

Prescription Drug List



This “formulary,” or “drug list,” is a summary of the most commonly prescribed drugs that your insurance plan covers.

PRO TIP: If you log in to your member account, you can use our drug search tool to view all the drugs your plan covers and see the costs of different medications.

Drug Costs

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

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

You can also call Pharmacy Services to find out how much a drug costs, whether it is covered by your insurance, and whether preauthorization or other steps are required for coverage. Select Health members call **800-538-5038**, Scripius members call **800-442-3127**.

This Formulary is Regularly Updated

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

Noncovered Drug Exceptions

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

LEGEND

(PA) Preauthorization

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

(M) Maintenance Drug

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

(ST) Step Therapy

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

(QL) Quantity Limits

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

(AGE) Age Limit

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

Select Health and SelectHealth Benefit Assurance Company, Inc. (doing business as “Scripius”) obey federal civil rights laws. We do not treat you differently because of your race, color, ethnic background or where you come from, age, disability, sex, religion, creed, language, social class, sexual orientation, gender identity or expression, and/or veteran status.

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

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

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

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電

Effective as of: 1/1/2024

Drug Name	Drug Tier	Requirements & Limits
ACNE		
Amnesteem Capsule	2	
Azelaic Acid Gel	1	
Claravis Capsule	2	
Dapsone	2	(ST)
Erythromycin	1	(AGE)
Isotretinoin Capsule	2	
Metronidazol	1	(QL)
Myorisan Capsule	2	
Rosadan	1	(QL)
Sod Sul/Sulf	1	
Sod Sulf/Sul Liq	1	
Sodium Sulfa	2	
Sulfacleanse Suspension	2	
Tretinoin Cream	2	(AGE)
Zenatane Capsule	2	
ADRENAL STEROID INHIBITORS		
Isturisa Tablet	4	(PA)(QL)(M)
ANALEPTICS		
Caffeine Cit Solution	1	(QL)
ANAPHYLAXIS THERAPY AGENTS		
Auvi-Q Injectable	2	(QL)
Epinephrine Injectable	1	(QL)
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT		
Disulfiram Tablet	1	
ANTI-INFLAMMATORY AGENTS		
Cromolyn Sod	2	(M)
ANTIARRHYTHMICS		
Mexiletine Capsule	1	(M)
ANTIBIOTICS		
Amox-Pot Cla Tablet	1	
Amox/K Clav	1	
Amoxicillin	1	
Arikayce Suspension	4	(PA)(QL)(M)
Azithromycin	1	(QL)
Cefaclor	1	
Cefadroxil Suspension	1	
Cefdinir	1	
Cefpodoxime Tablet	1	
Cefprozil Suspension	1	
Cefuroxime Tablet	1	
Cephalexin	1	
Ciprofloxacin	1	
Clarithromyc Tablet	1	
Clindamycin	1	

Drug Name	Drug Tier	Requirements & Limits
Doxycycl Hyc	1	
Doxycycline	1	(QL)
Levofloxacin	1	
Linezolid	1	(QL)
Lymepak Tablet	1	
Methenam Hip Tablet	1	
Minocycline Capsule	1	
Morgidox Capsule	1	
Neomycin Tablet	1	
Nitrofur Mac Capsule	1	
Nitrofurantn	1	(AGE)
Nitrofuranto Suspension	2	(AGE)
Paromomycin Capsule	2	
Pen Gk/Dextr Injectable	1	(PA)(QL)
Penicillin Vk Tablet	1	
Smz-Tmp Ds	1	
Tetracycline Capsule	1	
Trimethoprim	1	
Vancomycin	2	(QL)
ANTIDOTES		
Vistogard Packet	4	(QL)(M)
ANTIFIBRINOLYTICS		
Tranex Acid Tablet	1	(QL)
ANTIFUNGALS		
Ciclodan Solution	1	(QL)
Ciclopirox	1	(QL)
Clotrim/Beta	1	
Clotrimazole	1	
Cresemba Capsule	4	(PA)(QL)(M)
Fluconazole	1	(QL)
Griseofulvin Tablet	2	
Itraconazole	1	(QL)
Ketoconazole	1	
Nyamyc Powder	1	(QL)
Nystatin	1	(QL)
Nystop Powder	1	(QL)
Posaconazole Tablet	4	(PA)(M)
Terbinafine Tablet	1	(QL)
ANTIHELMINTICS		
Albendazole Tablet	1	(PA)(M)
ANTIMALARIALS		
Chloroquine Tablet	1	(M)
Hydroxychlor	1	(M)
Primaquine Tablet	1	(M)
Quinine Sulf Capsule	1	

