

Prescription drug list.



This “drug list” is a summary of the most commonly prescribed drugs that your insurance plan covers. **PRO TIP:** If you log in to your member account, you can use our drug search tool to view all the drugs your plan covers (i.e. the complete “formulary”), and see the costs of different medications.

Drug costs

Your formulary is divided into tiers. In most cases, drugs on lower tiers will cost you less. Additionally, there are preventive medications, that vary by age and gender (e.g., contraception for women or fluoride tablets for children), that may be available to you at no-out-of-pocket cost.

Some maintenance medications that you use regularly for chronic conditions such as asthma or diabetes may have additional coverage that makes them less expensive for you. However, coverage varies by plan and the cost-sharing amounts you pay for different drug tiers or categories of medications are shown on your Member Payment Summary (MPS) or our online search tool.

You can also call Pharmacy Services to find out how much a drug costs, whether it is covered by your insurance, and whether preauthorization or other steps are required for coverage. Select Health members call **800-538-5038**.

The formulary is regularly updated

The contents of the formulary are reviewed each month by our team of doctors and pharmacists. This team reviews and evaluates the clinical efficacy, safety, and cost effectiveness of all medications and may remove drugs from, or add drugs to, this list. Please note that the inclusion of a drug in the formulary does not guarantee that a healthcare provider will prescribe that drug for you.

Noncovered drug exceptions

For drugs that are not covered, you, your physician, or your pharmacy may request coverage based on medical necessity. Requests are granted on a case-by-case basis. Use the Drug Coverage Exception Form found on our website.

LEGEND

(PA) Preauthorization

Coverage of drugs is based on medical necessity. For certain drugs, you will need preauthorization from us; otherwise, you will be responsible to pay the drug's full retail price.

(M) Maintenance drug

These drugs may allow you to get a 90-day supply, for your convenience.

(ST) Step Therapy

Drugs that require step therapy are covered only after you have tried an alternative therapy and it didn't work (i.e., the drug didn't alleviate your symptoms or caused adverse reactions). Step therapy most often applies to brand-name drugs.

(QL) Quantity Limits

Quantity limitations apply to certain drugs (e.g., opioids). Preauthorization is required if the medication exceeds the plan limits.

(AGE) Age limit

A minimum or maximum age limit requirement must be met for coverage.

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This information is available for free in other languages and alternate formats by contacting:

