Neighborhood Health Plan OF RHODE ISLAND™









Neighborhood Dual CONNECT (HMO D-SNP)

2026 Formulary (List of Covered Drugs or "Drug List")

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

Approved Formulary ID: 00026453 **Version** 17

This formulary was updated on 10/29/2026. For more recent information or other questions, please contact Neighborhood Dual CONNECT Member Services at 1-844-812-6896 (TTY users should call 711), 8:00 a.m. to 8:00 p.m., seven days a week from October 1 through March 31. From April 1 through September 30, you can call us 8:00 a.m. to 8:00 p.m. Monday through Friday (you may leave a voicemail on Saturdays, Sundays, and Federal holidays) or visit www.nhpri.org/DualCONNECT.

Last Updated: 10/29/2026
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Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this Drug List (formulary) refers to "we," "us", or "our," it means Neighborhood Health Plan of Rhode Island (Neighborhood). When it refers to "plan" or "our plan," it means Neighborhood Dual CONNECT.

This document includes a Drug List (formulary) for our plan which is current as of **10/29/2026**. For an updated Drug List (formulary), please contact us. Our contact information, along with the date we last updated the Drug List (formulary), appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2026, and from time to time during the year.

What is the Neighborhood Dual CONNECT formulary?

In this document, we use the terms Drug List and formulary to mean the same thing. A formulary is a list of covered drugs selected by Neighborhood Dual CONNECT in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Neighborhood Dual CONNECT will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a Neighborhood Dual CONNECT network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the formulary change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the formulary during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes. Updates to the formulary are posted monthly to our website here: www.nhpri.org/DualCONNECT.

Changes that can affect you this year*:* In the below cases, you will be affected by coverage changes during the year:

- **Immediate substitutions of certain new versions of brand name drugs and original biological products.** We may immediately remove a drug from our formulary if we are replacing it with a certain new version of that drug that will appear with the same or fewer restrictions. When we add a new version of a drug to our formulary, we may decide to keep the brand name drug or original biological product on our formulary but add new restrictions.

  We can make these immediate changes only if we are adding a new generic version of a brand name drug, or adding certain new biosimilar versions of an original biological product, that was already on the formulary (for example, adding an interchangeable biosimilar that can be substituted for an original biological product by a pharmacy without a new prescription).

If you are currently taking the brand name drug or original biological product, we may not tell you in advance before we make an immediate change, but we will later provide you with information about the specific change(s) we have made.

If we make such a change, you or your prescriber can ask us to make an exception and continue to cover for you the drug that is being changed. For more information, see the section below titled “How do I request an exception to the Neighborhood Dual CONNECT’s formulary?”

Some of these drug types may be new to you. For more information, see the section below titled “What are original biological products and how are they related to biosimilars?”

- **Drugs removed from the market.** If a drug is withdrawn from sale by the manufacturer or the Food and Drug Administration (FDA) determines to be withdrawn for safety or effectiveness reasons, we may immediately remove the drug from our formulary and later provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may remove a brand name drug from the formulary when adding a generic equivalent or remove an original biological product when adding a biosimilar. We may also apply new restrictions to the brand name drug or original biological product. We may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, quantity limits and/or step therapy restrictions on a drug, we must notify affected members of the change at least 30 days before the change becomes effective. Alternatively, when a member requests a refill of the drug, they may receive a 30-day supply of the drug and notice of the change.

  If we make these other changes, you or your prescriber can ask us to make an exception for you and continue to cover the drug you have been taking. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Neighborhood Dual CONNECT’s formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2026 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2026 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the formulary for the new benefit year for any changes to drugs.

The enclosed formulary is current as of **10/29/2026**. To get updated information about the drugs covered by Neighborhood Dual CONNECT please contact us. Our contact information appears on the front and back cover pages. In the event of mid-year formulary changes, a revised Comprehensive Formulary for Neighborhood Dual CONNECT will be posted to www.nhpri.org/DualCONNECT/member-materials/.

How do I use the formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page **8**. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, Cardiovascular. If you know what your drug is used for, look for the category name in the list that begins on page **8**. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page **86**. The Index provides an alphabetical list of all of the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Neighborhood Dual CONNECT covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs work just as well as and usually cost less than brand name drugs. There are generic drug substitutes available for many brand name drugs. Generic drugs usually can be substituted for the brand name drug at the pharmacy without needing a new prescription, depending on state laws.

What are original biological products and how are they related to biosimilars?

On the formulary, when we refer to drugs, this could mean a drug or a biological product. Biological products are drugs that are more complex than typical drugs. Since biological products are more complex than typical drugs, instead of having a generic form, they have alternatives that are called biosimilars. Generally, biosimilars work just as well as the original biological product and may cost less. There are biosimilar alternatives for some original biological products. Some biosimilars are interchangeable biosimilars and, depending on state laws, may be substituted for the original biological product at the pharmacy without needing a new prescription, just like generic drugs can be substituted for brand name drugs.

For discussion of drug types, please see the Evidence of Coverage, Chapter 5, Section 3.1, “The ‘Drug List’ tells which Part D drugs are covered.”

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Neighborhood Dual CONNECT requires you or your prescriber to get prior authorization for certain drugs. This means that you will need to get approval from Neighborhood Dual CONNECT before you fill your prescriptions. If you don't get approval, Neighborhood Dual CONNECT may not cover the drug.

- **Quantity Limits:** For certain drugs, Neighborhood Dual CONNECT limits the amount of the drug that we will cover. For example, Neighborhood Dual CONNECT covers 30 tablets of FARXIGA every 30 days.

- **Step Therapy:** In some cases, Neighborhood Dual CONNECT requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, Neighborhood Dual CONNECT may not cover Drug B unless you try Drug A first. If Drug A does not work for you, Neighborhood Dual CONNECT will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page **8**. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask Neighborhood Dual CONNECT to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the Neighborhood Dual CONNECT's formulary?" on page **6** for information about how to request an exception.

What if my drug is not on the formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that Neighborhood Dual CONNECT does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by Neighborhood Dual CONNECT. When you receive the list, show it to your doctor and ask them to prescribe a similar drug that is covered by Neighborhood Dual CONNECT.

- You can ask Neighborhood Dual CONNECT to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Neighborhood Dual CONNECT's formulary?

You can ask Neighborhood Dual CONNECT to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.

- You can ask us to waive a coverage restriction including prior authorization, step therapy, or a quantity limit on your drug. For example, for certain drugs, Neighborhood Dual CONNECT limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, Neighborhood Dual CONNECT will only approve your request for an exception if the alternative drugs included on the plan's formulary, or applying the restriction would not be as effective for you and/or would cause you to have adverse effects.

You or your prescriber should contact us to ask for a formulary exception, including an exception to a coverage restriction. ***When you request an exception, your prescriber will need to explain the medical reasons why you need the exception*.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can ask for an expedited (fast) decision if you believe, and we agree, that your health could be seriously harmed by waiting up to 72 hours for a decision. If we agree, or if your prescriber asks for a fast decision, we must give you a decision no later than 24 hours after we get your prescriber's supporting statement.

What can I do if my drug is not on the formulary or has a restriction?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or you may be taking a drug that is on our formulary but has a coverage restriction, such as prior authorization. You should talk to your prescriber about requesting a coverage decision to show that you meet the criteria for approval, switching to an alternative drug that we cover, or requesting a formulary exception so that we will cover the drug you take. While you and your doctor determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or has a coverage restriction, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. If coverage is not approved, after your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

Level of Care transitions are allowed if you have left a long-term care facility within the past 30 days. We will cover a cumulative 30-day supply of the drug you need whether or not you are a new Neighborhood Dual CONNECT member.

Level of Care transitions are also allowed if you have been admitted to a long-term care facility within the past 30 days. We will cover a cumulative 31-day supply of the drug you need (fill limits are applicable for certain brand name drugs), whether or not you are a new Neighborhood Dual CONNECT member.

For more information

For more detailed information about your Neighborhood Dual CONNECT prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about Neighborhood Dual CONNECT, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 days a week. TTY users should call 1-877-486-2048. Or visit http://www.medicare.gov.

Neighborhood Dual CONNECT formulary

The formulary below provides coverage information about the drugs covered by Neighborhood Dual CONNECT. If you have trouble finding your drug in the list, turn to the Index that begins on page **86**.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., SYNTHROID) and generic drugs are listed in lower-case italics (e.g., *levothyroxine*).

The information in the Requirements/Limits column tells you if Neighborhood Dual CONNECT has any special requirements for coverage of your drug.

Here are the meanings of the codes used in the “Requirements/Limits” column:

PA = Prior Authorization: you must have approval from our plan before you can get this drug.

ST = Step Therapy: you must try another drug before you can get this one.

QL = Quantity Limit: Neighborhood Dual CONNECT limits the amount of this drug you can get.

B/D = This drug may be covered either by Medicare Part B or D. Depending upon the circumstances, a prior authorization may be required. Information may need to be submitted describing why and where (in what setting) you are using this drug.

Neighborhood Health Plan of Rhode Island's Dual CONNECT (HMO D-SNP) is a health plan that contracts with Medicare and the Rhode Island Medicaid Program. Enrollment in Neighborhood Health Plan of Rhode Island's Dual CONNECT plan depends on contract renewal.

Drug Name	Drug Tier	Requirements/Limits
ANALGESICS		
Gout		
allopurinol oral tablet 100 mg, 300 mg	Tier 1 ($5.10-$12.65)	
colchicine oral tablet 0.6 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
colchicine-probenecid oral tablet 0.5-500 mg	Tier 1 ($5.10-$12.65)	
probenecid oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
Miscellaneous		
JOURNAVX ORAL TABLET 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 29 tabs every 14 days
lidocaine hcl (pf) injection solution 0.5 %, 1 %, 1.5 %	Tier 1 ($5.10-$12.65)	B/D
lidocaine hcl injection solution 0.5 %, 1 %, 2 %	Tier 1 ($5.10-$12.65)	B/D
Nsaids		
celecoxib oral capsule 100 mg, 200 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
celecoxib oral capsule 400 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
diclofenac potassium oral tablet 50 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
diclofenac sodium er oral tablet extended release 24 hour 100 mg	Tier 1 ($5.10-$12.65)	
diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	
diflunisal oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg	Tier 1 ($5.10-$12.65)	
etodolac oral capsule 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
etodolac oral tablet 400 mg, 500 mg	Tier 1 ($5.10-$12.65)	
flurbiprofen oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
IBU ORAL TABLET 400 MG, 600 MG, 800 MG	Tier 1 ($5.10-$12.65)	
ibuprofen oral suspension 100 mg/5ml	Tier 1 ($5.10-$12.65)	
ibuprofen oral tablet 400 mg, 600 mg, 800 mg	Tier 1 ($5.10-$12.65)	
meloxicam oral tablet 15 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
nabumetone oral tablet 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
naproxen oral tablet 250 mg, 375 mg, 500 mg	Tier 1 ($5.10-$12.65)	
naproxen oral tablet delayed release 375 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
naproxen sodium oral tablet 275 mg, 550 mg	Tier 1 ($5.10-$12.65)	
piroxicam oral capsule 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	
sulindac oral tablet 150 mg, 200 mg	Tier 1 ($5.10-$12.65)	
Opioid Analgesics, Long-Acting		
buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr	Tier 1 ($5.10-$12.65)	PA; QL; 4 patches every 28 days
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 75 mcg/hr, 87.5 mcg/hr	Tier 1 ($5.10-$12.65)	PA; QL; 10 patches every 30 days

