



MEMBER **2026** PERFORMANCE DRUG LIST

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

Effective January 1, 2026

Blue Cross and Blue Shield of Kansas City 2026 Performance 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](https://www.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 prescriber must do something in order to obtain the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, the prescriber 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 prescriber will have to submit a prior authorization request.

Prescribers 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 the request online at [bluekc.com](https://www.bluekc.com).

HOW TO 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 Medispan 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. CentralTime.

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. CentralTime.

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. CentralTime.

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 Pharmacies:

- 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 patients 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
	G
Tier 1 copay	G-S

List of Abbreviations

G	Generic Drug.
G-S	Generic 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

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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)
apap-caff-dihydrocodeine	G	QL (12 EA per 1 day)
ascomp-codeine	G	
bac (butalbital-acetamin-caff)	G	
buprenorphine	G	PA; QL (0.15 EA per 1 day)
butalbital-acetaminophen	G	
butalbital-apap-caff-cod	G	
butalbital-apap-caffeine oral capsule	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)
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 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)
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 10-300 mg/15ml, 10-325 mg/15ml	G	QL (73.5 ML per 1 day)
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	G	QL (98 ML per 1 day)
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg	G	QL (4 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
hydrocodone-acetaminophen oral tablet 2.5-325 mg	G	QL (12 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)
levorphanol tartrate oral tablet 2 mg	G	QL (2 EA per 1 day)
levorphanol tartrate oral tablet 3 mg	G	QL (1 EA per 1 day)
meperidine hcl oral solution	G	QL (49 ML per 1 day)
meperidine hcl oral tablet	G	QL (9 EA per 1 day)
methadone hcl intensol	G	
methadone hcl oral concentrate	G	
methadone hcl oral solution	G	PA
methadone hcl oral tablet	G	PA
methadone hcl oral tablet soluble	G	
methadose oral tablet soluble	G	
morphine sulfate (concentrate) oral solution 100 mg/5ml	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 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)
oxycodone hcl oral capsule	G	QL (6 EA per 1 day)
oxycodone hcl oral concentrate	G	QL (1.6 ML per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
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 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)
oxymorphone hcl er	G	PA; QL (4 EA per 1 day)
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)
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 25 mg	G	QL (8 EA per 1 day)
tramadol hcl oral tablet 50 mg	G	QL (5 EA per 1 day)
tramadol hcl oral tablet 75 mg	G	QL (3 EA per 1 day)
tramadol-acetaminophen	G	QL (6 EA per 1 day)
Analgesics - Drugs for Pain and Inflammation		
celecoxib oral	G	QL (2 EA per 1 day)
diclofenac potassium oral capsule	G	ST
diclofenac potassium oral tablet	G	
diclofenac sodium er	G	
diclofenac sodium external solution	G	PA
diclofenac sodium oral	G	
diclofenac-misoprostol	G	
diflunisal oral	G	
etodolac	G	
etodolac er	G	
fenoprofen calcium oral	G	
flurbiprofen oral	G	
ibuprofen oral tablet 300 mg, 400 mg, 600 mg, 800 mg	G	

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Drug Name	Drug Tier	Restrictions / Limits
indomethacin er	G	
indomethacin oral capsule	G	
indomethacin oral suspension	G	ST
indomethacin rectal suppository 50 mg	G	ST
ketoprofen er	G	
ketoprofen oral	G	
ketorolac tromethamine oral	G	QL (20 EA per 1 fill)
meclofenamate sodium oral	G	
mefenamic acid oral	G	
meloxicam oral capsule	G	
meloxicam oral tablet	G	
nabumetone oral	G	
naproxen dr	G	
naproxen oral	G	
naproxen sodium er	G	
naproxen sodium oral tablet 275 mg, 550 mg	G	
naproxen-esomeprazole mg	G	PA; QL (2 EA per 1 day)
oxaprozin oral tablet	G	
piroxicam oral	G	
sulindac oral	G	
tolmetin sodium	G	
Anesthetics		
ethyl chloride	G	
glydo	G	
lidocaine external ointment 5 %	G	
lidocaine external patch 5 %	G	
lidocaine hcl external solution	G	
lidocaine hcl urethral/mucosal	G	
lidocaine-prilocaine external cream	G	
Anti-Addiction / Substance Abuse Treatment Agents		
acamprosate calcium	G	
buprenorphine hcl sublingual	G	
buprenorphine hcl-naloxone hcl	G	
bupropion hcl er (smoking det)	G	M; ACA; QL (180 day supply per 365 days)
disulfiram oral	G	
ft naloxone hcl	G	OTC
KLOXXADO	G	

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Drug Name	Drug Tier	Restrictions / Limits
lofexidine hcl	G	QL (16 EA per 1 day)
naloxone hcl injection	G	
naloxone hcl nasal	G	
naltrexone hcl oral	G	
NARCAN	G	
REXTOVY	G	
RIVIVE	G	OTC
SUBOXONE	G	
varenicline tartrate	G	ACA; QL (180 day supply per 365 days)
varenicline tartrate (starter)	G	ACA; QL (180 day supply per 365 days)
varenicline tartrate(continue)	G	ACA; QL (180 day supply per 365 days)
ZUBSOLV	G	
Antibacterials		
amoxicillin	G	
amoxicillin-potassium clavulanate	G	
amoxicillin-potassium clavulanate er	G	
ampicillin	G	
azithromycin oral	G	
cefaclor	G	
cefaclor er	G	
cefadroxil	G	
cefdinir	G	
cefixime	G	
cefpodoxime proxetil	G	
cefprozil	G	
cefuroxime axetil	G	
cephalexin	G	
ciprofloxacin hcl oral	G	
clarithromycin er	G	
clarithromycin oral	G	
clindamycin hcl oral	G	
clindamycin palmitate hcl	G	
clindamycin phosphate vaginal	G	
demeclocycline hcl	G	
dicloxacillin sodium	G	
doxycycline hyclate oral capsule	G	

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Drug Name	Drug Tier	Restrictions / Limits
doxycycline hyclate oral tablet	G	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 200 mg, 50 mg, 75 mg	G	
doxycycline monohydrate oral	G	
erythromycin base oral	G	
erythromycin ethylsuccinate oral suspension reconstituted	G	
erythromycin oral	G	
fidaxomicin	G	
fosfomycin tromethamine	G	
gentamicin sulfate external	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)
methenamine hippurate	G	
metronidazole oral	G	
metronidazole vaginal	G	
minocycline hcl er	G	
minocycline hcl oral	G	
moxifloxacin hcl oral	G	
mupirocin cream	G	
mupirocin ointment	G	
neomycin sulfate oral	G	
nitrofurantoin macrocrystal	G	
nitrofurantoin monohydrate macrocrystals	G	
nitrofurantoin oral suspension 25 mg/5ml	G	
ofloxacin oral	G	
penicillin v potassium	G	
silver sulfadiazine external	G	
ssd	G	
sulfadiazine oral	G	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	G	
sulfamethoxazole-trimethoprim oral tablet	G	
sulfatrim pediatric	G	
tetracycline hcl oral capsule	G	
tinidazole oral	G	
trimethoprim oral	G	
vancomycin hcl oral	G	

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Drug Name	Drug Tier	Restrictions / Limits
Anticoagulants		
dabigatran etexilate mesylate	G	M; QL (2 EA per 1 day)
enoxaparin sodium injection solution prefilled syringe	G	
fondaparinux sodium	G	
heparin sodium (porcine)	G	
heparin sodium (porcine) pf	G	
jantoven	G	
rivaroxaban oral suspension reconstituted	G	M; QL (20 ML per 1 day)
rivaroxaban oral tablet	G	M; QL (2 EA per 1 day)
warfarin sodium oral	G	
Anticonvulsants - Drugs for Seizures		
carbamazepine er	G	
carbamazepine oral suspension 100 mg/5ml	G	
carbamazepine oral tablet	G	
carbamazepine oral tablet chewable	G	
clobazam oral suspension 2.5 mg/ml	G	PA
clobazam oral tablet	G	PA
diazepam rectal	G	QL (2 EA per 1 fill)
divalproex sodium er	G	
divalproex sodium oral	G	
eslicarbazepine acetate	G	
ethosuximide oral	G	
felbamate	G	
gabapentin oral capsule	G	
gabapentin oral solution	G	
gabapentin oral tablet 600 mg, 800 mg	G	
lacosamide oral solution 10 mg/ml	G	
lacosamide oral tablet	G	
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 solution	G	
levetiracetam oral tablet	G	
methsuximide	G	

