Plan for your best health

2021 Aetna Pharmacy Drug Guide

High Value Plan

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2021 Pharmacy Drug Guide - High Value Plan

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How to use this guide

Your guide includes a list of drugs covered on your pharmacy plan. The amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the prescription's price after you meet your deductible, if applicable. Preferred generic drugs cost less. Preferred brand drugs will have a higher cost.

Your plan includes

- Brand and generic drugs that are hand-picked for their quality and effectiveness
- A specialty pharmacy that fills specialty prescriptions (ones that are injected, infused or taken by mouth) — and provides services that include personal support, helpful resources and training, and free secure home delivery
- A home delivery pharmacy that delivers maintenance drugs to your home or wherever you choose (for drugs that are taken regularly to treat conditions like diabetes or asthma)

What you can expect to pay

With your pharmacy plan, the amount you pay depends on the drug your doctor prescribes. It's either a flat fee or a percentage of the drug's/medicine's price.

Each drug is grouped as a generic, a brand or a specialty drug. The preferred drugs within these groups will generally save you money compared to a non-preferred drug. Generic drugs are less expensive than brands.

Specialty prescription drugs typically include higher-cost drugs that require special handling, special storage or monitoring. These types of drugs may include, but are not limited to, drugs that are injected, infused, inhaled or taken by mouth.

You're covered for all types of medicine — some more expensive, and some less.

- **Preferred generic:** the lowest cost
- **Preferred brand:** a slightly higher cost
- **Preferred brand specialty:** cost for specialty drugs

Your pharmacy plan may not have all the coverage levels listed above so check your plan documents to see how much you will pay.

For your exact coverage and cost, and to learn more about your plan

Visit the website that's on your member ID card. Then log in to your account, where you can:

- Find out the coverage and estimate of cost for specific drugs
- View your deductibles and plan limits
- Order medications
- Check your pharmacy order status
- Get a member ID card
- View your claims, Explanation of Benefits and more

Have more questions about your pharmacy benefits?

We're here to help. There are several ways you can learn more about your benefits:

- Check your Plan Design and Benefits Summary in your enrollment kit.
- Call the toll-free number on your member ID card.
- Review our pharmacy frequently asked questions (FAQs) and answers. Just visit the website that's on your member ID card to search for the "Pharmacy FAQ."

Specialty Pharmacy Network

An in-network specialty pharmacy can fill your prescriptions for specialty drugs. These are the types of drugs that may be injected, infused or taken by mouth. They often need special storage and handling. And they need to be delivered quickly. A nurse or pharmacist may monitor you during your treatment, if needed. With this type of pharmacy, you can get this medicine sent right to your home.

How to get started with a specialty pharmacy

Ordering your prescriptions through our specialty pharmacy is easy. And we typically offer a 30-day medicine supply.

- **To transfer your prescription**, just call us toll-free at **1-866-353-1892**.
- **For a new prescription**, your doctor can send it to us in one of four ways:

  1. Electronically: Through e-prescribe

  2. Fax: 1-800-323-2445

  3. Phone: 1-800-237-2767

If you mail in your own prescription, please send it with a completed Patient Profile Form. To find this form, just visit the website that's on your member ID card, to search for the "Patient Profile Form."

CVS Caremark Mail Service Pharmacy™

You can have maintenance drugs sent right to your home or anywhere else you choose by CVS Caremark Mail Service Pharmacy. These are drugs that are taken regularly for chronic conditions like diabetes or asthma. Depending on your plan, you can get up to a 90-day supply of medicine for less cost. It's fast and convenient, and standard shipping is always free.

Get started right away

You can submit your order using one of these options:

1. **Online** — Visit your secure member website and sign in to your account. There you can add or remove your prescriptions.
2. **Phone** — Call us toll-free, 24/7 at **1-888-792-3862**. If you need the help of a telephone device for the hard of hearing, call **1-877-833-2779**.
3. **Mail** — Get a new prescription from your doctor. Then mail it to us with a completed order form. You can find the form on your secure member website. The mailing address is on the form.

Your doctor can submit your order using one of these options:

1. **Online** — They can submit your prescriptions using the e-prescribe services on our provider website.
2. **Fax** — They can fax your prescription to **1-877-270-3317**. Make sure they include your member ID number, date of birth and mailing address on the fax cover sheet. Only a doctor may fax a prescription.

Frequently asked questions

How can I save on prescriptions?

Here are some tips to pay less out of pocket for your prescription drugs:

- Ask your doctor to consider prescribing drugs that are on the Pharmacy Drug Guide (formulary).
- Ask your doctor to consider prescribing generic drugs instead of brand-name drugs.
- Check to see if your plan includes our home delivery pharmacy service. Depending upon your plan, our home delivery service may save you money. For more information, visit the website on your member ID card and log in to your account.
- Remind your doctor to check your plan to make sure you get maximum coverage.

What are generic drugs?

Generic drugs are proven to be just as safe and effective as brand-name drugs. They contain the same active ingredients in the same amounts as the brand-name drugs and work the same way. So they have the same risks and benefits as brand-name drugs. However, they typically cost less.

When appropriate, your doctor may decide to prescribe a generic drug or allow the pharmacist to substitute a generic drug.

What is precertification?

Precertification is one way that we can help you and your doctor find safe, appropriate drugs and keep costs down. Precertification means that you or your doctor need to get approval from the plan before certain drugs will be covered. Generally, precertification applies to drugs that:

- Are often taken in the wrong way
- Should only be used for certain conditions
- Often cost more than other drugs that are proven to be just as effective

Keep in mind that your doctor must contact us to request approval of coverage for these drugs.

What is step therapy?

Some drugs require step therapy. This means that you must try one or more prerequisite drug(s) before a step therapy drug is covered.

The prerequisite drugs are equally effective, have U.S. Food and Drug Administration (FDA) approval and may cost less. They treat the same condition as the step therapy drug.

If you don't try the appropriate prerequisite drug first, you may need to pay full cost for the step-therapy drug.

What are quantity limits?

Quantity limits help your doctor and pharmacist make sure that you use your drug correctly and safely. We use medical guidelines and FDA-approved recommendations from drug makers to set these coverage limits. The quantity limit program includes:

- **Dose efficiency edits** — Limits prescription coverage to one dose per day for drugs that have approval for once-daily dosing
- **Maximum daily dose** — If a prescription is lower than the minimum or higher than the maximum allowed dose, a message is sent to the pharmacy
- **Quantity limits over time** — Limits prescription coverage to a specific number of units over a specific amount of time

What if I need a drug that requires an exception to the precertification, step therapy or quantity limits requirements? Or what if I need a drug that's not covered under my plan?

In certain cases, you or your prescriber can request a medical exception to the precertification, step therapy or quantity limits requirements or for a drug that's not covered on your plan. You can ask for your request to be expedited. Expedited coverage decisions are made within 24 hours.

We'll then contact you or your prescriber with our decision. All medically necessary outpatient prescription drugs will be covered. If a medical exception is approved, you only need to pay the copay after the deductible. This amount is based on your pharmacy plan design.

How can your provider request a medical exception?

- Submit their request through our secure provider website on www.availity.com.
- Call the Aetna Pharmacy Precertification Unit: Non-Specialty **1-800-294-5979** or Non-Specialty **1-866-814-5506**.
- Fax the completed request form to: Non-Specialty **1-888-836-0730** or Specialty **1-866-249-6155**.
- Mail the completed request form to: Aetna Pharmacy Management 1300 East Campbell Road Richardson, TX 75081

How is the formulary (drug list) developed?

Our Pharmacy and Therapeutics Committee meets regularly to review new drugs and new information about current drugs. We review them for their safety, effectiveness and current use in therapy.

This committee includes licensed pharmacists and doctors. They are currently in practice or are Aetna employees.

Once we complete our clinical review, we also consider overall value before adding or removing a drug from the formulary. We may recommend moving a drug to a different coverage level. Or that it be placed on our Formulary Exclusions List and no longer be covered

Can the formulary change during the year?

The formulary can change throughout the year. Some reasons why it can change include:

- New drugs are approved.
- Existing drugs are removed from the market.
- Prescription drugs may become available over the counter (without a prescription). Over-the-counter drugs are not generally covered in a formulary.
- Brand-name drugs lose patent protection and generic versions become available. When this happens, the brand-name drug is likely to be covered at a higher cost. And the generic versions cost less. See the “What are generic drugs?” section above for more information.

Pharmacy and Therapeutics (P&T) committee

The services of an independent National Pharmacy and Therapeutics Committee (“P&T Committee”) are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee’s voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Voting members of the P&T Committee are not employees of CVS Caremark and must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

Commercial 1557 Nondiscrimination Notice

Aetna complies with applicable Federal civil rights laws and does not discriminate, exclude or treat people differently based on their race, color, national origin, sex, age, or disability.

Aetna provides free aids/services to people with disabilities and to people who need language assistance.

If you need a qualified interpreter, written information in other formats, translation or other services, call the number on your ID card.

If you believe we have failed to provide these services or otherwise discriminated based on a protected class noted above, you can also file a grievance with the Civil Rights Coordinator by contacting:

Civil Rights Coordinator,
P.O. Box 14462, Lexington, KY 40512 (CA HMO customers: PO Box 24030 Fresno, CA 93779),
1-800-648-7817, TTY: 711,
Fax: 859-425-3379 (CA HMO customers: 860-262-7705),
CRCoordinator@aetna.com.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or at:

U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC 20201, or at 1-800-368-1019, 800-537-7697 (TDD).

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TTY: 711

To access language services at no cost to you, call the number on your ID card.

Para acceder a los servicios de idiomas sin costo, llame al número que figura en su tarjeta de identificación. (Spanish)

如欲使用免費語言服務，請致電您 ID 卡上的電話號碼 (Chinese)

Afin d'accéder aux services langagiers sans frais, veuillez composer le numéro inscrit sur votre carte d'identité. (French)

Para ma-access ang mga serbisyo sa wika nang wala kayong babayaran, tawagan ang numero sa inyong ID card. (Tagalog)

T'áá ni nizaad k'ehjí bee níká a'doowoł doo bą́ą́h ílínígóó naaltsoos bee atah nílı̨́go nanitinígíí bee néého'dólzinígíí béésh bee hane'í bikáá' áajı̨' hólne'. (Navajo)

Um auf für Sie kostenlose Sprachdienstleistungen zuzugreifen, rufen Sie die Nummer auf Ihrer ID-Karte an. (German)

Për shërbime përkthimi falas për ju, telefononi në numrin që gjendet në kartën tuaj të identitetit. (Albanian)

የቋንቋ አገልግሎቶችን ያለክፍያ ለማግኘት፣ በመታወቂያዎት ላይ ያለውን ቁጥር ይደውሉ። (Amharic)

للحصول على الخدمات اللغوية دون أي تكلفة، الرجاء الاتصال على الرقم الموجود على بطاقتك الشخصية. (Arabic)

Անվճար լեզվական ծառայություններից օգտվելու համար զանգահարեք ձեր ինքնության (ID) քարտի վրա նշված հեռախոսահամարով: (Armenian)

Kugira uronke serivisi z'indimi atakiguzi, Hamagara inumero iri kuri karangamuntu kawe. (Bantu)

আপনাকে বিনামূল্যে ভাষা পরিষেবা পেতে হলে আপনার পরিচয়পত্রে দেওয়া নম্বরে টেলিফোন করুন। (Bengali)

Ngadto maakses ang mga serbisyo sa pinulongan alang libre, tawagan sa numero sa nimong ID card. (Bisayan-Visayan)

သင့်အနေဖြင့် အခကြေးငွေ မပေးရပဲ ဘာသာစကားဝန်ဆောင်မှုများ ရရှိနိုင်ရန်၊ သင့် ID ကတ်ပေါ်တွင်ရှိသော ဖုန်းနံပတ်အား ခေါ်ဆိုပါ။ (Burmese)

Per accedir a serveis lingüístics sense cap cost per vostè, telefoni al número indicat a la seva targeta d'identificació. (Catalan)

Para un hago' i setbision lengguåhi ni dibåtde para hågu, ågang i numiru gi iyo-mu kard aidentifikasion. (Chamorro)

ᏀᎩᏍᎫ ᎦᏬᏂᎯᏍᎫ ᎢᏮᎾᏓᏅᏘ Ꮭ ᎪᎢᏍᎫ ᏗGEGWᏁᏗ ᎣᎩ, ᏫᏨᎯᏰᎳᏫᏏ ᎾᏍᎩ Ꮧ4ᏍᎫ IrSAᏯP ᎤᎾᎢ ID ᎢᏂᏲᏍᎫ ᏀᏙPT. (Cherokee)

Anumpa tohsholi I toksvli ya peh pilla ho ish I paya hinla kvt chi holisso iskitini holhtena takanli ma I paya. (Choctaw)

Tajaajiiloota afaanii gatii bilisaa ati argaachuuf,lakkoofsa duugda waraaqaa eenyummaa (ID) kee irraa jiruun bilbili. (Cushite-Oromo)

Voor gratis toegang tot taaldiensten, bel het nummer op uw ID-kaart. (Dutch)

Pou jwenn sèvis lang gratis, rele nimewo telefòn ki sou kat idantite ou a. (French Creole-Haitian)

Για να επικοινωνήσετε χωρίς χρέωση με το κέντρο υποστήριξης πελατών στη γλώσσα σας, τηλεφωνήστε στον αριθμό που αναγράφεται στην κάρτα σας προνομίων μέλους. (Greek)

તમારે કોઇ જાતના ખર્ચ વિના ભાષાની સેવાઓની પહોંચ માટે, તમારા આઇડી કાર્ડ ઉપરના નંબરને કોલ કરો. (Gujarati)

No ka wala‘au ‘ana me ka lawelawe ‘ōlelo e kahea aku i ka helu kelepona ma kāu kāleka ID. Kāki ‘ole ‘ia kēia kōkua nei. (Hawaiian)

आपके लिए बिना किसी कीमत के भाषा सेवाओं का उपयोग करने के लिए, अपने आईडी कार्ड पर दिये नम्बर पर कॉल करें। (Hindi)

Xav tau kev pab txhais lus tsis muaj nqi them rau koj, hu tus naj npawb ntawm koj daim npav ID. (Hmong)

Iji nwetaòhèrè na ọrụ gasị asụsụ n'efu, kpọọ nọmba no na kaadị ID gị. (Ibo)

Tapno maaksesyo dagiti serbisio maipapan iti pagsasao nga awan ti bayadanyo, tawagan ti numero idiay ID cardyo. (Ilocano)

Untuk mengakses layanan bahasa tanpa dikenakan biaya, hubungi nomor telepon di kartu identitas Anda. (Indonesian)

Per accedere ai servizi linguistici, senza alcun costo per lei, chiami il numero sulla tessera identificativa. (Italian)

言語サービスを無料でご利用いただくには、IDカードに記載の番号にお電話ください。 (Japanese)

လ၊တ်ကမၤန္၊်ကျိဉ်အတ်ၢမစ၊ၤအတ်ၢဖံးတ်ၢမၤတဖဉ်လ၊ၤတအိဉ်ဒီးအပူၤလ၊ၤနကဘဉ်ဟူဉ်အီၤဘဉ်နှဉ်.ကိးဘဉ်လီတဲစိနီၢ်ဂ်ၢ်လ၊ၤအိဉ်လ၊ၤနတ်ၢ်ဂီၤဒိဉ် (ID) အခးလိၤန္ဉ်တက့ၢ် (Karen)

무료 언어 서비스를 이용하려면 보험 ID 카드에 수록된 번호로 전화해 주십시오. (Korean)

M̀ dyi wuɖu-dù kà kò ɖò ɓě dyi mɔ́uń nì pídyi ní, nìí, ɖá nɔ́ɓà nìà nì ID káàɔ̀ kɔ̃ɛ. (Kru-Bassa)

بۆ دەستپێڕاگەیشتن بە خزمەتگوزاری زمان بەبێ تێچوون بۆ تۆ، پەیوەندی بکە بە ژمارەی سەر ئای دی(ID) کارتی خوێت.
(Kurdish)

ເພື່ອເຂົ້າໃຊ້ການບໍລິການພາສາໂດຍບໍ່ເສຍຄ່າຕໍ່ກັບທ່ານ,
ໃຫ້ໂທຫາເບີໂທທີ່ບອກໄວ້ໃນບັດປະຈຳຕົວຂອງທ່ານ. (Laotian)

कोणत्याही शुल्काशिवाय भाषा सेवा प्राप्त करण्यासाठी, तुमच्या ID कार्डावरील क्रमांकावर फोन करा. (Marathi)

Nan etal nan jikin jiban ko ikijen kajin ilo an ejelok onen nan kwe, kirlok nomba eo ilo ID kaat eo am. (Marshallese)

Pwehn alehdi sawas en lokaia kan ni sohte pweipwei, koahlih nempe nan amhw doaropwe en ID. (Micronesian-Pohnpeian)

ដើម្បីទទួលបានសេវាកម្មភាសាដែលឥតគិតថ្លៃសម្រាប់លោកអ្នក សូមហៅទូរស័ព្ទទៅកាន់
លេខដែលមាននៅលើប័ណ្ណសម្គាល់ខ្លួនរបស់លោកអ្នក។ (Mon-Khmer, Cambodian)

निःशुल्क भाषा सेवा प्राप्त गर्न आफ्नो परिचयपत्रमा भएको नम्बरमा टेलिफोन गर्नुहोस् । (Nepali)

Të kɔɔr yïn wëër de thokic ke cïn wëu kɔr keek tënɔŋ yïn. Ke cɔl kɔc ye kɔc kuɔny në nɔmba de abac tɔ̈ në ID kard du kɔ̈u. (Nilotic-Dinka)

For tilgang til kostnadsfri språktjenester, ring nummeret på ID-kortet ditt. (Norwegian)

Um Schprooch Services zu griege mitaus Koscht, ruff die Nummer uff dei ID Kaart. (Pennsylvania Dutch)

برای دسترسی به خدمات زبان به طور رایگان، با شماره قید شده روی کارت شناسایی خود تماس بگیرید. (Persian-Farsi)

Aby uzyskać dostęp do bezpłatnych usług językowych proszę zadzwonić numer telefonu na Twojej Karcie Identykującej (Polish)

Para acessar os serviços de idiomas sem custo para você, ligue para o número que consta na sua identidade. (Portuguese)

ਤੁਹਾਡੇ ਲਈ ਬਿਨਾਂ ਕਿਸੇ ਕੀਮਤ ਵਾਲੀਆਂ ਭਾਸ਼ਾ ਸੇਵਾਵਾਂ ਦੀ ਵਰਤੋਂ ਕਰਨ ਲਈ, ਆਪਣੇ ਆਈਡੀ ਕਾਰਡ 'ਤੇ ਦਿੱਤੇ ਨੰਬਰ ਤੇ ਫ਼ੋਨ ਕਰੋ। (Punjabi)

Pentru a accesa gratuit serviciile de limbă, apelați numărul de pe cardul dvs. de identificare. (Romanian)

Для того чтобы бесплатно получить помощь переводчика, позвоните по телефону, приведенному на вашей карточке участника плана. (Russian)

Mo le mauaina o auaunaga tau gagana e aunoa ma se totogi, vala'au le numera I luga o lau pepa ID. (Samoan)

Za besplatne prevodilačke usluge pozovite broj naveden na Vašoj identifikacionoj kartici. (Serbo-Croatian)

Heeba a nasta jangirde djey wolde, apelou lamba djey do windi ha dereji Maada. (Sudanic-Fulfulde)

Kupata huduma za lugha bila malipo kwako, piga nambari iliyo kwenye kadi yako ya kitambulisho. (Swahili)

ܟܬܘܒ ܠܢ ܒܠܫܢܐ ܕܐܬܘܪܝܐ ܘܐܦ ܠܐ ܒܠܫܢ ܡܕܝܢܬܐ ܕܐܬܘܪ ܐܝܟ ܕܐܢ ܒܥܐ ܐܢܬ ܕܢܫܬܡܫ ܒܠܫܢ ܐܬܘܪ ܐܝ ܠܐ ܐܢ ܒܥܐ ܐܢܬ ܕܢܫܬܡܫ ܒܠܫܢ ܐܬܘܪ ܐܝ ܠܐ. (Syriac-Assyrian)

మీరు భాష సేవలను ఉచితంగా అందుకునేందుకు, మీ ID కార్డుపై ఉన్న నంబరుకు కాల్ చేయండి. (Telugu)

หากท่านต้องการเข้าถึงการบริการทางด้านภาษาโดยไม่มีค่าใช้จ่าย โปรดโทรหมายเลขที่แสดงอยู่บนบัตรประจำตัวของท่าน (Thai)

Kapau 'oku ke fiema'u ta'etōtōngi 'a e ngaahi sēvesi kotoa pē he ngaahi lea kotoa, telefoni ki he fika 'oku hā atu 'i ho'o ID kaati. (Tongan)

Ren omw kopwe angei aninisin eman chon awewei (ese kamo), kopwe kori ewe nampa mei mak won noum ena katen ID (Trukese)

Sizin için ücretsiz dil hizmetlerine erişebilmek için, kartınızdaki numarayı arayın. (Turkish)

Щоб отримати безкоштовний доступ до мовних послуг, задзвоніть за номером, вказаним на Вашій ідентифікайній картці. (Ukrainian)

بلاقیمت زبان سے متعلقہ خدمات حاصل کرنے کے لیے ، اپنے شناختی کارڈ پر درج نمبر پر بات کریں۔ (Urdu)

Nếu quý vị muốn sử dụng miễn phí các dịch vụ ngôn ngữ, hãy gọi tới số điện thoại ghi trên thẻ ID (Nhận dạng) của quý vị. (Vietnamese)

צוטריט שפראַך באַדינונגען אין קיין פריַז צו איר, רופן די נומער אויף דיין שיין קאָרט. (Yiddish)

Lati wọnú awọn isẹ èdè l'ọfẹ fun ọ, pe nọmba ori káádi idánimọ rẹ. (Yoruba)

Remember to visit the website on your member ID card.
Then sign in to your account for the most up-to-date information.

Please note that if your prescription drug benefits plan changes, the information here may no longer apply.

Medications on the Aetna Drug Guide, precertification, step-therapy and quantity limits lists are subject to change.

Not all health services are covered. Your plan may not cover certain drugs such as infertility, erectile dysfunction, weight loss and smoking cessation. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change.

The drugs on the Pharmacy Drug Guide (formulary), Formulary Exclusions, Precertification, and Quantity Limit Lists are subject to change. The quantity limits and step therapy drug coverage review programs are not available in all service areas. However, these programs are available to self-funded plans.

In accordance with state law, commercial fully insured members in Louisiana and Texas (except Federal Employee Health Benefit Plan members) who are receiving coverage for medications that are added or removed from the Pharmacy Drug Guide (formulary), Precertification, Quantity Limits or Step-Therapy Lists during the plan year will continue to have those medications covered at the same benefit level until their plan's renewal date. In Texas, precertification approval is known as "pre-service utilization review." It is not "verification" as defined by Texas law.

In accordance with state law, certain fully insured commercial California members (except Federal Employee Health Benefit Plan members) who obtained approval from an Aetna plan for coverage of drugs that are later added to the Preauthorization or Step Therapy Lists or removed from the Pharmacy Drug Guide will continue to have those drugs covered, for as long as the treating in-network provider continues prescribing them, provided that the drug is appropriately prescribed and is considered safe and effective for treating the enrollee's medical condition. Aetna reserves the right to periodically request clinical information from your provider to assess your medical condition and the appropriateness of your ongoing treatment. Failure to provide clinical information could result in subsequent denial of coverage for this medication.

