

RxCore® (Five Tier) Prescription Drug List (Nevada)



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. SelectHealth 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: 10/1/2023

Drug Name	Drug Tier	Requirements & Limits
ACNE		
Accutane Capsule	2	
Adapalene Gel	2	(ST)
Aklief Cream	4	(ST)
Amnesteem Capsule	2	
Avar Cleanse Liq	1	
Avita Cream	2	(AGE)
Azelaic Acid Gel	2	
Claravis Capsule	2	
Clindam/Benz Gel	2	(ST)
Clindamy/Ben Gel	2	(ST)
Dapsone	3	(ST)
Ery/Benzoyl Gel	2	
Erythromycin	1	(AGE)
Isotretinoin Capsule	2	
Metronidazol	2	(QL)
Myorisan Capsule	2	
Neuac Gel	2	
Rhofade Cream	4	(QL)
Rosadan	2	(QL)
Sod Sul/Sulf	1	
Sod Sulf/Sul Liq	1	
Sodium Sulfa Suspension	1	
Sulfacetamid Lot	1	
Sulfacleanse Suspension	1	
Tretinoin Cream	2	(AGE)
Zenatane Capsule	2	
ALS AGENTS		
Radicava Ors Suspension	5	(PA)(QL)(M)
ANAPHYLAXIS THERAPY AGENTS		
Auvi-Q Injectable	3	(QL)
Epinephrine Injectable	2	(QL)
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT		
Acampro Cal Tablet	2	
Disulfiram Tablet	1	
ANTIARRHYTHMICS		
Mexiletine Capsule	1	(M)
ANTIBIOTICS		
Amox/K Clav	1	
Amoxicillin	1	
Ampicillin Capsule	1	
Azithromycin	1	(QL)
Cefadroxil Capsule	1	
Cefdinir	1	
Cefpodoxime Tablet	2	

Drug Name	Drug Tier	Requirements & Limits
Cefuroxime Tablet	1	
Cephalexin	1	
Ciprofloxacin	1	
Clarithromyc Tablet	1	
Clindamycin	1	
Dicloxacill Capsule	1	
Doxycycl Hyc	1	
Doxycycline	1	(QL)
Fosfomycin Powder	2	
Levofloxacin Tablet	1	
Linezolid Tablet	2	(QL)
Lymepak Tablet	1	
Methenam Hip Tablet	1	
Minocycline Capsule	1	
Moxifloxacin	2	
Neomycin Tablet	2	
Nitrofur Mac Capsule	1	
Nitrofurantn Capsule	1	
Penicillin Vk Tablet	1	
Smz-Tmp Ds	1	
Tetracycline Capsule	2	
Tinidazole Tablet	2	
Trimethoprim	1	
Vancomycin Capsule	2	(QL)
ANTIDEPRESSANT COMBINATIONS		
Auvelity Tablet	5	(PA)(QL)(M)
ANTIFIBRINOLYTICS		
Lysteda Tablet	4	(PA)
Tranex Acid Tablet	2	(QL)
ANTIFUNGALS		
Ciclodan Solution	1	(QL)
Ciclopirox	1	(QL)
Clotrim/Beta	1	
Clotrimazole	1	
Econazole Cream	2	
Fluconazole	1	(QL)
Itraconazole Capsule	2	
Ketoconazole	1	
Nyamyx Powder	1	(QL)
Nystat/Triam	1	
Nystatin	1	(QL)
Nystop Powder	1	(QL)
Terbinafine Tablet	1	(QL)
Tolsura Capsule	4	
ANTIMALARIALS		
Atovaq/Progu Tablet	2	

