



Kansas City

MEMBER **2024**
SELECT DRUG LIST

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

Effective January 1, 2024

Blue Cross and Blue Shield of Kansas City 2024 Select 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. 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 > 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.

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

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

G	Generic Drug.
G-S	Generic Specialty Drug.
NPB	Non-preferred Brand Drug.
NPB-S	Non-preferred Brand Specialty Drug.
PB	Preferred Brand Drug.
PB-S	Preferred Brand Specialty Drug.
ACA	Affordable Care Act. These preventative drugs may be covered at no cost (check your benefits to confirm).
M	Maintenance Drug.
OTC	Over the Counter. An OTC drug is a non-prescription drug.
PA	Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescription. If you don't get approval, your plan may not cover the drug.
QL	Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.
ST	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

Table of Contents

Analgesics - Drugs for Pain.....	8
Analgesics - Drugs for Pain and Inflammation.....	11
Anesthetics.....	12
Anti-Addiction / Substance Abuse Treatment Agents.....	13
Antibacterials.....	14
Anticoagulants.....	17
Anticonvulsants - Drugs for Seizures.....	17
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia.....	19
Antidepressants.....	20
Antiemetics - Drugs for Nausea and Vomiting.....	21
Antifungals.....	22
Antigout Agents.....	23
Antimigraine Agents.....	23
Antimyasthenic Agents.....	24
Antimycobacterials.....	25
Antineoplastics - Drugs for Cancer.....	25
Antiparasitics.....	30
Antiparkinson Agents.....	31
Antiplatelets.....	32
Antipsychotics - Drugs for Mood Disorders.....	32
Antivirals.....	33
Anxiolytics - Drugs for Anxiety.....	36
Bipolar Agents - Drugs for Mood Disorders.....	38
Blood Products and Modifiers - Drugs for Blood Disorders.....	38
Cardiovascular Agents - Drugs for Heart and Circulation Conditions.....	38
Central Nervous System Agents.....	44
Central Nervous System Agents - Drugs for Attention Deficit Disorder.....	44
Central Nervous System Agents - Drugs for Multiple Sclerosis.....	46
Central Nervous System Agents - Miscellaneous.....	47
Dental and Oral Agents - Drugs for Mouth and Throat Conditions.....	48
Dermatological Agents - Drugs for Skin Conditions.....	49
Diabetes - Antidiabetic Agents.....	54
Diabetes - Glucose Monitoring.....	56
Diabetes - Glycemic Agents.....	58
Diabetes - Insulins.....	59
Electrolytes / Minerals / Metals / Vitamins.....	61
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer.....	65
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions.....	65
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment.....	67
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions.....	68
Genitourinary Agents - Drugs for Prostate Conditions.....	69
Hormonal Agents - Adrenal.....	69
Hormonal Agents - Men's Health.....	70
Hormonal Agents - Pituitary.....	70
Hormonal Agents - Prostaglandins.....	72
Hormonal Agents - Selective Estrogen Receptor Modifying Agents.....	72
Hormonal Agents - Sex Hormones and Birth Control.....	72
Hormonal Agents - Thyroid.....	79
Immunological Agents - Drugs for Immune System Stimulation or Suppression.....	80
Immunological Agents - Drugs for Vaccination.....	84

Inflammatory Bowel Disease Agents	86
Metabolic Bone Disease Agents - Drugs for Osteoporosis	86
Metabolic Bone Disease Agents - Other	87
Miscellaneous Therapeutic Agents	87
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation	89
Ophthalmic Agents - Drugs for Glaucoma	91
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions	92
Otic Agents - Drugs for Ear Conditions	93
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold	93
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions	94
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis	97
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension	98
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm	98
Sleep Disorder Agents	99

Drug Name	Drug Tier	Restrictions / Limits
Analgesics - Drugs for Pain		
acetaminophen-codeine oral solution	G	QL (136 ML per 1 day)
acetaminophen-codeine oral tablet 300-15 mg	G	QL (13 EA per 1 day)
acetaminophen-codeine oral tablet 300-30 mg	G	QL (10 EA per 1 day)
acetaminophen-codeine oral tablet 300-60 mg	G	QL (5 EA per 1 day)
APADAZ ORAL TABLET 4.08-325 MG	NPB	QL (9 EA per 1 day)
APADAZ ORAL TABLET 6.12-325 MG	NPB	QL (6 EA per 1 day)
APADAZ ORAL TABLET 8.16-325 MG	NPB	QL (4 EA per 1 day)
apap-caff-dihydrocodeine	G	QL (12 EA per 1 day)
ascomp-codeine	G	
bac	G	
BELBUCA	PB	PA; QL (2 EA per 1 day)
BENZHYDROCODONE-ACETAMINOPHEN ORAL TABLET 4.08-325 MG	NPB	QL (9 EA per 1 day)
BENZHYDROCODONE-ACETAMINOPHEN ORAL TABLET 6.12-325 MG	NPB	QL (6 EA per 1 day)
BENZHYDROCODONE-ACETAMINOPHEN ORAL TABLET 8.16-325 MG	NPB	QL (4 EA per 1 day)
buprenorphine	G	PA; 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	QL (2.5 ML per 1 fill)
codeine sulfate oral tablet 15 mg	G	QL (21 EA per 1 day)
codeine sulfate oral tablet 30 mg	G	QL (10 EA per 1 day)
codeine sulfate oral tablet 60 mg	G	QL (5 EA per 1 day)
DEMEROL INJECTION SOLUTION 25 MG/ML	NPB	
DILAUDID ORAL LIQUID	NPB	QL (10 ML per 1 day)
endocet oral tablet 10-325 mg	G	QL (3 EA per 1 day)
endocet oral tablet 2.5-325 mg	G	QL (12 EA per 1 day)
endocet oral tablet 5-325 mg	G	QL (6 EA per 1 day)
endocet oral tablet 7.5-325 mg	G	QL (4 EA per 1 day)
fentanyl citrate buccal lozenge on a handle	G	PA; QL (4 EA per 1 day)
FENTANYL CITRATE BUCCAL TABLET	NPB	PA; QL (4 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr	G	PA; 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	PA; QL (0.5 EA per 1 day)
FENTORA	NPB	PA; QL (4 EA per 1 day)
FIORICET/CODEINE	NPB	ST
hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	G	PA; QL (2 EA per 1 day)
hydrocodone bitartrate er oral capsule extended release 12 hour 50 mg	G	PA; QL (4 EA per 1 day)
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent	G	PA; QL (1 EA per 1 day)
hydrocodone-acetaminophen oral solution	G	QL (98 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	G	QL (4 EA per 1 day)
hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg	G	QL (9 EA per 1 day)
hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg	G	QL (6 EA per 1 day)
hydrocodone-ibuprofen oral tablet 10-200 mg	G	QL (4 EA per 1 day)
hydrocodone-ibuprofen oral tablet 5-200 mg	G	QL (9 EA per 1 day)
hydrocodone-ibuprofen oral tablet 7.5-200 mg	G	QL (6 EA per 1 day)
hydromorphone hcl er	G	PA; QL (2 EA per 1 day)
hydromorphone hcl oral liquid	G	QL (10 ML per 1 day)
hydromorphone hcl oral tablet 2 mg	G	QL (5 EA per 1 day)
hydromorphone hcl oral tablet 4 mg	G	QL (2 EA per 1 day)
hydromorphone hcl oral tablet 8 mg	G	QL (1 EA per 1 day)
hydromorphone hcl pf injection solution 10 mg/ml, 50 mg/5ml	G	
HYSINGLA ER	PB	PA; QL (1 EA per 1 day)
meperidine hcl oral solution	G	QL (49 ML per 1 day)
methadone hcl intensol	G	
methadone hcl oral concentrate	G	
methadone hcl oral solution	G	
methadone hcl oral tablet	G	PA
methadone hcl oral tablet soluble	G	
METHADOSE ORAL CONCENTRATE 10 MG/ML	NPB	
methadose oral tablet soluble	G	

Drug Name	Drug Tier	Restrictions / Limits
METHADOSE SUGAR-FREE	NPB	
morphine sulfate (concentrate)	G	QL (2.4 ML per 1 day)
morphine sulfate er beads oral capsule extended release 24 hour 120 mg	G	PA; 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	PA; QL (1 EA per 1 day)
morphine sulfate er oral capsule extended release 24 hour	G	PA; QL (2 EA per 1 day)
morphine sulfate er oral tablet extended release	G	PA; QL (3 EA per 1 day)
MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML	NPB	
morphine sulfate injection solution 2 mg/ml, 4 mg/ml, 50 mg/ml	G	
morphine sulfate oral solution 10 mg/5ml	G	QL (24.5 ML per 1 day)
morphine sulfate oral solution 20 mg/5ml	G	QL (12.25 ML per 1 day)
morphine sulfate oral tablet 15 mg	G	QL (3 EA per 1 day)
morphine sulfate oral tablet 30 mg	G	QL (1 EA per 1 day)
nalbuphine hcl injection solution 10 mg/ml	G	
NUCYNTA ER	NPB	PA; QL (2 EA per 1 day)
NUCYNTA ORAL TABLET 100 MG, 75 MG	NPB	QL (1 EA per 1 day)
NUCYNTA ORAL TABLET 50 MG	NPB	QL (2 EA per 1 day)
OXYCODONE HCL ER	NPB	PA; QL (4 EA per 1 day)
oxycodone hcl oral capsule	G	QL (6 EA per 1 day)
oxycodone hcl oral concentrate	G	QL (1.6 ML per 1 day)
oxycodone hcl oral solution	G	QL (32.6 ML per 1 day)
oxycodone hcl oral tablet 10 mg	G	QL (3 EA per 1 day)
oxycodone hcl oral tablet 15 mg	G	QL (2 EA per 1 day)
oxycodone hcl oral tablet 20 mg, 30 mg	G	QL (1 EA per 1 day)
oxycodone hcl oral tablet 5 mg	G	QL (6 EA per 1 day)
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	NPB	QL (32.6 ML per 1 day)
oxycodone-acetaminophen oral tablet 10-325 mg	G	QL (3 EA per 1 day)
oxycodone-acetaminophen oral tablet 2.5-325 mg	G	QL (12 EA per 1 day)
oxycodone-acetaminophen oral tablet 5-325 mg	G	QL (6 EA per 1 day)
oxycodone-acetaminophen oral tablet 7.5-325 mg	G	QL (4 EA per 1 day)
OXYCONTIN	PB	PA; QL (4 EA per 1 day)
oxymorphone hcl er	G	PA; QL (4 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
oxymorphone hcl oral tablet 10 mg	G	QL (1 EA per 1 day)
oxymorphone hcl oral tablet 5 mg	G	QL (3 EA per 1 day)
pentazocine-naloxone hcl	G	QL (5 EA per 1 day)
ROXYBOND ORAL TABLET ABUSE-DETERRENT 15 MG	NPB	QL (2 EA per 1 day)
ROXYBOND ORAL TABLET ABUSE-DETERRENT 30 MG	NPB	QL (1 EA per 1 day)
ROXYBOND ORAL TABLET ABUSE-DETERRENT 5 MG	NPB	QL (6 EA per 1 day)
SUBSYS	NPB	PA; QL (16 EA per 1 day)
TENCON	NPB	
tramadol hcl (er biphasic) oral tablet extended release 24 hour	G	PA; QL (1 EA per 1 day)
tramadol hcl er	G	PA; QL (1 EA per 1 day)
tramadol hcl oral tablet 100 mg	G	QL (2 EA per 1 day)
tramadol hcl oral tablet 50 mg	G	QL (5 EA per 1 day)
tramadol-acetaminophen	G	QL (6 EA per 1 day)
TREZIX	NPB	QL (12 EA per 1 day)
XTAMPZA ER	PB	PA; QL (4 EA per 1 day)
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	G	
COXANTO	NPB	
DAYPRO	NPB	
diclofenac potassium oral tablet 50 mg	G	
diclofenac sodium er	G	
diclofenac sodium external gel 1 %	G	
diclofenac sodium external solution 1.5 %	G	PA
diclofenac sodium oral	G	
DICLOFONO	NPB	
diflunisal oral	G	
EC-NAPROSYN	NPB	
ec-naproxen	G	
ELYXYB	NPB	PA; QL (1 ML per 1 day)
etodolac	G	
etodolac er	G	
flurbiprofen oral	G	
ibuprofen oral suspension 100 mg/5ml	G	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	G	

Drug Name	Drug Tier	Restrictions / Limits
indomethacin er	G	
indomethacin oral	G	
ketoprofen oral capsule 50 mg	G	
ketorolac tromethamine oral	G	
LODINE	NPB	
meloxicam oral tablet	G	
nabumetone oral	G	
naproxen dr	G	
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	
tolmetin sodium	G	
Anesthetics		
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	
LIDO-RACEPINEPHRINE-TETRACAINE	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	
ZTLIDO	NPB	ST

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	G	
APO-VARENICLINE	NPB	QL (180 day supply per 365 days)
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; QL (180 day supply per 365 days)
disulfiram oral	G	
KLOXXADO	G	
LUCEMYRA	NPB	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; QL (180 day supply per 365 days)
NICOTROL NS	NPB	M; QL (180 day supply per 365 days)
SUBOXONE SUBLINGUAL FILM 12-3 MG	G	ST; QL (2 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 2-0.5 MG	G	ST; QL (12 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 4-1 MG	G	ST; QL (6 EA per 1 day)
SUBOXONE SUBLINGUAL FILM 8-2 MG	G	ST; QL (3 EA per 1 day)
varenicline tartrate	G	QL (180 day supply per 365 days)
varenicline tartrate (starter)	G	QL (180 day supply per 365 days)
varenicline tartrate(continue)	G	QL (180 day supply per 365 days)

Drug Name	Drug Tier	Restrictions / Limits
ZIMHI	G	
ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG	G	
ZUBSOLV SUBLINGUAL TABLET 1.4-0.36 MG	G	QL (12 EA per 1 day)
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 5.7-1.4 MG	G	QL (3 EA per 1 day)
ZUBSOLV SUBLINGUAL TABLET 8.6-2.1 MG	G	QL (2 EA per 1 day)
Antibacterials		
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	
benzalkonium chloride external solution	G	
cefaclor	G	
cefaclor er	G	
cefadroxil	G	
cefdinir	G	
cefixime	G	
cefepodoxime proxetil	G	
cefprozil	G	
cefuroxime axetil	G	
cephalexin	G	
CIPRO	NPB	
ciprofloxacin hcl oral	G	
clarithromycin er	G	
clarithromycin oral	G	
CLEOCIN ORAL	NPB	

Drug Name	Drug Tier	Restrictions / Limits
CLEOCIN VAGINAL	NPB	ST
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	
FIRVANQ	NPB	
fosfomycin tromethamine	G	
gentamicin sulfate external	G	
HIPREX	NPB	
HUMATIN	PB	
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	
MACRODANTIN	NPB	
mafenide acetate external	G	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
methenamine hippurate	G	
metronidazole oral tablet	G	
metronidazole vaginal	G	
minocycline hcl oral capsule	G	
mondoxyne nl	G	
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	
penicillin v potassium	G	
SEYSARA	NPB	ST
SILVADENE	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	
tetracycline hcl oral	G	
tinidazole oral	G	
tobramycin sulfate injection solution reconstituted	G	
trimethoprim oral	G	
VANCOGIN	NPB	
vancomycin hcl oral	G	
VANDAZOLE	NPB	ST
VIBRAMYCIN	NPB	ST
XENLETA ORAL	NPB	
XEPI	NPB	
XIFAXAN	NPB	PA
XIMINO	NPB	
ZITHROMAX ORAL	NPB	
ZITHROMAX TRI-PAK	NPB	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
ZITHROMAX Z-PAK	NPB	
ZYVOX ORAL SUSPENSION RECONSTITUTED	NPB	QL (32.2 ML per 1 day)
Anticoagulants		
ARIXTRA	NPB	
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	
fondaparinux sodium	G	
FRAGMIN	NPB	
heparin sodium (porcine)	G	
heparin sodium (porcine) pf	G	
jantoven	G	
LOVENOX INJECTION SOLUTION PREFILLED SYRINGE	NPB	
PRADAXA ORAL CAPSULE	PB	M; QL (2 EA per 1 day)
PRADAXA ORAL PACKET 110 MG, 30 MG, 40 MG, 50 MG	NPB	M; QL (4 EA per 1 day)
PRADAXA ORAL PACKET 150 MG, 20 MG	NPB	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)
Anticonvulsants - Drugs for Seizures		
APTIOM	NPB	
BRIVIACT ORAL	NPB	ST
carbamazepine er	G	
carbamazepine oral	G	
CARBATROL	NPB	ST
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)

Drug Name	Drug Tier	Restrictions / Limits
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	
EPRONTIA	NPB	ST
ethosuximide oral	G	
felbamate	G	
FINTEPLA	NPB-S	PA
FYCOMPA	NPB	
gabapentin oral capsule	G	
gabapentin oral solution	G	
gabapentin oral tablet 600 mg, 800 mg	G	
lacosamide oral	G	
LAMICTAL ODT ORAL KIT	NPB	ST
LAMICTAL STARTER	NPB	ST
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	
methsuximide	G	
NAYZILAM	NPB	QL (0.34 EA per 1 day)
NEURONTIN ORAL SOLUTION	NPB	ST
oxcarbazepine	G	
OXTELLAR XR	NPB	ST
phenobarbital oral	G	
phenytek	G	
phenytoin infatabs	G	
phenytoin oral suspension 125 mg/5ml	G	
phenytoin oral tablet chewable	G	
phenytoin sodium extended	G	
primidone oral tablet 250 mg, 50 mg	G	
QUDEXY XR	NPB	ST

Drug Name	Drug Tier	Restrictions / Limits
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 oral capsule er 24 hour sprinkle	G	
topiramate er oral capsule extended release 24 hour	G	ST
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	
ZONISADE	NPB	PA
zonisamide oral	G	
ZTALMY	NPB-S	PA
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl	G	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)
rivastigmine tartrate	G	M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
Antidepressants		
amitriptyline hcl oral	G	
amoxapine	G	
AUVELITY	NPB	ST; QL (2 EA per 1 day)
bupropion hcl er (sr)	G	M
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	G	M
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
doxepin hcl oral capsule	G	
doxepin hcl oral concentrate	G	
duloxetine hcl oral	G	M
EMSAM	NPB	
escitalopram oxalate oral	G	M
FETZIMA	NPB	ST; M; QL (1 EA per 1 day)
FETZIMA TITRATION	NPB	ST; M; QL (28 EA per 365 days)
fluoxetine hcl oral capsule	G	M
fluoxetine hcl oral capsule delayed release	G	M
fluoxetine hcl oral solution	G	M
fluoxetine hcl oral tablet 10 mg, 60 mg	G	M
fluvoxamine maleate	G	M
fluvoxamine maleate er	G	M
imipramine hcl oral	G	
imipramine pamoate	G	
LYBALVI	NPB	ST; QL (1 EA per 1 day)
MARPLAN	NPB	
mirtazapine oral	G	
NARDIL	NPB	
nefazodone hcl	G	M
NORPRAMIN	NPB	
nortriptyline hcl oral	G	
olanzapine-fluoxetine hcl	G	

Drug Name	Drug Tier	Restrictions / Limits
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	
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 (2 EA per 365 days)
vilazodone hcl	G	M
Antiemetics - Drugs for Nausea and Vomiting		
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 pak 80 & 125mg	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	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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	
promethazine hcl oral	G	
promethazine hcl rectal	G	
promethegan	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)
Antifungals		
ANCOBON	NPB	
BREXAFEMME	NPB	ST; QL (4 EA per 1 day)
ciclodan	G	
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	
EXODERM	NPB	

Drug Name	Drug Tier	Restrictions / Limits
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	
miconazole 3	G	
MYCOZYL AL	NPB	
naftifine hcl external gel	G	
NOXAFIL ORAL PACKET	NPB	PA
NOXAFIL ORAL SUSPENSION	NPB	PA
nyamyc	G	
nystatin external	G	
nystatin mouth/throat	G	
nystatin oral	G	
nystatin-triamcinolone	G	
nystop	G	
posaconazole oral	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
Antigout Agents		
allopurinol oral tablet 100 mg, 300 mg	G	M
colchicine oral	G	
colchicine-probenecid	G	
COLCRYS	NPB	ST
febuxostat	G	ST; M
MITIGARE	NPB	ST
probenecid	G	M
Antimigraine Agents		
AIMOVIK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	PB	PA; M; QL (0.04 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
AIMOVIG	PB	PA; M; QL (0.07 ML per 1 day)
AJOVY	PB	PA; M; QL (0.06 ML 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 AUTO-INJECTOR 120 MG/ML	NPB	PA; M; QL (0.04 ML per 1 day)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	PB	PA; M; QL (0.1 ML per 1 day)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	NPB	PA; M; QL (0.04 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)
IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML	NPB	ST; QL (0.17 ML per 1 day)
IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML	NPB	ST; QL (0.17 ML per 1 day)
MIGERGOT	NPB	PA; QL (0.72 EA 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)
REYVOW	NPB	PA; QL (0.14 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)
TRUDHESA	NPB	PA; QL (0.43 ML per 1 day)
UBRELVY	PB	PA; QL (0.34 EA per 1 day)
ZAVZPRET	NPB	PA; QL (0.2 EA per 1 day)
zolmitriptan	G	QL (0.4 EA per 1 day)
Antimyasthenic Agents		
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
Antimycobacterials		
cycloserine oral	G	
dapsone oral	G	
ethambutol hcl oral	G	
isoniazid oral	G	
MYAMBUTOL	NPB	
MYCOBUTIN	NPB	
PRETOMANID	NPB	
PRIFTIN	NPB	
pyrazinamide oral	G	
rifabutin	G	
rifampin oral	G	
SIRTURO	NPB	
TRECTOR	NPB	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet 250 mg	G-S	PA
ALECENSA	PB-S	PA
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
AYVAKIT	PB-S	PA; QL (1 EA per 1 day)
BALVERSA	PB-S	PA
BESREMI	NPB-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
capecitabine	G-S	
CAPRELSA ORAL TABLET 100 MG	PB-S	PA; QL (2 EA per 1 day)
CAPRELSA ORAL TABLET 300 MG	PB-S	PA

Drug Name	Drug Tier	Restrictions / Limits
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	
cytarabine (pf)	G-S	
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	
floxuridine	G-S	
FOTIVDA	PB-S	PA
GAVRETO	PB-S	PA
gefitinib	G-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 420 MG	PB-S	PA; QL (1 EA per 1 day)
INLYTA	PB-S	PA
INQOVI	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
JAYPIRCA ORAL TABLET 100 MG	PB-S	PA
JAYPIRCA ORAL TABLET 50 MG	PB-S	PA; QL (1 EA per 1 day)
KISQALI FEMARA	PB-S	PA
KISQALI ORAL TABLET THERAPY PACK 200 MG	PB-S	PA
KOSELUGO	PB-S	PA
KRAZATI	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 injection solution reconstituted 50 mg, 500 mg	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	
LYTGOBI (12 MG DAILY DOSE)	PB-S	PA
LYTGOBI (16 MG DAILY DOSE)	PB-S	PA
LYTGOBI (20 MG DAILY DOSE)	PB-S	PA
MATULANE	PB-S	
MEKINIST	PB-S	PA
MEKTOVI	PB-S	PA
melphalan	G-S	

Drug Name	Drug Tier	Restrictions / Limits
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
ODOMZO	PB-S	PA
ONCASPAR	PB-S	
ONUREG	PB-S	PA
ORGOVYX	PB-S	PA
ORSERDU	PB-S	PA
PANRETIN	NPB	
pazopanib hcl	G-S	PA
PEMAZYRE	PB-S	PA; QL (1 EA per 1 day)
PIQRAY	PB-S	PA
POMALYST	PB-S	PA
PURIXAN	PB-S	
QINLOCK	PB-S	PA
RETEVMO	PB-S	PA
REVLIMID	PB-S	PA
REZLIDHIA	PB-S	PA
ROZLYTREK	PB-S	PA
RUBRACA	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)

