



2022

Formulary

(List of Covered Drugs)

South Carolina

Molina Dual Options Medicare-Medicaid Plan

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For more recent information or other questions, contact us at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time or visit MolinaHealthcare.com/Duals

Molina Dual Options Medicare-Medicaid Plan | 2022 List of Covered Drugs (Formulary)

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs *and over-the-counter drugs and items* are covered by Molina Dual Options. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Molina Dual Options. Key terms and their definitions appear in the last chapter of the *Member Handbook*.

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A. Disclaimers

This is a list of drugs that members can get in Molina Dual Options.

- ❖ Molina Dual Options Medicare-Medicaid Plan is a health plan that contracts with both Medicare and South Carolina Healthy Connections Medicaid to provide benefits of both programs to enrollees.
- ❖ ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free.
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- ❖ To make a standing request to get materials in a language other than English or in an alternate format now and in the future, please contact Member Services at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time.
- ❖ Molina Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of race, ethnicity, national origin, religion, gender, sex, age, mental or physical disability, health status, receipt of healthcare, claims experience, medical history, genetic information, evidence of insurability, geographic location.

B. Frequently Asked Questions (FAQ)

Find answers here to questions you have about this *List of Covered Drugs*. You can read all of the FAQ to learn more or look for a question and answer.

B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 13 are the drugs covered by Molina Dual Options. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Molina Dual Options will cover all medically necessary drugs on the Drug List if:



If you have questions, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit MolinaHealthcare.com/Duals.

- your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a Molina Dual Options network pharmacy.
- Molina Dual Options may have additional steps to access certain drugs (refer to question B4 below).

You can also find an up-to-date list of drugs that we cover on our website listed at the bottom of the page or by calling Member Services at the number at the bottom of the page.

B2. Does the Drug List ever change?

Yes, and Molina Dual Options must follow Medicare and Healthy Connections Medicaid rules when making changes. We may add or remove drugs on the Drug List during the year.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (Prior approval is permission from Molina Dual Options before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, refer to question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

- a new, cheaper drug comes on the market that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe, **or**
- a drug is removed from the market.

Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check Molina Dual Options' up to date Drug List on our website listed at the bottom of the page.
- You can also call Member Services to check the current Drug List at the number at the bottom of the page.

B3. What happens when there is a change to the Drug List?

 **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

Some changes to the Drug List will happen **immediately**. For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug and add the new generic drug, but your cost for the new drug will stay the same. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market we will take it off the Drug List. If you are taking the drug, we will let you know. Talk with your doctor or other prescriber to find an alternative that is safe for you.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is not new to the market **and**
 - Replace a brand name drug currently on the Drug List **or**
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 60-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead **or**
- Whether to ask for an exception from these changes. To learn more about exceptions, refer to question B10.

 **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from Molina Dual Options before you fill your prescription. Molina Dual Options may not cover the drug if you do not get approval.
- **Quantity limits:** Sometimes Molina Dual Options limits the amount of a drug you can get.
- **Step therapy:** Sometimes Molina Dual Options requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables on pages 13 - 119. You can also get more information by visiting our website listed at the bottom of the page. We have posted online documents that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please refer to questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The table of drugs on page 11 has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if Molina Dual Options changes their rules about some drugs (for example, prior authorization (approval), quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change prior approval, quantity limits, and/or step therapy restrictions on a drug. Refer to question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change

 **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

B7. How can I find a drug on the Drug List?

There are two ways to find a drug:

- You can search alphabetically by the drug's name, **or**
- You can search by medical condition.

To search **alphabetically**, go to the Index of Covered Drugs section. You can find it on page number 120.

To search **by medical condition**, find the section labeled "Drugs Grouped by Medical Condition" on page 11. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Beta-blockers. That is where you will find drugs that treat heart conditions.

B8. What if the drug I want to take is not on the Drug List?

If you don't find your drug on the Drug List, call Member Services at the number at the bottom of the page and ask about it. If you learn that Molina Dual Options will not cover the drug, you can do one of these things:

- Ask Member Services for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please refer to questions B10-B12 for more information about exceptions.

B9. What if I am a new Molina Dual Options member and can't find my drug on the Drug List or have a problem getting my drug?

We can help. We will cover a temporary 60-day supply of your Part D drug and a 90-day supply of your Healthy Connections Medicaid drug during the first 180 days you are a member of Molina Dual Options. This will give you time to talk to your doctor or other prescriber. They will determine if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 60 days of medication.

We will cover a 60-day of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior approval by Molina Dual Options, **or**

 **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

- you are taking a drug that is part of a step therapy restriction.

If you are in a nursing home or other long-term care facility, and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 60 supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Molina Dual Options member.
- This is in addition to the temporary supply during the first 90 days you are a member of Molina Dual Options.

Transition Policy

Members may be affected by changes in our formulary from one year to the next. You should talk to your doctor to decide if you should switch to a different drug that we cover or request a formulary exception in order to get coverage for the drug. See Chapter 9 of the Member Handbook to learn more about how to request an exception. Please contact Member Services if you need help switching to a different drug that we cover or if you need help requesting a formulary exception.

- **If you are a current member affected by a formulary change from one year to the next,** we will provide a 60-day temporary supply of the non-formulary drug if you need a refill for the drug during the first 180 days of the new plan year for Part D drugs and Healthy Connections Medicaid drugs.

When a member goes to a network pharmacy and we provide a temporary supply of a drug that isn't on our formulary, or that has coverage restrictions or limits (but is otherwise considered a "Part D drug"), we will cover a 60-day supply (unless the prescription is written for fewer days). After we cover the temporary 60-day supply, we generally will not pay for these drugs as part of our transition policy again.

- **If you are a current member and are not affected by a formulary change**
 - o And if you don't live in a long-term care facility, we will provide a 31-day supply of Part D and Healthy Connections Medicaid drugs that are non-formulary or have limitations during the first 90-days of the calendar year.
 - o And you enter a long-term-care facility (like a nursing home) in the first 180 days from joining the plan, an additional temporary supply of up to 31 days will be covered during the first 90 days of your admittance into the long-term care facility if your drug is not on the formulary or has other limitations.

Temporary Supply



If you have questions, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information,** visit MolinaHealthcare.com/Duals.

We will provide you with a written notice after we cover your temporary supply. This notice will explain the steps you can take to request an exception and how to work with your doctor to decide if you should switch to an appropriate drug that we cover.

If the resident has been enrolled in our Plan for more than 180 days and needs a drug that isn't on our formulary or is subject to other restrictions, such as step therapy or dosage limits, we will cover a temporary 31-day emergency supply of that drug (unless the prescription is for fewer days) while pursuing a formulary exception. Exceptions are available in situations where you experience a change in the level of care you are receiving that also requires you to transition from one facility or treatment center to another. In such circumstances, you would be eligible for a temporary, one-time fill exception for a 31-day supply even if you are outside of the first 180 days as a member of the plan.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask Molina Dual Options to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, Molina Dual Options may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.

B11. How can I ask for an exception?

To ask for an exception, call Member Services. A Member Services representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9, of the *Member Handbook* to learn more about exceptions.

B12. How long does it take to get an exception?

After we get a statement from your prescriber supporting your request for an exception, we will give you a decision within 72 hours. Your prescriber can call Molina Dual Options or fax the supporting statement to (866) 290-1309.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

B13. What are generic drugs?

 **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).

Molina Dual Options covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for "over-the-counter". Molina Dual Options covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Molina Dual Options Drug List to find out what OTC drugs are covered.

B15. Does Molina Dual Options cover non-drug OTC products?

Molina Dual Options covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include non-aspirin tab 325mg, cough syrup 100/5ml.

You can read the Molina Dual Options Drug List to find out what non-drug OTC products are covered.

B16. What is my copay?

As a Molina Dual Options member, you have no copays for prescription and OTC drugs as long as you follow Molina Dual Options' rules.

B17. What are drug tiers?

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs. For Tier 1 drugs, you pay nothing.
- Tier 2 drugs are brand name drugs. For Tier 2 drugs, you pay nothing.
- Tier 3 drugs are Non-Medicare Rx/Over The Counter (OTC) drugs. For Tier 3 drugs, you pay nothing.

C. Overview of the *List of Covered Drugs*

The following list of covered drugs gives you information about the drugs covered by Molina Dual Options. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 120. The index alphabetically lists all drugs covered by Molina Dual Options.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., BYSTOLIC), and generic drugs are listed in lower-case italics (e.g., *metoprolol*).

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The information in the necessary actions, restrictions, or limits on use column tells you if Molina Dual Options has any rules for covering your drug.

Note: The * next to a drug means the drug is not a “Part D drug.” The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage).

- In addition, if you are getting Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for these drugs. For more information on Extra Help, please refer to the call-out box below.

Extra Help is a Medicare program that helps people with limited incomes and resources reduce Medicare Part D prescription drug costs, such as premiums, deductibles, and copays. Extra Help is also called the “Low-Income Subsidy,” or “LIS.”

- These drugs also have different rules for appeals. An *appeal* is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Healthy Connections Medicaid.
- If you or your doctor disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Member Services at the number at the bottom of the page. You can also read Chapter 9, of the *Member Handbook* to learn how to appeal a decision.

C1. Drugs Grouped by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Beta-blockers. That is where you will find drugs that treat heart conditions.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

PA = Prior Authorization (approval): you must have approval before you can get this drug.

QL = Quantity Limits: the amount of the drug that the plan will cover.

ST = Step Therapy Criteria: you must try another drug before you can get this one.

NM = Non-Mail Order: this drug cannot be filled through mail order.

B/D = This drug may be covered under Medicare Part B or D depending upon the circumstances.

? **If you have questions**, please call Molina Dual Options at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time. The call is free. **For more information**, visit MolinaHealthcare.com/Duals.

LA = Limited Access Drug: this drug may be available only at certain pharmacies.

(*) = Non-Part D Drugs, or OTC items that are covered by Medicaid.

NDS = Non-Extended Days Supply: you will be limited to how many days supply you can receive.



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Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION**GOUT - DRUGS TO TREAT GOUT**

<i>allopurinol</i> TABS 100mg, 300mg	\$0(1)	
<i>colchicine</i> TABS .6mg	\$0(1)	QL (120 tabs / 30 days)
<i>colchicine w/ probenecid tab 0.5-500 mg</i>	\$0(1)	
<i>MITIGARE CAPS .6mg</i>	\$0(2)	QL (60 caps / 30 days)
<i>probenecid</i> TABS 500mg	\$0(1)	

MISCELLANEOUS

<i>acetaminophen</i> CHEW 160mg; SOLN 160mg/5ml, 325mg/10.15ml, 650mg/20.3ml; SUPP 120mg, 650mg; SUSP 160mg/5ml, 325mg/10.15ml, 650mg/20.3ml; TABS 325mg, 500mg; TBCR 650mg	\$0(3)	NM; *
<i>acetaminophen extra stren</i> TABS 500mg	\$0(3)	NM; *
<i>adult aspirin regimen</i> TBEC 81mg	\$0(3)	NM; *
<i>arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>aspirin</i> CHEW 81mg; TABS 325mg; TBEC 81mg, 325mg	\$0(3)	NM; *
<i>ASPIRIN</i> SUPP 300mg	\$0(3)	NM; *
<i>aspirin adult low dose</i> TBEC 81mg	\$0(3)	NM; *
<i>aspirin adult low strengt</i> CHEW 81mg	\$0(3)	NM; *
<i>aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>childrens acetaminophen</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>childrens silapap</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>ed-apap</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>feverall adults</i> SUPP 650mg	\$0(3)	NM; *
<i>feverall childrens</i> SUPP 120mg	\$0(3)	NM; *
<i>FEVERALL INFANTS</i> SUPP 80mg	\$0(3)	NM; *
<i>FEVERALL JUNIOR STRENGTH</i> SUPP 325mg	\$0(3)	NM; *
<i>gnp 8 hour arthritis reli</i> TBCR 650mg	\$0(3)	NM; *
<i>gnp 8 hour pain reliever</i> TBCR 650mg	\$0(3)	NM; *
<i>gnp acetaminophen</i> TABS 325mg	\$0(3)	NM; *
<i>gnp adult aspirin low str</i> CHEW 81mg	\$0(3)	NM; *
<i>gnp arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>gnp aspirin TABS 325mg; TBEC 81mg, 325mg</i>	\$0(3)	NM; *
<i>gnp aspirin low dose TBEC 81mg</i>	\$0(3)	NM; *
<i>gnp headache relief extra</i>	\$0(3)	NM; *
<i>gnp infants pain/fever SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>gnp migraine relief</i>	\$0(3)	NM; *
<i>gnp pain & fever children SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>gnp pain & fever infants SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>gnp pain relief CHEW 160mg; TABS 325mg</i>	\$0(3)	NM; *
<i>gnp pain relief extra str TABS 500mg</i>	\$0(3)	NM; *
<i>goodsense arthritis pain TBCR 650mg</i>	\$0(3)	NM; *
<i>goodsense aspirin CHEW 81mg; TABS 325mg</i>	\$0(3)	NM; *
<i>goodsense aspirin adult / CHEW 81mg</i>	\$0(3)	NM; *
<i>goodsense migraine formul</i>	\$0(3)	NM; *
<i>goodsense pain & fever ch SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>goodsense pain & fever in SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>goodsense pain relief ext TABS 500mg</i>	\$0(3)	NM; *
<i>headache relief</i>	\$0(3)	NM; *
<i>headache relief/extra str</i>	\$0(3)	NM; *
<i>hm acetaminophen children CHEW 160mg</i>	\$0(3)	NM; *
<i>hm adult aspirin TABS 325mg</i>	\$0(3)	NM; *
<i>hm arthritis pain relief TBCR 650mg</i>	\$0(3)	NM; *
<i>hm aspirin CHEW 81mg; TABS 325mg</i>	\$0(3)	NM; *
<i>hm aspirin ec low dose TBEC 81mg</i>	\$0(3)	NM; *
<i>hm migraine relief</i>	\$0(3)	NM; *
<i>hm pain & fever childrens SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>hm pain & fever infants SUSP 160mg/5ml</i>	\$0(3)	NM; *
<i>hm pain relief TBCR 650mg</i>	\$0(3)	NM; *
<i>hm pain relief extra stre TABS 500mg</i>	\$0(3)	NM; *
<i>hm pain reliever TABS 325mg</i>	\$0(3)	NM; *
<i>8 hour arthritis pain rel TBCR 650mg</i>	\$0(3)	NM; *
<i>8 hr arthritis pain relie TBCR 650mg</i>	\$0(3)	NM; *
<i>8hr muscle aches & pain TBCR 650mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>liquid acetaminophen</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>m-pap</i> LIQD 160mg/5ml	\$0(3)	NM; *
<i>mapap</i> CAPS 500mg	\$0(3)	NM; *
<i>mapap acetaminophen extra</i> LIQD 500mg/15ml	\$0(3)	NM; *
<i>mapap arthritis pain</i> TBCR 650mg	\$0(3)	NM; *
<i>mapap childrens</i> CHEW 80mg, 160mg	\$0(3)	NM; *
<i>migraine formula</i>	\$0(3)	NM; *
<i>migraine relief</i>	\$0(3)	NM; *
<i>pain & fever childrens</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>pain & fever infants</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>pain relief extra strengt</i> TABS 500mg	\$0(3)	NM; *
<i>pain relief regular stren</i> TABS 325mg	\$0(3)	NM; *
<i>pain reliever plus</i>	\$0(3)	NM; *
<i>pharbetol</i> TABS 325mg	\$0(3)	NM; *
<i>pharbetol extra strength</i> TABS 500mg	\$0(3)	NM; *
<i>qc arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>qc aspirin</i> TABS 325mg	\$0(3)	NM; *
<i>qc aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>qc chewable aspirin low d</i> CHEW 81mg	\$0(3)	NM; *
<i>qc enteric aspirin</i> TBEC 325mg	\$0(3)	NM; *
<i>qc headache relief</i>	\$0(3)	NM; *
<i>qc non-aspirin childrens</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>qc non-aspirin extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>qc pain relief</i> TABS 325mg	\$0(3)	NM; *
<i>qc pain relief childrens</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>qc pain relief extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>sm 8 hour pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>sm arthritis pain relief</i> TBCR 650mg	\$0(3)	NM; *
<i>sm arthritis pain relieve</i> TBCR 650mg	\$0(3)	NM; *
<i>sm aspirin</i> TABS 325mg	\$0(3)	NM; *
<i>sm aspirin adult low stre</i> CHEW 81mg; TBEC 81mg	\$0(3)	NM; *
<i>sm aspirin ec low strengt</i> TBEC 81mg	\$0(3)	NM; *
<i>sm aspirin enteric coated</i> TBEC 325mg	\$0(3)	NM; *
<i>sm aspirin low dose</i> CHEW 81mg	\$0(3)	NM; *
<i>sm childrens aspirin</i> CHEW 81mg	\$0(3)	NM; *
<i>sm migraine relief</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>sm pain & fever childrens</i> SUSP 80mg/2.5ml, 160mg/5ml	\$0(3)	NM; *
<i>sm pain & fever infants</i> SUSP 160mg/5ml	\$0(3)	NM; *
<i>sm pain relief extra stre</i> TABS 500mg	\$0(3)	NM; *
<i>sm pain reliever</i> TABS 325mg	\$0(3)	NM; *
<i>sm pain reliever extra st</i> TABS 500mg; TBCR 650mg	\$0(3)	NM; *
<i>tri-buffered aspirin</i>	\$0(3)	NM; *
NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION		
<i>all day pain relief</i> TABS 220mg	\$0(3)	NM; *
<i>all day relief</i> TABS 220mg	\$0(3)	NM; *
<i>celecoxib</i> CAPS 50mg	\$0(1)	QL (240 caps / 30 days)
<i>celecoxib</i> CAPS 100mg	\$0(1)	QL (120 caps / 30 days)
<i>celecoxib</i> CAPS 200mg	\$0(1)	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	\$0(1)	QL (30 caps / 30 days)
<i>childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>diclofenac potassium</i> TABS 50mg	\$0(1)	QL (120 tabs / 30 days)
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	\$0(1)	
<i>diflunisal</i> TABS 500mg	\$0(1)	
<i>ec-naproxen</i> TBEC 375mg	\$0(1)	QL (120 tabs / 30 days)
<i>ec-naproxen</i> TBEC 500mg	\$0(1)	QL (90 tabs / 30 days)
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	\$0(1)	
<i>flurbiprofen</i> TABS 100mg	\$0(1)	
<i>gnp childrens ibuprofen</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>gnp ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>gnp ibuprofen infants</i> SUSP 50mg/1.25ml	\$0(3)	NM; *
<i>gnp ibuprofen junior stre</i> CHEW 100mg	\$0(3)	NM; *
<i>gnp naproxen</i> TABS 220mg	\$0(3)	NM; *
<i>gnp naproxen sodium</i> CAPS 220mg	\$0(3)	NM; *
<i>goodsense ibuprofen</i> CAPS 200mg; TABS 200mg	\$0(3)	NM; *
<i>goodsense ibuprofen child</i> SUSP 100mg/5ml	\$0(3)	NM; *
<i>goodsense ibuprofen infan</i> SUSP 50mg/1.25ml	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>goodsense naproxen sodium TABS 220mg</i>	\$0(3)	NM; *
<i>hm ibuprofen CAPS 200mg; TABS 200mg</i>	\$0(3)	NM; *
<i>hm ibuprofen childrens SUSP 100mg/5ml</i>	\$0(3)	NM; *
<i>hm ibuprofen ib TABS 200mg</i>	\$0(3)	NM; *
<i>hm ibuprofen ib/junior st CHEW 100mg</i>	\$0(3)	NM; *
<i>hm ibuprofen infants SUSP 50mg/1.25ml</i>	\$0(3)	NM; *
<i>hm naproxen sodium CAPS 220mg; TABS 220mg</i>	\$0(3)	NM; *
<i>ibu TABS 600mg, 800mg</i>	\$0(1)	
<i>ibu-200 TABS 200mg</i>	\$0(3)	NM; *
<i>ibuprofen CAPS 200mg; TABS 200mg</i>	\$0(3)	NM; *
<i>ibuprofen SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg</i>	\$0(1)	
<i>ibuprofen childrens SUSP 100mg/5ml</i>	\$0(3)	NM; *
<i>ibuprofen infants SUSP 50mg/1.25ml</i>	\$0(3)	NM; *
<i>ibuprofen infants drops SUSP 50mg/1.25ml</i>	\$0(3)	NM; *
<i>ibuprofen junior strength CHEW 100mg</i>	\$0(3)	NM; *
<i>infants ibuprofen SUSP 50mg/1.25ml</i>	\$0(3)	NM; *
<i>meloxicam TABS 7.5mg, 15mg</i>	\$0(1)	
<i>nabumetone TABS 500mg, 750mg</i>	\$0(1)	
<i>naproxen TABS 250mg, 375mg, 500mg</i>	\$0(1)	
<i>naproxen TBEC 375mg</i>	\$0(1)	QL (120 tabs / 30 days)
<i>naproxen TBEC 500mg</i>	\$0(1)	QL (90 tabs / 30 days)
<i>naproxen sodium CAPS 220mg; TABS 220mg</i>	\$0(3)	NM; *
<i>naproxen sodium TABS 275mg, 550mg</i>	\$0(1)	
<i>piroxicam CAPS 10mg, 20mg</i>	\$0(1)	
<i>qc childrens ibuprofen SUSP 100mg/5ml</i>	\$0(3)	NM; *
<i>qc ibuprofen TABS 200mg</i>	\$0(3)	NM; *
<i>qc ibuprofen ib TABS 200mg</i>	\$0(3)	NM; *
<i>qc naproxen sodium TABS 220mg</i>	\$0(3)	NM; *
<i>sm childrens ibuprofen SUSP 100mg/5ml</i>	\$0(3)	NM; *
<i>sm ibuprofen CAPS 200mg; TABS 200mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sm ibuprofen ib CHEW 100mg; TABS 200mg</i>	\$0(3)	NM; *
<i>sm ibuprofen jr TABS 100mg</i>	\$0(3)	NM; *
<i>sm infants ibuprofen SUSP 50mg/1.25ml</i>	\$0(3)	NM; *
<i>sm naproxen sodium TABS 220mg</i>	\$0(3)	NM; *
<i>sulindac TABS 150mg, 200mg</i>	\$0(1)	
<i>OPIOID ANALGESICS, LONG-ACTING</i>		
<i>buprenorphine PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr</i>	\$0(1)	QL (4 patches / 28 days), PA
<i>fentanyl PT72 12mcg/hr, 25mcg/hr, 50mcg/hr, 75mcg/hr, 100mcg/hr</i>	\$0(1)	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate T24A 20mg, 30mg, 40mg, 60mg</i>	\$0(1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate T24A 80mg, 100mg, 120mg</i>	\$0(2)	QL (30 tabs / 30 days), PA
<i>HYSINGLA ER T24A 20mg, 30mg, 40mg, 60mg, 80mg, 100mg, 120mg</i>	\$0(2)	QL (30 tabs / 30 days), PA
<i>methadone hcl SOLN 5mg/5ml, 10mg/5ml</i>	\$0(1)	QL (450 mL / 30 days), PA
<i>methadone hcl TABS 5mg, 10mg</i>	\$0(1)	QL (90 tabs / 30 days), PA
<i>methadone hydrochloride i CONC 10mg/ml</i>	\$0(1)	QL (90 mL / 30 days), PA
<i>morphine sulfate TBCR 15mg, 30mg, 60mg, 100mg, 200mg</i>	\$0(1)	QL (90 tabs / 30 days), PA
<i>OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 80mg</i>	\$0(2)	QL (60 tabs / 30 days), PA
<i>OPIOID ANALGESICS, SHORT-ACTING</i>		
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>	\$0(1)	QL (2700 mL / 30 days)
<i>acetaminophen w/ codeine tab 300-15 mg</i>	\$0(1)	QL (400 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-30 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>acetaminophen w/ codeine tab 300-60 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>butorphanol tartrate SOLN 1mg/ml, 2mg/ml</i>	\$0(2)	
<i>endocet tab 2.5-325mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>endocet tab 5-325mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>endocet tab 7.5-325mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>endocet tab 10-325mg</i>	\$0(1)	QL (180 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
fentanyl citrate LPOP 200mcg	\$0(1)	QL (120 lozenges / 30 days), PA
fentanyl citrate LPOP 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg	\$0(2)	NDS, QL (120 lozenges / 30 days), PA
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	\$0(1)	QL (2700 mL / 30 days)
hydrocodone-acetaminophen tab 5-325 mg	\$0(1)	QL (240 tabs / 30 days)
hydrocodone-acetaminophen tab 7.5-325 mg	\$0(1)	QL (180 tabs / 30 days)
hydrocodone-acetaminophen tab 10-325 mg	\$0(1)	QL (180 tabs / 30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	\$0(1)	QL (150 tabs / 30 days)
hydromorphone hcl LIQD 1mg/ml	\$0(1)	QL (600 mL / 30 days)
hydromorphone hcl TABS 2mg, 4mg, 8mg	\$0(1)	QL (180 tabs / 30 days)
morphine sulfate SOLN 1mg/ml, 4mg/ml, 8mg/ml, 10mg/ml	\$0(2)	B/D
MORPHINE SULFATE SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml	\$0(2)	B/D
morphine sulfate SOLN 10mg/5ml, 20mg/5ml	\$0(1)	QL (900 mL / 30 days)
morphine sulfate SOLN 100mg/5ml	\$0(1)	QL (180 mL / 30 days)
morphine sulfate TABS 15mg, 30mg	\$0(1)	QL (180 tabs / 30 days)
nalbuphine hcl SOLN 10mg/ml, 20mg/ml	\$0(2)	
oxycodone hcl CAPS 5mg	\$0(1)	QL (180 caps / 30 days)
oxycodone hcl CONC 100mg/5ml	\$0(1)	QL (180 mL / 30 days)
oxycodone hcl SOLN 5mg/5ml	\$0(1)	QL (900 mL / 30 days)
oxycodone hcl TABS 5mg, 10mg, 15mg, 20mg, 30mg	\$0(1)	QL (180 tabs / 30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg	\$0(1)	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 5-325 mg	\$0(1)	QL (360 tabs / 30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg	\$0(1)	QL (240 tabs / 30 days)
oxycodone w/ acetaminophen tab 10-325 mg	\$0(1)	QL (180 tabs / 30 days)
tramadol hcl TABS 50mg	\$0(1)	QL (240 tabs / 30 days)
tramadol-acetaminophen tab 37.5-325 mg	\$0(1)	QL (240 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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ANESTHETICS - DRUGS FOR NUMBING

