

RxSelect® (Five Tier) Prescription Drug List (Utah)



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.

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This information is available for free in other languages and alternate formats.

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

SelectHealth: **800-538-5038**

Scripius: **800-442-3127**



Drug Name	Drug Tier	Requirements & Limits
ACNE		
Absorica Capsule	4	(PA)
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)
Ery/Benzoyl Gel	2	
Erythromycin	1	(AGE)
Isotretinoin Capsule	2	
Ivermectin	2	(PA)(ST)(QL)
Metronidazol	2	(QL)
Myorisan Capsule	2	
Neuac Gel	2	
Rhofade Cream	4	(QL)
Rosadan	2	(QL)
Rosanil Liq	1	
Sod Sul/Sulf	1	
Sod Sulf/Sul Liq	1	
Sulfacetamid Lot	1	
Sulfacleanse Suspension	1	
Tretinoin Cream	2	(AGE)
Zenatane Capsule	2	
ALLERGENIC EXTRACTS		
Palforzia Capsule	4	(PA)(QL)
ANAPHYLAXIS THERAPY AGENTS		
Auvi-Q Injectable	3	(QL)
Epinephrine	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	
Augmentin Tablet	4	
Azithromycin	1	(QL)
Cefadroxil Capsule	1	

Drug Name	Drug Tier	Requirements & Limits
Cefdinir	1	
Cefpodoxime Tablet	2	
Cefuroxime Tablet	1	
Cephalexin	1	
Ciprofloxacn	1	
Clarithromyc Tablet	1	
Cleocin Cream	3	
Cleocin Ped Solution	4	
Clindamycin	1	
Dicloxacill Capsule	1	
Doxycycl Hyc	1	
Doxycycline	1	(QL)
Erythrom Eth Suspension	3	(AGE)
Flagyl Tablet	4	
Fosfomycin Powder	2	
Hiprex Tablet	4	
Levofloxacin Tablet	1	
Linezolid Tablet	2	(QL)
Lymepak Tablet	1	
Methenam Hip Tablet	1	
Minocycline Capsule	1	
Monurol Packet	4	
Moxifloxacin	2	
Neomycin Tablet	2	
Nitrofur Mac Capsule	1	
Nitrofurantn Capsule	1	
Penicilln Vk Tablet	1	
Smz-Tmp Ds	1	
Tetracycline Capsule	2	
Tindamax Tablet	4	
Tinidazole Tablet	2	
Trimethoprim	1	
Uribel Capsule	2	
Uro-Mp Capsule	2	
Uro-Sp Capsule	2	
Ustell Capsule	4	
Uticap Capsule	2	
Vancocin Capsule	4	(QL)
Vancomycin Capsule	2	(QL)
Vilamit Mb Capsule	2	
Zithromax Tablet	4	(QL)
Zyvox Tablet	5	(ST)(QL)(M)
ANTIDEPRESSANT COMBINATIONS		
Auvelity Tablet	5	(PA)(QL)(M)
ANTIFIBRINOLYTICS		
Lysteda Tablet	4	(QL)

Drug Name	Drug Tier	Requirements & Limits
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	(QL)
Ketoconazole	1	
Nyamyx Powder	1	(QL)
Nystat/Triam	1	
Nystatin	1	(QL)
Nystop Powder	1	(QL)
Sporanox Capsule	4	(QL)
Terbinafine Tablet	1	(QL)
ANTIMALARIALS		
Atovaq/Progu Tablet	2	
Hydroxychlor	1	(M)
Malarone Tablet	4	(PA)
ANTIMYASTHENIC AGENTS		
Pyridostigm Tablet	1	
Pyridostigmi Tablet	3	(QL)
ANTIMYCOBACTERIAL AGENTS		
Ethambutol Tablet	1	
Myambutol Tablet	4	
Rifampin Capsule	1	
ANTISEBORRHEIC PRODUCTS		
Sodium Sulfa Liq	2	
ANTITHYROID AGENTS		
Methimazole Tablet	1	(M)
Propylthiour 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)
Juluca Tablet	5	(QL)(M)
Odefsey Tablet	5	(QL)(M)
Paxlovid Tablet	5	(QL)(M)
Prezcobix Tablet	5	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Symfi Tablet	5	(QL)(M)
Symfi Lo Tablet	5	(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)
Valcyte Tablet	5	(QL)(M)
Valganciclov Tablet	5	(QL)(M)
Valtrex Tablet	4	(QL)
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 Tablet	2	
Ramelteon Tablet	2	(QL)(M)
Temazepam Capsule	2	(QL)
Triazolam Tablet	2	(QL)
Xanax Xr Tablet	4	(QL)
Zaleplon Capsule	2	(QL)
Zolpidem Tablet	2	(QL)
Zolpidem Er Tablet	2	(QL)
ASTHMA AND COPD*		
Accolate Tablet	4	(QL)(M)
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)
Bevespi Inhalation	4	(ST)(QL)(M)
Breztri Inhalationo Inhalation	3	(QL)(M)(AGE)
Budes/Formot Inhalation	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)