Drug Name	Drug Tier	Requirements/Limits
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
METHADONE HCL INTENSOL ORAL CONCENTRATE 10 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 90 mL every 30 days
methadone hcl oral solution 10 mg/5ml, 5 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 450 mL every 30 days
methadone hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
Opioid Analgesics, Short-Acting		
acetaminophen-codeine oral solution 120-12 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 2700 mL every 30 days
acetaminophen-codeine oral tablet 300-15 mg	Tier 1 ($5.10-$12.65)	QL; 400 tabs every 30 days
acetaminophen-codeine oral tablet 300-30 mg	Tier 1 ($5.10-$12.65)	QL; 360 tabs every 30 days
acetaminophen-codeine oral tablet 300-60 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml	Tier 1 ($5.10-$12.65)	
ENDOCET ORAL TABLET 10-325 MG	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
ENDOCET ORAL TABLET 2.5-325 MG, 5-325 MG	Tier 1 ($5.10-$12.65)	QL; 360 tabs every 30 days
ENDOCET ORAL TABLET 7.5-325 MG	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml	Tier 1 ($5.10-$12.65)	QL; 2700 mL every 30 days
hydrocodone-acetaminophen oral tablet 10-325 mg, 7.5-325 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
hydrocodone-acetaminophen oral tablet 5-325 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
hydrocodone-ibuprofen oral tablet 7.5-200 mg	Tier 1 ($5.10-$12.65)	QL; 150 tabs every 30 days
hydromorphone hcl oral liquid 1 mg/ml	Tier 1 ($5.10-$12.65)	QL; 600 mL every 30 days
hydromorphone hcl oral tablet 2 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
morphine sulfate (concentrate) oral solution 100 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 180 mL every 30 days
morphine sulfate intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 8 mg/ml	Tier 1 ($5.10-$12.65)	B/D
morphine sulfate oral solution 10 mg/5ml, 20 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 900 mL every 30 days
morphine sulfate oral tablet 15 mg, 30 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
oxycodone hcl oral concentrate 100 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 180 mL every 30 days
oxycodone hcl oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 900 mL every 30 days
oxycodone hcl oral tablet 10 mg, 15 mg, 20 mg, 30 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
oxycodone-acetaminophen oral tablet 10-325 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
oxycodone-acetaminophen oral tablet 2.5-325 mg, 5-325 mg	Tier 1 ($5.10-$12.65)	QL; 360 tabs every 30 days
oxycodone-acetaminophen oral tablet 7.5-325 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
tramadol hcl oral tablet 50 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
tramadol-acetaminophen oral tablet 37.5-325 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
ANTI-INFECTIVES		
Antifungals		
amphotericin b intravenous solution reconstituted 50 mg	Tier 1 ($5.10-$12.65)	B/D
amphotericin b liposome intravenous suspension reconstituted 50 mg	Tier 1 ($5.10-$12.65)	B/D
caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg	Tier 1 ($5.10-$12.65)	
CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG	Tier 1 ($5.10-$12.65)	PA
fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-%	Tier 1 ($5.10-$12.65)	
fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml	Tier 1 ($5.10-$12.65)	
fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg	Tier 1 ($5.10-$12.65)	
flucytosine oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	PA
griseofulvin microsize oral suspension 125 mg/5ml	Tier 1 ($5.10-$12.65)	
griseofulvin microsize oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	Tier 1 ($5.10-$12.65)	
itraconazole oral capsule 100 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
ketoconazole oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA
micafungin sodium intravenous solution reconstituted 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	
nystatin oral tablet 500000 unit	Tier 1 ($5.10-$12.65)	
posaconazole oral tablet delayed release 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 93 tabs every 30 days
terbinafine hcl oral tablet 250 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
voriconazole intravenous solution reconstituted 200 mg	Tier 1 ($5.10-$12.65)	PA
voriconazole oral suspension reconstituted 40 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 600 mL every 28 days
voriconazole oral tablet 200 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
voriconazole oral tablet 50 mg	Tier 1 ($5.10-$12.65)	QL; 480 tabs every 30 days
Anti-Infectives - Miscellaneous		
albendazole oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 672 tabs every year
amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml	Tier 1 ($5.10-$12.65)	
ARIKAYCE INHALATION SUSPENSION 590 MG/8.4ML	Tier 1 ($5.10-$12.65)	PA
atovaquone oral suspension 750 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 300 mL every 30 days
aztreonam injection solution reconstituted 1 gm, 2 gm	Tier 1 ($5.10-$12.65)	
BLUJEPA ORAL TABLET 750 MG	Tier 1 ($5.10-$12.65)	
CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG	Tier 1 ($5.10-$12.65)	PA
clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml	Tier 1 ($5.10-$12.65)	
clindamycin phosphate in d5w intravenous solution 300 mg/50ml, 600 mg/50ml, 900 mg/50ml	Tier 1 ($5.10-$12.65)	
clindamycin phosphate in nacl intravenous solution 300-0.9 mg/50ml-%, 600-0.9 mg/50ml-%, 900-0.9 mg/50ml-%	Tier 1 ($5.10-$12.65)	
clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 900 mg/6ml	Tier 1 ($5.10-$12.65)	
colistimethate sodium (cba) injection solution reconstituted 150 mg	Tier 1 ($5.10-$12.65)	
dapsone oral tablet 100 mg, 25 mg	Tier 1 ($5.10-$12.65)	
daptomycin intravenous solution reconstituted 350 mg, 500 mg	Tier 1 ($5.10-$12.65)	
EMVERM ORAL TABLET CHEWABLE 100 MG	Tier 1 ($5.10-$12.65)	QL; 12 tabs every year
ertapenem sodium injection solution reconstituted 1 gm	Tier 1 ($5.10-$12.65)	
fosfomycin tromethamine oral packet 3 gm	Tier 1 ($5.10-$12.65)	
gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-%	Tier 1 ($5.10-$12.65)	
gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml	Tier 1 ($5.10-$12.65)	
imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
ivermectin oral tablet 3 mg	Tier 1 ($5.10-$12.65)	PA; QL; 20 tabs every 90 days
ivermectin oral tablet 6 mg	Tier 1 ($5.10-$12.65)	PA; QL; 10 tabs every 90 days
linezolid in sodium chloride intravenous solution 600-0.9 mg/300ml-%	Tier 1 ($5.10-$12.65)	
linezolid intravenous solution 600 mg/300ml	Tier 1 ($5.10-$12.65)	
linezolid oral suspension reconstituted 100 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 1800 mL every 30 days
linezolid oral tablet 600 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
meropenem intravenous solution reconstituted 1 gm, 2 gm, 500 mg	Tier 1 ($5.10-$12.65)	
methenamine hippurate oral tablet 1 gm	Tier 1 ($5.10-$12.65)	
metronidazole intravenous solution 500 mg/100ml	Tier 1 ($5.10-$12.65)	
metronidazole oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
neomycin sulfate oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
nitazoxanide oral tablet 500 mg	Tier 1 ($5.10-$12.65)	QL; 6 tabs every 30 days
nitrofurantoin macrocrystal oral capsule 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	
nitrofurantoin monohyd macro oral capsule 100 mg	Tier 1 ($5.10-$12.65)	
pentamidine isethionate inhalation solution reconstituted 300 mg	Tier 1 ($5.10-$12.65)	B/D
pentamidine isethionate injection solution reconstituted 300 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
polymyxin b sulfate injection solution reconstituted 500000 unit	Tier 1 ($5.10-$12.65)	
praziquantel oral tablet 600 mg	Tier 1 ($5.10-$12.65)	
pyrimethamine oral tablet 25 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
streptomycin sulfate intramuscular solution reconstituted 1 gm	Tier 1 ($5.10-$12.65)	
sulfadiazine oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml	Tier 1 ($5.10-$12.65)	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml	Tier 1 ($5.10-$12.65)	
sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	Tier 1 ($5.10-$12.65)	
tinidazole oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
TOBI PODHALER INHALATION CAPSULE 28 MG	Tier 1 ($5.10-$12.65)	PA
tobramycin inhalation nebulization solution 300 mg/5ml	Tier 1 ($5.10-$12.65)	PA
tobramycin sulfate injection solution 1.2 gm/30ml, 10 mg/ml, 80 mg/2ml	Tier 1 ($5.10-$12.65)	
trimethoprim oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-%, 750-0.9 mg/150ml-%	Tier 1 ($5.10-$12.65)	
vancomycin hcl intravenous solution reconstituted 1 gm, 1.25 gm, 1.5 gm, 10 gm, 5 gm, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
vancomycin hcl oral capsule 125 mg	Tier 1 ($5.10-$12.65)	QL; 80 caps every 180 days
vancomycin hcl oral capsule 250 mg	Tier 1 ($5.10-$12.65)	QL; 160 caps every 180 days
Antimalarials		
atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg	Tier 1 ($5.10-$12.65)	
chloroquine phosphate oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
COARTEM ORAL TABLET 20-120 MG	Tier 1 ($5.10-$12.65)	
mefloquine hcl oral tablet 250 mg	Tier 1 ($5.10-$12.65)	
primaquine phosphate oral tablet 26.3 (15 base) mg	Tier 1 ($5.10-$12.65)	
quinine sulfate oral capsule 324 mg	Tier 1 ($5.10-$12.65)	PA
Antiretroviral Agents		
abacavir sulfate oral solution 20 mg/ml	Tier 1 ($5.10-$12.65)	
abacavir sulfate oral tablet 300 mg	Tier 1 ($5.10-$12.65)	
APTIVUS ORAL CAPSULE 250 MG	Tier 1 ($5.10-$12.65)	
atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
darunavir oral tablet 600 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
darunavir oral tablet 800 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
EDURANT ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
EDURANT PED ORAL TABLET SOLUBLE 2.5 MG	Tier 1 ($5.10-$12.65)	
efavirenz oral tablet 600 mg	Tier 1 ($5.10-$12.65)	
emtricitabine oral capsule 200 mg	Tier 1 ($5.10-$12.65)	
EMTRIVA ORAL SOLUTION 10 MG/ML	Tier 1 ($5.10-$12.65)	
etravirine oral tablet 100 mg, 200 mg	Tier 1 ($5.10-$12.65)	
fosamprenavir calcium oral tablet 700 mg	Tier 1 ($5.10-$12.65)	
INTELENCE ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	
ISENTRESS HD ORAL TABLET 600 MG	Tier 1 ($5.10-$12.65)	
ISENTRESS ORAL PACKET 100 MG	Tier 1 ($5.10-$12.65)	
ISENTRESS ORAL TABLET 400 MG	Tier 1 ($5.10-$12.65)	
ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG	Tier 1 ($5.10-$12.65)	
lamivudine oral solution 10 mg/ml	Tier 1 ($5.10-$12.65)	
lamivudine oral tablet 150 mg, 300 mg	Tier 1 ($5.10-$12.65)	
maraviroc oral tablet 150 mg, 300 mg	Tier 1 ($5.10-$12.65)	
nevirapine er oral tablet extended release 24 hour 400 mg	Tier 1 ($5.10-$12.65)	
nevirapine oral suspension 50 mg/5ml	Tier 1 ($5.10-$12.65)	
nevirapine oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
NORVIR ORAL PACKET 100 MG	Tier 1 ($5.10-$12.65)	
PIFELTRO ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	
PREZISTA ORAL SUSPENSION 100 MG/ML	Tier 1 ($5.10-$12.65)	QL; 400 mL every 30 days
PREZISTA ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
PREZISTA ORAL TABLET 75 MG	Tier 1 ($5.10-$12.65)	QL; 480 tabs every 30 days
REYATAZ ORAL PACKET 50 MG	Tier 1 ($5.10-$12.65)	
rilpivirine hcl oral tablet 25 mg	Tier 1 ($5.10-$12.65)	
ritonavir oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG	Tier 1 ($5.10-$12.65)	
SELZENTRY ORAL SOLUTION 20 MG/ML	Tier 1 ($5.10-$12.65)	
SUNLENCA ORAL TABLET 300 MG	Tier 1 ($5.10-$12.65)	
SUNLENCA ORAL TABLET THERAPY PACK 4 X 300 MG, 5 X 300 MG	Tier 1 ($5.10-$12.65)	
tenofovir disoproxil fumarate oral tablet 300 mg	Tier 1 ($5.10-$12.65)	
TIVICAY ORAL TABLET 50 MG	Tier 1 ($5.10-$12.65)	
TIVICAY PD ORAL TABLET SOLUBLE 5 MG	Tier 1 ($5.10-$12.65)	
TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33ML	Tier 1 ($5.10-$12.65)	
TYBOST ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	
VIRACEPT ORAL TABLET 250 MG, 625 MG	Tier 1 ($5.10-$12.65)	
VIREAD ORAL POWDER 40 MG/GM	Tier 1 ($5.10-$12.65)	
VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
zidovudine oral capsule 100 mg	Tier 1 ($5.10-$12.65)	
zidovudine oral syrup 50 mg/5ml	Tier 1 ($5.10-$12.65)	
zidovudine oral tablet 300 mg	Tier 1 ($5.10-$12.65)	
Antiretroviral Combination Agents		
abacavir sulfate-lamivudine oral tablet 600-300 mg	Tier 1 ($5.10-$12.65)	
BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG	Tier 1 ($5.10-$12.65)	
CIMDUO ORAL TABLET 300-300 MG	Tier 1 ($5.10-$12.65)	
DELSTRIGO ORAL TABLET 100-300-300 MG	Tier 1 ($5.10-$12.65)	
DESCOVY ORAL TABLET 120-15 MG, 200-25 MG	Tier 1 ($5.10-$12.65)	
DOVATO ORAL TABLET 50-300 MG	Tier 1 ($5.10-$12.65)	
efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg	Tier 1 ($5.10-$12.65)	
efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg	Tier 1 ($5.10-$12.65)	
emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	Tier 1 ($5.10-$12.65)	
emtricitab-rilpivir-tenofov df oral tablet 200-25-300 mg	Tier 1 ($5.10-$12.65)	
EVOTAZ ORAL TABLET 300-150 MG	Tier 1 ($5.10-$12.65)	
GENVOYA ORAL TABLET 150-150-200-10 MG	Tier 1 ($5.10-$12.65)	
IDVYNSO ORAL TABLET 100-0.25 MG	Tier 1 ($5.10-$12.65)	
JULUCA ORAL TABLET 50-25 MG	Tier 1 ($5.10-$12.65)	
KALETRA ORAL SOLUTION 400-100 MG/5ML	Tier 1 ($5.10-$12.65)	
lamivudine-zidovudine oral tablet 150-300 mg	Tier 1 ($5.10-$12.65)	
lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg	Tier 1 ($5.10-$12.65)	
ODEFSEY ORAL TABLET 200-25-25 MG	Tier 1 ($5.10-$12.65)	
PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG	Tier 1 ($5.10-$12.65)	
STRIBILD ORAL TABLET 150-150-200-300 MG	Tier 1 ($5.10-$12.65)	
SYMTUZA ORAL TABLET 800-150-200-10 MG	Tier 1 ($5.10-$12.65)	
TRIUMEQ ORAL TABLET 600-50-300 MG	Tier 1 ($5.10-$12.65)	
triumeq pd oral tablet soluble 60-5-30 mg	Tier 1 ($5.10-$12.65)	
Antitubercular Agents		
cycloserine oral capsule 250 mg	Tier 1 ($5.10-$12.65)	
ethambutol hcl oral tablet 100 mg, 400 mg	Tier 1 ($5.10-$12.65)	
isoniazid oral syrup 50 mg/5ml	Tier 1 ($5.10-$12.65)	
isoniazid oral tablet 100 mg, 300 mg	Tier 1 ($5.10-$12.65)	
PRIFTIN ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	
pyrazinamide oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
rifabutin oral capsule 150 mg	Tier 1 ($5.10-$12.65)	
rifampin intravenous solution reconstituted 600 mg	Tier 1 ($5.10-$12.65)	
rifampin oral capsule 150 mg, 300 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
rifapentine oral tablet 150 mg	Tier 1 ($5.10-$12.65)	
SIRTURO ORAL TABLET 100 MG, 20 MG	Tier 1 ($5.10-$12.65)	PA
Antivirals		
acyclovir oral capsule 200 mg	Tier 1 ($5.10-$12.65)	
acyclovir oral suspension 200 mg/5ml	Tier 1 ($5.10-$12.65)	
acyclovir oral tablet 400 mg, 800 mg	Tier 1 ($5.10-$12.65)	
acyclovir sodium intravenous solution 50 mg/ml	Tier 1 ($5.10-$12.65)	B/D
adefovir dipivoxil oral tablet 10 mg	Tier 1 ($5.10-$12.65)	
BARACLUDE ORAL SOLUTION 0.05 MG/ML	Tier 1 ($5.10-$12.65)	ST
entecavir oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	
EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG	Tier 1 ($5.10-$12.65)	PA
EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG	Tier 1 ($5.10-$12.65)	PA
famciclovir oral tablet 125 mg, 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
ganciclovir sodium intravenous solution reconstituted 500 mg	Tier 1 ($5.10-$12.65)	B/D
lamivudine oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
LIVTENCITY ORAL TABLET 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 336 tabs every 28 days
MAVYRET ORAL PACKET 50-20 MG	Tier 1 ($5.10-$12.65)	PA
MAVYRET ORAL TABLET 100-40 MG	Tier 1 ($5.10-$12.65)	PA
oseltamivir phosphate oral capsule 30 mg	Tier 1 ($5.10-$12.65)	QL; 168 caps every year
oseltamivir phosphate oral capsule 45 mg, 75 mg	Tier 1 ($5.10-$12.65)	QL; 84 caps every year
oseltamivir phosphate oral suspension reconstituted 6 mg/ml	Tier 1 ($5.10-$12.65)	QL; 1080 mL every year
PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG & 10 X 100MG	Tier 1 ($5.10-$12.65)	QL; 40 tabs every 90 days
PAXLOVID (300/100 & 150/100) ORAL TABLET THERAPY PACK 6 X 150 MG & 5 X 100MG	Tier 1 ($5.10-$12.65)	QL; 22 tabs every 90 days
PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG & 10 X 100MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 90 days
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Tier 1 ($5.10-$12.65)	PA
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA
PREVYMIS ORAL TABLET 240 MG, 480 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 tabs every 28 days
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT	Tier 1 ($5.10-$12.65)	QL; 6 inhalers every year
ribavirin oral capsule 200 mg	Tier 1 ($5.10-$12.65)	
ribavirin oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
rimantadine hcl oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
valacyclovir hcl oral tablet 1 gm, 500 mg	Tier 1 ($5.10-$12.65)	
valganciclovir hcl oral solution reconstituted 50 mg/ml	Tier 1 ($5.10-$12.65)	
valganciclovir hcl oral tablet 450 mg	Tier 1 ($5.10-$12.65)	
VOSEVI ORAL TABLET 400-100-100 MG	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG	Tier 1 ($5.10-$12.65)	QL; 1 tab every 180 days
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG	Tier 1 ($5.10-$12.65)	QL; 1 tab every 180 days
Cephalosporins		
cefaclor oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
cefadroxil oral capsule 500 mg	Tier 1 ($5.10-$12.65)	
cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml	Tier 1 ($5.10-$12.65)	
cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 2 gm, 3 gm, 500 mg	Tier 1 ($5.10-$12.65)	
cefazolin sodium intravenous solution reconstituted 2 gm, 3 gm	Tier 1 ($5.10-$12.65)	
cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%, 3-4 gm/150ml-%	Tier 1 ($5.10-$12.65)	
cefazolin sodium-dextrose intravenous solution reconstituted 1-4 gm-%(50ml), 2-3 gm-%(50ml), 3-2 gm-%(50ml)	Tier 1 ($5.10-$12.65)	
cefdinir oral capsule 300 mg	Tier 1 ($5.10-$12.65)	
cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	Tier 1 ($5.10-$12.65)	
cefepime hcl injection solution reconstituted 1 gm	Tier 1 ($5.10-$12.65)	
cefepime hcl intravenous solution reconstituted 2 gm	Tier 1 ($5.10-$12.65)	
cefixime oral capsule 400 mg	Tier 1 ($5.10-$12.65)	
cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	Tier 1 ($5.10-$12.65)	
cefotetan disodium injection solution reconstituted 1 gm, 2 gm	Tier 1 ($5.10-$12.65)	
cefoxitin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	Tier 1 ($5.10-$12.65)	
cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml	Tier 1 ($5.10-$12.65)	
cefpodoxime proxetil oral tablet 100 mg, 200 mg	Tier 1 ($5.10-$12.65)	
cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	Tier 1 ($5.10-$12.65)	
cefprozil oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
ceftaroline fosamil intravenous solution reconstituted 400 mg, 600 mg	Tier 1 ($5.10-$12.65)	
ceftazidime injection solution reconstituted 1 gm, 6 gm	Tier 1 ($5.10-$12.65)	
ceftazidime intravenous solution reconstituted 2 gm	Tier 1 ($5.10-$12.65)	
ceftriaxone sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
ceftriaxone sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	Tier 1 ($5.10-$12.65)	
cefuroxime axetil oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
cefuroxime sodium injection solution reconstituted 750 mg	Tier 1 ($5.10-$12.65)	
cefuroxime sodium intravenous solution reconstituted 1.5 gm	Tier 1 ($5.10-$12.65)	
cephalexin oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	Tier 1 ($5.10-$12.65)	
TAZICEF INJECTION SOLUTION RECONSTITUTED 1 GM	Tier 1 ($5.10-$12.65)	
TAZICEF INTRAVENOUS SOLUTION RECONSTITUTED 2 GM, 6 GM	Tier 1 ($5.10-$12.65)	
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 400 MG, 600 MG	Tier 1 ($5.10-$12.65)	
Erythromycins/Macrolides		
azithromycin intravenous solution reconstituted 500 mg	Tier 1 ($5.10-$12.65)	
azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml	Tier 1 ($5.10-$12.65)	
azithromycin oral tablet 250 mg, 250 mg (6 pack), 500 mg, 500 mg (3 pack), 600 mg	Tier 1 ($5.10-$12.65)	
clarithromycin er oral tablet extended release 24 hour 500 mg	Tier 1 ($5.10-$12.65)	
clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml	Tier 1 ($5.10-$12.65)	
clarithromycin oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML	Tier 1 ($5.10-$12.65)	
E.E.S. 400 ORAL TABLET 400 MG	Tier 1 ($5.10-$12.65)	
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG	Tier 1 ($5.10-$12.65)	
erythromycin base oral capsule delayed release particles 250 mg	Tier 1 ($5.10-$12.65)	
erythromycin base oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
erythromycin ethylsuccinate oral tablet 400 mg	Tier 1 ($5.10-$12.65)	
erythromycin lactobionate intravenous solution reconstituted 500 mg	Tier 1 ($5.10-$12.65)	
erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg	Tier 1 ($5.10-$12.65)	
fidaxomicin oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
Fluoroquinolones		
ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
ciprofloxacin in d5w intravenous solution 200 mg/100ml, 400 mg/200ml	Tier 1 ($5.10-$12.65)	
levofloxacin in d5w intravenous solution 250 mg/50ml, 500 mg/100ml, 750 mg/150ml	Tier 1 ($5.10-$12.65)	
levofloxacin intravenous solution 25 mg/ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
levofloxacin oral solution 25 mg/ml	Tier 1 ($5.10-$12.65)	
levofloxacin oral tablet 250 mg, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
moxifloxacin hcl in nacl intravenous solution 400 mg/250ml	Tier 1 ($5.10-$12.65)	
moxifloxacin hcl oral tablet 400 mg	Tier 1 ($5.10-$12.65)	
Penicillins		
amoxicillin oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	Tier 1 ($5.10-$12.65)	
amoxicillin oral tablet 500 mg, 875 mg	Tier 1 ($5.10-$12.65)	
amoxicillin oral tablet chewable 125 mg, 250 mg	Tier 1 ($5.10-$12.65)	
amoxicillin-pot clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml	Tier 1 ($5.10-$12.65)	
amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg	Tier 1 ($5.10-$12.65)	
ampicillin oral capsule 500 mg	Tier 1 ($5.10-$12.65)	
ampicillin sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
ampicillin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm	Tier 1 ($5.10-$12.65)	
ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm	Tier 1 ($5.10-$12.65)	
ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm, 3 (2-1) gm	Tier 1 ($5.10-$12.65)	
BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1200000 UNIT/2ML, 2400000 UNIT/4ML, 600000 UNIT/ML	Tier 1 ($5.10-$12.65)	
dicloxacillin sodium oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
nafcillin sodium injection solution reconstituted 1 gm, 2 gm	Tier 1 ($5.10-$12.65)	
nafcillin sodium intravenous solution reconstituted 10 gm	Tier 1 ($5.10-$12.65)	
oxacillin sodium injection solution reconstituted 1 gm, 2 gm	Tier 1 ($5.10-$12.65)	
oxacillin sodium intravenous solution reconstituted 10 gm	Tier 1 ($5.10-$12.65)	
penicillin g potassium injection solution reconstituted 20000000 unit, 5000000 unit	Tier 1 ($5.10-$12.65)	
penicillin g sodium injection solution reconstituted 5000000 unit	Tier 1 ($5.10-$12.65)	
penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml	Tier 1 ($5.10-$12.65)	
penicillin v potassium oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
PFIZERPEN INJECTION SOLUTION RECONSTITUTED 20000000 UNIT, 5000000 UNIT	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm	Tier 1 ($5.10-$12.65)	
Tetracyclines		
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 1 ($5.10-$12.65)	
doxycycline hyclate intravenous solution reconstituted 100 mg	Tier 1 ($5.10-$12.65)	
doxycycline hyclate oral capsule 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	
doxycycline hyclate oral tablet 100 mg, 20 mg	Tier 1 ($5.10-$12.65)	
doxycycline monohydrate oral capsule 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	
doxycycline monohydrate oral suspension reconstituted 25 mg/5ml	Tier 1 ($5.10-$12.65)	
doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	
minocycline hcl oral capsule 100 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	
NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 1 ($5.10-$12.65)	
NUZYRA ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 14 days
tetracycline hcl oral capsule 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
tigecycline intravenous solution reconstituted 50 mg	Tier 1 ($5.10-$12.65)	
ANTINEOPLASTIC AGENTS		
Alkylating Agents		
bendamustine hcl intravenous solution 100 mg/4ml	Tier 1 ($5.10-$12.65)	B/D
BENDEKA INTRAVENOUS SOLUTION 100 MG/4ML	Tier 1 ($5.10-$12.65)	B/D
carboplatin intravenous solution 150 mg/15ml, 450 mg/45ml, 50 mg/5ml, 600 mg/60ml	Tier 1 ($5.10-$12.65)	B/D
cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml	Tier 1 ($5.10-$12.65)	B/D
cyclophosphamide injection solution reconstituted 1 gm, 2 gm, 500 mg	Tier 1 ($5.10-$12.65)	B/D
cyclophosphamide intravenous solution 1 gm/2ml, 1 gm/5ml, 1000 mg/10ml, 2 gm/10ml, 2 gm/4ml, 2000 mg/20ml, 500 mg/2.5ml, 500 mg/5ml, 500 mg/ml	Tier 1 ($5.10-$12.65)	B/D
cyclophosphamide oral capsule 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	B/D
cyclophosphamide oral tablet 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	B/D
FRINDOVYX INTRAVENOUS SOLUTION 1 GM/2ML, 2 GM/4ML, 500 MG/ML	Tier 1 ($5.10-$12.65)	B/D
GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	Tier 1 ($5.10-$12.65)	
LEUKERAN ORAL TABLET 2 MG	Tier 1 ($5.10-$12.65)	PA
lomustine oral capsule 10 mg, 100 mg, 40 mg	Tier 1 ($5.10-$12.65)	
oxaliplatin intravenous solution 100 mg/20ml, 200 mg/40ml, 50 mg/10ml	Tier 1 ($5.10-$12.65)	B/D

Drug Name	Drug Tier	Requirements/Limits
oxaliplatin intravenous solution reconstituted 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	B/D
vivimusta intravenous solution 100 mg/4ml	Tier 1 ($5.10-$12.65)	B/D
Antimetabolites		
azacitidine injection suspension reconstituted 100 mg	Tier 1 ($5.10-$12.65)	B/D
cytarabine injection solution 20 mg/ml	Tier 1 ($5.10-$12.65)	B/D
fluorouracil intravenous solution 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml	Tier 1 ($5.10-$12.65)	B/D
gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml	Tier 1 ($5.10-$12.65)	B/D
gemcitabine hcl intravenous solution reconstituted 1 gm, 2 gm, 200 mg	Tier 1 ($5.10-$12.65)	B/D
INQOVI ORAL TABLET 35-100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 5 tabs every 28 days
LONSURF ORAL TABLET 15-6.14 MG	Tier 1 ($5.10-$12.65)	PA; QL; 100 tabs every 28 days
LONSURF ORAL TABLET 20-8.19 MG	Tier 1 ($5.10-$12.65)	PA; QL; 80 tabs every 28 days
mercaptopurine oral suspension 2000 mg/100ml	Tier 1 ($5.10-$12.65)	
mercaptopurine oral tablet 50 mg	Tier 1 ($5.10-$12.65)	
methotrexate sodium (pf) injection solution 1 gm/40ml, 250 mg/10ml, 50 mg/2ml	Tier 1 ($5.10-$12.65)	B/D
methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml	Tier 1 ($5.10-$12.65)	B/D
methotrexate sodium injection solution reconstituted 1 gm	Tier 1 ($5.10-$12.65)	B/D
ONUREG ORAL TABLET 200 MG, 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 14 tabs every 28 days
pemetrexed disodium intravenous solution reconstituted 100 mg, 1000 mg, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	B/D
TABLOID ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA
Hormonal Antineoplastic Agents		
abiraterone acetate oral tablet 250 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
abiraterone acetate oral tablet 500 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
ABIRTEGA ORAL TABLET 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
AKEEGA ORAL TABLET 100-500 MG, 50-500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
anastrozole oral tablet 1 mg	Tier 1 ($5.10-$12.65)	
bicalutamide oral tablet 50 mg	Tier 1 ($5.10-$12.65)	
ELIGARD SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG	Tier 1 ($5.10-$12.65)	PA
ERLEADA ORAL TABLET 240 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ERLEADA ORAL TABLET 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
EULEXIN ORAL CAPSULE 125 MG	Tier 1 ($5.10-$12.65)	
exemestane oral tablet 25 mg	Tier 1 ($5.10-$12.65)	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL	Tier 1 ($5.10-$12.65)	PA
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
fulvestrant intramuscular solution prefilled syringe 250 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
INLURIYO ORAL TABLET 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
letrozole oral tablet 2.5 mg	Tier 1 ($5.10-$12.65)	
leuprolide acetate injection kit 1 mg/0.2ml	Tier 1 ($5.10-$12.65)	PA
LIFYORLI (125 MG DOSE) ORAL CAPSULE THERAPY PACK 1 X 25 MG & 1 X 100 MG, 3 X 25 MG & 1 X 100 MG, 9 X 25 MG & 1 X 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 18 caps every 28 days
LIFYORLI (150 MG DOSE) ORAL CAPSULE THERAPY PACK 2 X 25 MG & 1 X 100 MG, 3 X 25 MG & 1 X 100 MG, 9 X 25 MG & 1 X 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 27 caps every 28 days
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG	Tier 1 ($5.10-$12.65)	PA
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG	Tier 1 ($5.10-$12.65)	PA
LYSODREN ORAL TABLET 500 MG	Tier 1 ($5.10-$12.65)	
megestrol acetate oral tablet 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
nilutamide oral tablet 150 mg	Tier 1 ($5.10-$12.65)	
NUBEQA ORAL TABLET 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
ORGOVYX ORAL TABLET 120 MG	Tier 1 ($5.10-$12.65)	PA
ORSERDU ORAL TABLET 345 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ORSERDU ORAL TABLET 86 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
SOLTAMOX ORAL SOLUTION 10 MG/5ML	Tier 1 ($5.10-$12.65)	
tamoxifen citrate oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	
toremifene citrate oral tablet 60 mg	Tier 1 ($5.10-$12.65)	PA
VEPPANU ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
VEPPANU ORAL TABLET 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
XTANDI ORAL CAPSULE 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
XTANDI ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
XTANDI ORAL TABLET 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
YONSA ORAL TABLET 125 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
Immunomodulators		
lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 28 caps every 28 days
lenalidomide oral capsule 20 mg, 25 mg	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
pomalidomide oral capsule 1 mg, 2 mg, 3 mg, 4 mg	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
THALOMID ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 caps every 28 days
THALOMID ORAL CAPSULE 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 caps every 28 days
ZENBEXUS ORAL CAPSULE 0.75 MG, 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
Miscellaneous		
BESREMI PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 pens every 28 days

Drug Name	Drug Tier	Requirements/Limits
BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 28 days
bexarotene oral capsule 75 mg	Tier 1 ($5.10-$12.65)	PA; QL; 300 caps every 30 days
doxorubicin hcl intravenous solution 2 mg/ml	Tier 1 ($5.10-$12.65)	B/D
doxorubicin hcl liposomal intravenous suspension 2 mg/ml	Tier 1 ($5.10-$12.65)	B/D
hydroxyurea oral capsule 500 mg	Tier 1 ($5.10-$12.65)	
irinotecan hcl intravenous solution 100 mg/5ml, 300 mg/15ml, 40 mg/2ml, 500 mg/25ml	Tier 1 ($5.10-$12.65)	B/D
IWILFIN ORAL TABLET 192 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
leucovorin calcium injection solution 500 mg/50ml	Tier 1 ($5.10-$12.65)	B/D
leucovorin calcium injection solution reconstituted 100 mg, 200 mg, 350 mg, 50 mg, 500 mg	Tier 1 ($5.10-$12.65)	B/D
leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg	Tier 1 ($5.10-$12.65)	
MATULANE ORAL CAPSULE 50 MG	Tier 1 ($5.10-$12.65)	
mesna oral tablet 400 mg	Tier 1 ($5.10-$12.65)	
MODEYSO ORAL CAPSULE 125 MG	Tier 1 ($5.10-$12.65)	PA; QL; 20 caps every 28 days
tretinoin oral capsule 10 mg	Tier 1 ($5.10-$12.65)	
WELIREG ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
Mitotic Inhibitors		
docetaxel intravenous concentrate 160 mg/8ml, 20 mg/ml, 80 mg/4ml	Tier 1 ($5.10-$12.65)	B/D
docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml	Tier 1 ($5.10-$12.65)	B/D
DOCIVYX INTRAVENOUS SOLUTION 160 MG/16ML, 20 MG/2ML, 80 MG/8ML	Tier 1 ($5.10-$12.65)	B/D
etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml	Tier 1 ($5.10-$12.65)	B/D
paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml	Tier 1 ($5.10-$12.65)	B/D
paclitaxel protein-bound part intravenous suspension reconstituted 100 mg	Tier 1 ($5.10-$12.65)	B/D
vincristine sulfate intravenous solution 1 mg/ml	Tier 1 ($5.10-$12.65)	B/D
vinorelbine tartrate intravenous solution 10 mg/ml, 50 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
Molecular Target Agents		
ALECENSA ORAL CAPSULE 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 caps every 30 days
ALUNBRIG ORAL TABLET 180 MG, 90 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ALUNBRIG ORAL TABLET 30 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
AUGTYRO ORAL CAPSULE 160 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
AUGTYRO ORAL CAPSULE 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 caps every 30 days