LOCAL ANESTHETICS

<i>lidocaine hcl (local anesth.)</i>	SOLN .5%, 1%, 1.5%, 2%	\$0(1)	B/D
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ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole</i>	TABS 200mg	\$0(2)	NDS
<i>amikacin sulfate</i>	SOLN 1gm/4ml, 500mg/2ml	\$0(1)	
<i>atovaquone</i>	SUSP 750mg/5ml	\$0(1)	
<i>aztreonam</i>	SOLR 1gm, 2gm	\$0(1)	
<i>CAYSTON</i>	SOLR 75mg	\$0(2)	NDS, NM, LA, PA
<i>clindamycin hcl</i>	CAPS 75mg, 150mg, 300mg	\$0(1)	
<i>clindamycin palmitate hydrochloride</i>	SOLR 75mg/5ml	\$0(1)	
<i>clindamycin phosphate</i>	SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml, 9000mg/60ml	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i>	<i>300 mg/50ml</i>	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i>	<i>600 mg/50ml</i>	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i>	<i>900 mg/50ml</i>	\$0(1)	
<i>CLINDMYC/NAC INJ</i>	300/50ML	\$0(2)	
<i>CLINDMYC/NAC INJ</i>	600/50ML	\$0(2)	
<i>CLINDMYC/NAC INJ</i>	900/50ML	\$0(2)	
<i>colistimethate sodium</i>	SOLR 150mg	\$0(1)	
<i>dapsone</i>	TABS 25mg, 100mg	\$0(1)	
<i>DAPTOMYCIN</i>	SOLR 350mg	\$0(2)	NDS
<i>daptomycin</i>	SOLR 350mg, 500mg	\$0(2)	NDS
<i>EMVERM CHEW</i>	100mg	\$0(2)	NDS, QL (12 tabs / year)
<i>ertapenem sodium</i>	SOLR 1gm	\$0(1)	
<i>gentamicin in saline inj</i>	0.8 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i>	1 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i>	1.2 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i>	1.6 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i>	2 mg/ml	\$0(1)	
<i>gentamicin sulfate</i>	SOLN 10mg/ml, 40mg/ml	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>imipenem-cilastatin intravenous for soln 250 mg</i>	\$0(1)	
<i>imipenem-cilastatin intravenous for soln 500 mg</i>	\$0(1)	
<i>ivermectin TABS 3mg</i>	\$0(1)	
<i>linezolid SOLN 600mg/300ml</i>	\$0(1)	
<i>linezolid SUSR 100mg/5ml</i>	\$0(2)	NDS, QL (1800 mL / 30 days)
<i>linezolid TABS 600mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>linezolid in sodium chloride iv soln 600 mg/300ml-0.9%</i>	\$0(1)	
<i>meropenem SOLR 1gm, 500mg</i>	\$0(1)	
<i>methenamine hippurate TABS 1gm</i>	\$0(1)	
<i>metronidazole TABS 250mg, 500mg</i>	\$0(1)	
<i>metronidazole in nacl 0.79% iv soln 500 mg/100ml</i>	\$0(1)	
<i>neomycin sulfate TABS 500mg</i>	\$0(1)	
<i>nitazoxanide TABS 500mg</i>	\$0(2)	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal CAPS 50mg, 100mg</i>	\$0(2)	
<i>nitrofurantoin monohyd macro CAPS 100mg</i>	\$0(2)	
<i>paromomycin sulfate CAPS 250mg</i>	\$0(1)	
<i>pentamidine isethionate inh SOLR 300mg</i>	\$0(1)	B/D
<i>pentamidine isethionate inj SOLR 300mg</i>	\$0(1)	
<i>praziquantel TABS 600mg</i>	\$0(1)	
<i>SIVEXTRO SOLR 200mg; TABS 200mg</i>	\$0(2)	NDS
<i>streptomycin sulfate SOLR 1gm</i>	\$0(1)	
<i>SULFADIAZINE TABS 500mg</i>	\$0(2)	
<i>sulfamethoxazole-trimethoprim iv soln 400-80 mg/5ml</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab 400-80 mg</i>	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab 800-160 mg</i>	\$0(1)	
<i>SYNERCID INJ 500MG</i>	\$0(2)	NDS
<i>tobramycin NEBU 300mg/5ml</i>	\$0(2)	NDS, NM, PA
<i>tobramycin sulfate SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>trimethoprim</i> TABS 100mg	\$0(1)	
<i>vancomycin hcl</i> CAPS 125mg	\$0(1)	QL (80 caps / 180 days)
<i>vancomycin hcl</i> CAPS 250mg	\$0(1)	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 5gm, 10gm, 500mg, 750mg	\$0(1)	
VANCOMYCIN INJ 1 GM	\$0(2)	
VANCOMYCIN INJ 500MG	\$0(2)	
VANCOMYCIN INJ 750MG	\$0(2)	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
ABELCET SUSP 5mg/ml	\$0(2)	B/D
AMBISOME SUSR 50mg	\$0(2)	NDS, B/D
<i>amphotericin b</i> SOLR 50mg	\$0(1)	B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	\$0(1)	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg, 100mg, 150mg, 200mg	\$0(1)	
<i>fluconazole</i> in nacl 0.9% inj 200 mg/100ml	\$0(1)	
<i>fluconazole</i> in nacl 0.9% inj 400 mg/200ml	\$0(1)	
<i>flucytosine</i> CAPS 250mg, 500mg	\$0(2)	NDS, PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	\$0(1)	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	\$0(1)	
<i>itraconazole</i> CAPS 100mg	\$0(1)	PA
<i>ketoconazole</i> TABS 200mg	\$0(1)	PA
<i>micafungin sodium</i> SOLR 50mg, 100mg	\$0(2)	NDS
NOXAFIL SUSP 40mg/ml	\$0(2)	NDS, QL (630 mL / 30 days), PA
<i>nystatin</i> TABS 500000unit	\$0(1)	
<i>posaconazole</i> TBEC 100mg	\$0(2)	NDS, QL (93 tabs / 30 days), PA
<i>terbinafine hcl</i> TABS 250mg	\$0(1)	QL (90 tabs / year)
<i>voriconazole</i> SOLR 200mg; SUSR 40mg/ml	\$0(2)	NDS, PA
<i>voriconazole</i> TABS 50mg	\$0(1)	QL (480 tabs / 30 days), PA
<i>voriconazole</i> TABS 200mg	\$0(1)	QL (120 tabs / 30 days), PA
ANTIMALARIALS - DRUGS TO TREAT MALARIA		
<i>atovaquone-proguanil hcl</i> tab 62.5-25 mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>atovaquone-proguanil hcl tab 250-100 mg</i>	\$0(1)	
<i>chloroquine phosphate TABS 250mg, 500mg</i>	\$0(1)	
<i>COARTEM TAB 20-120MG</i>	\$0(2)	
<i>mefloquine hcl TABS 250mg</i>	\$0(1)	
<i>primaquine phosphate TABS 26.3mg</i>	\$0(1)	
<i>PRIMAQUINE PHOSPHATE TABS 26.3mg</i>	\$0(2)	
<i>quinine sulfate CAPS 324mg</i>	\$0(1)	PA

ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS

INFECTION

<i>abacavir sulfate SOLN 20mg/ml; TABS 300mg</i>	\$0(1)	
<i>APTIVUS CAPS 250mg</i>	\$0(2)	NDS
<i>atazanavir sulfate CAPS 150mg, 200mg, 300mg</i>	\$0(1)	
<i>EDURANT TABS 25mg</i>	\$0(2)	NDS
<i>efavirenz CAPS 50mg, 200mg; TABS 600mg</i>	\$0(1)	
<i>emtricitabine CAPS 200mg</i>	\$0(1)	
<i>EMTRIVA SOLN 10mg/ml</i>	\$0(2)	
<i>etravirine TABS 100mg, 200mg</i>	\$0(2)	NDS
<i>fosamprenavir calcium TABS 700mg</i>	\$0(2)	NDS
<i>FUZEON SOLR 90mg</i>	\$0(2)	NDS
<i>INTELENCE TABS 25mg</i>	\$0(2)	
<i>INVIRASE TABS 500mg</i>	\$0(2)	NDS
<i>ISENTRESS CHEW 25mg; PACK 100mg</i>	\$0(2)	
<i>ISENTRESS CHEW 100mg; TABS 400mg</i>	\$0(2)	NDS
<i>ISENTRESS HD TABS 600mg</i>	\$0(2)	NDS
<i>lamivudine SOLN 10mg/ml; TABS 150mg, 300mg</i>	\$0(1)	
<i>LEXIVA SUSP 50mg/ml</i>	\$0(2)	
<i>nevirapine SUSP 50mg/5ml; TABS 200mg; TB24 100mg, 400mg</i>	\$0(1)	
<i>NORVIR PACK 100mg; SOLN 80mg/ml</i>	\$0(2)	
<i>PIFELTRO TABS 100mg</i>	\$0(2)	NDS
<i>PREZISTA SUSP 100mg/ml</i>	\$0(2)	NDS, QL (400 mL / 30 days)
<i>PREZISTA TABS 75mg</i>	\$0(2)	QL (480 tabs / 30 days)
<i>PREZISTA TABS 150mg</i>	\$0(2)	NDS, QL (240 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PREZISTA TABS 600mg	\$0(2)	NDS, QL (60 tabs / 30 days)
PREZISTA TABS 800mg	\$0(2)	NDS, QL (30 tabs / 30 days)
REYATAZ PACK 50mg <i>ritonavir</i> TABS 100mg	\$0(2) \$0(1)	NDS
RUKOBIA TB12 600mg	\$0(2)	NDS
SELZENTRY SOLN 20mg/ml; TABS 75mg, 150mg, 300mg	\$0(2)	NDS
SELZENTRY TABS 25mg <i>tenofovir disoproxil fumarate</i> TABS 300mg	\$0(2) \$0(1)	
TIVICAY TABS 10mg TIVICAY TABS 25mg, 50mg	\$0(2)	NDS
TIVICAY PD TBSO 5mg	\$0(2)	
TROGARZO SOLN 200mg/1.33ml	\$0(2)	NDS, LA
TYBOST TABS 150mg	\$0(2)	
VIRACEPT TABS 250mg, 625mg	\$0(2)	NDS
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	\$0(2)	NDS
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml; TABS 300mg	\$0(1)	

**ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS
HIV/AIDS INFECTION**

<i>abacavir sulfate-lamivudine</i> tab 600-300 mg	\$0(1)	
<i>abacavir sulfate-lamivudine-zidovudine</i> tab 300-150-300 mg	\$0(2)	NDS
BIKTARVY TAB	\$0(2)	NDS
CIMDUO TAB 300-300	\$0(2)	NDS
COMPLERA TAB	\$0(2)	NDS
DELSTRIGO TAB	\$0(2)	NDS
DESCOVY TAB 200/25MG	\$0(2)	NDS
DOVATO TAB 50-300MG	\$0(2)	NDS
<i>efavirenz-emtricitabine-tenofovir df</i> tab 600-200-300 mg	\$0(2)	NDS
<i>efavirenz-lamivudine-tenofovir df</i> tab 400-300-300 mg	\$0(2)	NDS
<i>efavirenz-lamivudine-tenofovir df</i> tab 600-300-300 mg	\$0(2)	NDS
<i>emtricitabine-tenofovir disoproxil fumarate</i> tab 100-150 mg	\$0(2)	NDS, QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i>	\$0(2)	NDS, QL (30 tabs / 30 days)
EVOTAZ TAB 300-150	\$0(2)	NDS
GENVOYA TAB	\$0(2)	NDS
JULUCA TAB 50-25MG	\$0(2)	NDS
<i>lamivudine-zidovudine tab 150-300 mg</i>	\$0(1)	
<i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>	\$0(1)	
<i>lopinavir-ritonavir tab 100-25 mg</i>	\$0(1)	
<i>lopinavir-ritonavir tab 200-50 mg</i>	\$0(2)	NDS
ODEFSEY TAB	\$0(2)	NDS
PREZCOBIX TAB 800-150	\$0(2)	NDS
STRIBILD TAB	\$0(2)	NDS
SYMTUZA TAB	\$0(2)	NDS
TEMIXYS TAB 300-300	\$0(2)	NDS
TRIUMEQ TAB	\$0(2)	NDS
ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS		
cycloserine CAPS 250mg	\$0(2)	NDS
ethambutol hcl TABS 100mg, 400mg	\$0(1)	
isoniazid SYRP 50mg/5ml; TABS 100mg, 300mg	\$0(1)	
PASER PACK 4gm	\$0(2)	
PRIFTIN TABS 150mg	\$0(2)	
pyrazinamide TABS 500mg	\$0(1)	
rifabutin CAPS 150mg	\$0(1)	
rifampin CAPS 150mg, 300mg; SOLR 600mg	\$0(1)	
SIRTURO TABS 20mg, 100mg	\$0(2)	NDS, LA, PA
TRECATOR TABS 250mg	\$0(2)	
ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS		
acyclovir CAPS 200mg; SUSP 200mg/5ml; TABS 400mg, 800mg	\$0(1)	
acyclovir sodium SOLN 50mg/ml	\$0(1)	B/D
adefovir dipivoxil TABS 10mg	\$0(2)	NDS
BARACLUDE SOLN .05mg/ml	\$0(2)	NDS
entecavir TABS .5mg, 1mg	\$0(1)	
EPCLUSA TAB 200-50MG	\$0(2)	NDS, NM, PA
EPCLUSA TAB 400-100	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
EPIVIR HBV SOLN 5mg/ml	\$0(2)	
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	\$0(1)	
<i>ganciclovir sodium</i> SOLR 500mg	\$0(1)	B/D
HARVONI PAK 33.75-150MG	\$0(2)	NDS, NM, PA
HARVONI PAK 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 90-400MG	\$0(2)	NDS, NM, PA
<i>lamivudine (hbv)</i> TABS 100mg	\$0(1)	
MAVYRET TAB 100-40MG	\$0(2)	NDS, NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	\$0(1)	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	\$0(1)	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	\$0(1)	QL (1080 mL / year)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	\$0(2)	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	\$0(2)	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	\$0(2)	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	\$0(1)	NM
<i>rimantadine hydrochloride</i> TABS 100mg	\$0(1)	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	\$0(1)	
<i>valganciclovir hcl</i> SOLR 50mg/ml	\$0(2)	NDS
<i>valganciclovir hcl</i> TABS 450mg	\$0(1)	
VEMLIDY TABS 25mg	\$0(2)	NDS, PA
VOSEVI TAB	\$0(2)	NDS, NM, PA
XOFLUZA TBPK 40mg	\$0(2)	QL (2 tabs / 180 days)
XOFLUZA TBPK 80mg	\$0(2)	QL (1 tab / 180 days)
CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS		
<i>cefaclor</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml, 375mg/5ml	\$0(1)	
CEFACLOR ER TB12 500mg	\$0(2)	
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml	\$0(1)	
CEFAZOLIN INJ 1GM/50ML	\$0(2)	
<i>cefazin sodium</i> SOLR 1gm, 10gm, 500mg	\$0(1)	
CEFAZOLIN SOLN 2GM/100ML-4%	\$0(2)	
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)	
<i>cefepime hcl</i> SOLR 1gm, 2gm	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<u>cefixime</u> SUSR 100mg/5ml, 200mg/5ml	\$0(1)	
<u>cefoxitin sodium</u> SOLR 1gm, 2gm, 10gm	\$0(1)	
<u>cefpodoxime proxetil</u> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	\$0(1)	
<u>cefprozil</u> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	\$0(1)	
<u>ceftazidime</u> SOLR 1gm, 2gm, 6gm	\$0(1)	
<u>CEFTAZIDIME/ SOL D5W 1GM</u>	\$0(2)	
<u>CEFTAZIDIME/ SOL D5W 2GM</u>	\$0(2)	
<u>ceftriaxone sodium</u> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	\$0(1)	
<u>cefuroxime axetil</u> TABS 250mg, 500mg	\$0(1)	
<u>cefuroxime sodium</u> SOLR 1.5gm, 7.5gm, 750mg	\$0(1)	
<u>cephalexin</u> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)	
<u>tazicef</u> SOLR 1gm, 2gm, 6gm	\$0(1)	
<u>TEFLARO</u> SOLR 400mg, 600mg	\$0(2)	NDS
ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS		
<u>azithromycin</u> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml; TABS 250mg, 500mg, 600mg	\$0(1)	
<u>clarithromycin</u> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg; TB24 500mg	\$0(1)	
<u>DIFICID</u> SUSR 40mg/ml; TABS 200mg	\$0(2)	NDS
<u>ery-tab</u> TBEC 250mg, 333mg, 500mg	\$0(1)	
<u>ERYTHROCIN LACTOBIONATE</u> SOLR 500mg	\$0(2)	NDS
<u>erythrocin stearate</u> TABS 250mg	\$0(1)	
<u>erythromycin base</u> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	\$0(1)	
<u>erythromycin ethylsuccinate</u> TABS 400mg	\$0(1)	
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
<u>CIPRO</u> SUSR 500mg/5ml	\$0(2)	
<u>ciprofloxacin 200 mg/100ml in d5w</u>	\$0(1)	
<u>ciprofloxacin 400 mg/200ml in d5w</u>	\$0(1)	
<u>ciprofloxacin hcl</u> TABS 100mg, 250mg, 500mg, 750mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<u>levofloxacin SOLN 25mg/ml; TABS 250mg, 500mg, 750mg</u>	\$0(1)	
<u>levofloxacin in d5w iv soln 250 mg/50ml</u>	\$0(1)	
<u>levofloxacin in d5w iv soln 500 mg/100ml</u>	\$0(1)	
<u>levofloxacin in d5w iv soln 750 mg/150ml</u>	\$0(1)	
<u>moxifloxacin hcl TABS 400mg</u>	\$0(1)	
PENICILLINS - DRUGS TO TREAT INFECTIONS		
<u>amoxicillin CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate chew tab 200-28.5 mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate chew tab 400-57 mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate for susp 200-28.5 mg/5ml</u>	\$0(1)	
<u>amoxicillin & k clavulanate for susp 250-62.5 mg/5ml</u>	\$0(1)	
<u>amoxicillin & k clavulanate for susp 400-57 mg/5ml</u>	\$0(1)	
<u>amoxicillin & k clavulanate for susp 600-42.9 mg/5ml</u>	\$0(1)	
<u>amoxicillin & k clavulanate tab 250-125 mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate tab 500-125 mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate tab 875-125 mg</u>	\$0(1)	
<u>amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg</u>	\$0(1)	
<u>ampicillin CAPS 500mg</u>	\$0(1)	
<u>ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm</u>	\$0(1)	
<u>ampicillin & sulbactam sodium for inj 3 (2-1) gm</u>	\$0(1)	
<u>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</u>	\$0(1)	
<u>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</u>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0(1)	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	\$0(1)	
<i>BICILLIN L-A SUSP 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	\$0(2)	
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	\$0(1)	
<i>nafcillin sodium SOLR 1gm, 2gm</i>	\$0(1)	
<i>nafcillin sodium SOLR 10gm</i>	\$0(2)	NDS
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	\$0(1)	
<i>PEN GK/DEXTR INJ 40000/ML</i>	\$0(2)	
<i>PEN GK/DEXTR INJ 60000/ML</i>	\$0(2)	
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>PENICILLIN G PROCAINE SUSP 600000unit/ml</i>	\$0(2)	
<i>penicillin g sodium SOLR 5000000unit</i>	\$0(1)	
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg</i>	\$0(1)	
<i>pizerpen SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0(1)	
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
<i>doxy 100 SOLR 100mg</i>	\$0(1)	
<i>doxycycline (monohydrate) CAPS 50mg, 100mg; TABS 50mg, 75mg, 100mg</i>	\$0(1)	
<i>doxycycline hyclate CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg</i>	\$0(1)	
<i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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<i>monodoxine nl</i> CAPS 100mg	\$0(1)	
<i>tetracycline hcl</i> CAPS 250mg, 500mg	\$0(1)	PA
<i>tigecycline</i> SOLR 50mg	\$0(1)	
TIGECYCLINE SOLR 50mg	\$0(2)	NDS

ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER

ALKYLATING AGENTS

BENDEKA SOLN 100mg/4ml	\$0(2)	NDS, B/D
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	\$0(1)	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	\$0(1)	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg	\$0(1)	B/D, NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml	\$0(2)	NDS, B/D
<i>cyclophosphamide</i> SOLR 1gm, 2gm, 500mg	\$0(2)	NDS, B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	\$0(2)	B/D
LEUKERAN TABS 2mg	\$0(2)	
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml	\$0(1)	B/D
<i>oxaliplatin</i> SOLR 50mg, 100mg	\$0(2)	NDS, B/D
<i>paraplatin</i> SOLN 1000mg/100ml	\$0(1)	B/D

ANTIBIOTICS

<i>adriamycin</i> SOLN 2mg/ml	\$0(1)	B/D
<i>doxorubicin hcl</i> SOLN 2mg/ml	\$0(1)	B/D
<i>doxorubicin hcl liposomal</i> INJ 2mg/ml	\$0(2)	NDS, B/D
<i>epirubicin hcl</i> SOLN 50mg/25ml, 200mg/100ml	\$0(1)	B/D