Drug Name	Drug Tier	Requirements & Limits
ANTIMYASTHENIC AGENTS		
Pyridostigmi Tablet	2	(QL)
ANTIMYCOBACTERIAL AGENTS		
Ethambutol Tablet	1	
Rifabutin Capsule	3	
Rifampin Capsule	1	
ANTIPARKINSON COMT INHIBITORS		
Entacapone Tablet	1	(M)
ANTIPROTOZOAL AGENTS		
Lampit Tablet	3	(PA)(AGE)
ANTISEBORRHEIC PRODUCTS		
Selenium Sul Sha	1	
ANTITHYROID AGENTS		
Methimazole Tablet	1	(M)
ANTIVIRALS		
Abaca/Lamivu Tablet	1	(QL)(M)
Abacavir	1	(QL)(M)
Acyclovir	1	
Atazanavir Capsule	1	(QL)(M)
Biktarvy Tablet	4	(QL)(M)
Cimduo Tablet	4	(QL)(M)
Dovato Tablet	4	(QL)(M)
Efavir/Emtri Tablet	1	(QL)
Efavir/Lamiv Tablet	1	(QL)(M)
Efavirenz	1	(QL)(M)
Emtr/Ten Df Tablet	1	(QL)(M)
Emtr/Tenofov Tablet	1	(QL)(M)
Emtriva Solution	4	(QL)(M)
Famciclovir Tablet	1	
Isentress	4	(QL)(M)
Isentress Hd Tablet	4	(QL)(M)
Juluca Tablet	4	(QL)(M)
Lamivudine Tablet	1	(QL)(M)
Lopin/Riton Tablet	1	(QL)(M)
Maraviroc Tablet	1	(QL)(M)
Paxlovid Tablet	4	(QL)(M)
Prezcobix Tablet	4	(QL)(M)
Prezista Suspension	4	(QL)(M)
Selzentry Tablet	4	(QL)(M)
Stribild Tablet	4	(QL)(M)
Symtuza Tablet	4	(QL)(M)
Tivicay Tablet	4	(QL)(M)
Triumeq Tablet	4	(QL)(M)
Tybost Tablet	4	(QL)(M)
Valacyclovir Tablet	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Valganciclov Tablet	4	(QL)(M)
Zidovudine Capsule	1	(QL)(M)
ANXIETY & SLEEP		
Alprazolam Tablet	1	(ST)
Bupirone Tablet	1	(M)
Chlordiazep Capsule	1	
Diazepam	1	
Estazolam Tablet	1	(QL)
Eszopiclone Tablet	1	(QL)
Hydroxyzine	1	
Lorazepam Tablet	1	
Temazepam Capsule	1	(QL)
Triazolam Tablet	1	(QL)
Zaleplon Capsule	1	(QL)
Zolpidem Tablet	1	(QL)
Zolpidem Er Tablet	1	(QL)
ASTHMA AND COPD*		
Albuterol	1	(QL)(M)
Anoro Ellipt Inhalation	2	(QL)(M)
Arformoterol Neb	3	(QL)(M)
Arnuity Elpt Inhalation	2	(QL)(M)
Asmanex	2	(QL)(M)
Atrovent Hfa Inhalation	3	(M)
Breztri Inhalationo Inhalation	2	(QL)(M)(AGE)
Budesonide	2	(ST)(QL)(M)
Combivent Inhalation	2	(QL)(M)
Flutic/Salme	1	(PA)(QL)(M)
Flutic/Vilan Inhalation	1	(PA)(QL)(M)
Fluticas Hfa Inhalation	2	(QL)(M)
Ipratropium	1	(M)
Levalbuterol	1	(QL)(M)
Montelukast	1	(QL)(M)
Serevent Dis Inhalation	2	(M)
Spiriva Handihaler	2	(QL)(M)
Spiriva Respimat	2	(QL)(M)
Stiolto Inhalation	2	(QL)(M)
Symbicort Inhalation	1	(QL)(M)
Theophylline Tablet	1	(M)
Trelegy Inhalation	2	(QL)(M)(AGE)
Ventolin Hfa Inhalation	2	(QL)(M)
Wixela Inhub Inhalation	1	(QL)(M)
Zafirlukast Tablet	1	(QL)(M)
BLOOD THINNERS		
Anagrelide Capsule	2	(M)
Brilinta Tablet	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Cilostazol Tablet	1	(M)
Clopidogrel Tablet	1	(QL)(M)
Dabigatran Capsule	1	(QL)(M)
Eliquis Tablet	2	(QL)(M)
Eliquis St P Tablet	2	(QL)
Enoxaparin Injectable	2	
Heparin Sod Injectable	1	
Prasugrel Tablet	1	(QL)(M)
Warfarin	1	(M)
Xarelto	2	(QL)(M)
BURN PRODUCTS		
Silver Sulfa Cream	1	
Ssd Cream	1	
CARBONIC ANHYDRASE INHIBITORS		
Acetazolamid	1	(M)
CARDIOVASCULAR*		
Aliskiren Tablet	2	(QL)(M)
Amilor/Hctz Tablet	1	(M)
Amiloride Tablet	1	(M)
Amiodarone Tablet	1	(M)
Amlod/Benazp Capsule	1	(M)
Amlod/Valsar Tablet	1	(QL)(M)
Amlodipine Tablet	1	(M)
Atenol/Chlor Tablet	1	(M)
Atenolol Tablet	1	(QL)(M)
Benazep/Hctz Tablet	1	(M)
Benazepril Tablet	1	(M)
Betaxolol Tablet	1	(M)
Bisoprol/Hctz Tablet	1	(M)
Bisoprol Fum Tablet	1	(M)
Bumetanide Tablet	1	(M)
Candesartan Tablet	1	(QL)(M)
Cartia Xt Capsule	1	(M)
Carvedilol Tablet	1	(M)
Chlorthalid Tablet	1	(M)
Clonidine	1	(M)
Corlanor Tablet	2	(ST)(QL)(M)
Digitex Tablet	1	(M)
Digoxin Tablet	1	(M)
Dilt-Xr Capsule	1	(M)
Diltiazem	1	(M)
Diltiazem Er Tablet	1	(M)
Disopyramide Capsule	2	(M)
Diuril Suspension	2	(QL)(M)(AGE)
Dofetilide Capsule	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Doxazosin Tablet	1	(QL)(M)
Enalapril Tablet	1	(M)
Entresto Tablet	2	(QL)(M)
Eplerenone Tablet	1	(M)
Flecainide Tablet	1	(M)
Fosinopril Tablet	1	(M)
Furosemide	1	(M)
Guanfacine Tablet	1	(M)
Hydralazine Tablet	1	(M)
Hydrochlorothiazide	1	(M)
Indapamide Tablet	1	(M)
Irbesartan Tablet	1	(QL)(M)
Isosorb Mono Tablet	1	(M)
Labetalol Tablet	1	(M)
Lisinop/Hctz Tablet	1	(M)
Lisinopril Tablet	1	(M)
Losartan Pot Tablet	1	(QL)(M)
Losartan/Hct Tablet	1	(QL)(M)
Matzim La Tablet	1	(M)
Metoprol Suc Tablet	1	(M)
Metoprolol	1	(M)
Midodrine Tablet	1	
Minoxidil Tablet	1	(M)
Moexipril Tablet	1	(M)
Nadolol Tablet	1	(M)
Nebivolol Tablet	1	(QL)(M)
Nifedipine Tablet	1	(M)
Nitroglyceri Sub	1	(M)
Nitroglycerin Sub	1	(M)
Olm Med/Amlo Tablet	1	(ST)(QL)(M)
Olm Med/Hctz Tablet	1	(QL)(M)
Olmesa Medox Tablet	1	(QL)(M)
Pacerone Tablet	1	(M)
Pindolol Tablet	1	(M)
Prazosin Hcl Capsule	1	(M)
Propafenone Tablet	1	(M)
Propranolol	1	(M)
Qnapril/Hctz Tablet	1	(M)
Quinidine Su Tablet	1	(M)
Ramipril Capsule	1	(M)
Ranolazine Tablet	1	(ST)(QL)(M)
Sotalol Tablet	1	(M)
Sotalol Af Tablet	1	(M)
Sotalol Hcl Tablet	1	(M)
Sotylize Solution	3	(QL)(M)(AGE)

Drug Name	Drug Tier	Requirements & Limits
Spiro/Hctz Tablet	1	(M)
Spirolact Tablet	1	(M)
Taztia Xt Capsule	1	(M)
Telmisartan Tablet	1	(QL)(M)
Terazosin Capsule	1	(QL)(M)
Tiadyt Capsule	1	(M)
Torse mide Tablet	1	(M)
Triamt/Hctz	1	(M)
Valsart/Hctz Tablet	1	(QL)(M)
Valsartan Tablet	1	(QL)(M)
Verapamil	1	(M)
Verelan Pm Capsule	3	(M)
CHOLESTEROL*		
Atorvastatin Tablet	1	(QL)(AGE)(M)
Cholestyram Powder	2	(QL)(M)
Colesevelam Tablet	2	(QL)(M)
Colestipol Tablet	1	(QL)(M)
Ezetim/Simva Tablet	1	(ST)(QL)(M)
Ezetimibe Tablet	1	(QL)(M)
Fenofibrate	1	(QL)(M)
Gemfibrozil Tablet	1	(QL)(M)
Icosapent Capsule	2	(ST)(QL)(M)
Lovastatin Tablet	1	(QL)(M)(AGE)
Niacin Tablet	1	(QL)(M)
Niacin Er Tablet	1	(QL)(M)
Omega-3-Acid Capsule	1	(QL)(M)
Pitavastatin Tablet	1	(ST)(QL)(M)
Pravastatin	1	(QL)(M)(AGE)
Repatha Push Injectable	2	(PA)(QL)(M)
Repatha Sure Injectable	2	(PA)(QL)(M)
Rosuvastatin Tablet	1	(QL)(AGE)(M)
Simvastatin Tablet	1	(QL)(AGE)(M)
CONTRACEPTION (BIRTH CONTROL)		
Brand Contraceptives	3	(ST)(QL)(M)
Generic Contraceptives	1	(QL)(M)
Medroxyprogesterone	1	(QL)(M)
CONTRACEPTIVES		
Fc2 Female Mis	2	(QL)(M)
Kimono Micro Mis	2	(QL)
Omniflex Dpr	2	(QL)
Trustex Mis	2	(QL)
Trustex/Ria Mis	2	(QL)
COUGH/COLD/ALLERGY PRODUCTS		
Benzonatate	1	(ST)(QL)
Bpm-Pse-Dm Syrup	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Brom/Pse/Dm Syrup	1	(QL)
Bromfed Dm Solution	1	(QL)
Carbinoxamin	1	(QL)
Cetirizine Solution	1	(QL)
Cheratussin Syrup	1	
Codeine/Gg Solution	1	
Cyproheptad	1	(QL)
Diphenhydram Elx	1	(QL)
G Tussin Ac Liq	1	
Gg/Codeine Solution	1	
Guaiatuss Ac Syrup	1	
Guaifenesin Syrup	1	
Hydr/Cpm/Pse Liq	1	
Hydroc/Homat Tablet	1	
Hydrocod/Hom Syrup	1	
Hydromet Syrup	1	
Levocetirizi Tablet	1	
Maxi-Tuss Ac Solution	1	
Prometh Vc/ Syrup	1	
Prometh/Cod	1	
Prometh/Pe Syrup	1	
Prometh/Pe/ Syrup	1	
Promethazine	1	
CYCLOPLEGIC MYDRIATICS		
Altafrin Solution	1	
Atropine Sul	1	
Phenylephrin Solution	1	
CYSTIC FIBROSIS AGENTS		
Orkambi Gra	4	(PA)(QL)(M)
Pulmozyme Solution	4	(QL)(M)
Trikafta Packet	4	(PA)(QL)(M)
CYSTINOSIS AGENTS		
Cystagon Capsule	3	(M)
DENTAL PRODUCTS		
Chlorhex Glu Solution	1	
Fluoride	1	(QL)(AGE)(M)
Periogard Solution	1	
DERMATOLOGICALS (SKIN) MISC. DERMATOLOGICALS		
Acitretin Capsule	3	(QL)
Bexarotene Gel	1	(PA)(QL)
Calcipotrien Oin	3	(ST)
Fluorouracil	1	(PA)(QL)
Gentamicin	1	
Mupirocin Oin	1	
Tolak Cream	3	(QL)