Drug Name	Drug Tier	Requirements & Limits
Incruse Elpt Inhalation	4	(ST)(QL)(M)
Ipratropium	1	(M)
Levalbuterol	1	(QL)(M)
Montelukast	1	(QL)(M)
Oralone Dent Pst	1	
Proair Hfa Inhalation	4	(ST)(QL)(M)
Proventil Inhalation	4	(ST)(QL)(M)
Pulmicort Suspension	4	(PA)(QL)(M)
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	
Tudorza Pres Inhalation	4	(ST)(QL)(M)
Ventolin Hfa Inhalation	3	(QL)(M)
Wixela Inhub Inhalation	2	(QL)(M)
Xopenex Hfa Inhalation	4	(QL)(M)
Zafirlukast Tablet	1	(QL)(M)
BLOOD THINNERS		
Brilinta Tablet	3	(QL)(M)
Cilostazol Tablet	1	(M)
Clopidogrel Tablet	1	(QL)(M)
Dabigatran Capsule	2	(QL)(M)
Eliquis Tablet	3	(QL)(M)
Enoxaparin Injectable	2	
Plavix Tablet	4	(QL)(M)
Pradaxa Capsule	4	(QL)(M)
Prasugrel Tablet	1	(QL)(M)
Warfarin	1	(M)
Xarelto	3	(QL)(AGE)(M)
BRADYKININ B2 RECEPTOR ANTAGONISTS		
Firazyr Injectable	5	(PA)(QL)(M)
BURN PRODUCTS		
Silvadene Cream	4	
Silver Sulfa Cream	1	
Ssd Cream	1	
CARBONIC ANHYDRASE INHIBITORS		
Acetazolamid	2	(M)
CARDIOVASCULAR*		
Afeditab Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
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)
Atacand Hct Tablet	4	(ST)(QL)(M)
Atenol/Chlor Tablet	1	(M)
Atenolol Tablet	1	(QL)(M)
Avalide Tablet	4	(ST)(QL)(M)
Azor Tablet	4	(ST)(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)
Calan Tablet	4	(M)
Candesas/Hctz Tablet	1	(QL)(M)
Candesartan Tablet	1	(QL)(M)
Captopril Tablet	1	(M)
Cartia Xt Capsule	1	(M)
Carvedilol	1	(M)
Chlorthalid Tablet	1	(M)
Clonidine	1	(ST)(QL)(M)
Corlanor Tablet	3	(ST)(QL)(M)
Digitex Tablet	1	(M)
Digox Tablet	1	(M)
Digoxin Tablet	1	(M)
Dilt-Xr Capsule	1	(M)
Diltiazem	1	(M)
Diltiazem Er Tablet	1	(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)
Flecainide Tablet	1	(M)
Furosemide Tablet	1	(M)
Guanfacine Tablet	1	(M)
Hemangeol Solution	4	(M)
Hydralazine Tablet	1	(M)
Hydrochlorothiazide	1	(M)
Indapamide Tablet	1	(M)
Inspra Tablet	4	(ST)(M)

Drug Name	Drug Tier	Requirements & Limits
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	1	(M)
Metolazone Tablet	1	(M)
Metoprol Suc Tablet	1	(M)
Metoprolol	1	(M)
Micardis Hct Tablet	4	(ST)(QL)(M)
Midodrine Tablet	2	
Minoxidil Tablet	1	(M)
Multaq Tablet	3	(M)
Nadolol Tablet	1	(M)
Nebivolol Tablet	1	(QL)(M)
Nifedipine	1	(M)
Nitroglycer Dis	1	(M)
Nitroglyceri Sub	1	(M)
Nitroglycern Sub	1	(M)
Olm Med/Hctz Tablet	1	(QL)(M)
Olmesa Medox Tablet	1	(QL)(M)
Pacerone Tablet	1	(M)
Prazosin Hcl Capsule	1	(M)
Propafenone Tablet	2	(M)
Propranolol	1	(M)
Ramipril Capsule	1	(M)
Ranexa Tablet	4	(ST)(QL)(M)
Ranolazine Tablet	2	(ST)(QL)(M)
Sotalol Tablet	1	(M)
Sotalol Hcl Tablet	1	(M)
Spirono/Hctz Tablet	1	(M)
Spironolact Tablet	1	(M)
Taztia Xt Capsule	1	(M)
Telmisa/Hctz Tablet	1	(QL)(M)
Telmisartan Tablet	1	(QL)(M)
Tenormin Tablet	4	(ST)(QL)(M)
Terazosin Capsule	1	(QL)(M)
Thalitone Tablet	3	(M)
Tiadytl Capsule	1	(M)
Torse mide Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Triamt/Hctz	1	(M)
Tribenzor	4	(ST)(QL)(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)
Questran Powder	4	(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	3	(ST)(QL)(M)
Generic Contraceptives	1	(QL)(M)
Medroxyprogesterone	1	(QL)(M)
Nuvaring	4	(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 Syrup	2	(QL)
Cetirizine Solution	1	(QL)
Codeine/Gg Solution	1	
Cyproheptad	1	(QL)
G Tussin Ac Liq	1	
Gg/Codeine Solution	1	
Guaiatuss Ac Syrup	1	

