

Freedom Formulary

6 Tiers (List of Covered Drugs)

2018

for ConnectiCare SOLO plans

ConnectiCare[®]

This document is the complete ConnectiCare pharmacy drug list, or formulary, that is covered for ConnectiCare SOLO plans. This drug list is effective for plan year 2018. It is updated monthly and the last update was on October 1, 2017. The list changes as new drugs come to market or are removed from the market. Please check the Pharmacy Center on connecticare.com for the most up-to-date drug list covered by your plan.

What is the ConnectiCare formulary?

A formulary is a list of covered drugs — both generic and brand-name drugs — selected by ConnectiCare in consultation with a team of health care providers. It includes the prescription therapies believed to be a necessary part of a quality treatment program. ConnectiCare will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a ConnectiCare network pharmacy and other plan rules are followed.

How do I use the formulary?

To search for your drug within this formulary, please refer to the index, which starts on page 103.

This formulary will tell you what tier your drug is in. A drug tier is a group of medications included within a similar price range. Check your benefit summary to see what your cost-share is for the drugs in each tier.

Tier	What drugs are included
Tier 0	Drugs covered under health care reform
Tier 1	Preferred generic drugs
Tier 2	Non-preferred generic drugs
Tier 3	Preferred brand name drugs
Tier 4	Non-preferred brand name drugs
Tier 5	Preferred specialty drugs*
Tier 6	Non-preferred specialty drugs*

*Specialty drugs — filled by a specialty pharmacy and limited to a 30-day supply — are prescription medications that often require special storage, handling and close monitoring by you, your doctor or pharmacist. These drugs, designated as “limited availability” (LA) in this formulary, are used to treat complex conditions.

If your doctor prescribes a drug that is not listed on this formulary, please contact ConnectiCare for further information on coverage of the product in question. If it’s appropriate, ask your doctor about a generic medication or a more affordable alternative that is included in the drug list. Refer to your benefit summary by logging in on connecticare.com to determine actual cost-share amounts applicable to your plan.

What are generic drugs?

A generic drug is approved by the U.S. Food and Drug Administration (FDA) as having the same active ingredient as the brand-name drug. Generally, generic drugs cost less than brand name drugs.

This formulary differentiates between the two kinds of drugs by how they are presented on the list:

- generic drugs are italicized and spelled out in lowercase letters
- brand-name drugs are not italicized and spelled out in uppercase letters

Under your plan, a pharmacist will fill a generic drug for a prescription whenever a generic is available. For the most part, this will happen even if your prescription is written for a brand-name drug. But you or your doctor can specifically instruct the pharmacist to fill the prescription with a brand-name drug. When this happens, you may pay more and the cost will depend on your plan benefits. Please refer to your plan documents for details.

Are there any limitations on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These are indicated in the formulary with initials after their names. Here is a key to the limitations and how you will see them noted in the formulary:

Preauthorization (PA)

Some drugs require preauthorization. This means that you or your doctor will need to get approval from us before you fill your prescriptions. If you don't get approval, the drug may not be covered.

Preauthorization requests can be faxed to the ConnectiCare Pharmacy Services Department at 1-800-249-1367 by the prescribing physician's office. A form for submitting a request can be found on connecticare.com. If we deny a preauthorization request, we will notify you and your doctor in writing with the reason and information on how to appeal.

Some drugs that require preauthorization must be filled at a specialty pharmacy. Please refer to the "limited availability" section below for more information.

Quantity limits (QL)

For certain drugs, ConnectiCare limits the amount of the drug that we will cover. For example, ConnectiCare covers MAXALT (or its generic version, *rizatriptan*) for 9 tablets per 30 days. This may be in addition to a standard one-month or three-month supply.

Step therapy (ST)

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

Limited availability (LA)

Drugs labeled "LA" for "limited availability" must be filled by ConnectiCare's preferred specialty pharmacy, Accredo, and are limited to a 30-day supply. These drugs are prescription medications used to treat complex conditions and often require special storage, handling and close monitoring by you, your doctor or pharmacist. For more information, please visit accredo.com.

Affordable Care Act (ACA)

This refers to the preventive care guidelines of the federal Affordable Care Act, also known as health care reform. Drugs marked "ACA" may be free to you if they are prescribed under the preventive care guidelines of the ACA. You will not have to pay any copayment, coinsurance or anything toward your deductible. More information on ACA-covered drugs is available [here](#).

Can I get my prescriptions delivered to my home?

Our pharmacy benefit manager, Express Scripts, provides convenient home delivery by mail. Home delivery may save you money if you refill drugs every month and think you will be on the same drug(s) for six months or longer.

Home delivery is as safe as going to your local pharmacy. Express Scripts pharmacists check every order for accuracy and are available 24/7 to answer your questions. To compare costs and sign up for home delivery, visit express-scripts.com or call Express Scripts at 1-877-603-1032.

How do I contact someone at ConnectiCare?

To reach Member Services:

- Call 1-800-251-7722 (TTY: 1-800-833-8134) Monday-Thursday, 8 a.m. to 6 p.m., and Friday from 8 a.m. to 5 p.m.
- Send a secure message by logging into connecticare.com.
- For general questions *only*, email us at info@connecticare.com. Please do not use this address to send any personal, confidential or medical information, such as member ID, Social Security number or medical information. This is a regular email address that is not secure.

To reach Provider Services:

- Call 1-800-828-3407 Monday-Thursday, 8 a.m. to 6 p.m., and Friday from 9 a.m. to 5 p.m.
- For preauthorization requests or any medical management issue, call 1-800-562-6833 Monday-Friday from 8 a.m. to 5 p.m.
- Use our website at connecticare.com/providers to check benefit eligibility and claims status, review medical criteria and find forms.

If you need to mail us anything, send to:

ConnectiCare
Attention: Pharmacy Department
175 Scott Swamp Road
P.O. Box 4050
Farmington, CT 06034-4050

More contact information is available at connecticare.com.

Accessibility and Nondiscrimination Notice:

ConnectiCare complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. ConnectiCare does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

ConnectiCare:

- Provides free aids and services to people with disabilities to communicate effectively with us including qualified interpreters and information in alternate formats.
- Provides free language services to people whose primary language is not English, including translated documents and oral interpretation.

If you need these services, contact The Committee for Civil Rights.

If you believe that ConnectiCare has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

The Committee for Civil Rights
ConnectiCare
175 Scott Swamp Road
Farmington, CT 06032
1-800-251-7722 (TTY: 1-800-833-8134)

You can file a grievance in person at 175 Scott Swamp Road, Farmington, CT, or by mail or fax (860) 674-2232. If you need help filing a grievance, The Committee for Civil Rights is available to help you. You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office of Civil Rights Complaint Portal, available at:

<https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

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

Complaint forms are available at: <http://www.hhs.gov/ocr/office/file/index.html>.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-800-251-7722 (TTY: 1-800-833-8134).

ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis. Ligue para 1-800-251-7722 (TTY: 1-800-833-8134).

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer 1-800-251-7722 (TTY: 1-800-833-8134).

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-800-251-7722 (TTY: 1-800-833-8134)。

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-800-251-7722 (TTY: 1-800-833-8134).

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-800-251-7722 (ATS: 1-800-833-8134).

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-800-251-7722 (TTY: 1-800-833-8134).

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-800-251-7722 (телетайп: 1-800-833-8134).

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-800-251-7722 (TTY: 1-800-833-8134).

هاتف رقم 1-800-251-7722 برقم اتصل. بالمجان لك تتوافر اللغوية المساعدة خدمات فإن، اللغة اذكر تتحدث كنت إذا: ملحوظة 1-800-833-8134: واليكم الصم

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-800-251-7722 (TTY: 1-800-833-8134) 번으로 전화해 주십시오.

KUJDES: Nëse flitni shqip, për ju ka në dispozicion shërbime të asistencës gjuhësore, pa pagesë. Telefononi në 1-800-251-7722 (TTY: 1-800-833-8134).

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। 1-800-251-7722 (TTY: 1-800-833-8134) पर कॉल करें।

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-800-251-7722 (TTY: 1-800-833-8134).

ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-800-251-7722 (TTY: 1-800-833-8134).

ប្រយ័ត្ន: បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាជំនួយផ្នែកភាសា ដោយមិនគិតល្មើស គឺអាចមានសំរាប់អ្នក។ ចូរ ទូរស័ព្ទ 1-800-251-7722 (TTY: 1-800-833-8134)។

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. ફોન કરો 1-800-251-7722 (TTY: 1-800-833-8134).

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List of Abbreviations

ACA: Affordable Care Act.

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

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

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

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

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

Drug Name	Tier	Restrictions / limits
Anti - Infectives		
Antifungal Agents		
ABELCET	4	PA
AMBISOME	4	PA
<i>amphotericin b</i>	2	PA
ANCOBON	4	
<i>clotrimazole</i>	1	
CRESEMBA INTRAVENOUS	4	PA
CRESEMBA ORAL	4	QL
DIFLUCAN	4	
ERAXIS(WATER DILUENT)	4	PA
<i>fluconazole</i>	1	
<i>fluconazole in dextrose(iso-o)</i>	2	PA
<i>flucytosine</i>	2	
<i>griseofulvin microsize</i>	2	
<i>griseofulvin ultramicrosize</i>	2	
GRIS-PEG (ULTRAMICROSIZ E)	4	
<i>itraconazole</i>	2	ST; QL
<i>ketoconazole</i>	1	
LAMISIL	4	
MYCAMINE	4	PA
NOXAFIL	4	
<i>nystatin</i>	1	
ONMEL	4	PA
ORAVIG	4	ST; QL
SPORANOX	4	ST; QL

Drug Name	Tier	Restrictions / limits
SPORANOX PULSEPAK	4	PA; QL
<i>terbinafine hcl</i>	1	
VFEND	4	QL
VFEND IV	4	PA
<i>voriconazole intravenous</i>	2	PA
<i>voriconazole oral</i>	2	QL
Antivirals		
<i>abacavir</i>	5	
<i>abacavir-lamivudine</i>	5	
<i>abacavir-lamivudine-zidovudine</i>	5	
<i>acyclovir oral capsule</i>	1	
<i>acyclovir oral suspension</i>	2	
<i>acyclovir oral tablet</i>	1	
<i>acyclovir sodium</i>	2	PA
<i>adefovir</i>	2	
<i>amantadine hcl</i>	1	
APTIVUS	6	
ATRIPLA	6	
BARACLUDE	4	
<i>cidofovir</i>	2	PA
COMBIVIR	6	
COMPLERA	6	
CRIXIVAN	5	
DAKLINZA	6	PA; LA
DESCOVY	6	
<i>didanosine</i>	5	
EDURANT	6	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
EMTRIVA	5	
<i>entecavir</i>	2	
EPCLUSA	6	PA; LA
EPIVIR	6	
EPIVIR HBV ORAL SOLUTION	5	
EPIVIR HBV ORAL TABLET	6	
EPZICOM	6	
EVOTAZ	6	
<i>famciclovir</i>	1	
FLUMADINE	4	
<i>foscarnet</i>	2	PA
FOSCAVIR	4	PA
FUZEON	6	PA; LA
GENVOYA	6	
HEPSERA	4	
INTELENCE	6	
INVIRASE	5	
ISENTRESS HD	5	
ISENTRESS ORAL POWDER IN PACKET	6	
ISENTRESS ORAL TABLET	5	
ISENTRESS ORAL TABLET,CHEWABLE	5	
KALETRA ORAL SOLUTION	6	
KALETRA ORAL TABLET	5	
<i>lamivudine</i>	5	
<i>lamivudine-zidovudine</i>	5	

Drug Name	Tier	Restrictions / limits
LEXIVA	6	
<i>lopinavir-ritonavir</i>	2	
MAVYRET	6	PA; LA
<i>nevirapine</i>	5	
NORVIR	5	
ODEFSEY	6	
OLYSIO	5	PA; LA
<i>oseltamivir</i>	1	QL
PREZCOBIX	6	
PREZISTA	6	
RAPIVAB	4	PA
RELENZA DISKHALER	3	QL
RESCRIPTOR	5	
RETROVIR INTRAVENOUS	6	PA; LA
RETROVIR ORAL	6	
REYATAZ ORAL CAPSULE	5	
REYATAZ ORAL POWDER IN PACKET	6	
<i>ribavirin</i>	2	PA
<i>rimantadine</i>	2	
SELZENTRY	6	
SITAVIG	4	PA
SOVALDI	5	PA; LA
<i>stavudine</i>	5	
STRIBILD	6	
SUSTIVA	5	
SYNAGIS	6	PA; LA; QL
TAMIFLU ORAL CAPSULE	4	QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
TAMIFLU ORAL SUSPENSION FOR RECONSTITUTION	3	QL
TECHNIVIE	6	PA; LA
TIVICAY	6	
TRIUMEQ	6	
TRIZIVIR	6	
TRUVADA	6	
TYBOST	6	
<i>valacyclovir</i>	1	
VALCYTE ORAL RECON SOLN	4	
VALCYTE ORAL TABLET	4	QL
<i>valganciclovir oral recon soln</i>	2	
<i>valganciclovir oral tablet</i>	2	QL
VALTREX	4	
VEMLIDY	4	
VIDEX 2 GRAM PEDIATRIC	5	
VIDEX EC	6	
VIEKIRA PAK	6	PA; LA; QL
VIEKIRA XR	6	PA; LA
VIRACEPT	5	
VIRAMUNE	6	
VIRAMUNE XR	6	
VIRAZOLE	4	PA
VIREAD ORAL POWDER	6	
VIREAD ORAL TABLET	5	
VOSEVI	6	PA; LA; QL

Drug Name	Tier	Restrictions / limits
ZEPATIER	5	PA; LA; QL
ZERIT	6	
ZIAGEN ORAL SOLUTION	5	
ZIAGEN ORAL TABLET	6	
<i>zidovudine</i>	5	
ZOVIRAX	4	
Cephalosporins		
AVYCAZ	4	PA
CEDAX	4	
<i>cefaclor</i>	1	
<i>cefadroxil</i>	1	
<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	2	PA
CEFAZOLIN IN DEXTROSE (ISO-OS) INTRAVENOUS PIGGYBACK 2 GRAM/100 ML	4	PA
CEFAZOLIN IN DEXTROSE 5 %	4	
CEFAZOLIN IN STERILE WATER	4	
<i>cefazolin injection recon soln 1 gram, 10 gram, 20 gram, 500 mg</i>	2	PA
<i>cefazolin injection recon soln 100 gram, 300 g</i>	2	
<i>cefazolin intravenous</i>	2	PA
<i>cefdinir</i>	1	
<i>cefditoren pivoxil</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>cefepime</i>	2	PA
CEFEPIME IN DEXTROSE 5 %	4	
<i>cefepime in dextrose,iso-osm</i>	2	PA
<i>cefixime</i>	2	QL
CEFOTAN	4	PA
<i>cefotaxime</i>	2	PA
<i>cefotetan</i>	2	PA
CEFOTETAN IN DEXTROSE, ISO-OSM	4	
<i>cefoxitin</i>	2	PA
<i>cefoxitin in dextrose, iso-osm</i>	2	PA
<i>cefpodoxime</i>	2	QL
<i>cefprozil</i>	1	
<i>ceftazidime</i>	2	PA
CEFTAZIDIME IN D5W	4	PA
<i>ceftibuten</i>	2	
CEFTIN	4	
<i>ceftriaxone in dextrose,iso-os</i>	2	PA
<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	2	PA
CEFTRIAXONE INJECTION RECON SOLN 100 GRAM	4	PA
<i>ceftriaxone intravenous</i>	2	PA
<i>cefuroxime axetil</i>	1	
<i>cefuroxime sodium</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>cephalexin</i>	1	
DAXBIA	4	PA
FORTAZ	4	PA
FORTAZ IN DEXTROSE 5 %	4	PA
KEFLEX	4	
MAXIPIME	4	PA
SPECTRACEF	4	
SUPRAX	4	QL
TAZICEF	4	PA
TEFLARO	4	PA
ZERBAXA	4	PA
ZINACEF	4	PA
ZINACEF IN STERILE WATER	4	PA
Erythromycins & Other Macrolides		
<i>azithromycin intravenous</i>	2	PA
<i>azithromycin oral</i>	1	
<i>clarithromycin</i>	1	
DIFICID	4	PA; QL
<i>e.e.s. 400</i>	2	
E.E.S. GRANULES	4	
ERYPED 200	3	
ERYPED 400	3	
<i>ery-tab oral tablet,delayed release (dr/ec) 250 mg, 333 mg</i>	2	
ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 500 MG	3	
ERYTHROCIN	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>erythrocin (as stearate)</i>	2	
<i>erythromycin</i>	2	
<i>erythromycin ethylsuccinate</i>	2	
PCE	4	
ZITHROMAX INTRAVENOUS	4	PA
ZITHROMAX ORAL	4	
ZITHROMAX TRI-PAK	4	
ZITHROMAX Z-PAK	4	
ZMAX	4	
Miscellaneous Antiinfectives		
ALBENZA	4	
ALINIA	4	QL
<i>amikacin</i>	2	PA
<i>atovaquone</i>	2	PA
<i>atovaquone-proguanil</i>	2	PA
AZACTAM	4	PA
AZACTAM IN DEXTROSE (ISO-OSM)	4	PA
<i>aztreonam</i>	2	PA
<i>baciim</i>	2	PA
<i>bacitracin</i>	2	PA
BETHKIS	6	
BILTRICIDE	4	
CAPASTAT	4	PA
CAYSTON	6	PA
<i>chloramphenicol sod succinate</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>chloroquine phosphate</i>	1	PA
CLEOCIN	4	PA
CLEOCIN HCL	4	
CLEOCIN IN 5 % DEXTROSE	4	PA
CLEOCIN PEDIATRIC	4	
CLIN SINGLE USE	4	PA
<i>clindamycin hcl</i>	2	
<i>clindamycin in 5 % dextrose</i>	2	PA
<i>clindamycin palmitate hcl</i>	2	
<i>clindamycin pediatric</i>	2	
<i>clindamycin phosphate</i>	2	PA
COARTEM	4	PA
<i>colistin (colistimethate na)</i>	2	PA
COLY-MYCIN M PARENTERAL	4	PA
CYCLOSERINE	4	
DALVANCE	4	PA
<i>dapsone</i>	2	
DARAPRIM	5	PA
EMVERM	4	
<i>ethambutol</i>	2	
FLAGYL	4	
<i>gentamicin</i>	2	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>gentamicin in nacl (iso-osm) intravenous piggyback 100 mg/100 ml, 60 mg/50 ml, 70 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml, 90 mg/100 ml</i>	2	PA
GENTAMICIN IN NACL (ISO-OSM) INTRAVENOUS PIGGYBACK 100 MG/50 ML, 120 MG/100 ML	4	PA
<i>gentamicin sulfate (ped) (pf)</i>	2	PA
<i>gentamicin sulfate (pf) intravenous solution 100 mg/10 ml</i>	2	PA
GENTAMICIN SULFATE (PF) INTRAVENOUS SOLUTION 60 MG/6 ML	4	PA
<i>hydroxychloroquine</i>	2	
<i>imipenem-cilastatin</i>	2	PA
IMPAVIDO	4	PA
INVANZ	4	PA
<i>isoniazid injection</i>	2	PA
<i>isoniazid oral</i>	1	
<i>ivermectin</i>	2	
KITABIS PAK	6	
<i>linezolid intravenous</i>	2	PA
<i>linezolid oral</i>	2	QL
<i>linezolid-0.9% sodium chloride</i>	2	PA
MALARONE	4	PA

Drug Name	Tier	Restrictions / limits
MALARONE PEDIATRIC	4	PA
<i>mefloquine</i>	2	PA
MEPRON	4	PA
<i>meropenem</i>	2	PA
MERREM	4	PA
<i>metro i.v.</i>	2	PA
<i>metronidazole</i>	2	
<i>metronidazole in nacl (iso-os)</i>	2	PA
MYAMBUTOL	4	
MYCOBUTIN	4	
NEBUPENT	4	
<i>neomycin</i>	1	
ORBACTIV	4	PA
<i>paromomycin</i>	2	
PASER	4	
PENTAM	4	PA
PLAQUENIL	4	
<i>polymyxin b sulfate</i>	2	PA
PRIFTIN	3	
PRIMAQUINE	3	
PRIMAXIN IV	4	PA
<i>pyrazinamide</i>	2	
QUALAQUIN	4	PA
<i>quinine sulfate</i>	2	
<i>rifabutin</i>	2	
RIFADIN INTRAVENOUS	4	PA
RIFADIN ORAL	4	
RIFAMATE	4	
<i>rifampin intravenous</i>	2	PA
<i>rifampin oral</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
RIFATER	4	
SIRTURO	4	
SIVEXTRO INTRAVENOUS	4	PA
SIVEXTRO ORAL	4	
STREPTOMYCIN	4	PA
STROMEKTOL	4	
SYNERCID	4	PA
TIGECYCLINE	4	PA
TINDAMAX	4	QL
<i>tinidazole</i>	1	QL
TOBI	6	PA
TOBI PODHALER	6	
<i>tobramycin in 0.225 % nacl</i>	5	PA
<i>tobramycin in 0.9 % nacl</i>	2	PA
<i>tobramycin sulfate</i>	2	PA
TOBRAMYCIN WITH NEBULIZER	4	
TRECATOR	4	
TYGACIL	4	PA
XIFAXAN	4	
ZYVOX INTRAVENOUS	4	PA
ZYVOX ORAL	4	QL
Penicillins		
<i>amoxicillin</i>	1	
<i>amoxicillin-pot clavulanate</i>	2	
<i>ampicillin</i>	1	
<i>ampicillin sodium</i>	2	PA
<i>ampicillin-sulbactam</i>	2	PA

Drug Name	Tier	Restrictions / limits
AUGMENTIN ES-600	4	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML	3	
AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 250-62.5 MG/5 ML	4	
AUGMENTIN ORAL TABLET	4	
AUGMENTIN XR	4	
BICILLIN C-R	4	PA
BICILLIN L-A	4	PA
<i>dicloxacillin</i>	1	
MOXATAG	4	
<i>nafcillin</i>	2	PA
<i>nafcillin in dextrose iso-osm</i>	2	PA
<i>oxacillin</i>	2	PA
<i>oxacillin in dextrose(iso-osm)</i>	2	PA
PENICILLIN G POT IN DEXTROSE	4	PA
<i>penicillin g potassium</i>	2	PA
<i>penicillin g procaine</i>	2	PA
<i>penicillin g sodium</i>	2	PA
<i>penicillin v potassium</i>	1	
<i>pfizerpen-g</i>	2	PA
UNASYN	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ZOSYN IN DEXTROSE (ISO-OSM)	4	PA
Quinolones		
AVELOX	4	
AVELOX IN NACL (ISO-OSMOTIC)	4	PA
CIPRO	4	
CIPRO IN D5W	4	PA
CIPRO XR	4	
<i>ciprofloxacin</i>	1	
<i>ciprofloxacin (mixture)</i>	1	
<i>ciprofloxacin hcl</i>	1	
<i>ciprofloxacin in 5 % dextrose</i>	2	PA
<i>ciprofloxacin lactate</i>	2	PA
FACTIVE	4	
LEVAQUIN	4	
<i>levofloxacin in d5w</i>	2	PA
<i>levofloxacin intravenous</i>	2	PA
<i>levofloxacin oral</i>	1	
<i>moxifloxacin</i>	2	
MOXIFLOXACIN-SOD.ACE,SUL-WATER	4	PA
<i>ofloxacin</i>	2	
Sulfa's & Related Agents		
BACTRIM	4	
BACTRIM DS	4	
<i>sulfadiazine</i>	2	
<i>sulfamethoxazole-trimethoprim intravenous</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>sulfamethoxazole-trimethoprim oral</i>	1	
<i>sulfatrim</i>	1	
Tetracyclines		
ACTICLATE	4	PA
<i>avidoxy</i>	2	
AVIDOXY DK	4	PA
<i>demeclocycline</i>	2	
DORYX	4	ST
DORYX MPC	4	PA; ST
<i>doxy-100</i>	2	PA
<i>doxycycline hyclate oral capsule</i>	2	
<i>doxycycline hyclate oral tablet 100 mg, 20 mg</i>	2	
<i>doxycycline hyclate oral tablet 150 mg, 75 mg</i>	2	PA
<i>doxycycline hyclate oral tablet, delayed release (dr/ec)</i>	2	
<i>doxycycline monohydrate oral capsule</i>	2	
DOXYCYCLINE MONOHYDRATE ORAL CAPSULE,IR - DELAY REL,BIPHASE	4	ST
<i>doxycycline monohydrate oral suspension for reconstitution</i>	2	
<i>doxycycline monohydrate oral tablet</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
MINOCIN INTRAVENOUS	4	PA
MINOCIN ORAL CAPSULE 100 MG, 50 MG	4	PA
MINOCIN ORAL CAPSULE 75 MG	4	ST
<i>minocycline oral capsule</i>	2	
<i>minocycline oral tablet</i>	2	
<i>minocycline oral tablet extended release 24 hr</i>	2	ST
<i>mondoxyne nl</i>	2	
MONODOX	4	ST
ORACEA	4	ST
SOLODYN	4	ST
TARGADOX	4	PA
<i>tetracycline</i>	2	
VIBRAMYCIN ORAL CAPSULE	4	
VIBRAMYCIN ORAL SUSPENSION FOR RECONSTITUTION	4	
VIBRAMYCIN ORAL SYRUP	3	
Urinary Tract Agents		
FURADANTIN	4	
HIPREX	4	
MACROBID	4	
MACRODANTIN	4	
<i>methenamine hippurate</i>	1	

Drug Name	Tier	Restrictions / limits
<i>methenamine mandelate</i>	1	
MONUROL	4	QL
<i>nitrofurantoin</i>	1	
<i>nitrofurantoin macrocrystal</i>	1	
<i>nitrofurantoin monohyd/m-cryst</i>	1	
PRIMSOL	4	
<i>trimethoprim</i>	1	
Vancomycin		
VANCOCIN	4	
<i>vancomycin intravenous</i>	2	PA
<i>vancomycin oral</i>	2	
VIBATIV	4	PA
Antineoplastic & Immunosuppressant Drugs		
Adjunctive Agents		
<i>amifostine crystalline</i>	5	PA; LA
ELITEK	6	PA; LA
ETHYOL	6	PA; LA
KEPIVANCE	6	PA; LA
<i>leucovorin calcium injection</i>	5	PA; LA
<i>leucovorin calcium oral</i>	1	
<i>mesna</i>	5	PA; LA
MESNEX INTRAVENOUS	6	PA; LA
MESNEX ORAL	4	
VISTOGARD	6	PA
VORAXAZE	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
XGEVA	6	QL
Antineoplastic & Immunosuppressant Drugs		
ABRAXANE	6	PA; LA
ADCETRIS	6	PA
<i>adriamycin</i>	5	PA; LA
<i>adrucil</i>	5	PA; LA
AFINITOR	6	PA; LA
AFINITOR DISPERZ	6	PA; LA
ALECENSA	6	PA; LA
ALIMTA	6	PA; LA
ALKERAN INTRAVENOUS	6	PA; LA
ALKERAN ORAL	4	
ALUNBRIG	6	PA; LA
<i>anastrozole</i>	1	
ARIMIDEX	4	
AROMASIN	4	
ARRANON	6	PA; LA
ARZERRA	6	PA; LA
ASTAGRAF XL	6	
AVASTIN	6	PA; LA
<i>azacitidine</i>	5	PA; LA
AZASAN	6	
<i>azathioprine</i>	5	
<i>azathioprine sodium</i>	2	PA
BAVENCIO	6	PA
BELEODAQ	6	PA
BENDEKA	6	PA; LA
<i>bexarotene</i>	2	PA
<i>bicalutamide</i>	1	
BICNU	6	PA; LA

Drug Name	Tier	Restrictions / limits
<i>bleo 15k</i>	2	PA
<i>bleomycin</i>	5	PA; LA
BLINCYTO	6	PA
BOSULIF	6	PA; LA; QL
<i>busulfan</i>	5	PA; LA
BUSULFEX	6	PA; LA
CABOMETYX	6	PA; LA; QL
CAMPTOSAR	6	PA; LA
<i>capecitabine</i>	5	PA; LA
CAPRELSA	6	PA; QL
<i>carboplatin</i>	5	PA; LA
CASODEX	4	
CELLCEPT INTRAVENOUS	6	PA; LA
CELLCEPT ORAL CAPSULE	6	
CELLCEPT ORAL SUSPENSION FOR RECONSTITUTION	6	PA
CELLCEPT ORAL TABLET	6	
<i>cisplatin</i>	5	PA; LA
<i>cladribine</i>	5	PA; LA
<i>clofarabine</i>	5	PA; LA
CLOLAR	6	PA; LA
COMETRIQ	6	PA; QL
COSMEGEN	6	PA; LA
COTELLIC	6	PA; LA
<i>cyclophosphamide intravenous</i>	5	PA; LA
CYCLOPHOSPHAMIDE ORAL	4	
<i>cyclosporine intravenous</i>	5	PA; LA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>cyclosporine modified</i>	5	
<i>cyclosporine oral</i>	5	
CYRAMZA	6	PA
<i>cytarabine</i>	5	PA; LA
<i>cytarabine (pf)</i>	5	PA; LA
<i>dacarbazine</i>	5	PA; LA
DACOGEN	6	PA; LA
DARZALEX	6	PA; LA
<i>daunorubicin</i>	5	PA; LA
<i>decitabine</i>	5	PA; LA
DOCEFREZ	6	PA; LA
<i>docetaxel intravenous solution 160 mg/16 ml (10 mg/ml), 160 mg/8 ml (20 mg/ml), 20 mg/2 ml (10 mg/ml), 20 mg/ml (1 ml), 80 mg/4 ml (20 mg/ml), 80 mg/8 ml (10 mg/ml)</i>	5	PA; LA
DOCETAXEL INTRAVENOUS SOLUTION 20 MG/ML	6	PA; LA
DOXIL	6	PA; LA
<i>doxorubicin</i>	5	PA; LA
<i>doxorubicin, peg-liposomal</i>	2	PA
DROXIA	3	
ELIGARD	6	LA
ELIGARD (3 MONTH)	6	LA
ELIGARD (4 MONTH)	6	LA