Drug Name	Drug Tier	Requirements & Limits
DERMATOLOGICALS (SKIN) STEROIDS		
Ala-Cort Cream	1	
Alclometason Oin	1	
Beta Diprop	1	
Betameth Dip	1	
Betameth Val Inhalation	1	
Clobetasol	1	
Desonate Gel	3	(ST)(QL)
Desonide	1	(ST)(QL)
Desoximetas Cream	1	
Desrx Gel	1	(ST)(QL)
Fluocin Acet	1	
Fluocinonide	1	(ST)(QL)
Fluticasone	1	(QL)(M)
Halobetasol Oin	1	
Hydrocort	1	(M)
Mometasone	1	
Triamcinolon	1	
Triderm Cream	2	
DIABETES - INSULIN*		
Fiasp Injectable	2	(M)
Fiasp Flex Injectable	2	(M)
Humulin R U-500	2	(PA)(QL)(M)
Insulin Aspa Injectable	1	(M)
Insulin Glar	2	(M)
Lantus Injectable	2	(M)
Lantus Solos Injectable	2	(M)
Novolin Injectable	1	(M)
Novolog Injectable	2	(M)
Novolog Mix Injectable	2	(M)
Toujeo Max Injectable	2	(M)
Toujeo Solo Injectable	2	(M)
DIABETES - NON-INSULIN*		
Alogliptin Tablet	1	(QL)(M)
Baqsimi One Powder	2	
Baqsimi Two Powder	2	
Farxiga Tablet	2	(QL)(M)
Glimepiride Tablet	1	(M)
Glipizide	1	(M)
Glucagon Kit	1	
Glyburide Tablet	1	(M)
Jardiance Tablet	2	(QL)(M)
Metformin Tablet	1	(M)
Mounjaro Injectable	2	(PA)(QL)(M)
Pioglitazone Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Repaglinide Tablet	1	(M)
Soliqua Injectable	2	(ST)(QL)(M)
Steglatro Tablet	3	(ST)(QL)(M)
Synjardy Xr Tablet	2	(QL)(M)
Tradjenta Tablet	2	(QL)(M)
Trijardy Xr Tablet	2	(QL)(M)
Trulicity Injectable	2	(PA)(QL)(M)
Xigduo Xr Tablet	2	(QL)(M)
DIABETES - TESTING AND SUPPLIES		
1/2MI Tb Syr Mis	3	(M)
12MI Syringe Mis	3	(M)
18G Shielded Mis	3	(M)
1MI Allr Syr Mis	3	(M)
1MI Slip Tip Mis	3	(M)
1MI Syringe Mis	3	(M)
1MI Tb Syrng Mis	3	(M)
28G Shielded Mis	3	(M)
3MI Syringe Mis	3	(M)
3MI LI Syrng Mis	3	(M)
3MI Luer Loc Mis	3	(M)
3MI Syringe Mis	1	(M)
5MI LI Syrng Mis	3	(M)
5MI Syringe Mis	1	(M)
5MI Syringes Mis	1	(M)
Accu-Chek Tes	3	(PA)(QL)(M)
Accutrend Tes	3	(PA)(QL)(M)
Admix Needle Mis	3	(M)
Advance Tes	3	(PA)(QL)(M)
Advocate Tes	3	(PA)(QL)(M)
Agamatrix Tes	3	(PA)(QL)(M)
Allergy Syrg Mis	3	(M)
Assure Tes	3	(PA)(QL)(M)
Assure 3 Tes	3	(PA)(QL)(M)
Assure 4 Tes	3	(PA)(QL)(M)
Assure li Tes	3	(PA)(QL)(M)
Assure Prism Tes	3	(PA)(QL)(M)
Assure Pro Tes	3	(PA)(QL)(M)
Autocode Tes	3	(PA)(QL)(M)
Bd Eclipse Mis	3	(M)
Bd Hypo Need Mis	3	(M)
Bd Integra Mis	3	(M)
Bd Needle Mis	3	(M)
Bd Needles Mis	3	(M)
Bd Plastipak Mis	3	(M)
Bd Precision Mis	3	(M)

