

Open Medication Guide

July 2023

Please consider talking to your doctor about prescribing one of the formulary medications that are indicated as covered under your plan; which may help reduce your out-of-pocket costs. This list may help guide you and your doctor in selecting an appropriate medication for you.

The drug formulary is regularly updated. Please visit www.floridablue.com for the most up-to-date information.

Contents

Introduction	I
Medication list.....	II
Changes to the formulary	II
Your Share of Expenses.....	III
Pharmacy Benefits	III
Medications that are not covered	III
Condition Care Rx Program	IV
Generic drugs.....	IV
Oral Chemotherapy Drugs.....	IV
Over-the-counter (OTC) medications	IV
Patient Protection Affordable Care Act (PPACA) Preventive Services.....	V
Specialty Pharmacy medications.....	V
Pharmacy Options.....	VI
Participating Specialty Pharmacy Provider	VII
Mail Order Pharmacy also known as a home delivery service.....	VII
Three-month supply	VII
Utilization Management Programs	VIII
Obtaining Prior Authorization.....	VIII
Responsible Quantity Program	IX
Responsible Steps Program.....	IX
Responsible Steps (Medical Pharmacy) Program.....	IX
Notice	X
Using the Medication Guide	X
Abbreviation key	XI

Preferred Medication List

Anti-Infective Agents	1
Biologicals.....	13
Antineoplastic Agents	17
Endocrine and Metabolic Drugs.....	25
Cardiovascular Agents	39
Respiratory Agents.....	49
Gastrointestinal Agents	54
Genitourinary Agents	59
Central Nervous System Drugs	61
Analgesics and Anesthetics	72
Neuromuscular Drugs	79
Nutritional Products.....	87
Hematological Agents	90
Topical Products	96
Miscellaneous Products	107
Index	178

To search for a drug name within this PDF document, use the **Control** and **F** keys on your keyboard, or go to **Edit** in the drop-down menu and select **Find/Search**. Type in the word or phrase you are looking for and click on **Search**.

Introduction

Florida Blue and Florida Blue HMO are pleased to present the Open Formulary Medication Guide. This is a general guide that includes an abbreviated listing of Brand and Generic medications that are covered under your plan. Since coverage for medication varies by the plan purchased by you or your employer, it's important that you refer to your plan documents for complete coverage details. When we refer to "plan documents" we are referring to one or more of the following: Benefit Booklet, Certificate of Coverage, Contract, Member Handbook or prescription drug endorsement.

The Open Formulary Medication Guide provides helpful tips on how to make the most of your pharmacy benefits and details about the various coverage programs that are designed to provide safe and appropriate medication when you need it. Changes in the formulary can occur over time and the most up-to-date listing can always be found by viewing the Medication Guide online at www.floridablue.com or by calling the customer service number listed on your member ID card. For the hearing impaired, call Florida TTY Relay Service 711.

Si de se a hablar sobre esta guía en español con uno de nuestros representantes, por favor llame al número de atención al cliente indicado en su tarjeta de asegurado y pida ser transferido a un representante bilingüe.

NOTE: The decision concerning whether a prescription medication should be prescribed must be made by you and your physician. Any and all decisions that require or pertain to independent professional medical judgments or training, or the need for, and dosage of, a prescription medication, must be made solely by you and your treating physician in accordance with the patient/physician relationship.

Key Tips and Coverage Guidelines

By following these simple guidelines, you will be assured that you are getting the maximum benefit from your plan.

- When you have your prescriptions filled, ask your pharmacist if a generic equivalent is available. Generic medications are usually less expensive, and most generics are covered unless specifically excluded under your plan documents.
- Select Brand Name medications are included in the formulary and are therefore available to you through your plan. The List includes all covered brand name medications unless specifically excluded under your plan documents.
- Take this Guide with you when you visit your doctor or health care provider so that he or she is aware of the drugs listed and cost impacts when you discuss medication options.

Medication List

The Medication Guide includes the Preferred Medication List and some commonly prescribed Non-Preferred prescription medications. The Preferred Medication List reflects the current recommendations of Florida Blue and is developed in conjunction with Prime Therapeutics' National Pharmacy & Therapeutics Committee.

NOTE: This is not a complete listing of all covered prescriptions medications. Florida Blue reserves the right to modify (add, remove or change) the tier or apply limits of coverage to any prescription medication in this Medication Guide at any time.

For your out-of-pocket expenses to be as low as possible, please consider asking your doctor to prescribe generic medications, or if necessary, brand name medications that are included on the List. This will help ensure that your covered medications are allowed and reimbursed under your plan. In addition, consider using a participating pharmacy to obtain your covered medications because your out-of-pocket expenses should be lower than if you used a non-participating pharmacy.

To save the most money on medications, share this Medication Guide with your doctor or health care provider at each visit so he or she is aware of the drugs listed and cost impacts when you discuss medication options.

Changes to the formulary

This guide includes the medication list which reflects the current recommendations of Florida Blue and is developed in conjunction with Prime Therapeutics' National Pharmacy & Therapeutics Committee. Florida Blue reserves the right to add or remove or change the tier of any medication in this Medication Guide at any time.

The medication list is reviewed quarterly to examine new medications and new information about medications that are already on the market concerning safety, effectiveness and current use in therapy.

There are varying reasons changes are made to the medications listed in the Medication Guide:

- The tier level of a medication included on the medication list may increase (change to a higher tier or non-covered) when an FDA-approved bioequivalent generic medication becomes available.
- Newly marketed prescription medications may not be covered until the Pharmacy & Therapeutics Committee has had an opportunity to review the medication, to determine whether the medication will be covered and if so, which tier will apply based on safety, efficacy, and the availability of other products within that class of medications. Go to [New To Market Drug List](#) for the most up-to-date information.

The most up to date information about modifications to the medications listed in this Medication Guide can be found by:

Going to www.floridablue.com.

- Click on the **Members** tab.
- Click on the **Login Now** button and either **Login** or **Register**.
- Once Logged in, click on **My Plan**, then select **Pharmacy** under Additional Items.
- Under Pharmacy Resources, click on **Medication Guide & Specialty Pharmacy**
- Under **Medication Guide/Approved Drug Lists**, click [Open Medication Guide](#) or [Open Medication Guide Updates](#)
- Medication Guides and Medication Guide updates are posted every January, April July, and October.

Your Share of Expenses

Your cost share will depend on which cost share tier the medication is assigned. You can determine your out-of-pocket amount for medication by reviewing your Schedule of Benefits. If your plan includes a Deductible, you may have to satisfy that amount before the costs of your medications are covered.

If you or your provider requests a covered brand name medication when there is a generic medication available; you will be responsible for:
the difference in cost between the generic medication and the brand name medication; and the cost share applicable to brand name medication, as indicated on your Schedule of Benefits.

Example: If your drug copay is \$10 for generic and \$40 for brand, and you choose a brand name drug when a generic is available, here is what you might pay.

Difference in Drug Cost is \$70 (Brand Drug Cost \$120- Generic Drug Cost \$50) + Brand Co-Pay \$40=
\$110 is Your Total Cost

Pharmacy Benefits

The pharmacy benefit has three parts/components, called Tiers. This means that covered medications must be included in one of the following Tiers, unless specifically excluded by your plan:

Tier 1: Covered Generic Prescription Medications

Tier 2: Covered Preferred Brand Prescription Medications

Tier 3: Covered Non-Preferred Brand Prescription Medications or Medications not listed on the Preferred Medication List

Specialty Medications: Covered Specialty Medications as indicated in the Medication List. Your plan may include a separate cost share for Specialty Medications. Since coverage for medication varies by the plan purchases by you or your employer, it's important that you refer to your plan documents for complete coverage details.

Condition Care Rx* Value/HSA Preventive Prescription Medications: Refer to the Condition Care Rx Program section of this Medication Guide for a description of the program

Medications that are not covered

Your pharmacy benefit may not cover select medications. Some of the reasons a medication may not be covered are:

- The medication has been shown to have excessive adverse effects and/or safer alternatives.
- The medication has a preferred formulary alternative or over-the-counter (OTC) alternative.
- The medication is no longer marketed.
- The medication has a widely available/distributed AB rated generic equivalent formulation.
- The medication has not been approved by the FDA.
- The medication has been repackaged — a pharmaceutical product that is removed from the original manufacturer container (Brand Originator) and repackaged by another manufacturer with a different NDC.
- The medication is not covered because of safety or effectiveness concerns.

In addition to any drug not listed in the medication guide, a list of certain medication that are not covered may be found at [Medications Not Covered List](#).

NOTE: To determine the medication exclusions that apply to your plan, check your plan documents. Coverage details are also available to you by logging into the member section of www.floridablue.com.

Condition Care Rx Program

The Condition Care Rx Program is designed to help manage the cost of medications used to treat certain chronic conditions and encourage medication adherence. If members have the Condition Care Rx Program as part of their benefits, they can purchase medications from the Condition Care Rx Program Value/Health Savings Account Preventive List at a reduced cost.

A list of medications that are part of the Condition Care Rx Value Program may be found at: [Condition Care Rx Program Value List](#).

A list of medications that are part of the Condition Care Rx Program for Health Savings Account (HSA) compatible plans may be found at: [Condition Care Rx Program HSA Preventive List](#).

Note: Check your plan documents to determine if the Condition Care Rx Program applies to your plan and the applicable cost share. Coverage details may also be available to you by logging into the member section of www.floridablue.com or by calling the customer service number listed on your member ID card.

Generic drugs

Florida Blue encourages the use of generic medications as a way to provide high-quality medications at a reduced cost. Generic medications are as safe and effective as their brand name counterparts and are usually considerably less expensive.

A Food and Drug Administration (FDA) approved generic medication may be substituted for its brand name counterpart because it:

- Contains the same active ingredient(s) as the brand name medication.
- Is identical in strength, dosage form, and route of administration.
- Is therapeutically equivalent and can be expected to have the same clinical effect and safety profile.

Check with your doctor or health care provider to determine if switching to a generic medication is appropriate for you.

Oral Chemotherapy Drugs

Oral chemotherapy drugs are drugs prescribed by a physician to kill or slow the growth of cancerous cells in a manner consistent with the national accepted standards of practice. A list of these drugs can be found at: [Oral Chemotherapy Drug List](#).

Over-the-Counter (OTC) medications

An over-the-counter medication can be an appropriate treatment for some conditions and may offer a lower cost alternative to some commonly prescribed medications. Your pharmacy benefit may provide coverage for select OTC medications. Some groups may customize their pharmacy plan to exclude coverage for OTC medications, so it is important to check your plan documents to determine if OTC medications are covered under your plan. Only those OTC medications prescribed by your physician and designated on the formulary with "OTC" in parenthesis following the medication name are eligible for coverage.