In accordance with state law, fully insured Commercial Connecticut preferred provider organization (PPO) members (except Federal Employee Health Benefit Plan members) who are receiving coverage for drugs that are added to the Precertification or Step-Therapy Lists will continue to have those drugs covered for as long as the prescriber prescribes them, provided the drug is medically necessary and more medically beneficial than other covered drugs. Nothing in this section shall preclude the prescribing provider from prescribing another drug covered by the plan that is medically appropriate for the enrollee, nor shall anything in this section be construed to prohibit generic drug substitutions.

In certain states, including Arkansas, Colorado, Connecticut, Delaware, Georgia, Illinois, Louisiana, Maryland, Minnesota, North Dakota, Pennsylvania and Texas, step therapy programs do not apply to fully insured members utilizing prescription drugs for the treatment of stage-four advanced, metastatic cancer.

This material is for information only. It contains only a partial, general description of plan benefits or programs and does not constitute a contract. See plan documents for a complete description of benefits, exclusions, limitations and conditions of coverage. Plan features and availability may vary by location and are subject to change. Providers are independent contractors and are not agents of Aetna. Provider participation may change without notice. Aetna does not provide care or guarantee access to health services. Information is subject to change. CVS Caremark Mail Service Pharmacy is part of the CVS Health family of companies.

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lowercase italics = Generic drugs
UPPERCASE = Brand name drugs

Drug Tier
CE = Copay Exception: Available to some members at no cost with a prescription from your provider when obtained at an in-network pharmacy. Certain limitations may apply.
PB = Preferred Brand
PBSP = Preferred Brand Specialty
PG = Preferred Generic

Drug Notes
IBC = Indication Based Coverage
LGC = Lowest Generic Copay Applies
N8 = Drug Specific Coverage
SPC = Select Plan Coverage: Only available for select plans. Refer to member plan documents for coverage.

Prescription Drug Name	Drug Tier	Drug Notes
ANALGESICS		
COX-2 INHIBITORS		
celecoxib oral capsule 100 mg, 200 mg, 50 mg	PG	
GOUT		
allopurinol oral tablet 100 mg, 300 mg	PG	
colchicine oral tablet 0.6 mg	PG	
colchicine-probenecid oral tablet 0.5-500 mg	PG	
febuxostat oral tablet 40 mg, 80 mg	PG	
MITIGARE ORAL CAPSULE 0.6 MG (*colchicine*)	PB	
probenecid oral tablet 500 mg	PG	
MISCELLANEOUS		
butalbital-acetaminophen oral capsule 50-300 mg	PG	
NON-OPIOID ANALGESICS		
butalbital-apap-caffeine (Bac Oral Tablet 50-325-40 Mg)	PG	
butalbital-acetaminophen oral tablet 50-325 mg	PG	
butalbital-apap-caffeine oral capsule 50-300-40 mg, 50-325-40 mg	PG	
butalbital-apap-caffeine oral tablet 50-325-40 mg	PG	
butalbital-aspirin-caffeine oral capsule 50-325-40 mg	PG	
butalbital-apap-caffeine (Esgic Oral Capsule 50-325-40 Mg)	PG	
TENCON ORAL TABLET 50-325 MG (*butalbital-acetaminophen*)	PG	
butalbital-apap-caffeine (Zebutal Oral Capsule 50-325-40 Mg)	PG	
NSAIDS		
diclofenac potassium oral tablet 50 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
diclofenac sodium er oral tablet extended release 24 hour 100 mg	PG	
diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg	PG	
etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg	PG	
etodolac oral capsule 200 mg, 300 mg	PG	
etodolac oral tablet 400 mg, 500 mg	PG	
flurbiprofen oral tablet 100 mg, 50 mg	PG	
ibuprofen oral suspension 100 mg/5ml	PG	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	PG	
ketoprofen oral capsule 50 mg, 75 mg	PG	
ketorolac tromethamine injection solution 15 mg/ml	PG	
ketorolac tromethamine injection solution 30 mg/ml	PBSP	
ketorolac tromethamine intramuscular solution 60 mg/2ml	PG	
ketorolac tromethamine oral tablet 10 mg	PG	
meclofenamate sodium oral capsule 100 mg, 50 mg	PG	
meloxicam oral tablet 15 mg, 7.5 mg	PG	
nabumetone oral tablet 500 mg, 750 mg	PG	
naproxen oral tablet 250 mg, 375 mg, 500 mg	PG	
naproxen oral tablet delayed release 375 mg, 500 mg	PG	
naproxen sodium oral tablet 275 mg, 550 mg	PG	
oxaprozin oral tablet 600 mg	PG	
piroxicam oral capsule 10 mg, 20 mg	PG	
sulindac oral tablet 150 mg, 200 mg	PG	
tolmetin sodium oral capsule 400 mg	PG	
tolmetin sodium oral tablet 600 mg	PG	
NSAIDS, COMBINATIONS		
diclofenac-misoprostol oral tablet delayed release 50-0.2 mg, 75-0.2 mg	PG	
OPIOID AGONIST/ANTAGONIST		
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg, 8-2 mg	PG	
OPIOID ANALGESICS		
acetaminophen-codeine oral solution 120-12 mg/5ml	PG	
acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg	PG	
apap-caff-dihydrocodeine oral capsule 320.5-30-16 mg	PG	
butalbital-asa-caff-codeine (Ascomp-Codeine Oral Capsule 50-325-40-30 Mg)	PG	
butalbital-apap-caff-cod oral capsule 50-300-40-30 mg, 50-325-40-30 mg	PG	
butalbital-asa-caff-codeine oral capsule 50-325-40-30 mg	PG	
butorphanol tartrate nasal solution 10 mg/ml	PG	
codeine sulfate oral tablet 30 mg	PG	
codeine sulfate oral tablet 60 mg	PBSP	
oxycodone-acetaminophen (Endocet Oral Tablet 10-325 Mg, 2.5-325 Mg, 5-325 Mg, 7.5-325 Mg)	PG	
fentanyl citrate buccal lozenge on a handle 1200 mcg, 1600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg	PG	
fentanyl citrate buccal tablet 200 mcg, 400 mcg, 600 mcg, 800 mcg	PG	
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr	PG	
hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	PG	
hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml	PG	
hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg, 5-300 mg, 5-325 mg, 7.5-300 mg, 7.5-325 mg	PG	
hydrocodone-ibuprofen oral tablet 10-200 mg, 5-200 mg, 7.5-200 mg	PG	
hydromorphone hcl er oral tablet extended release 24 hour 12 mg, 16 mg, 32 mg, 8 mg	PG	
hydromorphone hcl oral liquid 1 mg/ml	PG	
hydromorphone hcl oral tablet 2 mg, 4 mg, 8 mg	PG	
levorphanol tartrate oral tablet 3 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
meperidine hcl oral solution 50 mg/5ml	PG	
meperidine hcl oral tablet 50 mg	PG	
methadone hcl (Methadone Hcl Intensol Oral Concentrate 10 Mg/Ml)	PG	
methadone hcl oral concentrate 10 mg/ml	PG	
methadone hcl oral solution 10 mg/5ml, 5 mg/5ml	PG	
methadone hcl oral tablet 10 mg, 5 mg	PG	
methadone hcl oral tablet soluble 40 mg	PG	
methadone hcl (Methadose Oral Tablet Soluble 40 Mg)	PG	
morphine sulfate (concentrate) oral solution 20 mg/ml, 5 mg/0.25ml	PG	
morphine sulfate er beads oral capsule extended release 24 hour 120 mg, 30 mg, 45 mg, 60 mg, 75 mg, 90 mg	PG	
morphine sulfate er oral capsule extended release 24 hour 10 mg, 100 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 80 mg	PG	
morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	PG	
morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml	PG	
morphine sulfate oral tablet 15 mg, 30 mg	PG	
morphine sulfate rectal suppository 10 mg, 20 mg, 30 mg, 5 mg	PG	
oxycodone hcl er oral tablet er 12 hour abuse-deterrent 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	PG	
oxycodone hcl oral capsule 5 mg	PG	
oxycodone hcl oral concentrate 100 mg/5ml	PG	
oxycodone hcl oral solution 5 mg/5ml	PG	
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	PG	
oxycodone-acetaminophen oral tablet 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg	PG	
oxycodone-aspirin oral tablet 4.8355-325 mg	PG	
oxymorphone hcl oral tablet 10 mg, 5 mg	PG	
PROLATE ORAL TABLET 10-300 MG, 5-300 MG, 7.5-300 MG (*oxycodone-acetaminophen*)	PG	
tramadol hcl er (biphasic) oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg	PG	
tramadol hcl oral tablet 50 mg	PG	
tramadol-acetaminophen oral tablet 37.5-325 mg	PG	
TREZIX ORAL CAPSULE 320.5-30-16 MG (*apap-caff-dihydrocodeine*)	PG	
XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG (*oxycodone*)	PB	
OPIOID PARTIAL AGONISTS		
BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG (*buprenorphine hcl*)	PB	
buprenorphine hcl sublingual tablet sublingual 2 mg, 8 mg	PG	
buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr	PG	
pentazocine-naloxone hcl oral tablet 50-0.5 mg	PG	
SALICYLATES		
diflunisal oral tablet 500 mg	PG	
salsalate oral tablet 500 mg, 750 mg	PG	
ANTI-INFECTIVES		
ANTI-BACTERIALS - MISCELLANEOUS		
BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML (*tobramycin*)	PBSP	
neomycin sulfate oral tablet 500 mg	PG	
paromomycin sulfate oral capsule 250 mg	PG	
tinidazole oral tablet 250 mg, 500 mg	PG	
tobramycin inhalation nebulization solution 300 mg/5ml	PBSP	
ANTIFUNGALS		
bio-statin oral powder	PG	
fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml	PG	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	PG	
flucytosine oral capsule 250 mg	PG	
griseofulvin microsize oral suspension 125 mg/5ml	PG	
griseofulvin microsize oral tablet 500 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	PG	
itraconazole oral capsule 100 mg	PG	
itraconazole oral solution 10 mg/ml	PG	
ketoconazole oral tablet 200 mg	PG	
nystatin oral tablet 500000 unit	PG	
terbinafine hcl oral tablet 250 mg	PG	
VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML (*voriconazole*)	PB	
VFEND ORAL TABLET 200 MG, 50 MG (*voriconazole*)	PB	
voriconazole oral suspension reconstituted 40 mg/ml	PG	
voriconazole oral tablet 200 mg, 50 mg	PG	
ANTI-INFECTIVES - MISCELLANEOUS		
albendazole oral tablet 200 mg	PG	
atovaquone oral suspension 750 mg/5ml	PG	
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	PG	
clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml	PG	
dapsone oral tablet 100 mg, 25 mg	PG	
EMVERM ORAL TABLET CHEWABLE 100 MG (*mebendazole*)	PB	
ivermectin oral tablet 3 mg	PG	
linezolid oral suspension reconstituted 100 mg/5ml	PG	
linezolid oral tablet 600 mg	PG	
methenamine hippurate oral tablet 1 gm	PG	
methenamine mandelate oral tablet 0.5 gm, 1 gm	PG	
metronidazole oral capsule 375 mg	PG	
metronidazole oral tablet 250 mg, 500 mg	PG	
nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg	PG	
nitrofurantoin monohyd macro oral capsule 100 mg	PG	
praziquantel oral tablet 600 mg	PG	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	PG	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	PG	
sulfamethoxazole-trimethoprim (Sulfatrim Pediatric Oral Suspension 200-40 Mg/5Ml)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
trimethoprim oral tablet 100 mg	PG	
vancomycin hcl oral capsule 125 mg, 250 mg	PG	
XIFAXAN ORAL TABLET 550 MG (*rifaximin*)	PB	
ANTIMALARIALS		
atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg	PG	
chloroquine phosphate oral tablet 250 mg, 500 mg	PG	
mefloquine hcl oral tablet 250 mg	PG	
primaquine phosphate oral tablet 26.3 mg	PBSP	
quinine sulfate oral capsule 324 mg	PG	
ANTIRETROVIRAL AGENTS		
abacavir sulfate oral solution 20 mg/ml	PBSP	
abacavir sulfate oral tablet 300 mg	PBSP	
atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg	PBSP	
EDURANT ORAL TABLET 25 MG (*rilpivirine hcl*)	PBSP	
efavirenz oral capsule 200 mg, 50 mg	PBSP	
efavirenz oral tablet 600 mg	PBSP	
EMTRIVA ORAL CAPSULE 200 MG (*emtricitabine*)	PBSP	
EMTRIVA ORAL SOLUTION 10 MG/ML (*emtricitabine*)	PBSP	
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED 90 MG (*enfuvirtide*)	PBSP	
INTELENCE ORAL TABLET 100 MG, 200 MG, 25 MG (*etravirine*)	PBSP	
ISENTRESS HD ORAL TABLET 600 MG (*raltegravir potassium*)	PBSP	
ISENTRESS ORAL PACKET 100 MG (*raltegravir potassium*)	PBSP	
ISENTRESS ORAL TABLET 400 MG (*raltegravir potassium*)	PBSP	
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG (*raltegravir potassium*)	PBSP	
lamivudine oral solution 10 mg/ml	PBSP	
lamivudine oral tablet 150 mg, 300 mg	PBSP	
nevirapine er oral tablet extended release 24 hour 100 mg, 400 mg	PBSP	
nevirapine oral suspension 50 mg/5ml	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
nevirapine oral tablet 200 mg	PBSP	
NORVIR ORAL PACKET 100 MG (*ritonavir*)	PBSP	
NORVIR ORAL SOLUTION 80 MG/ML (*ritonavir*)	PBSP	
NORVIR ORAL TABLET 100 MG (*ritonavir*)	PBSP	
PREZISTA ORAL SUSPENSION 100 MG/ML (*darunavir ethanolate*)	PBSP	
PREZISTA ORAL TABLET 150 MG, 600 MG, 75 MG, 800 MG (*darunavir ethanolate*)	PBSP	
ritonavir oral tablet 100 mg	PBSP	
stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg	PBSP	
tenofovir disoproxil fumarate oral tablet 300 mg	PBSP	
TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG (*dolutegravir sodium*)	PBSP	
TIVICAY PD ORAL TABLET SOLUBLE 5 MG (*dolutegravir sodium*)	PBSP	
zidovudine oral capsule 100 mg	PBSP	
zidovudine oral syrup 50 mg/5ml	PBSP	
zidovudine oral tablet 300 mg	PBSP	
ANTIRETROVIRAL COMBINATION AGENTS		
abacavir sulfate-lamivudine oral tablet 600-300 mg	PBSP	
abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg	PBSP	
ATRIPLA ORAL TABLET 600-200-300 MG (*efavirenz-emtricitab-tenofovir*)	PBSP	
BIKTARVY ORAL TABLET 50-200-25 MG (*bictegravir-emtricitab-tenofov*)	PBSP	
CIMDUO ORAL TABLET 300-300 MG (*lamivudine-tenofovir*)	PBSP	
DESCOVY ORAL TABLET 200-25 MG (*emtricitabine-tenofovir af*)	PBSP	
DOVATO ORAL TABLET 50-300 MG (*dolutegravir-lamivudine*)	PBSP	
EVOTAZ ORAL TABLET 300-150 MG (*atazanavir-cobicistat*)	PBSP	
GENVOYA ORAL TABLET 150-150-200-10 MG (*elviteg-cobic-emtricit-tenofaf*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
KALETRA ORAL TABLET 100-25 MG, 200-50 MG (*lopinavir-ritonavir*)	PBSP	
lamivudine-zidovudine oral tablet 150-300 mg	PBSP	
lopinavir-ritonavir oral solution 400-100 mg/5ml	PBSP	
ODEFSEY ORAL TABLET 200-25-25 MG (*emtricitab-rilpivir-tenofov af*)	PBSP	
PREZCOBIX ORAL TABLET 800-150 MG (*darunavir-cobicistat*)	PBSP	
SYMFI LO ORAL TABLET 400-300-300 MG (*efavirenz-lamivudine-tenofovir*)	PBSP	
SYMFI ORAL TABLET 600-300-300 MG (*efavirenz-lamivudine-tenofovir*)	PBSP	
SYMTUZA ORAL TABLET 800-150-200-10 MG (*darun-cobic-emtricit-tenofaf*)	PB	
TRIUMEQ ORAL TABLET 600-50-300 MG (*abacavir-dolutegravir-lamivud*)	PBSP	
TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG (*emtricitabine-tenofovir df*)	PBSP	
ANTITUBERCULAR AGENTS		
cycloserine oral capsule 250 mg	PG	
ethambutol hcl oral tablet 100 mg, 400 mg	PG	
isoniazid oral syrup 50 mg/5ml	PG	
isoniazid oral tablet 100 mg, 300 mg	PG	
PRIFTIN ORAL TABLET 150 MG (*rifapentine*)	PB	
pyrazinamide oral tablet 500 mg	PG	
rifabutin oral capsule 150 mg	PG	
rifampin oral capsule 150 mg, 300 mg	PG	
TRECATOR ORAL TABLET 250 MG (*ethionamide*)	PB	
ANTIVIRALS		
acyclovir oral capsule 200 mg	PG	
acyclovir oral suspension 200 mg/5ml	PG	
acyclovir oral tablet 400 mg, 800 mg	PG	
adefovir dipivoxil oral tablet 10 mg	PBSP	
BARACLUDE ORAL SOLUTION 0.05 MG/ML (*entecavir*)	PBSP	
diclofenac sodium external gel 3 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
entecavir oral tablet 0.5 mg, 1 mg	PBSP	
famciclovir oral tablet 125 mg, 250 mg, 500 mg	PG	
lamivudine oral tablet 100 mg	PBSP	
oseltamivir phosphate oral capsule 30 mg, 45 mg, 75 mg	PG	
oseltamivir phosphate oral suspension reconstituted 6 mg/ml	PG	
ribavirin inhalation solution reconstituted 6 gm	PG	
rimantadine hcl oral tablet 100 mg	PG	
valacyclovir hcl oral tablet 1 gm, 500 mg	PG	
valganciclovir hcl oral solution reconstituted 50 mg/ml	PG	
valganciclovir hcl oral tablet 450 mg	PG	
VEMLIDY ORAL TABLET 25 MG (*tenofovir alafenamide fumarate*)	PB	
CEPHALOSPORINS		
cefaclor oral capsule 250 mg, 500 mg	PG	
cefaclor oral suspension reconstituted 125 mg/5ml, 250 mg/5ml, 375 mg/5ml	PG	
cefadroxil oral capsule 500 mg	PG	
cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml	PG	
cefadroxil oral tablet 1 gm	PG	
cefdinir oral capsule 300 mg	PG	
cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	PG	
cefixime oral capsule 400 mg	PG	
cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	PG	
cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml	PG	
cefpodoxime proxetil oral tablet 100 mg, 200 mg	PG	
cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	PG	
cefprozil oral tablet 250 mg, 500 mg	PG	
cefuroxime axetil oral tablet 250 mg, 500 mg	PG	
cephalexin oral capsule 250 mg, 500 mg, 750 mg	PG	
cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	PG	
cephalexin oral tablet 250 mg, 500 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
ERYTHROMYCINS/MACROLIDES		
azithromycin oral packet 1 gm	PG	
azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	PG	
azithromycin oral tablet 250 mg, 500 mg, 600 mg	PG	
clarithromycin er oral tablet extended release 24 hour 500 mg	PG	
clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	PG	
clarithromycin oral tablet 250 mg, 500 mg	PG	
DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML (*fidaxomicin*)	PB	
DIFICID ORAL TABLET 200 MG (*fidaxomicin*)	PB	
E.E.S. 400 ORAL TABLET 400 MG (*erythromycin ethylsuccinate*)	PG	
erythromycin base (Ery-Tab Oral Tablet Delayed Release 250 Mg, 333 Mg, 500 Mg)	PG	
ERYTHROCIN STEARATE ORAL TABLET 250 MG (*erythromycin stearate*)	PG	
erythromycin base oral capsule delayed release particles 250 mg	PG	
erythromycin base oral tablet 250 mg, 500 mg	PG	
erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml, 400 mg/5ml	PG	
erythromycin ethylsuccinate oral tablet 400 mg	PG	
erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg	PG	
FLUOROQUINOLONES		
CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%) (*ciprofloxacin*)	PB	
ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg	PG	
levofloxacin oral solution 25 mg/ml	PG	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	PG	
moxifloxacin hcl oral tablet 400 mg	PG	
ofloxacin oral tablet 300 mg, 400 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
HEPATITIS C		
EPCLUSA ORAL TABLET 200-50 MG (*sofosbuvir-velpatasvir*)	PBSP	
EPCLUSA ORAL TABLET 400-100 MG (*sofosbuvir-velpatasvir*)	PBSP	IBC (Preferred for all genotypes)
HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG (*ledipasvir-sofosbuvir*)	PBSP	
HARVONI ORAL TABLET 45-200 MG, 90-400 MG (*ledipasvir-sofosbuvir*)	PBSP	IBC (Preferred for genotypes 1,4,5,6)
ribavirin oral capsule 200 mg	PBSP	
ribavirin oral tablet 200 mg	PBSP	
VOSEVI ORAL TABLET 400-100-100 MG (*sofosbuv-velpatasv-voxilaprev*)	PBSP	IBC (Preferred for all genotypes)
PENICILLINS		
amoxicillin oral capsule 250 mg, 500 mg	PG	
amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	PG	
amoxicillin oral tablet 500 mg, 875 mg	PG	
amoxicillin oral tablet chewable 125 mg, 250 mg	PG	
amoxicillin-pot clavulanate er oral tablet extended release 12 hour 1000-62.5 mg	PG	
amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	PG	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	PG	
amoxicillin-pot clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg	PG	
ampicillin oral capsule 500 mg	PG	
ampicillin sodium intravenous solution reconstituted 10 gm	PG	
AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML (*amoxicillin-pot clavulanate*)	PB	
dicloxacillin sodium oral capsule 250 mg, 500 mg	PG	
penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml	PG	
penicillin v potassium oral tablet 250 mg, 500 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
TETRACYCLINES		
avidoxy oral tablet 100 mg	PG	
demeclocycline hcl oral tablet 150 mg, 300 mg	PG	
doxycycline hyclate oral capsule 100 mg, 50 mg	PG	
doxycycline hyclate oral tablet 100 mg, 20 mg	PG	
doxycycline hyclate oral tablet delayed release 100 mg, 150 mg, 75 mg	PG	
doxycycline monohydrate oral capsule 100 mg, 50 mg	PG	
doxycycline monohydrate oral suspension reconstituted 25 mg/5ml	PG	
doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg	PG	
minocycline hcl oral capsule 100 mg, 50 mg, 75 mg	PG	
minocycline hcl oral tablet 100 mg, 50 mg, 75 mg	PG	
doxycycline monohydrate (Mondoxyne Nl Oral Capsule 100 Mg)	PG	
doxycycline hyclate (Morgidox Oral Capsule 100 Mg)	PG	
tetracycline hcl oral capsule 250 mg, 500 mg	PG	
ANTINEOPLASTIC AGENTS		
ALKYLATING AGENTS		
cyclophosphamide oral capsule 25 mg, 50 mg	PG	
EMCYT ORAL CAPSULE 140 MG (*estramustine phosphate sodium*)	PB	
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG (*lomustine*)	PB	
GLIADEL WAFER IMPLANT WAFER 7.7 MG (*carmustine in polifeprosan*)	PBSP	
LEUKERAN ORAL TABLET 2 MG (*chlorambucil*)	PB	
melphalan oral tablet 2 mg	PG	
MYLERAN ORAL TABLET 2 MG (*busulfan*)	PB	
temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg	PBSP	
ANTIMETABOLITES		
capecitabine oral tablet 150 mg, 500 mg	PBSP	
decitabine intravenous solution reconstituted 50 mg	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
mercaptopurine oral tablet 50 mg	PG	
methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml	PBSP	
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	PBSP	
methotrexate sodium injection solution reconstituted 1 gm	PBSP	
methotrexate sodium oral tablet 2.5 mg	PG	
TABLOID ORAL TABLET 40 MG (*thioguanine*)	PB	
ANTINEOPLASTIC, BCL-2 INHIBITORS		
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG (*venetoclax*)	PBSP	
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG (*venetoclax*)	PBSP	
BIOLOGIC RESPONSE MODIFIERS		
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG (*palbociclib*)	PBSP	
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG (*palbociclib*)	PBSP	
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (*ribociclib succinate*)	PBSP	
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (*ribociclib succinate*)	PBSP	
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG (*ribociclib succinate*)	PBSP	
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (*ribociclib-letrozole*)	PBSP	
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (*ribociclib-letrozole*)	PBSP	
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK 200 & 2.5 MG (*ribociclib-letrozole*)	PBSP	
LYNPARZA ORAL TABLET 100 MG, 150 MG (*olaparib*)	PBSP	
PERJETA INTRAVENOUS SOLUTION 420 MG/14ML (*pertuzumab*)	PBSP	
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG (*rucaparib camsylate*)	PBSP	
RYDAPT ORAL CAPSULE 25 MG (*midostaurin*)	PBSP	
ZEJULA ORAL CAPSULE 100 MG (*niraparib tosylate*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
ZOLINZA ORAL CAPSULE 100 MG (*vorinostat*)	PBSP	
HORMONAL ANTINEOPLASTIC AGENTS		
abiraterone acetate oral tablet 250 mg	PBSP	
anastrozole oral tablet 1 mg	CE	
bicalutamide oral tablet 50 mg	PG	
ELIGARD SUBCUTANEOUS KIT 30 MG (*leuprolide acetate (4 month)*)	PBSP	
ELIGARD SUBCUTANEOUS KIT 45 MG (*leuprolide acetate (6 month)*)	PB	
ERLEADA ORAL TABLET 60 MG (*apalutamide*)	PBSP	
exemestane oral tablet 25 mg	CE	
flutamide oral capsule 125 mg	PG	
fulvestrant intramuscular solution 250 mg/5ml	PBSP	
letrozole oral tablet 2.5 mg	PG	
leuprolide acetate injection kit 1 mg/0.2ml	PBSP	
LYSODREN ORAL TABLET 500 MG (*mitotane*)	PB	
megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 625 mg/5ml	PG	
megestrol acetate oral tablet 20 mg, 40 mg	PG	
nilutamide oral tablet 150 mg	PG	
NUBEQA ORAL TABLET 300 MG (*darolutamide*)	PBSP	
tamoxifen citrate oral tablet 10 mg, 20 mg	CE	
toremifene citrate oral tablet 60 mg	PG	
XTANDI ORAL CAPSULE 40 MG (*enzalutamide*)	PBSP	
YONSA ORAL TABLET 125 MG (*abiraterone acetate*)	PBSP	
KINASE INHIBITORS		
AFINITOR DISPERZ ORAL TABLET SOLUBLE 2 MG, 3 MG, 5 MG (*everolimus*)	PBSP	
AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG (*everolimus*)	PBSP	
ALUNBRIG ORAL TABLET 180 MG, 30 MG, 90 MG (*brigatinib*)	PBSP	
BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG (*bosutinib*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG (*cabozantinib s-malate*)	PBSP	
CALQUENCE ORAL CAPSULE 100 MG (*acalabrutinib*)	PBSP	
CAPRELSA ORAL TABLET 100 MG, 300 MG (*vandetanib*)	PBSP	
COPIKTRA ORAL CAPSULE 15 MG, 25 MG (*duvelisib*)	PBSP	
erlotinib hcl oral tablet 100 mg, 150 mg, 25 mg	PBSP	
imatinib mesylate oral tablet 100 mg, 400 mg	PBSP	
IMBRUVICA ORAL CAPSULE 140 MG, 70 MG (*ibrutinib*)	PBSP	
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG, 560 MG (*ibrutinib*)	PBSP	
IRESSA ORAL TABLET 250 MG (*gefitinib*)	PBSP	
SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG (*dasatinib*)	PBSP	
SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG (*sunitinib malate*)	PBSP	
TUKYSA ORAL TABLET 150 MG, 50 MG (*tucatinib*)	PBSP	
TYKERB ORAL TABLET 250 MG (*lapatinib ditosylate*)	PBSP	
VOTRIENT ORAL TABLET 200 MG (*pazopanib hcl*)	PBSP	
XOSPATA ORAL TABLET 40 MG (*gilteritinib fumarate*)	PBSP	
MISCELLANEOUS		
bexarotene oral capsule 75 mg	PBSP	
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG (*hydroxyurea*)	PB	
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG (*afatinib dimaleate*)	PBSP	
hydroxyurea oral capsule 500 mg	PG	
MATULANE ORAL CAPSULE 50 MG (*procarbazine hcl*)	PB	
ODOMZO ORAL CAPSULE 200 MG (*sonidegib phosphate*)	PBSP	
PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML (*pertuz-trastuz-hyaluron-zzxf*)	PBSP	
TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED 50 MG (*bcg live*)	PBSP	
tretinoin oral capsule 10 mg	PG	
VISTOGARD ORAL PACKET 10 GM (*uridine triacetate*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
PROTEASOME INHIBITORS		
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG (*ixazomib citrate*)	PBSP	
VELCADE INJECTION SOLUTION RECONSTITUTED 3.5 MG (*bortezomib*)	PBSP	
PROTECTIVE AGENTS		
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg	PG	
MESNEX ORAL TABLET 400 MG (*mesna*)	PB	
TOPOISOMERASE INHIBITORS		
etoposide oral capsule 50 mg	PBSP	
CARDIOVASCULAR		
ACE INHIBITOR COMBINATIONS		
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	PG	LGC
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	PG	LGC
captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	PG	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	PG	LGC
fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg	PG	LGC
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	PG	LGC
quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	PG	LGC
trandolapril-verapamil hcl er oral tablet extended release 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	PG	
ACE INHIBITORS		
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	PG	LGC
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	PG	LGC
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	PG	LGC
fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg	PG	LGC
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	PG	LGC
lisinopril oral tablet 30 mg, 40 mg	PG	
moexipril hcl oral tablet 15 mg, 7.5 mg	PG	
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	PG	LGC

