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: 10/1/2024

Drug Name	Drug Tier	Requirements & Limits
ACNE		
Adapalene Gel	1	(ST)
Amnesteem Capsule	2	
Azelaic Acid Gel	1	
Claravis Capsule	2	
Clindam/Benz Gel	2	(ST)
Clindamy/Ben Gel	2	(ST)
Ery/Benzoyl Gel	1	
Erythromycin	1	(AGE)
Isotretinoin Capsule	2	
Ivermectin	2	(ST)(QL)
Metronidazol	1	(QL)
Sod Sul/Sulf	1	
Sod Sulf/Sul Liq	1	
Sodium Sulf Suspension	2	
Sulfacetamid Lot	2	
Sulfacleanse Suspension	2	
Tretinoin Cream	2	(AGE)
Zenatane Capsule	2	
ANAPHYLAXIS THERAPY AGENTS		
Auvi-Q Injectable	2	(QL)
Epinephrine Injectable	1	(QL)
ANTI-ADDICTION/SUBSTANCE ABUSE TREATMENT		
Acampro Cal Tablet	1	
Disulfiram Tablet	1	
ANTIARRHYTHMICS		
Mexiletine Capsule	1	(M)
ANTIBIOTICS		
Amox-Pot Cla Tablet	1	
Amox/K Clav	1	
Amoxicillin	1	
Ampicillin Capsule	1	
Azithromycin	1	(QL)
Cefadroxil Capsule	1	
Cefdinir	1	
Cefpodoxime Tablet	1	
Cefuroxime Tablet	1	
Cephalexin	1	
Ciprofloxacn	1	
Clarithromyc Tablet	1	
Clindamycin	1	
Dicloxacill Capsule	1	
Doxycycl Hyc	1	(QL)
Doxycycline Mono Capsule 100Mg	1	
Erythrom Eth Suspension	2	(AGE)
Levofloxacin Tablet	1	
Linezolid Tablet	1	(QL)
Methenam Hip Tablet	1	
Minocycline Capsule	1	
Moxifloxacin	1	
Neomycin Tablet	1	
Nitrofur Mac Capsule	1	
Nitrofurantn	1	(AGE)
Penicilln Vk	1	
Smz-Tmp Ds	1	
Tetracycline Capsule	1	
Tinidazole Tablet	1	
Tobramycin	1	(PA)(QL)(M)
Trimethoprim Tablet	1	
Vancomycin Capsule	2	(QL)
ANTIFIBRINOLYTICS		
Tranex Acid Tablet	1	(QL)
ANTIFUNGALS		
Ciclodan Solution	1	(QL)
Ciclopirox	1	(QL)
Clotrim/Beta	1	
Clotrimazole	1	
Econazole Cream	1	
Fluconazole	1	(QL)
Itraconazole Capsule	1	(QL)
Ketoconazole	1	
Klayesta Powder	1	(QL)
Nyamyc Powder	1	(QL)
Nystat/Triam	1	
Nystatin	1	(QL)
Nystop Powder	1	(QL)
Terbinafine Tablet	1	(QL)
ANTIMALARIALS		
Atovaq/Progu Tablet	1	
Hydroxychlor	1	(M)
ANTIMYASTHENIC AGENTS		
Pyridostigm Tablet	1	
Pyridostigmi Tablet	2	(QL)
ANTIMYCOBACTERIAL AGENTS		
Ethambutol Tablet	1	
Isoniazid Tablet	1	
Rifampin Capsule	1	
ANTIPROTOZOAL AGENTS		
Atovaquone Suspension	2	

Drug Name	Drug Tier	Requirements & Limits
ANTISEBORRHEIC PRODUCTS		
Sodium Sulfa Liq	1	
ANTITHYROID AGENTS		
Methimazole Tablet	1	(M)
Propylthiour Tablet	1	(M)
ANTIVIRALS		
Acyclovir	1	
Biktarvy Tablet	4	(QL)(M)
Darunavir Tablet	1	(QL)(M)
Descovy Tablet	4	(PA)(QL)(M)
Dovato Tablet	4	(QL)(M)
Emtr/Ten Df Tablet	1	(QL)(M)
Emtr/Tenofov Tablet	1	(QL)(M)
Famciclovir Tablet	1	
Genvoya Tablet	4	(QL)(M)
Isentress Tablet	4	(QL)(M)
Isentress Hd Tablet	4	(QL)(M)
Juluca Tablet	4	(QL)(M)
Odefsey Tablet	4	(QL)(M)
Paxlovid Tablet	4	(QL)(M)
Prezcobix Tablet	4	(QL)(M)
Prezista Tablet	4	(QL)(M)
Ritonavir Tablet	1	(QL)(M)
Symtuza Tablet	4	(QL)(M)
Tenofovir Tablet	1	(QL)(M)
Tivicay Tablet	4	(QL)(M)
Triumeq Tablet	4	(QL)(M)
Valacyclovir Tablet	1	(QL)
Valganciclov Tablet	4	(QL)(M)
Viread Tablet	4	(QL)(M)
ANXIETY & SLEEP		
Alprazolam Tablet	1	(QL)
Buspirone Tablet	1	(M)
Chlordiazep Capsule	1	
Diazepam	1	
Eszopiclone Tablet	1	(QL)
Hydroxyzine	1	
Lorazepam Tablet	1	
Ramelteon Tablet	1	(QL)(M)
Temazepam Capsule	1	(QL)
Triazolam Tablet	1	(QL)
Zaleplon Capsule	1	(QL)
Zolpidem Tablet	1	(QL)
Zolpidem Er Tablet	1	(QL)
ASTHMA AND COPD*		
Albuterol	1	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Anoro Ellipt Inhalation	2	(QL)(M)
Arformoterol Neb	2	(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	(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)
Fluticasone	2	(QL)(M)
Ipratropium	1	(M)
Kourzeq Pst	1	
Levalbuterol	1	(QL)(M)
Montelukast	1	(QL)(M)
Oralone Dent Pst	1	
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)
Triamcinolon	1	
Ventolin Hfa Inhalation	2	(QL)(M)
Wixela Inhub Inhalation	1	(QL)(M)
Zafirlukast Tablet	1	(QL)(M)
BLOOD THINNERS		
Brilinta Tablet	2	(QL)(M)
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)