Drug Name	Drug Tier	Restrictions / Limits
TAGRISSE ORAL TABLET 80 MG	PB-S	PA
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.75 MG, 1 MG	PB-S	PA
TALZENNA ORAL CAPSULE 0.25 MG, 0.5 MG	PB-S	PA; QL (1 EA per 1 day)
tamoxifen citrate oral tablet 10 mg	G	
tamoxifen citrate oral tablet 20 mg	G	ACA
TASIGNA	PB-S	PA
TAZVERIK	PB-S	PA
temozolomide	G-S	PA
TEPMETKO	PB-S	PA
THALOMID	PB-S	PA
thiotepa injection	G-S	
TIBSOVO	PB-S	PA
toremifene citrate	G	
tretinoin oral	G-S	
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
VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG	NPB-S	PA; QL (1 EA per 1 day)
VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG	NPB-S	PA; QL (2 EA per 1 day)
VITRAKVI	PB-S	PA
VIZIMPRO	PB-S	PA
VONJO	PB-S	PA
VOTRIENT	PB-S	PA
WELIREG	PB-S	PA
XALKORI ORAL CAPSULE	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

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
XTANDI	PB-S	PA
YONSA	PB-S	PA
ZEJULA ORAL TABLET 100 MG	PB-S	PA; QL (1 EA per 1 day)
ZEJULA ORAL TABLET 200 MG, 300 MG	PB-S	PA
ZELBORAF	PB-S	PA
ZOLINZA	PB-S	PA
ZYDELIG	PB-S	PA
ZYKADIA	PB-S	PA
Antiparasitics		
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	
CROTAN	NPB	
DARAPRIM	NPB-S	PA
EGATEN	NPB	
EMVERM	PB	
hydroxychloroquine sulfate oral	G	M
IMPAVIDO	NPB	
ivermectin oral	G	
KRINTAFEL	NPB	
LAMPIT	NPB	
MALARONE	NPB	
malathion	G	
mefloquine hcl	G	
MEPRON	NPB	
NATROBA	NPB	ST
NEBUPENT	NPB	
nitazoxanide oral	G	
OVIDE	NPB	
pentamidine isethionate	G	
permethrin external	G	

Drug Name	Drug Tier	Restrictions / Limits
praziquantel oral	G	
primaquine phosphate	G	
pyrimethamine oral	G-S	PA
PYRIMETHAMINE-LEUCOVORIN	NPB	
QUALAQUIN	NPB	PA
quinine sulfate	G	PA
spinosad	G	
STROMECTOL	NPB	
sulfurated lime	G	
Antiparkinson Agents		
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
COMTAN	NPB	M
entacapone	G	M
INBRIJA	NPB-S	PA
NEUPRO	NPB	M
NOURIANZ	NPB	PA
ONGENTYS	NPB	ST
OSMOLEX ER	NPB	PA; M
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
TASMAR	NPB	M
tolcapone	G	M
trihexyphenidyl hcl	G	

Drug Name	Drug Tier	Restrictions / Limits
Antiplatelets		
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
PLAVIX	NPB	ST; M
prasugrel hcl	G	M
ZONTIVITY	NPB	M
Antipsychotics - Drugs for Mood Disorders		
ABILIFY ASIMTUFII	NPB	
ABILIFY MAINTENA	NPB	
ADASUVE	NPB	PA
aripiprazole	G	
ARISTADA	NPB	
ARISTADA INITIO	NPB	
asenapine maleate	G	
CAPLYTA	NPB	ST; QL (1 EA per 1 day)
chlorpromazine hcl oral	G	
clozapine	G	
FANAPT	NPB	ST; QL (2 EA per 1 day)
FANAPT TITRATION PACK	NPB	ST; QL (8 EA per 180 days)
fluphenazine decanoate injection	G	
fluphenazine hcl	G	
GEODON INTRAMUSCULAR	NPB	
HALDOL DECANOATE	NPB	
haloperidol decanoate intramuscular	G	
haloperidol lactate oral	G	
haloperidol oral	G	
INVEGA	NPB	
INVEGA HAFYERA	NPB	ST
INVEGA SUSTENNA	NPB	
INVEGA TRINZA	NPB	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	NPB	ST; QL (1 EA per 1 day)
LATUDA ORAL TABLET 80 MG	NPB	ST; QL (2 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
loxapine succinate	G	
lurasidone hcl	G	
molindone hcl	G	
NUPLAZID	NPB	PA
olanzapine	G	
paliperidone er	G	
PERSERIS	NPB	
pimozide	G	
quetiapine fumarate	G	
quetiapine fumarate er	G	
REXULTI	NPB	
RISPERDAL CONSTA	NPB	
RISPERDAL ORAL SOLUTION	NPB	ST; QL (8 ML per 1 day)
risperidone	G	
SECUADO	NPB	ST; QL (1 EA per 1 day)
thioridazine hcl oral	G	
thiothixene	G	
trifluoperazine hcl	G	
UZEDY	NPB	
VERSACLOZ	NPB	
VRAYLAR	NPB	
ziprasidone hcl	G	
ziprasidone mesylate	G	
ZYPREXA INTRAMUSCULAR	NPB	ST
ZYPREXA RELPREVV	NPB	
ZYPREXA ZYDIS	NPB	
Antivirals		
abacavir sulfate	G	
abacavir sulfate-lamivudine	G	
acyclovir external ointment	G	QL (1 GM per 1 day)
acyclovir oral	G	
adefovir dipivoxil	G	
APTIVUS	PB	
atazanavir sulfate	G	
BARACLUDE ORAL SOLUTION	NPB	QL (630 ML per 30 days)
BIKTARVY	NPB	
CIMDUO	PB	
COMBIVIR	NPB	

Drug Name	Drug Tier	Restrictions / Limits
COMPLERA	NPB	
darunavir	G	
DELSTRIGO	NPB	
DESCOVY ORAL TABLET 120-15 MG	NPB	
DESCOVY ORAL TABLET 200-25 MG	NPB	PA; ACA
DOVATO	PB	
EDURANT	PB	
efavirenz	G	
efavirenz-emtricitab-tenofo df	G	
efavirenz-lamivudine-tenofovir	G	
emtricitabine	G	
emtricitabine-tenofovir df	G	ACA
EMTRIVA ORAL CAPSULE	NPB	
EMTRIVA ORAL SOLUTION	PB	
entecavir	G	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	
EPZICOM	NPB	
etravirine	G	
EVOTAZ	PB	
famciclovir oral	G	
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)
INTELENCE ORAL TABLET 100 MG, 200 MG	NPB	
INTELENCE ORAL TABLET 25 MG	PB	
ISENTRESS	PB	
ISENTRESS HD	PB	
JULUCA	PB	
KALETRA	NPB	
LAGEVRIO	NPB	QL (8 EA per 1 day)
lamivudine	G	

Drug Name	Drug Tier	Restrictions / Limits
lamivudine-zidovudine	G	
LEDIPASVIR-SOFOSBUVIR	NPB-S	PA; QL (1 EA per 1 day)
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 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)	PB	QL (4 EA per 1 day)
PAXLOVID (300/100)	PB	QL (6 EA per 1 day)
PEGASYS	PB-S	PA
PIFELTRO	NPB	
PREVYMIS ORAL	NPB-S	
PREZCOBIX	PB	
PREZISTA ORAL SUSPENSION	PB	
PREZISTA ORAL TABLET 150 MG, 75 MG	PB	
PREZISTA ORAL TABLET 600 MG, 800 MG	NPB	
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	
rimantadine hcl	G	
ritonavir	G	
RUKOBIA	PB	
SELZENTRY ORAL SOLUTION	PB	PA
SELZENTRY ORAL TABLET 25 MG, 75 MG	PB	PA

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
SOFOSBUVIR-VELPATASVIR	NPB-S	PA; QL (1 EA per 1 day)
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)
STRIBILD	NPB	
SUNLENCA	NPB	PA
SYMFI	PB	
SYMFI LO	PB	
SYMTUZA	NPB	
TAMIFLU ORAL SUSPENSION RECONSTITUTED	NPB	QL (360 ML per 365 days)
TEMBEXA	NPB	
tenofovir disoproxil fumarate	G	ACA
TIVICAY	NPB	
TIVICAY PD	NPB	
TPOXX ORAL	NPB	
TRIUMEQ	PB	
TRIUMEQ PD	NPB	
TYBOST	PB	
valacyclovir hcl oral	G	QL (4 EA per 1 day)
valganciclovir hcl	G	
VEMLIDY	NPB	ST
VIRACEPT	PB	
VIRAZOLE	NPB	
VIREAD ORAL POWDER	PB	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	PB	
VOCABRIA	NPB	PA
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	
Anxiolytics - Drugs for Anxiety		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg	G	QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
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)
meprobamate	G	
oxazepam	G	QL (4 EA per 1 day)
quazepam	G	QL (1 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
triazolam	G	QL (2 EA per 1 day)
VISTARIL	NPB	
Bipolar Agents - Drugs for Mood Disorders		
EQUETRO	NPB	
lithium	G	
lithium carbonate er	G	
lithium carbonate oral	G	
Blood Products and Modifiers - Drugs for Blood Disorders		
AGRYLIN	NPB	M
aminocaproic acid oral	G	
anagrelide hcl	G	M
ASTRINGYN	NPB	
DOPTELET	NPB-S	PA
FULPHILA	NPB-S	PA
LEUKINE	NPB-S	PA
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	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
ACCUPRIL	NPB	M
ACCURETIC	NPB	M
acebutolol hcl oral	G	M
acetazolamide sodium	G	
ALDACTONE	NPB	M
aliskiren fumarate	G	M
amiloride hcl oral	G	M
amiloride-hydrochlorothiazide	G	M
amiodarone hcl oral	G	M
amlodipine besylate oral	G	M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
amlodipine besylate-benazepril hcl	G	M
amlodipine besylate-valsartan	G	M
amlodipine-atorvastatin	G	M
amlodipine-olmesartan	G	M
amlodipine-valsartan-hctz	G	M
atenolol oral	G	M
atenolol-chlorthalidone	G	M
ATORVALIQ	NPB	PA; 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
betaxolol hcl oral	G	M
BIDIL	NPB	M
bisoprolol fumarate oral	G	M
bisoprolol-hydrochlorothiazide	G	M
bumetanide oral	G	M
BUMEX	NPB	M
CAMZYOS	NPB-S	PA; QL (1 EA per 1 day)
candesartan cilexetil	G	M
candesartan cilexetil-hctz	G	M
captopril oral	G	M
captopril-hydrochlorothiazide	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
clonidine hcl oral	G	M
colesevelam hcl oral tablet	G	M
COLESTID	NPB	ST; M
COLESTID FLAVORED	NPB	ST; 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)

Drug Name	Drug Tier	Restrictions / Limits
DEMSER	NPB	PA; QL (16 EA per 1 day)
DIBENZYLIN	NPB	PA
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
EDECRIN	NPB	M
enalapril maleate oral tablet	G	M
enalapril-hydrochlorothiazide	G	M
ENTRESTO	PB	M; QL (2 EA per 1 day)
epiphenone	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
fenofibric acid oral capsule delayed release	G	M
flecainide acetate	G	M
fosinopril sodium	G	M
fosinopril sodium-hctz	G	M
furosemide oral	G	M
gemfibrozil oral	G	M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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
INPEFA	NPB	ST
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)
KAPSPARGO SPRINKLE	NPB	ST; M
labetalol hcl oral	G	M
LANOXIN ORAL	PB	M
LASIX	NPB	ST; M
lisinopril oral	G	M
lisinopril-hydrochlorothiazide	G	M
LIVALO	NPB	ST; 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
MAXZIDE	NPB	M
MAXZIDE-25	NPB	M
METHYLDOPA	NPB	M
metolazone	G	M

Drug Name	Drug Tier	Restrictions / Limits
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
nebivolol hcl	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
NITROSTAT	NPB	ST; M
NORLIQVA	NPB	PA; 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
phenoxybenzamine hcl oral	G	PA
pindolol	G	M

Drug Name	Drug Tier	Restrictions / Limits
pitavastatin calcium	G	M
PRALUENT	NPB	PA; QL (0.08 ML per 1 day)
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
QUESTRAN	NPB	ST; M
QUESTRAN LIGHT	NPB	ST; 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
SOAANZ	NPB	PA; M
sotalol hcl (af)	G	M
sotalol hcl oral	G	M
SOTYLIZE	NPB	M
spironolactone oral tablet	G	M
spironolactone-hctz	G	M
taztia xt	G	M
TEKTURNA	PB	M
telmisartan	G	M
telmisartan-amlodipine	G	M
telmisartan-hctz	G	M

Drug Name	Drug Tier	Restrictions / Limits
TENORETIC 100	NPB	M
TENORETIC 50	NPB	M
THALITONE	NPB	M
tiadylt er	G	M
TIAZAC	NPB	M
TIKOSYN	NPB	ST
timolol maleate oral	G	M
toremide	G	M
trandolapril	G	M
trandolapril-verapamil hcl er	G	M
triamterene oral	G	M
triamterene-hctz	G	M
TRICOR	NPB	ST; M
TRILIPIX	NPB	M
valsartan oral tablet	G	M
valsartan-hydrochlorothiazide	G	M
VASCEPA	PB	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)
Central Nervous System Agents		
SKYCLARYS	NPB-S	PA
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
ADDERALL	NPB	
ADDERALL XR	NPB	ST; QL (2 EA per 1 day)
ADZENYS XR-ODT	NPB	QL (1 EA per 1 day)
amphetamine sulfate	G	
amphetamine-dextroamphetamine	G	
amphetamine-dextroamphetamine er	G	
amphet-dextroamphet 3-bead er	G	
APTENSIO XR	NPB	ST; QL (1 EA per 1 day)
atomoxetine hcl	G	

Drug Name	Drug Tier	Restrictions / Limits
AZSTARYS	PB	ST; QL (1 EA per 1 day)
clonidine hcl er oral tablet extended release 12 hour	G	
CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG	NPB	ST; QL (1 EA per 1 day)
CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG	NPB	ST; QL (2 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG	NPB	QL (3 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 25.9 MG	NPB	QL (2 EA per 1 day)
COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 8.6 MG	NPB	QL (6 EA per 1 day)
dexmethylphenidate hcl	G	
dexmethylphenidate hcl er	G	
dextroamphetamine sulfate	G	
dextroamphetamine sulfate er	G	
DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE	NPB	QL (8 ML per 1 day)
DYANAVEL XR ORAL TABLET CHEWABLE EXTENDED RELEASE	NPB	QL (1 EA per 1 day)
EVEKEO	NPB	QL (6 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 10 MG, 5 MG	NPB	ST; QL (3 EA per 1 day)
EVEKEO ODT ORAL TABLET DISPERSIBLE 15 MG, 20 MG	NPB	ST; QL (2 EA per 1 day)
FOCALIN	NPB	QL (2 EA per 1 day)
guanfacine hcl er	G	
JORNAY PM	NPB	ST; QL (1 EA per 1 day)
KAPVAY	NPB	ST
lisdexamfetamine dimesylate	G	
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	
methylphenidate hcl er	G	
methylphenidate hcl er (cd)	G	
methylphenidate hcl er (la)	G	
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	G	
methylphenidate hcl er (xr)	G	
methylphenidate hcl oral	G	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
MYDAYIS	NPB	QL (1 EA per 1 day)
PROCENTRA	NPB	ST; QL (60 ML per 1 day)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG	NPB	QL (1 EA per 1 day)
QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 200 MG	NPB	QL (2 EA per 1 day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 40 MG	NPB	QL (1 EA per 1 day)
QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 30 MG	NPB	QL (2 EA per 1 day)
QUILLIVANT XR	NPB	QL (12 ML per 1 day)
VYVANSE	NPB	ST; QL (1 EA per 1 day)
ZENZEDI ORAL TABLET 10 MG	NPB	QL (6 EA per 1 day)
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG	NPB	QL (3 EA per 1 day)
ZENZEDI ORAL TABLET 30 MG	NPB	QL (2 EA per 1 day)
Central Nervous System Agents - Drugs for Multiple Sclerosis		
AMPYRA	NPB-S	PA; QL (2 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	NPB-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)
EXTAVIA	NPB-S	PA; QL (0.5 EA per 1 day)
fingolimod hcl	G-S	PA; QL (1 EA per 1 day)
GILENYA ORAL CAPSULE 0.25 MG	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)

Drug Name	Drug Tier	Restrictions / Limits
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 12 X 0.25 MG	NPB-S	PA; QL (24 EA per 365 days)
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG	NPB-S	PA; QL (14 EA per 365 days)
PLEGRIDY	NPB-S	PA; QL (0.04 ML per 1 day)
PLEGRIDY STARTER PACK	NPB-S	PA; QL (0.04 ML per 1 day)
PONVORY	NPB-S	PA; QL (1 EA per 1 day)
PONVORY STARTER PACK	NPB-S	PA; QL (2 EA per 365 days)
REBIF	NPB-S	PA; QL (0.22 ML per 1 day)
REBIF REBIDOSE	NPB-S	PA; QL (0.22 ML per 1 day)
REBIF REBIDOSE TITRATION PACK	NPB-S	PA; QL (4.2 ML per 365 days)
REBIF TITRATION PACK	NPB-S	PA; QL (4.2 ML per 365 days)
TASCENSO ODT	NPB-S	PA; QL (1 EA per 1 day)
teriflunomide	G-S	PA; QL (1 EA per 1 day)
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 (56 EA per 365 days)
Central Nervous System Agents - Miscellaneous		
ADIPEX-P	NPB	PA
AUSTEDO	NPB-S	PA
AUSTEDO PATIENT TITRATION KIT	NPB-S	PA
AUSTEDO XR	NPB-S	PA
AUSTEDO XR PATIENT TITRATION	NPB-S	PA
benzphetamine hcl	G	
caffeine citrate oral	G	
CONTRACE	NPB	PA
DAYBUE	NPB-S	PA
diethylpropion hcl er	G	
diethylpropion hcl oral	G	
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 450 MG, 600 MG	NPB	ST; QL (3 EA per 1 day)
GRALISE ORAL TABLET 750 MG, 900 MG	NPB	ST; QL (2 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
HORIZANT	NPB	PA; QL (2 EA per 1 day)
IMCIVREE	NPB-S	PA; QL (0.3 ML per 1 day)
INGREZZA	NPB-S	PA
LOMAIRA	NPB	PA
LYRICA ORAL SOLUTION	NPB	ST; QL (30 ML per 1 day)
NUDEXTA	NPB	PA
ORLISTAT ORAL	NPB	PA
phendimetrazine tartrate	G	
phendimetrazine tartrate er	G	
phentermine hcl oral	G	
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	PB-S	PA
RADICAVA ORS STARTER KIT	PB-S	PA
RELYVRIO	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	PB	PA; QL (20 ML per 1 day)
WEGOVY	NPB	PA
XENICAL	NPB	PA
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
AQUORAL	NPB	
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
FLUORIDEX	NPB	M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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
kourzeq	G	
lidocaine viscous hcl	G	
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	
sf	G	M
sf 5000 plus	G	M
sodium fluoride 5000 plus	G	M
sodium fluoride 5000 ppm	G	M
sodium fluoride dental	G	M
triamcinolone acetonide mouth/throat	G	
VANISH	NPB	M
Dermatological Agents - Drugs for Skin Conditions		
ABSORICA LD	NPB	PA
accutane	G	
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)
AKLIEF	NPB	PA

Drug Name	Drug Tier	Restrictions / Limits
ala-cort	G	
alclometasone dipropionate	G	
ALTRENO	NPB	PA
amcinonide external lotion	G	
ammonium lactate external	G	
amnesteem	G	
AMZEEQ	NPB	
AQUACEL AG BURN	NPB	
ATRALIN	NPB	PA
azelaic acid external	G	
B & C	NPB	
balsam peru-castor oil	G	
BENZAMYCIN	NPB	ST
benzoyl peroxide-erythromycin	G	
betamethasone dipropionate aug	G	
betamethasone dipropionate external	G	
betamethasone valerate external	G	
BPCO	NPB	
brimonidine tartrate external	G	
calcipotriene external	G	
calcipotriene-betameth diprop external suspension	G	QL (4 GM per 1 day)
CALCITRENE	NPB	
calcitriol external	G	
CARAC	NPB	
CIBINQO	PB-S	PA; QL (1 EA per 1 day)
claravis	G	
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	
clobetasol prop emollient base	G	
clobetasol propionate e	G	

Drug Name	Drug Tier	Restrictions / Limits
clobetasol propionate external	G	
CLOBEX	NPB	ST
CLOBEX SPRAY	NPB	ST
clodan external shampoo	G	
coal tar external	G	
CONDYLOX	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)
DIFFERIN EXTERNAL CREAM	NPB	PA
DIPROLENE	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 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	
ENSTILAR	NPB	QL (15 GM per 1 day)
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	

Drug Name	Drug Tier	Restrictions / Limits
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	
hydrocortisone butyrate external cream	G	
hydrocortisone butyrate external ointment	G	
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	
HYFTOR	NPB	PA
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	
ivermectin external cream	G	
KERALYT EXTERNAL SHAMPOO	NPB	
KLARON	NPB	
KLISYRI	NPB	ST
lactic acid e	G	
lactic acid external	G	
LITFULO	NPB-S	PA; QL (1 EA per 1 day)
methoxsalen rapid	G	
METROCREAM	NPB	
METROGEL	NPB	ST
METROLOTION	NPB	
metronidazole external	G	
MIRVASO	NPB	
mometasone furoate external	G	

Drug Name	Drug Tier	Restrictions / Limits
NEO-SYNALAR EXTERNAL CREAM	NPB	
neuac	G	
ONEXTON	NPB	
OPZELURA	PB	ST; QL (2.2 GM per 1 day)
pimecrolimus	G	ST; QL (2 GM per 1 day)
podofilox external	G	
PYROGALLIC ACID	NPB	
QBREXZA	NPB	QL (1 EA per 1 day)
REGENECARE	NPB	
REGRANEX	NPB	PA
RETIN-A	NPB	PA
RETIN-A MICRO PUMP EXTERNAL GEL 0.06 % %, 0.08 %	NPB	PA
RHOFADE	NPB	
SANTYL	NPB	QL (3 GM per 1 day)
selenium sulfide external lotion	G	
SOOLANTRA	NPB	
sulfacetamide sodium (acne)	G	
sulfacetamide sodium-sulfur external liquid 10-5 %	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	PA
tazarotene external gel	G	PA
TAZORAC EXTERNAL CREAM 0.05 %	NPB	PA
TOLAK	NPB	
TOPICORT EXTERNAL CREAM 0.25 %	NPB	
TOPICORT EXTERNAL GEL	NPB	
TOPICORT EXTERNAL OINTMENT	NPB	
TOPICORT SPRAY	NPB	ST
tretinoin external	G	
tretinoin microsphere pump external gel 0.08 %	G	
triamcinolone acetonide external cream	G	
triamcinolone acetonide external lotion	G	
triamcinolone acetonide external ointment 0.025 % %, 0.1 %, 0.5 %	G	
triderm	G	
TWYNEO	NPB	

Drug Name	Drug Tier	Restrictions / Limits
VECTICAL	NPB	ST
VELTIN	NPB	ST
VENELEX	NPB	
VTAMA	NPB	PA
WINLEVI	NPB	PA
WYNZORA	NPB	QL (15 GM per 1 day)
XALIX	NPB	
XERAC AC	NPB	
zenatane	G	
ZILXI	NPB	ST
ZORYVE	NPB	PA
ZYCLARA	NPB	ST
ZYCLARA PUMP EXTERNAL CREAM 3.75 %	NPB	ST
Diabetes - Antidiabetic Agents		
acarbose oral	G	M
ALOGLIPTIN BENZOATE	NPB	ST; M
ALOGLIPTIN-METFORMIN HCL	NPB	ST; M
ALOGLIPTIN-PIOGLITAZONE	NPB	ST; 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	M
glimepiride	G	M
glipizide er	G	M
glipizide oral tablet 10 mg, 5 mg	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	M
INVOKAMET	NPB	ST; M
INVOKAMET XR	NPB	ST; M
INVOKANA	NPB	ST; M

Drug Name	Drug Tier	Restrictions / Limits
JANUMET	PB	ST; M
JANUMET XR	PB	ST; M
JANUVIA	PB	ST; M
JARDIANCE	PB	M
JENTADUETO	PB	ST; M
JENTADUETO XR	PB	ST; M
KAZANO	NPB	ST; M
KOMBIGLYZE XR	NPB	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
NESINA	NPB	ST; M
ONGLYZA	NPB	ST; M
OSENI	NPB	ST; M
OZEMPIC	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
QTERN	NPB	ST; 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)
saxagliptin hcl	G	ST; M
saxagliptin-metformin er	G	ST; M
SEGLUROMET	NPB	ST; M
SOLIQUA	PB	ST; M; QL (0.6 ML per 1 day)
STEGLATRO	NPB	ST; M
STEGLUJAN	NPB	ST; M
SYMLINPEN 120	NPB	PA; M
SYMLINPEN 60	NPB	PA; M
SYNJARDY	PB	M
SYNJARDY XR	PB	M
TRADJENTA	PB	ST

