



Kansas City

**MEMBER** **2023**  
**PREMIUM DRUG LIST**

For group HMO, PPO and EPO members with an insurance plan that includes a prescription drug benefit

**Effective January 1, 2023**

# Blue Cross and Blue Shield of Kansas City 2023 Premium Drug List

## Introduction

The Prescription Drug List (PDL) has been developed and is maintained by the Medical and Pharmacy Management Committee of Blue Cross and Blue Shield of Kansas City (Blue KC). The committee is composed of practicing doctors and pharmacists within the Kansas City area. Quarterly meetings are held to evaluate new drug therapies and review drug utilization issues.

Medications are evaluated on the basis of safety, effectiveness, adverse events, proven advantages over existing agents and cost. Tier 1 medications are typically generic drugs that contain the same active ingredients as brand name drugs and have the lowest copay. New drugs will require an exception or prior authorization until they are reviewed by the committee.

While extensive, this is not an exhaustive list of all available medications and this list is subject to change. See the most current PDL by visiting your member portal at [MyBlueKC.com](http://MyBlueKC.com). If you require additional information or clarification, contact our Clinical Pharmacy unit at 816-395-2176 or 800-228-1436.

**Please be aware that as new products are released and post-marketing information on existing therapies becomes available, changes in the PDL status may occur.** The committee may also implement prior authorization or other utilization management processes as deemed necessary. Doctors and pharmacists will be notified of any such changes via direct mailings.

## How to use this list:

- 1 Find the page number for your drug by searching the alphabetical index at the end.
- 2 Locate your drug and identify the DrugTier. You will also want to note restrictions and preferred alternatives if applicable.
- 3 Refer to the DrugTier description tables at the end of this introduction to identify the tier copay for your drug (based on the benefit schedule described in your member certificate or in your Blue KC benefit summary).

## Prior Authorization/Drug Utilization Management

Some drugs have coverage rules or have limits on the amount dispensed. In some cases, the doctor must do something in order to obtain the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, the doctor must get approval from BlueKC before the prescription can be filled. Without that approval, the drug may not be covered.
- **Quantity limits:** For some drugs, there are limits to the amount of drug that may be obtained.
- **Step therapy:** For some drugs, BlueKC requires step therapy. This means that drugs will have to be tried in a certain order for a medical condition. If the doctor feels that the first drugs are not appropriate, the doctor will have to submit a prior authorization request.

**Doctors may request exceptions to these coverage rules or limits by submitting an electronic prior authorization request form. [www.BlueKC.com](http://www.BlueKC.com) > Providers > Forms > Prior Authorizations for Medications.**

## Tier Exception Requests for Contraceptives & HIV Pre-Exposure Prophylaxis (PrEP)

If, for medical reasons, you need a contraceptive or HIV PrEP medication that is not included on these Preventive Service list(s), you may request an exception to waive the otherwise applicable cost sharing for your medication. To request an exception, your doctor must complete and submit one online at [bluekc.com](http://bluekc.com).

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## HOWTO REACH US

### Blue Cross and Blue Shield of Kansas City Pharmacy Services

P.O. Box 419169

Kansas City, MO 64141-2735

816-395-2176 or 800-228-1436

[www.BlueKC.com](http://www.BlueKC.com)

## Frequently asked questions

### **What is the difference between brand name drugs and generic drugs?**

When a drug company develops a new medication they apply for a patent. This patent protects the drug from being copied by other drug companies for a certain period of time. These drugs are brand name drugs. Once the patent period expires, other manufacturers can produce the same drug as long as they follow strict guidelines established by the Food and Drug Administration's (FDA) guidelines. These same drugs are generic drugs. Generic drugs are less expensive versions of those brand name drugs whose patents have expired. They are made with the same active ingredients of the brand name drug, but they may have a different color, shape or filler material. The cost of a generic drug is typically less than a brand name drug. All generic medications are approved by the FDA before they are released on the market.

### **What is the difference between a generic equivalent and a generic alternative?**

A generic equivalent is a medication that contains the same active ingredient and works the same way as the original brand name drug. A generic alternative is a generic medication that may not have the same active ingredient, but works in the same way as another drug.

### **What is a maintenance drug?**

A maintenance drug is a medication used to treat a chronic condition like diabetes or high blood pressure. The FDA must approve maintenance drugs as safe for long-term use. Blue KC uses a national drug information database called Medi-Span to determine which medications are included on the maintenance drug list. If your prescription is a maintenance drug, you can have it filled for several months instead of just one prescription at a time.

### **Does Blue KC cover all prescription drugs?**

Blue KC covers most prescription drugs. However, some drug classes require an additional benefit be added to your health insurance plan in order to be covered. This additional benefit is referred to as a 'rider.' Examples of such drug classes are fertility, birth control, impotency, and weight loss.

### **How is the tier level status determined for medications?**

The PDL is a list of prescription medications that have been reviewed and recommended by the Blue KC Medical and Pharmacy Management Committee. The list has a combination of brand name and generic medications. Each of these medications has been reviewed for its safety, effectiveness, clinical outcomes, and cost. Doctors and pharmacists on the committee look at drug utilization issues, the number of adverse events, and any proven advantages over other drugs on the PDL. The most efficient and cost-effective drugs are on Tier 1 of the PDL.

### **Why does Blue KC require prior authorization for some drugs before they are covered?**

Blue KC may require prior authorization for some drugs or a class. Medications on the prior authorization list may have safety concerns or have FDA approval, only for a certain use. Some of the prior authorization medications may also have a lower-cost alternative that should be considered first or the drug may not be as effective as something else in the same drug class. Some medications are also on the prior authorization list because they have the potential to be misused. Your doctor and Blue KC will work together to get prior authorization and approval for your prescription when needed.

### **Do I need to show my member ID card at the pharmacy?**

Yes, show your member ID card to your pharmacist whenever you have a prescription filled. Your prescription claim is electronically transmitted to Blue KC when you fill your prescription. Please make sure the pharmacy has your most current health insurance information and correct birth date so there won't be any delays or claim denials when we process your claim.

### **What do I do if I need to refill my prescription early (i.e., leaving on vacation, the doctor increased my dosage)?**

To have a prescription refilled early, have your pharmacist call the Pharmacy Customer Service unit at 816-395-2176 or 800-228-1436, Monday through Friday from 8 a.m. to 5 p.m. Central Time.

### **What if I am out of town and need to have a prescription filled?**

Blue KC contracts with most major pharmacy chains and has a network of over 44,000 pharmacies nationwide. If the pharmacy you are using has difficulty in processing your prescription claim, have them contact the Pharmacy Customer Service unit for assistance at 816-395-2176 or 800-228-1436, Monday through Friday from 8 a.m. to 5 p.m. Central Time.

### **Why must some drugs be purchased through a Specialty Pharmacy?**

Specialty drugs are those that require special ordering, handling, clinical monitoring and/or customer service. These drugs are best purchased through a Specialty Pharmacy. Blue KC has a network of Specialty Pharmacies available to provide specialized care for patients with complex chronic health conditions to obtain their medications and manage their health conditions. Specialty medications are limited to a 34 day supply.

### **What if I have questions about my prescription drug coverage?**

For more information on your prescription drug coverage, call the Pharmacy Customer Service unit at 816-395-2176 or 800-228-1436, Monday through Friday from 8 a.m. to 5 p.m. Central Time.

# Miscellaneous Information

## Specialty Pharmacy

A Specialty Pharmacy is one that provides specialized care for patients with complex chronic health conditions such as Rheumatoid Arthritis, Multiple Sclerosis or Psoriasis. Specialty drugs may be oral or injectable medications that can either be self-administered or administered by a health care professional. These pharmacies do everything from dispense the specialty medication to help patients manage their health condition. Most specialty medications are covered under the pharmacy benefit. Specialty medications are limited to a 34 day supply. The following is a list of other services provided by the Specialty Pharmacy:

- Assigns a Patient Care Coordinator who serves as a personal advocate and point of contact
- Offers access to a dedicated clinical staff of nurses and pharmacists who are knowledgeable about the medications and conditions
- Provides the necessary supplies to administer the medications — at no additional cost
- Offers care management programs to help patients get the most from their medications
- Provides patients with refill reminder calls
- Allows the medications to be delivered to either the physician's office or patient's home
- Works directly with patients to arrange a convenient shipment date
- Ships all medications overnight
- Coordinates with Blue KC to take care of billing issues

These services are provided to you at no additional cost. Prescriptions for a specialty medication will need to be filled at the Specialty Pharmacy listed below.

### Optum Specialty Pharmacy

Phone: 1-855-427-4682

## Syringe and Needle Coverage

Syringes and needles are covered by prescription only, and only for members taking medications requiring injection. Techlite/Arkray supplies are covered at \$0 cost; all other syringe/needle products are covered at a non-preferred brand copay.

## Drug Tier Descriptions

To find out what prescription drug tier is on your plan, please see the benefit schedule in your member certificate or in your Blue KC benefit summary.

1-Tier Benefit	Drug Tier
Tier 1 copay	G G-S
Not Covered	PB PB-S
Not Covered	NPB NPB-S
3-Tier Benefit	Drug Tier
Tier 1 copay	G G-S
Tier 2 copay	PB PB-S
Tier 3 copay	NPB NPB-S
3-Tier Retail/Specialty Benefit	Drug Tier
Tier 1 copay	G
Tier 2 copay	PB
Tier 3 copay	NPB
Generic Specialty copay	G-S
Preferred Brand Specialty copay	PB-S
Non-Preferred Brand Specialty copay	NPB-S
4-Tier Benefit	Drug Tier
Tier 1 copay	G G-S
Tier 2 copay	PB
Tier 3 copay	PB-S NPB
Tier 4 copay	NPB-S

## List of Abbreviations

<b>G</b>	Generic Drug.
<b>G-S</b>	Generic Specialty Drug.
<b>NPB</b>	Non-preferred Brand Drug.
<b>NPB-S</b>	Non-preferred Brand Specialty Drug.
<b>PB</b>	Preferred Brand Drug.
<b>PB-S</b>	Preferred Brand Specialty Drug.
<b>ACA</b>	Affordable Care Act. These preventative drugs may be covered at no cost (check your benefits to confirm).
<b>M</b>	Maintenance Drug.
<b>OTC</b>	Over the Counter. An OTC drug is a non-prescription drug.
<b>PA</b>	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 prescription. If you don't get approval, your plan may not cover the drug.
<b>QL</b>	Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.
<b>ST</b>	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.

# Blue Cross and Blue Shield of Kansas City

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Drug Name	Drug Tier	Restrictions / Limits
<b>Analgesics - Drugs for Pain</b>		
acetaminophen-codeine	G	
acetaminophen-codeine #2	G	
acetaminophen-codeine #3	G	
acetaminophen-codeine #4	G	
ACTIQ	NPB	PA; QL (4 EA per 1 day)
apap-caff-dihydrocodeine	G	
ascomp-codeine	G	
bac	G	
BELBUCA	PB	QL (2 EA per 1 day)
buprenorphine	G	QL (0.15 EA per 1 day)
buprenorphine hcl injection	G	
butalbital-acetaminophen oral tablet 50-325 mg	G	
butalbital-apap-caff-cod	G	
butalbital-apap-caffeine oral capsule 50-300-40 mg	G	
butalbital-apap-caffeine oral tablet	G	
butalbital-asa-caff-codeine	G	
butalbital-aspirin-caffeine	G	
butorphanol tartrate nasal	G	
codeine sulfate	G	
DEMEROL INJECTION SOLUTION 25 MG/ML	NPB	
endocet	G	
fentanyl citrate buccal lozenge on a handle	G	PA; QL (4 EA per 1 day)
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	G	QL (1 EA per 1 day)
fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr	G	QL (0.5 EA per 1 day)
hydrocodone bitartrate er oral capsule extended release 12 hour	G	
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	G	QL (1 EA per 1 day)
hydrocodone-acetaminophen	G	
hydrocodone-ibuprofen	G	
hydromorphone hcl er	G	QL (2 EA per 1 day)
hydromorphone hcl oral	G	
hydromorphone hcl pf injection solution 10 mg/ml, 50 mg/5ml	G	
HYSINGLA ER	PB	QL (1 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
LORTAB	NPB	
meperidine hcl oral solution	G	
methadone hcl intensol	G	
methadone hcl oral	G	
METHADOSE ORAL CONCENTRATE 10 MG/ML	NPB	
methadose oral tablet soluble	G	
METHADOSE SUGAR-FREE	NPB	
morphine sulfate (concentrate)	G	
morphine sulfate er beads oral capsule extended release 24 hour 120 mg	G	QL (2 EA per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	G	QL (1 EA per 1 day)
morphine sulfate er oral capsule extended release 24 hour	G	QL (2 EA per 1 day)
morphine sulfate er oral tablet extended release	G	QL (3 EA per 1 day)
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	NPB	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml	G	
morphine sulfate oral	G	
nalbuphine hcl injection solution 10 mg/ml	G	
oxycodone hcl oral capsule	G	
oxycodone hcl oral concentrate 100 mg/5ml	G	
oxycodone hcl oral solution	G	
oxycodone hcl oral tablet	G	
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	NPB	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	G	
OXYCONTIN	PB	QL (4 EA per 1 day)
oxymorphone hcl	G	
oxymorphone hcl er	G	
pentazocine-naloxone hcl	G	
SYNAPRYN FUSEPAQ	NPB	
TENCON	NPB	
tramadol hcl er (biphasic)	G	PA; QL (1 EA per 1 day)
tramadol hcl er oral tablet extended release 24 hour	G	PA; QL (1 EA per 1 day)
tramadol hcl oral tablet	G	

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Drug Name	Drug Tier	Restrictions / Limits
tramadol-acetaminophen	G	
TREZIX	NPB	
XTAMPZA ER	PB	QL (4 EA per 1 day)
<b>Analgesics - Drugs for Pain and Inflammation</b>		
celecoxib oral	G	QL (2 EA per 1 day)
DAYPRO	NPB	
diclofenac potassium oral tablet 50 mg	G	
diclofenac sodium er	G	
diclofenac sodium external gel 1 %	G	QL (33.33 GM per 1 day)
diclofenac sodium external solution 1.5 %	G	PA
diclofenac sodium oral	G	
DICLOFONO	NPB	
diflunisal oral	G	
DUAL COMPLEX FORMULA 1 KIT	NPB	
EC-NAPROSYN	NPB	
ec-naproxen	G	
ENOVARX-DICLOFENAC SODIUM	NPB	
ENOVARX-IBUPROFEN	NPB	
ENOVARX-NAPROXEN	NPB	
etodolac	G	
etodolac er	G	
FBL KIT	NPB	
FELDENE	NPB	
flurbiprofen oral	G	
FROTEK	NPB	
ibuprofen oral suspension 100 mg/5ml	G	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	G	
INDOCIN ORAL	NPB	ST
indomethacin er	G	
indomethacin oral capsule 25 mg, 50 mg	G	
K.B.G.L IN TERODERM	NPB	
KETOPHENE RAPIDPAQ	NPB	
ketoprofen oral capsule 50 mg	G	
ketorolac tromethamine oral	G	QL (20 EA per 1 fill)
LODINE	NPB	
meloxicam oral tablet	G	
nabumetone oral	G	

Drug Name	Drug Tier	Restrictions / Limits
NAPRO	NPB	
naproxen oral tablet	G	
naproxen oral tablet delayed release	G	
naproxen sodium oral tablet 275 mg, 550 mg	G	
oxaprozin	G	
piroxicam oral	G	
sulindac oral	G	
TRIPLE COMPLEX FORMULA 3 KIT	NPB	
VP FC KIT	NPB	
VP GKL KIT	NPB	
<b>Anesthetics</b>		
ENOVARX-LIDOCAINE HCL	NPB	
ethyl chloride	G	
GEBAUERS PAIN EASE	NPB	
GEBAUERS SPRAY AND STRETCH	NPB	
glydo	G	
L.E.T. EXTERNAL GEL	NPB	
lidocaine external ointment 5 %	G	
lidocaine external patch 5 %	G	
lidocaine hcl external solution	G	
lidocaine hcl urethral/mucosal	G	
LIDOCAINE-EPINEPHRINE (3 ML)	NPB	
lidocaine-prilocaine external cream	G	
LIDTOPIC MAX	NPB	
MARCAINE/EPINEPHRINE INJECTION SOLUTION 0.25-1:200000 %	NPB	
NAROPIN INJECTION SOLUTION 10 MG/ML	NPB	
NESACAINE-MPF	NPB	
ropivacaine hcl injection solution 10 mg/ml	G	
SENSORCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% -1:200000	NPB	
STERILE TOPICAL L.E.T. GEL	NPB	
TOPICAL L.E.T.	NPB	
VENIPUNCTURE PX1 PHLEBOTOMY	NPB	
<b>Anti-Addiction / Substance Abuse Treatment Agents</b>		
acamprosate calcium	G	
APO-VARENICLINE	NPB	ACA; QL (180 day supply per 365 days)

Drug Name	Drug Tier	Restrictions / Limits
buprenorphine hcl sublingual tablet sublingual 2 mg	G	QL (12 EA per 1 day)
buprenorphine hcl sublingual tablet sublingual 8 mg	G	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg	G	QL (2 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	G	QL (12 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	G	QL (6 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	G	QL (3 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	G	QL (12 EA per 1 day)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	G	QL (3 EA per 1 day)
bupropion hcl er (smoking det)	G	M; ACA; QL (180 day supply per 365 days)
disulfiram oral	G	
KLOXXADO	G	
LUCEMYRA	NPB	ST; QL (16 EA per 1 day)
NALMEFENE HCL	NPB	
naloxone hcl injection	G	
naloxone hcl nasal	G	
naltrexone hcl oral	G	
NARCAN	G	
NICOTROL	NPB	M; ACA; QL (180 day supply per 365 days)
NICOTROL NS	NPB	M; ACA; QL (180 day supply per 365 days)
SUBOXONE SUBLINGUAL FILM 12-3 MG	G	QL (2 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG	G	QL (12 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 4-1 MG	G	QL (6 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 8-2 MG	G	QL (3 EA per 1 day)
varenicline tartrate	G	ACA; QL (180 day supply per 365 days)
VIVITROL	G	
ZIMHI	G	
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 5.7-1.4 MG	G	QL (3 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG	G	QL (12 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
ZUBSOLV SUBLINGUAL TABLET 11.4-2.9 MG	G	QL (1 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 2.9-0.71 MG	G	QL (6 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	G	QL (2 EA per 1 day)
<b>Antibacterials</b>		
AEMCOLO	NPB	PA
ALTABAX	NPB	
amoxicillin	G	
amoxicillin-potassium clavulanate	G	
amoxicillin-potassium clavulanate er	G	
ampicillin	G	
ampicillin sodium injection solution reconstituted 250 mg	G	
ARIKAYCE	NPB-S	PA
AUGMENTIN	NPB	
AUGMENTIN ES-600	NPB	
avidoxy	G	
azithromycin oral	G	
BACTRIM	NPB	
BACTRIM DS	NPB	
BAXDELA ORAL	NPB	
benzalkonium chloride external solution	G	
cefaclor	G	
cefaclor er	G	
cefadroxil	G	
CEFAZOLIN SODIUM INJECTION SOLUTION PREFILLED SYRINGE	NPB	
cefazolin sodium injection solution reconstituted 10 gm	G	
cefdinir	G	
cefixime	G	
cefpodoxime proxetil	G	
cefprozil	G	
cefuroxime axetil	G	
CENTANY	NPB	
cephalexin	G	
CIPRO	NPB	
ciprofloxacin hcl oral	G	
clarithromycin er	G	
clarithromycin oral	G	