Drug Name	Drug Tier	Requirements & Limits
CARDIOVASCULAR*		
Amilor/Hctz Tablet	1	(M)
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)
Candesa/Hctz Tablet	1	(QL)(M)
Candesartan Tablet	1	(QL)(M)
Captopril Tablet	1	(M)
Cartia Xt Capsule	1	(M)
Carvedilol	1	(QL)(M)
Chlorthalid Tablet	1	(M)
Clonidine	1	(QL)(M)
Digoxin Tablet	1	(M)
Dilt-Xr Capsule	1	(M)
Diltiazem	1	(M)
Diltiazem Er Tablet	1	(M)
Dofetilide Capsule	1	(M)
Doxazosin Tablet	1	(QL)(M)
Enalapril	2	(QL)(AGE)(M)
Entresto Tablet	2	(QL)(M)
Eplerenone Tablet	1	(M)
Felodipine Tablet	1	(M)
Flecainide Tablet	1	(M)
Furosemide	1	(M)
Guanfacine Tablet	1	(M)
Hydralazine Tablet	1	(M)
Hydrochlorothiazide	1	(M)
Indapamide Tablet	1	(M)
Irbesar/Hctz Tablet	1	(QL)(M)
Irbesartan Tablet	1	(QL)(M)
Isosorb Din Tablet	1	(M)
Isosorb Mono Tablet	1	(M)
Labetalol Tablet	1	(M)
Lisinop/Hctz Tablet	1	(M)
Lisinopril Tablet	1	(M)
Losartan Pot Tablet	1	(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)
Midodrine Tablet	1	
Minoxidil Tablet	1	(M)
Multaq Tablet	2	(M)
Nadolol Tablet	1	(M)
Nebivolol Tablet	1	(QL)(M)
Nifedipine	1	(M)
Nitro-Bid Oin	3	(M)
Nitroglycer Dis	1	(M)
Nitroglyceri Sub	1	(M)
Nitroglycern 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)
Ramipril Capsule	1	(M)
Ranolazine Tablet	1	(ST)(QL)(M)
Sotalol Tablet	1	(M)
Sotalol Af Tablet	1	(M)
Sotalol Hcl Tablet	1	(M)
Spirono/Hctz Tablet	1	(M)
Spironolact Tablet	1	(M)
Taztia Xt Capsule	1	(M)
Telmis/Amlod Tablet	1	(QL)(M)
Telmisa/Hctz Tablet	1	(QL)(M)
Telmisartan Tablet	1	(QL)(M)
Terazosin Capsule	1	(QL)(M)
Tiadylt Capsule	1	(M)
Torsemide Tablet	1	(M)
Trandolapril 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)

Drug Name	Drug Tier	Requirements & Limits
Cholestyram Powder	1	(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)
Fluvastatin Capsule	1	(ST)(QL)(M)(AGE)
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)
Prevalite Powder	2	(QL)(M)
Repatha Injectable	2	(PA)(QL)(M)
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	(M)
Generic Contraceptives	1	(QL)(M)
Medroxyprogesterone	1	(QL)(M)
Phexxi Gel	3	(QL)(M)
COUGH/COLD/ALLERGY PRODUCTS		
Benzonatate	1	(ST)(QL)
Bpm-Pse-Dm Syrup	1	(QL)
Brom/Pse/Dm Syrup	1	(QL)
Bromfed Dm Solution	1	(QL)
Cetirizine Solution	1	(QL)
Codeine/Gg Solution	1	
Cyproheptad	1	(QL)
G Tussin Ac Liq	1	
Gg/Codeine Solution	1	
Guaifenesin Syrup	1	
Hydrocod/Hom	1	
Hydromet Syrup	1	
Levocetirizi Tablet	1	
Maxi-Tuss Ac Solution	1	
Prometh/Cod Solution	1	
Promethazine	1	
CYCLOPLEGIC MYDRIATICS		
Atropine Sul	1	

