



# 2023

# Formulary

# (List of Covered Drugs)

# Texas

## Molina Dual Options STAR+PLUS MMP

HPMS Approved Formulary File Submission 00023256, Version 16

Updated: **12/01/2023**

For more recent information or other questions, contact us at (866) 856-8699, TTY: 711, Monday-Friday, 8 a.m. to 8 p.m., local time or visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals)

- **Important Message About What You Pay for Vaccines –** Our plan covers most Part D vaccines at no cost to you. Call Member Services for more information.



# Molina Dual Options STAR+PLUS MMP | 2023 *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 are covered by Molina Dual Options STAR+PLUS MMP. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Molina Dual Options STAR+PLUS MMP. 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 STAR+PLUS MMP.

- ❖ Molina Dual Options STAR+PLUS MMP is a health plan that contracts with both Medicare and Texas Medicaid to provide benefits of both programs to enrollees.
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. The call is free.
- ❖ 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.
- ❖ <https://www.molinahealthcare.com/members/common/en-US/multi-language-taglines.aspx>
- ❖ 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 (866) 856-8699, TTY: 711, Monday - Friday, 8 a.m. to 8 p.m., local time.

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## 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.

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### 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 12 are the drugs covered by Molina Dual Options STAR+PLUS MMP. 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 STAR+PLUS MMP will cover all medically necessary drugs on the Drug List if:
  - 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 STAR+PLUS MMP network pharmacy.
- Molina Dual Options STAR+PLUS MMP may have additional steps to access certain drugs (refer to question B4 below).

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You can also find an up-to-date list of drugs that we cover on our website at MolinaHealthcare.com/Duals or call Member Services at (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time.

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## B2. Does the Drug List ever change?

Yes, and Molina Dual Options STAR+PLUS MMP must follow Medicare and Texas 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 authorization (PA) or approval for a drug. (PA is permission from Molina Dual Options STAR+PLUS MMP 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 Medicare Part D 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 STAR+PLUS MMP's up to date Drug List online at MolinaHealthcare.com/Duals.
- You can also call Member Services to check the current Drug List at (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time.

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

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

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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 31-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.

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#### **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 authorization (PA) or approval:** For some drugs, you or your doctor or other prescriber must get PA from Molina Dual Options STAR+PLUS MMP before

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you fill your prescription. Molina Dual Options STAR+PLUS MMP may not cover the drug if you do not get approval.

- **Quantity limits:** Sometimes Molina Dual Options STAR+PLUS MMP limits the amount of a drug you can get.
- **Step therapy:** Sometimes Molina Dual Options STAR+PLUS MMP 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 12-106. You can also get more information by visiting our website at [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals). We have posted online documents that explain our PA 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.

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#### **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 12 has a column labeled "Necessary actions, restrictions, or limits on use."

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

In some cases, we tell you in advance if we add or change PA, 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.

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#### **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**, refer to the Index of Covered Drugs section. You can find it on page number 107.

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If you have questions, please call Molina Dual Options STAR+PLUS MMP at (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. The call is free. For more information, visit [MolinaHealthcare.com/Duals](http://MolinaHealthcare.com/Duals).

To search by **medical condition**, find the section labeled “Drugs Grouped by Medical Condition” on page 12. 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.

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## 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 (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time and ask about it. If you learn that Molina Dual Options STAR+PLUS MMP 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.

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

We can help. We may cover a temporary 31-day supply of your drug during the first 90 days you are a member of Molina Dual Options STAR+PLUS MMP. 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.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 31 days of medication.

We will cover a 31-day supply 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 PA by Molina Dual Options STAR+PLUS MMP, **or**
- 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 31 supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Molina Dual Options STAR+PLUS MMP member.
- This is in addition to the temporary supply during the first 90 days you are a member of Molina Dual Options STAR+PLUS MMP.

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## Transition Policy

New members in our Plan may be taking drugs that aren't on our formulary or that are subject to certain restrictions, such as prior authorization or step therapy. Current members may also be affected by changes in our formulary from one year to the next. Members should talk to their doctors to decide if they should switch to a different drug that we cover or request a formulary exception in order to get coverage for the drug. See the Member Handbook to learn more about how to request an exception. Please contact Member Services if your drug is not on our formulary, is subject to certain restrictions, such as prior authorization or step therapy, or will no longer be on our formulary next year and you need help switching to a different drug that we cover or requesting a formulary exception.

During the period of time members are talking to their doctors to determine the right course of action, we may provide a temporary supply of the non-formulary drug if those members need a refill for the drug during the first 90 days of new membership in our Plan for Part D drugs (tiers 1 and 2). If you are a current member affected by a formulary change from one year to the next, we will provide a temporary supply of the non-formulary drug if you need a refill for the drug during the first 90 days of the new plan year.

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 31-day supply (unless the prescription is written for fewer days). After we cover the temporary 31-day supply, we generally will not pay for these drugs as part of our transition policy again.

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 a new member is a resident of a long-term-care facility (like a nursing home), we will cover a temporary 31-day transition supply (unless the prescription is written for fewer days). If necessary, we will cover more than one refill of these drugs during the first 90 days a new member is enrolled in our Plan. If the resident has been enrolled in our Plan for more than 90 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 the new member pursues 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 even if you are outside of the first 90 days as a member of the plan.

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

Yes. You can ask Molina Dual Options STAR+PLUS MMP 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 STAR+PLUS MMP 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 PA requirements.

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## **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.

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## **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.

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## **B13. What are generic drugs?**

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 STAR+PLUS MMP covers both brand name drugs and generic drugs.

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## **B14. What are OTC drugs?**

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

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

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## B16. What is my copay?

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

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## 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 \$0 copay.
  - Tier 2 drugs are brand name drugs. For Tier 2 drugs, you pay \$0 copay.
  - Tier 3 drugs are Non-Medicare Rx/Over The Counter (OTC) drugs. For Tier 3 drugs, you pay \$0 copay.
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## 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 STAR+PLUS MMP. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 107. The index alphabetically lists all drugs covered by Molina Dual Options STAR+PLUS MMP.

The first column of the chart lists the name of the drug. Brand name drugs are capitalized (e.g., CIPRO) and generic drugs are listed in lowercase italics (e.g., ciprofloxacin).

The information in the necessary actions, restrictions, or limits on use column tells you if Molina Dual Options STAR+PLUS MMP 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 Texas Medicaid.

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- If you or your doctor disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Member Services at (866) 856-8699, TTY: 711, Monday – Friday, 8 a.m. to 8 p.m., local time. You can also read Chapter 9, of the *Member Handbook* to learn how to appeal a decision.
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## 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.

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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**MOLINA\_TX\_CY23\_2T\_MMP eff 12/01/2023**

| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|--|--|
| <b>(TIER LEVEL)</b>                         |  |  |

**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</i> CAPS .6mg                      | \$0(2) | QL (60 caps / 30 days)  |
| <i>probenecid</i> TABS 500mg                   | \$0(1) |                         |

**NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION**

|  |        |                         |
|--|--------|-------------------------|
| <i>celecoxib</i> CAPS 50mg, 100mg, 200mg                                       | \$0(1) | QL (60 caps / 30 days)  |
| <i>celecoxib</i> CAPS 400mg  | \$0(1) | QL (30 caps / 30 days)  |
| <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>ibu</i> TABS 400mg, 600mg, 800mg  | \$0(1) |                         |
| <i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg                      | \$0(1) |                         |
| <i>meloxicam</i> TABS 7.5mg, 15mg  | \$0(1) |                         |
| <i>nabumetone</i> TABS 500mg, 750mg  | \$0(1) |                         |
| <i>naproxen</i> TABS 250mg, 375mg, 500mg                                       | \$0(1) |                         |
| <i>naproxen</i> TBEC 375mg   | \$0(1) | QL (120 tabs / 30 days) |
| <i>naproxen</i> TBEC 500mg   | \$0(1) | QL (90 tabs / 30 days)  |
| <i>naproxen sodium</i> TABS 275mg, 550mg                                       | \$0(1) |                         |
| <i>piroxicam</i> CAPS 10mg, 20mg   | \$0(1) |                         |
| <i>sulindac</i> TABS 150mg, 200mg  | \$0(1) |                         |

**OPIOID ANALGESICS, LONG-ACTING**

|  |        |                               |
|--|--------|-------------------------------|
| <i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr | \$0(1) | QL (4 patches / 28 days), PA  |
| <i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 50mcg/hr, 75mcg/hr, 100mcg/hr     | \$0(1) | QL (10 patches / 30 days), PA |
| <i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg                  | \$0(1) | QL (30 tabs / 30 days), PA    |
| <i>hydrocodone bitartrate</i> T24A 80mg, 100mg, 120mg                      | \$0(2) | QL (30 tabs / 30 days), PA    |
| <i>HYSINGLA ER</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg, 100mg, 120mg         | \$0(2) | QL (30 tabs / 30 days), PA    |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>                           | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>methadone hcl</i> SOLN 5mg/5ml, 10mg/5ml                           | \$0(1)  | QL (450 mL / 30 days), PA                                      |
| <i>methadone hcl</i> TABS 5mg, 10mg                                   | \$0(1)  | QL (90 tabs / 30 days), PA                                     |
| <i>methadone hydrochloride i</i> CONC 10mg/ml                         | \$0(1)  | QL (90 mL / 30 days), PA                                       |
| <i>morphine sulfate</i> TBCR 15mg, 30mg, 60mg, 100mg, 200mg           | \$0(1)  | QL (90 tabs / 30 days), PA                                     |
| OXYCONTIN T12A 10mg, 15mg, 20mg, 30mg, 40mg, 60mg, 80mg               | \$0(2)  | QL (60 tabs / 30 days), PA                                     |
| <b><i>OPIOID ANALGESICS, SHORT-ACTING</i></b>                         |   |  |
| <i>acetaminophen w/ codeine soln</i> 120-12 mg/5ml                    | \$0(1)  | QL (2700 mL / 30 days)   |
| <i>acetaminophen w/ codeine tab</i> 300-15 mg                         | \$0(1)  | QL (400 tabs / 30 days)  |
| <i>acetaminophen w/ codeine tab</i> 300-30 mg                         | \$0(1)  | QL (360 tabs / 30 days)  |
| <i>acetaminophen w/ codeine tab</i> 300-60 mg                         | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>butorphanol tartrate</i> SOLN 1mg/ml, 2mg/ml                       | \$0(2)  |  |
| <i>endocet tab</i> 2.5-325mg  | \$0(1)  | QL (360 tabs / 30 days)  |
| <i>endocet tab</i> 5-325mg  | \$0(1)  | QL (360 tabs / 30 days)  |
| <i>endocet tab</i> 7.5-325mg  | \$0(1)  | QL (240 tabs / 30 days)  |
| <i>endocet tab</i> 10-325mg   | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>fentanyl citrate</i> LPOP 200mcg                                   | \$0(1)  | QL (120 lozenges / 30 days), PA                                |
| <i>fentanyl citrate</i> LPOP 400mcg, 600mcg, 800mcg, 1200mcg, 1600mcg | \$0(2)  | NDS, QL (120 lozenges / 30 days), PA                           |
| <i>hydrocodone-acetaminophen soln</i> 7.5-325 mg/15ml                 | \$0(1)  | QL (2700 mL / 30 days)   |
| <i>hydrocodone-acetaminophen tab</i> 5-325 mg                         | \$0(1)  | QL (240 tabs / 30 days)  |
| <i>hydrocodone-acetaminophen tab</i> 7.5-325 mg                       | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>hydrocodone-acetaminophen tab</i> 10-325 mg                        | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>hydrocodone-ibuprofen tab</i> 7.5-200 mg                           | \$0(1)  | QL (150 tabs / 30 days)  |
| <i>hydromorphone hcl</i> LIQD 1mg/ml                                  | \$0(1)  | QL (600 mL / 30 days)  |
| <i>hydromorphone hcl</i> TABS 2mg, 4mg, 8mg                           | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>MORPHINE SULFATE</i> SOLN 2mg/ml, 4mg/ml, 5mg/ml, 8mg/ml, 10mg/ml  | \$0(2)  | B/D  |
| <i>morphine sulfate</i> SOLN 4mg/ml, 8mg/ml, 10mg/ml                  | \$0(2)  | B/D  |
| <i>morphine sulfate</i> SOLN 10mg/5ml, 20mg/5ml                       | \$0(1)  | QL (900 mL / 30 days)  |
| <i>morphine sulfate</i> SOLN 20mg/ml                                  | \$0(1)  | QL (180 mL / 30 days)  |
| <i>morphine sulfate</i> TABS 15mg, 30mg                               | \$0(1)  | QL (180 tabs / 30 days)  |

Updated on 12/01/2023

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|--|---|--|
| MORPHINE SULFATE/SODIUM C SOLN<br><u>1mg/ml</u>          | \$0(2)  | B/D  |
| <i>nabuphine hcl</i> SOLN 10mg/ml, 20mg/ml               | \$0(2)  |  |
| <i>oxycodone hcl</i> CAPS 5mg                            | \$0(1)  | QL (180 caps / 30 days)  |
| <i>oxycodone hcl</i> CONC 100mg/5ml                      | \$0(1)  | QL (180 mL / 30 days)  |
| <i>oxycodone hcl</i> SOLN 5mg/5ml                        | \$0(1)  | QL (900 mL / 30 days)  |
| <i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg,<br>20mg, 30mg | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>oxycodone w/ acetaminophen tab 2.5-325 mg</i>         | \$0(1)  | QL (360 tabs / 30 days)  |
| <i>oxycodone w/ acetaminophen tab 5-325 mg</i>           | \$0(1)  | QL (360 tabs / 30 days)  |
| <i>oxycodone w/ acetaminophen tab 7.5-325 mg</i>         | \$0(1)  | QL (240 tabs / 30 days)  |
| <i>oxycodone w/ acetaminophen tab 10-325 mg</i>          | \$0(1)  | QL (180 tabs / 30 days)  |
| <i>tramadol hcl</i> TABS 50mg                            | \$0(1)  | QL (240 tabs / 30 days)  |
| <i>tramadol-acetaminophen tab 37.5-325 mg</i>            | \$0(1)  | QL (240 tabs / 30 days)  |

## **ANESTHETICS - DRUGS FOR NUMBING**

### **LOCAL ANESTHETICS**

|  |        |     |
|--|--------|-----|
| <i>lidocaine hcl</i> (local anesth.) SOLN .5%,<br>1%, 1.5%, 2% | \$0(1) | B/D |
|--|--------|-----|

## **ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS**

### **ANTI-INFECTIVES - MISCELLANEOUS**

|   |        |                 |
|---|--------|-----------------|
| <i>albendazole</i> TABS 200mg   | \$0(2) | NDS             |
| <i>amikacin sulfate</i> SOLN 1gm/4ml,<br>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,<br>300mg                                 | \$0(1) |                 |
| <i>clindamycin palmitate hydrochloride</i> SOLR<br>75mg/5ml                       | \$0(1) |                 |
| <i>clindamycin phosphate</i> SOLN 300mg/2ml,<br>600mg/4ml, 900mg/6ml, 9000mg/60ml | \$0(1) |                 |
| <i>clindamycin phosphate in d5w iv soln</i> 300<br>mg/50ml                        | \$0(1) |                 |
| <i>clindamycin phosphate in d5w iv soln</i> 600<br>mg/50ml                        | \$0(1) |                 |
| <i>clindamycin phosphate in d5w iv soln</i> 900<br>mg/50ml                        | \$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) |                 |

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|---|---|--|
| <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</i> CHEW 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,<br>40mg/ml          | \$0(1)  |  |
| <i>imipenem-cilastatin intravenous for soln</i><br>250 mg   | \$0(1)  |  |
| <i>imipenem-cilastatin intravenous for soln</i><br>500 mg   | \$0(1)  |  |
| <i>ivermectin</i> TABS 3mg                                  | \$0(1)  | QL (12 tabs / 90 days),<br>PA                                  |
| <i>linezolid</i> SOLN 600mg/300ml                           | \$0(1)  |  |
| <i>linezolid</i> SUSR 100mg/5ml                             | \$0(2)  | NDS, QL (1800 mL / 30 days)                                    |
| <i>linezolid</i> TABS 600mg                                 | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>LINEZOLID INJ</i> 2MG/ML                                 | \$0(1)  |  |
| <i>meropenem</i> SOLR 1gm, 500mg                            | \$0(1)  |  |
| <i>methenamine hippurate</i> TABS 1gm                       | \$0(1)  |  |
| <i>metronidazole</i> SOLN 500mg/100ml; TABS<br>250mg, 500mg | \$0(1)  |  |
| <i>neomycin sulfate</i> TABS 500mg                          | \$0(1)  |  |
| <i>nitazoxanide</i> TABS 500mg                              | \$0(2)  | NDS, QL (6 tabs / 30 days)                                     |
| <i>nitrofurantoin macrocrystal</i> CAPS 50mg,<br>100mg      | \$0(2)  |  |
| <i>nitrofurantoin monohyd macro</i> CAPS<br>100mg           | \$0(2)  |  |
| <i>paromomycin sulfate</i> CAPS 250mg                       | \$0(1)  |  |
| <i>pentamidine isethionate inh</i> SOLR 300mg               | \$0(1)  | B/D  |
| <i>pentamidine isethionate inj</i> SOLR 300mg               | \$0(1)  |  |
| <i>praziquantel</i> TABS 600mg                              | \$0(1)  |  |
| <i>SIVEXTRO</i> SOLR 200mg; TABS 200mg                      | \$0(2)  | NDS  |
| <i>streptomycin sulfate</i> SOLR 1gm                        | \$0(1)  |  |
| <i>sulfadiazine</i> TABS 500mg                              | \$0(2)  |  |

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|---|---|--|
| <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>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)  |  |
| <i>trimethoprim TABS 100mg</i>  | \$0(1)  |  |
| <i>vancomycin hcl CAPS 125mg</i>                                      | \$0(1)  | QL (80 caps / 180 days)  |
| <i>vancomycin hcl CAPS 250mg</i>                                      | \$0(1)  | QL (160 caps / 180 days)                                       |
| <i>vancomycin hcl SOLR 1gm, 5gm, 10gm, 500mg, 750mg</i>               | \$0(1)  |  |
| <i>VANCOMYCIN INJ 1 GM</i>  | \$0(2)  |  |
| <i>VANCOMYCIN INJ 500MG</i>   | \$0(2)  |  |
| <i>VANCOMYCIN INJ 750MG</i>   | \$0(2)  |  |

#### ***ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS***

|  |        |                                 |
|--|--------|---------------------------------|
| <i>ABELCET SUSP 5mg/ml</i>   | \$0(2) | B/D                             |
| <i>amphotericin b SOLR 50mg</i>  | \$0(1) | B/D                             |
| <i>amphotericin b liposome SUSR 50mg</i>                                 | \$0(2) | NDS, B/D                        |
| <i>caspofungin acetate SOLR 50mg, 70mg</i>                               | \$0(1) |                                 |
| <i>fluconazole SUSR 10mg/ml, 40mg/ml; TABS 50mg, 100mg, 150mg, 200mg</i> | \$0(1) |                                 |
| <i>fluconazole in nacl 0.9% inj 200 mg/100ml</i>                         | \$0(1) |                                 |
| <i>fluconazole in nacl 0.9% inj 400 mg/200ml</i>                         | \$0(1) |                                 |
| <i>flucytosine CAPS 250mg, 500mg</i>                                     | \$0(2) | NDS, PA                         |
| <i>griseofulvin microsize SUSP 125mg/5ml; TABS 500mg</i>                 | \$0(1) |                                 |
| <i>griseofulvin ultramicrosize TABS 125mg, 250mg</i>                     | \$0(1) |                                 |
| <i>itraconazole CAPS 100mg</i>   | \$0(1) | PA                              |
| <i>ketoconazole TABS 200mg</i>   | \$0(1) | PA                              |
| <i>micafungin sodium SOLR 50mg, 100mg</i>                                | \$0(2) | NDS                             |
| <i>NOXAFIL SUSP 40mg/ml</i>  | \$0(2) | NDS, QL (630 mL / 30 days), PA  |
| <i>nystatin TABS 500000unit</i>  | \$0(1) |                                 |
| <i>posaconazole SUSP 40mg/ml</i>   | \$0(2) | NDS, QL (630 mL / 30 days), PA  |
| <i>posaconazole TBEC 100mg</i>   | \$0(2) | NDS, QL (93 tabs / 30 days), PA |

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|--|---|--|
| <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),<br>PA                                 |
| <i>voriconazole</i> TABS 200mg               | \$0(1)  | QL (120 tabs / 30 days),<br>PA                                 |

### ***ANTIMALARIALS - DRUGS TO TREAT MALARIA***

|   |        |    |
|---|--------|----|
| <i>atovaquone-proguanil hcl</i> tab 62.5-25 mg    | \$0(1) |    |
| <i>atovaquone-proguanil hcl</i> tab 250-100 mg    | \$0(1) |    |
| <i>chloroquine phosphate</i> TABS 250mg,<br>500mg | \$0(1) |    |
| <i>COARTEM</i> TAB 20-120MG                       | \$0(2) |    |
| <i>mefloquine hcl</i> TABS 250mg                  | \$0(1) |    |
| <i>primaquine phosphate</i> TABS 26.3mg           | \$0(1) |    |
| <i>PRIMAQUINE PHOSPHATE</i> TABS 26.3mg           | \$0(2) |    |
| <i>quinine sulfate</i> CAPS 324mg                 | \$0(1) | PA |

### ***ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS***

#### ***INFECTION***

|  |        |                                    |
|--|--------|------------------------------------|
| <i>abacavir sulfate</i> SOLN 20mg/ml; TABS<br>300mg    | \$0(1) | NM                                 |
| <i>APTIVUS</i> CAPS 250mg                              | \$0(2) | NDS, NM                            |
| <i>atazanavir sulfate</i> CAPS 150mg, 200mg,<br>300mg  | \$0(1) | NM                                 |
| <i>darunavir</i> TABS 600mg                            | \$0(2) | NDS, QL (60 tabs / 30<br>days), NM |
| <i>darunavir</i> TABS 800mg                            | \$0(2) | NDS, QL (30 tabs / 30<br>days), NM |
| <i>EDURANT</i> TABS 25mg                               | \$0(2) | NDS, NM                            |
| <i>efavirenz</i> CAPS 50mg, 200mg; TABS<br>600mg       | \$0(1) | NM                                 |
| <i>emtricitabine</i> CAPS 200mg                        | \$0(1) | NM                                 |
| <i>EMTRIVA</i> SOLN 10mg/ml                            | \$0(2) | NM                                 |
| <i>etravirine</i> TABS 100mg, 200mg                    | \$0(2) | NDS, NM                            |
| <i>fosamprenavir calcium</i> TABS 700mg                | \$0(2) | NDS, NM                            |
| <i>FUZEON</i> SOLR 90mg                                | \$0(2) | NDS, NM                            |
| <i>INTELENCE</i> TABS 25mg                             | \$0(2) | NM                                 |
| <i>ISENTRESS</i> CHEW 25mg                             | \$0(2) | NM                                 |
| <i>ISENTRESS</i> CHEW 100mg; PACK 100mg;<br>TABS 400mg | \$0(2) | NDS, NM                            |
| <i>ISENTRESS HD</i> TABS 600mg                         | \$0(2) | NDS, NM                            |
| <i>lamivudine</i> SOLN 10mg/ml; TABS 150mg,<br>300mg   | \$0(1) | NM                                 |
| <i>LEXIVA</i> SUSP 50mg/ml                             | \$0(2) | NM                                 |
| <i>maraviroc</i> TABS 150mg, 300mg                     | \$0(2) | NDS, NM                            |

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|---|---|--|
| nevirapine SUSP 50mg/5ml; TABS 200mg;<br>TB24 400mg | \$0(1)  | NM   |
| NORVIR PACK 100mg                                   | \$0(2)  | NM   |
| PIFELTRO TABS 100mg                                 | \$0(2)  | NDS, NM  |
| PREZISTA SUSP 100mg/ml                              | \$0(2)  | NDS, QL (400 mL / 30 days), NM                                 |
| PREZISTA TABS 75mg                                  | \$0(2)  | QL (480 tabs / 30 days), NM                                    |
| PREZISTA TABS 150mg                                 | \$0(2)  | NDS, QL (240 tabs / 30 days), NM                               |
| PREZISTA TABS 600mg                                 | \$0(2)  | NDS, QL (60 tabs / 30 days), NM                                |
| PREZISTA TABS 800mg                                 | \$0(2)  | NDS, QL (30 tabs / 30 days), NM                                |
| REYATAZ PACK 50mg                                   | \$0(2)  | NDS, NM  |
| ritonavir TABS 100mg                                | \$0(1)  | NM   |
| RUKOBIA TB12 600mg                                  | \$0(2)  | NDS, NM  |
| SELZENTRY SOLN 20mg/ml; TABS 75mg                   | \$0(2)  | NDS, NM  |
| SELZENTRY TABS 25mg                                 | \$0(2)  | NM   |
| SUNLENCA TBPK 300mg                                 | \$0(2)  | NDS, NM, LA  |
| tenofovir disoproxil fumarate TABS 300mg            | \$0(1)  | NM   |
| TIVICAY TABS 10mg                                   | \$0(2)  | NM   |
| TIVICAY TABS 25mg, 50mg                             | \$0(2)  | NDS, NM  |
| TIVICAY PD TBSO 5mg                                 | \$0(2)  | NDS, NM  |
| TROGARZO SOLN 200mg/1.33ml                          | \$0(2)  | NDS, NM, LA  |
| TYBOST TABS 150mg                                   | \$0(2)  | NM   |
| VIRACEPT TABS 250mg, 625mg                          | \$0(2)  | NDS, NM  |
| VIREAD POWD 40mg/gm; TABS 150mg,<br>200mg, 250mg    | \$0(2)  | NDS, NM  |
| zidovudine CAPS 100mg; SYRP 50mg/5ml;<br>TABS 300mg | \$0(1)  | NM   |

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

|   |        |                                 |
|---|--------|---------------------------------|
| abacavir sulfate-lamivudine tab 600-300<br>mg | \$0(1) | NM                              |
| BIKTARVY TAB 30-120-15 MG                     | \$0(2) | NDS, NM                         |
| BIKTARVY TAB 50-200-25 MG                     | \$0(2) | NDS, NM                         |
| CIMDUO TAB 300-300                            | \$0(2) | NDS, NM                         |
| COMPLERA TAB                                  | \$0(2) | NDS, NM                         |
| DELSTRIGO TAB                                 | \$0(2) | NDS, NM                         |
| DESCOVY TAB 120-15MG                          | \$0(2) | NDS, QL (30 tabs / 30 days), NM |
| DESCOVY TAB 200/25MG                          | \$0(2) | NDS, QL (30 tabs / 30 days), NM |

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|---|---|--|
| DOVATO TAB 50-300MG   | \$0(2)  | NDS, NM  |
| <i>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</i>    | \$0(2)  | NDS, NM  |
| <i>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</i>       | \$0(2)  | NDS, NM  |
| <i>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</i>       | \$0(2)  | NDS, NM  |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg</i> | \$0(2)  | NDS, QL (30 tabs / 30 days), NM                                |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 133-200 mg</i> | \$0(2)  | NDS, QL (30 tabs / 30 days), NM                                |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 167-250 mg</i> | \$0(2)  | NDS, QL (30 tabs / 30 days), NM                                |
| <i>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</i> | \$0(2)  | NDS, QL (30 tabs / 30 days), NM                                |
| EVOTAZ TAB 300-150  | \$0(2)  | NDS, NM  |
| GENVOYA TAB   | \$0(2)  | NDS, NM  |
| JULUCA TAB 50-25MG  | \$0(2)  | NDS, NM  |
| <i>lamivudine-zidovudine tab 150-300 mg</i>                       | \$0(1)  | NM   |
| <i>lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)</i>      | \$0(1)  | NM   |
| <i>lopinavir-ritonavir tab 100-25 mg</i>                          | \$0(1)  | NM   |
| <i>lopinavir-ritonavir tab 200-50 mg</i>                          | \$0(1)  | NM   |
| ODEFSEY TAB   | \$0(2)  | NDS, NM  |
| PREZCOBIX TAB 800-150   | \$0(2)  | NDS, NM  |
| STRIBILD TAB  | \$0(2)  | NDS, NM  |
| SYMTUZA TAB   | \$0(2)  | NDS, NM  |
| TRIUMEQ PD TAB  | \$0(2)  | NDS, NM  |
| TRIUMEQ TAB   | \$0(2)  | NDS, NM  |
| TRIZIVIR TAB  | \$0(2)  | NDS, NM  |
| <b>ANTITUBERCULAR AGENTS - DRUGS TO TREAT TUBERCULOSIS</b>        |   |  |
| cycloserine CAPS 250mg  | \$0(2)  | NDS  |
| <i>ethambutol hcl TABS 100mg, 400mg</i>                           | \$0(1)  |  |
| <i>isoniazid SYRP 50mg/5ml; TABS 100mg, 300mg</i>                 | \$0(1)  |  |
| PRIFTIN TABS 150mg  | \$0(2)  |  |
| <i>pyrazinamide TABS 500mg</i>                                    | \$0(1)  |  |
| <i>rifabutin CAPS 150mg</i>                                       | \$0(1)  |  |
| <i>rifampin CAPS 150mg, 300mg; SOLR 600mg</i>                     | \$0(1)  |  |
| SIRTURO TABS 20mg, 100mg  | \$0(2)  | NDS, NM, LA, PA  |
| TRECATOR TABS 250mg   | \$0(2)  |  |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
|---|---|--|

