



2025

List of Covered Drugs

(Formulary)

South Carolina

Molina Dual Options Medicare-Medicaid Plan

HPMS Approved Formulary File Submission 00025290, Version 17

Updated on **10/01/2025**

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

Molina Dual Options Medicare-Medicaid Plan | 2025 *List of Covered Drugs* (Drug List or Formulary)

Introduction

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

Table of Contents

A. Disclaimers.....	3
B. Frequently Asked Questions (FAQ)	1
B1. What prescription drugs are on the <i>List of Covered Drugs</i> (or “ <i>Drug List</i> ” for short.)?	1
B2. Does the <i>Drug List</i> ever change?	2
B3. What happens when there is a change to the <i>Drug List</i> ?	2
B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?	4
B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?	4
B6. What happens if Molina Dual Options changes their rules about some drugs (for example, prior authorization (PA) or approval, quantity limits, and/or step therapy restrictions)?.....	4
B7. How can I find a drug on the <i>Drug List</i> ?.....	4
B8. What if the drug I want to take is not on the <i>Drug List</i> ?	5
B9. What if I am a new Molina Dual Options member and can’t find my drug on the <i>Drug List</i> or have a problem getting my drug?	5
B10. Can I ask for an exception to cover my drug?	7
B11. How can I ask for an exception?.....	7
B12. How long does it take to get an exception?	7
B13. What are generic drugs?.....	7



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

B14. What are original biological products and how are they related to biosimilars?	7
B15. What are OTC drugs?.....	8
B16. What is my copay?.....	8
B17. What are drug tiers?	8
C. Overview of the <i>List of Covered Drugs</i>	8
C1. Drugs Grouped by Medical Condition	9
D. Index of Covered Drugs	112



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

A. Disclaimers

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

Molina Dual Options Medicare-Medicaid Plan is a health plan that contracts with both Medicare and South Carolina Healthy Connections Medicaid to provide benefits of both programs to enrollees.

Molina Healthcare complies with applicable Federal civil rights laws and does not discriminate on the basis of age, color, disability, national origin (including limited English proficiency), race, or sex (consistent with the scope of sex discrimination described at § 92.101(a)).

To help you effectively communicate with us, Molina Healthcare provides services free of charge and in a timely manner:

- Molina Healthcare provides reasonable modifications and appropriate aids and services to people with disabilities. This includes: (1) Qualified interpreters. (2) Information in other formats, such as large print, audio, accessible electronic formats, and Braille.
- Molina Healthcare provides language services to people who speak another language or have limited English skills. This includes: (1) Qualified oral interpreters. (2) Information translated in your language.

If you need these services, contact Molina Member Services at 1-800-665-3086 or TTY/TDD: 711, Monday to Friday, 8 a.m. to 8 p.m. ET.

If you believe we have discriminated on the basis of age, color, disability, national origin, race, or sex, you can file a grievance. You can file a grievance by phone, mail, email, or online. If you need help writing your grievance, we will help you. You may obtain our grievance procedure by visiting our website at <https://www.molinahealthcare.com/members/common/en-US/Notice-of-Nondiscrimination.aspx>

Call our Civil Rights Coordinator at 1-866-606-3889, TTY/TDD: 711 or submit your grievance to:

Civil Rights Unit
200 Oceangate
Long Beach, CA 90802
Email: civil.rights@molinahealthcare.com
Website: <https://molinahealthcare.Alertline.com>

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

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

Complaint forms are available here: <https://www.hhs.gov/sites/default/files/ocr-cr-complaint-form-package.pdf>



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

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-855-735-5831 (TTY: 711) or speak to your provider.

Spanish: ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos para asistirle en su idioma. También dispone de ayudas y servicios auxiliares gratuitos para proporcionar información en formatos accesibles. Llame al 1-855-735-5831 (los usuarios de TTY pueden llamar al 711) o hable con su proveedor.

Chinese: 請注意：如果您說中文，我們會為您提供免費的語言協助服務。我們還免費提供適當的輔助工具及服務，以無障礙格式提供資訊。請撥打 1-855-735-5831 (TTY: 711) 或與您的醫療服務提供者聯絡。

Tagalog: TAWAG-PANSIN: Kung nagsasalita ka ng Tagalog, may mga libreng serbisyo ng tulong sa wika para sa iyo. May mga naaangkop na auxiliary aid at mga serbisyo din para magbigay ng impormasyon sa mga accessible na format nang walang bayad. Tawagan ang 1-855-735-5831 (TTY: 711) o kausapin ang iyong provider.

French: REMARQUE : si vous parlez français, des services d'aide linguistique gratuits sont disponibles. Des outils et des services auxiliaires adaptés visant à fournir des informations dans un format accessible sont également disponibles gratuitement. Appelez le 1-855-735-5831 (ATS : 711) ou contactez votre prestataire.

Vietnamese: LƯU Ý: Nếu quý vị nói Tiếng Việt, chúng tôi có cung cấp các dịch vụ hỗ trợ ngôn ngữ miễn phí. Chúng tôi cũng cung cấp miễn phí các phương tiện hỗ trợ và dịch vụ phụ trợ phù hợp để cung cấp thông tin theo những dạng thức dễ tiếp cận. Hãy gọi số 1-855-735-5831 (TTY: 711) hoặc trao đổi với nhà cung cấp của quý vị.

German: HINWEIS: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Geeignete Hilfsmittel und Dienste für die Übermittlung von Informationen in zugänglicher Form sind ebenfalls kostenlos verfügbar. Rufen Sie unter 1-855-735-5831 (TTY: 711) an oder wenden Sie sich an Ihren Anbieter.

Korean: 주의: 한국어를 구사하는 경우, 언어 지원 서비스를 무료로 이용할 수 있습니다. 접근 가능한 형식으로 정보를 제공하기 위한 적절한 보조 도구와 서비스도 무료로 이용할 수 있습니다. 1-855-735-5831(TTY: 711)번으로 전화하거나 제공자에게 이야기하시기 바랍니다.

Russian: Внимание! Если вы говорите на русском, для вас доступна бесплатная помощь переводчика. Также доступны бесплатные соответствующие вспомогательные средства для получения информации в доступном формате. Звоните 1-855-735-5831 (TTY: 711) или поговорите с вашим поставщиком медицинского обслуживания.

Arabic:

تيسرنا تمياضاً تامدخو ددعاسم تاودأ رفوتت امك. اناجم اكل تحاتم تيوعلا ددعاسملا تامدخ نوكت فوسف، تييرعلا ثدحتت تنك اذا: ميينت وأ 5831-735-855 مقرلا لى لعل صتا. تفلكت تيا نود نم اهيللا لوصولاً نكمي غيصب تامولعملا (ي صنلا فتاهلا: 711) ريفوتل. تامدخلا مدقم لى لى ثدحت



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

10/01/2025

Italian: ATTENZIONE: Se parla italiano, sono disponibili servizi di assistenza linguistica a titolo gratuito. Sono inoltre disponibili gratuitamente ausili e servizi adeguati per fornire informazioni in formati accessibili. Chiami il numero 1-855-735-5831 (TTY: 711) o si metta in contatto con il suo fornitore.

Portuguese: ATENÇÃO: se você fala português, serviços de assistência linguística gratuitos estão à sua disposição. Também estão disponíveis sem custo materiais e serviços auxiliares apropriados para fornecer informações em formatos acessíveis. Ligue para o número 1-855-735-5831 (TTY: 711) ou fale com seu fornecedor de serviços de saúde.

French Creole: ATANSYON: Si w pale Fransè Kreyòl, sèvis asistans linguistik disponib gratis pou ou. Èd ak sèvis oksilyè apwopriye pou bay enfòmasyon nan fòm aksesib disponib gratis egalman. Rele 1-855-735-5831 (TTY: 711) oswa pale ak founisè w la.

Polish: UWAGA: Jeśli mówisz w języku Polskim, możesz skorzystać z bezpłatnych usług pomocy językowej. Bez żadnych opłat dostępne są również odpowiednie pomoce i usługi dostarczające informacji w przystępnych formatach. Zadzwoń pod numer 1-855-735-5831 (TTY: 711) lub porozmawiaj ze swoim świadczeniodawcą.

Hindi: जानकारी दें: अगर आप हिंदी बोलते हैं, तो आपके लिए मुफ्त भाषा सहायता उपलब्ध है। एसेस करने योग्य फॉर्मेट में जानकारी उपलब्ध कराने के लिए उपयोगी सहायक साधन और सहायता भी निम्न शुद्ध उपलब्ध है। 1-855-735-5831 (TTY: 711) पर कॉल करें या अपने प्रदाता से बात करें।

Ukrainian: УВАГА! Якщо ви розмовляєте українською, можете скористатися безкоштовною послугою мовної підтримки. Також ви можете безкоштовно скористатися відповідними допоміжними засобами та послугами для отримання інформації в доступних форматах. Телефонуйте за номером 1-855-735-5831 (TTY: 711) або зверніться до свого постачальника послуг.

Pashto:

وتامولعمد د یې ونوېمرافرو یې سرسلا د بیرل نوټشده وسات تامدخ یې تسرم ایرو د یې ټو د ونه یې یو وټیږ وسات ټریچ مک یې ټوکو مپا ای یې هوو گنر مه 1-855-735-5831. بیرل نوټشده ایرو مه تامدخ وا یې تسرم هیودنتسرم بسانم هراپل ولوک (TTY:711) وتمچ ټوکو یې ربخ هرس یې کنوک وتمچ لپڅ

Bengali: মেনােযাগ িদিন: আপিন বাংলা ভাষাতে কথা বললে, িবনামেল্যর ভাষা সহায়তা পিরেষবা আপনার জন্য উপলব্ধ রেয়েছে। অ্যােেসেযাগ্য িবন্যােসে তথ্য াদানের জন্য উপযুক্ত সহায়ক সহায়তা ও পিরেষবা িলিও িবনামেল্য পাওয়া যায়। 1-855-735-5831 (TTY: 711) নের কল কান বা আপনার াদানকারীর সাথে কথা বলুন।

Farsi:

یاهکمک و تامدخ، نینچمه. تسامش سرتسد رد ناگیار تروصد یې نابز کمک تامدخ، یسراف نابز یې ملکت تروصد رد: هجوت هرامش اب. دریگی رارق امش رایتخا رد ناگیار تروصد یې، یسرتسد لابق و فلتخم یاهتروصد یې تاعلاطا هئارا یارب 5831-735-855-1 (ناربراک TTY: 711) مزلا. دینک تروشم دوخ تامدخ مدند هئارا اب ات دیریگب سامت



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

Albanian: VINI RE: Nëse flisni Shqip, janë të disponueshme shërbime falas të asistencës gjuhësore anë të disponueshme për ju. Ndihamat dhe shërbimet e duhura ndihmëse për të ofruar informacion në formate të aksesueshme janë gjithashtu të disponueshme pa pagesë. Telefononi 1-855-735-5831 (TTY: 711) ose flisni me ofruesin tuaj.

Dari:

یارب بسانمی کمک تامدخ و اه کمک. تسا دوجوم امشد یارب ناگیار نابز کمک تامدخ، دینکیم تبصرد یرد امشد رگا هر امشد به. تسا دوجوم ناگیار تروصب نانچمه سرتسد لباقی اه تمارف رد تامولعم 1-855-735-5831 (TTY: 711): هجوت: ن تخاسد مهارف. دینک تبصرد دود هدننک مهارف اب ای دینزب گنز 711

Japanese: 注意: 日本語をお話しになれる場合、無料の言語補助サービスをご利用になれます。利用可能な形式で情報を提供するための適切な補助器具・サービスも無料でご利用になれます。1-855-735-5831 (TTY: 711)に電話するか、プロバイダーにご相談ください。

- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., ET. The call is free.
- ❖ This document is available for free in Spanish, Chinese, Tagalog, French, Vietnamese, German, Korean, Russian, Arabic, Italian, Portuguese, French Creole, Polish, Hindi, Ukrainian, Pashto, Bengali, Farsi, Albanian, Dari, and Japanese.
- ❖ To make a standing request to get materials in a language other than English or in an alternate format now and in the future, please contact Member Services at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., local time.

B. Frequently Asked Questions (FAQ)

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

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

The drugs on the *List of Covered Drugs* in section C1 are the drugs covered by Molina Dual Options. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Molina Dual Options will cover all medically necessary drugs on the *Drug List* if:
 - your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a Molina Dual Options network pharmacy.
- Molina Dual Options may have additional steps to access certain drugs (refer to You can also find an up-to-date list of drugs that we cover on our website listed at



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

the bottom of the page or by calling Member Services at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., ET.

B2. Does the *Drug List* ever change?

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

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

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

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

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

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

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

- You can always check Molina Dual Options's up to date *Drug List* on our MolinaHealthcare.com/Duals. Updates to the *Drug List* are posted on the website monthly.
- You can also call Member Services to check the current *Drug List* at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., ET.

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

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

- **Substitutions of certain new version of drugs.** We may immediately remove the drugs from the *Drug List* if we replace them with certain new versions of that drug, but your cost for the new drug will stay the same. When we add a new version of a drug, we may also decide to keep the brand name drug or original biological product on the list but change its coverage rules or limits.



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

- We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
- We can make these changes only if the drug we are adding:
 - Is a new generic version of a brand name drug, or
 - Is a certain new biosimilar version of original biological products on the *Drug List* (for example, adding an interchangeable biosimilar that can be substituted for an original biological product without a new prescription).

Some of these drug types may be new to you. For more information, refer to Section B14.

- You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please refer to question B10 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or effective or the drug's manufacturer takes a drug off the market, we may immediately take it off the *Drug List*. If you are taking the drug, we will send you a notice after we make the change. Talk with your doctor or other prescriber to find an alternative that is safe for you.

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

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We remove a brand name drug from the *Drug List* when adding a generic drug that is not new to the market, or
- we remove an original biological product when adding a biosimilar, or
- we change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- tell you at least 30 days before we make the change to the *Drug List* **or**
- let you know and give you a 31-day supply of the drug after you ask for a refill.

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

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



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

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

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

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

You can find out if your drug has any additional requirements or limits by looking in the tables in section C1. You can also get more information by visiting our website listed at the bottom of the page. We have posted online documents that explain our PA and step therapy restrictions. You may also ask us to send you a copy.

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

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

The table of drugs in section C1 has a column labeled "Necessary actions, restrictions, or limits on use."

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

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

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

There are two ways to find a drug:



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

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

To search **alphabetically**, refer to the Index of Covered Drugs section. You can find it in section D.

To search **by medical condition**, find the section labeled “Drugs Grouped by Medical Condition” in section C1. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, Cardiovascular. That is where you will find drugs that treat heart conditions.

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

If you don't find your drug on the *Drug List*, call Member Services at (855) 735-5831, TTY: 711, 7 days a week, 8 a.m. to 8 p.m., ET and ask about it. If you learn that Molina Dual Options will not cover the drug, you can do one of these things:

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

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

We can help. We will cover a temporary 31-day supply of your Part D drug and a 90-day supply of your Healthy Connections Medicaid drug during the first 180 days you are a member of Molina Dual Options. This will give you time to talk to your doctor or other prescriber. They will determine if there is a similar drug on the *Drug List* you can take instead or whether to ask for an exception.

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

We will cover a 31-day supply of your drug if:

- you are taking a drug that is not on our *Drug List*, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires PA by Molina Dual Options, **or**
- you are taking a drug that is part of a step therapy restriction.

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



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

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

Transition Policy

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

- **If you are a current member affected by a formulary change from one year to the next**, we will provide a 31-day temporary supply of the non-formulary drug if you need a refill for the drug during the first 180 days of the new plan year for Part D drugs and Healthy Connections Medicaid drugs.

When a member goes to a network pharmacy and we provide a temporary supply of a drug that isn't on our formulary, or that has coverage restrictions or limits (but is otherwise considered a "Part D drug"), we will cover a 31-day supply (unless the prescription is written for fewer days). After we cover the temporary 31-day supply, we generally will not pay for these drugs as part of our transition policy again.

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

Temporary Supply

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

If the resident has been enrolled in our Plan for more than 180 days and needs a drug that isn't on our formulary or is subject to other restrictions, such as step therapy or dosage limits, we will cover a temporary 31-day emergency supply of that drug (unless the prescription is for fewer days) while pursuing a formulary exception. Exceptions are available in situations where you experience a change in the level of care you are



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

receiving that also requires you to transition from one facility or treatment center to another. In such circumstances, you would be eligible for a temporary, one-time fill exception for a 31-day supply even if you are outside of the first 180 days as a member of the plan.

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

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

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

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

B11. How can I ask for an exception?

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

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

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

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

B13. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and generally work just as well. They usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA). There are generic drugs available for many brand name drugs. Generic drugs usually can be substituted for brand name drugs at the pharmacy without a new prescription, depending on state laws.

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

B14. What are original biological products and how are they related to biosimilars?



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

When we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have forms that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For more information on drug types, refer to Chapter 5 of the *Member Handbook*.

B15. What are OTC drugs?

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

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

B16. What is my copay?

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

- Tier 1 drugs are generic drugs. For Tier 1 drugs, you pay \$0 copay.
- Tier 2 drugs are brand name drugs. For Tier 2 drugs, you pay \$0 copay.
- Tier 3 drugs are Non-Medicare Rx/Over The Counter (OTC) drugs. For Tier 3 drugs, you pay \$0 copay.

B17. What are drug tiers?

Tiers are groups of drugs on our *Drug List*.

- Tier 1 drugs are generic drugs.
- Tier 2 drugs are brand name drugs.
- Tier 3 drugs are Non-Medicare Rx/Over The Counter (OTC) drugs

All tiers have no copay.

C. Overview of the *List of Covered Drugs*

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

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



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

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

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

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

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

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

C1. Drugs Grouped by Medical Condition

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



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

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

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

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

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

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

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

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

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

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



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

MOLINA_SC_CY25_2T_MMP eff 10/01/2025

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

ANALGESICS - DRUGS TO TREAT PAIN AND INFLAMMATION**GOUT - DRUGS TO TREAT GOUT**

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

MISCELLANEOUS

<i>aspirin</i> CHEW 81mg; TABS 325mg; TBEC 325mg	\$0(3)	*
ASPIRIN SUPP 300mg	\$0(3)	*
<i>aspirin adult low dose</i> TBEC 81mg	\$0(3)	*
<i>aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	*
<i>aspirin low strength</i> CHEW 81mg	\$0(3)	*
<i>aspirin regimen</i> TBEC 81mg	\$0(3)	*
<i>ft aspirin</i> TABS 325mg	\$0(3)	*
<i>ft aspirin low dose</i> TBEC 81mg	\$0(3)	*
<i>ft enteric coated aspirin</i> TBEC 325mg	\$0(3)	*
<i>ft migraine relief</i>	\$0(3)	*
<i>gnp adult aspirin low str</i> CHEW 81mg	\$0(3)	*
<i>gnp aspirin</i> TABS 325mg; TBEC 81mg, 325mg	\$0(3)	*
<i>gnp aspirin low dose</i> TBEC 81mg	\$0(3)	*
<i>gnp headache relief extra</i>	\$0(3)	*
<i>gnp migraine relief</i>	\$0(3)	*
<i>goodsense aspirin</i> CHEW 81mg	\$0(3)	*
<i>goodsense aspirin adults</i> TABS 325mg	\$0(3)	*
<i>goodsense migraine formul</i>	\$0(3)	*
<i>headache relief</i>	\$0(3)	*
<i>headache relief/extra str</i>	\$0(3)	*
<i>hm adult aspirin</i> TABS 325mg	\$0(3)	*
<i>lidocaine hcl (local anesth.)</i> SOLN .5%, 1%, 1.5%, 2%	\$0(1)	B/D
<i>migraine relief</i>	\$0(3)	*
<i>pain reliever plus</i>	\$0(3)	*
<i>sm aspirin adult low stre</i> TBEC 81mg	\$0(3)	*
<i>sm aspirin low dose</i> CHEW 81mg; TBEC 81mg	\$0(3)	*
<i>sm migraine relief</i>	\$0(3)	*
<i>tension headache</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>tri-buffered aspirin</i>	\$0(3)	*
NSAIDS - DRUGS TO TREAT PAIN AND INFLAMMATION		
<i>all day pain relief</i> TABS 220mg	\$0(3)	*
<i>all day relief</i> TABS 220mg	\$0(3)	*
<i>celecoxib</i> CAPS 50mg, 100mg, 200mg	\$0(1)	QL (60 caps / 30 days)
<i>celecoxib</i> CAPS 400mg	\$0(1)	QL (30 caps / 30 days)
<i>diclofenac potassium</i> TABS 50mg	\$0(1)	QL (120 tabs / 30 days)
<i>diclofenac sodium</i> TB24 100mg; TBEC 25mg, 50mg, 75mg	\$0(1)	
<i>diflunisal</i> TABS 500mg	\$0(1)	
<i>etodolac</i> CAPS 200mg, 300mg; TABS 400mg, 500mg; TB24 400mg, 500mg, 600mg	\$0(1)	
<i>flurbiprofen</i> TABS 100mg	\$0(1)	
<i>ft all day pain relief</i> TABS 220mg	\$0(3)	*
<i>ft naproxen sodium</i> CAPS 220mg	\$0(3)	*
<i>gnp naproxen</i> TABS 220mg	\$0(3)	*
<i>gnp naproxen sodium</i> CAPS 220mg	\$0(3)	*
<i>goodsense naproxen sodium</i> TABS 220mg	\$0(3)	*
<i>ibu</i> TABS 400mg, 600mg, 800mg	\$0(1)	
<i>ibuprofen</i> SUSP 100mg/5ml; TABS 400mg, 600mg, 800mg	\$0(1)	
<i>meloxicam</i> TABS 7.5mg, 15mg	\$0(1)	
<i>nabumetone</i> TABS 500mg, 750mg	\$0(1)	
<i>naproxen</i> TABS 250mg, 375mg, 500mg	\$0(1)	
<i>naproxen</i> TBEC 375mg	\$0(1)	QL (120 tabs / 30 days)
<i>naproxen dr</i> TBEC 500mg	\$0(1)	QL (90 tabs / 30 days)
<i>naproxen sodium</i> TABS 220mg	\$0(3)	*
<i>naproxen sodium</i> TABS 275mg, 550mg	\$0(1)	
<i>piroxicam</i> CAPS 10mg, 20mg	\$0(1)	
<i>sm naproxen sodium</i> TABS 220mg	\$0(3)	*
<i>sulindac</i> TABS 150mg, 200mg	\$0(1)	
OPIOID ANALGESICS, LONG-ACTING		
<i>buprenorphine</i> PTWK 5mcg/hr, 7.5mcg/hr, 10mcg/hr, 15mcg/hr, 20mcg/hr	\$0(1)	QL (4 patches / 28 days), PA
<i>fentanyl</i> PT72 12mcg/hr, 25mcg/hr, 37.5mcg/hr, 50mcg/hr, 62.5mcg/hr, 75mcg/hr, 87.5mcg/hr, 100mcg/hr	\$0(1)	QL (10 patches / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 20mg, 30mg, 40mg, 60mg, 80mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>hydrocodone bitartrate</i> T24A 100mg, 120mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

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

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>oxycodone hcl</i> SOLN 5mg/5ml	\$0(1)	QL (900 mL / 30 days)
<i>oxycodone hcl</i> TABS 5mg, 10mg, 15mg, 20mg, 30mg	\$0(1)	QL (180 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 2.5- 325 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 5-325 mg</i>	\$0(1)	QL (360 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 7.5- 325 mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>oxycodone w/ acetaminophen tab 10- 325 mg</i>	\$0(1)	QL (180 tabs / 30 days)
<i>tramadol hcl</i> TABS 50mg	\$0(1)	QL (240 tabs / 30 days)
<i>tramadol-acetaminophen tab 37.5-325 mg</i>	\$0(1)	QL (240 tabs / 30 days)

ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS

ANTI-INFECTIVES - MISCELLANEOUS

<i>albendazole</i> TABS 200mg	\$0(2)	NDS, QL (672 tabs / year), PA
<i>amikacin sulfate</i> SOLN 1gm/4ml, 500mg/2ml	\$0(1)	
ARIKAYCE SUSP 590mg/8.4ml	\$0(2)	NDS, NM, PA
<i>atovaquone</i> SUSP 750mg/5ml	\$0(1)	QL (300 mL / 30 days), PA
<i>aztreonam</i> SOLR 1gm, 2gm	\$0(1)	
CAYSTON SOLR 75mg	\$0(2)	NDS, NM, PA
<i>clindamycin hcl</i> CAPS 75mg, 150mg, 300mg	\$0(1)	
<i>clindamycin palmitate hydrochloride</i> SOLR 75mg/5ml	\$0(1)	
<i>clindamycin phosphate</i> SOLN 300mg/2ml, 600mg/4ml, 900mg/6ml	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> 300 mg/50ml	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> 600 mg/50ml	\$0(1)	
<i>clindamycin phosphate in d5w iv soln</i> 900 mg/50ml	\$0(1)	
CLINDMYC/NAC INJ 300/50ML	\$0(2)	
CLINDMYC/NAC INJ 600/50ML	\$0(2)	
CLINDMYC/NAC INJ 900/50ML	\$0(2)	
<i>colistimethate sodium</i> SOLR 150mg	\$0(1)	
<i>dapsone</i> TABS 25mg, 100mg	\$0(1)	
DAPTOMYCIN SOLR 350mg	\$0(2)	NDS
<i>daptomycin</i> SOLR 350mg, 500mg	\$0(2)	NDS
EMVERM CHEW 100mg	\$0(2)	NDS, QL (12 tabs / year)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ertapenem sodium</i> SOLR 1gm	\$0(1)	
<i>gentamicin in saline inj</i> 0.8 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1.2 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 1.6 mg/ml	\$0(1)	
<i>gentamicin in saline inj</i> 2 mg/ml	\$0(1)	
<i>gentamicin sulfate</i> SOLN 10mg/ml, 40mg/ml	\$0(1)	
<i>imipenem-cilastatin intravenous for soln</i> 250 mg	\$0(1)	
<i>imipenem-cilastatin intravenous for soln</i> 500 mg	\$0(1)	
IMPAVIDO CAPS 50mg	\$0(2)	NDS, PA
<i>ivermectin</i> TABS 3mg	\$0(1)	QL (12 tabs / 90 days), PA
<i>ivermectin</i> TABS 6mg	\$0(1)	QL (10 tabs / 90 days), PA
<i>linezolid</i> SOLN 600mg/300ml	\$0(1)	
<i>linezolid</i> SUSR 100mg/5ml	\$0(2)	NDS, QL (1800 mL / 30 days)
<i>linezolid</i> TABS 600mg	\$0(1)	QL (60 tabs / 30 days)
LINEZOLID INJ 2MG/ML	\$0(2)	
<i>meropenem</i> SOLR 1gm, 2gm, 500mg	\$0(1)	
<i>methenamine hippurate</i> TABS 1gm	\$0(1)	
<i>metronidazole</i> SOLN 500mg/100ml; TABS 250mg, 500mg	\$0(1)	
<i>neomycin sulfate</i> TABS 500mg	\$0(1)	
<i>nitazoxanide</i> TABS 500mg	\$0(2)	NDS, QL (6 tabs / 30 days)
<i>nitrofurantoin macrocrystal</i> CAPS 50mg, 100mg	\$0(2)	
<i>nitrofurantoin monohyd macro</i> CAPS 100mg	\$0(2)	
<i>pentamidine isethionate inh</i> SOLR 300mg	\$0(1)	B/D
<i>pentamidine isethionate inj</i> SOLR 300mg	\$0(1)	
<i>polymyxin b sulfate</i> SOLR 500000unit	\$0(1)	
<i>praziquantel</i> TABS 600mg	\$0(1)	
<i>pyrimethamine</i> TABS 25mg	\$0(2)	NDS, QL (90 tabs / 30 days), PA
<i>streptomycin sulfate</i> SOLR 1gm	\$0(2)	NDS
<i>sulfadiazine</i> TABS 500mg	\$0(2)	NDS
<i>sulfamethoxazole-trimethoprim iv soln</i> 400-80 mg/5ml	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sulfamethoxazole-trimethoprim susp</i> 200-40 mg/5ml	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab</i> 400-80 mg	\$0(1)	
<i>sulfamethoxazole-trimethoprim tab</i> 800-160 mg	\$0(1)	
<i>tinidazole</i> TABS 250mg, 500mg	\$0(1)	
TOBI PODHALER CAPS 28mg	\$0(2)	NDS, NM, PA
<i>tobramycin</i> NEBU 300mg/5ml	\$0(2)	NDS, NM, PA
<i>tobramycin sulfate</i> SOLN 1.2gm/30ml, 10mg/ml, 40mg/ml, 80mg/2ml	\$0(1)	
<i>trimethoprim</i> TABS 100mg	\$0(1)	
<i>vancomycin hcl</i> CAPS 125mg	\$0(1)	QL (80 caps / 180 days)
<i>vancomycin hcl</i> CAPS 250mg	\$0(1)	QL (160 caps / 180 days)
<i>vancomycin hcl</i> SOLR 1gm, 1.25gm, 1.5gm, 5gm, 10gm, 500mg, 750mg	\$0(1)	
VANCOMYCIN INJ 1 GM	\$0(2)	
VANCOMYCIN INJ 500MG	\$0(2)	
VANCOMYCIN INJ 750MG	\$0(2)	
ANTIFUNGALS - DRUGS TO TREAT FUNGAL INFECTIONS		
ABELCET SUSP 5mg/ml	\$0(2)	B/D
<i>amphotericin b</i> SOLR 50mg	\$0(1)	B/D
<i>amphotericin b liposome</i> SUSR 50mg	\$0(2)	NDS, B/D
<i>caspofungin acetate</i> SOLR 50mg, 70mg	\$0(1)	
<i>fluconazole</i> SUSR 10mg/ml, 40mg/ml; TABS 50mg, 100mg, 150mg, 200mg	\$0(1)	
<i>fluconazole in nacl 0.9% inj</i> 200 mg/100ml	\$0(1)	
<i>fluconazole in nacl 0.9% inj</i> 400 mg/200ml	\$0(1)	
<i>flucytosine</i> CAPS 250mg, 500mg	\$0(2)	NDS, PA
<i>griseofulvin microsize</i> SUSP 125mg/5ml; TABS 500mg	\$0(1)	
<i>griseofulvin ultramicrosize</i> TABS 125mg, 250mg	\$0(1)	
<i>itraconazole</i> CAPS 100mg	\$0(1)	PA
<i>ketoconazole</i> TABS 200mg	\$0(1)	PA
<i>miconazole sodium</i> SOLR 50mg, 100mg	\$0(1)	
<i>nystatin</i> TABS 500000unit	\$0(1)	
<i>posaconazole</i> SUSP 40mg/ml	\$0(2)	NDS, QL (630 mL / 30 days), PA
<i>posaconazole</i> TBEC 100mg	\$0(2)	NDS, QL (93 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>terbinafine hcl</i> TABS 250mg	\$0(1)	QL (30 tabs / 30 days), PA; PA applies after a 90 day supply in a calendar year
<i>voriconazole</i> SOLR 200mg	\$0(1)	PA
<i>voriconazole</i> SUSR 40mg/ml	\$0(2)	NDS, QL (600 mL / 28 days), PA
<i>voriconazole</i> TABS 50mg	\$0(1)	QL (480 tabs / 30 days)
<i>voriconazole</i> TABS 200mg	\$0(1)	QL (120 tabs / 30 days)

ANTIMALARIALS - DRUGS TO TREAT MALARIA

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

ANTIRETROVIRAL AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION

<i>abacavir sulfate</i> SOLN 20mg/ml; TABS 300mg	\$0(1)	NM
APTIVUS CAPS 250mg	\$0(2)	NDS, NM
<i>atazanavir sulfate</i> CAPS 150mg, 200mg, 300mg	\$0(1)	NM
<i>darunavir</i> TABS 600mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM
<i>darunavir</i> TABS 800mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM
EDURANT TABS 25mg	\$0(2)	NDS, NM
EDURANT PED TBSO 2.5mg	\$0(2)	NDS, NM
<i>efavirenz</i> TABS 600mg	\$0(1)	NM
<i>emtricitabine</i> CAPS 200mg	\$0(1)	NM
EMTRIVA SOLN 10mg/ml	\$0(2)	NM
<i>etravirine</i> TABS 100mg, 200mg	\$0(2)	NDS, NM
<i>fosamprenavir calcium</i> TABS 700mg	\$0(2)	NDS, NM
FUZEON SOLR 90mg	\$0(2)	NDS, NM
INTELENCE TABS 25mg	\$0(2)	NM
ISENTRESS CHEW 25mg	\$0(2)	NM
ISENTRESS CHEW 100mg; PACK 100mg; TABS 400mg	\$0(2)	NDS, NM

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ISENTRESS HD TABS 600mg	\$0(2)	NDS, NM
<i>lamivudine</i> SOLN 10mg/ml; TABS 150mg, 300mg	\$0(1)	NM
<i>maraviroc</i> TABS 150mg, 300mg	\$0(2)	NDS, NM
<i>nevirapine</i> SUSP 50mg/5ml; TABS 200mg; TB24 400mg	\$0(1)	NM
NORVIR PACK 100mg	\$0(2)	NM
PIFELTRO TABS 100mg	\$0(2)	NDS, NM
PREZISTA SUSP 100mg/ml	\$0(2)	NDS, QL (400 mL / 30 days), NM
PREZISTA TABS 75mg	\$0(2)	QL (480 tabs / 30 days), NM
PREZISTA TABS 150mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM
REYATAZ PACK 50mg	\$0(2)	NDS, NM
<i>ritonavir</i> TABS 100mg	\$0(1)	NM
RUKOBIA TB12 600mg	\$0(2)	NDS, NM
SELZENTRY SOLN 20mg/ml	\$0(2)	NDS, NM
SUNLENCA TABS 300mg; TBPk 300mg	\$0(2)	NDS, NM
<i>tenofovir disoproxil fumarate</i> TABS 300mg	\$0(1)	NM
TIVICAY TABS 10mg	\$0(2)	NM
TIVICAY TABS 25mg, 50mg	\$0(2)	NDS, NM
TIVICAY PD TBSO 5mg	\$0(2)	NDS, NM
TROGARZO SOLN 200mg/1.33ml	\$0(2)	NDS, NM
TYBOST TABS 150mg	\$0(2)	NM
VIRACEPT TABS 250mg, 625mg	\$0(2)	NDS, NM
VIREAD POWD 40mg/gm; TABS 150mg, 200mg, 250mg	\$0(2)	NDS, NM
<i>zidovudine</i> CAPS 100mg; SYRP 50mg/5ml; TABS 300mg	\$0(1)	NM
ANTIRETROVIRAL COMBINATION AGENTS - DRUGS TO SUPPRESS HIV/AIDS INFECTION		
<i>abacavir sulfate-lamivudine tab</i> 600-300 mg	\$0(1)	NM
BIKTARVY TAB 30-120-15 MG	\$0(2)	NDS, NM
BIKTARVY TAB 50-200-25 MG	\$0(2)	NDS, NM
CIMDUO TAB 300-300	\$0(2)	NDS, NM
COMPLERA TAB	\$0(2)	NDS, NM
DELSTRIGO TAB	\$0(2)	NDS, NM
DESCOVY TAB 120-15MG	\$0(2)	NDS, NM
DESCOVY TAB 200/25MG	\$0(2)	NDS, NM
DOVATO TAB 50-300MG	\$0(2)	NDS, NM
<i>efavirenz-emtricitabine-tenofovir df tab</i> 600-200-300 mg	\$0(2)	NDS, NM

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

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

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BARACLUDE SOLN .05mg/ml	\$0(2)	NDS, NM, ST
<i>entecavir</i> TABS .5mg, 1mg	\$0(1)	NM
EPCLUSA PAK 150-37.5	\$0(2)	NDS, NM, PA
EPCLUSA PAK 200-50MG	\$0(2)	NDS, NM, PA
EPCLUSA TAB 200-50MG	\$0(2)	NDS, NM, PA
EPCLUSA TAB 400-100	\$0(2)	NDS, NM, PA
<i>famciclovir</i> TABS 125mg, 250mg, 500mg	\$0(1)	
<i>ganciclovir sodium</i> SOLR 500mg	\$0(1)	B/D
HARVONI PAK 33.75-150MG	\$0(2)	NDS, NM, PA
HARVONI PAK 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 45-200MG	\$0(2)	NDS, NM, PA
HARVONI TAB 90-400MG	\$0(2)	NDS, NM, PA
<i>lamivudine (hbv)</i> TABS 100mg	\$0(1)	NM
LIVTENCITY TABS 200mg	\$0(2)	NDS, QL (336 tabs / 28 days), NM, PA
MAVYRET PAK 50-20MG	\$0(2)	NDS, NM, PA
MAVYRET TAB 100-40MG	\$0(2)	NDS, NM, PA
<i>oseltamivir phosphate</i> CAPS 30mg	\$0(1)	QL (168 caps / year)
<i>oseltamivir phosphate</i> CAPS 45mg, 75mg	\$0(1)	QL (84 caps / year)
<i>oseltamivir phosphate</i> SUSR 6mg/ml	\$0(1)	QL (1080 mL / year)
PAXLOVID PAK	\$0(1)	QL (22 tabs / 90 days)
PAXLOVID TAB 150-100	\$0(1)	QL (40 tabs / 90 days)
PAXLOVID TAB 300-100	\$0(1)	QL (60 tabs / 90 days)
PEGASYS SOLN 180mcg/ml; SOSY 180mcg/0.5ml	\$0(2)	NDS, NM, PA
PREVYMIS TABS 240mg, 480mg	\$0(2)	NDS, QL (28 tabs / 28 days), PA
RELENZA DISKHALER AEPB 5mg/blister	\$0(2)	QL (6 inhalers / year)
<i>ribavirin (hepatitis c)</i> CAPS 200mg; TABS 200mg	\$0(1)	NM
<i>rimantadine hydrochloride</i> TABS 100mg	\$0(1)	
<i>valacyclovir hcl</i> TABS 1gm, 500mg	\$0(1)	
<i>valganciclovir hcl</i> SOLR 50mg/ml	\$0(2)	NDS
<i>valganciclovir hcl</i> TABS 450mg	\$0(1)	
VOSEVI TAB	\$0(2)	NDS, NM, PA
XOFLUZA TBPK 40mg, 80mg	\$0(2)	QL (1 tab / 180 days)
CEPHALOSPORINS - DRUGS TO TREAT INFECTIONS		
<i>cefaclor</i> CAPS 250mg, 500mg	\$0(1)	
<i>cefadroxil</i> CAPS 500mg; SUSR 250mg/5ml, 500mg/5ml	\$0(1)	
CEFAZOLIN SOLR 2gm, 3gm	\$0(2)	
CEFAZOLIN INJ 1GM/50ML	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cefazolin sodium</i> SOLR 1gm, 2gm, 3gm, 10gm, 500mg	\$0(1)	
CEFAZOLIN SOLN 2GM/100ML-4%	\$0(2)	
CEFAZOLIN/DEX SOL 1GM/50ML-4%	\$0(2)	
CEFAZOLIN/DEX SOL 2GM/50ML-3%	\$0(2)	
CEFAZOLIN/DEX SOL 3GM/50ML-2%	\$0(2)	
CEFAZOLIN/DEX SOL 3GM/150ML-4%	\$0(2)	
<i>cefdinir</i> CAPS 300mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)	
<i>cefepime hcl</i> SOLR 1gm, 2gm	\$0(1)	
<i>cefixime</i> CAPS 400mg; SUSR 100mg/5ml, 200mg/5ml	\$0(1)	
<i>cefotetan disodium</i> SOLR 1gm, 2gm	\$0(1)	
<i>cefoxitin sodium</i> SOLR 1gm, 2gm, 10gm	\$0(1)	
<i>cefpodoxime proxetil</i> SUSR 50mg/5ml, 100mg/5ml; TABS 100mg, 200mg	\$0(1)	
<i>cefprozil</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg	\$0(1)	
<i>ceftazidime</i> SOLR 1gm, 2gm, 6gm	\$0(1)	
<i>ceftriaxone sodium</i> SOLR 1gm, 2gm, 10gm, 250mg, 500mg	\$0(1)	
<i>cefuroxime axetil</i> TABS 250mg, 500mg	\$0(1)	
<i>cefuroxime sodium</i> SOLR 1.5gm, 750mg	\$0(1)	
<i>cephalexin</i> CAPS 250mg, 500mg; SUSR 125mg/5ml, 250mg/5ml	\$0(1)	
<i>tazicef</i> SOLR 1gm, 2gm, 6gm	\$0(1)	
TEFLARO SOLR 400mg, 600mg	\$0(2)	NDS
ERYTHROMYCINS/MACROLIDES - DRUGS TO TREAT INFECTIONS		
<i>azithromycin</i> PACK 1gm; SOLR 500mg; SUSR 100mg/5ml, 200mg/5ml; TABS 250mg, 500mg, 600mg	\$0(1)	
<i>clarithromycin</i> SUSR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg; TB24 500mg	\$0(1)	
DIFICID SUSR 40mg/ml; TABS 200mg	\$0(2)	NDS
<i>e.e.s. 400</i> TABS 400mg	\$0(1)	
<i>ery-tab</i> TBEC 250mg, 333mg, 500mg	\$0(1)	
ERYTHROCIN LACTOBIONATE SOLR 500mg	\$0(2)	
<i>erythromycin base</i> CPEP 250mg; TABS 250mg, 500mg; TBEC 250mg, 333mg, 500mg	\$0(1)	
<i>erythromycin ethylsuccinate</i> TABS 400mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>erythromycin lactobionate</i> SOLR 500mg	\$0(1)	
<i>fidaxomicin</i> TABS 200mg	\$0(2)	NDS
FLUOROQUINOLONES - DRUGS TO TREAT INFECTIONS		
<i>ciprofloxacin</i> 200 mg/100ml in d5w	\$0(1)	
<i>ciprofloxacin</i> 400 mg/200ml in d5w	\$0(1)	
<i>ciprofloxacin hcl</i> TABS 250mg, 500mg, 750mg	\$0(1)	
<i>levofloxacin</i> SOLN 25mg/ml; TABS 250mg, 500mg, 750mg	\$0(1)	
<i>levofloxacin</i> in d5w iv soln 250 mg/50ml	\$0(1)	
<i>levofloxacin</i> in d5w iv soln 500 mg/100ml	\$0(1)	
<i>levofloxacin</i> in d5w iv soln 750 mg/150ml	\$0(1)	
<i>moxifloxacin hcl</i> TABS 400mg	\$0(1)	
<i>moxifloxacin hcl</i> 400 mg/250ml in sodium chloride 0.8% inj	\$0(1)	
PENICILLINS - DRUGS TO TREAT INFECTIONS		
<i>amoxicillin</i> CAPS 250mg, 500mg; CHEW 125mg, 250mg; SUSR 125mg/5ml, 200mg/5ml, 250mg/5ml, 400mg/5ml; TABS 500mg, 875mg	\$0(1)	
<i>amoxicillin & k clavulanate</i> for susp 200-28.5 mg/5ml	\$0(1)	
<i>amoxicillin & k clavulanate</i> for susp 250-62.5 mg/5ml	\$0(1)	
<i>amoxicillin & k clavulanate</i> for susp 400-57 mg/5ml	\$0(1)	
<i>amoxicillin & k clavulanate</i> for susp 600-42.9 mg/5ml	\$0(1)	
<i>amoxicillin & k clavulanate</i> tab 250-125 mg	\$0(1)	
<i>amoxicillin & k clavulanate</i> tab 500-125 mg	\$0(1)	
<i>amoxicillin & k clavulanate</i> tab 875-125 mg	\$0(1)	
<i>amoxicillin & k clavulanate</i> tab er 12hr 1000-62.5 mg	\$0(1)	
<i>ampicillin</i> CAPS 500mg	\$0(1)	
<i>ampicillin & sulbactam</i> sodium for inj 1.5 (1-0.5) gm	\$0(1)	
<i>ampicillin & sulbactam</i> sodium for inj 3 (2-1) gm	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ampicillin & sulbactam sodium for iv soln 1.5 (1-0.5) gm</i>	\$0(1)	
<i>ampicillin & sulbactam sodium for iv soln 3 (2-1) gm</i>	\$0(1)	
<i>ampicillin & sulbactam sodium for iv soln 15 (10-5) gm</i>	\$0(1)	
<i>ampicillin sodium SOLR 1gm, 2gm, 10gm, 125mg, 250mg, 500mg</i>	\$0(1)	
<i>BICILLIN L-A SUSY 600000unit/ml, 1200000unit/2ml, 2400000unit/4ml</i>	\$0(2)	
<i>dicloxacillin sodium CAPS 250mg, 500mg</i>	\$0(1)	
<i>nafcillin sodium SOLR 1gm, 2gm</i>	\$0(1)	
<i>nafcillin sodium SOLR 10gm</i>	\$0(2)	NDS
<i>oxacillin sodium SOLR 1gm, 2gm, 10gm</i>	\$0(1)	
<i>penicillin g potassium SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>penicillin g sodium SOLR 5000000unit</i>	\$0(1)	
<i>penicillin v potassium SOLR 125mg/5ml, 250mg/5ml; TABS 250mg, 500mg</i>	\$0(1)	
<i>pfizerpen SOLR 5000000unit, 20000000unit</i>	\$0(1)	
<i>piperacillin sod-tazobactam na for inj 3.375 gm (3-0.375 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 2.25 gm (2-0.25 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 4.5 gm (4-0.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 13.5 gm (12-1.5 gm)</i>	\$0(1)	
<i>piperacillin sod-tazobactam sod for inj 40.5 gm (36-4.5 gm)</i>	\$0(1)	
TETRACYCLINES - DRUGS TO TREAT INFECTIONS		
<i>doxy 100 SOLR 100mg</i>	\$0(1)	
<i>doxycycline (monohydrate) CAPS 50mg, 100mg; SUSR 25mg/5ml; TABS 50mg, 75mg, 100mg</i>	\$0(1)	
<i>doxycycline hyclate CAPS 50mg, 100mg; SOLR 100mg; TABS 20mg, 100mg</i>	\$0(1)	
<i>minocycline hcl CAPS 50mg, 75mg, 100mg</i>	\$0(1)	
<i>NUZYRA SOLR 100mg</i>	\$0(2)	NDS, NM