Scripius: **800-442-3127** / Select Health: **800-538-5038**

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電

Drug Name	Drug Tier	Requirements & Limits
ACNE		
Adapalene Gel	1	(ST)
Amnesteem Capsule	2	
Azelaic Acid Gel	1	
Claravis Capsule	2	
Clindamy/Ben Gel	2	(ST)
Dapsone	2	(ST)
Ery/Benzoyl Gel	1	
Erythromycin	1	(AGE)
Isotretinoin Capsule	2	
Ivermectin	2	(ST)(QL)
Metronidazol	1	(QL)
Sod Sul/Sulf	1	
Sodium Sulf Suspension	2	
Sulfacetamid Lot	2	
Sulfacleanse Suspension	2	
Tretinoin Cream	2	(AGE)
Zenatane Capsule	2	
ANAPHYLAXIS THERAPY AGENTS		
Auvi-Q Injectable	2	(QL)
Epinephrine Injectable	1	(QL)
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT		
Acampro Cal Tablet	1	
Disulfiram Tablet	1	
ANTIARRHYTHMICS		
Mexiletine Capsule	1	(M)
ANTIBIOTICS		
Amox/K Clav	1	
Amoxicillin	1	
Ampicillin Capsule	1	
Azithromycin	1	(QL)
Cefadroxil Capsule	1	
Cefdinir	1	
Cefpodoxime Tablet	1	
Cefuroxime Tablet	1	
Cephalexin	1	
Ciprofloxacin	1	
Clarithromycin Tablet	1	
Clindamycin	1	
Dicloxacill Capsule	1	
Doxycycl Hyc	1	(QL)
Doxycycline Mono Capsule 100Mg	1	
Levofloxacin Tablet	1	
Linezolid Tablet	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Methenam Hip Tablet	1	
Minocycline Capsule	1	
Moxifloxacin	1	
Neomycin Tablet	1	
Nitrofur Mac Capsule	1	
Nitrofurantn Capsule	1	
Penicillin Vn Tablet	1	
Smz-Tmp Ds	1	
Tetracycline Capsule	1	
Tinidazole Tablet	1	
Trimethoprim Tablet	1	
Vancomycin Capsule	2	(QL)
ANTIFIBRINOLYTICS		
Tranex Acid Tablet	1	(QL)
ANTIFUNGALS		
Ciclodan Solution	1	(QL)
Ciclopirox	1	(QL)
Clotrim/Beta	1	
Clotrimazole	1	
Econazole Cream	1	
Fluconazole	1	(QL)
Itraconazole Capsule	1	(QL)
Ketoconazole	1	
Klayesta Powder	1	(QL)
Nyamyc Powder	1	(QL)
Nystat/Triam	1	
Nystatin	1	(QL)
Nystop Powder	1	(QL)
Posaconazole Tablet	4	(PA)(M)
Terbinafine Tablet	1	(QL)
ANTIMALARIALS		
Atovaq/Progu Tablet	1	
Hydroxychlor	1	(M)
ANTIMYASTHENIC AGENTS		
Pyridostigm Tablet	1	
Pyridostigmi Tablet	2	(QL)
ANTIMYCOBACTERIAL AGENTS		
Ethambutol Tablet	1	
Isoniazid Tablet	1	
Rifampin Capsule	1	
ANTIPROTOZOAL AGENTS		
Atovaquone Suspension	2	
ANTISEBORRHEIC PRODUCTS		
Sodium Sulfa Liq	1	
ANTITHYROID AGENTS		
Methimazole Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Propylthiour Tablet	1	(M)
ANTIVIRALS		
Acyclovir	1	
Biktarvy Tablet	4	(QL)(M)
Descovy Tablet	4	(QL)(M)
Dovato Tablet	4	(QL)(M)
Efavir/Emtri Tablet	1	(QL)
Emtr/Ten Df Tablet	1	(QL)(M)
Emtr/Tenofov Tablet	1	(QL)(M)
Famciclovir Tablet	1	
Genvoya Tablet	4	(QL)(M)
Juluca Tablet	4	(QL)(M)
Odefsey Tablet	4	(QL)(M)
Paxlovid	4	(QL)
Prevymis Tablet	4	(PA)(QL)(M)
Prezcobix Tablet	4	(QL)(M)
Rukobia Tablet	4	(PA)(QL)(M)
Symtuza Tablet	4	(QL)(M)
Tenofovir Tablet	1	(QL)(M)
Tivicay Tablet	4	(QL)(M)
Triumeq Tablet	4	(QL)(M)
Valacyclovir Tablet	1	(QL)
Valganciclov Tablet	4	(QL)(M)
Viread Tablet	4	(QL)(M)
ANXIETY & SLEEP		
Alprazolam Tablet	1	(QL)
Bupirone Tablet	1	(M)
Chlordiazep Capsule	1	
Diazepam Tablet	1	
Eszopiclone Tablet	1	(QL)
Hydroxyzine	1	
Lorazepam Tablet	1	
Ramelteon Tablet	1	(QL)(M)
Temazepam Capsule	1	(QL)
Triazolam Tablet	1	(QL)
Zaleplon Capsule	1	(QL)
Zolpidem Tablet	1	(QL)
Zolpidem Er Tablet	1	(QL)
ASTHMA AND COPD*		
Airsupra Inhalation	2	(QL)
Albuterol	1	(QL)(M)
Anoro Ellipt Inhalation	2	(QL)(M)
Arformoterol Neb	2	(QL)(M)
Arnuity Elpt Inhalation	2	(QL)(M)
Asmanex	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Atrovent Hfa Inhalation	3	(M)
Breztri Inhalationno Inhalation	2	(QL)(M)(AGE)
Budesonide	2	(QL)(M)
Combivent Inhalation	2	(QL)(M)
Flutic/Salme	3	(PA)(QL)(M)
Flutic/Vilan Inhalation	3	(PA)(QL)(M)
Fluticas Hfa Inhalation	2	(QL)(M)
Fluticasone	2	(QL)(M)
Ipratropium	1	(M)
Kourzeq Pst	1	
Levalbuterol	1	(QL)(M)
Montelukast	1	(QL)(M)
Oralone Dent Pst	1	
Roflumilast Tablet	1	(QL)(M)
Spiriva Handihaler	2	(QL)(M)
Spiriva Respimat	2	(QL)(M)
Stiolto Inhalation	2	(QL)(M)
Symbicort Inhalation	1	(QL)(M)
Theophylline Tablet	1	(M)
Trelegy Inhalation	2	(QL)(M)(AGE)
Triamcinolon	1	
Ventolin Hfa Inhalation	2	(QL)(M)
Wixela Inhub Inhalation	1	(QL)(M)
Zafirlukast Tablet	1	(QL)(M)
BLOOD THINNERS		
Cilostazol Tablet	1	(M)
Clopidogrel Tablet	1	(QL)(M)
Dabigatran Capsule	1	(QL)(M)
Eliquis Tablet	2	(QL)(M)
Eliquis St P Tablet	2	(QL)
Enoxaparin Injectable	2	
Prasugrel Tablet	1	(QL)(M)
Ticagrelor Tablet	1	(QL)(M)
Warfarin	1	(M)
Xarelto Tablet	2	(QL)(M)
BURN PRODUCTS		
Silver Sulfa Cream	1	
Ssd Cream	1	
CARBONIC ANHYDRASE INHIBITORS		
Acetazolamid	1	(M)
Methazolamid Tablet	2	(M)
CARDIOVASCULAR*		
Amiloride Tablet	1	(M)
Amiodarone Tablet	1	(M)
Amlod/Benazp Capsule	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Amlod/Olmesa Tablet	1	(M)
Amlod/Valsar Tablet	1	(QL)(M)
Amlodipine Tablet	1	(M)
Atenol/Chlor Tablet	1	(M)
Atenolol Tablet	1	(QL)(M)
Benazep/Hctz Tablet	1	(M)
Benazepril Tablet	1	(M)
Bisoprl/Hctz Tablet	1	(M)
Bisoprol Fum Tablet	1	(M)
Bumetanide Tablet	1	(M)
Candes/Hctz Tablet	1	(M)
Candesartan Tablet	1	(M)
Cartia Xt Capsule	1	(M)
Carvedilol	1	(QL)(M)
Chlorthalid Tablet	1	(M)
Clonidine	1	(QL)(M)
Digoxin Tablet	1	(M)
Dilt-Xr Capsule	1	(M)
Diltiazem	1	(M)
Diltiazem Er Tablet	1	(M)
Dofetilide Capsule	1	(M)
Doxazosin Tablet	1	(QL)(M)
Enalap/Hctz Tablet	1	(M)
Enalapril	2	(QL)(AGE)(M)
Entresto Capsule	2	(QL)(M)
Eplerenone Tablet	1	(M)
Felodipine Tablet	1	(M)
Flecainide Tablet	1	(M)
Furosemide	1	(M)
Guanfacine Tablet	1	(M)
Hydralazine Tablet	1	(M)
Hydrochlorothiazide	1	(M)
Indapamide Tablet	1	(M)
Irbesar/Hctz Tablet	1	(M)
Irbesartan Tablet	1	(M)
Isosorb Din Tablet	1	(M)
Isosorb Mono Tablet	1	(M)
Labetalol Tablet	1	(M)
Lisinop/Hctz Tablet	1	(M)
Lisinopril Tablet	1	(M)
Losartan Pot Tablet	1	(M)
Losartan/Hct Tablet	1	(M)
Matzim La Tablet	1	(M)
Metolazone Tablet	1	(M)
Metoprol Suc Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Metoprolol	1	(M)
Midodrine Tablet	1	
Minitran Dis	1	(M)
Minoxidil Tablet	1	(M)
Multaq Tablet	2	(M)
Nadolol Tablet	1	(M)
Nebivolol Tablet	1	(QL)(M)
Nifedipine	1	(M)
Nitro-Bid Oin	3	(M)
Nitroglycer Dis	1	(M)
Nitroglyceri Sub	1	(M)
Nitroglycerin Sub	1	(M)
Olm Med/Amlo Tablet	1	(M)
Olm Med/Hctz Tablet	1	(M)
Olmesa Medox Tablet	1	(M)
Pacerone Tablet	1	(M)
Prazosin Hcl Capsule	1	(M)
Propafenone Tablet	1	(M)
Propranolol	1	(M)
Ramipril Capsule	1	(M)
Ranolazine Tablet	1	(ST)(QL)(M)
Sacub/Valsar Tablet	1	(QL)(M)
Sotalol Tablet	1	(M)
Sotalol Af Tablet	1	(M)
Sotalol Hcl Tablet	1	(M)
Spiro/Hctz Tablet	1	(M)
Spironolact Tablet	1	(M)
Telmis/Amlod Tablet	1	(QL)(M)
Telmisa/Hctz Tablet	1	(M)
Telmisartan Tablet	1	(M)
Terazosin Capsule	1	(QL)(M)
Tiadyt Capsule	1	(M)
Torsemide Tablet	1	(M)
Triamt/Hctz	1	(M)
Triamterene Capsule	2	(M)
Valsart/Hctz Tablet	1	(M)
Valsartan Tablet	1	(M)
Verapamil	1	(M)
Verelan Pm Capsule	3	(M)
CHOLESTEROL*		
Atorvastatin Tablet	1	(QL)(AGE)(M)
Cholestyram Powder	1	(QL)(M)
Colesevelam Tablet	2	(QL)(M)
Colestipol Tablet	1	(QL)(M)
Ezetim/Simba Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Ezetimibe Tablet	1	(QL)(M)
Fenofibrate	1	(QL)(M)
Gemfibrozil Tablet	1	(QL)(M)
Icosapent Capsule	2	(ST)(QL)(M)
Lovastatin Tablet	1	(QL)(M)(AGE)
Nexlizet Tablet	2	(PA)(QL)(M)
Niacin Tablet	1	(QL)(M)
Niacin Er Tablet	1	(QL)(M)
Omega-3-Acid Capsule	1	(QL)(M)
Pitavastatin Tablet	1	(ST)(QL)(M)
Pravastatin	1	(QL)(M)(AGE)
Prevalite Powder	2	(QL)(M)
Repatha Injectable	2	(PA)(QL)(M)
Repatha Sure Injectable	2	(PA)(QL)(M)
Rosuvastatin Tablet	1	(QL)(AGE)(M)
Simvastatin Tablet	1	(QL)(AGE)(M)
CONTRACEPTION (BIRTH CONTROL)		
Brand Contraceptives	3	(QL)(M)
Generic Contraceptives	1	(QL)(M)
Medroxyprogesterone	1	(QL)(M)
Phexxi Gel	3	(QL)(M)
COUGH/COLD/ALLERGY PRODUCTS		
Benzonatate	1	(ST)(QL)
Brom/Pse/Dm Syrup	1	(QL)
Codeine/Gg Solution	1	
Cyproheptad	1	(QL)
G Tussin Ac Liq	1	
Gg/Codeine Solution	1	
Hydrocod/Hom	1	
Hydromet Syrup	1	
Maxi-Tuss Ac Solution	1	
Prometh/Cod Solution	1	
Promethazine	1	
CYCLOPLEGIC MYDRIATICS		
Atropine Sul	1	
Cyclopentol Solution	1	
CYSTIC FIBROSIS AGENTS		
Pulmozyme Solution	4	(QL)(M)
Trikafta	4	(PA)(QL)(AGE)(M)
DENTAL PRODUCTS		
Chlorhex Glu Solution	1	
Fluoride	1	(QL)(AGE)(M)
Periogard Solution	1	
DERMATOLOGICALS (SKIN) MISC. DERMATOLOGICALS		
Acitretin Capsule	3	(QL)