Drug Name	Drug Tier	Requirements & Limits
Guaifenesin Syrup	1	
Hycodan Syrup	3	
Hydrocod/Hom Syrup	1	
Hydromet Syrup	1	
Levocetirizi Tablet	1	
Maxi-Tuss Ac Solution	1	
Prometh/Cod	1	
Promethazine	1	
Robafen Ac Solution	1	
Xyzal Tablet	4	(ST)(QL)
CYCLOPLEGIC MYDRIATICS		
Atropine Sul	1	
Isopto Atrop Solution	4	
CYSTIC FIBROSIS AGENTS		
Kitabis Packet Neb	5	(PA)(QL)(M)
Orkambi Gra	5	(PA)(QL)(M)
Pulmozyme Solution	5	(QL)(M)
Tobi Podhalr Capsule	5	(PA)(QL)(M)
Trikafta Tablet	5	(PA)(QL)(M)(AGE)
DENTAL PRODUCTS		
Chlorhex Glu Solution	1	
Fluoride	1	(QL)(AGE)(M)
Peridex Solution	4	
Periogard Solution	1	
DERMATOLOGICALS (SKIN) MISC. DERMATOLOGICALS		
Acitretin Capsule	2	(QL)
Calcipotrien Cream	2	
Diclofenac 1%	2	(M)
Finacea Gel	4	(QL)
Fluoroplex Cream	4	
Fluorouracil Cream	2	(PA)(QL)
Gentamicin	1	
Mupirocin Oin	1	
Tazorac	4	(ST)(AGE)
Xepi Cream	4	(QL)
DERMATOLOGICALS (SKIN) STEROIDS		
Ala-Cort Cream	1	
Alclometason Cream	1	
Beta Diprop	1	
Betameth Dip	1	
Betameth Val	1	
Clobetasol	1	
Derma-Smooth Oil	4	
Desonide	2	
Elocon Oin	4	

Drug Name	Drug Tier	Requirements & Limits
Fluocin Acet Oil	2	
Fluocinonide	2	(ST)(QL)
Fluticasone	1	(QL)(M)
Halobetasol Oin	2	
Hydrocort	1	(M)
Hydrocortiso	1	
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)
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)
Actoplus Met Tablet	4	(QL)(M)
Actos Tablet	4	(QL)(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	
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)

Drug Name	Drug Tier	Requirements & Limits
Jentaducto Tablet	3	(ST)(QL)(M)
Metformin Tablet	1	(M)
Pioglit/Met Tablet	1	(QL)(M)
Pioglitazone Tablet	1	(QL)(M)
Segluromet Tablet	4	(ST)(QL)(M)
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	4	(PA)(QL)(M)
Admix Needle Mis	4	(M)
Allergy Syrg Mis	1	(M)
Antigen Test Kit	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Bd 20MI Syrg Mis	4	(M)
Bd 50MI Syrg Mis	4	(M)
Bd 5MI Syrg Mis	4	(M)
Bd Allergy Mis	4	(M)
Bd Eclipse Mis	4	(M)
Bd Hypo Need Mis	4	(M)
Bd Integra Mis	4	(M)
Bd Luer-Lok Mis	4	(M)
Bd Needles Mis	4	(M)
Bd Plastipak Mis	4	(M)
Bd Syr 50MI Mis	4	(M)
Bd Veritor Kit	4	(QL)(M)
Binaxnow Cov Kit	4	(QL)(M)
Bulb Irr Syr Mis	4	(M)
Carepoint Sy Mis	4	(M)
Catheter/Tip Mis	4	(M)
Covid-19 At- Kit	2	(QL)(M)
Covid-19 Rap Kit	4	(QL)(M)
Cvs Covid-19 Kit	4	(QL)(M)
Dexcom G6 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)
Fastep 1-Pk Kit	4	(QL)(M)
Fastep 2-Pk Kit	4	(QL)(M)
Fastep 25-Pk Kit	4	(QL)(M)
Fastep 4-Pk Kit	4	(QL)(M)
Fastep 5-Pk Kit	4	(QL)(M)
Fill Needle Mis	4	(M)
Freesty Libr	3	(ST)(QL)(M)(AGE)
Freestyle	3	(ST)(QL)(AGE)(M)
Guardian 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)
Indicaid Kit	4	(QL)(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)