Drug Name	Tier	Restrictions / limits
ELIGARD (6 MONTH)	6	LA
ELLEENCE	6	PA; LA
EMCYT	4	
EMPLICITI	6	PA; LA
ENVARBUS XR	6	
<i>epirubicin</i>	5	PA; LA
ERBITUX	6	PA; LA
ERIVEDGE	6	PA; LA; QL
ERWINAZE	6	PA; LA
ETOPOPHOS	6	PA; LA
<i>etoposide intravenous</i>	5	PA; LA
<i>etoposide oral</i>	2	
EVOMELA	6	PA
<i>exemestane</i>	2	
FARESTON	3	
FARYDAK	6	PA; LA
FASLODEX	6	PA
FEMARA	4	
FIRMAGON KIT W DILUENT SYRINGE	6	PA
<i>floxuridine</i>	5	PA; LA
<i>fludarabine</i>	5	PA; LA
<i>fluorouracil</i>	5	PA; LA
<i>flutamide</i>	2	
FOLOTYN	6	PA; LA
GAZYVA	6	PA; LA
<i>gemcitabine</i>	5	PA; LA
GEMZAR	6	PA; LA
<i>gengraf</i>	5	
GILOTRIF	6	PA; LA; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
GLEEVEC	6	PA; LA
GLEOSTINE	4	
GLIADEL WAFER	4	
HALAVEN	6	PA; LA
HERCEPTIN	6	PA; LA
HEXALEN	4	
HYCAMTIN	6	PA; LA
HYDREA	4	
<i>hydroxyurea</i>	1	
IBRANCE	6	PA; LA; QL
ICLUSIG	6	PA; QL
IDAMYCIN PFS	6	PA; LA
<i>idarubicin</i>	5	PA; LA
IDHIFA	6	PA; LA; QL
IFEX	6	PA; LA
<i>ifosfamide</i>	5	PA; LA
<i>ifosfamide-mesna</i>	5	PA; LA
<i>imatinib</i>	5	PA; LA
IMBRUVICA	6	PA; QL
IMFINZI	6	PA; LA
IMLYGIC	6	PA; LA
IMURAN	6	
INLYTA	6	PA; LA; QL
IODOPEN	4	PA
IRESSA	6	PA
<i>irinotecan</i>	5	PA; LA
ISTODAX	6	PA; LA
IXEMPRA	6	PA; LA
JAKAFI	6	PA; LA; QL
JEVTANA	6	PA; LA
KADCYLA	6	PA; LA
KEYTRUDA	6	PA

Drug Name	Tier	Restrictions / limits
KISQALI	6	PA; LA
KISQALI FEMARA CO-PACK	6	PA; LA
KYPROLIS	6	PA; LA
LARTRUVO	6	PA; LA
LENVIMA	6	PA; LA
<i>letrozole</i>	1	
LEUKERAN	3	
<i>leuprolide</i>	5	
<i>lipodox</i>	5	PA; LA
LONSURF	6	PA; LA
LUPRON DEPOT	6	
LUPRON DEPOT (3 MONTH)	6	
LUPRON DEPOT (4 MONTH)	6	
LUPRON DEPOT (6 MONTH)	6	
LUPRON DEPOT-PED	6	
LUPRON DEPOT-PED (3 MONTH)	6	
LYNPARZA	6	PA; LA
LYSODREN	4	
MARQIBO	6	PA
MATULANE	5	
MEGACE ES	4	
<i>megestrol</i>	1	
MEKINIST	6	PA; LA; QL
<i>melfhalan</i>	2	
<i>melfhalan hcl</i>	5	PA; LA
<i>mercaptopurine</i>	2	
<i>methotrexate sodium (pf)</i>	5	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>methotrexate sodium injection</i>	5	
<i>methotrexate sodium oral</i>	1	
<i>mitomycin</i>	5	PA; LA
<i>mitoxantrone</i>	5	PA; LA
MUSTARGEN	6	PA; LA
<i>mycophenolate mofetil</i>	5	
<i>mycophenolate mofetil hcl</i>	2	PA; LA
<i>mycophenolate sodium</i>	5	
MYFORTIC	6	
MYLERAN	3	
NAVELBINE	6	PA; LA
NEORAL	6	
NERLYNX	6	PA; LA; QL
NEXAVAR	6	PA; LA
NILANDRON	4	
<i>nilutamide</i>	1	
NINLARO	6	PA; LA
NIPENT	6	PA; LA
NULOJIX	6	PA; LA
<i>octreotide acetate</i>	5	PA
ODOMZO	6	PA; LA; QL
ONCASPAR	6	PA; LA
OPDIVO	6	PA
<i>oxaliplatin</i>	5	PA; LA
<i>paclitaxel</i>	5	PA; LA
PERJETA	6	PA; LA
PHOTOFRIN	6	PA; LA
PROGRAF INTRAVENOUS	6	PA; LA

Drug Name	Tier	Restrictions / limits
PROGRAF ORAL	6	
PURIXAN	6	
RAPAMUNE ORAL SOLUTION	5	
RAPAMUNE ORAL TABLET	6	
RITUXAN	6	PA; LA
RITUXAN HYCELA	6	PA; LA
RUBRACA	6	PA
RYDAPT	6	PA; LA
SANDIMMUNE INTRAVENOUS	6	PA
SANDIMMUNE ORAL CAPSULE	6	
SANDIMMUNE ORAL SOLUTION	5	
SANDOSTATIN	6	PA
SANDOSTATIN LAR DEPOT	6	PA; LA; QL
SIGNIFOR	6	PA; LA
SIGNIFOR LAR	6	PA; LA; QL
SIMULECT	6	PA; LA
<i>sirolimus</i>	5	
SOLTAMOX	0	ACA
SOMATULINE DEPOT	6	PA
SPRYCEL	6	PA; LA
STIVARGA	6	PA; LA; QL
SUTENT	6	PA; LA; QL
SYLVANT	6	PA; LA
SYNRIBO	6	PA
TABLOID	4	
<i>tacrolimus</i>	5	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
TAFINLAR	6	PA; LA; QL
TAGRISSO	6	PA; LA
<i>tamoxifen</i>	0	ACA
TARCEVA	6	PA; LA; QL
TARGRETIN ORAL	4	PA
TARGRETIN TOPICAL	3	
TASIGNA	6	PA; LA
TAXOTERE	6	PA; LA
TECENTRIQ	6	PA; LA
TEMODAR	6	PA; LA
<i>temozolomide</i>	5	PA; LA
TENIPOSIDE	4	PA
TEPADINA	6	PA; LA
THALOMID	6	PA; LA; QL
<i>thiotepa</i>	5	PA; LA
<i>toposar</i>	5	PA; LA
<i>topotecan</i>	5	PA; LA
TORISEL	6	PA; LA
TREANDA	6	PA; LA
TRELSTAR	6	PA; LA
<i>tretinoin (chemotherapy)</i>	2	
TREXALL	4	
TRISENOX	6	PA; LA
TYKERB	6	PA; LA; QL
UNITUXIN	6	PA; LA
VECTIBIX	6	PA; LA
VELCADE	6	PA; LA
VENCLEXTA	6	PA
VIDAZA	6	PA; LA
<i>vinblastine</i>	5	PA; LA

Drug Name	Tier	Restrictions / limits
<i>vincasar pfs</i>	5	PA; LA
<i>vincristine</i>	5	PA; LA
<i>vinorelbine</i>	5	PA; LA
VOTRIENT	6	PA; LA
XALKORI	6	PA; LA; QL
XATMEP	4	PA
XELODA	6	PA; LA
XERMELO	6	PA
XTANDI	6	PA; LA; QL
YERVOY	6	PA; LA
YONDELIS	6	PA; LA
ZALTRAP	6	PA; LA
ZANOSAR	6	PA; LA
ZEJULA	6	PA; QL
ZELBORAF	6	PA; LA
ZEVALIN (Y-90)	6	PA; LA
ZOLADEX	6	PA; LA
ZOLINZA	6	PA; LA
ZORTRESS	6	PA; LA
ZYDELIG	6	PA
ZYKADIA	6	PA; LA
ZYTIGA	6	PA; LA; QL

Autonomic & Cns Drugs, Neurology & Psych

Anticonvulsants

APTiom	4	
BANZEL	4	
BRIVIACT INTRAVENOUS	4	PA
BRIVIACT ORAL	4	
<i>carbamazepine</i>	1	
CARBATROL	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
CELONTIN	3	
CEREBYX	4	PA
<i>clonazepam</i>	1	
DEPACON	4	PA
DEPAKENE	4	
DEPAKOTE	4	
DEPAKOTE ER	4	
DEPAKOTE SPRINKLES	4	
DIASTAT	4	
DIASTAT ACUDIAL	4	
<i>diazepam</i>	2	
DILANTIN	3	
DILANTIN EXTENDED	4	
DILANTIN INFATABS	4	
DILANTIN-125	4	
<i>divalproex</i>	1	
<i>epitol</i>	1	
EQUETRO	4	
<i>ethosuximide</i>	2	
<i>felbamate</i>	2	
FELBATOL	4	
<i>fosphenytoin</i>	2	PA
FYCOMPA	4	
<i>gabapentin</i>	1	
GABITRIL ORAL TABLET 12 MG, 16 MG	3	
GABITRIL ORAL TABLET 2 MG, 4 MG	4	

Drug Name	Tier	Restrictions / limits
GRALISE	4	PA
GRALISE 30-DAY STARTER PACK	4	PA
KEPPRA INTRAVENOUS	4	PA
KEPPRA ORAL	4	
KEPPRA XR	4	
KLONOPIN	4	
LAMICTAL	4	
LAMICTAL ODT	4	
LAMICTAL ODT STARTER (BLUE)	4	
LAMICTAL ODT STARTER (GREEN)	4	
LAMICTAL ODT STARTER (ORANGE)	4	
LAMICTAL STARTER (BLUE) KIT	4	PA
LAMICTAL STARTER (GREEN) KIT	4	PA
LAMICTAL STARTER (ORANGE) KIT	4	PA
LAMICTAL XR	4	PA
LAMICTAL XR STARTER (BLUE)	4	PA
LAMICTAL XR STARTER (GREEN)	4	PA
LAMICTAL XR STARTER (ORANGE)	4	PA
<i>lamotrigine oral tablet</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>lamotrigine oral tablet disintegrating, dose pk</i>	1	
<i>lamotrigine oral tablet extended release 24hr</i>	1	PA
<i>lamotrigine oral tablet, chewable dispersible</i>	1	
<i>lamotrigine oral tablet, disintegrating</i>	1	
<i>levetiracetam intravenous</i>	2	PA
<i>levetiracetam oral</i>	1	
LYRICA	4	PA
MYSOLINE	4	
NEURONTIN	4	
ONFI	4	
<i>oxcarbazepine</i>	1	
OXTELLAR XR	4	PA
PEGANONE	4	
<i>phenobarbital</i>	1	
PHENYTEK	4	
<i>phenytoin</i>	1	
<i>phenytoin sodium</i>	2	PA
<i>phenytoin sodium extended</i>	1	
<i>primidone</i>	1	
QUDEXY XR	4	PA
<i>roweepra</i>	2	
SABRIL	6	
TEGRETOL	4	
TEGRETOL XR	4	
<i>tiagabine</i>	1	
TOPAMAX	4	

Drug Name	Tier	Restrictions / limits
<i>topiramate oral capsule, sprinkle</i>	1	
TOPIRAMATE ORAL CAPSULE, SPRINKLE, ER 24HR	4	
<i>topiramate oral tablet</i>	1	
TRILEPTAL	4	
TROKENDI XR	4	PA
<i>valproate sodium</i>	2	PA
<i>valproic acid</i>	1	
<i>valproic acid (as sodium salt)</i>	1	
<i>vigabatrin</i>	2	
VIMPAT INTRAVENOUS	4	PA
VIMPAT ORAL	4	
ZARONTIN	4	
ZONEGRAN	4	
<i>zonisamide</i>	1	
Antiparkinsonism Agents		
APOKYN	6	PA; LA; QL
AZILECT	4	
<i>benztropine injection</i>	2	PA
<i>benztropine oral</i>	1	
<i>bromocriptine</i>	2	
<i>carbidopa</i>	1	
<i>carbidopa-levodopa</i>	1	
<i>carbidopa-levodopa-entacapone</i>	2	
COGENTIN	4	PA
COMTAN	4	
DUOPA	6	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ELDEPRYL	4	
<i>entacapone</i>	2	
LODOSYN	4	
MIRAPEX	4	
MIRAPEX ER	4	
NEUPRO	4	
PARLODEL	4	
<i>pramipexole oral tablet</i>	1	
<i>pramipexole oral tablet extended release 24 hr</i>	2	
<i>rasagiline</i>	2	
REQUIP ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	4	
REQUIP ORAL TABLET 3 MG, 4 MG, 5 MG	4	QL
REQUIP XL	4	ST
<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	1	
<i>ropinirole oral tablet 3 mg, 4 mg, 5 mg</i>	1	QL
<i>ropinirole oral tablet extended release 24 hr</i>	2	
RYTARY	4	
<i>selegiline hcl</i>	2	
SINEMET	4	
SINEMET CR	4	
STALEVO 100	4	
STALEVO 125	4	
STALEVO 150	4	

Drug Name	Tier	Restrictions / limits
STALEVO 200	4	
STALEVO 50	4	
STALEVO 75	4	
TASMAR	4	
<i>tolcapone</i>	2	
<i>trihexyphenidyl</i>	1	
XADAGO	4	PA
ZELAPAR	4	
Migraine & Cluster Headache Therapy		
<i>almotriptan malate</i>	2	QL
ALSUMA	4	PA; QL
AMERGE	4	QL
AXERT	4	PA; QL
CAFERGOT	4	
D.H.E.45	4	PA
<i>dihydroergotamine injection</i>	2	PA
<i>dihydroergotamine nasal</i>	2	QL
<i>eletriptan hbr</i>	2	PA; QL
ERGOMAR	4	
<i>ergotamine-caffeine</i>	2	
<i>frovatriptan</i>	2	QL
IMITREX	4	QL
IMITREX STATDOSE KIT REFILL	4	QL
IMITREX STATDOSE PEN	4	QL
<i>isometh-dichloral-acetaminophn</i>	2	
<i>isomethepten-caf-acetaminophen</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
MAXALT	4	QL
MAXALT-MLT	4	QL
<i>migergot</i>	2	
MIGRANAL	4	QL
<i>naratriptan</i>	1	QL
<i>nodolor</i>	2	
ONZETRA XSAIL	4	PA; QL
PRODRIN	4	
RELPAK	4	PA; QL
<i>rizatriptan</i>	1	QL
<i>sumatriptan</i>	2	QL
<i>sumatriptan succinate oral</i>	1	QL
<i>sumatriptan succinate subcutaneous</i>	2	QL
SUMAVEL DOSEPRO	4	PA
TREXIMET	4	PA; QL
ZEMBRACE SYMTOUCH	4	PA; QL
<i>zolmitriptan</i>	2	QL
ZOMIG NASAL	3	QL
ZOMIG ORAL	4	QL
ZOMIG ZMT	4	QL
Miscellaneous Neurological Therapy		
AMPYRA	6	PA; LA; QL
ARICEPT ORAL TABLET 10 MG, 5 MG	4	
ARICEPT ORAL TABLET 23 MG	4	PA
AUSTEDO	6	PA
<i>donepezil oral tablet 10 mg, 5 mg</i>	1	

Drug Name	Tier	Restrictions / limits
<i>donepezil oral tablet 23 mg</i>	2	PA
<i>donepezil oral tablet, disintegrating</i>	2	PA
EXELON	4	PA
<i>galantamine</i>	2	PA
HORIZANT	4	PA; QL
INGREZZA	6	PA
KEVEYIS	6	PA; QL
<i>memantine oral solution</i>	1	PA
<i>memantine oral tablet</i>	1	PA
MEMANTINE ORAL TABLETS, DOSE PACK	4	PA
NAMENDA	4	PA
NAMENDA TITRATION PAK	4	PA
NAMENDA XR	4	PA
NAMZARIC	4	PA
NUEDEXTA	4	PA; QL
RAZADYNE	4	PA
RAZADYNE ER	4	PA
<i>rivastigmine</i>	2	PA
<i>rivastigmine tartrate</i>	2	PA
<i>tetrabenazine</i>	5	PA; LA; QL
TYSABRI	6	PA; LA
XENAZINE	6	PA; LA; QL
Muscle Relaxants & Antispasmodic Therapy		
AMRIX	4	ST; QL
<i>baclofen</i>	1	
<i>carisoprodol</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>carisoprodol-asa-codeine</i>	2	
<i>carisoprodol-aspirin</i>	2	
<i>chlorzoxazone</i>	1	
<i>cyclobenzaprine</i>	2	
DANTRIUM INTRAVENOUS	4	PA
DANTRIUM ORAL	4	
<i>dantrolene</i>	2	
FEXMID	4	ST
LORZONE	4	
<i>meprobamate</i>	1	
MESTINON	4	
MESTINON TIMESPAN	4	
<i>metaxall</i>	2	
<i>metaxalone</i>	2	
<i>methocarbamol injection</i>	2	PA
<i>methocarbamol oral</i>	1	
<i>orphenadrine citrate injection</i>	2	PA
<i>orphenadrine citrate oral</i>	1	
PARAFON FORTE DSC	4	
<i>pyridostigmine bromide</i>	2	
<i>regonol</i>	2	PA
<i>revonto</i>	2	PA
ROBAXIN INJECTION	3	PA
ROBAXIN ORAL	4	
ROBAXIN-750	4	
RYANODEX	4	PA

Drug Name	Tier	Restrictions / limits
SKELAXIN	4	
SOMA ORAL TABLET 250 MG	4	PA
SOMA ORAL TABLET 350 MG	4	
<i>tizanidine</i>	2	
ZANAFLEX	4	
Narcotic Analgesics		
ABSTRAL	4	PA; QL
<i>acetaminophen-caff-dihydrocod oral capsule</i>	2	
ACETAMINOPHE N-CAFF-DIHYDROCOD ORAL TABLET	4	PA
<i>acetaminophen-codeine</i>	1	
ACTIQ	4	PA; QL
ALLZITAL	4	
ARYMO ER	4	PA
<i>ascomp with codeine</i>	2	
<i>aspirin-caffeine-dihydrocodein</i>	2	
ASTRAMORPH-PF INJECTION SOLUTION 0.5 MG/ML	4	PA
<i>astramorph-pf injection solution 1 mg/ml</i>	2	PA
BELBUCA	4	PA; QL
BUPAP	4	
BUPRENEX	4	PA
BUPRENORPHINE	4	QL
<i>buprenorphine hcl injection</i>	1	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>buprenorphine hcl sublingual</i>	1	
<i>butalbital compound w/codeine</i>	2	
<i>butalbital-acetaminop-caf-cod</i>	2	
<i>butalbital-acetaminophen</i>	2	
<i>butalbital-acetaminophen-caff</i>	2	
<i>butalbital-aspirin-caffeine</i>	2	
BUTRANS	3	QL
<i>capacet</i>	2	
CAPITAL WITH CODEINE	3	
<i>codeine sulfate</i>	1	
<i>codeine-bitalbital-asa-caff</i>	2	
DEMEROL (PF) INJECTION SOLUTION 100 MG/2 ML, 25 MG/0.5 ML, 75 MG/1.5 ML	4	PA
<i>demerol (pf) injection solution 100 mg/ml</i>	2	PA
DEMEROL (PF) INJECTION SYRINGE	4	PA
DEMEROL INJECTION	4	PA
DEMEROL ORAL	4	
DILAUDID INJECTION	4	PA
DILAUDID ORAL	4	
<i>diskets</i>	2	

Drug Name	Tier	Restrictions / limits
DOLOPHINE	4	
DURAGESIC	4	
<i>duramorph (pf)</i>	2	PA
EMBEDA	4	PA
<i>endocet</i>	1	
ESGIC	4	
EXALGO ER	4	QL
<i>fentanyl citrate</i>	2	PA; QL
<i>fentanyl citrate (pf)</i>	2	PA
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	1	
FENTANYL TRANSDERMAL PATCH 72 HOUR 37.5 MCG/HOUR, 62.5 MCG/HOUR, 87.5 MCG/HOUR	4	
FENTORA	4	PA; QL
FIORICET	4	
FIORINAL	4	
FIORINAL-CODEINE #3	4	
<i>hydrocodone-acetaminophen</i>	1	
<i>hydrocodone-ibuprofen</i>	1	
<i>hydromorphone (pf)</i>	2	PA
<i>hydromorphone injection solution</i>	2	PA
HYDROMORPHONE INJECTION SYRINGE 0.5 MG/0.5 ML	4	PA

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Drug Name	Tier	Restrictions / limits
<i>hydromorphone injection syringe 1 mg/ml, 2 mg/ml, 4 mg/ml</i>	2	PA
<i>hydromorphone oral liquid</i>	1	
<i>hydromorphone oral tablet</i>	1	
<i>hydromorphone oral tablet extended release 24 hr</i>	2	QL
<i>hydromorphone rectal</i>	2	
HYSINGLA ER	4	PA
IBUDONE	4	
<i>ibuprofen-oxycodone</i>	1	QL
INFUMORPH P/F	4	PA
KADIAN	4	
LAZANDA	4	PA; QL
<i>levorphanol tartrate</i>	2	
<i>lorcet (hydrocodone)</i>	2	
<i>lorcet hd</i>	2	
<i>lorcet plus</i>	2	
LORTAB ELIXIR	4	
<i>marten-tab</i>	2	
<i>meperidine (pf)</i>	2	PA
<i>meperidine injection</i>	2	PA
<i>meperidine oral</i>	1	
<i>methadone injection</i>	2	PA
<i>methadone oral</i>	1	
<i>methadose</i>	2	
MORPHABOND ER	4	PA
<i>morphine (pf)</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>morphine (pf) in 0.9 % nacl</i>	2	PA
<i>morphine concentrate</i>	2	
<i>morphine injection</i>	2	PA
MORPHINE INTRAMUSCULAR	4	
<i>morphine intravenous cartridge 10 mg/ml, 2 mg/ml, 4 mg/ml</i>	2	PA
MORPHINE INTRAVENOUS CARTRIDGE 8 MG/ML	4	PA
<i>morphine intravenous pt controlled analgesia syring</i>	2	PA
<i>morphine intravenous solution 10 mg/ml, 100 mg/4 ml, 25 mg/ml, 250 mg/10 ml, 50 mg/ml</i>	2	PA
MORPHINE INTRAVENOUS SOLUTION 4 MG/ML, 8 MG/ML	4	PA
MORPHINE INTRAVENOUS SYRINGE 10 MG/ML, 8 MG/ML	4	PA
<i>morphine intravenous syringe 2 mg/ml, 4 mg/ml</i>	2	PA
<i>morphine oral</i>	2	
<i>morphine rectal</i>	2	
MS CONTIN	4	
NORCO	4	

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Drug Name	Tier	Restrictions / limits
OPANA	4	
OXAYDO	4	PA
<i>oxycodone oral capsule</i>	1	
<i>oxycodone oral concentrate</i>	1	
<i>oxycodone oral solution</i>	1	
<i>oxycodone oral tablet</i>	1	
OXYCODONE ORAL TABLET, ORAL ONLY, EXT.REL.12 HR	4	PA; QL
<i>oxycodone-acetaminophen</i>	1	
<i>oxycodone-aspirin</i>	1	
OXYCONTIN	4	PA; QL
<i>oxymorphone</i>	2	
PERCOCET	4	
PRIMLEV	4	
ROXICODONE	4	
SUBSYS	4	PA; QL
SYNALGOS-DC	4	
<i>tencon</i>	2	
TREZIX	4	
TYLENOL-CODEINE #3	4	
TYLENOL-CODEINE #4	4	
VANATOL LQ	4	
<i>verdrocet</i>	2	
<i>vicodin</i>	2	
<i>vicodin es</i>	2	

Drug Name	Tier	Restrictions / limits
<i>vicodin hp</i>	2	
XODOL 10/300	4	
XODOL 5/300	4	
XODOL 7.5/300	4	
<i>xylon 10</i>	2	
<i>zamicet</i>	2	
<i>zebutal</i>	1	
ZOHYDRO ER	4	PA; QL
Non-Narcotic Analgesics		
ANAPROX DS	4	
ARTHROTEC 50	4	PA
ARTHROTEC 75	4	PA
<i>aspir-81</i>	0	ACA; OTC
<i>aspirin</i>	0	ACA; OTC
<i>aspirin low dose</i>	0	ACA; OTC
<i>aspir-low</i>	0	ACA; OTC
<i>aspir-trin</i>	0	ACA; OTC
<i>bayer aspirin</i>	0	ACA; OTC
BUNAVAIL	4	PA; QL
<i>buprenorphine-naloxone</i>	1	PA
<i>butorphanol tartrate injection</i>	2	PA
<i>butorphanol tartrate nasal</i>	1	QL
CALDOLOR	4	PA
CAMBIA	4	PA; QL
CELEBREX	4	QL
<i>celecoxib</i>	2	QL
<i>children's aspirin</i>	0	ACA; OTC
<i>choline,magnesium salicylate</i>	1	
CONZIP	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
DAYPRO	4	
<i>diclofenac potassium</i>	1	
<i>diclofenac sodium oral</i>	1	
<i>diclofenac sodium topical drops</i>	2	QL
<i>diclofenac sodium topical gel</i>	2	
<i>diclofenac-misoprostol</i>	2	
<i>diflunisal</i>	1	
DISALCID	4	
DUEXIS	4	PA; QL
DYLOJECT	4	PA
<i>e.c. prin</i>	0	ACA; OTC
EC-NAPROSYN	4	
<i>ecotrin</i>	0	ACA; OTC
<i>ecotrin low strength</i>	0	ACA; OTC
<i>etodolac oral capsule</i>	1	
<i>etodolac oral tablet</i>	1	
<i>etodolac oral tablet extended release 24 hr</i>	2	
EUFLEXXA	6	PA; LA; QL
EVZIO INJECTION AUTO-INJECTOR 0.4 MG/0.4 ML	6	QL
EVZIO INJECTION AUTO-INJECTOR 2 MG/0.4 ML	4	QL
FELDENE	4	
<i>fenoprofen</i>	2	
FLECTOR	4	PA
<i>flurbiprofen</i>	1	

Drug Name	Tier	Restrictions / limits
FROTEK	4	PA
<i>ibuprofen</i>	1	
INDOCIN ORAL	3	
INDOCIN RECTAL	4	
<i>indomethacin</i>	1	
<i>ketoprofen</i>	2	
<i>ketorolac</i>	1	QL
<i>lite coat aspirin</i>	0	ACA; OTC
LODINE	4	
<i>meclofenamate</i>	2	
<i>mefenamic acid</i>	2	
<i>meloxicam</i>	1	
MOBIC	4	
<i>nabumetone</i>	1	
<i>nalbuphine</i>	2	PA
<i>naloxone</i>	1	
<i>naltrexone</i>	1	
NAPRELAN CR	4	
NAPROSYN	4	
<i>naproxen</i>	2	
<i>naproxen sodium</i>	2	
NARCAN	4	QL
NUCYNTA	4	
NUCYNTA ER	3	
<i>oxaprozin</i>	2	
PENNSAID	4	PA
<i>pentazocine-naloxone</i>	2	
<i>piroxicam</i>	1	
PONSTEL	4	
REVIA	4	
<i>salsalate</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
SPRIX	6	PA; QL
SUBOXONE	3	QL
<i>sulindac</i>	1	
TALWIN	4	PA
TIVORBEX	4	PA
<i>tolmetin</i>	2	
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 17-83	4	PA
TRAMADOL ORAL CAPSULE,ER BIPHASE 24 HR 25-75	4	PA
<i>tramadol oral tablet</i>	1	
<i>tramadol oral tablet extended release 24 hr</i>	2	
<i>tramadol oral tablet, er multiphase 24 hr</i>	2	
<i>tramadol- acetaminophen</i>	1	
ULTRACET	4	
ULTRAM	4	
ULTRAM ER	4	
VIMOVO	4	PA
VIVITROL	6	QL
VOLTAREN	4	
VOLTAREN-XR	4	
ZIPSOR	4	PA
ZORVOLEX	4	PA
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG	4	

Drug Name	Tier	Restrictions / limits
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7- 1.4 MG, 8.6-2.1 MG	4	PA
Psychotherapeutic Drugs		
ABILIFY	4	QL
ABILIFY MAINTENA	4	PA; QL
ADASUVE	4	
ADDERALL	4	
ADDERALL XR	4	
ADZENYS XR- ODT	4	
<i>alprazolam</i>	1	
<i>alprazolam intensol</i>	1	
AMBIEN	4	
AMBIEN CR	4	
<i>amitriptyline</i>	1	
<i>amitriptyline- chlordiazepoxide</i>	1	
<i>amoxapine</i>	2	
ANAFRANIL	4	
ALENZIN	4	PA
APTENSIO XR	4	
<i>aripiprazole oral solution</i>	2	
<i>aripiprazole oral tablet</i>	2	QL
<i>aripiprazole oral tablet,disintegrating</i>	2	QL
ARISTADA	4	QL
<i>armodafinil</i>	2	PA; QL
ATIVAN	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>atomoxetine</i>	2	
BELSOMRA	4	PA; QL
BRISDELLE	4	
<i>bupropion hcl</i>	1	
<i>buspirone</i>	1	
BUTISOL	4	
CELEXA	4	
<i>chlordiazepoxide hcl</i>	1	
<i>chlorpromazine injection</i>	2	PA
<i>chlorpromazine oral</i>	1	
<i>citalopram</i>	1	
<i>clomipramine</i>	2	
<i>clonidine hcl</i>	2	
<i>clorazepate dipotassium</i>	1	
<i>clozapine oral tablet</i>	1	
<i>clozapine oral tablet,disintegrating 100 mg, 12.5 mg, 25 mg</i>	1	
CLOZAPINE ORAL TABLET,DISINTEGRATING 150 MG, 200 MG	4	
CLOZARIL	4	
CONCERTA	4	
COTEMPLA XR-ODT	4	PA; QL
CYMBALTA	4	
DAYTRANA	4	
<i>desipramine</i>	1	
DESOXYN	4	