NOTE: Check your plan documents to determine if this benefit applies to your plan. Coverage details are also available to you logging into the member section of www.floridablue.com.

Patient Protection Affordable Care Act (PPACA) Preventive Services

- Preventive medications - Certain preventive care services, medications, and immunizations are covered at no cost share when purchased at a participating pharmacy.

A list of medications covered under this benefit may be found at: [Preventive Medications List](#).

- Immunizations - Certain vaccines which are covered under your preventive benefit can be administered by pharmacists that are certified. Not all pharmacies provide services for vaccine administration. It is important to contact the pharmacy prior to your visit to ensure availability and administration of the vaccine.

A list of vaccines that are covered under your pharmacy benefits may be found at: [Pharmacy Benefit Vaccines List](#).

- Women's preventive services - Certain contraceptive medications or devices (e.g., oral contraceptives, emergency contraceptive, and diaphragms) are covered at no cost share when purchased at a participating pharmacy.

A list of medications and devices covered under this benefit may be found at: [Women's Preventive Services List](#).

Tier Exception Requests for Contraceptives & HIV Pre-Exposure Prophylaxis (PrEP)

If, for medical reasons, you need a contraceptive or HIV PrEP medication that is not included on these Preventive Service list(s), you may request an exception to waive the otherwise applicable cost sharing for your medication. To request an exception, your doctor must complete and submit request online at covermymeds.com or by fax using the Exception Request Forms in links below.

[Contraceptives Tier Exception Request Form](#)

[HIV PrEP Tier Exception Request Form](#)

Specialty Pharmacy medications

Specialty Pharmacy medications are high-cost injectable, infused, oral or inhaled medications that generally require close supervision and monitoring of the patient's therapy.

NOTE: Check your plan documents for information on how Specialty Pharmacy medications are covered on your plan. Coverage details are also available by calling the customer service number listed on your member ID card.

Specialty Medications are divided into two categories:

- Self-Administered Specialty Medication – Patients administer these Specialty Pharmacy medications themselves. Because these medications are intended to be self-administered, these medications may not be covered if administered in a physician's office. If these medications are not obtained from a participating Specialty Pharmacy, out-of-network cost shares will apply (where out-of-network coverage is available). [A current listing of Self-Administered Specialty Medications can be found here.](#)
- Self-administered injectable medications are designated in the Medication List with "inj" following the medication name (e.g., enoxaparin inj). No other Self-administered injectables will be covered unless such injectable is identified as a Specialty Drug in this Medication Guide. Self-administered injectables will be subject to the Brand or Generic cost share, as described in your Schedule of Benefits. Florida Blue reserves the right to change the Self-administered injectables covered through your plan at any time and for any reason.

- Provider-Administered Specialty Medications – These medications require the administration to be performed by a physician. The Specialty Pharmacy medications are ordered by a provider and administered in an office or outpatient setting. Provider-administered Specialty Pharmacy medications are covered under your *medical* benefit. [A current listing of Provider- Administered Specialty Medications can be found here.](#)

NOTE: We have noted medications that may be covered as either Self-Administered and/or Provider-Administered. Specialty Pharmacy products can be obtained as a pharmacy or medication benefit. Please check your handbook for details.

Pharmacy Options

There are two different types of pharmacies for you to be aware of as you decide where to get your prescriptions filled – retail pharmacies and specialty pharmacies. To save the most money, before you get a prescription filled, you should confirm which pharmacy is considered ‘in-network’ for that particular medication.

Participating Pharmacy

- Retail Pharmacy Network – Non-Specialty ‘Generic’ medications and ‘Brand Name’ medications listed in the Medication Guide can be filled at these pharmacies at a lower cost to you than other pharmacies in your area. If you go to a non-participating pharmacy, your prescription will cost you more.
- Specialty Pharmacy Network – We have identified certain drugs as specialty drugs due to requirements such as special handling, storage, training, distribution, and management of the therapy. These drugs are listed as a ‘Specialty Drug’ in this Medication Guide. To be covered under your pharmacy program at the in-network cost share, they must be purchased at a preferred Specialty Pharmacy. These pharmacies are **different** than the retail pharmacies and are identified in both the Provider Directory and this Medication Guide. Using an in-network Specialty Pharmacy to provide these Specialty Drugs lowers the amount you pay for these medications.
 - Limited Distribution (LD) Pharmacy – Drug manufacturers will choose one or a limited number of specialty pharmacies to handle and dispense certain specialty drugs. Typically, these drugs are costly and require special monitoring and prior authorization (pre-approval). The pharmacy that dispenses your limited distribution drug can be found here: [Limited Distribution Drugs](#)

Non-Participating Pharmacy

- If your plan offers out-of-network pharmacy coverage, choosing a non-participating pharmacy will cost you more money. You may have to pay the full cost of the medication and then file a claim for benefit determination. Our payment will be based on our Non-Participating Pharmacy Allowance minus your cost share. You will be responsible for your cost share and the difference between our Allowance and the cost of the medication.
- If your plan doesn’t offer out-of-network pharmacy coverage, choosing a non-participating pharmacy may risk your ability to be reimbursed. You may have to pay the full cost of the medication.

Participating Specialty Pharmacy Provider

If you are currently taking a Specialty Pharmacy medication, then your network for Specialty Pharmacies is limited to the following participating Specialty Pharmacy providers. Unless indicated below, any other pharmacy is considered a non-participating Specialty Pharmacy even if it participates in Florida Blue's networks for non-Specialty Pharmacy medications. You may pay more out of pocket if you use a different specialty pharmacy.

CVS/Caremark Specialty Pharmacy Services

Provider-Administered and Self-Administered Products;
excludes hemophilia

Phone: (866) 278-5108

Fax: (800) 323-2445

[CVS/Caremark Specialty Pharmacy](#)

Accredo

Self-Administered Products (excluding Hemophilia)

Phone: (888) 425-5970

Fax: (888) 302-1028

[Accredo](#)

CVS/Caremark Hemophilia Services

Hemophilia Products

Phone: (866) 792-2731

Fax: (866) 811-7450

(Mon-Fri., 9:00 a.m. to 7:30 p.m. EST)

[CVS/Caremark Hemophilia Specialty Pharmacy](#)

AllianceRx Walgreens Prime

****Baptist Employer Group B0496 ONLY****

Self-Administered Products (excluding Hemophilia)

Phone: (877) 627-6337

Fax: (877) 828-3939

[AllianceRx Walgreens Prime](#)

Note: Specialty Pharmacy medications are not covered when purchased through the Mail Order Pharmacy.

Self-administered specialty medications as classified by Florida Blue outside of the state of Florida may be obtained by a member with a written prescription through the preferred specialty pharmacy providers [Accredo](#) or [CVS/Caremark Specialty](#).

If a member resides or is traveling outside the state of Florida and needs to receive a provider-administered specialty medication, the prescribing physician should coordinate with the participating specialty pharmacy provider for their area or contact the local BlueCross and BlueShield Plan. This coordination can help ensure members receive their medications at the in-network cost share.

Members that receive a written prescription directly from their provider for a provider-administered specialty medication should contact customer service for further assistance.

Mail Order Pharmacy (also known as home delivery)

Most plans home delivery pharmacy is serviced by [Amazon Pharmacy](#). To confirm your home delivery pharmacy provider, log into [floridablue.com](#) and view the home delivery section in your member account for additional details.

NOTE: If the original prescription was filled at a pharmacy other than the home delivery pharmacy, a new, original three-month supply prescription with a quantity of up to a three-month supply and not less than a two-month supply will be required. Prescriptions may not be transferred from a retail pharmacy to the home delivery pharmacy.

Three-month supply at Retail Pharmacy

In addition to being able to obtain up to a three-month supply of medication through our home delivery pharmacy, you may be able to receive up to a three-month supply of your medication through a participating retail pharmacy. Please refer to your Benefit Booklet, Certificate of Coverage, Contract, Member Handbook or prescription drug endorsement for complete coverage details.

Utilization Management Programs

Prior Authorization Program

The Prior Authorization Program encourages the appropriate, safe and cost-effective use of medication. If you are currently taking or are prescribed a medication that is included in the Prior Authorization Program, your physician will need to submit a request form in order for your prescription to be considered for coverage. If you do not request and/or receive prior approval, the medication will not be covered. A current listing of drugs requiring prior authorization are indicated in the prior authorization column following the product name in the medication list.

Florida Blue reserves the right to change the medications that require Prior Authorization at any time and for any reason.

NOTE: Some groups may customize their pharmacy plan to exclude prior authorization requirements, so it is important to check your plan documents to determine if prior authorization requirements apply to your plan. Coverage details are also available to you by logging into the member section of www.floridablue.com.

NOTE: Prior Authorizations expire on the earlier of, but not to exceed 12 months for most medications:

- o The termination date of your policy or
- o The period authorized by us, as indicated in the letter you received from us.

Obtaining Prior Authorization

Information about **Prior Authorization** and forms for how to obtain a prior authorization approval can be found here: [Prior Authorization Program Information and Forms](#)

NOTE: Your provider is required to complete and submit the Prior Authorization form in order for a coverage determination to be made.

1. Once a decision is made, you and/or your doctor will be informed of the decision.
2. If the decision is made to authorize coverage, the medication(s) and/or supplies may be obtained from a participating pharmacy or at the appropriate location if the medication(s) will be administered by a health professional. Prior authorization approval does not waive your cost share.
3. If a decision is made to deny authorization, you are free to purchase the prescription medication, supplies or over-the-counter (OTC) medication, but you will have to pay the full cost of the medication and will not be entitled to reimbursement under your plan.

NOTE: You have the right to request an appeal if coverage authorization is denied. Please refer to the “How to Appeal an Adverse Benefit Determination” subsection of the Claims Processing or Appeal and Grievance Process section in your current plan documents for information on how to file an appeal.

Responsible Quantity Program

The Responsible Quantity Program encourages the appropriate, safe and cost-effective use of medication by setting a maximum quantity per month for a medication or supply. The quantity limitations are based on the Food and Drug Administration guidelines and the manufacturer's dosing recommendations. Medications that are subject to this program are indicated in the quantity limits column following the product name in the medication list.

Florida Blue reserves the right to change the Drugs and the quantity limits subject to the Responsible Quantity Program at any time and for any reason. In cases where a larger quantity of a Responsible Quantity Drug is medically required, your doctor or health care provider can request an override.

Information about the Responsible Quantity Program and steps for how to obtain an exception can be found here:

[Responsible Quantity Program Information](#)

[Responsible Quantity Authorization Form](#)

Responsible Steps Program

The Responsible Steps Program promotes the appropriate, safe, and effective use of medications and helps you save on prescriptions. Responsible Steps is based on nationally recognized therapeutic guidelines, clinical evidence, and research. Prescription medications included in the Responsible Steps Program are not covered unless you have tried one or more covered alternative medications first.