Drug Name	Drug Tier	Restrictions / Limits
TRIJARDY XR	PB	
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	M
XULTOPHY	NPB	ST; M; QL (0.5 ML per 1 day)
Diabetes - Glucose Monitoring		
ACCU-CHEK AVIVA PLUS KIT W/DEVICE	NPB	ST; OTC
ACCU-CHEK AVIVA PLUS TEST STRIPS	NPB	ST; OTC; QL (10 EA per 1 day)
ACCU-CHEK GUIDE TEST STRIPS	NPB	ST; OTC
ACCU-CHEK GUIDE TEST STRIPS	NPB	ST; OTC; QL (10 EA per 1 day)
ACCU-CHEK GUIDE KIT W/DEVICE	NPB	ST; OTC
ACCU-CHEK SMARTVIEW TEST STRIPS	NPB	ST; OTC; QL (10 EA per 1 day)
AGAMATRIX PRESTO TEST	NPB	ST; OTC; QL (10 EA per 1 day)
ASSURE PLATINUM	NPB	OTC; QL (10 EA per 1 day)
BIOTEL CARE BLOOD GLUCOSE	NPB	ST; OTC
BIOTEL CARE BLOOD GLUCOSE SYST	NPB	ST; OTC
BLOOD GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
BLOOD GLUCOSE TEST STRIPS 333	NPB	ST; OTC; QL (10 EA per 1 day)
BLULINK GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
CARETOUCH TEST	NPB	ST; OTC; QL (10 EA per 1 day)
CHEMSTRIP UGK	NPB	OTC
CONTOUR MONITOR KIT W/DEVICE	PB	OTC
CONTOUR NEXT EZ KIT W/DEVICE	PB	OTC
CONTOUR NEXT GEN MONITOR KIT	PB	OTC
CONTOUR NEXT LINK KIT W/DEVICE	PB	OTC
CONTOUR NEXT MONITOR KIT W/DEVICE	PB	OTC
CONTOUR NEXT GEN 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)
DEXCOM G7 RECEIVER	PB	PA; QL (1 EA per 273 days)
DEXCOM G7 SENSOR	PB	PA; QL (0.1 EA per 1 day)
DIATHRIVE BLOOD GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
DIATHRIVE GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
DIATHRIVE+ GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
EASY TALK PLUS II TEST STRIPS	NPB	ST; OTC; QL (10 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
EASY TOUCH HEALTHPRO GLUCOSE	NPB	ST; OTC
EASY TOUCH HEALTHPRO GLUCOSE IN VITRO	NPB	ST; OTC; QL (10 EA per 1 day)
EASY TRAK II GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
EMBRACE TALK GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
EMBRACE TALK MONITORING SYSTEM	NPB	ST; OTC
EMBRACE WAVE BLOOD GLUCOSE IN VITRO	NPB	ST; OTC; QL (10 EA per 1 day)
FORA 6 CONNECT IN VITRO	NPB	ST; OTC; QL (10 EA per 1 day)
FORA 6 CONNECT/GTEL TEST	NPB	OTC; QL (10 EA per 1 day)
FORA GTEL BLOOD GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
FORA TN'G ADVANCE PRO IN VITRO	NPB	ST; OTC; QL (10 EA per 1 day)
FORTISCARE G1 TEST STRIP	NPB	ST; OTC; QL (10 EA per 1 day)
FREESTYLE FREEDOM LITE	NPB	ST; OTC
FREESTYLE INSULINX TEST	NPB	ST; OTC; QL (10 EA per 1 day)
FREESTYLE LIBRE 14 DAY READER	PB	PA; QL (1 EA per 273 days)
FREESTYLE LIBRE 14 DAY SENSOR	PB	PA; QL (0.072 EA per 1 day)
FREESTYLE LIBRE 2 READER	PB	PA; QL (1 EA per 273 days)
FREESTYLE LIBRE 2 SENSOR	PB	PA; QL (0.1 EA per 1 day)
FREESTYLE LIBRE 3 SENSOR	PB	PA
FREESTYLE LIBRE READER	PB	PA; QL (1 EA per 273 days)
FREESTYLE LITE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
FREESTYLE PRECISION NEO TEST	NPB	ST; OTC; QL (10 EA per 1 day)
FREESTYLE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
GHT BLOOD GLUCOSE MONITOR	NPB	ST; OTC
GLUCOCARD 01 SENSOR PLUS	NPB	ST; OTC; QL (10 EA per 1 day)
GLUCOCARD EXPRESSION TEST	NPB	ST; OTC; QL (10 EA per 1 day)
GLUCOCARD SHINE CONNEX	NPB	OTC
GLUCOCARD SHINE EXPRESS	NPB	OTC
GLUCOCARD SHINE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
GLUCOCARD VITAL TEST	NPB	ST; OTC; QL (10 EA per 1 day)
GOJJI BLOOD GLUCOSE TEST	NPB	OTC; QL (10 EA per 1 day)
HW EMBRACE PRO GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
HW EMBRACE TALK GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
INFINITY BLOOD GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
KETO-DIASTIX	NPB	OTC
KROGER HEALTHPRO GLUCOSE TEST	NPB	OTC; QL (10 EA per 1 day)
LANCETS IN VITRO STRIP	NPB	OTC; QL (10 EA per 1 day)
MICRODOT TEST	NPB	ST; OTC; QL (10 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
ONE DROP BLOOD GLUCOSE MONITOR	NPB	ST; OTC
ONE DROP TEST	NPB	ST; OTC; QL (10 EA per 1 day)
ONETOUCH ULTRA 2 KIT W/DEVICE	PB	OTC
ONETOUCH ULTRA IN VITRO STRIP	PB	OTC; QL (10 EA per 1 day)
ONETOUCH VERIO FLEX SYSTEM KIT	PB	OTC
ONETOUCH VERIO REFLECT KIT W/DEVICE	PB	OTC
ONETOUCH VERIO STRIP IN VITRO	NPB	OTC; QL (10 EA per 1 day)
ONETOUCH VERIO STRIP IN VITRO	PB	OTC; QL (10 EA per 1 day)
PIP BLOOD GLUCOSE TEST STRIP	NPB	ST; OTC; QL (10 EA per 1 day)
POGO AUTOMATIC TEST CARTRIDGES	NPB	ST; OTC; QL (10 EA per 1 day)
PRECISION XTRA BLOOD GLUCOSE	NPB	ST; OTC; QL (10 EA per 1 day)
PRODIGY NO CODING BLOOD GLUC	NPB	ST; OTC
PTS PANELS EGLU TEST	NPB	ST; OTC; QL (10 EA per 1 day)
RELION PREMIER TEST	NPB	ST; OTC; QL (10 EA per 1 day)
RIGHTEST GT333 BLOOD GLUCOSE IN VITRO	NPB	ST; OTC; QL (10 EA per 1 day)
RIGHTEST GT333 GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
TEMPO WELCOME	NPB	ST
TRUE METRIX BLOOD GLUCOSE TEST	NPB	ST; OTC; QL (10 EA per 1 day)
TRUE METRIX METER KIT	NPB	ST; OTC
TRUE METRIX PRO BLOOD GLUCOSE	NPB	ST; OTC; QL (10 EA per 1 day)
TRUETRACK TEST	NPB	ST; OTC; QL (10 EA per 1 day)
VIVAGUARD INO TEST STRIPS	NPB	ST; OTC; QL (10 EA per 1 day)
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	PB	
BAQSIMI TWO PACK	PB	
diazoxide oral	G	M
GLUCAGEN HYPOKIT	NPB	ST
glucagon emergency kit 1 mg injection	G	
GLUCAGON EMERGENCY KIT 1 MG INJECTION	NPB	ST
GLUCAGON EMERGENCY KIT	PB	
GVOKE HYPOPEN 1-PACK	NPB	ST
GVOKE HYPOPEN 2-PACK	NPB	ST
GVOKE KIT	NPB	ST
GVOKE PFS	NPB	ST
PROGLYCEM	NPB	M
ZEGALOGUE	PB	

Drug Name	Drug Tier	Restrictions / Limits
Diabetes - Insulins		
ADMELOG	PB	M
ADMELOG SOLOSTAR	PB	M
AFREZZA	NPB	PA; M
APIDRA SOLOSTAR	PB	M
APIDRA VIAL	PB	M
BASAGLAR KWIKPEN	PB	M
BD ULTRA-FINE INSULIN SYRINGES	NPB	OTC
FIASP	PB	M
FIASP FLEXTOUCH	PB	M
FIASP PENFILL	PB	M
FIASP PUMPCART	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 SOLUTION 100 UNIT/ML INJECTION	PB	M
HUMALOG SOLUTION 100 UNIT/ML INJECTION	PB	M
HUMALOG SUBCUTANEOUS	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 SOLUTION 100 UNIT/ML INJECTION	PB	M; OTC
HUMULIN R SOLUTION 100 UNIT/ML INJECTION	PB	M; OTC
HUMULIN R U-500 KWIKPEN	PB	M
HUMULIN R U-500 VIAL	PB	M
INSULIN ASP PROT & ASP FLEXPEN	PB	PA; M
INSULIN ASPART	PB	PA; M
INSULIN ASPART FLEXPEN	PB	PA; M
INSULIN ASPART PENFILL	PB	PA; M
INSULIN ASPART PROT & ASPART	PB	PA; M
INSULIN DEGLUDEC	NPB	PA; M

Drug Name	Drug Tier	Restrictions / Limits
INSULIN DEGLUDEC FLEXTOUCH	NPB	PA; M
INSULIN GLARGINE	NPB	PA; M
INSULIN GLARGINE SOLOSTAR	NPB	PA; M
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION	NPB	ST
INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR	NPB	
INSULIN LISPRO	PB	M
INSULIN LISPRO (1 UNIT DIAL)	PB	M
INSULIN LISPRO JUNIOR KWIKPEN	PB	M
INSULIN LISPRO PROT & LISPRO	PB	M
INSULIN SYRINGES 29G X 1/2" 0.3 ML, 31G X 1/2" 0.3 ML	NPB	OTC
LANTUS SOLOSTAR	PB	M
LANTUS U-100 VIAL	PB	M
LEVEMIR FLEXPEN	PB	M
LEVEMIR U-100 VIAL	PB	M
LYUMJEV KWIKPEN	PB	
LYUMJEV VIAL	PB	
NOVOLIN 70/30 FLEXPEN	PB	M; OTC
NOVOLIN 70/30 FLEXPEN RELION	PB	M; OTC
NOVOLIN 70/30 RELION	PB	M; OTC
NOVOLIN 70/30 VIAL	PB	M; OTC
NOVOLIN N FLEXPEN	PB	M
NOVOLIN N FLEXPEN RELION	PB	M; OTC
NOVOLIN N RELION	PB	M; OTC
NOVOLIN N VIAL	PB	M; OTC
NOVOLIN R FLEXPEN	PB	M; OTC
NOVOLIN R FLEXPEN RELION	PB	M; OTC
NOVOLIN R RELION	PB	M; OTC
NOVOLIN R VIAL	PB	M; OTC
NOVOLOG 70/30 FLEXPEN RELION	NPB	PA; M
NOVOLOG FLEXPEN	PB	M
NOVOLOG FLEXPEN RELION	NPB	PA; M
NOVOLOG MIX 70/30 FLEXPEN	PB	M
NOVOLOG MIX 70/30 RELION	NPB	PA; M
NOVOLOG MIX 70/30 VIAL	PB	M
NOVOLOG PENFILL	PB	M
NOVOLOG RELION	NPB	PA; M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
NOVOLOG U-100 VIAL	PB	M
REZVOGLAR KWIKPEN	PB	
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION	NPB	ST
SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR	NPB	
TOUJEO MAX SOLOSTAR	PB	M
TOUJEO SOLOSTAR	PB	M
TRESIBA	PB	M
TRESIBA FLEXTOUCH	PB	M
Electrolytes / Minerals / Metals / Vitamins		
ACCRUFER	NPB	ST
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
CARNITOR ORAL	NPB	ST; M
CARNITOR SF	NPB	ST; M
CENTRATEX	NPB	
CHEMET	NPB	
corvita 150	G	
CORVITE 150 ORAL TABLET 150-1.25 MG	PB	
CUVRIOR	NPB-S	PA
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	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
ferottrinsic	G	
FERRALET 90	NPB	
FERRIPROX ORAL SOLUTION	NPB	PA
ferrocite plus	G	
FERRO-PLEX	NPB	
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	
HEMOCYTE PLUS	NPB	
hydroxocobalamin acetate	G	
ICAR-C PLUS	PB	
iferex 150 forte	G	
INTEGRA F	NPB	
INTEGRA PLUS	NPB	
iodine strong oral	G	
IRON FOLATE PLUS	NPB	
IRON FOLATE-F	NPB	
JYNARQUE	NPB-S	PA; QL (2 EA per 1 day)
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-TAB	NPB	ST; M
k-tan plus	G	
levocarnitine oral solution	G	M
levocarnitine oral tablet	G	M

Drug Name	Drug Tier	Restrictions / Limits
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	
METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED	NPB	
M-NATAL PLUS	PB	
MULTIGEN	NPB	
MULTIGEN FOLIC	NPB	
MULTIGEN PLUS	NPB	
multivitamin w/fluoride	G	
multi-vitamin/fluoride	G	
multivitamin/fluoride tablet chewable 0.25 mg oral (rx)	G	
MULTIVITAMIN/FLUORIDE TABLET CHEWABLE 0.25 MG ORAL (RX)	NPB	
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	
MULTI-VIT-FLOR	NPB	
NASCOBAL	NPB	M
NEOKE ALCAR	NPB	
NEONATAL PLUS	PB	
NEPHRON FA	NPB	
NUTRIVIT	NPB	
ONE VITE WOMENS PLUS	PB	
ORACIT	NPB	
PHOSPHA 250 NEUTRAL	NPB	
phosphorous	G	
phospho-trin 250 neutral	G	

Drug Name	Drug Tier	Restrictions / Limits
PHOSPHO-TRIN K500	NPB	
phytonadione oral	G	
pnv prenatal plus multivit+dha	G	
poly-iron 150 forte	G	
polysaccharide iron forte	G	
POLY-VI-FLOR	NPB	
POLY-VI-FLOR/IRON	NPB	
potassium chloride crys er	G	M
potassium chloride er	G	M
potassium chloride oral	G	M
potassium citrate er	G	M
prenatal oral tablet 27-1 mg	G	
prenatal plus vitamin/mineral	G	
PRENATVITE PLUS	PB	
PRENATVITE RX	PB	
purevit dualfe plus	G	
QUFLORA FE	NPB	
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	G	M; ACA
sodium polystyrene sulfonate	G	
SPS	NPB	
TANDEM PLUS	PB	
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 oral capsule 250 mg	G-S	PA
trigels-f forte	G	
TRINATE	PB	
TRI-VI-FLOR	PB	
TRI-VI-FLORO	PB	

Drug Name	Drug Tier	Restrictions / Limits
tri-vite/fluoride	G	
TULIVITE	NPB	
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	
WESNATAL DHA COMPLETE	PB	
wes-phos 250 neutral	G	
WESTAB PLUS	PB	
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
CYTOTEC	NPB	M
esomeprazole magnesium oral packet	G	M
famotidine oral suspension reconstituted	G	
misoprostol oral	G	M
NEXIUM ORAL PACKET	NPB	M
omeprazole oral capsule delayed release	G	M
pantoprazole sodium oral tablet delayed release	G	M
sucralfate oral tablet	G	M
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl	G	PA
alvimopan	G	
ANASPAZ	NPB	
atropine sulfate injection solution prefilled syringe 0.5 mg/5ml	G	
ATROPINE SULFATE INJECTION SOLUTION PREFILLED SYRINGE 0.8 MG/2ML	NPB	
bis subcit-metronid-tetracyc	G	
bismuth/metronidaz/tetracyclin	G	
CHENODAL	NPB-S	PA
CLENPIQ	NPB	
constulose	G	

Drug Name	Drug Tier	Restrictions / Limits
cromolyn sodium oral	G	
dicyclomine hcl oral	G	
diphenoxylate-atropine	G	
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	
GOLYTELY	NPB	ST
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	
lactulose encephalopathy	G	
lactulose oral solution	G	
LINZESS	PB	ST; QL (1 EA per 1 day)
LOMOTIL	NPB	
loperamide hcl oral capsule	G	
lubiprostone	G	
methscopolamine bromide oral	G	
mineral oil heavy oral	G	
MOTEGRITY	NPB	ST; QL (1 EA per 1 day)
MOVANTIK	PB	ST; QL (1 EA per 1 day)
MOVIPREP	NPB	ST
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

Drug Name	Drug Tier	Restrictions / Limits
peg-3350/electrolytes/ascorbat	G	
peg-kcl-nacl-nasulf-na asc-c	G	
PEG-PREP	NPB	
PLENVU	NPB	ST
PYLERA	NPB	ST
RELISTOR ORAL	NPB	ST; QL (3 EA per 1 day)
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML	NPB	ST; QL (0.6 ML per 1 day)
RELISTOR SUBCUTANEOUS SOLUTION 8 MG/0.4ML	NPB	ST; QL (0.4 ML per 1 day)
RESTORA RX	NPB	
SEROSTIM	NPB-S	PA
SUFLAVE	NPB	
SUPREP BOWEL PREP KIT	NPB	
SUTAB	NPB	
SYMPROIC	PB	ST; QL (1 EA per 1 day)
TALICIA	NPB	
TRULANCE	NPB	ST; QL (1 EA per 1 day)
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)
VOWST	NPB-S	PA; QL (24 EA per 365 days)
XERMELO	NPB-S	PA; QL (3 EA per 1 day)
ZORBTIVE	NPB-S	PA
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
CERDELGA	NPB-S	PA
CHOLBAM	NPB-S	PA
CREON	PB	
CRYSVITA	NPB-S	PA
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

Drug Name	Drug Tier	Restrictions / Limits
OICALIVA	NPB-S	PA; QL (1 EA per 1 day)
ORFADIN	NPB-S	PA
PALYNZIQ	NPB-S	PA
PANCREAZE	NPB	ST
PHEBURANE	NPB-S	PA
sapropterin dihydrochloride	G-S	PA
sodium phenylbutyrate oral tablet	G-S	PA
STRENSIQ	PB-S	PA
SUCRAID	NPB-S	PA
VIOKACE	NPB	ST
VOXZOGO	NPB-S	PA; QL (1 EA per 1 day)
XURIDEN	NPB-S	PA; QL (4 EA per 1 day)
yargesa	G-S	PA
ZENPEP	PB	
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
AURYXIA	NPB	ST
bethanechol chloride oral	G	
calcium acetate (phos binder)	G	
calcium acetate oral tablet 667 mg	G	
CERVIDIL	NPB	
darifenacin hydrobromide er	G	M
DEPEN TITRATABS	PB-S	M
DETROL	NPB	M
DETROL LA	NPB	M
ELMIRON	NPB	PA
fesoterodine fumarate er	G	
FILSPARI	NPB-S	PA; QL (1 EA per 1 day)
flavoxate hcl	G	M
FOSRENOL	NPB	ST
GELNIQUE	NPB	ST; M
GEMTESA	NPB	ST
INTRAROSA	NPB	ST
lanthanum carbonate	G	
LITHOSTAT	NPB	
MYRBETRIQ	PB	
oxybutynin chloride er	G	M
oxybutynin chloride oral solution	G	M

Drug Name	Drug Tier	Restrictions / Limits
oxybutynin chloride oral tablet 5 mg	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	G	
PREPIDIL	NPB	
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
uretron d/s	G	
VELPHORO	NPB	
VESICARE LS	NPB	ST; M
Genitourinary Agents - Drugs for Prostate Conditions		
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
Hormonal Agents - Adrenal		
BETAMETHASONE SODIUM PHOSPHATE INJECTION	NPB	
CORTEF	NPB	ST
dexamethasone intensol	G	
dexamethasone oral	G	
dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml	G	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
fludrocortisone acetate oral	G	M
HEXATRIONE	NPB	
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 solution	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	
Hormonal Agents - Men's Health		
ANDRODERM	PB	PA
danazol oral	G	
FORTESTA	NPB	PA
METHITEST	NPB	PA
testosterone cypionate intramuscular	G	PA
testosterone enanthate intramuscular	G	PA
testosterone transdermal	G	PA
XYOSTED	NPB	PA
Hormonal Agents - Pituitary		
ACTHAR	PB-S	PA
cabergoline	G	M
carboprost tromethamine intramuscular solution	G	
CETROTIDE	NPB-S	PA
CHORIONIC GONADOTROPIN INTRAMUSCULAR	NPB-S	PA
CLOMID	NPB	
CORTROPHIN	PB-S	PA
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)
ELIGARD SUBCUTANEOUS KIT 30 MG	NPB-S	PA; QL (0.009 EA per 1 day)

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
FIRMAGON	NPB-S	PA; QL (0.036 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
GENOTROPIN	NPB-S	PA
GENOTROPIN MINIQUICK	NPB-S	PA
GONAL-F	NPB-S	PA
GONAL-F RFF	NPB-S	PA
GONAL-F RFF REDIJECT	NPB-S	PA
HUMATROPE	NPB-S	PA
INCRELEX	PB-S	PA
ISTURISA	NPB-S	PA
LANREOTIDE ACETATE	NPB-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	NPB-S	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 30 MG	PB-S	PA
MENOPUR	NPB-S	PA
MYCAPSSA	NPB-S	PA
NGENLA	NPB-S	PA
NOCDURNA	NPB	M
NORDITROPIN FLEXPPO	PB-S	PA

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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 injection solution 100 mcg/ml, 50 mcg/ml, 500 mcg/ml	G-S	PA
octreotide acetate subcutaneous	G-S	PA
OMNITROPE	PB-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
SAIZEN	NPB-S	PA
SIGNIFOR	NPB-S	PA; QL (2 ML per 1 day)
SIGNIFOR LAR	NPB-S	PA; QL (0.04 EA per 1 day)
SKYTROFA	NPB-S	PA
SOGROYA	NPB-S	PA
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 (0.036 EA per 1 day)
TRIPTODUR	NPB-S	PA; QL (0.006 EA per 1 day)
ZOMACTON	NPB-S	PA
Hormonal Agents - Prostaglandins		
KORLYM	NPB-S	PA; QL (4 EA per 1 day)
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
EVISTA	NPB	M
OSPHENA	NPB	
raloxifene hcl	G	M; ACA
Hormonal Agents - Sex Hormones and Birth Control		
ACTIVELLA	NPB	M
afirmelle	G	M; ACA
ALORA	NPB	ST; M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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 eq	G	M; ACA
aurovela 1.5/30	G	M; ACA
aurovela 1/20	G	M; ACA
aurovela 24 fe	G	M; ACA
aurovela fe 1.5/30	G	M; ACA
aurovela fe 1/20	G	M; ACA
aviane	G	M; ACA
ayuna	G	M; ACA
azurette	G	M; ACA
BALCOLTRA	NPB	M; ACA
balziva	G	M; ACA
BEYAZ	NPB	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 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 eq	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
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	NPB	ST
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 oral tablet 0.15-0.02/0.01 mg (21/5)	G	M; ACA
DIVIGEL	NPB	M
dolishale	G	M; ACA
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	
enilloring	G	M; ACA
enpresse-28	G	M; ACA
enskyce	G	M; ACA
errin	G	M; ACA
estarylla	G	M; ACA
ESTRACE ORAL	NPB	ST; M
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

Drug Name	Drug Tier	Restrictions / Limits
falmina	G	M; ACA
FEMRING	NPB	ST; M; QL (0.012 EA per 1 day)
finzala	G	M; ACA
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
haloette	G	M; ACA
heather	G	M; ACA
iclevia	G	M; ACA; QL (1 EA per 1 day)
IMVEXXY MAINTENANCE PACK	PB	M
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)
joyeaux	G	M; ACA
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

Drug Name	Drug Tier	Restrictions / Limits
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)
levonorgest-eth estradiol-iron	G	M; ACA
levonorgestrel-ethinyl estrad	G	M; ACA
levonorg-eth estrad triphasic	G	M; ACA
levora 0.15/30 (28)	G	M; ACA
LO LOESTRIN FE	NPB	M; ACA
LOESTRIN 1.5/30 (21)	NPB	ST; M; ACA
LOESTRIN 1/20 (21)	NPB	ST; M; ACA
LOESTRIN FE 1.5/30	NPB	ST; M; ACA
LOESTRIN FE 1/20	NPB	ST; M; ACA
lojaimiess	G	M; ACA; QL (1 EA per 1 day)
loryna	G	M; ACA
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	G	
MENEST	PB	M
MENOSTAR	NPB	ST; M
merzee	G	M; ACA
mibelas 24 fe	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