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
NUZYRA TABS 150mg	\$0(2)	NDS, QL (30 tabs / 14 days), NM
<i>tetracycline hcl</i> CAPS 250mg, 500mg	\$0(1)	
<i>tigecycline</i> SOLR 50mg	\$0(2)	NDS
ANTINEOPLASTIC AGENTS - DRUGS TO TREAT CANCER		
ALKYLATING AGENTS		
BENDAMUSTINE HYDROCHLORID SOLN 100mg/4ml	\$0(2)	NDS, B/D, NM
BENDEKA SOLN 100mg/4ml	\$0(2)	NDS, B/D, NM
<i>carboplatin</i> SOLN 50mg/5ml, 150mg/15ml, 450mg/45ml, 600mg/60ml	\$0(1)	B/D
<i>cisplatin</i> SOLN 50mg/50ml, 100mg/100ml, 200mg/200ml	\$0(1)	B/D
<i>cyclophosphamide</i> CAPS 25mg, 50mg; SOLR 1gm, 500mg	\$0(1)	B/D
CYCLOPHOSPHAMIDE SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	\$0(2)	NDS, B/D, NM
CYCLOPHOSPHAMIDE SOLN 1gm/5ml, 500mg/2.5ml, 500mg/5ml, 1000mg/10ml, 2000mg/20ml	\$0(2)	NDS, B/D
<i>cyclophosphamide</i> SOLR 2gm	\$0(2)	NDS, B/D
CYCLOPHOSPHAMIDE TABS 25mg, 50mg	\$0(2)	B/D
CYCLOPHOSPHAMIDE MONOHYDR SOLN 2gm/10ml	\$0(2)	NDS, B/D
FRINDOVYX SOLN 1gm/2ml, 2gm/4ml, 500mg/ml	\$0(2)	NDS, B/D, NM
GLEOSTINE CAPS 10mg, 40mg	\$0(2)	NM
GLEOSTINE CAPS 100mg	\$0(2)	NDS, NM
LEUKERAN TABS 2mg	\$0(2)	NDS
<i>oxaliplatin</i> SOLN 50mg/10ml, 100mg/20ml, 200mg/40ml; SOLR 50mg	\$0(1)	B/D
<i>oxaliplatin</i> SOLR 100mg	\$0(2)	NDS, B/D
VIVIMUSTA SOLN 100mg/4ml	\$0(2)	NDS, B/D, NM
ANTIMETABOLITES		
<i>azacitidine</i> SUSR 100mg	\$0(2)	NDS, B/D, NM
<i>cytarabine</i> SOLN 20mg/ml	\$0(1)	B/D
<i>fluorouracil</i> SOLN 1gm/20ml, 2.5gm/50ml, 5gm/100ml, 500mg/10ml	\$0(1)	B/D
<i>gemcitabine hcl</i> SOLN 1gm/26.3ml, 2gm/52.6ml, 200mg/5.26ml; SOLR 1gm, 2gm, 200mg	\$0(1)	B/D
INQOVI TAB 35-100MG	\$0(2)	NDS, QL (5 tabs / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LONSURF TAB 15-6.14	\$0(2)	NDS, QL (100 tabs / 28 days), NM, PA
LONSURF TAB 20-8.19	\$0(2)	NDS, QL (80 tabs / 28 days), NM, PA
<i>mercaptopurine</i> SUSP 2000mg/100ml	\$0(2)	NDS, NM
<i>mercaptopurine</i> TABS 50mg	\$0(1)	
<i>methotrexate sodium</i> SOLN 1gm/40ml, 50mg/2ml, 250mg/10ml; SOLR 1gm	\$0(1)	B/D
ONUREG TABS 200mg, 300mg	\$0(2)	NDS, QL (14 tabs / 28 days), NM, PA
<i>pemetrexed disodium</i> SOLR 100mg, 500mg, 750mg, 1000mg	\$0(2)	NDS, B/D
PURIXAN SUSP 2000mg/100ml	\$0(2)	NDS, NM
TABLOID TABS 40mg	\$0(2)	NDS
<i>HORMONAL ANTINEOPLASTIC AGENTS</i>		
<i>abiraterone acetate</i> TABS 250mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
<i>abiraterone acetate</i> TABS 500mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>abirtega</i> TABS 250mg	\$0(1)	QL (120 tabs / 30 days), NM, PA
AKEEGA TAB 50/500MG	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
AKEEGA TAB 100/500	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>anastrozole</i> TABS 1mg	\$0(1)	
<i>bicalutamide</i> TABS 50mg	\$0(1)	
ELIGARD KIT 7.5mg, 22.5mg, 30mg, 45mg	\$0(2)	NM, PA
ERLEADA TABS 60mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
ERLEADA TABS 240mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
EULEXIN CAPS 125mg	\$0(2)	NDS
<i>exemestane</i> TABS 25mg	\$0(1)	
FIRMAGON SOLR 80mg	\$0(2)	NM, PA
FIRMAGON SOLR 120mg/vial	\$0(2)	NDS, NM, PA
<i>fulvestrant</i> SOSY 250mg/5ml	\$0(2)	NDS, B/D
<i>letrozole</i> TABS 2.5mg	\$0(1)	
<i>leuprolide acetate</i> KIT 1mg/0.2ml	\$0(1)	NM, PA
LUPRON DEPOT (1-MONTH) KIT 3.75mg	\$0(2)	NDS, NM, PA
LUPRON DEPOT (3-MONTH) KIT 11.25mg	\$0(2)	NDS, NM, PA
LYSODREN TABS 500mg	\$0(2)	NDS, NM
<i>megestrol acetate</i> TABS 20mg, 40mg	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>nilutamide</i> TABS 150mg	\$0(2)	NDS
NUBEQA TABS 300mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
ORGOVYX TABS 120mg	\$0(2)	NDS, NM, PA
ORSERDU TABS 86mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
ORSERDU TABS 345mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
SOLTAMOX SOLN 10mg/5ml	\$0(2)	NDS
<i>tamoxifen citrate</i> TABS 10mg, 20mg	\$0(1)	
<i>toremifene citrate</i> TABS 60mg	\$0(1)	PA
XTANDI CAPS 40mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
XTANDI TABS 40mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
XTANDI TABS 80mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
YONSA TABS 125mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
<i>IMMUNOMODULATORS</i>		
<i>lenalidomide</i> CAPS 2.5mg, 5mg, 10mg, 15mg	\$0(2)	NDS, QL (28 caps / 28 days), NM, PA
<i>lenalidomide</i> CAPS 20mg, 25mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, PA
POMALYST CAPS 1mg, 2mg, 3mg, 4mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, PA
THALOMID CAPS 50mg	\$0(2)	NDS, QL (84 caps / 28 days), NM, PA
THALOMID CAPS 100mg	\$0(2)	NDS, QL (112 caps / 28 days), NM, PA
THALOMID CAPS 150mg, 200mg	\$0(2)	NDS, QL (56 caps / 28 days), NM, PA
<i>MISCELLANEOUS</i>		
BESREMI SOSY 500mcg/ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
<i>bexarotene</i> CAPS 75mg	\$0(2)	NDS, QL (300 caps / 30 days), NM, PA
<i>doxorubicin hcl</i> SOLN 2mg/ml	\$0(1)	B/D
<i>doxorubicin hcl liposomal</i> SUSP 2mg/ml	\$0(2)	NDS, B/D
<i>hydroxyurea</i> CAPS 500mg	\$0(1)	
<i>irinotecan hcl</i> SOLN 40mg/2ml, 100mg/5ml, 300mg/15ml, 500mg/25ml	\$0(1)	B/D
IWILFIN TABS 192mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM, PA
MATULANE CAPS 50mg	\$0(2)	NDS, NM

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>tretinoin (chemotherapy)</i> CAPS 10mg	\$0(2)	NDS
WELIREG TABS 40mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
MITOTIC INHIBITORS		
<i>docetaxel</i> CONC 20mg/ml	\$0(1)	B/D
<i>docetaxel</i> CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
DOCETAXEL CONC 80mg/4ml, 160mg/8ml; SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D
DOCIVYX SOLN 20mg/2ml, 80mg/8ml, 160mg/16ml	\$0(2)	NDS, B/D, NM
<i>etoposide</i> SOLN 1gm/50ml, 100mg/5ml, 500mg/25ml	\$0(1)	B/D
<i>paclitaxel</i> CONC 6mg/ml, 30mg/5ml, 150mg/25ml, 300mg/50ml	\$0(1)	B/D
<i>paclitaxel inj</i> 100mg	\$0(2)	NDS, B/D, NM
<i>vincristine sulfate</i> SOLN 1mg/ml	\$0(1)	B/D
<i>vinorelbine tartrate</i> SOLN 10mg/ml, 50mg/5ml	\$0(1)	B/D
MOLECULAR TARGET AGENTS		
ALECENSA CAPS 150mg	\$0(2)	NDS, QL (240 caps / 30 days), NM, PA
ALUNBRIG TABS 30mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
ALUNBRIG TABS 90mg, 180mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
ALUNBRIG PAK	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
AUGTYRO CAPS 40mg	\$0(2)	NDS, QL (240 caps / 30 days), NM, PA
AUGTYRO CAPS 160mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
AVMAPKI PAK FAKZYNJA	\$0(2)	NDS, QL (1 pack / 28 days), NM, PA
AYVAKIT TABS 25mg, 50mg, 100mg, 200mg, 300mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
BALVERSA TABS 3mg	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
BALVERSA TABS 4mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
BALVERSA TABS 5mg	\$0(2)	NDS, QL (28 tabs / 28 days), NM, PA
BORTEZOMIB SOLR 1mg, 2.5mg	\$0(2)	NM, PA
<i>bortezomib</i> SOLR 3.5mg	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
BOSULIF CAPS 50mg	\$0(2)	NDS, QL (360 caps / 30 days), NM, PA
BOSULIF CAPS 100mg	\$0(2)	NDS, QL (150 caps / 25 days), NM, PA
BOSULIF TABS 100mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
BOSULIF TABS 400mg, 500mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
BRAFTOVI CAPS 75mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
BRUKINSA CAPS 80mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
CABOMETYX TABS 20mg, 40mg, 60mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
CALQUENCE TABS 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
CAPRELSA TABS 300mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
COMETRIQ (60MG DOSE) KIT 20mg	\$0(2)	NDS, QL (84 caps / 28 days), NM, PA
COMETRIQ KIT 100MG	\$0(2)	NDS, QL (56 caps / 28 days), NM, PA
COMETRIQ KIT 140MG	\$0(2)	NDS, QL (112 caps / 28 days), NM, PA
COPIKTRA CAPS 15mg, 25mg	\$0(2)	NDS, QL (56 caps / 28 days), NM, PA
COTELLIC TABS 20mg	\$0(2)	NDS, QL (63 tabs / 28 days), NM, PA
DANZITEN TABS 71mg, 95mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
<i>dasatinib</i> TABS 20mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>dasatinib</i> TABS 50mg, 70mg, 80mg, 100mg, 140mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
DAURISMO TABS 25mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
DAURISMO TABS 100mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
ERIVEDGE CAPS 150mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 25mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>erlotinib hcl</i> TABS 100mg, 150mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>everolimus</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 2mg	\$0(2)	NDS, QL (150 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 3mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>everolimus</i> TBSO 5mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
FOTIVDA CAPS .89mg, 1.34mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, PA
FRUZAQLA CAPS 1mg	\$0(2)	NDS, QL (84 caps / 28 days), NM, PA
FRUZAQLA CAPS 5mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, PA
GAVRETO CAPS 100mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
<i>gefitinib</i> TABS 250mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
GILOTRIF TABS 20mg, 30mg, 40mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
GOMEKLI CAPS 1mg	\$0(2)	NDS, QL (168 caps / 28 days), NM, PA
GOMEKLI CAPS 2mg	\$0(2)	NDS, QL (84 caps / 28 days), NM, PA
GOMEKLI TBSO 1mg	\$0(2)	NDS, QL (168 tabs / 28 days), NM, PA
HERCEP HYLEC SOL 60-10000	\$0(2)	NDS, NM, PA
HERCEPTIN SOLR 150mg	\$0(2)	NDS, NM, PA
HERZUMA SOLR 150mg, 420mg	\$0(2)	NDS, NM, PA
IBRANCE CAPS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 caps / 28 days), NM, PA
IBRANCE TABS 75mg, 100mg, 125mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, PA
IBTROZI CAPS 200mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
ICLUSIG TABS 10mg, 15mg, 30mg, 45mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
IDHIFA TABS 50mg, 100mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 100mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>imatinib mesylate</i> TABS 400mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
IMBRUVICA CAPS 70mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
IMBRUVICA CAPS 140mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
IMBRUVICA SUSP 70mg/ml	\$0(2)	NDS, QL (216 mL / 27 days), NM, PA
IMBRUVICA TABS 140mg, 280mg, 420mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
IMKELDI SOLN 80mg/ml	\$0(2)	NDS, QL (280 mL / 28 days), NM, PA
INLYTA TABS 1mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
INLYTA TABS 5mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
INREBIC CAPS 100mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
ITOVEBI TABS 3mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
ITOVEBI TABS 9mg	\$0(2)	NDS, QL (28 tabs / 28 days), NM, PA
JAKAFI TABS 5mg, 10mg, 15mg, 20mg, 25mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
JAYPIRCA TABS 50mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
JAYPIRCA TABS 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
KADCYLA SOLR 100mg, 160mg	\$0(2)	NDS, B/D, NM
KANJINTI SOLR 150mg, 420mg	\$0(2)	NDS, NM, PA
KEYTRUDA SOLN 100mg/4ml	\$0(2)	NDS, NM, PA
KISQALI 200 DOSE TBPK 200mg	\$0(2)	NDS, QL (21 tabs / 28 days), NM, PA
KISQALI 200 PAK FEMARA	\$0(2)	NDS, QL (49 tabs / 28 days), NM, PA
KISQALI 400 DOSE TBPK 200mg	\$0(2)	NDS, QL (42 tabs / 28 days), NM, PA
KISQALI 400 PAK FEMARA	\$0(2)	NDS, QL (70 tabs / 28 days), NM, PA
KISQALI 600 DOSE TBPK 200mg	\$0(2)	NDS, QL (63 tabs / 28 days), NM, PA
KISQALI 600 PAK FEMARA	\$0(2)	NDS, QL (91 tabs / 28 days), NM, PA
KOSELUGO CAPS 10mg	\$0(2)	NDS, QL (240 caps / 30 days), NM, PA
KOSELUGO CAPS 25mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
KRAZATI TABS 200mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
<i>lapatinib ditosylate</i> TABS 250mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
LAZCLUZE TABS 80mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
LAZCLUZE TABS 240mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
LENVIMA 4 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 8 MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA 10 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
LENVIMA 12MG DAILY DOSE CPPK 4mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA 20 MG DAILY DOSE CPPK 10mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 14 MG	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
LENVIMA CAP 18 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
LENVIMA CAP 24 MG	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
LORBRENA TABS 25mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
LORBRENA TABS 100mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
LUMAKRAS TABS 120mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM, PA
LUMAKRAS TABS 240mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
LUMAKRAS TABS 320mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
LYNPARZA TABS 100mg, 150mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
LYTGOBI (12 MG DAILY DOSE) TBPk 4mg	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
LYTGOBI (16 MG DAILY DOSE) TBPk 4mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
LYTGOBI (20 MG DAILY DOSE) TBPk 4mg	\$0(2)	NDS, QL (140 tabs / 28 days), NM, PA
MEKINIST SOLR .05mg/ml	\$0(2)	NDS, QL (1260 mL / 30 days), NM, PA
MEKINIST TABS 2mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
MEKINIST TABS .5mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
MEKTOVI TABS 15mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
MONJUVI SOLR 200mg	\$0(2)	NDS, NM, PA
NERLYNX TABS 40mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>nilotinib hcl</i> CAPS 50mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
<i>nilotinib hcl</i> CAPS 150mg, 200mg	\$0(2)	NDS, QL (112 caps / 28 days), NM, PA
NINLARO CAPS 2.3mg, 3mg, 4mg	\$0(2)	NDS, QL (3 caps / 28 days), NM, PA
ODOMZO CAPS 200mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
OGIVRI SOLR 150mg, 420mg	\$0(2)	NDS, NM, PA
OGSIVEO TABS 50mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
OGSIVEO TABS 100mg, 150mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
OJEMDA SUSR 25mg/ml	\$0(2)	NDS, QL (96 mL / 28 days), NM, PA
OJEMDA TABS 100mg	\$0(2)	NDS, QL (24 tabs / 28 days), NM, PA
OJJAARA TABS 100mg, 150mg, 200mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
ONTRUZANT SOLR 150mg, 420mg	\$0(2)	NDS, NM, PA
<i>pazopanib hcl</i> TABS 200mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
PEMAZYRE TABS 4.5mg, 9mg, 13.5mg	\$0(2)	NDS, QL (28 tabs / 28 days), NM, PA
PHESGO SOL	\$0(2)	NDS, NM, PA
PIQRAY 200MG DAILY DOSE TBPk 200mg	\$0(2)	NDS, QL (28 tabs / 28 days), NM, PA
PIQRAY 250MG TAB DOSE	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
PIQRAY 300MG DAILY DOSE TBPk 150mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
QINLOCK TABS 50mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO CAPS 40mg	\$0(2)	NDS, QL (240 caps / 30 days), NM, PA
RETEVMO CAPS 80mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
RETEVMO TABS 40mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
RETEVMO TABS 80mg, 120mg, 160mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
REVUFORJ TABS 25mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM, PA
REVUFORJ TABS 110mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
REVUFORJ TABS 160mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
REZLIDHIA CAPS 150mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
ROMVIMZA CAPS 14mg, 20mg, 30mg	\$0(2)	NDS, QL (8 caps / 28 days), NM, PA
ROZLYTREK CAPS 100mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
ROZLYTREK CAPS 200mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
ROZLYTREK PACK 50mg	\$0(2)	NDS, QL (336 packets / 28 days), NM, PA
RUBRACA TABS 200mg, 250mg, 300mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
RYDAPT CAPS 25mg	\$0(2)	NDS, QL (224 caps / 28 days), NM, PA
SCSEMBLIX TABS 20mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
SCSEMBLIX TABS 40mg	\$0(2)	NDS, QL (300 tabs / 30 days), NM, PA
SCSEMBLIX TABS 100mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
<i>sorafenib tosylate</i> TABS 200mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
STIVARGA TABS 40mg	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
<i>sunitinib malate</i> CAPS 12.5mg, 25mg, 37.5mg, 50mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
TABRECTA TABS 150mg, 200mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
TAFINLAR CAPS 50mg, 75mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
TAFINLAR TBSO 10mg	\$0(2)	NDS, QL (900 tabs / 30 days), NM, PA
TAGRISSO TABS 40mg, 80mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
TALZENNA CAPS .1mg, .35mg, .5mg, .75mg, 1mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
TALZENNA CAPS .25mg	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
TASIGNA CAPS 50mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
TASIGNA CAPS 150mg, 200mg	\$0(2)	NDS, QL (112 caps / 28 days), NM, PA
TAZVERIK TABS 200mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM, PA
TECENTRIQ SOLN 840mg/14ml, 1200mg/20ml	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TECENTRIQ INJ HYBREZA	\$0(2)	NDS, QL (1 vial / 21 days), NM, PA
TEPMETKO TABS 225mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
TIBSOVO TABS 250mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>torpenz</i> TABS 2.5mg, 5mg, 7.5mg, 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
TRAZIMERA SOLR 150mg, 420mg	\$0(2)	NDS, NM, PA
TRUQAP TABS 160mg, 200mg	\$0(2)	NDS, QL (64 tabs / 28 days), NM, PA
TRUQAP TBPk 160mg, 200mg	\$0(2)	NDS, QL (4 packs / 28 days), NM, PA
TRUXIMA SOLN 100mg/10ml, 500mg/50ml	\$0(2)	NDS, NM, PA
TUKYSA TABS 50mg, 150mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
TURALIO CAPS 125mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
VANFLYTA TABS 17.7mg, 26.5mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
VENCLEXTA TABS 10mg	\$0(2)	QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 50mg	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
VENCLEXTA TABS 100mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
VENCLEXTA TAB START PK	\$0(2)	NDS, QL (42 tabs / 28 days), NM, PA
VERZENIO TABS 50mg, 100mg, 150mg, 200mg	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
VITRAKVI CAPS 25mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
VITRAKVI CAPS 100mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
VITRAKVI SOLN 20mg/ml	\$0(2)	NDS, QL (300 mL / 30 days), NM, PA
VIZIMPRO TABS 15mg, 30mg, 45mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
VONJO CAPS 100mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
VORANIGO TABS 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
VORANIGO TABS 40mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
XALKORI CAPS 200mg, 250mg; CPSP 50mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
XALKORI CPSP 20mg	\$0(2)	NDS, QL (240 caps / 30 days), NM, PA
XALKORI CPSP 150mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
XOSPATA TABS 40mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 10mg	\$0(2)	NDS, QL (16 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG ONCE WEEKLY) TBPk 40mg	\$0(2)	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (40 MG TWICE WEEKLY) TBPk 40mg	\$0(2)	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG ONCE WEEKLY) TBPk 60mg	\$0(2)	NDS, QL (4 tabs / 28 days), NM, PA
XPOVIO PAK (60 MG TWICE WEEKLY) TBPk 20mg	\$0(2)	NDS, QL (24 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG ONCE WEEKLY) TBPk 40mg	\$0(2)	NDS, QL (8 tabs / 28 days), NM, PA
XPOVIO PAK (80 MG TWICE WEEKLY) TBPk 20mg	\$0(2)	NDS, QL (32 tabs / 28 days), NM, PA
XPOVIO PAK (100 MG ONCE WEEKLY) TBPk 50mg	\$0(2)	NDS, QL (8 tabs / 28 days), NM, PA
ZEJULA TABS 100mg, 200mg, 300mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
ZELBORAF TABS 240mg	\$0(2)	NDS, QL (240 tabs / 30 days), NM, PA
ZIRABEV SOLN 100mg/4ml, 400mg/16ml	\$0(2)	NDS, NM, PA
ZOLINZA CAPS 100mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
ZYDELIG TABS 100mg, 150mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
ZYKADIA TABS 150mg	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
PROTECTIVE AGENTS		
<i>leucovorin calcium</i> SOLN 500mg/50ml; SOLR 50mg, 100mg, 200mg, 350mg, 500mg	\$0(1)	B/D
<i>leucovorin calcium</i> TABS 5mg, 10mg, 15mg, 25mg	\$0(1)	
<i>mesna</i> TABS 400mg	\$0(2)	NDS
MESNEX TABS 400mg	\$0(2)	NDS