Drug Name	Drug Tier	Requirements & Limits
Biotel Care Tes	3	(PA)(QL)(M)
Blood Glucos Tes	1	(PA)(QL)(M)
Blulink Tes	3	(PA)(QL)(M)
Blunt Cannul Mis	3	(M)
Carepoint Sa Mis	3	(M)
Carepoint Sy Mis	3	(M)
Carepoint Tu Mis	3	(M)
Caresens N Tes	3	(PA)(QL)(M)
Caretouch Mis	3	(PA)(QL)(M)
Clever Chek Tes	3	(PA)(QL)(M)
Clever Choic Tes	3	(PA)(QL)(M)
Clevr Choice Tes	3	(PA)(QL)(M)
Confirm/Micr Tes	3	(PA)(QL)(M)
Contour Tes	3	(PA)(QL)(M)
Cool Blood Tes	3	(PA)(QL)(M)
Crono Syr Mis	3	(M)
Cvs Advanced Tes	3	(PA)(QL)(M)
Cvs Glucose Tes	3	(PA)(QL)(M)
D-Care Blood Tes	3	(PA)(QL)(M)
Deflux Needl Mis	3	(M)
Dexcom G6 Mis	2	(ST)(QL)(M)(AGE)
Dexcom G7 Mis	2	(ST)(QL)(M)(AGE)
Diathrive Mis	3	(PA)(QL)(M)
Diathrive+ Mis	3	(PA)(QL)(M)
Diatrue Plus Tes	3	(PA)(QL)(M)
Duo-Care Tes	3	(PA)(QL)(M)
Easy Plus li Tes	3	(PA)(QL)(M)
Easy Step Tes	3	(PA)(QL)(M)
Easy Talk Tes	3	(PA)(QL)(M)
Easy Touch Tes	3	(PA)(QL)(M)
Easy Trak Tes	3	(PA)(QL)(M)
Easy Trak li Tes	3	(PA)(QL)(M)
Easygluco Tes	3	(PA)(QL)(M)
Easymax Tes	3	(PA)(QL)(M)
Easymax 15 Tes	3	(PA)(QL)(M)
Easypoint Mis	3	(M)
Easypro Tes	3	(PA)(QL)(M)
Easypro Plus Tes	3	(PA)(QL)(M)
Eclipse Ndl Mis	3	(M)
Eclipse Ndle Mis	3	(M)
Element Tes	3	(PA)(QL)(M)
Elemnt Compa Tes	3	(PA)(QL)(M)
Embrace Tes	3	(PA)(QL)(M)
Embrace Evo Tes	3	(PA)(QL)(M)
Embrace Pro Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Embrace Talk Tes	3	(PA)(QL)(M)
Embrace Wave Tes	3	(PA)(QL)(M)
Enlite Gluco Mis	3	(PA)(QL)(M)
Epidur Needl Mis	1	(M)
Evolution Tes	3	(PA)(QL)(M)
Fifty50 Gluc Tes	3	(PA)(QL)(M)
Fill Needle Mis	3	(M)
Filter Needl Mis	3	(M)
Flow-Eze Mis	3	(M)
Fora 6 Mis	3	(PA)(QL)(M)
Fora 6Con Tes	3	(PA)(QL)(M)
Fora Advance Tes	3	(PA)(QL)(M)
Fora Blood Tes	3	(PA)(QL)(M)
Fora D15g Tes	3	(PA)(QL)(M)
Fora D20 Tes	3	(PA)(QL)(M)
Fora D40/G31 Tes	3	(PA)(QL)(M)
Fora G20 Tes	3	(PA)(QL)(M)
Fora G30/V10 Tes	3	(PA)(QL)(M)
Fora Gd20 Tes	3	(PA)(QL)(M)
Fora Gd50 Tes	3	(PA)(QL)(M)
Fora Gtel Tes	3	(PA)(QL)(M)
Fora Tn'g Tes	3	(PA)(QL)(M)
Fora V10 Tes	3	(PA)(QL)(M)
Fora V12 Tes	3	(PA)(QL)(M)
Fora V20 Tes	3	(PA)(QL)(M)
Fora V30a Tes	3	(PA)(QL)(M)
Foracare Tes	3	(PA)(QL)(M)
Fortiscare Tes	3	(PA)(QL)(M)
Freesty Libr	2	(ST)(QL)(M)(AGE)
Freestyle	2	(ST)(QL)(AGE)(M)
Ge100 Blood Tes	3	(PA)(QL)(M)
Genuultimate Tes	3	(PA)(QL)(M)
Ght Test Tes	3	(PA)(QL)(M)
Gluco Perfec Tes	3	(PA)(QL)(M)
Glucocard Tes	3	(PA)(QL)(M)
Glucocard 01 Tes	3	(PA)(QL)(M)
Glucocom Tes	3	(PA)(QL)(M)
Gluconavii Tes	3	(PA)(QL)(M)
Glucose Tes	3	(PA)(QL)(M)
Gnp Tru Metr Tes	3	(PA)(QL)(M)
Gnp Truetrac Tes	3	(PA)(QL)(M)
Gojji Blood Tes	3	(PA)(QL)(M)
Gojji Strips Mis	3	(PA)(QL)(M)
Guardian Mis	3	(PA)(QL)(M)(AGE)
Guardian 4 Mis	3	(PA)(QL)(M)(AGE)

Drug Name	Drug Tier	Requirements & Limits
Guardian Con Mis	3	(PA)(QL)(M)(AGE)
Guardian Rt Mis	3	(PA)(QL)(M)(AGE)
Hw Embrace Tes	3	(PA)(QL)(M)
Hypo Needle Mis	1	(M)
Iglucose Tes	3	(PA)(QL)(M)
In Touch Tes	3	(PA)(QL)(M)
Infinity Tes	3	(PA)(QL)(M)
Insulin Syringes	1	(M)
Kroger Blood Tes	3	(PA)(QL)(M)
Lancets	1	(M)
Liberty Tes	3	(PA)(QL)(M)
Liberty Next Tes	3	(PA)(QL)(M)
Link Assist Mis	4	(PA)(QL)(M)
Ll Syringe Mis	3	(M)
Meijer Tes	3	(PA)(QL)(M)
Meijer Blood Tes	3	(PA)(QL)(M)
Microdot Tes	3	(PA)(QL)(M)
Minilink Rt Mis	3	(PA)(QL)(M)(AGE)
Minimed 630G Mis	3	(PA)(QL)(M)(AGE)
Myglucohealt Tes	3	(PA)(QL)(M)
Needles Mis	3	(M)
Neutek 2Tek Tes	3	(PA)(QL)(M)
No Coding Tes	3	(PA)(QL)(M)
Nova Max Tes	3	(PA)(QL)(M)
Omnipod 5 G6	2	(PA)(QL)(M)
Omnipod Dash	2	(PA)(QL)(M)
On Call Tes	3	(PA)(QL)(M)
One Drop Tes	3	(PA)(QL)(M)
Onetouch Tes	3	(PA)(QL)(M)
Optiumez Tes	3	(PA)(QL)(M)
Paradigm Rea Mis	3	(PA)(QL)(M)(AGE)
Pen Needles	3	(M)
Pip Blood Tes	3	(PA)(QL)(M)
Pocketchem Tes	3	(PA)(QL)(M)
Poly Hub Mis	3	(M)
Precision Tes	2	(QL)(M)
Premium Bloo Mis	3	(PA)(QL)(M)
Pro Voice Tes	3	(PA)(QL)(M)
Prodigy No Tes	3	(PA)(QL)(M)
Pts Panels Tes	3	(PA)(QL)(M)
Quicktek Tes	3	(PA)(QL)(M)
Quintet Tes	3	(PA)(QL)(M)
Quintet Ac Tes	3	(PA)(QL)(M)
Ra Blood Tes	3	(PA)(QL)(M)
Refuah Plus Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Relion Tes	3	(PA)(QL)(M)
Relion Premi Tes	3	(PA)(QL)(M)
Relion Prime Tes	3	(PA)(QL)(M)
Relion True Tes	3	(PA)(QL)(M)
Rightest Tes	3	(PA)(QL)(M)
Safetyglide Mis	3	(M)
Safty Needle Mis	3	(M)
Securesafe Mis	3	(M)
Smart Sense Tes	3	(PA)(QL)(M)
Smartest Tes	3	(PA)(QL)(M)
Solus V2 Tes	3	(PA)(QL)(M)
Spinal Needl Mis	1	(M)
Supreme Tes	3	(PA)(QL)(M)
Sympath Ndl Mis	1	(M)
Syrg/Ndl 3MI Mis	3	(M)
Syringe Mis	1	(M)
Tb Syringe Mis	3	(M)
Tb Syrng 1MI Mis	3	(M)
Transfer Ndl Mis	3	(M)
Tru Metrix Tes	3	(PA)(QL)(M)
True Focus Mis	3	(PA)(QL)(M)
True Metrix Tes	3	(PA)(QL)(M)
Truetest Tes	3	(PA)(QL)(M)
Truetrack Tes	3	(PA)(QL)(M)
Unistrip1 Tes	3	(PA)(QL)(M)
Vent Needle Mis	3	(M)
Verasens Tes	3	(PA)(QL)(M)
Vivaguard Tes	3	(PA)(QL)(M)
Yale Needle Mis	3	(M)
Yale Needles Mis	3	(M)
GALLSTONE SOLUBILIZING AGENTS		
Ursodiol	1	(M)
GASTROINTESTINAL (DIGESTIVE) MISC.		
GASTROINTESTINAL		
Alosetron Tablet	4	(PA)(QL)(M)
Diphen/Atrop	1	
Lubiprostone Capsule	2	(QL)(M)(AGE)
Metoclopram Tablet	1	
Xifaxan Tablet	3	(PA)
GASTROINTESTINAL (DIGESTIVE) NAUSEA & VOMITING		
Antivert Tablet	3	
Emend Suspension	3	(QL)
Meclizine Tablet	1	
Ondansetron	1	(QL)
Trimethobenz Capsule	1	