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Drug Name	Drug Tier	Restrictions / Limits
CLEOCIN ORAL	NPB	
clindamycin hcl oral	G	
clindamycin palmitate hcl	G	
clindamycin phosphate vaginal	G	
CLINDESSE	NPB	
colistimethate sodium (cba)	G	
COLY-MYCIN M	NPB	
demeclocycline hcl	G	
dicloxacillin sodium	G	
DIFICID	NPB	
doxycycline hyclate oral capsule	G	
doxycycline hyclate oral tablet 100 mg, 20 mg	G	
doxycycline monohydrate oral capsule 100 mg, 50 mg	G	
doxycycline monohydrate oral suspension reconstituted	G	
doxycycline monohydrate oral tablet	G	
E.E.S. 400	NPB	
E.E.S. GRANULES	NPB	
ERYPED 200	NPB	
ERYPED 400	NPB	
ERY-TAB	NPB	
ERYTHROCIN STEARATE	NPB	
erythromycin base oral	G	
erythromycin ethylsuccinate oral	G	
erythromycin oral	G	
FIRST-METRONIDAZOLE	NPB	
FIRVANQ	NPB	
fosfomicin tromethamine	G	
gentamicin sulfate external	G	
gentamicin sulfate injection solution 40 mg/ml	G	
HIPREX	NPB	
HUMATIN	NPB	
hydrogen peroxide	G	
levofloxacin oral	G	
linezolid oral suspension reconstituted	G	QL (32.2 ML per 1 day)
linezolid oral tablet	G	QL (28 EA per 30 days)
LUGOLS STRONG IODINE	NPB	
MACROBID	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
MACRODANTIN	NPB	
mafenide acetate external	G	
methenamine hippurate	G	
METRONIDAZOLE BENZO+SYRSPEND	NPB	
metronidazole oral tablet	G	
metronidazole vaginal	G	
MINOCYCLINE HCL ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR	NPB	
minocycline hcl oral capsule	G	
mondoxyne nl	G	
MONUROL	NPB	
moxifloxacin hcl oral	G	
mupirocin external	G	
neomycin sulfate oral	G	
nitrofurantoin macrocrystal	G	
nitrofurantoin monohydrate macrocrystals	G	
NUZYRA ORAL	NPB	
ofloxacin oral	G	
oxacillin sodium injection solution reconstituted 2 gm	G	
paromomycin sulfate oral	G	
penicillin v potassium	G	
SEYSARA	NPB	ST
silver sulfadiazine external	G	
SOLOSEC	NPB	ST
ssd	G	
sulfadiazine oral	G	
sulfamethoxazole-trimethoprim oral	G	
SULFAMYLON EXTERNAL PACKET	NPB	
sulfatrim pediatric	G	
SUPRAX	NPB	
tetracycline hcl oral	G	
tinidazole oral	G	
tobramycin sulfate injection solution reconstituted	G	
trimethoprim oral	G	
VANCOCIN	NPB	
vancomycin hcl oral	G	
VANCOMYCIN+SYRSPEND SF	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
VANDAZOLE	NPB	ST
VIBRAMYCIN	NPB	ST
XENLETA ORAL	NPB	
XEPI	NPB	
XIFAXAN ORAL TABLET 550 MG	NPB	PA
XIMINO	NPB	
ZITHROMAX ORAL	NPB	
ZITHROMAX TRI-PAK	NPB	
ZITHROMAX Z-PAK	NPB	
ZYVOX ORAL SUSPENSION RECONSTITUTED	NPB	QL (32.2 ML per 1 day)
<b>Anticoagulants</b>		
ARIXTRA	NPB-S	
dabigatran etexilate mesylate	G	M; QL (2 EA per 1 day)
ELIQUIS DVT/PE STARTER PACK	PB	M; QL (148 EA per 365 days)
ELIQUIS ORAL TABLET 2.5 MG	PB	M; QL (2 EA per 1 day)
ELIQUIS ORAL TABLET 5 MG	PB	M; QL (3 EA per 1 day)
enoxaparin sodium	G-S	
fondaparinux sodium	G-S	
FRAGMIN SUBCUTANEOUS	NPB-S	
heparin sodium (porcine)	G	
heparin sodium (porcine) pf	G	
jantoven	G	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	NPB-S	
PRADAXA	PB	M; QL (2 EA per 1 day)
SAVAYSA	NPB	M; QL (1 EA per 1 day)
warfarin sodium oral	G	
XARELTO ORAL SUSPENSION RECONSTITUTED	PB	M; QL (20 ML per 1 day)
XARELTO ORAL TABLET 10 MG, 20 MG	PB	M; QL (1 EA per 1 day)
XARELTO ORAL TABLET 15 MG, 2.5 MG	PB	M; QL (2 EA per 1 day)
XARELTO STARTER PACK	PB	M; QL (102 EA per 365 days)
<b>Anticonvulsants - Drugs for Seizures</b>		
APTIOM	NPB	
BANZEL	NPB	PA
BRIVIACT ORAL	NPB	ST
carbamazepine er	G	
carbamazepine oral	G	

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Drug Name	Drug Tier	Restrictions / Limits
CELONTIN	NPB	
clobazam	G	PA
DIACOMIT	NPB-S	PA
DIASTAT ACUDIAL	NPB	QL (2 EA per 1 fill)
DIASTAT PEDIATRIC	NPB	QL (2 EA per 1 fill)
diazepam rectal	G	QL (2 EA per 1 fill)
DILANTIN ORAL CAPSULE 30 MG	NPB	
divalproex sodium er	G	
divalproex sodium oral	G	
EPIDIOLEX	NPB-S	PA
epitol	G	
ethosuximide oral	G	
FANATREX FUSEPAQ	NPB	
felbamate	G	
FINTEPLA	NPB-S	PA
FYCOMPA	NPB	
gabapentin oral capsule	G	
gabapentin oral solution	G	
gabapentin oral tablet 600 mg, 800 mg	G	
GABITRIL	NPB	
lacosamide oral	G	
LAMICTAL XR ORAL KIT	NPB	
lamotrigine er	G	
lamotrigine oral	G	
lamotrigine starter kit-blue	G	
lamotrigine starter kit-green	G	
lamotrigine starter kit-orange	G	
levetiracetam er	G	
levetiracetam oral	G	
NAYZILAM	NPB	QL (0.34 EA per 1 day)
NEMBUTAL	NPB	
oxcarbazepine	G	
phenobarbital oral	G	
PHENYTEK	NPB	
phenytoin infatabs	G	
phenytoin oral suspension 125 mg/5ml	G	
phenytoin oral tablet chewable	G	
phenytoin sodium extended	G	

Drug Name	Drug Tier	Restrictions / Limits
primidone oral	G	
roweepra	G	
rufinamide	G	PA
subvenite	G	
subvenite starter kit-blue	G	
subvenite starter kit-green	G	
subvenite starter kit-orange	G	
SYMPAZAN	NPB	PA
tiagabine hcl	G	
topiramate er	G	
topiramate oral	G	
TROKENDI XR	NPB	ST
valproic acid oral	G	
VALTOCO NASAL LIQUID 10 MG/0.1ML, 5 MG/0.1ML	NPB	QL (0.34 EA per 1 day)
VALTOCO NASAL LIQUID THERAPY PACK 10 MG/0.1ML, 7.5 MG/0.1ML	NPB	QL (0.67 EA per 1 day)
vigabatrin	G-S	PA
vigadrone	G-S	PA
XCOPRI	NPB	ST
ZARONTIN	NPB	
zonisamide oral	G	
ZTALMY	NPB-S	PA
<b>Antidementia Agents - Drugs for Alzheimer's Disease and Dementia</b>		
ARICEPT	NPB	M
donepezil hcl	G	M
EXELON	NPB	M
galantamine hydrobromide	G	M
galantamine hydrobromide er	G	M
memantine hcl	G	M
memantine hcl er	G	M; QL (1 EA per 1 day)
NAMENDA	NPB	M
NAMENDA TITRATION PAK	NPB	M
NAMENDA XR	NPB	M; QL (1 EA per 1 day)
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	PB	QL (56 EA per 365 days)
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	PB	QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
RAZADYNE ER	NPB	M
rivastigmine	G	M
rivastigmine tartrate	G	M
<b>Antidepressants</b>		
amitriptyline hcl oral	G	
amoxapine	G	
bupropion hcl er (sr)	G	M; QL (2 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	G	M; QL (3 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	G	M; QL (1 EA per 1 day)
bupropion hcl oral	G	M
chlordiazepoxide-amitriptyline	G	
citalopram hydrobromide oral solution	G	M
citalopram hydrobromide oral tablet	G	M
clomipramine hcl oral	G	
desipramine hcl oral	G	
DESVENLAFAXINE ER	NPB	ST; M; QL (1 EA per 1 day)
desvenlafaxine succinate er	G	M; QL (1 EA per 1 day)
doxepin hcl oral capsule	G	
doxepin hcl oral concentrate	G	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	NPB	ST; M; QL (2 EA per 1 day)
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	NPB	ST; M; QL (3 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 20 mg, 40 mg, 60 mg	G	M; QL (2 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 30 mg	G	M; QL (3 EA per 1 day)
EMSAM	NPB	QL (1 EA per 1 day)
escitalopram oxalate oral	G	M
FETZIMA	NPB	ST; M; QL (1 EA per 1 day)
FETZIMA TITRATION	NPB	ST; M; QL (56 EA per 365 days)
fluoxetine hcl oral capsule	G	M
fluoxetine hcl oral capsule delayed release	G	M; QL (0.15 EA per 1 day)
fluoxetine hcl oral solution	G	M
fluoxetine hcl oral tablet 10 mg, 60 mg	G	M
fluvoxamine maleate	G	M

Drug Name	Drug Tier	Restrictions / Limits
fluvoxamine maleate er	G	M; QL (2 EA per 1 day)
imipramine hcl oral	G	
imipramine pamoate	G	
MARPLAN	NPB	
mirtazapine oral	G	
NARDIL	NPB	
nefazodone hcl	G	M
NORPRAMIN	NPB	
nortriptyline hcl oral	G	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	G	QL (1 EA per 1 day)
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	G	QL (3 EA per 1 day)
PARNATE	NPB	
paroxetine hcl	G	M
paroxetine hcl er	G	M
PAXIL ORAL SUSPENSION	NPB	ST; M
perphenazine-amitriptyline	G	
phenelzine sulfate oral	G	
protriptyline hcl	G	
REMERON	NPB	
REMERON SOLTAB	NPB	
sertraline hcl oral concentrate	G	M
sertraline hcl oral tablet	G	M
SPRAVATO (56 MG DOSE)	NPB-S	PA
SPRAVATO (84 MG DOSE)	NPB-S	PA
SYMBYAX	NPB	QL (3 EA per 1 day)
tranylcypromine sulfate	G	
trazodone hcl oral	G	
trimipramine maleate oral	G	
TRINTELLIX	NPB	ST; QL (1 EA per 1 day)
venlafaxine hcl	G	M
venlafaxine hcl er oral capsule extended release 24 hour	G	M
venlafaxine hcl er oral tablet extended release 24 hour 225 mg	G	M
VIIBRYD	NPB	ST; M; QL (1 EA per 1 day)
VIIBRYD STARTER PACK	NPB	ST; M; QL (30 EA per 1 fill)
vilazodone hcl	G	M; QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
<b>Antiemetics - Drugs for Nausea and Vomiting</b>		
AKYNZEO ORAL	NPB	QL (0.07 EA per 1 day)
ANTIVERT	NPB	
ANZEMET	NPB	QL (0.07 EA per 1 day)
aprepitant oral	G	QL (6 EA per 30 days)
aprepitant oral capsule 125 mg	G	QL (2 EA per 30 days)
aprepitant oral capsule 40 mg	G	QL (1 EA per 30 days)
aprepitant oral capsule 80 & 125 mg	G	QL (6 EA per 30 days)
aprepitant oral capsule 80 mg	G	QL (4 EA per 30 days)
BONJESTA	NPB	PA; QL (2 EA per 1 day)
compro	G	
DICLEGIS	NPB	PA; QL (4 EA per 1 day)
dimenhydrinate injection	G	
doxylamine-pyridoxine	G	PA; QL (4 EA per 1 day)
dronabinol	G	PA; QL (2 EA per 1 day)
EMEND ORAL CAPSULE	NPB	QL (4 EA per 30 days)
EMEND ORAL SUSPENSION RECONSTITUTED	NPB	QL (0.1 EA per 1 day)
EMEND TRI-PACK	NPB	QL (6 EA per 30 days)
granisetron hcl oral	G	QL (0.14 EA per 1 day)
MARINOL	NPB	PA; QL (2 EA per 1 day)
meclizine hcl oral tablet	G	
metoclopramide hcl oral	G	
ondansetron hcl oral solution	G	QL (4 ML per 1 day)
ondansetron hcl oral tablet 4 mg, 8 mg	G	
ondansetron odt	G	
perphenazine oral	G	
prochlorperazine	G	
prochlorperazine maleate oral	G	
REGLAN	NPB	
scopolamine	G	
SYNDROS	NPB	PA; QL (4 ML per 1 day)
TRANSDERM-SCOP	NPB	
trimethobenzamide hcl oral	G	
VARUBI (180 MG DOSE)	NPB	QL (0.14 EA per 1 day)
<b>Antifungals</b>		
ANCOBON	NPB	
ciclodan	G	

Drug Name	Drug Tier	Restrictions / Limits
ciclopirox external	G	
ciclopirox olamine external	G	
clotrimazole external	G	
clotrimazole mouth/throat	G	
clotrimazole-betamethasone	G	
CRESEMBA ORAL	NPB	PA
DIFLUCAN	NPB	
econazole nitrate external	G	
fluconazole oral	G	
flucytosine oral	G	
griseofulvin microsize oral	G	
griseofulvin ultramicrosize	G	
GYNAZOLE-1	NPB	
itraconazole oral	G	PA
ketoconazole external cream	G	
ketoconazole external shampoo	G	
ketoconazole oral	G	
LOPROX EXTERNAL CREAM	NPB	
LOPROX EXTERNAL SHAMPOO	NPB	
LOPROX EXTERNAL SUSPENSION	NPB	
miconazole 3	G	
NOXAFIL ORAL SUSPENSION	NPB	PA
nyamyc	G	
nystatin external	G	
nystatin mouth/throat	G	
nystatin oral	G	
nystatin-triamcinolone	G	
nystop	G	
posaconazole	G	PA
SPORANOX	NPB	PA
tavaborole	G	PA
terbinafine hcl oral	G	QL (84 day supply per 180 days)
terconazole	G	
VFEND	NPB	PA
voriconazole oral	G	PA
VYTONE	NPB	
<b>Antigout Agents</b>		
allopurinol oral tablet 100 mg, 300 mg	G	M

Drug Name	Drug Tier	Restrictions / Limits
ALLOPURINOL ORAL TABLET 200 MG	NPB	M
colchicine oral tablet	G	
colchicine-probenecid	G	
febuxostat	G	ST; M
probenecid	G	M
ZYLOPRIM	NPB	M
<b>Antimigraine Agents</b>		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	PB	PA; M; QL (0.04 ML per 1 day)
AIMOVIG	PB	PA; M; QL (0.07 ML per 1 day)
AJOVY	PB	PA; M; QL (0.06 ML per 1 day)
CAFERGOT	NPB	PA; QL (0.86 EA per 1 day)
dihydroergotamine mesylate injection	G	PA; QL (0.86 ML per 1 day)
dihydroergotamine mesylate nasal	G	PA; QL (0.27 ML per 1 day)
eletriptan hydrobromide	G	QL (12 EA per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	PB	PA; M; QL (0.1 ML per 1 day)
ERGOMAR	NPB	PA; QL (0.72 EA per 1 day)
ergotamine-caffeine	G	PA; QL (0.86 EA per 1 day)
MIGERGOT	NPB	PA; QL (0.72 EA per 1 day)
MIGRANAL	NPB	PA; QL (0.27 ML per 1 day)
naratriptan hcl	G	QL (0.3 EA per 1 day)
NURTEC	PB	PA; QL (0.27 EA per 1 day)
QULIPTA	PB	PA; QL (1 EA per 1 day)
rizatriptan benzoate oral tablet 10 mg	G	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet 5 mg	G	QL (0.6 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 10 mg	G	QL (0.4 EA per 1 day)
rizatriptan benzoate oral tablet dispersible 5 mg	G	QL (0.6 EA per 1 day)
sumatriptan nasal	G	QL (0.4 EA per 1 day)
sumatriptan succinate oral	G	QL (0.3 EA per 1 day)
sumatriptan succinate refill subcutaneous solution cartridge	G	QL (0.17 ML per 1 day)
sumatriptan succinate subcutaneous	G	QL (0.17 ML per 1 day)
UBRELVY	PB	PA; QL (0.34 EA per 1 day)
zolmitriptan nasal solution 5 mg	G	QL (0.4 EA per 1 day)
zolmitriptan oral	G	QL (0.4 EA per 1 day)
<b>Antimyasthenic Agents</b>		
MESTINON ORAL SOLUTION	NPB	M

