2019 Formulary/ Formulario

(List of Covered Drugs) / (Lista de medicinas cubiertas)

Washington

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MOLINA® HEALTHCARE

Your Extended Family.

09162019

MOLINA HEALTHCARE

Your Extended Family.

Non-Discrimination Notification
Molina Healthcare

Molina Healthcare (Molina) complies with all Federal civil rights laws that relate to healthcare services. Molina offers healthcare services to all members and does not discriminate based on race, color, national origin, age, disability, or sex.
Molina also complies with applicable state laws and does not discriminate on the basis of creed, gender, gender expression or identity, sexual orientation, marital status, religion, honorably discharged veteran or military status, or the use of a trained dog guide or service animal by a person with a disability.

To help you talk with us, Molina provides services free of charge:

- Aids and services to people with disabilities
  - Skilled sign language interpreters
  - Written material in other formats (large print, audio, accessible electronic formats, Braille)
- Language services to people who speak another language or have limited English skills
  - Skilled interpreters
  - Written material translated in your language

If you need these services, contact Molina Member Services. The number is on the back of your Member ID card (TTY: 711).

If you think that Molina failed to provide these services or discriminated based on your race, color, national origin, age, disability, or sex, you can file a complaint. You can file a complaint in person, by mail, fax, or email. If you need help writing your complaint, we will help you. Call our Civil Rights Coordinator at (866) 606-3889, or TTY: 711.

Mail your complaint to: Civil Rights Coordinator, 200 Oceangate, Long Beach, CA 90802

You can also email your complaint to civil.rights@molinahealthcare.com. Or, fax your complaint.

FAX Numbers for Molina Civil Rights Coordinator									
CA	(844) 479-5337	MI	(248) 925-1799	OH	(866) 713-1891	UT	(866) 472-0589	WI	(888) 560-2043
FL	(877) 508-5748	NM	(505) 342-0583	TX	(877) 816-6416	WA	(800) 816-3778		

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Complaint forms are available at http://www.hhs.gov/ocr/office/file/index.html. You can mail it to: U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201

You can also send it to a website through the Office for Civil Rights Complaint Portal at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf.

If you need help, call (800) 368-1019; TTY (800) 537-7697.

You have the right to get this information in a different format, such as audio, Braille, or large font due to special needs or in your language at no additional cost.

Usted tiene derecho a recibir esta información en un formato distinto, como audio, braille, o letra grande, debido a necesidades especiales; o en su idioma sin costo adicional.

ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call Member Services. The number is on the back of your Member ID card. (English)

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame a Servicios para Miembros. El número de teléfono está al reverso de su tarjeta de identificación del miembro. (Spanish)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電會員服務。電話號碼載於您的會員證背面。(Chinese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Hãy gọi Dịch vụ Thành viên. Số điện thoại có trên mặt sau thẻ ID Thành viên của bạn. (Vietnamese)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa Mga Serbisyo sa Miyembro. Makikita ang numero sa likod ng iyong ID card ng Miyembro. (Tagalog)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 회원 서비스로 전화하십시오. 전화번호는 회원 ID 카드 뒷면에 있습니다. (Korean)

تنبيه: إذا كنت تستخدم اللغة العربية، تتاح خدمات المساعدة اللغوية، مجانًا، لك. اتصل بقسم خدمات الأعضاء. ورقم الهاتف هذا موجود خلف بطاقة تعريف العضو الخاصة بك. (Arabic)

ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele Sèvis Manm. W ap jwenn nimewo a sou do kat idantifikasyon manm ou a. (French Creole)

ВНИМАНИЕ: Если вы говорите на русском языке, вы можете бесплатно воспользоваться услугами переводчика. Позвоните в Отдел обслуживания участников. Номер телефона указан на обратной стороне вашей ID-карты участника. (Russian)

ՈՒՇԱԴՐՈՒԹՅՈՒՆ. Եթե դուք խոսում եք հայերեն, կարող եք անվճար օգտվել լեզվի օժանդակ ծառայություններից: Զանգահարե՛ք Հաճախորդների սպասարկման բաժին: Հեռախոսի համարը նշված է ձեր Անդամակցության նույնականացման քարտի ետևի մասում: (Armenian)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。
会員サービスまでお電話ください。電話番号は会員IDカードの裏面に記載されております。(Japanese)

توجه؛ اگر به زبان فارسی صحبت می‌کنید، خدمات کمک زبانی، بدون هزینه در دسترس شما هستند. با خدمات اعضا تماس بگیرید. شماره تلفن روی پشت کارت شناسایی عضویت شما درج شده است. (Farsi)

ਧਿਆਨ ਦਿਓ: ਜੇਕਰ ਤੁਸੀਂ ਪੰਜਾਬੀ ਬੋਲਦੇ ਹੋ, ਤਾਂ ਤੁਹਾਡੇ ਲਈ ਭਾਸ਼ਾ ਸਹਾਇਤਾ ਸੇਵਾਵਾਂ ਮੁਫ਼ਤ ਉਪਲਬਧ ਹਨ। ਮੈਂਬਰ ਸਰਵਿਸਿਜ (Member Services) ਨੂੰ ਫੋਨ ਕਰੋ। ਨੰਬਰ ਤੁਹਾਡੇ Member ID (ਮੈਂਬਰ ਆਈ.ਡੀ.) ਕਾਰਡ ਦੇ ਪਿਛਲੇ ਪਾਸੇ ਹੈ। (Punjabi)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Wenden Sie sich telefonisch an die Mitgliederbetreuungen. Die Nummer finden Sie auf der Rückseite Ihrer Mitgliedskarte. (German)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez les Services aux membres. Le numéro figure au dos de votre carte de membre. (French)

LUS CEEV: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Cov npawb xov tooj nyob tom qab ntawm koj daim npav tswv cuab. (Hmong)

MOLINA HEALTHCARE
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Effective January 1, 2018
Efectivo 2018 1 de enero

Cost sharing reduction for any prescription drugs obtained by you through the use of a discount card or coupon provided by a prescription drug manufacturer, or any other form of prescription drug third party cost-sharing assistance, will not apply toward any Deductible, or the Annual Out-of-Pocket Maximum under Your Plan.

Tenga en cuenta que los pagos de costo compartido realizados por un tercero por cualquier medicamento recetado que usted obtenga a través del uso de una tarjeta o cupón de descuento provisto por un fabricante de medicamentos recetados no se aplicará para ningún deducible, o para su máximo anual de gastos de su bolsillo bajo su plan. Solamente los pagos realizados por usted se aplicarán a cualquier deducible o su máximo anual de gastos de su bolsillo bajo su plan.

Effective January 1, 2019
Efectivo 2018 1 de enero

FDA Approved Contraceptives

In accordance with Washington State law (SB 6219), Molina covers all FDA approved contraceptives, not just those identified on this formulary list. For any questions, you can contact our Member Services department at 888-858-3492.

Anticonceptivos aprobados por la FDA

Conformidad con la ley de Washington (SB 6219), Molina cubre todos los anticonceptivos aprobados de la FDA, no solo los identificados en esta lista del formulario. Para preguntas, puede llamar el departamento de Servicios para Miembros al 888-858-3492.

Drug Name	Drug Tier	Requirements/Limits
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
Amphetamines		
amphetamine-dextroamphetamine cap er 24hr 5 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine cap er 24hr 10 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine cap er 24hr 15 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine cap er 24hr 20 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine cap er 24hr 25 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine cap er 24hr 30 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 6-18
amphetamine-dextroamphetamine tab 5 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 7.5 mg	Tier 1	QL (150 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 10 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 12.5 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 15 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 20 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18 and over
amphetamine-dextroamphetamine tab 30 mg	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and over

PA - Prior Authorization **ST** - Step Therapy **AGE** - Age Limit
QL – Quantity Limits **OTC** – Over the Counter **MAIL** – Mail Order Available
MED - Max 90 mg Morphine EQ Dose Per Day
Tier 1 = Generics; Low cost preferred brand
Tier 2 = Non-Preferred generics; Preferred brand name drugs
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PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
dextroamphetamine sulfate cap er 24hr 5 mg	Tier 2	QL (300 caps / 30 days), PA; AGE; Covered for ages 18 and over
dextroamphetamine sulfate cap er 24hr 10 mg	Tier 2	QL (180 caps / 30 days), PA; AGE; Covered for ages 18 and over
dextroamphetamine sulfate cap er 24hr 15 mg	Tier 2	QL (120 caps / 30 days), PA; AGE; Covered for ages 18 and over
dextroamphetamine sulfate tab 5 mg	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
dextroamphetamine sulfate tab 10 mg	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
methamphetamine hcl tab 5 mg	Tier 2	PA; AGE; Covered for ages 18 and over
VYVANSE CAP 20MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 30MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 40MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 50MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 60MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
VYVANSE CAP 70MG	Tier 3	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
zenzedi tab 5mg	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18

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Drug Name	Drug Tier	Requirements/Limits
zenzedi tab 10mg	Tier 1	QL (180 tabs / 30 days); AGE; Covered for ages 3-18
Anorexiants Non-Amphetamine		
phendimetrazine tartrate tab 35 mg	Tier 1	
Attention-Deficit/Hyperactivity Disorder (ADHD) Agents		
atomoxetine hcl cap 10 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 18 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 25 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 40 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 60 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 80 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
atomoxetine hcl cap 100 mg (base equiv)	Tier 2	QL (30 caps / 30 days); AGE; MAIL; Covered for ages 6-18
guanfacine hcl tab er 24hr 1 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 18 and over
guanfacine hcl tab er 24hr 2 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 18 and over
guanfacine hcl tab er 24hr 3 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 18 and over
guanfacine hcl tab er 24hr 4 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 18 and over

Drug Name	Drug Tier	Requirements/Limits
Miscellaneous		
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	Tier 1	QL (120 ml in lifetime); AGE; Covered for ages 1 and over
Stimulants - Misc.		
armodafinil tab 50 mg	Tier 1	PA; AGE; Covered for ages 64 and over
armodafinil tab 150 mg	Tier 1	PA; AGE; Covered for ages 64 and over
armodafinil tab 200 mg	Tier 1	PA
armodafinil tab 250 mg	Tier 1	PA; AGE; Covered for ages 64 and over
dexmethylphenidate hcl tab 2.5 mg	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and over
dexmethylphenidate hcl tab 5 mg	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and over
dexmethylphenidate hcl tab 10 mg	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 18 and over
metadate tab 20mg er	Tier 2	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 10 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 20 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 24hr 10 mg (la)	Tier 2	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18
methylphenidate hcl cap er 24hr 20 mg (la)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 24hr 30 mg (la)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 24hr 40 mg (la)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18

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Drug Name	Drug Tier	Requirements/Limits
methylphenidate hcl cap er 30 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 40 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 50 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl cap er 60 mg (cd)	Tier 2	QL (30 caps / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl soln 5 mg/5ml	Tier 2	QL (450 mL / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl soln 10 mg/5ml	Tier 2	QL (900 mL / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab 5 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab 10 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab 20 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er 10 mg	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er 20 mg	Tier 2	QL (90 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er 24hr 36 mg	Tier 2	QL (60 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er osmotic release (osm) 18 mg	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er osmotic release (osm) 27 mg	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18

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Drug Name	Drug Tier	Requirements/Limits
methylphenidate hcl tab er osmotic release (osm) 36 mg	Tier 2	QL (60 tabs / 30 days); AGE; Covered for ages 6-18
methylphenidate hcl tab er osmotic release (osm) 54 mg	Tier 2	QL (30 tabs / 30 days); AGE; Covered for ages 6-18
modafinil tab 100 mg	Tier 2	QL (30 tabs / 30 days), PA; AGE; Covered for ages 6-64
modafinil tab 200 mg	Tier 2	QL (60 tabs / 30 days), PA
RITALIN LA CAP 10MG	Tier 2	QL (30 caps / 30 days), PA; AGE; Covered for ages 6-18

ALTERNATIVE MEDICINES

Alternative Medicine - M's

melatonin cap 3 mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
melatonin cap 5 mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
MELATONIN LIQ 1MG/4ML	Tier 1	OTC, QL (600 mL / 30 days); MAIL
melatonin tab 1 mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tab 3 mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tab 5 mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tab 5mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tab 300 mcg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tab er 10 mg	Tier 1	OTC; MAIL
melatonin tab max st	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
melatonin tablet disintegrating 5 mg	Tier 1	OTC; MAIL
pa melatonin tab 5mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL
ra melatonin tab 5mg	Tier 1	OTC, QL (30 tabs / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
Alternative Medicine Combinations		
melatin tab 3-1mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
melatonin tab vit b-6	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
melatonin tr tab /vit-b6	Tier 1	OTC; MAIL
melatonin-pyridoxine tab 3-2 mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
ra melatonin tab 3mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
AMINOGLYCOSIDES		
Aminoglycosides		
neomycin sulfate tab 500 mg	Tier 1	QL (720 tabs / 30 days)
paromomycin sulfate cap 250 mg	Tier 2	
tobramycin nebu soln 300 mg/5ml	Tier 4	PA
ANALGESICS - ANTI-INFLAMMATORY		
Anti-TNF-alpha - Monoclonoal Antibodies		
HUMIRA INJ 10/0.1ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 10MG/0.2	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 20/0.2ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA INJ 40/0.4ML	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA KIT 20MG/0.4	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA KIT 40MG/0.8	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA PEDIA INJ CROHNS	Tier 4	QL (2.16 injections / 30 days), PA; Preferred Brand
HUMIRA PEN INJ 40/0.4ML	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand

Drug Name	Drug Tier	Requirements/Limits
HUMIRA PEN INJ 40MG/0.8	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN INJ CD/UC/HS	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN INJ PS/UV	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN KIT CD/UC/HS	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
HUMIRA PEN KIT PS/UV	Tier 4	QL (2.16 pens / 30 days), PA; Preferred Brand
SIMPONI INJ 50/0.5ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
SIMPONI INJ 100MG/ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
Gold Compounds		
RIDAURA CAP 3MG	Tier 3	QL (90 caps / 30 days), PA; MAIL
Interleukin-1 Receptor Antagonist (IL-1Ra)		
KINERET INJ	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
Interleukin-6 Receptor Inhibitors		
ACTEMRA INJ 80MG/4ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
ACTEMRA INJ 162/0.9	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands

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Drug Name	Drug Tier	Requirements/Limits
ACTEMRA INJ 200/10ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
ACTEMRA INJ 400/20ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
KEVZARA INJ 150/1.14	Tier 4	PA; Preferred Brand
KEVZARA INJ 200/1.14	Tier 4	PA; Preferred Brand
Nonsteroidal Anti-inflammatory Agents (NSAIDs)		
addaprin tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
advil jr st tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
advil jr str chw 100mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
all day pain tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
all day relf tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
celecoxib cap 50 mg	Tier 1	QL (60 caps / 30 days), PA; MAIL; Covered for ages 65 and over
celecoxib cap 100 mg	Tier 1	QL (120 caps / 30 days), PA; MAIL
celecoxib cap 200 mg	Tier 1	QL (60 caps / 30 days), PA; MAIL
celecoxib cap 400 mg	Tier 1	QL (120 caps / 30 days), PA; MAIL
cvs ibuprof dro 50/1.25	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
diclofenac potassium tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
diclofenac sodium tab delayed release 25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
diclofenac sodium tab delayed release 50 mg	Tier 1	QL (90 tabs / 30 days); MAIL
diclofenac sodium tab delayed release 75 mg	Tier 1	QL (60 ea / 30 days); MAIL
diclofenac sodium tab er 24hr 100 mg	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
dyspel tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
eq ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
etodolac tab 400 mg	Tier 1	QL (90 tabs / 30 days); MAIL
etodolac tab 500 mg	Tier 1	QL (90 tabs / 30 days); MAIL
fenoprofen calcium tab 600 mg	Tier 1	QL (120 tabs / 30 days); MAIL
flanax pain tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
flurbiprofen tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
flurbiprofen tab 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
genpril tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
hm ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
i-prin tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ibu-drops dro 40mg/ml	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
ibu-drops dro 50/1.25	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
ibuprfn liqd cap 200mg	Tier 1	OTC; MAIL
ibuprofen cap 200 mg	Tier 1	OTC; MAIL
ibuprofen ch sus 100/5ml	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
ibuprofen dro 50/1.25	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
ibuprofen ib chw 100mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
ibuprofen ib tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ibuprofen jr chw 100mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
ibuprofen js chw 100mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
ibuprofen tab 200 mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ibuprofen tab 400 mg	Tier 1	QL (120 tabs / 30 days); MAIL
ibuprofen tab 600 mg	Tier 1	QL (120 tabs / 30 days); MAIL
ibuprofen tab 800 mg	Tier 1	QL (120 tabs / 30 days); MAIL
indomethacin cap 25 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
indomethacin cap 50 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
ketoprofen cap 50 mg	Tier 1	QL (120 caps / 30 days); MAIL
ketoprofen cap 75 mg	Tier 1	QL (120 caps / 30 days); MAIL
ketorolac tromethamine tab 10 mg	Tier 1	QL (Max day supply 5; Max 4 per day); AGE; MAIL; covered for ages 64 and over
kls ibuprofn tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
kls naproxen tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ks ibuprofen cap 200mg	Tier 1	OTC; MAIL
meclofenamate sodium cap 50 mg	Tier 1	QL (120 caps / 30 days), PA; MAIL
meclofenamate sodium cap 100 mg	Tier 1	QL (120 caps / 30 days), PA; MAIL
medi-profen cap 200mg	Tier 1	OTC; MAIL
medi-profen sus 40mg/ml	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
medi-profen sus 100/5ml	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
medi-profen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
mediproxen tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
mefenamic acid cap 250 mg	Tier 2	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
meloxicam tab 7.5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
meloxicam tab 15 mg	Tier 1	QL (30 tabs / 30 days); MAIL
motrin ib tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
nabumetone tab 500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
nabumetone tab 750 mg	Tier 1	QL (120 tabs / 30 days); MAIL
naproxen dr tab 375mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen dr tab 500mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen sod tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
naproxen sodium tab 275 mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen sodium tab 550 mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen susp 125 mg/5ml	Tier 2	QL (3000 mL / 30 days); MAIL
naproxen tab 250 mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen tab 375 mg	Tier 1	QL (90 tabs / 30 days); MAIL
naproxen tab 500 mg	Tier 1	QL (90 tabs / 30 days); MAIL
oxaprozin tab 600 mg	Tier 2	QL (90 tabs / 30 days), PA; MAIL
pamprin tab 220mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
piroxicam cap 10 mg	Tier 1	QL (120 caps / 30 days), PA; MAIL
piroxicam cap 20 mg	Tier 1	QL (60 caps / 30 days), PA; MAIL
provil tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
px ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
px profen ib dro 50/1.25	Tier 1	OTC, QL (4800 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
px profen ib sus 100/5ml	Tier 1	OTC, QL (4800 mL / 30 days); MAIL
qc ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ra ibuprofen cap 200mg	Tier 1	OTC; MAIL
ra ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sb ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sm ibuprofen cap 200mg	Tier 1	OTC; MAIL
sm ibuprofen tab 100mg jr	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sm ibuprofen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sulindac tab 150 mg	Tier 1	QL (90 tabs / 30 days); MAIL
sulindac tab 200 mg	Tier 1	QL (90 tabs / 30 days); MAIL
tolmetin sodium cap 400 mg	Tier 1	QL (120 caps / 30 days); MAIL
tolmetin sodium tab 200 mg	Tier 1	QL (270 tabs / 30 days); MAIL
tolmetin sodium tab 600 mg	Tier 1	QL (90 tabs / 30 days); MAIL
wal-profen cap 200mg	Tier 1	OTC; MAIL
wal-profen tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
Pyrimidine Synthesis Inhibitors		
leflunomide tab 10 mg	Tier 2	QL (30 tabs / 30 days); MAIL
leflunomide tab 20 mg	Tier 2	QL (30 tabs / 30 days); MAIL
Soluble Tumor Necrosis Factor Receptor Agents		
ENBREL INJ 25/0.5ML	Tier 4	QL (8.235 syringes / 30 days), PA; Preferred Brand
ENBREL INJ 25MG	Tier 4	QL (4.2 syringes / 30 days), PA; Preferred Brand

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Drug Name	Drug Tier	Requirements/Limits
ENBREL INJ 50MG/ML	Tier 4	QL (4.286 syringes / 30 days), PA; Preferred Brand
ENBREL MINI INJ 50MG/ML	Tier 4	QL (4.286 injections / 30 days), PA; Preferred Brand
ENBREL SRCLK INJ 50MG/ML	Tier 4	QL (4.2 syringes / 30 days), PA; Preferred Brand
ANALGESICS - NonNarcotic		
Analgesic Combinations		
butalbital tab cpd	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 64 and over
butalbital-acetaminophen tab 50-325 mg	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
butalbital-acetaminophen-caffeine cap 50-325-40 mg	Tier 1	QL (60 caps / 30 days); MAIL
butalbital-acetaminophen-caffeine tab 50-325-40 mg	Tier 1	QL (180 ea / 30 days); MAIL
butalbital-acetaminophen-caffeine tab 50-325-40 mg	Tier 1	QL (180 tabs / 30 days); MAIL
butalbital-aspirin-caffeine cap 50-325-40 mg	Tier 1	QL (60 caps / 30 days); AGE; Covered for ages 64 and over
butalbital-aspirin-caffeine tab 50-325-40 mg	Tier 1	QL (60 tabs / 30 days); AGE; Covered for ages 64 and over
capacet cap	Tier 1	QL (60 caps / 30 days); MAIL
marten-tab tab 50-325mg	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
zebutal cap	Tier 1	QL (60 caps / 30 days); MAIL
Analgesics Other		
acephen sup 120mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
acephen sup 325mg	Tier 1	OTC, QL (360 supp / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
acephen sup 650mg	Tier 1	OTC, QL (180 supp / 30 days); MAIL
acetam melts tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
acetamin cap 500mg	Tier 1	OTC, QL (240 caps / 30 days); MAIL
acetamin liq 500/15ml	Tier 1	OTC; MAIL
acetamin tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
acetaminophe tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
acetaminophen soln 160 mg/5ml	Tier 1	OTC; MAIL
acetaminophen suppos 120 mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
acetaminophen suppos 650 mg	Tier 1	OTC, QL (180 supp / 30 days); MAIL
acetaminophen tab 325 mg	Tier 1	OTC, QL (360 ea / 30 days); MAIL
acetaminophen tab 325 mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
acetaminophen tab er 650 mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
acetaminophn sus 325mg	Tier 1	OTC; MAIL
acetaminophn tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
aminofen tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
aminofen tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
APAP 500 LIQ 500/5ML	Tier 2	OTC; MAIL
apap dro 80/0.8ml	Tier 1	OTC; MAIL
apap melt tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
apap melts tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
apra elx 160/5ml	Tier 1	OTC; MAIL
arthrts pain tab 650mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
asa free chw 160mg jr	Tier 1	OTC, QL (180 ea / 30 days); MAIL
aspirin free tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
betatemp sus 160/5ml	Tier 1	OTC; MAIL
child apap tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
child nonasa chw pain/rel	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
chld asafree elx 80/2.5ml	Tier 1	OTC; MAIL
chld meditab chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
chld non-asa chw 80mg grp	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
chld non-asa tab 80mg qm	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
chld pain rl tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
chld silapap liq 160/5ml	Tier 1	OTC; MAIL
chlds mapap tab 80mg rt	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
chloraseptic liq sore thr	Tier 1	OTC; MAIL
cvs childs chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
easy-melts tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
ed-apap liq 80mg/2.5	Tier 1	OTC; MAIL
eq acetamin tab 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
eq acetamin tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
eq acetamin tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
eql acetamin tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
fever reduce sup 120mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
fever/pain sus 160/5ml	Tier 1	OTC; MAIL
FEVERALL INF SUP 80MG	Tier 1	OTC, QL (1500 ea / 30 days); MAIL
feverall sup 120mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
feverall sup 325mg	Tier 1	OTC, QL (360 supp / 30 days); MAIL
feverall sup 650mg	Tier 1	OTC, QL (180 supp / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
fevr reducng sup 120mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL
hm rpd melt tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
8 hour pain tab 650mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
inf silapap dro 80/0.8ml	Tier 1	OTC; MAIL
junior mapap tab 160mg rt	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
little remed liq 160/5ml	Tier 1	OTC; MAIL
mapap apap liq 500/15ml	Tier 1	OTC; MAIL
mapap cap 500mg	Tier 1	OTC, QL (240 caps / 30 days); MAIL
mapap child chw 80mg	Tier 1	OTC, QL (1500 tabs / 30 days); MAIL
mapap childr sus 160/5ml	Tier 1	OTC; MAIL
mapap chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
mapap liq 160/5ml	Tier 1	OTC; MAIL
mapap tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
mapap tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
mapap tab 500mg/rr	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
maxapap rs tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
maxapap tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
medi-tabs elx 80/2.5ml	Tier 1	OTC; MAIL
medi-tabs jr chw 160mg	Tier 1	OTC, QL (180 ea / 30 days); MAIL
medi-tabs tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
non-asa jr tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
non-aspirin chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
non-aspirin chw 160mg jr	Tier 1	OTC, QL (180 ea / 30 days); MAIL
non-aspirin sus 160/5ml	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
non-aspirin tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
non-aspirin tab 500mg/rr	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
non-aspirin tab 650mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
nortemp sus 160/5ml	Tier 1	OTC; MAIL
nortemp sus infants	Tier 1	OTC; MAIL
pain & fever chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
pain & fever sol 160/5ml	Tier 1	OTC; MAIL
pain & fever sus 160/5ml	Tier 1	OTC; MAIL
pain & fever tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
pain & fever tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
pain relief liq 160/5ml	Tier 1	OTC; MAIL
pain relief liq 500/15ml	Tier 1	OTC; MAIL
pain relief tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
pain relief tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
pain relieve chw 160mg jr	Tier 1	OTC, QL (180 ea / 30 days); MAIL
pain relieve dro 80/0.8ml	Tier 1	OTC; MAIL
pain relieve sus 160/5ml	Tier 1	OTC; MAIL
pain relieve tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
pain relieve tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
pain relieve tab 500mg/rr	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
pain relievr chw 80mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
pain relievr tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
pain relievr tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
pain relievr tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
pain/fever sup 120mg	Tier 1	OTC, QL (1020 supp / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
pain/fever sus 160/5ml	Tier 1	OTC; MAIL
pediacare sus 160/5ml	Tier 1	OTC; MAIL
pharbetol tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
pharbetol tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
q-pap child sus 160/5ml	Tier 1	OTC; MAIL
q-pap infant dro 80/0.8ml	Tier 1	OTC; MAIL
q-pap liq 160/5ml	Tier 1	OTC; MAIL
q-pap tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
q-pap tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
ra acetamin tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
sb non-asa chw 80mg grp	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
sb non-asa chw 160mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
sm pain rel cap 500mg	Tier 1	OTC, QL (240 caps / 30 days); MAIL
sm rpd melt tab 160mg	Tier 1	OTC, QL (750 tabs / 30 days); MAIL
tactinal chw children	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
tactinal tab 325mg	Tier 1	OTC, QL (360 tabs / 30 days); MAIL
tactinal tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
tgt acetamin tab 500mg	Tier 1	OTC, QL (240 tabs / 30 days); MAIL
tgt apap dro infants	Tier 1	OTC; MAIL
Salicylates		
aspir-low tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
aspirin 81 tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
aspirin chld chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
aspirin tab 81 mg	PREV	OTC, QL (150 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ASPIRIN TAB 81MG	PREV	OTC, QL (150 tabs / 30 days); MAIL
aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
aspirin tab delayed release 81 mg	PREV	OTC, QL (150 tabs / 30 days); MAIL
aspirin tab delayed release 325 mg	PREV	OTC, QL (360 tabs / 30 days); MAIL
aspirtab tab 324mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
bayer adv tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
bayer asa tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
bayer asa tab 325mg	PREV	OTC, QL (360 tabs / 30 days); MAIL
bayer low chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
child asa ls chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
cvs aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
cvs aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
cvs aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
cvs chld asa chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
diflunisal tab 500 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ecotrin low tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
ecpirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
eq aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
eq aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
eq child asa chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
eql aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
eql aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
eql aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
gnp aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
gnp aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
gnp aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
gnp aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
hm aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
hm aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
kls aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
kls aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
kp aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
miniprin low tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
mm aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
norwich asa tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
px aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
px aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
px aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
px aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
qc aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
qc aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
ra aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ra aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
ra aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
ra aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
ra child asa chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
salsalate tab 500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
salsalate tab 750 mg	Tier 1	QL (120 tabs / 30 days); MAIL
sb aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
sb aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
sb child asa chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
sm aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
sm aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
sm aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL
sm aspirin tab 325mg ec	PREV	OTC, QL (360 tabs / 30 days); MAIL
sm child asa chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
st joseph chw low 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
tgt aspirin chw 81mg	PREV	OTC, QL (30 tabs / 30 days); MAIL
tgt aspirin chw child	PREV	OTC, QL (30 tabs / 30 days); MAIL
tgt aspirin tab 81mg ec	PREV	OTC, QL (150 tabs / 30 days); MAIL
tgt aspirin tab 325mg	PREV	OTC, QL (300 tabs / 30 days); MAIL

ANALGESICS - OPIOID

Opioid Agonists

buprenorphine td patch weekly 5 mcg/hr	Tier 1	PA

Drug Name	Drug Tier	Requirements/Limits
buprenorphine td patch weekly 10 mcg/hr	Tier 1	PA
codeine sulf tab 15mg	Tier 1	QL (360 tabs / 30 days); MED
codeine sulf tab 30mg	Tier 1	QL (360 tabs / 30 days); MED
codeine sulf tab 60mg	Tier 1	QL (240 tabs / 30 days); MED
fentanyl td patch 72hr 12 mcg/hr	Tier 1	QL (10 patches / 30 days), PA; MED
fentanyl td patch 72hr 25 mcg/hr	Tier 1	QL (10 patches / 25 days), PA; MED
FENTANYL TD PATCH 72HR 37.5 MCG/HR	Tier 1	PA; MED
fentanyl td patch 72hr 50 mcg/hr	Tier 1	QL (10 patches / 25 days), PA; MED
fentanyl td patch 72hr 75 mcg/hr	Tier 1	QL (10 patches / 25 days), PA; MED
fentanyl td patch 72hr 100 mcg/hr	Tier 1	QL (10 patches / 25 days), PA; MED
hydromorphone hcl tab 2 mg	Tier 1	QL (360 ea / 30 days); MED
hydromorphone hcl tab 4 mg	Tier 1	QL (360 ea / 30 days); MED
hydromorphone hcl tab er 24hr deter 8 mg	Tier 2	PA; MED
hydromorphone hcl tab er 24hr deter 12 mg	Tier 2	PA; MED
hydromorphone hcl tab er 24hr deter 16 mg	Tier 2	PA; MED
hydromorphone hcl tab er 24hr deter 32 mg	Tier 2	PA; MED
levorphanol tartrate tab 2 mg	Tier 2	PA; MED
meperidine hcl oral soln 50 mg/5ml	Tier 1	QL (500 mL / 25 days); AGE; MED; Covered for ages 64 and over
meperidine hcl tab 50 mg	Tier 1	QL (300 tabs / 30 days); AGE; MED; Covered for ages 64 and over
meperidine hcl tab 100 mg	Tier 1	QL (240 tabs / 30 days); AGE; MED; Covered for ages 64 and over
methadone hcl soln 5 mg/5ml	Tier 1	QL (1200 mL / 30 days), PA

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Drug Name	Drug Tier	Requirements/Limits
methadone hcl soln 10 mg/5ml	Tier 1	QL (600 mL / 30 days), PA
methadone hcl tab 5 mg	Tier 1	QL (360 tabs / 25 days), PA
methadone hcl tab 10 mg	Tier 1	QL (360 tabs / 25 days), PA
morphine sulfate oral soln 10 mg/5ml	Tier 1	QL (450 mL / 30 days), PA; MED
morphine sulfate oral soln 20 mg/5ml	Tier 1	QL (450 mL / 30 days), PA; MED
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	Tier 1	QL (450 mL / 30 days), PA; MED
morphine sulfate tab 15 mg	Tier 1	QL (90 tabs / 30 days); MED
morphine sulfate tab 30 mg	Tier 1	QL (90 tabs / 30 days); MED
morphine sulfate tab er 15 mg	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
morphine sulfate tab er 30 mg	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
morphine sulfate tab er 60 mg	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
morphine sulfate tab er 100 mg	Tier 1	QL (90 ea / 30 days), ST; MED; Prior Use IR Opioid Required
NUCYNTA ER TAB 50MG	Tier 3	QL (120 tabs / 25 days), PA; MED
NUCYNTA ER TAB 100MG	Tier 3	QL (120 tabs / 25 days), PA; MED
NUCYNTA ER TAB 150MG	Tier 3	QL (60 tabs / 25 days), PA; MED
NUCYNTA ER TAB 200MG	Tier 3	QL (60 tabs / 25 days), PA; MED
NUCYNTA ER TAB 250MG	Tier 3	QL (60 tabs / 25 days), PA; MED
NUCYNTA TAB 50MG	Tier 3	QL (360 tabs / 25 days), PA; MED
NUCYNTA TAB 75MG	Tier 3	QL (240 tabs / 25 days), PA; MED

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Drug Name	Drug Tier	Requirements/Limits
NUCYNTA TAB 100MG	Tier 3	QL (180 tabs / 25 days), PA; MED
oxycodone hcl soln 5 mg/5ml	Tier 1	QL (240 ml per fill, max 1 fill per 90 days); MED
oxycodone hcl tab 5 mg	Tier 1	QL (Max 3 fills per month; Max 3 fills per month); MED
oxycodone hcl tab 10 mg	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED
oxycodone hcl tab 15 mg	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED
oxycodone hcl tab 20 mg	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED
oxycodone hcl tab 30 mg	Tier 1	QL (Max 90 per fill, max 1 fill per 90 days); MED
oxycodone hcl tab er 12hr deter 10 mg	Tier 1	PA; MED
oxycodone hcl tab er 12hr deter 15 mg	Tier 1	PA
oxycodone hcl tab er 12hr deter 20 mg	Tier 1	PA; MED
oxycodone hcl tab er 12hr deter 30 mg	Tier 1	PA
oxycodone hcl tab er 12hr deter 40 mg	Tier 1	PA; MED
oxycodone hcl tab er 12hr deter 60 mg	Tier 1	PA
oxycodone hcl tab er 12hr deter 80 mg	Tier 1	PA; MED
OXYCONTIN TAB 10MG CR	Tier 3	PA; MED
OXYCONTIN TAB 15MG CR	Tier 3	PA; MED
OXYCONTIN TAB 20MG CR	Tier 3	PA; MED
OXYCONTIN TAB 30MG CR	Tier 3	PA; MED
OXYCONTIN TAB 40MG CR	Tier 3	PA; MED
OXYCONTIN TAB 60MG CR	Tier 3	PA; MED
OXYCONTIN TAB 80MG CR	Tier 3	PA; MED
oxymorphone hcl tab 5 mg	Tier 2	QL (180 tabs / 25 days), PA; MED
oxymorphone hcl tab 10 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 5 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 7.5 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 10 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 15 mg	Tier 2	QL (120 tabs / 25 days), PA; MED

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Drug Name	Drug Tier	Requirements/Limits
oxymorphone hcl tab er 12hr 20 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 30 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
oxymorphone hcl tab er 12hr 40 mg	Tier 2	QL (120 tabs / 25 days), PA; MED
tramadol hcl tab 50 mg	Tier 1	QL (240 tabs / 30 days); MED
tramadol hcl tab er 24hr 200 mg	Tier 1	QL (30 tabs / 25 days), PA; MED
tramadol hcl tab er 24hr biphasic release 100 mg	Tier 1	QL (30 tabs / 25 days), PA; MED
tramadol hcl tab er 24hr biphasic release 300 mg	Tier 1	QL (30 tabs / 25 days), PA; MED
Opioid Combinations		
acetaminophen w/ codeine soln 120-12 mg/5ml	Tier 1	QL (3750 mL / 25 days); MED
acetaminophen w/ codeine tab 300-15 mg	Tier 1	QL (120 tabs / 30 days); MED
acetaminophen w/ codeine tab 300-30 mg	Tier 1	QL (180 ea / 25 days); MED
acetaminophen w/ codeine tab 300-60 mg	Tier 1	QL (120 ea / 30 days); MED
butalbital-acetaminophen-caff w/ cod cap 50-300-40-30 mg	Tier 2	MED
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	Tier 1	QL (240 caps / 30 days); MED
co-gesic tab 5-500mg	Tier 1	QL (180 tabs / 25 days); MED
endocet tab 5-325mg	Tier 1	QL (240 tabs / 30 days); MED
endocet tab 10-325mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	Tier 1	QL (3750 mL / 25 days); MED
hydrocodone-acetaminophen tab 2.5-500 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen tab 5-325 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen tab 5-500 mg	Tier 1	QL (180 tabs / 25 days); MED

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Drug Name	Drug Tier	Requirements/Limits
hydrocodone-acetaminophen tab 7.5-325 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen tab 7.5-500 mg	Tier 1	QL (180 ea / 25 days); MED
hydrocodone-acetaminophen tab 7.5-650 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen tab 7.5-750 mg	Tier 1	QL (180 ea / 25 days); MED
hydrocodone-acetaminophen tab 10-325 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-acetaminophen tab 10-500 mg	Tier 1	QL (180 ea / 25 days); MED
hydrocodone-acetaminophen tab 10-650 mg	Tier 1	QL (180 tabs / 25 days); MED
hydrocodone-ibuprofen tab 7.5-200 mg	Tier 1	QL (150 tabs / 30 days), PA; MED
hydrocodone-ibuprofen tab 10-200 mg	Tier 1	PA; MED
hydrogesic cap 5-500mg	Tier 1	MED
oxycodone w/ acetaminophen tab 5-325 mg	Tier 1	QL (240 tabs / 30 days); MED
oxycodone w/ acetaminophen tab 7.5-325 mg	Tier 1	QL (180 tabs / 25 days); MED
oxycodone w/ acetaminophen tab 10-325 mg	Tier 1	QL (180 tabs / 25 days); MED
oxycodone-ibuprofen tab 5-400 mg	Tier 1	QL (120 tabs / 30 days); MED
stagesic cap 5-500mg	Tier 1	MED
XARTEMIS XR TAB 7.5-325	Tier 3	PA; MED
Opioid Partial Agonists		
buprenorphine hcl sl tab 2 mg (base equiv)	Tier 1	QL (360 tabs / 30 days)
buprenorphine hcl sl tab 8 mg (base equiv)	Tier 1	QL (90 tabs / 30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	Tier 1	
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	Tier 1	
buprenorphine td patch weekly 20 mcg/hr	Tier 1	PA
butorphanol tartrate nasal soln 10 mg/ml	Tier 1	QL (60 bottles / 30 days), PA; MED
BUTRANS DIS 5MCG/HR	Tier 3	PA
BUTRANS DIS 10MCG/HR	Tier 3	PA
BUTRANS DIS 20MCG/HR	Tier 3	PA

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Drug Name	Drug Tier	Requirements/Limits
ANDROGENS-ANABOLIC		
Anabolic Steroids		
ANADROL-50 TAB 50MG	Tier 3	PA
oxandrolone tab 2.5 mg	Tier 2	PA; AGE; Covered for ages 64 and over
oxandrolone tab 10 mg	Tier 2	PA; AGE; Covered for ages 64 and over
Androgens		
ANDROXY TAB 10MG	Tier 3	
danazol cap 50 mg	Tier 2	QL (120 caps / 30 days); MAIL
danazol cap 100 mg	Tier 2	QL (120 caps / 30 days); MAIL
danazol cap 200 mg	Tier 2	QL (120 caps / 30 days); MAIL
METHITEST TAB 10MG	Tier 3	AGE; Covered for ages 64 and over
testosterone cypionate im inj in oil 100 mg/ml	Tier 1	
testosterone cypionate im inj in oil 200 mg/ml	Tier 1	
testosterone enanthate im inj in oil 200 mg/ml	Tier 1	
ANORECTAL AGENTS		
INTRARECTAL STEROIDS		
hydrocortisone enema 100 mg/60ml	Tier 2	QL (1680 mL / 30 days); MAIL
Rectal Combinations		
hemorrhoidal cre	Tier 1	OTC; MAIL
Rectal Local Anesthetics		
dibucaine rectal ointment 1%	Tier 1	OTC; MAIL
Rectal Steroids		
procto-med cre hc 2.5%	Tier 1	QL (450 gm / 30 days); MAIL
proctosol hc cre 2.5%	Tier 1	QL (450 gm / 30 days); MAIL
proctozone cre -hc 2.5%	Tier 1	QL (450 gm / 30 days); MAIL
Vasodilating Agents		
RECTIV OIN 0.4%	Tier 3	MAIL

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Drug Name	Drug Tier	Requirements/Limits
ANTACIDS		
Antacid Combinations		
acid gone chw	Tier 1	OTC; MAIL
acid gone sus	Tier 1	OTC; MAIL
advanced sus antacid	Tier 1	OTC; MAIL
almacone chw	Tier 1	OTC; MAIL
almacone dbl sus strength	Tier 1	OTC; MAIL
almacone sus	Tier 1	OTC; MAIL
alum & mag hydroxide-simethicone susp 500-450-40 mg/5ml	Tier 1	OTC; MAIL
antacid adv sus max st	Tier 1	OTC; MAIL
antacid chw dbl st	Tier 1	OTC; MAIL
antacid extr chw 675-135	Tier 1	OTC; MAIL
antacid fast sus acting	Tier 1	OTC; MAIL
antacid fast sus relief	Tier 1	OTC; MAIL
antacid i sus	Tier 1	OTC; MAIL
antacid iii sus	Tier 1	OTC; MAIL
antacid liq sus	Tier 1	OTC; MAIL
antacid m sus	Tier 1	OTC; MAIL
antacid plus sus anti-gas	Tier 1	OTC; MAIL
antacid plus sus gas rel	Tier 1	OTC; MAIL
antacid sus	Tier 1	OTC; MAIL
antacid sus ex st	Tier 1	OTC; MAIL
antacid sus max st	Tier 1	OTC; MAIL
antacid sus mint crm	Tier 1	OTC; MAIL
antacid sus reg st	Tier 1	OTC; MAIL
antacid sus ultra st	Tier 1	OTC; MAIL
antacid/anti sus -gas ds	Tier 1	OTC; MAIL
antacid/gas sus rel max	Tier 1	OTC; MAIL
antacid/sime sus ds	Tier 1	OTC; MAIL
comfort gel sus	Tier 1	OTC; MAIL
comfort gel sus antacid	Tier 1	OTC; MAIL
comfort gel sus anti-gas	Tier 1	OTC; MAIL
cvs antacid sus antigas	Tier 1	OTC; MAIL
cvs antacid sus supreme	Tier 1	OTC; MAIL
cvs antacid/ sus anti-gas	Tier 1	OTC; MAIL
eq antacid chw 160-105	Tier 1	OTC; MAIL
eq antacid chw ex st	Tier 1	OTC; MAIL
eq antacid sus	Tier 1	OTC; MAIL
eq antacid sus anti-gas	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
eq antacid sus max st	Tier 1	OTC; MAIL
eql antacid sus anti-gas	Tier 1	OTC; MAIL
flanax sus relief	Tier 1	OTC; MAIL
foam antacid chw 80-20mg	Tier 1	OTC; MAIL
foam antacid sus	Tier 1	OTC; MAIL
geri-lanta sus	Tier 1	OTC; MAIL
gnp antacid chw 160-105	Tier 1	OTC; MAIL
gnp antacid sus anti-gas	Tier 1	OTC; MAIL
gnp antacid sus cherry	Tier 1	OTC; MAIL
gnp antacid sus coolmint	Tier 1	OTC; MAIL
gnp antacid sus original	Tier 1	OTC; MAIL
heartbrn ant chw 160-105	Tier 1	OTC; MAIL
heartbrn rlf chw 160-105	Tier 1	OTC; MAIL
heartburn chw ex st	Tier 1	OTC; MAIL
hm antacid sus anti-gas	Tier 1	OTC; MAIL
maalox advan sus max st	Tier 1	OTC; MAIL
maalox max sus cherry	Tier 1	OTC; MAIL
maalox max sus lemon	Tier 1	OTC; MAIL
maalox max sus wild bry	Tier 1	OTC; MAIL
maalox multi sus symp max	Tier 1	OTC; MAIL
mag-al plus liq	Tier 1	OTC; MAIL
mag-al plus liq xs	Tier 1	OTC; MAIL
meijer sus antacid	Tier 1	OTC; MAIL
mi-acid chw	Tier 1	OTC; MAIL
mi-acid sus	Tier 1	OTC; MAIL
mi-acid sus max st	Tier 1	OTC; MAIL
milantex sus ex st	Tier 1	OTC; MAIL
milantex sus original	Tier 1	OTC; MAIL
mintox plus chw	Tier 1	OTC; MAIL
mintox sus	Tier 1	OTC; MAIL
mintox sus max st	Tier 1	OTC; MAIL
px antacid sus max st	Tier 1	OTC; MAIL
px antacid sus reg st	Tier 1	OTC; MAIL
qc antacid sus	Tier 1	OTC; MAIL
qc antacid sus anti-gas	Tier 1	OTC; MAIL
ra antacid sus anti-gas	Tier 1	OTC; MAIL
ra antacid sus antigas	Tier 1	OTC; MAIL
ra liquid sus antacid	Tier 1	OTC; MAIL
rulox sus	Tier 1	OTC; MAIL
sb antacid sus anti-gas	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
sb antacid/ sus antigas	Tier 1	OTC; MAIL
sm antacid chw ex-str	Tier 1	OTC; MAIL
sm antacid sus advanced	Tier 1	OTC; MAIL
tgt antacid sus anti-gas	Tier 1	OTC; MAIL
Antacids - Bicarbonate		
sodium bicarbonate tab 325 mg	Tier 1	OTC; MAIL
sodium bicarbonate tab 650 mg	Tier 1	OTC; MAIL
Antacids - Calcium Salts		
antacid chw 500mg	Tier 1	OTC; MAIL
antacid chw 1000mg	Tier 1	OTC; MAIL
antacid extr chw 750mg	Tier 1	OTC; MAIL
antacid max chw 1000mg	Tier 1	OTC; MAIL
cal antacid chw 1000mg	Tier 1	OTC; MAIL
cal-gest chw 500mg	Tier 1	OTC; MAIL
calc antacid chw 500mg	Tier 1	OTC; MAIL
calc antacid chw 750mg	Tier 1	OTC; MAIL
calc antacid chw 1000mg	Tier 1	OTC; MAIL
calcium carbonate (antacid) chew tab 500 mg	Tier 1	OTC; MAIL
calcium carbonate (antacid) tab 648 mg	Tier 1	OTC, QL (480 tabs / 30 days); MAIL
child soothe chw 400mg	Tier 1	OTC; MAIL
childrens chw soothe	Tier 1	OTC; MAIL
eq antacid chw 1000mg	Tier 1	OTC; MAIL
eql antacid chw 1000mg	Tier 1	OTC; MAIL
gnp antacid chw 1000mg	Tier 1	OTC; MAIL
maalox child chw	Tier 1	OTC; MAIL
px antacid chw 1000mg	Tier 1	OTC; MAIL
ra antacid chw 1000mg	Tier 1	OTC; MAIL
sm antacid chw 1000mg	Tier 1	OTC; MAIL
stomach rlf chw 400mg	Tier 1	OTC; MAIL
tgt antacid chw 1000mg	Tier 1	OTC; MAIL
tums fresher chw 500mg	Tier 1	OTC; MAIL
Antacids - Magnesium Salts		
hm magnesium tab 250mg	Tier 1	OTC; MAIL
magnesium oxide tab 250 mg	Tier 1	OTC; MAIL
magnesium oxide tab 400 mg (240 mg elemental mg)	Tier 1	OTC; MAIL
magnesium oxide tab 420 mg	Tier 1	OTC; MAIL
magnesium tab 250mg	Tier 1	OTC; MAIL

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Tier 1 = Generics; Low cost preferred brand
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Drug Name	Drug Tier	Requirements/Limits
ANTHELMINTICS		
Anthelmintics		
albendazole tab 200 mg	Tier 1	PA
ALBENZA TAB 200MG	Tier 3	PA
BILTRICIDE TAB 600MG	Tier 3	PA
ivermectin tab 3 mg	Tier 1	QL (300 tabs / 30 days)
PIN-X CHW 250MG	Tier 2	OTC, QL (Max 2 fills per 365 days)
pinworm med sus 144mg/ml	Tier 1	OTC
praziquantel tab 600 mg	Tier 2	PA
reeses med sus pinworm	Tier 1	OTC
ANTI-INFECTIVE AGENTS - MISC.		
Anti-infective Agents - Misc.		
CAYSTON INH 75MG	Tier 4	PA
FIRST-VANC SOL 25MG/ML	Tier 2	
FIRST-VANC SOL 50MG/ML	Tier 2	
FIRVANQ SOL 25MG/ML	Tier 2	
FIRVANQ SOL 50MG/ML	Tier 2	
metronidazole tab 250 mg	Tier 1	QL (240 tabs / 30 days)
metronidazole tab 500 mg	Tier 1	QL (120 tabs / 30 days)
NEBUPENT INH 300MG	Tier 3	
trimethoprim tab 100 mg	Tier 1	QL (180 tabs / 30 days)
XIFAXAN TAB 200MG	Tier 4	PA
XIFAXAN TAB 550MG	Tier 4	PA
Anti-infective Misc. - Combinations		
e.s.p. sus 200-600	Tier 2	QL (2400 mL / 30 days)
erythromycin-sulfisoxazole for susp 200-600 mg/5ml	Tier 2	QL (2400 mL / 30 days)
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	Tier 1	QL (1200 mL / 30 days)
sulfamethoxazole-trimethoprim tab 400-80 mg	Tier 1	QL (120 tabs / 30 days)
sulfamethoxazole-trimethoprim tab 800-160 mg	Tier 1	QL (120 tabs / 30 days)
sulfatrim pd sus 200-40/5	Tier 1	QL (1200 mL / 30 days)
Antiprotozoal Agents		
ALINIA SUS 100/5ML	Tier 3	QL (600 mL / 30 days), PA
ALINIA TAB 500MG	Tier 3	QL (120 tabs / 30 days), PA