A list of current drugs included in the Responsible Steps Program may be found

here: [Responsible Steps Program Information and Authorization Forms](#)

Responsible Steps Program for Medical Pharmacy

Certain physician-administered prescription drugs which are rendered in a physician's office may be included in the Responsible Steps for Medical Pharmacy Program. If you are taking a medication in the Responsible Steps Program, please contact your physician/provider to discuss what medication options are best for you.

If, due to medical reasons, you cannot use the prerequisite drug and require the Responsible Steps Medication, your doctor or health care provider may request prior authorization for an override. If the override request is approved, coverage will be provided for the Responsible Steps Medication. Florida Blue reserves the right to change the drugs subject to the Responsible Steps Program at any time and for any reason.

A list of current drugs included in the Responsible Steps Program for Medical Pharmacy may be found here:

[Responsible Steps Program for Medical Pharmacy Information and Authorization Forms](#)

NOTE: Check your plan documents to determine if Responsible Steps requirements apply to your plan. Coverage details are also available to you by logging into the member section of www.floridablue.com or by calling the customer service number listed on your ID card.

Coverage Protocol Exemption

Your doctor may want to prescribe a medication for a condition that is different from the step-therapy protocol developed by Florida Blue. If this is the case, either you or your doctor can request an exemption by submitting a [Coverage Protocol Exemption Request](#).

Notice

This Medication Guide shall not extend, vary, alter, replace, or waive any of the provisions, benefits, exclusions, limitations, or conditions contained in your plan documents. In the event of any inconsistencies between the Medication Guide and the provisions contained in your plan documents, the provisions contained in your plan documents shall control to the extent necessary to effectuate the intent of Blue Cross and Blue Shield of Florida and Health Options, Inc.

How to use this Drug list

Column 1: Drug Name

The drug list is organized into broad categories (e.g., HORMONES, DIABETES AND RELATED DRUGS). Please use the drug search function (Ctrl+F) to find current information for drugs on the drug list. Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). Some generic products have no reference brand. Brand prescription drugs are shown in capital letters followed by the generic name. The Requirements/Limits column displays information about whether that drug requires prior authorization, responsible step, limited distribution, or quantity limits. Below are the meanings of the indicators used in the Drug Tier and Requirements/Limits columns.

Column 2: Drug Tier

Indicates the formulary tier level for each drug.

Column 3: Specialty (SP)

Indicates this is a self-administered specialty drug.

Note: Additional information about specialty drugs can be found in this document under Specialty Pharmacy medications, Self-Administered.

Column 4: Requirements/Limits

- **Prior Authorization (PA)**- Some drugs require prior authorization to ensure appropriate use and prescribing before a drug will be covered. Coverage may be approved after certain criteria are met. Approval is required for claims to process at network pharmacies. If the PA indicator is present, then the PA program noted is possibly applied to your benefit.
- **Responsible Steps (ST)**- Requires members to try another drug that may be more safe, clinically effective and, in some cases, less expensive, before a more expensive drug will be approved. If the ST indicator is present, then the ST program noted is possibly applied to your benefit.
- **Limited Distribution (LD)**- Drug manufacturers will choose one or limited number of specialty pharmacies to dispense drugs. Additional information about limited distribution drugs can be found in this document under Participating Pharmacy.
- **Quantity Limits (QL)**- Certain drugs have quantity limits to encourage safe and appropriate use. The quantity limit is the maximum quantity that can be dispensed over a given period of time. If the QL indicator is present, then the QL program noted is possibly applied to your benefit.

Some plans may have Utilization Management (UM) programs (e.g., PA, QL, and ST) on additional drugs beyond those noted in this document.

Abbreviation key

aer.....aerosol
cap.....capsules
chew.....chewable
conc.....concentrate
cr.....controlled release
dr.....delayed release
ec.....enteric coated
equiv.....equivalent
er.....extended release
gm.....gram
inhal.....inhaler
inj.....injection
liqd.....liquid
mg.....milligram
ml.....milliliter

nebu.....nebulizer
odt.....orally disintegrating tabs
oint.....ointment
ophth.....ophthalmic
osm.....osmotic release
pack.....packets
powd.....powder
pttw.....twice-weekly patch
sl.....sublingual
soln.....solution
suppos.....suppositories
susp.....suspension
tab.....tablets
td.....transdermal
w/.....with

To determine if your drug is covered and/or find drug pricing, please login to Your Account on the Florida Blue website at www.floridablue.com. In Your Account choose Tools, and then Compare Drug Prices.

Adalimumab Coverage

This listing is reflective of FDA approved products and projected product launches. All Adalimumab products are subject to Prior Authorization, Quantity/Dispensing Limits, and Specialty designations as applicable.

Preferred Adalimumab Products

This list includes any existing preferred adalimumab products or biosimilar adalimumab additions to the drug list.

TRADE NAME (generic name)	Manufacturer	Brand/Generic Product	Effective Date	Description of Coverage
AMJEVITA (adalimumab-atto)*	Amgen	Brand	7/1/23	Preferred, biosimilar for HUMIRA
HADLIMA (adalimumab-bwwd)	Samsung/ Organon	Brand	Upon Launch	Preferred, biosimilar for HUMIRA
HUMIRA (adalimumab)	AbbVie	Brand	Current	Preferred

* = NDCs starting with 55513

Non-Formulary/Non-Preferred Adalimumab Products

This list includes new-to-market biosimilar adalimumab products that have been evaluated and are non-formulary/non-preferred on the drug list.

TRADE NAME (generic name)	Manufacturer	Brand/Generic Product	Effective Date	Description of Coverage
ABRILADA (adalimumab-afzb)	Pfizer	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
ADALIMUMAB (adalimumab-adaz)	Sandoz	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
ADALIMUMAB (adalimumab-fkjp)	Viatris	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
AMJEVITA (adalimumab-atto)**	Amgen	Brand	Current	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
CYLTEZO (adalimumab-adbm)	Boehringer Ingelheim	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
HULIO (adalimumab-fkjp)	Viatris	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
HYRIMOZ (adalimumab-adaz)	Sandoz	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
IDACIO (adalimumab-aacf)	Fresenius Kabi	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
YUFLYMA (adalimumab-++++)	Celltrion	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA
YUSIMRY (adalimumab-aqvh)	Coherus	Brand	Upon Launch	Non-Formulary/Non-Preferred, biosimilar for HUMIRA

+ = Biosimilar suffix placeholder. Suffix is assigned upon FDA approval

** = NDC starting with 72511

Drug Name	Drug Tier	Specialty	Requirements/Limits
ANTI-INFECTIVE AGENTS			
PENICILLINS			
AMOXICILLIN - amoxicillin (trihydrate) chew tab 125 mg	3		
AMOXICILLIN - amoxicillin (trihydrate) chew tab 250 mg	2		
amoxicillin (trihydrate) cap 250 mg, 500 mg	1		
amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml	1		
amoxicillin (trihydrate) tab 500 mg, 875 mg	1		
amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml	1		
amoxicillin & k clavulanate for susp 600-42.9 mg/5ml (Augmentin es-600)	1		
amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg	1		
amoxicillin & k clavulanate tab 500-125 mg (Augmentin)	1		
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate chew tab 200-28.5 mg, 400-57 mg	3		
AMOXICILLIN/CLAVULANATE P - amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	3		
AMPICILLIN - ampicillin cap 500 mg	2		
AUGMENTIN - amoxicillin & k clavulanate tab 500-125 mg	3		
AUGMENTIN - amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	2		
AUGMENTIN ES-600 - amoxicillin & k clavulanate for susp 600-42.9 mg/5ml	3		
dicloxacillin sodium cap 250 mg, 500 mg	1		
PENICILLIN V POTASSIUM - penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	2		
penicillin v potassium tab 250 mg, 500 mg	1		
CEPHALOSPORINS			
CEFACLOR - cefaclor cap 250 mg, 500 mg	3		
CEFACLOR - cefaclor for susp 125 mg/5ml, 250 mg/5ml, 375 mg/5ml	3		
CEFADROXIL - cefadroxil tab 1 gm	3		
cefadroxil cap 500 mg	1		
cefadroxil for susp 250 mg/5ml, 500 mg/5ml	1		
cefdinir cap 300 mg	1		
cefdinir for susp 125 mg/5ml, 250 mg/5ml	1		
cefixime cap 400 mg (Suprax)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
cefixime for susp 100 mg/5ml	1		
cefixime for susp 200 mg/5ml (Suprax)	1		
cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	1		
cefpodoxime proxetil tab 100 mg, 200 mg	1		
cefprozil for susp 125 mg/5ml, 250 mg/5ml	1		
cefprozil tab 250 mg, 500 mg	1		
cefuroxime axetil tab 250 mg, 500 mg	1		
cephalexin cap 250 mg, 500 mg	1		
cephalexin for susp 125 mg/5ml, 250 mg/5ml	1		
SUPRAX - cefixime cap 400 mg	3		
SUPRAX - cefixime chew tab 100 mg, 200 mg	2		
SUPRAX - cefixime for susp 200 mg/5ml	3		
SUPRAX - cefixime for susp 500 mg/5ml	2		
MACROLIDES			
AZITHROMYCIN - azithromycin powd pack for susp 1 gm	3		
azithromycin for susp 100 mg/5ml, 200 mg/5ml (Zithromax)	1		
azithromycin tab 250 mg, 500 mg (Zithromax)	1		
azithromycin tab 600 mg	1		
CLARITHROMYCIN - clarithromycin for susp 125 mg/5ml, 250 mg/5ml	3		
clarithromycin tab er 24hr 500 mg	1		
clarithromycin tab 250 mg, 500 mg	1		
DIFICID - fidaxomicin tab 200 mg	2		QL (40 tablets/180 days)
DIFICID - fidaxomicin for susp 40 mg/ml	2		QL (272 mls/180 days)
E.E.S. GRANULES - erythromycin ethylsuccinate for susp 200 mg/5ml	3		
E.E.S. 400 - erythromycin ethylsuccinate tab 400 mg	3		
ERYPED 200 - erythromycin ethylsuccinate for susp 200 mg/5ml	3		
ERYPED 400 - erythromycin ethylsuccinate for susp 400 mg/5ml	3		
ERYTHROCIN STEARATE - erythromycin stearate tab 250 mg	3		
ERYTHROMYCIN - erythromycin w/ delayed release particles cap 250 mg	3		
ERYTHROMYCIN ETHYLSUCCINA - erythromycin ethylsuccinate tab 400 mg	3		