Drug Name	Drug Tier	Requirements & Limits
CYSTIC FIBROSIS AGENTS		
Pulmozyme Solution	4	(QL)(M)
Trikafta	4	(PA)(QL)(AGE)(M)
DENTAL PRODUCTS		
Chlorhex Glu Solution	1	
Fluoride	1	(QL)(AGE)(M)
Periogard Solution	1	
DERMATOLOGICALS (SKIN) MISC. DERMATOLOGICALS		
Acitretin Capsule	3	(QL)
Calcipotrien Cream	2	
Diclofenac 1%	2	(PA)(M)
Fluorouracil Cream	1	(PA)(QL)
Gentamicin	1	
Mupirocin Oin	1	
Tolak Cream	3	(QL)
DERMATOLOGICALS (SKIN) STEROIDS		
Ala-Cort Cream	1	
Alclometason Cream	1	
Beta Diprop	1	
Betameth Dip	1	
Betameth Val Cream	1	
Clobetasol	1	(QL)
Clobetasol E Cream	1	
Desonide	1	
Fluocin Acet	1	
Fluocinonide	1	(ST)(QL)
Hydrocort	1	(M)
Mometasone	1	
Triderm Cream	2	
DIABETES - INSULIN*		
Fiasp Injectable	2	(M)
Fiasp Flex Injectable	2	(M)
Humulin R U-500	2	(PA)(QL)(M)
Ins Asp Prot Injectable	1	(M)
Insulin Aspa Injectable	1	(M)
Insulin Glar	2	(M)
Lantus Injectable	2	(M)
Lantus Solos Injectable	2	(M)
Novolin Injectable	1	(M)
Novolin N Injectable	1	(M)
Novolog Injectable	2	(M)
Novolog Mix Injectable	2	(M)
Toujeo Max Injectable	2	(M)
Toujeo Solo Injectable	2	(M)
DIABETES - NON-INSULIN*		
Acarbose Tablet	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Alogliptin Tablet	1	(QL)(M)
Alogliptin/Metformin	1	(QL)(M)
Baqsimi One Powder	2	
Baqsimi Two Powder	2	
Bydureon Bc Injectable	2	(PA)(QL)(M)
Farxiga Tablet	2	(QL)(M)
Glimepiride Tablet	1	(M)
Glip/Metform Tablet	1	(M)
Glipizide	1	(M)
Glucagon Kit	1	
Glyb/Metform Tablet	1	(M)
Glyburide Tablet	1	(M)
Metformin Tablet	1	(M)
Mounjaro Injectable	2	(PA)(QL)(M)
Pioglita/Met Tablet	1	(QL)(M)
Pioglitazone Tablet	1	(QL)(M)
Repaglinide Tablet	1	(M)
Soliqua Injectable	2	(ST)(QL)(M)
Steglatro Tablet	3	(ST)(QL)(M)
Xigduo Xr Tablet	2	(QL)(M)
DIABETES - TESTING AND SUPPLIES		
1/2Ml Tb Syr Mis	3	(M)
10Ml Ll Syrg Mis	3	(M)
10Ml Syringe Mis	1	(M)
12Ml Syringe Mis	3	(M)
140Ml Syring Mis	3	(M)
1Ml Allr Syr Mis	3	(M)
1Ml Slip Tip Mis	3	(M)
1Ml Syringe Mis	1	(M)
1Ml Tb Syrng Mis	3	(M)
20Ml Syringe Mis	1	(M)
3Ml Syringe Mis	3	(M)
30Ml Syringe Mis	1	(M)
35Ml Syringe Mis	1	(M)
3Ml Ll Syrng Mis	3	(M)
3Ml Luer Loc Mis	3	(M)
3Ml Syringe Mis	1	(M)
5Ml Syringe Mis	1	(M)
60Ml Syringe Mis	1	(M)
6Ml Syringe Mis	3	(M)
Accu-Chek Tes	3	(PA)(QL)(M)
Accutrend Tes	3	(PA)(QL)(M)
Admix Needle Mis	3	(M)
Advance Tes	3	(PA)(QL)(M)
Advocate Tes	3	(PA)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
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 Ii 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 20Ml Syrg Mis	3	(M)
Bd 50Ml Syrg Mis	3	(M)
Bd 5Ml Syrg Mis	3	(M)
Bd Eclipse Mis	3	(M)
Bd Hypo Need Mis	3	(M)
Bd Integra Mis	3	(M)
Bd Luer-Lok Mis	3	(M)
Bd Needle Mis	3	(M)
Bd Needles Mis	3	(M)
Bd Plastipak Mis	3	(M)
Bd Precision Mis	3	(M)
Bd Safety Mis	3	(M)
Bd Syr 50Ml Mis	3	(M)
Bd Tb 1Ml Mis	3	(M)
Biotel Care Tes	3	(PA)(QL)(M)
Blood Glucos Tes	1	(PA)(QL)(M)
Blulink Tes	3	(PA)(QL)(M)
Bulb Irr Syr Mis	3	(M)
Carepoint Sa Mis	3	(M)
Carepoint Sy Mis	3	(M)
Carepoint Tu Mis	3	(M)
Caresens N Tes	3	(PA)(QL)(M)
Caretouch Mis	3	(PA)(QL)(M)
Catheter/Tip Mis	3	(M)
Clever Chek Tes	3	(PA)(QL)(M)
Clever Choic Tes	3	(PA)(QL)(M)
Clevr Choice Tes	3	(PA)(QL)(M)
Confirm/Micr Tes	3	(PA)(QL)(M)
Contour Tes	3	(PA)(QL)(M)
Contour Plus Tes	3	(PA)(QL)(M)
Cool Blood Tes	3	(PA)(QL)(M)
Cvs Advanced Tes	3	(PA)(QL)(M)
Cvs Glucose Tes	3	(PA)(QL)(M)
Cvs True Met Tes	3	(PA)(QL)(M)
D-Care Blood Tes	3	(PA)(QL)(M)
Deflux Needl Mis	3	(M)