Drug Name	Drug Tier	Requirements & Limits
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENT		
Famotidine	1	(AGE)(M)
Sucralfate	2	(M)
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENT		
Acid Reducer Capsule	1	(PA)
Esomeprazole	1	(QL)(M)
Gnp Omeprazo Capsule	1	(PA)
Lansoprazole	1	(ST)(QL)(AGE)(M)
Omeprazole Capsule	1	(PA)(QL)(M)
Pantoprazole Tablet	1	(QL)(M)
Rabeprazole Tablet	1	(QL)(M)
Ranitidine Tablet	1	(QL)(M)
GENITOURINARY IRRIGANTS		
Argyl Saline Solution	1	
Curity Salin Solution	1	
Renacidin Solution	3	
Sodium Chlor	1	
GOUT		
Allopurinol Tablet	1	(M)
Colchicine Tablet	1	(QL)
Febuxostat Tablet	1	(QL)(M)
Probenecid Tablet	1	(M)
GOUT AGENT COMBINATIONS		
Proben/Colch Tablet	1	(M)
HEMATOPOIETIC MIXTURES		
Multigen Tablet	3	(QL)
HEMATORHEOLOGIC AGENTS		
Pentoxifylli Tablet	1	(M)
HEPATITIS THERAPIES		
Adefov D piv Tablet	4	(QL)(M)
Entecavir Tablet	1	(QL)(M)
Epivir Hbv Solution	2	(QL)(M)
Harvoni Packet	3	(PA)(QL)(M)
Ledip-Sofosb Tablet	3	(PA)(QL)(M)
Mavyret	3	(PA)(QL)(M)
Pegasys Injectable	4	(PA)(QL)(M)
HORMONE RECEPTOR MODULATORS		
Raloxifene Tablet	1	(QL)(M)
HORMONE REPLACEMENT THERAPY FEMALE		
Amabelz Tablet	1	(QL)(M)
Covaryx Tablet	1	(QL)(M)
Covaryx Hs Tablet	1	(QL)(M)
Delestrogen Injectable	3	
Dotti Dis	1	(QL)(M)
Ec-Rx Proges Cream	3	(QL)
Eemt Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Eemt Hs Tablet	1	(QL)(M)
Est Estrogen Tablet	1	(QL)(M)
Estra/Noreth Tablet	1	(QL)(M)
Estrad Val Injectable	1	
Estradiol	1	(QL)(M)
Estrog/Mtest Tablet	1	(QL)(M)
Estrogel Gel	3	(QL)(M)
Evamist Spr	3	(QL)(M)
Fyavolv Tablet	1	(M)
Imvexxy Main Sup	3	(ST)(QL)(M)
Imvexxy Strt Sup	3	(ST)(QL)(M)
Jinteli Tablet	1	(M)
Lopreeza Tablet	1	(QL)(M)
Lyllana Dis	1	(QL)(M)
Mimvey Tablet	1	(QL)(M)
Mimvey Lo Tablet	1	(QL)(M)
Noreth/Ethin Tablet	1	(M)
Norethin Ace Tablet	1	(M)
Premarin Tablet	2	(QL)(M)
Premarin Vag Cream	3	(ST)(QL)(M)
Premphase Tablet	3	(ST)(QL)(M)
Prempro Tablet	3	(ST)(QL)(M)
Progesterone	1	(QL)(M)
Yuva fem Tablet	2	(QL)(M)
HORMONE REPLACEMENT THERAPY MALE		
Depo-Testost Injectable	1	(QL)(M)
Testost Cyp Injectable	1	(QL)(M)
Testost Enan Injectable	1	(QL)(M)
Testosterone	2	(QL)(M)
IMMUNOLOGICAL AGENTS - IMMUNE SYSTEM STIMULATION OR SUPPRESSION		
Actemra Injectable	4	(PA)(QL)(M)
Amjevita Injectable	4	(PA)(QL)(M)
Calcitrene Oin	2	
Cimzia	4	(PA)(QL)(M)
Hadlima Injectable	4	(PA)(QL)(M)
Rinvoq Tablet	4	(PA)(QL)(M)
Skyrizi Injectable	4	(PA)(QL)(M)
Skyrizi Pen Injectable	4	(PA)(QL)(M)
Stelara Injectable	4	(PA)(QL)(M)
Xolair Injectable	4	(PA)(QL)(M)
IMMUNOMODULATING AGENTS - TOPICAL		
Imiquimod Cream	1	
IMMUNOSUPPRESSANTS		
Azasan Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Azathioprine Tablet	1	(M)
Cyclosporine	1	(PA)(QL)(M)
Everolimus Tablet	4	(PA)(QL)(M)
Gengraf	1	(M)
Mycophenolat Tablet	1	(M)
Mycophenolic Tablet	1	(QL)(M)
Sirolimus Tablet	2	(M)
Tacrolimus	1	(QL)(M)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
Pimecrolimus Cream	3	(ST)(QL)
INFLAMMATORY BOWEL AGENTS		
Mesalamine	2	(QL)(M)
Sulfasalazin Tablet	1	(M)
INFLUENZA AGENTS		
Oseltamivir	1	(QL)
INTESTINAL ACIDIFIERS		
Enulose Solution	1	
Generlac Solution	1	
Lactulose Solution	1	
KERATOLYTIC/ANTIMITOTIC AGENTS		
Salicylic Ac Lot	1	
LAXATIVE COMBINATIONS		
Clenpiq Solution	2	
Peg 3350	1	
LAXATIVES		
Constulose Solution	1	
Golytely Solution	3	
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
Lupr Dep-Ped Injectable	4	(QL)(M)
LOCAL ANESTHETICS - TOPICAL		
Glydo Gel	1	
Lido/Prilocn Cream	1	
Lidocaine	1	
MENTAL HEALTH		
Amitriptylin Tablet	1	(M)
Amoxapine Tablet	1	(M)
Aripiprazole Tablet	1	(QL)(M)
Bupropion Tablet	1	(QL)(M)
Bupropn Hcl Tablet	1	(QL)(M)
Citalopram	1	(QL)(M)
Clomipramine Capsule	1	(QL)(M)
Desvenlafax Tablet	1	(QL)(M)
Donepezil Tablet	1	(ST)(M)
Doxepin Hcl Capsule	1	(M)
Duloxetine	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Escitalopram Tablet	1	(QL)(M)
Fanapt Packet	4	(PA)(QL)(M)
Fluoxetine	1	(QL)(M)
Fluvoxamine	2	(ST)(QL)(M)
Imipram Hcl Tablet	1	(M)
Invega Hafye Injectable	4	(QL)(M)
Invega Sust Injectable	4	(M)
Invega Trinz Injectable	4	(M)
Lithium Carb	1	(M)
Lurasidone Tablet	1	(QL)(M)
Memant Titra Packet	1	(QL)
Memantine Tablet	1	(QL)(M)
Memantine Hc Capsule	1	(ST)(QL)(M)
Mirtazapine	1	(M)
Nortriptylin Capsule	1	(M)
Olanzapine Tablet	1	(QL)(M)
Paliperidone Tablet	1	(ST)(QL)(M)
Paroxetine Tablet	1	(QL)(M)
Phenelzine Tablet	1	(M)
Protriptylin Tablet	1	(M)
Quetiapine Er	1	(QL)(M)
Risperidone	1	(QL)(M)
Rivastigmine Capsule	1	(M)
Sertraline Tablet	1	(M)
Tofranil Tablet	3	(ST)(M)
Tranylcyprom Tablet	2	(M)
Trazodone Tablet	1	(QL)(M)
Venlafaxine	1	(QL)(M)
Vilazodone Tablet	1	(QL)(M)
Ziprasidone Capsule	1	(QL)(M)
METABOLIC MODIFIERS		
Calcitriol Capsule	1	(M)
Javygtor	4	(PA)(QL)(M)
Levocarnitin Tablet	2	
Paricalcitol Capsule	1	(M)
Pheburane Mis	4	(PA)(QL)(M)
Sapropterin	4	(PA)(QL)(M)
MIGRAINE		
Ajovy Injectable	2	(ST)(QL)(M)
Aprepitant	1	(QL)
Eletriptan Tablet	1	(QL)
Emgality Injectable	3	(PA)(QL)(M)
Frovatriptan Tablet	1	(ST)(QL)
Naratriptan Tablet	1	(QL)(M)
Nurtec Tablet	2	(PA)(QL)