Drug Name	Drug Tier	Restrictions / Limits
mili	G	M; ACA
mimvey	G	M
MINASTRIN 24 FE	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
NEXPLANON	NPB	ACA
NEXTSTELLIS	NPB	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
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
portia-28	G	M; ACA
PREMARIN ORAL	PB	M
PREMARIN VAGINAL	PB	M
PREMPHASE	PB	M
PREMPRO	PB	M

Drug Name	Drug Tier	Restrictions / Limits
progesterone intramuscular	G	
progesterone oral	G	
PROVERA	NPB	M
reclipsen	G	M; ACA
rivelsa	G	M; ACA; QL (1 EA per 1 day)
SAFYRAL	NPB	ST; M; ACA
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)
SLYND	NPB	ST; ACA
sprintec 28	G	M; ACA
sronyx	G	M; ACA
syeda	G	M; ACA
tarina 24 fe	G	M; ACA
tarina fe 1/20 eq	G	M; ACA
taysofy	G	M; ACA
TAYTULLA	NPB	ST; M; ACA
tilia fe	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
turqoz	G	M; ACA
TWIRLA	NPB	ST; ACA
TYBLUME	NPB	M; ACA
tydemy	G	M; ACA
velivet	G	M; ACA
vestura	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
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
YASMIN 28	NPB	ST; M; ACA
YAZ	NPB	M; ACA
yuvafem	G	M
zafemy	G	M; ACA
zovia 1/35 (28)	G	M; ACA
zumandimine	G	M; ACA
Hormonal Agents - Thyroid		
ADTHYZA	NPB	M
ARMOUR THYROID	NPB	M
ERMEZA	NPB	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
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 CAPSULE	NPB	ST; 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
NIVA THYROID	NPB	M
np thyroid	G	M
propylthiouracil oral	G	M
SODIUM IODIDE I-131	NPB	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 88 MCG	NPB	M

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
THYQUIDITY	NPB	M
thyroid oral	G	M
TIROSINT	NPB	M
TIROSINT-SOL	NPB	M
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
Immunological Agents - Drugs for Immune System Stimulation or Suppression		
ACTEMRA ACTPEN	NPB-S	PA; QL (0.13 ML per 1 day)
ACTEMRA SUBCUTANEOUS	NPB-S	PA; QL (0.13 ML per 1 day)
ADALIMUMAB-ADAZ	PB-S	PA; QL (0.06 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	NPB-S	PA; QL (0.12 ML per 1 day)
AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS	PB-S	PA; QL (0.12 ML per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.2ML	PB-S	PA; QL (0.02 ML per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.4ML	PB-S	PA; QL (0.06 EA per 1 day)
AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.8ML	PB-S	PA; QL (0.12 EA per 1 day)
ARCALYST	NPB-S	PA
ASTAGRAF XL	NPB	
AZASAN	NPB	
azathioprine oral	G	
BENLYSTA SUBCUTANEOUS	NPB-S	PA
CELLCEPT	NPB	
CIMZIA	PB-S	PA; QL (0.08 EA per 1 day)
CIMZIA STARTER KIT	PB-S	PA; QL (3 EA per 365 days)
COSENTYX (300 MG DOSE)	NPB-S	PA; QL (0.08 ML per 1 day)
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	NPB-S	PA; QL (0.04 ML per 1 day)
COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML	NPB-S	PA; QL (0.02 ML per 1 day)
COSENTYX SENSOREADY (300 MG)	NPB-S	PA; QL (0.08 ML per 1 day)
COSENTYX SENSOREADY PEN	NPB-S	PA; QL (0.04 ML per 1 day)
COSENTYX UNOREADY	NPB-S	PA; QL (0.08 ML per 1 day)
cyclosporine modified	G	
cyclosporine oral	G	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
CYLTEZO SUBCUTANEOUS AUTO-INJECTOR KIT	PB-S	PA; QL (0.15 EA per 1 day)
CYLTEZO SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML	PB-S	PA; QL (0.08 EA per 1 day)
CYLTEZO SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML	PB-S	PA; QL (0.15 EA per 1 day)
CYLTEZO-CD/UC/HS STARTER	PB-S	PA; QL (0.15 EA per 1 day)
CYLTEZO-PSORIASIS STARTER	PB-S	PA; QL (0.15 EA per 1 day)
ENBREL	PB-S	PA; QL (0.15 ML per 1 day)
ENBREL MINI	PB-S	PA; QL (0.15 ML per 1 day)
ENBREL SURECLICK	PB-S	PA; QL (0.15 ML per 1 day)
ENSPRYNG	NPB-S	PA
ENVARUSUS XR	NPB	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	G	
gengraf	G	
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML	PB-S	PA; QL (3 EA per 365 days)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML & 40MG/0.4ML	PB-S	PA; QL (2 EA per 365 days)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	PB-S	PA; QL (0.15 EA per 1 day)
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	PB-S	PA; QL (0.08 EA per 1 day)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML	PB-S	PA; QL (0.15 EA per 1 day)
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	PB-S	PA; QL (0.08 EA per 1 day)
HUMIRA PEN-PEDIATRIC UC START	PB-S	PA; QL (0.08 EA per 1 day)
HUMIRA PEN-PS/UV/ADOL HS START	PB-S	PA; QL (0.15 EA per 1 day)
HUMIRA PEN-PSOR/UEIT STARTER	PB-S	PA; QL (3 EA per 365 days)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML	PB-S	PA; QL (0.08 EA per 1 day)
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML	PB-S	PA; QL (0.15 EA per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML	PB-S	PA; QL (0.06 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1 ML	PB-S	PA; QL (0.01 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML	PB-S	PA; QL (0.03 ML per 1 day)
HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML	PB-S	PA; QL (0.06 ML per 1 day)
HYRIMOZ-CROHNS/UC STARTER PACK	PB-S	PA; QL (0.06 ML per 1 day)
HYRIMOZ-PED CROHNS STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML	PB-S	PA; QL (2.4 ML per 365 days)
HYRIMOZ-PED CROHNS STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML & 40MG/0.4ML	PB-S	PA; QL (1.2 ML per 365 days)
HYRIMOZ-PLAQUE PSORIASIS START	PB-S	PA; QL (1.6 ML per 365 days)
icatibant acetate	G-S	PA; QL (0.6 ML per 1 day)
ILUMYA	NPB-S	PA; QL (0.02 ML per 1 day)
IMURAN	NPB	
JOENJA	NPB-S	PA; QL (2 EA per 1 day)
KEVZARA	NPB-S	PA; QL (0.09 ML per 1 day)
KINERET	NPB-S	PA
leflunomide oral	G	M
LUPKYNIS	NPB-S	PA; QL (6 EA per 1 day)
methotrexate sodium	G	
methotrexate sodium (pf)	G	
mycophenolate mofetil oral	G	
mycophenolate sodium	G	
MYFORTIC	NPB	
NEORAL	NPB	
OLUMIANT	NPB-S	PA; QL (1 EA per 1 day)
ORENCIA CLICKJECT	NPB-S	PA; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML	NPB-S	PA; QL (0.15 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML	NPB-S	PA; QL (0.06 ML per 1 day)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML	NPB-S	PA; QL (0.1 ML per 1 day)
ORLADEYO	NPB-S	PA; QL (1 EA per 1 day)
OTEZLA ORAL TABLET	PB-S	PA; QL (2 EA per 1 day)
OTEZLA ORAL TABLET THERAPY PACK	PB-S	PA; QL (55 EA per 365 days)
PROGRAF ORAL	NPB	
RAPAMUNE	NPB	

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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)
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)
REZUROCK	NPB-S	PA; QL (1 EA per 1 day)
RIDAURA	NPB-S	M
RINVOQ	PB-S	PA; QL (1 EA per 1 day)
SANDIMMUNE ORAL CAPSULE	NPB	
SANDIMMUNE ORAL SOLUTION	PB	
SILIQ	NPB-S	PA; QL (0.11 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	PB-S	PA; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML	PB-S	PA; QL (0.02 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	PB-S	PA; QL (0.04 ML per 1 day)
SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML	PB-S	PA; QL (0.02 ML per 1 day)
sirolimus oral	G	
SKYRIZI PEN	PB-S	PA; QL (0.02 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML	PB-S	PA; QL (0.03 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML	PB-S	PA; QL (0.05 ML per 1 day)
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	PB-S	PA; QL (0.02 ML per 1 day)
SOTYKTU	NPB-S	PA; QL (1 EA per 1 day)
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)

Drug Name	Drug Tier	Restrictions / Limits
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML	PB-S	PA; QL (0.02 ML per 1 day)
tacrolimus oral	G	
TAKHZYRO	NPB-S	PA
TALTZ	NPB-S	PA; QL (0.04 ML per 1 day)
TREMFYA	PB-S	PA; QL (0.02 ML per 1 day)
TREXALL	PB	
WINRHO SDF	PB-S	
XATMEP	PB	
XELJANZ ORAL SOLUTION	PB-S	PA; QL (10 ML per 1 day)
XELJANZ ORAL TABLET	PB-S	PA; QL (2 EA per 1 day)
XELJANZ XR	PB-S	PA; QL (1 EA per 1 day)
ZORTRESS	NPB	
Immunological Agents - Drugs for Vaccination		
ABRYSVO	NPB	ACA; QL (1 EA per 300 days)
ACAM2000	NPB	
ACTHIB	NPB	ACA
ADACEL	NPB	ACA
AFLURIA QUADRIVALENT	NPB	ACA
AREXVY	NPB	QL (1 EA per 600 days)
BEXSERO	NPB	ACA
BOOSTRIX	NPB	ACA
COMIRNATY	NPB	ACA
DAPTACEL	NPB	ACA
DENGVAXIA	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

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
IMOVAX RABIES	NPB	
INFANRIX	NPB	ACA
IPOL	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 VAC 6M-11Y	NPB	ACA
NOVAVAX COVID-19 VACCINE	NPB	ACA
PEDIARIX	NPB	ACA
PEDVAX HIB	NPB	ACA
PENTACEL	NPB	ACA
PFIZER COVID-19 VAC-TRIS 5-11Y	NPB	ACA
PFIZER COVID-19 VAC-TRIS 6M-4Y	NPB	ACA
PNEUMOVAX 23	NPB	ACA
PREHEVBRIO	NPB	ACA
PREVNAR 13	NPB	ACA
PREVNAR 20	NPB	ACA
PRIORIX	NPB	ACA
PROQUAD	NPB	ACA
QUADRACEL	NPB	ACA
RABAVERT	NPB	
RECOMBIVAX HB	NPB	ACA
ROTARIX	NPB	ACA
ROTATEQ	NPB	ACA
SHINGRIX	NPB	ACA
SPIKEVAX	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

Drug Name	Drug Tier	Restrictions / Limits
Inflammatory Bowel Disease Agents		
ANUSOL-HC EXTERNAL	NPB	
APRISO	PB	M
AZULFIDINE	NPB	M
AZULFIDINE EN-TABS	NPB	M
balsalazide disodium	G	
budesonide er	G	
budesonide oral	G	
budesonide rectal	G	
CORTENEMA	NPB	
CORTIFOAM	NPB	
DIPENTUM	NPB	M
hydrocortisone (perianal)	G	
hydrocortisone ace-pramoxine external cream 1-1 %	G	
hydrocortisone rectal	G	
LIALDA	NPB	ST; M
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	NPB	ST; M
PROCTOFOAM HC	PB	
procto-med hc	G	
proctosol hc	G	
proctozone-hc	G	
ROWASA	NPB	
SFROWASA	PB	M
sulfasalazine oral	G	M
UCERIS ORAL	NPB	ST
UCERIS RECTAL	NPB	
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
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

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
alendronate sodium oral tablet 35 mg, 70 mg	G	M; QL (0.15 EA per 1 day)
ATELVIA	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)
FORTEO	NPB-S	PA
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) subcutaneous solution pen-injector 600 mcg/2.4ml	G-S	PA
TERIPARATIDE (RECOMBINANT) SUBCUTANEOUS SOLUTION PEN-INJECTOR 620 MCG/2.48ML	PB-S	PA
TYMLOS	PB-S	PA
Metabolic Bone Disease Agents - Other		
calcitriol oral	G	M
cinacalcet hcl	G	PA
paricalcitol oral	G	M
RAYALDEE	NPB	M
ROCALTROL	NPB	M
ZEMPLAR ORAL	NPB	M
Miscellaneous Therapeutic Agents		
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	PA
BYLVAY (PELLETS)	NPB-S	PA
CAYA	NPB	ACA
CHLORHEXIDINE GLUCONATE SOLUTION 20 %	NPB	
CYTOTINE ORAL POWDER	NPB	
deferoxamine mesylate	G	
DROPLET MICRON	NPB	M; OTC
DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT	PB	PA
EMBRACE PEN NEEDLES 31G X 8 MM	NPB	M; OTC

Drug Name	Drug Tier	Restrictions / Limits
ENDARI	NPB	PA
ergoloid mesylates oral	G	M
EUA PATIENT ASSESSMENT	NPB	
FEMCAP	NPB	ACA
FIRDAPSE	NPB-S	PA
formaldehyde external solution 37 %	G	
glutaraldehyde external	G	
GRASTEK	NPB	
HYMOVIS	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)
LIVMARLI	NPB-S	PA; QL (3 ML 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	
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	
OXBRYTA ORAL TABLET 300 MG	NPB-S	PA; QL (5 EA per 1 day)
OXBRYTA ORAL TABLET 500 MG	NPB-S	PA; QL (3 EA per 1 day)
OXBRYTA ORAL TABLET SOLUBLE	NPB-S	PA; QL (5 EA per 1 day)
PALFORZIA	NPB-S	PA
PHEXXI	NPB	PA; ACA; QL (60 GM per 60 days)
PHOTREXA-PHOTREXA VISCOUS KIT	NPB	
RAGWITEK	NPB	
RAYA SURE PEN NEEDLE 31G X 8 MM	NPB	M; OTC
saline bacteriostatic	G	
SALINE-PHENOL	NPB	

Drug Name	Drug Tier	Restrictions / Limits
TAVNEOS	NPB-S	PA; QL (6 EA per 1 day)
UDSX MEDICATED SYSTEM	NPB	
UDSXMP MEDICATED SYSTEM	NPB	
VEOZAH	NPB	PA; QL (1 EA per 1 day)
VERIFINE INSULIN PEN NEEDLE 31G X 8 MM	NPB	M; OTC
VERIFINE PLUS PEN NEEDLE 31G X 8 MM	NPB	M; OTC
VISCO-3	NPB	
VISTOGARD	NPB	
WIDE-SEAL DIAPHRAGM 60	NPB	ACA
WIDE-SEAL DIAPHRAGM 65	NPB	ACA
WIDE-SEAL DIAPHRAGM 70	NPB	ACA
WIDE-SEAL DIAPHRAGM 75	NPB	ACA
WIDE-SEAL DIAPHRAGM 80	NPB	ACA
WIDE-SEAL DIAPHRAGM 85	NPB	ACA
WIDE-SEAL DIAPHRAGM 90	NPB	ACA
WIDE-SEAL DIAPHRAGM 95	NPB	ACA
ZOKINVY	NPB-S	PA; QL (4 EA per 1 day)
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
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	

Drug Name	Drug Tier	Restrictions / Limits
flurbiprofen sodium	G	
FML FORTE	NPB	
FML LIQUIFILM	NPB	
gatifloxacin ophthalmic	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 OPHTHALMIC OINTMENT	NPB	
MAXITROL OPHTHALMIC SUSPENSION 0.1 %	NPB	
MITOSOL	NPB	
moxifloxacin hcl (2x day)	G	
moxifloxacin hcl ophthalmic	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 solution 0.2 %	G	
POVIDONE-IODINE OPHTHALMIC	NPB	
PRED FORTE	NPB	ST
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	NPB	
TOBRADEX ST	NPB	
tobramycin ophthalmic	G	
tobramycin-dexamethasone	G	
TOBREX	NPB	
trifluridine	G	

Drug Name	Drug Tier	Restrictions / Limits
UPNEEQ	NPB	PA
VIGAMOX	NPB	ST
ZIRGAN	NPB	
ZYMAXID	NPB	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er	G	M
acetazolamide oral	G	M
ALPHAGAN P OPTHALMIC SOLUTION 0.1 %	PB	M
apraclonidine hcl	G	
AZOPT	NPB	ST; M
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
COSOPT	NPB	ST; M
COSOPT PF	NPB	ST; M
dichlorphenamide	G-S	PA; QL (4 EA per 1 day)
DORZOLAMIDE HCL SOLUTION 2 % OPTHALMIC	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
tafluprost (pf)	G	M; QL (1 EA per 1 day)
timolol maleate (once-daily)	G	M

Drug Name	Drug Tier	Restrictions / Limits
timolol maleate ocudose	G	M
timolol maleate ophthalmic solution	G	M
timolol maleate pf	G	M
TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.5 %	NPB	ST; M
travoprost (bak free)	G	M; QL (0.1 ML per 1 day)
VYZULTA	NPB	ST; M; QL (0.2 ML per 1 day)
XELPROS	NPB	ST; M; QL (0.1 ML per 1 day)
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
AKTEN	NPB	
ALCAINE	NPB	
altafrin	G	
atropine sulfate ophthalmic ointment	G	M
ATROPINE SULFATE OPHTHALMIC SOLUTION 0.025 %, 0.05 %	NPB	M
atropine sulfate ophthalmic solution 1 %	G	M
bacitracin-polymyxin b ophthalmic	G	
bacitra-neomycin-polymyxin-hc	G	
CEQUA	NPB	PA; M
CYCLOGYL	NPB	M
CYCLOMYDRIL	NPB	M
cyclopentolate hcl ophthalmic	G	M
cyclosporine ophthalmic	G	PA; M
CYSTADROPS	NPB-S	QL (0.72 ML per 1 day)
CYSTARAN	NPB-S	
HOMATROPAIRE	NPB	M
MIEBO	NPB	PA; QL (0.4 ML per 1 day)
neomycin-bacitracin zn-polymyx	G	
neomycin-polymyxin-gramicidin	G	
neo-polycin	G	
neo-polycin hc	G	
OXERVATE	NPB-S	PA; QL (2 ML per 1 day)
phenylephrine hcl ophthalmic	G	
polycin	G	
polymyxin b-trimethoprim	G	
proparacaine hcl ophthalmic	G	
RESTASIS	PB	PA; M
RESTASIS MULTIDOSE	PB	PA; M

Drug Name	Drug Tier	Restrictions / Limits
sulfacetamide-prednisolone	G	
TROPICAMIDE-PHENYLEPHRINE	NPB	
TYRVAYA	NPB	PA; QL (0.3 ML per 1 day)
VERKAZIA	NPB	PA; M; QL (4 EA per 1 day)
XIIDRA	PB	PA; M
ZYLET	NPB	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic	G	
CETRAXAL	NPB	ST
ciprofloxacin hcl otic	G	
ciprofloxacin-dexamethasone	G	
CORTISPORIN-TC	NPB	
DERMOTIC	NPB	
flac	G	
fluocinolone acetonide otic	G	
hydrocortisone-acetic acid	G	
neomycin-polymyxin-hc otic	G	
ofloxacin otic	G	
PRAMOTIC	NPB	
Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold		
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	
diphenhydramine hcl injection	G	
diphenhydramine hcl oral elixir	G	
DYMISTA	PB	QL (0.77 GM per 1 day)
guaifenesin ac	G	PA; OTC; QL (240 ML per 1 fill)
guaifenesin-codeine	G	PA; OTC; QL (240 ML per 1 fill)
HYCODAN ORAL SOLUTION	NPB	PA; QL (240 ML per 1 fill)
HYCODAN ORAL TABLET	NPB	PA; QL (6 EA per 1 day)
hydrocod poli-chlorphe poli er	G	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral solution	G	PA; QL (240 ML per 1 fill)
hydrocodone bit-homatrop mbr oral tablet	G	PA; QL (6 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
hydromet	G	PA; QL (240 ML per 1 fill)
HYPERSAL	NPB	
ipratropium bromide nasal	G	
maxi-tuss ac	G	PA; OTC; QL (240 ML per 1 fill)
NEBUSAL	NPB	
olopatadine hcl nasal	G	QL (1.02 GM per 1 day)
promethazine vc	G	
promethazine vc/codeine	G	PA; QL (240 ML per 1 fill)
promethazine-codeine oral solution	G	PA; QL (240 ML per 1 fill)
promethazine-dm	G	
pseudoephedrine-bromphen-dm	G	
PULMOSAL	NPB	
RYALTRIS	NPB	QL (1 GM per 1 day)
sodium chloride inhalation	G	
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
ACCOLATE	NPB	M
acetylcysteine inhalation	G	
ADVAIR DISKUS	NPB	ST; M; QL (2 EA per 1 day)
ADVAIR HFA	PB	M; QL (0.4 GM per 1 day)
AIRDUO DIGIHALER	NPB	ST; M; QL (0.04 EA per 1 day)
AIRDUO RESPICLICK 113/14	NPB	ST; M; QL (0.04 EA per 1 day)
AIRDUO RESPICLICK 232/14	NPB	ST; M; QL (0.04 EA per 1 day)
AIRDUO RESPICLICK 55/14	NPB	ST; M; QL (0.04 EA per 1 day)
AIRSUPRA	NPB	QL (1 GM per 1 day)
albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation	G	M; QL (1.2 GM per 1 day)
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	NPB	ST; 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 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)
albuterol sulfate oral	G	M
ALVESCO	NPB	ST; M; QL (0.41 GM per 1 day)
ANORO ELLIPTA	PB	M; QL (2 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
arformoterol tartrate	G	M; QL (4 ML per 1 day)
ARMONAIR DIGIHALER	NPB	ST; M; QL (0.04 EA per 1 day)
ARNUITY ELLIPTA	PB	M; QL (1 EA per 1 day)
ASMANEX (120 METERED DOSES)	NPB	ST; M; QL (0.04 EA per 1 day)
ASMANEX (30 METERED DOSES)	NPB	ST; M; QL (0.04 EA per 1 day)
ASMANEX (60 METERED DOSES)	NPB	ST; M; QL (0.04 EA per 1 day)
ASMANEX HFA	NPB	ST; M; QL (0.44 GM per 1 day)
ATROVENT HFA	NPB	M; QL (0.86 GM per 1 day)
AUVI-Q	NPB	
BEVESPI AEROSPHERE	NPB	ST; M; QL (0.36 GM per 1 day)
BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT INHALATION	PB	M; QL (2 EA per 1 day)
BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 200-25 MCG/ACT INHALATION	PB	M; QL (2 EA per 1 day)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 50-25 MCG/INH	PB	M; QL (2 EA per 1 day)
breyna	G	M; QL (0.35 GM per 1 day)
BREZTRI AEROSPHERE	PB	QL (0.36 GM per 1 day)
budesonide inhalation	G	M; QL (4 ML per 1 day)
budesonide-formoterol fumarate	G	M; QL (0.35 GM per 1 day)
COMBIVENT RESPIMAT	PB	QL (0.27 GM per 1 day)
cromolyn sodium inhalation	G	M
DALIRESP	NPB	PA
DUAKLIR PRESSAIR	NPB	ST; QL (0.04 EA per 1 day)
DULERA	NPB	ST; M; QL (0.44 GM per 1 day)
elixophyllin	G	M
epinephrine injection solution auto-injector	G	
EPIPEN 2-PAK	NPB	ST
EPIPEN JR 2-PAK	NPB	ST
ESBRIET	NPB-S	PA
FASENRA	PB-S	PA
FASENRA PEN	PB-S	PA
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 50 MCG/ACT	NPB	ST; M; QL (2 EA per 1 day)
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/ACT	NPB	ST; M; QL (8 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	NPB	ST; M; QL (0.8 GM per 1 day)
FLOVENT HFA INHALATION AEROSOL 44 MCG/ACT	NPB	ST; M; QL (0.71 GM per 1 day)
FLUTICASONE FUROATE-VILANTEROL	NPB	PA; M; QL (2 EA per 1 day)
FLUTICASONE PROPIONATE DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 50 MCG/ACT	NPB	ST; M; QL (2 EA per 1 day)
FLUTICASONE PROPIONATE DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 250 MCG/ACT	NPB	ST; M; QL (8 EA per 1 day)
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT	NPB	ST; M; QL (0.8 GM per 1 day)
FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 44 MCG/ACT	NPB	ST; 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	ST; M; QL (2 EA per 1 day)
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	NPB	ST; M; QL (0.04 EA per 1 day)
formoterol fumarate inhalation	G	M; QL (4 ML per 1 day)
INCRUSE ELLIPTA	NPB	ST; M; QL (1 EA 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)
LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT	NPB	ST; QL (1 GM per 1 day)
montelukast sodium oral	G	M
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)