ANTIMETABOLITES

ALIMTA SOLR 100mg, 500mg	\$0(2)	NDS, B/D
<i>azacitidine</i> SUSR 100mg	\$0(2)	NDS, B/D
<i>cytarabine</i> SOLN 20mg/ml	\$0(1)	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	\$0(1)	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	\$0(1)	B/D
INQOVI TAB 35-100MG	\$0(2)	NDS, NM, LA, PA
LONSURF TAB 15-6.14	\$0(2)	NDS, NM, PA
LONSURF TAB 20-8.19	\$0(2)	NDS, NM, PA
<i>mercaptopurine</i> TABS 50mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	\$0(1)	B/D
ONUREG TABS 200mg, 300mg	\$0(2)	NDS, NM, LA, PA
PURIXAN SUSP 2000mg/100ml	\$0(2)	NDS
TABLOID TABS 40mg	\$0(2)	
HORMONAL ANTINEOPLASTIC AGENTS		
<i>abiraterone acetate</i> TABS 250mg, 500mg	\$0(2)	NDS, NM, PA
<i>anastrozole</i> TABS 1mg	\$0(1)	
<i>bicalutamide</i> TABS 50mg	\$0(1)	
EMCYT CAPS 140mg	\$0(2)	NDS
ERLEADA TABS 60mg	\$0(2)	NDS, NM, LA, PA
<i>exemestane</i> TABS 25mg	\$0(1)	
<i>flutamide</i> CAPS 125mg	\$0(1)	
<i>fulvestrant</i> SOLN 250mg/5ml	\$0(2)	NDS, B/D
<i>letrozole</i> TABS 2.5mg	\$0(1)	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	\$0(1)	PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	\$0(2)	NDS, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	\$0(2)	NDS, PA
LYSODREN TABS 500mg	\$0(2)	NDS
<i>megestrol acetate</i> TABS 20mg, 40mg	\$0(2)	
<i>nilutamide</i> TABS 150mg	\$0(2)	NDS
NUBEQA TABS 300mg	\$0(2)	NDS, NM, LA, PA
ORGOVYX TABS 120mg	\$0(2)	NDS, NM, LA, PA
SOLTAMOX SOLN 10mg/5ml	\$0(2)	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	\$0(1)	
<i>toremifene citrate</i> TABS 60mg	\$0(2)	NDS
TRELSTAR MIXJECT SUSR 3.75mg, 11.25mg	\$0(2)	NDS, PA
XTANDI CAPS 40mg	\$0(2)	NDS, NM, LA, PA
XTANDI TABS 40mg, 80mg	\$0(2)	NDS, LA, PA
IMMUNOMODULATORS		
POMALYST CAPS 1mg, 2mg	\$0(2)	NDS, QL (21 caps / 21 days), NM, LA, PA
POMALYST CAPS 3mg, 4mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
REVLIMID CAPS 2.5mg, 5mg, 10mg, 15mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, LA, PA
REVLIMID CAPS 20mg, 25mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
THALOMID CAPS 50mg, 100mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, PA
THALOMID CAPS 150mg, 200mg	\$0(2)	NDS, QL (56 caps / 28 days), NM, PA
MISCELLANEOUS		
<i>bexarotene</i> CAPS 75mg	\$0(2)	NDS, NM, PA
<i>hydroxyurea</i> CAPS 500mg	\$0(1)	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	\$0(1)	B/D
KISQALI 200 PAK FEMARA	\$0(2)	NDS, QL (49 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	\$0(2)	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	\$0(2)	NDS, QL (91 tabs / 28 days), NM, PA
MATULANE CAPS 50mg	\$0(2)	NDS, NM, LA
SYNRIBO SOLR 3.5mg	\$0(2)	NDS, PA
<i>tretinoin (chemotherapy)</i> CAPS 10mg	\$0(2)	NDS
MITOTIC INHIBITORS		
ABRAXANE INJ 100MG	\$0(2)	NDS, B/D
<i>docetaxel</i> CONC 20mg/ml	\$0(1)	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
<i>etoposide</i> SOLN 100mg/5ml, 500mg/25ml	\$0(1)	B/D
<i>paclitaxel</i> CONC 30mg/5ml, 100mg/16.7ml, 150mg/25ml, 300mg/50ml	\$0(1)	B/D
<i>toposar</i> SOLN 1gm/50ml, 100mg/5ml	\$0(1)	B/D
<i>vincristine sulfate</i> SOLN 1mg/ml	\$0(1)	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	\$0(1)	B/D
MOLECULAR TARGET AGENTS		
AFINITOR TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
AFINITOR DISPERZ TBSO 2mg	\$0(2)	NDS, QL (150 tabs / 30 days), NM, PA
AFINITOR DISPERZ TBSO 3mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
AFINITOR DISPERZ TBSO 5mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
ALECENSA CAPS 150mg	\$0(2)	NDS, NM, LA, PA
ALUNBRIG TABS 30mg, 90mg, 180mg	\$0(2)	NDS, NM, LA, PA
ALUNBRIG PAK	\$0(2)	NDS, NM, LA, PA
AVASTIN SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, LA, PA
AYVAKIT TABS 25mg, 50mg	\$0(2)	NDS, QL (30 tabs / 30 days), LA, PA
AYVAKIT TABS 100mg, 200mg, 300mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
BALVERSA TABS 3mg, 4mg, 5mg	\$0(2)	NDS, NM, LA, PA
BORTEZOMIB SOLR 3.5mg	\$0(2)	NDS, PA
BOSULIF TABS 100mg, 400mg, 500mg	\$0(2)	NDS, NM, PA
BRAFTOVI CAPS 75mg	\$0(2)	NDS, LA, PA
BRUKINSA CAPS 80mg	\$0(2)	NDS, NM, LA, PA
CABOMETYX TABS 20mg, 40mg, 60mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
CALQUENCE CAPS 100mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
CAPRELSA TABS 100mg, 300mg	\$0(2)	NDS, NM, LA, PA
COMETRIQ (60MG DOSE) KIT 20mg	\$0(2)	NDS, NM, LA, PA
COMETRIQ KIT 100MG	\$0(2)	NDS, NM, LA, PA
COMETRIQ KIT 140MG	\$0(2)	NDS, NM, LA, PA
COPIKTRA CAPS 15mg, 25mg	\$0(2)	NDS, NM, LA, PA
COTELLIC TABS 20mg	\$0(2)	NDS, NM, LA, PA
DAURISMO TABS 25mg, 100mg	\$0(2)	NDS, NM, LA, PA
ERIVEDGE CAPS 150mg	\$0(2)	NDS, NM, LA, PA
<i>erlotinib hcl</i> TABS 25mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 100mg, 150mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
everolimus TABS 2.5mg, 5mg, 7.5mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
FARYDAK CAPS 10mg, 15mg, 20mg	\$0(2)	NDS, NM, LA, PA
FOTIVDA CAPS .89mg, 1.34mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
GAVRETO CAPS 100mg	\$0(2)	NDS, NM, LA, PA
GILOTRIF TABS 20mg, 30mg, 40mg	\$0(2)	NDS, NM, LA, PA
HERCEP HYLEC SOL 60-10000	\$0(2)	NDS, PA
HERCEPTIN SOLR 150mg	\$0(2)	NDS, PA
HERZUMA SOLR 150mg, 420mg	\$0(2)	NDS, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
IBRANCE CAPS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, LA, PA
IBRANCE TABS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, LA, PA
ICLUSIG TABS 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), LA, PA
ICLUSIG TABS 15mg, 45mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
ICLUSIG TABS 30mg	\$0(2)	NDS, QL (30 tabs / 30 days), LA, PA
IDHIFA TABS 50mg, 100mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>imatinib mesylate</i> TABS 100mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
IMBRUVICA CAPS 140mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, LA, PA
IMBRUVICA TABS 140mg, 280mg, 420mg, 560mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
INLYTA TABS 1mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, LA, PA
INLYTA TABS 5mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
INREBIC CAPS 100mg	\$0(2)	NDS, NM, LA, PA
IRESSA TABS 250mg	\$0(2)	NDS, NM, LA, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
KADCYLA SOLR 100mg, 160mg	\$0(2)	NDS, B/D
KANJINTI SOLR 150mg, 420mg	\$0(2)	NDS, PA
KEYTRUDA SOLN 100mg/4ml	\$0(2)	NDS, PA
KISQALI 200 DOSE TBPK 200mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	\$0(2)	NDS, QL (42 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	\$0(2)	NDS, QL (63 tabs / 28 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	\$0(2)	NDS, NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LENVIMA 10 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 14 MG	\$0(2)	NDS, QL (60 caps / 30 days), NM, LA, PA
LENVIMA CAP 18 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LENVIMA CAP 24 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
LORBRENA TABS 25mg, 100mg	\$0(2)	NDS, NM, LA, PA
LUMAKRAS TABS 120mg	\$0(2)	NDS, NM, LA, PA
LYNPARZA TABS 100mg, 150mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
MEKINIST TABS .5mg, 2mg	\$0(2)	NDS, NM, LA, PA
MEKTOVI TABS 15mg	\$0(2)	NDS, LA, PA
MONJUVI SOLR 200mg	\$0(2)	NDS, LA, PA
MVASI SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, LA, PA
NERLYNX TABS 40mg	\$0(2)	NDS, NM, LA, PA
NEXAVAR TABS 200mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	\$0(2)	NDS, QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	\$0(2)	NDS, NM, LA, PA
OGIVRI SOLR 150mg	\$0(2)	NDS, PA
OGIVRI INJ 420MG	\$0(2)	NDS, PA
ONTRUZANT SOLR 150mg, 420mg	\$0(2)	NDS, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	\$0(2)	NDS, NM, LA, PA
PHESGO SOL	\$0(2)	NDS, NM, LA, PA
PIQRAY 200MG DAILY DOSE TBPK 200mg	\$0(2)	NDS, NM, PA
PIQRAY 250MG TAB DOSE	\$0(2)	NDS, NM, PA
PIQRAY 300MG DAILY DOSE TBPK 150mg	\$0(2)	NDS, NM, PA
QINLOCK TABS 50mg	\$0(2)	NDS, NM, LA, PA
RETEVMO CAPS 40mg, 80mg	\$0(2)	NDS, NM, LA, PA
RIABNI SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, LA, PA
RITUXAN SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, LA, PA
RITUXAN INJ HYCELA	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ROZLYTREK CAPS 100mg, 200mg	\$0(2)	NDS, NM, LA, PA
RUBRACA TABS 200mg, 250mg, 300mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
RUXIENCE SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, PA
RYDAPT CAPS 25mg	\$0(2)	NDS, NM, PA
SPRYCEL TABS 20mg, 50mg, 70mg, 80mg, 100mg, 140mg	\$0(2)	NDS, NM, PA
STIVARGA TABS 40mg	\$0(2)	NDS, NM, LA, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	\$0(2)	NDS, NM, PA
TAFINLAR CAPS 50mg, 75mg	\$0(2)	NDS, NM, LA, PA
TAGRISSO TABS 40mg, 80mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
TALZENNA CAPS 1mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
TALZENNA CAPS .25mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
TASIGNA CAPS 50mg, 150mg, 200mg	\$0(2)	NDS, NM, PA
TAZVERIK TABS 200mg	\$0(2)	NDS, NM, LA, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	\$0(2)	NDS, LA, PA
TEPMETKO TABS 225mg	\$0(2)	NDS, NM, LA, PA
TIBSOVO TABS 250mg	\$0(2)	NDS, NM, LA, PA
TRAZIMERA SOLR 150mg, 420mg	\$0(2)	NDS, PA
TRUSELTIQ 50 MG DAILY DOSE CPPK 25mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 75 MG DAILY DOSE CPPK 25mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 100 MG DAILY DOSE CPPK 100mg	\$0(2)	NDS, NM, LA, PA
TRUSELTIQ 125 MG DAILY DOSE	\$0(2)	NDS, LA, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	\$0(2)	NDS, NM, LA, PA
TURALIO CAPS 200mg	\$0(2)	NDS, NM, LA, PA
UKONIQ TABS 200mg	\$0(2)	NDS, NM, LA, PA
VELCADE SOLR 3.5mg	\$0(2)	NDS, PA
VENCLEXTA TABS 10mg	\$0(2)	QL (112 tabs / 28 days), NM, LA, PA
VENCLEXTA TABS 50mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
VENCLEXTA TABS 100mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, LA, PA
VENCLEXTA TAB START PK	\$0(2)	NDS, QL (42 tabs / 28 days), NM, LA, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA
VITRAKVI CAPS 25mg, 100mg; SOLN 20mg/ml	\$0(2)	NDS, NM, LA, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	\$0(2)	NDS, NM, LA, PA
VOTRIENT TABS 200mg	\$0(2)	NDS, NM, LA, PA
XALKORI CAPS 200mg, 250mg	\$0(2)	NDS, NM, LA, PA
XOSPATA TABS 40mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG ONCE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 40 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 40 MG TWICE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 60 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 60 MG ONCE WEEKLY TBPK 60mg	\$0(2)	NDS, LA, PA
XPOVIO 60 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 80 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 80 MG ONCE WEEKLY TBPK 40mg	\$0(2)	NDS, LA, PA
XPOVIO 80 MG TWICE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 100 MG ONCE WEEKLY TBPK 20mg	\$0(2)	NDS, NM, LA, PA
XPOVIO 100 MG ONCE WEEKLY TBPK 50mg	\$0(2)	NDS, LA, PA
ZEJULA CAPS 100mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, LA, PA
ZELBORA TABS 240mg	\$0(2)	NDS, NM, LA, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, PA
ZOLINZA CAPS 100mg	\$0(2)	NDS, NM, PA
ZYDELIG TABS 100mg, 150mg	\$0(2)	NDS, NM, LA, PA
ZYKADIA TABS 150mg	\$0(2)	NDS, NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
PROTECTIVE AGENTS		
<i>leucovorin calcium SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg</i>	\$0(1)	B/D
<i>leucovorin calcium TABS 5mg, 10mg, 15mg, 25mg</i>	\$0(1)	
<i>MESNEX TABS 400mg</i>	\$0(2)	NDS
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		
ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>BENAZEPRIL & HYDROCHLOROTHIAZIDE TAB 5- 6.25MG</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	\$0(1)	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	\$0(1)	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>lisinopril & hydrochlorothiazide tab 10- 12.5 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>lisinopril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>lisinopril & hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>quinapril-hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>benazepril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	\$0(1)	
<i>captopril TABS 12.5mg, 25mg, 50mg, 100mg</i>	\$0(1)	
<i>enalapril maleate TABS 2.5mg, 5mg, 10mg, 20mg</i>	\$0(1)	
<i>fosinopril sodium TABS 10mg, 20mg, 40mg</i>	\$0(1)	
<i>lisinopril TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg</i>	\$0(1)	
<i>moexipril hcl TABS 7.5mg, 15mg</i>	\$0(1)	
<i>perindopril erbumine TABS 2mg, 4mg, 8mg</i>	\$0(1)	
<i>quinapril hcl TABS 5mg, 10mg, 20mg, 40mg</i>	\$0(1)	
<i>ramipril CAPS 1.25mg, 2.5mg, 5mg, 10mg</i>	\$0(1)	
<i>trandolapril TABS 1mg, 2mg, 4mg</i>	\$0(1)	
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>eplerenone TABS 25mg, 50mg</i>	\$0(1)	
<i>spironolactone TABS 25mg, 50mg, 100mg</i>	\$0(1)	
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>doxazosin mesylate TABS 1mg, 2mg, 4mg, 8mg</i>	\$0(1)	
<i>prazosin hcl CAPS 1mg, 2mg, 5mg</i>	\$0(1)	
<i>terazosin hcl CAPS 1mg, 2mg, 5mg, 10mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE</i>		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5- 160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5- 320 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10- 160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10- 320 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan- hydrochlorothiazide tab 5-160-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan- hydrochlorothiazide tab 5-160-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan- hydrochlorothiazide tab 10-160-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan- hydrochlorothiazide tab 10-160-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine-valsartan- hydrochlorothiazide tab 10-320-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil- hydrochlorothiazide tab 16-12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil- hydrochlorothiazide tab 32-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil- hydrochlorothiazide tab 32-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ENTRESTO TAB 24-26MG</i>	\$0(2)	
<i>ENTRESTO TAB 49-51MG</i>	\$0(2)	
<i>ENTRESTO TAB 97-103MG</i>	\$0(2)	
<i>irbesartan-hydrochlorothiazide tab 150- 12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300- 12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<u>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</u>	\$0(1)	
<u>losartan potassium & hydrochlorothiazide tab 100-25 mg</u>	\$0(1)	
<u>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 20-5-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-5-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-5-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-10-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>olmesartanamlodipine-hydrochlorothiazide tab 40-10-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 40-5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 40-10 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 80-5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanamlodipine tab 80-10 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 40-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 80-12.5 mg</u>	\$0(1)	QL (60 tabs / 30 days)
<u>telmisartanhydrochlorothiazide tab 80-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 80-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 160-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 160-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 320-12.5 mg</u>	\$0(1)	QL (30 tabs / 30 days)
<u>valsartanhydrochlorothiazide tab 320-25 mg</u>	\$0(1)	QL (30 tabs / 30 days)
ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<u>candesartan cilexetil TABS 4mg, 8mg, 16mg</u>	\$0(1)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>candesartan cilexetil</i> TABS 32mg	\$0(1)	QL (30 tabs / 30 days)
<i>irbesartan</i> TABS 75mg, 150mg, 300mg	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>olmesartan medoxomil</i> TABS 5mg	\$0(1)	QL (60 tabs / 30 days)
<i>olmesartan medoxomil</i> TABS 20mg, 40mg	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan</i> TABS 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan</i> TABS 40mg, 80mg, 160mg	\$0(1)	QL (60 tabs / 30 days)
<i>valsartan</i> TABS 320mg	\$0(1)	QL (30 tabs / 30 days)

ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM

<i>amiodarone hcl</i> SOLN 50mg/ml, 900mg/18ml; TABS 100mg, 200mg, 400mg	\$0(1)
<i>disopyramide phosphate</i> CAPS 100mg, 150mg	\$0(2)
<i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg	\$0(1)
<i>flecainide acetate</i> TABS 50mg, 100mg, 150mg	\$0(1)
<i>MULTAQ</i> TABS 400mg	\$0(2)
<i>NORPACE CR</i> CP12 100mg, 150mg	\$0(2)
<i>pacerone</i> TABS 100mg, 200mg, 400mg	\$0(1)
<i>propafenone hcl</i> CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg	\$0(1)
<i>quinidine sulfate</i> TABS 200mg, 300mg	\$0(1)
<i>sorine</i> TABS 80mg, 120mg, 160mg, 240mg	\$0(1)
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	\$0(1)
<i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg	\$0(1)

ANTILIPIDEMICS, FIBRATES

<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	\$0(1)
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	\$0(1)
<i>gemfibrozil</i> TABS 600mg	\$0(1)

ANTILIPIDEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL

<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	\$0(1)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg	\$0(1)	QL (30 tabs / 30 days)
<i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)

***ANTI-LIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH
CHOLESTEROL***

<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
<i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg	\$0(1)	
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm; TABS 1gm	\$0(1)	
<i>ezetimibe</i> TABS 10mg	\$0(1)	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg	\$0(1)	QL (60 tabs / 30 days)
<i>PRALUENT</i> SOAJ 75mg/ml, 150mg/ml	\$0(2)	PA
<i>prevalite</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
<i>VASCEPA</i> CAPS .5gm, 1gm	\$0(2)	

***BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH
BLOOD PRESSURE AND HEART CONDITIONS***

<i>atenolol & chlorthalidone tab 50-25 mg</i>	\$0(1)	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 5- 6.25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 10- 6.25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>acebutolol hcl</i> CAPS 200mg, 400mg	\$0(1)	
<i>atenolol</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>betaxolol hcl</i> TABS 10mg, 20mg	\$0(1)	
<i>bisoprolol fumarate</i> TABS 5mg, 10mg	\$0(1)	
<i>BYSTOLIC</i> TABS 2.5mg, 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days)
<i>BYSTOLIC</i> TABS 20mg	\$0(2)	QL (60 tabs / 30 days)
<i>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg	\$0(1)	
<i>labetalol hcl</i> TABS 100mg, 200mg, 300mg	\$0(1)	
<i>metoprolol succinate</i> TB24 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>metoprolol tartrate</i> SOLN 5mg/5ml; TABS 25mg, 50mg, 100mg	\$0(1)	
<i>nadolol</i> TABS 20mg, 40mg, 80mg	\$0(1)	
<i>pindolol</i> TABS 5mg, 10mg	\$0(1)	
<i>propranolol hcl</i> CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg	\$0(1)	
<i>timolol maleate</i> TABS 5mg, 10mg, 20mg	\$0(1)	

CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS

<i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg	\$0(1)
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	\$0(1)
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	\$0(1)
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 30mg, 60mg, 90mg, 120mg	\$0(1)
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	\$0(1)
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	\$0(1)
<i>isradipine</i> CAPS 2.5mg, 5mg	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>nicardipine hcl</i> CAPS 20mg, 30mg	\$0(1)	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	\$0(1)	
<i>nimodipine</i> CAPS 30mg	\$0(1)	
<i>NYMALIZE</i> SOLN 6mg/ml	\$0(2)	NDS
<i>taztia xt</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	\$0(1)	
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)	
<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	\$0(1)	
DIURETICS - DRUGS TO TREAT HEART CONDITIONS		
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	\$0(1)	
<i>amiloride & hydrochlorothiazide tab 5-</i> <i>50 mg</i>	\$0(1)	
<i>amiloride hcl</i> TABS 5mg	\$0(1)	
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	\$0(1)	
<i>chlorthalidone</i> TABS 25mg, 50mg	\$0(1)	
<i>furosemide</i> SOLN 8mg/ml, 10mg/ml; TABS 20mg, 40mg, 80mg	\$0(1)	
<i>furosemide inj</i> SOLN 10mg/ml	\$0(1)	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	\$0(1)	
<i>indapamide</i> TABS 1.25mg, 2.5mg	\$0(1)	
<i>methazolamide</i> TABS 25mg, 50mg	\$0(1)	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	
<i>spironolactone & hydrochlorothiazide</i> <i>tab 25-25 mg</i>	\$0(1)	
<i>torsemide</i> TABS 5mg, 10mg, 20mg, 100mg	\$0(1)	
<i>triamterene & hydrochlorothiazide cap</i> <i>37.5-25 mg</i>	\$0(1)	
<i>triamterene & hydrochlorothiazide tab</i> <i>37.5-25 mg</i>	\$0(1)	
<i>triamterene & hydrochlorothiazide tab</i> <i>75-50 mg</i>	\$0(1)	
MISCELLANEOUS		
<i>ADRENALIN</i> SOLN 1mg/ml	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>aliskiren fumarate</i> TABS 150mg, 300mg	\$0(1)	
<i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr	\$0(1)	
<i>clonidine hcl</i> TABS .1mg, .2mg, .3mg	\$0(1)	
CORLANOR SOLN 5mg/5ml; TABS 5mg, 7.5mg	\$0(2)	
<i>digitek</i> TABS .125mg, .25mg	\$0(1)	QL (30 tabs / 30 days)
<i>digox</i> TABS 125mcg, 250mcg	\$0(1)	QL (30 tabs / 30 days)
<i>digoxin</i> SOLN .05mg/ml, .25mg/ml	\$0(1)	
<i>digoxin</i> TABS 125mcg, 250mcg	\$0(1)	QL (30 tabs / 30 days)
<i>droxidopa</i> CAPS 100mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
<i>droxidopa</i> CAPS 200mg, 300mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
<i>guanfacine hcl</i> TABS 1mg, 2mg	\$0(2)	PA; PA if 70 years and older
<i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg	\$0(1)	
METHYLDOPA TABS 250mg, 500mg	\$0(2)	PA; PA if 70 years and older
<i>metyrosine</i> CAPS 250mg	\$0(2)	NDS, PA
<i>midodrine hcl</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	
<i>minoxidil</i> TABS 2.5mg, 10mg	\$0(1)	
<i>ranolazine</i> TB12 500mg, 1000mg	\$0(1)	

NITRATES - DRUGS TO TREAT HEART CONDITIONS

<i>isosorbide dinitrate</i> TABS 5mg, 10mg, 20mg, 30mg	\$0(1)
<i>isosorbide mononitrate</i> TABS 10mg, 20mg; TB24 30mg, 60mg, 120mg	\$0(1)
<i>minitran</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr	\$0(1)
NITRO-BID OINT 2%	\$0(2)
<i>nitroglycerin</i> PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; SOLN .4mg/spray; SUBL .3mg, .4mg, .6mg	\$0(1)

PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT

PULMONARY HYPERTENSION

ADEMPAS TABS .5mg, 1mg, 1.5mg, 2mg, 2.5mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, LA, PA
<i>ambrisentan</i> TABS 5mg, 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
bosentan TABS 62.5mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, LA, PA
bosentan TABS 125mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
OPSUMIT TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	\$0(1)	QL (90 tabs / 30 days), NM, PA
treprostинil SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	\$0(2)	NDS, NM, LA, PA
VENTAVIS SOLN 10mcg/ml, 20mcg/ml	\$0(2)	NDS, NM, PA

CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS

ANTIANXIETY - DRUGS TO TREAT ANXIETY

alprazolam TABS .25mg, .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
buspirone hcl TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	\$0(1)	
fluvoxamine maleate TABS 25mg, 50mg, 100mg	\$0(1)	
lorazepam CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)
lorazepam SOLN 2mg/ml, 4mg/ml	\$0(1)	
lorazepam TABS .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
lorazepam intensol CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)

ANTICONVULSANTS - DRUGS TO TREAT SEIZURES

APTIOM TABS 200mg, 400mg, 600mg, 800mg	\$0(2)	NDS, QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
BRIVIACT SOLN 50mg/5ml	\$0(2)	PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
carbamazepine CHEW 100mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg	\$0(1)	
CELONTIN CAPS 300mg	\$0(2)	
clobazam SUSP 2.5mg/ml	\$0(1)	QL (480 mL / 30 days), PA
clobazam TABS 10mg, 20mg	\$0(1)	QL (60 tabs / 30 days), PA
clonazepam TABS 2mg; TBDP 2mg	\$0(1)	QL (300 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>clonazepam</i> TABS .5mg, 1mg; TBDP .125mg, .25mg, .5mg, 1mg	\$0(1)	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	\$0(1)	QL (180 tabs / 30 days), PA; PA if 65 years and older
DIACOMIT CAPS 250mg	\$0(2)	NDS, QL (360 caps / 30 days), NM, LA, PA
DIACOMIT CAPS 500mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, LA, PA
DIACOMIT PACK 250mg	\$0(2)	NDS, QL (360 packets / 30 days), NM, LA, PA
DIACOMIT PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, LA, PA
<i>diazepam</i> CONC 5mg/ml	\$0(1)	QL (240 mL / 30 days), PA; PA if 65 years and older
<i>diazepam</i> SOLN 5mg/5ml	\$0(1)	QL (1200 mL / 30 days), PA; PA if 65 years and older
<i>diazepam</i> TABS 2mg, 5mg, 10mg	\$0(1)	QL (120 tabs / 30 days), PA; PA if 65 years and older
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	\$0(1)	
<i>diazepam inj</i> SOLN 5mg/ml	\$0(1)	
DILANTIN CAPS 30mg, 100mg	\$0(2)	
DILANTIN INFATABS CHEW 50mg	\$0(2)	
DILANTIN-125 SUSP 125mg/5ml	\$0(2)	
<i>divalproex sodium</i> CSDR 125mg; TB24 250mg, 500mg; TBEC 125mg, 250mg, 500mg	\$0(1)	
EPIDIOLEX SOLN 100mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), NM, LA, PA
<i>epitol</i> TABS 200mg	\$0(1)	
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	\$0(1)	
<i>felbamate</i> SUSP 600mg/5ml	\$0(2)	NDS
<i>felbamate</i> TABS 400mg, 600mg	\$0(1)	
FINTEPLA SOLN 2.2mg/ml	\$0(2)	NDS, QL (360 mL / 30 days), LA, PA
FYCOMPA SUSP .5mg/ml	\$0(2)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TABS 2mg	\$0(2)	QL (60 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
FYCOMPA TABS 4mg, 6mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
FYCOMPA TABS 8mg, 10mg, 12mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA
<i>gabapentin</i> CAPS 100mg	\$0(1)	QL (1080 caps / 30 days)
<i>gabapentin</i> CAPS 300mg	\$0(1)	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	\$0(1)	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml	\$0(1)	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	\$0(1)	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	\$0(1)	QL (120 tabs / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg; TABS 25mg, 100mg, 150mg, 200mg; TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	\$0(1)	
<i>levetiracetam</i> SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg; TB24 500mg, 750mg	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 500 mg/100ml	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 1000 mg/100ml	\$0(1)	
<i>levetiracetam</i> in sodium chloride iv soln 1500 mg/100ml	\$0(1)	
NAYZILAM SOLN 5mg/0.1ml	\$0(2)	
oxcarbazepine SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	\$0(1)	
<i>phenobarbital</i> ELIX 20mg/5ml; TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	\$0(2)	PA; PA if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	\$0(2)	PA; PA if 70 years and older
PHENYTEK CAPS 200mg, 300mg	\$0(2)	
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	\$0(1)	
<i>phenytoin sodium</i> SOLN 50mg/ml	\$0(1)	
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	\$0(1)	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	\$0(1)	QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	\$0(1)	QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	\$0(1)	QL (60 caps / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>pregabalin</i> SOLN 20mg/ml	\$0(1)	QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 250mg	\$0(1)	
<i>roweepra</i> TABS 500mg	\$0(1)	
<i>rufinamide</i> SUSP 40mg/ml	\$0(2)	NDS, QL (2300 mL / 28 days), PA
<i>rufinamide</i> TABS 200mg	\$0(2)	NDS, QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	\$0(2)	NDS, QL (240 tabs / 30 days), PA
<i>SPRITAM</i> TB3D 250mg	\$0(2)	QL (360 tabs / 30 days)
<i>SPRITAM</i> TB3D 500mg	\$0(2)	QL (180 tabs / 30 days)
<i>SPRITAM</i> TB3D 750mg	\$0(2)	QL (120 tabs / 30 days)
<i>SPRITAM</i> TB3D 1000mg	\$0(2)	QL (90 tabs / 30 days)
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	\$0(1)	
<i>SYMPAZAN</i> FILM 5mg	\$0(2)	QL (60 films / 30 days), PA
<i>SYMPAZAN</i> FILM 10mg, 20mg	\$0(2)	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	\$0(1)	
<i>topiramate</i> CPSP 15mg, 25mg; TABS 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	\$0(1)	
<i>valproic acid</i> CAPS 250mg	\$0(1)	
<i>VALTOCO</i> LIQD 5mg/0.1ml, 10mg/0.1ml; LQPK 7.5mg/0.1ml, 10mg/0.1ml	\$0(2)	
<i>vigabatrin</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), LA, PA
<i>vigabatrin</i> TABS 500mg	\$0(2)	NDS, QL (180 tabs / 30 days), LA, PA
<i>vigadroner</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), LA, PA
<i>VIMPAT</i> SOLN 10mg/ml	\$0(2)	NDS, QL (1200 mL / 30 days)
<i>VIMPAT</i> SOLN 200mg/20ml	\$0(2)	NDS
<i>VIMPAT</i> TABS 50mg	\$0(2)	QL (120 tabs / 30 days)
<i>VIMPAT</i> TABS 100mg, 150mg, 200mg	\$0(2)	NDS, QL (60 tabs / 30 days)
<i>XCOPRI</i> TABS 50mg	\$0(2)	NDS, QL (90 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
XCOPRI TABS 100mg, 150mg, 200mg	\$0(2)	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	\$0(2)	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0(2)	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	\$0(2)	NDS, QL (28 tabs / 28 days)
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	\$0(1)	
ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS		
<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	\$0(1)	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	\$0(1)	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	\$0(1)	
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	\$0(1)	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg	\$0(1)	PA; PA if < 30 yrs
<i>memantine hcl</i> tab 28 x 5 mg & 21 x 10 mg titration pack	\$0(2)	PA; PA if < 30 yrs
NAMZARIC CAP 7-10MG	\$0(2)	
NAMZARIC CAP 14-10MG	\$0(2)	
NAMZARIC CAP 21-10MG	\$0(2)	
NAMZARIC CAP 28-10MG	\$0(2)	
NAMZARIC CAP PACK	\$0(2)	
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	\$0(1)	QL (30 patches / 30 days)
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg	\$0(1)	QL (90 caps / 30 days)
<i>rivastigmine tartrate</i> CAPS 4.5mg, 6mg	\$0(1)	QL (60 caps / 30 days)
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION		
<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	\$0(2)	
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<u>bupropion hcl</u> TABS 75mg, 100mg; TB12 100mg, 150mg, 200mg; TB24 150mg, 300mg	\$0(1)	
<u>citalopram hydrobromide</u> SOLN 10mg/5ml; TABS 10mg, 20mg, 40mg	\$0(1)	
<u>clomipramine hcl</u> CAPS 25mg, 50mg, 75mg	\$0(2)	PA
<u>desipramine hcl</u> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	\$0(2)	
<u>desvenlafaxine succinate</u> TB24 25mg, 50mg, 100mg	\$0(1)	QL (30 tabs / 30 days), PA
<u>doxepin hcl</u> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	\$0(2)	
<u>DRIZALMA SPRINKLE</u> CSDR 20mg, 30mg, 40mg, 60mg	\$0(2)	QL (60 caps / 30 days), PA
<u>duloxetine hcl</u> CPEP 20mg, 30mg, 60mg	\$0(1)	QL (60 caps / 30 days)
<u>EMSAM</u> PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	\$0(2)	NDS, QL (30 patches / 30 days), PA
<u>escitalopram oxalate</u> SOLN 5mg/5ml; TABS 5mg, 10mg, 20mg	\$0(1)	
<u>FETZIMA</u> CP24 20mg, 40mg	\$0(2)	QL (60 caps / 30 days), PA
<u>FETZIMA</u> CP24 80mg, 120mg	\$0(2)	QL (30 caps / 30 days), PA
<u>FETZIMA CAP TITRATIO</u>	\$0(2)	PA
<u>fluoxetine hcl</u> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	\$0(1)	
<u>imipramine hcl</u> TABS 10mg, 25mg, 50mg	\$0(2)	
<u>MARPLAN</u> TABS 10mg	\$0(2)	QL (180 tabs / 30 days)
<u>mirtazapine</u> TABS 7.5mg, 15mg, 30mg, 45mg; TBDP 15mg, 30mg, 45mg	\$0(1)	
<u>nefazodone hcl</u> TABS 50mg, 100mg, 150mg, 200mg, 250mg	\$0(1)	
<u>nortriptyline hcl</u> CAPS 10mg, 25mg, 50mg, 75mg; SOLN 10mg/5ml	\$0(2)	
<u>paroxetine hcl</u> TABS 10mg, 20mg, 30mg, 40mg	\$0(2)	
<u>PAXIL</u> SUSP 10mg/5ml	\$0(2)	QL (900 mL / 30 days), PA
<u>phenelzine sulfate</u> TABS 15mg	\$0(1)	
<u>protriptyline hcl</u> TABS 5mg, 10mg	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>sertraline hcl</i> CONC 20mg/ml; TABS 25mg, 50mg, 100mg	\$0(1)	
<i>tranylcypromine sulfate</i> TABS 10mg	\$0(1)	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	\$0(1)	
<i>trimipramine maleate</i> CAPS 25mg	\$0(2)	QL (240 caps / 30 days)
<i>trimipramine maleate</i> CAPS 50mg	\$0(2)	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	\$0(2)	QL (60 caps / 30 days)
<i>TRINTELLIX</i> TABS 5mg	\$0(2)	QL (120 tabs / 30 days)
<i>TRINTELLIX</i> TABS 10mg	\$0(2)	QL (60 tabs / 30 days)
<i>TRINTELLIX</i> TABS 20mg	\$0(2)	QL (30 tabs / 30 days)
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg; TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	\$0(1)	
<i>VIIBRYD</i> TABS 10mg, 20mg, 40mg	\$0(2)	QL (30 tabs / 30 days)
<i>VIIBRYD</i> KIT STARTER	\$0(2)	

ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS

DISEASE

<i>amantadine hcl</i> CAPS 100mg	\$0(1)	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml; TABS 100mg	\$0(1)	
<i>benztropine mesylate</i> SOLN 1mg/ml	\$0(1)	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	\$0(2)	PA; PA if 70 years and older
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	\$0(1)	
CARB/LEVO ORALLY DISINTEGRATING TAB 10-100MG	\$0(1)	
CARB/LEVO ORALLY DISINTEGRATING TAB 25-100MG	\$0(1)	
CARB/LEVO ORALLY DISINTEGRATING TAB 25-250MG	\$0(1)	
<i>carbidopa & levodopa</i> tab 10-100 mg	\$0(1)	
<i>carbidopa & levodopa</i> tab 25-100 mg	\$0(1)	
<i>carbidopa & levodopa</i> tab 25-250 mg	\$0(1)	
<i>carbidopa & levodopa</i> tab er 25-100 mg	\$0(1)	
<i>carbidopa & levodopa</i> tab er 50-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone</i> tabs 12.5-50-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone</i> tabs 18.75-75-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone</i> tabs 25-100-200 mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</i>	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs 50-200-200 mg</i>	\$0(1)	
<i>entacapone TABS 200mg KYNMOBI FILM 10mg, 15mg, 20mg, 25mg, 30mg</i>	\$0(1) \$0(2)	NDS, QL (150 films / 30 days), NM, PA
<i>NEUPRO PT24 1mg/24hr, 2mg/24hr, 3mg/24hr, 4mg/24hr, 6mg/24hr, 8mg/24hr</i>	\$0(2)	
<i>pramipexole dihydrochloride TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg</i>	\$0(1)	
<i>rasagiline mesylate TABS 1mg rasagiline mesylate TABS .5mg</i>	\$0(1) \$0(1)	QL (30 tabs / 30 days) QL (60 tabs / 30 days)
<i>ropinirole hydrochloride TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg</i>	\$0(1)	
<i>selegiline hcl CAPS 5mg; TABS 5mg</i>	\$0(1)	
<i>trihexyphenidyl hcl SOLN .4mg/ml; TABS 2mg, 5mg</i>	\$0(2)	PA; PA if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
<i>ABILIFY MAINTENA PRSY 300mg, 400mg</i>	\$0(2)	NDS, QL (1 syringe / 28 days)
<i>ABILIFY MAINTENA SRER 300mg, 400mg</i>	\$0(2)	NDS, QL (1 injection / 28 days)
<i>ariPIPRAZOLE SOLN 1mg/ml</i>	\$0(1)	QL (900 mL / 30 days)
<i>ariPIPRAZOLE TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ariPIPRAZOLE TBDP 10mg, 15mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml</i>	\$0(2)	NDS, QL (1 syringe / 28 days)
<i>ARISTADA PRSY 1064mg/3.9ml</i>	\$0(2)	NDS, QL (1 syringe / 56 days)
<i>ARISTADA INITIO PRSY 675mg/2.4ml</i>	\$0(2)	NDS
<i>asenapine maleate SUBL 2.5mg, 5mg, 10mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>CAPLYTA CAPS 42mg</i>	\$0(2)	QL (30 caps / 30 days), PA
<i>chlorpromazine hcl SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
CHLORPROMAZINE HYDROCHLOR CONC 30mg/ml, 100mg/ml	\$0(2)	
<i>clozapine</i> TABS 25mg, 50mg	\$0(1)	
<i>clozapine</i> TABS 100mg	\$0(1)	QL (270 tabs / 30 days)
<i>clozapine</i> TABS 200mg	\$0(1)	QL (135 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	\$0(1)	PA
<i>clozapine</i> TBDP 100mg	\$0(1)	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	\$0(1)	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	\$0(2)	NDS, QL (135 tabs / 30 days), PA
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
FANAPT PAK	\$0(2)	PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	\$0(1)	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	\$0(1)	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	\$0(1)	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	\$0(1)	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	\$0(1)	
INVEGA SUSTENNA SUSY 39mg/0.25ml	\$0(2)	QL (1 syringe / 28 days)
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	\$0(2)	NDS, QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.875ml, 410mg/1.315ml, 546mg/1.75ml, 819mg/2.625ml	\$0(2)	NDS, QL (1 syringe / 90 days)
LATUDA TABS 20mg, 40mg, 60mg, 120mg	\$0(2)	QL (30 tabs / 30 days)
LATUDA TABS 80mg	\$0(2)	QL (60 tabs / 30 days)
<i>loxpipamine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	\$0(1)	
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	\$0(1)	
NUPLAZID CAPS 34mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
NUPLAZID TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA
<i>olanzapine</i> SOLR 10mg	\$0(1)	QL (3 vials / 1 day)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg; TBDP 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg; TBDP 5mg, 15mg, 20mg	\$0(1)	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	\$0(1)	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	\$0(1)	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	\$0(1)	
PERSERIS PRSY 90mg, 120mg	\$0(2)	NDS, QL (1 syringe / 30 days)
<i>pimozide</i> TABS 1mg, 2mg	\$0(1)	
<i>quetiapine fumarate</i> TABS 25mg, 50mg, 100mg, 200mg, 300mg, 400mg	\$0(1)	
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	\$0(1)	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	\$0(2)	QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	\$0(2)	QL (60 tabs / 30 days)
RISPERDAL CONSTA SRER 12.5mg, 25mg	\$0(2)	QL (2 injections / 28 days)
RISPERDAL CONSTA SRER 37.5mg, 50mg	\$0(2)	NDS, QL (2 injections / 28 days)
<i>risperidone</i> SOLN 1mg/ml	\$0(1)	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	\$0(1)	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg, 4mg	\$0(1)	QL (60 tabs / 30 days)
<i>risperidone</i> TBDP .25mg, .5mg	\$0(1)	QL (90 tabs / 30 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	\$0(2)	QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	\$0(1)	
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	\$0(1)	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	\$0(1)	
VERSACLOZ SUSP 50mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	\$0(2)	NDS, QL (60 caps / 30 days), PA
VRAYLAR CAPS 3mg, 4.5mg, 6mg	\$0(2)	NDS, QL (30 caps / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
VRAYLAR CAP 1.5-3MG	\$0(2)	PA
ziprasidone hcl CAPS 20mg, 40mg, 60mg, 80mg	\$0(1)	QL (60 caps / 30 days)
ziprasidone mesylate SOLR 20mg	\$0(1)	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg	\$0(2)	QL (2 vials / 28 days), PA
ZYPREXA RELPREVV SUSR 300mg	\$0(2)	NDS, QL (2 vials / 28 days), PA
ZYPREXA RELPREVV SUSR 405mg	\$0(2)	NDS, QL (1 vial / 28 days), PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

amphetamine-dextroamphetamine cap er 24hr 5 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 10 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 15 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 20 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 25 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine cap er 24hr 30 mg	\$0(1)	QL (30 caps / 30 days), PA
amphetamine-dextroamphetamine tab 5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 7.5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 10 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 12.5 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 15 mg	\$0(1)	QL (60 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 20 mg	\$0(1)	QL (90 tabs / 30 days), PA
amphetamine-dextroamphetamine tab 30 mg	\$0(1)	QL (60 tabs / 30 days), PA
atomoxetine hcl CAPS 10mg, 18mg, 25mg	\$0(1)	QL (120 caps / 30 days)
atomoxetine hcl CAPS 40mg	\$0(1)	QL (60 caps / 30 days)
atomoxetine hcl CAPS 60mg, 80mg, 100mg	\$0(1)	QL (30 caps / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>dexamethylphenidate hcl</i> TABS 2.5mg, 5mg	\$0(1)	QL (120 tabs / 30 days), PA
<i>dexamethylphenidate hcl</i> TABS 10mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd)</i> TB24 1mg, 2mg, 3mg, 4mg	\$0(2)	QL (30 tabs / 30 days), PA; PA if 70 years and older
<i>metadate er</i> TBCR 20mg	\$0(1)	QL (90 tabs / 30 days), PA
<i>methylphenidate hcl</i> SOLN 5mg/5ml	\$0(1)	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl</i> SOLN 10mg/5ml	\$0(1)	QL (900 mL / 30 days), PA
<i>methylphenidate hcl</i> TABS 5mg, 10mg	\$0(1)	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl</i> TABS 20mg; TBCR 10mg, 20mg	\$0(1)	QL (90 tabs / 30 days), PA
HYPNOTICS - DRUGS TO TREAT INSOMNIA		
<i>BELSOMRA</i> TABS 5mg, 10mg, 15mg, 20mg	\$0(2)	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep)</i> TABS 3mg, 6mg	\$0(1)	QL (30 tabs / 30 days)
<i>eszopiclone</i> TABS 1mg, 2mg, 3mg	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>HETLIOZ</i> CAPS 20mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
<i>temazepam</i> CAPS 7.5mg	\$0(1)	QL (30 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam</i> CAPS 15mg	\$0(1)	QL (60 caps / 30 days), PA; PA applies if 65 years and older after a 90 day supply in a calendar year
<i>temazepam</i> CAPS 30mg	\$0(1)	QL (30 caps / 30 days), PA; PA if 65 years and older

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
zaleplon CAPS 5mg, 10mg	\$0(2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
zolpidem tartrate TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year

MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES

AIMOVIG SOAJ 70mg/ml, 140mg/ml	\$0(2)	QL (1 pen / 30 days), PA
dihydroergotamine mesylate SOLN 1mg/ml	\$0(2)	NDS
dihydroergotamine mesylate SOLN 4mg/ml	\$0(2)	NDS, QL (8 mL / 30 days), PA
ergotamine w/ caffeine tab 1-100 mg	\$0(1)	QL (40 tabs / 28 days), PA
naratriptan hcl TABS 1mg, 2.5mg	\$0(1)	QL (12 tabs / 30 days)
rizatriptan benzoate TABS 5mg, 10mg; TBDP 5mg, 10mg	\$0(1)	QL (18 tabs / 30 days)
sumatriptan SOLN 5mg/act	\$0(1)	QL (24 units / 30 days)
sumatriptan SOLN 20mg/act	\$0(1)	QL (12 units / 30 days)
sumatriptan succinate SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	\$0(1)	QL (18 injections / 30 days)
sumatriptan succinate SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	\$0(1)	QL (12 injections / 30 days)
sumatriptan succinate TABS 25mg, 50mg, 100mg	\$0(1)	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	\$0(2)	NDS, QL (16 tabs / 30 days), PA
zolmitriptan TABS 2.5mg, 5mg; TBDP 2.5mg, 5mg	\$0(1)	QL (12 tabs / 30 days)

MISCELLANEOUS

AUSTEDO TABS 6mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
INGREZZA CAPS 40mg, 80mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, LA, PA
INGREZZA CAPS 60mg	\$0(2)	NDS, QL (30 caps / 30 days), LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
INGREZZA CAP 40-80MG	\$0(2)	NDS, QL (28 caps / 28 days), NM, LA, PA
LITHIUM SOLN 8meq/5ml <i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 300mg, 450mg	\$0(2) \$0(1)	
NUEDEXTA CAP 20-10MG <i>pregabalin (once-daily)</i> TB24 82.5mg, 165mg, 330mg <i>pyridostigmine bromide</i> TABS 60mg <i>riluzole</i> TABS 50mg <i>tetrabenazine</i> TABS 12.5mg	\$0(2) \$0(1) \$0(1) \$0(2)	QL (60 caps / 30 days), PA QL (60 tabs / 30 days), PA NDS, QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA

MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS

BETASERON KIT .3mg	\$0(2)	NDS, QL (14 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	\$0(1)	NM, PA
GILENYA CAPS .5mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, PA
<i>glatiramer acetate</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

baclofen TABS 10mg, 20mg	\$0(1)	
carisoprodol TABS 350mg	\$0(2)	QL (120 tabs / 30 days), PA; PA if 70 years and older
cyclobenzaprine hcl TABS 5mg, 10mg	\$0(2)	PA; PA if 70 years and older
dantrolene sodium CAPS 25mg, 50mg, 100mg	\$0(1)	
methocarbamol TABS 500mg, 750mg	\$0(2)	PA; PA if 70 years and older

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>tizanidine hcl</i> TABS 2mg, 4mg	\$0(1)	
<i>vanadom</i> TABS 350mg	\$0(2)	QL (120 tabs / 30 days), PA; PA if 70 years and older
NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS		
<i>armodafinil</i> TABS 50mg	\$0(1)	QL (90 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>XYREM</i> SOLN 500mg/ml	\$0(2)	NDS, QL (540 mL / 30 days), NM, LA, PA
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium</i> TBEC 333mg	\$0(1)	
<i>acetaminophen pm</i>	\$0(3)	NM; *
<i>acetaminophen pm extra st</i>	\$0(3)	NM; *
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	\$0(1)	QL (90 tabs / 30 days), PA
<i>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film 12-3 mg (base equiv)</i>	\$0(1)	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent) TB12 150mg</i>	\$0(1)	
<i>CHANTIX</i> TABS .5mg, 1mg	\$0(2)	QL (56 tabs / 28 days), PA
<i>CHANTIX CONTINUING MONTH</i> TABS 1mg	\$0(2)	QL (56 tabs / 28 days), PA
<i>CHANTIX PAK 0.5& 1MG</i>	\$0(2)	QL (106 tabs / year), PA
<i>disulfiram</i> TABS 250mg, 500mg	\$0(1)	
<i>gnp nicotine gum</i> GUM 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
<i>gnp nicotine polacrilex m</i> LOZG 4mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>gnp nicotine transdermal</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>gnp nighttime sleep aid</i> TABS 25mg	\$0(3)	NM; *
<i>goodsense headache pm</i>	\$0(3)	NM; *
<i>goodsense nicotine</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>goodsense nicotine gum</i> GUM 4mg	\$0(3)	NM; *
<i>goodsense nicotine polacr</i> GUM 2mg, 4mg; LOZG 4mg	\$0(3)	NM; *
<i>goodsense sleeptime</i> CAPS 25mg; LIQD 50mg/30ml	\$0(3)	NM; *
<i>hm nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
<i>hm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>hm nighttime sleep aid</i> TABS 25mg	\$0(3)	NM; *
<i>hm pain reliever pm extra</i>	\$0(3)	NM; *
<i>hm z-sleep</i> LIQD 50mg/30ml	\$0(3)	NM; *
<i>naloxone hcl</i> SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY 2mg/2ml	\$0(1)	
<i>naltrexone hcl</i> TABS 50mg	\$0(1)	
<i>NARCAN</i> LIQD 4mg/0.1ml	\$0(2)	
<i>nicotine</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	NM; *
<i>nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	NM; *
<i>NICOTINE SYS KIT TRANSDER</i>	\$0(3)	NM; *
<i>nicotine transdermal syst</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>NICOTROL INHALER</i> INHA 10mg	\$0(2)	
<i>NICOTROL NS</i> SOLN 10mg/ml	\$0(2)	
<i>night time sleep aid</i> TABS 25mg	\$0(3)	NM; *
<i>nighttime sleep aid</i> TABS 25mg	\$0(3)	NM; *
<i>pain relief pm extra stre</i>	\$0(3)	NM; *
<i>pain reliever pm extra st</i>	\$0(3)	NM; *
<i>qc sleep aid maximum stre</i> CAPS 50mg	\$0(3)	NM; *
<i>sleep aid</i> CAPS 25mg; LIQD 50mg/30ml	\$0(3)	NM; *
<i>sleep tabs</i> TABS 25mg	\$0(3)	NM; *
<i>sleep-aid</i> CAPS 50mg	\$0(3)	NM; *
<i>sm nicotine</i> GUM 4mg; LOZG 2mg	\$0(3)	NM; *
<i>sm nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 4mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	NM; *
<i>sm nighttime sleep aid</i> TABS 25mg	\$0(3)	NM; *
<i>sm pain reliever pm extra</i>	\$0(3)	NM; *
VIVITROL SUSR 380mg	\$0(2)	NDS

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

ANDRODERM PT24 2mg/24hr, 4mg/24hr	\$0(2)	QL (30 patches / 30 days), PA
<i>oxandrolone</i> TABS 2.5mg	\$0(1)	QL (120 tabs / 30 days), PA
<i>oxandrolone</i> TABS 10mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm	\$0(1)	QL (300 gm / 30 days), PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	\$0(1)	PA
<i>testosterone enanthate</i> SOLN 200mg/ml	\$0(1)	PA

ANTIDIABETICS

<i>acarbose</i> TABS 25mg, 50mg, 100mg	\$0(1)	
BYDUREON BCISE AUIJ 2mg/0.85ml	\$0(2)	QL (4 pens / 28 days)
BYETTA SOPN 5mcg/0.02ml, 10mcg/0.04ml	\$0(2)	QL (1 pen / 30 days)
FARXIGA TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	\$0(1)	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 2.5-250 mg	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 2.5-500 mg	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab</i> 5-500 mg	\$0(1)	QL (120 tabs / 30 days)
GLYXAMBI TAB 10-5 MG	\$0(2)	QL (30 tabs / 30 days)
GLYXAMBI TAB 25-5 MG	\$0(2)	QL (30 tabs / 30 days)
JANUMET TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)
JANUMET TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)
JANUMET XR TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
JANUMET XR TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)
JANUMET XR TAB 100-1000	\$0(2)	QL (30 tabs / 30 days)
JANUVIA TABS 25mg, 50mg, 100mg	\$0(2)	QL (30 tabs / 30 days)
JARDIANCE TABS 10mg	\$0(2)	QL (60 tabs / 30 days)
JARDIANCE TABS 25mg	\$0(2)	QL (30 tabs / 30 days)
JENTADUETO TAB 2.5-500	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-850	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
JENTADUETO TAB XR 5-1000MG	\$0(2)	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	\$0(1)	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	\$0(1)	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	\$0(1)	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	\$0(1)	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	\$0(1)	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>nateglinide</i> TABS 60mg, 120mg	\$0(1)	QL (90 tabs / 30 days)
OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN 2mg/1.5ml	\$0(2)	QL (1 pen / 28 days)
OZEMPIC (1MG/DOSE) SOPN 2mg/1.5ml	\$0(2)	QL (2 pens / 28 days)
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	\$0(2)	QL (1 pen / 28 days)
<i>pioglitazone hcl</i> TABS 15mg, 30mg, 45mg	\$0(1)	QL (30 tabs / 30 days)
<i>repaglinide</i> TABS 2mg	\$0(1)	QL (240 tabs / 30 days)
<i>repaglinide</i> TABS .5mg, 1mg	\$0(1)	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	\$0(2)	QL (30 tabs / 30 days)
SYNJARDY TAB 5-500MG	\$0(2)	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0(2)	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	\$0(2)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5- 1000MG	\$0(2)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5- 1000MG	\$0(2)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	\$0(2)	QL (30 tabs / 30 days)
TRULICITY SOPN .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	\$0(2)	QL (4 pens / 28 days)
VICTOZA SOPN 18mg/3ml	\$0(2)	QL (3 pens / 30 days)
XIGDUO XR TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0(2)	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0(2)	QL (30 tabs / 30 days)
<i>ANTIDIABETICS, INSULINS</i>		
BASAGLAR KWIKPEN SOPN 100unit/ml	\$0(2)	
BD ALCOHOL SWABS	\$0(2)	
FIASP FLEX INJ TOUCH	\$0(2)	
FIASP INJ 100/ML	\$0(2)	
FIASP PENFIL INJ U-100	\$0(2)	
GAUZE PADS 2" X 2"	\$0(2)	
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	\$0(2)	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	\$0(2)	NDS
INSULIN SAFETY NEEDLES	\$0(2)	
INSULIN SYRINGES: BD/ULTIMED/ALLISON/TRIVIDIA/MHC	\$0(2)	
LEVEMIR SOLN 100unit/ml	\$0(2)	
LEVEMIR FLEXTOUCH SOPN 100unit/ml	\$0(2)	
NOVOLIN INJ 70/30	\$0(2)	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	\$0(2)	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	\$0(2)	(brand RELION not covered)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
NOVOLOG FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	\$0(2)	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	\$0(2)	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	\$0(2)	(brand RELION not covered)
OMNIPOD KIT STARTER	\$0(2)	QL (1 kit / year), PA
OMNIPOD MIS 5 PACK	\$0(2)	QL (10 pods / 30 days), PA
PEN NEEDLES:	\$0(2)	
NOVO/BD/ULTIMED/OWEN/TRIVIDIA		
SOLIQUA INJ 100/33	\$0(2)	QL (10 pens / 30 days)
TRESIBA SOLN 100unit/ml	\$0(2)	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	\$0(2)	
V-GO 20 KIT	\$0(2)	QL (1 kit / 30 days), PA
V-GO 30 KIT	\$0(2)	QL (1 kit / 30 days), PA
V-GO 40 KIT	\$0(2)	QL (1 kit / 30 days), PA
XULTOPHY INJ 100/3.6	\$0(2)	QL (5 pens / 30 days)
CALCIUM REGULATORS		
alendronate sodium SOLN 70mg/75ml; TABS 10mg, 35mg, 70mg	\$0(1)	
calcitonin (salmon) spray SOLN 200unit/act	\$0(1)	B/D
FORTEO SOPN 620mcg/2.48ml	\$0(2)	NDS, NM, PA
ibandronate sodium TABS 150mg	\$0(1)	B/D
NATPARA CART 25mcg, 50mcg, 75mcg, 100mcg	\$0(2)	NDS, NM, PA
PAMIDRONATE DISODIUM SOLN 6mg/ml	\$0(2)	B/D
pamidronate disodium SOLN 30mg/10ml, 90mg/10ml; SOLR 30mg, 90mg	\$0(1)	B/D
PROLIA SOSY 60mg/ml	\$0(2)	QL (1 syringe / 180 days), NM
risedronate sodium TABS 5mg, 35mg, 150mg; TBEC 35mg	\$0(1)	
XGEVA SOLN 120mg/1.7ml	\$0(2)	NDS, NM, PA
zoledronic acid CONC 4mg/5ml; SOLN 4mg/100ml, 5mg/100ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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CHELATING AGENTS

<u>CHEMET CAPS 100mg</u>	\$0(2)	
<u>deferasirox PACK 90mg, 180mg, 360mg; TABS 90mg, 180mg, 360mg</u>	\$0(2)	NDS, PA
<u>LOKELMA PACK 5gm, 10gm</u>	\$0(2)	
<u>penicillamine TABS 250mg</u>	\$0(2)	NDS
<u>sodium polystyrene sulfonate powder</u>	\$0(1)	
<u>sps SUSP 15gm/60ml</u>	\$0(1)	
<u>trientine hcl CAPS 250mg</u>	\$0(2)	NDS, PA
<u>VELTASSA PACK 8.4gm, 16.8gm, 25.2gm</u>	\$0(2)	PA

CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL

<u>afirmelle</u>	\$0(1)	
<u>altavera</u>	\$0(1)	
<u>alyacen 1/35</u>	\$0(1)	
<u>alyacen 7/7/7</u>	\$0(1)	
<u>amethia</u>	\$0(1)	
<u>apri</u>	\$0(1)	
<u>aranelle</u>	\$0(1)	
<u>ashlyna</u>	\$0(1)	
<u>aubra eq</u>	\$0(1)	
<u>aurovela 1/20</u>	\$0(1)	
<u>aurovela 24 fe</u>	\$0(1)	
<u>aurovela fe 1.5/30</u>	\$0(1)	
<u>aurovela fe 1/20</u>	\$0(1)	
<u>aviane</u>	\$0(1)	
<u>ayuna</u>	\$0(1)	
<u>azurette</u>	\$0(1)	
<u>balziva</u>	\$0(1)	
<u>bekyree</u>	\$0(1)	
<u>blisovi 24 fe</u>	\$0(1)	
<u>blisovi fe 1.5/30</u>	\$0(1)	
<u>briellyn</u>	\$0(1)	
<u>camila TABS .35mg</u>	\$0(1)	
<u>camrese</u>	\$0(1)	
<u>camrese lo</u>	\$0(1)	
<u>caziant</u>	\$0(1)	
<u>chateal</u>	\$0(1)	
<u>cryselle-28</u>	\$0(1)	
<u>cyclafem 1/35</u>	\$0(1)	
<u>cyclafem 7/7/7</u>	\$0(1)	
<u>cyred eq</u>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>dasetta 1/35</i>	\$0(1)	
<i>dasetta 7/7/7</i>	\$0(1)	
<i>daysee</i>	\$0(1)	
<i>deblitane TABS .35mg</i>	\$0(1)	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	\$0(1)	
<i>desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0(1)	
<i>drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg</i>	\$0(1)	
<i>drospirenone-ethinyl estradiol tab 3-0.02 mg</i>	\$0(1)	
<i>drospirenone-ethinyl estradiol tab 3-0.03 mg</i>	\$0(1)	
<i>elinest</i>	\$0(1)	
<i>ELLA TABS 30mg</i>	\$0(2)	
<i>eluryng</i>	\$0(1)	
<i>emoquette</i>	\$0(1)	
<i>enpresse-28</i>	\$0(1)	
<i>enskyce</i>	\$0(1)	
<i>errin TABS .35mg</i>	\$0(1)	
<i>estarylla</i>	\$0(1)	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0(1)	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	\$0(1)	
<i>etonogestrel-ethinyl estradiol va ring 0.120-0.015 mg/24hr</i>	\$0(1)	
<i>falmina</i>	\$0(1)	
<i>fayosim</i>	\$0(1)	
<i>femynor</i>	\$0(1)	
<i>hailey 1.5/30</i>	\$0(1)	
<i>hailey 24 fe</i>	\$0(1)	
<i>heather TABS .35mg</i>	\$0(1)	
<i>iclevia</i>	\$0(1)	
<i>incassia TABS .35mg</i>	\$0(1)	
<i>introvale</i>	\$0(1)	
<i>isibloom</i>	\$0(1)	
<i>jasmiel</i>	\$0(1)	
<i>jolessa</i>	\$0(1)	
<i>juleber</i>	\$0(1)	
<i>junel 1.5/30</i>	\$0(1)	
<i>junel 1/20</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>junel fe 1.5/30</i>	\$0(1)	
<i>junel fe 1/20</i>	\$0(1)	
<i>junel fe 24</i>	\$0(1)	
<i>kaitlib fe</i>	\$0(1)	
<i>kariva</i>	\$0(1)	
<i>kelnor 1/35</i>	\$0(1)	
<i>kelnor 1/50</i>	\$0(1)	
<i>kurvelo</i>	\$0(1)	
<i>larin 1.5/30</i>	\$0(1)	
<i>larin 1/20</i>	\$0(1)	
<i>larin 24 fe</i>	\$0(1)	
<i>larin fe 1.5/30</i>	\$0(1)	
<i>larin fe 1/20</i>	\$0(1)	
<i>larissia</i>	\$0(1)	
<i>layolis fe</i>	\$0(1)	
<i>leena</i>	\$0(1)	
<i>lessina</i>	\$0(1)	
<i>levonest</i>	\$0(1)	
<i>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg</i>	\$0(1)	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorgestrel & ethynodiolide (91-day) tab 0.15-0.03 mg</i>	\$0(1)	
<i>levonorgestrel & ethynodiolide tab 0.1 mg-20 mcg</i>	\$0(1)	
<i>levonorgestrel & ethynodiolide tab 0.15 mg-30 mcg</i>	\$0(1)	
<i>levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg</i>	\$0(1)	
<i>levora 0.15/30-28</i>	\$0(1)	
<i>lillow</i>	\$0(1)	
<i>loestrin 1.5/30-21</i>	\$0(1)	
<i>loestrin 1/20-21</i>	\$0(1)	
<i>loestrin fe 1.5/30</i>	\$0(1)	
<i>loestrin fe 1/20</i>	\$0(1)	
<i>loryna</i>	\$0(1)	
<i>low-ogestrel</i>	\$0(1)	
<i>ltera</i>	\$0(1)	
<i>lyeq TABS .35mg</i>	\$0(1)	
<i>lyza TABS .35mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>marlissa</i>	\$0(1)	
<i>medroxyprogesterone acetate (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml</i>	\$0(1)	
<i>mibelas 24 fe</i>	\$0(1)	
<i>microgestin 1.5/30</i>	\$0(1)	
<i>microgestin 1/20</i>	\$0(1)	
<i>microgestin fe 1.5/30</i>	\$0(1)	
<i>microgestin fe 1/20</i>	\$0(1)	
<i>milki</i>	\$0(1)	
<i>mono-linyah</i>	\$0(1)	
<i>necon 0.5/35-28</i>	\$0(1)	
<i>nikki</i>	\$0(1)	
<i>nora-be TABS .35mg</i>	\$0(1)	
<i>norethindrone & ethynodiol-Fe chew tab 0.4 mg-35 mcg</i>	\$0(1)	
<i>norethindrone & ethynodiol-Fe chew tab 0.8 mg-25 mcg</i>	\$0(1)	
<i>norethindrone (contraceptive) TABS .35mg</i>	\$0(1)	
<i>norethindrone ace & ethynodiol tab 1 mg-20 mcg</i>	\$0(1)	
<i>norethindrone ace & ethynodiol tab 1.5 mg-30 mcg</i>	\$0(1)	
<i>norethindrone ace & ethynodiol-Fe tab 1 mg-20 mcg</i>	\$0(1)	
<i>norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)</i>	\$0(1)	
<i>norgestimate & ethynodiol tab 0.25 mg-35 mcg</i>	\$0(1)	
<i>norgestimate-eth estrad tab 0.18- 25/0.215-25/0.25-25 mg-mcg</i>	\$0(1)	
<i>norgestimate-eth estrad tab 0.18- 35/0.215-35/0.25-35 mg-mcg</i>	\$0(1)	
<i>norlyroc TABS .35mg</i>	\$0(1)	
<i>nortrel 0.5/35 (28)</i>	\$0(1)	
<i>nortrel 1/35 (21)</i>	\$0(1)	
<i>nortrel 1/35 (28)</i>	\$0(1)	
<i>nortrel 7/7/7</i>	\$0(1)	
<i>nylia 7/7/7</i>	\$0(1)	
<i>nymyo</i>	\$0(1)	
<i>ocella</i>	\$0(1)	
<i>orsythia</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>philith</i>	\$0(1)	
<i>pimtrea</i>	\$0(1)	
<i>pirmella 1/35</i>	\$0(1)	
<i>portia-28</i>	\$0(1)	
<i>previfem</i>	\$0(1)	
<i>reclipsen</i>	\$0(1)	
<i>rivelsa</i>	\$0(1)	
<i>setlakin</i>	\$0(1)	
<i>sharobel TABS .35mg</i>	\$0(1)	
<i>simliya</i>	\$0(1)	
<i>simpesse</i>	\$0(1)	
<i>sprintec 28</i>	\$0(1)	
<i>sronyx</i>	\$0(1)	
<i>syeda</i>	\$0(1)	
<i>tarina 24 fe</i>	\$0(1)	
<i>tarina fe 1/20 eq</i>	\$0(1)	
<i>tilia fe</i>	\$0(1)	
<i>tri-estarylla</i>	\$0(1)	
<i>tri-legest fe</i>	\$0(1)	
<i>tri-linyah</i>	\$0(1)	
<i>tri-lo-estarylla</i>	\$0(1)	
<i>tri-lo-marzia</i>	\$0(1)	
<i>tri-lo-mili</i>	\$0(1)	
<i>tri-lo-sprintec</i>	\$0(1)	
<i>tri-mili</i>	\$0(1)	
<i>tri-nymyo</i>	\$0(1)	
<i>tri-previfem</i>	\$0(1)	
<i>tri-sprintec</i>	\$0(1)	
<i>tri-vylibra</i>	\$0(1)	
<i>tri-vylibra lo</i>	\$0(1)	
<i>trivora-28</i>	\$0(1)	
<i>tydemy</i>	\$0(1)	
<i>velivet</i>	\$0(1)	
<i>vestura</i>	\$0(1)	
<i>vienna</i>	\$0(1)	
<i>viorele</i>	\$0(1)	
<i>vyfemla</i>	\$0(1)	
<i>vylibra</i>	\$0(1)	
<i>wera</i>	\$0(1)	
<i>wymzya fe</i>	\$0(1)	
<i>xulane</i>	\$0(1)	
<i>zafemy</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>zarah</i>	\$0(1)	
<i>zovia 1/35</i>	\$0(1)	
<i>zumandimine</i>	\$0(1)	
<i>ENDOMETRIOSIS</i>		
<i>danazol CAPS 50mg, 100mg, 200mg</i>	\$0(1)	
<i>SYNAREL SOLN 2mg/ml</i>	\$0(2)	NDS, NM
<i>ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES</i>		
<i>amabelz</i>	\$0(2)	
<i>DELESTROGEN OIL 10mg/ml</i>	\$0(2)	
<i>dotti PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr</i>	\$0(2)	
<i>estradiol PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr; TABS .5mg, 1mg, 2mg</i>	\$0(2)	
<i>estradiol & norethindrone acetate tab 0.5-0.1 mg</i>	\$0(2)	
<i>estradiol & norethindrone acetate tab 1- 0.5 mg</i>	\$0(2)	
<i>estradiol vaginal CREA .1mg/gm; TABS 10mcg</i>	\$0(1)	
<i>estradiol valerate OIL 20mg/ml, 40mg/ml</i>	\$0(1)	
<i>fyavolv tab 0.5mg-2.5mcg</i>	\$0(2)	
<i>fyavolv tab 1mg-5mcg</i>	\$0(2)	
<i>jinteli</i>	\$0(2)	
<i>lyllana PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr</i>	\$0(2)	
<i>mimvey</i>	\$0(2)	
<i>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</i>	\$0(2)	
<i>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</i>	\$0(2)	
<i>yuvafem TABS 10mcg</i>	\$0(1)	
<i>GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE</i>		
<i>dexamethasone ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<u>DEXAMETHASONE INTENSOL CONC 1mg/ml</u>	\$0(2)	
<i>dexamethasone sodium phosphate SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml</i>	\$0(1)	
<i>fludrocortisone acetate TABS .1mg</i>	\$0(1)	
<i>hydrocortisone TABS 5mg, 10mg, 20mg</i>	\$0(1)	
<i>methylprednisolone TABS 4mg, 8mg, 16mg, 32mg</i>	\$0(1)	B/D
<i>methylprednisolone TBPK 4mg</i>	\$0(1)	
<i>methylprednisolone acetate SUSP 40mg/ml, 80mg/ml</i>	\$0(1)	B/D
<i>methylprednisolone sod succ SOLR 40mg, 125mg, 1000mg</i>	\$0(1)	B/D
<i>prednisolone SOLN 15mg/5ml</i>	\$0(1)	B/D
<i>prednisolone sodium phosphate SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml</i>	\$0(1)	B/D
<i>prednisone SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg</i>	\$0(1)	B/D
<i>prednisone TBPK 5mg, 10mg</i>	\$0(1)	
<i>PREDNISONE INTENSOL CONC 5mg/ml</i>	\$0(2)	B/D
<i>SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg</i>	\$0(2)	

GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR

<i>diazoxide SUSP 50mg/ml</i>	\$0(2)	NDS
<i>GLUCOSE CHEW 4gm</i>	\$0(3)	NM; *
<i>GVOKE HYPOOPEN 2-PACK SOAJ .5mg/0.1ml, 1mg/0.2ml</i>	\$0(2)	
<i>GVOKE PFS SOSY .5mg/0.1ml, 1mg/0.2ml</i>	\$0(2)	
<i>SM GLUCOSE CHW ORANGE</i>	\$0(3)	NM; *

MISCELLANEOUS

<i>ALDURAZYME SOLN 2.9mg/5ml</i>	\$0(2)	NDS, NM, LA, PA
<i>cabergoline TABS .5mg</i>	\$0(1)	
<i>CARBAGLU TABS 200mg</i>	\$0(2)	NDS, NM, LA, PA
<i>CERDELGA CAPS 84mg</i>	\$0(2)	NDS, NM, PA
<i>CEREZYME SOLR 400unit</i>	\$0(2)	NDS, NM, LA, PA
<i>cinacalcet hcl TABS 30mg</i>	\$0(1)	B/D, QL (120 tabs / 30 days)
<i>cinacalcet hcl TABS 60mg</i>	\$0(2)	NDS, B/D, QL (60 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cinacalcet hcl TABS 90mg</i>	\$0(2)	NDS, B/D, QL (120 tabs / 30 days)
<i>CYSTADANE POW</i>	\$0(2)	NDS, NM, LA
<i>CYSTAGON CAPS 50mg, 150mg</i>	\$0(2)	NM, LA, PA
<i>desmopressin acetate SOLN 4mcg/ml</i>	\$0(2)	NDS
<i>desmopressin acetate TABS .1mg,.2mg</i>	\$0(1)	
<i>desmopressin acetate spray SOLN .01%</i>	\$0(1)	
<i>desmopressin acetate spray refrigerated SOLN .01%</i>	\$0(1)	
<i>FABRAZYME SOLR 5mg, 35mg</i>	\$0(2)	NDS, NM, LA, PA
<i>GENOTROPIN SOLR 5mg, 12mg</i>	\$0(2)	NDS, NM, PA
<i>GENOTROPIN MINIQUICK SOLR .2mg,.4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg</i>	\$0(2)	NDS, NM, PA
<i>INCRELEX SOLN 40mg/4ml</i>	\$0(2)	NDS, NM, LA, PA
<i>KORLYM TABS 300mg</i>	\$0(2)	NDS, NM, LA, PA
<i>levocarnitine (metabolic modifiers) SOLN 1gm/10ml; TABS 330mg</i>	\$0(1)	B/D
<i>LUMIZYME SOLR 50mg</i>	\$0(2)	NDS, NM, LA, PA
<i>LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg</i>	\$0(2)	NDS, PA
<i>LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg</i>	\$0(2)	NDS, PA
<i>miglustat CAPS 100mg</i>	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
<i>NAGLAZYME SOLN 1mg/ml</i>	\$0(2)	NDS, NM, LA, PA
<i>nitisinone CAPS 2mg, 5mg, 10mg</i>	\$0(2)	NDS, NM, PA
<i>octreotide acetate SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml</i>	\$0(1)	NM, PA
<i>octreotide acetate SOLN 500mcg/ml, 1000mcg/ml</i>	\$0(2)	NDS, NM, PA
<i>raloxifene hcl TABS 60mg</i>	\$0(1)	
<i>sapropterin dihydrochloride PACK 100mg, 500mg; TABS 100mg</i>	\$0(2)	NDS, NM, PA
<i>SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml</i>	\$0(2)	NDS, NM, LA, PA
<i>sodium phenylbutyrate POWD 3gm/tsp; TABS 500mg</i>	\$0(2)	NDS, NM, PA
<i>SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml</i>	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	\$0(2)	NDS, NM, LA, PA
PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS		
calcium acetate (phosphate binder) CAPS 667mg	\$0(1)	QL (360 caps / 30 days)
calcium acetate (phosphate binder) TABS 667mg	\$0(1)	QL (360 tabs / 30 days)
sevelamer carbonate PACK 2.4gm	\$0(1)	QL (180 packets / 30 days)
sevelamer carbonate PACK .8gm	\$0(2)	NDS, QL (540 packets / 30 days)
sevelamer carbonate TABS 800mg	\$0(1)	QL (540 tabs / 30 days)
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES		
medroxyprogesterone acetate TABS 2.5mg, 5mg, 10mg	\$0(1)	
megestrol acetate SUSP 40mg/ml	\$0(2)	
megestrol acetate (appetite) SUSP 625mg/5ml	\$0(2)	PA
norethindrone acetate TABS 5mg	\$0(1)	
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
euthyrox TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	\$0(1)	
levo-t TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
levothyroxine sodium TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
levoxyd TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	\$0(1)	
liothyronine sodium TABS 5mcg, 25mcg, 50mcg	\$0(1)	
methimazole TABS 5mg, 10mg	\$0(1)	
propylthiouracil TABS 50mg	\$0(1)	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(2)	

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Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
VITAMIN D ANALOGS		
<i>calcitriol</i> CAPS .25mcg, .5mcg; SOLN 1mcg/ml	\$0(1)	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	\$0(1)	B/D
<i>RAYALDEE</i> CPCR 30mcg	\$0(2)	NDS
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS		
ANTACIDS		
<i>acid gone</i>	\$0(3)	NM; *
<i>almacone double strength</i>	\$0(3)	NM; *
<i>alum & mag hydroxide-simethicone</i>	\$0(3)	NM; *
<i>susp 200-200-20 mg/5ml</i>		
<i>alum & mag hydroxide-simethicone</i>	\$0(3)	NM; *
<i>susp 400-400-40 mg/5ml</i>		
<i>alumina/magnesia/simethic</i>	\$0(3)	NM; *
<i>antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>antacid anti-gas maximum</i>	\$0(3)	NM; *
<i>antacid calcium regular s CHEW 500mg</i>	\$0(3)	NM; *
<i>antacid extra strength CHEW 750mg</i>	\$0(3)	NM; *
<i>antacid fast relief</i>	\$0(3)	NM; *
<i>antacid maximum strength</i>	\$0(3)	NM; *
<i>antacid plus anti-gas fas</i>	\$0(3)	NM; *
<i>antacid plus anti-gas rel</i>	\$0(3)	NM; *
<i>antacid regular strength</i>	\$0(3)	NM; *
<i>antacid ultra strength CHEW 1000mg</i>	\$0(3)	NM; *
<i>antacid/antigas liquid</i>	\$0(3)	NM; *
<i>cal-gest antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>calcium antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>calcium antacid extra str CHEW 750mg</i>	\$0(3)	NM; *
<i>CALCIUM CARBONATE TABS 648mg</i>	\$0(3)	NM; *
<i>gnp antacid & anti-gas/re</i>	\$0(3)	NM; *
<i>gnp antacid and anti-gas/</i>	\$0(3)	NM; *
<i>gnp antacid anti-gas/maxi</i>	\$0(3)	NM; *
<i>gnp antacid extra strengt CHEW 750mg</i>	\$0(3)	NM; *
<i>gnp antacid/regular stren</i>	\$0(3)	NM; *
<i>heartburn relief extra st</i>	\$0(3)	NM; *
<i>hm advanced antacid maxim</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm antacid</i>	\$0(3)	NM; *
<i>hm antacid anti-gas extra</i>	\$0(3)	NM; *
<i>hm antacid extra strength CHEW 750mg</i>	\$0(3)	NM; *
<i>hm antacid regular strength CHEW 500mg</i>	\$0(3)	NM; *
<i>hm antacid/antigas</i>	\$0(3)	NM; *
<i>hm calcium antacid extra CHEW 750mg</i>	\$0(3)	NM; *
<i>mag-al plus</i>	\$0(3)	NM; *
<i>mag-al plus xs</i>	\$0(3)	NM; *
<i>magnesium oxide TABS 400mg</i>	\$0(3)	NM; *
<i>mi-acid</i>	\$0(3)	NM; *
<i>mintox maximum strength</i>	\$0(3)	NM; *
<i>mintox plus</i>	\$0(3)	NM; *
<i>qc antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>qc antacid/anti-gas</i>	\$0(3)	NM; *
<i>sm antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>sm antacid advanced</i>	\$0(3)	NM; *
<i>sm antacid advanced maxi</i>	\$0(3)	NM; *
<i>sm antacid anti-gas</i>	\$0(3)	NM; *
<i>sm antacid maximum strength</i>	\$0(3)	NM; *
<i>sm antacid/antigas</i>	\$0(3)	NM; *
<i>sm calcium antacid CHEW 500mg</i>	\$0(3)	NM; *
<i>sm calcium antacid extra CHEW 750mg</i>	\$0(3)	NM; *
<i>sodium bicarbonate (antacid) TABS 325mg, 650mg</i>	\$0(3)	NM; *

ANTI-DIARRHEAL

<i>anti-diarrheal CAPS 2mg; LIQD 1mg/7.5ml; TABS 2mg</i>	\$0(3)	NM; *
<i>bismatrol CHEW 262mg</i>	\$0(3)	NM; *
<i>floranex</i>	\$0(3)	NM; *
<i>gnp anti-diarrheal CAPS 2mg; TABS 2mg</i>	\$0(3)	NM; *
<i>gnp loperamide hydrochlor LIQD 1mg/7.5ml</i>	\$0(3)	NM; *
<i>gnp pink bismuth CHEW 262mg; TABS 262mg</i>	\$0(3)	NM; *
<i>gnp stomach relief SUSP 262mg/15ml</i>	\$0(3)	NM; *
<i>goodsense anti-diarrheal LIQD 1mg/7.5ml</i>	\$0(3)	NM; *
<i>goodsense stomach relief CHEW 262mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm anti-diarrheal</i> CAPS 2mg; LIQD 1mg/7.5ml; TABS 2mg	\$0(3)	NM; *
<i>hm stomach relief</i> CHEW 262mg; SUSP 262mg/15ml	\$0(3)	NM; *
<i>hm stomach relief ultra</i> SUSP 525mg/15ml	\$0(3)	NM; *
* <i>lactobacillus - packet</i> **	\$0(3)	NM; *
* <i>lactobacillus acidophilus-pectin cap</i> **	\$0(3)	NM; *
* <i>lactobacillus tab</i> **	\$0(3)	NM; *
<i>loperamide hcl</i> LIQD 1mg/7.5ml; SUSP 1mg/7.5ml; TABS 2mg	\$0(3)	NM; *
LOPERAMIDE HYDROCHLORIDE SOLN 1mg/7.5ml, 2mg/15ml	\$0(3)	NM; *
<i>peptic relief</i> CHEW 262mg	\$0(3)	NM; *
<i>probiotic formula</i>	\$0(3)	NM; *
<i>qc anti-diarrheal</i> CAPS 2mg; TABS 2mg	\$0(3)	NM; *
QUAD-PROBIOT CAP	\$0(3)	NM; *
RISA-BID TAB PROBIO	\$0(3)	NM; *
RISAQUAD CAP	\$0(3)	NM; *
<i>sm anti-diarrheal</i> CAPS 2mg; LIQD 1mg/7.5ml; TABS 2mg	\$0(3)	NM; *
<i>sm stomach relief</i> CHEW 262mg; TABS 262mg	\$0(3)	NM; *
<i>stomach relief</i> CHEW 262mg; SUSP 525mg/15ml, 525mg/30ml	\$0(3)	NM; *
<i>stomach relief extra stre</i> SUSP 525mg/15ml	\$0(3)	NM; *
<i>stomach relief ultra</i> SUSP 525mg/15ml	\$0(3)	NM; *
ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING		
<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	\$0(1)	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	\$0(1)	B/D
<i>compro</i> SUPP 25mg	\$0(1)	
<i>driminate</i> TABS 50mg	\$0(3)	NM; *
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	\$0(1)	B/D, QL (60 caps / 30 days)
<i>gnp motion sickness relie</i> TABS 25mg, 50mg	\$0(3)	NM; *
<i>gransetron hcl</i> SOLN 1mg/ml, 4mg/4ml	\$0(1)	
<i>gransetron hcl</i> TABS 1mg	\$0(1)	B/D
<i>hm motion sickness</i> TABS 50mg	\$0(3)	NM; *
<i>hm motion sickness relief</i> TABS 25mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>meclizine hcl</i> CHEW 25mg; TABS 12.5mg	\$0(3)	NM; *
<i>meclizine hcl</i> TABS 12.5mg, 25mg	\$0(2)	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TABS 5mg, 10mg	\$0(1)	
<i>motion sickness relief</i> TABS 50mg	\$0(3)	NM; *
<i>motion-time</i> CHEW 25mg	\$0(3)	NM; *
<i>ondansetron</i> TBDP 4mg, 8mg	\$0(1)	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml	\$0(1)	
<i>ondansetron hcl</i> SOLN 4mg/5ml; TABS 4mg, 8mg, 24mg	\$0(1)	B/D
<i>prochlorperazine</i> SUPP 25mg	\$0(1)	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	\$0(1)	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	\$0(1)	
<i>promethazine hcl</i> SOLN 25mg/ml, 50mg/ml; SYRP 6.25mg/5ml; TABS 12.5mg, 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
<i>scopolamine</i> PT72 1mg/3days	\$0(2)	QL (10 patches / 30 days), PA; PA if 70 years and older
<i>sm motion sickness</i> TABS 25mg, 50mg	\$0(3)	NM; *

ANTISPASMODICS - DRUGS FOR STOMACH SPASMS

<i>dicyclomine hcl</i> CAPS 10mg; SOLN 10mg/5ml; TABS 20mg	\$0(2)	
<i>glycopyrrrolate</i> TABS 1mg, 2mg	\$0(1)	