Drug Name	Drug Tier	Requirements & Limits
Needles Mis	4	(M)
Norm-Ject Mis	4	(M)
Omnipod 5 G6	3	(PA)(QL)(M)
Omnipod Dash	3	(PA)(QL)(M)
On/Go One Kit	4	(QL)(M)
Paradigm Rea Mis	4	(PA)(QL)(M)(AGE)
Patient Safe Mis	4	(M)
Pen Needles	3	(M)
Pharm Syrng Mis	4	(M)
Pharm Tray Mis	4	(M)
Pilot Covid Kit	4	(QL)(M)
Piston Irrig Mis	4	(M)
Poly Hub Mis	4	(M)
Precision Tes	3	(QL)(M)
Precisn Xtra Tes	3	(QL)(M)
Quickvue Hom Kit	4	(QL)(M)
Safetyglide Mis	4	(M)
Safy Needle Mis	4	(M)
Securesafe Mis	4	(M)
Slip Tip 1MI Mis	4	(M)
Slip Tip 3MI Mis	4	(M)
Speedy Swab Kit	4	(QL)(M)
Syrg/Ndl 3MI Mis	4	(M)
Syringe 5MI Mis	4	(M)
Syringe Luer Mis	1	(M)
Tb Syringe Mis	4	(M)
Tb Syrng 1MI Mis	4	(M)
Toomey Syrin Mis	1	(M)
Vent Needle Mis	4	(M)
DIAGNOSTIC PRODUCTS, MISC.		
Carestart Kit	4	(QL)(M)
Cleardetect Kit	4	(QL)(M)
Clinitest Kit	4	(QL)(M)
Diatrust Kit	4	(QL)(M)
Ellume Cov19 Kit	4	(QL)(M)
Flowflex Kit	4	(QL)(M)
Ihealth 2-Pk Kit	4	(QL)(M)
Ihealth 40Pk Kit	4	(QL)(M)
Ihealth 5-Pk Kit	4	(QL)(M)
Inteliswab Kit	4	(QL)(M)
On/Go Covid Kit	4	(QL)(M)
Otc Antigent Kit	2	(QL)(M)
ECZEMA AGENTS - TOPICAL		
Eucrisa Oin	3	(QL)
GALLSTONE SOLUBILIZING AGENTS		
Reltone Capsule	5	(M)

Drug Name	Drug Tier	Requirements & Limits
Ursodiol	2	(M)
GASTROINTESTINAL (DIGESTIVE) MISC.		
GASTROINTESTINAL		
Amitiza Capsule	4	(ST)(QL)(M)(AGE)
Diphen/Atrop Tablet	1	
Linzess Capsule	3	(QL)(M)
Lubiprostone Capsule	2	(QL)(M)(AGE)
Metoclopram Tablet	1	(M)
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	3	
Emend Suspension	4	(QL)
Granisetron Tablet	2	(QL)
Meclizine Tablet	1	
Ondansetron	1	(PA)(QL)
Promethegan Sup	2	
Scopolamine Dis	2	
Transderm-Sc Dis	4	
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Cimetidine Tablet	1	(M)
Famotidine	2	(M)
Misoprostol Tablet	1	(M)
Pepcid Tablet	4	(M)
Sucralfate	2	(M)
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Esomeprazole	1	(QL)(M)
First-Omepra Suspension	2	(QL)(M)
Lansoprazole	1	(ST)(QL)(AGE)(M)
Omeprazole Capsule	1	(QL)(M)
Omeprazole + Suspension	2	(QL)(M)
Pantoprazole Tablet	1	(QL)(M)
Prevacid Capsule	4	(ST)(QL)(M)
Protonix Tablet	4	(ST)(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)

Drug Name	Drug Tier	Requirements & Limits
Colchicine	2	(QL)
Colcrys Tablet	4	(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)
Zomacton 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		
Evista Tablet	4	(QL)(M)
Osphena Tablet	4	(QL)(M)
Raloxifene Tablet	1	(QL)(M)
HORMONE REPLACEMENT THERAPY FEMALE		
Activella Tablet	4	(QL)(M)
Alora Dis	4	(QL)(M)
Amabelz Tablet	1	(QL)(M)
Aygestin Tablet	4	(QL)(M)
Climara Dis	4	(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	
Depo-Estradi Injectable	4	
Divigel Gel	4	(QL)(M)
Dotti Dis	1	(QL)(M)
Eemt Tablet	1	(QL)(M)
Eemt Hs Tablet	1	(QL)(M)
Elestrin Gel	4	(QL)(M)
Est Estrogen Tablet	1	(QL)(M)
Estra/Noreth Tablet	1	(QL)(M)
Estrace Tablet	4	(QL)(M)
Estrace Vag Cream	4	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
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)
Femhrt Tablet	4	(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)
Jevantique L Tablet	1	(M)
Jinteli Tablet	1	(M)
Lopreeza Tablet	1	(QL)(M)
Lyllana Dis	1	(QL)(M)
Menest Tablet	4	(QL)(M)
Menostar Dis	4	(QL)(M)
Mimvey Tablet	1	(QL)(M)
Minivelle Dis	4	(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	(QL)(M)
Prempro Tablet	4	(QL)(M)
Progesterone	1	(QL)(M)
Prometrium Capsule	4	(QL)(M)
Vagifem Tablet	4	(ST)(QL)(M)
Vivelle-Dot Dis	4	(QL)(M)
YuvaFem Tablet	2	(QL)(M)
HORMONE REPLACEMENT THERAPY MALE		
Depo-Testost Injectable	1	(QL)(M)
Natesto Gel	4	(PA)(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)
Cimzia	5	(PA)(QL)(M)
Cosentyx	5	(PA)(QL)(M)
Dupixent Injectable	5	(PA)(QL)(AGE)(M)
Enbrel	5	(PA)(QL)(M)
Humira	5	(PA)(QL)(M)
Ilumya Solution	5	(PA)(M)