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erythromycin ethylsuccinate for susp 200 mg/5ml (E.e.s. granules)	1		
erythromycin ethylsuccinate for susp 400 mg/5ml (Eryped 400)	1		
erythromycin tab delayed release 250 mg, 333 mg, 500 mg	1		
erythromycin tab 250 mg, 500 mg	1		
ZITHROMAX - azithromycin powd pack for susp 1 gm	2		
TETRACYCLINES			
demeclocycline hcl tab 150 mg, 300 mg	1		
doxycycline hyclate cap 50 mg	1		
doxycycline hyclate cap 100 mg (Vibramycin)	1		
doxycycline hyclate tab 20 mg, 50 mg, 100 mg	1		
doxycycline monohydrate cap 50 mg, 100 mg	1		
doxycycline monohydrate for susp 25 mg/5ml (Vibramycin)	1		
doxycycline monohydrate tab 50 mg, 75 mg, 100 mg	1		
minocycline hcl cap 50 mg, 75 mg, 100 mg	1		
NUZYRA - omadacycline tosylate tab 150 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/30 days)
tetracycline hcl cap 250 mg, 500 mg	1		
FLUOROQUINOLONES			
BAXDELA - delafloxacin meglumine tab 450 mg (base equiv)	3		PA, QL (28 tablets/14 days)
CIPRO - ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	3		
CIPRO - ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)	2		
CIPROFLOXACIN HCL - ciprofloxacin hcl tab 100 mg (base equiv)	3		
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv) (Cipro)	1		
ciprofloxacin hcl tab 750 mg (base equiv)	1		
LEVOFLOXACIN - levofloxacin oral soln 25 mg/ml	2		
levofloxacin tab 250 mg, 500 mg, 750 mg	1		
moxifloxacin hcl tab 400 mg (base equiv)	1		
OFLOXACIN - ofloxacin tab 300 mg	3		
ofloxacin tab 400 mg	1		
AMINOGLYCOSIDES			
ARIKAYCE - amikacin sulfate liposome inhal susp 590 mg/8.4ml (base eq)	3	SP	LD

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BETHKIS - tobramycin nebu soln 300 mg/4ml	3	SP	LD
HUMATIN - paromomycin sulfate cap 250 mg	3		LD
KITABIS PAK - tobramycin nebu soln 300 mg/5ml	3	SP	LD
neomycin sulfate tab 500 mg	1		
paromomycin sulfate cap 250 mg (Humatin)	1		
TOBI PODHALER - tobramycin inhal cap 28 mg	2	SP	LD
TOBRAMYCIN - tobramycin nebu soln 300 mg/5ml	3	SP	
tobramycin nebu soln 300 mg/5ml (Tobi)	1	SP	
tobramycin nebu soln 300 mg/4ml (Bethkis)	1	SP	
SULFONAMIDES			
SULFADIAZINE - sulfadiazine tab 500 mg	2		
ANTIMYCOBACTERIAL AGENTS			
cycloserine cap 250 mg	1		
ethambutol hcl tab 100 mg	1		
ethambutol hcl tab 400 mg (Myambutol)	1		
ISONIAZID - isoniazid tab 100 mg	3		
isoniazid syrup 50 mg/5ml	1		
isoniazid tab 300 mg	1		
MYAMBUTOL - ethambutol hcl tab 400 mg	3		
MYCOBUTIN - rifabutin cap 150 mg	3		
PRETOMANID - pretomanid tab 200 mg	3		QL (180 tablets/365 days)
PRIFTIN - rifapentine tab 150 mg	2		
pyrazinamide tab 500 mg	1		
rifabutin cap 150 mg (Mycobutin)	1		
rifampin cap 150 mg, 300 mg	1		
SIRTURO - bedaquiline fumarate tab 20 mg (base equiv)	3	SP	LD, QL (940 tablets/365 days)
SIRTURO - bedaquiline fumarate tab 100 mg (base equiv)	3	SP	LD, QL (188 tablets/365 days)
TRECTOR - ethionamide tab 250 mg	3		
ANTIFUNGALS			
ANCOBON - flucytosine cap 250 mg, 500 mg	3		
CRESEMBA - isavuconazonium sulfate cap 186 mg (isavuconazole 100 mg)	3		PA
DIFLUCAN - fluconazole for susp 10 mg/ml, 40 mg/ml	3		
fluconazole for susp 10 mg/ml, 40 mg/ml (Diflucan)	1		
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg (Diflucan)	1		
flucytosine cap 250 mg, 500 mg (Ancobon)	1		
griseofulvin microsize susp 125 mg/5ml	1		
griseofulvin microsize tab 500 mg	1		

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griseofulvin ultramicrosize tab 125 mg, 250 mg	1		
itraconazole cap 100 mg (Sporanox)	1		PA, QL (120 capsules/30 days)
itraconazole oral soln 10 mg/ml (Sporanox)	1		PA, QL (1200 mls/30 days)
ketoconazole tab 200 mg	1		
NOXAFIL - posaconazole tab delayed release 100 mg	3		PA
NOXAFIL - posaconazole susp 40 mg/ml	3		PA
NOXAFIL - posaconazole for delayed release susp packet 300 mg	2		PA
nystatin tab 500000 unit	1		
posaconazole susp 40 mg/ml (Noxafil)	1		PA
posaconazole tab delayed release 100 mg (Noxafil)	1		PA
SPORANOX - itraconazole cap 100 mg	3		PA, QL (120 capsules/30 days)
SPORANOX - itraconazole oral soln 10 mg/ml	3		PA, QL (1200 mls/30 days)
terbinafine hcl tab 250 mg	1		QL (30 tablets/30 days)
VFEND - voriconazole tab 50 mg, 200 mg	3		PA
VFEND - voriconazole for susp 40 mg/ml	3		PA
VIVJOA - oteseconazole cap therapy pack 150 mg (12 weeks)	3		PA, QL (18 capsules/180 days)
voriconazole for susp 40 mg/ml (Vfend)	1		PA
voriconazole tab 50 mg, 200 mg (Vfend)	1		PA
ANTIVIRALS			
abacavir sulfate soln 20 mg/ml (base equiv) (Ziagen)	1		QL (960 mls/30 days)
abacavir sulfate tab 300 mg (base equiv) (Ziagen)	1		QL (60 tablets/30 days)
abacavir sulfate-lamivudine tab 600-300 mg (Epzicom)	1		QL (30 tablets/30 days)
acyclovir cap 200 mg	1		
acyclovir susp 200 mg/5ml (Zovirax)	1		
acyclovir tab 400 mg, 800 mg	1		
adefovir dipivoxil tab 10 mg (Hepsera)	1		QL (30 tablets/30 days)
APTIVUS - tipranavir cap 250 mg	2		QL (120 capsules/30 days)
atazanavir sulfate cap 150 mg (base equiv)	1		QL (30 capsules/30 days)
atazanavir sulfate cap 200 mg (base equiv) (Reyataz)	1		QL (60 capsules/30 days)
atazanavir sulfate cap 300 mg (base equiv) (Reyataz)	1		QL (30 capsules/30 days)
BARACLUDE - entecavir oral soln 0.05 mg/ml	2		QL (630 mls/30 days)
BIKTARVY - bicitgravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	2		QL (30 tablets/30 days)
CIMDUO - lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	2		QL (30 tablets/30 days)
COMBIVIR - lamivudine-zidovudine tab 150-300 mg	3		QL (60 tablets/30 days)

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COMPLERA - emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg	2		QL (30 tablets/30 days)
DELSTRIGO - doravirine-lamivudine-tenofovir df tab 100-300-300 mg	2		QL (30 tablets/30 days)
DESCOVY - emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg	2		QL (30 tablets/30 days)
DOVATO - dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	2		QL (30 tablets/30 days)
EDURANT - rilpivirine hcl tab 25 mg (base equivalent)	2		QL (30 tablets/30 days)
EFAVIRENZ - efavirenz cap 50 mg	2		QL (90 capsules/30 days)
EFAVIRENZ - efavirenz cap 200 mg	2		QL (60 capsules/30 days)
efavirenz tab 600 mg (Sustiva)	1		QL (30 tablets/30 days)
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg	1		QL (30 tablets/30 days)
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg (Symfi lo)	1		QL (30 tablets/30 days)
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg (Symfi)	1		QL (30 tablets/30 days)
emtricitabine caps 200 mg (Emtriva)	1		QL (30 capsules/30 days)
emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg (Truvada)	1		QL (30 tablets/30 days)
EMTRIVA - emtricitabine caps 200 mg	3		QL (30 capsules/30 days)
EMTRIVA - emtricitabine soln 10 mg/ml	2		QL (680 mls/28 days)
entecavir tab 0.5 mg, 1 mg (Baraclude)	1		QL (30 tablets/30 days)
EPCLUSA - sofosbuvir-velpatasvir tab 200-50 mg	2	SP	PA, QL (30 tablets/30 days)
EPCLUSA - sofosbuvir-velpatasvir tab 400-100 mg	2	SP	PA, QL (28 tablets/28 days)
EPCLUSA - sofosbuvir-velpatasvir pellet pack 150-37.5 mg	2	SP	PA, QL (30 packets/30 days)
EPCLUSA - sofosbuvir-velpatasvir pellet pack 200-50 mg	2	SP	PA, QL (60 packets/30 days)
EPIVIR - lamivudine oral soln 10 mg/ml	3		QL (960 mls/30 days)
EPIVIR - lamivudine tab 150 mg	3		QL (60 tablets/30 days)
EPIVIR - lamivudine tab 300 mg	3		QL (30 tablets/30 days)
EPZICOM - abacavir sulfate-lamivudine tab 600-300 mg	3		QL (30 tablets/30 days)
etravirine tab 100 mg, 200 mg (Intelence)	1		QL (60 tablets/30 days)
EVOTAZ - atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	2		QL (30 tablets/30 days)
famciclovir tab 125 mg, 250 mg, 500 mg	1		
fosamprenavir calcium tab 700 mg (base equiv) (Lexiva)	1		QL (120 tablets/30 days)
FUZEON - enfuvirtide for inj 90 mg	2	SP	QL (60 vials/30 days)