Drug Name	Drug Tier	Requirements & Limits
Calcipotrien Cream	2	
Diclofenac 1%	2	(PA)(M)
Fluorouracil Cream	1	(PA)(QL)
Gentamicin	1	
Mupirocin Oin	1	
Tolak Cream	3	(QL)
DERMATOLOGICALS (SKIN) STEROIDS		
Ala-Cort Cream	1	
Beta Diprop	1	
Betameth Dip	1	
Betameth Val	1	
Clobetasol	1	(QL)
Desonide	1	
Fluocin Acet	1	
Fluocinonide	1	(ST)(QL)
Hydrocort	1	(M)
Hydrocortiso	1	
Mometasone	1	(QL)(M)
Triderm Cream	2	
DIABETES - INSULIN*		
Fiasp Injectable	2	(M)
Fiasp Flex Injectable	2	(M)
Humulin R U-500	2	(PA)(QL)(M)
Ins Asp Prot Injectable	1	(M)
Insulin Aspa Injectable	1	(M)
Lantus Injectable	2	(M)
Lantus Solos Injectable	2	(M)
Novolin Injectable	1	(M)
Novolin N Injectable	1	(M)
Novolog Injectable	2	(M)
Novolog Mix Injectable	2	(M)
Toujeo Max Injectable	2	(M)
Toujeo Solo Injectable	2	(M)
DIABETES - NON-INSULIN*		
Acarbose Tablet	1	(M)
Alogliptin Tablet	1	(QL)(M)
Alogliptin/Metformin	1	(QL)(M)
Baqsimi One Powder	2	
Baqsimi Two Powder	2	
Brenzavvy Tablet	2	(QL)(M)
Farxiga Tablet	2	(QL)(M)
Glimepiride Tablet	1	(M)
Glip/Metform Tablet	1	(M)
Glipizide	1	(M)
Glucagon Injectable	1	