Drug Name	Drug Tier	Restrictions / Limits
oxcarbazepine	G	
oxcarbazepine er	G	ST
perampanel	G	
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	G	
roweepra	G	
rufinamide oral suspension 40 mg/ml	G	PA
rufinamide oral tablet	G	PA
subvenite oral tablet	G	
subvenite starter kit-blue	G	
subvenite starter kit-green	G	
subvenite starter kit-orange	G	
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	
valproic acid oral capsule	G	
valproic acid oral solution 250 mg/5ml	G	
vigabatrin	G-S	PA
zonisamide oral	G	
Antidementia Agents - Drugs for Alzheimer's Disease and Dementia		
donepezil hcl	G	M
galantamine hydrobromide	G	M
galantamine hydrobromide er	G	M
memantine hcl er	G	M; QL (1 EA per 1 day)
memantine hcl oral solution 2 mg/ml	G	M
memantine hcl oral tablet	G	M
memantine hcl-donepezil hcl er	G	QL (1 EA per 1 day)
rivastigmine	G	M
rivastigmine tartrate	G	M
Antidepressants		
amitriptyline hcl oral	G	

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Drug Name	Drug Tier	Restrictions / Limits
amoxapine	G	
bupropion hcl er (sr)	G	M; QL (2 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	G	M; QL (3 EA per 1 day)
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	G	M; QL (1 EA per 1 day)
bupropion hcl oral	G	M
chlorthalidone-amitriptyline	G	
citalopram hydrobromide oral solution 10 mg/5ml	G	M
citalopram hydrobromide oral tablet	G	M
clomipramine hcl oral	G	
desipramine hcl oral	G	
desvenlafaxine succinate er	G	M; QL (1 EA per 1 day)
doxepin hcl oral capsule	G	
doxepin hcl oral concentrate	G	
duloxetine hcl oral capsule delayed release particles 20 mg, 40 mg, 60 mg	G	M; QL (2 EA per 1 day)
duloxetine hcl oral capsule delayed release particles 30 mg	G	M; QL (3 EA per 1 day)
escitalopram oxalate oral solution	G	M
escitalopram oxalate oral tablet	G	M
fluoxetine hcl (pmdd)	G	M
fluoxetine hcl oral capsule	G	M
fluoxetine hcl oral capsule delayed release	G	M; QL (0.15 EA per 1 day)
fluoxetine hcl oral solution	G	M
fluoxetine hcl oral tablet	G	M
fluvoxamine maleate	G	M
fluvoxamine maleate er	G	M; QL (2 EA per 1 day)
imipramine hcl oral	G	
imipramine pamoate	G	
mirtazapine oral	G	
nefazodone hcl	G	M
nortriptyline hcl oral	G	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg	G	QL (1 EA per 1 day)
olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg	G	QL (3 EA per 1 day)
paroxetine hcl	G	M
paroxetine hcl er	G	M

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Drug Name	Drug Tier	Restrictions / Limits
paroxetine mesylate	G	M; QL (1 EA per 1 day)
perphenazine-amitriptyline	G	
phenelzine sulfate oral	G	
protriptyline hcl	G	
sertraline hcl oral	G	M
tranylcypromine sulfate	G	
trazodone hcl oral	G	
trimipramine maleate oral	G	
venlafaxine hcl	G	M
venlafaxine hcl er oral capsule extended release 24 hour 150 mg	G	M; QL (2 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg	G	M; QL (1 EA per 1 day)
venlafaxine hcl er oral capsule extended release 24 hour 75 mg	G	M; QL (3 EA per 1 day)
venlafaxine hcl er oral tablet extended release 24 hour	G	M
vilazodone hcl	G	M; QL (1 EA per 1 day)
Antiemetics - Drugs for Nausea and Vomiting		
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)
dimenhydrinate injection	G	
doxylamine-pyridoxine	G	PA; QL (4 EA per 1 day)
dronabinol	G	PA; QL (2 EA per 1 day)
granisetron hcl oral	G	QL (0.14 EA per 1 day)
meclizine hcl oral tablet 50 mg	G	
metoclopramide hcl oral solution 5 mg/5ml	G	
metoclopramide hcl oral tablet	G	
metoclopramide hcl oral tablet dispersible	G	
ondansetron hcl oral solution	G	QL (4 ML per 1 day)
ondansetron hcl oral tablet 24 mg	G	QL (0.07 EA 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 solution 6.25 mg/5ml	G	

Drug Name	Drug Tier	Restrictions / Limits
promethazine hcl oral tablet	G	
promethazine hcl rectal	G	
scopolamine	G	
trimethobenzamide hcl oral	G	
Antifungals		
ciclodan	G	
ciclopirox external	G	
ciclopirox olamine external	G	
clotrimazole mouth/throat	G	
clotrimazole-betamethasone	G	
econazole nitrate external cream	G	
fluconazole oral	G	
flucytosine oral	G	
griseofulvin microsize oral	G	
griseofulvin ultramicrosize	G	
itraconazole oral	G	PA
ketoconazole external	G	
ketoconazole oral	G	
ketodan	G	
klayesta	G	
miconazole 3	G	
naftifine hcl	G	
nyamyc	G	
nystatin external	G	
nystatin mouth/throat	G	
nystatin oral	G	
nystatin-triamcinolone	G	
nystop	G	
oxiconazole nitrate	G	
posaconazole oral	G	PA
tavaborole	G	PA
terbinafine hcl oral	G	QL (84 day supply per 180 days)
terconazole	G	
voriconazole oral	G	PA
Antigout Agents		
allopurinol oral	G	M
colchicine oral	G	
colchicine-probenecid	G	

Drug Name	Drug Tier	Restrictions / Limits
febuxostat	G	ST; M
probenecid	G	M
Antimigraine Agents		
almotriptan malate	G	QL (0.4 EA per 1 day)
diclofenac potassium(migraine)	G	ST
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)
ergotamine-caffeine	G	PA; QL (0.86 EA per 1 day)
frovatriptan succinate	G	QL (0.4 EA per 1 day)
naratriptan hcl	G	QL (0.3 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 subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	G	QL (0.17 ML per 1 day)
sumatriptan succinate subcutaneous	G	QL (0.17 ML per 1 day)
sumatriptan-naproxen sodium	G	ST; QL (0.3 EA per 1 day)
zolmitriptan nasal solution 5 mg	G	QL (0.4 EA per 1 day)
zolmitriptan oral	G	QL (0.4 EA per 1 day)
Antimyasthenic Agents		
pyridostigmine bromide er oral tablet extended release	G	M
pyridostigmine bromide oral	G	M
Antimycobacterials		
cycloserine oral	G	
dapsone oral	G	
ethambutol hcl oral	G	
isoniazid oral	G	
pyrazinamide oral	G	
rifabutin	G	
rifampin oral	G	
Antineoplastics - Drugs for Cancer		
abiraterone acetate oral tablet 250 mg	G-S	PA

Drug Name	Drug Tier	Restrictions / Limits
abirtega	G-S	PA
anastrozole oral	G	ACA
bexarotene	G-S	PA
bicalutamide	G	
capecitabine	G-S	
cyclophosphamide oral capsule	G	
dasatinib	G-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	
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
gefitinib	G-S	PA
hydroxyurea oral	G	
imatinib mesylate oral	G-S	PA
lapatinib ditosylate	G-S	PA
lenalidomide	G-S	PA
letrozole oral	G	
leucovorin calcium oral	G	
mercaptopurine oral suspension	G-S	
mercaptopurine oral tablet	G	
mesna oral	G	
nilotinib hcl	G-S	PA
nilutamide	G-S	
pazopanib hcl oral tablet 200 mg	G-S	PA
sorafenib tosylate	G-S	PA
sunitinib malate	G-S	PA
tamoxifen citrate oral	G	ACA
temozolomide	G-S	PA
toremifene citrate	G	
torpenz	G-S	PA; QL (1 EA per 1 day)
tretinoin oral	G-S	
Antiparasitics		
albendazole oral	G	PA
atovaquone	G	
atovaquone-proguanil hcl	G	

Drug Name	Drug Tier	Restrictions / Limits
chloroquine phosphate oral	G	
hydroxychloroquine sulfate oral	G	M
ivermectin oral	G	
malathion	G	
mefloquine hcl	G	
nitazoxanide oral	G	
permethrin external	G	
praziquantel oral	G	
primaquine phosphate	G	
pyrimethamine oral	G-S	PA
quinine sulfate	G	PA
spinosad	G	
sulfurated lime	G	
Antiparkinson Agents		
amantadine hcl oral	G	M
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 oral tablet extended release	G	M
carbidopa-levodopa-entacapone	G	M
entacapone	G	M
pramipexole dihydrochloride	G	M
pramipexole dihydrochloride er	G	M
rasagiline mesylate oral	G	M
ropinirole hcl	G	M
ropinirole hcl er	G	M
selegiline hcl oral	G	M
tolcapone	G	M
trihexyphenidyl hcl	G	
Antiplatelets		
aspirin-dipyridamole er	G	M
cilostazol	G	M
clopidogrel bisulfate oral	G	M
dipyridamole oral	G	M
prasugrel hcl	G	M