Drug Name	Tier	Restrictions / limits
DESVENLAFAXIN E	4	PA
DESVENLAFAXIN E FUMARATE	4	
<i>desvenlafaxine succinate</i>	2	QL
DEXEDRINE SPANSULE	4	
<i>dexmethylphenidate</i>	2	
<i>dextroamphetamine</i>	2	
<i>dextroamphetamine-amphetamine oral capsule,extended release 24hr</i>	2	
<i>dextroamphetamine-amphetamine oral tablet</i>	1	
<i>diazepam injection</i>	2	PA
<i>diazepam intensol</i>	1	
<i>diazepam oral</i>	1	
DORAL	4	
<i>doxepin</i>	1	
<i>duloxetine</i>	1	
DYANAVEL XR	4	
EDLUAR	4	PA
EFFEXOR XR	4	
EMSAM	4	
<i>ergoloid</i>	2	
<i>escitalopram oxalate</i>	1	
<i>estazolam</i>	1	
<i>eszopiclone</i>	1	QL
EVEKEO	4	
FANAPT ORAL TABLET 1 MG	4	PA; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
FANAPT ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	4	ST; QL
FANAPT ORAL TABLETS,DOSE PACK	4	ST; QL
FAZACLO	4	
FETZIMA	4	PA
<i>flumazenil</i>	2	PA
<i>fluoxetine oral capsule</i>	1	
<i>fluoxetine oral capsule, delayed release(dr/ec)</i>	1	QL
<i>fluoxetine oral solution</i>	1	
<i>fluoxetine oral tablet 10 mg, 20 mg</i>	1	
FLUOXETINE ORAL TABLET 60 MG	4	PA
<i>fluphenazine decanoate</i>	2	PA
<i>fluphenazine hcl injection</i>	2	PA
<i>fluphenazine hcl oral</i>	1	
<i>flurazepam</i>	1	
<i>fluvoxamine oral capsule, extended release 24hr</i>	2	
<i>fluvoxamine oral tablet</i>	1	
FOCALIN	4	
FOCALIN XR	4	
FORFIVO XL	4	PA

Drug Name	Tier	Restrictions / limits
GEODON INTRAMUSCULAR	4	PA
GEODON ORAL	4	QL
<i>guanfacine</i>	2	
<i>guanidine</i>	2	
HALCION	4	
HALDOL	4	PA
HALDOL DECANOATE	4	PA
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	PA
<i>haloperidol lactate injection</i>	2	PA
<i>haloperidol lactate oral</i>	1	
HETLIOZ	6	PA; LA
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	2	
INTERMEZZO	4	
INTUNIV ER	4	
INVEGA	4	QL
INVEGA SUSTENNA	4	QL
INVEGA TRINZA	4	
IRENKA	4	PA
KAPVAY	4	
KHEDEZLA	4	PA
LATUDA	4	PA; QL
LEXAPRO	4	
<i>lithium carbonate</i>	1	
<i>lithium citrate</i>	1	
LITHOBID	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>lorazepam</i>	1	
<i>lorazepam intensol</i>	1	
<i>loxapine succinate</i>	1	
LUNESTA	4	QL
<i>maprotiline</i>	1	
MARPLAN	4	
<i>metadate er</i>	2	
<i>methamphetamine</i>	2	
METHYLIN	4	
<i>methylphenidate hcl</i>	2	
<i>mirtazapine</i>	1	
<i>modafinil</i>	2	PA; QL
MYDAYIS	4	QL
NARDIL	4	
<i>nefazodone</i>	1	
NORPRAMIN	4	
<i>nortriptyline</i>	1	
NUPLAZID	6	PA; LA
NUVIGIL	4	PA; QL
<i>olanzapine intramuscular</i>	2	QL
<i>olanzapine oral</i>	1	QL
<i>olanzapine-fluoxetine</i>	2	
ORAP	4	
<i>oxazepam</i>	1	
<i>paliperidone</i>	2	QL
PAMELOR	4	
PARNATE	4	
<i>paroxetine hcl oral tablet</i>	1	
<i>paroxetine hcl oral tablet extended release 24 hr</i>	2	

Drug Name	Tier	Restrictions / limits
PAXIL	4	
PAXIL CR	4	
<i>perphenazine</i>	1	
<i>perphenazine-amitriptyline</i>	1	
PEXEVA	4	PA
<i>phenelzine</i>	2	
<i>pimozide</i>	1	
PRISTIQ	4	QL
<i>procentra</i>	2	
<i>protriptyline</i>	2	
PROVIGIL	4	PA; QL
PROZAC	4	
<i>quazepam</i>	2	
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg</i>	1	QL
<i>quetiapine oral tablet 400 mg, 50 mg</i>	1	
<i>quetiapine oral tablet extended release 24 hr</i>	1	QL
QUILLICHEW ER	4	
QUILLIVANT XR	4	
REMERON	4	
REMERON SOLTAB	4	
RESTORIL	4	
REXULTI	4	PA
RISPERDAL	4	
RISPERDAL CONSTA	4	QL
RISPERDAL M-TAB	4	QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>risperidone oral solution</i>	1	
<i>risperidone oral tablet</i>	1	
<i>risperidone oral tablet,disintegrating</i>	2	QL
RITALIN	4	
RITALIN LA	4	
ROZEREM	4	QL
SAPHRIS (BLACK CHERRY)	4	ST; QL
SARAFEM	4	
<i>seconal sodium</i>	2	
SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG	4	QL
SEROQUEL ORAL TABLET 400 MG, 50 MG	4	
SEROQUEL XR	4	QL
<i>sertraline</i>	1	
SILENOR	4	PA
SONATA	4	
STRATTERA	4	
SURMONTIL	4	
SYMBYAX	4	
<i>temazepam</i>	2	
<i>thioridazine</i>	1	
<i>thiothixene</i>	1	
TOFRANIL	4	
TRANXENE T-TAB	4	
<i>tranylcypromine</i>	2	
<i>trazodone</i>	1	

Drug Name	Tier	Restrictions / limits
<i>triazolam</i>	1	
<i>trifluoperazine</i>	1	
<i>trimipramine</i>	2	
TRINTELLIX	4	PA
VALIUM	4	
<i>venlafaxine oral capsule,extended release 24hr</i>	1	
<i>venlafaxine oral tablet</i>	1	
<i>venlafaxine oral tablet extended release 24hr</i>	2	
VERSACLOZ	4	
VIIBRYD	4	PA
VRAYLAR	4	PA; QL
VYVANSE	4	
WELLBUTRIN SR	4	
WELLBUTRIN XL	4	
XANAX	4	
XANAX XR	4	
XYREM	6	PA; LA; QL
<i>zaleplon</i>	1	
<i>zenzedi oral tablet 10 mg, 5 mg</i>	2	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG	4	
<i>ziprasidone hcl</i>	1	QL
ZOLOFT	4	
<i>zolpidem</i>	1	
ZOLPIMIST	4	PA
ZYPREXA	4	QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ZYPREXA RELPREVV	4	
ZYPREXA ZYDIS	4	QL
Cardiovascular, Hypertension & Lipids		
Antiarrhythmic Agents		
<i>amiodarone</i>	1	
BETAPACE	4	
BETAPACE AF	4	
<i>disopyramide phosphate</i>	1	
<i>dofetilide</i>	2	
<i>flecainide</i>	1	
<i>mexiletine</i>	1	
MULTAQ	4	
NORPACE	4	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG	3	
NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 150 MG	4	
<i>pacerone</i>	1	
<i>procainamide</i>	2	PA
<i>propafenone oral capsule, extended release 12 hr</i>	2	
<i>propafenone oral tablet</i>	1	
<i>quinidine gluconate injection</i>	2	PA
<i>quinidine gluconate oral</i>	2	
<i>quinidine sulfate</i>	2	

Drug Name	Tier	Restrictions / limits
RYTHMOL SR	4	
<i>sotalol af</i>	1	
SOTALOL INTRAVENOUS	4	PA
<i>sotalol oral</i>	1	
SOTYLIZE	4	
TIKOSYN	4	
Antihypertensive Therapy		
ACCUPRIL	4	
ACCURETIC	4	
<i>acebutolol</i>	1	
ADALAT CC	4	
<i>afeditab cr</i>	1	
ALDACTAZIDE	4	
ALDACTONE	4	
ALTACE	4	
<i>amiloride</i>	1	
<i>amiloride-hydrochlorothiazide</i>	1	
<i>amlodipine</i>	1	
<i>amlodipine-benazepril</i>	1	
<i>amlodipine-olmesartan</i>	2	
<i>amlodipine-valsartan</i>	1	
<i>amlodipine-valsartan-hcthidiazid</i>	1	
ATACAND	4	
ATACAND HCT	4	
<i>atenolol</i>	1	
<i>atenolol-chlorthalidone</i>	1	
AVALIDE	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
AVAPRO	4	
AZOR	4	
<i>benazepril</i>	1	
<i>benazepril-hydrochlorothiazide</i>	1	
BENICAR	4	
BENICAR HCT	4	
<i>betaxolol</i>	1	
BIDIL	4	PA
<i>bisoprolol fumarate</i>	1	
<i>bisoprolol-hydrochlorothiazide</i>	1	
BREVIBLOC	4	
BREVIBLOC IN NACL (ISO-OSM)	4	
<i>bumetanide injection</i>	2	PA
<i>bumetanide oral</i>	1	
BYSTOLIC	4	PA
BYVALSON	4	PA
CALAN	4	
CALAN SR	4	
<i>candesartan</i>	2	
<i>candesartan-hydrochlorothiazid</i>	2	
<i>captopril</i>	1	
<i>captopril-hydrochlorothiazide</i>	1	
CARDENE IV	4	PA
CARDENE IV IN DEXTROSE	4	
CARDENE IV IN SODIUM CHLORIDE	4	
CARDIZEM	4	

Drug Name	Tier	Restrictions / limits
CARDIZEM CD	4	
CARDIZEM LA	4	PA
CARDURA	4	
CARDURA XL	4	PA
<i>cartia xt</i>	1	
<i>carvedilol</i>	1	
CATAPRES	4	
CATAPRES-TTS-1	4	
CATAPRES-TTS-2	4	
CATAPRES-TTS-3	4	
<i>chlorothiazide</i>	1	
<i>chlorothiazide sodium</i>	2	PA
<i>chlorthalidone</i>	1	
CLEVIPREX INTRAVENOUS EMULSION 25 MG/50 ML	4	PA
CLEVIPREX INTRAVENOUS EMULSION 50 MG/100 ML	4	
<i>clonidine</i>	2	
<i>clonidine hcl</i>	1	
<i>clorpres oral tablet 0.1-15 mg, 0.2-15 mg</i>	2	
CLORPRES ORAL TABLET 0.3-15 MG	4	
COREG	4	
COREG CR	4	
CORGARD	4	
CORLOPAM	4	PA
CORZIDE	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
COZAAR	4	
DEMADEX	4	
DEMSER	4	
DIBENZYLINE	4	
<i>diltiazem hcl oral capsule,ext.rel 24h degradable</i>	1	
<i>diltiazem hcl oral capsule,extended release 12 hr</i>	1	
<i>diltiazem hcl oral capsule,extended release 24 hr 240 mg</i>	2	
<i>diltiazem hcl oral capsule,extended release 24 hr 420 mg</i>	1	
<i>diltiazem hcl oral capsule,extended release 24hr</i>	1	
<i>diltiazem hcl oral tablet</i>	1	
<i>diltiazem hcl oral tablet extended release 24 hr</i>	1	
<i>dilt-xr</i>	1	
DIOVAN	4	
DIOVAN HCT	4	
DIURIL	4	
DIURIL IV	4	PA
<i>doxazosin</i>	1	
DUTOPROL	3	
DYAZIDE	4	
DYRENIUM	4	
EDARBI	4	PA
EDARBYCLOR	4	PA
EDECIN	4	

Drug Name	Tier	Restrictions / limits
<i>enalapril maleate</i>	1	
<i>enalaprilat</i>	2	PA
<i>enalapril-hydrochlorothiazide</i>	1	
EPANED	4	PA
<i>eplerenone</i>	2	
<i>epoprostenol (glycine)</i>	5	PA; LA
<i>eprosartan</i>	2	
<i>esmolol</i>	2	
<i>ethacrynate sodium</i>	2	PA
<i>ethacrynic acid</i>	1	
EXFORGE	4	
EXFORGE HCT	4	
<i>felodipine</i>	1	
FLOLAN	6	PA; LA
<i>fosinopril</i>	1	
<i>fosinopril-hydrochlorothiazide</i>	1	
<i>furosemide injection</i>	2	PA
<i>furosemide oral</i>	1	
<i>guanfacine</i>	2	
HEMANGEOL	6	
<i>hydralazine injection</i>	2	PA
<i>hydralazine oral</i>	1	
<i>hydrochlorothiazide</i>	1	
HYZAAR	4	
<i>indapamide</i>	1	
INDERAL LA	4	
INDERAL XL	4	
INNOPRAN XL	3	
INSPIRA	4	
<i>irbesartan</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>isradipine</i>	2	
<i>labetalol intravenous</i>	1	PA
<i>labetalol oral</i>	1	
LASIX	4	
LEVATOL	4	
<i>lisinopril</i>	1	
<i>lisinopril-hydrochlorothiazide</i>	1	
LOPRESSOR	4	
LOPRESSOR HCT	4	
<i>losartan</i>	1	
<i>losartan-hydrochlorothiazide</i>	1	
LOTENSIN	4	
LOTENSIN HCT	4	
LOTREL	4	
<i>matzim la</i>	1	PA
MAXZIDE	4	
MAXZIDE-25MG	4	
<i>methyclothiazide</i>	1	
<i>methyldopa</i>	1	
<i>methyldopa-hydrochlorothiazide</i>	2	
<i>methyldopate</i>	2	PA
<i>metolazone</i>	1	
<i>metoprolol succinate</i>	1	
METOPROLOL SU-HYDROCHLOROTHIAZ	4	PA
<i>metoprolol ta-hydrochlorothiaz</i>	1	

Drug Name	Tier	Restrictions / limits
<i>metoprolol tartrate intravenous</i>	1	PA
<i>metoprolol tartrate oral</i>	1	
MICARDIS	4	
MICARDIS HCT	4	
MICROZIDE	4	
MINIPRESS	4	
<i>minoxidil</i>	1	
<i>moexipril</i>	1	
<i>moexipril-hydrochlorothiazide</i>	1	
<i>nadolol</i>	1	
<i>nadolol-bendroflumethiazide</i>	2	
<i>nicardipine intravenous</i>	2	PA
<i>nicardipine oral</i>	2	
<i>nifedipine</i>	1	
<i>nimodipine</i>	2	PA
<i>nisoldipine</i>	2	
NORVASC	4	
NYMALIZE	4	PA
<i>olmesartan</i>	2	
<i>olmesartan-amlodipin-hcthiacid</i>	2	
<i>olmesartan-hydrochlorothiazide</i>	2	
ORENITRAM	6	PA; LA
<i>papaverine</i>	2	PA
<i>perindopril erbumine</i>	1	
<i>phenoxybenzamine</i>	2	
<i>phentolamine</i>	2	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>pindolol</i>	1	
<i>prazosin</i>	1	
PRESTALIA	4	PA
PRINIVIL	4	
PROCARDIA	4	
PROCARDIA XL	4	
<i>propranolol intravenous</i>	1	PA
<i>propranolol oral</i>	1	
<i>propranolol-hydrochlorothiazid</i>	1	
QBRELIS	4	PA
<i>quinapril</i>	1	
<i>quinapril-hydrochlorothiazide</i>	1	
<i>ramipril</i>	1	
REMODULIN	6	PA; LA
SODIUM EDECRIN	4	PA
<i>spironolactone</i>	1	
<i>spironolacton-hydrochlorothiaz</i>	1	
SULAR	4	
TARKA	4	
<i>taztia xt</i>	1	
TEKTURN	4	ST
TEKTURN HCT	4	ST
<i>telmisartan</i>	1	
<i>telmisartan-amlodipine</i>	2	
<i>telmisartan-hydrochlorothiazid</i>	2	
TENORETIC 100	4	
TENORETIC 50	4	

Drug Name	Tier	Restrictions / limits
TENORMIN	4	
<i>terazosin</i>	1	
TIAZAC	4	
<i>timolol maleate</i>	1	
TOPROL XL	4	
<i>torseamide</i>	1	
<i>trandolapril</i>	1	
<i>trandolapril-verapamil</i>	2	
<i>triamterene-hydrochlorothiazid</i>	1	
TRIBENZOR	4	
TWYNSTA	4	
UPTRAVI	6	PA; LA
<i>valsartan</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
VASERETIC	4	
VASOTEC	4	
<i>veletri</i>	5	PA; LA
<i>verapamil intravenous</i>	1	PA
<i>verapamil oral</i>	1	
VERELAN	4	
VERELAN PM	4	
ZESTORETIC	4	
ZESTRIL	4	
ZIAC	4	
Cardiac Glycosides		
<i>digitek</i>	1	
<i>digox</i>	1	
<i>digoxin injection</i>	2	PA
<i>digoxin oral</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
LANOXIN INJECTION	4	PA
LANOXIN ORAL	4	
LANOXIN PEDIATRIC	4	PA
Coagulation Therapy		
ADVATE	6	PA; LA
ADYNOVATE	6	PA; LA
AFSTYLA	6	PA; LA
AGGRENOX	4	
ALPHANATE	6	PA; LA
ALPHANINE SD	6	PA; LA
AMICAR	4	
<i>aminocaproic acid</i>	2	PA
ANGIOMAX	4	PA
ARIXTRA	6	
<i>aspirin-dipyridamole</i>	1	
BEBULIN	6	PA; LA
BENEFIX	6	PA; LA
<i>bivalirudin</i>	2	PA
BRILINTA	3	
CEPROTIN (BLUE BAR)	6	PA; LA
CEPROTIN (GREEN BAR)	6	PA; LA
<i>cilostazol</i>	1	
<i>clopidogrel</i>	1	
CORIFACT	6	PA; LA
COUMADIN	4	
CYKLOKAPRON	4	PA
<i>dipyridamole</i>	1	
DURLAZA	4	PA
EFFIENT	4	

Drug Name	Tier	Restrictions / limits
ELIQUIS	3	QL
ELOCTATE	6	PA; LA
<i>enoxaparin</i>	5	
FEIBA NF	6	PA; LA
<i>fondaparinux</i>	5	
FRAGMIN	6	
HELIXATE FS	6	PA; LA
HEMOFIL M HIGH	6	PA; LA
HEMOFIL M LOW	6	PA; LA
HEMOFIL M MID	6	PA; LA
HEMOFIL M SUPER HIGH	6	PA; LA
<i>hep flush-10 (pf)</i>	2	PA
<i>heparin (porcine) in 5 % dex</i>	2	PA
<i>heparin (porcine) in nacl (pf)</i>	2	PA
<i>heparin (porcine) injection cartridge</i>	1	PA
<i>heparin (porcine) injection solution</i>	1	PA
<i>heparin (porcine) injection syringe</i>	2	PA
<i>heparin flush(porcine)-0.9nacl</i>	2	PA
<i>heparin lock flush</i>	2	PA
<i>heparin lock flush (porcine)</i>	2	PA
<i>heparin lockflush(porcine)(pf)</i>	2	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
HEPARIN(PORCINE) IN 0.45% NACL INTRAVENOUS PARENTERAL SOLUTION 12,500 UNIT/250 ML	4	PA
<i>heparin(porcine) in 0.45% nacl intravenous parenteral solution 25,000 unit/250 ml, 25,000 unit/500 ml</i>	2	PA
<i>heparin, porcine (pf) injection</i>	1	PA
<i>heparin, porcine (pf) intravenous</i>	2	PA
HUMATE-P	6	PA; LA
IDELVION	6	PA
IPRIVASK	6	PA; QL
IXINITY	6	PA; LA
<i>jantoven</i>	1	
KCENTRA	4	PA
KOATE	6	PA; LA
KOGENATE FS	6	PA; LA
KOVALTRY	6	PA; LA
LOVENOX	6	
MEPHYTON	3	
MONOCLATE-P	6	PA; LA
MONONINE	6	PA; LA
NOVOEIGHT	6	PA
NOVOSEVEN RT	6	PA; LA
NPLATE	6	PA; LA
OBIZUR	6	PA
<i>pentoxifylline</i>	1	
PHYTONADIONE (VITAMIN K1)	4	PA

Drug Name	Tier	Restrictions / limits
PLAVIX	4	
PRADAXA	4	PA; QL
<i>prasugrel</i>	2	
PROFILNINE	6	PA; LA
PROMACTA	6	PA; LA
<i>protamine</i>	2	PA
RECOMBINATE	6	PA; LA
RIASTAP	6	PA; LA
RIXUBIS	6	PA; LA
SAVAYSA	4	PA
<i>ticlopidine</i>	2	
<i>tranexamic acid</i>	2	PA
TRETTEN	6	PA; LA
<i>vitamin k</i>	2	PA
<i>vitamin k1</i>	2	PA
VONVENDI	6	PA; LA
<i>warfarin</i>	1	
WILATE	6	PA; LA
XARELTO	4	PA
XYNTHA	6	PA; LA
XYNTHA SOLOFUSE	6	PA; LA
ZONTIVITY	4	PA
Lipid/Cholesterol Lowering Agents		
ALTOPREV	4	PA
<i>amlodipine-atorvastatin</i>	1	
ANTARA	4	
<i>atorvastatin oral tablet 10 mg, 20 mg</i>	0	ACA
<i>atorvastatin oral tablet 40 mg, 80 mg</i>	1	
CADUET	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>cholestyramine (with sugar)</i>	2	
<i>cholestyramine light</i>	2	
COLESTID	4	
COLESTID FLAVORED	4	
<i>colestipol</i>	2	
<i>ezetimibe</i>	2	QL
<i>ezetimibe-simvastatin</i>	2	
<i>fenofibrate micronized</i>	2	
<i>fenofibrate nanocrystallized</i>	2	
FENOFIBRATE ORAL CAPSULE	4	PA
<i>fenofibrate oral tablet</i>	2	
<i>fenofibric acid</i>	2	
<i>fenofibric acid (choline)</i>	2	
FENOGLIDE	4	PA
FIBRICOR	4	
FLOLIPID	4	PA
<i>fluvastatin</i>	0	ACA
<i>gemfibrozil</i>	1	
JUXTAPID	6	PA; QL
KYNAMRO	6	PA; LA
LESCOL	4	
LESCOL XL	4	
LIPITOR	4	
LIPOFEN	4	PA
LIVALO	4	PA; QL
LOPID	4	

Drug Name	Tier	Restrictions / limits
<i>lovastatin</i>	0	ACA
LOVAZA	4	PA
<i>niacin</i>	2	
NIACOR	4	
NIASPAN EXTENDED-RELEASE	4	
<i>omega-3 acid ethyl esters</i>	2	PA
PRALUENT PEN	5	PA; LA; QL
PRAVACHOL	4	
<i>pravastatin</i>	0	ACA
<i>prevalite</i>	1	
QUESTRAN	4	
QUESTRAN LIGHT	4	
REPATHA PUSHTRONEX	5	PA; LA; QL
REPATHA SURECLICK	5	PA; LA; QL
REPATHA SYRINGE	5	PA; LA; QL
<i>rosuvastatin oral tablet 10 mg, 5 mg</i>	0	ACA
<i>rosuvastatin oral tablet 20 mg, 40 mg</i>	1	
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	0	ACA
<i>simvastatin oral tablet 80 mg</i>	1	
TRICOR	4	
TRIGLIDE	4	PA
<i>triklo</i>	2	PA
TRILIPIX	4	
VASCEPA	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
VYTORIN 10-10	4	
VYTORIN 10-20	4	
VYTORIN 10-40	4	
VYTORIN 10-80	4	
WELCHOL	3	
ZETIA	4	QL
ZOCOR	4	
Miscellaneous Cardiovascular Agents		
CORLANOR	4	PA; QL
ENTRESTO	3	PA
NATRECOR	4	PA
RANEXA	3	
VECAMYL	4	
Nitrates		
DILATRATE-SR	3	
GONITRO	4	
ISOCHRON	4	
ISORDIL	4	
ISORDIL TITRADOSE	4	
<i>isosorbide dinitrate</i>	1	
<i>isosorbide mononitrate</i>	1	
MINITRAN	4	
<i>nitro-bid</i>	1	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	4	

Drug Name	Tier	Restrictions / limits
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	3	
<i>nitroglycerin in 5 % dextrose</i>	2	PA
<i>nitroglycerin intravenous</i>	2	PA
<i>nitroglycerin oral</i>	1	
<i>nitroglycerin sublingual</i>	1	
<i>nitroglycerin transdermal</i>	1	
<i>nitroglycerin translingual</i>	2	
NITROLINGUAL	4	
NITROMIST	4	
NITROSTAT	4	
<i>nitro-time</i>	2	
Dermatologicals/Topical Therapy		
Antipsoriatic / Antiseborrheic		
<i>acitretin</i>	2	
ANALPRAM-HC	4	
<i>calcipotriene</i>	2	QL
<i>calcipotriene- betamethasone</i>	2	QL
<i>calcitrene</i>	2	QL
<i>calcitriol</i>	2	QL
COAL TAR	4	
COSENTYX	5	PA; LA
COSENTYX (2 SYRINGES)	5	PA; LA
COSENTYX PEN	5	PA; LA
COSENTYX PEN (2 PENS)	5	PA; LA

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Drug Name	Tier	Restrictions / limits
DOVONEX	4	PA; QL
<i>drithocrema hp</i>	2	
ENSTILAR	4	PA; QL
EPIFOAM	4	
<i>hydrocortisone-pramoxine</i>	2	
OVACE	4	
OVACE PLUS SHAMPOO	4	
OVACE PLUS TOPICAL CLEANSER, EXTENDED RELEASE	4	
OVACE PLUS TOPICAL CREAM	4	
OVACE PLUS TOPICAL FOAM	4	PA
OVACE PLUS TOPICAL LOTION	4	
OVACE PLUS WASH	4	
PRAMOSONE	4	
PRAMOSONE E	4	
PROMISEB COMPLETE	4	
<i>seb-prev</i>	2	
<i>selenium sulfide topical lotion</i>	1	
<i>selenium sulfide topical shampoo</i>	2	
SELRX	4	
SILIQ	6	PA; LA; QL
SORIATANE	4	
SORILUX	4	PA; QL
STELARA	5	PA; LA; QL

Drug Name	Tier	Restrictions / limits
<i>sulfacetamide sodium</i>	2	
TACLONEX	4	QL
TALTZ AUTOINJECTOR	6	PA; LA
TALTZ AUTOINJECTOR (2 PACK)	6	PA; LA
TALTZ AUTOINJECTOR (3 PACK)	6	PA; LA
TALTZ SYRINGE	6	PA; LA
TALTZ SYRINGE (2 PACK)	6	PA; LA
TALTZ SYRINGE (3 PACK)	6	PA; LA
TERSI FOAM	4	
TREMFYA	4	PA; LA
VECTICAL	4	QL
ZITHRANOL	4	
Burn Therapy		
SILVADENE	4	
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
<i>thermazene</i>	2	
Keratolytics		
BENSAL HP	4	
INOVA 4-1	4	
INOVA 8-2	4	
KERALYT RX	4	
KERALYT SCALP COMPLETE	4	
PODOCON	4	
POTASSIUM HYDROXIDE	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
SALEX	4	
<i>salicylic acid</i>	2	
<i>salicylic acid er-ceramides</i>	2	
SALKERA	4	
<i>salvax</i>	2	
SALVAX DUO PLUS	4	
ULTRASAL-ER	4	
VIRASAL	4	
Miscellaneous Dermatologicals		
<i>ammonium lactate</i>	2	PA
ATOPICLAIR	4	
ATRAPRO CP	4	
<i>avo cream</i>	2	
BIAFINE EMULSION	4	
<i>bp-50% urea</i>	2	
CARAC	4	
<i>cem-urea</i>	2	
CONDYLOX	3	
CORTANE-B	4	
<i>diclofenac sodium</i>	2	
<i>doxepin</i>	2	PA
DUPIXENT	6	PA; LA
EFUDEX	4	
<i>eletone</i>	2	
ELIDEL	4	QL
<i>emulsion sb</i>	2	
EPICERAM	4	
EUCRISA	4	PA
FLUOROPLEX	4	

Drug Name	Tier	Restrictions / limits
FLUOROURACIL TOPICAL CREAM 0.5 %	4	
<i>fluorouracil topical cream 5 %</i>	2	
<i>fluorouracil topical solution</i>	2	
GORDONS UREA	4	
<i>hpr</i>	2	
<i>hpr plus hydrogel</i>	2	
HPR PLUS-MB HYDROGEL	4	
HYDRO 35	4	
HYDRO 40	4	
IODOFLEX	4	
IODOSORB	4	
KERAFOAM	4	
KERALAC	4	
LEVULAN	4	
LOUTREX	4	
<i>luxamend</i>	2	
<i>mb hydrogel</i>	2	
<i>mb hydrogel (cyclomethicone)</i>	2	
<i>methoxsalen</i>	2	
NEOSALUS	4	
OXSORALEN ULTRA	4	
PANRETIN	6	
PICATO	4	QL
<i>podofilox</i>	2	
PRESERA	4	
PROMISEB	4	
PROTOPIC	4	QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>pruclair</i>	2	
<i>pradoxin</i>	2	PA
<i>prumyx</i>	2	
<i>prutect</i>	1	
QUTENZA	6	PA
<i>rea lo 39</i>	2	
<i>rea lo 40</i>	2	
REGRANEX	4	PA
RYNODERM	4	
<i>silver nitrate</i>	2	
<i>silver nitrate applicators</i>	2	
SOLARAZE	4	
<i>sonafine</i>	2	
<i>tacrolimus</i>	2	QL
TOLAK	4	
<i>umecta</i>	2	
URAMAXIN	4	
<i>urea</i>	2	
<i>urea nail stick</i>	2	
<i>ure-k</i>	2	
UTOPIC	4	
UVADEX	4	PA
VALCHLOR	6	PA; LA; QL
VEREGEN	4	
XCLAIR	4	
ZONALON	4	PA
Therapy For Acne		
ABSORICA	4	PA
ACANYA	4	
ACZONE	4	

Drug Name	Tier	Restrictions / limits
<i>adapalene topical cream</i>	2	
<i>adapalene topical gel</i>	2	
<i>adapalene topical gel with pump</i>	2	
ADAPALENE TOPICAL LOTION	4	
<i>adapalene-benzoyl peroxide</i>	2	
AKTIPAK	4	
<i>amnesteem</i>	2	
ATRALIN	4	
AVAR LS TOPICAL CLEANSER	4	
AVAR LS TOPICAL FOAM	4	PA
AVAR LS TOPICAL PADS, MEDICATED	4	
<i>avar topical cleanser</i>	2	
AVAR TOPICAL FOAM	4	PA
AVAR TOPICAL PADS, MEDICATED	4	
AVAR-E GREEN	4	
AVAR-E LS	4	
<i>avita topical cream</i>	2	
AVITA TOPICAL GEL	4	
AZELEX	3	
BENZACLIN	4	
BENZACLIN PUMP	4	
BENZAMYCIN	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
BENZEFOAM	4	
BENZEFOAM ULTRA	4	
<i>benzepro</i>	2	
BENZEPRO (MICROSPHERES)	4	
<i>benzoyl peroxide</i>	2	
<i>bp 10-1</i>	2	
<i>bpo</i>	2	
<i>claravis</i>	2	
<i>cleansing wash</i>	2	
CLEOCIN T	4	
CLINDACIN ETZ	4	
<i>clindacin p</i>	2	
CLINDACIN PAC	4	
CLINDAGEL	4	
<i>clindamycin phosphate</i>	2	
<i>clindamycin-benzoyl peroxide</i>	2	
<i>clindamycin-tretinoin</i>	2	
DIFFERIN	4	
DUAC	4	
EPIDUO	4	
EPIDUO FORTE	4	PA
<i>ery pads</i>	2	
<i>erygel</i>	2	
<i>erythromycin with ethanol</i>	2	
<i>erythromycin-benzoyl peroxide</i>	2	
EVOCLIN	4	
FABIOR	4	