Drug Name	Drug Tier	Requirements/Limits
atovaquone susp 750 mg/5ml	Tier 2	QL (300 mL / 30 days), PA; Covered for ages 13 and over
Carbapenems		
ertapenem sodium for inj 1 gm (base equivalent)	Tier 3	PA
INVANZ INJ 1GM	Tier 3	PA
Ketolides		
KETEK PAK TAB 400MG	Tier 3	QL (60 tabs / 30 days), PA
KETEK TAB 300MG	Tier 3	QL (60 tabs / 30 days), PA
KETEK TAB 400MG	Tier 3	QL (60 tabs / 30 days), PA
Leprostatics		
dapsone tab 25 mg	Tier 1	QL (120 tabs / 30 days)
dapsone tab 100 mg	Tier 1	QL (90 tabs / 30 days)
Lincosamides		
clindamycin hcl cap 150 mg	Tier 1	QL (240 ea / 30 days)
clindamycin hcl cap 300 mg	Tier 1	QL (270 ea / 30 days)
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	Tier 1	Covered for ages 18 and over
Oxazolidinones		
linezolid for susp 100 mg/5ml	Tier 2	QL (Max day supply 7), PA
linezolid tab 600 mg	Tier 2	QL (Max day supply 7), PA
ANTIANGINAL AGENTS		
Antianginals-Other		
RANEXA TAB 500MG	Tier 2	ST; MAIL; PRIOR USE Beta Blocker/Ca Channel Blockers/LA Nitrate
RANEXA TAB 1000MG	Tier 2	ST; MAIL; PRIOR USE Beta Blocker/Ca Channel Blockers/LA Nitrate
Nitrates		
isosorbide dinitrate sl tab 2.5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
isosorbide dinitrate tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
isosorbide dinitrate tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL
isosorbide dinitrate tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
isosorbide dinitrate tab 30 mg	Tier 1	QL (120 tabs / 30 days); MAIL
isosorbide mononitrate tab 10 mg	Tier 1	QL (90 tabs / 30 days); MAIL
isosorbide mononitrate tab 20 mg	Tier 1	QL (60 tabs / 30 days); MAIL
isosorbide mononitrate tab er 24hr 30 mg	Tier 1	QL (60 tabs / 30 days); MAIL
isosorbide mononitrate tab er 24hr 60 mg	Tier 1	QL (60 tabs / 30 days); MAIL
isosorbide mononitrate tab er 24hr 120 mg	Tier 1	QL (60 tabs / 30 days); MAIL
minitran dis 0.2mg/hr	Tier 1	QL (30 patches / 30 days); MAIL
minitran dis 0.4mg/hr	Tier 1	QL (30 patches / 30 days); MAIL
minitran dis 0.6mg/hr	Tier 1	QL (30 patches / 30 days); MAIL
nitro-time cap 9mg cr	Tier 1	QL (90 caps / 30 days); MAIL
nitroglycerin cap er 9 mg	Tier 1	QL (90 caps / 30 days); MAIL
nitroglycerin sl tab 0.3 mg	Tier 1	QL (300 tabs / 30 days); MAIL
nitroglycerin sl tab 0.4 mg	Tier 1	QL (300 tabs / 30 days); MAIL
nitroglycerin sl tab 0.6 mg	Tier 1	QL (300 tabs / 30 days); MAIL
nitroglycerin td patch 24hr 0.2 mg/hr	Tier 1	QL (30 patches / 30 days); MAIL
nitroglycerin td patch 24hr 0.4 mg/hr	Tier 1	QL (30 patches / 30 days); MAIL
nitroglycerin td patch 24hr 0.6 mg/hr	Tier 1	QL (30 patches / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
ANTIANXIETY AGENTS		
Antianxiety Agents - Misc.		
buspirone hcl tab 5 mg	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
buspirone hcl tab 7.5 mg	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
buspirone hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
buspirone hcl tab 15 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
hydroxyzine hcl syrup 10 mg/5ml	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine hcl tab 10 mg	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine hcl tab 25 mg	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine hcl tab 50 mg	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine pamoate cap 25 mg	Tier 1	QL (240 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine pamoate cap 50 mg	Tier 1	QL (240 ea / 30 days); AGE; MAIL; Covered for ages 64 and over
hydroxyzine pamoate cap 100 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
meprobamate tab 200 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 18-64

Drug Name	Drug Tier	Requirements/Limits
meprobamate tab 400 mg	Tier 2	QL (90 tabs / 30 days); AGE; Covered for ages 18-64
Benzodiazepines		
alprazolam tab 0.5 mg	Tier 1	QL (90 ea / 30 days); Covered for ages 18 and over
alprazolam tab 0.25 mg	Tier 1	QL (90 ea / 30 days); Covered for ages 18 and over
alprazolam tab 1 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
alprazolam tab 2 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
chlordiazepoxide hcl cap 5 mg	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
chlordiazepoxide hcl cap 10 mg	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
chlordiazepoxide hcl cap 25 mg	Tier 1	QL (90 caps / 30 days); AGE; Covered for ages 6-64
clorazepate dipotassium tab 3.75 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-64
clorazepate dipotassium tab 7.5 mg	Tier 1	QL (120 tabs / 30 days); AGE; Covered for ages 6-64
clorazepate dipotassium tab 15 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 6-64
DIAZEPAM CON 5MG/ML	Tier 1	QL (90 mL / 30 days), PA; AGE; Covered for ages 64 and over
diazepam oral soln 1 mg/ml	Tier 1	QL (120 mL / 30 days); AGE; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
diazepam tab 2 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and over
diazepam tab 5 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and over
diazepam tab 10 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 64 and over
lorazepam conc 2 mg/ml	Tier 1	QL (90 mL / 30 days); Covered for ages 12 and over
lorazepam tab 0.5 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
lorazepam tab 1 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
lorazepam tab 2 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 12 and over
oxazepam cap 10 mg	Tier 2	QL (90 ea / 30 days); Covered for ages 6 and over
oxazepam cap 15 mg	Tier 2	QL (90 ea / 30 days); Covered for ages 6 and over
oxazepam cap 30 mg	Tier 2	QL (120 ea / 30 days); Covered for ages 6 and over

ANTIARRHYTHMICS

Antiarrhythmics Type I-A

disopyramide phosphate cap 100 mg	Tier 1	MAIL
disopyramide phosphate cap 150 mg	Tier 1	QL (150 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
quinidine sulfate tab 300 mg	Tier 1	QL (180 tabs / 30 days); MAIL

Antiarrhythmics Type I-B

mexiletine hcl cap 150 mg	Tier 1	QL (180 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
mexiletine hcl cap 200 mg	Tier 1	QL (180 caps / 30 days); MAIL
mexiletine hcl cap 250 mg	Tier 1	QL (180 caps / 30 days); MAIL
Antiarrhythmics Type I-C		
flecainide acetate tab 50 mg	Tier 1	QL (210 tabs / 30 days); MAIL
flecainide acetate tab 100 mg	Tier 1	QL (180 tabs / 30 days); MAIL
flecainide acetate tab 150 mg	Tier 1	QL (90 tabs / 30 days); MAIL
propafenone hcl tab 150 mg	Tier 1	QL (180 ea / 30 days); MAIL
propafenone hcl tab 225 mg	Tier 1	QL (90 tabs / 30 days); MAIL
propafenone hcl tab 300 mg	Tier 1	QL (90 tabs / 30 days); MAIL
Antiarrhythmics Type III		
amiodarone hcl tab 200 mg	Tier 1	QL (120 tabs / 30 days); MAIL
dofetilide cap 125 mcg (0.125 mg)	Tier 4	QL (240 caps / 30 days)
dofetilide cap 250 mcg (0.25 mg)	Tier 4	QL (120 caps / 30 days)
dofetilide cap 500 mcg (0.5 mg)	Tier 4	QL (60 caps / 30 days)
MULTAQ TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
pacerone tab 200mg	Tier 1	QL (120 tabs / 30 days); MAIL
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
XOLAIR INJ 75/0.5	Tier 4	QL (5 syringes / 24 days), PA
XOLAIR INJ 150MG/ML	Tier 4	QL (5 syringes / 24 days), PA
Anti-Inflammatory Agents		
cromolyn sodium soln nebu 20 mg/2ml	Tier 2	QL (780 mL / 30 days); MAIL
Antiasthmatic - Monoclonal Antibodies		
DUPIXENT INJ 200/1.14	Tier 4	PA
NUCALA INJ 100MG	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
XOLAIR SOL 150MG	Tier 4	QL (5 vials / 24 days), PA
BRONCHODILATORS - ANTICHOLINERGICS		
TUDORZA PRES AER 400/ACT	Tier 2	
Bronchodilators - Anticholinergics		
ATROVENT HFA AER 17MCG	Tier 2	QL (2.326 inhalers / 30 days); MAIL
INCRUSE ELPT INH 62.5MCG	Tier 2	MAIL
ipratropium bromide inhal soln 0.02%	Tier 1	QL (300 mL / 30 days); MAIL
Leukotriene Modulators		
montelukast sodium chew tab 4 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
montelukast sodium chew tab 5 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
montelukast sodium tab 10 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
zafirlukast tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
zafirlukast tab 20 mg	Tier 1	QL (60 tabs / 30 days); MAIL
STEROID INHALANTS		
FLOVENT HFA AER 44MCG	Tier 2	QL (1 inhaler / 25 days); AGE; MAIL; Covered for ages 11 and over
FLOVENT HFA AER 110MCG	Tier 2	QL (1 inhaler / 25 days); AGE; MAIL; Covered for ages 11 and over
Selective Phosphodiesterase 4 (PDE4) Inhibitors		
DALIRESP TAB 500MCG	Tier 3	PA; MAIL
Steroid Inhalants		
AEROSPAN AER 80MCG	Tier 2	MAIL
budesonide inhalation susp 0.5 mg/2ml	Tier 2	QL (120 mL / 30 days); AGE; MAIL; Covered for ages 9 and over
budesonide inhalation susp 0.25 mg/2ml	Tier 2	QL (120 mL / 30 days); AGE; MAIL; Covered for ages 9 and over

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Drug Name	Drug Tier	Requirements/Limits
QVAR REDIHA AER 80MCG	Tier 2	QL (10.6 gm / 25 days); MAIL
QVAR REDIHAL AER 40MCG	Tier 2	QL (10.6 gm / 25 days); MAIL
Sympathomimetics		
albuterol sulfate soln nebu 0.5% (5 mg/ml)	Tier 1	QL (150 mL / 25 days); MAIL
albuterol sulfate soln nebu 0.63 mg/3ml (base equiv)	Tier 1	QL (300 mL / 25 days); MAIL
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml)	Tier 1	QL (225 mL / 25 days); MAIL
albuterol sulfate soln nebu 1.25 mg/3ml (base equiv)	Tier 1	QL (150 mL / 25 days); MAIL
albuterol sulfate syrup 2 mg/5ml	Tier 1	QL (4500 mL / 30 days); MAIL
albuterol sulfate tab 4 mg	Tier 2	QL (240 tabs / 30 days); MAIL
ARCAPTA CAP 75MCG	Tier 3	QL (30 ea / 30 days); MAIL
BREO ELLIPTA INH 100-25	Tier 3	QL (60 blisters / 30 days); MAIL
BREO ELLIPTA INH 200-25	Tier 3	QL (60 blisters / 30 days); MAIL
BROVANA NEB 15MCG	Tier 3	QL (120 mL / 25 days); MAIL
COMBIVENT AER 20-100	Tier 2	MAIL
DULERA AER 100-5MCG	Tier 2	QL (1.477 inhalers / 25 days); MAIL
DULERA AER 200-5MCG	Tier 2	QL (1.477 inhalers / 25 days); MAIL
fluticasone-salmeterol aer powder ba 55-14 mcg/act	Tier 1	QL (1 inhaler / 30 days); MAIL
fluticasone-salmeterol aer powder ba 113-14 mcg/act	Tier 1	QL (1 inhaler / 30 days); MAIL
fluticasone-salmeterol aer powder ba 232-14 mcg/act	Tier 1	QL (1 inhaler / 30 days); MAIL
FORADIL CAP AEROLIZE	Tier 2	QL (60 caps / 30 days); MAIL
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	Tier 1	QL (360 ml / 30 days); MAIL
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv)	Tier 1	QL (72 mL / 25 days), PA; MAIL

Drug Name	Drug Tier	Requirements/Limits
levalbuterol hcl soln nebu 0.63 mg/3ml (base equiv)	Tier 1	QL (72 mL / 25 days), PA; MAIL
levalbuterol hcl soln nebu 1.25 mg/3ml (base equiv)	Tier 1	QL (72 mL / 25 days), PA; MAIL
metaproterenol sulfate syrup 10 mg/5ml	Tier 1	QL (1200 mL / 30 days); MAIL
metaproterenol sulfate tab 10 mg	Tier 1	MAIL
metaproterenol sulfate tab 20 mg	Tier 1	MAIL
PROAIR HFA AER	Tier 2	MAIL
PROVENTIL AER HFA	Tier 3	ST; MAIL; PRIOR USE PROAIR
STRIVERDI AER 2.5MCG	Tier 2	QL (1 inhaler / 30 days); MAIL
SYMBICORT AER 80-4.5	Tier 2	QL (1.478 inhalers / 25 days); MAIL
SYMBICORT AER 160-4.5	Tier 2	QL (1 inhaler / 25 days); MAIL
terbutaline sulfate tab 2.5 mg	Tier 2	QL (240 tabs / 30 days); MAIL
terbutaline sulfate tab 5 mg	Tier 2	QL (180 tabs / 30 days); MAIL
VENTOLIN HFA AER	Tier 3	ST; MAIL; PRIOR USE PROAIR
Xanthines		
aminophylline inj 25 mg/ml	Tier 1	MAIL
aminophylline tab 100 mg	Tier 1	MAIL
aminophylline tab 200 mg	Tier 1	MAIL
LUFYLLIN TAB 200MG	Tier 2	MAIL
theochron tab 100mg cr	Tier 1	QL (120 tabs / 30 days); MAIL
theochron tab 200mg cr	Tier 1	QL (120 tabs / 30 days); MAIL
theochron tab 300mg cr	Tier 1	QL (120 tabs / 30 days); MAIL
theophylline soln 80 mg/15ml	Tier 1	MAIL
theophylline tab er 12hr 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
theophylline tab er 12hr 200 mg	Tier 1	QL (120 tabs / 30 days); MAIL
theophylline tab er 12hr 300 mg	Tier 1	QL (120 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
theophylline tab er 12hr 450 mg	Tier 1	QL (60 tabs / 30 days); MAIL
theophylline tab er 24hr 400 mg	Tier 1	QL (120 tabs / 30 days); MAIL
theophylline tab er 24hr 600 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ANTICOAGULANTS		
Coumarin Anticoagulants		
COUMADIN TAB 1MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 2.5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 2MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 3MG	Tier 2	QL (300 ea / 30 days); MAIL
COUMADIN TAB 4MG	Tier 2	QL (300 ea / 30 days); MAIL
COUMADIN TAB 5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 6MG	Tier 2	QL (300 ea / 30 days); MAIL
COUMADIN TAB 7.5MG	Tier 2	QL (300 tabs / 30 days); MAIL
COUMADIN TAB 10MG	Tier 2	QL (300 tabs / 30 days); MAIL
jantoven tab 1mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 2.5mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 2mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 3mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 4mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 5mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 6mg	Tier 1	QL (300 ea / 30 days); MAIL
jantoven tab 7.5mg	Tier 1	QL (300 ea / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
jantoven tab 10mg	Tier 1	QL (300 ea / 30 days); MAIL
warfarin sodium tab 1 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 2 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 2.5 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 3 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 4 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 5 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 6 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 7.5 mg	Tier 1	QL (300 tabs / 30 days); MAIL
warfarin sodium tab 10 mg	Tier 1	QL (300 tabs / 30 days); MAIL
Direct Factor Xa Inhibitors		
ELIQUIS TAB 2.5MG	Tier 3	PA; MAIL
ELIQUIS TAB 5MG	Tier 3	PA; MAIL
XARELTO TAB 10MG	Tier 3	PA; MAIL
XARELTO TAB 15MG	Tier 3	PA; MAIL
XARELTO TAB 20MG	Tier 3	PA; MAIL
Heparins And Heparinoid-Like Agents		
enoxaparin sodium inj 30 mg/0.3ml	Tier 4	QL (Max 7 days supply without PA; Max 0.6 per day)
enoxaparin sodium inj 40 mg/0.4ml	Tier 4	QL (Max 7 days supply without PA; Max 0.8 per day)
enoxaparin sodium inj 60 mg/0.6ml	Tier 4	QL (Max 7 days supply without PA; Max 1.2 per day)
enoxaparin sodium inj 80 mg/0.8ml	Tier 4	QL (Max 7 days supply without PA; Max 1.6 per day)

Drug Name	Drug Tier	Requirements/Limits
enoxaparin sodium inj 100 mg/ml	Tier 4	QL (Max 7 days supply without PA; Max 2 per day)
enoxaparin sodium inj 120 mg/0.8ml	Tier 4	QL (Max 7 days supply without PA; Max 1.6 per day)
enoxaparin sodium inj 150 mg/ml	Tier 4	QL (Max 7 days supply without PA; Max 2 per day)
enoxaparin sodium inj 300 mg/3ml	Tier 4	QL (Max 7 days supply without PA)
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml	Tier 4	PA
fondaparinux sodium subcutaneous inj 5 mg/0.4ml	Tier 4	PA
fondaparinux sodium subcutaneous inj 7.5 mg/0.6ml	Tier 4	PA
fondaparinux sodium subcutaneous inj 10 mg/0.8ml	Tier 4	PA
FRAGMIN INJ 2500/0.2	Tier 4	PA
FRAGMIN INJ 5000/0.2	Tier 4	PA
FRAGMIN INJ 7500/0.3	Tier 4	PA
FRAGMIN INJ 10000/ML	Tier 4	PA
FRAGMIN INJ 12500UNT	Tier 4	PA
FRAGMIN INJ 15000UNT	Tier 4	PA
FRAGMIN INJ 18000UNT	Tier 4	PA
heparin sodium (porcine) inj 1000 unit/ml	Tier 2	PA; MAIL
heparin sodium (porcine) inj 10000 unit/ml	Tier 2	PA; MAIL
heparin sodium (porcine) pf inj 5000 unit/0.5ml	Tier 2	PA; MAIL
Thrombin Inhibitors		
PRADAXA CAP 75MG	Tier 3	PA; MAIL
PRADAXA CAP 150MG	Tier 3	PA; MAIL
ANTICONVULSANTS		
Anticonvulsants - Benzodiazepines		
clobazam tab 10 mg	Tier 1	PA
clobazam tab 20 mg	Tier 1	PA
clonazepam tab 0.5 mg	Tier 1	QL (300 tabs / 30 days)
clonazepam tab 1 mg	Tier 1	QL (300 tabs / 30 days)
clonazepam tab 2 mg	Tier 1	QL (300 tabs / 30 days)

Drug Name	Drug Tier	Requirements/Limits
diazepam rectal gel delivery system 2.5 mg	Tier 2	QL (2 kits / month)
diazepam rectal gel delivery system 10 mg	Tier 2	QL (2 kits / month)
diazepam rectal gel delivery system 20 mg	Tier 2	QL (2 kits / month)
ONFI TAB 5MG	Tier 3	PA
ONFI TAB 10MG	Tier 3	PA
ONFI TAB 20MG	Tier 3	PA
Anticonvulsants - Misc.		
BANZEL SUS 40MG/ML	Tier 3	PA; MAIL
BANZEL TAB 200MG	Tier 3	PA; MAIL
BANZEL TAB 400MG	Tier 3	PA; MAIL
carbamazepine cap er 12hr 100 mg	Tier 1	QL (240 caps / 30 days); MAIL
carbamazepine cap er 12hr 200 mg	Tier 1	QL (240 caps / 30 days); MAIL
carbamazepine cap er 12hr 300 mg	Tier 1	QL (240 caps / 30 days); MAIL
carbamazepine chew tab 100 mg	Tier 1	QL (240 tabs / 30 days); MAIL
carbamazepine susp 100 mg/5ml	Tier 1	QL (1800 mL / 30 days); MAIL
carbamazepine tab 200 mg	Tier 1	QL (240 tabs / 30 days); MAIL
carbamazepine tab er 12hr 100 mg	Tier 1	QL (240 tabs / 30 days); MAIL
carbamazepine tab er 12hr 200 mg	Tier 1	QL (240 ea / 30 days); MAIL
carbamazepine tab er 12hr 400 mg	Tier 1	QL (240 ea / 30 days); MAIL
epitol tab 200mg	Tier 1	QL (240 tabs / 30 days); MAIL
gabapentin cap 100 mg	Tier 1	QL (300 caps / 30 days); MAIL
gabapentin cap 300 mg	Tier 1	QL (300 caps / 30 days); MAIL
gabapentin cap 400 mg	Tier 1	QL (270 caps / 30 days); MAIL
gabapentin oral soln 250 mg/5ml	Tier 1	QL (2100 mL / 30 days); MAIL
gabapentin tab 100 mg	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
gabapentin tab 600 mg	Tier 1	QL (180 tabs / 30 days); MAIL
gabapentin tab 800 mg	Tier 1	QL (120 tabs / 30 days); MAIL
lamotrigine tab 25 mg	Tier 1	QL (300 tabs / 30 days); MAIL
lamotrigine tab 100 mg	Tier 1	QL (240 tabs / 30 days); MAIL
lamotrigine tab 150 mg	Tier 1	QL (120 tabs / 30 days); MAIL
lamotrigine tab 200 mg	Tier 1	QL (120 tabs / 30 days); MAIL
lamotrigine tab chewable dispersible 5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
lamotrigine tab chewable dispersible 25 mg	Tier 1	QL (240 tabs / 30 days); MAIL
levetiracetam oral soln 100 mg/ml	Tier 1	QL (900 mL / 30 days); MAIL
levetiracetam tab 250 mg	Tier 1	QL (180 tabs / 30 days); MAIL
levetiracetam tab 500 mg	Tier 1	QL (180 tabs / 30 days); MAIL
levetiracetam tab 750 mg	Tier 1	QL (120 tabs / 30 days); MAIL
levetiracetam tab 1000 mg	Tier 1	QL (90 tabs / 30 days); MAIL
levetiracetam tab er 24hr 500 mg	Tier 1	QL (180 tabs / 30 days); MAIL
levetiracetam tab er 24hr 750 mg	Tier 1	QL (120 tabs / 30 days); MAIL
LYRICA CAP 25MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 50MG	Tier 3	QL (180 caps / 30 days), PA
LYRICA CAP 75MG	Tier 3	QL (240 caps / 30 days), PA
LYRICA CAP 100MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 150MG	Tier 3	QL (90 caps / 30 days), PA
LYRICA CAP 200MG	Tier 3	QL (90 caps / 30 days), PA

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Drug Name	Drug Tier	Requirements/Limits
LYRICA CAP 225MG	Tier 3	QL (60 caps / 30 days), PA
LYRICA CAP 300MG	Tier 3	QL (60 caps / 30 days), PA
oxcarbazepine susp 300 mg/5ml (60 mg/ml)	Tier 2	QL (1200 mL / 30 days); MAIL
oxcarbazepine tab 150 mg	Tier 1	QL (60 tabs / 30 days); MAIL
oxcarbazepine tab 300 mg	Tier 1	QL (60 tabs / 30 days); MAIL
oxcarbazepine tab 600 mg	Tier 1	QL (120 tabs / 30 days); MAIL
POTIGA TAB 50MG	Tier 2	PA
POTIGA TAB 200MG	Tier 2	PA
POTIGA TAB 400MG	Tier 2	PA
primidone tab 50 mg	Tier 1	QL (120 ea / 30 days); MAIL
primidone tab 250 mg	Tier 1	QL (120 ea / 30 days); MAIL
TEGRETOL-XR TAB 100MG	Tier 2	QL (240 tabs / 30 days); MAIL
topiramate sprinkle cap 15 mg	Tier 1	QL (240 caps / 30 days); MAIL
topiramate sprinkle cap 25 mg	Tier 1	QL (240 caps / 30 days); MAIL
topiramate tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
topiramate tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
topiramate tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
topiramate tab 200 mg	Tier 1	QL (60 tabs / 30 days); MAIL
VIMPAT SOL 10MG/ML	Tier 2	PA
VIMPAT TAB 50MG	Tier 2	PA
VIMPAT TAB 100MG	Tier 2	PA
VIMPAT TAB 150MG	Tier 2	PA
VIMPAT TAB 200MG	Tier 2	PA
zonisamide cap 25 mg	Tier 1	QL (60 caps / 30 days); MAIL
zonisamide cap 50 mg	Tier 1	QL (60 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
zonisamide cap 100 mg	Tier 1	QL (180 caps / 30 days); MAIL
Carbamates		
felbamate susp 600 mg/5ml	Tier 2	MAIL
felbamate tab 400 mg	Tier 2	QL (270 tabs / 30 days); MAIL
felbamate tab 600 mg	Tier 2	QL (180 tabs / 30 days); MAIL
GABA Modulators		
SABRIL TAB 500MG	Tier 4	QL (180 tabs / 30 days), PA
tiagabine hcl tab 2 mg	Tier 2	QL (840 tabs / 30 days); MAIL
tiagabine hcl tab 4 mg	Tier 2	QL (420 tabs / 30 days); MAIL
vigabatrin powd pack 500 mg	Tier 4	PA
Hydantoins		
DILANTIN CAP 30MG	Tier 2	QL (180 caps / 30 days); MAIL
PEGANONE TAB 250MG	Tier 3	QL (360 tabs / 30 days); MAIL
phenytoin chw 50mg	Tier 1	QL (150 tabs / 30 days); MAIL
phenytoin sodium extended cap 100 mg	Tier 1	QL (180 ea / 30 days); MAIL
phenytoin sodium extended cap 200 mg	Tier 1	QL (180 caps / 30 days); MAIL
phenytoin sodium extended cap 300 mg	Tier 1	QL (180 caps / 30 days); MAIL
phenytoin susp 125 mg/5ml	Tier 1	QL (600 mL / 30 days); MAIL
Succinimides		
CELONTIN CAP 300MG	Tier 3	QL (120 caps / 30 days); MAIL
ethosuximide cap 250 mg	Tier 1	QL (180 caps / 30 days); MAIL
ethosuximide soln 250 mg/5ml	Tier 1	QL (900 mL / 30 days); MAIL
Valproic Acid		
divalproex sodium cap delayed release sprinkle 125 mg	Tier 1	QL (300 ea / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
divalproex sodium tab delayed release 125 mg	Tier 1	QL (450 tabs / 30 days); MAIL
divalproex sodium tab delayed release 250 mg	Tier 1	QL (300 tabs / 30 days); MAIL
divalproex sodium tab delayed release 500 mg	Tier 1	QL (300 tabs / 30 days); MAIL
divalproex sodium tab er 24 hr 250 mg	Tier 1	QL (300 tabs / 30 days); MAIL
divalproex sodium tab er 24 hr 500 mg	Tier 1	QL (240 tabs / 30 days); MAIL
valproate sodium oral soln 250 mg/5ml (base equiv)	Tier 1	QL (3000 mL / 30 days); MAIL
valproic acid cap 250 mg	Tier 1	QL (600 caps / 30 days); MAIL

ANTIDEPRESSANTS

Alpha-2 Receptor Antagonists (Tetracyclics)

mirtazapine tab 15 mg	Tier 1	QL (30 ea / 30 days); MAIL
mirtazapine tab 30 mg	Tier 1	QL (120 ea / 30 days); MAIL
mirtazapine tab 45 mg	Tier 1	QL (30 ea / 30 days); MAIL

Antidepressants - Misc.

bupropion hcl tab 75 mg	Tier 1	QL (120 tabs / 30 days); MAIL
bupropion hcl tab 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
bupropion hcl tab er 12hr 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bupropion hcl tab er 12hr 150 mg	Tier 1	QL (90 tabs / 30 days); MAIL
bupropion hcl tab er 12hr 200 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bupropion hcl tab er 24hr 150 mg	Tier 1	QL (30 tabs / 30 days); MAIL
bupropion hcl tab er 24hr 300 mg	Tier 1	QL (30 tabs / 30 days); MAIL
maprotiline hcl tab 25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
maprotiline hcl tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
maprotiline hcl tab 75 mg	Tier 1	QL (90 tabs / 30 days); MAIL
Modified Cyclics		
nefazodone hcl tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nefazodone hcl tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nefazodone hcl tab 150 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nefazodone hcl tab 200 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nefazodone hcl tab 250 mg	Tier 1	QL (60 tabs / 30 days); MAIL
trazodone hcl tab 50 mg	Tier 1	QL (60 ea / 30 days); MAIL
trazodone hcl tab 100 mg	Tier 1	QL (60 ea / 30 days); MAIL
trazodone hcl tab 150 mg	Tier 1	QL (60 ea / 30 days); MAIL
VIIBRYD KIT	Tier 3	PA; MAIL
VIIBRYD KIT STARTER	Tier 3	PA; MAIL
VIIBRYD TAB 10MG	Tier 3	QL (120 tabs / 30 days), PA; MAIL
VIIBRYD TAB 20MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
VIIBRYD TAB 40MG	Tier 3	QL (30 tabs / 30 days), PA; MAIL
Monoamine Oxidase Inhibitors (MAOIs)		
EMSAM DIS 6MG/24HR	Tier 3	PA; MAIL
EMSAM DIS 9MG/24HR	Tier 3	PA; MAIL
EMSAM DIS 12MG/24H	Tier 3	PA; MAIL
MARPLAN TAB 10MG	Tier 3	QL (90 tabs / 30 days), PA; MAIL
phenelzine sulfate tab 15 mg	Tier 1	QL (180 tabs / 30 days); MAIL
tranylcypromine sulfate tab 10 mg	Tier 2	QL (240 tabs / 30 days); MAIL
Selective Serotonin Reuptake Inhibitors (SSRIs)		
citalopram hydrobromide oral soln 10 mg/5ml	Tier 1	QL (600 mL / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
citalopram hydrobromide tab 10 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
citalopram hydrobromide tab 20 mg (base equiv)	Tier 1	QL (60 tabs / 30 days); MAIL
citalopram hydrobromide tab 40 mg (base equiv)	Tier 1	QL (60 tabs / 30 days); MAIL
escitalopram oxalate soln 5 mg/5ml (base equiv)	Tier 1	MAIL
escitalopram oxalate tab 5 mg (base equiv)	Tier 1	MAIL
escitalopram oxalate tab 10 mg (base equiv)	Tier 1	MAIL
escitalopram oxalate tab 20 mg (base equiv)	Tier 1	MAIL
fluoxetine hcl cap 10 mg	Tier 1	QL (90 caps / 30 days); MAIL
fluoxetine hcl cap 20 mg	Tier 1	QL (120 caps / 30 days); MAIL
fluoxetine hcl solution 20 mg/5ml	Tier 1	MAIL
fluvoxamine maleate tab 25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
fluvoxamine maleate tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
fluvoxamine maleate tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
paroxetine hcl tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
paroxetine hcl tab 20 mg	Tier 1	QL (60 tabs / 30 days); MAIL
paroxetine hcl tab 30 mg	Tier 1	QL (60 tabs / 30 days); MAIL
paroxetine hcl tab 40 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sertraline hcl oral concentrate for solution 20 mg/ml	Tier 1	QL (300 mL / 30 days); MAIL
sertraline hcl tab 25 mg	Tier 1	QL (30 tabs / 30 days); MAIL
sertraline hcl tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sertraline hcl tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
Serotonin-Norepinephrine Reuptake Inhibitors (SNRIs)		
desvenlafaxine succinate tab er 24hr 50 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL
desvenlafaxine succinate tab er 24hr 100 mg (base equiv)	Tier 1	QL (30 tabs / 30 days), PA; MAIL
duloxetine hcl cap 20 mg	Tier 1	ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
duloxetine hcl cap 30 mg	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
duloxetine hcl cap 60 mg	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE VENLAFAXINE/VENLAFAXINE ER
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent)	Tier 1	QL (60 caps / 30 days); MAIL
venlafaxine hcl cap er 24hr 75 mg (base equivalent)	Tier 1	QL (60 caps / 30 days); MAIL
venlafaxine hcl cap er 24hr 150 mg (base equivalent)	Tier 1	QL (30 caps / 30 days); MAIL
venlafaxine hcl tab 25 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); MAIL
venlafaxine hcl tab 37.5 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); MAIL
venlafaxine hcl tab 50 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); MAIL
venlafaxine hcl tab 75 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); MAIL
venlafaxine hcl tab 100 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); MAIL
Tricyclic Agents		
amitriptyline hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
amitriptyline hcl tab 25 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
amitriptyline hcl tab 50 mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

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Drug Name	Drug Tier	Requirements/Limits
amitriptyline hcl tab 75 mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
amitriptyline hcl tab 100 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
amitriptyline hcl tab 150 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
amoxapine tab 25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
amoxapine tab 50 mg	Tier 1	QL (90 tabs / 30 days); MAIL
amoxapine tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
amoxapine tab 150 mg	Tier 1	QL (90 tabs / 30 days); MAIL
clomipramine hcl cap 25 mg	Tier 2	QL (180 caps / 30 days); MAIL
clomipramine hcl cap 50 mg	Tier 2	QL (180 caps / 30 days); MAIL
clomipramine hcl cap 75 mg	Tier 2	QL (120 caps / 30 days); MAIL
desipramine hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
desipramine hcl tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
desipramine hcl tab 50 mg	Tier 1	QL (180 tabs / 30 days); MAIL
desipramine hcl tab 75 mg	Tier 1	QL (90 tabs / 30 days); MAIL
desipramine hcl tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
desipramine hcl tab 150 mg	Tier 1	QL (60 tabs / 30 days); MAIL
doxepin hcl cap 10 mg	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
doxepin hcl cap 25 mg	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and over

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Drug Name	Drug Tier	Requirements/Limits
doxepin hcl cap 50 mg	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
doxepin hcl cap 75 mg	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
doxepin hcl cap 100 mg	Tier 1	QL (90 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
doxepin hcl cap 150 mg	Tier 1	QL (60 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
doxepin hcl conc 10 mg/ml	Tier 1	AGE; MAIL; Covered for ages 64 and over
imipramine hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
imipramine hcl tab 25 mg	Tier 1	QL (180 tabs / 30 days); MAIL
imipramine hcl tab 50 mg	Tier 1	QL (180 tabs / 30 days); MAIL
nortriptyline hcl cap 10 mg	Tier 1	QL (180 caps / 30 days); MAIL
nortriptyline hcl cap 25 mg	Tier 1	QL (180 caps / 30 days); MAIL
nortriptyline hcl cap 50 mg	Tier 1	QL (120 caps / 30 days); MAIL
nortriptyline hcl cap 75 mg	Tier 1	QL (60 caps / 30 days); MAIL
protriptyline hcl tab 5 mg	Tier 2	QL (240 tabs / 30 days); MAIL
protriptyline hcl tab 10 mg	Tier 2	QL (240 tabs / 30 days); MAIL
trimipramine maleate cap 25 mg	Tier 1	QL (60 caps / 30 days); MAIL
trimipramine maleate cap 50 mg	Tier 1	QL (60 caps / 30 days); MAIL
trimipramine maleate cap 100 mg	Tier 1	QL (30 caps / 30 days); MAIL

ANTIDIABETICS

Alpha-Glucosidase Inhibitors

acarbose tab 25 mg	Tier 1	QL (90 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
acarbose tab 50 mg	Tier 1	QL (90 tabs / 30 days); MAIL
acarbose tab 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
miglitol tab 25 mg	Tier 2	QL (360 tabs / 30 days); MAIL
miglitol tab 50 mg	Tier 2	QL (180 tabs / 30 days); MAIL
miglitol tab 100 mg	Tier 2	QL (90 tabs / 30 days); MAIL
Antidiabetic - Amylin Analogs		
SYMLINPEN 60 INJ 1000MCG	Tier 3	PA; MAIL
SYMLNPEN 120 INJ 1000MCG	Tier 3	PA; MAIL
Antidiabetic Combinations		
alogliptin-metformin hcl tab 12.5-500 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-metformin hcl tab 12.5-1000 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-pioglitazone tab 12.5-15 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-pioglitazone tab 12.5-30 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-pioglitazone tab 12.5-45 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days

Drug Name	Drug Tier	Requirements/Limits
alogliptin-pioglitazone tab 25-15 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-pioglitazone tab 25-30 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin-pioglitazone tab 25-45 mg	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
glyburide-metformin tab 1.25-250 mg	Tier 1	QL (60 tabs / 30 days); MAIL
glyburide-metformin tab 2.5-500 mg	Tier 1	QL (60 tabs / 30 days); MAIL
glyburide-metformin tab 5-500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
KOMBIGLYZ XR TAB 2.5-1000	Tier 3	PA; MAIL
KOMBIGLYZ XR TAB 5-500MG	Tier 3	PA; MAIL
KOMBIGLYZ XR TAB 5-1000MG	Tier 3	PA; MAIL
XIGDUO XR TAB 2.5-1000	Tier 3	QL (60 tabs / 30 days), ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 5-500MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 5-1000MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days

Drug Name	Drug Tier	Requirements/Limits
XIGDUO XR TAB 10-500MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
XIGDUO XR TAB 10-1000	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
Biguanides		
metformin hcl tab 500 mg	Tier 1	QL (150 tabs / 30 days); MAIL
metformin hcl tab 850 mg	Tier 1	QL (90 tabs / 30 days); MAIL
metformin hcl tab 1000 mg	Tier 1	QL (60 tabs / 30 days); MAIL
metformin hcl tab er 24hr 500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
metformin hcl tab er 24hr 750 mg	Tier 1	QL (120 tabs / 30 days); MAIL
DIABETIC OTHER		
BAQSIMI ONE POW 3MG/DOSE	Tier 2	QL (2 ea / 30 days)
Diabetic Other		
CVS GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL
CVS GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
CVS GLUCOSE CHW TROP BLS	Tier 1	OTC; MAIL
DEX4 CHW FRUIT	Tier 1	OTC; MAIL
DEX4 CHW GRAPE	Tier 1	OTC; MAIL
DEX4 CHW ORANGE	Tier 1	OTC; MAIL
DEX4 CHW RASPBERR	Tier 1	OTC; MAIL
DEX4 CHW RASPBERY	Tier 1	OTC; MAIL
DEX4 CHW SOUR APL	Tier 1	OTC; MAIL
DEX4 CHW TROP FRT	Tier 1	OTC; MAIL
DEX4 CHW WATERMLN	Tier 1	OTC; MAIL
DEX4 NATURAL CHW ORANGE	Tier 1	OTC; MAIL
DEX4 POUCH CHW PACK	Tier 1	OTC; MAIL
GLUCAGON KIT 1MG	Tier 2	QL (1 kit / 25 days); MAIL
GLUCOSE CHW FRT PNCH	Tier 1	OTC; MAIL
GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
GLUCOSE CHW RASPBRRY	Tier 1	OTC; MAIL
GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
GNP GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
GNP GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
GNP GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
GNP GLUCOSE CHW WATERMLN	Tier 1	OTC; MAIL
HM GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
HM GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
KROG GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
KROG GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
KROG GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
KROG GLUCOSE CHW WATERMLN	Tier 1	OTC; MAIL
PX GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL
PX GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
PX GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
PX GLUCOSE CHW SOUR APL	Tier 1	OTC; MAIL
RA GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
RA GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
RA GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
RA GLUCOSE CHW TROP FRT	Tier 1	OTC; MAIL
SM GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
SM GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
TGT GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
TGT GLUCOSE CHW ORANGE	Tier 1	OTC; MAIL
TGT GLUCOSE CHW RASPBERY	Tier 1	OTC; MAIL
UP&UP CHW GRAPE	Tier 1	OTC; MAIL
UP&UP CHW ORANGE	Tier 1	OTC; MAIL
UP&UP CHW RASPBERY	Tier 1	OTC; MAIL
VP GLUCOSE CHW FRUIT	Tier 1	OTC; MAIL
VP GLUCOSE CHW GRAPE	Tier 1	OTC; MAIL
Dipeptidyl Peptidase-4 (DPP-4) Inhibitors		
alogliptin benzoate tab 6.25 mg (base equiv)	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days

Drug Name	Drug Tier	Requirements/Limits
alogliptin benzoate tab 12.5 mg (base equiv)	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
alogliptin benzoate tab 25 mg (base equiv)	Tier 2	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione for 90 days
ONGLYZA TAB 2.5MG	Tier 3	PA; MAIL
ONGLYZA TAB 5MG	Tier 3	PA; MAIL
Dopamine Receptor Agonists - Antidiabetic		
CYCLOSET TAB 0.8MG	Tier 2	QL (180 tabs / 30 days); MAIL
Incretin Mimetic Agents (GLP-1 Receptor Agonists)		
BYETTA INJ 5MCG	Tier 2	QL (1 pen / 25 days), PA; MAIL
BYETTA INJ 10MCG	Tier 2	QL (1 pen / 25 days), PA; MAIL
VICTOZA INJ 18MG/3ML	Tier 3	PA; MAIL
Insulin		
APIDRA INJ SOLOSTAR	Tier 3	ST; MAIL; PRIOR USE NOVOLOG
APIDRA INJ U-100	Tier 3	ST; MAIL; PRIOR USE NOVOLOG
BASAGLAR KWIKPEN	Tier 2	QL (10 pens / 30 days); MAIL
HUMALOG INJ 100/ML	Tier 3	QL (10 cartridges / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG INJ 100/ML	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG KWIK INJ 100/ML	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX INJ 50/50	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG

Drug Name	Drug Tier	Requirements/Limits
HUMALOG MIX INJ 50/50KWP	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX INJ 75/25KWP	Tier 3	QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMALOG MIX SUS 75/25	Tier 3	QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLOG
HUMULIN INJ 70/30	Tier 3	OTC, QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN INJ 70/30KWP	Tier 3	OTC, QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN N INJ U-100	Tier 3	OTC, QL (30 mL / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN N INJ U-100KWP	Tier 3	OTC, QL (10 pens / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN R INJ U-100	Tier 3	OTC, QL (3 vials / 30 days), ST; MAIL; PRIOR USE NOVOLIN
HUMULIN R INJ U-500	Tier 3	QL (1.5 vials / 30 days), ST; MAIL; PRIOR USE NOVOLIN
LEVEMIR INJ	Tier 2	MAIL
LEVEMIR INJ FLEXTOUC	Tier 2	MAIL
NOVOLIN INJ 70/30	Tier 2	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN N INJ U-100	Tier 1	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN R INJ PENFILL	Tier 2	OTC, QL (30 mL / 30 days); MAIL
NOVOLIN R INJ U-100	Tier 1	OTC, QL (3 vials / 30 days); MAIL
NOVOLOG INJ 100/ML	Tier 1	QL (3 vials / 30 days); MAIL
NOVOLOG INJ FLEXPEN	Tier 2	QL (10 pens / 30 days); MAIL

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Tier 3 = Non-preferred brand name drugs; **Tier 4** = Specialty Drugs
PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG INJ PENFILL	Tier 2	QL (10 cartridges / 30 days); MAIL
NOVOLOG MIX INJ 70/30	Tier 1	QL (30 mL / 30 days); MAIL
NOVOLOG MIX INJ FLEXPEN	Tier 2	QL (10 pens / 30 days); MAIL
Insulin Sensitizing Agents		
AVANDIA TAB 2MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
AVANDIA TAB 4MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
AVANDIA TAB 8MG	Tier 3	QL (30 tabs / 30 days), PA; MAIL
pioglitazone hcl tab 15 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
pioglitazone hcl tab 30 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
pioglitazone hcl tab 45 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
Meglitinide Analogues		
nateglinide tab 60 mg	Tier 1	MAIL
nateglinide tab 120 mg	Tier 1	MAIL
repaglinide tab 0.5 mg	Tier 1	QL (180 tabs / 30 days); MAIL
repaglinide tab 1 mg	Tier 1	QL (180 tabs / 30 days); MAIL
repaglinide tab 2 mg	Tier 1	QL (180 tabs / 30 days); MAIL
Sulfonylureas		
chlorpropamide tab 100 mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
chlorpropamide tab 250 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
glimepiride tab 1 mg	Tier 1	QL (90 tabs / 30 days); MAIL
glimepiride tab 2 mg	Tier 1	QL (120 ea / 30 days); MAIL
glimepiride tab 4 mg	Tier 1	QL (90 ea / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
glipizide tab 5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
glipizide tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glipizide tab er 24hr 2.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
glipizide tab er 24hr 5 mg	Tier 1	QL (60 ea / 30 days); MAIL
glipizide tab er 24hr 10 mg	Tier 1	QL (60 ea / 30 days); MAIL
glipizide xl tab 2.5mg	Tier 1	QL (60 tabs / 30 days); MAIL
glipizide xl tab 5mg	Tier 1	QL (60 tabs / 30 days); MAIL
glipizide xl tab 10mg	Tier 1	QL (60 tabs / 30 days); MAIL
glyburide micronized tab 1.5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glyburide micronized tab 3 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glyburide micronized tab 6 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glyburide tab 1.25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glyburide tab 2.5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
glyburide tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
tolazamide tab 250 mg	Tier 1	QL (120 tabs / 30 days); MAIL
tolazamide tab 500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
tolbutamide tab 500 mg	Tier 1	QL (180 tabs / 30 days); MAIL

ANTIDIARRHEALS

Antidiarrheal Agents - Misc.

bismatrol chw 262mg	Tier 1	OTC; MAIL
bismatrol sus 262/15ml	Tier 1	OTC; MAIL
bismatrol sus 525/15ml	Tier 1	OTC; MAIL
bismuth subsalicylate chew tab 262 mg	Tier 1	OTC; MAIL
cvs bismuth chw 262mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
cvs bismuth sus max str	Tier 1	OTC; MAIL
cvs bismuth tab 262mg	Tier 1	OTC; MAIL
diarrhea rel sus 262/15ml	Tier 1	OTC; MAIL
diarrhea sus 262/15ml	Tier 1	OTC; MAIL
diotame chw 262mg	Tier 1	OTC; MAIL
eq stomach chw 262mg	Tier 1	OTC; MAIL
eql stomach chw 262mg	Tier 1	OTC; MAIL
gnp k-pec sus 262/15ml	Tier 1	OTC; MAIL
kao-tin sus 262/15ml	Tier 1	OTC; MAIL
kaopectate sus 262/15ml	Tier 1	OTC; MAIL
medi-bismuth chw 262mg	Tier 1	OTC; MAIL
peptic relf chw 262mg	Tier 1	OTC; MAIL
peptic relf sus 262/15ml	Tier 1	OTC; MAIL
pink bismuth chw 262mg	Tier 1	OTC; MAIL
pink bismuth sus 262/15ml	Tier 1	OTC; MAIL
pink bismuth sus max str	Tier 1	OTC; MAIL
pink bismuth tab 262mg	Tier 1	OTC; MAIL
px stomach chw 262mg	Tier 1	OTC; MAIL
px stomach sus 262/15ml	Tier 1	OTC; MAIL
px stomach sus 525/15ml	Tier 1	OTC; MAIL
ra k-pec sus 262/15ml	Tier 1	OTC; MAIL
ra pink bism chw 262mg	Tier 1	OTC; MAIL
ra pink bism tab 262mg	Tier 1	OTC; MAIL
sb bismuth sus 262/15ml	Tier 1	OTC; MAIL
sb bismuth tab 262mg	Tier 1	OTC; MAIL
sm stomach sus 262/15ml	Tier 1	OTC; MAIL
sm stomach sus 525/30ml	Tier 1	OTC; MAIL
soothe chw 262mg	Tier 1	OTC; MAIL
soothe sus 262/15ml	Tier 1	OTC; MAIL
soothe sus 525/15ml	Tier 1	OTC; MAIL
soothe tab 262mg	Tier 1	OTC; MAIL
stomach relf chw 262mg	Tier 1	OTC; MAIL
stomach relf sus 262/15ml	Tier 1	OTC; MAIL
stomach relf sus 524/30ml	Tier 1	OTC; MAIL
stomach relf sus 525/15ml	Tier 1	OTC; MAIL
stomach relf sus 527/30ml	Tier 1	OTC; MAIL
stomach relf sus plus	Tier 1	OTC; MAIL
stomach relf tab 262mg	Tier 1	OTC; MAIL
stomach rlf tab 262mg	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
Antiperistaltic Agents		
anti-diarrhe cap 2mg	Tier 1	OTC, QL (240 caps / 30 days); MAIL
anti-diarrhe liq 1mg/5ml	Tier 1	OTC; MAIL
anti-diarrhe tab 2mg	Tier 1	OTC; MAIL
diamode tab 2mg	Tier 1	OTC; MAIL
diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml	Tier 1	
diphenoxylate w/ atropine tab 2.5-0.025 mg	Tier 1	QL (240 tabs / 30 days)
kls anti-dia tab 2mg	Tier 1	OTC; MAIL
loperamide cap 2mg	Tier 1	OTC, QL (240 caps / 30 days); MAIL
loperamide hcl liq 1 mg/5ml (0.2 mg/ml)	Tier 1	OTC; MAIL
loperamide sus 1mg/7.5	Tier 1	OTC; MAIL
loperamide tab 2mg	Tier 1	OTC; MAIL
MOTOFEN TAB 1-0.025	Tier 3	
sm anti-diar tab 2mg	Tier 1	OTC; MAIL
ANTIDOTES		
Antidotes - Chelating Agents		
CHEMET CAP 100MG	Tier 3	QL (630 caps / 30 days), PA; MAIL
EXJADE TAB 125MG	Tier 4	PA
EXJADE TAB 250MG	Tier 4	PA
EXJADE TAB 500MG	Tier 4	PA
FERRIPROX TAB 500MG	Tier 4	PA
Opioid Antagonists		
naloxone hcl soln cartridge 0.4 mg/ml	Tier 1	
naloxone hcl soln prefilled syringe 2 mg/2ml	Tier 1	
naltrexone hcl tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
NARCAN SPR	Tier 2	
ANTIEMETICS		
5-HT3 Receptor Antagonists		
ALOXI INJ 0.25MG/5	Tier 3	PA; MAIL
ANZEMET TAB 50MG	Tier 3	PA; MAIL
ANZEMET TAB 100MG	Tier 3	QL (30 tabs / 30 days), PA; MAIL

Drug Name	Drug Tier	Requirements/Limits
granisetron hcl tab 1 mg	Tier 2	QL (60 tabs / 30 days); MAIL
ondansetron hcl inj 4 mg/2ml (2 mg/ml)	Tier 1	QL (375 vials / 30 days); MAIL
ondansetron hcl oral soln 4 mg/5ml	Tier 1	PA; MAIL
ondansetron hcl tab 4 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ondansetron hcl tab 8 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ondansetron orally disintegrating tab 4 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ondansetron orally disintegrating tab 8 mg	Tier 1	QL (90 tabs / 30 days); MAIL
palonosetron hcl iv soln 0.25 mg/5ml (base equivalent)	Tier 2	PA; MAIL
Antiemetics - Anticholinergic		
dimenhydrinate tab 50 mg	Tier 1	OTC; MAIL
dramamine tab 25mg	Tier 1	OTC, QL (120 ea / 30 days); MAIL
driminate tab 50mg	Tier 1	OTC; MAIL
meclizine hcl chew tab 25 mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
meclizine hcl tab 12.5 mg	Tier 1	QL (120 ea / 30 days); MAIL
meclizine hcl tab 25 mg	Tier 1	QL (120 ea / 30 days); MAIL
motion relf tab 25mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
motion sick chw 25mg	Tier 1	OTC, QL (120 ea / 30 days); MAIL
motion sick tab 25mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
motion sick tab 50mg	Tier 1	OTC; MAIL
scopolamine td patch 72hr 1 mg/3days	Tier 2	PA; AGE; MAIL; Covered for ages 64 and over
trav-tabs tab 50mg	Tier 1	OTC; MAIL
travel sick chw 25mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
travel sick tab 50mg	Tier 1	OTC; MAIL
trimethobenzamide hcl cap 300 mg	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
wal-dram ii tab 25mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
wal-dram tab 50mg	Tier 1	OTC; MAIL
Antiemetics - Miscellaneous		
AKYNZEO CAP 300-0.5	Tier 3	QL (Max day supply 5); MAIL
anti-nausea liq	Tier 1	OTC; MAIL
anti-nausea sol	Tier 1	OTC; MAIL
anti-nausea sol cherry	Tier 1	OTC; MAIL
anti-nausea sol liquid	Tier 1	OTC; MAIL
anti-nausea/ sol rekemat	Tier 1	OTC; MAIL
dronabinol cap 2.5 mg	Tier 2	QL (180 ea / 30 days)
dronabinol cap 5 mg	Tier 2	QL (180 caps / 30 days)
dronabinol cap 10 mg	Tier 2	
formula em sol	Tier 1	OTC; MAIL
little tummy sol nausea	Tier 1	OTC; MAIL
nausea contr sol	Tier 1	OTC; MAIL
nausea liq relief	Tier 1	OTC; MAIL
sb anti-naus sol	Tier 1	OTC; MAIL
Substance P/Neurokinin 1 (NK1) Receptor Antagonists		
aprepitant capsule 40 mg	Tier 2	PA; MAIL
aprepitant capsule 80 mg	Tier 2	PA; MAIL
aprepitant capsule 125 mg	Tier 2	PA; MAIL
aprepitant capsule therapy pack 80 & 125 mg	Tier 2	PA; MAIL
ANTIFUNGALS		
Antifungals		
flucytosine cap 250 mg	Tier 1	QL (1530 caps / 30 days), PA
flucytosine cap 500 mg	Tier 1	QL (765 caps / 30 days), PA
griseofulvin microsize susp 125 mg/5ml	Tier 1	QL (1200 mL / 30 days)
nystatin tab 500000 unit	Tier 1	QL (240 tabs / 30 days)
terbinafine hcl tab 250 mg	Tier 1	QL (Max day supply 28)
Imidazole-Related Antifungals		
CRESEMBA CAP 186 MG	Tier 4	PA
fluconazole for susp 10 mg/ml	Tier 1	QL (35mL per month); AGE; Covered for ages 12 and over