### ***ANTIVIRALS - DRUGS TO TREAT VIRAL INFECTIONS***

|   |        |                                 |
|---|--------|---------------------------------|
| <i>acyclovir</i> CAPS 200mg; SUSP 200mg/5ml;<br>TABS 400mg, 800mg | \$0(1) |                                 |
| <i>acyclovir sodium</i> SOLN 50mg/ml                              | \$0(1) | B/D                             |
| <i>adefovir dipivoxil</i> TABS 10mg                               | \$0(2) | NDS, NM                         |
| <i>BARACLUDE</i> SOLN .05mg/ml                                    | \$0(2) | NDS, NM                         |
| <i>entecavir</i> TABS .5mg, 1mg                                   | \$0(1) | NM                              |
| <i>EPCLUSA</i> PAK 150-37.5                                       | \$0(2) | NDS, NM, PA                     |
| <i>EPCLUSA</i> PAK 200-50MG                                       | \$0(2) | NDS, NM, PA                     |
| <i>EPCLUSA</i> TAB 200-50MG                                       | \$0(2) | NDS, NM, PA                     |
| <i>EPCLUSA</i> TAB 400-100  | \$0(2) | NDS, NM, PA                     |
| <i>EPIVIR HBV</i> SOLN 5mg/ml                                     | \$0(2) | NM                              |
| <i>famciclovir</i> TABS 125mg, 250mg, 500mg                       | \$0(1) |                                 |
| <i>ganciclovir sodium</i> SOLR 500mg                              | \$0(1) | B/D                             |
| <i>HARVONI</i> PAK 33.75-150MG                                    | \$0(2) | NDS, NM, PA                     |
| <i>HARVONI</i> PAK 45-200MG                                       | \$0(2) | NDS, NM, PA                     |
| <i>HARVONI</i> TAB 45-200MG                                       | \$0(2) | NDS, NM, PA                     |
| <i>HARVONI</i> TAB 90-400MG                                       | \$0(2) | NDS, NM, PA                     |
| <i>lamivudine (hbv)</i> TABS 100mg                                | \$0(1) | NM                              |
| <i>MAVYRET</i> PAK 50-20MG  | \$0(2) | NDS, NM, PA                     |
| <i>MAVYRET</i> 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)             |
| <i>PEGASYS</i> SOLN 180mcg/ml; SOSY<br>180mcg/0.5ml               | \$0(2) | NDS, NM, PA                     |
| <i>PREVYMIS</i> TABS 240mg, 480mg                                 | \$0(2) | NDS, QL (28 tabs / 28 days), PA |
| <i>RELENZA</i> DISKHALER AEPB 5mg/blister                         | \$0(2) | QL (6 inhalers / year)          |
| <i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS<br>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) |                                 |
| <i>VEMLIDY</i> TABS 25mg  | \$0(2) | NDS, NM                         |
| <i>VOSEVI</i> TAB   | \$0(2) | NDS, NM, PA                     |
| <i>XOFLUZA</i> TBPK 40mg, 80mg                                    | \$0(2) | QL (1 tab / 180 days)           |

### ***CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS***

|  |        |
|--|--------|
| <i>cefaclor</i> CAPS 250mg, 500mg; SUSR<br>250mg/5ml | \$0(1) |
| <i>CEFACLOR ER</i> TB12 500mg                        | \$0(2) |

Updated on 12/01/2023

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|---|---|--|
| <u>cefadroxil</u> CAPS 500mg; SUSR 250mg/5ml,<br>500mg/5ml  | \$0(1)  |  |
| <u>CEFAZOLIN</u> SOLR 2gm, 3gm  | \$0(2)  |  |
| <u>CEFAZOLIN INJ</u> 1GM/50ML   | \$0(2)  |  |
| <u>cefazolin sodium</u> SOLR 1gm, 2gm, 10gm,<br>500mg   | \$0(1)  |  |
| <u>CEFAZOLIN SOLN</u> 2GM/100ML-4%  | \$0(2)  |  |
| <u>cefdinir</u> CAPS 300mg; SUSR 125mg/5ml,<br>250mg/5ml  | \$0(1)  |  |
| <u>cefepime hcl</u> SOLR 1gm, 2gm   | \$0(1)  |  |
| <u>cefixime</u> CAPS 400mg; SUSR 100mg/5ml,<br>200mg/5ml  | \$0(1)  |  |
| <u>cefoxitin sodium</u> SOLR 1gm, 2gm, 10gm   | \$0(1)  |  |
| <u>cefpodoxime proxetil</u> SUSR 50mg/5ml,<br>100mg/5ml; TABS 100mg, 200mg                          | \$0(1)  |  |
| <u>cefprozil</u> SUSR 125mg/5ml, 250mg/5ml;<br>TABS 250mg, 500mg                                    | \$0(1)  |  |
| <u>ceftazidime</u> SOLR 1gm, 2gm, 6gm   | \$0(1)  |  |
| <u>ceftriaxone sodium</u> SOLR 1gm, 2gm,<br>10gm, 250mg, 500mg                                      | \$0(1)  |  |
| <u>cefuroxime axetil</u> TABS 250mg, 500mg  | \$0(1)  |  |
| <u>cefuroxime sodium</u> SOLR 1.5gm, 750mg  | \$0(1)  |  |
| <u>cephalexin</u> CAPS 250mg, 500mg; SUSR<br>125mg/5ml, 250mg/5ml                                   | \$0(1)  |  |
| <u>tazicef</u> SOLR 1gm, 2gm, 6gm   | \$0(1)  |  |
| <u>TEFLARO</u> SOLR 400mg, 600mg  | \$0(2)  | NDS  |
| <b>ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS</b>   |   |  |
| <u>azithromycin</u> PACK 1gm; SOLR 500mg;<br>SUSR 100mg/5ml, 200mg/5ml; TABS<br>250mg, 500mg, 600mg | \$0(1)  |  |
| <u>clarithromycin</u> SUSR 125mg/5ml,<br>250mg/5ml; TABS 250mg, 500mg; TB24<br>500mg                | \$0(1)  |  |
| <u>DIFICID</u> SUSR 40mg/ml; TABS 200mg   | \$0(2)  | NDS  |
| <u>e.e.s. 400</u> TABS 400mg  | \$0(1)  |  |
| <u>ery-tab</u> TBEC 250mg, 333mg, 500mg   | \$0(1)  |  |
| <u>ERYTHROCIN LACTOBIONATE</u> SOLR 500mg   | \$0(2)  |  |
| <u>erythrocin stearate</u> TABS 250mg   | \$0(1)  |  |
| <u>erythromycin base</u> CPEP 250mg; TABS<br>250mg, 500mg; TBEC 250mg, 333mg,<br>500mg              | \$0(1)  |  |
| <u>erythromycin ethylsuccinate</u> TABS 400mg   | \$0(1)  |  |
| <u>erythromycin lactobionate</u> SOLR 500mg   | \$0(1)  |  |

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|---|---|--|
|---|---|--|

### **FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS**

|   |        |
|---|--------|
| CIPRO SUSR 500mg/5ml                                | \$0(2) |
| ciprofloxacin 200 mg/100ml in d5w                   | \$0(1) |
| ciprofloxacin 400 mg/200ml in d5w                   | \$0(1) |
| ciprofloxacin hcl TABS 100mg, 250mg, 500mg, 750mg   | \$0(1) |
| levofloxacin SOLN 25mg/ml; TABS 250mg, 500mg, 750mg | \$0(1) |
| levofloxacin in d5w iv soln 250 mg/50ml             | \$0(1) |
| levofloxacin in d5w iv soln 500 mg/100ml            | \$0(1) |
| levofloxacin in d5w iv soln 750 mg/150ml            | \$0(1) |
| moxifloxacin hcl TABS 400mg                         | \$0(1) |

### **PENICILLINS - DRUGS TO TREAT INFECTIONS**

|  |        |
|--|--------|
| amoxicillin CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg | \$0(1) |
| amoxicillin & k clavulanate chew tab 200-28.5 mg   | \$0(1) |
| amoxicillin & k clavulanate chew tab 400-57 mg   | \$0(1) |
| amoxicillin & k clavulanate for susp 200-28.5 mg/5ml   | \$0(1) |
| amoxicillin & k clavulanate for susp 250-62.5 mg/5ml   | \$0(1) |
| amoxicillin & k clavulanate for susp 400-57 mg/5ml   | \$0(1) |
| amoxicillin & k clavulanate for susp 600-42.9 mg/5ml   | \$0(1) |
| amoxicillin & k clavulanate tab 250-125 mg   | \$0(1) |
| amoxicillin & k clavulanate tab 500-125 mg   | \$0(1) |
| amoxicillin & k clavulanate tab 875-125 mg   | \$0(1) |
| amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg   | \$0(1) |
| ampicillin CAPS 500mg  | \$0(1) |
| ampicillin & sulbactam sodium for inj 1.5 (1-0.5) gm   | \$0(1) |
| ampicillin & sulbactam sodium for inj 3 (2-1) gm   | \$0(1) |
| ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm   | \$0(1) |
| ampicillin & sulbactam sodium for iv soln 3 (2-1) gm   | \$0(1) |
| ampicillin & sulbactam sodium for iv soln 15 (10-5) gm   | \$0(1) |

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|---|---|--|
| <i>ampicillin sodium</i> SOLR 1gm, 2gm, 10gm,<br>125mg, 250mg, 500mg          | \$0(1)  |  |
| BICILLIN L-A SUSY 600000unit/ml,<br>1200000unit/2ml, 2400000unit/4ml          | \$0(2)  |  |
| <i>dicloxacillin sodium</i> CAPS 250mg, 500mg                                 | \$0(1)  |  |
| <i>nafcillin sodium</i> SOLR 1gm, 2gm   | \$0(1)  |  |
| <i>nafcillin sodium</i> SOLR 10gm   | \$0(2)  | NDS  |
| <i>oxacillin sodium</i> SOLR 1gm, 2gm, 10gm                                   | \$0(1)  |  |
| PEN GK/DEXTR INJ 40000/ML   | \$0(2)  |  |
| PEN GK/DEXTR INJ 60000/ML   | \$0(2)  |  |
| <i>penicillin g potassium</i> SOLR 5000000unit,<br>20000000unit               | \$0(1)  |  |
| PENICILLIN G PROCAINE SUSP<br>600000unit/ml                                   | \$0(2)  |  |
| <i>penicillin g sodium</i> SOLR 5000000unit                                   | \$0(1)  |  |
| <i>penicillin v potassium</i> SOLR 125mg/5ml,<br>250mg/5ml; TABS 250mg, 500mg | \$0(1)  |  |
| <i>pizerpen</i> SOLR 5000000unit,<br>20000000unit                             | \$0(1)  |  |
| <i>piperacillin sod-tazobactam na</i> for inj 3.375<br>gm (3-0.375 gm)        | \$0(1)  |  |
| <i>piperacillin sod-tazobactam sod</i> for inj 2.25<br>gm (2-0.25 gm)         | \$0(1)  |  |
| <i>piperacillin sod-tazobactam sod</i> for inj 4.5<br>gm (4-0.5 gm)           | \$0(1)  |  |
| <i>piperacillin sod-tazobactam sod</i> for inj 13.5<br>gm (12-1.5 gm)         | \$0(1)  |  |
| <i>piperacillin sod-tazobactam sod</i> for inj 40.5<br>gm (36-4.5 gm)         | \$0(1)  |  |

#### **TETRACYCLINES - DRUGS TO TREAT INFECTIONS**

|  |        |             |
|--|--------|-------------|
| <i>doxy 100</i> SOLR 100mg   | \$0(1) |             |
| <i>doxycycline (monohydrate)</i> CAPS 50mg,<br>100mg; TABS 50mg, 75mg, 100mg | \$0(1) |             |
| <i>doxycycline hyclate</i> CAPS 50mg, 100mg;<br>SOLR 100mg; TABS 20mg, 100mg | \$0(1) |             |
| <i>minocycline hcl</i> CAPS 50mg, 75mg, 100mg                                | \$0(1) |             |
| NUZYRA SOLR 100mg; TABS 150mg  | \$0(2) | NDS, NM, LA |
| <i>tetracycline hcl</i> CAPS 250mg, 500mg                                    | \$0(1) | PA          |
| <i>tigecycline</i> SOLR 50mg   | \$0(2) | NDS         |
| TIGECYCLINE SOLR 50mg  | \$0(2) | NDS         |

#### **ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER**

##### **ALKYLATING AGENTS**

|                        |        |                  |
|------------------------|--------|------------------|
| BENDEKA SOLN 100mg/4ml | \$0(2) | NDS, B/D, NM, LA |
|------------------------|--------|------------------|

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|--|---|--|
| <i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml,<br>450mg/45ml, 600mg/60ml                      | \$0(1)  | B/D  |
| <i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml,<br>200mg/200ml                                 | \$0(1)  | B/D  |
| <i>cyclophosphamide</i> CAPS 25mg, 50mg  | \$0(1)  | B/D  |
| CYCLOPHOSPHAMIDE SOLN 1gm/5ml,<br>500mg/2.5ml, 500mg/ml                                      | \$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  |
| CYCLOPHOSPHAMIDE MONOHYDR SOLN<br>2gm/10ml   | \$0(2)  | NDS, B/D   |
| GLEOSTINE CAPS 10mg, 40mg  | \$0(2)  | NM   |
| GLEOSTINE CAPS 100mg   | \$0(2)  | NDS, NM  |
| LEUKERAN TABS 2mg  | \$0(2)  |  |
| <i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml,<br>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  |
| <b>ANTIBIOTICS</b>   |   |  |
| <i>doxorubicin hcl</i> SOLN 2mg/ml   | \$0(1)  | B/D  |
| <i>doxorubicin hcl liposomal</i> INJ 2mg/ml  | \$0(2)  | NDS, B/D   |
| ELLENCE SOLN 50mg/25ml, 200mg/100ml  | \$0(2)  | B/D  |
| <b>ANTIMETABOLITES</b>   |   |  |
| <i>azacitidine</i> SUSR 100mg  | \$0(2)  | NDS, B/D, NM   |
| <i>cytarabine</i> SOLN 20mg/ml   | \$0(1)  | B/D  |
| <i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml,<br>5gm/100ml, 500mg/10ml                      | \$0(1)  | B/D  |
| <i>gemcitabine hcl</i> SOLN 1gm/26.3ml,<br>2gm/52.6ml, 200mg/5.26ml; SOLR 1gm,<br>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, LA, PA  |
| LONSURF TAB 20-8.19  | \$0(2)  | NDS, NM, LA, PA  |
| <i>mercaptopurine</i> TABS 50mg  | \$0(1)  |  |
| <i>methotrexate sodium</i> SOLN 1gm/40ml,<br>50mg/2ml, 250mg/10ml; SOLR 1gm                  | \$0(1)  | B/D  |
| ONUREG TABS 200mg, 300mg   | \$0(2)  | NDS, NM, LA, PA  |
| <i>pemetrexed disodium</i> SOLR 100mg,<br>500mg, 750mg, 1000mg                               | \$0(2)  | NDS, B/D   |
| PURIXAN SUSP 2000mg/100ml  | \$0(2)  | NDS, NM  |
| TABLOID TABS 40mg  | \$0(2)  |  |
| <b>HORMONAL ANTOINEPLASTIC AGENTS</b>  |   |  |
| <i>abiraterone acetate</i> TABS 250mg, 500mg   | \$0(2)  | NDS, NM, PA  |
| <i>anastrozole</i> TABS 1mg  | \$0(1)  |  |

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|--|---|--|
| <i>bicalutamide</i> TABS 50mg  | \$0(1)  |  |
| ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg                                  | \$0(2)  | NM, PA   |
| EMCYT CAPS 140mg   | \$0(2)  | NDS  |
| ERLEADA TABS 60mg, 240mg   | \$0(2)  | NDS, NM, LA, PA  |
| EULEXIN CAPS 125mg   | \$0(2)  | NDS  |
| <i>exemestane</i> TABS 25mg  | \$0(1)  |  |
| <i>fulvestrant</i> SOSY 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)  | NM, PA   |
| LUPRON DEPOT (1-MONTH) KIT 3.75mg                                      | \$0(2)  | NDS, NM, PA  |
| LUPRON DEPOT (3-MONTH) KIT 11.25mg                                     | \$0(2)  | NDS, NM, PA  |
| LYSODREN TABS 500mg  | \$0(2)  | NDS, NM  |
| <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  |
| ORSERDU TABS 86mg, 345mg   | \$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  |
| XTANDI CAPS 40mg; TABS 40mg, 80mg                                      | \$0(2)  | NDS, NM, LA, PA  |
| <b>IMMUNOMODULATORS</b>  |   |  |
| <i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg                        | \$0(2)  | NDS, QL (28 caps / 28 days), NM, LA, PA                        |
| <i>lenalidomide</i> CAPS 20mg, 25mg                                    | \$0(2)  | NDS, QL (21 caps / 28 days), NM, LA, PA                        |
| POMALYST CAPS 1mg, 2mg, 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                        |
| THALOMID CAPS 50mg, 100mg  | \$0(2)  | NDS, QL (28 caps / 28 days), NM, LA, PA                        |
| THALOMID CAPS 150mg, 200mg   | \$0(2)  | NDS, QL (56 caps / 28 days), NM, LA, PA                        |
| <b>MISCELLANEOUS</b>   |   |  |
| BESREMI SOSY 500mcg/ml   | \$0(2)  | NDS, NM, LA, PA  |
| <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                            |

Updated on 12/01/2023

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

| <b>Drug Name<br/>(By Medical Condition)</b>  | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| 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, NM, PA  |
| <i>tretinoin (chemotherapy) CAPS 10mg</i>  | \$0(2)  | NDS  |
| WELIREG TABS 40mg  | \$0(2)  | NDS, NM, LA, PA  |
| <b>MITOTIC INHIBITORS</b>  |   |  |
| <i>docetaxel CONC 20mg/ml</i>  | \$0(1)  | B/D  |
| <i>docetaxel CONC 80mg/4ml, 160mg/8ml;<br/>SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml</i> | \$0(2)  | NDS, B/D   |
| <i>DOCETAXEL CONC 80mg/4ml, 160mg/8ml;<br/>SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml</i> | \$0(2)  | NDS, B/D   |
| <i>etoposide SOLN 1gm/50ml, 100mg/5ml,<br/>500mg/25ml</i>                          | \$0(1)  | B/D  |
| <i>paclitaxel CONC 6mg/ml, 30mg/5ml,<br/>150mg/25ml, 300mg/50ml</i>                | \$0(1)  | B/D  |
| <i>paclitaxel protein-bound particles for iv<br/>susp 100 mg</i>                   | \$0(2)  | NDS, B/D, NM   |
| <i>vincristine sulfate SOLN 1mg/ml</i>   | \$0(1)  | B/D  |
| <i>vinorelbine tartrate SOLN 10mg/ml,<br/>50mg/5ml</i>                             | \$0(1)  | B/D  |
| <b>MOLECULAR TARGET AGENTS</b>   |   |  |
| 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  |
| AYVAKIT TABS 25mg, 50mg, 100mg,<br>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 1mg, 2.5mg, 3.5mg  | \$0(2)  | NDS, NM, PA  |
| <i>bortezomib SOLR 3.5mg</i>   | \$0(2)  | NDS, NM, PA  |
| BOSULIF TABS 100mg, 400mg, 500mg   | \$0(2)  | NDS, NM, PA  |
| BRAFTOVI CAPS 75mg   | \$0(2)  | NDS, NM, 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                        |
| CALQUENCE TABS 100mg   | \$0(2)  | NDS, QL (60 tabs / 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  |

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| <b>Drug Name<br/>(By Medical Condition)</b>    | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| 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                            |
| <i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, PA                            |
| <i>everolimus</i> TBSO 2mg                     | \$0(2)  | NDS, QL (150 tabs / 30 days), NM, PA                           |
| <i>everolimus</i> TBSO 3mg                     | \$0(2)  | NDS, QL (90 tabs / 30 days), NM, PA                            |
| <i>everolimus</i> TBSO 5mg                     | \$0(2)  | NDS, QL (60 tabs / 30 days), NM, PA                            |
| EXKIVITY CAPS 40mg                             | \$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  |
| <i>gefitinib</i> TABS 250mg                    | \$0(2)  | NDS, NM, PA  |
| GILOTRIF TABS 20mg, 30mg, 40mg                 | \$0(2)  | NDS, NM, LA, PA  |
| HERCEP HYLEC SOL 60-10000                      | \$0(2)  | NDS, NM, LA, PA  |
| HERCEPTIN SOLR 150mg                           | \$0(2)  | NDS, NM, LA, PA  |
| HERZUMA SOLR 150mg, 420mg                      | \$0(2)  | NDS, NM, LA, PA  |
| 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, 15mg, 30mg, 45mg            | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, 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 SUSP 70mg/ml                         | \$0(2)  | NDS, QL (216 mL / 27 days), NM, LA, PA                         |

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| 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                        |
| JAYPIRCA TABS 50mg                          | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, LA, PA                        |
| JAYPIRCA TABS 100mg                         | \$0(2)  | NDS, QL (60 tabs / 30 days), NM, LA, PA                        |
| KADCYLA SOLR 100mg, 160mg                   | \$0(2)  | NDS, B/D, NM, LA   |
| KANJINTI SOLR 150mg, 420mg                  | \$0(2)  | NDS, NM, LA, PA  |
| KEYTRUDA SOLN 100mg/4ml                     | \$0(2)  | NDS, NM, LA, 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                            |
| KRAZATI TABS 200mg                          | \$0(2)  | NDS, NM, LA, 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                        |
| 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, 320mg                  | \$0(2)  | NDS, NM, LA, PA  |
| LYNPARZA TABS 100mg, 150mg                  | \$0(2)  | NDS, QL (120 tabs / 30 days), NM, LA, PA                       |

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| <b>Drug Name<br/>(By Medical Condition)</b>             | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| LYTGOBI TBPK 4mg  | \$0(2)  | NDS, NM, LA, PA  |
| MEKINIST SOLR .05mg/ml; TABS .5mg, 2mg                  | \$0(2)  | NDS, NM, LA, PA  |
| MEKTOVI TABS 15mg                                       | \$0(2)  | NDS, NM, LA, PA  |
| MONJUVI SOLR 200mg                                      | \$0(2)  | NDS, NM, LA, PA  |
| MVASI SOLN 100mg/4ml, 400mg/16ml                        | \$0(2)  | NDS, NM, 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, NM, LA, PA  |
| OGIVRI INJ 420MG  | \$0(2)  | NDS, NM, LA, PA  |
| ONTRUZANT SOLR 150mg, 420mg                             | \$0(2)  | NDS, NM, LA, 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  |
| REZLIDHIA CAPS 150mg                                    | \$0(2)  | NDS, NM, LA, PA  |
| 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                       |
| RYDAPT CAPS 25mg  | \$0(2)  | NDS, NM, PA  |
| SCEMBLIX TABS 20mg                                      | \$0(2)  | NDS, QL (60 tabs / 30 days), NM, PA                            |
| SCEMBLIX TABS 40mg                                      | \$0(2)  | NDS, QL (300 tabs / 30 days), NM, PA                           |
| <i>sorafenib tosylate</i> TABS 200mg                    | \$0(2)  | NDS, QL (120 tabs / 30 days), 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; TBSO 10mg                     | \$0(2)  | NDS, NM, LA, PA  |
| TAGRISSO TABS 40mg, 80mg                                | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, LA, PA                        |
| TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg             | \$0(2)  | NDS, QL (30 caps / 30 days), NM, LA, PA                        |

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| 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,<br>1200mg/20ml   | \$0(2)  | NDS, NM, 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, NM, PA  |
| TRUSELTIQ 50MG DAILY DOSE CPPK 25mg         | \$0(2)  | NDS, LA, PA  |
| TRUSELTIQ 75MG DAILY DOSE CPPK 25mg         | \$0(2)  | NDS, LA, PA  |
| TRUSELTIQ 100MG DAILY DOSE CPPK<br>100mg    | \$0(2)  | NDS, LA, PA  |
| TRUSELTIQ 125MG 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 125mg, 200mg                   | \$0(2)  | NDS, NM, LA, PA  |
| VANFLYTA TABS 17.7mg, 26.5mg                | \$0(2)  | NDS, NM, LA, PA  |
| VENCLEXTA TABS 10mg                         | \$0(2)  | QL (112 tabs / 28 days),<br>NM, LA, PA                         |
| VENCLEXTA TABS 50mg                         | \$0(2)  | NDS, QL (112 tabs / 28<br>days), NM, LA, PA                    |
| VENCLEXTA TABS 100mg                        | \$0(2)  | NDS, QL (180 tabs / 30<br>days), NM, LA, PA                    |
| VENCLEXTA TAB START PK                      | \$0(2)  | NDS, QL (42 tabs / 28<br>days), NM, LA, PA                     |
| VERZENIO TABS 50mg, 100mg, 150mg,<br>200mg  | \$0(2)  | NDS, QL (56 tabs / 28<br>days), NM, LA, PA                     |
| VITRAKVI CAPS 25mg, 100mg; SOLN<br>20mg/ml  | \$0(2)  | NDS, NM, LA, PA  |
| VIZIMPRO TABS 15mg, 30mg, 45mg              | \$0(2)  | NDS, NM, LA, PA  |
| VONJO CAPS 100mg                            | \$0(2)  | NDS, QL (120 caps / 30<br>days), 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 40mg          | \$0(2)  | NDS, QL (4 tabs / 28<br>days), NM, LA, PA                      |
| XPOVIO 40 MG TWICE WEEKLY TBPK 40mg         | \$0(2)  | NDS, QL (8 tabs / 28<br>days), NM, LA, PA                      |
| XPOVIO 60 MG ONCE WEEKLY TBPK 60mg          | \$0(2)  | NDS, QL (4 tabs / 28<br>days), NM, LA, PA                      |
| XPOVIO 60 MG TWICE WEEKLY TBPK 20mg         | \$0(2)  | NDS, QL (24 tabs / 28<br>days), NM, LA, PA                     |

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|---|---|--|
| XPOVIO 80 MG ONCE WEEKLY TBPK 40mg          | \$0(2)  | NDS, QL (8 tabs / 28 days), NM, LA, PA                         |
| XPOVIO 80 MG TWICE WEEKLY TBPK 20mg         | \$0(2)  | NDS, QL (32 tabs / 28 days), NM, LA, PA                        |
| XPOVIO 100 MG ONCE WEEKLY TBPK 50mg         | \$0(2)  | NDS, QL (8 tabs / 28 days), NM, LA, PA                         |
| ZEJULA CAPS 100mg                           | \$0(2)  | NDS, QL (90 caps / 30 days), NM, LA, PA                        |
| ZEJULA TABS 100mg, 200mg, 300mg             | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, LA, PA                        |
| ZELBORAF TABS 240mg                         | \$0(2)  | NDS, NM, LA, PA  |
| ZIRABEV SOLN 100mg/4ml, 400mg/16ml          | \$0(2)  | NDS, NM, LA, 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  |

### **PROTECTIVE AGENTS**

|  |        |     |
|--|--------|-----|
| <i>leucovorin calcium</i> SOLN 500mg/50ml;<br>SOLR 50mg, 100mg, 200mg, 350mg,<br>500mg | \$0(1) | B/D |
| <i>leucovorin calcium</i> TABS 5mg, 10mg,<br>15mg, 25mg                                | \$0(1) |     |
| MESNEX TABS 400mg  | \$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 &amp; hydrochlorothiazide tab 5-6.25mg</i>   | \$0(1) |                        |
| <i>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg</i> | \$0(1) |                        |
| <i>benazepril &amp; hydrochlorothiazide tab 20-12.5 mg</i> | \$0(1) |                        |

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| <b>Drug Name<br/>(By Medical Condition)</b>                       | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>benazepril &amp; hydrochlorothiazide tab 20-25 mg</i>          | \$0(1)  |  |
| <i>captopril &amp; hydrochlorothiazide tab 25-15 mg</i>           | \$0(1)  |  |
| <i>captopril &amp; hydrochlorothiazide tab 25-25 mg</i>           | \$0(1)  |  |
| <i>captopril &amp; hydrochlorothiazide tab 50-15 mg</i>           | \$0(1)  |  |
| <i>captopril &amp; hydrochlorothiazide tab 50-25 mg</i>           | \$0(1)  |  |
| <i>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</i>  | \$0(1)  |  |
| <i>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</i>   | \$0(1)  |  |
| <i>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg</i> | \$0(1)  |  |
| <i>fosinopril sodium &amp; hydrochlorothiazide tab 20-12.5 mg</i> | \$0(1)  |  |
| <i>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg</i>        | \$0(1)  |  |
| <i>lisinopril &amp; hydrochlorothiazide tab 20-12.5 mg</i>        | \$0(1)  |  |
| <i>lisinopril &amp; 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)  |  |
| <b><i>ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE</i></b> |   |  |
| <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)  |  |

Updated on 12/01/2023

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

| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE<br/>(TIER LEVEL)</b> |
|---|--|---|
|---|--|---|

**ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE**

|  |        |                        |
|--|--------|------------------------|
| <i>eplerenone</i> TABS 25mg, 50mg            | \$0(1) |                        |
| <i>KERENDIA</i> TABS 10mg, 20mg              | \$0(2) | QL (30 tabs / 30 days) |
| <i>spironolactone</i> TABS 25mg, 50mg, 100mg | \$0(1) |                        |

**ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE**

|  |        |  |
|--|--------|--|
| <i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg,<br>8mg | \$0(1) |  |
| <i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg               | \$0(1) |  |
| <i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg        | \$0(1) |  |

**ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE**

|   |        |                        |
|---|--------|------------------------|
| <i>amlodipine besylate-olmesartan medoxomil<br/>tab 5-20 mg</i>         | \$0(1) | QL (30 tabs / 30 days) |
| <i>amlodipine besylate-olmesartan medoxomil<br/>tab 5-40 mg</i>         | \$0(1) | QL (30 tabs / 30 days) |
| <i>amlodipine besylate-olmesartan medoxomil<br/>tab 10-20 mg</i>        | \$0(1) | QL (30 tabs / 30 days) |
| <i>amlodipine besylate-olmesartan medoxomil<br/>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<br/>mg</i>                  | \$0(1) | QL (30 tabs / 30 days) |
| <i>amlodipine besylate-valsartan tab 10-320<br/>mg</i>                  | \$0(1) | QL (30 tabs / 30 days) |
| <i>candesartan cilexetil-hydrochlorothiazide<br/>tab 16-12.5 mg</i>     | \$0(1) | QL (60 tabs / 30 days) |
| <i>candesartan cilexetil-hydrochlorothiazide<br/>tab 32-12.5 mg</i>     | \$0(1) | QL (30 tabs / 30 days) |
| <i>candesartan cilexetil-hydrochlorothiazide<br/>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<br/>mg</i>               | \$0(1) | QL (60 tabs / 30 days) |
| <i>irbesartan-hydrochlorothiazide tab 300-12.5<br/>mg</i>               | \$0(1) | QL (30 tabs / 30 days) |
| <i>losartan potassium &amp; hydrochlorothiazide<br/>tab 50-12.5 mg</i>  | \$0(1) |                        |
| <i>losartan potassium &amp; hydrochlorothiazide<br/>tab 100-12.5 mg</i> | \$0(1) |                        |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>                                     | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>losartan potassium &amp; hydrochlorothiazide tab 100-25 mg</i>               | \$0(1)  |  |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>                  | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>                  | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>                    | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>               | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>               | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>                 | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>              | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>                | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-amlodipine tab 40-5 mg</i>                                       | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-amlodipine tab 40-10 mg</i>                                      | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-amlodipine tab 80-5 mg</i>                                       | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-amlodipine tab 80-10 mg</i>                                      | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>                           | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>                           | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>                             | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>                             | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>                            | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>valsartan-hydrochlorothiazide tab 160-25 mg</i>                              | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>                            | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>valsartan-hydrochlorothiazide tab 320-25 mg</i>                              | \$0(1)  | QL (30 tabs / 30 days)   |
| <b>ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE</b> |   |  |
| <i>candesartan cilexetil TABS 4mg, 8mg, 16mg</i>                                | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>candesartan cilexetil TABS 32mg</i>  | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>irbesartan TABS 75mg, 150mg, 300mg</i>                                       | \$0(1)  | QL (30 tabs / 30 days)   |

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| <b>Drug Name<br/>(By Medical Condition)</b>         | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>losartan potassium</i> TABS 25mg, 50mg,<br>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,<br>900mg/18ml; TABS 100mg, 200mg, 400mg  | \$0(1) |    |
| <i>disopyramide phosphate</i> CAPS 100mg,<br>150mg                           | \$0(2) |    |
| <i>dofetilide</i> CAPS 125mcg, 250mcg, 500mcg                                | \$0(1) | NM |
| <i>flecainide acetate</i> TABS 50mg, 100mg,<br>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,<br>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,<br>240mg                         | \$0(1) |    |
| <i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg,<br>160mg                     | \$0(1) |    |

#### **ANTILIPEMICS, FIBRATES**

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

#### **ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL**

|  |        |                        |
|--|--------|------------------------|
| <i>atorvastatin calcium</i> TABS 10mg, 20mg,<br>40mg, 80mg | \$0(1) | QL (30 tabs / 30 days) |
| <i>lovastatin</i> TABS 10mg, 20mg, 40mg                    | \$0(1) | QL (60 tabs / 30 days) |
| <i>pravastatin sodium</i> TABS 10mg, 20mg,<br>40mg, 80mg   | \$0(1) | QL (30 tabs / 30 days) |
| <i>rosuvastatin calcium</i> TABS 5mg, 10mg,<br>20mg, 40mg  | \$0(1) | QL (30 tabs / 30 days) |
| <i>simvastatin</i> TABS 5mg, 10mg, 20mg,<br>40mg, 80mg     | \$0(1) | QL (30 tabs / 30 days) |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE<br/>(TIER LEVEL)</b> |
|---|--|---|
|---|--|---|

**ANTIPIPEMICS, 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) | NM, 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 &amp; chlorthalidone tab 50-25 mg</i>           | \$0(1) |  |
| <i>atenolol &amp; chlorthalidone tab 100-25 mg</i>          | \$0(1) |  |
| <i>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg</i> | \$0(1) |  |
| <i>bisoprolol &amp; hydrochlorothiazide tab 5-6.25 mg</i>   | \$0(1) |  |
| <i>bisoprolol &amp; hydrochlorothiazide tab 10-6.25 mg</i>  | \$0(1) |  |
| <i>metoprolol &amp; hydrochlorothiazide tab 50-25 mg</i>    | \$0(1) |  |
| <i>metoprolol &amp; hydrochlorothiazide tab 100-25 mg</i>   | \$0(1) |  |
| <i>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</i>   | \$0(1) |  |

**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>carvedilol</i> TABS 3.125mg, 6.25mg, 12.5mg, 25mg | \$0(1) |  |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>   | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>labetalol hcl</i> TABS 100mg, 200mg, 300mg   | \$0(1)  |  |
| <i>metoprolol succinate</i> TB24 25mg, 50mg,<br>100mg, 200mg  | \$0(1)  |  |
| <i>metoprolol tartrate</i> SOLN 5mg/5ml; TABS<br>25mg, 50mg, 100mg  | \$0(1)  |  |
| <i>nadolol</i> TABS 20mg, 40mg, 80mg  | \$0(1)  |  |
| <i>nebivolol hcl</i> TABS 2.5mg, 5mg, 10mg  | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>nebivolol hcl</i> TABS 20mg  | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>pindolol</i> TABS 5mg, 10mg  | \$0(1)  |  |
| <i>propranolol hcl</i> CP24 60mg, 80mg, 120mg,<br>160mg; SOLN 20mg/5ml, 40mg/5ml; TABS<br>10mg, 20mg, 40mg, 60mg, 80mg                              | \$0(1)  |  |
| <i>timolol maleate</i> TABS 5mg, 10mg, 20mg   | \$0(1)  |  |
| <b>CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD<br/>PRESSURE AND HEART CONDITIONS</b>   |   |  |
| <i>amlodipine besylate</i> TABS 2.5mg, 5mg,<br>10mg   | \$0(1)  |  |
| <i>cartia xt</i> CP24 120mg, 180mg, 240mg,<br>300mg   | \$0(1)  |  |
| <i>dilt-xr</i> CP24 120mg, 180mg, 240mg   | \$0(1)  |  |
| <i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg;<br>SOLN 25mg/5ml, 50mg/10ml,<br>125mg/25ml; TABS 30mg, 60mg, 90mg,<br>120mg                            | \$0(1)  |  |
| <i>diltiazem hcl coated beads</i> CP24 120mg,<br>180mg, 240mg, 300mg, 360mg   | \$0(1)  |  |
| <i>diltiazem hcl extended release beads</i> CP24<br>120mg, 180mg, 240mg, 300mg, 360mg,<br>420mg   | \$0(1)  |  |
| <i>felodipine</i> TB24 2.5mg, 5mg, 10mg   | \$0(1)  |  |
| <i>isradipine</i> CAPS 2.5mg, 5mg   | \$0(1)  |  |
| <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,<br>300mg, 360mg  | \$0(1)  |  |
| <i>tiadylt er</i> CP24 120mg, 180mg, 240mg,<br>300mg, 360mg, 420mg  | \$0(1)  |  |
| <i>verapamil hcl</i> CP24 100mg, 120mg,<br>180mg, 200mg, 240mg, 300mg, 360mg;<br>SOLN 2.5mg/ml; TABS 40mg, 80mg,<br>120mg; TBCR 120mg, 180mg, 240mg | \$0(1)  |  |

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE<br/>(TIER LEVEL)</b> |
|---|--|---|
|---|--|---|

### ***DIURETICS - DRUGS TO TREAT HEART CONDITIONS***

|  |        |  |
|--|--------|--|
| <i>acetazolamide</i> CP12 500mg; TABS 125mg,<br>250mg              | \$0(1) |  |
| <i>amiloride &amp; hydrochlorothiazide tab 5-50<br/>mg</i>         | \$0(1) |  |
| <i>amiloride hcl</i> TABS 5mg                                      | \$0(1) |  |
| <i>bumetanide</i> SOLN .25mg/ml; TABS .5mg,<br>1mg, 2mg            | \$0(1) |  |
| <i>chlorthalidone</i> TABS 25mg, 50mg                              | \$0(1) |  |
| <i>furosemide</i> SOLN 10mg/ml, 40mg/5ml;<br>TABS 20mg, 40mg, 80mg | \$0(1) |  |
| <i>furosemide inj</i> SOLN 10mg/ml                                 | \$0(1) |  |
| <i>hydrochlorothiazide</i> CAPS 12.5mg; TABS<br>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 &amp; hydrochlorothiazide tab<br/>25-25 mg</i>   | \$0(1) |  |
| <i>torsemide</i> TABS 5mg, 10mg, 20mg, 100mg                       | \$0(1) |  |
| <i>triamterene &amp; hydrochlorothiazide cap 37.5-<br/>25 mg</i>   | \$0(1) |  |
| <i>triamterene &amp; hydrochlorothiazide tab 37.5-<br/>25 mg</i>   | \$0(1) |  |
| <i>triamterene &amp; hydrochlorothiazide tab 75-<br/>50 mg</i>     | \$0(1) |  |

### ***MISCELLANEOUS***

|  |        |   |
|--|--------|---|
| <i>ADRENALIN</i> SOLN 1mg/ml                             | \$0(2) |   |
| <i>aliskiren fumarate</i> TABS 150mg, 300mg              | \$0(1) |   |
| <i>clonidine</i> PTWK .1mg/24hr, .2mg/24hr,<br>.3mg/24hr | \$0(1) |   |
| <i>clonidine hcl</i> TABS .1mg, .2mg, .3mg               | \$0(1) |   |
| <i>CORLANOR</i> SOLN 5mg/5ml; TABS 5mg,<br>7.5mg         | \$0(2) |   |
| <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<br>days), NM, PA  |
| <i>droxidopa</i> CAPS 200mg, 300mg                       | \$0(2) | NDS, QL (180 caps / 30<br>days), NM, PA |
| <i>epinephrine (anaphylaxis)</i> SOLN 1mg/ml             | \$0(1) |   |
| <i>guanfacine hcl</i> TABS 1mg, 2mg                      | \$0(2) | PA; PA if 70 years and<br>older         |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>                       | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>hydralazine hcl</i> SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg | \$0(1)  |  |
| <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)  |  |
| <i>VERQUVO</i> TABS 2.5mg, 5mg, 10mg                              | \$0(2)  |  |

#### ***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>NITRO-BID</i> 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***

|   |        |   |
|---|--------|---|
| <i>ADEMPAS</i> 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 |
| <i>bosentan</i> TABS 62.5mg, 125mg                                    | \$0(2) | NDS, QL (60 tabs / 30 days), NM, LA, PA |
| <i>OPSUMIT</i> TABS 10mg  | \$0(2) | NDS, QL (30 tabs / 30 days), NM, LA, PA |
| <i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg          | \$0(1) | QL (360 tabs / 30 days), NM, PA         |
| <i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml | \$0(2) | NDS, NM, LA, PA                         |
| <i>VENTAVIS</i> SOLN 10mcg/ml, 20mcg/ml                               | \$0(2) | NDS, NM, LA, PA                         |

#### ***CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS***

|  |        |                         |
|--|--------|-------------------------|
| <b><i>ANTIANXIETY - DRUGS TO TREAT ANXIETY</i></b>     |        |                         |
| <i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg           | \$0(1) | QL (150 tabs / 30 days) |
| <i>buspirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg | \$0(1) |                         |
| <i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg      | \$0(1) |                         |
| <i>lorazepam</i> CONC 2mg/ml                           | \$0(1) | QL (150 mL / 30 days)   |
| <i>lorazepam</i> SOLN 2mg/ml, 4mg/ml                   | \$0(1) |                         |
| <i>lorazepam</i> TABS .5mg, 1mg, 2mg                   | \$0(1) | QL (150 tabs / 30 days) |
| <i>lorazepam intensol</i> CONC 2mg/ml                  | \$0(1) | QL (150 mL / 30 days)   |

Updated on 12/01/2023

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|---|---|--|
|---|---|--|

### **ANTICONVULSANTS - DRUGS TO TREAT SEIZURES**

|   |        |   |
|---|--------|---|
| APTIOM TABS 200mg, 400mg  | \$0(2) | NDS, QL (30 tabs / 30 days)                           |
| APTIOM TABS 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                       |
| <i>carbamazepine</i> CHEW 100mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg | \$0(1) |   |
| CELONTIN CAPS 300mg   | \$0(2) |   |
| <i>clobazam</i> SUSP 2.5mg/ml   | \$0(1) | QL (480 mL / 30 days), PA                             |
| <i>clobazam</i> TABS 10mg, 20mg   | \$0(1) | QL (60 tabs / 30 days), PA                            |
| <i>clonazepam</i> TABS 2mg; TBDP 2mg  | \$0(1) | QL (300 tabs / 30 days)                               |
| <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) |   |

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|--|---|--|
| DILANTIN INFATABS CHEW 50mg  | \$0(2)  |  |
| DILANTIN-125 SUSP 125mg/5ml  | \$0(2)  |  |
| <i>divalproex sodium</i> CSDR 125mg; TB24<br>250mg, 500mg; TBEC 125mg, 250mg,<br>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)  |  |
| EPRONTIA SOLN 25mg/ml  | \$0(2)  | QL (480 mL / 30 days), PA                                      |
| <i>ethosuximide</i> CAPS 250mg; SOLN<br>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), NM, 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                                     |
| FYCOMPA TABS 4mg, 6mg, 8mg, 10mg,<br>12mg  | \$0(2)  | NDS, QL (30 tabs / 30 days), PA                                |
| <i> gabapentin</i> CAPS 100mg, 300mg, 400mg  | \$0(1)  | QL (180 caps / 30 days)  |
| <i> gabapentin</i> SOLN 250mg/5ml, 300mg/6ml   | \$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> lacosamide</i> SOLN 200mg/20ml   | \$0(2)  | NDS  |
| <i> lacosamide</i> TABS 50mg   | \$0(1)  | QL (120 tabs / 30 days)  |
| <i> lacosamide</i> TABS 100mg, 150mg, 200mg  | \$0(1)  | QL (60 tabs / 30 days)   |
| <i> lacosamide oral</i> SOLN 10mg/ml   | \$0(1)  | QL (1200 mL / 30 days)   |
| <i> lamotrigine</i> CHEW 5mg, 25mg; TABS<br>25mg, 100mg, 150mg, 200mg; TB24<br>25mg, 50mg, 100mg, 200mg, 250mg,<br>300mg | \$0(1)  |  |
| <i> levetiracetam</i> SOLN 100mg/ml,<br>500mg/5ml; TABS 250mg, 500mg, 750mg,<br>1000mg; TB24 500mg, 750mg                | \$0(1)  |  |
| <i> levetiracetam in sodium chloride iv soln</i> 500<br>mg/100ml   | \$0(1)  |  |
| <i> levetiracetam in sodium chloride iv soln</i><br>1000 mg/100ml  | \$0(1)  |  |
| <i> levetiracetam in sodium chloride iv soln</i><br>1500 mg/100ml  | \$0(1)  |  |
| <i> methsuximide</i> CAPS 300mg  | \$0(1)  |  |
| NAYZILAM SOLN 5mg/0.1ml  | \$0(2)  |  |

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|--|---|--|
| <i>oxcarbazepine</i> 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                                   |
| <i>phenytek</i> CAPS 200mg, 300mg  | \$0(1)  |  |
| <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                                     |
| <i>pregabalin</i> SOLN 20mg/ml   | \$0(1)  | QL (900 mL / 30 days), PA                                      |
| <i>primidone</i> TABS 50mg, 125mg, 250mg   | \$0(1)  |  |
| <i>roweepra</i> TABS 500mg   | \$0(1)  |  |
| <i>rufinamide</i> SUSP 40mg/ml   | \$0(2)  | NDS, QL (2400 mL / 30 days), PA                                |
| <i>rufinamide</i> TABS 200mg   | \$0(1)  | 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, 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> 5 MG DOSE LIQD 5mg/0.1ml  | \$0(2)  |  |
| <i>VALTOCO</i> 10 MG DOSE LIQD 10mg/0.1ml  | \$0(2)  |  |

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|---|---|--|
| VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml         | \$0(2)  |  |
| VALTOCO 20 MG DOSE LQPK 10mg/0.1ml          | \$0(2)  |  |
| vigabatrin PACK 500mg                       | \$0(2)  | NDS, QL (180 packets / 30 days), NM, LA, PA                    |
| vigabatrin TABS 500mg                       | \$0(2)  | NDS, QL (180 tabs / 30 days), NM, LA, PA                       |
| vigadrone PACK 500mg                        | \$0(2)  | NDS, QL (180 packets / 30 days), NM, LA, PA                    |
| vigadrone TABS 500mg                        | \$0(2)  | NDS, QL (180 tabs / 30 days), NM, LA, PA                       |
| VIMPAT SOLN 10mg/ml                         | \$0(2)  | NDS, QL (1200 mL / 30 days)                                    |
| XCOPRI TABS 50mg, 100mg                     | \$0(2)  | NDS, QL (30 tabs / 30 days)                                    |
| XCOPRI TABS 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)                                    |
| ZONISADE SUSP 100mg/5ml                     | \$0(2)  | QL (900 mL / 30 days), PA                                      |
| zonisamide CAPS 25mg, 50mg, 100mg           | \$0(1)  |  |
| ZTALMY SUSP 50mg/ml                         | \$0(2)  | NDS, QL (1100 mL / 30 days), NM, LA, PA                        |

#### **ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS**

|   |        |                        |
|---|--------|------------------------|
| donepezil hydrochloride TABS 5mg; TBDP 5mg                            | \$0(1) | QL (30 tabs / 30 days) |
| donepezil hydrochloride TABS 10mg; TBDP 10mg                          | \$0(1) |                        |
| galantamine hydrobromide CP24 8mg, 16mg, 24mg                         | \$0(1) | QL (30 caps / 30 days) |
| galantamine hydrobromide SOLN 4mg/ml                                  | \$0(1) |                        |
| galantamine hydrobromide TABS 4mg, 8mg, 12mg                          | \$0(1) | QL (60 tabs / 30 days) |
| memantine hcl CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg | \$0(1) | PA; PA if < 30 yrs     |
| memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack               | \$0(2) | PA; PA if < 30 yrs     |
| NAMZARIC CAP 7-10MG   | \$0(2) |                        |

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|---|---|--|
| 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,<br>9.5mg/24hr, 13.3mg/24hr | \$0(1)  | QL (30 patches / 30 days)                                      |
| <i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg,<br>4.5mg, 6mg     | \$0(1)  | QL (60 caps / 30 days)   |

### **ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION**

|  |        |                                       |
|--|--------|---------------------------------------|
| <i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg,<br>75mg, 100mg, 150mg                    | \$0(2) |                                       |
| <i>amoxapine</i> TABS 25mg, 50mg, 100mg,<br>150mg  | \$0(2) |                                       |
| AUVELITY TAB 45-105MG  | \$0(2) | QL (60 tabs / 30 days),<br>PA         |
| <i>bupropion hcl</i> TABS 75mg, 100mg; TB12<br>100mg, 150mg, 200mg; TB24 150mg,<br>300mg | \$0(1) |                                       |
| <i>citalopram hydrobromide</i> SOLN 10mg/5ml;<br>TABS 10mg, 20mg, 40mg                   | \$0(1) |                                       |
| <i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg  | \$0(2) | PA                                    |
| <i>desipramine hcl</i> TABS 10mg, 25mg, 50mg,<br>75mg, 100mg, 150mg                      | \$0(2) |                                       |
| <i>desvenlafaxine succinate</i> TB24 25mg,<br>50mg, 100mg                                | \$0(1) | QL (30 tabs / 30 days),<br>PA         |
| <i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg,<br>75mg, 100mg, 150mg; CONC 10mg/ml            | \$0(2) |                                       |
| DRIZALMA SPRINKLE CSDR 20mg, 30mg,<br>40mg, 60mg   | \$0(2) | QL (60 caps / 30 days),<br>PA         |
| <i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg  | \$0(1) | QL (60 caps / 30 days)                |
| EMSAM PT24 6mg/24hr, 9mg/24hr,<br>12mg/24hr  | \$0(2) | NDS, QL (30 patches /<br>30 days), PA |
| <i>escitalopram oxalate</i> SOLN 5mg/5ml; TABS<br>5mg, 10mg, 20mg                        | \$0(1) |                                       |
| FETZIMA CP24 20mg, 40mg  | \$0(2) | QL (60 caps / 30 days),<br>PA         |
| FETZIMA CP24 80mg, 120mg   | \$0(2) | QL (30 caps / 30 days),<br>PA         |
| FETZIMA CAP TITRATIO   | \$0(2) | PA                                    |
| <i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg;<br>SOLN 20mg/5ml                            | \$0(1) |                                       |
| <i>imipramine hcl</i> TABS 10mg, 25mg, 50mg  | \$0(2) |                                       |
| MARPLAN TABS 10mg  | \$0(2) | QL (180 tabs / 30 days)               |
| <i>mirtazapine</i> TABS 7.5mg, 15mg, 30mg,<br>45mg; TBDP 15mg, 30mg, 45mg                | \$0(1) |                                       |

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|---|---|--|
| <i>nefazodone hcl</i> TABS 50mg, 100mg,<br>150mg, 200mg, 250mg                              | \$0(1)  |  |
| <i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg,<br>75mg; SOLN 10mg/5ml                      | \$0(2)  |  |
| <i>paroxetine hcl</i> SUSP 10mg/5ml   | \$0(2)  | QL (900 mL / 30 days),<br>PA                                   |
| <i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg,<br>40mg  | \$0(2)  |  |
| <i>phenelzine sulfate</i> TABS 15mg   | \$0(1)  |  |
| <i>protriptyline hcl</i> TABS 5mg, 10mg   | \$0(2)  |  |
| <i>sertraline hcl</i> CONC 20mg/ml; TABS 25mg,<br>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, 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, 10mg, 20mg  | \$0(2)  | QL (30 tabs / 30 days)   |
| <i>venlafaxine hcl</i> CP24 37.5mg, 75mg,<br>150mg; TABS 25mg, 37.5mg, 50mg, 75mg,<br>100mg | \$0(1)  |  |
| <i>VIIBRYD KIT STARTER</i>  | \$0(2)  |  |
| <i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg   | \$0(1)  | QL (30 tabs / 30 days)   |

### **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<br>100mg             | \$0(1) |                                 |
| <i>benztropine mesylate</i> SOLN 1mg/ml                        | \$0(1) |                                 |
| <i>benztropine mesylate</i> TABS .5mg, 1mg,<br>2mg             | \$0(2) | PA; PA if 70 years and<br>older |
| <i>bromocriptine mesylate</i> CAPS 5mg; TABS<br>2.5mg          | \$0(1) |                                 |
| <i>carb/levo orally disintegrating tab 10-</i><br><i>100mg</i> | \$0(1) |                                 |
| <i>carb/levo orally disintegrating tab 25-</i><br><i>100mg</i> | \$0(1) |                                 |
| <i>carb/levo orally disintegrating tab 25-</i><br><i>250mg</i> | \$0(1) |                                 |
| <i>carbidopa &amp; levodopa tab 10-100 mg</i>                  | \$0(1) |                                 |
| <i>carbidopa &amp; levodopa tab 25-100 mg</i>                  | \$0(1) |                                 |
| <i>carbidopa &amp; levodopa tab 25-250 mg</i>                  | \$0(1) |                                 |
| <i>carbidopa &amp; levodopa tab er 25-100 mg</i>               | \$0(1) |                                 |
| <i>carbidopa &amp; levodopa tab er 50-200 mg</i>               | \$0(1) |                                 |

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| <b>Drug Name<br/>(By Medical Condition)</b>                                    | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| <i>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</i>                       | \$0(1)  |  |
| <i>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</i>                      | \$0(1)  |  |
| <i>carbidopa-levodopa-entacapone tabs 25-100-200 mg</i>                        | \$0(1)  |  |
| <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</i>   | \$0(1)  |  |
| <i>INBRIJA CAPS 42mg</i>   | \$0(2)  | NDS, QL (300 caps / 30 days), NM, LA, 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 .5mg, 1mg</i>                                      | \$0(1)  | QL (30 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(2) | NDS, 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 10.5mg, 21mg, 42mg</i>                     | \$0(2) | NDS, QL (30 caps / 30 days)     |

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|---|---|--|
| <i>chlorpromazine hcl</i> CONC 30mg/ml,<br>100mg/ml; SOLN 25mg/ml, 50mg/2ml;<br>TABS 10mg, 25mg, 50mg, 100mg, 200mg | \$0(1)  |  |
| <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 (120 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),<br>PA                                 |
| <i>clozapine</i> TBDP 150mg   | \$0(1)  | QL (180 tabs / 30 days),<br>PA                                 |
| <i>clozapine</i> TBDP 200mg   | \$0(2)  | NDS, QL (120 tabs / 30<br>days), PA                            |
| FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg,<br>10mg, 12mg  | \$0(2)  | NDS, QL (60 tabs / 30<br>days), PA                             |
| FANAPT PAK  | \$0(2)  | PA   |
| <i>fluphenazine decanoate</i> SOLN 25mg/ml  | \$0(1)  |  |
| <i>fluphenazine hcl</i> CONC 5mg/ml; ELIX<br>2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg,<br>2.5mg, 5mg, 10mg                | \$0(1)  |  |
| <i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg,<br>10mg, 20mg  | \$0(1)  |  |
| <i>haloperidol decanoate</i> SOLN 50mg/ml,<br>100mg/ml  | \$0(1)  |  |
| <i>haloperidol lactate</i> CONC 2mg/ml; SOLN<br>5mg/ml  | \$0(1)  |  |
| INVEGA HAFYERA SUSY 1092mg/3.5ml,<br>1560mg/5ml   | \$0(2)  | NDS, QL (1 injection /<br>180 days)                            |
| INVEGA SUSTENNA SUSY 39mg/0.25ml  | \$0(2)  | QL (1 syringe / 28 days)                                       |
| INVEGA SUSTENNA SUSY 78mg/0.5ml,<br>117mg/0.75ml, 156mg/ml, 234mg/1.5ml   | \$0(2)  | NDS, QL (1 syringe / 28<br>days)                               |
| INVEGA TRINZA SUSY 273mg/0.88ml,<br>410mg/1.32ml, 546mg/1.75ml,<br>819mg/2.63ml                                     | \$0(2)  | NDS, QL (1 syringe / 90<br>days)                               |
| LATUDA TABS 20mg, 40mg, 60mg, 120mg   | \$0(2)  | NDS, QL (30 tabs / 30<br>days)                                 |
| LATUDA TABS 80mg  | \$0(2)  | NDS, QL (60 tabs / 30<br>days)                                 |
| <i>loxpipamine succinate</i> CAPS 5mg, 10mg,<br>25mg, 50mg  | \$0(1)  |  |
| <i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg,<br>120mg   | \$0(1)  | QL (30 tabs / 30 days)   |
| <i>lurasidone hcl</i> TABS 80mg   | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>molindone hcl</i> TABS 5mg, 10mg, 25mg   | \$0(1)  |  |

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|---|---|--|
| 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)   |
| <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, 150mg, 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)  | NDS, QL (30 tabs / 30 days)                                    |
| REXULTI TABS .25mg, .5mg, 1mg, 2mg  | \$0(2)  | NDS, 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   | \$0(1)  | QL (60 tabs / 30 days)   |
| <i>risperidone</i> TBDP 4mg   | \$0(1)  | QL (120 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                                 |

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|--|---|--|
| VRAYLAR CAPS 1.5mg                                 | \$0(2)  | NDS, QL (60 caps / 30 days)                                    |
| VRAYLAR CAPS 3mg, 4.5mg, 6mg                       | \$0(2)  | NDS, QL (30 caps / 30 days)                                    |
| VRAYLAR CAP 1.5-3MG                                | \$0(2)  |  |
| <i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg | \$0(1)  | QL (60 caps / 30 days)   |
| <i>ziprasidone mesylate</i> SOLR 20mg              | \$0(1)  | QL (6 injections / 3 days)                                     |
| ZYPREXA RELPREVV SUSR 210mg                        | \$0(2)  | QL (2 vials / 28 days), NM, PA                                 |
| ZYPREXA RELPREVV SUSR 300mg                        | \$0(2)  | NDS, QL (2 vials / 28 days), NM, PA                            |
| ZYPREXA RELPREVV SUSR 405mg                        | \$0(2)  | NDS, QL (1 vial / 28 days), NM, PA                             |

**ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD**

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

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|---|---|---|
| <i>atomoxetine hcl</i> CAPS 60mg, 80mg, 100mg         | \$0(1)  | QL (30 caps / 30 days)  |
| <i>dexmethylphenidate hcl</i> TABS 2.5mg, 5mg         | \$0(1)  | QL (120 tabs / 30 days), PA   |
| <i>dexmethylphenidate hcl</i> TABS 10mg               | \$0(1)  | QL (60 tabs / 30 days), PA  |
| <i>guanfacine hcl (adhd)</i> TB24 1mg, 2mg, 4mg       | \$0(2)  | QL (30 tabs / 30 days), PA; PA if 70 years and older  |
| <i>guanfacine hcl (adhd)</i> TB24 3mg                 | \$0(2)  | QL (60 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  |
| <b>HYPNOTICS - DRUGS TO TREAT INSOMNIA</b>            |   |   |
| <i>BELSOMRA</i> TABS 5mg, 10mg, 15mg, 20mg            | \$0(2)  | QL (30 tabs / 30 days)  |
| <i>DAYVIGO</i> TABS 5mg, 10mg                         | \$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>tasimelteon</i> CAPS 20mg                          | \$0(2)  | NDS, QL (30 caps / 30 days), NM, PA   |
| <i>temazepam</i> CAPS 7.5mg, 30mg                     | \$0(1)  | QL (30 caps / 30 days), PA; PA if 65 years and older  |
| <i>temazepam</i> CAPS 15mg                            | \$0(1)  | QL (60 caps / 30 days), PA; PA if 65 years and older  |
| <i>zaleplon</i> CAPS 5mg                              | \$0(2)  | QL (30 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year |