Drug Name	Drug Tier	Restrictions / Limits
ticagrelor	G	M
Antipsychotics - Drugs for Mood Disorders		
aripiprazole oral solution	G	QL (25 ML per 1 day)
aripiprazole oral tablet	G	QL (1 EA per 1 day)
aripiprazole oral tablet dispersible	G	QL (2 EA per 1 day)
asenapine maleate	G	QL (2 EA per 1 day)
chlorpromazine hcl oral	G	
clozapine oral tablet 100 mg, 25 mg	G	QL (9 EA per 1 day)
clozapine oral tablet 200 mg	G	QL (4 EA per 1 day)
clozapine oral tablet 50 mg	G	QL (6 EA per 1 day)
clozapine oral tablet dispersible 100 mg, 25 mg	G	QL (9 EA per 1 day)
clozapine oral tablet dispersible 12.5 mg	G	QL (3 EA per 1 day)
clozapine oral tablet dispersible 150 mg	G	QL (6 EA per 1 day)
clozapine oral tablet dispersible 200 mg	G	QL (4 EA per 1 day)
fluphenazine hcl	G	
haloperidol decanoate intramuscular	G	
haloperidol lactate oral concentrate 2 mg/ml	G	
haloperidol oral	G	
loxapine succinate	G	
lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg	G	QL (1 EA per 1 day)
lurasidone hcl oral tablet 80 mg	G	QL (2 EA per 1 day)
molindone hcl	G	
olanzapine oral	G	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	G	QL (1 EA per 1 day)
paliperidone er oral tablet extended release 24 hour 6 mg	G	QL (2 EA per 1 day)
pimozide	G	
quetiapine fumarate er	G	QL (2 EA per 1 day)
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 50 mg	G	QL (3 EA per 1 day)
quetiapine fumarate oral tablet 300 mg, 400 mg	G	QL (2 EA per 1 day)
risperidone microspheres er	G	
risperidone oral solution	G	QL (8 ML per 1 day)
risperidone oral tablet	G	QL (2 EA per 1 day)
risperidone oral tablet dispersible	G	QL (2 EA per 1 day)
thioridazine hcl oral	G	
thiothixene	G	

Drug Name	Drug Tier	Restrictions / Limits
trifluoperazine hcl	G	
ziprasidone hcl	G	QL (2 EA per 1 day)
ziprasidone mesylate	G	
Antivirals		
abacavir sulfate	G	
abacavir sulfate-lamivudine	G	
acyclovir external cream	G	QL (0.17 GM per 1 day)
acyclovir external ointment	G	QL (1 GM per 1 day)
acyclovir oral capsule	G	
acyclovir oral suspension 200 mg/5ml	G	
acyclovir oral tablet	G	
adefovir dipivoxil	G	
atazanavir sulfate	G	
darunavir	G	
efavirenz	G	
efavirenz-emtricitab-tenofo df	G	
efavirenz-lamivudine-tenofovir	G	
emtricitabine	G	
emtricitabine-tenofovir df	G	
emtricitab-rilpivir-tenofov df	G	
entecavir	G	QL (1 EA per 1 day)
etravirine	G	
famciclovir oral	G	
fosamprenavir calcium	G	
lamivudine oral solution 10 mg/ml	G	
lamivudine oral tablet	G	
lamivudine-zidovudine	G	
lopinavir-ritonavir	G	
maraviroc	G	PA
nevirapine	G	
nevirapine er	G	
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)
penciclovir	G	QL (0.17 GM per 1 day)
ribavirin inhalation	G-S	
ribavirin oral	G-S	

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Drug Name	Drug Tier	Restrictions / Limits
rimantadine hcl	G	
ritonavir	G	
tenofovir disoproxil fumarate	G	ACA
valacyclovir hcl oral	G	QL (4 EA per 1 day)
valganciclovir hcl	G	
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)
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 oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg	G	QL (4 EA per 1 day)
alprazolam oral tablet dispersible 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)
buspirone 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	
estazolam	G	QL (1 EA per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
hydroxyzine hcl oral	G	
hydroxyzine pamoate oral	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)
triazolam	G	QL (2 EA per 1 day)
Bipolar Agents - Drugs for Mood Disorders		
lithium	G	
lithium carbonate er	G	
lithium carbonate oral	G	
Blood Products and Modifiers - Drugs for Blood Disorders		
aminocaproic acid oral	G	
anagrelide hcl	G	M
eltrombopag olamine	G-S	PA
tranexamic acid oral	G	
Cardiovascular Agents - Drugs for Heart and Circulation Conditions		
acebutolol hcl oral	G	M
aliskiren fumarate	G	M
amiloride hcl oral	G	M
amiloride-hydrochlorothiazide	G	M
amiodarone hcl oral	G	M
amlodipine besylate oral	G	M
amlodipine besylate-benazepril hcl	G	M
amlodipine besylate-valsartan	G	M
amlodipine-atorvastatin	G	M
amlodipine-olmesartan	G	M
amlodipine-valsartan-hctz	G	M
atenolol oral	G	M
atenolol-chlorthalidone	G	M
atorvastatin calcium oral tablet 10 mg, 20 mg	G	M; ACA
atorvastatin calcium oral tablet 40 mg, 80 mg	G	M
benazepril hcl oral	G	M
benazepril-hydrochlorothiazide	G	M

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Drug Name	Drug Tier	Restrictions / Limits
betaxolol hcl oral	G	M
bisoprolol fumarate oral	G	M
bisoprolol-hydrochlorothiazide	G	M
bumetanide oral	G	M
candesartan cilexetil	G	M
candesartan cilexetil-hctz	G	M
captopril oral	G	M
captopril-hydrochlorothiazide	G	M
cartia xt	G	M
carvedilol	G	M
carvedilol phosphate er	G	M
chlorthalidone	G	M
cholestyramine light	G	M
cholestyramine oral	G	M
clonidine	G	M
clonidine hcl oral	G	M
colesevelam hcl	G	M
colestipol hcl	G	M
digoxin oral	G	M
diltiazem hcl er	G	M
diltiazem hcl er beads	G	M
diltiazem hcl er coated beads	G	M
diltiazem hcl oral	G	M
dilt-xr	G	M
disopyramide phosphate	G	M
dofetilide	G	
doxazosin mesylate oral	G	M
droxidopa	G-S	PA
enalapril maleate oral	G	M
enalapril-hydrochlorothiazide	G	M
eplerenone	G	M
ethacrynic acid	G	M
ezetimibe	G	M
ezetimibe-simvastatin	G	M
felodipine er	G	M
fenofibrate micronized	G	M
fenofibrate oral	G	M
fenofibric acid	G	M

Drug Name	Drug Tier	Restrictions / Limits
flecainide acetate	G	M
fluvastatin sodium	G	M; ACA
fluvastatin sodium er	G	M; ACA
fosinopril sodium	G	M
fosinopril sodium-hctz	G	M
furosemide oral	G	M
gemfibrozil oral	G	M
guanfacine hcl	G	M
hydralazine hcl oral	G	M
hydrochlorothiazide oral	G	M
icosapent ethyl	G	PA; M
indapamide	G	M
irbesartan	G	M
irbesartan-hydrochlorothiazide	G	M
isosorb dinitrate-hydralazine	G	M
isosorbide dinitrate	G	M
isosorbide mononitrate	G	M
isosorbide mononitrate er	G	M
isradipine	G	M
ivabradine hcl	G	M; QL (2 EA per 1 day)
labetalol hcl oral	G	M
lisinopril oral	G	M
lisinopril-hydrochlorothiazide	G	M
losartan potassium oral	G	M
losartan potassium-hctz	G	M
lovastatin oral	G	M; ACA
matzim la	G	M
methyldopa	G	M
metolazone	G	M
metoprolol succinate er	G	M
metoprolol tartrate oral	G	M
metoprolol-hydrochlorothiazide	G	M
metyrosine	G	PA; QL (16 EA per 1 day)
mexiletine hcl oral	G	M
midodrine hcl	G	
minoxidil oral	G	M
moexipril hcl	G	M
nadolol oral	G	M

Drug Name	Drug Tier	Restrictions / Limits
nebivolol hcl	G	M
niacin (antihyperlipidemic)	G	M
niacin er (antihyperlipidemic)	G	M
niacor	G	M
nicardipine hcl oral	G	M
nifedipine er	G	M
nifedipine er osmotic release	G	M
nifedipine oral	G	M
nimodipine oral capsule	G	
nisoldipine er	G	M
nitroglycerin rectal	G	
nitroglycerin sublingual	G	M
nitroglycerin transdermal	G	M
nitroglycerin translingual	G	M
olmesartan medoxomil oral	G	M
olmesartan medoxomil-hctz	G	M
olmesartan-amlodipine-hctz	G	M
omega-3-acid ethyl esters	G	M
pentoxifylline er	G	M
perindopril erbumine	G	M
phenoxybenzamine hcl oral	G	PA
pindolol	G	M
pitavastatin calcium	G	M
pravastatin sodium	G	M; ACA
prazosin hcl oral	G	M
prevalite	G	M
propafenone hcl	G	M
propafenone hcl er	G	M
propranolol hcl er	G	M
propranolol hcl oral	G	M
quinapril hcl	G	M
quinapril-hydrochlorothiazide	G	M
quinidine gluconate er	G	M
quinidine sulfate	G	M
ramipril	G	M
ranolazine er	G	M
rosuvastatin calcium oral tablet 10 mg, 5 mg	G	M; ACA
rosuvastatin calcium oral tablet 20 mg, 40 mg	G	M