Drug Name	Drug Tier	Requirements/Limits
fluconazole for susp 40 mg/ml	Tier 1	QL (35mL per month); AGE; Covered for ages 12 and over
fluconazole tab 50 mg	Tier 1	QL (60 tabs / 30 days)
fluconazole tab 100 mg	Tier 1	QL (21 tabs / 25 days)
fluconazole tab 150 mg	Tier 1	QL (Max 1 fill per month)
fluconazole tab 200 mg	Tier 1	QL (21 tabs / 25 days)
itraconazole cap 100 mg	Tier 2	QL (120 caps / 30 days)
ketoconazole tab 200 mg	Tier 1	QL (60 tabs / 30 days)
voriconazole for inj 200 mg	Tier 4	PA
voriconazole tab 50 mg	Tier 4	QL (360 tabs / 30 days), PA
voriconazole tab 200 mg	Tier 4	QL (90 ea / 30 days), PA

ANTIHISTAMINES

Antihistamines - Alkylamines

aller-chlor syp 2mg/5ml	Tier 1	OTC; MAIL
allergy 4 hr tab 4mg	Tier 1	OTC; MAIL
allergy relf tab 4mg	Tier 1	OTC; MAIL
allergy relf tab 12mg cr	Tier 1	OTC, QL (60 ea / 30 days); MAIL
allergy tab 4mg	Tier 1	OTC; MAIL
allergy-time tab 4mg	Tier 1	OTC; MAIL
chlor-phenir tab 4mg	Tier 1	OTC; MAIL
chlorhist tab 4mg	Tier 1	OTC; MAIL
chlorpheniramine maleate tab 4 mg	Tier 1	OTC; MAIL
chlorpheniramine maleate tab er 12 mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
cvs allergy tab 4mg	Tier 1	OTC; MAIL
dexchlorpheniramine maleate oral soln 2 mg/5ml	Tier 1	AGE; MAIL; Covered for ages 64 and over
diabet tuss syp allergy	Tier 1	OTC; MAIL
ed chlorped syp jr	Tier 1	OTC; MAIL
ed-chlortan tab 4mg	Tier 1	OTC; MAIL
eq chlortabs tab 4mg	Tier 1	OTC; MAIL
eql allergy tab 4mg	Tier 1	OTC; MAIL
gnp allergy tab 4mg	Tier 1	OTC; MAIL
hm allergy tab 4mg	Tier 1	OTC; MAIL
pharbechlor tab 4mg	Tier 1	OTC; MAIL
ra chlorphen tab 4mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
sm allergy tab 4mg	Tier 1	OTC; MAIL
wal-finate tab 4mg	Tier 1	OTC; MAIL
Antihistamines - Ethanolamines		
a-s pls alrg tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
aler-cap cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
ALER-DRYL TAB 50MG	Tier 1	OTC, QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
alertab tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
allergy 25mg tab dye-free	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
allergy chld liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
allergy liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
allergy med cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
allergy med liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
allergy medi tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
allergy rel elx 12.5/5ml	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
allergy rel tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
allergy relf cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
allergy relf liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
allergy relf liq 50/20ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
allergy relf tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
allergy relf tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
allerhist-1 tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
allrgy melts tab 12.5mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
altaryl syp 12.5/5ml	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
anti-hist tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
antihistamin cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
banophen cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
banophen cap 50mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
banophen liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
banophen tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
carbinoxamine maleate soln 4 mg/5ml	Tier 1	MAIL
carbinoxamine maleate tab 4 mg	Tier 1	MAIL
chld allergy liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
clemastine fumarate syrup 0.67 mg/5ml (0.5 mg/5ml base eq)	Tier 1	QL (900 mL / 30 days); MAIL; Covered for ages 12 and over
clemastine fumarate tab 1.34 mg (1 mg base equiv)	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
clemastine fumarate tab 2.68 mg	Tier 1	QL (90 tabs / 30 days); MAIL
comp allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
comp allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
comp allergy tab 25mg med	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
comp allergy tab 25mg rlf	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
cvs allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
cvs allergy chw 12.5mg	Tier 1	OTC; MAIL; Covered for ages 12 and over
cvs allergy liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
cvs allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
dayhist alrg tab 12 hour	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
diphedryl liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
diphen tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
diphenhist cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
diphenhist liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
diphenhydramine hcl cap 25 mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
diphenhydramine hcl cap 50 mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
diphenhydramine hcl elixir 12.5 mg/5ml	Tier 1	QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
diphenhydramine hcl inj 50 mg/ml	Tier 1	AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
diphenhydramine hcl tab 25 mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
dytuss syp 12.5/5ml	Tier 1	QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
eq allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
eq dayhist tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
eql allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
genahist cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
geri-dryl cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
geri-dryl tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
gnp allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
gnp allergy chw 12.5mg	Tier 1	OTC; MAIL; Covered for ages 12 and over
gnp allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
gnp dayhist tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
hm allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
kls allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
medi-phedryl cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
ormir cap 50mg	Tier 1	OTC; AGE; MAIL
pediacare al liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
pharbedryl cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
pharbedryl cap 50mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
px allergy cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
px allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
px dayhist tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
q-dryl cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
q-dryl liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
quenalin syp 12.5/5ml	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
ra allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over

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Drug Name	Drug Tier	Requirements/Limits
sb allergy tab 25mg med	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
scot-tussin liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
siladryl alr liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
silphen coug syp 12.5/5ml	Tier 1	OTC, QL (2400 mL / 30 days); MAIL; Covered for ages 12 and over
sm allergy tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
total allerg liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
total allerg tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
wal-dryl alr tab 12.5mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
wal-dryl cap 25mg	Tier 1	OTC, QL (180 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
wal-dryl liq 12.5/5ml	Tier 1	OTC, QL (1800 mL / 30 days); MAIL; Covered for ages 12 and over
wal-dryl tab 25mg	Tier 1	OTC; AGE; MAIL; Covered for ages 64 and over
wal-hist tab 1.34mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
Antihistamines - Non-Sedating		
alavert tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over

Drug Name	Drug Tier	Requirements/Limits
all day allg sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
all day allg sol 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
all day allg tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ALLEGRA ALRG TAB 30MG	Tier 2	OTC, QL (60 tabs / 30 days); MAIL
aller-ease tab 60mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
aller-tec sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
aller-tec tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allerclear tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy chld sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
allergy comp sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
allergy rel sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
allergy rel tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf sol 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
allergy relf syp 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
allergy relf tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over

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Drug Name	Drug Tier	Requirements/Limits
allergy relf tab 60mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
cetirizine hcl tab 5 mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cetirizine hcl tab 10 mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cetirizine sol 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
cvs allergy tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
desloratadine tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
desloratadine tab orally disintegrating 2.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
desloratadine tab orally disintegrating 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
eql all day tab allergy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
fexofenadine hcl tab 60 mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
fexofenadine hcl tab 180 mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp all day tab allergy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp loratadin tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
levocetirizine dihydrochloride soln 2.5 mg/5ml (0.5 mg/ml)	Tier 1	QL (300 mL / 30 days); MAIL
levocetirizine dihydrochloride tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
loradamed tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
loratadine syp 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
loratadine tab 10 mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
loratadine tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over

Drug Name	Drug Tier	Requirements/Limits
qc allergy tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra cetirizin tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sb allergy tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm all day tab allergy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
triaminic tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over
wal-fex alrg tab 60mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
wal-itin syp 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
wal-itin tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
wal-itin tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over
wal-vert tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL; Covered for ages 12 and over
wal-zyr sol 1mg/ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
wal-zyr sol 5mg/5ml	Tier 1	OTC, QL (300 mL / 30 days); MAIL; Covered for ages 12 and over
wal-zyr tab 10mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
Antihistamines - Phenothiazines		
phenadoz sup 12.5mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
phenergan sup 25mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl inj 25 mg/ml	Tier 1	QL (3000 vials / 30 days); AGE; MAIL; Covered for ages 2-64

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Drug Name	Drug Tier	Requirements/Limits
promethazine hcl suppos 12.5 mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl suppos 25 mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl syrup 6.25 mg/5ml	Tier 1	QL (3000 mL / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl tab 12.5 mg	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl tab 25 mg	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
promethazine hcl tab 50 mg	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 2-64
promethegan sup 12.5mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
promethegan sup 25mg	Tier 2	QL (240 supp / 30 days); AGE; MAIL; Covered for ages 2-64
promethegan sup 50mg	Tier 2	QL (180 supp / 30 days), PA; AGE; MAIL; Covered for ages 2-64
Antihistamines - Piperidines		
cyproheptadine hcl syrup 2 mg/5ml	Tier 1	QL (600 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
cyproheptadine hcl tab 4 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ANTIHYPERLIPIDEMICS		
Antihyperlipidemics - Misc.		
omega-3-acid ethyl esters cap 1 gm	Tier 1	PA; MAIL
VASCEPA CAP 1GM	Tier 3	MAIL

Drug Name	Drug Tier	Requirements/Limits
Bile Acid Sequestrants		
cholestyramine light powder 4 gm/dose	Tier 1	QL (240 gm / 25 days); USE BULK POWDER; MAIL
cholestyramine powder 4 gm/dose	Tier 1	QL (1440 gm / 30 days); USE BULK POWDER; MAIL
colesevelam hcl packet for susp 3.75 gm	Tier 2	MAIL
colesevelam hcl tab 625 mg	Tier 2	QL (210 tabs / 30 days); MAIL
colestipol hcl tab 1 gm	Tier 1	QL (480 tabs / 30 days); MAIL
prevalite pow 4gm	Tier 1	QL (240 gm / 25 days); USE BULK POWDER; MAIL
WELCHOL PAK 3.75GM	Tier 3	MAIL
WELCHOL TAB 625MG	Tier 3	QL (210 tabs / 30 days); MAIL
Fibric Acid Derivatives		
choline fenofibrate cap dr 45 mg (fenofibric acid equiv)	Tier 1	QL (30 caps / 30 days); MAIL
fenofibrate micronized cap 43 mg	Tier 1	QL (30 caps / 30 days); MAIL
fenofibrate micronized cap 67 mg	Tier 1	QL (30 caps / 30 days); MAIL
fenofibrate micronized cap 134 mg	Tier 1	QL (30 caps / 30 days); MAIL
fenofibrate micronized cap 200 mg	Tier 1	QL (30 caps / 30 days); MAIL
fenofibrate tab 48 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fenofibrate tab 54 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fenofibrate tab 145 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fenofibrate tab 160 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fenofibric acid tab 35 mg	Tier 1	MAIL
gemfibrozil tab 600 mg	Tier 1	QL (120 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
HMG CoA Reductase Inhibitors		
atorvastatin calcium tab 10 mg (base equivalent)	PREV	QL (30 tabs / 30 days); MAIL
atorvastatin calcium tab 20 mg (base equivalent)	PREV	QL (30 tabs / 30 days); MAIL
atorvastatin calcium tab 40 mg (base equivalent)	PREV	QL (30 tabs / 30 days); MAIL
atorvastatin calcium tab 80 mg (base equivalent)	PREV	MAIL
fluvastatin sodium cap 20 mg (base equivalent)	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN FOR 30 DAYS
fluvastatin sodium cap 40 mg (base equivalent)	Tier 1	QL (60 caps / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN FOR 30 DAYS
fluvastatin sodium tab er 24 hr 80 mg (base equivalent)	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN FOR 30 DAYS
LIVALO TAB 1MG	Tier 3	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE ROSUVASTATIN FOR 30 DAYS
LIVALO TAB 2MG	Tier 3	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE ROSUVASTATIN FOR 30 DAYS
LIVALO TAB 4MG	Tier 3	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE ROSUVASTATIN FOR 30 DAYS
lovastatin tab 10 mg	PREV	QL (30 tabs / 30 days); MAIL
lovastatin tab 20 mg	PREV	QL (30 tabs / 30 days); MAIL
lovastatin tab 40 mg	PREV	QL (30 tabs / 30 days); MAIL
pravastatin sodium tab 10 mg	Tier 1	MAIL
pravastatin sodium tab 20 mg	Tier 1	MAIL
pravastatin sodium tab 40 mg	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
pravastatin sodium tab 80 mg	Tier 1	QL (30 tabs / 30 days); MAIL
rosuvastatin calcium tab 5 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN
rosuvastatin calcium tab 10 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN
rosuvastatin calcium tab 20 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN
rosuvastatin calcium tab 40 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE ATORVASTATIN
simvastatin tab 5 mg	PREV	QL (30 tabs / 30 days); MAIL
simvastatin tab 10 mg	PREV	QL (30 tabs / 30 days); MAIL
simvastatin tab 20 mg	PREV	QL (30 tabs / 30 days); MAIL
simvastatin tab 40 mg	PREV	QL (30 tabs / 30 days); MAIL
Intestinal Cholesterol Absorption Inhibitors		
ezetimibe tab 10 mg	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE FORMULARY STATIN
Nicotinic Acid Derivatives		
niacin tab er 500 mg (antihyperlipidemic)	Tier 1	QL (120 tabs / 30 days); MAIL
niacor tab 500mg	Tier 1	QL (120 tabs / 30 days); MAIL
ANTIHYPERTENSIVES		
ACE Inhibitors		
benazepril hcl tab 5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
benazepril hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
benazepril hcl tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
benazepril hcl tab 40 mg	Tier 1	QL (90 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
captopril tab 12.5 mg	Tier 1	QL (180 tabs / 30 days); MAIL
captopril tab 25 mg	Tier 1	QL (180 tabs / 30 days); MAIL
captopril tab 50 mg	Tier 1	QL (180 tabs / 30 days); MAIL
captopril tab 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
enalapril maleate tab 2.5 mg	Tier 1	QL (60 ea / 30 days); MAIL
enalapril maleate tab 5 mg	Tier 1	QL (30 ea / 30 days); MAIL
enalapril maleate tab 10 mg	Tier 1	QL (30 ea / 30 days); MAIL
enalapril maleate tab 20 mg	Tier 1	QL (60 ea / 30 days); MAIL
fosinopril sodium tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fosinopril sodium tab 20 mg	Tier 1	QL (30 tabs / 30 days); MAIL
fosinopril sodium tab 40 mg	Tier 1	QL (30 tabs / 30 days); MAIL
lisinopril tab 2.5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
lisinopril tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
lisinopril tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
lisinopril tab 20 mg	Tier 1	QL (30 tabs / 30 days); MAIL
lisinopril tab 30 mg	Tier 1	QL (60 tabs / 30 days); MAIL
lisinopril tab 40 mg	Tier 1	QL (60 tabs / 30 days); MAIL
moexipril hcl tab 7.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
moexipril hcl tab 15 mg	Tier 1	QL (60 tabs / 30 days); MAIL
perindopril erbumine tab 2 mg	Tier 1	QL (60 tabs / 30 days); MAIL
perindopril erbumine tab 4 mg	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
perindopril erbumine tab 8 mg	Tier 1	QL (30 tabs / 30 days); MAIL
quinapril hcl tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
quinapril hcl tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
quinapril hcl tab 20 mg	Tier 1	QL (30 tabs / 30 days); MAIL
quinapril hcl tab 40 mg	Tier 1	QL (60 tabs / 30 days); MAIL
ramipril cap 1.25 mg	Tier 1	QL (60 caps / 30 days); MAIL
ramipril cap 2.5 mg	Tier 1	QL (90 caps / 30 days); MAIL
ramipril cap 5 mg	Tier 1	QL (120 caps / 30 days); MAIL
ramipril cap 10 mg	Tier 1	QL (60 caps / 30 days); MAIL
trandolapril tab 1 mg	Tier 1	QL (60 tabs / 30 days); MAIL
trandolapril tab 2 mg	Tier 1	QL (60 tabs / 30 days); MAIL
trandolapril tab 4 mg	Tier 1	QL (60 tabs / 30 days); MAIL
Agents for Pheochromocytoma		
phenoxybenzamine hcl cap 10 mg	Tier 2	QL (360 caps / 30 days); MAIL
Angiotensin II Receptor Antagonists		
candesartan cilexetil tab 4 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
candesartan cilexetil tab 8 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
candesartan cilexetil tab 16 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
candesartan cilexetil tab 32 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN

Drug Name	Drug Tier	Requirements/Limits
EDARBI TAB 40MG	Tier 3	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE CANDESARTAN AND VALSARTAN FOR 30 DAYS
EDARBI TAB 80MG	Tier 3	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE CANDESARTAN AND VALSARTAN FOR 30 DAYS
eprosartan mesylate tab 600 mg	Tier 1	QL (40.2 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
irbesartan tab 75 mg	Tier 1	MAIL
irbesartan tab 150 mg	Tier 1	MAIL
irbesartan tab 300 mg	Tier 1	MAIL
losartan potassium tab 25 mg	Tier 1	QL (30 tabs / 30 days); MAIL
losartan potassium tab 50 mg	Tier 1	QL (30 tabs / 30 days); MAIL
losartan potassium tab 100 mg	Tier 1	QL (30 tabs / 30 days); MAIL
olmesartan medoxomil tab 5 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
olmesartan medoxomil tab 20 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
olmesartan medoxomil tab 40 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
telmisartan tab 20 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE CANDESARTAN AND VALSARTAN FOR 30 DAYS
telmisartan tab 40 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE CANDESARTAN AND VALSARTAN FOR 30 DAYS
telmisartan tab 80 mg	Tier 1	ST; MAIL; PRIOR USE CANDESARTAN AND VALSARTAN FOR 30 DAYS

Drug Name	Drug Tier	Requirements/Limits
TEVETEN TAB 400MG	Tier 3	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
valsartan tab 40 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
valsartan tab 80 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
valsartan tab 160 mg	Tier 1	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
valsartan tab 320 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE LOSARTAN
Antiadrenergic Antihypertensives		
clonidine hcl tab 0.1 mg	Tier 1	QL (180 tabs / 30 days); MAIL
clonidine hcl tab 0.2 mg	Tier 1	QL (180 tabs / 30 days); MAIL
clonidine hcl tab 0.3 mg	Tier 1	QL (120 tabs / 30 days); MAIL
doxazosin mesylate tab 1 mg	Tier 1	QL (30 tabs / 30 days); MAIL
doxazosin mesylate tab 2 mg	Tier 1	QL (30 tabs / 30 days); MAIL
doxazosin mesylate tab 4 mg	Tier 1	QL (30 tabs / 30 days); MAIL
doxazosin mesylate tab 8 mg	Tier 1	QL (60 tabs / 30 days); MAIL
guanfacine hcl tab 1 mg	Tier 1	QL (60 tabs / 30 days); MAIL
guanfacine hcl tab 2 mg	Tier 1	QL (60 tabs / 30 days); MAIL
methyldopa tab 250 mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
methyldopa tab 500 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
prazosin hcl cap 1 mg	Tier 1	QL (180 caps / 30 days); MAIL

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prazosin hcl cap 2 mg	Tier 1	QL (180 caps / 30 days); MAIL
prazosin hcl cap 5 mg	Tier 1	QL (180 caps / 30 days); MAIL
terazosin hcl cap 1 mg (base equivalent)	Tier 1	QL (30 caps / 30 days); MAIL
terazosin hcl cap 2 mg (base equivalent)	Tier 1	QL (60 ea / 30 days); MAIL
terazosin hcl cap 5 mg (base equivalent)	Tier 1	QL (30 ea / 30 days); MAIL
terazosin hcl cap 10 mg (base equivalent)	Tier 1	QL (60 caps / 30 days); MAIL
Antihypertensive Combinations		
atenolol & chlorthalidone tab 50-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
atenolol & chlorthalidone tab 100-25 mg	Tier 1	QL (30 tabs / 30 days); MAIL
benazepril & hydrochlorothiazide tab 5-6.25 mg	Tier 1	QL (30 tabs / 30 days); MAIL
benazepril & hydrochlorothiazide tab 10-12.5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
benazepril & hydrochlorothiazide tab 20-12.5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
benazepril & hydrochlorothiazide tab 20-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
bisoprolol & hydrochlorothiazide tab 5-6.25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
bisoprolol & hydrochlorothiazide tab 10-6.25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
BYVALSON TAB 5-80MG	Tier 3	PA; MAIL
captopril & hydrochlorothiazide tab 25-15 mg	Tier 1	QL (60 tabs / 30 days); MAIL
captopril & hydrochlorothiazide tab 25-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
captopril & hydrochlorothiazide tab 50-15 mg	Tier 1	QL (60 tabs / 30 days); MAIL
captopril & hydrochlorothiazide tab 50-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
enalapril maleate & hydrochlorothiazide tab 10-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
irbesartan-hydrochlorothiazide tab 150-12.5 mg	Tier 1	MAIL
irbesartan-hydrochlorothiazide tab 300-12.5 mg	Tier 1	MAIL
lisinopril & hydrochlorothiazide tab 10-12.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
lisinopril & hydrochlorothiazide tab 20-12.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
lisinopril & hydrochlorothiazide tab 20-25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
losartan potassium & hydrochlorothiazide tab 50-12.5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
losartan potassium & hydrochlorothiazide tab 100-12.5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
losartan potassium & hydrochlorothiazide tab 100-25 mg	Tier 1	QL (30 tabs / 30 days); MAIL
quinapril-hydrochlorothiazide tab 10-12.5 mg	Tier 1	MAIL
quinapril-hydrochlorothiazide tab 20-12.5 mg	Tier 1	MAIL
quinapril-hydrochlorothiazide tab 20-25 mg	Tier 1	MAIL
valsartan-hydrochlorothiazide tab 80-12.5 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
valsartan-hydrochlorothiazide tab 160-12.5 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
valsartan-hydrochlorothiazide tab 160-25 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
valsartan-hydrochlorothiazide tab 320-12.5 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
valsartan-hydrochlorothiazide tab 320-25 mg	Tier 1	ST; MAIL; PRIOR USE LOSARTAN
Direct Renin Inhibitors		
TEKTURNA TAB 150MG	Tier 3	QL (60 ea / 30 days), PA; MAIL
TEKTURNA TAB 300MG	Tier 3	QL (30 ea / 30 days), PA; MAIL

Drug Name	Drug Tier	Requirements/Limits
Selective Aldosterone Receptor Antagonists (SARAs)		
eplerenone tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
eplerenone tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
Vasodilators		
hydralazine hcl tab 10 mg	Tier 1	QL (300 tabs / 30 days); MAIL
hydralazine hcl tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
hydralazine hcl tab 50 mg	Tier 1	QL (240 tabs / 30 days); MAIL
hydralazine hcl tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
minoxidil tab 2.5 mg	Tier 1	QL (150 ea / 30 days); MAIL
minoxidil tab 10 mg	Tier 1	QL (150 ea / 30 days); MAIL
ANTIMALARIALS		
Antimalarial Combinations		
atovaquone-proguanil hcl tab 62.5-25 mg	Tier 1	
atovaquone-proguanil hcl tab 250-100 mg	Tier 1	
COARTEM TAB 20-120MG	Tier 3	
Antimalarials		
chloroquine phosphate tab 250 mg	Tier 1	
chloroquine phosphate tab 500 mg	Tier 1	
DARAPRIM TAB 25MG	Tier 3	QL (120 tabs / 30 days), PA
hydroxychloroquine sulfate tab 200 mg	Tier 1	QL (120 tabs / 30 days); MAIL
mefloquine hcl tab 250 mg	Tier 1	QL (120 tabs / 30 days)
PRIMAQUINE TAB 26.3MG	Tier 2	QL (120 tabs / 30 days), PA
quinine sulfate cap 324 mg	Tier 2	QL (30 caps / 25 days)
ANTIMETABOLITES		
ANTIMETABOLITES		
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	Tier 1	MAIL
methotrexate sodium inj 250 mg/10ml (25 mg/ml)	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml)	Tier 1	MAIL
methotrexate sodium inj pf 100 mg/4ml (25 mg/ml)	Tier 1	MAIL
methotrexate sodium inj pf 200 mg/8ml (25 mg/ml)	Tier 1	MAIL
methotrexate sodium inj pf 250 mg/10ml (25 mg/ml)	Tier 1	MAIL
methotrexate sodium inj pf 1000 mg/40ml (25 mg/ml)	Tier 1	MAIL
ANTIMYASTHENIC AGENTS		
Antimyasthenic Agents		
GUANIDINE TAB 125MG	Tier 3	MAIL
MYTELASE TAB 10MG	Tier 3	MAIL
pyridostigmine bromide tab 60 mg	Tier 1	QL (180 tabs / 30 days); MAIL
ANTIMYCOBACTERIAL AGENTS		
Anti TB Combinations		
isonarif cap	Tier 1	QL (60 caps / 30 days)
RIFATER TAB	Tier 3	QL (180 tabs / 30 days), PA
Antimycobacterial Agents		
cycloserine cap 250 mg	Tier 1	
ethambutol hcl tab 100 mg	Tier 1	QL (150 tabs / 30 days)
ethambutol hcl tab 400 mg	Tier 1	QL (150 tabs / 30 days)
isoniazid syrup 50 mg/5ml	Tier 2	QL (900 mL / 30 days)
isoniazid tab 100 mg	Tier 1	QL (180 tabs / 30 days)
isoniazid tab 300 mg	Tier 1	QL (90 tabs / 30 days)
PASER GRA 4GM	Tier 3	
PRIFTIN TAB 150MG	Tier 2	QL (32 tabs / 30 days)
pyrazinamide tab 500 mg	Tier 2	QL (180 tabs / 30 days)
rifabutin cap 150 mg	Tier 2	
rifampin cap 150 mg	Tier 1	QL (240 caps / 30 days)
rifampin cap 300 mg	Tier 1	QL (120 ea / 30 days)
TRECATOR TAB 250MG	Tier 3	
ANTINEOPLASTIC - IMMUNOMODULATORS		
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST CAP 1MG	Tier 4	PA
POMALYST CAP 2MG	Tier 4	PA
POMALYST CAP 3MG	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
POMALYST CAP 4MG	Tier 4	PA
ANTINEOPLASTIC COMBINATIONS		
ANTINEOPLASTIC COMBINATIONS		
LONSURF TAB 15-6.14	Tier 4	PA
LONSURF TAB 20-8.19	Tier 4	PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
Alkylating Agents		
cyclophosphamide cap 25 mg	Tier 2	PA; MAIL
CYCLOPHOSPHAMIDE CAP 25 MG	Tier 3	PA; MAIL
cyclophosphamide cap 50 mg	Tier 2	PA; MAIL
CYCLOPHOSPHAMIDE CAP 50 MG	Tier 3	PA; MAIL
cyclophosphamide tab 25 mg	Tier 1	QL (480 tabs / 30 days), PA; MAIL
cyclophosphamide tab 50 mg	Tier 1	QL (480 tabs / 30 days), PA; MAIL
GLEOSTINE CAP 5MG	Tier 4	PA
GLEOSTINE CAP 10MG	Tier 4	PA
GLEOSTINE CAP 40MG	Tier 4	PA
GLEOSTINE CAP 100MG	Tier 4	PA
HEXALEN CAP 50MG	Tier 4	PA
LEUKERAN TAB 2MG	Tier 3	QL (240 tabs / 30 days), PA; MAIL
lomustine cap 10 mg	Tier 4	PA
lomustine cap 40 mg	Tier 4	PA
lomustine cap 100 mg	Tier 4	PA
melphalan hcl for inj 50 mg (base equiv)	Tier 4	PA
melphalan tab 2 mg	Tier 1	PA; MAIL
temozolomide cap 5 mg	Tier 4	PA
temozolomide cap 20 mg	Tier 4	PA
temozolomide cap 100 mg	Tier 4	PA
temozolomide cap 140 mg	Tier 4	PA
temozolomide cap 180 mg	Tier 4	PA
temozolomide cap 250 mg	Tier 4	PA
Antimetabolites		
capecitabine tab 150 mg	Tier 4	PA
capecitabine tab 500 mg	Tier 4	PA
mercaptopurine tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
methotrexate sodium tab 2.5 mg (base equiv)	Tier 1	QL (720 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
TABLOID TAB 40MG	Tier 3	QL (210 tabs / 30 days), PA; MAIL
Antineoplastic - Antibodies		
RITUXAN INJ 100MG	Tier 4	PA
RITUXAN INJ 500MG	Tier 4	PA
Antineoplastic - Hedgehog Pathway Inhibitors		
ERIVEDGE CAP 150MG	Tier 4	QL (Max day supply 14), PA
ODOMZO CAP 200MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
Antineoplastic - Hormonal and Related Agents		
anastrozole tab 1 mg	Tier 1	MAIL
bicalutamide tab 50 mg	Tier 1	MAIL
EMCYT CAP 140MG	Tier 3	QL (300 caps / 30 days), PA; MAIL
exemestane tab 25 mg	Tier 2	PA; MAIL
FARESTON TAB 60MG	Tier 3	PA; MAIL
FIRMAGON INJ 80MG	Tier 4	PA
FIRMAGON INJ 120MG	Tier 4	PA
flutamide cap 125 mg	Tier 1	QL (180 caps / 30 days), PA; MAIL
hydroxyprogesterone caproate im in oil 1.25 gm/5ml	Tier 3	PA
letrozole tab 2.5 mg	Tier 1	QL (30 tabs / 30 days), PA; MAIL
leuprolide acetate inj kit 5 mg/ml	Tier 4	QL (6 kits / 30 days), PA
LUPRON DEPOT INJ 3.75MG	Tier 4	PA
LUPRON DEPOT INJ 22.5MG	Tier 4	PA
LYSODREN TAB 500MG	Tier 3	PA; MAIL
megestrol acetate susp 40 mg/ml	Tier 1	QL (1200 mL / 30 days); MAIL
megestrol acetate tab 20 mg	Tier 1	QL (1200 tabs / 30 days); MAIL
megestrol acetate tab 40 mg	Tier 1	QL (600 tabs / 30 days); MAIL
nilutamide tab 150 mg	Tier 1	PA; MAIL
tamoxifen citrate tab 10 mg (base equivalent)	Tier 1	QL (60 tabs / 30 days); $0 Copay for Breast Cancer Prevention for Women age 35+; MAIL

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QL – Quantity Limits **OTC** – Over the Counter **MAIL** – Mail Order Available
MED - Max 90 mg Morphine EQ Dose Per Day
Tier 1 = Generics; Low cost preferred brand
Tier 2 = Non-Preferred generics; Preferred brand name drugs
Tier 3 = Non-preferred brand name drugs; **Tier 4** = Specialty Drugs
PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
tamoxifen citrate tab 20 mg (base equivalent)	Tier 1	QL (60 tabs / 30 days); $0 Copay for Breast Cancer Prevention for Women age 35+; MAIL
TRELSTAR MIX INJ 3.75MG	Tier 4	PA
TRELSTAR MIX INJ 11.25MG	Tier 4	PA
TRELSTAR MIX INJ 22.5MG	Tier 4	PA
ZOLADEX IMP 3.6MG	Tier 4	QL (1 ea / 24 days), PA
ZOLADEX IMP 10.8MG	Tier 4	QL (1 ea / 75 days), PA
ZYTIGA TAB 250MG	Tier 4	QL (Max day supply 15), PA
Antineoplastic Enzyme Inhibitors		
AFINITOR DIS TAB 2MG	Tier 4	QL (Max day supply 14), PA
AFINITOR DIS TAB 3MG	Tier 4	QL (Max day supply 14), PA
AFINITOR DIS TAB 5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 2.5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 7.5MG	Tier 4	QL (Max day supply 14), PA
AFINITOR TAB 10MG	Tier 4	QL (Max day supply 14), PA
CAPRELSA TAB 100MG	Tier 4	PA
CAPRELSA TAB 300MG	Tier 4	PA
COMETRIQ KIT 60MG	Tier 4	PA
COMETRIQ KIT 100MG	Tier 4	PA
COMETRIQ KIT 140MG	Tier 4	PA
FARYDAK CAP 10MG	Tier 4	PA
FARYDAK CAP 15MG	Tier 4	PA
FARYDAK CAP 20MG	Tier 4	PA
GILOTRIF TAB 20MG	Tier 4	PA
GILOTRIF TAB 30MG	Tier 4	PA
GILOTRIF TAB 40MG	Tier 4	PA
IBRANCE CAP 75MG	Tier 4	PA
IBRANCE CAP 100MG	Tier 4	PA
IBRANCE CAP 125MG	Tier 4	PA
ICLUSIG TAB 15MG	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
ICLUSIG TAB 45MG	Tier 4	PA
imatinib mesylate tab 100 mg (base equivalent)	Tier 4	QL (Max day supply 15; Max 6 per day), PA
imatinib mesylate tab 400 mg (base equivalent)	Tier 4	QL (Max day supply 15; Max 2 per day), PA
IMBRUVICA CAP 140MG	Tier 4	PA
JAKAFI TAB 5MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 10MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 15MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 20MG	Tier 4	QL (Max day supply 15), PA
JAKAFI TAB 25MG	Tier 4	QL (Max day supply 15), PA
LENVIMA CAP 10 MG	Tier 4	PA
LENVIMA CAP 14 MG	Tier 4	PA
LENVIMA CAP 20 MG	Tier 4	PA
LENVIMA CAP 24 MG	Tier 4	PA
LYNPARZA CAP 50MG	Tier 4	PA
LYNPARZA TAB 100MG	Tier 4	PA
LYNPARZA TAB 150MG	Tier 4	PA
MEKINIST TAB 0.5MG	Tier 4	QL (Max day supply 15; Max 4 per day), PA
MEKINIST TAB 2MG	Tier 4	PA
NEXAVAR TAB 200MG	Tier 4	QL (Max day supply 15; Max 4 per day), PA
SPRYCEL TAB 20MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 50MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 70MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 80MG	Tier 4	QL (Max day supply 15), PA
SPRYCEL TAB 100MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
SPRYCEL TAB 140MG	Tier 4	QL (Max day supply 15; Max 1 per day), PA
STIVARGA TAB 40MG	Tier 4	PA

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Tier 3 = Non-preferred brand name drugs; **Tier 4** = Specialty Drugs
PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
SUTENT CAP 12.5MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 25MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 37.5MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
SUTENT CAP 50MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
TAFINLAR CAP 50MG	Tier 4	QL (Max day supply 15), PA
TAFINLAR CAP 75MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 25MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 100MG	Tier 4	QL (Max day supply 15), PA
TARCEVA TAB 150MG	Tier 4	QL (Max day supply 15), PA
TASIGNA CAP 150MG	Tier 4	QL (Max day supply 14), PA
TASIGNA CAP 200MG	Tier 4	QL (Max day supply 14), PA
TYKERB TAB 250MG	Tier 4	QL (180 tabs / 30 days), PA
VOTRIENT TAB 200MG	Tier 4	QL (Max day supply 15), PA
XALKORI CAP 200MG	Tier 4	QL (Max day supply 15), PA
XALKORI CAP 250MG	Tier 4	QL (Max day supply 15), PA
ZOLINZA CAP 100MG	Tier 4	QL (Max day supply 15), PA
ZYDELIG TAB 150MG	Tier 4	PA
ZYKADIA CAP 150MG	Tier 4	QL (Max day supply 14), PA
Antineoplastics Misc.		
ACTIMMUNE INJ 2MU/0.5	Tier 4	PA
bexarotene cap 75 mg	Tier 4	QL (Max day supply 15), PA
hydroxyurea cap 500 mg	Tier 1	QL (720 ea / 30 days); MAIL
INTRON A INJ 10MU	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
INTRON A INJ 18MU	Tier 4	PA
INTRON A INJ 25MU	Tier 4	PA
INTRON A INJ 50MU	Tier 4	PA
MATULANE CAP 50MG	Tier 3	PA; MAIL
tretinoin cap 10 mg	Tier 2	PA; MAIL
Chemotherapy Adjuncts		
KEPIVANCE INJ 6.25MG	Tier 4	PA
Chemotherapy Rescue/Antidote Agents		
leucovorin calcium tab 5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
leucovorin calcium tab 10 mg	Tier 1	MAIL
leucovorin calcium tab 15 mg	Tier 1	MAIL
leucovorin calcium tab 25 mg	Tier 1	MAIL
Mitotic Inhibitors		
etoposide cap 50 mg	Tier 4	PA; MAIL
etoposide inj 20mg/ml	Tier 4	PA
etoposide inj 100 mg/5ml (20 mg/ml)	Tier 4	PA
toposar inj 100/5ml	Tier 4	PA
toposar inj 200/10ml	Tier 4	PA
toposar inj 500/25ml	Tier 4	PA
Topoisomerase I Inhibitors		
topotecan hcl for inj 4 mg (base equiv)	Tier 3	PA; MAIL
ANTIPARKINSON AGENTS		
Antiparkinson Adjuvants		
carbidopa tab 25 mg	Tier 2	QL (240 tabs / 30 days); MAIL
Antiparkinson Anticholinergics		
benztropine mesylate tab 0.5 mg	Tier 1	QL (150 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
benztropine mesylate tab 1 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
benztropine mesylate tab 2 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
trihexyphenidyl hcl elixir 0.4 mg/ml	Tier 1	PA; AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
trihexyphenidyl hcl tab 2 mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
trihexyphenidyl hcl tab 5 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
Antiparkinson COMT Inhibitors		
entacapone tab 200 mg	Tier 2	QL (240 tabs / 30 days); MAIL
tolcapone tab 100 mg	Tier 1	MAIL
Antiparkinson Dopaminergics		
amantadine hcl cap 100 mg	Tier 1	QL (120 ea / 30 days); MAIL
amantadine hcl syrup 50 mg/5ml	Tier 1	MAIL
APOKYN INJ	Tier 4	PA
APOKYN INJ 10MG/ML	Tier 4	PA
bromocriptine mesylate cap 5 mg (base equivalent)	Tier 2	QL (180 caps / 30 days); MAIL
bromocriptine mesylate tab 2.5 mg (base equivalent)	Tier 2	QL (180 tabs / 30 days); MAIL
carbidopa & levodopa tab 10-100 mg	Tier 1	QL (240 tabs / 30 days); MAIL
carbidopa & levodopa tab 25-100 mg	Tier 1	QL (360 ea / 30 days); MAIL
carbidopa & levodopa tab 25-250 mg	Tier 1	QL (240 ea / 30 days); MAIL
carbidopa & levodopa tab er 25-100 mg	Tier 1	QL (120 ea / 30 days); MAIL
carbidopa & levodopa tab er 25-100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
carbidopa & levodopa tab er 50-200 mg	Tier 1	QL (240 ea / 30 days); MAIL
carbidopa & levodopa tab er 50-200 mg	Tier 1	QL (240 tabs / 30 days); MAIL
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	Tier 2	QL (240 tabs / 30 days); MAIL
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	Tier 2	QL (240 tabs / 30 days); MAIL
carbidopa-levodopa-entacapone tabs 25-100-200 mg	Tier 2	QL (240 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	Tier 2	QL (240 tabs / 30 days); MAIL
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	Tier 2	QL (240 tabs / 30 days); MAIL
carbidopa-levodopa-entacapone tabs 50-200-200 mg	Tier 2	QL (180 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 0.5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 0.25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 0.75 mg	Tier 1	QL (180 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 0.125 mg	Tier 1	QL (90 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 1 mg	Tier 1	QL (90 tabs / 30 days); MAIL
pramipexole dihydrochloride tab 1.5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
ropinirole hydrochloride tab 0.5 mg	Tier 1	QL (180 tabs / 30 days); MAIL
ropinirole hydrochloride tab 0.25 mg	Tier 1	QL (360 tabs / 30 days); MAIL
ropinirole hydrochloride tab 1 mg	Tier 1	QL (360 tabs / 30 days); MAIL
ropinirole hydrochloride tab 2 mg	Tier 1	QL (360 tabs / 30 days); MAIL
ropinirole hydrochloride tab 3 mg	Tier 1	QL (360 tabs / 30 days); MAIL
ropinirole hydrochloride tab 4 mg	Tier 1	QL (360 tabs / 30 days); MAIL
ropinirole hydrochloride tab 5 mg	Tier 1	QL (360 tabs / 30 days); MAIL
Antiparkinson Monoamine Oxidase Inhibitors		
rasagiline mesylate tab 0.5 mg (base equiv)	Tier 2	QL (60 tabs / 30 days); MAIL
rasagiline mesylate tab 1 mg (base equiv)	Tier 2	QL (30 tabs / 30 days); MAIL
selegiline hcl cap 5 mg	Tier 2	QL (60 caps / 30 days); MAIL
selegiline hcl tab 5 mg	Tier 2	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
Antimanic Agents		
lithium carbonate cap 150 mg	Tier 1	QL (360 caps / 30 days); MAIL; Covered for ages 6 and over
lithium carbonate cap 300 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
lithium carbonate cap 600 mg	Tier 1	QL (180 caps / 30 days); MAIL
lithium carbonate tab 300 mg	Tier 1	MAIL
lithium carbonate tab er 300 mg	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
lithium carbonate tab er 450 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
LITHIUM SOL 8MEQ/5ML	Tier 2	MAIL
Antipsychotics - Misc.		
LATUDA TAB 20MG	Tier 2	PA; MAIL
LATUDA TAB 40MG	Tier 2	PA; MAIL
LATUDA TAB 60MG	Tier 2	PA; MAIL
LATUDA TAB 80MG	Tier 2	PA; MAIL
LATUDA TAB 120MG	Tier 2	PA; MAIL
VRAYLAR CAP 1.5MG	Tier 3	PA; MAIL
VRAYLAR CAP 3MG	Tier 3	PA; MAIL
VRAYLAR CAP 4.5MG	Tier 3	PA; MAIL
VRAYLAR CAP 6MG	Tier 3	PA; MAIL
ziprasidone hcl cap 20 mg	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
ziprasidone hcl cap 40 mg	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
ziprasidone hcl cap 60 mg	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over
ziprasidone hcl cap 80 mg	Tier 2	QL (60 caps / 30 days); MAIL; Covered for ages 16 and over

Drug Name	Drug Tier	Requirements/Limits
Benzisoxazoles		
FANAPT PAK	Tier 3	PA; MAIL
FANAPT TAB 1MG	Tier 3	PA; MAIL
FANAPT TAB 2MG	Tier 3	PA; MAIL
FANAPT TAB 4MG	Tier 3	PA; MAIL
FANAPT TAB 6MG	Tier 3	PA; MAIL
FANAPT TAB 8MG	Tier 3	PA; MAIL
FANAPT TAB 10MG	Tier 3	PA; MAIL
FANAPT TAB 12MG	Tier 3	PA; MAIL
INVEGA SUST INJ 39/0.25	Tier 3	QL (.25 injections / 25 days); MAIL
INVEGA SUST INJ 78/0.5ML	Tier 3	QL (.5 injections / 25 days); MAIL
INVEGA SUST INJ 117/0.75	Tier 3	QL (.75 injections / 25 days); MAIL
INVEGA SUST INJ 156MG/ML	Tier 3	QL (1 injection / 25 days); MAIL
INVEGA SUST INJ 234/1.5	Tier 3	QL (1.5 injections / 25 days); MAIL
INVEGA TRINZ INJ 273MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 410MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 546MG	Tier 3	QL (Max day supply 90), PA; MAIL
INVEGA TRINZ INJ 819MG	Tier 3	QL (Max day supply 90), PA; MAIL
paliperidone tab er 24hr 1.5 mg	Tier 2	PA; MAIL
paliperidone tab er 24hr 3 mg	Tier 2	PA; MAIL
paliperidone tab er 24hr 6 mg	Tier 2	PA; MAIL
paliperidone tab er 24hr 9 mg	Tier 2	PA; MAIL
RISPERDAL INJ 12.5MG	Tier 3	QL (Max day supply 28); MAIL
RISPERDAL INJ 25MG	Tier 3	QL (Max day supply 28); MAIL
RISPERDAL INJ 37.5MG	Tier 3	QL (Max day supply 28); MAIL
RISPERDAL INJ 50MG	Tier 3	QL (Max day supply 28); MAIL

Drug Name	Drug Tier	Requirements/Limits
risperidone orally disintegrating tab 0.5 mg	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone orally disintegrating tab 0.25 mg	Tier 2	MAIL
risperidone orally disintegrating tab 1 mg	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone orally disintegrating tab 2 mg	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone orally disintegrating tab 3 mg	Tier 2	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone orally disintegrating tab 4 mg	Tier 2	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone soln 1 mg/ml	Tier 1	QL (480 mL / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 0.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 0.25 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 1 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 2 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 3 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
risperidone tab 4 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
Butyrophenones		
haloperidol decanoate im soln 50 mg/ml	Tier 1	MAIL
haloperidol decanoate im soln 100 mg/ml	Tier 1	MAIL
haloperidol lactate inj 5 mg/ml	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
haloperidol lactate oral conc 2 mg/ml	Tier 1	MAIL
haloperidol tab 0.5 mg	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
haloperidol tab 1 mg	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
haloperidol tab 2 mg	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
haloperidol tab 5 mg	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
haloperidol tab 10 mg	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
haloperidol tab 20 mg	Tier 1	QL (150 tabs / 30 days); MAIL; Covered for ages 6 and over
Dibenzapines		
clozapine tab 25 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
clozapine tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
clozapine tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
clozapine tab 200 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
loxapine succinate cap 5 mg	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
loxapine succinate cap 10 mg	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
loxapine succinate cap 25 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over

Drug Name	Drug Tier	Requirements/Limits
loxapine succinate cap 50 mg	Tier 1	QL (450 caps / 30 days); MAIL; Covered for ages 6 and over
olanzapine tab 2.5 mg	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
olanzapine tab 5 mg	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
olanzapine tab 7.5 mg	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
olanzapine tab 10 mg	Tier 2	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
olanzapine tab 15 mg	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
olanzapine tab 20 mg	Tier 2	QL (30 ea / 30 days), ST; MAIL; PRIOR USE RISPERIDONE OR QUETIAPINE; Covered for ages 6 and over
quetiapine fumarate tab 25 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
quetiapine fumarate tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
quetiapine fumarate tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over

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Drug Name	Drug Tier	Requirements/Limits
quetiapine fumarate tab 200 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
quetiapine fumarate tab 300 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
quetiapine fumarate tab 400 mg	Tier 1	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
quetiapine fumarate tab er 24hr 50 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
quetiapine fumarate tab er 24hr 150 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
quetiapine fumarate tab er 24hr 200 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
quetiapine fumarate tab er 24hr 300 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
quetiapine fumarate tab er 24hr 400 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 16 and over
SAPHRIS SUB 5MG	Tier 2	PA; MAIL
SAPHRIS SUB 10MG	Tier 2	PA; MAIL
Phenothiazines		
chlorpromazine hcl tab 10 mg	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
chlorpromazine hcl tab 25 mg	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
chlorpromazine hcl tab 50 mg	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
chlorpromazine hcl tab 100 mg	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over
chlorpromazine hcl tab 200 mg	Tier 2	QL (360 tabs / 30 days); MAIL; Covered for ages 6 and over

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compro sup 25mg	Tier 2	QL (360 supp / 30 days); MAIL
fluphenazine decanoate inj 25 mg/ml	Tier 1	MAIL
fluphenazine hcl inj 2.5 mg/ml	Tier 1	MAIL
fluphenazine hcl tab 1 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
fluphenazine hcl tab 2.5 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
fluphenazine hcl tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
fluphenazine hcl tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
perphenazine tab 2 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 6-64
perphenazine tab 4 mg	Tier 1	QL (90 ea / 30 days); AGE; MAIL; Covered for ages 6-64
perphenazine tab 8 mg	Tier 1	QL (90 ea / 30 days); AGE; MAIL; Covered for ages 6-64
perphenazine tab 16 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 6-64
prochlorperazine maleate tab 5 mg (base equivalent)	Tier 1	QL (300 tabs / 30 days); MAIL; Covered for ages 6 and over
prochlorperazine maleate tab 10 mg (base equivalent)	Tier 1	QL (240 tabs / 30 days); MAIL; Covered for ages 6 and over
prochlorperazine suppos 25 mg	Tier 2	QL (360 supp / 30 days); MAIL
thioridazine hcl tab 10 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
thioridazine hcl tab 25 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

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Drug Name	Drug Tier	Requirements/Limits
thioridazine hcl tab 50 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
thioridazine hcl tab 100 mg	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
trifluoperazine hcl tab 1 mg (base equivalent)	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
trifluoperazine hcl tab 2 mg (base equivalent)	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
trifluoperazine hcl tab 5 mg (base equivalent)	Tier 1	QL (180 tabs / 30 days); MAIL; Covered for ages 6 and over
trifluoperazine hcl tab 10 mg (base equivalent)	Tier 1	QL (120 tabs / 30 days); MAIL; Covered for ages 6 and over
Quinolinone Derivatives		
ABILIFY MAIN INJ 300MG	Tier 2	QL (1 vial / 25 days); MAIL; Covered for ages 6 and over
ABILIFY MAIN INJ 400MG	Tier 2	QL (1 vial / 25 days); MAIL; Covered for ages 6 and over
aripiprazole oral solution 1 mg/ml	Tier 2	PA; MAIL; Covered for ages 10 and over
aripiprazole orally disintegrating tab 10 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole orally disintegrating tab 15 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole tab 2 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole tab 5 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole tab 10 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over