Drug Name	Drug Tier	Requirements & Limits
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)
Dropsafe Mis	3	(M)
Duo-Care Tes	3	(PA)(QL)(M)
Easy Glide Mis	3	(M)
Easy Max Glc Tes	3	(PA)(QL)(M)
Easy Plus Ii Tes	3	(PA)(QL)(M)
Easy Step Tes	3	(PA)(QL)(M)
Easy Talk Tes	3	(PA)(QL)(M)
Easy Touch	3	(PA)(QL)(M)
Easy Trak Tes	3	(PA)(QL)(M)
Easy Trak Ii Tes	3	(PA)(QL)(M)
Easygluco Tes	3	(PA)(QL)(M)
Easymax Tes	3	(PA)(QL)(M)
Easymax 15 Tes	3	(PA)(QL)(M)
Easypoint Mis	3	(M)
Easypro Tes	3	(PA)(QL)(M)
Easypro Plus Tes	3	(PA)(QL)(M)
Eclipse Ndle Mis	3	(M)
Element Tes	3	(PA)(QL)(M)
Elemnt Compa Tes	3	(PA)(QL)(M)
Embrace Tes	3	(PA)(QL)(M)
Embrace Evo Tes	3	(PA)(QL)(M)
Embrace Pro Tes	3	(PA)(QL)(M)
Embrace Talk Tes	3	(PA)(QL)(M)
Embrace Wave Tes	3	(PA)(QL)(M)
Enlite Gluco Mis	3	(PA)(QL)(M)
Evolution Tes	3	(PA)(QL)(M)
Fifty50 Gluc Tes	3	(PA)(QL)(M)
Fill Needle Mis	3	(M)
Filter Needl 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)
Free Libre3 Kit	2	(ST)(QL)(M)
Freesty Libr	2	(ST)(QL)(M)(AGE)
Freestyle	2	(ST)(QL)(AGE)(M)
Ge100 Blood Tes	3	(PA)(QL)(M)
Genultimate 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)(AGE)(M)
Guardian 4 Mis	3	(PA)(QL)(M)(AGE)
Guardian Con Mis	3	(PA)(QL)(M)(AGE)
Guardian Rt Mis	3	(PA)(QL)(AGE)(M)
Hw Embrace Tes	3	(PA)(QL)(M)
Hypo Needle Mis	1	(M)
Iglucose Tes	3	(PA)(QL)(M)
Ihealth Bloo Tes	3	(PA)(QL)(M)
In Touch Tes	3	(PA)(QL)(M)
Infinity Tes	3	(PA)(QL)(M)
Insulin Syringes	1	(M)
Kroger Blood Tes	3	(PA)(QL)(M)
Lancets	1	(M)
Liberty Tes	3	(PA)(QL)(M)
Liberty Next Tes	3	(PA)(QL)(M)
Luer-Lock Mis	3	(M)
Luer-Lok Mis	3	(M)
Meijer Tes	3	(PA)(QL)(M)
Meijer Blood Tes	3	(PA)(QL)(M)
Microdot Tes	3	(PA)(QL)(M)
Minilink Rt Mis	3	(PA)(QL)(M)(AGE)

Drug Name	Drug Tier	Requirements & Limits
Minimed 630G Mis	3	(PA)(QL)(M)(AGE)
Mm Blulink Tes	3	(PA)(QL)(M)
Monoject S/P Mis	3	(M)
Myglucohealt Tes	3	(PA)(QL)(M)
Needles Mis	3	(M)
Neutek 2Tek Tes	3	(PA)(QL)(M)
No Coding Tes	3	(PA)(QL)(M)
Norm-Ject Mis	3	(M)
Nova Max Tes	3	(PA)(QL)(M)
Omnipod 5 Kit	2	(PA)(QL)(M)
Omnipod 5 De Mis	2	(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)
Perfect Poin Mis	3	(M)
Pharm Syrng Mis	3	(M)
Pharm Tray Mis	3	(M)
Pip Blood Tes	3	(PA)(QL)(M)
Piston Irrig Mis	3	(M)
Pocketchem Tes	3	(PA)(QL)(M)
Poly Hub Mis	3	(M)
Precision Tes	2	(QL)(M)
Precisn Xtra 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)
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)
Slip Tip 1Ml Mis	3	(M)
Slip Tip 3Ml Mis	3	(M)
Smart Sense Tes	3	(PA)(QL)(M)
Smartest Tes	3	(PA)(QL)(M)
Solus V2 Tes	3	(PA)(QL)(M)
Supreme Tes	3	(PA)(QL)(M)
Syrg/Ndl 3Ml Mis	3	(M)
Syringe 5Ml Mis	3	(M)
Syringe Luer Mis	3	(M)
Tb Syringe Mis	3	(M)
Tb Syrng 1Ml Mis	3	(M)
Toomey Syrin Mis	1	(M)
Tru Metrix Tes	3	(PA)(QL)(M)
True Focus Mis	3	(PA)(QL)(M)
True Metrix Tes	3	(PA)(QL)(M)
Truetest Tes	3	(PA)(QL)(M)
Truetrack Tes	3	(PA)(QL)(M)
Unistrip1 Tes	3	(PA)(QL)(M)
Vent Needle Mis	3	(M)
Verasens Tes	3	(PA)(QL)(M)
Vivaguard Tes	3	(PA)(QL)(M)
ECZEMA AGENTS - TOPICAL		
Eucrisa Oin	2	(QL)
EMOLLIENTS		
Ammonium Lac Cream	1	
ENZYMES - TOPICAL		
Santyl Oin	3	
GALLSTONE SOLUBILIZING AGENTS		
Ursodiol	2	(M)
GASTROINTESTINAL (DIGESTIVE) MISC. GASTROINTESTINAL		
Alosetron Tablet	4	(PA)(QL)(M)
Diphen/Atrop Tablet	1	
Lubiprostone Capsule	2	(QL)(M)(AGE)
Metoclopram	1	
Xifaxan Tablet	3	(PA)
GASTROINTESTINAL (DIGESTIVE) NAUSEA & VOMITING		
Antivert Tablet	3	
Meclizine Tablet	1	
Ondansetron	1	(QL)
Phenadoz Sup	1	
Promethegan Sup	1	
GASTROINTESTINAL (DIGESTIVE) ULCER TREATMENTS		
Cimetidine Tablet	1	(M)
Famotidine	1	(AGE)(M)