Drug Name	Drug Tier	Requirements & Limits
Hydroxychlor	1	(M)
ANTIMYASTHENIC AGENTS		
Pyridostigm Tablet	1	
Pyridostigmi Tablet	3	(QL)
ANTIMYCOBACTERIAL AGENTS		
Ethambutol Tablet	1	
Isoniazid Tablet	1	
Rifampin Capsule	1	
ANTIPROTOZOAL AGENTS		
Atovaquone Suspension	3	
Nitazoxanide Tablet	5	(QL)
ANTITHYROID AGENTS		
Methimazole Tablet	1	(M)
ANTIVIRALS		
Acyclovir	1	
Biktarvy Tablet	5	(QL)(M)
Descovy Tablet	5	(PA)(QL)(M)
Dovato Tablet	5	(QL)(M)
Emtr/Ten Df Tablet	1	(QL)(M)
Emtr/Tenofov Tablet	1	(QL)(M)
Famciclovir Tablet	1	
Genvoya Tablet	5	(QL)(M)
Isentress Tablet	5	(QL)(M)
Isentress Hd Tablet	5	(QL)(M)
Odefsey Tablet	5	(QL)(M)
Paxlovid Tablet	5	(QL)(M)
Prezcobix Tablet	5	(QL)(M)
Ritonavir Tablet	2	(QL)(M)
Symtuza Tablet	5	(QL)(M)
Tenofovir Tablet	2	(QL)(M)
Tivicay Tablet	5	(QL)(M)
Triumeq Tablet	5	(QL)(M)
Valacyclovir Tablet	1	(QL)
Valganciclov Tablet	5	(QL)(M)
Viread Tablet	5	(QL)(M)
ANXIETY & SLEEP		
Alprazolam Tablet	2	(QL)
Belsomra Tablet	4	(ST)(QL)
Bupirone Tablet	1	(M)
Chlordiazep Capsule	2	
Diazepam	2	
Eszopiclone Tablet	2	(QL)
Hydroxyzine	1	
Lorazepam	2	
Ramelteon Tablet	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Temazepam Capsule	2	(QL)
Triazolam Tablet	2	(QL)
Zaleplon Capsule	2	(QL)
Zolpidem Tablet	2	(QL)
Zolpidem Er Tablet	2	(QL)
ASTHMA AND COPD*		
Advair	4	(PA)(QL)(M)
Albuterol	1	(QL)(M)
Alvesco Inhalation	4	(PA)(QL)(M)
Anoro Ellipt Inhalation	3	(QL)(M)
Arformoterol Neb	3	(QL)(M)
Arnuity Elpt Inhalation	3	(QL)(M)
Asmanex	3	(QL)(M)
Atrovent Hfa Inhalation	4	(M)
Breztri Inhalationo Inhalation	3	(QL)(M)(AGE)
Budes/Formot Inhalation	2	(QL)(M)
Budesonide	2	(QL)(M)
Combivent Inhalation	3	(M)
Dulera Inhalation	4	(PA)(QL)(M)
Flovent	3	(QL)(M)
Flutic/Salme	2	(QL)(M)
Flutic/Vilan Inhalation	2	(PA)(QL)(M)
Ipratropium	1	(M)
Kourzeq Pst	1	
Levalbuterol	1	(QL)(M)
Montelukast	1	(QL)(M)
Oralone Dent Pst	1	
Qvar Rediha Inhalation	4	(PA)(QL)(M)
Qvar Redihal Inhalation	4	(PA)(QL)(M)
Roflumilast Tablet	2	(QL)(M)
Serevent Dis Inhalation	3	(M)
Spiriva Handihaler	3	(QL)(M)
Spiriva Respimat	3	(QL)(M)
Stiolto Inhalation	3	(QL)(M)
Striverdi Inhalation	3	(QL)(M)
Symbicort Inhalation	3	(QL)(M)
Trelegy Inhalation	3	(QL)(M)(AGE)
Triamcinolon	1	
Ventolin Hfa Inhalation	3	(QL)(M)
Wixela Inhub Inhalation	2	(QL)(M)
Zafirlukast Tablet	1	(QL)(M)
BLOOD THINNERS		
Brilinta Tablet	3	(QL)(M)
Cilostazol Tablet	1	(M)
Clopidogrel Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Dabigatran Capsule	2	(QL)(M)
Eliquis Tablet	3	(QL)(M)
Enoxaparin Injectable	2	
Pradaxa Capsule	4	(QL)(M)
Prasugrel Tablet	1	(QL)(M)
Warfarin	1	(M)
Xarelto	3	(QL)(AGE)(M)
BURN PRODUCTS		
Silver Sulfa Cream	1	
Ssd Cream	1	
CARBONIC ANHYDRASE INHIBITORS		
Acetazolamid	2	(M)
CARDIOVASCULAR*		
Amiloride Tablet	1	(M)
Amiodarone Tablet	1	(M)
Amlod/Benazp Capsule	1	(M)
Amlod/Olmesa Tablet	1	(ST)(QL)(M)
Amlod/Valsar Tablet	1	(QL)(M)
Amlodipine Tablet	1	(M)
Atenol/Chlor Tablet	1	(M)
Atenolol Tablet	1	(QL)(M)
Benazep/Hctz Tablet	1	(M)
Benazepril Tablet	1	(M)
Bisoprl/Hctz Tablet	1	(M)
Bisoprol Fum Tablet	1	(M)
Bumetanide Tablet	1	(M)
Byvalson Tablet	4	(ST)(QL)(M)
Candes/Hctz Tablet	1	(QL)(M)
Candesartan Tablet	1	(QL)(M)
Cartia Xt Capsule	1	(M)
Carvedilol	2	(QL)(M)
Chlorthalid Tablet	1	(M)
Clonidine	1	(ST)(QL)(M)
Corlanor Tablet	3	(ST)(QL)(M)
Digitex Tablet	1	(M)
Digoxin Tablet	1	(M)
Dilt-Xr Capsule	1	(M)
Diltiazem	1	(M)
Diltiazem Er Tablet	2	(M)
Dofetilide Capsule	2	(M)
Doxazosin Tablet	1	(QL)(M)
Enalapril	2	(QL)(AGE)(M)
Entresto Tablet	3	(QL)(M)
Eplerenone Tablet	1	(M)
Felodipine Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
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)
Irbesar/Hctz Tablet	1	(QL)(M)
Irbesartan Tablet	1	(QL)(M)
Isosorb Din Tablet	1	(M)
Isosorb Mono Tablet	1	(M)
Katerzia Suspension	4	(QL)(M)(AGE)
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	2	(M)
Metolazone Tablet	1	(M)
Metoprol Suc Tablet	1	(M)
Metoprolol	1	(M)
Midodrine Tablet	2	
Minoxidil Tablet	1	(M)
Multaq Tablet	3	(M)
Nadolol Tablet	1	(M)
Nebivolol Tablet	1	(QL)(M)
Nifedipine	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)
Prazosin Hcl Capsule	1	(M)
Propafenone	2	(M)
Propranolol	1	(M)
Ramipril Capsule	1	(M)
Ranolazine Tablet	2	(ST)(QL)(M)
Sotalol Tablet	1	(M)
Sotalol Hcl Tablet	1	(M)
Spiro/Hctz Tablet	1	(M)
Spirolact Tablet	1	(M)
Taztia Xt Capsule	1	(M)
Telmisa/Hctz Tablet	1	(QL)(M)
Telmisartan Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Terazosin Capsule	1	(QL)(M)
Tiadytl 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)
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)
Livalo Tablet	3	(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)
Pravastatin	1	(QL)(M)(AGE)
Prevalite Powder	2	(QL)(M)
Repatha Injectable	3	(PA)(QL)(M)
Repatha Push Injectable	3	(PA)(QL)(M)
Repatha Sure Injectable	3	(PA)(QL)(M)
Rosuvastatin Tablet	1	(QL)(AGE)(M)
Simvastatin Tablet	1	(QL)(AGE)(M)
CONTRACEPTION (BIRTH CONTROL)		
Brand Contraceptives	4	(ST)(M)
Generic Contraceptives	1	(QL)(M)
Medroxyprogesterone	1	(QL)(M)
Phexxi Gel	4	(QL)(M)
COUGH/COLD/ALLERGY PRODUCTS		
Benzonatate	1	(ST)(QL)
Bpm-Pse-Dm Syrup	2	(QL)
Brom/Pse/Dm Syrup	2	(QL)
Bromfed Dm Solution	2	(QL)
Cetirizine Solution	1	(QL)
Cheratussin Syrup	1	
Codeine/Gg Solution	1	
Cyproheptad	1	(QL)
G Tussin Ac Liq	1	
Gg/Codeine Solution	1	