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Drug Name	Drug Tier	Requirements/Limits
aripiprazole tab 15 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole tab 20 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
aripiprazole tab 30 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL; Covered for ages 10 and over
ARISTADA INJ 441MG/1.	Tier 2	QL (1 injection / 25 days); MAIL
ARISTADA INJ 662MG/2	Tier 2	QL (1 injection / 25 days); MAIL
ARISTADA INJ 882MG/3	Tier 2	QL (1 injection / 25 days); MAIL
Thioxanthenes		
thiothixene cap 1 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
thiothixene cap 2 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
thiothixene cap 5 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
thiothixene cap 10 mg	Tier 1	QL (180 caps / 30 days); MAIL; Covered for ages 6 and over
ANTIRHEUMATIC - ENZYME INHIBITORS		
ANTIRHEUMATIC - JANUS KINASE (JAK) INHIBITORS		
XELJANZ TAB 5MG	Tier 4	PA; Preferred Brand
XELJANZ XR TAB 11MG	Tier 4	PA; Preferred Brand
ANTISEPTICS DISINFECTANTS		
Chlorine Antiseptics		
betasept liq 4%	Tier 1	OTC; MAIL
chlorhexidine gluconate liquid 4%	Tier 1	OTC; MAIL
PHISOHEX LIQ 3%	Tier 2	QL (473 mL / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
ANTIVIRALS		
ANTIRETROVIRALS		
BIKTARVY TAB	Tier 2	QL (30 tabs / 30 days); MAIL
DOVATO TAB 50-300MG	Tier 3	QL (30 tabs / 30 days), PA
JULUCA TAB 50-25MG	Tier 2	QL (30 tabs / 30 days); MAIL
Antiretrovirals		
abacavir sulfate soln 20 mg/ml (base equiv)	Tier 2	QL (900 mL / 30 days); MAIL
abacavir sulfate tab 300 mg (base equiv)	Tier 2	QL (60 tabs / 30 days); MAIL
abacavir sulfate-lamivudine tab 600-300 mg	Tier 2	QL (30 tabs / 30 days); MAIL
abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg	Tier 2	QL (60 tabs / 30 days); MAIL
APTIVUS CAP 250MG	Tier 3	QL (120 caps / 30 days); MAIL
APTIVUS SOL	Tier 3	QL (300 mL / 30 days); MAIL
atazanavir sulfate cap 150 mg (base equiv)	Tier 2	QL (60 caps / 30 days); MAIL
atazanavir sulfate cap 200 mg (base equiv)	Tier 2	QL (60 caps / 30 days); MAIL
atazanavir sulfate cap 300 mg (base equiv)	Tier 2	QL (30 caps / 30 days); MAIL
ATRIPLA TAB	Tier 3	QL (60 tabs / 30 days); MAIL
CIMDUO TAB 300-300	Tier 2	QL (30 tabs / 30 days); MAIL
COMPLERA TAB	Tier 3	QL (30 tabs / 30 days); MAIL
CRIXIVAN CAP 200MG	Tier 3	QL (360 caps / 30 days); MAIL
CRIXIVAN CAP 400MG	Tier 3	QL (180 caps / 30 days); MAIL
DESCOVY TAB 200/25	Tier 3	QL (30 tabs / 30 days); MAIL
didanosine delayed release capsule 125 mg	Tier 2	QL (60 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
didanosine delayed release capsule 200 mg	Tier 2	MAIL
didanosine delayed release capsule 250 mg	Tier 2	QL (30 caps / 30 days); MAIL
didanosine delayed release capsule 400 mg	Tier 2	QL (30 caps / 30 days); MAIL
EDURANT TAB 25MG	Tier 3	MAIL
efavirenz cap 50 mg	Tier 1	QL (360 caps / 30 days); MAIL
efavirenz cap 200 mg	Tier 1	QL (90 caps / 30 days); MAIL
efavirenz tab 600 mg	Tier 2	QL (30 tabs / 30 days); MAIL
EMTRIVA CAP 200MG	Tier 3	QL (30 caps / 30 days); MAIL
EMTRIVA SOL 10MG/ML	Tier 3	QL (600 mL / 30 days); MAIL
EVOTAZ TAB 300-150	Tier 3	MAIL
fosamprenavir calcium tab 700 mg (base equiv)	Tier 2	QL (120 tabs / 30 days); MAIL
FUZEON INJ 90MG	Tier 4	PA
GENVOYA TAB	Tier 3	QL (30 tabs / 30 days); MAIL
INTELENCE TAB 25MG	Tier 3	PA
INTELENCE TAB 100MG	Tier 3	QL (120 tabs / 30 days), PA
INTELENCE TAB 200MG	Tier 3	QL (60 tabs / 30 days), PA
INVIRASE CAP 200MG	Tier 3	MAIL
INVIRASE TAB 500MG	Tier 3	QL (120 tabs / 30 days); MAIL
ISENTRESS CHW 25MG	Tier 3	MAIL
ISENTRESS CHW 100MG	Tier 3	MAIL
ISENTRESS HD TAB 600MG	Tier 3	QL (60 tabs / 30 days); MAIL
ISENTRESS TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
KALETRA TAB 100-25MG	Tier 3	QL (360 tabs / 30 days); MAIL
KALETRA TAB 200-50MG	Tier 3	QL (180 tabs / 30 days); MAIL
lamivudine oral soln 10 mg/ml	Tier 2	QL (900 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
lamivudine tab 100 mg (hbv)	Tier 2	QL (90 tabs / 30 days); MAIL
lamivudine tab 150 mg	Tier 2	QL (60 tabs / 30 days); MAIL
lamivudine tab 300 mg	Tier 2	QL (30 tabs / 30 days); MAIL
lamivudine-zidovudine tab 150-300 mg	Tier 2	QL (60 tabs / 30 days); MAIL
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	Tier 2	MAIL
nevirapine susp 50 mg/5ml	Tier 2	QL (1200 mL / 30 days); MAIL
nevirapine tab 200 mg	Tier 2	QL (60 tabs / 30 days); MAIL
nevirapine tab er 24hr 100 mg	Tier 2	MAIL
nevirapine tab er 24hr 400 mg	Tier 2	MAIL
NORVIR CAP 100MG	Tier 3	QL (360 caps / 30 days); MAIL
NORVIR SOL 80MG/ML	Tier 3	QL (450 mL / 30 days); MAIL
NORVIR TAB 100MG	Tier 3	QL (360 tabs / 30 days); MAIL
ODEFSEY TAB	Tier 3	QL (30 tabs / 30 days); MAIL
PREZCOBIX TAB 800-150	Tier 3	MAIL
PREZISTA SUS 100MG/ML	Tier 3	MAIL
PREZISTA TAB 75MG	Tier 3	MAIL
PREZISTA TAB 150MG	Tier 3	MAIL
PREZISTA TAB 400MG	Tier 3	QL (60 tabs / 30 days); MAIL
PREZISTA TAB 600MG	Tier 3	QL (60 tabs / 30 days); MAIL
PREZISTA TAB 800MG	Tier 3	MAIL
RESCRIPTOR TAB 100 MG	Tier 3	QL (360 tabs / 30 days); MAIL
RESCRIPTOR TAB 200MG	Tier 3	QL (180 tabs / 30 days); MAIL
ritonavir tab 100 mg	Tier 2	QL (360 tabs / 30 days); MAIL
SELZENTRY TAB 25MG	Tier 3	MAIL
SELZENTRY TAB 75MG	Tier 3	MAIL

Drug Name	Drug Tier	Requirements/Limits
SELZENTRY TAB 150MG	Tier 3	QL (120 tabs / 30 days); MAIL
SELZENTRY TAB 300MG	Tier 3	QL (120 tabs / 30 days); MAIL
stavudine cap 15 mg	Tier 2	MAIL
stavudine cap 20 mg	Tier 2	QL (60 caps / 30 days); MAIL
stavudine cap 30 mg	Tier 2	QL (30 caps / 30 days); MAIL
stavudine cap 40 mg	Tier 2	QL (60 caps / 30 days); MAIL
STRIBILD TAB	Tier 3	MAIL
SUSTIVA TAB 600MG	Tier 3	QL (30 tabs / 30 days); MAIL
SYMFI LO TAB	Tier 2	QL (30 tabs / 30 days); MAIL
SYMFI TAB	Tier 2	QL (30 tabs / 30 days); MAIL
tenofovir disoproxil fumarate tab 300 mg	Tier 2	QL (30 tabs / 30 days); MAIL
TIVICAY TAB 10MG	Tier 3	MAIL
TIVICAY TAB 25MG	Tier 3	MAIL
TIVICAY TAB 50MG	Tier 3	MAIL
TRIUMEQ TAB	Tier 3	MAIL
TRUVADA TAB 100-150	Tier 3	QL (30 tabs / 30 days), PA; MAIL; Covered for PrEP only
TRUVADA TAB 133-200	Tier 3	QL (30 tabs / 30 days), PA; MAIL; Covered for PrEP only
TRUVADA TAB 167-250	Tier 3	QL (30 tabs / 30 days), PA; MAIL; Covered for PrEP only
TRUVADA TAB 200-300	Tier 3	QL (30 tabs / 30 days), PA; MAIL; Covered for PrEP only
TYBOST TAB 150MG	Tier 3	PA; MAIL
VIRACEPT TAB 250MG	Tier 3	QL (300 tabs / 30 days); MAIL
VIRACEPT TAB 625MG	Tier 3	QL (120 tabs / 30 days); MAIL
VIREAD TAB 150MG	Tier 3	MAIL

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Drug Name	Drug Tier	Requirements/Limits
VIREAD TAB 200MG	Tier 3	MAIL
VIREAD TAB 250MG	Tier 3	MAIL
VITEKTA TAB 150MG	Tier 3	MAIL
zidovudine cap 100 mg	Tier 2	QL (180 caps / 30 days); MAIL
zidovudine syrup 10 mg/ml	Tier 2	QL (1800 mL / 30 days); MAIL
zidovudine tab 300 mg	Tier 2	QL (60 tabs / 30 days); MAIL
CMV Agents		
valganciclovir hcl for soln 50 mg/ml (base equiv)	Tier 2	PA
valganciclovir hcl tab 450 mg (base equivalent)	Tier 2	QL (120 tabs / 30 days), PA
Hepatitis Agents		
adefovir dipivoxil tab 10 mg	Tier 2	QL (30 tabs / 30 days)
BARACLUDE SOL .05MG/ML	Tier 2	QL (900 mL / 30 days)
DAKLINZA TAB 30MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
DAKLINZA TAB 60MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
entecavir tab 0.5 mg	Tier 2	QL (30 tabs / 30 days)
entecavir tab 1 mg	Tier 2	QL (30 tabs / 30 days)
EPCLUSA TAB 400-100	Tier 4	QL (Max day supply 7; Max 1 per day), PA
HARVONI TAB 90-400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
INFERGEN INJ 15MCG	Tier 4	PA
LEDIP-SOFOSB TAB 90-400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA; Preferred
MAVYRET TAB 100-40MG	Tier 4	QL (Max day supply 7; Max 3 per day), PA
moderiba tab 200mg	Tier 4	QL (Max day supply 7), PA
PEG-INTRON KIT 150MCG	Tier 4	PA
PEGASYS INJ	Tier 4	PA
PEGASYS INJ 180MCG/M	Tier 4	PA
ribasphere cap 200mg	Tier 4	QL (Max day supply 7), PA

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Drug Name	Drug Tier	Requirements/Limits
ribasphere tab 200mg	Tier 4	QL (Max day supply 7), PA
ribavirin cap 200 mg	Tier 4	QL (Max day supply 7), PA
SOFOS/VELPAT TAB 400-100	Tier 4	QL (Max day supply 7; Max 1 per day), PA; Preferred
SOVALDI TAB 400MG	Tier 4	QL (Max day supply 7; Max 1 per day), PA
TECHNIVIE TAB	Tier 4	QL (Max day supply 7; Max 2 per day), PA
TYZEKA TAB 600MG	Tier 3	QL (30 tabs / 30 days)
VOSEVI TAB	Tier 4	PA
ZEPATIER TAB 50-100MG	Tier 4	QL (Max day supply 14; Max 1 per day), PA
Herpes Agents		
acyclovir cap 200 mg	Tier 1	QL (150 caps / 30 days)
acyclovir susp 200 mg/5ml	Tier 1	QL (750 mL / 30 days)
acyclovir tab 400 mg	Tier 1	QL (150 tabs / 30 days)
acyclovir tab 800 mg	Tier 1	QL (150 tabs / 30 days)
famciclovir tab 125 mg	Tier 1	QL (90 tabs / 30 days)
famciclovir tab 250 mg	Tier 1	QL (90 tabs / 30 days)
famciclovir tab 500 mg	Tier 1	QL (90 tabs / 30 days)
valacyclovir hcl tab 1 gm	Tier 1	QL (240 tabs / 30 days)
valacyclovir hcl tab 500 mg	Tier 1	QL (240 tabs / 30 days)
Influenza Agents		
oseltamivir phosphate cap 30 mg (base equiv)	Tier 2	QL (1 treatment per year)
oseltamivir phosphate cap 45 mg (base equiv)	Tier 2	QL (1 treatment per year)
oseltamivir phosphate cap 75 mg (base equiv)	Tier 2	QL (1 treatment per year)
oseltamivir phosphate for susp 6 mg/ml (base equiv)	Tier 2	QL (1 mL / year)
RELENZA MIS DISKHALE	Tier 2	QL (60 per 30 Days)
rimantadine hydrochloride tab 100 mg	Tier 1	QL (60 per 30 Days)
ASSORTED CLASSES		
Chelating Agents		
CUPRIMINE CAP 250MG	Tier 2	MAIL
DEPEN TITRA TAB 250MG	Tier 2	MAIL

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Drug Name	Drug Tier	Requirements/Limits
SYPRINE CAP 250MG	Tier 3	MAIL
trientine hcl cap 250 mg	Tier 1	MAIL
Immunomodulators		
REVLIMID CAP 2.5MG	Tier 4	PA
REVLIMID CAP 5MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 10MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 15MG	Tier 4	QL (30 caps / 30 days), PA
REVLIMID CAP 20MG	Tier 4	PA
REVLIMID CAP 25MG	Tier 4	QL (30 caps / 30 days), PA
THALOMID CAP 50MG	Tier 4	PA
THALOMID CAP 100MG	Tier 4	PA
THALOMID CAP 150MG	Tier 4	PA
THALOMID CAP 200MG	Tier 4	PA
Immunosuppressive Agents		
azathioprine tab 50 mg	Tier 1	QL (240 tabs / 30 days); MAIL
cyclosporine cap 25 mg	Tier 2	QL (480 caps / 30 days); MAIL
cyclosporine cap 100 mg	Tier 2	QL (150 caps / 30 days); MAIL
cyclosporine modified cap 25 mg	Tier 2	QL (450 ea / 30 days); MAIL
cyclosporine modified cap 100 mg	Tier 2	QL (300 ea / 30 days); MAIL
cyclosporine modified oral soln 100 mg/ml	Tier 2	QL (300 mL / 30 days); MAIL
gengraf cap 25mg	Tier 2	QL (450 caps / 30 days); MAIL
gengraf cap 50mg	Tier 2	QL (450 caps / 30 days); MAIL
gengraf cap 100mg	Tier 2	QL (300 caps / 30 days); MAIL
gengraf sol 100mg/ml	Tier 2	QL (300 mL / 30 days); MAIL
mycophenolate mofetil cap 250 mg	Tier 1	QL (360 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
mycophenolate mofetil tab 500 mg	Tier 1	QL (240 tabs / 30 days); MAIL
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv)	Tier 2	MAIL
mycophenolate sodium tab dr 360 mg (mycophenolic acid equiv)	Tier 2	QL (120 tabs / 30 days); MAIL
NEORAL CAP 25MG	Tier 2	QL (450 ea / 30 days); MAIL
NEORAL CAP 100MG	Tier 2	QL (300 ea / 30 days); MAIL
NEORAL SOL 100MG/ML	Tier 2	QL (300 mL / 30 days); MAIL
NULOJIX INJ 250MG	Tier 3	PA; MAIL
RAPAMUNE SOL 1MG/ML	Tier 3	QL (240 mL / 30 days); MAIL
SANDIMMUNE CAP 25MG	Tier 2	QL (480 ea / 30 days); MAIL
SANDIMMUNE CAP 100MG	Tier 2	QL (150 ea / 30 days); MAIL
sirolimus tab 0.5 mg	Tier 2	QL (240 tabs / 30 days); MAIL
sirolimus tab 1 mg	Tier 2	QL (240 tabs / 30 days); MAIL
sirolimus tab 2 mg	Tier 2	MAIL
tacrolimus cap 0.5 mg	Tier 2	QL (60 caps / 30 days); MAIL
tacrolimus cap 0.5 mg	Tier 2	QL (60 ea / 30 days); MAIL
tacrolimus cap 1 mg	Tier 2	QL (420 caps / 30 days); MAIL
tacrolimus cap 1 mg	Tier 2	QL (420 ea / 30 days); MAIL
tacrolimus cap 5 mg	Tier 2	MAIL
ZORTRESS TAB 0.5MG	Tier 4	PA
ZORTRESS TAB 0.25MG	Tier 4	PA
ZORTRESS TAB 0.75MG	Tier 4	PA
Irrigation Solutions		
argyl saline sol 100ml	Tier 1	MAIL
physiolyte sol	Tier 1	MAIL
physiosol sol irrigat	Tier 1	MAIL
ringer's solution for irrigation	Tier 1	MAIL

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Drug Name	Drug Tier	Requirements/Limits
tis-u-sol sol	Tier 1	MAIL
water for irrigation, sterile irrigation soln	Tier 1	MAIL
Potassium Removing Resins		
kionex pow	Tier 1	MAIL
kionex sus 15gm/60	Tier 1	MAIL
BETA BLOCKERS		
Alpha-Beta Blockers		
carvedilol tab 3.125 mg	Tier 1	QL (60 tabs / 30 days); MAIL
carvedilol tab 6.25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
carvedilol tab 12.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
carvedilol tab 25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
labetalol hcl tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
labetalol hcl tab 200 mg	Tier 1	QL (60 tabs / 30 days); MAIL
labetalol hcl tab 300 mg	Tier 1	QL (180 tabs / 30 days); MAIL
Beta Blockers Cardio-Selective		
acebutolol hcl cap 200 mg	Tier 1	QL (480 caps / 30 days); MAIL
acebutolol hcl cap 400 mg	Tier 1	QL (480 caps / 30 days); MAIL
atenolol tab 25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
atenolol tab 50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
atenolol tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
betaxolol hcl tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
betaxolol hcl tab 20 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bisoprolol fumarate tab 5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bisoprolol fumarate tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
BYSTOLIC TAB 2.5MG	Tier 3	QL (480 tabs / 30 days), PA; MAIL
BYSTOLIC TAB 5MG	Tier 3	QL (240 tabs / 30 days), PA; MAIL
BYSTOLIC TAB 10MG	Tier 3	QL (120 tabs / 30 days), PA; MAIL
BYSTOLIC TAB 20MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
metoprolol succinate tab er 24hr 25 mg (tartrate equiv)	Tier 1	QL (90 tabs / 30 days); MAIL
metoprolol succinate tab er 24hr 50 mg (tartrate equiv)	Tier 1	QL (120 tabs / 30 days); MAIL
metoprolol succinate tab er 24hr 100 mg (tartrate equiv)	Tier 1	QL (90 tabs / 30 days); MAIL
metoprolol succinate tab er 24hr 200 mg (tartrate equiv)	Tier 1	QL (60 tabs / 30 days); MAIL
metoprolol tartrate tab 25 mg	Tier 1	QL (90 tabs / 30 days); MAIL
metoprolol tartrate tab 50 mg	Tier 1	QL (90 tabs / 30 days); MAIL
metoprolol tartrate tab 75 mg	Tier 1	MAIL
metoprolol tartrate tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
Beta Blockers Non-Selective		
LEVATOL TAB 20MG	Tier 3	QL (60 tabs / 30 days); MAIL
nadolol tab 20 mg	Tier 1	QL (90 tabs / 30 days); MAIL
nadolol tab 40 mg	Tier 1	QL (90 tabs / 30 days); MAIL
nadolol tab 80 mg	Tier 1	QL (60 tabs / 30 days); MAIL
pindolol tab 5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
pindolol tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
propranolol hcl cap er 24hr 60 mg	Tier 1	QL (90 ea / 30 days); MAIL
propranolol hcl cap er 24hr 80 mg	Tier 1	QL (120 caps / 30 days); MAIL
propranolol hcl cap er 24hr 120 mg	Tier 1	QL (90 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
propranolol hcl cap er 24hr 160 mg	Tier 1	QL (60 caps / 30 days); MAIL
propranolol hcl oral soln 20 mg/5ml	Tier 1	QL (600 mL / 30 days); MAIL
propranolol hcl oral soln 40 mg/5ml	Tier 1	QL (2400 mL / 30 days); MAIL
propranolol hcl tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
propranolol hcl tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
propranolol hcl tab 40 mg	Tier 1	QL (180 tabs / 30 days); MAIL
propranolol hcl tab 60 mg	Tier 1	QL (180 tabs / 30 days); MAIL
propranolol hcl tab 80 mg	Tier 1	QL (180 tabs / 30 days); MAIL
sorine tab 80mg	Tier 1	QL (60 ea / 30 days); MAIL
sorine tab 120mg	Tier 1	QL (60 ea / 30 days); MAIL
sorine tab 160mg	Tier 1	QL (60 ea / 30 days); MAIL
sorine tab 240mg	Tier 1	QL (60 ea / 30 days); MAIL
sotalol hcl (afib/afl) tab 80 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sotalol hcl (afib/afl) tab 120 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sotalol hcl tab 80 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sotalol hcl tab 120 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sotalol hcl tab 160 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sotalol hcl tab 240 mg	Tier 1	QL (60 tabs / 30 days); MAIL
timolol maleate tab 5 mg	Tier 1	QL (360 tabs / 30 days); MAIL
timolol maleate tab 10 mg	Tier 1	QL (180 tabs / 30 days); MAIL
timolol maleate tab 20 mg	Tier 1	QL (90 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
CALCIUM CHANNEL BLOCKERS		
Calcium Channel Blockers		
afeditab tab 30mg cr	Tier 1	QL (30 tabs / 30 days); MAIL
afeditab tab 60mg cr	Tier 1	QL (30 tabs / 30 days); MAIL
amlodipine besylate tab 2.5 mg (base equivalent)	Tier 1	QL (30 tabs / 30 days); MAIL
amlodipine besylate tab 5 mg (base equivalent)	Tier 1	QL (30 tabs / 30 days); MAIL
amlodipine besylate tab 10 mg (base equivalent)	Tier 1	QL (30 ea / 30 days); MAIL
cartia xt cap 180/24hr	Tier 1	QL (60 caps / 30 days); MAIL
cartia xt cap 240/24hr	Tier 1	QL (30 caps / 30 days); MAIL
cartia xt cap 300/24hr	Tier 1	QL (30 caps / 30 days); MAIL
dilt-xr cap 180mg	Tier 1	QL (60 caps / 30 days); MAIL
dilt-xr cap 240mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem cap 180mg cd	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem cap 240mg cd	Tier 1	QL (30 caps / 30 days); MAIL
diltiazem hcl cap er 24hr 120 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl cap er 24hr 180 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl cap er 24hr 240 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl coated beads cap er 24hr 120 mg	Tier 1	QL (30 caps / 30 days); MAIL
diltiazem hcl coated beads cap er 24hr 180 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl coated beads cap er 24hr 240 mg	Tier 1	QL (30 caps / 30 days); MAIL
diltiazem hcl coated beads cap er 24hr 300 mg	Tier 1	QL (30 caps / 30 days); MAIL
diltiazem hcl extended release beads cap er 24hr 120 mg	Tier 1	QL (60 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
diltiazem hcl extended release beads cap er 24hr 180 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl extended release beads cap er 24hr 240 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl extended release beads cap er 24hr 300 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl extended release beads cap er 24hr 360 mg	Tier 1	QL (60 caps / 30 days); MAIL
diltiazem hcl extended release beads cap er 24hr 420 mg	Tier 1	QL (30 caps / 30 days); MAIL
diltiazem hcl tab 30 mg	Tier 1	QL (60 tabs / 30 days); MAIL
diltiazem hcl tab 60 mg	Tier 1	QL (120 tabs / 30 days); MAIL
diltiazem hcl tab 90 mg	Tier 1	QL (120 tabs / 30 days); MAIL
diltiazem hcl tab 120 mg	Tier 1	QL (120 tabs / 30 days); MAIL
felodipine tab er 24hr 2.5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
felodipine tab er 24hr 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
felodipine tab er 24hr 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
isradipine cap 2.5 mg	Tier 1	QL (180 caps / 30 days); MAIL
isradipine cap 5 mg	Tier 1	QL (120 caps / 30 days); MAIL
nicardipine hcl cap 20 mg	Tier 1	QL (180 caps / 30 days); MAIL
nicardipine hcl cap 30 mg	Tier 1	QL (120 caps / 30 days); MAIL
nifediac cc tab 30mg er	Tier 1	QL (30 tabs / 30 days); MAIL
nifedical xl tab 60mg	Tier 1	QL (30 tabs / 30 days); MAIL
nifedipine cap 10 mg	Tier 1	AGE; MAIL
nifedipine cap 20 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
nifedipine tab er 24hr 30 mg	Tier 1	QL (30 tabs / 30 days); MAIL
nifedipine tab er 24hr 60 mg	Tier 1	QL (30 tabs / 30 days); MAIL
nifedipine tab er 24hr 90 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nifedipine tab er 24hr osmotic release 30 mg	Tier 1	QL (30 ea / 30 days); MAIL
nifedipine tab er 24hr osmotic release 30 mg	Tier 1	QL (30 tabs / 30 days); MAIL
nifedipine tab er 24hr osmotic release 60 mg	Tier 1	QL (30 ea / 30 days); MAIL
nifedipine tab er 24hr osmotic release 90 mg	Tier 1	QL (60 tabs / 30 days); MAIL
nimodipine cap 30 mg	Tier 2	QL (360 caps / 30 days), PA; MAIL
nisoldipine tab er 24hr 8.5 mg	Tier 2	QL (120 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 17 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 20 mg	Tier 2	QL (90 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 25.5 mg	Tier 2	QL (40.2 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 30 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 34 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL
nisoldipine tab er 24hr 40 mg	Tier 2	QL (30 tabs / 30 days), PA; MAIL
taztia xt cap 120mg/24	Tier 1	QL (60 caps / 30 days); MAIL
taztia xt cap 180mg/24	Tier 1	QL (60 caps / 30 days); MAIL
taztia xt cap 240mg/24	Tier 1	QL (60 caps / 30 days); MAIL
verapamil hcl cap er 24hr 100 mg	Tier 1	QL (30 caps / 30 days); MAIL
verapamil hcl cap er 24hr 120 mg	Tier 1	QL (30 caps / 30 days); MAIL
verapamil hcl cap er 24hr 180 mg	Tier 1	QL (30 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
verapamil hcl cap er 24hr 240 mg	Tier 1	QL (60 caps / 30 days); MAIL
verapamil hcl cap er 24hr 300 mg	Tier 1	QL (60 caps / 30 days); MAIL
verapamil hcl cap er 24hr 360 mg	Tier 1	QL (60 caps / 30 days); MAIL
verapamil hcl tab 40 mg	Tier 1	QL (120 tabs / 30 days); MAIL
verapamil hcl tab 80 mg	Tier 1	QL (120 tabs / 30 days); MAIL
verapamil hcl tab 120 mg	Tier 1	QL (90 tabs / 30 days); MAIL
verapamil hcl tab er 120 mg	Tier 1	QL (90 tabs / 30 days); MAIL
verapamil hcl tab er 180 mg	Tier 1	QL (60 tabs / 30 days); MAIL
verapamil hcl tab er 240 mg	Tier 1	QL (90 tabs / 30 days); MAIL

CARDIOTONICS

Cardiac Glycosides

digox tab 0.25mg	Tier 1	QL (30 tabs / 30 days); MAIL
digox tab 0.125mg	Tier 1	QL (30 tabs / 30 days); MAIL
digoxin oral soln 0.05 mg/ml	Tier 1	MAIL; Covered for ages 12 and over
LANOXIN TAB 0.25MG	Tier 2	QL (30 tabs / 30 days); MAIL
LANOXIN TAB 0.125MG	Tier 2	QL (30 tabs / 30 days); MAIL

CARDIOVASCULAR AGENTS - MISC.

Peripheral Vasodilators

niacin cap 500mg	Tier 1	OTC; MAIL

Prostaglandin Vasodilators

REMODULIN INJ 1MG/ML	Tier 4	PA
REMODULIN INJ 2.5MG/ML	Tier 4	PA
REMODULIN INJ 5MG/ML	Tier 4	PA
VENTAVIS SOL 10MCG/ML	Tier 4	PA
VENTAVIS SOL 20MCG/ML	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
Pulmonary Hypertension - Endothelin Receptor Antagonists		
LETAIRIS TAB 5MG	Tier 4	QL (30 tabs / 30 days), PA
LETAIRIS TAB 10MG	Tier 4	QL (30 tabs / 30 days), PA
OPSUMIT TAB 10MG	Tier 4	QL (30 tabs / 30 days), PA
TRACLEER TAB 32MG	Tier 4	PA
TRACLEER TAB 62.5MG	Tier 4	QL (60 tabs / 30 days), PA
TRACLEER TAB 125MG	Tier 4	QL (60 tabs / 30 days), PA
Pulmonary Hypertension - Phosphodiesterase Inhibitors		
ADCIRCA TAB 20MG	Tier 4	PA
sildenafil citrate tab 20 mg	Tier 4	QL (90 tabs / 30 days), PA
tadalafil tab 20 mg (pah)	Tier 4	PA
CEPHALOSPORINS		
CEPHALOSPORINS - 3RD GENERATION		
SUPRAX CAP 400MG	Tier 3	QL (60 caps / 30 days)
Cephalosporins - 1st Generation		
cefadroxil for susp 250 mg/5ml	Tier 1	Covered for ages 12 and over
cefadroxil for susp 500 mg/5ml	Tier 1	Covered for ages 12 and over
cefazolin sodium for inj 1 gm	Tier 1	PA
cefazolin sodium for inj 20 gm	Tier 1	PA
cefazolin sodium for inj 500 mg	Tier 1	PA
cephalexin cap 250 mg	Tier 1	QL (180 caps / 30 days)
cephalexin cap 500 mg	Tier 1	QL (180 caps / 30 days)
cephalexin for susp 125 mg/5ml	Tier 1	Covered for ages 12 and over
cephalexin for susp 250 mg/5ml	Tier 1	Covered for ages 12 and over
Cephalosporins - 2nd Generation		
cefaclor cap 250 mg	Tier 1	QL (180 caps / 30 days)
cefaclor for susp 125 mg/5ml	Tier 2	QL (1200 mL / 30 days); Covered for ages 12 and over

Drug Name	Drug Tier	Requirements/Limits
cefaclor for susp 250 mg/5ml	Tier 2	QL (1800 mL / 30 days); Covered for ages 12 and over
cefprozil for susp 125 mg/5ml	Tier 1	Covered for ages 12 and over
cefprozil for susp 250 mg/5ml	Tier 1	Covered for ages 12 and over
cefuroxime axetil tab 250 mg	Tier 1	QL (Max day supply 10)
cefuroxime axetil tab 500 mg	Tier 1	QL (Max day supply 10)
Cephalosporins - 3rd Generation		
cefdinir cap 300 mg	Tier 1	QL (60 caps / 30 days)
cefdinir for susp 125 mg/5ml	Tier 1	Covered for ages 12 and over
cefdinir for susp 250 mg/5ml	Tier 1	Covered for ages 12 and over
cefditoren pivoxil tab 200 mg (base equivalent)	Tier 1	QL (120 tabs / 30 days), PA
cefditoren pivoxil tab 400 mg (base equivalent)	Tier 1	QL (60 tabs / 30 days), PA
cefixime for susp 100 mg/5ml	Tier 2	Covered for ages 12 and over
cefixime for susp 200 mg/5ml	Tier 2	Covered for ages 12 and over
cefpodoxime proxetil for susp 50 mg/5ml	Tier 2	QL (1200 mL / 30 days)
cefpodoxime proxetil for susp 100 mg/5ml	Tier 2	QL (1200 mL / 30 days)
cefpodoxime proxetil tab 100 mg	Tier 1	QL (60 tabs / 30 days)
cefpodoxime proxetil tab 200 mg	Tier 1	QL (60 tabs / 30 days)
ceftibuten cap 400 mg	Tier 1	
SUPRAX TAB 400MG	Tier 3	QL (60 tabs / 30 days)
CHEMICALS		
BULK CHEMICALS - H'S		
HYDROXYPROG POW CAPROATE	Tier 2	Covered for ages 16-60
LIQUIDS		
SESAME OIL	Tier 2	
COMPLEMENT INHIBITORS		
C1 INHIBITORS		
BERINERT INJ 500UNIT	Tier 4	PA
CINRYZE SOL 500 UNIT	Tier 4	PA
RUCONEST INJ 2100UNIT	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
CONTRACEPTIVES		
Combination Contraceptives - Oral		
altavera tab	PREV	MAIL; Covered up to 1 year supply at a time
alyacen tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
alyacen tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
amethia tab	PREV	MAIL; Covered up to 1 year supply at a time
amethyst tab 90-20mcg	PREV	MAIL; Covered up to 1 year supply at a time
apri tab	PREV	MAIL; Covered up to 1 year supply at a time
aranelle tab	PREV	MAIL; Covered up to 1 year supply at a time
ashlyna tab	PREV	MAIL; Covered up to 1 year supply at a time
aubra tab 0.1-0.02	PREV	MAIL; Covered up to 1 year supply at a time
aviane tab	PREV	MAIL; Covered up to 1 year supply at a time
azurette tab 28 day	PREV	MAIL; Covered up to 1 year supply at a time
BALCOLTRA TAB 0.1-20	PREV	MAIL; Covered up to 1 year supply at a time
balziva tab	PREV	MAIL; Covered up to 1 year supply at a time
BEYAZ TAB	PREV	MAIL; Covered up to 1 year supply at a time
briellyn tab	PREV	MAIL; Covered up to 1 year supply at a time
camrese tab	PREV	MAIL; Covered up to 1 year supply at a time
caziant pak	PREV	MAIL; Covered up to 1 year supply at a time
cesia pak	PREV	MAIL; Covered up to 1 year supply at a time
chateal eq tab 0.15/30	PREV	MAIL; Covered up to 1 year supply at a time
cryselle-28 tab	PREV	MAIL; Covered up to 1 year supply at a time

Drug Name	Drug Tier	Requirements/Limits
cryselle-28 tab 28 tabs	PREV	MAIL; Covered up to 1 year supply at a time
cyclafem tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
cyclafem tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
dasetta tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
dasetta tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
daysee tab	PREV	MAIL; Covered up to 1 year supply at a time
delyla tab 0.1-0.02	PREV	MAIL; Covered up to 1 year supply at a time
desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)	PREV	MAIL; Covered up to 1 year supply at a time
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	PREV	MAIL; Covered up to 1 year supply at a time
drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg	PREV	MAIL; Covered up to 1 year supply at a time
drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	PREV	MAIL; Covered up to 1 year supply at a time
drospirenone-ethinyl estradiol tab 3-0.03 mg	PREV	MAIL; Covered up to 1 year supply at a time
elinest tab	PREV	MAIL; Covered up to 1 year supply at a time
emoquette tab	PREV	MAIL; Covered up to 1 year supply at a time
enpresse-28 tab	PREV	MAIL; Covered up to 1 year supply at a time
enskyce tab	PREV	MAIL; Covered up to 1 year supply at a time
estarylla tab 0.25-35	PREV	MAIL; Covered up to 1 year supply at a time
ESTROSTEP FE TAB	PREV	MAIL; Covered up to 1 year supply at a time
FALESSA KIT	PREV	MAIL; Covered up to 1 year supply at a time
falmina tab	PREV	MAIL; Covered up to 1 year supply at a time
FEMCON FE CHW	PREV	MAIL; Covered up to 1 year supply at a time

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Drug Name	Drug Tier	Requirements/Limits
GENERESS FE CHW	PREV	MAIL; Covered up to 1 year supply at a time
gianvi tab 3-0.02mg	PREV	MAIL; Covered up to 1 year supply at a time
gildagia tab 0.4-35	PREV	MAIL; Covered up to 1 year supply at a time
gildess fe tab 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
gildess fe tab 1/20	PREV	MAIL; Covered up to 1 year supply at a time
introvale tab	PREV	MAIL; Covered up to 1 year supply at a time
jolessa tab	PREV	MAIL; Covered up to 1 year supply at a time
junel 1.5/30 tab	PREV	MAIL; Covered up to 1 year supply at a time
junel 1/20 tab	PREV	MAIL; Covered up to 1 year supply at a time
junel fe tab 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
junel fe tab 1/20	PREV	MAIL; Covered up to 1 year supply at a time
kariva tab 28 day	PREV	MAIL; Covered up to 1 year supply at a time
kelnor tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
kurvelo tab 0.15/30	PREV	MAIL; Covered up to 1 year supply at a time
larin fe tab 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
larin fe tab 1/20	PREV	MAIL; Covered up to 1 year supply at a time
larin tab 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
larin tab 1/20	PREV	MAIL; Covered up to 1 year supply at a time
leena tab	PREV	MAIL; Covered up to 1 year supply at a time
lessina tab	PREV	MAIL; Covered up to 1 year supply at a time
levonest tab	PREV	MAIL; Covered up to 1 year supply at a time

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Drug Name	Drug Tier	Requirements/Limits
levonor-eth est tab 0.15-0.02/0.025/0.03 mg &eth est 0.01 mg	PREV	MAIL; Covered up to 1 year supply at a time
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	PREV	MAIL; Covered up to 1 year supply at a time
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	PREV	MAIL; Covered up to 1 year supply at a time
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	PREV	MAIL; Covered up to 1 year supply at a time
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	PREV	MAIL; Covered up to 1 year supply at a time
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg	PREV	MAIL; Covered up to 1 year supply at a time
levora-28 tab 0.15/30	PREV	MAIL; Covered up to 1 year supply at a time
LO LOESTRIN TAB 1-10-10	PREV	MAIL; Covered up to 1 year supply at a time
LOESTRIN 21 TAB 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
LOESTRIN FE TAB 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
LOESTRIN FE TAB 1/20	PREV	MAIL; Covered up to 1 year supply at a time
LOESTRIN TAB 1/20-21	PREV	MAIL; Covered up to 1 year supply at a time
loryna tab 3-0.02mg	PREV	MAIL; Covered up to 1 year supply at a time
LOSEASONIQUE TAB	PREV	MAIL; Covered up to 1 year supply at a time
low-ogestrel tab	PREV	MAIL; Covered up to 1 year supply at a time
lutera tab	PREV	MAIL; Covered up to 1 year supply at a time
marlissa tab 0.15/30	PREV	MAIL; Covered up to 1 year supply at a time
microgestin tab 1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
microgestin tab 1/20	PREV	MAIL; Covered up to 1 year supply at a time
microgestin tab fe1.5/30	PREV	MAIL; Covered up to 1 year supply at a time
microgestin tab fe 1/20	PREV	MAIL; Covered up to 1 year supply at a time

Drug Name	Drug Tier	Requirements/Limits
MINASTRIN 24 CHW FE	PREV	MAIL; Covered up to 1 year supply at a time
MIRCETTE TAB 28 DAY	PREV	MAIL; Covered up to 1 year supply at a time
mono-linyah tab 0.25-35	PREV	MAIL; Covered up to 1 year supply at a time
mononessa tab	PREV	MAIL; Covered up to 1 year supply at a time
myzilra tab	PREV	MAIL; Covered up to 1 year supply at a time
NATAZIA TAB	PREV	MAIL; Covered up to 1 year supply at a time
necon tab 0.5/35	PREV	MAIL; Covered up to 1 year supply at a time
necon tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
necon tab 1/50-28	PREV	MAIL; Covered up to 1 year supply at a time
necon tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
NECON TAB 10/11-28	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24)	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	PREV	MAIL; Covered up to 1 year supply at a time
norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg	PREV	MAIL; Covered up to 1 year supply at a time
norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg	PREV	MAIL; Covered up to 1 year supply at a time
norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg	PREV	MAIL; Covered up to 1 year supply at a time
NORINYL TAB 1/35	PREV	MAIL; Covered up to 1 year supply at a time
nortrel tab 0.5/35	PREV	MAIL; Covered up to 1 year supply at a time

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nortrel tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
nortrel tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
ocella tab 3-0.03mg	PREV	MAIL; Covered up to 1 year supply at a time
ogestrel tab	PREV	MAIL; Covered up to 1 year supply at a time
orsythia tab	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO TRI- TAB CYCLEN	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO TRI- TAB CYCLN LO	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO-CYCLEN TAB 0.25/35	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO-NOVUM TAB 1/35	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO-NOVUM TAB 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
philith tab 0.4-35	PREV	MAIL; Covered up to 1 year supply at a time
pimtrea tab	PREV	MAIL; Covered up to 1 year supply at a time
pirmella tab 1/35	PREV	MAIL; Covered up to 1 year supply at a time
pirmella tab 7/7/7	PREV	MAIL; Covered up to 1 year supply at a time
portia-28 tab	PREV	MAIL; Covered up to 1 year supply at a time
previfem tab	PREV	MAIL; Covered up to 1 year supply at a time
QUARTETTE TAB	PREV	MAIL; Covered up to 1 year supply at a time
quasense tab	PREV	MAIL; Covered up to 1 year supply at a time
reclipsen tab	PREV	MAIL; Covered up to 1 year supply at a time
SAFYRAL TAB	PREV	MAIL; Covered up to 1 year supply at a time
SEASONIQUE TAB	PREV	MAIL; Covered up to 1 year supply at a time

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setlakin tab	PREV	MAIL; Covered up to 1 year supply at a time
solia tab	PREV	MAIL; Covered up to 1 year supply at a time
sprintec 28 tab 28 day	PREV	MAIL; Covered up to 1 year supply at a time
sronyx tab	PREV	MAIL; Covered up to 1 year supply at a time
syeda tab 3-0.03mg	PREV	MAIL; Covered up to 1 year supply at a time
TAYTULLA CAP 1MG/20MC	PREV	MAIL; Covered up to 1 year supply at a time
tilia fe tab	PREV	MAIL; Covered up to 1 year supply at a time
tri-estaryll tab	PREV	MAIL; Covered up to 1 year supply at a time
tri-legest tab fe	PREV	MAIL; Covered up to 1 year supply at a time
tri-linyah tab	PREV	MAIL; Covered up to 1 year supply at a time
TRI-NORINYL TAB 28	PREV	MAIL; Covered up to 1 year supply at a time
tri-previfem tab	PREV	MAIL; Covered up to 1 year supply at a time
tri-sprintec tab	PREV	MAIL; Covered up to 1 year supply at a time
trinessa tab	PREV	MAIL; Covered up to 1 year supply at a time
trivora-28 tab	PREV	MAIL; Covered up to 1 year supply at a time
velivet pak	PREV	MAIL; Covered up to 1 year supply at a time
vestura tab 3-0.02mg	PREV	MAIL; Covered up to 1 year supply at a time
viorele tab	PREV	MAIL; Covered up to 1 year supply at a time
vyfemla tab 0.4-35	PREV	MAIL; Covered up to 1 year supply at a time
wera tab 0.5/35	PREV	MAIL; Covered up to 1 year supply at a time
wymzya fe chw 0.4mg-35	PREV	MAIL; Covered up to 1 year supply at a time

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Drug Name	Drug Tier	Requirements/Limits
YASMIN 28 TAB 3-0.03MG	PREV	MAIL; Covered up to 1 year supply at a time
YAZ TAB 3-0.02MG	PREV	MAIL; Covered up to 1 year supply at a time
zarah tab 3-0.03mg	PREV	MAIL; Covered up to 1 year supply at a time
zenchent fe chw 0.4mg-35	PREV	MAIL; Covered up to 1 year supply at a time
zenchent tab	PREV	MAIL; Covered up to 1 year supply at a time
zovia 1/35e tab	PREV	MAIL; Covered up to 1 year supply at a time
zovia 1/50e tab	PREV	MAIL; Covered up to 1 year supply at a time
Combination Contraceptives - Transdermal		
xulane dis 150-35	PREV	MAIL
Combination Contraceptives - Vaginal		
NUVARING MIS	PREV	MAIL
Contraceptives - Other		
NEXPLANON IMP 68MG	PREV	
Copper Contraceptives - IUD		
PARAGARD IUD T380A	PREV	
Emergency Contraceptives		
ELLA TAB 30MG	PREV	Covered up to 1 year supply at a time
levonorgestrel tab 1.5 mg	PREV	OTC; Covered up to 1 year supply at a time
my way tab 1.5mg	PREV	OTC; Covered up to 1 year supply at a time
next choice tab 1.5mg	PREV	OTC; Covered up to 1 year supply at a time
PLAN B TAB 1.5MG	PREV	OTC; MAIL; Covered up to 1 year supply at a time
Progestin Contraceptives - IUD		
KYLEENA IUD 19.5MG	PREV	
LILETTA IUD 52MG	PREV	
MIRENA IUD SYSTEM	PREV	
SKYLA IUD 13.5MG	PREV	

Drug Name	Drug Tier	Requirements/Limits
Progestin Contraceptives - Injectable		
DEPO-PROVERA INJ 150MG/ML	PREV	MAIL
DEPO-SQ PROV INJ 104	PREV	MAIL
medroxyprogesterone acetate im susp 150 mg/ml	PREV	MAIL
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml	PREV	MAIL
Progestin Contraceptives - Oral		
camila tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
errin tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
heather tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
jencycla tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
jolivette tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
lyza tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
nora-be tab 0.35mg	PREV	MAIL; Covered up to 1 year supply at a time
norethindrone tab 0.35 mg	PREV	MAIL; Covered up to 1 year supply at a time
ORTHO MICRON TAB 0.35MG	PREV	MAIL; Covered up to 1 year supply at a time
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
prednisone tab therapy pack 5 mg (21)	Tier 1	
prednisone tab therapy pack 10 mg (21)	Tier 1	
Glucocorticosteroids		
budesonide delayed release particles cap 3 mg	Tier 2	PA; MAIL
cortisone acetate tab 25 mg	Tier 1	QL (720 tabs / 30 days); MAIL
dexamethasone elixir 0.5 mg/5ml	Tier 1	QL (1800 mL / 30 days); MAIL
dexamethasone sod phosphate preservative free inj 10 mg/ml	Tier 1	MAIL
dexamethasone sodium phosphate inj 10 mg/ml	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
dexamethasone sodium phosphate inj 100 mg/10ml	Tier 1	MAIL
dexamethasone soln 0.5 mg/5ml	Tier 1	MAIL
dexamethasone tab 0.5 mg	Tier 1	QL (360 tabs / 30 days); MAIL
dexamethasone tab 0.75 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dexamethasone tab 1 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dexamethasone tab 1.5 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dexamethasone tab 2 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dexamethasone tab 4 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dexamethasone tab 6 mg	Tier 1	QL (300 tabs / 30 days); MAIL
hydrocortisone tab 5 mg	Tier 1	QL (720 tabs / 30 days); MAIL
hydrocortisone tab 10 mg	Tier 1	QL (360 ea / 30 days); MAIL
hydrocortisone tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
methylprednisolone tab 4 mg	Tier 1	QL (360 tabs / 30 days); MAIL
methylprednisolone tab 8 mg	Tier 1	QL (180 tabs / 30 days); MAIL
methylprednisolone tab 16 mg	Tier 1	QL (120 tabs / 30 days); MAIL
methylprednisolone tab 32 mg	Tier 1	QL (360 tabs / 30 days); MAIL
methylprednisolone tab therapy pack 4 mg (21)	Tier 1	QL (360 tabs / 30 days); MAIL
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	Tier 1	MAIL
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	Tier 1	QL (1500 mL / 30 days); MAIL
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	Tier 1	MAIL
prednisolone syrup 15 mg/5ml (usp solution equivalent)	Tier 1	QL (1800 mL / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
prednisone oral soln 5 mg/5ml	Tier 1	QL (1800 mL / 30 days); MAIL
prednisone tab 1 mg	Tier 1	QL (300 tabs / 30 days); MAIL
prednisone tab 2.5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
prednisone tab 5 mg	Tier 1	QL (480 tabs / 30 days); MAIL
prednisone tab 10 mg	Tier 1	QL (270 tabs / 30 days); MAIL
prednisone tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
prednisone tab 50 mg	Tier 1	QL (90 tabs / 30 days); MAIL
prednisone tab therapy pack 5 mg (48)	Tier 1	MAIL
prednisone tab therapy pack 10 mg (48)	Tier 1	MAIL
Mineralocorticoids		
fludrocortisone acetate tab 0.1 mg	Tier 1	QL (150 ea / 30 days); MAIL
COUGH/COLD/ALLERGY		
Antitussives		
benzonatate cap 100 mg	Tier 1	QL (180 caps / 30 days); MAIL
benzonatate cap 200 mg	Tier 1	QL (150 caps / 30 days); MAIL
hydrocodone w/ homatropine syrup 5-1.5 mg/5ml	Tier 1	QL (1800 mL / 30 days)
hydromet syp 5-1.5/5	Tier 1	QL (1800 mL / 30 days)
robitussin syp 7.5/5ml	Tier 1	OTC, QL (180 mL / 30 days); MAIL; Covered for ages 4 and over
triaminic syp cough	Tier 1	OTC, QL (180 mL / 30 days); MAIL; Covered for ages 4 and over
Cough/Cold/Allergy Combinations		
alavert alrg tab /sinus	Tier 1	OTC, QL (60 ea / 30 days); MAIL
all day alrg tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over

Drug Name	Drug Tier	Requirements/Limits
aller-tec d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
aller/conges tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allerclear d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
allerclear d tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allerclear tab d-24hr	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
allergy rel/ tab deconges	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
allergy relf tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
allergy relf tab /congest	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab d	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab d12	Tier 1	OTC, QL (60 ea / 30 days); MAIL
allergy relf tab d 24 hr	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab d-24	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy relf tab deconges	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allergy-d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
allergy/cong tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
allgy comp-d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over

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allrgy rel d tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
allrgy relf tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
allrgy rlf-d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
altarussn dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
biocotron liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
bromfed dm syp	Tier 1	QL (1800 mL / 30 days); MAIL
brotapp dm liq 15-1-5/5	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
brotapp liq	Tier 1	OTC, QL (480 mL / 25 days); MAIL
CAPMIST DM TAB	Tier 2	OTC; MAIL
cetirizine-pseudoephedrine tab er 12hr 5-120 mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
cgh dm max liq 10-200	Tier 1	OTC, QL (90 mL / 30 days); MAIL
cheratussin syp ac	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
cold & cough liq 6.25-2.5	Tier 1	OTC, QL (180 mL / 30 days); MAIL
cold/allergy elx children	Tier 1	OTC, QL (480 mL / 25 days); MAIL
cold/cough elx children	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
cold/cough elx dm	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
cold/cough liq 6.25-2.5	Tier 1	OTC, QL (180 mL / 30 days); MAIL
cough cont liq dm max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
cough dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
dextromethorphan-guaifenesin liquid 10-100 mg/5ml	Tier 1	OTC, QL (90 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
diabetic tus liq children	Tier 1	OTC, QL (90 mL / 30 days); MAIL
diabetic tus liq dm	Tier 1	OTC, QL (90 mL / 30 days); MAIL
diabetic tus liq max st	Tier 1	OTC, QL (90 mL / 30 days); MAIL
dimetapp liq nighttim	Tier 1	OTC, QL (180 mL / 30 days); MAIL
eq tussin dm liq max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
eq tussin dm syp cgh/chst	Tier 1	OTC, QL (180 mL / 25 days); MAIL
eql allergy tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eql triactin elx cld/cgh	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
eql tussin liq 10-200	Tier 1	OTC, QL (90 mL / 30 days); MAIL
eql tussin syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
extra action syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
g-tron liq 10-100/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
geri-tussin syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
gnp tussin liq dm cough	Tier 1	OTC, QL (90 mL / 30 days); MAIL
gnp tussin liq dm max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
guaiasorb dm liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
guaiatuss ac syp 100-10/5	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
guaicon dms syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
guaifenesin syp 100-10/5	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over

Drug Name	Drug Tier	Requirements/Limits
guaifenesin-codeine soln 100-10 mg/5ml	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
hm tussin liq adlt dm	Tier 1	OTC, QL (90 mL / 30 days); MAIL
hm tussin liq dm max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
lorata-dine tab d 24hr	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
loratadine d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
loratadine-d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
loratadine-d tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
medi-tuss dm liq diabetic	Tier 1	OTC, QL (90 mL / 30 days); MAIL
medi-tussin syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
mucus d tab 60-600mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucus-dm tab 30-600mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
ped formula liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
PRO-CLEAR AC SYP 9-8.33MG	Tier 1	OTC, QL (180 mL / 25 days)
prometh vc sol plain	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
prometh vc/ syp codeine	Tier 1	QL (1800 mL / 30 days); AGE; Covered for ages 2-64
promethazine & phenylephrine syrup 6.25-5 mg/5ml	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
promethazine w/ codeine syrup 6.25-10 mg/5ml	Tier 1	QL (240 mL / 30 days); AGE; Covered for ages 2-64

Drug Name	Drug Tier	Requirements/Limits
promethazine-dm syrup 6.25-15 mg/5ml	Tier 1	QL (180 mL / 25 days); AGE; MAIL; Covered for ages 4-64
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	Tier 1	QL (1800 mL / 30 days); MAIL
px tussin dm liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
q-tapp dm elx	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
q-tussin dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
ra allergy tab sinus	Tier 1	OTC; MAIL
ra cetiri-d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
ra lorata-d tab 24 hour	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra tussin dm liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
ra tussin liq dm max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
robafen dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
robitussin liq cgh/cong	Tier 1	OTC, QL (90 mL / 30 days); MAIL
robitussin liq to go dm	Tier 1	OTC, QL (90 mL / 30 days); MAIL
rynex pse liq	Tier 1	OTC, QL (480 mL / 25 days); MAIL
safe tussin liq 10-100/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
sb cgh contr liq dm	Tier 1	OTC, QL (90 mL / 30 days); MAIL
siltussin dm liq das	Tier 1	OTC, QL (90 mL / 30 days); MAIL
siltussin-dm liq diabetic	Tier 1	OTC, QL (90 mL / 30 days); MAIL
siltussin-dm liq max st	Tier 1	OTC, QL (90 mL / 30 days); MAIL
siltussin-dm syp alc free	Tier 1	OTC, QL (180 mL / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
sm tussin dm liq max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
sm tussin dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
sm tussin syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
tgt allergy/ tab congest	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
tgt cough liq form dm	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tolu-sed dm liq 100-10/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
triacting nt liq cold/cgh	Tier 1	OTC, QL (180 mL / 30 days); MAIL
tusnel diabt liq 10-100/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin adult liq cgh/cong	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin cough liq 10-100/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin cough syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
tussin dm cg liq 20-400	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm liq	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm liq 10-100mg	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm liq 10-200	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm liq 10-200/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm liq clear	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm mx liq 10-200/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
tussin dm syp 100-10/5	Tier 1	OTC, QL (180 mL / 25 days); MAIL
virtussin ac sol 100-10/5	Tier 1	OTC, QL (1800 mL / 30 days); Covered for ages 2 and over
wal-dryl pe tab 25-10mg	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
wal-itin d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL
wal-itin d tab 10-240mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
wal-itin d tab 24 hour	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
wal-tap dm elx cold/cgh	Tier 1	OTC, QL (1800 mL / 30 days); MAIL
wal-tap elx cld/alle	Tier 1	OTC, QL (480 mL / 25 days); MAIL
wal-tussin liq 10-100/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
wal-tussin liq 10-200/5	Tier 1	OTC, QL (90 mL / 30 days); MAIL
wal-tussin liq dm max	Tier 1	OTC, QL (90 mL / 30 days); MAIL
wal-tussin syp dm	Tier 1	OTC, QL (180 mL / 25 days); MAIL
wal-zyr d tab 5-120mg	Tier 1	OTC, QL (60 ea / 30 days); MAIL; Covered for ages 4 and over
Expectorants		
altarussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
bidex tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
buckleys liq chest	Tier 1	OTC; MAIL; Covered for ages 4 and over
chest conges liq child	Tier 1	OTC; MAIL; Covered for ages 4 and over
chest conges liq childrns	Tier 1	OTC; MAIL; Covered for ages 4 and over
chest conges tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
cough syp	Tier 1	OTC; MAIL; Covered for ages 4 and over
cough syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
coughtab tab 200mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
cvs mucus er tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
diabetic tus liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
diabtc tussn syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
eq tussin liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
fenesin ir tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
g-fen ex tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
geri-tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
gnp mucus-er tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
gnp tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
guaifenesin liquid 100 mg/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
guaifenesin syrup 100 mg/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
guaifenesin tab 200 mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
guaifenesin tab 400 mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
guaifenesin tab er 12hr 600 mg	Tier 1	QL (60 tabs / 30 days); MAIL
hm mucus er tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
liquibid tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
medifin 400 tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucinex chld liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucosa tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucus relief liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucus relief liq 400/20ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucus relief tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over