Drug Name	Drug Tier	Requirements & Limits
Rizatriptan Tablet	1	(M)
Sumatriptan	2	(ST)(QL)(M)
Ubrelvy Tablet	2	(PA)(QL)
Zolmitriptan Tablet	1	(QL)
MIGRAINE COMBINATIONS		
Ergot/Caffen Tablet	1	(PA)(QL)
MINERALOCORTICIDS		
Fludrocort Tablet	1	(M)
MISC. RESPIRATORY INHALANTS		
Hypersal Neb	3	
Nebusal Neb	1	
Pulmosal Neb	1	
Sod Chloride Neb	1	
MITOTIC INHIBITORS		
Etoposide Capsule	1	
MUCOLYTICS		
Acetylcyst Solution	1	
MULTIPLE SCLEROSIS AGENTS		
Dalfampridin Tablet	1	(QL)(M)
Dimethyl Fum Capsule	1	(QL)(M)
Fingolimod Capsule	1	(QL)(M)
Mavenclad Packet	4	(PA)(QL)(M)
MUSCLE RELAXANT COMBINATIONS		
Norgesic Tablet	3	
Orph/Asa/Caf Tablet	3	
Orphengesic Tablet	3	(PA)
MUSCLE RELAXANTS		
Baclofen Tablet	1	(M)
Carisoprodol Tablet	1	(QL)
Chlorzoxazon Tablet	1	
Cyclobenzaprine	1	
Metaxall Tablet	2	(ST)
Metaxalone Tablet	2	(ST)
Methocarbam Tablet	1	
Orphenadrine Tablet	1	
Tizanidine	1	(ST)(QL)
Vanadom Tablet	1	(QL)
NASAL ALLERGY		
Azel/Flutic Spr	2	(ST)(QL)
Azelastine	1	(QL)(M)
Dymista Spr	2	(QL)
Olopatadine Spr	1	(ST)
Khance Mis	3	(PA)(QL)
ONCOLOGY/HEMATOLOGY		
Abiraterone Tablet	4	(QL)(M)
Anastrozole Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Ayvakit Tablet	4	(PA)(QL)(M)
Cometriq Kit	4	(PA)(QL)(M)
Erivedge Capsule	4	(PA)(QL)(M)
Erlotinib Tablet	1	(PA)(QL)(M)
Exemestane Tablet	1	(QL)(M)
Flutamide Capsule	1	
Hydroxyurea Capsule	1	
Iclusig Tablet	4	(PA)(QL)(M)
Inqovi Tablet	4	(PA)(QL)(M)
Jaypirca Tablet	4	(PA)(QL)(M)
Lapatinib Tablet	4	(PA)(QL)(M)
Lenalidomide Capsule	4	(PA)(QL)(M)
Letrozole Tablet	1	(QL)(M)
Leucovor Ca Tablet	1	(QL)
Leukeran Tablet	3	
Lumakras Tablet	4	(PA)(QL)(M)
Matulane Capsule	3	(PA)
Megestrol Ac Tablet	1	
Mekinist Tablet	4	(PA)(QL)(M)
Mercaptopur Tablet	1	
Mesnex Tablet	4	(M)
Methotrexate	1	(M)
Pomalyst Capsule	4	(PA)(QL)(M)
Revlimid Capsule	4	(PA)(QL)(M)
Scemblix Tablet	4	(PA)(QL)(M)
Stivarga Tablet	4	(PA)(QL)(M)
Tamoxifen Tablet	1	(QL)(M)
Thalomid Capsule	4	(PA)(QL)(M)
Toremifene Tablet	4	(PA)(QL)(M)
Zelboraf Tablet	4	(PA)(QL)(M)
Zydelig Tablet	4	(PA)(QL)(M)
Zykadia Capsule	4	(PA)(QL)(M)
OPHTHALMIC STEROIDS		
Dexameth Pho Solution	1	
Difluprednat Emu	2	(QL)
Lotemax Sm Gel	3	(QL)
Loteprednol	2	(QL)
Neo/Poly/Dex	1	
Prednisolone	1	(QL)
Sulf/Pred Na Solution	1	
OPHTHALMICS (EYE) ANTI-INFECTIVES		
Moxifloxacin Solution	1	
Ofloxacin Dro	1	
Polymyxin B/ Solution	1	
Tobramycin Solution	1	