Drug Name	Drug Tier	Restrictions / Limits
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	PB-S	PA; QL (0.11 EA per 1 day)
OFEV	NPB-S	PA
PERFOROMIST	NPB	M; QL (4 ML per 1 day)
pirfenidone	G-S	PA
PROAIR DIGIHALER	NPB	ST; M; QL (0.07 EA per 1 day)
PROAIR RESPICLICK	NPB	ST; M; QL (0.07 EA per 1 day)
PROVENTIL HFA	NPB	ST; M; QL (1.2 GM per 1 day)
PULMICORT FLEXHALER	NPB	ST; M; QL (0.07 EA per 1 day)
QVAR REDIHALER	PB	M; QL (0.71 GM 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	NPB	M; QL (0.35 GM per 1 day)
SYMJEPI	NPB	
terbutaline sulfate injection	G	M
terbutaline sulfate oral	G	M
TEZSPIRE	PB-S	PA; QL (0.07 ML per 1 day)
THEO-24	NPB	M
theophylline	G	M
theophylline er	G	M
tiotropium bromide monohydrate	G	M; QL (1 EA per 1 day)
TRELEGY ELLIPTA	PB	M; QL (2 EA per 1 day)
TUDORZA PRESSAIR	NPB	ST; QL (0.04 EA per 1 day)
VENTOLIN HFA	NPB	ST; M; QL (1.2 GM per 1 day)
wixela inhub	G	ST; M; QL (2 EA per 1 day)
XOLAIR	PB-S	PA
XOPENEX HFA	NPB	ST; QL (1 GM per 1 day)
YUPELRI	NPB	M; QL (3 ML per 1 day)
zafirlukast	G	M
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
BRONCHITOL	NPB	PA; QL (20 EA per 1 day)
BRONCHITOL TOLERANCE TEST	NPB	PA; QL (20 EA per 1 day)
KALYDECO	NPB-S	PA
KITABIS PAK	NPB-S	ST

Last Updated 12/11/2023

Drug Name	Drug Tier	Restrictions / Limits
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 NEBULIZER	NPB-S	ST
TOBI PODHALER	NPB-S	QL (224 EA per 40 days)
tobramycin inhalation nebulization solution 300 mg/4ml	G-S	
tobramycin nebulization solution 300 mg/5ml inhalation	G-S	
TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION	NPB-S	ST
TRIKAFTA ORAL TABLET THERAPY PACK	NPB-S	PA; QL (3 EA per 1 day)
TRIKAFTA ORAL THERAPY PACK	NPB-S	PA; QL (2 EA per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
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)
OPSUMIT	PB-S	PA; QL (1 EA per 1 day)
ORENITRAM	NPB-S	PA
ORENITRAM MONTH 1	NPB-S	PA; QL (336 EA per 365 days)
ORENITRAM MONTH 2	NPB-S	PA; QL (672 EA per 365 days)
ORENITRAM MONTH 3	NPB-S	PA; QL (504 EA per 365 days)
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)
TADLIQ	NPB-S	PA; QL (10 ML per 1 day)
TRACLEER 32 MG	NPB-S	PA; QL (4 EA per 1 day)
TYVASO DPI MAINTENANCE KIT	NPB-S	PA; QL (4 EA per 1 day)
TYVASO DPI TITRATION KIT	NPB-S	PA; QL (2 EA per 365 days)
UPTRAVI ORAL	NPB-S	PA; QL (2 EA per 1 day)
UPTRAVI TITRATION	NPB-S	PA; QL (400 EA per 365 days)
VENTAVIS	NPB-S	PA; QL (9 ML per 1 day)
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral suspension	G	
baclofen oral tablet	G	

Drug Name	Drug Tier	Restrictions / Limits
carisoprodol oral	G	
chlorzoxazone oral tablet 500 mg	G	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	G	
DANTRIUM ORAL	NPB	
dantrolene sodium oral	G	
methocarbamol injection	G	
methocarbamol oral	G	
orphenadrine citrate er	G	
tizanidine hcl oral	G	
ZANAFLEX ORAL TABLET	NPB	ST
Sleep Disorder Agents		
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)
eszopiclone	G	QL (1 EA per 1 day)
flurazepam hcl	G	PA; QL (1 EA per 1 day)
LUMRYZ	NPB-S	PA; QL (1 EA per 1 day)
modafinil	G	PA; QL (1 EA per 1 day)
QUVIVIQ	NPB	ST; QL (1 EA per 1 day)
ramelteon	G	QL (1 EA per 1 day)
SODIUM OXYBATE	NPB-S	PA; QL (18 ML per 1 day)
SUNOSI	PB	PA; QL (1 EA per 1 day)
tasimelteon	G-S	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)
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)
zolpidem tartrate oral tablet	G	QL (1 EA per 1 day)

Index of Drugs

abacavir sulfate.....	33	ADIPEX-P.....	47	altavera.....	73
abacavir sulfate-lamivudine.....	33	ADMELOG.....	59	ALTRENO.....	50
ABILIFY ASIMTUFII.....	32	ADMELOG SOLOSTAR.....	59	ALUNBRIG.....	25
ABILIFY MAINTENA.....	32	ADTHYZA.....	79	ALVESCO.....	94
abiraterone acetate.....	25	ADVAIR DISKUS.....	94	alvimopan.....	65
ABRYSVO.....	84	ADVAIR HFA.....	94	alyacen 1/35.....	73
ABSORICA LD.....	49	ADZENYS XR-ODT.....	44	alyacen 7/7/7.....	73
ACAM2000.....	84	AEMCOLO.....	14	alyq.....	98
acamprosate calcium.....	13	afirmelle.....	72	amabelz.....	73
acarbose.....	54	AFLURIA QUADRIVALENT.....	84	amantadine hcl.....	31
ACCOLATE.....	94	AFREZZA.....	59	ambrisentan.....	98
ACCRUFER.....	61	AGAMATRIX PRESTO TEST... ..	56	amcinonide.....	50
ACCU-CHEK AVIVA PLUS KIT W/DEVICE.....	56	AGRYLIN.....	38	amethia.....	73
ACCU-CHEK GUIDE KIT W/DEVICE.....	56	AIMOVIG.....	23, 24	amethyst.....	73
ACCU-CHEK GUIDE TEST STRIPS.....	56	AIRDUO DIGIHALER.....	94	amiloride hcl.....	38
ACCU-CHEK SMARTVIEW TEST STRIPS.....	56	AIRDUO RESPICLICK 113/14..	94	amiloride-hydrochlorothiazide... ..	38
ACCUPRIL.....	38	AIRDUO RESPICLICK 232/14..	94	aminocaproic acid.....	38
ACCURETIC.....	38	AIRDUO RESPICLICK 55/14... ..	94	amiodarone hcl.....	38
accutane.....	49	AIRSUPRA.....	94	amitriptyline hcl.....	20
acebutolol hcl.....	38	AJOVY.....	24	AMJEVITA.....	80
acetaminophen-codeine.....	8	AKLIEF.....	49	amlodipine besylate.....	38
acetazolamide.....	91	AKTEN.....	92	amlodipine besylate-benazepril hcl.....	39
acetazolamide er.....	91	AKYNZEO.....	21	amlodipine besylate-valsartan.. ..	39
acetazolamide sodium.....	38	ala-cort.....	50	amlodipine-atorvastatin.....	39
acetic acid.....	93	albendazole.....	30	amlodipine-olmesartan.....	39
acetylcysteine.....	94	albuterol sulfate.....	94	amlodipine-olmesartan.....	39
acitretin.....	49	albuterol sulfate hfa.....	94	amlodipine-valsartan-hctz.....	39
ACTEMRA.....	80	ALBUTEROL SULFATE HFA... ..	94	ammonium lactate.....	50
ACTEMRA ACTPEN.....	80	ALCAINE.....	92	amnesteam.....	50
ACTHAR.....	70	alclometasone dipropionate.....	50	amoxapine.....	20
ACTHIB.....	84	ALDACTONE.....	38	amoxicillin.....	14
ACTIVE FE.....	61	ALECENSA.....	25	amoxicillin-potassium clavulanate.....	14
ACTIVELLA.....	72	alendronate sodium.....	86, 87	amoxicillin-potassium clavulanate er.....	14
ACTONEL.....	86	alfuzosin hcl er.....	69	amphetamine sulfate.....	44
ACULAR.....	89	ALINIA.....	30	amphetamine- dextroamphetamine.....	44
ACULAR LS.....	89	aliskiren fumarate.....	38	amphetamine- dextroamphetamine er.....	44
acyclovir.....	33	allopurinol.....	23	amphet-dextroamphet 3-bead er.....	44
ADACEL.....	84	ALOGLIPTIN BENZOATE.....	54	ampicillin.....	14
ADALIMUMAB-ADAZ.....	80	ALOGLIPTIN-METFORMIN HCL.....	54	ampicillin sodium.....	14
adapalene.....	49	ALOMIDE.....	89	AMPYRA.....	46
adapalene-benzoyl peroxide.....	49	ALORA.....	72	AMZEEQ.....	50
ADASUVE.....	32	alosetron hcl.....	65	anagrelide hcl.....	38
ADBRY.....	49	ALPHAGAN P.....	91	ANASPAZ.....	65
adc/f (0.5mg/ml).....	61	ALPHA-LIPOIC ACID.....	87	anastrozole.....	25
ADDERALL.....	44	alprazolam.....	37	ANCOBON.....	22
ADDERALL XR.....	44	alprazolam er.....	36, 37	ANDRODERM.....	70
adefovir dipivoxil.....	33	alprazolam intensol.....	37	ANGELIQ.....	73
ADEMPAS.....	98	alprazolam xr.....	37		
		ALTABAX.....	14		
		altafrin.....	92		

ANNOVERA.....	73	atenolol.....	39	BACTERIOSTATIC	
ANORO ELLIPTA.....	94	atenolol-chlorthalidone.....	39	WATER(BENZ ALC).....	87
ANTIVERT.....	21	atomoxetine hcl.....	44	BACTRIM.....	14
ANUSOL-HC.....	86	ATORVALIQ.....	39	BACTRIM DS.....	14
ANZEMET.....	21	atorvastatin calcium.....	39	BAFIERTAM.....	46
APADAZ.....	8	atovaquone.....	30	BALCOLTRA.....	73
apap-caff-dihydrocodeine.....	8	atovaquone-proguanil hcl.....	30	balsalazide disodium.....	86
APIDRA SOLOSTAR.....	59	ATRALIN.....	50	balsam peru-castor oil.....	50
APIDRA VIAL.....	59	atropine sulfate.....	65, 92	BALVERSA.....	25
APOKYN.....	31	ATROPINE SULFATE.....	65, 92	balziva.....	73
apomorphine hcl.....	31	ATROVENT HFA.....	95	BAQSIMI ONE PACK.....	58
APO-VARENICLINE.....	13	aubra eq.....	73	BAQSIMI TWO PACK.....	58
apraclonidine hcl.....	91	AUGMENTIN.....	14	BARACLUDE.....	33
aprepitant.....	21	AUGMENTIN ES-600.....	14	BASAGLAR KWIKPEN.....	59
apri.....	73	aurovela 1.5/30.....	73	BD ULTRA-FINE INSULIN	
APRISO.....	86	aurovela 1/20.....	73	SYRINGES.....	59
APTENSIO XR.....	44	aurovela 24 fe.....	73	BD ULTRA-FINE PEN	
APTIOM.....	17	aurovela fe 1.5/30.....	73	NEEDLES.....	87
APTIVUS.....	33	aurovela fe 1/20.....	73	BELBUCA.....	8
AQUACEL AG BURN.....	50	AURYXIA.....	68	BELSOMRA.....	99
AQUORAL.....	48	AUSTEDO.....	47	benazepril hcl.....	39
ARAKODA.....	30	AUSTEDO PATIENT		benazepril-hydrochlorothiazide.....	39
aranelle.....	73	TITRATION KIT.....	47	BENLYSTA.....	80
ARCALYST.....	80	AUSTEDO XR.....	47	benzalkonium chloride.....	14
AREXVY.....	84	AUSTEDO XR PATIENT		BENZAMYCIN.....	50
arformoterol tartrate.....	95	TITRATION.....	47	BENZHYDROCODONE-	
ARGININE HCL.....	61	AUVELITY.....	20	ACETAMINOPHEN.....	8
ARIKAYCE.....	14	AUVI-Q.....	95	BENZNIDAZOLE.....	30
aripiprazole.....	32	AVALIDE.....	39	benzonatate.....	93
ARISTADA.....	32	aviane.....	73	benzoyl peroxide-erythromycin.....	50
ARISTADA INITIO.....	32	avidoxy.....	14	benzphetamine hcl.....	47
ARIXTRA.....	17	AVONEX PEN.....	46	benztropine mesylate.....	31
armodafinil.....	99	AVONEX PREFILLED.....	46	BESIVANCE.....	89
ARMONAIR DIGIHALER.....	95	ayuna.....	73	BESREMI.....	25
ARMOUR THYROID.....	79	AYVAKIT.....	25	BETADINE OPHTHALMIC	
ARNUITY ELLIPTA.....	95	AZASAN.....	80	PREP.....	89
ascomp-codeine.....	8	AZASITE.....	89	betamethasone dipropionate....	50
asenapine maleate.....	32	azathioprine.....	80	betamethasone dipropionate	
ashlyna.....	73	azelaic acid.....	50	aug.....	50
ASMANEX (120 METERED		azelastine hcl.....	89, 93	BETAMETHASONE SODIUM	
DOSES).....	95	azelastine-fluticasone.....	93	PHOSPHATE.....	69
ASMANEX (30 METERED		azithromycin.....	14	betamethasone valerate.....	50
DOSES).....	95	AZOPT.....	91	BETASERON.....	46
ASMANEX (60 METERED		AZSTARYS.....	45	betaxolol hcl.....	39, 91
DOSES).....	95	AZULFIDINE.....	86	bethanechol chloride.....	68
ASMANEX HFA.....	95	AZULFIDINE EN-TABS.....	86	BETIMOL.....	91
aspirin-dipyridamole er.....	32	azurette.....	73	BEVESPI AEROSPHERE.....	95
ASSURE PLATINUM.....	56	B & C.....	50	bexarotene.....	25
ASTAGRAF XL.....	80	bac.....	8	BEXSERO.....	84
ASTRINGYN.....	38	bacitracin.....	89	BEYAZ.....	73
ATABEX OB.....	61	bacitracin-polymyxin b.....	92	bicalutamide.....	25
atazanavir sulfate.....	33	bacitra-neomycin-polymyxin-hc.....	92	BIDIL.....	39
ATELVIA.....	87	baclofen.....	98	BIJUVA.....	73

BIKTARVY.....	33	bupropion hcl er (xl).....	20	carglumic acid.....	61
BILTRICIDE.....	30	buspirone hcl.....	37	carisoprodol.....	99
bimatoprost.....	91	butalbital-acetaminophen.....	8	CARNITOR.....	61
BIOTEL CARE BLOOD		butalbital-apap-caff-cod.....	8	CARNITOR SF.....	61
GLUCOSE.....	56	butalbital-apap-caffeine.....	8	carteolol hcl.....	91
BIOTEL CARE BLOOD		butalbital-asa-caff-codeine.....	8	cartia xt.....	39
GLUCOSE SYST.....	56	butalbital-aspirin-caffeine.....	8	carvedilol.....	39
bis subcit-metronid-tetracyc.....	65	butorphanol tartrate.....	8	CASODEX.....	26
bismuth/metronidaz/tetracyclin.....	65	BYDUREON BCISE		CAYA.....	87
bisoprolol fumarate.....	39	AUTOINJECTOR.....	54	cefaclor.....	14
bisoprolol-hydrochlorothiazide..	39	BYETTA 10 MCG PEN.....	54	cefaclor er.....	14
blisovi 24 fe.....	73	BYETTA 5 MCG PEN.....	54	cefadroxil.....	14
blisovi fe 1.5/30.....	73	BYLVAY.....	87	cefdinir.....	14
blisovi fe 1/20.....	73	BYLVAY (PELLETS).....	87	cefixime.....	14
BLOOD GLUCOSE TEST.....	56	cabergoline.....	70	cefpodoxime proxetil.....	14
BLOOD GLUCOSE TEST		CABLIVI.....	32	cefprozil.....	14
STRIPS 333.....	56	CABOMETYX.....	25	cefuroxime axetil.....	14
BLULINK GLUCOSE TEST.....	56	caffeine citrate.....	47	celecoxib.....	11
BONJESTA.....	21	CALCIFOL.....	61	CELLCEPT.....	80
BOOSTRIX.....	84	calcipotriene.....	50	CELONTIN.....	17
bosentan.....	98	calcipotriene-betameth diprop...	50	CENTRATEX.....	61
BOSULIF.....	25	calcitonin (salmon).....	87	cephalexin.....	14
BPCO.....	50	CALCITRENE.....	50	CEQUA.....	92
BRAFTOVI.....	25	calcitriol.....	50, 87	CERDELGA.....	67
BREO ELLIPTA.....	95	calcium acetate.....	68	CERVIDIL.....	68
BREXAFEMME.....	22	calcium acetate (phos binder)...	68	CETRAXAL.....	93
breyana.....	95	CALQUENCE.....	25	CETROTIDE.....	70
BREZTRI AEROSPHERE.....	95	camila.....	73	cevimeline hcl.....	48
briellyn.....	73	camrese.....	73	charlotte 24 fe.....	73
BRILINTA.....	32	camrese lo.....	73	chateal eq.....	73
brimonidine tartrate.....	50, 91	CAMZYOS.....	39	CHEMET.....	61
brimonidine tartrate-timolol.....	91	candesartan cilexetil.....	39	CHEMSTRIP UGK.....	56
brinzolamide.....	91	candesartan cilexetil-hctz.....	39	CHENODAL.....	65
BRIVIACT.....	17	capecitabine.....	25	chlordiazepoxide hcl.....	37
bromfenac sodium (once-daily).....	89	CAPLYTA.....	32	chlordiazepoxide-amitriptyline...20	
bromocriptine mesylate.....	31	CAPRELSA.....	25	chlorhexidine gluconate.....	48
BRONCHITOL.....	97	captopril.....	39	CHLORHEXIDINE	
BRONCHITOL TOLERANCE		captopril-hydrochlorothiazide...39		GLUCONATE.....	87
TEST.....	97	CARAC.....	50	chloroquine phosphate.....	30
BRUKINSA.....	25	CARBAGLU.....	61	chlorpromazine hcl.....	32
budesonide.....	86, 95	carbamazepine.....	17	chlorthalidone.....	39
budesonide er.....	86	carbamazepine er.....	17	chlorzoxazone.....	99
budesonide-formoterol		CARBATROL.....	17	CHOLBAM.....	67
fumarate.....	95	carbidopa.....	31	cholestyramine.....	39
bumetanide.....	39	carbidopa-levodopa.....	31	cholestyramine light.....	39
BUMEX.....	39	carbidopa-levodopa er.....	31	CHORIONIC	
buprenorphine.....	8	carbidopa-levodopa-		GONADOTROPIN.....	70
buprenorphine hcl.....	8, 13	entacapone.....	31	CIBINQO.....	50
buprenorphine hcl-naloxone		carbinoxamine maleate.....	93	ciclodan.....	22
hcl.....	13	carboprost tromethamine.....	70	ciclopirox.....	22
bupropion hcl.....	20	CARDIZEM.....	39	ciclopirox olamine.....	22
bupropion hcl er (smoking det).....	13	CARDURA.....	39	cilostazol.....	32
bupropion hcl er (sr).....	20	CARETOUCH TEST.....	56	CIMDUO.....	33

CIMZIA.....	80	COLY-MYCIN M.....	15	cryselle-28.....	73
CIMZIA STARTER KIT.....	80	COMBIPATCH.....	73	CRYSVITA.....	67
cinacalcet hcl.....	87	COMBIVENT RESPIMAT.....	95	CUVRIOR.....	61
CIPRO.....	14	COMBIVIR.....	33	CVS KETONE CARE.....	56
ciprofloxacin hcl.....	14, 89, 93	COMETRIQ.....	26	cyanocobalamin.....	61
ciprofloxacin-dexamethasone...	93	COMIRNATY.....	84	cyclobenzaprine hcl.....	99
citalopram hydrobromide.....	20	COMPLERA.....	34	CYCLOGYL.....	92
claravis.....	50	compro.....	21	CYCLOMYDRIL.....	92
clarithromycin.....	14	COMTAN.....	31	cyclopentolate hcl.....	92
clarithromycin er.....	14	CONCERTA.....	45	cyclophosphamide.....	26
clemastine fumarate.....	93	CONDYLOX.....	51	CYCLOPHOSPHAMIDE.....	26
CLENPIQ.....	65	constulose.....	65	cycloserine.....	25
CLEOCIN.....	14, 15	CONTOUR MONITOR KIT		CYCLOSET.....	54
CLEOCIN-T.....	50	W/DEVICE.....	56	cyclosporine.....	80, 92
CLIMARA PRO.....	73	CONTOUR NEXT EZ KIT		cyclosporine modified.....	80
clindacin etz.....	50	W/DEVICE.....	56	CYLTEZO.....	81
clindacin-p.....	50	CONTOUR NEXT GEN		CYLTEZO-CD/UC/HS	
clindamycin hcl.....	15	MONITOR.....	56	STARTER.....	81
clindamycin palmitate hcl.....	15	CONTOUR NEXT GEN TEST		CYLTEZO-PSORIASIS	
clindamycin phosphate.....	15, 50	STRIPS.....	56	STARTER.....	81
clindamycin phosphate-		CONTOUR NEXT LINK KIT		cyproheptadine hcl.....	93
benzoyl peroxide.....	50	W/DEVICE.....	56	cyred eq.....	73
clindamycin-tretinoin.....	50	CONTOUR NEXT MONITOR		CYSTADROPS.....	92
CLINDESSE.....	15	KIT W/DEVICE.....	56	CYSTAGON.....	67
CLINPRO 5000.....	48	CONTOUR TEST STRIPS.....	56	CYSTARAN.....	92
clobazam.....	17	CONTRAVE.....	47	cytarabine (pf).....	26
clobetasol prop emollient base.	50	COPAXONE.....	46	CYTOTEC.....	65
clobetasol propionate.....	51	COPIKTRA.....	26	CYTOTINE.....	87
clobetasol propionate e.....	50	CORLANOR.....	39	dabigatran etexilate mesylate...	17
CLOBEX.....	51	CORTEF.....	69	dalfampridine er.....	46
CLOBEX SPRAY.....	51	CORTENEMA.....	86	DALIRESP.....	95
clodan.....	51	CORTIFOAM.....	86	danazol.....	70
CLOMID.....	70	CORTISPORIN-TC.....	93	DANTRIUM.....	99
clomipramine hcl.....	20	CORTROPHIN.....	70	dantrolene sodium.....	99
clonazepam.....	37	corvita 150.....	61	dapsone.....	25
clonidine hcl.....	39	CORVITE 150.....	61	DAPTACEL.....	84
clonidine hcl er.....	45	COSENTYX (300 MG DOSE)...	80	DARAPRIM.....	30
clopidogrel bisulfate.....	32	COSENTYX 150 MG/ML.....	80	darifenacin hydrobromide er.....	68
clorazepate dipotassium.....	37	COSENTYX SENSOREADY		darunavir.....	34
clotrimazole.....	22	(300 MG).....	80	dasetta 1/35.....	74
clotrimazole-betamethasone.....	22	COSENTYX SENSOREADY		dasetta 7/7/7.....	74
clozapine.....	32	PEN.....	80	DAURISMO.....	26
coal tar.....	51	COSENTYX UNOREADY.....	80	DAYBUE.....	47
COARTEM.....	30	COSOPT.....	91	DAYPRO.....	11
codeine sulfate.....	8	COSOPT PF.....	91	daysee.....	74
colchicine.....	23	COTELLIC.....	26	DAYVIGO.....	99
colchicine-probenecid.....	23	COTEMPLA XR-ODT.....	45	DEBACTEROL.....	48
COLCRYS.....	23	COXANTO.....	11	deblitane.....	74
colesevelam hcl.....	39	CREON.....	67	deferasirox.....	61
COLESTID.....	39	CRESEMBA.....	22	deferasirox granules.....	61
COLESTID FLAVORED.....	39	CRINONE.....	73	deferiprone.....	61
colestipol hcl.....	39	cromolyn sodium.....	66, 89, 95	deferoxamine mesylate.....	87
colistimethate sodium (cba).....	15	CROTAN.....	30	DELESTROGEN.....	74