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Drug Name	Drug Tier	Restrictions / Limits
sacubitril-valsartan	G	M; QL (2 EA per 1 day)
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	G	M; ACA
simvastatin oral tablet 80 mg	G	M
sotalol hcl (af)	G	M
sotalol hcl oral	G	M
spironolactone oral	G	M
spironolactone-hctz	G	M
telmisartan	G	M
telmisartan-amlodipine	G	M
telmisartan-hctz	G	M
tiadylt er	G	M
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
valsartan	G	M
valsartan-hydrochlorothiazide	G	M
verapamil hcl er	G	M
verapamil hcl oral	G	M
Central Nervous System Agents - Drugs for Attention Deficit Disorder		
amphetamine sulfate	G	QL (6 EA per 1 day)
amphetamine-dextroamphetamine er	G	QL (2 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg	G	QL (3 EA per 1 day)
amphetamine-dextroamphetamine oral tablet 30 mg	G	QL (2 EA per 1 day)
amphet-dextroamphet 3-bead er	G	QL (1 EA per 1 day)
atomoxetine hcl	G	QL (1 EA per 1 day)
clonidine hcl er	G	
dexmethylphenidate hcl	G	QL (2 EA per 1 day)
dexmethylphenidate hcl er	G	QL (1 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg	G	QL (6 EA per 1 day)
dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg	G	QL (4 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg	G	QL (3 EA per 1 day)
dextroamphetamine sulfate oral solution	G	QL (60 ML per 1 day)
dextroamphetamine sulfate oral tablet 10 mg	G	QL (6 EA per 1 day)
dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	G	QL (3 EA per 1 day)
dextroamphetamine sulfate oral tablet 30 mg	G	QL (2 EA per 1 day)
guanfacine hcl er	G	
lisdexamfetamine dimesylate	G	QL (1 EA per 1 day)
methamphetamine hcl	G	QL (5 EA per 1 day)
methylphenidate	G	QL (1 EA per 1 day)
methylphenidate hcl er (cd)	G	QL (1 EA per 1 day)
methylphenidate hcl er (la)	G	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg, 72 mg	G	QL (1 EA per 1 day)
methylphenidate hcl er (osm) oral tablet extended release 36 mg	G	QL (2 EA per 1 day)
methylphenidate hcl er (xr)	G	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 10 mg	G	QL (2 EA per 1 day)
methylphenidate hcl er oral tablet extended release 20 mg	G	QL (3 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg	G	QL (1 EA per 1 day)
methylphenidate hcl er oral tablet extended release 24 hour 36 mg	G	QL (2 EA per 1 day)
methylphenidate hcl oral solution 10 mg/5ml	G	QL (30 ML per 1 day)
methylphenidate hcl oral solution 5 mg/5ml	G	QL (60 ML per 1 day)
methylphenidate hcl oral tablet	G	QL (3 EA per 1 day)
methylphenidate hcl oral tablet chewable 10 mg	G	QL (6 EA per 1 day)
methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg	G	QL (3 EA per 1 day)
Central Nervous System Agents - Drugs for Multiple Sclerosis		
dalfampridine er	G-S	PA; QL (2 EA per 1 day)
dimethyl fumarate oral	G-S	PA; QL (2 EA per 1 day)
dimethyl fumarate starter pack	G-S	PA; QL (120 EA per 365 days)
fingolimod hcl	G-S	PA; QL (1 EA per 1 day)
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	G-S	PA; QL (1 ML per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
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)
teriflunomide	G-S	PA; QL (1 EA per 1 day)
Central Nervous System Agents - Miscellaneous		
caffeine citrate oral	G	
gabapentin (once-daily) oral tablet 300 mg	G	ST; QL (6 EA per 1 day)
gabapentin (once-daily) oral tablet 450 mg, 600 mg	G	ST; QL (3 EA per 1 day)
gabapentin (once-daily) oral tablet 750 mg, 900 mg	G	ST; QL (2 EA per 1 day)
pregabalin er oral tablet extended release 24 hour 165 mg, 82.5 mg	G	ST; QL (3 EA per 1 day)
pregabalin er oral tablet extended release 24 hour 330 mg	G	ST; QL (2 EA per 1 day)
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)
riluzole	G	
tetrabenazine	G-S	PA
Dental and Oral Agents - Drugs for Mouth and Throat Conditions		
cevimeline hcl	G	M
chlorhexidine gluconate mouth/throat	G	
lidocaine viscous hcl	G	
periogard	G	
pilocarpine hcl oral	G	
sf gel 1.1%	G	M
sf 5000 plus	G	M
sod fluoride-potassium nitrate	G	M
sodium fluoride 5000 enamel	G	M
sodium fluoride 5000 plus	G	M
sodium fluoride 5000 ppm	G	M
sodium fluoride 5000 ppm dental cream 1.1 %	G	M
sodium fluoride 5000 sensitive	G	M
sodium fluoride dental	G	M

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Drug Name	Drug Tier	Restrictions / Limits
sodium fluoride mouth/throat	G	M
triamcinolone acetonide mouth/throat	G	
Dermatological Agents - Drugs for Skin Conditions		
accutane	G	
acitretin	G	
adapalene external cream	G	
adapalene external gel 0.3 %	G	
adapalene-benzoyl peroxide external gel	G	
alclometasone dipropionate	G	
amcinonide	G	
amnesteam	G	
azelaic acid external	G	
benzoyl peroxide-erythromycin	G	
betamethasone dipropionate aug	G	
betamethasone dipropionate external	G	
betamethasone valerate external	G	
brimonidine tartrate external	G	
calcipotriene external cream	G	
calcipotriene external ointment	G	
calcipotriene external solution	G	
calcipotriene-betameth diprop external ointment	G	QL (13.4 GM per 1 day)
calcipotriene-betameth diprop external suspension	G	QL (4 GM per 1 day)
calcitriol external	G	
claravis	G	
clindacin	G	
clindacin etz external swab	G	
clindacin-p	G	
clindamycin phos (once-daily)	G	
clindamycin phos (twice-daily)	G	
clindamycin phosphate-benzoyl peroxide	G	
clindamycin phosphate external	G	
clindamycin-tretinoin	G	
clobetasol propionate e	G	
clobetasol propionate emulsion	G	
clobetasol propionate external cream 0.05 %	G	
clobetasol propionate external foam	G	
clobetasol propionate external gel	G	

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Drug Name	Drug Tier	Restrictions / Limits
clobetasol propionate external liquid	G	
clobetasol propionate external lotion	G	
clobetasol propionate external ointment	G	
clobetasol propionate external shampoo	G	
clobetasol propionate external solution	G	
clocortolone pivalate	G	
clodan	G	
coal tar external	G	
dapsone external	G	
desonide external	G	
desoximetasone external	G	
diclofenac sodium external gel 3 %	G	ST; QL (10 GM per 1 day)
diflorasone diacetate	G	
doxepin hcl external	G	
erythromycin external	G	
fluocinolone acetonide body	G	
fluocinolone acetonide external	G	
fluocinolone acetonide scalp	G	
fluocinonide emulsified base	G	
fluocinonide external	G	
fluorouracil external cream 5 %	G	
fluorouracil external solution	G	
flurandrenolide	G	
fluticasone propionate external	G	
halcinonide external cream	G	
halobetasol propionate	G	
hydrocortisone butyrate	G	
hydrocortisone external cream 2.5 %	G	
hydrocortisone external lotion 2 %, 2.5 %	G	
hydrocortisone external ointment 2.5 %	G	
hydrocortisone valerate	G	
imiquimod external cream 3.75 %	G	ST
imiquimod external cream 5 %	G	
imiquimod pump	G	ST
isotretinoin oral	G	
ivermectin external cream	G	
methoxsalen rapid	G	
metronidazole external	G	

Drug Name	Drug Tier	Restrictions / Limits
mometasone furoate external	G	
neuac	G	
pimecrolimus	G	ST; QL (2 GM per 1 day)
podofilox external	G	
selenium sulfide external lotion	G	
sulfacetamide sodium (acne)	G	
sulfacetamide sodium-sulfur external liquid 10-5 %	G	
tacrolimus external	G	QL (2 GM per 1 day)
tazarotene external cream	G	PA
tazarotene external gel	G	PA
tovet	G	
tretinoin external	G	
tretinoin microsphere	G	
tretinoin microsphere pump	G	
triamcinolone acetonide external	G	
triamcinolone in absorbase	G	
triderm	G	
urea external cream 20 %	G	
zenatane	G	
Diabetes - Antidiabetic Agents		
acarbose oral	G	M
CYCLOSET	G	ST; M
FARXIGA	G	ST; M
glimepiride	G	M
glipizide er	G	M
glipizide ir	G	M
glipizide-metformin hcl	G	M
glyburide micronized	G	M
glyburide oral	G	M
glyburide-metformin	G	M
GLYXAMBI	G	ST; M
JANUMET	G	ST; M
JANUMET XR	G	ST; M
JANUVIA	G	ST; M
JARDIANCE	G	ST; M
JENTADUETO	G	ST; M
JENTADUETO XR	G	ST; M