Drug Name	Drug Tier	Requirements & Limits
Trifluridine Solution	2	
OPHTHALMICS (EYE) MISC. OPHTHALMICS		
Apraclonidin Solution	1	(M)
Brimonidine 0.15%	1	(M)
Brinzolamide Suspension	2	(QL)(M)
Combigan Solution	1	(QL)(M)
Diclofenac 1%	1	(M)
Diclofenac 3%	1	(M)
Dorzol/Timol Solution	1	(QL)(M)
Dorzolamide Solution	1	(M)
Epinastine Dro	1	
Ketorolac	1	(QL)
Levobunolol Solution	1	(M)
Simbrinza Suspension	2	(QL)(M)
Timolol Gel Solution	2	(M)
Timolol Mal Solution	1	(M)
Timolol Male Solution	1	(M)
OPHTHALMICS (EYE) PROSTGLANDINS		
Bimatoprost Solution	2	(QL)(M)
Latanoprost Solution	1	(QL)(M)
Lumigan Solution	2	(QL)(M)
Travoprost Dro	2	(ST)(QL)(M)
OPIOID ANTAGONISTS		
Naltrexone Tablet	1	
OPIOID PARTIAL AGONISTS		
Belbuca Mis	2	(QL)
Bupren/Nalox	1	(QL)
Buprenorphin	2	(QL)
Butorphanol Solution	1	(QL)
OSTEOPOROSIS*		
Alendronate Tablet	1	(QL)(M)
Ibandronate Tablet	1	(QL)(M)
Risedronate Tablet	1	(ST)(QL)(M)
Tymlos Injectable	4	(PA)(M)
OTIC PREPARATIONS (EAR)		
Cipro/Dexa Suspension	2	
Neo/Poly/Hc	1	
PAIN MEDICATIONS - NARCOTICS		
Apap/Codeine Tablet	1	(QL)
Ascomp/Cod Capsule	2	(QL)
Bac Tablet	1	(QL)
But/Apap/Caf	1	(QL)
But/Asa/Caf/ Capsule	2	(QL)
Codeine Sulf Tablet	1	(QL)
Endocet Tablet	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Fentanyl Powder	1	(PA)(QL)
Fentanyl Cit Tablet	1	(PA)(QL)
Hydroco/Apap	1	(QL)
Hydromorphon	1	(QL)
Meperidine Tablet	1	(QL)
Morphine Sul	2	(ST)(QL)
Oxy-Acetamin Tablet	1	(QL)
Oxycod-Apap Tablet	1	(QL)
Oxycod/Apap Tablet	1	(QL)
Oxycodone	1	(QL)
Oxymorphone Tablet	2	(QL)
Tramadol	1	(QL)
PAIN MEDICATIONS NSAIDS		
Celecoxib Capsule	1	(QL)(M)
Diclo/Misopr Tablet	2	(M)
Etodolac	1	
Flurbiprofen Tablet	1	
Ibu Tablet	1	(M)
Ibuprofen	1	(M)
Indocin Suspension	3	(M)(AGE)
Indomethacin Capsule	1	(M)
Ketoprofen Capsule	1	
Meloxicam Tablet	1	(M)
Nabumetone Tablet	1	(M)
Naproxen Tablet	1	(M)
Naproxen Sod Tablet	1	(M)
Piroxicam Capsule	1	(M)
Tolmetin Sod Tablet	1	
PANCREATIC ENZYME		
Creon Capsule	2	(QL)(M)
Pancreaze Capsule	2	(QL)(M)
Zenpep Capsule	2	(QL)(M)
PARKINSON'S		
Amantadine	1	(QL)(M)
Benzotropine Tablet	1	(QL)(M)
Bromocriptin Tablet	2	(QL)(M)
Carb/Levo Tablet	1	(QL)(M)
Carb/Levo Er Tablet	1	(QL)(M)
Pramipexole Tablet	1	(ST)(QL)(M)
Rasagiline Tablet	1	(QL)(M)
Ropinirole Tablet	1	(QL)(M)
Trihexyphen Tablet	1	(QL)(M)
PED MULTI VITAMINS W/FL & FE		
Escavite Chw	3	(M)
Escavite D Chw	3	(M)

Drug Name	Drug Tier	Requirements & Limits
Poly-Vi-Flor Chw	3	(M)
TI-Fluorivit Chw	3	(M)
PHENOTHIAZINES		
Fluphenazine Tablet	1	(M)
Perphenazine Tablet	1	(M)
Prochlorper Tablet	1	(M)
PHOSPHATE		
Phospha 250 Tablet	1	
Phospho-Trin Tablet	1	
Phosphorous Tablet	1	
Wes-Phos 250 Tablet	1	
PHOSPHATE BINDING AGENTS		
Calc Acetate Tablet	1	(M)
Sevelamer Tablet	4	(M)
POSTERIOR PITUITARY HORMONES		
Desmopressin	1	(PA)(QL)(M)
POTASSIUM		
Potassium Chloride	1	(M)
PRENATAL VITAMINS		
Co-Natal Fa Tablet	3	
Complete Nat Packet	1	
Completenate Chw	1	
Dermacinrx Tablet	3	
Duovit Dha Capsule	3	
Jenliva Capsule	3	
M-Natal Plus Tablet	3	
Mynatal Capsule	3	
Mynatal Plus Tablet	3	
Mynatal-Z Tablet	3	
Natachew Chw	3	
Natalfirst Tablet	1	
Natalvit Tablet	3	
Neonatal Tablet	3	
Neonatal Pls Tablet	3	
Neonatal/Dha Mis	3	
Nestabs One Capsule	3	
Niva-Plus Tablet	3	
O-Cal Fa Tablet	3	
Ob Complete Capsule	3	
Ob Complete/ Capsule	3	
One Vite Tablet	3	
Prena 1 True Mis	3	
Prenatal Tablet	1	
Prenatal 19	1	
Prenate Capsule	3	

Drug Name	Drug Tier	Requirements & Limits
Prenatrix Tablet	3	
Prenatryl Tablet	3	
Prenatvite Tablet	3	
Se-Natal 19	3	
Select-Ob Chw	3	
Select-Ob+ Packet	3	
Taron-Bc Mis	3	
TI-Care Dha Capsule	3	
Tricare Tablet	3	
Trinatal Rx Tablet	1	
Trinate Tablet	3	
Vinate One Tablet	3	
Vitafol Chw	3	
Vitafol Fe+ Capsule	3	
Vitafol-Ob	3	
Vitamed Md Capsule	3	
Vitathely Tablet	3	
Vitatrue Mis	3	
Vol-Nate Tablet	3	
Wesnatal Dha Packet	3	
Westab Plus Tablet	3	
PROLACTIN INHIBITORS		
Cabergoline Tablet	1	(QL)(M)
PROSTAGLANDIN VASODILATORS		
Treprostinil Injectable	4	(PA)(QL)(M)
Tyvaso Solution	4	(PA)(QL)(M)
Tyvaso Dpi Powder	4	(PA)(QL)(M)
Tyvaso Refil Solution	4	(PA)(QL)(M)
Tyvaso Start Solution	4	(PA)(QL)(M)
PROSTATE		
Alfuzosin Tablet	1	(QL)(M)
Dutasteride Capsule	1	(QL)(M)
Finasteride	1	(QL)(M)
Silodosin Capsule	1	(ST)(QL)(M)
Tadalafil Tablet	2	(PA)(ST)(QL)
Tamsulosin Capsule	1	(QL)(M)
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
Pimozide Tablet	1	
PULMONARY ARTERIAL HYPERTENSION		
Orenitram Tablet	4	(PA)(QL)(M)
Sildenafil Tablet	1	(PA)(QL)
PYRIMIDINE SYNTHESIS INHIBITORS		
Leflunomide Tablet	1	(M)
RECTAL COMBINATIONS		
Lido-Hydro Gel	2	

Drug Name	Drug Tier	Requirements & Limits
RECTAL STEROIDS		
Hydrocortiso Cream	1	
Procto-Med Cream	1	
Procto-Pak Cream	1	
Proctosol Hc Cream	1	
Proctozone Cream	1	
RESPIRATORY THERAPY SUPPLIES		
Aerosol Spacer	1	(QL)
SALICYLATES		
Aspirin	1	(QL)(M)(AGE)
SCABICIDES & PEDICULICIDES		
Malathion Lot	2	
Permethrin Cream	1	
SEIZURE DISORDER		
Carbamazepin Tablet	1	(QL)(M)
Clobazam Tablet	1	(QL)(M)
Clonazepam Tablet	1	(QL)(M)
Depakene Capsule	3	(ST)(QL)(M)
Dilantin Capsule	3	(ST)(QL)(M)
Dilantin-125 Suspension	3	(ST)(QL)(M)
Divalproex Er	1	(QL)(M)
Epitol Tablet	1	(QL)(M)
Ethosuximide Solution	1	(QL)(M)
Felbamate Tablet	1	(QL)(M)
Gabapentin	1	(QL)(M)
Lacosamide	1	(QL)(M)
Lamotrigine Tablet	1	(ST)(QL)(M)
Levetiraceta	1	(QL)(M)
Mysoline Tablet	3	(ST)(QL)(M)
Oxcarbazepin	1	(QL)(M)
Phenobarb Tablet	1	(M)
Phenytek Capsule	1	(QL)(M)
Phenytoin Suspension	1	(QL)(M)
Phenytoin Ex Capsule	1	(QL)(M)
Pregabalin	1	(QL)(M)
Primidone Tablet	1	(QL)(M)
Roweepra Tablet	1	(QL)(M)
Rufinamide Suspension	2	(QL)(M)
Subvenite Tablet	1	(QL)(M)
Topamax Spr Capsule	3	(ST)(QL)(M)
Topiramate	1	(QL)(M)
Valproic Acd Capsule	1	(QL)(M)
Zonisamide Capsule	1	(QL)(M)
SEX HORMONES AND MODULATORS OF THE GENITAL SYSTEM		
Chor Gonadot Injectable	2	(PA)