Drug Name	Drug Tier	Requirements & Limits
Guaiatuss Ac Syrup	1	
Guaifenesin Syrup	1	
Hyd Pol/Cpm Suspension	1	(QL)
Hydrocod/Hom Syrup	1	
Hydromet Syrup	1	
Levocetirizi Tablet	1	
Maxi-Tuss Ac Solution	1	
Prometh/Cod	1	
Promethazine	1	
CYCLOPLEGIC MYDRIATICS		
Atropine Sul	1	
Cyclopentol Solution	1	
Cyclopentola Solution	1	
CYSTIC FIBROSIS AGENTS		
Kitabis Packet Neb	5	(PA)(QL)(M)
Pulmozyme Solution	5	(QL)(M)
Tobi Podhalr Capsule	5	(PA)(QL)(M)
Trikafta	5	(PA)(QL)(AGE)(M)
DENTAL PRODUCTS		
Chlorhex Glu Solution	1	
Fluoride	1	(QL)(AGE)(M)
Periogard Solution	1	
DERMATOLOGICALS (SKIN) MISC. DERMATOLOGICALS		
Acitretin Capsule	2	(QL)
Calcipotrien Cream	2	
Diclofenac 1%	2	(PA)(M)
Finacea Gel	4	(QL)
Fluorouracil Cream	2	(PA)(QL)
Gentamicin	1	
Mupirocin Oin	1	
Tazorac Cream	4	(ST)(AGE)
Tolak Cream	4	(QL)
Xepi Cream	4	(QL)
DERMATOLOGICALS (SKIN) STEROIDS		
Ala-Cort Cream	1	
Alclometason Cream	1	
Beta Diprop	1	
Betameth Dip	1	
Betameth Val Cream	1	
Clobetasol	1	
Clodan Sha	1	
Desonide	2	
Fluocin Acet	2	
Fluocinonide	2	(ST)(QL)
Fluticasone	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Hydrocort	1	(M)
Mometasone	1	(QL)(M)
Triderm Cream	1	
DIABETES - INSULIN*		
Fiasp Injectable	3	(M)
Fiasp Flex Injectable	3	(M)
Humulin R U-500	3	(PA)(QL)(M)
Ins Asp Prot Injectable	1	(M)
Insulin Aspa Injectable	1	(M)
Insulin Lisp Injectable	2	(PA)(M)
Lantus Injectable	3	(M)
Lantus Solos Injectable	3	(M)
Novolin Injectable	1	(M)
Novolin N Injectable	1	(M)
Novolog Injectable	3	(M)
Novolog Mix Injectable	3	(M)
Toujeo Max Injectable	3	(M)
Toujeo Solo Injectable	3	(M)
DIABETES - NON-INSULIN*		
Acarbose Tablet	1	(M)
Alogliptin Tablet	1	(QL)(M)
Alogliptin/Metformin	1	(QL)(M)
Baqsimi One Powder	3	
Baqsimi Two Powder	3	
Bydureon Bc Injectable	3	(PA)(QL)(M)
Byetta Injectable	3	(PA)(QL)(M)
Farxiga Tablet	3	(QL)(M)
Glimepiride Tablet	1	(M)
Glip/Metform Tablet	1	(M)
Glipizide	1	(M)
Glucagen Injectable	3	(M)
Glucagon Kit	2	
Glyb/Metform Tablet	1	(M)
Glyburide Tablet	1	(M)
Glyxambi Tablet	3	(QL)(M)
Gvoke Hypo 1 Injectable	3	
Gvoke Hypo 2 Injectable	3	
Gvoke Pfs Injectable	3	
Jardiance Tablet	3	(QL)(M)
Jentaduetto Tablet	3	(ST)(QL)(M)
Metformin Tablet	1	(M)
Pioglit/Met Tablet	1	(QL)(M)
Pioglitazone Tablet	1	(QL)(M)
Repaglinide Tablet	1	(M)
Segluromet Tablet	4	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Soliqua Injectable	3	(ST)(QL)(M)
Steglatro Tablet	4	(ST)(QL)(M)
Synjardy Tablet	3	(QL)(M)
Synjardy Xr Tablet	3	(QL)(M)
Tradjenta Tablet	3	(QL)(M)
Trijardy Xr Tablet	3	(QL)(M)
Trulicity Injectable	3	(PA)(QL)(M)
Xigduo Xr Tablet	3	(QL)(M)
Zegalogue Injectable	4	
DIABETES - TESTING AND SUPPLIES		
1/2MI Tb Syr Mis	4	(M)
10-12MI Syrn Mis	1	(M)
10MI LI Syrg Mis	4	(M)
10MI Syringe Mis	1	(M)
12MI Syringe Mis	4	(M)
140MI Syring Mis	4	(M)
1M Allr Syr Mis	1	(M)
1MI Allr Syr Mis	4	(M)
1MI Slip Tip Mis	4	(M)
1MI Syringe Mis	1	(M)
1MI Tb Syrng Mis	1	(M)
2-3MI Syring Mis	1	(M)
20-25MI Syrn Mis	1	(M)
20MI Syringe Mis	1	(M)
3MI Syringe Mis	4	(M)
30-35MI Syrn Mis	1	(M)
30MI Syringe Mis	1	(M)
35MI Syringe Mis	1	(M)
3MI LI Syrng Mis	1	(M)
3MI Luer Loc Mis	4	(M)
3MI Syringe Mis	1	(M)
5-6MI Syring Mis	1	(M)
50-60MI Syrn Mis	1	(M)
5MI Syringe Mis	1	(M)
60MI Syringe Mis	1	(M)
6MI Syringe Mis	4	(M)
Accu-Chek Tes	4	(PA)(QL)(M)
Admix Needle Mis	4	(M)
Allergy Syrg Mis	1	(M)
Bd 20MI Syrg Mis	4	(M)
Bd 50MI Syrg Mis	4	(M)
Bd 5MI Syrg Mis	4	(M)
Bd Eclipse Mis	4	(M)
Bd Hypo Need Mis	4	(M)
Bd Integra Mis	4	(M)

Drug Name	Drug Tier	Requirements & Limits
Bd Luer-Lok Mis	4	(M)
Bd Needles Mis	4	(M)
Bd Plastipak Mis	4	(M)
Bd Syr 50MI Mis	4	(M)
Bulb Irr Syr Mis	4	(M)
Carepoint Sa Mis	4	(M)
Carepoint Sy Mis	4	(M)
Carepoint Tu Mis	4	(M)
Catheter/Tip Mis	4	(M)
Dexcom G6 Mis	3	(ST)(QL)(M)(AGE)
Dexcom G7 Mis	3	(ST)(QL)(M)(AGE)
Easy Glide Mis	4	(M)
Easy Touch Mis	4	(M)
Easypoint Mis	4	(M)
Eclipse Ndle Mis	4	(M)
Enlite Gluco Mis	4	(PA)(QL)(M)
Fill Needle Mis	4	(M)
Filter Needl Mis	4	(M)
Freesty Libr	3	(ST)(QL)(M)(AGE)
Freestyle	3	(ST)(QL)(AGE)(M)
Guardian Mis	4	(PA)(QL)(M)(AGE)
Guardian 4 Mis	4	(PA)(QL)(M)(AGE)
Guardian Con Mis	4	(PA)(QL)(M)(AGE)
Guardian Rt Mis	4	(PA)(QL)(M)(AGE)
Hypo Needle Mis	2	(M)
Insulin Syringes	1	(M)
Lancets	1	(M)
Luer-Lock Mis	4	(M)
Luer-Lok Mis	4	(M)
Minilink Rt Mis	4	(PA)(QL)(M)(AGE)
Minimed 630G Mis	4	(PA)(QL)(M)(AGE)
Monoject S/P Mis	4	(M)
Needles Mis	4	(M)
Norm-Ject Mis	4	(M)
Omnipod 5 G6	3	(PA)(QL)(M)
Omnipod Dash	3	(PA)(QL)(M)
Paradigm Rea Mis	4	(PA)(QL)(M)(AGE)
Patient Safe Mis	4	(M)
Pen Needles	4	(M)
Pharm Syrng Mis	4	(M)
Pharm Tray Mis	4	(M)
Piston Irrig Mis	4	(M)
Poly Hub Mis	4	(M)
Precision Tes	3	(QL)(M)
Safetyglide Mis	4	(M)