Prescription Drug Name	Drug Tier	Drug Notes
quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	PG	LGC
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	PG	LGC
trandolapril oral tablet 1 mg, 2 mg, 4 mg	PG	LGC
ALDOSTERONE RECEPTOR ANTAGONISTS		
eplerenone oral tablet 25 mg, 50 mg	PG	
ALPHA BLOCKERS		
doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg	PG	
prazosin hcl oral capsule 1 mg, 2 mg, 5 mg	PG	
terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg	PG	LGC
ANGIOTENSIN II RECEPTOR ANTAGONIST COMBINATIONS		
amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	PG	LGC
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	PG	LGC
amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg	PG	LGC
candesartan cilexetil-hctz oral tablet 16-12.5 mg, 32-12.5 mg, 32-25 mg	PG	LGC
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg	PG	LGC
losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	PG	LGC
olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	PG	LGC
olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	PG	LGC
telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg	PG	LGC
telmisartan-hctz oral tablet 40-12.5 mg, 80-12.5 mg, 80-25 mg	PG	LGC
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	PG	LGC
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan cilexetil oral tablet 16 mg, 32 mg, 4 mg, 8 mg	PG	LGC
irbesartan oral tablet 150 mg, 300 mg, 75 mg	PG	LGC
losartan potassium oral tablet 100 mg, 25 mg, 50 mg	PG	LGC

Prescription Drug Name	Drug Tier	Drug Notes
olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg	PG	LGC
telmisartan oral tablet 20 mg, 40 mg, 80 mg	PG	LGC
valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg	PG	LGC
ANTIARRHYTHMICS		
amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg	PG	
disopyramide phosphate oral capsule 100 mg, 150 mg	PG	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	PBSP	
flecainide acetate oral tablet 100 mg, 150 mg, 50 mg	PG	
mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg	PG	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 150 MG (*disopyramide phosphate*)	PB	
amiodarone hcl (Pacerone Oral Tablet 100 Mg, 200 Mg, 400 Mg)	PG	
propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg	PG	
propafenone hcl oral tablet 150 mg, 225 mg, 300 mg	PG	
quinidine gluconate er oral tablet extended release 324 mg	PG	
quinidine sulfate oral tablet 200 mg, 300 mg	PG	
sotalol hcl (Sorine Oral Tablet 120 Mg, 80 Mg)	PG	LGC
sotalol hcl (Sorine Oral Tablet 160 Mg, 240 Mg)	PG	
sotalol hcl (af) oral tablet 120 mg	PG	LGC
sotalol hcl (af) oral tablet 160 mg, 80 mg	PG	
sotalol hcl oral tablet 120 mg, 80 mg	PG	LGC
sotalol hcl oral tablet 160 mg, 240 mg	PG	
ANTILIPEMICS, BILE ACID RESINS		
cholestyramine light oral packet 4 gm	PG	
cholestyramine light oral powder 4 gm/dose	PG	
cholestyramine oral packet 4 gm	PG	
cholestyramine oral powder 4 gm/dose	PG	
colesevelam hcl oral packet 3.75 gm	PG	
colesevelam hcl oral tablet 625 mg	PG	
colestipol hcl oral granules 5 gm	PG	
colestipol hcl oral packet 5 gm	PG	
colestipol hcl oral tablet 1 gm	PG	

Prescription Drug Name	Drug Tier	Drug Notes
cholestyramine light (Prevalite Oral Packet 4 Gm)	PG	
cholestyramine light (Prevalite Oral Powder 4 Gm/Dose)	PG	
ANTILIPEMICS, CHOLESTEROL ABSORPTION INHIBITOR		
ezetimibe oral tablet 10 mg	PG	
ANTILIPEMICS, FIBRATES		
fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg	PG	
fenofibrate oral capsule 150 mg	PG	
fenofibrate oral tablet 145 mg, 48 mg, 54 mg	PG	
fenofibrate oral tablet 160 mg	PBSP	
fenofibric acid oral capsule delayed release 135 mg, 45 mg	PG	
fenofibric acid oral tablet 105 mg	PG	
gemfibrozil oral tablet 600 mg	PG	LGC
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS		
atorvastatin calcium oral tablet 10 mg, 20 mg	CE	LGC
atorvastatin calcium oral tablet 40 mg, 80 mg	PG	LGC
fluvastatin sodium er oral tablet extended release 24 hour 80 mg	PG	
fluvastatin sodium oral capsule 20 mg, 40 mg	PG	
lovastatin oral tablet 10 mg, 20 mg, 40 mg	PG	LGC
pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	PG	LGC
rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg	PG	LGC
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg	CE	LGC
simvastatin oral tablet 80 mg	PG	LGC
ANTILIPEMICS, HMG-COA REDUCTASE INHIBITORS/COMBINATIONS		
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	PG	
ANTILIPEMICS, MISCELLANEOUS		
niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg	PG	
NIACOR ORAL TABLET 500 MG (*niacin (antihyperlipidemic)*)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
ANTILIPEMICS, OMEGA-3 FATTY ACIDS		
omega-3-acid ethyl esters oral capsule 1 gm	PG	
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM (*icosapent ethyl*)	PB	
ANTILIPEMICS, PCSK9 INHIBITORS		
PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML (*alirocumab*)	PBSP	
BETA-BLOCKER/DIURETIC COMBINATIONS		
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	PG	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	PG	LGC
metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg	PG	
propranolol-hctz oral tablet 40-25 mg, 80-25 mg	PG	
BETA-BLOCKERS		
acebutolol hcl oral capsule 200 mg, 400 mg	PG	
atenolol oral tablet 100 mg, 25 mg, 50 mg	PG	LGC
betaxolol hcl oral tablet 10 mg, 20 mg	PG	
bisoprolol fumarate oral tablet 10 mg, 5 mg	PG	
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	PG	LGC
carvedilol phosphate er oral capsule extended release 24 hour 10 mg, 20 mg, 40 mg, 80 mg	PG	
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	PG	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg	PG	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	PG	LGC
metoprolol tartrate oral tablet 37.5 mg, 75 mg	PG	
nadolol oral tablet 20 mg, 40 mg, 80 mg	PG	
pindolol oral tablet 10 mg, 5 mg	PG	
propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg	PG	
propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml	PG	
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 80 mg	PG	LGC
propranolol hcl oral tablet 60 mg	PG	
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
CALCIUM CHANNEL BLOCKER/ANTILIPEMIC COMBINATIONS		
amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg	PG	LGC
CALCIUM CHANNEL BLOCKERS		
amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg	PG	LGC
CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG (*diltiazem hcl coated beads*)	PB	
diltiazem hcl coated beads (Cartia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg)	PG	
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	PG	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	PG	
diltiazem hcl er coated beads oral tablet extended release 24 hour 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	PG	
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg	PG	
diltiazem hcl intravenous solution 25 mg/5ml	PG	
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	PG	LGC
dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	PG	
felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	PG	
isradipine oral capsule 2.5 mg, 5 mg	PG	
diltiazem hcl coated beads (Matzim La Oral Tablet Extended Release 24 Hour 180 Mg, 240 Mg, 300 Mg, 360 Mg, 420 Mg)	PG	
nicardipine hcl oral capsule 20 mg, 30 mg	PG	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	PG	
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	PG	
nifedipine oral capsule 10 mg, 20 mg	PG	
nimodipine oral capsule 30 mg	PG	
nisoldipine er oral tablet extended release 24 hour 17 mg, 20 mg, 25.5 mg, 30 mg, 34 mg, 40 mg, 8.5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
diltiazem hcl er beads (Taztia Xt Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg, 360 Mg)	PG	
diltiazem hcl er beads (Tiadylt Er Oral Capsule Extended Release 24 Hour 120 Mg, 180 Mg, 240 Mg, 300 Mg, 360 Mg, 420 Mg)	PG	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg	PG	
verapamil hcl er oral tablet extended release 120 mg	PG	LGC
verapamil hcl er oral tablet extended release 180 mg, 240 mg	PG	
verapamil hcl intravenous solution 2.5 mg/ml	PG	
verapamil hcl oral tablet 120 mg, 40 mg, 80 mg	PG	LGC
DIGITALIS GLYCOSIDES		
digoxin (Digitek Oral Tablet 125 Mcg, 250 Mcg)	PG	
digoxin (Digox Oral Tablet 125 Mcg, 250 Mcg)	PG	
digoxin oral solution 0.05 mg/ml	PG	
digoxin oral tablet 125 mcg, 250 mcg	PG	
LANOXIN ORAL TABLET 62.5 MCG (*digoxin*)	PB	
DIRECT RENIN INHIBITORS/COMBINATIONS		
aliskiren fumarate oral tablet 150 mg, 300 mg	PG	
DIURETICS		
acetazolamide er oral capsule extended release 12 hour 500 mg	PG	
acetazolamide oral tablet 125 mg, 250 mg	PG	
ALDACTAZIDE ORAL TABLET 50-50 MG (*spironolactone-hctz*)	PB	
amiloride hcl oral tablet 5 mg	PG	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	PG	LGC
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	PG	
chlorthalidone oral tablet 25 mg, 50 mg	PG	
ethacrynic acid oral tablet 25 mg	PG	
furosemide oral solution 10 mg/ml, 8 mg/ml	PG	
furosemide oral tablet 20 mg, 40 mg, 80 mg	PG	LGC
hydrochlorothiazide oral capsule 12.5 mg	PG	LGC
hydrochlorothiazide oral tablet 12.5 mg	PG	
hydrochlorothiazide oral tablet 25 mg, 50 mg	PG	LGC

Prescription Drug Name	Drug Tier	Drug Notes
indapamide oral tablet 1.25 mg, 2.5 mg	PG	
methazolamide oral tablet 25 mg, 50 mg	PG	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	PG	
spironolactone oral tablet 100 mg, 50 mg	PG	
spironolactone oral tablet 25 mg	PG	LGC
spironolactone-hctz oral tablet 25-25 mg	PG	
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	PG	
triamterene oral capsule 100 mg, 50 mg	PG	
triamterene-hctz oral capsule 37.5-25 mg	PG	LGC
triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg	PG	LGC
MISCELLANEOUS		
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	PG	LGC
clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr	PG	
CORLANOR ORAL SOLUTION 5 MG/5ML (*ivabradine hcl*)	PB	
CORLANOR ORAL TABLET 5 MG, 7.5 MG (*ivabradine hcl*)	PB	
ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG (*sacubitril-valsartan*)	PB	
guanfacine hcl oral tablet 1 mg, 2 mg	PG	
hydralazine hcl injection solution 20 mg/ml	PG	
hydralazine hcl oral tablet 10 mg, 100 mg, 50 mg	PG	
hydralazine hcl oral tablet 25 mg	PG	LGC
methyldopa oral tablet 250 mg, 500 mg	PG	
methyldopa-hydrochlorothiazide oral tablet 250-15 mg, 250-25 mg	PG	
midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg	PG	
minoxidil oral tablet 10 mg, 2.5 mg	PG	
phenoxybenzamine hcl oral capsule 10 mg	PG	
ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg	PG	
NITRATES		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg	PG	
isosorbide mononitrate oral tablet 10 mg, 20 mg	PG	
nitroglycerin (Minitran Transdermal Patch 24 Hour 0.1 Mg/Hr, 0.2 Mg/Hr, 0.4 Mg/Hr, 0.6 Mg/Hr)	PG	
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR (*nitroglycerin*)	PB	
nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg	PG	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	PG	
nitroglycerin translingual solution 0.4 mg/spray	PG	
PULMONARY ARTERIAL HYPERTENSION		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG (*riociguat*)	PBSP	
tadalafil (pah) (Alyq Oral Tablet 20 Mg)	PBSP	
ambrisentan oral tablet 10 mg, 5 mg	PBSP	
bosentan oral tablet 125 mg, 62.5 mg	PBSP	
epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg	PBSP	
OPSUMIT ORAL TABLET 10 MG (*macitentan*)	PBSP	
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG (*treprostinil diolamine*)	PBSP	
sildenafil citrate oral suspension reconstituted 10 mg/ml	PBSP	
sildenafil citrate oral tablet 20 mg	PBSP	
tadalafil (pah) oral tablet 20 mg	PBSP	
treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml	PBSP	
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG (*selexipag*)	PBSP	
UPTRAVI ORAL TABLET THERAPY PACK 200 & 800 MCG (*selexipag*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
CENTRAL NERVOUS SYSTEM		
ANTIANXIETY		
alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg	PG	
ALPRAZOLAM INTENSOL ORAL CONCENTRATE 1 MG/ML (*alprazolam*)	PB	
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	PG	
alprazolam oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg	PG	
alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg, 2 mg, 3 mg	PG	
chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg	PG	
diazepam oral concentrate 5 mg/ml	PG	
lorazepam oral concentrate 2 mg/ml	PG	
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	PG	
meprobamate oral tablet 200 mg, 400 mg	PG	
oxazepam oral capsule 10 mg, 15 mg, 30 mg	PG	
ANTICONVULSANTS		
carbamazepine er oral capsule extended release 12 hour 100 mg, 300 mg	PG	
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg	PG	
carbamazepine oral suspension 100 mg/5ml	PG	
carbamazepine oral tablet 200 mg	PG	
carbamazepine oral tablet chewable 100 mg	PG	
clobazam oral suspension 2.5 mg/ml	PG	
clobazam oral tablet 10 mg, 20 mg	PG	
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	PG	
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	PG	
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	PG	
diazepam oral solution 5 mg/5ml	PG	
diazepam oral tablet 10 mg, 2 mg, 5 mg	PG	
diazepam rectal gel 10 mg, 2.5 mg, 20 mg	PG	
DILANTIN ORAL CAPSULE 30 MG (*phenytoin sodium extended*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg	PG	
divalproex sodium oral capsule delayed release sprinkle 125 mg	PG	
divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg	PG	
carbamazepine (Epitol Oral Tablet 200 Mg)	PG	
ethosuximide oral capsule 250 mg	PG	
ethosuximide oral solution 250 mg/5ml	PG	
felbamate oral suspension 600 mg/5ml	PG	
felbamate oral tablet 400 mg, 600 mg	PG	
gabapentin oral capsule 100 mg, 300 mg, 400 mg	PG	
gabapentin oral solution 250 mg/5ml, 300 mg/6ml	PG	
gabapentin oral tablet 600 mg, 800 mg	PG	
lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	PG	
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	PG	
lamotrigine oral tablet chewable 25 mg, 5 mg	PG	
lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg	PG	
lamotrigine starter kit-blue oral kit 35 x 25 mg	PG	
lamotrigine starter kit-green oral kit 84 x 25 mg & 14x100 mg	PG	
lamotrigine starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg	PG	
levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg	PG	
levetiracetam oral solution 100 mg/ml	PG	
levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg	PG	
oxcarbazepine oral suspension 300 mg/5ml	PG	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	PG	
phenobarbital oral elixir 20 mg/5ml	PG	
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	PG	
phenytoin oral suspension 125 mg/5ml	PG	
phenytoin oral tablet chewable 50 mg	PG	
phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg	PG	
pregabalin oral solution 20 mg/ml	PG	
primidone oral tablet 250 mg, 50 mg	PG	
levetiracetam (Roweepra Oral Tablet 500 Mg)	PG	
lamotrigine (Subvenite Oral Tablet 100 Mg, 150 Mg, 200 Mg, 25 Mg)	PG	
lamotrigine (Subvenite Starter Kit-Blue Oral Kit 35 X 25 Mg)	PG	
lamotrigine (Subvenite Starter Kit-Green Oral Kit 84 X 25 Mg & 14X100 Mg)	PG	
lamotrigine (Subvenite Starter Kit-Orange Oral Kit 42 X 25 Mg & 7 X 100 Mg)	PG	
tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg	PG	
topiramate oral capsule sprinkle 15 mg, 25 mg	PG	
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	PG	
valproic acid oral capsule 250 mg	PG	
valproic acid oral solution 250 mg/5ml	PG	
vigabatrin oral packet 500 mg	PBSP	
vigabatrin oral tablet 500 mg	PBSP	
vigabatrin (Vigadrone Oral Packet 500 Mg)	PBSP	
zonisamide oral capsule 100 mg, 25 mg, 50 mg	PG	
ANTIDEMENTIA		
donepezil hcl oral tablet 10 mg, 23 mg, 5 mg	PG	
donepezil hcl oral tablet dispersible 10 mg, 5 mg	PG	
ergoloid mesylates oral tablet 1 mg	PG	
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg	PG	
galantamine hydrobromide oral solution 4 mg/ml	PG	
galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg	PG	
memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg	PG	
memantine hcl oral solution 10 mg/5ml, 2 mg/ml	PG	
memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg, 5 mg	PG	
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr	PG	
ANTIDEPRESSANTS		
amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	PG	
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	PG	
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg	PG	
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg	PG	
bupropion hcl oral tablet 100 mg, 75 mg	PG	
citalopram hydrobromide oral solution 10 mg/5ml	PG	
citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg	PG	LGC
desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	PG	
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	PG	
doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	PG	
doxepin hcl oral concentrate 10 mg/ml	PG	
duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 40 mg, 60 mg	PG	
escitalopram oxalate oral solution 5 mg/5ml	PG	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	PG	
fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg	PG	LGC
fluoxetine hcl oral capsule delayed release 90 mg	PG	
fluoxetine hcl oral solution 20 mg/5ml	PG	
fluoxetine hcl oral tablet 10 mg, 20 mg	PG	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	PG	
imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg	PG	
maprotiline hcl oral tablet 25 mg, 50 mg, 75 mg	PG	
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	PG	
mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	PG	
nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	PG	
nortriptyline hcl oral solution 10 mg/5ml	PG	
paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg	PG	
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	PG	LGC
phenelzine sulfate oral tablet 15 mg	PG	
protriptyline hcl oral tablet 10 mg, 5 mg	PG	
sertraline hcl oral concentrate 20 mg/ml	PG	
sertraline hcl oral tablet 100 mg, 25 mg, 50 mg	PG	LGC
tranylcypromine sulfate oral tablet 10 mg	PG	
trazodone hcl oral tablet 100 mg, 150 mg, 300 mg, 50 mg	PG	
trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg	PG	
venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg	PG	
venlafaxine hcl er oral tablet extended release 24 hour 150 mg, 225 mg, 37.5 mg, 75 mg	PG	
venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	PG	
ANTIPARKINSONIAN AGENTS		
amantadine hcl oral capsule 100 mg	PG	
amantadine hcl oral syrup 50 mg/5ml	PG	
amantadine hcl oral tablet 100 mg	PG	
benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg	PG	
bromocriptine mesylate oral capsule 5 mg	PG	
bromocriptine mesylate oral tablet 2.5 mg	PG	
carbidopa oral tablet 25 mg	PG	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	PG	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	PG	
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	PG	
entacapone oral tablet 200 mg	PG	
INBRIJA INHALATION CAPSULE 42 MG (*levodopa*)	PBSP	
pramipexole dihydrochloride er oral tablet extended release 24 hour 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg	PG	
pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	PG	
rasagiline mesylate oral tablet 0.5 mg, 1 mg	PG	
ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg	PG	
ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	PG	
selegiline hcl oral capsule 5 mg	PG	
selegiline hcl oral tablet 5 mg	PG	
tolcapone oral tablet 100 mg	PG	
trihexyphenidyl hcl oral solution 0.4 mg/ml	PG	
trihexyphenidyl hcl oral tablet 2 mg, 5 mg	PG	
ANTIPSYCHOTICS		
aripiprazole oral solution 1 mg/ml	PG	
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	PG	
aripiprazole oral tablet dispersible 10 mg, 15 mg	PG	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML (*aripiprazole lauroxil*)	PB	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML, 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML (*aripiprazole lauroxil*)	PB	
chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	PG	
clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg	PG	
clozapine oral tablet dispersible 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg	PG	
fluphenazine decanoate injection solution 25 mg/ml	PG	
fluphenazine hcl injection solution 2.5 mg/ml	PG	
fluphenazine hcl oral concentrate 5 mg/ml	PG	