Drug Name	Drug Tier	Requirements/Limits
AVMAPKI FAKZYNJA CO-PACK ORAL THERAPY PACK 0.8 & 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 1 pack every 28 days
AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
BALVERSA ORAL TABLET 3 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
BALVERSA ORAL TABLET 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
BALVERSA ORAL TABLET 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 tabs every 28 days
bortezomib injection solution reconstituted 1 mg, 2.5 mg, 3.5 mg	Tier 1 ($5.10-$12.65)	PA
BOSULIF ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 300 caps every 30 days
BOSULIF ORAL CAPSULE 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
BOSULIF ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
BOSULIF ORAL TABLET 400 MG, 500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
bosutinib oral tablet 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
bosutinib oral tablet 400 mg, 500 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
BRAFTOVI ORAL CAPSULE 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
BRUKINSA ORAL CAPSULE 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
BRUKINSA ORAL TABLET 160 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
CABOMETYX ORAL TABLET 20 MG, 40 MG, 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
CALQUENCE ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
CAPRELSA ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
CAPRELSA ORAL TABLET 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
CAVHANZA ORAL TABLET DISPERSIBLE 60 MG, 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
COMETRIQ (100 MG DAILY DOSE) ORAL KIT 80 & 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 caps every 28 days
COMETRIQ (140 MG DAILY DOSE) ORAL KIT 3 X 20 MG & 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 caps every 28 days
COMETRIQ (60 MG DAILY DOSE) ORAL KIT 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 caps every 28 days
COPIKTRA ORAL CAPSULE 15 MG, 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 caps every 28 days
COTELLIC ORAL TABLET 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 63 tabs every 28 days
DANZITEN ORAL TABLET 71 MG, 95 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
dasatinib oral tablet 100 mg, 140 mg, 50 mg, 70 mg, 80 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
dasatinib oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
DAURISMO ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
DAURISMO ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
ENSACOVE ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
ENSACOVE ORAL CAPSULE 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 270 caps every 30 days
ERIVEDGE ORAL CAPSULE 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
erlotinib hcl oral tablet 100 mg, 150 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
erlotinib hcl oral tablet 25 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
everolimus oral tablet soluble 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
everolimus oral tablet soluble 3 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
FRUZAQLA ORAL CAPSULE 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 caps every 28 days
FRUZAQLA ORAL CAPSULE 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
GAVRETO ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
gefitinib oral tablet 250 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
GOMEKLI ORAL CAPSULE 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 168 caps every 28 days
GOMEKLI ORAL CAPSULE 2 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 caps every 28 days
GOMEKLI ORAL TABLET SOLUBLE 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 168 tabs every 28 days
HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600-10000 MG-UNT/5ML	Tier 1 ($5.10-$12.65)	PA
HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG	Tier 1 ($5.10-$12.65)	PA
HERCESSI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
HERNEXEOS ORAL TABLET 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
HYRNUO ORAL TABLET 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 caps every 28 days
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 tabs every 28 days
IBTROZI ORAL CAPSULE 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
ICLUSIG ORAL TABLET 10 MG, 15 MG, 30 MG, 45 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
IDHIFA ORAL TABLET 100 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
imatinib mesylate oral tablet 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
imatinib mesylate oral tablet 400 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
IMBRUVICA ORAL CAPSULE 140 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
IMBRUVICA ORAL CAPSULE 70 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
IMBRUVICA ORAL SUSPENSION 70 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 216 mL every 27 days
IMBRUVICA ORAL TABLET 140 MG, 280 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
imkeldi oral solution 80 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 280 mL every 28 days
INLYTA ORAL TABLET 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
INLYTA ORAL TABLET 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
INREBIC ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
ITOVEBI ORAL TABLET 3 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
ITOVEBI ORAL TABLET 9 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 tabs every 28 days
JAKAFI ORAL TABLET 10 MG, 15 MG, 20 MG, 25 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
JAYPIRCA ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
JAYPIRCA ORAL TABLET 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
JIDEYTRO ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
JIDEYTRO ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 160 MG	Tier 1 ($5.10-$12.65)	B/D
KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4ML	Tier 1 ($5.10-$12.65)	PA
KEYTRUDA QLEX SUBCUTANEOUS SOLUTION 395-4800 MG -UNT/2.4ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 21 days
KEYTRUDA QLEX SUBCUTANEOUS SOLUTION 790-9600 MG -UNT/4.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 42 days
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 21 tabs every 28 days
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 42 tabs every 28 days
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 63 tabs every 28 days
KOMZIFTI ORAL CAPSULE 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
KOSELUGO ORAL CAPSULE 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 caps every 30 days
KOSELUGO ORAL CAPSULE 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
KOSELUGO ORAL CAPSULE SPRINKLE 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 600 caps every 30 days
KOSELUGO ORAL CAPSULE SPRINKLE 7.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 360 caps every 30 days
KRAZATI ORAL TABLET 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
lapatinib ditosylate oral tablet 250 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
LAZCLUZE ORAL TABLET 240 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
LAZCLUZE ORAL TABLET 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 3 X 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 & 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 10 MG & 2 X 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 10 MG & 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK 2 X 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
LORBRENA ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
LORBRENA ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
LUMAKRAS ORAL TABLET 120 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
LUMAKRAS ORAL TABLET 240 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
LUMAKRAS ORAL TABLET 320 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
LYNPARZA ORAL TABLET 100 MG, 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 140 tabs every 28 days
MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1260 mL every 30 days
MEKINIST ORAL TABLET 0.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
MEKINIST ORAL TABLET 2 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
MEKTOVI ORAL TABLET 15 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED 200 MG	Tier 1 ($5.10-$12.65)	PA
NERLYNX ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
nilotinib hcl oral capsule 150 mg, 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 112 caps every 28 days
nilotinib hcl oral capsule 50 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG	Tier 1 ($5.10-$12.65)	PA; QL; 3 caps every 28 days
ODOMZO ORAL CAPSULE 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
OGSIVEO ORAL TABLET 100 MG, 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
OJEMDA ORAL SUSPENSION RECONSTITUTED 25 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 96 mL every 28 days
OJEMDA ORAL TABLET 100 MG, 100 MG (16 PACK), 100 MG (24 PACK)	Tier 1 ($5.10-$12.65)	PA; QL; 24 tabs every 28 days
OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
pazopanib hcl oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
pazopanib hcl oral tablet 400 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 tabs every 28 days
PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML	Tier 1 ($5.10-$12.65)	PA
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 tabs every 28 days
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 200 & 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK 2 X 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
QINLOCK ORAL TABLET 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
RETEVMO ORAL TABLET 120 MG, 160 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
RETEVMO ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
RETEVMO ORAL TABLET 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
REVUFORJ ORAL TABLET 110 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
REVUFORJ ORAL TABLET 160 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
REVUFORJ ORAL TABLET 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
REZLIDHIA ORAL CAPSULE 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG	Tier 1 ($5.10-$12.65)	PA; QL; 8 caps every 28 days
ROZLYTREK ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
ROZLYTREK ORAL CAPSULE 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
ROZLYTREK ORAL PACKET 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 336 packets every 28 days
RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
RYDAPT ORAL CAPSULE 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 224 caps every 28 days
SCEMBLIX ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
SCEMBLIX ORAL TABLET 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
SCEMBLIX ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 300 tabs every 30 days
sorafenib tosylate oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
STIVARGA ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
TABRECTA ORAL TABLET 150 MG, 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
TAFINLAR ORAL CAPSULE 50 MG, 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
TAFINLAR ORAL TABLET SOLUBLE 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 840 tabs every 28 days
TAGRISSO ORAL TABLET 40 MG, 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
TALZENNA ORAL CAPSULE 0.1 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
TALZENNA ORAL CAPSULE 0.25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
TECENTRIQ HYBREZA SUBCUTANEOUS SOLUTION 1875-30000 MG-UT/15ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 21 days
TECENTRIQ INTRAVENOUS SOLUTION 1200 MG/20ML, 840 MG/14ML	Tier 1 ($5.10-$12.65)	PA
TEPMETKO ORAL TABLET 225 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
TIBSOVO ORAL TABLET 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
TORPENZ ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG	Tier 1 ($5.10-$12.65)	PA
TRUQAP ORAL TABLET 160 MG, 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 64 tabs every 28 days
TRUQAP ORAL TABLET THERAPY PACK 160 MG, 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 4 packs every 28 days
TRUXIMA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML	Tier 1 ($5.10-$12.65)	PA
TUKYSA ORAL TABLET 150 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
TURALIO ORAL CAPSULE 125 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
VENCLEXTA ORAL TABLET 10 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
VENCLEXTA ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 42 tabs every 28 days
VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
VITRAKVI ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
VITRAKVI ORAL CAPSULE 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
VITRAKVI ORAL SOLUTION 20 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 300 mL every 30 days
VIZIMPRO ORAL TABLET 15 MG, 30 MG, 45 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
VONJO ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
VORANIGO ORAL TABLET 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
VORANIGO ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
XALKORI ORAL CAPSULE 200 MG, 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
XALKORI ORAL CAPSULE SPRINKLE 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
XALKORI ORAL CAPSULE SPRINKLE 20 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
XOSPATA ORAL TABLET 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 8 tabs every 28 days
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 16 tabs every 28 days
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 4 tabs every 28 days
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 8 tabs every 28 days
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 4 tabs every 28 days
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 24 tabs every 28 days
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 8 tabs every 28 days
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 4 tabs every 28 days
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 32 tabs every 28 days
YULITHIRA ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ZEJULA ORAL TABLET 100 MG, 200 MG, 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ZELBORAF ORAL TABLET 240 MG	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
ZIRABEV INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML	Tier 1 ($5.10-$12.65)	PA
ZOLINZA ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days

Drug Name	Drug Tier	Requirements/Limits
ZYDELIG ORAL TABLET 100 MG, 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
ZYKADIA ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
CARDIOVASCULAR		
Ace Inhibitor Combinations		
amlodipine besy-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg	Tier 1 ($5.10-$12.65)	
captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg	Tier 1 ($5.10-$12.65)	
enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg	Tier 1 ($5.10-$12.65)	
fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg	Tier 1 ($5.10-$12.65)	
lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg	Tier 1 ($5.10-$12.65)	
Ace Inhibitors		
benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Tier 1 ($5.10-$12.65)	
captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg	Tier 1 ($5.10-$12.65)	
moexipril hcl oral tablet 15 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	
quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Tier 1 ($5.10-$12.65)	
ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
trandolapril oral tablet 1 mg, 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	
Aldosterone Receptor Antagonists		
eplerenone oral tablet 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
spironolactone oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
Alpha Blockers		
doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	
prazosin hcl oral capsule 1 mg, 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	
terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	
Angiotensin Ii Receptor Antagonist Combinations		
amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
amlodipine-olmesartan oral tablet 10-20 mg, 10-40 mg, 5-20 mg, 5-40 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
candesartan cilexetil-hctz oral tablet 16-12.5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
candesartan cilexetil-hctz oral tablet 32-12.5 mg, 32-25 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
ENTRESTO ORAL CAPSULE SPRINKLE 15-16 MG, 6-6 MG	Tier 1 ($5.10-$12.65)	QL; 240 caps every 30 days
irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
irbesartan-hydrochlorothiazide oral tablet 300-12.5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg	Tier 1 ($5.10-$12.65)	
olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
sacubitril-valsartan oral tablet 24-26 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
sacubitril-valsartan oral tablet 49-51 mg, 97-103 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
telmisartan-hctz oral tablet 40-12.5 mg, 80-25 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
telmisartan-hctz oral tablet 80-12.5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
Angiotensin Ii Receptor Antagonists		
candesartan cilexetil oral tablet 16 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
candesartan cilexetil oral tablet 32 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
irbesartan oral tablet 150 mg, 300 mg, 75 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
losartan potassium oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
olmesartan medoxomil oral tablet 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
olmesartan medoxomil oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
telmisartan oral tablet 20 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
valsartan oral tablet 160 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
valsartan oral tablet 320 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
Antiarrhythmics		
amiodarone hcl intravenous solution 150 mg/3ml, 450 mg/9ml, 900 mg/18ml	Tier 1 ($5.10-$12.65)	
amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg	Tier 1 ($5.10-$12.65)	
disopyramide phosphate oral capsule 100 mg, 150 mg	Tier 1 ($5.10-$12.65)	
dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	Tier 1 ($5.10-$12.65)	
flecainide acetate oral tablet 100 mg, 150 mg, 50 mg	Tier 1 ($5.10-$12.65)	
MULTAQ ORAL TABLET 400 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
PACERONE ORAL TABLET 100 MG, 200 MG, 400 MG	Tier 1 ($5.10-$12.65)	
propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg	Tier 1 ($5.10-$12.65)	
propafenone hcl oral tablet 150 mg, 225 mg, 300 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
quinidine sulfate oral tablet 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg	Tier 1 ($5.10-$12.65)	
sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg	Tier 1 ($5.10-$12.65)	
Antilipemics, Fibrates		
fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg	Tier 1 ($5.10-$12.65)	
fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg	Tier 1 ($5.10-$12.65)	
gemfibrozil oral tablet 600 mg	Tier 1 ($5.10-$12.65)	
Antilipemics, Hmg-Coa Reductase Inhibitors		
atorvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
lovastatin oral tablet 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
rosuvastatin calcium oral tablet 10 mg, 20 mg, 40 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
Antilipemics, Miscellaneous		
cholestyramine light oral packet 4 gm	Tier 1 ($5.10-$12.65)	
cholestyramine light oral powder 4 gm/dose	Tier 1 ($5.10-$12.65)	
cholestyramine oral packet 4 gm	Tier 1 ($5.10-$12.65)	
cholestyramine oral powder 4 gm/dose	Tier 1 ($5.10-$12.65)	
colesevelam hcl oral packet 3.75 gm	Tier 1 ($5.10-$12.65)	
colesevelam hcl oral tablet 625 mg	Tier 1 ($5.10-$12.65)	
colestipol hcl oral granules 5 gm	Tier 1 ($5.10-$12.65)	
colestipol hcl oral packet 5 gm	Tier 1 ($5.10-$12.65)	
colestipol hcl oral tablet 1 gm	Tier 1 ($5.10-$12.65)	
ezetimibe oral tablet 10 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
NEXLETOL ORAL TABLET 180 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
NEXLIZET ORAL TABLET 180-10 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
omega-3-acid ethyl esters oral capsule 1 gm	Tier 1 ($5.10-$12.65)	
PREVALITE ORAL PACKET 4 GM	Tier 1 ($5.10-$12.65)	
PREVALITE ORAL POWDER 4 GM/DOSE	Tier 1 ($5.10-$12.65)	
REPATHA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 140 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 syringes every 28 days
REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 autoinjectors every 28 days
VASCEPA ORAL CAPSULE 0.5 GM, 1 GM	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
Beta-Blocker/Diuretic Combinations		
atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg	Tier 1 ($5.10-$12.65)	
bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg	Tier 1 ($5.10-$12.65)	
metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg	Tier 1 ($5.10-$12.65)	
Beta-Blockers		
acebutolol hcl oral capsule 200 mg, 400 mg	Tier 1 ($5.10-$12.65)	
atenolol oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
betaxolol hcl oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	
bisoprolol fumarate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg	Tier 1 ($5.10-$12.65)	
labetalol hcl oral tablet 100 mg, 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
metoprolol tartrate intravenous solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	
metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
nadolol oral tablet 20 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	
nebivolol hcl oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
nebivolol hcl oral tablet 20 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
pindolol oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg	Tier 1 ($5.10-$12.65)	
propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml	Tier 1 ($5.10-$12.65)	
propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	Tier 1 ($5.10-$12.65)	
timolol maleate oral tablet 10 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
Calcium Channel Blockers		
amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
CARTIA XT ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG	Tier 1 ($5.10-$12.65)	
diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg	Tier 1 ($5.10-$12.65)	
diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg	Tier 1 ($5.10-$12.65)	
diltiazem hcl er oral capsule extended release 12 hour 120 mg, 60 mg, 90 mg	Tier 1 ($5.10-$12.65)	
diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	Tier 1 ($5.10-$12.65)	
diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg	Tier 1 ($5.10-$12.65)	
dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg	Tier 1 ($5.10-$12.65)	
felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
isradipine oral capsule 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
nicardipine hcl oral capsule 20 mg, 30 mg	Tier 1 ($5.10-$12.65)	
nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	Tier 1 ($5.10-$12.65)	
nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg	Tier 1 ($5.10-$12.65)	
nimodipine oral capsule 30 mg	Tier 1 ($5.10-$12.65)	
TIADYLT ER ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG	Tier 1 ($5.10-$12.65)	
verapamil hcl er oral capsule extended release 24 hour 100 mg, 120 mg, 180 mg, 200 mg, 240 mg, 300 mg, 360 mg	Tier 1 ($5.10-$12.65)	
verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg	Tier 1 ($5.10-$12.65)	
verapamil hcl intravenous solution 2.5 mg/ml	Tier 1 ($5.10-$12.65)	
verapamil hcl oral tablet 120 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	
Diuretics		
acetazolamide er oral capsule extended release 12 hour 500 mg	Tier 1 ($5.10-$12.65)	
acetazolamide oral tablet 125 mg, 250 mg	Tier 1 ($5.10-$12.65)	
amiloride hcl oral tablet 5 mg	Tier 1 ($5.10-$12.65)	
amiloride-hydrochlorothiazide oral tablet 5-50 mg	Tier 1 ($5.10-$12.65)	
bumetanide injection solution 0.25 mg/ml	Tier 1 ($5.10-$12.65)	
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	
chlorthalidone oral tablet 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
furosemide injection solution 10 mg/ml	Tier 1 ($5.10-$12.65)	
furosemide oral solution 10 mg/ml, 8 mg/ml	Tier 1 ($5.10-$12.65)	
furosemide oral tablet 20 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	
hydrochlorothiazide oral capsule 12.5 mg	Tier 1 ($5.10-$12.65)	
hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
indapamide oral tablet 1.25 mg, 2.5 mg	Tier 1 ($5.10-$12.65)	
methazolamide oral tablet 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
metolazone oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
spironolactone-hctz oral tablet 25-25 mg	Tier 1 ($5.10-$12.65)	
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
triamterene-hctz oral capsule 37.5-25 mg	Tier 1 ($5.10-$12.65)	
triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
Miscellaneous		
aliskiren fumarate oral tablet 150 mg, 300 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg	Tier 1 ($5.10-$12.65)	
clonidine transdermal patch weekly 0.1 mg/24hr, 0.2 mg/24hr, 0.3 mg/24hr	Tier 1 ($5.10-$12.65)	
CORLANOR ORAL SOLUTION 5 MG/5ML	Tier 1 ($5.10-$12.65)	QL; 450 mL every 30 days
digoxin injection solution 0.25 mg/ml	Tier 1 ($5.10-$12.65)	
digoxin oral solution 0.05 mg/ml	Tier 1 ($5.10-$12.65)	
digoxin oral tablet 125 mcg, 250 mcg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
droxidopa oral capsule 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 caps every 30 days
droxidopa oral capsule 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
epinephrine injection solution 1 mg/ml	Tier 1 ($5.10-$12.65)	
epinephrine pf injection solution 1 mg/ml	Tier 1 ($5.10-$12.65)	
guanfacine hcl oral tablet 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	PA
hydralazine hcl injection solution 20 mg/ml	Tier 1 ($5.10-$12.65)	
hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
ivabradine hcl oral tablet 5 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
metyrosine oral capsule 250 mg	Tier 1 ($5.10-$12.65)	PA
midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
minoxidil oral tablet 10 mg, 2.5 mg	Tier 1 ($5.10-$12.65)	
ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg	Tier 1 ($5.10-$12.65)	
VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
VYNDAMAX ORAL CAPSULE 61 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
Nitrates		
isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg	Tier 1 ($5.10-$12.65)	
isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg	Tier 1 ($5.10-$12.65)	
NITRO-BID TRANSDERMAL OINTMENT 2 %	Tier 1 ($5.10-$12.65)	
nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg	Tier 1 ($5.10-$12.65)	
nitroglycerin transdermal ointment 2 %	Tier 1 ($5.10-$12.65)	
nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	Tier 1 ($5.10-$12.65)	
nitroglycerin translingual solution 0.4 mg/spray	Tier 1 ($5.10-$12.65)	
Pulmonary Arterial Hypertension		
ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
ALYQ ORAL TABLET 20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
ambrisentan oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
bosentan oral tablet 125 mg, 62.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
bosentan oral tablet soluble 32 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
macitentan oral tablet 10 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
OPSUMIT ORAL TABLET 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
sildenafil citrate oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 360 tabs every 30 days
tadalafil (pah) oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml	Tier 1 ($5.10-$12.65)	PA
UPTRAVI ORAL TABLET 100 MCG, 150 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 280 tabs every 28 days
UPTRAVI ORAL TABLET 1000 MCG, 1200 MCG, 1400 MCG, 1600 MCG, 400 MCG, 600 MCG, 800 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
UPTRAVI ORAL TABLET 200 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 140 tabs every 28 days
UPTRAVI TITRATION ORAL TABLET THERAPY PACK 200 & 800 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 1 pack every 28 days
WINREVAIR SUBCUTANEOUS KIT 2 X 45 MG, 2 X 60 MG, 45 MG, 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 vials every 21 days
YUTREPIA INHALATION CAPSULE 106 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 224 caps every 28 days
YUTREPIA INHALATION CAPSULE 26.5 MCG, 53 MCG, 79.5 MCG	Tier 1 ($5.10-$12.65)	PA; QL; 140 caps every 28 days
CENTRAL NERVOUS SYSTEM		
Antianxiety		
alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	QL; 150 tabs every 30 days
buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
lorazepam injection solution 2 mg/ml, 4 mg/ml	Tier 1 ($5.10-$12.65)	
LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML	Tier 1 ($5.10-$12.65)	QL; 150 mL every 30 days
lorazepam oral concentrate 2 mg/ml	Tier 1 ($5.10-$12.65)	QL; 150 mL every 30 days
lorazepam oral tablet 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	QL; 150 tabs every 30 days
Antidementia		
donepezil hcl oral tablet 10 mg	Tier 1 ($5.10-$12.65)	
donepezil hcl oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
donepezil hcl oral tablet dispersible 10 mg	Tier 1 ($5.10-$12.65)	
donepezil hcl oral tablet dispersible 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
galantamine hydrobromide oral solution 4 mg/ml	Tier 1 ($5.10-$12.65)	QL; 200 mL every 30 days
galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg	Tier 1 ($5.10-$12.65)	PA
memantine hcl oral solution 2 mg/ml	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA
memantine hcl-donepezil hcl er oral capsule extended release 24 hour 14-10 mg, 21-10 mg, 28-10 mg	Tier 1 ($5.10-$12.65)	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 7-10 MG	Tier 1 ($5.10-$12.65)	
rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
rivastigmine transdermal patch 24 hour 13.3 mg/24hr, 4.6 mg/24hr, 9.5 mg/24hr	Tier 1 ($5.10-$12.65)	QL; 30 patches every 30 days
Antidepressants		
amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA
amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA
AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
AUVELITY TITRATION PACK ORAL TABLET EXTENDED RELEASE THERAPY PACK 30-105 MG & 45-105 MG	Tier 1 ($5.10-$12.65)	QL; 2 packs every year
bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
bupropion hcl oral tablet 100 mg, 75 mg	Tier 1 ($5.10-$12.65)	
citalopram hydrobromide oral solution 10 mg/5ml	Tier 1 ($5.10-$12.65)	
citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA
desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA
desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA
doxepin hcl oral concentrate 10 mg/ml	Tier 1 ($5.10-$12.65)	PA
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 30 MG, 40 MG, 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
duloxetine hcl oral capsule delayed release particles 20 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
duloxetine hcl oral capsule delayed release particles 30 mg	Tier 1 ($5.10-$12.65)	QL; 90 caps every 30 days
duloxetine hcl oral capsule delayed release particles 60 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR	Tier 1 ($5.10-$12.65)	PA; QL; 30 patches every 30 days