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

Drug Name	Drug Tier	Requirements & Limits
Estratest Fs Tablet	1	(QL)(M)
Estrog/Mtest Tablet	1	(QL)(M)
Fyavolv Tablet	1	(M)
Gallifrey Tablet	1	(M)
Imvexxy Main Sup	3	(ST)(QL)(M)
Imvexxy Strt Sup	3	(ST)(QL)(M)
Jinteli Tablet	1	(M)
Lyllana Dis	1	(QL)(M)
Mimvey Tablet	1	(QL)(M)
Noreth/Ethin Tablet	1	(M)
Norethin Ace Tablet	1	(M)
Premarin Tablet	2	(QL)(M)
Premarin Vag Cream	3	(ST)(QL)(M)
Premphase Tablet	3	(ST)(QL)(M)
Prempro Tablet	3	(ST)(QL)(M)
Progesterone	1	(QL)(M)
Yuvafem Tablet	2	(QL)(M)
HORMONE REPLACEMENT THERAPY MALE		
Depo-Testost Injectable	1	(QL)(M)
Testost Cyp Injectable	1	(QL)(M)
Testost Enan Injectable	1	(QL)(M)
Testosterone Gel	2	(QL)(M)
IMMUNOLOGICAL AGENTS - IMMUNE SYSTEM STIMULATION OR SUPPRESSION		
Actemra Injectable	4	(PA)(QL)(M)
Adbry Injectable	4	(PA)(QL)(M)
Amjevita Injectable	4	(PA)(QL)(M)
Cibinqo Tablet	4	(PA)(QL)(M)
Cosentyx	4	(PA)(QL)(M)
Hadlima Injectable	4	(PA)(QL)(M)
Hadlima Push 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	4	(PA)(QL)(M)
IMMUNOMODULATING AGENTS - TOPICAL		
Imiquimod Cream	1	
IMMUNOSUPPRESSANTS		
Azasan Tablet	1	(M)
Azathioprine Tablet	1	(M)
Cyclosporine	1	(M)
Envarsus Xr Tablet	3	(ST)(M)
Everolimus Tablet	4	(PA)(QL)(M)
Gengraf Capsule	1	(M)

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

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

Drug Name	Drug Tier	Requirements & Limits
Frovatriptan Tablet	1	(ST)(QL)
Naratriptan Tablet	1	(QL)(M)
Nurtec Tablet	2	(PA)(QL)
Reyvow Tablet	3	(PA)(QL)
Rizatriptan Tablet	1	(M)
Sumatriptan	2	(ST)(QL)(M)
Ubrelvy Tablet	2	(PA)(QL)
Zolmitriptan Tablet	1	(QL)
Zomig Tablet	1	(QL)
MINERALOCORTICOIDS		
Fludrocort Tablet	1	(M)
MISC. RESPIRATORY INHALANTS		
Hypersal Neb	3	
Nebusal Neb	1	
Pulmosal Neb	1	
Sod Chloride	1	(PA)
Sodium Chlor Neb	1	
MISC. TOPICAL		
Drysol Solution	3	
MISCELLANEOUS VAGINAL PRODUCTS		
Intrarosa Sup	3	(QL)(M)
MOVEMENT DISORDER		
Tetrabenazin Tablet	4	(PA)(QL)(M)
MUCOLYTICS		
Acetylcyst Solution	1	
MULTIPLE SCLEROSIS AGENTS		
Dalfampridin Tablet	1	(QL)(M)
Dimethyl Fum Capsule	1	(QL)(M)
Glatiramer Injectable	4	(QL)(M)
Glatopa Injectable	4	(QL)(M)
Teriflunomid Tablet	1	(QL)(M)
Vumerity Capsule	4	(PA)(QL)(M)
MUSCLE RELAXANTS		
Baclofen Tablet	1	(M)
Carisoprodol Tablet	1	(QL)
Chlorzoxazon Tablet	1	
Cyclobenzaprine	1	
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)