Drug Name	Tier	Restrictions / limits
FINACEA	4	
INOVA	4	
METROCREAM	4	
METROGEL	4	
METROLOTION	4	
<i>metronidazole</i>	2	
MIRVASO	4	
<i>neuac</i>	2	
NEUAC KIT	4	
NORITATE	3	
NUOX	4	
ONEXTON	4	PA
PACNEX	4	
PLEXION	4	
PLEXION CLEANSING CLOTHS	4	
PR BENZOYL PEROXIDE	4	
RETIN-A	4	
RETIN-A MICRO	4	
RETIN-A MICRO PUMP	4	
RHOFADE	4	PA
<i>rosadan topical cream</i>	2	
<i>rosadan topical gel</i>	2	
ROSADAN TOPICAL KIT, CLEANSER AND GEL	4	
ROSADAN TOPICAL KIT, CLEANSER AND CREAM	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ROSANIL	4	
ROSULA	4	PA
<i>rosula cleansing cloths</i>	2	PA
SOOLANTRA	4	
<i>sss 10-5</i>	2	
<i>sulfacetamide sodium-sulfur</i>	2	
<i>sulfacetamide sod-sulfur-urea</i>	2	
<i>sulfacetamide-sulfur-cleansr23</i>	2	
<i>sulfacleanse 8-4</i>	2	
<i>sulfact na-sul-avobnz-otn-ocsa</i>	2	
SUMADAN	4	
SUMADAN XLT	4	
SUMAXIN	4	
SUMAXIN CP	4	
SUMAXIN TS	4	
<i>tazarotene</i>	2	
TAZORAC	4	
<i>tretinoin</i>	2	
<i>tretinoin microspheres</i>	2	
TRETIN-X	4	
TRETIN-X CREAM KIT	4	PA
VANOXIDE-HC	4	
VELTIN	4	
<i>zenatane</i>	2	
ZIANA	4	
Topical Anesthetics		
ANASTIA	4	PA

Drug Name	Tier	Restrictions / limits
BUCALSEP	4	
<i>cidaleaze</i>	2	
<i>ethyl chloride</i>	2	
<i>glydo</i>	2	
<i>lidocaine</i>	2	
<i>lidocaine (pf)</i>	2	PA
<i>lidocaine hcl injection</i>	2	PA
<i>lidocaine hcl laryngotracheal</i>	2	
<i>lidocaine hcl mucous membrane</i>	2	
<i>lidocaine hcl topical</i>	2	
<i>lidocaine hcl-hydrocortison ac</i>	2	
<i>lidocaine viscous</i>	2	
<i>lidocaine-epinephrine</i>	2	PA
<i>lidocaine-prilocaine</i>	2	
LIDOCAINE-TETRACAINE	4	
LIDODERM	4	
<i>lido-k</i>	2	
<i>lidopin topical cream 3 %</i>	2	
LIDOPIN TOPICAL CREAM 3.25 %	4	
LIDORX	4	
LIDOVEX	4	
LIDTOPIC MAX	4	PA
<i>lta pre-attached</i>	2	
NUMBONEX	4	PA
PLIAGLIS	4	
SYNERA	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
TRANZAREL	4	PA
XYLOCAINE	4	PA
XYLOCAINE-EPINEPHRINE	4	PA
XYLOCAINE-MPF	4	PA
ZINGO	4	PA
Topical Antibacterials		
ALCORTIN A	4	PA
ALOQUIN	4	PA
ALTABAX	4	
BACTROBAN	4	
CENTANY	4	
CENTANY AT	4	
CORTISPORIN	3	
DERMASORB AF COMPLETE KIT	4	
<i>gentamicin</i>	1	
<i>hydrocortisone-iodoquinol-aloe</i>	2	
<i>iodoquinol-hc</i>	2	
KLARON	4	
<i>lugols</i>	2	
<i>mupirocin</i>	1	
<i>mupirocin calcium</i>	1	
NEO-SYNALAR	4	
NEO-SYNALAR KIT	4	
SILVRSTAT	4	
<i>sulfacetamide sodium (acne)</i>	2	
SULFAMYLON	4	
VYTONE	4	
Topical Antifungals		

Drug Name	Tier	Restrictions / limits
ALA-QUIN	4	
<i>ciclodan</i>	2	
CICLODAN KIT	4	
<i>ciclopirox</i>	2	
<i>ciclopirox-urea-camph-menth-euc</i>	2	
<i>clotrimazole</i>	1	
<i>clotrimazole-betamethasone</i>	1	
<i>econazole</i>	2	
ECOZA	4	PA; QL
ERTACZO	4	
EXELDERM	4	
EXODERM	4	
EXTINA	4	PA
JUBLIA	4	PA
KERYDIN	4	PA
<i>ketoconazole</i>	2	
LOPROX	4	
LOPROX (AS OLAMINE)	4	
LOTRISONE	4	
LUZU	4	PA; QL
MENTAX	4	
<i>naftifine</i>	2	
NAFTIN	4	
NIZORAL	4	
<i>nyamyc</i>	1	
<i>nyata</i>	2	
<i>nystatin</i>	1	
<i>nystatin-triamcinolone</i>	2	
<i>nystop</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>oxiconazole</i>	2	
OXISTAT	4	
PENLAC	4	
TRIACETIN	4	
TRIPLE DYE	4	
VUSION	4	PA; QL
XOLEGEL	4	
Topical Antivirals		
<i>acyclovir</i>	2	
DENAVIR	4	
XERESE	4	
ZOVIRAX	4	
Topical Corticosteroids		
<i>ala-cort</i>	2	
ALA-SCALP	4	
<i>alclometasone</i>	1	
<i>amcinonide</i>	2	
<i>apexicon e</i>	2	
AQUA GLYCOLIC HC	4	
<i>betamethasone dipropionate</i>	2	
<i>betamethasone valerate</i>	2	
<i>betamethasone, augmented</i>	2	
CAPEX	4	
<i>clobetasol scalp</i>	2	PA
<i>clobetasol topical cream</i>	2	PA
<i>clobetasol topical foam</i>	2	PA; QL
<i>clobetasol topical gel</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>clobetasol topical lotion</i>	2	PA
<i>clobetasol topical ointment</i>	2	PA
<i>clobetasol topical shampoo</i>	2	PA
<i>clobetasol topical spray, non-aerosol</i>	2	PA
<i>clobetasol-emollient topical cream</i>	2	PA
<i>clobetasol-emollient topical foam</i>	2	PA; QL
CLOBEX	4	PA
CLOCORTOLONE PIVALATE	4	PA
<i>clodan</i>	2	PA
CLODAN KIT	4	PA
CLODERM	4	PA
CORDRAN	4	PA
CORDRAN TAPE LARGE ROLL	4	PA; QL
<i>cormax</i>	2	PA
CUTIVATE	4	
DERMA-SMOOTH/FS BODY OIL	4	
DERMA-SMOOTH/FS SCALP OIL	4	
DERMASORB HC COMPLETE KIT	4	
DERMASORB TA COMPLETE KIT	4	
DERMATOP	4	
DESONATE	4	
<i>desonide</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
DESOWEN	4	
<i>desoximetasone</i>	2	
<i>diflorasone</i>	2	
DIPROLENE	4	
ELOCON	4	
<i>fluocinolone</i>	2	
<i>fluocinolone and shower cap</i>	2	
<i>fluocinonide</i>	2	
<i>fluocinonide-e</i>	2	
<i>fluocinonide-emollient</i>	2	
<i>flurandrenolide</i>	2	
<i>fluticasone topical cream</i>	1	
<i>fluticasone topical lotion</i>	2	
<i>fluticasone topical ointment</i>	1	
<i>halobetasol propionate</i>	2	
HALOG	4	
<i>hydrocortisone</i>	2	
<i>hydrocortisone butyrate</i>	2	
<i>hydrocortisone butyr-emollient</i>	2	
<i>hydrocortisone valerate</i>	2	
<i>hydrocortisone-min oil-wht pet</i>	2	
KENALOG	4	
LOCOID	4	
LOCOID LIPOCREAM	4	

Drug Name	Tier	Restrictions / limits
LUXIQ	4	
<i>mometasone</i>	1	
<i>nolix</i>	2	
NUCORT	4	
OLUX	4	PA; QL
OLUX-E	4	PA; QL
PANDEL	4	
<i>prednicarbate</i>	2	
PROCTOCORT	4	
PSORCON	4	PA
<i>scalacort</i>	2	
SCALACORT DK	4	
SYNALAR	4	
SYNALAR CREAM KIT	4	
SYNALAR OINTMENT KIT	4	
SYNALAR TS	4	
TEMOVATE	4	PA
TEXACORT	4	
TOPICORT	4	
<i>triamcinolone acetonide</i>	2	
<i>trianex</i>	2	
<i>triderm</i>	2	
TRIDESILON	4	
ULTRAVATE	4	
ULTRAVATE X	4	
VANOS	4	ST
VERDESO	4	ST
Topical Enzymes		
SANTYL	4	

Topical Scabicides / Pediculicides

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ELIMITE	4	
EURAX	3	
<i>lindane</i>	2	
<i>malathion</i>	2	
NATROBA	4	
OVIDE	4	
<i>permethrin</i>	2	
SKLICE	4	
<i>spinosad</i>	2	
ULESFIA	4	

Diagnostics & Miscellaneous Agents

Antidotes

ATROPEN	4	PA
DUODOTE	4	

Irrigating Solutions

<i>lactated ringers</i>	2	
<i>neomycin-polymyxin b gu</i>	2	PA
NEOSPORIN GU IRRIGANT	4	PA
PHYSIOLYTE	4	
PHYSIOSOL IRRIGATION	4	
<i>ringer's</i>	2	
SORBITOL	4	
SORBITOL-MANNITOL	4	
<i>tis-u-sol pentalyte</i>	2	
VASHE WOUND THERAPY	4	

Miscellaneous Agents

<i>acamprosate</i>	1	
<i>acetic acid</i>	1	

Drug Name	Tier	Restrictions / limits
ACTONEL	4	
ADAGEN	6	PA
AGRYLIN	4	
<i>alendronate</i>	1	
AMPHADASE	4	PA
<i>anagrelide</i>	1	
ANTABUSE	4	
ARALAST NP	6	PA; LA
BUPHENYL	4	PA
<i>caffeine citrate</i>	2	
CARBAGLU	6	LA
CARNITOR (SUGAR-FREE)	4	
CARNITOR INTRAVENOUS	4	PA
CARNITOR ORAL	4	
<i>cevimeline</i>	2	
CHEMET	4	
<i>disulfiram</i>	1	
<i>etidronate disodium</i>	2	
EVOXAC	4	
EXJADE	6	PA; LA
FERRIPROX	6	
FERRLECIT	4	PA
GLASSIA	6	PA; LA
HYLENEX	4	PA
<i>ic green</i>	2	
INCRELEX	6	PA; LA
<i>indocyanine green</i>	2	
INFASURF	4	
JADENU	6	PA
JADENU SPRINKLE	6	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>levocarnitine</i>	1	
<i>levocarnitine (with sugar)</i>	1	
LIPOCHOL PLUS	4	
LITHOSTAT	4	
METOPIRONE	4	
<i>midodrine</i>	1	
NITYR	6	PA
NORTHERA	6	LA; QL
NUTRESTORE	4	
ORFADIN	6	PA
<i>pilocarpine hcl</i>	2	
PROLASTIN-C	6	PA
RADIOGARDASE	4	
RAVICTI	6	PA; LA
RILUTEK	4	
<i>riluzole</i>	2	
<i>risedronate</i>	2	
SALAGEN (PILOCARPINE)	4	
SINOGRAFIN	4	
<i>sodium chlor 0.9% bacteriostat</i>	2	
<i>sodium chloride 0.9 % injection solution</i>	2	
<i>sodium chloride 0.9 % injection syringe</i>	2	PA
<i>sodium chloride 0.9 % intravenous parenteral solution</i>	2	PA
<i>sodium chloride 0.9 % intravenous piggyback</i>	2	
<i>sodium ferric gluconat-sucrose</i>	2	PA

Drug Name	Tier	Restrictions / limits
<i>sodium phenylbutyrate</i>	2	PA
SOLIRIS	6	PA; LA
SURVANTA	4	
SYPRINE	4	
THIOLA	6	
<i>water for irrigation, sterile</i>	2	
XURIDEN	6	PA; LA
ZEMAIRA	6	PA; LA
Smoking Deterrents		
<i>bupropion hcl (smoking deter)</i>	0	ACA
CHANTIX	0	ACA
CHANTIX CONTINUING MONTH BOX	0	ACA
CHANTIX STARTING MONTH BOX	0	ACA
NICODERM CQ	0	ACA; OTC
<i>nicorelief</i>	0	ACA; OTC
NICORETTE BUCCAL GUM 2 MG	0	ACA; OTC
<i>nicorette buccal gum 4 mg</i>	0	ACA; OTC
NICORETTE BUCCAL LOZENGE	0	ACA; OTC
NICORETTE BUCCAL MINI LOZENGE	0	ACA; OTC
<i>nicotine</i>	0	ACA; OTC
<i>nicotine (polacrilex)</i>	0	ACA; OTC
NICOTROL	0	ACA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
NICOTROL NS	0	ACA
<i>nts step 1</i>	0	ACA; OTC
<i>quit 2 buccal gum</i>	0	ACA; OTC
QUIT 2 BUCCAL LOZENGE	0	ACA; OTC
<i>quit 4 buccal gum</i>	0	ACA; OTC
QUIT 4 BUCCAL LOZENGE	0	ACA; OTC
<i>stop smoking aid</i>	0	ACA; OTC
ZYBAN	4	

Ear, Nose & Throat Medications

Miscellaneous Agents

ASTEPRO	4	
<i>azelastine</i>	2	
BACTROBAN NASAL	4	
CLINPRO 5000	4	
DEBACTEROL	4	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
EPISIL	4	
<i>fluoride (sodium)</i>	2	
FLUORIDEX DAILY DEFENSE	4	
GELCLAIR	4	
GELX	4	
<i>ipratropium bromide</i>	1	
MUGARD	4	
<i>olopatadine</i>	2	PA
<i>oralone</i>	2	
ORAMAGICRX	4	
<i>paroex oral rinse</i>	1	
PATANASE	4	PA

Drug Name	Tier	Restrictions / limits
PERIDEX	4	
<i>periogard</i>	1	
<i>pilocarpine hcl</i>	2	
PREVIDENT	4	
PREVIDENT 5000 BOOSTER PLUS	4	
PREVIDENT 5000 DRY MOUTH	4	
PREVIDENT 5000 ENAMEL PROTECT	4	
PREVIDENT 5000 PLUS	4	
PREVIDENT 5000 SENSITIVE	4	
Q-CARE RX Q4	4	
SALAGEN (PILOCARPINE)	4	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>triamcinolone acetonide</i>	2	
TYZINE	4	

Miscellaneous Otic Preparations

<i>acetic acid</i>	1	
CETRAXAL	4	
<i>ciprofloxacin hcl</i>	2	
DERMOTIC OIL	4	
<i>floxin</i>	2	
<i>fluocinolone acetonide oil</i>	2	
<i>hydrocortisone-acetic acid</i>	1	
<i>ofloxacin</i>	2	

Otic Steroid / Antibiotic

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
CIPRO HC	4	
CIPRODEX	4	
COLY-MYCIN S	4	
<i>neomycin-polymyxin-hc</i>	1	
OTOVEL	4	
Endocrine/Diabetes		
Adrenal Hormones		
ACTHAR H.P.	6	PA; LA; QL
<i>betamethasone acet,sod phos</i>	2	PA
CELESTONE SOLUSPAN	4	PA
CORTEF	4	
<i>cortisone</i>	1	
CORTROSYN	4	PA
<i>cosyntropin</i>	2	PA
<i>deltasone</i>	2	
DEPO-MEDROL	4	PA
<i>dexamethasone</i>	1	
<i>dexamethasone intensol</i>	1	
<i>dexamethasone sodium phos (pf)</i>	2	PA
<i>dexamethasone sodium phosphate</i>	1	PA
DEXTAK 10 DAY	3	
DEXTAK 13 DAY	3	
DEXTAK 6 DAY	3	
EMFLAZA	6	PA
<i>fludrocortisone</i>	1	
<i>hydrocortisone</i>	2	
KENALOG	4	PA
LOCORT	4	

Drug Name	Tier	Restrictions / limits
MEDROL (PAK)	4	
MEDROL ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG	4	
MEDROL ORAL TABLET 2 MG	3	
<i>methylprednisolone</i>	1	
<i>methylprednisolone acetate injection suspension 40 mg/ml</i>	2	PA
<i>methylprednisolone acetate injection suspension 80 mg/ml</i>	1	PA
<i>millipred dp</i>	2	
MILLIPRED ORAL SOLUTION	4	
<i>millipred oral tablet</i>	2	
ORAPRED ODT	4	
PEDIAPRED	4	
<i>prednisolone</i>	2	
<i>prednisolone sodium phosphate</i>	2	
<i>prednisone</i>	1	
<i>prednisone intensol</i>	1	
RAYOS	4	
<i>triamcinolone acetonide</i>	2	PA
TRIESENCE (PF)	4	PA
<i>veripred 20</i>	2	
ZONACORT	4	
Antithyroid Agents		
<i>methimazole</i>	1	
<i>propylthiouracil</i>	1	
SSKI	4	
TAPAZOLE	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
Blood Glucose Monitoring Devices & Supplies		
ACCU-CHEK AVIVA PLUS TEST STRP	4	PA; OTC; QL
ACCU-CHEK COMPACT PLUS TEST	4	PA; OTC; QL
ACCU-CHEK GUIDE	4	PA; OTC
ACCU-CHEK SMARTVIEW TEST STRIP	4	PA; OTC; QL
ACCU-TREND GLUCOSE	4	PA; OTC; QL
ADVANCED GLUC METER TEST STRIP	4	PA; OTC
ADVOCATE REDI-CODE	4	PA; OTC; QL
ADVOCATE TEST STRIPS	4	PA; OTC; QL
AGAMATRIX AMP TEST STRIPS	4	PA; OTC
ASSURE 4 STRIPS	4	PA; OTC; QL
ASSURE PLATINUM	4	PA; OTC; QL
ASSURE PRISM MULTI STRIP	4	PA; OTC
BIONIME RIGHTEST TEST STRIPS	4	PA; OTC; QL
BLOOD GLUCOSE TEST	4	PA; OTC; QL
BREEZE 2 TEST STRIPS	4	PA; OTC; QL
CARESENS N TEST STRIPS	4	PA; OTC

Drug Name	Tier	Restrictions / limits
CLEVER CHOICE MICRO TEST STRIP	4	PA; OTC; QL
CLEVER CHOICE PRO	4	PA; OTC; QL
CLEVER CHOICE TEST STRIPS	4	PA; OTC; QL
CLEVER CHOICE VOICE+ TEST	4	PA; OTC; QL
CONTOUR NEXT STRIPS	4	PA; OTC; QL
CONTOUR TEST STRIPS	4	PA; OTC; QL
DIATRUPE PLUS TEST STRIP	4	PA; OTC
EASY PLUS II TEST	4	PA; OTC
EASY STEP	4	PA; OTC
EASY TALK GLUCOSE TEST	4	PA; OTC; QL
EASY TOUCH TEST STRIP	4	PA; OTC; QL
EASY TRAK GLUCOSE TEST	4	PA; OTC; QL
EASYGLUCO PLUS	4	PA; OTC
EASYGLUCO TEST	4	PA; OTC; QL
EASYMAX	4	PA; OTC; QL
ELEMENT COMPACT TEST STRIPS	4	PA; OTC
ELEMENT TEST STRIPS	4	PA; OTC; QL
EMBRACE BLOOD GLUCOSE SYSTEM	4	PA; OTC; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
EMBRACE EVO TEST STRIPS	4	PA; OTC
EMBRACE PRO TEST STRIPS	4	PA; OTC
EVENCARE G2	4	PA; OTC; QL
EVENCARE G3 TEST	4	PA; OTC; QL
EVENCARE MINI GLUCOSE TEST STR	4	PA; OTC
EVOLUTION TEST STRIPS	4	PA; OTC; QL
EZ SMART PLUS TEST	4	PA; OTC; QL
EZ SMART TEST	4	PA; OTC; QL
FIFTY50 TEST STRIP	4	PA; OTC; QL
FORA D15G	4	PA; OTC; QL
FORA D20	4	PA; OTC; QL
FORA D40-G31 TEST STRIPS	4	PA; OTC; QL
FORA G20	4	PA; OTC; QL
FORA G30A	4	PA; OTC; QL
FORA GD50 TEST STRIPS	4	PA; OTC
FORA TEST STRIP	4	PA; OTC; QL
FORA TN'G VOICE TEST STRIPS	4	PA; OTC
FORA V10	4	PA; OTC
FORA V10-V12-D10-D20 STRIPS	4	PA; OTC
FORA V12 GLUCOSE	4	PA; OTC
FORA V20	4	PA; OTC; QL
FORACARE GD20	4	PA; OTC; QL
FORACARE GD40	4	PA; OTC; QL

Drug Name	Tier	Restrictions / limits
FORTISCARE GLUCOSE TEST STRIPS	4	PA; OTC
FREESTYLE INSULINX	3	OTC; QL
FREESTYLE INSULINX TEST STRIPS	3	OTC; QL
FREESTYLE LITE STRIPS	3	OTC; QL
FREESTYLE PRECISION NEO STRIPS	3	OTC
FREESTYLE TEST	3	OTC; QL
GE100 BLOOD GLUCOSE TEST STRIP	4	PA; OTC; QL
GENSTRIP TEST STRIP	4	PA; OTC
GLUCO NAVII TEST STRIP	4	PA; OTC
GLUCOCARD 01 SENSOR PLUS	4	PA; OTC
GLUCOCARD EXPRESSION	4	PA; OTC; QL
GLUCOCARD SHINE TEST STRIPS	4	PA; OTC
GLUCOCARD VITAL SENSOR	4	PA; OTC; QL
GLUCOCARD VITAL TEST STRIPS	4	PA; OTC; QL
GLUCOCOM GLUCOSE	4	PA; OTC; QL
GM100	4	PA; OTC; QL
HEALTHPRO TEST STRIPS	4	PA; OTC

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
INFINITY TEST STRIPS	4	PA; OTC; QL
MICRO BLOOD GLUCOSE	4	PA; OTC
MICRODOT BLOOD GLUCOSE SYSTEM	4	PA; OTC; QL
MYGLUCOHEALTH	4	PA; OTC; QL
NEUTEK 2TEK TEST STRIPS	4	PA; OTC; QL
NOVA MAX GLUCOSE TEST	4	PA; OTC; QL
ON CALL EXPRESS TEST STRIP	4	PA; OTC
ON CALL PLUS TEST STRIP	4	PA; OTC; QL
ON CALL VIVID TEST STRIP	4	PA; OTC; QL
ONETOUCH ULTRA TEST	4	PA; OTC; QL
ONETOUCH VERIO	4	PA; OTC; QL
OPTIUM EZ	3	OTC; QL
OPTIUM TEST	3	OTC; QL
OPTUMRX	4	PA; OTC
PHARMACIST CHOICE	4	PA; OTC; QL
PRECISION PCX PLUS TEST	3	OTC; QL
PRECISION PCX TEST	3	OTC; QL
PRECISION POINT OF CARE TEST	3	OTC; QL
PRECISION Q-I-D TEST	3	OTC; QL

Drug Name	Tier	Restrictions / limits
PRECISION XTRA TEST	3	OTC; QL
PREMIUM V10	4	PA; OTC; QL
PRODIGY NO CODING	4	PA; OTC; QL
QUINTET AC	4	PA; OTC
REFUAH PLUS	4	PA; OTC; QL
RELION CONFIRM-MICRO	4	PA; OTC; QL
RELION PRIME TEST STRIPS	4	PA; OTC; QL
REVEAL TEST STRIP	4	PA; OTC; QL
RIGHTEST GS550 TEST STRIPS	4	PA; OTC; QL
SMART SENSE TEST STRIPS	4	PA; OTC
SMARTEST TEST	4	PA; OTC; QL
SOLUS V2 TEST STRIPS	4	PA; OTC; QL
SURE-TEST EASYPLUS MINI	4	PA; OTC; QL
TELCARE TEST STRIPS	4	PA; OTC; QL
TEST N'GO TEST	4	PA; OTC
TRUE METRIX GLUCOSE TEST STRIP	4	PA; OTC
TRUETEST TEST STRIPS	4	PA; OTC
TRUETRACK TEST	4	PA; OTC; QL
ULTIMA TEST STRIPS	4	PA; OTC
ULTRATRAK	4	PA; OTC
ULTRATRAK ULTIMATE	4	PA; OTC; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
UNISTRIP1 TEST STRIP	4	PA; OTC
WAVESENSE JAZZ	4	PA; OTC
WAVESENSE PRESTO	4	PA; OTC; QL
Diabetes, Supplies, & Durable Medical Equipment		
ACE AEROSOL CLOUD ENHANCER	4	
AEROCHAMBER MINI	4	
AEROCHAMBER PLUS FLOW-VU	4	
AEROCHAMBER PLUS Z STAT SM MSK	4	
AEROTRACH PLUS	4	
AEROVENT PLUS	4	
BREATHERITE WITH MASK, SMALL	4	
CLEVER CHOICE CHAMBER-SM MASK	4	
COMPACT SPACE CHAMBER-LRG MASK	4	
EASIVENT HOLDING CHAMBER	4	
E-Z SPACER	4	
FLEXICHAMBER	4	
GLUCAGEN DIAGNOSTIC KIT	4	QL
GLUCAGON HCL	4	QL

Drug Name	Tier	Restrictions / limits
INSPIRACHAMBER WITH MASK-LARGE	4	
INSULIN SYRINGE-NEEDLE U-100	3	
LITEAIRE MDI CHAMBER	4	
MICROCHAMBER	4	
MICROSPACER	4	
OPTICHAMBER DIAMOND LG MASK	4	
POCKET CHAMBER	4	
PRIMEAIRE	4	
PROCHAMBER	4	
RITEFLO AEROCHAMBER	4	
VORTEX HOLDING CHAMBER CHILD	4	
VORTEX VHC FROG MASK-CHILD	4	
VORTEX VHC LADYBUG MASK-TODDLR	4	
Glucose Elevating Agents		
GLUCAGEN HYPOKIT	4	QL
GLUCAGON EMERGENCY KIT (HUMAN)	4	QL
PROGLYCEM	4	
Insulin Syringes/Miscellaneous Durable Medical Equ		

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ACCU-CHEK AVIVA CONNECT METER	4	PA; OTC
ACCU-CHEK AVIVA PLUS METER	4	PA; OTC
ACCU-CHEK COMBO SYSTEM	4	PA
ACCU-CHEK GUIDE GLUCOSE METER	4	PA; OTC
ACCU-CHEK NANO	4	PA; OTC
ADVANCED GLUCOSE METER	4	PA; OTC
ADVOCATE BLOOD GLUCOSE MONITOR	4	PA; OTC
ADVOCATE REDI- CODE GLU MONITOR	4	PA; OTC
AGAMATRIX AMP GLUC MONITOR SYS	4	PA; OTC
ASSURE PLATINUM	4	PA; OTC
ASSURE PRISM MULTI METER	4	PA; OTC
AUTOJECT 2 INJECTION DEVICE	4	OTC
AUTOPEN 1 TO 21 UNITS	4	OTC
BIONIME RIGHTEST GM300 SYSTEM	4	PA; OTC
BLOOD-GLUCOSE METER	4	PA; OTC
CARESENS N	4	PA; OTC

Drug Name	Tier	Restrictions / limits
CARESENS N VOICE	4	PA; OTC
CLEVER CHEK BLOOD GLUCOSE	4	PA; OTC
CLEVER CHOICE GLUCOSE MONITOR	4	PA; OTC
CLEVER CHOICE MICRO	4	PA; OTC
CLEVER CHOICE PRO	4	PA; OTC
CONTOUR LINK	4	PA; OTC
CONTOUR NEXT EZ METER	4	PA; OTC
CONTOUR NEXT METER	4	PA; OTC
CONTOUR NEXT ONE METER	4	PA; OTC
CONTROL AST MONITORING SYSTEM	4	PA; OTC
DIATRUE PLUS BLOOD GLUCOSE MET	4	PA; OTC
EASY PLUS II BLOOD GLUCOSE MET	4	PA; OTC
EASY STEP BLOOD GLUCOSE METER	4	PA; OTC
EASY TALK BLOOD GLUCOSE METER	4	PA; OTC
EASY TOUCH GLUCOSE MONITOR	4	PA; OTC
EASYGLUCO MONITORING SYSTEM	4	PA; OTC; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
EASYGLUCO PLUS	4	PA; OTC
EASYMAX L BLOOD GLUCOSE METER	4	PA; OTC
EASYMAX NG	4	PA; OTC
EASYMAX V SPEAKING GLUCOSE SYS	4	PA; OTC
EASYMAX V2 BLOOD GLUCOSE METER	4	PA; OTC
ELEMENT COMPACT GLUCOSE METER	4	PA; OTC
ELEMENT COMPACT V GLUCOSE MTR	4	PA; OTC
ELEMENT PLUS BLOOD GLUCOSE KIT	4	PA; OTC
EMBRACE BLOOD GLUCOSE SYSTEM	4	PA; OTC
EMBRACE PRO GLUCOSE METER	4	PA; OTC
ENLITE SYSTEM	4	
EVENCARE G2	4	PA; OTC
EVENCARE G3 GLUCOSE METER	4	PA; OTC
EVOLUTION BLOOD GLUCOSE METER	4	PA; OTC
EZ SMART PLUS SYSTEM	4	PA; OTC
EZ SMART SYSTEM	4	PA; OTC
FORA D20	4	PA; OTC
FORA G20	4	PA; OTC