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CARDIOVASCULAR - DRUGS TO TREAT HEART AND CIRCULATION CONDITIONS		
ACE INHIBITOR COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>amlodipine besylate-benazepril hcl cap 2.5-10 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-10 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-20 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 5-40 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-20 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>amlodipine besylate-benazepril hcl cap 10-40 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>benazepril & hydrochlorothiazide tab 5- 6.25mg</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>benazepril & hydrochlorothiazide tab 20-25 mg</i>	\$0(1)	
<i>captopril & hydrochlorothiazide tab 25- 15 mg</i>	\$0(1)	
<i>captopril & hydrochlorothiazide tab 25- 25 mg</i>	\$0(1)	
<i>captopril & hydrochlorothiazide tab 50- 15 mg</i>	\$0(1)	
<i>captopril & hydrochlorothiazide tab 50- 25 mg</i>	\$0(1)	
<i>enalapril maleate & hydrochlorothiazide tab 5-12.5 mg</i>	\$0(1)	
<i>enalapril maleate & hydrochlorothiazide tab 10-25 mg</i>	\$0(1)	
<i>fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg</i>	\$0(1)	
<i>fosinopril sodium & hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	
<i>lisinopril & hydrochlorothiazide tab 10- 12.5 mg</i>	\$0(1)	
<i>lisinopril & hydrochlorothiazide tab 20- 12.5 mg</i>	\$0(1)	
<i>lisinopril & hydrochlorothiazide tab 20- 25 mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ACE INHIBITORS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>benazepril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	\$0(1)	
<i>captopril</i> TABS 12.5mg, 25mg, 50mg, 100mg	\$0(1)	
<i>enalapril maleate</i> TABS 2.5mg, 5mg, 10mg, 20mg	\$0(1)	
<i>fosinopril sodium</i> TABS 10mg, 20mg, 40mg	\$0(1)	
<i>lisinopril</i> TABS 2.5mg, 5mg, 10mg, 20mg, 30mg, 40mg	\$0(1)	
<i>moexipril hcl</i> TABS 7.5mg, 15mg	\$0(1)	
<i>perindopril erbumine</i> TABS 2mg, 4mg, 8mg	\$0(1)	
<i>quinapril hcl</i> TABS 5mg, 10mg, 20mg, 40mg	\$0(1)	
<i>ramipril</i> CAPS 1.25mg, 2.5mg, 5mg, 10mg	\$0(1)	
<i>trandolapril</i> TABS 1mg, 2mg, 4mg	\$0(1)	
ALDOSTERONE RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>eplerenone</i> TABS 25mg, 50mg	\$0(1)	
KERENDIA TABS 10mg, 20mg, 40mg	\$0(2)	QL (30 tabs / 30 days)
<i>spironolactone</i> TABS 25mg, 50mg, 100mg	\$0(1)	
ALPHA BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>doxazosin mesylate</i> TABS 1mg, 2mg, 4mg, 8mg	\$0(1)	
<i>prazosin hcl</i> CAPS 1mg, 2mg, 5mg	\$0(1)	
<i>terazosin hcl</i> CAPS 1mg, 2mg, 5mg, 10mg	\$0(1)	
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>amlodipine besylate-olmesartan medoxomil tab 5-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 5-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-olmesartan medoxomil tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5- 160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 5- 320 mg</i>	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>amlodipine besylate-valsartan tab 10-160 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>amlodipine besylate-valsartan tab 10-320 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>candesartan cilexetil-hydrochlorothiazide tab 32-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
ENTRESTO CAP 6-6MG	\$0(2)	QL (240 caps / 30 days)
ENTRESTO CAP 15-16MG	\$0(2)	QL (240 caps / 30 days)
<i>irbesartan-hydrochlorothiazide tab 150-12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>irbesartan-hydrochlorothiazide tab 300-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium & hydrochlorothiazide tab 50-12.5 mg</i>	\$0(1)	
<i>losartan potassium & hydrochlorothiazide tab 100-12.5 mg</i>	\$0(1)	
<i>losartan potassium & hydrochlorothiazide tab 100-25 mg</i>	\$0(1)	
<i>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>sacubitril-valsartan tab 24-26 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 49-51 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>sacubitril-valsartan tab 97-103 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 40-10 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan-amlodipine tab 80-10 mg</i>	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>telmisartan-hydrochlorothiazide tab 40-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>telmisartan-hydrochlorothiazide tab 80-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 80-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 160-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-12.5 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan-hydrochlorothiazide tab 320-25 mg</i>	\$0(1)	QL (30 tabs / 30 days)
ANGIOTENSIN II RECEPTOR ANTAGONISTS - DRUGS TO TREAT HIGH BLOOD PRESSURE		
<i>candesartan cilexetil TABS 4mg, 8mg, 16mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>candesartan cilexetil TABS 32mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>irbesartan TABS 75mg, 150mg, 300mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>losartan potassium TABS 25mg, 50mg, 100mg</i>	\$0(1)	
<i>olmesartan medoxomil TABS 5mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>olmesartan medoxomil TABS 20mg, 40mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>telmisartan TABS 20mg, 40mg, 80mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>valsartan TABS 40mg, 80mg, 160mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>valsartan TABS 320mg</i>	\$0(1)	QL (30 tabs / 30 days)
ANTIARRHYTHMICS - DRUGS TO CONTROL HEART RHYTHM		
<i>amiodarone hcl SOLN 50mg/ml, 150mg/3ml, 900mg/18ml; TABS 100mg, 200mg, 400mg</i>	\$0(1)	
<i>disopyramide phosphate CAPS 100mg, 150mg</i>	\$0(2)	
<i>dofetilide CAPS 125mcg, 250mcg, 500mcg</i>	\$0(1)	NM
<i>flecainide acetate TABS 50mg, 100mg, 150mg</i>	\$0(1)	
<i>MULTAQ TABS 400mg</i>	\$0(2)	QL (60 tabs / 30 days)
<i>pacerone TABS 100mg, 200mg, 400mg</i>	\$0(1)	
<i>propafenone hcl CP12 225mg, 325mg, 425mg; TABS 150mg, 225mg, 300mg</i>	\$0(1)	
<i>quinidine sulfate TABS 200mg, 300mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sotalol hcl</i> TABS 80mg, 120mg, 160mg, 240mg	\$0(1)	
<i>sotalol hcl (afib/afl)</i> TABS 80mg, 120mg, 160mg	\$0(1)	
ANTILIPEMICS, FIBRATES		
<i>fenofibrate</i> TABS 48mg, 54mg, 145mg, 160mg	\$0(1)	
<i>fenofibrate micronized</i> CAPS 67mg, 134mg, 200mg	\$0(1)	
<i>gemfibrozil</i> TABS 600mg	\$0(1)	
ANTILIPEMICS, HMG-CoA REDUCTASE INHIBITORS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>atorvastatin calcium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>lovastatin</i> TABS 10mg, 20mg, 40mg	\$0(1)	QL (60 tabs / 30 days)
<i>pravastatin sodium</i> TABS 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
<i>rosuvastatin calcium</i> TABS 5mg, 10mg, 20mg, 40mg	\$0(1)	QL (30 tabs / 30 days)
<i>simvastatin</i> TABS 5mg, 10mg, 20mg, 40mg, 80mg	\$0(1)	QL (30 tabs / 30 days)
ANTILIPEMICS, MISCELLANEOUS - DRUGS TO TREAT HIGH CHOLESTEROL		
<i>cholestyramine</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
<i>cholestyramine light</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
<i>colesevelam hcl</i> PACK 3.75gm; TABS 625mg	\$0(1)	
<i>colestipol hcl</i> GRAN 5gm; PACK 5gm; TABS 1gm	\$0(1)	
<i>ezetimibe</i> TABS 10mg	\$0(1)	
<i>ezetimibe-simvastatin tab 10-10 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-20 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-40 mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>ezetimibe-simvastatin tab 10-80 mg</i>	\$0(1)	QL (30 tabs / 30 days)
NEXLETOL TABS 180mg	\$0(2)	QL (30 tabs / 30 days)
NEXLIZET TAB 180/10MG	\$0(2)	QL (30 tabs / 30 days)
<i>niacin (antihyperlipidemic)</i> TBCR 500mg, 750mg, 1000mg	\$0(1)	QL (60 tabs / 30 days)
<i>omega-3-acid ethyl esters cap 1 gm</i>	\$0(1)	PA
<i>prevalite</i> PACK 4gm; POWD 4gm/dose	\$0(1)	
REPATHA SOSY 140mg/ml	\$0(2)	NM, PA
REPATHA PUSHTRONEX SYSTEM SOCT 420mg/3.5ml	\$0(2)	NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
REPATHA SURECLICK SOAJ 140mg/ml	\$0(2)	NM, PA
VASCEPA CAPS .5gm, 1gm	\$0(2)	
BETA-BLOCKER/DIURETIC COMBINATIONS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>atenolol & chlorthalidone tab 50-25 mg</i>	\$0(1)	
<i>atenolol & chlorthalidone tab 100-25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 5-6.25 mg</i>	\$0(1)	
<i>bisoprolol & hydrochlorothiazide tab 10-6.25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 50-25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 100-25 mg</i>	\$0(1)	
<i>metoprolol & hydrochlorothiazide tab 100-50 mg</i>	\$0(1)	
BETA-BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>acebutolol hcl CAPS 200mg, 400mg</i>	\$0(1)	
<i>atenolol TABS 25mg, 50mg, 100mg</i>	\$0(1)	
<i>betaxolol hcl TABS 10mg, 20mg</i>	\$0(1)	
<i>bisoprolol fumarate TABS 5mg, 10mg</i>	\$0(1)	
<i>carvedilol TABS 3.125mg, 6.25mg, 12.5mg, 25mg</i>	\$0(1)	
<i>labetalol hcl TABS 100mg, 200mg, 300mg</i>	\$0(1)	
<i>metoprolol succinate TB24 25mg, 50mg, 100mg, 200mg</i>	\$0(1)	
<i>metoprolol tartrate SOLN 5mg/5ml; TABS 25mg, 50mg, 100mg</i>	\$0(1)	
<i>nadolol TABS 20mg, 40mg, 80mg</i>	\$0(1)	
<i>nebivolol hcl TABS 2.5mg, 5mg, 10mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>nebivolol hcl TABS 20mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>pindolol TABS 5mg, 10mg</i>	\$0(1)	
<i>propranolol hcl CP24 60mg, 80mg, 120mg, 160mg; SOLN 20mg/5ml, 40mg/5ml; TABS 10mg, 20mg, 40mg, 60mg, 80mg</i>	\$0(1)	
<i>timolol maleate TABS 5mg, 10mg, 20mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CALCIUM CHANNEL BLOCKERS - DRUGS TO TREAT HIGH BLOOD PRESSURE AND HEART CONDITIONS		
<i>amlodipine besylate</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	
<i>cartia xt</i> CP24 120mg, 180mg, 240mg, 300mg	\$0(1)	
<i>dilt-xr</i> CP24 120mg, 180mg, 240mg	\$0(1)	
<i>diltiazem hcl</i> CP12 60mg, 90mg, 120mg; SOLN 25mg/5ml, 50mg/10ml, 125mg/25ml; TABS 30mg, 60mg, 90mg, 120mg	\$0(1)	
<i>diltiazem hcl coated beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg	\$0(1)	
<i>diltiazem hcl extended release beads</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)	
<i>felodipine</i> TB24 2.5mg, 5mg, 10mg	\$0(1)	
<i>isradipine</i> CAPS 2.5mg, 5mg	\$0(1)	
<i>nicardipine hcl</i> CAPS 20mg, 30mg	\$0(1)	
<i>nifedipine</i> TB24 30mg, 60mg, 90mg	\$0(1)	
<i>nimodipine</i> CAPS 30mg	\$0(1)	
<i>tiadylt er</i> CP24 120mg, 180mg, 240mg, 300mg, 360mg, 420mg	\$0(1)	
<i>verapamil hcl</i> CP24 100mg, 120mg, 180mg, 200mg, 240mg, 300mg, 360mg; SOLN 2.5mg/ml; TABS 40mg, 80mg, 120mg; TBCR 120mg, 180mg, 240mg	\$0(1)	
DIURETICS - DRUGS TO TREAT HEART CONDITIONS		
<i>acetazolamide</i> CP12 500mg; TABS 125mg, 250mg	\$0(1)	
<i>amiloride & hydrochlorothiazide tab</i> 5-50 mg	\$0(1)	
<i>amiloride hcl</i> TABS 5mg	\$0(1)	
<i>bumetanide</i> SOLN .25mg/ml; TABS .5mg, 1mg, 2mg	\$0(1)	
<i>chlorthalidone</i> TABS 25mg, 50mg	\$0(1)	
<i>furosemide</i> SOLN 10mg/ml, 40mg/5ml; TABS 20mg, 40mg, 80mg	\$0(1)	
<i>furosemide inj</i> SOLN 10mg/ml	\$0(1)	
<i>hydrochlorothiazide</i> CAPS 12.5mg; TABS 12.5mg, 25mg, 50mg	\$0(1)	
<i>indapamide</i> TABS 1.25mg, 2.5mg	\$0(1)	
<i>methazolamide</i> TABS 25mg, 50mg	\$0(1)	
<i>metolazone</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>spironolactone & hydrochlorothiazide tab 25-25 mg</i>	\$0(1)	
<i>torsemide TABS 5mg, 10mg, 20mg, 100mg</i>	\$0(1)	
<i>triamterene & hydrochlorothiazide cap 37.5-25 mg</i>	\$0(1)	
<i>triamterene & hydrochlorothiazide tab 37.5-25 mg</i>	\$0(1)	
<i>triamterene & hydrochlorothiazide tab 75-50 mg</i>	\$0(1)	
MISCELLANEOUS		
<i>aliskiren fumarate TABS 150mg, 300mg</i>	\$0(1)	
<i>clonidine PTWK .1mg/24hr, .2mg/24hr, .3mg/24hr</i>	\$0(1)	
<i>clonidine hcl TABS .1mg, .2mg, .3mg</i>	\$0(1)	
<i>CORLANOR SOLN 5mg/5ml</i>	\$0(2)	QL (450 mL / 30 days)
<i>digoxin SOLN .05mg/ml, .25mg/ml</i>	\$0(1)	
<i>digoxin TABS 125mcg, 250mcg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>droxidopa CAPS 100mg</i>	\$0(2)	NDS, QL (90 caps / 30 days), NM, PA
<i>droxidopa CAPS 200mg, 300mg</i>	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
<i>epinephrine (anaphylaxis) SOLN 1mg/ml</i>	\$0(1)	
<i>guanfacine hcl TABS 1mg, 2mg</i>	\$0(2)	PA; PA applies if 70 years and older
<i>hydralazine hcl SOLN 20mg/ml; TABS 10mg, 25mg, 50mg, 100mg</i>	\$0(1)	
<i>ivabradine hcl TABS 5mg, 7.5mg</i>	\$0(1)	QL (60 tabs / 30 days)
<i>metyrosine CAPS 250mg</i>	\$0(2)	NDS, NM, PA
<i>midodrine hcl TABS 2.5mg, 5mg, 10mg</i>	\$0(1)	
<i>minoxidil TABS 2.5mg, 10mg</i>	\$0(1)	
<i>ranolazine TB12 500mg, 1000mg</i>	\$0(1)	
<i>VERQUVO TABS 2.5mg, 5mg, 10mg</i>	\$0(2)	QL (30 tabs / 30 days), PA
NITRATES - DRUGS TO TREAT HEART CONDITIONS		
<i>isosorbide dinitrate TABS 5mg, 10mg, 20mg, 30mg</i>	\$0(1)	
<i>isosorbide mononitrate TB24 30mg, 60mg, 120mg</i>	\$0(1)	
<i>NITRO-BID OINT 2%</i>	\$0(2)	
<i>nitroglycerin PT24 .1mg/hr, .2mg/hr, .4mg/hr, .6mg/hr; SOLN .4mg/spray; SUBL .3mg, .4mg, .6mg</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>PULMONARY ARTERIAL HYPERTENSION - DRUGS TO TREAT PULMONARY HYPERTENSION</i>		
<i>alyq</i> TABS 20mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>ambrisentan</i> TABS 5mg, 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
<i>bosentan</i> TABS 62.5mg, 125mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>bosentan</i> TBSO 32mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
OPSUMIT TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
<i>sildenafil citrate (pulmonary hypertension)</i> TABS 20mg	\$0(1)	QL (360 tabs / 30 days), NM, PA
<i>tadalafil (pulmonary hypertension)</i> TABS 20mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
<i>treprostinil</i> SOLN 20mg/20ml, 50mg/20ml, 100mg/20ml, 200mg/20ml	\$0(2)	NDS, NM, PA
YUTREPIA CAPS 26.5mcg, 53mcg, 79.5mcg	\$0(2)	NDS, QL (140 caps / 28 days), NM, PA
YUTREPIA CAPS 106mcg	\$0(2)	NDS, QL (224 caps / 28 days), NM, PA
<i>CENTRAL NERVOUS SYSTEM - DRUGS TO TREAT NERVOUS SYSTEM DISORDERS</i>		
<i>ANTIANXIETY - DRUGS TO TREAT ANXIETY</i>		
<i>alprazolam</i> TABS .25mg, .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
<i>buspirone hcl</i> TABS 5mg, 7.5mg, 10mg, 15mg, 30mg	\$0(1)	
<i>fluvoxamine maleate</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>lorazepam</i> CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)
<i>lorazepam</i> SOLN 4mg/ml, 20mg/10ml	\$0(1)	
<i>lorazepam</i> TABS .5mg, 1mg, 2mg	\$0(1)	QL (150 tabs / 30 days)
<i>lorazepam intensol</i> CONC 2mg/ml	\$0(1)	QL (150 mL / 30 days)
<i>ANTIDEMENTIA - DRUGS TO TREAT DEMENTIA AND MEMORY LOSS</i>		
<i>donepezil hydrochloride</i> TABS 5mg; TBDP 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>donepezil hydrochloride</i> TABS 10mg; TBDP 10mg	\$0(1)	
<i>galantamine hydrobromide</i> CP24 8mg, 16mg, 24mg	\$0(1)	QL (30 caps / 30 days)
<i>galantamine hydrobromide</i> SOLN 4mg/ml	\$0(1)	QL (200 mL / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>galantamine hydrobromide</i> TABS 4mg, 8mg, 12mg	\$0(1)	QL (60 tabs / 30 days)
<i>memantine hcl</i> CP24 7mg, 14mg, 21mg, 28mg; SOLN 2mg/ml; TABS 5mg, 10mg	\$0(1)	PA; PA applies if 29 years and younger
<i>memantine hcl tab</i> 28 x 5 mg & 21 x 10 mg titration pack	\$0(1)	PA; PA applies if 29 years and younger
<i>memantine hcl-donepezil hcl cap er</i> 24hr 14-10 mg	\$0(1)	
<i>memantine hcl-donepezil hcl cap er</i> 24hr 21-10 mg	\$0(1)	
<i>memantine hcl-donepezil hcl cap er</i> 24hr 28-10 mg	\$0(1)	
NAMZARIC CAP 7-10MG	\$0(2)	
NAMZARIC CAP 14-10MG	\$0(2)	
NAMZARIC CAP 21-10MG	\$0(2)	
NAMZARIC CAP 28-10MG	\$0(2)	
NAMZARIC CAP PACK	\$0(2)	
<i>rivastigmine</i> PT24 4.6mg/24hr, 9.5mg/24hr, 13.3mg/24hr	\$0(1)	QL (30 patches / 30 days)
<i>rivastigmine tartrate</i> CAPS 1.5mg, 3mg, 4.5mg, 6mg	\$0(1)	QL (60 caps / 30 days)
ANTIDEPRESSANTS - DRUGS TO TREAT DEPRESSION		
<i>amitriptyline hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	\$0(2)	
<i>amoxapine</i> TABS 25mg, 50mg, 100mg, 150mg	\$0(2)	
AUVELITY TAB 45-105MG	\$0(2)	QL (60 tabs / 30 days), PA
<i>bupropion hcl</i> TABS 75mg, 100mg	\$0(1)	
<i>bupropion hcl</i> TB12 100mg, 150mg, 200mg; TB24 150mg	\$0(1)	QL (60 tabs / 30 days)
<i>bupropion hcl</i> TB24 300mg	\$0(1)	QL (30 tabs / 30 days)
<i>citalopram hydrobromide</i> SOLN 10mg/5ml; TABS 10mg, 20mg, 40mg	\$0(1)	
<i>clomipramine hcl</i> CAPS 25mg, 50mg, 75mg	\$0(2)	PA
<i>desipramine hcl</i> TABS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg	\$0(2)	
<i>desvenlafaxine succinate</i> TB24 25mg, 50mg, 100mg	\$0(1)	QL (30 tabs / 30 days)
<i>doxepin hcl</i> CAPS 10mg, 25mg, 50mg, 75mg, 100mg, 150mg; CONC 10mg/ml	\$0(2)	
DRIZALMA SPRINKLE CSDR 20mg, 30mg, 40mg, 60mg	\$0(2)	QL (60 caps / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>duloxetine hcl</i> CPEP 20mg, 30mg, 60mg	\$0(1)	QL (60 caps / 30 days)
EMSAM PT24 6mg/24hr, 9mg/24hr, 12mg/24hr	\$0(2)	NDS, QL (30 patches / 30 days), PA
<i>escitalopram oxalate</i> SOLN 5mg/5ml; TABS 5mg, 10mg, 20mg	\$0(1)	
FETZIMA CP24 20mg, 40mg	\$0(2)	QL (60 caps / 30 days), PA
FETZIMA CP24 80mg, 120mg	\$0(2)	QL (30 caps / 30 days), PA
FETZIMA CAP TITRATIO	\$0(2)	QL (2 packs / year), PA
<i>fluoxetine hcl</i> CAPS 10mg, 20mg, 40mg; SOLN 20mg/5ml	\$0(1)	
<i>imipramine hcl</i> TABS 10mg, 25mg, 50mg	\$0(2)	
MARPLAN TABS 10mg	\$0(2)	QL (180 tabs / 30 days)
<i>mirtazapine</i> TABS 7.5mg, 15mg, 30mg, 45mg; TBDP 15mg, 30mg, 45mg	\$0(1)	
<i>nefazodone hcl</i> TABS 50mg, 100mg, 150mg, 200mg, 250mg	\$0(1)	
<i>nortriptyline hcl</i> CAPS 10mg, 25mg, 50mg, 75mg; SOLN 10mg/5ml	\$0(2)	
<i>paroxetine hcl</i> SUSP 10mg/5ml	\$0(2)	QL (900 mL / 30 days), PA
<i>paroxetine hcl</i> TABS 10mg, 20mg, 30mg, 40mg	\$0(2)	
<i>phenelzine sulfate</i> TABS 15mg	\$0(1)	
<i>protriptyline hcl</i> TABS 5mg, 10mg	\$0(2)	
RALDESY SOLN 10mg/ml	\$0(2)	QL (1800 mL / 30 days), PA
<i>sertraline hcl</i> CONC 20mg/ml; TABS 25mg, 50mg, 100mg	\$0(1)	
<i>tranylcypromine sulfate</i> TABS 10mg	\$0(1)	
<i>trazodone hcl</i> TABS 50mg, 100mg, 150mg	\$0(1)	
<i>trimipramine maleate</i> CAPS 25mg, 50mg	\$0(2)	QL (120 caps / 30 days)
<i>trimipramine maleate</i> CAPS 100mg	\$0(2)	QL (60 caps / 30 days)
TRINTELLIX TABS 5mg, 10mg, 20mg	\$0(2)	QL (30 tabs / 30 days), PA
<i>venlafaxine hcl</i> CP24 37.5mg, 75mg, 150mg; TABS 25mg, 37.5mg, 50mg, 75mg, 100mg	\$0(1)	
<i>vilazodone hcl</i> TABS 10mg, 20mg, 40mg	\$0(1)	QL (30 tabs / 30 days)
ZURZUVAE CAPS 20mg, 25mg	\$0(2)	NDS, QL (28 caps / 14 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ZURZUVAE CAPS 30mg	\$0(2)	NDS, QL (14 caps / 14 days), NM, PA
ANTIPARKINSONIAN AGENTS - DRUGS TO TREAT PARKINSONS DISEASE		
<i>amantadine hcl</i> CAPS 100mg	\$0(1)	QL (120 caps / 30 days)
<i>amantadine hcl</i> SOLN 50mg/5ml; TABS 100mg	\$0(1)	
<i>benztropine mesylate</i> SOLN 1mg/ml	\$0(1)	
<i>benztropine mesylate</i> TABS .5mg, 1mg, 2mg	\$0(2)	PA; PA applies if 70 years and older
<i>bromocriptine mesylate</i> CAPS 5mg; TABS 2.5mg	\$0(1)	
<i>carb/levo orally disintegrating tab</i> 10-100mg	\$0(1)	
<i>carb/levo orally disintegrating tab</i> 25-100mg	\$0(1)	
<i>carb/levo orally disintegrating tab</i> 25-250mg	\$0(1)	
<i>carbidopa & levodopa tab</i> 10-100 mg	\$0(1)	
<i>carbidopa & levodopa tab</i> 25-100 mg	\$0(1)	
<i>carbidopa & levodopa tab</i> 25-250 mg	\$0(1)	
<i>carbidopa & levodopa tab er</i> 25-100 mg	\$0(1)	
<i>carbidopa & levodopa tab er</i> 50-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 12.5-50-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 18.75-75-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 25-100-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 31.25-125-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 37.5-150-200 mg	\$0(1)	
<i>carbidopa-levodopa-entacapone tabs</i> 50-200-200 mg	\$0(1)	
<i>entacapone</i> TABS 200mg	\$0(1)	
INBRIJA CAPS 42mg	\$0(2)	NDS, QL (300 caps / 30 days), NM, PA
<i>pramipexole dihydrochloride</i> TABS .125mg, .25mg, .5mg, .75mg, 1mg, 1.5mg	\$0(1)	
<i>rasagiline mesylate</i> TABS .5mg, 1mg	\$0(1)	QL (30 tabs / 30 days)
<i>ropinirole hydrochloride</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg, 5mg	\$0(1)	
<i>selegiline hcl</i> CAPS 5mg; TABS 5mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>trihexyphenidyl hcl</i> SOLN .4mg/ml; TABS 2mg, 5mg	\$0(2)	PA; PA applies if 70 years and older
ANTIPSYCHOTICS - DRUGS TO TREAT PSYCHOSES		
ABILIFY ASIMTUFII PRSY 720mg/2.4ml, 960mg/3.2ml	\$0(2)	NDS, QL (1 syringe / 56 days)
ABILIFY MAINTENA PRSY 300mg, 400mg	\$0(2)	NDS, QL (1 syringe / 28 days)
ABILIFY MAINTENA SRER 300mg, 400mg	\$0(2)	NDS, QL (1 injection / 28 days)
<i>aripiprazole</i> SOLN 1mg/ml	\$0(1)	QL (900 mL / 30 days)
<i>aripiprazole</i> TABS 2mg, 5mg, 10mg, 15mg, 20mg, 30mg	\$0(1)	QL (30 tabs / 30 days)
<i>aripiprazole</i> TBDP 10mg, 15mg	\$0(1)	QL (60 tabs / 30 days), ST
ARISTADA PRSY 441mg/1.6ml, 662mg/2.4ml, 882mg/3.2ml	\$0(2)	NDS, QL (1 syringe / 28 days)
ARISTADA PRSY 1064mg/3.9ml	\$0(2)	NDS, QL (1 syringe / 56 days)
ARISTADA INITIO PRSY 675mg/2.4ml	\$0(2)	NDS
<i>asenapine maleate</i> SUBL 2.5mg, 5mg, 10mg	\$0(1)	QL (60 tabs / 30 days)
CAPLYTA CAPS 10.5mg, 21mg, 42mg	\$0(2)	NDS, QL (30 caps / 30 days)
<i>chlorpromazine hcl</i> CONC 30mg/ml, 100mg/ml; SOLN 25mg/ml, 50mg/2ml; TABS 10mg, 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>clozapine</i> TABS 25mg, 50mg	\$0(1)	
<i>clozapine</i> TABS 100mg	\$0(1)	QL (270 tabs / 30 days)
<i>clozapine</i> TABS 200mg	\$0(1)	QL (120 tabs / 30 days)
<i>clozapine</i> TBDP 12.5mg, 25mg	\$0(1)	PA
<i>clozapine</i> TBDP 100mg	\$0(1)	QL (270 tabs / 30 days), PA
<i>clozapine</i> TBDP 150mg	\$0(1)	QL (180 tabs / 30 days), PA
<i>clozapine</i> TBDP 200mg	\$0(1)	QL (120 tabs / 30 days), PA
COBENFY CAP 50-20MG	\$0(2)	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 100-20MG	\$0(2)	NDS, QL (60 caps / 30 days), PA
COBENFY CAP 125-30MG	\$0(2)	NDS, QL (60 caps / 30 days), PA
COBENFY STRT CAP PACK	\$0(2)	NDS, QL (2 packs / year), PA
ERZOFRI SUSY 39mg/0.25ml	\$0(2)	QL (1 syringe / 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ERZOFRI SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	\$0(2)	NDS, QL (1 syringe / 28 days)
ERZOFRI SUSY 351mg/2.25ml	\$0(2)	NDS, QL (2 syringes / year)
FANAPT TABS 1mg, 2mg, 4mg, 6mg, 8mg, 10mg, 12mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
FANAPT PAK PACK A	\$0(2)	QL (2 packs / year), PA
FANAPT PAK PACK C	\$0(2)	QL (2 packs / year), PA
<i>fluphenazine decanoate</i> SOLN 25mg/ml	\$0(1)	
<i>fluphenazine hcl</i> CONC 5mg/ml; ELIX 2.5mg/5ml; SOLN 2.5mg/ml; TABS 1mg, 2.5mg, 5mg, 10mg	\$0(1)	
<i>haloperidol</i> TABS .5mg, 1mg, 2mg, 5mg, 10mg, 20mg	\$0(1)	
<i>haloperidol decanoate</i> SOLN 50mg/ml, 100mg/ml	\$0(1)	
<i>haloperidol lactate</i> CONC 2mg/ml; SOLN 5mg/ml	\$0(1)	
INVEGA HAFYERA SUSY 1092mg/3.5ml, 1560mg/5ml	\$0(2)	NDS, QL (1 injection / 180 days)
INVEGA SUSTENNA SUSY 39mg/0.25ml	\$0(2)	QL (1 syringe / 28 days)
INVEGA SUSTENNA SUSY 78mg/0.5ml, 117mg/0.75ml, 156mg/ml, 234mg/1.5ml	\$0(2)	NDS, QL (1 syringe / 28 days)
INVEGA TRINZA SUSY 273mg/0.88ml, 410mg/1.32ml, 546mg/1.75ml, 819mg/2.63ml	\$0(2)	NDS, QL (1 syringe / 90 days)
<i>loxapine succinate</i> CAPS 5mg, 10mg, 25mg, 50mg	\$0(1)	
<i>lurasidone hcl</i> TABS 20mg, 40mg, 60mg, 120mg	\$0(1)	QL (30 tabs / 30 days)
<i>lurasidone hcl</i> TABS 80mg	\$0(1)	QL (60 tabs / 30 days)
LYBALVI TAB 5-10MG	\$0(2)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 10-10MG	\$0(2)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 15-10MG	\$0(2)	NDS, QL (30 tabs / 30 days)
LYBALVI TAB 20-10MG	\$0(2)	NDS, QL (30 tabs / 30 days)
<i>molindone hcl</i> TABS 5mg, 10mg, 25mg	\$0(1)	
NUPLAZID CAPS 34mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
NUPLAZID TABS 10mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>olanzapine</i> SOLR 10mg	\$0(1)	QL (3 vials / 1 day)
<i>olanzapine</i> TABS 2.5mg, 5mg, 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>olanzapine</i> TABS 7.5mg, 15mg, 20mg	\$0(1)	QL (30 tabs / 30 days)
<i>olanzapine</i> TBDP 5mg, 15mg, 20mg	\$0(1)	QL (30 tabs / 30 days), ST
<i>olanzapine</i> TBDP 10mg	\$0(1)	QL (60 tabs / 30 days), ST
OPIPZA FILM 2mg, 5mg	\$0(2)	NDS, QL (30 films / 30 days), PA
OPIPZA FILM 10mg	\$0(2)	NDS, QL (90 films / 30 days), PA
<i>paliperidone</i> TB24 1.5mg, 3mg, 9mg	\$0(1)	QL (30 tabs / 30 days)
<i>paliperidone</i> TB24 6mg	\$0(1)	QL (60 tabs / 30 days)
<i>perphenazine</i> TABS 2mg, 4mg, 8mg, 16mg	\$0(1)	
<i>pimozide</i> TABS 1mg, 2mg	\$0(1)	
<i>quetiapine fumarate</i> TABS 25mg	\$0(1)	QL (180 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 50mg, 100mg, 150mg, 200mg	\$0(1)	QL (90 tabs / 30 days)
<i>quetiapine fumarate</i> TABS 300mg, 400mg	\$0(1)	QL (60 tabs / 30 days)
<i>quetiapine fumarate</i> TB24 50mg, 300mg, 400mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>quetiapine fumarate</i> TB24 150mg, 200mg	\$0(1)	QL (30 tabs / 30 days), PA
REXULTI TABS 3mg, 4mg	\$0(2)	NDS, QL (30 tabs / 30 days)
REXULTI TABS .25mg, .5mg, 1mg, 2mg	\$0(2)	NDS, QL (60 tabs / 30 days)
<i>risperidone</i> SOLN 1mg/ml	\$0(1)	QL (240 mL / 30 days)
<i>risperidone</i> TABS .25mg, .5mg, 1mg, 2mg, 3mg, 4mg	\$0(1)	
<i>risperidone</i> TBDP 1mg, 2mg, 3mg	\$0(1)	QL (60 tabs / 30 days), ST
<i>risperidone</i> TBDP 4mg	\$0(1)	QL (120 tabs / 30 days), ST
<i>risperidone</i> TBDP .25mg, .5mg	\$0(1)	QL (90 tabs / 30 days), ST
<i>risperidone microspheres</i> SRER 12.5mg, 25mg	\$0(1)	QL (2 injections / 28 days)
<i>risperidone microspheres</i> SRER 37.5mg, 50mg	\$0(2)	NDS, QL (2 injections / 28 days)
SECUADO PT24 3.8mg/24hr, 5.7mg/24hr, 7.6mg/24hr	\$0(2)	NDS, QL (30 patches / 30 days)
<i>thioridazine hcl</i> TABS 10mg, 25mg, 50mg, 100mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>thiothixene</i> CAPS 1mg, 2mg, 5mg, 10mg	\$0(1)	
<i>trifluoperazine hcl</i> TABS 1mg, 2mg, 5mg, 10mg	\$0(1)	
VERSACLOZ SUSP 50mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
VRAYLAR CAPS 1.5mg	\$0(2)	NDS, QL (60 caps / 30 days)
VRAYLAR CAPS 3mg, 4.5mg, 6mg	\$0(2)	NDS, QL (30 caps / 30 days)
<i>ziprasidone hcl</i> CAPS 20mg, 40mg, 60mg, 80mg	\$0(1)	QL (60 caps / 30 days)
<i>ziprasidone mesylate</i> SOLR 20mg	\$0(1)	QL (6 injections / 3 days)
ZYPREXA RELPREVV SUSR 210mg	\$0(2)	QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 300mg	\$0(2)	NDS, QL (2 vials / 28 days), NM, PA
ZYPREXA RELPREVV SUSR 405mg	\$0(2)	NDS, QL (1 vial / 28 days), NM, PA
ANTISEIZURE AGENTS		
APTIOM TABS 200mg, 400mg	\$0(2)	NDS, QL (30 tabs / 30 days)
APTIOM TABS 600mg, 800mg	\$0(2)	NDS, QL (60 tabs / 30 days)
BRIVIACT SOLN 10mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), PA
BRIVIACT TABS 10mg, 25mg, 50mg, 75mg, 100mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
<i>carbamazepine</i> CHEW 100mg, 200mg; CP12 100mg, 200mg, 300mg; SUSP 100mg/5ml; TABS 200mg; TB12 100mg, 200mg, 400mg	\$0(1)	
<i>clobazam</i> SUSP 2.5mg/ml	\$0(1)	QL (480 mL / 30 days), PA
<i>clobazam</i> TABS 10mg, 20mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>clonazepam</i> TABS 2mg; TBDP 2mg	\$0(1)	QL (300 tabs / 30 days)
<i>clonazepam</i> TABS .5mg, 1mg; TBDP .125mg, .25mg, .5mg, 1mg	\$0(1)	QL (90 tabs / 30 days)
<i>clorazepate dipotassium</i> TABS 3.75mg, 7.5mg, 15mg	\$0(1)	QL (180 tabs / 30 days), PA; PA applies if 65 years and older
DIACOMIT CAPS 250mg	\$0(2)	NDS, QL (360 caps / 30 days), NM, PA
DIACOMIT CAPS 500mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
DIACOMIT PACK 250mg	\$0(2)	NDS, QL (360 packets / 30 days), NM, PA
DIACOMIT PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, PA
<i>diazepam</i> SOLN 5mg/5ml	\$0(1)	QL (1200 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam</i> TABS 2mg, 5mg, 10mg	\$0(1)	QL (120 tabs / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
<i>diazepam (anticonvulsant)</i> GEL 2.5mg, 10mg, 20mg	\$0(1)	
<i>diazepam inj</i> SOLN 5mg/ml	\$0(1)	
<i>diazepam intensol</i> CONC 5mg/ml	\$0(1)	QL (240 mL / 30 days), PA; PA applies if 65 years and older when greater than 5 day supply
DILANTIN CAPS 30mg	\$0(2)	
<i>divalproex sodium</i> CSDR 125mg; TB24 250mg, 500mg; TBEC 125mg, 250mg, 500mg	\$0(1)	
EPIDIOLEX SOLN 100mg/ml	\$0(2)	NDS, QL (600 mL / 30 days), NM, PA
<i>epitol</i> TABS 200mg	\$0(1)	
EPRONTIA SOLN 25mg/ml	\$0(2)	QL (480 mL / 30 days), PA
<i>eslicarbazepine acetate</i> TABS 200mg, 400mg	\$0(1)	QL (30 tabs / 30 days)
<i>eslicarbazepine acetate</i> TABS 600mg, 800mg	\$0(1)	QL (60 tabs / 30 days)
<i>ethosuximide</i> CAPS 250mg; SOLN 250mg/5ml	\$0(1)	
<i>felbamate</i> SUSP 600mg/5ml; TABS 400mg, 600mg	\$0(1)	
FINTEPLA SOLN 2.2mg/ml	\$0(2)	NDS, QL (360 mL / 30 days), NM, PA
FYCOMPA SUSP .5mg/ml	\$0(2)	NDS, QL (720 mL / 30 days), PA
FYCOMPA TABS 2mg	\$0(2)	QL (60 tabs / 30 days), PA
FYCOMPA TABS 4mg, 6mg, 8mg, 10mg, 12mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>gabapentin</i> CAPS 100mg, 300mg	\$0(1)	QL (360 caps / 30 days)
<i>gabapentin</i> CAPS 400mg	\$0(1)	QL (270 caps / 30 days)
<i>gabapentin</i> SOLN 250mg/5ml, 300mg/6ml	\$0(1)	QL (2160 mL / 30 days)
<i>gabapentin</i> TABS 600mg	\$0(1)	QL (180 tabs / 30 days)
<i>gabapentin</i> TABS 800mg	\$0(1)	QL (120 tabs / 30 days)
<i>lacosamide</i> SOLN 200mg/20ml	\$0(1)	
<i>lacosamide</i> TABS 50mg	\$0(1)	QL (120 tabs / 30 days)
<i>lacosamide</i> TABS 100mg, 150mg, 200mg	\$0(1)	QL (60 tabs / 30 days)
<i>lacosamide oral</i> SOLN 10mg/ml	\$0(1)	QL (1200 mL / 30 days)
<i>lamotrigine</i> CHEW 5mg, 25mg; TABS 25mg, 100mg, 150mg, 200mg	\$0(1)	
<i>lamotrigine</i> TB24 25mg, 50mg, 100mg, 200mg, 250mg, 300mg	\$0(1)	ST
<i>levetiracetam</i> SOLN 100mg/ml, 500mg/5ml; TABS 250mg, 500mg, 750mg, 1000mg; TB24 500mg, 750mg	\$0(1)	
LEVETIRACETAM TB3D 250mg	\$0(2)	QL (360 tabs / 30 days)
<i>levetiracetam in sodium chloride iv soln</i> 500 mg/100ml	\$0(1)	
<i>levetiracetam in sodium chloride iv soln</i> 1000 mg/100ml	\$0(1)	
<i>levetiracetam in sodium chloride iv soln</i> 1500 mg/100ml	\$0(1)	
<i>methsuximide</i> CAPS 300mg	\$0(1)	
NAYZILAM SOLN 5mg/0.1ml	\$0(2)	QL (10 nasal units per 30 days)
<i>oxcarbazepine</i> SUSP 300mg/5ml; TABS 150mg, 300mg, 600mg	\$0(1)	
<i>perampanel</i> TABS 2mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>perampanel</i> TABS 4mg, 6mg, 8mg, 10mg, 12mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA
<i>phenobarbital</i> ELIX 20mg/5ml	\$0(2)	QL (1500 mL / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital</i> TABS 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg, 100mg	\$0(2)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older
<i>phenobarbital sodium</i> SOLN 65mg/ml, 130mg/ml	\$0(2)	PA; PA applies if 70 years and older
<i>phenytek</i> CAPS 200mg, 300mg	\$0(1)	
<i>phenytoin</i> CHEW 50mg; SUSP 125mg/5ml	\$0(1)	
<i>phenytoin sodium</i> SOLN 50mg/ml	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>phenytoin sodium extended</i> CAPS 100mg, 200mg, 300mg	\$0(1)	
<i>pregabalin</i> CAPS 25mg, 50mg, 75mg, 100mg, 150mg	\$0(1)	QL (120 caps / 30 days), PA
<i>pregabalin</i> CAPS 200mg	\$0(1)	QL (90 caps / 30 days), PA
<i>pregabalin</i> CAPS 225mg, 300mg	\$0(1)	QL (60 caps / 30 days), PA
<i>pregabalin</i> SOLN 20mg/ml	\$0(1)	QL (900 mL / 30 days), PA
<i>primidone</i> TABS 50mg, 125mg, 250mg	\$0(1)	
<i>roweepra</i> TABS 500mg	\$0(1)	
<i>rufinamide</i> SUSP 40mg/ml	\$0(2)	NDS, QL (2400 mL / 30 days), PA
<i>rufinamide</i> TABS 200mg	\$0(1)	QL (480 tabs / 30 days), PA
<i>rufinamide</i> TABS 400mg	\$0(2)	NDS, QL (240 tabs / 30 days), PA
SPRITAM TB3D 250mg	\$0(2)	QL (360 tabs / 30 days)
SPRITAM TB3D 500mg	\$0(2)	QL (180 tabs / 30 days)
SPRITAM TB3D 750mg	\$0(2)	QL (120 tabs / 30 days)
SPRITAM TB3D 1000mg	\$0(2)	QL (90 tabs / 30 days)
<i>subvenite</i> TABS 25mg, 100mg, 150mg, 200mg	\$0(1)	
SYMPAZAN FILM 5mg, 10mg, 20mg	\$0(2)	NDS, QL (60 films / 30 days), PA
<i>tiagabine hcl</i> TABS 2mg, 4mg, 12mg, 16mg	\$0(1)	
<i>topiramate</i> CPSP 15mg, 25mg, 50mg; TABS 25mg, 50mg, 100mg, 200mg	\$0(1)	
<i>topiramate</i> SOLN 25mg/ml	\$0(1)	QL (480 mL / 30 days), PA
<i>valproate sodium</i> SOLN 100mg/ml, 250mg/5ml	\$0(1)	
<i>valproic acid</i> CAPS 250mg	\$0(1)	
VALTOCO 5 MG DOSE LIQD 5mg/0.1ml	\$0(2)	QL (10 blister packs per 30 days)
VALTOCO 10 MG DOSE LIQD 10mg/0.1ml	\$0(2)	QL (10 blister packs per 30 days)
VALTOCO 15 MG DOSE LQPK 7.5mg/0.1ml	\$0(2)	QL (10 blister packs per 30 days)
VALTOCO 20 MG DOSE LQPK 10mg/0.1ml	\$0(2)	QL (10 blister packs per 30 days)
<i>vigabatrin</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>vigabatrin</i> TABS 500mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
<i>vigadrone</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, PA
<i>vigadrone</i> TABS 500mg	\$0(2)	NDS, QL (180 tabs / 30 days), NM, PA
VIGAFYDE SOLN 100mg/ml	\$0(2)	NDS, QL (900 mL / 30 days), NM, PA
<i>vigpoder</i> PACK 500mg	\$0(2)	NDS, QL (180 packets / 30 days), NM, PA
XCOPRI TABS 25mg, 50mg, 100mg	\$0(2)	NDS, QL (30 tabs / 30 days)
XCOPRI TABS 150mg, 200mg	\$0(2)	NDS, QL (60 tabs / 30 days)
XCOPRI PAK 12.5-25	\$0(2)	QL (28 tabs / 28 days)
XCOPRI PAK 50-100MG	\$0(2)	NDS, QL (28 tabs / 28 days)
XCOPRI PAK 100-150	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (MAINTENANCE)	\$0(2)	NDS, QL (56 tabs / 28 days)
XCOPRI PAK 150-200MG (TITRATION)	\$0(2)	NDS, QL (28 tabs / 28 days)
ZONISADE SUSP 100mg/5ml	\$0(2)	NDS, QL (900 mL / 30 days), PA
<i>zonisamide</i> CAPS 25mg, 50mg, 100mg	\$0(1)	
ZTALMY SUSP 50mg/ml	\$0(2)	NDS, QL (1100 mL / 30 days), NM, PA

ATTENTION DEFICIT HYPERACTIVITY DISORDER - DRUGS TO TREAT ADHD

<i>amphetamine-dextroamphetamine cap er 24hr 5 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 10 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 15 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 20 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 25 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine cap er 24hr 30 mg</i>	\$0(1)	QL (30 caps / 30 days), PA
<i>amphetamine-dextroamphetamine tab 5 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 7.5 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>amphetamine-dextroamphetamine tab 10 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 12.5 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 15 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 20 mg</i>	\$0(1)	QL (90 tabs / 30 days), PA
<i>amphetamine-dextroamphetamine tab 30 mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>atomoxetine hcl CAPS 10mg, 18mg, 25mg</i>	\$0(1)	QL (120 caps / 30 days)
<i>atomoxetine hcl CAPS 40mg</i>	\$0(1)	QL (60 caps / 30 days)
<i>atomoxetine hcl CAPS 60mg, 80mg, 100mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>dexmethylphenidate hcl TABS 2.5mg, 5mg</i>	\$0(1)	QL (120 tabs / 30 days), PA
<i>dexmethylphenidate hcl TABS 10mg</i>	\$0(1)	QL (60 tabs / 30 days), PA
<i>guanfacine hcl (adhd) TB24 1mg, 2mg, 4mg</i>	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older
<i>guanfacine hcl (adhd) TB24 3mg</i>	\$0(2)	QL (60 tabs / 30 days), PA; PA applies if 70 years and older
<i>methylphenidate hcl SOLN 5mg/5ml</i>	\$0(1)	QL (1800 mL / 30 days), PA
<i>methylphenidate hcl SOLN 10mg/5ml</i>	\$0(1)	QL (900 mL / 30 days), PA
<i>methylphenidate hcl TABS 5mg, 10mg</i>	\$0(1)	QL (180 tabs / 30 days), PA
<i>methylphenidate hcl TABS 20mg; TBCR 10mg, 20mg</i>	\$0(1)	QL (90 tabs / 30 days), PA
HYPNOTICS - DRUGS TO TREAT INSOMNIA		
<i>DAYVIGO TABS 5mg, 10mg</i>	\$0(2)	QL (30 tabs / 30 days)
<i>doxepin hcl (sleep) TABS 3mg, 6mg</i>	\$0(1)	QL (30 tabs / 30 days)
<i>eszopiclone TABS 1mg, 2mg, 3mg</i>	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>tasimelteon CAPS 20mg</i>	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA
<i>temazepam CAPS 7.5mg, 30mg</i>	\$0(1)	QL (30 caps / 30 days), PA; PA applies if 65 years and older

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>temazepam</i> CAPS 15mg	\$0(1)	QL (60 caps / 30 days), PA; PA applies if 65 years and older
<i>zaleplon</i> CAPS 5mg	\$0(2)	QL (30 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zaleplon</i> CAPS 10mg	\$0(2)	QL (60 caps / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
<i>zolpidem tartrate</i> TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days), PA; PA applies if 70 years and older after a 90 day supply in a calendar year
MIGRAINE - DRUGS TO TREAT SEVERE HEADACHES		
AIMOVIG SOAJ 70mg/ml, 140mg/ml	\$0(2)	QL (1 pen / 30 days), NM, PA
<i>dihydroergotamine mesylate</i> SOLN 1mg/ml	\$0(2)	NDS
<i>dihydroergotamine mesylate</i> SOLN 4mg/ml	\$0(2)	NDS, QL (8 mL / 30 days), PA
EMGALITY SOAJ 120mg/ml	\$0(2)	QL (2 pens / 30 days), NM, PA
EMGALITY SOSY 100mg/ml	\$0(2)	QL (3 syringes / 30 days), NM, PA
EMGALITY SOSY 120mg/ml	\$0(2)	QL (2 syringes / 30 days), NM, PA
<i>ergotamine w/ caffeine tab</i> 1-100 mg	\$0(1)	QL (40 tabs / 28 days), PA
<i>naratriptan hcl</i> TABS 1mg, 2.5mg	\$0(1)	QL (12 tabs / 30 days)
NURTEC TBDP 75mg	\$0(2)	QL (16 tabs / 30 days), PA
QULIPTA TABS 10mg, 30mg, 60mg	\$0(2)	QL (30 tabs / 30 days), PA
<i>rizatriptan benzoate</i> TABS 5mg, 10mg; TBDP 5mg, 10mg	\$0(1)	QL (18 tabs / 30 days)
<i>sumatriptan</i> SOLN 5mg/act	\$0(1)	QL (24 units / 30 days)
<i>sumatriptan</i> SOLN 20mg/act	\$0(1)	QL (12 units / 30 days)
<i>sumatriptan succinate</i> SOAJ 4mg/0.5ml; SOCT 4mg/0.5ml	\$0(1)	QL (18 injections / 30 days)
<i>sumatriptan succinate</i> SOAJ 6mg/0.5ml; SOCT 6mg/0.5ml; SOLN 6mg/0.5ml	\$0(1)	QL (12 injections / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sumatriptan succinate</i> TABS 25mg, 50mg, 100mg	\$0(1)	QL (12 tabs / 30 days)
UBRELVY TABS 50mg, 100mg	\$0(2)	QL (16 tabs / 30 days), PA
MISCELLANEOUS		
AUSTEDO TABS 6mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO TABS 9mg, 12mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 6mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
AUSTEDO XR TB24 12mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
AUSTEDO XR TB24 18mg, 24mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
AUSTEDO XR TB24 30mg, 36mg, 42mg, 48mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
AUSTEDO XR TAB TITR KIT	\$0(2)	NDS, QL (2 packs / year), NM, PA
<i>lithium</i> SOLN 8meq/5ml	\$0(1)	
<i>lithium carbonate</i> CAPS 150mg, 300mg, 600mg; TABS 300mg; TBCR 300mg, 450mg	\$0(1)	
NUEDEXTA CAP 20-10MG	\$0(2)	NDS, QL (60 caps / 30 days), PA
<i>pyridostigmine bromide</i> TABS 60mg	\$0(1)	
<i>riluzole</i> TABS 50mg	\$0(1)	
<i>tetrabenazine</i> TABS 12.5mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>tetrabenazine</i> TABS 25mg	\$0(2)	NDS, QL (120 tabs / 30 days), NM, PA
MULTIPLE SCLEROSIS AGENTS - DRUGS TO TREAT MULTIPLE SCLEROSIS		
BAFIERTAM CPDR 95mg	\$0(2)	NDS, QL (120 caps / 30 days), NM, PA
BETASERON KIT .3mg	\$0(2)	NDS, QL (14 syringes / 28 days), NM, PA
COPAXONE SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
COPAXONE SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA
<i>dalfampridine</i> TB12 10mg	\$0(1)	QL (60 tabs / 30 days), NM, PA
<i>fingolimod hcl</i> CAPS .5mg	\$0(2)	NDS, QL (30 caps / 30 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>glatiramer acetate</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatiramer acetate</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA
<i>glatopa</i> SOSY 20mg/ml	\$0(2)	NDS, QL (30 syringes / 30 days), NM, PA
<i>glatopa</i> SOSY 40mg/ml	\$0(2)	NDS, QL (12 syringes / 28 days), NM, PA
KESIMPTA SOAJ 20mg/0.4ml	\$0(2)	NDS, QL (16 pens / 365 days), NM, PA

MUSCULOSKELETAL THERAPY AGENTS - DRUGS TO TREAT MUSCLE SPASMS

<i>baclofen</i> TABS 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>baclofen</i> TABS 10mg, 20mg	\$0(1)	
<i>carisoprodol</i> TABS 350mg	\$0(2)	QL (120 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>cyclobenzaprine hcl</i> TABS 5mg, 10mg	\$0(2)	QL (90 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>dantrolene sodium</i> CAPS 25mg, 50mg, 100mg	\$0(1)	
<i>methocarbamol</i> TABS 500mg	\$0(2)	QL (360 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>methocarbamol</i> TABS 750mg	\$0(2)	QL (240 tabs / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>tizanidine hcl</i> TABS 2mg, 4mg	\$0(1)	

NARCOLEPSY/CATAPLEXY - DRUGS FOR SLEEP DISORDERS

<i>armodafinil</i> TABS 50mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>armodafinil</i> TABS 150mg, 200mg, 250mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 100mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>modafinil</i> TABS 200mg	\$0(1)	QL (60 tabs / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SODIUM OXYBATE SOLN 500mg/ml	\$0(2)	NDS, QL (540 mL / 30 days), NM, PA
PSYCHOTHERAPEUTIC-MISC		
<i>acamprosate calcium</i> TBEC 333mg	\$0(1)	
<i>acetaminophen pm</i>	\$0(3)	*
<i>acetaminophen pm extra st</i>	\$0(3)	*
<i>buprenorphine hcl</i> SUBL 2mg, 8mg	\$0(1)	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>4-1 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>8-2 mg (base equiv)</i>	\$0(1)	QL (90 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl film</i> <i>12-3 mg (base equiv)</i>	\$0(1)	QL (60 films / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>2-0.5 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>buprenorphine hcl-naloxone hcl sl tab</i> <i>8-2 mg (base equiv)</i>	\$0(1)	QL (90 tabs / 30 days)
<i>bupropion hcl (smoking deterrent)</i> TB12 150mg	\$0(1)	QL (60 tabs / 30 days)
<i>disulfiram</i> TABS 250mg, 500mg	\$0(1)	
<i>ft nicotine</i> LOZG 2mg, 4mg	\$0(3)	*
<i>ft nighttime sleep aid</i> TABS 25mg	\$0(3)	*
<i>ft pain reliever pm extra</i>	\$0(3)	*
<i>ft sleep aid</i> TABS 25mg	\$0(3)	*
<i>ft sleep-aid maximum stre</i> CAPS 50mg	\$0(3)	*
<i>gnp nicotine gum</i> GUM 2mg, 4mg	\$0(3)	*
<i>gnp nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	*
<i>gnp nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	*
<i>gnp nicotine transdermal</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	*
<i>gnp nighttime sleep-aid m</i> CAPS 50mg	\$0(3)	*
<i>gnp pain relief extra str</i>	\$0(3)	*
<i>gnp sleep aid</i> LIQD 50mg/30ml; TABS 25mg	\$0(3)	*
<i>gnp sleep aid nighttime</i> TABS 25mg	\$0(3)	*
<i>goodsense nicotine</i> LOZG 2mg, 4mg	\$0(3)	*
<i>goodsense nicotine polacr</i> GUM 2mg, 4mg; LOZG 4mg	\$0(3)	*
<i>goodsense sleeptime</i> CAPS 25mg; LIQD 50mg/30ml	\$0(3)	*
<i>hm nicotine polacrilex</i> LOZG 2mg	\$0(3)	*
<i>naloxone hcl</i> LIQD 4mg/0.1ml	\$0(3)	NM; *

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>naloxone hcl</i> LIQD 4mg/0.1ml; SOCT .4mg/ml; SOLN .4mg/ml, 4mg/10ml; SOSY .4mg/ml, 2mg/2ml	\$0(1)	
<i>naltrexone hcl</i> TABS 50mg	\$0(1)	
NARCAN LIQD 4mg/0.1ml	\$0(3)	NM; *
<i>nicotine</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	*
<i>nicotine mini lozenge</i> LOZG 2mg, 4mg	\$0(3)	*
<i>nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	*
<i>nicotine polacrilex mini</i> LOZG 2mg	\$0(3)	*
NICOTINE SYS KIT TRANSDER	\$0(3)	*
<i>nicotine transdermal syst</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	*
NICOTROL INHALER INHA 10mg	\$0(2)	
NICOTROL NS SOLN 10mg/ml	\$0(2)	
<i>nighttime sleep aid</i> TABS 25mg	\$0(3)	*
<i>sleep aid</i> LIQD 50mg/30ml; TABS 25mg	\$0(3)	*
<i>sleep tabs</i> TABS 25mg	\$0(3)	*
<i>sleep-aid</i> CAPS 25mg, 50mg; TABS 25mg	\$0(3)	*
<i>sm nicotine</i> GUM 4mg; LOZG 2mg	\$0(3)	*
<i>sm nicotine polacrilex</i> GUM 2mg, 4mg; LOZG 2mg, 4mg	\$0(3)	*
<i>sm nicotine transdermal s</i> PT24 7mg/24hr, 14mg/24hr, 21mg/24hr	\$0(3)	*
<i>varenicline tartrate</i> TABS .5mg, 1mg	\$0(1)	QL (56 tabs / 28 days)
<i>varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack</i>	\$0(1)	QL (2 packs / year)
VIVITROL SUSR 380mg	\$0(2)	NDS, NM