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mucus relief tab 600mg er	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
mucus+chst liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
mucus-er tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
organ-i nr tab 200mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
pa mucus rel tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
px tussin sol 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
qc medifin liq mucus rl	Tier 1	OTC; MAIL; Covered for ages 4 and over
ra tussin liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
ra tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
refenesen tab 200mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
refenesen tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
robafen syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
sb cgh contr syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
sb coughtab tab 200mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
scot-tussin liq expct sf	Tier 1	OTC; MAIL; Covered for ages 4 and over
siltuss das liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
siltussin sa syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
sm mucus er tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
sm tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
tab tussin tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
tussin adult liq 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over

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Drug Name	Drug Tier	Requirements/Limits
tussin chest syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
wal-tussin syp 100/5ml	Tier 1	OTC; MAIL; Covered for ages 4 and over
xpect tab 400mg	Tier 1	OTC; MAIL; Covered for ages 4 and over
Misc. Respiratory Inhalants		
nebusal neb 3%	Tier 1	QL (480 mL / 30 days); MAIL
sodium chloride soln nebu 0.9%	Tier 1	QL (480 mL / 30 days); MAIL
sodium chloride soln nebu 3%	Tier 1	QL (480 mL / 30 days); MAIL
sodium chloride soln nebu 7%	Tier 1	QL (480 mL / 30 days); MAIL
Mucolytics		
acetylcysteine inhal soln 20%	Tier 1	QL (Max day supply 5 per 25); MAIL
DERMATOLOGICALS		
ANTIFUNGALS - TOPICAL		
ciclopirox olamine susp 0.77% (base equiv)	Tier 1	QL (60 mL / 30 days)
ciclopirox solution 8%	Tier 1	QL (6.6 mL / 30 days)
ANTIPSORIATICS		
SKYRIZI INJ 150DOSE	Tier 4	PA; Preferred Brand
Acne Products		
ACNE MEDICAT LOT 5%	Tier 1	OTC, QL (141 mL / 25 days); MAIL
ACNE MEDICAT LOT 10%	Tier 1	OTC, QL (30 mL / 25 days); MAIL
adapalene cream 0.1%	Tier 1	QL (45 gm / 25 days); MAIL
adapalene gel 0.1%	Tier 1	QL (45 gm / 25 days); MAIL
adapalene gel 0.3%	Tier 2	QL (45 gm / 25 days); MAIL
adapalene lotion 0.1%	Tier 1	QL (59 mL / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
adapalene-benzoyl peroxide gel 0.1-2.5%	Tier 1	QL (45 gm / 25 days), PA; MAIL
amnesteem cap 10mg	Tier 2	PA; MAIL
amnesteem cap 20mg	Tier 2	PA; MAIL
amnesteem cap 40mg	Tier 2	PA; MAIL
avita cre 0.025%	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
avita gel 0.025%	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
benzoyl per liq 5% wash	Tier 1	OTC, QL (240 gm / 25 days); MAIL
benzoyl per liq 10% wash	Tier 1	OTC, QL (240 gm / 25 days); MAIL
benzoyl peroxide gel 5%	Tier 1	OTC; MAIL
benzoyl peroxide gel 10%	Tier 1	OTC; MAIL
benzoyl peroxide-erythromycin gel 5-3%	Tier 2	MAIL
bp cleansing emu 10-4%	Tier 1	MAIL
claravis cap 10mg	Tier 2	PA; MAIL
claravis cap 20mg	Tier 2	PA; MAIL
claravis cap 30mg	Tier 2	PA; MAIL
claravis cap 40mg	Tier 2	PA; MAIL
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	Tier 2	QL (45 gm / 25 days), PA; MAIL
clindamycin phosphate gel 1%	Tier 1	QL (60 gm / 25 days); MAIL
clindamycin phosphate lotion 1%	Tier 1	QL (300 mL / 30 days), ST; MAIL; PRIOR USE OF Clindamycin Phosephate topical and Adapalene or Erythromycin and Adapalene
clindamycin phosphate soln 1%	Tier 1	QL (300 mL / 30 days); MAIL
clindamycin phosphate-tretinoin gel 1.2-0.025%	Tier 2	QL (60 gm / 25 days), PA; AGE; MAIL; Covered for ages 18 and over
CLINDAP-T CRE	Tier 3	PA; MAIL
EPIDUO GEL 0.1-2.5%	Tier 3	QL (45 gm / 25 days), PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
erythromycin gel 2%	Tier 1	QL (450 gm / 30 days), ST; MAIL; PRIOR USE OF Clindamycin Phosphate topical or Erythromycin and Adapalene OR Tretinoin
erythromycin soln 2%	Tier 1	QL (450 mL / 30 days); MAIL
isotretinoin cap 10 mg	Tier 2	PA; MAIL
isotretinoin cap 20 mg	Tier 2	PA; MAIL
isotretinoin cap 30 mg	Tier 2	PA; MAIL
isotretinoin cap 40 mg	Tier 2	PA; MAIL
myorisan cap 10mg	Tier 2	PA; MAIL
myorisan cap 20mg	Tier 2	PA; MAIL
myorisan cap 30mg	Tier 2	PA; MAIL
myorisan cap 40mg	Tier 2	PA; MAIL
sulfacetamide sodium lotion 10% (acne)	Tier 1	MAIL
tretinoin cream 0.1%	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger
tretinoin cream 0.05%	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger; PRIOR USE OF Clindamycin Phosphate topical and Adapalene OR Erythromycin and Adapalene
tretinoin cream 0.025%	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
tretinoin gel 0.01%	Tier 1	QL (45 gms per month), ST; AGE; MAIL; Covered for ages 35 and younger
tretinoin gel 0.025%	Tier 2	QL (45 gms per month); AGE; MAIL; Covered for ages 35 and younger
zenatane cap 10mg	Tier 2	PA; MAIL
zenatane cap 20mg	Tier 2	PA; MAIL
zenatane cap 30mg	Tier 2	PA; MAIL
zenatane cap 40mg	Tier 2	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
Agents for External Genital and Perianal Warts		
VEREGEN OIN 15%	Tier 3	QL (30 gm / 25 days), PA; MAIL
Anti-inflammatory Agents - Topical		
diclofenac sodium gel 1%	Tier 1	QL (1000 gm / 25 days), PA; MAIL
Antibiotics - Topical		
ALTABAX OIN 1%	Tier 3	PA; MAIL
antibiotic oin	Tier 1	OTC; MAIL
antibiotic oin pain rlf	Tier 1	OTC; MAIL
bacitracin oin 500/gm	Tier 1	OTC, QL (300 gm / 30 days); MAIL
bacitracin oint 500 unit/gm	Tier 1	OTC, QL (300 gm / 30 days); MAIL
bacitracin zinc oint 500 unit/gm	Tier 1	OTC; MAIL
bacitraycin oin 500/gm	Tier 1	OTC, QL (300 gm / 30 days); MAIL
CORTISPORIN OIN 1%	Tier 3	MAIL
cvs triple oin antibiot	Tier 1	OTC; MAIL
double antib oin	Tier 1	OTC; MAIL
eq triple oin antibiot	Tier 1	OTC; MAIL
first aid oin antibiot	Tier 1	OTC; MAIL
gentamicin sulfate cream 0.1%	Tier 1	MAIL
gentamicin sulfate oint 0.1%	Tier 1	QL (30 gm / 30 days); MAIL
gnp first oin aid anti	Tier 1	OTC; MAIL
hm triple oin antibiot	Tier 1	OTC; MAIL
lanabiotic oin	Tier 1	OTC; MAIL
mupirocin oint 2%	Tier 1	QL (44 gm / 25 days); MAIL
neomycin-bacitracin-polymyxin oint	Tier 1	OTC; MAIL
neosporin oin	Tier 1	OTC; MAIL
neosporin+pn oin relf max	Tier 1	OTC; MAIL
poly bacitra oin	Tier 1	OTC; MAIL
px triple oin	Tier 1	OTC; MAIL
ra triple oin antibiot	Tier 1	OTC; MAIL
sm triple oin antibiot	Tier 1	OTC; MAIL
tgt antibiot oin	Tier 1	OTC; MAIL
tri-biozene oin	Tier 1	OTC; MAIL
triple antib oin	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
triple antib oin max st	Tier 1	OTC; MAIL
triple antib oin plus	Tier 1	OTC; MAIL
triple antib oin plus max	Tier 1	OTC; MAIL
wal-sporin oin	Tier 1	OTC; MAIL
Antifungals - Topical		
af spry powd aer 1%	Tier 1	OTC; MAIL
anti-fungal cre 1%	Tier 1	OTC; MAIL
anti-fungal pow 1%	Tier 1	OTC; MAIL
anti-fungal pow 2%	Tier 1	OTC; MAIL
anti-fungal sol 1%	Tier 1	OTC; MAIL
antifung pow aer 1%	Tier 1	OTC; MAIL
antifungal cre 1%	Tier 1	OTC; MAIL
antifungal cre 1%	Tier 1	OTC, QL (210 gm / 30 days); MAIL
antifungal cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
antifungal cre foot 1%	Tier 1	OTC, QL (30 gm / 25 days); MAIL
ath foot pow aer 1%	Tier 1	OTC; MAIL
athlete foot aer 1%	Tier 1	OTC; MAIL
athlete foot aer 2%	Tier 1	OTC; MAIL
athlete foot cre 1%	Tier 1	OTC; MAIL
athlete foot cre 1%	Tier 1	OTC, QL (210 gm / 30 days); MAIL
athlete foot cre 1%	Tier 1	OTC, QL (30 gm / 25 days); MAIL
athlete foot cre af	Tier 1	OTC, QL (30 gm / 25 days); MAIL
baza antifun cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
blis-to-sol liq 1%	Tier 1	OTC; MAIL
butenafine hcl cream 1%	Tier 1	OTC; MAIL
ciclodan cre 0.77%	Tier 1	QL (600 gm / 30 days); MAIL
ciclopirox olamine cream 0.77% (base equiv)	Tier 1	QL (600 gm / 30 days); MAIL
clotrimazole cream 1%	Tier 1	QL (210 gm / 30 days); MAIL
clotrimazole soln 1%	Tier 1	OTC; MAIL
clotrimazole w/ betamethasone cream 1-0.05%	Tier 1	QL (45 gm / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
clotrimazole w/ betamethasone lotion 1-0.05%	Tier 1	QL (450 mL / 30 days); MAIL
critic-aid oin 2%	Tier 1	OTC; MAIL
cruex aer 2%	Tier 1	OTC; MAIL
dermafungal oin 2%	Tier 1	OTC; MAIL
desenex aer 2%	Tier 1	OTC; MAIL
desenex cre 1%	Tier 1	OTC, QL (210 gm / 30 days); MAIL
desenex shak pow 2%	Tier 1	OTC; MAIL
dr gs clear sol nail 1%	Tier 1	OTC; MAIL
econazole nitrate cream 1%	Tier 2	PA; MAIL
ERTACZO CRE 2%	Tier 3	QL (60 gm / 25 days), PA; MAIL
EXELDERM CRE 1%	Tier 3	QL (60 gm / 25 days); MAIL
EXELDERM SOL 1%	Tier 3	QL (60 mL / 25 days); MAIL
foot care cre 1%	Tier 1	OTC, QL (30 gm / 25 days); MAIL
foot&sneaker aer 1%	Tier 1	OTC; MAIL
fungi-guard cre 1%	Tier 1	OTC; MAIL
fungicure spr intens	Tier 1	OTC; MAIL
fungoid-d cre 1%	Tier 1	OTC; MAIL
jck itch pow aer 1%	Tier 1	OTC; MAIL
jock itch aer 1%	Tier 1	OTC; MAIL
jock itch cre 1%	Tier 1	OTC, QL (210 gm / 30 days); MAIL
jock itch cre 1%	Tier 1	OTC, QL (30 gm / 25 days); MAIL
ketoconazole cream 2%	Tier 1	QL (60 gm / 25 days); MAIL
ketoconazole shampoo 2%	Tier 1	QL (120 mL / 25 days); MAIL
lamisil af aer 1%	Tier 1	OTC; MAIL
lotrimin af aer 2%	Tier 1	OTC; MAIL
lotrimin af pow 2%	Tier 1	OTC; MAIL
luliconazole cream 1%	Tier 2	PA; MAIL
LUZU CRE 1%	Tier 3	PA; MAIL
MENTAX CRE 1%	Tier 2	MAIL
micaderm cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
miconazole aer 2%	Tier 1	OTC; MAIL
miconazole cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
miconazole nitrate aerosol pow 2%	Tier 1	OTC; MAIL
miconazorb pow af 2%	Tier 1	OTC; MAIL
micro guard pow 2%	Tier 1	OTC; MAIL
mycocide ns sol 1%	Tier 1	OTC; MAIL
naftifine hcl cream 1%	Tier 2	MAIL
naftifine hcl cream 2%	Tier 2	MAIL
NAFTIN GEL 1%	Tier 3	PA; MAIL
NAFTIN-MP CRE 1%	Tier 3	MAIL
nyamyc pow 100000	Tier 1	QL (30 gm / 25 days); MAIL
nyata pow 100000	Tier 1	QL (30 gm / 25 days); MAIL
nystatin cream 100000 unit/gm	Tier 1	QL (90 gm / 25 days); MAIL
nystatin oint 100000 unit/gm	Tier 1	QL (90 gm / 25 days); MAIL
nystatin topical powder 100000 unit/gm	Tier 1	QL (30 gm / 25 days); MAIL
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	Tier 2	QL (30 gm / 30 days); MAIL
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	Tier 2	QL (30 gm / 30 days); MAIL
nystop pow 100000	Tier 1	QL (30 gm / 25 days); MAIL
odor control aer powd 1%	Tier 1	OTC; MAIL
odor eaters aer 1%	Tier 1	OTC; MAIL
odor eaters pow 1%	Tier 1	OTC; MAIL
oxiconazole nitrate cream 1%	Tier 2	QL (90 gm / 25 days); MAIL
OXISTAT LOT 1%	Tier 3	QL (60 mL / 25 days), PA; MAIL
podactin cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
podactin pow 1%	Tier 1	OTC; MAIL
remedy cre antifung	Tier 1	OTC, QL (150 mL / 30 days); MAIL
remedy oin af 2%	Tier 1	OTC; MAIL
remedy pow antifung	Tier 1	OTC; MAIL

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ringworm cre 1%	Tier 1	OTC, QL (210 gm / 30 days); MAIL
sm antifungl cre 1%	Tier 1	OTC; MAIL
sm antifungl cre 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
soothe&cool cre inzo 2%	Tier 1	OTC, QL (150 gm / 30 days); MAIL
terbinafine cre 1%	Tier 1	OTC, QL (30 gm / 25 days); MAIL
tetterine oin 2%	Tier 1	OTC; MAIL
tgt antifung cre 1%	Tier 1	OTC; MAIL
tgt athletes cre foot	Tier 1	OTC, QL (30 gm / 25 days); MAIL
tinaspore sol 1%	Tier 1	OTC; MAIL
tolnaftate aerosol pow 1%	Tier 1	OTC; MAIL
tolnaftate cre 1%	Tier 1	OTC; MAIL
tolnaftate powder 1%	Tier 1	OTC; MAIL
tolnaftate soln 1%	Tier 1	OTC; MAIL
triple paste oin af 2%	Tier 1	OTC; MAIL
zeasorb-af pow 2%	Tier 1	OTC; MAIL
Antihistamines-Topical		
allergy cre 2-0.1%	Tier 1	OTC; MAIL
eq anti-itch cre 2-0.1%	Tier 1	OTC; MAIL
sb anti-itch cre 2-0.1%	Tier 1	OTC; MAIL
Antineoplastic or Premalignant Lesion Agents - Topical		
FLUORAC CRE 5-1%	Tier 3	PA; MAIL
fluorouracil cream 5%	Tier 2	MAIL
PANRETIN GEL 0.1%	Tier 4	PA
PICATO GEL 0.05%	Tier 3	PA; MAIL
PICATO GEL 0.015%	Tier 3	PA; MAIL
TARGRETIN GEL 1%	Tier 4	PA
Antipruritics - Topical		
doxepin hcl cream 5%	Tier 2	QL (90 gm / 25 days), PA; MAIL
Antipsoriatics		
acitretin cap 10 mg	Tier 2	PA; MAIL
acitretin cap 17.5 mg	Tier 2	PA; MAIL
acitretin cap 25 mg	Tier 2	PA; MAIL
calcipotriene oint 0.005%	Tier 2	QL (60 gm / 30 days), PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
calcipotriene soln 0.005% (50 mcg/ml)	Tier 2	QL (60 mL / 30 days), PA; MAIL
calcitrene oin 0.005%	Tier 2	QL (60 gm / 30 days), PA; MAIL
calcitriol oint 3 mcg/gm	Tier 2	QL (100 gm / 25 days); MAIL
COSENTYX INJ 150MG/ML	Tier 4	PA
COSENTYX PEN INJ 300DOSE	Tier 4	PA
DRITHO-CREME CRE HP 1%	Tier 2	QL (50 gm / 25 days); MAIL
STELARA INJ 45MG/0.5	Tier 4	PA; Preferred Brand
STELARA INJ 90MG/ML	Tier 4	PA; Preferred Brand
tazarotene cream 0.1%	Tier 2	QL (60 gm / 25 days), PA; MAIL; Covered for ages 18 and over
TAZORAC CRE 0.05%	Tier 3	QL (60 gm / 25 days), PA; MAIL; Covered for ages 18 and over
TAZORAC GEL 0.1%	Tier 3	QL (100 gm / 25 days), PA; MAIL; Covered for ages 18 and over
TAZORAC GEL 0.05%	Tier 3	QL (100 gm / 25 days), PA; MAIL; Covered for ages 18 and over
Antiseborrheic Products		
anti-dandruf sha 1%	Tier 1	OTC; MAIL
dandruff sha 1%	Tier 1	OTC; MAIL
ra dandruff sha 1%	Tier 1	OTC; MAIL
selenium sulfide lotion 2.5%	Tier 1	MAIL
Antivirals - Topical		
ABREVA CRE 10%	Tier 1	OTC, QL (2 gm / 15 days); MAIL
acyclovir oint 5%	Tier 2	PA; AGE; MAIL; Covered for ages 18 and over
DENAVIR CRE 1%	Tier 2	MAIL
ZOVIRAX CRE 5%	Tier 2	PA; AGE; MAIL; Covered for ages 18 and over
Burn Products		
mafenide acetate packet for topical soln 5% (50 gm)	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
silver sulfadiazine cream 1%	Tier 1	QL (1050 gm / 30 days); MAIL
ssd cre 1%	Tier 1	QL (1050 gm / 30 days); MAIL
SULFAMYLON CRE 85MG/GM	Tier 3	MAIL
thermazene cre 1%	Tier 1	QL (1050 gm / 30 days); MAIL
Corticosteroids - Topical		
ala-cort cre 1%	Tier 1	QL (60 gm / 25 days); MAIL
alclometasone dipropionate cream 0.05%	Tier 1	MAIL
alclometasone dipropionate oint 0.05%	Tier 1	MAIL
amcinonide cream 0.1%	Tier 2	MAIL
amcinonide lotion 0.1%	Tier 2	MAIL
AMCINONIDE OIN 0.1%	Tier 3	MAIL
anti-itch cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch cre 1%pls 10	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch cre /aloe/e	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch cre /oatmeal	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch lot 1%	Tier 1	OTC, QL (120 gm / 25 days); MAIL
anti-itch oin 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch oin max st	Tier 1	OTC, QL (60 gm / 25 days); MAIL
anti-itch/ cre aloe	Tier 1	OTC; MAIL
APEXICON E CRE 0.05%	Tier 3	PA; MAIL
aquanil hc lot 1%	Tier 1	OTC, QL (120 mL / 25 days); MAIL
aveeno cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
beta hc lot 1%	Tier 1	OTC, QL (120 mL / 25 days); MAIL
betamethasone dipropionate augmented cream 0.05%	Tier 1	QL (60 gm / 30 days); MAIL
betamethasone dipropionate augmented gel 0.05%	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
betamethasone dipropionate augmented lotion 0.05%	Tier 1	MAIL
betamethasone dipropionate augmented oint 0.05%	Tier 1	MAIL
betamethasone dipropionate cream 0.05%	Tier 1	MAIL
betamethasone dipropionate lotion 0.05%	Tier 1	MAIL
betamethasone dipropionate oint 0.05%	Tier 1	QL (210 gm / 25 days); MAIL
betamethasone valerate cream 0.1% (base equivalent)	Tier 1	QL (450 gm / 30 days); MAIL
betamethasone valerate oint 0.1% (base equivalent)	Tier 1	MAIL
calcipotriene-betamethasone dipropionate oint 0.005-0.064%	Tier 2	QL (100 gm / 25 days), PA; MAIL
clobetasol propionate cream 0.05%	Tier 2	QL (60 gm / 25 days); MAIL
clobetasol propionate gel 0.05%	Tier 2	QL (60 gm / 25 days); MAIL
clobetasol propionate oint 0.05%	Tier 2	QL (60 gm / 25 days); MAIL
clobetasol propionate soln 0.05%	Tier 2	QL (50 mL / 25 days); MAIL
clocortolone pivalate cream 0.1%	Tier 2	MAIL
CORDRAN 80X3 TAP 4MCG/CM	Tier 3	QL (1 ea / 25 days), PA; MAIL
cormax scalp sol 0.05%	Tier 2	QL (50 mL / 25 days); MAIL
cort intense cre heal 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
corticool gel 1%	Tier 1	OTC; MAIL
cortisone cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
cortisone gel cooling	Tier 1	OTC; MAIL
cortisone lot 1%	Tier 1	OTC, QL (120 gm / 25 days); MAIL
cortisone oin 1%max st	Tier 1	OTC, QL (60 gm / 25 days); MAIL
cortizone-10 cre /aloe 1%	Tier 1	OTC; MAIL
cortizone-10 cre healing	Tier 1	OTC; MAIL
cortizone-10 cre plus	Tier 1	OTC; MAIL
cortizone-10 gel 1%	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
cortizone-10 lot eczema	Tier 1	OTC, QL (120 gm / 25 days); MAIL
cortizone-10 lot hydraten	Tier 1	OTC, QL (120 gm / 25 days); MAIL
cortizone-10 oin 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
DERMA SILKRX KIT SDS PAK	Tier 3	MAIL
desonide cream 0.05%	Tier 1	QL (450 gm / 30 days), ST; MAIL; Prior use of 3; Alclometasone Crm Oint, Desonide Oint, Fluocinolone Oil, Hydrocortisone Crm (0.5%, 0.1%, 2.5%), Gel (1%), Lotion (1%, 2.5%) or Oint (1%, 2.5%), Hydrocortisone Crm 0.5% for 30 days.
desonide oint 0.05%	Tier 1	QL (60 gm / 25 days); MAIL
desoximetasone cream 0.05%	Tier 2	QL (60 gm / 30 days); MAIL
desoximetasone cream 0.25%	Tier 2	QL (60 gm / 30 days); MAIL
desoximetasone gel 0.05%	Tier 2	QL (60 gm / 30 days); MAIL
desoximetasone oint 0.05%	Tier 2	QL (60 gm / 30 days); MAIL
desoximetasone oint 0.25%	Tier 2	QL (60 gm / 30 days); MAIL
diflorasone diacetate cream 0.05%	Tier 2	QL (60 gm / 30 days); MAIL
diflorasone diacetate oint 0.05%	Tier 2	QL (60 gm / 30 days); MAIL
eq hydrocort cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
fluocinolone acetonide cream 0.025%	Tier 1	MAIL
fluocinolone acetonide oil 0.01% (body oil)	Tier 2	QL (120 mL / 25 days); MAIL
fluocinolone acetonide oil 0.01% (scalp oil)	Tier 2	QL (120 mL / 25 days); MAIL
fluocinolone acetonide oint 0.025%	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
fluocinonide cream 0.05%	Tier 1	QL (150 gm / 25 days); MAIL
fluocinonide emulsified base cream 0.05%	Tier 1	QL (60 gm / 25 days); MAIL
fluocinonide gel 0.05%	Tier 1	QL (60 gm / 25 days); MAIL
fluocinonide oint 0.05%	Tier 1	QL (60 gm / 30 days), ST; MAIL; Prior use of 2; Mometasone Cream, Fluocinolone Cream, or Triamcinolone Ointment for 20 days.
fluocinonide soln 0.05%	Tier 1	QL (60 mL / 25 days); MAIL
flurandrenolide cream 0.05%	Tier 2	QL (30 gm / 25 days); MAIL
flurandrenolide lotion 0.05%	Tier 2	QL (15 mL / 25 days); MAIL
fluticasone propionate cream 0.05%	Tier 1	QL (60 gm / 25 days); MAIL
fluticasone propionate oint 0.005%	Tier 1	QL (60 gm / 25 days); MAIL
gnp hydrocor cre 1% plus	Tier 1	OTC, QL (60 gm / 25 days); MAIL
gynecort 10 cre 1%	Tier 1	OTC; MAIL
halobetasol propionate cream 0.05%	Tier 2	MAIL
halobetasol propionate oint 0.05%	Tier 2	MAIL
HALOG CRE 0.1%	Tier 3	PA; MAIL
HALOG OIN 0.1%	Tier 3	QL (60 gm / 25 days), PA; MAIL
hc-1% hemorr oin 1%	Tier 1	OTC; MAIL
hm hydrocort cre 1% plus	Tier 1	OTC; MAIL
hydro-lotion lot 1%	Tier 1	OTC, QL (120 mL / 25 days); MAIL
hydrocort ac cre 1%	Tier 1	OTC; MAIL
hydrocort cre 0.5%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
hydrocort cre 1%pls 10	Tier 1	OTC, QL (60 gm / 25 days); MAIL
hydrocort/ cre aloe 1%	Tier 1	OTC; MAIL
hydrocortiso oin absorbas	Tier 1	QL (60 gm / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
hydrocortisone acetate-aloe vera cream 0.5%	Tier 1	OTC; MAIL
hydrocortisone cream 0.5%	Tier 1	OTC; MAIL
hydrocortisone cream 2.5%	Tier 1	QL (60 gm / 25 days); MAIL
hydrocortisone lotion 2.5%	Tier 1	QL (60 mL / 25 days); MAIL
hydrocortisone oint 0.5%	Tier 1	OTC; MAIL
hydrocortisone oint 1%	Tier 1	QL (60 gm / 25 days); MAIL
hydrocortisone oint 2.5%	Tier 1	QL (60 gm / 25 days); MAIL
hydrocortisone valerate cream 0.2%	Tier 1	QL (60 gm / 25 days); MAIL
hydrocortisone-aloe vera cream 0.5%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
hydrocream cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
instacort 5 cre 0.5%	Tier 1	OTC; MAIL
kericort 10 cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
kls hydrocrt cre pls 1%	Tier 1	OTC; MAIL
lanacort 10 cre 1%	Tier 1	OTC; MAIL
med-derm hc cre 0.5%	Tier 1	OTC; MAIL
med-derm hc cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
mg217 gel 1%	Tier 1	OTC; MAIL
mometasone furoate cream 0.1%	Tier 1	QL (60 gm / 25 days); MAIL
mometasone furoate oint 0.1%	Tier 1	QL (60 gm / 25 days); MAIL
mometasone furoate solution 0.1% (lotion)	Tier 1	MAIL
noble formul cre hc 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
prednicarbate cream 0.1%	Tier 2	MAIL
prednicarbate oint 0.1%	Tier 2	MAIL
prep h cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
qc hydrocort cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
ra anti-itch cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
ra anti-itch oin 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
ra hydrocort cre 0.5%	Tier 1	OTC; MAIL
ra hydrocort cre 1%	Tier 1	OTC; MAIL
ra hydrocort cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
ra hydrocort cre 1%pls 12	Tier 1	OTC, QL (60 gm / 25 days); MAIL
recort plus cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
rederm lot 1%	Tier 1	OTC, QL (120 mL / 25 days); MAIL
SANADERMRX KIT SKIN REP	Tier 3	MAIL
sarnol-hc lot 1%	Tier 1	OTC, QL (120 mL / 25 days); MAIL
sb hydrocort oin 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
sm hydrocort cre 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
sm hydrocort cre 1% plus	Tier 1	OTC; MAIL
sm hydrocort oin 1%	Tier 1	OTC, QL (60 gm / 25 days); MAIL
TACLONEX SUS	Tier 3	QL (120 gm / 25 days), PA; MAIL
triamcinolone acetonide cream 0.1%	Tier 1	QL (480 gm / 30 days); MAIL
triamcinolone acetonide cream 0.5%	Tier 1	QL (450 gm / 30 days); MAIL
triamcinolone acetonide cream 0.025%	Tier 1	QL (450 gm / 30 days); MAIL
triamcinolone acetonide lotion 0.1%	Tier 1	QL (450 mL / 30 days); MAIL
triamcinolone acetonide lotion 0.025%	Tier 1	QL (60 mL / 25 days); MAIL
triamcinolone acetonide oint 0.1%	Tier 1	QL (450 gm / 30 days); MAIL
triamcinolone acetonide oint 0.5%	Tier 1	QL (15 gm / 25 days); MAIL
triamcinolone acetonide oint 0.025%	Tier 1	QL (450 gm / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
triderm cre 0.1%	Tier 1	QL (480 gm / 30 days); MAIL
TRIDERMA CRE FORTE	Tier 3	PA; MAIL
VALIDERM CRE	Tier 3	PA; MAIL
ECZEMA AGENTS		
DUPIXENT INJ 300/2ML	Tier 4	PA
Emollients		
al12 lot 12%	Tier 1	OTC, QL (225 gm / 25 days); MAIL
amlactin lot 12%	Tier 1	OTC, QL (225 gm / 25 days); MAIL
geri-hydrola cre 12%	Tier 1	OTC, QL (280 gm / 25 days); MAIL
geri-hydrola lot 12%	Tier 1	OTC, QL (225 gm / 25 days); MAIL
hydrophor oin	Tier 1	OTC; MAIL
lactic acid (ammonium lactate) cream 12%	Tier 1	OTC, QL (280 gm / 25 days); MAIL
lactic acid (ammonium lactate) lotion 12%	Tier 1	OTC, QL (225 gm / 25 days); MAIL
skin trtment lot 12%	Tier 1	OTC, QL (225 gm / 25 days); MAIL
Enzymes - Topical		
SANTYL OIN 250/GM	Tier 3	QL (30 gm / 30 days), PA; MAIL
tbc aer	Tier 1	
Immunomodulating Agents - Topical		
imiquimod cream 5%	Tier 1	QL (24 ea / 25 days), PA; MAIL
Immunosuppressive Agents - Topical		
ELIDEL CRE 1%	Tier 2	QL (60 gm / 30 days), PA; MAIL; Covered for ages 2 and over
pimecrolimus cream 1%	Tier 1	QL (60 gm / 30 days), PA; MAIL; Covered for ages 2 and over
tacrolimus oint 0.1%	Tier 2	QL (30 gm / 25 days), PA; MAIL; Covered for ages 2 and over

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tacrolimus oint 0.03%	Tier 2	QL (30 gm / 25 days), PA; MAIL; Covered for ages 2 and over
Keratolytic/Antimitotic Agents		
podofilox soln 0.5%	Tier 1	QL (7 mL / 180 days); MAIL
SUPRACIL CRE	Tier 3	PA; MAIL
LOCAL ANESTHETICS - TOPICAL		
capsaicin cream 0.1%	Tier 1	OTC
capsaicin cream 0.025%	Tier 1	OTC
Local Anesthetics - Topical		
aspercreme pad lido 4%	Tier 1	OTC, QL (120 patches / 30 days); MAIL
lidocaine hcl soln 4%	Tier 1	QL (225 mL / 30 days); MAIL
lidocaine hcl urethral/mucosal gel 2%	Tier 1	QL (500 mL / 25 days); MAIL
lidocaine patch 5%	Tier 2	QL (90 patches / 30 days), PA; MAIL
lidocaine-prilocaine cream 2.5-2.5%	Tier 1	QL (60 gm / 25 days); MAIL
lidocream cre 4%	Tier 1	OTC; MAIL
regenecare gel ha 2%	Tier 1	OTC, QL (500 mL / 25 days); MAIL
SYNERA DIS 70-70MG	Tier 3	QL (30 patches / 25 days), PA; MAIL
Misc. Topical		
DRYSOL SOL 20%	Tier 2	QL (180 mL / 30 days); MAIL
minerin cre	Tier 1	OTC; MAIL
ZINC-OXYDE OIN 0.44-20%	Tier 1	OTC; MAIL
Pigmenting-Depigmenting Agents		
OXSORALEN LOT 1%	Tier 3	QL (29.57 mL / 25 days), PA; MAIL
Rosacea Agents		
azelaic acid gel 15%	Tier 1	PA; MAIL
FINACEA GEL 15%	Tier 3	PA; MAIL
metronidazole cream 0.75%	Tier 1	QL (45 gm / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
metronidazole gel 0.75%	Tier 1	QL (45 gm / 25 days); MAIL
metronidazole lotion 0.75%	Tier 1	QL (59 mL / 25 days); MAIL
MIRVASO GEL 0.33%	Tier 3	PA; MAIL
rosadan cre 0.75%	Tier 1	QL (45 gm / 25 days); MAIL
rosadan gel 0.75%	Tier 1	QL (45 gm / 25 days); MAIL
Scabicides Pediculicides		
bedding spra aer 0.5%	Tier 1	OTC; MAIL
bio-well lot 1%	Tier 1	QL (60 mL / 25 days); MAIL
complete kit lice	Tier 1	OTC; MAIL
cvs lice kit solution	Tier 1	OTC; MAIL
cvs permethr lot 1%	Tier 1	OTC; MAIL
eql lice kit solution	Tier 1	OTC; MAIL
EURAX CRE 10%	Tier 2	ST; MAIL; PRIOR USE PERMETHRIN
gnp lice kit	Tier 1	OTC; MAIL
lice bedding aer	Tier 1	OTC; MAIL
lice bedding aer 0.5%	Tier 1	OTC; MAIL
lice killing sha	Tier 1	OTC; MAIL
lice killing sha 0.33-4%	Tier 1	OTC; MAIL
lice soln kit complete	Tier 1	OTC; MAIL
lice treatmt lot 1%	Tier 1	OTC; MAIL
lice treatmt sha 0.33-4%	Tier 1	OTC; MAIL
lice trtmnt liq 1%	Tier 1	OTC; MAIL
lice trtmnt liq crm rnse	Tier 1	OTC; MAIL
licide aer 0.5%	Tier 1	OTC; MAIL
licide comp kit treatmnt	Tier 1	OTC; MAIL
licide liq max st	Tier 1	OTC; MAIL
licide sha 0.33-4%	Tier 1	OTC; MAIL
lindane lotion 1%	Tier 1	QL (60 mL / 25 days); MAIL
lindane shampoo 1%	Tier 1	QL (60 mL / 25 days); MAIL
malathion lotion 0.5%	Tier 2	QL (Max 2 fills per 25 days), ST; MAIL; PRIOR USE PERMETHRIN OR PYRETHRIN

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MED - Max 90 mg Morphine EQ Dose Per Day
Tier 1 = Generics; Low cost preferred brand
Tier 2 = Non-Preferred generics; Preferred brand name drugs
Tier 3 = Non-preferred brand name drugs; **Tier 4** = Specialty Drugs
PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
permethrin cream 5%	Tier 1	QL (3600 gm / 30 days); MAIL
scabene lot 1%	Tier 1	QL (60 mL / 25 days); MAIL
SKLICE LOT 0.5%	Tier 3	PA; MAIL
sm bedding aer lice	Tier 1	OTC; MAIL
sm lice lot treatmnt	Tier 1	OTC; MAIL
sm lice soln kit	Tier 1	OTC; MAIL
spinosad susp 0.9%	Tier 2	ST; MAIL; Prior use of Malathion for 7 days.
stop lice kit complete	Tier 1	OTC; MAIL
stop lice liq max st	Tier 1	OTC; MAIL
stop lice ms sha 0.33-4%	Tier 1	OTC; MAIL
tgt lice kit complete	Tier 1	OTC; MAIL
Wound Care Products		
REGRANEX GEL 0.01%	Tier 3	QL (15 gm / 25 days), PA; MAIL
DIAGNOSTIC PRODUCTS		
Diagnostic Drugs		
THYROGEN INJ 1.1MG	Tier 4	QL (2 vials / 180 days), PA
Diagnostic Tests		
TRUE METRIX TES GLUCOSE	Tier 2	OTC, QL (50/30 for non-insulin, 200/30 for insulin/pregnant); MAIL
DIAGNOSTIC TESTS		
DIAGNOSTIC TESTS		
RELION KETON TES	Tier 2	OTC; MAIL
DIBENZAPINES		
THIENBENZODIAZEPINES		
ZYPREXA RELP INJ 210MG	Tier 3	
ZYPREXA RELP INJ 300MG	Tier 3	
ZYPREXA RELP INJ 405MG	Tier 3	
DIGESTIVE AIDS		
Digestive Enzymes		
CREON CAP 3000UNIT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 6000UNIT	Tier 2	QL (180 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
CREON CAP 12000UNT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 24000UNT	Tier 2	QL (180 caps / 30 days); MAIL
CREON CAP 36000UNT	Tier 2	QL (180 caps / 30 days); MAIL
pancrelipase (lip-prot-amyl) dr cap 5000-17000-27000 unit	Tier 1	QL (180 caps / 30 days); MAIL
ZENPEP CAP 3000UNIT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 5000UNIT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 10000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 15000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 20000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 25000UNT	Tier 2	QL (180 caps / 30 days); MAIL
ZENPEP CAP 40000UNT	Tier 2	QL (180 caps / 30 days); MAIL

DIURETICS

Carbonic Anhydrase Inhibitors

acetazolamide cap er 12hr 500 mg	Tier 2	QL (60 caps / 30 days); MAIL
acetazolamide tab 125 mg	Tier 1	QL (120 tabs / 30 days); MAIL
acetazolamide tab 250 mg	Tier 1	QL (120 ea / 30 days); MAIL
methazolamide tab 25 mg	Tier 2	QL (180 tabs / 30 days); MAIL
methazolamide tab 50 mg	Tier 2	QL (180 tabs / 30 days); MAIL

Diuretic Combinations

ALDACTAZIDE TAB 50/50	Tier 2	QL (60 tabs / 30 days); MAIL
amiloride & hydrochlorothiazide tab 5-50 mg	Tier 1	QL (60 tabs / 30 days); MAIL
spironolactone & hydrochlorothiazide tab 25-25 mg	Tier 1	QL (90 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
triamterene & hydrochlorothiazide cap 37.5-25 mg	Tier 1	QL (60 caps / 30 days); MAIL
triamterene & hydrochlorothiazide tab 37.5-25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
triamterene & hydrochlorothiazide tab 75-50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
Loop Diuretics		
bumetanide tab 0.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bumetanide tab 1 mg	Tier 1	QL (60 tabs / 30 days); MAIL
bumetanide tab 2 mg	Tier 1	QL (60 tabs / 30 days); MAIL
ethacrynic acid tab 25 mg	Tier 2	QL (480 tabs / 30 days); MAIL
furosemide oral soln 8 mg/ml	Tier 2	MAIL; Covered for ages 12 and over
furosemide oral soln 10 mg/ml	Tier 1	MAIL; Covered for ages 12 and over
furosemide tab 20 mg	Tier 1	QL (180 tabs / 30 days); MAIL
furosemide tab 40 mg	Tier 1	QL (180 tabs / 30 days); MAIL
furosemide tab 80 mg	Tier 1	QL (180 tabs / 30 days); MAIL
torsemide tab 5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
torsemide tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL
torsemide tab 20 mg	Tier 1	QL (120 ea / 30 days); MAIL
torsemide tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
Potassium Sparing Diuretics		
amiloride hcl tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
DYRENIUM CAP 50MG	Tier 2	QL (180 caps / 30 days); MAIL
DYRENIUM CAP 100MG	Tier 2	QL (90 caps / 30 days); MAIL
spironolactone tab 25 mg	Tier 1	QL (240 ea / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
spironolactone tab 50 mg	Tier 1	QL (120 ea / 30 days); MAIL
spironolactone tab 100 mg	Tier 1	QL (60 ea / 30 days); MAIL
Thiazides and Thiazide-Like Diuretics		
chlorothiazide tab 250 mg	Tier 1	QL (240 tabs / 30 days); MAIL
chlorothiazide tab 500 mg	Tier 1	QL (120 tabs / 30 days); MAIL
chlorthalidone tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
chlorthalidone tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
chlorthalidone tab 100 mg	Tier 1	MAIL
hydrochlorothiazide cap 12.5 mg	Tier 1	QL (60 caps / 30 days); MAIL
hydrochlorothiazide tab 12.5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
hydrochlorothiazide tab 25 mg	Tier 1	QL (240 tabs / 30 days); MAIL
hydrochlorothiazide tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
indapamide tab 1.25 mg	Tier 1	QL (60 tabs / 30 days); MAIL
indapamide tab 2.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
methyclothiazide tab 5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
metolazone tab 2.5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
metolazone tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
metolazone tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
ENDOCRINE AND METABOLIC AGENTS - MISC.		
Bone Density Regulators		
alendronate sodium tab 5 mg	Tier 1	QL (240 tabs / 30 days); MAIL
alendronate sodium tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
alendronate sodium tab 35 mg	Tier 1	QL (4.29 tabs / 30 days); MAIL
alendronate sodium tab 40 mg	Tier 1	QL (30 tabs / 30 days); MAIL
alendronate sodium tab 70 mg	Tier 1	QL (4.29 tabs / 30 days); MAIL
calcitonin (salmon) nasal soln 200 unit/act	Tier 1	QL (30 mL / 30 days); MAIL; Covered for ages 50 and over
etidronate disodium tab 200 mg	Tier 1	MAIL
etidronate disodium tab 400 mg	Tier 1	MAIL
FORTEO SOL 600/2.4	Tier 4	QL (2.58 mL / 30 days), PA
FOSAMAX + D TAB 70-2800	Tier 2	MAIL
FOSAMAX + D TAB 70-5600	Tier 2	MAIL
ibandronate sodium tab 150 mg (base equivalent)	Tier 1	QL (3.216 tabs / 30 days); MAIL
PROLIA SOL 60MG/ML	Tier 4	PA
risedronate sodium tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
risedronate sodium tab 30 mg	Tier 1	QL (30 tabs / 30 days); MAIL
risedronate sodium tab 35 mg	Tier 1	QL (Max day supply 28; Max 0.143 per day); MAIL
risedronate sodium tab 150 mg	Tier 1	MAIL
SKELID TAB 200MG	Tier 4	PA
TYMLOS INJ	Tier 4	PA
XGEVA INJ	Tier 4	PA
Fertility Regulators		
chor gonadot inj 10000unt	Tier 4	PA
Growth Hormone Receptor Antagonists		
SOMAVERT INJ 10MG	Tier 4	PA
SOMAVERT INJ 15MG	Tier 4	PA
SOMAVERT INJ 20MG	Tier 4	PA
Growth Hormones		
OMNITROPE INJ PEN 5/1.5ML	Tier 4	PA
OMNITROPE INJ PEN 10/1.5ML	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
Hormone Receptor Modulators		
raloxifene hcl tab 60 mg	Tier 2	QL (30 tabs / 30 days); $0 Copay for Breast Cancer Prevention for Women age 35+; MAIL
Insulin-Like Growth Factors (Somatomedins)		
INCRELEX INJ 40MG/4ML	Tier 4	PA
LHRH/GnRH Agonist Analog Pituitary Suppressants		
LUPANETA KIT 3.75-5	Tier 4	PA
LUPANETA KIT 11.25-5	Tier 4	PA
LUPR DEP-PED INJ 3M 30MG	Tier 4	QL (1 kit / 100 days), PA
LUPR DEP-PED INJ 7.5MG	Tier 4	QL (1 kit / 25 days), PA
LUPR DEP-PED INJ 11.25MG	Tier 4	QL (1 kit / 25 days), PA
LUPR DEP-PED INJ 11.25MG	Tier 4	QL (1 kit / 75 days), PA
LUPR DEP-PED INJ 15MG	Tier 4	QL (1 kit / 25 days), PA
SYNAREL SOL 2MG/ML	Tier 4	QL (32 mL / 28 days), PA
Metabolic Modifiers		
calcitriol cap 0.5 mcg	Tier 1	QL (120 caps / 30 days); MAIL
calcitriol cap 0.25 mcg	Tier 1	QL (120 caps / 30 days); MAIL
CYSTADANE POW	Tier 3	PA; MAIL
doxercalciferol cap 0.5 mcg	Tier 2	MAIL
doxercalciferol cap 1 mcg	Tier 2	MAIL
doxercalciferol cap 2.5 mcg	Tier 2	MAIL
doxercalciferol inj 4 mcg/2ml (2 mcg/ml)	Tier 2	MAIL
ELAPRASE INJ 6MG/3ML	Tier 4	PA
FABRAZYME INJ 5MG	Tier 4	PA
KUVAN TAB 100MG	Tier 4	PA
levocarnitine oral soln 1 gm/10ml (10%)	Tier 2	QL (1800 mL / 30 days); MAIL
levocarnitine tab 330 mg	Tier 1	QL (540 tabs / 30 days); MAIL
MYALEPT INJ 11.3MG	Tier 4	PA
ORFADIN CAP 2MG	Tier 4	PA
ORFADIN CAP 5MG	Tier 4	PA
ORFADIN CAP 10MG	Tier 4	PA
paricalcitol cap 1 mcg	Tier 2	PA; MAIL

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Drug Name	Drug Tier	Requirements/Limits
paricalcitol cap 2 mcg	Tier 2	PA; MAIL
paricalcitol cap 4 mcg	Tier 2	PA; MAIL
paricalcitol iv soln 2 mcg/ml	Tier 2	PA; MAIL
paricalcitol iv soln 5 mcg/ml	Tier 2	PA; MAIL
SENSIPAR TAB 30MG	Tier 4	PA
SENSIPAR TAB 60MG	Tier 4	PA
SENSIPAR TAB 90MG	Tier 4	PA
sodium phenylbutyrate oral powder 3 gm/teaspoonful	Tier 4	PA
sodium phenylbutyrate tab 500 mg	Tier 4	PA
Posterior Pituitary Hormones		
desmopressin acetate nasal spray soln 0.01% (refrigerated)	Tier 2	PA; MAIL
desmopressin acetate tab 0.1 mg	Tier 1	QL (120 tabs / 30 days); MAIL
desmopressin acetate tab 0.2 mg	Tier 1	QL (150 tabs / 30 days); MAIL
STIMATE SOL 1.5MG/ML	Tier 4	PA
Prolactin Inhibitors		
cabergoline tab 0.5 mg	Tier 1	MAIL
Somatostatic Agents		
octreotide acetate inj 50 mcg/ml (0.05 mg/ml)	Tier 4	PA
octreotide acetate inj 100 mcg/ml (0.1 mg/ml)	Tier 4	PA
octreotide acetate inj 200 mcg/ml (0.2 mg/ml)	Tier 4	PA
octreotide acetate inj 500 mcg/ml (0.5 mg/ml)	Tier 4	PA
octreotide acetate inj 1000 mcg/ml (1 mg/ml)	Tier 4	PA
SANDOSTATIN KIT LAR 10MG	Tier 4	PA
SANDOSTATIN KIT LAR 20MG	Tier 4	QL (1 kit / 24 days), PA
SANDOSTATIN KIT LAR 30MG	Tier 4	QL (1 kit / 24 days), PA
Vasopressin Receptor Antagonists		
SAMSCA TAB 15MG	Tier 4	PA
SAMSCA TAB 30MG	Tier 4	PA

Drug Name	Drug Tier	Requirements/Limits
ESTROGENS		
Estrogen Combinations		
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg	Tier 1	QL (30 tabs / 30 days); MAIL
PREMPHASE TAB	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB 0.3-1.5	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB 0.45-1.5	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB 0.625-5	Tier 2	QL (30 tabs / 30 days); MAIL
PREMPRO TAB .625-2.5	Tier 2	QL (30 tabs / 30 days); MAIL
Estrogens		
CENESTIN TAB 0.3MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
CENESTIN TAB 0.9MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
CENESTIN TAB 0.45MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
CENESTIN TAB 0.625MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
CENESTIN TAB 1.25MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
ENJUVIA TAB 0.3MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
ENJUVIA TAB 0.9MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
ENJUVIA TAB 0.45MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
ENJUVIA TAB 0.625MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
ENJUVIA TAB 1.25MG	Tier 2	AGE; MAIL; Covered for ages 64 and over
estradiol tab 0.5 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
estradiol tab 1 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
estradiol tab 2 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
estropipate tab 0.75 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
estropipate tab 1.5 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
estropipate tab 3 mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
MENEST TAB 0.3MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
MENEST TAB 0.625MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
MENEST TAB 1.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
MENEST TAB 2.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
PREMARIN TAB 0.3MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
PREMARIN TAB 0.9MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
PREMARIN TAB 0.45MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
PREMARIN TAB 0.625MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
PREMARIN TAB 1.25MG	Tier 2	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

FLUOROQUINOLONES

Fluoroquinolones

ciprofloxacin hcl tab 250 mg (base equiv)	Tier 1	QL (Max 2 per day)

Drug Name	Drug Tier	Requirements/Limits
ciprofloxacin hcl tab 500 mg (base equiv)	Tier 1	QL (Max 2 per day)
ciprofloxacin hcl tab 750 mg (base equiv)	Tier 1	QL (Max 2 per day)
FACTIVE TAB 320MG	Tier 3	QL (30 tabs / 30 days), PA
levofloxacin oral soln 25 mg/ml	Tier 1	QL (Max day supply 20; Max 30 per day), PA
levofloxacin tab 250 mg	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
levofloxacin tab 500 mg	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
levofloxacin tab 750 mg	Tier 1	QL (Max 10 per 10 day; Max 1 fill per 45 days)
NOROXIN TAB 400MG	Tier 3	QL (60 tabs / 30 days)

GASTROINTESTINAL AGENTS - MISC.