DELSTRIGO.....	34	diazepam intensol.....	37	doxazosin mesylate.....	40
delyla.....	74	diazoxide.....	58	doxepin hcl.....	20, 99
demeclocycline hcl.....	15	DIBENZYLINE.....	40	doxycycline hyclate.....	15
DEMEROL.....	8	dichlorphenamide.....	91	doxycycline monohydrate.....	15
DEMSEER.....	40	DICLEGIS.....	21	doxylamine-pyridoxine.....	22
DENGVAXIA.....	84	diclofenac potassium.....	11	DRISDOL.....	61
DENTA 5000 PLUS.....	48	diclofenac sodium.....	11, 51, 89	dronabinol.....	22
DENTAGEL.....	48	diclofenac sodium er.....	11	DROPLET MICRON.....	87
DEPEN TITRATABS.....	68	DICLOFONO.....	11	drosipren-eth estrad-levomefol.....	74
DEPO-ESTRADIOL.....	74	dicloxacillin sodium.....	15	drosiprenone-ethinyl estradiol... ..	74
DEPO-PROVERA.....	74	dicyclomine hcl.....	66	DROXIA.....	26
DEPO-SUBQ PROVERA 104... ..	74	diethylpropion hcl.....	47	DRYSOL.....	51
DERMA-SMOOTHIE/FS BODY.....	51	diethylpropion hcl er.....	47	DUAKLIR PRESSAIR.....	95
DERMA-SMOOTHIE/FS		DIFFERIN.....	51	DUAVEE.....	74
SCALP.....	51	DIFICID.....	15	DUETACT.....	54
DERMOTIC.....	93	DIFLUCAN.....	22	DULERA.....	95
DESCOVY.....	34	diflunisal.....	11	duloxetine hcl.....	20
desipramine hcl.....	20	difluprednate.....	89	DUPIXENT.....	51
desmopressin ace spray refig.. ..	70	digoxin.....	40	dutasteride.....	69
desmopressin acetate.....	70	dihydroergotamine mesylate.....	24	dutasteride-tamsulosin hcl.....	69
desmopressin acetate pf.....	70	DILANTIN.....	18	DYANAVEL XR.....	45
desmopressin acetate spray.....	70	DILAUDID.....	8	DYMISTA.....	93
desogestrel-ethinyl estradiol.....	74	diltiazem hcl.....	40	DYRENIUM.....	40
desonide.....	51	diltiazem hcl er.....	40	DYSPORT.....	87
DESOWEN.....	51	diltiazem hcl er beads.....	40	E.E.S. 400.....	15
desoximetasone.....	51	diltiazem hcl er coated beads... ..	40	E.E.S. GRANULES.....	15
DESVENLAFAXINE ER.....	20	dilt-xr.....	40	EASY TALK PLUS II TEST	
desvenlafaxine succinate er.....	20	dimenhydrinate.....	21	STRIPS.....	56
DETROL.....	68	dimethyl fumarate.....	46	EASY TOUCH HEALTHPRO	
DETROL LA.....	68	dimethyl fumarate starter pack.. ..	46	GLUCOSE.....	57
dexamethasone.....	69	DIPENTUM.....	86	EASY TRAK II GLUCOSE	
dexamethasone intensol.....	69	diphenhydramine hcl.....	93	TEST.....	57
dexamethasone sodium		diphenoxylate-atropine.....	66	easygel.....	48
phosphate.....	69, 89	DIPROLENE.....	51	EC-NAPROSYN.....	11
DEXCOM G6 RECEIVER.....	56	dipyridamole.....	32	ec-naproxen.....	11
DEXCOM G6 SENSOR.....	56	disopyramide phosphate.....	40	econazole nitrate.....	22
DEXCOM G6 TRANSMITTER.. ..	56	disulfiram.....	13	EDARBI.....	40
DEXCOM G7 RECEIVER.....	56	DIURIL.....	40	EDARBYCLOR.....	40
DEXCOM G7 SENSOR.....	56	divalproex sodium.....	18	EDECRIIN.....	40
dexamethylphenidate hcl.....	45	divalproex sodium er.....	18	EDURANT.....	34
dexamethylphenidate hcl er.....	45	DIVIGEL.....	74	efavirenz.....	34
DEXPANTHENOL.....	61	DODEX.....	61	efavirenz-emtricitab-tenofo df... ..	34
dextroamphetamine sulfate.....	45	dofetilide.....	40	efavirenz-lamivudine-tenofovir.. ..	34
dextroamphetamine sulfate er.. ..	45	dolishale.....	74	EFFER-K.....	61
DIACOMIT.....	17	donepezil hcl.....	19	effer-k.....	61
DIASTAT ACUDIAL.....	17	DOPTelet.....	38	EFFIENT.....	32
DIASTAT PEDIATRIC.....	17	DORAL.....	37	EFUDEX.....	51
DIATHRIVE BLOOD		DORZOLAMIDE HCL.....	91	EGATEN.....	30
GLUCOSE TEST.....	56	dorzolamide hcl.....	91	EGRIFTA SV.....	70
DIATHRIVE GLUCOSE TEST.. ..	56	dorzolamide hcl-timolol mal.....	91	ELESTRIN.....	74
DIATHRIVE+ GLUCOSE		dorzolamide hcl-timolol mal pf.. ..	91	eletriptan hydrobromide.....	24
TEST.....	56	dotti.....	74	ELIGARD.....	70
diazepam.....	18, 37	DOVATO.....	34	elinest.....	74

ELIQUIS.....	17	EPIPEN JR 2-PAK.....	95	EVEKEO ODT.....	45
ELIQUIS DVT/PE STARTER PACK.....	17	epitol.....	18	everolimus.....	26, 81
ELITE-OB.....	61	EPIVIR.....	34	EVISTA.....	72
elixophyllin.....	95	eplerenone.....	40	EVOTAZ.....	34
ELLA.....	74	EPRONTIA.....	18	EVRYSDI.....	67
ELMIRON.....	68	EPZICOM.....	34	exemestane.....	26
eluryng.....	74	EQUETRO.....	38	EXKIVITY.....	26
ELYXYB.....	11	ergocalciferol.....	61	EXODERM.....	22
EMBRACE PEN NEEDLES.....	87	ergoloid mesylates.....	88	EXTAVIA.....	46
EMBRACE TALK GLUCOSE TEST.....	57	ERGOMAR.....	24	EYSUVIS.....	89
EMBRACE TALK MONITORING SYSTEM.....	57	ergotamine-caffeine.....	24	ezetimibe.....	40
EMBRACE WAVE BLOOD GLUCOSE.....	57	ERIVEDGE.....	26	ezetimibe-simvastatin.....	40
EMCYT.....	26	ERLEADA.....	26	falmina.....	75
EMEND.....	22	erlotinib hcl.....	26	famciclovir.....	34
EMEND TRI-PACK.....	22	ERMEZA.....	79	famotidine.....	65
EMGALITY.....	24	errin.....	74	FANAPT.....	32
EMSAM.....	20	ery.....	51	FANAPT TITRATION PACK.....	32
emtricitabine.....	34	ERYGEL.....	51	FARESTON.....	26
emtricitabine-tenofovir df.....	34	ERYPED 200.....	15	FARXIGA.....	54
EMTRIVA.....	34	ERYPED 400.....	15	FASENRA.....	95
EMVERM.....	30	ERY-TAB.....	15	FASENRA PEN.....	95
enalapril maleate.....	40	ERYTHROCIN STEARATE.....	15	febuxostat.....	23
enalapril-hydrochlorothiazide.....	40	erythromycin.....	15, 51, 89	felbamate.....	18
ENBREL.....	81	erythromycin base.....	15	felodipine er.....	40
ENBREL MINI.....	81	erythromycin ethylsuccinate.....	15	FEMCAP.....	88
ENBREL SURECLICK.....	81	ESBRIET.....	95	FEMRING.....	75
ENDARI.....	88	escitalopram oxalate.....	20	fenofibrate.....	40
endocet.....	8	esomeprazole magnesium.....	65	fenofibrate micronized.....	40
ENDOMETRIN.....	74	estarylla.....	74	fenofibric acid.....	40
ENGERIX-B.....	84	estazolam.....	37	fantanyl.....	9
enilloring.....	74	ESTRACE.....	74	fantanyl citrate.....	8
enoxaparin sodium.....	17	estradiol.....	74	FENTANYL CITRATE.....	8
enpresse-28.....	74	estradiol valerate.....	74	FENTORA.....	9
enskyce.....	74	estradiol-norethindrone acet.....	74	ferocon.....	61
ENSPRYNG.....	81	ESTRING.....	74	ferottrinsic.....	62
ENSTILAR.....	51	ESTROGEL.....	74	FERRALET 90.....	62
entacapone.....	31	eszopiclone.....	99	FERRIPROX.....	62
entecavir.....	34	ethacrynic acid.....	40	ferrocite plus.....	62
ENTEREG.....	66	ethambutol hcl.....	25	FERRO-PLEX.....	62
ENTRESTO.....	40	ethosuximide.....	18	fesoterodine fumarate er.....	68
enulose.....	66	ethyl chloride.....	12	FETZIMA.....	20
ENVARUSUS XR.....	81	ethynodiol diac-eth estradiol.....	74	FETZIMA TITRATION.....	20
EPCLUSA.....	34	etodolac.....	11	FIASP.....	59
EPIDIOLEX.....	18	etodolac er.....	11	FIASP FLEXTOUCH.....	59
EPIDUO FORTE.....	51	etonogestrel-ethinyl estradiol.....	74	FIASP PENFILL.....	59
EPIFOAM.....	51	etoposide.....	26	FIASP PUMPCART.....	59
epinastine hcl.....	89	etravirine.....	34	FILSPARI.....	68
epinephrine.....	95	EUA PATIENT ASSESSMENT.....	88	FINACEA.....	51
EPIPEN 2-PAK.....	95	EUCRISA.....	51	finasteride.....	69
		EULEXIN.....	26	fingolimod hcl.....	46
		euthyrox.....	79	FINTEPLA.....	18
		EVAMIST.....	74	finzala.....	75
		EVEKEO.....	45	FIORICET/CODEINE.....	9

FIRDAPSE.....	88	fluvoxamine maleate.....	20	FUSION PLUS.....	62
FIRMAGON.....	71	fluvoxamine maleate er.....	20	FUZEON.....	34
FIRMAGON (240 MG DOSE)...	71	FLUZONE HIGH-DOSE		fyavolv.....	75
FIRVANQ.....	15	QUADRIVALENT.....	84	FYCOMPA.....	18
flac.....	93	FLUZONE QUADRIVALENT....	84	fyremadel.....	71
FLAREX.....	89	FML FORTE.....	90	gabapentin.....	18
flavoxate hcl.....	68	FML LIQUIFILM.....	90	GALAFOLD.....	67
flecainide acetate.....	40	FOCALIN.....	45	galantamine hydrobromide.....	19
FLOVENT DISKUS.....	95	folic acid.....	62	galantamine hydrobromide er...	19
FLOVENT HFA.....	96	FOLIVANE-F.....	62	GALZIN.....	62
floxuridine.....	26	FOLIVANE-PLUS.....	62	ganirelix acetate.....	71
FLUAD QUADRIVALENT.....	84	FOLLISTIM AQ.....	71	GARDASIL 9.....	84
FLUARIX QUADRIVALENT.....	84	foltrin.....	62	GASTROCROM.....	66
FLUBLOK QUADRIVALENT....	84	fondaparinux sodium.....	17	gatifloxacin.....	90
FLUCELVAX		FORA 6 CONNECT.....	57	GATTEX.....	66
QUADRIVALENT.....	84	FORA 6 CONNECT/GTEL		gavilyte-c.....	66
fluconazole.....	23	TEST.....	57	gavilyte-g.....	66
flucytosine.....	23	FORA GTEL BLOOD		GAVRETO.....	26
fludrocortisone acetate.....	70	GLUCOSE TEST.....	57	GEBAUERS PAIN EASE.....	12
FLULAVAL QUADRIVALENT...	84	FORA TN'G ADVANCE PRO...	57	GEBAUERS SPRAY AND	
FLUMIST QUADRIVALENT.....	84	formaldehyde.....	88	STRETCH.....	12
fluocinolone acetonide.....	52, 93	formoterol fumarate.....	96	gefitinib.....	26
fluocinolone acetonide body....	51	FORTEO.....	87	GELNIQUE.....	68
fluocinolone acetonide scalp....	52	FORTESTA.....	70	gemfibrozil.....	40
fluocinonide.....	52	FORTISCARE G1 TEST		gemmily.....	75
fluocinonide emulsified base....	52	STRIP.....	57	GEMTESA.....	68
FLUORIDEX.....	48	FOSAMAX.....	87	generlac.....	66
fluoridex daily renewal.....	49	fosamprenavir calcium.....	34	gengraf.....	81
FLUORIDEX ENHANCED		fosfomycin tromethamine.....	15	GENOTROPIN.....	71
WHITENING.....	49	fosinopril sodium.....	40	GENOTROPIN MINIQUICK.....	71
FLUORIDEX SENSITIVITY		fosinopril sodium-hctz.....	40	gentamicin sulfate.....	15, 90
RELIEF.....	49	FOSRENOL.....	68	GENVOYA.....	34
FLUORIMAX 5000.....	49	FOTIVDA.....	26	GEODON.....	32
FLUORIMAX 5000 SENSITIVE	49	FRAGMIN.....	17	GHT BLOOD GLUCOSE	
fluorometholone.....	89	FREESTYLE FREEDOM LITE.	57	MONITOR.....	57
FLUOROURACIL.....	52	FREESTYLE INSULINX TEST.	57	GILENYA.....	46
fluorouracil.....	52	FREESTYLE LIBRE 14 DAY		GILOTRIF.....	26
fluoxetine hcl.....	20	READER.....	57	glatiramer acetate.....	46
fluphenazine decanoate.....	32	FREESTYLE LIBRE 14 DAY		glatopa.....	46
fluphenazine hcl.....	32	SENSOR.....	57	GLEOSTINE.....	26
flurazepam hcl.....	99	FREESTYLE LIBRE 2		glimepiride.....	54
furbiprofen.....	11	READER.....	57	glipizide er.....	54
furbiprofen sodium.....	90	FREESTYLE LIBRE 2		glipizide ir.....	54
FLUTICASONE FUROATE-		SENSOR.....	57	glipizide xl.....	54
VILANTEROL.....	96	FREESTYLE LIBRE 3		glipizide-metformin hcl.....	54
fluticasone propionate.....	52	SENSOR.....	57	GLUCAGEN HYPOKIT.....	58
FLUTICASONE PROPIONATE		FREESTYLE LIBRE READER..	57	glucagon emergency kit.....	58
DISKUS.....	96	FREESTYLE LITE TEST.....	57	GLUCAGON EMERGENCY	
FLUTICASONE PROPIONATE		FREESTYLE PRECISION		KIT.....	58
HFA.....	96	NEO TEST.....	57	GLUCOCARD 01 SENSOR	
fluticasone-salmeterol.....	96	FREESTYLE TEST.....	57	PLUS.....	57
FLUTICASONE-		FULPHILA.....	38	GLUCOCARD EXPRESSION	
SALMETEROL.....	96	furosemide.....	40	TEST.....	57

GLUCOCARD SHINE		HEMANGEOL.....	41	hydrocod poli-chlorphe poli er...	93
CONNEX.....	57	hematinic plus vit/minerals.....	62	hydrocodone bitartrate er.....	9
GLUCOCARD SHINE		hematinic/folic acid.....	62	hydrocodone bit-homatrop mbr.	93
EXPRESS.....	57	HEMATOGEN FA.....	62	hydrocodone-acetaminophen.....	9
GLUCOCARD SHINE TEST.....	57	HEMOCYTE PLUS.....	62	hydrocodone-ibuprofen.....	9
GLUCOCARD VITAL TEST.....	57	heparin sodium (porcine).....	17	hydrocortisone.....	52, 70, 86
GLUCOTROL XL.....	54	heparin sodium (porcine) pf.....	17	hydrocortisone (perianal).....	86
glutaraldehyde.....	88	HEPLISAV-B.....	84	hydrocortisone ace-pramoxine..	86
GLUTATHIONE.....	62	HEXATRIONE.....	70	hydrocortisone butyrate.....	52
glyburide.....	54	HIBERIX.....	84	hydrocortisone valerate.....	52
glyburide micronized.....	54	HIPREX.....	15	hydrocortisone-acetic acid.....	93
glyburide-metformin.....	54	HOMATROPAIRE.....	92	hydrogen peroxide.....	15
GLYCINE.....	62	HORIZANT.....	48	hydromet.....	94
glycopyrrolate.....	66	HUMALOG.....	59	hydromorphone hcl.....	9
glydo.....	12	HUMALOG KWIKPEN.....	59	hydromorphone hcl er.....	9
GLYNASE.....	54	HUMALOG MIX 50/50		hydromorphone hcl pf.....	9
GLYXAMBI.....	54	KWIKPEN.....	59	hydroxocobalamin acetate.....	62
GOJJI BLOOD GLUCOSE		HUMALOG MIX 50/50 VIAL.....	59	hydroxychloroquine sulfate.....	30
TEST.....	57	HUMALOG MIX 75/25		hydroxyurea.....	26
GOLYTELY.....	66	KWIKPEN.....	59	hydroxyzine hcl.....	37
GONAL-F.....	71	HUMALOG MIX 75/25 VIAL.....	59	hydroxyzine pamoate.....	37
GONAL-F RFF.....	71	HUMALOG U-100 JUNIOR		HYFTOR.....	52
GONAL-F RFF REDIJECT.....	71	KWIKPEN.....	59	HYMOVIS.....	88
GORDOFILM.....	52	HUMATIN.....	15	hyoscyamine sulfate.....	66
GRALISE.....	47	HUMATROPE.....	71	hyoscyamine sulfate sl.....	66
granisetron hcl.....	22	HUMIRA.....	81	HYPERSAL.....	94
GRASTEK.....	88	HUMIRA PEDIATRIC		HYRIMOZ.....	81, 82
griseofulvin microsize.....	23	CROHNS START.....	81	HYRIMOZ-CROHNS/UC	
griseofulvin ultramicrosize.....	23	HUMIRA PEN.....	81	STARTER PACK.....	82
guaifenesin ac.....	93	HUMIRA PEN-CD/UC/HS		HYRIMOZ-PED CROHNS	
guaifenesin-codeine.....	93	STARTER.....	81	STARTER.....	82
guanfacine hcl.....	41	HUMIRA PEN-PEDIATRIC UC		HYRIMOZ-PLAQUE	
guanfacine hcl er.....	45	START.....	81	PSORIASIS START.....	82
GVOKE HYPOPEN 1-PACK.....	58	HUMIRA PEN-PS/UV/ADOL		HYSINGLA ER.....	9
GVOKE HYPOPEN 2-PACK.....	58	HS START.....	81	ibandronate sodium.....	87
GVOKE KIT.....	58	HUMIRA PEN-PSOR/UEIT		IBRANCE.....	26
GVOKE PFS.....	58	STARTER.....	81	ibuprofen.....	11
GYNAZOLE-1.....	23	HUMULIN 70/30 KWIKPEN.....	59	ICAR-C PLUS.....	62
hailey 1.5/30.....	75	HUMULIN 70/30 VIAL.....	59	icatibant acetate.....	82
hailey 24 fe.....	75	HUMULIN N KWIKPEN.....	59	iclevia.....	75
hailey fe 1.5/30.....	75	HUMULIN N VIAL.....	59	ICLUSIG.....	26
hailey fe 1/20.....	75	HUMULIN R U-500 KWIKPEN..	59	icosapent ethyl.....	41
HALCION.....	37	HUMULIN R U-500 VIAL.....	59	IDHIFA.....	26
HALDOL DECANOATE.....	32	HUMULIN R VIAL.....	59	iferex 150 forte.....	62
halobetasol propionate.....	52	HW EMBRACE PRO		IGALMI.....	88
haloette.....	75	GLUCOSE TEST.....	57	ILUMYA.....	82
haloperidol.....	32	HW EMBRACE TALK		imatinib mesylate.....	26
haloperidol decanoate.....	32	GLUCOSE TEST.....	57	IMBRUVICA.....	26, 27
haloperidol lactate.....	32	HYCAMTIN.....	26	IMCIVREE.....	48
HARVONI.....	34	HYCODAN.....	93	imipramine hcl.....	20
HAVRIX.....	84	hydralazine hcl.....	41	imipramine pamoate.....	20
heather.....	75	HYDREA.....	26	imiquimod.....	52
HELIDAC THERAPY.....	66	hydrochlorothiazide.....	41	imiquimod pump.....	52

IMITREX STATDOSE REFILL..	24	INTRAROSA.....	68	joyeaux.....	75
IMITREX STATDOSE		introvale.....	75	juleber.....	75
SYSTEM.....	24	INVEGA.....	32	JULUCA.....	34
IMOVAX RABIES.....	85	INVEGA HAFYERA.....	32	junel 1.5/30.....	75
IMPAVIDO.....	30	INVEGA SUSTENNA.....	32	junel 1/20.....	75
IMURAN.....	82	INVEGA TRINZA.....	32	junel fe 1.5/30.....	75
IMVEXXY MAINTENANCE		INVELTYS.....	90	junel fe 1/20.....	75
PACK.....	75	INVOKAMET.....	54	junel fe 24.....	75
IMVEXXY STARTER PACK....	75	INVOKAMET XR.....	54	JUST RIGHT 5000.....	49
INBRIJA.....	31	INVOKANA.....	54	JUXTAPID.....	41
incassia.....	75	iodine strong.....	62	JYNARQUE.....	62
INCONTROL ULTICARE PEN		IOPIDINE.....	91	JYNNEOS.....	85
NEEDLES.....	88	IPOL.....	85	kaitlib fe.....	75
INCRELEX.....	71	ipratropium bromide.....	94, 96	KALETRA.....	34
INCRUSE ELLIPTA.....	96	ipratropium-albuterol.....	96	kalliga.....	75
indapamide.....	41	irbesartan.....	41	KALYDECO.....	97
indomethacin.....	12	irbesartan-hydrochlorothiazide..	41	KAPSPARGO SPRINKLE.....	41
indomethacin er.....	12	IRESSA.....	27	KAPVAY.....	45
INFANRIX.....	85	IRON FOLATE PLUS.....	62	kariva.....	75
INFINITY BLOOD GLUCOSE		IRON FOLATE-F.....	62	KAZANO.....	55
TEST.....	57	ISENTRESS.....	34	kelnor 1/35.....	75
INGREZZA.....	48	ISENTRESS HD.....	34	kelnor 1/50.....	75
INLYTA.....	27	isibloom.....	75	KERALYT.....	52
INPEFA.....	41	isoniazid.....	25	KERENDIA.....	88
INQOVI.....	27	isoproterenol hcl.....	96	KESIMPTA.....	47
INREBIC.....	27	ISORDIL TITRADOSE.....	41	ketoconazole.....	23
INSPIRA.....	41	isosorb dinitrate-hydralazine....	41	KETO-DIASTIX.....	57
INSULIN ASP PROT & ASP		isosorbide dinitrate.....	41	ketoprofen.....	12
FLEXPEN.....	59	isosorbide mononitrate.....	41	ketorolac tromethamine.....	12, 90
INSULIN ASPART.....	59	isosorbide mononitrate er.....	41	KEVEYIS.....	91
INSULIN ASPART FLEXPEN...	59	isotretinoin.....	52	KEVZARA.....	82
INSULIN ASPART PENFILL....	59	isradipine.....	41	KINERET.....	82
INSULIN ASPART PROT &		ISTALOL.....	91	KINRIX.....	85
ASPART.....	59	ISTURISA.....	71	KISQALI.....	27
INSULIN DEGLUDEC.....	59	itraconazole.....	23	KISQALI FEMARA.....	27
INSULIN DEGLUDEC		ivermectin.....	30, 52	KITABIS PAK.....	97
FLEXTOUCH.....	60	jaimiess.....	75	KLARON.....	52
INSULIN GLARGINE.....	60	JAKAFI.....	27	KLISYRI.....	52
INSULIN GLARGINE		JALYN.....	69	klor-con.....	62
SOLOSTAR.....	60	jantoven.....	17	klor-con 10.....	62
INSULIN GLARGINE-YFGN....	60	JANUMET.....	55	klor-con m10.....	62
INSULIN LISPRO.....	60	JANUMET XR.....	55	klor-con m15.....	62
INSULIN LISPRO (1 UNIT		JANUVIA.....	55	klor-con m20.....	62
DIAL).....	60	JARDIANCE.....	55	KLOXXADO.....	13
INSULIN LISPRO JUNIOR		jasmiel.....	75	KOMBIGLYZE XR.....	55
KWIKPEN.....	60	JAYPIRCA.....	27	KORLYM.....	72
INSULIN LISPRO PROT &		jencycla.....	75	KOSELUGO.....	27
LISPRO.....	60	JENTADUETO.....	55	kourzeq.....	49
INSULIN PEN NEEDLES.....	88	JENTADUETO XR.....	55	K-PHOS.....	62
INSULIN SYRINGES.....	60	jinteli.....	75	k-prime.....	62
INTEGRA F.....	62	JOENJA.....	82	KRAZATI.....	27
INTEGRA PLUS.....	62	jolessa.....	75	KRINTAFEL.....	30
INTELENCE.....	34	JORNAY PM.....	45		