Drug Name	Drug Tier	Requirements & Limits
Dymista Spr	2	(QL)
Flunisolide Spr	1	(QL)
Olopatadine Spr	1	(ST)
Xhance Mis	2	(PA)(QL)
ONCOLOGY/HEMATOLOGY		
Abiraterone Tablet	3	(QL)(M)
Anastrozole Tablet	1	(QL)(M)
Bicalutamide Tablet	1	(QL)
Capecitabine Tablet	1	
Dasatinib Tablet	1	(PA)(QL)(M)
Exemestane Tablet	1	(QL)(M)
Hydroxyurea Capsule	1	
Ibrance	4	(PA)(QL)(M)
Iclusig Tablet	4	(PA)(QL)(M)
Imatinib	1	(QL)
Imbruvica	4	(PA)(QL)(M)
Jakafi Tablet	4	(PA)(QL)(M)
Kisqali Tablet	4	(PA)(QL)(M)
Lenalidomide Capsule	4	(PA)(QL)(M)
Letrozole Tablet	1	(QL)(M)
Leucovor Ca Tablet	1	(QL)
Lynparza Tablet	4	(PA)(QL)(M)
Megestrol Ac	1	
Mercaptopur Tablet	1	
Methotrexate	1	(M)
Revlimid Capsule	4	(PA)(QL)(M)
Sprycel Tablet	4	(PA)(QL)(M)
Tagrisso Tablet	4	(PA)(QL)(M)
Tamoxifen Tablet	1	(QL)(M)
Tasigna Capsule	4	(PA)(QL)(M)
Temozolomide Capsule	3	(QL)
Torpenz Tablet	1	(PA)(QL)(M)
Venclexta Tablet	4	(PA)(QL)(M)
Verzenio Tablet	4	(PA)(QL)(M)
OPHTHALMIC STEROIDS		
Dexameth Pho Solution	1	
Difluprednat Emu	2	(QL)
Fluoromethol Suspension	1	
Lotemax Sm Gel	3	(QL)
Loteprednol	2	(QL)
Neo/Poly/Dex	1	
Prednisolone	1	(QL)
Tobra/Dexame Suspension	1	
OPHTHALMICS (EYE) ANTI-INFECTIVES		
Bacit/Polymy Oin	1	