Drug Name	Drug Tier	Restrictions / Limits
liraglutide	G	PA; M; QL (0.3 ML per 1 day)
metformin hcl er	G	M
metformin hcl oral solution	G	M
metformin hcl oral tablet 1000 mg, 500 mg, 750 mg, 850 mg	G	M
miglitol	G	M
MOUNJARO	G	PA; QL (0.08 ML per 1 day)
nateglinide	G	M
OZEMPIC	G	PA; M; QL (0.11 ML per 1 day)
pioglitazone hcl	G	M
pioglitazone hcl-glimepiride	G	M
pioglitazone hcl-metformin hcl	G	M
repaglinide	G	M
RYBELSUS ORAL TABLET 14 MG, 7 MG	G	PA; M; QL (1 EA per 1 day)
RYBELSUS ORAL TABLET 3 MG	G	PA; M; QL (60 EA per 365 days)
saxagliptin hcl	G	ST; M
saxagliptin-metformin er	G	ST; M
SOLIQUA	G	M
SYNJARDY	G	ST; M
SYNJARDY XR	G	ST; M
TRADJENTA	G	ST
TRULICITY	G	PA; M; QL (0.08 ML per 1 day)
XIGDUO XR	G	ST; M
XULTOPHY	G	M
Diabetes - Glucose Monitoring		
CONTOUR MONITOR KIT W/DEVICE	G	OTC
CONTOUR NEXT EZ KIT W/DEVICE	G	OTC
CONTOUR NEXT GEN MONITOR KIT W/DEVICE	G	OTC
CONTOUR NEXT LINK KIT W/DEVICE	G	OTC
CONTOUR NEXT MONITOR KIT W/DEVICE	G	OTC
CONTOUR NEXT ONE KIT W/DEVICE	G	OTC
CONTOUR NEXT GEN TEST STRIPS	G	OTC; QL (10 EA per 1 day)
CONTOUR PLUS BLUE KIT W/DEVICE	G	OTC
CONTOUR PLUS TEST STRIP	G	OTC; QL (10 EA per 1 day)
CONTOUR TEST STRIPS	G	OTC; QL (10 EA per 1 day)
Diabetes - Glycemic Agents		
BAQSIMI ONE PACK	G	
BAQSIMI TWO PACK	G	

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Drug Name	Drug Tier	Restrictions / Limits
diazoxide oral	G	M
glucagon emergency kit injection solution reconstituted 1 mg	G	
GLUCAGON EMERGENCY KIT	G	
Diabetes - Insulins		
ADMELOG	G	M
ADMELOG SOLOSTAR	G	M
AFREZZA	G	PA; M
APIDRA SOLOSTAR	G	M
APIDRA VIAL	G	M
BASAGLAR KWIKPEN	G	M
BD ULTRA-FINE INSULIN SYRINGES	G	ST; OTC
FIASP	G	M
FIASP FLEXTOUCH	G	M
FIASP PENFILL	G	M
FIASP PUMPCART	G	M
HUMALOG	G	M
HUMALOG KWIKPEN	G	M
HUMALOG MIX 50/50 KWIKPEN	G	M
HUMALOG MIX 75/25 KWIKPEN	G	M
HUMALOG MIX 75/25 VIAL	G	M
HUMALOG U-100 JUNIOR KWIKPEN	G	M
HUMULIN 70/30 KWIKPEN	G	M; OTC
HUMULIN 70/30 VIAL	G	M; OTC
HUMULIN N KWIKPEN	G	M; OTC
HUMULIN N VIAL	G	M; OTC
HUMULIN R U-500 KWIKPEN	G	M
HUMULIN R VIAL	G	M; OTC
INSULIN LISPRO	G	M
INSULIN LISPRO (1 UNIT DIAL)	G	M
INSULIN LISPRO JUNIOR KWIKPEN	G	M
INSULIN LISPRO PROT & LISPRO	G	M
INSULIN SYRINGES 29G X 1/2" 0.3 ML, 31G X 1/2" 0.3 ML	G	ST; OTC
LANTUS SOLOSTAR	G	M
LANTUS U-100 VIAL	G	M
LYUMJEV KWIKPEN	G	
LYUMJEV VIAL	G	
MERILOG	G	

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Drug Name	Drug Tier	Restrictions / Limits
MERILOG SOLOSTAR	G	
NOVOLIN 70/30 FLEXPEN	G	M; OTC
NOVOLIN 70/30 VIAL	G	M; OTC
NOVOLIN N FLEXPEN	G	M
NOVOLIN N VIAL	G	M; OTC
NOVOLIN R FLEXPEN	G	M; OTC
NOVOLIN R VIAL	G	M; OTC
NOVOLOG FLEXPEN	G	M
NOVOLOG MIX 70/30 FLEXPEN	G	M
NOVOLOG MIX 70/30 VIAL	G	M
NOVOLOG PENFILL	G	M
NOVOLOG U-100 VIAL	G	M
REZVOGLAR KWIKPEN	G	
TOUJEO MAX SOLOSTAR	G	M
TOUJEO SOLOSTAR	G	M
Electrolytes / Minerals / Metals / Vitamins		
carglumic acid	G-S	PA
cyanocobalamin injection solution 1000 mcg/ml	G	M
cyanocobalamin nasal	G	M
cytra k crystals	G	
deferasirox	G-S	PA
deferasirox granules	G-S	PA
deferiprone	G-S	PA
effer-k oral tablet effervescent 25 meq	G	M
ergocalciferol oral capsule	G	
ferottrinsic	G	
folic acid tablet 1 mg oral (rx)	G	M
foltrin	G	
hydroxocobalamin acetate	G	
iodine strong	G	
klor-con	G	M
klor-con 10	G	M
klor-con m10	G	M
klor-con m15	G	M
klor-con m20	G	M
klor-con/ef	G	M
k-tan plus	G	
levocarnitine oral solution	G	M

Drug Name	Drug Tier	Restrictions / Limits
levocarnitine oral tablet	G	M
levocarnitine sf	G	M
multivitamin w/fluoride oral tablet chewable 0.25 mg, 0.5 mg	G	ACA
multivitamin w/fluoride oral tablet chewable 1 mg	G	
multi-vitamin/fluoride	G	ACA
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg	G	ACA
multivitamin/fluoride oral tablet chewable 1 mg	G	
multi-vitamin/fluoride/iron	G	ACA
phospho-trin 250 neutral	G	
phytonadione oral	G	
pnv 27-ca/fe/fa	G	
pnv prenatal plus multivit+dha	G	
polysaccharide iron forte	G	
pot & sod cit-cit ac	G	
potassium chloride crys er	G	M
potassium chloride er	G	M
potassium chloride oral	G	M
potassium citrate er	G	M
potassium citrate-citric acid	G	
sod citrate-citric acid oral solution 500-334 mg/5ml	G	
sodium citrate-citric acid oral solution 3000-2004 mg/30ml	G	
sodium fluoride oral solution	G	M; ACA
sodium fluoride oral tablet 1.1 (0.5 f) mg	G	M; ACA
sodium fluoride oral tablet 2.2 (1 f) mg	G	M
sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg	G	M; ACA
sodium fluoride oral tablet chewable 2.2 (1 f) mg	G	M
sodium polystyrene sulfonate	G	
tolvaptan	G-S	PA; QL (2 EA per 1 day)
trientine hcl oral capsule 250 mg	G	PA
tri-vite/fluoride	G	ACA
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit	G	
wes-phos 250 neutral	G	

Drug Name	Drug Tier	Restrictions / Limits
Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer		
cimetidine hcl	G	M
cimetidine oral tablet 300 mg, 400 mg, 800 mg	G	M
dexlansoprazole	G	M; QL (2 EA per 1 day)
esomeprazole magnesium	G	M; QL (2 EA per 1 day)
famotidine oral suspension reconstituted	G	
famotidine oral tablet 40 mg	G	M
lansoprazole oral	G	M; QL (2 EA per 1 day)
misoprostol oral	G	M
nizatidine	G	M
omeprazole oral capsule delayed release	G	M; QL (2 EA per 1 day)
pantoprazole sodium oral	G	M; QL (2 EA per 1 day)
rabeprazole sodium oral tablet delayed release	G	M; QL (2 EA per 1 day)
sucralfate oral	G	M
Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions		
alosetron hcl	G	PA
alvimopan	G	
bis subcit-metronid-tetracyc	G	
bismuth/metronidaz/tetracyclin	G	
chlordiazepoxide-clidinium	G	
constulose	G	
cromolyn sodium oral	G	
dicyclomine hcl oral capsule	G	
dicyclomine hcl oral solution 10 mg/5ml	G	
dicyclomine hcl oral tablet	G	
diphenoxylate-atropine	G	
enulose	G	
gavilyte-c	G	ACA
gavilyte-g	G	ACA
gavilyte-n with flavor pack	G	ACA
generlac	G	
glycopyrrolate oral solution	G	PA
glycopyrrolate oral tablet 1 mg, 2 mg	G	QL (4 EA per 1 day)
hyoscyamine sulfate er	G	
hyoscyamine sulfate oral elixir	G	
hyoscyamine sulfate oral tablet	G	
hyoscyamine sulfate oral tablet dispersible	G	