Antiflatulents

anti-gas cap 180mg	Tier 1	OTC; MAIL
cvs gas relf chw 80mg	Tier 1	OTC; MAIL
cvs gas relf chw 125mg	Tier 1	OTC; MAIL
cvs gas relf dro ex st	Tier 1	OTC; MAIL
eql gas gone chw 125mg	Tier 1	OTC; MAIL
gas relief cap 125mg	Tier 1	OTC; MAIL
gas relief cap 180mg	Tier 1	OTC; MAIL
gas relief chw 80mg	Tier 1	OTC; MAIL
gas relief chw 125mg	Tier 1	OTC; MAIL
gas relief dro 20/0.3ml	Tier 1	OTC; MAIL
gas relief dro infants	Tier 1	OTC; MAIL
gas-x cap 125mg	Tier 1	OTC; MAIL
gas-x cap 180mg	Tier 1	OTC; MAIL
gas-x infant dro	Tier 1	OTC; MAIL
gnp gas relf chw 80mg	Tier 1	OTC; MAIL
gnp gas relf chw 125mg	Tier 1	OTC; MAIL
hm gas relf chw 80mg	Tier 1	OTC; MAIL
hm gas relf chw 125mg	Tier 1	OTC; MAIL
little remed sus 20/.03ml	Tier 1	OTC; MAIL
LITTLE TUMMY DRO 20/0.3ML	Tier 1	OTC; MAIL
mi-acid gas chw 80mg	Tier 1	OTC; MAIL
mytab gas chw 80mg	Tier 1	OTC; MAIL
mytab gas chw 125mg	Tier 1	OTC; MAIL
phazyme chw 125mg	Tier 1	OTC; MAIL
qc gas relf chw 80mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
qc gas relf chw 125mg	Tier 1	OTC; MAIL
ra gas relf chw 80mg	Tier 1	OTC; MAIL
ra gas relf chw 125mg	Tier 1	OTC; MAIL
sb gas relf chw 125mg	Tier 1	OTC; MAIL
simeped dro 40/0.6ml	Tier 1	OTC; MAIL
simethicone cap 180 mg	Tier 1	OTC; MAIL
simethicone chew tab 80 mg	Tier 1	OTC; MAIL
simethicone chew tab 125 mg	Tier 1	OTC; MAIL
simethicone dro 20/0.3ml	Tier 1	OTC; MAIL
simethicone susp 40 mg/0.6ml	Tier 1	OTC; MAIL
sm gas rel chw 125mg	Tier 1	OTC; MAIL
sm gas relie chw 80mg	Tier 1	OTC; MAIL
Gallstone Solubilizing Agents		
ursodiol cap 300 mg	Tier 2	QL (60 caps / 30 days); MAIL
ursodiol tab 250 mg	Tier 2	QL (120 tabs / 30 days); MAIL
ursodiol tab 500 mg	Tier 2	QL (60 per 30 days); MAIL
Gastrointestinal Chloride Channel Activators		
AMITIZA CAP 8MCG	Tier 3	PA; MAIL
AMITIZA CAP 24MCG	Tier 3	PA; MAIL
Gastrointestinal Stimulants		
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	Tier 1	QL (480 mL / 30 days); MAIL; Covered for ages 11 and over
metoclopramide hcl tab 5 mg (base equivalent)	Tier 1	QL (180 tabs / 30 days); MAIL
metoclopramide hcl tab 10 mg (base equivalent)	Tier 1	QL (180 tabs / 30 days); MAIL
Inflammatory Bowel Agents		
APRISO CAP 0.375GM	Tier 2	QL (120 caps / 30 days); MAIL
balsalazide disodium cap 750 mg	Tier 2	QL (270 caps / 30 days); MAIL
CIMZIA KIT	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands

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Drug Name	Drug Tier	Requirements/Limits
CIMZIA KIT STARTER	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
CIMZIA PREFL KIT 200MG/ML	Tier 4	PA; Medical Necessity PA; Prior use of appropriate Preferred Brands
DIPENTUM CAP 250MG	Tier 3	QL (120 caps / 30 days); MAIL
mesalamine tab delayed release 800 mg	Tier 2	MAIL
STELARA INJ 5MG/ML	Tier 4	PA; Preferred Brand
sulfasalazine tab 500 mg	Tier 1	QL (300 tabs / 30 days); MAIL
sulfasalazine tab delayed release 500 mg	Tier 1	QL (240 tabs / 30 days); MAIL
Intestinal Acidifiers		
enulose sol 10gm/15	Tier 1	QL (5400 mL / 30 days); MAIL
generlac sol 10gm/15	Tier 1	QL (5400 mL / 30 days); MAIL
lactulose (encephalopathy) solution 10 gm/15ml	Tier 1	QL (5400 mL / 30 days); MAIL
Irritable Bowel Syndrome (IBS) Agents		
alosetron hcl tab 0.5 mg (base equiv)	Tier 2	PA; MAIL
alosetron hcl tab 1 mg (base equiv)	Tier 2	PA; MAIL
LINZESS CAP 145MCG	Tier 3	PA; MAIL
LINZESS CAP 290MCG	Tier 3	PA; MAIL
Peripheral Opioid Receptor Antagonists		
RELISTOR KIT 12/0.6ML	Tier 4	QL (0.143 kits / 25 days), PA
Phosphate Binder Agents		
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	Tier 1	QL (360 ea / 30 days); MAIL
lanthanum carbonate chew tab 500 mg (elemental)	Tier 2	QL (270 tabs / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
lanthanum carbonate chew tab 750 mg (elemental)	Tier 2	QL (180 tabs / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE

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Drug Name	Drug Tier	Requirements/Limits
lanthanum carbonate chew tab 1000 mg (elemental)	Tier 2	QL (135 tabs / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
sevelamer carbonate packet 0.8 gm	Tier 2	QL (525 packets / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
sevelamer carbonate packet 2.4 gm	Tier 2	QL (175.2 packets / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
sevelamer carbonate tab 800 mg	Tier 2	QL (525 tabs / 30 days), ST; MAIL; PRIOR USE CALCIUM ACETATE
GENITOURINARY		
Miscellaneous		
bethanechol chloride tab 5 mg	Tier 1	QL (120 tabs / 30 days); MAIL
bethanechol chloride tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL
bethanechol chloride tab 25 mg	Tier 1	QL (120 tabs / 30 days); MAIL
bethanechol chloride tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
Urinary Antispasmodics		
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv)	Tier 2	QL (60 tabs / 30 days), ST; MAIL; PRIOR USE TOLERODINE AND TROSPIUM IR FOR 30 DAYS; Covered for ages 18 and over
darifenacin hydrobromide tab er 24hr 15 mg (base equiv)	Tier 2	ST; MAIL; PRIOR USE TOLERODINE AND TROSPIUM IR FOR 30 DAYS
oxybutynin chloride syrup 5 mg/5ml	Tier 1	QL (600 mL / 30 days); MAIL
oxybutynin chloride tab 5 mg	Tier 1	QL (90 ea / 30 days); MAIL
oxybutynin chloride tab er 24hr 5 mg	Tier 1	QL (30 ea / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR

Drug Name	Drug Tier	Requirements/Limits
oxybutynin chloride tab er 24hr 10 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR
oxybutynin chloride tab er 24hr 15 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE OXYBUTYNIN IR
tolterodine tartrate tab 1 mg	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
tolterodine tartrate tab 2 mg	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
TOVIAZ TAB 4MG	Tier 3	ST; Prior use of Tolterodine AND Trospium then Darifenacin Hydrobromide ER AND Trospium SR for 30 days each.
TOVIAZ TAB 8MG	Tier 3	ST; Prior use of Tolterodine AND Trospium then Darifenacin Hydrobromide ER AND Trospium SR for 30 days each.
trospium chloride cap er 24hr 60 mg	Tier 2	ST; MAIL; PRIOR USE TOLERODINE AND TROSPIUM IR FOR 30 DAYS
trospium chloride tab 20 mg	Tier 2	ST; MAIL; PRIOR USE OXYBUTYNIN IR
VESICARE TAB 5MG	Tier 3	QL (60 tabs / 30 days), ST; MAIL; Prior use of Tolterodine AND Trospium then Darifenacin Hydrobromide ER AND Trospium SR then Toviaz for 30 days each.; Covered for ages 18 and over

Drug Name	Drug Tier	Requirements/Limits
VESICARE TAB 10MG	Tier 3	ST; MAIL; Prior use of Tolterodine AND Trospium then Darifenacin Hydrobromide ER AND Trospium SR then Toviaz for 30 days each.
GENITOURINARY AGENTS - MISCELLANEOUS		
Alkalinizers		
cytra-2 sol	Tier 1	OTC; MAIL
cytra-k sol	Tier 1	OTC; MAIL
potassium citrate & citric acid soln 1100-334 mg/5ml	Tier 1	MAIL
potassium citrate tab er 5 meq (540 mg)	Tier 1	QL (90 tabs / 30 days); MAIL
potassium citrate tab er 10 meq (1080 mg)	Tier 1	QL (90 tabs / 30 days); MAIL
sodium citrate & citric acid soln 500-334 mg/5ml	Tier 1	MAIL
Cystinosis Agents		
CYSTAGON CAP 50MG	Tier 4	PA
CYSTAGON CAP 150MG	Tier 4	PA
Genitourinary Irrigants		
acetic acid irrigation soln 0.25%	Tier 1	MAIL
argyl saline sol 0.9%	Tier 1	QL (100000 mL / 25 days); MAIL
curity salin sol 0.9% irr	Tier 1	QL (100000 mL / 25 days); MAIL
sodium chloride irrigation soln 0.9%	Tier 1	QL (100000 mL / 25 days); MAIL
Interstitial Cystitis Agents		
ELMIRON CAP 100MG	Tier 3	MAIL
Prostatic Hypertrophy Agents		
alfuzosin hcl tab er 24hr 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
CIALIS TAB 5MG	Tier 3	PA; MAIL
dutasteride cap 0.5 mg	Tier 1	MAIL
finasteride tab 5 mg	Tier 1	QL (30 ea / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
RAPAFLO CAP 4MG	Tier 3	QL (60 caps / 30 days), PA; MAIL
RAPAFLO CAP 8MG	Tier 3	QL (30 caps / 30 days), PA; MAIL
silodosin cap 4 mg	Tier 1	QL (60 caps / 30 days), PA; MAIL
silodosin cap 8 mg	Tier 1	QL (30 caps / 30 days), PA; MAIL
tadalafil tab 5 mg	Tier 1	PA
tamsulosin hcl cap 0.4 mg	Tier 1	QL (60 caps / 30 days); MAIL
Urinary Analgesics		
phenazo tab 200mg	Tier 1	QL (90 tabs / 30 days); MAIL
phenazopyridine hcl tab 100 mg	Tier 1	QL (90 tabs / 30 days); MAIL
phenazopyridine hcl tab 200 mg	Tier 1	QL (90 tabs / 30 days); MAIL
GNRH/LHRH ANTAGONISTS		
GNRH/LHRH ANTAGONISTS		
CETROTIDE KIT 0.25MG	Tier 4	PA
GANIRELIX AC INJ 250/0.5	Tier 4	PA
GOUT AGENTS		
Gout Agent Combinations		
colchicine w/ probenecid tab 0.5-500 mg	Tier 1	QL (90 tabs / 30 days); MAIL
Gout Agents		
allopurinol tab 100 mg	Tier 1	QL (180 tabs / 30 days); MAIL
allopurinol tab 300 mg	Tier 1	QL (120 tabs / 30 days); MAIL
colchicine tab 0.6 mg	Tier 1	QL (30 tabs / 90 days; Max 1 fill per 90 days); MAIL
ULORIC TAB 40MG	Tier 3	QL (30 tabs / 30 days), PA; MAIL
ULORIC TAB 80MG	Tier 3	QL (30 tabs / 30 days), PA; MAIL

Drug Name	Drug Tier	Requirements/Limits
Uricosurics		
probenecid tab 500 mg	Tier 1	QL (90 tabs / 30 days); MAIL
HEMATOLOGICAL AGENTS - MISC.		
Antihemophilic Products		
ADVATE INJ 250UNIT	Tier 4	PA
ADVATE INJ 500UNIT	Tier 4	PA
ADVATE INJ 1000UNIT	Tier 4	PA
ADVATE INJ 1500UNIT	Tier 4	PA
ADVATE INJ 2000UNIT	Tier 4	PA
ADVATE INJ 3000UNIT	Tier 4	PA
ADVATE INJ 4000UNIT	Tier 4	PA
ALPHANINE SD INJ 500UNIT	Tier 4	PA
ALPHANINE SD INJ 1500UNIT	Tier 4	PA
ALPROLIX INJ 250UNIT	Tier 4	PA
ALPROLIX INJ 500UNIT	Tier 4	PA
ALPROLIX INJ 1000UNIT	Tier 4	PA
ALPROLIX INJ 2000UNIT	Tier 4	PA
ALPROLIX INJ 3000UNIT	Tier 4	PA
ALPROLIX INJ 4000UNIT	Tier 4	PA
BENEFIX INJ 250UNIT	Tier 4	PA
BENEFIX INJ 500UNIT	Tier 4	PA
BENEFIX INJ 1000UNIT	Tier 4	PA
BENEFIX INJ 2000UNIT	Tier 4	PA
BENEFIX INJ 3000UNIT	Tier 4	PA
FEIBA INJ	Tier 4	PA
HELIXATE FS INJ 250UNIT	Tier 4	PA
HELIXATE FS INJ 500UNIT	Tier 4	PA
HELIXATE FS INJ 1000UNIT	Tier 4	PA
HEMLIBRA INJ 30MG/ML	Tier 4	PA
HEMLIBRA INJ 60/0.4	Tier 4	PA
HEMLIBRA INJ 105/0.7	Tier 4	PA
HEMLIBRA INJ 150/ML	Tier 4	PA
HEMOFIL M INJ 250UNIT	Tier 4	PA
HEMOFIL M INJ 500UNIT	Tier 4	PA
HEMOFIL M INJ 1000UNIT	Tier 4	PA
HEMOFIL M INJ 1700UNIT	Tier 4	PA
HUMATE-P SOL 500-1200	Tier 4	PA
HUMATE-P SOL 2400UNIT	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
KOATE INJ 250UNIT	Tier 4	PA
KOATE INJ 500 UNIT	Tier 4	PA
KOATE INJ 1000UNIT	Tier 4	PA
KOATE-DVI INJ 250UNIT	Tier 4	PA
KOATE-DVI INJ 500UNIT	Tier 4	PA
KOATE-DVI INJ 1000UNIT	Tier 4	PA
KOGENATE FS INJ 250UNIT	Tier 4	PA
KOGENATE FS INJ 500UNIT	Tier 4	PA
KOGENATE FS INJ 1000UNIT	Tier 4	PA
KOVALTRY INJ 250UNIT	Tier 4	PA
KOVALTRY INJ 500UNIT	Tier 4	PA
KOVALTRY INJ 1000UNIT	Tier 4	PA
KOVALTRY INJ 2000UNIT	Tier 4	PA
KOVALTRY INJ 3000UNIT	Tier 4	PA
MONOCLATE-P INJ 1000UNIT	Tier 4	PA
MONOCLATE-P INJ 1500UNIT	Tier 4	PA
NOVOEIGHT INJ 1500UNIT	Tier 4	PA
NOVOSEVEN RT INJ 2MG	Tier 4	PA
NOVOSEVEN RT INJ 5MG	Tier 4	PA
NOVOSEVEN RT INJ 8MG	Tier 4	PA
NUWIQ INJ 250UNIT	Tier 4	PA
NUWIQ INJ 500UNIT	Tier 4	PA
NUWIQ INJ 1000UNIT	Tier 4	PA
NUWIQ INJ 2000UNIT	Tier 4	PA
NUWIQ INJ 2500UNIT	Tier 4	PA
NUWIQ INJ 3000UNIT	Tier 4	PA
NUWIQ INJ 4000UNIT	Tier 4	PA
NUWIQ KIT 250UNIT	Tier 4	PA
NUWIQ KIT 500UNIT	Tier 4	PA
NUWIQ KIT 1000UNIT	Tier 4	PA
NUWIQ KIT 2000UNIT	Tier 4	PA
NUWIQ KIT 2500UNIT	Tier 4	PA
NUWIQ KIT 3000UNIT	Tier 4	PA
NUWIQ KIT 4000UNIT	Tier 4	PA
PROFILNINE INJ 1500UNIT	Tier 4	PA
RECOMBINATE INJ	Tier 4	PA
RECOMBINATE INJ 220-400	Tier 4	PA
RECOMBINATE INJ 401-800	Tier 4	PA
RECOMBINATE INJ 801-1240	Tier 4	PA
RIXUBIS INJ 250 UNIT	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
RIXUBIS INJ 500UNIT	Tier 4	PA
RIXUBIS INJ 1000UNIT	Tier 4	PA
RIXUBIS INJ 2000UNIT	Tier 4	PA
RIXUBIS INJ 3000UNIT	Tier 4	PA
XYNTHA INJ 250UNIT	Tier 4	PA
XYNTHA INJ 500UNIT	Tier 4	PA
XYNTHA INJ 1000UNIT	Tier 4	PA
XYNTHA INJ 2000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 500UNIT	Tier 4	PA
XYNTHA SOLOF INJ 1000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 2000UNIT	Tier 4	PA
XYNTHA SOLOF INJ 3000UNIT	Tier 4	PA
XYNTHA SOLOF KIT 250UNIT	Tier 4	PA
Bradykinin B2 Receptor Antagonists		
FIRAZYR INJ 30MG/3ML	Tier 4	PA
Hematorheologic Agents		
pentoxifylline tab er 400 mg	Tier 1	QL (120 ea / 30 days); MAIL
Platelet Aggregation Inhibitors		
anagrelide hcl cap 0.5 mg	Tier 2	MAIL
anagrelide hcl cap 1 mg	Tier 2	MAIL
aspirin-dipyridamole cap er 12hr 25-200 mg	Tier 2	PA; MAIL
BRILINTA TAB 90MG	Tier 3	QL (60 tabs / 30 days), PA; MAIL
cilostazol tab 50 mg	Tier 1	QL (120 tabs / 30 days); MAIL
cilostazol tab 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
clopidogrel bisulfate tab 75 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
dipyridamole tab 25 mg	Tier 1	QL (300 tabs / 30 days); MAIL
dipyridamole tab 50 mg	Tier 1	QL (240 tabs / 30 days); MAIL
dipyridamole tab 75 mg	Tier 1	QL (120 tabs / 30 days); MAIL
prasugrel hcl tab 5 mg (base equiv)	Tier 2	QL (60 tabs / 30 days), PA; MAIL

Drug Name	Drug Tier	Requirements/Limits
prasugrel hcl tab 10 mg (base equiv)	Tier 2	QL (30 tabs / 30 days), PA; MAIL
ticlopidine hcl tab 250 mg	Tier 1	QL (60 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

HEMATOPOIETIC AGENTS

Agents for Gaucher Disease

CERDELGA CAP 84MG	Tier 4	PA
miglustat cap 100 mg	Tier 4	PA
ZAVESCA CAP 100MG	Tier 4	PA

Cobalamins

b-12 micrloz sub 500mcg	Tier 1	OTC; MAIL
b-12 tr tab 1000 mcg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
b-12-sl sub 1000mcg	Tier 1	OTC; MAIL
cvs b-12 sub 500mcg	Tier 1	OTC; MAIL
cvs vit b-12 tab 1000 tr	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
cyanocobalamin sl tab 500 mcg	Tier 1	OTC; MAIL
cyanocobalamin sl tab 1000 mcg	Tier 1	OTC; MAIL
cyanocobalamin sl tab 2500 mcg	Tier 1	OTC; MAIL
cyanocobalamin tab 100 mcg	Tier 1	OTC; MAIL
cyanocobalamin tab 250 mcg	Tier 1	OTC; MAIL
cyanocobalamin tab 500 mcg	Tier 1	OTC; MAIL
cyanocobalamin tab 1000 mcg	Tier 1	OTC; MAIL
cyanocobalamin tab er 1000 mcg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
gnp vit b-12 tab 500mcg	Tier 1	OTC; MAIL
gnp vit b-12 tab 1000 cr	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
gnp vit b-12 tab 1000 pr	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
hm vit b12 tab 500mcg	Tier 1	OTC; MAIL
ra vit b-12 tab 100mcg	Tier 1	OTC; MAIL
ra vit b-12 tab 1000 tr	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sm vit b12 tab 500mcg	Tier 1	OTC; MAIL
sm vit b12 tab 1000mcg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sm vit b-12 tab 100mcg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
sm vit b-12 tab 500mcg	Tier 1	OTC; MAIL
vitamin b12 tab 1000mcg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
Folic Acid/Folates		
fa-8 tab 0.8mg	PREV	OTC, QL (150 tabs / 30 days); MAIL
folic acid tab 1 mg	Tier 1	QL (150 tabs / 30 days); MAIL
folic acid tab 1 mg	Tier 1	OTC, QL (150 tabs / 30 days); MAIL
folic acid tab 400mcg	PREV	OTC, QL (150 tabs / 30 days); MAIL
folic acid tab 800 mcg	PREV	OTC, QL (150 tabs / 30 days); MAIL
sm folic acd tab 400mcg	PREV	OTC, QL (150 tabs / 30 days); MAIL
yl folic aci tab 400mcg	PREV	OTC, QL (150 tabs / 30 days); MAIL
Hematopoietic Growth Factors		
ARANESP INJ 25MCG	Tier 4	PA
ARANESP INJ 40MCG	Tier 4	PA
ARANESP INJ 60MCG	Tier 4	PA
ARANESP INJ 100MCG	Tier 4	PA
ARANESP INJ 150MCG	Tier 4	PA
ARANESP INJ 200MCG	Tier 4	PA
ARANESP INJ 300MCG	Tier 4	PA
ARANESP INJ 500MCG	Tier 4	PA
EPOGEN INJ 2000/ML	Tier 4	PA
EPOGEN INJ 4000/ML	Tier 4	PA
EPOGEN INJ 10000/ML	Tier 4	PA
EPOGEN INJ 20000/ML	Tier 4	PA
FULPHILA INJ 6/0.6ML	Tier 4	PA
LEUKINE INJ 250MCG	Tier 4	PA
MIRCERA INJ 50MCG	Tier 4	PA
MIRCERA INJ 75MCG	Tier 4	PA
MIRCERA INJ 100MCG	Tier 4	PA
MIRCERA INJ 200MCG	Tier 4	PA
NEULASTA INJ 6MG/0.6M	Tier 4	PA
NEUPOGEN INJ 300/0.5	Tier 4	PA
NEUPOGEN INJ 300MCG	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
NEUPOGEN INJ 480/0.8	Tier 4	PA
NEUPOGEN INJ 480MCG	Tier 4	PA
NIVESTYM INJ 300/0.5	Tier 4	PA
NIVESTYM INJ 480/0.8	Tier 4	PA
PROCRIT INJ 2000/ML	Tier 4	PA
PROCRIT INJ 4000/ML	Tier 4	PA
PROCRIT INJ 10000/ML	Tier 4	PA
PROCRIT INJ 20000/ML	Tier 4	PA
PROCRIT INJ 40000/ML	Tier 4	PA
PROMACTA TAB 12.5MG	Tier 4	PA
PROMACTA TAB 25MG	Tier 4	PA
PROMACTA TAB 50MG	Tier 4	PA
PROMACTA TAB 75MG	Tier 4	PA
UDENYCA INJ 6MG/.6ML	Tier 4	PA
ZARXIO INJ 300/0.5	Tier 4	PA
ZARXIO INJ 480/0.8	Tier 4	PA
Hematopoietic Mixtures		
ferocon cap	Tier 1	QL (60 caps / 30 days); MAIL
ferotrinsic cap	Tier 1	QL (60 caps / 30 days); MAIL
foltrin cap	Tier 1	QL (60 caps / 30 days); MAIL
hematogen cap	Tier 1	QL (60 caps / 30 days); MAIL
iferex 150 cap forte	Tier 1	QL (60 caps / 30 days); MAIL
iron complex cap	Tier 1	OTC, QL (60 caps / 30 days); MAIL
myferon 150 cap forte	Tier 1	QL (60 caps / 30 days); MAIL
poly-iron cap 150 fort	Tier 1	QL (60 caps / 30 days); MAIL
polysacchari cap iron	Tier 1	QL (60 caps / 30 days); MAIL
tl icon cap	Tier 1	QL (60 caps / 30 days); MAIL
tricon cap	Tier 1	QL (60 caps / 30 days); MAIL
Iron		
cvs iron tab 27mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
cvs iron tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
fe tabs tab 325mg ec	Tier 1	OTC; MAIL
fer-iron dro 15mg/ml	PREV	OTC, QL (150 mL / 30 days); MAIL
ferosul elx 220/5ml	PREV	OTC, QL (1050 mL / 30 days); MAIL
ferretts tab 325mg	Tier 1	OTC; MAIL
ferric x-150 cap 150mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
ferro-bob tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ferrous fumarate tab 324 mg (106 mg elemental fe)	Tier 1	OTC; MAIL
FERROUS GLUC TAB 324MG	Tier 1	OTC; MAIL
ferrous gluconate tab 239 mg (27 mg fe equivalent)	Tier 1	OTC; MAIL
ferrous gluconate tab 240 mg (27 mg elemental fe)	Tier 1	OTC; MAIL
ferrous gluconate tab 324 mg (37.5 mg elemental iron)	Tier 1	OTC; MAIL
FERROUS SUL LIQ 220/5ML	Tier 1	OTC; MAIL
FERROUS SULF TAB 324MG EC	Tier 1	OTC; MAIL
ferrous sulf tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)	PREV	OTC, QL (1050 mL / 30 days); MAIL
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	PREV	OTC, QL (150 mL / 30 days); MAIL
ferrous sulfate tab 325 mg (65 mg elemental fe)	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ferrous sulfate tab ec 325 mg (65 mg fe equivalent)	Tier 1	OTC; MAIL
ferrousul tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
gnp iron tab 45mg	Tier 1	OTC; MAIL
gnp iron tab 65mg	Tier 1	OTC; MAIL
hm iron tab 45mg	Tier 1	OTC; MAIL
hm iron tab 65mg	Tier 1	OTC; MAIL
iferex 150 cap	Tier 1	OTC, QL (60 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
iron chw pediatri	Tier 1	OTC; MAIL
iron slow tab 45mg	Tier 1	OTC; MAIL
iron supplem tab therapy	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
iron supplmt dro 15mg/ml	PREV	OTC, QL (150 mL / 30 days); MAIL
myferon 150 cap 150mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
nu-iron 150 cap 150mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
pedia iron dro 15mg/ml	PREV	OTC, QL (150 mL / 30 days); MAIL
poly-iron cap 150mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
px iron tab 200mg	Tier 1	OTC; MAIL
ra iron tab 65mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ra iron tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
slow iron tab 50mg	Tier 1	OTC; MAIL
slow iron tab 160mg cr	Tier 1	OTC; MAIL
slow release tab 45mg	Tier 1	OTC; MAIL
slow release tab 47.5mg	Tier 1	OTC; MAIL
slow-release tab fe 45mg	Tier 1	OTC; MAIL
sm iron slow tab 160mg cr	Tier 1	OTC; MAIL
sm iron tab 45mg	Tier 1	OTC; MAIL
sm iron tab 325mg	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
wee care sus 15/1.25	PREV	OTC, QL (118.2 mL / 30 days); MAIL

HEMOSTATICS

Hemostatics - Systemic

tranexamic acid iv soln 1000 mg/10ml (100 mg/ml)	Tier 1	PA; MAIL
tranexamic acid tab 650 mg	Tier 1	MAIL

HYPNOTICS

Antihistamine Hypnotics

compoz tab 50mg	Tier 1	OTC; MAIL
diphenhydramine hcl (sleep) tab 50 mg	Tier 1	OTC; MAIL
hm nighttime tab 25mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
night time tab 25mg	Tier 1	OTC; MAIL
nighttime sl tab 25mg	Tier 1	OTC; MAIL
nighttime tab 25mg	Tier 1	OTC; MAIL
nytol tab 25mg	Tier 1	OTC; MAIL
ra nighttime tab 25mg	Tier 1	OTC; MAIL
ra sleep aid tab 25mg	Tier 1	OTC; MAIL
restfully sl tab 25mg	Tier 1	OTC; MAIL
sb sleep tab 25mg	Tier 1	OTC; MAIL
simply sleep tab 25mg	Tier 1	OTC; MAIL
sleep aid tab 25mg	Tier 1	OTC; MAIL
sleep aid tab 25mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sleep aid tab 50mg	Tier 1	OTC; MAIL
sleep ii tab 25mg	Tier 1	OTC; MAIL
sleep tab 25mg	Tier 1	OTC; MAIL
sleep-aid tab 25mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sleep-tabs tab 25mg	Tier 1	OTC; MAIL
sm sleep aid tab 25mg	Tier 1	OTC; MAIL
sominex tab 25mg	Tier 1	OTC; MAIL
ultra sleep tab 25mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
wal-som tab 25mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
Barbiturate Hypnotics		
phenobarbital elixir 20 mg/5ml	Tier 1	QL (1500 mL / 30 days); Covered for ages 12 and over
phenobarbital tab 15 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 16.2 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 30 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 32.4 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 60 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 64.8 mg	Tier 1	QL (90 tabs / 30 days)
phenobarbital tab 97.2 mg	Tier 1	QL (60 tabs / 30 days)
phenobarbital tab 100 mg	Tier 1	QL (60 tabs / 30 days)
Non-Barbiturate Hypnotics		
chloral hydrate syrup 500 mg/5ml	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
estazolam tab 1 mg	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
estazolam tab 2 mg	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
eszopiclone tab 1 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
eszopiclone tab 2 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
eszopiclone tab 3 mg	Tier 1	QL (90 tabs / 30 days); Covered for ages 18 and over
flurazepam hcl cap 15 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 15-64
flurazepam hcl cap 30 mg	Tier 1	QL (30 caps / 30 days); AGE; Covered for ages 15-64
temazepam cap 15 mg	Tier 1	QL (30 caps / 30 days); Covered for ages 18 and over
temazepam cap 30 mg	Tier 1	QL (60 caps / 30 days); Covered for ages 18 and over
triazolam tab 0.25 mg	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
triazolam tab 0.125 mg	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
zaleplon cap 5 mg	Tier 1	QL (30 / 30 days); Covered for ages 18 and over
zaleplon cap 10 mg	Tier 1	QL (30 / 30 days); Covered for ages 18 and over
zolpidem tartrate tab 5 mg	Tier 1	QL (60 tabs / 30 days); Covered for ages 18 and over

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Drug Name	Drug Tier	Requirements/Limits
zolpidem tartrate tab 10 mg	Tier 1	QL (30 tabs / 30 days); Covered for ages 18 and over
Selective Melatonin Receptor Agonists		
ROZEREM TAB 8MG	Tier 3	QL (90 tabs / 30 days), PA; MAIL; Covered for ages 18 and over
LAXATIVES		
Bulk Laxatives		
best fiber pow	Tier 1	OTC; MAIL
clr soluble pow fiber	Tier 1	OTC; MAIL
corn dextrin oral powder	Tier 1	OTC; MAIL
cvs fiber cap 0.52gm	Tier 1	OTC; MAIL
cvs fiber la tab 625mg	Tier 1	OTC; MAIL
easy fiber pow	Tier 1	OTC; MAIL
eq daily cap fiber	Tier 1	OTC; MAIL
eq fiber pow	Tier 1	OTC; MAIL
eql fiber la tab 625mg	Tier 1	OTC; MAIL
eql fiber pow supplemn	Tier 1	OTC; MAIL
fiber laxatv tab 625mg	Tier 1	OTC; MAIL
fiber laxtiv cap 0.52gm	Tier 1	OTC; MAIL
fiber therap pow 28.3%	Tier 1	OTC; MAIL
fiber therap pow 48.57%	Tier 1	OTC; MAIL
fiber therap pow sf orang	Tier 1	OTC; MAIL
fiber therap tab 500mg	Tier 1	OTC; MAIL
fiber therap tab 625mg	Tier 1	OTC; MAIL
fiber-lax tab 625mg	Tier 1	OTC; MAIL
fibergen tab 625mg	Tier 1	OTC; MAIL
gnp best pow fiber	Tier 1	OTC; MAIL
hm fiber cap 0.52gm	Tier 1	OTC; MAIL
hm fiber pow 28.3%	Tier 1	OTC; MAIL
hm fiber pow 30.9%	Tier 1	OTC; MAIL
hm fiber pow 48.57%	Tier 1	OTC; MAIL
hm fiber pow 58.6%	Tier 1	OTC; MAIL
hm fiber tab 500mg	Tier 1	OTC; MAIL
kls fiber tb tab 625mg	Tier 1	OTC; MAIL
konsyl cap 520mg	Tier 1	OTC; MAIL
konsyl daily pow 28.3%	Tier 1	OTC; MAIL
KONSYL DAILY POW 28.3%	Tier 1	OTC; MAIL
KONSYL DAILY POW 100%	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
konsyl fiber tab 625mg	Tier 1	OTC; MAIL
konsyl pow 30.9%	Tier 1	OTC; MAIL
KONSYL-D POW 52.3%	Tier 1	OTC; MAIL
medi-mucil cap 0.52gm	Tier 1	OTC; MAIL
METAMUCIL POW 28%ORG	Tier 1	OTC; MAIL
metamucil pow 28.3%org	Tier 1	OTC; MAIL
METAMUCIL POW 55.46%	Tier 1	OTC; MAIL
metamucil pow 58.6%	Tier 1	OTC; MAIL
metamucil pow 58.6%org	Tier 1	OTC; MAIL
METAMUCIL POW 58.12%	Tier 1	OTC; MAIL
METAMUCIL POW CLEAR	Tier 2	OTC; MAIL
METAMUCIL WAF	Tier 1	OTC; MAIL
nat fiber pow 48.57%	Tier 1	OTC; MAIL
NAT FIBER POW 58.6%	Tier 1	OTC; MAIL
nat fiber pow therapy	Tier 1	OTC; MAIL
nat psyllium pow fiber	Tier 1	OTC; MAIL
nat veg fibr pow	Tier 1	OTC; MAIL
naturl fiber pow 28.3%	Tier 1	OTC; MAIL
naturl fiber pow 30.9%	Tier 1	OTC; MAIL
naturl fiber pow 58.6%	Tier 1	OTC; MAIL
psyllium powder 100%	Tier 1	OTC; MAIL
psyllium see pow 100%	Tier 1	OTC; MAIL
px fiber cap 0.52gm	Tier 1	OTC; MAIL
px fiber tab 625mg	Tier 1	OTC; MAIL
qc natural pow vegetabl	Tier 1	OTC; MAIL
ra fib lax pow 48.57%	Tier 1	OTC; MAIL
ra fiber cap 0.52gm	Tier 1	OTC; MAIL
ra fiber pow 28.3%	Tier 1	OTC; MAIL
ra fiber pow 48.57%	Tier 1	OTC; MAIL
ra fiber pow 58.6%	Tier 1	OTC; MAIL
ra fiber tab 500mg	Tier 1	OTC; MAIL
ra fiber-cap tab 625mg	Tier 1	OTC; MAIL
ra fiber-tab tab 625mg	Tier 1	OTC; MAIL
reguloid cap 0.52gm	Tier 1	OTC; MAIL
reguloid pow 28.3%	Tier 1	OTC; MAIL
reguloid pow 48.57%	Tier 1	OTC; MAIL
reguloid pow 58.6%	Tier 1	OTC; MAIL
sb fib lax pow 33%	Tier 1	OTC; MAIL
sb fib lax pow 48.57%	Tier 1	OTC; MAIL
sb fiber lax tab 625mg	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
sm fiber lax tab 500mg	Tier 1	OTC; MAIL
sm fiber pow 28.3%	Tier 1	OTC; MAIL
sm fiber pow 48.57%	Tier 1	OTC; MAIL
sm fiber pow 58.6%	Tier 1	OTC; MAIL
soluble fib tab therapy	Tier 1	OTC; MAIL
sorbulax pow 100%	Tier 1	OTC; MAIL
tgt psyllium cap 0.52gm	Tier 1	OTC; MAIL
total fiber pow	Tier 1	OTC; MAIL
UNIFIBER POW	Tier 1	OTC; MAIL
veg fiber pow 63%	Tier 1	OTC; MAIL
wal-mucil cap 0.52gm	Tier 1	OTC; MAIL
wal-mucil pow 28.3%	Tier 1	OTC; MAIL
wal-mucil pow 48.57%	Tier 1	OTC; MAIL
wal-mucil pow 58.6%	Tier 1	OTC; MAIL
wal-mucil pow 100%	Tier 1	OTC; MAIL
Laxative Combinations		
doc-q-lax tab 8.6-50mg	Tier 1	OTC; MAIL
dok plus tab 8.6-50mg	Tier 1	OTC; MAIL
easy-lax pls tab 8.6-50mg	Tier 1	OTC; MAIL
eq senna-s tab 8.6-50mg	Tier 1	OTC; MAIL
gavilyte-c sol	Tier 1	QL (120000 mL / 30 days); MAIL
gavilyte-g sol	Tier 1	QL (120000 mL / 30 days); MAIL
gavilyte-n sol flav pk	Tier 1	QL (120000 mL / 30 days); MAIL
GOLYTELY SOL	Tier 2	QL (30 ea / 30 days); MAIL
HALFLYTELY KIT FLAV PKS	Tier 2	MAIL; $0 Copay for Bowel Preparation for age +50
lax/stl soft tab 8.6-50mg	Tier 1	OTC; MAIL
laxacin tab 8.6-50mg	Tier 1	OTC; MAIL
laxative pls tab 8.6-50mg	Tier 1	OTC; MAIL
medi-laxx cap 8.6-50mg	Tier 1	OTC; MAIL
medi-natural tab 8.6-50mg	Tier 1	OTC; MAIL
MOVIPREP SOL	Tier 2	MAIL; $0 Copay for Bowel Preparation for age +50

Drug Name	Drug Tier	Requirements/Limits
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	Tier 1	QL (120000 mL / 30 days); MAIL
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	Tier 1	QL (120000 mL / 30 days); MAIL
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	Tier 1	QL (120000 mL / 30 days); MAIL
peg-prep kit	Tier 1	MAIL; $0 Copay for Bowel Preparation for age +50
PREPOPIK PAK	Tier 2	MAIL; $0 Copay for Bowel Preparation for age +50
ra p col-rit tab 8.6-50mg	Tier 1	OTC; MAIL
sb docusate tab 8.6-50mg	Tier 1	OTC; MAIL
senexon-s tab 8.6-50mg	Tier 1	OTC; MAIL
senna plus tab 8.6-50mg	Tier 1	OTC; MAIL
senna s tab 8.6-50mg	Tier 1	OTC; MAIL
senna tab 8.6-50mg	Tier 1	OTC; MAIL
senna-s tab 8.6-50mg	Tier 1	OTC; MAIL
senna-time s tab 8.6-50mg	Tier 1	OTC; MAIL
sennalax-s tab 8.6-50mg	Tier 1	OTC; MAIL
sennosides-docusate sodium tab 8.6-50 mg	Tier 1	OTC; MAIL
stool softnr tab 8.6-50mg	Tier 1	OTC; MAIL
SUPREP BOWEL SOL PREP KIT	Tier 2	MAIL
trilyte sol	Tier 1	QL (120000 mL / 30 days); MAIL
Laxatives - Miscellaneous		
clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
constulose sol 10gm/15	Tier 1	QL (5400 mL / 30 days); MAIL
cvs glycerin sup 2.1gm	Tier 1	OTC; MAIL
cvs purelax pak	Tier 1	OTC; MAIL
cvs purelax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
eq clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
eql clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
gavilax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
gentlelax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
glycerin ped sup 1.2gm	Tier 1	OTC; MAIL
glycerin sup 2gm	Tier 1	OTC; MAIL
glycerin suppos 1.2 gm	Tier 1	OTC; MAIL
glycerin suppos 2.1 gm	Tier 1	OTC; MAIL
glycolax pow 3350 nf	Tier 1	OTC, QL (527 gm / 25 days); MAIL
gnp clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
gnp glycerin sup 1.2gm	Tier 1	OTC; MAIL
gnp glycerin sup 2.1gm	Tier 1	OTC; MAIL
healthylax pow	Tier 1	OTC; MAIL
hm clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
lactulose solution 10 gm/15ml	Tier 1	QL (5400 mL / 30 days); MAIL
laxaclear pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
natura-lax pow 3350 nf	Tier 1	OTC, QL (527 gm / 25 days); MAIL
pegylax pow	Tier 1	QL (527 gm / 25 days); MAIL
polyethylene glycol 3350 oral packet	Tier 1	OTC; MAIL
polyethylene glycol 3350 oral powder	Tier 1	QL (527 gm / 25 days); MAIL
polyethylene glycol 3350 oral powder	Tier 1	OTC, QL (527 gm / 25 days); MAIL
px glycerin sup 2.1gm	Tier 1	OTC; MAIL
ra glycerin sup 80.7%	Tier 1	OTC; MAIL
ra laxative pow	Tier 1	OTC; MAIL
ra laxative pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
sani-supp sup adult	Tier 1	OTC; MAIL
sani-supp sup pediatri	Tier 1	OTC; MAIL
sb glycerin sup 1.2gm	Tier 1	OTC; MAIL
sb glycerin sup 2.1gm	Tier 1	OTC; MAIL
sm clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
sm glycerin sup 80.7%	Tier 1	OTC; MAIL
smooth lax pow 3350	Tier 1	OTC, QL (527 gm / 25 days); MAIL
smooth lax pow 3350 nf	Tier 1	OTC; MAIL
sw clearlax pow	Tier 1	OTC, QL (527 gm / 25 days); MAIL
Lubricant Laxatives		
CVS MINERAL OIL	Tier 1	OTC; MAIL
GNP MINERAL OIL HEAVY	Tier 1	OTC; MAIL
HM MINERAL OIL	Tier 1	OTC; MAIL
MINERAL OIL	Tier 1	MAIL
MINERAL OIL	Tier 1	OTC; MAIL
mineral oil enema	Tier 1	OTC; MAIL
QC MINERAL OIL HEAVY	Tier 1	OTC; MAIL
RA MINERAL OIL	Tier 1	OTC; MAIL
SM MINERAL OIL	Tier 1	OTC; MAIL
TH MINERAL OIL	Tier 1	OTC; MAIL
Saline Laxatives		
citroma	Tier 1	OTC; MAIL
cvs enema ene disposab	Tier 1	OTC; MAIL
disposable ene single	Tier 1	OTC; MAIL
dulcolax mom sus mint	Tier 1	OTC; MAIL
eq enema ene double	Tier 1	OTC; MAIL
eql enema ene rtu	Tier 1	OTC; MAIL
gnp enema ene	Tier 1	OTC; MAIL
gnp milk mag sus	Tier 1	OTC; MAIL
hm enema ene	Tier 1	OTC; MAIL
mag citrate sol cherry	Tier 1	OTC; MAIL
mag citrate sol lemon	Tier 1	OTC; MAIL
magnesium citrate soln	Tier 1	OTC; MAIL
milk of magn sus	Tier 1	OTC; MAIL
milk of magn sus 400/5ml	Tier 1	OTC; MAIL
milk of magn sus 1200/15	Tier 1	OTC; MAIL
MILK OF MAGN SUS 2400MG	Tier 1	OTC; MAIL
milk of magn sus cherry	Tier 1	OTC; MAIL
milk of magn sus frsh mnt	Tier 1	OTC; MAIL
milk of magn sus mint	Tier 1	OTC; MAIL
OSMOPREP TAB 1.5GM	Tier 3	PA; MAIL
pediatric ene enema	Tier 1	OTC; MAIL
phosphate sol laxative	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
qc enema ene	Tier 1	OTC; MAIL
ra enema ene	Tier 1	OTC; MAIL
ra milk magn sus 400/5ml	Tier 1	OTC; MAIL
saline ene laxative	Tier 1	OTC; MAIL
sb milk magn sus	Tier 1	OTC; MAIL
sb milk magn sus mint	Tier 1	OTC; MAIL
sm enema ene	Tier 1	OTC; MAIL
sm milk magn sus cherry	Tier 1	OTC; MAIL
sm milk magn sus mint	Tier 1	OTC; MAIL
sm milk magn sus original	Tier 1	OTC; MAIL
sodium phosphates - enema	Tier 1	OTC; MAIL
Stimulant Laxatives		
alophen tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
bisac-evac sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
bisacodyl sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
bisacodyl tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
biscolax sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
carters tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
correct tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
correctol tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
cvs laxative chw 15mg	Tier 1	OTC; MAIL
cvs laxative tab 25mg	Tier 1	OTC; MAIL
cvs senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
dr edwards tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
ducodyl tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
eq laxative chw 15mg	Tier 1	OTC; MAIL
eq laxative tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
eq laxative tab 25mg	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
eql laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
eql laxative tab 25mg	Tier 1	OTC; MAIL
evac-u-gen tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
ex-lax ultra tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
fast relief sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
feenamint tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
feminine lax tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
fleet laxati tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
gentle laxat sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
gentle laxat tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
geri-kot tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
gnp bisa-lax tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
gnp laxative sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
gnp laxative tab 25mg	Tier 1	OTC; MAIL
gnp senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
hm laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
hm senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
kp bisacodyl tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
laxative chw 15mg	Tier 1	OTC; MAIL
laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
laxative tab 25mg	Tier 1	OTC; MAIL
laxative tab max-str	Tier 1	OTC; MAIL
laxative tab w/senna	Tier 1	OTC; MAIL
magic bullet sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
medi-natural tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
nat veg lax tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
px laxative tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
qc laxative sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
qc laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
qc senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
ra laxative chw 15mg	Tier 1	OTC; MAIL
ra laxative sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
ra laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
ra laxative tab 25mg	Tier 1	OTC; MAIL
ra senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
sb bisacodyl tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
sb laxative sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
sb senna-lax tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
senexon liq 8.8mg/5	Tier 1	OTC; MAIL
senexon tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
senna lax tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
senna laxati tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
SENNA TAB 8.6MG	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
senna-grx syp 8.8mg/5	Tier 1	OTC; MAIL
senna-tabs tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
senna-time tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
sennacon tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
sennazon syp 8.8mg/5	Tier 1	OTC; MAIL
senno tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
sennosides syrup 8.8 mg/5ml	Tier 1	OTC; MAIL
sm laxative sup 10mg	Tier 1	OTC, QL (60 supp / 30 days); MAIL
sm laxative tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
sm senna lax tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
sm senna lax tab max str	Tier 1	OTC; MAIL
stim laxat tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
tgt natural tab laxative	Tier 1	OTC; MAIL
tgt senna tab 8.6mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
VERACOLATE TAB	Tier 1	OTC; MAIL
womans laxat tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
womens laxat tab 5mg ec	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
Surfactant Laxatives		
correctol cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
diocto liq 50mg/5ml	Tier 1	OTC; MAIL
diocto syp 60/15ml	Tier 1	OTC; MAIL
docqlace cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
docu liq 50mg/5ml	Tier 1	OTC; MAIL
docu soft cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
docuprene tab 100mg	Tier 1	OTC; MAIL
docusate calcium cap 240 mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
docusate sod liq 50mg/5ml	Tier 1	OTC; MAIL
docusate sodium cap 100 mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
docusate sodium cap 250 mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
docusate sodium liquid 150 mg/15ml	Tier 1	OTC; MAIL
docusate sodium syrup 60 mg/15ml	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
docusate sodium tab 100 mg	Tier 1	OTC; MAIL
docusil cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
docusol plus ene 20-283	Tier 1	OTC; MAIL
dok cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
dok cap 250mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
dok tab 100mg	Tier 1	OTC; MAIL
dulcolax ss cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
easy-lax cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
enemeez plus ene 20-283	Tier 1	OTC; MAIL
kao-tin cap 240mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
laxa basic cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
PEDIA-LAX LIQ 50MG	Tier 1	OTC; MAIL
phillips cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
promolaxin tab 100mg	Tier 1	OTC; MAIL
ra col-rite cap 50mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
ra col-rite cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
ra col-rite cap 250mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
silace liq 10mg/ml	Tier 1	OTC; MAIL
silace syp 60/15ml	Tier 1	OTC; MAIL
sof-lax cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
stool softnr cap 50mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
stool softnr cap 100mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
stool softnr cap 240mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
stool softnr cap 250mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
stool softnr syp 60/15ml	Tier 1	OTC; MAIL

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stool softnr tab 100mg	Tier 1	OTC; MAIL
surfak cap 240mg	Tier 1	OTC, QL (60 caps / 30 days); MAIL
vacuant plus ene 20-283	Tier 1	OTC; MAIL
MACROLIDES		
Azithromycin		
azithromycin for susp 100 mg/5ml	Tier 1	QL (Max 1 fill per 45 days); covered for ages 12 and over
azithromycin for susp 200 mg/5ml	Tier 1	QL (Max 1 fill per 45 days); covered for ages 12 and over
azithromycin powd pack for susp 1 gm	Tier 1	QL (Max day supply 1; Max 1 per day)
azithromycin tab 250 mg	Tier 1	QL (13 tabs / 25 days)
azithromycin tab 500 mg	Tier 1	QL (13 tabs / 30 days)
azithromycin tab 600 mg	Tier 1	QL (8 tabs / 25 days)
Clarithromycin		
clarithromycin for susp 125 mg/5ml	Tier 2	
clarithromycin for susp 250 mg/5ml	Tier 2	
clarithromycin tab 250 mg	Tier 1	
clarithromycin tab 500 mg	Tier 1	
Erythromycins		
e.e.s. 400 tab 400mg	Tier 2	QL (180 tabs / 30 days)
ERY-TAB TAB 250MG EC	Tier 2	QL (240 tabs / 30 days)
ERY-TAB TAB 333MG EC	Tier 2	QL (180 tabs / 30 days)
ERY-TAB TAB 500MG EC	Tier 2	QL (120 tabs / 30 days)
erythrocin tab 250mg	Tier 2	QL (240 tabs / 30 days)
erythromycin ethylsuccinate for susp 200 mg/5ml	Tier 2	Covered for ages 12 and over
erythromycin ethylsuccinate tab 400 mg	Tier 2	QL (180 tabs / 30 days)
erythromycin tab 250 mg	Tier 2	QL (240 tabs / 30 days)
erythromycin tab 500 mg	Tier 2	QL (180 tabs / 30 days)
Fidaxomicin		
DIFICID TAB 200MG	Tier 4	QL (60 tabs / 30 days), PA
MEDICAL DEVICES		
Contraceptives		
CAYA DPR	PREV	MAIL
FC2 FEMALE MIS CONDOM	PREV	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
FC FEMALE MIS CONDOM	PREV	OTC; MAIL
FEMCAP MIS 22MM	PREV	MAIL
FEMCAP MIS 26MM	PREV	MAIL
FEMCAP MIS 30MM	PREV	MAIL
OMNIFLEX DPR	PREV	MAIL
ORTHO COIL DPR KIT 50	PREV	MAIL
ORTHO COIL DPR KIT 100	PREV	MAIL
ORTHO COIL DPR KIT 105	PREV	MAIL
ORTHO FLAT DPR KIT 55	PREV	MAIL
ORTHO FLAT DPR KIT 60	PREV	MAIL
ORTHO FLAT DPR KIT 65	PREV	MAIL
ORTHO FLAT DPR KIT 70	PREV	MAIL
ORTHO FLAT DPR KIT 75	PREV	MAIL
ORTHO FLAT DPR KIT 80	PREV	MAIL
ORTHO FLAT DPR KIT 85	PREV	MAIL
ORTHO FLAT DPR KIT 90	PREV	MAIL
ORTHO FLAT DPR KIT 95	PREV	MAIL
ORTHO FLEX DPR 65MM	PREV	MAIL
ORTHO FLEX DPR 70MM	PREV	MAIL
ORTHO FLEX DPR 75MM	PREV	MAIL
ORTHO FLEX DPR 80MM	PREV	MAIL
PRENTIF MIS 25MM	PREV	MAIL
PRENTIF MIS 28MM	PREV	MAIL
PRENTIF MIS 31MM	PREV	MAIL
PRENTIF MIS FITTING	PREV	MAIL
TODAY SPONGE MIS	PREV	OTC, QL (Max day supply 365); MAIL
WIDE-SEAL DPR KIT 60	PREV	MAIL
WIDE-SEAL DPR KIT 65	PREV	MAIL
WIDE-SEAL DPR KIT 70	PREV	MAIL
WIDE-SEAL DPR KIT 75	PREV	MAIL
WIDE-SEAL DPR KIT 80	PREV	MAIL
WIDE-SEAL DPR KIT 85	PREV	MAIL
WIDE-SEAL DPR KIT 90	PREV	MAIL
WIDE-SEAL DPR KIT 95	PREV	MAIL
Diabetic Supplies		
TRUE METRIX KIT AIR	DME	OTC, QL (1 per 365 days); MAIL
TRUE METRIX KIT METER	DME	OTC, QL (1 per 365 Days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Misc. Devices		
ALCOHOL SWABS	Tier 1	QL (200.1 ea / 30 days); MAIL
ALCOHOL SWABS	Tier 1	OTC, QL (200.1 ea / 30 days); MAIL; CERTAIN LABELERS EXCLUDED
Parenteral Therapy Supplies		
BD U-500 MIS 31GX6MM	DME	QL (150 / 30 days); MAIL
INSULIN SYRINGES	DME	OTC, QL (150 / 30 days); MAIL
Respiratory Therapy Supplies		
ADULT RESPIRATORY MASK	Tier 2	OTC, QL (1 per 365 Days); MAIL
MABIS COSMO MIS NEBULIZR	Tier 2	MAIL
NEBULIZERS	Tier 2	MAIL
NEBULIZERS	Tier 2	OTC; MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 box / year); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 ea / year); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 each / 25 days); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 each / year); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	QL (1 pack / year); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	OTC, QL (1 box / year); MAIL
RESPIRATORY THERAPY SUPPLIES - MISC	Tier 2	OTC, QL (1 each / year); MAIL
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	Tier 2	QL (1 per 365 Days); MAIL
SPACER/AEROSOL-HOLDING CHAMBERS - DEVICE	Tier 2	OTC, QL (1 per 365 Days); MAIL
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
CONDOMS MIS	PREV	OTC
CONDOMS MIS LUBRICAT	PREV	OTC
DUREX MIS REALFEEL	PREV	OTC
TRUSTEX/RIA MIS NON-LUB	PREV	OTC

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Drug Name	Drug Tier	Requirements/Limits
MIGRAINE PRODUCTS		
Migraine Products		
dihydroergotamine mesylate inj 1 mg/ml	Tier 2	MAIL
ERGOMAR SUB 2MG	Tier 3	MAIL
Serotonin Agonists		
almotriptan malate tab 6.25 mg	Tier 2	QL (6 per 30 days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan then Zolmitriptan or Zolmitriptan ODT for 5 days each.
almotriptan malate tab 12.5 mg	Tier 2	QL (Max 9 per 30 days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan then Zolmitriptan or Zolmitriptan ODT for 5 days each.
eletriptan hydrobromide tab 20 mg (base equivalent)	Tier 1	QL (6 tabs / 30 days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan then Zolmitriptan or Zolmitriptan ODT for 5 days each.
eletriptan hydrobromide tab 40 mg (base equivalent)	Tier 1	QL (6 tabs / 30 days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan then Zolmitriptan or Zolmitriptan ODT for 5 days each.