ENDOCRINE AND METABOLIC - DRUGS TO TREAT DIABETES AND REGULATE HORMONES

ANDROGENS - DRUGS TO REGULATE MALE HORMONES

<i>danazol</i> CAPS 50mg, 100mg, 200mg	\$0(1)	
<i>depo-testosterone</i> SOLN 100mg/ml, 200mg/ml	\$0(1)	PA
<i>methyletestosterone</i> CAPS 10mg	\$0(2)	NDS, QL (600 caps / 30 days), PA
<i>testosterone</i> GEL 1%, 25mg/2.5gm, 50mg/5gm	\$0(1)	QL (300 gm / 30 days), PA
<i>testosterone cypionate</i> SOLN 100mg/ml, 200mg/ml	\$0(1)	PA
<i>testosterone enanthate</i> SOLN 200mg/ml	\$0(1)	PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>testosterone pump</i> GEL 1.62%	\$0(1)	QL (150 gm / 30 days), PA
ANTIDIABETICS		
<i>acarbose</i> TABS 25mg, 50mg, 100mg	\$0(1)	
<i>FARXIGA</i> TABS 5mg, 10mg	\$0(2)	QL (30 tabs / 30 days)
<i>glimepiride</i> TABS 1mg, 2mg	\$0(1)	QL (90 tabs / 30 days)
<i>glimepiride</i> TABS 4mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide</i> TABS 5mg	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide</i> TABS 10mg	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide xl</i> TB24 2.5mg, 5mg	\$0(1)	QL (90 tabs / 30 days)
<i>glipizide xl</i> TB24 10mg	\$0(1)	QL (60 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-250 mg</i>	\$0(1)	QL (240 tabs / 30 days)
<i>glipizide-metformin hcl tab 2.5-500 mg</i>	\$0(1)	QL (120 tabs / 30 days)
<i>glipizide-metformin hcl tab 5-500 mg</i>	\$0(1)	QL (120 tabs / 30 days)
<i>GLYXAMBI</i> TAB 10-5 MG	\$0(2)	QL (30 tabs / 30 days)
<i>GLYXAMBI</i> TAB 25-5 MG	\$0(2)	QL (30 tabs / 30 days)
<i>JANUMET</i> TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)
<i>JANUMET</i> TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)
<i>JANUMET XR</i> TAB 50-500MG	\$0(2)	QL (60 tabs / 30 days)
<i>JANUMET XR</i> TAB 50-1000	\$0(2)	QL (60 tabs / 30 days)
<i>JANUMET XR</i> TAB 100-1000	\$0(2)	QL (30 tabs / 30 days)
<i>JANUVIA</i> TABS 25mg, 50mg, 100mg	\$0(2)	QL (30 tabs / 30 days)
<i>JARDIANCE</i> TABS 10mg, 25mg	\$0(2)	QL (30 tabs / 30 days)
<i>JENTADUETO</i> TAB 2.5-500	\$0(2)	QL (60 tabs / 30 days)
<i>JENTADUETO</i> TAB 2.5-850	\$0(2)	QL (60 tabs / 30 days)
<i>JENTADUETO</i> TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
<i>JENTADUETO</i> TAB XR 2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
<i>JENTADUETO</i> TAB XR 5-1000MG	\$0(2)	QL (30 tabs / 30 days)
<i>metformin hcl</i> TABS 500mg	\$0(1)	QL (150 tabs / 30 days)
<i>metformin hcl</i> TABS 850mg	\$0(1)	QL (90 tabs / 30 days)
<i>metformin hcl</i> TABS 1000mg	\$0(1)	QL (75 tabs / 30 days)
<i>metformin hcl</i> TB24 500mg	\$0(1)	QL (120 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>metformin hcl</i> TB24 750mg	\$0(1)	QL (60 tabs / 30 days); (generic of GLUCOPHAGE XR)
<i>MOUNJARO</i> SOAJ 2.5mg/0.5ml, 5mg/0.5ml, 7.5mg/0.5ml, 10mg/0.5ml, 12.5mg/0.5ml, 15mg/0.5ml	\$0(2)	QL (4 pens / 28 days), PA
<i>nateglinide</i> TABS 60mg, 120mg	\$0(1)	QL (90 tabs / 30 days)
<i>OZEMPIC</i> (0.25 OR 0.5MG/DOSE) <i>SOPN</i> 2mg/3ml	\$0(2)	QL (1 pen / 28 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
OZEMPIC (1MG/DOSE) SOPN 4mg/3ml	\$0(2)	QL (1 pen / 28 days), PA
OZEMPIC (2MG/DOSE) SOPN 8mg/3ml	\$0(2)	QL (1 pen / 28 days), PA
pioglitazone hcl TABS 15mg, 30mg, 45mg	\$0(1)	QL (30 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-500 mg	\$0(1)	QL (90 tabs / 30 days)
pioglitazone hcl-metformin hcl tab 15-850 mg	\$0(1)	QL (90 tabs / 30 days)
repaglinide TABS 2mg	\$0(1)	QL (240 tabs / 30 days)
repaglinide TABS .5mg, 1mg	\$0(1)	QL (120 tabs / 30 days)
RYBELSUS TABS 3mg, 7mg, 14mg	\$0(2)	QL (30 tabs / 30 days), PA
SYNJARDY TAB 5-500MG	\$0(2)	QL (120 tabs / 30 days)
SYNJARDY TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-500	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY TAB 12.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 10-1000	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 12.5-1000	\$0(2)	QL (60 tabs / 30 days)
SYNJARDY XR TAB 25-1000	\$0(2)	QL (30 tabs / 30 days)
TRADJENTA TABS 5mg	\$0(2)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 5-2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 10-5-1000MG	\$0(2)	QL (30 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 12.5-2.5-1000MG	\$0(2)	QL (60 tabs / 30 days)
TRIJARDY XR TAB ER 24HR 25-5-1000MG	\$0(2)	QL (30 tabs / 30 days)
TRULICITY SOAJ .75mg/0.5ml, 1.5mg/0.5ml, 3mg/0.5ml, 4.5mg/0.5ml	\$0(2)	QL (4 pens / 28 days), PA
XIGDUO XR TAB 2.5-1000	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-500MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 5-1000MG	\$0(2)	QL (60 tabs / 30 days)
XIGDUO XR TAB 10-500MG	\$0(2)	QL (30 tabs / 30 days)
XIGDUO XR TAB 10-1000	\$0(2)	QL (30 tabs / 30 days)
ANTIDIABETICS, INSULINS		
ADMELOG SOLN 100unit/ml	\$0(2)	
ADMELOG SOLOSTAR SOPN 100unit/ml	\$0(2)	
ALCOHOL SWABS: BD-EMBECTA/MHC/RUGBY	\$0(2)	PA
BASAGLAR KWIKPEN SOPN 100unit/ml	\$0(2)	
CEQUR SIMPL KIT PATCH 2U (3-DAY)	\$0(2)	QL (10 patches / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
CEQUR SIMPL KIT PATCH 2U (4-DAY)	\$0(2)	QL (8 patches / 24 days), PA
CEQUR SIMPL MIS INSERTER	\$0(2)	QL (2 inserters / year), PA
FIASP SOLN 100unit/ml	\$0(2)	
FIASP FLEXTOUCH SOPN 100unit/ml	\$0(2)	
FIASP PENFILL SOCT 100unit/ml	\$0(2)	
FIASP PUMPCART SOCT 100unit/ml	\$0(2)	B/D
GAUZE PADS 2" X 2"	\$0(2)	PA
HUMULIN R U-500 (CONCENTR SOLN 500unit/ml	\$0(2)	NDS, B/D
HUMULIN R U-500 KWIKPEN SOPN 500unit/ml	\$0(2)	NDS
INSULIN PEN NEEDLES: BD-EMBECTA	\$0(2)	PA
INSULIN SAFETY NEEDLES: BD-EMBECTA	\$0(2)	PA
INSULIN SYRINGES: BD-EMBECTA	\$0(2)	PA
NOVOLIN INJ 70/30	\$0(2)	(brand RELION not covered)
NOVOLIN INJ 70/30 FP	\$0(2)	(brand RELION not covered)
NOVOLIN N SUSP 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN N FLEXPEN SUPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R SOLN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLIN R FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG SOLN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG FLEXPEN SOPN 100unit/ml	\$0(2)	(brand RELION not covered)
NOVOLOG MIX INJ 70/30	\$0(2)	(brand RELION not covered)
NOVOLOG MIX INJ FLEXPEN	\$0(2)	(brand RELION not covered)
NOVOLOG PENFILL SOCT 100unit/ml	\$0(2)	(brand RELION not covered)
OMNIPOD 5 DX KIT INT G7G6	\$0(2)	QL (1 kit / year), PA
OMNIPOD 5 DX MIS POD G7G6	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD 5 G7 KIT INTRO	\$0(2)	QL (1 kit / year), PA
OMNIPOD 5 G7 MIS PODS	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD 5 L2 KIT INTRO G6	\$0(2)	QL (1 kit / year), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
OMNIPOD 5 L2 MIS PODS G6	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD DASH KIT INTRO	\$0(2)	QL (1 kit / year), PA
OMNIPOD DASH MIS PODS	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 10UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 15UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 20UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 25UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 30UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 35UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD GO KIT 40UNT/DY	\$0(2)	QL (15 pods / 30 days), PA
OMNIPOD MIS CLASSIC	\$0(2)	QL (15 pods / 30 days), PA
SOLIQUA INJ 100/33	\$0(2)	QL (5 pens / 25 days)
TOUJEO MAX SOLOSTAR SOPN 300unit/ml	\$0(2)	
TOUJEO SOLOSTAR SOPN 300unit/ml	\$0(2)	
TRESIBA SOLN 100unit/ml	\$0(2)	
TRESIBA FLEXTOUCH SOPN 100unit/ml, 200unit/ml	\$0(2)	
XULTOPHY INJ 100/3.6	\$0(2)	QL (5 pens / 30 days)
<i>CALCIUM REGULATORS</i>		
<i>alendronate sodium</i> SOLN 70mg/75ml	\$0(1)	ST
<i>alendronate sodium</i> TABS 10mg, 35mg, 70mg	\$0(1)	
BONSITY SOPN 560mcg/2.24ml	\$0(2)	NDS, NM, PA
<i>calcitonin (salmon) spray</i> SOLN 200unit/act	\$0(1)	B/D
<i>ibandronate sodium</i> TABS 150mg	\$0(1)	B/D
PAMIDRONATE DISODIUM SOLN 6mg/ml	\$0(2)	B/D
<i>pamidronate disodium</i> SOLN 30mg/10ml, 90mg/10ml	\$0(1)	B/D
PROLIA SOSY 60mg/ml	\$0(2)	QL (1 syringe / 180 days), NM
<i>risedronate sodium</i> TABS 5mg, 35mg, 150mg	\$0(1)	
<i>risedronate sodium</i> TBEC 35mg	\$0(1)	ST

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TERIPARATIDE SOPN 560mcg/2.24ml	\$0(2)	NDS, NM, PA; (ALVOGEN product)
WYOST SOLN 120mg/1.7ml	\$0(2)	NDS, NM, PA
XGEVA SOLN 120mg/1.7ml	\$0(2)	NDS, NM, PA
zoledronic acid CONC 4mg/5ml; SOLN 5mg/100ml	\$0(1)	B/D, NM
CHELATING AGENTS		
CHEMET CAPS 100mg	\$0(2)	NDS
deferasirox TABS 90mg; TBSO 125mg	\$0(1)	NM, PA
deferasirox TABS 180mg, 360mg	\$0(2)	NM, PA
deferasirox TBSO 250mg, 500mg	\$0(2)	NDS, NM, PA
kionex SUSP 15gm/60ml	\$0(1)	
LOKELMA PACK 5gm, 10gm	\$0(2)	
penicillamine TABS 250mg	\$0(2)	NDS, NM
sodium polystyrene sulfonate powder	\$0(1)	
sps SUSP 15gm/60ml	\$0(1)	
sps rectal SUSP 15gm/60ml	\$0(1)	
trientine hcl CAPS 250mg	\$0(2)	NDS, NM, PA
CONTRACEPTIVES - DRUGS FOR BIRTH CONTROL		
afirmelle	\$0(1)	
altavera	\$0(1)	
alyacen 1/35	\$0(1)	
alyacen 7/7/7	\$0(1)	
amethia	\$0(1)	
amethyst	\$0(1)	
apri	\$0(1)	
aranelle	\$0(1)	
ashlyna	\$0(1)	
aubra eq	\$0(1)	
aurovela 1/20	\$0(1)	
aurovela 24 fe	\$0(1)	
aurovela fe 1.5/30	\$0(1)	
aurovela fe 1/20	\$0(1)	
aviane	\$0(1)	
ayuna	\$0(1)	
azurette	\$0(1)	
balziva	\$0(1)	
blisovi 24 fe	\$0(1)	
blisovi fe 1.5/30	\$0(1)	
briellyn	\$0(1)	
camila TABS .35mg	\$0(1)	
camrese	\$0(1)	
camrese lo	\$0(1)	
chateal eq	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cryselle-28</i>	\$0(1)	
<i>cyred eq</i>	\$0(1)	
<i>dasetta 1/35</i>	\$0(1)	
<i>dasetta 7/7/7</i>	\$0(1)	
<i>daysee</i>	\$0(1)	
<i>deblitane</i> TABS .35mg	\$0(1)	
DEPO-SUBQ PROVERA 104 SUSY 104mg/0.65ml	\$0(2)	
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>	\$0(1)	
<i>dolishale</i>	\$0(1)	
<i>drospirenone-ethinyl estrad- levomefolate tab 3-0.02-0.451 mg</i>	\$0(1)	
<i>drospirenone-ethinyl estrad- levomefolate tab 3-0.03-0.451 mg</i>	\$0(1)	
<i>drospirenone-ethinyl estradiol tab 3- 0.02 mg</i>	\$0(1)	
<i>drospirenone-ethinyl estradiol tab 3- 0.03 mg</i>	\$0(1)	
<i>elinest</i>	\$0(1)	
<i>eluryng</i>	\$0(1)	
<i>emzahh</i> TABS .35mg	\$0(1)	
<i>enilloring</i>	\$0(1)	
<i>enpresse-28</i>	\$0(1)	
<i>enskyce</i>	\$0(1)	
<i>errin</i> TABS .35mg	\$0(1)	
<i>estarylla</i>	\$0(1)	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg</i>	\$0(1)	
<i>ethynodiol diacetate & ethinyl estradiol tab 1 mg-50 mcg</i>	\$0(1)	
<i>etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr</i>	\$0(1)	
<i>falmina</i>	\$0(1)	
<i>feirza 1.5/30</i>	\$0(1)	
<i>feirza 1/20</i>	\$0(1)	
<i>finzala</i>	\$0(1)	
<i>galbriela</i>	\$0(1)	
<i>hailey 1.5/30</i>	\$0(1)	
<i>hailey 24 fe</i>	\$0(1)	
<i>haloette</i>	\$0(1)	
<i>heather</i> TABS .35mg	\$0(1)	
<i>iclevia</i>	\$0(1)	
<i>incassia</i> TABS .35mg	\$0(1)	
<i>introvale</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>isibloom</i>	\$0(1)	
<i>jaimiess</i>	\$0(1)	
<i>jasmiel</i>	\$0(1)	
<i>jolessa</i>	\$0(1)	
<i>juleber</i>	\$0(1)	
<i>junel 1.5/30</i>	\$0(1)	
<i>junel 1/20</i>	\$0(1)	
<i>junel fe 1.5/30</i>	\$0(1)	
<i>junel fe 1/20</i>	\$0(1)	
<i>junel fe 24</i>	\$0(1)	
<i>kaitlib fe</i>	\$0(1)	
<i>kariva</i>	\$0(1)	
<i>kelnor 1/35</i>	\$0(1)	
<i>kelnor 1/50</i>	\$0(1)	
<i>kurvelo</i>	\$0(1)	
<i>larin 1.5/30</i>	\$0(1)	
<i>larin 1/20</i>	\$0(1)	
<i>larin 24 fe</i>	\$0(1)	
<i>larin fe 1.5/30</i>	\$0(1)	
<i>larin fe 1/20</i>	\$0(1)	
<i>layolis fe</i>	\$0(1)	
<i>lessina</i>	\$0(1)	
<i>levonest</i>	\$0(1)	
<i>levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)</i>	\$0(1)	
<i>levonorgestrel & ethinyl estradiol (91- day) tab 0.15-0.03 mg</i>	\$0(1)	
<i>levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg</i>	\$0(1)	
<i>levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg</i>	\$0(1)	
<i>levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125-30mg-mcg</i>	\$0(1)	
<i>levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg</i>	\$0(1)	
<i>levora 0.15/30-28</i>	\$0(1)	
<i>LILETTA IUD 20.1mcg/day</i>	\$0(2)	NM
<i>loestrin 1.5/30-21</i>	\$0(1)	
<i>loestrin 1/20-21</i>	\$0(1)	
<i>loestrin fe 1.5/30</i>	\$0(1)	
<i>loestrin fe 1/20</i>	\$0(1)	
<i>lojaimiess</i>	\$0(1)	
<i>loryna</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>low-ogestrel</i>	\$0(1)	
<i>lutra</i>	\$0(1)	
<i>lyleq</i> TABS .35mg	\$0(1)	
<i>lyza</i> TABS .35mg	\$0(1)	
<i>marlissa</i>	\$0(1)	
<i>medroxyprogesterone acetate</i> (contraceptive) SUSP 150mg/ml; SUSY 150mg/ml	\$0(1)	
<i>meleya</i> TABS .35mg	\$0(1)	
<i>mibelas 24 fe</i>	\$0(1)	
<i>microgestin 1.5/30</i>	\$0(1)	
<i>microgestin 1/20</i>	\$0(1)	
<i>microgestin fe 1.5/30</i>	\$0(1)	
<i>microgestin fe 1/20</i>	\$0(1)	
<i>mili</i>	\$0(1)	
<i>mono-lynyah</i>	\$0(1)	
<i>necon 0.5/35-28</i>	\$0(1)	
NEXPLANON IMPL 68mg	\$0(2)	NM
<i>nikki</i>	\$0(1)	
<i>nora-be</i> TABS .35mg	\$0(1)	
<i>norelgestromin-ethinyl estradiol td ptwk</i> 150-35 mcg/24hr	\$0(1)	
<i>norethindrone & ethinyl estradiol-fe</i> chew tab 0.4 mg-35 mcg	\$0(1)	
<i>norethindrone (contraceptive) TABS</i> .35mg	\$0(1)	
<i>norethindrone ace & ethinyl estradiol</i> tab 1 mg-20 mcg	\$0(1)	
<i>norethindrone ace & ethinyl estradiol</i> tab 1.5 mg-30 mcg	\$0(1)	
<i>norethindrone ace-eth estradiol-fe chew</i> tab 1 mg-20 mcg (24)	\$0(1)	
<i>norgestimate & ethinyl estradiol tab</i> 0.25 mg-35 mcg	\$0(1)	
<i>norgestimate-eth estrad tab 0.18-</i> 25/0.215-25/0.25-25 mg-mcg	\$0(1)	
<i>norgestimate-eth estrad tab 0.18-</i> 35/0.215-35/0.25-35 mg-mcg	\$0(1)	
<i>norlyroc</i> TABS .35mg	\$0(1)	
<i>nortrel 0.5/35 (28)</i>	\$0(1)	
<i>nortrel 1/35 (21)</i>	\$0(1)	
<i>nortrel 1/35 (28)</i>	\$0(1)	
<i>nortrel 7/7/7</i>	\$0(1)	
<i>nylia 1/35</i>	\$0(1)	
<i>nylia 7/7/7</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ocella</i>	\$0(1)	
<i>orquidea</i> TABS .35mg	\$0(1)	
<i>philith</i>	\$0(1)	
<i>pimtrea</i>	\$0(1)	
<i>portia-28</i>	\$0(1)	
<i>reclipsen</i>	\$0(1)	
<i>rivelsa</i>	\$0(1)	
<i>rosyrah</i>	\$0(1)	
<i>setlakin</i>	\$0(1)	
<i>sharobel</i> TABS .35mg	\$0(1)	
<i>simliya</i>	\$0(1)	
<i>simpesse</i>	\$0(1)	
<i>sprintec</i> 28	\$0(1)	
<i>sronyx</i>	\$0(1)	
<i>syeda</i>	\$0(1)	
<i>tarina</i> 24 fe	\$0(1)	
<i>tarina</i> fe 1/20 eq	\$0(1)	
<i>tilia</i> fe	\$0(1)	
<i>tri-estarylla</i>	\$0(1)	
<i>tri-legest</i> fe	\$0(1)	
<i>tri-linyah</i>	\$0(1)	
<i>tri-lo-estarylla</i>	\$0(1)	
<i>tri-lo-marzia</i>	\$0(1)	
<i>tri-lo-mili</i>	\$0(1)	
<i>tri-lo-sprintec</i>	\$0(1)	
<i>tri-mili</i>	\$0(1)	
<i>tri-nymyo</i>	\$0(1)	
<i>tri-sprintec</i>	\$0(1)	
<i>tri-vylibra</i>	\$0(1)	
<i>tri-vylibra</i> lo	\$0(1)	
<i>turqoz</i>	\$0(1)	
<i>tydemy</i>	\$0(1)	
<i>valtya</i> 1/50	\$0(1)	
<i>velivet</i>	\$0(1)	
<i>vestura</i>	\$0(1)	
<i>vienva</i>	\$0(1)	
<i>viorele</i>	\$0(1)	
<i>vyfemla</i>	\$0(1)	
<i>vylibra</i>	\$0(1)	
<i>wera</i>	\$0(1)	
<i>wymzya</i> fe	\$0(1)	
<i>xarah</i> fe	\$0(1)	
<i>xelria</i> fe	\$0(1)	
<i>xulane</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>zafemy</i>	\$0(1)	
<i>zovia 1/35</i>	\$0(1)	
<i>zumandimine</i>	\$0(1)	
<i>ESTROGENS - DRUGS TO REGULATE FEMALE HORMONES</i>		
<i>abigale</i>	\$0(2)	
<i>abigale lo</i>	\$0(2)	
<i>dotti</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	\$0(2)	
<i>estradiol</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr; PTWK .025mg/24hr, .05mg/24hr, .06mg/24hr, .075mg/24hr, .1mg/24hr, 37.5mcg/24hr; TABS .5mg, 1mg, 2mg	\$0(2)	
<i>estradiol & norethindrone acetate tab</i> <i>0.5-0.1 mg</i>	\$0(2)	
<i>estradiol & norethindrone acetate tab 1-</i> <i>0.5 mg</i>	\$0(2)	
<i>estradiol vaginal</i> CREA .1mg/gm; TABS 10mcg	\$0(1)	
<i>estradiol valerate</i> OIL 10mg/ml, 20mg/ml, 40mg/ml	\$0(1)	
<i>fyavolv tab 0.5mg-2.5mcg</i>	\$0(2)	
<i>fyavolv tab 1mg-5mcg</i>	\$0(2)	
<i>jinteli</i>	\$0(2)	
<i>lyllana</i> PTTW .025mg/24hr, .037mg/24hr, .05mg/24hr, .075mg/24hr, .1mg/24hr	\$0(2)	
<i>mimvey</i>	\$0(2)	
<i>norethindrone acetate-ethinyl estradiol</i> <i>tab 0.5 mg-2.5 mcg</i>	\$0(2)	
<i>norethindrone acetate-ethinyl estradiol</i> <i>tab 1 mg-5 mcg</i>	\$0(2)	
<i>yuvaferm</i> TABS 10mcg	\$0(1)	
<i>GLUCOCORTICOIDS - DRUGS TO TREAT INFLAMMATORY RESPONSE</i>		
<i>dexamethasone</i> ELIX .5mg/5ml; SOLN .5mg/5ml; TABS .5mg, .75mg, 1mg, 1.5mg, 2mg, 4mg, 6mg	\$0(1)	
DEXAMETHASONE INTENSOL CONC 1mg/ml	\$0(2)	
<i>dexamethasone sodium phosphate</i> SOLN 4mg/ml, 10mg/ml, 20mg/5ml, 100mg/10ml, 120mg/30ml; SOSY 4mg/ml, 10mg/ml	\$0(1)	
<i>fludrocortisone acetate</i> TABS .1mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>hydrocortisone</i> TABS 5mg, 10mg, 20mg	\$0(1)	
<i>hydrocortisone sod succinate</i> SOLR 100mg	\$0(1)	
<i>methylprednisolone</i> TABS 4mg, 8mg, 16mg, 32mg	\$0(1)	B/D
<i>methylprednisolone</i> TBPK 4mg	\$0(1)	
<i>methylprednisolone acetate</i> SUSP 40mg/ml, 80mg/ml	\$0(1)	B/D
<i>methylprednisolone sod succ</i> SOLR 40mg, 125mg, 1000mg	\$0(1)	B/D
<i>prednisolone</i> SOLN 15mg/5ml	\$0(1)	B/D
<i>prednisolone sodium phosphate</i> SOLN 5mg/5ml, 15mg/5ml, 25mg/5ml	\$0(1)	B/D
<i>prednisone</i> SOLN 5mg/5ml; TABS 1mg, 2.5mg, 5mg, 10mg, 20mg, 50mg	\$0(1)	B/D
<i>prednisone</i> TBPK 5mg, 10mg	\$0(1)	
PREDNISONE INTENSOL CONC 5mg/ml	\$0(2)	B/D
SOLU-CORTEF SOLR 100mg, 250mg, 500mg, 1000mg	\$0(2)	
<i>GLUCOSE ELEVATING AGENTS - DRUGS TO TREAT LOW BLOOD SUGAR</i>		
<i>diazoxide</i> SUSP 50mg/ml	\$0(2)	NDS
ZEGALOGUE SOAJ .6mg/0.6ml; SOSY .6mg/0.6ml	\$0(2)	
<i>MISCELLANEOUS</i>		
ALDURAZYME SOLN 2.9mg/5ml	\$0(2)	NDS, NM, PA
<i>betaine powder for oral solution</i>	\$0(2)	NDS, NM
<i>cabergoline</i> TABS .5mg	\$0(1)	
<i>carglumic acid</i> TBSO 200mg	\$0(2)	NDS, NM, PA
CERDELGA CAPS 84mg	\$0(2)	NDS, NM, PA
CEREZYME SOLR 400unit	\$0(2)	NDS, NM, PA
<i>cinacalcet hcl</i> TABS 30mg, 60mg	\$0(1)	B/D, QL (60 tabs / 30 days), NM
<i>cinacalcet hcl</i> TABS 90mg	\$0(2)	NDS, B/D, QL (120 tabs / 30 days), NM
CYSTAGON CAPS 50mg, 150mg	\$0(2)	NM, PA
<i>desmopressin acetate</i> SOLN 4mcg/ml	\$0(2)	NDS
<i>desmopressin acetate</i> TABS .1mg, .2mg	\$0(1)	
<i>desmopressin acetate spray</i> SOLN .01%	\$0(1)	
<i>desmopressin acetate spray refrigerated</i> SOLN .01%	\$0(1)	
FABRAZYME SOLR 5mg, 35mg	\$0(2)	NDS, NM, PA
GENOTROPIN CART 5mg, 12mg	\$0(2)	NDS, NM, PA
GENOTROPIN MINIQICK PRSY .2mg	\$0(2)	NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
GENOTROPIN MINIQUICK PRSY .4mg, .6mg, .8mg, 1mg, 1.2mg, 1.4mg, 1.6mg, 1.8mg, 2mg	\$0(2)	NDS, NM, PA
INCRELEX SOLN 40mg/4ml	\$0(2)	NDS, NM, PA
javygtor PACK 100mg, 500mg; TABS 100mg	\$0(2)	NDS, NM, PA
lanreotide acetate SOLN 120mg/0.5ml	\$0(2)	NDS, NM, PA
levocarnitine (metabolic modifiers) SOLN 1gm/10ml; TABS 330mg	\$0(1)	B/D
LUMIZYME SOLR 50mg	\$0(2)	NDS, NM, PA
LUPRON DEPOT-PED (1-MONTH KIT 7.5mg, 11.25mg, 15mg	\$0(2)	NDS, NM, PA
LUPRON DEPOT-PED (3-MONTH KIT 11.25mg, 30mg	\$0(2)	NDS, NM, PA
LUPRON DEPOT-PED (6-MONTH KIT 45mg	\$0(2)	NDS, NM, PA
mifepristone (hyperglycemia) TABS 300mg	\$0(2)	NDS, NM, PA
NAGLAZYME SOLN 1mg/ml	\$0(2)	NDS, NM, PA
nitisinone CAPS 2mg, 5mg, 10mg, 20mg	\$0(2)	NDS, NM, PA
octreotide acetate SOLN 50mcg/ml, 100mcg/ml, 200mcg/ml; SOSY 50mcg/ml, 100mcg/ml	\$0(1)	NM, PA
octreotide acetate SOLN 500mcg/ml, 1000mcg/ml; SOSY 500mcg/ml	\$0(2)	NDS, NM, PA
raloxifene hcl TABS 60mg	\$0(1)	
sapropterin dihydrochloride PACK 100mg, 500mg; TABS 100mg	\$0(2)	NDS, NM, PA
SIGNIFOR SOLN .3mg/ml, .6mg/ml, .9mg/ml	\$0(2)	NDS, NM, PA
sodium phenylbutyrate POWD 3gm/tsp; TABS 500mg	\$0(2)	NDS, NM, PA
SOMATULINE DEPOT SOLN 60mg/0.2ml, 90mg/0.3ml, 120mg/0.5ml	\$0(2)	NDS, NM, PA
SOMAVERT SOLR 10mg, 15mg, 20mg, 25mg, 30mg	\$0(2)	NDS, NM, PA
SYNAREL SOLN 2mg/ml	\$0(2)	NDS, PA
VEOZAH TABS 45mg	\$0(2)	PA
PROGESTINS - DRUGS TO REGULATE FEMALE HORMONES		
gallifrey TABS 5mg	\$0(1)	
medroxyprogesterone acetate TABS 2.5mg, 5mg, 10mg	\$0(1)	
megestrol acetate SUSP 40mg/ml	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>megestrol acetate (appetite)</i> SUSP 625mg/5ml	\$0(2)	PA
<i>norethindrone acetate</i> TABS 5mg	\$0(1)	
<i>progesterone</i> CAPS 100mg, 200mg	\$0(1)	
THYROID AGENTS - DRUGS TO REGULATE THYROID LEVELS		
<i>levo-t</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
<i>levothyroxine sodium</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
<i>levoxyl</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg	\$0(1)	
<i>liothyronine sodium</i> TABS 5mcg, 25mcg, 50mcg	\$0(1)	
<i>methimazole</i> TABS 5mg, 10mg	\$0(1)	
<i>propylthiouracil</i> TABS 50mg	\$0(1)	
SYNTHROID TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(2)	
<i>unithroid</i> TABS 25mcg, 50mcg, 75mcg, 88mcg, 100mcg, 112mcg, 125mcg, 137mcg, 150mcg, 175mcg, 200mcg, 300mcg	\$0(1)	
VITAMIN D ANALOGS		
<i>calcitriol</i> CAPS .25mcg, .5mcg	\$0(1)	B/D
<i>calcitriol (oral)</i> SOLN 1mcg/ml	\$0(1)	B/D
<i>paricalcitol</i> CAPS 1mcg, 2mcg, 4mcg	\$0(1)	B/D
GASTROINTESTINAL - DRUGS TO TREAT STOMACH AND INTESTINAL DISORDERS		
ANTACIDS		
<i>acid gone</i>	\$0(3)	*
<i>almacone double strength</i>	\$0(3)	*
<i>alum & mag hydroxide-simethicone</i> <i>susp 200-200-20 mg/5ml</i>	\$0(3)	*
<i>alum & mag hydroxide-simethicone</i> <i>susp 400-400-40 mg/5ml</i>	\$0(3)	*
<i>antacid</i> CHEW 750mg	\$0(3)	*
<i>antacid calcium regular s</i> CHEW 500mg	\$0(3)	*
<i>antacid extra strength</i> CHEW 750mg	\$0(3)	*
<i>antacid maximum strength</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>antacid regular strength</i>	\$0(3)	*
<i>antacid ultra strength CHEW 1000mg</i>	\$0(3)	*
<i>antacid/antigas liquid</i>	\$0(3)	*
<i>cal-gest antacid CHEW 500mg</i>	\$0(3)	*
<i>calcium antacid CHEW 500mg</i>	\$0(3)	*
<i>calcium antacid extra str CHEW 750mg</i>	\$0(3)	*
<i>CALCIUM CARBONATE SUSP 1250mg/5ml; TABS 648mg</i>	\$0(3)	*
<i>ft antacid & antigas</i>	\$0(3)	*
<i>ft antacid extra strength CHEW 750mg</i>	\$0(3)	*
<i>ft antacid regular streng CHEW 500mg</i>	\$0(3)	*
<i>gnp antacid & anti-gas/re</i>	\$0(3)	*
<i>gnp antacid and anti-gas/</i>	\$0(3)	*
<i>gnp antacid anti-gas/maxi</i>	\$0(3)	*
<i>gnp antacid extra strengt CHEW 750mg</i>	\$0(3)	*
<i>gnp antacid/regular stren</i>	\$0(3)	*
<i>hm antacid extra strength CHEW 750mg</i>	\$0(3)	*
<i>mag-al plus</i>	\$0(3)	*
<i>mag-al plus xs</i>	\$0(3)	*
<i>magnesium oxide TABS 400mg, 420mg</i>	\$0(3)	*
<i>mintox maximum strength</i>	\$0(3)	*
<i>mintox plus</i>	\$0(3)	*
<i>sm antacid CHEW 500mg</i>	\$0(3)	*
<i>sm antacid extra strength CHEW 750mg</i>	\$0(3)	*
<i>smooth antacid extra stre CHEW 750mg</i>	\$0(3)	*
<i>sodium bicarbonate (antacid) TABS 325mg, 650mg</i>	\$0(3)	*
ANTI-DIARRHEAL		
<i>anti-diarrheal SOLN 1mg/7.5ml; TABS 2mg</i>	\$0(3)	*
<i>bismuth subsalicylate CHEW 262mg</i>	\$0(3)	*
<i>floranex</i>	\$0(3)	*
<i>ft anti-diarrheal CAPS 2mg; SOLN 1mg/7.5ml; TABS 2mg</i>	\$0(3)	*
<i>ft stomach relief CHEW 262mg; SUSP 525mg/30ml</i>	\$0(3)	*
<i>gnp anti-diarrheal CAPS 2mg; TABS 2mg</i>	\$0(3)	*
<i>gnp loperamide hydrochlor SOLN 1mg/7.5ml</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>gnp pink bismuth</i> CHEW 262mg; TABS 262mg	\$0(3)	*
<i>gnp pink bismuth ultra st</i> SUSP 525mg/15ml	\$0(3)	*
<i>gnp stomach relief</i> SUSP 525mg/30ml	\$0(3)	*
<i>goodsense anti-diarrheal</i> SOLN 1mg/7.5ml	\$0(3)	*
<i>*lactobacillus - packet**</i>	\$0(3)	*
<i>*lactobacillus tab**</i>	\$0(3)	*
<i>loperamide hcl</i> SOLN 1mg/7.5ml, 2mg/15ml; TABS 2mg	\$0(3)	*
QUAD-PROBIOT CAP	\$0(3)	*
RISA-BID TAB PROBIO	\$0(3)	*
RISAQUAD CAP	\$0(3)	*
<i>sm anti-diarrheal</i> CAPS 2mg; SOLN 1mg/7.5ml; TABS 2mg	\$0(3)	*
<i>sm stomach relief</i> CHEW 262mg; TABS 262mg	\$0(3)	*
<i>stomach relief</i> CHEW 262mg; SUSP 525mg/30ml; TABS 262mg	\$0(3)	*
<i>stomach relief extra stre</i> SUSP 525mg/15ml	\$0(3)	*
<i>stomach relief ultra</i> SUSP 525mg/15ml	\$0(3)	*
ANTIEMETICS - DRUGS FOR NAUSEA AND VOMITING		
<i>anti-nausea</i>	\$0(3)	*
<i>aprepitant</i> CAPS 40mg, 80mg, 125mg	\$0(1)	B/D
<i>aprepitant capsule therapy pack 80 & 125 mg</i>	\$0(1)	B/D
<i>compro</i> SUPP 25mg	\$0(1)	
<i>driminate</i> TABS 50mg	\$0(3)	*
<i>dronabinol</i> CAPS 2.5mg, 5mg, 10mg	\$0(1)	B/D, QL (60 caps / 30 days)
<i>ft motion sickness</i> TABS 50mg	\$0(3)	*
<i>gnp anti-nausea relief</i>	\$0(3)	*
<i>gnp motion sickness relie</i> TABS 50mg	\$0(3)	*
<i>granisetron hcl</i> SOLN 1mg/ml, 4mg/4ml	\$0(1)	
<i>granisetron hcl</i> TABS 1mg	\$0(1)	B/D
<i>meclizine hcl</i> TABS 12.5mg, 25mg	\$0(2)	
<i>metoclopramide hcl</i> SOLN 5mg/5ml, 5mg/ml; TABS 5mg, 10mg	\$0(1)	
<i>motion sickness relief</i> TABS 50mg	\$0(3)	*
<i>nausea relief</i>	\$0(3)	*
<i>ondansetron</i> TBDP 4mg, 8mg	\$0(1)	B/D
<i>ondansetron hcl</i> SOLN 4mg/2ml, 40mg/20ml; SOSY 4mg/2ml	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>ondansetron hcl</i> SOLN 4mg/5ml; TABS 4mg, 8mg	\$0(1)	B/D
<i>prochlorperazine</i> SUPP 25mg	\$0(1)	
<i>prochlorperazine edisylate</i> SOLN 10mg/2ml	\$0(1)	
<i>prochlorperazine maleate</i> TABS 5mg, 10mg	\$0(1)	
<i>promethazine hcl</i> SOLN 6.25mg/5ml, 25mg/ml, 50mg/ml; TABS 12.5mg, 25mg, 50mg	\$0(2)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>scopolamine</i> PT72 1mg/3days	\$0(2)	QL (10 patches / 30 days), PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>sm motion sickness</i> TABS 50mg	\$0(3)	*
ANTISPASMODICS - DRUGS FOR STOMACH SPASMS		
<i>dicyclomine hcl</i> CAPS 10mg; SOLN 10mg/5ml; TABS 20mg	\$0(2)	
<i>glycopyrrolate</i> TABS 1mg	\$0(1)	QL (90 tabs / 30 days)
<i>glycopyrrolate</i> TABS 2mg	\$0(1)	QL (120 tabs / 30 days)
H2-RECEPTOR ANTAGONISTS - DRUGS FOR ULCERS AND STOMACH ACID		
<i>famotidine</i> SOLN 20mg/2ml, 40mg/4ml, 200mg/20ml; SUSR 40mg/5ml; TABS 20mg, 40mg	\$0(1)	
<i>famotidine in nacl 0.9% iv soln</i> 20 mg/50ml	\$0(1)	
<i>nizatidine</i> CAPS 150mg, 300mg	\$0(1)	
INFLAMMATORY BOWEL DISEASE		
<i>balsalazide disodium</i> CAPS 750mg	\$0(1)	
<i>budesonide</i> CPEP 3mg	\$0(1)	QL (90 caps / 30 days), PA
<i>budesonide</i> TB24 9mg	\$0(2)	NDS, QL (30 tabs / 30 days), PA
<i>hydrocortisone (intrarectal)</i> ENEM 100mg/60ml	\$0(1)	
<i>mesalamine</i> CP24 .375gm	\$0(1)	QL (120 caps / 30 days)
<i>mesalamine</i> CPDR 400mg	\$0(1)	QL (180 caps / 30 days)
<i>mesalamine</i> ENEM 4gm	\$0(1)	QL (1680 mL / 28 days)
<i>mesalamine</i> SUPP 1000mg	\$0(1)	QL (30 suppositories / 30 days)
<i>mesalamine</i> TBEC 1.2gm	\$0(1)	QL (120 tabs / 30 days)
<i>mesalamine w/ cleanser</i> KIT 4gm	\$0(1)	QL (28 bottles / 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sulfasalazine</i> TABS 500mg; TBEC 500mg	\$0(1)	
<i>LAXATIVES</i>		
<i>bisacodyl</i> SUPP 10mg	\$0(3)	*
<i>bisacodyl ec</i> TBEC 5mg	\$0(3)	*
<i>calcium polycarbophil</i> TABS 625mg	\$0(3)	*
<i>chocolated laxative regul</i> CHEW 15mg	\$0(3)	*
<i>clearlax</i> POWD 17gm/scoop	\$0(3)	*
<i>colace 2-in-1</i>	\$0(3)	*
COLACE CLEAR CAPS 50mg	\$0(3)	*
<i>constulose</i> SOLN 10gm/15ml	\$0(1)	
<i>docusate calcium</i> CAPS 240mg	\$0(3)	*
<i>docusate mini</i> ENEM 283mg/5ml	\$0(3)	*
<i>docusate sodium</i> CAPS 100mg, 250mg; LIQD 50mg/5ml, 100mg/10ml	\$0(3)	*
DOCUSOL KIDS ENEM 100mg/5ml	\$0(3)	*
<i>dok</i> TABS 100mg	\$0(3)	*
<i>enema ready-to-use</i>	\$0(3)	*
ENEMEEZ KIDS ENEM 100mg/5ml	\$0(3)	*
<i>enemeez mini</i> ENEM 283mg/5ml	\$0(3)	*
<i>enemeez plus</i>	\$0(3)	*
<i>enulose</i> SOLN 10gm/15ml	\$0(1)	
<i>epsom salt</i>	\$0(3)	*
<i>fiber-lax</i> TABS 625mg	\$0(3)	*
FLEET BISACODYL ENEM 10mg/30ml	\$0(3)	*
FLEET ENE PED	\$0(3)	*
FLEET LIQUID GLYCERIN SUP ENEM 5.4gm/dose	\$0(3)	*
<i>ft clearlax</i> POWD 17gm/scoop	\$0(3)	*
<i>ft fiber laxative</i> TABS 625mg	\$0(3)	*
<i>ft gentle laxative</i> SUPP 10mg	\$0(3)	*
<i>ft laxative</i> TBEC 5mg	\$0(3)	*
<i>ft magnesium citrate</i> SOLN 1.745gm/30ml	\$0(3)	*
<i>ft milk of magnesia</i> SUSP 1200mg/15ml	\$0(3)	*
<i>ft senna laxative</i> TABS 8.6mg	\$0(3)	*
<i>ft senna-s</i>	\$0(3)	*
<i>ft stool softener</i> CAPS 100mg, 250mg; TABS 100mg	\$0(3)	*
<i>gavilax</i> POWD 17gm/scoop	\$0(3)	*
<i>gavilyte-c</i>	\$0(1)	
<i>gavilyte-g</i>	\$0(1)	
<i>gavilyte-n/flavor pack</i>	\$0(1)	
<i>generlac</i> SOLN 10gm/15ml	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>gentle laxative</i> SUPP 10mg; TBEC 5mg	\$0(3)	*
<i>glycerin (laxative)</i> SUPP 2gm	\$0(3)	*
<i>glycerin childrens</i> SUPP 1gm, 1.2gm	\$0(3)	*
<i>gnp clearlax</i> PACK 17gm; POWD 17gm/scoop	\$0(3)	*
<i>gnp epsom salt</i>	\$0(3)	*
<i>gnp fiber-caps</i> TABS 625mg	\$0(3)	*
<i>gnp gentle laxative</i> SUPP 10mg; TBEC 5mg	\$0(3)	*
<i>gnp magnesium citrate</i> SOLN 1.745gm/30ml	\$0(3)	*
<i>gnp milk of magnesia</i> SUSP 1200mg/15ml	\$0(3)	*
<i>gnp senna lax</i> TABS 8.6mg	\$0(3)	*
<i>gnp senna plus</i>	\$0(3)	*
<i>gnp stool softener</i> CAPS 100mg, 240mg, 250mg	\$0(3)	*
<i>gnp stool softener/stimul</i>	\$0(3)	*
<i>gnp womens gentle laxativ</i> TBEC 5mg	\$0(3)	*
<i>goodsense clearlax</i> POWD 17gm/scoop	\$0(3)	*
<i>healthylax</i> PACK 17gm	\$0(3)	*
<i>hm enema saline laxative</i>	\$0(3)	*
<i>lactulose</i> SOLN 10gm/15ml	\$0(1)	
<i>lactulose (encephalopathy)</i> SOLN 10gm/15ml	\$0(1)	
<i>laxative maximum strength</i> TABS 25mg	\$0(3)	*
<i>laxative regular strength</i> TABS 15mg	\$0(3)	*
<i>milk of magnesia</i> SUSP 7.75%, 400mg/5ml, 1200mg/15ml, 2400mg/30ml	\$0(3)	*
MILK OF MAGNESIA CONCENTR SUSP 2400mg/10ml	\$0(3)	*
PEDIA-LAX CHEW 400mg; LIQD 50mg/15ml; SUPP 2.8gm	\$0(3)	*
<i>peg 3350-kcl-na bicarb-nacl-na sulfate for soln</i> 236 gm	\$0(1)	
<i>peg 3350-kcl-sod bicarb-nacl for soln</i> 420 gm	\$0(1)	
PLENVU SOL	\$0(2)	
<i>polyethylene glycol 3350</i> PACK 17gm; POWD 17gm/scoop	\$0(3)	*
<i>senexon-s</i>	\$0(3)	*
<i>senna plus</i>	\$0(3)	*
SENNA PLUS CAP 8.6-50MG	\$0(3)	*
<i>senna-lax</i> TABS 8.6mg	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>senna-time</i> TABS 8.6mg	\$0(3)	*
<i>senna-time s</i>	\$0(3)	*
<i>sennosides</i> CAPS 8.6mg; LIQD 8.8mg/5ml; SYRP 8.8mg/5ml; TABS 8.6mg	\$0(3)	*
<i>sennosides-docusate sodium tab 8.6-50 mg</i>	\$0(3)	*
<i>senokot extra strength</i> TABS 17.2mg	\$0(3)	*
<i>sm clearlax</i> POWD 17gm/scoop	\$0(3)	*
<i>sm enema</i>	\$0(3)	*
<i>sm epsom salt</i>	\$0(3)	*
<i>sm fiber</i> TABS 625mg	\$0(3)	*
<i>sm gentle laxative</i> TBEC 5mg	\$0(3)	*
<i>sm magnesium citrate</i> SOLN 1.745gm/30ml	\$0(3)	*
<i>sm milk of magnesia</i> SUSP 1200mg/15ml	\$0(3)	*
<i>sm senna laxative</i> TABS 8.6mg	\$0(3)	*
<i>sm senna-s</i>	\$0(3)	*
<i>sm stool softener</i> CAPS 100mg; TABS 100mg	\$0(3)	*
<i>sod sulfate-pot sulf-mg sulf oral sol</i> <i>17.5-3.13-1.6 gm/177ml</i>	\$0(1)	
<i>*sodium phosphates - enema***</i>	\$0(3)	*
<i>soluble fiber</i>	\$0(3)	*
<i>stimulant laxative</i>	\$0(3)	*
STL SOFT/LAX CAP 8.6-50MG	\$0(3)	*
<i>stool softener</i> CAPS 100mg	\$0(3)	*
<i>stool softener + stimulan</i>	\$0(3)	*
MISCELLANEOUS		
<i>alosetron hcl</i> TABS 1mg	\$0(2)	NDS, QL (60 tabs / 30 days), PA
<i>alosetron hcl</i> TABS .5mg	\$0(1)	QL (60 tabs / 30 days), PA
<i>calcium acetate (phosphate binder)</i> TABS 667mg	\$0(3)	*
CREON CAP 3000UNIT	\$0(2)	
CREON CAP 6000UNIT	\$0(2)	
CREON CAP 12000UNT	\$0(2)	
CREON CAP 24000UNT	\$0(2)	
CREON CAP 36000UNT	\$0(2)	
<i>cromolyn sodium (mastocytosis)</i> CONC 100mg/5ml	\$0(1)	
<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>	\$0(2)	
<i>ft gas relief CHEW 80mg</i>	\$0(3)	*
<i>ft gas relief drops infan SUSP 20mg/0.3ml</i>	\$0(3)	*
<i>ft gas relief extra stren CAPS 125mg; CHEW 125mg</i>	\$0(3)	*
<i>ft gas relief ultra stren CAPS 180mg</i>	\$0(3)	*
<i>gas relief CHEW 80mg</i>	\$0(3)	*
<i>gas relief extra strength CAPS 125mg; CHEW 125mg</i>	\$0(3)	*
<i>gas relief infants SUSP 20mg/0.3ml</i>	\$0(3)	*
<i>gas relief ultra strength CAPS 180mg</i>	\$0(3)	*
<i>GATTEX KIT 5mg</i>	\$0(2)	NDS, NM, PA
<i>gnp anti-gas ultra streng CAPS 180mg</i>	\$0(3)	*
<i>gnp gas relief CHEW 80mg</i>	\$0(3)	*
<i>gnp gas relief extra stre CAPS 125mg; CHEW 125mg</i>	\$0(3)	*
<i>gnp infant gas relief SUSP 20mg/0.3ml</i>	\$0(3)	*
<i>LINZESS CAPS 72mcg, 145mcg, 290mcg</i>	\$0(2)	QL (30 caps / 30 days)
<i>loperamide hcl CAPS 2mg</i>	\$0(1)	
<i>misoprostol TABS 100mcg, 200mcg</i>	\$0(1)	
<i>MOVANTIK TABS 12.5mg, 25mg</i>	\$0(2)	QL (30 tabs / 30 days)
<i>PHAZYME MAXIMUM STRENGTH CAPS 250mg</i>	\$0(3)	*
<i>PHAZYME ULTIMATE CAPS 500mg</i>	\$0(3)	*
<i>RELISTOR SOLN 8mg/0.4ml, 12mg/0.6ml</i>	\$0(2)	NDS, QL (28 syringes / 28 days), PA
<i>simethicone CHEW 80mg</i>	\$0(3)	*
<i>simethicone drops infants SUSP 20mg/0.3ml</i>	\$0(3)	*
<i>simethicone ultra strengt CAPS 180mg</i>	\$0(3)	*
<i>sm gas relief CAPS 180mg; CHEW 80mg, 125mg</i>	\$0(3)	*
<i>sm gas relief drops infan SUSP 20mg/0.3ml</i>	\$0(3)	*
<i>sucralfate TABS 1gm</i>	\$0(1)	
<i>ursodiol CAPS 300mg; TABS 250mg, 500mg</i>	\$0(1)	
<i>VOWST CAP</i>	\$0(2)	NDS, QL (12 caps / 30 days), NM, PA
<i>XERMELO TABS 250mg</i>	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
<i>XIFAXAN TABS 550mg</i>	\$0(2)	NDS, PA
<i>ZENPEP CAP 3000UNIT</i>	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ZENPEP CAP 5000UNT	\$0(2)	
ZENPEP CAP 10000UNT	\$0(2)	
ZENPEP CAP 15000UNT	\$0(2)	
ZENPEP CAP 20000UNT	\$0(2)	
ZENPEP CAP 25000UNT	\$0(2)	
ZENPEP CAP 40000UNT	\$0(2)	
ZENPEP CAP 60000UNT	\$0(2)	