Drug Name	Drug Tier	Restrictions / Limits
MESTINON ORAL TABLET EXTENDED RELEASE	NPB	M
pyridostigmine bromide er	G	M
pyridostigmine bromide oral	G	M
<b>Antimycobacterials</b>		
cycloserine oral	G	
dapsone oral	G	
ethambutol hcl oral	G	
isoniazid oral	G	
MYAMBUTOL	NPB	
MYCOBUTIN	NPB	
PASER	NPB	
PRETOMANID	NPB	
PRIFTIN	NPB	
pyrazinamide oral	G	
rifabutin	G	
rifampin oral	G	
RIFAMPIN+SYRSPEND SF	NPB	
SIRTURO	NPB	
TRECTOR	NPB	
<b>Antineoplastics - Drugs for Cancer</b>		
abiraterone acetate	G-S	PA
ALECENSA	PB-S	PA
ALKERAN ORAL	PB-S	
ALUNBRIG ORAL TABLET 180 MG, 90 MG	PB-S	PA; QL (1 EA per 1 day)
ALUNBRIG ORAL TABLET 30 MG	PB-S	PA; QL (4 EA per 1 day)
ALUNBRIG ORAL TABLET THERAPY PACK	PB-S	PA; QL (30 EA per 365 days)
anastrozole oral	G	ACA
AROMASIN	PB	
AYVAKIT	PB-S	PA; QL (1 EA per 1 day)
BALVERSA	PB-S	PA
bexarotene	G-S	PA
bicalutamide	G	
BOSULIF	PB-S	PA
BRAFTOVI	PB-S	PA
BRUKINSA	PB-S	PA
CABOMETYX	PB-S	PA
CALQUENCE	PB-S	PA



Drug Name	Drug Tier	Restrictions / Limits
capecitabine	G-S	PA
CAPRELSA ORAL TABLET 100 MG	PB-S	PA; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	PB-S	PA
CASODEX	PB	
COMETRIQ	PB-S	PA
COPIKTRA	PB-S	PA
COTELLIC	PB-S	PA
cyclophosphamide injection	G-S	
cyclophosphamide oral capsule	G	
CYCLOPHOSPHAMIDE ORAL TABLET	PB	
DAURISMO	PB-S	PA
DROXIA	NPB	
EMCYT	PB	
ERIVEDGE	PB-S	PA
ERLEADA	PB-S	PA
erlotinib hcl oral tablet 100 mg, 150 mg	G-S	PA
erlotinib hcl oral tablet 25 mg	G-S	PA; QL (3 EA per 1 day)
etoposide oral	G-S	
EULEXIN	PB	
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	G-S	PA; QL (1 EA per 1 day)
everolimus oral tablet soluble	G-S	PA
exemestane	G	ACA
EXKIVITY	PB-S	PA
FARESTON	PB	
flutamide	G	
GAVRETO	PB-S	PA
GILOTRIF	PB-S	PA; QL (1 EA per 1 day)
GLEOSTINE	PB-S	
HYCAMTIN ORAL	PB-S	
HYDREA	PB	
hydroxyurea oral	G	
IBRANCE	PB-S	PA
ICLUSIG ORAL TABLET 10 MG, 15 MG	PB-S	PA; QL (1 EA per 1 day)
ICLUSIG ORAL TABLET 30 MG, 45 MG	PB-S	PA
IDHIFA	PB-S	PA; QL (1 EA per 1 day)
imatinib mesylate	G-S	PA
IMBRUVICA ORAL CAPSULE 140 MG	PB-S	PA; QL (3 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
IMBRUVICA ORAL CAPSULE 70 MG	PB-S	PA; QL (1 EA per 1 day)
IMBRUVICA ORAL SUSPENSION	PB-S	PA
IMBRUVICA ORAL TABLET	PB-S	PA; QL (1 EA per 1 day)
INLYTA	PB-S	PA
INREBIC	PB-S	PA
IRESSA	PB-S	PA
JAKAFI ORAL TABLET 10 MG, 5 MG	PB-S	PA; QL (2 EA per 1 day)
JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG	PB-S	PA
KISQALI FEMARA	PB-S	PA
KISQALI ORAL TABLET THERAPY PACK 200 MG	PB-S	PA
KOSELUGO	PB-S	PA
lapatinib ditosylate	G-S	PA
lenalidomide	G-S	PA
LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG	PB-S	PA
letrozole oral	G	
leucovorin calcium oral	G	
LEUKERAN	PB	
LONSURF	PB-S	PA
LORBRENA	PB-S	PA
LUMAKRAS	PB-S	PA
LYNPARZA	PB-S	PA
LYSODREN	PB	
MATULANE	PB-S	
MEKINIST	PB-S	PA
MEKTOVI	PB-S	PA
melphalan	G-S	
mercaptopurine oral	G	
MESNEX ORAL	PB-S	
MYLERAN	PB	
NERLYNX	PB-S	PA; QL (6 EA per 1 day)
NEXAVAR	PB-S	PA
NILANDRON	PB-S	
nilutamide	G-S	
NINLARO	PB-S	PA
NUBEQA	PB-S	PA

Drug Name	Drug Tier	Restrictions / Limits
ODOMZO	PB-S	PA
ONCASPAR	PB-S	
ONUREG	PB-S	PA
ORGOVYX	PB-S	PA
PANRETIN	NPB	
PIQRAY	PB-S	PA
POMALYST	PB-S	PA
PURIXAN	PB-S	
QINLOCK	PB-S	PA
RETEVMO	PB-S	PA
REVLIMID	PB-S	PA
ROZLYTREK	PB-S	PA
RYDAPT	PB-S	PA
SCEMBLIX ORAL TABLET 20 MG	PB-S	PA; QL (2 EA per 1 day)
SCEMBLIX ORAL TABLET 40 MG	PB-S	PA
SOLTAMOX	PB	ACA
sorafenib tosylate	G-S	PA
SPRYCEL	PB-S	PA
STIVARGA	PB-S	PA
sunitinib malate	G-S	PA
TABLOID	PB-S	
TABRECTA	PB-S	PA
TAFINLAR	PB-S	PA
TAGRISSE ORAL TABLET 40 MG	PB-S	PA; QL (1 EA per 1 day)
TAGRISSE ORAL TABLET 80 MG	PB-S	PA
tamoxifen citrate oral tablet 10 mg	G	
tamoxifen citrate oral tablet 20 mg	G	ACA
TARGRETIN EXTERNAL	NPB-S	PA
TASIGNA	PB-S	PA
temozolomide	G-S	PA
THALOMID	PB-S	PA
thiotepa injection	G-S	
TIBSOVO	PB-S	PA
toremifene citrate	G	
tretinoin oral	G-S	
TRUSELTIQ (100MG DAILY DOSE)	PB-S	PA
TRUSELTIQ (125MG DAILY DOSE)	PB-S	PA
TRUSELTIQ (50MG DAILY DOSE)	PB-S	PA

Drug Name	Drug Tier	Restrictions / Limits
TRUSELTIQ (75MG DAILY DOSE)	PB-S	PA
TUKYSA	PB-S	PA
TURALIO	PB-S	PA
VALCHLOR	NPB-S	PA
VENCLEXTA	PB-S	PA
VENCLEXTA STARTING PACK	PB-S	PA
VERZENIO	PB-S	PA
VITRAKVI	PB-S	PA
VIZIMPRO	PB-S	PA
VONJO	PB-S	PA
VOTRIENT	PB-S	PA
WELIREG	PB-S	PA
XALKORI	PB-S	PA
XOSPATA	PB-S	PA
XPOVIO (100 MG ONCE WEEKLY)	PB-S	PA
XPOVIO (40 MG ONCE WEEKLY)	PB-S	PA
XPOVIO (40 MG TWICE WEEKLY)	PB-S	PA
XPOVIO (60 MG ONCE WEEKLY)	PB-S	PA
XPOVIO (60 MG TWICE WEEKLY)	PB-S	PA
XPOVIO (80 MG ONCE WEEKLY)	PB-S	PA
XPOVIO (80 MG TWICE WEEKLY)	PB-S	PA
XTANDI	PB-S	PA
ZEJULA	PB-S	PA
ZELBORAF	PB-S	PA
ZOLINZA	PB-S	PA
ZYDELIG	PB-S	PA
ZYKADIA	PB-S	PA
<b>Antiparasitics</b>		
albendazole oral	G	PA
ALINIA ORAL SUSPENSION RECONSTITUTED	PB	
ARAKODA	NPB	
atovaquone	G	
atovaquone-proguanil hcl	G	
BENZNIDAZOLE	NPB	
BILTRICIDE	NPB	
chloroquine phosphate oral	G	
COARTEM	NPB	

Drug Name	Drug Tier	Restrictions / Limits
CROTAN	NPB	
DARAPRIM	NPB-S	PA
EGATEN	NPB	
EMVERM	PB	
hydroxychloroquine sulfate oral	G	M
IMPAVIDO	NPB	
ivermectin oral	G	PA; QL (20 EA per 1 fill)
KRINTAFEL	NPB	
LAMPIT	NPB	
lindane	G	
MALARONE	NPB	
malathion	G	
mefloquine hcl	G	
MEPRON	NPB	
NEBUPENT	NPB	
nitazoxanide oral	G	
OVIDE	NPB	
pentamidine isethionate	G	
permethrin external	G	
praziquantel oral	G	
primaquine phosphate	G	
pyrimethamine oral	G-S	PA
PYRIMETHAMINE-LEUCOVORIN	NPB	
QUALAQUIN	NPB	PA
quinine sulfate oral	G	PA
spinosad	G	
STROMECTOL	NPB	PA; QL (20 EA per 1 fill)
sulfurated lime	G	
<b>Antiparkinson Agents</b>		
amantadine hcl oral	G	M
APOKYN	NPB-S	PA; QL (3 ML per 1 day)
apomorphine hcl subcutaneous	G-S	PA; QL (3 ML per 1 day)
benztropine mesylate oral	G	
bromocriptine mesylate oral	G	
carbidopa oral	G	M
carbidopa-levodopa	G	M
carbidopa-levodopa er	G	M
carbidopa-levodopa-entacapone	G	M

Drug Name	Drug Tier	Restrictions / Limits
COMTAN	NPB	M
entacapone	G	M
INBRIJA	NPB-S	PA
KYNMOBI	NPB-S	PA; QL (5 EA per 1 day)
KYNMOBI TITRATION KIT	NPB-S	PA; QL (20 EA per 365 days)
MIRAPEX ER	NPB	M
NEUPRO	NPB	ST; M
NOURIANZ	NPB	PA
ONGENTYS	NPB	ST
PARLODEL	NPB	
pramipexole dihydrochloride	G	M
pramipexole dihydrochloride er	G	M
rasagiline mesylate oral	G	M
ropinirole hcl	G	M
ropinirole hcl er	G	M
RYTARY	NPB	ST; M
selegiline hcl oral	G	M
SINEMET	NPB	M
STALEVO 100	NPB	M
STALEVO 125	NPB	M
STALEVO 150	NPB	M
STALEVO 200	NPB	M
STALEVO 50	NPB	M
STALEVO 75	NPB	M
TASMAR	NPB	M
tolcapone	G	M
trihexyphenidyl hcl	G	
<b>Antiplatelets</b>		
aspirin-dipyridamole er	G	M
BRILINTA	PB	M
CABLIVI	NPB-S	PA; QL (1 EA per 1 day)
cilostazol	G	M
clopidogrel bisulfate oral	G	M
dipyridamole oral	G	M
EFFIENT	NPB	M
prasugrel hcl	G	M
ZONTIVITY	NPB	M

Drug Name	Drug Tier	Restrictions / Limits
<b>Antipsychotics - Drugs for Mood Disorders</b>		
ABILIFY MAINTENA	NPB	
ADASUVE	NPB	PA
aripiprazole oral solution	G	QL (25 ML per 1 day)
aripiprazole oral tablet	G	QL (1 EA per 1 day)
aripiprazole oral tablet dispersible	G	QL (2 EA per 1 day)
ARISTADA	NPB	
ARISTADA INITIO	NPB	
asenapine maleate	G	QL (2 EA per 1 day)
CAPLYTA	NPB	ST; QL (1 EA per 1 day)
chlorpromazine hcl oral	G	
clozapine oral tablet 100 mg, 25 mg	G	QL (9 EA per 1 day)
clozapine oral tablet 200 mg	G	QL (4 EA per 1 day)
clozapine oral tablet 50 mg	G	QL (6 EA per 1 day)
clozapine oral tablet dispersible 100 mg, 25 mg	G	QL (9 EA per 1 day)
clozapine oral tablet dispersible 12.5 mg	G	QL (3 EA per 1 day)
clozapine oral tablet dispersible 150 mg	G	QL (6 EA per 1 day)
clozapine oral tablet dispersible 200 mg	G	QL (4 EA per 1 day)
CLOZARIL ORAL TABLET 100 MG, 25 MG	NPB	QL (9 EA per 1 day)
CLOZARIL ORAL TABLET 200 MG	NPB	QL (4 EA per 1 day)
CLOZARIL ORAL TABLET 50 MG	NPB	QL (6 EA per 1 day)
FANAPT	NPB	ST; QL (2 EA per 1 day)
FANAPT TITRATION PACK	NPB	ST; QL (8 EA per 180 days)
fluphenazine hcl	G	
GEODON INTRAMUSCULAR	NPB	
HALDOL DECANOATE	NPB	
haloperidol decanoate intramuscular	G	
haloperidol lactate oral	G	
haloperidol oral	G	
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 1.5 MG, 3 MG, 9 MG	NPB	QL (1 EA per 1 day)
INVEGA ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	NPB	QL (2 EA per 1 day)
INVEGA SUSTENNA	NPB	
INVEGA TRINZA	NPB	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	NPB	QL (1 EA per 1 day)
LATUDA ORAL TABLET 80 MG	NPB	QL (2 EA per 1 day)
loxapine succinate	G	

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Drug Name	Drug Tier	Restrictions / Limits
molindone hcl	G	
NUPLAZID	NPB	PA
olanzapine oral	G	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	G	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	G	QL (2 EA per 1 day)
PERSERIS	NPB	
pimozide	G	
quetiapine fumarate er	G	QL (2 EA per 1 day)
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 50 mg	G	QL (3 EA per 1 day)
quetiapine fumarate oral tablet 300 mg, 400 mg	G	QL (2 EA per 1 day)
REXULTI	NPB	QL (1 EA per 1 day)
RISPERDAL CONSTA	NPB	
risperidone oral solution	G	QL (8 ML per 1 day)
risperidone oral tablet	G	QL (2 EA per 1 day)
risperidone oral tablet dispersible	G	QL (2 EA per 1 day)
thioridazine hcl oral	G	
thiothixene	G	
trifluoperazine hcl	G	
VERSACLOZ	NPB	QL (18 ML per 1 day)
VRAYLAR ORAL CAPSULE	NPB	QL (1 EA per 1 day)
VRAYLAR ORAL CAPSULE THERAPY PACK	NPB	QL (14 EA per 365 days)
ziprasidone hcl	G	QL (2 EA per 1 day)
ziprasidone mesylate	G	
ZYPREXA RELPREVV	NPB	
ZYPREXA ZYDIS	NPB	QL (1 EA per 1 day)
<b>Antivirals</b>		
abacavir sulfate	G	
abacavir sulfate-lamivudine	G	
acyclovir external ointment	G	
acyclovir oral	G	
adefovir dipivoxil	G-S	
APTIVUS	PB	
atazanavir sulfate	G	
BARACLUDE ORAL SOLUTION	NPB-S	QL (630 ML per 30 days)
BIKTARVY	NPB	
CIMDUO	PB	



Drug Name	Drug Tier	Restrictions / Limits
COMBIVIR	NPB	
COMPLERA	PB	
DELSTRIGO	NPB	
DOVATO	PB	
EDURANT	PB	
efavirenz	G	
efavirenz-emtricitab-tenofovir oral tablet 600-200-300 mg	G	
efavirenz-lamivudine-tenofovir	G	
emtricitabine	G	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg	G	
emtricitabine-tenofovir df oral tablet 200-300 mg	G	ACA
EMTRIVA ORAL CAPSULE	NPB	
EMTRIVA ORAL SOLUTION	PB	
entecavir	G-S	QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 150-37.5 MG	PB-S	PA; QL (1 EA per 1 day)
EPCLUSA ORAL PACKET 200-50 MG	PB-S	PA; QL (2 EA per 1 day)
EPCLUSA ORAL TABLET	PB-S	PA; QL (1 EA per 1 day)
EPIVIR	NPB	
EPIVIR HBV ORAL SOLUTION	PB-S	
EPIVIR HBV ORAL TABLET	NPB-S	
EPZICOM	NPB	
etravirine	G	
EVOTAZ	PB	
famciclovir oral	G	
FAVIPIRAVIR	NPB	
fosamprenavir calcium	G	
FUZEON	PB	
GENVOYA	NPB	
HARVONI ORAL PACKET 33.75-150 MG	PB-S	PA; QL (1 EA per 1 day)
HARVONI ORAL PACKET 45-200 MG	PB-S	PA; QL (2 EA per 1 day)
HARVONI ORAL TABLET 45-200 MG	PB-S	PA; QL (2 EA per 1 day)
HARVONI ORAL TABLET 90-400 MG	PB-S	PA; QL (1 EA per 1 day)
HEPSERA ORAL TABLET 10 MG	NPB-S	
INTELENCE ORAL TABLET 100 MG, 200 MG	NPB	
INTELENCE ORAL TABLET 25 MG	PB	
INTRON A	NPB-S	PA
ISENTRESS	PB	

