 mg csbp 40-60, methylphenidate hcl 50 mg cbbp 30-70, methylphenidate hcl 50 mg csbp 40-60, methylphenidate hcl 60 mg cbbp 30-70, methylphenidate hcl 60 mg cbbp 50-50, methylphenidate hcl 60 mg csbp 40-60)</i>	Formulary High Cost Generics	QL 1 CAP / 1 DAY
<i>methylphenidate hcl (methylphenidate hcl 5 mg tablet, methylphenidate hcl 10 mg tablet, methylphenidate hcl 20 mg tablet, methylphenidate hcl 20 mg tablet er)</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>methylphenidate hcl 10 mg tablet er</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>methylphenidate hcl 10 mg/5 ml solution</i>	Formulary High Cost Generics	QL 30 ML / 1 DAY
<i>methylphenidate hcl 5 mg/5 ml solution</i>	Formulary High Cost Generics	QL 60 ML / 1 DAY
<i>methylphenidate hcl 54 mg tab er 24</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
WAKEFULNESS-PROMOTING AGENTS		
<i>armodafinil (armodafinil 150 mg tablet, armodafinil 200 mg tablet, armodafinil 250 mg tablet)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
<i>armodafinil 50 mg tablet</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>modafinil</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>sodium oxybate</i>	Formulary High Cost Generics	QL 18 ML / 1 DAY PA S Specialty Drug
SUNOSI	Formulary Brands	QL 1 TAB / 1 DAY PA NP Non-Preferred Drug
ANTI-INFECTIVE AGENTS		
ANTHELMINTICS		
<i>albendazole</i>	Formulary High Cost Generics	PA
<i>ivermectin 3 mg tablet</i>	Formulary High Cost Generics	QL 40 TABS / RX

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>praziquantel</i>	Formulary High Cost Generics	NP Non-Preferred Drug
URINARY ANTI-INFECTIVES		
<i>fosfomycin tromethamine</i>	Formulary High Cost Generics	QL 1 PACKET / RX NP Non-Preferred Drug
<i>methenamine hippurate</i>	Formulary High Cost Generics	
<i>nitrofurantoin 25 mg/5 ml oral susp</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>nitrofurantoin macrocrystal</i> (<i>nitrofurantoin macrocrystal 50 mg capsule, nitrofurantoin macrocrystal 100 mg capsule</i>)	Formulary High Cost Generics	
<i>nitrofurantoin macrocrystal 25 mg capsule</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>nitrofurantoin monohydrate/macrocrystals</i>	Formulary High Cost Generics	
<i>trimethoprim</i>	Formulary Low Cost Generics	
ANTI-INFECTIVES (EENT)		
ANTI-INFECTIVES, MISCELLANEOUS (52:04)		
<i>acetic acid 2 % solution</i>	Formulary High Cost Generics	
<i>hydrocortisone/acetic acid 1 %-2 % drops</i>	Formulary High Cost Generics	
ANTIBACTERIALS (52:04)		
AK-POLY-BAC	Formulary High Cost Generics	
AZASITE	Formulary Brands	PA NP Non-Preferred Drug
<i>bacitracin 500 unit/g oint. (g)</i>	Formulary High Cost Generics	
<i>bacitracin/polymyxin b sulfate</i>	Formulary High Cost Generics	
BESIVANCE	Formulary Brands	PA
<i>ciprofloxacin hcl 0.2 % dropperette</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>ciprofloxacin hcl 0.3 % drops</i>	Formulary Low Cost Generics	
<i>ciprofloxacin hcl/dexamethasone</i>	Formulary High Cost Generics	NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ciprofloxacin hcl/fluocinolone acetonide</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>doxycycline hyclate 20 mg tablet</i>	Formulary Low Cost Generics	
<i>erythromycin base 5 mg/gram oint. (g)</i>	Formulary High Cost Generics	
<i>erythromycin base in ethanol 2 % gel (gram)</i>	Formulary High Cost Generics	
<i>erythromycin base in ethanol 2 % solution</i>	Formulary Low Cost Generics	QL 60 ML / 30 DAYS
<i>gatifloxacin</i>	Formulary High Cost Generics	
GENTAK	Formulary High Cost Generics	
<i>gentamicin sulfate 0.3 % drops</i>	Formulary High Cost Generics	
<i>moxifloxacin hcl 0.5 % drops</i>	Formulary Low Cost Generics	
<i>moxifloxacin hcl 400 mg tablet</i>	Formulary High Cost Generics	
NEO-POLYCIN	Formulary High Cost Generics	
<i>neomycin sulfate/bacitracin/polymyxin b</i>	Formulary High Cost Generics	
<i>neomycin sulfate/polymyxin b sulfate/gramicidin d</i>	Formulary Low Cost Generics	
<i>neomycin sulfate/polymyxin b sulfate/hydrocortisone (neomycin/polymyxin b/hydrocort 3.5-10k-1 drops susp, neomycin/polymyxin b/hydrocort 3.5-10k-1 solution)</i>	Formulary High Cost Generics	
<i>neomycin/polymyxin b sulfate/dexamethasone (neomycin/polymyxin b/dexametha 0.1 % drops susp, neomycin/polymyxin b/dexametha 3.5-10k-.1 oint. (g))</i>	Formulary High Cost Generics	
<i>ofloxacin 0.3 % drops</i>	Formulary High Cost Generics	
POLYCIN	Formulary High Cost Generics	
PRED-G	Formulary Brands	PA NP Non-Preferred Drug
<i>sulfacetamide sodium (sulfacetamide sodium 10 % drops, sulfacetamide sodium 10 % oint. (g))</i>	Formulary High Cost Generics	
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tobramycin 0.3 % drops</i>	Formulary High Cost Generics	
<i>tobramycin/dexamethasone</i>	Formulary High Cost Generics	
ZYLET	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">NP</div> <div>Non-Preferred Drug</div> </div>
ANTIVIRALS (EENT)		
<i>trifluridine</i>	Formulary High Cost Generics	
ASTRINGENTS (52:04)		
<i>chlorhexidine gluconate 0.12 % mouthwash</i>	Formulary Low Cost Generics	
PAROEX	Formulary High Cost Generics	
PERIOGARD	Formulary High Cost Generics	
ANTI-INFECTIVES (SKIN, MUCOUS MEMBRANE)		
ANTIBACTERIALS (84:04)		
ALTABAX	Formulary Brands	ST
<i>azelaic acid</i>	Formulary High Cost Generics	
<i>erythromycin base/benzoyl peroxide</i>	Formulary High Cost Generics	
<i>gentamicin sulfate 0.1 % cream (g)</i>	Formulary High Cost Generics	
<i>gentamicin sulfate 0.1 % oint. (g)</i>	Formulary Low Cost Generics	
<i>mafenide acetate</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">NP</div> <div>Non-Preferred Drug</div> </div>
<i>mupirocin</i>	Formulary Low Cost Generics	QL 44 GM / 1 FILL
ASTRINGENTS, ANTI-INFECTIVE		
<i>selenium sulfide 2.5 % lotion</i>	Formulary High Cost Generics	
<i>silver sulfadiazine</i>	Formulary High Cost Generics	
SSD	Formulary High Cost Generics	
LOCAL ANTI-INFECTIVES, MISCELLANEOUS		
<i>sulfacetamide sod/sulfur/urea 10%-5%-10% cleanser</i>	Formulary High Cost Generics	QL 12 ML / 1 DAY
<i>sulfacetamide sodium 10 % suspension</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SCABICIDES AND PEDICULICIDES		
EURAX 10% CREAM	Formulary Brands	PA NP Non-Preferred Drug
<i>lindane</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>malathion</i>	Formulary High Cost Generics	
<i>permethrin 5 % cream (g)</i>	Formulary High Cost Generics	
<i>spinosad</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
ULESFIA	Formulary Brands	PA
ANTI-INFLAMMATORY AGENTS (EENT)		
CORTICOSTEROIDS (EENT)		
<i>dexamethasone sodium phosphate 0.1 % drops</i>	Formulary High Cost Generics	
<i>flunisolide</i>	Formulary High Cost Generics	
<i>fluocinolone acetonide oil</i>	Formulary High Cost Generics	
<i>fluorometholone</i>	Formulary High Cost Generics	
<i>fluticasone prop 50 mcg spray (rx only)</i>	Formulary Low Cost Generics	
<i>fluticasone propionate 50 mcg spray susp</i>	Formulary Low Cost Generics	
<i>loteprednol etabonate (loteprednol etabonate 0.5 % drops gel, loteprednol etabonate 0.5 % drops susp)</i>	Formulary High Cost Generics	
<i>prednisolone ac 1% eye drop (generic pred forte)</i>	Formulary High Cost Generics	
<i>prednisolone sodium phosphate 1 % drops</i>	Formulary Low Cost Generics	
EENT NONSTEROIDAL ANTI-INFLAM. AGENTS		
<i>bromfenac sodium 0.09 % drops</i>	Formulary High Cost Generics	
<i>diclofenac sodium 0.1 % drops</i>	Formulary Low Cost Generics	
<i>flurbiprofen sodium</i>	Formulary Low Cost Generics	
<i>ketorolac tromethamine (ketorolac tromethamine 0.4 % drops, ketorolac tromethamine 0.5 % drops)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTI-INFLAMMATORY AGENTS (RESPIRATORY)		
INTERLEUKIN ANTAGONISTS		
ARCALYST	Formulary Brands	PA S Specialty Drug
FASENRA PEN	Formulary Brands	QL 1 SYRINGE / 56 DAYS PA S Specialty Drug
ILARIS	Formulary Brands	QL 1 ML / 56 DAYS PA S Specialty Drug
NUCALA (NUCALA 40 MG/0.4 ML SYRINGE, NUCALA 100 MG/ML SYRINGE)	Formulary Brands	QL 1 SYRINGE / 28 DAYS PA S Specialty Drug
NUCALA 100 MG/ML AUTO-INJECTOR	Formulary Brands	QL 1 AUTO-INJECTOR / 28 DAYS PA S Specialty Drug
LEUKOTRIENE MODIFIERS		
<i>montelukast sodium (montelukast sodium 4 mg gran pack, montelukast sodium 4 mg tab chew, montelukast sodium 5 mg tab chew)</i>	Formulary High Cost Generics	
<i>montelukast sodium 10 mg tablet</i>	Formulary Low Cost Generics	
<i>zafirlukast</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>zileuton</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY PA NP Non-Preferred Drug
MAST-CELL STABILIZERS		
ALOCRIAL	Formulary Brands	PA NP Non-Preferred Drug
<i>cromolyn sodium 20 mg/2 ml ampul-neb</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cromolyn sodium 4 % drops</i>	Formulary High Cost Generics	
ANTI-INFLAMMATORY AGENTS (SKIN, MUCOUS)		
CORTICOSTEROIDS (SKIN, MUCOUS MEMBRANE)		
ALA-CORT 1% CREAM	Formulary High Cost Generics	
<i>alclometasone dipropionate</i>	Formulary High Cost Generics	
<i>amcinonide 0.1 % cream (g)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>betamethasone dipropionate (betamethasone dipropionate 0.05 % cream (g), betamethasone dipropionate 0.05 % gel (gram), betamethasone dipropionate 0.05 % lotion, betamethasone dipropionate 0.05 % oint. (g))</i>	Formulary High Cost Generics	
<i>betamethasone dipropionate/propylene glycol (betamethasone/propylene glycol 0.05 % lotion, betamethasone/propylene glycol 0.05 % oint. (g))</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>betamethasone valerate (betamethasone valerate 0.1 % cream (g), betamethasone valerate 0.1 % lotion, betamethasone valerate 0.1 % oint. (g))</i>	Formulary High Cost Generics	
<i>betamethasone/propylene glycol 0.05 % cream (g)</i>	Formulary Low Cost Generics	
<i>clobetasol propionate (clobetasol propionate 0.05 % cream (g), clobetasol propionate 0.05 % gel (gram), clobetasol propionate 0.05 % oint. (g), clobetasol propionate 0.05 % shampoo, clobetasol propionate 0.05 % solution)</i>	Formulary High Cost Generics	
<i>clobetasol propionate/emoll 0.05 % cream (g)</i>	Formulary High Cost Generics	
CORDRAN 4 MCG/SQ CM TAPE LARGE	Formulary Brands	PA NP Non-Preferred Drug
<i>desonide (desonide 0.05 % cream (g), desonide 0.05 % lotion, desonide 0.05 % oint. (g))</i>	Formulary High Cost Generics	
<i>desoximetasone (desoximetasone 0.25 % cream (g), desoximetasone 0.25 % oint. (g))</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diflorasone diacetate</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>fluocinolone acetonide (fluocinolone acetonide 0.01 % cream (g), fluocinolone acetonide 0.01 % oil, fluocinolone acetonide 0.025 % cream (g), fluocinolone acetonide 0.025 % oint. (g))</i>	Formulary High Cost Generics	
<i>fluocinolone acetonide 0.01 % solution</i>	Formulary High Cost Generics	QL 60 ML / 30 DAYS
<i>fluocinolone acetonide/shower cap</i>	Formulary High Cost Generics	
<i>fluocinonide (fluocinonide 0.05 % cream (g), fluocinonide 0.05 % gel (gram), fluocinonide 0.05 % oint. (g), fluocinonide 0.05 % solution, fluocinonide 0.1 % cream (g))</i>	Formulary High Cost Generics	
<i>fluocinonide/emollient base</i>	Formulary High Cost Generics	
<i>fluticasone propionate (fluticasone propionate 0.005 % oint. (g), fluticasone propionate 0.05 % cream (g))</i>	Formulary High Cost Generics	
<i>halobetasol propionate (halobetasol propionate 0.05 % cream (g), halobetasol propionate 0.05 % oint. (g))</i>	Formulary High Cost Generics	
<i>halobetasol propionate 0.05 % foam</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>hydrocortisone (hydrocortisone 1 % cream (g), hydrocortisone 2.5 % cream (g), hydrocortisone 2.5 % crm/pe app, hydrocortisone 2.5 % lotion, hydrocortisone 100mg/60ml enema)</i>	Formulary High Cost Generics	
<i>hydrocortisone 1% cream (rx only)</i>	Formulary High Cost Generics	
<i>hydrocortisone 2.5 % oint. (g)</i>	Formulary Low Cost Generics	
<i>hydrocortisone acetate 25 mg supp.rect</i>	Formulary High Cost Generics	
<i>hydrocortisone acetate/pramoxine hcl (hydrocortisone/pramoxine 1 %-1 % cream/appl, hydrocortisone/pramoxine 2.35 %-1 % cream (g), hydrocortisone/pramoxine 2.5 %-1 % cream (g), hydrocortisone/pramoxine 2.5 %-1 % cream/appl)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydrocortisone butyrate (hydrocortisone butyrate 0.1 % cream (g), hydrocortisone butyrate 0.1 % oint. (g))</i>	Formulary High Cost Generics	
<i>hydrocortisone valerate (hydrocortisone valerate 0.2 % cream (g), hydrocortisone valerate 0.2 % oint. (g))</i>	Formulary High Cost Generics	
<i>hydrocortisone-1% ointment</i>	Formulary High Cost Generics	
<i>mometasone furoate (mometasone furoate 0.1 % cream (g), mometasone furoate 0.1 % oint. (g), mometasone furoate 0.1 % solution)</i>	Formulary High Cost Generics	
ORALONE	Formulary High Cost Generics	
PROCTO-MED HC	Formulary High Cost Generics	
PROCTOCORT 1% CREAM	Formulary Brands	
PROCTOSOL-HC	Formulary High Cost Generics	
PROCTOZONE-HC	Formulary High Cost Generics	
<i>triamcinolone acetonide (triamcinolone acetonide 0.025 % cream (g), triamcinolone acetonide 0.025 % lotion, triamcinolone acetonide 0.025 % oint. (g), triamcinolone acetonide 0.1 % cream (g), triamcinolone acetonide 0.1 % lotion, triamcinolone acetonide 0.1 % oint. (g), triamcinolone acetonide 0.5 % cream (g), triamcinolone acetonide 0.5 % oint. (g))</i>	Formulary High Cost Generics	
<i>triamcinolone acetonide 0.1 % paste (g)</i>	Formulary Low Cost Generics	
IMMUNOMODULATORY AGENTS (84:06)		
<i>pimecrolimus</i>	Formulary High Cost Generics	QL 100 GM / 30 DAYS
SKYRIZI 150 MG/ML SYRINGE	Formulary Brands	QL 1 SYRINGE / 84 DAYS PA S Specialty Drug
SKYRIZI ON-BODY	Formulary Brands	QL 1 CARTRIDGE / 56 DAYS PA S Specialty Drug
SKYRIZI PEN	Formulary Brands	QL 1 PEN / 84 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tacrolimus (tacrolimus 0.03 % oint. (g), tacrolimus 0.1 % oint. (g))</i>	Formulary High Cost Generics	QL 100 GM / 30 DAYS
PHOSPHODIESTERASE-4 INHIBITORS (84:06)		
EUCRISA	Formulary Brands	QL 60 GM / 30 DAYS ST
ANTIARRHYTHMIC AGENTS		
CLASS IA ANTIARRHYTHMICS		
<i>disopyramide phosphate</i>	Formulary High Cost Generics	
NORPACE CR	Formulary Brands	
<i>quinidine sulfate</i>	Formulary High Cost Generics	
CLASS IB ANTIARRHYTHMICS		
<i>mexiletine hcl</i>	Formulary High Cost Generics	
CLASS IC ANTIARRHYTHMICS		
<i>flecainide acetate</i>	Formulary High Cost Generics	
<i>propafenone hcl (propafenone hcl 150 mg tablet, propafenone hcl 225 mg tablet, propafenone hcl 300 mg tablet)</i>	Formulary High Cost Generics	
CLASS III ANTIARRHYTHMICS		
<i>amiodarone hcl (amiodarone hcl 100 mg tablet, amiodarone hcl 200 mg tablet, amiodarone hcl 400 mg tablet)</i>	Formulary High Cost Generics	
<i>dofetilide</i>	Formulary High Cost Generics	
MULTAQ	Formulary Brands	PA NP Non-Preferred Drug
PACERONE	Formulary High Cost Generics	
CLASS IV ANTIARRHYTHMICS		
CARTIA XT	Formulary High Cost Generics	
DILT-XR	Formulary Low Cost Generics	
<i>diltiazem 24hr er 360 mg cap (generic for cardizem cd)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>diltiazem hcl (diltiazem hcl 120 mg cap er deg, diltiazem hcl 180 mg cap er deg, diltiazem hcl 240 mg cap er deg, diltiazem hcl 360 mg cap sa 24h)</i>	Formulary Low Cost Generics	
<i>diltiazem hcl (diltiazem hcl 30 mg tablet, diltiazem hcl 60 mg tablet, diltiazem hcl 90 mg tablet, diltiazem hcl 120 mg cap er 24h, diltiazem hcl 120 mg cap sa 24h, diltiazem hcl 120 mg tablet, diltiazem hcl 180 mg cap er 24h, diltiazem hcl 180 mg cap sa 24h, diltiazem hcl 240 mg cap er 24h, diltiazem hcl 240 mg cap sa 24h, diltiazem hcl 300 mg cap er 24h, diltiazem hcl 300 mg cap sa 24h, diltiazem hcl 420 mg cap sa 24h)</i>	Formulary High Cost Generics	
TAZTIA XT (TAZTIA XT 120 MG CAPSULE, TAZTIA XT 180 MG CAPSULE, TAZTIA XT 240 MG CAPSULE, TAZTIA XT 300 MG CAPSULE)	Formulary High Cost Generics	
TAZTIA XT 360 MG CAPSULE	Formulary Low Cost Generics	
TIADYLT ER (TIADYLT ER 120 MG CAPSULE, TIADYLT ER 180 MG CAPSULE, TIADYLT ER 240 MG CAPSULE, TIADYLT ER 300 MG CAPSULE, TIADYLT ER 420 MG CAPSULE)	Formulary High Cost Generics	
TIADYLT ER 360 MG CAPSULE	Formulary Low Cost Generics	
<i>verapamil hcl (verapamil hcl 120 mg tablet er, verapamil hcl 180 mg tablet er, verapamil hcl 240 mg tablet er, verapamil hcl 360 mg cap24h pel)</i>	Formulary High Cost Generics	
<i>verapamil hcl (verapamil hcl 40 mg tablet, verapamil hcl 80 mg tablet, verapamil hcl 120 mg cap24h pel, verapamil hcl 120 mg tablet, verapamil hcl 180 mg cap24h pel, verapamil hcl 240 mg cap24h pel)</i>	Formulary Low Cost Generics	
ANTIBACTERIALS (08:12)		
AMINOGLYCOSIDE ANTIBIOTICS		
<i>neomycin sulfate</i>	Formulary High Cost Generics	
<i>tobramycin in 0.225 % sodium chloride</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 CARTON (56 AMPULES) / 56 DAYS</div> </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center; gap: 5px; margin-top: 5px;"> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
QUINOLONE ANTIBIOTICS		
BAXDELA 450 MG TABLET	Formulary Brands	PA NP Non-Preferred Drug
CIPRO (CIPRO 5% SUSPENSION, CIPRO 10% SUSPENSION)	Formulary Brands	AL1 Up to 12 yrs old
CIPRO HC	Formulary Brands	NP Non-Preferred Drug
<i>ciprofloxacin</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>ciprofloxacin hcl (ciprofloxacin hcl 100 mg tablet, ciprofloxacin hcl 250 mg tablet, ciprofloxacin hcl 500 mg tablet, ciprofloxacin hcl 750 mg tablet)</i>	Formulary Low Cost Generics	
FACTIVE	Formulary Brands	PA
<i>levofloxacin (levofloxacin 0.5 % drops, levofloxacin 1.5 % drops)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>levofloxacin (levofloxacin 250 mg tablet, levofloxacin 500 mg tablet, levofloxacin 750 mg tablet)</i>	Formulary Low Cost Generics	
<i>levofloxacin 250mg/10ml solution</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
SULFONAMIDE ANTIBIOTICS (SYSTEMIC)		
<i>sulfadiazine</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>sulfamethoxazole/trimethoprim (sulfamethoxazole/trimethoprim 200-40mg/5 oral susp, sulfamethoxazole/trimethoprim 400mg-80mg tablet, sulfamethoxazole/trimethoprim 800-160 mg tablet, sulfamethoxazole/trimethoprim 800-160/20 oral susp)</i>	Formulary Low Cost Generics	
<i>sulfasalazine (sulfasalazine 500 mg tablet, sulfasalazine 500 mg tablet dr)</i>	Formulary High Cost Generics	
SULFATRIM	Formulary High Cost Generics	
TETRACYCLINE ANTIBIOTICS		
<i>demeclocycline hcl</i>	Formulary High Cost Generics	PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>doxycycline hyclate (doxycycline hyclate 50 mg capsule, doxycycline hyclate 100 mg capsule, doxycycline hyclate 100 mg tablet)</i>	Formulary Low Cost Generics	
<i>doxycycline monohydrate (doxycycline monohydrate 50 mg capsule, doxycycline monohydrate 50 mg tablet, doxycycline monohydrate 100 mg capsule, doxycycline monohydrate 100 mg tablet)</i>	Formulary High Cost Generics	
<i>doxycycline monohydrate 25 mg/5 ml susp recon</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>minocycline hcl (minocycline hcl 50 mg capsule, minocycline hcl 75 mg capsule, minocycline hcl 100 mg capsule)</i>	Formulary High Cost Generics	
<i>tetracycline hcl (tetracycline hcl 250 mg capsule, tetracycline hcl 500 mg capsule)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
ANTIBACTERIALS, MISCELLANEOUS		
GLYCOPEPTIDE ANTIBIOTICS		
<i>vancomycin hcl 125 mg capsule</i>	Formulary High Cost Generics	
<i>vancomycin hcl 250 mg capsule</i>	Formulary Low Cost Generics	
LINCOMYCIN ANTIBIOTICS		
CLEOCIN 100 MG VAGINAL OVULE	Formulary Brands	NP Non-Preferred Drug
<i>clindamycin hcl (clindamycin hcl 150 mg capsule, clindamycin hcl 300 mg capsule)</i>	Formulary Low Cost Generics	
<i>clindamycin hcl 75 mg capsule</i>	Formulary High Cost Generics	
<i>clindamycin palmitate hcl</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>clindamycin ph 1% gel (generic for cleocin t)</i>	Formulary High Cost Generics	
<i>clindamycin phosphate (clindamycin phosphate 1 % lotion, clindamycin phosphate 1 % med. swab, clindamycin phosphate 2 % cream/appl)</i>	Formulary High Cost Generics	
<i>clindamycin phosphate 1 % solution</i>	Formulary High Cost Generics	QL 60 ML / 30 DAYS

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clindamycin phosphate/benzoyl peroxide (clindamycin phos/benzoyl perox 1 %-5 % gel (gram), clindamycin phos/benzoyl perox 1 %-5 % gel w/pump, clindamycin phos/benzoyl perox 1.2(1)%-5% gel (gram))</i>	Formulary High Cost Generics	
NEUAC GEL	Formulary High Cost Generics	
OXAZOLIDINONE ANTIBIOTICS		
<i>linezolid 100 mg/5ml susp recon</i>	Formulary High Cost Generics	PA
<i>linezolid 600 mg tablet</i>	Formulary High Cost Generics	QL 28 TABS / RX
POLYMYXIN ANTIBIOTICS		
<i>polymyxin b sulfate/trimethoprim</i>	Formulary High Cost Generics	
RIFAMYCIN ANTIBIOTICS		
XIFAXAN	Formulary Brands	PA
ANTICHOLINERGIC AGENTS		
ANTIMUSCARINICS/ANTISPASMODICS		
ANORO ELLIPTA	Formulary Brands	
ATROVENT HFA	Formulary Brands	QL 1 INHALER / 25 DAYS
COMBIVENT RESPIMAT	Formulary Brands	QL 1 INHALER / 30 DAYS
<i>dicyclomine hcl (dicyclomine hcl 10 mg/5 ml solution, dicyclomine hcl 20 mg tablet)</i>	Formulary Low Cost Generics	
<i>dicyclomine hcl 10 mg capsule</i>	Formulary High Cost Generics	
<i>glycopyrrolate (glycopyrrolate 1 mg tablet, glycopyrrolate 2 mg tablet)</i>	Formulary High Cost Generics	
<i>glycopyrrolate 1 mg/5 ml solution</i>	Formulary High Cost Generics	PA
<i>hyoscyamine sulfate (hyoscyamine sulfate 0.125 mg tab rapdis, hyoscyamine sulfate 0.125 mg tab subl, hyoscyamine sulfate 0.125 mg tablet, hyoscyamine sulfate 0.125mg/ml drops, hyoscyamine sulfate 0.375 mg tab er 12h, hyoscyamine sulfate 125mcg/5ml elixir)</i>	Formulary High Cost Generics	
INCRUSE ELLIPTA	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ipratropium bromide 0.2 mg/ml solution</i>	Formulary High Cost Generics	
<i>ipratropium bromide/albuterol sulfate</i>	Formulary High Cost Generics	
<i>methscopolamine bromide</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> <div>Non-Preferred Drug</div> </div>
<i>scopolamine</i>	Formulary High Cost Generics	
ANTICOAGULANTS		
COUMARIN DERIVATIVES		
<i>warfarin sodium</i>	Formulary Low Cost Generics	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS (ELIQUIS 5 MG TABLET, ELIQUIS DVT-PE TREAT START 5MG)	Formulary Brands	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 74 TABS / 30 DAYS
ELIQUIS 2.5 MG TABLET	Formulary Brands	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 TABS / 1 DAY
XARELTO (XARELTO 10 MG TABLET, XARELTO 20 MG TABLET)	Formulary Brands	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 1 TAB / 1 DAY
XARELTO (XARELTO 2.5 MG TABLET, XARELTO 15 MG TABLET)	Formulary Brands	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 TABS / 1 DAY
XARELTO 1 MG/ML SUSPENSION	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #008000; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> </div> <div>20 ML / 1 DAY At least 18 yrs old</div> </div>
XARELTO DVT-PE TREAT START 30D	Formulary Brands	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 51 TABS / 30 DAYS
DIRECT THROMBIN INHIBITORS		
<i>dabigatran etexilate mesylate</i>	Formulary High Cost Generics	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 CAPS / 1 DAY
HEPARINS		
<i>enoxaparin sodium (enoxaparin sodium 300 mg/3ml vial, enoxaparin sodium 300mg/3ml vial)</i>	Formulary High Cost Generics	<div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> 2 VIALS / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>enoxaparin sodium (enoxaparin sodium 30mg/0.3ml syringe, enoxaparin sodium 40mg/0.4ml syringe, enoxaparin sodium 60mg/0.6ml syringe, enoxaparin sodium 80mg/0.8ml syringe, enoxaparin sodium 100 mg/ml syringe, enoxaparin sodium 120mg/.8ml syringe, enoxaparin sodium 150 mg/ml syringe)</i>	Formulary High Cost Generics	QL 2 SYRINGES / 1 DAY
<i>heparin sod,porcine/0.9 % nacl 100/ml kit</i>	Covered	
<i>heparin sodium,porcine (heparin sodium,porcine 10 unit/ml vial, heparin sodium,porcine 100/ml vial)</i>	Covered	
<i>heparin sodium,porcine (heparin sodium,porcine 1000/ml vial, heparin sodium,porcine 5000/ml syringe, heparin sodium,porcine 5000/ml vial, heparin sodium,porcine 5000/ml(1) cartridge, heparin sodium,porcine 10000/ml vial, heparin sodium,porcine 20000/ml vial)</i>	Formulary High Cost Generics	
<i>heparin sodium,porcine/pf (heparin sodium,porcine/pf 1 unit/ml syringe, heparin sodium,porcine/pf 10 unit/ml syringe, heparin sodium,porcine/pf 10 unit/ml vial, heparin sodium,porcine/pf 100/ml (1) syringe, heparin sodium,porcine/pf 100/ml (1) vial, heparin sodium,porcine/pf 200/2 ml syringe, heparin sodium,porcine/pf 300/3 ml syringe, heparin sodium,porcine/pf 500/5 ml syringe, heparin sodium,porcine/pf 1000/10 ml syringe)</i>	Covered	
<i>heparin sodium,porcine/pf (heparin sodium,porcine/pf 1000/ml vial, heparin sodium,porcine/pf 5000/0.5ml cartridge, heparin sodium,porcine/pf 5000/0.5ml vial, heparin sodium,porcine/pf 5000/ml syringe)</i>	Formulary High Cost Generics	
INDIRECT FACTOR XA INHIBITORS		
<i>fondaparinux sodium</i>	Formulary High Cost Generics	QL 1 SYRINGE / 1 DAY PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTICONVULSANTS		
ANTICONVULSANTS, MISCELLANEOUS		
BRIVIACT (BRIVIACT 10 MG TABLET, BRIVIACT 25 MG TABLET, BRIVIACT 50 MG TABLET, BRIVIACT 75 MG TABLET, BRIVIACT 100 MG TABLET)	Formulary Brands	<p>QL 2 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
BRIVIACT 10 MG/ML ORAL SOLN	Formulary Brands	<p>QL 10 ML / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>carbamazepine (carbamazepine 100 mg cpmp 12hr, carbamazepine 100 mg tab chew, carbamazepine 100 mg tab er 12h, carbamazepine 100 mg/5ml oral susp, carbamazepine 200 mg cpmp 12hr, carbamazepine 200 mg tab er 12h, carbamazepine 200 mg tablet, carbamazepine 300 mg cpmp 12hr, carbamazepine 400 mg tab er 12h)</i>	Formulary High Cost Generics	
EPITOL	Formulary High Cost Generics	
<i>felbamate (felbamate 400 mg tablet, felbamate 600 mg tablet, felbamate 600 mg/5ml oral susp)</i>	Formulary High Cost Generics	
FYCOMPA (FYCOMPA 4 MG TABLET, FYCOMPA 6 MG TABLET, FYCOMPA 8 MG TABLET, FYCOMPA 10 MG TABLET, FYCOMPA 12 MG TABLET)	Formulary Brands	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
FYCOMPA 0.5 MG/ML ORAL SUSP	Formulary Brands	<p>QL 8 ML / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
FYCOMPA 2 MG TABLET	Formulary Brands	<p>QL 2 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>lamotrigine (lamotrigine 5 mg tb chw dsp, lamotrigine 25 mg tablet, lamotrigine 25 mg tb chw dsp, lamotrigine 100 mg tablet, lamotrigine 150 mg tablet, lamotrigine 200 mg tablet)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levetiracetam (levetiracetam 100 mg/ml solution, levetiracetam 250 mg tablet, levetiracetam 500 mg tablet, levetiracetam 750 mg tablet, levetiracetam 1000 mg tablet)</i>	Formulary High Cost Generics	
<i>levetiracetam (levetiracetam 500 mg tab er 24h, levetiracetam 750 mg tab er 24h)</i>	Formulary Low Cost Generics	
SUBVENITE	Formulary High Cost Generics	
<i>topiramate (topiramate 15 mg cap sprink, topiramate 25 mg cap sprink)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>topiramate (topiramate 25 mg tablet, topiramate 50 mg tablet, topiramate 100 mg tablet, topiramate 200 mg tablet)</i>	Formulary Low Cost Generics	
BARBITURATES (ANTICONVULSANTS)		
<i>primidone</i>	Formulary High Cost Generics	
BENZODIAZEPINES (ANTICONVULSANTS)		
<i>clobazam 10 mg tablet</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>clobazam 2.5 mg/ml oral susp</i>	Formulary High Cost Generics	QL 16 ML / 1 DAY
<i>clobazam 20 mg tablet</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>clonazepam (clonazepam 0.125 mg tab rapdis, clonazepam 0.25 mg tab rapdis, clonazepam 0.5 mg tab rapdis)</i>	Formulary High Cost Generics	QL 6 TABS / 1 DAY NP Non-Preferred Drug
<i>clonazepam 0.5 mg tablet</i>	Formulary Low Cost Generics	QL 6 TABS / 1 DAY
<i>clonazepam 1 mg tab rapdis</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY NP Non-Preferred Drug
<i>clonazepam 1 mg tablet</i>	Formulary Low Cost Generics	QL 4 TABS / 1 DAY
<i>clonazepam 2 mg tab rapdis</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY NP Non-Preferred Drug
<i>clonazepam 2 mg tablet</i>	Formulary Low Cost Generics	QL 2 TABS / 1 DAY
GABA-MEDIATED ANTICONVULSANTS		
DIACOMIT 250 MG CAPSULE	Formulary Brands	QL 12 CAPS / 1 DAY PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DIACOMIT 250 MG POWDER PACKET	Formulary Brands	<p>QL 12 PACKETS / 1 DAY</p> <p>PA</p> <p>S Specialty Drug</p>
DIACOMIT 500 MG CAPSULE	Formulary Brands	<p>QL 6 CAPS / 1 DAY</p> <p>PA</p> <p>S Specialty Drug</p>
DIACOMIT 500 MG POWDER PACKET	Formulary Brands	<p>QL 6 PACKETS / 1 DAY</p> <p>PA</p> <p>S Specialty Drug</p>
<i>divalproex sodium (divalproex sodium 125 mg cap dr spr, divalproex sodium 125 mg tablet dr, divalproex sodium 250 mg tablet dr, divalproex sodium 500 mg tablet dr)</i>	Formulary High Cost Generics	
<i>divalproex sodium (divalproex sodium 250 mg tab er 24h, divalproex sodium 500 mg tab er 24h)</i>	Formulary Low Cost Generics	
<i>gabapentin (gabapentin 100 mg capsule, gabapentin 300 mg capsule)</i>	Formulary High Cost Generics	<p>QL 12 CAPS / 1 DAY</p>
<i>gabapentin (gabapentin 250 mg/5ml solution, gabapentin 300 mg/6ml solution)</i>	Formulary High Cost Generics	<p>QL 72 ML / 1 DAY</p>
<i>gabapentin 400 mg capsule</i>	Formulary High Cost Generics	<p>QL 9 CAPS / 1 DAY</p>
<i>gabapentin 600 mg tablet</i>	Formulary High Cost Generics	<p>QL 6 TABS / 1 DAY</p>
<i>gabapentin 800 mg tablet</i>	Formulary High Cost Generics	<p>QL 4 TABS / 1 DAY</p>
<i>pregabalin (pregabalin 225 mg capsule, pregabalin 300 mg capsule)</i>	Formulary High Cost Generics	<p>QL 2 CAPS / 1 DAY</p>
<i>pregabalin (pregabalin 25 mg capsule, pregabalin 50 mg capsule, pregabalin 75 mg capsule, pregabalin 100 mg capsule)</i>	Formulary High Cost Generics	<p>QL 6 CAPS / 1 DAY</p>
<i>pregabalin 150 mg capsule</i>	Formulary High Cost Generics	<p>QL 4 CAPS / 1 DAY</p>
<i>pregabalin 20 mg/ml solution</i>	Formulary High Cost Generics	<p>QL 30 ML / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>pregabalin 200 mg capsule</i>	Formulary High Cost Generics	QL 3 CAPS / 1 DAY
<i>tiagabine hcl</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>valproic acid</i>	Formulary High Cost Generics	
<i>valproic acid (as sodium salt) (valproate sodium)</i>	Formulary High Cost Generics	
<i>vigabatrin</i>	Formulary High Cost Generics	PA S Specialty Drug
VIGADRONE	Formulary High Cost Generics	PA S Specialty Drug
VIGPODER	Formulary High Cost Generics	PA S Specialty Drug
HYDANTOINS		
DILANTIN 30 MG CAPSULE	Formulary Brands	
<i>phenytoin (phenytoin 50 mg tab chew, phenytoin 100 mg/4ml oral susp, phenytoin 125 mg/5ml oral susp)</i>	Formulary High Cost Generics	
<i>phenytoin sodium extended</i>	Formulary High Cost Generics	
ION CHANNEL INHIBITION AGENTS		
APTIOM	Formulary Brands	PA NP Non-Preferred Drug
<i>lacosamide (lacosamide 150 mg tablet, lacosamide 200 mg tablet)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>lacosamide 10 mg/ml solution</i>	Formulary High Cost Generics	QL 40 ML / 1 DAY
<i>lacosamide 100 mg tablet</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>lacosamide 50 mg tablet</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY
<i>oxcarbazepine (oxcarbazepine 150 mg tablet, oxcarbazepine 300 mg tablet, oxcarbazepine 300 mg/5ml oral susp, oxcarbazepine 600 mg tablet)</i>	Formulary High Cost Generics	
<i>rufinamide 200 mg tablet</i>	Formulary High Cost Generics	QL 16 TABS / 1 DAY PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>rufinamide 40 mg/ml oral susp</i>	Formulary High Cost Generics	QL 80 ML / 1 DAY PA NP Non-Preferred Drug
<i>rufinamide 400 mg tablet</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY PA NP Non-Preferred Drug
<i>zonisamide</i>	Formulary Low Cost Generics	
SUCCINIMIDES		
<i>ethosuximide (ethosuximide 250 mg capsule, ethosuximide 250 mg/5ml solution)</i>	Formulary High Cost Generics	
<i>methsuximide</i>	Formulary High Cost Generics	PA
ANTIDEPRESSANTS		
ANTIDEPRESSANTS, MISCELLANEOUS		
<i>bupropion hcl (bupropion hcl 75 mg tablet, bupropion hcl 100 mg tab sr 12h, bupropion hcl 100 mg tablet, bupropion hcl 150 mg tab er 12h, bupropion hcl 150 mg tab er 24h, bupropion hcl 150 mg tab sr 12h, bupropion hcl 200 mg tab sr 12h, bupropion hcl 300 mg tab er 24h)</i>	Formulary High Cost Generics	
MONOAMINE OXIDASE INHIBITORS		
<i>phenelzine sulfate</i>	Formulary High Cost Generics	
<i>tranylcypromine sulfate</i>	Formulary High Cost Generics	
SEL.SEROTONIN,NOREPI REUPTAKE INHIBITOR		
<i>desvenlafaxine suc er 100 mg tablet (generic for Pristiq)</i>	Formulary Low Cost Generics	
<i>desvenlafaxine suc er 25 mg tablet (generic for Pristiq)</i>	Formulary Low Cost Generics	
<i>desvenlafaxine suc er 50 mg tablet (generic for Pristiq)</i>	Formulary Low Cost Generics	
<i>duloxetine hcl (duloxetine hcl 20 mg capsule dr, duloxetine hcl 30 mg capsule dr, duloxetine hcl 60 mg capsule dr)</i>	Formulary High Cost Generics	
FETZIMA	Formulary Brands	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>venlafaxine hcl (venlafaxine hcl 25 mg tablet, venlafaxine hcl 37.5 mg cap er 24h, venlafaxine hcl 37.5 mg tablet, venlafaxine hcl 50 mg tablet, venlafaxine hcl 75 mg cap er 24h, venlafaxine hcl 75 mg tablet, venlafaxine hcl 100 mg tablet, venlafaxine hcl 150 mg cap er 24h)</i>	Formulary High Cost Generics	
SELECTIVE-SEROTONIN REUPTAKE INHIBITORS		
<i>citalopram hydrobromide (citalopram hydrobromide 10 mg tablet, citalopram hydrobromide 20 mg tablet, citalopram hydrobromide 40 mg tablet)</i>	Formulary Low Cost Generics	
<i>citalopram hydrobromide (citalopram hydrobromide 10 mg/5 ml solution, citalopram hydrobromide 20 mg/10ml solution)</i>	Formulary High Cost Generics	
<i>escitalopram oxalate (escitalopram oxalate 5 mg tablet, escitalopram oxalate 10 mg tablet, escitalopram oxalate 20 mg tablet)</i>	Formulary Low Cost Generics	
<i>escitalopram oxalate 5 mg/5 ml solution</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>fluoxetine hcl (fluoxetine hcl 10 mg capsule, fluoxetine hcl 20 mg capsule, fluoxetine hcl 40 mg capsule)</i>	Formulary Low Cost Generics	
<i>fluoxetine hcl 20 mg/5 ml solution</i>	Formulary High Cost Generics	
<i>fluvoxamine maleate (fluvoxamine maleate 25 mg tablet, fluvoxamine maleate 50 mg tablet, fluvoxamine maleate 100 mg tablet)</i>	Formulary High Cost Generics	
<i>olanzapine/fluoxetine hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>paroxetine hcl (paroxetine hcl 10 mg tablet, paroxetine hcl 20 mg tablet, paroxetine hcl 30 mg tablet, paroxetine hcl 40 mg tablet)</i>	Formulary Low Cost Generics	
<i>paroxetine hcl 10 mg/5 ml oral susp</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>sertraline hcl (sertraline hcl 25 mg tablet, sertraline hcl 50 mg tablet, sertraline hcl 100 mg tablet)</i>	Formulary Low Cost Generics	
<i>sertraline hcl 20 mg/ml oral conc</i>	Formulary High Cost Generics	NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SEROTONIN MODULATORS		
<i>mirtazapine (mirtazapine 7.5 mg tablet, mirtazapine 15 mg tablet, mirtazapine 30 mg tablet, mirtazapine 45 mg tablet)</i>	Formulary High Cost Generics	
<i>nefazodone hcl</i>	Formulary High Cost Generics	
<i>trazodone hcl</i>	Formulary Low Cost Generics	
TRINTELLIX	Formulary Brands	PA NP Non-Preferred Drug
VIIBRYD 10-20 MG STARTER PACK	Formulary Brands	PA
<i>vilazodone hcl</i>	Formulary High Cost Generics	
TRICYCLICS, OTHER NOREPI-RU INHIBITORS		
<i>amitriptyline hcl</i>	Formulary High Cost Generics	
<i>amitriptyline hcl/chlordiazepoxide</i>	Formulary High Cost Generics	PA
<i>amoxapine</i>	Formulary High Cost Generics	
<i>clomipramine hcl</i>	Formulary High Cost Generics	
<i>desipramine hcl</i>	Formulary High Cost Generics	
<i>doxepin hcl (doxepin hcl 10 mg capsule, doxepin hcl 10 mg/ml oral conc, doxepin hcl 25 mg capsule, doxepin hcl 50 mg capsule, doxepin hcl 75 mg capsule, doxepin hcl 100 mg capsule, doxepin hcl 150 mg capsule)</i>	Formulary High Cost Generics	
<i>doxepin hcl (doxepin hcl 3 mg tablet, doxepin hcl 6 mg tablet)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>imipramine hcl</i>	Formulary High Cost Generics	
<i>nortriptyline hcl (nortriptyline hcl 10 mg capsule, nortriptyline hcl 10 mg/5 ml solution, nortriptyline hcl 25 mg capsule, nortriptyline hcl 50 mg capsule, nortriptyline hcl 75 mg capsule)</i>	Formulary High Cost Generics	
<i>perphenazine/amitriptyline hcl</i>	Formulary High Cost Generics	PA AL1 At least 7 yrs old
<i>protriptyline hcl</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>trimipramine maleate</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIDIABETIC AGENTS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose</i>	Formulary Low Cost Generics	
<i>miglitol</i>	Formulary High Cost Generics	
BIGUANIDES		
<i>metformin hcl (metformin hcl 500 mg tab er 24h, metformin hcl 750 mg tab er 24h, metformin hcl 850 mg tablet)</i>	Formulary Low Cost Generics	
<i>metformin hcl 1,000 mg tablet (generic for glucophage)</i>	Formulary Low Cost Generics	
<i>metformin hcl 500 mg tablet (generic for glucophage)</i>	Formulary Low Cost Generics	
DIPEPTIDYL PEPTIDASE-4(DPP-4) INHIBITORS		
JENTADUETO	Formulary Brands	QL 2 TABS / 1 DAY
JENTADUETO XR	Formulary Brands	QL 2 TABS / 1 DAY
TRADJENTA	Formulary Brands	QL 1 TAB / 1 DAY
INCRETIN MIMETICS		
MOUNJARO	Formulary Brands	QL 4 PENS (2 ML) / 28 DAYS PA
OZEMPIC	Formulary Brands	QL 1 PEN (3 ML) / 28 DAYS PA
RYBELSUS	Formulary Brands	QL 1 TAB / 1 DAY PA
SAXENDA	Formulary Brands	QL 5 PENS (15 ML) / 30 DAYS PA WL Weight Loss
TRULICITY	Formulary Brands	QL 4 PENS (2 ML) / 28 DAYS PA
VICTOZA 2-PAK	Formulary Brands	QL 3 PENS (9 ML) / 30 DAYS PA