Prescription Drug Name	Drug Tier	Drug Notes
fluphenazine hcl oral elixir 2.5 mg/5ml	PG	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	PG	
haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml	PG	
haloperidol lactate injection solution 5 mg/ml	PG	
haloperidol lactate oral concentrate 2 mg/ml	PG	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	PG	
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	PG	
molindone hcl oral tablet 10 mg, 25 mg, 5 mg	PG	
olanzapine intramuscular solution reconstituted 10 mg	PG	
olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg	PG	
olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg	PG	
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 6 mg, 9 mg	PG	
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	PG	
prochlorperazine edisylate injection solution 10 mg/2ml, 50 mg/10ml	PG	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg	PG	
quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg	PG	
risperidone oral solution 1 mg/ml	PG	
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	PG	
risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	PG	
thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg	PG	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	PG	
trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg	PG	
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	PG	
ATTENTION DEFICIT HYPERACTIVITY DISORDER		
amphetamine er oral suspension extended release 1.25 mg/ml	PG	
amphetamine sulfate oral tablet 10 mg, 5 mg	PG	
amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg	PG	N8 (Listing does not include certain NDCs)

Prescription Drug Name	Drug Tier	Drug Notes
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg	PG	
atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg	PG	
clonidine hcl er oral tablet extended release 12 hour 0.1 mg	PG	
dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg	PG	
dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg, 15 mg, 5 mg	PG	
dextroamphetamine sulfate oral solution 5 mg/5ml	PG	
dextroamphetamine sulfate oral tablet 10 mg, 5 mg	PG	
guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg, 4 mg	PG	
methamphetamine hcl oral tablet 5 mg	PG	
methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	PG	
methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg, 60 mg	PG	
methylphenidate hcl er oral tablet extended release 10 mg, 20 mg	PG	
methylphenidate hcl er oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg	PG	N8 (Listing does not include certain NDCs)
methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 36 mg, 54 mg	PG	
methylphenidate hcl oral solution 10 mg/5ml, 5 mg/5ml	PG	
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	PG	
methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg	PG	
dextroamphetamine sulfate (Zenzedi Oral Tablet 10 Mg, 5 Mg)	PG	
ZENZEDI ORAL TABLET 15 MG, 2.5 MG, 20 MG, 30 MG, 7.5 MG (*dextroamphetamine sulfate*)	PG	
HYPNOTICS		
doxepin hcl oral tablet 3 mg, 6 mg	PG	
estazolam oral tablet 1 mg, 2 mg	PG	
eszopiclone oral tablet 1 mg, 2 mg, 3 mg	PG	
flurazepam hcl oral capsule 15 mg, 30 mg	PG	
midazolam hcl oral syrup 2 mg/ml	PG	

Prescription Drug Name	Drug Tier	Drug Notes
ramelteon oral tablet 8 mg	PG	
temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg	PG	
triazolam oral tablet 0.125 mg, 0.25 mg	PG	
zaleplon oral capsule 10 mg, 5 mg	PG	
zolpidem tartrate er oral tablet extended release 12.5 mg, 6.25 mg	PG	
zolpidem tartrate oral tablet 10 mg, 5 mg	PG	
zolpidem tartrate sublingual tablet sublingual 1.75 mg, 3.5 mg	PG	
MIGRAINE		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML (*erenumab-aooe*)	PB	
almotriptan malate oral tablet 12.5 mg, 6.25 mg	PG	
dihydroergotamine mesylate injection solution 1 mg/ml	PG	
eletriptan hydrobromide oral tablet 20 mg, 40 mg	PG	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (*galcanezumab-gnlm*)	PB	
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML (*galcanezumab-gnlm*)	PB	
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML (*galcanezumab-gnlm*)	PB	
frovatriptan succinate oral tablet 2.5 mg	PG	
naratriptan hcl oral tablet 1 mg, 2.5 mg	PG	
rizatriptan benzoate oral tablet 10 mg, 5 mg	PG	
rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg	PG	
sumatriptan nasal solution 20 mg/act, 5 mg/act	PG	
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	PG	
sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml, 6 mg/0.5ml	PG	
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	PG	
sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml	PG	
sumatriptan succinate subcutaneous solution prefilled syringe 6 mg/0.5ml	PG	
zolmitriptan oral tablet 2.5 mg, 5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
zolmitriptan oral tablet dispersible 2.5 mg, 5 mg	PG	
MISCELLANEOUS		
AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG (*deutetrabenazine*)	PBSP	
buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	PG	
caffeine citrate intravenous solution 60 mg/3ml	PG	
caffeine citrate oral solution 20 mg/ml, 60 mg/3ml	PG	
clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg	PG	
fluvoxamine maleate er oral capsule extended release 24 hour 100 mg, 150 mg	PG	
fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg	PG	
INGREZZA ORAL CAPSULE 40 MG, 80 MG (*valbenazine tosylate*)	PBSP	
INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG (*valbenazine tosylate*)	PBSP	
lithium carbonate er oral tablet extended release 300 mg, 450 mg	PG	
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	PG	
lithium carbonate oral tablet 300 mg	PG	
pimozide oral tablet 1 mg, 2 mg	PG	
pyridostigmine bromide er oral tablet extended release 180 mg	PG	
pyridostigmine bromide oral solution 60 mg/5ml	PG	
pyridostigmine bromide oral tablet 60 mg	PG	
riluzole oral tablet 50 mg	PG	
SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG (*milnacipran hcl*)	PB	
SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG (*milnacipran hcl*)	PB	
tetrabenazine oral tablet 12.5 mg, 25 mg	PBSP	
MULTIPLE SCLEROSIS AGENTS		
AUBAGIO ORAL TABLET 14 MG, 7 MG (*teriflunomide*)	PBSP	
BETASERON SUBCUTANEOUS KIT 0.3 MG (*interferon beta-1b*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML, 40 MG/ML (*glatiramer acetate*)	PBSP	
dalfampridine er oral tablet extended release 12 hour 10 mg	PBSP	
dimethyl fumarate oral capsule delayed release 120 mg, 240 mg	PG	
dimethyl fumarate starter pack oral 120 & 240 mg	PG	
GILENYA ORAL CAPSULE 0.5 MG (*fingolimod hcl*)	PBSP	
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml, 40 mg/ml	PBSP	
glatiramer acetate (Glatopa Subcutaneous Solution Prefilled Syringe 20 Mg/Ml, 40 Mg/Ml)	PBSP	
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML (*ofatumumab*)	PBSP	
MAYZENT ORAL TABLET 0.25 MG, 2 MG (*siponimod fumarate*)	PBSP	
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 0.25 MG (*siponimod fumarate*)	PBSP	
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML (*interferon beta-1a*)	PBSP	
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG (*interferon beta-1a*)	PBSP	
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML (*interferon beta-1a*)	PBSP	
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG (*interferon beta-1a*)	PBSP	
TECFIDERA ORAL 120 & 240 MG (*dimethyl fumarate*)	PBSP	
TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG (*dimethyl fumarate*)	PBSP	
TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML (*natalizumab*)	PBSP	
VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG (*diroximel fumarate*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK 4 X 0.23MG & 3 X 0.46MG (*ozanimod hcl*)	PBSP	
ZEPOSIA ORAL CAPSULE 0.92 MG (*ozanimod hcl*)	PBSP	
ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG & 0.46MG & 0.92MG (*ozanimod hcl*)	PBSP	
MUSCULOSKELETAL THERAPY AGENTS		
baclofen oral tablet 10 mg, 20 mg, 5 mg	PG	
carisoprodol oral tablet 250 mg, 350 mg	PG	
carisoprodol-aspirin-codeine oral tablet 200-325-16 mg	PG	
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	PG	
dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg	PG	
metaxalone oral tablet 800 mg	PG	
orphenadrine citrate er oral tablet extended release 12 hour 100 mg	PG	
tizanidine hcl oral capsule 2 mg, 4 mg, 6 mg	PG	
tizanidine hcl oral tablet 2 mg, 4 mg	PG	
NARCOLEPSY/CATAPLEXY		
armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg	PG	
methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg	PG	
modafinil oral tablet 100 mg, 200 mg	PG	
POLYNEUROPATHY		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML (*inotersen sodium*)	PBSP	
PSYCHOTHERAPEUTIC-MISC		
acamprosate calcium oral tablet delayed release 333 mg	PG	
bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg	CE	
CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG (*varenicline tartrate*)	CE	
CHANTIX ORAL TABLET 0.5 MG, 1 MG (*varenicline tartrate*)	CE	
CHANTIX STARTING MONTH PAK ORAL TABLET 0.5 MG X 11 & 1 MG X 42 (*varenicline tartrate*)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg	PG	
disulfiram oral tablet 250 mg, 500 mg	PG	
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	PG	
naloxone hcl injection solution cartridge 0.4 mg/ml	PG	
naloxone hcl injection solution prefilled syringe 2 mg/2ml	PG	
naltrexone hcl oral tablet 50 mg	PG	
NARCAN NASAL LIQUID 4 MG/0.1ML (*naloxone hcl*)	PB	
olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 3-25 mg, 6-25 mg, 6-50 mg	PG	
perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	PG	
VISCOSUPPLEMENTS		
DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE 60 MG/3ML (*sodium hyaluronate (viscosup)*)	PBSP	
EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML (*sodium hyaluronate (viscosup)*)	PBSP	
GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16.8 MG/2ML (*sodium hyaluronate (viscosup)*)	PB	
SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML (*sodium hyaluronate (viscosup)*)	PB	
ENDOCRINE AND METABOLIC		
ANDROGENS		
methyltestosterone oral capsule 10 mg	PG	
oxandrolone oral tablet 10 mg, 2.5 mg	PG	
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml	PG	
testosterone enanthate intramuscular solution 200 mg/ml	PG	
testosterone transdermal gel 1.62 %, 10 mg/act (2%), 12.5 mg/act (1%), 20.25 mg/1.25gm (1.62%), 25 mg/2.5gm (1%), 40.5 mg/2.5gm (1.62%), 50 mg/5gm (1%)	PG	
testosterone transdermal solution 30 mg/act	PG	

Prescription Drug Name	Drug Tier	Drug Notes
ANTIDIABETICS, ALPHA-GLUCOSIDASE INHIBITORS		
acarbose oral tablet 100 mg, 25 mg, 50 mg	PG	
miglitol oral tablet 100 mg, 25 mg, 50 mg	PG	
ANTIDIABETICS, AMYLIN ANALOGS		
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR 2700 MCG/2.7ML (*pramlintide acetate*)	PB	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR 1500 MCG/1.5ML (*pramlintide acetate*)	PB	
ANTIDIABETICS, BIGUANIDE		
metformin hcl er oral tablet extended release 24 hour 500 mg	PG	LGC
metformin hcl er oral tablet extended release 24 hour 750 mg	PG	
metformin hcl oral tablet 1000 mg, 500 mg, 850 mg	PG	LGC
ANTIDIABETICS, BIGUANIDE/ SULFONYLUREA COMBINATIONS		
glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg	PG	LGC
glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg	PG	LGC
ANTIDIABETICS, DIPEPTIDYL PEPTIDASE-4 INHIBITORS		
alogliptin benzoate oral tablet 12.5 mg, 25 mg, 6.25 mg	PG	
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG (*sitagliptin phosphate*)	PB	
ANTIDIABETICS, DPP-4 INHIBITOR COMBINATIONS		
alogliptin-metformin hcl oral tablet 12.5-1000 mg, 12.5-500 mg	PG	
alogliptin-pioglitazone oral tablet 12.5-15 mg, 12.5-30 mg, 12.5-45 mg, 25-15 mg, 25-30 mg, 25-45 mg	PG	
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG (*sitagliptin-metformin hcl*)	PB	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG (*sitagliptin-metformin hcl*)	PB	
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 12.5-2.5-1000 MG, 25-5-1000 MG, 5-2.5-1000 MG (*empagliflozin-linaglip-metform*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
ANTIDIABETICS, INCRETIN MIMETIC AGENTS		
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML (*semaglutide*)	PB	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/1.5ML, 4 MG/3ML (*semaglutide*)	PB	
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG (*semaglutide*)	PB	
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML (*dulaglutide*)	PB	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML (*liraglutide*)	PB	
ANTIDIABETICS, INCRETIN MIMETIC COMBINATION AGENTS		
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML (*insulin glargine-lixisenatide*)	PB	
ANTIDIABETICS, INSULIN		
BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (*insulin glargine*)	PB	
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (*insulin aspart (w/niacinamide)*)	PB	
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (*insulin aspart (w/niacinamide)*)	PB	
FIASP SUBCUTANEOUS SOLUTION 100 UNIT/ML (*insulin aspart (w/niacinamide)*)	PB	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION 500 UNIT/ML (*insulin regular human*)	PB	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML (*insulin regular human*)	PB	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (*insulin detemir*)	PB	
LEVEMIR SUBCUTANEOUS SOLUTION 100 UNIT/ML (*insulin detemir*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (*insulin nph isophane & regular*)	PB	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML (*insulin nph isophane & regular*)	PB	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML (*insulin nph human (isophane)*)	PB	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML (*insulin nph human (isophane)*)	PB	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML (*insulin regular human*)	PB	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML (*insulin regular human*)	PB	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML (*insulin aspart*)	PB	
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML (*insulin aspart prot & aspart*)	PB	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML (*insulin aspart*)	PB	
NOVOLOG SUBCUTANEOUS SOLUTION 100 UNIT/ML (*insulin aspart*)	PB	
ANTIDIABETICS, INSULIN SENSITIZER		
pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg	PG	LGC
ANTIDIABETICS, INSULIN SENSITIZER/BIGUANIDE COMBINATION		
pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg	PG	LGC
ANTIDIABETICS, INSULIN SENSITIZER/SULFONYLUREA COMBINATION		
pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg	PG	
ANTIDIABETICS, MEGLITINIDE		
nateglinide oral tablet 120 mg, 60 mg	PG	LGC
repaglinide oral tablet 0.5 mg, 1 mg, 2 mg	PG	LGC

Prescription Drug Name	Drug Tier	Drug Notes
ANTIDIABETICS, SODIUM-GLUC CO-TRANSPOR2 INHIB		
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG (*empagliflozin-linagliptin*)	PB	
SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG (*empagliflozin-metformin hcl*)	PB	
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG (*empagliflozin-metformin hcl*)	PB	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-1000 MG, 5-500 MG (*dapagliflozin-metformin hcl*)	PB	
ANTIDIABETICS, SODIUM-GLUCOSE COTRANSPORTER2		
FARXIGA ORAL TABLET 10 MG, 5 MG (*dapagliflozin propanediol*)	PB	
JARDIANCE ORAL TABLET 10 MG, 25 MG (*empagliflozin*)	PB	
ANTIDIABETICS, SULFONYLUREA		
glimepiride oral tablet 1 mg, 2 mg, 4 mg	PG	LGC
glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	PG	LGC
glipizide oral tablet 10 mg, 5 mg	PG	LGC
glipizide xl oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	PG	LGC
tolbutamide oral tablet 500 mg	PG	
BISPHOSPHONATES		
alendronate sodium oral solution 70 mg/75ml	PG	
alendronate sodium oral tablet 10 mg, 35 mg, 5 mg, 70 mg	PG	
ibandronate sodium oral tablet 150 mg	PG	
risedronate sodium oral tablet 150 mg, 30 mg, 35 mg, 5 mg	PG	
risedronate sodium oral tablet delayed release 35 mg	PG	
zoledronic acid intravenous concentrate 4 mg/5ml	PBSP	
zoledronic acid intravenous solution 4 mg/100ml, 5 mg/100ml	PBSP	
CALCIUM RECEPTOR AGONISTS		
cinacalcet hcl oral tablet 30 mg, 60 mg, 90 mg	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG (*cinacalcet hcl*)	PBSP	
CARNITINE DEFICIENCY AGENTS		
levocarnitine oral solution 1 gm/10ml	PG	
levocarnitine oral tablet 330 mg	PG	
CHELATING AGENTS		
deferasirox oral tablet 360 mg, 90 mg	PBSP	
deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg	PBSP	
deferoxamine mesylate injection solution reconstituted 2 gm	PBSP	
penicillamine oral capsule 250 mg	PG	
penicillamine oral tablet 250 mg	PG	
sodium polystyrene sulfonate oral powder	PG	
SPS ORAL SUSPENSION 15 GM/60ML (*sodium polystyrene sulfonate*)	PG	
trientine hcl oral capsule 250 mg	PG	
CONTRACEPTIVES		
levonorgestrel-ethinyl estrad (Afirmelle Oral Tablet 0.1-20 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Altavera Oral Tablet 0.15-30 Mg-Mcg)	CE	
alyacen 1/35 oral tablet 1-35 mg-mcg	CE	
alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	CE	
levonorgest-eth estrad 91-day (Amethia Lo Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	
levonorgest-eth estrad 91-day (Amethia Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
levonorgestrel-ethinyl estrad (Amethyst Oral Tablet 90-20 Mcg)	CE	
ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR (*segesterone-ethinyl estradiol*)	CE	
desogestrel-ethinyl estradiol (Apri Oral Tablet 0.15-30 Mg-Mcg)	CE	
norethin-eth estrad triphasic (Aranelle Oral Tablet 0.5/1/0.5-35 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Ashlyna Oral Tablet 0.15-0.03 &0.01 Mg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
levonorgestrel-ethinyl estrad (Aubra Eq Oral Tablet 0.1-20 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Aubra Oral Tablet 0.1-20 Mg-Mcg)	CE	
norethindrone acet-ethinyl est (Aurovela 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethindrone acet-ethinyl est (Aurovela 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Aurovela 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
norethin ace-eth estrad-fe (Aurovela Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Aurovela Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Aviane Oral Tablet 0.1-20 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Ayuna Oral Tablet 0.15-30 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Azurette Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
norethindrone-eth estradiol (Balziva Oral Tablet 0.4-35 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Bekyree Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
norethin ace-eth estrad-fe (Blisovi 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
norethin ace-eth estrad-fe (Blisovi Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Blisovi Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
briellyn oral tablet 0.4-35 mg-mcg	CE	
norethindrone (Camila Oral Tablet 0.35 Mg)	CE	
levonorgest-eth estrad 91-day (Camrese Lo Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	
levonorgest-eth estrad 91-day (Camrese Oral Tablet 0.15-0.03 &0.01 Mg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
desogestrel-ethinyl estradiol (Caziant Oral Tablet 0.1/0.125/0.15 -0.025 Mg)	CE	
levonorgestrel-ethinyl estrad (Chateal Eq Oral Tablet 0.15-30 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Chateal Oral Tablet 0.15-30 Mg-Mcg)	CE	
norgestrel-ethinyl estradiol (Cryselle-28 Oral Tablet 0.3-30 Mg-Mcg)	CE	
norethindrone-eth estradiol (Cyclafem 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
norethin-eth estrad triphasic (Cyclafem 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Cyred Eq Oral Tablet 0.15-30 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Cyred Oral Tablet 0.15-30 Mg-Mcg)	CE	
norethindrone-eth estradiol (Dasetta 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
norethin-eth estrad triphasic (Dasetta 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Daysee Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
norethindrone (Deblitane Oral Tablet 0.35 Mg)	CE	
levonorgestrel-ethinyl estrad (Delyla Oral Tablet 0.1-20 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	CE	
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg, 3-0.03-0.451 mg	CE	
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	CE	
norgestrel-ethinyl estradiol (Elinest Oral Tablet 0.3-30 Mg-Mcg)	CE	
ELLA ORAL TABLET 30 MG (*ulipristal acetate*)	CE	
etonogestrel-ethinyl estradiol (Eluryng Vaginal Ring 0.12-0.015 Mg/24Hr)	CE	
desogestrel-ethinyl estradiol (Emoquette Oral Tablet 0.15-30 Mg-Mcg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
levonorg-eth estrad triphasic (Enpresse-28 Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	
desogestrel-ethinyl estradiol (Enskyce Oral Tablet 0.15-30 Mg-Mcg)	CE	
norethindrone (Errin Oral Tablet 0.35 Mg)	CE	
norgestimate-eth estradiol (Estarylla Oral Tablet 0.25-35 Mg-Mcg)	CE	
ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg	CE	
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr	CE	
levonorgestrel-ethinyl estrad (Falmina Oral Tablet 0.1-20 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Fayosim Oral Tablet 42-21-21-7 Days)	CE	
norgestimate-eth estradiol (Femynor Oral Tablet 0.25-35 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Gianvi Oral Tablet 3-0.02 Mg)	CE	
norethindrone acet-ethinyl est (Hailey 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Hailey 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
norethindrone (Heather Oral Tablet 0.35 Mg)	CE	
norethindrone (Incassia Oral Tablet 0.35 Mg)	CE	
levonorgest-eth estrad 91-day (Introvale Oral Tablet 0.15-0.03 Mg)	CE	
desogestrel-ethinyl estradiol (Isibloom Oral Tablet 0.15-30 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Jaimiess Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
drospirenone-ethinyl estradiol (Jasmiel Oral Tablet 3-0.02 Mg)	CE	
norethindrone (Jencycla Oral Tablet 0.35 Mg)	CE	
levonorgest-eth estrad 91-day (Jolessa Oral Tablet 0.15-0.03 Mg)	CE	
desogestrel-ethinyl estradiol (Juleber Oral Tablet 0.15-30 Mg-Mcg)	CE	
norethindrone acet-ethinyl est (Junel 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
norethindrone acet-ethinyl est (Junel 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Junel Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Junel Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Junel Fe 24 Oral Tablet 1-20 Mg-Mcg(24))	CE	
norethin-eth estradiol-fe (Kaitlib Fe Oral Tablet Chewable 0.8-25 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Kalliga Oral Tablet 0.15-30 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Kariva Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
ethynodiol diac-eth estradiol (Kelnor 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
ethynodiol diac-eth estradiol (Kelnor 1/50 Oral Tablet 1-50 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Kurvelo Oral Tablet 0.15-30 Mg-Mcg)	CE	
KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG (*levonorgestrel*)	CE	
norethindrone acet-ethinyl est (Larin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethindrone acet-ethinyl est (Larin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Larin 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	
norethin ace-eth estrad-fe (Larin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Larin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Larissia Oral Tablet 0.1-20 Mg-Mcg)	CE	
norethin-eth estradiol-fe (Layolis Fe Oral Tablet Chewable 0.8-25 Mg-Mcg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
norethin-eth estrad triphasic (Leena Oral Tablet 0.5/1/0.5-35 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Lessina Oral Tablet 0.1-20 Mg-Mcg)	CE	
levonorg-eth estrad triphasic (Levonest Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	CE	
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 &0.01 mg, 0.15-0.03 mg	CE	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg, 90-20 mcg	CE	
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	CE	
levonorgestrel-ethinyl estrad (Levora 0.15/30 (28) Oral Tablet 0.15-30 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Lillow Oral Tablet 0.15-30 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Lojaimiess Oral Tablet 0.1-0.02 & 0.01 Mg)	CE	
drospirenone-ethinyl estradiol (Loryna Oral Tablet 3-0.02 Mg)	CE	
norgestrel-ethinyl estradiol (Low-Ogestrel Oral Tablet 0.3-30 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Lo-Zumandimine Oral Tablet 3-0.02 Mg)	CE	
levonorgestrel-ethinyl estrad (Lutera Oral Tablet 0.1-20 Mg-Mcg)	CE	
norethindrone (Lyza Oral Tablet 0.35 Mg)	CE	
marlissa oral tablet 0.15-30 mg-mcg	CE	
medroxyprogesterone acetate intramuscular suspension 150 mg/ml	CE	
medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml	CE	
norethin ace-eth estrad-fe (Melodetta 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	
norethin ace-eth estrad-fe (Mibelas 24 Fe Oral Tablet Chewable 1-20 Mg-Mcg(24))	CE	