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|---|---|---|
| zaleplon CAPS 10mg                          | \$0(2)  | QL (60 caps / 30 days),<br>PA; PA applies if 70<br>years and older after a<br>90 day supply in a<br>calendar year |
| zolpidem tartrate TABS 5mg, 10mg            | \$0(2)  | QL (30 tabs / 30 days),<br>PA; PA applies if 70<br>years and older after a<br>90 day supply in a<br>calendar year |

#### ***MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES***

|   |        |                                 |
|---|--------|---------------------------------|
| AIMOVIG SOAJ 70mg/ml, 140mg/ml  | \$0(2) | QL (1 pen / 30 days),<br>NM, PA |
| dihydroergotamine mesylate SOLN 1mg/ml                                  | \$0(2) | NDS                             |
| dihydroergotamine mesylate SOLN 4mg/ml                                  | \$0(2) | NDS, QL (8 mL / 30<br>days), PA |
| ergotamine w/ caffeine tab 1-100 mg                                     | \$0(1) | QL (40 tabs / 28 days),<br>PA   |
| naratriptan hcl TABS 1mg, 2.5mg   | \$0(1) | QL (12 tabs / 30 days)          |
| NURTEC TBDP 75mg  | \$0(2) | QL (16 tabs / 30 days),<br>PA   |
| rizatriptan benzoate TABS 5mg, 10mg;<br>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;<br>SOCT 4mg/0.5ml                 | \$0(1) | QL (18 injections / 30<br>days) |
| sumatriptan succinate SOAJ 6mg/0.5ml;<br>SOCT 6mg/0.5ml; SOLN 6mg/0.5ml | \$0(1) | QL (12 injections / 30<br>days) |
| sumatriptan succinate TABS 25mg, 50mg,<br>100mg                         | \$0(1) | QL (12 tabs / 30 days)          |
| zolmitriptan TABS 2.5mg, 5mg; TBDP<br>2.5mg, 5mg                        | \$0(1) | QL (12 tabs / 30 days)          |

#### ***MISCELLANEOUS***

|                        |        |   |
|------------------------|--------|---|
| AUSTEDO TABS 6mg       | \$0(2) | NDS, QL (60 tabs / 30<br>days), NM, LA, PA  |
| AUSTEDO TABS 9mg, 12mg | \$0(2) | NDS, QL (120 tabs / 30<br>days), NM, LA, PA |
| AUSTEDO XR TB24 6mg    | \$0(2) | NDS, QL (90 tabs / 30<br>days), NM, PA      |
| AUSTEDO XR TB24 12mg   | \$0(2) | NDS, QL (120 tabs / 30<br>days), NM, PA     |
| AUSTEDO XR TB24 24mg   | \$0(2) | NDS, QL (60 tabs / 30<br>days), NM, PA      |

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|--|---|--|
| AUSTEDO XR TAB TITR KIT  | \$0(2)  | NDS, QL (2 packs / year), NM, PA                               |
| INGREZZA CAPS 40mg, 60mg, 80mg   | \$0(2)  | NDS, QL (30 caps / 30 days), NM, LA, PA                        |
| INGREZZA CAP 40-80MG   | \$0(2)  | NDS, QL (28 caps / 28 days), NM, LA, PA                        |
| LITHIUM SOLN 8meq/5ml  | \$0(2)  |  |
| <i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 300mg, 450mg | \$0(1)  |  |
| NUEDEXTA CAP 20-10MG   | \$0(2)  | QL (60 caps / 30 days), PA                                     |
| <i>pyridostigmine bromide</i> TABS 60mg  | \$0(1)  |  |
| <i>riluzole</i> TABS 50mg  | \$0(1)  |  |
| <i>tetrabenazine</i> TABS 12.5mg   | \$0(2)  | 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**

|  |        |  |
|--|--------|--|
| BAFIERTAM CPDR 95mg                    | \$0(2) | NDS, QL (120 caps / 30 days), NM, LA, PA |
| BETASERON KIT .3mg                     | \$0(2) | NDS, QL (14 syringes / 28 days), NM, PA  |
| <i>dalfampridine</i> TB12 10mg         | \$0(1) | NM, PA                                   |
| <i>fingolimod hcl</i> 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  |
| KESIMPTA SOAJ 20mg/0.4ml               | \$0(2) | NDS, QL (16 pens / year), NM, LA, 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                          |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>  | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| <i>dantrolene sodium</i> CAPS 25mg, 50mg,<br>100mg                                     | \$0(1)  |  |
| <i>methocarbamol</i> TABS 500mg, 750mg   | \$0(2)  | PA; PA if 70 years and older                                   |
| <i>tizanidine hcl</i> TABS 2mg, 4mg  | \$0(1)  |  |
| <i>vanadom</i> TABS 350mg  | \$0(2)  | QL (120 tabs / 30 days),<br>PA; PA if 70 years and older       |
| <b>NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS</b>                                |   |  |
| <i>armodafinil</i> TABS 50mg   | \$0(1)  | QL (60 tabs / 30 days),<br>PA                                  |
| <i>armodafinil</i> TABS 150mg, 200mg, 250mg  | \$0(1)  | QL (30 tabs / 30 days),<br>PA                                  |
| <i>SODIUM OXYBATE</i> SOLN 500mg/ml  | \$0(2)  | NDS, QL (540 mL / 30 days), NM, LA, PA                         |
| <i>XYREM</i> SOLN 500mg/ml   | \$0(2)  | NDS, QL (540 mL / 30 days), NM, LA, PA                         |
| <b>PSYCHOTHERAPEUTIC-MISC</b>  |   |  |
| <i>acamprosate calcium</i> TBEC 333mg  | \$0(1)  |  |
| <i>buprenorphine hcl</i> SUBL 2mg, 8mg   | \$0(1)  | QL (90 tabs / 30 days),<br>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)</i> TB12 150mg                                    | \$0(1)  |  |
| <i>disulfiram</i> TABS 250mg, 500mg  | \$0(1)  |  |
| <i>naloxone hcl</i> LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY 2mg/2ml | \$0(1)  |  |
| <i>naltrexone hcl</i> TABS 50mg  | \$0(1)  |  |
| <i>NICOTROL INHALER</i> INHA 10mg  | \$0(2)  |  |
| <i>NICOTROL NS</i> SOLN 10mg/ml  | \$0(2)  |  |
| <i>varenicline tartrate</i> TABS .5mg, 1mg   | \$0(1)  | QL (56 tabs / 28 days),<br>PA                                  |

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|---|---|--|
|---|---|--|

|   |        |         |
|---|--------|---------|
| varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack | \$0(1) | PA      |
| VIVITROL SUSR 380mg   | \$0(2) | NDS, NM |

## **ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES**

### **ANDROGENS - DRUGS TO REGULATE MALE HORMONES**

|  |        |                           |
|--|--------|---------------------------|
| depo-testosterone SOLN 100mg/ml, 200mg/ml      | \$0(1) | PA                        |
| testosterone GEL 1%, 25mg/2.5gm, 50mg/5gm      | \$0(1) | QL (300 gm / 30 days), PA |
| testosterone GEL 1.62%                         | \$0(1) | QL (150 gm / 30 days), PA |
| testosterone cypionate SOLN 100mg/ml, 200mg/ml | \$0(1) | PA                        |
| testosterone enanthate SOLN 200mg/ml           | \$0(1) | PA                        |

### **ANTIDIABETICS**

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

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|--|---|--|
| 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);<br>(generic of<br>GLUCOPHAGE XR)      |
| <i>metformin hcl</i> TB24 750mg                                    | \$0(1)  | QL (60 tabs / 30 days);<br>(generic of<br>GLUCOPHAGE XR)       |
| <i>nateglinide</i> TABS 60mg, 120mg                                | \$0(1)  | QL (90 tabs / 30 days)   |
| OZEMPIC (0.25 OR 0.5MG/DOSE) SOPN<br>2mg/1.5ml, 2mg/3ml            | \$0(2)  | QL (1 pen / 28 days), PA                                       |
| OZEMPIC (1MG/DOSE) SOPN 4mg/3ml                                    | \$0(2)  | QL (1 pen / 28 days), PA                                       |
| OZEMPIC (2MG/DOSE) SOPN 8MG/3ML                                    | \$0(2)  | QL (1 pen / 28 days), PA                                       |
| <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),<br>PA                                  |
| 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)   |
| TRIJARDY XR TAB ER 24HR 12.5-2.5-<br>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,<br>1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml | \$0(2)  | QL (4 pens / 28 days),<br>PA                                   |
| VICTOZA SOPN 18mg/3ml  | \$0(2)  | QL (3 pens / 30 days),<br>PA                                   |
| 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)   |

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|---|---|--|
| 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)   |
| <b>ANTIDIABETICS, INSULINS</b>              |   |  |
| 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)  |  |
| FIASP PMPCRT INJ U-100                      | \$0(2)  | B/D  |
| 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 PEN NEEDLES: BD/NOVO                | \$0(2)  |  |
| INSULIN SAFETY NEEDLES                      | \$0(2)  |  |
| INSULIN SYRINGES: BD                        | \$0(2)  |  |
| LANTUS SOLN 100unit/ml                      | \$0(2)  |  |
| LANTUS SOLOSTAR SOPN 100unit/ml             | \$0(2)  |  |
| LEVEMIR SOLN 100unit/ml                     | \$0(2)  |  |
| LEVEMIR FLEXPEN SOPN 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)                                     |
| 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)                                     |

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|--|---|--|
| NOVOLOG PENFILL SOCT 100unit/ml                  | \$0(2)  | (brand RELION not covered)                                     |
| OMNIPOD 5 G6 KIT INTRO                           | \$0(2)  | QL (1 kit / year), PA  |
| OMNIPOD 5 G6 MIS PODS                            | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD DASH KIT INTRO                           | \$0(2)  | QL (1 kit / year), PA  |
| OMNIPOD DASH MIS PODS                            | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 10UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 15UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 20UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 25UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 30UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 35UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD GO KIT 40UNT/DY                          | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD MIS CLASSIC                              | \$0(2)  | QL (15 pods / 30 days), PA                                     |
| OMNIPOD PDM KIT CLASSIC                          | \$0(2)  | QL (1 kit / year), PA  |
| SOLIQUA INJ 100/33                               | \$0(2)  | QL (5 pens / 25 days)  |
| TOUJEO MAX SOLOSTAR SOPN 300unit/ml              | \$0(2)  |  |
| TOUJEO SOLOSTAR SOPN 300unit/ml                  | \$0(2)  |  |
| TRESIBA SOLN 100unit/ml                          | \$0(2)  |  |
| TRESIBA FLEXTOUCH SOPN 100unit/ml,<br>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;<br>TABS 10mg, 35mg, 70mg | \$0(1) |             |
| calcitonin (salmon) spray SOLN 200unit/act                  | \$0(1) | B/D         |
| FORTEO SOPN 600mcg/2.4ml                                    | \$0(2) | NDS, NM, PA |
| ibandronate sodium TABS 150mg                               | \$0(1) | B/D         |
| NATPARA CART 25mcg, 50mcg, 75mcg,<br>100mcg                 | \$0(2) | NDS, LA, PA |
| PAMIDRONATE DISODIUM SOLN 6mg/ml                            | \$0(2) | B/D         |

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|--|---|--|
| pamidronate disodium SOLN 30mg/10ml,<br>90mg/10ml          | \$0(1)  | B/D  |
| PROLIA SOSY 60mg/ml  | \$0(2)  | QL (1 syringe / 180 days), NM                                  |
| risedronate sodium TABS 5mg, 35mg,<br>150mg; TBEC 35mg     | \$0(1)  |  |
| TERIPARATIDE SOPN 620mcg/2.48ml                            | \$0(2)  | NDS, NM, PA  |
| XGEVA SOLN 120mg/1.7ml                                     | \$0(2)  | NDS, NM, PA  |
| zoledronic acid CONC 4mg/5ml; SOLN<br>4mg/100ml, 5mg/100ml | \$0(1)  | B/D, NM  |

### **CHELATING AGENTS**

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

### **CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL**

|                    |        |  |
|--------------------|--------|--|
| afirmelle          | \$0(1) |  |
| altavera           | \$0(1) |  |
| alyacen 1/35       | \$0(1) |  |
| alyacen 7/7/7      | \$0(1) |  |
| amethia            | \$0(1) |  |
| apri               | \$0(1) |  |
| aranelle           | \$0(1) |  |
| ashlyna            | \$0(1) |  |
| aubra eq           | \$0(1) |  |
| aurovela 1/20      | \$0(1) |  |
| aurovela 24 fe     | \$0(1) |  |
| aurovela fe 1.5/30 | \$0(1) |  |
| aurovela fe 1/20   | \$0(1) |  |
| aviane             | \$0(1) |  |
| ayuna              | \$0(1) |  |
| azurette           | \$0(1) |  |
| balziva            | \$0(1) |  |
| blisovi 24 fe      | \$0(1) |  |
| blisovi fe 1.5/30  | \$0(1) |  |
| briellyn           | \$0(1) |  |
| camila TABS .35mg  | \$0(1) |  |

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|---|---|--|
| <i>camrese</i>  | \$0(1)  |  |
| <i>camrese lo</i>   | \$0(1)  |  |
| <i>chateal</i>  | \$0(1)  |  |
| <i>cryselle-28</i>  | \$0(1)  |  |
| <i>cyred eq</i>   | \$0(1)  |  |
| <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 &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</i> | \$0(1)  |  |
| <i>desogestrel &amp; 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>eluryng</i>  | \$0(1)  |  |
| <i>emoquette</i>  | \$0(1)  |  |
| <i>enilloring</i>   | \$0(1)  |  |
| <i>enpresse-28</i>  | \$0(1)  |  |
| <i>enskyce</i>  | \$0(1)  |  |
| <i>errin TABS .35mg</i>   | \$0(1)  |  |
| <i>estarryla</i>  | \$0(1)  |  |
| <i>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg</i>     | \$0(1)  |  |
| <i>ethynodiol diacetate &amp; 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>femynor</i>  | \$0(1)  |  |
| <i>finzala</i>  | \$0(1)  |  |
| <i>hailey 1.5/30</i>  | \$0(1)  |  |
| <i>hailey 24 fe</i>   | \$0(1)  |  |
| <i>haloette</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)  |  |

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| <b>Drug Name<br/>(By Medical Condition)</b>                             | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <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)  |  |
| <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>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</i>                         | \$0(1)  |  |
| <i>mg &amp;eth est 0.01 mg</i>  |   |  |
| <i>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</i>  | \$0(1)  |  |
| <i>levonorg-eth est tab 0.15-0.03mg(84) &amp; eth est tab 0.01mg(7)</i> | \$0(1)  |  |
| <i>levonorgestrel &amp; ethynodiolide (91-day) tab 0.15-0.03 mg</i>     | \$0(1)  |  |
| <i>levonorgestrel &amp; ethynodiolide tab 0.1 mg-20 mcg</i>             | \$0(1)  |  |
| <i>levonorgestrel &amp; 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>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>lutera</i>   | \$0(1)  |  |

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| <b>Drug Name<br/>(By Medical Condition)</b>   | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>lyeq TABS .35mg</i>  | \$0(1)  |  |
| <i>lyza TABS .35mg</i>  | \$0(1)  |  |
| <i>marlissa</i>   | \$0(1)  |  |
| <i>medroxyprogesterone acetate<br/>(contraceptive) SUSP 150mg/ml; SUSY<br/>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 24 fe</i>  | \$0(1)  |  |
| <i>microgestin fe 1.5/30</i>  | \$0(1)  |  |
| <i>microgestin fe 1/20</i>  | \$0(1)  |  |
| <i>mili</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 &amp; ethynodiol-Fe chew<br/>tab 0.4 mg-35 mcg</i>                     | \$0(1)  |  |
| <i>norethindrone &amp; ethynodiol-Fe chew<br/>tab 0.8 mg-25 mcg</i>                     | \$0(1)  |  |
| <i>norethindrone (contraceptive) TABS .35mg</i>   | \$0(1)  |  |
| <i>norethindrone ac-ethynodiol-Fe tab 1-<br/>20/1-30/1-35 mg-mcg</i>                    | \$0(1)  |  |
| <i>norethindrone ace &amp; ethynodiol tab 1<br/>mg-20 mcg</i>                           | \$0(1)  |  |
| <i>norethindrone ace &amp; ethynodiol tab<br/>1.5 mg-30 mcg</i>                         | \$0(1)  |  |
| <i>norethindrone ace &amp; ethynodiol-Fe tab<br/>1 mg-20 mcg</i>                        | \$0(1)  |  |
| <i>norethindrone ace-eth estradiol-Fe chew tab<br/>1 mg-20 mcg (24)</i>                 | \$0(1)  |  |
| <i>norgestimate &amp; ethynodiol tab 0.25<br/>mg-35 mcg</i>                             | \$0(1)  |  |
| <i>norgestimate-eth estrad tab 0.18-25/0.215-<br/>25/0.25-25 mg-mcg</i>                 | \$0(1)  |  |
| <i>norgestimate-eth estrad tab 0.18-35/0.215-<br/>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 1/35</i>   | \$0(1)  |  |

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|---|---|--|
| <i>nylia</i> 7/7/7                          | \$0(1)  |  |
| <i>nymyo</i>                                | \$0(1)  |  |
| <i>ocella</i>                               | \$0(1)  |  |
| <i>philith</i>                              | \$0(1)  |  |
| <i>pimtrea</i>                              | \$0(1)  |  |
| <i>pirmella</i> 1/35                        | \$0(1)  |  |
| <i>portia-28</i>                            | \$0(1)  |  |
| <i>reclipsen</i>                            | \$0(1)  |  |
| <i>rivelsa</i>                              | \$0(1)  |  |
| <i>setlakin</i>                             | \$0(1)  |  |
| <i>sharobel</i> TABS .35mg                  | \$0(1)  |  |
| <i>simliya</i>                              | \$0(1)  |  |
| <i>simpesse</i>                             | \$0(1)  |  |
| <i>sprintec</i> 28                          | \$0(1)  |  |
| <i>sronyx</i>                               | \$0(1)  |  |
| <i>syeda</i>                                | \$0(1)  |  |
| <i>tarina</i> 24 fe                         | \$0(1)  |  |
| <i>tarina</i> fe 1/20 eq                    | \$0(1)  |  |
| <i>tilia</i> fe                             | \$0(1)  |  |
| <i>tri-estarrylla</i>                       | \$0(1)  |  |
| <i>tri-legest</i> fe                        | \$0(1)  |  |
| <i>tri-linyah</i>                           | \$0(1)  |  |
| <i>tri-lo-estarrylla</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-sprintec</i>                         | \$0(1)  |  |
| <i>tri-vylibra</i>                          | \$0(1)  |  |
| <i>tri-vylibra</i> lo                       | \$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</i> fe                            | \$0(1)  |  |
| <i>xulane</i>                               | \$0(1)  |  |
| <i>zafemy</i>                               | \$0(1)  |  |

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| <b>Drug Name<br/>(By Medical Condition)</b>   | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>zovia 1/35</i>   | \$0(1)  |  |
| <i>zumandimine</i>  | \$0(1)  |  |
| <b><i>ENDOMETRIOSIS</i></b>   |   |  |
| <i>danazol CAPS 50mg, 100mg, 200mg</i>  | \$0(1)  |  |
| <i>SYNAREL SOLN 2mg/ml</i>  | \$0(2)  | NDS  |
| <b><i>ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES</i></b>   |   |  |
| <i>amabelz</i>  | \$0(2)  |  |
| <i>DELESTROGEN OIL 10mg/ml</i>  | \$0(2)  |  |
| <i>dotti PTTW .025mg/24hr, .037mg/24hr,<br/>.05mg/24hr, .075mg/24hr, .1mg/24hr</i>  | \$0(2)  |  |
| <i>estradiol PTTW .025mg/24hr,<br/>.037mg/24hr, .05mg/24hr, .075mg/24hr,<br/>.1mg/24hr; PTWK .025mg/24hr,<br/>.05mg/24hr, .06mg/24hr, .075mg/24hr,<br/>.1mg/24hr, 37.5mcg/24hr; TABS .5mg,<br/>1mg, 2mg</i> | \$0(2)  |  |
| <i>estradiol &amp; norethindrone acetate tab 0.5-<br/>0.1 mg</i>  | \$0(2)  |  |
| <i>estradiol &amp; norethindrone acetate tab 1-0.5<br/>mg</i>   | \$0(2)  |  |
| <i>estradiol vaginal CREA .1mg/gm; TABS<br/>10mcg</i>   | \$0(1)  |  |
| <i>estradiol valerate OIL 10mg/ml, 20mg/ml,<br/>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,<br/>.05mg/24hr, .075mg/24hr, .1mg/24hr</i>  | \$0(2)  |  |
| <i>mimvey</i>   | \$0(2)  |  |
| <i>norethindrone acetate-ethynodiol estradiol tab<br/>0.5 mg-2.5 mcg</i>  | \$0(2)  |  |
| <i>norethindrone acetate-ethynodiol estradiol tab<br/>1 mg-5 mcg</i>  | \$0(2)  |  |
| <i>yuvafem TABS 10mcg</i>   | \$0(1)  |  |
| <b><i>GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE</i></b>  |   |  |
| <i>dexamethasone ELIX .5mg/5ml; SOLN<br/>.5mg/5ml; TABS .5mg, .75mg, 1mg,<br/>1.5mg, 2mg, 4mg, 6mg</i>  | \$0(1)  |  |
| <i>DEXAMETHASONE INTENSOL CONC<br/>1mg/ml</i>   | \$0(2)  |  |
| <i>dexamethasone sodium phosphate SOLN<br/>4mg/ml, 10mg/ml, 20mg/5ml,<br/>100mg/10ml, 120mg/30ml</i>  | \$0(1)  |  |

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|---|---|--|
| <i>fludrocortisone acetate TABS .1mg</i>  | \$0(1)  |  |
| <i>hydrocortisone TABS 5mg, 10mg, 20mg</i>  | \$0(1)  |  |
| <i>methylprednisolone TABS 4mg, 8mg,<br/>16mg, 32mg</i>                                     | \$0(1)  | B/D  |
| <i>methylprednisolone TBPK 4mg</i>  | \$0(1)  |  |
| <i>methylprednisolone acetate SUSP<br/>40mg/ml, 80mg/ml</i>                                 | \$0(1)  | B/D  |
| <i>methylprednisolone sod succ SOLR 40mg,<br/>125mg, 1000mg</i>                             | \$0(1)  | B/D  |
| <i>prednisolone SOLN 15mg/5ml</i>   | \$0(1)  | B/D  |
| <i>prednisolone sodium phosphate SOLN<br/>5mg/5ml, 15mg/5ml, 25mg/5ml</i>                   | \$0(1)  | B/D  |
| <i>prednisone SOLN 5mg/5ml; TABS 1mg,<br/>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<br/>SOLU-CORTEF SOLR 100mg, 250mg,<br/>500mg, 1000mg</i> | \$0(2)  | B/D  |
|   |   |  |
| <b>GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR</b>                            |   |  |
| <i>diazoxide SUSP 50mg/ml</i>   | \$0(2)  | NDS  |
| <i>GVOKE HYPOOPEN 2-PACK SOAJ<br/>.5mg/0.1ml, 1mg/0.2ml</i>                                 | \$0(2)  |  |
| <i>GVOKE KIT SOLN 1mg/0.2ml</i>   | \$0(2)  |  |
| <i>GVOKE PFS SOSY .5mg/0.1ml, 1mg/0.2ml</i>   | \$0(2)  |  |
|   |   |  |
| <b>MISCELLANEOUS</b>  |   |  |
| <i>ALDURAZYME SOLN 2.9mg/5ml</i>  | \$0(2)  | NDS, NM, LA, PA  |
| <i>betaine powder for oral solution</i>   | \$0(2)  | NDS, NM, LA  |
| <i>cabergoline TABS .5mg</i>  | \$0(1)  |  |
| <i>carglumic acid TBSO 200mg</i>  | \$0(2)  | NDS, NM, LA, PA  |
| <i>CERDELGA CAPS 84mg</i>   | \$0(2)  | NDS, NM, LA, PA  |
| <i>CEREZYME SOLR 400unit</i>  | \$0(2)  | NDS, NM, LA, PA  |
| <i>cinacalcet hcl TABS 30mg</i>   | \$0(1)  | B/D, QL (60 tabs / 30<br>days), NM                             |
| <i>cinacalcet hcl TABS 60mg</i>   | \$0(2)  | NDS, B/D, QL (60 tabs /<br>30 days), NM                        |
| <i>cinacalcet hcl TABS 90mg</i>   | \$0(2)  | NDS, B/D, QL (120 tabs /<br>30 days), NM                       |
| <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<br/>SOLN .01%</i>                                | \$0(1)  |  |
| <i>FABRAZYME SOLR 5mg, 35mg</i>   | \$0(2)  | NDS, NM, LA, PA  |

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|---|---|--|
| GENOTROPIN CART 5mg, 12mg   | \$0(2)  | NDS, NM, PA  |
| GENOTROPIN MINIQUICK PRSY .2mg,.4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg   | \$0(2)  | NDS, NM, PA  |
| INCRELEX SOLN 40mg/4ml  | \$0(2)  | NDS, NM, LA, PA  |
| javygtor PACK 100mg, 500mg; TABS 100mg  | \$0(2)  | NDS, NM, LA, PA  |
| KORLYM TABS 300mg   | \$0(2)  | NDS, NM, LA, PA  |
| <i>levocarnitine (metabolic modifiers)</i> SOLN 1gm/10ml; TABS 330mg                    | \$0(1)  | B/D  |
| LUMIZYME SOLR 50mg  | \$0(2)  | NDS, NM, LA, PA  |
| LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg                                      | \$0(2)  | NDS, NM, PA  |
| LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg   | \$0(2)  | NDS, NM, PA  |
| LUPRON DEPOT-PED (6-MONTH KIT 45mg  | \$0(2)  | NDS, NM, PA  |
| <i>miglustat</i> CAPS 100mg   | \$0(2)  | NDS, QL (90 caps / 30 days), NM, PA                            |
| NAGLAZYME SOLN 1mg/ml   | \$0(2)  | NDS, NM, LA, PA  |
| <i>nitisinone</i> CAPS 2mg, 5mg, 10mg, 20mg   | \$0(2)  | NDS, NM, PA  |
| <i>octreotide acetate</i> SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml | \$0(1)  | NM, PA   |
| <i>octreotide acetate</i> SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml                    | \$0(2)  | NDS, NM, PA  |
| <i>raloxifene hcl</i> TABS 60mg   | \$0(1)  |  |
| <i>sapropterin dihydrochloride</i> PACK 100mg, 500mg; TABS 100mg                        | \$0(2)  | NDS, NM, PA  |
| SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml   | \$0(2)  | NDS, NM, LA, PA  |
| <i>sodium phenylbutyrate</i> POWD 3gm/tsp; TABS 500mg                                   | \$0(2)  | NDS, NM, PA  |
| SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml                               | \$0(2)  | NDS, NM, LA, PA  |
| SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg  | \$0(2)  | NDS, NM, LA, PA  |

**PHOSPHATE BINDER AGENTS - DRUGS TO REGULATE CALCIUM AND PHOSPHORUS LEVELS**

|  |        |                                 |
|--|--------|---------------------------------|
| <i>calcium acetate (phosphate binder)</i> CAPS 667mg | \$0(1) | QL (360 caps / 30 days)         |
| <i>calcium acetate (phosphate binder)</i> TABS 667mg | \$0(1) | QL (360 tabs / 30 days)         |
| <i>sevelamer carbonate</i> PACK 2.4gm                | \$0(2) | NDS, QL (180 packets / 30 days) |

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| <b>Drug Name<br/>(By Medical Condition)</b>                  | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| <i>sevelamer carbonate</i> PACK .8gm                         | \$0(2)  | NDS, QL (540 packets / 30 days)                                |
| <i>sevelamer carbonate</i> TABS 800mg<br>VELPHORO CHEW 500mg | \$0(1)<br>\$0(2)  | QL (540 tabs / 30 days)<br>NDS, QL (180 tabs / 30 days)        |

### ***PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES***

|   |        |
|---|--------|
| <i>medroxyprogesterone acetate</i> TABS<br>2.5mg, 5mg, 10mg | \$0(1) |
| <i>megestrol acetate</i> SUSP 40mg/ml                       | \$0(2) |
| <i>megestrol acetate (appetite)</i> SUSP<br>625mg/5ml       | \$0(2) |
| <i>norethindrone acetate</i> TABS 5mg                       | \$0(1) |

### ***THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS***

|  |        |
|--|--------|
| <i>euthyrox</i> TABS 25mcg, 50mcg, 75mcg,<br>88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg                        | \$0(1) |
| <i>levo-t</i> TABS 25mcg, 50mcg, 75mcg,<br>88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg,<br>300mcg               | \$0(1) |
| <i>levothyroxine sodium</i> TABS 25mcg, 50mcg,<br>75mcg, 88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg,<br>300mcg | \$0(1) |
| <i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg,<br>88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg                         | \$0(1) |
| <i>liothyronine sodium</i> TABS 5mcg, 25mcg,<br>50mcg  | \$0(1) |
| <i>methimazole</i> TABS 5mg, 10mg  | \$0(1) |
| <i>propylthiouracil</i> TABS 50mg  | \$0(1) |
| <i>SYNTHROID</i> TABS 25mcg, 50mcg, 75mcg,<br>88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg,<br>300mcg            | \$0(2) |
| <i>unithroid</i> TABS 25mcg, 50mcg, 75mcg,<br>88mcg, 100mcg, 112mcg, 125mcg,<br>137mcg, 150mcg, 175mcg, 200mcg,<br>300mcg            | \$0(1) |