PROTON PUMP INHIBITORS - DRUGS FOR ULCERS AND STOMACH ACID

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

GENITOURINARY - DRUGS TO TREAT GENITAL AND URINARY TRACT CONDITIONS

BENIGN PROSTATIC HYPERPLASIA - DRUGS TO TREAT ENLARGED PROSTATE

<i>alfuzosin hcl</i> TB24 10mg	\$0(1)	QL (30 tabs / 30 days)
<i>dutasteride</i> CAPS .5mg	\$0(1)	QL (30 caps / 30 days)
<i>dutasteride-tamsulosin hcl cap 0.5-0.4 mg</i>	\$0(1)	QL (30 caps / 30 days)
<i>finasteride</i> TABS 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>tadalafil</i> TABS 5mg	\$0(1)	QL (30 tabs / 30 days), PA
<i>tamsulosin hcl</i> CAPS .4mg	\$0(1)	QL (60 caps / 30 days)

MISCELLANEOUS

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

URINARY ANTISPASMODICS - DRUGS TO TREAT URINARY INCONTINENCE

GEMTESA TABS 75mg	\$0(2)	QL (30 tabs / 30 days)
MYRBETRIQ SRER 8mg/ml	\$0(2)	QL (300 mL / 28 days)
MYRBETRIQ TB24 25mg, 50mg	\$0(2)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> SOLN 5mg/5ml	\$0(1)	QL (600 mL / 30 days)
<i>oxybutynin chloride</i> TABS 5mg	\$0(1)	QL (120 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>oxybutynin chloride</i> TB24 10mg, 15mg	\$0(1)	QL (60 tabs / 30 days)
<i>solifenacin succinate</i> TABS 5mg, 10mg	\$0(1)	QL (30 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>tolterodine tartrate</i> CP24 2mg, 4mg	\$0(1)	QL (30 caps / 30 days), ST
<i>tolterodine tartrate</i> TABS 1mg, 2mg	\$0(1)	QL (60 tabs / 30 days)
<i>tropium chloride</i> TABS 20mg	\$0(1)	QL (60 tabs / 30 days)
VAGINAL ANTI-INFECTIVES		
<i>clindamycin phosphate vaginal</i> CREA 2%	\$0(1)	
<i>metronidazole vaginal</i> GEL .75%	\$0(1)	
<i>summers eve medicated</i> SOLN .3%	\$0(3)	*
<i>terconazole vaginal</i> CREA .4%, .8%; SUPP 80mg	\$0(1)	
HEMATOLOGIC - DRUGS TO TREAT BLOOD DISORDERS		
ANTICOAGULANTS - BLOOD THINNERS		
<i>dabigatran etexilate mesylate</i> CAPS 75mg, 150mg	\$0(1)	QL (60 caps / 30 days)
<i>dabigatran etexilate mesylate</i> CAPS 110mg	\$0(1)	QL (120 caps / 30 days)
ELIQUIS TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
ELIQUIS TABS 5mg	\$0(2)	QL (74 tabs / 30 days)
ELIQUIS STARTER PACK TBPk 5mg	\$0(2)	QL (74 tabs / 30 days)
<i>enoxaparin sodium</i> SOLN 300mg/3ml; SOSY 30mg/0.3ml, 40mg/0.4ml, 60mg/0.6ml, 80mg/0.8ml, 100mg/ml, 120mg/0.8ml, 150mg/ml	\$0(1)	
<i>fondaparinux sodium</i> SOLN 2.5mg/0.5ml	\$0(1)	
<i>fondaparinux sodium</i> SOLN 5mg/0.4ml, 7.5mg/0.6ml, 10mg/0.8ml	\$0(2)	NDS
HEP SOD/NACL INJ 25000UNT	\$0(2)	
<i>heparin sodium (porcine)</i> SOLN 1000unit/ml, 5000unit/ml, 10000unit/ml, 20000unit/ml	\$0(1)	B/D
<i>jantoven</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
<i>rivaroxaban</i> SUSR 1mg/ml	\$0(2)	QL (620 mL / 30 days)
<i>rivaroxaban</i> TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
<i>warfarin sodium</i> TABS 1mg, 2mg, 2.5mg, 3mg, 4mg, 5mg, 6mg, 7.5mg, 10mg	\$0(1)	
XARELTO SUSR 1mg/ml	\$0(2)	QL (620 mL / 30 days)
XARELTO TABS 2.5mg	\$0(2)	QL (60 tabs / 30 days)
XARELTO TABS 10mg, 15mg, 20mg	\$0(2)	QL (30 tabs / 30 days)
XARELTO STAR TAB 15/20MG	\$0(2)	QL (51 tabs / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
HEMATOPOIETIC GROWTH FACTORS		
FULPHILA SOSY 6mg/0.6ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
PROCRIT SOLN 2000unit/ml, 3000unit/ml, 4000unit/ml, 10000unit/ml	\$0(2)	NM, PA
PROCRIT SOLN 20000unit/ml, 40000unit/ml	\$0(2)	NDS, NM, PA
ZARXIO SOSY 300mcg/0.5ml, 480mcg/0.8ml	\$0(2)	NDS, NM, PA
MISCELLANEOUS		
ALVAIZ TABS 9mg, 54mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
ALVAIZ TABS 18mg, 36mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
<i>anagrelide hcl</i> CAPS .5mg, 1mg	\$0(1)	
BERINERT KIT 500unit	\$0(2)	NDS, QL (24 boxes / 30 days), NM, PA
<i>cilostazol</i> TABS 50mg, 100mg	\$0(1)	
DOPTELET TABS 20mg	\$0(2)	NDS, NM, PA
HAEGARDA SOLR 2000unit	\$0(2)	NDS, QL (30 vials / 30 days), NM, PA
HAEGARDA SOLR 3000unit	\$0(2)	NDS, QL (20 vials / 30 days), NM, PA
<i>icatibant acetate</i> SOSY 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
<i>l-glutamine (sickle cell)</i> PACK 5gm	\$0(2)	NDS, NM, PA
<i>pentoxifylline</i> TBCR 400mg	\$0(1)	
<i>sajazir</i> SOSY 30mg/3ml	\$0(2)	NDS, QL (9 syringes / 30 days), NM, PA
SIKLOS TABS 100mg	\$0(2)	
SIKLOS TABS 1000mg	\$0(2)	NDS
TAVNEOS CAPS 10mg	\$0(2)	NDS, QL (180 caps / 30 days), NM, PA
<i>tranexamic acid</i> SOLN 1000mg/10ml; TABS 650mg	\$0(1)	
PLATELET AGGREGATION INHIBITORS		
<i>aspirin-dipyridamole cap er 12hr 25-200 mg</i>	\$0(1)	
BRILINTA TABS 60mg, 90mg	\$0(2)	
<i>clopidogrel bisulfate</i> TABS 75mg	\$0(1)	
<i>dipyridamole</i> TABS 25mg, 50mg, 75mg	\$0(2)	PA; PA applies if 70 years and older
<i>prasugrel hcl</i> TABS 5mg, 10mg	\$0(1)	
<i>ticagrelor</i> TABS 60mg, 90mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
IMMUNOLOGIC AGENTS - DRUGS TO TREAT DISORDERS OF THE IMMUNE SYSTEM		
<i>AUTOIMMUNE AGENTS</i>		
ADALIMUMAB-AACF (2 PEN) AJKT 40mg/0.8ml	\$0(2)	NDS, QL (56 pens / 365 days), NM, PA
ADALIMUMAB-AACF (2 SYRING PSKT 40mg/0.8ml	\$0(2)	NDS, QL (56 syringes / 365 days), NM, PA
ADALIMUMAB-AACF STARTER P AJKT 40mg/0.8ml	\$0(2)	NDS, QL (2 packs / year), NM, PA
COSENTYX SOLN 125mg/5ml	\$0(2)	NDS, NM, PA
COSENTYX SOSY 75mg/0.5ml	\$0(2)	NDS, QL (16 syringes / 365 days), NM, PA
COSENTYX SOSY 150mg/ml	\$0(2)	NDS, QL (32 syringes / 365 days), NM, PA
COSENTYX SENSOREADY PEN SOAJ 150mg/ml	\$0(2)	NDS, QL (32 pens / 365 days), NM, PA
COSENTYX UNOREADY SOAJ 300mg/2ml	\$0(2)	NDS, QL (16 pens / 365 days), NM, PA
DUPIXENT SOAJ 200mg/1.14ml, 300mg/2ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
DUPIXENT SOSY 200mg/1.14ml, 300mg/2ml	\$0(2)	NDS, QL (4 syringes / 28 days), NM, PA
ENBREL SOLN 25mg/0.5ml	\$0(2)	NDS, QL (16 vials / 28 days), NM, PA
ENBREL SOSY 25mg/0.5ml	\$0(2)	NDS, QL (16 syringes / 28 days), NM, PA
ENBREL SOSY 50mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
ENBREL MINI SOCT 50mg/ml	\$0(2)	NDS, QL (8 cartridges / 28 days), NM, PA
ENBREL SURECLICK SOAJ 50mg/ml	\$0(2)	NDS, QL (8 pens / 28 days), NM, PA
HUMIRA PSKT 10mg/0.1ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
HUMIRA PSKT 20mg/0.2ml	\$0(2)	NDS, QL (4 syringes / 28 days), NM, PA
HUMIRA PSKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 syringes / 28 days), NM, PA
HUMIRA PEN AJKT 40mg/0.4ml, 40mg/0.8ml	\$0(2)	NDS, QL (6 pens / 28 days), NM, PA
HUMIRA PEN AJKT 80mg/0.8ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
HUMIRA PEN KIT PS/UV	\$0(2)	NDS, QL (3 pens / 28 days), NM, PA
HUMIRA PEN-CD/UC/HS START AJKT 80mg/0.8ml	\$0(2)	NDS, QL (3 pens / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
HUMIRA PEN-PEDIATRIC UC S AJKT 80mg/0.8ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
IDACIO (2 PEN) AJKT 40mg/0.8ml	\$0(2)	NDS, QL (56 pens / 365 days), NM, PA
IDACIO (2 SYRINGE) PSKT 40mg/0.8ml	\$0(2)	NDS, QL (56 syringes / 365 days), NM, PA
IDACIO CROHN INJ DISEASE AJKT 40mg/0.8ml	\$0(2)	NDS, QL (2 packs / year), NM, PA
IDACIO PLAQU INJ PSORIASIS AJKT 40mg/0.8ml	\$0(2)	NDS, QL (2 packs / year), NM, PA
INFLIXIMAB SOLR 100mg	\$0(2)	NDS, NM, PA
PYZCHIVA SOLN 45mg/0.5ml	\$0(2)	NDS, QL (1 vial / 28 days), NM, PA
PYZCHIVA SOLN 130mg/26ml	\$0(2)	NDS, NM, PA
PYZCHIVA SOSY 45mg/0.5ml	\$0(2)	QL (1 syringe / 28 days), NM, PA
PYZCHIVA SOSY 90mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
REMICADE SOLR 100mg	\$0(2)	NDS, NM, PA
RENFLEXIS SOLR 100mg	\$0(2)	NDS, NM, PA
RINVOQ TB24 15mg, 30mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
RINVOQ TB24 45mg	\$0(2)	NDS, QL (168 tabs / year), NM, PA
RINVOQ LQ SOLN 1mg/ml	\$0(2)	NDS, QL (360 mL / 30 days), NM, PA
SKYRIZI SOCT 180mg/1.2ml, 360mg/2.4ml	\$0(2)	NDS, QL (1 cartridge / 56 days), NM, PA
SKYRIZI SOLN 600mg/10ml	\$0(2)	NDS, NM, PA
SKYRIZI SOSY 150mg/ml	\$0(2)	NDS, QL (6 syringes / 365 days), NM, PA
SKYRIZI PEN SOAJ 150mg/ml	\$0(2)	NDS, QL (6 pens / 365 days), NM, PA
SOTYKTU TABS 6mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
STELARA SOLN 45mg/0.5ml	\$0(2)	NDS, QL (1 vial / 28 days), NM, PA
STELARA SOLN 130mg/26ml	\$0(2)	NDS, NM, PA
STELARA SOSY 45mg/0.5ml, 90mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOAJ 100mg/ml	\$0(2)	NDS, QL (1 pen / 28 days), NM, PA
TREMFYA SOAJ 200mg/2ml	\$0(2)	NDS, QL (2 pens / 28 days), NM, PA
TREMFYA SOLN 200mg/20ml	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TREMFYA SOSY 100mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
TREMFYA SOSY 200mg/2ml	\$0(2)	NDS, QL (2 syringes / 28 days), NM, PA
TREMFYA INDUCTION PACK FO SOAJ 200mg/2ml	\$0(2)	NDS, QL (2 pens / 28 days), NM, PA
TYENNE SOAJ 162mg/0.9ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
TYENNE SOLN 80mg/4ml, 200mg/10ml, 400mg/20ml	\$0(2)	NDS, NM, PA
TYENNE SOSY 162mg/0.9ml	\$0(2)	NDS, QL (4 syringes / 28 days), NM, PA
VELSIPITY TABS 2mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
XELJANZ SOLN 1mg/ml	\$0(2)	NDS, QL (480 mL / 24 days), NM, PA
XELJANZ TABS 5mg, 10mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
XELJANZ XR TB24 11mg, 22mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
YESINTEK SOLN 45mg/0.5ml	\$0(2)	QL (1 vial / 28 days), NM, PA
YESINTEK SOLN 130mg/26ml	\$0(2)	NM, PA
YESINTEK SOSY 45mg/0.5ml	\$0(2)	QL (1 syringe / 28 days), NM, PA
YESINTEK SOSY 90mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA

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

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

IMMUNOGLOBULINS

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

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
GAMMAGARD S/D IGA LESS TH SOLR 5gm, 10gm	\$0(2)	NDS, NM, PA
GAMMAKED SOLN 1gm/10ml, 5gm/50ml, 10gm/100ml, 20gm/200ml	\$0(2)	NDS, NM, PA
GAMMAPLEX SOLN 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 20gm/400ml	\$0(2)	NDS, NM, PA
GAMUNEX-C SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
OCTAGAM SOLN 1gm/20ml, 2gm/20ml, 2.5gm/50ml, 5gm/100ml, 5gm/50ml, 10gm/100ml, 10gm/200ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PANZYGA SOLN 1gm/10ml, 2.5gm/25ml, 5gm/50ml, 10gm/100ml, 20gm/200ml, 30gm/300ml	\$0(2)	NDS, NM, PA
PRIVIGEN SOLN 5gm/50ml, 10gm/100ml, 20gm/200ml, 40gm/400ml	\$0(2)	NDS, NM, PA
IMMUNOMODULATORS		
ACTIMMUNE SOLN 100mcg/0.5ml	\$0(2)	NDS, NM, PA
ARCALYST SOLR 220mg	\$0(2)	NDS, NM, PA
IMMUNOSUPPRESSANTS		
ASTAGRAF XL CP24 5mg	\$0(2)	NDS, B/D, NM
ASTAGRAF XL CP24 .5mg, 1mg	\$0(2)	B/D, NM
<i>azathioprine</i> TABS 50mg	\$0(1)	B/D
BENLYSTA SOAJ 200mg/ml; SOSY 200mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
BENLYSTA SOLR 120mg, 400mg	\$0(2)	NDS, NM, PA
<i>cyclosporine</i> CAPS 25mg, 100mg	\$0(1)	B/D, NM
<i>cyclosporine modified (for microemulsion)</i> CAPS 25mg, 50mg, 100mg; SOLN 100mg/ml	\$0(1)	B/D, NM
<i>everolimus (immunosuppressant)</i> TABS .25mg, .5mg, .75mg, 1mg	\$0(2)	NDS, B/D, NM
<i>engraf</i> CAPS 25mg, 100mg; SOLN 100mg/ml	\$0(1)	B/D, NM
<i>mycophenolate mofetil</i> CAPS 250mg; TABS 500mg	\$0(1)	B/D, NM
<i>mycophenolate mofetil</i> SUSR 200mg/ml	\$0(2)	NDS, B/D, NM
<i>mycophenolate sodium</i> TBEC 180mg, 360mg	\$0(1)	B/D, NM
NULOJIX SOLR 250mg	\$0(2)	NDS, B/D, NM
PROGRAF PACK .2mg, 1mg	\$0(2)	B/D, NM

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
REZUROCK TABS 200mg	\$0(2)	NDS, QL (30 tabs / 30 days), NM, PA
<i>sirolimus</i> SOLN 1mg/ml	\$0(2)	NDS, B/D, NM
<i>sirolimus</i> TABS .5mg, 1mg, 2mg	\$0(1)	B/D, NM
<i>tacrolimus</i> CAPS .5mg, 1mg, 5mg	\$0(1)	B/D, NM
VACCINES		
ABRYSVO SOLR 120mcg/0.5ml	\$0(1)	
ACTHIB INJ	\$0(1)	
ADACEL INJ	\$0(1)	
AREXVY SUSR 120mcg/0.5ml	\$0(1)	
BCG VACCINE SOLR 50mg	\$0(1)	
BEXSERO SUSY .5ml	\$0(1)	
BOOSTRIX INJ	\$0(1)	
DAPTACEL INJ	\$0(1)	
DENGVAXIA SUS	\$0(1)	
DIP/TET PED INJ 25-5LFU	\$0(1)	B/D
ENGERIX-B SUSP 20mcg/ml; SUSY 10mcg/0.5ml, 20mcg/ml	\$0(1)	B/D
GARDASIL 9 SUSP .5ml; SUSY .5ml	\$0(1)	
HAVRIX SUSP 1440elu/ml; SUSY 720elu/0.5ml	\$0(1)	
HEPLISAV-B SOSY 20mcg/0.5ml	\$0(1)	B/D
HIBERIX SOLR 10mcg	\$0(1)	
IMOVAX RABIES (H.D.C.V.) SUSR 2.5unit/ml	\$0(1)	B/D
INFANRIX INJ	\$0(1)	
IPOL INJ INACTIVE	\$0(1)	
IXIARO INJ	\$0(1)	
JYNNEOS SUSP .5ml	\$0(1)	B/D
KINRIX INJ	\$0(1)	
M-M-R II INJ	\$0(1)	
MENACTRA INJ	\$0(1)	
MENQUADFI SOLN .5ml	\$0(1)	
MENVEO INJ	\$0(1)	
MENVEO SOL	\$0(1)	
MRESVIA SUSY 50mcg/0.5ml	\$0(1)	
PEDIARIX INJ 0.5ML	\$0(1)	
PEDVAX HIB SUSP 7.5mcg/0.5ml	\$0(1)	
PENBRAYA INJ	\$0(1)	
PENMENVY INJ	\$0(1)	
PENTACEL INJ	\$0(1)	
PRIORIX INJ	\$0(1)	
PROQUAD INJ	\$0(1)	
QUADRACEL INJ 0.5ML	\$0(1)	
RABAVERT INJ	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
RECOMBIVAX HB SUSP 5mcg/0.5ml, 10mcg/ml, 40mcg/ml; SUSY 5mcg/0.5ml, 10mcg/ml	\$0(1)	B/D
ROTARIX SUS	\$0(1)	
ROTATEQ SOL	\$0(1)	
SHINGRIX SUSR 50mcg/0.5ml	\$0(1)	QL (2 vials per lifetime)
TENIVAC INJ 5-2LF	\$0(1)	B/D
TICOVAC SUSY 1.2mcg/0.25ml, 2.4mcg/0.5ml	\$0(1)	
TRUMENBA SUSY .5ml	\$0(1)	
TWINRIX INJ	\$0(1)	
TYPHIM VI SOLN 25mcg/0.5ml; SOSY 25mcg/0.5ml	\$0(1)	
VAQTA SUSP 25unit/0.5ml, 50unit/ml	\$0(1)	
VARIVAX SUSR 1350pfu/0.5ml	\$0(1)	
VAXCHORA SUS	\$0(1)	
VIMKUNYA SUSY 40mcg/0.8ml	\$0(1)	
VIVOTIF CAP EC	\$0(1)	
YF-VAX INJ	\$0(1)	
MISCELLANEOUS		
MISCELLANEOUS		
BABY SKIN PROTECTANT OINT 41%	\$0(3)	*
PETROLATUM OINT 42%	\$0(3)	*
NUTRITIONAL/SUPPLEMENTS - VITAMINS AND SUPPLEMENTS		
ELECTROLYTES/MINERALS, INJECTABLE		
D2.5W/NACL INJ 0.45%	\$0(2)	
D10W/NACL INJ 0.2%	\$0(2)	
dextrose 2.5% w/ sodium chloride 0.45%	\$0(1)	
dextrose 5% in lactated ringers	\$0(1)	
dextrose 5% w/ sodium chloride 0.2%	\$0(1)	
dextrose 5% w/ sodium chloride 0.3%	\$0(1)	
dextrose 5% w/ sodium chloride 0.9%	\$0(1)	
dextrose 5% w/ sodium chloride 0.45%	\$0(1)	
dextrose 5% w/ sodium chloride 0.225%	\$0(1)	
dextrose 10% w/ sodium chloride 0.45%	\$0(1)	
ISOLYTE-P INJ /D5W	\$0(2)	
ISOLYTE-S INJ PH 7.4	\$0(2)	
kcl 10 meq/l (0.075%) in dextrose 5% & nacl 0.45% inj	\$0(1)	
kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.2% inj	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.9% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.9% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.15%) in nacl 0.45% inj</i>	\$0(1)	
<i>kcl 20 meq/l (0.149%) in nacl 0.45% inj</i>	\$0(1)	
<i>kcl 30 meq/l (0.224%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.9% inj</i>	\$0(1)	
<i>kcl 40 meq/l (0.3%) in dextrose 5% & nacl 0.45% inj</i>	\$0(1)	
<i>kcl 40 meq/l (0.3%) in nacl 0.9% inj</i>	\$0(1)	
KCL/D5W/NACL INJ 0.3/0.9%	\$0(2)	
<i>lactated ringer's solution</i>	\$0(1)	
MAGNESIUM SULFATE SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml	\$0(2)	
<i>magnesium sulfate SOLN 2gm/50ml, 4gm/100ml, 4gm/50ml, 20gm/500ml, 40gm/1000ml, 50%</i>	\$0(2)	
<i>magnesium sulfate in dextrose 5% iv soln 1 gm/100ml</i>	\$0(2)	
<i>multiple electrolytes ph 5.5</i>	\$0(1)	
<i>multiple electrolytes ph 7.4</i>	\$0(1)	
POT CHL 20MEQ/L IN NACL 0.9% INJ	\$0(2)	
POT CHL 20MEQ/L IN NACL 0.45% INJ	\$0(2)	
POT CHL 40MEQ/L IN NACL 0.9% INJ	\$0(2)	
<i>potassium chloride SOLN 2meq/ml, 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 40meq/100ml</i>	\$0(1)	
<i>potassium chloride 20 meq/l (0.15%) in dextrose 5% inj</i>	\$0(1)	
<i>sodium chloride SOLN .45%, .9%, 2.5meq/ml, 3%, 5%</i>	\$0(1)	
TPN ELECTROL INJ	\$0(2)	B/D
<i>ELECTROLYTES/MINERALS/VITAMINS, ORAL</i>		
<i>klor-con PACK 20meq</i>	\$0(1)	
<i>klor-con 8 TBCR 8meq</i>	\$0(1)	
<i>klor-con 10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m10 TBCR 10meq</i>	\$0(1)	
<i>klor-con m15 TBCR 15meq</i>	\$0(1)	
<i>klor-con m20 TBCR 20meq</i>	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
M-NATAL PLUS TAB	\$0(2)	
<i>potassium chloride</i> CPCR 8meq, 10meq; PACK 20meq; SOLN 10%, 20%; TBCR 8meq, 10meq, 20meq	\$0(1)	
<i>potassium chloride microencapsulated crystals er</i> TBCR 10meq, 15meq, 20meq	\$0(1)	
PRENATAL TAB 27-1MG	\$0(2)	
PRENATAL TAB PLUS	\$0(2)	
<i>sodium fluoride chew; tab; 1.1 (0.5 f) mg/ml soln</i>	\$0(1)	
WESTAB PLUS TAB 27-1MG	\$0(2)	
IV NUTRITION		
CLINIMIX INJ 4.25/D5W	\$0(2)	B/D
CLINIMIX INJ 4.25/D10	\$0(2)	B/D
CLINIMIX INJ 5%/D15W	\$0(2)	B/D
CLINIMIX INJ 5%/D20W	\$0(2)	B/D
CLINIMIX INJ 6/5	\$0(2)	B/D
CLINIMIX INJ 8/10	\$0(2)	B/D
CLINIMIX INJ 8/14	\$0(2)	B/D
<i>clinisol sf 15%</i>	\$0(1)	B/D
CLINOLIPID EMU 20%	\$0(2)	B/D
<i>dextrose</i> SOLN 5%, 10%	\$0(1)	
<i>dextrose</i> SOLN 50%, 70%	\$0(1)	B/D
INTRALIPID EMUL 20gm/100ml, 30gm/100ml	\$0(2)	B/D
NUTRILIPID EMUL 20gm/100ml	\$0(2)	B/D
<i>plenamine</i>	\$0(1)	B/D
PREMASOL SOL 10%	\$0(2)	NDS, B/D
PROSOL INJ 20%	\$0(2)	B/D
TRAVASOL INJ 10%	\$0(2)	B/D
TROPHAMINE INJ 10%	\$0(2)	B/D
MINERALS		
<i>calcium 600+d3</i>	\$0(3)	*
CALCIUM + D3 TAB	\$0(3)	*
<i>calcium + vitamin d3</i>	\$0(3)	*
CALCIUM ACETATE TABS 668mg	\$0(3)	*
<i>calcium carb-cholecalciferol tab 600 mg-10 mcg (400 unit)</i>	\$0(3)	*
<i>calcium carbonate-cholecalciferol tab 500 mg-5 mcg(200 unit)</i>	\$0(3)	*
CHEWABLE CALCIUM CHEW 500mg	\$0(3)	*
<i>gnp calcium</i> TABS 600mg	\$0(3)	*
<i>magnesium lactate</i> TBCR 7meq	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>magnesium oxide (mg supplement)</i> TABS 400mg, 500mg	\$0(3)	*
<i>magnesium-oxide</i> TABS 400mg	\$0(3)	*
<i>os-cal calcium + d3</i>	\$0(3)	*
<i>os-cal extra d3</i>	\$0(3)	*
<i>oysco 500+d</i>	\$0(3)	*
<i>oyster shell</i> TABS 500mg	\$0(3)	*
<i>phospha 250 neutral</i>	\$0(3)	*
<i>phospho-trin 250 neutral</i>	\$0(3)	*
<i>pot phos monobasic w/sod phos di & monobas tab 155-852-130mg</i>	\$0(3)	*
<i>potassium & sodium phosphates powder pack 280-160-250 mg</i>	\$0(3)	*
<i>true magnesium oxide</i> TABS 400mg, 500mg	\$0(3)	*
<i>ultra calcium + vitamin d</i>	\$0(3)	*
<i>wes-phos 250 neutral</i>	\$0(3)	*
MISCELLANEOUS		
<i>coenzyme q10 (ubidecarenone)</i> CAPS 30mg, 50mg, 200mg	\$0(3)	*
<i>melatonin</i> TABS 3mg, 5mg	\$0(3)	*
<i>melatonin maximum strengt</i> TABS 5mg	\$0(3)	*
<i>*omega-3 fatty acids cap 500 mg**</i>	\$0(3)	*
<i>*omega-3 fatty acids cap 1000 mg**</i>	\$0(3)	*
VITAMINS		
<i>aqueous vitamin d infants</i> LIQD 10mcg/ml	\$0(3)	*
<i>ascorbic acid</i> TABS 250mg, 500mg, 1000mg	\$0(3)	*
<i>*b-complex vitamin cap**</i>	\$0(3)	*
<i>*b-complex vitamin tab**</i>	\$0(3)	*
<i>c-500</i> CHEW 500mg	\$0(3)	*
<i>calcidol</i> SOLN 200mcg/ml	\$0(3)	*
<i>cholecalciferol</i> CAPS 50mcg, 50000unit; LIQD 400unit/ml; TABS 400unit, 5000unit	\$0(3)	*
<i>d3 high potency</i> CAPS 1000unit	\$0(3)	*
<i>DECARA</i> CAPS 25000unit	\$0(3)	*
<i>decara</i> CAPS 50000unit	\$0(3)	*
<i>DIALYVIT 800</i> TAB ZINC 15	\$0(3)	*
<i>dialyvite</i>	\$0(3)	*
<i>dialyvite 800</i>	\$0(3)	*
<i>dialyvite 800/ultra d</i>	\$0(3)	*
<i>DIALYVITE</i> TAB 800/ZINC	\$0(3)	*
<i>DIALYVITE</i> TAB SUPREM D	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>dialyvite vitamin d3 max</i> TABS 50000unit	\$0(3)	*
<i>dialyvite vitamin d 5000</i> CAPS 5000unit	\$0(3)	*
DIALYVITE WAF 800	\$0(3)	*
DIALYVITE/ TAB ZINC	\$0(3)	*
<i>e-200</i> CAPS 200unit	\$0(3)	*
<i>ergocalciferol</i> CAPS 1.25mg, 50000unit; SOLN 8000unit/ml	\$0(3)	*
FOLBIC RF TAB	\$0(3)	*
FOLTABS 800 TAB	\$0(3)	*
FOLTANX RF CAP	\$0(3)	*
<i>geritol complete</i>	\$0(3)	*
GERITOL LIQ TONIC	\$0(3)	*
<i>icaps</i>	\$0(3)	*
L-METHYLFOLA CAP FORTE 15	\$0(3)	*
METAFOLBIC TAB PLUS	\$0(3)	*
<i>phytonadione</i> SOLN 1mg/0.5ml, 10mg/ml; TABS 5mg	\$0(3)	*
PRESERVISION CAP AREDS	\$0(3)	*
PRESERVISION CAP AREDS 2	\$0(3)	*
PRESERVISION CAP LUTEIN	\$0(3)	*
PRESERVISION TAB AREDS	\$0(3)	*
<i>solvita e</i> SOLN 15.8mg/0.7ml	\$0(3)	*
<i>thiamine mononitrate</i> TABS 100mg	\$0(3)	*
TRUE VITAMIN B1 TABS 50mg	\$0(3)	*
<i>true vitamin c</i> TABS 250mg, 500mg, 1000mg	\$0(3)	*
<i>true vitamin d3</i> CAPS 1.25mg, 10mcg, 25mcg, 125mcg, 250mcg; TABS 1.25mg, 10mcg, 25mcg, 125mcg, 250mcg	\$0(3)	*
<i>true vitamin e</i> CAPS 90mg, 180mg, 450mg	\$0(3)	*
<i>vitamin a</i> CAPS 10000unit	\$0(3)	*
<i>vitamin d3 super strength</i> CAPS 2000unit; TABS 2000unit	\$0(3)	*
<i>vitamin d3 ultra strength</i> CAPS 5000unit	\$0(3)	*
<i>vitamin e</i> CAPS 400unit, 450mg	\$0(3)	*
VITAMIN E SOLN 15mg/0.67ml	\$0(3)	*
<i>vitamin supplement e-400</i> CAPS 400unit	\$0(3)	*
<i>weekly-d</i> CAPS 1.25mg	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
OPHTHALMIC - DRUGS TO TREAT EYE CONDITIONS		
ANTI-INFECTIVE/ANTI-INFLAMMATORY - DRUGS TO TREAT INFECTIONS AND INFLAMMATION		
<i>bacitracin-polymyxin-neomycin-hc ophth oint 1%</i>	\$0(1)	
<i>neo-polycin hc ophth oint 1%</i>	\$0(1)	
<i>neomycin-polymyxin-dexamethasone ophth oint 0.1%</i>	\$0(1)	
<i>neomycin-polymyxin-dexamethasone ophth susp 0.1%</i>	\$0(1)	
<i>neomycin-polymyxin-hc ophth susp</i>	\$0(1)	
<i>sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%</i>	\$0(1)	
TOBRADEX OIN 0.3-0.1%	\$0(2)	
<i>tobramycin-dexamethasone ophth susp 0.3-0.1%</i>	\$0(1)	
ZYLET SUS 0.5-0.3%	\$0(2)	
ANTI-INFECTIVES - DRUGS TO TREAT INFECTIONS		
<i>bacitracin (ophthalmic) OINT 500unit/gm</i>	\$0(1)	
<i>bacitracin-polymyxin b ophth oint</i>	\$0(1)	
BESIVANCE SUSP .6%	\$0(2)	
CILOXAN OINT .3%	\$0(2)	
<i>ciprofloxacin hcl (ophth) SOLN .3%</i>	\$0(1)	
<i>erythromycin (ophth) OINT 5mg/gm</i>	\$0(1)	
<i>gatifloxacin (ophth) SOLN .5%</i>	\$0(1)	
<i>gentamicin sulfate (ophth) SOLN .3%</i>	\$0(1)	
<i>moxifloxacin hcl (ophth) SOLN .5%</i>	\$0(1)	QL (12 mL / 30 days)
NATACYN SUSP 5%	\$0(2)	
<i>neo-polycin 5(3.5)mg-400unt-10000unt op oin</i>	\$0(1)	
<i>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</i>	\$0(1)	
<i>neomycin-polymy-gramicid op sol 1.75- 10000-0.025mg-unt-mg/ml</i>	\$0(1)	
<i>ofloxacin (ophth) SOLN .3%</i>	\$0(1)	
<i>polycin ophth oint</i>	\$0(1)	
<i>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</i>	\$0(1)	
<i>sulfacetamide sodium (ophth) OINT 10%; SOLN 10%</i>	\$0(1)	
<i>tobramycin (ophth) SOLN .3%</i>	\$0(1)	
<i>trifluridine SOLN 1%</i>	\$0(1)	
XDEMVY SOLN .25%	\$0(2)	NDS, NM, PA
ZIRGAN GEL .15%	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
ANTI-INFLAMMATORIES - DRUGS TO TREAT INFLAMMATION		
<i>bromfenac sodium (ophth)</i> SOLN .07%, .075%	\$0(1)	
<i>dexamethasone sodium phosphate (ophth)</i> SOLN .1%	\$0(1)	
<i>diclofenac sodium (ophth)</i> SOLN .1%	\$0(1)	
FLAREX SUSP .1%	\$0(2)	
<i>fluorometholone (ophth)</i> SUSP .1%	\$0(1)	
<i>flurbiprofen sodium</i> SOLN .03%	\$0(1)	
<i>ketorolac tromethamine (ophth)</i> SOLN .4%, .5%	\$0(1)	
LOTEMAX OINT .5%	\$0(2)	
<i>loteprednol etabonate</i> SUSP .2%	\$0(1)	
<i>prednisolone acetate (ophth)</i> SUSP 1%	\$0(1)	
PREDNISOLONE SODIUM PHOSP SOLN 1%	\$0(2)	
ANTIALLERGICS - DRUGS TO TREAT ALLERGIES		
<i>alaway</i> SOLN .035%	\$0(3)	*
<i>alaway childrens allergy</i> SOLN .035%	\$0(3)	*
<i>azelastine hcl (ophth)</i> SOLN .05%	\$0(1)	
<i>cromolyn sodium (ophth)</i> SOLN 4%	\$0(1)	
<i>eye drops</i> SOLN .05%	\$0(3)	*
<i>eye itch relief</i> SOLN .035%	\$0(3)	*
<i>ft eye drops</i> SOLN .05%	\$0(3)	*
<i>gnp eye drops</i> SOLN .05%	\$0(3)	*
<i>ketotifen fumarate (ophth)</i> SOLN .035%	\$0(3)	*
ZERVIAE SOLN .24%	\$0(2)	
ANTI GLAUCOMA - DRUGS TO TREAT GLAUCOMA		
<i>betaxolol hcl (ophth)</i> SOLN .5%	\$0(1)	
BETOPTIC-S SUSP .25%	\$0(2)	
<i>brimonidine tartrate</i> SOLN .15%, .2%	\$0(1)	
<i>brinzolamide</i> SUSP 1%	\$0(1)	
<i>carteolol hcl (ophth)</i> SOLN 1%	\$0(1)	
COMBIGAN SOL 0.2/0.5%	\$0(2)	
<i>dorzolamide hcl</i> SOLN 2%	\$0(1)	
<i>dorzolamide hcl-timolol maleate ophth soln</i> 2-0.5%	\$0(1)	
<i>latanoprost</i> SOLN .005%	\$0(1)	
<i>levobunolol hcl</i> SOLN .5%	\$0(1)	
LUMIGAN SOLN .01%	\$0(2)	
<i>pilocarpine hcl</i> SOLN 1%, 2%, 4%	\$0(1)	
RHOPRESSA SOLN .02%	\$0(2)	
ROCKLATAN DRO	\$0(2)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
SIMBRINZA SUS 1-0.2%	\$0(2)	
<i>timolol maleate (ophth)</i> SOLG .25%, .5%; SOLN .25%, .5%	\$0(1)	
VYZULTA SOLN .024%	\$0(2)	
MISCELLANEOUS		
ATROPINE SULFATE SOLN 1%	\$0(2)	
<i>atropine sulfate (ophthalmic)</i> SOLN 1%	\$0(1)	
CYSTADROPS SOLN .37%	\$0(2)	NDS, NM, PA
CYSTARAN SOLN .44%	\$0(2)	NDS, NM, PA
EYSUVIS SUSP .25%	\$0(2)	
<i>genteal tears night-time</i>	\$0(3)	*
<i>gnp nighttime relief lubr</i>	\$0(3)	*
<i>lubricant eye nighttime</i>	\$0(3)	*
MIEBO SOLN 1.338gm/ml	\$0(2)	
MURO 128 SOLN 2%	\$0(3)	*
<i>proparacaine hcl</i> SOLN .5%	\$0(1)	
<i>refresh lacri-lube</i>	\$0(3)	*
RESTASIS EMUL .05%	\$0(2)	
RESTASIS MULTIDOSE EMUL .05%	\$0(2)	
<i>sodium chloride hypertonic</i> OINT 5%; SOLN 5%	\$0(3)	*
<i>systane nighttime</i>	\$0(3)	*
XIIDRA SOLN 5%	\$0(2)	
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR		
OTIC AGENTS		
<i>acetic acid (otic)</i> SOLN 2%	\$0(1)	
<i>ciprofloxacin-dexamethasone otic susp</i> 0.3-0.1%	\$0(1)	
<i>flac</i> OIL .01%	\$0(1)	
<i>fluocinolone acetonide (otic)</i> OIL .01%	\$0(1)	
<i>neomycin-polymyxin-hc otic soln</i> 1%	\$0(1)	
<i>neomycin-polymyxin-hc otic susp</i> 3.5 mg/ml-10000 unit/ml-1%	\$0(1)	
<i>ofloxacin (otic)</i> SOLN .3%	\$0(1)	
RESPIRATORY - DRUGS TO TREAT BREATHING DISORDERS		
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS - DRUGS TO TREAT COPD		
ANORO ELLIPT AER 62.5-25	\$0(2)	QL (60 blisters / 30 days)
BEVESPI AER 9-4.8MCG	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE	\$0(2)	QL (1 inhaler / 30 days)
BREZTRI AERO AER SPHERE (INSTITUTIONAL PACK)	\$0(2)	QL (4 inhalers / 28 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
COMBIVENT AER 20-100	\$0(2)	QL (2 inhalers / 30 days)
<i>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</i>	\$0(1)	B/D
TRELEGY AER ELLIPTA 100-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)
TRELEGY AER ELLIPTA 200-62.5-25 MCG	\$0(2)	QL (60 blisters / 30 days)
ANTICHOLINERGICS - DRUGS TO TREAT COPD		
ATROVENT HFA AERS 17mcg/act	\$0(2)	QL (2 inhalers / 30 days)
INCRUSE ELLIPTA AEPB 62.5mcg/inh	\$0(2)	QL (30 blisters / 30 days)
<i>ipratropium bromide SOLN .02%</i>	\$0(1)	B/D
<i>ipratropium bromide (nasal) SOLN .03%, .06%</i>	\$0(1)	
ANTIHISTAMINES - DRUGS TO TREAT ALLERGIES		
<i>aller-chlor TABS 4mg</i>	\$0(3)	*
<i>allergy CAPS 25mg; TABS 4mg</i>	\$0(3)	*
<i>allergy 24-hr TABS 180mg</i>	\$0(3)	*
<i>allergy childrens SUSP 30mg/5ml</i>	\$0(3)	*
<i>allergy relief CAPS 25mg; TABS 4mg, 25mg, 180mg</i>	\$0(3)	*
<i>allergy relief 24hr TABS 180mg</i>	\$0(3)	*
<i>allergy relief childrens LIQD 12.5mg/5ml</i>	\$0(3)	*
<i>azelastine hcl SOLN .1%</i>	\$0(1)	
<i>banophen CAPS 25mg, 50mg; TABS 25mg</i>	\$0(3)	*
<i>cetirizine hcl SOLN 5mg/5ml</i>	\$0(1)	QL (300 mL / 30 days)
<i>cypheptadine hcl SYRP 2mg/5ml; TABS 4mg</i>	\$0(2)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>diphenhydramine hcl CAPS 25mg, 50mg; LIQD 12.5mg/5ml, 25mg/10ml; TABS 25mg</i>	\$0(3)	*
<i>diphenhydramine hcl SOLN 50mg/ml</i>	\$0(1)	
<i>ed chlorped jr SYRP 2mg/5ml</i>	\$0(3)	*
<i>fexofenadine hcl TABS 60mg, 180mg</i>	\$0(3)	*
<i>ft allergy relief CAPS 25mg; CHEW 25mg; TABS 4mg, 25mg</i>	\$0(3)	*
<i>ft allergy relief 12 hour TABS 60mg</i>	\$0(3)	*
<i>ft allergy relief 24 hour TABS 180mg</i>	\$0(3)	*
<i>ft allergy relief childre LIQD 12.5mg/5ml</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>gnp allergy</i> TABS 25mg	\$0(3)	*
<i>gnp allergy relief</i> CAPS 25mg; CHEW 12.5mg; TABS 4mg, 25mg, 180mg	\$0(3)	*
<i>gnp allergy relief maximu</i> LIQD 12.5mg/5ml	\$0(3)	*
<i>gnp childrens allergy</i> LIQD 12.5mg/5ml	\$0(3)	*
<i>goodsense aller-ease</i> TABS 180mg	\$0(3)	*
<i>12hr allergy relief</i> TABS 60mg	\$0(3)	*
<i>24hr allergy relief</i> TABS 180mg	\$0(3)	*
<i>hydroxyzine hcl</i> SOLN 25mg/ml, 50mg/ml	\$0(2)	PA; PA applies if 70 years and older
<i>hydroxyzine hcl</i> SYRP 10mg/5ml; TABS 10mg, 25mg, 50mg	\$0(2)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>hydroxyzine pamoate</i> CAPS 25mg, 50mg	\$0(2)	PA; PA applies if 70 years and older after a 30 day supply in a calendar year
<i>levocetirizine dihydrochloride</i> SOLN 2.5mg/5ml	\$0(1)	QL (300 mL / 30 days)
<i>levocetirizine dihydrochloride</i> TABS 5mg	\$0(1)	QL (30 tabs / 30 days)
<i>liquid allergy relief</i> LIQD 12.5mg/5ml	\$0(3)	*
<i>m-dryl</i> LIQD 12.5mg/5ml	\$0(3)	*
<i>sm allergy relief</i> CHEW 25mg; TABS 60mg	\$0(3)	*
<i>sm allergy relief childre</i> LIQD 12.5mg/5ml	\$0(3)	*
<i>sm fexofenadine hydrochlo</i> TABS 180mg	\$0(3)	*
BETA AGONISTS - DRUGS TO TREAT ASTHMA AND COPD		
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proair HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Proventil HFA)
<i>albuterol sulfate</i> AERS 108mcg/act	\$0(1)	QL (2 inhalers / 30 days); (generic of Ventolin HFA)
<i>albuterol sulfate</i> NEBU .083%, .63mg/3ml, 1.25mg/3ml, 2.5mg/0.5ml	\$0(1)	B/D
<i>albuterol sulfate</i> SYRP 2mg/5ml; TABS 2mg, 4mg	\$0(1)	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>levalbuterol hcl</i> NEBU .31mg/3ml, .63mg/3ml, 1.25mg/0.5ml, 1.25mg/3ml	\$0(1)	B/D
<i>levalbuterol tartrate</i> AERO 45mcg/act	\$0(1)	QL (2 inhalers / 30 days), ST
SEREVENT DISKUS AEPB 50mcg/dose	\$0(2)	QL (60 inhalations / 30 days)
<i>terbutaline sulfate</i> TABS 2.5mg, 5mg	\$0(1)	
VENTOLIN HFA AERS 108mcg/act	\$0(2)	QL (2 inhalers / 30 days)
VENTOLIN HFA (INSTITUTIONAL PACK) AERS 108mcg/act	\$0(2)	QL (6 inhalers / 30 days)
COUGH AND COLD		
ALAHIST PE TAB 2-7.5MG	\$0(3)	*
COLD & ALLER LIQ CHILDREN	\$0(3)	*
<i>ed a-hist</i>	\$0(3)	*
<i>ft nasal</i> SOLN .05%	\$0(3)	*
<i>gnp nasal spray</i> SOLN .05%	\$0(3)	*
<i>gnp no drip nasal spray</i> SOLN .05%	\$0(3)	*
<i>12 hour nasal spray</i> SOLN .05%	\$0(3)	*
<i>mucinex sinus-max clear &</i> SOLN .05%	\$0(3)	*
<i>mucinex sinus-max sinus/a</i> SOLN .05%	\$0(3)	*
<i>nasal decongestant spray</i> SOLN .05%	\$0(3)	*
<i>nasal relief</i> SOLN .05%	\$0(3)	*
<i>nasal spray 12 hour</i> SOLN .05%	\$0(3)	*
<i>nasal spray no drip</i> SOLN .05%	\$0(3)	*
<i>nohist-lq</i>	\$0(3)	*
RU-HIST D TAB 4-10MG	\$0(3)	*
<i>rynex pe</i>	\$0(3)	*
<i>sinus nasal spray</i> SOLN .05%	\$0(3)	*
<i>sm nasal spray</i> SOLN .05%	\$0(3)	*
<i>sm nasal spray 12 hour</i> SOLN .05%	\$0(3)	*
<i>sm nasal spray sinus</i> SOLN .05%	\$0(3)	*
<i>soothing - 12 hour nasal</i> SOLN .05%	\$0(3)	*
LEUKOTRIENE MODULATORS		
<i>montelukast sodium</i> CHEW 4mg, 5mg; PACK 4mg; TABS 10mg	\$0(1)	
<i>zafirlukast</i> TABS 10mg, 20mg	\$0(1)	
MISCELLANEOUS		
<i>acetylcysteine</i> SOLN 10%, 20%	\$0(1)	B/D
ALYFTREK TAB 4-20-50	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
ALYFTREK TAB 10-50-125	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
ARALAST NP SOLR 500mg, 1000mg	\$0(2)	NDS, NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>cromolyn sodium</i> NEBU 20mg/2ml	\$0(1)	B/D
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.3ml, .3mg/0.3ml	\$0(1)	(generic of EpiPen)
<i>epinephrine (anaphylaxis)</i> SOAJ .15mg/0.15ml, .3mg/0.3ml	\$0(1)	(generic of Adrenaclick)
FASENRA SOSY 10mg/0.5ml, 30mg/ml	\$0(2)	NDS, QL (1 syringe / 28 days), NM, PA
FASENRA PEN SOAJ 30mg/ml	\$0(2)	NDS, QL (1 pen / 28 days), NM, PA
KALYDECO PACK 5.8mg, 13.4mg, 25mg, 50mg, 75mg	\$0(2)	NDS, QL (56 packets / 28 days), NM, PA
KALYDECO TABS 150mg	\$0(2)	NDS, QL (60 tabs / 30 days), NM, PA
OFEV CAPS 100mg, 150mg	\$0(2)	NDS, QL (60 caps / 30 days), NM, PA
ORKAMBI GRA 75-94MG	\$0(2)	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 100-125	\$0(2)	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI GRA 150-188	\$0(2)	NDS, QL (56 packets / 28 days), NM, PA
ORKAMBI TAB 100-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
ORKAMBI TAB 200-125	\$0(2)	NDS, QL (112 tabs / 28 days), NM, PA
<i>pirfenidone</i> CAPS 267mg	\$0(2)	NDS, QL (270 caps / 30 days), NM, PA
<i>pirfenidone</i> TABS 267mg	\$0(2)	NDS, QL (270 tabs / 30 days), NM, PA
<i>pirfenidone</i> TABS 534mg, 801mg	\$0(2)	NDS, QL (90 tabs / 30 days), NM, PA
PROLASTIN-C SOLN 1000mg/20ml	\$0(2)	NDS, NM, PA
PULMOZYME SOLN 2.5mg/2.5ml	\$0(2)	NDS, NM, PA
<i>roflumilast</i> TABS 250mcg	\$0(1)	QL (56 tabs / year)
<i>roflumilast</i> TABS 500mcg	\$0(1)	QL (30 tabs / 30 days)
SYMDEKO TAB 50-75MG	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
SYMDEKO TAB 100-150	\$0(2)	NDS, QL (56 tabs / 28 days), NM, PA
<i>theophylline</i> ELIX 80mg/15ml; SOLN 80mg/15ml; TB12 100mg, 200mg, 300mg, 450mg; TB24 400mg, 600mg	\$0(1)	
TRIKAFTA PAK 59.5MG	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA
TRIKAFTA PAK 75MG	\$0(2)	NDS, QL (56 packs / 28 days), NM, PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
TRIKAFTA TAB 50-25-37.5MG & 75MG	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
TRIKAFTA TAB 100-50-75MG & 150MG	\$0(2)	NDS, QL (84 tabs / 28 days), NM, PA
XOLAIR SOAJ 75mg/0.5ml, 300mg/2ml	\$0(2)	NDS, QL (4 pens / 28 days), NM, PA
XOLAIR SOAJ 150mg/ml	\$0(2)	NDS, QL (8 pens / 28 days), NM, PA
XOLAIR SOLR 150mg	\$0(2)	NDS, QL (8 vials / 28 days), NM, PA
XOLAIR SOSY 75mg/0.5ml, 300mg/2ml	\$0(2)	NDS, QL (4 syringes / 28 days), NM, PA
XOLAIR SOSY 150mg/ml	\$0(2)	NDS, QL (8 syringes / 28 days), NM, PA
ZEMAIRA SOLR 1000mg, 4000mg, 5000mg	\$0(2)	NDS, NM, PA
NASAL STEROIDS - DRUGS TO TREAT ALLERGIES		
<i>allergy relief</i> SUSP 50mcg/act	\$0(3)	*
<i>budesonide (nasal)</i> SUSP 32mcg/act	\$0(3)	*
<i>flunisolide (nasal)</i> SOLN .025%	\$0(1)	QL (3 bottles / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(1)	QL (1 bottle / 30 days)
<i>fluticasone propionate (nasal)</i> SUSP 50mcg/act	\$0(3)	*
<i>ft allergy relief 24 hr</i> SUSP 50mcg/act	\$0(3)	*
<i>gnp budesonide nasal spra</i> SUSP 32mcg/act	\$0(3)	*
<i>gnp fluticasone propionat</i> SUSP 50mcg/act	\$0(3)	*
<i>goodsense 24-hour allergy</i> SUSP 50mcg/act	\$0(3)	*
<i>hm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	*
<i>sm allergy relief nasal s</i> SUSP 50mcg/act	\$0(3)	*
XHANCE EXHU 93mcg/act	\$0(2)	QL (32 mL / 30 days), PA
STERIOD INHALANTS - DRUGS TO TREAT ASTHMA		
ALVESCO AERS 80mcg/act	\$0(2)	QL (3 inhalers / 30 days)
ALVESCO AERS 160mcg/act	\$0(2)	QL (2 inhalers / 30 days)
ARNUITY ELLIPTA AEPB 50mcg/act, 100mcg/act, 200mcg/act	\$0(2)	QL (30 inhalations / 30 days)
<i>budesonide (inhalation)</i> SUSP .25mg/2ml, .5mg/2ml	\$0(1)	B/D