Drug Name	Drug Tier	Requirements & Limits
Glyb/Metform Tablet	1	(M)
Glyburide Tablet	1	(M)
Gvoke Hypo 1 Injectable	2	
Gvoke Hypo 2 Injectable	2	
Metformin	1	(M)
Mounjaro Injectable	2	(PA)(QL)(M)
Pioglitazone Tablet	1	(QL)(M)
Saxa/Metfor Tablet	1	(QL)(M)
Saxagliptin Tablet	1	(QL)(M)
Soliqua Injectable	2	(ST)(QL)(M)
Steglatro Tablet	3	(ST)(QL)(M)
Trulicity Injectable	2	(PA)(QL)(M)
Xigduo Xr Tablet	2	(QL)(M)
DIABETES - TESTING AND SUPPLIES		
1/2MI Tb Syr Mis	3	(M)
10MI LI Syrg Mis	3	(M)
10MI Syringe Mis	1	(M)
12MI Syringe Mis	3	(M)
140MI Syringe Mis	3	(M)
1MI Allr Syr Mis	3	(M)
1MI Slip Tip Mis	3	(M)
1MI Syringe Mis	1	(M)
1MI Tb Syrng Mis	3	(M)
20MI Syringe Mis	1	(M)
3MI Syringe Mis	3	(M)
30MI Syringe Mis	1	(M)
35MI Syringe Mis	1	(M)
3MI LI Syrng Mis	3	(M)
3MI Luer Loc Mis	3	(M)
3MI Syringe Mis	1	(M)
5MI Syringe Mis	1	(M)
60MI Syringe Mis	1	(M)
6MI Syringe Mis	3	(M)
Accu-Chek Tes	3	(PA)(QL)(M)
Accutrend Tes	3	(PA)(QL)(M)
Admix Needle Mis	3	(M)
Advance Tes	3	(PA)(QL)(M)
Advocate Tes	3	(PA)(QL)(M)
Agamatrix Tes	3	(PA)(QL)(M)
Allergy Syrg Mis	3	(M)
Assure Tes	3	(PA)(QL)(M)
Assure 3 Tes	3	(PA)(QL)(M)
Assure 4 Tes	3	(PA)(QL)(M)
Assure li Tes	3	(PA)(QL)(M)
Assure Prism Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Assure Pro Tes	3	(PA)(QL)(M)
Autocode Tes	3	(PA)(QL)(M)
Bd 20MI Syrg Mis	3	(M)
Bd 50MI Syrg Mis	3	(M)
Bd 5MI Syrg Mis	3	(M)
Bd Blnt Fill Mis	3	(M)
Bd Eclipse Mis	3	(M)
Bd Hypo Need Mis	3	(M)
Bd Integra Mis	3	(M)
Bd Luer-Lok Mis	3	(M)
Bd Needle Mis	3	(M)
Bd Needles Mis	3	(M)
Bd Plastipak Mis	3	(M)
Bd Precision Mis	3	(M)
Bd Safety Mis	3	(M)
Bd Syr 50MI Mis	3	(M)
Bd Tb 1MI Mis	3	(M)
Biotel Care Tes	3	(PA)(QL)(M)
Blood Glucos Tes	1	(PA)(QL)(M)
Blulink Tes	3	(PA)(QL)(M)
Bulb Irr Syr Mis	3	(M)
Carepoint Sa Mis	3	(M)
Carepoint Sy Mis	3	(M)
Carepoint Tu Mis	3	(M)
Caresens N Tes	3	(PA)(QL)(M)
Caresens S Tes	3	(PA)(QL)(M)
Caretouch Mis	3	(PA)(QL)(M)
Catheter/Tip Mis	3	(M)
Clever Chek Tes	3	(PA)(QL)(M)
Clever Choic Tes	3	(PA)(QL)(M)
Clevr Choice Tes	3	(PA)(QL)(M)
Confirm/Micr Tes	3	(PA)(QL)(M)
Contour Tes	3	(PA)(QL)(M)
Contour Plus Tes	3	(PA)(QL)(M)
Cool Blood Tes	3	(PA)(QL)(M)
Cvs Advanced Tes	3	(PA)(QL)(M)
Cvs Glucose Tes	3	(PA)(QL)(M)
Cvs True Met Tes	3	(PA)(QL)(M)
D-Care Blood Tes	3	(PA)(QL)(M)
Deflux Needl Mis	3	(M)
Dexcom G6 Mis	2	(ST)(QL)(M)(AGE)
Dexcom G7 Mis	2	(ST)(QL)(M)(AGE)
Diathrive Mis	3	(PA)(QL)(M)
Diathrive+ Mis	3	(PA)(QL)(M)
Diatrue Plus Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Dropsafe Mis	3	(M)
Duo-Care Tes	3	(PA)(QL)(M)
Easy Glide Mis	3	(M)
Easy Max Glc Tes	3	(PA)(QL)(M)
Easy Plus li Tes	3	(PA)(QL)(M)
Easy Step Tes	3	(PA)(QL)(M)
Easy Talk Tes	3	(PA)(QL)(M)
Easy Touch	3	(PA)(QL)(M)
Easy Trak Tes	3	(PA)(QL)(M)
Easy Trak li Tes	3	(PA)(QL)(M)
Easygluco Tes	3	(PA)(QL)(M)
Easymax Tes	3	(PA)(QL)(M)
Easymax 15 Tes	3	(PA)(QL)(M)
Easypoint Mis	3	(M)
Easypro Tes	3	(PA)(QL)(M)
Easypro Plus Tes	3	(PA)(QL)(M)
Eclipse Ndle Mis	3	(M)
Element Tes	3	(PA)(QL)(M)
Elemnt Compa Tes	3	(PA)(QL)(M)
Embrace Tes	3	(PA)(QL)(M)
Embrace Evo Tes	3	(PA)(QL)(M)
Embrace Pro Tes	3	(PA)(QL)(M)
Embrace Talk Tes	3	(PA)(QL)(M)
Embrace Wave Tes	3	(PA)(QL)(M)
Enlite Gluco Mis	3	(PA)(QL)(M)
Evencare Tes	3	(PA)(QL)(M)
Evencare + Tes	3	(PA)(QL)(M)
Evencare G2 Tes	3	(PA)(QL)(M)
Evencare G3 Tes	3	(PA)(QL)(M)
Evolution Tes	3	(PA)(QL)(M)
Fifty50 Gluc Tes	3	(PA)(QL)(M)
Fill Needle Mis	3	(M)
Fora 6 Mis	3	(PA)(QL)(M)
Fora 6Con Tes	3	(PA)(QL)(M)
Fora Advance Tes	3	(PA)(QL)(M)
Fora Blood Tes	3	(PA)(QL)(M)
Fora D15g Tes	3	(PA)(QL)(M)
Fora D20 Tes	3	(PA)(QL)(M)
Fora D40/G31 Tes	3	(PA)(QL)(M)
Fora G20 Tes	3	(PA)(QL)(M)
Fora G30/V10 Tes	3	(PA)(QL)(M)
Fora Gd20 Tes	3	(PA)(QL)(M)
Fora Gd50 Tes	3	(PA)(QL)(M)
Fora Gtel Tes	3	(PA)(QL)(M)
Fora Tn'g Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Fora V10 Tes	3	(PA)(QL)(M)
Fora V12 Tes	3	(PA)(QL)(M)
Fora V20 Tes	3	(PA)(QL)(M)
Fora V30a Tes	3	(PA)(QL)(M)
Foracare Tes	3	(PA)(QL)(M)
Free Libre2 Kit	2	(ST)(QL)(M)(AGE)
Free Libre3 Kit	2	(ST)(QL)(M)
Freesty Libr	2	(ST)(QL)(M)(AGE)
Freestyle	2	(ST)(QL)(AGE)(M)
Ge100 Blood Tes	3	(PA)(QL)(M)
Genuultimate Tes	3	(PA)(QL)(M)
Ght Test Tes	3	(PA)(QL)(M)
Gluco Perfec Tes	3	(PA)(QL)(M)
Glucocard Tes	3	(PA)(QL)(M)
Glucocard 01 Tes	3	(PA)(QL)(M)
Glucocom Tes	3	(PA)(QL)(M)
Gluconavii Tes	3	(PA)(QL)(M)
Gnp Tru Metr Tes	3	(PA)(QL)(M)
Gnp Truetrac Tes	3	(PA)(QL)(M)
Gojji Blood Tes	3	(PA)(QL)(M)
Gojji Strips Mis	3	(PA)(QL)(M)
Guardian Mis	3	(PA)(QL)(M)(AGE)
Guardian 4 Mis	3	(PA)(QL)(M)(AGE)
Guardian Con Mis	3	(PA)(QL)(M)(AGE)
Guardian Rt Mis	3	(PA)(QL)(M)(AGE)
Harmony Tes	3	(PA)(QL)(M)
Hw Embrace Tes	3	(PA)(QL)(M)
Hypo Needle Mis	1	(M)
Iglucose Tes	3	(PA)(QL)(M)
Ihealth Bloo Tes	3	(PA)(QL)(M)
In Touch Tes	3	(PA)(QL)(M)
Infinity Tes	3	(PA)(QL)(M)
Insulin Syringes	1	(M)
Kroger Blood Tes	3	(PA)(QL)(M)
Lancets	1	(M)
Liberty Tes	3	(PA)(QL)(M)
Liberty Next Tes	3	(PA)(QL)(M)
Luer-Lock Mis	3	(M)
Luer-Lok Mis	3	(M)
Meijer Tes	3	(PA)(QL)(M)
Meijer Blood Tes	3	(PA)(QL)(M)
Microdot Tes	3	(PA)(QL)(M)
Minilink Rt Mis	3	(PA)(QL)(M)(AGE)
Minimed 630G Mis	3	(PA)(QL)(M)(AGE)
Mm Blulink Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Monoject S/P Mis	3	(M)
Myglucohealt Tes	3	(PA)(QL)(M)
Needles Mis	3	(M)
Neutek 2Tek Tes	3	(PA)(QL)(M)
No Coding Tes	3	(PA)(QL)(M)
Norm-Ject Mis	3	(M)
Nova Max Tes	3	(PA)(QL)(M)
Omnipod 5 Dx	2	(PA)(QL)(M)
Omnipod 5 L2	2	(PA)(QL)(M)
Omnipod Dash	2	(PA)(QL)(M)
On Call Tes	3	(PA)(QL)(M)
One Drop Tes	3	(PA)(QL)(M)
Onetouch Tes	3	(PA)(QL)(M)
Optiumez Tes	3	(PA)(QL)(M)
Paradigm Rea Mis	3	(PA)(QL)(M)(AGE)
Pen Needles	3	(M)
Perfect Poin Mis	3	(M)
Pharm Syrng Mis	3	(M)
Pharm Tray Mis	3	(M)
Pip Blood Tes	3	(PA)(QL)(M)
Piston Irrig Mis	3	(M)
Pocketchem Tes	3	(PA)(QL)(M)
Poly Hub Mis	3	(M)
Prec Neo Sys Kit	2	(QL)
Precision Tes	2	(QL)(M)
Premium Bloo Mis	3	(PA)(QL)(M)
Pro Voice Tes	3	(PA)(QL)(M)
Prodigy No Tes	3	(PA)(QL)(M)
Pts Panels Tes	3	(PA)(QL)(M)
Quick Touch Tes	3	(PA)(QL)(M)
Quicktek Tes	3	(PA)(QL)(M)
Quintet Tes	3	(PA)(QL)(M)
Quintet Ac Tes	3	(PA)(QL)(M)
Ra Blood Tes	3	(PA)(QL)(M)
Refuah Plus Tes	3	(PA)(QL)(M)
Relion Tes	3	(PA)(QL)(M)
Relion Platn Tes	3	(PA)(QL)(M)
Relion Premi Tes	3	(PA)(QL)(M)
Relion Prime Tes	3	(PA)(QL)(M)
Relion True Tes	3	(PA)(QL)(M)
Rightest Tes	3	(PA)(QL)(M)
Safetyglide Mis	3	(M)
Safty Needle Mis	3	(M)
Securesafe Mis	3	(M)
Slip Tip 1MI Mis	3	(M)