### ***VITAMIN D ANALOGS***

|   |        |     |
|---|--------|-----|
| <i>calcitriol</i> CAPS .25mcg, .5mcg      | \$0(1) | B/D |
| <i>calcitriol (oral)</i> 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 |

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|---|---|--|
|---|---|--|

## **GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS**

### **ANTACIDS**

|  |        |       |
|--|--------|-------|
| <i>calcium carbonate (antacid) SUSP<br/>1250mg/5ml</i> | \$0(3) | NM; * |
| <i>magnesium oxide TABS 420mg</i>                      | \$0(3) | NM; * |

### **ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING**

|   |        |   |
|---|--------|---|
| <i>aprepitant CAPS 40mg, 80mg, 125mg</i>  | \$0(1) | B/D   |
| <i>aprepitant capsule therapy pack 80 &amp; 125<br/>mg</i>                                      | \$0(1) | B/D   |
| <i>compro SUPP 25mg</i>   | \$0(1) |   |
| <i>dronabinol CAPS 2.5mg, 5mg, 10mg</i>   | \$0(1) | B/D, QL (60 caps / 30 days)                             |
| <i>gransetron hcl SOLN 1mg/ml, 4mg/4ml</i>  | \$0(1) |   |
| <i>gransetron hcl TABS 1mg</i>  | \$0(1) | B/D   |
| <i>meclizine hcl TABS 12.5mg, 25mg</i>  | \$0(2) |   |
| <i>metoclopramide hcl SOLN 5mg/5ml,<br/>5mg/ml; TABS 5mg, 10mg</i>                              | \$0(1) |   |
| <i>ondansetron TBDP 4mg, 8mg</i>  | \$0(1) | B/D   |
| <i>ondansetron hcl SOLN 4mg/2ml,<br/>40mg/20ml; SOSY 4mg/2ml</i>                                | \$0(1) |   |
| <i>ondansetron hcl SOLN 4mg/5ml; TABS<br/>4mg, 8mg</i>  | \$0(1) | B/D   |
| <i>prochlorperazine SUPP 25mg</i>   | \$0(1) |   |
| <i>prochlorperazine edisylate SOLN 10mg/2ml</i>   | \$0(1) |   |
| <i>prochlorperazine maleate TABS 5mg, 10mg</i>  | \$0(1) |   |
| <i>promethazine hcl SOLN 25mg/ml,<br/>50mg/ml; SYRP 6.25mg/5ml; TABS<br/>12.5mg, 25mg, 50mg</i> | \$0(2) | PA; PA if 70 years and older                            |
| <i>scopolamine PT72 1mg/3days</i>   | \$0(2) | QL (10 patches / 30 days), PA; PA if 70 years and older |

### **ANTISPASMODICS - DRUGS FOR STOMACH SPASMS**

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

### **H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID**

|   |        |                         |
|---|--------|-------------------------|
| <i>famotidine SOLN 20mg/2ml, 40mg/4ml,<br/>200mg/20ml</i> | \$0(1) |                         |
| <i>famotidine SUSR 40mg/5ml</i>                           | \$0(1) | QL (300 mL / 30 days)   |
| <i>famotidine TABS 20mg</i>                               | \$0(1) | QL (120 tabs / 30 days) |
| <i>famotidine TABS 40mg</i>                               | \$0(1) | QL (60 tabs / 30 days)  |

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|--|---|--|
| famotidine in nacl 0.9% iv soln 20 mg/50ml                   | \$0(1)  |  |
| nizatidine CAPS 150mg, 300mg                                 | \$0(1)  |  |
| <b>INFLAMMATORY BOWEL DISEASE</b>                            |   |  |
| balsalazide disodium CAPS 750mg                              | \$0(1)  |  |
| budesonide CPEP 3mg  | \$0(1)  | QL (90 caps / 30 days), PA                                     |
| budesonide TB24 9mg  | \$0(2)  | NDS, QL (30 tabs / 30 days), PA                                |
| hydrocortisone (intrarectal) ENEM 100mg/60ml                 | \$0(1)  |  |
| mesalamine CP24 .375gm                                       | \$0(1)  | QL (120 caps / 30 days)  |
| mesalamine CPDR 400mg  | \$0(1)  | QL (180 caps / 30 days)  |
| mesalamine ENEM 4gm; SUPP 1000mg                             | \$0(1)  |  |
| mesalamine TBEC 1.2gm  | \$0(1)  | QL (120 tabs / 30 days)  |
| mesalamine w/ cleanser KIT 4gm                               | \$0(1)  |  |
| sulfasalazine TABS 500mg; TBEC 500mg                         | \$0(1)  |  |
| <b>LAXATIVES</b>   |   |  |
| constulose SOLN 10gm/15ml                                    | \$0(1)  |  |
| enulose SOLN 10gm/15ml                                       | \$0(1)  |  |
| gavilyte-c   | \$0(1)  |  |
| gavilyte-g   | \$0(1)  |  |
| generlac SOLN 10gm/15ml                                      | \$0(1)  |  |
| GOLYTELY SOL   | \$0(2)  |  |
| lactulose SOLN 10gm/15ml                                     | \$0(1)  |  |
| lactulose (encephalopathy) SOLN 10gm/15ml                    | \$0(1)  |  |
| peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm       | \$0(1)  |  |
| peg 3350-kcl-sod bicarb-nacl for soln 420 gm                 | \$0(1)  |  |
| PHILLIPS TABS 500mg  | \$0(3)  | NM; *  |
| PLENUV SOL   | \$0(2)  |  |
| sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml | \$0(1)  |  |
| SUPREP BOWEL SOL PREP KIT                                    | \$0(2)  |  |
| <b>MISCELLANEOUS</b>   |   |  |
| alosetron hcl TABS .5mg, 1mg                                 | \$0(2)  | NDS, QL (60 tabs / 30 days), PA                                |
| cromolyn sodium (mastocytosis) CONC 100mg/5ml                | \$0(1)  |  |
| diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml               | \$0(2)  |  |
| diphenoxylate w/ atropine tab 2.5-0.025 mg                   | \$0(2)  |  |

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|--|---|--|
| GATTEX KIT 5mg                                   | \$0(2)  | NDS, NM, LA, PA  |
| LINZESS CAPS 72mcg, 145mcg, 290mcg               | \$0(2)  | QL (30 caps / 30 days)   |
| <i>loperamide hcl</i> CAPS 2mg                   | \$0(1)  |  |
| <i>misoprostol</i> TABS 100mcg, 200mcg           | \$0(1)  |  |
| MOVANTIK TABS 12.5mg, 25mg                       | \$0(2)  | QL (30 tabs / 30 days)   |
| RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml              | \$0(2)  | NDS, PA  |
| <i>sucralfate</i> TABS 1gm                       | \$0(1)  |  |
| <i>ursodiol</i> CAPS 300mg; TABS 250mg,<br>500mg | \$0(1)  |  |
| XERMELO TABS 250mg                               | \$0(2)  | NDS, QL (90 tabs / 30<br>days), NM, LA, PA                     |
| XIFAXAN TABS 550mg                               | \$0(2)  | NDS, PA  |

### **PANCREATIC ENZYME**

|                     |        |
|---------------------|--------|
| 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 25000UNT | \$0(2) |
| ZENPEP CAP 40000UNT | \$0(2) |

### **PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID**

|  |        |                               |
|--|--------|-------------------------------|
| esomeprazole magnesium CPDR 20mg,<br>40mg                | \$0(1) | QL (30 caps / 30 days),<br>ST |
| <i>lansoprazole</i> CPDR 15mg, 30mg                      | \$0(1) | QL (60 caps / 30 days)        |
| <i>omeprazole</i> CPDR 10mg, 20mg, 40mg                  | \$0(1) |                               |
| <i>pantoprazole sodium</i> SOLR 40mg; TBEC<br>20mg, 40mg | \$0(1) |                               |
| <i>rabeprazole sodium</i> TBEC 20mg                      | \$0(1) | QL (30 tabs / 30 days)        |

### **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) |                        |

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|---|---|--|
|---|---|--|

### **MISCELLANEOUS**

|   |        |
|---|--------|
| <i>acetic acid</i> SOLN .25%  | \$0(1) |
| <i>bethanechol chloride</i> TABS 5mg, 10mg,<br>25mg, 50mg           | \$0(1) |
| <i>potassium citrate (alkalinizer)</i> TBCR<br>15meq, 540mg, 1080mg | \$0(1) |

### **URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE**

|  |        |                               |
|--|--------|-------------------------------|
| <i>fesoterodine fumarate</i> TB24 4mg, 8mg           | \$0(1) | QL (30 tabs / 30 days)        |
| <i>GEMTESA</i> TABS 75mg                             | \$0(2) | QL (30 tabs / 30 days)        |
| <i>MYRBETRIQ</i> SRER 8mg/ml                         | \$0(2) | QL (300 mL / 28 days)         |
| <i>MYRBETRIQ</i> TB24 25mg, 50mg                     | \$0(2) | QL (30 tabs / 30 days)        |
| <i>oxybutynin chloride</i> SOLN 5mg/5ml; TABS<br>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>solifenacain 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),<br>ST |
| <i>tolterodine tartrate</i> TABS 1mg, 2mg            | \$0(1) | QL (60 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>metronidazole vaginal</i> GEL .75%                  | \$0(1) |
| <i>terconazole vaginal</i> CREA .4%, .8%; SUPP<br>80mg | \$0(1) |

### **HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS**

#### **ANTICOAGULANTS - BLOOD THINNERS**

|  |        |                        |
|--|--------|------------------------|
| <i>ELIQUIS</i> TABS 2.5mg  | \$0(2) | QL (60 tabs / 30 days) |
| <i>ELIQUIS</i> TABS 5mg  | \$0(2) | QL (74 tabs / 30 days) |
| <i>ELIQUIS</i> STARTER PACK TBPK 5mg   | \$0(2) | QL (74 tabs / 30 days) |
| <i>enoxaparin sodium</i> SOLN 300mg/3ml;<br>SOSY 30mg/0.3ml, 40mg/0.4ml,<br>60mg/0.6ml, 80mg/0.8ml, 100mg/ml,<br>120mg/0.8ml, 150mg/ml | \$0(1) |                        |
| <i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml  | \$0(1) |                        |
| <i>fondaparinux sodium</i> SOLN 5mg/0.4ml,<br>7.5mg/0.6ml, 10mg/0.8ml  | \$0(2) | NDS                    |
| <i>HEP SOD/D5W</i> INJ 20000UNT  | \$0(1) |                        |
| <i>HEP SOD/D5W</i> INJ 25000UNT  | \$0(1) |                        |
| <i>HEP SOD/NACL</i> INJ 12500UNT   | \$0(2) |                        |
| <i>HEP SOD/NACL</i> INJ 25000UNT   | \$0(2) |                        |

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|---|---|--|
| <i>heparin sodium (porcine) SOLN</i><br>1000unit/ml, 5000unit/ml, 10000unit/ml,<br>20000unit/ml | \$0(1)  | B/D  |
| HEPARIN/NACL INJ 25000UNT   | \$0(2)  |  |
| <i>jantoven TABS</i> 1mg, 2mg, 2.5mg, 3mg,<br>4mg, 5mg, 6mg, 7.5mg, 10mg                        | \$0(1)  |  |
| <i>warfarin sodium TABS</i> 1mg, 2mg, 2.5mg,<br>3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg                 | \$0(1)  |  |
| XARELTO SUSR 1mg/ml   | \$0(2)  | QL (620 mL / 30 days)  |
| 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)   |
| <b>HEMATOPOIETIC GROWTH FACTORS</b>   |   |  |
| PROCRIT SOLN 2000unit/ml, 3000unit/ml,<br>4000unit/ml, 10000unit/ml                             | \$0(2)  | NM, PA   |
| PROCRIT SOLN 20000unit/ml,<br>40000unit/ml  | \$0(2)  | NDS, NM, PA  |
| ZARXIO SOSY 300mcg/0.5ml,<br>480mcg/0.8ml   | \$0(2)  | NDS, NM, PA  |
| ZIEXTENZO SOSY 6mg/0.6ml  | \$0(2)  | NDS, NM, PA  |
| <b>IRON</b>   |   |  |
| ACCRUFER CAPS 30mg  | \$0(3)  | NM; *  |
| <i>bprotected pedia iron</i> SOLN 15mg/ml   | \$0(3)  | NM; *  |
| CENTRATEX CAP   | \$0(3)  | NM; *  |
| CORVITE 150 TAB   | \$0(3)  | NM; *  |
| CORVITE FE TAB  | \$0(3)  | NM; *  |
| cvs iron TABS 27mg, 325mg   | \$0(3)  | NM; *  |
| cvs slow release iron TBCR 45mg, 143mg  | \$0(3)  | NM; *  |
| eq slow-release iron TBCR 45mg  | \$0(3)  | NM; *  |
| EZFE 200 CAPS 200mg   | \$0(3)  | NM; *  |
| fe c tab  | \$0(3)  | NM; *  |
| FEOSOL BIFER TAB 28MG   | \$0(3)  | NM; *  |
| ferate TABS 27mg  | \$0(3)  | NM; *  |
| FERIVA TAB 21/7   | \$0(3)  | NM; *  |
| FERIVAF A CAP 110-1MG   | \$0(3)  | NM; *  |
| ferosul TABS 325mg  | \$0(3)  | NM; *  |
| FERRETTS TABS 325mg   | \$0(3)  | NM; *  |
| FERRETTS IPS SOLN 40mg/15ml   | \$0(3)  | NM; *  |
| ferrex 150 CAPS 150mg   | \$0(3)  | NM; *  |
| ferric x-150 CAPS 150mg   | \$0(3)  | NM; *  |
| FERRIMIN 150 TABS 150mg   | \$0(3)  | NM; *  |
| ferrous fumarate TABS 324mg   | \$0(3)  | NM; *  |
| ferrous gluconate TABS 27mg, 240mg,<br>324mg  | \$0(3)  | NM; *  |

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|--|---|--|
| FERROUS GLUCONATE TABS 324mg   | \$0(3)  | NM; *  |
| <i>ferrous sulfate</i> SOLN 15mg/ml,<br>220mg/5ml, 300mg/5ml, 300mg/6.8ml;<br>TABS 65mg, 325mg; TBEC 325mg | \$0(3)  | NM; *  |
| FERROUS SULFATE TBEC 324mg   | \$0(3)  | NM; *  |
| FOLITAB 500 TAB  | \$0(3)  | NM; *  |
| FUSION CAP   | \$0(3)  | NM; *  |
| FUSION PLUS CAP  | \$0(3)  | NM; *  |
| <i>gnp iron</i> TABS 200mg; TBCR 45mg  | \$0(3)  | NM; *  |
| HEMOCYTE PLS CAP   | \$0(3)  | NM; *  |
| <i>hemocyte-f</i>  | \$0(3)  | NM; *  |
| <i>iferex 150</i> CAPS 150mg   | \$0(3)  | NM; *  |
| <i>iferex 150 forte</i>  | \$0(3)  | NM; *  |
| INFED SOLN 50mg/ml   | \$0(3)  | NM; *  |
| INTEGRA CAP  | \$0(3)  | NM; *  |
| INTEGRA F CAP  | \$0(3)  | NM; *  |
| INTEGRA PLUS CAP   | \$0(3)  | NM; *  |
| IRON TABS 256mg; TBCR 140mg  | \$0(3)  | NM; *  |
| <i>iron 27</i> TABS 240mg  | \$0(3)  | NM; *  |
| <i>iron 100/c</i>  | \$0(3)  | NM; *  |
| <i>iron slow release</i> TBCR 45mg, 143mg  | \$0(3)  | NM; *  |
| IRON SLOW RELEASE TBCR 140mg   | \$0(3)  | NM; *  |
| <i>iron supplement</i> SOLN 220mg/5ml  | \$0(3)  | NM; *  |
| <i>iron supplement childrens</i> SOLN 15mg/ml  | \$0(3)  | NM; *  |
| <i>iron-vitamin c tab 100-250 mg</i>   | \$0(3)  | NM; *  |
| IROSPAN 24/6 MIS   | \$0(3)  | NM; *  |
| <i>kp ferrous gluconate</i> TABS 324mg   | \$0(3)  | NM; *  |
| <i>kp ferrous sulfate</i> TABS 325mg   | \$0(3)  | NM; *  |
| <i>myferon 150</i> CAPS 150mg  | \$0(3)  | NM; *  |
| <i>myferon 150 forte</i>   | \$0(3)  | NM; *  |
| NEPHRON FA TAB   | \$0(3)  | NM; *  |
| <i>nu-iron 150</i> CAPS 150mg  | \$0(3)  | NM; *  |
| <i>pc pediatric iron drops</i> SOLN 15mg/ml  | \$0(3)  | NM; *  |
| <i>poly-iron 150</i> CAPS 150mg  | \$0(3)  | NM; *  |
| <i>poly-iron 150 forte</i>   | \$0(3)  | NM; *  |
| <i>polysaccharide iron complex</i> CAPS 150mg  | \$0(3)  | NM; *  |
| PROFE CAPS 180mg   | \$0(3)  | NM; *  |
| PROFERRIN ES TABS 12mg   | \$0(3)  | NM; *  |
| PROFERRIN- TAB FORTE   | \$0(3)  | NM; *  |
| PROTECTIRON TAB  | \$0(3)  | NM; *  |
| <i>ra high potency iron</i> TABS 27mg  | \$0(3)  | NM; *  |
| <i>ra iron</i> TABS 325mg  | \$0(3)  | NM; *  |
| <i>ra slow release iron</i> TBCR 45mg  | \$0(3)  | NM; *  |

Updated on 12/01/2023

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| <b>Drug Name<br/>(By Medical Condition)</b>         | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>se-tan plus</i>                                  | \$0(3)  | NM; *  |
| <i>slow release iron TBCR 45mg</i>                  | \$0(3)  | NM; *  |
| <i>SLOW RELEASE IRON TBCR 47.5mg</i>                | \$0(3)  | NM; *  |
| <i>slow-release iron TBCR 45mg</i>                  | \$0(3)  | NM; *  |
| <i>sm iron TABS 325mg</i>                           | \$0(3)  | NM; *  |
| <i>sm iron slow release TBCR 142mg</i>              | \$0(3)  | NM; *  |
| <i>TARON FORTE CAP</i>                              | \$0(3)  | NM; *  |
| <i>wee care SUSP 15mg/1.25ml</i>                    | \$0(3)  | NM; *  |
| <b>MISCELLANEOUS</b>                                |   |  |
| <i>anagrelide hcl CAPS .5mg, 1mg</i>                | \$0(1)  |  |
| <i>BERINERT KIT 500unit</i>                         | \$0(2)  | NDS, QL (24 boxes / 30 days), NM, LA, PA                       |
| <i>cilostazol TABS 50mg, 100mg</i>                  | \$0(1)  |  |
| <i>DOPTELET TABS 20mg</i>                           | \$0(2)  | NDS, NM, LA, PA  |
| <i>DROXIA CAPS 200mg, 300mg, 400mg</i>              | \$0(2)  |  |
| <i>ENDARI PACK 5gm</i>                              | \$0(2)  | NDS, NM, LA, PA  |
| <i>HAEGARDA SOLR 2000unit</i>                       | \$0(2)  | NDS, QL (30 vials / 30 days), NM, LA, PA                       |
| <i>HAEGARDA SOLR 3000unit</i>                       | \$0(2)  | NDS, QL (20 vials / 30 days), NM, LA, PA                       |
| <i>icatibant acetate SOSY 30mg/3ml</i>              | \$0(2)  | NDS, QL (9 syringes / 30 days), NM, PA                         |
| <i>pentoxifylline TBCR 400mg</i>                    | \$0(1)  |  |
| <i>PROMACTA PACK 12.5mg</i>                         | \$0(2)  | NDS, QL (360 packets / 30 days), NM, LA, PA                    |
| <i>PROMACTA PACK 25mg</i>                           | \$0(2)  | NDS, QL (180 packets / 30 days), NM, LA, PA                    |
| <i>PROMACTA TABS 12.5mg, 25mg</i>                   | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, LA, PA                        |
| <i>PROMACTA TABS 50mg, 75mg</i>                     | \$0(2)  | NDS, QL (60 tabs / 30 days), NM, LA, PA                        |
| <i>sajazir SOSY 30mg/3ml</i>                        | \$0(2)  | NDS, QL (9 syringes / 30 days), NM, LA, PA                     |
| <i>tranexamic acid SOLN 1000mg/10ml; TABS 650mg</i> | \$0(1)  |  |
| <b>PLATELET AGGREGATION INHIBITORS</b>              |   |  |
| <i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>   | \$0(1)  |  |
| <i>BRILINTA TABS 60mg, 90mg</i>                     | \$0(2)  |  |
| <i>clopidogrel bisulfate TABS 75mg</i>              | \$0(1)  |  |
| <i>dipyridamole TABS 25mg, 50mg, 75mg</i>           | \$0(2)  | PA; PA if 70 years and older                                   |
| <i>prasugrel hcl TABS 5mg, 10mg</i>                 | \$0(1)  |  |

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|---|---|--|
|---|---|--|

## **IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM**

### **AUTOIMMUNE AGENTS**

|   |        |  |
|---|--------|--|
| DUPIXENT SOPN 200mg/1.14ml,<br>300mg/2ml; SOSY 100mg/0.67ml,<br>200mg/1.14ml, 300mg/2ml | \$0(2) | NDS, NM, PA                              |
| 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<br>80mg/0.8ml  | \$0(2) | NDS, NM, PA                              |
| HUMIRA PEN PNKT 40mg/0.4ml,<br>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<br>40mg/0.8ml, 80mg/0.8ml                                | \$0(2) | NDS, NM, PA                              |
| HUMIRA PEN-PEDIATRIC UC S PNKT<br>80mg/0.8ml  | \$0(2) | NDS, NM, PA                              |
| HUMIRA PEN-PS/UV STARTER PNKT<br>40mg/0.8ml   | \$0(2) | NDS, NM, PA                              |
| INFLIXIMAB SOLR 100mg   | \$0(2) | NDS, NM, LA, PA                          |
| KEVZARA SOAJ 150mg/1.14ml,<br>200mg/1.14ml  | \$0(2) | NDS, QL (2 pens / 28 days), NM, PA       |
| KEVZARA SOSY 150mg/1.14ml,<br>200mg/1.14ml  | \$0(2) | NDS, QL (2 syringes / 28 days), NM, PA   |
| OTEZLA TABS 30mg  | \$0(2) | NDS, QL (60 tabs / 30 days), NM, PA      |
| OTEZLA TAB 10/20/30   | \$0(2) | NDS, QL (110 tabs / year), NM, PA        |
| REMICADE SOLR 100mg   | \$0(2) | NDS, NM, LA, PA                          |
| RENFLEXIS SOLR 100mg  | \$0(2) | NDS, NM, LA, PA                          |

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|---|---|--|
| RINVOQ TB24 15mg, 30mg                      | \$0(2)  | NDS, QL (30 tabs / 30 days), NM, PA                            |
| RINVOQ TB24 45mg                            | \$0(2)  | NDS, QL (168 tabs / year), NM, PA                              |
| SKYRIZI SOCT 180mg/1.2ml,<br>360mg/2.4ml    | \$0(2)  | NDS, QL (1 cartridge / 56 days), NM, PA                        |
| SKYRIZI SOLN 600mg/10ml                     | \$0(2)  | NDS, QL (6 vials / year), NM, PA                               |
| SKYRIZI SOSY 150mg/ml                       | \$0(2)  | NDS, QL (6 syringes / 365 days), NM, PA                        |
| SKYRIZI PEN SOAJ 150mg/ml                   | \$0(2)  | NDS, QL (6 pens / 365 days), NM, PA                            |
| STELARA SOLN 45mg/0.5ml                     | \$0(2)  | NDS, QL (1 vial / 28 days), NM, LA, PA                         |
| STELARA SOLN 130mg/26ml                     | \$0(2)  | NDS, 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 (480 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, 10%  | \$0(2) | NDS, NM, LA, PA |
| FLEBOGAMMA DIF SOLN 2.5gm/50ml,<br>5gm/100ml, 5gm/50ml, 10gm/100ml,<br>10gm/200ml, 20gm/200ml, 20gm/400ml | \$0(2) | NDS, NM, PA     |
| GAMASTAN INJ  | \$0(2) | B/D, NM, LA     |
| GAMMAGARD LIQUID SOLN 1gm/10ml,<br>2.5gm/25ml, 5gm/50ml, 10gm/100ml,<br>20gm/200ml, 30gm/300ml            | \$0(2) | NDS, NM, PA     |
| GAMMAGARD S/D IGA LESS TH SOLR 5gm,<br>10gm   | \$0(2) | NDS, NM, PA     |
| GAMMAKED SOLN 1gm/10ml, 5gm/50ml,<br>10gm/100ml, 20gm/200ml   | \$0(2) | NDS, NM, PA     |

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|---|---|--|
| GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml,<br>10gm/100ml, 10gm/200ml, 20gm/200ml,<br>20gm/400ml  | \$0(2)  | NDS, NM, LA, PA  |
| GAMUNEX-C SOLN 1gm/10ml,<br>2.5gm/25ml, 5gm/50ml, 10gm/100ml,<br>20gm/200ml, 40gm/400ml   | \$0(2)  | NDS, NM, PA  |
| OCTAGAM SOLN 1gm/20ml, 2gm/20ml,<br>2.5gm/50ml, 5gm/100ml, 5gm/50ml,<br>10gm/100ml, 10gm/200ml, 20gm/200ml,<br>25gm/500ml, 30gm/300ml | \$0(2)  | NDS, NM, PA  |
| PANZYGA SOLN 1gm/10ml, 2.5gm/25ml,<br>5gm/50ml, 10gm/100ml, 20gm/200ml,<br>30gm/300ml   | \$0(2)  | NDS, NM, PA  |
| PRIVIGEN SOLN 5gm/50ml, 10gm/100ml,<br>20gm/200ml, 40gm/400ml   | \$0(2)  | NDS, NM, PA  |
| <b>IMMUNOMODULATORS</b>   |   |  |
| ACTIMMUNE SOLN 2000000unit/0.5ml  | \$0(2)  | NDS, NM, LA, PA  |
| ARCALYST SOLR 220mg   | \$0(2)  | NDS, NM, LA, PA  |
| INTRON A SOLR 10000000unit,<br>18000000unit, 50000000unit   | \$0(2)  | NDS, B/D, NM, LA   |
| <b>IMMUNOSUPPRESSANTS</b>   |   |  |
| azathioprine TABS 50mg  | \$0(1)  | B/D  |
| BENLYSTA SOAJ 200mg/ml; SOSY<br>200mg/ml  | \$0(2)  | NDS, QL (8 syringes /<br>28 days), NM, LA, PA                  |
| BENLYSTA SOLR 120mg, 400mg  | \$0(2)  | NDS, NM, LA, PA  |
| cyclosporine CAPS 25mg, 100mg; SOLN<br>50mg/ml  | \$0(1)  | B/D, NM  |
| cyclosporine modified (for microemulsion)<br>CAPS 25mg, 50mg, 100mg; SOLN<br>100mg/ml   | \$0(1)  | B/D, NM  |
| everolimus (immunosuppressant) TABS<br>.25mg, .5mg, .75mg, 1mg  | \$0(2)  | NDS, B/D, NM   |
| gengraf CAPS 25mg, 100mg; SOLN<br>100mg/ml  | \$0(1)  | B/D, NM  |
| mycophenolate mofetil CAPS 250mg; TABS<br>500mg   | \$0(1)  | B/D, NM  |
| mycophenolate mofetil SUSR 200mg/ml   | \$0(2)  | NDS, B/D, NM   |
| mycophenolate sodium TBEC 180mg,<br>360mg   | \$0(1)  | B/D, NM  |
| NULOJIX SOLR 250mg  | \$0(2)  | NDS, B/D, NM   |
| PROGRAF PACK .2mg, 1mg  | \$0(2)  | B/D, NM  |
| REZUROCK TABS 200mg   | \$0(2)  | NDS, NM, LA, PA  |
| SANDIMMUNE SOLN 100mg/ml  | \$0(2)  | B/D, NM  |
| sirolimus SOLN 1mg/ml   | \$0(2)  | NDS, B/D, NM   |
| sirolimus TABS .5mg, 1mg, 2mg   | \$0(1)  | B/D, NM  |

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|--|---|--|
| tacrolimus CAPS .5mg, 1mg, 5mg   | \$0(1)  | B/D, NM  |
| <b>VACCINES</b>  |   |  |
| ABRYSVO SOLR 120mcg/0.5ml  | \$0(2)  |  |
| ACTHIB INJ   | \$0(2)  |  |
| ADACEL INJ   | \$0(2)  |  |
| AREXVY SUSR 120mcg/0.5ml   | \$0(2)  |  |
| BCG VACCINE SOLR 50mg  | \$0(2)  |  |
| BEXSERO INJ  | \$0(2)  |  |
| BOOSTRIX INJ   | \$0(2)  |  |
| DAPTACEL INJ   | \$0(2)  |  |
| DENGVAXIA SUS  | \$0(2)  |  |
| DIP/TET PED INJ 25-5LFU  | \$0(2)  | B/D  |
| ENGERIX-B SUSP 20mcg/ml; SUSY<br>10mcg/0.5ml, 20mcg/ml                             | \$0(2)  | B/D  |
| GARDASIL 9 INJ   | \$0(2)  |  |
| HAVRIX SUSP 720elu/0.5ml, 1440elu/ml   | \$0(2)  |  |
| HEPLISAV-B SOSY 20mcg/0.5ml  | \$0(2)  | B/D  |
| HIBERIX SOLR 10mcg   | \$0(2)  |  |
| IMOVAX RABIES (H.D.C.V.) SUSR<br>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)  |  |
| MENVEO SOL   | \$0(2)  |  |
| PEDIARIX INJ 0.5ML   | \$0(2)  |  |
| PEDVAX HIB SUSP 7.5mcg/0.5ml   | \$0(2)  |  |
| PENTACEL INJ   | \$0(2)  |  |
| PREHEVBRIOSUSP 10mcg/ml  | \$0(2)  | B/D  |
| PRIORIX INJ  | \$0(2)  |  |
| PROQUAD INJ  | \$0(2)  |  |
| QUADRACEL INJ  | \$0(2)  |  |
| QUADRACEL INJ 0.5ML  | \$0(2)  |  |
| RABAVERT INJ   | \$0(2)  | B/D  |
| RECOMBIVAX HB SUSP 5mcg/0.5ml,<br>10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml,<br>10mcg/ml | \$0(2)  | B/D  |
| ROTARIX SUS  | \$0(2)  |  |
| ROTAQ SOL  | \$0(2)  |  |