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GENVOYA - elvitegrav-cobic-emtricitab-tenofovir af tab 150-150-200-10 mg	2		QL (30 tablets/30 days)
HARVONI - ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	2	SP	PA, QL (30 packets/30 days)
HARVONI - ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg	2	SP	PA, QL (30 tablets/30 days)
INTELENCE - etravirine tab 25 mg	2		QL (120 tablets/30 days)
INTELENCE - etravirine tab 100 mg, 200 mg	3		QL (60 tablets/30 days)
ISENTRESS - raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	2		QL (180 tablets/30 days)
ISENTRESS - raltegravir potassium packet for susp 100 mg (base equiv)	2		QL (60 packets/30 days)
ISENTRESS - raltegravir potassium tab 400 mg (base equiv)	2		QL (60 tablets/30 days)
ISENTRESS HD - raltegravir potassium tab 600 mg (base equiv)	2		QL (60 tablets/30 days)
JULUCA - dolutegravir sodium-ripirovirine hcl tab 50-25 mg (base eq)	2		QL (30 tablets/30 days)
KALETRA - lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)	3		QL (480 mls/30 days)
KALETRA - lopinavir-ritonavir tab 100-25 mg	3		QL (180 tablets/30 days)
KALETRA - lopinavir-ritonavir tab 200-50 mg	3		QL (120 tablets/30 days)
LAGEVRIO - molnupiravir cap 200 mg	3		QL (40 capsules/30 days)
lamivudine oral soln 10 mg/ml (Epivir)	1		QL (960 mls/30 days)
lamivudine tab 100 mg (hbv) (Epivir hbv)	1		QL (30 tablets/30 days)
lamivudine tab 150 mg (Epivir)	1		QL (60 tablets/30 days)
lamivudine tab 300 mg (Epivir)	1		QL (30 tablets/30 days)
lamivudine-zidovudine tab 150-300 mg (Combivir)	1		QL (60 tablets/30 days)
LEDIPASVIR/SOFOSBUVIR - ledipasvir-sofosbuvir tab 90-400 mg	2	SP	PA, QL (30 tablets/30 days)
LEXIVA - fosamprenavir calcium tab 700 mg (base equiv)	3		QL (120 tablets/30 days)
LEXIVA - fosamprenavir calcium susp 50 mg/ml (base equiv)	2		QL (1800 mls/30 days)
LIVTENCITY - maribavir tab 200 mg	3	SP	PA, LD, QL (120 tablets/30 days)
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) (Kaletra)	1		QL (480 mls/30 days)
lopinavir-ritonavir tab 100-25 mg (Kaletra)	1		QL (180 tablets/30 days)
lopinavir-ritonavir tab 200-50 mg (Kaletra)	1		QL (120 tablets/30 days)
maraviroc tab 150 mg (Selzentry)	1		QL (60 tablets/30 days)
maraviroc tab 300 mg (Selzentry)	1		QL (120 tablets/30 days)
MAVYRET - glecaprevir-pibrentasvir tab 100-40 mg	2	SP	PA, QL (90 tablets/30 days)

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MAVYRET - glecaprevir-pibrentasvir pellet pack 50-20 mg	2	SP	PA, QL (150 packets/30 days)
NEVIRAPINE - nevirapine susp 50 mg/5ml	2		QL (1200 mls/30 days)
NEVIRAPINE ER - nevirapine tab er 24hr 100 mg	2		QL (90 tablets/30 days)
nevirapine tab er 24hr 400 mg	1		QL (30 tablets/30 days)
nevirapine tab 200 mg	1		QL (60 tablets/30 days)
NORVIR - ritonavir tab 100 mg	3		QL (360 tablets/30 days)
NORVIR - ritonavir powder packet 100 mg	2		QL (360 packets/30 days)
ODEFSEY - emtricitabine-ripirovirine-tenofovir af tab 200-25-25 mg	2		QL (30 tablets/30 days)
oseltamivir phosphate cap 30 mg (base equiv) (Tamiflu)	1		QL (40 capsules/120 days)
oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv) (Tamiflu)	1		QL (20 capsules/120 days)
oseltamivir phosphate for susp 6 mg/ml (base equiv) (Tamiflu)	1		QL (300 mls/120 days)
PAXLOVID - nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	3		QL (20 tablets/30 days)
PAXLOVID - nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	3		QL (30 tablets/30 days)
PEGASYS - peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	3	SP	PA
PEGASYS - peginterferon alfa-2a inj 180 mcg/ml	3	SP	PA
PIFELTRO - doravirine tab 100 mg	2		QL (30 tablets/30 days)
PREVYMIS - letermovir tab 240 mg, 480 mg	3		
PREZCOBIX - darunavir-cobicistat tab 800-150 mg	2		QL (30 tablets/30 days)
PREZISTA - darunavir oral susp 100 mg/ml	2		QL (400 mls/30 days)
PREZISTA - darunavir tab 75 mg	2		QL (300 tablets/30 days)
PREZISTA - darunavir tab 150 mg	2		QL (180 tablets/30 days)
PREZISTA - darunavir tab 600 mg	2		QL (60 tablets/30 days)
PREZISTA - darunavir tab 800 mg	2		QL (30 tablets/30 days)
RELENZA DISKHALER - zanamivir aerosol powder breath activated 5 mg/act	3		QL (40 blisters/120 days)
RETROVIR - zidovudine cap 100 mg	3		QL (180 capsules/30 days)
RETROVIR - zidovudine syrup 10 mg/ml	3		QL (1920 mls/30 days)
REYATAZ - atazanavir sulfate oral powder packet 50 mg (base equiv)	2		QL (240 packets/30 days)
REYATAZ - atazanavir sulfate cap 200 mg (base equiv)	3		QL (60 capsules/30 days)
REYATAZ - atazanavir sulfate cap 300 mg (base equiv)	3		QL (30 capsules/30 days)
RIBAVIRIN - ribavirin cap 200 mg	2		
RIBAVIRIN - ribavirin tab 200 mg	2		

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RIMANTADINE HYDROCHLORIDE - rimantadine hydrochloride tab 100 mg	3		
ritonavir tab 100 mg (Norvir)	1		QL (360 tablets/30 days)
RUKOBIA - fostemsavir tromethamine tab er 12hr 600 mg	2		QL (60 tablets/30 days)
SELZENTRY - maraviroc oral soln 20 mg/ml	2		QL (1840 mls/30 days)
SELZENTRY - maraviroc tab 25 mg	2		QL (240 tablets/30 days)
SELZENTRY - maraviroc tab 75 mg	2		QL (60 tablets/30 days)
SELZENTRY - maraviroc tab 150 mg	3		QL (60 tablets/30 days)
SELZENTRY - maraviroc tab 300 mg	3		QL (120 tablets/30 days)
SOFOSBUVIR/VELPATASVIR - sofosbuvir-velpatasvir tab 400-100 mg	2	SP	PA, QL (28 tablets/28 days)
SOVALDI - sofosbuvir tab 200 mg, 400 mg	2	SP	PA, QL (30 tablets/30 days)
SOVALDI - sofosbuvir pellet pack 150 mg, 200 mg	2	SP	PA, QL (30 packets/30 days)
STAVUDINE - stavudine cap 15 mg, 20 mg, 30 mg, 40 mg	2		QL (60 capsules/30 days)
STRIBILD - elvitegrav-cobic-emtricitab-tenofovd tab 150-150-200-300 mg	2		QL (30 tablets/30 days)
SYMFI - efavirenz-lamivudine-tenofovir df tab 600-300-300 mg	3		QL (30 tablets/30 days)
SYMFI LO - efavirenz-lamivudine-tenofovir df tab 400-300-300 mg	3		QL (30 tablets/30 days)
SYMTUZA - darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	2		QL (30 tablets/30 days)
TAMIFLU - oseltamivir phosphate for susp 6 mg/ml (base equiv)	3		QL (300 mls/120 days)
TAMIFLU - oseltamivir phosphate cap 30 mg (base equiv)	3		QL (40 capsules/120 days)
TAMIFLU - oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv)	3		QL (20 capsules/120 days)
TEMBEXA - brincidofovir tab 100 mg	3		
TEMBEXA - brincidofovir oral susp 10 mg/ml	3		
tenofovir disoproxil fumarate tab 300 mg (Viread)	1		QL (30 tablets/30 days)
TIVICAY - dolutegravir sodium tab 10 mg (base equiv)	2		QL (240 tablets/30 days)
TIVICAY - dolutegravir sodium tab 25 mg (base equiv), 50 mg (base equiv)	2		QL (60 tablets/30 days)
TIVICAY PD - dolutegravir sodium tab for oral susp 5 mg (base equiv)	2		QL (360 tablets/30 days)
TRIUMEQ - abacavir-dolutegravir-lamivudine tab 600-50-300 mg	2		QL (30 tablets/30 days)
TRIUMEQ PD - abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	2		QL (180 tablets/30 days)