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Drug Name	Drug Tier	Restrictions / Limits
hyoscyamine sulfate sl	G	
hyoscyamine sulfate sublingual	G	
lactulose	G	
lactulose encephalopathy	G	
lubiprostone	G	QL (2 EA per 1 day)
methscopolamine bromide oral	G	
mineral oil heavy oral	G	
na sulfate-k sulfate-mg sulf	G	ACA
peg 3350-kcl-na bicarb-nacl	G	ACA
peg-3350/electrolytes	G	ACA
peg-3350/electrolytes/ascorbat	G	ACA
peg-kcl-nacl-nasulf-na asc-c	G	ACA
prucalopride succinate	G	ST; QL (1 EA per 1 day)
ursodiol oral capsule 300 mg	G	M
ursodiol oral tablet	G	M
Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment		
glycerol phenylbutyrate	G-S	PA
miglustat	G-S	PA
nitisinone	G-S	PA
sapropterin dihydrochloride	G-S	PA
sodium phenylbutyrate oral tablet	G	PA
yargesa	G-S	PA
zelvysia	G-S	PA
Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions		
bethanechol chloride oral	G	
calcium acetate (phos binder)	G	
calcium acetate oral tablet 667 mg	G	
darifenacin hydrobromide er	G	M
fesoterodine fumarate er	G	
flavoxate hcl	G	M
lanthanum carbonate	G	
mirabegron er	G	
oxybutynin chloride er	G	M
oxybutynin chloride oral	G	M
penicillamine oral tablet	G	M
phenazopyridine hcl oral tablet 100 mg, 200 mg	G	
sevelamer carbonate	G	

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Drug Name	Drug Tier	Restrictions / Limits
sevelamer hcl	G	
solifenacin succinate	G	M
tiopronin	G-S	
tolterodine tartrate	G	M
tolterodine tartrate er	G	M
tropium chloride	G	M
tropium chloride er	G	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
silodosin	G	M
tamsulosin hcl	G	M
terazosin hcl	G	M
Hormonal Agents - Adrenal		
deflazacort	G-S	PA
dexamethasone intensol	G	
dexamethasone oral	G	
fludrocortisone acetate oral	G	M
hydrocortisone oral	G	
hydrocortisone sod suc (pf)	G	
jaythari	G-S	PA
methylprednisolone oral	G	
prednisolone oral	G	
prednisolone sodium phosphate oral	G	
prednisone intensol	G	
prednisone oral	G	
pyquvi	G-S	PA
Hormonal Agents - Men's Health		
danazol oral	G	
methyltestosterone oral	G	PA; QL (20 EA per 1 day)
testosterone cypionate intramuscular	G	PA; QL (0.4 ML per 1 day)
testosterone enanthate intramuscular	G	PA; QL (0.2 ML per 1 day)
testosterone transdermal gel 1.62 %, 20.25 mg/1.25gm (1.62%), 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%)	G	PA; QL (5 GM per 1 day)
testosterone transdermal gel 10 mg/act (2%)	G	PA; QL (4 GM per 1 day)

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Drug Name	Drug Tier	Restrictions / Limits
testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	G	PA; QL (10 GM per 1 day)
testosterone transdermal solution	G	PA; QL (6 ML per 1 day)
Hormonal Agents - Pituitary		
cabergoline	G	M
desmopressin ace spray refrig	G	M
desmopressin acetate oral	G	M
desmopressin acetate spray	G	M
lanreotide acetate	G-S	PA
leuprolide acetate injection	G-S	PA
octreotide acetate injection solution 100 mcg/ml, 50 mcg/ml, 500 mcg/ml	G-S	PA
octreotide acetate subcutaneous	G-S	PA
Hormonal Agents - Prostaglandins		
mifepristone oral tablet 300 mg	G	PA; QL (4 EA per 1 day)
Hormonal Agents - Selective Estrogen Receptor Modifying Agents		
raloxifene hcl	G	M
Hormonal Agents - Sex Hormones and Birth Control		
abigale	G	M
abigale lo	G	M
afirmelle	G	M; ACA
altavera	G	M; ACA
alyacen 1/35	G	M; ACA
alyacen 7/7/7	G	M; ACA
amethyst	G	M; ACA
ANNOVERA	G	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
AVERI	G	ACA
aviane	G	M; ACA

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Drug Name	Drug Tier	Restrictions / Limits
ayuna	G	M; ACA
azurette	G	M; ACA
balziva	G	M; ACA
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
cryselle-28	G	M; ACA
cyred eq	G	M; ACA
dasetta 1/35 (28)	G	M; ACA
dasetta 7/7/7	G	M; ACA
daysee	G	M; ACA; QL (1 EA per 1 day)
deblitane	G	M; ACA
delyla	G	M; ACA
DEPO-SUBQ PROVERA 104	G	ACA; QL (0.02 ML per 1 day)
desogestrel-ethinyl estradiol	G	M; ACA
dolishale	G	M; ACA
dotti	G	M
drospiren-eth estrad-levomefol	G	M; ACA
drospirenone-ethinyl estradiol	G	M; ACA
elinest	G	M; ACA
ELLA	G	
eluryng	G	M; ACA
emzahh	G	M; ACA
enilloring	G	M; ACA
enpresse-28	G	M; ACA
enskyce	G	M; ACA
errin	G	M; ACA
estarylla	G	M; ACA
estradiol oral	G	M
estradiol transdermal	G	M
estradiol vaginal	G	M
estradiol valerate intramuscular	G	

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Drug Name	Drug Tier	Restrictions / Limits
estradiol-norethindrone acet	G	M
estrogens conjugated	G	M
ethynodiol diac-eth estradiol	G	M; ACA
etonogestrel-ethinyl estradiol	G	M; ACA
falmina	G	M; ACA
feirza 1.5/30	G	M; ACA
feirza 1/20	G	M; ACA
FEMLYV	G	ST; M; ACA
finzala	G	M; ACA
fyavolv	G	M
galbriela	G	M; ACA
gallifrey	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)
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

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Drug Name	Drug Tier	Restrictions / Limits
kelnor 1/35	G	M; ACA
kurvelo	G	M; ACA
larin 1.5/30	G	M; ACA
larin 1/20	G	M; ACA
larin 24 fe	G	M; ACA
larin fe 1.5/30	G	M; ACA
larin fe 1/20	G	M; ACA
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
lojaimiess	G	M; ACA; QL (1 EA per 1 day)
loryna	G	M; ACA
low-ogestrel	G	M; ACA
lo-zumandimine	G	M; ACA
luizza 1.5/30	G	M; ACA
luizza 1/20	G	M; ACA
lutra	G	M; ACA
lyleq	G	M; ACA
lyllana	G	M
lyza	G	M; ACA
marlissa	G	M; ACA
medroxyprogesterone acetate intramuscular suspension	G	ACA; QL (0.02 ML per 1 day)
medroxyprogesterone acetate oral	G	M
megestrol acetate oral suspension	G	
megestrol acetate oral tablet	G-S	
meleya	G	M; ACA
mibelas 24 fe	G	M; ACA
microgestin 1.5/30	G	M; ACA
microgestin 1/20	G	M; ACA
microgestin fe 1.5/30	G	M; ACA
microgestin fe 1/20	G	M; ACA
mili	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
mimvey	G	M
minzoya	G	M; ACA
mono-lynyah	G	M; ACA
NATAZIA	G	M
necon 0.5/35 (28)	G	M; ACA
nikki	G	M; ACA
nora-be	G	M; ACA
norelgestromin-eth estradiol	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
norethin-eth estradiol-fe	G	M; ACA
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	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
nylia 1/35	G	M; ACA
nylia 7/7/7	G	M; ACA
orquidea	G	M; ACA
philith	G	M; ACA
pimtrea	G	M; ACA
portia-28	G	M; ACA
progesterone intramuscular	G	
progesterone oral	G	
progesterone vaginal	G	
reclipsen	G	M; ACA
rivelsa	G	M; ACA; QL (1 EA per 1 day)
rosyrah	G	M; ACA; QL (1 EA per 1 day)
setlakin	G	M; ACA; QL (1 EA per 1 day)
sharobel	G	M; ACA
simliya	G	M; ACA
simpesse	G	M; ACA; QL (1 EA per 1 day)