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|---|---|--|
| 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  |
| TICOVAC SUSY 1.2mcg/0.25ml,<br>2.4mcg/0.5ml     | \$0(2)  |  |
| TRUMENBA INJ                                    | \$0(2)  |  |
| TWINRIX INJ                                     | \$0(2)  |  |
| TYPHIM VI SOLN 25mcg/0.5ml; SOSY<br>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**

|                 |        |       |
|-----------------|--------|-------|
| SUSPENDOL-S LIQ | \$0(3) | NM; * |
|-----------------|--------|-------|

### **NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS**

#### **ELECTROLYTES**

|                               |        |       |
|-------------------------------|--------|-------|
| advantage care oral elect     | \$0(3) | NM; * |
| cvs pediatric electrolyte     | \$0(3) | NM; * |
| ENFAMIL SOL ENFALYTE          | \$0(3) | NM; * |
| gnp electrolyte solution      | \$0(3) | NM; * |
| gnp pediatric electrolyte     | \$0(3) | NM; * |
| h-e-b oral electrolyte so     | \$0(3) | NM; * |
| hm pediatric electrolyte      | \$0(3) | NM; * |
| *oral electrolyte solution*** | \$0(3) | NM; * |
| oralyte                       | \$0(3) | NM; * |
| oralyte freezer pops          | \$0(3) | NM; * |
| pediatric electrolyte fre     | \$0(3) | NM; * |
| pediatric electrolyte/zin     | \$0(3) | NM; * |
| ra pediatric electrolyte      | \$0(3) | NM; * |
| sm pediatric electrolyte      | \$0(3) | NM; * |

#### **ELECTROLYTES/MINERALS, INJECTABLE**

|  |        |
|--|--------|
| D2.5W/NACL INJ 0.45%                   | \$0(2) |
| 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) |

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|---|---|--|
| ISOLYTE-P INJ /D5W  | \$0(2)  |  |
| ISOLYTE-S INJ   | \$0(2)  |  |
| ISOLYTE-S INJ PH 7.4  | \$0(2)  |  |
| <i>kcl 10 meq/l (0.075%) in dextrose 5% &amp; nacl 0.45% inj</i>                                  | \$0(1)  |  |
| <i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.2% inj</i>                                    | \$0(1)  |  |
| <i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; nacl 0.9% inj</i>                                    | \$0(1)  |  |
| <i>kcl 20 meq/l (0.15%) in dextrose 5% &amp; 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)  |  |
| <i>kcl 30 meq/l (0.224%) in dextrose 5% &amp; nacl 0.45% inj</i>                                  | \$0(1)  |  |
| <i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.9% inj</i>                                     | \$0(1)  |  |
| <i>kcl 40 meq/l (0.3%) in dextrose 5% &amp; nacl 0.45% inj</i>                                    | \$0(1)  |  |
| <i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>   | \$0(1)  |  |
| KCL/D5W/NACL INJ 0.3/0.9%   | \$0(2)  |  |
| <i>lactated ringer's solution</i>   | \$0(1)  |  |
| MAGNESIUM SULFATE SOLN 2gm/50ml,<br>4gm/100ml, 4gm/50ml, 20gm/500ml,<br>40gm/1000ml               | \$0(2)  |  |
| <i>magnesium sulfate SOLN 2gm/50ml,<br/>4gm/100ml, 4gm/50ml, 20gm/500ml,<br/>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)  |  |
| <i>multiple electrolytes ph 5.5</i>   | \$0(1)  |  |
| <i>multiple electrolytes ph 7.4</i>   | \$0(1)  |  |
| PLASMA-LYTE INJ -148  | \$0(2)  |  |
| PLASMA-LYTE INJ -A  | \$0(2)  |  |
| POT CHL 20MEQ/L IN NACL 0.9% INJ  | \$0(1)  |  |
| POT CHL 20MEQ/L IN NACL 0.45% INJ   | \$0(2)  |  |
| POT CHL 40MEQ/L IN NACL 0.9% INJ  | \$0(2)  |  |
| <i>potassium chloride SOLN 2meq/ml,<br/>10meq/100ml, 20meq/100ml, 20meq/50ml,<br/>40meq/100ml</i> | \$0(1)  |  |
| POTASSIUM CHLORIDE SOLN 10meq/50ml,<br>20meq/50ml   | \$0(2)  |  |
| <i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>                                     | \$0(1)  |  |

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| <b>Drug Name<br/>(By Medical Condition)</b>   | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| sodium chloride SOLN .45%, .9%,<br>2.5meq/ml, 3%, 5%  | \$0(1)  |  |
| TPN ELECTROL INJ  | \$0(2)  | B/D  |
| <b><i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i></b>  |   |  |
| klor-con PACK 20meq   | \$0(1)  |  |
| klor-con 8 TBCR 8meq  | \$0(1)  |  |
| klor-con 10 TBCR 10meq  | \$0(1)  |  |
| klor-con m10 TBCR 10meq   | \$0(1)  |  |
| klor-con m15 TBCR 15meq   | \$0(1)  |  |
| klor-con m20 TBCR 20meq   | \$0(1)  |  |
| M-NATAL PLUS TAB  | \$0(2)  |  |
| potassium chloride CPCR 8meq, 10meq;<br>PACK 20meq; SOLN 10%, 20%; TBCR<br>8meq, 10meq, 20meq | \$0(1)  |  |
| potassium chloride microencapsulated<br>crystals er TBCR 10meq, 15meq, 20meq                  | \$0(1)  |  |
| PRENATAL TAB 27-1MG   | \$0(2)  |  |
| PRENATAL TAB PLUS   | \$0(2)  |  |
| sodium fluoride chew; tab; 1.1 (0.5 f)<br>mg/ml soln  | \$0(1)  |  |
| <b><i>IV NUTRITION</i></b>  |   |  |
| 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  |
| clinisol sf 15%   | \$0(1)  | B/D  |
| CLINOLIPID EMU 20%  | \$0(2)  | B/D  |
| dextrose SOLN 5%, 10%   | \$0(1)  |  |
| dextrose SOLN 50%, 70%  | \$0(1)  | B/D  |
| INTRALIPID EMUL 20gm/100ml,<br>30gm/100ml   | \$0(2)  | B/D  |
| NUTRILIPID EMUL 20gm/100ml  | \$0(2)  | B/D  |
| plenamine   | \$0(1)  | B/D  |
| PREMASOL SOL 10%  | \$0(2)  | NDS, B/D   |
| PROSOL INJ 20%  | \$0(2)  | B/D  |
| TRAVASOL INJ 10%  | \$0(2)  | B/D  |
| TROPHAMINE INJ 10%  | \$0(2)  | B/D  |
| <b><i>MINERALS</i></b>  |   |  |
| CAL CIT MAL/ TAB VITAMIND   | \$0(3)  | NM; *  |
| CALCET PETIT TAB 200-250  | \$0(3)  | NM; *  |

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|---|---|--|
| <i>calcium 500 +d</i>   | \$0(3)  | NM; *  |
| <i>calcium 500 +d3</i>  | \$0(3)  | NM; *  |
| <i>calcium 500+d</i>  | \$0(3)  | NM; *  |
| <i>calcium 500+d3</i>   | \$0(3)  | NM; *  |
| <i>calcium 500+d high potenc</i>                                    | \$0(3)  | NM; *  |
| <i>calcium 500/d</i>  | \$0(3)  | NM; *  |
| <i>calcium 600 TABS 600mg, 1500mg</i>                               | \$0(3)  | NM; *  |
| <i>calcium 600 high potency TABS 600mg</i>                          | \$0(3)  | NM; *  |
| <i>CALCIUM 600 TAB +D</i>   | \$0(3)  | NM; *  |
| <i>calcium 600 with vitamin</i>                                     | \$0(3)  | NM; *  |
| <i>calcium 600+d</i>  | \$0(3)  | NM; *  |
| <i>calcium 600+d3</i>   | \$0(3)  | NM; *  |
| <i>calcium 600+d3 plus miner</i>                                    | \$0(3)  | NM; *  |
| <i>calcium 600+d high potenc</i>                                    | \$0(3)  | NM; *  |
| <i>calcium 600+d plus minera</i>                                    | \$0(3)  | NM; *  |
| <i>calcium 600/vitamin d</i>  | \$0(3)  | NM; *  |
| <i>calcium 600/vitamin d3</i>                                       | \$0(3)  | NM; *  |
| <i>calcium carb-cholecalciferol tab 250 mg-3.125 mcg (125 unit)</i> | \$0(3)  | NM; *  |
| <i>calcium carb-cholecalciferol tab 500 mg-10 mcg (400 unit)</i>    | \$0(3)  | NM; *  |
| <i>calcium carb-cholecalciferol tab 600 mg-10 mcg (400 unit)</i>    | \$0(3)  | NM; *  |
| <i>calcium carb-cholecalciferol tab 600 mg-20 mcg (800 unit)</i>    | \$0(3)  | NM; *  |
| <i>CALCIUM CARBONATE CHEW 500mg</i>                                 | \$0(3)  | NM; *  |
| <i>calcium carbonate TABS 600mg, 1250mg</i>                         | \$0(3)  | NM; *  |
| <i>calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)</i> | \$0(3)  | NM; *  |
| <i>calcium carbonate-cholecalciferol tab 600 mg-5 mcg(200 unit)</i> | \$0(3)  | NM; *  |
| <i>calcium carbonate-vitamin d tab 250 mg-3.125 mcg (125 unit)</i>  | \$0(3)  | NM; *  |
| <i>calcium carbonate-vitamin d tab 600 mg-5 mcg (200 unit)</i>      | \$0(3)  | NM; *  |
| <i>CALCIUM CHW 500-10</i>   | \$0(3)  | NM; *  |
| <i>calcium cit-vit d tab 315 mg-6.25 mcg(250 unit) (elem ca)</i>    | \$0(3)  | NM; *  |
| <i>calcium cit-vitamin d tab 315 mg-5 mcg(200 unit) (elem ca)</i>   | \$0(3)  | NM; *  |
| <i>CALCIUM CIT/ TAB VIT D</i>                                       | \$0(3)  | NM; *  |
| <i>calcium citrate TABS 200mg</i>                                   | \$0(3)  | NM; *  |
| <i>calcium citrate + d</i>  | \$0(3)  | NM; *  |
| <i>calcium citrate + d3 max</i>                                     | \$0(3)  | NM; *  |

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|--|---|--|
| <i>calcium citrate + d3 maxi</i>                   | \$0(3)  | NM; *  |
| <i>calcium citrate+d3</i>                          | \$0(3)  | NM; *  |
| <i>calcium citrate/d3</i>                          | \$0(3)  | NM; *  |
| <i>calcium extra d3</i>                            | \$0(3)  | NM; *  |
| <i>calcium for women</i>                           | \$0(3)  | NM; *  |
| <i>calcium high potency TABS 600mg,<br/>1500mg</i> | \$0(3)  | NM; *  |
| <i>calcium high potency + vi</i>                   | \$0(3)  | NM; *  |
| <i>calcium plus vitamin d</i>                      | \$0(3)  | NM; *  |
| <i>calcium plus vitamin d3</i>                     | \$0(3)  | NM; *  |
| <i>calcium+d3</i>                                  | \$0(3)  | NM; *  |
| <i>calcium-magnesium-zinc tab 333-133-5 mg</i>     | \$0(3)  | NM; *  |
| <i>CALCIUM/C/D CHW 500MG</i>                       | \$0(3)  | NM; *  |
| <i>CALCIUM/MAGN TAB 250-155</i>                    | \$0(3)  | NM; *  |
| <i>calcium/vitamin d3</i>                          | \$0(3)  | NM; *  |
| <i>CALCIUM/VITD CAP 600-400</i>                    | \$0(3)  | NM; *  |
| <i>CALTRATE 600 CHW 600-800</i>                    | \$0(3)  | NM; *  |
| <i>chewable calcium</i>                            | \$0(3)  | NM; *  |
| <i>CHEWABLE CALCIUM CHEW 500mg</i>                 | \$0(3)  | NM; *  |
| <i>CORAL CALCIU CAP 1000MG</i>                     | \$0(3)  | NM; *  |
| <i>cvs calcium</i>                                 | \$0(3)  | NM; *  |
| <i>cvs calcium 600 &amp; vitamin</i>               | \$0(3)  | NM; *  |
| <i>cvs calcium 600 + d plus</i>                    | \$0(3)  | NM; *  |
| <i>cvs calcium 600+d</i>                           | \$0(3)  | NM; *  |
| <i>cvs calcium &amp; vitamin d3</i>                | \$0(3)  | NM; *  |
| <i>cvs calcium citrate+d3</i>                      | \$0(3)  | NM; *  |
| <i>cvs magnesium TABS 500mg</i>                    | \$0(3)  | NM; *  |
| <i>cvs selenium TABS 200mcg</i>                    | \$0(3)  | NM; *  |
| <i>cvs zinc TABS 50mg</i>                          | \$0(3)  | NM; *  |
| <i>eq calcium 500+d</i>                            | \$0(3)  | NM; *  |
| <i>eq calcium 600+d</i>                            | \$0(3)  | NM; *  |
| <i>eq calcium citrate+d</i>                        | \$0(3)  | NM; *  |
| <i>eql calcium 600mg/vitamin</i>                   | \$0(3)  | NM; *  |
| <i>eql calcium citrate w/vit</i>                   | \$0(3)  | NM; *  |
| <i>eql calcium citrate/ vita</i>                   | \$0(3)  | NM; *  |
| <i>eql calcium/vitamin d</i>                       | \$0(3)  | NM; *  |
| <i>gnp calcium TABS 600mg</i>                      | \$0(3)  | NM; *  |
| <i>gnp calcium 500 +d3</i>                         | \$0(3)  | NM; *  |
| <i>gnp calcium 600 +d3</i>                         | \$0(3)  | NM; *  |
| <i>gnp calcium 600 +d3/miner</i>                   | \$0(3)  | NM; *  |
| <i>gnp calcium citrate +d3</i>                     | \$0(3)  | NM; *  |
| <i>gnp calcium citrate+d3 ma</i>                   | \$0(3)  | NM; *  |
| <i>kp calcium citrate+d</i>                        | \$0(3)  | NM; *  |

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|---|---|--|
| MAGNESIUM ELEMENTAL CAPS 300mg; TABS 30mg                               | \$0(3)  | NM; *  |
| <i>magnesium lactate</i> TBCR 7meq                                      | \$0(3)  | NM; *  |
| MAGNESIUM OXIDE TABS 420mg  | \$0(3)  | NM; *  |
| <i>magnesium oxide (mg supplement)</i> CAPS 500mg; TABS 500mg           | \$0(3)  | NM; *  |
| MONOCAL TAB 3-250   | \$0(3)  | NM; *  |
| NU-MAG TAB 71.5-119   | \$0(3)  | NM; *  |
| <i>oceanic selenium</i> TABS 50mcg, 200mcg                              | \$0(3)  | NM; *  |
| <i>orazinc</i> CAPS 220mg   | \$0(3)  | NM; *  |
| ORAZINC TABS 110mg  | \$0(3)  | NM; *  |
| <i>os-cal calcium + d3</i>  | \$0(3)  | NM; *  |
| <i>os-cal extra d3</i>  | \$0(3)  | NM; *  |
| OYS SHELL CA TAB 500 + D  | \$0(3)  | NM; *  |
| <i>oysco 500+d</i>  | \$0(3)  | NM; *  |
| OYST SHELL/D TAB 500MG  | \$0(3)  | NM; *  |
| <i>oyster shell</i> TABS 500mg  | \$0(3)  | NM; *  |
| <i>oyster shell calcium 250+</i>  | \$0(3)  | NM; *  |
| <i>oyster shell calcium 500+</i>  | \$0(3)  | NM; *  |
| <i>oyster shell calcium + d3</i>  | \$0(3)  | NM; *  |
| <i>oyster shell calcium plus</i>  | \$0(3)  | NM; *  |
| <i>oyster shell calcium+d</i>   | \$0(3)  | NM; *  |
| <i>oyster shell calcium/d3</i>  | \$0(3)  | NM; *  |
| <i>oyster shell calcium/vita</i>  | \$0(3)  | NM; *  |
| <i>oystercal-d</i>  | \$0(3)  | NM; *  |
| <i>phospha 250 neutral</i>  | \$0(3)  | NM; *  |
| <i>phospho-trin 250 neutral</i>   | \$0(3)  | NM; *  |
| <i>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg</i> | \$0(3)  | NM; *  |
| <i>pure calcium carbonate</i> TABS 600mg                                | \$0(3)  | NM; *  |
| <i>qc calcium/minerals/vitam</i>  | \$0(3)  | NM; *  |
| RA CA/BORON TAB   | \$0(3)  | NM; *  |
| RA CA/MG/ZN/ TAB CU   | \$0(3)  | NM; *  |
| <i>ra calcium 600</i> TABS 600mg  | \$0(3)  | NM; *  |
| <i>ra calcium 600 plus vitam</i>  | \$0(3)  | NM; *  |
| <i>ra calcium 600/vit d/mine</i>  | \$0(3)  | NM; *  |
| <i>ra calcium citrate plus v</i>  | \$0(3)  | NM; *  |
| <i>ra hi cal</i>  | \$0(3)  | NM; *  |
| <i>ra magnesium</i> CAPS 500mg  | \$0(3)  | NM; *  |
| <i>ra natural magnesium</i>   | \$0(3)  | NM; *  |
| RA OYS SHL/D TAB 500MG  | \$0(3)  | NM; *  |
| <i>ra selenium natural</i> TABS 200mcg                                  | \$0(3)  | NM; *  |
| <i>ra zinc</i> TABS 50mg  | \$0(3)  | NM; *  |

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|---|---|--|
| selenium TABS 200mcg                        | \$0(3)  | NM; *  |
| SLOW-MAG TAB                                | \$0(3)  | NM; *  |
| SLOW-MAG TAB 71.5-119                       | \$0(3)  | NM; *  |
| sm calcium 600+d3                           | \$0(3)  | NM; *  |
| sm calcium 600/vitamin d                    | \$0(3)  | NM; *  |
| sm calcium /vitamin d                       | \$0(3)  | NM; *  |
| sm calcium citrate+ w/vit                   | \$0(3)  | NM; *  |
| sm calcium citrate+vitami                   | \$0(3)  | NM; *  |
| sm calcium/vitamin d                        | \$0(3)  | NM; *  |
| sm magnesium TABS 250mg                     | \$0(3)  | NM; *  |
| sm zinc TABS 50mg                           | \$0(3)  | NM; *  |
| super calcium TABS 600mg                    | \$0(3)  | NM; *  |
| super calcium 600 + d3                      | \$0(3)  | NM; *  |
| super calcium 600+d3 400                    | \$0(3)  | NM; *  |
| super calcium 600+d 400                     | \$0(3)  | NM; *  |
| tgt calcium + vitamin d3                    | \$0(3)  | NM; *  |
| virt-phos 250 neutral                       | \$0(3)  | NM; *  |
| ZINC LOZG 10mg                              | \$0(3)  | NM; *  |
| zinc TABS 50mg                              | \$0(3)  | NM; *  |
| ZINC 15 TABS 66mg                           | \$0(3)  | NM; *  |
| zinc gluconate TABS 30mg, 50mg, 100mg       | \$0(3)  | NM; *  |
| zinc sulfate CAPS 220mg; TABS 220mg         | \$0(3)  | NM; *  |
| zinc-220 CAPS 220mg                         | \$0(3)  | NM; *  |
| <b>MISCELLANEOUS</b>                        |   |  |
| ALBA-LYBE NR LIQ                            | \$0(3)  | NM; *  |
| ENLYTE CAP                                  | \$0(3)  | NM; *  |
| <b>VITAMINS</b>                             |   |  |
| a thru z advanced                           | \$0(3)  | NM; *  |
| a thru z select                             | \$0(3)  | NM; *  |
| a thru z select 50+ advan                   | \$0(3)  | NM; *  |
| a thru z select advanced                    | \$0(3)  | NM; *  |
| a thru z select ultimate                    | \$0(3)  | NM; *  |
| a thru z ultimate mens                      | \$0(3)  | NM; *  |
| a-10000 CAPS 10000unit                      | \$0(3)  | NM; *  |
| abaneu-sl                                   | \$0(3)  | NM; *  |
| abc plus senior adults 50                   | \$0(3)  | NM; *  |
| actical                                     | \$0(3)  | NM; *  |
| advanced stress formula/z                   | \$0(3)  | NM; *  |
| animal chews                                | \$0(3)  | NM; *  |
| ANIMAL SHAPE CHW IRON                       | \$0(3)  | NM; *  |
| APETEX ELX                                  | \$0(3)  | NM; *  |
| APETIGEN TAB PLUS                           | \$0(3)  | NM; *  |
| APETIGEN-PLS SOL                            | \$0(3)  | NM; *  |

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|---|---|--|
| AQUADEKS CHW  | \$0(3)  | NM; *  |
| AQUADEKS DRO  | \$0(3)  | NM; *  |
| <i>aqueous vitamin d infants</i> LIQD 10mcg/ml  | \$0(3)  | NM; *  |
| <i>aqueous vitamin e</i> SOLN 15mg/0.67ml   | \$0(3)  | NM; *  |
| ASCORBIC ACD POW  | \$0(3)  | NM; *  |
| <i>ascorbic acid</i> CHEW 250mg, 500mg; CPCR<br>500mg; LIQD 500mg/5ml; TABS 250mg,<br>500mg, 1000mg; TBCR 500mg, 1000mg | \$0(3)  | NM; *  |
| <i>ascorbic acid chew tab 250 mg</i>  | \$0(3)  | NM; *  |
| <i>ascorbic acid chew tab 500 mg</i>  | \$0(3)  | NM; *  |
| <i>ascorbic acid tab 500 mg</i>   | \$0(3)  | NM; *  |
| <i>ascorbic acid tab 1000 mg</i>  | \$0(3)  | NM; *  |
| <i>ascorbic acid tab er 500 mg</i>  | \$0(3)  | NM; *  |
| <i>b6 natural</i> TABS 100mg  | \$0(3)  | NM; *  |
| B COMPLEX/FO TAB  | \$0(3)  | NM; *  |
| B-12 DOTS TBDP 500mcg   | \$0(3)  | NM; *  |
| <i>b-12 tr</i> TBCR 1000mcg, 2000mcg  | \$0(3)  | NM; *  |
| B-100 COMP TAB TR   | \$0(3)  | NM; *  |
| <i>b-complex formula 1</i>  | \$0(3)  | NM; *  |
| * <i>b-complex vitamin cap**</i>  | \$0(3)  | NM; *  |
| * <i>b-complex vitamin tab**</i>  | \$0(3)  | NM; *  |
| * <i>b-complex w/ c tab**</i>   | \$0(3)  | NM; *  |
| * <i>b-complex w/ folic acid cap**</i>  | \$0(3)  | NM; *  |
| * <i>b-complex w/ folic acid tab**</i>  | \$0(3)  | NM; *  |
| BACMIN TAB  | \$0(3)  | NM; *  |
| <i>balance b-50</i>   | \$0(3)  | NM; *  |
| <i>balance b-100</i>  | \$0(3)  | NM; *  |
| <i>beta carotene</i> CAPS 25000unit   | \$0(3)  | NM; *  |
| <i>beta carotene provitamin</i> CAPS 25000unit  | \$0(3)  | NM; *  |
| BIOCAL CAP  | \$0(3)  | NM; *  |
| <i>biopetit</i>   | \$0(3)  | NM; *  |
| <i>biotin</i> CAPS 2500mcg, 5000mcg; TABS<br>1000mcg  | \$0(3)  | NM; *  |
| <i>biotin 5000</i> CAPS 5mg   | \$0(3)  | NM; *  |
| <i>biotin/maximum strength</i> CAPS 5000mcg   | \$0(3)  | NM; *  |
| <i>bprotected multi-vite</i>  | \$0(3)  | NM; *  |
| <i>bprotected pedia d-vite</i> LIQD 400unit/ml  | \$0(3)  | NM; *  |
| BPROTECTED PEDIA TRI-VITE   | \$0(3)  | NM; *  |
| <i>c 500</i> TABS 500mg   | \$0(3)  | NM; *  |
| <i>c 1000</i> TABS 1000mg   | \$0(3)  | NM; *  |
| C 1000/BIOFL CAP /R HIPS  | \$0(3)  | NM; *  |
| <i>c complex</i>  | \$0(3)  | NM; *  |
| <i>c-250</i> TABS 250mg   | \$0(3)  | NM; *  |

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| <b>Drug Name<br/>(By Medical Condition)</b> | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| c-500 CHEW 500mg; TABS 500mg                | \$0(3)  | NM; *  |
| c-500 prolonged release TBCR 500mg          | \$0(3)  | NM; *  |
| c-500/rose hips                             | \$0(3)  | NM; *  |
| c-1000 TABS 1000mg                          | \$0(3)  | NM; *  |
| c-1000 prolonged release TBCR 1000mg        | \$0(3)  | NM; *  |
| c-1000/rose hips                            | \$0(3)  | NM; *  |
| c-chewable CHEW 500mg                       | \$0(3)  | NM; *  |
| CAL-MAG-ZINC TAB -D                         | \$0(3)  | NM; *  |
| calcidiol SOLN 200mcg/ml                    | \$0(3)  | NM; *  |
| calcium citrate plus/magn                   | \$0(3)  | NM; *  |
| centamin                                    | \$0(3)  | NM; *  |
| CENTRAVITES TAB 50 PLUS                     | \$0(3)  | NM; *  |
| CENTRUM SPEC TAB HEART                      | \$0(3)  | NM; *  |
| CENTRUM TAB SILVER                          | \$0(3)  | NM; *  |
| CENTRUM TAB ULTRA                           | \$0(3)  | NM; *  |
| CEREFOLIN TAB                               | \$0(3)  | NM; *  |
| certa plus                                  | \$0(3)  | NM; *  |
| CERTAVITE TAB SENIOR                        | \$0(3)  | NM; *  |
| CERTAVITE/ TAB ANTIOXID                     | \$0(3)  | NM; *  |
| certavite/antioxidants                      | \$0(3)  | NM; *  |
| childrens chewable multiv                   | \$0(3)  | NM; *  |
| cholecalciferol LIQD 400unit/ml             | \$0(3)  | NM; *  |
| CITRACAL TAB MAX PLUS                       | \$0(3)  | NM; *  |
| companion                                   | \$0(3)  | NM; *  |
| corvita                                     | \$0(3)  | NM; *  |
| CRANBERRY CAP URIN COM                      | \$0(3)  | NM; *  |
| cvs b1 TABS 100mg                           | \$0(3)  | NM; *  |
| cvs b6 TABS 100mg                           | \$0(3)  | NM; *  |
| cvs b complex plus c                        | \$0(3)  | NM; *  |
| cvs b-1 TABS 100mg                          | \$0(3)  | NM; *  |
| cvs b-12 TABS 500mcg                        | \$0(3)  | NM; *  |
| CVS BETA CAROTENE CAPS 15mg                 | \$0(3)  | NM; *  |
| cvs biotin high potency TABS 1000mcg        | \$0(3)  | NM; *  |
| cvs chewable c with rose                    | \$0(3)  | NM; *  |
| cvs daily multiple for wo                   | \$0(3)  | NM; *  |
| CVS HAIR/SKN TAB NAILS                      | \$0(3)  | NM; *  |
| cvs spectravite advanced                    | \$0(3)  | NM; *  |
| cvs spectravite men                         | \$0(3)  | NM; *  |
| cvs spectravite women                       | \$0(3)  | NM; *  |
| cvs spectravite women 50+                   | \$0(3)  | NM; *  |
| cvs vitamin a CAPS 8000unit                 | \$0(3)  | NM; *  |
| cvs vitamin b12 TABS 1000mcg                | \$0(3)  | NM; *  |
| cvs vitamin b12 tr TBCR 1000mcg             | \$0(3)  | NM; *  |