Drug Name	Drug Tier	Requirements & Limits
Safty Needle Mis	4	(M)
Securesafe Mis	4	(M)
Slip Tip 1MI Mis	4	(M)
Slip Tip 3MI Mis	4	(M)
Syrg/Ndl 3MI Mis	4	(M)
Syringe 5MI Mis	4	(M)
Syringe Luer Mis	4	(M)
Tb Syringe Mis	4	(M)
Tb Syrng 1MI Mis	4	(M)
Toomey Syrin Mis	1	(M)
Vent Needle Mis	4	(M)
DIRECT MUSCLE RELAXANTS		
Dantrolene Capsule	1	
ECZEMA AGENTS - TOPICAL		
Eucrisa Oin	3	(QL)
EMOLLIENTS		
Ammonium Lac Cream	1	
GALLSTONE SOLUBILIZING AGENTS		
Ursodiol	2	(M)
GASTROINTESTINAL (DIGESTIVE) MISC.		
GASTROINTESTINAL		
Diphen/Atrop Tablet	1	
Linzeess Capsule	3	(QL)(M)
Lubiprostone Capsule	2	(QL)(M)(AGE)
Metoclopram Tablet	1	
Motegrity Tablet	4	(ST)(QL)
Movantik Tablet	3	(QL)
Relistor	5	(PA)(QL)(M)
Symproic Tablet	3	(QL)
Trulance Tablet	4	(ST)(QL)(M)
Xifaxan Tablet	4	(PA)
GASTROINTESTINAL (DIGESTIVE) NAUSEA & VOMITING		
Akynzeo Capsule	3	(QL)
Antivert Tablet	4	
Emend Suspension	4	(QL)
Meclizine Tablet	1	
Ondansetron	1	(QL)
Promethegan Sup	2	
Scopolamine Dis	2	
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Cimetidine Tablet	1	(M)
Famotidine	2	(M)
Misoprostol Tablet	1	(M)
Sucralfate	2	(M)
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Esomeprazole	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Lansoprazole	1	(ST)(QL)(AGE)(M)
Omeprazole Capsule	1	(QL)(M)
Pantoprazole Tablet	1	(QL)(M)
Rabeprazole Tablet	1	(QL)(M)
GASTROINTESTINAL ANTIALLERGY AGENTS		
Cromolyn Sod Con	3	(M)
GNRH/LHRH ANTAGONISTS		
Orilissa Tablet	5	(PA)(QL)(M)
GOUT		
Allopurinol Tablet	1	(M)
Colchicine	2	(QL)
Febuxostat Tablet	2	(QL)(M)
Probenecid Tablet	1	(M)
GOUT AGENT COMBINATIONS		
Proben/Colch Tablet	1	(M)
GROWTH HORMONES		
Genotropin Injectable	5	(PA)(QL)(M)
Humatrope Injectable	5	(PA)(QL)(M)
Omnitrope Injectable	5	(PA)(QL)(M)
HEMATORHEOLOGIC AGENTS		
Pentoxifylli Tablet	1	(M)
HEPATITIS THERAPIES		
Entecavir Tablet	2	(QL)(M)
Harvoni Packet	5	(PA)(QL)(M)
Ledip-Sofosb Tablet	5	(PA)(QL)(M)
Mavyret	5	(PA)(QL)(M)
Sofos/Velpat Tablet	5	(PA)(QL)(M)
Vosevi Tablet	5	(PA)(QL)(M)
HORMONE RECEPTOR MODULATORS		
Osphena Tablet	4	(QL)(M)
Raloxifene Tablet	1	(QL)(M)
HORMONE REPLACEMENT THERAPY FEMALE		
Alora Dis	4	(QL)(M)
Amabelz Tablet	1	(QL)(M)
Climara Pro Dis	4	(QL)(M)
Combipatch Dis	3	(QL)(M)
Covaryx Tablet	1	(QL)(M)
Covaryx Hs Tablet	1	(QL)(M)
Delestrogen Injectable	4	
Dotti Dis	1	(QL)(M)
Eemt Tablet	1	(QL)(M)
Eemt Hs Tablet	1	(QL)(M)
Est Estrogen Tablet	1	(QL)(M)
Estra/Noreth Tablet	1	(QL)(M)
Estrace Tablet	4	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Estrace Vag Cream	4	(ST)(QL)(M)
Estrad Val Injectable	1	
Estradiol	2	(QL)(M)
Estring Mis	4	(ST)(QL)(M)
Estrog/Mtest Tablet	1	(QL)(M)
Estrogel Gel	4	(QL)(M)
Femring Mis	4	(ST)(QL)(M)
Fyavolv Tablet	1	(M)
Imvexxy Main Sup	4	(ST)(QL)(M)
Imvexxy Strt Sup	4	(ST)(QL)(M)
Jinteli Tablet	1	(M)
Lyllana Dis	1	(QL)(M)
Menostar Dis	4	(QL)(M)
Mimvey Tablet	1	(QL)(M)
Noreth/Ethin Tablet	1	(M)
Norethin Ace Tablet	1	(M)
Premarin Tablet	3	(QL)(M)
Premarin Vag Cream	4	(ST)(QL)(M)
Premphase Tablet	4	(ST)(QL)(M)
Prempro Tablet	4	(ST)(QL)(M)
Progesterone	1	(QL)(M)
Yuvaferm Tablet	2	(QL)(M)
HORMONE REPLACEMENT THERAPY MALE		
Depo-Testost Injectable	1	(QL)(M)
Testost Cyp Injectable	1	(QL)(M)
Testost Enan Injectable	1	(QL)(M)
Testosterone	2	(QL)(M)
IMMUNOLOGICAL AGENTS - IMMUNE SYSTEM STIMULATION OR SUPPRESSION		
Actemra Injectable	5	(PA)(QL)(M)
Adbry Injectable	5	(PA)(QL)(M)
Amjevita Injectable	5	(PA)(QL)(M)
Cimzia	5	(PA)(QL)(M)
Cosentyx	5	(PA)(QL)(M)
Enbrel	5	(PA)(QL)(M)
Humira	5	(PA)(QL)(M)
Ilumya Solution	5	(PA)(M)
Kevzara Injectable	5	(PA)(QL)(M)
Kineret Injectable	5	(PA)(QL)(M)
Olumiant Tablet	5	(PA)(QL)(M)
Orencia Injectable	5	(PA)(QL)(M)
Orencia Clck Injectable	5	(PA)(QL)(M)
Otezla Tablet	5	(PA)(QL)(M)
Rinvoq Tablet	5	(PA)(QL)(M)
Simponi	5	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Skyrizi Injectable	5	(PA)(QL)(M)
Skyrizi Pen Injectable	5	(PA)(QL)(M)
Stelara Injectable	5	(PA)(QL)(M)
Taltz Injectable	5	(PA)(M)
Vtama Cream	4	(ST)(QL)
Xeljanz Tablet	5	(PA)(QL)(M)
Xeljanz Xr Tablet	5	(PA)(QL)(M)
Xolair Injectable	5	(PA)(QL)(M)
IMMUNOMODULATING AGENTS - TOPICAL		
Imiquimod Cream	1	
IMMUNOSUPPRESSANTS		
Azasan Tablet	1	(M)
Azathioprine Tablet	1	(M)
Cyclosporine	2	(PA)(QL)(M)
Envarsus Xr Tablet	3	(ST)(M)
Everolimus Tablet	5	(QL)(M)
Gengraf Capsule	2	(M)
Mycophenolat	1	(M)
Mycophenolic Tablet	2	(QL)(M)
Sirolimus Tablet	3	(M)
Tacrolimus	1	(QL)(M)
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
Pimecrolimus Cream	3	(ST)(QL)
INFLAMMATORY BOWEL AGENTS		
Balsalazide Capsule	2	(M)
Mesalamine	2	(QL)(M)
Pentasa Capsule	3	(QL)(M)
Sulfasalazin Tablet	1	(M)
INFLUENZA AGENTS		
Oseltamivir	2	(QL)
INTESTINAL ACIDIFIERS		
Enulose Solution	1	
Generlac Solution	1	
Lactulose Solution	1	
LAXATIVE COMBINATIONS		
Clenpiq Solution	3	
Gavilyte	1	
Peg 3350	1	
Sodium/Potas Solution	1	
Suprep Bowel Solution	3	
LAXATIVES		
Constulose Solution	1	
LOCAL ANESTHETICS - TOPICAL		
Lido/Prilocn Cream	1	
Lidocaine	2	