Prescription Drug Name	Drug Tier	Drug Notes
norethindrone acet-ethinyl est (Microgestin 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethindrone acet-ethinyl est (Microgestin 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Microgestin Fe 1.5/30 Oral Tablet 1.5-30 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Microgestin Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norgestimate-eth estradiol (Mili Oral Tablet 0.25-35 Mg-Mcg)	CE	
MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20 MCG/24HR (*levonorgestrel*)	CE	
norgestimate-eth estradiol (Mono-Linyah Oral Tablet 0.25-35 Mg-Mcg)	CE	
norethindrone-eth estradiol (Necon 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Nikki Oral Tablet 3-0.02 Mg)	CE	
norethindrone (Nora-Be Oral Tablet 0.35 Mg)	CE	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	CE	
norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24)	CE	
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg	CE	
norethindrone oral tablet 0.35 mg	CE	
norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg, 0.8-25 mg-mcg	CE	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	CE	
norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg	CE	
norethindrone (Norlyda Oral Tablet 0.35 Mg)	CE	
norethindrone (Norlyroc Oral Tablet 0.35 Mg)	CE	
norethindrone-eth estradiol (Nortrel 0.5/35 (28) Oral Tablet 0.5-35 Mg-Mcg)	CE	
norethindrone-eth estradiol (Nortrel 1/35 (21) Oral Tablet 1-35 Mg-Mcg)	CE	
norethindrone-eth estradiol (Nortrel 1/35 (28) Oral Tablet 1-35 Mg-Mcg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
norethin-eth estrad triphasic (Nortrel 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Ocella Oral Tablet 3-0.03 Mg)	CE	
levonorgestrel-ethinyl estrad (Orsythia Oral Tablet 0.1-20 Mg-Mcg)	CE	
norethindrone-eth estradiol (Philith Oral Tablet 0.4-35 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Pimtrea Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
norethindrone-eth estradiol (Pirmella 1/35 Oral Tablet 1-35 Mg-Mcg)	CE	
norethin-eth estrad triphasic (Pirmella 7/7/7 Oral Tablet 0.5/0.75/1-35 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Portia-28 Oral Tablet 0.15-30 Mg-Mcg)	CE	
norgestimate-eth estradiol (Previfem Oral Tablet 0.25-35 Mg-Mcg)	CE	
desogestrel-ethinyl estradiol (Reclipsen Oral Tablet 0.15-30 Mg-Mcg)	CE	
levonorgest-eth estrad 91-day (Rivelsa Oral Tablet 42-21-21-7 Days)	CE	
levonorgest-eth estrad 91-day (Setlakin Oral Tablet 0.15-0.03 Mg)	CE	
norethindrone (Sharobel Oral Tablet 0.35 Mg)	CE	
desogestrel-ethinyl estradiol (Simliya Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
levonorgest-eth estrad 91-day (Simpesse Oral Tablet 0.15-0.03 &0.01 Mg)	CE	
SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG (*levonorgestrel*)	CE	
norgestimate-eth estradiol (Sprintec 28 Oral Tablet 0.25-35 Mg-Mcg)	CE	
levonorgestrel-ethinyl estrad (Sronyx Oral Tablet 0.1-20 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Syeda Oral Tablet 3-0.03 Mg)	CE	
norethin ace-eth estrad-fe (Tarina 24 Fe Oral Tablet 1-20 Mg-Mcg(24))	CE	

Prescription Drug Name	Drug Tier	Drug Notes
norethin ace-eth estrad-fe (Tarina Fe 1/20 Eq Oral Tablet 1-20 Mg-Mcg)	CE	
norethin ace-eth estrad-fe (Tarina Fe 1/20 Oral Tablet 1-20 Mg-Mcg)	CE	
norethindron-ethinyl estrad-fe (Tilia Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	
norgestim-eth estrad triphasic (Tri Femynor Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Estarylla Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norethindron-ethinyl estrad-fe (Tri-Legest Fe Oral Tablet 1-20/1-30/1-35 Mg-Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Linyah Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Lo-Estarylla Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Lo-Marzia Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Lo-Mili Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Lo-Sprintec Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Mili Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Previfem Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Sprintec Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
levonorg-eth estrad triphasic (Trivora (28) Oral Tablet 50-30/75-40/ 125-30 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Vylibra Lo Oral Tablet 0.18/0.215/0.25 Mg-25 Mcg)	CE	
norgestim-eth estrad triphasic (Tri-Vylibra Oral Tablet 0.18/0.215/0.25 Mg-35 Mcg)	CE	
norethindrone (Tulana Oral Tablet 0.35 Mg)	CE	
drospiren-eth estrad-levomefol (Tydemy Oral Tablet 3-0.03-0.451 Mg)	CE	

Prescription Drug Name	Drug Tier	Drug Notes
desogestrel-ethinyl estradiol (Velivet Oral Tablet 0.1/0.125/0.15 -0.025 Mg)	CE	
levonorgestrel-ethinyl estrad (Vienva Oral Tablet 0.1-20 Mg-Mcg)	CE	
viorele oral tablet 0.15-0.02/0.01 mg (21/5)	CE	
desogestrel-ethinyl estradiol (Volnea Oral Tablet 0.15-0.02/0.01 Mg (21/5))	CE	
norethindrone-eth estradiol (Vyfemla Oral Tablet 0.4-35 Mg-Mcg)	CE	
norgestimate-eth estradiol (Vylibra Oral Tablet 0.25-35 Mg-Mcg)	CE	
norethindrone-eth estradiol (Wera Oral Tablet 0.5-35 Mg-Mcg)	CE	
norethin-eth estradiol-fe (Wymzya Fe Oral Tablet Chewable 0.4-35 Mg-Mcg)	CE	
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR (*norelgestromin-eth estradiol*)	CE	
drospirenone-ethinyl estradiol (Zarah Oral Tablet 3-0.03 Mg)	CE	
ethynodiol diac-eth estradiol (Zovia 1/35E (28) Oral Tablet 1-35 Mg-Mcg)	CE	
drospirenone-ethinyl estradiol (Zumandimine Oral Tablet 3-0.03 Mg)	CE	
DIABETIC, SUPPLIES		
1st tier unilet comfortouch	PB	
ACCU-CHEK FASTCLIX LANCETS (*lancets*)	PB	
ACCU-CHEK MULTICLIX LANCETS (*lancets*)	PB	
ACCU-CHEK SAFE-T PRO LANCETS (*lancets*)	PB	
ACCU-CHEK SOFTCLIX LANCETS (*lancets*)	PB	
acti-lance 28g	PB	
acti-lance lite lancets 28g	PB	
acti-lance special lancets 17g	PB	
acti-lance universal 23g	PB	
ADVOCATE LANCETS 30G (*lancets*)	PB	
ADVOCATE SAFETY LANCETS (*lancets*)	PB	
ADVOCATE SAFETY LANCETS 26G (*lancets*)	PB	
AGAMATRIX ULTRA-THIN LANCETS (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
aimsco twist lancets 32g	PB	
AIMSCO TWIST LANCETS 33G (*lancets*)	PB	
AQUALANCE LANCETS 30G (*lancets*)	PB	
assure comfort lancets 28g	PB	
aurora lancet super thin 30g	PB	
aurora lancet thin 23g	PB	
BD AUTOSHIELD 29G X 5MM , 29G X 8MM (*insulin pen needle*)	PB	
BD INSULIN SYRINGE 25G X 1" 1 ML, 25G X 5/8" 1 ML, 26G X 1/2" 1 ML, 27.5G X 5/8" 2 ML, 27G X 1/2" 1 ML, 29G X 1/2" 0.5 ML (*insulin syringe-needle u-100*)	PB	
BD INSULIN SYRINGE HALF-UNIT 31G X 5/16" 0.3 ML (*insulin syringe-needle u-100*)	PB	
BD INSULIN SYRINGE MICROFINE 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML (*insulin syringe-needle u-100*)	PB	
BD INSULIN SYRINGE U/F 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 1 ML (*insulin syringe-needle u-100*)	PB	
BD INSULIN SYRINGE U-100 1 ML (*insulin syringes (disposable)*)	PB	
BD INSULIN SYRINGE U-500 31G X 6MM 0.5 ML (*insulin syringe/needle u-500*)	PB	
BD INSULIN SYRINGE ULTRAFINE 29G X 1/2" 0.3 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 31G X 5/16" 0.5 ML (*insulin syringe-needle u-100*)	PB	
BD LANCET ULTRAFINE 30G (*lancets*)	PB	
BD LANCET ULTRAFINE 33G (*lancets*)	PB	
BD MICROTAINER LANCETS (*lancets*)	PB	
BD PEN NEEDLE MICRO U/F 32G X 6 MM (*insulin pen needle*)	PB	
BD PEN NEEDLE MINI U/F 31G X 5 MM (*insulin pen needle*)	PB	
BD PEN NEEDLE NANO 2ND GEN 32G X 4 MM (*insulin pen needle*)	PB	
BD PEN NEEDLE NANO U/F 32G X 4 MM (*insulin pen needle*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
BD PEN NEEDLE ORIGINAL U/F 29G X 12.7MM (*insulin pen needle*)	PB	
BD PEN NEEDLE SHORT U/F 31G X 8 MM (*insulin pen needle*)	PB	
BD SAFETYGLIDE INSULIN SYRINGE 30G X 5/16" 0.5 ML, 31G X 15/64" 1 ML (*insulin syringe-needle u-100*)	PB	
BD VEO INSULIN SYR U/F 1/2UNIT 31G X 15/64" 0.3 ML (*insulin syringe-needle u-100*)	PB	
BD VEO INSULIN SYRINGE U/F 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML (*insulin syringe-needle u-100*)	PB	
CAREONE LANCET SUPER THIN 30G (*lancets*)	PB	
careone lancet thin 23g	PB	
CARETOUCH SAFETY LANCETS 26G (*lancets*)	PB	
CARETOUCH TWIST LANCETS 28G (*lancets*)	PB	
CARETOUCH TWIST LANCETS 30G (*lancets*)	PB	
CARETOUCH TWIST LANCETS 33G (*lancets*)	PB	
CLEANLET LANCETS 28G (*lancets*)	PB	
CLEVER CHEK LANCETS (*lancets*)	PB	
CLEVER CHOICE LANCETS 21G (*lancets*)	PB	
CLEVER CHOICE LANCETS 23G (*lancets*)	PB	
CLEVER CHOICE LANCETS 28G (*lancets*)	PB	
COAGUCHEK LANCETS (*lancets*)	PB	
comfort assured lancets 28g	PB	
comfort assured lancets 33g	PB	
comfort lancets	PB	
cvs lancets 21g	PB	
cvs lancets micro thin 33g	PB	
cvs lancets original	PB	
cvs lancets thin 26g	PB	
cvs lancets ultra thin 30g	PB	
cvs lancets ultra-thin 30g	PB	
cvs ultra thin lancets	PB	
DEXCOM G4 PLAT PED RCV/SHARE DEVICE (*continuous blood gluc receiver*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
DEXCOM G4 PLAT PED RECEIVER DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G4 PLATINUM RCV/SHARE DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G4 PLATINUM RECEIVER DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G4 PLATINUM TRANSMITTER (*continuous blood gluc transmit*)	PB	
DEXCOM G4 SENSOR (*continuous blood gluc sensor*)	PB	
DEXCOM G5 MOB/G4 PLAT SENSOR (*continuous blood gluc sensor*)	PB	
DEXCOM G5 MOBILE RECEIVER DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G5 MOBILE TRANSMITTER (*continuous blood gluc transmit*)	PB	
DEXCOM G5 RECEIVER KIT DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G6 RECEIVER DEVICE (*continuous blood gluc receiver*)	PB	
DEXCOM G6 SENSOR (*continuous blood gluc sensor*)	PB	
DEXCOM G6 TRANSMITTER (*continuous blood gluc transmit*)	PB	
DIATHRIVE LANCET ULTRA THIN 30 (*lancets*)	PB	
DIATHRIVE LANCETS (*lancets*)	PB	
DROPLET LANCETS ULTRA THIN 30G (*lancets*)	PB	
drug mart lancets thin 26g	PB	
DRUG MART ON-THE-GO LANCET 30G (*lancets*)	PB	
easy comfort lancets	PB	
easy comfort lancets twist top	PB	
EASY TOUCH LANCETS 21G (*lancets*)	PB	
EASY TOUCH LANCETS 23G (*lancets*)	PB	
EASY TOUCH LANCETS 28G (*lancets*)	PB	
EASY TOUCH LANCETS 30G (*lancets*)	PB	
EASY TOUCH LANCETS 32G (*lancets*)	PB	
EMBRACE LANCETS ULTRA THIN 30G (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
eql color lancets 21g	PB	
eql color lancets micro 33g	PB	
eql super thin lancets 30g	PB	
eql thin lancets 26g	PB	
E-Z JECT LANCET MICRO-THIN 33G (*lancets*)	PB	
E-Z JECT LANCET SUPER THIN 30G (*lancets*)	PB	
E-Z JECT LANCETS (*lancets*)	PB	
E-Z JECT LANCETS 21G (*lancets*)	PB	
E-Z JECT LANCETS THIN 26G (*lancets*)	PB	
EZ-LETS LANCETS 21G (*lancets*)	PB	
EZ-LETS LANCETS 26G (*lancets*)	PB	
EZ-LETS LANCETS 28G (*lancets*)	PB	
EZ-LETS LANCETS 30G (*lancets*)	PB	
FIFTY50 UNILET LANCETS 33G (*lancets*)	PB	
FINGERSTIX LANCETS (*lancets*)	PB	
FORA LANCETS (*lancets*)	PB	
FREESTYLE UNISTICK II LANCETS (*lancets*)	PB	
GENTEEL BUTTERFLY TOUCH LANCET (*lancets*)	PB	
GENTLE-LET GP LANCETS (*lancets*)	PB	
GENTLE-LET LANCETS (*lancets*)	PB	
global inject ease lancets 28g	PB	
global inject ease lancets 30g	PB	
GLUCOCOM LANCETS 28G (*lancets*)	PB	
GLUCOCOM LANCETS 30G (*lancets*)	PB	
GLUCOCOM LANCETS 33G (*lancets*)	PB	
gnp lancets	PB	
gnp lancets 21g	PB	
gnp lancets micro thin 33g	PB	
gnp lancets thin	PB	
gnp lancets thin 26g	PB	
gnp micro thin lancets 33g	PB	
gnp super thin lancets 30g	PB	
GOJJI STERILE LANCETS (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
goodsense lancets 26g univ	PB	
goodsense lancets 30g univ	PB	
goodsense lancets 33g univ	PB	
healthy accents unilet lancets	PB	
h-e-b incontrol lancets 28g	PB	
h-e-b incontrol lancets 30g	PB	
h-e-b incontrol lancets 33g	PB	
HY-VEE LANCETS (*lancets*)	PB	
hy-vee thin lancets	PB	
IN TOUCH STERILE LANCETS 30G (*lancets*)	PB	
kinney lancets	PB	
kinney thin lancets	PB	
kroger lancets	PB	
kroger lancets super thin	PB	
kroger lancets thin	PB	
lancets	PB	
lancets micro thin 33g	PB	
lancets thin	PB	
lancets ultra thin 30g	PB	
LIFESCAN UNISTIK 2 (*lancets*)	PB	
LIFESCAN UNISTIK II LANCETS (*lancets*)	PB	
lite touch lancets	PB	
LITETOUCH LANCETS (*lancets*)	PB	
live better lancet ultra thin	PB	
longs lancets standard	PB	
longs lancets thin	PB	
longs lancets ultra thin	PB	
medichoice safety lancet norm	PB	
MEDISENSE THIN LANCETS (*lancets*)	PB	
MEDLANCE PLUS EXTRA 21G (*lancets*)	PB	
MEDLANCE PLUS LANCETS (*lancets*)	PB	
MEDLANCE PLUS LITE 25G (*lancets*)	PB	
MEDLANCE PLUS SPECIAL 0.8MM (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
MEDLANCE PLUS SUPERLITE 30G (*lancets*)	PB	
MEDLANCE PLUS UNIVERSAL 21G (*lancets*)	PB	
MEIJER LANCETS THIN (*lancets*)	PB	
MEIJER LANCETS UNIVERSAL 21G (*lancets*)	PB	
MEIJER LANCETS UNIVERSAL 30G (*lancets*)	PB	
MEIJER LANCETS UNIVERSAL 33G (*lancets*)	PB	
MEIJER SUPER THIN LANCETS (*lancets*)	PB	
MICROLET LANCETS (*lancets*)	PB	
MONOLET LANCETS (*lancets*)	PB	
MONOLET OPD LANCETS (*lancets*)	PB	
MONOLETTOR SAFETY LANCETS (*lancets*)	PB	
mpd safety lancet 21g	PB	
mpd safety lancet 23g	PB	
mpd safety lancet 28g	PB	
mpd safety lancet 30g	PB	
MYGLUCOHEALTH LANCETS 30G (*lancets*)	PB	
NORDIPEN 5 INJECTION DEVICE (*injection device*)	PBSP	
NORDIPEN DELIVERY SYSTEM (*injection device*)	PBSP	
NOVA SAFETY LANCETS 23G (*lancets*)	PB	
NOVA SAFETY LANCETS 28G (*lancets*)	PB	
NOVA SUREFLEX LANCETS (*lancets*)	PB	
ONETOUCH CLUB LANCETS FINE PT (*lancets*)	PB	
ONETOUCH DELICA LANCETS 30G (*lancets*)	PB	
ONETOUCH DELICA LANCETS 33G (*lancets*)	PB	
ONETOUCH DELICA PLUS LANCET30G (*lancets*)	PB	
ONETOUCH DELICA PLUS LANCET33G (*lancets*)	PB	
ONETOUCH ULTRA 2 KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH ULTRA IN VITRO STRIP (*glucose blood*)	PB	
ONETOUCH ULTRA MINI KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH ULTRALINK KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH ULTRASOFT LANCETS (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH VERIO IN VITRO STRIP (*glucose blood*)	PB	
ONETOUCH VERIO IQ SYSTEM KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH VERIO KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH VERIO REFLECT KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
ONETOUCH VERIO SYNC SYSTEM KIT W/DEVICE (*blood glucose monitoring suppl*)	PB	
pc lancets super thin 30g	PB	
PERFECT LANCETS 28G (*lancets*)	PB	
PERFECT LANCETS 30G (*lancets*)	PB	
PHARMACIST CHOICE LANCETS (*lancets*)	PB	
PHARMACY COUNTER LANCETS (*lancets*)	PB	
pip lancets 28g	PB	
pip lancets 30g	PB	
preferred plus lancets colored	PB	
preferred plus lancets thin	PB	
pressure activat safety lancet	PB	
pro comfort lancets 30g	PB	
pro comfort lancets 31g	PB	
PRODIGY LANCETS 28G (*lancets*)	PB	
PRODIGY SAFETY LANCETS 26G (*lancets*)	PB	
PSS SELECT GP LANCETS (*lancets*)	PB	
PSS SELECT SAFETY LANCETS (*lancets*)	PB	
push button safety lancets	PB	
push button safety lancets 28g	PB	
px lancets ultra thin	PB	
qc lancets super thin 30g	PB	
qc lancets ultra thin	PB	
qc unilet lancets 28g	PB	
qc unilet lancets micro thin	PB	