H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID

<i>acid reducer</i> TABS 10mg	\$0(3)	NM; *
<i>acid reducer maximum stre</i> TABS 20mg	\$0(3)	NM; *
<i>acid reducer original str</i> TABS 10mg	\$0(3)	NM; *
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml	\$0(1)	
<i>famotidine</i> SUSR 40mg/5ml	\$0(1)	QL (300 mL / 30 days)
<i>famotidine</i> TABS 20mg	\$0(1)	QL (120 tabs / 30 days)
<i>famotidine</i> TABS 40mg	\$0(1)	QL (60 tabs / 30 days)
<i>famotidine in nacl 0.9% iv soln</i> 20 mg/50ml	\$0(1)	
<i>famotidine maximum streng</i> TABS 20mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>gnp acid reducer TABS 10mg</i>	\$0(3)	NM; *
<i>gnp acid reducer maximum TABS 20mg</i>	\$0(3)	NM; *
<i>heartburn relief TABS 10mg</i>	\$0(3)	NM; *
<i>heartburn relief maximum TABS 20mg</i>	\$0(3)	NM; *
<i>hm famotidine TABS 10mg, 20mg</i>	\$0(3)	NM; *
<i>nizatidine CAPS 150mg, 300mg</i>	\$0(1)	
<i>qc acid controller TABS 10mg</i>	\$0(3)	NM; *
<i>qc acid controller maximum TABS 20mg</i>	\$0(3)	NM; *
<i>sm acid reducer TABS 10mg</i>	\$0(3)	NM; *
<i>sm acid reducer maximum s TABS 20mg</i>	\$0(3)	NM; *
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium CAPS 750mg</i>	\$0(1)	
<i>budesonide CPEP 3mg</i>	\$0(1)	PA
<i>budesonide TB24 9mg</i>	\$0(2)	NDS, PA
<i>hydrocortisone (intrarectal) ENEM 100mg/60ml</i>	\$0(1)	
<i>mesalamine CP24 .375gm</i>	\$0(1)	QL (120 caps / 30 days)
<i>mesalamine CPDR 400mg</i>	\$0(1)	QL (180 caps / 30 days)
<i>mesalamine ENEM 4gm; SUPP 1000mg</i>	\$0(1)	
<i>mesalamine TBEC 1.2gm</i>	\$0(1)	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser KIT 4gm</i>	\$0(1)	
<i>sulfasalazine TABS 500mg; TBEC 500mg</i>	\$0(1)	
LAXATIVES		
<i>bisacodyl SUPP 10mg</i>	\$0(3)	NM; *
<i>bisacodyl ec TBEC 5mg</i>	\$0(3)	NM; *
<i>calcium polycarbophil TABS 625mg</i>	\$0(3)	NM; *
<i>castor oil OIL 100%</i>	\$0(3)	NM; *
<i>chocolated laxative regul CHEW 15mg</i>	\$0(3)	NM; *
<i>clearlax POWD 17gm/scoop</i>	\$0(3)	NM; *
<i>colace 2-in-1</i>	\$0(3)	NM; *
<i>COLACE CLEAR CAPS 50mg</i>	\$0(3)	NM; *
<i>constulose SOLN 10gm/15ml</i>	\$0(1)	
<i>docu LIQD 50mg/5ml</i>	\$0(3)	NM; *
<i>docusate calcium CAPS 240mg</i>	\$0(3)	NM; *
<i>docusate mini ENEM 283mg/5ml</i>	\$0(3)	NM; *
<i>docusate sodium CAPS 100mg, 250mg; LIQD 50mg/5ml</i>	\$0(3)	NM; *
<i>DOCUSOL KIDS ENEM 100mg/5ml</i>	\$0(3)	NM; *
<i>docusol mini ENEM 283mg/5ml</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
DOCUSOL PLUS ENE 20-283	\$0(3)	NM; *
dok CAPS 100mg; TABS 100mg	\$0(3)	NM; *
enema ready-to-use	\$0(3)	NM; *
enemeez mini ENEM 283mg/5ml	\$0(3)	NM; *
ENEMEEZ PLUS ENE 20-283	\$0(3)	NM; *
enulose SOLN 10gm/15ml	\$0(1)	
fiber laxative TABS 625mg	\$0(3)	NM; *
fiber-lax TABS 625mg	\$0(3)	NM; *
FLEET BISACODYL ENEM 10mg/30ml	\$0(3)	NM; *
FLEET ENE PED	\$0(3)	NM; *
FLEET LIQUID GLYCERIN SUP ENEM 5.4gm/dose	\$0(3)	NM; *
gavilax POWD 17gm/scoop	\$0(3)	NM; *
gavilyte-c	\$0(1)	
gavilyte-g	\$0(1)	
gavilyte-n/flavor pack	\$0(1)	
generlac SOLN 10gm/15ml	\$0(1)	
gentle laxative SUPP 10mg; TBEC 5mg	\$0(3)	NM; *
glycerin (laxative) SUPP 2gm	\$0(3)	NM; *
glycerin childrens SUPP 1gm	\$0(3)	NM; *
glycolax POWD 17gm/scoop	\$0(3)	NM; *
gnp clearlax PACK 17gm; POWD 17gm/scoop	\$0(3)	NM; *
gnp enema	\$0(3)	NM; *
gnp fiber therapy TABS 500mg	\$0(3)	NM; *
gnp fiber-caps TABS 625mg	\$0(3)	NM; *
gnp gentle laxative TBEC 5mg	\$0(3)	NM; *
gnp magnesium citrate SOLN 1.745gm/30ml	\$0(3)	NM; *
gnp milk of magnesia SUSP 1200mg/15ml	\$0(3)	NM; *
gnp mineral oil	\$0(3)	NM; *
gnp natural fiber CAPS .52gm	\$0(3)	NM; *
gnp senna lax TABS 8.6mg	\$0(3)	NM; *
gnp stool softener CAPS 100mg, 250mg	\$0(3)	NM; *
gnp stool softener/stimul	\$0(3)	NM; *
gnp womens gentle laxativ TBEC 5mg	\$0(3)	NM; *
GOLYTELY SOL	\$0(2)	
goodsense clearlax POWD 17gm/scoop	\$0(3)	NM; *
healthylax PACK 17gm	\$0(3)	NM; *
hm clearlax POWD 17gm/scoop	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm enema mineral oil</i> ENEM 100%	\$0(3)	NM; *
<i>hm enema saline laxative</i>	\$0(3)	NM; *
<i>hm fiber</i> TABS 500mg	\$0(3)	NM; *
<i>hm laxative</i> TBEC 5mg	\$0(3)	NM; *
<i>hm magnesium citrate</i> SOLN 1.745gm/30ml	\$0(3)	NM; *
<i>hm milk of magnesia</i> SUSP 1200mg/15ml	\$0(3)	NM; *
<i>hm senna</i> TABS 8.6mg	\$0(3)	NM; *
<i>hm stool softener</i> CAPS 100mg	\$0(3)	NM; *
<i>hm stool softener/stimula</i>	\$0(3)	NM; *
KONSYL DAILY FIBER PACK 100%	\$0(3)	NM; *
KONSYL ORIGINAL DAILY FIB PACK 100%	\$0(3)	NM; *
<i>lactulose</i> SOLN 10gm/15ml	\$0(1)	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	\$0(1)	
<i>laxative maximum strength</i> TABS 25mg	\$0(3)	NM; *
<i>laxative regular strength</i> TABS 15mg	\$0(3)	NM; *
<i>magnesium citrate</i> SOLN 1.745gm/30ml	\$0(3)	NM; *
<i>milk of magnesia</i> SUSP 7.75%, 400mg/5ml, 1200mg/15ml, 2400mg/30ml	\$0(3)	NM; *
<i>milk of magnesia concentr</i> SUSP 2400mg/10ml	\$0(3)	NM; *
<i>mineral oil</i> OIL 100%	\$0(3)	NM; *
<i>mineral oil enema</i>	\$0(3)	NM; *
<i>natural psyllium seed ind</i> POWD 100%	\$0(3)	NM; *
NULYTELY SOL LMN/LIME	\$0(2)	
PEDIA-LAX CHEW 400mg; LIQD 50mg/15ml; SUPP 2.8gm	\$0(3)	NM; *
<i>peg 3350-kcl-na bicarb-nacl-na sulfate</i> <i>for soln 236 gm</i>	\$0(1)	
<i>peg 3350-kcl-sod bicarb-nacl for soln</i> <i>420 gm</i>	\$0(1)	
PLENUV SOL	\$0(2)	
<i>polyethylene glycol 3350</i> PACK 17gm; POWD 17gm/scoop	\$0(3)	NM; *
<i>qc enema</i>	\$0(3)	NM; *
<i>qc gentle laxative</i> SUPP 10mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>qc magnesium citrate</i> SOLN <u>1.745gm/30ml</u>	\$0(3)	NM; *
<i>qc milk of magnesia</i> SUSP 400mg/5ml	\$0(3)	NM; *
<i>qc mineral oil heavy</i>	\$0(3)	NM; *
<i>qc natura-lax</i> POWD 17gm/scoop	\$0(3)	NM; *
<i>qc natural vegetable laxa</i> TABS 8.6mg	\$0(3)	NM; *
<i>qc stool softener</i> CAPS 100mg	\$0(3)	NM; *
<i>qc stool softener plus la</i>	\$0(3)	NM; *
<i>qc stool softener plus st</i>	\$0(3)	NM; *
<i>reguloid</i> CAPS 400mg	\$0(3)	NM; *
<i>senexon-s</i>	\$0(3)	NM; *
<i>senna laxative</i> TABS 8.6mg	\$0(3)	NM; *
<i>senna plus</i>	\$0(3)	NM; *
<i>SENNA PLUS CAP</i> 8.6-50MG	\$0(3)	NM; *
<i>senna regular strength</i> TABS 8.6mg	\$0(3)	NM; *
<i>senna-lax</i> TABS 8.6mg	\$0(3)	NM; *
<i>senna-s</i>	\$0(3)	NM; *
<i>senna-tabs</i> TABS 8.6mg	\$0(3)	NM; *
<i>senna-time</i> TABS 8.6mg	\$0(3)	NM; *
<i>senna-time s</i>	\$0(3)	NM; *
<i>senno</i> TABS 8.6mg	\$0(3)	NM; *
<i>sennosides</i> CAPS 8.6mg; LIQD 8.8mg/5ml; SYRP 8.8mg/5ml; TABS 8.6mg	\$0(3)	NM; *
<i>senokot extra strength</i> TABS 17.2mg	\$0(3)	NM; *
<i>silace</i> LIQD 150mg/15ml; SYRP 60mg/15ml	\$0(3)	NM; *
<i>sm castor oil</i> OIL 100%	\$0(3)	NM; *
<i>sm clearlax</i> POWD 17gm/scoop	\$0(3)	NM; *
<i>sm enema</i>	\$0(3)	NM; *
<i>sm fiber</i> TABS 625mg	\$0(3)	NM; *
<i>sm fiber laxative</i> TABS 500mg	\$0(3)	NM; *
<i>sm gentle laxative</i> TBEC 5mg	\$0(3)	NM; *
<i>sm magnesium citrate</i> SOLN <u>1.745gm/30ml</u>	\$0(3)	NM; *
<i>sm milk of magnesia</i> SUSP <u>1200mg/15ml</u>	\$0(3)	NM; *
<i>sm senna laxative</i> TABS 8.6mg	\$0(3)	NM; *
<i>sm senna-s</i>	\$0(3)	NM; *
<i>sm stool softener</i> CAPS 100mg; TABS 100mg	\$0(3)	NM; *
<i>sm stool softener/stimula</i>	\$0(3)	NM; *
<i>smooth lax</i> PACK 17gm	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
*sodium phosphates - enema***	\$0(3)	NM; *
<i>soluble fiber</i>	\$0(3)	NM; *
<i>stimulant laxative</i>	\$0(3)	NM; *
STL SOFT/LAX CAP 8.5-50MG	\$0(3)	NM; *
<i>stool softener CAPS 100mg</i>	\$0(3)	NM; *
<i>stool softener + stimulan</i>	\$0(3)	NM; *
<i>stool softener laxative CAPS 100mg</i>	\$0(3)	NM; *
<i>stool softener laxative e CAPS 250mg</i>	\$0(3)	NM; *
<i>stool softener plus laxat</i>	\$0(3)	NM; *
SUPREP BOWEL SOL PREP KIT	\$0(2)	
<i>vegetable laxative+stool</i>	\$0(3)	NM; *
<i>womens laxative TBEC 5mg</i>	\$0(3)	NM; *
MISCELLANEOUS		
<i>alosetron hcl TABS 1mg</i>	\$0(2)	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl TABS .5mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>cromolyn sodium (mastocytosis) CONC 100mg/5ml</i>	\$0(1)	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	\$0(2)	
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	\$0(2)	
<i>formula em</i>	\$0(3)	NM; *
<i>GAS RELIEF CAPS 250mg</i>	\$0(3)	NM; *
<i>gas relief CHEW 80mg; SUSP 20mg/0.3ml</i>	\$0(3)	NM; *
<i>gas relief drops infants SUSP 20mg/0.3ml</i>	\$0(3)	NM; *
<i>gas relief extra strength CAPS 125mg; CHEW 125mg</i>	\$0(3)	NM; *
<i>gas relief infants SUSP 20mg/0.3ml</i>	\$0(3)	NM; *
<i>gas relief ultra strength CAPS 180mg</i>	\$0(3)	NM; *
<i>GATTEX KIT 5mg</i>	\$0(2)	NDS, NM, LA, PA
<i>gnp anti-gas CAPS 180mg</i>	\$0(3)	NM; *
<i>gnp gas relief CHEW 80mg</i>	\$0(3)	NM; *
<i>gnp gas relief extra stre CAPS 125mg; CHEW 125mg</i>	\$0(3)	NM; *
<i>gnp infant gas relief SUSP 20mg/0.3ml</i>	\$0(3)	NM; *
<i>gnp nausea relief</i>	\$0(3)	NM; *
<i>goodsense nausea relief</i>	\$0(3)	NM; *
<i>hm anti-nausea</i>	\$0(3)	NM; *
<i>hm gas relief CHEW 80mg, 125mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm gas relief extra stren</i> CAPS 125mg	\$0(3)	NM; *
<i>hm gas relief infants</i> SUSP 20mg/0.3ml	\$0(3)	NM; *
<i>infants gas relief</i> SUSP 20mg/0.3ml	\$0(3)	NM; *
<i>infants simethicone</i> SUSP 20mg/0.3ml	\$0(3)	NM; *
LINZESS CAPS 72mcg, 145mcg, 290mcg	\$0(2)	QL (30 caps / 30 days)
<i>loperamide hcl</i> CAPS 2mg	\$0(1)	
<i>mi-acid gas relief</i> CHEW 80mg	\$0(3)	NM; *
<i>misoprostol</i> TABS 100mcg, 200mcg	\$0(1)	
MOVANTIK TABS 12.5mg	\$0(2)	QL (60 tabs / 30 days)
MOVANTIK TABS 25mg	\$0(2)	QL (30 tabs / 30 days)
<i>nausea relief</i>	\$0(3)	NM; *
PHAZYME MAXIMUM STRENGTH CAPS 250mg	\$0(3)	NM; *
<i>qc gas relief extra stren</i> CAPS 125mg	\$0(3)	NM; *
RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml	\$0(2)	NDS, PA
<i>simethicone drops infants</i> SUSP 20mg/0.3ml	\$0(3)	NM; *
<i>simethicone ultra strengt</i> CAPS 180mg	\$0(3)	NM; *
<i>sm anti-nausea</i>	\$0(3)	NM; *
<i>sm gas relief</i> CHEW 80mg, 125mg	\$0(3)	NM; *
<i>sm gas relief drops infan</i> SUSP 20mg/0.3ml	\$0(3)	NM; *
<i>sm gas relief extra stren</i> CAPS 125mg	\$0(3)	NM; *
<i>sucralfate</i> TABS 1gm	\$0(1)	
<i>ursodiol</i> CAPS 300mg; TABS 250mg, 500mg	\$0(1)	
XERMELO TABS 250mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, LA, PA
XIFAXAN TABS 550mg	\$0(2)	NDS, PA
PANCREATIC ENZYMES		
CREON CAP 3000UNIT	\$0(2)	
CREON CAP 6000UNIT	\$0(2)	
CREON CAP 12000UNT	\$0(2)	
CREON CAP 24000UNT	\$0(2)	
CREON CAP 36000UNT	\$0(2)	
ZENPEP CAP 3000UNIT	\$0(2)	
ZENPEP CAP 5000UNIT	\$0(2)	
ZENPEP CAP 10000UNT	\$0(2)	
ZENPEP CAP 15000UNT	\$0(2)	
ZENPEP CAP 20000UNT	\$0(2)	
ZENPEP CAP 25000	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
ZENPEP CAP 40000	\$0(2)	
PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID		
DEXILANT CPDR 30mg, 60mg	\$0(2)	QL (30 caps / 30 days)
<i>esomeprazole magnesium</i> CPDR 20mg, 40mg	\$0(1)	QL (30 caps / 30 days), ST
<i>gnp omeprazole</i> TBEC 20mg	\$0(3)	NM; *
<i>gnp omeprazole odt</i> TBDD 20mg	\$0(3)	NM; *
<i>hm omeprazole</i> TBEC 20mg	\$0(3)	NM; *
<i>lansoprazole</i> CPDR 15mg, 30mg	\$0(1)	QL (60 caps / 30 days)
<i>omeprazole</i> CPDR 10mg, 20mg, 40mg	\$0(1)	
<i>omeprazole</i> TBDD 20mg; TBEC 20mg	\$0(3)	NM; *
<i>pantoprazole sodium</i> SOLR 40mg; TBEC 20mg, 40mg	\$0(1)	
<i>rabeprazole sodium</i> TBEC 20mg	\$0(1)	QL (30 tabs / 30 days)
<i>sm omeprazole</i> TBEC 20mg	\$0(3)	NM; *
GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS		
BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE		
<i>alfuzosin hcl</i> TB24 10mg	\$0(1)	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	\$0(1)	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl</i> cap 0.5-0.4 mg	\$0(1)	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	\$0(1)	
<i>tamsulosin hcl</i> CAPS .4mg	\$0(1)	
MISCELLANEOUS		
<i>acetic acid</i> SOLN .25%	\$0(1)	
<i>bethanechol chloride</i> TABS 5mg, 10mg, 25mg, 50mg	\$0(1)	
<i>gnp urinary pain relief</i> TABS 95mg, 97.5mg	\$0(3)	NM; *
<i>hm urinary pain relief</i> TABS 99.5mg	\$0(3)	NM; *
<i>potassium citrate (alkalinizer)</i> TBCR 15meq, 540mg, 1080mg	\$0(1)	
<i>qc urinary pain relief</i> TABS 95mg	\$0(3)	NM; *
<i>sm urinary pain relief</i> TABS 95mg	\$0(3)	NM; *
<i>sm urinary pain relief ma</i> TABS 97.5mg	\$0(3)	NM; *
<i>summers eve medicated</i> SOLN .3%	\$0(3)	NM; *
<i>urinary pain relief</i> TABS 95mg, 99.5mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

MYRBETRIQ TB24 25mg, 50mg	\$0(2)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SYRP 5mg/5ml; TABS 5mg	\$0(1)	
<i>oxybutynin chloride</i> TB24 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	\$0(1)	QL (60 tabs / 30 days)
<i>solifenacina succinate</i> TABS 5mg, 10mg	\$0(1)	QL (30 tabs / 30 days)
<i>tolterodine tartrate</i> CP24 2mg, 4mg	\$0(1)	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	\$0(1)	QL (60 tabs / 30 days), ST
TOVIAZ TB24 4mg, 8mg	\$0(2)	QL (30 tabs / 30 days)
<i>trospium chloride</i> TABS 20mg	\$0(1)	QL (60 tabs / 30 days)

VAGINAL ANTI-INFECTIVES

<i>clindamycin phosphate vaginal</i> CREA 2%	\$0(1)	
<i>clotrimazole</i> 3 CREA 2%	\$0(3)	NM; *
<i>clotrimazole vaginal</i> CREA 1%	\$0(3)	NM; *
<i>3 day vaginal</i> CREA 2%	\$0(3)	NM; *
<i>gnp clotrimazole</i> 3 CREA 2%	\$0(3)	NM; *
<i>gnp miconazole</i> 3	\$0(3)	NM; *
<i>gnp miconazole</i> 7 CREA 2%	\$0(3)	NM; *
<i>metronidazole vaginal</i> GEL .75%	\$0(1)	
<i>miconazole</i> 1	\$0(3)	NM; *
<i>miconazole</i> 3 CREA 4%	\$0(3)	NM; *
<i>miconazole</i> 3 combination	\$0(3)	NM; *
<i>miconazole</i> 3 combo pack	\$0(3)	NM; *
<i>miconazole</i> 7 CREA 2%; SUPP 100mg	\$0(3)	NM; *
<i>miconazole nitrate vaginal</i> CREA 2%	\$0(3)	NM; *
<i>qc 3 day vaginal cream</i> CREA 4%	\$0(3)	NM; *
<i>qc miconazole</i> 7 CREA 2%	\$0(3)	NM; *
<i>sm 3-day vaginal</i> CREA 2%	\$0(3)	NM; *
<i>sm clotrimazole vaginal</i> CREA 1%	\$0(3)	NM; *
<i>sm miconazole</i> 3	\$0(3)	NM; *
<i>sm miconazole</i> 7 CREA 2%; SUPP 100mg	\$0(3)	NM; *
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	\$0(1)	
<i>vandazole</i> GEL .75%	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS

ANTICOAGULANTS - BLOOD THINNERS

ELIQUIS TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	\$0(2)	QL (74 tabs / 30 days)
ELIQUIS STARTER PACK TBPK 5mg	\$0(2)	QL (74 tabs / 30 days)
<i>enoxaparin sodium</i> SOLN 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml, 300mg/3ml	\$0(1)	
<i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml	\$0(1)	
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	\$0(2)	NDS
HEP SOD/NACL INJ 25000UNT	\$0(2)	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	\$0(1)	B/D
<i>heparin sodium (porcine)</i> 100 unit/ml in d5w	\$0(1)	
<i>heparin sodium (porcine)-dextrose iv sol 20000 unit/500ml-5%</i>	\$0(1)	
<i>heparin sodium (porcine)-dextrose iv sol 25000 unit/500ml-5%</i>	\$0(1)	
HEPARIN/NACL INJ 25000UNT	\$0(2)	
jantoven TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
XARELTO TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	\$0(2)	QL (30 tabs / 30 days)
XARELTO STAR TAB 15/20MG	\$0(2)	QL (51 tabs / 30 days)

HEMATOPOIETIC GROWTH FACTORS

PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	\$0(2)	PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	\$0(2)	NDS, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	\$0(2)	NDS, PA

IRON

<i>eql carbonyl iron</i> TABS 45mg	\$0(3)	NM; *
<i>ferate</i> TABS 27mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>ferosul</i> TABS 325mg	\$0(3)	NM; *
FERRIMIN 150 TABS 150mg	\$0(3)	NM; *
<i>ferrous fumarate</i> TABS 324mg	\$0(3)	NM; *
<i>ferrous gluconate</i> TABS 324mg	\$0(3)	NM; *
FERROUS GLUCONATE TABS 324mg	\$0(3)	NM; *
<i>ferrous sulfate</i> ELIX 220mg/5ml; SOLN 15mg/ml; SYRP 300mg/5ml; TABS 65mg, 325mg; TBEC 325mg	\$0(3)	NM; *
FERROUS SULFATE LIQD 220mg/5ml; TBEC 324mg	\$0(3)	NM; *
<i>gnp iron</i> TABS 200mg	\$0(3)	NM; *
HEMATEX LIQD 100mg/5ml	\$0(3)	NM; *
HEMATEX POLYSACCHARIDE IR TABS 150mg	\$0(3)	NM; *
IRON CHEWS PEDIATRIC CHEW 15mg	\$0(3)	NM; *
<i>iron supplement childrens</i> SOLN 15mg/ml	\$0(3)	NM; *
<i>polysaccharide iron complex</i> CAPS 150mg	\$0(3)	NM; *
SM SLOW RELEASE IRON TBCR 143mg	\$0(3)	NM; *
VIRT-FEFA CAP PLUS	\$0(3)	NM; *
MISCELLANEOUS		
<i>anagrelide hcl</i> CAPS .5mg, 1mg	\$0(1)	
BERINERT KIT 500unit	\$0(2)	NDS, QL (24 boxes / 30 days), NM, LA, PA
<i>cilostazol</i> TABS 50mg, 100mg	\$0(1)	
DOPTELET TABS 20mg	\$0(2)	NDS, NM, LA, PA
DROXIA CAPS 200mg, 300mg, 400mg	\$0(2)	
ENDARI PACK 5gm	\$0(2)	NDS, NM, LA, PA
HAEGARDA SOLR 2000unit	\$0(2)	NDS, QL (30 vials / 30 days), NM, LA, PA
HAEGARDA SOLR 3000unit	\$0(2)	NDS, QL (20 vials / 30 days), NM, LA, PA
<i>icatibant acetate</i> SOLN 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
<i>pentoxifylline</i> TBCR 400mg	\$0(1)	
PROMACTA PACK 12.5mg	\$0(2)	NDS, QL (360 packets / 30 days), NM, LA, PA
PROMACTA PACK 25mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, LA, PA
PROMACTA TABS 12.5mg, 25mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
PROMACTA TABS 50mg, 75mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, LA, PA
sajazir SOLN 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml; TABS 650mg	\$0(1)	

PLATELET AGGREGATION INHIBITORS

aspirin-dipyridamole cap er 12hr 25- 200 mg	\$0(1)
BRILINTA TABS 60mg, 90mg	\$0(2)
clopidogrel bisulfate TABS 75mg	\$0(1)
dipyridamole TABS 25mg, 50mg, 75mg	\$0(2)
<i>prasugrel hcl</i> TABS 5mg, 10mg	\$0(1)

IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM

AUTOIMMUNE AGENTS

ENBREL SOLN 25mg/0.5ml; SOLR 25mg	\$0(2)	NDS, QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	\$0(2)	NDS, QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	\$0(2)	NDS, QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	\$0(2)	NDS, QL (8 pens / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml, 20mg/0.2ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 syringes / 28 days), NM, PA
HUMIRA PEDIA INJ CROHNS	\$0(2)	NDS, NM, PA
HUMIRA PEDIATRIC CROHNS D PSKT 80mg/0.8ml	\$0(2)	NDS, NM, PA
HUMIRA PEN PNKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN PNKT 80mg/0.8ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	\$0(2)	NDS, NM, PA
HUMIRA PEN-CD/UC/HS START PNKT 40mg/0.8ml, 80mg/0.8ml	\$0(2)	NDS, NM, PA
HUMIRA PEN-PEDIATRIC UC S PNKT 80mg/0.8ml	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
HUMIRA PEN-PS/UV STARTER PNKT 40mg/0.8ml	\$0(2)	NDS, NM, PA
REMICADE SOLR 100mg	\$0(2)	NDS, NM, PA
RENFLEXIS SOLR 100mg	\$0(2)	NDS, NM, LA, PA
RINVOQ TB24 15mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
SKYRIZI PSKT 75mg/0.83ml	\$0(2)	NDS, QL (7 kits / 365 days), NM, PA
SKYRIZI SOSY 150mg/ml	\$0(2)	NDS, QL (7 syringes / year), PA
SKYRIZI PEN SOAJ 150mg/ml	\$0(2)	NDS, QL (7 pens / year), PA
STELARA SOLN 45mg/0.5ml	\$0(2)	NDS, QL (2 vials / 28 days), NM, LA, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
TALTZ SOAJ 80mg/ml; SOSY 80mg/ml	\$0(2)	NDS, QL (3 syringes / 28 days), NM, LA, PA
XELJANZ SOLN 1mg/ml	\$0(2)	NDS, QL (240 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA

DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS (DMARDs) - DRUGS TO TREAT RHEUMATOID ARTHRITIS

hydroxychloroquine sulfate TABS 200mg	\$0(1)	
leflunomide TABS 10mg, 20mg	\$0(1)	QL (30 tabs / 30 days)
methotrexate sodium TABS 2.5mg	\$0(1)	
XATMEP SOLN 2.5mg/ml	\$0(2)	B/D

IMMUNOGLOBULINS

BIVIGAM SOLN 5gm/50ml	\$0(2)	NDS, NM, PA
FLEBOGAMMA DIF SOLN 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	\$0(2)	NDS, NM, PA
GAMASTAN INJ	\$0(2)	B/D, NM
GAMMAGARD LIQUID SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	\$0(2)	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	\$0(2)	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 25gm/500ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 2000000unit/0.5ml	\$0(2)	NDS, NM, LA, PA
ARCALYST SOLR 220mg	\$0(2)	NDS, NM, PA
INTRON A SOLN 10mu/ml, 6000000unit/ml; SOLR 50mu	\$0(2)	NDS, B/D, NM
INTRON A SOLR 10mu, 18mu	\$0(2)	B/D, NM
IMMUNOSUPPRESSANTS		
azathioprine TABS 50mg	\$0(1)	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	\$0(2)	NDS, NM, PA
cyclosporine CAPS 25mg, 100mg; SOLN 50mg/ml	\$0(1)	B/D
cyclosporine modified (for microemulsion) CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	\$0(1)	B/D
everolimus (immunosuppressant) TABS .25mg, .5mg, .75mg	\$0(2)	NDS, B/D
gengraf CAPS 25mg, 100mg; SOLN 100mg/ml	\$0(1)	B/D
mycophenolate mofetil CAPS 250mg; TABS 500mg	\$0(1)	B/D
mycophenolate mofetil SUSR 200mg/ml	\$0(2)	NDS, B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>mycophenolate sodium</i> TBEC 180mg, 360mg	\$0(1)	B/D
NULOJIX SOLR 250mg	\$0(2)	NDS, B/D
PROGRAF PACK .2mg, 1mg	\$0(2)	B/D
REZUROCK TABS 200mg	\$0(2)	NDS, LA, PA
SANDIMMUNE SOLN 100mg/ml	\$0(2)	B/D
<i>sirolimus</i> SOLN 1mg/ml	\$0(2)	NDS, B/D
<i>sirolimus</i> TABS .5mg, 1mg, 2mg	\$0(1)	B/D
<i>tacrolimus</i> CAPS .5mg, 1mg, 5mg	\$0(1)	B/D
ZORTRESS TABS 1mg	\$0(2)	NDS, B/D
VACCINES		
ACTHIB INJ	\$0(2)	
ADACEL INJ	\$0(2)	
BCG VACCINE INJ	\$0(2)	
BEXSERO INJ	\$0(2)	
BOOSTRIX INJ	\$0(2)	
DAPTACEL INJ	\$0(2)	
DIP/TET PED INJ 25-5LFU	\$0(2)	B/D
ENGERIX-B SUSP 10mcg/0.5ml, 20mcg/ml	\$0(2)	B/D
GARDASIL 9 INJ	\$0(2)	
HAVRIX SUSP 720elu/0.5ml, 1440elu/ml	\$0(2)	
HIBERIX SOLR 10mcg	\$0(2)	
IMOVAX RABIES (H.D.C.V.) INJ 2.5unit/ml	\$0(2)	B/D
INFANRIX INJ	\$0(2)	
IPOP INJ INACTIVE	\$0(2)	
IXIARO INJ	\$0(2)	
KINRIX INJ	\$0(2)	
M-M-R II INJ	\$0(2)	
MENACTRA INJ	\$0(2)	
MENQUADFI INJ	\$0(2)	
MENVEO INJ	\$0(2)	
PEDIARIX INJ 0.5ML	\$0(2)	
PEDVAX HIB SUSP 7.5mcg/0.5ml	\$0(2)	
PENTACEL INJ	\$0(2)	
PROQUAD INJ	\$0(2)	
QUADRACEL INJ	\$0(2)	
RABAVERT INJ	\$0(2)	B/D
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml	\$0(2)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)	LIMITS ON USE
ROTARIX SUS	\$0(2)		
ROTATEQ SOL	\$0(2)		
SHINGRIX SUSR 50mcg/0.5ml	\$0(2)	QL (2 vials per lifetime)	
TDVAX INJ 2-2 LF	\$0(2)	B/D	
TENIVAC INJ 5-2LF	\$0(2)	B/D	
TRUMENBA INJ	\$0(2)		
TWINRIX INJ	\$0(2)		
TYPHIM VI SOLN 25mcg/0.5ml	\$0(2)		
VAQTA SUSP 25unit/0.5ml, 50unit/ml	\$0(2)		
VARIVAX INJ 1350pfu/0.5ml	\$0(2)		
YF-VAX INJ	\$0(2)		