Drug Name	Drug Tier	Requirements/Limits
escitalopram oxalate oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	
escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
EXXUA ORAL TABLET EXTENDED RELEASE 24 HOUR 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
EXXUA TITRATION PACK ORAL TABLET EXTENDED RELEASE 24 HOUR 18.2 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 20 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
fluoxetine hcl oral solution 20 mg/5ml	Tier 1 ($5.10-$12.65)	
imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA
MARPLAN ORAL TABLET 10 MG	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg	Tier 1 ($5.10-$12.65)	
nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	Tier 1 ($5.10-$12.65)	
nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	
nortriptyline hcl oral solution 10 mg/5ml	Tier 1 ($5.10-$12.65)	
paroxetine hcl oral suspension 10 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 900 mL every 30 days
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	Tier 1 ($5.10-$12.65)	PA
phenelzine sulfate oral tablet 15 mg	Tier 1 ($5.10-$12.65)	
protriptyline hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
RALDESY ORAL SOLUTION 10 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1800 mL every 30 days
sertraline hcl oral concentrate 20 mg/ml	Tier 1 ($5.10-$12.65)	
sertraline hcl oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
tranylcypromine sulfate oral tablet 10 mg	Tier 1 ($5.10-$12.65)	
trazodone hcl oral tablet 100 mg, 150 mg, 50 mg	Tier 1 ($5.10-$12.65)	
trimipramine maleate oral capsule 100 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
trimipramine maleate oral capsule 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
venlafaxine hcl er oral capsule extended release 24 hour 150 mg, 37.5 mg, 75 mg	Tier 1 ($5.10-$12.65)	
venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	
vilazodone hcl oral tablet 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
ZURZUVAE ORAL CAPSULE 20 MG, 25 MG	Tier 1 ($5.10-$12.65)	PA; QL; 28 caps every 14 days
ZURZUVAE ORAL CAPSULE 30 MG	Tier 1 ($5.10-$12.65)	PA; QL; 14 caps every 14 days

Drug Name	Drug Tier	Requirements/Limits
Antiparkinsonian Agents		
amantadine hcl oral capsule 100 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
amantadine hcl oral solution 50 mg/5ml	Tier 1 ($5.10-$12.65)	
amantadine hcl oral tablet 100 mg	Tier 1 ($5.10-$12.65)	
benztropine mesylate injection solution 1 mg/ml	Tier 1 ($5.10-$12.65)	
benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	PA
bromocriptine mesylate oral capsule 5 mg	Tier 1 ($5.10-$12.65)	
bromocriptine mesylate oral tablet 2.5 mg	Tier 1 ($5.10-$12.65)	
carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg	Tier 1 ($5.10-$12.65)	
carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg	Tier 1 ($5.10-$12.65)	
carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg	Tier 1 ($5.10-$12.65)	
carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg	Tier 1 ($5.10-$12.65)	
entacapone oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
INBRIJA INHALATION CAPSULE 42 MG	Tier 1 ($5.10-$12.65)	PA; QL; 300 caps every 30 days
pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	Tier 1 ($5.10-$12.65)	
rasagiline mesylate oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	Tier 1 ($5.10-$12.65)	
selegiline hcl oral capsule 5 mg	Tier 1 ($5.10-$12.65)	
selegiline hcl oral tablet 5 mg	Tier 1 ($5.10-$12.65)	
trihexyphenidyl hcl oral solution 0.4 mg/ml	Tier 1 ($5.10-$12.65)	
trihexyphenidyl hcl oral tablet 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	
Antipsychotics		
ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE 720 MG/2.4ML, 960 MG/3.2ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 56 days
ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 28 days
ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG	Tier 1 ($5.10-$12.65)	QL; 1 injection every 28 days
aripiprazole oral solution 1 mg/ml	Tier 1 ($5.10-$12.65)	QL; 900 mL every 30 days
aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
aripiprazole oral tablet dispersible 10 mg, 15 mg	Tier 1 ($5.10-$12.65)	ST; QL; 60 tabs every 30 days
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML	Tier 1 ($5.10-$12.65)	
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 56 days

Drug Name	Drug Tier	Requirements/Limits
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 28 days
asenapine maleate sublingual tablet sublingual 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
BYSANTI ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
BYSANTI TITRATION PACK A ORAL TABLET THERAPY PACK 1 & 2 & 4 & 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
BYSANTI TITRATION PACK B ORAL TABLET THERAPY PACK 1 & 2 & 6 & 8 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
BYSANTI TITRATION PACK C ORAL TABLET THERAPY PACK 1 & 2 & 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml	Tier 1 ($5.10-$12.65)	
chlorpromazine hcl oral concentrate 100 mg/ml, 30 mg/ml	Tier 1 ($5.10-$12.65)	
chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
clozapine oral tablet 100 mg	Tier 1 ($5.10-$12.65)	QL; 270 tabs every 30 days
clozapine oral tablet 200 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
clozapine oral tablet 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
clozapine oral tablet dispersible 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 270 tabs every 30 days
clozapine oral tablet dispersible 12.5 mg, 25 mg	Tier 1 ($5.10-$12.65)	PA
clozapine oral tablet dispersible 150 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
clozapine oral tablet dispersible 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
COBENFY STARTER PACK ORAL CAPSULE THERAPY PACK 50-20 & 100-20 MG	Tier 1 ($5.10-$12.65)	QL; 2 packs every year
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 28 days
ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 351 MG/2.25ML	Tier 1 ($5.10-$12.65)	QL; 2 syringes every year
FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
FANAPT TITRATION PACK A ORAL TABLET 1 & 2 & 4 & 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
FANAPT TITRATION PACK B ORAL TABLET 1 & 2 & 6 & 8 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
FANAPT TITRATION PACK C ORAL TABLET 1 & 2 & 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
fluphenazine decanoate injection solution 25 mg/ml	Tier 1 ($5.10-$12.65)	
fluphenazine hcl injection solution 2.5 mg/ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
fluphenazine hcl oral concentrate 5 mg/ml	Tier 1 ($5.10-$12.65)	
fluphenazine hcl oral elixir 2.5 mg/5ml	Tier 1 ($5.10-$12.65)	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
haloperidol decanoate intramuscular solution 100 mg/ml, 100 mg/ml 1 ml, 50 mg/ml, 50 mg/ml(1ml)	Tier 1 ($5.10-$12.65)	
haloperidol lactate injection solution 5 mg/ml	Tier 1 ($5.10-$12.65)	
haloperidol lactate oral concentrate 2 mg/ml	Tier 1 ($5.10-$12.65)	
haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML	Tier 1 ($5.10-$12.65)	QL; 1 injection every 180 days
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 28 days
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 90 days
loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg	Tier 1 ($5.10-$12.65)	
lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
lurasidone hcl oral tablet 80 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
molindone hcl oral tablet 10 mg, 25 mg, 5 mg	Tier 1 ($5.10-$12.65)	
NUPLAZID ORAL CAPSULE 34 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
NUPLAZID ORAL TABLET 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
olanzapine intramuscular solution reconstituted 10 mg	Tier 1 ($5.10-$12.65)	QL; 3 vials every 1 day
olanzapine oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
olanzapine oral tablet 15 mg, 20 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
olanzapine oral tablet dispersible 10 mg	Tier 1 ($5.10-$12.65)	ST; QL; 60 tabs every 30 days
olanzapine oral tablet dispersible 15 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	ST; QL; 30 tabs every 30 days
OPIPZA ORAL FILM 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 films every 30 days
OPIPZA ORAL FILM 2 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 films every 30 days
paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
paliperidone er oral tablet extended release 24 hour 6 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	
pimozide oral tablet 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	
quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
quetiapine fumarate er oral tablet extended release 24 hour 300 mg, 400 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
quetiapine fumarate oral tablet 25 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
quetiapine fumarate oral tablet 300 mg, 400 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
REXULTI ORAL TABLET 3 MG, 4 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg, 37.5 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 2 injections every 28 days
risperidone oral solution 1 mg/ml	Tier 1 ($5.10-$12.65)	QL; 240 mL every 30 days
risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	Tier 1 ($5.10-$12.65)	
risperidone oral tablet dispersible 0.25 mg, 0.5 mg	Tier 1 ($5.10-$12.65)	ST; QL; 90 tabs every 30 days
risperidone oral tablet dispersible 1 mg, 2 mg, 3 mg	Tier 1 ($5.10-$12.65)	ST; QL; 60 tabs every 30 days
risperidone oral tablet dispersible 4 mg	Tier 1 ($5.10-$12.65)	ST; QL; 120 tabs every 30 days
SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR	Tier 1 ($5.10-$12.65)	QL; 30 patches every 30 days
thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	
trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	
VERSACLOZ ORAL SUSPENSION 50 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 600 mL every 30 days
VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 3 MG, 4.5 MG, 6 MG	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
VRAYLAR ORAL CAPSULE 1.5 MG	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
ziprasidone mesylate intramuscular solution reconstituted 20 mg	Tier 1 ($5.10-$12.65)	QL; 6 injections every 3 days
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG, 300 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 vials every 28 days
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 405 MG	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 28 days
Antiseizure Agents		
APTIOM ORAL TABLET 200 MG, 400 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
APTIOM ORAL TABLET 600 MG, 800 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
brivaracetam oral solution 10 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 600 mL every 30 days
brivaracetam oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
BRIVIACT ORAL SOLUTION 10 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 600 mL every 30 days
BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg	Tier 1 ($5.10-$12.65)	
carbamazepine oral suspension 100 mg/5ml	Tier 1 ($5.10-$12.65)	
carbamazepine oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
carbamazepine oral tablet chewable 100 mg, 200 mg	Tier 1 ($5.10-$12.65)	
clobazam oral suspension 2.5 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 480 mL every 30 days
clobazam oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
clonazepam oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
clonazepam oral tablet 2 mg	Tier 1 ($5.10-$12.65)	QL; 300 tabs every 30 days
clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
clonazepam oral tablet dispersible 2 mg	Tier 1 ($5.10-$12.65)	QL; 300 tabs every 30 days
clorazepate dipotassium oral tablet 15 mg, 3.75 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
DIACOMIT ORAL CAPSULE 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 360 caps every 30 days
DIACOMIT ORAL CAPSULE 500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
DIACOMIT ORAL PACKET 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 360 packets every 30 days
DIACOMIT ORAL PACKET 500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 packets every 30 days
diazepam injection solution 5 mg/ml	Tier 1 ($5.10-$12.65)	
DIAZEPAM INTENSOL ORAL CONCENTRATE 5 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 240 mL every 30 days
diazepam oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 1200 mL every 30 days
diazepam oral tablet 10 mg, 2 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
diazepam rectal gel 10 mg, 2.5 mg, 20 mg	Tier 1 ($5.10-$12.65)	
DILANTIN ORAL CAPSULE 30 MG	Tier 1 ($5.10-$12.65)	
divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
divalproex sodium oral capsule delayed release sprinkle 125 mg	Tier 1 ($5.10-$12.65)	
divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
EPIDIOLEX ORAL SOLUTION 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 600 mL every 30 days
eslicarbazepine acetate oral tablet 200 mg, 400 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
eslicarbazepine acetate oral tablet 600 mg, 800 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
ethosuximide oral capsule 250 mg	Tier 1 ($5.10-$12.65)	
ethosuximide oral solution 250 mg/5ml	Tier 1 ($5.10-$12.65)	
felbamate oral suspension 600 mg/5ml	Tier 1 ($5.10-$12.65)	
felbamate oral tablet 400 mg, 600 mg	Tier 1 ($5.10-$12.65)	
FINTEPLA ORAL SOLUTION 2.2 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 360 mL every 30 days
FYCOMPA ORAL SUSPENSION 0.5 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 680 mL every 28 days
FYCOMPA ORAL TABLET 10 MG, 12 MG, 4 MG, 6 MG, 8 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
FYCOMPA ORAL TABLET 2 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
gabapentin oral capsule 100 mg, 300 mg	Tier 1 ($5.10-$12.65)	QL; 360 caps every 30 days
gabapentin oral capsule 400 mg	Tier 1 ($5.10-$12.65)	QL; 270 caps every 30 days
gabapentin oral solution 250 mg/5ml, 300 mg/6ml	Tier 1 ($5.10-$12.65)	QL; 2160 mL every 30 days
gabapentin oral tablet 600 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
gabapentin oral tablet 800 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
lacosamide intravenous solution 200 mg/20ml	Tier 1 ($5.10-$12.65)	
lacosamide oral solution 10 mg/ml	Tier 1 ($5.10-$12.65)	QL; 1200 mL every 30 days
lacosamide oral tablet 100 mg, 150 mg, 200 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
lacosamide oral tablet 50 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	Tier 1 ($5.10-$12.65)	ST
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	Tier 1 ($5.10-$12.65)	
lamotrigine oral tablet chewable 25 mg, 5 mg	Tier 1 ($5.10-$12.65)	
levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
levetiracetam in nacl intravenous solution 1000 mg/100ml, 1500 mg/100ml, 500 mg/100ml	Tier 1 ($5.10-$12.65)	
levetiracetam intravenous solution 500 mg/5ml	Tier 1 ($5.10-$12.65)	
levetiracetam oral solution 100 mg/ml	Tier 1 ($5.10-$12.65)	
levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg	Tier 1 ($5.10-$12.65)	
levetiracetam oral tablet disintegrating soluble 250 mg	Tier 1 ($5.10-$12.65)	QL; 360 tabs every 30 days
levetiracetam oral tablet disintegrating soluble 500 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
methsuximide oral capsule 300 mg	Tier 1 ($5.10-$12.65)	
NAYZILAM NASAL SOLUTION 5 MG/0.1ML	Tier 1 ($5.10-$12.65)	QL; 10 nasal units every 30 days
oxcarbazepine oral suspension 300 mg/5ml	Tier 1 ($5.10-$12.65)	
oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	Tier 1 ($5.10-$12.65)	
perampanel oral suspension 0.5 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 680 mL every 28 days
perampanel oral tablet 10 mg, 12 mg, 4 mg, 6 mg, 8 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
perampanel oral tablet 2 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
phenobarbital oral elixir 20 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 1500 mL every 30 days
phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml	Tier 1 ($5.10-$12.65)	PA
PHENYTEK ORAL CAPSULE 200 MG, 300 MG	Tier 1 ($5.10-$12.65)	
phenytoin oral suspension 125 mg/5ml	Tier 1 ($5.10-$12.65)	
phenytoin oral tablet chewable 50 mg	Tier 1 ($5.10-$12.65)	
phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg	Tier 1 ($5.10-$12.65)	
phenytoin sodium injection solution 50 mg/ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
pregabalin oral capsule 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
pregabalin oral capsule 200 mg	Tier 1 ($5.10-$12.65)	QL; 90 caps every 30 days
pregabalin oral capsule 225 mg, 300 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
pregabalin oral solution 20 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 900 mL every 30 days
primidone oral tablet 125 mg, 250 mg, 50 mg	Tier 1 ($5.10-$12.65)	
RELGAABI ORAL CAPSULE 300 MG	Tier 1 ($5.10-$12.65)	QL; 360 caps every 30 days
RELGAABI ORAL CAPSULE 400 MG	Tier 1 ($5.10-$12.65)	QL; 270 caps every 30 days
ROWEEPRA ORAL TABLET 500 MG	Tier 1 ($5.10-$12.65)	
rufinamide oral suspension 40 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 2400 mL every 30 days
rufinamide oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 480 tabs every 30 days
rufinamide oral tablet 400 mg	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 1000 MG	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG	Tier 1 ($5.10-$12.65)	QL; 360 tabs every 30 days
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 500 MG	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 750 MG	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
SUBVENITE ORAL SUSPENSION 10 MG/ML	Tier 1 ($5.10-$12.65)	ST
SUBVENITE ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG	Tier 1 ($5.10-$12.65)	
SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 films every 30 days
tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	
topiramate oral capsule sprinkle 15 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
topiramate oral solution 25 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 480 mL every 30 days
topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
valproate sodium intravenous solution 100 mg/ml	Tier 1 ($5.10-$12.65)	
valproic acid oral capsule 250 mg	Tier 1 ($5.10-$12.65)	
valproic acid oral solution 250 mg/5ml	Tier 1 ($5.10-$12.65)	
VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML	Tier 1 ($5.10-$12.65)	QL; 10 blister packs every 30 days
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 2 X 7.5 MG/0.1ML	Tier 1 ($5.10-$12.65)	QL; 10 blister packs every 30 days
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 2 X 10 MG/0.1ML	Tier 1 ($5.10-$12.65)	QL; 10 blister packs every 30 days
VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML	Tier 1 ($5.10-$12.65)	QL; 10 blister packs every 30 days
vigabatrin oral packet 500 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 packets every 30 days
vigabatrin oral tablet 500 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
VIGADRONE ORAL PACKET 500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 packets every 30 days
VIGADRONE ORAL TABLET 500 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
VIGAFYDE ORAL SOLUTION 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 900 mL every 30 days

Drug Name	Drug Tier	Requirements/Limits
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK 100 & 150 MG	Tier 1 ($5.10-$12.65)	QL; 56 tabs every 28 days
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK 150 & 200 MG	Tier 1 ($5.10-$12.65)	QL; 56 tabs every 28 days
XCOPRI ORAL TABLET 100 MG, 25 MG, 50 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
XCOPRI ORAL TABLET 150 MG, 200 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG	Tier 1 ($5.10-$12.65)	QL; 28 tabs every 28 days
ZONISADE ORAL SUSPENSION 100 MG/5ML	Tier 1 ($5.10-$12.65)	PA; QL; 900 mL every 30 days
zonisamide oral capsule 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
ZTALMY ORAL SUSPENSION 50 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1100 mL every 30 days
Attention Deficit Hyperactivity Disorder		
amphetamine-dextroamphet er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 30 mg, 5 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
amphetamine-dextroamphetamine oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
atomoxetine hcl oral capsule 100 mg, 60 mg, 80 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
atomoxetine hcl oral capsule 40 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
dexmethylphenidate hcl oral tablet 10 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
dexmethylphenidate hcl oral tablet 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
guanfacine hcl er oral tablet extended release 24 hour 3 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
methylphenidate hcl er oral tablet extended release 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
methylphenidate hcl oral solution 10 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 900 mL every 30 days
methylphenidate hcl oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	PA; QL; 1800 mL every 30 days
methylphenidate hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
methylphenidate hcl oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
methylphenidate hcl oral tablet chewable 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 180 tabs every 30 days
Hypnotics		
DAYVIGO ORAL TABLET 10 MG, 5 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
doxepin hcl oral tablet 3 mg, 6 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
eszopiclone oral tablet 1 mg, 2 mg, 3 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
ramelteon oral tablet 8 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
tasimelteon oral capsule 20 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
temazepam oral capsule 15 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
temazepam oral capsule 30 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days

Drug Name	Drug Tier	Requirements/Limits
zaleplon oral capsule 10 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
zaleplon oral capsule 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
zolpidem tartrate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
Migraine		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML, 70 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 30 days
dihydroergotamine mesylate nasal solution 4 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 8 mL every 30 days
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 3 syringes every 30 days
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 pens every 30 days
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 30 days
ergotamine-caffeine oral tablet 1-100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 40 tabs every 28 days
naratriptan hcl oral tablet 1 mg, 2.5 mg	Tier 1 ($5.10-$12.65)	QL; 12 tabs every 30 days
NURTEC ORAL TABLET DISPERSIBLE 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 16 tabs every 30 days
QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
rizatriptan benzoate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 18 tabs every 30 days
rizatriptan benzoate oral tablet dispersible 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 18 tabs every 30 days
sumatriptan nasal solution 20 mg/act	Tier 1 ($5.10-$12.65)	QL; 12 units every 30 days
sumatriptan nasal solution 5 mg/act	Tier 1 ($5.10-$12.65)	QL; 24 units every 30 days
sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 12 tabs every 30 days
sumatriptan succinate subcutaneous solution 6 mg/0.5ml	Tier 1 ($5.10-$12.65)	QL; 12 injections every 30 days
sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml	Tier 1 ($5.10-$12.65)	QL; 12 injections every 30 days
UBRELVY ORAL TABLET 100 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 16 tabs every 30 days
Miscellaneous		
AUSTEDO ORAL TABLET 12 MG, 9 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
AUSTEDO ORAL TABLET 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 18 MG, 30 MG, 36 MG, 42 MG, 48 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 24 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 packs every year
dextromethorphan-quinidine oral capsule 20-10 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days

Drug Name	Drug Tier	Requirements/Limits
lithium carbonate er oral tablet extended release 300 mg, 450 mg	Tier 1 ($5.10-$12.65)	
lithium carbonate oral capsule 150 mg, 300 mg, 600 mg	Tier 1 ($5.10-$12.65)	
lithium carbonate oral tablet 300 mg	Tier 1 ($5.10-$12.65)	
lithium oral solution 8 meq/5ml	Tier 1 ($5.10-$12.65)	
NUEDEXTA ORAL CAPSULE 20-10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
pyridostigmine bromide oral tablet 60 mg	Tier 1 ($5.10-$12.65)	
riluzole oral tablet 50 mg	Tier 1 ($5.10-$12.65)	
tetrabenazine oral tablet 12.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
tetrabenazine oral tablet 25 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
Multiple Sclerosis Agents		
BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG	Tier 1 ($5.10-$12.65)	PA; QL; 120 caps every 30 days
BETASERON SUBCUTANEOUS KIT 0.3 MG	Tier 1 ($5.10-$12.65)	PA; QL; 14 kits every 28 days
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 30 syringes every 30 days
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 12 syringes every 28 days
dalfampridine er oral tablet extended release 12 hour 10 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
fingolimod hcl oral capsule 0.5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 caps every 30 days
glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 30 syringes every 30 days
glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 12 syringes every 28 days
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 30 syringes every 30 days
GLATOPA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 12 syringes every 28 days
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML	Tier 1 ($5.10-$12.65)	PA; QL; 16 pens every 365 days
Musculoskeletal Therapy Agents		
baclofen oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	
baclofen oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
carisoprodol oral tablet 350 mg	Tier 1 ($5.10-$12.65)	PA; QL; 120 tabs every 30 days
cyclobenzaprine hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
methocarbamol oral tablet 500 mg	Tier 1 ($5.10-$12.65)	PA; QL; 360 tabs every 30 days
methocarbamol oral tablet 750 mg	Tier 1 ($5.10-$12.65)	PA; QL; 240 tabs every 30 days
tizanidine hcl oral tablet 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	
Narcolepsy/Cataplexy		
armodafinil oral tablet 150 mg, 200 mg, 250 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
armodafinil oral tablet 50 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
modafinil oral tablet 100 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
modafinil oral tablet 200 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
sodium oxybate oral solution 500 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 540 mL every 30 days
Psychotherapeutic-Misc		
acamprosate calcium oral tablet delayed release 333 mg	Tier 1 ($5.10-$12.65)	
buprenorphine hcl sublingual tablet sublingual 2 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
buprenorphine hcl sublingual tablet sublingual 8 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 4-1 mg	Tier 1 ($5.10-$12.65)	QL; 90 films every 30 days
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	Tier 1 ($5.10-$12.65)	QL; 180 films every 30 days
buprenorphine hcl-naloxone hcl sublingual film 8-2 mg	Tier 1 ($5.10-$12.65)	QL; 120 films every 30 days
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	Tier 1 ($5.10-$12.65)	QL; 180 tabs every 30 days
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
disulfiram oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
KLOXXADO NASAL LIQUID 8 MG/0.1ML	Tier 1 ($5.10-$12.65)	
naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml	Tier 1 ($5.10-$12.65)	
naloxone hcl injection solution cartridge 0.4 mg/ml	Tier 1 ($5.10-$12.65)	
naloxone hcl injection solution prefilled syringe 0.4 mg/ml, 2 mg/2ml	Tier 1 ($5.10-$12.65)	
naltrexone hcl oral tablet 50 mg	Tier 1 ($5.10-$12.65)	
NICOTROL NS NASAL SOLUTION 10 MG/ML	Tier 1 ($5.10-$12.65)	
varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42	Tier 1 ($5.10-$12.65)	QL; 2 packs every year
varenicline tartrate oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	QL; 56 tabs every 28 days
varenicline tartrate(continue) oral tablet 1 mg	Tier 1 ($5.10-$12.65)	QL; 56 tabs every 28 days
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG	Tier 1 ($5.10-$12.65)	
ENDOCRINE AND METABOLIC		
Androgens		
danazol oral capsule 100 mg, 200 mg, 50 mg	Tier 1 ($5.10-$12.65)	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML, 200 MG/ML	Tier 1 ($5.10-$12.65)	PA
testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml, 200 mg/ml (1 ml)	Tier 1 ($5.10-$12.65)	PA
testosterone enanthate intramuscular solution 200 mg/ml	Tier 1 ($5.10-$12.65)	PA
testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)	Tier 1 ($5.10-$12.65)	PA; QL; 300 gm every 30 days
testosterone transdermal gel 20.25 mg/act (1.62%)	Tier 1 ($5.10-$12.65)	PA; QL; 150 gm every 30 days