Drug Name	Drug Tier	Requirements & Limits
Hcg Injectable	3	(PA)
Novarel Injectable	3	(PA)
Pregnyl Injectable	3	(PA)
SMOKING CESSATION		
Apo-Varenicil Tablet	3	(QL)(M)(AGE)
Cvs Nicotine	1	(QL)(M)(AGE)
Eq Nicotine	1	(QL)(M)(AGE)
EqL Nicotine	1	(QL)(M)(AGE)
Ft Nicotine Loz	1	(QL)(M)(AGE)
Gnp Nicotine	1	(QL)(M)(AGE)
Habitrol Dis	1	(QL)(M)(AGE)
Hm Nicotine	1	(QL)(M)(AGE)
Kls Quit2	1	(QL)(M)(AGE)
Kls Quit4	1	(QL)(M)(AGE)
Nicotine	1	(QL)(M)(AGE)
Nicotine Pol	1	(QL)(M)(AGE)
Nicotine Sys Kit	1	(QL)(M)(AGE)
Nicotine Td Dis	1	(QL)(M)(AGE)
Qc Nicotine Dis	1	(QL)(M)(AGE)
Ra Nicotine	1	(QL)(M)(AGE)
Sm Nicotine	1	(QL)(M)(AGE)
Stop Smoking	1	(QL)(M)(AGE)
Thrive Gum	1	(QL)(M)(AGE)
Varenicline Tablet	1	(QL)(M)(AGE)
SOMATOSTATIC AGENTS		
Sandostatin Kit	4	(PA)(M)
STEROIDS		
Dexamethason	1	
Methylpred Tablet	1	
Pred Sod Pho Solution	1	
Prednisone Tablet	1	(M)
Solu-Cortef Injectable	3	
STIMULANTS - ADHD/WAKEFULNESS		
Amphet/Dextr	1	(QL)
Armodafinil Tablet	1	(QL)
Atomoxetine Capsule	1	(QL)(M)
Dexmethylphenidate Er	1	(QL)
Dextroamphet Capsule	1	(QL)
Lisdexamfeta Capsule	1	(QL)
Methylphenid	1	(QL)
Modafinil Tablet	1	(QL)
THROAT PRODUCTS - MISC.		
Pilocarpine Tablet	1	
THYROID		
Adthyza Tablet	3	(M)

Drug Name	Drug Tier	Requirements & Limits	Drug Name	Drug Tier	Requirements & Limits
Armour Thyro Tablet	3	(M)	Fluarix Quad Injectable	2	(M)
Euthyrox Tablet	2	(QL)(M)	Fluvalav Qua Injectable	2	(M)
Levo-T Tablet	2	(QL)(M)	Fluzone Quad Injectable	2	(M)
Levothyroxin	1	(QL)(M)	Gardasil 9 Injectable	2	(AGE)
Levoxyl Tablet	2	(QL)(M)	Hepilisav-B Injectable	2	(QL)
Liothyronine Tablet	1	(M)	Infanrix Injectable	2	(AGE)
Niva Thyroid Tablet	3	(M)	Janssen Vacc Injectable	2	(QL)
Np Thyroid Tablet	3	(M)	Kinrix Injectable	2	(AGE)
Thyroid Tablet	1	(M)	M-M-R li Injectable	2	
Unithroid Tablet	2	(QL)(M)	Menquadfi Injectable	2	
UNCATEGORIZED			Menveo Injectable	2	
Ofev Capsule	4	(PA)(QL)(M)	Moderna Injectable	2	(QL)
Tezspire	4	(PA)(QL)(M)	Moderna Vac Injectable	2	(QL)
URINARY ANALGESICS			Moderna Vacc Injectable	2	(QL)(AGE)
Phenazopyridine	1		Pediarix Injectable	2	(AGE)
URINARY ANTISPASMODICS - CHOLINERGIC AGONIS			Pedvax Hib Injectable	2	(AGE)
Bethanechol Tablet	1	(M)	Pfizer 5-11Y Injectable	2	(QL)
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS			Pfizer 6M-4Y Injectable	2	(QL)
Flavoxate Tablet	1	(M)	Pfizer Bival Injectable	2	(QL)
URINARY INCONTINENCE			Pfizer Vacc Injectable	2	(QL)(AGE)
Darifenacin Tablet	1	(QL)(M)	Proquad Injectable	2	(AGE)
Dicyclomine	1	(M)	Quadracel Injectable	2	(AGE)
Fesoterodine Tablet	2	(QL)(M)	Rotarix Suspension	2	(AGE)
Glycate Tablet	3		Rotateq Solution	2	(AGE)
Glycopyrrol Tablet	1	(M)	Shingrix Injectable	2	(QL)(AGE)
Glycopyrrola Solution	1	(ST)(QL)(M)	Spikevax Injectable	2	(QL)
Hyoscyamine	1	(M)	Tenivac Injectable	2	
Hyosyne Dro	1	(M)	Trumenba Injectable	2	(AGE)
Oscimin	1	(M)	Vaxelis Injectable	2	(QL)(AGE)
Oxybutynin	1	(QL)(M)	VITAMINS/ELECTROLYTES		
Solifenacin Tablet	1	(QL)(M)	Adc/Fluoride Dro	1	(M)
Tolterodine	1	(QL)(M)	Cyanocobalam	1	(M)
Trospium Cl Tablet	1	(QL)(M)	Dodex Injectable	1	(M)
VACCINES			Fe-Vite Iron Solution	1	(QL)(AGE)
Abrysvo Injectable	2	(QL)	Ferrous Sul Solution	1	(QL)(AGE)
Acam2000 Injectable	2	(QL)	Ferrous Sulf	1	(QL)(AGE)
Adacel Injectable	2		Folate Tablet	1	(M)
Afluria Quad Injectable	2	(M)	Folic Acid Tablet	1	(M)
Arexvy Injectable	2	(QL)(AGE)	Iron Drops Dro	1	(QL)(AGE)
Boostrix Injectable	2		Iron Inf-Tod Dro	1	(QL)(AGE)
Comirnaty Injectable	2	(QL)	Iron Inf/Tod Dro	1	(QL)(AGE)
Daptacel Injectable	2	(AGE)	Iron Supplmt Dro	1	(QL)(AGE)
Dip/Tet Ped Injectable	1		Iron Suppmnt Solution	1	(QL)(AGE)
Fluad Quadri Injectable	2	(M)	K Citrate Solution	1	
			K/Na Citrate Solution	1	

Drug Name	Drug Tier	Requirements & Limits
Multi-Vit/FI	1	(M)
Pedia Iron Dro	1	(QL)(AGE)
Pediatric Dro	1	(QL)(AGE)
Pot Citra Er Tablet	1	
Sm Folic Acd Tablet	1	(M)
Sod Citrate Solution	1	
Tri-Vi-Flor Suspension	3	(M)
Tri-Vi-Floro Suspension	3	(M)
Tri-Vit/Fluo Dro	1	(M)
Tricitrates Solution	1	
Vit A/C/D/FI Dro	1	(M)
Vitamin D	1	(M)
YI Folic Aci Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
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