Drug Name	Drug Tier	Requirements & Limits
Ofloxacin Dro	1	
Polycin Oin	1	
Polymyxin B/ Solution	1	
Sulfacet Sod Solution	1	
Trifluridine Solution	2	
OPHTHALMICS (EYE) MISC. OPHTHALMICS		
Brimonidine 0.15%	1	(M)
Bromfenac	2	
Combigan Solution	1	(QL)(M)
Diclofenac 3%	1	(M)
Dorzol/Timol Solution	1	(QL)(M)
Dorzolamide Solution	1	(M)
Epinastine Dro	1	
Ketorolac	1	(QL)
Klarity-C Emu	4	(PA)(QL)(M)
Simbrinza Suspension	2	(QL)(M)
Timolol Mal Solution	1	(M)
Timolol Male Solution	2	(M)
OPHTHALMICS (EYE) PROSTGLANDINS		
Bimatoprost Solution	2	(QL)(M)
Latanoprost Solution	1	(QL)(M)
Lumigan Solution	2	(QL)(M)
Tafluprost Solution	1	(ST)(QL)(M)
Travoprost Dro	2	(ST)(QL)(M)
OPIOID ANTAGONISTS		
Naltrexone Tablet	1	
OPIOID PARTIAL AGONISTS		
Belbuca Mis	2	(QL)
Brixadi Solution	4	(QL)(M)
Bupren/Nalox	1	(QL)
Buprenorphin	2	(QL)
Butorphanol Solution	1	(QL)
Sublocade Injectable	4	(QL)(M)
OSTEOPOROSIS*		
Alendronate Tablet	1	(QL)(M)
Calcitonin Spr	1	(M)
Ibandronate Tablet	1	(QL)(M)
Prolia Injectable	4	(M)
Risedronate Tablet	1	(ST)(QL)(M)
Tymlos Injectable	4	(PA)(M)
OTIC PREPARATIONS (EAR)		
Cipro/Dexa Suspension	2	
Neo/Poly/Hc	1	
OTIC STEROIDS		
Flac Oil	1	
Hc/Acet Acid Solution	1	
PAIN MEDICATIONS - NARCOTICS		
Apap/Codeine Tablet	1	(QL)
Ascomp/Cod Capsule	2	(QL)
Bac Tablet	1	(QL)
But/Apap/Caf	1	(QL)
But/Asa/Caf/ Capsule	2	(QL)
But/Asa/Caff Capsule	1	(QL)
Butal/Apap Tablet	1	(QL)
Butalb/Aceta Tablet	1	(QL)
Endocet Tablet	1	(QL)
Fentanyl Dis	3	(PA)(QL)
Hydro/Aceta Solution	1	
Hydroco/Apap	1	(QL)
Hydromorphon Tablet	1	(QL)
Lorcet Tablet	1	(QL)
Lorcet Hd Tablet	1	(QL)
Lorcet Plus Tablet	1	(QL)
Meperidine Solution	1	(QL)
Methadone 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	3	(ST)(QL)
Tramadl/Apap Tablet	1	(QL)
Tramadol	1	(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	2	(QL)(M)
Pancreaze Capsule	2	(QL)(M)
Zenpep Capsule	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
PARKINSON'S		
Amantadine	1	(QL)(M)
Benztropine 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)
PHENOTHIAZINES		
Chlorpromaz Tablet	1	(M)
Perphenazine Tablet	1	(M)
Prochlorper Tablet	1	(M)
PHOSPHATE		
Phospha 250 Tablet	1	
Phospho-Trin Tablet	1	
Phosphorous Tablet	1	
Wes-Phos 250 Tablet	1	
PHOSPHATE BINDING AGENTS		
Calc Acetate Capsule	1	(M)
Lanthanum Chw	4	(PA)(QL)
Sevelam Carb Tablet	1	(M)
Sevelam Hcl Tablet	4	(ST)(M)
POSTERIOR PITUITARY HORMONES		
Desmopressin	1	(QL)(M)
POTASSIUM		
Potassium Chloride	1	(M)
POTASSIUM REMOVING RESINS		
Lokelma Packet	2	(PA)(QL)(M)
PRENATAL VITAMINS		
Co-Natal Fa Tablet	3	
Complete Nat Packet	1	
Concept Ob Capsule	3	
Folivane-Ob Capsule	3	
M-Natal Plus Tablet	3	
Natalvit Tablet	3	
Neonatal Tablet	3	
Neonatal Pls Tablet	3	
Niva-Plus Tablet	3	
One Vite Tablet	3	
Prenatal Tablet	1	
Provida Ob Capsule	3	
Tricare Tablet	3	
Trinatal Rx Tablet	1	
Trinate Tablet	3	
Vinate One Tablet	3	
Vitafol-Ob Tablet	3	
Vitathely Tablet	3	
Wesnatal Dha Packet	3	
Westab Plus Tablet	3	
PROLACTIN INHIBITORS		
Cabergoline Tablet	1	(QL)(M)
PROSTATE		
Alfuzosin Tablet	1	(QL)(M)
Dutast/Tamsu Capsule	1	(QL)(M)
Dutasteride Capsule	1	(QL)(M)
Finasteride	1	(QL)(M)
Silodosin Capsule	1	(ST)(QL)(M)
Tadalafil Tablet	2	(PA)(ST)(QL)(M)
Tamsulosin Capsule	1	(QL)(M)
PULMONARY ARTERIAL HYPERTENSION		
Alyq Tablet	2	(PA)(QL)(M)
Ambrisentan Tablet	4	(PA)(QL)(M)
Sildenafil Tablet	1	(PA)(QL)
PYRIMIDINE SYNTHESIS INHIBITORS		
Leflunomide Tablet	1	(M)
RECTAL COMBINATIONS		
Hc Pramoxine Cream	1	
RECTAL STEROIDS		
Anucort-Hc Sup	1	
Anusol-Hc Sup	1	
Hemmorex-Hc Sup	1	
Hydrocort Ac Sup	1	
Hydrocortiso Cream	1	
Procto-Med Cream	1	
Proctocort Cream	1	
Proctosol Hc Cream	1	
Proctozone Cream	1	
RESPIRATORY THERAPY SUPPLIES		
Aerosol Spacer	1	(QL)
SALICYLATES		
Aspirin	1	(QL)(M)(AGE)
SCABICIDES & PEDICULICIDES		
Permethrin Cream	1	
SEIZURE DISORDER		
Carbamazepin	1	(QL)(M)
Clobazam	1	(QL)(M)
Clonazep Odt Tablet	1	(QL)(M)
Clonazepam Tablet	1	(QL)(M)
Dilantin Capsule	3	(ST)(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Divalproex Er	1	(QL)(M)
Epitol Tablet	1	(QL)(M)
Ethosuximide	1	(QL)(M)
Gabapentin	1	(QL)(M)
Lacosamide	1	(QL)(M)
Lamotrigine	1	(ST)(QL)(M)
Levetiraceta	1	(QL)(M)
Mysoline Tablet	3	(ST)(QL)(M)
Nayzilam Spr	3	(QL)
Oxcarbazepin	1	(QL)(M)
Phenobarb Tablet	1	(M)
Phenytek Capsule	1	(QL)(M)
Phenytoin Ex Capsule	1	(QL)(M)
Pregabalin Capsule	1	(QL)(M)
Primidone Tablet	1	(QL)(M)
Roweepra Tablet	1	(QL)(M)
Subvenite Tablet	1	(QL)(M)
Tegretol-Xr Tablet	3	(ST)(QL)(M)
Topamax Spr Capsule	3	(ST)(QL)(M)
Topiramate	1	(QL)(M)
Valproic Acd Capsule	1	(QL)(M)
Xcopri	3	(QL)(M)
Zonisamide Capsule	1	(QL)(M)
SEX HORMONES AND MODULATORS OF THE GENITA SYSTEM		
Chor Gonadot Injectable	2	(PA)
Novarel Injectable	3	(PA)
Pregnyl Injectable	3	(PA)
SMOKING CESSATION		
Apo-Varenicl Tablet	3	(QL)(M)(AGE)
Cvs Nicotine	1	(QL)(M)(AGE)
Eq Nicotine	1	(QL)(M)(AGE)
Ft Nicotine	1	(QL)(M)(AGE)
Gnp Nicotine	1	(QL)(M)(AGE)
Habitrol Dis	1	(QL)(M)(AGE)
Hm Nicotine	1	(QL)(M)(AGE)
Kls Quit2	1	(QL)(M)(AGE)
Kls Quit4	1	(QL)(M)(AGE)
Nicotine	1	(QL)(M)(AGE)
Nicotine Pol	1	(QL)(M)(AGE)
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)
Tgt Nicotine	1	(QL)(M)(AGE)
Thrive Gum	1	(QL)(M)(AGE)
Varenicline Tablet	3	(QL)(M)(AGE)
SOMATOSTATIC AGENTS		
Octreotide Injectable	2	(QL)
STEROIDS		
Dexamethason	1	
Hydro Sod Su Injectable	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	1	(QL)
Lisdexamfeta Capsule	1	(QL)
Methylphenid	1	(QL)
Modafinil Tablet	1	(QL)
Vyvanse Capsule	2	(QL)
THROAT PRODUCTS - MISC.		
Cevimeline Capsule	2	
Pilocarpine Tablet	1	
THYROID		
Euthyrox Tablet	1	(M)
Levo-T Tablet	1	(M)
Levothyroxin	3	(ST)(QL)(M)
Levoxyl Tablet	1	(M)
Liothyronine Tablet	1	(M)
Nature Throid	3	(M)
Unithroid Tablet	1	(M)
UNCATEGORIZED		
Fasenra Pen Injectable	4	(PA)(QL)(M)
Ivabradine Tablet	2	(ST)(QL)(M)
Ofev Capsule	4	(PA)(QL)(M)
Tezspire	4	(PA)(QL)(M)
URINARY ANALGESICS		
Phenazopyridine	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
Bethanechol Tablet	1	(M)
URINARY INCONTINENCE		
Dicyclomine	1	(M)
Fesoterodine Tablet	2	(QL)(M)