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

**Drug Name
(By Medical Condition)**

**WHAT THE DRUG
WILL COST YOU
(TIER LEVEL)**

**NECESSARY ACTIONS
RESTRICTIONS OR
LIMITS ON USE**

STEROID/BETA-AGONIST COMBINATIONS - DRUGS TO TREAT

ASTHMA AND COPD

ADVAIR HFA AER 45/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 115/21	\$0(2)	QL (1 inhaler / 30 days)
ADVAIR HFA AER 230/21	\$0(2)	QL (1 inhaler / 30 days)
AIRSUPRA AER 90-80MCG	\$0(2)	QL (3 inhalers / 30 days)
BREO ELLIPTA INH 50-25MCG	\$0(2)	QL (60 blisters / 30 days)
BREO ELLIPTA INH 100-25	\$0(2)	QL (60 blisters / 30 days)
BREO ELLIPTA INH 200-25	\$0(2)	QL (60 blisters / 30 days)
<i>breyana</i>	\$0(1)	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act</i>	\$0(1)	QL (3 inhalers / 30 days)
<i>budesonide-formoterol fumarate dihyd aerosol 160-4.5 mcg/act</i>	\$0(1)	QL (3 inhalers / 30 days)
DULERA AER 50-5MCG	\$0(2)	QL (3 inhalers / 30 days)
DULERA AER 100-5MCG	\$0(2)	QL (3 inhalers / 30 days)
DULERA AER 200-5MCG	\$0(2)	QL (3 inhalers / 30 days)
<i>fluticasone-salmeterol aer powder ba 100-50 mcg/act</i>	\$0(1)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 250-50 mcg/act</i>	\$0(1)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>fluticasone-salmeterol aer powder ba 500-50 mcg/act</i>	\$0(1)	QL (60 inhalations / 30 days); (generic PRASCO not covered)
<i>wixela inhub</i>	\$0(1)	QL (60 inhalations / 30 days)

TOPICAL - DRUGS TO TREAT EAR AND SKIN CONDITIONS

DERMATOLOGY, ACNE

<i>accutane</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>acne medication 2.5</i> GEL 2.5%	\$0(3)	*
<i>acne medication 5</i> GEL 5%; LOTN 5%	\$0(3)	*
<i>acne medication 10</i> GEL 10%; LOTN 10%	\$0(3)	*
<i>adapalene</i> GEL .1%	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>amnestem</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>benzefoam</i> FOAM 5.3%	\$0(3)	*
BENZOYL PEROXIDE GEL 2.5%	\$0(3)	*
<i>benzoyl peroxide</i> GEL 5%, 10%; LIQD 10%	\$0(3)	*
<i>benzoyl peroxide topical</i> LIQD 10%	\$0(3)	*
<i>benzoyl peroxide wash</i> LIQD 5%, 10%	\$0(3)	*
<i>benzoyl peroxide-erythromycin gel</i> 5-3%	\$0(1)	QL (46.6 gm / 30 days)
<i>bpo foaming cloths</i> MISC 6%	\$0(3)	*
<i>claravis</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>clindamycin phosphate (topical)</i> GEL 1%	\$0(1)	QL (75 mL / 30 days)
<i>clindamycin phosphate (topical)</i> LOTN 1%; SOLN 1%	\$0(1)	QL (60 mL / 30 days)
<i>ery</i> PADS 2%	\$0(1)	QL (60 pledgets / 30 days)
<i>erythromycin (acne aid)</i> GEL 2%	\$0(1)	QL (60 gm / 30 days)
<i>erythromycin (acne aid)</i> SOLN 2%	\$0(1)	QL (60 mL / 30 days)
<i>isotretinoin</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
<i>lintera wash</i> FOAM 10%	\$0(3)	*
<i>sulfacetamide sodium (acne)</i> LOTN 10%	\$0(1)	QL (118 mL / 30 days)
<i>tretinoin</i> CREA .025%, .05%, .1%; GEL .01%, .025%	\$0(1)	QL (45 gm / 30 days), PA
<i>twice-daily clindamycin phosphate (topical)</i> GEL 1%	\$0(1)	QL (75 gm / 30 days)
<i>zenatane</i> CAPS 10mg, 20mg, 30mg, 40mg	\$0(1)	PA
DERMATOLOGY, ANTIBIOTICS		
<i>bacitracin (topical)</i> OINT 500unit/gm	\$0(3)	*
<i>bacitracin zinc</i> OINT 500unit/gm	\$0(3)	*
<i>double antibiotic</i>	\$0(3)	*
<i>gentamicin sulfate (topical)</i> CREA .1%; OINT .1%	\$0(1)	QL (30 gm / 30 days)
<i>gnp bacitracin zinc</i> OINT 500unit/gm	\$0(3)	*
<i>gnp triple antibiotic</i>	\$0(3)	*
<i>goodsense first aid antib</i>	\$0(3)	*
<i>mupirocin</i> OINT 2%	\$0(1)	QL (220 gm / 30 days)
<i>poly bacitracin</i>	\$0(3)	*
<i>silver sulfadiazine</i> CREA 1%	\$0(1)	
<i>sm antibiotic</i> OINT 500unit/gm	\$0(3)	*
<i>sm double antibiotic</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>sm triple antibiotic orig</i>	\$0(3)	*
<i>ssd CREA 1%</i>	\$0(1)	
SULFAMYLON CREA 85mg/gm	\$0(2)	QL (453.6 gm / 30 days)
<i>triple antibiotic</i>	\$0(3)	*
DERMATOLOGY, ANTIFUNGALS		
ALEVAZOL OINT 1%	\$0(3)	*
<i>antifungal CREA 1%, 2%</i>	\$0(3)	*
<i>antifungal maximum streng SOLN 1%</i>	\$0(3)	*
<i>antifungal powder POWD 2%</i>	\$0(3)	*
<i>athletes foot CREA 1%</i>	\$0(3)	*
<i>athletes foot antifungal AERP 1%</i>	\$0(3)	*
<i>athletes foot powder spra AERP 2%</i>	\$0(3)	*
<i>butenafine hcl CREA 1%</i>	\$0(3)	*
<i>ciclopirox SHAM 1%</i>	\$0(1)	QL (120 mL / 30 days)
<i>ciclopirox olamine CREA .77%</i>	\$0(1)	QL (90 gm / 30 days)
<i>ciclopirox olamine SUSP .77%</i>	\$0(1)	QL (60 mL / 30 days)
<i>clotrimazole (topical) CREA 1%</i>	\$0(1)	QL (45 gm / 30 days)
<i>clotrimazole (topical) CREA 1%; SOLN 1%</i>	\$0(3)	*
<i>clotrimazole (topical) SOLN 1%</i>	\$0(1)	QL (60 mL / 30 days)
<i>clotrimazole antifungal CREA 1%</i>	\$0(3)	*
<i>clotrimazole w/ betamethasone cream 1-0.05%</i>	\$0(1)	QL (45 gm / 30 days)
<i>econazole nitrate CREA 1%</i>	\$0(1)	QL (85 gm / 30 days)
<i>ft antifungal cream CREA 1%, 2%</i>	\$0(3)	*
<i>ft athletes foot cream CREA 1%</i>	\$0(3)	*
FUNGOID TINCTURE SOLN 2%	\$0(3)	*
<i>gnp athletes foot CREA 1%</i>	\$0(3)	*
<i>gnp miconazorb af POWD 2%</i>	\$0(3)	*
<i>gnp terbinafine hydrochlo CREA 1%</i>	\$0(3)	*
<i>gnp tolnaftate CREA 1%</i>	\$0(3)	*
<i>ketoconazole (topical) CREA 2%</i>	\$0(1)	QL (60 gm / 30 days)
<i>ketoconazole (topical) SHAM 2%</i>	\$0(1)	QL (120 mL / 30 days)
<i>klayesta POWD 100000unit/gm</i>	\$0(1)	QL (60 gm / 30 days)
<i>micomitin SOLN 1%</i>	\$0(3)	*
MICONAZOLE NITRATE SOLN 2%	\$0(3)	*
<i>miconazole nitrate (topical) CREA 2%</i>	\$0(3)	*
MICONI-AL SOLN 2%	\$0(3)	*
<i>micotrin ac CREA 1%</i>	\$0(3)	*
<i>micotrin al SOLN 1%</i>	\$0(3)	*
<i>micotrin ap POWD 2%</i>	\$0(3)	*
<i>mycozyl ac CREA 1%</i>	\$0(3)	*
<i>mycozyl al SOLN 1%</i>	\$0(3)	*
<i>mycozyl ap POWD 2%</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>nyamyc</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystatin (topical)</i> CREA 100000unit/gm; OINT 100000unit/gm	\$0(1)	QL (30 gm / 30 days)
<i>nystatin (topical)</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>nystop</i> POWD 100000unit/gm	\$0(1)	QL (60 gm / 30 days)
<i>selenium sulfide</i> LOTN 2.5%	\$0(1)	
<i>sm antifungal clotrimazol</i> CREA 1%	\$0(3)	*
<i>sm antifungal miconazole</i> CREA 2%	\$0(3)	*
<i>sm antifungal tolinaftate</i> CREA 1%	\$0(3)	*
<i>terbinafine hcl (topical)</i> CREA 1%	\$0(3)	*
<i>tm-clotrimazole</i> CREA 1%	\$0(3)	*
<i>tm-tolnaftate</i> SOLN 1%	\$0(3)	*
<i>tm-tolnaftate lr</i> SOLN 1%	\$0(3)	*
<i>tolnafi-al</i> SOLN 1%	\$0(3)	*
<i>tolnaftate</i> CREA 1%; POWD 1%	\$0(3)	*
VOTRIZA-AL LOTN 1%	\$0(3)	*
DERMATOLOGY, ANTIPSORIATICS		
<i>acitretin</i> CAPS 10mg, 17.5mg, 25mg	\$0(1)	PA
<i>calcipotriene</i> CREA .005%; OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
<i>calcipotriene</i> SOLN .005%	\$0(1)	QL (120 mL / 30 days), PA
<i>calcitrene</i> OINT .005%	\$0(1)	QL (120 gm / 30 days), PA
ENSTILAR AER	\$0(2)	NDS, QL (120 gm / 30 days), PA
<i>tazarotene</i> CREA .05%, .1%	\$0(1)	QL (60 gm / 30 days), PA
TAZORAC CREA .05%	\$0(2)	QL (60 gm / 30 days), PA
DERMATOLOGY, CORTICOSTEROIDS		
<i>ala-cort</i> CREA 1%	\$0(1)	
<i>alclometasone dipropionate</i> CREA .05%; OINT .05%	\$0(1)	QL (60 gm / 30 days)
<i>anti-itch maximum strengt</i> CREA 1%	\$0(3)	*
<i>betamethasone dipropionate (topical)</i> CREA .05%; OINT .05%	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate (topical)</i> LOTN .05%	\$0(1)	QL (120 mL / 30 days)
<i>betamethasone dipropionate augmented</i> CREA .05%; GEL .05%; OINT .05%	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone dipropionate augmented</i> LOTN .05%	\$0(1)	QL (120 mL / 30 days)

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>betamethasone valerate</i> CREA .1%; OINT .1%	\$0(1)	QL (120 gm / 30 days)
<i>betamethasone valerate</i> LOTN .1%	\$0(1)	QL (120 mL / 30 days)
<i>clobetasol propionate</i> CREA .05%; GEL .05%; OINT .05%	\$0(1)	QL (60 gm / 30 days)
<i>clobetasol propionate</i> SOLN .05%	\$0(1)	QL (50 mL / 30 days)
<i>clobetasol propionate e</i> CREA .05%	\$0(1)	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .01%	\$0(1)	QL (60 gm / 30 days)
<i>fluocinolone acetonide</i> CREA .025%; OINT .025%	\$0(1)	QL (120 gm / 30 days)
<i>fluocinolone acetonide</i> OIL .01%	\$0(1)	QL (118.28 mL / 30 days)
<i>fluocinolone acetonide</i> SOLN .01%	\$0(1)	QL (60 mL / 30 days)
<i>fluocinonide</i> CREA .05%	\$0(1)	QL (120 gm / 30 days)
<i>fluocinonide</i> GEL .05%; OINT .05%	\$0(1)	QL (60 gm / 30 days)
<i>fluocinonide</i> SOLN .05%	\$0(1)	QL (60 mL / 30 days)
<i>fluocinonide emulsified base</i> CREA .05%	\$0(1)	QL (120 gm / 30 days)
<i>fluticasone propionate</i> CREA .05%; OINT .005%	\$0(1)	
<i>gnp hydrocortisone maximu</i> OINT 1%	\$0(3)	*
<i>gnp hydrocortisone plus</i> CREA 1%	\$0(3)	*
<i>halobetasol propionate</i> CREA .05%; OINT .05%	\$0(1)	QL (50 gm / 30 days)
<i>hydrocortisone (topical)</i> CREA 1%, 2.5%; LOTN 2.5%; OINT 2.5%	\$0(1)	
<i>hydrocortisone (topical)</i> CREA .5%, 1%; OINT 1%	\$0(3)	*
<i>hydrocortisone (topical)</i> OINT 1%	\$0(1)	QL (30 gm / 30 days)
<i>hydrocortisone maximum st</i> CREA 1%	\$0(3)	*
<i>hydrocortisone valerate</i> CREA .2%	\$0(1)	QL (60 gm / 30 days)
<i>hydrocortisone/aloe maxim</i> CREA 1%	\$0(3)	*
<i>mometasone furoate</i> CREA .1%; OINT .1%; SOLN .1%	\$0(1)	
<i>sm hydrocortisone</i> CREA 1%	\$0(3)	*
<i>sm hydrocortisone maximum</i> OINT 1%	\$0(3)	*
<i>sm hydrocortisone plus</i> CREA 1%	\$0(3)	*
<i>triamcinolone acetonide (topical)</i> CREA .025%, .1%, .5%	\$0(1)	QL (454 gm / 30 days)
<i>triamcinolone acetonide (topical)</i> LOTN .025%, .1%; OINT .025%, .1%, .5%	\$0(1)	
<i>triderm</i> CREA .5%	\$0(1)	QL (454 gm / 30 days)
DERMATOLOGY, LOCAL ANESTHETICS		
<i>glydo</i> PRSY 2%	\$0(1)	QL (60 mL / 30 days), PA

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>lidocaine</i> OINT 5%	\$0(1)	QL (50 gm / 30 days), PA
<i>lidocaine</i> PTCH 5%	\$0(1)	QL (3 patches / 1 day), PA
<i>lidocaine hcl</i> SOLN 4%	\$0(1)	QL (50 mL / 30 days), PA
<i>lidocaine-prilocaine cream</i> 2.5-2.5%	\$0(1)	B/D, QL (30 gm / 30 days)
<i>lidocan</i> PTCH 5%	\$0(1)	QL (3 patches / 1 day), PA
<i>tridacaine ii</i> PTCH 5%	\$0(1)	QL (3 patches / 1 day), PA
<i>DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE</i>		
<i>anti-itch</i>	\$0(3)	*
<i>atrix medicated formula</i> CREA 2%	\$0(3)	*
<i>banophen</i>	\$0(3)	*
BETADINE SOLN 5%	\$0(3)	*
BETADINE SURGICAL SCRUB SOLN 7.5%	\$0(3)	*
BETADINE SWABSTICKS SWAB 10%	\$0(3)	*
<i>bexarotene (topical)</i> GEL 1%	\$0(2)	NDS, QL (60 gm / 30 days), NM, PA
BURN RELIEF GEL 1%	\$0(3)	*
CALAMINE LOT 8-8%	\$0(3)	*
<i>corn and callus remover</i> LIQD 17%	\$0(3)	*
<i>dermacinrx atrix antibact</i> LIQD 2%	\$0(3)	*
<i>dermacinrx atrix clarifyi</i> LIQD 2%	\$0(3)	*
<i>diaper rash</i> OINT 40%	\$0(3)	*
<i>diclofenac sodium (topical)</i> SOLN 1.5%	\$0(1)	QL (300 mL / 28 days)
<i>diphenhydramine-zinc acetate cream</i> 2- 0.1%	\$0(3)	*
<i>dologesic pain relief rol</i> LIQD 4%	\$0(3)	*
FIRST AID ANTISEPTIC OINT OINT 10%	\$0(3)	*
<i>fluorouracil (topical)</i> CREA 5%	\$0(1)	QL (40 gm / 30 days)
<i>fluorouracil (topical)</i> SOLN 2%, 5%	\$0(1)	QL (10 mL / 30 days)
<i>gnp anti-itch</i>	\$0(3)	*
GNP CALAMINE LOT 8-8%	\$0(3)	*
<i>gnp callus removers</i> PADS 40%	\$0(3)	*
<i>gnp hemorrhoidal</i>	\$0(3)	*
<i>gnp itch relief spray ext</i>	\$0(3)	*
<i>gnp lidocaine pain reliev</i> CREA 4%	\$0(3)	*
<i>gnp wart remover</i> LIQD 17%	\$0(3)	*
<i>gnp zinc oxide</i> OINT 20%	\$0(3)	*
<i>goodsense hemorrhoidal</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>goodsense hemorrhoidal oi</i>	\$0(3)	*
<i>hair regrowth treatment f SOLN 5%</i>	\$0(3)	*
<i>hemorrhoidal</i>	\$0(3)	*
<i>hydrocortisone (rectal) CREA 1%, 2.5%</i>	\$0(1)	
<i>hysept 25 SOLN .25%</i>	\$0(3)	*
<i>hysept 50 SOLN .5%</i>	\$0(3)	*
<i>imiquimod CREA 5%</i>	\$0(1)	QL (24 packets / 30 days)
<i>itch relief extra strengt</i>	\$0(3)	*
<i>lactic acid (ammonium lactate) CREA 12%; LOTN 12%</i>	\$0(1)	
<i>LIDAFLEX PTCH 4%</i>	\$0(3)	*
<i>lidocaine pain relief max CREA 4%; LIQD 4%</i>	\$0(3)	*
<i>medicated callus removers PADS 40%</i>	\$0(3)	*
<i>medicated corn removers PADS 40%</i>	\$0(3)	*
<i>metronidazole (topical) CREA .75%; GEL .75%</i>	\$0(1)	QL (45 gm / 30 days)
<i>metronidazole (topical) LOTN .75%</i>	\$0(1)	QL (59 mL / 30 days)
<i>nitroglycerin (intra-anal) OINT .4%</i>	\$0(1)	QL (30 gm / 30 days)
<i>PANRETIN GEL .1%</i>	\$0(2)	NDS, QL (60 gm / 30 days), PA
<i>phenylephrine-cocoa butter suppos 0.25-88.44%</i>	\$0(3)	*
<i>pimecrolimus CREA 1%</i>	\$0(1)	QL (100 gm / 30 days), PA
<i>podofilox SOLN .5%</i>	\$0(1)	QL (7 mL / 28 days)
<i>POISON IVY WASH LOTN 1%</i>	\$0(3)	*
<i>povidone-iodine SOLN 10%</i>	\$0(3)	*
<i>pramoxine hcl LOTN 1%</i>	\$0(3)	*
<i>pramoxine hcl (rectal) FOAM 1%</i>	\$0(3)	*
<i>procto-med hc CREA 2.5%</i>	\$0(1)	
<i>proctocort CREA 1%</i>	\$0(1)	
<i>proctosol hc CREA 2.5%</i>	\$0(1)	
<i>proctozone-hc CREA 2.5%</i>	\$0(1)	
<i>SEBEX SHA</i>	\$0(3)	*
<i>sm anti-itch extra streng</i>	\$0(3)	*
<i>SM CALAMINE LOT</i>	\$0(3)	*
<i>sm hemorrhoidal</i>	\$0(3)	*
<i>sm povidone-iodine SOLN 10%</i>	\$0(3)	*
<i>tacrolimus (topical) OINT .03%, .1%</i>	\$0(1)	QL (100 gm / 30 days), PA
<i>THERAPEUTIC DANDRUFF SHAM 3%</i>	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
VALCHLOR GEL .016%	\$0(2)	NDS, QL (60 gm / 30 days), NM, PA
wart remover maximum stre LIQD 17%	\$0(3)	*
Z-BUM CREA 22%	\$0(3)	*
zinc oxide (topical) OINT 20%, 25%	\$0(3)	*
ZINCTRAL PSTE 20%	\$0(3)	*
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
ft lice killing maximum s	\$0(3)	*
gnp lice treatment	\$0(3)	*
lice killing maximum stre	\$0(3)	*
malathion LOTN .5%	\$0(1)	QL (59 mL / 30 days)
permethrin CREA 5%	\$0(1)	QL (60 gm / 30 days)
sm lice killing maximum s	\$0(3)	*
VANALICE GEL 0.3-3.5%	\$0(3)	*
DERMATOLOGY, WOUND CARE AGENTS		
SANTYL OINT 250unit/gm	\$0(2)	QL (180 gm / 30 days)
sodium chloride (gu irrigant) SOLN .9%	\$0(1)	
water for irrigation, sterile irrigation soln	\$0(1)	
MOUTH/THROAT/DENTAL AGENTS		
CEPACOL LOZ EXTRA ST	\$0(3)	*
cevimeline hcl CAPS 30mg	\$0(1)	
chlorhexidine gluconate (mouth-throat) SOLN .12%	\$0(1)	
clotrimazole TROC 10mg	\$0(1)	QL (150 lozenges / 30 days)
gnp sore throat spray LIQD 1.4%	\$0(3)	*
kourzeq PSTE .1%	\$0(1)	
lidocaine hcl (mouth-throat) SOLN 2%	\$0(1)	
MUCINEX LIQ INSTASOO	\$0(3)	*
nystatin (mouth-throat) SUSP 100000unit/ml	\$0(1)	
periogard SOLN .12%	\$0(1)	
phenaseptic LIQD 1.4%	\$0(3)	*
pilocarpine hcl (oral) TABS 5mg, 7.5mg	\$0(1)	
sm sore throat spray LIQD 1.4%	\$0(3)	*
sore throat	\$0(3)	*
sore throat spray LIQD 1.4%	\$0(3)	*
triamcinolone acetonide (mouth) PSTE .1%	\$0(1)	
OTIC - DRUGS TO TREAT CONDITIONS OF THE EAR		
ear drops SOLN 6.5%	\$0(3)	*
ear drops for swimmers	\$0(3)	*

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

Drug Name (By Medical Condition)	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS RESTRICTIONS OR LIMITS ON USE
<i>earwax removal</i> SOLN 6.5%	\$0(3)	*
<i>ft earwax removal</i> SOLN 6.5%	\$0(3)	*
<i>ft earwax removal kit</i> SOLN 6.5%	\$0(3)	*
<i>gnp earwax removal drops</i> SOLN 6.5%	\$0(3)	*
<i>gnp earwax removal kit</i> SOLN 6.5%	\$0(3)	*
SWIM EAR LIQD 95%	\$0(3)	*

_PART B

DIABETIC METERS AND TEST STRIPS

DEXCOM G6 MIS RECEIVER	\$0	PA
DEXCOM G6 MIS SENSOR	\$0	PA
DEXCOM G6 MIS TRANSMIT	\$0	PA
DEXCOM G7 MIS RECEIVER	\$0	PA
DEXCOM G7 MIS SENSOR	\$0	PA
FREESTY LIBR KIT 2 SENSOR	\$0	PA
FREESTY LIBR KIT 3 SENSOR	\$0	PA
FREESTY LIBR KIT SENSOR	\$0	PA
FREESTY LIBR MIS 2 READER	\$0	PA
FREESTY LIBR MIS 3 READER	\$0	PA
FREESTYLE MIS READER	\$0	PA
TRUE METRIX KIT AIR	\$0	
TRUE METRIX KIT METER	\$0	
TRUE METRIX STRIPS	\$0	

You can find information on what the symbols and abbreviations in this table mean by referring to section C1.