Drug Name	Drug Tier	Requirements & Limits
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)
Skyrizi Injectable	5	(PA)(QL)(M)
Skyrizi Pen Injectable	5	(PA)(QL)(M)
Stelara Injectable	5	(PA)(QL)(M)
Taltz Injectable	5	(PA)(M)
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		
Azathioprine Tablet	1	(M)
Cellcept	4	(M)
Cyclosporine	2	(PA)(QL)(M)
Envarsus Xr Tablet	4	(ST)(QL)(M)
Everolimus Tablet	5	(PA)(QL)(M)
Gengraf Capsule	2	(M)
Mycophenolat	1	(M)
Mycophenolic Tablet	2	(QL)(M)
Myfortic Tablet	5	(QL)(M)
Neoral Capsule	3	(M)
Prograf Capsule	4	(M)
Rapamune Tablet	4	(M)
Sirolimus Tablet	3	(M)
Tacrolimus	1	(QL)(M)
Zortress Tablet	5	(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)
Tamiflu	4	(QL)
INTESTINAL ACIDIFIERS		
Lactulose Solution	1	

Drug Name	Drug Tier	Requirements & Limits
LAXATIVE COMBINATIONS		
Clenpiq Solution	3	
Gavilyte	1	
Peg 3350	1	
Sodium/Potas Solution	1	
Suprep Bowel Solution	3	
LAXATIVES		
Constulose Solution	1	
Polyeth Glyc Powder	1	
LEPROSTATICS		
Dapsone Tablet	2	
LOCAL ANESTHETICS - TOPICAL		
Lido/Prilocn Cream	1	
Lidocaine	2	(QL)
MENTAL HEALTH		
Abilify Main Injectable	5	(M)
Amitriptylin Tablet	1	(M)
Anafranil Capsule	4	(QL)(M)
Aripiprazole Tablet	2	(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)
Clozaril Tablet	4	(ST)(QL)(M)
Desipramine Tablet	2	(M)
Desvenlafax Tablet	2	(QL)(M)
Donepezil Tablet	1	(ST)(M)
Doxepin Hcl	1	(M)
Duloxetine	1	(QL)(M)
Effexor Xr Capsule	4	(ST)(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)
Geodon Capsule	4	(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)
Lexapro Tablet	4	(ST)(QL)(M)
Lithium Carb	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Lurasidone Tablet	2	(QL)(M)
Memant Titra Packet	1	(QL)(M)
Memantine Tablet	1	(QL)(M)
Memantine Hc Capsule	1	(ST)(QL)(M)
Mirtazapine	1	(M)
Namenda Tablet	4	(QL)(M)
Namenda Xr Capsule	4	(ST)(QL)(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)
Paxil Tablet	4	(ST)(QL)(M)
Paxil Cr Tablet	4	(ST)(QL)(M)
Pristiq Tablet	4	(ST)(QL)(M)
Prozac Capsule	4	(ST)(QL)(M)
Quetiapine Er	1	(QL)(M)
Rexulti Tablet	4	(PA)(QL)(M)
Risperdal	5	(ST)(QL)(M)
Risperidone Tablet	1	(QL)(M)
Savella	3	(ST)(QL)(M)
Sertraline	1	(QL)(M)
Spravato Solution	5	(PA)(M)
Trazodone Tablet	1	(QL)(M)
Trintellix Tablet	4	(ST)(QL)(M)
Venlafaxine	1	(QL)(M)
Viibryd Tablet	4	(PA)(QL)(M)