Drug Name	Tier	Restrictions / limits
FORA G30A	4	PA; OTC
FORA GD50 BLOOD GLUCOSE SYSTEM	4	PA; OTC
FORA PREMIUM V10 GLUCOSE METER	4	PA; OTC
FORA TEST N'GO VOICE METER	4	PA; OTC
FORA TN'G VOICE METER	4	PA; OTC
FORA V10	4	PA; OTC
FORA V12 BLOOD GLUCOSE SYSTEM	4	PA; OTC
FORA V20	4	PA; OTC
FORA V30A	4	PA; OTC
FORACARE GD20 GLUCOSE METER	4	PA; OTC
FORACARE GD40A GLUCOSE METER	4	PA; OTC
FORACARE GD40B GLUCOSE METER	4	PA; OTC
FORTISCARE BLOOD GLUCOSE SYST	4	PA; OTC
FREESTYLE FLASH SYSTEM	0	OTC
FREESTYLE FREEDOM	0	OTC
FREESTYLE FREEDOM LITE	0	OTC
FREESTYLE INSULINX	0	OTC
FREESTYLE LITE METER	0	OTC

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Drug Name	Tier	Restrictions / limits
FREESTYLE PRECISION NEO METER	0	OTC
FREESTYLE SIDEKICK II	0	OTC
FREESTYLE SYSTEM KIT	0	OTC
GE100 BLOOD GLUCOSE SYSTEM	4	PA; OTC
GLUCO NAVII GLUCOSE MONITOR	4	PA; OTC
GLUCOCARD 01 METER	4	PA; OTC
GLUCOCARD EXPRESSION	4	PA; OTC
GLUCOCARD SHINE METER	4	PA; OTC
GLUCOCARD VITAL	4	PA; OTC
GLUCOCOM BLOOD GLUCOSE	4	PA; OTC
GM100	4	PA; OTC
HEALTHPRO GLUCOSE MONITOR	4	PA; OTC
HUMAPEN LUXURA HD	4	
INFINITY STARTER KIT	4	PA; OTC
JAZZ WIRELESS 2 METER KIT	4	PA; OTC
LANCETS	3	OTC
LANCING DEVICE	4	OTC
MICRODOT BLOOD GLUCOSE SYSTEM	4	PA; OTC

Drug Name	Tier	Restrictions / limits
MYGLUCOHEALTH	4	PA; OTC
NOVA MAX BLOOD GLUCOSE METER	4	PA; OTC
NOVOPEN ECHO	4	
ON CALL EXPRESS METER	4	PA; OTC
ON CALL PLUS METER	4	PA; OTC
ON CALL VIVID METER	4	PA; OTC
ON CALL VIVID PAL METER	4	PA; OTC
ONETOUCH ULTRA2	4	PA; OTC
ONETOUCH ULTRAMINI	4	PA; OTC
ONETOUCH VERIO FLEX	4	PA; OTC
ONETOUCH VERIO IQ METER	4	PA; OTC
ONETOUCH VERIO SYNC	4	PA; OTC
ONETOUCH VERIO SYSTEM	4	PA; OTC
OPTUMRX	4	PA; OTC
PEN NEEDLE	3	OTC
PHARMACIST CHOICE GLUCOSE SYS	4	PA; OTC
PRECISION XTRA MONITOR	0	OTC
PREMIUM BLOOD GLUCOSE MONITOR	4	PA; OTC
PREMIUM V10	4	PA; OTC

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Drug Name	Tier	Restrictions / limits
PRESTO PRO BLOOD GLUCOSE METER	4	PA; OTC
PRODIGY AUTOCODE METER	4	PA; OTC
PRODIGY AUTOCODE MONITOR SYST	4	PA; OTC
PRODIGY POCKET METER	4	PA; OTC
PRODIGY VOICE GLUCOSE METER	4	PA; OTC
QUINTET BLOOD GLUCOSE METER	4	PA; OTC
REFUAH PLUS GLUCOSE MONITOR	4	PA; OTC; QL
RELION ALL-IN-ONE METER	4	PA; OTC; QL
RELION CONFIRM	4	PA; OTC
RELION MICRO GLUCOSE MONITOR	4	PA; OTC
RELION PRIME METER	4	PA; OTC
REVEAL BLOOD GLUCOSE METER	4	PA; OTC
RIGHTEST GM550 SYSTEM	4	PA; OTC
SMART SENSE MONITORING SYSTEM	4	PA; OTC
SMARTEST EJECT	4	PA; OTC
SMARTEST PERSONA STARTER	4	PA; OTC

Drug Name	Tier	Restrictions / limits
SMARTEST PRONTO STARTER	4	PA; OTC
SMARTEST PROTEGE	4	PA; OTC
SNAP INSULIN PUMP CONTROLLER	4	
SNAP INSULIN PUMP-INFUSION SET	4	
SOLUS V2 AUDIBLE METER	4	PA; OTC
SURE-TEST EASYPLUS MINI METER	4	PA; OTC
T:SLIM	4	
T:SLIM G4	4	
TELCARE BGM	4	PA; OTC
TELCARE BLOOD GLUCOSE KIT	4	PA; OTC
TEST N'GO BLOOD GLUCOSE SYSTEM	4	PA; OTC
TRUE METRIX GLUCOSE METER	4	PA; OTC
TRUE METRIX GO GLUCOSE METER	4	PA; OTC
TRUE2GO BLOOD GLUCOSE SYSTEM	4	PA; OTC
TRUERESULT BLOOD GLUCOSE SYSTM	4	PA; OTC
TRUETRACK BLOOD GLUCOSE SYSTEM	4	PA; OTC
TRUETRACK SMART SYSTEM	4	PA; OTC

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Drug Name	Tier	Restrictions / limits
ULTRATRAK GLUCOSE METER	4	PA; OTC
ULTRATRAK ULTIMATE	4	PA; OTC
VGO 20	4	
VGO 30	4	
VGO 40	4	
WAVESENSE AMP	4	PA; OTC
WAVESENSE PRESTO	4	PA; OTC
Insulin Therapy		
AFREZZA	4	PA
APIDRA	4	PA
APIDRA SOLOSTAR	4	PA
BASAGLAR KWIKPEN	4	
HUMALOG	3	
HUMALOG JUNIOR KWIKPEN	3	
HUMALOG KWIKPEN	3	
HUMALOG MIX 50-50	3	
HUMALOG MIX 50-50 KWIKPEN	3	
HUMALOG MIX 75-25	3	
HUMALOG MIX 75-25 KWIKPEN	3	
HUMULIN 70/30	3	
HUMULIN 70/30 KWIKPEN	3	
HUMULIN N	3	
HUMULIN N KWIKPEN	3	

Drug Name	Tier	Restrictions / limits
HUMULIN R U-100	3	
HUMULIN R U-500 (CONC) KWIKPEN	3	
HUMULIN R U-500 (CONCENTRATED)	3	
LANTUS	3	
LANTUS SOLOSTAR	3	
LEVEMIR	3	
LEVEMIR FLEXTOUCH	3	
NOVOLOG	4	PA
NOVOLOG FLEXPEN	4	PA
NOVOLOG MIX 70-30	4	PA
NOVOLOG MIX 70-30 FLEXPEN	4	PA
NOVOLOG PENFILL	4	PA
RELION NOVOLIN 70/30	4	PA
RELION NOVOLIN N	4	PA
RELION NOVOLIN R	4	PA
SOLIQUA 100/33	4	PA
TOUJEO SOLOSTAR	3	
TRESIBA FLEXTOUCH U-100	3	
TRESIBA FLEXTOUCH U-200	3	
XULTOPHY 100/3.6	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
Miscellaneous Hormones		
ACTHREL	4	PA
ALDURAZYME	6	PA; LA
ANADROL-50	4	PA
ANDRODERM	4	PA; QL
ANDROGEL TRANSDERMAL GEL IN METERED-DOSE PUMP	3	PA; QL
ANDROGEL TRANSDERMAL GEL IN PACKET 1 % (25 MG/2.5GRAM), 1 % (50 MG/5 GRAM)	4	PA; QL
ANDROGEL TRANSDERMAL GEL IN PACKET 1.62 % (20.25 MG/1.25 GRAM), 1.62 % (40.5 MG/2.5 GRAM)	3	PA; QL
ANDROID	4	PA; QL
AVEED	6	PA
AXIRON	4	PA
BRAVELLE	5	PA; LA
<i>cabergoline</i>	1	
<i>calcitonin (salmon)</i>	2	
<i>calcitriol intravenous</i>	2	PA
<i>calcitriol oral</i>	2	
CERDELGA	6	PA; LA
CEREZYME	6	PA
CETROTIDE	6	PA; LA

Drug Name	Tier	Restrictions / limits
CHORIONIC GONADOTROPIN, HUMAN	6	QL
<i>clomiphene citrate</i>	1	
<i>danazol</i>	2	
DDAVP	4	
DEPO- TESTOSTERONE	4	
<i>desmopressin</i>	2	
<i>doxercalciferol intravenous</i>	2	PA
<i>doxercalciferol oral</i>	2	
ELAPRASE	6	PA; LA
ELELYSO	5	PA
FABRAZYME	6	PA; LA
FOLLISTIM AQ	5	PA; LA
FORTESTA	4	PA
GANIRELIX	5	PA; LA
GONAL-F	6	PA; LA
GONAL-F RFF	6	PA; LA
GONAL-F RFF REDI-JECT	6	PA; LA
HECTOROL INTRAVENOUS	4	PA
HECTOROL ORAL	4	
KANUMA	6	PA
KORLYM	6	PA
KUVAN	6	PA; LA
LUMIZYME	6	PA; LA
MENOPUR	5	PA; LA
METHITEST	4	PA; QL
<i>methyltestosterone</i>	2	PA; QL
MIACALCIN	4	PA
MYALEPT	6	PA; LA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
NAGLAZYME	6	PA; LA
NATESTO	4	PA
NATPARA	6	PA; LA
NOVAREL	6	QL
OVIDREL	6	
OXANDRIN	4	PA
<i>oxandrolone</i>	2	PA
<i>pamidronate</i>	5	PA; LA
PARICALCITOL HEMODIALYSIS PORT INJECTION	4	PA
<i>paricalcitol intravenous</i>	2	PA
<i>paricalcitol oral</i>	2	
PREGNYL	6	QL
RAYALDEE	4	PA
ROCALTROL	4	
SAMSCA	6	PA; LA
SENSIPAR	4	
SOMAVERT	6	PA; LA
STIMATE	6	
STRENSIQ	6	PA
STRIANT	4	PA; QL
SYNAREL	3	PA
TESTIM	4	PA; QL
TESTONE CIK	4	
TESTOPEL	6	PA; LA
<i>testosterone cypionate</i>	2	
<i>testosterone enanthate</i>	2	
TESTOSTERONE TRANSDERMAL GEL	4	PA; QL

Drug Name	Tier	Restrictions / limits
TESTOSTERONE TRANSDERMAL GEL IN METERED-DOSE PUMP 10 MG/0.5 GRAM /ACTUATION	4	PA
<i>testosterone transdermal gel in metered-dose pump 12.5 mg/ 1.25 gram (1 %)</i>	2	PA; QL
<i>testosterone transdermal gel in packet</i>	2	PA; QL
<i>testosterone transdermal solution in metered pump w/app</i>	2	PA
TESTRED	4	PA; QL
<i>vasopressin in 0.9 % nacl</i>	2	PA
VASOSTRICT	4	PA
VIMIZIM	6	PA; LA
VOGELXO	4	PA; QL
VPRIV	6	PA; LA
ZAVESCA	6	PA; LA
ZEMPLAR INTRAVENOUS	4	PA
ZEMPLAR ORAL	4	
ZOMETA	6	PA; LA
Non-Insulin Hypoglycemic Agents		
<i>acarbose</i>	1	
ACTOPLUS MET	4	QL
ACTOPLUS MET XR	4	ST; QL
ACTOS	4	QL
ADLYXIN	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
AMARYL	4	
AVANDIA	4	PA; ST; QL
BYDUREON	3	PA; QL
BYETTA	3	PA; QL
<i>chlorpropamide</i>	1	
CYCLOSET	4	
DUETACT	4	
FARXIGA	4	ST
FORTAMET	4	PA
<i>glimepiride</i>	1	
<i>glipizide</i>	1	
<i>glipizide-metformin</i>	1	
GLUCOPHAGE	4	
GLUCOPHAGE XR	4	
GLUCOTROL	4	
GLUCOTROL XL	4	
GLUCOVANCE	4	
<i>glyburide</i>	1	
<i>glyburide micronized</i>	1	
<i>glyburide-metformin</i>	1	
GLYNASE	4	
GLYSET	4	
GLYXAMBI	4	PA
INVOKAMET	3	ST
INVOKAMET XR	3	ST
INVOKANA	3	ST
JANUMET	3	ST
JANUMET XR	3	ST
JANUVIA	3	ST
JARDIANCE	3	ST
JENTADUETO	3	ST

Drug Name	Tier	Restrictions / limits
JENTADUETO XR	3	ST
KAZANO	4	PA
KOMBIGLYZE XR	4	PA
<i>metformin oral tablet</i>	1	
<i>metformin oral tablet extended release 24 hr</i>	1	
<i>metformin oral tablet extended release 24hr</i>	2	PA
<i>metformin oral tablet,er gast.retention 24 hr</i>	2	PA
<i>miglitol</i>	2	
<i>nateglinide</i>	2	
NESINA	4	PA
ONGLYZA	4	PA
OSENI	4	PA
<i>pioglitazone</i>	1	QL
<i>pioglitazone-glimepiride</i>	2	
<i>pioglitazone-metformin</i>	2	QL
PRANDIN	4	
PRECOSE	4	
<i>repaglinide</i>	1	
<i>repaglinide-metformin</i>	2	
RIOMET	4	
STARLIX	4	
SYMLINPEN 120	4	PA; QL
SYMLINPEN 60	4	PA; QL
SYNJARDY	3	ST
SYNJARDY XR	4	ST

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Drug Name	Tier	Restrictions / limits
TANZEUM	4	PA
<i>tolazamide</i>	2	
<i>tolbutamide</i>	2	
TRADJENTA	3	ST
TRULICITY	4	PA
VICTOZA 2-PAK	3	PA; QL
VICTOZA 3-PAK	3	PA; QL
XIGDUO XR	4	ST
Thyroid Hormones		
ARMOUR THYROID	3	
CYTOMEL	4	
LEVO-T	4	
LEVOTHYROXINE INTRAVENOUS RECON SOLN 100 MCG	4	PA
<i>levothyroxine intravenous recon soln 200 mcg, 500 mcg</i>	2	PA
<i>levothyroxine oral</i>	1	
<i>levoxyl</i>	1	
<i>liothyronine intravenous</i>	2	PA
<i>liothyronine oral</i>	1	
<i>nature-throid</i>	1	
<i>np thyroid</i>	1	
SYNTHROID	4	
THYROLAR-1	3	
THYROLAR-1/2	3	
THYROLAR-1/4	3	
THYROLAR-2	3	
THYROLAR-3	3	

Drug Name	Tier	Restrictions / limits
TIROSINT	4	
TRIOSTAT	4	PA
<i>unithroid</i>	1	
<i>westhroid</i>	1	
WP THYROID	4	
Gastroenterology		
Antidiarrheals & Antispasmodics		
<i>anaspaz</i>	1	
<i>atropine</i>	2	PA
<i>belladonna alkaloids-opium</i>	2	
<i>belladonna-opium</i>	2	
BENTYL INTRAMUSCULAR	4	PA
BENTYL ORAL	4	
<i>chlordiazepoxide-clidinium</i>	2	
CUVPOSA	6	PA; LA
<i>dicyclomine intramuscular</i>	2	PA
<i>dicyclomine oral</i>	1	
<i>diphenoxylate-atropine</i>	1	
DONNATAL	4	
<i>ed-spaz</i>	2	
<i>glycopyrrolate injection</i>	2	PA
<i>glycopyrrolate oral</i>	1	
<i>hyoscyamine sulfate</i>	1	
<i>hyosyne</i>	1	
LEVVID	4	
LEVSIN INJECTION	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
LEVSIN ORAL	4	
LEVSIN/SL	4	
LIBRAX (WITH CLIDINIUM)	4	
LOMOTIL	4	
<i>loperamide</i>	1	
<i>methscopolamine</i>	2	
MOTOFEN	4	
MYTESI	4	QL
NULEV	4	
<i>opium tincture</i>	2	
<i>oscimin</i>	1	
<i>oscimin sl</i>	1	
<i>oscimin sr</i>	1	
<i>paregoric</i>	2	
<i>phenobarb-hyoscy-atropine-scop</i>	2	
<i>phenohydro</i>	2	
<i>propantheline</i>	2	
ROBINUL FORTE	4	
ROBINUL INJECTION	4	PA
ROBINUL ORAL	4	
SYMAX DUOTAB	4	
<i>symax fastabs</i>	2	
<i>symax-sl</i>	2	
<i>symax-sr</i>	2	
Miscellaneous Gastrointestinal Agents		
ACTIGALL	4	
AKYNZEO	4	PA; QL
<i>alopen</i>	0	ACA; OTC
<i>alosetron</i>	2	QL

Drug Name	Tier	Restrictions / limits
ALOXI	4	PA
AMITIZA	3	QL
ANA-LEX KIT	4	
ANALPRAM-HC	4	
ANALPRAM-HC SINGLES	4	
<i>anucort-hc</i>	2	
ANUSOL-HC	4	
ANZEMET	4	PA; QL
<i>aprepitant oral capsule 125 mg</i>	2	QL
<i>aprepitant oral capsule 40 mg, 80 mg</i>	2	
<i>aprepitant oral capsule, dose pack</i>	2	QL
APRISO	3	
ASACOL HD	4	PA
AURYXIA	4	
AZULFIDINE	4	
AZULFIDINE EN-TABS	4	
<i>balsalazide</i>	2	
<i>bisacodyl</i>	0	ACA; OTC
<i>bisa-lax</i>	0	ACA; OTC
<i>budesonide</i>	2	
<i>calcium acetate</i>	2	
CANASA	3	
CESAMET	4	PA
CHENODAL	6	PA
CHOLBAM	6	PA
CIMZIA	6	PA; LA; QL
CIMZIA POWDER FOR RECONST	6	PA; LA; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>citrate of magnesia</i>	0	ACA; OTC
<i>citroma</i>	0	ACA; OTC
<i>clearlax</i>	0	ACA; OTC
COLAZAL	4	
<i>colocort</i>	2	
COLYTE WITH FLAVOR PACKS	4	
COMPAZINE	4	
<i>compro</i>	2	
<i>constulose</i>	1	
CORTENEMA	4	
CORTIFOAM	3	
CREON	3	
<i>cromolyn</i>	2	
CYSTADANE	6	
DELZICOL	4	PA
DICLEGIS	4	QL
<i>dimenhydrinate</i>	2	PA
DIPENTUM	4	PA
<i>dronabinol</i>	2	
<i>droperidol</i>	2	PA
<i>ducodyl</i>	0	ACA; OTC
<i>eliphos</i>	2	
EMEND INTRAVENOUS	4	PA
EMEND ORAL CAPSULE 125 MG	4	QL
EMEND ORAL CAPSULE 40 MG, 80 MG	4	
EMEND ORAL CAPSULE,DOSE PACK	4	QL

Drug Name	Tier	Restrictions / limits
EMEND ORAL SUSPENSION FOR RECONSTITUTION	4	
ENTOCORT EC	4	
ENTYVIO	6	PA; LA
<i>enulose</i>	1	
<i>fleet laxative</i>	0	ACA; OTC
FOSRENOL	4	
GASTROCROM	4	
GATTEX 30-VIAL	6	PA; LA
<i>gavilax</i>	0	ACA; OTC
<i>gavilyte-c</i>	0	ACA
<i>gavilyte-g</i>	0	ACA
<i>gavilyte-n</i>	0	ACA
<i>generlac</i>	1	
<i>gentle laxative</i>	0	ACA; OTC
<i>gentlelax</i>	0	ACA; OTC
GIAZO	4	
<i>glycolax</i>	0	ACA; OTC
GOLYTELY	4	
<i>granisetron (pf)</i>	2	PA
<i>granisetron hcl intravenous</i>	2	PA
<i>granisetron hcl oral</i>	2	ST; QL
<i>healthylax</i>	0	ACA; OTC
<i>hemmorex-hc</i>	2	
<i>hydrocortisone</i>	2	
<i>hydrocortisone acetate</i>	2	
<i>hydrocortisone-pramoxine</i>	2	
INFLECTRA	6	PA; LA
KINEVAC	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>kionex</i>	2	
<i>kionex (with sorbitol)</i>	2	
KRISTALOSE	4	
<i>lactulose</i>	1	
<i>laxaclear</i>	0	ACA; OTC
<i>laxative (bisacodyl)</i>	0	ACA; OTC
<i>laxative feminine</i>	0	ACA; OTC
<i>laxative peg 3350</i>	0	ACA; OTC
LIALDA	4	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL CREAM 3 %-1 % (7 GRAM)	4	
<i>lidocaine hcl-hydrocortison ac rectal cream 3-0.5 %</i>	2	
LIDOCAINE HCL-HYDROCORTISON AC RECTAL GEL	4	
<i>lidocaine hcl-hydrocortison ac rectal kit</i>	2	
<i>lidocaine-hydrocortisone-aloe</i>	2	
LINZESS	3	QL
LOTRONEX	4	QL
MAGNEBIND 400	4	
<i>magnesium citrate</i>	0	ACA; OTC
MARINOL	4	
<i>meclizine</i>	1	
<i>mesalamine oral tablet,delayed release (dr/ec) 1.2 gram</i>	2	

Drug Name	Tier	Restrictions / limits
MESALAMINE ORAL TABLET,DELAYED RELEASE (DR/EC) 800 MG	4	PA
<i>mesalamine rectal</i>	2	
<i>mesalamine with cleansing wipe</i>	2	
<i>metoclopramide hcl injection</i>	2	PA
<i>metoclopramide hcl oral</i>	1	
MICORT-HC	4	
<i>milk of magnesia</i>	0	ACA; OTC
<i>milk of magnesia concentrated</i>	0	ACA; OTC
<i>miralax</i>	0	ACA; OTC
MOVANTIK	4	
MOVIPREP	4	
<i>natura-lax</i>	0	ACA; OTC
NOVACORT	4	PA
NULYTELY WITH FLAVOR PACKS	4	
OALIVA	6	PA; LA
<i>ondansetron</i>	1	
<i>ondansetron hcl (pf)</i>	2	PA
<i>ondansetron hcl intravenous</i>	2	PA
<i>ondansetron hcl oral solution</i>	1	
<i>ondansetron hcl oral tablet 24 mg</i>	1	QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	1	
ONDANSETRON IN 0.9 % SOD CHLOR	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>oral saline laxative</i>	0	ACA; OTC
OSMOPREP	4	
PANCREAZE	4	
<i>peg 3350-electrolytes</i>	0	ACA
<i>peg3350</i>	0	ACA; OTC
<i>peg-electrolyte soln</i>	0	ACA
<i>peg-prep</i>	0	ACA
PENTASA	3	
PERTZYE	4	
PHOSLYRA	4	
<i>phosphate laxative</i>	0	ACA; OTC
<i>polyethylene glycol 3350</i>	0	ACA
<i>powderlax</i>	0	ACA; OTC
<i>pramcort</i>	2	
PREPOPIK	4	
<i>prochlorperazine</i>	2	
<i>prochlorperazine edisylate</i>	2	PA
<i>prochlorperazine maleate</i>	1	
PROCORT	4	
PROCTOCORT	4	
PROCTOFOAM HC	4	
<i>procto-med hc</i>	2	
<i>procto-pak</i>	2	
<i>proctosol hc</i>	2	
<i>proctozone-hc</i>	2	
<i>purelax</i>	0	ACA; OTC
RECTIV	4	
REGLAN	4	
RELISTOR	4	PA

Drug Name	Tier	Restrictions / limits
RENAGEL	3	QL
REVELA	4	
ROWASA	4	
SANCUSO	4	ST; QL
<i>scopolamine base</i>	2	
<i>sevelamer carbonate</i>	2	
SFROWASA	4	
<i>smoothlax</i>	0	ACA; OTC
<i>sodium polystyrene sulfonate oral</i>	2	
<i>sodium polystyrene sulfonate rectal enema 30 gram/120 ml</i>	2	
SODIUM POLYSTYRENE SULFONATE RECTAL ENEMA 50 GRAM/200 ML	4	
<i>sps (with sorbitol) oral</i>	1	
<i>sps (with sorbitol) rectal</i>	2	
SUCRAID	6	PA; LA
<i>sulfasalazine</i>	1	
SUPREP BOWEL PREP KIT	4	
SUSTOL	4	ST
SYNDROS	4	PA
TIGAN INTRAMUSCULAR	4	PA
TIGAN ORAL	4	
TRANSDERM-SCOP	4	
<i>trilyte with flavor packets</i>	0	ACA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>trimethobenzamide</i>	1	
TRULANCE	4	PA; QL
UCERIS	4	
URSO 250	4	
URSO FORTE	4	
<i>ursodiol</i>	2	
VARUBI	4	QL
VELPHORO	4	PA
VELTASSA	6	PA
VIBERZI	3	
VIOKACE	4	
<i>woman's laxative</i>	0	ACA; OTC
<i>women's gentle laxative(bisac)</i>	0	ACA; OTC
<i>women's laxative (bisacodyl)</i>	0	ACA; OTC
ZENPEP	3	
ZOFRAN (AS HYDROCHLORIDE) INTRAVENOUS	4	PA
ZOFRAN (AS HYDROCHLORIDE) ORAL	4	
ZOFRAN ODT	4	
ZUPLENZ	4	PA; QL
Ulcer Therapy		
ACIPHEX	4	PA; QL
ACIPHEX SPRINKLE	4	PA; QL
<i>amoxicil-clarithromy-lansopraz</i>	2	
CARAFATE	4	
<i>cimetidine</i>	1	
<i>cimetidine hcl</i>	1	

Drug Name	Tier	Restrictions / limits
CYTOTEC	4	
DEXILANT	4	PA
<i>esomeprazole magnesium</i>	2	PA; QL
<i>esomeprazole sodium</i>	2	PA
ESOMEPRAZOLE STRONTIUM	4	PA
<i>famotidine (pf)</i>	2	PA
<i>famotidine (pf)-nacl (iso-os)</i>	2	PA
<i>famotidine intravenous</i>	2	PA
<i>famotidine oral</i>	1	
<i>lansoprazole</i>	1	
<i>misoprostol</i>	1	
NEXIUM	4	PA; QL
NEXIUM 24HR	1	OTC
NEXIUM IV	4	PA
NEXIUM PACKET	4	PA
<i>nizatidine</i>	2	
OMECLAMOX-PAK	4	
<i>omeppi</i>	2	
<i>omeprazole</i>	1	
<i>omeprazole-sodium bicarbonate</i>	2	
<i>pantoprazole intravenous</i>	2	PA
<i>pantoprazole oral</i>	1	
PEPCID	4	
PREVACID	4	
PREVACID SOLUTAB	4	
PREVPAC	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
PRILOSEC	4	
PROTONIX INTRAVENOUS	4	PA
PROTONIX ORAL GRANULES DR FOR SUSP IN PACKET	4	PA
PROTONIX ORAL TABLET,DELAYE D RELEASE (DR/EC)	4	
PYLERA	3	
<i>rabeprazole</i>	1	QL
<i>ranitidine hcl injection</i>	2	PA
<i>ranitidine hcl oral</i>	1	
<i>sucralfate</i>	1	
ZANTAC INJECTION	4	PA
ZANTAC ORAL	4	
ZEGERID ORAL CAPSULE	4	
ZEGERID ORAL PACKET	4	PA
Immunology, Vaccines & Biotechnology		
Biotechnology Drugs		
ARANESP (IN POLYSORBATE)	5	PA; QL
EPOGEN	6	PA; QL
GRANIX	6	QL
LEUKINE	6	PA
MIRCERA	6	PA
MOZOBIL	6	PA; LA
NEULASTA	6	PA; QL
NEUPOGEN	5	PA; QL

Drug Name	Tier	Restrictions / limits
PROCRIT	5	PA; QL
ZARXIO	6	QL
Growth Hormones		
EGRIFTA	6	PA
GENOTROPIN	6	PA; LA
GENOTROPIN MINIQUICK	6	PA; LA
HUMATROPE	6	PA; LA
NORDITROPIN FLEXPRO	5	PA; LA
NUTROPIN AQ NUSPIN	6	PA; LA
OMNITROPE	6	PA; LA
SAIZEN	6	PA; LA
SAIZEN CLICK.EASY	6	PA; LA
SAIZEN SAIZENPREP	6	PA; LA
SEROSTIM	6	PA; LA
ZOMACTON	6	PA; LA
ZORBTIVE	6	PA; LA
Interferons		
AUBAGIO	6	PA; LA; QL
AVONEX	5	PA; LA
AVONEX (WITH ALBUMIN)	5	PA; LA; QL
BETASERON	5	PA; LA
COPAXONE SUBCUTANEOUS SYRINGE 20 MG/ML	6	PA; LA; QL
COPAXONE SUBCUTANEOUS SYRINGE 40 MG/ML	5	PA; LA
COPEGUS	6	LA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
EXTAVIA SUBCUTANEOUS KIT	6	PA; LA
EXTAVIA SUBCUTANEOUS RECON SOLN	6	LA
GILENYA	5	PA; LA
<i>glatopa</i>	5	PA; LA; QL
LEMTRADA	6	PA
<i>moderiba</i>	5	
<i>moderiba dose pack</i>	5	
OCREVUS	6	PA; LA
PEGASYS	5	PA; LA
PEGASYS PROCLICK	5	PA; LA
PEGINTRON	6	PA; LA; QL
PLEGRIDY	5	PA; LA
POMALYST	6	LA; QL
REBETOL	6	LA
REBIF (WITH ALBUMIN)	6	PA; LA
REBIF REBIDOSE	6	PA; LA
REBIF TITRATION PACK	6	PA; LA
REVLIMID	6	PA; LA
<i>ribasphere</i>	5	LA
<i>ribasphere ribapak</i>	5	LA
<i>ribavirin</i>	5	LA
SYLATRON	6	PA; LA
TECFIDERA	5	PA; LA
ZINBRYTA	6	PA; LA
Interleukins		
ACTIMMUNE	5	PA; LA
ALDARA	4	QL