Drug Name	Drug Tier	Requirements/Limits
frovatriptan succinate tab 2.5 mg (base equivalent)	Tier 2	QL (9 tabs / 45 days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan then Zolmitriptan or Zolmitriptan ODT then Almotriptan or Eletriptan for 5 days each
naratriptan hcl tab 1 mg (base equiv)	Tier 1	QL (9 per 30 Days); MAIL
naratriptan hcl tab 2.5 mg (base equiv)	Tier 1	QL (9 per 30 Days); MAIL
rizatriptan benzoate tab 5 mg (base equivalent)	Tier 1	QL (12 / 30 days), ST; MAIL; PRIOR USE SUMATRIPTAN AND NARATRIPTAN FOR 5 DAYS
rizatriptan benzoate tab 10 mg (base equivalent)	Tier 1	QL (12 / 30 days), ST; MAIL; PRIOR USE SUMATRIPTAN AND NARATRIPTAN FOR 5 DAYS
sumatriptan succinate inj 6 mg/0.5ml	Tier 2	QL (2 / 30 days; Max day supply 25), ST; PRIOR USE OF SUMATRIPTAN TAB OR NARATRIPTAN TAB
sumatriptan succinate tab 25 mg	Tier 1	QL (9 per 30 Days); MAIL
sumatriptan succinate tab 50 mg	Tier 1	QL (9 per 30 Days); MAIL
sumatriptan succinate tab 100 mg	Tier 1	QL (9 per 30 Days); MAIL
zolmitriptan orally disintegrating tab 2.5 mg	Tier 1	QL (6 per 30 Days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan for 5 days each.

Drug Name	Drug Tier	Requirements/Limits
zolmitriptan orally disintegrating tab 5 mg	Tier 1	QL (6 per 30 Days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan for 5 days each.
zolmitriptan tab 2.5 mg	Tier 1	QL (6 per 30 Days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan for 5 days each.
zolmitriptan tab 5 mg	Tier 1	QL (6 per 30 Days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan for 5 days each.
ZOMIG SPR 5MG	Tier 3	QL (6 per 30 Days), ST; MAIL; Prior use of Naratriptan AND Sumatriptan then Rizatriptan for 5 days each.

MINERALS ELECTROLYTES

Calcium

ca citrate + tab	Tier 1	OTC; MAIL
ca citrate tab plus d	Tier 1	OTC; MAIL
calc 600+d tab 600-800	Tier 1	OTC; MAIL
calc cit+d3 tab 250-200	Tier 1	OTC; MAIL
calc citr+d3 tab 200-250	Tier 1	OTC; MAIL
calc citr/d3 tab 200-250	Tier 1	OTC; MAIL
calc citrate tab +d	Tier 1	OTC; MAIL
calcarb/d tab 600	Tier 1	OTC; MAIL
calcitrate tab	Tier 1	OTC; MAIL
calcitrate tab 950mg	Tier 1	OTC; MAIL
calcium 500 tab +d	Tier 1	OTC; MAIL
calcium 500 tab /vit d	Tier 1	OTC; MAIL
CALCIUM 600 CHW +D/MINER	Tier 1	OTC; MAIL
calcium 600 chw +d/mnrls	Tier 1	OTC; MAIL
calcium 600 chw w/vit d	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
calcium 600 tab	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calcium 600 tab + d	Tier 1	OTC; MAIL
calcium 600 tab +d3	Tier 1	OTC; MAIL
calcium 600 tab -d	Tier 1	OTC; MAIL
calcium 600/ tab vit d	Tier 1	OTC; MAIL
calcium + d tab	Tier 1	OTC; MAIL
calcium + d tab 600-200	Tier 1	OTC; MAIL
calcium + d tab 600mg	Tier 1	OTC; MAIL
calcium +d3 tab maximum	Tier 1	OTC; MAIL
calcium +d tab maximum	Tier 1	OTC; MAIL
calcium carb tab 1250mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calcium carb-vit d w/ minerals chew tab 600 mg-400 unit	Tier 1	OTC; MAIL
calcium carbonate (antacid) susp 1250 mg/5ml	Tier 1	OTC, QL (500.1 mL / 30 days); MAIL
calcium carbonate tab 600 mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calcium carbonate tab 1250 mg (500 mg elemental ca)	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calcium carbonate-cholecalciferol chew tab 500 mg-100 unit	Tier 1	OTC; MAIL
calcium carbonate-cholecalciferol tab 250 mg-125 unit	Tier 1	OTC; MAIL
calcium carbonate-cholecalciferol tab 500 mg-125 unit	Tier 1	OTC; MAIL
calcium carbonate-cholecalciferol tab 500 mg-400 unit	Tier 1	OTC; MAIL
calcium carbonate-cholecalciferol tab 600 mg-200 unit	Tier 1	OTC; MAIL
calcium carbonate-cholecalciferol tab 600 mg-400 unit	Tier 1	OTC; MAIL
calcium carbonate-ergocalciferol tab 500mg-200 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d cap 600 mg-200 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 250 mg-125 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 500 mg-125 unit	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
calcium carbonate-vitamin d tab 500 mg-200 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 500 mg-400 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 600 mg-125 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 600 mg-200 unit	Tier 1	OTC; MAIL
calcium carbonate-vitamin d tab 600 mg-400 unit	Tier 1	OTC; MAIL
calcium citr tab +d	Tier 1	OTC; MAIL
calcium citr tab plus d-3	Tier 1	OTC; MAIL
calcium citr tab w/vit d3	Tier 1	OTC; MAIL
calcium citrate tab 950 mg (200 mg elemental ca)	Tier 1	OTC; MAIL
calcium citrate-vitamin d tab 200 mg-250 unit (elemental ca)	Tier 1	OTC; MAIL
calcium citrate-vitamin d tab 315 mg-200 unit (elemental ca)	Tier 1	OTC; MAIL
calcium citrate-vitamin d tab 315 mg-250 unit (elemental ca)	Tier 1	OTC; MAIL
calcium tab 500+d	Tier 1	OTC; MAIL
calcium tab 500/d	Tier 1	OTC; MAIL
calcium tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calcium tab vit d	Tier 1	OTC; MAIL
calcium w/ vitamin d tab 600 mg-200 unit	Tier 1	OTC; MAIL
calcium+d3 tab 600-400	Tier 1	OTC; MAIL
calcium+d3 tab 600-800	Tier 1	OTC; MAIL
calcium-magnesium-zinc tab 333-133-5 mg	Tier 1	OTC; MAIL
calcium/d3 cap 600-500	Tier 1	OTC; MAIL
calcium/d3 tab	Tier 1	OTC; MAIL
calcium/d3 tab 600-800	Tier 1	OTC; MAIL
calcium/d chw 500-400	Tier 1	OTC; MAIL
calcium/d tab 500-200	Tier 1	OTC; MAIL
calcium/d tab 600-800	Tier 1	OTC; MAIL
caltrate 600 chw 600-800	Tier 1	OTC; MAIL
caltrate 600 tab	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
calvite p&d tab	Tier 1	OTC; MAIL

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cit calc/d tab 315-250	Tier 1	OTC; MAIL
creamies chw 600-400	Tier 1	OTC; MAIL
cvs ca/mg/zn tab	Tier 1	OTC; MAIL
cvs calcium tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
eq calcium tab citr+d	Tier 1	OTC; MAIL
eql calcium tab w/vit d	Tier 1	OTC; MAIL
gnp ca/mg/zn tab	Tier 1	OTC; MAIL
gnp ca/vit d chw minerals	Tier 1	OTC; MAIL
gnp calcium tab 600/d	Tier 1	OTC; MAIL
hm ca/vit d3 tab 600-800	Tier 1	OTC; MAIL
hm calcium tab citr+d	Tier 1	OTC; MAIL
kp ca/mg/zn tab	Tier 1	OTC; MAIL
kp calcium tab 600+d	Tier 1	OTC; MAIL
liq ca/vit d cap 600mg	Tier 1	OTC; MAIL
os calcium tab /vit d	Tier 1	OTC; MAIL
os-cal 500 chw	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
oscal 500/ tab 200 d-3	Tier 1	OTC; MAIL
oys shell+d chw 500-400	Tier 1	OTC; MAIL
oys shell+d tab 250-125	Tier 1	OTC; MAIL
oysco 500 tab 500mg	Tier 1	OTC; MAIL
oysco 500+d chw	Tier 1	OTC; MAIL
oysco 500+d tab	Tier 1	OTC; MAIL
oyst cal/d tab 250mg	Tier 1	OTC; MAIL
oyst cal/d tab 500mg	Tier 1	OTC; MAIL
oyst shell/d tab 250mg	Tier 1	OTC; MAIL
oyst shell/d tab 500-125	Tier 1	OTC; MAIL
oyst shell/d tab 500-200	Tier 1	OTC; MAIL
oyst shell/d tab 500-400	Tier 1	OTC; MAIL
oyst shell/d tab 500mg	Tier 1	OTC; MAIL
oyst-cal d tab 250mg	Tier 1	OTC; MAIL
oyst-cal-d tab 500mg	Tier 1	OTC; MAIL
oyster shell calcium tab 500 mg	Tier 1	OTC; MAIL
oyster-cal/d tab 500mg	Tier 1	OTC; MAIL
oystercal tab 500mg	Tier 1	OTC; MAIL
oystercal-d tab 500mg	Tier 1	OTC; MAIL
pa calcium tab vit d	Tier 1	OTC; MAIL
pa oyster sh tab 500mg	Tier 1	OTC; MAIL
px calcium&d tab 600-400	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
ra ca/mg/zn tab	Tier 1	OTC; MAIL
ra ca/vit d3 chw minerals	Tier 1	OTC; MAIL
ra ca/vit d3 tab 600-400	Tier 1	OTC; MAIL
ra calcium tab vit d	Tier 1	OTC; MAIL
ra calcium+d tab 600mg	Tier 1	OTC; MAIL
ra hi cal tab 500-200	Tier 1	OTC; MAIL
ra hi-cal tab 500mg	Tier 1	OTC; MAIL
ra hi-cal/d tab 500mg	Tier 1	OTC; MAIL
ra oys shl/d tab 500mg	Tier 1	OTC; MAIL
sm ca/mg/zn tab	Tier 1	OTC; MAIL
sm ca/vit d3 tab 600-400	Tier 1	OTC; MAIL
sm calcium tab /vit d3	Tier 1	OTC; MAIL
sm calcium/d tab 500-200	Tier 1	OTC; MAIL
sm calcium/d tab 600-400	Tier 1	OTC; MAIL
super ca 600 tab + d3	Tier 1	OTC; MAIL
super ca 600 tab + d 400	Tier 1	OTC; MAIL
super calciu tab 600mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
tgt calcium chw suppleme	Tier 1	OTC; MAIL
Electrolyte Mixtures		
naturalyte sol bubblegm	Tier 1	OTC; MAIL
naturalyte sol fruit	Tier 1	OTC; MAIL
naturalyte sol grape	Tier 1	OTC; MAIL
naturalyte sol unflavor	Tier 1	OTC; MAIL
oral electrolyte solution	Tier 1	OTC; MAIL
oralyte sol	Tier 1	OTC; MAIL
oralyte sol freeze	Tier 1	OTC; MAIL
ped elctrlyt sol	Tier 1	OTC; MAIL
pedia vance sol apple	Tier 1	OTC; MAIL
rehydralyte sol	Tier 1	OTC; MAIL
revital frzr sol pops	Tier 1	OTC; MAIL
revital jell sol cups	Tier 1	OTC; MAIL
revital lqd sol squeezer	Tier 1	OTC; MAIL
Fluoride		
fluor-a-day dro 0.125mg	PREV	QL (60 mL / 30 days); MAIL
fluoritab chw 0.5mg f	PREV	QL (30 tabs / 30 days); MAIL
fluoritab chw 0.25mg f	PREV	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
fluoritab chw 1mg f	PREV	QL (30 tabs / 30 days); MAIL
fluoritab chw 2.2mg	PREV	QL (30 tabs / 30 days); MAIL
fluoritab dro 0.125mg	PREV	QL (60 mL / 30 days); MAIL
flura-drops dro 0.25mg f	PREV	QL (30 mL / 30 days); MAIL
karidium dro 0.125mg	PREV	QL (60 mL / 30 days); MAIL
ludent chw 0.5mg f	PREV	QL (30 tabs / 30 days); MAIL
ludent chw 0.25mg f	PREV	QL (30 tabs / 30 days); MAIL
ludent chw 1mg f	PREV	QL (30 tabs / 30 days); MAIL
nafrinse chw 1mg f	PREV	QL (30 tabs / 30 days); MAIL
nafrinse dro 0.125mg	PREV	QL (60 mL / 30 days); MAIL
sodium fluoride chew tab 0.5 mg f (from 1.1 mg naf)	PREV	QL (30 tabs / 30 days); MAIL
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf)	PREV	QL (30 tabs / 30 days); MAIL
sodium fluoride chew tab 1 mg f (from 2.2 mg naf)	PREV	QL (30 tabs / 30 days); MAIL
sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)	PREV	QL (50.1 mL / 30 days); MAIL
sodium fluoride tab 0.5 mg f (from 1.1 mg naf)	PREV	QL (60 tabs / 30 days); MAIL; Covered for ages 6 and over
Magnesium		
gnp magnesiu tab 250mg	Tier 1	OTC; MAIL
mag-g tab 500mg	Tier 1	OTC; MAIL
mag-sr tab 535mg	Tier 1	OTC; MAIL
magdelay tab 70mg	Tier 1	OTC; MAIL
magnesium gluconate tab 27.5 mg (elemental mg)	Tier 1	OTC; MAIL
magnesium gluconate tab 500 mg (27 mg elemental mg)	Tier 1	OTC; MAIL
magnesium oxide cap 500 mg (elemental mg)	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
magnesium oxide tab 250 mg (mg supplement)	Tier 1	OTC; MAIL
magnesium oxide tab 400 mg (241.3 mg elemental mg)	Tier 1	OTC; MAIL
magnesium oxide tab 500 mg (mg supplement)	Tier 1	OTC; MAIL
magnesium sulfate inj 50%	Tier 1	MAIL
magnesium tab 200 mg	Tier 1	OTC; MAIL
magnesium tab 250mg	Tier 1	OTC; MAIL
magnesium tab 400 mg	Tier 1	OTC; MAIL
magnesium-ox tab 400mg	Tier 1	OTC; MAIL
magonate tab 500mg	Tier 1	OTC; MAIL
mgo tab 400mg	Tier 1	OTC; MAIL
ra magnesium cap 500mg	Tier 1	OTC; MAIL
sm magnesium tab 250mg	Tier 1	OTC; MAIL
th magnesium tab 200mg	Tier 1	OTC; MAIL
Phosphate		
phospha 250 tab neutral	Tier 1	QL (120 tabs / 30 days); MAIL
Potassium		
effer-k tab 25meq ef	Tier 1	QL (60 ea / 30 days); MAIL
k-effervesce tab 25meq ef	Tier 1	QL (60 ea / 30 days); MAIL
k-prime tab 25meq ef	Tier 1	QL (60 ea / 30 days); MAIL
k-vescent tab 25meq ef	Tier 1	QL (60 ea / 30 days); MAIL
klor-con 8 tab 8meq er	Tier 1	QL (120 tabs / 30 days); MAIL
klor-con 10 tab 10meq er	Tier 1	QL (120 tabs / 30 days); MAIL
klor-con m10 tab 10meq er	Tier 1	QL (120 tabs / 30 days); MAIL
klor-con m20 tab 20meq er	Tier 1	QL (150 tabs / 30 days); MAIL
klor-con/ef tab 25meq fr	Tier 1	QL (60 ea / 30 days); MAIL
potassium bicarbonate effer tab 25 meq	Tier 1	QL (60 ea / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
potassium chloride cap er 8 meq	Tier 1	QL (120 caps / 30 days); MAIL
potassium chloride cap er 10 meq	Tier 1	QL (120 caps / 30 days); MAIL
potassium chloride microencapsulated crys er tab 10 meq	Tier 1	QL (120 ea / 30 days); MAIL
potassium chloride microencapsulated crys er tab 10 meq	Tier 1	QL (120 tabs / 30 days); MAIL
potassium chloride microencapsulated crys er tab 20 meq	Tier 1	QL (150 tabs / 30 days); MAIL
potassium chloride oral soln 10% (20 meq/15ml)	Tier 2	MAIL
potassium chloride oral soln 20% (40 meq/15ml)	Tier 2	MAIL
potassium chloride tab er 8 meq (600 mg)	Tier 1	QL (120 tabs / 30 days); MAIL
potassium chloride tab er 10 meq	Tier 1	QL (120 tabs / 30 days); MAIL
potassium chloride tab er 20 meq (1500 mg)	Tier 1	QL (150 ea / 30 days); MAIL
Sodium		
sodium chloride tab 1 gm	Tier 1	OTC; MAIL
Zinc		
orazinc cap 220mg	Tier 1	OTC; MAIL
zinc sulfate cap 220 mg (50 mg elemental zn)	Tier 1	OTC; MAIL
zinc-220 cap	Tier 1	OTC; MAIL
MISC. NUTRITIONAL SUBSTANCES		
MISC. NUTRITIONAL SUBSTANCES		
prenatal dha cap 200mg	Tier 1	OTC, QL (30 caps / 30 days); MAIL
MOUTH/THROAT/DENTAL AGENTS		
Anesthetics Topical Oral		
lidocaine hcl viscous soln 2%	Tier 1	MAIL
Anti-infectives - Throat		
clotrimazole troche 10 mg	Tier 1	QL (70 ea / 10 days); MAIL
clotrimazole troche 10 mg	Tier 1	QL (70 lozgs / 10 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
nystatin susp 100000 unit/ml	Tier 1	QL (3600 mL / 30 days); MAIL
ORAVIG TAB 50MG	Tier 3	PA; MAIL
Antiseptics - Mouth/Throat		
DEBACTEROL SOL 30-50%	Tier 3	PA; MAIL
paroex sol 0.12%	Tier 1	MAIL
periogard sol 0.12%	Tier 1	MAIL
Dental Products		
cavarest gel 1.1%	Tier 1	MAIL
denta 5000 cre plus	Tier 1	MAIL
denta 5000 cre plus 2pk	Tier 1	MAIL
dentagel gel 1.1%	Tier 1	MAIL
karigel gel 0.5%	Tier 1	MAIL
karigel-n gel 1.1%	Tier 1	MAIL
neutragard gel 1.1%	Tier 1	MAIL
sf 5000 plus cre 1.1%	Tier 1	MAIL
sf gel 1.1%	Tier 1	MAIL
Steroids - Mouth/Throat		
oralone dent pst 0.1%	Tier 1	MAIL
triamcinolone acetonide dental paste 0.1%	Tier 1	MAIL
Throat Products - Misc.		
cevimeline hcl cap 30 mg	Tier 2	PA; MAIL
pilocarpine hcl tab 5 mg	Tier 1	MAIL
pilocarpine hcl tab 7.5 mg	Tier 1	MAIL
MULTIVITAMINS		
B-Complex w/ Folic Acid		
b complex tab vit c	Tier 1	OTC; MAIL
b-complex tab balanced	Tier 1	OTC; MAIL
b-complex w/ c & folic acid tab	Tier 1	OTC; MAIL
b-plex tab	Tier 1	MAIL
dialyvite tab	Tier 1	MAIL
dialyvite tab 800	Tier 1	OTC; MAIL
folbee plus tab	Tier 1	MAIL
hm b complex tab with c	Tier 1	OTC; MAIL
kp b complex tab /c	Tier 1	OTC; MAIL
mynephrocaps cap	Tier 1	QL (60 caps / 30 days); MAIL
nephronex tab	Tier 1	MAIL
rena-vite rx tab	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
rena-vite tab	Tier 1	OTC; MAIL
renal cap	Tier 1	QL (60 caps / 30 days); MAIL
renal tab multivit	Tier 1	OTC; MAIL
reno cap	Tier 1	QL (60 caps / 30 days); MAIL
stress form tab	Tier 1	OTC; MAIL
super b-comp tab /fa/vitc	Tier 1	OTC; MAIL
super b-comp tab vit c/fa	Tier 1	OTC; MAIL
triphrocaps cap	Tier 1	QL (60 caps / 30 days); MAIL
virt-vite tab plus	Tier 1	MAIL
vita-bee/c tab	Tier 1	OTC; MAIL
vol-care rx tab	Tier 1	MAIL
Multiple Vitamins w/ Iron		
daily vit tab +iron	Tier 1	OTC; MAIL
daily vite tab iron	Tier 1	OTC; MAIL
daily-vitamn tab	Tier 1	OTC; MAIL
daily-vite/ tab iron	Tier 1	OTC; MAIL
hm one daily tab /iron	Tier 1	OTC; MAIL
multi-day tab /iron	Tier 1	OTC; MAIL
multi-vit/fe tab	Tier 1	OTC; MAIL
multiple vitamins w/ iron tab	Tier 1	OTC; MAIL
once daily tab iron	Tier 1	OTC; MAIL
one daily tab pls iron	Tier 1	OTC; MAIL
ra one daily tab +iron	Tier 1	OTC; MAIL
sm multiple tab vit/iron	Tier 1	OTC; MAIL
stress b com tab w/iron	Tier 1	OTC; MAIL
stress form tab /iron	Tier 1	OTC; MAIL
stress formu tab w/iron	Tier 1	OTC; MAIL
tab-a-vite tab /iron	Tier 1	OTC; MAIL
Multiple Vitamins w/ Minerals		
a thru z sel tab 50+ adva	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
a thru z sel tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
a thru z tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
a thru z tab high pot	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
a thru z tab select	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
a thru z tab ultimate	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
abc plus tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
abc plus tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
actical cap	Tier 1	OTC; MAIL
advanced tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
amoryn mood cap booster	Tier 1	OTC; MAIL
anti-oxidant cap formula	Tier 1	OTC; MAIL
anti-oxidant tab plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
antiox form/ cap minerals	Tier 1	OTC; MAIL
antioxidant cap	Tier 1	OTC; MAIL
antioxidant tab protecti	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
antioxidant tab vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
antioxin cap 4000	Tier 1	OTC; MAIL
b-plex plus tab	Tier 1	QL (30 tabs / 30 days); MAIL
b-redi/rd hr tab ts/rd ro	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
bdy/hair/skn cap nails	Tier 1	OTC; MAIL
biocel tab	Tier 1	QL (30 tabs / 30 days); MAIL
biotin plus/ tab cal/vitd	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
bprotected liq multi-vi	Tier 1	OTC; MAIL
carravite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cent mature tab womn 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
centamin liq	Tier 1	OTC; MAIL
centavite az tab minerals	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
centavite liq	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
central-vite tab mens mat	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
central-vite tab wmns mat	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
centravites tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
centravites tab 50 plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
century tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
century tab mature	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cerovite tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cerovite tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
certa plus tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
certagen tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
certavite liq antioxid	Tier 1	OTC; MAIL
certavite/ tab antioxid	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
comp daily tab w/lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
comp energy tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
comp multivi liq mineral	Tier 1	OTC; MAIL
companion tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
compete tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
comple multi tab adlt 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
complere tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
complete tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
complete tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
complete tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
coral calciu cap plus	Tier 1	OTC; MAIL
corvite free tab	Tier 1	QL (30 tabs / 30 days); MAIL
cvs daily tab fe/ca/zn	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cvs vision tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily betic tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily diet tab support	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily mens tab health	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab vit/mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab vit/min	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab women	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily multi tab womn 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily vit tab +mineral	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily vitamn cap plus	Tier 1	OTC; MAIL
daily womens tab health	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily-vitamn tab maximum	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
diabetic sup tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
diabets hlth tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
dialyvite tab 800/d	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
drs choice tab men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ecolovit tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
enviro-stres tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eql century tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eql century tab mature	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eql vision tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
essentia tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
essential tab balance	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eye vitamins cap	Tier 1	OTC; MAIL
eye vitamins tab /mineral	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
eye-vites tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gerivite tab complete	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
glucoten cap	Tier 1	OTC; MAIL
gnp century tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp century tab adult	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp century tab cardio	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp century tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp century tab ultimate	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp healthy tab eyes	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp one dail tab maximum	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp opti-vit tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hair formula tab ex stren	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hair formula tab ultr man	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
hair vitamin tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hair/skin/ tab nails	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
healthy eyes cap supervis	Tier 1	OTC; MAIL
healthy eyes tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hi-kovite tab 2-part	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hi-potency tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hm complete tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
hm complete tab 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
i-vite prote tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
i-vite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
icaps cap	Tier 1	OTC; MAIL
icaps lutein cap /omega-3	Tier 1	OTC; MAIL
icaps mv tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp adult 50+ tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp adults tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp mens 50+ tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp mens tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp women 50+ tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
kp womens tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
life pack tab mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
life pack tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
lysiplex liq plus	Tier 1	OTC; MAIL
lysiplex tab plus	Tier 1	QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
macuvite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
macuvite tab eye care	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
macuvite tab lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
max daily tab green	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
maximum tab blue lab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
maximum tab green lb	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
maximum tab red labl	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mediplex tab plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mega multi tab men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mega multi tab women	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mega vm-80 tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mens 50+ adv tab one daly	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mens daily cap lycopene	Tier 1	OTC; MAIL
milltrium sr tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
milltrium tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
milltrium tab cardio	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mult vitamin tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi 50+ cap for her	Tier 1	OTC; MAIL
multi 50+ tab for her	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi 50+ tab for him	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi cap complete	Tier 1	OTC; MAIL
multi cap for her	Tier 1	OTC; MAIL
multi cap for him	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
multi complt tab /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi tab for her	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi tab for him	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi vitamn tab mineral	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-day tab minerals	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-day tab wght trm	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-lean tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vit/ tab minerals	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vitami tab menopaus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vite tab 50&over	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vite tab plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multilex tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multilex-t&m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multimineral tab plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multiple vitamins w/ minerals tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multivitamin liq	Tier 1	OTC; MAIL
multivitamin liq mineral	Tier 1	OTC; MAIL
multivitamin tab mineral	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multivitamin tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
my-vitalife cap	Tier 1	OTC; MAIL
myamulti tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
nutrifac zx tab	Tier 1	QL (30 tabs / 30 days); MAIL
ocutabs tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ocutabs tab lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ocuvite eye cap health	Tier 1	OTC; MAIL
ocuvite eye tab + multi	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ocuvite tab lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ocuvite xtra tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab 50 plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab /mineral	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab complete	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab fe/ca	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab healthy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab maximum	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab men 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab mens 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab plus iro	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab women	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
one daily tab women 50	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily wm tab pro-actv	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily/ tab minerals	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one dly hlth tab wght adv	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one-a-day tab teen/her	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
optic-vites tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
optimum pms tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
orthovite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
osteoprime tab ultra	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
pms support cap complex	Tier 1	OTC; MAIL
prevent cap	Tier 1	OTC; MAIL
prorenal+d cap omega-3	Tier 1	OTC; MAIL
prosight cap w/lutein	Tier 1	OTC; MAIL
prosight tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
px advanced tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
px complete tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
px mens mult tab vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
qc therin-m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
quintabs-m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra central tab -vite	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra central tab energy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra central tab vite sel	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ra central tab vite sen	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra hair/skin tab /nails	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra mature wm tab diet sup	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily pak mens 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab energy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab maximum	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab mens/d3	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab womens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra therapeut tab m/beta	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra vision tab vite/zn	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
renal tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
savision tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sclerex tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
senior tabs tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sentry tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sentry tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm complete tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm complete tab 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm complete tab 50+ mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm complete tab 50+ wmn	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
sm complete tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm hair/skin tab /nails	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm opti-vita tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
spectr women tab hlth sen	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
spectra ultr tab hlth men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
spectravite tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
spectravite tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress b-com tab /c/zinc	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress form tab /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress form/ tab zinc	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress formu tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress formu tab energy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sunvite actv tab adult	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sunvite tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
super 28 tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
super antiox cap protect	Tier 1	OTC; MAIL
super antiox tab a/c/e/se	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
super liq nu-thera	Tier 1	OTC; MAIL
super multip cap	Tier 1	OTC; MAIL
super multip tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
super tab nu-thera	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
super thera tab vite m	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
super vikaps tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
supr aytinal tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
supr aytinal tab 50 plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
supr vitamin tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
tab-a-vite tab maximum	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera form/ tab hematin	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera vital tab m	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera-m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera-mill m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
therabasic-m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theradex m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theradex m/ tab beta car	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theramill cap plus	Tier 1	OTC; MAIL
therapeutic tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
therapeutic- tab m	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
therapeutic- tab m/lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theratrum co tab 50 plus	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theratrum tab complete	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
theravim -m tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thrive for tab women	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
total formul tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
total formul tab 2	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
total formul tab 3	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
trueplus tab diabetic	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ultra antiox tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ultra freeda tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ultra freeda tab /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ultra vita-t tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ultrachoice tab advanced	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
v-c forte cap	Tier 1	MAIL
vic-forte cap	Tier 1	MAIL
vision form/ tab lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vision plus cap	Tier 1	OTC; MAIL
vision tab vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
visivites tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
visivites tab /lutein	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vita hair tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vita s forte tab	Tier 1	QL (30 tabs / 30 days); MAIL
vita-min cap	Tier 1	MAIL
vita-min cap	Tier 1	OTC; MAIL
vitabasic tab complete	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vitabasic tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vitacel tab	Tier 1	QL (30 tabs / 30 days); MAIL

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vitatrum tab complete	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
viteyes ared cap advanced	Tier 1	OTC; MAIL
viteyes ared cap formula	Tier 1	OTC; MAIL
viteyes cap /lutein	Tier 1	OTC; MAIL
viteyes cap complete	Tier 1	OTC; MAIL
viteyes smkr cap advanced	Tier 1	OTC; MAIL
viteyes smkr cap w/lutein	Tier 1	OTC; MAIL
viteyes tab lycopene	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vitrum tab senior	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
whole source tab dietary	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
whole source tab for men	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
whole source tab mature	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
whole source tab women	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
womens 50+ cap advanced	Tier 1	OTC; MAIL
womens cap multi	Tier 1	OTC; MAIL
womens daily tab fa/ca/fe	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
womens daily tab formula	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
womens mult tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
womens one tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
womns active tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
your life tab mens 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
your life tab wmns 50+	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
Multivitamins		
anti-oxidant tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
antioxidant cap formula	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
cvs daily tab multiple	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily tab vitamin	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily value tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily vit tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily vite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
daily-vitamn tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
essentl one tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mult vitamin tab daily	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mult vitamin tab essent	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
mult vitamin tab mens	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-day tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multi-vitamn tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multiple vitamin cap	Tier 1	OTC; MAIL
multiple vitamin tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
multivitamin cap	Tier 1	OTC; MAIL
mv-one cap	Tier 1	OTC; MAIL
once daily tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab essentl	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one daily tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
one-daily tab mult vit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
qc essential tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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ra one daily tab essentia	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra one daily tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
renal/zinc tab multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sigtab tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm multiple tab vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress form tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stress formu tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
stresstabs tab energy	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
tab-a-vite tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
tab-a-vite tab beta car	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera-mill tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thera-tabs tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
therapeutic tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
therems tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vitalee tab	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL VITAMINS		
ATABEX OB TAB 29-1MG	Tier 2	QL (30 tabs / 30 days); MAIL
BE WELL PAK ROUNDED	Tier 2	OTC, QL (30 ea / 30 days); MAIL
BRAINSTRONG MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
CALNA TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
CENTRUM SPEC PAK PRENATAL	Tier 2	OTC, QL (30 ea / 30 days); MAIL
COMPL PRENAT MIS +DHA	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
CVS PRENATAL CHW GUMMY	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
EZFE FORTE CAP	Tier 2	OTC, QL (30 caps / 30 days); MAIL
GNP DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
HM ONE DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
KPN PRENATAL TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
MYNATAL CAP	Tier 2	QL (30 caps / 30 days); MAIL
MYNATAL PLUS TAB	Tier 2	QL (30 tabs / 30 days); MAIL
MYNATAL TAB	Tier 1	QL (30 tabs / 30 days); MAIL
MYNATAL TAB ADVANCE	Tier 1	QL (30 tabs / 30 days); MAIL
MYNATAL-Z TAB	Tier 2	QL (30 tabs / 30 days); MAIL
MYNATE 90 TAB PLUS	Tier 2	QL (30 tabs / 30 days); MAIL
NATALVIT TAB 75-1MG	Tier 2	QL (30 tabs / 30 days); MAIL
NUTRICION TAB PORVIDA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
NUTRIENTS TAB PRENATAL	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
O-CAL TAB PRENATAL	Tier 2	QL (30 tabs / 30 days); MAIL
ONE A DAY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
ONE A DAY PAK PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
ONE-A-DAY PAK PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
PERRY PRENAT CAP	Tier 2	OTC, QL (30 caps / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
PRENAT MULTI CAP +DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
prenatabs rx tab	Tier 1	QL (30 tabs / 30 days)
PRENATAL 19 CHW 29-1MG	Tier 2	QL (30 tabs / 30 days)
prenatal 19 chw tab	Tier 2	QL (30 tabs / 30 days)
PRENATAL 19 TAB 29-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
PRENATAL CAP FORMULA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENATAL CAP OMEGA-3	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENATAL DHA PAK MULTI	Tier 2	OTC, QL (30 ea / 30 days); MAIL
PRENATAL FRM TAB A-FREE	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB 27-0.8MG	Tier 1	OTC, QL (30 tabs / 30 days)
PRENATAL TAB 28-0.8MG	Tier 1	OTC, QL (30 tabs / 30 days)
PRENATAL TAB FORMULA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB PLUS	Tier 1	QL (30 tabs / 30 days)
PRENATAL+DHA MIS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
PRENATAL+DHA MIS WOMENS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
PRENATAL+FE TAB 29-1MG	Tier 2	QL (30 tabs / 30 days)
prenatal/fa tab	Tier 1	QL (30 tabs / 30 days)
PRENATL MULT CAP + DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRENTAT MULT CAP PLUS DHA	Tier 2	OTC, QL (30 caps / 30 days); MAIL
PRETAB TAB 29-1MG	Tier 2	QL (30 tabs / 30 days)
RA ONE DAILY MIS	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
SIMILAC PREN PAK EARLY SH	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
SM ONE DAILY MIS PRENATAL	Tier 2	OTC, QL (30 boxes / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
THERANATAL MIS COMPLETE	Tier 2	OTC, QL (30 boxes / 30 days); MAIL
TL FOLATE TAB	Tier 2	MAIL
TRINATAL GT TAB	Tier 1	QL (30 tabs / 30 days); MAIL
TRINATAL RX TAB 1	Tier 2	QL (30 tabs / 30 days)
VINATE II TAB	Tier 2	QL (30 tabs / 30 days); MAIL
VINATE M TAB	Tier 2	QL (30 tabs / 30 days); MAIL
VIRT-ADVANCE TAB 90-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
VIRT-VITE GT TAB 90-1MG	Tier 1	QL (30 tabs / 30 days); MAIL
VITAFOL-OB TAB 65-1MG	Tier 2	QL (30 tabs / 30 days); MAIL
YOUR LIFE CAP PRENATAL	Tier 2	OTC, QL (30 caps / 30 days); MAIL
Ped MV w/ Fluoride		
mult vit-bet chw fl0.25mg	Tier 1	QL (30 tabs / 30 days); MAIL
mult-vit/fl chw 0.5mg	Tier 1	QL (30 tabs / 30 days); MAIL
multi vit/fl chw 1mg	Tier 1	QL (60 tabs / 30 days); MAIL
multi-vit/fl dro 0.5mg/ml	Tier 1	QL (100 mL / 59 days); MAIL
multi-vit/fl dro 0.25mg	Tier 1	QL (100 mL / 59 days); MAIL
multivit/fl chw 0.5mg	Tier 1	QL (30 tabs / 30 days); MAIL
multivit/fl chw 0.25mg	Tier 1	QL (30 tabs / 30 days); MAIL
multivit/fl chw 1mg	Tier 1	QL (60 tabs / 30 days); MAIL
mvc-fluoride chw 0.5mg	Tier 1	QL (30 tabs / 30 days); MAIL
mvc-fluoride chw 0.25mg	Tier 1	QL (30 tabs / 30 days); MAIL
mvc-fluoride chw 1mg	Tier 1	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
tri-vit/fl dro 0.5mg	Tier 1	QL (50.1 mL / 30 days); MAIL
tri-vit/fl dro 0.25mg	Tier 1	QL (60 mL / 30 days); MAIL
tri-vit/fluo dro 0.5mg	Tier 1	QL (50.1 mL / 30 days); MAIL
tri-vit/fluo dro 0.25mg	Tier 1	QL (60 mL / 30 days); MAIL
vit a/c/d/fl dro 0.25mg	Tier 1	QL (60 mL / 30 days); MAIL
Ped MV w/ Iron		
animal shape chw /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
bite-a-mins chw /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
child chew chw iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
child multiv chw iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
childrens chw /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
chld vitamin chw iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
flnston plus chw iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
fruity chews chw /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
land bfr tim chw vit/iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
little anima chw plus fe	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
poly-vita dro /iron	Tier 1	OTC; MAIL
poly-vitamin dro /iron	Tier 1	OTC; MAIL
poly-vite sol /iron	Tier 1	OTC; MAIL
polyvitamin dro /iron	Tier 1	OTC; MAIL
qc childrens chw iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ra child vit chw /iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vite/iron chw children	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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MED - Max 90 mg Morphine EQ Dose Per Day
Tier 1 = Generics; Low cost preferred brand
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Tier 3 = Non-preferred brand name drugs; **Tier 4** = Specialty Drugs
PREV = Preventative Services at $0 copay; **DME** = Coinsurance may apply

Drug Name	Drug Tier	Requirements/Limits
zoo friends chw pls iron	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
Ped Multi Vitamins w/Fl FE		
multi-vit/fe dro /fl 0.25	Tier 1	QL (100 mL / 59 days); MAIL
multi-vit/fl dro /fe 0.25	Tier 1	QL (100 mL / 59 days); MAIL
tri-vit/fe dro /fl 0.25	Tier 1	QL (60 mL / 30 days); MAIL
Ped Multiple Vitamins w/ Minerals		
animal shape chw complete	Tier 1	OTC; MAIL
aquadeks dro	Tier 1	OTC; MAIL
centrum kids chw complete	Tier 1	OTC; MAIL
cerovite jr chw	Tier 1	OTC; MAIL
child vitami chw	Tier 1	OTC; MAIL
childrens chw complete	Tier 1	OTC; MAIL
childrens chw gummies	Tier 1	OTC; MAIL
childrens chw multivit	Tier 1	OTC; MAIL
chld mltivit chw /mineral	Tier 1	OTC; MAIL
compl multiv chw childrns	Tier 1	OTC; MAIL
cvs children chw complete	Tier 1	OTC; MAIL
disney cars chw gummies	Tier 1	OTC; MAIL
eq multivita chw gummies	Tier 1	OTC; MAIL
flintstones chw bone bld	Tier 1	OTC; MAIL
flintstones chw complete	Tier 1	OTC; MAIL
gnp zoochews chw gummies	Tier 1	OTC; MAIL
gummi bear chw multivit	Tier 1	OTC; MAIL
gummies chw	Tier 1	OTC; MAIL
gummy dinos chw	Tier 1	OTC; MAIL
gummy vit/ chw minerals	Tier 1	OTC; MAIL
hm animal chw shapes	Tier 1	OTC; MAIL
mvw complete chw orange	Tier 1	OTC; MAIL
polyvitamin chw /iron	Tier 1	OTC; MAIL
princess chw gummies	Tier 1	OTC; MAIL
qc childrens chw complete	Tier 1	OTC; MAIL
sea buddies chw dly mult	Tier 1	OTC; MAIL
sm animal sh chw complete	Tier 1	OTC; MAIL
ultra choice chw kids	Tier 1	OTC; MAIL
vitamax ped dro	Tier 1	MAIL
zoo friends chw	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
Pediatric Multiple Vitamins		
animal chews chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
animal shape chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
bite-a-mins chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
bounty bears chw /c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
chewabl vite chw childrns	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
child chew chw vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
child chew/ chw extra c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
children vit chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
childrens chw multivit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
childrens chw vitamins	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
dino-life chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
dino-life chw extra c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
flintstones chw extra c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
flintstones chw my first	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
flintstones chw omega-3	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
flintstones chw pls calc	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
fruity chews chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp animal chw plus c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp animal chw shapes	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
gnp little chw ones	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
land bfr tim chw vit/c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
little chw animals	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
pediavit liq	Tier 1	OTC, QL (30 mL / 30 days); MAIL
poly vitamin chw	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
poly-vita dro	Tier 1	OTC; MAIL
poly-vite dro	Tier 1	OTC; MAIL
polyvitamin dro	Tier 1	OTC; MAIL
qc childrens chw extra c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
sm animal chw shapes	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
zoo friends chw extra c	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
zoo friends chw gummies	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
Pediatric Vitamins		
tri-vita sol	Tier 1	OTC, QL (100 mL / 59 days); MAIL
Prenatal Vitamins		
inatal gt tab	Tier 1	QL (30 tabs / 30 days); MAIL
MISSION PREN TAB /FA	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
MISSION PREN TAB HP	Tier 2	OTC, QL (30 tabs / 30 days); MAIL
PRE-NATAL TAB FORMULA	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
prenatal 19 tab	Tier 1	QL (30 tabs / 30 days); MAIL
PRENATAL TAB	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB COMPLETE	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL TAB FORTE	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
PRENATAL/FE TAB	Tier 1	OTC, QL (30 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
triadvance tab	Tier 1	QL (30 tabs / 30 days); MAIL
trinate tab	Tier 1	QL (30 tabs / 30 days); MAIL
MUSCULOSKELETAL THERAPY AGENTS		
Central Muscle Relaxants		
baclofen tab 10 mg	Tier 1	QL (90 tabs / 30 days); MAIL
baclofen tab 20 mg	Tier 1	QL (120 tabs / 30 days); MAIL
carisoprodol tab 350 mg	Tier 1	QL (120 ea / 30 days), PA; AGE; Covered for ages 18-64
chlorzoxazone tab 500 mg	Tier 1	QL (180 tabs / 30 days); MAIL
cyclobenzaprine hcl tab 5 mg	Tier 1	QL (90 tabs / 30 days); MAIL
cyclobenzaprine hcl tab 10 mg	Tier 1	QL (90 tabs / 30 days); MAIL
metaxall tab 800mg	Tier 2	QL (300 tabs / 30 days), PA; AGE; MAIL; Covered for ages 64 and over
methocarbamol tab 500 mg	Tier 1	QL (180 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
methocarbamol tab 750 mg	Tier 1	QL (300 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
orphenadrine citrate tab er 12hr 100 mg	Tier 1	QL (60 tabs / 30 days); MAIL
tizanidine hcl tab 2 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
tizanidine hcl tab 4 mg (base equivalent)	Tier 1	QL (90 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
Direct Muscle Relaxants		
dantrolene sodium cap 25 mg	Tier 1	QL (240 caps / 30 days); MAIL
dantrolene sodium cap 50 mg	Tier 1	QL (240 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
dantrolene sodium cap 100 mg	Tier 1	QL (240 caps / 30 days); MAIL
Viscosupplements		
EUFLEXXA INJ 10MG/ML	Tier 4	QL (3 syringes / 180 days), PA
NASAL AGENTS - SYSTEMIC AND TOPICAL		
Nasal Agents - Misc.		
afrin saline spr 0.65%	Tier 1	OTC; MAIL
altamist spr 0.65%	Tier 1	OTC; MAIL
ayr spr 0.65%	Tier 1	OTC; MAIL
baby ayr spr 0.65%	Tier 1	OTC; MAIL
deep sea spr 0.65%	Tier 1	OTC; MAIL
hm saline spr 0.65%	Tier 1	OTC; MAIL
humist spr 0.65%	Tier 1	OTC; MAIL
little noses dro stuf nos	Tier 1	OTC; MAIL
little noses spr 0.65%	Tier 1	OTC; MAIL
na-zone spr 0.65%	Tier 1	OTC; MAIL
nasal moist spr 0.65%	Tier 1	OTC; MAIL
nasal saline spr 0.65%	Tier 1	OTC; MAIL
ocean kids spr 0.65%	Tier 1	OTC; MAIL
saline mist spr 0.65%	Tier 1	OTC; MAIL
saline nasal spr 0.65%	Tier 1	OTC; MAIL
saline nose spr 0.65%	Tier 1	OTC; MAIL
sb saline spr 0.65%	Tier 1	OTC; MAIL
tgt nasal spr 0.65%	Tier 1	OTC; MAIL
Nasal Anti-infectives		
BACTROBAN OIN NASAL 2%	Tier 2	QL (10 gm / 25 days), PA; MAIL
Nasal Antiallergy		
azelastine hcl nasal spray 0.1% (137 mcg/spray)	Tier 1	QL (1 bottle / 25 days); MAIL
cromolyn sodium nasal aerosol soln 5.2 mg/act (4%)	Tier 1	OTC, QL (52 mL / 25 days); MAIL
olopatadine hcl nasal soln 0.6%	Tier 2	QL (1 bottle / 25 days); MAIL
Nasal Anticholinergics		
ipratropium bromide nasal soln 0.03% (21 mcg/spray)	Tier 1	QL (30 mL / 25 days); MAIL
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	Tier 1	QL (15 mL / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
Nasal Steroids		
flunisolide nasal soln 25 mcg/act (0.025%)	Tier 1	QL (1 bottle / 25 days); MAIL; Covered for ages 6 and over
flunisolide nasal soln 29 mcg/act (0.025%)	Tier 1	QL (25 mL / 25 days); MAIL; Covered for ages 6 and over
fluticasone propionate nasal susp 50 mcg/act	Tier 1	QL (1 bottle / 25 days); MAIL; Covered for ages 4 and over
triamcinolone acetonide nasal aerosol suspension 55 mcg/act	Tier 1	MAIL
Sympathomimetic Decongestants		
child silfed liq 15mg/5ml	Tier 1	OTC; MAIL
decongestant tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
decongestant tab 120mg er	Tier 1	OTC; MAIL
eq suphedrin tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
eq suphedrin tab 120mg cr	Tier 1	OTC; MAIL
genaphed tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
gnp suphedrn liq 15mg/5ml	Tier 1	OTC; MAIL
nasal decon syp 30mg/5ml	Tier 1	OTC, QL (1200 mL / 30 days); MAIL
nasal decong liq 30mg/5ml	Tier 1	OTC; MAIL
nasal decong tab 10mg	Tier 1	OTC; MAIL
nasal decong tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
nasal decong tab 120mg er	Tier 1	OTC; MAIL
nasal spr 0.05%	Tier 1	OTC; MAIL
non-pseudo tab 10mg	Tier 1	OTC; MAIL
pseudoephedr tab 60mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
pseudoephedr tab 120mg er	Tier 1	OTC; MAIL
pseudoephedrine hcl syrup 30 mg/5ml	Tier 1	OTC, QL (1200 mL / 30 days); MAIL
pseudoephedrine hcl tab 30 mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
qc suphedrin tab 120mg sr	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
ra suphedrin tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
ra suphedrin tab 120mg cr	Tier 1	OTC; MAIL
sinus/conges tab 10mg	Tier 1	OTC; MAIL
sm nasal dec tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
sudafed 12hr tab 120mg cr	Tier 1	OTC; MAIL
SUDAFED PE SOL CHILDREN	Tier 1	OTC; MAIL
sudogest pe tab 10mg	Tier 1	OTC; MAIL
sudogest tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
sudogest tab 60mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
sudogest tab 120mg er	Tier 1	OTC; MAIL
suphedrin tab 120mg er	Tier 1	OTC; MAIL
suphedrine tab 10mg	Tier 1	OTC; MAIL
suphedrine tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
suphedrine tab pe 10mg	Tier 1	OTC; MAIL
sw nasal dec tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
TYZINE PED DRO 0.05%	Tier 3	MAIL
TYZINE SOL 0.1%	Tier 3	MAIL
unifed liq 30mg/5ml	Tier 1	OTC; MAIL
wal-phed d tab 120mg	Tier 1	OTC; MAIL
wal-phed pe tab 10mg	Tier 1	OTC; MAIL
wal-phed tab 30mg	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
NEUROMUSCULAR AGENTS		
ALS Agents		
riluzole tab 50 mg	Tier 2	QL (60 tabs / 30 days), PA; MAIL
NUTRIENTS		
Misc. Nutritional Substances		
kp omega-3 cap 1200mg	Tier 1	OTC; MAIL
omega 3 500 cap 500mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
omega iii cap epa+dha	Tier 1	OTC, QL (180 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
omega-3 cap 1200mg	Tier 1	OTC, QL (180 caps / 30 days); MAIL
omega-3 fish cap 1000mg	Tier 1	OTC; MAIL
omega-3 fish cap 1200mg	Tier 1	OTC; MAIL
ra fish oil cap 1000mg	Tier 1	OTC; MAIL
OPHTHALMIC AGENTS		
Artificial Tears and Lubricants		
akwa tears oin op	Tier 1	OTC; MAIL
altalube oin	Tier 1	OTC; MAIL
artifi tears dro	Tier 1	OTC; MAIL
artifi tears dro 1-0.3%	Tier 1	OTC; MAIL
artifi tears oin op	Tier 1	OTC; MAIL
artificial dro tears	Tier 1	OTC; MAIL
artificial sol tears	Tier 1	OTC; MAIL
artificial sol tears op	Tier 1	OTC; MAIL
bion tears sol op	Tier 1	OTC; MAIL
clear eyes dro 0.5-0.6%	Tier 1	OTC; MAIL
cvs dry eye dro relief	Tier 1	OTC; MAIL
cvs lubricnt dro 0.5% op	Tier 1	OTC; MAIL
cvs natural sol tears	Tier 1	OTC; MAIL
eq gentle dro 0.3%	Tier 1	OTC; MAIL
eq lubricant dro eye drop	Tier 1	OTC; MAIL
eq revive pl dro 0.5% op	Tier 1	OTC; MAIL
eye lubrican oin op	Tier 1	OTC; MAIL
for sty reli oin	Tier 1	OTC; MAIL
genteal tear oin nt-time	Tier 1	OTC; MAIL
gnp eye drop sol 0.5% op	Tier 1	OTC; MAIL
hm dry eye sol relief	Tier 1	OTC; MAIL
hypotears oin op	Tier 1	OTC; MAIL
just tears sol eye drop	Tier 1	OTC; MAIL
LACRISERT MIS 5MG OP	Tier 3	PA; MAIL
liquitears sol	Tier 1	OTC; MAIL
lubricant dro 0.4-0.3%	Tier 1	OTC; MAIL
lubricant dro eye	Tier 1	OTC; MAIL
lubricant oin eye	Tier 1	OTC; MAIL
lubricating dro 0.5%	Tier 1	OTC; MAIL
lubricnt eye dro	Tier 1	OTC; MAIL
lubricnt eye dro 0.4-0.3%	Tier 1	OTC; MAIL
lubricnt eye dro 0.5% op	Tier 1	OTC; MAIL
lubricnt eye oin fast act	Tier 1	OTC; MAIL