Prescription Drug Name	Drug Tier	Drug Notes
RA E-ZJECT LANCETS 28G (*lancets*)	PB	
RA E-ZJECT LANCETS THIN 26G (*lancets*)	PB	
RA E-ZJECT LANCETS THIN 28G (*lancets*)	PB	
RA E-ZJECT LANCETS ULTRA THIN (*lancets*)	PB	
READYLANCE SAFETY LANCETS (*lancets*)	PB	
reality lancets	PB	
reality trigger lancets	PB	
RELION LANCETS MICRO-THIN 33G (*lancets*)	PB	
RELION LANCETS STANDARD 21G (*lancets*)	PB	
RELION LANCETS THIN 26G (*lancets*)	PB	
RELION LANCETS ULTRA-THIN 30G (*lancets*)	PB	
RELION ULTRA THIN LANCETS 30G (*lancets*)	PB	
RELION ULTRA THIN PLUS LANCETS (*lancets*)	PB	
RIGHTEST GL300 LANCETS (*lancets*)	PB	
SAFE-T-LANCE (*lancets*)	PB	
SAFE-T-LANCE PLUS (*lancets*)	PB	
saps health twist top lancets	PB	
saps twist top lancets	PB	
sapscare twist top lancets	PB	
sb lancets thin	PB	
sb lancets ultra thin	PB	
side button safety lancet	PB	
SINGLE-LET (*lancets*)	PB	
sm lancets 33g	PB	
SMART SENSE COLOR LANCETS 33G (*lancets*)	PB	
SMART SENSE STANDARD LANCETS (*lancets*)	PB	
SMART SENSE SUPER THIN LANCETS (*lancets*)	PB	
SMART SENSE THIN LANCETS 26G (*lancets*)	PB	
SMARTEST LANCETS 28G (*lancets*)	PB	
SOLUS V2 LANCETS 28G (*lancets*)	PB	
SOLUS V2 TWIST LANCETS 30G (*lancets*)	PB	
STERILANCE TL (*lancets*)	PB	
sure comfort lancets 18g	PB	

Prescription Drug Name	Drug Tier	Drug Notes
sure comfort lancets 21g	PB	
sure comfort lancets 23g	PB	
sure comfort lancets 28g	PB	
sure comfort lancets 30g	PB	
SURE-LANCE FLAT LANCETS (*lancets*)	PB	
SURE-LANCE LANCETS 26G (*lancets*)	PB	
SURELITE LANCETS (*lancets*)	PB	
SURE-TOUCH LANCETS UNIVERSAL (*lancets*)	PB	
tgt lancet micro thin 33g	PB	
tgt lancet thin 26g	PB	
tgt lancet ultra thin 30g	PB	
THINLETS GP LANCETS (*lancets*)	PB	
topcare lancets micro-thin 33g	PB	
travel lancets	PB	
TRAVEL LANCETS ADVANCED 28G (*lancets*)	PB	
true comfort twist top lancets	PB	
TRUEPLUS LANCETS 26G (*lancets*)	PB	
TRUEPLUS LANCETS 28G (*lancets*)	PB	
TRUEPLUS LANCETS 30G (*lancets*)	PB	
TRUEPLUS LANCETS 33G (*lancets*)	PB	
TRUEPLUS SAFETY LANCETS 28G (*lancets*)	PB	
ULTILET CLASSIC LANCETS (*lancets*)	PB	
ULTILET LANCETS (*lancets*)	PB	
ULTILET SAFETY LANCETS (*lancets*)	PB	
ULTILET SAFETY LANCETS 23G (*lancets*)	PB	
ultra thin lancets 31g	PB	
ultra-care lancets 30g	PB	
ULTRA-THIN II AUTO LANCET (*lancets*)	PB	
ULTRA-THIN II LANCETS (*lancets*)	PB	
UNILET COMFORTOUCH LANCET (*lancets*)	PB	
UNILET EXCELITE (*lancets*)	PB	
UNILET EXCELITE II (*lancets*)	PB	
UNILET G.P. LANCET (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
UNILET G.P. SUPERLITE LANCET (*lancets*)	PB	
UNILET GP 28 ULTRA THIN (*lancets*)	PB	
UNILET LANCET (*lancets*)	PB	
UNILET MICRO-THIN 33G (*lancets*)	PB	
UNILET SUPERLITE LANCET (*lancets*)	PB	
UNILET SUPER-THIN 30G (*lancets*)	PB	
UNILET ULTRA-THIN 28G (*lancets*)	PB	
UNISTIK 3 GENTLE (*lancets*)	PB	
UNISTIK PRO SAFETY LANCET (*lancets*)	PB	
UNISTIK SAFETY LANCETS 28G (*lancets*)	PB	
UNISTIK SAFETY LANCETS 30G (*lancets*)	PB	
UNISTIK TOUCH SAFETY LANC 21G (*lancets*)	PB	
UNISTIK TOUCH SAFETY LANC 23G (*lancets*)	PB	
UNISTIK TOUCH SAFETY LANC 28G (*lancets*)	PB	
UNISTIK TOUCH SAFETY LANC 30G (*lancets*)	PB	
UNIVERSAL 1 LANCETS THIN 26G (*lancets*)	PB	
UNIVERSAL 1 LANCETS THIN 33G (*lancets*)	PB	
UNIVERSAL 1 LANCETS ULTRA THIN (*lancets*)	PB	
value plus lancet standard 21g	PB	
value plus lancets super thin	PB	
valumark lancet ultra thin 28g	PB	
V-GO 20 KIT (*insulin disposable pump*)	PB	
V-GO 30 KIT (*insulin disposable pump*)	PB	
V-GO 40 KIT (*insulin disposable pump*)	PB	
VIVAGUARD LANCETS (*lancets*)	PB	
walgreens adv travel lancets	PB	
WALGREENS LANCETS (*lancets*)	PB	
walgreens lancets micro thin	PB	
walgreens lancets super thin	PB	
WALGREENS THIN LANCETS (*lancets*)	PB	
WALGREENS ULTRA THIN LANCETS (*lancets*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
ENDOMETRIOSIS		
CETROTIDE SUBCUTANEOUS KIT 0.25 MG (*cetrorelix acetate*)	PBSP	SPC (Only available for select plans)
danazol oral capsule 100 mg, 200 mg, 50 mg	PG	
SYNAREL NASAL SOLUTION 2 MG/ML (*nafarelin acetate*)	PB	
ENZYME REPLACEMENTS		
CERDELGA ORAL CAPSULE 84 MG (*eliglustat tartrate*)	PBSP	
CYSTAGON ORAL CAPSULE 150 MG, 50 MG (*cysteamine bitartrate*)	PBSP	
nitisinone oral capsule 10 mg, 2 mg, 5 mg	PBSP	
ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG (*nitisinone*)	PBSP	
ORFADIN ORAL SUSPENSION 4 MG/ML (*nitisinone*)	PBSP	
sodium phenylbutyrate oral powder 3 gm/tsp	PBSP	
sodium phenylbutyrate oral tablet 500 mg	PBSP	
ESTROGENS		
estradiol-norethindrone acet (Amabelz Oral Tablet 0.5-0.1 Mg, 1-0.5 Mg)	PG	
CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY (*estradiol-levonorgestrel*)	PB	
estradiol (Dotti Transdermal Patch Twice Weekly 0.025 Mg/24Hr, 0.0375 Mg/24Hr, 0.05 Mg/24Hr, 0.075 Mg/24Hr, 0.1 Mg/24Hr)	PG	
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	PG	
estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	PG	
estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	PG	
estradiol vaginal cream 0.1 mg/gm	PG	
estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml	PG	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	PG	
norethindrone-eth estradiol (Fyavolv Oral Tablet 0.5-2.5 Mg-Mcg, 1-5 Mg-Mcg)	PG	
norethindrone-eth estradiol (Jinteli Oral Tablet 1-5 Mg-Mcg)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
estradiol-norethindrone acet (Mimvey Oral Tablet 1-0.5 Mg)	PG	
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	PG	
VAGIFEM VAGINAL TABLET 10 MCG (*estradiol*)	PB	
FERTILITY REGULATORS		
clomiphene citrate oral tablet 50 mg	PG	SPC (Only available for select plans)
ganirelix acetate subcutaneous solution prefilled syringe 250 mcg/0.5ml	PBSP	
GONAL-F INJECTION SOLUTION RECONSTITUTED 1050 UNIT, 450 UNIT (*follitropin alfa*)	PBSP	SPC (Only available for select plans)
GONAL-F RFF REDIJECT SUBCUTANEOUS SOLUTION 300 UNIT/0.5ML, 450 UNT/0.75ML, 900 UNIT/1.5ML (*follitropin alfa*)	PBSP	SPC (Only available for select plans)
GONAL-F RFF SUBCUTANEOUS SOLUTION RECONSTITUTED 75 UNIT (*follitropin alfa*)	PBSP	SPC (Only available for select plans)
OVIDREL SUBCUTANEOUS INJECTABLE 250 MCG/0.5ML (*choriogonadotropin alfa*)	PBSP	SPC (Only available for select plans)
GLUCOCORTICOIDS		
budesonide er oral tablet extended release 24 hour 9 mg	PG	
dexamethasone (Decadron Oral Tablet 0.5 Mg, 0.75 Mg, 4 Mg, 6 Mg)	PB	
dexamethasone oral elixir 0.5 mg/5ml	PG	
dexamethasone oral solution 0.5 mg/5ml	PG	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 4 mg, 6 mg	PG	
dexamethasone oral tablet 2 mg	PB	
dexamethasone oral tablet therapy pack 1.5 mg (21), 1.5 mg (35), 1.5 mg (51)	PG	
fludrocortisone acetate oral tablet 0.1 mg	PG	
dexamethasone (Hidex 6-Day Oral Tablet Therapy Pack 1.5 Mg (21))	PG	
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	PG	
MEDROL ORAL TABLET 2 MG (*methylprednisolone*)	PB	
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	PG	
methylprednisolone oral tablet therapy pack 4 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
prednisolone oral solution 15 mg/5ml	PG	
prednisolone sodium phosphate oral solution 10 mg/5ml, 15 mg/5ml, 20 mg/5ml, 25 mg/5ml, 6.7 (5 base) mg/5ml	PG	
prednisolone sodium phosphate oral tablet dispersible 10 mg, 15 mg, 30 mg	PG	
prednisone oral solution 5 mg/5ml	PG	
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	PG	
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)	PG	
TAPERDEX 12-DAY ORAL TABLET THERAPY PACK 1.5 MG (49) (*dexamethasone*)	PG	
TAPERDEX 7-DAY ORAL TABLET THERAPY PACK 1.5 MG (27) (*dexamethasone*)	PG	
GLUCOSE ELEVATING AGENTS		
BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE (*glucagon*)	PB	
BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE (*glucagon*)	PB	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED 1 MG (*glucagon hcl (rdna)*)	PB	
glucagon emergency injection kit 1 mg	PB	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (*glucagon*)	PB	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML (*glucagon*)	PB	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.5 MG/0.1ML, 1 MG/0.2ML (*glucagon*)	PB	
HEREDITARY TYROSINEMA TYPE 1 AGENTS		
NITYR ORAL TABLET 10 MG, 2 MG, 5 MG (*nitisinone*)	PBSP	
HUMAN GROWTH HORMONES		
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 5 MG/1.5ML (*somatropin*)	PBSP	
MISCELLANEOUS		
cabergoline oral tablet 0.5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
calcitonin (salmon) nasal solution 200 unit/act	PG	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 600 MCG/2.4ML (*teriparatide (recombinant)*)	PBSP	
methylergonovine maleate (Methergine Oral Tablet 0.2 Mg)	PG	
methylergonovine maleate oral tablet 0.2 mg	PG	
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	PBSP	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML (*denosumab*)	PBSP	
raloxifene hcl oral tablet 60 mg	CE	
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML (*lanreotide acetate*)	PBSP	
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML (*abaloparatide*)	PBSP	
PHOSPHATE BINDER AGENTS		
calcium acetate (phos binder) oral capsule 667 mg	PG	
calcium acetate (phos binder) oral tablet 667 mg	PG	
sevelamer carbonate oral packet 0.8 gm, 2.4 gm	PG	
sevelamer carbonate oral tablet 800 mg	PG	
PROGESTINS		
hydroxyprogesterone caproate intramuscular oil 250 mg/ml	PBSP	
medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg	PG	
norethindrone acetate oral tablet 5 mg	PG	
progesterone intramuscular oil 50 mg/ml	PG	
THYROID AGENTS		
levothyroxine sodium (Euthyrox Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	PG	
levothyroxine sodium (Levo-T Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 300 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	PG	
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
levothyroxine sodium (Levoxyl Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	PG	
liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg	PG	
methimazole oral tablet 10 mg, 5 mg	PG	
np thyroid oral tablet 120 mg, 15 mg, 30 mg, 60 mg, 90 mg	PG	
propylthiouracil oral tablet 50 mg	PG	
levothyroxine sodium (Unithroid Oral Tablet 100 Mcg, 112 Mcg, 125 Mcg, 137 Mcg, 150 Mcg, 175 Mcg, 200 Mcg, 25 Mcg, 300 Mcg, 50 Mcg, 75 Mcg, 88 Mcg)	PG	
VASOPRESSINS		
desmopressin ace spray refrig nasal solution 0.01 %	PG	
desmopressin acetate oral tablet 0.1 mg, 0.2 mg	PG	
desmopressin acetate spray nasal solution 0.01 %	PG	
GASTROINTESTINAL		
ANTICHOLINERGICS		
CUVPOSA ORAL SOLUTION 1 MG/5ML (*glycopyrrolate*)	PB	
dicyclomine hcl intramuscular solution 10 mg/ml	PG	
dicyclomine hcl oral capsule 10 mg	PG	
dicyclomine hcl oral solution 10 mg/5ml	PG	
dicyclomine hcl oral tablet 20 mg	PG	
ed-spaz oral tablet dispersible 0.125 mg	PG	
glycopyrrolate oral tablet 1 mg, 2 mg	PG	
hyoscyamine sulfate oral elixir 0.125 mg/5ml	PG	
hyoscyamine sulfate oral solution 0.125 mg/ml	PG	
hyoscyamine sulfate oral tablet 0.125 mg	PG	
hyoscyamine sulfate oral tablet dispersible 0.125 mg	PG	
hyoscyamine sulfate sublingual tablet sublingual 0.125 mg	PG	
methscopolamine bromide oral tablet 2.5 mg, 5 mg	PG	
hyoscyamine sulfate (Nulev Oral Tablet Dispersible 0.125 Mg)	PG	
oscimin oral tablet 0.125 mg	PG	
oscimin sublingual tablet sublingual 0.125 mg	PG	
propantheline bromide oral tablet 15 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
ANTIEMETICS		
aprepitant oral capsule 125 mg, 40 mg, 80 & 125 mg, 80 mg	PG	
prochlorperazine (Compro Rectal Suppository 25 Mg)	PG	
doxylamine-pyridoxine oral tablet delayed release 10-10 mg	PG	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	PG	
fosaprepitant dimeglumine intravenous solution reconstituted 150 mg	PG	
granisetron hcl oral tablet 1 mg	PG	
meclizine hcl oral tablet 12.5 mg, 25 mg	PG	
metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml	PG	
metoclopramide hcl oral tablet 10 mg, 5 mg	PG	
metoclopramide hcl oral tablet dispersible 5 mg	PG	
ondansetron hcl oral solution 4 mg/5ml	PG	
ondansetron hcl oral tablet 24 mg, 4 mg, 8 mg	PG	
ondansetron oral tablet dispersible 4 mg, 8 mg	PG	
prochlorperazine maleate oral tablet 10 mg, 5 mg	PG	
prochlorperazine rectal suppository 25 mg	PG	
promethazine hcl oral syrup 6.25 mg/5ml	PG	
promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg	PG	
promethazine hcl rectal suppository 12.5 mg, 25 mg	PG	
promethazine hcl (Promethegan Rectal Suppository 12.5 Mg, 25 Mg)	PG	
PROMETHEGAN RECTAL SUPPOSITORY 50 MG (*promethazine hcl*)	PG	
scopolamine transdermal patch 72 hour 1 mg/3days	PG	
trimethobenzamide hcl oral capsule 300 mg	PG	
BIOLOGIC DISEASE-MODIFYING AGENTS		
STELARA INTRAVENOUS SOLUTION 130 MG/26ML (*ustekinumab*)	PBSP	IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.)

Prescription Drug Name	Drug Tier	Drug Notes
H2-RECEPTOR ANTAGONISTS		
cimetidine hcl oral solution 300 mg/5ml	PG	
cimetidine oral tablet 200 mg, 300 mg, 400 mg, 800 mg	PG	
eq famotidine max st oral tablet 20 mg	PG	
eql heartburn prevention oral tablet 20 mg	PG	
famotidine oral suspension reconstituted 40 mg/5ml	PG	
famotidine oral tablet 20 mg, 40 mg	PG	
nizatidine oral capsule 150 mg, 300 mg	PG	
nizatidine oral solution 15 mg/ml	PG	
INFLAMMATORY BOWEL DISEASE		
ASACOL HD ORAL TABLET DELAYED RELEASE 800 MG (*mesalamine*)	PB	
balsalazide disodium oral capsule 750 mg	PG	
budesonide oral capsule delayed release particles 3 mg	PG	
hydrocortisone rectal enema 100 mg/60ml	PG	
mesalamine oral capsule delayed release 400 mg	PG	
mesalamine oral tablet delayed release 1.2 gm	PG	
mesalamine rectal enema 4 gm	PG	
mesalamine rectal suppository 1000 mg	PG	
mesalamine-cleanser rectal kit 4 gm	PG	
sulfasalazine oral tablet 500 mg	PG	
sulfasalazine oral tablet delayed release 500 mg	PG	
IRRITABLE BOWEL SYNDROME WITH CONSTIPATION		
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG (*linaclotide*)	PB	
IRRITABLE BOWEL SYNDROME WITH DIARRHEA		
alosetron hcl oral tablet 0.5 mg, 1 mg	PG	
LAXATIVES		
CLENPIQ ORAL SOLUTION 10-3.5-12 MG-GM - GM/160ML (*sod picosulfate-mag ox-cit acd*)	CE	
constulose oral solution 10 gm/15ml	PG	
enulose oral solution 10 gm/15ml	PG	