Vilazodone Tablet	2	(ST)(QL)(M)
Vraylar Capsule	4	(PA)(QL)(M)
Wellbutrin Tablet	4	(ST)(QL)(M)
Ziprasidone Capsule	1	(QL)(M)
Zoloft	4	(ST)(QL)(M)
Zyprexa Tablet	4	(ST)(QL)(M)
Zyprexa Zydi Tablet	4	(ST)(QL)(M)
METABOLIC MODIFIERS		
Calcitriol Capsule	1	(M)
Cinacalcet Tablet	2	(PA)(QL)(M)
Kuvan	5	(PA)(QL)(M)
Levocarnitin	2	
Nityr Tablet	5	(PA)(QL)(M)
Strensiq Injectable	5	(PA)(QL)(M)
MIGRAINE		
Aimovig Injectable	4	(PA)(QL)
Ajovy Injectable	3	(ST)(QL)(M)
Amerge Tablet	4	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Aprepitant Capsule	2	(QL)
Eletriptan Tablet	2	(ST)(QL)
Emgality Injectable	4	(PA)(QL)(M)
Frova Tablet	4	(ST)(QL)
Frovatriptan Tablet	2	(ST)(QL)
Imitrex	4	(ST)(QL)(M)
Maxalt Tablet	4	(ST)(QL)(M)
Maxalt-Mlt Tablet	4	(ST)(QL)(M)
Naratriptan Tablet	1	(QL)(M)
Nurtec Tablet	3	(PA)(QL)
Relpax Tablet	4	(ST)(QL)
Reyvow Tablet	4	(PA)(QL)
Rizatriptan Tablet	1	(M)
Sumatriptan	2	(ST)(QL)(M)
Ubrelvy Tablet	3	(PA)(QL)
Zolmitriptan	2	(ST)(QL)
Zomig Tablet	4	(ST)(QL)
MINERALOCORTICOIDS		
Fludrocort Tablet	1	(M)
MIOTICS		
Pilocarpine	1	
Vuity Solution	4	
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)
MISCELLANEOUS VAGINAL PRODUCTS		
Intrarosa Sup	4	(QL)(M)
MOVEMENT DISORDER		
Austedo Tablet	5	(PA)(QL)(M)
Ingrezza Capsule	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)
Gilenya Capsule	5	(PA)(QL)(M)
Glatiramer Injectable	2	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Glatopa Injectable	2	(PA)(QL)(M)
Plegridy	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	
Metaxalone Tablet	2	(ST)
Methocarbam Tablet	2	
Orphenadrine Tablet	2	
Tizanidine	2	(ST)(QL)
Vanadom Tablet	1	(QL)
Zanaflex	4	(ST)(QL)
NASAL ALLERGY		
Azel/Flutic Spr	3	(ST)(QL)
Azelastine	1	(QL)(M)
Dymista Spr	3	(QL)
Flunisolide Spr	1	(QL)(M)
Xhance Mis	4	(PA)(QL)
ONCOLOGY/HEMATOLOGY		
Abiraterone Tablet	5	(QL)(M)
Afinitor Tablet	5	(PA)(QL)(M)
Anastrozole Tablet	1	(QL)(M)
Bicalutamide Tablet	1	(QL)
Capecitabine Tablet	2	(QL)(M)
Exemestane Tablet	2	(QL)(M)
Hydrea Capsule	4	
Hydroxyurea Capsule	1	
Ibrance	5	(PA)(QL)(M)
Imatinib	2	(PA)(QL)
Jakafi Tablet	5	(PA)(QL)(M)
Lenalidomide Capsule	2	(PA)(QL)(M)
Letrozole Tablet	1	(QL)(M)
Leucovor Ca Tablet	1	(QL)
Lonsurf Tablet	5	(PA)(QL)(M)
Lynparza Tablet	5	(PA)(QL)(M)
Megestrol Ac Tablet	1	
Mercaptopur Tablet	2	(M)
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)