Drug Name	Drug Tier	Requirements & Limits
Slip Tip 3MI Mis	3	(M)
Smart Sense Tes	3	(PA)(QL)(M)
Smartest Tes	3	(PA)(QL)(M)
Solus V2 Tes	3	(PA)(QL)(M)
Supreme Tes	3	(PA)(QL)(M)
Syrg/Ndl 3MI Mis	3	(M)
Syringe 5MI Mis	3	(M)
Syringe Barr Mis	3	(M)
Syringe Luer Mis	3	(M)
Tb Syringe Mis	3	(M)
Tb Syrng 1MI Mis	3	(M)
Toomey Syrin Mis	1	(M)
Tru Metrix Tes	3	(PA)(QL)(M)
True Focus Mis	3	(PA)(QL)(M)
True Metrix Tes	3	(PA)(QL)(M)
Truetest Tes	3	(PA)(QL)(M)
Truetrack Tes	3	(PA)(QL)(M)
Unistrip1 Tes	3	(PA)(QL)(M)
Vent Needle Mis	3	(M)
Verasens Tes	3	(PA)(QL)(M)
Verisafe Mis	3	(M)
Vivaguard Tes	3	(PA)(QL)(M)
DIRECT MUSCLE RELAXANTS		
Dantrolene Capsule	1	
ECZEMA AGENTS - TOPICAL		
Eucrisa Oin	2	(QL)
EMOLLIENTS		
Ammonium Lac Cream	1	
GALLSTONE SOLUBILIZING AGENTS		
Ursodiol	2	(M)
GASTROINTESTINAL (DIGESTIVE) MISC.		
GASTROINTESTINAL		
Diphen/Atrop Tablet	1	
Lubiprostone Capsule	2	(QL)(M)(AGE)
Metoclopram Tablet	1	
Xifaxan Tablet	3	(PA)
GASTROINTESTINAL (DIGESTIVE) NAUSEA & VOMITING		
Antivert Tablet	3	
Meclizine Tablet	1	
Ondansetron	1	(QL)
Promethegan Sup	1	
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Cimetidine Tablet	1	(M)
Famotidine	1	(AGE)(M)
Misoprostol Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Sucralfate	2	(M)
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENT		
Esomeprazole	1	(QL)(M)
First-Omepra Suspension	2	(QL)(M)(AGE)
Lansoprazole	1	(ST)(QL)(AGE)(M)
Omeprazole Capsule	1	(QL)(M)
Omeprazole + Suspension	2	(QL)(M)(AGE)
Pantoprazole Tablet	1	(QL)(M)
Rabeprazole Tablet	1	(QL)(M)
GASTROINTESTINAL ANTIALLERGY AGENTS		
Cromolyn Sod	2	(M)
GOUT		
Allopurinol Tablet	1	(M)
Colchicine Tablet	1	(QL)
Febuxostat Tablet	1	(QL)(M)
Probenecid Tablet	1	(M)
GROWTH HORMONES		
Genotropin Injectable	4	(PA)(QL)(M)
HEMATORHEOLOGIC AGENTS		
Pentoxifylli Tablet	1	(M)
HEPATITIS THERAPIES		
Entecavir Tablet	1	(QL)(M)
Mavyret	2	(PA)(QL)(M)
Vosevi Tablet	3	(PA)(QL)(M)
HORMONE RECEPTOR MODULATORS		
Osphena Tablet	3	(QL)(M)
Raloxifene Tablet	1	(QL)(M)
HORMONE REPLACEMENT THERAPY FEMALE		
Abigale Tablet	1	(QL)(M)
Abigale Lo Tablet	1	(QL)(M)
Covaryx Tablet	1	(QL)(M)
Covaryx Hs Tablet	1	(QL)(M)
Delestrogen Injectable	3	
Depo-Estradi Injectable	3	
Dotti Dis	1	(QL)(M)
Duavee Tablet	2	(QL)(M)
Eemt Tablet	1	(QL)(M)
Eemt Hs Tablet	1	(QL)(M)
Est Estrogen Tablet	1	(QL)(M)
Estra/Noreth Tablet	1	(QL)(M)
Estrad Val Injectable	1	
Estradiol	1	(QL)(M)
Estratest Fs Tablet	1	(QL)(M)
Estratest Hs Tablet	1	(QL)(M)
Estring Mis	3	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Estrog/Mtest Tablet	1	(QL)(M)
Evamist Spr	3	(QL)(M)
Fyavolv Tablet	1	(M)
Gallifrey Tablet	1	(M)
Imvexxy Main Sup	3	(ST)(QL)(M)
Imvexxy Strt Sup	3	(ST)(QL)(M)
Jinteli Tablet	1	(M)
Lyllana Dis	1	(QL)(M)
Mimvey Tablet	1	(QL)(M)
Noreth/Ethin Tablet	1	(M)
Norethin Ace Tablet	1	(M)
Premarin Tablet	2	(QL)(M)
Premarin Vag Cream	3	(ST)(QL)(M)
Premphase Tablet	3	(ST)(QL)(M)
Prempro Tablet	3	(ST)(QL)(M)
Progesterone	1	(QL)(M)
Yuvaferm Tablet	2	(QL)(M)
HORMONE REPLACEMENT THERAPY MALE		
Depo-Testost Injectable	1	(QL)(M)
Testost Cyp Injectable	1	(QL)(M)
Testost Enan Injectable	1	(QL)(M)
Testosterone Gel	2	(QL)(M)
IMMUNOLOGICAL AGENTS - IMMUNE SYSTEM STIMULATION OR SUPPRESSION		
Adbry Injectable	4	(PA)(QL)(M)
Amjevita Injectable	1	(PA)(QL)(M)
Cibinqo Tablet	4	(PA)(QL)(M)
Cimzia	4	(PA)(QL)(M)
Cosentyx	4	(PA)(QL)(M)
Ebglyss Injectable	4	(PA)(QL)(M)
Enbrel	4	(PA)(QL)(M)
Hadlima Injectable	1	(PA)(QL)(M)
Hadlima Push Injectable	1	(PA)(QL)(M)
Otezla Tablet	4	(PA)(QL)(M)
Pyzchiva Injectable	1	(PA)(QL)(M)
Rinvoq Tablet	4	(PA)(QL)(M)
Selarsdi Injectable	1	(PA)(QL)(M)
Skyrizi Injectable	4	(PA)(QL)(M)
Skyrizi Pen Injectable	4	(PA)(QL)(M)
Tyenne Injectable	1	(PA)(QL)(M)
Vtama Cream	3	(ST)(QL)
Xolair	4	(PA)(QL)(M)
IMMUNOMODULATING AGENTS - TOPICAL		
Imiquimod Cream	1	
IMMUNOSUPPRESSANTS		
Azasan Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Azathioprine Tablet	1	(M)
Cyclosporine	1	(M)
Envarsus Xr Tablet	3	(ST)(M)
Everolimus Tablet	4	(PA)(QL)(M)
Gengraf Capsule	1	(M)
Mycophenolat	1	(M)
Mycophenolic Tablet	1	(QL)(M)
Sirolimus Tablet	2	(M)
Tacrolimus	1	(QL)(M)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
Pimecrolimus Cream	3	(ST)(QL)
INFLAMMATORY BOWEL AGENTS		
Balsalazide Capsule	2	(M)
Entyvio Pen Injectable	4	(PA)(QL)(M)
Mesalamine	2	(QL)(M)
Sulfasalazin Tablet	1	(M)
INFLUENZA AGENTS		
Oseltamivir	1	(QL)
INTESTINAL ACIDIFIERS		
Enulose Solution	1	
Generlac Solution	1	
Lactulose Solution	1	
LAXATIVE COMBINATIONS		
Clenpiq Solution	2	
Gavilyte	1	
Peg 3350	1	
Sodium/Potas Solution	1	
Suprep Bowel Solution	2	
LAXATIVES		
Constulose Solution	1	
LOCAL ANESTHETICS - TOPICAL		
Lido/Prilocn Cream	1	
Lidocaine	1	
MENTAL HEALTH		
Abilify Asim Injectable	4	(QL)(M)
Abilify Main Injectable	4	(M)
Amitriptylin Tablet	1	(M)
Aripiprazole Tablet	1	(M)
Asenapine Sub	2	(ST)(QL)(M)
Bupropion Tablet	1	(M)
Citalopram	1	(QL)(M)
Clomipramine Capsule	1	(QL)(M)
Clozapine Tablet	1	(QL)(M)
Desipramine Tablet	1	(M)
Desvenlafax Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Donepezil Tablet	1	(ST)(M)
Doxepin Hcl Capsule	1	(M)
Duloxetine	1	(QL)(M)
Erzofri Injectable	4	(M)
Escitalopram	1	(QL)(M)
Fanapt Tablet	4	(PA)(QL)(M)
Fluoxetine	1	(M)
Fluvoxamine	2	(ST)(QL)(M)
Haloperidol Tablet	1	(M)
Imipram Hcl Tablet	1	(M)
Invega Hafye Injectable	4	(QL)(M)
Invega Sust Injectable	4	(M)
Invega Trinz Injectable	4	(M)
Lithium Carb	1	(M)
Lurasidone Tablet	1	(M)
Memant Titra Packet	1	(QL)
Memantine Tablet	1	(QL)(M)
Memantine Hc Capsule	1	(QL)(M)
Mirtazapine	1	(M)
Nortriptylin Capsule	1	(M)
Olanzapine Tablet	1	(M)
Paliperidone Tablet	1	(ST)(QL)(M)
Paroxetine Er Tablet	1	(M)
Paroxetine Tablet	1	(M)
Quetiapine Er	1	(M)
Risperidone	1	(QL)(M)
Rivastigmine	1	(M)
Savella	2	(ST)(QL)(M)
Sertraline	1	(QL)(M)
Trazodone Tablet	1	(M)
Venlafaxine	1	(QL)(M)
Vilazodone Tablet	1	(M)
Ziprasidone Capsule	1	(M)
METABOLIC MODIFIERS		
Calcitriol Capsule	1	(M)
Cinacalcet Tablet	1	(QL)(M)
Javygtor	4	(PA)(QL)(M)
Levocarnitin	2	
Olpruva Packet	4	(PA)(QL)(M)
Pheburane Mis	4	(PA)(QL)(M)
Sapropterin Powder	4	(PA)(QL)(M)
Strensiq Injectable	4	(PA)(QL)(M)
Zelvysia Powder	4	(PA)(QL)(M)
MIGRAINE		
Ajovy Injectable	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Almotrip Mal Tablet	2	(ST)(QL)
Almotriptan Tablet	2	(ST)(QL)
Aprepitant Capsule	1	(QL)
Eletriptan Tablet	1	(QL)
Emgality Injectable	3	(PA)(QL)(M)
Frovatriptan Tablet	1	(ST)(QL)
Naratriptan Tablet	1	(QL)(M)
Nurtec Tablet	2	(PA)(QL)
Reyvow Tablet	3	(PA)(QL)
Rizatriptan Tablet	1	(M)
Sumatriptan	2	(ST)(QL)(M)
Ubrelvy Tablet	2	(PA)(QL)
Zolmitriptan	2	(ST)(QL)
Zomig Tablet	1	(QL)
MINERALOCORTICIDS		
Fludrocort Tablet	1	(M)
MIOTICS		
Pilocarpine	1	
MISC. RESPIRATORY INHALANTS		
Hypersal Neb	3	
Nebusal Neb	1	
Pulmosal Neb	1	
Sod Chloride	1	(PA)
MISC. TOPICAL		
Drysol Solution	3	
Qbrexza Pad	3	(QL)
MISCELLANEOUS VAGINAL PRODUCTS		
Intrarosa Sup	3	(QL)(M)
MOVEMENT DISORDER		
Tetrabenazin Tablet	4	(PA)(QL)(M)
MUCOLYTICS		
Acetylcyst Solution	1	
MULTIPLE SCLEROSIS AGENTS		
Avonex	4	(PA)(QL)(M)
Dalfampridin Tablet	1	(QL)(M)
Dimethyl Fum Capsule	1	(QL)(M)
Glatiramer Injectable	4	(QL)(M)
Glatopa Injectable	4	(QL)(M)
Kesimpta Injectable	4	(PA)(QL)(M)
Teriflunomid Tablet	1	(QL)(M)
Vumerity Capsule	4	(PA)(QL)(M)
Zeposia Capsule	4	(PA)(QL)(M)
MUSCLE RELAXANTS		
Baclofen Tablet	1	(M)
Carisoprodol Tablet	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Chlorzoxazon Tablet	1	
Cyclobenzaprine	1	
Metaxalone Tablet	2	(ST)
Methocarbam Tablet	1	
Orphenadrine Tablet	1	
Tizanidine	1	(ST)(QL)
Zanaflex Capsule	3	(QL)
NASAL ALLERGY		
Azel/Flutic Spr	2	(ST)(QL)
Azelastine	1	(QL)(M)
Dymista Spr	2	(QL)
Flunisolide Spr	1	(QL)
Olopatadine Spr	1	(ST)
Xhance Mis	2	(PA)(QL)
ONCOLOGY/HEMATOLOGY		
Abiraterone Tablet	1	(QL)(M)
Abirtega Tablet	1	(QL)(M)
Anastrozole Tablet	1	(QL)(M)
Bicalutamide Tablet	1	(QL)
Cabometyx Tablet	4	(PA)(QL)(M)
Calquence Tablet	4	(PA)(QL)(M)
Capecitabine Tablet	1	
Dasatinib Tablet	4	(PA)(QL)(M)
Exemestane Tablet	1	(QL)(M)
Hydroxyurea Capsule	1	
Ibrance Tablet	4	(PA)(QL)(M)
Imatinib	1	(QL)
Imbruvica	4	(PA)(QL)(M)
Jakafi Tablet	4	(PA)(QL)(M)
Kisqali Tablet	4	(PA)(QL)(M)
Lenalidomide Capsule	4	(PA)(QL)(M)
Letrozole Tablet	1	(QL)(M)
Leucovor Ca Tablet	1	(QL)
Lynparza Tablet	4	(PA)(QL)(M)
Megestrol Ac Tablet	1	
Mercaptopur Tablet	1	
Methotrexate	1	(M)
Nilotinb Hcl Capsule	4	(PA)(QL)(M)
Nubeqa Tablet	4	(PA)(QL)(M)
Tagrisso Tablet	4	(PA)(QL)(M)
Tamoxifen Tablet	1	(QL)(M)
Temozolomide Capsule	3	(QL)
Torpenz Tablet	1	(PA)(QL)(M)
Verzenio Tablet	4	(PA)(QL)(M)
Xtandi Tablet	4	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
OPHTHALMIC STEROIDS		
Dexameth Pho Solution	1	
Difluprednat Emu	2	(QL)
Fluoromethol Suspension	1	
Lotemax Sm Gel	3	(QL)
Loteprednol	2	(QL)
Neo/Poly/Dex	1	
Prednisolone	1	(QL)
Tobra/Dexame Suspension	1	
OPHTHALMICS (EYE) ANTI-INFECTIVES		
Bacit/Polymy Oin	1	
Ofloxacin Dro	1	
Polycin Oin	1	
Polymyxin B/ Solution	1	
Tobramycin Solution	1	
OPHTHALMICS (EYE) MISC. OPHTHALMICS		
Alphagan P 0.15%	2	(QL)(M)
Brimonidine 0.15%	1	(ST)(QL)(M)
Bromfenac Dro	2	
Combigan Solution	1	(QL)(M)
Diclofenac 3%	1	(M)
Dorzol/Timol Solution	1	(QL)(M)
Dorzolamide Solution	1	(M)
Ketorolac	1	(QL)
Klarity-C Emu	4	(PA)(QL)(M)
Simbrinza Suspension	3	(QL)(M)
Timolol Gel Solution	2	(M)
Timolol Mal Solution	1	(M)
Timolol Male Solution	2	(M)
OPHTHALMICS (EYE) PROSTGLANDINS		
Bimatoprost Solution	2	(QL)(M)
Latanoprost Solution	1	(QL)(M)
Lumigan Solution	2	(QL)(M)
Travoprost Dro	2	(ST)(QL)(M)
OPIOID ANTAGONISTS		
Naltrexone Tablet	1	
OPIOID PARTIAL AGONISTS		
Belbuca Mis	2	(QL)
Brixadi Solution	4	(QL)(M)
Bupren/Nalox	1	(QL)
Buprenorphin	2	(QL)
Butorphanol Solution	1	(QL)
Sublocade Injectable	4	(QL)(M)
OSTEOPOROSIS*		
Alendronate Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Calcitonin Spr	1	(M)
Ibandronate Tablet	1	(QL)(M)
Prolia Injectable	4	(QL)(M)
Risedronate Tablet	1	(ST)(QL)(M)
Tymlos Injectable	4	(PA)(M)
OTIC PREPARATIONS (EAR)		
Cipro/Dexa Suspension	2	
Neo/Poly/Hc	1	
OTIC STEROIDS		
Flac Oil	1	
Hc/Acet Acid Solution	1	
PAIN MEDICATIONS - NARCOTICS		
Apap/Codeine Tablet	1	(QL)
Ascomp/Cod Capsule	2	(QL)
Bac Tablet	1	(QL)
But/Apap/Caf	1	(QL)
But/Asa/Caf/ Capsule	2	(QL)
But/Asa/Caff Capsule	1	(QL)
Butal/Apap Tablet	1	(QL)
Butalb/Aceta Tablet	1	(QL)
Endocet Tablet	1	(QL)
Fentanyl Dis	3	(PA)(QL)
Hydro/Aceta Solution	1	
Hydroco/Apap	1	(QL)
Hydromorphon Tablet	1	(QL)
Meperidine Solution	1	(QL)
Methadone Tablet	1	(QL)
Morphine Sul	1	(QL)
Oxy-Acetamin Tablet	1	(QL)
Oxycod-Apap Tablet	1	(QL)
Oxycod/Apap Tablet	1	(QL)
Oxycodone	1	(QL)
Oxymorphone Tablet	3	(ST)(QL)
Tramadl/Apap Tablet	1	(QL)
Tramadol	1	(QL)
PAIN MEDICATIONS NSAIDS		
Celecoxib Capsule	1	(QL)(M)
Etodolac Tablet	1	
Ibu Tablet	1	(M)
Ibuprofen	1	(M)
Indomethacin Capsule	1	(M)
Meloxicam Tablet	1	(M)
Nabumetone Tablet	1	(M)
Naproxen Tablet	1	(M)
Naproxen Sod Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Piroxicam Capsule	1	(M)
Sulindac Tablet	1	
PANCREATIC ENZYME		
Creon Capsule	2	(QL)(M)
Pancreaze Capsule	2	(QL)(M)
Zenpep Capsule	2	(QL)(M)
PARKINSON'S		
Amantadine	1	(QL)(M)
Benzotropine Tablet	1	(QL)(M)
Bromocriptin Tablet	2	(QL)(M)
Carb/Levo Tablet	1	(QL)(M)
Carb/Levo 50 Tablet	1	(M)
Carb/Levo 75 Tablet	1	(M)
Carb/Levo Er Tablet	1	(QL)(M)
Carb/Levo100 Tablet	1	(M)
Carb/Levo125 Tablet	1	(M)
Carb/Levo150 Tablet	1	(M)
Carb/Levo200 Tablet	1	(M)
Pramipexole Tablet	1	(ST)(QL)(M)
Ropinirole Tablet	1	(QL)(M)
Trihexyphen Tablet	1	(QL)(M)
PHENOTHIAZINES		
Chlorpromaz Tablet	1	(M)
Perphenazine Tablet	1	(M)
Prochlorper Tablet	1	(M)
PHOSPHATE		
Phospha 250 Tablet	1	
Phospho-Trin Tablet	1	
Phosphorous Tablet	1	
Wes-Phos 250 Tablet	1	
PHOSPHATE BINDING AGENTS		
Calc Acetate Capsule	1	(M)
Sevelam Carb Tablet	1	(M)
POSTERIOR PITUITARY HORMONES		
Desmopressin	1	(QL)(M)
POTASSIUM		
Potassium Chloride	1	(M)
POTASSIUM REMOVING RESINS		
Lokelma Packet	2	(QL)(M)
PRENATAL VITAMINS		
Co-Natal Fa Tablet	3	
Complete Nat Packet	1	
M-Natal Plus Tablet	3	
Natalvit Tablet	3	
Neonatal Tablet	3	