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VICTOZA 3-PAK	Formulary Brands	<p>QL 3 PENS (9 ML) / 30 DAYS</p> <p>PA</p>
WEGOVY (WEGOVY 0.25 MG/0.5 ML PEN, WEGOVY 0.5 MG/0.5 ML PEN, WEGOVY 1 MG/0.5 ML PEN)	Formulary Brands	<p>QL 4 PENS (2 ML) / 28 DAYS</p> <p>PA</p> <p>WL Weight Loss</p>
WEGOVY (WEGOVY 1.7 MG/0.75 ML PEN, WEGOVY 2.4 MG/0.75 ML PEN)	Formulary Brands	<p>QL 4 PENS (3 ML) / 28 DAYS</p> <p>PA</p> <p>WL Weight Loss</p>
ZEPBOUND (ZEPBOUND 2.5 MG/0.5 ML PEN, ZEPBOUND 5 MG/0.5 ML PEN, ZEPBOUND 7.5 MG/0.5 ML PEN, ZEPBOUND 10 MG/0.5 ML PEN, ZEPBOUND 12.5 MG/0.5 ML PEN, ZEPBOUND 15 MG/0.5 ML PEN)	Formulary Brands	<p>QL 4 PENS (2 ML) / 28 DAYS</p> <p>PA</p> <p>WL Weight Loss</p>
MEGLITINIDES		
<i>nateglinide</i>	Formulary High Cost Generics	
<i>repaglinide</i>	Formulary High Cost Generics	
SODIUM-GLUC COTRANSPORT 2 (SGLT2) INHIB		
GLYXAMBI	Formulary Brands	<p>QL 1 TAB / 1 DAY</p>
JARDIANCE	Formulary Brands	<p>QL 1 TAB / 1 DAY</p>
SYNJARDY	Formulary Brands	<p>QL 2 TABS / 1 DAY</p>
SYNJARDY XR (SYNJARDY XR 10-1,000 MG TABLET, SYNJARDY XR 25-1,000 MG TABLET)	Formulary Brands	<p>QL 1 TAB / 1 DAY</p>
SYNJARDY XR (SYNJARDY XR 5-1,000 MG TABLET, SYNJARDY XR 12.5-1,000 MG TAB)	Formulary Brands	<p>QL 2 TABS / 1 DAY</p>
TRIJARDY XR (TRIJARDY XR 10-5-1,000 MG TAB, TRIJARDY XR 25-5-1,000 MG TAB)	Formulary Brands	<p>QL 1 TAB / 1 DAY</p>
TRIJARDY XR (TRIJARDY XR 5-2.5-1,000 MG TAB, TRIJARDY XR 12.5-2.5-1,000 MG)	Formulary Brands	<p>QL 2 TABS / 1 DAY</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SULFONYLUREAS		
<i>glimepiride (glimepiride 1 mg tablet, glimepiride 2 mg tablet, glimepiride 4 mg tablet)</i>	Formulary Low Cost Generics	
<i>glipizide (glipizide 2.5 mg tab er 24, glipizide 2.5 mg tablet, glipizide 5 mg tab er 24, glipizide 5 mg tablet, glipizide 10 mg tab er 24, glipizide 10 mg tablet)</i>	Formulary Low Cost Generics	
<i>glipizide/metformin hcl</i>	Formulary Low Cost Generics	
<i>glyburide</i>	Formulary High Cost Generics	
<i>glyburide,micronized</i>	Formulary High Cost Generics	
<i>glyburide/metformin hcl</i>	Formulary High Cost Generics	
THIAZOLIDINEDIONES		
<i>pioglitazone hcl</i>	Formulary Low Cost Generics	
<i>pioglitazone hcl/glimepiride</i>	Formulary High Cost Generics	
<i>pioglitazone hcl/metformin hcl</i>	Formulary High Cost Generics	
ANTIDOTE THERAPEUTICS		
ALCOHOL DETERRENTS (91:02)		
<i>acamprosate calcium</i>	Formulary High Cost Generics	
<i>disulfiram</i>	Formulary High Cost Generics	
ANTIDOTES (91:04)		
ACETAMINOPHEN ANTIDOTE		
<i>acetylcysteine (acetylcysteine 100 mg/ml vial, acetylcysteine 200 mg/ml vial)</i>	Formulary High Cost Generics	
CHEMOTHERAPY ANTIDOTES/PROTECTANTS		
ELMIRON	Formulary Brands	NP Non-Preferred Drug
<i>leucovorin calcium (leucovorin calcium 5 mg tablet, leucovorin calcium 10 mg tablet, leucovorin calcium 15 mg tablet, leucovorin calcium 25 mg tablet)</i>	Formulary High Cost Generics	OH OncoHealth
MESNEX 400 MG TABLET	Formulary Brands	OH OncoHealth

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLUOROPYRIMIDINE ANTIDOTE		
VISTOGARD	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ANZEMET	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">NP</div> <div>Non-Preferred Drug</div> </div>
<i>granisetron hcl 1 mg tablet</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">NP</div> <div style="margin-right: 10px;">OH</div> <div>Non-Preferred Drug OncoHealth</div> </div>
<i>ondansetron (ondansetron 4 mg tab rapdis, ondansetron 8 mg tab rapdis)</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">OH</div> <div>OncoHealth</div> </div>
<i>ondansetron hcl (ondansetron hcl 4 mg tablet, ondansetron hcl 8 mg tablet)</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">OH</div> <div>OncoHealth</div> </div>
<i>ondansetron hcl 4 mg/5 ml solution</i>	Formulary Low Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">OH</div> <div>OncoHealth</div> </div>
ANTIHISTAMINES (GI DRUGS)		
<i>meclizine hcl 25 mg tablet</i>	Formulary High Cost Generics	
<i>trimethobenzamide hcl</i>	Formulary High Cost Generics	
NEUROKININ-1 RECEPTOR ANTAGONISTS		
<i>aprepitant</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">OH</div> <div>OncoHealth</div> </div>
EMEND 125 MG POWDER PACKET	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">NP</div> <div style="margin-right: 10px;">OH</div> <div>Non-Preferred Drug OncoHealth</div> </div>
ANTIFUNGAL (SYSTEMIC)		
ALLYLAMINE ANTIFUNGALS		
<i>terbinafine hcl 250 mg tablet</i>	Formulary Low Cost Generics	
ANTIFUNGALS, MISCELLANEOUS		
<i>griseofulvin ultramicrosize</i>	Formulary High Cost Generics	
<i>griseofulvin, microsize (griseofulvin, microsize 125 mg/5ml oral susp, griseofulvin, microsize 500 mg tablet)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AZOLE ANTIFUNGALS		
CRESEMBA (CRESEMBA 74.5 MG CAPSULE, CRESEMBA 186 MG CAPSULE)	Formulary Brands	PA NP Non-Preferred Drug
<i>fluconazole (fluconazole 10 mg/ml susp recon, fluconazole 40 mg/ml susp recon)</i>	Formulary High Cost Generics	
<i>fluconazole (fluconazole 50 mg tablet, fluconazole 100 mg tablet, fluconazole 150 mg tablet, fluconazole 200 mg tablet)</i>	Formulary Low Cost Generics	
<i>itraconazole 100 mg capsule</i>	Formulary High Cost Generics	
<i>ketoconazole 2 % cream (g)</i>	Formulary Low Cost Generics	QL 60 GM / 30 DAYS
<i>ketoconazole 2 % shampoo</i>	Formulary High Cost Generics	
<i>ketoconazole 200 mg tablet</i>	Formulary Low Cost Generics	
NOXAFIL 300 MG POWDERMIX SUSP	Formulary Brands	PA
<i>posaconazole (posaconazole 100 mg tablet dr, posaconazole 200 mg/5ml oral susp)</i>	Formulary High Cost Generics	PA
<i>voriconazole (voriconazole 50 mg tablet, voriconazole 200 mg tablet, voriconazole 200 mg/5ml susp recon)</i>	Formulary High Cost Generics	PA
POLYENE ANTIFUNGALS		
<i>nystatin 100000/ml oral susp</i>	Formulary High Cost Generics	QL 480 ML / RX
<i>nystatin 500k unit tablet</i>	Formulary Low Cost Generics	
PYRIMIDINE ANTIFUNGALS		
<i>flucytosine</i>	Formulary High Cost Generics	PA
ANTIFUNGALS (SKIN AND MUCOUS MEMBRANE)		
ALLYLAMINES (SKIN AND MUCOUS MEMBRANE)		
<i>naftifine hcl (naftifine hcl 1 % cream (g), naftifine hcl 2 % gel (gram))</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>naftifine hcl 2 % cream (g)</i>	Formulary High Cost Generics	QL 60 GM / 30 DAYS PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AZOLES (SKIN AND MUCOUS MEMBRANE)		
<i>clotrimazole 10 mg troche</i>	Formulary High Cost Generics	
<i>clotrimazole/betamethasone dip 1 %-0.05 % cream (g)</i>	Formulary High Cost Generics	
<i>econazole nitrate</i>	Formulary High Cost Generics	QL 85 GM / 30 DAYS
ERTACZO	Formulary Brands	PA NP Non-Preferred Drug
<i>luliconazole</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>oxiconazole nitrate</i>	Formulary High Cost Generics	QL 60 GM / 30 DAYS PA NP Non-Preferred Drug
<i>sulconazole nitrate (sulconazole nitrate 1 % cream (g), sulconazole nitrate 1 % solution)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>terconazole (terconazole 0.4 % cream/appl, terconazole 0.8 % cream/appl, terconazole 80 mg supp.vag)</i>	Formulary High Cost Generics	
BENZYLAMINES (SKIN AND MUCOUS MEMBRANE)		
MENTAX	Formulary Brands	PA NP Non-Preferred Drug
HYDROXYPYRIDONES (SKIN, MUCOUS MEMBRANE)		
<i>ciclopirox (ciclopirox 0.77 % gel (gram), ciclopirox 1 % shampoo, ciclopirox 8 % solution)</i>	Formulary High Cost Generics	
<i>ciclopirox olamine 0.77 % cream (g)</i>	Formulary High Cost Generics	
<i>ciclopirox olamine 0.77 % suspension</i>	Formulary High Cost Generics	QL 60 ML / 30 DAYS
POLYENES (SKIN AND MUCOUS MEMBRANE)		
KLAYESTA	Formulary High Cost Generics	QL 240 GM / RX
NYAMYC	Formulary High Cost Generics	QL 240 GM / RX
<i>nystatin (nystatin 100000/g cream (g), nystatin 100000/g oint. (g))</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>nystatin 100000/g powder</i>	Formulary High Cost Generics	QL 240 GM / RX
<i>nystatin/triamcinolone acetonide</i>	Formulary High Cost Generics	
NYSTOP	Formulary High Cost Generics	QL 240 GM / RX
ANTIGLAUCOMA AGENTS		
ALPHA-ADRENERGIC AGONISTS (EENT)		
<i>apraclonidine hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>brimonidine tartrate (brimonidine tartrate 0.1 % drops, brimonidine tartrate 0.15 % drops, brimonidine tartrate 0.2 % drops)</i>	Formulary High Cost Generics	
BETA-ADRENERGIC BLOCKING AGENTS (EENT)		
<i>carteolol hcl</i>	Formulary Low Cost Generics	
<i>levobunolol hcl</i>	Formulary Low Cost Generics	
<i>timolol maleate (timolol maleate 0.25 % sol-gel, timolol maleate 0.5 % sol-gel)</i>	Formulary High Cost Generics	
<i>timolol maleate 0.25% eye drop (generic for timoptic)</i>	Formulary Low Cost Generics	
<i>timolol maleate 0.5% eye drops (generic for timoptic)</i>	Formulary Low Cost Generics	
CARBONIC ANHYDRASE INHIBITORS (EENT)		
<i>acetazolamide (acetazolamide 125 mg tablet, acetazolamide 250 mg tablet)</i>	Formulary Low Cost Generics	
<i>acetazolamide 500 mg capsule er</i>	Formulary High Cost Generics	
<i>brinzolamide</i>	Formulary High Cost Generics	
<i>dorzolamide hcl</i>	Formulary High Cost Generics	
<i>dorzolamide hcl/timolol maleate</i>	Formulary High Cost Generics	
<i>dorzolamide/timolol/pf 2 %-0.5 % droperette</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>methazolamide</i>	Formulary High Cost Generics	
SIMBRINZA	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MIOTICS		
PHOSPHOLINE IODIDE	Formulary Brands	
<i>pilocarpine hcl (pilocarpine hcl 1 % drops, pilocarpine hcl 2 % drops, pilocarpine hcl 4 % drops)</i>	Formulary High Cost Generics	
PROSTAGLANDIN ANALOGS		
<i>bimatoprost 0.03 % drops</i>	Formulary High Cost Generics	
<i>latanoprost</i>	Formulary High Cost Generics	
LUMIGAN	Formulary Brands	
<i>tafluprost/pf</i>	Formulary High Cost Generics	PA
<i>travoprost</i>	Formulary High Cost Generics	
RHO KINASE INHIBITORS		
RHOPRESSA	Formulary Brands	
ROCKLATAN	Formulary Brands	
ANTIHEMORRHAGIC AGENTS		
HEMOSTATICS		
ADVATE	Formulary Brands	PA S Specialty Drug
ADYNOVATE	Formulary Brands	PA S Specialty Drug
AFSTYLA	Formulary Brands	PA S Specialty Drug
ALPHANATE	Formulary Brands	PA S Specialty Drug
ALPHANINE SD	Formulary Brands	PA S Specialty Drug
ALPROLIX	Formulary Brands	PA S Specialty Drug
ALTUVIIIO	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BENEFIX	Formulary Brands	PA S Specialty Drug
COAGADEX	Formulary Brands	PA S Specialty Drug
CORIFACT	Formulary Brands	PA S Specialty Drug
ELOCTATE	Formulary Brands	PA S Specialty Drug
ESPEROCT	Formulary Brands	PA S Specialty Drug
FEIBA	Formulary Brands	PA S Specialty Drug
HEMLIBRA	Formulary Brands	PA S Specialty Drug
HEMOFIL M	Formulary Brands	PA S Specialty Drug
HUMATE-P	Formulary Brands	PA S Specialty Drug
IDELVION	Formulary Brands	PA S Specialty Drug
IXINITY	Formulary Brands	PA S Specialty Drug
JIVI	Formulary Brands	PA S Specialty Drug
KOATE	Formulary Brands	PA S Specialty Drug
KOGENATE FS	Formulary Brands	PA S Specialty Drug
KOVALTRY	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONONINE	Formulary Brands	PA S Specialty Drug
NOVOEIGHT	Formulary Brands	PA S Specialty Drug
NOVOSEVEN RT	Formulary Brands	PA S Specialty Drug
NUWIQ	Formulary Brands	PA S Specialty Drug
OBIZUR	Formulary Brands	PA S Specialty Drug
PROFILNINE	Formulary Brands	PA S Specialty Drug
REBINYN	Formulary Brands	PA S Specialty Drug
RECOMBINATE	Formulary Brands	PA S Specialty Drug
RIASTAP	Formulary Brands	PA S Specialty Drug
RIXUBIS	Formulary Brands	PA S Specialty Drug
SEVENFACT	Formulary Brands	PA S Specialty Drug
<i>tranexamic acid 650 mg tablet</i>	Formulary High Cost Generics	QL 30 TABS / RX
TRETTEN	Formulary Brands	PA S Specialty Drug
VONVENDI	Formulary Brands	PA S Specialty Drug
WILATE	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XYNTHA	Formulary Brands	PA S Specialty Drug
XYNTHA SOLOFUSE	Formulary Brands	PA S Specialty Drug
ANTIHISTAMINE DRUGS		
FIRST GENERATION ANTIHISTAMINES		
<i>carbinoxamine maleate 4 mg tablet</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
SECOND GENERATION ANTIHISTAMINES		
<i>desloratadine 5 mg tablet</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>levocetirizine 5 mg tablet (rx only)</i>	Formulary High Cost Generics	
<i>levocetirizine dihydrochloride 5 mg tablet</i>	Formulary High Cost Generics	
ANTIHYPOGLYCEMIC AGENTS		
GLYCOGENOLYTIC AGENTS		
BAQSIMI	Formulary Brands	QL 4 VIALS / RX
<i>glucagon 1 mg emergency kit</i>	Formulary High Cost Generics	QL 4 VIALS / RX
<i>glucagon 1 mg emergency kit (generic glucagen)</i>	Formulary High Cost Generics	QL 4 VIALS / RX
<i>glucagon hcl 1 mg vial</i>	Formulary High Cost Generics	QL 4 VIALS / RX
GVOKE	Formulary Brands	QL 0.8 ML / RX
GVOKE HYPOPEN 1-PK 1 MG/0.2 ML	Formulary Brands	QL 0.8 ML / RX
GVOKE HYPOPEN 1PK 0.5MG/0.1 ML	Formulary Brands	QL 0.4 ML / RX
GVOKE HYPOPEN 2-PK 1 MG/0.2 ML	Formulary Brands	QL 0.8 ML / RX
GVOKE HYPOPEN 2PK 0.5MG/0.1 ML	Formulary Brands	QL 0.4 ML / RX
GVOKE PFS 1-PK 1 MG/0.2 ML SYR	Formulary Brands	QL 0.8 ML / RX
GVOKE PFS 1PK 0.5MG/0.1 ML SYR	Formulary Brands	QL 0.4 ML / RX
GVOKE PFS 2-PK 1 MG/0.2 ML SYR	Formulary Brands	QL 0.8 ML / RX

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
GVOKE PFS 2PK 0.5MG/0.1 ML SYR	Formulary Brands	QL 0.4 ML / RX
ZEGALOGUE AUTOINJECTOR	Formulary Brands	QL 2.4 ML / RX
ZEGALOGUE SYRINGE	Formulary Brands	QL 2.4 ML / RX
ANTILIPEMIC AGENTS		
BILE ACID SEQUESTRANTS		
<i>cholestyramine (with sugar)</i> <i>(cholestyramine (with sugar) 4 g powd pack, cholestyramine (with sugar) 4 g powder)</i>	Formulary High Cost Generics	
<i>cholestyramine/aspartame</i> <i>(cholestyramine/aspartame 4 g powd pack, cholestyramine/aspartame 4 g powder)</i>	Formulary High Cost Generics	
<i>colesevelam hcl 625 mg tablet</i>	Formulary High Cost Generics	
<i>colestipol hcl 1 g tablet</i>	Formulary High Cost Generics	
PREVALITE (PREVALITE PACKET, PREVALITE POWDER)	Formulary High Cost Generics	
CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe</i>	Formulary Low Cost Generics	
<i>ezetimibe/simvastatin</i>	Formulary High Cost Generics	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate (fenofibrate 54 mg tablet, fenofibrate 160 mg tablet)</i>	Formulary High Cost Generics	
<i>fenofibrate nanocrystallized</i>	Formulary Low Cost Generics	
<i>fenofibrate, micronized</i> <i>(fenofibrate, micronized 67 mg capsule, fenofibrate, micronized 134 mg capsule, fenofibrate, micronized 200 mg capsule)</i>	Formulary Low Cost Generics	
<i>fenofibric acid (choline)</i>	Formulary High Cost Generics	
<i>gemfibrozil</i>	Formulary Low Cost Generics	
HMG-COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium (atorvastatin calcium 10 mg tablet, atorvastatin calcium 20 mg tablet, atorvastatin calcium 40 mg tablet, atorvastatin calcium 80 mg tablet)</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>fluvastatin sodium (fluvastatin sodium 20 mg capsule, fluvastatin sodium 40 mg capsule, fluvastatin sodium 80 mg tab er 24h)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>lovastatin (lovastatin 10 mg tablet, lovastatin 20 mg tablet, lovastatin 40 mg tablet)</i>	Formulary Low Cost Generics	ACA - PA Affordable Care Act with PA
<i>pravastatin sodium</i>	Formulary Low Cost Generics	ACA - PA Affordable Care Act with PA
<i>rosuvastatin calcium (rosuvastatin calcium 5 mg tablet, rosuvastatin calcium 10 mg tablet, rosuvastatin calcium 20 mg tablet, rosuvastatin calcium 40 mg tablet)</i>	Formulary Low Cost Generics	ACA - PA Affordable Care Act with PA
<i>simvastatin (simvastatin 5 mg tablet, simvastatin 10 mg tablet, simvastatin 20 mg tablet, simvastatin 40 mg tablet, simvastatin 80 mg tablet)</i>	Formulary Low Cost Generics	
MTP PROTEIN INHIBITORS		
JUXTAPID	Formulary Brands	PA S Specialty Drug
OMEGA-3-MEDIATED ANTILIPEMICS		
<i>icosapent ethyl</i>	Formulary High Cost Generics	PA
<i>omega-3 acid ethyl esters</i>	Formulary Low Cost Generics	
PCSK9 INHIBITORS		
REPATHA PUSHTRONEX	Formulary Brands	QL 1 PEN / 28 DAYS
REPATHA SURECLICK	Formulary Brands	QL 2 PENS / 28 DAYS
REPATHA SYRINGE	Formulary Brands	QL 2 PENS / 28 DAYS
ANTIMETABOLITES, IMMUNOSUPPRESS THERAPY		
ANTIMETABOLITES, IMMUNOSUPP THERAPY MISC		
<i>azathioprine 50 mg tablet</i>	Formulary High Cost Generics	
<i>mycophenolate mofetil (mycophenolate mofetil 200 mg/ml susp recon, mycophenolate mofetil 250 mg capsule, mycophenolate mofetil 500 mg tablet)</i>	Formulary High Cost Generics	
<i>mycophenolate sodium</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIMIGRAINE AGENTS		
CALCITONIN GENE-RELATED PEPTIDE ANTAG.		
AJOVY AUTOINJECTOR	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 1.5 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
AJOVY SYRINGE	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 4.5 ML / 84 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
EMGALITY 120 MG/ML SYRINGE	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 1 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
EMGALITY PEN	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 1 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
EMGALITY SYRINGE (EMGALITY 100 MG/ML SYR(1 OF 3), EMGALITY 300 MG (100 MG X3SYR))	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 3 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
NURTEC ODT	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 8 TABS / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
SELECTIVE SEROTONIN AGONISTS		
<i>eletriptan hydrobromide</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 12 TABS / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>naratriptan hcl</i>	Formulary Low Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 12 TABS / 30 DAYS </div>
REYVOW	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 8 TABS / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>rizatriptan benzoate</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 12 TABS / 28 DAYS </div>
<i>sumatriptan</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 12 SPRAYS / 30 DAYS </div>
<i>sumatriptan succinate (sumatriptan succinate 25 mg tablet, sumatriptan succinate 50 mg tablet, sumatriptan succinate 100 mg tablet)</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 12 TABS / 28 DAYS </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>sumatriptan succinate (sumatriptan succinate 4 mg/0.5ml cartridge, sumatriptan succinate 4 mg/0.5ml pen injctr, sumatriptan succinate 6 mg/0.5ml cartridge, sumatriptan succinate 6 mg/0.5ml pen injctr, sumatriptan succinate 6 mg/0.5ml syringe, sumatriptan succinate 6 mg/0.5ml vial)</i>	Formulary High Cost Generics	QL 5 ML / 30 DAYS
<i>sumatriptan succinate/naproxen sodium</i>	Formulary High Cost Generics	QL 18 TABS / 28 DAYS PA NP Non-Preferred Drug
<i>zolmitriptan (zolmitriptan 2.5 mg tab rapdis, zolmitriptan 2.5 mg tablet, zolmitriptan 5 mg tab rapdis, zolmitriptan 5 mg tablet)</i>	Formulary High Cost Generics	QL 12 TABS / 28 DAYS
ZOMIG (ZOMIG 2.5 MG TABLET, ZOMIG 5 MG TABLET)	Formulary High Cost Generics	QL 12 TABS / 28 DAYS
ANTIMYCOBACTERIALS		
ANTILEPROSY AGENTS		
<i>dapsone (dapsone 25 mg tablet, dapsone 100 mg tablet)</i>	Formulary High Cost Generics	
ANTITUBERCULOSIS AGENTS		
<i>cycloserine</i>	Formulary High Cost Generics	PA
<i>ethambutol hcl</i>	Formulary Low Cost Generics	
<i>isoniazid (isoniazid 100 mg tablet, isoniazid 300 mg tablet)</i>	Formulary Low Cost Generics	
<i>isoniazid 50 mg/5 ml solution</i>	Formulary High Cost Generics	
<i>pretomanid</i>	Formulary Brands	PA NP Non-Preferred Drug
PRIFTIN	Formulary Brands	
<i>pyrazinamide</i>	Formulary High Cost Generics	
<i>rifabutin</i>	Formulary High Cost Generics	
<i>rifampin (rifampin 150 mg capsule, rifampin 300 mg capsule)</i>	Formulary Low Cost Generics	
SIRTURO	Formulary Brands	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRECATOR	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> Non-Preferred Drug
ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">TD</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Oncology Trial Drug OncoHealth Specialty Drug
AKEEGA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">TD</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Oncology Trial Drug OncoHealth Specialty Drug
<i>anastrozole</i>	Formulary Low Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #FFD700; color: black; padding: 2px 5px; border-radius: 3px;">ACA - PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> </div> Affordable Care Act with PA OncoHealth
BALVERSA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">TD</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Oncology Trial Drug OncoHealth Specialty Drug
BESREMI	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
<i>bexarotene 75 mg capsule</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">ONC</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">TD</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Oncology Trial Drug OncoHealth Specialty Drug
<i>bicalutamide</i>	Formulary Low Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> </div> OncoHealth

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>capecitabine</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
CAPRELSA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
COMETRIQ 100 MG DAILY-DOSE PK	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #800080; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">TD Trial Drug</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
COMETRIQ 140 MG DAILY-DOSE PK	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #800080; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">TD Trial Drug</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
COMETRIQ 60 MG DAILY-DOSE PACK	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #800080; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">TD Trial Drug</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
COTELLIC	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="display: flex; align-items: center;">ONC Oncology</div> <div style="display: flex; align-items: center;">OH OncoHealth</div> <div style="display: flex; align-items: center;">S Specialty Drug</div> </div>
<i>cyclophosphamide (cyclophosphamide 25 mg capsule, cyclophosphamide 25 mg tablet, cyclophosphamide 50 mg capsule, cyclophosphamide 50 mg tablet)</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;">OH OncoHealth</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CYCLOPHOSPHAMIDE 25 MG CAPSULE (BRAND)	Formulary High Cost Generics	OH OncoHealth
CYCLOPHOSPHAMIDE 50 MG CAPSULE (BRAND)	Formulary High Cost Generics	OH OncoHealth
<i>dasatinib</i>	Formulary High Cost Generics	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>diclofenac sodium 3 % gel (gram)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
EMCYT	Formulary Brands	
ERIVEDGE	Formulary Brands	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ERLEADA	Formulary Brands	PA ONC Oncology OH OncoHealth S Specialty Drug
<i>erlotinib hcl</i>	Formulary High Cost Generics	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>etoposide 50 mg capsule</i>	Formulary High Cost Generics	OH OncoHealth
<i>everolimus (everolimus 2 mg tab susp, everolimus 5 mg tab susp)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>everolimus (everolimus 2.5 mg tablet, everolimus 5 mg tablet, everolimus 7.5 mg tablet, everolimus 10 mg tablet)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>everolimus 3 mg tab susp</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 3 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>exemestane</i>	Formulary Low Cost Generics	<ul style="list-style-type: none"> ACA - PA Affordable Care Act with PA OH OncoHealth
<i>flutamide</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> OH OncoHealth
<i>gefitinib</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
GILOTRIF	Formulary Brands	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY PA ONC Oncology OH OncoHealth S Specialty Drug
GLEOSTINE	Formulary Brands	<ul style="list-style-type: none"> ONC Oncology OH OncoHealth S Specialty Drug
HYCAMTIN (HYCAMTIN 0.25 MG CAPSULE, HYCAMTIN 1 MG CAPSULE)	Formulary Brands	<ul style="list-style-type: none"> ONC Oncology OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>hydroxyurea</i>	Formulary High Cost Generics	OH OncoHealth
IBRANCE	Formulary Brands	QL 21 CAPS / 28 DAYS
		PA
		ONC Oncology
		OH OncoHealth
IDHIFA	Formulary Brands	S Specialty Drug
		QL 1 TAB / 1 DAY
		PA
		ONC Oncology
<i>imatinib mesylate</i>	Formulary High Cost Generics	OH OncoHealth
		TD Trial Drug
		ONC Oncology
		S Specialty Drug
IMBRUVICA (IMBRUVICA 420 MG TABLET, IMBRUVICA 560 MG TABLET)	Formulary Brands	QL 1 TAB / 1 DAY
		PA
		ONC Oncology
		OH OncoHealth
IMBRUVICA 140 MG CAPSULE	Formulary Brands	S Specialty Drug
		QL 3 CAPS / 1 DAY
		PA
		ONC Oncology
IMBRUVICA 70 MG/ML SUSPENSION	Formulary Brands	OH OncoHealth
		QL 6 ML / 1 DAY
		PA
		ONC Oncology
		S Specialty Drug
		OH OncoHealth
		ONC Oncology

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
JAKAFI	Formulary Brands	<ul style="list-style-type: none"> QL 2 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
KISQALI 200 MG DAILY DOSE	Formulary Brands	<ul style="list-style-type: none"> QL 21 TABS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug
KISQALI 400 MG DAILY DOSE	Formulary Brands	<ul style="list-style-type: none"> QL 42 TABS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug
KISQALI 600 MG DAILY DOSE	Formulary Brands	<ul style="list-style-type: none"> QL 63 TABS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug
KISQALI FEMARA 200 MG CO-PACK	Formulary Brands	<ul style="list-style-type: none"> QL 49 TABS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug
KISQALI FEMARA 400 MG CO-PACK	Formulary Brands	<ul style="list-style-type: none"> QL 70 TABS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
KOSELUGO 10 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 8 CAPS / 1 DAY PA S Specialty Drug
KOSELUGO 25 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 4 CAPS / 1 DAY PA S Specialty Drug
KRAZATI	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>lapatinib ditosylate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
<i>lenalidomide (lenalidomide 2.5 mg capsule, lenalidomide 5 mg capsule, lenalidomide 10 mg capsule, lenalidomide 15 mg capsule)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 1 CAP / 1 DAY ONC Oncology OH OncoHealth S Specialty Drug
<i>lenalidomide (lenalidomide 20 mg capsule, lenalidomide 25 mg capsule)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 21 CAPS / 28 DAYS ONC Oncology OH OncoHealth S Specialty Drug
<i>letrozole</i>	Formulary Low Cost Generics	<ul style="list-style-type: none"> ACA - PA Affordable Care Act with PA OH OncoHealth
LEUKERAN	Formulary Brands	<ul style="list-style-type: none"> OH OncoHealth
LUMAKRAS	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYNPARZA	Formulary Brands	<ul style="list-style-type: none"> QL 4 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
LYSODREN	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
LYTGOBI	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
MATULANE	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
MEKINIST (MEKINIST 0.05 MG/ML SOLUTION, MEKINIST 0.5 MG TABLET, MEKINIST 2 MG TABLET)	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
<i>melfalan</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> OH OncoHealth
<i>mercaptopurine</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> OH OncoHealth
<i>methotrexate sodium (methotrexate sodium 2.5 mg tablet, methotrexate sodium 25 mg/ml vial)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> OH OncoHealth
<i>methotrexate sodium/pf 25 mg/ml vial</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> OH OncoHealth
MYLERAN	Formulary Brands	<ul style="list-style-type: none"> OH OncoHealth

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NINLARO	Formulary Brands	PA ONC Oncology OH OncoHealth S Specialty Drug
NUBEQA	Formulary Brands	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ODOMZO	Formulary Brands	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ONUREG	Formulary Brands	PA ONC Oncology OH OncoHealth S Specialty Drug
<i>pazopanib hcl</i>	Formulary High Cost Generics	PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
POMALYST	Formulary Brands	QL 21 CAPS / 28 DAYS PA ONC Oncology OH OncoHealth S Specialty Drug
RASUVO	Formulary Brands	PA NP Non-Preferred Drug OH OncoHealth