D. Index of Covered Drugs

<i>*b-complex vitamin cap**</i>93	<i>acetaminophen w/ codeine tab 300-30 mg</i>13	AKEEGA TAB 100/50025
<i>*b-complex vitamin tab**</i>93	<i>acetaminophen w/ codeine tab 300-60 mg</i>13	AKEEGA TAB 50/500MG25
<i>*lactobacillus - packet**</i>76	<i>acetaminophen w/ acetazolamide</i>42	<i>ala-cort</i>106
<i>*lactobacillus tab**</i> 76	<i>acetic acid</i>82	ALAHIST PE TAB 2- 7.5MG100
<i>*omega-3 fatty acids cap 1000 mg**</i> ...93	<i>acetic acid (otic)</i>97	<i>alaway</i>96
<i>*omega-3 fatty acids cap 500 mg**</i>93	<i>acetylcysteine</i>100	<i>alaway childrens allergy</i>96
<i>*sodium phosphates - enema***</i>80	<i>acid gone</i>74	<i>albendazole</i>14
<i>12 hour nasal spray</i>100	<i>acitretin</i>106	<i>albuterol sulfate</i>99
<i>12hr allergy relief</i> ...99	<i>acne medication 10</i>103	<i>alclometasone dipropionate</i>106
<i>24hr allergy relief</i> ...99	<i>acne medication 2.5</i>103	ALCOHOL SWABS: BD- EMBECTA/MHC/RUG BY63
<i>abacavir sulfate</i>17	<i>acne medication 5</i> 103	ALDURAZYME.....72
<i>abacavir sulfate-lamivudine tab 600-300 mg</i>18	ACTHIB INJ89	ALECENSA27
ABELCET16	ACTIMMUNE88	<i>alendronate sodium</i> 65
<i>abigale</i>71	<i>acyclovir</i>19	ALEVAZOL.....105
<i>abigale lo</i>71	<i>acyclovir sodium</i>19	<i>alfuzosin hcl</i>82
ABILIFY ASIMTUFII 48	ADACEL INJ.....89	<i>aliskiren fumarate</i> ...43
ABILIFY MAINTENA 48	ADALIMUMAB-AACF (2 PEN).....85	<i>all day pain relief</i>12
<i>abiraterone acetate</i> 25	ADALIMUMAB-AACF (2 SYRING85	<i>all day relief</i>12
<i>abirtega</i>25	ADALIMUMAB-AACF STARTER P.....85	<i>aller-chlor</i>98
ABRYSVO89	<i>adapalene</i>103	<i>allergy</i>98
<i>acamprosate calcium</i>60	<i>adefovir dipivoxil</i>19	<i>allergy 24-hr</i>98
<i>acarbose</i>62	ADMELOG63	<i>allergy childrens</i>98
<i>accutane</i>103	ADMELOG SOLOSTAR63	<i>allergy relief</i>98, 102
<i>acebutolol hcl</i>41	ADVAIR HFA AER 115/21.....103	<i>allergy relief 24hr</i> ...98
<i>acetaminophen pm</i> .60	ADVAIR HFA AER 230/21.....103	<i>allergy relief childrens</i>98
<i>acetaminophen pm extra st</i>60	ADVAIR HFA AER 45/21103	<i>allopurinol</i>11
<i>acetaminophen w/ codeine soln 120-12 mg/5ml</i>13	<i>afirmelle</i>66	<i>almacone double strength</i>74
<i>acetaminophen w/ codeine tab 300-15 mg</i>13	AIMOVIG.....57	<i>alosetron hcl</i>80
	AIRSUPRA AER 90-80MCG103	<i>alprazolam</i>44
		<i>altavera</i>66
		<i>alum & mag hydroxide-simethicone susp</i>

200-200-20
mg/5ml74
alum & mag
hydroxide-
simethicone susp
400-400-40
mg/5ml74
ALUNBRIG27
ALUNBRIG PAK.....27
ALVAIZ.....84
ALVESCO102
alyacen 1/35.....66
alyacen 7/7/766
ALYFTREK TAB 10-50-
125.....100
ALYFTREK TAB 4-20-
50.....100
ALYGLO87
alyq.....44
amantadine hcl.....47
ambrisentan.....44
amethia.....66
amethyst66
amikacin sulfate.....14
amiloride &
hydrochlorothiazide
tab 5-50 mg42
amiloride hcl42
amiodarone hcl.....39
amitriptyline hcl45
amlodipine besylate42
amlodipine besylate-
benazepril hcl cap
10-20 mg36
amlodipine besylate-
benazepril hcl cap
10-40 mg36
amlodipine besylate-
benazepril hcl cap
2.5-10 mg.....36
amlodipine besylate-
benazepril hcl cap
5-10 mg36
amlodipine besylate-
benazepril hcl cap
5-20 mg36

amlodipine besylate-
benazepril hcl cap
5-40 mg36
amlodipine besylate-
olmesartan
medoxomil tab 10-
20 mg37
amlodipine besylate-
olmesartan
medoxomil tab 10-
40 mg37
amlodipine besylate-
olmesartan
medoxomil tab 5-20
mg37
amlodipine besylate-
olmesartan
medoxomil tab 5-40
mg37
amlodipine besylate-
valsartan tab 10-
160 mg38
amlodipine besylate-
valsartan tab 10-
320 mg38
amlodipine besylate-
valsartan tab 5-160
mg37
amlodipine besylate-
valsartan tab 5-320
mg37
amnestem104
amoxapine.....45
amoxicillin22
amoxicillin & k
clavulanate for susp
200-28.5 mg/5ml22
amoxicillin & k
clavulanate for susp
250-62.5 mg/5ml22
amoxicillin & k
clavulanate for susp
400-57 mg/5ml ...22
amoxicillin & k
clavulanate for susp
600-42.9 mg/5ml22

amoxicillin & k
clavulanate tab
250-125 mg.....22
amoxicillin & k
clavulanate tab
500-125 mg.....22
amoxicillin & k
clavulanate tab
875-125 mg.....22
amoxicillin & k
clavulanate tab er
12hr 1000-62.5 mg
.....22
amphetamine-
dextroamphetamine
cap er 24hr 10 mg
.....55
amphetamine-
dextroamphetamine
cap er 24hr 15 mg
.....55
amphetamine-
dextroamphetamine
cap er 24hr 20 mg
.....55
amphetamine-
dextroamphetamine
cap er 24hr 25 mg
.....55
amphetamine-
dextroamphetamine
cap er 24hr 30 mg
.....55
amphetamine-
dextroamphetamine
cap er 24hr 5 mg.55
amphetamine-
dextroamphetamine
tab 10 mg56
amphetamine-
dextroamphetamine
tab 12.5 mg.....56
amphetamine-
dextroamphetamine
tab 15 mg56
amphetamine-
dextroamphetamine
tab 20 mg56

*amphetamine-
 dextroamphetamine
 tab 30 mg*56
*amphetamine-
 dextroamphetamine
 tab 5 mg*55
*amphetamine-
 dextroamphetamine
 tab 7.5 mg*55
amphotericin b 16
*amphotericin b
 liposome*..... 16
ampicillin22
*ampicillin &
 sulbactam sodium
 for inj 1.5 (1-0.5)
 gm*.....22
*ampicillin &
 sulbactam sodium
 for inj 3 (2-1) gm*22
*ampicillin &
 sulbactam sodium
 for iv soln 1.5 (1-
 0.5) gm*23
*ampicillin &
 sulbactam sodium
 for iv soln 15 (10-5)
 gm*.....23
*ampicillin &
 sulbactam sodium
 for iv soln 3 (2-1)
 gm*.....23
ampicillin sodium23
anagrelide hcl84
anastrozole25
*ANORO ELLIPT AER
 62.5-25*97
antacid74
*antacid calcium
 regular s*.....74
antacid extra strength
74
*antacid maximum
 strength*74
*antacid regular
 strength*75
antacid ultra strength
75

antacid/antigas liquid
75
anti-diarrheal75
antifungal105
*antifungal maximum
 streng*105
antifungal powder .105
*anti-gas/
 and gnp antacid* . 75
anti-itch108
*anti-itch maximum
 strengt*106
anti-nausea76
aprepitant76
*aprepitant capsule
 therapy pack 80 &
 125 mg*76
apri66
APTIOM51
APTIVUS17
*aqueous vitamin d
 infants*.....93
ARALAST NP100
aranelle66
ARCALYST88
AREXVY89
ARIKAYCE14
aripiprazole48
ARISTADA48
ARISTADA INITIO ...48
armodafinil59
ARNUITY ELLIPTA .102
ascorbic acid93
asenapine maleate .48
ashlyna66
aspirin11
ASPIRIN11
aspirin adult low dose
11
aspirin low dose11
*aspirin low strength*11
aspirin regimen11
*aspirin-dipyridamole
 cap er 12hr 25-200
 mg*84
ASTAGRAF XL88
atazanavir sulfate ..17
atenolol41

*atenolol &
 chlorthalidone tab
 100-25 mg*41
*atenolol &
 chlorthalidone tab
 50-25 mg*41
athletes foot105
*athletes foot
 antifungal*105
*athletes foot powder
 spra*105
atomoxetine hcl56
atorvastatin calcium
40
atovaquone14
*atovaquone-proguanil
 hcl tab 250-100 mg*
17
*atovaquone-proguanil
 hcl tab 62.5-25 mg*
17
*atrix medicated
 formula*108
*ATROPINE SULFATE*97
*atropine sulfate
 (ophthalmic)*97
ATROVENT HFA98
aubra eq66
AUGTYRO27
aurovela 1/2066
aurovela 24 fe66
aurovela fe 1.5/30 ..66
aurovela fe 1/2066
AUSTEDO58
AUSTEDO XR58
*AUSTEDO XR TAB
 TITR KIT*58
*AUVELITY TAB 45-
 105MG*45
aviane66
*AVMAPKI PAK
 FAKZYNJA*27
ayuna66
AYVAKIT27
azacitidine24
azathioprine88
azelastine hcl98
azelastine hcl (ophth)
96

azithromycin21
aztreonam 14
azurette66
BABY SKIN
PROTECTANT..... 90
bacitracin
(ophthalmic) 95
bacitracin (topical) 104
bacitracin zinc 104
bacitracin-polymyxin
b ophth oint.....95
bacitracin-polymyxin-
neomycin-hc ophth
oint 1% 95
baclofen59
BAFIERTAM58
balsalazide disodium
.....77
BALVERSA27
balziva.....66
banophen 98, 108
BARACLUDE20
BASAGLAR KWIKPEN
.....63
BCG VACCINE.....89
benazepril &
hydrochlorothiazide
tab 10-12.5 mg ... 36
benazepril &
hydrochlorothiazide
tab 20-12.5 mg ... 36
benazepril &
hydrochlorothiazide
tab 20-25 mg 36
benazepril &
hydrochlorothiazide
tab 5-6.25mg 36
benazepril hcl37
BENDAMUSTINE
HYDROCHLORID ..24
BENDEKA.....24
BENLYSTA 88
benzefoam 104
benzoyl peroxide... 104
BENZOYL PEROXIDE
..... 104
benzoyl peroxide
topical..... 104

benzoyl peroxide
wash104
benzoyl peroxide-
erythromycin gel 5-
3%.....104
benztropine mesylate
.....47
BERINERT84
BESIVANCE95
BESREMI26
BETADINE.....108
BETADINE SURGICAL
SCRUB108
BETADINE
SWABSTICKS108
betaine powder for
oral solution.....72
betamethasone
dipropionate
(topical).....106
betamethasone
dipropionate
augmented106
betamethasone
valerate107
BETASERON58
betaxolol hcl.....41
betaxolol hcl (ophth)
.....96
bethanechol chloride
.....82
BETOPTIC-S96
BEVESPI AER 9-
4.8MCG.....97
bexarotene26
bexarotene (topical)
.....108
BEXSERO89
bicalutamide25
BICILLIN L-A.....23
BIKTARVY TAB 30-
120-15 MG.....18
BIKTARVY TAB 50-
200-25 MG.....18
bisacodyl.....78
bisacodyl ec78
bismuth subsalicylate
.....75

bisoprolol &
hydrochlorothiazide
*tab 10-6.25 mg....*41
bisoprolol &
hydrochlorothiazide
*tab 2.5-6.25 mg ..*41
bisoprolol &
hydrochlorothiazide
tab 5-6.25 mg41
bisoprolol fumarate.41
BIVIGAM87
blisovi 24 fe.....66
blisovi fe 1.5/3066
BONSITY65
BOOSTRIX INJ89
bortezomib27
BORTEZOMIB27
bosentan44
BOSULIF.....28
*bpo foaming cloths*104
BRAFTOVI28
BREO ELLIPTA INH
100-25103
BREO ELLIPTA INH
200-25103
BREO ELLIPTA INH
50-25MCG103
breyna103
BREZTRI AERO AER
SPHERE.....97
BREZTRI AERO AER
SPHERE
(INSTITUTIONAL
PACK).....97
briellyn66
BRILINTA84
*brimonidine tartrate*96
brinzolamide96
BRIVIACT51
bromfenac sodium
(ophth)96
bromocriptine
mesylate.....47
BRUKINSA28
budesonide77
budesonide
(inhalation)102

budesonide (nasal)
 102
budesonide-
formoterol fumarate
dihyd aerosol 160-
4.5 mcg/act..... 103
budesonide-
formoterol fumarate
dihyd aerosol 80-
4.5 mcg/act..... 103
bumetanide.....42
buprenorphine 12
buprenorphine hcl...60
buprenorphine hcl-
naloxone hcl sl film
12-3 mg (base
equiv) 60
buprenorphine hcl-
naloxone hcl sl film
2-0.5 mg (base
equiv) 60
buprenorphine hcl-
naloxone hcl sl film
4-1 mg (base
equiv) 60
buprenorphine hcl-
naloxone hcl sl film
8-2 mg (base
equiv) 60
buprenorphine hcl-
naloxone hcl sl tab
2-0.5 mg (base
equiv) 60
buprenorphine hcl-
naloxone hcl sl tab
8-2 mg (base
equiv) 60
bupropion hcl.....45
bupropion hcl
(smoking deterrent)
 60
 BURN RELIEF 108
buspirone hcl44
butenafine hcl..... 105
butorphanol tartrate
 13
c-500.....93
cabergoline72
 CABOMETYX.....28

CALAMINE LOT 8-8%
108
calcidol.....93
calcipotriene.....106
calcitonin (salmon)
spray.....65
calcitrene106
calcitriol74
calcitriol (oral)74
 CALCIUM + D3 TAB 92
calcium + vitamin d3
92
calcium 600+d392
 CALCIUM ACETATE .92
calcium acetate
(phosphate binder)
80
calcium antacid75
calcium antacid extra
str.....75
calcium carb-
cholecalciferol tab
600 mg-10 mcg
(400 unit)92
 CALCIUM CARBONATE
75
calcium carbonate-
cholecalciferol tab
500 mg-5 mcg(200
unit)92
calcium polycarbophil
78
cal-gest antacid.....75
callus remover
and corn 108
 CALQUENCE28
camila.....66
camrese66
camrese lo.....66
candesartan cilexetil
39
candesartan cilexetil-
hydrochlorothiazide
tab 16-12.5 mg ...38
candesartan cilexetil-
hydrochlorothiazide
tab 32-12.5 mg ...38

candesartan cilexetil-
hydrochlorothiazide
tab 32-25 mg38
 CAPLYTA48
 CAPRELSA.....28
captopril.....37
captopril &
hydrochlorothiazide
tab 25-15 mg36
captopril &
hydrochlorothiazide
tab 25-25 mg36
captopril &
hydrochlorothiazide
tab 50-15 mg36
captopril &
hydrochlorothiazide
tab 50-25 mg36
carb/levo orally
disintegrating tab
10-100mg47
carb/levo orally
disintegrating tab
25-100mg47
carb/levo orally
disintegrating tab
25-250mg47
carbamazepine51
carbidopa & levodopa
tab 10-100 mg47
carbidopa & levodopa
tab 25-100 mg47
carbidopa & levodopa
tab 25-250 mg47
carbidopa & levodopa
tab er 25-100 mg 47
carbidopa & levodopa
tab er 50-200 mg 47
carbidopa-levodopa-
entacapone tabs
12.5-50-200 mg ..47
carbidopa-levodopa-
entacapone tabs
18.75-75-200 mg 47
carbidopa-levodopa-
entacapone tabs
25-100-200 mg ...47

carbidopa-levodopa-entacapone tabs
 31.25-125-200 mg47
carbidopa-levodopa-entacapone tabs
 37.5-150-200 mg 47
carbidopa-levodopa-entacapone tabs
 50-200-200 mg ... 47
carboplatin24
carglumic acid72
carisoprodol59
carteolol hcl (ophth)
96
cartia xt42
carvedilol41
*caspofungin acetate*16
 CAYSTON14
cefaclor20
cefadroxil20
 CEFAZOLIN20
 CEFAZOLIN INJ
 1GM/50ML20
cefazolin sodium21
 CEFAZOLIN SOLN
 2GM/100ML-4% ..21
 CEFAZOLIN/DEX SOL
 1GM/50ML-4%.....21
 CEFAZOLIN/DEX SOL
 2GM/50ML-3%.....21
 CEFAZOLIN/DEX SOL
 3GM/150ML-4% ..21
 CEFAZOLIN/DEX SOL
 3GM/50ML-2%.....21
cefdinir21
cefepime hcl.....21
cefixime21
cefotetan disodium .21
cefoxitin sodium.....21
cefpodoxime proxetil
21
cefprozil21
ceftazidime.....21
ceftriaxone sodium .21
cefuroxime axetil21
cefuroxime sodium .21
celecoxib12

CEPACOL LOZ EXTRA
 ST110
cephalexin21
 CEQUR SIMPL KIT
 PATCH 2U (3-DAY)
63
 CEQUR SIMPL KIT
 PATCH 2U (4-DAY)
64
 CEQUR SIMPL MIS
 INSERTER64
 CERDELGA72
 CEREZYME72
cetirizine hcl98
cevimeline hcl110
chateal eq66
 CHEMET66
 CHEWABLE CALCIUM
92
chlorhexidine gluconate (mouth-throat)110
chloroquine phosphate17
chlorpromazine hcl .48
chlorthalidone42
chocolated laxative regul78
cholecalciferol93
cholestyramine40
cholestyramine light
40
ciclopirox105
ciclopirox olamine .105
cilostazol84
 CILOXAN95
 CIMDUO TAB 300-300
18
cinacalcet hcl72
ciprofloxacin 200 mg/100ml in d5w 22
ciprofloxacin 400 mg/200ml in d5w 22
ciprofloxacin hcl22
ciprofloxacin hcl (ophth)95
ciprofloxacin-dexamethasone otic susp 0.3-0.1%97

cisplatin24
citalopram hydrobromide45
claravis104
clarithromycin21
clearlax78
clindamycin hcl14
clindamycin palmitate hydrochloride14
clindamycin phosphate14
clindamycin phosphate (topical)
104
clindamycin phosphate in d5w iv soln 300 mg/50ml
14
clindamycin phosphate in d5w iv soln 600 mg/50ml
14
clindamycin phosphate vaginal
83
 CLINDMYC/NAC INJ
 300/50ML14
 CLINDMYC/NAC INJ
 600/50ML14
 CLINDMYC/NAC INJ
 900/50ML14
 CLINIMIX INJ
 4.25/D1092
 CLINIMIX INJ
 4.25/D5W92
 CLINIMIX INJ
 5%/D15W92
 CLINIMIX INJ
 5%/D20W92
 CLINIMIX INJ 6/592
 CLINIMIX INJ 8/10 ..92
 CLINIMIX INJ 8/14 ..92
clinisol sf 15%92
 CLINOLIPID EMU
 20%92

clobazam51
clobetasol propionate
..... 107
clobetasol propionate
e 107
clomipramine hcl....45
clonazepam.....51
clonidine43
clonidine hcl.....43
*clopidogrel bisulfate*84
clorazepate
dipotassium 51
clotrimazole 110
clotrimazole (topical)
..... 105
clotrimazole
antifungal..... 105
clotrimazole w/
betamethasone
cream 1-0.05% .105
clozapine48
COARTEM TAB 20-
120MG 17
COBENFY CAP 100-
20MG48
COBENFY CAP 125-
30MG48
COBENFY CAP 50-
20MG48
COBENFY STRT CAP
PACK48
coenzyme q10
(ubidecarenone) ..93
colace 2-in-178
COLACE CLEAR.....78
colchicine..... 11
colchicine w/
probenecid tab 0.5-
500 mg 11
COLD & ALLER LIQ
CHILDREN..... 100
colesevelam hcl.....40
colestipol hcl.....40
colistimethate sodium
..... 14
COMBIGAN SOL
0.2/0.5%96
COMBIVENT AER 20-
10098

COMETRIQ (60MG
DOSE)28
COMETRIQ KIT
100MG28
COMETRIQ KIT
140MG28
COMPLERA TAB18
compro76
constulose78
COPAXONE58
COPIKTRA.....28
CORLANOR43
corn
and callus remover
..... 108
COSENTYX.....85
COSENTYX
SENSOREADY PEN
.....85
COSENTYX
UNOREADY85
COTELLIC.....28
CREON CAP
12000UNT80
CREON CAP
24000UNT80
CREON CAP
3000UNIT80
CREON CAP
36000UNT80
CREON CAP
6000UNIT80
cromolyn sodium ..101
cromolyn sodium
(mastocytosis)80
cromolyn sodium
(ophth)96
cryselle-28.....67
cyclobenzaprine hcl 59
cyclophosphamide ..24
CYCLOPHOSPHAMIDE
.....24
CYCLOPHOSPHAMIDE
MONOHYDR24
cycloserine19
cyclosporine88
cyclosporine modified
(for microemulsion)
.....88

cyproheptadine hcl .98
cyred eq67
CYSTADROPS97
CYSTAGON72
CYSTARAN97
cytarabine.....24
D10W/NACL INJ 0.2%
.....90
D2.5W/NACL INJ
0.45%90
d3 high potency.....93
dabigatran etexilate
mesylate.....83
dalfampridine58
danazol.....61
dantrolene sodium ..59
DANZITEN28
dapsone14
DAPTACEL INJ.....89
daptomycin.....14
DAPTOMYCIN14
darunavir17
dasatinib28
dasetta 1/3567
dasetta 7/7/767
DAURISMO28
daysee67
DAYVIGO56
deblitane67
decara93
DECARA.....93
deferasirox66
DELSTRIGO TAB.....18
DENG VAXIA SUS89
DEPO-SUBQ
PROVERA 104.....67
depo-testosterone..61
dermacinrx atrix
antibact108
dermacinrx atrix
clarifyi108
DESCOVY TAB 120-
15MG18
DESCOVY TAB
200/25MG18
desipramine hcl45
desmopressin acetate
.....72

<i>desmopressin acetate spray</i>72	<i>dextrose 5% w/ sodium chloride 0.3%</i>90	DILANTIN.....52
<i>desmopressin acetate spray refrigerated</i> 72	<i>dextrose 5% w/ sodium chloride 0.45%</i>90	<i>diltiazem hcl</i>42
<i>desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5)</i>67	<i>dextrose 5% w/ sodium chloride 0.9%</i>90	<i>diltiazem hcl coated beads</i>42
<i>desvenlafaxine succinate</i>45	DIACOMIT.....51, 52	<i>diltiazem hcl extended release beads</i>42
<i>dexamethasone</i>71	DIALYVIT 800 TAB ZINC 15.....93	<i>dilt-xr</i>42
DEXAMETHASONE INTENSOL.....71	<i>dialyvite</i>93	DIP/TET PED INJ 25-5LFU.....89
<i>dexamethasone sodium phosphate</i>71	<i>dialyvite 800</i>93	<i>diphenhydramine hcl</i>98
<i>dexamethasone sodium phosphate (ophth)</i>96	<i>dialyvite 800/ultra d</i>93	<i>diphenhydramine-zinc acetate cream 2-0.1%</i>108
DEXCOM G6 MIS RECEIVER.....111	DIALYVITE TAB 800/ZINC.....93	<i>diphenoxylate w/ atropine liq 2.5-0.025 mg/5ml</i>80
DEXCOM G6 MIS SENSOR.....111	DIALYVITE TAB SUPREM D.....93	<i>diphenoxylate w/ atropine tab 2.5-0.025 mg</i>81
DEXCOM G6 MIS TRANSMIT.....111	<i>dialyvite vitamin d 5000</i>94	<i>dipyridamole</i>84
DEXCOM G7 MIS RECEIVER.....111	<i>dialyvite vitamin d3 max</i>94	<i>disopyramide phosphate</i>39
DEXCOM G7 MIS SENSOR.....111	DIALYVITE WAF 800.....94	<i>disulfiram</i>60
<i>dexmethylphenidate hcl</i>56	DIALYVITE/ TAB ZINC.....94	<i>divalproex sodium</i> ...52
<i>dextrose</i>92	<i>diaper rash</i>108	<i>docetaxel</i>27
<i>dextrose 10% w/ sodium chloride 0.45%</i>90	<i>diazepam</i>52	DOCETAXEL.....27
<i>dextrose 2.5% w/ sodium chloride 0.45%</i>90	<i>diazepam (anticonvulsant)</i> ..52	DOCIVYX.....27
<i>dextrose 5% in lactated ringers</i> ...90	<i>diazepam inj</i>52	<i>docusate calcium</i>78
<i>dextrose 5% w/ sodium chloride 0.2%</i>90	<i>diazepam intensol</i> ...52	<i>docusate mini</i>78
<i>dextrose 5% w/ sodium chloride 0.225%</i>90	<i>diazoxide</i>72	<i>docusate sodium</i>78
	<i>diclofenac potassium</i>12	DOCUSOL KIDS.....78
	<i>diclofenac sodium</i> ...12	<i>dofetilide</i>39
	<i>diclofenac sodium (ophth)</i>96	<i>dok</i>78
	<i>diclofenac sodium (topical)</i>108	<i>dolishale</i>67
	<i>dicloxacillin sodium</i> ..23	<i>dologesic pain relief rol</i>108
	<i>dicyclomine hcl</i>77	<i>donepezil hydrochloride</i>44
	DIFICID.....21	DOPTelet.....84
	<i>diflunisal</i>12	<i>dorzolamide hcl</i>96
	<i>digoxin</i>43	<i>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</i>96
	<i>dihydroergotamine mesylate</i>57	<i>dotti</i>71
		<i>double antibiotic</i>104

DOVATO TAB 50-
300MG 18
doxazosin mesylate 37
doxepin hcl.....45
doxepin hcl (sleep).56
doxorubicin hcl26
doxorubicin hcl
liposomal.....26
doxy 10023
doxycycline
(monohydrate)23
doxycycline hyclate 23
driminate76
DRIZALMA SPRINKLE
.....45
dronabinol76
drospirenone-ethinyl
estradiol tab 3-0.02
mg67
drospirenone-ethinyl
estradiol tab 3-0.03
mg67
drospirenone-ethinyl
estradiol-levomefolate
tab 3-0.02-0.451
mg67
drospirenone-ethinyl
estradiol-levomefolate
tab 3-0.03-0.451
mg67
droxidopa43
DULERA AER 100-
5MCG 103
DULERA AER 200-
5MCG 103
DULERA AER 50-
5MCG 103
duloxetine hcl46
DUPIXENT85
dutasteride.....82
dutasteride-
tamsulosin hcl cap
0.5-0.4 mg82
e.e.s. 40021
e-200.....94
ear drops 110
ear drops for
swimmers 110

earwax removal111
econazole nitrate ..105
ed a-hist100
ed chlorped jr98
EDURANT17
EDURANT PED17
efavirenz17
efavirenz-
emtricitabine-
tenofovir df tab
600-200-300 mg .18
efavirenz-lamivudine-
tenofovir df tab
400-300-300 mg .19
efavirenz-lamivudine-
tenofovir df tab
600-300-300 mg .19
ELIGARD25
elinest67
ELIQUIS83
ELIQUIS STARTER
PACK83
eluryng67
EMGALITY57
EMSAM46
emtricitabine17
emtricitabine-
rilpivirine-tenofovir
df tab 200-25-300
mg19
emtricitabine-
tenofovir disoproxil
fumarate tab 100-
150 mg19
emtricitabine-
tenofovir disoproxil
fumarate tab 133-
200 mg19
emtricitabine-
tenofovir disoproxil
fumarate tab 167-
250 mg19
emtricitabine-
tenofovir disoproxil
fumarate tab 200-
300 mg19
EMTRIVA17
EMVERM14

emzahh67
enalapril maleate37
enalapril maleate &
hydrochlorothiazide
tab 10-25 mg36
enalapril maleate &
hydrochlorothiazide
tab 5-12.5 mg36
ENBREL85
ENBREL MINI85
ENBREL SURECLICK85
endocet tab 10-
325mg13
endocet tab 2.5-
325mg13
endocet tab 5-325mg
.....13
endocet tab 7.5-
325mg13
enema ready-to-use
.....78
ENEMEEZ KIDS78
enemeez mini78
enemeez plus78
ENGERIX-B89
enilloring67
enoxaparin sodium .83
enpresse-2867
enskyce67
ENSTILAR AER106
entacapone47
entecavir20
ENTRESTO CAP 15-
16MG38
ENTRESTO CAP 6-
6MG38
enulose78
EPCLUSA PAK 150-
37.520
EPCLUSA PAK 200-
50MG20
EPCLUSA TAB 200-
50MG20
EPCLUSA TAB 400-
10020
EPIDIOLEX52
epinephrine
(anaphylaxis)43, 101

epitol52
eplerenone37
 EPRONTIA.....52
epsom salt.....78
ergocalciferol94
ergotamine w/
caffeine tab 1-100
mg.....57
 ERIVEDGE28
 ERLEADA25
erlotinib hcl.....28
errin.....67
ertapenem sodium .15
ery104
ery-tab.....21
 ERYTHROCIN
 LACTOBIONATE ...21
erythromycin (acne
aid).....104
erythromycin (ophth)
 95
erythromycin base..21
erythromycin
 ethylsuccinate.....21
erythromycin
 lactobionate.....22
 ERZOFRI48, 49
escitalopram oxalate
 46
eslicarbazepine
 acetate52
esomeprazole
 magnesium.....82
estarylla.....67
estradiol.....71
estradiol &
 norethindrone
 acetate tab 0.5-0.1
 mg.....71
estradiol &
 norethindrone
 acetate tab 1-0.5
 mg.....71
estradiol vaginal.....71
estradiol valerate....71
eszopiclone56
ethambutol hcl19
ethosuximide52

ethynodiol diacetate
 & *ethinyl estradiol*
 tab 1 mg-35 mcg 67
ethynodiol diacetate
 & *ethinyl estradiol*
 tab 1 mg-50 mcg 67
etodolac12
etonogestrel-ethinyl
 estradiol va ring
 0.12-0.015
 mg/24hr.....67
etoposide.....27
etravirine17
 EULEXIN.....25
everolimus.....29
everolimus
 (immunosuppressa
 nt)88
 EVOTAZ TAB 300-150
 19
exemestane25
eye drops.....96
eye itch relief.....96
 EYSUVIS97
ezetimibe40
ezetimibe-simvastatin
 tab 10-10 mg.....40
ezetimibe-simvastatin
 tab 10-20 mg.....40
ezetimibe-simvastatin
 tab 10-40 mg.....40
ezetimibe-simvastatin
 tab 10-80 mg.....40
 FABRAZYME72
falmina67
famciclovir.....20
famotidine77
famotidine in nacl
 0.9% iv soln 20
 mg/50ml77
 FANAPT49
 FANAPT PAK PACK A
 49
 FANAPT PAK PACK C
 49
 FARXIGA62
 FASENRA101
 FASENRA PEN101
feirza 1.5/3067

feirza 1/20.....67
felbamate52
felodipine42
fenofibrate40
fenofibrate
 micronized40
fentanyl.....12
 FETZIMA46
 FETZIMA CAP
 TITRATIO46
fexofenadine hcl.....98
 FIASP.....64
 FIASP FLEXTOUCH ..64
 FIASP PENFILL64
 FIASP PUMPCART ...64
fiber-lax78
fidaxomicin22
finasteride82
ingolimod hcl58
 FINTEPLA52
finzala.....67
 FIRMAGON.....25
 FIRST AID
 ANTISEPTIC OINT
 108
flac97
 FLAREX.....96
 FLEBOGAMMA DIF...87
flecainide acetate....39
 FLEET BISACODYL ..78
 FLEET ENE PED.....78
 FLEET LIQUID
 GLYCERIN SUP....78
floranex.....75
fluconazole16
fluconazole in nacl
 0.9% inj 200
 mg/100ml16
fluconazole in nacl
 0.9% inj 400
 mg/200ml16
flucytosine16
fludrocortisone
 acetate.....71
flunisolide (nasal) .102
fluocinolone acetone
 107

fluocinolone acetonide
 (otic) 97
fluocinonide 107
fluocinonide
 emulsified base.. 107
fluorometholone
 (ophth) 96
fluorouracil 24
fluorouracil (topical)
 108
fluoxetine hcl 46
fluphenazine
 decanoate 49
fluphenazine hcl 49
flurbiprofen 12
flurbiprofen sodium 96
fluticasone propionate
 107
fluticasone propionate
 (nasal) 102
fluticasone-salmeterol
 aer powder ba 100-
 50 mcg/act 103
fluticasone-salmeterol
 aer powder ba 250-
 50 mcg/act 103
fluticasone-salmeterol
 aer powder ba 500-
 50 mcg/act 103
fluvoxamine maleate
 44
 FOLBIC RF TAB..... 94
 FOLTABS 800 TAB .. 94
 FOLTANX RF CAP 94
fondaparinux sodium
 83
fosamprenavir
 calcium 17
fosinopril sodium 37
fosinopril sodium &
 hydrochlorothiazide
 tab 10-12.5 mg ... 36
fosinopril sodium &
 hydrochlorothiazide
 tab 20-12.5 mg ... 36
 FOTIVDA 29
 FREESTY LIBR KIT 2
 SENSOR 111

FREESTY LIBR KIT 3
 SENSOR 111
 FREESTY LIBR KIT
 SENSOR 111
 FREESTY LIBR MIS 2
 READER 111
 FREESTY LIBR MIS 3
 READER 111
 FREESTYLE MIS
 READER 111
 FRINDOVYX 24
 FRUZAQLA 29
ft all day pain relief 12
ft allergy relief 98
ft allergy relief 12
 hour 98
ft allergy relief 24
 hour 98
ft allergy relief 24 hr
 102
ft allergy relief childre
 98
ft antacid & antigas 75
ft antacid extra
 strength 75
ft antacid regular
 streng 75
ft anti-diarrheal 75
ft antifungal cream
 105
ft aspirin 11
ft aspirin low dose .. 11
ft athletes foot cream
 105
ft clearlax 78
ft earwax removal 111
ft earwax removal kit
 111
ft enteric coated
 aspirin 11
ft eye drops 96
ft fiber laxative 78
ft gas relief 81
ft gas relief drops
 infan 81
ft gas relief extra
 stren 81
ft gas relief ultra
 stren 81

ft gentle laxative 78
ft laxative 78
ft lice killing
 maximum s 110
ft magnesium citrate
 78
ft migraine relief 11
ft milk of magnesia 78
ft motion sickness ... 76
ft naproxen sodium 12
ft nasal 100
ft nicotine 60
ft nighttime sleep aid
 60
ft pain reliever pm
 extra 60
ft senna laxative 78
ft senna-s 78
ft sleep aid 60
ft sleep-aid maximum
 stre 60
ft stomach relief 75
ft stool softener 78
 FULPHILA 84
fulvestrant 25
 FUNGOID TINCTURE
 105
furosemide 42
furosemide inj 42
 FUZEON 17
fyavolv tab 0.5mg-
 2.5mcg 71
fyavolv tab 1mg-
 5mcg 71
 FYCOMPA 52
gabapentin 53
galantamine
 hydrobromide 44, 45
galbriela 67
gallifrey 73
 GAMASTAN INJ 87
 GAMMAGARD LIQUID
 87
 GAMMAGARD S/D
 IGA LESS TH 88
 GAMMAKED 88
 GAMMAPLEX 88
 GAMUNEX-C 88
ganciclovir sodium .. 20

GARDASIL 9.....89
 gas relief.....81
 gas relief extra
 strength81
 gas relief infants81
 gas relief ultra
 strength81
 gatifloxacin (*ophth*) 95
 GATTEX.....81
 GAUZE PADS 264
 gavalax78
 gavilyte-c.....78
 gavilyte-g78
 gavilyte-n/flavor pack
 78
 GAVRETO.....29
 gefitinib.....29
 gemcitabine hcl24
 gemfibrozil40
 GEMTESA.....82
 generlac.....78
 gengraf88
 GENOTROPIN72
 GENOTROPIN
 MINIQUICK72, 73
 gentamicin in saline
 inj 0.8 mg/ml15
 gentamicin in saline
 inj 1 mg/ml15
 gentamicin in saline
 inj 1.2 mg/ml15
 gentamicin in saline
 inj 1.6 mg/ml15
 gentamicin in saline
 inj 2 mg/ml15
 gentamicin sulfate ..15
 gentamicin sulfate
 (*ophth*).....95
 gentamicin sulfate
 (*topical*).....104
 genteal tears night-
 time.....97
 gentle laxative.....79
 GENVOYA TAB19
 geritol complete94
 GERITOL LIQ TONIC
 94
 GILOTTRIF.....29

glatiramer acetate ..59
 glatopa59
 GLEOSTINE24
 glimepiride62
 glipizide.....62
 glipizide xl62
 glipizide-metformin
 hcl tab 2.5-250 mg
 62
 glipizide-metformin
 hcl tab 2.5-500 mg
 62
 glipizide-metformin
 hcl tab 5-500 mg..62
 glycerin (*laxative*)...79
 glycerin childrens...79
 glycopyrrolate.....77
 glydo.....107
 GLYXAMBI TAB 10-5
 MG.....62
 GLYXAMBI TAB 25-5
 MG.....62
 gnp adult aspirin low
 str.....11
 gnp allergy99
 gnp allergy relief.....99
 gnp allergy relief
 maximu99
 gnp antacid
 and anti-gas/75
 gnp antacid & anti-
 gas/re75
 gnp antacid anti-
 gas/maxi75
 gnp antacid extra
 strengt.....75
 gnp antacid/regular
 stren75
 gnp anti-diarrheal...75
 gnp anti-gas ultra
 streng81
 gnp anti-itch108
 gnp anti-nausea relief
 76
 gnp aspirin11
 gnp aspirin low dose
 11
 gnp athletes foot...105
 gnp bacitracin zinc104

gnp budesonide nasal
 spra102
 GNP CALAMINE LOT
 8-8%.....108
 gnp calcium.....92
 gnp callus removers
 108
 gnp childrens allergy
 99
 gnp clearlax.....79
 gnp earwax removal
 drops.....111
 gnp earwax removal
 kit111
 gnp epsom salt.....79
 gnp eye drops.....96
 gnp fiber-caps.....79
 gnp fluticasone
 propionat.....102
 gnp gas relief.....81
 gnp gas relief extra
 stre.....81
 gnp gentle laxative .79
 gnp headache relief
 extra11
 gnp hemorrhoidal..108
 gnp hydrocortisone
 maximu107
 gnp hydrocortisone
 plus107
 gnp infant gas relief81
 gnp itch relief spray
 ext108
 gnp lice treatment 110
 gnp lidocaine pain
 reliev.....108
 gnp loperamide
 hydrochlor.....75
 gnp magnesium
 citrate79
 gnp miconazorb af 105
 gnp migraine relief .11
 gnp milk of magnesia
 79
 gnp motion sickness
 relie76
 gnp naproxen.....12
 gnp naproxen sodium
 12

gnp nasal spray..... 100
gnp nicotine gum.... 60
gnp nicotine mini lozenge..... 60
gnp nicotine polacrilex 60
gnp nicotine transdermal..... 60
gnp nighttime relief lubr..... 97
gnp nighttime sleep-aid m 60
gnp no drip nasal spray..... 100
gnp pain relief extra str..... 60
gnp pink bismuth.... 76
gnp pink bismuth ultra st..... 76
gnp senna lax..... 79
gnp senna plus..... 79
gnp sleep aid 60
gnp sleep aid nighttime 60
gnp sore throat spray 110
gnp stomach relief.. 76
gnp stool softener... 79
gnp stool softener/stimul 79
gnp terbinafine hydrochlo 105
gnp tolnaftate..... 105
gnp triple antibiotic 104
gnp wart remover. 108
gnp womens gentle laxativ..... 79
gnp zinc oxide 108
GOMEKLI 29
goodsense 24-hour allergy 102
goodsense aller-ease 99
goodsense anti-diarrheal..... 76
goodsense aspirin... 11
goodsense aspirin adults..... 11

goodsense clearlax .79
goodsense first aid antib..... 104
goodsense hemorrhoidal..... 108
goodsense hemorrhoidal oi . 109
goodsense migraine formul 11
goodsense naproxen sodium..... 12
goodsense nicotine .60
goodsense nicotine polacr..... 60
goodsense sleeptime 60
granisetron hcl 76
griseofulvin microsize 16
griseofulvin ultramicrosize 16
guanfacine hcl 43
guanfacine hcl (adhd) 56
HAEGARDA..... 84
hailey 1.5/30 67
hailey 24 fe 67
hair regrowth treatment f 109
halobetasol propionate 107
haloette..... 67
haloperidol 49
haloperidol decanoate 49
haloperidol lactate .. 49
HARVONI PAK 33.75-150MG 20
HARVONI PAK 45-200MG 20
HARVONI TAB 45-200MG 20
HARVONI TAB 90-400MG 20
HAVRIX 89
headache relief..... 11
headache relief/extra str 11
healthylax..... 79

heather..... 67
hemorrhoidal..... 109
HEP SOD/NACL INJ 25000UNT 83
heparin sodium (porcine) 83
HEPLISAV-B 89
HERCEP HYLEC SOL 60-10000 29
HERCEPTIN..... 29
HERZUMA 29
HIBERIX 89
hm adult aspirin 11
hm allergy relief nasal s 102
hm antacid extra strength..... 75
hm enema saline laxative..... 79
hm nicotine polacrilex 60
HUMIRA..... 85
HUMIRA PEN 85
HUMIRA PEN KIT PS/UV..... 85
HUMIRA PEN-CD/UC/HS START 85
HUMIRA PEN-PEDIATRIC UC S.. 86
HUMULIN R U-500 (CONCENTR 64
HUMULIN R U-500 KWIKPEN..... 64
hydralazine hcl 43
hydrochlorothiazide 42
hydrocodone bitartrate..... 12
hydrocodone-acetaminophen soln 7.5-325 mg/15ml 13
hydrocodone-acetaminophen tab 10-325 mg 13
hydrocodone-acetaminophen tab 5-325 mg 13

*hydrocodone-
acetaminophen tab
7.5-325 mg* 13
*hydrocodone-
ibuprofen tab 7.5-
200 mg* 13
hydrocortisone 72
*hydrocortisone
(intrarectal)* 77
*hydrocortisone
(rectal)* 109
*hydrocortisone
(topical)* 107
*hydrocortisone
maximum st* 107
*hydrocortisone sod
succinate* 72
*hydrocortisone
valerate* 107
*hydrocortisone/aloe
maxim* 107
hydromorphone hcl 13
*hydroxychloroquine
sulfate* 87
hydroxyurea 26
hydroxyzine hcl 99
hydroxyzine pamoate
..... 99
hysept 25 109
hysept 50 109
ibandronate sodium 65
IBRANCE 29
IBTROZI 29
ibu 12
ibuprofen 12
icaps 94
icatibant acetate 84
iclevia 67
ICLUSIG 29
IDACIO (2 PEN) 86
IDACIO (2 SYRINGE)
..... 86
*IDACIO CROHN INJ
DISEASE* 86
*IDACIO PLAQU INJ
PSORIASIS* 86
IDHIFA 29
imatinib mesylate ... 29

IMBRUVICA 29, 30
*imipenem-cilastatin
intravenous for soln
250 mg* 15
*imipenem-cilastatin
intravenous for soln
500 mg* 15
imipramine hcl 46
imiquimod 109
IMKELDI 30
*IMOVAX RABIES
(H.D.C.V.)* 89
IMPAVIDO 15
INBRIJA 47
incassia 67
INCRELEX 73
INCRUSE ELLIPTA ... 98
indapamide 42
INFANRIX INJ 89
INFLIXIMAB 86
INLYTA 30
*INQOVI TAB 35-
100MG* 24
INREBIC 30
*INSULIN PEN
NEEDLES: BD-
EMBECTA* 64
*INSULIN SAFETY
NEEDLES: BD-
EMBECTA* 64
*INSULIN SYRINGES:
BD-EMBECTA* 64
INTELENCE 17
INTRALIPID 92
introvale 67
INVEGA HAFYERA ... 49
INVEGA SUSTENNA 49
INVEGA TRINZA 49
IPOL INJ INACTIVE 89
ipratropium bromide
..... 98
*ipratropium bromide
(nasal)* 98
*ipratropium-albuterol
nebu soln 0.5-
2.5(3) mg/3ml* 98
irbesartan 39

*irbesartan-
hydrochlorothiazide
tab 150-12.5 mg* .38
*irbesartan-
hydrochlorothiazide
tab 300-12.5 mg* .38
irinotecan hcl 26
ISENTRESS 17
ISENTRESS HD 18
isibloom 68
ISOLYTE-P INJ /D5W
..... 90
ISOLYTE-S INJ PH 7.4
..... 90
isoniazid 19
isosorbide dinitrate .43
*isosorbide
mononitrate* 43
isotretinoin 104
isradipine 42
*itch relief extra
strengt* 109
ITOVEBI 30
itraconazole 16
ivabradine hcl 43
ivermectin 15
IWILFIN 26
IXIARO INJ 89
jaimiess 68
JAKAFI 30
jantoven 83
*JANUMET TAB 50-
1000* 62
*JANUMET TAB 50-
500MG* 62
*JANUMET XR TAB
100-1000* 62
*JANUMET XR TAB 50-
1000* 62
*JANUMET XR TAB 50-
500MG* 62
JANUVIA 62
JARDIANCE 62
jasmiel 68
javygtor 73
JAYPIRCA 30
*JENTADUETO TAB
2.5-1000* 62