Drug Name	Drug Tier	Requirements & Limits
Neonatal Pls Tablet	3	
Niva-Plus Tablet	3	
One Vite Tablet	3	
Pnv 27-Ca/Fe Tablet	3	
Prenatal Tablet	1	
Tricare Tablet	3	
Trinatal Rx Tablet	1	
Trinate Tablet	3	
Triveen-Duo Packet	1	
Vitafol-Ob Tablet	3	
Vitathely Tablet	3	
Wesnata Dha Packet	3	
Westab Plus Tablet	3	
PROLACTIN INHIBITORS		
Cabergoline Tablet	1	(QL)(M)
PROSTATE		
Alfuzosin Tablet	1	(QL)(M)
Dutasteride Capsule	1	(QL)(M)
Finasteride	1	(QL)(M)
Silodosin Capsule	1	(ST)(QL)(M)
Tadalafil Tablet	2	(PA)(ST)(QL)(M)
Tamsulosin Capsule	1	(QL)(M)
PULMONARY ARTERIAL HYPERTENSION		
Alyq Tablet	2	(PA)(QL)(M)
Ambrisentan Tablet	4	(PA)(QL)(M)
Sildenafil Tablet	1	(PA)(QL)
PYRIMIDINE SYNTHESIS INHIBITORS		
Leflunomide Tablet	1	(M)
RECTAL COMBINATIONS		
Hc Pramoxine Cream	1	
RECTAL STEROIDS		
Anucort-Hc Sup	1	
Anusol-Hc Sup	1	
Hemmorex-Hc Sup	1	
Hydrocort Ac Sup	1	
Procto-Med Cream	1	
Proctosol Hc Cream	1	
Proctozone Cream	1	
RESPIRATORY THERAPY SUPPLIES		
Aerosol Spacer	1	(QL)
SALICYLATES		
Aspirin	1	(QL)(M)(AGE)
SCABICIDES & PEDICULICIDES		
Permethrin Cream	1	
SEIZURE DISORDER		
Carbamazepin	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Clobazam	1	(QL)(M)
Clonazep Odt Tablet	1	(QL)(M)
Clonazepam Tablet	1	(QL)(M)
Dilantin Capsule	3	(ST)(QL)(M)
Divalproex Er	1	(QL)(M)
Epitol Tablet	1	(QL)(M)
Ethosuximide	1	(QL)(M)
Gabapentin	1	(QL)(M)
Lacosamide	1	(QL)(M)
Lamotrig Odt Tablet	1	(ST)(QL)(M)
Lamotrigine	1	(ST)(QL)(M)
Levetiraceta	1	(QL)(M)
Mysoline Tablet	3	(ST)(QL)(M)
Nayzilam Spr	3	(QL)
Oxcarbazepin	1	(QL)(M)
Phenobarb Tablet	1	(M)
Phenytek Capsule	1	(QL)(M)
Phenytoin Ex Capsule	1	(QL)(M)
Pregabalin Capsule	1	(QL)(M)
Primidone Tablet	1	(QL)(M)
Roweepra Tablet	1	(QL)(M)
Subvenite Tablet	1	(QL)(M)
Tegretol-Xr Tablet	3	(ST)(QL)(M)
Topamax Spr Capsule	3	(ST)(QL)(M)
Topiramate	1	(QL)(M)
Valproic Acd	1	(QL)(M)
Xcopri	3	(QL)(M)
Zonisamide Capsule	1	(QL)(M)
SEX HORMONES AND MODULATORS OF THE GENITAL SYSTEM		
Chor Gonadot Injectable	2	(PA)
Novarel Injectable	3	(PA)
Pregnyl Injectable	3	(PA)
SMOKING CESSATION		
Chantix Tablet	3	(QL)(M)(AGE)
Cvs Nicotine	1	(QL)(M)(AGE)
Eq Nicotine	1	(QL)(M)(AGE)
Ft Nicotine	1	(QL)(M)(AGE)
Gnp Nicotine	1	(QL)(M)(AGE)
Habitrol Dis	1	(QL)(M)(AGE)
Hm Nicotine	1	(QL)(M)(AGE)
Kls Quit2	1	(QL)(M)(AGE)
Kls Quit4	1	(QL)(M)(AGE)
Nicotine	1	(QL)(M)(AGE)
Nicotine Pol	1	(QL)(M)(AGE)