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RETEVMO	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ROZLYTREK 100 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 1 CAP / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ROZLYTREK 200 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 3 CAPS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ROZLYTREK 50 MG PELLETT PACKET	Formulary Brands	<ul style="list-style-type: none"> QL 1 PACKET / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>sorafenib tosylate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
SPRYCEL (SPRYCEL 50 MG TABLET, SPRYCEL 70 MG TABLET, SPRYCEL 80 MG TABLET, SPRYCEL 100 MG TABLET, SPRYCEL 140 MG TABLET)	Formulary Brands	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SPRYCEL 20 MG TABLET	Formulary Brands	<ul style="list-style-type: none"> QL 3 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
STIVARGA	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
<i>sunitinib malate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
TABLOID	Formulary Brands	<ul style="list-style-type: none"> ONC Oncology OH OncoHealth S Specialty Drug
TAFINLAR	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
TAGRISSO	Formulary Brands	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
TASIGNA	Formulary Brands	<ul style="list-style-type: none"> QL 4 CAPS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TAZVERIK	Formulary Brands	<ul style="list-style-type: none"> QL 8 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
<i>temozolomide</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> ONC Oncology OH OncoHealth S Specialty Drug
<i>tretinoin 10 mg capsule</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> ONC Oncology OH OncoHealth S Specialty Drug
TURALIO	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
VANFLYTA	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug
VERZENIO	Formulary Brands	<ul style="list-style-type: none"> QL 2 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
XPOVIO	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
XTANDI 40 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 4 CAPS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
XTANDI 40 MG TABLET	Formulary Brands	<ul style="list-style-type: none"> QL 4 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
XTANDI 80 MG TABLET	Formulary Brands	<ul style="list-style-type: none"> QL 2 TABS / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ZEJULA (ZEJULA 100 MG TABLET, ZEJULA 200 MG TABLET, ZEJULA 300 MG TABLET)	Formulary Brands	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ZEJULA 100 MG CAPSULE	Formulary Brands	<ul style="list-style-type: none"> QL 1 CAP / 1 DAY PA ONC Oncology TD Trial Drug OH OncoHealth S Specialty Drug
ZELBORAF	Formulary Brands	<ul style="list-style-type: none"> PA ONC Oncology OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ZOLINZA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">ONC</div> Oncology <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">TD</div> Trial Drug <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> OncoHealth <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">S</div> Specialty Drug </div>
ZYKADIA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">ONC</div> Oncology <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">TD</div> Trial Drug <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> OncoHealth <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">S</div> Specialty Drug </div>
ANTIPARKINSONIAN AGENTS (CNS)		
ADAMANTANES (CNS)		
<i>amantadine hcl (amantadine hcl 50 mg/5 ml solution, amantadine hcl 100 mg tablet)</i>	Formulary High Cost Generics	
<i>amantadine hcl 100 mg capsule</i>	Formulary Low Cost Generics	
ADENOSINE A2A RECEPTOR ANTAGONISTS		
NOURIANZ	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">S</div> Specialty Drug </div>
ANTICHOLINERGIC AGENTS (CNS)		
<i>benztropine mesylate (benztropine mesylate 0.5 mg tablet, benztropine mesylate 1 mg tablet, benztropine mesylate 2 mg tablet)</i>	Formulary High Cost Generics	
<i>trihexyphenidyl hcl (trihexyphenidyl hcl 2 mg tablet, trihexyphenidyl hcl 5 mg tablet)</i>	Formulary Low Cost Generics	
<i>trihexyphenidyl hcl 2 mg/5 ml solution</i>	Formulary High Cost Generics	
CATECHOL-O-METHYLTRANSFERASE(COMT)INHIB.		
<i>entacapone</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DOPAMINE PRECURSORS		
<i>carbidopa/levodopa (carbidopa/levodopa 10mg-100mg tab rapdis, carbidopa/levodopa 10mg-100mg tablet, carbidopa/levodopa 25mg-100mg tab rapdis, carbidopa/levodopa 25mg-100mg tablet, carbidopa/levodopa 25mg-100mg tablet er, carbidopa/levodopa 25mg-250mg tab rapdis, carbidopa/levodopa 25mg-250mg tablet, carbidopa/levodopa 50mg-200mg tablet er)</i>	Formulary High Cost Generics	
<i>carbidopa/levodopa/entacapone</i>	Formulary High Cost Generics	
INBRIJA	Formulary Brands	PA S Specialty Drug
RYTARY	Formulary Brands	ST
MONOAMINE OXIDASE B INHIBITORS		
EMSAM	Formulary Brands	PA NP Non-Preferred Drug
<i>rasagiline mesylate</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>selegiline hcl (selegiline hcl 5 mg capsule, selegiline hcl 5 mg tablet)</i>	Formulary High Cost Generics	
ANTIPROTOZOALS		
AMEBICIDES		
<i>paromomycin sulfate</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
ANTIMALARIALS		
<i>atovaquone/proguanil hcl</i>	Formulary High Cost Generics	
<i>chloroquine phosphate</i>	Formulary High Cost Generics	
COARTEM	Formulary Brands	PA NP Non-Preferred Drug
<i>hydroxychloroquine sulfate 200 mg tablet</i>	Formulary High Cost Generics	
<i>mefloquine hcl</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>quinine sulfate</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
ANTIPROTOZOALS, CRYPTOSPORIDIOSIS		
ALINIA 100 MG/5 ML SUSPENSION	Formulary Brands	QL 180 ML / RX PA NP Non-Preferred Drug
<i>nitazoxanide</i>	Formulary High Cost Generics	QL 6 TABS / RX PA NP Non-Preferred Drug
ANTIPROTOZOALS, MISCELLANEOUS		
LAMPIT	Formulary Brands	PA NP Non-Preferred Drug
ANTIPROTOZOALS, P JIROVECII PNEUMONIA		
<i>atovaquone 750 mg/5ml oral susp</i>	Formulary High Cost Generics	
ANTIPROTOZOALS,NITROIMIDAZOLE-DERIVATIVE		
<i>tinidazole</i>	Formulary High Cost Generics	
ANTIPROTOZOALS,NITROIMIDAZOLE-DERIVATIVE		
NITROIMIDAZOLE DERIVATIVE, ANTI-LEISHMAL		
IMPAVIDO	Formulary Brands	PA NP Non-Preferred Drug
NITROIMIDAZOLE DERIVATIVE, TRYPANOCIDAL		
<i>benznidazole</i>	Formulary High Cost Generics	PA
NITROIMIDAZOLE DERIVATIVES, MISC		
<i>metronidazole (metronidazole 0.75 % cream (g), metronidazole 0.75 % gel (gram), metronidazole 0.75 % lotion, metronidazole 1 % gel (gram), metronidazole 1 % gel w/pump, metronidazole 250 mg tablet, metronidazole 500 mg tablet)</i>	Formulary High Cost Generics	
<i>metronidazole 0.75 % gel w/appl</i>	Formulary Low Cost Generics	
ROSADAN 0.75% CREAM	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANTIPSYCHOTIC AGENTS		
ATYPICAL ANTIPSYCHOTICS		
ABILIFY ASIMTUFII	Formulary Brands	
ABILIFY MAINTENA	Formulary Brands	NP Non-Preferred Drug
<i>aripiprazole (aripiprazole 1 mg/ml solution, aripiprazole 2 mg tablet, aripiprazole 5 mg tablet, aripiprazole 10 mg tablet, aripiprazole 15 mg tablet, aripiprazole 20 mg tablet, aripiprazole 30 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
<i>aripiprazole (aripiprazole 10 mg tab rapdis, aripiprazole 15 mg tab rapdis)</i>	Formulary High Cost Generics	PA AL1 At least 7 yrs old NP Non-Preferred Drug
ARISTADA	Formulary Brands	NP Non-Preferred Drug
ARISTADA INITIO	Formulary Brands	NP Non-Preferred Drug
<i>asenapine maleate</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
CAPLYTA	Formulary Brands	QL 1 CAP / 1 DAY PA NP Non-Preferred Drug
<i>clozapine (clozapine 12.5 mg tab rapdis, clozapine 25 mg tab rapdis, clozapine 100 mg tab rapdis, clozapine 150 mg tab rapdis, clozapine 200 mg tab rapdis)</i>	Formulary High Cost Generics	PA AL1 At least 7 yrs old NP Non-Preferred Drug
<i>clozapine (clozapine 25 mg tablet, clozapine 50 mg tablet, clozapine 100 mg tablet, clozapine 200 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
FANAPT	Formulary Brands	PA NP Non-Preferred Drug
INVEGA HAFYERA	Formulary Brands	NP Non-Preferred Drug
INVEGA SUSTENNA	Formulary Brands	NP Non-Preferred Drug
INVEGA TRINZA	Formulary Brands	NP Non-Preferred Drug
<i>lurasidone hcl</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY AL1 At least 7 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LYBALVI	Formulary Brands	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
NUPLAZID	Formulary Brands	<p>PA</p> <p>TD Trial Drug</p> <p>S Specialty Drug</p>
<i>olanzapine (olanzapine 2.5 mg tablet, olanzapine 5 mg tab rapdis, olanzapine 5 mg tablet, olanzapine 7.5 mg tablet, olanzapine 10 mg tab rapdis, olanzapine 10 mg tablet, olanzapine 15 mg tab rapdis, olanzapine 15 mg tablet, olanzapine 20 mg tab rapdis, olanzapine 20 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
<i>paliperidone</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
<i>quetiapine fumarate (quetiapine fumarate 25 mg tablet, quetiapine fumarate 50 mg tab er 24h, quetiapine fumarate 50 mg tablet, quetiapine fumarate 100 mg tablet, quetiapine fumarate 150 mg tab er 24h, quetiapine fumarate 150 mg tablet, quetiapine fumarate 200 mg tab er 24h, quetiapine fumarate 200 mg tablet, quetiapine fumarate 300 mg tab er 24h, quetiapine fumarate 300 mg tablet, quetiapine fumarate 400 mg tab er 24h, quetiapine fumarate 400 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
REXULTI	Formulary Brands	<p>PA</p> <p>NP Non-Preferred Drug</p>
<i>risperidone (risperidone 0.25 mg tab rapdis, risperidone 0.5 mg tab rapdis, risperidone 1 mg tab rapdis, risperidone 2 mg tab rapdis, risperidone 3 mg tab rapdis, risperidone 4 mg tab rapdis)</i>	Formulary High Cost Generics	<p>PA</p> <p>AL1 At least 7 yrs old</p>
<i>risperidone (risperidone 0.25 mg tablet, risperidone 0.5 mg tablet, risperidone 1 mg tablet, risperidone 2 mg tablet, risperidone 3 mg tablet, risperidone 4 mg tablet)</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
<i>risperidone 1 mg/ml solution</i>	Formulary High Cost Generics	AL1 At least 7 yrs old

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>risperidone microspheres</i>	Formulary High Cost Generics	
SECUADO	Formulary Brands	PA NP Non-Preferred Drug
UZEDY	Formulary Brands	PA NP Non-Preferred Drug
VRAYLAR (VRAYLAR 1.5 MG CAPSULE, VRAYLAR 1.5 MG-3 MG PACK)	Formulary Brands	QL 2 CAPS / 1 DAY PA NP Non-Preferred Drug
VRAYLAR (VRAYLAR 3 MG CAPSULE, VRAYLAR 4.5 MG CAPSULE, VRAYLAR 6 MG CAPSULE)	Formulary Brands	QL 1 CAP / 1 DAY PA NP Non-Preferred Drug
<i>ziprasidone hcl</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
BUTYROPHENONES		
HALDOL DECANOATE 100	Formulary Brands	
HALDOL DECANOATE 50	Formulary Brands	
<i>haloperidol</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
<i>haloperidol decanoate (haloperidol decanoate 50 mg/ml ampul, haloperidol decanoate 50 mg/ml vial, haloperidol decanoate 100 mg/ml ampul, haloperidol decanoate 100 mg/ml vial)</i>	Formulary High Cost Generics	
<i>haloperidol lactate 2 mg/ml oral conc</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
DIBENZOXAPINES		
<i>loxapine succinate</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
DIHYDROINDOLONES		
<i>molindone hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
DIPHENYLBUTYLPERIDINES		
<i>pimozide</i>	Formulary High Cost Generics	PA AL1 At least 12 yrs old NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHENOTHIAZINES		
<i>chlorpromazine hcl (chlorpromazine hcl 10 mg tablet, chlorpromazine hcl 25 mg tablet, chlorpromazine hcl 30 mg/ml oral conc, chlorpromazine hcl 50 mg tablet, chlorpromazine hcl 100 mg tablet, chlorpromazine hcl 100 mg/ml oral conc, chlorpromazine hcl 200 mg tablet)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
COMPRO	Formulary High Cost Generics	
<i>fluphenazine decanoate</i>	Formulary High Cost Generics	
<i>fluphenazine hcl (fluphenazine hcl 1 mg tablet, fluphenazine hcl 2.5 mg tablet, fluphenazine hcl 5 mg tablet, fluphenazine hcl 10 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
<i>fluphenazine hcl (fluphenazine hcl 2.5 mg/5ml elixir, fluphenazine hcl 5 mg/ml oral conc)</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
<i>perphenazine</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
<i>prochlorperazine</i>	Formulary High Cost Generics	
<i>prochlorperazine maleate</i>	Formulary Low Cost Generics	
<i>thioridazine hcl</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
<i>trifluoperazine hcl</i>	Formulary High Cost Generics	AL1 At least 7 yrs old
THIOXANTHENES		
<i>thiothixene</i>	Formulary Low Cost Generics	AL1 At least 7 yrs old
ANTIRETROVIRALS		
ANTIRETROVIRALS, MISCELLANEOUS		
TYBOST	Formulary Brands	
HIV ENTRY AND FUSION INHIBITORS		
FUZEON	Formulary Brands	S Specialty Drug
<i>maraviroc</i>	Formulary High Cost Generics	
RUKOBIA	Formulary Brands	PA NP Non-Preferred Drug
SELZENTRY (SELZENTRY 20 MG/ML ORAL SOLN, SELZENTRY 25 MG TABLET, SELZENTRY 75 MG TABLET)	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HIV INTEGRASE INHIBITOR ANTIRETROVIRALS		
DOVATO	Formulary Brands	
ISENTRESS	Formulary Brands	
ISENTRESS HD	Formulary Brands	
JULUCA	Formulary Brands	
TIVICAY	Formulary Brands	
TIVICAY PD	Formulary Brands	
VOCABRIA	Formulary Brands	
HIV NONNUCLEOSIDE REV. TRANSCRIP. INHIB.		
DELSTRIGO	Formulary Brands	
EDURANT	Formulary Brands	
<i>efavirenz (efavirenz 50 mg capsule, efavirenz 600 mg tablet)</i>	Formulary High Cost Generics	
<i>efavirenz 200 mg capsule</i>	Formulary Low Cost Generics	
<i>etravirine</i>	Formulary High Cost Generics	
INTELENCE 25 MG TABLET	Formulary Brands	
<i>nevirapine (nevirapine 50 mg/5 ml oral susp, nevirapine 100 mg tab er 24h, nevirapine 200 mg tablet, nevirapine 400 mg tab er 24h)</i>	Formulary High Cost Generics	
SUSTIVA (SUSTIVA 50 MG CAPSULE, SUSTIVA 200 MG CAPSULE)	Formulary Brands	
HIV NUCLEOSIDE, NUCLEOTIDE RT INHIBITORS		
<i>abacavir sulfate (abacavir sulfate 20 mg/ml solution, abacavir sulfate 300 mg tablet)</i>	Formulary High Cost Generics	
<i>abacavir sulfate/lamivudine</i>	Formulary Low Cost Generics	
BIKTARVY	Formulary Brands	
COMPLERA	Formulary Brands	
DESCOVY	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #FFD700; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">ACA - PA</div> <div style="font-size: 0.8em;">Affordable Care Act with PA</div> </div>
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>emtricitabine</i>	Formulary High Cost Generics	
<i>emtricitabine/tenofovir disoproxil fumarate (emtricitabine/tenofovir (tdf) 100-150 mg tablet, emtricitabine/tenofovir (tdf) 133-200 mg tablet, emtricitabine/tenofovir (tdf) 167-250 mg tablet, emtricitabine/tenofovir (tdf) 200-300 mg tablet)</i>	Formulary High Cost Generics	
EPIVIR HBV 25 MG/5 ML SOLN	Formulary Brands	
GENVOYA	Formulary Brands	
<i>lamivudine (lamivudine 10 mg/ml solution, lamivudine 100 mg tablet, lamivudine 150 mg tablet, lamivudine 300 mg tablet)</i>	Formulary High Cost Generics	
<i>lamivudine/zidovudine</i>	Formulary High Cost Generics	
ODEFSEY	Formulary Brands	
STRIBILD	Formulary Brands	
<i>tenofovir disoproxil fumarate</i>	Formulary Low Cost Generics	
TRIUMEQ	Formulary Brands	
TRIUMEQ PD	Formulary Brands	
VIREAD (VIREAD 150 MG TABLET, VIREAD 200 MG TABLET, VIREAD 250 MG TABLET, VIREAD POWDER)	Formulary Brands	
<i>zidovudine (zidovudine 10 mg/ml syrup, zidovudine 300 mg tablet)</i>	Formulary High Cost Generics	
<i>zidovudine 100 mg capsule</i>	Formulary Low Cost Generics	
HIV PROTEASE INHIBITOR ANTIRETROVIRALS		
APTIVUS	Formulary Brands	
<i>atazanavir sulfate</i>	Formulary High Cost Generics	
<i>darunavir</i>	Formulary High Cost Generics	
<i>darunavir ethanolate</i>	Formulary High Cost Generics	
EVOTAZ	Formulary Brands	
<i>fosamprenavir calcium</i>	Formulary High Cost Generics	
LEXIVA 50 MG/ML SUSPENSION	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lopinavir/ritonavir (lopinavir/ritonavir 100mg-25mg tablet, lopinavir/ritonavir 200mg-50mg tablet, lopinavir/ritonavir 400-100/5 solution)</i>	Formulary High Cost Generics	
NORVIR 80 MG/ML SOLUTION	Formulary Brands	
PREZCOBIX	Formulary Brands	
PREZISTA (PREZISTA 75 MG TABLET, PREZISTA 100 MG/ML SUSPENSION, PREZISTA 150 MG TABLET)	Formulary Brands	
REYATAZ 50 MG POWDER PACKET	Formulary Brands	
<i>ritonavir</i>	Formulary High Cost Generics	
SYMTUZA	Formulary Brands	
ANTITHROMBOTIC AGENTS		
PLATELET-AGGREGATION INHIBITORS		
BRILINTA	Formulary Brands	
<i>cilostazol</i>	Formulary High Cost Generics	
<i>clopidogrel bisulfate 75 mg tablet</i>	Formulary Low Cost Generics	
<i>prasugrel hcl</i>	Formulary High Cost Generics	
ZONTIVITY	Formulary Brands	PA
PLATELET-REDUCING AGENTS		
<i>anagrelide hcl</i>	Formulary High Cost Generics	OH OncoHealth
VON WILLEBRAND FACTOR-RELATED ANTITHROMB		
CABLIVI 11 MG KIT	Formulary Brands	PA OH OncoHealth S Specialty Drug
ANTITOXINS,IMMUNE GLOB,TOXOIDS,VACCINES		
ALLERGENIC EXTRACTS (THERAPEUTIC)		
GRASTEK	Formulary Brands	PA NP Non-Preferred Drug
ODACTRA	Formulary Brands	PA
PALFORZIA	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RAGWITEK	Formulary Brands	PA
ANTITOXINS AND IMMUNE GLOBULINS		
BIVIGAM	Formulary Brands	PA OH OncoHealth S Specialty Drug
TOXOIDS		
ADACEL TDAP	Formulary Brands	ACA Affordable Care Act
BOOSTRIX TDAP	Formulary Brands	ACA Affordable Care Act
DAPTACEL DTAP	Formulary Brands	ACA Affordable Care Act
INFANRIX DTAP	Formulary Brands	ACA Affordable Care Act
TENIVAC	Formulary Brands	ACA Affordable Care Act
<i>tetanus and diphtheria toxoids, adult</i>	Formulary Brands	ACA Affordable Care Act
<i>tetanus, diphtheria toxoid ped/pf</i>	Formulary Brands	ACA Affordable Care Act
VAXELIS	Formulary Brands	ACA Affordable Care Act
VACCINES		
ABRYSVO	Formulary Brands	ACA Affordable Care Act
ACTHIB	Formulary Brands	ACA Affordable Care Act
<i>adenovirus live type-4 and adenovirus live type-7 vaccine</i>	Formulary Brands	
<i>adenovirus vaccine live type-4</i>	Formulary Brands	
<i>adenovirus vaccine live type-7</i>	Formulary Brands	
AFLURIA QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
AFLURIA QUAD 2022-23 (3YR UP)	Formulary Brands	ACA Affordable Care Act
AFLURIA QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
AFLURIA QUAD 2023-24 (3YR UP)	Formulary Brands	ACA Affordable Care Act
AFLURIA TRIV 2024-25 (3YR UP)	Formulary Brands	ACA Affordable Care Act
AFLURIA TRIVALENT 2024-25	Formulary Brands	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AREXVY	Formulary Brands	ACA Affordable Care Act
AREXVY ADJUVANT COMPONENT	Formulary Brands	ACA Affordable Care Act
AREXVY ANTIGEN COMPONENT	Formulary Brands	ACA Affordable Care Act
BEXSERO	Formulary Brands	ACA Affordable Care Act
CAPVAXIVE	Formulary Brands	ACA Affordable Care Act
COMIRNATY	Formulary Brands	ACA Affordable Care Act
COMIRNATY 2023-2024	Formulary Brands	ACA Affordable Care Act
COMIRNATY 2024-2025	Formulary Brands	ACA Affordable Care Act
ENGERIX-B ADULT	Formulary Brands	ACA Affordable Care Act
ENGERIX-B PEDIATRIC-ADOLESCENT	Formulary Brands	ACA Affordable Care Act
FLUAD QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
FLUAD QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
FLUAD TRIVALENT 2024-2025	Formulary Brands	ACA Affordable Care Act
FLUARIX QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
FLUARIX QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
FLUARIX TRIVALENT 2024-2025	Formulary Brands	ACA Affordable Care Act
FLUBLOK QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
FLUBLOK QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
FLUBLOK TRIVALENT 2024-2025	Formulary Brands	ACA Affordable Care Act
FLUCELVAX QUAD 2022-2023 (FLUCELVAX QUAD 2022-2023 SYR, FLUCELVAX QUAD 2022-2023 VIAL)	Formulary Brands	ACA Affordable Care Act
FLUCELVAX QUAD 2023-2024 (FLUCELVAX QUAD 2023-2024 SYR, FLUCELVAX QUAD 2023-2024 VIAL)	Formulary Brands	ACA Affordable Care Act
FLUCELVAX TRIVALENT 2024-2025 (FLUCELVAX TRIVAL 2024-2025 SYR, FLUCELVAX TRIVAL 2024-2025 VL)	Formulary Brands	ACA Affordable Care Act
FLULAVAL QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FLULAVAL QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
FLULAVAL TRIVALENT 2024-2025	Formulary Brands	ACA Affordable Care Act
FLUMIST QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
FLUMIST QUAD 2023-2024	Formulary Brands	ACA Affordable Care Act
FLUMIST TRIVALENT 2024-2025	Formulary Brands	ACA Affordable Care Act
FLUZONE HIGH-DOSE QUAD 2022-23	Formulary Brands	ACA Affordable Care Act
FLUZONE HIGH-DOSE QUAD 2023-24	Formulary Brands	ACA Affordable Care Act
FLUZONE HIGH-DOSE TRIV 2024-25	Formulary Brands	ACA Affordable Care Act
FLUZONE QUAD 2022-2023	Formulary Brands	ACA Affordable Care Act
FLUZONE QUAD 2023-2024 (FLUZONE QUAD 2023-2024 SYRINGE, FLUZONE QUAD 2023-2024 VIAL)	Formulary Brands	ACA Affordable Care Act
FLUZONE TRIVALENT 2024-2025 (FLUZONE TRIVALENT 2024-25 SYRG, FLUZONE TRIVALENT 2024-25 VIAL)	Formulary Brands	ACA Affordable Care Act
GARDASIL 9	Formulary Brands	ACA Affordable Care Act
HAVRIX	Formulary Brands	ACA Affordable Care Act
HEPLISAV-B	Formulary Brands	ACA Affordable Care Act
HIBERIX	Formulary Brands	ACA Affordable Care Act
IPOL	Formulary Brands	ACA Affordable Care Act
JANSSEN COVID-19 VACCINE (EUA)	Formulary Brands	ACA Affordable Care Act
KINRIX	Formulary Brands	ACA Affordable Care Act
M-M-R II VACCINE	Formulary Brands	ACA Affordable Care Act
MENACTRA	Formulary Brands	ACA Affordable Care Act
MENQUADFI	Formulary Brands	ACA Affordable Care Act
MENVEO A-C-Y-W-135-DIP (MENVEO 1 VIAL-A-C-Y-W-135-DIP, MENVEO A- C-Y-W KIT (2 VIALS))	Formulary Brands	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MENVEO MENA COMPONENT	Formulary Brands	ACA Affordable Care Act
MENVEO MENCYW-135 COMPONENT	Formulary Brands	ACA Affordable Care Act
MODERNA COVID (12Y UP)VAC(EUA)	Formulary Brands	ACA Affordable Care Act
MODERNA COVID 23-24(6M-11Y)EUA	Formulary Brands	ACA Affordable Care Act
MODERNA COVID 24-25(6M-11Y)EUA	Formulary Brands	ACA Affordable Care Act
MODERNA COVID BIVAL(6MO UP)EUA	Formulary Brands	ACA Affordable Care Act
MODERNA COVID BIVAL(6MO-5Y)EUA	Formulary Brands	ACA Affordable Care Act
MODERNA COVID(6M-5Y) VACC(EUA)	Formulary Brands	ACA Affordable Care Act
MODERNA COVID-19 BOOSTER (EUA)	Formulary Brands	ACA Affordable Care Act
MRESVIA	Formulary Brands	ACA Affordable Care Act
NOVAVAX COVID 2023-2024 (EUA)	Formulary Brands	ACA Affordable Care Act
NOVAVAX COVID 2024-2025 (EUA)	Formulary Brands	ACA Affordable Care Act
NOVAVAX COVID-19 VACC,ADJ(EUA)	Formulary Brands	ACA Affordable Care Act
PEDIARIX	Formulary Brands	ACA Affordable Care Act
PEDVAXHIB	Formulary Brands	ACA Affordable Care Act
PENBRAYA	Formulary Brands	ACA Affordable Care Act
PENBRAYA MENACWY COMPONENT	Formulary Brands	ACA Affordable Care Act
PENBRAYA MENB COMPONENT	Formulary Brands	ACA Affordable Care Act
PENTACEL	Formulary Brands	ACA Affordable Care Act
PENTACEL ACTHIB COMPONENT	Formulary Brands	ACA Affordable Care Act
PENTACEL DTAP-IPV COMPONENT	Formulary Brands	ACA Affordable Care Act
PFIZER COVID (12Y UP) VAC(EUA)	Formulary Brands	ACA Affordable Care Act
PFIZER COVID (5-11Y) VAC (EUA)	Formulary Brands	ACA Affordable Care Act
PFIZER COVID (6M-4Y) VACC(EUA)	Formulary Brands	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PFIZER COVID 2023-24(5-11Y)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID 2023-24(6M-4Y)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID 2024-25(5-11Y)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID 2024-25(6M-4Y)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID BIVAL (12Y UP)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID BIVAL (5-11YR)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID BIVAL (6MO-4Y)EUA	Formulary Brands	ACA Affordable Care Act
PFIZER COVID-19 VACCINE (EUA)	Formulary Brands	ACA Affordable Care Act
PNEUMOVAX 23	Formulary Brands	ACA Affordable Care Act
PREHEVBRIO	Formulary Brands	ACA Affordable Care Act
PREVNAR 13	Formulary Brands	ACA Affordable Care Act
PREVNAR 20	Formulary Brands	ACA Affordable Care Act
PRIORIX	Formulary Brands	ACA Affordable Care Act
PROQUAD	Formulary Brands	ACA Affordable Care Act
QUADRACEL DTAP-IPV	Formulary Brands	ACA Affordable Care Act
RECOMBIVAX HB	Formulary Brands	ACA Affordable Care Act
ROTARIX	Formulary Brands	ACA Affordable Care Act
ROTATEQ	Formulary Brands	ACA Affordable Care Act
SHINGRIX	Formulary Brands	QL 1 KIT / RX ACA Affordable Care Act
SHINGRIX GE ANTIGEN COMPONENT	Formulary Brands	QL 1 KIT / RX ACA Affordable Care Act
SPIKEVAX 2023-2024	Formulary Brands	ACA Affordable Care Act
SPIKEVAX 2024-2025	Formulary Brands	ACA Affordable Care Act
SPIKEVAX COVID (18Y UP) VACC	Formulary Brands	ACA Affordable Care Act
TRUMENBA	Formulary Brands	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TWINRIX	Formulary Brands	ACA Affordable Care Act
VAQTA	Formulary Brands	ACA Affordable Care Act
VARIVAX VACCINE	Formulary Brands	ACA Affordable Care Act
VAXCHORA VACCINE	Formulary Brands	
VAXNEUVANCE	Formulary Brands	ACA Affordable Care Act
VIVOTIF	Formulary Brands	
ANTIULCER AGENTS AND ACID SUPPRESSANTS		
HISTAMINE H2-ANTAGONISTS		
<i>cimetidine (cimetidine 300 mg tablet, cimetidine 400 mg tablet, cimetidine 800 mg tablet)</i>	Formulary High Cost Generics	
<i>cimetidine hcl 300 mg/5ml solution</i>	Formulary High Cost Generics	
<i>famotidine (famotidine 20 mg tablet, famotidine 40 mg tablet)</i>	Formulary Low Cost Generics	
<i>famotidine 20 mg tablet (rx only)</i>	Formulary Low Cost Generics	
<i>famotidine 40mg/5ml susp recon</i>	Formulary High Cost Generics	AL1 Up to 12 yrs old
<i>nizatidine</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
PROSTAGLANDINS		
<i>misoprostol</i>	Formulary High Cost Generics	
PROTECTANTS		
<i>sucralfate 1 g tablet</i>	Formulary High Cost Generics	
<i>sucralfate 1 g/10 ml oral susp</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
PROTON-PUMP INHIBITORS		
<i>esomeprazole magnesium (esomeprazole magnesium 20 mg capsule dr, esomeprazole magnesium 40 mg capsule dr)</i>	Formulary High Cost Generics	
<i>lansoprazole (lansoprazole 15 mg capsule dr, lansoprazole 30 mg capsule dr)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>lansoprazole dr 15 mg capsule (rx only)</i>	Formulary High Cost Generics	
<i>omeprazole (omeprazole 10 mg capsule dr, omeprazole 20 mg capsule dr, omeprazole 40 mg capsule dr)</i>	Formulary Low Cost Generics	
<i>pantoprazole sodium (pantoprazole sodium 20 mg tablet dr, pantoprazole sodium 40 mg tablet dr)</i>	Formulary Low Cost Generics	
<i>rabeprazole sodium 20 mg tablet dr</i>	Formulary High Cost Generics	
ANTIVIRALS (SYSTEMIC)		
ADAMANTANE ANTIVIRALS		
<i>rimantadine hcl</i>	Formulary High Cost Generics	
ANTIRETROVIRALS		
SUNLENCA (SUNLENCA 4- 300 MG TABLET, SUNLENCA 5- 300 MG TABLET)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #8B0000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Specialty Drug </div>
ANTIVIRALS, MISCELLANEOUS		
TPOXX 200 MG CAP (STOCKPILE)	Formulary Brands	
CMV ANTIVIRALS		
LIVTENCITY	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #8B0000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Specialty Drug </div>
PREVYMIS (PREVYMIS 240 MG TABLET, PREVYMIS 480 MG TABLET)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> Non-Preferred Drug </div>
CORONAVIRUS (COVID-19)		
PAXLOVID 150-100 MG DOSE PACK	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> </div> 20 TABS / 5 DAYS </div>
PAXLOVID 150-100 MG PACK (EUA)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> </div> 20 TABS / 5 DAYS </div>
PAXLOVID 300-100 MG DOSE PACK	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> </div> 30 TABS / 5 DAYS </div>
PAXLOVID 300-100 MG PACK (EUA)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #4B0082; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> </div> 30 TABS / 5 DAYS </div>
INTERFERON ANTIVIRALS		
ALFERON N	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #8B0000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Specialty Drug </div>
INTRON A	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> </div> OncoHealth </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="margin-right: 10px;"> <div style="background-color: #8B0000; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Specialty Drug </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEGASYS	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> OncoHealth <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> Specialty Drug </div>
MONOCLONAL ANTIBODIES (08:18)		
BEYFORTUS	Formulary Brands	<div style="background-color: #333; color: white; padding: 2px;">ACA</div> Affordable Care Act
NEURAMINIDASE INHIBITOR ANTIVIRALS		
<i>oseltamivir phosphate (oseltamivir phosphate 45 mg capsule, oseltamivir phosphate 75 mg capsule)</i>	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 10 CAPS / 1 FILL
<i>oseltamivir phosphate 30 mg capsule</i>	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 20 CAPS / 1 FILL
<i>oseltamivir phosphate 6 mg/ml susp recon</i>	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 180 ML / 1 FILL
RELENZA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 20 CAPS / 1 FILL <div style="background-color: #0070C0; color: white; padding: 2px;">NP</div> Non-Preferred Drug </div>
NUCLEOSIDE AND NUCLEOTIDE ANTIVIRALS		
<i>acyclovir (acyclovir 200 mg capsule, acyclovir 400 mg tablet, acyclovir 800 mg tablet)</i>	Formulary High Cost Generics	
<i>acyclovir 200 mg/5ml oral susp</i>	Formulary High Cost Generics	<div style="background-color: #3CB371; color: white; padding: 2px;">AL1</div> Up to 12 yrs old
<i>acyclovir 5 % oint. (g)</i>	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 15 GM / 1 FILL
<i>adefovir dipivoxil</i>	Formulary High Cost Generics	
BARACLUDE 0.05 MG/ML SOLUTION	Formulary Brands	
<i>entecavir</i>	Formulary Low Cost Generics	
<i>famciclovir</i>	Formulary High Cost Generics	
LAGEVRIO (EUA)	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 40 CAPS / 5 DAYS
LAGEVRIO 200 MG CAP (EUA) USG DISTRIBUTED	Formulary High Cost Generics	<div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 40 CAPS / 5 DAYS
<i>ribavirin (ribavirin 200 mg capsule, ribavirin 200 mg tablet)</i>	Formulary High Cost Generics	<div style="background-color: #8B4513; color: white; padding: 2px;">S</div> Specialty Drug
<i>valacyclovir hcl</i>	Formulary High Cost Generics	
<i>valganciclovir hcl (valganciclovir hcl 50 mg/ml soln recon, valganciclovir hcl 450 mg tablet)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VEMLIDY	Formulary Brands	NP Non-Preferred Drug
ZIRGAN	Formulary Brands	NP Non-Preferred Drug
ANXIOLYTICS, SEDATIVES AND HYPNOTICS		
ANXIOLYTICS, SEDATIVES, AND HYPNOTICS, MISC		
<i>hydroxyzine hcl (hydroxyzine hcl 10 mg tablet, hydroxyzine hcl 25 mg tablet, hydroxyzine hcl 50 mg tablet)</i>	Formulary Low Cost Generics	
<i>hydroxyzine hcl (hydroxyzine hcl 10 mg/5 ml solution, hydroxyzine hcl 50 mg/25ml solution)</i>	Formulary High Cost Generics	
<i>hydroxyzine pamoate</i>	Formulary High Cost Generics	
BARBITURATES (ANXIOLYTIC, SEDATIVE/HYP)		
<i>butalb/acetaminophen/caffeine 50-325-40 capsule</i>	Formulary High Cost Generics	QL 6 CAPS / 1 DAY
<i>butalb/acetaminophen/caffeine 50-325-40 tablet</i>	Formulary High Cost Generics	QL 6 TABS / 1 DAY
<i>phenobarbital (phenobarbital 15 mg tablet, phenobarbital 16.2 mg tablet, phenobarbital 20 mg/5 ml elixir)</i>	Formulary High Cost Generics	
ZEBUTAL	Formulary High Cost Generics	QL 6 CAPS / 1 DAY
BENZODIAZEPINES (ANXIOLYTIC, SEDATIVE/HYP)		
<i>alprazolam (alprazolam 0.25 mg tablet, alprazolam 0.5 mg tab er 24h, alprazolam 0.5 mg tablet, alprazolam 1 mg tab er 24h, alprazolam 1 mg tablet)</i>	Formulary Low Cost Generics	QL 6 TABS / 1 DAY
<i>alprazolam (alprazolam 2 mg tab er 24h, alprazolam 2 mg tablet)</i>	Formulary Low Cost Generics	QL 3 TABS / 1 DAY
<i>alprazolam 3 mg tab er 24h</i>	Formulary Low Cost Generics	QL 2 TABS / 1 DAY
<i>chlordiazepoxide hcl 10 mg capsule</i>	Formulary Low Cost Generics	QL 6 CAPS / 1 DAY
<i>chlordiazepoxide hcl 25 mg capsule</i>	Formulary Low Cost Generics	QL 4 CAPS / 1 DAY
<i>chlordiazepoxide hcl 5 mg capsule</i>	Formulary High Cost Generics	QL 6 CAPS / 1 DAY
<i>clorazepate dipotassium (clorazepate dipotassium 3.75 mg tablet, clorazepate dipotassium 7.5 mg tablet)</i>	Formulary High Cost Generics	QL 6 TABS / 1 DAY PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>clorazepate dipotassium 15 mg tablet</i>	Formulary High Cost Generics	<p>QL 4 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>diazepam (diazepam 2 mg tablet, diazepam 5 mg tablet)</i>	Formulary Low Cost Generics	<p>QL 6 TABS / 1 DAY</p>
<i>diazepam (diazepam 2.5 mg kit, diazepam 5-7.5-10mg kit, diazepam 12.5-15-20 kit)</i>	Formulary High Cost Generics	<p>QL 4 KITS / 30 DAYS</p>
<i>diazepam 10 mg tablet</i>	Formulary Low Cost Generics	<p>QL 4 TABS / 1 DAY</p>
<i>diazepam 5 mg/5 ml solution</i>	Formulary High Cost Generics	<p>QL 40 ML / 1 DAY</p>
<i>diazepam 5 mg/ml oral conc</i>	Formulary High Cost Generics	<p>QL 8 ML / 1 DAY</p> <p>NP Non-Preferred Drug</p>
<i>estazolam 1 mg tablet</i>	Formulary High Cost Generics	<p>QL 2 TABS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>estazolam 2 mg tablet</i>	Formulary High Cost Generics	<p>QL 1 TAB / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>flurazepam hcl 15 mg capsule</i>	Formulary High Cost Generics	<p>QL 2 CAPS / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
<i>flurazepam hcl 30 mg capsule</i>	Formulary High Cost Generics	<p>QL 1 CAP / 1 DAY</p> <p>PA</p> <p>NP Non-Preferred Drug</p>
LIBERVANT	Formulary Brands	<p>QL 2 DOSES / RX</p> <p>PA</p>
<i>lorazepam (lorazepam 0.5 mg tablet, lorazepam 1 mg tablet)</i>	Formulary Low Cost Generics	<p>QL 6 TABS / 1 DAY</p>
<i>lorazepam 2 mg tablet</i>	Formulary Low Cost Generics	<p>QL 5 TABS / 1 DAY</p>
<i>lorazepam 2 mg/ml oral conc</i>	Formulary High Cost Generics	<p>QL 5 ML / 1 DAY</p>
LORAZEPAM INTENSOL	Formulary High Cost Generics	<p>QL 5 ML / 1 DAY</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NAYZILAM	Formulary Brands	<ul style="list-style-type: none"> QL 2 DOSES / RX PA NP Non-Preferred Drug
<i>oxazepam (oxazepam 10 mg capsule, oxazepam 15 mg capsule)</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 CAPS / 1 DAY PA NP Non-Preferred Drug
<i>oxazepam 30 mg capsule</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 4 CAPS / 1 DAY PA NP Non-Preferred Drug
<i>quazepam</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 2 TABS / 1 DAY PA NP Non-Preferred Drug
<i>temazepam 15 mg capsule</i>	Formulary Low Cost Generics	<ul style="list-style-type: none"> QL 2 CAPS / 1 DAY
<i>temazepam 30 mg capsule</i>	Formulary Low Cost Generics	<ul style="list-style-type: none"> QL 1 CAP / 1 DAY
<i>triazolam 0.125 mg tablet</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 4 TABS / 1 DAY
<i>triazolam 0.25 mg tablet</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 2 TABS / 1 DAY
VALTOCO	Formulary Brands	<ul style="list-style-type: none"> QL 2 DOSES / RX PA NP Non-Preferred Drug
MELATONIN RECEPTOR AGONISTS		
<i>ramelteon</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 1 TAB / 1 DAY
NON-BENZODIAZEPINE ANXIOLYTICS		
<i>bupirone hcl</i>	Formulary High Cost Generics	
<i>meprobamate</i>	Formulary High Cost Generics	<ul style="list-style-type: none"> QL 6 TABS / 1 DAY PA NP Non-Preferred Drug
NON-BENZODIAZEPINE HYPNOTICS		
<i>eszopiclone</i>	Formulary High Cost Generics	
<i>zaleplon</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>zolpidem tartrate (zolpidem tartrate 5 mg tablet, zolpidem tartrate 10 mg tablet)</i>	Formulary Low Cost Generics	
<i>zolpidem tartrate (zolpidem tartrate 6.25 mg tab mphase, zolpidem tartrate 12.5 mg tab mphase)</i>	Formulary High Cost Generics	ST
AUTONOMOUS DRUGS		
AUTONOMOUS DRUGS, MISCELLANEOUS		
TYRVAYA	Formulary Brands	
PARASYMPATHOMIMETIC (CHOLINERGIC AGENTS)		
<i>bethanechol chloride</i>	Formulary High Cost Generics	
<i>cevimeline hcl</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>donepezil hcl (donepezil hcl 5 mg tab rapdis, donepezil hcl 5 mg tablet, donepezil hcl 10 mg tab rapdis, donepezil hcl 10 mg tablet)</i>	Formulary High Cost Generics	
<i>galantamine hbr (galantamine hbr 4 mg tablet, galantamine hbr 4 mg/ml solution, galantamine hbr 8 mg cap24h pel, galantamine hbr 8 mg tablet, galantamine hbr 12 mg tablet, galantamine hbr 16 mg cap24h pel, galantamine hbr 24 mg cap24h pel)</i>	Formulary High Cost Generics	
<i>pilocarpine hcl (pilocarpine hcl 5 mg tablet, pilocarpine hcl 7.5 mg tablet)</i>	Formulary High Cost Generics	
<i>pyridostigmine bromide 180 mg tablet er</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>pyridostigmine bromide 30 mg tablet</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
<i>pyridostigmine bromide 60 mg tablet</i>	Formulary High Cost Generics	
<i>rivastigmine</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>rivastigmine tartrate</i>	Formulary High Cost Generics	
SMOKING CESSATION AGENTS		
<i>apo-varenicline 0.5 mg tablet (apotex)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY SC Smoking Cessation ACA Affordable Care Act
<i>apo-varenicline 1 mg tablet (apotex)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY SC Smoking Cessation ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NICORETTE 2 MG LOZENGE	Formulary High Cost Generics	SC Smoking Cessation ACA Affordable Care Act
<i>nicotine (nicotine 7mg/24hr patch td24, nicotine 14mg/24hr patch td24, nicotine 21 mg/24hr patch td24)</i>	Formulary High Cost Generics	SC Smoking Cessation ACA Affordable Care Act
<i>nicotine 21-14-7mg patch dysq</i>	Formulary Brands	ACA Affordable Care Act
<i>nicotine polacrilex (nicotine polacrilex 2 mg gum, nicotine polacrilex 2 mg lozenge, nicotine polacrilex 2 mg lozng mini, nicotine polacrilex 4 mg gum, nicotine polacrilex 4 mg lozenge, nicotine polacrilex 4 mg lozng mini)</i>	Formulary High Cost Generics	SC Smoking Cessation ACA Affordable Care Act
NICOTROL	Formulary Brands	SC Smoking Cessation ACA Affordable Care Act
NICOTROL NS	Formulary Brands	SC Smoking Cessation ACA Affordable Care Act
<i>varenicline tartrate (varenicline tartrate 0.5 mg tablet, varenicline tartrate 1 mg tablet)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY SC Smoking Cessation ACA Affordable Care Act
<i>varenicline tartrate 0.5 (11)-1 tab ds pk</i>	Formulary High Cost Generics	QL 53 TABS / 28 DAYS SC Smoking Cessation ACA Affordable Care Act
BETA-3-ADRENERGIC AGONISTS		
SELECTIVE BETA-3-ADRENERGIC AGONISTS		
<i>mirabegron</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY PA NP Non-Preferred Drug
MYRBETRIQ (MYRBETRIQ ER 25 MG TABLET, MYRBETRIQ ER 50 MG TABLET)	Formulary Brands	QL 1 TAB / 1 DAY