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Drug Name	Drug Tier	Requirements/Limits
murine tears dro dry eyes	Tier 1	OTC; MAIL
polyvinyl alcohol ophth soln 1.4%	Tier 1	OTC; MAIL
puralube oin	Tier 1	OTC; MAIL
pure & gentl dro 0.3%	Tier 1	OTC; MAIL
ra lubricant dro 0.4-0.3%	Tier 1	OTC; MAIL
refresh lacr oin op	Tier 1	OTC; MAIL
refresh p.m. oin op	Tier 1	OTC; MAIL
retaine cmc sol 0.5% op	Tier 1	OTC; MAIL
revive tears dro 0.5% op	Tier 1	OTC; MAIL
sm artificia sol tears	Tier 1	OTC; MAIL
sm dry eye sol relief	Tier 1	OTC; MAIL
soothe dro hydratio	Tier 1	OTC; MAIL
soothe night oin op	Tier 1	OTC; MAIL
soothe xp dro	Tier 1	OTC; MAIL
stye oin	Tier 1	OTC; MAIL
systane dro contacts	Tier 1	OTC; MAIL
systane oin	Tier 1	OTC; MAIL
tears again dro 1.4%	Tier 1	OTC; MAIL
tears again oin op	Tier 1	OTC; MAIL
tears again sol adv eye	Tier 1	OTC; MAIL
tears pure sol	Tier 1	OTC; MAIL
tgt lubricnt dro eye	Tier 1	OTC; MAIL
tgt lubricnt oin eye nite	Tier 1	OTC; MAIL
ultra fresh dro 0.5% op	Tier 1	OTC; MAIL
ultra fresh oin pm	Tier 1	OTC; MAIL
Beta-blockers - Ophthalmic		
betaxolol hcl ophth soln 0.5%	Tier 1	MAIL
carteolol hcl ophth soln 1%	Tier 1	QL (720 mL / 30 days); MAIL
COMBIGAN SOL 0.2/0.5%	Tier 2	MAIL
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml	Tier 1	QL (Max day supply 28); MAIL
levobunolol hcl ophth soln 0.5%	Tier 1	QL (720 mL / 30 days); MAIL
levobunolol hcl ophth soln 0.25%	Tier 1	QL (720 mL / 30 days); MAIL
metipranolol ophth soln 0.3%	Tier 1	MAIL
timolol maleate ophth gel forming soln 0.5%	Tier 2	QL (30 mL / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
timolol maleate ophth gel forming soln 0.25%	Tier 2	MAIL
timolol maleate ophth soln 0.5%	Tier 1	QL (60 mL / 30 days); MAIL
timolol maleate ophth soln 0.25%	Tier 1	MAIL
Cycloplegic Mydriatics		
atropine sul sol 1% op	Tier 1	QL (900 mL / 30 days); MAIL
tropicamide ophth soln 0.5%	Tier 1	MAIL
tropicamide ophth soln 1%	Tier 1	MAIL
Miotics		
PHOSPHOLINE SOL 0.125%OP	Tier 2	MAIL
pilocarpine hcl ophth soln 1%	Tier 1	MAIL
pilocarpine hcl ophth soln 2%	Tier 1	MAIL
pilocarpine hcl ophth soln 4%	Tier 1	MAIL
OPHTHALMICS - MISC.		
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	Tier 2	MAIL
Ophthalmic Adrenergic Agents		
apraclonidine hcl ophth soln 0.5% (base equivalent)	Tier 1	MAIL
brimonidine tartrate ophth soln 0.2%	Tier 2	MAIL
brimonidine tartrate ophth soln 0.15%	Tier 2	QL (60 mL / 30 days); MAIL
SIMBRINZA SUS 1-0.2%	Tier 3	PA; MAIL
Ophthalmic Anti-infectives		
ak-poly-bac oin op	Tier 1	MAIL
AZASITE SOL 1%	Tier 3	PA; MAIL
bacitracin ophth oint 500 unit/gm	Tier 1	MAIL
bacitracin-polymyxin b ophth oint	Tier 1	MAIL
BESIVANCE SUS 0.6%	Tier 3	PA
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	Tier 1	QL (60 mL / 30 days)
erythromycin ophth oint 5 mg/gm	Tier 1	MAIL
gatifloxacin ophth soln 0.5%	Tier 1	PA
gentak oin 0.3% op	Tier 1	MAIL
gentamicin sulfate ophth oint 0.3%	Tier 1	MAIL
gentamicin sulfate ophth soln 0.3%	Tier 1	QL (5 mL / 25 days); MAIL
levofloxacin ophth soln 0.5%	Tier 1	

Drug Name	Drug Tier	Requirements/Limits
moxifloxacin hcl ophth soln 0.5% (base equiv)	Tier 1	QL (3 mL / 7 days), PA
NATACYN SUS 5% OP	Tier 3	PA; MAIL
neo-polycin oin op	Tier 1	MAIL
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	Tier 1	MAIL
neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	Tier 1	MAIL
ofloxacin ophth soln 0.3%	Tier 1	QL (5 mL / 25 days)
polycin oin op	Tier 1	MAIL
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	Tier 1	QL (10 mL / 25 days); MAIL
sulfacetamide sodium ophth soln 10%	Tier 1	QL (15 mL / 25 days); MAIL
tobramycin ophth soln 0.3%	Tier 1	QL (5 mL / 25 days); MAIL
trifluridine ophth soln 1%	Tier 2	QL (720 mL / 30 days); MAIL
ZIRGAN GEL 0.15%	Tier 3	PA; MAIL
Ophthalmic Decongestants		
naphazoline hcl ophth soln 0.1%	Tier 1	MAIL
Ophthalmic Local Anesthetics		
proparacaine hcl ophth soln 0.5%	Tier 1	MAIL
Ophthalmic Steroids		
ALREX SUS 0.2%	Tier 3	PA; MAIL
bacitracin-polymyxin-neomycin-hc ophth oint 1%	Tier 1	MAIL
dexamethasone sodium phosphate ophth soln 0.1%	Tier 1	MAIL
DUREZOL EMU 0.05%	Tier 3	PA; MAIL
fluorometholone ophth susp 0.1%	Tier 1	QL (15 mL / 25 days); MAIL
LOTEMAX GEL 0.5%	Tier 3	PA; MAIL
LOTEMAX OIN 0.5%	Tier 3	PA; MAIL
LOTEMAX SUS 0.5%	Tier 3	PA; MAIL
neo-polycin oin hc 1%op	Tier 1	MAIL
neomycin-polymyxin-dexamethasone ophth oint 0.1%	Tier 1	MAIL
neomycin-polymyxin-dexamethasone ophth susp 0.1%	Tier 1	MAIL
prednisolone acetate ophth susp 1%	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	Tier 1	MAIL
TOBRADEX OIN 0.3-0.1%	Tier 2	MAIL
tobramycin-dexamethasone ophth susp 0.3-0.1%	Tier 2	QL (10 mL / 25 days); MAIL
VEXOL SUS 1% OP	Tier 2	MAIL
Ophthalmics - Misc.		
alaway child dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
alaway dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
allergy eye dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
ALOCRIL SOL 2%	Tier 3	PA; MAIL
ALOMIDE SOL 0.1% OP	Tier 3	PA; MAIL
altachlore oin 5% op	Tier 1	OTC; MAIL
altachlore sol 5% op	Tier 1	OTC; MAIL
antihistamin dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
azelastine hcl ophth soln 0.05%	Tier 1	PA; MAIL
AZOPT SUS 1% OP	Tier 2	MAIL
BEPREVE DRO 1.5%	Tier 3	PA; MAIL
bromfenac sodium ophth soln 0.09% (base equivalent)	Tier 2	MAIL
claritin eye dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
cromolyn sodium ophth soln 4%	Tier 1	QL (60 mL / 30 days); MAIL
cvs allergy dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
CYSTARAN SOL 0.44%	Tier 3	PA; MAIL
diclofenac sodium ophth soln 0.1%	Tier 1	QL (60 mL / 30 days); MAIL
dorzolamide hcl ophth soln 2%	Tier 1	QL (60 mL / 30 days); MAIL
EMADINE SOL 0.05% OP	Tier 3	PA; MAIL
epinastine hcl ophth soln 0.05%	Tier 1	PA; MAIL
eq itchy eye dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
eye itch rel dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
flurbiprofen sodium ophth soln 0.03%	Tier 1	MAIL
itchy eye dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
JETREA INJ 2.5MG/ML	Tier 4	PA
ketorolac tromethamine ophth soln 0.4%	Tier 1	QL (60 mL / 30 days); MAIL
ketorolac tromethamine ophth soln 0.5%	Tier 1	QL (60 mL / 30 days); MAIL
ketotif fum dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
ketotifen fumarate ophth soln 0.025% (base equiv)	Tier 1	OTC, QL (5 mL / 25 days); MAIL
LASTACAFT SOL 0.25%	Tier 3	PA; MAIL
NEVANAC SUS 0.1%	Tier 3	PA; MAIL
olopatadine hcl ophth soln 0.1% (base equivalent)	Tier 2	QL (5 mL / 25 days), PA; MAIL
olopatadine hcl ophth soln 0.2% (base equivalent)	Tier 2	PA; MAIL
sochlor sol 5% op	Tier 1	OTC; MAIL
sodium chloride hypertonic ophth oint 5%	Tier 1	OTC; MAIL
sodium chloride hypertonic ophth soln 5%	Tier 1	OTC; MAIL
wal-zyr dro 0.025%op	Tier 1	OTC, QL (5 mL / 25 days); MAIL
Prostaglandins - Ophthalmic		
bimatoprost ophth soln 0.03%	Tier 2	QL (30 mL / 30 days); MAIL
latanoprost ophth soln 0.005%	Tier 1	QL (720 mL / 30 days); MAIL
LUMIGAN SOL 0.01%	Tier 3	ST; MAIL; Prior use of Travatan Z AND Bimatoprost 0.03% for 30 days.
LUMIGAN SOL 0.03%	Tier 3	QL (30 mL / 30 days), ST; MAIL; Prior use of Latanoprost 0.005%
TRAVATAN Z DRO 0.004%	Tier 2	QL (720 mL / 30 days), ST; MAIL; Prior use of Bimatoprost 0.03% for 30 days
travoprost ophth soln 0.004%	Tier 1	QL (720 mL / 30 days), ST; MAIL; PRIOR USE BIMATOPROST

Drug Name	Drug Tier	Requirements/Limits
ZIOPTAN DRO 0.0015%	Tier 2	ST; MAIL; Prior use of Travatan Z AND Bimatoprost 0.03% for 30 days.
OPHTHALMIC IMMUNOMODULATORS		
OPHTHALMIC IMMUNOMODULATORS		
RESTASIS EMU 0.05%	Tier 3	PA; MAIL
OREXIN RECEPTOR ANTAGONISTS		
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA TAB 5MG	Tier 3	QL (30 ea / 30 days), PA
BELSOMRA TAB 10MG	Tier 3	QL (30 ea / 30 days), PA
BELSOMRA TAB 15MG	Tier 3	QL (30 ea / 30 days), PA
BELSOMRA TAB 20MG	Tier 3	QL (30 ea / 30 days), PA
OTIC AGENTS		
Otic Agents - Miscellaneous		
acetic acid otic soln 2%	Tier 1	QL (20 mL / 25 days); MAIL
auraphene-b sol 6.5% ot	Tier 1	OTC; MAIL
cvs ear dro 6.5% ot	Tier 1	OTC; MAIL
e-r-o ear dro 6.5% ot	Tier 1	OTC; MAIL
ear drops sol 6.5% ot	Tier 1	OTC; MAIL
ear drying dro 95-5%	Tier 1	OTC; MAIL
ear wax kit sol 6.5% ot	Tier 1	OTC; MAIL
ear wax remv dro 6.5% ot	Tier 1	OTC; MAIL
ear wax remv sol 6.5% ot	Tier 1	OTC; MAIL
earwax remv sol 6.5% ot	Tier 1	OTC; MAIL
earwax trmnt dro 6.5% ot	Tier 1	OTC; MAIL
eq ear wax sol removal	Tier 1	OTC; MAIL
ero ear wax sol removal	Tier 1	OTC; MAIL
gnp ear dro 6.5% ot	Tier 1	OTC; MAIL
gnp ear sys sol 6.5% ot	Tier 1	OTC; MAIL
inst ear-dry dro 95-5%	Tier 1	OTC; MAIL
murine ear dro 6.5% ot	Tier 1	OTC; MAIL
murine ear sol 6.5% ot	Tier 1	OTC; MAIL
otix sol 6.5% ot	Tier 1	OTC; MAIL
ra ear dro 6.5% ot	Tier 1	OTC; MAIL
sm ear dro 6.5% ot	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
Otic Anti-infectives		
ciprofloxacin hcl otic soln 0.2% (base equivalent)	Tier 1	QL (14 ea / 7 days)
ofloxacin otic soln 0.3%	Tier 1	QL (5 mL / 30 days)
Otic Combinations		
antipyrine-benzocaine otic soln 54-14 mg/ml (5.4-1.4%)	Tier 1	MAIL
aurodex sol otic	Tier 1	MAIL
CIPRO HC SUS OTIC	Tier 3	PA
CIPRODEX SUS 0.3-0.1%	Tier 3	QL (7.5 mL / year), PA
COLY-MYCIN S SUS OTIC	Tier 3	MAIL
neomycin-polymyxin-hc otic soln 1%	Tier 1	MAIL
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	Tier 1	QL (300 mL / 30 days); MAIL
Otic Steroids		
acetasol hc sol otic	Tier 1	MAIL
fluocinolone acetonide (otic) oil 0.01%	Tier 2	MAIL
hydrocortisone w/ acetic acid otic soln 1-2%	Tier 1	MAIL
OXYTOCICS		
Oxytocics		
methergine tab 0.2mg	Tier 2	QL (210 tabs / 30 days); MAIL
PASSIVE IMMUNIZING AGENTS		
Immune Serums		
CARIMUNE NF INJ 12GM	Tier 4	PA
FLEBOGAMMA INJ 20/200ML	Tier 4	QL (3 vials / 25 days), PA
FLEBOGAMMA INJ DIF 5%	Tier 4	PA
GAMASTAN INJ	Tier 4	PA
GAMASTAN S/D INJ	Tier 4	PA
GAMMAGARD INJ 1GM/10ML	Tier 4	PA
GAMMAGARD SD INJ 10GM HU	Tier 4	PA
GAMMAKED INJ 1GM/10ML	Tier 4	PA
GAMMAPLEX INJ 5%	Tier 4	PA
GAMUNEX-C INJ 1GM/10ML	Tier 4	PA
HIZENTRA INJ 2GM/10ML	Tier 4	PA
MICRHOGAM PL INJ 50MCG	Tier 2	
OCTAGAM INJ 5GM	Tier 4	PA

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Drug Name	Drug Tier	Requirements/Limits
PRIVIGEN INJ 20GRAMS	Tier 4	QL (3 vials / 25 days), PA
RHOGAM PLUS INJ 300MCG	Tier 2	
RHOPHYLAC INJ 1500/2ML	Tier 2	
Monoclonal Antibodies		
SYNAGIS INJ 50MG	Tier 4	PA
SYNAGIS INJ 100MG/ML	Tier 4	PA
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA INJ 2.5-200	Tier 4	PA
HYQVIA INJ 5-400	Tier 4	PA
HYQVIA INJ 10-800	Tier 4	PA
HYQVIA INJ 20-1600	Tier 4	PA
HYQVIA INJ 30-2400	Tier 4	PA
PENICILLINS		
Aminopenicillins		
amoxicillin (trihydrate) cap 250 mg	Tier 1	QL (240 caps / 30 days)
amoxicillin (trihydrate) cap 500 mg	Tier 1	QL (240 caps / 30 days)
amoxicillin (trihydrate) chew tab 125 mg	Tier 1	QL (180 tabs / 30 days)
amoxicillin (trihydrate) chew tab 250 mg	Tier 1	QL (240 tabs / 30 days)
amoxicillin (trihydrate) for susp 125 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 200 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 250 mg/5ml	Tier 1	
amoxicillin (trihydrate) for susp 400 mg/5ml	Tier 1	
amoxicillin (trihydrate) tab 500 mg	Tier 1	QL (150 tabs / 30 days)
amoxicillin (trihydrate) tab 875 mg	Tier 1	QL (120 tabs / 30 days)
ampicillin cap 250 mg	Tier 1	QL (240 caps / 30 days)
ampicillin cap 500 mg	Tier 1	QL (240 caps / 30 days)
ampicillin for susp 125 mg/5ml	Tier 1	QL (900 mL / 30 days); Covered for ages 12 and over
ampicillin for susp 250 mg/5ml	Tier 1	QL (900 mL / 30 days); Covered for ages 12 and over
Natural Penicillins		
penicillin v potassium for soln 125 mg/5ml	Tier 1	QL (1200 mL / 30 days)

Drug Name	Drug Tier	Requirements/Limits
penicillin v potassium for soln 250 mg/5ml	Tier 1	QL (1200 mL / 30 days)
penicillin v potassium tab 250 mg	Tier 1	QL (240 tabs / 30 days)
penicillin v potassium tab 500 mg	Tier 1	QL (240 tabs / 30 days)
Penicillin Combinations		
amoxicillin & k clavulanate chew tab 200-28.5 mg	Tier 1	QL (90 tabs / 30 days); AGE; Covered for ages 12 and over
amoxicillin & k clavulanate chew tab 400-57 mg	Tier 1	QL (120 tabs / 30 days); AGE; Covered for ages 12 and over
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml	Tier 1	AGE; Covered for ages 12 and over
amoxicillin & k clavulanate for susp 250-62.5 mg/5ml	Tier 1	QL (150 mL / 30 days); AGE; Covered for ages 12 and over
amoxicillin & k clavulanate for susp 400-57 mg/5ml	Tier 1	AGE; Covered for ages 12 and over
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	Tier 1	AGE; Covered for ages 12 and over
amoxicillin & k clavulanate tab 250-125 mg	Tier 1	QL (Max day supply 10)
amoxicillin & k clavulanate tab 500-125 mg	Tier 1	QL (Max day supply 10)
amoxicillin & k clavulanate tab 875-125 mg	Tier 1	QL (Max day supply 10)
AUGMENTIN SUS 125/5ML	Tier 3	QL (150 mL / 30 days); AGE; Covered for ages 12 and over
Penicillinase-Resistant Penicillins		
dicloxacillin sodium cap 250 mg	Tier 1	QL (240 caps / 30 days)
dicloxacillin sodium cap 500 mg	Tier 1	QL (180 caps / 30 days)
PHARMACEUTICAL ADJUVANTS		
ANTIMICROBIAL AGENTS		
BENZYL ALC LIQ	Tier 2	Covered for ages 16-60
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA TAB 10/20/30	Tier 4	PA; Preferred Brand
OTEZLA TAB 30MG	Tier 4	PA; Preferred Brand
PRENATAL VITAMINS		
PRENATAL MV & MIN W/FE-FA		
PRENATAL MUL CAP +DHA	Tier 1	OTC, QL (30 caps / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
PRENATAL MV & MIN W/FE-FA-DHA		
PRENATAL MV MIS + DHA	Tier 1	OTC, QL (60 boxes / 30 days); MAIL
PROGESTINS		
PROGESTINS		
hydroxyprogesterone caproate im in oil 250 mg/ml	Tier 4	PA
Progestins		
medroxyprogesterone acetate tab 2.5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
medroxyprogesterone acetate tab 5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
medroxyprogesterone acetate tab 10 mg	Tier 1	QL (60 tabs / 30 days); MAIL
norethindrone acetate tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
progesterone micronized cap 100 mg	Tier 1	QL (30 caps / 30 days); MAIL
progesterone micronized cap 200 mg	Tier 1	QL (60 caps / 30 days); MAIL
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PCSK9 INHIBITORS		
REPATHA INJ 140MG/ML	Tier 4	QL (2 syringes / 24 days), PA
REPATHA PUSH INJ 420/3.5	Tier 4	QL (1 cartridge / 24 days), PA
REPATHA SURE INJ 140MG/ML	Tier 4	QL (2 pens / 24 days), PA
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
Agents for Chemical Dependency		
acamprosate calcium tab delayed release 333 mg	Tier 2	MAIL
disulfiram tab 250 mg	Tier 1	QL (30 tabs / 30 days); MAIL
disulfiram tab 500 mg	Tier 1	QL (30 tabs / 30 days); MAIL
Anti-Cataplectic Agents		
XYREM SOL 500MG/ML	Tier 3	PA

Drug Name	Drug Tier	Requirements/Limits
Antidementia Agents		
donepezil hydrochloride orally disintegrating tab 5 mg	Tier 1	QL (60 tabs / 30 days); MAIL
donepezil hydrochloride orally disintegrating tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
donepezil hydrochloride tab 5 mg	Tier 1	QL (30 tabs / 30 days); MAIL
donepezil hydrochloride tab 10 mg	Tier 1	QL (30 tabs / 30 days); MAIL
galantamine hydrobromide cap er 24hr 8 mg	Tier 1	QL (90 caps / 30 days); MAIL
galantamine hydrobromide cap er 24hr 24 mg	Tier 1	QL (30 caps / 30 days); MAIL
galantamine hydrobromide tab 4 mg	Tier 1	QL (180 tabs / 30 days); MAIL
galantamine hydrobromide tab 8 mg	Tier 1	QL (60 tabs / 30 days); MAIL
galantamine hydrobromide tab 12 mg	Tier 1	QL (60 tabs / 30 days); MAIL
memantine hcl cap er 24hr 7 mg	Tier 2	PA; MAIL
memantine hcl cap er 24hr 14 mg	Tier 2	PA; MAIL
memantine hcl cap er 24hr 21 mg	Tier 2	PA; MAIL
memantine hcl cap er 24hr 28 mg	Tier 2	PA; MAIL
memantine hcl oral solution 2 mg/ml	Tier 2	MAIL
memantine hcl tab 5 mg	Tier 2	QL (120 tabs / 30 days); MAIL
memantine hcl tab 5 mg (28) & 10 mg (21) titration pak	Tier 2	MAIL
memantine hcl tab 10 mg	Tier 2	QL (60 tabs / 30 days); MAIL
NAMENDA XR CAP 7MG	Tier 3	PA; MAIL
NAMENDA XR CAP 14MG	Tier 3	PA; MAIL
NAMENDA XR CAP 21MG	Tier 3	PA; MAIL
NAMENDA XR CAP 28MG	Tier 3	PA; MAIL
NAMENDA XR CAP TITRATIO	Tier 3	PA; MAIL
rivastigmine tartrate cap 1.5 mg (base equivalent)	Tier 2	MAIL
rivastigmine tartrate cap 3 mg (base equivalent)	Tier 2	MAIL
rivastigmine tartrate cap 4.5 mg (base equivalent)	Tier 2	MAIL

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Drug Name	Drug Tier	Requirements/Limits
rivastigmine tartrate cap 6 mg (base equivalent)	Tier 2	MAIL
rivastigmine td patch 24hr 4.6 mg/24hr	Tier 2	PA; MAIL
rivastigmine td patch 24hr 9.5 mg/24hr	Tier 2	PA; MAIL
rivastigmine td patch 24hr 13.3 mg/24hr	Tier 2	PA; MAIL
Fibromyalgia Agents		
SAVELLA MIS TITR PAK	Tier 3	PA; MAIL
SAVELLA TAB 12.5MG	Tier 3	PA; MAIL
SAVELLA TAB 25MG	Tier 3	PA; MAIL
SAVELLA TAB 50MG	Tier 3	PA; MAIL
SAVELLA TAB 100MG	Tier 3	PA; MAIL
MULTIPLE SCLEROSIS AGENTS		
glatiramer acetate soln prefilled syringe 40 mg/ml	Tier 4	PA
Movement Disorder Drug Therapy		
tetrabenazine tab 12.5 mg	Tier 4	PA
tetrabenazine tab 25 mg	Tier 4	PA
Multiple Sclerosis Agents		
AMPYRA TAB 10MG	Tier 4	PA
AVONEX KIT 30MCG	Tier 4	PA
AVONEX PEN KIT 30MCG	Tier 4	PA
AVONEX PREFL KIT 30MCG	Tier 4	PA
dalfampridine tab er 12hr 10 mg	Tier 4	PA
EXTAVIA INJ 0.3MG	Tier 4	PA
GILENYA CAP 0.5MG	Tier 4	PA
glatiramer acetate soln prefilled syringe 20 mg/ml	Tier 4	PA
TECFIDERA CAP 120MG	Tier 4	PA
TECFIDERA CAP 240MG	Tier 4	PA
TECFIDERA MIS STARTER	Tier 4	PA
TYSABRI INJ 300/15ML	Tier 4	PA
Pseudobulbar Affect (PBA) Agents		
NUEDEXTA CAP 20-10MG	Tier 3	PA; MAIL
Psychotherapeutic and Neurological Agents - Misc.		
ergoloid mesylates tab 1 mg	Tier 2	MAIL
pimozide tab 1 mg	Tier 1	QL (300 tabs / 30 days); MAIL
pimozide tab 2 mg	Tier 1	QL (150 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
Restless Leg Syndrome (RLS) Agents		
HORIZANT TAB 600MG ER	Tier 3	PA; MAIL
Smoking Deterrents		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	PREV	QL (60 per 30 Days; Max day supply 90 per year); MAIL
CHANTIX PAK 0.5& 1MG	PREV	QL (Max day supply 53 per year); MAIL
CHANTIX TAB 0.5MG	PREV	QL (165 tabs / year); MAIL
CHANTIX TAB 1MG	PREV	QL (165 tabs / year); MAIL
cvs nicotine dis 7mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
cvs nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
cvs nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
cvs nicotine gum 2mg cinn	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 2mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 4mg cinn	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine gum 4mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
cvs nicotine gum 4mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
cvs nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
cvs nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
cvs nts dis step 1	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
eq nicotine dis 7mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
eq nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
eq nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
eq nicotine gum 2mg cinn	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 2mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 4mg cinn	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 4mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 4mg ref	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
eq nicotine gum 4mg strt	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine gum 4mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eq nicotine loz 2mg cher	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
eq nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
eq nicotine loz 4mg chry	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
eq nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
eql nicotine gum 2mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eql nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
eql nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
eql nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
gnp nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
gnp nicotine gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
gnp nicotine gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
gnp nicotine gum 4mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
gnp nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
gnp nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
hm nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
hm nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
hm nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
hm nicotine gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
hm nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
hm nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
kls quit2 gum 2mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
kls quit4 gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicorelief gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicorelief gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicorelief gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicorelief gum 4mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
nicotine dis step 1	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
nicotine dis step 2	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
nicotine dis step 3	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicotine polacrilex gum 2 mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicotine polacrilex gum 4 mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
nicotine polacrilex lozenge 2 mg	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
nicotine polacrilex lozenge 4 mg	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
nicotine td patch 24hr 7 mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
nicotine td patch 24hr 14 mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
nicotine td patch 24hr 21 mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
NICOTROL INH	PREV	QL (480 per 30 Days); MAIL; Covered for ages 18 and over
NICOTROL NS SPR 10MG/ML	PREV	QL (30 per 30 Days); MAIL; Covered for ages 18 and over
ra nicotine dis 7mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL

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Drug Name	Drug Tier	Requirements/Limits
ra nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
ra nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
ra nicotine gum 2mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 2mg cinn	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 2mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 4mg frut	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
ra nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
ra nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
sm nicotine dis 7mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
sm nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
sm nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL

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Drug Name	Drug Tier	Requirements/Limits
sm nicotine gum 2mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
sm nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
sm nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
sm nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
stop smoking gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
stop smoking gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
stop smoking gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
stop smoking loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
stop smoking loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
sw nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
sw nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
sw nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
sw nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
tgt nicotine dis 7mg/24hr	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL

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Drug Name	Drug Tier	Requirements/Limits
tgt nicotine dis 14mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
tgt nicotine dis 21mg/24h	PREV	OTC, QL (Max day supply 90 per year; Max 1 per day); MAIL
tgt nicotine gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine gum 2mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine gum 2mgfruit	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine gum 4mg	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine gum 4mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine gum 4mg orig	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL
tgt nicotine loz 2mg chry	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
tgt nicotine loz 2mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
tgt nicotine loz 4mg chry	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
tgt nicotine loz 4mg mint	PREV	OTC, QL (1726 per Year); MAIL; Covered for ages 18 and over
thrive gum 2mg mint	PREV	OTC, QL (240 per 30 Days; Max 3 fills per 365 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI TAB 200/800	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 200MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 400MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 600MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 800MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1000MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1200MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1400MCG	Tier 4	QL (60 tabs / 30 days), PA
UPTRAVI TAB 1600MCG	Tier 4	QL (60 tabs / 30 days), PA
RESPIRATORY AGENTS - MISC.		
Cystic Fibrosis Agents		
KALYDECO PAK 50MG	Tier 4	PA
KALYDECO PAK 75MG	Tier 4	PA
KALYDECO TAB 150MG	Tier 4	PA
PULMOZYME SOL 1MG/ML	Tier 4	QL (75 mL / 30 days), PA
PULMONARY FIBROSIS AGENTS		
ESBRIET CAP 267MG	Tier 3	PA
ESBRIET TAB 267MG	Tier 3	PA
ESBRIET TAB 801MG	Tier 3	PA
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
FARXIGA TAB 5MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days

Drug Name	Drug Tier	Requirements/Limits
FARXIGA TAB 10MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
JARDIANCE TAB 10MG	Tier 3	QL (450 tabs / 30 days), ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
JARDIANCE TAB 25MG	Tier 3	ST; MAIL; Prior use of metformin 2000mg daily dose, Sulfonylurea, or Thiazolidinedione AND Alogliptin for 90 days
SULFONAMIDES		
Sulfonamides		
SULFADIAZINE TAB 500MG	Tier 2	
TETRACYCLINES		
Tetracyclines		
avidoxy tab 100mg	Tier 1	QL (90 tabs / 30 days)
demeclocycline hcl tab 150 mg	Tier 2	Covered for ages 8 and over
demeclocycline hcl tab 300 mg	Tier 2	Covered for ages 8 and over
doxycycline monohydrate cap 50 mg	Tier 1	QL (90 caps / 30 days)
doxycycline monohydrate cap 100 mg	Tier 1	QL (90 caps / 30 days)
doxycycline monohydrate tab 100 mg	Tier 1	QL (90 tabs / 30 days)
minocycline hcl cap 50 mg	Tier 1	QL (60 caps / 30 days)
minocycline hcl cap 100 mg	Tier 1	QL (60 caps / 30 days)
tetracycline hcl cap 250 mg	Tier 2	QL (180 caps / 30 days)
tetracycline hcl cap 500 mg	Tier 2	QL (120 caps / 30 days)
THYROID AGENTS		
Antithyroid Agents		
methimazole tab 5 mg	Tier 1	QL (180 ea / 30 days); MAIL
methimazole tab 10 mg	Tier 1	QL (180 ea / 30 days); MAIL
propylthiouracil tab 50 mg	Tier 1	QL (600 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
Thyroid Hormones		
ARMOUR THYRO TAB 15MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 30MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 60MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 90MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 120MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 180MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 240MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ARMOUR THYRO TAB 300MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
EUTHROID TAB 120MG	Tier 2	MAIL
EUTHROID-1 TAB 60MG	Tier 2	MAIL
EUTHROID-2 TAB 120MG	Tier 2	MAIL
EUTHROID-3 TAB 180MG	Tier 2	MAIL
levo-t tab 300 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 25 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 50 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 75 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 88 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 100 mcg	Tier 1	QL (60 tabs / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
levothyroxine sodium tab 112 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 125 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 137 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 150 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 175 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 200 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levothyroxine sodium tab 300 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 25mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 50mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 75mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 88mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 100mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 112mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 125mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 137mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 150mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 175mcg	Tier 1	QL (60 tabs / 30 days); MAIL
levoxyl tab 200mcg	Tier 1	QL (60 tabs / 30 days); MAIL
liothyronine sodium iv soln 10 mcg/ml	Tier 1	MAIL
liothyronine sodium tab 5 mcg	Tier 1	QL (180 tabs / 30 days); MAIL
liothyronine sodium tab 25 mcg	Tier 1	QL (90 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
liothyronine sodium tab 50 mcg	Tier 1	QL (60 tabs / 30 days); MAIL
NATURE THROI TAB 162.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 16.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 48.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 113.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 146.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 195MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 260MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
NATURE-THROI TAB 325MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
np thyroid tab 15mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
np thyroid tab 30mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
np thyroid tab 60mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
np thyroid tab 90mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
np thyroid tab 120mg	Tier 1	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
SYNTHROID TAB 25MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 50MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 75MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 88MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 100MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 112MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 125MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 137MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 150MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 175MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 200MCG	Tier 2	QL (60 tabs / 30 days); MAIL
SYNTHROID TAB 300MCG	Tier 2	QL (60 tabs / 30 days); MAIL
THYROLAR-1 TAB 60MG	Tier 2	MAIL
THYROLAR-1/2 TAB 30MG	Tier 2	MAIL
THYROLAR-1/4 TAB 15MG	Tier 2	MAIL
THYROLAR-2 TAB 120MG	Tier 2	MAIL
THYROLAR-3 TAB 180MG	Tier 2	MAIL

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unithroid tab 25mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 50mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 75mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 88mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 100mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 112mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 125mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 137mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 150mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 175mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 200mcg	Tier 1	QL (60 tabs / 30 days); MAIL
unithroid tab 300mcg	Tier 1	QL (60 tabs / 30 days); MAIL
WESTHROID TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WESTHROID TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WESTHROID TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WESTHROID TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WESTHROID TAB 195MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WP THYROID TAB 16.25MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

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Drug Name	Drug Tier	Requirements/Limits
WP THYROID TAB 32.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WP THYROID TAB 48.75MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WP THYROID TAB 65MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WP THYROID TAB 81.25MG	Tier 2	MAIL
WP THYROID TAB 97.5MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
WP THYROID TAB 130MG	Tier 2	QL (30 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

ULCER DRUGS

Antispasmodics

atropine sulfate soln prefill syr 0.5 mg/5ml (0.1 mg/ml)	Tier 1	AGE; Covered for ages 64 and over
atropine sulfate soln prefill syr 0.25 mg/5ml (0.05 mg/ml)	Tier 1	AGE; MAIL; Covered for ages 64 and over
atropine sulfate soln prefill syr 1 mg/10ml (0.1 mg/ml)	Tier 1	AGE; MAIL; Covered for ages 64 and over
CANTIL TAB 25MG	Tier 3	PA; MAIL
CUVPOSA SOL 1MG/5ML	Tier 2	PA; MAIL
dicyclomine hcl cap 10 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
dicyclomine hcl oral soln 10 mg/5ml	Tier 1	QL (2400 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
dicyclomine hcl tab 20 mg	Tier 1	QL (240 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
ed-spaz tab 0.125mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
glycopyrrolate tab 1 mg	Tier 1	MAIL
glycopyrrolate tab 2 mg	Tier 1	MAIL

Drug Name	Drug Tier	Requirements/Limits
hyoscyamine sulfate sl tab 0.125 mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hyoscyamine sulfate soln 0.125 mg/ml	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
hyoscyamine sulfate tab 0.125 mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hyoscyamine sulfate tab disint 0.125 mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hyoscyamine sulfate tab er 12hr 0.375 mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
hyosyne dro 0.125/ml	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
hyosyne elx 0.125/5	Tier 1	QL (1800 mL / 30 days); AGE; MAIL; Covered for ages 64 and over
methscopolamine bromide tab 2.5 mg	Tier 1	MAIL
methscopolamine bromide tab 5 mg	Tier 1	MAIL
nulev tab 0.125mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
oscimin sr tab 0.375mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
oscimin sub 0.125mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
oscimin tab 0.125mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
symax-sl sub 0.125mg	Tier 1	QL (360 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over

Drug Name	Drug Tier	Requirements/Limits
symax-sr tab 0.375mg	Tier 1	QL (120 tabs / 30 days); AGE; MAIL; Covered for ages 64 and over
H-2 Antagonists		
acid control tab 10mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
acid control tab 20mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
acid control tab 75mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
acid control tab 150mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
acid reducer tab 10mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
acid reducer tab 20mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
acid reducer tab 75mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
acid reducer tab 150mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
acid reducer tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
cimetidine hcl soln 300 mg/5ml	Tier 1	QL (1800 mL / 30 days); MAIL
cimetidine tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
cimetidine tab 300 mg	Tier 1	QL (60 tabs / 30 days); MAIL
cimetidine tab 400 mg	Tier 1	QL (60 tabs / 30 days); MAIL
cimetidine tab 800 mg	Tier 1	QL (60 tabs / 30 days); MAIL
eq heartburn tab relief	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
eql heartbrn tab 10mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
famotidine tab 10mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
famotidine tab 20 mg	Tier 1	QL (60 tabs / 30 days); MAIL
famotidine tab 40 mg	Tier 1	QL (60 tabs / 30 days); MAIL

Drug Name	Drug Tier	Requirements/Limits
heartbrn rel tab 75mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
heartbrn rel tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
heartburn tab 20mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
heartburn tab 150mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
heartburn tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
heartburn tab relief	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
heartburn tab relief	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
nizatidine cap 150 mg	Tier 1	QL (120 caps / 30 days), ST; MAIL; PRIOR USE CIMETIDINE OR FAMOTIDINE OR RANITIDINE
nizatidine oral soln 15 mg/ml	Tier 2	ST; MAIL; PRIOR USE CIMETIDINE OR FAMOTIDINE OR RANITIDINE
ranitidine hcl syrup 15 mg/ml (75 mg/5ml)	Tier 1	QL (600 mL / 30 days); MAIL; Covered for ages 12 and over
ranitidine hcl tab 75 mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ranitidine hcl tab 150 mg	Tier 1	QL (120 tabs / 30 days); MAIL
ranitidine hcl tab 300 mg	Tier 1	QL (60 tabs / 30 days); MAIL
sm acid redu tab 200mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
wal-zan tab 75mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
wal-zan tab 150mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
Misc. Anti-Ulcer		
CARAFATE SUS 1GM/10ML	Tier 2	QL (1200 mL / 30 days), PA; MAIL; Covered for ages 18 and over

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Tier 2 = Non-Preferred generics; Preferred brand name drugs
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Drug Name	Drug Tier	Requirements/Limits
sucralfate tab 1 gm	Tier 1	QL (120 tabs / 30 days); MAIL
Proton Pump Inhibitors		
DEXILANT CAP 30MG DR	Tier 3	QL (30 caps / 30 days), ST; MAIL; PRIOR USE PANTOPRAZOLE AND ESOMEPRAZOLE OTC
DEXILANT CAP 60MG DR	Tier 3	QL (30 caps / 30 days), ST; MAIL; PRIOR USE PANTOPRAZOLE AND ESOMEPRAZOLE OTC
esomeprazole magnesium cap delayed release 20 mg (base eq)	Tier 2	QL (60 caps / 30 days); MAIL
FIRST-OMEPRA SUS 2MG/ML	Tier 2	QL (150 mL / 25 days), PA; MAIL; Covered for ages 12 and over
lansoprazole cap 15mg dr	Tier 1	OTC, QL (60 caps / 30 days); MAIL
lansoprazole cap delayed release 15 mg	Tier 1	OTC, QL (60 per 30 days); MAIL
OMEPRAZOLE + SUS SYRSPEND	Tier 2	QL (150 mL / 25 days), PA; MAIL; Covered for ages 12 and over
omeprazole cap 20.6mgdr	Tier 1	OTC, QL (30 caps / 30 days); MAIL
omeprazole cap delayed release 10 mg	Tier 1	QL (90 caps / 30 days); MAIL
omeprazole cap delayed release 20 mg	Tier 1	QL (90 caps / 30 days); MAIL
omeprazole cap delayed release 40 mg	Tier 1	QL (30 caps / 30 days); MAIL
pantoprazole sodium ec tab 20 mg (base equiv)	Tier 1	QL (30 tabs / 30 days); MAIL
pantoprazole sodium ec tab 40 mg (base equiv)	Tier 1	QL (90 tabs / 30 days); MAIL
PRILOSEC OTC TAB 20MG	Tier 1	OTC, QL (90 tabs / 30 days); MAIL
rabeprazole sodium ec tab 20 mg	Tier 1	QL (30 tabs / 30 days), ST; MAIL; PRIOR USE OMEPRAZOLE OR OMEPRAZOLE OTC OR ESOMEPRAZOLE OTC

Drug Name	Drug Tier	Requirements/Limits
Ulcer Drugs - Prostaglandins		
misoprostol tab 100 mcg	Tier 1	QL (120 tabs / 30 days); MAIL
misoprostol tab 200 mcg	Tier 1	QL (120 tabs / 30 days); MAIL
URINARY ANTI-INFECTIVES		
Urinary Anti-infectives		
methenamine hippurate tab 1 gm	Tier 1	MAIL
MONUROL PAK GRANULES	Tier 3	MAIL
nitrofurantoin macrocrystalline cap 50 mg	Tier 1	QL (60 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
nitrofurantoin macrocrystalline cap 100 mg	Tier 1	QL (120 caps / 30 days); AGE; MAIL; Covered for ages 64 and over
nitrofurantoin monohydrate macrocrystalline cap 100 mg	Tier 1	QL (60 ea / 30 days); AGE; MAIL; Covered for ages 64 and over
nitrofurantoin susp 25 mg/5ml	Tier 2	QL (Max day supply 10; Max 40 per day); covered for ages 12 and over
URINARY ANTISPASMODICS		
Beta-3 Adrenergic Agonists		
MYRBETRIQ TAB 25MG	Tier 3	MAIL
MYRBETRIQ TAB 50MG	Tier 3	MAIL
Urinary Antispasmodics		
flavoxate hcl tab 100 mg	Tier 1	QL (120 tabs / 30 days); MAIL
VACCINES		
Viral Vaccines		
AFLURIA INJ	PREV	
AFLURIA INJ PF	PREV	
FLUARIX QUAD INJ 2017-18	PREV	
FLUCLVX QUAD INJ 2016-17	PREV	
FLULAVAL QUA INJ 2016-17	PREV	
FLUVIRIN INJ	PREV	
FLUVIRIN INJ PF	PREV	
FLUZONE QUAD INJ	PREV	

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Drug Name	Drug Tier	Requirements/Limits
PNEUMOVAX 23 INJ 25/0.5	PREV	QL (2 FILLS/LIFETIME)
PREVNAR 13 INJ	PREV	QL (4 FILLS/LIFETIME)
SHINGRIX INJ 50MCG	PREV	QL (2 INJ/LIFETIME); AGE; Covered for ages 50 and over
ZOSTAVAX INJ	PREV	AGE; Covered in ages 50 and older
VAGINAL PRODUCTS		
SPERMICIDES		
ENCARE SUP 100MG	PREV	OTC, QL (Max day supply 365)
GYNOL II GEL 3%	PREV	OTC, QL (Max day supply 365)
SHUR-SEAL GEL 2%	PREV	OTC, QL (Max day supply 365)
VCF VAGINAL AER CONTRACP	PREV	OTC, QL (Max day supply 365)
VCF VAGINAL MIS CONTRACP	PREV	OTC, QL (Max day supply 365)
Spermicides		
CONCEPTROL GEL 4%	PREV	OTC, QL (Max day supply 365); MAIL
vcf vaginal gel contrace	PREV	OTC, QL (Max day supply 365); MAIL
Vaginal Anti-infectives		
clindamycin phosphate vaginal cream 2%	Tier 1	MAIL
clotrimazole cre 1% vag	Tier 1	OTC; MAIL
clotrimazole cre 2%	Tier 1	OTC; MAIL
clotrimazole cre 3 day	Tier 1	OTC; MAIL
clotrimazole vaginal cream 1%	Tier 1	OTC; MAIL
cvs 3-day cre	Tier 1	OTC; MAIL
1-day 6.5% oin monistat	Tier 1	OTC; MAIL
3 day vaginl cre 2%	Tier 1	OTC; MAIL
3 day vagnal cre 4%	Tier 1	OTC; MAIL
GYNAZOLE-1 CRE 2%	Tier 2	MAIL
metronidazole vaginal gel 0.75%	Tier 1	QL (70 gm / 5 days); MAIL
miconazole 3 cre 4%	Tier 1	OTC; MAIL
miconazole 3 kit 4%	Tier 1	OTC; MAIL
miconazole 3 kit combinat	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
miconazole 3 kit combo pk	Tier 1	OTC; MAIL
miconazole 7 cre	Tier 1	OTC; MAIL
miconazole 7 cre 2%	Tier 1	OTC; MAIL
miconazole 7 cre tube/kit	Tier 1	OTC; MAIL
miconazole 7 sup 100mg	Tier 1	OTC; MAIL
miconazole nitrate vaginal cream 2%	Tier 1	OTC; MAIL
miconazole nitrate vaginal suppos 100 mg	Tier 1	OTC; MAIL
monistat 7 kit combo pk	Tier 1	OTC; MAIL
ra clotrimaz cre 3	Tier 1	OTC; MAIL
sm micon 7 sup 100mg	Tier 1	OTC; MAIL
terconazole vaginal cream 0.4%	Tier 1	MAIL
terconazole vaginal cream 0.8%	Tier 1	MAIL
terconazole vaginal suppos 80 mg	Tier 1	QL (30 supp / 30 days); MAIL
tioconazole oin 6.5% vag	Tier 1	OTC; MAIL
vagistat-3 kit combo pk	Tier 1	OTC; MAIL
vandazole gel 0.75%	Tier 1	QL (70 gm / 5 days); MAIL
Vaginal Estrogens		
estradiol vaginal cream 0.1 mg/gm	Tier 1	QL (42.5 gm / 25 days); MAIL
PREMARIN VAG CRE 0.625MG	Tier 2	MAIL
yuvafem tab 10mcg	Tier 2	QL (60 tabs / 30 days); MAIL
VASOPRESSORS		
Anaphylaxis Therapy Agents		
EPIPEN 2-PAK INJ 0.3MG	Tier 2	MAIL
EPIPEN-JR INJ 0.15MG	Tier 2	MAIL
Vasopressors		
midodrine hcl tab 2.5 mg	Tier 1	QL (480 ea / 30 days); MAIL
midodrine hcl tab 5 mg	Tier 1	QL (240 ea / 30 days); MAIL
midodrine hcl tab 10 mg	Tier 1	QL (120 tabs / 30 days); MAIL
VITAMINS		
Oil Soluble Vitamins		
bio-d-mulsio liq 400unit	Tier 1	OTC, QL (30 mL / 30 days); MAIL; Covered for ages 65 and over

Drug Name	Drug Tier	Requirements/Limits
cholecalciferol cap 1000 unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
cholecalciferol cap 2000 unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
cholecalciferol chew tab 1000 unit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
cholecalciferol drops 5000 unit/ml (1000 unit/0.2ml)	Tier 1	OTC, QL (180 mL / 30 days); MAIL
cholecalciferol oral liquid 400 unit/ml	Tier 1	OTC, QL (180 mL / 30 days); MAIL
cholecalciferol tab 400 unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
cholecalciferol tab 1000 unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
cholecalciferol tab 2000 unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
cvs d3 cap 2000unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
d3 max st dro 5000unit	Tier 1	OTC, QL (180 mL / 30 days); MAIL
d 1000 chw 1000unit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
ergocalciferol cap 50000 unit	Tier 1	QL (180 caps / 30 days); MAIL
ergocalciferol cap 50000 unit	Tier 1	QL (180 ea / 30 days); MAIL
MEPHYTON TAB 5MG	Tier 2	MAIL
phytonadione tab 5 mg	Tier 2	MAIL
vitamin d3 cap 2000 unt	Tier 1	OTC, QL (30 ea / 30 days); MAIL
vitamin d3 cap 2000unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
vitamin d3 cap 5000unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
vitamin d3 cap 10000unt	Tier 1	OTC, QL (30 caps / 30 days); MAIL
vitamin d3 cap 50000unt	Tier 1	OTC, QL (30 caps / 30 days); MAIL
vitamin d3 chw 400unit	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
vitamin d3 dro 400unit	Tier 1	OTC, QL (180 mL / 30 days); MAIL

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Drug Name	Drug Tier	Requirements/Limits
vitamin d3 tab 400unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
vitamin d3 tab 1000unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
vitamin d3 tab 5000unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
vitamin d cap 1000unit	Tier 1	OTC, QL (30 caps / 30 days); MAIL
vitamin d tab 2000unit	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
vitamin d tab 5000iu	Tier 1	OTC, QL (180 tabs / 30 days); MAIL
Water Soluble Vitamins		
ascorbic acid tab 500 mg	Tier 1	OTC; MAIL
b6 natural tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
cvs b6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
endur-acin tab 250mg sr	Tier 1	OTC; MAIL
endur-acin tab 500mg sr	Tier 1	OTC; MAIL
eql b-6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
gnp niacin tab 250mg	Tier 1	OTC; MAIL
gnp niacin tab 250mg tr	Tier 1	OTC; MAIL
gnp vit b-6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
hm niacin tab 250mg	Tier 1	OTC; MAIL
hm vit b6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
neuro-k-50 tab	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
niacin cap er 250 mg	Tier 1	OTC; MAIL
niacin cap er 500 mg	Tier 1	OTC; MAIL
niacin tab 50 mg	Tier 1	OTC; MAIL
niacin tab 100 mg	Tier 1	OTC; MAIL
niacin tab 250 mg	Tier 1	OTC; MAIL
niacin tab 500 mg	Tier 1	OTC; MAIL
niacin tab er 250 mg	Tier 1	OTC; MAIL
niacin tab er 500 mg	Tier 1	OTC; MAIL
niacin tab er 750 mg	Tier 1	OTC; MAIL
niacin-50 tab	Tier 1	OTC; MAIL

Drug Name	Drug Tier	Requirements/Limits
niacinamide tab 500 mg	Tier 1	OTC; MAIL
pyridoxine hcl tab 25 mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
pyridoxine hcl tab 50 mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
pyridoxine hcl tab 100 mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
pyridoxine hcl tab er 200 mg	Tier 1	OTC; MAIL
ra niacin tab 100mg	Tier 1	OTC; MAIL
ra niacin tab 500mg	Tier 1	OTC; MAIL
ra vit b-6 tab 50mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ra vit b-6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
ra vit b-6 tab 200mg tr	Tier 1	OTC; MAIL
riboflavin tab 100 mg	Tier 1	OTC; MAIL
slo-niacin tab 250mg cr	Tier 1	OTC; MAIL
sm niacin tab 250mg cr	Tier 1	OTC; MAIL
sm vit b6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
sm vit b-6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL
thiamine hcl tab 50 mg	Tier 1	OTC, QL (60 tabs / 30 days); MAIL
thiamine hcl tab 100 mg	Tier 1	OTC, QL (30 tabs / 30 days); MAIL
thiamine hcl tab 250 mg	Tier 1	OTC; MAIL
yl vit b-6 tab 100mg	Tier 1	OTC, QL (120 tabs / 30 days); MAIL

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