Prescription Drug Name	Drug Tier	Drug Notes
GAVILYTE-C ORAL SOLUTION RECONSTITUTED 240 GM (*peg 3350-kcl-nabcb-nacl-nasulf*)	PG	
peg 3350-kcl-nabcb-nacl-nasulf (Gavilyte-G Oral Solution Reconstituted 236 Gm)	PG	
bisacodyl-peg-kcl-nabicar-nacl (Gavilyte-H Oral Kit 5-210 Mg-Gm)	CE	
peg 3350-kcl-na bicarb-nacl (Gavilyte-N With Flavor Pack Oral Solution Reconstituted 420 Gm)	PG	
generlac oral solution 10 gm/15ml	PG	
lactulose encephalopathy oral solution 10 gm/15ml	PG	
lactulose oral solution 10 gm/15ml, 20 gm/30ml	PG	
mineral oil heavy oral oil	PG	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm	PG	
peg-3350/electrolytes oral solution reconstituted 236 gm	PG	
bisacodyl-peg-kcl-nabicar-nacl (Peg-Prep Oral Kit 5-210 Mg-Gm)	CE	
SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML (*na sulfate-k sulfate-mg sulf*)	CE	
MISCELLANEOUS		
cromolyn sodium oral concentrate 100 mg/5ml	PG	
diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml	PG	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	PG	
loperamide hcl oral capsule 2 mg	PG	
misoprostol oral tablet 100 mcg, 200 mcg	PG	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG (*naloxegol oxalate*)	PB	
opium oral tincture 10 mg/ml (1%)	PG	
sucralfate oral tablet 1 gm	PG	
ursodiol oral capsule 300 mg	PG	
ursodiol oral tablet 250 mg, 500 mg	PG	
PANCREATIC ENZYMES		
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000 UNIT, 6000 UNIT (*pancrelipase (lip-prot-amyl)*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
VIOKACE ORAL TABLET 10440 UNIT, 20880 UNIT (*pancrelipase (lip-prot-amyl)*)	PB	
PHOSPHATE BINDER AGENTS		
sevelamer hcl oral tablet 400 mg, 800 mg	PG	
PROTON PUMP INHIBITORS		
esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg	PG	
lansoprazole oral capsule delayed release 15 mg, 30 mg	PG	
lansoprazole oral tablet delayed release dispersible 15 mg, 30 mg	PG	
omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg	PG	
pantoprazole sodium oral tablet delayed release 20 mg, 40 mg	PG	
PRILOSEC ORAL PACKET 10 MG, 2.5 MG (*omeprazole magnesium*)	PB	
rabeprazole sodium oral tablet delayed release 20 mg	PG	
RECTAL,CORTICOSTEROIDS		
hydrocortisone (perianal) external cream 1 %, 2.5 %	PG	
hydrocortisone ace-pramoxine external cream 1-1 %	PG	
hydrocortisone (Procto-Med Hc External Cream 2.5 %)	PG	
hydrocortisone (Procto-Pak External Cream 1 %)	PG	
hydrocortisone (Proctozone-Hc External Cream 2.5 %)	PG	
ULCER THERAPY COMBINATIONS		
amoxicill-clarithro-lansopraz oral	PG	
GENITOURINARY		
BENIGN PROSTATIC HYPERPLASIA		
alfuzosin hcl er oral tablet extended release 24 hour 10 mg	PG	
dutasteride oral capsule 0.5 mg	PG	
dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg	PG	
finasteride oral tablet 5 mg	PG	
silodosin oral capsule 4 mg, 8 mg	PG	
tamsulosin hcl oral capsule 0.4 mg	PG	
DERMATOLOGY, WOUND CARE AGENTS		
acetic acid irrigation solution 0.25 %	PG	
aminoacetic acid irrigation solution 1.5 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
sodium chloride (gu irrigant) (Argyle Sterile Saline Irrigation Solution 0.9 %)	PG	
sodium chloride (gu irrigant) (Curity Sterile Saline Irrigation Solution 0.9 %)	PG	
glycine irrigation solution 1.5 %	PG	
ESTROGENS		
IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG (*estradiol*)	PB	
IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG, 4 MCG (*estradiol*)	PB	
MISCELLANEOUS		
cytra k crystals oral packet 3300-1002 mg	PG	
neomycin-polymyxin b gu irrigation solution 40-200000	PG	
phenazopyridine hcl (Phenazo Oral Tablet 200 Mg)	PG	
pot & sod cit-cit ac oral solution 550-500-334 mg/5ml	PG	
potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)	PG	
potassium citrate-citric acid oral solution 1100-334 mg/5ml	PG	
sod citrate-citric acid oral solution 500-334 mg/5ml	PG	
tricitrates oral solution 550-500-334 mg/5ml	PG	
PROGESTINS		
ENDOMETRIN VAGINAL INSERT 100 MG (*progesterone*)	PB	
URINARY ANTISPASMODICS		
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	PG	
darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg	PG	
flavoxate hcl oral tablet 100 mg	PG	
oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg	PG	
oxybutynin chloride oral syrup 5 mg/5ml	PG	
oxybutynin chloride oral tablet 5 mg	PG	
solifenacin succinate oral tablet 10 mg, 5 mg	PG	
tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
tolterodine tartrate oral tablet 1 mg, 2 mg	PG	
trospium chloride er oral capsule extended release 24 hour 60 mg	PG	
trospium chloride oral tablet 20 mg	PG	
VAGINAL ANTI-INFECTIVES		
clindamycin phosphate vaginal cream 2 %	PG	
metronidazole vaginal gel 0.75 %	PG	
miconazole 3 vaginal suppository 200 mg	PG	
terconazole vaginal cream 0.4 %, 0.8 %	PG	
terconazole vaginal suppository 80 mg	PG	
metronidazole (Vandazole Vaginal Gel 0.75 %)	PG	
HEMATOLOGIC		
ANTICOAGULANTS		
enoxaparin sodium injection solution 300 mg/3ml	PG	
enoxaparin sodium subcutaneous solution 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml	PG	
fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml	PG	
heparin (porcine) in nacl intravenous solution 1000-0.9 ut/500ml-%	PG	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	PG	
heparin sodium (porcine) pf injection solution 5000 unit/0.5ml	PG	
warfarin sodium (Jantoven Oral Tablet 1 Mg, 10 Mg, 2 Mg, 2.5 Mg, 3 Mg, 4 Mg, 5 Mg, 6 Mg, 7.5 Mg)	PG	LGC
warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	PG	LGC
XARELTO ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG (*rivaroxaban*)	PB	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG (*rivaroxaban*)	PB	
ENZYME REPLACEMENTS		
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT (*imiglucerase*)	PBSP	
miglustat oral capsule 100 mg	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
HEMATOPOIETIC GROWTH FACTORS		
ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 300 MCG/ML, 40 MCG/ML, 60 MCG/ML (*darbepoetin alfa*)	PBSP	
ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML (*darbepoetin alfa*)	PBSP	
DOPTELET ORAL TABLET 20 MG (*avatrombopag maleate*)	PBSP	
MULPLETA ORAL TABLET 3 MG (*lusutrombopag*)	PBSP	
NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML (*filgrastim-aafi*)	PBSP	
NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML (*filgrastim-aafi*)	PBSP	
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML (*epoetin alfa-epbx*)	PBSP	
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML (*pegfilgrastim-bmez*)	PBSP	
HEMOPHILIA A AGENTS		
adynovate intravenous solution reconstituted 1000 unit, 1500 unit, 2000 unit, 250 unit, 3000 unit, 500 unit, 750 unit	PBSP	
JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT (*ahf (bdd-rfviii peg-aucl)*)	PBSP	
KOGENATE FS INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (*antihemophilic factor (recomb)*)	PBSP	
KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (*antihemophil factor (rahf-pfm)*)	PBSP	
NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT (*antihemophil fact bd truncated*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
NUWIQ INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (*antihem fact (bdd-rfviii,sim)*)	PBSP	
NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT (*antihem fact (bdd-rfviii,sim)*)	PBSP	
HEMOPHILIA B AGENTS		
REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 500 UNIT (*coagulation factor ix glycopeg*)	PBSP	
MISCELLANEOUS		
cyanocobalamin-methylcobalamin (Abaneu-Sl Sublingual Tablet Sublingual 600-600 Mcg)	PG	
folic acid-vit b6-vit b12 (Airavite Oral Tablet 2.5-25-1 Mg)	PG	
aminocaproic acid oral tablet 1000 mg, 500 mg	PG	
anagrelide hcl oral capsule 0.5 mg, 1 mg	PG	
cilostazol oral tablet 100 mg, 50 mg	PG	
fabb oral tablet 2.2-25-1 mg	PG	
fa-vitamin b-6-vitamin b-12 oral tablet 2.2-25-0.5 mg	PG	
ferocon oral capsule	PG	
ferotrinsic oral capsule	PG	
fe fum-fa-b cmp-c-zn-mg-mn-cu (Ferrocite Plus Oral Tablet 106-1 Mg)	PG	
FIRAZYR SUBCUTANEOUS SOLUTION 30 MG/3ML (*icatibant acetate*)	PBSP	
folbee oral tablet 2.5-25-1 mg	PG	
folplex 2.2 oral tablet 2.2-25-0.5 mg	PG	
foltrin oral capsule	PG	
hematinic plus vit/minerals oral tablet 106-1 mg	PG	
hematinic/folic acid oral tablet 324-1 mg	PG	
ferrous fumarate-folic acid (Hemocyte-F Oral Tablet 324-1 Mg)	PG	
icatibant acetate subcutaneous solution 30 mg/3ml	PBSP	
iron polysacch cmplx-b12-fa (Iferex 150 Forte Oral Capsule 150-25-1 Mg-Mcg-Mg)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
fefum-fepo-fa-b cmp-c-zn-mn-cu (K-Tan Plus Oral Capsule 162-115.2-1 Mg)	PG	
folic acid-vit b6-vit b12 (Nufol Oral Tablet 2.5-25-1 Mg)	PG	
pentoxifylline er oral tablet extended release 400 mg	PG	
poly-iron 150 forte oral capsule 150-25-1 mg-mcg-mg	PG	
polysaccharide iron forte oral capsule 150-25-1 mg-mcg-mg	PG	
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT (*c1 esterase inhibitor (recomb)*)	PBSP	
tl-hem 150 oral tablet 150-1 mg	PG	
tranexamic acid intravenous solution 1000 mg/10ml	PG	
tranexamic acid oral tablet 650 mg	PG	
fe fumarate-b12-vit c-fa-ifc (Tricon Oral Capsule)	PG	
folic acid-vit b6-vit b12 (Virt-Gard Oral Tablet 2.2-25-1 Mg)	PG	
westab one oral tablet 2.5-25-1 mg	PG	
PLATELET AGGREGATION INHIBITORS		
aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg	PG	
BRILINTA ORAL TABLET 60 MG, 90 MG (*ticagrelor*)	PB	
clopidogrel bisulfate oral tablet 300 mg, 75 mg	PG	
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	PG	
prasugrel hcl oral tablet 10 mg, 5 mg	PG	
VITAMINS		
folic acid injection solution 5 mg/ml	PG	
hydroxocobalamin acetate intramuscular solution 1000 mcg/ml	PG	
IMMUNOLOGIC AGENTS		
ALLERGENIC EXTRACTS		
ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 300 IR (*grass mix pollens allergen ext*)	PB	
ORALAIR SUBLINGUAL TABLET SUBLINGUAL 300 IR (*grass mix pollens allergen ext*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
AUTOIMMUNE AGENTS (PHYSICIAN ADMINISTERED)		
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG (*infliximab*)	PBSP	
BIOLOGIC DISEASE-MODIFYING AGENTS		
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML (*etanercept*)	PBSP	IBC (Preferred agent for all conditions except Psoriasis)
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML, 50 MG/ML (*etanercept*)	PBSP	IBC (Preferred agent for all conditions except Psoriasis)
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG (*etanercept*)	PBSP	IBC (Preferred agent for all conditions except Psoriasis)
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML (*etanercept*)	PBSP	IBC (Preferred agent for all conditions except Psoriasis)
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT 80 MG/0.8ML, 80 MG/0.8ML & 40MG/0.4ML (*adalimumab*)	PBSP	
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML (*adalimumab*)	PBSP	
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML, 80 MG/0.8ML (*adalimumab*)	PBSP	
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.8ML (*adalimumab*)	PBSP	
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML (*adalimumab*)	PBSP	
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML (*adalimumab*)	PBSP	
KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML (*sarilumab*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis)
KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/1.14ML, 200 MG/1.14ML (*sarilumab*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis)
ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML (*abatacept*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis. Not covered for other conditions)

Prescription Drug Name	Drug Tier	Drug Notes
ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG (*abatacept*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis. Not covered for other conditions)
ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML, 50 MG/0.4ML, 87.5 MG/0.7ML (*abatacept*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis. Not covered for other conditions)
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG (*upadacitinib*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis)
SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML (*golimumab*)	PBSP	
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT 75 MG/0.83ML (*risankizumab-rzaa*)	PBSP	IBC (Preferred agent for Psoriasis)
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML (*ustekinumab*)	PBSP	IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.)
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML (*ixekizumab*)	PBSP	IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis or Ankylosing Spondylitis)
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML (*ixekizumab*)	PBSP	IBC (Preferred agent for Psoriasis. Not covered for Psoriatic Arthritis or Ankylosing Spondylitis)
TREMFYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML (*guselkumab*)	PBSP	IBC (Preferred agent for Psoriasis)
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (*guselkumab*)	PBSP	IBC (Preferred agent for Psoriasis)
XELJANZ ORAL SOLUTION 1 MG/ML (*tofacitinib citrate*)	PB	
XELJANZ ORAL TABLET 10 MG (*tofacitinib citrate*)	PBSP	IBC (Preferred agent for Ulcerative Colitis (after failure of Humira))

Prescription Drug Name	Drug Tier	Drug Notes
XELJANZ ORAL TABLET 5 MG (*tofacitinib citrate*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis and Ulcerative Colitis (after failure of Humira). Not covered for Psoriatic Arthritis.)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG (*tofacitinib citrate*)	PBSP	IBC (Preferred agent for Rheumatoid Arthritis. Not covered for Psoriatic Arthritis.)
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 22 MG (*tofacitinib citrate*)	PBSP	IBC (Preferred agent for Ulcerative Colitis (after failure of Humira))
COX-2 INHIBITORS		
celecoxib oral capsule 400 mg	PG	
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS		
hydroxychloroquine sulfate oral tablet 200 mg	PG	
DISEASE-MODIFYING ANTI-RHEUMATIC DRUGS DMARDS		
leflunomide oral tablet 10 mg, 20 mg	PG	
OTEZLA ORAL TABLET 30 MG (*apremilast*)	PBSP	IBC (Preferred agent for Psoriasis and Psoriatic Arthritis)
OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG (*apremilast*)	PBSP	IBC (Preferred agent for Psoriasis and Psoriatic Arthritis)
RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 17.5 MG/0.35ML, 20 MG/0.4ML, 22.5 MG/0.45ML, 25 MG/0.5ML, 30 MG/0.6ML, 7.5 MG/0.15ML (*methotrexate (anti-rheumatic)*)	PBSP	
HEREDITARY ANGIOEDEMA		
TAKHZYRO SUBCUTANEOUS SOLUTION 300 MG/2ML (*lanadelumab-flyo*)	PBSP	
IMMUNOMODULATORS		
REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG (*lenalidomide*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG (*thalidomide*)	PBSP	
IMMUNOSUPPRESSANTS		
azathioprine oral tablet 50 mg	PG	
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	PBSP	
cyclosporine modified oral solution 100 mg/ml	PBSP	
cyclosporine oral capsule 100 mg, 25 mg	PBSP	
cyclosporine modified (Gengraf Oral Capsule 100 Mg, 25 Mg)	PBSP	
cyclosporine modified (Gengraf Oral Solution 100 Mg/Ml)	PBSP	
mycophenolate mofetil oral capsule 250 mg	PBSP	
mycophenolate mofetil oral suspension reconstituted 200 mg/ml	PBSP	
mycophenolate mofetil oral tablet 500 mg	PBSP	
mycophenolate sodium oral tablet delayed release 180 mg, 360 mg	PBSP	
sirolimus oral solution 1 mg/ml	PBSP	
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	PBSP	
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	PG	
NSAIDS		
ibuprofen (Ibu Oral Tablet 400 Mg, 600 Mg, 800 Mg)	PG	
indomethacin er oral capsule extended release 75 mg	PG	
indomethacin oral capsule 25 mg, 50 mg	PG	
NUTRITIONAL/SUPPLEMENTS		
ELECTROLYTES		
dextrose-sodium chloride intravenous solution 5-0.45 %, 5-0.9 %	PG	
potassium bicarbonate (Effer-K Oral Tablet Effervescent 25 Meq)	PG	
fluoritab oral solution 0.275 (0.125 f) mg/drop	CE	
fluoritab oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg	CE	
fluoritab oral tablet chewable 2.2 (1 f) mg	PG	
iodine strong oral solution 5 %	PG	
potassium chloride (Klor-Con 10 Oral Tablet Extended Release 10 Meq)	PG	
potassium chloride crys er (Klor-Con M10 Oral Tablet Extended Release 10 Meq)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ (*potassium chloride crys er*)	PG	
potassium chloride crys er (Klor-Con M20 Oral Tablet Extended Release 20 Meq)	PG	
potassium chloride (Klor-Con Oral Packet 20 Meq)	PG	
potassium chloride (Klor-Con Oral Tablet Extended Release 8 Meq)	PG	
potassium bicarbonate (Klor-Con/Ef Oral Tablet Effervescent 25 Meq)	PG	
potassium bicarbonate (K-Prime Oral Tablet Effervescent 25 Meq)	PG	
sodium fluoride (Nafrinse Drops Oral Solution 0.275 (0.125 F) Mg/Drop)	CE	
sodium fluoride (Nafrinse Oral Tablet Chewable 2.2 (1 F) Mg)	PG	
k phos mono-sod phos di & mono (Phospha 250 Neutral Oral Tablet 155-852-130 Mg)	PG	
phosphorous oral tablet 155-852-130 mg	PG	
k phos mono-sod phos di & mono (Phospho-Trin 250 Neutral Oral Tablet 155-852-130 Mg)	PG	
potassium chloride crys er oral tablet extended release 10 meq, 20 meq	PG	
potassium chloride er oral capsule extended release 10 meq, 8 meq	PG	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	PG	
potassium chloride oral packet 20 meq	PG	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	PG	
sodium fluoride oral solution 1.1 (0.5 f) mg/ml	CE	
sodium fluoride oral tablet 1.1 (0.5 f) mg	CE	
sodium fluoride oral tablet 2.2 (1 f) mg	PG	
sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg	CE	
sodium fluoride oral tablet chewable 2.2 (1 f) mg	PG	
virt-phos 250 neutral oral tablet 155-852-130 mg	PG	
zinc sulfate intravenous solution 5 mg/ml	PG	

Prescription Drug Name	Drug Tier	Drug Notes
IV REPLACEMENT SOLUTIONS		
sodium chloride intravenous solution 0.9 %, 3 %	PG	
VITAMINS		
adc/f (0.5mg/ml) oral solution 0.5 mg/ml	PG	
aminobenzoate potassium oral packet 2 gm	PG	
nutritional supplements (Asilnasalrms Oral Capsule)	PG	
biocel oral tablet	PG	
b-plex oral tablet	PG	
b-plex plus oral tablet	PG	
calcitriol oral capsule 0.25 mcg, 0.5 mcg	PG	
calcitriol oral solution 1 mcg/ml	PG	
cyanocobalamin injection solution 1000 mcg/ml	PG	
doxercalciferol oral capsule 0.5 mcg, 1 mcg, 2.5 mcg	PG	
ergocalciferol oral capsule 1.25 mg (50000 ut)	PG	
FLORIVA PLUS ORAL SOLUTION 0.25 MG/ML (*pediatric multivitamins-fl*)	PB	
FOLBEE PLUS CZ ORAL TABLET 5 MG (*b-complex-c-biotin-minerals-fa*)	PG	
folbee plus oral tablet	PG	
folic acid oral tablet 1 mg	PG	
INATAL GT ORAL TABLET (*prenatal vit-dss-fe cbn-fa*)	PG	
kp folic acid oral tablet 1 mg	PG	
multiple vitamins-minerals (Lysiplex Plus Oral Tablet)	PG	
multi-vit/iron/fluoride oral solution 0.25-10 mg/ml	PG	
multivitamin/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml	PG	
multi-vitamin/fluoride oral solution 0.5 mg/ml	PG	
multivitamin/fluoride oral tablet chewable 0.25 mg, 0.5 mg, 1 mg	PG	
multi-vitamin/fluoride/iron oral solution 0.25-10 mg/ml	PG	
b complex-c-folic acid (Nephronex Oral Tablet)	PG	
multiple vitamins-minerals (Nutrifac Zx Oral Tablet)	PG	
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	PG	
phytonadione injection solution 1 mg/0.5ml, 10 mg/ml	PG	
phytonadione oral tablet 5 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
pnv-dha oral capsule 27-0.6-0.4-300 mg	PG	
pnv-select oral tablet 27-0.6-0.4 mg	PG	
POLY-VI-FLOR ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (*pediatric multivitamins-fl*)	PB	
PRENATABS RX ORAL TABLET 29-1 MG (*prenatal vit-iron carbonyl-fa*)	PG	
prenatal 19 oral tablet	PBSP	
prenatal 19 oral tablet chewable	PG	
pyridoxine hcl injection solution 100 mg/ml	PG	
QUFLORA PEDIATRIC ORAL SOLUTION 0.25 MG/ML, 0.5 MG/ML (*pediatric multivitamins-fl*)	PB	
QUFLORA PEDIATRIC ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG (*pediatric multivitamins-fl*)	PB	
reno caps oral capsule 1 mg	PG	
thiamine hcl injection solution 100 mg/ml	PG	
TRINATE ORAL TABLET (*prenatal vit-fe fumarate-fa*)	PG	
tri-vite/fluoride oral solution 0.25 mg/ml, 0.5 mg/ml	PG	
urosex oral tablet	PG	
v-c forte oral capsule	PG	
multiple vitamins-minerals (Vic-Forte Oral Capsule)	PG	
virt-caps oral capsule 1 mg	PG	
multiple vitamins-minerals (Vita S Forte Oral Tablet)	PG	
multiple vitamins-minerals (Vitacel Oral Tablet)	PG	
vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut)	PG	
vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml	PG	
vita-min oral capsule	PG	
vitamins acd-fluoride oral solution 0.25 mg/ml	PG	
vp-vite rx oral tablet 1 mg	PG	
westab max oral tablet 2.5-25-2 mg	PG	
OPHTHALMIC		
ANTIALLERGICS		
azelastine hcl ophthalmic solution 0.05 %	PG	
cromolyn sodium ophthalmic solution 4 %	PG	
epinastine hcl ophthalmic solution 0.05 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
olopatadine hcl ophthalmic solution 0.1 %, 0.2 %	PG	
ANTIGLAUCOMA		
apraclonidine hcl ophthalmic solution 0.5 %	PG	
betaxolol hcl ophthalmic solution 0.5 %	PG	
brimonidine tartrate ophthalmic solution 0.15 %, 0.2 %	PG	
carteolol hcl ophthalmic solution 1 %	PG	
dorzolamide hcl-timolol mal ophthalmic solution 22.3-6.8 mg/ml	PG	
dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 %	PG	
latanoprost ophthalmic solution 0.005 %	PG	
levobunolol hcl ophthalmic solution 0.5 %	PG	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	PG	
timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %	PG	
timolol maleate ophthalmic solution 0.25 %, 0.5 %, 0.5 % (daily)	PG	
ANTI-INFECTIVE/ANTI-INFLAMMATORY		
bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %	PG	
neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1	PG	
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	PG	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	PG	
bacitracin-polymyx-neo-hc (Neo-Polycin Hc Ophthalmic Ointment 1 %)	PG	
sulfacetamide-prednisolone ophthalmic solution 10-0.23 %	PG	
tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %	PG	
ANTI-INFECTIVES		
ak-poly-bac ophthalmic ointment 500-10000 unit/gm	PG	
bacitracin ophthalmic ointment 500 unit/gm	PG	
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	PG	
ciprofloxacin hcl ophthalmic solution 0.3 %	PG	
erythromycin ophthalmic ointment 5 mg/gm	PG	
gatifloxacin ophthalmic solution 0.5 %	PG	
GENTAK OPHTHALMIC OINTMENT 0.3 % (*gentamicin sulfate*)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
gentamicin sulfate ophthalmic solution 0.3 %	PG	
levofloxacin ophthalmic solution 0.5 %	PG	
moxifloxacin hcl ophthalmic solution 0.5 %	PG	
NATACYN OPHTHALMIC SUSPENSION 5 % (*natamycin*)	PB	
neomycin-bacitracin zn-polymyx ophthalmic ointment 3.5-400-10000 , 5-400-10000	PG	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	PG	
neomycin-bacitracin zn-polymyx (Neo-Polycin Ophthalmic Ointment 3.5-400-10000)	PG	
ofloxacin ophthalmic solution 0.3 %	PG	
bacitracin-polymyxin b (Polycin Ophthalmic Ointment 500-10000 Unit/Gm)	PG	
polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%	PG	
sulfacetamide sodium ophthalmic ointment 10 %	PG	
sulfacetamide sodium ophthalmic solution 10 %	PG	
tobramycin ophthalmic solution 0.3 %	PG	
TOBREX OPHTHALMIC OINTMENT 0.3 % (*tobramycin*)	PB	
trifluridine ophthalmic solution 1 %	PG	
ANTI-INFLAMMATORIES		
bromfenac sodium (once-daily) ophthalmic solution 0.09 %	PG	
dexamethasone sodium phosphate ophthalmic solution 0.1 %	PG	
diclofenac sodium ophthalmic solution 0.1 %	PG	
fluorometholone ophthalmic suspension 0.1 %	PG	
flurbiprofen sodium ophthalmic solution 0.03 %	PG	
FML OPHTHALMIC OINTMENT 0.1 % (*fluorometholone*)	PB	
ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %	PG	
loteprednol etabonate ophthalmic suspension 0.5 %	PG	
prednisolone acetate ophthalmic suspension 1 %	PG	
prednisolone sodium phosphate ophthalmic solution 1 %	PB	
DRY EYE DISEASE		
XIIDRA OPHTHALMIC SOLUTION 5 % (*lifitegrast*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
MISCELLANEOUS		
tetracaine hcl (Altacaine Ophthalmic Solution 0.5 %)	PG	
altafluor benox ophthalmic solution 0.25-0.4 %	PG	
phenylephrine hcl (Altafrin Ophthalmic Solution 10 %, 2.5 %)	PG	
cyclopentolate hcl ophthalmic solution 0.5 %, 1 %, 2 %	PG	
fluorescein-benoxinate ophthalmic solution 0.25-0.4 %	PG	
fluorescein sodium (Fluor-I-Strips A.T. Ophthalmic Strip 1 Mg)	PG	
phenylephrine hcl ophthalmic solution 10 %, 2.5 %	PG	
proparacaine hcl ophthalmic solution 0.5 %	PG	
proparacaine-fluorescein ophthalmic solution 0.5-0.25 %	PG	
tetracaine hcl ophthalmic solution 0.5 %	PG	
tropicamide ophthalmic solution 0.5 %, 1 %	PG	
RETINAL DISORDERS		
EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML (*aflibercept*)	PBSP	
EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML (*aflibercept*)	PBSP	
LUCENTIS INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML (*ranibizumab*)	PBSP	
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML, 0.5 MG/0.05ML (*ranibizumab*)	PBSP	
RESPIRATORY		
ANAPHYLAXIS TREATMENT AGENTS		
epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml	PG	
SYMJEPI INJECTION SOLUTION PREFILLED SYRINGE 0.15 MG/0.3ML, 0.3 MG/0.3ML (*epinephrine*)	PB	
ANTICHOLINERGIC/BETA AGONIST COMBINATIONS		
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/INH (*umeclidinium-vilanterol*)	PB	
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT (*glycopyrrolate-formoterol*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act	PG	
ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml	PG	
ANTICHOLINERGICS		
ipratropium bromide inhalation solution 0.02 %	PG	
ipratropium bromide nasal solution 0.03 %, 0.06 %	PG	
SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG (*tiotropium bromide monohydrate*)	PB	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT (*tiotropium bromide monohydrate*)	PB	
YUPELRI INHALATION SOLUTION 175 MCG/3ML (*revefenacin*)	PB	
ANTIHISTAMINES		
azelastine hcl nasal solution 0.15 %, 137 mcg/spray	PG	
carbinoxamine maleate oral solution 4 mg/5ml	PG	
carbinoxamine maleate oral tablet 4 mg	PG	
cetirizine hcl oral solution 1 mg/ml	PG	
clemastine fumarate oral tablet 2.68 mg	PG	
cyproheptadine hcl oral syrup 2 mg/5ml	PG	
cyproheptadine hcl oral tablet 4 mg	PG	
desloratadine oral tablet 5 mg	PG	
desloratadine oral tablet dispersible 2.5 mg, 5 mg	PG	
diphenhydramine hcl oral elixir 12.5 mg/5ml	PG	
hydroxyzine hcl oral syrup 10 mg/5ml	PG	
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	PG	
hydroxyzine pamoate oral capsule 100 mg, 25 mg, 50 mg	PG	
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	PG	
levocetirizine dihydrochloride oral tablet 5 mg	PG	
olopatadine hcl nasal solution 0.6 %	PG	
RYCLORA ORAL SOLUTION 2 MG/5ML (*dexchlorpheniramine maleate*)	PG	
BETA AGONISTS		
albuterol sulfate er oral tablet extended release 12 hour 4 mg, 8 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	PG	
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	PG	
albuterol sulfate oral syrup 2 mg/5ml	PG	
albuterol sulfate oral tablet 2 mg, 4 mg	PG	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	PG	
levalbuterol tartrate inhalation aerosol 45 mcg/act	PG	
PERFOROMIST INHALATION NEBULIZATION SOLUTION 20 MCG/2ML (*formoterol fumarate*)	PB	
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT (*olodaterol hcl*)	PB	
terbutaline sulfate oral tablet 2.5 mg, 5 mg	PG	
BIOLOGIC RESPONSE MODIFIERS		
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML (*benralizumab*)	PBSP	
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML (*benralizumab*)	PBSP	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML (*mepolizumab*)	PBSP	
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (*mepolizumab*)	PBSP	
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED 100 MG (*mepolizumab*)	PBSP	
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML (*omalizumab*)	PBSP	
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG (*omalizumab*)	PBSP	
COLD/COUGH		
benzonatate oral capsule 100 mg, 150 mg, 200 mg	PG	
hydrocod polst-cpm polst er oral suspension extended release 10-8 mg/5ml	PG	
hydrocodone-homatropine oral syrup 5-1.5 mg/5ml	PG	
hydrocodone-homatropine oral tablet 5-1.5 mg	PG	
hydromet oral syrup 5-1.5 mg/5ml	PG	