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BETA-ADRENERGIC AGONISTS		
SELECTIVE BETA-2-ADRENERGIC AGONISTS		
ADVAIR HFA	Formulary Brands	
<i>albuterol sulfate (albuterol sulfate 0.63mg/3ml vial-neb, albuterol sulfate 1.25mg/3ml vial-neb, albuterol sulfate 2 mg/5 ml syrup, albuterol sulfate 2.5 mg/0.5 vial-neb, albuterol sulfate 2.5 mg/3ml vial-neb, albuterol sulfate 5 mg/ml solution)</i>	Formulary High Cost Generics	
BREO ELLIPTA	Formulary Brands	
BREYNA	Formulary High Cost Generics	
<i>budesonide/formoterol fumarate</i>	Formulary High Cost Generics	
<i>fluticasone propionate/salmeterol xinafoate (fluticasone propion/salmeterol 100-50 mcg blst w/dev, fluticasone propion/salmeterol 250-50 mcg blst w/dev, fluticasone propion/salmeterol 500-50 mcg blst w/dev)</i>	Formulary High Cost Generics	
<i>formoterol fumarate/nebulizer</i>	Formulary High Cost Generics	PA
<i>levalbuterol tartrate</i>	Formulary High Cost Generics	
SEREVENT DISKUS	Formulary Brands	PA NP Non-Preferred Drug
STRIVERDI RESPIMAT	Formulary Brands	
<i>terbutaline sulfate (terbutaline sulfate 2.5 mg tablet, terbutaline sulfate 5 mg tablet)</i>	Formulary High Cost Generics	
VENTOLIN HFA	Formulary High Cost Generics	
WIXELA INHUB	Formulary High Cost Generics	
BLOOD FORMATION, COAGULATION, THROMBOSIS		
BLOOD FORM.,COAG,THROMBOSIS AGENTS MISC.		
OXBRYTA	Formulary Brands	PA S Specialty Drug
PYRUKYND	Formulary Brands	QL 56 TABS / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HEMATOPOIETIC AGENTS		
ALVAIZ	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> <div style="background-color: #A52A2A; color: white; padding: 2px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
ARANESP	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> <div style="background-color: #A52A2A; color: white; padding: 2px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
FULPHILA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> </div> OncoHealth
GRANIX	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> <div style="background-color: #A52A2A; color: white; padding: 2px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
PROMACTA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> <div style="background-color: #A52A2A; color: white; padding: 2px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
RETACRIT	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> <div style="background-color: #A52A2A; color: white; padding: 2px; border-radius: 3px;">S</div> </div> OncoHealth Specialty Drug
UDENYCA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> </div> OncoHealth
UDENYCA AUTOINJECTOR	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> </div> OncoHealth
UDENYCA ONBODY	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px; border-radius: 3px;">OH</div> </div> OncoHealth
HEMORRHEOLOGIC AGENTS		
<i>pentoxifylline</i>	Formulary High Cost Generics	
BRONCHODILATORS		
ANTICHOLINERGIC AGENTS (RESPIR. TRACT)		
BREZTRI AEROSPHERE	Formulary Brands	
TRELEGY ELLIPTA	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CALCINEURIN INHIBITORS (90:28)		
CALCINEURIN INHIBITORS, MISC (90:28)		
<i>cyclosporine (cyclosporine 25 mg capsule, cyclosporine 100 mg capsule)</i>	Formulary High Cost Generics	
<i>cyclosporine, modified (cyclosporine, modified 25 mg capsule, cyclosporine, modified 50 mg capsule, cyclosporine, modified 100 mg capsule, cyclosporine, modified 100 mg/ml solution)</i>	Formulary High Cost Generics	
GENGRAF (GENGRAF 25 MG CAPSULE, GENGRAF 100 MG CAPSULE, GENGRAF 100 MG/ML SOLUTION)	Formulary High Cost Generics	
<i>tacrolimus (tacrolimus 0.5 mg capsule, tacrolimus 1 mg capsule, tacrolimus 5 mg capsule)</i>	Formulary High Cost Generics	
CALCIUM-CHANNEL BLOCKING AGENTS		
DIHYDROPYRIDINES		
<i>amlodipine besylate</i>	Formulary Low Cost Generics	
<i>amlodipine besylate/benazepril hcl</i>	Formulary High Cost Generics	
<i>amlodipine besylate/olmesartan medoxomil</i>	Formulary High Cost Generics	
<i>amlodipine besylate/valsartan</i>	Formulary Low Cost Generics	
<i>felodipine</i>	Formulary High Cost Generics	
<i>nifedipine (nifedipine 10 mg capsule, nifedipine 20 mg capsule, nifedipine 30 mg tab er 24, nifedipine 30 mg tablet er, nifedipine 60 mg tab er 24, nifedipine 60 mg tablet er, nifedipine 90 mg tab er 24, nifedipine 90 mg tablet er)</i>	Formulary High Cost Generics	
<i>nimodipine 30 mg capsule</i>	Formulary High Cost Generics	
CARDIAC DRUGS		
CARDIAC DRUGS, MISCELLANEOUS		
<i>ranolazine</i>	Formulary High Cost Generics	
VYNDAMAX	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #8B0000; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">S</div> <div>Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VYNDAQEL	Formulary Brands	PA S Specialty Drug
CARDIOTONIC AGENTS		
CORLANOR 5 MG/5 ML ORAL SOLN	Formulary Brands	PA NP Non-Preferred Drug
DIGITEK 125 MCG TABLET	Formulary High Cost Generics	
DIGITEK 250 MCG TABLET	Formulary High Cost Generics	AL1 Up to 64 yrs old
DIGOX 125 MCG TABLET	Formulary High Cost Generics	
DIGOX 250 MCG TABLET	Formulary High Cost Generics	AL1 Up to 64 yrs old
<i>digoxin 125 mcg tablet</i>	Formulary High Cost Generics	
<i>digoxin 250 mcg tablet</i>	Formulary High Cost Generics	AL1 Up to 64 yrs old
<i>digoxin 50 mcg/ml solution</i>	Formulary Brands	NP Non-Preferred Drug
<i>ivabradine hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
CARDIOVASCULAR DRUGS		
ALPHA-ADRENERGIC BLOCKING AGENTS		
<i>doxazosin mesylate</i>	Formulary High Cost Generics	
<i>prazosin hcl</i>	Formulary High Cost Generics	
<i>terazosin hcl</i>	Formulary Low Cost Generics	
BETA-ADRENERGIC BLOCKING AGENTS		
<i>acebutolol hcl</i>	Formulary High Cost Generics	
<i>atenolol</i>	Formulary Low Cost Generics	
<i>atenolol/chlorthalidone</i>	Formulary High Cost Generics	
<i>betaxolol hcl (betaxolol hcl 0.5 % drops, betaxolol hcl 10 mg tablet, betaxolol hcl 20 mg tablet)</i>	Formulary High Cost Generics	
<i>bisoprolol fumarate</i>	Formulary High Cost Generics	
<i>bisoprolol fumarate/hydrochlorothiazide</i>	Formulary Low Cost Generics	
<i>carvedilol</i>	Formulary Low Cost Generics	
<i>labetalol hcl (labetalol hcl 100 mg tablet, labetalol hcl 200 mg tablet, labetalol hcl 300 mg tablet)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>metoprolol succinate</i>	Formulary High Cost Generics	
<i>metoprolol tartrate (metoprolol tartrate 25 mg tablet, metoprolol tartrate 50 mg tablet, metoprolol tartrate 100 mg tablet)</i>	Formulary Low Cost Generics	
<i>metoprolol tartrate/hydrochlorothiazide</i>	Formulary High Cost Generics	
<i>nadolol</i>	Formulary Low Cost Generics	
<i>nebivolol hcl</i>	Formulary High Cost Generics	
<i>propranolol hcl (propranolol hcl 10 mg tablet, propranolol hcl 20 mg tablet, propranolol hcl 20 mg/5 ml solution, propranolol hcl 40 mg tablet, propranolol hcl 40mg/5ml solution, propranolol hcl 60 mg tablet, propranolol hcl 80 mg tablet)</i>	Formulary High Cost Generics	
<i>propranolol hcl (propranolol hcl 60 mg cap sa 24h, propranolol hcl 80 mg cap sa 24h, propranolol hcl 120 mg cap sa 24h, propranolol hcl 160 mg cap sa 24h)</i>	Formulary Low Cost Generics	
<i>propranolol hcl/hydrochlorothiazide</i>	Formulary High Cost Generics	NP Non-Preferred Drug
SORINE	Formulary High Cost Generics	
SOTALOL AF	Formulary High Cost Generics	
<i>sotalol hcl (sotalol hcl 80 mg tablet, sotalol hcl 120 mg tablet, sotalol hcl 160 mg tablet, sotalol hcl 240 mg tablet)</i>	Formulary High Cost Generics	
<i>timolol maleate (timolol maleate 5 mg tablet, timolol maleate 10 mg tablet, timolol maleate 20 mg tablet)</i>	Formulary High Cost Generics	
CARDIOVASCULAR DRUGS, NSAID ANTI-INFL		
<i>colchicine 0.6 mg tablet</i>	Formulary High Cost Generics	
CENTRAL ALPHA-AGONISTS (25:24)		
<i>clonidine</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>clonidine hcl (clonidine hcl 0.1 mg tablet, clonidine hcl 0.2 mg tablet, clonidine hcl 0.3 mg tablet)</i>	Formulary Low Cost Generics	
<i>clonidine hcl 0.1 mg tab er 12h</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>guanfacine hcl (guanfacine hcl 1 mg tablet, guanfacine hcl 2 mg tablet)</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>guanfacine hcl (guanfacine hcl 3 mg tab er 24h, guanfacine hcl 4 mg tab er 24h)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
<i>guanfacine hcl 1 mg tab er 24h</i>	Formulary High Cost Generics	QL 3 TABS / 1 DAY
<i>guanfacine hcl 2 mg tab er 24h</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY
<i>methyldopa</i>	Formulary High Cost Generics	
CENTRAL NERVOUS SYSTEM AGENTS		
AMYOTROPHIC LATERAL SCLEROSIS(ALS) AGENT		
RADICAVA ORS 105 MG/5 ML SUSP	Formulary Brands	QL 70 ML / 28 DAYS PA S Specialty Drug
<i>riluzole</i>	Formulary High Cost Generics	
ANTIMANIC AGENTS		
<i>lithium carbonate (lithium carbonate 150 mg capsule, lithium carbonate 300 mg capsule, lithium carbonate 300 mg tablet, lithium carbonate 300 mg tablet er, lithium carbonate 450 mg tablet er, lithium carbonate 600 mg capsule)</i>	Formulary High Cost Generics	
<i>lithium citrate 8 meq/5 ml solution</i>	Formulary High Cost Generics	
CENTRAL NERVOUS SYSTEM AGENTS, MISC.		
<i>memantine hcl (memantine hcl 2 mg/ml solution, memantine hcl 5 mg tablet, memantine hcl 5 mg-10 mg tab ds pk, memantine hcl 10 mg tablet)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
FIBROMYALGIA AGENTS		
SAVELLA (SAVELLA 12.5 MG TABLET, SAVELLA 25 MG TABLET, SAVELLA 50 MG TABLET, SAVELLA 100 MG TABLET)	Formulary Brands	QL 2 TABS / 1 DAY PA NP Non-Preferred Drug
SAVELLA TITRATION PACK	Formulary Brands	QL 55 TABS / 28 DAYS PA
OPIOID ANTAGONISTS (28:10)		
KLOXXADO	Formulary Brands	
<i>naloxone hcl 4 mg nasal spray (rx)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>naloxone hcl 4 mg spray</i>	Formulary High Cost Generics	
<i>naltrexone hcl</i>	Formulary High Cost Generics	
NARCAN	Formulary Brands	
OPVEE	Formulary Brands	
RIVIVE	Formulary Brands	
VIVITROL	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">NP</div> <div>Non-Preferred Drug</div> </div>
VESICULAR MONOAMINE TRANSPORT2 INHIBITOR		
AUSTEDO (AUSTEDO 9 MG TABLET, AUSTEDO 12 MG TABLET)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 4 TABS / 1 DAY</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO 12MG START TITR(WK1-4)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 70 TABS / 28 DAYS</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO 6 MG TABLET	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 2 TABS / 1 DAY</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO TD TITRATN PK (WK 1-2)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 28 TABS / 28 DAYS</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO XR	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 1 TAB / 1 DAY</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO XR TITR KT(6-12-24 MG)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 42 TABLETS / 28 DAYS</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
AUSTEDO XR TITR(12-18-24-30MG)	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 28 TABS / 28 DAYS</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>
INGREZZA	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL 1 CAP / 1 DAY</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> <div>Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INGREZZA INITIATION PK(TARDIV)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 KIT (28 CAPS) / 365 DAYS</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div> </div>
INGREZZA SPRINKLE	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div>1 CAP / 1 DAY</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div> </div>
tetrabenazine	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div> </div>
CEPHALOSPORIN ANTIBIOTICS		
1ST GENERATION CEPHALOSPORIN ANTIBIOTICS		
<i>cefadroxil (cefadroxil 1 g tablet, cefadroxil 250 mg/5ml susp recon, cefadroxil 500 mg/5ml susp recon)</i>	Formulary Low Cost Generics	
<i>cefadroxil 500 mg capsule</i>	Formulary High Cost Generics	
<i>cephalexin (cephalexin 125 mg/5ml susp recon, cephalexin 250 mg/5ml susp recon)</i>	Formulary High Cost Generics	
<i>cephalexin (cephalexin 250 mg capsule, cephalexin 500 mg capsule)</i>	Formulary Low Cost Generics	
2ND GENERATION CEPHALOSPORIN ANTIBIOTICS		
<i>cefaclor 500 mg capsule</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="display: flex; align-items: center;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> <div>Non-Preferred Drug</div> </div> </div>
<i>cefprozil (cefprozil 125 mg/5ml susp recon, cefprozil 250 mg/5ml susp recon)</i>	Formulary Low Cost Generics	
<i>cefprozil (cefprozil 250 mg tablet, cefprozil 500 mg tablet)</i>	Formulary High Cost Generics	
<i>cefuroxime axetil</i>	Formulary High Cost Generics	
3RD GENERATION CEPHALOSPORIN ANTIBIOTICS		
<i>cefdinir (cefdinir 125 mg/5ml susp recon, cefdinir 250 mg/5ml susp recon)</i>	Formulary High Cost Generics	
<i>cefdinir 300 mg capsule</i>	Formulary Low Cost Generics	
<i>cefixime 400 mg capsule</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>cefepodoxime proxetil (cefepodoxime proxetil 50 mg/5 ml susp recon, cefepodoxime proxetil 100 mg tablet, cefepodoxime proxetil 100 mg/5ml susp recon, cefepodoxime proxetil 200 mg tablet)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
COMPLEMENT INHIBITORS (92:32)		
BRADYKININ RECEPTOR ANTAGONISTS		
<i>icatibant acetate</i>	Formulary High Cost Generics	QL 9 ML / 1 FILL PA S Specialty Drug
CONSTIPATION THERAPY		
CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY
GUANYLATE CYCLASE C (GCC) RECEPT AGONIST		
LINZESS	Formulary Brands	QL 1 CAP / 1 DAY
OPIOID ANTAGONISTS (56:18)		
<i>alvimopan</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
MOVANTI	Formulary Brands	QL 1 TAB / 1 DAY PA NP Non-Preferred Drug
SYMPROIC	Formulary Brands	PA NP Non-Preferred Drug
CYSTIC FIBROSIS (CFTR) MODULATORS		
CYSTIC FIBROSIS (CFTR) CORRECTORS		
ORKAMBI (ORKAMBI 100 MG-125 MG TABLET, ORKAMBI 200 MG-125 MG TABLET)	Formulary Brands	QL 4 TABS / 1 DAY PA S Specialty Drug
ORKAMBI (ORKAMBI 75-94 MG GRANULE PKT, ORKAMBI 100-125 MG GRANULE PKT, ORKAMBI 150-188 MG GRANULE PKT)	Formulary Brands	QL 2 PACKETS / 1 DAY PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMDEKO	Formulary Brands	QL 4 TABS / 1 DAY PA S Specialty Drug
TRIKAFTA (TRIKAFTA 50-25-37.5 MG/75 MG, TRIKAFTA 100-50-75 MG/150 MG)	Formulary Brands	QL 3 TABS / 1 DAY PA S Specialty Drug
TRIKAFTA (TRIKAFTA 80-40-60MG/59.5MG PKT, TRIKAFTA 100-50-75 MG/75MG PKT)	Formulary Brands	QL 2 PACKETS / 1 DAY PA S Specialty Drug
CYSTIC FIBROSIS (CFTR) POTENTIATORS		
KALYDECO (KALYDECO 5.8 MG GRANULES PKT, KALYDECO 13.4 MG GRANULES PKT, KALYDECO 25 MG GRANULES PACKET, KALYDECO 50 MG GRANULES PACKET, KALYDECO 75 MG GRANULES PACKET)	Formulary Brands	QL 2 PACKETS / 1 DAY PA S Specialty Drug
KALYDECO 150 MG TABLET	Formulary Brands	QL 2 TABS / 1 DAY PA S Specialty Drug
DENTAL AGENTS		
NUTRITIONAL SUPPLEMENTS		
<i>fluoride (sodium) (fluoride (sodium) 0.25(0.55) tab chew, fluoride (sodium) 0.5 mg/ml drops, fluoride (sodium) 0.5(1.1)mg tab chew, fluoride (sodium) 1mg(2.2mg) tab chew)</i>	Formulary Low Cost Generics	AL1 Up to 5 yrs old ACA Affordable Care Act
<i>fluoride (sodium) (fluoride (sodium) 1.1 % cream (g), fluoride (sodium) 1.1 % gel (gram))</i>	Formulary Low Cost Generics	
DEPIGMENTING AND PIGMENTING AGENTS		
PIGMENTING AGENTS		
<i>methoxsalen</i>	Formulary Brands	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DEVICES		
1ST TIER UNIFINE PENTIPS	Covered	DS Diabetic Supplies
1ST TIER UNIFINE PENTIPS PLUS	Covered	DS Diabetic Supplies
2-IN-1 LANCET DEVICE	Covered	DS Diabetic Supplies
A.I.R.S. NEBULIZER	Covered	
ACCU-CHEK (ACCU-CHEK AVIVA SOLUTION, ACCU-CHEK MULTICLIX LANCET KIT)	Covered	DS Diabetic Supplies
ACCU-CHEK AVIVA PLUS METER	Covered	QL 1 METER / 365 DAYS DS Diabetic Supplies
ACCU-CHEK FASTCLIX LANCING DEV	Covered	DS Diabetic Supplies
ACCU-CHEK GUIDE CONTROL SOLN	Covered	DS Diabetic Supplies
ACCU-CHEK GUIDE ME GLUCOSE MTR	Covered	QL 1 METER / 365 DAYS DS Diabetic Supplies
ACCU-CHEK GUIDE MONITOR SYSTEM	Covered	QL 1 METER / 365 DAYS DS Diabetic Supplies
ACCU-CHEK SMARTVIEW CONTRL SOL	Covered	DS Diabetic Supplies
ACCU-CHEK SOFTCLIX (ACCU-CHEK SOFTCLIX LANCET KIT, ACCU-CHEK SOFTCLIX LANCETS)	Covered	DS Diabetic Supplies
ACE AEROSOL CLOUD ENHANCER	Covered	
ADJUSTABLE LANCING DEVICE	Covered	DS Diabetic Supplies
ADVOCATE PEN NEEDLE	Covered	DS Diabetic Supplies
ADVOCATE PEN NEEDLES	Covered	DS Diabetic Supplies
ADVOCATE SAFETY LANCET	Covered	DS Diabetic Supplies
AEROCHAMBER MINI	Covered	
AEROCHAMBER MV	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AEROCHAMBER PLUS FLOW-VU (AEROCHAMBER PLUS FLOW-VU, AEROCHAMBER PLUS FLOW-VU LARGE, AEROCHAMBER PLUS FLOW-VU MED, AEROCHAMBER PLUS FLOW-VU SMALL)	Covered	
AEROCHAMBER WITH FLOWSIGNAL	Covered	
AEROCHAMBER Z-STAT PLUS (AEROCHAMBER Z-STAT PLUS LARGE, AEROCHAMBER Z-STAT PLUS W-FLOW, AEROCHAMBER Z- STAT PLUS-MED, AEROCHAMBER Z- STAT PLUS-SMALL)	Covered	
AEROTRACH PLUS	Covered	
AIR FILTER	Covered	
AIRS ADULT AEROSOL MASK	Covered	
ALL FLOW 1000	Covered	
ALL FLOW 3000 KIT	Covered	
ALL FLOW 3000 PFT	Covered	
ALL FLOW 4000	Covered	
ALL FLOW 5000	Covered	
ALL FLOW 6000	Covered	
ALLERGIST TRAY	Covered	
ALLERGIST TRAY SYR-PERM NEEDLE	Covered	
ASSURE ID PEN NEEDLE	Covered	DS Diabetic Supplies
ASSURE LANCE	Covered	DS Diabetic Supplies
AUTOLET LANCING DEVICE	Covered	DS Diabetic Supplies
AUTOSHIELD DUO PEN NEEDLE	Covered	DS Diabetic Supplies
AUTOSOFT 30 INFUSION SET PACK	Covered	DS Diabetic Supplies
AUTOSOFT XC INFUSION SET PACK	Covered	DS Diabetic Supplies
BABY CONVERSION KIT	Covered	
BABY CONVERSION PACK 1	Covered	
BABY CONVERSION PACK 2	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
BD TUBERCULIN 1 ML SYRINGE	Covered	
BREATHERITE	Covered	
BREATHERITE SPACER-ADULT MASK	Covered	
BREATHERITE SPACER-INFANT MASK	Covered	
BREATHERITE SPACER-LG CHLD MSK	Covered	
BREATHERITE SPACER-NEONATE MSK	Covered	
BREATHERITE SPACER-SM CHLD MSK	Covered	
BREATHRITE	Covered	
BUBBLES THE FISH II	Covered	
BULK SYRINGE (BD BULK SYRINGE 1 ML, BD BULK SYRINGE 3 ML, BD BULK SYRINGE 20 ML)	Covered	
BUTTERFLY TOUCH LANCET	Covered	DS Diabetic Supplies
CANNULA	Covered	
CAREFINE PEN NEEDLE	Covered	DS Diabetic Supplies
CARESENS LANCET	Covered	DS Diabetic Supplies
CARESOFT LANCING DEVICE	Covered	DS Diabetic Supplies
CARETOUCH PEN NEEDLE	Covered	DS Diabetic Supplies
CARETOUCH SAFETY LANCETS	Covered	DS Diabetic Supplies
CARETOUCH TWIST LANCET	Covered	DS Diabetic Supplies
CEQR SIMPLICITY	Covered	
CEQR SIMPLICITY INSERTER	Covered	
CHOSEN LANCET	Covered	DS Diabetic Supplies
CHOSEN LANCING DEVICE	Covered	DS Diabetic Supplies
CHOSEN SAFETY LANCET	Covered	DS Diabetic Supplies
CLICKFINE	Covered	DS Diabetic Supplies

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COAGUCHEK	Covered	
COAGUCHEK XS	Covered	
COMFORT EZ	Covered	DS Diabetic Supplies
COMFORT EZ PEN NEEDLE	Covered	DS Diabetic Supplies
COMFORT TOUCH PLUS SAFETY LANC	Covered	DS Diabetic Supplies
COMFORT TOUCH ULT THIN LANCET	Covered	DS Diabetic Supplies
COMP-AIR NEBULIZER COMPRESSOR	Covered	
COMPACT COMPRESSOR NEBULIZER	Covered	
COMPACT ULTRASONIC NEBULIZER	Covered	
DEVILBISS DISPOSABLE NEBULIZER	Covered	
DEVILBISS TRAVELER	Covered	
DEXCOM G6 RECEIVER	Covered	QL 1 RECEIVER / 365 DAYS ST DS Diabetic Supplies
DEXCOM G6 SENSOR	Covered	QL 3 SENSORS / 30 DAYS ST DS Diabetic Supplies
DEXCOM G6 TRANSMITTER	Covered	QL 1 TRANSMITTER / 90 DAYS ST DS Diabetic Supplies
DEXCOM G7 RECEIVER	Covered	QL 1 RECEIVER / 365 DAYS ST DS Diabetic Supplies
DEXCOM G7 SENSOR	Covered	QL 3 SENSORS / 30 DAYS ST DS Diabetic Supplies
DROPLET GENTEEL LANCING DEVICE	Covered	DS Diabetic Supplies

PRODUCT DESCRIPTION		TIER	LIMITS & RESTRICTIONS
DROPLET LANCETS	Covered		DS Diabetic Supplies
DROPLET PEN NEEDLE	Covered		DS Diabetic Supplies
DROPSAFE PEN NEEDLE	Covered		DS Diabetic Supplies
EASIVENT (EASIVENT HOLDING CHAMBER, EASIVENT MASK-LARGE, EASIVENT MASK-MEDIUM, EASIVENT MASK-SMALL)	Covered		
EASY COMFORT PEN NEEDLE	Covered		DS Diabetic Supplies
EASY COMFORT PEN NEEDLES	Covered		DS Diabetic Supplies
EASY GLIDE PEN NEEDLE	Covered		DS Diabetic Supplies
EASY TOUCH LANCING DEVICE	Covered		DS Diabetic Supplies
EASY TOUCH PEN NEEDLE	Covered		DS Diabetic Supplies
EMBRACE LANCING DEVICE	Covered		DS Diabetic Supplies
EMBRACE SAFETY LANCET	Covered		DS Diabetic Supplies
EXEL HYPODERMIC NEEDLE	Covered		
EXEL SYRINGE (EXEL SYRINGE 3 ML, EXEL SYRINGE 20 ML)	Covered		
EXEL TUBERCULIN SYRINGE	Covered		
EXPIRATORY	Covered		
EZ-LETS	Covered		DS Diabetic Supplies
FILTER NEEDLE	Covered		
FILTER PAD	Covered		
FILTER, VALVE SET FOR LL & LC	Covered		
FLOW-EZE	Covered		
FOLLISTIM PEN DEVICE	Covered		
FREESTYLE LIBRE 14 DAY READER	Covered		QL 1 READER / 365 DAYS ST DS Diabetic Supplies
FREESTYLE LIBRE 14 DAY SENSOR	Covered		QL 2 SENSORS / 28 DAYS ST DS Diabetic Supplies

PRODUCT DESCRIPTION		TIER	LIMITS & RESTRICTIONS
FREESTYLE LIBRE 2 READER	Covered		<p>QL 1 READER / 365 DAYS</p> <p>ST</p> <p>DS Diabetic Supplies</p>
FREESTYLE LIBRE 2 SENSOR	Covered		<p>QL 2 SENSORS / 28 DAYS</p> <p>ST</p> <p>DS Diabetic Supplies</p>
FREESTYLE LIBRE 3 PLUS SENSOR	Covered		<p>QL 2 SENSORS / 28 DAYS</p> <p>ST</p> <p>DS Diabetic Supplies</p>
FREESTYLE LIBRE 3 READER	Covered		<p>QL 1 READER / 365 DAYS</p> <p>ST</p> <p>DS Diabetic Supplies</p>
FREESTYLE LIBRE 3 SENSOR	Covered		<p>QL 2 SENSORS / 28 DAYS</p> <p>ST</p> <p>DS Diabetic Supplies</p>
GOJJI LANCETS	Covered		<p>DS Diabetic Supplies</p>
HEALTHWISE PEN NEEDLE	Covered		<p>DS Diabetic Supplies</p>
HEALTHY ACCENTS UNIFINE PENTIP (HEALTHY ACCENTS PENTIP 4MM 32G, HEALTHY ACCENTS PENTIP 5MM 31G, HEALTHY ACCENTS PENTIP 6MM 31G, HEALTHY ACCENTS PENTIP 8MM 31G, HEALTHY ACCENTS PENTIP 12MM 29G)	Covered		<p>DS Diabetic Supplies</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HYPODERMIC NEEDLE (EXEL HYPO NEEDLE 16GX1", HYPO NEEDLE,POLYPROPYL HUB, HYPODERMIC NEEDLE,ALUM HUB, MONOJECT HYPO NEEDLE 22X1, MONOJECT HYPO NEEDLE 22X1.5, MONOJECT HYPO NEEDLE 23X0.5, MONOJECT HYPO NEEDLE 23X1, MONOJECT HYPO NEEDLE 25X1, MONOJECT HYPO NEEDLE 25X1.5, MONOJECT HYPO NEEDLE 25X5/8, MONOJECT HYPO NEEDLE 26X1.5, MONOJECT HYPO NEEDLE 27X0.5, MONOJECT HYPO NEEDLE 30X3/4)	Covered	
ILET INFUSION KIT-INSET	Covered	DS Diabetic Supplies
ILET INFUSION-CONTACT DETACH	Covered	DS Diabetic Supplies
IN-CHECK DIAL	Covered	
INCONTROL PEN NEEDLE	Covered	DS Diabetic Supplies
INNOSPIRE ELEGANCE	Covered	
INPEN (FOR HUMALOG)	Covered	
INPEN (FOR NOVOLOG OR FIASP)	Covered	
INSULIN PEN NEEDLE	Covered	DS Diabetic Supplies
INSUPEN (INSUPEN 30G ULTRAFIN NEEDLE, INSUPEN 31G ULTRAFIN NEEDLE, INSUPEN 32G 6MM PEN NEEDLE, INSUPEN 32G 8MM PEN NEEDLE, INSUPEN PEN NEEDLE 32GX5/32")	Covered	DS Diabetic Supplies
INSUPEN PEN NEEDLE	Covered	DS Diabetic Supplies
INTEGRA NEEDLE	Covered	
INTEGRA SYRINGE	Covered	
IV ADMINISTRATION SET	Covered	
IVENIX PRIMARY ADMINISTRAT SET	Covered	
LANCETS	Covered	DS Diabetic Supplies
LANCING DEVICE	Covered	DS Diabetic Supplies
LC PLUS	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LC SPRINT NEBULIZER	Covered	
LEVER LOCK CANNULA	Covered	
LIFESHIELD BLUNT CANNULA	Covered	
LITE TOUCH (LITE TOUCH 31GX1/4" PEN NEEDLE, LITE TOUCH PEN NEEDLE 29G, LITE TOUCH PEN NEEDLE 31G)	Covered	DS Diabetic Supplies
LITETOUCH	Covered	
LUER-LOK SYRINGE (BD 20 ML SYRINGE, BD LUER-LOK SYRINGE 1 ML, BD LUER-LOK SYRINGE 3 ML)	Covered	
LUERSLIP SYRINGE	Covered	
MASK SET WITH Y-PIECE	Covered	
MAXICOMFORT II PEN NEEDLE	Covered	DS Diabetic Supplies
MAXICOMFORT SAFETY PEN NEEDLE	Covered	DS Diabetic Supplies
MEDTRONIC EXT INFUSION SET	Covered	DS Diabetic Supplies
MICRO THIN LANCET	Covered	DS Diabetic Supplies
MICROAIR MESH NEBULIZER	Covered	
MICROCHAMBER	Covered	
MICRODOT INSULIN PEN NEEDLE	Covered	DS Diabetic Supplies
MICRODOT SAFETY LANCET	Covered	DS Diabetic Supplies
MICROLET	Covered	DS Diabetic Supplies
MICROSPACER	Covered	
MINI ULTRA-THIN II	Covered	DS Diabetic Supplies
MINIMED MIO ADVANCE	Covered	DS Diabetic Supplies
MINIMED QUICK SET	Covered	DS Diabetic Supplies
MINIMED SILHOUETTE	Covered	DS Diabetic Supplies
MOBILE LANCETS	Covered	DS Diabetic Supplies
MONOJECT (MONOJECT SYRINGE 35 ML, MONOJECT SYRINGE 60 ML)	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MONOJECT CONTROL SYRINGE	Covered	
MONOJECT MAGELLAN	Covered	
MONOJECT PHARMACY TRAY	Covered	
MONOJECT SAFETY SYRINGE	Covered	
MONOJECT SMARTIP CANNULA	Covered	
MONOJECT SYRINGE (MONOJECT 3 ML SYRINGE, MONOJECT 6 ML SYRINGE, MONOJECT DISP SYRINGE 20 ML, MONOJECT SYRINGE 3 ML, MONOJECT SYRINGE 6 ML, MONOJECT SYRINGE 12 ML, MONOJECT SYRINGE 20 ML, SYRINGE W-O NDL 3 ML NON-STRL, SYRINGE W-O NDL 6 ML NON-STRL, SYRINGE W-O NEEDLE 60 ML)	Covered	
MONOJECT SYRINGE PHARMACY TRAY	Covered	
MONOJECT TB SAFETY SYRINGE	Covered	
MONOJECT TUBERCULIN SYR 1 ML	Covered	
MONOJECT TUBERCULIN SYRINGE	Covered	
MOUTHPIECE (ADULT DISPOSABLE MOUTHPIECE, MOUTHPIECE, STERILIZABLE, PEDIATRIC MOUTHPIECE)	Covered	
NANO 2ND GEN PEN NEEDLE	Covered	DS Diabetic Supplies
NEEDLE	Covered	
NEEDLES (BD NEEDLES 21GX1", BD NEEDLES 21GX1.5", BD NEEDLES 22GX1", BD NEEDLES 25GX0.875", RELI ON 31G X 1/4" NEEDLES)	Covered	
NOSE CLIP	Covered	
NOVOFINE 32	Covered	DS Diabetic Supplies
NOVOFINE AUTOCOVER	Covered	DS Diabetic Supplies
NOVOFINE PLUS	Covered	DS Diabetic Supplies
NOVOPEN ECHO	Covered	
NOVOTWIST	Covered	DS Diabetic Supplies

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
OMNIPOD 5 (G6/LIBRE 2 PLUS)	Covered	
OMNIPOD 5 G6 INTRO KIT (GEN 5)	Covered	
OMNIPOD 5 G6 PODS (GEN 5)	Covered	
OMNIPOD 5 G6-G7 INTRO KT(GEN5)	Covered	
OMNIPOD 5 G6-G7 PODS (GEN 5)	Covered	
OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	Covered	
OMNIPOD CLASSIC PDM KIT(GEN 3)	Covered	
OMNIPOD CLASSIC PODS (GEN 3)	Covered	
OMNIPOD DASH INTRO KIT (GEN 4)	Covered	
OMNIPOD DASH PDM KIT (GEN 4)	Covered	
OMNIPOD DASH PODS (GEN 4)	Covered	
OMNIPOD GO PODS (OMNIPOD GO 10 UNIT/DAY PODS, OMNIPOD GO 15 UNIT/DAY PODS, OMNIPOD GO 20 UNIT/DAY PODS, OMNIPOD GO 25 UNIT/DAY PODS, OMNIPOD GO 30 UNIT/DAY PODS, OMNIPOD GO 35 UNIT/DAY PODS, OMNIPOD GO 40 UNIT/DAY PODS)	Covered	
ONE WAY MOUTHPIECE	Covered	
ONETOUCH DELICA PLUS LANC DEV	Covered	DS Diabetic Supplies
ONETOUCH DELICA PLUS LANCET	Covered	DS Diabetic Supplies
ONETOUCH DELICA SAFETY LANCET	Covered	DS Diabetic Supplies
ONETOUCH ULTRASOFT 2 LANCET	Covered	DS Diabetic Supplies
OPTICHAMBER	Covered	
OPTICHAMBER DIAMOND (OPTICHAMBER DIAMOND VHC, OPTICHAMBER DIAMOND W-LRG MASK)	Covered	
ORAL SYRINGE	Covered	
PANDA MASK	Covered	
PEDIATRIC MASK	Covered	
PEDIATRIC PANDA MASK	Covered	
PEN NEEDLE	Covered	DS Diabetic Supplies