Drug Name	Drug Tier	Requirements/Limits
Antidiabetics, Insulins		
ADMELOG INJECTION SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
ASSURE ID INSULIN SAFETY SYR 29G X 1/2" 1 ML	Tier 1 ($5.10-$12.65)	PA
CEQUR SIMPL EXT WEAR INSERTER	Tier 1 ($5.10-$12.65)	PA; QL; 2 inserters every year
CEQUR SIMPLICITY 1U EXTND WEAR DEVICE	Tier 1 ($5.10-$12.65)	PA; QL; 8 patches every 24 days
CEQUR SIMPLICITY 2U DEVICE	Tier 1 ($5.10-$12.65)	PA; QL; 10 patches every 30 days
CEQUR SIMPLICITY 2U DEVICE	Tier 1 ($5.10-$12.65)	PA; QL; 8 patches every 24 days
CEQUR SIMPLICITY 2U EXTND WEAR DEVICE	Tier 1 ($5.10-$12.65)	PA; QL; 10 patches every 30 days
CEQUR SIMPLICITY INSERTER	Tier 1 ($5.10-$12.65)	PA; QL; 2 inserters every year
COMFORT ASSIST INSULIN SYRINGE 29G X 1/2" 1 ML	Tier 1 ($5.10-$12.65)	PA
cvs gauze sterile pad 2"x2"	Tier 1 ($5.10-$12.65)	PA
EXEL COMFORT POINT PEN NEEDLE 29G X 12MM	Tier 1 ($5.10-$12.65)	PA
FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
FIASP INJECTION SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
global alcohol prep ease pad 70 %	Tier 1 ($5.10-$12.65)	PA
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML	Tier 1 ($5.10-$12.65)	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
LANTUS SUBCUTANEOUS SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN N SUBCUTANEOUS SUSPENSION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLIN R INJECTION SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLOG INJECTION SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D

Drug Name	Drug Tier	Requirements/Limits
NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLOG MIX 70/30 SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML	Tier 1 ($5.10-$12.65)	
NOVOLOG RELION INJECTION SOLUTION 100 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT	Tier 1 ($5.10-$12.65)	PA; QL; 1 kit every year
OMNIPOD 5 DEXG7G6 PODS GEN 5	Tier 1 ($5.10-$12.65)	PA; QL; 15 pods every 30 days
OMNIPOD 5 LIBRE INTRO KIT	Tier 1 ($5.10-$12.65)	PA; QL; 1 kit every year
OMNIPOD 5 LIBRE PODS	Tier 1 ($5.10-$12.65)	PA; QL; 15 pods every 30 days
OMNIPOD DASH INTRO (GEN 4) KIT	Tier 1 ($5.10-$12.65)	PA; QL; 1 kit every year
OMNIPOD DASH PODS (GEN 4)	Tier 1 ($5.10-$12.65)	PA; QL; 15 pods every 30 days
preferred plus insulin syringe 28g x 1/2" 0.5 ml	Tier 1 ($5.10-$12.65)	PA
RELI-ON INSULIN SYRINGE 29G 0.3 ML	Tier 1 ($5.10-$12.65)	PA
SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML	Tier 1 ($5.10-$12.65)	QL; 5 pens every 25 days
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	Tier 1 ($5.10-$12.65)	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML	Tier 1 ($5.10-$12.65)	
XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML	Tier 1 ($5.10-$12.65)	QL; 5 pens every 30 days
Antidiabetics		
acarbose oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	
dapagliflozin oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
dapagliflozin-metformin hcl er oral tablet extended release 24 hour 10-1000 mg, 10-500 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
dapagliflozin-metformin hcl er oral tablet extended release 24 hour 5-1000 mg, 5-500 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
FARXIGA ORAL TABLET 10 MG, 5 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
glimepiride oral tablet 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
glimepiride oral tablet 4 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
glipizide er oral tablet extended release 24 hour 10 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
glipizide er oral tablet extended release 24 hour 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
glipizide oral tablet 10 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
glipizide oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
glipizide-metformin hcl oral tablet 2.5-250 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
glipizide-metformin hcl oral tablet 2.5-500 mg, 5-500 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
JANUMET ORAL TABLET 50-1000 MG, 50-500 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 50-1000 MG, 50-500 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
JARDIANCE ORAL TABLET 10 MG, 25 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 5-1000 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
metformin hcl er oral tablet extended release 24 hour 500 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
metformin hcl er oral tablet extended release 24 hour 750 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
metformin hcl oral tablet 1000 mg	Tier 1 ($5.10-$12.65)	QL; 75 tabs every 30 days
metformin hcl oral tablet 500 mg	Tier 1 ($5.10-$12.65)	QL; 150 tabs every 30 days
metformin hcl oral tablet 850 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
nateglinide oral tablet 120 mg, 60 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 4 MG/3ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
OZEMPIC (2 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR 8 MG/3ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
repaglinide oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
repaglinide oral tablet 2 mg	Tier 1 ($5.10-$12.65)	QL; 240 tabs every 30 days
RYBELSUS ORAL TABLET 14 MG, 3 MG, 7 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
sitaglip phos-metformin hcl er oral tablet extended release 24 hour 100-1000 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
sitaglip phos-metformin hcl er oral tablet extended release 24 hour 50-1000 mg, 50-500 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
sitagliptin phos-metformin hcl oral tablet 50-1000 mg, 50-500 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
sitagliptin phosphate oral tablet 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
TRADJENTA ORAL TABLET 5 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days

Drug Name	Drug Tier	Requirements/Limits
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 25-5-1000 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5-2.5-1000 MG, 5-2.5-1000 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
TRULICITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG, 5-500 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
Calcium Regulators		
alendronate sodium oral solution 70 mg/75ml	Tier 1 ($5.10-$12.65)	ST
alendronate sodium oral tablet 10 mg, 35 mg, 70 mg	Tier 1 ($5.10-$12.65)	
BILDYOS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 180 days
BONSITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
calcitonin (salmon) nasal solution 200 unit/act	Tier 1 ($5.10-$12.65)	B/D
ibandronate sodium oral tablet 150 mg	Tier 1 ($5.10-$12.65)	B/D
OSPOMYV SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 180 days
pamidronate disodium intravenous solution 30 mg/10ml, 6 mg/ml, 90 mg/10ml	Tier 1 ($5.10-$12.65)	B/D
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML	Tier 1 ($5.10-$12.65)	QL; 1 syringe every 180 days
risedronate sodium oral tablet 150 mg, 35 mg, 35 mg (12 pack), 35 mg (4 pack), 5 mg	Tier 1 ($5.10-$12.65)	
risedronate sodium oral tablet delayed release 35 mg	Tier 1 ($5.10-$12.65)	ST
teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 30 days
WYOST SUBCUTANEOUS SOLUTION 120 MG/1.7ML	Tier 1 ($5.10-$12.65)	PA
XTRENBO SUBCUTANEOUS SOLUTION 120 MG/1.7ML	Tier 1 ($5.10-$12.65)	PA
zoledronic acid intravenous concentrate 4 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
zoledronic acid intravenous solution 5 mg/100ml	Tier 1 ($5.10-$12.65)	B/D
Chelating Agents		
CHEMET ORAL CAPSULE 100 MG	Tier 1 ($5.10-$12.65)	
deferasirox oral tablet 180 mg, 360 mg, 90 mg	Tier 1 ($5.10-$12.65)	PA
deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	PA
KIONEX COMBINATION SUSPENSION 15 GM/60ML	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
LOKELMA ORAL PACKET 10 GM, 5 GM	Tier 1 ($5.10-$12.65)	
penicillamine oral tablet 250 mg	Tier 1 ($5.10-$12.65)	
sodium polystyrene sulfonate combination suspension 15 gm/60ml	Tier 1 ($5.10-$12.65)	
sodium polystyrene sulfonate oral powder	Tier 1 ($5.10-$12.65)	
SPS (SODIUM POLYSTYRENE SULF) COMBINATION SUSPENSION 15 GM/60ML	Tier 1 ($5.10-$12.65)	
SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION 30 GM/120ML	Tier 1 ($5.10-$12.65)	
trientine hcl oral capsule 250 mg	Tier 1 ($5.10-$12.65)	PA
Contraceptives		
AFIRMELLE ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
ALTAVERA ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
alyacen 1/35 oral tablet 1-35 mg-mcg	Tier 1 ($5.10-$12.65)	
alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg	Tier 1 ($5.10-$12.65)	
AMETHYST ORAL TABLET 90-20 MCG	Tier 1 ($5.10-$12.65)	
APRI ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
ARANELLE ORAL TABLET 0.5/1/0.5-35 MG-MCG	Tier 1 ($5.10-$12.65)	
ASHLYNA ORAL TABLET 0.15-0.03 &0.01 MG	Tier 1 ($5.10-$12.65)	
AUBRA EQ ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
AUROVELA 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
AUROVELA 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
AUROVELA FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
AUROVELA FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
AVIANE ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
AYUNA ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
AZURETTE ORAL TABLET 0.15-0.02/0.01 MG (21/5)	Tier 1 ($5.10-$12.65)	
BALZIVA ORAL TABLET 0.4-35 MG-MCG	Tier 1 ($5.10-$12.65)	
BLISOVI 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
BLISOVI FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
BLISOVI FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
briellyn oral tablet 0.4-35 mg-mcg	Tier 1 ($5.10-$12.65)	
CAMILA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
CAMRESE LO ORAL TABLET 0.1-0.02 & 0.01 MG	Tier 1 ($5.10-$12.65)	
CAMRESE ORAL TABLET 0.15-0.03 &0.01 MG	Tier 1 ($5.10-$12.65)	
CHATEAL EQ ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
CRYSELLE ORAL TABLET 0.3-30 MG-MCG	Tier 1 ($5.10-$12.65)	
CYRED EQ ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
DASETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
DASETTA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
DAYSEE ORAL TABLET 0.15-0.03 &0.01 MG	Tier 1 ($5.10-$12.65)	
DEBLITANE ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML	Tier 1 ($5.10-$12.65)	
desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)	Tier 1 ($5.10-$12.65)	
DOLISHALE ORAL TABLET 90-20 MCG	Tier 1 ($5.10-$12.65)	
drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg, 3-0.03-0.451 mg	Tier 1 ($5.10-$12.65)	
drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg	Tier 1 ($5.10-$12.65)	
ELINEST ORAL TABLET 0.3-30 MG-MCG	Tier 1 ($5.10-$12.65)	
ELURYNG VAGINAL RING 0.12-0.015 MG/24HR	Tier 1 ($5.10-$12.65)	
EMZAHH ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
ENILLORING VAGINAL RING 0.12-0.015 MG/24HR	Tier 1 ($5.10-$12.65)	
ENSKYCE ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
ERRIN ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
ESTARYLLA ORAL TABLET 0.25-35 MG-MCG	Tier 1 ($5.10-$12.65)	
ethynodiol diac-eth estradiol oral tablet 1-50 mg-mcg	Tier 1 ($5.10-$12.65)	
etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr	Tier 1 ($5.10-$12.65)	
FALMINA ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
FEIRZA 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
FEIRZA 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
FINZALA ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
GALBRIELA ORAL TABLET CHEWABLE 0.8-25 MG-MCG	Tier 1 ($5.10-$12.65)	
HAILEY 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
HAILEY 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
HAILEY FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
HEATHER ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
ICLEVIA ORAL TABLET 0.15-0.03 MG	Tier 1 ($5.10-$12.65)	
INCASSIA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
INTROVALE ORAL TABLET 0.15-0.03 MG	Tier 1 ($5.10-$12.65)	
ISIBLOOM ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
JAIMIESS ORAL TABLET 0.15-0.03 &0.01 MG	Tier 1 ($5.10-$12.65)	
JASMIEL ORAL TABLET 3-0.02 MG	Tier 1 ($5.10-$12.65)	
JENCYCLA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
JOLESSA ORAL TABLET 0.15-0.03 MG	Tier 1 ($5.10-$12.65)	
JULEBER ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
JUNEL 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
JUNEL 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
JUNEL FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
JUNEL FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
JUNEL FE 24 ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
KAITLIB FE ORAL TABLET CHEWABLE 0.8-25 MG-MCG	Tier 1 ($5.10-$12.65)	
KARIVA ORAL TABLET 0.15-0.02/0.01 MG (21/5)	Tier 1 ($5.10-$12.65)	
KELNOR 1/35 ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
KURVELO ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LARIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LARIN 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LARIN 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
LARIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LARIN FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LESSINA ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LEVONEST ORAL TABLET 50-30/75-40/ 125-30 MCG	Tier 1 ($5.10-$12.65)	
levonorgest-eth est & eth est oral tablet 42-21-21-7 days	Tier 1 ($5.10-$12.65)	
levonorgest-eth estrad 91-day oral tablet 0.1-0.02 & 0.01 mg, 0.15-0.03 mg	Tier 1 ($5.10-$12.65)	
levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 90-20 mcg	Tier 1 ($5.10-$12.65)	
levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg	Tier 1 ($5.10-$12.65)	
LEVORA 0.15/30 (28) ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY	Tier 1 ($5.10-$12.65)	
LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LOESTRIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LOESTRIN FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LOJAIMIESS ORAL TABLET 0.1-0.02 & 0.01 MG	Tier 1 ($5.10-$12.65)	
LORYNA ORAL TABLET 3-0.02 MG	Tier 1 ($5.10-$12.65)	
LOW-OGESTREL ORAL TABLET 0.3-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LUIZZA 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
LUIZZA 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LUTERA ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
LYLEQ ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
LYZA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
marlissa oral tablet 0.15-30 mg-mcg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
medroxyprogesterone acetate intramuscular suspension 150 mg/ml	Tier 1 ($5.10-$12.65)	
medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml	Tier 1 ($5.10-$12.65)	
MELEYA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
MIBELAS 24 FE ORAL TABLET CHEWABLE 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
MICROGESTIN 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
MICROGESTIN 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
MICROGESTIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG	Tier 1 ($5.10-$12.65)	
MICROGESTIN FE 1/20 ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
MILI ORAL TABLET 0.25-35 MG-MCG	Tier 1 ($5.10-$12.65)	
MONO-LINYAH ORAL TABLET 0.25-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NEXPLANON SUBCUTANEOUS IMPLANT 68 MG	Tier 1 ($5.10-$12.65)	
NIKKI ORAL TABLET 3-0.02 MG	Tier 1 ($5.10-$12.65)	
NORA-BE ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
norelgestromin-eth estradiol transdermal patch weekly 150-35 mcg/24hr	Tier 1 ($5.10-$12.65)	
norethin ace-eth estrad-fe oral tablet 1-20 mg-mcg	Tier 1 ($5.10-$12.65)	
norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24)	Tier 1 ($5.10-$12.65)	
norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg	Tier 1 ($5.10-$12.65)	
norethindrone oral tablet 0.35 mg	Tier 1 ($5.10-$12.65)	
norethindron-ethinyl estrad-fe oral tablet 1-20/1-30/1-35 mg-mcg	Tier 1 ($5.10-$12.65)	
norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg	Tier 1 ($5.10-$12.65)	
norgestim-eth estrad triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg	Tier 1 ($5.10-$12.65)	
NORLYROC ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NORTREL 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NYLIA 1/35 ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
NYLIA 7/7/7 ORAL TABLET 0.5/0.75/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
ORQUIDEA ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
PHILITH ORAL TABLET 0.4-35 MG-MCG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
PIMTREA ORAL TABLET 0.15-0.02/0.01 MG (21/5)	Tier 1 ($5.10-$12.65)	
PORTIA-28 ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
RECLIPSEN ORAL TABLET 0.15-30 MG-MCG	Tier 1 ($5.10-$12.65)	
RIVELSA ORAL TABLET 42-21-21-7 DAYS	Tier 1 ($5.10-$12.65)	
ROSYRAH ORAL TABLET 42-21-21-7 DAYS	Tier 1 ($5.10-$12.65)	
SETLAKIN ORAL TABLET 0.15-0.03 MG	Tier 1 ($5.10-$12.65)	
SHAROBEL ORAL TABLET 0.35 MG	Tier 1 ($5.10-$12.65)	
SIMLIYA ORAL TABLET 0.15-0.02/0.01 MG (21/5)	Tier 1 ($5.10-$12.65)	
SIMPESSE ORAL TABLET 0.15-0.03 &0.01 MG	Tier 1 ($5.10-$12.65)	
SPRINTEC 28 ORAL TABLET 0.25-35 MG-MCG	Tier 1 ($5.10-$12.65)	
SRONYX ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
SYEDA ORAL TABLET 3-0.03 MG	Tier 1 ($5.10-$12.65)	
TARINA 24 FE ORAL TABLET 1-20 MG-MCG(24)	Tier 1 ($5.10-$12.65)	
TARINA FE 1/20 EQ ORAL TABLET 1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
TILIA FE ORAL TABLET 1-20/1-30/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG	Tier 1 ($5.10-$12.65)	
TRI-LEGEST FE ORAL TABLET 1-20/1-30/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-35 MCG	Tier 1 ($5.10-$12.65)	
TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1 ($5.10-$12.65)	
TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1 ($5.10-$12.65)	
TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1 ($5.10-$12.65)	
TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1 ($5.10-$12.65)	
TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-35 MCG	Tier 1 ($5.10-$12.65)	
TRI-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-35 MCG	Tier 1 ($5.10-$12.65)	
TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1 ($5.10-$12.65)	
TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG	Tier 1 ($5.10-$12.65)	
TURQOZ ORAL TABLET 0.3-30 MG-MCG	Tier 1 ($5.10-$12.65)	
TYDEMY ORAL TABLET 3-0.03-0.451 MG	Tier 1 ($5.10-$12.65)	
VALTYA 1/35 ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
VALTYA 1/50 ORAL TABLET 1-50 MG-MCG	Tier 1 ($5.10-$12.65)	
VELIVET ORAL TABLET 0.1/0.125/0.15 -0.025 MG	Tier 1 ($5.10-$12.65)	
VESTURA ORAL TABLET 3-0.02 MG	Tier 1 ($5.10-$12.65)	
VIENVA ORAL TABLET 0.1-20 MG-MCG	Tier 1 ($5.10-$12.65)	
viorele oral tablet 0.15-0.02/0.01 mg (21/5)	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
VYFEMLA ORAL TABLET 0.4-35 MG-MCG	Tier 1 ($5.10-$12.65)	
VYLIBRA ORAL TABLET 0.25-35 MG-MCG	Tier 1 ($5.10-$12.65)	
WERA ORAL TABLET 0.5-35 MG-MCG	Tier 1 ($5.10-$12.65)	
WYMZYA FE ORAL TABLET CHEWABLE 0.4-35 MG-MCG	Tier 1 ($5.10-$12.65)	
XARAH FE ORAL TABLET 1-20/1-30/1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
XELRIA FE ORAL TABLET CHEWABLE 0.4-35 MG-MCG	Tier 1 ($5.10-$12.65)	
XULANE TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR	Tier 1 ($5.10-$12.65)	
ZAFEMY TRANSDERMAL PATCH WEEKLY 150-35 MCG/24HR	Tier 1 ($5.10-$12.65)	
ZOVIA 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1 ($5.10-$12.65)	
ZUMANDIMINE ORAL TABLET 3-0.03 MG	Tier 1 ($5.10-$12.65)	
Estrogens		
ABIGALE LO ORAL TABLET 0.5-0.1 MG	Tier 1 ($5.10-$12.65)	
ABIGALE ORAL TABLET 1-0.5 MG	Tier 1 ($5.10-$12.65)	
DOTTI TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	Tier 1 ($5.10-$12.65)	
estradiol oral tablet 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	
estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	Tier 1 ($5.10-$12.65)	
estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr	Tier 1 ($5.10-$12.65)	
estradiol vaginal cream 0.01 %	Tier 1 ($5.10-$12.65)	
estradiol vaginal tablet 10 mcg	Tier 1 ($5.10-$12.65)	
estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml	Tier 1 ($5.10-$12.65)	
estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg	Tier 1 ($5.10-$12.65)	
FYAVOLV ORAL TABLET 0.5-2.5 MG-MCG, 1-5 MG-MCG	Tier 1 ($5.10-$12.65)	
JINTELI ORAL TABLET 1-5 MG-MCG	Tier 1 ($5.10-$12.65)	
LYLLANA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR	Tier 1 ($5.10-$12.65)	
MIMVEY ORAL TABLET 1-0.5 MG	Tier 1 ($5.10-$12.65)	
norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg	Tier 1 ($5.10-$12.65)	
YUVAFEM VAGINAL TABLET 10 MCG	Tier 1 ($5.10-$12.65)	
Glucocorticoids		
DEXAMETHASONE INTENSOL ORAL CONCENTRATE 1 MG/ML	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
dexamethasone oral elixir 0.5 mg/5ml	Tier 1 ($5.10-$12.65)	
dexamethasone oral solution 0.5 mg/5ml	Tier 1 ($5.10-$12.65)	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	Tier 1 ($5.10-$12.65)	
dexamethasone sod phos (pf) injection solution prefilled syringe 10 mg/ml	Tier 1 ($5.10-$12.65)	
dexamethasone sod phosphate pf injection solution 10 mg/ml	Tier 1 ($5.10-$12.65)	
dexamethasone sodium phosphate injection solution 10 mg/ml, 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml	Tier 1 ($5.10-$12.65)	
dexamethasone sodium phosphate injection solution prefilled syringe 4 mg/ml	Tier 1 ($5.10-$12.65)	
fludrocortisone acetate oral tablet 0.1 mg	Tier 1 ($5.10-$12.65)	
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	
hydrocortisone sod suc (pf) injection solution reconstituted 100 mg	Tier 1 ($5.10-$12.65)	
methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml	Tier 1 ($5.10-$12.65)	B/D
methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	B/D
methylprednisolone oral tablet therapy pack 4 mg	Tier 1 ($5.10-$12.65)	
methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg	Tier 1 ($5.10-$12.65)	B/D
prednisolone oral solution 15 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
PREDNISONE INTENSOL ORAL CONCENTRATE 5 MG/ML	Tier 1 ($5.10-$12.65)	B/D
prednisone oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg	Tier 1 ($5.10-$12.65)	B/D
prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48)	Tier 1 ($5.10-$12.65)	
SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 1000 MG, 250 MG, 500 MG	Tier 1 ($5.10-$12.65)	
Glucose Elevating Agents		
diazoxide oral suspension 50 mg/ml	Tier 1 ($5.10-$12.65)	
GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML	Tier 1 ($5.10-$12.65)	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML	Tier 1 ($5.10-$12.65)	
GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML	Tier 1 ($5.10-$12.65)	
ZEGALOGUE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.6 MG/0.6ML	Tier 1 ($5.10-$12.65)	
ZEGALOGUE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 0.6 MG/0.6ML	Tier 1 ($5.10-$12.65)	
Miscellaneous		
ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML	Tier 1 ($5.10-$12.65)	PA
betaine oral powder	Tier 1 ($5.10-$12.65)	
cabergoline oral tablet 0.5 mg	Tier 1 ($5.10-$12.65)	
carglumic acid oral tablet soluble 200 mg	Tier 1 ($5.10-$12.65)	PA
CERDELGA ORAL CAPSULE 84 MG	Tier 1 ($5.10-$12.65)	PA
CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT	Tier 1 ($5.10-$12.65)	PA
cinacalcet hcl oral tablet 30 mg, 60 mg	Tier 1 ($5.10-$12.65)	B/D; QL; 60 tabs every 30 days
cinacalcet hcl oral tablet 90 mg	Tier 1 ($5.10-$12.65)	B/D; QL; 120 tabs every 30 days
CYSTAGON ORAL CAPSULE 150 MG, 50 MG	Tier 1 ($5.10-$12.65)	PA
desmopressin ace spray refrig nasal solution 0.01 %	Tier 1 ($5.10-$12.65)	
desmopressin acetate injection solution 4 mcg/ml	Tier 1 ($5.10-$12.65)	
desmopressin acetate oral tablet 0.1 mg, 0.2 mg	Tier 1 ($5.10-$12.65)	
desmopressin acetate pf injection solution 4 mcg/ml	Tier 1 ($5.10-$12.65)	
desmopressin acetate spray nasal solution 0.01 %	Tier 1 ($5.10-$12.65)	
FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA
GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG	Tier 1 ($5.10-$12.65)	PA
GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA
INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML	Tier 1 ($5.10-$12.65)	PA
JAVYGTOR ORAL PACKET 100 MG, 500 MG	Tier 1 ($5.10-$12.65)	PA
JAVYGTOR ORAL TABLET 100 MG	Tier 1 ($5.10-$12.65)	PA
lanreotide acetate subcutaneous solution 120 mg/0.5ml	Tier 1 ($5.10-$12.65)	PA
levocarnitine oral solution 1 gm/10ml	Tier 1 ($5.10-$12.65)	B/D
levocarnitine oral tablet 330 mg	Tier 1 ($5.10-$12.65)	B/D
LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG	Tier 1 ($5.10-$12.65)	PA
LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG	Tier 1 ($5.10-$12.65)	PA
LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 30 MG	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT 45 MG	Tier 1 ($5.10-$12.65)	PA
mifepristone oral tablet 300 mg	Tier 1 ($5.10-$12.65)	PA
NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML	Tier 1 ($5.10-$12.65)	PA
nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA
octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml	Tier 1 ($5.10-$12.65)	PA
octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml, 500 mcg/ml	Tier 1 ($5.10-$12.65)	PA
raloxifene hcl oral tablet 60 mg	Tier 1 ($5.10-$12.65)	
REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5ML	Tier 1 ($5.10-$12.65)	PA
REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
sapropterin dihydrochloride oral packet 100 mg, 500 mg	Tier 1 ($5.10-$12.65)	PA
sapropterin dihydrochloride oral tablet 100 mg	Tier 1 ($5.10-$12.65)	PA
SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML	Tier 1 ($5.10-$12.65)	PA
sodium phenylbutyrate oral powder 3 gm/tsp	Tier 1 ($5.10-$12.65)	PA
sodium phenylbutyrate oral tablet 500 mg	Tier 1 ($5.10-$12.65)	PA
SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 60 MG/0.2ML, 90 MG/0.3ML	Tier 1 ($5.10-$12.65)	PA
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG	Tier 1 ($5.10-$12.65)	PA
SYNAREL NASAL SOLUTION 2 MG/ML	Tier 1 ($5.10-$12.65)	PA
tolvaptan oral tablet 15 mg, 30 mg	Tier 1 ($5.10-$12.65)	PA
tolvaptan oral tablet therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	Tier 1 ($5.10-$12.65)	PA
ZELVYSIA ORAL PACKET 100 MG, 500 MG	Tier 1 ($5.10-$12.65)	PA
Progestins		
GALLIFREY ORAL TABLET 5 MG	Tier 1 ($5.10-$12.65)	
medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
megestrol acetate oral suspension 40 mg/ml	Tier 1 ($5.10-$12.65)	
megestrol acetate oral suspension 625 mg/5ml	Tier 1 ($5.10-$12.65)	PA
norethindrone acetate oral tablet 5 mg	Tier 1 ($5.10-$12.65)	
progesterone oral capsule 100 mg, 200 mg	Tier 1 ($5.10-$12.65)	
Thyroid Agents		
levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	Tier 1 ($5.10-$12.65)	
LEVOXYL ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
LIOMNY ORAL TABLET 25 MCG, 5 MCG, 50 MCG	Tier 1 ($5.10-$12.65)	
liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg	Tier 1 ($5.10-$12.65)	
methimazole oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
propylthiouracil oral tablet 50 mg	Tier 1 ($5.10-$12.65)	
SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 1 ($5.10-$12.65)	
UNITHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 1 ($5.10-$12.65)	
Vitamin D Analogs		
calcitriol oral capsule 0.25 mcg, 0.5 mcg	Tier 1 ($5.10-$12.65)	B/D
calcitriol oral solution 1 mcg/ml	Tier 1 ($5.10-$12.65)	B/D
paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg	Tier 1 ($5.10-$12.65)	B/D
GASTROINTESTINAL		
Antiemetics		
aprepitant oral capsule 125 mg, 40 mg, 80 mg	Tier 1 ($5.10-$12.65)	B/D
aprepitant oral capsule therapy pack 80 & 125 mg	Tier 1 ($5.10-$12.65)	B/D
COMPRO RECTAL SUPPOSITORY 25 MG	Tier 1 ($5.10-$12.65)	
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	B/D; QL; 60 caps every 30 days
granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml	Tier 1 ($5.10-$12.65)	
granisetron hcl oral tablet 1 mg	Tier 1 ($5.10-$12.65)	B/D
meclizine hcl oral tablet 12.5 mg, 25 mg	Tier 1 ($5.10-$12.65)	PA
metoclopramide hcl injection solution 5 mg/ml	Tier 1 ($5.10-$12.65)	
metoclopramide hcl oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	
metoclopramide hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml	Tier 1 ($5.10-$12.65)	
ondansetron hcl injection solution prefilled syringe 4 mg/2ml	Tier 1 ($5.10-$12.65)	
ondansetron hcl oral solution 4 mg/5ml	Tier 1 ($5.10-$12.65)	B/D
ondansetron hcl oral tablet 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	B/D
ondansetron oral tablet dispersible 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	B/D
prochlorperazine edisylate injection solution 10 mg/2ml	Tier 1 ($5.10-$12.65)	
prochlorperazine maleate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
prochlorperazine rectal suppository 25 mg	Tier 1 ($5.10-$12.65)	
promethazine hcl injection solution 25 mg/ml, 50 mg/ml	Tier 1 ($5.10-$12.65)	PA
promethazine hcl oral solution 6.25 mg/5ml	Tier 1 ($5.10-$12.65)	PA
promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA
scopolamine transdermal patch 72 hour 1 mg/3days	Tier 1 ($5.10-$12.65)	QL; 10 patches every 30 days