Drug Name	Drug Tier	Requirements & Limits
MENTAL HEALTH		
Abilify Asim Injectable	5	(QL)(M)
Abilify Main Injectable	5	(M)
Amitriptylin Tablet	1	(M)
Aripiprazole Tablet	2	(QL)(M)
Aristada Injectable	5	(QL)(M)
Asenapine Sub	3	(ST)(QL)(M)
Bupropion Tablet	1	(QL)(AGE)(M)
Bupropn Hcl Tablet	1	(QL)(M)
Citalopram	1	(QL)(M)
Clomipramine Capsule	2	(QL)(M)
Clozapine Tablet	1	(QL)(M)
Desipramine Tablet	2	(M)
Desvenlafax Tablet	2	(QL)(M)
Donepezil Tablet	1	(ST)(M)
Doxepin Hcl Capsule	1	(M)
Duloxetine	1	(QL)(M)
Escitalop Ox Solution	1	(M)
Escitalopram	1	(QL)(M)
Fetzima Capsule	4	(PA)(QL)(M)
Fluoxetine	1	(QL)(M)
Fluvoxamine	2	(ST)(QL)(M)
Haloperidol Tablet	1	(M)
Imipram Hcl Tablet	1	(M)
Invega Hafye Injectable	5	(QL)(M)
Invega Sust Injectable	5	(M)
Invega Trinz Injectable	5	(M)
Lithium Carb	1	(M)
Lurasidone Tablet	2	(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	2	(ST)(QL)(M)
Paroxetine Er Tablet	2	(ST)(QL)(M)
Paroxetine Tablet	1	(ST)(QL)(M)
Quetiapine Er	1	(QL)(M)
Rexulti Tablet	4	(PA)(QL)(M)
Risperdal	5	(M)
Risperidone	1	(QL)(M)
Rivastigmine	2	(M)
Savella	3	(ST)(QL)(M)
Sertraline	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Spravato Solution	5	(PA)(M)
Tranlycyprom Tablet	2	(M)
Trazodone Tablet	1	(QL)(M)
Trintellix Tablet	4	(ST)(QL)(M)
Venlafaxine	1	(QL)(M)
Vilazodone Tablet	2	(QL)(M)
Vraylar Capsule	4	(PA)(QL)(M)
Ziprasidone Capsule	1	(QL)(M)
Zoloft Con	4	(ST)(QL)(M)
METABOLIC MODIFIERS		
Calcitriol Capsule	1	(M)
Cinacalcet Tablet	2	(PA)(QL)(M)
Javygtor	5	(PA)(QL)(M)
Levocarnitin Solution	2	
Nityr Tablet	5	(PA)(QL)(M)
Pheburane Mis	5	(PA)(QL)(M)
Sapropterin Powder	5	(PA)(QL)(M)
Stremsiq Injectable	5	(PA)(QL)(M)
MIGRAINE		
Aimovig Injectable	4	(PA)(QL)
Ajovy Injectable	3	(ST)(QL)(M)
Aprepitant Capsule	2	(QL)
Eletriptan Tablet	2	(QL)
Emgality Injectable	4	(PA)(QL)(M)
Frovatriptan Tablet	2	(ST)(QL)
Naratriptan Tablet	1	(QL)(M)
Nurtec Tablet	3	(PA)(QL)
Reyvow Tablet	4	(PA)(QL)
Rizatriptan Tablet	1	(M)
Sumatriptan	2	(ST)(QL)(M)
Ubrelvy Tablet	3	(PA)(QL)
Zolmitriptan	2	(ST)(QL)
MINERALOCORTICOIDS		
Fludrocort Tablet	1	(M)
MISC. ANTIVIRALS		
Lagevrio Capsule	5	(QL)(M)
MISC. RESPIRATORY INHALANTS		
Hypersal Neb	4	
Nebusal Neb	1	
Pulmosal Neb	1	
Sod Chloride	1	(PA)
Sodium Chlor Neb	1	
MISC. TOPICAL		
Drysol Solution	4	
Qbrexza Pad	4	(PA)(QL)