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Drug Name	Drug Tier	Restrictions / Limits
ISENTRESS HD	PB	
JULUCA	PB	
KALETRA	NPB	
LAGEVRIO	NPB	QL (8 EA per 1 day)
lamivudine oral solution	G	
lamivudine oral tablet 100 mg	G-S	
lamivudine oral tablet 150 mg, 300 mg	G	
lamivudine-zidovudine	G	
LEXIVA ORAL SUSPENSION	PB	
LEXIVA ORAL TABLET	NPB	
LIVTENCITY	NPB-S	PA
lopinavir-ritonavir	G	
maraviroc	G	PA
MAVYRET ORAL PACKET	PB-S	PA; QL (5 EA per 1 day)
MAVYRET ORAL TABLET	PB-S	PA; QL (3 EA per 1 day)
nevirapine	G	
nevirapine er	G	
NORVIR ORAL PACKET	PB	
NORVIR ORAL SOLUTION	PB	
NORVIR ORAL TABLET	NPB	
ODEFSEY	NPB	
oseltamivir phosphate oral capsule 30 mg	G	QL (40 EA per 365 days)
oseltamivir phosphate oral capsule 45 mg, 75 mg	G	QL (20 EA per 365 days)
oseltamivir phosphate oral suspension reconstituted	G	QL (360 ML per 365 days)
PAXLOVID (150/100)	NPB	QL (4 EA per 1 day)
PAXLOVID (300/100)	NPB	QL (6 EA per 1 day)
PEGASYS	PB-S	PA
PIFELTRO	NPB	
PREVYMIS ORAL	NPB-S	PA
PREZCOBIX	PB	
PREZISTA	PB	
RELENZA DISKHALER	NPB	QL (40 EA per 365 days)
RETROVIR ORAL	NPB	
REYATAZ ORAL CAPSULE	NPB	
REYATAZ ORAL PACKET	PB	
ribavirin inhalation	G	
ribavirin oral	G-S	

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Drug Name	Drug Tier	Restrictions / Limits
rimantadine hcl	G	
ritonavir	G	
RUKOBIA	PB	
SELZENTRY ORAL SOLUTION	PB	PA
SELZENTRY ORAL TABLET 150 MG, 300 MG	NPB	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	PB	PA
SOVALDI ORAL PACKET 150 MG	NPB-S	PA; QL (1 EA per 1 day)
SOVALDI ORAL PACKET 200 MG	NPB-S	PA; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 200 MG	NPB-S	PA; QL (2 EA per 1 day)
SOVALDI ORAL TABLET 400 MG	NPB-S	PA; QL (1 EA per 1 day)
stavudine	G	
STRIBILD	NPB	
SUSTIVA ORAL CAPSULE	NPB	
SYMFI	PB	
SYMFI LO	PB	
SYMTUZA	NPB	
tenofovir disoproxil fumarate	G	ACA
TIVICAY	PB	
TIVICAY PD	PB	
TPOXX ORAL	NPB	
TRIUMEQ	PB	
TRIUMEQ PD	NPB	
TRIZIVIR	NPB	
TYBOST	PB	
valacyclovir hcl oral	G	QL (4 EA per 1 day)
valganciclovir hcl	G	
VIEKIRA PAK	NPB-S	PA; QL (4 EA per 1 day)
VIRACEPT	PB	
VIRAZOLE	NPB	
VIREAD ORAL POWDER	PB	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	PB	
VOSEVI	PB-S	PA; QL (1 EA per 1 day)
XOFLUZA (40 MG DOSE)	NPB	QL (2 EA per 365 days)
XOFLUZA (80 MG DOSE)	NPB	QL (2 EA per 365 days)
ZEPATIER	NPB-S	PA; QL (1 EA per 1 day)
ZIAGEN	NPB	
zidovudine	G	

Drug Name	Drug Tier	Restrictions / Limits
<b>Anxiolytics - Drugs for Anxiety</b>		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	G	QL (1 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 2 mg	G	QL (5 EA per 1 day)
alprazolam er oral tablet extended release 24 hour 3 mg	G	QL (3 EA per 1 day)
alprazolam intensol	G	QL (10 ML per 1 day)
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg	G	QL (4 EA per 1 day)
alprazolam oral tablet 2 mg	G	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg	G	QL (1 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 2 mg	G	QL (5 EA per 1 day)
alprazolam xr oral tablet extended release 24 hour 3 mg	G	QL (3 EA per 1 day)
bupirone hcl oral	G	M
chlordiazepoxide hcl oral capsule 10 mg	G	QL (30 EA per 1 day)
chlordiazepoxide hcl oral capsule 25 mg	G	QL (12 EA per 1 day)
chlordiazepoxide hcl oral capsule 5 mg	G	QL (4 EA per 1 day)
clonazepam oral tablet 0.5 mg, 1 mg	G	QL (3 EA per 1 day)
clonazepam oral tablet 2 mg	G	QL (10 EA per 1 day)
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	G	QL (3 EA per 1 day)
clonazepam oral tablet dispersible 2 mg	G	QL (10 EA per 1 day)
clorazepate dipotassium oral tablet 15 mg	G	QL (6 EA per 1 day)
clorazepate dipotassium oral tablet 3.75 mg	G	QL (24 EA per 1 day)
clorazepate dipotassium oral tablet 7.5 mg	G	QL (12 EA per 1 day)
diazepam intensol	G	
diazepam oral	G	
DORAL	NPB	QL (1 EA per 1 day)
estazolam	G	QL (1 EA per 1 day)
HALCION	NPB	QL (2 EA per 1 day)
hydroxyzine hcl oral	G	
hydroxyzine pamoate oral	G	
lorazepam injection solution 2 mg/ml	G	
lorazepam intensol	G	QL (5 ML per 1 day)
lorazepam oral concentrate 2 mg/ml	G	QL (5 ML per 1 day)
lorazepam oral tablet 0.5 mg, 1 mg	G	QL (3 EA per 1 day)
lorazepam oral tablet 2 mg	G	QL (5 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
meprobamate	G	
oxazepam	G	QL (4 EA per 1 day)
quazepam	G	QL (1 EA per 1 day)
TRANXENE-T	NPB	QL (12 EA per 1 day)
triazolam	G	QL (2 EA per 1 day)
VISTARIL	NPB	
<b>Bipolar Agents - Drugs for Mood Disorders</b>		
EQUETRO	NPB	
lithium carbonate er	G	
lithium carbonate oral	G	
<b>Blood Products and Modifiers - Drugs for Blood Disorders</b>		
AGRYLIN	NPB	M
AMICAR	NPB	
aminocaproic acid oral	G	
anagrelide hcl	G	M
ASTRINGYN	NPB	
DOPTELET	NPB-S	PA
LEUKINE	NPB-S	PA
LYSTEDA	NPB	
MULPLETA	PB-S	PA
PROMACTA	NPB-S	PA
PYRUKYND	NPB-S	PA; QL (2 EA per 1 day)
PYRUKYND TAPER PACK	NPB-S	PA; QL (1 EA per 1 day)
RETACRIT INJECTION SOLUTION 10000 UNIT/ML	PB-S	PA
TAVALISSE	NPB-S	PA
THROMBIN-JMI	NPB	
THROMBIN-JMI EPISTAXIS	NPB	
THROMBOGEN	NPB	
tranexamic acid oral	G	
<b>Cardiovascular Agents - Drugs for Heart and Circulation Conditions</b>		
ACCUPRIL	NPB	M
ACCURETIC	NPB	M
acebutolol hcl oral	G	M
acetazolamide sodium	G	
ALDACTAZIDE	NPB	M
ALDACTONE	NPB	M

Drug Name	Drug Tier	Restrictions / Limits
aliskiren fumarate	G	M
amiloride hcl oral	G	M
amiloride-hydrochlorothiazide	G	M
amiodarone hcl oral	G	M
AMLODIPINE BES+SYRSPEND SF	NPB	M
amlodipine besylate oral	G	M
amlodipine besylate-benazepril hcl	G	M
amlodipine besylate-valsartan	G	M
amlodipine-atorvastatin	G	M
amlodipine-olmesartan	G	M
amlodipine-valsartan-hctz	G	M
ATACAND HCT	NPB	M
atenolol oral	G	M
ATENOLOL+SYRSPEND SF	NPB	M
atenolol-chlorthalidone	G	M
atorvastatin calcium oral tablet 10 mg, 20 mg	G	M; ACA
atorvastatin calcium oral tablet 40 mg, 80 mg	G	M
AVALIDE	NPB	M
benazepril hcl oral	G	M
benazepril-hydrochlorothiazide	G	M
BETAPACE AF	NPB	M
betaxolol hcl oral	G	M
BIDIL	NPB	M
bisoprolol fumarate oral	G	M
bisoprolol-hydrochlorothiazide	G	M
bumetanide oral	G	M
BUMEX	NPB	M
CALAN SR	NPB	M
candesartan cilexetil	G	M
candesartan cilexetil-hctz	G	M
captopril oral	G	M
CARDIZEM	NPB	M
CARDURA	NPB	M
cartia xt	G	M
carvedilol	G	M
chlorthalidone	G	M
cholestyramine light	G	M
cholestyramine oral	G	M

Drug Name	Drug Tier	Restrictions / Limits
clonidine hcl oral	G	M
colesevelam hcl oral tablet	G	M
colestipol hcl	G	M
CORLANOR ORAL SOLUTION	NPB	PA; M; QL (15 ML per 1 day)
CORLANOR ORAL TABLET	NPB	PA; M; QL (2 EA per 1 day)
DEMSER	NPB	PA; QL (16 EA per 1 day)
DIBENZYLINE	NPB	PA
digitek	G	M
digoxin oral	G	M
diltiazem hcl er beads	G	M
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg	G	M
diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg	G	M
diltiazem hcl er oral capsule extended release 24 hour	G	M
diltiazem hcl oral	G	M
dilt-xr	G	M
disopyramide phosphate	G	M
DIURIL	NPB	M
dofetilide	G	
doxazosin mesylate oral	G	M
DYRENIUM	NPB	M
EDARBI	NPB	ST; M
EDARBYCLOR	NPB	ST; M
EDECLIN	NPB	M
enalapril maleate oral tablet	G	M
enalapril-hydrochlorothiazide	G	M
ENTRESTO	PB	M; QL (2 EA per 1 day)
epiprenone	G	M
ethacrynic acid	G	M
ezetimibe	G	M
ezetimibe-simvastatin	G	M
felodipine er	G	M
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	G	M
fenofibrate oral capsule 134 mg, 200 mg, 67 mg	G	M
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	G	M

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Drug Name	Drug Tier	Restrictions / Limits
fenofibric acid oral capsule delayed release	G	M
flecainide acetate	G	M
fosinopril sodium	G	M
fosinopril sodium-hctz	G	M
FUROSCIX	NPB	M
furosemide oral	G	M
gemfibrozil oral	G	M
GONITRO	NPB	M
guanfacine hcl	G	M
HEMANGEOL	NPB	M
hydralazine hcl injection	G	M
hydralazine hcl oral	G	M
hydrochlorothiazide oral	G	M
icosapent ethyl	G	M
indapamide	G	M
INSPRA	NPB	M
irbesartan	G	M
irbesartan-hydrochlorothiazide	G	M
ISORDIL TITRADOSE	NPB	M
isosorb dinitrate-hydralazine	G	M
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	G	M
isosorbide mononitrate	G	M
isosorbide mononitrate er	G	M
isradipine	G	M
JUXTAPID ORAL CAPSULE 10 MG, 5 MG	NPB-S	PA; QL (1 EA per 1 day)
JUXTAPID ORAL CAPSULE 20 MG, 30 MG	NPB-S	PA; QL (2 EA per 1 day)
labetalol hcl oral	G	M
LANOXIN ORAL	PB	M
lisinopril oral	G	M
lisinopril-hydrochlorothiazide	G	M
LOPID	NPB	M
LOPRESSOR	NPB	M
losartan potassium oral	G	M
losartan potassium-hctz	G	M
LOTENSIN	NPB	M
LOTENSIN HCT	NPB	M
lovastatin oral	G	M; ACA



Drug Name	Drug Tier	Restrictions / Limits
MAXZIDE	NPB	M
MAXZIDE-25	NPB	M
metolazone	G	M
metoprolol succinate er	G	M
metoprolol tartrate oral	G	M
metoprolol-hydrochlorothiazide	G	M
metyrosine	G	PA; QL (16 EA per 1 day)
mexiletine hcl oral	G	M
midodrine hcl	G	
MINIPRESS	NPB	M
minoxidil oral	G	M
moexipril hcl	G	M
MULTAQ	NPB	M
nadolol oral	G	M
NEXLETOL	PB	PA; QL (1 EA per 1 day)
NEXLIZET	PB	PA; QL (1 EA per 1 day)
niacin er (antihyperlipidemic)	G	M
nifedipine er	G	M
nifedipine er osmotic release	G	M
nifedipine oral	G	M
nimodipine oral	G	
NITRO-BID	NPB	M
nitroglycerin sublingual	G	M
nitroglycerin transdermal	G	M
nitroglycerin translingual	G	M
NITROLINGUAL	NPB	M
NITROMIST	NPB	M
NORLIQVA	NPB	M
NORPACE	NPB	M
NORPACE CR	PB	M
NYMALIZE	NPB	
olmesartan medoxomil oral	G	M
olmesartan medoxomil-hctz	G	M
olmesartan-amlodipine-hctz	G	M
omega-3-acid ethyl esters	G	M
PACERONE	NPB	M
pentoxifylline er	G	M
perindopril erbumine	G	M

Drug Name	Drug Tier	Restrictions / Limits
phenoxybenzamine hcl oral	G	PA
pindolol	G	M
pravastatin sodium	G	M
prazosin hcl oral	G	M
PRESTALIA	NPB	M
prevalite	G	M
procainamide hcl injection solution 100 mg/ml	G	
propafenone hcl	G	M
propafenone hcl er	G	M
propranolol hcl er	G	M
propranolol hcl oral	G	M
quinapril hcl	G	M
quinapril-hydrochlorothiazide	G	M
quinidine gluconate er	G	M
quinidine sulfate	G	M
ramipril	G	M
ranolazine er	G	M
RECTIV	NPB	
REPATHA	PB	PA; QL (0.11 ML per 1 day)
REPATHA PUSHTRONEX SYSTEM	PB	PA; QL (0.13 ML per 1 day)
REPATHA SURECLICK	PB	PA; QL (0.11 ML per 1 day)
rosuvastatin calcium	G	M
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	G	M; ACA
simvastatin oral tablet 80 mg	G	M
sorine	G	M
sotalol hcl (af)	G	M
sotalol hcl oral	G	M
SOTYLIZE	NPB	M
spironolactone oral	G	M
spironolactone-hctz	G	M
taztia xt	G	M
TEKTURNA	PB	M
TEKTURNA HCT	PB	ST; M
telmisartan	G	M
telmisartan-amlodipine	G	M
telmisartan-hctz	G	M
TENORETIC 100	NPB	M

Drug Name	Drug Tier	Restrictions / Limits
TENORETIC 50	NPB	M
THALITONE	NPB	M
tiadylt er	G	M
TIAZAC	NPB	M
timolol maleate oral	G	M
torseamide	G	M
trandolapril	G	M
trandolapril-verapamil hcl er	G	M
triamterene oral	G	M
triamterene-hctz	G	M
TRILIPIX	NPB	M
valsartan oral tablet	G	M
valsartan-hydrochlorothiazide	G	M
VASCEPA	PB	M
VASERETIC	NPB	M
VECAMYL	NPB	
verapamil hcl er	G	M
verapamil hcl oral	G	M
VERELAN	NPB	M
VERELAN PM	NPB	M
VERQUVO	NPB	PA; QL (1 EA per 1 day)
VYNDAMAX	NPB-S	PA; QL (1 EA per 1 day)
VYNDAQEL	NPB-S	PA; QL (4 EA per 1 day)
ZIAC	NPB	M
<b>Central Nervous System Agents - Drugs for Attention Deficit Disorder</b>		
amphetamine sulfate	G	QL (6 EA per 1 day)
amphetamine-dextroamphetamine er	G	QL (2 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	G	QL (3 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 30 mg	G	QL (2 EA per 1 day)
APTENSIO XR	NPB	ST; QL (1 EA per 1 day)
atomoxetine hcl	G	QL (1 EA per 1 day)
AZSTARYS	NPB	ST; QL (1 EA per 1 day)
clonidine hcl er oral tablet extended release 12 hour	G	
dexmethylphenidate hcl	G	QL (2 EA per 1 day)
dexmethylphenidate hcl er	G	QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	G	QL (6 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	G	QL (4 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	G	QL (3 EA per 1 day)
dextroamphetamine sulfate oral solution	G	QL (60 ML per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	G	QL (6 EA per 1 day)
dextroamphetamine sulfate oral tablet 15 mg, 20 mg, 5 mg	G	QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 30 mg	G	QL (2 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 10 MG, 5 MG	NPB	QL (3 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 15 MG, 20 MG	NPB	QL (2 EA per 1 day)
guanfacine hcl er	G	
JORNAY PM	NPB	ST; QL (1 EA per 1 day)
KAPVAY	NPB	ST
METHYLIN ORAL SOLUTION 10 MG/5ML	NPB	ST; QL (30 ML per 1 day)
METHYLIN ORAL SOLUTION 5 MG/5ML	NPB	ST; QL (60 ML per 1 day)
methylphenidate	G	QL (1 EA per 1 day)
methylphenidate hcl er (cd)	G	
methylphenidate hcl er (la)	G	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg	G	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	G	QL (2 EA per 1 day)
methylphenidate hcl er (xr)	G	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg	G	QL (2 EA per 1 day)
methylphenidate hcl er oral tablet extended release 20 mg	G	QL (3 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg	G	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 36 mg	G	QL (2 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5ml	G	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	G	QL (60 ML per 1 day)
methylphenidate hcl oral tablet	G	QL (3 EA per 1 day)
methylphenidate hcl oral tablet chewable 10 mg	G	QL (6 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	G	QL (3 EA per 1 day)
PROCENTRA	NPB	ST; QL (60 ML per 1 day)
VYVANSE	PB	QL (1 EA per 1 day)
<b>Central Nervous System Agents - Drugs for Multiple Sclerosis</b>		
AMPYRA	NPB-S	PA; QL (2 EA per 1 day)
AUBAGIO	NPB-S	PA; QL (1 EA per 1 day)
AVONEX PEN	PB-S	PA; QL (0.04 EA per 1 day)
AVONEX PREFILLED	PB-S	PA; QL (0.04 EA per 1 day)
BAFIERTAM	PB-S	PA; QL (4 EA per 1 day)
BETASERON	PB-S	PA; QL (0.5 EA per 1 day)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	PB-S	PA; QL (1 ML per 1 day)
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	PB-S	PA; QL (0.43 ML per 1 day)
dalfampridine er	G-S	PA; QL (2 EA per 1 day)
dimethyl fumarate oral	G-S	PA; QL (2 EA per 1 day)
dimethyl fumarate starter pack	G-S	PA; QL (120 EA per 365 days)
fingolimod hcl	G-S	PA; QL (1 EA per 1 day)
GILENYA	NPB-S	PA; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	G-S	PA; QL (1 ML per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	G-S	PA; QL (0.43 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 20 mg/ml	G-S	PA; QL (1 ML per 1 day)
glatopa subcutaneous solution prefilled syringe 40 mg/ml	G-S	PA; QL (0.43 ML per 1 day)
KESIMPTA	PB-S	PA; QL (0.02 ML per 1 day)
MAVENCLAD	NPB-S	PA
MAYZENT ORAL TABLET 0.25 MG	NPB-S	PA; QL (4 EA per 1 day)
MAYZENT ORAL TABLET 1 MG, 2 MG	NPB-S	PA; QL (1 EA per 1 day)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG	NPB-S	PA; QL (14 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG	NPB-S	PA; QL (24 EA per 365 days)
VUMERITY	PB-S	PA; QL (4 EA per 1 day)
ZEPOSIA	NPB-S	PA; QL (1 EA per 1 day)
ZEPOSIA 7-DAY STARTER PACK	NPB-S	PA; QL (14 EA per 365 days)
ZEPOSIA STARTER KIT	NPB-S	PA; QL (74 EA per 365 days)