Drug Name	Drug Tier	Requirements & Limits
Temozolomide Capsule	4	(QL)(M)
Venclexta Tablet	5	(PA)(QL)(M)
Verzenio Tablet	5	(PA)(QL)(M)
Xeloda Tablet	5	(QL)(M)
Xtandi Capsule	5	(PA)(QL)(M)
OPHTHALMIC STEROIDS		
Alrex Suspension	4	(ST)(QL)
Dexameth Pho Solution	1	
Difluprednat Emu	2	(QL)
Durezol Emu	4	(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)
Sulf/Pred Na Solution	1	
Tobra/Dexame Suspension	1	
Tobradex St Suspension	4	
OPHTHALMICS (EYE) ANTI-INFECTIVES		
Besivance Suspension	4	(QL)
Gatifloxacin Solution	2	(QL)
Ofloxacin Dro	1	
Polymyxin B/ Solution	1	
Polytrim Solution	4	
Sulfacet Sod Solution	1	
Tobramycin Solution	1	
Vigamox Dro	4	(QL)
Zymaxid Solution	4	(QL)
OPHTHALMICS (EYE) MISC. OPHTHALMICS		
Acuvail Solution	4	(QL)
Brimonidine 0.15%	1	(M)
Bromfenac Solution	2	
Combigan Solution	2	(QL)(M)
Cosopt Solution	4	(QL)(M)
Cosopt Pf Solution	4	(QL)(M)
Diclofenac 3%	1	(QL)(M)
Dorzol/Timol Solution	1	(QL)(M)
Dorzolamide Solution	1	(M)
Ketorolac	1	(QL)
Prolensa Solution	4	(ST)(QL)
Rhopressa Solution	4	(ST)(QL)(M)
Timolol Mal Solution	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Timolol Male Solution	2	(M)
Timoptic Ocu Solution	4	(ST)(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)
Travatan Z Dro	4	(ST)(QL)(M)
Travoprost Dro	2	(ST)(QL)(M)
Xalatan Solution	4	(QL)(M)
Zioptan Dro	4	(ST)(QL)(M)
OPIOID ANTAGONISTS		
Kloxxado Spr	3	(QL)(M)
Naloxone	1	(QL)(M)
Naloxone Hcl Spr	1	(QL)(M)
Naltrexone Tablet	1	
Narcan Spr	3	(QL)(M)
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 PREPARATIONS (EAR)		
Cipro/Dexa Suspension	2	
Neo/Poly/Hc	1	
OTIC STEROIDS		
Dermotic Oil	4	
Flac Oil	2	
PAIN MEDICATIONS - NARCOTICS		
Apap/Codeine Tablet	2	(QL)
Ascomp/Cod Capsule	2	(QL)
Bac Tablet	1	(QL)
But/Apap/Caf	2	(QL)
But/Asa/Caf/ Capsule	2	(QL)
But/Asa/Caff Capsule	1	(QL)
Endocet Tablet	2	(QL)

Drug Name	Drug Tier	Requirements & Limits
Esgic Tablet	4	(QL)
Fentanyl Dis	3	(PA)(QL)
Fioricet Capsule	4	(QL)
Hydroco/Apap	2	(QL)
Hydromorphon Tablet	2	(QL)
Meperidine Solution	2	(QL)
Methadone Tablet	2	(QL)
Morphine Sul	2	(ST)(QL)
Oxaydo Tablet	4	(QL)
Oxy-Acetamin Tablet	2	(QL)
Oxycod-Apap Tablet	2	(QL)
Oxycod/Apap Tablet	2	(QL)
Oxycodone	2	(QL)
Oxymorphone Tablet	2	(ST)(QL)
Roxicodone Tablet	4	(QL)
Tramadl/Apap Tablet	2	(QL)
Tramadol	2	(QL)
Ultracet Tablet	4	(QL)
Xtampza Er Capsule	3	(ST)(QL)
PAIN MEDICATIONS NSAIDS		
Arthrotec 50 Tablet	4	(ST)(M)
Arthrotec 75 Tablet	4	(ST)(M)
Cataflam Tablet	1	(M)
Celecoxib Capsule	1	(QL)(M)
Diclo/Misopr Tablet	2	(M)
Diclofen Pot Tablet	1	(M)
Etodolac Tablet	1	(M)
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)
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)

Drug Name	Drug Tier	Requirements & Limits
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)
Rytary Capsule	4	(ST)(M)
Trihexyphen Tablet	1	(QL)(M)
PHENOTHIAZINES		
Chlorpromaz Tablet	2	(M)
Perphenazine Tablet	1	(M)
Prochlorper Tablet	1	(M)
PHOSPHATE		
K-Phos Tablet	4	
Phospha 250 Tablet	1	
Phospho-Trin Tablet	1	
Phosphorous Tablet	1	
Virt-Phos Tablet	1	
PHOSPHATE BINDING AGENTS		
Calc Acetate Capsule	1	(M)
Sevelamer Tablet	2	(M)
POSTERIOR PITUITARY HORMONES		
Ddavn Tablet	4	(QL)
Desmopressin	2	(QL)
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	
Concept Ob Capsule	4	
Folivane-Ob Capsule	4	
M-Natal Plus Tablet	4	
M-Vit Tablet	4	
Natalvit Tablet	4	
Neonatal Tablet	4	
Neonatal Pls Tablet	4	
Niva-Plus Tablet	4	
One Vite Tablet	4	
Pnv Folic Ac Tablet	4	
Pnv Prenatal Tablet	4	
Prenatal Tablet	1	
Prenatal Vit Tablet	4	
Prenatrix Tablet	4	
Prenatryl Tablet	4	