MISCELLANEOUS

MISCELLANEOUS

HM CASTOR OIL	\$0(3)	NM; *
PETROLATUM OINT 42%	\$0(3)	NM; *
QC CASTOR OIL	\$0(3)	NM; *

NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS

ELECTROLYTES/MINERALS, INJECTABLE

D2.5W/NACL INJ 0.45%	\$0(1)
D5W/LYTES INJ #48	\$0(2)
D10W/NACL INJ 0.2%	\$0(2)
dextrose 2.5% w/ sodium chloride 0.45%	\$0(1)
dextrose 5% in lactated ringers	\$0(1)
dextrose 5% w/ sodium chloride 0.2%	\$0(1)
dextrose 5% w/ sodium chloride 0.3%	\$0(1)
dextrose 5% w/ sodium chloride 0.9%	\$0(1)
dextrose 5% w/ sodium chloride 0.45%	\$0(1)
dextrose 5% w/ sodium chloride 0.225%	\$0(1)
dextrose 10% w/ sodium chloride 0.45%	\$0(1)
ISOLYTE-P INJ /D5W	\$0(2)
ISOLYTE-S INJ	\$0(2)
ISOLYTE-S INJ PH 7.4	\$0(2)
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	\$0(1)
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	\$0(1)
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0(1)	
KCL 20 MEQ/L (0.15%) IN NACL 0.45% INJ	\$0(2)	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
KCL 40 MEQ/L (0.3%) IN NACL 0.9% INJ	\$0(2)	
<i>KCL/D5W/NACL INJ 0.3/0.9% lactated ringer's solution</i>	\$0(2)	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 20gm/500ml, 40gm/1000ml	\$0(2)	
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	\$0(2)	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0(2)	
MG SO4/D5W INJ 10MG/ML	\$0(2)	
PLASMA-LYTE INJ -148	\$0(2)	
PLASMA-LYTE INJ -A	\$0(2)	
<i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 20meq/100ml, 40meq/100ml</i>	\$0(1)	
POTASSIUM CHLORIDE SOLN 10meq/50ml, 20meq/50ml	\$0(2)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0(1)	
<i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>	\$0(1)	
TPN ELECTROL INJ	\$0(2)	B/D
ELECTROLYTES/MINERALS/VITAMINS, ORAL		
<i>klor-con PACK 20meq</i>	\$0(1)	
<i>klor-con 8 TBCR 8meq</i>	\$0(1)	
<i>klor-con 10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m15 TBCR 15meq</i>	\$0(1)	
<i>klor-con m20 TBCR 20meq</i>	\$0(1)	
M-NATAL PLUS TAB	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>potassium chloride CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 8meq, 10meq, 20meq</i>	\$0(1)	
<i>potassium chloride microencapsulated crystals er TBCR 10meq, 15meq, 20meq</i>	\$0(1)	
PRENATAL TAB 27-1MG	\$0(2)	
PRENATAL TAB PLUS	\$0(2)	
PRENATAL VIT TAB LOW IRON	\$0(2)	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0(1)	
TRICARE TAB PRENATAL	\$0(2)	
IV NUTRITION		
AMINOSYN-PF INJ 7%	\$0(2)	B/D
CLINIMIX INJ 4.25/D5W	\$0(2)	B/D
CLINIMIX INJ 4.25/D10	\$0(2)	B/D
CLINIMIX INJ 5%/D15W	\$0(2)	B/D
CLINIMIX INJ 5%/D20W	\$0(2)	B/D
CLINIMIX INJ 6/5	\$0(2)	B/D
CLINIMIX INJ 8/10	\$0(2)	B/D
CLINIMIX INJ 8/14	\$0(2)	B/D
<i>clinisol sf 15%</i>	\$0(1)	B/D
CLINOLIPID EMU 20%	\$0(2)	B/D
<i>dextrose SOLN 5%, 10%</i>	\$0(1)	
<i>dextrose SOLN 50%, 70%</i>	\$0(1)	B/D
FREAMINE HBC INJ 6.9%	\$0(2)	B/D
FREAMINE III INJ 10%	\$0(2)	B/D
<i>hepatamine</i>	\$0(2)	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	\$0(2)	B/D
NUTRILIPID EMUL 20gm/100ml	\$0(2)	B/D
<i>plenamine</i>	\$0(1)	B/D
PREMASOL SOL 10%	\$0(2)	B/D
PROCALAMINE INJ 3%	\$0(2)	B/D
PROSOL INJ 20%	\$0(2)	B/D
TRAVASOL INJ 10%	\$0(2)	B/D
TROPHAMINE INJ 10%	\$0(2)	B/D
MINERALS		
<i>calcitrate TABS 950mg</i>	\$0(3)	NM; *
<i>calcium 600+d</i>	\$0(3)	NM; *
<i>calcium 600+d3</i>	\$0(3)	NM; *
<i>calcium carbonate TABS 600mg</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<u>calcium carbonate (antacid) SUSP 1250mg/5ml</u>	\$0(3)	NM; *
<u>calcium carbonate-cholecalciferol tab 250 mg-125 unit</u>	\$0(3)	NM; *
<u>calcium carbonate-cholecalciferol tab 500 mg-200 unit</u>	\$0(3)	NM; *
<u>calcium carbonate-cholecalciferol tab 600 mg-200 unit</u>	\$0(3)	NM; *
<u>calcium carbonate-cholecalciferol tab 600 mg-400 unit</u>	\$0(3)	NM; *
<u>calcium carbonate-vitamin d tab 500 mg-200 unit</u>	\$0(3)	NM; *
<u>calcium citrate + d3 maxi</u>	\$0(3)	NM; *
<u>calcium+d3</u>	\$0(3)	NM; *
<u>CHEWABLE CALCIUM CHEW 500mg</u>	\$0(3)	NM; *
<u>gnp calcium TABS 600mg</u>	\$0(3)	NM; *
<u>gnp calcium 500 +d3</u>	\$0(3)	NM; *
<u>gnp calcium citrate +d3</u>	\$0(3)	NM; *
<u>magnesium oxide (mg supplement) TABS 400mg, 500mg</u>	\$0(3)	NM; *
<u>magnesium-oxide TABS 400mg</u>	\$0(3)	NM; *
<u>NU-MAG TAB 71.5-119</u>	\$0(3)	NM; *
<u>os-cal calcium + d3</u>	\$0(3)	NM; *
<u>os-cal extra d3</u>	\$0(3)	NM; *
<u>oysco 500 TABS 500mg</u>	\$0(3)	NM; *
<u>oysco 500+d</u>	\$0(3)	NM; *
<u>oyster shell TABS 500mg</u>	\$0(3)	NM; *
<u>oyster shell calcium 250+</u>	\$0(3)	NM; *
<u>oyster shell calcium 500+</u>	\$0(3)	NM; *
<u>potassium & sodium phosphates powder pack 280-160-250 mg</u>	\$0(3)	NM; *
<u>SLOW-MAG TAB 71.5-119</u>	\$0(3)	NM; *
<u>sm oyster shell calcium/v</u>	\$0(3)	NM; *
<u>sodium chloride TABS 1gm</u>	\$0(3)	NM; *
<u>zinc gluconate TABS 50mg</u>	\$0(3)	NM; *
<u>zinc sulfate TABS 220mg</u>	\$0(3)	NM; *
MISCELLANEOUS		
<u>coenzyme q10 (ubidecarenone) CAPS 30mg, 50mg, 60mg, 100mg, 200mg</u>	\$0(3)	NM; *
<u>glucosamine sulfate CAPS 500mg</u>	\$0(3)	NM; *
<u>GLUCOSE NURSETTE SOLN 5%</u>	\$0(3)	NM; *
<u>LUTEIN CAP 20MG</u>	\$0(3)	NM; *
<u>melatonin TABS 3mg</u>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>melatonin maximum strength TABS 5mg</i>	\$0(3)	NM; *
<i>ocuvite blue light</i>	\$0(3)	NM; *
<i>ocuvite lutein 25</i>	\$0(3)	NM; *
<i>OMEGA-3 CAP 1400MG</i>	\$0(3)	NM; *
<i>omega-3 fatty acids CAPS 500mg, 1000mg</i>	\$0(3)	NM; *
<i>*omega-3 fatty acids cap 1000 mg**</i>	\$0(3)	NM; *
<i>*omega-3 fatty acids cap delayed release 1000 mg**</i>	\$0(3)	NM; *
<i>sm melatonin TABS 3mg</i>	\$0(3)	NM; *
<i>sm omega-3 fish oil</i>	\$0(3)	NM; *
VITAMINS		
<i>activite</i>	\$0(3)	NM; *
<i>ADULT 50+ CAP OCUVITE</i>	\$0(3)	NM; *
<i>ANIMAL SHAPE CHW IRON</i>	\$0(3)	NM; *
<i>animal shapes</i>	\$0(3)	NM; *
<i>aqueous vitamin d infants LIQD 10mcg/ml</i>	\$0(3)	NM; *
<i>ascorbic acid TABS 250mg, 500mg, 1000mg</i>	\$0(3)	NM; *
<i>*b-complex vitamin tab**</i>	\$0(3)	NM; *
<i>*b-complex w/ c & calcium tab***</i>	\$0(3)	NM; *
<i>BP VIT 3 CAP</i>	\$0(3)	NM; *
<i>c-500 CHEW 500mg</i>	\$0(3)	NM; *
<i>calcidiol SOLN 200mcg/ml</i>	\$0(3)	NM; *
<i>CERTAVITE TAB SENIOR</i>	\$0(3)	NM; *
<i>certavite/antioxidants</i>	\$0(3)	NM; *
<i>cholecalciferol CAPS 1000unit, 2000unit, 10000unit, 50000unit; LIQD 400unit/ml; TABS 400unit, 1000unit, 2000unit, 5000unit</i>	\$0(3)	NM; *
<i>cyanocobalamin SOLN 1000mcg/ml; TABS 100mcg, 250mcg, 500mcg, 1000mcg</i>	\$0(3)	NM; *
<i>d3 high potency CAPS 1000unit</i>	\$0(3)	NM; *
<i>d3 super strength CAPS 2000unit</i>	\$0(3)	NM; *
<i>depara CAPS 10000unit, 50000unit</i>	\$0(3)	NM; *
<i>DECARA CAPS 25000unit</i>	\$0(3)	NM; *
<i>DIALYVIT 800 TAB ZINC 15</i>	\$0(3)	NM; *
<i>dalyvite 800</i>	\$0(3)	NM; *
<i>dalyvite 800/ultra d</i>	\$0(3)	NM; *
<i>DIALYVITE TAB 800/ZINC</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
dalyvite vitamin d3 max TABS 50000unit	\$0(3)	NM; *
dalyvite vitamin d 5000 CAPS 5000unit	\$0(3)	NM; *
DIALYVITE WAF 800	\$0(3)	NM; *
e-200 CAPS 200unit	\$0(3)	NM; *
eldertonic	\$0(3)	NM; *
ergocalciferol CAPS 1.25mg, 50000unit; SOLN 8000unit/ml	\$0(3)	NM; *
folic acid SOLN 5mg/ml; TABS 1mg, 400mcg, 800mcg	\$0(3)	NM; *
foltabs 800	\$0(3)	NM; *
GERITOL LIQ TONIC	\$0(3)	NM; *
gnp century ultimate mens	\$0(3)	NM; *
gnp one daily womens heal	\$0(3)	NM; *
gnp therapeutic-m	\$0(3)	NM; *
icaps	\$0(3)	NM; *
ICAPS AREDS TAB FORMULA	\$0(3)	NM; *
ICAPS LUTEIN TAB ZEAXANTH	\$0(3)	NM; *
NASCOBAL SOLN 500mcg/0.1ml	\$0(3)	NM; *
niacin CPCR 250mg, 500mg; TABS 100mg, 500mg; TBCR 500mg	\$0(3)	NM; *
OCUVITE LUTE CAP	\$0(3)	NM; *
phytonadione SOLN 1mg/0.5ml, 10mg/ml; TABS 5mg	\$0(3)	NM; *
PORENAL+D CAP OMEGA 3	\$0(3)	NM; *
PRESERVISION CAP AREDS	\$0(3)	NM; *
PRESERVISION CAP AREDS 2	\$0(3)	NM; *
PRESERVISION CAP LUTEIN	\$0(3)	NM; *
PRESERVISION TAB AREDS	\$0(3)	NM; *
PRORENAL +D TAB	\$0(3)	NM; *
PRORENAL+D CAP OMEGA-3	\$0(3)	NM; *
PRORENAL+D TAB	\$0(3)	NM; *
renal-vite	\$0(3)	NM; *
renaplex	\$0(3)	NM; *
RENAPLEX-D TAB	\$0(3)	NM; *
reno caps	\$0(3)	NM; *
SENTRY TAB SENIOR	\$0(3)	NM; *
sm complete advanced form	\$0(3)	NM; *
sm complete senior formul	\$0(3)	NM; *
sm vitamin d3 TABS 1000unit	\$0(3)	NM; *
solvita e SOLN 15.8mg/0.7ml	\$0(3)	NM; *
stress formula	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>stress formula/zinc</i>	\$0(3)	NM; *
<i>superplex-t</i>	\$0(3)	NM; *
<i>tab-a-vite</i>	\$0(3)	NM; *
<i>tab-a-vite w/beta caroten</i>	\$0(3)	NM; *
<i>tab-a-vite/iron</i>	\$0(3)	NM; *
<i>THERA M PLUS TAB</i>	\$0(3)	NM; *
<i>THERA TAB</i>	\$0(3)	NM; *
<i>THERA-M TAB</i>	\$0(3)	NM; *
<i>thiamine hcl SOLN 100mg/ml</i>	\$0(3)	NM; *
<i>total b/c</i>	\$0(3)	NM; *
<i>virt-caps</i>	\$0(3)	NM; *
<i>virt-gard</i>	\$0(3)	NM; *
<i>vitamin a CAPS 10000unit</i>	\$0(3)	NM; *
<i>vitamin d3 super strength CAPS 2000unit; TABS 2000unit</i>	\$0(3)	NM; *
<i>vitamin d3 ultra strength CAPS 5000unit</i>	\$0(3)	NM; *
<i>vitamin e CAPS 100unit, 400unit, 450mg</i>	\$0(3)	NM; *
<i>vp-vite rx</i>	\$0(3)	NM; *
<i>weekly-d CAPS 1.25mg</i>	\$0(3)	NM; *
<i>WEST-VITE TAB W/FA</i>	\$0(3)	NM; *
<i>westab max</i>	\$0(3)	NM; *
<i>westab mini</i>	\$0(3)	NM; *
<i>westab one</i>	\$0(3)	NM; *

OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS

ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION

<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	\$0(1)
<i>BLEPHAMIDE OIN S.O.P.</i>	\$0(2)
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	\$0(1)
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	\$0(1)
<i>neomycin-polymyxin-hc ophth susp</i>	\$0(1)
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	\$0(1)
<i>TOBRADEX OIN 0.3-0.1%</i>	\$0(2)
<i>TOBRADEX ST SUS 0.3-0.05</i>	\$0(2)
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	\$0(1)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
ZYLET SUS 0.5-0.3%	\$0(2)	
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
bacitracin (ophthalmic) OINT 500unit/gm	\$0(1)	
<i>bacitracin-polymyxin b ophth oint</i>	\$0(1)	
BESIVANCE SUSP .6%	\$0(2)	
CILOXAN OINT .3%	\$0(2)	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	\$0(1)	
<i>erythromycin (ophth) OINT 5mg/gm</i>	\$0(1)	
<i>gatifloxacin (ophth) SOLN .5%</i>	\$0(1)	
<i>gentak OINT .3%</i>	\$0(1)	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	\$0(1)	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	\$0(1)	
NATACYN SUSP 5%	\$0(2)	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0(1)	
<i>neomycin-polymy-gramicid op sol 1.75- 10000-0.025mg-unt-mg/ml</i>	\$0(1)	
<i>ofloxacin (ophth) SOLN .3%</i>	\$0(1)	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0(1)	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	\$0(1)	
<i>tobramycin (ophth) SOLN .3%</i>	\$0(1)	
<i>trifluridine SOLN 1%</i>	\$0(1)	
ZIRGAN GEL .15%	\$0(2)	
ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION		
ALREX SUSP .2%	\$0(2)	
<i>bromfenac sodium (ophth) SOLN .09%</i>	\$0(1)	
BROMSITE SOLN .075%	\$0(2)	
<i>dexamethasone sodium phosphate (ophth) SOLN .1%</i>	\$0(1)	
<i>diclofenac sodium (ophth) SOLN .1%</i>	\$0(1)	
DUREZOL EMUL .05%	\$0(2)	
FLAREX SUSP .1%	\$0(2)	
<i>fluorometholone (ophth) SUSP .1%</i>	\$0(1)	
<i>flurbiprofen sodium SOLN .03%</i>	\$0(1)	
ILEVRO SUSP .3%	\$0(2)	
<i>ketorolac tromethamine (ophth) SOLN .4%, .5%</i>	\$0(1)	
LOTEMAX OINT .5%	\$0(2)	
<i>prednisolone acetate (ophth) SUSP 1%</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
PREDNISOLONE SODIUM PHOSP SOLN 1%	\$0(2)	
PROLENSA SOLN .07%	\$0(2)	
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES		
alaway SOLN .025%	\$0(3)	NM; *
alaway childrens allergy SOLN .025%	\$0(3)	NM; *
azelastine hcl (ophth) SOLN .05%	\$0(1)	
bepotastine besilate SOLN 1.5%	\$0(1)	
BEPREVE SOLN 1.5%	\$0(2)	
cromolyn sodium (ophth) SOLN 4%	\$0(1)	
eye itch relief SOLN .025%	\$0(3)	NM; *
ketotifen fumarate (ophth) SOLN .025%	\$0(3)	NM; *
LASTACRAFT SOLN .25%	\$0(2)	
NAPHCON-A SOL OP	\$0(3)	NM; *
olopatadine hcl SOLN .1%	\$0(1)	
olopatadine hcl SOLN .1%, .2%	\$0(3)	NM; *
PATADAY EXTRA STRENGTH SOLN .7%	\$0(3)	NM; *
sm eye itch relief SOLN .025%	\$0(3)	NM; *
ZERVIADE SOLN .24%	\$0(2)	
ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA		
ALPHAGAN P SOLN .1%	\$0(2)	
betaxolol hcl (ophth) SOLN .5%	\$0(1)	
BETOPTIC-S SUSP .25%	\$0(2)	
brimonidine tartrate SOLN .15%, .2%	\$0(1)	
brinzolamide SUSP 1%	\$0(1)	
carteolol hcl (ophth) SOLN 1%	\$0(1)	
COMBIGAN SOL 0.2/0.5%	\$0(2)	
dorzolamide hcl SOLN 2%	\$0(1)	
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml	\$0(1)	
latanoprost SOLN .005%	\$0(1)	
levobunolol hcl SOLN .5%	\$0(1)	
LUMIGAN SOLN .01%	\$0(2)	
pilocarpine hcl SOLN 1%, 2%, 4%	\$0(1)	
RHOPRESSA SOLN .02%	\$0(2)	
SIMBRINZA SUS 1-0.2%	\$0(2)	
timolol maleate (ophth) SOLG .25%, .5%; SOLN .25%, .5%	\$0(1)	
timolol maleate (ophth) once-daily SOLN .5%	\$0(1)	
VYZULTA SOLN .024%	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
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MISCELLANEOUS

<i>artificial tears</i> SOLN 1.4%	\$0(3)	NM; *
ATROPINE SULFATE SOLN 1%	\$0(2)	
<i>bion tears</i>	\$0(3)	NM; *
<i>carboxymethylcellulose sodium (ophth)</i> SOLN .5%	\$0(3)	NM; *
CYSTADROPS SOLN .37%	\$0(2)	NDS, NM, LA, PA
CYSTARAN SOLN .44%	\$0(2)	NDS, NM, LA, PA
<i>dry eye relief drops</i>	\$0(3)	NM; *
FRESHKOTE PF SOL 2.7-2%	\$0(3)	NM; *
GENTEAL SEVERE TEARS GEL .3%	\$0(3)	NM; *
<i>genteal tears liquid drop</i>	\$0(3)	NM; *
<i>genteal tears mild</i>	\$0(3)	NM; *
<i>genteal tears night-time</i>	\$0(3)	NM; *
<i>gnp artificial tears</i>	\$0(3)	NM; *
<i>gnp lubricating plus eye</i> SOLN .5%	\$0(3)	NM; *
GONAK SOLN 2.5%	\$0(3)	NM; *
<i>goodsense lubricating plu</i> SOLN .5%	\$0(3)	NM; *
<i>hm dry eye relief</i>	\$0(3)	NM; *
<i>hm lubricating plus</i> SOLN .5%	\$0(3)	NM; *
<i>hm lubricating tears</i>	\$0(3)	NM; *
ISOPTO ATROPINE SOLN 1%	\$0(2)	
ISOPTO TEARS SOLN .5%	\$0(3)	NM; *
<i>lubricant eye drops</i> SOLN .5%	\$0(3)	NM; *
<i>lubricant eye nighttime</i>	\$0(3)	NM; *
<i>lubricating eye drops</i>	\$0(3)	NM; *
<i>lubricating plus eye drop</i> SOLN .5%	\$0(3)	NM; *
MURO 128 SOLN 2%	\$0(3)	NM; *
<i>proparacaine hcl</i> SOLN .5%	\$0(1)	
<i>refresh celluvisc</i> GEL 1%	\$0(3)	NM; *
REFRESH DRO CONTACTS	\$0(3)	NM; *
REFRESH DRO OP	\$0(3)	NM; *
REFRESH DRO RELIEVA	\$0(3)	NM; *
REFRESH GEL OPTIVE	\$0(3)	NM; *
<i>refresh lacri-lube</i>	\$0(3)	NM; *
REFRESH LIQUIGEL GEL 1%	\$0(3)	NM; *
REFRESH OPT SOL MEGA-3	\$0(3)	NM; *
REFRESH OPTI DRO 0.5-0.9%	\$0(3)	NM; *
<i>refresh p.m.</i>	\$0(3)	NM; *
REFRESH SOL DIGITAL	\$0(3)	NM; *
REFRESH SOL OPTIVE	\$0(3)	NM; *
RESTASIS EMUL .05%	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
RESTASIS MULTIDOSE EMUL .05%	\$0(2)	
<i>sm lubricant eye drops</i>	\$0(3)	NM; *
<i>sm lubricating plus SOLN .5%</i>	\$0(3)	NM; *
<i>sm lubricating tears</i>	\$0(3)	NM; *
<i>sodium chloride hypertonic OINT 5%; SOLN 5%</i>	\$0(3)	NM; *
SYSTANE COMPLETE SOLN .6%	\$0(3)	NM; *
SYSTANE GEL DRO 0.4-0.3%	\$0(3)	NM; *
<i>systane nighttime</i>	\$0(3)	NM; *
SYSTANE OVERNIGHT THERAPY GEL .3%	\$0(3)	NM; *
<i>ultra lubricating eye dro</i>	\$0(3)	NM; *

OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR

OTIC AGENTS

<i>acetic acid (otic) SOLN 2%</i>	\$0(1)	
<i>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</i>	\$0(1)	
<i>flac OIL .01%</i>	\$0(1)	
<i>fluocinolone acetonide (otic) OIL .01%</i>	\$0(1)	
<i>neomycin-polymyxin-hc otic soln 1%</i>	\$0(1)	
<i>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</i>	\$0(1)	
<i>ofloxacin (otic) SOLN .3%</i>	\$0(1)	

RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS

ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD

ANORO ELLIPT AER 62.5-25	\$0(2)	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	\$0(2)	QL (4 inhalers / 28 days)
COMBIVENT AER 20-100	\$0(2)	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5- 2.5(3) mg/3ml</i>	\$0(1)	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
ANTICHOLINERGICS - DRUGS TO TREAT COPD		
ATROVENT HFA AERS 17mcg/act	\$0(2)	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	\$0(2)	QL (30 blisters / 30 days)
<i>ipratropium bromide</i> SOLN .02%	\$0(1)	B/D
<i>ipratropium bromide (nasal)</i> SOLN .03%, .06%	\$0(1)	
ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES		
<i>aller-chlor</i> TABS 4mg	\$0(3)	NM; *
<i>aller-ease</i> TABS 60mg	\$0(3)	NM; *
<i>allergy</i> TABS 4mg	\$0(3)	NM; *
<i>allergy 24-hr</i> TABS 180mg	\$0(3)	NM; *
<i>allergy childrens</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>allergy relief</i> CAPS 25mg; TABS 4mg, 25mg, 180mg	\$0(3)	NM; *
<i>allergy relief 24hr</i> TABS 180mg	\$0(3)	NM; *
<i>allergy relief childrens</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>allergy-time</i> TABS 4mg	\$0(3)	NM; *
<i>azelastine hcl</i> SOLN .1%, .15%	\$0(1)	
<i>banophen</i> CAPS 25mg, 50mg; TABS 25mg	\$0(3)	NM; *
<i>cetirizine hcl</i> SOLN 1mg/ml	\$0(1)	
<i>complete allergy medicine</i> CAPS 25mg	\$0(3)	NM; *
<i>cyproheptadine hcl</i> SYRP 2mg/5ml; TABS 4mg	\$0(2)	PA; PA if 70 years and older
<i>diphenhist</i> CAPS 25mg	\$0(3)	NM; *
<i>diphenhydramine hcl</i> CAPS 25mg, 50mg; LIQD 12.5mg/5ml, 25mg/10ml; TABS 25mg	\$0(3)	NM; *
<i>diphenhydramine hcl</i> SOLN 50mg/ml	\$0(1)	
<i>diphenhydramine hydrochlo</i> LIQD 6.25mg/ml	\$0(3)	NM; *
<i>ed chlorped jr</i> SYRP 2mg/5ml	\$0(3)	NM; *
<i>fexofenadine hcl</i> TABS 60mg, 180mg	\$0(3)	NM; *
<i>gnp allergy</i> TABS 25mg	\$0(3)	NM; *
<i>gnp allergy relief</i> CAPS 25mg; CHEW 12.5mg; TABS 4mg	\$0(3)	NM; *
<i>gnp childrens allergy</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>goodsense aller-ease</i> TABS 180mg	\$0(3)	NM; *
<i>goodsense allergy relief</i> TABS 4mg	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm allergy relief</i> CAPS 25mg; TABS 4mg, 25mg	\$0(3)	NM; *
<i>hm allergy relief childre</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>hm fexofenadine hydrochlo</i> TABS 60mg, 180mg	\$0(3)	NM; *
<i>24hr allergy relief</i> TABS 180mg	\$0(3)	NM; *
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml; SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg	\$0(2)	PA; PA if 70 years and older
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml; TABS 5mg	\$0(1)	
<i>liquid allergy relief</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>m-dryl</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>pharbechlor</i> TABS 4mg	\$0(3)	NM; *
<i>pharbedryl</i> CAPS 25mg, 50mg	\$0(3)	NM; *
<i>qc fexofenadine hydrochlo</i> TABS 180mg	\$0(3)	NM; *
<i>siladryl allergy</i> LIQD 12.5mg/5ml	\$0(3)	NM; *
<i>sm allergy 4 hour</i> TABS 4mg	\$0(3)	NM; *
<i>sm allergy relief</i> CAPS 25mg; LIQD 12.5mg/5ml; TABS 25mg	\$0(3)	NM; *
<i>sm fexofenadine hydrochlo</i> TABS 180mg	\$0(3)	NM; *
BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD		
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	\$0(1)	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	\$0(1)	
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
levalbuterol tartrate AERO 45mcg/act	\$0(1)	QL (2 inhalers / 30 days)
SEREVENT DISKUS AEPB 50mcg/dose	\$0(2)	QL (60 inhalations / 30 days)
terbutaline sulfate TABS 2.5mg, 5mg	\$0(1)	
VENTOLIN HFA AERS 108mcg/act	\$0(2)	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	\$0(2)	QL (6 inhalers / 30 days)
COUGH AND COLD		
ALAHIST PE TAB 2-7.5MG	\$0(3)	NM; *
benzonatate CAPS 100mg, 150mg, 200mg	\$0(3)	NM; *
*camphor-eucalyptus-menthol - oint***	\$0(3)	NM; *
dexbrompheniramine-phenylephrine tab 2-10 mg	\$0(3)	NM; *
gnp chest rub	\$0(3)	NM; *
gnp nasal spray SOLN .05%	\$0(3)	NM; *
gnp nasal spray extra moi SOLN .05%	\$0(3)	NM; *
gnp no drip nasal spray SOLN .05%	\$0(3)	NM; *
hm chest rub	\$0(3)	NM; *
hm nasal spray SOLN .05%	\$0(3)	NM; *
hm sinus nasal spray SOLN .05%	\$0(3)	NM; *
12 hour nasal spray SOLN .05%	\$0(3)	NM; *
mucinex childrens stuffy SOLN .05%	\$0(3)	NM; *
mucinex sinus-max clear & SOLN .05%	\$0(3)	NM; *
mucinex sinus-max sinus/a SOLN .05%	\$0(3)	NM; *
nasal decongestant spray SOLN .05%	\$0(3)	NM; *
nasal relief SOLN .05%	\$0(3)	NM; *
nasal spray 12 hour SOLN .05%	\$0(3)	NM; *
nasal spray extra moistur SOLN .05%	\$0(3)	NM; *
nasal spray no drip SOLN .05%	\$0(3)	NM; *
no drip nasal spray SOLN .05%	\$0(3)	NM; *
sinus nasal spray SOLN .05%	\$0(3)	NM; *
SM MEDICATED MIS CHST RUB	\$0(3)	NM; *
sm nasal spray SOLN .05%	\$0(3)	NM; *
sm nasal spray 12 hour SOLN .05%	\$0(3)	NM; *
sm nasal spray moisturizi SOLN .05%	\$0(3)	NM; *
sm nasal spray sinus SOLN .05%	\$0(3)	NM; *
soothing - 12 hour nasal SOLN .05%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
LEUKOTRIENE MODULATORS		
montelukast sodium CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	\$0(1)	
zafirlukast TABS 10mg, 20mg	\$0(1)	
MISCELLANEOUS		
acetylcysteine SOLN 10%, 20%	\$0(1)	B/D
ARALAST NP SOLR 500mg, 1000mg	\$0(2)	NDS, NM, LA, PA
AYR NASAL MIST ALLERGY & SOLN 2.65%	\$0(3)	NM; *
cromolyn sodium NEBU 20mg/2ml	\$0(1)	B/D
DALIRESP TABS 250mcg, 500mcg	\$0(2)	
epinephrine (anaphylaxis) SOAJ .15mg/0.3ml, .3mg/0.3ml	\$0(1)	(generic of EpiPen)
epinephrine (anaphylaxis) SOAJ .15mg/0.15ml, .3mg/0.3ml	\$0(1)	(generic of Adrenaclick)
ESBRIET CAPS 267mg	\$0(2)	NDS, QL (270 caps / 30 days), NM, PA
ESBRIET TABS 267mg	\$0(2)	NDS, QL (270 tabs / 30 days), NM, PA
ESBRIET TABS 801mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
FASENRA SOSY 30mg/ml	\$0(2)	NDS, NM, LA, PA
FASENRA PEN SOAJ 30mg/ml	\$0(2)	NDS, NM, LA, PA
KALYDECO PACK 25mg, 50mg, 75mg	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
KALYDECO TABS 150mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
nasal moisturizing spray SOLN .65%	\$0(3)	NM; *
OFEV CAPS 100mg, 150mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 100-125	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
ORKAMBI GRA 150-188	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
ORKAMBI TAB 100-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml; SOLR 1000mg	\$0(2)	NDS, NM, LA, PA
PULMOZYME SOLN 2.5mg/2.5ml	\$0(2)	NDS, NM, PA
SYMDEKO TAB 50-75MG	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SYMDEKO TAB 100-150	\$0(2)	NDS, QL (56 tabs / 28 days), NM, LA, PA
SYMJEPI SOSY .15mg/0.3ml,.3mg/0.3ml	\$0(2)	
THEO-24 CP24 100mg, 200mg, 300mg, 400mg	\$0(2)	
<i>theophylline</i> SOLN 80mg/15ml; TB12 300mg, 450mg; TB24 400mg, 600mg	\$0(1)	
TRIKAFTA TAB 50-25-37.5MG & 75MG	\$0(2)	NDS, QL (84 tabs / 28 days), LA, PA
TRIKAFTA TAB 100-50-75MG & 150MG	\$0(2)	NDS, QL (84 tabs / 28 days), NM, LA, PA
XOLAIR SOLR 150mg; SOSY 75mg/0.5ml, 150mg/ml	\$0(2)	NDS, NM, LA, PA
ZEMAIRA SOLR 1000mg	\$0(2)	NDS, NM, LA, PA