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Drug Name	Drug Tier	Restrictions / Limits
<b>Central Nervous System Agents - Miscellaneous</b>		
AMVUTTRA	NPB-S	PA
AUSTEDO	NPB-S	PA; QL (4 EA per 1 day)
benzphetamine hcl	G	PA
caffeine citrate oral	G	
diethylpropion hcl er	G	PA
diethylpropion hcl oral	G	PA
GRALISE ORAL	NPB	ST; QL (66 EA per 365 days)
GRALISE ORAL TABLET 300 MG	NPB	ST; QL (6 EA per 1 day)
GRALISE ORAL TABLET 600 MG	NPB	ST; QL (3 EA per 1 day)
HORIZANT	NPB	PA; QL (2 EA per 1 day)
INGREZZA ORAL CAPSULE	NPB-S	PA; QL (1 EA per 1 day)
INGREZZA ORAL CAPSULE THERAPY PACK	NPB-S	PA; QL (56 EA per 365 days)
LOMAIRA	NPB	PA
NEURAPTINE	NPB	
NUEDEXTA	NPB	PA
phendimetrazine tartrate	G	PA
phendimetrazine tartrate er	G	PA
phentermine hcl oral	G	PA
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg	G	QL (3 EA per 1 day)
pregabalin oral capsule 300 mg	G	QL (2 EA per 1 day)
pregabalin oral solution	G	QL (30 ML per 1 day)
QSYMIA	NPB	PA
RADICAVA ORS	NPB-S	PA
RADICAVA ORS STARTER KIT	NPB-S	PA
RILUTEK	NPB	PA; QL (2 EA per 1 day)
riluzole	G	PA; QL (2 EA per 1 day)
SAVELLA	NPB	ST; M; QL (2 EA per 1 day)
SAVELLA TITRATION PACK	NPB	ST; M; QL (110 EA per 365 days)
SAXENDA	NPB	PA
TEGSEDI	NPB-S	PA
tetrabenazine	G-S	PA
TIGLUTIK	NPB	PA; QL (20 ML per 1 day)
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.25 MG/0.5ML, 0.5 MG/0.5ML, 1 MG/0.5ML	NPB	PA; QL (0.08 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
WEGOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.7 MG/0.75ML, 2.4 MG/0.75ML	NPB	PA; QL (0.11 ML per 1 day)
XENICAL	NPB	PA
<b>Dental and Oral Agents - Drugs for Mouth and Throat Conditions</b>		
cavarest	G	M
cevimeline hcl	G	M
chlorhexidine gluconate mouth/throat	G	
CLINPRO 5000	NPB	M
DEBACTEROL	NPB	
DENTA 5000 PLUS	NPB	M
DENTAGEL	NPB	M
easygel	G	M
FIRST-MOUTHWASH BLM	NPB	
FLUORIDEX	NPB	M
fluoridex daily renewal	G	M
FLUORIDEX ENHANCED WHITENING	NPB	M
FLUORIDEX SENSITIVITY RELIEF	NPB	M
FLUORIMAX 5000	NPB	M
FLUORIMAX 5000 SENSITIVE	NPB	M
JUST RIGHT 5000	NPB	M
lidocaine viscous hcl	G	
NAFRINSE DAILY ACIDULATED	NPB	
NAFRINSE DAILY/NEUTRAL	NPB	M
NAFRINSE WEEKLY	NPB	M
oralone	G	
PERIDEX	NPB	
periogard	G	
pilocarpine hcl oral	G	
PREVIDENT	NPB	M
PREVIDENT 5000 BOOSTER PLUS	NPB	M
PREVIDENT 5000 DRY MOUTH	NPB	M
PREVIDENT 5000 ENAMEL PROTECT	NPB	M
PREVIDENT 5000 ORTHO DEFENSE	NPB	M
PREVIDENT 5000 PLUS	NPB	M
PREVIDENT 5000 SENSITIVE	NPB	M
REMESENSE	NPB	
SALAGEN	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
sf	G	M
sf 5000 plus	G	M
sodium fluoride 5000 enamel	G	M
sodium fluoride 5000 plus	G	M
sodium fluoride 5000 ppm	G	M
sodium fluoride 5000 sensitive	G	M
sodium fluoride dental	G	M
sodium fluoride mouth/throat	G	M
triamcinolone acetonide mouth/throat	G	
<b>Dermatological Agents - Drugs for Skin Conditions</b>		
A.A.G.C. KIT IN TERODERM	NPB	
ABSORICA LD	NPB	PA
accutane	G	PA
acitretin	G	
adapalene external cream	G	
adapalene external gel	G	
adapalene-benzoyl peroxide external gel	G	
ADBRY	PB-S	PA; QL (0.15 ML per 1 day)
ala-cort	G	
alclometasone dipropionate	G	
ALTRENO	NPB	
amcinonide external lotion	G	
ammonium lactate external	G	
amneesteem	G	PA
AMZEEQ	NPB	
AQUACEL AG BURN	NPB	
ATRALIN	NPB	
azelaic acid external	G	
B & C	NPB	
balsam peru-castor oil	G	
benzoyl peroxide-erythromycin	G	
betamethasone dipropionate aug	G	
betamethasone dipropionate external	G	
betamethasone valerate external	G	
BPCO	NPB	
calcipotriene external cream	G	
calcipotriene external ointment	G	



Drug Name	Drug Tier	Restrictions / Limits
calcipotriene external solution	G	
calcipotriene-betameth diprop external suspension	G	QL (4 GM per 1 day)
CALCITRENE	NPB	
calcitriol external	G	
CARAC	NPB	
CHLOHUX	NPB	
CIBINQO	PB-S	PA
claravis	G	PA
CLEOCIN-T	NPB	
clindacin etz external swab	G	
clindacin-p	G	
clindamycin phosphate-benzoyl peroxide	G	
clindamycin phosphate external gel	G	
clindamycin phosphate external lotion	G	
clindamycin phosphate external solution	G	
clindamycin phosphate external swab	G	
clindamycin-tretinoin	G	
CLINOIN	NPB	
clobetasol prop emollient base	G	
clobetasol propionate e	G	
clobetasol propionate external	G	
clodan external shampoo	G	
coal tar external	G	
CONDYLOX	NPB	
CORDRAN EXTERNAL OINTMENT	NPB	
DAZAVEIDAOXIA	NPB	
DERMA-SMOOTH/FS BODY	NPB	
DERMA-SMOOTH/FS SCALP	NPB	
desonide external cream	G	
desonide external lotion	G	
desonide external ointment	G	
DESOWEN	NPB	
desoximetasone external cream 0.25 %	G	
desoximetasone external gel	G	
desoximetasone external liquid	G	
desoximetasone external ointment 0.25 %	G	
diclofenac sodium external gel 3 %	G	ST; QL (10 GM per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
DIOOXIA	NPB	
DIPROLENE	NPB	
DOVONEX	NPB	
DRYSOL	NPB	
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 200 MG/1.14ML	PB-S	PA; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML	PB-S	PA; QL (0.29 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	PB-S	PA; QL (0.05 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML	PB-S	PA; QL (0.17 ML per 1 day)
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML	PB-S	PA; QL (0.29 ML per 1 day)
EFUDEX	NPB	
ENOVARX-TRAMADOL	NPB	
EPIDUO FORTE	NPB	
EPIFOAM	NPB	
ery	G	
ERYGEL	NPB	
erythromycin external	G	
EUCRISA	PB	ST
FINACEA EXTERNAL FOAM	NPB	
FINACEA EXTERNAL GEL	NPB	ST
fluocinolone acetonide body	G	
fluocinolone acetonide external	G	
fluocinolone acetonide scalp	G	
fluocinonide emulsified base	G	
fluocinonide external	G	
FLUOROURACIL EXTERNAL CREAM 0.5 %	PB	
fluorouracil external cream 5 %	G	
fluorouracil external solution	G	
fluticasone propionate external	G	
GORDOFILM	NPB	
halobetasol propionate external cream	G	
halobetasol propionate external ointment	G	
HAXDRAX	NPB	
hydrocortisone butyrate external cream	G	
hydrocortisone butyrate external ointment	G	

Drug Name	Drug Tier	Restrictions / Limits
hydrocortisone butyrate external solution	G	
hydrocortisone external cream 1 %, 2.5 %	G	
hydrocortisone external lotion 2.5 %	G	
hydrocortisone external ointment 1 %, 2.5 %	G	
hydrocortisone valerate	G	
IDYYXIATAR	NPB	
imiquimod external cream 3.75 %	G	ST
imiquimod external cream 5 %	G	
imiquimod pump	G	ST
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	G	PA
ivermectin external cream	G	
KERALYT EXTERNAL SHAMPOO	NPB	
KLARON	NPB	
KLISYRI	NPB	ST
lactic acid e	G	
lactic acid external	G	
LUXIQ	NPB	
methoxsalen rapid	G	
METROCREAM	NPB	
METROLOTION	NPB	
metronidazole external	G	
MIRVASO	NPB	
mometasone furoate external	G	
myorisan	G	PA
NEO-SYNALAR EXTERNAL CREAM	NPB	
neuac external gel	G	
OLUX	NPB	
ONEXTON	NPB	
OXOPIDAXIAQUP	NPB	
PIDPROGTAR	NPB	
pimecrolimus	G	ST; QL (2 GM per 1 day)
podofilox external	G	
PODOXIA	NPB	
PODPROGTAR	NPB	
PODTAR	NPB	
PRAMOSONE EXTERNAL CREAM 1-1 %	NPB	
PRAMOSONE EXTERNAL LOTION	NPB	

Drug Name	Drug Tier	Restrictions / Limits
prednicarbate	G	
PROOXIA	NPB	
PROTOPIC	NPB	ST; QL (2 GM per 1 day)
PYROGALLIC ACID	NPB	
QBREXZA	NPB	QL (1 EA per 1 day)
QUIDROXZAR	NPB	
QUIHOXAXIA	NPB	
QUITAR	NPB	
REGENECARE	NPB	
REGRANEX	NPB	PA
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 % 0.08 %	PB	
RHOFADE	NPB	
rosadan external cream	G	
rosadan external gel	G	
SANTYL	NPB	QL (2 GM per 1 day)
selenium sulfide external lotion	G	
SOOLANTRA	NPB	
sulfacetamide sodium (acne)	G	
SYNALAR	NPB	
TACLONEX EXTERNAL SUSPENSION	NPB	QL (4 GM per 1 day)
tacrolimus external	G	QL (2 GM per 1 day)
tazarotene external cream	G	
tazarotene external gel	G	
TETPIDTAR	NPB	
TOPICORT EXTERNAL CREAM 0.25 %	NPB	
TOPICORT EXTERNAL GEL	NPB	
TOPICORT EXTERNAL OINTMENT	NPB	
tretinoin external	G	
triamcinolone acetonide external cream	G	
triamcinolone acetonide external lotion	G	
triamcinolone acetonide external ointment 0.025 % 0.1 %, 0.5 %	G	
triderm	G	
TRIDESILON	NPB	
TWYNEO	NPB	
urea external cream 47 %	G	
VENELEX	NPB	
VTAMA	NPB	PA

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Drug Name	Drug Tier	Restrictions / Limits
XALIX	NPB	
XERAC AC	NPB	
zenatane	G	PA
ZILXI	NPB	ST
<b>Diabetes - Antidiabetic Agents</b>		
acarbose oral	G	M
ACTOPLUS MET	NPB	M
AMARYL	NPB	M
BYDUREON BCISE AUTOINJECTOR	PB	PA; M; QL (0.15 ML per 1 day)
BYETTA 10 MCG PEN	PB	PA; M; QL (0.08 ML per 1 day)
BYETTA 5 MCG PEN	PB	PA; M; QL (0.04 ML per 1 day)
CYCLOSET	NPB	ST; M
DUETACT	NPB	M
FARXIGA	PB	ST; M
glimepiride	G	M
glipizide er	G	M
glipizide ir	G	M
glipizide xl	G	M
glipizide-metformin hcl	G	M
GLUCOTROL XL	NPB	M
glyburide micronized	G	M
glyburide oral	G	M
glyburide-metformin	G	M
GLYNASE	NPB	M
GLYXAMBI	PB	ST; M
JANUMET	PB	ST; M
JANUMET XR	PB	ST; M
JANUVIA	PB	ST; M
JARDIANCE	PB	ST; M
JENTADUETO	PB	ST; M
JENTADUETO XR	PB	ST; M
metformin hcl er	G	M
metformin hcl oral solution	G	M
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	G	M
miglitol	G	M
MOUNJARO	PB	PA; QL (0.08 ML per 1 day)
nateglinide	G	M

Drug Name	Drug Tier	Restrictions / Limits
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML	PB	PA; M; QL (0.06 ML per 1 day)
OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML, 8 MG/3ML	PB	PA; M; QL (0.11 ML per 1 day)
pioglitazone hcl	G	M
pioglitazone hcl-glimepiride	G	M
pioglitazone hcl-metformin hcl	G	M
repaglinide	G	M
RIOMET	NPB	ST; M
RYBELSUS ORAL TABLET 14 MG, 7 MG	PB	PA; M; QL (1 EA per 1 day)
RYBELSUS ORAL TABLET 3 MG	PB	PA; M; QL (60 EA per 365 days)
SOLIQUA	PB	ST; M; QL (0.6 ML per 1 day)
SYMLINPEN 120	NPB	PA; M
SYMLINPEN 60	NPB	PA; M
SYNJARDY	PB	ST; M
SYNJARDY XR	PB	ST; M
TRADJENTA	PB	ST
TRIJARDY XR	PB	ST
TRULICITY	PB	PA; M; QL (0.08 ML per 1 day)
VICTOZA	PB	PA; M; QL (0.3 ML per 1 day)
XIGDUO XR	PB	ST; M
XULTOPHY	NPB	ST; M; QL (0.5 ML per 1 day)
<b>Diabetes - Glucose Monitoring</b>		
CHEMSTRIP UGK	NPB	OTC
CONTOUR MONITOR KIT W/DEVICE	PB	OTC
CONTOUR NEXT EZ KIT W/DEVICE	PB	OTC
CONTOUR NEXT GEN MONITOR	PB	OTC
CONTOUR NEXT LINK KIT W/DEVICE	PB	OTC
CONTOUR NEXT MONITOR KIT W/DEVICE	PB	OTC
CONTOUR NEXT TEST STRIPS	PB	OTC; QL (10 EA per 1 day)
CONTOUR TEST STRIPS	PB	OTC; QL (10 EA per 1 day)
CVS KETONE CARE	NPB	OTC
DEXCOM G6 RECEIVER	PB	PA; QL (1 EA per 273 days)
DEXCOM G6 SENSOR	PB	PA; QL (0.1 EA per 1 day)
DEXCOM G6 TRANSMITTER	PB	PA; QL (1 EA per 63 days)
KETO-DIASTIX	NPB	OTC
<b>Diabetes - Glycemic Agents</b>		
BAQSIMI ONE PACK	PB	
BAQSIMI TWO PACK	PB	

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Drug Name	Drug Tier	Restrictions / Limits
diazoxide oral	G	M
glucagon emergency kit	G	
GLUCAGON EMERGENCY KIT	PB	
PROGLYCEM	NPB	M
ZEGALOGUE	PB	
<b>Diabetes - Insulins</b>		
AFREZZA	NPB	PA; M
BD ULTRA-FINE INSULIN SYRINGES	NPB	OTC
HUMALOG	PB	M
HUMALOG KWIKPEN	PB	M
HUMALOG MIX 50/50 KWIKPEN	PB	M
HUMALOG MIX 50/50 VIAL	PB	M
HUMALOG MIX 75/25 KWIKPEN	PB	M
HUMALOG MIX 75/25 VIAL	PB	M
HUMALOG U-100 JUNIOR KWIKPEN	PB	M
HUMULIN 70/30 KWIKPEN	PB	M; OTC
HUMULIN 70/30 VIAL	PB	M; OTC
HUMULIN N KWIKPEN	PB	M; OTC
HUMULIN N VIAL	PB	M; OTC
HUMULIN R U-500 KWIKPEN	PB	M
HUMULIN R U-500 VIAL	PB	M
HUMULIN R VIAL	PB	M; OTC
INSULIN SYRINGES 29G X 1/2" 0.3 ML	NPB	OTC
LANTUS SOLOSTAR	PB	M
LANTUS U-100 VIAL	PB	M
LYUMJEV KWIKPEN	PB	
LYUMJEV VIAL	PB	
TOUJEO MAX SOLOSTAR	PB	M
TOUJEO SOLOSTAR	PB	M
<b>Electrolytes / Minerals / Metals / Vitamins</b>		
ACTIVE FE	NPB	
adc/f (0.5mg/ml)	G	
ARGININE HCL INJECTION	NPB	
ATABEX OB	PB	
CALCIFOL	NPB	
CARBAGLU	NPB-S	PA
carglumic acid	G-S	PA
CENTRATEX	NPB	