Drug Name	Drug Tier	Requirements & Limits
MOVEMENT DISORDER		
Austedo Tablet	5	(PA)(QL)(M)
Ingrezza Capsule	5	(PA)(QL)(M)
Tetrabenazin Tablet	5	(PA)(QL)(M)
MULTIPLE SCLEROSIS AGENTS		
Avonex	5	(PA)(QL)(M)
Dalfampridin Tablet	2	(QL)(M)
Dimethyl Fum Capsule	2	(QL)(M)
Extavia Injectable	5	(PA)(QL)(M)
Glatiramer Injectable	2	(PA)(QL)(M)
Glatopa Injectable	2	(PA)(QL)(M)
Plegridy	5	(PA)(QL)(M)
Teriflunomid Tablet	2	(QL)(M)
Vumerity Capsule	5	(PA)(QL)(M)
Zeposia Capsule	5	(PA)(QL)(M)
Zeposia 7Day Capsule	5	(PA)(QL)(M)
MUSCLE RELAXANTS		
Baclofen Tablet	2	(M)
Carisoprodol Tablet	1	(QL)
Chlorzoxazon Tablet	2	
Cyclobenzaprine	2	
Metaxall Tablet	2	(ST)
Metaxalone Tablet	2	(ST)
Methocarbam Tablet	2	
Orphenadrine Tablet	2	
Tizanidine	2	(ST)(QL)
Vanadom Tablet	1	(QL)
NASAL ALLERGY		
Azel/Flutic Spr	3	(ST)(QL)
Azelastine	1	(QL)(M)
Dymista Spr	3	(QL)
Flunisolide Spr	1	(QL)
Xhance Mis	4	(PA)(QL)
ONCOLOGY/HEMATOLOGY		
Abiraterone Tablet	5	(QL)(M)
Anastrozole Tablet	1	(QL)(M)
Bicalutamide Tablet	1	(QL)
Cabometyx Tablet	5	(PA)(QL)(M)
Capecitabine Tablet	2	(M)
Erleada Tablet	5	(PA)(QL)(M)
Exemestane Tablet	2	(QL)(M)
Hydroxyurea Capsule	1	
Ibrance Tablet	5	(PA)(QL)(M)
Imatinib	2	(QL)
Jakafi Tablet	5	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Lenalidomide Capsule	2	(PA)(QL)(M)
Letrozole Tablet	1	(QL)(M)
Leucovor Ca Tablet	1	(QL)
Lynparza Tablet	5	(PA)(QL)(M)
Megestrol Ac	1	
Mercaptopur Tablet	2	
Methotrexate	1	(M)
Rasuvo Injectable	3	(ST)(QL)
Revlimid Capsule	5	(PA)(QL)(M)
Sprycel Tablet	5	(PA)(QL)(M)
Tamoxifen Tablet	1	(QL)(M)
Temozolomide Capsule	4	(QL)(M)
Venclexta Tablet	5	(PA)(QL)(M)
Verzenio Tablet	5	(PA)(QL)(M)
Xtandi Capsule	5	(PA)(QL)(M)
OPHTHALMIC STEROIDS		
Alrex Suspension	4	(ST)(QL)
Dexameth Pho Solution	1	
Difluprednat Emu	2	(QL)
Fluoromethol Suspension	1	
Fml Forte Suspension	4	
Lotemax	4	(QL)
Lotemax Sm Gel	4	(QL)
Loteprednol	2	(QL)
Neo/Poly/Dex	1	
Pred Mild Suspension	4	
Prednisolone	1	(QL)
Tobra/Dexame Suspension	1	
Tobradex St Suspension	3	
OPHTHALMICS (EYE) ANTI-INFECTIVES		
Besivance Suspension	4	(QL)
Ofloxacin Dro	1	
Polymyxin B/ Solution	1	
Tobramycin Solution	1	
OPHTHALMICS (EYE) MISC. OPHTHALMICS		
Brimonidine 0.15%	1	(M)
Brinzolamide Suspension	2	(QL)(M)
Bromfenac Solution	2	
Cequa Solution	4	(ST)(QL)(M)
Combigan Solution	2	(QL)(M)
Diclofenac 3%	1	(M)
Dorzol/Timol Solution	1	(QL)(M)
Dorzolamide Solution	1	(M)
Ketorolac	1	(QL)
Rhopressa Solution	4	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Rocklatan Dro	4	(ST)(QL)
Simbrinza Suspension	3	(QL)(M)
Timolol Gel Solution	1	(M)
Timolol Mal Solution	1	(M)
Timolol Male Solution	2	(M)
Verkazia Emu	5	(PA)(QL)(M)
OPHTHALMICS (EYE) PROSTGLANDINS		
Bimatoprost Solution	2	(QL)(M)
Latanoprost Solution	1	(QL)(M)
Lumigan Solution	3	(QL)(M)
Travoprost Dro	2	(ST)(QL)(M)
OPIOID ANTAGONISTS		
Naloxone Injectable	1	(QL)(M)
Naltrexone Tablet	1	
Vivitrol Injectable	5	(QL)(M)
OPIOID PARTIAL AGONISTS		
Belbuca Mis	3	(QL)
Bupren/Nalox	2	(QL)
Buprenorphin	2	(QL)
Butorphanol Solution	2	(QL)
Sublocade Injectable	5	(QL)(M)
OSTEOPOROSIS*		
Alendronate Tablet	1	(QL)(M)
Calcitonin Spr	1	(M)
Ibandronate Tablet	1	(QL)(M)
Prolia Injectable	5	(M)
Risedronate Tablet	2	(ST)(QL)(M)
Tymlos Injectable	5	(PA)(M)
OTIC AGENTS - MISCELLANEOUS		
Acetic Acid Solution	1	
OTIC PREPARATIONS (EAR)		
Cipro/Dexa Suspension	2	
Neo/Poly/Hc	1	
OTIC STEROIDS		
Flac Oil	2	
PAIN MEDICATIONS - NARCOTICS		
Apap/Codeine Tablet	2	(QL)
Ascomp/Cod Capsule	2	(QL)
Bac Tablet	1	(QL)
Bupap Tablet	1	(QL)
But/Apap/Caf	2	(QL)
But/Asa/Caf/ Capsule	2	(QL)
But/Asa/Caff Capsule	1	(QL)
Butal/Apap Tablet	1	(QL)
Butalb/Aceta Tablet	1	(QL)