Drug Name	Tier	Restrictions / limits
ALFERON N	5	PA; LA
ARCALYST	6	PA; LA
ILARIS (PF)	6	PA; LA
<i>imiquimod</i>	2	QL
INTRON A	5	PA; LA
KINERET	6	PA; QL
PROLEUKIN	6	PA; LA
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 2.5 %	4	
ZYCLARA TOPICAL CREAM IN METERED-DOSE PUMP 3.75 %	4	QL
ZYCLARA TOPICAL CREAM IN PACKET	4	QL
Vaccines & Miscellaneous Immunologicals		
ACTHIB (PF)	0	ACA
ADACEL(TDAP ADOLESN/ADULT)(PF)	0	ACA
AFLURIA 2017-2018	0	ACA
AFLURIA 2017-2018 (PF)	0	ACA
AFLURIA QUAD 2017-2018	0	ACA
AFLURIA QUAD 2017-2018 (PF)	0	ACA
ATGAM	6	PA; LA
BEXSERO	0	ACA
BIVIGAM	6	PA; LA
BOOSTRIX TDAP	0	ACA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
BOTOX	6	PA; LA; QL
CARIMUNE NF NANOFILTERED	6	PA; LA
CUVITRU	6	PA; LA
DAPTACEL (DTAP PEDIATRIC) (PF)	0	ACA
DYSPORT	6	PA; LA
ENGERIX-B (PF)	0	ACA
ENGERIX-B PEDIATRIC (PF)	0	ACA
FLEBOGAMMA DIF	6	PA; LA
FLUAD 2017-2018 (65 YR UP)(PF)	0	ACA
FLUARIX QUAD 2017-2018 (PF)	0	ACA
FLUBLOK 2017-2018 (PF)	0	ACA
FLUBLOK QUAD 2017-2018 (PF)	0	ACA
FLUCELVAX QUAD 2017-2018	0	ACA
FLUCELVAX QUAD 2017-2018 (PF)	0	ACA
FLULAVAL QUAD 2017-2018	0	ACA
FLULAVAL QUAD 2017-2018 (PF)	0	ACA
FLUVIRIN 2017-2018	0	ACA
FLUVIRIN 2017-2018 (PF)	0	ACA
FLUZONE HIGH-DOSE 2017-18 (PF)	0	ACA
FLUZONE INTRADERM QUAD 2017-18	0	ACA

Drug Name	Tier	Restrictions / limits
FLUZONE QUAD 2017-2018	0	ACA
FLUZONE QUAD 2017-2018 (PF)	0	ACA
FLUZONE QUAD PEDI 2017-18 (PF)	0	ACA
GAMASTAN S/D	6	PA
GAMMAGARD LIQUID	6	PA; LA
GAMMAGARD S-D (IGA < 1 MCG/ML)	6	PA
GAMMAKED	6	PA
GAMMAPLEX	4	PA
GAMMAPLEX (WITH SORBITOL)	6	PA
GAMUNEX-C	6	PA
GARDASIL 9 (PF)	0	ACA
GRASTEK	4	PA
HAVRIX (PF)	0	ACA
HEPAGAM B	6	PA; LA
HIBERIX (PF)	0	ACA
HIZENTRA	6	PA
HYPERHEP B S/D INTRAMUSCULAR SOLUTION	5	PA; LA
HYPERHEP B S/D INTRAMUSCULAR SYRINGE	6	PA; LA
HYPERHEP B S-D NEONATAL	6	PA; LA
HYPERRAB S/D (PF)	6	PA; LA
HYPERTET S/D (PF)	4	PA
HYQVIA	6	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
INFANRIX (DTAP) (PF)	0	ACA
IPOLE	0	ACA
KINRIX (PF)	0	ACA
MENACTRA (PF)	0	ACA
MENHIBRIX (PF)	0	ACA
MENOMUNE - A/C/Y/W-135	0	ACA
MENOMUNE - A/C/Y/W-135 (PF)	0	ACA
MENVEO A-C-Y-W-135-DIP (PF)	0	ACA
M-M-R II (PF)	0	ACA
MYOBLOC	6	PA; LA
NABI-HB	6	PA; LA
OCTAGAM	6	PA
ORALAIR	6	PA; LA
PEDIARIX (PF)	0	ACA
PEDVAX HIB (PF)	0	ACA
PENTACEL (PF)	0	ACA
PENTACEL ACTHIB COMPONENT (PF)	0	ACA
PNEUMOVAX 23	0	ACA
PREVNAR 13 (PF)	0	ACA
PRIVIGEN	6	PA
PROQUAD (PF)	0	ACA
QUADRACEL (PF)	0	ACA
RAGWITEK	4	PA
RECOMBIVAX HB (PF)	0	ACA
ROTARIX	0	PA; ACA
ROTATEQ VACCINE	0	PA; ACA

Drug Name	Tier	Restrictions / limits
TENIVAC (PF)	0	ACA
TETANUS,DIPHTHERIA TOX PED(PF)	0	ACA
TETANUS-DIPHTHERIA TOXOIDS-TD	0	ACA
THYMOGLOBULIN	6	PA; LA
TRUMENBA	0	ACA
TWINRIX (PF)	0	ACA
VAQTA (PF)	0	ACA
VARIVAX (PF)	0	ACA
VARIZIG	0	PA; ACA
XEOMIN	6	PA; LA
ZOSTAVAX (PF)	0	ACA

Musculoskeletal & Rheumatology

Gout Therapy

<i>allopurinol</i>	1	
<i>allopurinol sodium</i>	2	PA
<i>aloprim</i>	2	PA
COLCHICINE	4	
COLCRYS	3	
KRYSTEXXA	6	PA; LA
MITIGARE	4	
<i>probenecid</i>	1	
<i>probenecid-colchicine</i>	1	
ULORIC	4	
ZURAMPIC	4	PA
ZYLOPRIM	4	

Osteoporosis Therapy

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ACTONEL ORAL TABLET 150 MG, 5 MG	4	
ACTONEL ORAL TABLET 35 MG	4	QL
<i>alendronate oral solution</i>	1	
<i>alendronate oral tablet 10 mg, 5 mg</i>	1	
<i>alendronate oral tablet 35 mg, 70 mg</i>	1	QL
ATELVIA	4	
BINOSTO	4	
BONIVA INTRAVENOUS	6	PA; LA
BONIVA ORAL	4	QL
EVISTA	4	
FORTEO	5	
FOSAMAX	4	QL
FOSAMAX PLUS D ORAL TABLET 70 MG- 2,800 UNIT	4	QL
FOSAMAX PLUS D ORAL TABLET 70 MG- 5,600 UNIT	4	
<i>ibandronate intravenous</i>	5	PA; LA
<i>ibandronate oral</i>	1	QL
PROLIA	6	PA; LA; QL
<i>raloxifene</i>	0	ACA
<i>risedronate oral tablet 150 mg, 5 mg</i>	2	
<i>risedronate oral tablet 35 mg</i>	2	QL
<i>risedronate oral tablet, delayed release (dr/ec)</i>	2	

Drug Name	Tier	Restrictions / limits
TYMLOS	6	PA; LA
Other Rheumatologicals		
ACTEMRA	5	PA; LA
ARAVA	4	
BENLYSTA	6	PA; LA
CUPRIMINE	3	
DEPEN TITRATABS	4	
ENBREL	5	PA; LA; QL
ENBREL SURECLICK	5	PA; LA; QL
HUMIRA	5	PA; LA; QL
HUMIRA PEDIATRIC CROHN'S START	5	PA; LA; QL
HUMIRA PEN CROHN'S-UC-HS START	5	PA; LA; QL
HUMIRA PEN PSORIASIS-UVEITIS	5	PA; LA; QL
KEVZARA	6	PA; LA
<i>leflunomide</i>	2	
ORENCIA	5	PA; LA
ORENCIA (WITH MALTOSE)	5	PA; LA
ORENCIA CLICKJECT	5	PA; LA
OTEZLA	5	PA; LA
OTEZLA STARTER	5	PA; LA
OTREXUP (PF)	4	PA
RASUVO (PF)	4	PA
RIDAURA	3	
SAVELLA	4	PA

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
SIMPONI	6	PA; LA; QL
SIMPONI ARIA	6	PA; LA; QL
XELJANZ	5	PA; LA; QL
XELJANZ XR	5	PA; LA
Obstetrics & Gynecology		
Diaphragms And Other Non-Oral Contraceptives		
CAYA CONTOURED	0	ACA; QL
FC2 FEMALE CONDOM	0	ACA; OTC
FEMCAP	0	ACA
KYLEENA	0	ACA
LILETTA	0	ACA; LA
MIRENA	0	ACA
PARAGARD T 380A	0	ACA
SKYLA	0	ACA
WIDE-SEAL DIAPHRAGM	0	ACA
Estrogens & Progestins		
ACTIVELLA	4	
ALORA	4	
<i>amabelz</i>	2	
ANGELIQ	4	
AYGESTIN	4	
<i>camila</i>	0	ACA; QL
CLIMARA	4	
CLIMARA PRO	4	
COMBIPATCH	3	
<i>covaryx</i>	2	
<i>covaryx h.s.</i>	2	
CRINONE	4	

Drug Name	Tier	Restrictions / limits
<i>deblitane</i>	0	ACA; QL
DELESTROGEN	4	PA
DEPO-ESTRADIOL	4	PA
DEPO-PROVERA INTRAMUSCULAR SOLUTION	4	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	0	ACA; QL
DEPO-PROVERA INTRAMUSCULAR SYRINGE	0	ACA; QL
DEPO-SUBQ PROVERA 104	0	ACA; QL
DIVIGEL	4	QL
DUAVEE	3	
<i>eemt</i>	2	
<i>eemt hs</i>	2	
ELESTRIN	4	QL
ENDOMETRIN	4	PA
<i>errin</i>	0	ACA; QL
ESTRACE ORAL	4	
ESTRACE VAGINAL	3	
<i>estradiol</i>	1	
<i>estradiol valerate</i>	2	PA
<i>estradiol-norethindrone acet</i>	2	
ESTRING	3	QL
ESTROGEL	4	
<i>estrogens-methyltestosterone</i>	1	
<i>estropipate</i>	1	
EVAMIST	3	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
FEMHRT LOW DOSE	4	
FEMRING	4	QL
<i>fyavolv</i>	2	
<i>heather</i>	0	ACA; QL
<i>hydroxyprogesterone caproate</i>	2	
<i>jencycla</i>	0	ACA; QL
<i>jevantique lo</i>	1	
<i>jinteli</i>	2	
<i>jolivette</i>	0	ACA; QL
<i>lopreeza</i>	2	
<i>lyza</i>	0	ACA; QL
MAKENA	5	
<i>medroxyprogesterone intramuscular</i>	0	ACA; QL
<i>medroxyprogesterone oral</i>	1	
MENEST	4	
MENOSTAR	4	
<i>mimvey</i>	2	
<i>mimvey lo</i>	2	
MINIVELLE	4	
<i>nora-be</i>	0	ACA; QL
<i>norethindrone (contraceptive)</i>	0	ACA; QL
<i>norethindrone acetate</i>	1	
<i>norethindrone ac-eth estradiol</i>	1	
<i>norlyda</i>	0	ACA; QL
<i>norlyroc</i>	0	ACA; QL
ORTHO MICRONOR	0	PA; ACA; QL

Drug Name	Tier	Restrictions / limits
PREFEST	4	
PREMARIN INJECTION	4	PA
PREMARIN ORAL	3	
PREMARIN VAGINAL	3	
PREMPHASE	3	
PREMPRO	3	
<i>progesterone</i>	5	
<i>progesterone micronized</i>	1	
PROMETRIUM	4	
PROVERA	4	
<i>sharobel</i>	0	ACA; QL
VAGIFEM	4	
VIVELLE-DOT	4	
<i>yuvaferm</i>	2	
Miscellaneous Ob/Gyn		
AVC VAGINAL	4	
CERVIDIL	4	
CLEOCIN VAGINAL CREAM	4	
CLEOCIN VAGINAL SUPPOSITORY	3	
<i>clindamycin phosphate</i>	2	
CLINDESSE	4	
CONCEPTROL	0	ACA; OTC
<i>fem ph</i>	2	
GYNAZOLE-1	4	
<i>gynol ii</i>	0	ACA; OTC
INTRAROSA	4	
<i>isoxsuprine</i>	2	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
LUPANETA PACK (1 MONTH)	6	
LUPANETA PACK (3 MONTH)	6	
LYSTEDA	4	
METROGEL VAGINAL	4	
<i>metronidazole</i>	2	
<i>miconazole-3</i>	1	
NEXPLANON	0	ACA
NUVARING	0	ACA; QL
NUVESSA	4	
OSPHENA	4	
PREPIDIL	4	
PROSTIN E2	4	
RELAGARD	4	
TERAZOL 7	4	
<i>terconazole vaginal cream</i>	1	
<i>terconazole vaginal suppository</i>	2	
TODAY CONTRACEPTIVE SPONGE	0	ACA; OTC
<i>tranexamic acid</i>	2	
<i>vaginal contraceptive foam</i>	0	ACA; OTC
<i>vandazole</i>	2	
VCF CONTRACEPTIVE FILM	0	ACA; OTC
VCF CONTRACEPTIVE GEL	0	ACA; OTC
<i>xulane</i>	0	PA; ACA; QL

Drug Name	Tier	Restrictions / limits
Oral Contraceptives & Related Agents		
AFTERA	0	ACA; OTC; QL
<i>altavera (28)</i>	0	ACA; QL
<i>alyacen 1/35 (28)</i>	0	ACA; QL
<i>alyacen 7/7/7 (28)</i>	0	ACA; QL
<i>amethia</i>	0	PA; ACA; QL
<i>amethia lo</i>	0	PA; ACA; QL
<i>amethyst</i>	0	ACA; QL
<i>apri</i>	0	ACA; QL
<i>aranelle (28)</i>	0	ACA; QL
<i>ashlyna</i>	0	ACA; QL
<i>aubra</i>	0	ACA; QL
<i>aviane</i>	0	ACA; QL
<i>azurette (28)</i>	0	ACA; QL
<i>balziva (28)</i>	0	ACA; QL
<i>bekyree (28)</i>	0	ACA; QL
BEYAZ	0	PA; ACA; QL
<i>blisovi 24 fe</i>	0	ACA; QL
<i>blisovi fe 1.5/30 (28)</i>	0	ACA; QL
<i>blisovi fe 1/20 (28)</i>	0	ACA; QL
BREVICON (28)	0	PA; ACA; QL
<i>briellyn</i>	0	ACA; QL
<i>camrese</i>	0	PA; ACA; QL
<i>camrese lo</i>	0	PA; ACA; QL
<i>caziant (28)</i>	0	ACA; QL
<i>chateal</i>	0	ACA; QL
<i>cryselle (28)</i>	0	ACA; QL
<i>cyclafem 1/35 (28)</i>	0	ACA; QL
<i>cyclafem 7/7/7 (28)</i>	0	ACA; QL
CYCLESSA (28)	0	PA; ACA; QL

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>cyred</i>	0	ACA; QL
<i>dasetta 1/35 (28)</i>	0	ACA; QL
<i>dasetta 7/7/7 (28)</i>	0	ACA; QL
<i>daysee</i>	0	ACA; QL
<i>delyla (28)</i>	0	ACA; QL
<i>desog-e.estradiol/e.estradiol</i>	0	ACA; QL
<i>desogestrel-ethinyl estradiol</i>	0	ACA; QL
<i>drospirenone-e.estradiol-lm.f</i>	0	ACA; QL
<i>drospirenone-ethinyl estradiol</i>	0	ACA; QL
<i>econtra ez</i>	0	ACA; OTC; QL
<i>elinest</i>	0	ACA; QL
<i>ELLA</i>	0	PA; ACA; QL
<i>emoquette</i>	0	ACA; QL
<i>enpresse</i>	0	ACA; QL
<i>enskyce</i>	0	ACA
<i>estarylla</i>	0	ACA; QL
<i>ESTROSTEP FE-28</i>	0	PA; ACA; QL
<i>ethynodiol diac-eth estradiol</i>	0	ACA; QL
<i>fallback solo</i>	0	ACA; OTC; QL
<i>falmina (28)</i>	0	ACA; QL
<i>fayosim</i>	0	PA; ACA; QL
<i>femynor</i>	0	ACA; QL
<i>GENERESS FE</i>	0	PA; ACA; QL
<i>gianvi (28)</i>	0	ACA; QL
<i>gildagia</i>	0	ACA; QL
<i>introvale</i>	0	ACA; QL

Drug Name	Tier	Restrictions / limits
<i>isibloom</i>	0	ACA; QL
<i>jolessa</i>	0	ACA; QL
<i>juleber</i>	0	ACA; QL
<i>junel 1.5/30 (21)</i>	0	ACA; QL
<i>junel 1/20 (21)</i>	0	ACA; QL
<i>junel fe 1.5/30 (28)</i>	0	ACA; QL
<i>junel fe 1/20 (28)</i>	0	ACA; QL
<i>junel fe 24</i>	0	ACA; QL
<i>kaitlib fe</i>	0	ACA; QL
<i>kariva (28)</i>	0	ACA; QL
<i>kelnor 1/35 (28)</i>	0	ACA; QL
<i>kimidess (28)</i>	0	ACA; QL
<i>kurvelo</i>	0	ACA; QL
<i>l norgest/e.estradiol-e.estr</i>	0	ACA; QL
<i>larin 1.5/30 (21)</i>	0	ACA; QL
<i>larin 1/20 (21)</i>	0	ACA; QL
<i>larin 24 fe</i>	0	ACA; QL
<i>larin fe 1.5/30 (28)</i>	0	ACA; QL
<i>larin fe 1/20 (28)</i>	0	ACA; QL
<i>larissia</i>	0	ACA; QL
<i>layolis fe</i>	0	ACA; QL
<i>leena 28</i>	0	ACA; QL
<i>lessina</i>	0	ACA; QL
<i>levonest (28)</i>	0	ACA; QL
<i>levonorgestrel-ethinyl estrad</i>	0	ACA; QL
<i>levonorg-eth estrad triphasic</i>	0	ACA; QL
<i>levora-28</i>	0	ACA; QL
<i>lillow</i>	0	ACA; QL
<i>LO LOESTRIN FE</i>	0	PA; ACA; QL

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Drug Name	Tier	Restrictions / limits
LOESTRIN 1.5/30 (21)	0	ACA; QL
LOESTRIN 1/20 (21)	0	ACA; QL
LOESTRIN FE 1.5/30 (28-DAY)	0	PA; ACA; QL
LOESTRIN FE 1/20 (28-DAY)	0	PA; ACA; QL
<i>lomedina 24 fe</i>	0	ACA; QL
<i>loryna (28)</i>	0	ACA; QL
LOSEASONIQUE	0	PA; ACA; QL
<i>low-ogestrel (28)</i>	0	ACA; QL
<i>luteria (28)</i>	0	ACA; QL
<i>marlissa</i>	0	ACA; QL
<i>mibelas 24 fe</i>	0	ACA; QL
<i>microgestin 1.5/30 (21)</i>	0	ACA; QL
<i>microgestin 1/20 (21)</i>	0	ACA; QL
MICROGESTIN 24 FE	0	PA; ACA; QL
<i>microgestin fe 1.5/30 (28)</i>	0	ACA; QL
<i>microgestin fe 1/20 (28)</i>	0	ACA; QL
MINASTRIN 24 FE	0	PA; ACA; QL
MIRCETTE (28)	0	PA; ACA; QL
<i>mono-linyah</i>	0	ACA; QL
<i>mononessa (28)</i>	0	ACA; QL
<i>my way</i>	0	ACA; OTC; QL
<i>myzilra</i>	0	ACA; QL
NATAZIA	0	PA; ACA; QL
<i>necon 0.5/35 (28)</i>	0	ACA; QL
<i>necon 1/50 (28)</i>	0	ACA; QL

Drug Name	Tier	Restrictions / limits
<i>necon 7/7/7 (28)</i>	0	ACA; QL
<i>next choice one dose</i>	0	ACA; OTC; QL
<i>nikki (28)</i>	0	ACA; QL
<i>noreth-ethinyl estradiol-iron</i>	0	ACA; QL
<i>norethindrone ac-eth estradiol</i>	0	ACA; QL
<i>norethindrone-e.estradiol-iron</i>	0	ACA; QL
<i>norgestimate-ethinyl estradiol</i>	0	ACA; QL
<i>nortrel 0.5/35 (28)</i>	0	ACA; QL
<i>nortrel 1/35 (21)</i>	0	ACA; QL
<i>nortrel 1/35 (28)</i>	0	ACA; QL
<i>nortrel 7/7/7 (28)</i>	0	ACA; QL
<i>ocella</i>	0	PA; ACA; QL
<i>ogestrel (28)</i>	0	ACA; QL
<i>opcicon one-step</i>	0	ACA; OTC; QL
<i>option-2</i>	0	ACA; OTC; QL
<i>orsythia</i>	0	ACA; QL
ORTHO TRI-CYCLEN (28)	0	PA; ACA; QL
ORTHO TRI-CYCLEN LO (28)	0	PA; ACA; QL
ORTHO-CYCLEN (28)	0	PA; ACA; QL
ORTHO-NOVUM 1/35 (28)	0	PA; ACA; QL
ORTHO-NOVUM 7/7/7 (28)	0	PA; ACA; QL
OVCON-35 (28)	0	PA; ACA; QL
<i>philith</i>	0	ACA; QL
<i>pimtrea (28)</i>	0	ACA; QL

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Drug Name	Tier	Restrictions / limits
<i>pirmella</i>	0	ACA; QL
PLAN B ONE-STEP	0	ACA; OTC; QL
<i>portia</i>	0	ACA; QL
<i>previfem</i>	0	ACA; QL
QUARTETTE	0	PA; ACA; QL
<i>quasense</i>	0	ACA; QL
<i>rajani</i>	0	ACA; QL
<i>reclipsen (28)</i>	0	ACA; QL
<i>rivelsa</i>	0	PA; ACA; QL
SAFYRAL	0	PA; ACA; QL
SEASONIQUE	0	PA; ACA; QL
<i>setlakin</i>	0	ACA; QL
<i>sprintec (28)</i>	0	ACA; QL
<i>sronyx</i>	0	ACA; QL
<i>syeda</i>	0	ACA; QL
TAKE ACTION	0	ACA; OTC; QL
<i>tarina fe 1/20 (28)</i>	0	ACA; QL
TAYTULLA	0	PA; ACA; QL
<i>tilia fe</i>	0	ACA; QL
<i>tri femynor</i>	0	ACA; QL
<i>tri-estarylla</i>	0	ACA; QL
<i>tri-legest fe</i>	0	ACA; QL
<i>tri-linyah</i>	0	ACA; QL
<i>tri-lo-estarylla</i>	0	ACA; QL
<i>tri-lo-marzia</i>	0	ACA; QL
<i>tri-lo-sprintec</i>	0	ACA; QL
<i>trinessa (28)</i>	0	ACA; QL
<i>trinessa lo</i>	0	ACA; QL
TRI-NORINYL (28)	0	PA; ACA; QL
<i>tri-previfem (28)</i>	0	ACA; QL
<i>tri-sprintec (28)</i>	0	ACA; QL

Drug Name	Tier	Restrictions / limits
<i>trivora (28)</i>	0	ACA; QL
<i>velivet triphasic regimen (28)</i>	0	ACA; QL
<i>vestura (28)</i>	0	ACA; QL
<i>vienva</i>	0	ACA; QL
<i>viorele (28)</i>	0	PA; ACA; QL
<i>vyfemla (28)</i>	0	ACA; QL
<i>wera (28)</i>	0	ACA; QL
<i>wymzya fe</i>	0	ACA; QL
YASMIN (28)	0	PA; ACA; QL
YAZ (28)	0	PA; ACA; QL
<i>zarah</i>	0	PA; ACA; QL
<i>zenchent (28)</i>	0	PA; ACA; QL
<i>zenchent fe</i>	0	PA; ACA; QL
<i>zovia 1/35e (28)</i>	0	ACA; QL
<i>zovia 1/50e (28)</i>	0	ACA; QL

Oxytocics

<i>methergine</i>	2	
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Ophthalmology

Antibiotics

AZASITE	4	
<i>bacitracin</i>	1	
<i>bacitracin-polymyxin b</i>	1	
BESIVANCE	4	
BETADINE OPHTHALMIC PREP	4	
CILOXAN	4	
<i>ciprofloxacin hcl</i>	1	
<i>erythromycin</i>	2	
<i>gatifloxacin</i>	2	
<i>gentak</i>	1	

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Drug Name	Tier	Restrictions / limits
<i>gentamicin</i>	1	
<i>levofloxacin</i>	2	
MOXEZA	4	
<i>moxifloxacin</i>	2	
NATACYN	4	
<i>neomycin-bacitracin-polymyxin</i>	1	
<i>neomycin-polymyxin-gramicidin</i>	1	
<i>neo-polycin</i>	2	
OCUFLOX	4	
<i>ofloxacin</i>	2	
<i>polycin</i>	2	
<i>polymyxin b sulf-trimethoprim</i>	1	
POLYTRIM	4	
<i>tobramycin</i>	1	
TOBREX	4	
VIGAMOX	4	
ZYMAXID	4	
Antivirals		
<i>trifluridine</i>	2	
VIROPTIC	4	
ZIRGAN	4	
Beta-Blockers		
BETAGAN	4	
<i>betaxolol</i>	2	
BETIMOL	4	
BETOPTIC S	4	
<i>carteolol</i>	1	
ISTALOL	4	

Drug Name	Tier	Restrictions / limits
<i>levobunolol</i>	1	
<i>metipranolol</i>	2	
<i>timolol maleate ophthalmic (eye) drops</i>	1	
<i>timolol maleate ophthalmic (eye) gel forming solution</i>	2	
TIMOPTIC	4	
TIMOPTIC OCUDOSE (PF)	4	
TIMOPTIC-XE	4	
Cholinesterase Inhibitor Miotics		
PHOSPHOLINE IODIDE	3	
Cycloplegic Mydriatics		
<i>atropine</i>	1	
CYCLOGYL	4	
<i>cyclopentolate</i>	1	
<i>homatropaire</i>	1	
<i>homatropine hbr</i>	1	
MYDRIACYL	4	
PAREMYD	4	
<i>tropicamide</i>	1	
Direct Acting Miotics		
ISOPTO CARPINE	4	
MIOCHOL-E	4	
<i>pilocarpine hcl</i>	2	
Miscellaneous Ophthalmologics		
<i>acuicyn</i>	2	
AKTEN (PF)	4	
ALOCRIAL	4	
ALOMIDE	3	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>altacaine</i>	2	
<i>altafluor</i>	2	
AVENOVA	4	
<i>azelastine</i>	2	
BEPREVE	4	
<i>cromolyn</i>	1	
CYSTARAN	6	
ELESTAT	4	
EMADINE	4	
<i>epinastine</i>	1	
EYLEA	6	PA; LA
<i>flucaine</i>	2	
<i>fluorescein-proparacaine</i>	2	
<i>flurox</i>	2	
JETREA (PF)	6	PA
LACRISERT	4	
LASTACAFT	4	
LUCENTIS	6	PA
MACUGEN	6	PA; LA
<i>olopatadine</i>	2	
OMIDRIA	4	PA
PATADAY	4	
PATANOL	4	
PAZEO	3	
<i>proparacaine</i>	1	
RESTASIS	3	QL
RESTASIS MULTIDOSE	3	
<i>tetcaine</i>	2	
<i>tetracaine hcl</i>	2	
<i>tetracaine hcl (pf)</i>	2	
TETRAVISC	4	

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Drug Name	Tier	Restrictions / limits
TETRAVISC FORTE	4	
VISUDYNE	6	PA; LA
VITRASE	4	PA
XIIDRA	4	PA
Non-Steroidal Anti-Inflammatory Agents		
ACULAR	4	
ACULAR LS	4	
ACUVAIL (PF)	4	
<i>bromfenac</i>	2	
BROMSITE	4	
<i>diclofenac sodium</i>	2	
<i>flurbiprofen sodium</i>	1	
ILEVRO	4	
<i>ketorolac</i>	1	
NEVANAC	4	
OCUFEN	4	
PROLENSA	4	
Oral Drugs For Glaucoma		
<i>acetazolamide</i>	2	
<i>acetazolamide sodium</i>	2	PA
DIAMOX SEQUELS	4	
<i>methazolamide</i>	2	
NEPTAZANE	4	
Other Glaucoma Drugs		
AZOPT	4	
COMBIGAN	3	
COSOPT	4	
COSOPT (PF)	4	
<i>dorzolamide</i>	1	

Drug Name	Tier	Restrictions / limits
<i>dorzolamide-timolol</i>	1	
<i>latanoprost</i>	1	
LUMIGAN	3	
<i>miostat</i>	2	PA
MITOSOL	4	
SIMBRINZA	4	
TRAVATAN Z	4	PA
TRUSOPT	4	
XALATAN	4	
ZIOPTAN (PF)	4	PA
Steroid-Antibiotic Combinations		
MAXITROL	4	
<i>neomycin-bacitracin-poly-hc</i>	1	
<i>neomycin-polymyxin b-dexameth</i>	1	
<i>neomycin-polymyxin-hc</i>	1	
<i>neo-polycin hc</i>	2	
PRED-G	3	
PRED-G S.O.P.	3	
TOBRADEX	4	
TOBRADEX ST	4	
<i>tobramycin-dexamethasone</i>	2	
ZYLET	3	
Steroids		
ALREX	4	QL
<i>dexamethasone sodium phosphate</i>	1	
DUREZOL	4	
FLAREX	4	
<i>fluorometholone</i>	1	