Drug Name	Drug Tier	Restrictions / Limits
CHEMET	NPB	
corvita 150	G	
CORVITE 150 ORAL TABLET 150-1.25 MG	PB	
cyanocobalamin injection solution 1000 mcg/ml	G	M
deferasirox	G	PA
deferasirox granules	G	PA
deferiprone oral tablet 1000 mg	G	PA
DEXPANTHENOL INJECTION	NPB	
DODEX	NPB	M
DRISDOL	NPB	
EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ	NPB	M
effer-k oral tablet effervescent 25 meq	G	M
ELITE-OB	PB	
ergocalciferol oral capsule	G	
ferocon	G	
ferottrinsic	G	
FERRALET 90	NPB	
FERRIPROX ORAL SOLUTION	NPB	PA
FERRIPROX ORAL TABLET 1000 MG	NPB	PA
ferrocite plus	G	
FERRO-PLEX	NPB	
fluoritab	G	M; ACA
folic acid oral tablet 1 mg	G	M
FOLIVANE-F	NPB	
FOLIVANE-PLUS	NPB	
foltrin	G	
FUSION PLUS	NPB	
GALZIN	NPB	
GLUTATHIONE INJECTION SOLUTION 200 MG/ML	NPB	
GLYCINE INJECTION	NPB	
hematinic plus vit/minerals	G	
hematinic/folic acid	G	
HEMATOGEN FA	NPB	
HEMATRON-AF	NPB	
HEMOCYTE PLUS	NPB	
hemocyte-f	G	
hydroxocobalamin acetate	G	

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Drug Name	Drug Tier	Restrictions / Limits
ICAR-C PLUS	PB	
iferex 150 forte	G	
INTEGRA F	NPB	
INTEGRA PLUS	NPB	
iodine strong oral	G	
JADENU SPRINKLE	NPB	PA
klor-con	G	M
klor-con 10	G	M
klor-con m10	G	M
klor-con m15	G	M
klor-con m20	G	M
K-PHOS	NPB	
k-prime	G	M
k-tan plus	G	
levocarnitine oral solution	G	M
levocarnitine oral tablet	G	M
levocarnitine sf	G	M
LIPO	NPB	
LIPO-C	NPB	
LOKELMA	NPB	
LYSINE HCL INJECTION	NPB	
magnesium sulfate solution 50 % injection	G	
MAGNESIUM SULFATE SOLUTION 50 % INJECTION	NPB	
MEPHYTON	NPB	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	NPB	
MIFEPREX	NPB	
mifepristone	G	
M-NATAL PLUS	PB	
MULTIGEN	NPB	
MULTIGEN FOLIC	NPB	
MULTIGEN PLUS	NPB	
multi-vitamin/fluoride	G	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	G	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	NPB	

Drug Name	Drug Tier	Restrictions / Limits
multivitamin/fluoride tablet chewable 0.5 mg oral (rx)	G	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.5 MG ORAL (RX)	NPB	
multivitamin/fluoride tablet chewable 1 mg oral (rx)	G	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 1 MG ORAL (RX)	NPB	
multi-vitamin/fluoride/iron	G	
nafrinse	G	M; ACA
nafrinse drops	G	M; ACA
NASCOBAL	NPB	M
NEOKE ALCAR	NPB	
NEONATAL PLUS	PB	
NEPHRON FA	NPB	
NESTABS	PB	
NUTRIVIT	NPB	
ONE VITE WOMENS PLUS	PB	
ORACIT	NPB	
PHOSPHA 250 NEUTRAL	NPB	
phosphorous	G	
phospho-trin 250 neutral	G	
PHOSPHO-TRIN K500	NPB	
phytonadione oral	G	
poly-iron 150 forte	G	
polysaccharide iron forte	G	
POLY-VI-FLOR ORAL SUSPENSION	PB	
POLY-VI-FLOR/IRON ORAL SUSPENSION	PB	
potassium chloride crys er	G	M
potassium chloride er	G	M
potassium chloride oral packet	G	M
potassium chloride oral solution 40 meq/15ml (20%)	G	M
potassium chloride solution 20 meq/15ml (10%) oral	G	M
potassium citrate er	G	M
potassium citrate-citric acid	G	
prenatal oral tablet 27-1 mg	G	
prenatal plus vitamin/mineral	G	
prenatal vitamin plus low iron	G	

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Drug Name	Drug Tier	Restrictions / Limits
PRENATVITE PLUS	PB	
PRENATVITE RX	PB	
purevit dualfe plus	G	
RELNATE DHA	PB	
RENATABS WITH IRON	NPB	
SAMSCA	NPB-S	PA; QL (2 EA per 1 day)
se-tan plus	G	
sod citrate-citric acid	G	
sodium chloride injection	G	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	G	M; ACA
sodium fluoride oral tablet	G	M; ACA
sodium fluoride oral tablet chewable	G	M; ACA
sodium polystyrene sulfonate	G	
sps	G	
TARON FORTE	NPB	
TAURINE INJECTION	NPB	
tolvaptan	G-S	PA; QL (2 EA per 1 day)
TRI-AMINO	NPB	
tricitrates	G	
TRICON	NPB	
trientine hcl	G-S	PA
trigels-f forte	G	
TRINATE	PB	
TRI-VI-FLOR	PB	
TRI-VI-FLORO	PB	
tri-vite/fluoride	G	
UROCIT-K 10	NPB	M
UROCIT-K 15	NPB	M
UROCIT-K 5	NPB	M
VELTASSA	NPB	
VINATE ONE	PB	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	G	
vitamins acd-fluoride	G	
WESCAP-C DHA	PB	
WESCAP-PN DHA	PB	
WESNATE DHA	PB	
WESTAB PLUS	PB	

Drug Name	Drug Tier	Restrictions / Limits
WILZIN ORAL CAPSULE 25 MG	NPB	
<b>Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer</b>		
CYTOTEC	NPB	M
esomeprazole magnesium oral packet	G	M; QL (1 EA per 1 day)
famotidine oral suspension reconstituted	G	
misoprostol oral	G	M
NEXIUM ORAL PACKET	NPB	M; QL (1 EA per 1 day)
omeprazole oral capsule delayed release	G	M; QL (1 EA per 1 day)
pantoprazole sodium oral tablet delayed release	G	M; QL (1 EA per 1 day)
sucralfate oral tablet	G	M
<b>Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions</b>		
alose tron hcl	G	PA
alvimopan	G	
amoxicill-clarithro-lansopraz	G	
ANASPAZ	NPB	
ATROPEN	NPB	
atropine sulfate injection solution prefilled syringe 0.5 mg/5ml	G	
BILAC	NPB	
CHENODAL	NPB-S	PA
CLENPIQ	NPB	
constulose	G	
cromolyn sodium oral	G	
dicyclomine hcl oral	G	
diphenoxylate-atropine	G	
ED-SPAZ	NPB	
ENTEREG	NPB	
enulose	G	
GASTROCROM	NPB	
GATTEX	NPB-S	PA
gavilyte-c	G	ACA
gavilyte-g	G	ACA
generlac	G	
glycopyrrolate injection solution 1 mg/5ml, 4 mg/20ml	G	
glycopyrrolate oral solution	G	PA
glycopyrrolate oral tablet 1 mg, 2 mg	G	

Drug Name	Drug Tier	Restrictions / Limits
HELIDAC THERAPY	NPB	
hyoscyamine sulfate oral elixir	G	
hyoscyamine sulfate oral tablet	G	
hyoscyamine sulfate oral tablet dispersible	G	
hyoscyamine sulfate sl	G	
hyoscyamine sulfate sublingual	G	
hyosyne	G	
lactulose encephalopathy	G	
lactulose oral solution	G	
LINZESS	PB	ST; QL (1 EA per 1 day)
LOMOTIL	NPB	
loperamide hcl oral capsule	G	
methscopolamine bromide oral	G	
mineral oil heavy oral	G	
MOTEGRITY	NPB	ST; QL (1 EA per 1 day)
MYTESI	NPB	QL (2 EA per 1 day)
na sulfate-k sulfate-mg sulf	G	ACA
OMECLAMOX-PAK	PB	
OSCIMIN	NPB	
peg 3350-kcl-na bicarb-nacl	G	ACA
peg-3350/electrolytes	G	ACA
peg-3350/electrolytes/ascorbat	G	
peg-kcl-nacl-nasulf-na asc-c	G	
PEG-PREP	NPB	
PYLERA	PB	
RESTORA RX	NPB	
SEROSTIM	NPB-S	PA
SUPREP BOWEL PREP KIT	NPB	
SUTAB	NPB	
SYMPROIC	PB	ST; QL (1 EA per 1 day)
TALICIA	NPB	
URSO 250	NPB	M
URSO FORTE	NPB	M
ursodiol oral capsule 300 mg	G	M
ursodiol oral tablet	G	M
VIBERZI	NPB	PA; QL (2 EA per 1 day)
XERMELO	NPB-S	PA; QL (3 EA per 1 day)
ZORBTIVE	NPB-S	PA

Drug Name	Drug Tier	Restrictions / Limits
<b>Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment</b>		
CERDELGA	NPB-S	PA
CHOLBAM	NPB-S	PA
CREON	PB	
CYSTAGON	NPB-S	
EVRYSDI	NPB-S	PA; QL (8 ML per 1 day)
GALAFOLD	NPB-S	PA; QL (0.5 EA per 1 day)
miglustat	G-S	PA
MYALEPT	NPB-S	PA
nitisinone	G-S	PA
NITYR	NPB-S	PA
OCALIVA	NPB-S	PA; QL (1 EA per 1 day)
ORFADIN	NPB-S	PA
PALYNZIQ	NPB-S	PA
sapropterin dihydrochloride	G-S	PA
sodium phenylbutyrate oral tablet	G-S	PA
STRENSIQ	PB-S	PA
SUCRAID	NPB-S	
VOXZOGO	NPB-S	PA; QL (1 EA per 1 day)
XURIDEN	NPB-S	PA; QL (4 EA per 1 day)
ZENPEP	PB	
<b>Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions</b>		
bethanechol chloride oral	G	
calcium acetate (phos binder)	G	
calcium acetate oral tablet 667 mg	G	
darifenacin hydrobromide er	G	M
DEPEN TITRATABS	PB-S	M
DETROL	NPB	M
DETROL LA	NPB	M
DITROPAN XL	NPB	M
fesoterodine fumarate er	G	
flavoxate hcl	G	M
FOSRENOL	NPB	ST
GELNIQUE	NPB	ST; M
INTRAROSA	NPB	
lanthanum carbonate	G	
LITHOSTAT	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	PB	
oxybutynin chloride er	G	M
oxybutynin chloride oral	G	M
OXYTROL	NPB	ST; M; QL (0.29 EA per 1 day)
penicillamine oral tablet	G-S	M
phenazo oral tablet 200 mg	G	
phenazopyridine hcl oral tablet 100 mg, 200 mg	G	
PHOSLYRA	NPB	ST
RIMSO-50	NPB	
sevelamer carbonate	G	
sevelamer hcl	G	
solifenacin succinate	G	M
THIOLA	NPB-S	
THIOLA EC	NPB-S	
tiopronin	G-S	
tolterodine tartrate	G	M
tolterodine tartrate er	G	M
tropium chloride	G	M
tropium chloride er	G	M
VELPHORO	NPB	
<b>Genitourinary Agents - Drugs for Prostate Conditions</b>		
alfuzosin hcl er	G	M
dutasteride oral	G	M
dutasteride-tamsulosin hcl	G	M
finasteride oral tablet 5 mg	G	M
JALYN	NPB	M
PROSCAR	NPB	M
silodosin	G	M
tamsulosin hcl	G	M
terazosin hcl	G	M
<b>Hormonal Agents - Adrenal</b>		
dexamethasone intensol	G	
dexamethasone oral	G	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	G	
fludrocortisone acetate oral	G	M
HEXATRIONE	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
hydrocortisone oral	G	
MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG	NPB	
MEDROL ORAL TABLET 2 MG	PB	
MEDROL ORAL TABLET THERAPY PACK	NPB	
methylprednisolone oral	G	
PEDIAPRED	NPB	
prednisolone oral	G	
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	G	
prednisone intensol	G	
prednisone oral	G	
SOLU-CORTEF	NPB	
<b>Hormonal Agents - Men's Health</b>		
ANDRODERM	PB	PA
danazol oral	G	
METHITEST	NPB	PA
oxandrolone oral tablet 10 mg	G	PA; QL (2 EA per 1 day)
oxandrolone oral tablet 2.5 mg	G	PA; QL (8 EA per 1 day)
testosterone cypionate intramuscular	G	PA
testosterone enanthate intramuscular	G	PA
testosterone transdermal	G	PA
XYOSTED	NPB	PA
<b>Hormonal Agents - Pituitary</b>		
ACTHAR	PB-S	PA
cabergoline	G	M
cetorelix acetate	G-S	PA
CHORIONIC GONADOTROPIN INTRAMUSCULAR	NPB-S	PA
CLOMID	NPB	
clomiphene citrate oral	G	
CORTROPHIN	PB-S	PA
DDAVP ORAL	NPB	M
DDAVP PF	NPB	M
desmopressin ace spray refrig	G	M
desmopressin acetate injection	G	M
desmopressin acetate oral	G	M
desmopressin acetate pf	G	M
desmopressin acetate spray	G	M
EGRIFTA SV	NPB-S	PA; QL (1 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
ELIGARD SUBCUTANEOUS KIT 30 MG	NPB-S	PA; QL (0.009 EA per 1 day)
FIRMAGON	NPB-S	PA; QL (0.04 EA per 1 day)
FIRMAGON (240 MG DOSE)	NPB-S	PA; QL (2 EA per 365 days)
FOLLISTIM AQ	PB-S	PA
fyremadel	G-S	PA
ganirelix acetate	G-S	PA
INCRELEX	PB-S	PA
leuprolide acetate injection	G-S	PA
LEUPROLIDE ACETATE-BUPIVACAINE	NPB	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	NPB-S	PA
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 7.5 MG	PB-S	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	NPB-S	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 22.5 MG	PB-S	PA
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG	PB-S	PA
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG	PB-S	PA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG	NPB-S	PA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 15 MG, 7.5 MG	PB-S	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG (PED)	NPB-S	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG (PED)	PB-S	PA
MENOPUR	NPB-S	PA
NOCDURNA	NPB	M
NORDITROPIN FLEXPRO	PB-S	PA
NOVAREL	NPB-S	PA
NUTROPIN AQ NUSPIN 10	PB-S	PA
NUTROPIN AQ NUSPIN 20	PB-S	PA
NUTROPIN AQ NUSPIN 5	PB-S	PA
octreotide acetate	G-S	PA
ORILISSA ORAL TABLET 150 MG	PB	PA; QL (1 EA per 1 day)
ORILISSA ORAL TABLET 200 MG	PB	PA; QL (2 EA per 1 day)
OVIDREL	NPB-S	PA
PREGNYL	NPB-S	PA

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Drug Name	Drug Tier	Restrictions / Limits
SIGNIFOR LAR	NPB-S	PA; QL (0.04 EA per 1 day)
SOMATULINE DEPOT	NPB-S	PA
SOMAVERT	NPB-S	PA
SYNAREL	PB	
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG	NPB-S	PA; QL (0.012 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG	NPB-S	PA; QL (0.006 EA per 1 day)
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG	NPB-S	PA; QL (0.04 EA per 1 day)
TRIPTODUR	NPB-S	PA; QL (0.006 EA per 1 day)
<b>Hormonal Agents - Prostaglandins</b>		
KORLYM	NPB-S	PA; QL (4 EA per 1 day)
<b>Hormonal Agents - Selective Estrogen Receptor Modifying Agents</b>		
EVISTA	NPB	M
OSPHENA	NPB	
raloxifene hcl	G	M; ACA
<b>Hormonal Agents - Sex Hormones and Birth Control</b>		
ACTIVELLA	NPB	M
afirmelle	G	M; ACA
ALORA	NPB	M
altavera	G	M; ACA
alyacen 1/35	G	M; ACA
alyacen 7/7/7	G	M; ACA
amabelz	G	M
amethia	G	M; ACA; QL (1 EA per 1 day)
amethyst	G	M; ACA
ANGELIQ	NPB	M
ANNOVERA	NPB	ACA; QL (1 EA per 350 days)
apri	G	M; ACA
aranelle	G	M; ACA
ashlyna	G	M; ACA; QL (1 EA per 1 day)
aubra	G	M; ACA
aubra eq	G	M; ACA
aurovela 1.5/30	G	M; ACA
aurovela 1/20	G	M; ACA
aurovela 24 fe	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
aurovela fe 1.5/30	G	M; ACA
aurovela fe 1/20	G	M; ACA
aviane	G	M; ACA
AYGESTIN	NPB	M
ayuna	G	M; ACA
azurette	G	M; ACA
BALCOLTRA	NPB	M; ACA
balziva	G	M; ACA
BIJUVA	NPB	
blisovi 24 fe	G	M; ACA
blisovi fe 1.5/30	G	M; ACA
blisovi fe 1/20	G	M; ACA
briellyn	G	M; ACA
camila	G	M; ACA
camrese	G	M; ACA; QL (1 EA per 1 day)
camrese lo	G	M; ACA; QL (1 EA per 1 day)
charlotte 24 fe	G	M; ACA
chateal	G	M; ACA
chateal eq	G	M; ACA
CLIMARA PRO	PB	M
COMBIPATCH	NPB	M
CRINONE	NPB	QL (0.6 GM per 1 day)
cryselle-28	G	M; ACA
cyred	G	M; ACA
cyred eq	G	M; ACA
dasetta 1/35	G	M; ACA
dasetta 7/7/7	G	M; ACA
daysee	G	M; ACA; QL (1 EA per 1 day)
deblitane	G	M; ACA
DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML	NPB	
delyla	G	M; ACA
DEPO-ESTRADIOL	NPB	
DEPO-PROVERA	NPB	ACA; QL (0.02 ML per 1 day)
DEPO-SUBQ PROVERA 104	NPB	ACA; QL (0.02 ML per 1 day)
desogestrel-ethinyl estradiol	G	M; ACA
DIVIGEL	NPB	M
dolishale	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
dotti	G	M
drospiren-eth estrad-levomefol	G	M; ACA
drospirenone-ethinyl estradiol	G	M; ACA
DUAVEE	PB	
ELESTRIN	NPB	M
elinest	G	M; ACA
ELLA	NPB	ACA
eluryng	G	M; ACA
ENDOMETRIN	PB	
enpresse-28	G	M; ACA
enskyce	G	M; ACA
errin	G	M; ACA
estarylla	G	M; ACA
estradiol oral	G	M
estradiol transdermal	G	M
estradiol vaginal	G	M
estradiol valerate intramuscular	G	
estradiol-norethindrone acet	G	M
ESTRING	NPB	M; QL (0.012 EA per 1 day)
ESTROGEL	NPB	M
ethynodiol diac-eth estradiol	G	M; ACA
etonogestrel-ethinyl estradiol	G	M; ACA
EVAMIST	NPB	M
falmina	G	M; ACA
fayosim	G	M; ACA; QL (1 EA per 1 day)
FEMRING	NPB	M; QL (0.012 EA per 1 day)
femynor	G	M; ACA
finzala	G	M; ACA
FIRST-PROGESTERONE VGS	NPB	
fyavolv	G	M
gemmily	G	M; ACA
hailey 1.5/30	G	M; ACA
hailey 24 fe	G	M; ACA
hailey fe 1.5/30	G	M; ACA
hailey fe 1/20	G	M; ACA
heather	G	M; ACA
iclevia	G	M; ACA; QL (1 EA per 1 day)
IMVEXXY MAINTENANCE PACK	PB	M