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| <b>Drug Name<br/>(By Medical Condition)</b>   | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| cvs vitamin b-2 TABS 100mg  | \$0(3)  | NM; *  |
| cvs vitamin b-12 TBCR 2000mcg   | \$0(3)  | NM; *  |
| cvs vitamin b-12 tr TBCR 1000mcg  | \$0(3)  | NM; *  |
| cvs vitamin c TABS 250mg, 500mg,<br>1000mg  | \$0(3)  | NM; *  |
| cvs vitamin c/rose hips TABS 500mg,<br>1000mg   | \$0(3)  | NM; *  |
| cvs vitamin e CAPS 180mg, 400unit   | \$0(3)  | NM; *  |
| cyanocobalamin LIQD 1000mcg/15ml;<br>SUBL 2500mcg; TABS 50mcg, 100mcg,<br>250mcg, 500mcg, 1000mcg; TBCR<br>1000mcg, 2000mcg | \$0(3)  | NM; *  |
| daily value multivitamin  | \$0(3)  | NM; *  |
| daily vitamin   | \$0(3)  | NM; *  |
| daily vitamin formula+ir  | \$0(3)  | NM; *  |
| daily vitamin formula+iro   | \$0(3)  | NM; *  |
| daily vitamin formula+min   | \$0(3)  | NM; *  |
| daily vite  | \$0(3)  | NM; *  |
| daily vite multivitamin/i   | \$0(3)  | NM; *  |
| DEKAS CAP ESSENTIA  | \$0(3)  | NM; *  |
| DEKAS PLUS CAP  | \$0(3)  | NM; *  |
| DEKAS PLUS LIQ  | \$0(3)  | NM; *  |
| dalyvite  | \$0(3)  | NM; *  |
| dalyvite 800  | \$0(3)  | NM; *  |
| DIALYVITE TAB 800/IRON  | \$0(3)  | NM; *  |
| DIALYVITE TAB 3000  | \$0(3)  | NM; *  |
| DIALYVITE TAB 5000  | \$0(3)  | NM; *  |
| DIALYVITE TAB SUPREM D  | \$0(3)  | NM; *  |
| DIALYVITE/ TAB ZINC   | \$0(3)  | NM; *  |
| e400 CAPS 400unit   | \$0(3)  | NM; *  |
| e-400 CAPS 400unit  | \$0(3)  | NM; *  |
| e-oil OIL 100unt/0.25ml   | \$0(3)  | NM; *  |
| ELFOLATE PLU TAB 3-35-2MG   | \$0(3)  | NM; *  |
| endur-acin TBCR 250mg, 500mg  | \$0(3)  | NM; *  |
| endur-c/rose hips TBCR 500mg, 1000mg  | \$0(3)  | NM; *  |
| eq complete multivitamin  | \$0(3)  | NM; *  |
| EQ COMPLETE TAB ADULT   | \$0(3)  | NM; *  |
| EQ ONE DAILY TAB WOMENS   | \$0(3)  | NM; *  |
| eq one daily womens healt   | \$0(3)  | NM; *  |
| eql b complex 50  | \$0(3)  | NM; *  |
| eql b-6 TABS 100mg  | \$0(3)  | NM; *  |
| eql one daily mens health   | \$0(3)  | NM; *  |
| eql one daily womens  | \$0(3)  | NM; *  |

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| <b>Drug Name<br/>(By Medical Condition)</b>                    | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| <i>eql vitamin b-12 TABS 500mcg</i>                            | \$0(3)  | NM; *  |
| <i>eql vitamin b-12 tr TBCR 1000mcg</i>                        | \$0(3)  | NM; *  |
| <i>eql vitamin c TABS 500mg, 1000mg</i>                        | \$0(3)  | NM; *  |
| <i>eql vitamin c/rose hips TABS 500mg, 1000mg</i>              | \$0(3)  | NM; *  |
| <i>eql vitamin e CAPS 400unit</i>                              | \$0(3)  | NM; *  |
| <i>ergocalciferol CAPS 1.25mg, 50000unit; SOLN 8000unit/ml</i> | \$0(3)  | NM; *  |
| <i>essentia</i>  | \$0(3)  | NM; *  |
| <i>fabb</i>  | \$0(3)  | NM; *  |
| <i>FLINTSTONES CHW COMPLETE</i>                                | \$0(3)  | NM; *  |
| <i>flintstones complete</i>                                    | \$0(3)  | NM; *  |
| <i>flintstones plus extra c</i>                                | \$0(3)  | NM; *  |
| <i>flintstones/my first</i>                                    | \$0(3)  | NM; *  |
| <i>FLORIVA DRO PLUS</i>  | \$0(3)  | NM; *  |
| <i>folbee</i>  | \$0(3)  | NM; *  |
| <i>folbee plus</i>   | \$0(3)  | NM; *  |
| <i>folbee plus cz</i>  | \$0(3)  | NM; *  |
| <i>FOLBIC TAB</i>  | \$0(3)  | NM; *  |
| <i>folic acid SOLN 5mg/ml; TABS 1mg</i>                        | \$0(3)  | NM; *  |
| <i>folplex 2.2</i>   | \$0(3)  | NM; *  |
| <i>FOLTABS 800</i>   | \$0(3)  | NM; *  |
| <i>FOLTANX TAB</i>   | \$0(3)  | NM; *  |
| <i>FOLTRATE TAB</i>  | \$0(3)  | NM; *  |
| <i>FORTAVIT CAP</i>  | \$0(3)  | NM; *  |
| <i>fruit c 500</i>   | \$0(3)  | NM; *  |
| <i>fruity c CHEW 250mg</i>                                     | \$0(3)  | NM; *  |
| <i>full spectrum b/vitamin c</i>                               | \$0(3)  | NM; *  |
| <i>gnp b-12 SUBL 2500mcg</i>                                   | \$0(3)  | NM; *  |
| <i>gnp biotin CAPS 5000mcg</i>                                 | \$0(3)  | NM; *  |
| <i>gnp century</i>   | \$0(3)  | NM; *  |
| <i>gnp century adults 50+ se</i>                               | \$0(3)  | NM; *  |
| <i>gnp century cardio health</i>                               | \$0(3)  | NM; *  |
| <i>gnp century mature</i>                                      | \$0(3)  | NM; *  |
| <i>gnp century ultimate mens</i>                               | \$0(3)  | NM; *  |
| <i>gnp century ultimate wome</i>                               | \$0(3)  | NM; *  |
| <i>gnp childrens chewables w</i>                               | \$0(3)  | NM; *  |
| <i>gnp childrens chewables/e</i>                               | \$0(3)  | NM; *  |
| <i>gnp essential one daily</i>                                 | \$0(3)  | NM; *  |
| <i>gnp little ones childrens</i>                               | \$0(3)  | NM; *  |
| <i>gnp mega multi for men</i>                                  | \$0(3)  | NM; *  |
| <i>gnp mega multi for women</i>                                | \$0(3)  | NM; *  |
| <i>gnp one daily maximum</i>                                   | \$0(3)  | NM; *  |

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|--|---|--|
| <i>gnp one daily mens health</i>                   | \$0(3)  | NM; *  |
| <i>gnp one daily plus iron</i>                     | \$0(3)  | NM; *  |
| <i>gnp one daily womens heal</i>                   | \$0(3)  | NM; *  |
| <i>gnp therapeutic-m</i>                           | \$0(3)  | NM; *  |
| <i>gnp vitamin a CAPS 10000unit</i>                | \$0(3)  | NM; *  |
| <i>gnp vitamin b-1 TABS 100mg</i>                  | \$0(3)  | NM; *  |
| <i>gnp vitamin b-6 TABS 100mg</i>                  | \$0(3)  | NM; *  |
| <i>gnp vitamin b-12 TABS 500mcg</i>                | \$0(3)  | NM; *  |
| <i>gnp vitamin b-12 prolonge TBCR 1000mcg</i>      | \$0(3)  | NM; *  |
| <i>gnp vitamin c TABS 250mg, 500mg,<br/>1000mg</i> | \$0(3)  | NM; *  |
| <i>gnp vitamin c drops</i>                         | \$0(3)  | NM; *  |
| <i>gnp vitamin c pr TBCR 500mg</i>                 | \$0(3)  | NM; *  |
| <i>gnp vitamin c w/rose hips</i>                   | \$0(3)  | NM; *  |
| <i>gnp vitamin c/rose hips</i>                     | \$0(3)  | NM; *  |
| <i>gnp vitamin e CAPS 400unit</i>                  | \$0(3)  | NM; *  |
| <i>gnp vitamin e water dispe CAPS 400unit</i>      | \$0(3)  | NM; *  |
| <i>gummi bear multivitamin/m</i>                   | \$0(3)  | NM; *  |
| <i>halls defense vitamin c d</i>                   | \$0(3)  | NM; *  |
| <i>HEALTHY KIDS CHW GUMMIES</i>                    | \$0(3)  | NM; *  |
| <i>HI POT MV/ TAB BETA-CAR</i>                     | \$0(3)  | NM; *  |
| <i>HIGH POTENCY TAB MV/FA</i>                      | \$0(3)  | NM; *  |
| <i>hm biotin CAPS 5000mcg</i>                      | \$0(3)  | NM; *  |
| <i>hm e vitamin CAPS 180mg</i>                     | \$0(3)  | NM; *  |
| <i>hm vitamin b12 TABS 500mcg</i>                  | \$0(3)  | NM; *  |
| <i>hm vitamin c</i>                                | \$0(3)  | NM; *  |
| <i>ICAPS AREDS TAB FORMULA</i>                     | \$0(3)  | NM; *  |
| <i>ICAPS LUTEIN TAB ZEAXANTH</i>                   | \$0(3)  | NM; *  |
| <i>icaps mv</i>                                    | \$0(3)  | NM; *  |
| <i>kobee</i>                                       | \$0(3)  | NM; *  |
| <i>kp adults 50+ daily formu</i>                   | \$0(3)  | NM; *  |
| <i>kp b complex/c</i>                              | \$0(3)  | NM; *  |
| <i>kp niacin TABS 500mg</i>                        | \$0(3)  | NM; *  |
| <i>kp vitamin b-6 TABS 100mg</i>                   | \$0(3)  | NM; *  |
| <i>kp vitamin b-12 TABS 1000mcg</i>                | \$0(3)  | NM; *  |
| <i>kp vitamin e CAPS 100unit</i>                   | \$0(3)  | NM; *  |
| <i>L-METHYL- TAB B6-B12</i>                        | \$0(3)  | NM; *  |
| <i>L-METHYL-MC TAB</i>                             | \$0(3)  | NM; *  |
| <i>LYSIPLEX PLUS</i>                               | \$0(3)  | NM; *  |
| <i>MEGA MULTI TAB MEN</i>                          | \$0(3)  | NM; *  |
| <i>mega multiple w/chelated</i>                    | \$0(3)  | NM; *  |
| <i>meijer c TABS 500mg</i>                         | \$0(3)  | NM; *  |
| <i>meribin CAPS 5mg</i>                            | \$0(3)  | NM; *  |

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|--|---|--|
| METAFOLBIC TAB   | \$0(3)  | NM; *  |
| MG PLUS TAB PROTEIN  | \$0(3)  | NM; *  |
| MTX SUPPORT TAB  | \$0(3)  | NM; *  |
| <i>multi complete/iron</i>   | \$0(3)  | NM; *  |
| MULTI VITAMI TAB   | \$0(3)  | NM; *  |
| <i>multi vitamin daily</i>   | \$0(3)  | NM; *  |
| MULTI VITAMN TAB MINERALS  | \$0(3)  | NM; *  |
| <i>multi-day plus iron</i>   | \$0(3)  | NM; *  |
| MULTI-DELYN LIQ /IRON  | \$0(3)  | NM; *  |
| <i>multi-vit/iron/fluoride</i>                                       | \$0(3)  | NM; *  |
| <i>multi-vitamin</i>   | \$0(3)  | NM; *  |
| <i>multi-vitamin daily</i>   | \$0(3)  | NM; *  |
| <i>multi-vitamin hp/minerals</i>                                     | \$0(3)  | NM; *  |
| <i>multi-vitamin/multi-miner</i>                                     | \$0(3)  | NM; *  |
| MULTI-VITE LIQ   | \$0(3)  | NM; *  |
| *multiple vitamin tab**  | \$0(3)  | NM; *  |
| <i>multiple vitamin/minerals</i>                                     | \$0(3)  | NM; *  |
| *multiple vitamins w/ iron tab**                                     | \$0(3)  | NM; *  |
| <i>multivitamin &amp; mineral</i>                                    | \$0(3)  | NM; *  |
| <i>multivitamin adults 50+</i>                                       | \$0(3)  | NM; *  |
| MULTIVITAMIN TAB   | \$0(3)  | NM; *  |
| <i>multivitamin with fluorid</i>                                     | \$0(3)  | NM; *  |
| <i>multivitamin women 50+</i>  | \$0(3)  | NM; *  |
| <i>multivitamin/fluoride</i>   | \$0(3)  | NM; *  |
| MVW COMPLETE CAP D3000   | \$0(3)  | NM; *  |
| MVW COMPLETE CAP D5000   | \$0(3)  | NM; *  |
| MVW COMPLETE CAP FORMULAT  | \$0(3)  | NM; *  |
| MVW COMPLETE CAP MINIS   | \$0(3)  | NM; *  |
| MVW COMPLETE CHW GRAPE   | \$0(3)  | NM; *  |
| MVW COMPLETE DRO PEDIATRI  | \$0(3)  | NM; *  |
| <i>mvw complete formulation</i>                                      | \$0(3)  | NM; *  |
| <i>my-vitalife</i>   | \$0(3)  | NM; *  |
| <i>mynephrocaps</i>  | \$0(3)  | NM; *  |
| <i>mynephron</i>   | \$0(3)  | NM; *  |
| <i>natural c/rose hips TABS 1000mg</i>                               | \$0(3)  | NM; *  |
| <i>natural vitamin e CAPS 400unit, 1000unit</i>                      | \$0(3)  | NM; *  |
| NEPHPLEX RX TAB  | \$0(3)  | NM; *  |
| <i>niacin CPCR 250mg; TABS 50mg, 100mg, 500mg; TBCR 250mg, 500mg</i> | \$0(3)  | NM; *  |
| NIVA-FOL TAB   | \$0(3)  | NM; *  |
| NUTRIVIT LIQ 800-15-1  | \$0(3)  | NM; *  |
| <i>ocutabs</i>   | \$0(3)  | NM; *  |
| <i>ocutabs/lutein</i>  | \$0(3)  | NM; *  |

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|---|---|--|
| OMNICAP TAB   | \$0(3)  | NM; *  |
| ONCOVITE TAB  | \$0(3)  | NM; *  |
| <i>one daily complete</i>                                       | \$0(3)  | NM; *  |
| <i>one daily for men 50+ adv</i>                                | \$0(3)  | NM; *  |
| <i>one daily for women</i>                                      | \$0(3)  | NM; *  |
| <i>one daily for women 50+a</i>                                 | \$0(3)  | NM; *  |
| <i>one daily maximum</i>  | \$0(3)  | NM; *  |
| <i>one daily multivitamin/ir</i>                                | \$0(3)  | NM; *  |
| <i>one daily womens 50 plus</i>                                 | \$0(3)  | NM; *  |
| <i>one daily womens 50+</i>                                     | \$0(3)  | NM; *  |
| <i>one daily/iron/calcium</i>                                   | \$0(3)  | NM; *  |
| <i>one daily/minerals</i>                                       | \$0(3)  | NM; *  |
| ONE-A-DAY TAB 50+ ADV   | \$0(3)  | NM; *  |
| ONE-A-DAY TAB TEEN/HIM  | \$0(3)  | NM; *  |
| <i>one-a-day teen advantage</i>                                 | \$0(3)  | NM; *  |
| <i>one-daily multi-vitamin</i>                                  | \$0(3)  | NM; *  |
| <i>pc pediatric tri-vitamin</i>                                 | \$0(3)  | NM; *  |
| *pediatric multiple vitamins w/ iron chew<br><i>tab 15 mg**</i> | \$0(3)  | NM; *  |
| <i>pharmacist choice d-vitam LIQD</i>                           | \$0(3)  | NM; *  |
| <i>400unit/ml</i>   |   |  |
| <i>phytonadione SOLN 10mg/ml; TABS 5mg</i>                      | \$0(3)  | NM; *  |
| POLY-VI-SOL SOL 50MG/ML   | \$0(3)  | NM; *  |
| POLY-VI-SOL SOL IRON  | \$0(3)  | NM; *  |
| <i>prevent</i>  | \$0(3)  | NM; *  |
| <i>pure c 500 CPCR 500mg</i>                                    | \$0(3)  | NM; *  |
| <i>pureway-c TABS 500mg</i>                                     | \$0(3)  | NM; *  |
| <i>pyridoxine hcl TABS 25mg, 50mg, 100mg</i>                    | \$0(3)  | NM; *  |
| <i>qc maximum daily multivit</i>                                | \$0(3)  | NM; *  |
| QUINTABS-M TAB  | \$0(3)  | NM; *  |
| <i>ra b-complex</i>   | \$0(3)  | NM; *  |
| RA B-COMPLEX TAB VIT C TR                                       | \$0(3)  | NM; *  |
| <i>ra b-complex with b-12</i>                                   | \$0(3)  | NM; *  |
| <i>ra balanced b-50</i>   | \$0(3)  | NM; *  |
| <i>ra balanced b-100</i>  | \$0(3)  | NM; *  |
| <i>ra biotin CAPS 2500mcg</i>                                   | \$0(3)  | NM; *  |
| <i>ra central-vite womens ma</i>                                | \$0(3)  | NM; *  |
| <i>ra niacin TABS 100mg, 500mg</i>                              | \$0(3)  | NM; *  |
| <i>ra one daily energy formu</i>                                | \$0(3)  | NM; *  |
| <i>ra one daily essential</i>                                   | \$0(3)  | NM; *  |
| <i>ra one daily maximum</i>                                     | \$0(3)  | NM; *  |
| <i>ra vitamin a CAPS 10000unit</i>                              | \$0(3)  | NM; *  |
| <i>ra vitamin b12 TBCR 2000mcg</i>                              | \$0(3)  | NM; *  |

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| <b>Drug Name<br/>(By Medical Condition)</b>      | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|--|---|--|
| <i>ra vitamin b-1 TABS 100mg</i>                 | \$0(3)  | NM; *  |
| <i>ra vitamin b-6 TABS 50mg, 100mg</i>           | \$0(3)  | NM; *  |
| <i>ra vitamin b-12 TABS 100mcg</i>               | \$0(3)  | NM; *  |
| <i>ra vitamin b-12 tr TBCR 1000mcg</i>           | \$0(3)  | NM; *  |
| <i>ra vitamin c TABS 250mg, 500mg</i>            | \$0(3)  | NM; *  |
| <i>ra vitamin c tr TBCR 500mg</i>                | \$0(3)  | NM; *  |
| <i>ra vitamin c/rose hips TABS 500mg, 1000mg</i> | \$0(3)  | NM; *  |
| <i>ra vitamin e CAPS 400unit</i>                 | \$0(3)  | NM; *  |
| <i>rena-vite</i>                                 | \$0(3)  | NM; *  |
| <i>rena-vite rx</i>                              | \$0(3)  | NM; *  |
| <i>renal caps</i>                                | \$0(3)  | NM; *  |
| <i>renal vitamin</i>                             | \$0(3)  | NM; *  |
| <i>renal-vite</i>                                | \$0(3)  | NM; *  |
| <i>reno caps</i>                                 | \$0(3)  | NM; *  |
| <i>riboflavin TABS 25mg, 50mg, 100mg</i>         | \$0(3)  | NM; *  |
| <i>SCOODY-DOO CHW</i>                            | \$0(3)  | NM; *  |
| <i>senior tabs</i>                               | \$0(3)  | NM; *  |
| <i>sentry</i>                                    | \$0(3)  | NM; *  |
| <i>sentry senior</i>                             | \$0(3)  | NM; *  |
| <i>SENTRY TAB</i>                                | \$0(3)  | NM; *  |
| <i>SENTRY TAB SENIOR</i>                         | \$0(3)  | NM; *  |
| <i>SIDEROL TAB</i>                               | \$0(3)  | NM; *  |
| <i>sm b-complex</i>                              | \$0(3)  | NM; *  |
| <i>SM B-COMPLEX TAB /VIT C</i>                   | \$0(3)  | NM; *  |
| <i>sm biotin CAPS 5000mcg</i>                    | \$0(3)  | NM; *  |
| <i>sm chewable vitamin c</i>                     | \$0(3)  | NM; *  |
| <i>sm complete</i>                               | \$0(3)  | NM; *  |
| <i>sm complete 50+</i>                           | \$0(3)  | NM; *  |
| <i>sm complete 50+ ultimate</i>                  | \$0(3)  | NM; *  |
| <i>sm hair/skin/nails</i>                        | \$0(3)  | NM; *  |
| <i>sm multiple vitamins/iron</i>                 | \$0(3)  | NM; *  |
| <i>sm niacin cr TBCR 250mg</i>                   | \$0(3)  | NM; *  |
| <i>SM ONE DAILY TAB WOMENS</i>                   | \$0(3)  | NM; *  |
| <i>sm vitamin b1 TABS 100mg</i>                  | \$0(3)  | NM; *  |
| <i>sm vitamin b6 TABS 100mg</i>                  | \$0(3)  | NM; *  |
| <i>sm vitamin b12 TABS 500mcg</i>                | \$0(3)  | NM; *  |
| <i>sm vitamin b12 tr TBCR 1000mcg, 2000mcg</i>   | \$0(3)  | NM; *  |
| <i>sm vitamin b100 complex</i>                   | \$0(3)  | NM; *  |
| <i>sm vitamin b complex with</i>                 | \$0(3)  | NM; *  |
| <i>sm vitamin c TABS 500mg</i>                   | \$0(3)  | NM; *  |
| <i>sm vitamin c tr TBCR 500mg</i>                | \$0(3)  | NM; *  |

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|---|---|--|
| <i>solvita e</i> SOLN 15.8mg/0.7ml          | \$0(3)  | NM; *  |
| SPECTRAVITE TAB                             | \$0(3)  | NM; *  |
| SPECTRAVITE TAB ADLT 50+                    | \$0(3)  | NM; *  |
| SPECTRAVITE TAB ADULTS                      | \$0(3)  | NM; *  |
| <i>stress b/zinc</i>                        | \$0(3)  | NM; *  |
| <i>stress formula</i>                       | \$0(3)  | NM; *  |
| <i>stress formula/iron</i>                  | \$0(3)  | NM; *  |
| <i>stress formula/zinc</i>                  | \$0(3)  | NM; *  |
| STROVITE ONE TAB                            | \$0(3)  | NM; *  |
| <i>super b complex maxi</i>                 | \$0(3)  | NM; *  |
| <i>super b with c</i>                       | \$0(3)  | NM; *  |
| <i>super biotin</i> CAPS 5000mcg            | \$0(3)  | NM; *  |
| <i>super quints b-50</i>                    | \$0(3)  | NM; *  |
| <i>super thera vite m</i>                   | \$0(3)  | NM; *  |
| SUPERVITE LIQ                               | \$0(3)  | NM; *  |
| SUPPORT LIQ                                 | \$0(3)  | NM; *  |
| SUPPORT-500 CAP                             | \$0(3)  | NM; *  |
| <i>sv vitamin b12 tr</i> TBCR 1000mcg       | \$0(3)  | NM; *  |
| TAB-A-VITE TAB IRON/BET                     | \$0(3)  | NM; *  |
| THERA M PLUS TAB                            | \$0(3)  | NM; *  |
| <i>thera-m</i>                              | \$0(3)  | NM; *  |
| THERA-M TAB                                 | \$0(3)  | NM; *  |
| <i>thera-tabs</i>                           | \$0(3)  | NM; *  |
| <i>therapeutic-m/lutein</i>                 | \$0(3)  | NM; *  |
| <i>theratrum complete</i>                   | \$0(3)  | NM; *  |
| <i>theratrum complete 50 plu</i>            | \$0(3)  | NM; *  |
| THEREMS-M TAB                               | \$0(3)  | NM; *  |
| <i>thiamine hcl</i> TABS 50mg, 100mg, 250mg | \$0(3)  | NM; *  |
| <i>tri-vitamin/fluoride</i>                 | \$0(3)  | NM; *  |
| <i>triphrocaps</i>                          | \$0(3)  | NM; *  |
| <i>v-c forte</i>                            | \$0(3)  | NM; *  |
| <i>vic-forte</i>                            | \$0(3)  | NM; *  |
| <i>virt-caps</i>                            | \$0(3)  | NM; *  |
| <i>virt-gard</i>                            | \$0(3)  | NM; *  |
| VITAL-D RX TAB                              | \$0(3)  | NM; *  |
| <i>vitalee</i>                              | \$0(3)  | NM; *  |
| VITALETS CHW CHILD                          | \$0(3)  | NM; *  |
| <i>vitamin a</i> CAPS 8000unit              | \$0(3)  | NM; *  |
| <i>vitamin b complex/vitamin</i>            | \$0(3)  | NM; *  |
| VITAMIN B-2 TABS 50mg                       | \$0(3)  | NM; *  |
| <i>vitamin b-12 tr</i> TBCR 2000mcg         | \$0(3)  | NM; *  |
| VITAMIN C CHW 500MG                         | \$0(3)  | NM; *  |
| <i>vitamin c drops</i>                      | \$0(3)  | NM; *  |

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|--|---|--|
| VITAMIN C POW  | \$0(3)  | NM; *  |
| VITAMIN C TR TBCR 1500mg   | \$0(3)  | NM; *  |
| <i>vitamin c/bioflavonoids/w</i>   | \$0(3)  | NM; *  |
| <i>vitamin c/rose hips tr TBCR 500mg,<br/>1000mg</i>   | \$0(3)  | NM; *  |
| <i>vitamin d infant LIQD 400unit/ml</i>  | \$0(3)  | NM; *  |
| <i>vitamin e CAPS 45mg, 90mg, 180mg,<br/>200unit, 268mg, 400unit, 450mg,<br/>1000unit; OIL 100unt/0.25ml; SOLN<br/>15mg/0.67ml</i> | \$0(3)  | NM; *  |
| <i>vitamin e blend CAPS 400unit</i>  | \$0(3)  | NM; *  |
| <i>vitamin e high potency CAPS 400unit</i>   | \$0(3)  | NM; *  |
| <i>vitamin e-400 CAPS 400unit</i>  | \$0(3)  | NM; *  |
| <i>vitamin e/d-alpha natural CAPS 268mg</i>  | \$0(3)  | NM; *  |
| <i>vitamin supplement e-400 CAPS 400unit</i>   | \$0(3)  | NM; *  |
| <i>vitamins a/c/d/fluoride</i>   | \$0(3)  | NM; *  |
| VITATRUM TAB   | \$0(3)  | NM; *  |
| VITRUM TAB SENIOR  | \$0(3)  | NM; *  |
| <i>vp-vite rx</i>  | \$0(3)  | NM; *  |
| <i>wescaps</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; *  |
| <i>womens daily formula</i>  | \$0(3)  | NM; *  |
| <i>womens daily formula/foli</i>   | \$0(3)  | NM; *  |
| YELETS TEEN TAB FORMULA  | \$0(3)  | NM; *  |
| ZINC LOZ   | \$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<br/>oint 1%</i>              | \$0(1) |
| <i>neo-polycin hc ophth oint 1%</i>                                    | \$0(1) |
| <i>neomycin-polymyxin-dexamethasone ophth<br/>oint 0.1%</i>            | \$0(1) |
| <i>neomycin-polymyxin-dexamethasone ophth<br/>susp 0.1%</i>            | \$0(1) |
| <i>neomycin-polymyxin-hc ophth susp</i>                                | \$0(1) |
| <i>sulfacetamide sodium-prednisolone ophth<br/>soln 10-0.23(0.25)%</i> | \$0(1) |
| TOBRADEX OIN 0.3-0.1%  | \$0(2) |
| TOBRADEX ST SUS 0.3-0.05   | \$0(2) |
| <i>tobramycin-dexamethasone ophth susp 0.3-<br/>0.1%</i>               | \$0(1) |

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|---|---|--|
| ZYLET SUS 0.5-0.3%                          | \$0(2)  |  |

#### ***ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS***

|   |        |
|---|--------|
| <i>bacitracin (ophthalmic) OINT 500unit/gm</i>                      | \$0(1) |
| <i>bacitracin-polymyxin b ophth oint</i>                            | \$0(1) |
| <i>BESIVANCE SUSP .6%</i>   | \$0(2) |
| <i>CILOXAN OINT .3%</i>   | \$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) |
| <i>NATACYN SUSP 5%</i>  | \$0(2) |
| <i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>                  | \$0(1) |
| <i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i> | \$0(1) |
| <i>neomycin-polymy-gramcid op sol 1.75-10000-0.025mg-unt-mg/ml</i>  | \$0(1) |
| <i>ofloxacin (ophth) SOLN .3%</i>                                   | \$0(1) |
| <i>polycin ophth oint</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) |
| <i>ZIRGAN GEL .15%</i>  | \$0(2) |

#### ***ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION***

|  |        |
|--|--------|
| <i>ALREX SUSP .2%</i>                                  | \$0(2) |
| <i>BROMSITE SOLN .075%</i>                             | \$0(2) |
| <i>dexamethasone sodium phosphate (ophth) SOLN .1%</i> | \$0(1) |
| <i>diclofenac sodium (ophth) SOLN .1%</i>              | \$0(1) |
| <i>dilfluprednate EMUL .05%</i>                        | \$0(1) |
| <i>EYSUVIS SUSP .25%</i>                               | \$0(2) |
| <i>FLAREX SUSP .1%</i>                                 | \$0(2) |
| <i>fluorometholone (ophth) SUSP .1%</i>                | \$0(1) |
| <i>flurbiprofen sodium SOLN .03%</i>                   | \$0(1) |
| <i>ILEVRO SUSP .3%</i>                                 | \$0(2) |
| <i>ketorolac tromethamine (ophth) SOLN .4%, .5%</i>    | \$0(1) |
| <i>LOTEMAX OINT .5%</i>                                | \$0(2) |

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|---|---|--|
|---|---|--|

|   |        |
|---|--------|
| <i>prednisolone acetate (ophth)</i> SUSP 1% | \$0(1) |
| PREDNISOLONE SODIUM PHOSP SOLN 1%           | \$0(2) |
| PROLENSA SOLN .07%                          | \$0(2) |

#### **ANTIALLERGICS - DRUGS TO TREAT ALLERGIES**

|   |        |
|---|--------|
| <i>azelastine hcl (ophth)</i> SOLN .05% | \$0(1) |
| <i>cromolyn sodium (ophth)</i> SOLN 4%  | \$0(1) |
| <i>olopatadine hcl</i> SOLN .1%         | \$0(1) |
| ZERVIATE SOLN .24%                      | \$0(2) |