Drug Name	Tier	Restrictions / limits
FML FORTE	4	
FML LIQUIFILM	4	
FML S.O.P.	4	
ILUVIEN	6	PA
LOTEMAX	4	
MAXIDEX	4	
OMNIPRED	4	
PRED FORTE	4	
PRED MILD	3	
<i>prednisolone acetate</i>	2	
<i>prednisolone sodium phosphate</i>	2	
RETISERT	6	PA; LA
Steroid-Sulfonamide Combinations		
BLEPHAMIDE	3	
BLEPHAMIDE S.O.P.	3	
<i>sulfacetamide-prednisolone</i>	1	
Sulfonamides		
BLEPH-10	4	
<i>sulfacetamide sodium</i>	1	
Sympathomimetics		
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.1 %	3	
ALPHAGAN P OPHTHALMIC (EYE) DROPS 0.15 %	4	
<i>apraclonidine</i>	1	
<i>brimonidine</i>	2	
IOPIDINE	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
Vasoconstrictor Decongestants		
CYCLOMYDRIL	4	
<i>phenylephrine hcl</i>	1	
Respiratory, Allergy, Cough & Cold		
Antihistamine & Antiallergenic Agents		
<i>adrenalin</i>	2	PA
AUVI-Q	4	PA; QL
<i>carbinoxamine maleate</i>	1	
CLARINEX ORAL SYRUP	4	PA
CLARINEX ORAL TABLET	4	PA; QL
<i>clemastine</i>	1	
<i>cyproheptadine</i>	1	
<i>desloratadine</i>	1	PA; QL
<i>diphenhydramine hcl injection</i>	2	PA
<i>diphenhydramine hcl oral</i>	1	
EPINEPHRINE HCL (PF)	4	PA
EPINEPHRINE INJECTION AUTO-INJECTOR	3	QL
<i>epinephrine injection solution</i>	2	PA
<i>epinephrine injection syringe</i>	2	PA
EPIPEN 2-PAK	3	QL
EPIPEN JR 2-PAK	3	QL
<i>hydroxyzine hcl intramuscular</i>	2	PA
<i>hydroxyzine hcl oral</i>	1	

Drug Name	Tier	Restrictions / limits
<i>hydroxyzine pamoate</i>	1	
KARBINAL ER	4	
<i>phenadoz</i>	2	
PHENERGAN INJECTION	4	PA
<i>phenergan rectal</i>	2	
<i>promethazine injection</i>	2	PA
<i>promethazine oral</i>	1	
<i>promethazine rectal</i>	2	
<i>promethegan</i>	2	
RYVENT	4	PA
VISTARIL	4	
Cough & Cold Therapy		
<i>benzonatate</i>	1	
BROMFED DM	4	
<i>brompheniramine-pseudoeph-dm</i>	1	
CAPCOF	4	
<i>centergy</i>	2	
<i>cheratussin ac</i>	1	
CLARINEX-D 12 HOUR	4	PA; QL
<i>codeine-guaifenesin</i>	1	
CODITUSSIN AC	4	
CODITUSSIN DAC	4	
FLOWTUSS	4	PA
<i>g tussin ac</i>	2	
<i>guaia tussin ac</i>	1	
<i>guaifenesin ac</i>	1	
<i>guaifenesin dac</i>	1	
HISTEX-AC	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
HYCOFENIX	4	PA
<i>hydrocodone-chlorpheniramine</i>	1	
<i>hydrocodone-cpm-pseudoephed</i>	2	
<i>hydrocodone-homatropine</i>	1	
<i>hydromet</i>	1	
<i>lortuss ex</i>	2	
MAR-COF BP	4	
MAR-COF CG	4	
<i>m-clear wc</i>	2	
M-END PE	4	
NINJACOF-XG	4	
OBREDON	4	
POLY-TUSSIN AC	4	
<i>promethazine vc-codeine</i>	1	
<i>promethazine-codeine</i>	1	
<i>promethazine-dm</i>	1	
<i>promethazine-phenyleph-codeine</i>	1	
<i>promethazine-phenylephrine</i>	1	
PRO-RED AC (W/ DEXCHLORPHENIR)	4	
<i>relcof c</i>	2	
RESPA-AR	4	
REZIRA	4	
<i>rydex</i>	2	
SEMPREX-D	4	
TESSALON PERLES	4	

Drug Name	Tier	Restrictions / limits
<i>tusnel c</i>	2	
TUSNEL PEDIATRIC	4	
TUSSICAPS	4	
<i>tussigon</i>	2	
TUSSIONEX PENNKINETIC ER	4	
TUZISTRA XR	4	PA
<i>virtussin ac</i>	1	
<i>virtussin dac</i>	1	
VITUZ	4	PA
ZODRYL AC 25	4	
ZODRYL AC 30	4	
ZODRYL AC 35	4	
ZODRYL AC 40	4	
ZODRYL AC 50	4	
ZODRYL AC 60	4	
ZODRYL AC 80	4	
ZODRYL DAC 25	4	
ZODRYL DAC 30	4	
ZODRYL DAC 35	4	
ZODRYL DAC 40	4	
ZODRYL DAC 50	4	
ZODRYL DAC 60	4	
ZODRYL DAC 80	4	
ZODRYL DEC 25	4	
ZODRYL DEC 30	4	
ZODRYL DEC 35	4	
ZODRYL DEC 40	4	
ZODRYL DEC 50	4	
ZODRYL DEC 60	4	
ZODRYL DEC 80	4	
Z-TUSS AC	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
ZUTRIPRO	4	
Pulmonary Agents		
ACCOLATE	4	
<i>acetylcysteine</i>	2	
ADCIRCA	6	PA; LA
ADEMPAS	6	PA; LA
ADRENALIN	4	
ADVAIR DISKUS	4	PA; QL
ADVAIR HFA	4	PA; QL
AEROSPAN	4	PA
AIRDUO RESPICLICK	4	PA; QL
<i>albuterol sulfate</i>	1	
ALVESCO	4	PA
ANORO ELLIPTA	3	
ARCAPTA NEOHALER	4	
ARMONAIR RESPICLICK	4	PA
ARNUITY ELLIPTA	4	PA
ASMANEX HFA	3	QL
ASMANEX TWISTHALER	3	QL
ATROVENT HFA	3	
BECONASE AQ	4	ST
BERINERT	6	PA; LA
BEVESPI AEROSPHERE	4	PA
BREO ELLIPTA	4	PA
BROVANA	4	
<i>budesonide</i>	2	QL
CINQAIR	6	PA; LA
CINRYZE	6	PA; LA

Drug Name	Tier	Restrictions / limits
COMBIVENT RESPIMAT	3	
<i>cromolyn</i>	2	
CUROSURF	4	
DALIRESP	4	QL
DULERA	3	
DYMISTA	4	ST
ELIXOPHYLLIN	4	
ESBRIET	6	PA; LA
FIRAZYR	6	PA; LA; QL
FLOVENT DISKUS	4	PA; QL
FLOVENT HFA	4	PA; QL
<i>flunisolide</i>	1	
FLUTICASONE- SALMETEROL	4	PA; QL
HAEGARDA	6	PA; LA
HYPER-SAL	4	
INCRUSE ELLIPTA	4	PA
<i>ipratropium bromide</i>	1	
<i>ipratropium- albuterol</i>	1	
KALBITOR	6	PA; LA
KALYDECO	6	PA; LA; QL
LETAIRIS	5	PA; LA; QL
<i>levalbuterol hcl</i>	2	
LEVALBUTEROL TARTRATE	4	PA
<i>metaproterenol</i>	2	
<i>mometasone</i>	2	
<i>montelukast</i>	1	
NASONEX	4	PA

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Drug Name	Tier	Restrictions / limits
<i>nebusal inhalation solution for nebulization 3 %</i>	2	
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 6 %	4	
NUCALA	6	PA; LA
OFEV	6	PA; LA
OMNARIS	4	ST
OPSUMIT	6	PA; LA
ORKAMBI	6	PA; LA
PERFOROMIST	4	
PROAIR HFA	3	
PROAIR RESPICLICK	3	
PROVENTIL HFA	4	PA
PULMICORT	4	PA; QL
PULMICORT FLEXHALER	4	PA
<i>pulmosal</i>	2	
PULMOZYME	5	
QNASL	4	ST
QVAR	3	
REVATIO INTRAVENOUS	6	PA; LA; QL
REVATIO ORAL SUSPENSION FOR RECONSTITUTION	6	PA; LA
REVATIO ORAL TABLET	6	PA; LA; QL
RUCONEST	6	PA; LA
SEEBRI NEOHALER	4	PA

Drug Name	Tier	Restrictions / limits
SEREVENT DISKUS	3	
<i>sildenafil intravenous</i>	5	PA; QL
<i>sildenafil oral</i>	5	PA; LA; QL
SINGULAIR	4	
<i>sodium chloride</i>	2	
SPIRIVA RESPIMAT	4	PA
SPIRIVA WITH HANDIHALER	4	PA
STIOLTO RESPIMAT	3	
STRIVERDI RESPIMAT	4	
SURFAXIN	4	
SYMBICORT	3	
<i>terbutaline oral</i>	1	
<i>terbutaline subcutaneous</i>	2	PA
THEO-24	4	
<i>theochron</i>	2	
<i>theophylline oral elixir</i>	2	
<i>theophylline oral solution</i>	1	
<i>theophylline oral tablet extended release 12 hr</i>	1	
<i>theophylline oral tablet extended release 24 hr</i>	1	
TRACLEER	6	PA; LA; QL
TUDORZA PRESSAIR	3	
TYVASO	6	PA; LA; QL

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Drug Name	Tier	Restrictions / limits
TYVASO REFILL KIT	6	PA; LA; QL
TYVASO STARTER KIT	6	PA; LA; QL
UTIBRON NEOHALER	4	PA
VENTAVIS	6	PA; LA
VENTOLIN HFA	4	PA
XOLAIR	6	PA; LA
XOPENEX	4	
XOPENEX CONCENTRATE	4	
XOPENEX HFA	4	PA
<i>zafirlukast</i>	2	
ZETONNA	4	ST
<i>zileuton</i>	2	PA
ZYFLO	4	
ZYFLO CR	4	PA
Urologicals		
Anticholinergics & Antispasmodics		
<i>darifenacin</i>	2	
DETROL	4	
DETROL LA	4	
DITROPAN XL	4	
ENABLEX	4	
<i>flavoxate</i>	1	
GELNIQUE	4	PA
MYRBETRIQ	4	PA
<i>oxybutynin chloride</i>	1	
OXYTROL	4	PA
<i>tolterodine</i>	2	
TOVIAZ	4	PA
<i>tropium</i>	2	PA

Drug Name	Tier	Restrictions / limits
VESICARE	4	PA
Benign Prostatic Hyperplasia (Bph) Therapy		
<i>alfuzosin</i>	1	
AVODART	4	QL
CIALIS	4	PA; QL
<i>dutasteride</i>	2	QL
<i>dutasteride-tamsulosin</i>	2	
<i>finasteride</i>	1	QL
FLOMAX	4	QL
JALYN	4	
PROSCAR	4	QL
RAPAFLO	3	ST
<i>tamsulosin</i>	1	QL
UROXATRAL	4	
Cholinergic Stimulants		
<i>bethanechol chloride</i>	1	
URECHOLINE	4	
Miscellaneous Urologicals		
<i>alprostadil</i>	2	PA
<i>azuphen mb</i>	2	
CYSTAGON	6	
<i>cytra k crystals</i>	1	
<i>cytra-2</i>	1	
<i>cytra-3</i>	1	
<i>cytra-k</i>	1	
ELMIRON	4	
<i>hyolev mb</i>	2	
<i>hyophen</i>	2	
INDIOMIN MB	4	
K-PHOS NO 2	4	

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Drug Name	Tier	Restrictions / limits
K-PHOS ORIGINAL	4	
<i>methen-sod phos-meth blue-hyos</i>	2	
ORACIT	4	
<i>phosphasal</i>	2	
<i>pot,sodium citrate-citric acid</i>	2	
<i>potassium citrate</i>	1	
<i>potassium citrate-citric acid</i>	1	
PROCYSBI	6	PA; LA
PROSTIN VR PEDIATRIC	4	PA
RENACIDIN	4	
SHOHL'S MODIFIED	4	
<i>sodium citrate-citric acid</i>	2	
<i>tricitrates</i>	1	
<i>ur n-c</i>	2	
<i>uramit mb</i>	2	
URELLE	4	
<i>uretron d-s</i>	2	
URIBEL	4	
<i>urimar-t</i>	2	
<i>urin ds</i>	2	
<i>uro-458</i>	2	
UROCIT-K 10	4	
UROCIT-K 15	4	
UROCIT-K 5	4	
<i>urogesic-blue</i>	2	
<i>uro-mp</i>	2	
<i>urophen mb</i>	2	

Drug Name	Tier	Restrictions / limits
UROQID-ACID NO.2	4	
<i>uryl</i>	2	
<i>ustell</i>	2	
UTA	4	
<i>utira-c</i>	2	
<i>virtrate-2</i>	2	
<i>virtrate-3</i>	2	
<i>virtrate-k</i>	2	
Urinary Anesthetics		
<i>phenazopyridine</i>	1	
PYRIDIUM	4	
Vitamins, Hematinics & Electrolytes		
Electrolytes		
<i>calcium 500 + d</i>	0	ACA; OTC
<i>calcium 500 with d</i>	0	ACA; OTC
<i>calcium 600 + d(3)</i>	0	ACA; OTC
<i>calcium 600 with vitamin d3</i>	0	ACA; OTC
<i>calcium carb and citrate-vitd3</i>	0	ACA; OTC
<i>calcium carbonate-vitamin d3</i>	0	ACA; OTC
<i>calcium citrate + d</i>	0	ACA; OTC
<i>calcium citrate-vitamin d2</i>	0	ACA; OTC
<i>calcium citrate-vitamin d3</i>	0	ACA; OTC
<i>citrus calcium</i>	0	ACA; OTC
EFFER-K ORAL TABLET, EFFERVESCENT 10 MEQ, 20 MEQ	4	
<i>effer-k oral tablet, effervescent 25 meq</i>	1	

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Drug Name	Tier	Restrictions / limits
GALZIN	4	
GLYCOPHOS	4	PA
<i>hi-cal plus vit d</i>	0	ACA; OTC
<i>k-effervescent</i>	2	
<i>klor-con</i>	1	
<i>klor-con 10</i>	1	
<i>klor-con 8</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con sprinkle</i>	2	
KLOR-CON/25	4	
<i>klor-con/ef</i>	1	
<i>k-phos-neutral</i>	1	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ, 20 MEQ	4	
<i>k-tab oral tablet extended release 8 meq</i>	2	
<i>lugols</i>	2	
NORMOSOL-R	4	PA
<i>oysco 500/d</i>	0	ACA; OTC
<i>oyster shell + d3</i>	0	ACA; OTC
<i>oyster shell calcium- vit d3</i>	0	ACA; OTC
<i>oystercal-d</i>	0	ACA; OTC
<i>phospha 250 neutral</i>	1	
POTABA	4	PA
<i>potassium acetate</i>	2	PA
<i>potassium bicarb and chloride</i>	1	

Drug Name	Tier	Restrictions / limits
<i>potassium bicarb- citric acid</i>	1	
<i>potassium chlorid- d5-0.45%nacl</i>	2	PA
<i>potassium chloride in 0.9%nacl</i>	2	PA
<i>potassium chloride in 5 % dex</i>	2	PA
<i>potassium chloride in lr-d5</i>	2	PA
<i>potassium chloride intravenous</i>	2	PA
<i>potassium chloride oral capsule, extended release</i>	1	
<i>potassium chloride oral liquid</i>	1	
<i>potassium chloride oral packet</i>	2	
<i>potassium chloride oral tablet extended release</i>	1	
<i>potassium chloride oral tablet,er particles/crystals</i>	1	
<i>potassium chloride- 0.45 % nacl</i>	2	PA
<i>potassium chloride- d5-0.2%nacl</i>	2	PA
<i>potassium chloride- d5-0.3%nacl</i>	2	PA
<i>potassium chloride- d5-0.9%nacl</i>	2	PA
<i>sodium chloride</i>	2	PA
<i>sodium chloride 0.45 % intravenous parenteral solution</i>	2	PA

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Drug Name	Tier	Restrictions / limits
<i>sodium chloride 0.45 % intravenous piggyback</i>	2	
<i>sodium chloride 3 %</i>	2	PA
<i>sodium chloride 5 %</i>	2	PA
<i>sodium phosphate</i>	2	PA
<i>strong iodine</i>	2	
<i>virt-phos 250 neutral</i>	1	
Miscellaneous Vitamins, Hematinics, & Electrolytes		
FORTAVIT	4	
ISOLYTE S PH 7.4	4	PA
ISOLYTE-S	4	PA
NORMOSOL-R PH 7.4	4	PA
PLASMA-LYTE 148	4	PA
PLASMA-LYTE A	4	PA
Vitamins & Hematinics		
ACTIVE FE	4	
ANIMI-3 WITH VITAMIN D	4	
ATABEX EC	4	
<i>b complex 100</i>	2	PA
<i>b complex-vitamin b12</i>	0	ACA; OTC
<i>b complex-vitamin c-folic acid</i>	0	ACA; OTC
BACMIN	4	
<i>balanced b-100</i>	0	ACA; OTC
<i>balanced b-100 complex</i>	0	ACA; OTC
<i>balanced b-50</i>	0	ACA; OTC
<i>bal-care dha</i>	2	

Drug Name	Tier	Restrictions / limits
BAL-CARE DHA ESSENTIAL	4	
<i>b-complex with vitamin c</i>	0	ACA; OTC
BIFERA RX	4	
CADEAU DHA	4	
<i>calcium prn</i>	2	
<i>calcium-folic acid-vitamin d</i>	2	
CARDIOTEK-RX (BIOPERINE)	4	
<i>centratex</i>	2	
<i>cholecalciferol (vitamin d3)</i>	0	ACA; OTC
<i>ciferex</i>	2	
CITRANATAL (DUAL-IRON)	4	
CITRANATAL 90 DHA (ALGAL OIL)	4	
CITRANATAL ASSURE	4	
CITRANATAL B-CALM (FE GLUC)	4	
CITRANATAL DHA (ALGAL OIL)	4	
CITRANATAL HARMONY (IRON FUM)	4	
<i>classic prenatal</i>	0	ACA; OTC
<i>c-nate dha</i>	2	
<i>complete natal dha</i>	1	
<i>completenate</i>	1	
<i>complex b-100</i>	0	ACA; OTC
CONCEPT DHA	4	
CONCEPT OB	4	
<i>corvita</i>	1	

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Drug Name	Tier	Restrictions / limits
<i>corvita 150</i>	1	
CORVITE	4	
CORVITE 150	4	
CORVITE FE	4	
CORVITE FREE	4	
<i>cyanocobalamin (vitamin b-12)</i>	1	
<i>delta d3</i>	0	ACA; OTC
<i>dialyvite</i>	1	
DIALYVITE 3000	4	
DIALYVITE 5000	4	
<i>dialyvite 800</i>	0	ACA; OTC
DIALYVITE 800 WITH IRON	4	
DIALYVITE SUPREME D	4	
<i>dothelle dha</i>	2	
DUET DHA BALANCED	4	
DUET DHA WITH OMEGA-3	4	
DURACHOL	4	
<i>d-vi-sol</i>	0	ACA; OTC
ENLYTE (FERROUS GLYCINE)	4	
<i>ergocalciferol (vitamin d2) oral capsule</i>	2	
<i>ergocalciferol (vitamin d2) oral tablet</i>	0	ACA; OTC
ESCAVITE	4	
ESCAVITE D	4	
ESCAVITE LQ	4	

Drug Name	Tier	Restrictions / limits
EXPECTA PRENATAL	4	OTC
EXTRA-VIRT PLUS DHA	3	
FA-8	4	OTC
FERAHEME	4	PA
FERIVA 21-7 TABLET	4	
FERIVA FA (SUMALATE)	4	
<i>ferocon</i>	1	
FERRALET 90 DUAL-IRON DELIVERY	4	
<i>ferraplus 90</i>	1	
<i>ferrex 150 forte</i>	1	
<i>ferrex 150 forte plus</i>	1	
<i>ferrex 28</i>	1	
<i>ferrocite plus</i>	2	
FLORIVA	4	
FLORIVA (FLUORIDE-VITAMIN D3)	4	
FLORIVA PLUS	4	
FLUORABON	4	
FLUOR-A-DAY	4	
<i>fluor-a-day (with xylitol) oral tablet,chewable 0.25 mg f (0.55 mg)-236.79mg</i>	0	ACA
<i>fluor-a-day (with xylitol) oral tablet,chewable 1 mg f (2.2 mg)-236.79 mg</i>	2	

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Drug Name	Tier	Restrictions / limits
<i>fluoride (sodium) oral drops</i>	0	ACA
<i>fluoride (sodium) oral tablet, chewable 0.25 mg (0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid)</i>	0	ACA
<i>fluoride (sodium) oral tablet, chewable 1 mg (2.2 mg sod. fluoride)</i>	1	
<i>fluoritab oral tablet, chewable 0.5 mg (1.1 mg sodium fluorid)</i>	0	ACA
<i>fluoritab oral tablet, chewable 1 mg (2.2 mg sod. fluoride)</i>	1	
FLURA-DROPS	4	
<i>focalgin 90 dha</i>	2	
<i>focalgin ca</i>	2	
<i>focalgin dss</i>	1	
<i>folbee</i>	1	
<i>folbee ar</i>	2	
<i>folbee plus</i>	1	
<i>folbic</i>	1	
FOLET ONE	4	
FOLGARD OS	4	
FOLGARD RX	4	
<i>folic acid injection</i>	2	PA
FOLIC ACID ORAL CAPSULE	4	OTC
<i>folic acid oral tablet 1 mg</i>	1	
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	0	ACA; OTC

Drug Name	Tier	Restrictions / limits
<i>folic acid-vit b6-vit b12</i>	1	
<i>folivane-f</i>	2	
<i>folivane-ob</i>	2	
<i>folivane-plus</i>	2	
<i>folplex 2.2</i>	1	
<i>foltabs 800</i>	0	ACA; OTC
FOLTRATE	4	
<i>full spectrum b-vitamin c</i>	0	ACA; OTC
FUSION PLUS	4	
<i>hematinic plus vit/minerals</i>	1	
<i>hematinic/folic acid</i>	1	
<i>hematogen</i>	2	
<i>hematogen fa</i>	2	
<i>hematogen forte</i>	2	
HEMATRON-AF	4	
<i>hemenatal ob</i>	1	
<i>hemenatal ob + dha</i>	1	
<i>hemetab</i>	2	
HEMOCYTE-F	4	
HEMOCYTE-PLUS	4	
<i>hydroxocobalamin</i>	2	PA
ICAR-C PLUS	4	
<i>iferex 150 forte</i>	2	
<i>infed</i>	2	PA
INFUVITE ADULT	4	PA
INFUVITE PEDIATRIC	4	PA
INJECTAFER	4	PA
INTEGRA F	4	
INTEGRA PLUS	4	

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Drug Name	Tier	Restrictions / limits
IROSPAN 24/6	4	
<i>kobee</i>	0	ACA; OTC
KOSHER PRENATAL PLUS IRON	4	
<i>kpn</i>	0	ACA; OTC
<i>levomefolate dha</i>	2	
<i>ludent fluoride oral tablet,chewable 0.25 mg(0.55 mg sod. fluoride), 0.5 mg (1.1 mg sodium fluorid)</i>	0	ACA
<i>ludent fluoride oral tablet,chewable 1 mg (2.2 mg sod. fluoride)</i>	1	
<i>m.v.i. adult</i>	2	PA
M.V.I. PEDIATRIC	3	PA
MARNATAL-F	4	
MAXFE (FOLATE-DOCUSATE)	4	
<i>multi-delyn with iron</i>	2	OTC
<i>multigen folic</i>	1	
<i>multigen plus</i>	1	
<i>multi-vit with fluoride-iron</i>	1	
<i>multi-vitamin with fluoride oral drops</i>	0	ACA
<i>multi-vitamin with fluoride oral tablet,chewable 0.25 mg, 0.5 mg</i>	0	ACA
<i>multi-vitamin with fluoride oral tablet,chewable 1 mg</i>	1	

Drug Name	Tier	Restrictions / limits
<i>multivitamins with fluoride oral tablet,chewable 0.25 mg, 0.5 mg</i>	0	ACA
<i>multivitamins with fluoride oral tablet,chewable 1 mg</i>	1	
<i>mvc-fluoride oral tablet,chewable 0.25 mg, 0.5 mg</i>	0	ACA
<i>mvc-fluoride oral tablet,chewable 1 mg</i>	1	
<i>myferon 150 forte</i>	2	
<i>mynatal</i>	2	
<i>mynatal advance</i>	2	
<i>mynatal plus</i>	2	
<i>mynatal-z</i>	2	
<i>mynate 90 plus</i>	2	
<i>mynephrocaps</i>	2	
<i>mynephron</i>	2	
NASCOBAL	4	
NATACHEW (FE BIS-GLYCINATE)	4	
NATELLE ONE	4	
<i>natural b-100 complex</i>	0	ACA; OTC
NEEVODHA (WITH ALGAL OIL)	4	
<i>nephplex rx</i>	1	
NEPHROCAPS	4	
NEPHROCAPS QT	4	
NEPHRON FA	4	
NEPHRO-VITE	4	OTC

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Drug Name	Tier	Restrictions / limits
<i>nephro-vite rx</i>	1	
NESTABS	4	
NESTABS ABC	4	
NESTABS DHA	4	
NEURIN-SL	4	
<i>newgen</i>	2	
NEXA PLUS	4	
NEXAVIR	4	PA
NICOMIDE	4	
NICOMIDE (SELENIUM-CHROMIUM)	4	
NIVA-FOL	4	
NIVA-PLUS	4	
NUFERA	4	
NUTRICAP	4	
OB COMPLETE GOLD	4	
OB COMPLETE ONE	4	
OB COMPLETE PETITE	4	
OB COMPLETE PREMIER	4	
OB COMPLETE WITH DHA	4	
<i>obstetrix dha</i>	2	
OBSTETRIX EC	4	
OBSTETRIX ONE	4	
OBTREX DHA	4	
O-CAL FA	4	
O-CAL PRENATAL	4	

Drug Name	Tier	Restrictions / limits
ONE A DAY WOMEN'S PRENATAL DHA	4	OTC
ONE DAILY PRENATAL ORAL COMBO PACK 28 MG IRON- 800 MCG	4	OTC
<i>one daily prenatal oral combo pack 28-800-440 mg-mcg-mg</i>	0	ACA; OTC
<i>ortho d</i>	2	
<i>oyster shell calcium-vit d2</i>	0	ACA; OTC
<i>perry prenatal</i>	0	ACA; OTC
<i>pnv 29-1</i>	1	
<i>pnv ob+dha</i>	2	
<i>pnv-dha</i>	1	
<i>pnv-dha + docusate</i>	1	
<i>pnv-ferrous fumarate-docu-fa</i>	2	
<i>pnv-omega</i>	1	
<i>pnv-select</i>	2	
<i>pnv-vp-u</i>	2	
<i>poly-iron 150 forte</i>	1	
POLY-VI-FLOR	4	
POLY-VI-FLOR WITH IRON	4	
<i>pr natal 400</i>	1	
<i>pr natal 400 ec</i>	2	
<i>pr natal 430</i>	1	
<i>pr natal 430 ec</i>	2	
PREFERA-OB	4	
PREFERA-OB ONE	4	
PREFERA-OB PLUS DHA	4	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>prena1 chew</i>	2	
<i>prena1 pearl</i>	2	
<i>prenaissance</i>	2	
<i>prenaissance plus</i>	1	
PRENATA	4	
<i>prenatabs fa</i>	1	
<i>prenatabs rx</i>	1	
PRENATAL + DHA	4	OTC
<i>prenatal complete</i>	0	ACA; OTC
<i>prenatal formula</i>	0	ACA; OTC
<i>prenatal multi-dha (algal oil)</i>	0	ACA; OTC
<i>prenatal one daily</i>	0	ACA; OTC
<i>prenatal oral tablet 28 mg iron- 800 mcg</i>	0	ACA; OTC
PRENATAL ORAL TABLET 28-800 MG-MCG	4	OTC
<i>prenatal plus</i>	1	
<i>prenatal plus (calcium carb)</i>	1	
PRENATAL PLUS DHA	4	
<i>prenatal vitamin</i>	0	ACA; OTC
<i>prenatal vitamin plus low iron</i>	1	
<i>prenatal vitamin with minerals</i>	0	ACA; OTC
<i>prenatal vits96-iron fum-folic</i>	0	ACA; OTC
<i>prenatal-u</i>	1	
PRENATE AM	4	
PRENATE CHEWABLE	4	

Drug Name	Tier	Restrictions / limits
PRENATE DHA (FERR ASP GLYCIN)	4	
PRENATE ELITE (IRON ASP GLYC)	4	
PRENATE ENHANCE	4	
PRENATE ESSENTIAL(IRON-ASP-GL)	4	
PRENATE MINI (FERR ASP GLYCIN)	4	
PRENATE PIXIE	4	
PRENATE RESTORE	4	
PRENATE STAR	4	
<i>preplus</i>	1	
<i>pretab</i>	2	
PRIMACARE	4	
PROFERRIN-FORTE	4	
PROTECT IRON	4	
PROVIDA DHA	4	
PROVIDA OB	4	
PURALOR CI	4	
PUREFE OB PLUS	4	
PUREFE PLUS	4	
<i>purevit dualfe plus</i>	2	
QUFLORA FE	4	
QUFLORA FE (FERROUS SULFATE)	4	
QUFLORA PEDIATRIC	4	

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Drug Name	Tier	Restrictions / limits
QUFLORA PEDIATRIC DROPS	4	
<i>relnate dha</i>	2	
<i>renal caps</i>	1	
RENAL VITAMIN	4	OTC
RENAL-VITE	4	OTC
<i>rena-vite</i>	0	ACA; OTC
<i>rena-vite rx</i>	1	
<i>reno caps</i>	1	
REVESTA	4	
RIGHT STEP PRENATAL VITAMINS	4	OTC
<i>risacal-d</i>	0	ACA; OTC
R-NATAL OB	4	
SELECT-OB	4	
SELECT-OB (FOLIC ACID)	4	
SELECT-OB + DHA	4	
<i>se-natal 19</i>	1	
<i>se-natal 19 (with docusate)</i>	1	
<i>se-tan plus</i>	2	
<i>stress formula</i>	0	ACA; OTC
<i>stress formula with iron</i>	0	ACA; OTC
<i>stress formula with iron(sulf)</i>	0	ACA; OTC
STROVITE FORTE	4	
STROVITE ONE	4	
<i>super b complex-vitamin c</i>	0	ACA; OTC

Drug Name	Tier	Restrictions / limits
<i>super b maxi complex</i>	0	ACA; OTC
<i>super b-50 complex plus</i>	0	ACA; OTC
<i>super quint</i> s	0	ACA; OTC
<i>super quint</i> s b-50	0	ACA; OTC
<i>superplex-t</i>	0	ACA; OTC
SUPERVITE	4	
TANDEM PLUS	4	
<i>taron forte</i>	2	
<i>taron-c dha</i>	1	
<i>taron-prex prenatal-dha</i>	1	
TEXAVITE LQ	4	PA
THRIVITE RX	4	
<i>thrivite-19</i>	1	
<i>tl gard rx</i>	1	
<i>tl g-fol os</i>	2	
<i>tl icon</i>	2	
<i>tl-hem 150</i>	2	
<i>total b/c</i>	0	ACA; OTC
TRICARE	3	
TRICARE PRENATAL	4	
TRICARE PRENATAL DHA ONE	4	
<i>tricon</i>	1	
TRIFERIC	4	
<i>trigels-f forte</i>	1	
<i>trinatal gt</i>	1	
<i>trinatal rx 1</i>	2	
<i>trinate</i>	2	
<i>triphrocaps</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
TRISTART DHA	4	
<i>tri-tabs dha</i>	2	
<i>triveen-duo dha</i>	1	
TRI-VI-FLOR	4	
<i>tri-vit with fluoride and iron</i>	1	
<i>tri-vitamin with fluoride</i>	0	ACA
<i>trust natal dha</i>	1	
UDAMIN SP	4	
<i>ultimatecare one</i>	1	
<i>ultimatecare one nf</i>	2	
<i>ultra b-100 complex</i>	0	ACA; OTC
<i>v-c forte</i>	2	
<i>vemavite-prx-2</i>	1	
VENOFER	4	PA
<i>vic-forte</i>	2	
<i>vinate care</i>	2	
VINATE DHA RF	4	
<i>vinate ii</i>	1	
<i>vinate m</i>	1	
<i>vinate one</i>	1	
<i>vinate ultra</i>	1	
<i>virt-advance</i>	2	
<i>virt-c dha</i>	1	
VIRT-CAPS	4	
<i>virt-gard</i>	2	
<i>virt-nate</i>	2	
<i>virt-nate dha</i>	2	
<i>virt-pn</i>	2	
<i>virt-pn dha</i>	1	
<i>virt-pn plus</i>	2	
VIRTPREX	4	

Drug Name	Tier	Restrictions / limits
<i>virt-select</i>	2	
<i>virt-vite</i>	1	
<i>virt-vite forte</i>	1	
<i>virt-vite gt</i>	1	
VIRT-VITE PLUS	4	
<i>vit 3</i>	2	
<i>vit b complex-folic acid</i>	0	ACA; OTC
VITA-BEE WITH C	4	OTC
VITAFOL	4	
VITAFOL FE+ (WITH DOCUSATE)	4	
VITAFOL GUMMIES	4	
VITAFOL NANO	4	
VITAFOL ULTRA	4	
VITAFOL-OB	4	
VITAFOL-OB+DHA	4	
VITAFOL-ONE	4	
<i>vitajoy daily d</i>	0	ACA; OTC
VITAL-D RX	4	
VITAMED MD ONE RX	4	
VITAMEDMD REDICHEW RX	4	
<i>vitamin b complex</i>	0	ACA; OTC
<i>vitamin d3</i>	0	ACA; OTC
<i>vitamins a,c,d and fluoride</i>	0	ACA
VITAPEARL	4	
VITA-RESPA	4	
<i>vol-care rx</i>	1	

This Formulary List is subject to change.