NASAL STEROIDS - DRUGS TO TREAT ALLERGIES

<i>allergy relief</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>budesonide (nasal)</i> SUSP 32mcg/act	\$0(3)	NM; *
<i>flunisolide (nasal)</i> SOLN .025%	\$0(1)	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(1)	QL (1 bottle / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>gnp 24 hour nasal allerg</i> AERO 55mcg/act	\$0(3)	NM; *
<i>gnp budesonide nasal spra</i> SUSP 32mcg/act	\$0(3)	NM; *
<i>gnp fluticasone propionat</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>goodsense nasal allergy s</i> AERO 55mcg/act	\$0(3)	NM; *
<i>hm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>nasal allergy 24 hour mul</i> AERO 55mcg/act	\$0(3)	NM; *
<i>qc allergy relief</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>sm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	NM; *
<i>triamcinolone acetonide (nasal)</i> AERO 55mcg/act	\$0(3)	NM; *

STEROID INHALANTS - DRUGS TO TREAT ASTHMA

ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	\$0(2)	QL (30 inhalations / 30 days)
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You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
budesonide (inhalation) SUSP .25mg/2ml, .5mg/2ml	\$0(1)	B/D
FLOVENT DISKUS AEPB 50mcg/blist	\$0(2)	QL (180 inhalations / 30 days)
FLOVENT DISKUS AEPB 100mcg/blist, 250mcg/blist	\$0(2)	QL (240 inhalations / 30 days)
FLOVENT HFA AERO 44mcg/act, 110mcg/act, 220mcg/act	\$0(2)	QL (2 inhalers / 30 days)
PULMICORT FLEXHALER AEPB 90mcg/act	\$0(2)	QL (3 inhalers / 30 days)
PULMICORT FLEXHALER AEPB 180mcg/act	\$0(2)	QL (2 inhalers / 30 days)

STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT ASTHMA AND COPD

ADVAIR DISKU AER 100/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 250/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR DISKU AER 500/50	\$0(2)	QL (60 inhalations / 30 days)
ADVAIR HFA AER 45/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	\$0(2)	QL (1 inhaler / 30 days)
BREO ELLIPTA INH 100-25	\$0(2)	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	\$0(2)	QL (60 blisters / 30 days)
SYMBICORT AER 80-4.5	\$0(2)	QL (1 inhaler / 30 days)
SYMBICORT AER 160-4.5	\$0(2)	QL (1 inhaler / 30 days)

TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS

DERMATOLOGY, ACNE

accutane CAPS 20mg, 30mg, 40mg	\$0(1)	PA
acne medication 2.5 GEL 2.5%	\$0(3)	NM; *
acne medication 5 GEL 5%	\$0(3)	NM; *
ACNE MEDICATION 5 LOTN 5%	\$0(3)	NM; *
acne medication 10 GEL 10%	\$0(3)	NM; *
ACNE MEDICATION 10 LOTN 10%	\$0(3)	NM; *
adapalene GEL .1%	\$0(3)	NM; *
amnesteem CAPS 10mg, 20mg, 40mg	\$0(1)	PA
avita CREA .025%; GEL .025%	\$0(1)	QL (45 gm / 30 days), PA
benzefoam FOAM 5.3%	\$0(3)	NM; *
benzoyl peroxide GEL 2.5%, 5%, 10%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
BENZOYL PEROXIDE CLEANSER LIQD 6%	\$0(3)	NM; *
<i>benzoyl peroxide wash</i> LIQD 5%, 10%	\$0(3)	NM; *
<i>benzoyl peroxide-erythromycin gel</i> 5-3%	\$0(1)	QL (46.6 gm / 30 days)
<i>bpo foaming cloths</i> MISC 6%	\$0(3)	NM; *
<i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>clindamycin phosphate (topical)</i> GEL 1%	\$0(1)	QL (75 gm / 30 days)
<i>clindamycin phosphate (topical)</i> LOTN 1%; SOLN 1%	\$0(1)	QL (60 mL / 30 days)
<i>ery</i> PADS 2%	\$0(1)	QL (60 pledges / 30 days)
<i>erythromycin (acne aid)</i> SOLN 2%	\$0(1)	QL (60 mL / 30 days)
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>myorisan</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>sulfacetamide sodium (acne)</i> LOTN 10%	\$0(1)	QL (118 mL / 30 days)
<i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%	\$0(1)	QL (45 gm / 30 days), PA
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA

DERMATOLOGY, ANTIBIOTICS

<i>bacitracin (topical)</i> OINT 500unit/gm	\$0(3)	NM; *
<i>bacitracin zinc</i> OINT 500unit/gm	\$0(3)	NM; *
<i>double antibiotic</i>	\$0(3)	NM; *
<i>first aid antibiotic</i>	\$0(3)	NM; *
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	\$0(1)	QL (30 gm / 30 days)
<i>gnp bacitracin zinc</i> OINT 500unit/gm	\$0(3)	NM; *
<i>gnp triple antibiotic</i>	\$0(3)	NM; *
<i>gnp triple antibiotic plu</i>	\$0(3)	NM; *
<i>hm bacitracin</i> OINT 500unit/gm	\$0(3)	NM; *
<i>hm double antibiotic</i>	\$0(3)	NM; *
<i>hm triple antibiotic</i>	\$0(3)	NM; *
<i>hm triple antibiotic plus</i>	\$0(3)	NM; *
<i>mupirocin</i> OINT 2%	\$0(1)	QL (220 gm / 30 days)
<i>poly bacitracin</i>	\$0(3)	NM; *
<i>qc triple antibiotic maxi</i>	\$0(3)	NM; *
<i>silver sulfadiazine</i> CREA 1%	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sm antibiotic</i> OINT 500unit/gm	\$0(3)	NM; *
<i>sm double antibiotic</i>	\$0(3)	NM; *
<i>sm triple antibiotic</i>	\$0(3)	NM; *
<i>sm triple antibiotic orig</i>	\$0(3)	NM; *
<i>sm triple antibiotic plus</i>	\$0(3)	NM; *
<i>ssd</i> CREA 1%	\$0(1)	
SULFAMYLYON CREA 85mg/gm	\$0(2)	QL (453.6 gm / 30 days)
<i>triple antibiotic</i>	\$0(3)	NM; *
<i>triple antibiotic + pain</i>	\$0(3)	NM; *
<i>triple antibiotic plus</i>	\$0(3)	NM; *
<i>DERMATOLOGY, ANTIFUNGALS</i>		
ALEVAZOL OINT 1%	\$0(3)	NM; *
<i>anti-fungal powder</i> POWD 1%	\$0(3)	NM; *
<i>anti-itch</i>	\$0(3)	NM; *
<i>antifungal</i> CREA 1%, 2%	\$0(3)	NM; *
<i>antifungal powder</i> POWD 2%	\$0(3)	NM; *
<i>athletes foot</i> CREA 1%	\$0(3)	NM; *
<i>athletes foot antifungal</i> AERP 1%	\$0(3)	NM; *
<i>athletes foot powder spra</i> AERP 2%	\$0(3)	NM; *
<i>athletes foot spray</i> AERO 1%	\$0(3)	NM; *
<i>banophen</i>	\$0(3)	NM; *
<i>butenafine hcl</i> CREA 1%	\$0(3)	NM; *
<i>castellani paint</i> LIQD 1.5%	\$0(3)	NM; *
<i>ciclopirox olamine</i> CREA .77%	\$0(1)	QL (90 gm / 30 days)
<i>ciclopirox olamine</i> SUSP .77%	\$0(1)	QL (60 mL / 30 days)
<i>clotrimazole (topical)</i> CREA 1%	\$0(1)	QL (45 gm / 30 days)
<i>clotrimazole (topical)</i> CREA 1%; SOLN 1%	\$0(3)	NM; *
<i>clotrimazole (topical)</i> SOLN 1%	\$0(1)	QL (30 mL / 30 days)
<i>clotrimazole antifungal</i> CREA 1%	\$0(3)	NM; *
<i>clotrimazole athletes foo</i> CREA 1%	\$0(3)	NM; *
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0(1)	QL (45 gm / 30 days)
<i>diphenhydramine-zinc acetate cream 2-0.1%</i>	\$0(3)	NM; *
FUNGOID TINCTURE SOLN 2%	\$0(3)	NM; *
<i>gnp anti-itch</i>	\$0(3)	NM; *
<i>gnp athletes foot</i> CREA 1%	\$0(3)	NM; *
<i>gnp itch relief extra str</i>	\$0(3)	NM; *
<i>gnp terbinafine hydrochlo</i> CREA 1%	\$0(3)	NM; *
<i>gnp tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>itch relief extra strengt</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL) LIMITS ON USE
<i>ketoconazole (topical)</i> CREA 2%	\$0(1)	QL (60 gm / 30 days)
<i>miconazole nitrate (topical)</i> CREA 2%	\$0(3)	NM; *
<i>mycozyl ap</i> POWD 2%	\$0(3)	NM; *
<i>nyamyc</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	\$0(1)	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>qc anti-itch extra streng</i>	\$0(3)	NM; *
<i>qc tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>sm anti-itch extra streng</i>	\$0(3)	NM; *
<i>sm antifungal clotrimazol</i> CREA 1%	\$0(3)	NM; *
<i>sm antifungal miconazole</i> CREA 2%	\$0(3)	NM; *
<i>sm antifungal tolnaftate</i> CREA 1%	\$0(3)	NM; *
<i>sm athletes foot</i> CREA 1%	\$0(3)	NM; *
<i>terbinafine hcl (topical)</i> CREA 1%	\$0(3)	NM; *
<i>tolnaftate</i> CREA 1%; POWD 1%	\$0(3)	NM; *
<i>tolnaftate antifungal</i> CREA 1%	\$0(3)	NM; *

DERMATOLOGY, ANTIPIRSORIATICS

<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	\$0(1)	PA
<i>calcipotriene</i> OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	\$0(1)	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
<i>tazarotene</i> CREA .1%	\$0(1)	QL (60 gm / 30 days), PA
<i>TAZORAC</i> CREA .05%	\$0(2)	QL (60 gm / 30 days), PA

DERMATOLOGY, ANTISEBORRHEICS

<i>ketoconazole (topical)</i> SHAM 2%	\$0(1)	QL (120 mL / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	\$0(1)	

DERMATOLOGY, CORTICOSTEROIDS

<i>ala-cort</i> CREA 1%, 2.5%	\$0(1)	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	\$0(1)	QL (60 gm / 30 days)
<i>anti-itch maximum strengt</i> CREA 1%	\$0(3)	NM; *
<i>betamethasone dipropionate (topical)</i> CREA .05%; OINT .05%	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> LOTN .05%	\$0(1)	QL (120 mL / 30 days)

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>betamethasone dipropionate augmented CREA .05%; GEL .05%; OINT .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented LOTN .05%</i>	\$0(1)	QL (120 mL / 30 days)
<i>betamethasone valerate CREA .1%; OINT .1%</i>	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone valerate LOTN .1%</i>	\$0(1)	QL (120 mL / 30 days)
<i>clobetasol propionate CREA .05%; GEL .05%; OINT .05%</i>	\$0(1)	QL (60 gm / 30 days)
<i>clobetasol propionate SOLN .05%</i>	\$0(1)	QL (50 mL / 30 days)
<i>clobetasol propionate e CREA .05% ENSTILAR AER</i>	\$0(1)	QL (60 gm / 30 days)
<i>fluocinolone acetonide CREA .01% fluocinolone acetonide CREA .025%; OINT .025%</i>	\$0(1)	QL (60 gm / 30 days)
<i>fluocinolone acetonide OIL .01%</i>	\$0(1)	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide SOLN .01%</i>	\$0(1)	QL (90 mL / 30 days)
<i>fluocinonide CREA .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>fluocinonide GEL .05%; OINT .05%</i>	\$0(1)	QL (60 gm / 30 days)
<i>fluocinonide SOLN .05%</i>	\$0(1)	QL (60 mL / 30 days)
<i>fluocinonide emulsified base CREA .05%</i>	\$0(1)	QL (120 gm / 30 days)
<i>fluticasone propionate CREA .05%; OINT .005%</i>	\$0(1)	
<i>gnp hydrocortisone CREA .5%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone maximu OINT 1%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone plus CREA 1%</i>	\$0(3)	NM; *
<i>gnp hydrocortisone/aloe</i>	\$0(3)	NM; *
<i>halobetasol propionate CREA .05%; OINT .05%</i>	\$0(1)	QL (50 gm / 30 days)
<i>hm hydrocortisone plus</i>	\$0(3)	NM; *
<i>hm hydrocortisone/aloe ma</i>	\$0(3)	NM; *
<i>HYDROCORTISONE OINT 1%</i>	\$0(3)	NM; *
<i>hydrocortisone (topical) CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%</i>	\$0(1)	
<i>hydrocortisone (topical) CREA 1%; OINT 1%</i>	\$0(3)	NM; *
<i>hydrocortisone maximum st CREA 1%</i>	\$0(3)	NM; *
<i>hydrocortisone-aloe vera cream 0.5%</i>	\$0(3)	NM; *
<i>hydrocortisone-aloe vera cream 1%</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hydrocortisone/aloe maxim</i>	\$0(3)	NM; *
<i>mometasone furoate CREA .1%; OINT .1%; SOLN .1%</i>	\$0(1)	
<i>scalpicin maximum strengt SOLN 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone CREA 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone maximum OINT 1%</i>	\$0(3)	NM; *
<i>sm hydrocortisone plus</i>	\$0(3)	NM; *
<i>triamcinolone acetonide (topical) CREA .1%</i>	\$0(1)	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical) CREA .025%, .5%; LOTN .025%, .1%; OINT .025%, .1%, .5%</i>	\$0(1)	
<i>triderm CREA .5%</i>	\$0(1)	
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo PRSY 2%</i>	\$0(1)	QL (60 mL / 30 days), PA
<i>lidocaine OINT 5%</i>	\$0(1)	QL (50 gm / 30 days), PA
<i>lidocaine PTCH 5%</i>	\$0(1)	QL (3 patches / 1 day), PA
<i>lidocaine hcl GEL 2%</i>	\$0(1)	QL (30 mL / 30 days), PA
<i>lidocaine hcl SOLN 4%</i>	\$0(1)	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream 2.5-2.5%</i>	\$0(1)	QL (30 gm / 30 days), PA
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
<i>a&d</i>	\$0(3)	NM; *
<i>aluminum sulfate & calcium acetate powd pack</i>	\$0(3)	NM; *
<i>anti-dandruff shampoo SHAM 1%</i>	\$0(3)	NM; *
<i>anti-itch</i>	\$0(3)	NM; *
<i>antiseptic skin cleanser SOLN 4%</i>	\$0(3)	NM; *
<i>ARTHRITIS PAIN RELIEVING CREA .075%</i>	\$0(3)	NM; *
<i>BETADINE SOLN 5%</i>	\$0(3)	NM; *
<i>BETADINE SURGICAL SCRUB SOLN 7.5%</i>	\$0(3)	NM; *
<i>betasept surgical scrub LIQD 4%</i>	\$0(3)	NM; *
<i>CALAMINE LOT</i>	\$0(3)	NM; *
<i>CALAMINE LOT 8-8%</i>	\$0(3)	NM; *
<i>CAMPHOTREX GEL 10-4%</i>	\$0(3)	NM; *
<i>capsaicin CREA .025%, .1%</i>	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
CETAPHIL LIQ CLEANSER	\$0(3)	NM; *
CETAPHIL LIQ OIL SKIN	\$0(3)	NM; *
CETAPHIL LOT MOISTURE	\$0(3)	NM; *
<i>corn and callus remover</i> LIQD 17%	\$0(3)	NM; *
COZIMA CREA 24%	\$0(3)	NM; *
<i>dandruff shampoo</i> LOTN 1%	\$0(3)	NM; *
<i>diaper rash</i> OINT 40%	\$0(3)	NM; *
<i>diclofenac sodium (topical)</i> GEL 1%	\$0(1)	QL (1000 gm / 30 days), PA
DR SMITHS ADULT BARRIER S AERO 10%	\$0(3)	NM; *
DR SMITHS DIAPER OINT 10%	\$0(3)	NM; *
DR SMITHS DIAPER RASH SPR AERO 10%	\$0(3)	NM; *
<i>dyna-hex 4</i> SOLN 4%	\$0(3)	NM; *
EYE-SCRUB PAD	\$0(3)	NM; *
<i>fluorouracil (topical)</i> CREA 5%	\$0(1)	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	\$0(1)	QL (10 mL / 30 days)
<i>gnp anti-itch</i>	\$0(3)	NM; *
<i>gnp antiseptic skin clean</i> SOLN 4%	\$0(3)	NM; *
<i>gnp arthricream</i> CREA 10%	\$0(3)	NM; *
GNP CALAMINE LOT 8-8%	\$0(3)	NM; *
GNP CAPSAICIN LIQD .15%	\$0(3)	NM; *
<i>gnp cold & hot therapy ba</i>	\$0(3)	NM; *
<i>gnp hemorrhoidal</i>	\$0(3)	NM; *
<i>gnp hydrogen peroxide</i> SOLN 3%	\$0(3)	NM; *
<i>gnp lidocaine pain relief</i> PTCH 4%	\$0(3)	NM; *
<i>gnp muscle rub</i>	\$0(3)	NM; *
<i>gnp scalp relief</i> LIQD 3%	\$0(3)	NM; *
<i>gnp vitamin a & d</i>	\$0(3)	NM; *
<i>gnp wart remover</i> LIQD 17%	\$0(3)	NM; *
<i>gnp zinc oxide</i> OINT 20%	\$0(3)	NM; *
<i>goodsense hemorrhoidal</i>	\$0(3)	NM; *
<i>goodsense hemorrhoidal oi</i>	\$0(3)	NM; *
<i>hemorrhoidal</i>	\$0(3)	NM; *
<i>hemorrhoidal relief cream</i> CREA 5%	\$0(3)	NM; *
<i>hm antiseptic skin cleans</i> SOLN 4%	\$0(3)	NM; *
HM CALAMINE LOT 8-8%	\$0(3)	NM; *
<i>hm hemorrhoidal</i>	\$0(3)	NM; *
<i>hm hydrogen peroxide</i> SOLN 3%	\$0(3)	NM; *
<i>hm povidone-iodine</i> SOLN 10%	\$0(3)	NM; *
<i>hydrocortisone (rectal)</i> CREA 2.5%	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hydrogen peroxide</i> SOLN 3%	\$0(3)	NM; *
<i>hysept</i> SOLN .25%, .5%	\$0(3)	NM; *
<i>imiquimod</i> CREA 5%	\$0(1)	QL (24 packets / 30 days)
<i>IONIL-T</i> SHAM 1%	\$0(3)	NM; *
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	\$0(1)	
<i>lactic acid (ammonium lactate)</i> CREA 12%; LOTN 12%	\$0(3)	NM; *
<i>LIDOCAINE</i> CREA 3%	\$0(3)	NM; *
<i>lidocaine</i> CREA 4%	\$0(3)	NM; *
<i>lidocaine (anorectal)</i> CREA 5%	\$0(3)	NM; *
<i>lidocaine pain relief pat</i> PTCH 4%	\$0(3)	NM; *
<i>lidocaine pain relieving</i> PTCH 4%	\$0(3)	NM; *
<i>MEDERMA</i> CRE SPF 30	\$0(3)	NM; *
<i>medicated callus removers</i> PADS 40%	\$0(3)	NM; *
<i>medicated corn removers</i> PADS 40%	\$0(3)	NM; *
<i>metronidazole (topical)</i> CREA .75%; GEL .75%	\$0(1)	QL (45 gm / 30 days)
<i>metronidazole (topical)</i> LOTN .75%	\$0(1)	QL (59 mL / 30 days)
<i>moisturizing cream</i>	\$0(3)	NM; *
<i>muscle rub</i>	\$0(3)	NM; *
<i>pain relieving cream</i> CREA 10%	\$0(3)	NM; *
<i>PANRETIN</i> GEL .1%	\$0(2)	NDS, QL (60 gm / 30 days), PA
<i>phenylephrine-cocoa butter suppos</i> 0.25-88.44%	\$0(3)	NM; *
<i>podofilox</i> SOLN .5%	\$0(1)	QL (7 mL / 28 days)
<i>POISON IVY WASH</i> LOTN 1%	\$0(3)	NM; *
<i>povidone-iodine</i> OINT 10%; SOLN 10%; SWAB 10%	\$0(3)	NM; *
<i>pramoxine hcl (rectal)</i> FOAM 1%	\$0(3)	NM; *
<i>procto-med hc</i> CREA 2.5%	\$0(1)	
<i>procto-pak</i> CREA 1%	\$0(1)	
<i>proctozone-hc</i> CREA 2.5%	\$0(1)	
<i>qc hemorrhoidal</i>	\$0(3)	NM; *
<i>qc povidone iodine</i> SOLN 10%	\$0(3)	NM; *
<i>rectasmooth</i> CREA 5%	\$0(3)	NM; *
<i>RECTIV</i> OINT .4%	\$0(2)	QL (30 gm / 30 days)
<i>RISAMINE</i> OIN	\$0(3)	NM; *
<i>rosadan</i> CREA .75%	\$0(1)	QL (45 gm / 30 days)
<i>sal-plant</i> GEL 17%	\$0(3)	NM; *
<i>SEBEX</i> SHA	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>sm anti-dandruff coal tar</i> SHAM .5%	\$0(3)	NM; *
<i>sm antiseptic skin cleans</i> SOLN 4%	\$0(3)	NM; *
SM CALAMINE LOT	\$0(3)	NM; *
<i>sm cold & hot therapy pa</i>	\$0(3)	NM; *
<i>sm hemorrhoidal</i>	\$0(3)	NM; *
<i>sm hydrogen peroxide</i> SOLN 3%	\$0(3)	NM; *
<i>sm muscle rub</i>	\$0(3)	NM; *
<i>sm povidone-iodine</i> SOLN 10%	\$0(3)	NM; *
<i>sm sports pain relief rub</i> CREA 10%	\$0(3)	NM; *
<i>tacrolimus (topical)</i> OINT .03%, .1%	\$0(1)	QL (100 gm / 30 days)
TARGRETIN GEL 1%	\$0(2)	NDS, QL (60 gm / 30 days), NM, PA
<i>thera-gesic</i>	\$0(3)	NM; *
<i>thera-gesic plus</i>	\$0(3)	NM; *
THERAPEUTIC DANDRUFF SHAM 3%	\$0(3)	NM; *
<i>therapeutic shampoo</i> SHAM .5%	\$0(3)	NM; *
<i>urea 20 intensive hydrati</i> CREA 20%	\$0(3)	NM; *
VALCHLOR GEL .016%	\$0(2)	NDS, QL (60 gm / 30 days), LA, PA
*vitamins a & d oint**	\$0(3)	NM; *
<i>wart remover maximum stre</i> LIQD 17%; STRP 40%	\$0(3)	NM; *
Z-BUM CREA 22%	\$0(3)	NM; *
ZINC OXIDE OINT 25%	\$0(3)	NM; *
<i>zinc oxide (topical)</i> OINT 20%	\$0(3)	NM; *
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
<i>malathion</i> LOTN .5%	\$0(1)	QL (59 mL / 30 days)
<i>permethrin</i> CREA 5%	\$0(1)	QL (60 gm / 30 days)
DERMATOLOGY, WOUND CARE AGENTS		
REGRANEX GEL .01%	\$0(2)	NDS, QL (30 gm / 30 days), PA
SANTYL OINT 250unit/gm	\$0(2)	QL (180 gm / 30 days)
<i>sodium chloride (gu irrigant)</i> SOLN .9%	\$0(1)	
<i>water for irrigation, sterile irrigation soln</i>	\$0(1)	
MOUTH/THROAT/DENTAL AGENTS		
<i>cevimeline hcl</i> CAPS 30mg	\$0(1)	
<i>chlorhexidine gluconate (mouth-throat)</i> SOLN .12%	\$0(1)	
<i>clotrimazole</i> TROC 10mg	\$0(1)	QL (150 lozenges / 30 days)
<i>gnp sore throat spray</i> LIQD 1.4%	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU	NECESSARY ACTIONS RESTRICTIONS OR (TIER LEVEL)
<i>hm sore throat spray</i> LIQD 1.4%	\$0(3)	NM; *
<i>lidocaine hcl (mouth-throat)</i> SOLN 2%	\$0(1)	
<i>nystatin (mouth-throat)</i> SUSP 100000unit/ml	\$0(1)	
<i>periogard</i> SOLN .12%	\$0(1)	
<i>phenaseptic</i> LIQD 1.4%	\$0(3)	NM; *
<i>pilocarpine hcl (oral)</i> TABS 5mg, 7.5mg	\$0(1)	
<i>qc sore throat spray</i> LIQD 1.4%	\$0(3)	NM; *
<i>sore throat spray</i> LIQD 1.4%	\$0(3)	NM; *
<i>triamcinolone acetonide (mouth)</i> PSTE .1%	\$0(1)	

OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR

<i>ear drops</i> SOLN 6.5%	\$0(3)	NM; *
<i>earwax removal</i> SOLN 6.5%	\$0(3)	NM; *
<i>earwax removal kit</i> SOLN 6.5%	\$0(3)	NM; *
<i>gnp ear drops</i> SOLN 6.5%	\$0(3)	NM; *
<i>gnp earwax removal drops</i> SOLN 6.5%	\$0(3)	NM; *
<i>gnp earwax removal kit</i> SOLN 6.5%	\$0(3)	NM; *
<i>sm ear drops</i> SOLN 6.5%	\$0(3)	NM; *

PART B

DIABETIC METERS AND TEST STRIPS

<i>TRUE METRIX KIT AIR</i>	\$0
<i>TRUE METRIX KIT METER</i>	\$0
<i>TRUE METRIX STRIPS</i>	\$0

You can find information on what the symbols and abbreviations in this table mean by going to page number 11.

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