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TRIZIVIR - abacavir sulfate-lamivudine-zidovudine tab 300-150-300 mg	2		QL (60 tablets/30 days)
TRUVADA - emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg	3		QL (30 tablets/30 days)
TYBOST - cobicistat tab 150 mg	2		QL (30 tablets/30 days)
valacyclovir hcl tab 500 mg, 1 gm (Valtrex)	1		
valganciclovir hcl for soln 50 mg/ml (base equiv) (Valcyte)	1		
valganciclovir hcl tab 450 mg (base equivalent) (Valcyte)	1		
VEMLIDY - tenofovir alafenamide fumarate tab 25 mg	2		QL (30 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 250 mg	2		QL (270 tablets/30 days)
VIRACEPT - nelfinavir mesylate tab 625 mg	2		QL (120 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate oral powder 40 mg/gm	2		QL (240 grams/30 days)
VIREAD - tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	2		QL (30 tablets/30 days)
VIREAD - tenofovir disoproxil fumarate tab 300 mg	3		QL (30 tablets/30 days)
VOSEVI - sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	2	SP	PA, QL (30 tablets/30 days)
XOFLUZA - baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	3		QL (2 tablets/120 days)
ZIAGEN - abacavir sulfate tab 300 mg (base equiv)	3		QL (60 tablets/30 days)
ZIAGEN - abacavir sulfate soln 20 mg/ml (base equiv)	3		QL (960 mls/30 days)
zidovudine cap 100 mg (Retrovir)	1		QL (180 capsules/30 days)
zidovudine syrup 10 mg/ml (Retrovir)	1		QL (1920 mls/30 days)
zidovudine tab 300 mg	1		QL (60 tablets/30 days)
ANTIMALARIALS			
ARAKODA - tafenoquine succinate tab 100 mg (base equivalent)	3		
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg (Malarone)	1		
chloroquine phosphate tab 250 mg, 500 mg	1		
COARTEM - artemether-lumefantrine tab 20-120 mg	2		
DARAPRIM - pyrimethamine tab 25 mg	3	SP	PA, LD, QL (90 tablets/30 days)
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg	1		
hydroxychloroquine sulfate tab 200 mg (Plaquenil)	1		
KRINTAFEL - tafenoquine succinate tab 150 mg (base equivalent)	3		
mefloquine hcl tab 250 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PLAQUENIL - hydroxychloroquine sulfate tab 200 mg	3		
PRIMAQUINE PHOSPHATE - primaquine phosphate tab 26.3 mg (15 mg base)	3		
primaquine phosphate tab 26.3 mg (15 mg base) (Primaquine phosphate)	1		
pyrimethamine tab 25 mg (Daraprim)	1	SP	PA, QL (90 tablets/30 days)
QUALAQUIN - quinine sulfate cap 324 mg	3		QL (42 capsules/90 days)
quinine sulfate cap 324 mg (Qualaquin)	1		QL (42 capsules/90 days)
ANTHELMINTICS			
albendazole tab 200 mg	1		PA, QL (120 tablets/30 days)
BENZNIDAZOLE - benznidazole tab 12.5 mg, 100 mg	2		
BILTRICIDE - praziquantel tab 600 mg	3		
EGATEN - triclabendazole tab 250 mg	2	SP	PA
EMVERM - mebendazole chew tab 100 mg	3		PA, QL (180 tablets/30 days)
ivermectin tab 3 mg (Stromectol)	1		PA
praziquantel tab 600 mg (Biltricide)	1		
STROMECTOL - ivermectin tab 3 mg	3		PA
ANTI-INFECTIVE AGENTS - MISC.			
AEMCOLO - rifamycin sodium tab delayed release 194 mg (base equiv)	3		QL (12 tablets/180 days)
ALINIA - nitazoxanide tab 500 mg	3		QL (12 tablets/90 days)
ALINIA - nitazoxanide for susp 100 mg/5ml	2		QL (300 mls/90 days)
atovaquone susp 750 mg/5ml (Mepron)	1		
BACTRIM - sulfamethoxazole-trimethoprim tab 400-80 mg	3		
BACTRIM DS - sulfamethoxazole-trimethoprim tab 800-160 mg	3		
CAYSTON - aztreonam lysine for inhal soln 75 mg (base equivalent)	2	SP	LD
CLEOCIN - clindamycin hcl cap 75 mg, 150 mg, 300 mg	3		
CLEOCIN PEDIATRIC GRANULE - clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)	3		
clindamycin hcl cap 75 mg, 150 mg, 300 mg (Cleocin)	1		
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) (Cleocin pediatric gr)	1		
colistimethate sod for inj 150 mg (colistin base activity) (Coly-mycin m)	1		
COLY-MYCIN M - colistimethate sod for inj 150 mg (colistin base activity)	3		
dapsone tab 25 mg, 100 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FIRVANQ - vancomycin hcl for oral soln 25 mg/ml (base equivalent)	3		
FIRVANQ - vancomycin hcl for oral soln 50 mg/ml (base equivalent)	3		QL (1200 mls/30 days)
FLAGYL - metronidazole cap 375 mg	3		
fosfomycin tromethamine powd pack 3 gm (base equivalent) (Monurol)	1		
HIPREX - methenamine hippurate tab 1 gm	3		
IMPAVIDO - miltefosine cap 50 mg	2	SP	PA
LAMPIT - nifurtimox tab 30 mg	3		QL (540 tablets/180 days)
LAMPIT - nifurtimox tab 120 mg	3		QL (450 tablets/180 days)
linezolid for susp 100 mg/5ml (Zyvox)	1		
linezolid tab 600 mg (Zyvox)	1		
MACROBID - nitrofurantoin monohydrate macrocrystalline cap 100 mg	3		
MACRODANTIN - nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg	3		
MEPRON - atovaquone susp 750 mg/5ml	3		
methenamine hippurate tab 1 gm (Hiprex)	1		
metronidazole cap 375 mg (Flagyl)	1		
metronidazole tab 250 mg, 500 mg	1		
MONUROL - fosfomycin tromethamine powd pack 3 gm (base equivalent)	3		
NEBUPENT - pentamidine isethionate for nebulization soln 300 mg	3		
nitazoxanide tab 500 mg (Alinia)	1		QL (12 tablets/90 days)
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg (Macrochantin)	1		
nitrofurantoin monohydrate macrocrystalline cap 100 mg (Macrobid)	1		
nitrofurantoin susp 25 mg/5ml	1		
pentamidine isethionate for nebulization soln 300 mg (Nebupent)	1		
SIVEXTRO - tedizolid phosphate tab 200 mg	2		PA, QL (6 tablets/30 days)
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1		
sulfamethoxazole-trimethoprim tab 400-80 mg (Bactrim)	1		
sulfamethoxazole-trimethoprim tab 800-160 mg (Bactrim ds)	1		
tinidazole tab 250 mg, 500 mg	1		
TRIMETHOPRIM - trimethoprim tab 100 mg	3		
trimethoprim tab 100 mg (Trimethoprim)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VANCOCIN - vancomycin hcl cap 125 mg (base equivalent)	3		QL (480 capsules/30 days)
VANCOCIN - vancomycin hcl cap 250 mg (base equivalent)	3		QL (240 capsules/30 days)
vancomycin hcl cap 125 mg (base equivalent) (Vancocin)	1		QL (480 capsules/30 days)
vancomycin hcl cap 250 mg (base equivalent) (Vancocin)	1		QL (240 capsules/30 days)
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for oral soln 25 mg/ml (base equivalent)	3		
VANCOMYCIN HYDROCHLORIDE - vancomycin hcl for oral soln 50 mg/ml (base equivalent)	3		QL (1200 mls/30 days)
XENLETA - lefamulin acetate tab 600 mg	3		LD, QL (10 tablets/180 days)
XIFAXAN - rifaximin tab 200 mg	3		PA, QL (9 tablets/180 days)
XIFAXAN - rifaximin tab 550 mg	2		PA, QL (90 tablets/30 days)

BIOLOGICALS

VACCINES

ACTHIB - haemophilus b polysaccharide conjugate vaccine for inj	3		
AFLURIA QUADRIVALENT 2022 - influenza virus vac split quadrivalent susp pref syr 0.5ml	3		QL (1 vaccine/90 days)
AFLURIA QUADRIVALENT 2022 - influenza virus vaccine split quadrivalent im inj	3		QL (1 vaccine/90 days)
BEXSERO - meningococcal vac b (recomb omv adjuv) inj prefilled syringe	3		
COMIRNATY - covid-19 mrna vac tris-sucrose-pfizer im susp 30 mcg/0.3ml	3		
ENGERIX-B - hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	3		
ENGERIX-B - hepatitis b vaccine (recombinant) susp 20 mcg/ml	3		
FLUAD QUADRIVALENT 2022-2 - influenza vac type a&b surface ant adj quad pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUARIX QUADRIVALENT 2022 - influenza virus vac split quadrivalent susp pref syr 0.5ml	3		QL (1 vaccine/90 days)
FLUBLOK QUADRIVALENT 2022 - influenza vac recomb ha quad pf soln pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUCELVAX QUADRIVALENT 20 - influenza vac tiss-cult subunt quad susp pref syr 0.5 ml	3		QL (1 vaccine/90 days)
FLUCELVAX QUADRIVALENT 20 - influenza vac tissue-cultured subunit quadrivalent im susp	3		QL (1 vaccine/90 days)
FLULAVAL QUADRIVALENT 202 - influenza virus vac split quadrivalent susp pref syr 0.5ml	3		QL (1 vaccine/90 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FLUZONE HIGH-DOSE PF 2022 - influenza vac split high-dose quad pf susp pref syr 0.7 ml	3		QL (1 vaccine/90 days)
FLUZONE QUADRIVALENT 2022 - influenza virus vac split quadrivalent susp pref syr 0.5ml	3		QL (1 vaccine/90 days)
FLUZONE QUADRIVALENT 2022 - influenza virus vaccine split quadrivalent im inj	3		QL (1 vaccine/90 days)
FLUZONE QUADRIVALENT 2022 - influenza virus vaccine split quadrivalent inj 0.5 ml	3		QL (1 vaccine/90 days)
GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac susp pref syr	3		
GARDASIL 9 - human papillomavirus (hvp) 9-valent recomb vac im susp	3		
HAVRIX - hepatitis a vaccine inj susp 720 el unit/0.5ml, 1440 el unit/ml	3		
HEPLISAV-B - hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	3		
HIBERIX - haemophilus b polysaccharide conjugate vac for inj 10 mcg	3		
IPOL INACTIVATED IPV - poliovirus vaccine, ipv injection	3		
JANSSEN COVID-19 VACCINE - covid-19 (sars-cov-2) ad26 vector vaccine-janssen im 0.5 ml	3		
JYNNEOS - smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	3		
M-M-R II - measles-mumps-rubella virus vaccines for inj soln	3		
MENACTRA - meningococcal (a, c, y, and w-135) diphth conjugate vaccine	3		
MENQUADFI - meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	3		
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac im soln	3		
MENVEO - meningococcal (a, c, y, and w-135) oligo conj vac for inj	3		
MODERNA COVID-19 VACCINE/ - covid-19 mrna bivalent vacc 6mo-5y-moderna im susp 10 mcg/0.2ml	3		QL (9 vaccines/365 days)
MODERNA COVID-19 VACCINE/ - covid-19 mrna bivalent vaccine-moderna im susp 50 mcg/0.5ml	3		QL (9 vaccines/365 days)
NOVAVAX COVID-19 VACCINE - covid-19 subunit prot recom adjuv vac-novavax im 5 mcg/0.5ml	3		QL (3 vaccines/365 days)
PEDVAX HIB - haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	3		
PFIZER-BIONTECH COVID-19 - covid-19 mrna bivalent vaccine-pfizer im susp 30 mcg/0.3ml	3		QL (9 vaccines/365 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PFIZER-BIONTECH COVID-19 - covid-19 mrna bivalent vac 5-11y-pfizer im susp 10 mcg/0.2ml	3		QL (9 vaccines/365 days)
PFIZER-BIONTECH COVID-19 - covid-19 mrna bival vacc 6mo-4yr-pfizer im susp 3 mcg/0.2ml	3		QL (9 vaccines/365 days)
PNEUMOVAX 23 - pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	3		QL (1 vaccine/90 days)
PNEUMOVAX 23/1 DOSE - pneumococcal vaccine polyvalent inj 25 mcg/0.5ml	3		QL (1 vaccine/90 days)
PREHEVBRIO - hepatitis b vaccine 3-antigen (recombinant) susp 10 mcg/ml	3		
PREVNAR 13 - pneumococcal 13-valent conjugate vaccine inj	3		QL (1 vaccine/90 days)
PREVNAR 20 - pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	3		QL (1 vaccine/90 days)
PRIORIX - measles-mumps-rubella virus vaccines for subcutaneous susp	3		
PROQUAD - measles-mumps-rubella-varicella virus vaccines for susp	3		
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	3		
RECOMBIVAX HB - hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	3		
ROTARIX - rotavirus vaccine, live oral susp	3		
ROTARIX - rotavirus vaccine, live for oral susp	3		
ROTATEQ - rotavirus vaccine, live oral pentavalent soln	3		
SHINGRIX - zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	2		QL (2 vaccines/1 lifetime)
SPIKEVAX COVID-19 VACCINE - covid-19 (sars-cov-2)mrna vacc-moderna im susp 100 mcg/0.5ml	3		
TRUMENBA - meningococcal group b vac (recomb) im susp prefilled syr	3		
TWINRIX - hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	3		
VAQTA - hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	3		
VARIVAX - varicella virus vac live for subcutaneous inj 1350 pfu/0.5ml	3		
VAXCHORA - cholera vaccine live attenuated for oral susp	3		
VAXNEUVANCE - pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	3		QL (1 vaccine/90 days)
VIVOTIF - typhoid vaccine cap delayed release	3		