Drug Name	Drug Tier	Requirements & Limits
Preplus Tablet	4	
Provida Ob Capsule	4	
Tricare Tablet	4	
Trinatal Rx Tablet	1	
Trinate Tablet	4	
Vinate One Tablet	4	
Vitafol-Ob Tablet	4	
Vitathely Tablet	4	
Wesnata 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)
Tamsulosin Capsule	1	(QL)(M)
Uroxatral Tablet	4	(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)
Revatio Suspension	5	(PA)(QL)(M)
Sildenafil	5	(PA)(QL)(M)
PYRIMIDINE SYNTHESIS INHIBITORS		
Leflunomide Tablet	2	(M)
RECTAL COMBINATIONS		
Hc Pramoxine Cream	1	
Procort Cream	4	
RECTAL STEROIDS		
Anucort-Hc Sup	2	
Anusol-Hc Sup	2	
Hemmorex-Hc Sup	2	
Hydrocort Ac Sup	2	
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)

Drug Name	Drug Tier	Requirements & Limits
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	2	(QL)(M)
Gabapentin	1	(QL)(M)
Keppra	4	(ST)(QL)(M)
Keppra Xr Tablet	4	(ST)(QL)(M)
Klonopin Tablet	4	(ST)(QL)(M)
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)
Onfi	4	(PA)(QL)(M)
Oxcarbazepin	1	(QL)(M)
Oxtellar Xr Tablet	4	(ST)(QL)(M)
Phenobarb Tablet	1	(M)
Phenytek Capsule	4	(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 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)
Valtoco Spr	4	(QL)
Vimpat Solution	4	(ST)(QL)(M)
Vimpat Tablets	4	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Xcopri Tablet	4	(ST)(QL)(M)
Zarontin	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	3	(QL)(M)(AGE)
Commit Loz	3	(QL)(M)(AGE)
Cvs Nicotine	1	(QL)(M)(AGE)
Eq Nicotine	1	(QL)(M)(AGE)
EqL 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)
Nicoderm Cq Dis	3	(QL)(M)(AGE)
Nicorelief Gum	1	(QL)(M)(AGE)
Nicorette	3	(QL)(M)(AGE)
Nicorette St Gum	3	(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)
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		
Budesonide Capsule	2	(QL)
Decadron Tablet	1	
Dexamethason	4	
Medrol Tablet	4	
Methylpred Tablet	1	
Pred Sod Pho Solution	1	
Prednisone Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Solu-Cortef Injectable	4	
STIMULANTS - ADHD/WAKEFULNESS		
Adderall	3	(QL)
Armodafinil Tablet	2	(QL)
Atomoxetine Capsule	2	(QL)(M)
Concerta Tablet	3	(QL)
Dexmethylphenidate Er	2	(QL)
Dextroamphet	2	(QL)
Jornay Pm Capsule	4	(ST)(QL)(M)
Metadate Tablet	1	(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)
Vyvanse Capsule	3	(QL)
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
Benlysta Injectable	5	(PA)(QL)(M)
THROAT PRODUCTS - MISC.		
Cevimeline Capsule	2	
THYROID		
Cytomel Tablet	3	(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)
Nature Throid	4	(M)
Synthroid Tablet	4	(QL)(M)
Tirosint Capsule	4	(QL)(M)
Unithroid Tablet	3	(QL)(M)
UNCATEGORIZED		
Kerendia Tablet	4	(PA)(QL)(M)
Reset-O Mis	3	(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 AGONIS		
Bethanechol Tablet	1	(M)
URINARY INCONTINENCE		
Dicyclomine	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Fesoterodine Tablet	2	(QL)(M)
Glycate Tablet	4	(M)
Glycopyrrol Tablet	1	(M)
Hyoscyamine	1	(M)
Nulev Tablet	1	(M)
Oscimin	1	(M)
Oxybutynin	1	(QL)(M)
Robinul Tablet	4	(M)
Robinul Fort Tablet	4	(M)
Solifenacin Tablet	1	(QL)(M)
Tolterodine	2	(QL)(M)
Trospium Chl Capsule	2	(QL)(M)
Trospium Cl Tablet	1	(QL)(M)
VACCINES		
Adacel Injectable	3	
Afluria Quad Injectable	3	(M)
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)
Fluzone Hd Injectable	3	(M)
Fluzone Quad Injectable	3	(M)
Gardasil 9 Injectable	3	(AGE)
Hepelisav-B Injectable	3	(QL)
M-M-R li 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 Bival Injectable	3	(QL)
Pfizer Vacc Injectable	3	(QL)(AGE)
Pneumovax 23 Injectable	3	(AGE)
Prevnar 20 Injectable	3	(AGE)
Recombiva Hb Injectable	3	
Shingrix Injectable	3	(QL)(AGE)
Spikevax Injectable	3	(QL)
Twinrix Injectable	3	
Varivax Injectable	3	
VAGINAL ANTI-INFECTIVES		
Nuessa Gel	4	(QL)

Drug Name	Drug Tier	Requirements & Limits
Terconazole Cream	1	
Vandazole Gel	4	
VITAMINS/ELECTROLYTES		
Cyanocobalam	1	(M)
Dodex Injectable	1	(M)
Fe-Vite Iron 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)
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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