Drug Name	Drug Tier	Requirements & Limits
Endocet Tablet	2	(QL)
Fentanyl Dis	3	(PA)(QL)
Hydroco/Apap	2	(QL)
Hydromorphon Tablet	2	(QL)
Methadone Tablet	2	(QL)
Morphine Sul	2	(ST)(QL)
Oxy-Acetamin Tablet	2	(QL)
Oxycod-Apap Tablet	2	(QL)
Oxycod/Apap Tablet	2	(QL)
Oxycodone	2	(QL)
Oxymorphone Tablet	2	(ST)(QL)
Tramadl/Apap Tablet	2	(QL)
Tramadol	2	(QL)
Xtampza Er Capsule	3	(ST)(QL)
PAIN MEDICATIONS NSAIDS		
Celecoxib Capsule	1	(QL)(M)
Diclo/Misopr Tablet	2	(M)
Etodolac Tablet	1	
Ibu Tablet	1	(M)
Ibuprofen	1	(M)
Indomethacin Capsule	1	(M)
Meloxicam Tablet	1	(M)
Nabumetone Tablet	1	(M)
Naproxen Tablet	1	(M)
Naproxen Sod Tablet	1	(M)
Piroxicam Capsule	1	(M)
Sulindac Tablet	1	
PANCREATIC ENZYME		
Creon Capsule	3	(QL)(M)
Pancreaze Capsule	3	(QL)(M)
Pertzye Capsule	3	(QL)(M)
Zenpep Capsule	3	(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)
Neupro Dis	4	(QL)(M)
Pramipexole Tablet	1	(QL)(M)
Rasagiline Tablet	2	(QL)(M)
Ropinirole Tablet	1	(QL)(M)
Trihexyphen Tablet	1	(QL)(M)
PHENOTHIAZINES		
Chlorpromaz Tablet	2	(M)

Drug Name	Drug Tier	Requirements & Limits
Perphenazine Tablet	1	(M)
Prochlorper Tablet	1	(M)
PHOSPHATE		
Phospha 250 Tablet	1	
Phospho-Trin Tablet	1	
Phosphorous Tablet	1	
Wes-Phos 250 Tablet	1	
PHOSPHATE BINDING AGENTS		
Calc Acetate Capsule	1	(M)
Sevelamer Tablet	5	(M)
POSTERIOR PITUITARY HORMONES		
Desmopressin	2	(QL)(M)
POTASSIUM		
Potassium Chloride	1	(M)
POTASSIUM REMOVING RESINS		
Lokelma Packet	3	(PA)(QL)(M)
PRENATAL VITAMINS		
Co-Natal Fa Tablet	4	
Complete Nat Packet	1	
M-Natal Plus Tablet	4	
Natalvit Tablet	4	
Neonatal Tablet	4	
Neonatal Pls Tablet	4	
Niva-Plus Tablet	4	
One Vite Tablet	4	
Prenatal Tablet	1	
Prenatal Vit Tablet	4	
Prenatrix Tablet	4	
Prenatryl Tablet	4	
Tricare Tablet	4	
Trinatal Rx Tablet	1	
Trinate Tablet	4	
Vinate One Tablet	4	
Vitafol-Ob Tablet	4	
Vitathely Tablet	4	
Wesnatal Dha Packet	4	
Westab Plus Tablet	4	
PROLACTIN INHIBITORS		
Cabergoline Tablet	2	(QL)(M)
PROSTATE		
Alfuzosin Tablet	1	(QL)(M)
Dutasteride Capsule	1	(QL)(M)
Finasteride	1	(QL)(M)
Silodosin Capsule	2	(ST)(QL)(M)
Tadalafil Tablet	2	(PA)(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Tamsulosin Capsule	1	(QL)(M)
PULMONARY ARTERIAL HYPERTENSION		
Adempas Tablet	5	(PA)(QL)(M)
Alyq Tablet	2	(PA)(QL)(M)
Ambrisentan Tablet	5	(PA)(QL)(M)
Opsumit Tablet	5	(PA)(QL)(M)
Orenitram Tablet	5	(PA)(QL)(M)
Sildenafil	5	(PA)(QL)(M)
PYRIMIDINE SYNTHESIS INHIBITORS		
Leflunomide Tablet	2	(M)
RECTAL COMBINATIONS		
Hc Pramoxine Cream	1	
RECTAL STEROIDS		
Anucort-Hc Sup	2	
Anusol-Hc Sup	2	
Hemmorex-Hc Sup	2	
Hydrocort Ac Sup	2	
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		
Permethrin Cream	1	
SEIZURE DISORDER		
Aptiom Tablet	4	(ST)(QL)(M)
Briviact	4	(QL)(M)
Carbamazepin	2	(QL)(M)
Carbatrol Capsule	4	(QL)(M)
Clobazam	2	(QL)(M)
Clonazep Odt Tablet	1	(QL)(M)
Clonazepam Tablet	1	(QL)(M)
Dilantin Capsule	4	(ST)(QL)(M)
Divalproex Er	1	(QL)(M)
Epidiolex Solution	4	(PA)(QL)(M)(AGE)
Epitol Tablet	1	(QL)(M)
Ethosuximide Capsule	2	(QL)(M)
Gabapentin	1	(QL)(M)
Keppra	4	(ST)(QL)(M)
Keppra Xr Tablet	4	(ST)(QL)(M)
Lacosamide Tablet	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Lamictal	4	(ST)(QL)(M)
Lamictal Xr Tablet	4	(ST)(QL)(M)
Lamotrigine	1	(ST)(QL)(M)
Levetiraceta	1	(QL)(M)
Mysoline Tablet	4	(ST)(QL)(M)
Nayzilam Spr	4	(QL)
Oxcarbazepin	1	(QL)(M)
Phenobarb Tablet	1	(M)
Phenytek Capsule	1	(ST)(QL)(M)
Phenytoin Ex Capsule	1	(QL)(M)
Pregabalin Capsule	1	(QL)(M)
Primidone Tablet	1	(QL)(M)
Roweepra Tablet	1	(QL)(M)
Subvenite Tablet	1	(QL)(M)
Tegretol Tablet	4	(ST)(QL)(M)
Tegretol-Xr Tablet	4	(ST)(QL)(M)
Topamax Spr Capsule	4	(ST)(QL)(M)
Topiramate	1	(QL)(M)
Trileptal	4	(ST)(QL)(M)
Valproic Acd Capsule	1	(QL)(M)
Xcopri Tablet	4	(ST)(QL)
Zarontin Capsule	4	(ST)(QL)(M)
Zonegran Capsule	4	(ST)(QL)(M)
Zonisamide Capsule	1	(QL)(M)
SEX HORMONES AND MODULATORS OF THE GENITAL SYSTEM		
Chor Gonadot Injectable	3	(PA)
Novarel Injectable	4	(PA)
Pregnyl Injectable	4	(PA)
SMOKING CESSATION		
Apo-Varenicil Tablet	4	(QL)(M)(AGE)
Cvs Nicotine	1	(QL)(M)(AGE)
Eq Nicotine	1	(QL)(M)(AGE)
EqI 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)
Nicorelief Gum	1	(QL)(M)(AGE)
Nicotine	1	(QL)(M)(AGE)
Nicotine Pol	1	(QL)(M)(AGE)
Nicotine Td Dis	1	(QL)(M)(AGE)
Qc Nicotine Dis	1	(QL)(M)(AGE)
Ra Nicotine	1	(QL)(M)(AGE)