Drug Name	Drug Tier	Requirements/Limits
Antispasmodics		
dicyclomine hcl oral capsule 10 mg	Tier 1 ($5.10-$12.65)	PA
dicyclomine hcl oral solution 10 mg/5ml	Tier 1 ($5.10-$12.65)	PA
dicyclomine hcl oral tablet 20 mg	Tier 1 ($5.10-$12.65)	PA
glycopyrrolate oral tablet 1 mg	Tier 1 ($5.10-$12.65)	QL; 90 tabs every 30 days
glycopyrrolate oral tablet 2 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
H2-Receptor Antagonists		
famotidine (pf) intravenous solution 20 mg/2ml	Tier 1 ($5.10-$12.65)	
famotidine intravenous solution 200 mg/20ml, 40 mg/4ml	Tier 1 ($5.10-$12.65)	
famotidine oral suspension reconstituted 40 mg/5ml	Tier 1 ($5.10-$12.65)	
famotidine oral tablet 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
famotidine premixed intravenous solution 20-0.9 mg/50ml-%	Tier 1 ($5.10-$12.65)	
nizatidine oral capsule 150 mg, 300 mg	Tier 1 ($5.10-$12.65)	
Inflammatory Bowel Disease		
balsalazide disodium oral capsule 750 mg	Tier 1 ($5.10-$12.65)	
budesonide er oral tablet extended release 24 hour 9 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
budesonide oral capsule delayed release particles 3 mg	Tier 1 ($5.10-$12.65)	QL; 90 caps every 30 days
hydrocortisone rectal enema 100 mg/60ml	Tier 1 ($5.10-$12.65)	
mesalamine er oral capsule extended release 24 hour 0.375 gm	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
mesalamine oral capsule delayed release 400 mg	Tier 1 ($5.10-$12.65)	QL; 180 caps every 30 days
mesalamine oral tablet delayed release 1.2 gm	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
mesalamine rectal enema 4 gm	Tier 1 ($5.10-$12.65)	QL; 1680 mL every 28 days
mesalamine rectal suppository 1000 mg	Tier 1 ($5.10-$12.65)	QL; 30 suppositories every 30 days
mesalamine-cleanser rectal kit 4 gm	Tier 1 ($5.10-$12.65)	QL; 28 bottles every 28 days
sulfasalazine oral tablet 500 mg	Tier 1 ($5.10-$12.65)	
sulfasalazine oral tablet delayed release 500 mg	Tier 1 ($5.10-$12.65)	
Laxatives		
constulose oral solution 10 gm/15ml	Tier 1 ($5.10-$12.65)	
enulose oral solution 10 gm/15ml	Tier 1 ($5.10-$12.65)	
GAVILYTE-C ORAL SOLUTION RECONSTITUTED 240 GM	Tier 1 ($5.10-$12.65)	
GAVILYTE-G ORAL SOLUTION RECONSTITUTED 236 GM	Tier 1 ($5.10-$12.65)	
GAVILYTE-N WITH FLAVOR PACK ORAL SOLUTION RECONSTITUTED 420 GM	Tier 1 ($5.10-$12.65)	
generlac oral solution 10 gm/15ml	Tier 1 ($5.10-$12.65)	
lactulose encephalopathy oral solution 10 gm/15ml	Tier 1 ($5.10-$12.65)	
lactulose oral solution 10 gm/15ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml, 17.5-3.13-1.6 gm/177ml 2 pack (480ml)	Tier 1 ($5.10-$12.65)	
peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm	Tier 1 ($5.10-$12.65)	
peg-3350/electrolytes oral solution reconstituted 236 gm	Tier 1 ($5.10-$12.65)	
PLENVU ORAL SOLUTION RECONSTITUTED 140 GM	Tier 1 ($5.10-$12.65)	
Miscellaneous		
alosetron hcl oral tablet 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT	Tier 1 ($5.10-$12.65)	
cromolyn sodium oral concentrate 100 mg/5ml	Tier 1 ($5.10-$12.65)	
diphenoxylate-atropine oral tablet 2.5-0.025 mg	Tier 1 ($5.10-$12.65)	
GATTEX SUBCUTANEOUS KIT 5 MG	Tier 1 ($5.10-$12.65)	PA
LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
loperamide hcl oral capsule 2 mg	Tier 1 ($5.10-$12.65)	
lubiprostone oral capsule 24 mcg, 8 mcg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
misoprostol oral tablet 100 mcg, 200 mcg	Tier 1 ($5.10-$12.65)	
MOVANTIK ORAL TABLET 12.5 MG, 25 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML	Tier 1 ($5.10-$12.65)	PA; QL; 28 vials every 28 days
RELISTOR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 12 MG/0.6ML, 8 MG/0.4ML	Tier 1 ($5.10-$12.65)	PA; QL; 28 syringes every 28 days
sucralfate oral tablet 1 gm	Tier 1 ($5.10-$12.65)	
ursodiol oral capsule 300 mg	Tier 1 ($5.10-$12.65)	
ursodiol oral tablet 250 mg, 500 mg	Tier 1 ($5.10-$12.65)	
VOQUEZNA DUAL PAK ORAL THERAPY PACK 500-20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 kits every year
VOQUEZNA TRIPLE PAK ORAL THERAPY PACK 500-500-20 MG	Tier 1 ($5.10-$12.65)	PA; QL; 2 kits every year
VOWST ORAL CAPSULE	Tier 1 ($5.10-$12.65)	PA; QL; 12 caps every 30 days
XERMELO ORAL TABLET 250 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
XIFAXAN ORAL TABLET 550 MG	Tier 1 ($5.10-$12.65)	PA
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT	Tier 1 ($5.10-$12.65)	
Proton Pump Inhibitors		
esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	ST; QL; 30 caps every 30 days

Drug Name	Drug Tier	Requirements/Limits
lansoprazole oral capsule delayed release 15 mg, 30 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
pantoprazole sodium intravenous solution reconstituted 40 mg	Tier 1 ($5.10-$12.65)	
pantoprazole sodium oral tablet delayed release 20 mg, 40 mg	Tier 1 ($5.10-$12.65)	
rabeprazole sodium oral tablet delayed release 20 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
GENITOURINARY		
Benign Prostatic Hyperplasia		
alfuzosin hcl er oral tablet extended release 24 hour 10 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
dutasteride oral capsule 0.5 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
dutasteride-tamsulosin hcl oral capsule 0.5-0.4 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
finasteride oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
tadalafil oral tablet 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
tamsulosin hcl oral capsule 0.4 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
Miscellaneous		
acetic acid irrigation solution 0.25 %	Tier 1 ($5.10-$12.65)	
bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg	Tier 1 ($5.10-$12.65)	
potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg)	Tier 1 ($5.10-$12.65)	
Urinary Antispasmodics		
fesoterodine fumarate er oral tablet extended release 24 hour 4 mg, 8 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
GEMTESA ORAL TABLET 75 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML	Tier 1 ($5.10-$12.65)	QL; 300 mL every 28 days
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
oxybutynin chloride er oral tablet extended release 24 hour 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
oxybutynin chloride oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 600 mL every 30 days
oxybutynin chloride oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 120 tabs every 30 days
solifenacin succinate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	QL; 30 caps every 30 days
tolterodine tartrate oral tablet 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
trospium chloride oral tablet 20 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
Vaginal Anti-Infectives		
clindamycin phosphate vaginal cream 2 %	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
metronidazole vaginal gel 0.75 %	Tier 1 ($5.10-$12.65)	
terconazole vaginal cream 0.4 %, 0.8 %	Tier 1 ($5.10-$12.65)	
terconazole vaginal suppository 80 mg	Tier 1 ($5.10-$12.65)	
HEMATOLOGIC		
Anticoagulants		
dabigatran etexilate mesylate oral capsule 110 mg	Tier 1 ($5.10-$12.65)	QL; 120 caps every 30 days
dabigatran etexilate mesylate oral capsule 150 mg, 75 mg	Tier 1 ($5.10-$12.65)	QL; 60 caps every 30 days
ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE 3 X 0.5 MG	Tier 1 ($5.10-$12.65)	QL; 591 tabs every 29 days
ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE 4 X 0.5 MG	Tier 1 ($5.10-$12.65)	QL; 592 tabs every 30 days
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG	Tier 1 ($5.10-$12.65)	QL; 74 tabs every 30 days
ELIQUIS ORAL CAPSULE SPRINKLE 0.15 MG	Tier 1 ($5.10-$12.65)	QL; 56 caps every 21 days
ELIQUIS ORAL TABLET 2.5 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
ELIQUIS ORAL TABLET 5 MG	Tier 1 ($5.10-$12.65)	QL; 74 tabs every 30 days
ELIQUIS ORAL TABLET SOLUBLE 0.5 MG	Tier 1 ($5.10-$12.65)	QL; 588 tabs every 29 days
enoxaparin sodium injection solution 300 mg/3ml	Tier 1 ($5.10-$12.65)	
enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml	Tier 1 ($5.10-$12.65)	
fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml	Tier 1 ($5.10-$12.65)	
heparin (porcine) in nacl intravenous solution 25000-0.45 ut/500ml-%	Tier 1 ($5.10-$12.65)	
heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml	Tier 1 ($5.10-$12.65)	B/D
heparin sodium (porcine) pf injection solution 1000 unit/ml	Tier 1 ($5.10-$12.65)	B/D
JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG	Tier 1 ($5.10-$12.65)	
rivaroxaban oral suspension reconstituted 1 mg/ml	Tier 1 ($5.10-$12.65)	QL; 620 mL every 30 days
rivaroxaban oral tablet 2.5 mg	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
XARELTO ORAL TABLET 10 MG, 15 MG, 20 MG	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
XARELTO ORAL TABLET 2.5 MG	Tier 1 ($5.10-$12.65)	QL; 60 tabs every 30 days
XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG	Tier 1 ($5.10-$12.65)	QL; 51 tabs every 30 days
Hematopoietic Growth Factors		
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 28 days

Drug Name	Drug Tier	Requirements/Limits
PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML	Tier 1 ($5.10-$12.65)	PA
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML	Tier 1 ($5.10-$12.65)	PA
Miscellaneous		
ALVAIZ ORAL TABLET 18 MG, 36 MG	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
ALVAIZ ORAL TABLET 54 MG, 9 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
anagrelide hcl oral capsule 0.5 mg, 1 mg	Tier 1 ($5.10-$12.65)	
BERINERT INTRAVENOUS KIT 500 UNIT	Tier 1 ($5.10-$12.65)	PA; QL; 24 boxes every 30 days
cilostazol oral tablet 100 mg, 50 mg	Tier 1 ($5.10-$12.65)	
DOPTELET ORAL TABLET 20 MG, 20 MG (10 PACK), 20 MG(15 PACK)	Tier 1 ($5.10-$12.65)	PA
DOPTELET SPRINKLE ORAL CAPSULE SPRINKLE 10 MG	Tier 1 ($5.10-$12.65)	PA
DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG	Tier 1 ($5.10-$12.65)	
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT	Tier 1 ($5.10-$12.65)	PA; QL; 30 vials every 30 days
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT	Tier 1 ($5.10-$12.65)	PA; QL; 20 vials every 30 days
icatibant acetate subcutaneous solution prefilled syringe 30 mg/3ml	Tier 1 ($5.10-$12.65)	PA; QL; 9 syringes every 30 days
l-glutamine oral packet 5 gm	Tier 1 ($5.10-$12.65)	PA
pentoxifylline er oral tablet extended release 400 mg	Tier 1 ($5.10-$12.65)	
SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML	Tier 1 ($5.10-$12.65)	PA; QL; 9 syringes every 30 days
SIKLOS ORAL TABLET 100 MG, 1000 MG	Tier 1 ($5.10-$12.65)	
TAVNEOS ORAL CAPSULE 10 MG	Tier 1 ($5.10-$12.65)	PA; QL; 180 caps every 30 days
tranexamic acid intravenous solution 1000 mg/10ml	Tier 1 ($5.10-$12.65)	
tranexamic acid oral tablet 650 mg	Tier 1 ($5.10-$12.65)	
Platelet Aggregation Inhibitors		
aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg	Tier 1 ($5.10-$12.65)	
clopidogrel bisulfate oral tablet 75 mg	Tier 1 ($5.10-$12.65)	
dipyridamole oral tablet 25 mg, 50 mg, 75 mg	Tier 1 ($5.10-$12.65)	PA
prasugrel hcl oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	
ticagrelor oral tablet 60 mg, 90 mg	Tier 1 ($5.10-$12.65)	
IMMUNOLOGIC AGENTS		
Autoimmune Agents		
adalimumab-bwwd subcutaneous solution auto-injector 40 mg/0.4ml	Tier 1 ($5.10-$12.65)	PA; QL; 6 autoinjectors every 28 days
adalimumab-bwwd subcutaneous solution prefilled syringe 40 mg/0.4ml	Tier 1 ($5.10-$12.65)	PA; QL; 6 syringes every 28 days
BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 160 MG/ML, 320 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 pens every 28 days

Drug Name	Drug Tier	Requirements/Limits
BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML, 320 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 28 days
DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML, 300 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML, 300 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 syringes every 28 days
EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR 250 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 20 pens every 365 days
EBGLYSS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 20 syringes every 365 days
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 cartridges every 28 days
ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 16 vials every 28 days
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 16 syringes every 28 days
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 syringes every 28 days
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 pens every 28 days
HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 autoinjectors every 28 days
HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML, 40 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 syringes every 28 days
HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 pens every 28 days
HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 28 days
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 syringes every 28 days
HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML, 40 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 syringes every 28 days
HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML	Tier 1 ($5.10-$12.65)	PA; QL; 3 pens every 28 days
HUMIRA-PSORIASIS/UVEIT STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML & 40MG/0.4ML	Tier 1 ($5.10-$12.65)	PA; QL; 3 pens every 28 days
infliximab intravenous solution reconstituted 100 mg	Tier 1 ($5.10-$12.65)	PA
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML	Tier 1 ($5.10-$12.65)	PA; QL; 28 syringes every 28 days
PYZCHIVA INTRAVENOUS SOLUTION 130 MG/26ML	Tier 1 ($5.10-$12.65)	PA
PYZCHIVA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 28 days

Drug Name	Drug Tier	Requirements/Limits
PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.5ML, 90 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 1 ($5.10-$12.65)	PA
RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG	Tier 1 ($5.10-$12.65)	PA
RINVOQ LQ ORAL SOLUTION 1 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 360 mL every 30 days
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 45 MG	Tier 1 ($5.10-$12.65)	PA; QL; 168 tabs every year
SKYRIZI INTRAVENOUS SOLUTION 600 MG/10ML	Tier 1 ($5.10-$12.65)	PA
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 pens every 365 days
SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 180 MG/1.2ML, 360 MG/2.4ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 cartridge every 56 days
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 55 MG/0.37ML	Tier 1 ($5.10-$12.65)	PA; QL; 6 syringes every 365 days
SOTYKTU ORAL TABLET 6 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
STELARA INTRAVENOUS SOLUTION 130 MG/26ML	Tier 1 ($5.10-$12.65)	PA
STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 28 days
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
tofacitinib citrate er oral tablet extended release 24 hour 11 mg, 22 mg	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
tofacitinib citrate oral solution 1 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 480 mL every 24 days
tofacitinib citrate oral tablet 10 mg, 5 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
TREMFYA INTRAVENOUS SOLUTION 200 MG/20ML	Tier 1 ($5.10-$12.65)	PA
TREMFYA ONE-PRESS SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 pens every 28 days
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 syringes every 28 days
TREMFYA-CD/UC INDUCTION SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML	Tier 1 ($5.10-$12.65)	PA; QL; 2 pens every 28 days
TYENNE INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
TYENNE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
TYENNE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 syringes every 28 days
ustekinumab intravenous solution 130 mg/26ml	Tier 1 ($5.10-$12.65)	PA
ustekinumab subcutaneous solution 45 mg/0.5ml	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 28 days
ustekinumab subcutaneous solution prefilled syringe 45 mg/0.5ml, 90 mg/ml	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
VELSIPITY ORAL TABLET 2 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
XELJANZ ORAL SOLUTION 1 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 480 mL every 24 days
XELJANZ ORAL TABLET 10 MG, 5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
YESINTEK INTRAVENOUS SOLUTION 130 MG/26ML	Tier 1 ($5.10-$12.65)	PA
YESINTEK SUBCUTANEOUS SOLUTION 45 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 vial every 28 days
YESINTEK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
Disease-Modifying Anti-Rheumatic Drugs (Dmards)		
hydroxychloroquine sulfate oral tablet 200 mg	Tier 1 ($5.10-$12.65)	
JYLAMVO ORAL SOLUTION 2 MG/ML	Tier 1 ($5.10-$12.65)	B/D
leflunomide oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
methotrexate sodium oral tablet 2.5 mg	Tier 1 ($5.10-$12.65)	
XATMEP ORAL SOLUTION 2.5 MG/ML	Tier 1 ($5.10-$12.65)	B/D
Immunoglobulins		
ALYGLO INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML	Tier 1 ($5.10-$12.65)	PA
GAMASTAN INTRAMUSCULAR SOLUTION	Tier 1 ($5.10-$12.65)	B/D
GAMMAGARD ERC INJECTION SOLUTION 10 GM/100ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM	Tier 1 ($5.10-$12.65)	PA
GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA

Drug Name	Drug Tier	Requirements/Limits
GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML	Tier 1 ($5.10-$12.65)	PA
Immunomodulators		
ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG	Tier 1 ($5.10-$12.65)	PA
Immunosuppressants		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 5 MG	Tier 1 ($5.10-$12.65)	B/D
azathioprine oral tablet 50 mg	Tier 1 ($5.10-$12.65)	B/D
BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG	Tier 1 ($5.10-$12.65)	PA
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 pens every 28 days
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 syringes every 28 days
cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	B/D
cyclosporine modified oral solution 100 mg/ml	Tier 1 ($5.10-$12.65)	B/D
cyclosporine oral capsule 100 mg, 25 mg	Tier 1 ($5.10-$12.65)	B/D
everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	Tier 1 ($5.10-$12.65)	B/D
GENGRAF ORAL CAPSULE 100 MG, 25 MG	Tier 1 ($5.10-$12.65)	B/D
mycophenolate mofetil oral capsule 250 mg	Tier 1 ($5.10-$12.65)	B/D
mycophenolate mofetil oral suspension reconstituted 200 mg/ml	Tier 1 ($5.10-$12.65)	B/D
mycophenolate mofetil oral tablet 500 mg	Tier 1 ($5.10-$12.65)	B/D
mycophenolate sodium oral tablet delayed release 180 mg, 360 mg	Tier 1 ($5.10-$12.65)	B/D
NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG	Tier 1 ($5.10-$12.65)	B/D
PROGRAF ORAL PACKET 0.2 MG, 1 MG	Tier 1 ($5.10-$12.65)	B/D
REZUROCK ORAL TABLET 200 MG	Tier 1 ($5.10-$12.65)	PA; QL; 30 tabs every 30 days
sirolimus oral solution 1 mg/ml	Tier 1 ($5.10-$12.65)	B/D
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	Tier 1 ($5.10-$12.65)	B/D

Drug Name	Drug Tier	Requirements/Limits
tacrolimus er oral capsule extended release 24 hour 0.5 mg, 1 mg, 5 mg	Tier 1 ($5.10-$12.65)	B/D
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	Tier 1 ($5.10-$12.65)	B/D
Vaccines		
ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED 120 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5	Tier 1 ($5.10-$12.65)	
ADACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2-15.5 LF-MCG/0.5	Tier 1 ($5.10-$12.65)	
AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED 120 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA
bcg vaccine injection solution reconstituted 50 mg	Tier 1 ($5.10-$12.65)	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1 ($5.10-$12.65)	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2.5-18.5 LF-MCG/0.5	Tier 1 ($5.10-$12.65)	
DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5	Tier 1 ($5.10-$12.65)	
ENGERIX-B INJECTION SUSPENSION 20 MCG/ML	Tier 1 ($5.10-$12.65)	B/D
ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/0.5ML, 20 MCG/ML	Tier 1 ($5.10-$12.65)	B/D
GARDASIL 9 INTRAMUSCULAR SUSPENSION 0.5 ML	Tier 1 ($5.10-$12.65)	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1 ($5.10-$12.65)	
HAVRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1440 EL U/ML, 720 EL U/0.5ML	Tier 1 ($5.10-$12.65)	
HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 20 MCG/0.5ML	Tier 1 ($5.10-$12.65)	B/D
HIBERIX INJECTION SOLUTION RECONSTITUTED 10 MCG	Tier 1 ($5.10-$12.65)	
IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED 2.5 UNIT/ML	Tier 1 ($5.10-$12.65)	B/D
INFANRIX INTRAMUSCULAR SUSPENSION 25-58-10	Tier 1 ($5.10-$12.65)	
IPOL INJECTION SUSPENSION	Tier 1 ($5.10-$12.65)	
IXIARO INTRAMUSCULAR SUSPENSION	Tier 1 ($5.10-$12.65)	
JYNNEOS SUBCUTANEOUS SUSPENSION 0.5 ML	Tier 1 ($5.10-$12.65)	B/D
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1 ($5.10-$12.65)	
MENQUADFI INTRAMUSCULAR SOLUTION 0.5 ML	Tier 1 ($5.10-$12.65)	
MENVEO INTRAMUSCULAR SOLUTION	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
M-M-R II INJECTION SOLUTION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
MRESVIA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML	Tier 1 ($5.10-$12.65)	PA
PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	Tier 1 ($5.10-$12.65)	
PEDVAXHIB INTRAMUSCULAR SUSPENSION 7.5 MCG/0.5ML	Tier 1 ($5.10-$12.65)	
PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
penmenvy intramuscular suspension reconstituted	Tier 1 ($5.10-$12.65)	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
QUADRACEL INTRAMUSCULAR SUSPENSION	Tier 1 ($5.10-$12.65)	
QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1 ($5.10-$12.65)	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	B/D
RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML	Tier 1 ($5.10-$12.65)	B/D
RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/ML, 5 MCG/0.5ML	Tier 1 ($5.10-$12.65)	B/D
ROTARIX ORAL SUSPENSION	Tier 1 ($5.10-$12.65)	
ROTATEQ ORAL SOLUTION	Tier 1 ($5.10-$12.65)	
SHINGRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML	Tier 1 ($5.10-$12.65)	QL; 2 syringes per lifetime
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED 50 MCG/0.5ML	Tier 1 ($5.10-$12.65)	QL; 2 vials per lifetime
TENIVAC INTRAMUSCULAR INJECTABLE 5-2 LFU, 5-2 LFU (INJECTION)	Tier 1 ($5.10-$12.65)	B/D
TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1.2 MCG/0.25ML, 2.4 MCG/0.5ML	Tier 1 ($5.10-$12.65)	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML	Tier 1 ($5.10-$12.65)	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 720-20 ELU-MCG/ML	Tier 1 ($5.10-$12.65)	
TYPHIM VI INTRAMUSCULAR SOLUTION 25 MCG/0.5ML	Tier 1 ($5.10-$12.65)	
TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML	Tier 1 ($5.10-$12.65)	
VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 UNIT/0.5ML, 50 UNIT/ML	Tier 1 ($5.10-$12.65)	
VARIVAX INJECTION SUSPENSION RECONSTITUTED 1350 PFU/0.5ML	Tier 1 ($5.10-$12.65)	
VAXCHORA ORAL SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
VIMKUNYA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 40 MCG/0.8ML	Tier 1 ($5.10-$12.65)	
VIVOTIF ORAL CAPSULE DELAYED RELEASE	Tier 1 ($5.10-$12.65)	
YF-VAX SUBCUTANEOUS SUSPENSION RECONSTITUTED	Tier 1 ($5.10-$12.65)	
NUTRITIONAL/SUPPLEMENTS		
Electrolytes/Minerals, Injectable		
dextrose in lactated ringers intravenous solution 5 %	Tier 1 ($5.10-$12.65)	
dextrose-sodium chloride intravenous solution 10-0.2 %, 10-0.45 %, 2.5-0.45 %, 5-0.2 %, 5-0.225 %, 5-0.3 %, 5-0.45 %, 5-0.9 %	Tier 1 ($5.10-$12.65)	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	Tier 1 ($5.10-$12.65)	
ISOLYTE-S PH 7.4 INTRAVENOUS SOLUTION	Tier 1 ($5.10-$12.65)	
kcl (0.149%) in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%	Tier 1 ($5.10-$12.65)	
kcl (0.298%) in nacl intravenous solution 40-0.9 meq/l-%	Tier 1 ($5.10-$12.65)	
kcl in dextrose-nacl intravenous solution 10-5-0.45 meq/l-%-%, 20-5-0.2 meq/l-%-%, 20-5-0.45 meq/l-%-%, 20-5-0.9 meq/l-%-%, 30-5-0.45 meq/l-%-%, 40-5-0.45 meq/l-%-%, 40-5-0.9 meq/l-%-%	Tier 1 ($5.10-$12.65)	
lactated ringers intravenous solution	Tier 1 ($5.10-$12.65)	
magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-%	Tier 1 ($5.10-$12.65)	
magnesium sulfate injection solution 50 %, 50 % (10ml syringe)	Tier 1 ($5.10-$12.65)	
magnesium sulfate intravenous solution 2 gm/50ml, 20 gm/500ml, 3 gm/100ml, 4 gm/100ml, 4 gm/50ml, 40 gm/1000ml	Tier 1 ($5.10-$12.65)	
multiple electro type 1 ph 7.4 intravenous solution	Tier 1 ($5.10-$12.65)	
potassium chloride in nacl intravenous solution 20-0.45 meq/l-%, 20-0.9 meq/l-%, 40-0.9 meq/l-%	Tier 1 ($5.10-$12.65)	
potassium chloride intravenous solution 10 meq/100ml, 10 meq/50ml, 2 meq/ml, 2 meq/ml (20 ml), 20 meq/100ml, 20 meq/50ml, 40 meq/100ml	Tier 1 ($5.10-$12.65)	
potassium cl in dextrose 5% intravenous solution 20 meq/l	Tier 1 ($5.10-$12.65)	
sodium chloride injection solution 2.5 meq/ml	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 5 %	Tier 1 ($5.10-$12.65)	
TPN ELECTROLYTES INTRAVENOUS CONCENTRATE	Tier 1 ($5.10-$12.65)	B/D
Electrolytes/Minerals/Vitamins, Oral		
KLOR-CON 10 ORAL TABLET EXTENDED RELEASE 10 MEQ	Tier 1 ($5.10-$12.65)	
KLOR-CON M10 ORAL TABLET EXTENDED RELEASE 10 MEQ	Tier 1 ($5.10-$12.65)	
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE 15 MEQ	Tier 1 ($5.10-$12.65)	
KLOR-CON M20 ORAL TABLET EXTENDED RELEASE 20 MEQ	Tier 1 ($5.10-$12.65)	
KLOR-CON ORAL PACKET 20 MEQ	Tier 1 ($5.10-$12.65)	
KLOR-CON ORAL TABLET EXTENDED RELEASE 8 MEQ	Tier 1 ($5.10-$12.65)	
m-natal plus oral tablet 27-1 mg	Tier 1 ($5.10-$12.65)	
potassium chloride crys er oral tablet extended release 10 meq, 15 meq, 20 meq	Tier 1 ($5.10-$12.65)	
potassium chloride er oral capsule extended release 10 meq, 8 meq	Tier 1 ($5.10-$12.65)	
potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq	Tier 1 ($5.10-$12.65)	
potassium chloride oral packet 20 meq	Tier 1 ($5.10-$12.65)	
potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)	Tier 1 ($5.10-$12.65)	
prenatal oral tablet 27-1 mg	Tier 1 ($5.10-$12.65)	
sodium fluoride oral tablet 2.2 (1 f) mg	Tier 1 ($5.10-$12.65)	
westab plus oral tablet 27-1 mg	Tier 1 ($5.10-$12.65)	
Iv Nutrition		
AMINOSYN II INTRAVENOUS SOLUTION 10 %, 15 %	Tier 1 ($5.10-$12.65)	B/D
AMINOSYN-PF INTRAVENOUS SOLUTION 10 %	Tier 1 ($5.10-$12.65)	B/D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 %	Tier 1 ($5.10-$12.65)	B/D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 %	Tier 1 ($5.10-$12.65)	B/D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 %	Tier 1 ($5.10-$12.65)	B/D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 %	Tier 1 ($5.10-$12.65)	B/D
clinimix/dextrose (6/5) intravenous solution 6 %	Tier 1 ($5.10-$12.65)	B/D
clinimix/dextrose (8/10) intravenous solution 8 %	Tier 1 ($5.10-$12.65)	B/D
clinimix/dextrose (8/14) intravenous solution 8 %	Tier 1 ($5.10-$12.65)	B/D
CLINISOL SF INTRAVENOUS SOLUTION 15 %	Tier 1 ($5.10-$12.65)	B/D

Drug Name	Drug Tier	Requirements/Limits
CLINOLIPID INTRAVENOUS EMULSION 20 %	Tier 1 ($5.10-$12.65)	B/D
dextrose intravenous solution 10 %, 5 %	Tier 1 ($5.10-$12.65)	
dextrose intravenous solution 50 %, 70 %	Tier 1 ($5.10-$12.65)	B/D
INTRALIPID INTRAVENOUS EMULSION 20 %, 30 %	Tier 1 ($5.10-$12.65)	B/D
NUTRILIPID INTRAVENOUS EMULSION 20 %	Tier 1 ($5.10-$12.65)	B/D
PLENAMINE INTRAVENOUS SOLUTION 15 %	Tier 1 ($5.10-$12.65)	B/D
PREMASOL INTRAVENOUS SOLUTION 10 %	Tier 1 ($5.10-$12.65)	B/D
PROSOL INTRAVENOUS SOLUTION 20 %	Tier 1 ($5.10-$12.65)	B/D
TRAVASOL INTRAVENOUS SOLUTION 10 %	Tier 1 ($5.10-$12.65)	B/D
TROPHAMINE INTRAVENOUS SOLUTION 10 %	Tier 1 ($5.10-$12.65)	B/D
OPHTHALMIC		
Antiallergics		
azelastine hcl ophthalmic solution 0.05 %	Tier 1 ($5.10-$12.65)	
cromolyn sodium ophthalmic solution 4 %	Tier 1 ($5.10-$12.65)	
ZERVIATE OPHTHALMIC SOLUTION 0.24 %	Tier 1 ($5.10-$12.65)	
Antiglaucoma		
betaxolol hcl ophthalmic solution 0.5 %	Tier 1 ($5.10-$12.65)	
brimonidine tartrate ophthalmic solution 0.2 %	Tier 1 ($5.10-$12.65)	
brinzolamide ophthalmic suspension 1 %	Tier 1 ($5.10-$12.65)	ST
carteolol hcl ophthalmic solution 1 %	Tier 1 ($5.10-$12.65)	
COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 %	Tier 1 ($5.10-$12.65)	
dorzolamide hcl ophthalmic solution 2 %	Tier 1 ($5.10-$12.65)	
dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 %	Tier 1 ($5.10-$12.65)	
latanoprost ophthalmic solution 0.005 %	Tier 1 ($5.10-$12.65)	
levobunolol hcl ophthalmic solution 0.5 %	Tier 1 ($5.10-$12.65)	
LUMIGAN OPHTHALMIC SOLUTION 0.01 %	Tier 1 ($5.10-$12.65)	
pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 %	Tier 1 ($5.10-$12.65)	
RHOPRESSA OPHTHALMIC SOLUTION 0.02 %	Tier 1 ($5.10-$12.65)	
ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 %	Tier 1 ($5.10-$12.65)	
SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 %	Tier 1 ($5.10-$12.65)	
timolol maleate ophthalmic gel forming solution 0.25 %, 0.5 %	Tier 1 ($5.10-$12.65)	
timolol maleate ophthalmic solution 0.25 %, 0.5 %	Tier 1 ($5.10-$12.65)	
VYZULTA OPHTHALMIC SOLUTION 0.024 %	Tier 1 ($5.10-$12.65)	
Anti-Infective/Anti-Inflammatory		
bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 %	Tier 1 ($5.10-$12.65)	
loteprednol-tobramycin ophthalmic suspension 0.5-0.3 %	Tier 1 ($5.10-$12.65)	
neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1	Tier 1 ($5.10-$12.65)	
neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1	Tier 1 ($5.10-$12.65)	
sulfacetamide-prednisolone ophthalmic solution 10-0.23 %	Tier 1 ($5.10-$12.65)	
TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 %	Tier 1 ($5.10-$12.65)	
tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 %	Tier 1 ($5.10-$12.65)	
ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 %	Tier 1 ($5.10-$12.65)	
Anti-Infectives		
bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm	Tier 1 ($5.10-$12.65)	
besifloxacin hcl ophthalmic suspension 0.6 %	Tier 1 ($5.10-$12.65)	
BESIVANCE OPHTHALMIC SUSPENSION 0.6 %	Tier 1 ($5.10-$12.65)	
CILOXAN OPHTHALMIC OINTMENT 0.3 %	Tier 1 ($5.10-$12.65)	
ciprofloxacin hcl ophthalmic solution 0.3 %	Tier 1 ($5.10-$12.65)	
erythromycin ophthalmic ointment 5 mg/gm	Tier 1 ($5.10-$12.65)	
gatifloxacin ophthalmic solution 0.5 %	Tier 1 ($5.10-$12.65)	
gentamicin sulfate ophthalmic solution 0.3 %	Tier 1 ($5.10-$12.65)	
moxifloxacin hcl ophthalmic solution 0.5 %	Tier 1 ($5.10-$12.65)	QL; 12 mL every 30 days
NATACYN OPHTHALMIC SUSPENSION 5 %	Tier 1 ($5.10-$12.65)	
neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000	Tier 1 ($5.10-$12.65)	
neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025	Tier 1 ($5.10-$12.65)	
ofloxacin ophthalmic solution 0.3 %	Tier 1 ($5.10-$12.65)	
polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-%	Tier 1 ($5.10-$12.65)	
sulfacetamide sodium ophthalmic solution 10 %	Tier 1 ($5.10-$12.65)	
tobramycin ophthalmic solution 0.3 %	Tier 1 ($5.10-$12.65)	
trifluridine ophthalmic solution 1 %	Tier 1 ($5.10-$12.65)	
XDEMVY OPHTHALMIC SOLUTION 0.25 %	Tier 1 ($5.10-$12.65)	PA
ZIRGAN OPHTHALMIC GEL 0.15 %	Tier 1 ($5.10-$12.65)	
Anti-Inflammatories		
dexamethasone sodium phosphate ophthalmic solution 0.1 %	Tier 1 ($5.10-$12.65)	
diclofenac sodium ophthalmic solution 0.1 %	Tier 1 ($5.10-$12.65)	
difluprednate ophthalmic emulsion 0.05 %	Tier 1 ($5.10-$12.65)	
fluorometholone ophthalmic suspension 0.1 %	Tier 1 ($5.10-$12.65)	
flurbiprofen sodium ophthalmic solution 0.03 %	Tier 1 ($5.10-$12.65)	
ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 %	Tier 1 ($5.10-$12.65)	
LOTEMAX OPHTHALMIC OINTMENT 0.5 %	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
prednisolone acetate ophthalmic suspension 1 %	Tier 1 ($5.10-$12.65)	
prednisolone sodium phosphate ophthalmic solution 1 %	Tier 1 ($5.10-$12.65)	
Miscellaneous		
atropine sulfate ophthalmic solution 1 %	Tier 1 ($5.10-$12.65)	
CYSTADROPS OPHTHALMIC SOLUTION 0.37 %	Tier 1 ($5.10-$12.65)	PA
CYSTARAN OPHTHALMIC SOLUTION 0.44 %	Tier 1 ($5.10-$12.65)	PA
EYSUVIS OPHTHALMIC SUSPENSION 0.25 %	Tier 1 ($5.10-$12.65)	
MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML	Tier 1 ($5.10-$12.65)	
proparacaine hcl ophthalmic solution 0.5 %	Tier 1 ($5.10-$12.65)	
RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 %	Tier 1 ($5.10-$12.65)	
RESTASIS OPHTHALMIC EMULSION 0.05 %	Tier 1 ($5.10-$12.65)	
XIIDRA OPHTHALMIC SOLUTION 5 %	Tier 1 ($5.10-$12.65)	
OTIC		
Otic Agents		
acetic acid otic solution 2 %	Tier 1 ($5.10-$12.65)	
ciprofloxacin-dexamethasone otic suspension 0.3-0.1 %	Tier 1 ($5.10-$12.65)	
FLAC OTIC OIL 0.01 %	Tier 1 ($5.10-$12.65)	
fluocinolone acetonide otic oil 0.01 %	Tier 1 ($5.10-$12.65)	
hydrocortisone-acetic acid otic solution 1-2 %	Tier 1 ($5.10-$12.65)	
neomycin-polymyxin-hc otic solution 1 %	Tier 1 ($5.10-$12.65)	
neomycin-polymyxin-hc otic suspension 3.5-10000-1	Tier 1 ($5.10-$12.65)	
ofloxacin otic solution 0.3 %	Tier 1 ($5.10-$12.65)	
RESPIRATORY		
Anticholinergic/Beta Agonist Combinations		
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 60 blisters every 30 days
BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 1 inhaler every 30 days
BREZTRI AEROSPHERE AEROSOL 160-9-4.8 MCG/ACT INHALATION	Tier 1 ($5.10-$12.65)	QL; 1 inhaler every 30 days
BREZTRI AEROSPHERE AEROSOL 160-9-4.8 MCG/ACT INHALATION	Tier 1 ($5.10-$12.65)	QL; 4 inhalers every 28 days
BREZTRI AEROSPHERE INHALATION AEROSOL 160-18-4.8 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 1 inhaler every 30 days
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml	Tier 1 ($5.10-$12.65)	B/D
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 60 blisters every 30 days

Drug Name	Drug Tier	Requirements/Limits
Anticholinergics		
ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 30 blisters every 30 days
ipratropium bromide hfa inhalation aerosol solution 17 mcg/act	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
ipratropium bromide inhalation solution 0.02 %	Tier 1 ($5.10-$12.65)	B/D
ipratropium bromide nasal solution 0.03 %, 0.06 %	Tier 1 ($5.10-$12.65)	
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 1 inhaler every 30 days
Antihistamines		
azelastine hcl nasal solution 0.1 %	Tier 1 ($5.10-$12.65)	
cetirizine hcl oral solution 5 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 300 mL every 30 days
cyproheptadine hcl oral syrup 2 mg/5ml	Tier 1 ($5.10-$12.65)	PA
cyproheptadine hcl oral tablet 4 mg	Tier 1 ($5.10-$12.65)	PA
diphenhydramine hcl injection solution 50 mg/ml	Tier 1 ($5.10-$12.65)	
hydroxyzine hcl intramuscular solution 25 mg/ml, 50 mg/ml	Tier 1 ($5.10-$12.65)	PA
hydroxyzine hcl oral syrup 10 mg/5ml	Tier 1 ($5.10-$12.65)	PA
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA
hydroxyzine pamoate oral capsule 25 mg, 50 mg	Tier 1 ($5.10-$12.65)	PA
levocetirizine dihydrochloride oral solution 2.5 mg/5ml	Tier 1 ($5.10-$12.65)	QL; 300 mL every 30 days
levocetirizine dihydrochloride oral tablet 5 mg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
Beta Agonists		
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act, 108 (90 base) mcg/act (nda020503), 108 (90 base) mcg/act (nda020983)	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 0.63 mg/3ml, 1.25 mg/3ml, 2.5 mg/0.5ml	Tier 1 ($5.10-$12.65)	B/D
albuterol sulfate oral syrup 2 mg/5ml	Tier 1 ($5.10-$12.65)	
albuterol sulfate oral tablet 2 mg, 4 mg	Tier 1 ($5.10-$12.65)	
levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml, 1.25 mg/0.5ml, 1.25 mg/3ml	Tier 1 ($5.10-$12.65)	B/D
levalbuterol tartrate inhalation aerosol 45 mcg/act	Tier 1 ($5.10-$12.65)	ST; QL; 2 inhalers every 30 days
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 60 inhalations every 30 days
terbutaline sulfate oral tablet 2.5 mg, 5 mg	Tier 1 ($5.10-$12.65)	
VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
VENTOLIN HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	Tier 1 ($5.10-$12.65)	QL; 6 inhalers every 30 days
Leukotriene Modulators		
montelukast sodium oral packet 4 mg	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
montelukast sodium oral tablet 10 mg	Tier 1 ($5.10-$12.65)	
montelukast sodium oral tablet chewable 4 mg, 5 mg	Tier 1 ($5.10-$12.65)	
zafirlukast oral tablet 10 mg, 20 mg	Tier 1 ($5.10-$12.65)	
Miscellaneous		
acetylcysteine inhalation solution 10 %, 20 %	Tier 1 ($5.10-$12.65)	B/D
ALYFTREK ORAL TABLET 10-50-125 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
ALYFTREK ORAL TABLET 4-20-50 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days
ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG	Tier 1 ($5.10-$12.65)	PA
cromolyn sodium inhalation nebulization solution 20 mg/2ml	Tier 1 ($5.10-$12.65)	B/D
epinephrine injection solution 0.3 mg/0.3ml	Tier 1 ($5.10-$12.65)	
epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml	Tier 1 ($5.10-$12.65)	
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 pen every 28 days
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 30 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 1 syringe every 28 days
KALYDECO ORAL PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 packets every 28 days
KALYDECO ORAL TABLET 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 tabs every 30 days
nintedanib esylate oral capsule 100 mg, 150 mg	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
OFEV ORAL CAPSULE 100 MG, 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 60 caps every 30 days
ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 packets every 28 days
ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG	Tier 1 ($5.10-$12.65)	PA; QL; 112 tabs every 28 days
pirfenidone oral capsule 267 mg	Tier 1 ($5.10-$12.65)	PA; QL; 270 caps every 30 days
pirfenidone oral tablet 267 mg	Tier 1 ($5.10-$12.65)	PA; QL; 270 tabs every 30 days
pirfenidone oral tablet 534 mg, 801 mg	Tier 1 ($5.10-$12.65)	PA; QL; 90 tabs every 30 days
PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML	Tier 1 ($5.10-$12.65)	PA
PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML	Tier 1 ($5.10-$12.65)	PA
roflumilast oral tablet 250 mcg	Tier 1 ($5.10-$12.65)	QL; 56 tabs every year
roflumilast oral tablet 500 mcg	Tier 1 ($5.10-$12.65)	QL; 30 tabs every 30 days
SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 tabs every 28 days
theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg, 450 mg	Tier 1 ($5.10-$12.65)	
theophylline er oral tablet extended release 24 hour 400 mg, 600 mg	Tier 1 ($5.10-$12.65)	
theophylline oral elixir 80 mg/15ml	Tier 1 ($5.10-$12.65)	
theophylline oral solution 80 mg/15ml	Tier 1 ($5.10-$12.65)	
TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG	Tier 1 ($5.10-$12.65)	PA; QL; 84 tabs every 28 days