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PEN NEEDLES	Covered	DS Diabetic Supplies
PENTIPS	Covered	DS Diabetic Supplies
PERFECT POINT SAFETY LANCETS	Covered	DS Diabetic Supplies
PFLEX TRAINER	Covered	
PILLOW MASK	Covered	
PILLOW MASK FOR CHILDREN	Covered	
PIP LANCET	Covered	DS Diabetic Supplies
POCKET CHAMBER	Covered	
PRECISIONGLIDE	Covered	
PREVENT DROPSAFE PEN NEEDLE	Covered	DS Diabetic Supplies
PRO COMFORT PEN NEEDLE	Covered	DS Diabetic Supplies
PRO COMFORT SAFETY LANCET	Covered	DS Diabetic Supplies
PROCHAMBER	Covered	
PRONEB ULTRA II	Covered	
PSV SET	Covered	
PURE COMFORT LANCETS	Covered	DS Diabetic Supplies
PURE COMFORT SAFETY LANCETS	Covered	DS Diabetic Supplies
PUSH BUTTON SAFETY LANCET	Covered	DS Diabetic Supplies
REGULAR BEVEL NEEDLES	Covered	
RELION PEN NEEDLES	Covered	DS Diabetic Supplies
REUSABLE NEBULIZER KIT	Covered	
RUBBER MOUTHPIECE	Covered	
SAFESNAP INSULIN SYRINGE (SAFESNAP INSUL SYRINGE 0.3 ML, SAFESNAP INSUL SYRINGE 0.5 ML)	Covered	DS Diabetic Supplies
SAFETY PEN NEEDLE	Covered	DS Diabetic Supplies
SAFETY SYRINGE W-SHIELD 3 ML	Covered	
SAFETY-LOK 3 ML SYRINGE	Covered	
SAFETY-LOK SAFETY SYRINGE	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SAFETY-LOK SAFETY SYRINGES	Covered	
SHORT BEVEL NEEDLES	Covered	
SIDESTREAM	Covered	
SIDESTREAM MASK	Covered	
SIDESTREAM PEDIATRIC	Covered	
SILICONE MASK (SILICONE MASK-ADULT, SILICONE MASK-INFANT, SILICONE MASK-PEDIATRIC)	Covered	
SINUSTAR (SINUSTAR AEROSOL DELIVERY SYST, SINUSTAR REUSABLE NEBULIZER)	Covered	
SOFT TOUCH	Covered	DS Diabetic Supplies
SOLUTION TRANSFER DEVICE	Covered	
SPECIALTY USE NEEDLES	Covered	
STERILE LANCETS	Covered	DS Diabetic Supplies
SUPER THIN LANCET	Covered	DS Diabetic Supplies
SURE COMFORT (SURE COMFORT 30G PEN NEEDLE, SURE COMFORT PEN NDL 29GX1/2")	Covered	DS Diabetic Supplies
SURE COMFORT PEN NEEDLE	Covered	DS Diabetic Supplies
SURE-FINE PEN NEEDLES	Covered	DS Diabetic Supplies
SYRINGE (BD 3 ML SYRINGE, BD 50-60 ML SYRINGE, BD SYRINGE 3 ML, BD SYRINGE 60 ML, BD SYRINGE WITH CANNULA, SYRINGE 35 ML)	Covered	
SYRINGE BULK	Covered	
SYRINGE CATHETER TIP	Covered	
SYRINGE CATHETER TIP NON-STER	Covered	
SYRINGE LUER-LOK NON-STERILE	Covered	
SYRINGE LUER-LOK STERILE	Covered	
SYRINGE SLIP TIP NON-STERILE	Covered	
SYRINGE WITH NEEDLE	Covered	DS Diabetic Supplies

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYRINGE WITHOUT NEEDLE (SYRINGE 12ML,PHARM TRAY PK, SYRINGE 20ML, PHARM TRAY PK, SYRINGE 35ML, PHARM TRAY PK, SYRINGE 60ML, PHARM TRAY PK, SYRINGE W-O NDL 12 ML-NON-STRL, SYRINGE W-O NDL 20 ML-NON-STRL, SYRINGE W-O NDL 35 ML-NON-STRL, SYRINGE W-O NEEDLE 140 ML)	Covered	
SYRINGE-LUER TIP CAP	Covered	
T:SLIM X2	Covered	DS Diabetic Supplies
TANDEM MOBI AUTOSOFT 30 SUPPLY	Covered	DS Diabetic Supplies
TANDEM MOBI AUTOSOFT XC SUPPLY	Covered	DS Diabetic Supplies
TANDEM MOBI CARTRIDGE	Covered	DS Diabetic Supplies
TANDEM MOBI TRUSTEEL SUPPLY	Covered	DS Diabetic Supplies
TECHLITE LANCETS	Covered	DS Diabetic Supplies
TECHLITE PEN NEEDLE	Covered	DS Diabetic Supplies
TEMPO REFILL KIT	Covered	DS Diabetic Supplies
TEMPO REFILL KIT (WITH GAUZE)	Covered	DS Diabetic Supplies
TEMPO SMART BUTTON	Covered	DS Diabetic Supplies
TEMPO WELCOME KIT	Covered	DS Diabetic Supplies
TERUMO SURGUARD2	Covered	
THIN LANCET	Covered	DS Diabetic Supplies
THIN LANCETS	Covered	DS Diabetic Supplies
THIN WALL NEEDLES	Covered	
THRESHOLD IMT	Covered	
THRESHOLD PEP	Covered	
TOPCARE CLICKFINE	Covered	DS Diabetic Supplies
TRANSFER SET	Covered	
TREK S COMBO PACK	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TREK S COMPACT COMPRESSOR	Covered	
TREK S PORTABLE PWR KIT	Covered	
TRUE COMFORT LANCET	Covered	DS Diabetic Supplies
TRUE COMFORT PEN NEEDLE	Covered	DS Diabetic Supplies
TRUE COMFORT SAFETY LANCET	Covered	DS Diabetic Supplies
TRUEPLUS PEN NEEDLE	Covered	DS Diabetic Supplies
TRUSTEEL INFUSION SET PACK	Covered	DS Diabetic Supplies
TWIST TOP LANCET	Covered	DS Diabetic Supplies
ULTICARE PEN NEEDLE	Covered	DS Diabetic Supplies
ULTILET PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA FLO PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA THIN LANCET	Covered	DS Diabetic Supplies
ULTRA-FINE MICRO PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA-FINE MINI PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA-FINE NANO PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA-FINE ORIGINAL PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA-FINE SHORT PEN NEEDLE	Covered	DS Diabetic Supplies
ULTRA-THIN II (ULTRA-THIN II PEN NDL 29GX1/2", ULTRA-THIN II PEN NDL 31GX5/16)	Covered	DS Diabetic Supplies
ULTRACARE PEN NEEDLE	Covered	DS Diabetic Supplies
UNIFINE PENTIPS	Covered	DS Diabetic Supplies
UNIFINE PENTIPS PLUS	Covered	DS Diabetic Supplies
UNILET LANCETS	Covered	DS Diabetic Supplies
UNIVERSAL SYRINGE TIP ADAPTOR	Covered	
V-GO 20	Covered	
V-GO 30	Covered	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
V-GO 40	Covered	
VERIFINE PEN NEEDLE	Covered	DS Diabetic Supplies
VERIFINE SAFETY LANCET MINI	Covered	DS Diabetic Supplies
VERIFINE UNIVERSAL LANCET	Covered	DS Diabetic Supplies
VIOS AEROSOL DELIVERY SYSTEM	Covered	
VIVAGUARD LANCET	Covered	DS Diabetic Supplies
VIVAGUARD LANCING DEVICE	Covered	DS Diabetic Supplies
VIVAGUARD SAFETY LANCET	Covered	DS Diabetic Supplies
VORTEX	Covered	
VORTEX HOLDING CHAMBER-CHILD	Covered	
VORTEX HOLDING CHAMBER-TODDLER	Covered	
WINDMILL TRAINER	Covered	
YALE NEEDLES	Covered	
DIAGNOSTIC AGENTS		
ADRENOCORTICAL INSUFFICIENCY		
ACTHAR	Formulary Brands	PA S Specialty Drug
CORTROPHIN	Formulary Brands	PA S Specialty Drug
CARDIAC FUNCTION		
<i>dipyridamole</i>	Formulary High Cost Generics	
DIABETES MELLITUS		
ACCU-CHEK AVIVA PLUS TEST STRP	Covered	QL 10 STRIPS / 1 DAY DS Diabetic Supplies
ACCU-CHEK GUIDE TEST STRIP	Covered	QL 10 STRIPS / 1 DAY DS Diabetic Supplies
ACCU-CHEK SMARTVIEW TEST STRIP	Covered	QL 10 STRIPS / 1 DAY DS Diabetic Supplies

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
DISEASE-MODIFYING ANTIRHEUMATIC DRUGS		
DISEASE-MODIFYING ANTIRHEUMAT DRUGS MISC		
ORENCIA (ORENCIA 50 MG/0.4 ML SYRINGE, ORENCIA 87.5 MG/0.7 ML SYRINGE, ORENCIA 125 MG/ML SYRINGE)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 4 SYRINGES / 28 DAYS Specialty Drug
ORENCIA CLICKJECT	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 4 ML / 28 DAYS Specialty Drug
MONOCARBOXYLIC ACID AMIDE AGENTS		
<i>leflunomide</i>	Formulary High Cost Generics	
DIURETICS		
LOOP DIURETICS (40:28)		
<i>bumetanide (bumetanide 0.5 mg tablet, bumetanide 1 mg tablet, bumetanide 2 mg tablet)</i>	Formulary High Cost Generics	
<i>ethacrynic acid</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #006699; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> Non-Preferred Drug
<i>furosemide (furosemide 10 mg/ml solution, furosemide 20 mg tablet, furosemide 40 mg tablet, furosemide 40mg/5ml solution, furosemide 80 mg tablet)</i>	Formulary Low Cost Generics	
<i>torseamide</i>	Formulary High Cost Generics	
POTASSIUM-SPARING DIURETICS		
<i>amiloride hcl</i>	Formulary High Cost Generics	
<i>amiloride hcl/hydrochlorothiazide</i>	Formulary High Cost Generics	
<i>triamterene/hydrochlorothiazide</i>	Formulary Low Cost Generics	
THIAZIDE DIURETICS		
DIURIL	Formulary Brands	
<i>hydrochlorothiazide</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone</i>	Formulary High Cost Generics	
<i>indapamide</i>	Formulary High Cost Generics	
<i>metolazone</i>	Formulary High Cost Generics	
DOPAMINE RECEPTOR AGONISTS		
ERGOT-DERIV. DOPAMINE RECEPTOR AGONISTS		
<i>bromocriptine mesylate</i>	Formulary High Cost Generics	
<i>cabergoline</i>	Formulary High Cost Generics	
CYCLOSET	Formulary Brands	PA
NONERGOT-DERIV.DOPAMINE RECEPTOR AGONIST		
KYNMOBI	Formulary Brands	PA S Specialty Drug
NEUPRO	Formulary Brands	PA
<i>pramipexole di-hcl (pramipexole di-hcl 0.125 mg tablet, pramipexole di-hcl 0.25 mg tablet, pramipexole di-hcl 0.375 mg tab er 24h, pramipexole di-hcl 0.5 mg tablet, pramipexole di-hcl 0.75 mg tab er 24h, pramipexole di-hcl 0.75 mg tablet, pramipexole di-hcl 1 mg tablet, pramipexole di-hcl 1.5 mg tab er 24h, pramipexole di-hcl 1.5 mg tablet, pramipexole di-hcl 2.25 mg tab er 24h, pramipexole di-hcl 3 mg tab er 24h, pramipexole di-hcl 3.75 mg tab er 24h, pramipexole di-hcl 4.5 mg tab er 24h)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>ropinirole hcl (ropinirole hcl 0.25 mg tablet, ropinirole hcl 0.5 mg tablet, ropinirole hcl 1 mg tablet, ropinirole hcl 2 mg tab er 24h, ropinirole hcl 2 mg tablet, ropinirole hcl 3 mg tablet, ropinirole hcl 4 mg tab er 24h, ropinirole hcl 4 mg tablet, ropinirole hcl 5 mg tablet, ropinirole hcl 6 mg tab er 24h, ropinirole hcl 8 mg tab er 24h, ropinirole hcl 12 mg tab er 24h)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ELECTROLYTIC, CALORIC, AND WATER BALANCE		
ALKALINIZING AGENTS		
<i>potassium citrate (potassium citrate 5 meq tablet er, potassium citrate 10 meq tablet er, potassium citrate 15 meq tablet er)</i>	Formulary High Cost Generics	
AMMONIA DETOXICANTS		
<i>carglumic acid</i>	Formulary High Cost Generics	PA S Specialty Drug
CONSTULOSE	Formulary High Cost Generics	
ENULOSE	Formulary High Cost Generics	
GENERLAC	Formulary High Cost Generics	
<i>lactulose (lactulose 10 g/15 ml solution, lactulose 20 g/30 ml solution)</i>	Formulary High Cost Generics	
<i>sodium phenylbutyrate 0.94 g/g powder</i>	Formulary High Cost Generics	PA S Specialty Drug
CALORIC AGENTS		
DOJOLVI	Formulary Brands	PA S Specialty Drug
GLYTACTIN 20PE BETTERMILK LITE	Formulary Brands	
LANAFLEX	Formulary Brands	
LOPHLEX	Formulary Brands	
MSUD EXPRESS15	Formulary Brands	
PERIFLEX LQ PKU	Formulary Brands	
PHENEX-1	Formulary Brands	
PHENEX-2	Formulary Brands	
PHENYL-FREE 2	Formulary Brands	
PHENYLADE (PHENYLADE AMINO ACID POWDER, PHENYLADE DRINK MIX POWDER)	Formulary Brands	
PHLEXY-10 DRINK MIX POWDER	Formulary Brands	
PKU COOLER 10	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PKU COOLER 15	Formulary Brands	
PKU COOLER 20	Formulary Brands	
PKU EXPRESS15	Formulary Brands	
VILACTIN AA PLUS 20 PE	Formulary Brands	
XPHE MAXAMUM	Formulary Brands	
IRRIGATING SOLUTIONS		
0.9 % sodium chloride 0.9 % syringe	Covered	
RENACIDIN	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>
<i>sodium chloride 0.9 % (flush) 0.9 % syringe</i>	Covered	
<i>sodium chloride for inhalation (sodium chloride for inhalation 0.9 % vial-neb, sodium chloride for inhalation 3 % vial-neb, sodium chloride for inhalation 7 % vial-neb, sodium chloride for inhalation 10 % vial-neb)</i>	Covered	
<i>sodium chloride irrigating solution</i>	Formulary High Cost Generics	
REPLACEMENT PREPARATIONS		
KLOR-CON M10	Formulary High Cost Generics	
KLOR-CON M15	Formulary High Cost Generics	
KLOR-CON M20	Formulary High Cost Generics	
<i>potassium chloride (potassium chloride 8 meq capsule er, potassium chloride 8 meq tablet er, potassium chloride 10 meq capsule er, potassium chloride 10 meq tab er prt, potassium chloride 10 meq tablet er, potassium chloride 15 meq tab er prt, potassium chloride 15 meq tablet er, potassium chloride 20 meq packet, potassium chloride 20 meq tab er prt, potassium chloride 20 meq tablet er, potassium chloride 20meq/15ml liquid, potassium chloride 40meq/15ml liquid)</i>	Formulary High Cost Generics	
URICOSURIC AGENTS		
<i>probenecid</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>probenecid/colchicine</i>	Formulary High Cost Generics	
EMOLLIENTS, DEMULCENTS, AND PROTECTANTS		
BASIC LOTIONS AND LINIMENTS		
<i>ammonium lactate 12 % lotion</i>	Formulary High Cost Generics	
<i>ammonium lactate 12% lotion (rx)</i>	Formulary High Cost Generics	
BASIC OINTMENTS AND PROTECTANTS		
<i>ammonium lactate 12 % cream (g)</i>	Formulary High Cost Generics	
<i>ammonium lactate 12% cream (rx)</i>	Formulary High Cost Generics	
<i>calcipotriene (calcipotriene 0.005 % cream (g), calcipotriene 0.005 % oint. (g), calcipotriene 0.005 % solution)</i>	Formulary High Cost Generics	QL 120 GM / 30 DAYS
SANTYL	Formulary Brands	PA NP Non-Preferred Drug
ENZYMES		
ENZYME COFACTORS/CHAPERONES		
GALAFOLD	Formulary Brands	QL 14 CAPS / 28 DAYS PA S Specialty Drug
<i>sapropterin dihydrochloride</i>	Formulary High Cost Generics	PA S Specialty Drug
ENZYME INHIBITORS		
CERDELGA	Formulary Brands	PA S Specialty Drug
<i>miglustat</i>	Formulary High Cost Generics	PA S Specialty Drug
ZOKINVY	Formulary Brands	PA S Specialty Drug
REVCIVI	Formulary Brands	PA S Specialty Drug
STRENSIQ	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SUCRAID	Formulary Brands	PA S Specialty Drug
ESTROGENS AND ANTIESTROGENS		
ESTROGEN AGONIST-ANTAGONISTS		
CLOMID	Formulary Brands	INF Infertility
<i>clomiphene citrate</i>	Formulary Brands	INF Infertility
OSPHENA	Formulary Brands	PA
<i>raloxifene hcl</i>	Formulary High Cost Generics	ACA - PA Affordable Care Act with PA
SOLTAMOX	Formulary Brands	PA NP Non-Preferred Drug OH OncoHealth
<i>tamoxifen citrate</i>	Formulary High Cost Generics	ACA - PA Affordable Care Act with PA OH OncoHealth
<i>toremifene citrate</i>	Formulary High Cost Generics	PA OH OncoHealth
ESTROGENS		
AMABELZ	Formulary High Cost Generics	
BIJUVA	Formulary Brands	PA NP Non-Preferred Drug
CLIMARA PRO	Formulary Brands	
COMBIPATCH	Formulary Brands	
DEPO-ESTRADIOL	Formulary Brands	
DOTTI	Formulary High Cost Generics	
DUAVEE	Formulary Brands	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>estradiol (estradiol 0.01 % cream/appl, estradiol 0.05mg/24h patch tds, estradiol 0.05mg/24h patch tdw, estradiol 0.06mg/24h patch tdw, estradiol 0.1mg/24hr patch tds, estradiol 0.1mg/24hr patch tdw, estradiol 10 mcg tablet, estradiol .025mg/24h patch tds, estradiol .025mg/24h patch tdw, estradiol .0375mg/24 patch tds, estradiol .0375mg/24 patch tdw, estradiol .075mg/24h patch tds, estradiol .075mg/24h patch tdw)</i>	Formulary High Cost Generics	
<i>estradiol (estradiol 0.5 mg tablet, estradiol 1 mg tablet, estradiol 2 mg tablet)</i>	Formulary Low Cost Generics	
<i>estradiol valerate</i>	Formulary High Cost Generics	
<i>estradiol/norethindrone acetate</i>	Formulary High Cost Generics	
FYAVOLV	Formulary High Cost Generics	
JINTELI	Formulary High Cost Generics	
LYLLANA	Formulary High Cost Generics	
MIMVEY	Formulary High Cost Generics	
<i>norethindrone acetate-ethinyl estradiol (norethindrone ac-eth estradiol 0.5mg-2.5 tablet, norethindrone ac-eth estradiol 1mg-5mcg tablet)</i>	Formulary High Cost Generics	
YUVAFEM	Formulary High Cost Generics	
EYE, EAR, NOSE AND THROAT (EENT) PREPS.		
ANTI-INFLAMMATORY AGENTS (EENT)		
<i>cyclosporine 0.05 % dropperette</i>	Formulary High Cost Generics	
XIIDRA	Formulary Brands	
ANTIALLERGIC AGENTS		
ALOMIDE	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>
<i>azelastine hcl</i>	Formulary High Cost Generics	
<i>epinastine hcl</i>	Formulary High Cost Generics	
<i>olopatadine hcl (olopatadine hcl 0.1 % drops, olopatadine hcl 0.6 % spray/pump)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>olopatadine hcl 0.1% eye drop (rx)</i>	Formulary High Cost Generics	
ZERVIATE	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>
EENT DRUGS, MISCELLANEOUS		
<i>ipratropium bromide (ipratropium bromide 21 mcg spray, ipratropium bromide 42 mcg spray)</i>	Formulary High Cost Generics	
LOCAL ANESTHETICS (EENT)		
GLYDO	Formulary High Cost Generics	
<i>lidocaine hcl (lidocaine hcl 2 % jel/pf app, lidocaine hcl 2 % jelly(ml), lidocaine hcl 2 % solution, lidocaine hcl 40 mg/ml solution)</i>	Formulary High Cost Generics	
MACULAR DEGENERATION AGENTS		
CYSTADROPS	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #483D8B; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">QL</div> 5 ML / RX </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8B4513; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #8B0000; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">S</div> Specialty Drug </div>
CYSTARAN	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #483D8B; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">QL</div> 15 ML / RX </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8B4513; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #8B0000; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">S</div> Specialty Drug </div>
MYDRIATICS		
<i>atropine sulfate (atropine sulfate 1 % drops, atropine sulfate 1 % oint. (g))</i>	Formulary High Cost Generics	
<i>cyclopentolate hcl 1 % drops</i>	Formulary High Cost Generics	
<i>homatropine hbr</i>	Formulary High Cost Generics	
VASOCONSTRICTORS		
<i>phenylephrine hcl (phenylephrine hcl 2.5 % drops, phenylephrine hcl 10 % drops)</i>	Formulary High Cost Generics	
FIRST GENERATION ANTIHISTAMINES		
ETHANOLAMINE DERIVATIVES		
<i>clemastine fumarate 2.68 mg tablet</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; border-radius: 5px; padding: 2px 5px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FIRST GEN. ANTIHIST. DERIVATIVES, MISC.		
<i>cyproheptadine hcl</i>	Formulary High Cost Generics	
PHENOTHIAZINE DERIVATIVES		
<i>promethazine hcl (promethazine hcl 12.5 mg supp.rect, promethazine hcl 12.5 mg tablet, promethazine hcl 25 mg supp.rect, promethazine hcl 25 mg tablet, promethazine hcl 50 mg supp.rect, promethazine hcl 50 mg tablet)</i>	Formulary High Cost Generics	
<i>promethazine hcl 6.25mg/5ml syrup</i>	Formulary Low Cost Generics	
PROMETHEGAN	Formulary High Cost Generics	
GASTROINTESTINAL DRUGS		
ANTI-INFLAMMATORY AGENTS (GI DRUGS)		
<i>alosetron hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>balsalazide disodium</i>	Formulary High Cost Generics	
DIPENTUM	Formulary Brands	PA NP Non-Preferred Drug
<i>mesalamine (mesalamine 0.375g cap er 24h, mesalamine 1.2 g tablet dr, mesalamine 4 g/60 ml enema, mesalamine 400 mg cap(drtab), mesalamine 800 mg tablet dr, mesalamine 1000 mg supp.rect)</i>	Formulary High Cost Generics	
ANTIDIARRHEA AGENTS		
<i>diphenoxylate hcl/atropine 2.5-.025/5 liquid</i>	Formulary High Cost Generics	QL 40 ML / 1 DAY
<i>diphenoxylate hcl/atropine 2.5-.025mg tablet</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY
<i>loperamide hcl 2 mg capsule</i>	Formulary High Cost Generics	
XERMELO	Formulary Brands	PA OH OncoHealth S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
CATHARTICS AND LAXATIVES		
GAVILYTE-C	Formulary Low Cost Generics	ACA Affordable Care Act
GAVILYTE-G	Formulary Low Cost Generics	ACA Affordable Care Act
GAVILYTE-N	Formulary High Cost Generics	ACA Affordable Care Act
<i>peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride</i>	Formulary Low Cost Generics	ACA Affordable Care Act
<i>peg 3350/sodium sulfate/sod chloride/kcl/ascorbate sod/vit c</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>sodium chloride/sodium bicarbonate/potassium chloride/peg</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>sodium sulfate/potassium sulfate/magnesium sulfate</i>	Formulary High Cost Generics	ACA Affordable Care Act
SUFLAVE	Formulary Brands	NP Non-Preferred Drug
CHOLELITHOLYTIC AGENTS		
CHOLBAM	Formulary Brands	PA S Specialty Drug
<i>ursodiol (ursodiol 250 mg tablet, ursodiol 300 mg capsule, ursodiol 500 mg tablet)</i>	Formulary High Cost Generics	
DIGESTANTS		
CREON	Formulary Brands	
ZENPEP	Formulary Brands	
GI DRUGS, MISCELLANEOUS		
<i>dronabinol (dronabinol 2.5 mg capsule, dronabinol 5 mg capsule)</i>	Formulary High Cost Generics	OH OncoHealth
<i>dronabinol 10 mg capsule</i>	Formulary Low Cost Generics	OH OncoHealth
VOWST	Formulary Brands	QL 12 CAPS / 3 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROKINETIC AGENTS		
<i>metoclopramide hcl (metoclopramide hcl 5 mg tablet, metoclopramide hcl 5 mg/5 ml solution, metoclopramide hcl 10 mg tablet, metoclopramide hcl 10 mg/10ml solution)</i>	Formulary Low Cost Generics	
GENITOURINARY SMOOTH MUSCLE RELAXANTS		
ANTIMUSCARINICS		
<i>darifenacin hydrobromide</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>
<i>flavoxate hcl</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">NP</div> Non-Preferred Drug </div>
<i>oxybutynin chloride (oxybutynin chloride 5 mg tab er 24, oxybutynin chloride 5 mg/5 ml syrup, oxybutynin chloride 10 mg tab er 24, oxybutynin chloride 15 mg tab er 24)</i>	Formulary High Cost Generics	
<i>oxybutynin chloride 5 mg tablet</i>	Formulary Low Cost Generics	
<i>solifenacin succinate</i>	Formulary High Cost Generics	
<i>tolterodine tartrate (tolterodine tartrate 1 mg tablet, tolterodine tartrate 2 mg cap er 24h, tolterodine tartrate 2 mg tablet, tolterodine tartrate 4 mg cap er 24h)</i>	Formulary High Cost Generics	
<i>tropium chloride 20 mg tablet</i>	Formulary Low Cost Generics	
GOLD COMPOUNDS		
RIDAURA	Formulary Brands	
GONADOTROPINS AND ANTIGONADOTROPINS		
ANTIGONADTROPINS		
<i>cetorelix acetate</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">INF</div> Infertility </div>
FYREMADEL	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">INF</div> Infertility </div>
<i>ganirelix acetate</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">INF</div> Infertility </div>
MYFEMBREE	Formulary Brands	<div style="display: flex; flex-direction: column; align-items: flex-end;"> <div style="background-color: #6A329F; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 5px;">QL</div> 28 TABS / 28 DAYS <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-bottom: 5px;">PA</div> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">S</div> Specialty Drug </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ORGOVYX	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">ONC</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> Oncology OncoHealth Specialty Drug
ORIAHNN	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #4B0082; color: white; padding: 2px;">QL</div> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> 2 CAPS / 1 DAY Specialty Drug
ORILISSA 150 MG TABLET	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #4B0082; color: white; padding: 2px;">QL</div> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> 1 TAB / 1 DAY Specialty Drug
ORILISSA 200 MG TABLET	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #4B0082; color: white; padding: 2px;">QL</div> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> 56 TABS / 28 DAYS Specialty Drug
GONADOTROPINS		
<i>chorionic gonadotropin, human 10000 unit vial</i>	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px;">INF</div> </div> Infertility
<i>chorionic gonadotropin, human 6000 unit vial</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px;">INF</div> </div> Infertility
ELIGARD	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> OncoHealth Specialty Drug
FOLLISTIM AQ	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px;">INF</div> </div> Infertility
<i>leuprolide acetate (leuprolide acetate 1 mg/0.2ml vial, leuprolide acetate 22.5 mg vial)</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> OncoHealth Specialty Drug
<i>leuprolide acetate 1 mg/0.2ml kit</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px;">INF</div> </div> Infertility
LUPRON DEPOT	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> OncoHealth Specialty Drug
LUPRON DEPOT-PED	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> </div> OncoHealth Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MENOPUR	Formulary Brands	INF Infertility
NOVAREL	Formulary Brands	INF Infertility
OVIDREL	Formulary Brands	INF Infertility
PREGNYL	Formulary Brands	INF Infertility
HCV ANTIVIRALS		
HCV POLYMERASE INHIBITOR ANTIVIRALS		
EPCLUSA (EPCLUSA 150-37.5 MG PELLET PKT, EPCLUSA 200 MG-50 MG TABLET, EPCLUSA 200-50 MG PELLET PACK)	Formulary Brands	PA S Specialty Drug
HARVONI (HARVONI 33.75-150 MG PELLET PK, HARVONI 45-200 MG PELLET PACKT, HARVONI 45-200 MG TABLET)	Formulary Brands	PA S Specialty Drug
<i>ledipasvir/sofosbuvir</i>	Formulary High Cost Generics	PA S Specialty Drug
<i>sofosbuvir/velpatasvir</i>	Formulary High Cost Generics	PA S Specialty Drug
SOVALDI (SOVALDI 150 MG PELLET PACKET, SOVALDI 200 MG PELLET PACKET, SOVALDI 200 MG TABLET)	Formulary Brands	PA S Specialty Drug
VOSEVI	Formulary Brands	PA S Specialty Drug
HCV PROTEASE INHIBITOR ANTIVIRALS		
MAVYRET	Formulary Brands	PA S Specialty Drug
HEAVY METAL ANTAGONISTS		
CHEMET	Formulary Brands	
D-PENAMINE	Formulary High Cost Generics	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>deferiasirox (deferiasirox 90 mg tablet, deferiasirox 125 mg tab disper, deferiasirox 180 mg tablet, deferiasirox 250 mg tab disper, deferiasirox 360 mg tablet, deferiasirox 500 mg tab disper)</i>	Formulary High Cost Generics	PA TD Trial Drug S Specialty Drug
<i>deferiprone (deferiprone 500 mg tablet, deferiprone 1000 mg tablet)</i>	Formulary High Cost Generics	PA S Specialty Drug
FERRIPROX 100 MG/ML SOLUTION	Formulary Brands	PA S Specialty Drug
<i>penicillamine 250 mg tablet</i>	Formulary High Cost Generics	PA S Specialty Drug
HORMONES AND SYNTHETIC SUBSTITUTES		
ADRENALS		
ARNUITY ELLIPTA	Formulary Brands	
ASMANEX	Formulary Brands	
ASMANEX HFA	Formulary Brands	
<i>budesonide (budesonide 0.25mg/2ml ampul-neb, budesonide 0.5 mg/2ml ampul-neb, budesonide 1 mg/2 ml ampul-neb, budesonide 3 mg capdr - er)</i>	Formulary High Cost Generics	
<i>dexamethasone (dexamethasone 0.5 mg tablet, dexamethasone 0.75 mg tablet, dexamethasone 1 mg tablet, dexamethasone 1.5 mg tablet, dexamethasone 4 mg tablet, dexamethasone 6 mg tablet)</i>	Formulary Low Cost Generics	
<i>dexamethasone (dexamethasone 0.5 mg/5ml elixir, dexamethasone 0.5 mg/5ml solution, dexamethasone 2 mg tablet)</i>	Formulary High Cost Generics	
DEXAMETHASONE INTENSOL	Formulary Brands	NP Non-Preferred Drug
<i>dexamethasone sodium phosp/pf 10 mg/ml vial</i>	Formulary High Cost Generics	
<i>dexamethasone sodium phosp/pf 4 mg/ml vial</i>	Formulary Low Cost Generics	
<i>dexamethasone sodium phosphate 10 mg/ml vial</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>dexamethasone sodium phosphate 4 mg/ml vial</i>	Formulary Low Cost Generics	
<i>fludrocortisone acetate</i>	Formulary High Cost Generics	
<i>fluticasone propionate (fluticasone propionate 44 mcg aer w/adap, fluticasone propionate 50 mcg blst w/dev, fluticasone propionate 100 mcg blst w/dev, fluticasone propionate 110 mcg aer w/adap, fluticasone propionate 220 mcg aer w/adap, fluticasone propionate 250 mcg blst w/dev)</i>	Formulary High Cost Generics	
<i>hydrocortisone (hydrocortisone 5 mg tablet, hydrocortisone 10 mg tablet, hydrocortisone 20 mg tablet)</i>	Formulary High Cost Generics	
ISTURISA	Formulary Brands	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">S</div> Specialty Drug </div>
MEDROL 2 MG TABLET	Formulary Brands	
<i>methylprednisolone</i>	Formulary High Cost Generics	
<i>prednisolone</i>	Formulary Low Cost Generics	
<i>prednisolone sodium phosphate (prednisolone sodium phosphate 5 mg/5 ml solution, prednisolone sodium phosphate 15 mg/5 ml solution, prednisolone sodium phosphate 25 mg/5 ml solution)</i>	Formulary Low Cost Generics	
<i>prednisone (prednisone 1 mg tablet, prednisone 2.5 mg tablet, prednisone 5 mg tab ds pk, prednisone 5 mg tablet, prednisone 10 mg tab ds pk, prednisone 10 mg tablet, prednisone 20 mg tablet, prednisone 50 mg tablet)</i>	Formulary Low Cost Generics	
<i>prednisone 5 mg/5 ml solution</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> Non-Preferred Drug </div>
PREDNISONE INTENSOL	Formulary Brands	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> Non-Preferred Drug </div>
PULMICORT FLEXHALER	Formulary Brands	<div style="display: flex; align-items: center; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> Non-Preferred Drug </div>
QVAR REDIHALER	Formulary Brands	
SOLU-CORTEF (SOLU-CORTEF 100 MG ACT-O-VIAL, SOLU-CORTEF 100 MG VIAL, SOLU-CORTEF 250 MG ACT-O-VIAL, SOLU-CORTEF 500 MG ACT-O-VIAL)	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANDROGENS		
<i>danazol</i>	Formulary High Cost Generics	
<i>methyltestosterone</i>	Formulary High Cost Generics	QL 5 CAPS / 1 DAY PA NP Non-Preferred Drug
<i>oxandrolone</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>testosterone (testosterone 1.25g-1.62 gel packet, testosterone 2.5g-1.62% gel packet, testosterone 10 mg (2%) gel md pmp, testosterone 12.5/1.25g gel md pmp, testosterone 20.25/1.25 gel md pmp, testosterone 25mg(1%) gel packet, testosterone 50 mg (1%) gel (gram), testosterone 50 mg (1%) gel packet)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>testosterone cypionate (testosterone cypionate 100 mg/ml vial, testosterone cypionate 200 mg/ml vial)</i>	Formulary High Cost Generics	PA
<i>testosterone enanthate 200 mg/ml vial</i>	Formulary High Cost Generics	PA
CONTRACEPTIVES		
AFIRMELLE	Formulary High Cost Generics	ACA Affordable Care Act
AFTER PILL	Formulary High Cost Generics	QL 3 TABS / RX ACA Affordable Care Act
ALTAVERA	Formulary High Cost Generics	ACA Affordable Care Act
ALYACEN	Formulary High Cost Generics	ACA Affordable Care Act
AMETHIA	Formulary High Cost Generics	ACA Affordable Care Act
AMETHYST	Formulary High Cost Generics	ACA Affordable Care Act
APRI	Formulary High Cost Generics	ACA Affordable Care Act
ARANELLE	Formulary High Cost Generics	ACA Affordable Care Act
ASHLYNA	Formulary High Cost Generics	ACA Affordable Care Act
AUBRA	Formulary High Cost Generics	ACA Affordable Care Act
AUBRA EQ	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
AUROVELA	Formulary High Cost Generics	ACA Affordable Care Act
AUROVELA 24 FE	Formulary High Cost Generics	ACA Affordable Care Act
AUROVELA FE	Formulary High Cost Generics	ACA Affordable Care Act
AVIANE	Formulary High Cost Generics	ACA Affordable Care Act
AYUNA	Formulary High Cost Generics	ACA Affordable Care Act
AZURETTE	Formulary High Cost Generics	ACA Affordable Care Act
BALZIVA	Formulary High Cost Generics	ACA Affordable Care Act
BLISOVI 24 FE	Formulary High Cost Generics	ACA Affordable Care Act
BLISOVI FE	Formulary High Cost Generics	ACA Affordable Care Act
BRIELLYN	Formulary High Cost Generics	ACA Affordable Care Act
CAMILA	Formulary High Cost Generics	ACA Affordable Care Act
CAMRESE	Formulary High Cost Generics	ACA Affordable Care Act
CAMRESE LO	Formulary High Cost Generics	ACA Affordable Care Act
CAZIANT	Formulary High Cost Generics	ACA Affordable Care Act
CHATEAL	Formulary High Cost Generics	ACA Affordable Care Act
CHATEAL EQ	Formulary High Cost Generics	ACA Affordable Care Act
CRYSSELLE	Formulary High Cost Generics	ACA Affordable Care Act
CYRED	Formulary High Cost Generics	ACA Affordable Care Act
CYRED EQ	Formulary High Cost Generics	ACA Affordable Care Act
DASETTA	Formulary High Cost Generics	ACA Affordable Care Act
DAYSEE	Formulary High Cost Generics	ACA Affordable Care Act
DEBLITANE	Formulary High Cost Generics	ACA Affordable Care Act
<i>desogestrel-ethinyl estradiol</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>desogestrel-ethinyl estradiol/ethinyl estradiol</i>	Formulary High Cost Generics	ACA Affordable Care Act
DOLISHALE	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ECONTRA ONE-STEP	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 3 TABS / RX</div> <div>ACA Affordable Care Act</div> </div>
ELINEST	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ELLA	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 3 TABS / RX</div> <div>ACA Affordable Care Act</div> </div>
ELURYNG	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
EMOQUETTE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
EMZAHH	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ENILLORING	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ENPRESSE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ENSKYCE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ERRIN	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
ESTARYLLA	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
<i>ethinyl estradiol/drospirenone</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
<i>ethynodiol diacetate-ethinyl estradiol</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
<i>etonogestrel/ethinyl estradiol</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
FALMINA	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
FEMYNOR	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HAILEY	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HAILEY 24 FE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HAILEY FE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HALOETTE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HEATHER	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>
HER STYLE	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 3 TABS / RX</div> <div>ACA Affordable Care Act</div> </div>
ICLEVIA	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>ACA Affordable Care Act</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
INCASSIA	Formulary High Cost Generics	ACA Affordable Care Act
INTROVALE	Formulary High Cost Generics	ACA Affordable Care Act
ISIBLOOM	Formulary High Cost Generics	ACA Affordable Care Act
JAIMIESS	Formulary High Cost Generics	ACA Affordable Care Act
JASMIEL	Formulary High Cost Generics	ACA Affordable Care Act
JENCYCLA	Formulary High Cost Generics	ACA Affordable Care Act
JOLESSA	Formulary High Cost Generics	ACA Affordable Care Act
JULEBER	Formulary High Cost Generics	ACA Affordable Care Act
JULIE	Formulary High Cost Generics	QL 3 TABS / RX ACA Affordable Care Act
JUNEL	Formulary High Cost Generics	ACA Affordable Care Act
JUNEL FE	Formulary High Cost Generics	ACA Affordable Care Act
JUNEL FE 24	Formulary High Cost Generics	ACA Affordable Care Act
KALLIGA	Formulary High Cost Generics	ACA Affordable Care Act
KARIVA	Formulary High Cost Generics	ACA Affordable Care Act
KELNOR 1-35	Formulary High Cost Generics	ACA Affordable Care Act
KELNOR 1-50	Formulary High Cost Generics	ACA Affordable Care Act
KURVELO	Formulary High Cost Generics	ACA Affordable Care Act
LARIN	Formulary High Cost Generics	ACA Affordable Care Act
LARIN 24 FE	Formulary High Cost Generics	ACA Affordable Care Act
LARIN FE	Formulary High Cost Generics	ACA Affordable Care Act
LEENA	Formulary High Cost Generics	ACA Affordable Care Act
LESSINA	Formulary High Cost Generics	ACA Affordable Care Act
LEVONEST	Formulary High Cost Generics	ACA Affordable Care Act
<i>levonorgestrel</i>	Formulary High Cost Generics	QL 3 TABS / RX ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>levonorgestrel/ethinyl estradiol</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>levonorgestrel/ethinyl estradiol and ethinyl estradiol (l-norgest/e.estradiol-e.estrad 100-20(84) tbdspk 3mo, l-norgest/e.estradiol-e.estrad 150-30(84) tbdspk 3mo)</i>	Formulary High Cost Generics	ACA Affordable Care Act
LEVORA-28	Formulary High Cost Generics	ACA Affordable Care Act
LO-ZUMANDIMINE	Formulary High Cost Generics	ACA Affordable Care Act
LOJAIMIESS	Formulary High Cost Generics	ACA Affordable Care Act
LORYNA	Formulary High Cost Generics	ACA Affordable Care Act
LOW-OGESTREL	Formulary High Cost Generics	ACA Affordable Care Act
LUTERA	Formulary High Cost Generics	ACA Affordable Care Act
LYLEQ	Formulary High Cost Generics	ACA Affordable Care Act
LYZA	Formulary High Cost Generics	ACA Affordable Care Act
MARLISSA	Formulary High Cost Generics	ACA Affordable Care Act
MICROGESTIN	Formulary High Cost Generics	ACA Affordable Care Act
MICROGESTIN 24 FE	Formulary High Cost Generics	ACA Affordable Care Act
MICROGESTIN FE	Formulary High Cost Generics	ACA Affordable Care Act
MILI	Formulary High Cost Generics	ACA Affordable Care Act
MONO-LINYAH	Formulary High Cost Generics	ACA Affordable Care Act
MY WAY	Formulary High Cost Generics	QL 3 TABS / RX ACA Affordable Care Act
NECON	Formulary High Cost Generics	ACA Affordable Care Act
NIKKI	Formulary High Cost Generics	ACA Affordable Care Act
NORA-BE	Formulary High Cost Generics	ACA Affordable Care Act
<i>norelgestromin/ethinyl estradiol</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>norethindrone</i>	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>norethindrone acetate-ethinyl estradiol (norethindrone ac-eth estradiol 1mg-20mcg tablet, norethindrone ac-eth estradiol 1.5-0.03mg tablet)</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>norethindrone acetate-ethinyl estradiol/ferrous fumarate (norethindrone-e.estradiol-iron 1.5-30(21) tablet, norethindrone-e.estradiol-iron 1mg-20(21) tablet, norethindrone-e.estradiol-iron 1mg-20(24) tablet, norethindrone-e.estradiol-iron 5-7-9-7 tablet)</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>norgestimate-ethinyl estradiol (norgestimate-ethinyl estradiol 0.25-0.035 tablet, norgestimate-ethinyl estradiol 7daysx3 28 tablet, norgestimate-ethinyl estradiol 7daysx3 lo tablet)</i>	Formulary High Cost Generics	ACA Affordable Care Act
<i>norgestrel-ethinyl estradiol</i>	Formulary High Cost Generics	ACA Affordable Care Act
NORTREL	Formulary High Cost Generics	ACA Affordable Care Act
NYLIA	Formulary High Cost Generics	ACA Affordable Care Act
NYMYO	Formulary High Cost Generics	ACA Affordable Care Act
OCELLA	Formulary High Cost Generics	ACA Affordable Care Act
PHILITH	Formulary High Cost Generics	ACA Affordable Care Act
PIMTREA	Formulary High Cost Generics	ACA Affordable Care Act
PIRMELLA	Formulary High Cost Generics	ACA Affordable Care Act
PORTIA	Formulary High Cost Generics	ACA Affordable Care Act
RECLIPSEN	Formulary High Cost Generics	ACA Affordable Care Act
SETLAKIN	Formulary High Cost Generics	ACA Affordable Care Act
SHAROBEL	Formulary High Cost Generics	ACA Affordable Care Act
SIMLIYA	Formulary High Cost Generics	ACA Affordable Care Act
SIMPESSE	Formulary High Cost Generics	ACA Affordable Care Act
SPRINTEC	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SRONYX	Formulary High Cost Generics	ACA Affordable Care Act
SYEDA	Formulary High Cost Generics	ACA Affordable Care Act
TARINA 24 FE	Formulary High Cost Generics	ACA Affordable Care Act
TARINA FE	Formulary High Cost Generics	ACA Affordable Care Act
TARINA FE 1-20 EQ	Formulary High Cost Generics	ACA Affordable Care Act
TILIA FE	Formulary High Cost Generics	ACA Affordable Care Act
TRI FEMYNOR	Formulary High Cost Generics	ACA Affordable Care Act
TRI-ESTARYLLA	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LEGEST FE	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LINYAH	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LO-ESTARYLLA	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LO-MARZIA	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LO-MILI	Formulary High Cost Generics	ACA Affordable Care Act
TRI-LO-SPRINTEC	Formulary High Cost Generics	ACA Affordable Care Act
TRI-MILI	Formulary High Cost Generics	ACA Affordable Care Act
TRI-NYMYO	Formulary High Cost Generics	ACA Affordable Care Act
TRI-SPRINTEC	Formulary High Cost Generics	ACA Affordable Care Act
TRI-VYLIBRA	Formulary High Cost Generics	ACA Affordable Care Act
TRI-VYLIBRA LO	Formulary High Cost Generics	ACA Affordable Care Act
TRIVORA-28	Formulary High Cost Generics	ACA Affordable Care Act
TULANA	Formulary High Cost Generics	ACA Affordable Care Act
TURQOZ	Formulary High Cost Generics	ACA Affordable Care Act
TYBLUME	Formulary High Cost Generics	ACA Affordable Care Act
VELIVET	Formulary High Cost Generics	ACA Affordable Care Act
VESTURA	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VIENVA	Formulary High Cost Generics	ACA Affordable Care Act
VIORELE	Formulary High Cost Generics	ACA Affordable Care Act
VOLNEA	Formulary High Cost Generics	ACA Affordable Care Act
VYFEMLA	Formulary High Cost Generics	ACA Affordable Care Act
VYLIBRA	Formulary High Cost Generics	ACA Affordable Care Act
WERA	Formulary High Cost Generics	ACA Affordable Care Act
XULANE	Formulary High Cost Generics	ACA Affordable Care Act
ZAFEMY	Formulary High Cost Generics	ACA Affordable Care Act
ZARAH	Formulary High Cost Generics	ACA Affordable Care Act
ZOVIA 1-35	Formulary High Cost Generics	ACA Affordable Care Act
ZUMANDIMINE	Formulary High Cost Generics	ACA Affordable Care Act
PITUITARY		
<i>desmopressin acetate (desmopressin acetate 0.1 mg tablet, desmopressin acetate 0.2 mg tablet)</i>	Formulary High Cost Generics	AL1 At least 8 yrs old
GENOTROPIN	Covered	PA GH Growth Hormone
NORDITROPIN FLEXPRO	Covered	PA GH Growth Hormone
SEROSTIM	Formulary Brands	PA S Specialty Drug
SOGROYA	Covered	PA GH Growth Hormone
PROGESTINS		
DEPO-SUBQ PROVERA 104	Formulary Brands	ACA Affordable Care Act
<i>medroxyprogesterone acetate (medroxyprogesterone acetate 150 mg/ml syringe, medroxyprogesterone acetate 150 mg/ml vial)</i>	Formulary High Cost Generics	ACA Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>medroxyprogesterone acetate (medroxyprogesterone acetate 2.5 mg tablet, medroxyprogesterone acetate 5 mg tablet, medroxyprogesterone acetate 10 mg tablet)</i>	Formulary Low Cost Generics	
<i>megestrol acetate (megestrol acetate 20 mg tablet, megestrol acetate 40 mg tablet, megestrol acetate 400mg/10ml oral susp)</i>	Formulary High Cost Generics	OH OncoHealth
<i>norethindrone acetate</i>	Formulary High Cost Generics	
<i>progesterone</i>	Formulary High Cost Generics	PA
<i>progesterone, micronized</i>	Formulary High Cost Generics	
IMMUNOMODULATORY AGENTS (90:00)		
COMPLEMENT INHIBITOR AGENTS (90:20)		
TAVNEOS	Formulary Brands	PA S Specialty Drug
<i>everolimus (everolimus 0.25 mg tablet, everolimus 0.5 mg tablet, everolimus 0.75 mg tablet, everolimus 1 mg tablet)</i>	Formulary High Cost Generics	PA
INSULINS		
INTERMEDIATE-ACTING INSULINS		
HUMULIN 70-30	Formulary Brands	
HUMULIN 70/30 KWIKPEN	Formulary Brands	
HUMULIN N	Formulary Brands	
HUMULIN N KWIKPEN	Formulary Brands	
<i>insulin nph hum/reg insulin hm 70-30/ml insuln pen</i>	Formulary Brands	
<i>relion novolin 70-30 vial</i>	Formulary Brands	
<i>relion novolin n 100 unit/ml</i>	Formulary Brands	
<i>relion novolin n u-100 flexpen</i>	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
LONG-ACTING INSULINS		
<i>insulin glargine, human recombinant analog (insulin glargine, hum.rec.anlog 100/ml (3) insuln pen, insulin glargine, hum.rec.anlog 100/ml vial, insulin glargine, hum.rec.anlog 300/ml (3) insuln pen, insulin glargine, hum.rec.anlog 300/ml insuln pen)</i>	Formulary High Cost Generics	
LANTUS	Formulary Brands	
LANTUS SOLOSTAR	Formulary Brands	
LEVEMIR	Formulary Brands	PA
LEVEMIR FLEXPEN	Formulary Brands	PA
LEVEMIR FLEXTOUCH	Formulary Brands	PA
SOLIQUA 100-33	Formulary Brands	
TOUJEO MAX SOLOSTAR	Formulary Brands	
TOUJEO SOLOSTAR	Formulary Brands	
XULTOPHY 100-3.6	Formulary Brands	
RAPID-ACTING INSULINS		
HUMALOG 100 UNIT/ML CARTRIDGE	Formulary Brands	
HUMALOG KWIKPEN U-200	Formulary Brands	
HUMALOG MIX 50-50	Formulary Brands	
HUMALOG MIX 50-50 KWIKPEN	Formulary Brands	
HUMALOG MIX 75-25	Formulary Brands	
HUMALOG TEMPO PEN U-100	Formulary Brands	
<i>insulin aspart (insulin aspart 100/ml (3) insuln pen, insulin aspart 100/ml cartridge, insulin aspart 100/ml vial)</i>	Formulary High Cost Generics	PA
<i>insulin lispro (insulin lispro 100/ml ins pen hf, insulin lispro 100/ml insuln pen, insulin lispro 100/ml vial)</i>	Formulary High Cost Generics	
<i>insulin lispro protamine and insulin lispro</i>	Formulary High Cost Generics	
SHORT-ACTING INSULINS		
HUMULIN R	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
HUMULIN R U-500	Formulary Brands	
HUMULIN R U-500 KWIKPEN	Formulary Brands	
<i>relion novolin r 100 unit/ml</i>	Formulary Brands	
<i>relion novolin r u-100 flexpen</i>	Formulary Brands	
INTERLEUKIN-MEDIATED AGENTS		
INTERLEUKIN-MEDIATED AGENTS, MISC		
ACTEMRA 162 MG/0.9 ML SYRINGE	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>4 SYRINGES / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
ACTEMRA ACTPEN	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>4 PENS / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
COSENTYX (2 SYRINGES)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>2 SYRINGES / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
COSENTYX SENSOREADY (2 PENS)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>2 PENS / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
COSENTYX SENSOREADY PEN	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>1 PEN / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
COSENTYX SYRINGE	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>1 SYRINGE / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
COSENTYX UNOREADY PEN	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>1 SYRINGE / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>
KINERET	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px; border-radius: 3px;">QL</div> <div>28 SYRINGES / 28 DAYS</div> <div style="background-color: #996633; color: white; padding: 2px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px; border-radius: 3px;">S</div> <div>Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
STELARA (STELARA 45 MG/0.5 ML SYRINGE, STELARA 90 MG/ML SYRINGE)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 1 SYRINGE / 84 DAYS</div> <div>PA</div> <div>S Specialty Drug</div> </div>
STELARA 45 MG/0.5 ML VIAL	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 1 VIAL / 84 DAYS</div> <div>PA</div> <div>S Specialty Drug</div> </div>
ION-REMOVING AGENTS		
OTHER ION-REMOVING AGENTS		
RADIOGARDASE	Formulary Brands	NP Non-Preferred Drug
PHOSPHATE-REMOVING AGENTS		
<i>calcium acetate</i>	Formulary High Cost Generics	
<i>lanthanum carbonate</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>PA</div> <div>NP Non-Preferred Drug</div> </div>
PHOSLYRA	Formulary Brands	
<i>sevelamer carbonate (sevelamer carbonate 0.8 g powd pack, sevelamer carbonate 2.4 g powd pack, sevelamer carbonate 800 mg tablet)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
VELPHORO	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>PA</div> <div>NP Non-Preferred Drug</div> </div>
POTASSIUM-REMOVING AGENTS		
KIONEX	Formulary High Cost Generics	
LOKELMA	Formulary Brands	
<i>sodium polystyrene sulfonate</i>	Formulary High Cost Generics	
SPS 15 GM/60 ML SUSPENSION	Formulary High Cost Generics	
JANUS KINASE INHIBITORS (90:24)		
JANUS KINASE INHIBITORS, MISCELLANEOUS		
OLUMIANT	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 1 TAB / 1 DAY</div> <div>PA</div> <div>S Specialty Drug</div> </div>
RINVOQ	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div>QL 1 TAB / 1 DAY</div> <div>PA</div> <div>S Specialty Drug</div> </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
RINVOQ LQ	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 12 ML / 1 DAY Specialty Drug
KALLIKREIN-KININ SYSTEM INHIBITORS		
KALLIKREIN		
KALBITOR	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> Specialty Drug
ORLADEYO	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 CAP / 1 DAY Specialty Drug
TAKHZYRO	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #663399; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 2 ML / 28 DAYS Specialty Drug
MACROLIDE ANTIBIOTICS		
ERYTHROMYCIN ANTIBIOTICS		
<i>erythromycin base 500 mg tablet</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #006699; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> Non-Preferred Drug
OTHER MACROLIDE ANTIBIOTICS		
<i>azithromycin (azithromycin 100 mg/5ml susp recon, azithromycin 200 mg/5ml susp recon)</i>	Formulary High Cost Generics	
<i>azithromycin (azithromycin 250 mg tablet, azithromycin 500 mg tablet, azithromycin 600 mg tablet)</i>	Formulary Low Cost Generics	
<i>clarithromycin (clarithromycin 125 mg/5ml susp recon, clarithromycin 250 mg/5ml susp recon)</i>	Formulary High Cost Generics	<div style="background-color: #006633; color: white; padding: 2px 5px; border-radius: 3px;">AL1</div> Up to 12 yrs old
<i>clarithromycin (clarithromycin 250 mg tablet, clarithromycin 500 mg tablet)</i>	Formulary High Cost Generics	
DIFICID (DIFICID 40 MG/ML SUSPENSION, DIFICID 200 MG TABLET)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #006699; color: white; padding: 2px 5px; border-radius: 3px;">NP</div> </div> Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS		
STEROIDAL MINERALOCORTICOID RECEPTOR ANT		
<i>spironolactone (spironolactone 25 mg tablet, spironolactone 50 mg tablet, spironolactone 100 mg tablet)</i>	Formulary High Cost Generics	
MISC. BETA-LACTAM ANTIBIOTICS		
CARBAPENEM ANTIBIOTICS		
<i>meropenem 2 g vial</i>	Formulary High Cost Generics	NP Non-Preferred Drug
MONOBACTAM ANTIBIOTICS		
CAYSTON	Formulary Brands	PA S Specialty Drug
MISCELLANEOUS THERAPEUTIC AGENTS		
5-ALPHA-REDUCTASE INHIBITORS (92:04)		
<i>dutasteride</i>	Formulary High Cost Generics	
<i>dutasteride/tamsulosin hcl</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>finasteride 5 mg tablet</i>	Formulary Low Cost Generics	
ANTIGOUT AGENTS		
<i>allopurinol (allopurinol 100 mg tablet, allopurinol 300 mg tablet)</i>	Formulary Low Cost Generics	
<i>febuxostat</i>	Formulary High Cost Generics	
BONE RESORPTION INHIBITORS		
<i>alendronate sodium (alendronate sodium 5 mg tablet, alendronate sodium 10 mg tablet, alendronate sodium 35 mg tablet, alendronate sodium 70 mg tablet)</i>	Formulary Low Cost Generics	
<i>ibandronate sodium 150 mg tablet</i>	Formulary High Cost Generics	
<i>risedronate sodium (risedronate sodium 5 mg tablet, risedronate sodium 30 mg tablet, risedronate sodium 35 mg tablet, risedronate sodium 150 mg tablet)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
COMPLEMENT INHIBITORS (92:32)		
BERINERT	Formulary Brands	PA S Specialty Drug
CINRYZE	Formulary Brands	PA S Specialty Drug
HAEGARDA	Formulary Brands	PA S Specialty Drug
IMMUNOMODULATORY AGENTS		
ACTIMMUNE	Formulary Brands	PA OH OncoHealth S Specialty Drug
REDITREX	Formulary Brands	PA NP Non-Preferred Drug
THALOMID	Formulary Brands	ONC Oncology OH OncoHealth S Specialty Drug
OTHER MISCELLANEOUS THERAPEUTIC AGENTS		
CARNITOR SF	Formulary Brands	
CYSTAGON	Formulary Brands	
ENDARI	Formulary Brands	PA S Specialty Drug
EVRYSDI	Formulary Brands	PA S Specialty Drug
<i>glutamine 5 g powd pack</i>	Formulary High Cost Generics	PA S Specialty Drug
<i>levocarnitine (with sugar) 100 mg/ml solution</i>	Formulary High Cost Generics	
<i>levocarnitine 100 mg/ml solution</i>	Formulary High Cost Generics	
<i>levocarnitine 330 mg tablet</i>	Formulary Low Cost Generics	
THIOLA EC	Formulary Brands	PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>tiopronin</i>	Formulary High Cost Generics	PA S Specialty Drug
VOXZOGO	Formulary Brands	PA S Specialty Drug
PROTECTIVE AGENTS		
<i>dalfampridine</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY PA S Specialty Drug
MTOR INHIBITORS		
MTOR INHIBITORS, MISCELLANEOUS		
<i>sirolimus (sirolimus 0.5 mg tablet, sirolimus 1 mg tablet, sirolimus 1 mg/ml solution, sirolimus 2 mg tablet)</i>	Formulary High Cost Generics	
MULTIPLE SCLEROSIS AGENTS		
AMINO ACID POLYMERS		
<i>glatiramer acetate 20 mg/ml syringe</i>	Formulary High Cost Generics	QL 30 ML / 30 DAYS S Specialty Drug
<i>glatiramer acetate 40 mg/ml syringe</i>	Formulary High Cost Generics	QL 12 ML / 28 DAYS S Specialty Drug
GLATOPA 20 MG/ML SYRINGE	Formulary High Cost Generics	QL 30 ML / 30 DAYS S Specialty Drug
GLATOPA 40 MG/ML SYRINGE	Formulary High Cost Generics	QL 12 ML / 28 DAYS S Specialty Drug
ANTIMETABOLITES		
MAVENCLAD	Formulary Brands	PA S Specialty Drug
<i>teriflunomide</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
FUMARATES		
BAFIERTAM	Formulary Brands	QL 4 CAPS / 1 DAY PA S Specialty Drug
<i>dimethyl fumarate</i>	Formulary High Cost Generics	QL 2 CAPS / 1 DAY S Specialty Drug
VUMERITY	Formulary Brands	QL 4 CAPS / 1 DAY S Specialty Drug
INTERFERONS		
AVONEX 30 MCG/0.5 ML SYRINGE	Formulary Brands	QL 4 SYRINGES / 28 DAYS S Specialty Drug
AVONEX PEN	Formulary Brands	QL 1 KIT / 28 DAYS S Specialty Drug
AVONEX PREFILLED SYR 30 MCG KT	Formulary Brands	QL 1 KIT / 28 DAYS S Specialty Drug
BETASERON	Formulary Brands	QL 15 ML / 30 DAYS S Specialty Drug
PLEGRIDY	Formulary Brands	QL 1 ML / 28 DAYS S Specialty Drug
PLEGRIDY PEN	Formulary Brands	QL 1 ML / 28 DAYS S Specialty Drug
REBIF (REBIF 22 MCG/0.5 ML SYRINGE, REBIF 44 MCG/0.5 ML SYRINGE)	Formulary Brands	QL 6 ML / 28 DAYS PA S Specialty Drug
REBIF REBIDOSE (REBIF REBIDOSE 22 MCG/0.5 ML, REBIF REBIDOSE 44 MCG/0.5 ML)	Formulary Brands	QL 6 ML / 28 DAYS PA S Specialty Drug
REBIF REBIDOSE TITRATION PACK	Formulary Brands	QL 4.2 ML / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
REBIF TITRATION PACK	Formulary Brands	<p>QL 4.2 ML / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
MONOCLONAL ANTIBODIES (90:04)		
KESIMPTA PEN	Formulary Brands	<p>QL 1 PEN / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
SPHINGOSINE 1-PHOSPHATE (S1P) AGENTS		
<i> fingolimod hcl </i>	Formulary High Cost Generics	<p>QL 1 CAP / 1 DAY</p> <p>S Specialty Drug</p>
MAYZENT (MAYZENT 1 MG TABLET, MAYZENT 2 MG TABLET)	Formulary Brands	<p>QL 1 TAB / 1 DAY</p> <p>S Specialty Drug</p>
MAYZENT 0.25 MG TABLET	Formulary Brands	<p>QL 4 TABS / 1 DAY</p> <p>S Specialty Drug</p>
MAYZENT 0.25MG START-1MG MAINT	Formulary Brands	<p>QL 7 TABS / 4 DAYS</p> <p>S Specialty Drug</p>
MAYZENT 0.25MG START-2MG MAINT	Formulary Brands	<p>QL 12 TABS / 5 DAYS</p> <p>S Specialty Drug</p>
ZEPOSIA 0.92 MG CAPSULE	Formulary Brands	<p>QL 1 CAP / 1 DAY</p> <p>PA</p> <p>S Specialty Drug</p>
ZEPOSIA STARTER KIT (28-DAY)	Formulary Brands	<p>QL 28 CAPS / 180 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
ZEPOSIA STARTER KIT (37-DAY)	Formulary Brands	<p>QL 37 CAPS / 180 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
ZEPOSIA STARTER PACK (7-DAY)	Formulary Brands	<p>QL 7 CAPS / 180 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
NEUROMYELITIS OPTICA SPECTR DIS AGENTS		
MONOCLONAL ANTIBODIES (90:12)		
ENSPRYNG	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #c47a3b; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> <div style="background-color: #c0392b; color: white; padding: 2px 5px; margin-right: 5px;">S</div> Specialty Drug </div>
NONHORMONAL CONTRACEPTIVES		
CAYA CONTOURED	Covered	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
DUREX AIR	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
DUREX EXTRA SENSITIVE	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
DUREX TROPICAL	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
FC2 FEMALE CONDOM	Covered	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
FEMCAP	Covered	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
KIMONO	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
<i>nonoxynol 9</i>	Formulary High Cost Generics	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
OMNIFLEX DIAPHRAGM	Covered	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TODAY CONTRACEPTIVE SPONGE	Formulary Brands	<div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TROJAN BARESKIN	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TROJAN EXTENDED PLEASURE	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TROJAN PLEASURE PACK	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TROJAN ULTRA RIBBED	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act
TROJAN ULTRA THIN	Covered	<div style="background-color: #6b347a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 60 CONDOMS / RX <div style="background-color: #34495e; color: white; padding: 2px 5px; margin-right: 5px;">ACA</div> Affordable Care Act