#### **ANTIGLAUCOMA - DRUGS TO TREAT GLAUCOMA**

|  |        |
|--|--------|
| ALPHAGAN P SOLN .1%  | \$0(2) |
| <i>betaxolol hcl (ophth)</i> SOLN .5%                            | \$0(1) |
| BETOPTIC-S SUSP .25%   | \$0(2) |
| <i>brimonidine tartrate</i> SOLN .1%, .15%, .2%                  | \$0(1) |
| <i>brinzolamide</i> SUSP 1%                                      | \$0(1) |
| <i>carteolol hcl (ophth)</i> SOLN 1%                             | \$0(1) |
| COMBIGAN SOL 0.2/0.5%  | \$0(2) |
| <i>dorzolamide hcl</i> SOLN 2%                                   | \$0(1) |
| <i>dorzolamide hcl-timolol maleate ophth soln</i><br>2-0.5%      | \$0(1) |
| <i>latanoprost</i> SOLN .005%                                    | \$0(1) |
| <i>levobunolol hcl</i> SOLN .5%                                  | \$0(1) |
| LUMIGAN SOLN .01%  | \$0(2) |
| <i>pilocarpine hcl</i> SOLN 1%, 2%, 4%                           | \$0(1) |
| RHOPRESSA SOLN .02%  | \$0(2) |
| ROCKLATAN DRO  | \$0(2) |
| SIMBRINZA SUS 1-0.2%   | \$0(2) |
| <i>timolol maleate (ophth)</i> SOLG .25%, .5%;<br>SOLN .25%, .5% | \$0(1) |
| VYZULTA SOLN .024%   | \$0(2) |

#### **MISCELLANEOUS**

|  |        |
|--|--------|
| ATROPINE SULFATE SOLN 1%                     | \$0(2) |
| <i>atropine sulfate (ophthalmic)</i> SOLN 1% | \$0(1) |
| CYSTADROPS SOLN .37%                         | \$0(2) |
| CYSTARAN SOLN .44%                           | \$0(2) |
| <i>proparacaine hcl</i> SOLN .5%             | \$0(1) |
| RESTASIS EMUL .05%                           | \$0(2) |
| RESTASIS MULTIDOSE EMUL .05%                 | \$0(2) |
| TYRVAYA SOLN .03mg/act                       | \$0(2) |
| XIIDRA SOLN 5%                               | \$0(2) |

#### **OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR**

##### **OTIC AGENTS**

|                                   |        |
|-----------------------------------|--------|
| <i>acetic acid (otic)</i> SOLN 2% | \$0(1) |
|-----------------------------------|--------|

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|---|---|--|
| <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) |

#### **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 SOLN .02%</i>               | \$0(1) | B/D                        |
| <i>ipratropium bromide (nasal) SOLN .03%, .06%</i> | \$0(1) |                            |

#### **ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES**

|  |        |                              |
|--|--------|------------------------------|
| <i>azelastine hcl SOLN .1%, .15%</i>   | \$0(1) |                              |
| <i>cetirizine hcl SOLN 1mg/ml</i>  | \$0(1) |                              |
| <i>cyproheptadine hcl SYRP 2mg/5ml; TABS 4mg</i>                                   | \$0(2) | PA; PA if 70 years and older |
| <i>diphenhydramine hcl SOLN 50mg/ml</i>  | \$0(1) |                              |
| <i>hydroxyzine hcl SOLN 25mg/ml, 50mg/ml; SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg</i> | \$0(2) | PA; PA if 70 years and older |
| <i>hydroxyzine pamoate CAPS 25mg, 50mg</i>   | \$0(2) | PA; PA if 70 years and older |

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|---|---|--|
|---|---|--|

|  |        |  |
|--|--------|--|
| <i>levocetirizine dihydrochloride SOLN<br/>2.5mg/5ml; TABS 5mg</i> | \$0(1) |  |
|--|--------|--|

#### **BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD**

|   |        |   |
|---|--------|---|
| <i>albuterol sulfate AERS 108mcg/act</i>  | \$0(1) | QL (2 inhalers / 30 days); (generic of Proair HFA)    |
| <i>albuterol sulfate AERS 108mcg/act</i>  | \$0(1) | QL (2 inhalers / 30 days); (generic of Proventil HFA) |
| <i>albuterol sulfate AERS 108mcg/act</i>  | \$0(1) | QL (2 inhalers / 30 days); (generic of Ventolin HFA)  |
| <i>albuterol sulfate NEBU .083%, .63mg/3ml,<br/>1.25mg/3ml, 2.5mg/0.5ml</i>     | \$0(1) | B/D   |
| <i>albuterol sulfate SYRP 2mg/5ml; TABS<br/>2mg, 4mg</i>                        | \$0(1) |   |
| <i>levalbuterol hcl NEBU .31mg/3ml,<br/>.63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml</i> | \$0(1) | B/D   |
| <i>levalbuterol tartrate AERO 45mcg/act</i>                                     | \$0(1) | QL (2 inhalers / 30 days), ST                         |
| <i>SEREVENT DISKUS AEPB 50mcg/dose</i>  | \$0(2) | QL (60 inhalations / 30 days)                         |
| <i>terbutaline sulfate TABS 2.5mg, 5mg</i>                                      | \$0(1) |   |
| <i>VENTOLIN HFA AERS 108mcg/act</i>   | \$0(2) | QL (2 inhalers / 30 days)                             |
| <i>VENTOLIN HFA (INSTITUTIONAL PACK)<br/>AERS 108mcg/act</i>                    | \$0(2) | QL (6 inhalers / 30 days)                             |

#### **COUGH AND COLD**

|  |        |       |
|--|--------|-------|
| <i>benzonatate CAPS 100mg, 150mg, 200mg</i>                            | \$0(3) | NM; * |
| <i>guaifenesin-codeine soln 100-10 mg/5ml</i>                          | \$0(3) | NM; * |
| <i>hydrocod polst-chlorphen polst er susp 10-8<br/>mg/5ml</i>          | \$0(3) | NM; * |
| <i>hydrocodone bitart-homatropine<br/>methylbrom soln 5-1.5 mg/5ml</i> | \$0(3) | NM; * |
| <i>hydrocodone bitart-homatropine<br/>methylbromide tab 5-1.5 mg</i>   | \$0(3) | NM; * |
| <i>hydromet</i>  | \$0(3) | NM; * |
| <i>HYPERSAL NEBU 3.5%</i>  | \$0(3) | NM; * |
| <i>promethazine w/ codeine syrup 6.25-10<br/>mg/5ml</i>                | \$0(3) | NM; * |
| <i>promethazine-dm syrup 6.25-15 mg/5ml</i>                            | \$0(3) | NM; * |
| <i>pseudoephed-bromphen-dm syrup 30-2-10<br/>mg/5ml</i>                | \$0(3) | NM; * |
| <i>sodium chloride (inhalant) NEBU .9%, 3%,<br/>7%</i>                 | \$0(3) | NM; * |

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|---|---|--|
|---|---|--|

### **LEUKOTRIENE MODULATORS**

|  |        |
|--|--------|
| montelukast sodium CHEW 4mg, 5mg;<br>PACK 4mg; TABS 10mg | \$0(1) |
| zafirlukast TABS 10mg, 20mg                              | \$0(1) |

### **MISCELLANEOUS**

|  |        |                          |
|--|--------|--------------------------|
| ACE AERO CLD MIS ENHANCER                                  | \$0(3) | NM; *                    |
| acetylcysteine SOLN 10%, 20%                               | \$0(1) | B/D                      |
| ADULT MASK MIS LARGE                                       | \$0(3) | NM; *                    |
| AERCHMBR PLS MIS FLOW-VU                                   | \$0(3) | NM; *                    |
| AERCHMBR PLS MIS LRG MASK                                  | \$0(3) | NM; *                    |
| AERCHMBR PLS MIS MED MASK                                  | \$0(3) | NM; *                    |
| AERCHMBR PLS MIS SM MASK                                   | \$0(3) | NM; *                    |
| AERCHMBR Z- MIS STAT PLS                                   | \$0(3) | NM; *                    |
| AEROCHAMBER MIS CHAMBER                                    | \$0(3) | NM; *                    |
| AEROCHAMBER MIS MV   | \$0(3) | NM; *                    |
| AEROCHAMBER MIS PLUS                                       | \$0(3) | NM; *                    |
| AEROTRC PLUS MIS   | \$0(3) | NM; *                    |
| AEROVENT MIS PLUS  | \$0(3) | NM; *                    |
| ARALAST NP SOLR 500mg, 1000mg                              | \$0(2) | NDS, NM, LA, PA          |
| BREATHERITE MIS MDI CHMB                                   | \$0(3) | NM; *                    |
| COMPACT SPAC MIS CHAMBER                                   | \$0(3) | NM; *                    |
| COMPACT SPAC MIS LG MASK                                   | \$0(3) | NM; *                    |
| COMPACT SPAC MIS MD MASK                                   | \$0(3) | NM; *                    |
| COMPACT SPAC MIS SM MASK                                   | \$0(3) | NM; *                    |
| cromolyn sodium NEBU 20mg/2ml                              | \$0(1) | B/D                      |
| EASIVENT MIS   | \$0(3) | NM; *                    |
| EASIVENT MIS MASK LG                                       | \$0(3) | NM; *                    |
| EASIVENT MIS MASK MED                                      | \$0(3) | NM; *                    |
| EASIVENT MIS MASK SM                                       | \$0(3) | NM; *                    |
| epinephrine (anaphylaxis) SOAJ<br>.15mg/0.3ml, .3mg/0.3ml  | \$0(1) | (generic of EpiPen)      |
| epinephrine (anaphylaxis) SOAJ<br>.15mg/0.15ml, .3mg/0.3ml | \$0(1) | (generic of Adrenaclick) |
| FASENRA SOSY 30mg/ml                                       | \$0(2) | NDS, NM, LA, PA          |
| FASENRA PEN SOAJ 30mg/ml                                   | \$0(2) | NDS, NM, LA, PA          |
| FLEXICHAMBER MIS   | \$0(3) | NM; *                    |
| FLEXICHAMBER MIS MASK LRG                                  | \$0(3) | NM; *                    |
| FLEXICHAMBER MIS MASK SM                                   | \$0(3) | NM; *                    |
| HOLD CHAMBER MIS ADLT LG                                   | \$0(3) | NM; *                    |
| HOLD CHAMBER MIS MEDIUM                                    | \$0(3) | NM; *                    |
| HOLD CHAMBER MIS SMALL                                     | \$0(3) | NM; *                    |
| INSPIRACHAMB MIS LARGE                                     | \$0(3) | NM; *                    |
| INSPIRACHAMB MIS MEDIUM                                    | \$0(3) | NM; *                    |

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|---|---|--|
| INSPIRACHAMB MIS MOUTHPC                    | \$0(3)  | NM; *  |
| INSPIRACHAMB MIS SMALL                      | \$0(3)  | NM; *  |
| KALYDECO PACK 13.4mg, 25mg, 50mg, 75mg      | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| KALYDECO TABS 150mg                         | \$0(2)  | NDS, QL (60 tabs / 30 days), NM, LA, PA                        |
| LITETOUCH MIS MASK LG                       | \$0(3)  | NM; *  |
| LITETOUCH MIS MASK MD                       | \$0(3)  | NM; *  |
| LITETOUCH MIS MASK SM                       | \$0(3)  | NM; *  |
| MICROCHAMBER MIS                            | \$0(3)  | NM; *  |
| OFEV CAPS 100mg, 150mg                      | \$0(2)  | NDS, QL (60 caps / 30 days), NM, LA, PA                        |
| OPTICHAMBER MIS DIA LG                      | \$0(3)  | NM; *  |
| OPTICHAMBER MIS DIA MD                      | \$0(3)  | NM; *  |
| OPTICHAMBER MIS DIA SM                      | \$0(3)  | NM; *  |
| OPTICHAMBER MIS DIAMOND                     | \$0(3)  | NM; *  |
| ORKAMBI GRA 75-94MG                         | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| ORKAMBI GRA 100-125                         | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| ORKAMBI GRA 150-188                         | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| ORKAMBI TAB 100-125                         | \$0(2)  | NDS, QL (112 tabs / 28 days), NM, LA, PA                       |
| ORKAMBI TAB 200-125                         | \$0(2)  | NDS, QL (112 tabs / 28 days), NM, LA, PA                       |
| <i>pirfenidone</i> CAPS 267mg               | \$0(2)  | NDS, QL (270 caps / 30 days), NM, PA                           |
| <i>pirfenidone</i> TABS 267mg               | \$0(2)  | NDS, QL (270 tabs / 30 days), NM, PA                           |
| <i>pirfenidone</i> TABS 534mg, 801mg        | \$0(2)  | NDS, QL (90 tabs / 30 days), NM, PA                            |
| POCKET CHAMB MIS                            | \$0(3)  | NM; *  |
| PROLASTIN-C SOLN 1000mg/20ml; SOLR 1000mg   | \$0(2)  | NDS, NM, LA, PA  |
| PULMOZYME SOLN 2.5mg/2.5ml                  | \$0(2)  | NDS, NM, PA  |
| RITEFLO MIS                                 | \$0(3)  | NM; *  |
| <i>roflumilast</i> TABS 250mcg, 500mcg      | \$0(1)  |  |
| SILICONE MSK MIS INFANT                     | \$0(3)  | NM; *  |
| SPACE CHAMBR MIS ANTI-STA                   | \$0(3)  | NM; *  |
| SYMDEKO TAB 50-75MG                         | \$0(2)  | NDS, QL (56 tabs / 28 days), NM, LA, PA                        |
| 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)  |  |

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|--|---|--|
| THEO-24 CP24 100mg, 200mg, 300mg,<br>400mg   | \$0(2)  |  |
| <i>theophylline</i> ELIX 80mg/15ml; SOLN<br>80mg/15ml; TB12 100mg, 200mg, 300mg,<br>450mg; TB24 400mg, 600mg | \$0(1)  |  |
| TRIKAFTA PAK 59.5MG  | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| TRIKAFTA PAK 75MG  | \$0(2)  | NDS, QL (56 packs / 28 days), NM, LA, PA                       |
| TRIKAFTA TAB 50-25-37.5MG & 75MG   | \$0(2)  | NDS, QL (84 tabs / 28 days), NM, LA, PA                        |
| TRIKAFTA TAB 100-50-75MG & 150MG   | \$0(2)  | NDS, QL (84 tabs / 28 days), NM, LA, PA                        |
| VORTEX VALVE MIS CHAMBER   | \$0(3)  | NM; *  |
| XOLAIR SOLR 150mg; SOSY 75mg/0.5ml,<br>150mg/ml  | \$0(2)  | NDS, NM, LA, PA  |
| ZEMAIRA SOLR 1000mg  | \$0(2)  | NDS, NM, LA, PA  |

#### ***NASAL STEROIDS - DRUGS TO TREAT ALLERGIES***

|   |        |                             |
|---|--------|-----------------------------|
| <i>flunisolide (nasal)</i> SOLN .025%                   | \$0(1) | QL (3 bottles / 30 days)    |
| <i>fluticasone propionate (nasal)</i> SUSP<br>50mcg/act | \$0(1) | QL (1 bottle / 30 days)     |
| XHANCE EXHU 93mcg/act                                   | \$0(2) | QL (32 mL / 30 days),<br>PA |

#### ***STEROID INHALANTS - DRUGS TO TREAT ASTHMA***

|  |        |                                |
|--|--------|--------------------------------|
| ARNUITY ELLIPTA AEPB 50mcg/act,<br>100mcg/act, 200mcg/act  | \$0(2) | QL (30 inhalations / 30 days)  |
| <i>budesonide (inhalation)</i> SUSP .25mg/2ml,<br>.5mg/2ml | \$0(1) | B/D                            |
| FLOVENT DISKUS AEPB 50mcg/blist                            | \$0(2) | QL (180 inhalations / 30 days) |
| FLOVENT DISKUS AEPB 100mcg/blist,<br>250mcg/blist          | \$0(2) | QL (240 inhalations / 30 days) |
| FLOVENT HFA AERO 44mcg/act,<br>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) |

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|---|---|--|
| 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 50-25MCG                   | \$0(2)  | QL (60 blisters / 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 (3 inhalers / 30 days)                                      |
| SYMBICORT AER 160-4.5                       | \$0(2)  | QL (3 inhalers / 30 days)                                      |

## **TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS**

### **DERMATOLOGY, ACNE**

|   |        |                             |
|---|--------|-----------------------------|
| accutane CAPS 10mg, 20mg, 30mg, 40mg                | \$0(1) | PA                          |
| amnesteem CAPS 10mg, 20mg, 40mg                     | \$0(1) | PA                          |
| benzoyl peroxide-erythromycin gel 5-3%              | \$0(1) | QL (46.6 gm / 30 days)      |
| claravis CAPS 10mg, 20mg, 30mg, 40mg                | \$0(1) | PA                          |
| clindamycin phosphate (topical) GEL 1%              | \$0(1) | QL (75 gm / 30 days)        |
| clindamycin phosphate (topical) LOTN 1%;<br>SOLN 1% | \$0(1) | QL (60 mL / 30 days)        |
| ery PADS 2%   | \$0(1) | QL (60 pledgets / 30 days)  |
| erythromycin (acne aid) SOLN 2%                     | \$0(1) | QL (60 mL / 30 days)        |
| isotretinoin CAPS 10mg, 20mg, 30mg,<br>40mg         | \$0(1) | PA                          |
| sulfacetamide sodium (acne) LOTN 10%                | \$0(1) | QL (118 mL / 30 days)       |
| tretinoin CREA .025%, .05%, .1%; GEL<br>.01%, .025% | \$0(1) | QL (45 gm / 30 days),<br>PA |
| zenatane CAPS 10mg, 20mg, 30mg, 40mg                | \$0(1) | PA                          |

### **DERMATOLOGY, ANTIBIOTICS**

|  |        |                         |
|--|--------|-------------------------|
| gentamicin sulfate (topical) CREA .1%;<br>OINT .1% | \$0(1) | QL (30 gm / 30 days)    |
| mupirocin OINT 2%                                  | \$0(1) | QL (220 gm / 30 days)   |
| silver sulfadiazine CREA 1%                        | \$0(1) |                         |
| ssd CREA 1%  | \$0(1) |                         |
| SULFAMYLYON CREA 85mg/gm                           | \$0(2) | QL (453.6 gm / 30 days) |

### **DERMATOLOGY, ANTIFUNGALS**

|                                |        |                      |
|--------------------------------|--------|----------------------|
| ciclopirox olamine CREA .77%   | \$0(1) | QL (90 gm / 30 days) |
| ciclopirox olamine SUSP .77%   | \$0(1) | QL (60 mL / 30 days) |
| clotrimazole (topical) CREA 1% | \$0(1) | QL (45 gm / 30 days) |

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|--|---|--|
| <i>clotrimazole (topical) SOLN 1%</i>                                      | \$0(1)  | QL (30 mL / 30 days)   |
| <i>clotrimazole w/ betamethasone cream 1-0.05%</i>                         | \$0(1)  | QL (45 gm / 30 days)   |
| <i>ketoconazole (topical) CREA 2%</i>                                      | \$0(1)  | QL (60 gm / 30 days)   |
| <i>nyamyc POWD 100000unit/gm</i>   | \$0(1)  | QL (60 gm / 30 days)   |
| <i>nystatin (topical) CREA 100000unit/gm; OINT 100000unit/gm</i>           | \$0(1)  | QL (30 gm / 30 days)   |
| <i>nystatin (topical) POWD 100000unit/gm</i>                               | \$0(1)  | QL (60 gm / 30 days)   |
| <i>nystop POWD 100000unit/gm</i>   | \$0(1)  | QL (60 gm / 30 days)   |
| <b><i>DERMATOLOGY, ANTIPOSIATICS</i></b>                                   |   |  |
| <i>acitretin CAPS 10mg, 17.5mg, 25mg</i>                                   | \$0(1)  | PA   |
| <i>calcipotriene OINT .005%</i>  | \$0(1)  | QL (120 gm / 30 days), PA                                      |
| <i>calcipotriene SOLN .005%</i>  | \$0(1)  | QL (120 mL / 30 days), PA                                      |
| <i>calcitrene OINT .005%</i>   | \$0(1)  | QL (120 gm / 30 days), PA                                      |
| <i>tazarotene CREA .1%</i>   | \$0(1)  | QL (60 gm / 30 days), PA                                       |
| <i>TAZORAC CREA .05%</i>   | \$0(2)  | QL (60 gm / 30 days), PA                                       |
| <b><i>DERMATOLOGY, ANTISEBORRHEICS</i></b>                                 |   |  |
| <i>ketoconazole (topical) SHAM 2%</i>                                      | \$0(1)  | QL (120 mL / 30 days)  |
| <i>selenium sulfide LOTN 2.5%</i>  | \$0(1)  |  |
| <b><i>DERMATOLOGY, CORTICOSTEROIDS</i></b>                                 |   |  |
| <i>ala-cort CREA 1%, 2.5%</i>  | \$0(1)  |  |
| <i>alclometasone dipropionate CREA .05%; OINT .05%</i>                     | \$0(1)  | QL (60 gm / 30 days)   |
| <i>betamethasone dipropionate (topical) CREA .05%; OINT .05%</i>           | \$0(1)  | QL (120 gm / 30 days)  |
| <i>betamethasone dipropionate (topical) LOTN .05%</i>                      | \$0(1)  | QL (120 mL / 30 days)  |
| <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%</i>                                   | \$0(1)  | QL (60 gm / 30 days)   |

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|---|---|--|
| ENSTILAR AER  | \$0(2)  | QL (120 gm / 30 days), PA                                      |
| <i>fluocinolone acetonide</i> CREA .01%   | \$0(1)  | QL (60 gm / 30 days)   |
| <i>fluocinolone acetonide</i> CREA .025%; OINT .025%  | \$0(1)  | QL (120 gm / 30 days)  |
| <i>fluocinolone acetonide</i> OIL .01%  | \$0(1)  | QL (118.28 mL / 30 days)                                       |
| <i>fluocinolone acetonide</i> SOLN .01%   | \$0(1)  | QL (90 mL / 30 days)   |
| <i>fluocinonide</i> CREA .05%   | \$0(1)  | QL (120 gm / 30 days)  |
| <i>fluocinonide</i> GEL .05%; OINT .05%   | \$0(1)  | QL (60 gm / 30 days)   |
| <i>fluocinonide</i> SOLN .05%   | \$0(1)  | QL (60 mL / 30 days)   |
| <i>fluocinonide emulsified base</i> CREA .05%   | \$0(1)  | QL (120 gm / 30 days)  |
| <i>fluticasone propionate</i> CREA .05%; OINT .005%   | \$0(1)  |  |
| <i>halobetasol propionate</i> CREA .05%; OINT .05%  | \$0(1)  | QL (50 gm / 30 days)   |
| <i>hydrocortisone (topical)</i> CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%                             | \$0(1)  |  |
| <i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%  | \$0(1)  |  |
| <i>triamcinolone acetonide (topical)</i> CREA .1%   | \$0(1)  | QL (454 gm / 30 days)  |
| <i>triamcinolone acetonide (topical)</i> CREA .025%, .5%; LOTN .025%, .1%; OINT .025%, .1%, .5% | \$0(1)  |  |
| <b><i>DERMATOLOGY, LOCAL ANESTHETICS</i></b>  |   |  |
| <i>glydo</i> PRSY 2%  | \$0(1)  | QL (60 mL / 30 days), PA                                       |
| <i>lidocaine</i> OINT 5%  | \$0(1)  | QL (50 gm / 30 days), PA                                       |
| <i>lidocaine</i> PTCH 5%  | \$0(1)  | QL (3 patches / 1 day), PA                                     |
| <i>lidocaine hcl</i> SOLN 4%  | \$0(1)  | QL (50 mL / 30 days), PA                                       |
| <i>lidocaine-prilocaine cream</i> 2.5-2.5%  | \$0(1)  | QL (30 gm / 30 days), PA                                       |
| <b><i>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</i></b>                               |   |  |
| <i>bexarotene (topical)</i> GEL 1%  | \$0(2)  | NDS, QL (60 gm / 30 days), NM, PA                              |
| <i>COLEMAN INSECT REPELLENT/</i> AERO 25%   | \$0(3)  | NM; *  |
| <i>COLEMN BOTAN LIQ INSECT</i>  | \$0(3)  | NM; *  |
| <i>COLEMN INSEC LIQ SKINSMAR</i>  | \$0(3)  | NM; *  |
| <i>COLEMN INSEC SPR SKINSMAR</i>  | \$0(3)  | NM; *  |
| <i>CUTTER BACKWOODS</i> AERO 25%; LIQD 25%  | \$0(3)  | NM; *  |

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|--|---|--|
| CUTTER BACKWOODS DRY AERO 25%                            | \$0(3)  | NM; *  |
| CUTTER LEMON LIQ EUCALYPT                                | \$0(3)  | NM; *  |
| <i>diclofenac sodium (topical) GEL 1%</i>                | \$0(1)  | QL (1000 gm / 30 days)   |
| <i>fluorouracil (topical) CREA 5%</i>                    | \$0(1)  | QL (40 gm / 30 days)   |
| <i>fluorouracil (topical) SOLN 2%, 5%</i>                | \$0(1)  | QL (10 mL / 30 days)   |
| <i>hydrocortisone (rectal) CREA 1%, 2.5%</i>             | \$0(1)  |  |
| <i>imiquimod CREA 5%</i>                                 | \$0(1)  | QL (24 packets / 30 days)                                      |
| <i>lactic acid (ammonium lactate) CREA 12%; LOTN 12%</i> | \$0(1)  |  |
| <i>metronidazole (topical) CREA .75%; GEL .75%</i>       | \$0(1)  | QL (45 gm / 30 days)   |
| <i>metronidazole (topical) LOTN .75%</i>                 | \$0(1)  | QL (59 mL / 30 days)   |
| NATRAPEL 12-HOUR TICK & I AERO 20%                       | \$0(3)  | NM; *  |
| OFF DEEP WOODS AERO 25%; LIQD 25%                        | \$0(3)  | NM; *  |
| OFF DEEP WOODS DRY AERO 25%                              | \$0(3)  | NM; *  |
| OFF DEEP WOODS SPORTSMEN AERO 30%; LIQD 25%              | \$0(3)  | NM; *  |
| PANRETIN GEL .1%   | \$0(2)  | NDS, QL (60 gm / 30 days), PA                                  |
| <i>podofilox SOLN .5%</i>                                | \$0(1)  | QL (7 mL / 28 days)  |
| <i>procto-med hc CREA 2.5%</i>                           | \$0(1)  |  |
| <i>proctosol hc CREA 2.5%</i>                            | \$0(1)  |  |
| <i>proctozone-hc CREA 2.5%</i>                           | \$0(1)  |  |
| RECTIV OINT .4%  | \$0(2)  | QL (30 gm / 30 days)   |
| REPEL HUNTERS FORMULA AERO 25%                           | \$0(3)  | NM; *  |
| REPEL LEMON SPR INSECT                                   | \$0(3)  | NM; *  |
| REPEL SPORTSMEN AERO 25%                                 | \$0(3)  | NM; *  |
| REPEL SPORTSMEN DRY AERO 25%                             | \$0(3)  | NM; *  |
| REPEL SPORTSMEN MAX AERO 40%                             | \$0(3)  | NM; *  |
| SAWYER PREMIUM INSECT REP LIQD 20%                       | \$0(3)  | NM; *  |
| <i>tacrolimus (topical) OINT .03%, .1%</i>               | \$0(1)  | QL (100 gm / 30 days)  |
| ULTRATHON INSECT REPELLEN AERO 25%                       | \$0(3)  | NM; *  |
| VALCHLOR GEL .016%                                       | \$0(2)  | NDS, QL (60 gm / 30 days), NM, LA, PA                          |

#### **DERMATOLOGY, SCABICIDES AND PEDICULIDES**

|                           |        |                      |
|---------------------------|--------|----------------------|
| <i>malathion LOTN .5%</i> | \$0(1) | QL (59 mL / 30 days) |
| <i>permethrin CREA 5%</i> | \$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) SOLN .9%</i> | \$0(1) |                               |

Updated on 12/01/2023

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

| <b>Drug Name<br/>(By Medical Condition)</b>                 | <b>WHAT THE<br/>DRUG WILL<br/>COST YOU<br/>(TIER LEVEL)</b> | <b>NECESSARY ACTIONS<br/>RESTRICTIONS OR<br/>LIMITS ON USE</b> |
|---|---|--|
| <i>water for irrigation, sterile irrigation soln</i>        | \$0(1)  |  |
| <b>MOUTH/THROAT/DENTAL AGENTS</b>                           |   |  |
| <i>cevimeline hcl CAPS 30mg</i>                             | \$0(1)  |  |
| <i>chlorhexidine gluconate (mouth-throat)<br/>SOLN .12%</i> | \$0(1)  |  |
| <i>clotrimazole TROC 10mg</i>                               | \$0(1)  | QL (150 lozenges / 30 days)                                    |
| <i>lidocaine hcl (mouth-throat) SOLN 2%</i>                 | \$0(1)  |  |
| <i>nystatin (mouth-throat) SUSP<br/>100000unit/ml</i>       | \$0(1)  |  |
| <i>periogard SOLN .12%</i>                                  | \$0(1)  |  |
| <i>pilocarpine hcl (oral) TABS 5mg, 7.5mg</i>               | \$0(1)  |  |
| <i>triamcinolone acetonide (mouth) PSTE .1%</i>             | \$0(1)  |  |

### **PART B**

#### **DIABETIC METERS AND TEST STRIPS**

|                           |     |    |
|---------------------------|-----|----|
| DEXCOM G6 MIS RECEIVER    | \$0 | PA |
| DEXCOM G6 MIS SENSOR      | \$0 | PA |
| DEXCOM G6 MIS TRANSMIT    | \$0 | PA |
| FREESTY LIBR KIT 2 SENSOR | \$0 | PA |
| FREESTY LIBR MIS 2 READER | \$0 | PA |
| FREESTYLE KIT SENSOR      | \$0 | PA |
| FREESTYLE MIS READER      | \$0 | PA |
| TRUE METRIX KIT AIR       | \$0 |    |
| TRUE METRIX KIT METER     | \$0 |    |
| TRUE METRIX STRIPS        | \$0 |    |

Updated on 12/01/2023

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

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