Drug Name	Tier	Restrictions / limits
<i>vol-nate</i>	1	
<i>vol-plus</i>	1	
<i>vol-tab rx</i>	1	
<i>vp-ch plus</i>	2	
<i>vp-ch-pnv</i>	2	
<i>vp-ggr-b6</i>	2	
<i>vp-heme ob</i>	2	
<i>vp-heme one</i>	2	

Drug Name	Tier	Restrictions / limits
VP-PNV-DHA	4	
<i>vp-vite rx</i>	2	
<i>zatean-ch</i>	1	
<i>zatean-pn dha</i>	1	
<i>zatean-pn plus</i>	1	
<i>zavara</i>	2	
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MEGACE ES	14	methen-sod phos-meth blue- hyos	90	microgestin 1/20 (21)	80
megestrol	14	methergine	81	MICROGESTIN 24 FE	80
MEKINIST	15	methimazole	52	microgestin fe 1.5/30 (28)	80
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MEPHYTON	37	metolazone	34	MINIVELLE	77
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PRILOSEC	70	PROLASTIN-C.....	49	PULMICORT FLEXHALER	88
PRIMACARE.....	97	PROLENSA	83	pulmosal	88
PRIMAQUINE.....	8	PROLEUKIN	72	PULMOZYME.....	88
PRIMAXIN IV	8	PROLIA.....	75	PURALOR CI	98
PRIMEAIRE	56	PROMACTA.....	38	PUREFE OB PLUS.....	98
primidone	18	promethazine	85	PUREFE PLUS	98
PRIMLEV	24	promethazine vc-codeine.....	86	purelax	69
PRIMSOL.....	11	promethazine-codeine	86	purevit dualfe plus	98
PRINIVIL.....	35	promethazine-dm.....	86	PURIXAN	15
PRISTIQ.....	30	promethazine-phenyleph- codeine.....	86	PYLERA.....	71
PRIVIGEN	74	promethazine-phenylephrine ..	86	pyrazinamide	8
PROAIR HFA	88	promethegan	85	PYRIDIDIUM	90
PROAIR RESPICLICK	88	PROMETRIUM	77	pyridostigmine bromide.....	21
probenecid	74	PROMISEB	42	Q	
probenecid-colchicine	74	PROMISEB COMPLETE.....	40	QBRELIS	35
procainamide	31	propafenone	31	Q-CARE RX Q4.....	51
PROCARDIA.....	35	propantheline	66	QNASL.....	88
PROCARDIA XL	35	proparacaine	83	QUADRACEL (PF)	74
procentra.....	30	propranolol	35	QUALAQUIN	8
PROCHAMBER	56	propranolol-hydrochlorothiazid	35	QUARTETTE.....	81
prochlorperazine.....	69	propylthiouracil	52	quasense.....	81
prochlorperazine edisylate.....	69	PROQUAD (PF).....	74	quazepam.....	30
prochlorperazine maleate	69			QUDEXY XR.....	18

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QUFLORA FE	98	RECOMBINATE	38	RESTASIS.....	83
QUFLORA FE (FERROUS		RECOMBIVAX HB (PF)	74	RESTASIS MULTIDOSE....	83
SULFATE).....	98	RECTIV.....	69	RESTORIL	30
QUFLORA PEDIATRIC	98	REFUAH PLUS	55	RETIN-A	44
QUFLORA PEDIATRIC		REFUAH PLUS GLUCOSE		RETIN-A MICRO	44
DROPS	98	MONITOR	59	RETIN-A MICRO PUMP	44
QUILLICHEW ER.....	30	REGLAN.....	69	RETISERT	84
QUILLIVANT XR.....	30	regonol.....	21	RETROVIR	4
quinapril	35	REGRANEX	42	REVATIO.....	88
quinapril-hydrochlorothiazide		RELAGARD	78	REVEAL BLOOD GLUCOSE	
.....	35	relcof c.....	86	METER.....	60
quinidine gluconate	31	RELENZA DISKHALER	4	REVEAL TEST STRIP	55
quinidine sulfate	31	RELION ALL-IN-ONE		REVESTA	98
quinine sulfate	8	METER	59	REVIA.....	26
QUINTET AC	55	RELION CONFIRM	59	REVLIMID.....	72
QUINTET BLOOD		RELION CONFIRM-MICRO		revonto	21
GLUCOSE METER.....	59	.....	55	REXULTI	30
quit 2.....	50	RELION MICRO GLUCOSE		REYATAZ	4
QUIT 2	50	MONITOR	59	REZIRA.....	86
quit 4.....	50	RELION NOVOLIN 70/30 ..	61	RHOFADE	44
QUIT 4	50	RELION NOVOLIN N	61	RIASTAP	38
QUTENZA	42	RELION NOVOLIN R	61	ribasphere	72
QVAR.....	88	RELION PRIME METER....	59	ribasphere ribapak	72
R		RELION PRIME TEST		ribavirin	4, 72
rabeprazole	71	STRIPS.....	55	RIDAURA.....	75
RADIOGARDASE	49	RELISTOR.....	69	rifabutin	8
RAGWITEK.....	74	relnate dha	98	RIFADIN	8
rajani.....	81	RELPAK	20	RIFAMATE.....	8
raloxifene.....	75	REMERON	30	rifampin	8, 9
ramipril.....	35	REMERON SOLTAB.....	30	RIFATER	9
RANEXA	39	REMODULIN.....	35	RIGHT STEP PRENATAL	
ranitidine hcl.....	71	RENACIDIN	90	VITAMINS.....	98
RAPAFLO.....	89	RENAGEL	69	RIGHTEST GM550 SYSTEM	
RAPAMUNE	15	renal caps.....	98	.....	60
RAPIVAB	4	RENAL VITAMIN	98	RIGHTEST GS550 TEST	
rasagiline	19	RENAL-VITE	98	STRIPS	55
RASUVO (PF)	75	rena-vite.....	98	RILUTEK.....	49
RAVICTI.....	49	rena-vite rx	98	riluzole.....	49
RAYALDEE	62	reno caps.....	98	rimantadine	4
RAYOS	52	REVELA	69	ringer's	48
RAZADYNE	21	repaglinide.....	64	RIOMET	64
RAZADYNE ER.....	21	repaglinide-metformin.....	64	risacal-d	98
rea lo 39.....	42	REPATHA PUSHTRONEX	39	risedronate	49, 75
rea lo 40.....	42	REPATHA SURECLICK	39	RISPERDAL	30
REBETOL	72	REPATHA SYRINGE	39	RISPERDAL CONSTA	30
REBIF (WITH ALBUMIN).72		REQUIP.....	19	RISPERDAL M-TAB	30
REBIF REBIDOSE	72	REQUIP XL	19	risperidone	30
REBIF TITRATION PACK	72	RESCRIPTOR.....	4	RITALIN	30
reclipsen (28).....	81	RESPA-AR.....	86	RITALIN LA.....	30

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RITEFLO AEROCHAMBER	56	salsalate	26	sildenafil	88
RITUXAN	15	salvax	41	SILENOR	30
RITUXAN HYCELA	15	SALVAX DUO PLUS	41	SILIQ	40
rivastigmine	21	SAMSCA	62	SILVADENE	41
rivastigmine tartrate	21	SANCUSO	69	silver nitrate	42
rivelsa	81	SANDIMMUNE	15	silver nitrate applicators	42
RIXUBIS	38	SANDOSTATIN	15	silver sulfadiazine	41
rizatriptan	20	SANDOSTATIN LAR DEPOT	15	SILVRSTAT	45
R-NATAL OB	98	SANTYL	48	SIMBRINZA	84
ROBAXIN	21	SAPHRIS (BLACK CHERRY)	30	SIMPONI	76
ROBAXIN-750	21	SARAFEM	30	SIMPONI ARIA	76
ROBINUL	66	SAVAYSA	38	SIMULECT	15
ROBINUL FORTE	66	SAVELLA	75	simvastatin	39
ROCALTROL	62	scalacort	48	SINEMET	19
ropinirole	19	SCALACORT DK	48	SINEMET CR	19
rosadan	44	scopolamine base	69	SINGULAIR	88
ROSDAN	44	SEASONIQUE	81	SINOGRAFIN	49
ROSANIL	44	seb-prev	40	sirolimus	15
ROSULA	44	seconal sodium	30	SIRTURO	9
rosula cleansing cloths	44	SEEBRI NEOHALER	88	SITAVIG	4
rosuvastatin	39	SELECT-OB	98	SIVEXTRO	9
ROTARIX	74	SELECT-OB (FOLIC ACID)	98	SKELAXIN	21
ROTATEQ VACCINE	74	SELECT-OB + DHA	98	SKLICE	48
ROWASA	69	selegiline hcl	19	SKYLA	76
roweepra	18	selenium sulfide	40	SMART SENSE MONITORING SYSTEM	60
ROXICODONE	24	SELRX	40	SMART SENSE TEST STRIPS	55
ROZEREM	30	SELZENTRY	4	SMARTEST EJECT	60
RUBRACA	15	SEMPREX-D	86	SMARTEST PERSONA STARTER	60
RUCONEST	88	se-natal 19	98	SMARTEST PRONTO STARTER	60
RYANODEX	21	se-natal 19 (with docusate)	98	SMARTEST PROTEGE	60
RYDAPT	15	SENSIPAR	62	SMARTEST TEST	55
rydex	86	SEREVENT DISKUS	88	smoothlax	69
RYNODERM	42	SEROQUEL	30	SNAP INSULIN PUMP CONTROLLER	60
RYTARY	19	SEROQUEL XR	30	SNAP INSULIN PUMP- INFUSION SET	60
RYTHMOL SR	31	SEROSTIM	71	sodium chlor 0.9% bacteriostat	49
RYVENT	85	sertraline	30	sodium chloride	88, 92
S		se-tan plus	98	sodium chloride 0.45 %	92
SABRIL	18	setlakin	81	sodium chloride 0.9 %	49
SAFYRAL	81	sevelamer carbonate	69	sodium chloride 3 %	92
SAIZEN	71	sf 51	51	sodium chloride 5 %	92
SAIZEN CLICK.EASY	71	sf 5000 plus	51	sodium citrate-citric acid	90
SAIZEN SAIZENPREP	71	SFROWASA	69	SODIUM EDECRIN	35
SALAGEN (PILOCARPINE)	49, 51	sharobel	77		
SALEX	41	SHOHL'S MODIFIED	90		
salicylic acid	41	SIGNIFOR	15		
salicylic acid er-ceramides ...	41	SIGNIFOR LAR	15		
SALKERA	41				

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sodium ferric gluconat-sucrose	50	STALEVO 100.....	19	SUMADAN.....	44
sodium phenylbutyrate	50	STALEVO 125.....	19	SUMADAN XLT	44
sodium phosphate.....	92	STALEVO 150.....	19	sumatriptan	20
sodium polystyrene sulfonate	69	STALEVO 200.....	19	sumatriptan succinate	20
SODIUM POLYSTYRENE		STALEVO 50.....	19	SUMAVEL DOSEPRO.....	20
SULFONATE.....	69	STALEVO 75.....	19	SUMAXIN	44
SOLARAZE	42	STARLIX	64	SUMAXIN CP.....	44
SOLQUA 100/33	61	stavudine.....	4	SUMAXIN TS.....	44
SOLIRIS.....	50	STELARA	40	super b complex-vitamin c ...	98
SOLODYN.....	11	STIMATE.....	63	super b maxi complex.....	98
SOLTAMOX.....	15	STIOLTO RESPIMAT.....	88	super b-50 complex plus.....	98
SOLUS V2 AUDIBLE		STIVARGA.....	16	super quints.....	98
METER	60	stop smoking aid.....	50	super quints b-50	98
SOLUS V2 TEST STRIPS...55		STRATTERA.....	30	superplex-t	98
SOMA	21	STRENSIQ.....	63	SUPERVITE.....	98
SOMATULINE DEPOT	15	STREPTOMYCIN	9	SUPRAX	6
SOMAVERT.....	63	stress formula	98	SUPREP BOWEL PREP KIT	69
sonafine	42	stress formula with iron.....	98	SURE-TEST EASYPLUS	
SONATA.....	30	stress formula with iron(sulf)98		MINI	55
SOOLANTRA.....	44	STRIANT	63	SURE-TEST EASYPLUS	
SORBITOL	48	STRIBILD	4	MINI METER	60
SORBITOL-MANNITOL....	48	STRIVERDI RESPIMAT	88	SURFAXIN	88
SORIATANE	40	STROMECTOL	9	SURMONTIL.....	30
SORILUX.....	40	strong iodine	92	SURVANTA	50
sotalol	31	STROVITE FORTE	98	SUSTIVA	4
SOTALOL.....	31	STROVITE ONE	98	SUSTOL	69
sotalol af	31	SUBOXONE	26	SUTENT.....	16
SOTYLIZE.....	31	SUBSYS.....	24	syeda	81
SOVALDI	4	SUCRAID	69	SYLATRON.....	72
SPECTRACEF	6	sucalfate	71	SYLVANT	16
spinosad.....	48	SULAR.....	35	SYMAX DUOTAB.....	66
SPIRIVA RESPIMAT	88	sulfacetamide sodium	40, 84	symax fastabs.....	66
SPIRIVA WITH		sulfacetamide sodium (acne) 45		symax-sl.....	66
HANDIHALER.....	88	sulfacetamide sodium-sulfur 44		symax-sr	66
spironolactone	35	sulfacetamide sod-sulfur-urea	44	SYMBICORT.....	88
spironolacton-hydrochlorothiaz	35	sulfacetamide-prednisolone..	84	SYMBYAX	30
SPORANOX	3	sulfacetamide-sulfur-cleansr23	44	SYMLINPEN 120	64
SPORANOX PULSEPAK	3	sulfacleanse 8-4	44	SYMLINPEN 60	64
sprintec (28).....	81	sulfact na-sul-avobnz-otn-ocsa	44	SYNAGIS.....	4
SPRIX.....	26	sulfadiazine.....	10	SYNALAR	48
SPRYCEL	16	sulfamethoxazole-trimethoprim	10	SYNALAR CREAM KIT ...	48
sps (with sorbitol).....	69	SULFAMYLON.....	45	SYNALAR OINTMENT KIT	48
sronyx	81	sulfasalazine	69	SYNALAR TS.....	48
ssd.....	41	sulfatrim.....	10	SYNALGOS-DC.....	24
SSKI	52	sulindac.....	26	SYNAREL.....	63
sss 10-5.....	44			SYNDROS	69
				SYNERA	45

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SYNERCID.....	9	TECENTRIQ.....	16	tetcaine.....	83
SYNJARDY.....	64	TECFIDERA.....	72	tetrabenazine.....	21
SYNJARDY XR.....	64	TECHNIVIE.....	5	tetracaine hcl.....	83
SYNRIBO.....	16	TEFLARO.....	6	tetracaine hcl (pf).....	83
SYNTHROID.....	65	TEGRETOL.....	18	tetracycline.....	11
SYPRINE.....	50	TEGRETOL XR.....	18	TETRAVISC.....	83
T		TEKTURNA.....	35	TETRAVISC FORTE.....	83
T		TEKTURNA HCT.....	35	TEXACORT.....	48
SLIM.....	60	TELCARE BGM.....	60	TEXAVITE LQ.....	98
SLIM G4.....	60	TELCARE BLOOD		THALOMID.....	16
TABLOID.....	16	GLUCOSE KIT.....	60	THEO-24.....	88
TACLONEX.....	40	TELCARE TEST STRIPS ...	55	theochron.....	88
tacrolimus.....	16, 42	telmisartan.....	35	theophylline.....	88, 89
TAFINLAR.....	16	telmisartan-amlodipine.....	35	thermazene.....	41
TAGRISSO.....	16	telmisartan-hydrochlorothiazid		THIOLA.....	50
TAKE ACTION.....	81	.....	35	thioridazine.....	30
TALTZ AUTOINJECTOR ..	41	temazepam.....	30	thiotepa.....	16
TALTZ AUTOINJECTOR (2		TEMODAR.....	16	thiothixene.....	30
PACK).....	41	TEMOVATE.....	48	THRIVITE RX.....	98
TALTZ AUTOINJECTOR (3		temozolomide.....	16	thrivite-19.....	98
PACK).....	41	tencon.....	24	THYMOGLOBULIN.....	74
TALTZ SYRINGE.....	41	TENIPOSIDE.....	16	THYROLAR-1.....	65
TALTZ SYRINGE (2 PACK)		TENIVAC (PF).....	74	THYROLAR-1/2.....	65
.....	41	TENORETIC 100.....	35	THYROLAR-1/4.....	65
TALTZ SYRINGE (3 PACK)		TENORETIC 50.....	35	THYROLAR-2.....	65
.....	41	TENORMIN.....	35	THYROLAR-3.....	65
TALWIN.....	26	TEPADINA.....	16	tiagabine.....	18
TAMIFLU.....	4, 5	TERAZOL 7.....	78	TIAZAC.....	35
tamoxifen.....	16	terazosin.....	35	ticlopidine.....	38
tamsulosin.....	89	terbinafine hcl.....	3	TIGAN.....	69
TANDEM PLUS.....	98	terbutaline.....	88	TIGECYCLINE.....	9
TANZEUM.....	64	terconazole.....	78	TIKOSYN.....	31
TAPAZOLE.....	52	TERSI FOAM.....	41	tilia fe.....	81
TARCEVA.....	16	TESSALON PERLES.....	86	timolol maleate.....	35, 82
TARGADOX.....	11	TEST N'GO BLOOD		TIMOPTIC.....	82
TARGRETIN.....	16	GLUCOSE SYSTEM.....	60	TIMOPTIC OCUDOSE (PF)	
tarina fe 1/20 (28).....	81	TEST N'GO TEST.....	55	.....	82
TARKA.....	35	TESTIM.....	63	TIMOPTIC-XE.....	82
taron forte.....	98	TESTONE CIK.....	63	TINDAMAX.....	9
taron-c dha.....	98	TESTOPEL.....	63	tinidazole.....	9
taron-prex prenatal-dha.....	98	testosterone.....	63	TIROSINT.....	65
TASIGNA.....	16	TESTOSTERONE.....	63	tis-u-sol pentalyte.....	48
TASMAR.....	19	testosterone cypionate.....	63	TIVICAY.....	5
TAXOTERE.....	16	testosterone enanthate.....	63	TIVORBEX.....	26
TAYTULLA.....	81	TESTRED.....	63	tizanidine.....	21
tazarotene.....	44	TETANUS,DIPHThERIA		tl gard rx.....	98
TAZICEF.....	6	TOX PED(PF).....	74	tl g-fol os.....	98
TAZORAC.....	44	TETANUS-DIPHThERIA		tl icon.....	98
taztia xt.....	35	TOXOIDS-TD.....	74	tl-hem 150.....	98

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TOBI.....	9	TRELSTAR.....	16	trilyte with flavor packets.....	69
TOBI PODHALER	9	TREMFYA.....	41	trimethobenzamide	69
TOBRADEX	84	TRESIBA FLEXTOUCH U-		trimethoprim	11
TOBRADEX ST	84	100	61	trimipramine	30
tobramycin.....	82	TRESIBA FLEXTOUCH U-		trinatal gt.....	99
tobramycin in 0.225 % nacl ...	9	200	61	trinatal rx 1	99
tobramycin in 0.9 % nacl.....	9	tretinoin	44	trinate	99
tobramycin sulfate	9	tretinoin (chemotherapy)	16	trinessa (28)	81
TOBRAMYCIN WITH		tretinoin microspheres	44	trinessa lo.....	81
NEBULIZER.....	9	TRETIN-X.....	44	TRI-NORINYL (28).....	81
tobramycin-dexamethasone..	84	TRETIN-X CREAM KIT.....	44	TRINTELLIX.....	30
TOBREX.....	82	TRETTEN	38	TRIOSTAT	65
TODAY CONTRACEPTIVE		TREXALL.....	16	triphrocaps	99
SPONGE	78	TREXIMET	20	TRIPLE DYE	46
TOFRANIL	30	TREZIX.....	24	tri-previfem (28)	81
TOLAK	42	tri femynor.....	81	TRISENOX	16
tolazamide	64	TRIACETIN	46	tri-sprintec (28).....	81
tolbutamide.....	64	triamcinolone acetonide 48, 51,		TRISTART DHA	99
tolcapone	19	52		tri-tabs dha.....	99
tolmetin.....	26	triamterene-hydrochlorothiazid		TRIUMEQ.....	5
tolterodine.....	89	.....	36	triveen-duo dha.....	99
TOPAMAX	18	trianex.....	48	TRI-VI-FLOR.....	99
TOPICORT	48	triazolam.....	30	tri-vit with fluoride and iron .	99
topiramate.....	18	TRIBENZOR.....	36	tri-vitamin with fluoride	99
TOPIRAMATE	18	TRICARE.....	98	trivora (28).....	81
toposar	16	TRICARE PRENATAL	98	TRIZIVIR.....	5
topotecan	16	TRICARE PRENATAL DHA		TROKENDI XR	18
TOPROL XL	36	ONE.....	99	tropicamide	82
TORISEL	16	tricitrates.....	90	tropium.....	89
torsemide	36	tricon.....	99	TRUE METRIX GLUCOSE	
total b/c.....	98	TRICOR	39	METER.....	60
TOUJEO SOLOSTAR	61	triderm	48	TRUE METRIX GLUCOSE	
TOVIAZ	89	TRIDESILON	48	TEST STRIP.....	55
TRACLEER	89	TRIESENCE (PF)	52	TRUE METRIX GO	
TRADJENTA.....	64	tri-estarylla.....	81	GLUCOSE METER	60
tramadol.....	26	TRIFERIC	99	TRUE2GO BLOOD	
TRAMADOL	26	trifluoperazine	30	GLUCOSE SYSTEM.....	60
tramadol-acetaminophen	26	trifluridine.....	82	TRUERESULT BLOOD	
trandolapril	36	trigels-f forte.....	99	GLUCOSE SYSTM	60
trandolapril-verapamil.....	36	TRIGLIDE.....	39	TRUETEST TEST STRIPS .	55
tranexamic acid	38, 78	trihexyphenidyl.....	19	TRUETRACK BLOOD	
TRANSDERM-SCOP.....	69	triklo	39	GLUCOSE SYSTEM.....	60
TRANXENE T-TAB.....	30	tri-legest fe.....	81	TRUETRACK SMART	
tranlycypromine	30	TRILEPTAL.....	18	SYSTEM	60
TRANZAREL	45	tri-lynyah	81	TRUETRACK TEST.....	55
TRAVATAN Z	84	TRILIPIX	39	TRULANCE.....	69
trazodone	30	tri-lo-estarylla	81	TRULICITY	64
TREANDA.....	16	tri-lo-marzia.....	81	TRUMENBA.....	74
TRECATOR.....	9	tri-lo-sprintec	81	TRUSOPT	84

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trust natal dha	99	ur n-c.....	90	vancomycin.....	11
TRUVADA	5	URAMAXIN	42	vandazole.....	78
TUDORZA PRESSAIR	89	uramit mb	90	VANOS	48
tusnel c.....	86	urea	42	VANOXIDE-HC	44
TUSNEL PEDIATRIC.....	86	urea nail stick.....	42	VAQTA (PF)	74
TUSSICAPS.....	86	URECHOLINE	89	VARIVAX (PF).....	74
tussigon.....	86	ure-k.....	42	VARIZIG.....	74
TUSSIONEX PENNKINETIC		URELLE.....	90	VARUBI.....	69
ER.....	86	uretron d-s.....	90	VASCEPA.....	39
TUZISTRA XR.....	86	URIBEL.....	90	VASERETIC	36
TWINRIX (PF)	74	urimar-t.....	90	VASHE WOUND THERAPY	
TWYNSTA	36	urin ds	90	.....	48
TYBOST	5	uro-458	90	vasopressin in 0.9 % nacl	63
TYGACIL	9	UROCIT-K 10.....	90	VASOSTRICT	63
TYKERB.....	16	UROCIT-K 15.....	90	VASOTEC.....	36
TYLENOL-CODEINE #3....	24	UROCIT-K 5.....	90	v-c forte	99
TYLENOL-CODEINE #4....	24	urogesic-blue	90	VCF CONTRACEPTIVE	
TYMLOS	75	uro-mp	90	FILM.....	78
TYSABRI.....	21	urophen mb.....	90	VCF CONTRACEPTIVE GEL	
TYVASO.....	89	UROQID-ACID NO.2.....	90	.....	78
TYVASO REFILL KIT	89	UROXATRAL	89	VECAMYL	39
TYVASO STARTER KIT ...	89	URSO 250	69	VECTIBIX	16
TYZINE	51	URSO FORTE.....	69	VECTICAL	41
U		ursodiol.....	69	VELCADE	16
UCERIS.....	69	uryl.....	90	veletri	36
UDAMIN SP	99	ustell	90	velivet triphasic regimen (28)	
ULESFIA	48	UTA.....	90	.....	81
ULORIC.....	74	UTIBRON NEOHALER.....	89	VELPHORO.....	69
ULTIMA TEST STRIPS.....	55	utira-c.....	90	VELTASSA.....	69
ultimatecare one	99	UTOPIC.....	42	VELTIN.....	44
ultimatecare one nf	99	UVADEX	42	vemavite-prx-2	99
ultra b-100 complex	99	V		VEMLIDY.....	5
ULTRACET	26	VAGIFEM.....	77	VENCLEXTA	16
ULTRAM.....	26	vaginal contraceptive foam ..	78	venlafaxine	30, 31
ULTRAM ER.....	26	valacyclovir	5	VENOFER.....	99
ULTRASAL-ER.....	41	VALCHLOR	42	VENTAVIS	89
ULTRATRAK.....	55	VALCYTE	5	VENTOLIN HFA.....	89
ULTRATRAK GLUCOSE		valganciclovir	5	verapamil	36
METER	60	VALIUM.....	30	VERDESO.....	48
ULTRATRAK ULTIMATE55,		valproate sodium	18	verdrocet	24
60		valproic acid	18	VEREGEN	42
ULTRAVATE	48	valproic acid (as sodium salt)		VERELAN	36
ULTRAVATE X	48	.....	18	VERELAN PM.....	36
umecta	42	valsartan.....	36	veripred 20.....	52
UNASYN	10	valsartan-hydrochlorothiazide		VERSACLOZ.....	31
UNISTRIPI TEST STRIP ...	55	.....	36	VESICARE.....	89
unithroid	65	VALTREX	5	vestura (28).....	81
UNITUXIN	16	VANATOL LQ	24	VFEND.....	3
UPTRAVI.....	36	VANCOCIN.....	11	VFEND IV.....	3

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VGO 20	60	virt-nate dha.....	99	vol-nate	100
VGO 30	60	virt-phos 250 neutral	92	vol-plus	100
VGO 40	60	virt-pn	99	vol-tab rx	100
VIBATIV	11	virt-pn dha	99	VOLTAREN.....	26
VIBERZI	70	virt-pn plus	99	VOLTAREN-XR.....	26
VIBRAMYCIN	11	VIRTPREX	99	VONVENDI.....	38
vic-forte	99	virtrate-2	90	VORAXAZE	12
vicodin	24	virtrate-3	90	voriconazole	3
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VIDEX EC	5	VIRT-VITE PLUS	99	VOTRIENT	16
VIEKIRA PAK	5	VISTARIL.....	85	vp-ch plus	100
VIEKIRA XR.....	5	VISTOGARD.....	12	vp-ch-pnv.....	100
vienva	81	VISUDYNE.....	83	vp-ggr-b6	100
vigabatrin.....	18	vit 3.....	99	vp-heme ob	100
VIGAMOX.....	82	vit b complex-folic acid.....	99	vp-heme one	100
VIIBRYD	31	VITA-BEE WITH C	99	VP-PNV-DHA.....	100
VIMIZIM	63	VITAFOL	99	VPRIV	63
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