Drug Name	Drug Tier	Restrictions / Limits
IMVEXXY STARTER PACK	PB	M
incassia	G	M; ACA
introvale	G	M; ACA; QL (1 EA per 1 day)
isibloom	G	M; ACA
jaimiess	G	M; ACA; QL (1 EA per 1 day)
jasmiel	G	M; ACA
jencycla	G	M; ACA
jinteli	G	M
jolessa	G	M; ACA; QL (1 EA per 1 day)
juleber	G	M; ACA
junel 1.5/30	G	M; ACA
junel 1/20	G	M; ACA
junel fe 1.5/30	G	M; ACA
junel fe 1/20	G	M; ACA
junel fe 24	G	M; ACA
kaitlib fe	G	M; ACA
kalliga	G	M; ACA
kariva	G	M; ACA
kelnor 1/35	G	M; ACA
kelnor 1/50	G	M; ACA
kurvelo	G	M; ACA
larin 1.5/30	G	M; ACA
larin 1/20	G	M; ACA
larin 24 fe	G	M; ACA
larin fe 1.5/30	G	M; ACA
larin fe 1/20	G	M; ACA
layolis fe	G	M; ACA
leena	G	M; ACA
lessina	G	M; ACA
levonest	G	M; ACA
levonorgest-eth est & eth est	G	M; ACA; QL (1 EA per 1 day)
levonorgest-eth estrad 91-day	G	M; ACA; QL (1 EA per 1 day)
levonorgestrel-ethinyl estrad	G	M; ACA
levonorg-eth estrad triphasic	G	M; ACA
levora 0.15/30 (28)	G	M; ACA
lojaimiess	G	M; ACA; QL (1 EA per 1 day)
loryna	G	M; ACA
LOSEASONIQUE	NPB	M; ACA; QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
low-ogestrel	G	M; ACA
lo-zumandimine	G	M; ACA
lutera	G	M; ACA
lyleq	G	M; ACA
lyllana	G	M
lyza	G	M; ACA
marlissa	G	M; ACA
medroxyprogesterone acetate intramuscular	G	ACA; QL (0.02 ML per 1 day)
medroxyprogesterone acetate oral	G	M
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml	G	
megestrol acetate oral suspension 625 mg/5ml	G	
megestrol acetate oral tablet	G	
MENEST	PB	M
MENOSTAR	NPB	M
merzee	G	M; ACA
microgestin 1.5/30	G	M; ACA
microgestin 1/20	G	M; ACA
microgestin 24 fe	G	M; ACA
microgestin fe 1.5/30	G	M; ACA
microgestin fe 1/20	G	M; ACA
mili	G	M; ACA
mimvey	G	M
MIRCETTE	NPB	M; ACA
mono-lynyah	G	M; ACA
MYFEMBREE	PB	PA; QL (1 EA per 1 day)
NATAZIA	PB	M; ACA
necon 0.5/35 (28)	G	M; ACA
nikki	G	M; ACA
nora-be	G	M; ACA
norethin ace-eth estrad-fe	G	M; ACA
norethindrone acetate oral	G	M
norethindrone acet-ethinyl est	G	M; ACA
norethindrone oral	G	M; ACA
norethindrone-eth estradiol	G	M
norethindron-ethinyl estrad-fe	G	M; ACA
norethin-eth estradiol-fe	G	M; ACA
norgestimate-eth estradiol	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
norgestimate-ethinyl estradiol triphasic	G	M; ACA
norlyroc	G	M; ACA
nortrel 0.5/35 (28)	G	M; ACA
nortrel 1/35 (21)	G	M; ACA
nortrel 1/35 (28)	G	M; ACA
nortrel 7/7/7	G	M; ACA
NUVARING	NPB	M; ACA
nylia 1/35	G	M; ACA
nylia 7/7/7	G	M; ACA
nymyo	G	M; ACA
ocella	G	M; ACA
ORIAHNN	PB	PA; QL (2 EA per 1 day)
philith	G	M; ACA
pimtrea	G	M; ACA
pirmella 1/35	G	M; ACA
pirmella 7/7/7	G	M; ACA
portia-28	G	M; ACA
PREFEST	NPB	M
PREMARIN ORAL	PB	M
PREMARIN VAGINAL	PB	M
PREMPHASE	PB	M
PREMPRO	PB	M
progesterone intramuscular	G	
progesterone oral	G	
PROVERA	NPB	M
QUARTETTE	NPB	M; ACA; QL (1 EA per 1 day)
reclipsen	G	M; ACA
rivelsa	G	M; ACA; QL (1 EA per 1 day)
setlakin	G	M; ACA; QL (1 EA per 1 day)
sharobel	G	M; ACA
simliya	G	M; ACA
simpesse	G	M; ACA; QL (1 EA per 1 day)
sprintec 28	G	M; ACA
sronyx	G	M; ACA
syeda	G	M; ACA
tarina 24 fe	G	M; ACA
tarina fe 1/20	G	M; ACA
tarina fe 1/20 eq	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
taysofy	G	M; ACA
TAYTULLA	NPB	M; ACA
tilia fe	G	M; ACA
tri femynor	G	M; ACA
tri-estarylla	G	M; ACA
tri-legest fe	G	M; ACA
tri-linyah	G	M; ACA
tri-lo-estarylla	G	M; ACA
tri-lo-marzia	G	M; ACA
tri-lo-mili	G	M; ACA
tri-lo-sprintec	G	M; ACA
tri-mili	G	M; ACA
tri-nymyo	G	M; ACA
tri-sprintec	G	M; ACA
trivora (28)	G	M; ACA
tri-vylibra	G	M; ACA
tri-vylibra lo	G	M; ACA
tyblume	G	M; ACA
tydemy	G	M; ACA
velivet	G	M; ACA
vestura	G	M; ACA
vienva	G	M; ACA
viorele	G	M; ACA
volnea	G	M; ACA
vyfemla	G	M; ACA
vylibra	G	M; ACA
wera	G	M; ACA
wymzya fe	G	M; ACA
xulane	G	M; ACA
yuvafem	G	M
zafemy	G	M; ACA
zovia 1/35 (28)	G	M; ACA
zumandimine	G	M; ACA
<b>Hormonal Agents - Thyroid</b>		
ARMOUR THYROID	NPB	ST; M
euthyrox oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	G	M



Drug Name	Drug Tier	Restrictions / Limits
levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 88 mcg	G	M
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 88 mcg	G	M
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	G	M
liothyronine sodium oral	G	M
methimazole oral	G	M
np thyroid	G	M
propylthiouracil oral	G	M
SODIUM IODIDE I-131	NPB	
unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 88 mcg	G	M
<b>Immunological Agents - Drugs for Immune System Stimulation or Suppression</b>		
ACTEMRA ACTPEN	NPB-S	PA
ACTEMRA SUBCUTANEOUS	NPB-S	PA
ARCALYST	NPB-S	PA
ASTAGRAF XL	NPB-S	
AZASAN	NPB	
azathioprine oral	G	
BENLYSTA SUBCUTANEOUS	NPB-S	PA
CELLCEPT	NPB-S	
CIMZIA	PB-S	PA
CIMZIA PREFILLED KIT	PB-S	PA
CIMZIA STARTER KIT	PB-S	PA
cyclosporine modified	G-S	
cyclosporine oral	G-S	
ENBREL	PB-S	PA
ENBREL MINI	PB-S	PA
ENBREL SURECLICK	PB-S	PA
ENSPRYNG	NPB-S	PA
ENVARUSUS XR	NPB-S	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	G-S	
gengraf	G-S	
HUMIRA	PB-S	PA

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Drug Name	Drug Tier	Restrictions / Limits
HUMIRA PEDIATRIC CROHNS START	PB-S	PA
HUMIRA PEN	PB-S	PA
HUMIRA PEN-CD/UC/HS STARTER	PB-S	PA
HUMIRA PEN-PEDIATRIC UC START	PB-S	PA
HUMIRA PEN-PS/UV/ADOL HS START	PB-S	PA
HUMIRA PEN-PSOR/UEVIT STARTER	PB-S	PA
icatibant acetate	G-S	PA; QL (0.6 ML per 1 day)
ILUMYA	NPB-S	PA
IMURAN	NPB	
KEVZARA	NPB-S	PA
KINERET	NPB-S	PA
leflunomide oral	G	M
methotrexate oral	G	
methotrexate sodium (pf)	G	
methotrexate sodium injection	G	
methotrexate sodium oral	G	
mycophenolate mofetil oral	G-S	
mycophenolate sodium	G-S	
MYFORTIC	NPB-S	
NEORAL	NPB-S	
OLUMIANT	NPB-S	PA
ORENCIA CLICKJECT	NPB-S	PA
ORENCIA SUBCUTANEOUS	NPB-S	PA
ORLADEYO	NPB-S	PA; QL (1 EA per 1 day)
OTEZLA	PB-S	PA
PROGRAF ORAL	NPB-S	
RAPAMUNE	NPB-S	
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 7.5 MG/0.15ML	PB	PA; QL (0.03 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.25ML	PB	PA; QL (0.04 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 15 MG/0.3ML, 17.5 MG/0.35ML	PB	PA; QL (0.05 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	PB	PA; QL (0.06 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22.5 MG/0.45ML	PB	PA; QL (0.07 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 25 MG/0.5ML	PB	PA; QL (0.08 ML per 1 day)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/0.6ML	PB	PA; QL (0.09 ML per 1 day)
RIDAURA	NPB-S	M
RINVOQ	PB-S	PA
sajazir	G-S	PA; QL (0.6 ML per 1 day)
SANDIMMUNE ORAL CAPSULE	NPB-S	
SANDIMMUNE ORAL SOLUTION	PB-S	
SILIQ	NPB-S	PA
SIMPONI	PB-S	PA
sirolimus oral	G-S	
SKYRIZI (150 MG DOSE)	PB-S	PA
SKYRIZI PEN	PB-S	PA
SKYRIZI SUBCUTANEOUS	PB-S	PA
STELARA SUBCUTANEOUS SOLUTION	PB-S	PA; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML	PB-S	PA; QL (0.009 ML per 1 day)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	PB-S	PA; QL (0.02 ML per 1 day)
SYNAGIS	PB-S	PA
tacrolimus oral	G-S	
TAKHZYRO	NPB-S	PA
TALTZ	NPB-S	PA
TREMFYA	PB-S	PA
TREXALL	PB	
WINRHO SDF INJECTION SOLUTION 15000 UNIT/13ML, 2500 UNIT/2.2ML, 5000 UNIT/4.4ML	PB-S	
XATMEP	PB	
XELJANZ	PB-S	PA
XELJANZ XR	PB-S	PA
ZORTRESS	NPB-S	
<b>Immunological Agents - Drugs for Vaccination</b>		
ACAM2000	NPB	
ACTHIB	NPB	ACA
ADACEL	NPB	ACA
AFLURIA QUADRIVALENT	NPB	ACA
BEXSERO	NPB	ACA

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Drug Name	Drug Tier	Restrictions / Limits
BOOSTRIX	NPB	ACA
COMIRNATY	NPB	ACA
DAPTACEL	NPB	ACA
DENGVAXIA	NPB	ACA
DIPHThERIA-TETANUS TOXOIDS DT	NPB	ACA
ENGERIX-B	NPB	ACA
FLUAD QUADRIVALENT	NPB	ACA
FLUARIX QUADRIVALENT	NPB	ACA
FLUBLOK QUADRIVALENT	NPB	ACA
FLUCELVAX QUADRIVALENT	NPB	ACA
FLULAVAL QUADRIVALENT	NPB	ACA
FLUMIST QUADRIVALENT	NPB	ACA
FLUZONE HIGH-DOSE QUADRIVALENT	NPB	ACA
FLUZONE QUADRIVALENT	NPB	ACA
GARDASIL 9	NPB	ACA
HAVRIX	NPB	ACA
HEPLISAV-B	NPB	ACA
HIBERIX	NPB	ACA
IMOVAX RABIES	NPB	
INFANRIX	NPB	ACA
IPOL	NPB	ACA
JANSSEN COVID-19 VACCINE	NPB	ACA
JYNNEOS	NPB	
KINRIX	NPB	ACA
MENACTRA	NPB	ACA
MENQUADFI	NPB	ACA
MENVEO	NPB	ACA
M-M-R II	NPB	ACA
MODERNA COVID-19 BIVAL BOOSTER	NPB	ACA
MODERNA COVID-19 VAC (BOOSTER)	NPB	ACA
MODERNA COVID-19 VACC 6M-5Y	NPB	ACA
MODERNA COVID-19 VACCINE	NPB	ACA
PEDIARIX	NPB	ACA
PEDVAX HIB	NPB	ACA
PENTACEL	NPB	ACA
PFIZER COVID-19 VAC BIVAL 5-11	NPB	ACA
PFIZER COVID-19 VAC BIVALENT	NPB	ACA
PFIZER COVID-19 VAC-TRIS 5-11Y	NPB	ACA

Drug Name	Drug Tier	Restrictions / Limits
PFIZER COVID-19 VAC-TRIS 6M-4Y	NPB	ACA
PFIZER-BIONT COVID-19 VAC-TRIS	NPB	ACA
PFIZER-BIONTECH COVID-19 VACC	NPB	ACA
PNEUMOVAX 23	NPB	ACA
PREHEVBRIO	NPB	ACA
PREVNAR 13	NPB	ACA
PREVNAR 20	NPB	ACA
PRIORIX	NPB	
PROQUAD	NPB	ACA
QUADRACEL	NPB	ACA
RABAVERT	NPB	
RECOMBIVAX HB	NPB	ACA
ROTARIX	NPB	ACA
ROTATEQ	NPB	ACA
SANOFI COVID-19 VAC (BOOSTER) INTRAMUSCULAR EMULSION 5 MCG/0.5ML	NPB	
SHINGRIX	NPB	ACA
SPIKEVAX COVID-19 VACCINE	NPB	ACA
TDVAX	NPB	ACA
TENIVAC	NPB	ACA
TETANUS-DIPHThERIA TOXOIDS TD	NPB	ACA
TRUMENBA	NPB	ACA
TWINRIX	NPB	ACA
VAQTA	NPB	ACA
VARIVAX	NPB	ACA
VAXELIS	NPB	ACA
VAXNEUVANCE	NPB	ACA
<b>Inflammatory Bowel Disease Agents</b>		
ANALPRAM-HC EXTERNAL CREAM	NPB	
ANUSOL-HC EXTERNAL	NPB	
APRISO	PB	M
AZULFIDINE	NPB	M
AZULFIDINE EN-TABS	NPB	M
balsalazide disodium	G	
budesonide er	G	
budesonide oral	G	
CORTENEMA	NPB	
CORTIFOAM	NPB	

Drug Name	Drug Tier	Restrictions / Limits
hydrocortisone (perianal)	G	
hydrocortisone ace-pramoxine external cream 1-1 %	G	
hydrocortisone rectal	G	
mesalamine er	G	M
mesalamine oral capsule delayed release 400 mg	G	M
mesalamine oral tablet delayed release 1.2 gm	G	M
mesalamine rectal	G	M
mesalamine-cleanser	G	
PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG	NPB	M
PROCTOFOAM HC	PB	
procto-med hc	G	
procto-pak	G	
proctosol hc	G	
proctozone-hc	G	
ROWASA	NPB	
SFROWASA	PB	M
sulfasalazine oral	G	M
UCERIS RECTAL	NPB	
<b>Metabolic Bone Disease Agents - Drugs for Osteoporosis</b>		
ACTONEL ORAL TABLET 150 MG	NPB	M; QL (0.04 EA per 1 day)
ACTONEL ORAL TABLET 35 MG	NPB	M; QL (0.15 EA per 1 day)
alendronate sodium oral solution	G	M
alendronate sodium oral tablet 10 mg, 5 mg	G	M
alendronate sodium oral tablet 35 mg, 70 mg	G	M; QL (0.15 EA per 1 day)
ADELVIA	NPB	M; QL (0.15 EA per 1 day)
calcitonin (salmon) injection	G	M
calcitonin (salmon) nasal	G	M; QL (0.13 ML per 1 day)
FOSAMAX	NPB	M; QL (0.15 EA per 1 day)
ibandronate sodium oral	G	M; QL (0.04 EA per 1 day)
risedronate sodium oral tablet 150 mg	G	M; QL (0.04 EA per 1 day)
risedronate sodium oral tablet 30 mg, 5 mg	G	M
risedronate sodium oral tablet 35 mg	G	M; QL (0.15 EA per 1 day)
risedronate sodium oral tablet delayed release	G	M; QL (0.15 EA per 1 day)
TERIPARATIDE (RECOMBINANT)	PB-S	PA
TYMLOS	PB-S	PA

Drug Name	Drug Tier	Restrictions / Limits
<b>Metabolic Bone Disease Agents - Other</b>		
calcitriol oral	G	M
cinacalcet hcl	G	PA
NATPARA	NPB-S	PA; QL (0.08 EA per 1 day)
paricalcitol oral	G	M
RAYALDEE	NPB	M
ROCALTROL	NPB	M
ZEMPLAR ORAL	NPB	M
<b>Miscellaneous Therapeutic Agents</b>		
ALPHA-LIPOIC ACID INJECTION	NPB	
BACTERIOSTATIC WATER(BENZ ALC)	NPB	
BD ULTRA-FINE PEN NEEDLES 31G X 8 MM	NPB	M; OTC
BYLVAY	NPB-S	
BYLVAY (PELLETS)	NPB-S	
CHLORHEXIDINE GLUCONATE SOLUTION 20 %	NPB	
CYTOTINE ORAL POWDER	NPB	
deferroxamine mesylate	G	
DROPLET MICRON	NPB	M; OTC
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT	NPB-S	PA
ENDARI	NPB	PA
ergoloid mesylates oral	G	M
EUA PATIENT ASSESSMENT	NPB	
formaldehyde external solution 37 %	G	
glutaraldehyde external	G	
GRASTEK	NPB	
IGALMI	NPB	PA
INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM	NPB	M; OTC
INSULIN PEN NEEDLES 30G X 6 MM , 31G X 8 MM	NPB	M; OTC
INSULIN PEN NEEDLES 31G X 8 MM	NPB	M
KERENDIA	NPB	PA; QL (1 EA per 1 day)
methergine	G	QL (28 EA per 1 fill)
methylergonovine maleate oral	G	QL (28 EA per 1 fill)
NEOKE RA LIPOIC	NPB	
ODACTRA	NPB	
OMNIPOD 5 G6 INTRO (GEN 5)	PB	