Drug Name	Drug Tier	Restrictions / Limits
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
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-sprintec	G	M; ACA
tri-vylibra	G	M; ACA
tri-vylibra lo	G	M; ACA
turqoz	G	M; ACA
TYBLUME	G	M; ACA
tydemy	G	M; ACA
valtya 1/35	G	M; ACA
valtya 1/50	G	M; ACA
velivet	G	M; ACA
vestura	G	M; ACA
vienva	G	M; ACA
violele	G	M; ACA
volnea	G	M; ACA
vyfemla	G	M; ACA
vylibra	G	M; ACA
wera	G	M; ACA
wymzya fe	G	M; ACA
xarah fe	G	M; ACA
xelria fe	G	M; ACA
xulane	G	M; ACA
yuvafem	G	M
zafemy	G	M; ACA
zovia 1/35 (28)	G	M; ACA

Drug Name	Drug Tier	Restrictions / Limits
zumandimine	G	M; ACA
Hormonal Agents - Thyroid		
levo-t oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 88 mcg	G	M
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 88 mcg	G	M
levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 88 mcg	G	M
liomny	G	M
liothyronine sodium oral	G	M
methimazole oral	G	M
np thyroid	G	M
propylthiouracil oral	G	M
thyroid oral	G	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		
azathioprine oral	G	
cyclosporine modified	G	
cyclosporine oral	G	
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	G	
engraf	G	
leflunomide oral	G	M
methotrexate sodium oral	G	
mycophenolate mofetil oral	G	
mycophenolate sodium	G	
mycophenolic acid	G	
sirolimus oral	G	
tacrolimus oral	G	
Inflammatory Bowel Disease Agents		
balsalazide disodium	G	
budesonide er	G	
budesonide oral	G	
budesonide rectal	G	
hydrocortisone (perianal)	G	

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Drug Name	Drug Tier	Restrictions / Limits
hydrocortisone ace-pramoxine external cream 1-1 %	G	
hydrocortisone rectal	G	
mesalamine er oral capsule 0.375 gm	G	M
mesalamine oral	G	M
mesalamine rectal	G	M
mesalamine-cleanser	G	
procto-med hc	G	
sulfasalazine oral	G	M
Metabolic Bone Disease Agents - Drugs for Osteoporosis		
alendronate sodium oral solution	G	M
alendronate sodium oral tablet 10 mg	G	M
alendronate sodium oral tablet 35 mg, 70 mg	G	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)
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	G-S	PA
Metabolic Bone Disease Agents - Other		
calcitriol oral	G	M
cinacalcet hcl	G	PA
doxercalciferol oral	G	M
paricalcitol oral	G	M
Miscellaneous Therapeutic Agents		
BD PEN NEEDLE SHORT ULTRAFINE	G	ST; M; OTC
DROPLET MICRON	G	ST; M; OTC
EMBECTA PEN NEEDLE ULTRAFINE 31G X 8 MM	G	ST; M; OTC
EMBRACE PEN NEEDLES 31G X 8 MM	G	ST; M; OTC
INCONTROL ULTICARE PEN NEEDLES 31G X 8 MM	G	ST; M; OTC
INSULIN PEN NEEDLES 29G X 4MM , 30G X 6 MM , 31G X 8 MM	G	ST; M; OTC
INSULIN PEN NEEDLES 31G X 8 MM	G	ST; M
l-glutamine oral packet	G-S	PA

Drug Name	Drug Tier	Restrictions / Limits
methylergonovine maleate oral	G	QL (28 EA per 1 fill)
PEN NEEDLE/5-BEVEL TIP 31G X 8 MM	G	ST; M; OTC
QUICK TOUCH INSULIN PEN NEEDLE 31G X 8 MM	G	ST; M; OTC
RAYA SURE PEN NEEDLE 31G X 8 MM	G	ST; M; OTC
VERIFINE INSULIN PEN NEEDLE 31G X 8 MM	G	ST; M; OTC
VERIFINE PLUS PEN NEEDLE 31G X 8 MM	G	ST; M; OTC
Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation		
azelastine hcl ophthalmic	G	
bacitracin ophthalmic	G	
bepotastine besilate	G	ST
bromfenac sodium (once-daily)	G	QL (6.8 ML per 365 days)
bromfenac sodium ophthalmic solution 0.07 %	G	ST; QL (12 ML per 365 days)
bromfenac sodium ophthalmic solution 0.075 %	G	ST; QL (20 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	
fluorometholone	G	
flurbiprofen sodium	G	
gatifloxacin ophthalmic	G	
gentamicin sulfate ophthalmic	G	
ketorolac tromethamine ophthalmic	G	
levofloxacin ophthalmic	G	
loteprednol etabonate ophthalmic gel	G	QL (20 GM per 365 days)
loteprednol etabonate ophthalmic suspension	G	
moxifloxacin hcl (2x day)	G	
moxifloxacin hcl ophthalmic	G	
neomycin-polymyxin-dexameth	G	
neomycin-polymyxin-hc ophthalmic	G	
ofloxacin ophthalmic	G	
olopatadine hcl ophthalmic solution 0.2 %	G	
prednisolone acetate ophthalmic	G	
prednisolone sodium phosphate ophthalmic	G	
sulfacetamide sodium ophthalmic	G	

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Drug Name	Drug Tier	Restrictions / Limits
tobramycin ophthalmic	G	
tobramycin-dexamethasone	G	
trifluridine	G	
Ophthalmic Agents - Drugs for Glaucoma		
acetazolamide er	G	M
acetazolamide oral	G	M
apraclonidine hcl	G	
betaxolol hcl ophthalmic	G	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
dichlorphenamide	G-S	PA; QL (4 EA per 1 day)
dorzolamide hcl ophthalmic	G	M
dorzolamide hcl-timolol mal	G	M
dorzolamide hcl-timolol mal pf	G	M
latanoprost ophthalmic	G	M
levobunolol hcl	G	M
methazolamide oral	G	M
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	G	M
pilocarpine hcl ophthalmic solution 1.25 %	G	PA; M; QL (0.3 ML per 1 day)
tafluprost (pf)	G	M; QL (1 EA per 1 day)
timolol hemihydrate	G	M
timolol maleate (once-daily)	G	M
timolol maleate ocudose	G	M
timolol maleate ophthalmic	G	M
timolol maleate pf	G	M
travoprost (bak free)	G	M; QL (0.12 ML per 1 day)
Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions		
altafrin	G	
bacitracin-polymyxin b	G	
bacitra-neomycin-polymyxin-hc	G	
cyclopentolate hcl ophthalmic	G	M
cyclosporine ophthalmic	G	PA; M; QL (2 EA per 1 day)
neomycin-bacitracin zn-polymyx	G	
neomycin-polymyxin-gramicidin	G	

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Drug Name	Drug Tier	Restrictions / Limits
phenylephrine hcl ophthalmic	G	
polymyxin b-trimethoprim	G	
proparacaine hcl ophthalmic	G	
sulfacetamide-prednisolone	G	
Otic Agents - Drugs for Ear Conditions		
acetic acid otic	G	
ciprofloxacin hcl otic	G	
ciprofloxacin-dexamethasone	G	
fluocinolone acetonide otic	G	
hydrocortisone-acetic acid	G	
neomycin-polymyxin-hc otic	G	
ofloxacin otic	G	
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	G	
clemastine fumarate oral	G	
cyproheptadine hcl oral	G	
desloratadine oral tablet	G	
desloratadine oral tablet dispersible	G	
flunisolide nasal	G	QL (0.84 ML per 1 day)
fluticasone propionate nasal	G	
guaifenesin-codeine	G	PA; OTC; QL (240 ML per 1 fill)
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)
hydromet	G	PA; QL (240 ML per 1 fill)
ipratropium bromide nasal	G	
maxi-tuss ac	G	PA; OTC; QL (240 ML per 1 fill)
mometasone furoate nasal	G	QL (1.14 GM per 1 day)
olopatadine hcl nasal	G	QL (1.02 GM per 1 day)
promethazine-codeine oral solution	G	PA; QL (240 ML per 1 fill)
promethazine-dm	G	
pseudoephedrine-bromphen-dm	G	
ryvent	G	
sodium chloride inhalation	G	

Drug Name	Drug Tier	Restrictions / Limits
Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions		
acetylcysteine inhalation	G	
albuterol sulfate hfa	G	M; QL (1.2 GM per 1 day)
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%	G	M; QL (18 ML per 1 day)
albuterol sulfate inhalation nebulization solution 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 nebulization solution (5 mg/ml) 0.5% inhalation	G	M; QL (5 EA per 1 day)
albuterol sulfate oral tablet	G	M
albuterol sulfate syrup 2 mg/5ml oral	G	M
arformoterol tartrate	G	M; QL (4 ML per 1 day)
breyna	G	M; QL (0.35 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)
cromolyn sodium inhalation	G	M
elixophyllin	G	M
epinephrine injection solution auto-injector	G	
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	G	M; QL (2 EA per 1 day)
formoterol fumarate inhalation	G	M; QL (4 ML per 1 day)
ipratropium bromide inhalation	G	M; QL (10.42 ML per 1 day)
ipratropium-albuterol	G	QL (18 ML per 1 day)
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)
montelukast sodium oral	G	M
pirfenidone oral capsule	G-S	PA
pirfenidone oral tablet 267 mg, 801 mg	G-S	PA
pirfenidone oral tablet 534 mg	G	PA
PROAIR RESPICLICK	G	M; QL (0.07 EA per 1 day)
roflumilast	G	PA
terbutaline sulfate oral	G	M