KROGER HEALTHPRO			
GLUCOSE TEST	57	levabuterol hcl	96
K-TAB	62	LEVALBUTEROL HFA	96
k-tan plus	62	LEVEMIR FLEXPEN	60
kurvelo	75	LEVEMIR U-100 VIAL	60
L.E.T	12	levetiracetam	18
labetalol hcl	41	levetiracetam er	18
lacosamide	18	levobunolol hcl	91
lactic acid	52	levocarnitine	62
lactic acid e	52	levocarnitine sf	63
lactulose	66	levofloxacin	15, 90
lactulose encephalopathy	66	levonest	76
LAGEVRIO	34	levonorgest-eth est & eth est	76
LAMICTAL ODT	18	levonorgest-eth estrad 91-day	76
LAMICTAL STARTER	18	levonorgest-eth estradiol-iron	76
LAMICTAL XR	18	levonorgestrel-ethinyl estrad	76
lamivudine	34	levonorg-eth estrad triphasic	76
lamivudine-zidovudine	35	levora 0.15/30 (28)	76
lamotrigine	18	levo-t	79
lamotrigine er	18	LEVOTHYROXINE SODIUM	79
lamotrigine starter kit-blue	18	levothyroxine sodium	79
lamotrigine starter kit-green	18	levoxyl	79
lamotrigine starter kit-orange	18	LEXIVA	35
LAMPIT	30	LIALDA	86
LANCETS	57	lidocaine	12
LANOXIN	41	lidocaine hcl	12
LANREOTIDE ACETATE	71	lidocaine hcl urethral/mucosal	12
lanthanum carbonate	68	lidocaine viscous hcl	49
LANTUS SOLOSTAR	60	LIDOCAINE-EPINEPHRINE (3	
LANTUS U-100 VIAL	60	ML)	12
lapatinib ditosylate	27	lidocaine-prilocaine	12
larin 1.5/30	75	LIDO-RACEPINEPHRINE-	
larin 1/20	75	TETRACAINE	12
larin 24 fe	75	linezolid	15
larin fe 1.5/30	76	LINZESS	66
larin fe 1/20	76	liothyronine sodium	79
LASIX	41	LIPO	63
latanoprost	91	LIPO-C	63
LATUDA	32	lisdexamfetamine dimesylate	45
layolis fe	76	lisinopril	41
LEDIPASVIR-SOFOSBUVIR	35	lisinopril-hydrochlorothiazide	41
leena	76	LITFULO	52
leflunomide	82	lithium	38
lenalidomide	27	lithium carbonate	38
LENVIMA	27	lithium carbonate er	38
lessina	76	LITHOSTAT	68
letrozole	27	LIVALO	41
leucovorin calcium	27	LIVMARLI	88
LEUKERAN	27	LIVTENCITY	35
LEUKINE	38	LO LOESTRIN FE	76
leuprolide acetate	71	LODINE	12
LEUPROLIDE ACETATE-		LOESTRIN 1.5/30 (21)	76
BUPIVACAINE	71	LOESTRIN 1/20 (21)	76
		LOESTRIN FE 1.5/30	76
		LOESTRIN FE 1/20	76
		lojaimiess	76
		LOKELMA	63
		LOMAIRA	48
		LOMOTIL	66
		LONSURF	27
		loperamide hcl	66
		LOPID	41
		lopinavir-ritonavir	35
		LOPRESSOR	41
		lorazepam	37
		lorazepam intensol	37
		LORBRENA	27
		loryna	76
		losartan potassium	41
		losartan potassium-hctz	41
		LOTEMAX SM	90
		LOTENSIN	41
		LOTENSIN HCT	41
		loteprednol etabonate	90
		lovastatin	41
		LOVENOX	17
		low-ogestrel	76
		loxapine succinate	33
		lo-zumandimine	76
		lubiprostone	66
		LUCEMYRA	13
		LUGOLS STRONG IODINE	15
		LUMAKRAS	27
		LUMIGAN	91
		LUMRYZ	99
		LUPKYNIS	82
		LUPRON DEPOT (1-MONTH)	71
		LUPRON DEPOT (3-MONTH)	71
		LUPRON DEPOT (4-MONTH)	
		INTRAMUSCULAR KIT 30MG	71
		LUPRON DEPOT (6-MONTH)	
		INTRAMUSCULAR KIT 45MG	71
		LUPRON DEPOT-PED (1-	
		MONTH)	71
		LUPRON DEPOT-PED (3-	
		MONTH)	71
		lurasidone hcl	33
		lutura	76
		LYBALVI	20
		lyleq	76
		lyllana	76
		LYNPARZA	27
		LYRICA	48
		LYSINE HCL	63
		LYSODREN	27
		LYTGOBI (12 MG DAILY	
		DOSE)	27

LYTGOBI (16 MG DAILY DOSE).....	27	mesalamine-cleanser.....	86	MIEBO.....	92
LYTGOBI (20 MG DAILY DOSE).....	27	MESNEX.....	28	MIGERGOT.....	24
LYUMJEV KWIKPEN.....	60	MESTINON.....	24, 25	miglitol.....	55
LYUMJEV VIAL.....	60	metformin hcl er.....	55	miglustat.....	67
lyza.....	76	metformin hcl ir.....	55	mili.....	77
MACROBID.....	15	methadone hcl.....	9	mimvey.....	77
MACRODANTIN.....	15	methadone hcl intensol.....	9	MINASTRIN 24 FE.....	77
mafenide acetate.....	15	METHADOSE.....	9	mineral oil heavy.....	66
magnesium sulfate.....	63	methadose.....	9	MINIPRESS.....	42
MAGNESIUM SULFATE.....	63	METHADOSE SUGAR-FREE...	10	minocycline hcl.....	16
MALARONE.....	30	methazolamide.....	91	minoxidil.....	42
malathion.....	30	methenamine hippurate.....	16	mirtazapine.....	20
maraviroc.....	35	methergine.....	88	MIRVASO.....	52
MARCAINE/EPINEPHRINE.....	12	methimazole.....	79	misoprostol.....	65
MARINOL.....	22	METHITEST.....	70	MITIGARE.....	23
marlissa.....	76	methocarbamol.....	99	MITOSOL.....	90
MARPLAN.....	20	methotrexate sodium.....	82	M-M-R II.....	85
MATULANE.....	27	methotrexate sodium (pf).....	82	M-NATAL PLUS.....	63
MAVENCLAD.....	47	methoxsalen rapid.....	52	modafinil.....	99
MAVYRET.....	35	methscopolamine bromide.....	66	MODERNA COVID-19 VAC	
MAXIDEX.....	90	methsuximide.....	18	6M-11Y.....	85
MAXITROL.....	90	METHYLCOBALAMIN.....	63	moexipril hcl.....	42
maxi-tuss ac.....	94	METHYLDOPA.....	41	molindone hcl.....	33
MAXZIDE.....	41	methylergonovine maleate.....	88	mometasone furoate.....	52
MAXZIDE-25.....	41	METHYLIN.....	45	mondoxyne nl.....	16
MAYZENT.....	47	methylphenidate.....	45	mono-linyah.....	77
MAYZENT STARTER PACK....	47	methylphenidate hcl.....	45	montelukast sodium.....	96
meclizine hcl.....	22	methylphenidate hcl er.....	45	MORPHINE SULFATE.....	10
MEDROL.....	70	methylphenidate hcl er (cd).....	45	morphine sulfate.....	10
medroxyprogesterone acetate..	76	methylphenidate hcl er (la).....	45	morphine sulfate (concentrate)..	10
mefloquine hcl.....	30	methylphenidate hcl er (osm)....	45	morphine sulfate er.....	10
megestrol acetate.....	76	methylphenidate hcl er (xr).....	45	morphine sulfate er beads.....	10
MEKINIST.....	27	methylprednisolone.....	70	MOTEGRITY.....	66
MEKTOVI.....	27	metoclopramide hcl.....	22	MOUNJARO.....	55
meloxicam.....	12	metolazone.....	41	MOVANTIK.....	66
melphalan.....	27	metoprolol succinate er.....	42	MOVIPREP.....	66
memantine hcl.....	19	metoprolol tartrate.....	42	moxifloxacin hcl.....	16, 90
memantine hcl er.....	19	metoprolol-hydrochlorothiazide.	42	moxifloxacin hcl (2x day).....	90
MENACTRA.....	85	METROCREAM.....	52	MULPLETA.....	38
MENEST.....	76	METROGEL.....	52	MULTAQ.....	42
MENOPUR.....	71	METROLOTION.....	52	MULTIGEN.....	63
MENOSTAR.....	76	metronidazole.....	16, 52	MULTIGEN FOLIC.....	63
MENQUADFI.....	85	metyrosine.....	42	MULTIGEN PLUS.....	63
MENVEO.....	85	mexiletine hcl.....	42	multivitamin w/fluoride.....	63
meperidine hcl.....	9	mibelas 24 fe.....	76	multivitamin/fluoride.....	63
meprobamate.....	37	miconazole 3.....	23	MULTIVITAMIN/FLUORIDE.....	63
MEPRON.....	30	MICRODOT TEST.....	57	multi-vitamin/fluoride.....	63
mercaptapurine.....	28	microgestin 1.5/30.....	76	multi-vitamin/fluoride/iron.....	63
merzee.....	76	microgestin 1/20.....	76	MULTI-VIT-FLOR.....	63
mesalamine.....	86	microgestin 24 fe.....	76	mupirocin.....	16
mesalamine er.....	86	microgestin fe 1.5/30.....	76	MYALEPT.....	67
		microgestin fe 1/20.....	76	MYAMBUTOL.....	25
		midodrine hcl.....	42	MYCAPSSA.....	71

MYCOBUTIN.....	25	NEO-SYNALAR.....	53	norlyroc.....	77
mycophenolate mofetil.....	82	NEPHRON FA.....	63	NORPACE.....	42
mycophenolate sodium.....	82	NERLYNX.....	28	NORPACE CR.....	42
MYCOZYL AL.....	23	NESACAINE-MPF.....	12	NORPRAMIN.....	20
MYDAYIS.....	46	NESINA.....	55	nortrel 0.5/35 (28).....	77
MYFEMBREE.....	77	neuac.....	53	nortrel 1/35 (21).....	77
MYFORTIC.....	82	NEUPRO.....	31	nortrel 1/35 (28).....	77
MYLERAN.....	28	NEURONTIN.....	18	nortrel 7/7/7.....	77
MYRBETRIQ.....	68	nevirapine.....	35	nortriptyline hcl.....	20
MYTESI.....	66	nevirapine er.....	35	NORVIR.....	35
na sulfate-k sulfate-mg sulf.....	66	NEXAVAR.....	28	NOURIANZ.....	31
nabumetone.....	12	NEXIUM.....	65	NOVAREL.....	72
nadolol.....	42	NEXLETOL.....	42	NOVAVAX COVID-19	
naftifine hcl.....	23	NEXLIZET.....	42	VACCINE.....	85
nalbuphine hcl.....	10	NEXPLANON.....	77	NOVOLIN 70/30 FLEXPEN.....	60
NALMEFENE HCL.....	13	NEXTSTELLIS.....	77	NOVOLIN 70/30 FLEXPEN	
naloxone hcl.....	13	NGENLA.....	71	RELION.....	60
naltrexone hcl.....	13	niacin er (antihyperlipidemic)....	42	NOVOLIN 70/30 RELION.....	60
NAMENDA.....	19	NICOTROL.....	13	NOVOLIN 70/30 VIAL.....	60
NAMENDA TITRATION PAK....	19	NICOTROL NS.....	13	NOVOLIN N FLEXPEN.....	60
NAMENDA XR.....	19	nifedipine.....	42	NOVOLIN N FLEXPEN	
NAMZARIC.....	19	nifedipine er.....	42	RELION.....	60
naproxen.....	12	nifedipine er osmotic release....	42	NOVOLIN N RELION.....	60
naproxen dr.....	12	nikki.....	77	NOVOLIN N VIAL.....	60
naproxen sodium.....	12	NILANDRON.....	28	NOVOLIN R FLEXPEN.....	60
naratriptan hcl.....	24	nilutamide.....	28	NOVOLIN R FLEXPEN	
NARCAN.....	13	nimodipine.....	42	RELION.....	60
NARDIL.....	20	NINLARO.....	28	NOVOLIN R RELION.....	60
NAROPIN.....	12	nitazoxanide.....	30	NOVOLIN R VIAL.....	60
NASCOBAL.....	63	nitisinone.....	67	NOVOLOG 70/30 FLEXPEN	
NATACYN.....	90	NITRO-BID.....	42	RELION.....	60
NATAZIA.....	77	nitrofurantoin macrocrystal.....	16	NOVOLOG FLEXPEN.....	60
nateglinide.....	55	nitrofurantoin monohydrate		NOVOLOG FLEXPEN	
NATROBA.....	30	macrocrystals.....	16	RELION.....	60
NAYZILAM.....	18	nitroglycerin.....	42	NOVOLOG MIX 70/30	
nebivolol hcl.....	42	NITROLINGUAL.....	42	FLEXPEN.....	60
NEBUPENT.....	30	NITROSTAT.....	42	NOVOLOG MIX 70/30	
NEBUSAL.....	94	NITYR.....	67	RELION.....	60
necon 0.5/35 (28).....	77	NIVA THYROID.....	79	NOVOLOG MIX 70/30 VIAL.....	60
nefazodone hcl.....	20	NOCDURNA.....	71	NOVOLOG PENFILL.....	60
NEOKE ALCAR.....	63	nora-be.....	77	NOVOLOG RELION.....	60
NEOKE RA LIPOIC.....	88	NORDITROPIN FLEXPRO.....	71	NOVOLOG U-100 VIAL.....	61
neomycin sulfate.....	16	norethin ace-eth estrad-fe.....	77	NOXAFIL.....	23
neomycin-bacitracin zn-		norethindrone.....	77	np thyroid.....	79
polymyx.....	92	norethindrone acetate.....	77	NUBEQA.....	28
neomycin-polymyxin-dexameth	90	norethindrone acet-ethinyl est...77		NUCALA.....	96, 97
neomycin-polymyxin-		norethindrone-eth estradiol.....	77	NUCYNTA.....	10
gramicidin.....	92	norethindron-ethinyl estrad-fe...77		NUCYNTA ER.....	10
neomycin-polymyxin-hc.....	90, 93	norethin-eth estradiol-fe.....	77	NUDEXTA.....	48
NEONATAL PLUS.....	63	norgestimate-eth estradiol.....	77	NUPLAZID.....	33
neo-polycin.....	92	norgestimate-ethinyl estradiol		NURTEC.....	24
neo-polycin hc.....	92	triphasic.....	77	NUTRIVIT.....	63
NEORAL.....	82	NORLIQVA.....	42	NUTROPIN AQ NUSPIN 10.....	72

NUTROPIN AQ NUSPIN 20.....	72	ONETOUCH VERIO KIT		oxycodone-acetaminophen.....	10
NUTROPIN AQ NUSPIN 5.....	72	W/DEVICE.....	58	OXYCONTIN.....	10
NUVARING.....	77	ONETOUCH VERIO		oxymorphone hcl.....	11
NUZYRA.....	16	REFLECT KIT W/DEVICE.....	58	oxymorphone hcl er.....	10
nyamyc.....	23	ONEXTON.....	53	OXYTROL.....	69
nylia 1/35.....	77	ONGENTYS.....	31	OZEMPIC.....	55
nylia 7/7/7.....	77	ONGLYZA.....	55	PACERONE.....	42
NYMALIZE.....	42	ONUREG.....	28	PALFORZIA.....	88
nymyo.....	77	OPSUMIT.....	98	paliperidone er.....	33
nystatin.....	23	OPZELURA.....	53	PALYNZIQ.....	68
nystatin-triamcinolone.....	23	ORACIT.....	63	PANCREAZE.....	68
nystop.....	23	ORALAIR.....	88	PANRETIN.....	28
OICALIVA.....	68	ORALAIR ADULT STARTER		pantoprazole sodium.....	65
ocella.....	77	PACK.....	88	paricalcitol.....	87
octreotide acetate.....	72	ORALAIR CHILDRENS		PARLODEL.....	31
OCUFLOX.....	90	STARTER PACK.....	88	PARNATE.....	21
ODACTRA.....	88	oralone.....	49	paroxetine hcl.....	21
ODEFSEY.....	35	ORENCIA.....	82	paroxetine hcl er.....	21
ODOMZO.....	28	ORENCIA CLICKJECT.....	82	PAXIL.....	21
OFEV.....	97	ORENITRAM.....	98	PAXLOVID (150/100).....	35
ofloxacin.....	16, 90, 93	ORENITRAM MONTH 1.....	98	PAXLOVID (300/100).....	35
olanzapine.....	33	ORENITRAM MONTH 2.....	98	pazopanib hcl.....	28
olanzapine-fluoxetine hcl.....	20	ORENITRAM MONTH 3.....	98	PEDIAPRED.....	70
olmesartan medoxomil.....	42	ORFADIN.....	68	PEDIARIX.....	85
olmesartan medoxomil-hctz.....	42	ORGOVYX.....	28	PEDVAX HIB.....	85
olmesartan-amlodipine-hctz.....	42	ORIAHNN.....	77	peg 3350-kcl-na bicarb-nacl.....	66
olopatadine hcl.....	90, 94	ORILISSA.....	72	peg-3350/electrolytes.....	66
OLUMIANT.....	82	ORKAMBI.....	98	peg-3350/electrolytes/ascorbat.....	67
OMECLAMOX-PAK.....	66	ORLADEYO.....	82	PEGASYS.....	35
omega-3-acid ethyl esters.....	42	ORLISTAT.....	48	peg-kcl-nacl-nasulf-na asc-c.....	67
omeprazole.....	65	orphenadrine citrate er.....	99	PEG-PREP.....	67
OMNIPOD 5 G6 INTRO (GEN		ORSERDU.....	28	PEMAZYRE.....	28
5).....	88	OSCIMIN.....	66	penicillamine.....	69
OMNIPOD 5 G6 POD (GEN 5).....	88	oseltamivir phosphate.....	35	penicillin v potassium.....	16
OMNIPOD DASH INTRO		OSENI.....	55	PENTACEL.....	85
(GEN 4).....	88	OSMOLEX ER.....	31	pentamidine isethionate.....	30
OMNIPOD DASH PODS (GEN		OSPHENA.....	72	PENTASA.....	86
4).....	88	OTEZLA.....	82	pentazocine-naloxone hcl.....	11
OMNITROPE.....	72	OVIDE.....	30	pentoxifylline er.....	42
ONCASPAR.....	28	OVIDREL.....	72	PERFOROMIST.....	97
ondansetron hcl.....	22	oxacillin sodium.....	16	PERIDEX.....	49
ondansetron odt.....	22	oxaprozin.....	12	perindopril erbumine.....	42
ONE DROP BLOOD		oxazepam.....	37	periogard.....	49
GLUCOSE MONITOR.....	58	OXBRYTA.....	88	permethrin.....	30
ONE DROP TEST.....	58	oxcarbazepine.....	18	perphenazine.....	22
ONE VITE WOMENS PLUS.....	63	OXERVATE.....	92	perphenazine-amitriptyline.....	21
ONETOUCH ULTRA 2 KIT		OXTELLAR XR.....	18	PERSERIS.....	33
W/DEVICE.....	58	oxybutynin chloride.....	68, 69	PFIZER COVID-19 VAC-TRIS	
ONETOUCH ULTRA TEST		oxybutynin chloride er.....	68	5-11Y.....	85
STRIPS.....	58	oxycodone hcl.....	10	PFIZER COVID-19 VAC-TRIS	
ONETOUCH VERIO FLEX		OXYCODONE HCL ER.....	10	6M-4Y.....	85
SYSTEM.....	58	OXYCODONE-		PHEBURANE.....	68
		ACETAMINOPHEN.....	10	phenazo.....	69

phenazopyridine hcl.....	69	PONVORY STARTER PACK... 47	PREVNAR 20.....	85
phendimetrazine tartrate.....	48	portia-28.....	PREVYMIS.....	35
phendimetrazine tartrate er.....	48	posaconazole.....	PREZCOBIX.....	35
phenelzine sulfate.....	21	potassium chloride.....	PREZISTA.....	35
phenobarbital.....	18	potassium chloride crys er.....	PRIFTIN.....	25
phenoxybenzamine hcl.....	42	potassium chloride er.....	primaquine phosphate.....	31
phentermine hcl.....	48	potassium citrate er.....	primidone.....	18
phenylephrine hcl.....	92	POVIDONE-IODINE.....	PRIORIX.....	85
phenytek.....	18	PRADAXA.....	PROAIR DIGIHALER.....	97
phenytoin.....	18	PRALUENT.....	PROAIR RESPICLICK.....	97
phenytoin infatabs.....	18	pramipexole dihydrochloride.....	probenecid.....	23
phenytoin sodium extended.....	18	pramipexole dihydrochloride er.....	procainamide hcl.....	43
PHEXXI.....	88	PRAMOTIC.....	PROCENTRA.....	46
philith.....	77	prasugrel hcl.....	prochlorperazine.....	22
PHOSPHA 250 NEUTRAL.....	63	pravastatin sodium.....	prochlorperazine maleate.....	22
phosphorous.....	63	praziquantel.....	PROCTOFOAM HC.....	86
phospho-trin 250 neutral.....	63	prazosin hcl.....	procto-med hc.....	86
PHOSPHO-TRIN K500.....	64	PRECISION XTRA BLOOD	proctosol hc.....	86
PHOTREXA-PHOTREXA		GLUCOSE.....	proctozone-hc.....	86
VISCOUS KIT.....	88	PRED FORTE.....	PRODIGY NO CODING	
phytonadione.....	64	PRED MILD.....	BLOOD GLUC.....	58
PIFELTRO.....	35	prednisolone.....	progesterone.....	78
pilocarpine hcl.....	49, 91	prednisolone acetate.....	PROGLYCEM.....	58
pimecrolimus.....	53	prednisolone sodium	PROGRAF.....	82
pimozide.....	33	phosphate.....	PROLENSA.....	90
pimtrea.....	77	phosphate.....	PROMACTA.....	38
pindolol.....	42	prednisone.....	promethazine hcl.....	22
pioglitazone hcl.....	55	prednisone intensol.....	promethazine vc.....	94
pioglitazone hcl-glimepiride.....	55	pregabalin.....	promethazine vc/codeine.....	94
pioglitazone hcl-metformin hcl..	55	PREGNYL.....	promethazine-codeine.....	94
PIP BLOOD GLUCOSE TEST		PREHEVBRIO.....	promethazine-dm.....	94
STRIP.....	58	PREMARIN.....	promethegan.....	22
PIQRAY.....	28	PREMPHASE.....	propafenone hcl.....	43
pirfenidone.....	97	PREMPRO.....	propafenone hcl er.....	43
piroxicam.....	12	prenatal.....	proparacaine hcl.....	92
pitavastatin calcium.....	43	prenatal plus vitamin/mineral....	propranolol hcl.....	43
PLAVIX.....	32	PRENATVITE PLUS.....	propranolol hcl er.....	43
PLEGRIDY.....	47	PRENATVITE RX.....	propylthiouracil.....	79
PLEGRIDY STARTER PACK... 47		PREPIDIL.....	PROQUAD.....	85
PLENVU.....	67	PRESTALIA.....	PROSCAR.....	69
PNEUMOVAX 23.....	85	PRETOMANID.....	protriptyline hcl.....	21
pnv prenatal plus multivit+dha..	64	prevalite.....	PROVENTIL HFA.....	97
podofilox.....	53	PREVIDENT.....	PROVERA.....	78
POGO AUTOMATIC TEST		PREVIDENT 5000 BOOSTER	pseudoephedrine-bromphen-	
CARTRIDGES.....	58	PLUS.....	dm.....	94
polycin.....	92	PREVIDENT 5000 DRY	PTS PANELS EGLU TEST.....	58
poly-iron 150 forte.....	64	MOUTH.....	PULMICORT FLEXHALER.....	97
polymyxin b-trimethoprim.....	92	PREVIDENT 5000 ENAMEL	PULMOSAL.....	94
polysaccharide iron forte.....	64	PROTECT.....	PULMOZYME.....	98
POLY-VI-FLOR.....	64	PREVIDENT 5000 ORTHO	purevit dualfe plus.....	64
POLY-VI-FLOR/IRON.....	64	DEFENSE.....	PURIXAN.....	28
POMALYST.....	28	PREVIDENT 5000 PLUS.....	PYLERA.....	67
PONVORY.....	47	PREVIDENT 5000 SENSITIVE.....	pyrazinamide.....	25
		PREVNAR 13.....		