Drug Name	Drug Tier	Requirements & Limits
Sm Nicotine	1	(QL)(M)(AGE)
Stop Smoking	1	(QL)(M)(AGE)
Thrive Gum	1	(QL)(M)(AGE)
Varenicline Tablet	2	(QL)(M)(AGE)
SOMATOSTATIC AGENTS		
Octreotide Injectable	3	(QL)(M)
Sandostatin Injectable	5	(QL)(M)
Somatuline Injectable	5	(PA)(QL)(M)
STEROIDS		
Decadron Elx	1	
Dexamethason	1	
Methylpred Tablet	1	
Pred Sod Pho Solution	1	
Prednisone Tablet	1	(M)
Solu-Cortef Injectable	4	
STIMULANTS - ADHD/WAKEFULNESS		
Amphet/Dextr	1	(QL)
Armodafinil Tablet	2	(QL)
Atomoxetine Capsule	2	(QL)(M)
Dexmethylphenidate Er	2	(QL)
Dextroamphet	2	(QL)
Jornay Pm Capsule	4	(ST)(QL)(M)
Lisdexamfeta Capsule	2	(QL)
Methylphenid	1	(QL)
Modafinil Tablet	2	(QL)
Qelbree Capsule	4	(ST)(QL)(M)
Quillichew Chw	3	(QL)
Quillivant Suspension	3	(QL)
Sunosi Tablet	4	(ST)(QL)
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
Benlysta Injectable	5	(PA)(QL)(M)
THROAT PRODUCTS - MISC.		
Cevimeline Capsule	2	
Pilocarpine Tablet	2	
THYROID		
Adthyza Tablet	4	(M)
Armour Thyro Tablet	4	(M)
Euthyrox Tablet	3	(QL)(M)
Levo-T Tablet	3	(QL)(M)
Levothyroxin	2	(QL)(M)
Levoxyl Tablet	3	(QL)(M)
Liothyronine Tablet	1	(M)
Niva Thyroid Tablet	4	(M)
Np Thyroid Tablet	4	(M)
Synthroid Tablet	4	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Thyroid Tablet	1	(M)
Tirosint Capsule	4	(QL)(M)
Unithroid Tablet	3	(QL)(M)
UNCATEGORIZED		
Fasenra Pen Injectable	5	(PA)(QL)(M)
Kerendia Tablet	4	(PA)(QL)(M)
Tezspire Injectable	5	(PA)(QL)(M)
Tyrvaya Solution	4	(ST)(QL)(M)
URINARY ANALGESICS		
Phenazopyridine	2	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
Gemtesa Tablet	4	(ST)(QL)(M)
Myrbetriq	4	(ST)(QL)(AGE)(M)
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
Bethanechol Tablet	1	(M)
URINARY INCONTINENCE		
Dicyclomine	1	(M)
Fesoterodine Tablet	2	(QL)(M)
Glycate Tablet	4	
Glycopyrrol Tablet	1	(M)
Hyoscyamine	1	(M)
Nulev Tablet	1	(M)
Oscimin	1	(M)
Oxybutynin	1	(QL)(M)
Solifenacin Tablet	1	(QL)(M)
Tolterodine	2	(QL)(M)
Trospium Chl Capsule	2	(QL)(M)
Trospium Cl Tablet	1	(QL)(M)
VACCINES		
Abrysvo Injectable	2	(QL)(AGE)
Adacel Injectable	3	
Afluria Quad Injectable	3	(M)
Arexvy Injectable	2	(QL)(AGE)
Boostrix Injectable	3	
Comirnaty Injectable	3	(QL)
Engerix-B Injectable	3	
Fluad Quadri Injectable	3	(M)
Fluarix Quad Injectable	3	(M)
Flublok Quad Injectable	3	(M)
Fluclvx Quad Injectable	3	(M)
Flulaval Qua Injectable	3	(M)
Flumist Quad Suspension	3	(M)(AGE)
Fluzone Hd Injectable	3	(M)
Fluzone Quad Injectable	3	(M)

Drug Name	Drug Tier	Requirements & Limits
Gardasil 9 Injectable	3	(AGE)
Havrix Injectable	3	
Hepilisav-B Injectable	3	(QL)
M-M-R li Injectable	3	
Menquadfi Injectable	3	
Moderna Injectable	3	(QL)
Moderna Biv Injectable	3	(QL)
Moderna Biva Injectable	3	(QL)
Moderna Vac Injectable	3	(QL)
Moderna Vacc Injectable	3	(QL)(AGE)
Pfizer 5-11Y Injectable	3	(QL)
Pfizer 6M-4Y Injectable	3	(QL)
Pfizer Bival Injectable	3	(QL)
Pfizer Vacc Injectable	3	(QL)(AGE)
Pneumovax 23 Injectable	3	(AGE)
Prevnar 20 Injectable	2	
Recombiva Hb Injectable	3	
Shingrix Injectable	3	(QL)(AGE)
Spikevax Injectable	3	(QL)
Twinrix Injectable	3	
Vaqta Injectable	3	
Varivax Injectable	3	
VAGINAL ANTI-INFECTIVES		
Terconazole Cream	1	
VITAMINS/ELECTROLYTES		
Cyanocobalam	1	(M)
Dodex Injectable	1	(M)
Fe-Vite Iron Solution	1	(QL)(AGE)
Ferrous Sul Solution	1	(QL)(AGE)
Ferrous Sulf	1	(QL)(AGE)
Folic Acid Tablet	1	(M)
Iron Drops Dro	1	(QL)(AGE)
Iron Inf-Tod Dro	1	(QL)(AGE)
Iron Inf/Tod Dro	1	(QL)(AGE)
Iron Supplmt Dro	1	(QL)(AGE)
Iron Suppmnt Solution	1	(QL)(AGE)
Multi-Vit/Fl	1	(M)
Pedia Iron Dro	1	(QL)(AGE)
Pediatric Dro	1	(QL)(AGE)
Pot Citra Er Tablet	2	
Sod Citrate Solution	1	
Vitamin D	1	(M)

Drug Name	Drug Tier	Requirements & Limits
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