Prescription Drug Name	Drug Tier	Drug Notes
NINJACOF-XG ORAL LIQUID 200-8 MG/5ML (*guaifenesin-codeine*)	PB	
promethazine-codeine oral solution 6.25-10 mg/5ml	PG	
promethazine-codeine oral syrup 6.25-10 mg/5ml	PG	
promethazine-dm oral syrup 6.25-15 mg/5ml	PG	
promethazine-phenyleph-codeine oral syrup 6.25-5-10 mg/5ml	PG	
promethazine-phenylephrine oral syrup 6.25-5 mg/5ml	PG	
pseudoeph-bromphen-dm oral syrup 30-2-10 mg/5ml	PG	
TUSNEL C ORAL SYRUP 30-10-100 MG/5ML (*pseudoephedrine-codeine-gg*)	PB	
LEUKOTRIENE RECEPTOR ANTAGONISTS		
montelukast sodium oral packet 4 mg	PG	
montelukast sodium oral tablet 10 mg	PG	
montelukast sodium oral tablet chewable 4 mg, 5 mg	PG	
zafirlukast oral tablet 10 mg, 20 mg	PG	
MAST CELL STABILIZERS		
cromolyn sodium inhalation nebulization solution 20 mg/2ml	PG	
MISCELLANEOUS		
acetylcysteine inhalation solution 10 %, 20 %	PG	
ESBRIET ORAL CAPSULE 267 MG (*pirfenidone*)	PBSP	
ESBRIET ORAL TABLET 267 MG, 801 MG (*pirfenidone*)	PBSP	
PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML (*alpha1-proteinase inhibitor*)	PBSP	
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG (*alpha1-proteinase inhibitor*)	PBSP	
sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 %	PG	
NASAL STEROIDS		
flunisolide nasal solution 25 mcg/act (0.025%)	PG	
fluticasone propionate nasal suspension 50 mcg/act	PG	
mometasone furoate nasal suspension 50 mcg/act	PG	
PULMONARY FIBROSIS AGENTS		
OFEV ORAL CAPSULE 100 MG, 150 MG (*nintedanib esylate*)	PBSP	

Prescription Drug Name	Drug Tier	Drug Notes
SEVERE ASTHMA AGENTS		
DUPIXENT SOLUTION PEN-INJECTOR 300 MG/2ML SUBCUTANEOUS 300 MG/2ML (*dupilumab*)	PBSP	
DUPIXENT SOLUTION PREFILLED SYRINGE 200 MG/1.14ML SUBCUTANEOUS 200 MG/1.14ML (*dupilumab*)	PBSP	
DUPIXENT SOLUTION PREFILLED SYRINGE 300 MG/2ML SUBCUTANEOUS 300 MG/2ML (*dupilumab*)	PBSP	
STEROID INHALANTS		
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT (*fluticasone furoate*)	PB	
budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml	PG	
FLOVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/BLIST, 250 MCG/BLIST, 50 MCG/BLIST (*fluticasone propionate (inhal)*)	PB	
FLOVENT HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT, 44 MCG/ACT (*fluticasone propionate hfa*)	PB	
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT (*beclomethasone diprop hfa*)	PB	
STEROID/BETA-AGONIST COMBINATIONS		
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT (*fluticasone-salmeterol*)	PB	N8 (Listing does not include certain NDCs)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/INH, 200-25 MCG/INH (*fluticasone furoate-vilanterol*)	PB	N8 (Listing does not include certain NDCs)
SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT (*budesonide-formoterol fumarate*)	PB	
XANTHINES		
theophylline er oral tablet extended release 12 hour 300 mg, 450 mg	PG	
theophylline er oral tablet extended release 24 hour 400 mg, 600 mg	PG	

Prescription Drug Name	Drug Tier	Drug Notes
theophylline oral solution 80 mg/15ml	PG	
TOPICAL		
BIOLOGIC DISEASE-MODIFYING AGENTS		
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML (*ustekinumab*)	PBSP	IBC (Preferred agent for Psoriasis. Preferred agent for Crohn's Disease and Ulcerative Colitis after failure of Humira. Not covered for Psoriatic Arthritis.)
DERMATOLOGY, ACNE		
adapalene external cream 0.1 %	PG	
adapalene external gel 0.1 %, 0.3 %	PG	
adapalene external pad 0.1 %	PG	
adapalene-benzoyl peroxide external gel 0.1-2.5 %	PG	
isotretinoin (Amnesteem Oral Capsule 10 Mg, 20 Mg, 40 Mg)	PG	
tretinoin (Avita External Cream 0.025 %)	PG	
tretinoin (Avita External Gel 0.025 %)	PG	
benzoyl peroxide (Benzepro External Foam 5.3 %)	PG	
benzoyl peroxide (Benzepro Short Contact External Foam 9.8 %)	PG	
benzoyl perox-hydrocortisone external lotion 5-0.5 %	PG	
benzoyl peroxide external foam 9.8 %	PG	
benzoyl peroxide-erythromycin external gel 5-3 %	PG	
bp wash external liquid 2.5 %, 7 %	PG	
isotretinoin (Claravis Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	PG	
clindamycin phosphate (Clindacin Etz External Swab 1 %)	PG	
clindamycin phosphate (Clindacin-P External Swab 1 %)	PG	
clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 %	PG	
clindamycin phosphate external foam 1 %	PG	
clindamycin phosphate external lotion 1 %	PG	
clindamycin phosphate external solution 1 %	PG	
clindamycin phosphate external swab 1 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
clindamycin-tretinoin external gel 1.2-0.025 %	PG	
dapsone external gel 5 %, 7.5 %	PG	
ery external pad 2 %	PG	
erythromycin external gel 2 %	PG	
erythromycin external solution 2 %	PG	
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	PG	
isotretinoin (Myorisan Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	PG	
clindamycin-benzoyl per (refr) (Neuac External Gel 1.2-5 %)	PG	
benzoyl peroxide (Pr Benzoyl Peroxide Wash External Liquid 7 %)	PG	
resorcinol-sulfur external lotion 2-5 %	PG	
sodium sulfacetamide-bakuchiol external liquid 10 %	PG	
sulfacetamide sodium (acne) external lotion 10 %	PG	
sulfacetamide sodium-sulfur external pad 10-4 %	PG	
sulfamez wash external emulsion 10-1 %	PG	
tretinoin external cream 0.025 %, 0.05 %, 0.1 %	PG	
tretinoin external gel 0.01 %, 0.025 %, 0.05 %	PG	
tretinoin microsphere external gel 0.04 %, 0.1 %	PG	
tretinoin microsphere pump external gel 0.04 %	PG	
isotretinoin (Zenatane Oral Capsule 10 Mg, 20 Mg, 30 Mg, 40 Mg)	PG	
DERMATOLOGY, ACTINIC KERATOSIS		
fluorouracil external cream 0.5 %, 5 %	PG	
fluorouracil external solution 2 %, 5 %	PG	
imiquimod external cream 5 %	PG	
imiquimod pump external cream 3.75 %	PG	
DERMATOLOGY, ANTIBIOTICS		
gentamicin sulfate external cream 0.1 %	PG	
gentamicin sulfate external ointment 0.1 %	PG	
mafenide acetate external packet 5 %	PG	
mupirocin external ointment 2 %	PG	
silver sulfadiazine external cream 1 %	PG	
silver sulfadiazine (Ssd External Cream 1 %)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
DERMATOLOGY, ANTIFUNGALS		
athletes foot (clotrimazole) external cream 1 %	PG	
athletes foot (terbinafine) external cream 1 %	PG	
ciclopirox (Ciclodan External Solution 8 %)	PG	
ciclopirox external gel 0.77 %	PG	
ciclopirox external shampoo 1 %	PG	
ciclopirox external solution 8 %	PG	
ciclopirox olamine external cream 0.77 %	PG	
ciclopirox olamine external suspension 0.77 %	PG	
clotrimazole athletes foot external cream 1 %	PG	
clotrimazole external cream 1 %	PG	
clotrimazole external solution 1 %	PG	
clotrimazole-betamethasone external cream 1-0.05 %	PG	
clotrimazole-betamethasone external lotion 1-0.05 %	PG	
econazole nitrate external cream 1 %	PG	
ketoconazole external cream 2 %	PG	
luliconazole external cream 1 %	PG	
miconazole-zinc oxide-petrolat external ointment 0.25-15-81.35 %	PG	
naftifine hcl external cream 1 %, 2 %	PG	
nystatin (Nyamyc External Powder 100000 Unit/Gm)	PG	
nystatin external cream 100000 unit/gm	PG	
nystatin external ointment 100000 unit/gm	PG	
nystatin external powder 100000 unit/gm	PG	
nystatin-triamcinolone external cream 100000-0.1 unit/gm-%	PG	
nystatin-triamcinolone external ointment 100000-0.1 unit/gm-%	PG	
nystatin (Nystop External Powder 100000 Unit/Gm)	PG	
DERMATOLOGY, ANTIPRURITIC		
doxepin hcl external cream 5 %	PG	
DERMATOLOGY, ANTIPSORIATICS		
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	PG	
calcipotriene external ointment 0.005 %	PG	
calcipotriene external solution 0.005 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
calcipotriene (Calcitrene External Ointment 0.005 %)	PG	
COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (*secukinumab*)	PBSP	IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis)
COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (*secukinumab*)	PBSP	IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis)
COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (*secukinumab*)	PBSP	IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis)
COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML (*secukinumab*)	PBSP	IBC (Preferred agent for Ankylosing Spondylitis and Psoriatic Arthritis. Not covered for Psoriasis)
methoxsalen rapid oral capsule 10 mg	PG	
tazarotene external cream 0.1 %	PG	
DERMATOLOGY, ANTISEBORRHEICS		
ketoconazole external shampoo 2 %	PG	
selenium sulfide external lotion 2.5 %	PG	
DERMATOLOGY, ATOPIC DERMATITIS		
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 MG/2ML (*dupilumab*)	PBSP	
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML (*dupilumab*)	PBSP	
DERMATOLOGY, CORTICOSTEROIDS		
ala-cort external cream 1 %, 2.5 %	PG	
alclometasone dipropionate external cream 0.05 %	PG	
alclometasone dipropionate external ointment 0.05 %	PG	
amcinonide external cream 0.1 %	PG	
amcinonide external lotion 0.1 %	PG	
amcinonide external ointment 0.1 %	PB	
fluticasone propionate (Beser External Lotion 0.05 %)	PG	
betamethasone dipropionate aug external cream 0.05 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
betamethasone dipropionate aug external gel 0.05 %	PG	
betamethasone dipropionate aug external lotion 0.05 %	PG	
betamethasone dipropionate aug external ointment 0.05 %	PG	
betamethasone dipropionate external cream 0.05 %	PG	
betamethasone dipropionate external lotion 0.05 %	PG	
betamethasone dipropionate external ointment 0.05 %	PG	
betamethasone valerate external cream 0.1 %	PG	
betamethasone valerate external foam 0.12 %	PG	
betamethasone valerate external lotion 0.1 %	PG	
betamethasone valerate external ointment 0.1 %	PG	
clobetasol prop emollient base external cream 0.05 %	PG	
clobetasol propionate e external cream 0.05 %	PG	
clobetasol propionate emulsion external foam 0.05 %	PG	
clobetasol propionate external cream 0.05 %	PG	
clobetasol propionate external foam 0.05 %	PG	
clobetasol propionate external gel 0.05 %	PG	
clobetasol propionate external liquid 0.05 %	PG	
clobetasol propionate external lotion 0.05 %	PG	
clobetasol propionate external ointment 0.05 %	PG	
clobetasol propionate external shampoo 0.05 %	PG	
clobetasol propionate external solution 0.05 %	PG	
clobetasol propionate (Clodan External Shampoo 0.05 %)	PG	
desonide external cream 0.05 %	PG	
desonide external lotion 0.05 %	PG	
desonide external ointment 0.05 %	PG	
desoximetasone external cream 0.05 %, 0.25 %	PG	
desoximetasone external gel 0.05 %	PG	
desoximetasone external liquid 0.25 %	PG	
desoximetasone external ointment 0.25 %	PG	
DUOBRII EXTERNAL LOTION 0.01-0.045 % (*halobetasol prop-tazarotene*)	PB	
ENSTILAR EXTERNAL FOAM 0.005-0.064 % (*calcipotriene-betameth diprop*)	PB	

Prescription Drug Name	Drug Tier	Drug Notes
fluocinolone acetonide body external oil 0.01 %	PG	
fluocinolone acetonide external cream 0.01 %, 0.025 %	PG	
fluocinolone acetonide external ointment 0.025 %	PG	
fluocinolone acetonide external solution 0.01 %	PG	
fluocinolone acetonide scalp external oil 0.01 %	PG	
fluocinonide emulsified base external cream 0.05 %	PG	
fluocinonide external cream 0.05 %, 0.1 %	PG	
fluocinonide external gel 0.05 %	PG	
fluocinonide external ointment 0.05 %	PG	
fluocinonide external solution 0.05 %	PG	
flurandrenolide external cream 0.05 %	PG	
flurandrenolide external ointment 0.05 %	PG	
fluticasone propionate external cream 0.05 %	PG	
fluticasone propionate external lotion 0.05 %	PG	
fluticasone propionate external ointment 0.005 %	PG	
halcinonide external cream 0.1 %	PG	
halobetasol propionate external cream 0.05 %	PG	
halobetasol propionate external ointment 0.05 %	PG	
hydrocortisone butyrate external ointment 0.1 %	PG	
hydrocortisone butyrate external solution 0.1 %	PG	
hydrocortisone external cream 1 %, 2.5 %	PG	
hydrocortisone external lotion 2.5 %	PG	
hydrocortisone external ointment 1 %, 2.5 %	PG	
hydrocortisone valerate external cream 0.2 %	PG	
hydrocortisone valerate external ointment 0.2 %	PG	
mometasone furoate external cream 0.1 %	PG	
mometasone furoate external ointment 0.1 %	PG	
mometasone furoate external solution 0.1 %	PG	
flurandrenolide (Nolix External Cream 0.05 %)	PG	
flurandrenolide (Nolix External Lotion 0.05 %)	PG	
prednicarbate external cream 0.1 %	PG	
prednicarbate external ointment 0.1 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
TACLONEX EXTERNAL OINTMENT 0.005-0.064 % (*calcipotriene-betameth diprop*)	PB	
TACLONEX EXTERNAL SUSPENSION 0.005-0.064 % (*calcipotriene-betameth diprop*)	PB	
triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %	PG	
triamcinolone acetonide external lotion 0.025 %, 0.1 %	PG	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	PG	
triamcinolone acetonide (Triderm External Cream 0.1 %, 0.5 %)	PG	
DERMATOLOGY, LOCAL ANESTHETICS		
lidocaine hcl (7T Lido External Gel 2 %)	PG	
lidocaine hcl (Glydo External Prefilled Syringe 2 %)	PG	
lidocaine external ointment 5 %	PG	
lidocaine external patch 5 %	PG	
lidocaine hcl external solution 4 %	PG	
lidocaine hcl urethral/mucosal external gel 2 %	PG	
lidocaine hcl urethral/mucosal external prefilled syringe 2 %	PG	
lidocaine-prilocaine external cream 2.5-2.5 %	PG	
PRAMOX EXTERNAL GEL 1 % (*pramoxine hcl*)	PG	
zionodil 100 external lotion 3 %	PG	
DERMATOLOGY, MISCELLANEOUS SKIN AND MUCOUS MEMBRANE		
acyclovir external ointment 5 %	PG	
ammonium lactate external cream 12 %	PG	
ammonium lactate external lotion 12 %	PG	
scar treatment products (Celacyn External Gel)	PG	
coal tar external solution 20 %	PG	
diclofenac epolamine external patch 1.3 %	PG	
diclofenac sodium external gel 1 %	PG	
diclofenac sodium external solution 1.5 %	PG	
formaldehyde external solution 10 %	PG	
hydrogen peroxide solution 30 %	PG	
lactic acid e external cream 10-3500 %-unt/30gm	PG	

Prescription Drug Name	Drug Tier	Drug Notes
lactic acid external lotion 10 %	PG	
pimecrolimus external cream 1 %	PG	
podofilox external solution 0.5 %	PG	
salimez external cream 6 %	PBSP	
sodium hyaluronate external gel 0.2 %	PG	
tacrolimus external ointment 0.03 %, 0.1 %	PG	
urea (Uredeb External Cream 39 %)	PG	
DERMATOLOGY, ROSACEA		
azelaic acid external gel 15 %	PG	
metronidazole external cream 0.75 %	PG	
metronidazole external gel 0.75 %, 1 %	PG	
metronidazole external lotion 0.75 %	PG	
ORACEA ORAL CAPSULE DELAYED RELEASE 40 MG (*doxycycline*)	PB	
metronidazole (Rosadan External Cream 0.75 %)	PG	
metronidazole (Rosadan External Gel 0.75 %)	PG	
DERMATOLOGY, SCABICIDES AND PEDICULIDES		
CROTAN EXTERNAL LOTION 10 % (*crotamiton*)	PG	
lindane external shampoo 1 %	PG	
malathion external lotion 0.5 %	PG	
permethrin external cream 5 %	PG	
spinosad external suspension 0.9 %	PG	
DERMATOLOGY, WOUND CARE AGENTS		
ALEVICYN DERMAL SPRAY EXTERNAL SOLUTION (*wound cleansers*)	PG	
DELUO EXTERNAL SOLUTION (*wound cleansers*)	PG	
LEVICYN DERMAL SPRAY EXTERNAL SOLUTION (*wound cleansers*)	PG	
sodium chloride irrigation solution 0.9 %	PG	
VASHE CLEANSING EXTERNAL SOLUTION (*wound cleansers*)	PG	
IRRIGATION SOLUTIONS		
water for irrigation, sterile (Argyle Sterile Water Irrigation Solution)	PG	

Prescription Drug Name	Drug Tier	Drug Notes
lactated ringers irrigation solution	PG	
irrigation solns physiological (Physiolyte Irrigation Solution)	PG	
irrigation solns physiological (Physiosol Irrigation Irrigation Solution)	PG	
ringers irrigation irrigation solution	PG	
sterile water for irrigation irrigation solution	PG	
ringers irrigation (Tis-U-Sol Irrigation Solution)	PG	
MOUTH/THROAT/DENTAL AGENTS		
sodium fluoride (Cavarest Dental Gel 1.1 %)	PG	
cevimeline hcl oral capsule 30 mg	PG	
chlorhexidine gluconate mouth/throat solution 0.12 %	PG	
sodium fluoride (Clinpro 5000 Dental Paste 1.1 %)	PG	
clotrimazole mouth/throat troche 10 mg	PG	
sodium fluoride (Denta 5000 Plus Dental Cream 1.1 %)	PG	
sodium fluoride (Dentagel Dental Gel 1.1 %)	PG	
EASYGEL DENTAL GEL 0.4 % (*stannous fluoride*)	PG	
stannous fluoride (Fluoridex Daily Renewal Mouth/Throat Concentrate 0.63 %)	PG	
sodium fluoride (Fluoridex Dental Paste 1.1 %)	PG	
sod fluoride-potassium nitrate (Fluoridex Sensitivity Relief Dental Paste 1.1-5 %)	PG	
lidocaine hcl mouth/throat solution 4 %	PG	
lidocaine viscous hcl mouth/throat solution 2 %	PG	
MUGARD MOUTH/THROAT LIQUID (*oral wound care products*)	PBSP	
nystatin mouth/throat suspension 100000 unit/ml	PG	
triamcinolone acetonide (Oralone Mouth/Throat Paste 0.1 %)	PG	
chlorhexidine gluconate (Paroex Mouth/Throat Solution 0.12 %)	PG	
chlorhexidine gluconate (Periogard Mouth/Throat Solution 0.12 %)	PG	
pilocarpine hcl oral tablet 5 mg, 7.5 mg	PG	
sf 5000 plus dental cream 1.1 %	PG	
sf dental gel 1.1 %	PG	

Prescription Drug Name	Drug Tier	Drug Notes
sodium fluoride dental cream 1.1 %	PG	
triamcinolone acetonide mouth/throat paste 0.1 %	PG	
OTIC		
acetic acid otic solution 2 %	PG	
CIPRODEX OTIC SUSPENSION 0.3-0.1 % (*ciprofloxacin-dexamethasone*)	PB	
ciprofloxacin hcl otic solution 0.2 %	PG	
fluocinolone acetonide (Flac Otic Oil 0.01 %)	PG	
fluocinolone acetonide otic oil 0.01 %	PG	
hydrocortisone-acetic acid otic solution 1-2 %	PG	
neomycin-polymyxin-hc otic solution 3.5-10000-1	PG	
neomycin-polymyxin-hc otic suspension 3.5-10000-1	PG	
ofloxacin otic solution 0.3 %	PG	
REMOVE DRUG		
sodium sulfacetamide wash external liquid 10 %	PG	

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