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
TRUE COVER	Covered	QL 60 CONDOMS / RX ACA Affordable Care Act
WIDE SEAL DIAPHRAGM	Covered	ACA Affordable Care Act
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS		
CYCLOOXYGENASE-2 (COX-2) INHIBITORS		
<i>celecoxib</i>	Formulary High Cost Generics	
NONSTEROIDAL ANTI-INFLAMM. AGENTS, MISC		
<i>tolmetin sodium 200 mg tablet</i>	Formulary High Cost Generics	PA
REVERSIBLE COX-1/COX-2 INHIBITORS		
<i>diclofenac potassium 50 mg tablet</i>	Formulary High Cost Generics	
<i>diclofenac sodium (diclofenac sodium 1 % gel (gram), diclofenac sodium 25 mg tablet dr, diclofenac sodium 50 mg tablet dr, diclofenac sodium 75 mg tablet dr, diclofenac sodium 100 mg tab er 24h)</i>	Formulary High Cost Generics	
<i>diclofenac sodium/misoprostol</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>diflunisal</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>etodolac (etodolac 200 mg capsule, etodolac 300 mg capsule)</i>	Formulary Low Cost Generics	
<i>etodolac (etodolac 400 mg tab er 24h, etodolac 400 mg tablet, etodolac 500 mg tab er 24h, etodolac 500 mg tablet, etodolac 600 mg tab er 24h)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>flurbiprofen</i>	Formulary High Cost Generics	
IBU	Formulary Low Cost Generics	
<i>ibuprofen (ibuprofen 400 mg tablet, ibuprofen 600 mg tablet, ibuprofen 800 mg tablet)</i>	Formulary Low Cost Generics	
<i>indomethacin (indomethacin 25 mg capsule, indomethacin 50 mg capsule)</i>	Formulary Low Cost Generics	
<i>indomethacin 75 mg capsule er</i>	Formulary High Cost Generics	
<i>ketoprofen (ketoprofen 25 mg capsule, ketoprofen 50 mg capsule, ketoprofen 75 mg capsule)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>ketorolac tromethamine 10 mg tablet</i>	Formulary High Cost Generics	QL 20 TABS / RX
<i>meloxicam (meloxicam 7.5 mg tablet, meloxicam 7.5 mg/5ml oral susp, meloxicam 15 mg tablet)</i>	Formulary Low Cost Generics	
<i>nabumetone</i>	Formulary High Cost Generics	
<i>naproxen (naproxen 250 mg tablet, naproxen 375 mg tablet, naproxen 500 mg tablet)</i>	Formulary Low Cost Generics	
<i>naproxen (naproxen 375 mg tablet dr, naproxen 500 mg tablet dr)</i>	Formulary High Cost Generics	
<i>naproxen/esomeprazole magnesium</i>	Formulary High Cost Generics	PA
<i>oxaprozin</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>piroxicam</i>	Formulary Low Cost Generics	
<i>sulindac</i>	Formulary High Cost Generics	
SALICYLATES		
<i>aspirin (aspirin 81 mg tab chew, aspirin 81 mg tablet dr)</i>	Formulary Low Cost Generics	ACA Affordable Care Act
<i>aspirin/dipyridamole</i>	Formulary High Cost Generics	
BAYER CHEWABLE ASPIRIN	Formulary Brands	ACA Affordable Care Act
<i>butalbital/aspirin/caffeine 50-325-40 capsule</i>	Formulary Low Cost Generics	QL 6 CAPS / 1 DAY
<i>butalbital/aspirin/caffeine 50-325-40 tablet</i>	Formulary High Cost Generics	QL 6 TABS / 1 DAY
<i>salsalate</i>	Formulary High Cost Generics	
OXYTOCICS		
<i>methylergonovine maleate 0.2 mg tablet</i>	Formulary High Cost Generics	
<i>mifepristone 200 mg tablet</i>	Formulary High Cost Generics	
PARATHYROID AND ANTIPARATHYROID AGENTS		
ANTIPARATHYROID AGENTS		
<i>calcitonin, salmon, synthetic 200/spray spray/pump</i>	Formulary High Cost Generics	
<i>cinacalcet hcl</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PARATHYROID AGENTS		
<i>teriparatide</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">S</div> Specialty Drug </div>
TYMLOS	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">S</div> Specialty Drug </div>
PENICILLIN ANTIBIOTICS		
AMINOPENICILLIN ANTIBIOTICS		
<i>amoxicillin (amoxicillin 125 mg tab chew, amoxicillin 125 mg/5ml susp recon, amoxicillin 200 mg/5ml susp recon, amoxicillin 250 mg capsule, amoxicillin 250 mg tab chew, amoxicillin 250 mg/5ml susp recon, amoxicillin 400 mg/5ml susp recon, amoxicillin 500 mg capsule, amoxicillin 500 mg tablet, amoxicillin 875 mg tablet)</i>	Formulary Low Cost Generics	
<i>amoxicillin/potassium clavulanate (amoxicillin/potassium clav 200-28.5/5 susp recon, amoxicillin/potassium clav 200-28.5mg tab chew, amoxicillin/potassium clav 250-125 mg tablet, amoxicillin/potassium clav 250-62.5/5 susp recon, amoxicillin/potassium clav 400-57mg tab chew, amoxicillin/potassium clav 400-57mg/5 susp recon, amoxicillin/potassium clav 500-125 mg tablet, amoxicillin/potassium clav 600-42.9/5 susp recon, amoxicillin/potassium clav 875-125 mg tablet)</i>	Formulary High Cost Generics	
<i>ampicillin trihydrate</i>	Formulary Low Cost Generics	
NATURAL PENICILLIN ANTIBIOTICS		
<i>penicillin v potassium (penicillin v potassium 125 mg/5ml soln recon, penicillin v potassium 250 mg/5ml soln recon)</i>	Formulary High Cost Generics	
<i>penicillin v potassium (penicillin v potassium 250 mg tablet, penicillin v potassium 500 mg tablet)</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium</i>	Formulary High Cost Generics	
PHARMACEUTICAL AIDS		
DILUENT FOR ELIGARD	Formulary Brands	S Specialty Drug
<i>diluent for epoprostenol sodium (glycine)</i>	Formulary High Cost Generics	S Specialty Drug
DILUENT FOR HIBERIX	Formulary Brands	ACA Affordable Care Act
DILUENT FOR NOVOSEVEN RT	Formulary Brands	S Specialty Drug
DILUENT-MERCK LIVE VIRUS VACC	Formulary Brands	ACA Affordable Care Act
PH 12 DILUENT FOR FLOLAN	Formulary Brands	S Specialty Drug
SHINGRIX ADJUVANT COMPONENT	Formulary Brands	QL 1 KIT / RX ACA Affordable Care Act
STERILE WATER DILUENT-PRIORIX	Formulary Brands	ACA Affordable Care Act
PHOSPHODIESTERASE-4 INHIBITORS (90:24)		
PHOSPHODIESTERASE-4 INHIBITORS, MISC		
OTEZLA (OTEZLA 10-20 MG STARTER 28 DAY, OTEZLA 10-20-30MG START 28 DAY)	Formulary Brands	QL 55 TABS / 28 DAYS PA S Specialty Drug
OTEZLA (OTEZLA 20 MG TABLET, OTEZLA 30 MG TABLET)	Formulary Brands	QL 2 TABS / 1 DAY PA S Specialty Drug
OTEZLA 10-20-30MG START 14 DAY	Formulary Brands	QL 2 PACKS / 28 DAYS PA S Specialty Drug
RENIN-ANGIOTENSIN-ALDOSTERONE SYS. INHIB		
ANGIOTENSIN II RECEPTOR ANTAGONIST/NEPROLYS		
ENTRESTO	Formulary Brands	
ENTRESTO SPRINKLE	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil</i>	Formulary High Cost Generics	
<i>irbesartan</i>	Formulary Low Cost Generics	
<i>irbesartan/hydrochlorothiazide</i>	Formulary High Cost Generics	
<i>losartan potassium</i>	Formulary Low Cost Generics	
<i>losartan potassium/hydrochlorothiazide</i>	Formulary Low Cost Generics	
<i>olmesartan medoxomil</i>	Formulary High Cost Generics	
<i>olmesartan medoxomil/hydrochlorothiazide</i>	Formulary High Cost Generics	
<i>telmisartan</i>	Formulary High Cost Generics	
<i>telmisartan/hydrochlorothiazide</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>valsartan (valsartan 40 mg tablet, valsartan 80 mg tablet, valsartan 160 mg tablet, valsartan 320 mg tablet)</i>	Formulary High Cost Generics	
<i>valsartan/hydrochlorothiazide</i>	Formulary High Cost Generics	
ANGIOTENSIN-CONVERTING ENZYME INHIBITORS		
<i>benazepril hcl</i>	Formulary Low Cost Generics	
<i>benazepril hcl/hydrochlorothiazide</i>	Formulary High Cost Generics	
<i>enalapril maleate (enalapril maleate 2.5 mg tablet, enalapril maleate 5 mg tablet, enalapril maleate 10 mg tablet, enalapril maleate 20 mg tablet)</i>	Formulary High Cost Generics	
<i>enalapril maleate/hydrochlorothiazide</i>	Formulary Low Cost Generics	
<i>fosinopril sodium</i>	Formulary Low Cost Generics	
<i>fosinopril sodium/hydrochlorothiazide</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>lisinopril</i>	Formulary Low Cost Generics	
<i>lisinopril/hydrochlorothiazide</i>	Formulary Low Cost Generics	
<i>moexipril hcl</i>	Formulary High Cost Generics	
<i>perindopril erbumine</i>	Formulary High Cost Generics	
<i>quinapril hcl</i>	Formulary Low Cost Generics	
<i>quinapril hcl/hydrochlorothiazide</i>	Formulary High Cost Generics	NP Non-Preferred Drug
<i>ramipril</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>trandolapril</i>	Formulary High Cost Generics	
MINERALOCORTICOID (ALDOSTERONE) ANTAGNTS		
<i>eplerenone</i>	Formulary High Cost Generics	
<i>spironolactone/hydrochlorothiazide</i>	Formulary High Cost Generics	
RESPIRATORY TRACT AGENTS		
ANTIFIBROTIC AGENTS		
<i>pirfenidone</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> Specialty Drug </div>
ANTITUSSIVES		
<i>benzonatate</i>	Formulary High Cost Generics	
<i>codeine phosphate/guaifenesin (codeine phosphate/guaifenesin 10-100mg/5 liquid, codeine phosphate/guaifenesin 20-200/10 liquid)</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div style="margin-right: 10px;">AL1</div> 60 ML / 1 DAY At least 12 yrs old </div>
<i>hydrocodone polistirex/chlorpheniramine polistirex</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div style="margin-right: 10px;">AL1</div> 10 ML / 1 DAY At least 18 yrs old </div>
<i>promethazine hcl/dextromethorphan hbr</i>	Formulary Low Cost Generics	
MUCOLYTIC AGENTS		
PULMOZYME	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">QL</div> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> 150 ML / 30 DAYS Specialty Drug </div>
PHOSPHODIESTERASE TYPE 4 INHIBITORS		
<i>roflumilast</i>	Formulary High Cost Generics	
VASODILATING AGENTS (RESPIRATORY TRACT)		
ADEMPAS	Formulary Brands	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> Specialty Drug </div>
<i>ambrisentan</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> Specialty Drug </div>
<i>bosentan</i>	Formulary High Cost Generics	<div style="display: flex; align-items: center;"> <div style="margin-right: 10px;">PA</div> <div style="margin-right: 10px;">S</div> Specialty Drug </div>