JENTADUETO TAB	<i>dextrose 5% & nacl</i>	<i>lacosamide</i>	53
2.5-500	0.45% inj.....91	<i>lacosamide oral</i>	53
JENTADUETO TAB	<i>kcl 40 meq/l (0.3%)</i>	<i>lactated ringer's</i>	
2.5-850	<i>in dextrose 5% &</i>	<i>solution</i>91	
JENTADUETO TAB XR	<i>nacl 0.45% inj</i>91	<i>lactic acid</i>	
2.5-1000MG	<i>kcl 40 meq/l (0.3%)</i>	<i>(ammonium</i>	
JENTADUETO TAB XR	<i>in dextrose 5% &</i>	<i>lactate)</i>	109
5-1000MG.....62	<i>nacl 0.9% inj</i>91	<i>lactulose</i>79	
<i>jinteli</i>	<i>kcl 40 meq/l (0.3%)</i>	<i>lactulose</i>	
<i>jolessa</i>68	<i>in nacl 0.9% inj</i> ...91	<i>(encephalopathy)</i> 79	
<i>juleber</i>68	KCL/D5W/NACL INJ	<i>lamivudine</i>18	
JULUCA TAB 50-25MG	0.3/0.9%.....91	<i>lamivudine (hbv)</i>20	
.....19	<i>kelnor 1/35</i>	<i>lamivudine-</i>	
<i>junel 1.5/30</i>	<i>kelnor 1/50</i>	<i>zidovudine tab 150-</i>	
<i>junel 1/20</i>68	KERENDIA	<i>300 mg</i>	19
<i>junel fe 1.5/30</i>	KESIMPTA.....59	<i>lamotrigine</i>	53
<i>junel fe 1/20</i>68	<i>ketoconazole</i>16	<i>lanreotide acetate</i> ...73	
<i>junel fe 24</i>68	<i>ketoconazole (topical)</i>	<i>lansoprazole</i>	82
JYLAMVO.....87	105	<i>lapatinib ditosylate</i> .30	
JYNNEOS	<i>ketorolac</i>	<i>larin 1.5/30</i>	68
KADCYLA	<i>tromethamine</i>	<i>larin 1/20</i>68	
<i>kaitlib fe</i>68	<i>(ophth)</i>	<i>larin 24 fe</i>68	
KALETRA SOL	<i>ketotifen fumarate</i>	<i>larin fe 1.5/30</i>68	
KALYDECO.....101	<i>(ophth)</i>	<i>larin fe 1/20</i>	68
KANJINTI	96	<i>latanoprost</i>	96
<i>kariva</i>	KEYTRUDA.....30	<i>laxative maximum</i>	
<i>kcl 10 meq/l</i>	KINRIX INJ	<i>strength</i>79	
<i>(0.075%) in</i>	<i>kionex</i>	<i>laxative regular</i>	
<i>dextrose 5% & nacl</i>	KISQALI 200 DOSE.30	<i>strength</i>79	
<i>0.45% inj</i>90	KISQALI 200 PAK	<i>layolis fe</i>68	
<i>kcl 20 meq/l</i>	FEMARA.....30	LAZCLUZE.....30, 31	
<i>(0.149%) in nacl</i>	KISQALI 400 DOSE.30	<i>leflunomide</i>87	
<i>0.45% inj</i>91	KISQALI 400 PAK	<i>lenalidomide</i>26	
<i>kcl 20 meq/l (0.15%)</i>	FEMARA.....30	LENVIMA 10 MG	
<i>in dextrose 5% &</i>	KISQALI 600 DOSE.30	DAILY DOSE	31
<i>nacl 0.2% inj</i>90	KISQALI 600 PAK	LENVIMA 12MG DAILY	
<i>kcl 20 meq/l (0.15%)</i>	FEMARA.....30	DOSE.....31	
<i>in dextrose 5% &</i>	<i>klayesta</i>	LENVIMA 20 MG	
<i>nacl 0.45% inj</i>91	<i>klor-con</i>91	DAILY DOSE	31
<i>kcl 20 meq/l (0.15%)</i>	<i>klor-con 10</i>91	LENVIMA 4 MG DAILY	
<i>in dextrose 5% &</i>	<i>klor-con 8</i>91	DOSE.....31	
<i>nacl 0.9% inj</i>91	<i>klor-con m10</i>	LENVIMA 8 MG DAILY	
<i>kcl 20 meq/l (0.15%)</i>	<i>klor-con m15</i>	DOSE.....31	
<i>in nacl 0.45% inj</i> .91	<i>klor-con m20</i>	LENVIMA CAP 14 MG	
<i>kcl 20 meq/l (0.15%)</i>	KOSELUGO	31	
<i>in nacl 0.9% inj</i> ...91	<i>kourzeq</i>110	LENVIMA CAP 18 MG	
<i>kcl 30 meq/l</i>	KRAZATI	31	
<i>(0.224%) in</i>	<i>kurvelo</i>68	LENVIMA CAP 24 MG	
	<i>labetalol hcl</i>41	31	

lessina	68
letrozole	25
leucovorin calcium ..	35
LEUKERAN	24
leuprolide acetate ...	25
levalbuterol hcl	100
levalbuterol tartrate	100
levetiracetam	53
LEVETIRACETAM	53
levetiracetam in sodium chloride iv soln 1000 mg/100ml	53
levetiracetam in sodium chloride iv soln 1500 mg/100ml	53
levetiracetam in sodium chloride iv soln 500 mg/100ml	53
levobunolol hcl	96
levocarnitine (metabolic modifiers)	73
levocetirizine dihydrochloride	99
levofloxacin	22
levofloxacin in d5w iv soln 250 mg/50ml	22
levofloxacin in d5w iv soln 500 mg/100ml	22
levofloxacin in d5w iv soln 750 mg/150ml	22
levonest	68
levonorgestrel & ethinyl estradiol (91-day) tab 0.15- 0.03 mg	68
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg	68
levonorgestrel & ethinyl estradiol tab 0.15 mg-30 mcg .	68

levonorgestrel-eth estra tab 0.05- 30/0.075-40/0.125- 30mg-mcg	68
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	68
levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7)	68
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7)	68
levora 0.15/30-28...	68
levo-t.....	74
levothyroxine sodium	74
levoxyl.....	74
l-glutamine (sickle cell)	84
lice killing maximum stre.....	110
LIDAFLEX.....	109
lidocaine.....	108
lidocaine hcl	108
lidocaine hcl (local anesth.).....	11
lidocaine hcl (mouth- throat)	110
lidocaine pain relief max.....	109
lidocaine-prilocaine cream 2.5-2.5%	108
lidocan.....	108
LILETTA.....	68
linezolid.....	15
LINEZOLID INJ 2MG/ML	15
lintera wash	104
LINZESS	81
liothyronine sodium	74
liquid allergy relief ..	99
lisinopril	37

<i>lisinopril & hydrochlorothiazide</i>	
<i>tab 10-12.5 mg</i>	36
<i>lisinopril & hydrochlorothiazide</i>	
<i>tab 20-12.5 mg</i>	36
<i>lisinopril & hydrochlorothiazide</i>	
<i>tab 20-25 mg</i>	36
<i>lithium</i>	58
<i>lithium carbonate</i>	58
LIVTENCITY	20
L-METHYLFOLA CAP	
FORTE 15	94
<i>loestrin 1.5/30-21</i> ...	68
<i>loestrin 1/20-21</i>	68
<i>loestrin fe 1.5/30</i> ...	68
<i>loestrin fe 1/20</i>	68
<i>lojaimiess</i>	68
LOKELMA	66
LONSURF TAB 15-	
6.14.....	25
LONSURF TAB 20-	
8.19.....	25
<i>loperamide hcl</i> ...	76, 81
<i>lopinavir-ritonavir</i>	
<i>soln 400-100 mg/5ml (80-20 mg/ml)</i>	19
<i>lopinavir-ritonavir tab 100-25 mg</i>	19
<i>lopinavir-ritonavir tab 200-50 mg</i>	19
<i>lorazepam</i>	44
<i>lorazepam intensol</i> .	44
LORBRENA.....	31
<i>loryna</i>	68
<i>losartan potassium</i> .	39
<i>losartan potassium & hydrochlorothiazide</i>	
<i>tab 100-12.5 mg</i> .	38
<i>losartan potassium & hydrochlorothiazide</i>	
<i>tab 100-25 mg</i>	38
<i>losartan potassium & hydrochlorothiazide</i>	
<i>tab 50-12.5 mg</i>	38
LOTEMAX	96

loteprednol etabonate
96
lovastatin.....40
low-ogestrel.....69
loxapine succinate..49
lubricant eye
 nighttime97
 LUMAKRAS31
 LUMIGAN96
 LUMIZYME73
 LUPRON DEPOT (1-
 MONTH).....25
 LUPRON DEPOT (3-
 MONTH).....25
 LUPRON DEPOT-PED
 (1-MONTH.....73
 LUPRON DEPOT-PED
 (3-MONTH.....73
 LUPRON DEPOT-PED
 (6-MONTH.....73
lurasidone hcl49
lutra.....69
 LYBALVI TAB 10-
 10MG49
 LYBALVI TAB 15-
 10MG49
 LYBALVI TAB 20-
 10MG49
 LYBALVI TAB 5-10MG
 49
lyleq.....69
lyllana71
 LYNPARZA31
 LYSODREN25
 LYTGobi (12 MG
 DAILY DOSE)31
 LYTGobi (16 MG
 DAILY DOSE)31
 LYTGobi (20 MG
 DAILY DOSE)31
lyza69
mag-al plus.....75
mag-al plus xs.....75
magnesium lactate.92
magnesium oxide ...75
magnesium oxide
 (*mg supplement*) 93
magnesium sulfate.91

MAGNESIUM SULFATE
 91
magnesium sulfate in
 dextrose 5% iv soln
 1 gm/100ml.....91
magnesium-oxide...93
malathion110
maraviroc18
marlissa69
 MARPLAN46
 MATULANE.....26
 MAVYRET PAK 50-
 20MG20
 MAVYRET TAB 100-
 40MG20
m-dryl99
meclizine hcl76
medicated callus
 removers.....109
medicated corn
 removers.....109
medroxyprogesterone
 acetate73
medroxyprogesterone
 acetate
 (*contraceptive*)69
mefloquine hcl17
megestrol acetate..25,
 73
megestrol acetate
 (*appetite*).....74
 MEKINIST31
 MEKTOVI.....31
melatonin93
melatonin maximum
 strengt.....93
meleya69
meloxicam12
memantine hcl.....45
memantine hcl tab 28
 x 5 mg & 21 x 10
 mg titration pack.45
memantine hcl-
 donepezil hcl cap er
 24hr 14-10 mg45
memantine hcl-
 donepezil hcl cap er
 24hr 21-10 mg45

memantine hcl-
 donepezil hcl cap er
 24hr 28-10 mg....45
 MENACTRA INJ89
 MENQUADFI89
 MENVEO INJ89
 MENVEO SOL89
mercaptopurine25
meropenem15
mesalamine.....77
mesalamine w/
 cleanser.....77
mesna.....35
 MESNEX35
 METAFOLBIC TAB
 PLUS.....94
metformin hcl62
methadone hcl.....13
methadone
 hydrochloride i13
methazolamide42
methenamine
 hippurate.....15
methimazole74
methocarbamol59
methotrexate sodium
 25, 87
methsuximide53
methylphenidate hcl
 56
methylprednisolone 72
methylprednisolone
 acetate.....72
methylprednisolone
 sod succ72
methyltestosterone.61
metoclopramide hcl 76
metolazone.....42
metoprolol &
 hydrochlorothiazide
 tab 100-25 mg41
metoprolol &
 hydrochlorothiazide
 tab 100-50 mg41
metoprolol &
 hydrochlorothiazide
 tab 50-25 mg41
metoprolol succinate
 41

metoprolol tartrate .41
metronidazole..... 15
metronidazole
 (topical)..... 109
metronidazole vaginal
 83
metyrosine43
mibelas 24 fe.....69
miconazole sodium .16
micomitin 105
 MICONAZOLE
 NITRATE..... 105
miconazole nitrate
 (topical)..... 105
 MICONI-AL..... 105
micotrin ac 105
micotrin al 105
micotrin ap..... 105
microgestin 1.5/30 .69
microgestin 1/20.....69
microgestin fe 1.5/30
 69
microgestin fe 1/20 69
midodrine hcl.....43
 MIEBO97
mifepristone
 (hyperglycemia) ..73
migraine relief 11
mili.....69
milk of magnesia79
 MILK OF MAGNESIA
 CONCENTR79
mimvey.....71
minocycline hcl.....23
minoxidil43
mintox maximum
 strength75
mintox plus75
mirtazapine46
misoprostol81
 MITIGARE..... 11
 M-M-R II INJ89
 M-NATAL PLUS TAB 92
modafinil.....59
moexipril hcl37
molindone hcl49
mometasone furoate
 107

MONJUVI.....31
mono-lynyah69
montelukast sodium
 100
morphine sulfate13
motion sickness relief
 76
 MOUNJARO.....62
 MOVANTIK.....81
moxifloxacin hcl22
moxifloxacin hcl
 (ophth)95
moxifloxacin hcl 400
 mg/250ml in
 sodium chloride
 0.8% inj22
 MRESVIA.....89
 MUCINEX LIQ
 INSTASOO110
mucinex sinus-max
 clear &100
mucinex sinus-max
 sinus/a100
 MULTAQ39
multiple electrolytes
 ph 5.591
multiple electrolytes
 ph 7.491
mupirocin.....104
 MURO 12897
mycophenolate
 mofetil88
mycophenolate
 sodium.....88
mycozyl ac105
mycozyl al105
mycozyl ap.....105
 MYRBETRIQ.....82
nabumetone12
nadolol41
nafcillin sodium23
 NAGLAZYME73
nalbuphine hcl13
naloxone hcl.....60, 61
naltrexone hcl.....61
 NAMZARIC CAP 14-
 10MG45

NAMZARIC CAP 21-
 10MG45
 NAMZARIC CAP 28-
 10MG45
 NAMZARIC CAP 7-
 10MG45
 NAMZARIC CAP PACK
 45
naproxen.....12
naproxen dr.....12
naproxen sodium12
naratriptan hcl57
 NARCAN61
nasal decongestant
 spray.....100
nasal relief.....100
nasal spray 12 hour
 100
nasal spray no drip
 100
 NATACYN95
nateglinide.....62
nausea relief76
 NAYZILAM.....53
nebivolol hcl41
necon 0.5/35-2869
nefazodone hcl46
neomycin sulfate15
neomycin-bacitrac zn-
 polymyx 5(3.5)mg-
 400unt-10000unt
 op oin.....95
neomycin-polymy-
 gramicid op sol
 1.75-10000-
 0.025mg-unt-
 mg/ml95
neomycin-polymyxin-
 dexamethasone
 ophth oint 0.1% ..95
neomycin-polymyxin-
 dexamethasone
 ophth susp 0.1% .95
neomycin-polymyxin-
 hc ophth susp.....95
neomycin-polymyxin-
 hc otic soln 1%97
neomycin-polymyxin-
 hc otic susp 3.5

mg/ml-10000
unit/ml-1%.....97
neo-polycin
5(3.5)mg-400unt-
10000unt op oin ..95
neo-polycin hc ophth
oint 1%95
 NERLYNX31
nevirapine18
 NEXLETOL40
 NEXLIZET TAB
 180/10MG.....40
 NEXPLANON69
niacin
(antihyperlipidemic)
40
nicardipine hcl42
nicotine61
nicotine mini lozenge
61
nicotine polacrilex...61
nicotine polacrilex
mini61
 NICOTINE SYS KIT
 TRANSDER.....61
nicotine transdermal
syst61
 NICOTROL INHALER
61
 NICOTROL NS.....61
nifedipine.....42
nighttime sleep aid.61
nikki.....69
nilotinib hcl32
nilutamide26
nimodipine42
 NINLARO.....32
nitazoxanide15
nitisinone.....73
 NITRO-BID43
nitrofurantoin
macrocrystal15
nitrofurantoin
monohyd macro ..15
nitroglycerin.....43
nitroglycerin (intra-
anal)109
nizatidine.....77
nohist-lq100

nora-be69
norelgestromin-
ethinyl estradiol td
ptwk 150-35
mcg/24hr69
norethindrone &
ethinyl estradiol-fe
chew tab 0.4 mg-35
mcg69
norethindrone
(contraceptive)69
norethindrone ace &
ethinyl estradiol tab
1 mg-20 mcg69
norethindrone ace &
ethinyl estradiol tab
1.5 mg-30 mcg69
norethindrone ace-eth
estradiol-fe chew
tab 1 mg-20 mcg
(24).....69
norethindrone acetate
74
norethindrone
acetate-ethinyl
estradiol tab 0.5
mg-2.5 mcg.....71
norethindrone
acetate-ethinyl
estradiol tab 1 mg-
5 mcg.....71
norgestimate &
ethinyl estradiol tab
0.25 mg-35 mcg..69
norgestimate-eth
estradiol tab 0.18-
25/0.215-25/0.25-
25 mg-mcg69
norgestimate-eth
estradiol tab 0.18-
35/0.215-35/0.25-
35 mg-mcg69
norlyroc.....69
nortrel 0.5/35 (28).69
nortrel 1/35 (21)....69
nortrel 1/35 (28)....69
nortrel 7/7/7.....69
nortriptyline hcl.....46

NORVIR.....18
 NOVOLIN INJ 70/3064
 NOVOLIN INJ 70/30
 FP.....64
 NOVOLIN N.....64
 NOVOLIN N FLEXPEN
64
 NOVOLIN R.....64
 NOVOLIN R FLEXPEN
64
 NOVOLOG.....64
 NOVOLOG FLEXPEN 64
 NOVOLOG MIX INJ
 70/3064
 NOVOLOG MIX INJ
 FLEXPEN.....64
 NOVOLOG PENFILL .64
 NUBEQA26
 NUEDEXTA CAP 20-
 10MG58
 NULOJIX.....88
 NUPLAZID.....49
 NURTEC.....57
 NUTRILIPID92
 NUZYRA.....23, 24
nyamyc106
nylia 1/3569
nylia 7/7/7.....69
nystatin16
nystatin (mouth-
throat)110
nystatin (topical)...106
nystop106
ocella70
 OCTAGAM88
octreotide acetate...73
 ODEFSEY TAB19
 ODOMZO.....32
 OFEV.....101
ofloxacin (ophth)....95
ofloxacin (otic).....97
 OGIVRI.....32
 OGSIVEO32
 OJEMDA32
 OJJAARA.....32
olanzapine50
olmesartan
medoxomil39

olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg ...38
olmesartan medoxomil-hydrochlorothiazide tab 40-12.5 mg ...38
olmesartan medoxomil-hydrochlorothiazide tab 40-25 mg38
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg38
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-12.5 mg38
olmesartan-amlodipine-hydrochlorothiazide tab 40-10-25 mg.38
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-12.5 mg38
olmesartan-amlodipine-hydrochlorothiazide tab 40-5-25 mg ...38
omega-3-acid ethyl esters cap 1 gm...40
omeprazole82
 OMNIPOD 5 DX KIT INT G7G6.....64
 OMNIPOD 5 DX MIS POD G7G664
 OMNIPOD 5 G7 KIT INTRO.....64
 OMNIPOD 5 G7 MIS PODS64
 OMNIPOD 5 L2 KIT INTRO G6.....64
 OMNIPOD 5 L2 MIS PODS G665

OMNIPOD DASH KIT INTRO65
 OMNIPOD DASH MIS PODS.....65
 OMNIPOD GO KIT 10UNT/DY65
 OMNIPOD GO KIT 15UNT/DY65
 OMNIPOD GO KIT 20UNT/DY65
 OMNIPOD GO KIT 25UNT/DY65
 OMNIPOD GO KIT 30UNT/DY65
 OMNIPOD GO KIT 35UNT/DY65
 OMNIPOD GO KIT 40UNT/DY65
 OMNIPOD MIS CLASSIC.....65
ondansetron76
ondansetron hcl 76, 77
 ONTRUZANT.....32
 ONUREG.....25
 OPIPZA.....50
 OPSUMIT.....44
 ORGOVYX26
 ORKAMBI GRA 100-125.....101
 ORKAMBI GRA 150-188.....101
 ORKAMBI GRA 75-94MG101
 ORKAMBI TAB 100-125.....101
 ORKAMBI TAB 200-125.....101
orquidea.....70
 ORSERDU26
os-cal calcium + d3 93
os-cal extra d393
oseltamivir phosphate20
oxacillin sodium.....23
oxaliplatin.....24
oxcarbazepine53
oxybutynin chloride 82
oxycodone hcl....13, 14

oxycodone w/acetaminophen tab 10-325 mg14
oxycodone w/acetaminophen tab 2.5-325 mg14
oxycodone w/acetaminophen tab 5-325 mg14
oxycodone w/acetaminophen tab 7.5-325 mg14
 OXYCONTIN.....13
oysco 500+d93
oyster shell.....93
 OZEMPIC (0.25 OR 0.5MG/DOSE).....62
 OZEMPIC (1MG/DOSE).....63
 OZEMPIC (2MG/DOSE).....63
pacerone39
paclitaxel27
paclitaxel inj 100mg27
pain reliever plus11
paliperidone50
pamidronate disodium65
 PAMIDRONATE DISODIUM65
 PANRETIN109
pantoprazole sodium82
 PANZYGA88
paricalcitol74
paroxetine hcl46
 PAXLOVID PAK.....20
 PAXLOVID TAB 150-10020
 PAXLOVID TAB 300-10020
pazopanib hcl.....32
 PEDIA-LAX.....79
 PEDIARIX INJ 0.5ML89
 PEDVAX HIB89
peg 3350-kcl-na bicarb-nacl-na

sulfate for soln 236
gm.....79
peg 3350-kcl-sod
bicarb-nacl for soln
420 gm.....79
 PEGASYS20
 PEMAZYRE32
pemetrexed disodium
25
 PENBRAYA INJ89
penicillamine.....66
penicillin g potassium
23
penicillin g sodium..23
penicillin v potassium
23
 PENMENVY INJ89
 PENTACEL INJ.....89
pentamidine
isethionate inh 15
pentamidine
isethionate inj 15
pentoxifylline84
perampanel.....53
perindopril erbumine
37
periogard 110
permethrin 110
perphenazine50
 PETROLATUM.....90
pfizerpen23
 PHAZYME MAXIMUM
 STRENGTH.....81
 PHAZYME ULTIMATE
81
phenaseptic..... 110
phenelzine sulfate..46
phenobarbital53
phenobarbital sodium
53
phenylephrine-cocoa
butter suppos 0.25-
88.44% 109
phenytek53
phenytoin53
phenytoin sodium ...53
phenytoin sodium
extended54
 PHESGO SOL32

philith70
phospha 250 neutral
93
phospho-trin 250
neutral93
phytonadione94
 PIFELTRO18
pilocarpine hcl96
pilocarpine hcl (oral)
110
pimecrolimus109
pimozide50
pimtrea70
pindolol41
pioglitazone hcl63
pioglitazone hcl-
metformin hcl tab
15-500 mg.....63
pioglitazone hcl-
metformin hcl tab
15-850 mg.....63
piperacillin sod-
tazobactam na for
inj 3.375 gm (3-
0.375 gm).....23
piperacillin sod-
tazobactam sod for
inj 13.5 gm (12-1.5
gm)23
piperacillin sod-
tazobactam sod for
inj 2.25 gm (2-0.25
gm)23
piperacillin sod-
tazobactam sod for
inj 4.5 gm (4-0.5
gm)23
piperacillin sod-
tazobactam sod for
inj 40.5 gm (36-4.5
gm)23
 PIQRAY 200MG DAILY
 DOSE32
 PIQRAY 250MG TAB
 DOSE32
 PIQRAY 300MG DAILY
 DOSE32
pirfenidone101

piroxicam12
plenamine.....92
 PLENVU SOL.....79
podofilox109
 POISON IVY WASH109
poly bacitracin104
polycin ophth oint ...95
polyethylene glycol
3350.....79
polymyxin b sulfate 15
polymyxin b-
trimethoprim ophth
soln 10000 unit/ml-
0.1%95
 POMALYST26
portia-28.....70
posaconazole16
 POT CHL 20MEQ/L IN
 NACL 0.45% INJ..91
 POT CHL 20MEQ/L IN
 NACL 0.9% INJ ...91
 POT CHL 40MEQ/L IN
 NACL 0.9% INJ ...91
pot phos monobasic
w/sod phos di &
monobas tab 155-
852-130mg93
potassium & sodium
phosphates powder
pack 280-160-250
mg93
potassium chloride.91,
 92
potassium chloride 20
meq/l (0.15%) in
dextrose 5% inj ...91
potassium chloride
microencapsulated
crystals er92
potassium citrate
(alkalinizer)82
povidone-iodine.... 109
pramipexole
dihydrochloride47
pramoxine hcl109
pramoxine hcl (rectal)
 109
prasugrel hcl84

pravastatin sodium.40
praziquantel..... 15
prazosin hcl.....37
prednisolone72
prednisolone acetate
(ophth)96
 PREDNISOLONE
 SODIUM PHOSP...96
prednisolone sodium
 phosphate.....72
prednisone72
 PREDNISONE
 INTENSOL.....72
pregabalin54
 PREMASOL SOL 10%
 92
 PRENATAL TAB 27-
 1MG92
 PRENATAL TAB PLUS
 92
 PRESERVISION CAP
 AREDS94
 PRESERVISION CAP
 AREDS 2.....94
 PRESERVISION CAP
 LUTEIN94
 PRESERVISION TAB
 AREDS94
prevalite40
 PREVYMIS.....20
 PREZCOBIX TAB 800-
 150.....19
 PREZISTA18
 PRIFTIN.....19
primaquine
 phosphate.....17
 PRIMAQUINE
 PHOSPHATE.....17
primidone54
 PRIORIX INJ.....89
 PRIVIGEN88
probenecid11
prochlorperazine77
prochlorperazine
 edisylate.....77
prochlorperazine
 maleate77
 PROCRIT84

proctocort.....109
procto-med hc.....109
proctosol hc.....109
proctozone-hc.....109
progesterone.....74
 PROGRAF88
 PROLASTIN-C101
 PROLIA.....65
promethazine hcl77
propafenone hcl39
proparacaine hcl.....97
propranolol hcl.....41
propylthiouracil74
 PROQUAD INJ89
 PROSOL INJ 20%...92
protriptyline hcl.....46
 PULMOZYME.....101
 PURIXAN25
pyrazinamide19
pyridostigmine
 bromide58
pyrimethamine15
 PYZCHIVA.....86
 QINLOCK32
 QUAD-PROBIOT CAP
 76
 QUADRACEL INJ
 0.5ML.....89
quetiapine fumarate
 50
quinapril hcl37
quinidine sulfate.....39
quinine sulfate.....17
 QULIPTA.....57
 RABAVERT INJ89
rabeprazole sodium 82
 RALDESY.....46
raloxifene hcl73
ramipril37
ranolazine.....43
rasagiline mesylate.47
reclipsen70
 RECOMBIVAX HB....90
refresh lacri-lube....97
 RELENZA DISKHALER
 20
 RELISTOR81
 REMICADE86

RENFLEXIS86
repaglinide.....63
 REPATHA.....40
 REPATHA
 PUSHTRONEX
 SYSTEM40
 REPATHA SURECLICK
 41
 RESTASIS97
 RESTASIS
 MULTIDOSE97
 RETEVMO32
 REVUFORJ.....32
 REXULTI50
 REYATAZ18
 REZLIDHIA33
 REZUROCK89
 RHOPRESSA96
ribavirin (hepatitis c)
 20
rifabutin19
rifampin.....19
riluzole58
rimantadine
 hydrochloride20
 RINVOQ.....86
 RINVOQ LQ.....86
 RISA-BID TAB
 PROBIO.....76
 RISAQUAD CAP.....76
risedronate sodium.65
risperidone50
risperidone
 microspheres.....50
ritonavir18
rivaroxaban83
rivastigmine45
rivastigmine tartrate
 45
rivelsa.....70
*rizatriptan benzoate*57
 ROCKLATAN DRO ...96
roflumilast101
 ROMVIMZA33
ropinirole
 hydrochloride47
rosuvastatin calcium
 40
rosyrah.....70

ROTARIX SUS 90
 ROTATEQ SOL 90
roweepra 54
 ROZLYTREK..... 33
 RUBRACA..... 33
rufinamide 54
 RU-HIST D TAB 4-
 10MG 100
 RUKOBIA 18
 RYBELSUS 63
 RYDAPT 33
rynex pe 100
sacubitril-valsartan
 tab 24-26 mg 38
sacubitril-valsartan
 tab 49-51 mg 38
sacubitril-valsartan
 tab 97-103 mg 38
sajazir 84
 SANTYL 110
sapropterin
 dihydrochloride... 73
 SCEMBLIX 33
scopolamine..... 77
 SEBEX SHA 109
 SECUADO 50
selegiline hcl 47
selenium sulfide 106
 SELZENTRY 18
senexon-s..... 79
senna plus..... 79
 SENNA PLUS CAP 8.6-
 50MG 79
senna-lax..... 79
senna-time..... 80
senna-time s..... 80
sennosides 80
sennosides-docusate
 sodium tab 8.6-50
 mg..... 80
senokot extra
 strength 80
 SEREVENT DISKUS
 100
sertraline hcl..... 46
setlakin 70
sharobel..... 70
 SHINGRIX..... 90

SIGNIFOR..... 73
 SIKLOS..... 84
sildenafil citrate
 (pulmonary
 hypertension)..... 44
silver sulfadiazine . 104
 SIMBRINZA SUS 1-
 0.2% 97
simethicone..... 81
simethicone drops
 infants..... 81
simethicone ultra
 strengt 81
simliya..... 70
simpesse..... 70
simvastatin..... 40
sinus nasal spray .. 100
sirolimus 89
 SIRTURO..... 19
 SKYRIZI 86
 SKYRIZI PEN 86
sleep aid 61
sleep tabs 61
sleep-aid 61
sm allergy relief 99
sm allergy relief
 childre..... 99
sm allergy relief nasal
 s..... 102
sm antacid..... 75
sm antacid extra
 strength..... 75
sm antibiotic 104
sm anti-diarrheal 76
sm antifungal
 clotrimazol 106
sm antifungal
 miconazole..... 106
sm antifungal
 tolnaftate 106
sm anti-itch extra
 streng 109
sm aspirin adult low
 stre..... 11
sm aspirin low dose 11
 SM CALAMINE LOT 109
sm clearlax..... 80

sm double antibiotic
 104
sm enema..... 80
sm epsom salt 80
sm fexofenadine
 hydrochlo 99
sm fiber..... 80
sm gas relief 81
sm gas relief drops
 infan..... 81
sm gentle laxative .. 80
sm hemorrhoidal ... 109
sm hydrocortisone 107
sm hydrocortisone
 maximum 107
sm hydrocortisone
 plus 107
sm lice killing
 maximum s..... 110
sm magnesium citrate
 80
sm migraine relief... 11
sm milk of magnesia
 80
sm motion sickness 77
sm naproxen sodium
 12
sm nasal spray 100
sm nasal spray 12
 hour..... 100
sm nasal spray sinus
 100
sm nicotine..... 61
sm nicotine polacrilex
 61
sm nicotine
 transdermal s..... 61
sm povidone-iodine
 109
sm senna laxative... 80
sm senna-s..... 80
sm sore throat spray
 110
sm stomach relief ... 76
sm stool softener 80
sm triple antibiotic
 orig..... 105
smooth antacid extra
 stre..... 75

*sod sulfate-pot sulf-
 mg sulf oral sol
 17.5-3.13-1.6
 gm/177ml*.....80
*sodium bicarbonate
 (antacid)*75
sodium chloride.....91
*sodium chloride (gu
 irrigant)*.....110
*sodium chloride
 hypertonic*.....97
*sodium fluoride chew;
 tab; 1.1 (0.5 f)
 mg/ml soln*92
 SODIUM OXYBATE..60
*sodium
 phenylbutyrate*73
*sodium polystyrene
 sulfonate powder*.66
solifenacin succinate
82
 SOLIQUA INJ 100/33
65
 SOLTAMOX.....26
soluble fiber80
 SOLU-CORTEF72
soluvita e94
 SOMATULINE DEPOT
73
 SOMAVERT.....73
*soothing - 12 hour
 nasal*.....100
sorafenib tosylate...33
sore throat.....110
sore throat spray..110
sotalol hcl.....40
sotalol hcl (afib/afl) 40
 SOTYKTU86
spironolactone.....37
*spironolactone &
 hydrochlorothiazide
 tab 25-25 mg*.....43
sprintec 28.....70
 SPRITAM.....54
sps.....66
sps rectal.....66
sronyx70
ssd.....105
 STELARA.....86

stimulant laxative...80
 STIVARGA.....33
 STL SOFT/LAX CAP
 8.6-50MG.....80
stomach relief.....76
*stomach relief extra
 stre*.....76
stomach relief ultra 76
stool softener.....80
*stool softener +
 stimulan*80
streptomycin sulfate
15
 STRIBILD TAB.....19
subvenite.....54
sucalfate.....81
*sulfacetamide sodium
 (acne)*104
*sulfacetamide sodium
 (ophth)*95
*sulfacetamide
 sodium-
 prednisolone ophth
 soln 10-
 0.23(0.25)%*95
sulfadiazine15
*sulfamethoxazole-
 trimethoprim iv soln
 400-80 mg/5ml* ...15
*sulfamethoxazole-
 trimethoprim susp
 200-40 mg/5ml* ...16
*sulfamethoxazole-
 trimethoprim tab
 400-80 mg*.....16
*sulfamethoxazole-
 trimethoprim tab
 800-160 mg*16
 SULFAMYLON.....105
sulfasalazine78
sulindac.....12
sumatriptan.....57
sumatriptan succinate
57, 58
*summers eve
 medicated*83
sunitinib malate33
 SUNLENCA.....18

SWIM EAR111
syeda70
 SYMDEKO TAB 100-
 150101
 SYMDEKO TAB 50-
 75MG101
 SYMPAZAN.....54
 SYMTUZA TAB.....19
 SYNAREL.....73
 SYNJARDY TAB 12.5-
 1000MG.....63
 SYNJARDY TAB 12.5-
 50063
 SYNJARDY TAB 5-
 1000MG.....63
 SYNJARDY TAB 5-
 500MG63
 SYNJARDY XR TAB
 10-1000.....63
 SYNJARDY XR TAB
 12.5-100063
 SYNJARDY XR TAB
 25-1000.....63
 SYNJARDY XR TAB 5-
 1000MG.....63
 SYNTHROID.....74
systane nighttime ...97
 TABLOID25
 TABRECTA33
tacrolimus.....89
tacrolimus (topical)
109
tadalafil82
*tadalafil (pulmonary
 hypertension)*.....44
 TAFINLAR.....33
 TAGRISSO33
 TALZENNA33
tamoxifen citrate....26
tamsulosin hcl.....82
tarina 24 fe70
tarina fe 1/20 eq....70
 TASIGNA.....33
tasimelteon56
 TAVNEOS84
tazarotene106
tazicef.....21
 TAZORAC106

TAZVERIK.....33
 TECENTRIQ.....33
 TECENTRIQ INJ
 HYBREZA.....34
 TEFLARO.....21
 telmisartan.....39
 telmisartan-
 amlodipine tab 40-
 10 mg.....38
 telmisartan-
 amlodipine tab 40-5
 mg.....38
 telmisartan-
 amlodipine tab 80-
 10 mg.....38
 telmisartan-
 amlodipine tab 80-5
 mg.....38
 telmisartan-
 hydrochlorothiazide
 tab 40-12.5 mg ...39
 telmisartan-
 hydrochlorothiazide
 tab 80-12.5 mg ...39
 telmisartan-
 hydrochlorothiazide
 tab 80-25 mg.....39
 temazepam.....56, 57
 TENIVAC INJ 5-2LF.90
 tenofovir disoproxil
 fumarate.....18
 tension headache....11
 TEPMETKO.....34
 terazosin hcl.....37
 terbinafine hcl.....17
 terbinafine hcl
 (topical).....106
 terbutaline sulfate 100
 terconazole vaginal 83
 TERIPARATIDE.....66
 testosterone.....61
 testosterone
 cypionate.....61
 testosterone
 enanthate.....61
 testosterone pump .62
 tetrabenazine.....58
 tetracycline hcl.....24

THALOMID.....26
 theophylline.....101
 THERAPEUTIC
 DANDRUFF.....109
 thiamine mononitrate
 94
 thioridazine hcl.....50
 thiothixene.....51
 tiadylt er.....42
 tiagabine hcl.....54
 TIBSOVO.....34
 ticagrelor.....84
 TICOVAC.....90
 tigecycline.....24
 tilia fe.....70
 timolol maleate.....41
 timolol maleate
 (opth).....97
 tinidazole.....16
 TIVICAY.....18
 TIVICAY PD.....18
 tizanidine hcl.....59
 tm-clotrimazole106
 tm-tolnaftate.....106
 tm-tolnaftate lr.....106
 TOBI PODHALER16
 TOBRADEX OIN 0.3-
 0.1%.....95
 tobramycin.....16
 tobramycin (ophth) 95
 tobramycin sulfate..16
 tobramycin-
 dexamethasone
 ophth susp 0.3-
 0.1%.....95
 tolnafi-al.....106
 tolnaftate.....106
 tolterodine tartrate.83
 topiramate.....54
 toremifene citrate...26
 torpenz.....34
 torsemide.....43
 TOUJEO MAX
 SOLOSTAR.....65
 TOUJEO SOLOSTAR 65
 TPN ELECTROL INJ .91
 TRADJENTA.....63
 tramadol hcl.....14

tramadol-
 acetaminophen tab
 37.5-325 mg.....14
 trandolapril.....37
 tranexamic acid.....84
 tranylcypromine
 sulfate.....46
 TRAVASOL INJ 10%92
 TRAZIMERA.....34
 trazodone hcl.....46
 TRELEGY AER
 ELLIPTA 100-62.5-
 25 MCG.....98
 TRELEGY AER
 ELLIPTA 200-62.5-
 25 MCG.....98
 TREMFYA.....86, 87
 TREMFYA INDUCTION
 PACK FO.....87
 treprostinil.....44
 TRESIBA.....65
 TRESIBA FLEXTOUCH
 65
 tretinoin.....104
 tretinoin
 (chemotherapy)...27
 triamcinolone
 acetonide (mouth)
 110
 triamcinolone
 acetonide (topical)
 107
 triamterene &
 hydrochlorothiazide
 cap 37.5-25 mg...43
 triamterene &
 hydrochlorothiazide
 tab 37.5-25 mg....43
 triamterene &
 hydrochlorothiazide
 tab 75-50 mg.....43
 tri-buffered aspirin..12
 tridacaine ii.....108
 triderm.....107
 trientine hcl.....66
 tri-estarylla.....70
 trifluoperazine hcl...51
 trifluridine.....95
 trihexyphenidyl hcl .48

TRIJARDY XR TAB ER
 24HR 10-5-1000MG
 63
 TRIJARDY XR TAB ER
 24HR 12.5-2.5-
 1000MG..... 63
 TRIJARDY XR TAB ER
 24HR 25-5-1000MG
 63
 TRIJARDY XR TAB ER
 24HR 5-2.5-
 1000MG..... 63
 TRIKAFTA PAK
 59.5MG..... 101
 TRIKAFTA PAK 75MG
 101
 TRIKAFTA TAB 100-
 50-75MG & 150MG
 102
 TRIKAFTA TAB 50-25-
 37.5MG & 75MG 102
tri-legest fe 70
tri-lingen 70
tri-lo-estarylla..... 70
tri-lo-marzia..... 70
tri-lo-mili 70
tri-lo-sprintec..... 70
trimethoprim..... 16
tri-mili 70
trimipramine maleate
 46
 TRINTELLIX..... 46
tri-nymyo 70
triple antibiotic 105
tri-sprintec 70
 TRIUMEQ PD TAB.... 19
 TRIUMEQ TAB..... 19
tri-vylibra 70
tri-vylibra lo 70
 TROGARZO..... 18
 TROPHAMINE INJ
 10% 92
trospium chloride.... 83
true magnesium
oxide..... 93
 TRUE METRIX KIT AIR
 111
 TRUE METRIX KIT
 METER 111

TRUE METRIX STRIPS
 111
 TRUE VITAMIN B1...94
true vitamin c 94
true vitamin d3..... 94
true vitamin e 94
 TRULICITY 63
 TRUMENBA..... 90
 TRUQAP..... 34
 TRUXIMA..... 34
 TUKYSA..... 34
 TURALIO 34
turqoz..... 70
twice-daily
clindamycin
phosphate (topical)
 104
 TWINRIX INJ..... 90
 TYBOST 18
tydemy..... 70
 TYENNE..... 87
 TYPHIM VI 90
 UBRELVY 58
ultra calcium +
vitamin d..... 93
unithroid 74
ursodiol 81
valacyclovir hcl 20
 VALCHLOR..... 110
valganciclovir hcl.... 20
valproate sodium 54
valproic acid..... 54
valsartan..... 39
valsartan-
hydrochlorothiazide
tab 160-12.5 mg .39
valsartan-
hydrochlorothiazide
tab 160-25 mg..... 39
valsartan-
hydrochlorothiazide
tab 320-12.5 mg .39
valsartan-
hydrochlorothiazide
tab 320-25 mg..... 39
valsartan-
hydrochlorothiazide
tab 80-12.5 mg ...39

VALTOCO 10 MG
 DOSE..... 54
 VALTOCO 15 MG
 DOSE..... 54
 VALTOCO 20 MG
 DOSE..... 54
 VALTOCO 5 MG DOSE
 54
valtya 1/50..... 70
 VANALICE GEL 0.3-
 3.5% 110
vancomycin hcl..... 16
 VANCOMYCIN INJ 1
 GM 16
 VANCOMYCIN INJ
 500MG 16
 VANCOMYCIN INJ
 750MG 16
 VANFLYTA..... 34
 VAQTA..... 90
varenicline tartrate .61
varenicline tartrate
tab 11 x 0.5 mg &
42 x 1 mg start
pack 61
 VARIVAX 90
 VASCEPA..... 41
 VAXCHORA SUS 90
velivet..... 70
 VELSIPITY..... 87
 VENCLEXTA 34
 VENCLEXTA TAB
 START PK 34
venlafaxine hcl..... 46
 VENTOLIN HFA 100
 VENTOLIN HFA
 (INSTITUTIONAL
 PACK)..... 100
 VEOZAH 73
verapamil hcl 42
 VERQUVO..... 43
 VERSACLOZ..... 51
 VERZENIO..... 34
vestura 70
vienna..... 70
vigabatrin 54, 55
vigadrone..... 55
 VIGAFYDE 55

vigpoder.....55
vilazodone hcl.....46
VIMKUNYA.....90
vincristine sulfate ...27
vinorelbine tartrate 27
violele70
VIRACEPT18
VIREAD18
vitamin a94
vitamin d3 super strength94
vitamin d3 ultra strength94
vitamin e94
VITAMIN E.....94
vitamin supplement e-40094
VITRAKVI.....34
VIVIMUSTA24
VIVITROL.....61
VIVOTIF CAP EC.....90
VIZIMPRO.....34
VONJO.....34
VORANIGO34
voriconazole.....17
VOSEVI TAB.....20
VOTRIZA-AL.....106
VOWST CAP81
VRAYLAR.....51
vyfemla70
vylibra70
VYZULTA.....97
warfarin sodium83
wart remover maximum stre ...110
water for irrigation, sterile irrigation soln110
weekly-d94
WELIREG27
wera70
wes-phos 250 neutral93
WESTAB PLUS TAB 27-1MG92
wixela inhub.....103
wymzya fe.....70
WYOST.....66

XALKORI34, 35
xarah fe70
XARELTO.....83
XARELTO STAR TAB 15/20MG83
XATMEP.....87
XCOPRI55
XCOPRI PAK 100-15055
XCOPRI PAK 12.5-2555
XCOPRI PAK 150-200MG (MAINTENANCE)..55
XCOPRI PAK 150-200MG (TITRATION)55
XCOPRI PAK 50-100MG55
XDEMVY95
XELJANZ87
XELJANZ XR.....87
xelria fe.....70
XERMELO81
XGEVA.....66
XHANCE102
XIFAXAN81
XIGDUO XR TAB 10-1000.....63
XIGDUO XR TAB 10-500MG63
XIGDUO XR TAB 2.5-1000.....63
XIGDUO XR TAB 5-1000MG63
XIGDUO XR TAB 5-500MG63
XIIDRA.....97
XOFLUZA20
XOLAIR.....102
XOSPATA35
XPOVIO PAK (100 MG ONCE WEEKLY)....35
XPOVIO PAK (40 MG ONCE WEEKLY)....35
XPOVIO PAK (40 MG TWICE WEEKLY) ..35

XPOVIO PAK (60 MG ONCE WEEKLY)35
XPOVIO PAK (60 MG TWICE WEEKLY) ..35
XPOVIO PAK (80 MG ONCE WEEKLY)35
XPOVIO PAK (80 MG TWICE WEEKLY) ..35
XTANDI26
xulane70
XULTOPHY INJ 100/3.6.....65
YESINTEK87
YF-VAX INJ90
YONSA.....26
YUTREPIA.....44
yuvaferm71
zafemy71
zafirlukast.....100
zaleplon.....57
ZARXIO84
Z-BUM110
ZEGALOGUE72
ZEJULA.....35
ZELBORAF35
ZEMAIRA.....102
zenatane104
ZENPEP CAP 10000UNT82
ZENPEP CAP 15000UNT82
ZENPEP CAP 20000UNT82
ZENPEP CAP 25000UNT82
ZENPEP CAP 3000UNIT81
ZENPEP CAP 40000UNT82
ZENPEP CAP 5000UNIT82
ZENPEP CAP 60000UNT82
ZERVIAE96
zidovudine18
*zinc oxide (topical)*110
ZINCTRAL110
ziprasidone hcl.....51

<i>ziprasidone mesylate</i>	ZONISADE.....	ZYKADIA
.....51	55	35
ZIRABEV	<i>zonisamide</i>	ZYLET SUS 0.5-0.3%
35	55	95
ZIRGAN.....	<i>zovia 1/35</i>	ZYPREXA RELPREVV
95	71	51
<i>zoledronic acid</i>	ZTALMY	
66	55	
ZOLINZA.....	<i>zumandimine</i>	
35	71	
<i>zolpidem tartrate</i>	ZURZUVAE.....	
57	46, 47	
	ZYDELIG	
	35	



Molina Dual Options Medicare-Medicaid Plan

Updated on **10/01/2025**

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