Drug Name	Drug Tier	Restrictions / Limits
OMNIPOD 5 G6 POD (GEN 5)	PB	
OMNIPOD DASH INTRO (GEN 4)	PB	
OMNIPOD DASH PODS (GEN 4)	PB	
ORALAIR	NPB	
ORALAIR ADULT STARTER PACK	NPB	
ORALAIR CHILDRENS STARTER PACK	NPB	
PHOTREXA-PHOTREXA VISCOUS KIT	NPB	
RAGWITEK	NPB	
RAYA SURE PEN NEEDLE 31G X 8 MM	NPB	M; OTC
saline bacteriostatic	G	
SALINE-PHENOL	NPB	
VISTOGARD	NPB	
ZOKINVY	NPB-S	PA; QL (4 EA per 1 day)
<b>Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation</b>		
ACULAR	NPB	
ACULAR LS	NPB	
ALOMIDE	NPB	
AZASITE	NPB	
azelastine hcl ophthalmic	G	
bacitracin ophthalmic	G	
BESIVANCE	NPB	
BETADINE OPHTHALMIC PREP	NPB	
bromfenac sodium (once-daily)	G	QL (6.8 ML per 365 days)
ciprofloxacin hcl ophthalmic	G	
cromolyn sodium ophthalmic	G	
dexamethasone sodium phosphate ophthalmic	G	
diclofenac sodium ophthalmic	G	
difluprednate	G	
epinastine hcl	G	
erythromycin ophthalmic	G	
EYSUVIS	NPB	PA
FLAREX	NPB	
fluorometholone	G	
flurbiprofen sodium	G	
FML	PB	
FML FORTE	NPB	
FML LIQUIFILM	NPB	



Drug Name	Drug Tier	Restrictions / Limits
gatifloxacin ophthalmic	G	
gentak	G	
gentamicin sulfate ophthalmic	G	
INVELTYS	NPB	
ketorolac tromethamine ophthalmic	G	
levofloxacin ophthalmic	G	
LOTEMAX SM	NPB	
loteprednol etabonate ophthalmic gel	G	QL (20 GM per 365 days)
MAXIDEX	NPB	
MAXITROL	NPB	
MITOSOL	NPB	
moxifloxacin hcl (2x day)	G	
moxifloxacin hcl ophthalmic solution	G	
NATACYN	PB	
neomycin-polymyxin-dexameth ophthalmic ointment	G	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	G	
neomycin-polymyxin-hc ophthalmic	G	
OCUFLOX	NPB	
ofloxacin ophthalmic	G	
olopatadine hcl ophthalmic	G	
POVIDONE-IODINE OPHTHALMIC	NPB	
PRED MILD	NPB	
prednisolone acetate ophthalmic	G	
prednisolone sodium phosphate ophthalmic	G	
PROLENSA	PB	QL (12 ML per 365 days)
sulfacetamide sodium ophthalmic	G	
TOBRADEX OPHTHALMIC OINTMENT	NPB	
TOBRADEX ST	NPB	
tobramycin ophthalmic	G	
tobramycin-dexamethasone	G	
TOBREX	NPB	
trifluridine	G	
TRIPLE PMB	NPB	
TRIPLE PMK	NPB	
TYRVAYA	NPB	PA; QL (0.3 ML per 1 day)
UPNEEQ	NPB	PA
ZIRGAN	NPB	

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Drug Name	Drug Tier	Restrictions / Limits
ZYMAXID	NPB	
<b>Ophthalmic Agents - Drugs for Glaucoma</b>		
acetazolamide er	G	M
acetazolamide oral	G	M
ALPHAGAN P OPTHALMIC SOLUTION 0.1 %	PB	M
apraclonidine hcl	G	
betaxolol hcl ophthalmic	G	M
BETIMOL	NPB	M
bimatoprost ophthalmic	G	M; QL (0.1 ML per 1 day)
brimonidine tartrate ophthalmic	G	M
brimonidine tartrate-timolol	G	M
brinzolamide	G	M
carteolol hcl	G	M
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	NPB	M
dorzolamide hcl solution 2 % ophthalmic	G	M
dorzolamide hcl-timolol mal	G	M
dorzolamide hcl-timolol mal pf	G	M
IOPIDINE	NPB	
ISTALOL	NPB	M
KEVEYIS	NPB-S	PA; QL (4 EA per 1 day)
latanoprost ophthalmic	G	M
levobunolol hcl	G	M
LUMIGAN	PB	M; QL (0.1 ML per 1 day)
methazolamide oral	G	M
pilocarpine hcl ophthalmic	G	M
RHOPRESSA	NPB	M; QL (0.1 ML per 1 day)
ROCKLATAN	NPB	M; QL (0.1 ML per 1 day)
SIMBRINZA	PB	M
timolol maleate (once-daily)	G	M
timolol maleate ocudose	G	M
timolol maleate ophthalmic solution	G	M
timolol maleate pf	G	M
travoprost (bak free)	G	M; QL (0.1 ML per 1 day)
TRUSOPT	NPB	M
XELPROS	NPB	M; QL (0.1 ML per 1 day)
<b>Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions</b>		
ak-poly-bac	G	

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Drug Name	Drug Tier	Restrictions / Limits
AKTEN	NPB	
ALCAINE	NPB	
altafrin	G	
atropine sulfate ophthalmic ointment	G	M
atropine sulfate ophthalmic solution 1 %	G	M
bacitracin-polymyxin b ophthalmic	G	
bacitra-neomycin-polymyxin-hc	G	
BLEPHAMIDE S.O.P.	NPB	
CYCLOGYL	NPB	M
CYCLOMYDRIL	NPB	M
cyclopentolate hcl ophthalmic	G	M
cyclosporine ophthalmic	G	PA; M
CYSTADROPS	NPB-S	PA; QL (0.72 ML per 1 day)
CYSTARAN	NPB-S	PA; QL (2.2 ML per 1 day)
DOUBLE PM	NPB	
homatropaire	G	M
ISOPTO ATROPINE	NPB	M
neomycin-bacitracin zn-polymyx	G	
neomycin-polymyxin-gramicidin	G	
neo-polycin	G	
neo-polycin hc	G	
OXERVATE	NPB-S	PA
phenylephrine hcl ophthalmic	G	
polycin	G	
polymyxin b-trimethoprim	G	
POLYTRIM	NPB	
PRED-G	NPB	
PRED-G S.O.P.	NPB	
proparacaine hcl ophthalmic	G	
RESTASIS	PB	PA; M
RESTASIS MULTIDOSE	PB	PA; M
sulfacetamide-prednisolone	G	
TROPICAMIDE-CYCLOPENTOLATE-PE	NPB	
TROPICAMIDE-PHENYLEPHRINE	NPB	
XIIDRA	PB	PA; M
ZYLET	NPB	
<b>Otic Agents - Drugs for Ear Conditions</b>		
acetic acid otic	G	

Drug Name	Drug Tier	Restrictions / Limits
CETRAXAL	NPB	ST
ciprofloxacin hcl otic	G	ST
ciprofloxacin-dexamethasone	G	
cortic-nd	G	
CORTISPORIN-TC	NPB	
DERMOTIC	NPB	
flac	G	
fluocinolone acetonide otic	G	
hydrocortisone-acetic acid	G	
neomycin-polymyxin-hc otic	G	
ofloxacin otic	G	
OTIPRIO	NPB	
PRAMOTIC	NPB	
<b>Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold</b>		
azelastine hcl nasal	G	QL (2 ML per 1 day)
azelastine-fluticasone	G	QL (0.77 GM per 1 day)
benzonatate	G	
carbinoxamine maleate oral solution	G	
carbinoxamine maleate oral tablet 4 mg	G	
clemastine fumarate oral tablet 2.68 mg	G	
cyproheptadine hcl oral	G	
DICOPANOL FUSEPAQ	NPB	
DICOPANOL RAPIDPAQ	NPB	
diphenhydramine hcl injection	G	
diphenhydramine hcl oral elixir	G	
DYMISTA	PB	QL (0.77 GM per 1 day)
FASENRA	PB-S	PA
FASENRA PEN	PB-S	PA
guaiaatussin ac	G	OTC
guaifenesin ac	G	OTC
guaifenesin-codeine	G	OTC
HYCODAN	NPB	
hydrocodone bit-homatrop mbr	G	
hydrocodone polst-chlorphen polst er susp	G	
hydromet	G	
HYPERSAL	NPB	
ipratropium bromide nasal	G	

Drug Name	Drug Tier	Restrictions / Limits
maxi-tuss ac	G	OTC
NEBUSAL INHALATION NEBULIZATION SOLUTION 6 %	NPB	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	PB-S	PA; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	PB-S	PA; QL (0.11 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	PB-S	PA; QL (0.02 ML per 1 day)
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	PB-S	PA; QL (0.11 EA per 1 day)
olopatadine hcl nasal	G	QL (1.02 GM per 1 day)
PATANASE	NPB	QL (1.02 GM per 1 day)
promethazine hcl oral	G	
promethazine hcl rectal	G	
promethazine vc	G	
promethazine vc/codeine	G	
promethazine-codeine	G	
promethazine-dm	G	
promethazine-phenyleph-codeine	G	
promethazine-phenylephrine	G	
promethegan	G	
pseudoephedrine-bromphen-dm	G	
sodium chloride inhalation	G	
XOLAIR	PB-S	PA
<b>Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions</b>		
ACCOLATE	NPB	M
acetylcysteine inhalation	G	
ADVAIR DISKUS	PB	M; QL (2 EA per 1 day)
ADVAIR HFA	PB	M; QL (0.4 GM per 1 day)
albuterol sulfate hfa	G	M; QL (1.2 GM per 1 day)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	G	M; QL (18 ML per 1 day)
albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5%	G	M; QL (5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml	G	M; QL (12.5 ML per 1 day)
albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml	G	M; QL (5 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
albuterol sulfate oral	G	M
ANORO ELLIPTA	PB	M; QL (2 EA per 1 day)
arformoterol tartrate	G	M; QL (4 ML per 1 day)
ARNUIITY ELLIPTA	PB	M; QL (1 EA per 1 day)
ATROVENT HFA	NPB	M; QL (0.86 GM per 1 day)
AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML	NPB	
BREO ELLIPTA	PB	M; QL (2 EA per 1 day)
BREZTRI AEROSPHERE	PB	QL (0.36 GM per 1 day)
budesonide inhalation	G	M; QL (4 ML per 1 day)
COMBIVENT RESPIMAT	PB	QL (0.27 GM per 1 day)
cromolyn sodium inhalation	G	M
DALIRESP	NPB	PA
elixophyllin	G	M
epinephrine injection solution auto-injector	G	
EPIPEN 2-PAK	NPB	ST
ESBRIET ORAL CAPSULE	NPB-S	PA
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 50 MCG/ACT	PB	M; QL (2 EA per 1 day)
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/ACT	PB	M; QL (8 EA per 1 day)
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	PB	M; QL (0.8 GM per 1 day)
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	PB	M; QL (0.71 GM per 1 day)
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	G	M; QL (2 EA per 1 day)
formoterol fumarate inhalation	G	M; QL (4 ML per 1 day)
ipratropium bromide inhalation	G	M; QL (10.42 ML per 1 day)
ipratropium-albuterol	G	QL (18 ML per 1 day)
isoproterenol hcl injection	G	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml	G	QL (18 ML per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml	G	QL (3 EA per 1 day)
levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml	G	QL (9 ML per 1 day)
LONHALA MAGNAIR REFILL KIT	NPB	M; QL (2 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
LONHALA MAGNAIR STARTER KIT	NPB	M; QL (2 ML per 1 day)
montelukast sodium oral	G	M
OFEV	NPB-S	PA
PERFOROMIST	NPB	M; QL (4 ML per 1 day)
pirfenidone	G-S	PA
PULMICORT FLEXHALER	PB	M; QL (0.07 EA per 1 day)
roflumilast	G	PA
SEREVENT DISKUS	PB	M; QL (2 EA per 1 day)
SPIRIVA HANDIHALER	PB	M; QL (1 EA per 1 day)
SPIRIVA RESPIMAT	PB	M; QL (0.14 GM per 1 day)
STIOLTO RESPIMAT	PB	M; QL (0.14 GM per 1 day)
STRIVERDI RESPIMAT	PB	M; QL (4.2 GM per 30 days)
SYMBICORT	PB	M; QL (0.34 GM per 1 day)
SYMJEPI	NPB	
terbutaline sulfate injection	G	M
terbutaline sulfate oral	G	M
THEO-24	NPB	M
theophylline	G	M
theophylline er	G	M
TRELEGY ELLIPTA	PB	M; QL (2 EA per 1 day)
wixela inhub	G	M; QL (2 EA per 1 day)
YUPELRI	NPB	M; QL (3 ML per 1 day)
zafirlukast	G	M
<b>Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis</b>		
KALYDECO	NPB-S	PA
ORKAMBI ORAL PACKET	NPB-S	PA; QL (2 EA per 1 day)
ORKAMBI ORAL TABLET	NPB-S	PA; QL (4 EA per 1 day)
PULMOZYME	PB-S	PA
SYMDEKO	NPB-S	PA; QL (2 EA per 1 day)
TOBI PODHALER	NPB-S	QL (224 EA per 40 days)
tobramycin inhalation	G-S	
TRIKAFTA	NPB-S	PA; QL (3 EA per 1 day)
<b>Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension</b>		
ADEMPAS	PB-S	PA; QL (3 EA per 1 day)
alyq	G-S	PA; QL (2 EA per 1 day)
ambrisentan	G-S	PA; QL (1 EA per 1 day)
bosentan	G-S	PA; QL (2 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
OPSUMIT	PB-S	PA; QL (1 EA per 1 day)
ORENITRAM	NPB-S	PA
sildenafil citrate oral suspension reconstituted	G-S	PA; QL (7.5 ML per 1 day)
sildenafil citrate oral tablet 20 mg	G-S	PA; QL (3 EA per 1 day)
tadalafil (pah)	G-S	PA; QL (2 EA per 1 day)
TRACLEER 32 MG	NPB-S	PA; QL (4 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X48MCG	NPB-S	PA; QL (8 EA per 1 day)
TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG	NPB-S	PA; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT	NPB-S	PA; QL (2 EA per 365 days)
UPTRAVI ORAL TABLET	NPB-S	PA; QL (2 EA per 1 day)
UPTRAVI ORAL TABLET THERAPY PACK	NPB-S	PA; QL (400 EA per 365 days)
VENTAVIS	NPB-S	PA; QL (9 ML per 1 day)
<b>Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm</b>		
baclofen oral tablet	G	
carisoprodol oral	G	
chlorzoxazone oral tablet 500 mg	G	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	G	
CYCLOPHENE RAPIDPAQ	NPB	
DANTRIUM ORAL	NPB	
dantrolene sodium oral	G	
ENOVARX-BACLOFEN	NPB	
ENOVARX-CYCLOBENZAPRINE HCL	NPB	
methocarbamol injection	G	
methocarbamol oral tablet 500 mg, 750 mg	G	
orphenadrine citrate er	G	QL (4 EA per 1 day)
TABRADOL FUSEPAQ	NPB	
TABRADOL RAPIDPAQ	NPB	
tizanidine hcl oral	G	
<b>Sleep Disorder Agents</b>		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	G	PA; QL (1 EA per 1 day)
armodafinil oral tablet 50 mg	G	PA; QL (2 EA per 1 day)
BELSOMRA	NPB	ST; QL (1 EA per 1 day)
DAYVIGO	NPB	ST; QL (1 EA per 1 day)
doxepin hcl oral tablet	G	QL (1 EA per 1 day)



Drug Name	Drug Tier	Restrictions / Limits
eszopiclone	G	QL (1 EA per 1 day)
flurazepam hcl	G	PA; QL (1 EA per 1 day)
modafinil	G	PA; QL (1 EA per 1 day)
ramelteon	G	QL (1 EA per 1 day)
ROZEREM	NPB	QL (1 EA per 1 day)
SUNOSI	PB	PA; QL (1 EA per 1 day)
temazepam	G	QL (1 EA per 1 day)
WAKIX	NPB-S	PA; QL (2 EA per 1 day)
XYREM	NPB-S	PA; QL (18 ML per 1 day)
XYWAV	NPB-S	PA; QL (18 ML per 1 day)
zaleplon oral capsule 10 mg	G	QL (2 EA per 1 day)
zaleplon oral capsule 5 mg	G	QL (1 EA per 1 day)
zolpidem tartrate er	G	QL (1 EA per 1 day)
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TRUSELTIQ (100MG DAILY		VECAMEYL.....	VTAMA.....	52
DOSE).....	27	velivet.....	VUMERITY.....	45
TRUSELTIQ (125MG DAILY		VELPHORO.....	vyfemla.....	72
DOSE).....	27	VELTASSA.....	vylibra.....	72
TRUSELTIQ (50MG DAILY		VENCLEXTA.....	VYNDAMAX.....	43
DOSE).....	27	VENCLEXTA STARTING	VYNDAQEL.....	43
TRUSELTIQ (75MG DAILY		PACK.....	VYSTONE.....	22
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TRUSOPT.....	82	VENIPUNCTURE PX1	WAKIX.....	89
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WEEKLY).....	28	zolpidem tartrate er.....	89
XPOVIO (40 MG ONCE		zonisamide.....	18
WEEKLY).....	28	ZONTIVITY.....	30
XPOVIO (40 MG TWICE		ZORBTIVE.....	61
WEEKLY).....	28	ZORTRESS.....	75
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WEEKLY).....	28	ZTALMY.....	18
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