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>epoprostenol sodium</i>	Formulary High Cost Generics	PA S Specialty Drug
<i>epoprostenol sodium (glycine)</i>	Formulary High Cost Generics	PA S Specialty Drug
FLOLAN	Formulary Brands	PA S Specialty Drug
OPSUMIT	Formulary Brands	PA S Specialty Drug
OPSYNVI	Formulary Brands	PA S Specialty Drug
<i>treprostinil sodium</i>	Formulary High Cost Generics	PA S Specialty Drug
TYVASO	Formulary Brands	PA S Specialty Drug
TYVASO DPI	Formulary Brands	PA S Specialty Drug
TYVASO REFILL KIT	Formulary Brands	PA S Specialty Drug
TYVASO STARTER KIT	Formulary Brands	PA S Specialty Drug
UPTRAVI (UPTRAVI 200 MCG TABLET, UPTRAVI 200-800 TITRATION PACK, UPTRAVI 400 MCG TABLET, UPTRAVI 600 MCG TABLET, UPTRAVI 800 MCG TABLET, UPTRAVI 1,000 MCG TABLET, UPTRAVI 1,200 MCG TABLET, UPTRAVI 1,400 MCG TABLET, UPTRAVI 1,600 MCG TABLET)	Formulary Brands	PA S Specialty Drug
SKELETAL MUSCLE RELAXANTS		
CENTRALLY ACTING SKELETAL MUSCLE RELAXANT		
<i>carisoprodol 250 mg tablet</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>carisoprodol 350 mg tablet</i>	Formulary High Cost Generics	QL 4 TABS / 1 DAY
<i>carisoprodol/aspirin/codeine phosphate</i>	Formulary High Cost Generics	QL 8 TABS / 1 DAY PA NP Non-Preferred Drug
<i>chlorzoxazone 500 mg tablet</i>	Formulary High Cost Generics	
<i>cyclobenzaprine hcl (cyclobenzaprine hcl 5 mg tablet, cyclobenzaprine hcl 10 mg tablet)</i>	Formulary Low Cost Generics	
<i>metaxalone 800 mg tablet</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>methocarbamol (methocarbamol 500 mg tablet, methocarbamol 750 mg tablet)</i>	Formulary High Cost Generics	
<i>tizanidine hcl (tizanidine hcl 2 mg tablet, tizanidine hcl 4 mg tablet)</i>	Formulary High Cost Generics	
DIRECT-ACTING SKELETAL MUSCLE RELAXANTS		
<i>dantrolene sodium (dantrolene sodium 25 mg capsule, dantrolene sodium 50 mg capsule, dantrolene sodium 100 mg capsule)</i>	Formulary High Cost Generics	
GABA-DERIVATIVE SKELETAL MUSCLE RELAXANT		
<i>baclofen (baclofen 5 mg tablet, baclofen 10 mg tablet, baclofen 20 mg tablet)</i>	Formulary High Cost Generics	
INDIRECT-ACTING SKELETAL MUSCLE RELAXANT		
<i>orphenadrine citrate 100 mg tablet er</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
SKIN AND MUCOUS MEMBRANE AGENTS		
ANTIPROLIFERANTS		
<i>bexarotene 1 % gel (gram)</i>	Formulary High Cost Generics	PA OH OncoHealth S Specialty Drug
<i>fluorouracil (fluorouracil 2 % solution, fluorouracil 5 % cream (g), fluorouracil 5 % solution)</i>	Formulary High Cost Generics	
<i>imiquimod 5 % cream pack</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VALCHLOR	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> <div style="background-color: #0070C0; color: white; padding: 2px;">OH</div> OncoHealth <div style="background-color: #8B4513; color: white; padding: 2px;">S</div> Specialty Drug </div>
ANTIPRURITICS AND LOCAL ANESTHETICS		
<i>doxepin hcl 5 % cream (g)</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 45 GM / 1 FILL <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> </div>
<i>lidocaine 5 % adh. patch</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 1 PATCH / 1 DAY <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> </div>
<i>lidocaine 5 % oint. (g)</i>	Formulary High Cost Generics	
<i>lidocaine/prilocaine (lidocaine/prilocaine 2.5 %-2.5% cream (g), lidocaine/prilocaine 2.5 %-2.5% kit)</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #483D8B; color: white; padding: 2px;">QL</div> 60 GM / 1 FILL </div>
<i>phenazopyridine hcl (phenazopyridine hcl 100 mg tablet, phenazopyridine hcl 200 mg tablet)</i>	Formulary Low Cost Generics	
ASTRINGENTS (84:12)		
DRYSOL	Formulary Brands	
CELL STIMULANTS AND PROLIFERANTS		
AVITA	Formulary High Cost Generics	
<i>tretinoin (tretinoin 0.01 % gel (gram), tretinoin 0.025 % cream (g), tretinoin 0.025 % gel (gram), tretinoin 0.05 % cream (g), tretinoin 0.1 % cream (g))</i>	Formulary High Cost Generics	
KERATOLYTIC AGENTS		
AC CUTANE	Formulary High Cost Generics	
<i>acitretin</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px;">NP</div> Non-Preferred Drug </div>
<i>adapalene (adapalene 0.1 % cream (g), adapalene 0.3 % gel (gram), adapalene 0.3 % gel w/pump)</i>	Formulary High Cost Generics	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px;">PA</div> </div>
<i>adapalene 0.1 % gel (gram)</i>	Formulary High Cost Generics	
AMNESTEEM	Formulary High Cost Generics	
CLARAVIS	Formulary High Cost Generics	
DIFFERIN 0.1% GEL	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
<i>isotretinoin (isotretinoin 10 mg capsule, isotretinoin 20 mg capsule, isotretinoin 30 mg capsule, isotretinoin 40 mg capsule)</i>	Formulary High Cost Generics	
MYORISAN	Formulary High Cost Generics	
<i>podofilox 0.5 % solution</i>	Formulary High Cost Generics	
<i>sulfacetamide sodium/sulfur (sulfacetamide sodium/sulfur 10-5%(w/v) lotion, sulfacetamide sodium/sulfur 10-5%(w/w) cream (g), sulfacetamide sodium/sulfur 10-5%(w/w) lotion)</i>	Formulary High Cost Generics	
<i>sulfacetamide sodium/sulfur 10-5%(w/w) cleanser</i>	Formulary High Cost Generics	QL 12 ML / 1 DAY
<i>tazarotene (tazarotene 0.05 % cream (g), tazarotene 0.05 % gel (gram), tazarotene 0.1 % gel (gram))</i>	Formulary High Cost Generics	QL 30 GM / 30 DAYS PA
<i>tazarotene 0.1 % cream (g)</i>	Formulary High Cost Generics	QL 30 GM / 30 DAYS
TAZORAC 0.05% CREAM	Formulary Brands	QL 30 GM / 30 DAYS PA
<i>urea 40 % cream (g)</i>	Formulary High Cost Generics	
ZENATANE	Formulary High Cost Generics	
SKIN AND MUCOUS MEMBRANE AGENTS, MISC.		
<i>calcitriol 3 mcg/g oint. (g)</i>	Formulary High Cost Generics	PA NP Non-Preferred Drug
<i>dapsone 5 % gel (gram)</i>	Formulary High Cost Generics	NP Non-Preferred Drug
DUPIXENT PEN	Formulary Brands	QL 2 PENS / 28 DAYS PA S Specialty Drug
DUPIXENT SYRINGE	Formulary Brands	QL 2 SYRINGES / 28 DAYS PA S Specialty Drug
TRI-CHLOR	Formulary Brands	
<i>trichloroacetic acid</i>	Formulary Brands	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SMOOTH MUSCLE RELAXANTS		
RESPIRATORY SMOOTH MUSCLE RELAXANTS		
<i>theophylline anhydrous (theophylline anhydrous 100 mg tab er 12h, theophylline anhydrous 200 mg tab er 12h, theophylline anhydrous 300 mg tab er 12h, theophylline anhydrous 400 mg tab er 24h, theophylline anhydrous 450 mg tab er 12h, theophylline anhydrous 600 mg tab er 24h)</i>	Formulary High Cost Generics	
SOMATOSTATIN AGONISTS AND ANTAGONISTS		
SOMATOSTATIN AGONISTS		
<i>octreotide acetate (octreotide acetate 50 mcg/ml ampul, octreotide acetate 50 mcg/ml syringe, octreotide acetate 50 mcg/ml vial, octreotide acetate 100 mcg/ml ampul, octreotide acetate 100 mcg/ml syringe, octreotide acetate 100 mcg/ml vial, octreotide acetate 200 mcg/ml vial, octreotide acetate 500 mcg/ml ampul, octreotide acetate 500 mcg/ml syringe, octreotide acetate 500 mcg/ml vial, octreotide acetate 1000mcg/ml vial)</i>	Formulary High Cost Generics	<div style="display: flex; gap: 5px;"> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">OH</div> OncoHealth <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">S</div> Specialty Drug </div>
SIGNIFOR	Formulary Brands	<div style="display: flex; gap: 5px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #A52A2A; color: white; padding: 2px 5px; border-radius: 3px;">S</div> Specialty Drug </div>
SYMPATHOMIMETIC (ADRENERGIC) AGENTS		
ALPHA- AND BETA-ADRENERGIC AGONISTS		
<i>epinephrine 0.15 mg auto-inject (teva)</i>	Formulary High Cost Generics	
<i>epinephrine 0.15 mg auto-inject (generic for adrenaclick)</i>	Formulary High Cost Generics	
<i>epinephrine 0.15 mg auto-inject (generic for epi-pen jr / mylan)</i>	Formulary High Cost Generics	
<i>epinephrine 0.15/0.15 auto inject</i>	Formulary High Cost Generics	
<i>epinephrine 0.3 mg auto-inject (generic for adrenaclick)</i>	Formulary High Cost Generics	
<i>epinephrine 0.3 mg auto-inject (generic for epi-pen / mylan)</i>	Formulary High Cost Generics	
<i>epinephrine 0.3 mg auto-inject (teva)</i>	Formulary High Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
SYMJEPI	Formulary Brands	
ALPHA-ADRENERGIC AGONISTS		
<i>midodrine hcl</i>	Formulary High Cost Generics	
THYROID AND ANTITHYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole</i>	Formulary Low Cost Generics	
<i>propylthiouracil</i>	Formulary High Cost Generics	NP Non-Preferred Drug
THYROID AGENTS		
EUTHYROX	Formulary High Cost Generics	
<i>levothyroxine sodium (levothyroxine sodium 25 mcg tablet, levothyroxine sodium 50 mcg tablet, levothyroxine sodium 75 mcg tablet, levothyroxine sodium 88 mcg tablet, levothyroxine sodium 100 mcg tablet, levothyroxine sodium 112 mcg tablet, levothyroxine sodium 125 mcg tablet, levothyroxine sodium 137 mcg tablet, levothyroxine sodium 150 mcg tablet, levothyroxine sodium 175 mcg tablet, levothyroxine sodium 200 mcg tablet, levothyroxine sodium 300 mcg tablet)</i>	Formulary High Cost Generics	
<i>liothyronine sodium (liothyronine sodium 5 mcg tablet, liothyronine sodium 25 mcg tablet, liothyronine sodium 50 mcg tablet)</i>	Formulary High Cost Generics	
SYNTHROID	Formulary Brands	NP Non-Preferred Drug
TUMOR NECROSIS FACTOR INHIBITORS		
TUMOR NECROSIS FACTOR INHIBITORS, MISC		
CIMZIA (CIMZIA 2X200 MG/ML SYRINGE KIT, CIMZIA 2X200 MG/ML(X3)START KT)	Formulary Brands	QL 1 KIT = 2 SYRINGES / 28 DAYS PA S Specialty Drug
ENBREL (ENBREL 25 MG/0.5 ML SYRINGE, ENBREL 25 MG/0.5 ML VIAL)	Formulary Brands	QL 4 ML (8 DOSES) / 28 DAYS PA S Specialty Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
ENBREL 25 MG KIT	Formulary Brands	<p>QL 8 VIALS (8 ML) / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
ENBREL 50 MG/ML SYRINGE	Formulary Brands	<p>QL 4 ML (4 DOSES) / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
ENBREL MINI	Formulary Brands	<p>QL 4 ML (4 DOSES) / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
ENBREL SURECLICK	Formulary Brands	<p>QL 4 ML (4 DOSES) / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HADLIMA	Formulary Brands	<p>QL 2 SYRINGES / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HADLIMA PUSHTOUCH	Formulary Brands	<p>QL 2 AUTOINJECTORS / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HADLIMA(CF)	Formulary Brands	<p>QL 2 SYRINGES / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HADLIMA(CF) PUSHTOUCH	Formulary Brands	<p>QL 2 AUTOINJECTORS / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HUMIRA	Formulary Brands	<p>QL 2 SYRINGES / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>
HUMIRA PEN	Formulary Brands	<p>QL 2 PENS / 28 DAYS</p> <p>PA</p> <p>S Specialty Drug</p>

PRODUCT DESCRIPTION		TIER	LIMITS & RESTRICTIONS
HUMIRA PEN CROHN'S-UC-HS	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
HUMIRA PEN PSOR-UVEITS-ADOL HS	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
HUMIRA(CF)	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 2 SYRINGES / 28 DAYS Specialty Drug	
HUMIRA(CF) PEDIATRIC CROHN'S	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
HUMIRA(CF) PEN	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 2 PENS / 28 DAYS Specialty Drug	
HUMIRA(CF) PEN CROHN'S-UC-HS	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
HUMIRA(CF) PEN PEDIATRIC UC	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
HUMIRA(CF) PEN PSOR-UV-ADOL HS	Formulary Brands	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #666699; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="background-color: #996633; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #993333; color: white; padding: 2px 5px; border-radius: 3px;">S</div> </div> 1 KIT / 365 DAYS Specialty Drug	
URINE AND FECES CONTENTS			
KETONES			
KETONE TEST STRIP	Covered	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">DS</div> </div> Diabetic Supplies	
KETOSTIX REAGENT	Covered	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">DS</div> </div> Diabetic Supplies	
TRUEPLUS KETONE TEST STRIP	Covered	<div style="display: flex; flex-direction: column; gap: 5px;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">DS</div> </div> Diabetic Supplies	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PROTEIN		
ALBUSTIX REAGENT	Covered	
CHEMSTRIP MICRAL	Covered	
SUGAR		
DIASTIX REAGENT	Covered	DS Diabetic Supplies
Uncategorized		
Unclassified		
<i>heparin sod,porcine/0.9 % nacl 10 unit/ml kit</i>	Covered	
VASODILATING AGENTS		
DIRECT VASODILATORS		
<i>hydralazine hcl (hydralazine hcl 10 mg tablet, hydralazine hcl 25 mg tablet, hydralazine hcl 50 mg tablet, hydralazine hcl 100 mg tablet)</i>	Formulary High Cost Generics	
<i>minoxidil (minoxidil 2.5 mg tablet, minoxidil 10 mg tablet)</i>	Formulary High Cost Generics	
NITRATES AND NITRITES		
<i>isosorbide dinitrate (isosorbide dinitrate 5 mg tablet, isosorbide dinitrate 10 mg tablet, isosorbide dinitrate 20 mg tablet, isosorbide dinitrate 30 mg tablet)</i>	Formulary High Cost Generics	
<i>isosorbide mononitrate (isosorbide mononitrate 10 mg tablet, isosorbide mononitrate 20 mg tablet, isosorbide mononitrate 30 mg tab er 24h, isosorbide mononitrate 60 mg tab er 24h, isosorbide mononitrate 120 mg tab er 24h)</i>	Formulary High Cost Generics	
NITRO-BID	Formulary Brands	
<i>nitroglycerin (nitroglycerin 0.1mg/hr patch td24, nitroglycerin 0.2mg/hr patch td24, nitroglycerin 0.3 mg tab subl, nitroglycerin 0.4 mg tab subl, nitroglycerin 0.4mg/hr patch td24, nitroglycerin 0.6 mg tab subl, nitroglycerin 0.6mg/hr patch td24)</i>	Formulary High Cost Generics	
RECTIV	Formulary Brands	PA NP Non-Preferred Drug

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
PHOSPHODIESTERASE TYPE 5 INHIBITORS		
<i>sildenafil 20 mg tablet (generic for revatio)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
<i>sildenafil citrate (sildenafil citrate 25 mg tablet, sildenafil citrate 50 mg tablet, sildenafil citrate 100 mg tablet)</i>	Formulary High Cost Generics	
<i>tadalafil (tadalafil 10 mg tablet, tadalafil 20 mg tablet)</i>	Formulary High Cost Generics	
<i>tadalafil (tadalafil 2.5 mg tablet, tadalafil 5 mg tablet)</i>	Formulary High Cost Generics	QL 1 TAB / 1 DAY
VASODILATING AGENTS (RESPIRATORY TRACT)		
PHOSPHODIESTERASE-5 INHIBITORS (RESPIR)		
<i>tadalafil 20 mg tablet (generic for adcirca)</i>	Formulary High Cost Generics	QL 2 TABS / 1 DAY PA
PROSTACYCLIN & PROSTACYCLIN DERIVATIVES		
VENTAVIS	Formulary Brands	PA S Specialty Drug
VITAMINS		
MULTIVITAMIN PREPARATIONS		
PRENATABS FA	Formulary Low Cost Generics	
<i>prenatal vit/iron fum/folic ac 65 mg-1 mg tablet</i>	Formulary Low Cost Generics	
<i>prenatal vitamin 27 with calcium/ferrous fumarate/folic acid</i>	Formulary Brands	
<i>prenatal vits with calcium no.72/ferrous fumarate/folic acid</i>	Formulary Low Cost Generics	
VITAMIN B COMPLEX		
<i>cyanocobalamin (vitamin b-12) 1000mcg/ml vial</i>	Formulary Low Cost Generics	
DODEX	Formulary Low Cost Generics	
<i>folic acid (folic acid 0.4 mg tablet, folic acid 0.8 mg tablet, folic acid 1 mg tablet)</i>	Formulary Low Cost Generics	

PRODUCT DESCRIPTION	TIER	LIMITS & RESTRICTIONS
VITAMIN D		
<i>calcitriol (calcitriol 0.25 mcg capsule, calcitriol 0.5 mcg capsule, calcitriol 1 mcg/ml solution)</i>	Formulary High Cost Generics	
<i>ergocalciferol (vitamin d2) 1250 mcg capsule</i>	Formulary Low Cost Generics	
VITAMIN K ACTIVITY		
<i>phytonadione (vit k1) 5 mg tablet</i>	Formulary High Cost Generics	QL 3 TABS / 1 FILL

Index of covered drugs

0

0.9 % sodium chloride 114

1

1ST TIER UNIFINE PENTIPS 96

1ST TIER UNIFINE PENTIPS PLUS 96

2

2-IN-1 LANCET DEVICE 96

A

A.I.R.S. NEBULIZER 96

abacavir sulfate 70

abacavir sulfate/lamivudine 70

ABILIFY ASIMTUFII 66

ABILIFY MAINTENA 66

abiraterone acetate 50

ABRYSVO 73

acamprosate calcium 37

acarbose 35

ACCU-CHEK 96

ACCU-CHEK AVIVA PLUS 96,110

ACCU-CHEK FASTCLIX LANCING DEV 96

ACCU-CHEK GUIDE CONTROL SOLN 96

ACCU-CHEK GUIDE ME GLUCOSE MTR 96

ACCU-CHEK GUIDE MONITOR SYSTEM 96

ACCU-CHEK GUIDE TEST STRIP 110

ACCU-CHEK SMARTVIEW 96,110

ACCU-CHEK SOFTCLIX 96

ACCUTANE 153

ACE AEROSOL CLOUD ENHANCER 96

acebutolol hcl 89

acetaminophen with codeine phosphate 1,2

acetaminophen/caffeine/dihydrocodeine bitartrate 2

acetazolamide 41

acetic acid 13

acetylcysteine 37

acitretin 153

ACTEMRA 136

ACTEMRA ACTPEN 136

ACTHAR 110

ACTHIB 73

ACTIMMUNE 140

acyclovir 80

ADACEL TDAP 73

adapalene 153

adefovir dipivoxil 80

ADEMPAS 150

adenovirus live type-4 and adenovirus live type-7

vaccine 73

adenovirus vaccine live type-4 73

adenovirus vaccine live type-7 73

ADJUSTABLE LANCING DEVICE 96

ADVAIR HFA 86

ADVATE 42

ADVOCATE PEN NEEDLE 96

ADVOCATE PEN NEEDLES 96

ADVOCATE SAFETY LANCET 96

ADYNOVATE 42

AEROCHAMBER MINI 96

AEROCHAMBER MV 96

AEROCHAMBER PLUS FLOW-VU 97

AEROCHAMBER WITH FLOWSIGNAL 97

AEROCHAMBER Z-STAT PLUS 97

AEROTRACH PLUS 97

AFIRMELLE 126

AFLURIA QUAD 2022-2023 73

AFLURIA QUAD 2022-23 (3YR UP) 73

AFLURIA QUAD 2023-2024 73

AFLURIA QUAD 2023-24 (3YR UP) 73

AFLURIA TRIV 2024-25 (3YR UP) 73

AFLURIA TRIVALENT 2024-25 73

AFSTYLA 42

AFTER PILL 126

AIR FILTER 97

AIRS ADULT AEROSOL MASK 97

AJOVY AUTOINJECTOR 48

AJOVY SYRINGE 48

AK-POLY-BAC 13

AKEEGA 50

ALA-CORT 18

albendazole	12	amlodipine besylate	88
ALBUSTIX REAGENT	159	amlodipine besylate/benazepril hcl	88
albuterol sulfate	86	amlodipine besylate/olmesartan medoxomil	88
alclometasone dipropionate	18	amlodipine besylate/valsartan	88
alendronate sodium	139	ammonium lactate	115
ALFERON N	79	ammonium lactate 12% cream (rx)	115
alfuzosin hcl	1	ammonium lactate 12% lotion (rx)	115
ALINIA	65	AMNESTEEM	153
ALL FLOW 1000	97	amoxapine	34
ALL FLOW 3000 KIT	97	amoxicillin	147
ALL FLOW 3000 PFT	97	amoxicillin/potassium clavulanate	147
ALL FLOW 4000	97	amphetamine sulfate	8
ALL FLOW 5000	97	ampicillin trihydrate	147
ALL FLOW 6000	97	anagrelide hcl	72
ALLERGIST TRAY	97	anastrozole	50
ALLERGIST TRAY SYR-PERM NEEDLE	97	ANORO ELLIPTA	25
allopurinol	139	ANZEMET	38
ALOCRIL	17	apo-varenicline 0.5 mg tablet (apotex)	84
ALOMIDE	117	apo-varenicline 1 mg tablet (apotex)	84
alosetron hcl	119	apraclonidine hcl	41
ALPHANATE	42	aprepitant	38
ALPHANINE SD	42	APRI	126
alprazolam	81	APTIOM	31
ALPROLIX	42	APTIVUS	71
ALTABAX	15	ARANELLE	126
ALTAVERA	126	ARANESP	87
ALTUVIIIO	42	ARCALYST	17
ALVAIZ	87	AREXVY	74
alvimopan	94	AREXVY ADJUVANT COMPONENT	74
ALYACEN	126	AREXVY ANTIGEN COMPONENT	74
AMABELZ	116	aripiprazole	66
amantadine hcl	63	ARISTADA	66
ambrisentan	150	ARISTADA INITIO	66
amcinonide	18	armodafinil	12
AMETHIA	126	ARNUITY ELLIPTA	124
AMETHYST	126	ASCOMP WITH CODEINE	2
amiloride hcl	111	asenapine maleate	66
amiloride hcl/hydrochlorothiazide	111	ASHLYNA	126
amiodarone hcl	21	ASMANEX	124
amitriptyline hcl	34	ASMANEX HFA	124
amitriptyline hcl/chlordiazepoxide	34	aspirin	146

aspirin/dipyridamole	146	BABY CONVERSION PACK 2	97
ASSURE ID PEN NEEDLE	97	bacitracin	13
ASSURE LANCE	97	bacitracin/polymyxin b sulfate	13
atazanavir sulfate	71	baclofen	152
atenolol	89	BAFIERTAM	142
atenolol/chlorthalidone	89	balsalazide disodium	119
atomoxetine hcl	10	BALVERSA	50
atorvastatin calcium	46	BALZIVA	127
atovaquone	65	BAQSIMI	45
atovaquone/proguanil hcl	64	BARACLUDE	80
atropine sulfate	118	BAXDELA	23
ATROVENT HFA	25	BAYER CHEWABLE ASPIRIN	146
AUBRA	126	benazepril hcl	149
AUBRA EQ	126	benazepril hcl/hydrochlorothiazide	149
AUROVELA	127	BENEFIX	43
AUROVELA 24 FE	127	benzhydrocodone hcl/acetaminophen	2
AUROVELA FE	127	benznidazole	65
AUSTEDO	92	benzonatate	150
AUSTEDO 12MG START TITR(WK1-4)	92	benztropine mesylate	63
AUSTEDO TD TITRATN PK (WK 1-2)	92	BERINERT	140
AUSTEDO XR	92	BESIVANCE	13
AUSTEDO XR TITRATION KT(WK1-4)	92	BESREMI	50
AUTOLET LANCING DEVICE	97	betamethasone dipropionate	18
AUTOSHIELD DUO PEN NEEDLE	97	betamethasone dipropionate/propylene glycol	18
AUTOSOFT 30 INFUSION SET PACK	97	betamethasone valerate	18
AUTOSOFT XC INFUSION SET PACK	97	BETASERON	142
AVIANE	127	betaxolol hcl	89
AVITA	153	bethanechol chloride	84
AVONEX	142	bexarotene	50,152
AVONEX PEN	142	BEXSERO	74
AYUNA	127	BEYFORTUS	80
AZASITE	13	bicalutamide	50
azathioprine	47	BIJUVA	116
azelaic acid	15	BIKTARVY	70
azelastine hcl	117	bimatoprost	42
azithromycin	138	bisoprolol fumarate	89
AZURETTE	127	bisoprolol fumarate/hydrochlorothiazide	89
B		BIVIGAM	73
BABY CONVERSION KIT	97	BLISOVI 24 FE	127
BABY CONVERSION PACK 1	97	BLISOVI FE	127
		BOOSTRIX TDAP	73

bosentan	150	calcium acetate	137
BREATHERITE	98	CAMILA	127
BREATHERITE SPACER-ADULT MASK	98	CAMRESE	127
BREATHERITE SPACER-INFANT MASK	98	CAMRESE LO	127
BREATHERITE SPACER-LG CHLD MSK	98	candesartan cilexetil	149
BREATHERITE SPACER-NEONATE MSK	98	CANNULA	98
BREATHERITE SPACER-SM CHLD MSK	98	capecitabine	51
BREATHRITE	98	CAPLYTA	66
BREO ELLIPTA	86	CAPRELSA	51
BREYNA	86	CAPVAXIVE	74
BREZTRI AEROSPHERE	87	carbamazepine	28
BRIELLYN	127	carbidopa/levodopa	64
BRILINTA	72	carbidopa/levodopa/entacapone	64
brimonidine tartrate	41	carbinoxamine maleate	45
brinzolamide	41	CAREFINE PEN NEEDLE	98
BRIVIACT	28	CARESENS LANCET	98
bromfenac sodium	16	CARESOFT LANCING DEVICE	98
bromocriptine mesylate	112	CARETOUCH PEN NEEDLE	98
BRUKINSA	51	CARETOUCH SAFETY LANCETS	98
BUBBLES THE FISH II	98	CARETOUCH TWIST LANCET	98
budesonide	124	carglumic acid	113
budesonide/formoterol fumarate	86	carisoprodol	151,152
BULK SYRINGE	98	carisoprodol/aspirin/codeine phosphate	152
bumetanide	111	CARNITOR SF	140
buprenorphine	7	carteolol hcl	41
buprenorphine hcl	8	CARTIA XT	21
buprenorphine hcl/naloxone hcl	8	carvedilol	89
bupropion hcl	32	CAYA CONTOURED	144
bupirone hcl	83	CAYSTON	139
butalbital/acetaminophen	1	CAZANT	127
butalbital/acetaminophen/caffeine	81	cefaclor	93
butalbital/acetaminophen/caffeine/codeine phosphate	2	cefadroxil	93
butalbital/aspirin/caffeine	146	cefdinir	93
BUTTERFLY TOUCH LANCET	98	cefixime	93
		cefpodoxime proxetil	94
C		cefprozil	93
cabergoline	112	cefuroxime axetil	93
CABLIVI	72	celecoxib	145
calcipotriene	115	cephalexin	93
calcitonin, salmon, synthetic	146	CEQUR SIMPLICITY	98
calcitriol	154,161	CEQUR SIMPLICITY INSERTER	98

CERDELGA	115	clindamycin hcl	24
cetorelix acetate	121	clindamycin palmitate hcl	24
cevimeline hcl	84	clindamycin ph 1% gel (generic for cleocin t)	24
CHATEAL	127	clindamycin phosphate	24
CHATEAL EQ	127	clindamycin phosphate/benzoyl peroxide	25
CHEMET	123	clobazam	29
CHEMSTRIP MICRAL	159	clobetasol propionate	18
chlordiazepoxide hcl	81	clobetasol propionate/emollient base	18
chlorhexidine gluconate	15	CLOMID	116
chloroquine phosphate	64	clomiphene citrate	116
chlorpromazine hcl	69	clomipramine hcl	34
chlorthalidone	112	clonazepam	29
chlorzoxazone	152	clonidine	90
CHOLBAM	120	clonidine hcl	90
cholestyramine (with sugar)	46	clopidogrel bisulfate	72
cholestyramine/aspartame	46	clorazepate dipotassium	81,82
chorionic gonadotropin, human	122	clotrimazole	40
CHOSEN LANCET	98	clotrimazole/betamethasone dipropionate	40
CHOSEN LANCING DEVICE	98	clozapine	66
CHOSEN SAFETY LANCET	98	COAGADEX	43
ciclopirox	40	COAGUCHEK	99
ciclopirox olamine	40	COAGUCHEK XS	99
cilostazol	72	COARTEM	64
cimetidine	78	codeine phosphate/butalbital/aspirin/caffeine	2
cimetidine hcl	78	codeine phosphate/guaifenesin	150
CIMZIA	156	codeine sulfate	2
cinacalcet hcl	146	colchicine	90
CINRYZE	140	colesevelam hcl	46
CIPRO	23	colestipol hcl	46
CIPRO HC	23	COMBIPATCH	116
ciprofloxacin	23	COMBIVENT RESPIMAT	25
ciprofloxacin hcl	13,23	COMETRIQ	51
ciprofloxacin hcl/dexamethasone	13	COMFORT EZ	99
ciprofloxacin hcl/fluocinolone acetonide	14	COMFORT EZ PEN NEEDLE	99
citalopram hydrobromide	33	COMFORT TOUCH PLUS SAFETY LANC	99
CLARAVIS	153	COMFORT TOUCH ULT THIN LANCET	99
clarithromycin	138	COMIRNATY	74
clemastine fumarate	118	COMIRNATY 2023-2024	74
CLEOCIN	24	COMIRNATY 2024-2025	74
CLICKFINE	98	COMP-AIR NEBULIZER COMPRESSOR	99
CLIMARA PRO	116	COMPACT COMPRESSOR NEBULIZER	99

COMPACT ULTRASONIC NEBULIZER	99	dalfampridine	141
COMPLERA	70	danazol	126
COMPRO	69	dantrolene sodium	152
CONSTULOSE	113	dapsone	49,154
CONTRACE	10	DAPTACEL DTAP	73
CORDRAN	18	darifenacin hydrobromide	121
CORIFACT	43	darunavir	71
CORLANOR	89	darunavir ethanolate	71
CORTROPHIN	110	dasatinib	52
COSENTYX (2 SYRINGES)	136	DASETTA	127
COSENTYX SENSOREADY (2 PENS)	136	DAYSEE	127
COSENTYX SENSOREADY PEN	136	DEBLITANE	127
COSENTYX SYRINGE	136	deferasirox	124
COSENTYX UNOREADY PEN	136	deferiprone	124
COTELLIC	51	DELSTRIGO	70
CREON	120	demeclocycline hcl	23
CRESEMBA	39	DEPO-ESTRADIOL	116
cromolyn sodium	17,18	DEPO-SUBQ PROVERA 104	133
CRYSSELLE	127	DESCOVY	70
cyanocobalamin (vitamin b-12)	160	desipramine hcl	34
cyclobenzaprine hcl	152	desloratadine	45
cyclopentolate hcl	118	desmopressin acetate	133
cyclophosphamide	51	desogestrel-ethinyl estradiol	127
CYCLOPHOSPHAMIDE 25 MG CAPSULE (BRAND)	52	desogestrel-ethinyl estradiol/ethinyl estradiol	127
CYCLOPHOSPHAMIDE 50 MG CAPSULE (BRAND)	52	desonide	18
cycloserine	49	desoximetasone	18
CYCLOSET	112	desvenlafaxine suc er 100 mg tablet (generic for Pristiq)	32
cyclosporine	88,117	desvenlafaxine suc er 25 mg tablet (generic for Pristiq)	32
cyclosporine, modified	88	desvenlafaxine suc er 50 mg tablet (generic for Pristiq)	32
cyproheptadine hcl	119	DEVILBISS DISPOSABLE NEBULIZER	99
CYRED	127	DEVILBISS TRAVELER	99
CYRED EQ	127	dexamethasone	124
CYSTADROPS	118	DEXAMETHASONE INTENSOL	124
CYSTAGON	140	dexamethasone sodium phosphate	16,124,125
CYSTARAN	118	dexamethasone sodium phosphate/pf	124
D		DEXCOM G6 RECEIVER	99
D-PENAMINE	123	DEXCOM G6 SENSOR	99
dabigatran etexilate mesylate	26	DEXCOM G6 TRANSMITTER	99

DEXCOM G7 RECEIVER	99	divalproex sodium	30
DEXCOM G7 SENSOR	99	DODEX	160
dexmethylphenidate hcl	10,11	dofetilide	21
dextroamp-amphetamin 15 mg tab (generic adderall) . 8		DOJOLVI	113
dextroamp-amphetamin 20 mg tab (generic adderall) . 9		DOLISHALE	127
dextroamphetamine sulf-saccharate/amphetamine sulf- aspartate	9	donepezil hcl	84
dextroamphetamine sulfate	9	dorzolamide hcl	41
DIACOMIT	29,30	dorzolamide hcl/timolol maleate	41
DIASTIX REAGENT	159	dorzolamide hcl/timolol maleate/pf	41
diazepam	82	DOTTI	116
diclofenac potassium	145	DOVATO	70
diclofenac sodium	16,52,145	doxazosin mesylate	89
diclofenac sodium/misoprostol	145	doxepin hcl	34,153
dicloxacillin sodium	148	doxycycline hyclate	14,24
dicyclomine hcl	25	doxycycline monohydrate	24
DIFFERIN	153	dronabinol	120
DIFICID	138	DROPLET GENTEEL LANCING DEVICE	99
diflorasone diacetate	19	DROPLET LANCETS	100
diflunisal	145	DROPLET PEN NEEDLE	100
DIGITEK	89	DROPSAFE PEN NEEDLE	100
DIGOX	89	DRYSOL	153
digoxin	89	DUAVEE	116
dihydroergotamine mesylate	1	duloxetine hcl	32
DILANTIN	31	DUPIXENT PEN	154
DILT-XR	21	DUPIXENT SYRINGE	154
diltiazem 24hr er 360 mg cap (generic for cardizem cd)	21	DUREX AIR	144
diltiazem hcl	22	DUREX EXTRA SENSITIVE	144
DILUENT FOR ELIGARD	148	DUREX TROPICAL	144
diluent for epoprostenol sodium (glycine)	148	dutasteride	139
DILUENT FOR HIBERIX	148	dutasteride/tamsulosin hcl	139
DILUENT FOR NOVOSEVEN RT	148		
DILUENT-MERCK LIVE VIRUS VACC	148	E	
dimethyl fumarate	142	EASIVENT	100
DIPENTUM	119	EASY COMFORT PEN NEEDLE	100
diphenoxylate hcl/atropine sulfate	119	EASY COMFORT PEN NEEDLES	100
dipyridamole	110	EASY GLIDE PEN NEEDLE	100
disopyramide phosphate	21	EASY TOUCH LANCING DEVICE	100
disulfiram	37	EASY TOUCH PEN NEEDLE	100
DIURIL	111	econazole nitrate	40
		ECONTRA ONE-STEP	128
		EDURANT	70

efavirenz	70	epinastine hcl	117
efavirenz/emtricitabine/tenofovir disoproxil fumarate . 70		epinephrine	155
eletriptan hydrobromide	48	epinephrine 0.15 mg auto-inject (teva)	155
ELIGARD	122	epinephrine 0.15 mg auto-inject (generic for adrenaclick)	155
ELINEST	128	epinephrine 0.15 mg auto-inject (generic for epi-pen jr / mylan)	155
ELIQUIS	26	epinephrine 0.3 mg auto-inject (generic for adrenaclick)	155
ELLA	128	epinephrine 0.3 mg auto-inject (generic for epi-pen / mylan)	155
ELMIRON	37	epinephrine 0.3 mg auto-inject (teva)	155
ELOCTATE	43	EPITOL	28
ELURYNG	128	EPIVIR HBV	71
EMBRACE LANCING DEVICE	100	eplerenone	150
EMBRACE SAFETY LANCET	100	epoprostenol sodium	151
EMCYT	52	epoprostenol sodium (glycine)	151
EMEND	38	ergocalciferol (vitamin d2)	161
EMGALITY PEN	48	ergoloid mesylates	1
EMGALITY SYRINGE	48	ERGOMAR	1
EMOQUETTE	128	ergotamine tartrate/caffeine	1
EMSAM	64	ERIVEDGE	52
emtricitabine	71	ERLEADA	52
emtricitabine/tenofovir disoproxil fumarate	71	erlotinib hcl	52
EMZAHH	128	ERRIN	128
enalapril maleate	149	ERTACZO	40
enalapril maleate/hydrochlorothiazide	149	erythromycin base	14,138
ENBREL	156,157	erythromycin base in ethanol	14
ENBREL MINI	157	erythromycin base/benzoyl peroxide	15
ENBREL SURECLICK	157	escitalopram oxalate	33
ENDARI	140	esomeprazole magnesium	78
ENDOCET	3	ESPEROCT	43
ENGERIX-B ADULT	74	ESTARYLLA	128
ENGERIX-B PEDIATRIC-ADOLESCENT	74	estazolam	82
ENILLORING	128	estradiol	117
enoxaparin sodium	26,27	estradiol valerate	117
ENPRESSE	128	estradiol/norethindrone acetate	117
ENSKYCE	128	eszopiclone	83
ENSPRYNG	144	ethacrynic acid	111
entacapone	63	ethambutol hcl	49
entecavir	80	ethinyl estradiol/drospirenone	128
ENTRESTO	148		
ENTRESTO SPRINKLE	148		
ENULOSE	113		
EPCLUSA	123		

ethosuximide	32	FERRIPROX	124
ethynodiol diacetate-ethinyl estradiol	128	FETZIMA	32
etodolac	145	FILTER NEEDLE	100
etonogestrel/ethinyl estradiol	128	FILTER PAD	100
etoposide	52	FILTER, VALVE SET FOR LL & LC	100
etravirine	70	finasteride	139
EUCRISA	21	fingolimod hcl	143
EURAX	16	flavoxate hcl	121
EUTHYROX	156	flecainide acetate	21
everolimus	52,53,134	FLOLAN	151
EVOTAZ	71	FLOW-EZE	100
EVRYSDI	140	FLUAD QUAD 2022-2023	74
EXEL HYPODERMIC NEEDLE	100	FLUAD QUAD 2023-2024	74
EXEL SYRINGE	100	FLUAD TRIVALENT 2024-2025	74
EXEL TUBERCULIN SYRINGE	100	FLUARIX QUAD 2022-2023	74
exemestane	53	FLUARIX QUAD 2023-2024	74
EXPIRATORY	100	FLUARIX TRIVALENT 2024-2025	74
EZ-LETS	100	FLUBLOK QUAD 2022-2023	74
ezetimibe	46	FLUBLOK QUAD 2023-2024	74
ezetimibe/simvastatin	46	FLUBLOK TRIVALENT 2024-2025	74
F			
FACTIVE	23	FLUCELVAX QUAD 2022-2023	74
FALMINA	128	FLUCELVAX QUAD 2023-2024	74
famciclovir	80	FLUCELVAX TRIVALENT 2024-2025	74
famotidine	78	fluconazole	39
famotidine 20 mg tablet (rx only)	78	flucytosine	39
FANAPT	66	fludrocortisone acetate	125
FASENRA PEN	17	FLULAVAL QUAD 2022-2023	74
FC2 FEMALE CONDOM	144	FLULAVAL QUAD 2023-2024	75
febuxostat	139	FLULAVAL TRIVALENT 2024-2025	75
FEIBA	43	FLUMIST QUAD 2022-2023	75
felbamate	28	FLUMIST QUAD 2023-2024	75
felodipine	88	FLUMIST TRIVALENT 2024-2025	75
FEMCAP	144	flunisolide	16
FEMYNOR	128	fluocinolone acetonide	19
fenofibrate	46	fluocinolone acetonide oil	16
fenofibrate nanocrystallized	46	fluocinolone acetonide/shower cap	19
fenofibrate,micronized	46	fluocinonide	19
fenofibric acid (choline)	46	fluocinonide/emollient base	19
fentanyl	3	fluoride (sodium)	95
		fluorometholone	16
		fluorouracil	152

fluoxetine hcl	33
fluphenazine decanoate	69
fluphenazine hcl	69
flurazepam hcl	82
flurbiprofen	145
flurbiprofen sodium	16
flutamide	53
fluticasone prop 50 mcg spray (rx only)	16
fluticasone propionate	16,19,125
fluticasone propionate/salmeterol xinafoate	86
fluvastatin sodium	47
fluvoxamine maleate	33
FLUZONE HIGH-DOSE QUAD 2022-23	75
FLUZONE HIGH-DOSE QUAD 2023-24	75
FLUZONE HIGH-DOSE TRIV 2024-25	75
FLUZONE QUAD 2022-2023	75
FLUZONE QUAD 2023-2024	75
FLUZONE TRIVALENT 2024-2025	75
folic acid	160
FOLLISTIM AQ	122
FOLLISTIM PEN DEVICE	100
fondaparinux sodium	27
formoterol fumarate/nebulizer	86
fosamprenavir calcium	71
fosfomycin tromethamine	13
fosinopril sodium	149
fosinopril sodium/hydrochlorothiazide	149
FREESTYLE LIBRE 14 DAY READER	100
FREESTYLE LIBRE 14 DAY SENSOR	100
FREESTYLE LIBRE 2 READER	101
FREESTYLE LIBRE 2 SENSOR	101
FREESTYLE LIBRE 3 PLUS SENSOR	101
FREESTYLE LIBRE 3 READER	101
FREESTYLE LIBRE 3 SENSOR	101
FULPHILA	87
furosemide	111
FUZEON	69
FYAVOLV	117
FYCOMPA	28
FYREMADEL	121