Drug Name	Drug Tier	Requirements & Limits
Glycate Tablet	3	
Glycopyrrol Tablet	1	(M)
Hyoscyamine	1	(M)
Nulev Tablet	1	(M)
Oscimin	1	(M)
Oxybutynin	1	(QL)(M)
Solifenacin Tablet	1	(QL)(M)
Tolterodine	1	(QL)(M)
Trospium Chl Capsule	2	(QL)(M)
Trospium Cl Tablet	1	(QL)(M)
VACCINES		
Abrysvo Injectable	1	(QL)
Adacel Injectable	2	
Afluria Quad Injectable	2	(M)
Arexvy Injectable	1	(QL)(AGE)
Boostrix Injectable	2	
Comirnaty Injectable	2	(QL)
Engerix-B Injectable	2	
Fluad Quadri Injectable	2	(M)
Fluarix Quad Injectable	2	(M)
Flublok Quad Injectable	2	(M)
Fluclvx Quad Injectable	2	(M)
Flulaval Qua Injectable	2	(M)
Fluzone Hd Injectable	2	(M)
Fluzone Quad Injectable	2	(M)
Gardasil 9 Injectable	2	(AGE)
Havrix Injectable	2	
Heplisav-B Injectable	2	(QL)
M-M-R Ii Injectable	2	
Menquadfi Injectable	2	
Moderna Injectable	2	(QL)(AGE)
Novavax Injectable	2	(QL)
Novavax Vac Injectable	2	(QL)
Pfizer 5-11Y Injectable	2	(QL)
Pfizer 6M-4Y Injectable	2	(QL)
Prevnar 20 Injectable	1	
Recombiva Hb Injectable	2	
Shingrix Injectable	2	(QL)(AGE)
Spikevax Injectable	2	(QL)
Twinrix Injectable	2	
Vaqta Injectable	2	
VAGINAL ANTI-INFECTIVES		
Terconazole Cream	1	
VITAMINS/ELECTROLYTES		
Cyanocobalam	1	(M)

Drug Name	Drug Tier	Requirements & Limits
Dodex Injectable	1	(M)
Fe-Vite Iron Solution	1	(QL)(AGE)
Ferrous Sul Solution	1	(QL)(AGE)
Ferrous Sulf	1	(QL)(AGE)
Floriva Dro	3	(M)
Folate Tablet	1	(M)
Folic Acid Tablet	1	(M)
Ft Folic Aci Tablet	1	(M)
Iron Drops Dro	1	(QL)(AGE)
Iron Inf-Tod Dro	1	(QL)(AGE)
Iron Inf/Tod Dro	1	(QL)(AGE)
Iron Supplmt Dro	1	(QL)(AGE)
Iron Suppmnt Solution	1	(QL)(AGE)
Multi-Vit/Fl	1	(M)
Multivit/Fl Dro	3	(M)
Pedia Iron Dro	1	(QL)(AGE)
Pediatric Dro	1	(QL)(AGE)
Pot Citra Er Tablet	1	
Quflora Ped Dro	3	(M)
Sm Folic Acd Tablet	1	(M)
Sod Citrate Solution	1	
Tri-Vit/Fluo Dro	3	(M)
Vitamin D	1	(M)
Yl Folic Aci Tablet	1	(M)