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Drug Name	Drug Tier	Restrictions / Limits
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	G	M
theophylline er oral tablet extended release 24 hour	G	M
theophylline oral	G	M
tiotropium bromide	G	M; QL (1 EA per 1 day)
wixela inhub	G	M; QL (2 EA per 1 day)
zafirlukast	G	M
zileuton er	G	M
Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis		
tobramycin inhalation nebulization solution 300 mg/4ml	G-S	QL (8 ML per 1 day)
tobramycin nebulization solution 300 mg/5ml inhalation	G	QL (10 ML per 1 day)
Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension		
alyq	G-S	PA; QL (2 EA per 1 day)
ambrisentan	G-S	PA; QL (1 EA per 1 day)
bosentan oral tablet	G-S	PA; QL (2 EA per 1 day)
bosentan oral tablet soluble	G-S	PA; QL (4 EA per 1 day)
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)
Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm		
baclofen oral	G	
carisoprodol oral	G	
chlorzoxazone	G	
cyclobenzaprine hcl er	G	
cyclobenzaprine hcl oral	G	
dantrolene sodium oral	G	
metaxalone	G	
methocarbamol oral	G	
orphenadrine citrate er	G	QL (2 EA per 1 day)
orphenadrine-aspirin-caffeine	G	QL (4 EA per 1 day)
tizanidine hcl oral	G	
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)

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Drug Name	Drug Tier	Restrictions / Limits
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)
modafinil oral	G	PA; QL (1 EA per 1 day)
ramelteon	G	QL (1 EA per 1 day)
tasimelteon	G-S	PA; QL (1 EA per 1 day)
temazepam	G	QL (1 EA 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)
zolpidem tartrate sublingual	G	QL (1 EA per 1 day)

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Blue Cross and Blue Shield of Kansas City ("Blue KC") complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including sex characteristics, including intersex traits; pregnancy or related conditions; sexual orientation; gender identity, and sex stereotypes). Blue KC does not exclude people or treat them less favorably because of race, color, national origin, age, disability, or sex.

Blue KC:

- Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats).
- Provides free language services to people whose primary language is not English, which may include:
 - Qualified interpreters
 - Information written in other languages.

If you need reasonable modifications, appropriate auxiliary aids and services, or language assistance services, contact ACA/QHP: 1-866-859-3822 (TTY:711), Commercial: 816-395-3558 (local) or 888-989-8842, Medicare Supplemental: 1-888-890-4423 (TTY:711), Medicare Advantage: 1-866-508-7140 (TTY:711), and Medicare Advantage Employer Group Waiver Plan: 1-888-892-8907 (TTY:711).

Blue KC's Section 1557 Coordinator can be reached by contacting: Section 1557 Coordinator, PO Box 419169, Kansas City, MO 64141-6169, 816-395-3537, TTY: 816-842-5607, APPEALS@bluekc.com.

If you believe that Blue KC has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: Appeals Department, PO Box 419169, Kansas City, MO 64141-6169, 816-395-3537, TTY: 816-842-5607, APPEALS@bluekc.com. You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Appeals Department is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

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

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

This notice is available at Blue KC's website: <https://www.bluekc.com/consumer/non-discrimination-information/>

If you, or someone you're helping, has questions about Blue KC, you have the right to get help and information in your language at no cost. To talk to an interpreter, call 1-844-395-7126.

Spanish: Si usted, o alguien a quien usted está ayudando, tiene preguntas acerca de Blue KC, tiene derecho a obtener ayuda e información en su idioma sin costo alguno. Para hablar con un intérprete, llame al 1-844-395-712.

Chinese: 如果您，或是您正在協助的對象，有關於 Blue KC 方面的問題，您有權利免費以您的母語得到幫助和訊息。洽詢一位翻譯員，請撥電話 1-844-395-7126。

Vietnamese: Nếu quý vị, hay người mà quý vị đang giúp đỡ, có câu hỏi về Blue KC, quý vị sẽ có quyền được giúp và có thêm thông tin bằng ngôn ngữ của mình miễn phí. Để nói chuyện với một thông dịch viên, xin gọi 1-844-395-7126.

Cushite: Isin yookan namni biraa isin deeggartan Blue KC irratti gaaffii yo qabaattan, kaffaltii irraa bilisa haala ta'een afaan keessaniin odeeffannoo argachuu fi deeggarsa argachuuf mirga ni qabdu. Nama isiniif ibsu argachuuf, lakkoofsa bilbilaa 1-844-395-7126 tiin bilbilaa.

Korean: 만약 귀하 또는 귀하가 돕고 있는 어떤 사람이 [Blue KC]에 관해서 질문이 있다면 귀하는 그러한 도움과 정보를 귀하의 언어로 비용 부담없이 얻을 수 있는 권리가 있습니다. 그렇게 통역사와 얘기하기 위해서는 1-844-395-7126 로 전화하십시오.

Arabic:

إن كان لديك أو لدى شخص تساعدك أسئلة بخصوص Blue KC ، فلهذا الحق في الحصول على المساعدة والمعلومات الضرورية بلغتك من دون أية تكلفة. للتحدث مع مترجم اتصل بـ 1-844-395-7126.

French: Si vous, ou quelqu'un que vous êtes en train d'aider, a des questions à propos de Blue KC, vous avez le droit d'obtenir de l'aide et l'information dans votre langue à aucun coût. Pour parler à un interprète, appelez 1-844-395-7126.

Russian: Если у вас или лица, которому вы помогаете, имеются вопросы по поводу Blue KC, то вы имеете право на бесплатное получение помощи и информации на вашем языке. Для разговора с переводчиком позвоните по телефону 1-844-395-7126.

German: Falls Sie oder jemand, dem Sie helfen, Fragen zum Blue KC haben, haben Sie das Recht, kostenlose Hilfe und Informationen in Ihrer Sprache zu erhalten. Um mit einem Dolmetscher zu sprechen, rufen Sie bitte die Nummer 1-844-395-7126 an.

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Laotian: ຖ້າທ່ານ, ຫຼື ຄົນ ທ່ານ ກໍ່ ກຳລັງ ຊ່ວຍເຫຼືອ, ມີ ຄຳຖາມ ກ່ຽວກັບ Blue KC, ທ່ານ ມີ ສິດ ທີ່ ທ່ານ ໄດ້ ຮັບ ການ ຊ່ວຍເຫຼືອ ພ້ອມ ດ້ວຍ ນັ້ນ ກໍ່ ມີ ຂໍ້ ຮ້ອງສານ ທີ່ ທ່ານ ບໍ່ ພາສາ ຂອງ ທ່ານ ບໍ່ ມີ ຄ່າ ໃຊ້ ຈ່າຍ. ການ ໂອ້ ວົມ ກັບ ນາຍພາສາ, ໃຫ້ ໂທ 1-844-395-7126.

Mon-Khmer: ប្រសិនបើអ្នក ឬនរណាម្នាក់ដែលអ្នកកំពុងជួយមានសំណួរអំពី Blue KC អ្នកមានសិទ្ធិទទួលបានជំនួយ និងព័ត៌មានជាភាសាសរសេរសម្រាប់អ្នកដោយឥតគិតថ្លៃ។ ដើម្បីនិយាយជាមួយអ្នកបកប្រែផ្ទាល់មាត់ម្នាក់ សូមទូរសព្ទទៅលេខ 1-844-395-7126.

Persian:

اگر شما، یا کسی که شما به او کمک میکنید ، سوال در مورد Blue KC ، داشته باشید حق این را دارید که کمک و اطلاعات به زبان خود را به طور رایگان دریافت کنید. 1-844-395-7126 تماس حاصل نمایید.

Hmong: Yog hais tias koj, los sis ib tus neeg twg uas koj tab tom pab, muaj lus nug txog Blue KC, koj muaj cai tau txais kev pab thiab cov ntaub ntawv sau ua koj hom lus yam tsis xam tus nqi dab tsi li. Yog xav tham nrog ib tus neeg pab txhais lus, hu rau 1-844-395-7126.

Portuguese: Se você, ou alguém a quem você está ajudando, tem perguntas sobre o Blue KC, você tem o direito de obter ajuda e informação em seu idioma e sem custos. Para falar com um intérprete, ligue para 1-844-395-7126.

For TTY services, please call **1-816-842-5607**.



Kansas City

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