TOXOIDS

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ADACEL - tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	3		
BOOSTRIX - tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	3		
BOOSTRIX - tet tox-diph-acell pertuss ad inj 5-2.5-18.5 lf-lf-mcg/0.5ml	3		
DAPTACEL - diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	3		
INFANRIX - diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	3		
KINRIX - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	3		
PEDIARIX - diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	3		
PENTACEL - diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	3		
QUADRACEL - diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	3		
QUADRACEL - diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	3		
TDVAX - tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	3		
TENIVAC - tetanus-diphtheria toxoids (td) inj 5-2 lfu	3		
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	3		
VAXELIS - diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recomb susp	3		
PASSIVE IMMUNIZING AGENTS			
GAMMAGARD LIQUID - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 30 gm/300ml	2	SP	PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 1 gm/10ml	3	SP	PA
GAMMAKED - immune globulin (human) iv or subcutaneous soln 5 gm/50ml, 10 gm/100ml, 20 gm/200ml	2	SP	PA
GAMUNEX-C - immune globulin (human) iv or subcutaneous soln 1 gm/10ml, 2.5 gm/25ml, 5 gm/50ml, 10 gm/100ml, 20 gm/200ml, 40 gm/400ml	2	SP	PA
HIZENTRA - immune globulin (human) subcutaneous soln pref syr 1 gm/5ml, 2 gm/10ml, 4 gm/20ml	3	SP	PA, LD
HIZENTRA - immune globulin (human) subcutaneous inj 1 gm/5ml, 2 gm/10ml, 4 gm/20ml, 10 gm/50ml	3	SP	PA, LD

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HYQVIA - immun glob inj 2.5 gm/25ml-hyaluron inj 200 unt/1.25 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 5 gm/50ml-hyaluron inj 400 unt/2.5 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 10 gm/100ml-hyaluron inj 800 unt/5 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 20 gm/200ml-hyaluron inj 1600 unt/10 ml kit	3	SP	PA, LD
HYQVIA - immun glob inj 30 gm/300ml-hyaluron inj 2400 unt/15 ml kit	3	SP	PA, LD
BIOLOGICALS MISC			
GRASTEK - timothy grass pollen allergen ext sl tab 2800 bau	3		PA, QL (30 tablets/30 days)
ODACTRA - dust mite mixed ext sl tab 12 sq-hdm	3		PA, QL (30 tablets/30 days)
PALFORZIA INITIAL DOSE ES - peanut powder-dnfp starter pack 0.5 & 1 & 1.5 & 3 & 6 mg	3	SP	PA, LD, QL (1 pack/180 days)
PALFORZIA LEVEL 1 - peanut powder-dnfp cap sprinkle pack 3 x 1 mg (3 mg dose)	3	SP	PA, LD, QL (90 capsules/30 days)
PALFORZIA LEVEL 10 - peanut powder-dnfp pack 2 x 20 mg & 2 x 100 mg (240 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 11 (MAINT - peanut allergen powder-dnfp maintenance packet 300 mg)	3	SP	PA, LD, QL (30 packets/30 days)
PALFORZIA LEVEL 11 (TITRA - peanut allergen powder-dnfp titration packet 300 mg)	3	SP	PA, LD, QL (30 packets/30 days)
PALFORZIA LEVEL 2 - peanut powder-dnfp cap sprinkle pack 6 x 1 mg (6 mg dose)	3	SP	PA, LD, QL (180 capsules/30 days)
PALFORZIA LEVEL 3 - peanut powder-dnfp pack 2 x 1 mg & 10 mg (12 mg dose)	3	SP	PA, LD, QL (90 capsules/30 days)
PALFORZIA LEVEL 4 - peanut powder-dnfp cap sprinkle pack 20 mg (20 mg dose)	3	SP	PA, LD, QL (30 capsules/30 days)
PALFORZIA LEVEL 5 - peanut powder-dnfp cap sprinkle pack 2 x 20 mg (40 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)
PALFORZIA LEVEL 6 - peanut powder-dnfp cap sprinkle pack 4 x 20 mg (80 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 7 - peanut powder-dnfp pack 20 mg & 100 mg (120 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)
PALFORZIA LEVEL 8 - peanut powder-dnfp pack 3 x 20 mg & 100 mg (160 mg dose)	3	SP	PA, LD, QL (120 capsules/30 days)
PALFORZIA LEVEL 9 - peanut powder-dnfp pack 2 x 100 mg (200 mg dose)	3	SP	PA, LD, QL (60 capsules/30 days)
RAGWITEK - short ragweed pollen allergen extract sl tab 12 amb a 1-u	3		PA, QL (30 tablets/30 days)

ANTINEOPLASTIC AGENTS

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ANTINEOPLASTICS			
abiraterone acetate tab 250 mg (Zytiga)	1	SP	PA, QL (120 tablets/30 days)
abiraterone acetate tab 500 mg (Zytiga)	1	SP	PA, QL (60 tablets/30 days)
ACTIMMUNE - interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	2	SP	PA, LD
AFINITOR - everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 2 mg, 5 mg	3	SP	PA, LD, QL (60 tablets/30 days)
AFINITOR DISPERZ - everolimus tab for oral susp 3 mg	3	SP	PA, LD, QL (90 tablets/30 days)
ALECENSA - alectinib hcl cap 150 mg (base equivalent)	2	SP	PA, LD, QL (240 capsules/30 days)
ALKERAN - melphalan tab 2 mg	3		
ALUNBRIG - brigatinib tab initiation therapy pack 90 mg & 180 mg	2	SP	PA, LD, QL (30 tablets/180 days)
ALUNBRIG - brigatinib tab 30 mg	2	SP	PA, LD, QL (180 tablets/30 days)
ALUNBRIG - brigatinib tab 90 mg, 180 mg	2	SP	PA, LD, QL (30 tablets/30 days)
anastrozole tab 1 mg (Arimidex)	1		
AYVAKIT - avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BALVERSA - erdafitinib tab 3 mg	2	SP	PA, LD, QL (90 tablets/30 days)
BALVERSA - erdafitinib tab 4 mg	2	SP	PA, LD, QL (60 tablets/30 days)
BALVERSA - erdafitinib tab 5 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BESREMI - ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	2	SP	PA, LD, QL (2 syringes/28 days)
bexarotene cap 75 mg (Targretin)	1	SP	PA
bicalutamide tab 50 mg (Casodex)	1		
BOSULIF - bosutinib tab 100 mg	2	SP	PA, LD, QL (90 tablets/30 days)
BOSULIF - bosutinib tab 400 mg, 500 mg	2	SP	PA, LD, QL (30 tablets/30 days)
BRAFTOVI - encorafenib cap 75 mg	2	SP	PA, LD, QL (180 capsules/30 days)
BRUKINSA - zanubrutinib cap 80 mg	2	SP	PA, LD, QL (120 capsules/30 days)
CABOMETYX - cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
CALQUENCE - acalabrutinib maleate tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
capecitabine tab 150 mg, 500 mg (Xeloda)	1	SP	
CAPRELSA - vandetanib tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
CAPRELSA - vandetanib tab 300 mg	2	SP	PA, LD, QL (30 tablets/30 days)
COMETRIQ - cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	2	SP	PA, LD, QL (1 kit/28 days)
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	2	SP	PA, LD, QL (1 kit/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
COMETRIQ - cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	2	SP	PA, LD, QL (1 kit/28 days)
COPIKTRA - duvelisib cap 15 mg, 25 mg	2	SP	PA, LD, QL (60 capsules/30 days)
COTELLIC - cobimetinib fumarate tab 20 mg (base equivalent)	2	SP	PA, LD, QL (63 tablets/28 days)
CYCLOPHOSPHAMIDE - cyclophosphamide cap 25 mg, 50 mg	3		
CYCLOPHOSPHAMIDE - cyclophosphamide tab 25 mg, 50 mg	2		
cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide)	1		
DAURISMO - glasdegib maleate tab 25 mg (base equivalent)	2	SP	PA, LD, QL (60 tablets/30 days)
DAURISMO - glasdegib maleate tab 100 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
EMCYT - estramustine phosphate sodium cap 140 mg	2		
ERIVEDGE - vismodegib cap 150 mg	2	SP	PA, LD, QL (30 capsules/30 days)
ERLEADA - apalutamide tab 60 mg	2	SP	PA, LD, QL (120 tablets/30 days)
ERLEADA - apalutamide tab 240 mg	2	SP	PA, LD, QL (30 tablets/30 days)
erlotinib hcl tab 25 mg (base equivalent) (Tarceva)	1	SP	PA, QL (60 tablets/30 days)
erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent) (Tarceva)	1	SP	PA, QL (30 tablets/30 days)
ETOPOSIDE - etoposide cap 50 mg	2		
EULEXIN - flutamide cap 125 mg	3		LD
everolimus tab for oral susp 2 mg, 5 mg (Afinitor disperz)	1	SP	PA, QL (60 tablets/30 days)
everolimus tab for oral susp 3 mg (Afinitor disperz)	1	SP	PA, QL (90 tablets/30 days)
everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg (Afinitor)	1	SP	PA, QL (30 tablets/30 days)
exemestane tab 25 mg (Aromasin)	1		
EXKIVITY - mobocertinib succinate cap 40 mg	2	SP	PA, LD, QL (120 capsules/30 days)
FARESTON - toremifene citrate tab 60 mg (base equivalent)	3		
FOTIVDA - tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	2	SP	PA, LD, QL (21 capsules/28 days)
GAVRETO - pralsetinib cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
gefitinib tab 250 mg (Iressa)	1	SP	PA, QL (30 tablets/30 days)
GILOTRIF - afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
GLEOSTINE - lomustine cap 10 mg, 40 mg, 100 mg	2	SP	
HYCAMTIN - topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	2	SP	PA