G

gabapentin	30
GALAFOLD	115
galantamine hbr	84
ganirelix acetate	121
GARDASIL 9	75
gatifloxacin	14
GAVILYTE-C	120
GAVILYTE-G	120
GAVILYTE-N	120
gefitinib	53
gemfibrozil	46
GENERLAC	113
GENGRAF	88
GENOTROPIN	133
GENTAK	14
gentamicin sulfate	14,15
GENVOYA	71
GILOTRIF	53
glatiramer acetate	141
GLATOPA	141
GLEOSTINE	53
glimepiride	37
glipizide	37
glipizide/metformin hcl	37
glucagon 1 mg emergency kit	45
glucagon 1 mg emergency kit (generic glucagen)	45
glucagon hcl	45
glutamine	140
glyburide	37
glyburide,micronized	37
glyburide/metformin hcl	37
glycopyrrolate	25
GLYDO	118
GLYTACTIN 20PE BETTERMILK LITE	113
GLYXAMBI	36
GOJJI LANCETS	101
granisetron hcl	38
GRANIX	87
GRASTEK	72

griseofulvin ultramicrosize	38	HUMALOG KWIKPEN U-200	135
griseofulvin, microsize	38	HUMALOG MIX 50-50	135
guanfacine hcl	90,91	HUMALOG MIX 50-50 KWIKPEN	135
GVOKE	45	HUMALOG MIX 75-25	135
GVOKE HYPOPEN 1-PACK	45	HUMALOG TEMPO PEN U-100	135
GVOKE HYPOPEN 2-PACK	45	HUMATE-P	43
GVOKE PFS 1-PACK SYRINGE	45	HUMIRA	157
GVOKE PFS 2-PACK SYRINGE	45,46	HUMIRA PEN	157
H		HUMIRA PEN CROHN'S-UC-HS	158
HADLIMA	157	HUMIRA PEN PSOR-UEVITS-ADOL HS	158
HADLIMA PUSH TOUCH	157	HUMIRA(CF)	158
HADLIMA(CF)	157	HUMIRA(CF) PEDIATRIC CROHN'S	158
HADLIMA(CF) PUSH TOUCH	157	HUMIRA(CF) PEN	158
HAEGARDA	140	HUMIRA(CF) PEN CROHN'S-UC-HS	158
HAILEY	128	HUMIRA(CF) PEN PEDIATRIC UC	158
HAILEY 24 FE	128	HUMIRA(CF) PEN PSOR-UV-ADOL HS	158
HAILEY FE	128	HUMULIN 70-30	134
HALDOL DECANOATE 100	68	HUMULIN 70/30 KWIKPEN	134
HALDOL DECANOATE 50	68	HUMULIN N	134
halobetasol propionate	19	HUMULIN N KWIKPEN	134
HALOETTE	128	HUMULIN R	135
haloperidol	68	HUMULIN R U-500	136
haloperidol decanoate	68	HUMULIN R U-500 KWIKPEN	136
haloperidol lactate	68	HYCAMTIN	53
HARVONI	123	hydralazine hcl	159
HAVRIX	75	hydrochlorothiazide	111
HEALTHWISE PEN NEEDLE	101	hydrocodone bitartrate	3
HEALTHY ACCENTS UNIFINE PENTIP	101	hydrocodone bitartrate/acetaminophen	3
HEATHER	128	hydrocodone polistirex/chlorpheniramine polistirex	150
HEMLIBRA	43	hydrocodone/ibuprofen	3
HEMOFIL M	43	hydrocortisone	19,125
heparin sodium,porcine	27	hydrocortisone 1% cream (rx only)	19
heparin sodium,porcine in 0.9 % sodium chloride	27,159	hydrocortisone acetate	19
heparin sodium,porcine/pf	27	hydrocortisone acetate/pramoxine hcl	19
HEPLISAV-B	75	hydrocortisone butyrate	20
HER STYLE	128	hydrocortisone valerate	20
HIBERIX	75	hydrocortisone-1% ointment	20
homatropine hbr	118	hydrocortisone/acetic acid	13
HUMALOG	135	hydromorphone hcl	3,4
		hydroxychloroquine sulfate	64
		hydroxyurea	54

hydroxyzine hcl	81	insulin lispro protamine and insulin lispro	135
hydroxyzine pamoate	81	insulin nph human isophane/insulin regular, human .	134
hyoscyamine sulfate	25	INSULIN PEN NEEDLE	102
HYPODERMIC NEEDLE	102	INSUPEN	102
I			
ibandronate sodium	139	INSUPEN PEN NEEDLE	102
IBRANCE	54	INTEGRA NEEDLE	102
IBU	145	INTEGRA SYRINGE	102
ibuprofen	145	INTELENCE	70
icatibant acetate	94	INTRON A	79
ICLEVIA	128	INTROVALE	129
icosapent ethyl	47	INVEGA HAFYERA	66
IDELVION	43	INVEGA SUSTENNA	66
IDHIFA	54	INVEGA TRINZA	66
ILARIS	17	IPOL	75
ILET INFUSION KIT-INSET	102	ipratropium bromide	26,118
ILET INFUSION-CONTACT DETACH	102	ipratropium bromide/albuterol sulfate	26
imatinib mesylate	54	irbesartan	149
IMBRUVICA	54	irbesartan/hydrochlorothiazide	149
imipramine hcl	34	ISENTRESS	70
imiquimod	152	ISENTRESS HD	70
IMPAVIDO	65	ISIBLOOM	129
IN-CHECK DIAL	102	isoniazid	49
INBRIJA	64	isosorbide dinitrate	159
INCASSIA	129	isosorbide mononitrate	159
INCONTROL PEN NEEDLE	102	isotretinoin	154
INCRUSE ELLIPTA	25	ISTURISA	125
indapamide	112	itraconazole	39
indomethacin	145	IV ADMINISTRATION SET	102
INFANRIX DTAP	73	ivabradine hcl	89
INGREZZA	92	IVENIX PRIMARY ADMINISTRAT SET	102
INGREZZA INITIATION PK(TARDIV)	93	ivermectin	12
INGREZZA SPRINKLE	93	IXINITY	43
INLYTA	55	J	
INNOSPIRE ELEGANCE	102	JAIMIESS	129
INPEN (FOR HUMALOG)	102	JAKAFI	55
INPEN (FOR NOVOLOG OR FIASP)	102	JANSSEN COVID-19 VACCINE (EUA)	75
insulin aspart	135	JARDIANCE	36
insulin glargine, human recombinant analog	135	JASMIEL	129
insulin lispro	135	JENCYCLA	129
		JENTADUETO	35

JENTADUETO XR	35
JINTELI	117
JIVI	43
JOLESSA	129
JULEBER	129
JULIE	129
JULUCA	70
JUNEL	129
JUNEL FE	129
JUNEL FE 24	129
JUXTAPID	47

K

KALBITOR	138
KALLIGA	129
KALYDECO	95
KARIVA	129
KELNOR 1-35	129
KELNOR 1-50	129
KESIMPTA PEN	143
ketoconazole	39
KETONE TEST STRIP	158
ketoprofen	145
ketorolac tromethamine	16,146
KETOSTIX REAGENT	158
KIMONO	144
KINERET	136
KINRIX	75
KIONEX	137
KISQALI	55
KISQALI FEMARA CO-PACK	55,56
KLAYESTA	40
KLOR-CON M10	114
KLOR-CON M15	114
KLOR-CON M20	114
KLOXXADO	91
KOATE	43
KOGENATE FS	43
KOSELUGO	56
KOVALTRY	43
KRAZATI	56

KURVELO	129
KYNMOBI	112

L

labetalol hcl	89
lacosamide	31
lactulose	113
LAGEVRIO (EUA)	80
LAGEVRIO 200 MG CAP (EUA) USG DISTRIBUTED	80
lamivudine	71
lamivudine/zidovudine	71
lamotrigine	28
LAMPIT	65
LANAFLEX	113
LANCETS	102
LANCING DEVICE	102
lansoprazole	78
lansoprazole dr 15 mg capsule (rx only)	79
lanthanum carbonate	137
LANTUS	135
LANTUS SOLOSTAR	135
lapatinib ditosylate	56
LARIN	129
LARIN 24 FE	129
LARIN FE	129
latanoprost	42
LC PLUS	102
LC SPRINT NEBULIZER	103
ledipasvir/sofosbuvir	123
LEENA	129
leflunomide	111
lenalidomide	56
LESSINA	129
letrozole	56
leucovorin calcium	37
LEUKERAN	56
leuprolide acetate	122
levalbuterol tartrate	86
LEVEMIR	135
LEVEMIR FLEXPEN	135

LEVEMIR FLEXTOUCH	135	lorazepam	82
LEVER LOCK CANNULA	103	LORAZEPAM INTENSOL	82
levetiracetam	29	LORYNA	130
levobunolol hcl	41	losartan potassium	149
levocarnitine	140	losartan potassium/hydrochlorothiazide	149
levocarnitine (with sugar)	140	loteprednol etabonate	16
levocetirizine 5 mg tablet (rx only)	45	lovastatin	47
levocetirizine dihydrochloride	45	LOW-OGESTREL	130
levofloxacin	23	loxapine succinate	68
LEVONEST	129	lubiprostone	94
levonorgestrel	129	LUER-LOK SYRINGE	103
levonorgestrel/ethinyl estradiol	130	LUERSLIP SYRINGE	103
levonorgestrel/ethinyl estradiol and ethinyl estradiol	130	luliconazole	40
LEVORA-28	130	LUMAKRAS	56
levorphanol tartrate	4	LUMIGAN	42
levothyroxine sodium	156	LUPRON DEPOT	122
LEXIVA	71	LUPRON DEPOT-PED	122
LIBERVANT	82	lurasidone hcl	66
lidocaine	153	LUTERA	130
lidocaine hcl	118	LYBALVI	67
lidocaine/prilocaine	153	LYLEQ	130
LIFESHIELD BLUNT CANNULA	103	LYLLANA	117
lindane	16	LYNPARZA	57
linezolid	25	LYSODREN	57
LINZESS	94	LYTGOBI	57
liothyronine sodium	156	LYZA	130
lisdexamfetamine dimesylate	9,10		
lisinopril	149	M	
lisinopril/hydrochlorothiazide	149	M-M-R II VACCINE	75
LITE TOUCH	103	mafenide acetate	15
LITETOUCH	103	malathion	16
lithium carbonate	91	maraviroc	69
lithium citrate	91	MARLISSA	130
LIVTENCITY	79	MASK SET WITH Y-PIECE	103
LO-ZUMANDIMINE	130	MATULANE	57
LOJAIMIESS	130	MAVENCLAD	141
LOKELMA	137	MAVYRET	123
LOMAIRA	8	MAXICOMFORT II PEN NEEDLE	103
loperamide hcl	119	MAXICOMFORT SAFETY PEN NEEDLE	103
LOPHLEX	113	MAYZENT	143
lopinavir/ritonavir	72	meclizine hcl	38

MEDROL	125	methylgonovine maleate	146
medroxyprogesterone acetate	133,134	methylphenidate er 10 mg cap (authorized generic)	11
MEDTRONIC EXT INFUSION SET	103	methylphenidate er 15 mg cap (authorized generic)	11
mefloquine hcl	64	methylphenidate er 20 mg cap (authorized generic)	11
megestrol acetate	134	methylphenidate er 30 mg cap (authorized generic)	11
MEKINIST	57	methylphenidate er 40 mg cap (authorized generic)	11
meloxicam	146	methylphenidate er 50 mg cap (authorized generic)	11
melphalan	57	methylphenidate er 60 mg cap (authorized generic)	11
memantine hcl	91	methylphenidate hcl	11,12
MENACTRA	75	methylprednisolone	125
MENOPUR	123	methyltestosterone	126
MENQUADFI	75	metoclopramide hcl	121
MENTAX	40	metolazone	112
MENVEO A-C-Y-W-135-DIP	75	metoprolol succinate	90
MENVEO MENA COMPONENT	76	metoprolol tartrate	90
MENVEO MENCYW-135 COMPONENT	76	metoprolol tartrate/hydrochlorothiazide	90
meprobamate	83	metronidazole	65
mercaptopurine	57	mexiletine hcl	21
meropenem	139	MICRO THIN LANCET	103
mesalamine	119	MICROAIR MESH NEBULIZER	103
MESNEX	37	MICROCHAMBER	103
METADATE ER	11	MICRODOT INSULIN PEN NEEDLE	103
metaxalone	152	MICRODOT SAFETY LANCET	103
metformin hcl	35	MICROGESTIN	130
metformin hcl 1,000 mg tablet (generic for glucophage)	35	MICROGESTIN 24 FE	130
metformin hcl 500 mg tablet (generic for glucophage)	35	MICROGESTIN FE	130
methadone hcl	4	MICROLET	103
METHADONE INTENSOL	4	MICROSPACER	103
METHADOSE	4	midodrine hcl	156
methazolamide	41	mifepristone	146
methenamine hippurate	13	miglitol	35
methimazole	156	miglustat	115
methocarbamol	152	MILI	130
methotrexate sodium	57	MIMVEY	117
methotrexate sodium/pf	57	MINI ULTRA-THIN II	103
methoxsalen	95	MINIMED MIO ADVANCE	103
methscopolamine bromide	26	MINIMED QUICK SET	103
methsuximide	32	MINIMED SILHOUETTE	103
methylidopa	91	minocycline hcl	24
		minoxidil	159
		mirabegron	85

mirtazapine	34	mycophenolate sodium	47
misoprostol	78	MYFEMBREE	121
MOBILE LANCETS	103	MYLERAN	57
modafinil	12	MYORISAN	154
MODERNA COVID (12Y UP)VAC(EUA)	76	MYRBETRIQ	85
MODERNA COVID 23-24(6M-11Y)EUA	76		
MODERNA COVID 24-25(6M-11Y)EUA	76	N	
MODERNA COVID BIVAL(6MO UP)EUA	76	nabumetone	146
MODERNA COVID BIVAL(6MO-5Y)EUA	76	nadolol	90
MODERNA COVID(6M-5Y) VACC(EUA)	76	naftifine hcl	39
MODERNA COVID-19 BOOSTER (EUA)	76	naloxone hcl	92
moexipril hcl	149	naloxone hcl 4 mg nasal spray (rx)	91
molindone hcl	68	naltrexone hcl	92
mometasone furoate	20	NANO 2ND GEN PEN NEEDLE	104
MONO-LINYAH	130	naproxen	146
MONOJECT	103	naproxen/esomeprazole magnesium	146
MONOJECT CONTROL SYRINGE	104	naratriptan hcl	48
MONOJECT MAGELLAN	104	NARCAN	92
MONOJECT PHARMACY TRAY	104	nateglinide	36
MONOJECT SAFETY SYRINGE	104	NAYZILAM	83
MONOJECT SMARTIP CANNULA	104	nebivolol hcl	90
MONOJECT SYRINGE	104	NECON	130
MONOJECT SYRINGE PHARMACY TRAY	104	NEEDLE	104
MONOJECT TB SAFETY SYRINGE	104	NEEDLES	104
MONOJECT TB SYRINGE	104	nefazodone hcl	34
MONOJECT TUBERCULIN SYRINGE	104	NEO-POLYCIN	14
MONONINE	44	neomycin sulfate	22
montelukast sodium	17	neomycin sulfate/bacitracin/polymyxin b	14
morphine sulfate	4,5	neomycin sulfate/polymyxin b sulfate/gramicidin d	14
MORPHINE SULFATE IR 15 MG TAB (BRAND)	5	neomycin sulfate/polymyxin b sulfate/hydrocortisone	14
MORPHINE SULFATE IR 30 MG TAB (BRAND)	5	neomycin/polymyxin b sulfate/dexamethasone	14
MOUNJARO	35	NEUAC	25
MOUTHPIECE	104	NEUPRO	112
MOVANTIK	94	nevirapine	70
moxifloxacin hcl	14	NEXAVAR	58
MRESVIA	76	NICORETTE	85
MSUD EXPRESS15	113	nicotine	85
MULTAQ	21	nicotine polacrilex	85
mupirocin	15	NICOTROL	85
MY WAY	130	NICOTROL NS	85
mycophenolate mofetil	47	nifedipine	88

NIKKI	130	NUCYNTA	5
nimodipine	88	NUPLAZID	67
NINLARO	58	NURTEC ODT	48
nitazoxanide	65	NUWIQ	44
NITRO-BID	159	NYAMYC	40
nitrofurantoin	13	NYLIA	131
nitrofurantoin macrocrystal	13	NYMYO	131
nitrofurantoin monohydrate/macrocrystals	13	nystatin	39,40,41
nitroglycerin	159	nystatin/triamcinolone acetonide	41
nizatidine	78	NYSTOP	41
nonoxynol 9	144		
NORA-BE	130	O	
NORDITROPIN FLEXPOR	133	OBIZUR	44
norelgestromin/ethinyl estradiol	130	OCELLA	131
norethindrone	130	octreotide acetate	155
norethindrone acetate	134	ODACTRA	72
norethindrone acetate-ethinyl estradiol	117,131	ODEFSEY	71
norethindrone acetate-ethinyl estradiol/ferrous fumarate	131	ODOMZO	58
norgestimate-ethinyl estradiol	131	ofloxacin	14
norgestrel-ethinyl estradiol	131	olanzapine	67
NORPACE CR	21	olanzapine/fluoxetine hcl	33
NORTREL	131	olmesartan medoxomil	149
nortriptyline hcl	34	olmesartan medoxomil/hydrochlorothiazide	149
NORVIR	72	olopatadine hcl	117
NOSE CLIP	104	olopatadine hcl 0.1% eye drop (rx)	118
NOURIANZ	63	OLUMIANT	137
NOVAREL	123	omega-3 acid ethyl esters	47
NOVAVAX COVID 2023-2024 (EUA)	76	omeprazole	79
NOVAVAX COVID 2024-2025 (EUA)	76	OMNIFLEX DIAPHRAGM	144
NOVAVAX COVID-19 VACC,ADJ(EUA)	76	OMNIPOD 5 (G6/LIBRE 2 PLUS)	105
NOVOEIGHT	44	OMNIPOD 5 G6 INTRO KIT (GEN 5)	105
NOVOFINE 32	104	OMNIPOD 5 G6 PODS (GEN 5)	105
NOVOFINE AUTOCOVER	104	OMNIPOD 5 G6-G7 INTRO KT(GEN5)	105
NOVOFINE PLUS	104	OMNIPOD 5 G6-G7 PODS (GEN 5)	105
NOVOPEN ECHO	104	OMNIPOD 5 INTRO(G6/LIBRE2PLUS)	105
NOVOSEVEN RT	44	OMNIPOD CLASSIC PDM KIT(GEN 3)	105
NOVOTWIST	104	OMNIPOD CLASSIC PODS (GEN 3)	105
NOXAFIL	39	OMNIPOD DASH INTRO KIT (GEN 4)	105
NUBEQA	58	OMNIPOD DASH PDM KIT (GEN 4)	105
NUCALA	17	OMNIPOD DASH PODS (GEN 4)	105
		OMNIPOD GO PODS	105

ondansetron	38
ondansetron hcl	38
ONE WAY MOUTHPIECE	105
ONETOUCH DELICA PLUS LANC DEV	105
ONETOUCH DELICA PLUS LANCET	105
ONETOUCH DELICA SAFETY LANCET	105
ONETOUCH ULTRASOFT 2 LANCET	105
ONUREG	58
OPSUMIT	151
OPSYNVI	151
OPTICHAMBER	105
OPTICHAMBER DIAMOND	105
OPVEE	92
ORAL SYRINGE	105
ORALONE	20
ORENCIA	111
ORENCIA CLICKJECT	111
ORGOVYX	122
ORIAHNN	122
ORLISSA	122
ORKAMBI	94
ORLADEYO	138
orphenadrine citrate	152
oseltamivir phosphate	80
OSPHENA	116
OTEZLA	148
OVIDREL	123
oxandrolone	126
oxaprozin	146
oxazepam	83
OXBRYTA	86
oxcarbazepine	31
oxiconazole nitrate	40
oxybutynin chloride	121
oxycodone hcl	5,6
oxycodone hcl/acetaminophen	6
OXYCONTIN	6
oxymorphone hcl	6
OZEMPIC	35

P

PACERONE	21
PALFORZIA	72
paliperidone	67
PANDA MASK	105
pantoprazole sodium	79
PAROEX	15
paromomycin sulfate	64
paroxetine hcl	33
PAXLOVID	79
PAXLOVID (EUA)	79
pazopanib hcl	58
PEDIARIX	76
PEDIATRIC MASK	105
PEDIATRIC PANDA MASK	105
PEDVAXHIB	76
peg 3350/sod sulf/sod bicarb/sod chloride/potassium chloride	120
peg 3350/sodium sulfate/sod chloride/kcl/ascorbate sod/vit c	120
PEGASYS	80
PEN NEEDLE	105
PEN NEEDLES	106
PENBRAYA	76
PENBRAYA MENACWY COMPONENT	76
PENBRAYA MENB COMPONENT	76
penicillamine	124
penicillin v potassium	147
PENTACEL	76
PENTACEL ACTHIB COMPONENT	76
PENTACEL DTAP-IPV COMPONENT	76
pentazocine hcl/naloxone hcl	8
PENTIPS	106
pentoxifylline	87
PERFECT POINT SAFETY LANCETS	106
PERIFLEX LQ PKU	113
perindopril erbumine	149
PERIOGARD	15
permethrin	16
perphenazine	69

perphenazine/amitriptyline hcl	34	pirfenidone	150
PFIZER COVID (12Y UP) VAC(EUA)	76	PIRMELLA	131
PFIZER COVID (5-11Y) VAC (EUA)	76	piroxicam	146
PFIZER COVID (6M-4Y) VACC(EUA)	76	PKU COOLER 10	113
PFIZER COVID 2023-24(5-11Y)EUA	77	PKU COOLER 15	114
PFIZER COVID 2023-24(6M-4Y)EUA	77	PKU COOLER 20	114
PFIZER COVID 2024-25(5-11Y)EUA	77	PKU EXPRESS15	114
PFIZER COVID 2024-25(6M-4Y)EUA	77	PLEGRIDY	142
PFIZER COVID BIVAL (12Y UP)EUA	77	PLEGRIDY PEN	142
PFIZER COVID BIVAL (5-11YR)EUA	77	PNEUMOVAX 23	77
PFIZER COVID BIVAL (6MO-4Y)EUA	77	POCKET CHAMBER	106
PFIZER COVID-19 VACCINE (EUA)	77	podofilox	154
PFLEX TRAINER	106	POLYCIN	14
PH 12 DILUENT FOR FLOLAN	148	polymyxin b sulfate/trimethoprim	25
phenazopyridine hcl	153	POMALYST	58
phenelzine sulfate	32	PORTIA	131
PHENEX-1	113	posaconazole	39
PHENEX-2	113	potassium chloride	114
phenobarbital	81	potassium citrate	113
phenoxybenzamine hcl	1	pramipexole di-hcl	112
phentermine hcl	8	prasugrel hcl	72
PHENYL-FREE 2	113	pravastatin sodium	47
PHENYLADE	113	praziquantel	13
phenylephrine hcl	118	prazosin hcl	89
phenytoin	31	PRECISIONGLIDE	106
phenytoin sodium extended	31	PRED-G	14
PHILITH	131	prednisolone	125
PHLEXY-10	113	prednisolone ac 1% eye drop (generic pred forte)	16
PHOSLYRA	137	prednisolone sodium phosphate	16,125
PHOSPHOLINE IODIDE	42	prednisone	125
phytonadione (vit k1)	161	PREDNISONONE INTENSOL	125
PILLOW MASK	106	pregabalin	30,31
PILLOW MASK FOR CHILDREN	106	PREGNYL	123
pilocarpine hcl	42,84	PREHEVBRIO	77
pimecrolimus	20	PRENATABS FA	160
pimozide	68	prenatal vitamin 27 with calcium/ferrous fumarate/folic acid	160
PIMTREA	131	prenatal vitamins with calcium/ferrous fumarate/folic acid	160
pioglitazone hcl	37	prenatal vits with calcium no.72/ferrous fumarate/folic acid	160
pioglitazone hcl/glimepiride	37		
pioglitazone hcl/metformin hcl	37		
PIP LANCET	106		

pretomanid	49	PUSH BUTTON SAFETY LANCET	106
PREVALITE	46	pyrazinamide	49
PREVENT DROPSAFE PEN NEEDLE	106	pyridostigmine bromide	84
PREVNAR 13	77	PYRUKYND	86
PREVNAR 20	77		
PREVYMIS	79	Q	
PREZCOBIX	72	QSYMIA	10
PREZISTA	72	QUADRACEL DTAP-IPV	77
PRIFTIN	49	quazepam	83
primidone	29	quetiapine fumarate	67
PRIORIX	77	quinapril hcl	149
PRO COMFORT PEN NEEDLE	106	quinapril hcl/hydrochlorothiazide	149
PRO COMFORT SAFETY LANCET	106	quinidine sulfate	21
probenecid	114	quinine sulfate	65
probenecid/colchicine	115	QVAR REDIHALER	125
PROCHAMBER	106		
prochlorperazine	69	R	
prochlorperazine maleate	69	rabeprazole sodium	79
PROCTO-MED HC	20	RADICAVA ORS	91
PROCTOCORT	20	RADIOGARDASE	137
PROCTOSOL-HC	20	RAGWITEK	73
PROCTOZONE-HC	20	raloxifene hcl	116
PROFILNINE	44	ramelteon	83
progesterone	134	ramipril	149
progesterone, micronized	134	ranolazine	88
PROMACTA	87	rasagiline mesylate	64
promethazine hcl	119	RASUVO	58
promethazine hcl/dextromethorphan hbr	150	REBIF	142,143
PROMETHEGAN	119	REBIF REBIDOSE	142
PRONEB ULTRA II	106	REBINYN	44
propafenone hcl	21	RECLIPSEN	131
propranolol hcl	90	RECOMBINATE	44
propranolol hcl/hydrochlorothiazide	90	RECOMBIVAX HB	77
propylthiouracil	156	RECTIV	159
PROQUAD	77	REDITREX	140
protriptyline hcl	34	REGULAR BEVEL NEEDLES	106
PSV SET	106	RELENZA	80
PULMICORT FLEXHALER	125	relion novolin 70-30 vial	134
PULMOZYME	150	relion novolin n 100 unit/ml	134
PURE COMFORT LANCETS	106	relion novolin n u-100 flexpen	134
PURE COMFORT SAFETY LANCETS	106	relion novolin r 100 unit/ml	136

relion novolin r u-100 flexpen	136	RUBBER MOUTHPIECE	106
RELION PEN NEEDLES	106	rufinamide	31,32
RENACIDIN	114	RUKOBIA	69
repaglinide	36	RYBELSUS	35
REPATHA PUSHTRONEX	47	RYTARY	64
REPATHA SURECLICK	47		
REPATHA SYRINGE	47	S	
RETACRIT	87	SAFESNAP INSULIN SYRINGE	106
RETEVMO	59	SAFETY PEN NEEDLE	106
REUSABLE NEBULIZER KIT	106	SAFETY SYRINGE WITH SHIELD	106
REVCIVI	115	SAFETY-LOK SAFETY SYRINGE	106
REXULTI	67	SAFETY-LOK SAFETY SYRINGES	107
REYATAZ	72	SAFETY-LOK SYRINGES	106
REYVOW	48	salsalate	146
RHOPRESSA	42	SANTYL	115
RIASTAP	44	sapropterin dihydrochloride	115
ribavirin	80	SAVELLA	91
RIDAURA	121	SAXENDA	35
rifabutin	49	scopolamine	26
rifampin	49	SECUADO	68
riluzole	91	selegiline hcl	64
rimantadine hcl	79	selenium sulfide	15
RINVOQ	137	SELZENTRY	69
RINVOQ LQ	138	SEREVENT DISKUS	86
risedronate sodium	139	SEROSTIM	133
risperidone	67	sertraline hcl	33
risperidone microspheres	68	SETLAKIN	131
ritonavir	72	sevelamer carbonate	137
rivastigmine	84	SEVENFACT	44
rivastigmine tartrate	84	SHAROBEL	131
RIVIVE	92	SHINGRIX	77
RIXUBIS	44	SHINGRIX ADJUVANT COMPONENT	148
rizatriptan benzoate	48	SHINGRIX GE ANTIGEN COMPONENT	77
ROCKLATAN	42	SHORT BEVEL NEEDLES	107
roflumilast	150	SIDESTREAM	107
ropinirole hcl	112	SIDESTREAM MASK	107
ROSDAN	65	SIDESTREAM PEDIATRIC	107
rosuvastatin calcium	47	SIGNIFOR	155
ROTARIX	77	sildenafil 20 mg tablet (generic for revatio)	160
ROTATEQ	77	sildenafil citrate	160
ROZLYTREK	59	SILICONE MASK	107

silodosin	1	spironolactone/hydrochlorothiazide	150
silver sulfadiazine	15	SPRINTEC	131
SIMBRINZA	41	SPRYCEL	59,60
SIMLIYA	131	SPS	137
SIMPESSE	131	SRONYX	132
simvastatin	47	SSD	15
SINUSTAR	107	STELARA	137
sirolimus	141	STERILE LANCETS	107
SIRTURO	49	STERILE WATER DILUENT-PRIORIX	148
SKYRIZI	20	STIVARGA	60
SKYRIZI ON-BODY	20	STRENSIQ	115
SKYRIZI PEN	20	STRIBILD	71
sodium chloride 0.9 % (flush)	114	STRIVERDI RESPIMAT	86
sodium chloride for inhalation	114	SUBVENITE	29
sodium chloride irrigating solution	114	SUCRAID	116
sodium chloride/sodium bicarbonate/potassium chloride/peg	120	sucralfate	78
sodium oxybate	12	SUFLAVE	120
sodium phenylbutyrate	113	sulconazole nitrate	40
sodium polystyrene sulfonate	137	sulfacetamide sodium	14,15
sodium sulfate/potassium sulfate/magnesium sulfate	120	sulfacetamide sodium/prednisolone sodium phosphate	14
sofosbuvir/velpatasvir	123	sulfacetamide sodium/sulfur	154
SOFT TOUCH	107	sulfacetamide sodium/sulfur/urea	15
SOGROYA	133	sulfadiazine	23
solifenacin succinate	121	sulfamethoxazole/trimethoprim	23
SOLQUA 100-33	135	sulfasalazine	23
SOLTAMOX	116	SULFATRIM	23
SOLU-CORTEF	125	sulindac	146
SOLUTION TRANSFER DEVICE	107	sumatriptan	48
sorafenib tosylate	59	sumatriptan succinate	48,49
SORINE	90	sumatriptan succinate/naproxen sodium	49
SOTALOL AF	90	sunitinib malate	60
sotalol hcl	90	SUNLENCA	79
SOVALDI	123	SUNOSI	12
SPECIALTY USE NEEDLES	107	SUPER THIN LANCET	107
SPIKEVAX 2023-2024	77	SURE COMFORT	107
SPIKEVAX 2024-2025	77	SURE COMFORT PEN NEEDLE	107
SPIKEVAX COVID (18Y UP) VACC	77	SURE-FINE PEN NEEDLES	107
spinosad	16	SUSTIVA	70
spironolactone	139	SYEDA	132
		SYMDEKO	95

SYMJEPI	156	TAZVERIK	61
SYMPROIC	94	TECHLITE LANCETS	108
SYMTUZA	72	TECHLITE PEN NEEDLE	108
SYNJARDY	36	telmisartan	149
SYNJARDY XR	36	telmisartan/hydrochlorothiazide	149
SYNTHROID	156	temazepam	83
SYRINGE	107	temozolomide	61
SYRINGE BULK	107	TEMPO REFILL KIT	108
SYRINGE CATHETER TIP	107	TEMPO REFILL KIT (WITH GAUZE)	108
SYRINGE CATHETER TIP NON-STER	107	TEMPO SMART BUTTON	108
SYRINGE LUER-LOK NON-STERILE	107	TEMPO WELCOME KIT	108
SYRINGE LUER-LOK STERILE	107	TENCON	1
SYRINGE SLIP TIP NON-STERILE	107	TENIVAC	73
SYRINGE WITH NEEDLE	107	tenofovir disoproxil fumarate	71
SYRINGE WITHOUT NEEDLE	108	terazosin hcl	89
SYRINGE-LUER TIP CAP	108	terbinafine hcl	38
T			
T:SLIM X2	108	terbutaline sulfate	86
TABLOID	60	terconazole	40
tacrolimus	21,88	teriflunomide	141
tadalafil	160	teriparatide	147
tadalafil 20 mg tablet (generic for adcirca)	160	TERUMO SURGUARD2	108
TAFINLAR	60	testosterone	126
tafluprost/pf	42	testosterone cypionate	126
TAGRISSE	60	testosterone enanthate	126
TAKHZYRO	138	tetanus and diphtheria toxoids, adult	73
tamoxifen citrate	116	tetanus,diphtheria toxoid ped/pf	73
tamsulosin hcl	1	tetrabenazine	93
TANDEM MOBI AUTOSOFT 30 SUPPLY	108	tetracycline hcl	24
TANDEM MOBI AUTOSOFT XC SUPPLY	108	THALOMID	140
TANDEM MOBI CARTRIDGE	108	theophylline anhydrous	155
TANDEM MOBI TRUSTEEL SUPPLY	108	THIN LANCET	108
TARINA 24 FE	132	THIN LANCETS	108
TARINA FE	132	THIN WALL NEEDLES	108
TARINA FE 1-20 EQ	132	THIOLA EC	140
TASIGNA	60	thioridazine hcl	69
TAVNEOS	134	thiothixene	69
tazarotene	154	THRESHOLD IMT	108
TAZORAC	154	THRESHOLD PEP	108
TAZTIA XT	22	TIADYLT ER	22
		tiagabine hcl	31
		TILIA FE	132

timolol maleate	41,90	TREK S COMBO PACK	108
timolol maleate 0.25% eye drop (generic for timoptic)	41	TREK S COMPACT COMPRESSOR	109
timolol maleate 0.5% eye drops (generic for timoptic)	41	TREK S PORTABLE PWR KIT	109
tinidazole	65	TRELEGY ELLIPTA	87
tiopronin	141	treprostinil sodium	151
TIVICAY	70	tretinoin	61,153
TIVICAY PD	70	TRETEN	44
tizanidine hcl	152	TRI FEMYNOR	132
tobramycin	15	TRI-CHLOR	154
tobramycin in 0.225 % sodium chloride	22	TRI-ESTARYLLA	132
tobramycin/dexamethasone	15	TRI-LEGEST FE	132
TODAY CONTRACEPTIVE SPONGE	144	TRI-LINYAH	132
tolmetin sodium	145	TRI-LO-ESTARYLLA	132
tolterodine tartrate	121	TRI-LO-MARZIA	132
TOPCARE CLICKFINE	108	TRI-LO-MILI	132
topiramate	29	TRI-LO-SPRINTEC	132
toremifene citrate	116	TRI-MILI	132
torseamide	111	TRI-NYMYO	132
TOUJEO MAX SOLOSTAR	135	TRI-SPRINTEC	132
TOUJEO SOLOSTAR	135	TRI-VYLIBRA	132
TPOXX (NATIONAL STOCKPILE)	79	TRI-VYLIBRA LO	132
TRADJENTA	35	triamcinolone acetone	20
tramadol er 100 mg tablet (generic for ryzolt)	6	triamterene/hydrochlorothiazide	111
tramadol er 200 mg tablet (generic for ryzolt)	6	triazolam	83
tramadol er 300 mg tablet (generic for ryzolt)	7	trichloroacetic acid	154
tramadol hcl	7	trifluoperazine hcl	69
tramadol hcl er 100 mg capsule (generic for conzip)	7	trifluridine	15
tramadol hcl er 100 mg tablet (generic for ultram er)	7	trihexyphenidyl hcl	63
tramadol hcl er 200 mg capsule (generic for conzip)	7	TRIJARDY XR	36
tramadol hcl er 200 mg tablet (generic for ultram er)	7	TRIKAFTA	95
tramadol hcl er 300 mg capsule (generic for conzip)	7	trimethobenzamide hcl	38
tramadol hcl er 300 mg tablet (generic for ultram er)	7	trimethoprim	13
tramadol hcl/acetaminophen	7	trimipramine maleate	34
trandolapril	150	TRINTELLIX	34
tranexamic acid	44	TRIUMEQ	71
TRANSFER SET	108	TRIUMEQ PD	71
tranylcypramine sulfate	32	TRIVORA-28	132
travoprost	42	TROJAN BARESKIN	144
trazodone hcl	34	TROJAN EXTENDED PLEASURE	144
TRECATOR	50	TROJAN PLEASURE PACK	144
		TROJAN ULTRA RIBBED	144

TROJAN ULTRA THIN	144	ULTRACARE PEN NEEDLE	109
trosopium chloride	121	UNIFINE PENTIPS	109
TRUE COMFORT LANCET	109	UNIFINE PENTIPS PLUS	109
TRUE COMFORT PEN NEEDLE	109	UNILET LANCETS	109
TRUE COMFORT SAFETY LANCET	109	UNIVERSAL SYRINGE TIP ADAPTOR	109
TRUE COVER	145	UPTRAVI	151
TRUEPLUS KETONE TEST STRIP	158	urea	154
TRUEPLUS PEN NEEDLE	109	ursodiol	120
TRULICITY	35	UZEDY	68
TRUMENBA	77		
TRUSTEEL INFUSION SET PACK	109	V	
TUBERCULIN SYRINGE	98	V-GO 20	109
TULANA	132	V-GO 30	109
TURALIO	61	V-GO 40	110
TURQOZ	132	valacyclovir hcl	80
TWINRIX	78	VALCHLOR	153
TWIST TOP LANCET	109	valganciclovir hcl	80
TYBLUME	132	valproic acid	31
TYBOST	69	valproic acid (as sodium salt) (valproate sodium)	31
TYMLOS	147	valsartan	149
TYRVAYA	84	valsartan/hydrochlorothiazide	149
TYVASO	151	VALTOCO	83
TYVASO DPI	151	vancomycin hcl	24
TYVASO REFILL KIT	151	VANFLYTA	61
TYVASO STARTER KIT	151	VAQTA	78
		varenicline tartrate	85
U		VARIVAX VACCINE	78
UDENYCA	87	VAXCHORA VACCINE	78
UDENYCA AUTOINJECTOR	87	VAXELIS	73
UDENYCA ONBODY	87	VAXNEUVANCE	78
ULESFIA	16	VELIVET	132
ULTICARE PEN NEEDLE	109	VELPHORO	137
ULTILET PEN NEEDLE	109	VEMLIDY	81
ULTRA FLO PEN NEEDLE	109	venlafaxine hcl	33
ULTRA THIN LANCET	109	VENTAVIS	160
ULTRA-FINE MICRO PEN NEEDLE	109	VENTOLIN HFA	86
ULTRA-FINE MINI PEN NEEDLE	109	verapamil hcl	22
ULTRA-FINE NANO PEN NEEDLE	109	VERIFINE PEN NEEDLE	110
ULTRA-FINE ORIGINAL PEN NEEDLE	109	VERIFINE SAFETY LANCET MINI	110
ULTRA-FINE SHORT PEN NEEDLE	109	VERIFINE UNIVERSAL LANCET	110
ULTRA-THIN II	109	VERZENIO	61

VESTURA	132
VICTOZA 2-PAK	35
VICTOZA 3-PAK	36
VIENVA	133
vigabatrin	31
VIGADRONE	31
VIGODER	31
VIIBRYD	34
VILACTIN AA PLUS 20 PE	114
vilazodone hcl	34
VIORELE	133
VIOS AEROSOL DELIVERY SYSTEM	110
VIREAD	71
VISTOGARD	38
VIVAGUARD LANCET	110
VIVAGUARD LANCING DEVICE	110
VIVAGUARD SAFETY LANCET	110
VIVITROL	92
VIVOTIF	78
VOCABRIA	70
VOLNEA	133
VONVENDI	44
voriconazole	39
VORTEX	110
VORTEX HOLDING CHAMBER-CHILD	110
VORTEX HOLDING CHAMBER-TODDLER	110
VOSEVI	123
VOWST	120
VOXZOGO	141
VRAYLAR	68
VUMERITY	142
VYFEMLA	133
VYLIBRA	133
VYNDAMAX	88
VYNDAQEL	89

W

warfarin sodium	26
WEGOXY	36
WERA	133
WIDE SEAL DIAPHRAGM	145

WILATE	44
WINDMILL TRAINER	110
WIXELA INHUB	86

X

XARELTO	26
XERMELO	119
XIFAXAN	25
XIIDRA	117
XPHE MAXAMUM	114
XPOVIO	61
XTANDI	62
XULANE	133
XULTOPHY 100-3.6	135
XYNTHA	45
XYNTHA SOLOFUSE	45

Y

YALE NEEDLES	110
YUVAFEM	117

Z

ZAFEMY	133
zafirlukast	17
zaleplon	83
ZARAH	133
ZEBUTAL	81
ZEGALOGUE AUTOINJECTOR	46
ZEGALOGUE SYRINGE	46
ZEJULA	62
ZELBORAF	62
ZENATANE	154
ZENPEP	120
ZEPBOUND	36
ZEPOSIA	143
ZERVIATE	118
zidovudine	71
zileuton	17
ziprasidone hcl	68
ZIRGAN	81
ZOKINVY	115

ZOLINZA	63
zolmitriptan	49
zolpidem tartrate	84
ZOMIG	49
zonisamide	32
ZONTIVITY	72
ZOVIA 1-35	133
ZUMANDIMINE	133
ZYKADIA	63
ZYLET	15