pyridostigmine bromide.....	25	RECTIV.....	43	ritonavir.....	35
pyridostigmine bromide er.....	25	REGENECARE.....	53	rivastigmine tartrate.....	19
pyrimethamine.....	31	REGLAN.....	22	rivelsa.....	78
PYRIMETHAMINE- LEUCOVORIN.....	31	REGRANEX.....	53	rizatriptan benzoate.....	24
PYROGALLIC ACID.....	53	RELENZA DISKHALER.....	35	ROCALTROL.....	87
PYRUKYND.....	38	RELION PREMIER TEST.....	58	ROCKLATAN.....	91
PYRUKYND TAPER PACK.....	38	RELISTOR.....	67	roflumilast.....	97
QBREXZA.....	53	RELNATE DHA.....	64	ropinirole hcl.....	31
QELBREE.....	46	RELYVRIO.....	48	ropinirole hcl er.....	31
QINLOCK.....	28	REMERON.....	21	ropivacaine hcl.....	12
QSYMIA.....	48	REMERON SOLTAB.....	21	rosuvastatin calcium.....	43
QTERN.....	55	REMESENSE.....	49	ROTARIX.....	85
QUADRACEL.....	85	RENATABS WITH IRON.....	64	ROTATEQ.....	85
QUALAQUIN.....	31	repaglinide.....	55	ROWASA.....	86
quazepam.....	37	REPATHA.....	43	roweepra.....	19
QUDEXY XR.....	18	REPATHA PUSHTRONEX SYSTEM.....	43	ROXYBOND.....	11
QUESTRAN.....	43	REPATHA SURECLICK.....	43	ROZLYTREK.....	28
QUESTRAN LIGHT.....	43	RESTASIS.....	92	RUBRACA.....	28
quetiapine fumarate.....	33	RESTASIS MULTIDOSE.....	92	rufinamide.....	19
quetiapine fumarate er.....	33	RESTORA RX.....	67	RUKOBIA.....	35
QUFLORA FE.....	64	RETACRIT.....	38	RYALTRIS.....	94
QUILLICHEW ER.....	46	RETEVMO.....	28	RYBELSUS.....	55
QUILLIVANT XR.....	46	RETIN-A.....	53	RYDAPT.....	28
quinapril hcl.....	43	RETIN-A MICRO PUMP.....	53	RYTARY.....	31
quinapril-hydrochlorothiazide.....	43	RETROVIR.....	35	SAFYRAL.....	78
quinidine gluconate er.....	43	REVLIMID.....	28	SAIZEN.....	72
quinidine sulfate.....	43	REXULTI.....	33	SALAGEN.....	49
quinine sulfate.....	31	REYATAZ.....	35	saline bacteriostatic.....	88
QULIPTA.....	24	REYVOW.....	24	SALINE-PHENOL.....	88
QUVIVIQ.....	99	REZLIDHIA.....	28	SAMSCA.....	64
QVAR REDIHALER.....	97	REZUROCK.....	83	SANDIMMUNE.....	83
RABAVERT.....	85	REZVOGLAR KWIKPEN.....	61	SANTYL.....	53
RADICAVA ORS.....	48	RHOFADE.....	53	sapropterin dihydrochloride.....	68
RADICAVA ORS STARTER KIT.....	48	RHOPRESSA.....	91	SAVAYSA.....	17
RAGWITEK.....	88	ribavirin.....	35	SAVELLA.....	48
raloxifene hcl.....	72	RIDAURA.....	83	SAVELLA TITRATION PACK... ..	48
ramelteon.....	99	rifabutin.....	25	saxagliptin hcl.....	55
ramipril.....	43	rifampin.....	25	saxagliptin-metformin er.....	55
ranolazine er.....	43	RIGHTEST GT333 BLOOD GLUCOSE.....	58	SAXENDA.....	48
RAPAMUNE.....	82	RIGHTEST GT333 GLUCOSE TEST.....	58	SCEMBLIX.....	28
rasagiline mesylate.....	31	RILUTEK.....	48	scopolamine.....	22
RASUVO.....	83	riluzole.....	48	SECUADO.....	33
RAYA SURE PEN NEEDLE.....	88	rimantadine hcl.....	35	SEGLUROMET.....	55
RAYALDEE.....	87	RIMSO-50.....	69	selegiline hcl.....	31
REBIF.....	47	RINVOQ.....	83	selenium sulfide.....	53
REBIF REBIDOSE.....	47	RIOMET.....	55	SELZENTRY.....	35
REBIF REBIDOSE TITRATION PACK.....	47	risedronate sodium.....	87	SEMGLEE (YFGN).....	61
REBIF TITRATION PACK.....	47	RISPERDAL.....	33	SENSORCAINE/EPINEPHRIN E.....	12
reclipsen.....	78	RISPERDAL CONSTA.....	33	SEREVENT DISKUS.....	97
RECOMBIVAX HB.....	85	risperidone.....	33	SEROSTIM.....	67
				sertraline hcl.....	21
				se-tan plus.....	64

setlakin.....	78	SOTYLIZE.....	43	SUNLENCA.....	36
sevelamer carbonate.....	69	SOVALDI.....	36	SUNOSI.....	99
sevelamer hcl.....	69	SPIKEVAX.....	85	SUPREP BOWEL PREP KIT ...	67
SEYSARA.....	16	spinosad.....	31	SUTAB.....	67
sf.....	49	SPIRIVA HANDIHALER.....	97	syeda.....	78
sf 5000 plus.....	49	SPIRIVA RESPIMAT.....	97	SYMBICORT.....	97
SFROWASA.....	86	spironolactone.....	43	SYMBYAX.....	21
sharobel.....	78	spironolactone-hctz.....	43	SYMDEKO.....	98
SHINGRIX.....	85	SPORANOX.....	23	SYMFI.....	36
SIGNIFOR.....	72	SPRAVATO (56 MG DOSE).....	21	SYMFI LO.....	36
SIGNIFOR LAR.....	72	SPRAVATO (84 MG DOSE).....	21	SYMJEPI.....	97
sildenafil citrate.....	98	sprintec 28.....	78	SYMLINPEN 120.....	55
SILIQ.....	83	SPRYCEL.....	28	SYMLINPEN 60.....	55
silodosin.....	69	SPS.....	64	SYMPAZAN.....	19
SILVADENE.....	16	sronyx.....	78	SYMPROIC.....	67
silver sulfadiazine.....	16	ssd.....	16	SYMTUZA.....	36
SIMBRINZA.....	91	STEGLATRO.....	55	SYNALAR.....	53
simliya.....	78	STEGLUJAN.....	55	SYNAREL.....	72
simpesse.....	78	STELARA.....	83, 84	SYNDROS.....	22
SIMPONI.....	83	STERILE TOPICAL L.E.T. GEL.....	12	SYNJARDY.....	55
simvastatin.....	43	STIOLTO RESPIMAT.....	97	SYNJARDY XR.....	55
SINEMET.....	31	STIVARGA.....	28	SYNTHROID.....	79
sirolimus.....	83	STRENSIQ.....	68	TABLOID.....	28
SIRTURO.....	25	STRIBILD.....	36	TABRECTA.....	28
SKYCLARYS.....	44	STRIVERDI RESPIMAT.....	97	TACLONEX.....	53
SKYRIZI.....	83	STROMECTOL.....	31	tacrolimus.....	53, 84
SKYRIZI PEN.....	83	SUBOXONE.....	13	tadalafil (pah).....	98
SKYTROFA.....	72	SUBSYS.....	11	TADLIQ.....	98
SLYND.....	78	subvenite.....	19	TAFINLAR.....	28
SOAAZ.....	43	subvenite starter kit-blue.....	19	tafluprost (pf).....	91
sod citrate-citric acid.....	64	subvenite starter kit-green.....	19	TAGRISSO.....	28, 29
sodium chloride.....	64, 94	subvenite starter kit-orange.....	19	TAKHZYRO.....	84
sodium fluoride.....	49, 64	SUCRAID.....	68	TALICIA.....	67
sodium fluoride 5000 plus.....	49	sucralfate.....	65	TALTZ.....	84
sodium fluoride 5000 ppm.....	49	SUFLAVE.....	67	TALZENNA.....	29
SODIUM IODIDE I-131.....	79	sulfacetamide sodium.....	90	TAMIFLU.....	36
SODIUM OXYBATE.....	99	sulfacetamide sodium (acne)....	53	tamoxifen citrate.....	29
sodium phenylbutyrate.....	68	sulfacetamide sodium-sulfur.....	53	tamsulosin hcl.....	69
sodium polystyrene sulfonate ...	64	sulfacetamide-prednisolone.....	93	TANDEM PLUS.....	64
SOFOSBUVIR-VELPATASVIR.....	36	sulfadiazine.....	16	tarina 24 fe.....	78
SOGROYA.....	72	sulfamethoxazole-trimethoprim.....	16	tarina fe 1/20 eq.....	78
solifenacin succinate.....	69	SULFAMYLON.....	16	TARON FORTE.....	64
SOLIQUA.....	55	sulfasalazine.....	86	TASCENSO ODT.....	47
SOLOSEC.....	16	sulfatrim pediatric.....	16	TASIGNA.....	29
SOLTAMOX.....	28	sulfurated lime.....	31	tasimelteon.....	99
SOLU-CORTEF.....	70	sulindac.....	12	TASMAR.....	31
SOMATULINE DEPOT.....	72	sumatriptan.....	24	TAURINE.....	64
SOMAVERT.....	72	sumatriptan succinate.....	24	tavaborole.....	23
SOOLANTRA.....	53	sumatriptan succinate refill subcutaneous solution		TAVALISSE.....	38
sorafenib tosylate.....	28	cartridge.....	24	TAVNEOS.....	89
sotalol hcl.....	43	sunitinib malate.....	28	taysofy.....	78
sotalol hcl (af).....	43			TAYTULLA.....	78
SOTYKTU.....	83			tazarotene.....	53

TAZORAC.....	53	TIBSOVO.....	29	tranylcypromine sulfate.....	21
taztia xt.....	43	TIGLUTIK.....	48	travoprost (bak free).....	92
TAZVERIK.....	29	TIKOSYN.....	44	trazodone hcl.....	21
TDVAX.....	85	tilia fe.....	78	TRECTOR.....	25
TEGSEDI.....	48	timolol maleate.....	44, 92	TRELEGY ELLIPTA.....	97
TEKTURNA.....	43	timolol maleate (once-daily).....	91	TRELSTAR MIXJECT.....	72
telmisartan.....	43	timolol maleate ocudose.....	92	TREMFYA.....	84
telmisartan-amlodipine.....	43	timolol maleate pf.....	92	TRESIBA.....	61
telmisartan-hctz.....	43	TIMOPTIC OCUDOSE.....	92	TRESIBA FLEXTOUCH.....	61
temazepam.....	99	tinidazole.....	16	tretinoin.....	29, 53
TEMBEXA.....	36	tiopronin.....	69	tretinoin microsphere pump.....	53
temozolomide.....	29	tiotropium bromide		TREXALL.....	84
TEMPO WELCOME.....	58	monohydrate.....	97	TREZIX.....	11
TENCON.....	11	TIROSINT.....	80	triamcinolone acetonide.....	49, 53
TENIVAC.....	85	TIROSINT-SOL.....	80	TRI-AMINO.....	64
tenofovir disoproxil fumarate.....	36	TIVICAY.....	36	triamterene.....	44
TENORETIC 100.....	44	TIVICAY PD.....	36	triamterene-hctz.....	44
TENORETIC 50.....	44	tizanidine hcl.....	99	triazolam.....	38
TEPMETKO.....	29	TOBI NEBULIZER.....	98	tricitrates.....	64
terazosin hcl.....	69	TOBI PODHALER.....	98	TRICON.....	64
terbinafine hcl.....	23	TOBRADEX.....	90	TRICOR.....	44
terbutaline sulfate.....	97	TOBRADEX ST.....	90	triderm.....	53
terconazole.....	23	tobramycin.....	90, 98	trientine hcl.....	64
teriflunomide.....	47	TOBRAMYCIN.....	98	tri-estarylla.....	78
teriparatide (recombinant).....	87	tobramycin sulfate.....	16	trifluoperazine hcl.....	33
TERIPARATIDE		tobramycin-dexamethasone.....	90	trifluridine.....	90
(RECOMBINANT).....	87	TOBREX.....	90	trigels-f forte.....	64
testosterone.....	70	TOLAK.....	53	trihexyphenidyl hcl.....	31
testosterone cypionate.....	70	tolcapone.....	31	TRIJARDY XR.....	56
testosterone enanthate.....	70	tolmetin sodium.....	12	TRIKAFTA.....	98
TETANUS-DIPHTHERIA		tolterodine tartrate.....	69	tri-legest fe.....	78
TOXOIDS TD.....	85	tolterodine tartrate er.....	69	tri-lynyah.....	78
tetrabenazine.....	48	tolvaptan.....	64	TRILIPIX.....	44
tetracycline hcl.....	16	TOPICAL L.E.T.....	12	tri-lo-estarylla.....	78
TEZSPIRE.....	97	TOPICORT.....	53	tri-lo-marzia.....	78
THALITONE.....	44	TOPICORT SPRAY.....	53	tri-lo-mili.....	78
THALOMID.....	29	topiramate.....	19	tri-lo-sprintec.....	78
THEO-24.....	97	topiramate er.....	19	trimethobenzamide hcl.....	22
theophylline.....	97	toremifene citrate.....	29	trimethoprim.....	16
theophylline er.....	97	torse mide.....	44	tri-mili.....	78
THIOLA.....	69	TOUJEO MAX SOLOSTAR.....	61	trimipramine maleate.....	21
THIOLA EC.....	69	TOUJEO SOLOSTAR.....	61	TRINATE.....	64
thioridazine hcl.....	33	TPOXX.....	36	TRINTELLIX.....	21
thiotepa.....	29	TRACLEER.....	98	tri-nymyo.....	78
thiothixene.....	33	TRADJENTA.....	55	TRIPTODUR.....	72
THROMBIN-JMI.....	38	tramadol hcl (er biphasic).....	11	tri-sprintec.....	78
THROMBIN-JMI EPISTAXIS.....	38	tramadol hcl er.....	11	TRIUMEQ.....	36
THROMBOGEN.....	38	tramadol hcl ir.....	11	TRIUMEQ PD.....	36
THYQUIDITY.....	80	tramadol-acetaminophen.....	11	TRI-VI-FLOR.....	64
thyroid.....	80	trandolapril.....	44	TRI-VI-FLORO.....	64
tiadylt er.....	44	trandolapril-verapamil hcl er.....	44	tri-vite/fluoride.....	65
tiagabine hcl.....	19	tranexamic acid.....	38	trivora (28).....	78
TIAZAC.....	44	TRANSDERM-SCOP.....	22	tri-vylibra.....	78

tri-vylibra lo.....	78	valsartan.....	44	vigabatrin.....	19
TROKENDI XR.....	19	valsartan-hydrochlorothiazide... 44		vigadrone.....	19
TROPICAMIDE- PHENYLEPHRINE.....	93	VALTOCO.....	19	VIGAMOX.....	91
tropium chloride.....	69	VANCOCIN.....	16	VIIBRYD.....	21
tropium chloride er.....	69	vancomycin hcl.....	16	VIIBRYD STARTER PACK.....	21
TRUDHESA.....	24	VANDAZOLE.....	16	VIJOICE.....	29
TRUE METRIX BLOOD GLUCOSE TEST.....	58	VANISH.....	49	vilazodone hcl.....	21
TRUE METRIX METER.....	58	VAQTA.....	85	VINATE ONE.....	65
TRUE METRIX PRO BLOOD GLUCOSE.....	58	varenicline tartrate.....	13	VIOKACE.....	68
TRUETRACK TEST.....	58	varenicline tartrate (starter)..... 13		viorele.....	79
TRULANCE.....	67	varenicline tartrate(continue).... 13		VIRACEPT.....	36
TRULICITY.....	56	VARIVAX.....	85	VIRAZOLE.....	36
TRUMENBA.....	85	VARUBI (180 MG DOSE).....	22	VIREAD.....	36
TUDORZA PRESSAIR.....	97	VASCEPA.....	44	VISCO-3.....	89
TUKYSA.....	29	VAXELIS.....	85	VISTARIL.....	38
TULIVITE.....	65	VAXNEUVANCE.....	85	VISTOGARD.....	89
TURALIO.....	29	VECAMYL.....	44	vitamin d (ergocalciferol).....	65
turqoz.....	78	VECTICAL.....	54	vitamins acd-fluoride.....	65
TWINRIX.....	85	velivet.....	78	VITRAKVI.....	29
TWIRLA.....	78	VELPHORO.....	69	VIVAGUARD INO TEST STRIPS.....	58
TWYNEO.....	53	VELTASSA.....	65	VIZIMPRO.....	29
TYBLUME.....	78	VELTIN.....	54	VOCABRIA.....	36
TYBOST.....	36	VEMLIDY.....	36	volnea.....	79
tydemy.....	78	VENCLEXTA.....	29	VONJO.....	29
TYMLOS.....	87	VENCLEXTA STARTING PACK.....	29	voriconazole.....	23
TYRVAYA.....	93	VENELEX.....	54	VOSEVI.....	36
TYVASO DPI MAINTENANCE KIT.....	98	VENIPUNCTURE PX1 PHLEBOTOMY.....	12	VOTRIENT.....	29
TYVASO DPI TITRATION KIT..	98	venlafaxine hcl.....	21	VOWST.....	67
UBRELVY.....	24	venlafaxine hcl er.....	21	VOXZOGO.....	68
UCERIS.....	86	VENTAVIS.....	98	VRAYLAR.....	33
UDSX MEDICATED SYSTEM..	89	VENTOLIN HFA.....	97	VTAMA.....	54
UDSXMP MEDICATED SYSTEM.....	89	VEOZAH.....	89	VUMERITY.....	47
unithroid.....	80	verapamil hcl.....	44	vyfemla.....	79
UPNEEQ.....	91	verapamil hcl er.....	44	vylibra.....	79
UPTRAVI.....	98	VERELAN.....	44	VYNDAMAX.....	44
UPTRAVI TITRATION.....	98	VERELAN PM.....	44	VYNDAQEL.....	44
uretron d/s.....	69	VERIFINE INSULIN PEN NEEDLE.....	89	VYVANSE.....	46
UROCIT-K 10.....	65	VERIFINE PLUS PEN NEEDLE.....	89	VYZULTA.....	92
UROCIT-K 15.....	65	VERKAZIA.....	93	WAKIX.....	99
UROCIT-K 5.....	65	VERQUVO.....	44	warfarin sodium.....	17
URSO 250.....	67	VERSACLOZ.....	33	WEGOVI.....	48
URSO FORTE.....	67	VERZENIO.....	29	WELIREG.....	29
ursodiol.....	67	VESICARE LS.....	69	wera.....	79
UZEDY.....	33	vestura.....	78	WESCAP-C DHA.....	65
valacyclovir hcl.....	36	VFEND.....	23	WESCAP-PN DHA.....	65
VALCHLOR.....	29	VIBERZI.....	67	WESNATAL DHA COMPLETE..	65
valganciclovir hcl.....	36	VIBRAMYCIN.....	16	wes-phos 250 neutral.....	65
valproic acid.....	19	VICTOZA.....	56	WESTAB PLUS.....	65
		vienna.....	79	WIDE-SEAL DIAPHRAGM 60..	89
				WIDE-SEAL DIAPHRAGM 65..	89
				WIDE-SEAL DIAPHRAGM 70..	89
				WIDE-SEAL DIAPHRAGM 75..	89

WIDE-SEAL DIAPHRAGM 80..	89	yargesa.....	68	ZYDELIG.....	30
WIDE-SEAL DIAPHRAGM 85..	89	YASMIN 28.....	79	ZYKADIA.....	30
WIDE-SEAL DIAPHRAGM 90..	89	YAZ.....	79	ZYLET.....	93
WIDE-SEAL DIAPHRAGM 95..	89	YONSA.....	30	ZYMAXID.....	91
WINLEVI.....	54	YUPELRI.....	97	ZYPREXA.....	33
WINRHO SDF.....	84	yuvafem.....	79	ZYPREXA RELPREVV.....	33
wixela inhub.....	97	zafemy.....	79	ZYPREXA ZYDIS.....	33
wymzya fe.....	79	zafirlukast.....	97	ZYVOX.....	17
WYNZORA.....	54	zaleplon.....	99		
XALIX.....	54	ZANAFLEX.....	99		
XALKORI.....	29	ZARONTIN.....	19		
XARELTO.....	17	ZAVZPRET.....	24		
XARELTO STARTER PACK.....	17	ZEGALOGUE.....	58		
XATMEP.....	84	ZEJULA.....	30		
XCOPRI.....	19	ZELBORAF.....	30		
XELJANZ.....	84	ZEMPLAR.....	87		
XELJANZ XR.....	84	zenatane.....	54		
XELPROS.....	92	ZENPEP.....	68		
XENICAL.....	48	ZENZEDI.....	46		
XENLETA.....	16	ZEPATIER.....	36		
XEPI.....	16	ZEPOSIA.....	47		
XERAC AC.....	54	ZEPOSIA 7-DAY STARTER			
XERMELO.....	67	PACK.....	47		
XIFAXAN.....	16	ZEPOSIA STARTER KIT.....	47		
XIGDUO XR.....	56	ZIAGEN.....	36		
XIIDRA.....	93	zidovudine.....	36		
XIMINO.....	16	ZILXI.....	54		
XOFLUZA (40 MG DOSE).....	36	ZIMHI.....	14		
XOFLUZA (80 MG DOSE).....	36	ziprasidone hcl.....	33		
XOLAIR.....	97	ziprasidone mesylate.....	33		
XOPENEX HFA.....	97	ZIRGAN.....	91		
XOSPATA.....	29	ZITHROMAX.....	16		
XPOVIO (100 MG ONCE		ZITHROMAX TRI-PAK.....	16		
WEEKLY).....	29	ZITHROMAX Z-PAK.....	17		
XPOVIO (40 MG ONCE		ZOKINVY.....	89		
WEEKLY).....	29	ZOLINZA.....	30		
XPOVIO (40 MG TWICE		zolmitriptan.....	24		
WEEKLY).....	29	zolpidem tartrate.....	99		
XPOVIO (60 MG ONCE		zolpidem tartrate er.....	99		
WEEKLY).....	29	ZOMACTON.....	72		
XPOVIO (60 MG TWICE		ZONISADE.....	19		
WEEKLY).....	29	zonisamide.....	19		
XPOVIO (80 MG ONCE		ZONTIVITY.....	32		
WEEKLY).....	29	ZORBTIVE.....	67		
XPOVIO (80 MG TWICE		ZORTRESS.....	84		
WEEKLY).....	29	ZORYVE.....	54		
XTAMPZA ER.....	11	zovia 1/35 (28).....	79		
XTANDI.....	30	ZTALMY.....	19		
xulane.....	79	ZTLIDO.....	12		
XULTOPHY.....	56	ZUBSOLV.....	14		
XURIDEN.....	68	zumandimine.....	79		
XYOSTED.....	70	ZYCLARA.....	54		
XYWAV.....	99	ZYCLARA PUMP.....	54		

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