Drug Name	Drug Tier	Requirements & Limits
Nicotine Td Dis	1	(QL)(M)(AGE)
Qc Nicotine Dis	1	(QL)(M)(AGE)
Ra Nicotine	1	(QL)(M)(AGE)
Sm Nicotine	1	(QL)(M)(AGE)
Thrive Gum	1	(QL)(M)(AGE)
Varenicline Tablet	3	(QL)(M)(AGE)
SODIUM		
Sodium Chlor Solution	1	(PA)
STEROIDS		
Dexamethason	1	
Methylpred Tablet	1	
Pred Sod Pho Solution	1	
Prednisone Tablet	1	(M)
STIMULANTS - ADHD/WAKEFULNESS		
Amphet/Dextr	1	(QL)
Armodafinil Tablet	1	(QL)
Atomoxetine Capsule	1	(QL)(M)
Dexmethylphenidate Er	1	(QL)
Dextroamphet	1	(QL)
Lisdexamfeta Capsule	1	(QL)
Methylphenid	1	(QL)
Modafinil Tablet	1	(QL)
THROAT PRODUCTS - MISC.		
Cevimeline Capsule	2	
THYROID		
Adthyza Tablet	3	(M)
Armour Thyro Tablet	3	(M)
Euthyrox Tablet	1	(M)
Levo-T Tablet	1	(M)
Levothyroxin	3	(ST)(QL)(M)
Levoxyl Tablet	1	(M)
Liomny Tablet	1	(M)
Liothyronine Tablet	1	(M)
Niva Thyroid Tablet	3	(M)
Np Thyroid Tablet	3	(M)
Renthyroid Tablet	3	(M)
Thyroid Tablet	3	(M)
Unithroid Tablet	1	(M)
UNCATEGORIZED		
Droxidopa Capsule	3	(PA)(QL)
Fasenra Pen Injectable	4	(PA)(QL)(M)
Ivabradine Tablet	2	(ST)(QL)(M)
Nemluvio Injectable	4	(PA)(QL)(M)
Nexletol Tablet	2	(PA)(QL)(M)
Ofev Capsule	4	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Oxervate Solution	4	(PA)(QL)(M)
Tezspire	4	(PA)(QL)(M)
Tyrvaya Solution	3	(ST)(QL)(M)
Winrevair Injectable	4	(PA)(M)
URINARY ANALGESICS		
Phenazopyridine	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
Mirabegron Tablet	3	(ST)(QL)(M)
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
Bethanechol Tablet	1	(M)
URINARY INCONTINENCE		
Dicyclomine	1	(M)
Fesoterodine Tablet	2	(QL)(M)
Glycate Tablet	3	
Glycopyrrol Tablet	1	(M)
Glycopyrrola Solution	1	(ST)(QL)(M)
Hyoscyamine	1	(M)
Nulev Tablet	1	(M)
Oscimin	1	(M)
Oxybutynin	1	(QL)(M)
Solifenacin Tablet	1	(QL)(M)
Symax-SI Sub	1	(M)
Tolterodine	1	(QL)(M)
Trospium Chl Capsule	2	(QL)(M)
Trospium Cl Tablet	1	(QL)(M)
VACCINES		
Abrysvo Injectable	2	(QL)
Adacel Injectable	2	
Afluria Injectable	2	(M)
Arexvy Injectable	2	(QL)(AGE)
Bexsero Injectable	2	
Boostrix Injectable	2	
Capvaxive Injectable	2	(AGE)
Comirnaty Injectable	2	(QL)
Comirnaty 5- Injectable	2	(QL)
Engerix-B Injectable	2	
Fluad Injectable	2	(M)
Fluarix Injectable	2	(M)
Flublok Injectable	2	
Flucelvax Injectable	2	(M)
Flulaval Injectable	2	(M)
Flumist Nasa Liq	2	(M)
Fluzone Injectable	2	(M)
Fluzone Hd Injectable	2	(M)