Drug Name	Drug Tier	Requirements/Limits
TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG	Tier 1 ($5.10-$12.65)	PA; QL; 56 packs every 28 days
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 pens every 28 days
XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML, 75 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 pens every 28 days
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML	Tier 1 ($5.10-$12.65)	PA; QL; 8 syringes every 28 days
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML, 75 MG/0.5ML	Tier 1 ($5.10-$12.65)	PA; QL; 4 syringes every 28 days
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG	Tier 1 ($5.10-$12.65)	PA; QL; 8 vials every 28 days
ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 4000 MG, 5000 MG	Tier 1 ($5.10-$12.65)	PA
Nasal Steroids		
flunisolide nasal solution 25 mcg/act (0.025%)	Tier 1 ($5.10-$12.65)	QL; 3 bottles every 30 days
fluticasone propionate nasal suspension 50 mcg/act	Tier 1 ($5.10-$12.65)	QL; 1 bottle every 30 days
XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT	Tier 1 ($5.10-$12.65)	PA; QL; 32 mL every 30 days
Steroid Inhalants		
ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 2 inhalers every 30 days
ALVESCO INHALATION AEROSOL SOLUTION 80 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 3 inhalers every 30 days
ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 30 inhalations every 30 days
budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml	Tier 1 ($5.10-$12.65)	B/D
Steroid/Beta-Agonist Combinations		
ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 1 inhaler every 30 days
AIRSUPRA INHALATION AEROSOL 90-80 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 3 inhalers every 30 days
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH	Tier 1 ($5.10-$12.65)	QL; 60 blisters every 30 days
BREYNA INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 3 inhalers every 30 days
budesonide-formoterol fumarate inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act	Tier 1 ($5.10-$12.65)	QL; 3 inhalers every 30 days
DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 3 inhalers every 30 days
fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	Tier 1 ($5.10-$12.65)	QL; 60 inhalations every 30 days

Drug Name	Drug Tier	Requirements/Limits
WIXELA INHUB INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT	Tier 1 ($5.10-$12.65)	QL; 60 inhalations every 30 days
TOPICAL		
Dermatology, Acne		
ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA
AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA
benzoyl peroxide-erythromycin external gel 5-3 %	Tier 1 ($5.10-$12.65)	QL; 46.6 gm every 30 days
CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA
clindamycin phos (once-daily) external gel 1 %	Tier 1 ($5.10-$12.65)	PA; QL; 75 mL every 30 days
clindamycin phos (twice-daily) external gel 1 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
clindamycin phos-benzoyl perox external gel 1.2-5 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
clindamycin phosphate external lotion 1 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
clindamycin phosphate external solution 1 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
ery external pad 2 %	Tier 1 ($5.10-$12.65)	QL; 60 pledgets every 30 days
erythromycin external gel 2 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
erythromycin external solution 2 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	Tier 1 ($5.10-$12.65)	PA
NEUAC EXTERNAL GEL 1.2-5 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
sulfacetamide sodium (acne) external lotion 10 %	Tier 1 ($5.10-$12.65)	QL; 118 mL every 30 days
tretinoin external cream 0.025 %, 0.05 %, 0.1 %	Tier 1 ($5.10-$12.65)	PA; QL; 45 gm every 30 days
tretinoin external gel 0.01 %, 0.025 %	Tier 1 ($5.10-$12.65)	PA; QL; 45 gm every 30 days
ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 1 ($5.10-$12.65)	PA
Dermatology, Antibiotics		
gentamicin sulfate external cream 0.1 %	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
gentamicin sulfate external ointment 0.1 %	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
mupirocin external ointment 2 %	Tier 1 ($5.10-$12.65)	QL; 220 gm every 30 days
silver sulfadiazine external cream 1 %	Tier 1 ($5.10-$12.65)	
SSD EXTERNAL CREAM 1 %	Tier 1 ($5.10-$12.65)	
SULFAMYLON EXTERNAL CREAM 85 MG/GM	Tier 1 ($5.10-$12.65)	QL; 453.6 gm every 30 days
Dermatology, Antifungals		
ciclopirox external shampoo 1 %	Tier 1 ($5.10-$12.65)	QL; 120 mL every 30 days
ciclopirox olamine external cream 0.77 %	Tier 1 ($5.10-$12.65)	QL; 90 gm every 30 days
ciclopirox olamine external suspension 0.77 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
clotrimazole external cream 1 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
clotrimazole external solution 1 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
clotrimazole-betamethasone external cream 1-0.05 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
econazole nitrate external cream 1 %	Tier 1 ($5.10-$12.65)	QL; 85 gm every 30 days
ketoconazole external cream 2 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days

Drug Name	Drug Tier	Requirements/Limits
ketoconazole external shampoo 2 %	Tier 1 ($5.10-$12.65)	QL; 120 mL every 30 days
KLAYESTA EXTERNAL POWDER 100000 UNIT/GM	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
NYAMYC EXTERNAL POWDER 100000 UNIT/GM	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
nystatin external cream 100000 unit/gm	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
nystatin external ointment 100000 unit/gm	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
nystatin external powder 100000 unit/gm	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
NYSTOP EXTERNAL POWDER 100000 UNIT/GM	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
selenium sulfide external lotion 2.5 %	Tier 1 ($5.10-$12.65)	
Dermatology, Antipsoriatics		
acitretin oral capsule 10 mg, 17.5 mg, 25 mg	Tier 1 ($5.10-$12.65)	PA
calcipotriene external cream 0.005 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 gm every 30 days
calcipotriene external ointment 0.005 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 gm every 30 days
calcipotriene external solution 0.005 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 mL every 30 days
CALCITRENE EXTERNAL OINTMENT 0.005 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 gm every 30 days
ENSTILAR EXTERNAL FOAM 0.005-0.064 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 gm every 30 days
PELLIX EXTERNAL SOLUTION 0.005 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 mL every 30 days
tazarotene external cream 0.05 %, 0.1 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 gm every 30 days
Dermatology, Corticosteroids		
ala-cort external cream 1 %	Tier 1 ($5.10-$12.65)	
alclometasone dipropionate external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
alclometasone dipropionate external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
betamethasone dipropionate aug external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone dipropionate aug external gel 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone dipropionate aug external lotion 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 mL every 30 days
betamethasone dipropionate aug external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone dipropionate external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone dipropionate external lotion 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 mL every 30 days
betamethasone dipropionate external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone valerate external cream 0.1 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
betamethasone valerate external lotion 0.1 %	Tier 1 ($5.10-$12.65)	QL; 120 mL every 30 days
betamethasone valerate external ointment 0.1 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
clobetasol prop emollient base external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
clobetasol propionate external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
clobetasol propionate external gel 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
clobetasol propionate external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
clobetasol propionate external shampoo 0.05 %	Tier 1 ($5.10-$12.65)	QL; 236 mL every 30 days
clobetasol propionate external solution 0.05 %	Tier 1 ($5.10-$12.65)	QL; 100 mL every 30 days
CLODAN EXTERNAL SHAMPOO 0.05 %	Tier 1 ($5.10-$12.65)	QL; 236 mL every 30 days
fluocinolone acetonide body external oil 0.01 %	Tier 1 ($5.10-$12.65)	QL; 118.28 mL every 30 days

Drug Name	Drug Tier	Requirements/Limits
fluocinolone acetonide external cream 0.01 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
fluocinolone acetonide external cream 0.025 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
fluocinolone acetonide external ointment 0.025 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
fluocinolone acetonide external solution 0.01 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
fluocinolone acetonide scalp external oil 0.01 %	Tier 1 ($5.10-$12.65)	QL; 118.28 mL every 30 days
fluocinonide emulsified base external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
fluocinonide external cream 0.05 %, 0.1 %	Tier 1 ($5.10-$12.65)	QL; 120 gm every 30 days
fluocinonide external gel 0.05 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
fluocinonide external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
fluocinonide external solution 0.05 %	Tier 1 ($5.10-$12.65)	QL; 60 mL every 30 days
fluticasone propionate external cream 0.05 %	Tier 1 ($5.10-$12.65)	
fluticasone propionate external ointment 0.005 %	Tier 1 ($5.10-$12.65)	
halobetasol propionate external cream 0.05 %	Tier 1 ($5.10-$12.65)	QL; 50 gm every 30 days
halobetasol propionate external ointment 0.05 %	Tier 1 ($5.10-$12.65)	QL; 50 gm every 30 days
hydrocortisone external cream 1 %, 2.5 %	Tier 1 ($5.10-$12.65)	
hydrocortisone external lotion 2.5 %	Tier 1 ($5.10-$12.65)	
hydrocortisone external ointment 1 %	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
hydrocortisone external ointment 2.5 %	Tier 1 ($5.10-$12.65)	
hydrocortisone valerate external cream 0.2 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
mometasone furoate external cream 0.1 %	Tier 1 ($5.10-$12.65)	
mometasone furoate external ointment 0.1 %	Tier 1 ($5.10-$12.65)	
mometasone furoate external solution 0.1 %	Tier 1 ($5.10-$12.65)	
triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 %	Tier 1 ($5.10-$12.65)	QL; 454 gm every 30 days
triamcinolone acetonide external lotion 0.025 %, 0.1 %	Tier 1 ($5.10-$12.65)	
triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %	Tier 1 ($5.10-$12.65)	
TRIDERM EXTERNAL CREAM 0.5 %	Tier 1 ($5.10-$12.65)	QL; 454 gm every 30 days
Dermatology, Local Anesthetics		
GLYDO EXTERNAL PREFILLED SYRINGE 2 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 mL every 30 days
lidocaine external ointment 5 %	Tier 1 ($5.10-$12.65)	PA; QL; 50 gm every 30 days
lidocaine external patch 5 %	Tier 1 ($5.10-$12.65)	PA; QL; 3 patches every 1 day
lidocaine hcl external solution 4 %	Tier 1 ($5.10-$12.65)	PA; QL; 50 mL every 30 days
lidocaine hcl urethral/mucosal external prefilled syringe 2 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 mL every 30 days
lidocaine-prilocaine external cream 2.5-2.5 %	Tier 1 ($5.10-$12.65)	B/D; QL; 30 gm every 30 days
LIDOCAN EXTERNAL PATCH 5 %	Tier 1 ($5.10-$12.65)	PA; QL; 3 patches every 1 day
TRIDACAINE III EXTERNAL PATCH 5 %	Tier 1 ($5.10-$12.65)	PA; QL; 3 patches every 1 day
Dermatology, Miscellaneous Skin And Mucous Membrane		
ammonium lactate external cream 12 %	Tier 1 ($5.10-$12.65)	
ammonium lactate external lotion 12 %	Tier 1 ($5.10-$12.65)	

Drug Name	Drug Tier	Requirements/Limits
bexarotene external gel 1 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 gm every 30 days
diclofenac sodium external solution 1.5 %	Tier 1 ($5.10-$12.65)	QL; 300 mL every 28 days
EUCRISA EXTERNAL OINTMENT 2 %	Tier 1 ($5.10-$12.65)	PA; QL; 120 gm every 30 days
fluorouracil external cream 5 %	Tier 1 ($5.10-$12.65)	QL; 40 gm every 30 days
fluorouracil external solution 2 %, 5 %	Tier 1 ($5.10-$12.65)	QL; 10 mL every 30 days
hydrocortisone (perianal) external cream 1 %, 2.5 %	Tier 1 ($5.10-$12.65)	
imiquimod external cream 5 %	Tier 1 ($5.10-$12.65)	QL; 24 packets every 30 days
metronidazole external cream 0.75 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
metronidazole external gel 0.75 %	Tier 1 ($5.10-$12.65)	QL; 45 gm every 30 days
metronidazole external lotion 0.75 %	Tier 1 ($5.10-$12.65)	QL; 59 mL every 30 days
nitroglycerin rectal ointment 0.4 %	Tier 1 ($5.10-$12.65)	QL; 30 gm every 30 days
PANRETIN EXTERNAL GEL 0.1 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 gm every 30 days
pimecrolimus external cream 1 %	Tier 1 ($5.10-$12.65)	PA; QL; 100 gm every 30 days
podofilox external solution 0.5 %	Tier 1 ($5.10-$12.65)	QL; 7 mL every 28 days
PROCTOCORT EXTERNAL CREAM 1 %	Tier 1 ($5.10-$12.65)	
PROCTO-MED HC EXTERNAL CREAM 2.5 %	Tier 1 ($5.10-$12.65)	
PROCTOSOL HC EXTERNAL CREAM 2.5 %	Tier 1 ($5.10-$12.65)	
PROCTOZONE-HC EXTERNAL CREAM 2.5 %	Tier 1 ($5.10-$12.65)	
tacrolimus external ointment 0.03 %, 0.1 %	Tier 1 ($5.10-$12.65)	PA; QL; 100 gm every 30 days
VALCHLOR EXTERNAL GEL 0.016 %	Tier 1 ($5.10-$12.65)	PA; QL; 60 gm every 30 days
Dermatology, Scabicides And Pediculides		
malathion external lotion 0.5 %	Tier 1 ($5.10-$12.65)	QL; 59 mL every 30 days
permethrin external cream 5 %	Tier 1 ($5.10-$12.65)	QL; 60 gm every 30 days
Dermatology, Wound Care Agents		
SANTYL EXTERNAL OINTMENT 250 UNIT/GM	Tier 1 ($5.10-$12.65)	PA; QL; 180 gm every 30 days
sodium chloride irrigation solution 0.9 %	Tier 1 ($5.10-$12.65)	
sterile water for irrigation irrigation solution	Tier 1 ($5.10-$12.65)	
Mouth/Throat/Dental Agents		
cevimeline hcl oral capsule 30 mg	Tier 1 ($5.10-$12.65)	
chlorhexidine gluconate mouth/throat solution 0.12 %	Tier 1 ($5.10-$12.65)	
clotrimazole mouth/throat troche 10 mg	Tier 1 ($5.10-$12.65)	QL; 150 lozenges every 30 days
KOURZEQ MOUTH/THROAT PASTE 0.1 %	Tier 1 ($5.10-$12.65)	
lidocaine viscous hcl mouth/throat solution 2 %	Tier 1 ($5.10-$12.65)	
nystatin mouth/throat suspension 100000 unit/ml	Tier 1 ($5.10-$12.65)	
PERIOGARD MOUTH/THROAT SOLUTION 0.12 %	Tier 1 ($5.10-$12.65)	
pilocarpine hcl oral tablet 5 mg, 7.5 mg	Tier 1 ($5.10-$12.65)	
triamcinolone acetonide mouth/throat paste 0.1 %	Tier 1 ($5.10-$12.65)	

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Last Updated: **10/29/2026**

Neighborhood Dual CONNECT (HMO D-SNP)

2026 Formulary

(List of Covered Drugs or "Drug List")

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN

Approved Formulary ID: 00026453

This formulary was updated on **10/29/2026**. For more recent information or other questions, please contact Neighborhood Dual CONNECT Member Services at 1-844-812-6896 (TTY users should call 711), 8:00 a.m. to 8:00 p.m., seven days a week from October 1 through March 31. From April 1 through September 30, you can call us 8:00 a.m. to 8:00 p.m. Monday through Friday (you may leave a voicemail on Saturdays, Sundays, and Federal holidays), or visit www.nhpri.org/DualCONNECT.

Notice of Non-Discrimination

Neighborhood Health Plan of Rhode Island (Neighborhood) does not discriminate or treat people differently because of race, color, national origin (including people who do not speak English as their primary language), age, disability, religion, or sex (such as sexual orientation, sexual stereotypes, gender identity, pregnancy or related conditions).

We're here for you!

Neighborhood offers FREE assistance such as:

- aids and services for people with disabilities
- qualified interpreters, translation services, and sign language interpreters
- written information in large print, braille, electronic and audio format

If you need any of these services, call the Member Services phone number on the back of your Neighborhood ID card. If you are not a Neighborhood member, please call us at 1-800-963-1001 (TTY 711).

Discrimination Complaints

If you feel like Neighborhood has failed to provide these services or has discriminated based on race, color, national origin, age, disability, or sex, you can file a complaint, also known as a grievance. You can file a grievance in person, by phone, mail, fax or email. Need help? Call your Neighborhood Civil Rights Coordinator at the phone number below.

PHONE:	1-401-427-7646 (TTY 711)
MAIL OR IN PERSON:	Neighborhood Health Plan of Rhode Island Attn: Civil Rights Coordinator 910 Douglas Pike Smithfield, RI 02917
FAX:	1-401-709-7005
EMAIL:	OCRCoordinator@nhpri.org
ONLINE:	https://www.nhpri.org/non-discrimination-language-assistance

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#3511 Approved 09/13/24

You can also file a complaint with the **U.S. Department of Health and Human Services**:

PHONE: Call 1-800-368-1019 (TTY 1-800-537-7697)

BY MAIL: Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

ONLINE: https://www.hhs.gov/civil-rights/filing-a-complaint/complaint-process/index.html

For more information or to view this notice online, please visit the Neighborhood website at www.nhpri.org.

Notice of Availability of Language Assistance Services and Auxiliary Aids and Services

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 1-800-963-1001 (TTY 711) or speak to your provider.

تنبيه: إذا كنت تتحدث اللغة العربية، فستكون خدمات المساعدة اللغوية متاحة لك مجانًا. تتوفر أيضًا المساعدات والخدمات المساعدة المناسبة لتوفير المعلومات بتنسيقات بديلة لأصحاب الإعاقات مجانًا. اتصل على 1-800-963-1001 (هاتف الصم وضعاف السمع 711) أو تحدث إلى مقدم الخدمة الخاص بك.

注意：若您使用粵語，我們將為您提供免費的語言協助服務。此外，我們也提供適當的輔助設備與服務，為您提供免費且易於閱讀的資訊。致電 1-800-963-1001 (TTY 711) 或與您的供應商商討。

请注意：如果您说普通话，我们可以为您提供免费的语言援助服务。还会以通俗易懂的形式，免费提供相应的辅助性帮助和服务。请致电 1-800-963-1001 (TTY 711) 或直接联系您的供应商。

À NOTER : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et des services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 1-800-963-1001 (ATS 711) ou parlez à votre fournisseur.

ATANSYON: Si ou pale Kreyòl Ayisyen, sèvis asistans lang gratis disponib pou ou. Èd ak sèvis oksilyè apwopriye pou bay enfòmasyon nan fòma aksesib yo disponib tou gratis. Rele 1-800-963-1001 (TTY 711) oswa pale ak founisè w la.

ACHTUNG: Wenn Sie Deutsch sprechen, können Sie kostenlose Sprachassistenzdienste nutzen. Geeignete unterstützende Hilfen und Services, die Informationen in barrierefreien Formaten bereitstellen, sind ebenfalls kostenfrei. Rufen Sie 1-800-963-1001 (TTY 711) an oder kontaktieren Sie Ihren Anbieter.

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएं उपलब्ध हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक सहायता और सेवाएँ भी निःशुल्क उपलब्ध हैं। 1-800-963-1001 (TTY 711) पर कॉल करें या अपने प्रदाता से बात करें।

ATTENZIONE: Se parlate italiano, avete a disposizione dei servizi di assistenza linguistica gratuiti. Sempre gratuitamente, sono disponibili anche supporti e servizi ausiliari appropriati per fornivi informazioni in formati accessibili. Potete chiamare il numero 1-800-963-1001 (TTY 711) o parlare con il vostro fornitore.

注意：日本語を話せる場合には、無料の言語サービスをご利用いただけます。利用できる形式で情報を提供するための適切な補助器具・サービスも無料でご利用いただけます。1-800-963-1001（テキスト電話（TTY）711）にお電話でお問い合わせになるか、提供者にご相談ください。

ការយកចិត្តទុកដាក់៖ ប្រសិនបើអ្នកនិយាយភាសាខ្មែរ
សេវាជំនួយភាសាឥតគិតថ្លៃមានផ្តល់ជូនដល់អ្នក។ ក៏មានការផ្តល់ការគាំទ្រ
និងសេវាកម្មជំនួយសមស្របដោយឥតគិតថ្លៃក្នុងការផ្តល់ព័ត៌មានជាទម្រង់ដែលអាចចូលប្រើបានផងដែរ។ សូមហៅទូរសព្ទទៅលេខ 1-800-963-1001 (TTY 711) ឬពិគ្រោះយោបល់ជាមួយអ្នកផ្តល់សេវារបស់អ្នក។

참조: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이해 가능한 형식으로 정보를 제공하기 위한 적절한 보조 도구 및 서비스도 무료 이용하실 수 있습니다. 1-800-963-1001(TTY 711)로 전화하시거나 서비스 제공업체에 문의하세요.

UWAGA: Jeśli mówisz po polsku, możesz skorzystać z bezpłatnych usług językowych. Dostępne są również bezpłatne pomoce i usługi, które zapewniają informacje w zrozumiałym formacie. Zadzwoń pod numer 1-800-963-1001 (TTY 711) lub skonsultuj się ze swoim świadczeniodawcą.

ATENÇÃO: Se fala português, tem à sua disposição serviços de assistência linguística gratuitos. Estão também disponíveis, a título gratuito, ajudas e serviços auxiliares adequados para fornecer informações em formatos acessíveis. Ligue para 1-800-963-1001 (TDD 711) ou fale com o seu prestador

ВНИМАНИЕ! Если вы говорите по-русски, то вам доступны бесплатные услуги языковой поддержки. Также бесплатно предоставляются соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах. Позвоните по телефону 1-800-963-1001 (телетайп 711) или обратитесь к своему поставщику услуг.

ATENCIÓN: Si habla español, se ofrecen servicios gratuitos de asistencia con el idioma. También se ofrecen ayudas y servicios auxiliares apropiados para brindar información en formatos accesibles sin cargo alguno. Llame al 1-800-963-1001 (TTY 711) o consulte con su proveedor.

PANSININ: Kung nagsasalita ka ng Tagalog, magagamit mo ang mga libreng tulong serbisyo sa lengguwahe. Ang mga naaangkop na dagdag na mga pantulong at serbisyo upang magbigay ng impormasyon sa mga naa-access na porma ay magagamit din nang walang bayad. Tumawag sa 1-800-963-1001 (TTY 711) o makipag-usap sa iyong tagapagbigay.

CHÚ Ý: Nếu quý vị nói Tiếng Việt, có sẵn các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho quý vị. Các biện pháp hỗ trợ và dịch vụ phụ trợ phù hợp để cung cấp thông tin ở định dạng dễ tiếp cận cũng được cung cấp miễn phí. Hãy gọi số 1-800-963-1001 (TTY 711) hoặc nói chuyện với nhà cung cấp dịch vụ của quý vị.