Drug Name	Drug Tier	Requirements & Limits
Gardasil 9 Injectable	2	(AGE)
Havrix Injectable	2	
Heplisav-B Injectable	2	(QL)
Ipol Injectable	2	(AGE)
M-M-R II Injectable	2	
Menquadfi Injectable	2	
Menveo	2	
Mnexspike Injectable	2	(QL)
Moderna Injectable	2	(QL)(AGE)
Novavax Injectable	2	(QL)
Nuvaxovid Injectable	2	(QL)
Pfizer 5-11Y Injectable	2	(QL)
Pfizer 6M-4Y Injectable	2	(QL)
Pneumovax 23 Injectable	2	(AGE)
Pprevnar 20 Injectable	1	
Priorix Injectable	1	
Recombiva Hb Injectable	2	
Shingrix Injectable	2	(QL)(AGE)
Spikevax Injectable	2	(QL)(AGE)
Twinrix Injectable	2	
Vaqta Injectable	2	
Varivax Injectable	2	
VAGINAL ANTI-INFECTIVES		
Terconazole Cream	1	
VITAMINS/ELECTROLYTES		
Cyanocobalam	1	(M)
Dodex Injectable	1	(M)
Fe-Vite Iron Solution	1	(QL)(AGE)
Ferrous Sul Solution	1	(QL)(AGE)
Ferrous Sulf	1	(QL)(AGE)
Folate Tablet	1	(M)
Folic Acid Tablet	1	(M)
Ft Folic Aci Tablet	1	(M)
Iron Drops Dro	1	(QL)(AGE)
Iron Inf-Tod Dro	1	(QL)(AGE)
Iron Inf/Tod Dro	1	(QL)(AGE)
Iron Supplmt Dro	1	(QL)(AGE)
Iron Suppmnt Solution	1	(QL)(AGE)
Multi-Vit/FI	1	(M)
Pedia Iron Dro	1	(QL)(AGE)
Pediatric Dro	1	(QL)(AGE)
Pot Citra Er Tablet	1	
Sm Folic Acd Tablet	1	(M)
Sod Citrate Solution	1	
Vitamin D	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Yl Folic Aci Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
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