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Drug Name	Drug Tier	Specialty	Requirements/Limits
HYDREA - hydroxyurea cap 500 mg	3		
hydroxyurea cap 500 mg (Hydrea)	1		
IBRANCE - palbociclib cap 75 mg, 100 mg, 125 mg	2	SP	PA, LD, QL (21 capsules/28 days)
IBRANCE - palbociclib tab 75 mg, 100 mg, 125 mg	2	SP	PA, LD, QL (21 tablets/28 days)
ICLUSIG - ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
IDHIFA - enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
imatinib mesylate tab 100 mg (base equivalent) (Gleevec)	1	SP	PA, QL (90 tablets/30 days)
imatinib mesylate tab 400 mg (base equivalent) (Gleevec)	1	SP	PA, QL (60 tablets/30 days)
IMBRUVICA - ibrutinib tab 140 mg, 280 mg, 420 mg	2	SP	PA, LD, QL (30 tablets/30 days)
IMBRUVICA - ibrutinib oral susp 70 mg/ml	2	SP	PA, LD, QL (216 mls/30 days)
IMBRUVICA - ibrutinib cap 70 mg	2	SP	PA, LD, QL (30 capsules/30 days)
IMBRUVICA - ibrutinib cap 140 mg	2	SP	PA, LD, QL (90 capsules/30 days)
INLYTA - axitinib tab 1 mg	2	SP	PA, LD, QL (180 tablets/30 days)
INLYTA - axitinib tab 5 mg	2	SP	PA, LD, QL (120 tablets/30 days)
INQOVI - decitabine-cedazuridine tab 35-100 mg	2	SP	PA, LD, QL (5 tablets/28 days)
INREBIC - fedratinib hcl cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
IRESSA - gefitinib tab 250 mg	2	SP	PA, LD, QL (30 tablets/30 days)
JAKAFI - ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	2	SP	PA, LD, QL (60 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 50 mg	2	SP	PA, LD, QL (30 tablets/30 days)
JAYPIRCA - pirtobrutinib tab 100 mg	2	SP	PA, LD, QL (60 tablets/30 days)
KISQALI - ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	2	SP	PA, QL (63 tablets/28 days)
KISQALI FEMARA 200 DOSE - ribociclib 200 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	2	SP	PA, QL (91 tablets/28 days)
KISQALI FEMARA 400 DOSE - ribociclib 400 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	2	SP	PA, QL (91 tablets/28 days)
KISQALI FEMARA 600 DOSE - ribociclib 600 mg dose (200 mg tab) & letrozole 2.5 mg tbpk	2	SP	PA, QL (91 tablets/28 days)
KOSELUGO - selumetinib sulfate cap 10 mg	2	SP	PA, LD, QL (240 capsules/30 days)
KOSELUGO - selumetinib sulfate cap 25 mg	2	SP	PA, LD, QL (120 capsules/30 days)
KRAZATI - adagrasib tab 200 mg	2	SP	PA, LD, QL (180 tablets/30 days)
lapatinib ditosylate tab 250 mg (base equiv) (Tykerb)	1	SP	PA, QL (180 tablets/30 days)
LENVIMA 10 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg (10 mg daily dose)	2	SP	PA, LD, QL (30 capsules/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
LENVIMA 12MG DAILY DOSE - lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 14 MG DAILY DOSE - lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
LENVIMA 18 MG DAILY DOSE - lenvatinib cap therapy pack 10 mg & 2 x 4 mg (18 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 20 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
LENVIMA 24 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 10 mg & 4 mg (24 mg daily dose)	2	SP	PA, LD, QL (90 capsules/30 days)
LENVIMA 4 MG DAILY DOSE - lenvatinib cap therapy pack 4 mg (4 mg daily dose)	2	SP	PA, LD, QL (30 capsules/30 days)
LENVIMA 8 MG DAILY DOSE - lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	2	SP	PA, LD, QL (60 capsules/30 days)
letrozole tab 2.5 mg (Femara)	1		
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg	1		
LEUKERAN - chlorambucil tab 2 mg	2		
leuprolide acetate inj kit 5 mg/ml	1	SP	PA, QL (6 vials/30 days)
LONSURF - trifluridine-tipiracil tab 15-6.14 mg	2	SP	PA, LD, QL (100 tablets/28 days)
LONSURF - trifluridine-tipiracil tab 20-8.19 mg	2	SP	PA, LD, QL (80 tablets/28 days)
LORBRENA - lorlatinib tab 25 mg	2	SP	PA, LD, QL (90 tablets/30 days)
LORBRENA - lorlatinib tab 100 mg	2	SP	PA, LD, QL (30 tablets/30 days)
LUMAKRAS - sotorasib tab 120 mg	2	SP	PA, LD, QL (240 tablets/30 days)
LUMAKRAS - sotorasib tab 320 mg	2	SP	PA, LD, QL (90 tablets/30 days)
LYNPARZA - olaparib tab 100 mg, 150 mg	2	SP	PA, LD, QL (120 tablets/30 days)
LYSODREN - mitotane tab 500 mg	2	SP	LD
LYTGOBI - futibatinib tab therapy pack 4 mg (12 mg daily dose)	2	SP	PA, LD, QL (84 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (16 mg daily dose)	2	SP	PA, LD, QL (112 tablets/28 days)
LYTGOBI - futibatinib tab therapy pack 4 mg (20 mg daily dose)	2	SP	PA, LD, QL (140 tablets/28 days)
MATULANE - procarbazine hcl cap 50 mg	2	SP	LD
megestrol acetate susp 40 mg/ml	1		
megestrol acetate tab 20 mg, 40 mg	1		
MEKINIST - trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	2	SP	PA, QL (13 bottles/28 days)
MEKINIST - trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent)	2	SP	PA, QL (90 tablets/30 days)
MEKINIST - trametinib dimethyl sulfoxide tab 2 mg (base equivalent)	2	SP	PA, QL (30 tablets/30 days)
MEKTOVI - binimetinib tab 15 mg	2	SP	PA, LD, QL (180 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
melphalan tab 2 mg (Alkeran)	1		
mercaptopurine tab 50 mg	1		
MESNEX - mesna tab 400 mg	2		
METHOTREXATE SODIUM - methotrexate sodium inj 250 mg/10ml (25 mg/ml)	3		
methotrexate sodium for inj 1 gm	1		
methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)	1		
methotrexate sodium inj 50 mg/2ml (25 mg/ml)	1		
methotrexate sodium tab 2.5 mg (base equiv)	1		
MYLERAN - busulfan tab 2 mg	2		
NERLYNX - neratinib maleate tab 40 mg (base equivalent)	2	SP	PA, LD, QL (180 tablets/30 days)
NEXAVAR - sorafenib tosylate tab 200 mg (base equivalent)	3	SP	PA, LD, QL (120 tablets/30 days)
NILANDRON - nilutamide tab 150 mg	3		
nilutamide tab 150 mg (Nilandron)	1		
NINLARO - ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	2	SP	PA, LD, QL (3 capsules/28 days)
NUBEQA - darolutamide tab 300 mg	2	SP	PA, QL (120 tablets/30 days)
ODOMZO - sonidegib phosphate cap 200 mg (base equivalent)	2	SP	PA, LD, QL (30 capsules/30 days)
ONUREG - azacitidine tab 200 mg, 300 mg	2	SP	PA, QL (14 tablets/28 days)
ORGOVYX - relugolix tab 120 mg	2	SP	PA, LD, QL (30 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 86 mg	2	SP	PA, LD, QL (90 tablets/30 days)
ORSERDU - elacestrant hydrochloride tab 345 mg	2	SP	PA, LD, QL (30 tablets/30 days)
PEMAZYRE - pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	2	SP	PA, LD, QL (14 tablets/21 days)
PIQRAY 200MG DAILY DOSE - alpelisib tab therapy pack 200 mg daily dose	2	SP	PA, QL (1 pack/28 days)
PIQRAY 250MG DAILY DOSE - alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	2	SP	PA, QL (1 pack/28 days)
PIQRAY 300MG DAILY DOSE - alpelisib tab pack 300 mg daily dose (2x150 mg tab)	2	SP	PA, QL (1 pack/28 days)
POMALYST - pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	2	SP	PA, LD, QL (21 capsules/28 days)
PURIXAN - mercaptopurine susp 2000 mg/100ml (20 mg/ml)	2	SP	LD
QINLOCK - ripretinib tab 50 mg	2	SP	PA, LD, QL (90 tablets/30 days)
RETEVMO - selpercatinib cap 40 mg	2	SP	PA, LD, QL (240 capsules/30 days)
RETEVMO - selpercatinib cap 80 mg	2	SP	PA, LD, QL (120 capsules/30 days)
REZLIDHIA - olutasidenib cap 150 mg	2	SP	PA, LD, QL (60 capsules/30 days)

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ROZLYTREK - entrectinib cap 100 mg	2	SP	PA, LD, QL (30 capsules/30 days)
ROZLYTREK - entrectinib cap 200 mg	2	SP	PA, LD, QL (90 capsules/30 days)
RUBRACA - rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	2	SP	PA, LD, QL (120 tablets/30 days)
RYDAPT - midostaurin cap 25 mg	2	SP	PA, QL (240 capsules/30 days)
SCSEMBLIX - asciminib hcl tab 20 mg	2	SP	PA, LD, QL (60 tablets/30 days)
SCSEMBLIX - asciminib hcl tab 40 mg	2	SP	PA, LD, QL (300 tablets/30 days)
SOLTAMOX - tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	3		
sorafenib tosylate tab 200 mg (base equivalent) (Nexavar)	1	SP	PA, QL (120 tablets/30 days)
SPRYCEL - dasatinib tab 20 mg	2	SP	PA, QL (90 tablets/30 days)
SPRYCEL - dasatinib tab 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	2	SP	PA, QL (30 tablets/30 days)
STIVARGA - regorafenib tab 40 mg	2	SP	PA, LD, QL (84 tablets/28 days)
sunitinib malate cap 12.5 mg (base equivalent) (Sutent)	1	SP	PA, QL (90 capsules/30 days)
sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) (Sutent)	1	SP	PA, QL (30 capsules/30 days)
SUTENT - sunitinib malate cap 12.5 mg (base equivalent)	3	SP	PA, LD, QL (90 capsules/30 days)
SUTENT - sunitinib malate cap 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)	3	SP	PA, LD, QL (30 capsules/30 days)
SYNRIBO - omacetaxine mepesuccinate for inj 3.5 mg	3	SP	PA, LD
TABLOID - thioguanine tab 40 mg	2		
TABRECTA - capmatinib hcl tab 150 mg, 200 mg	2	SP	PA, QL (120 tablets/30 days)
TAFINLAR - dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	2	SP	PA, QL (120 capsules/30 days)
TAFINLAR - dabrafenib mesylate tab for oral susp 10 mg (base equiv)	2	SP	PA, QL (840 tablets/28 days)
TAGRISSO - osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	2	SP	PA, LD, QL (30 tablets/30 days)
TALZENNA - talazoparib tosylate cap 0.25 mg (base equivalent)	2	SP	PA, LD, QL (90 capsules/30 days)
TALZENNA - talazoparib tosylate cap 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent)	2	SP	PA, LD, QL (30 capsules/30 days)
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)	1		
TARCEVA - erlotinib hcl tab 25 mg (base equivalent)	3	SP	PA, LD, QL (60 tablets/30 days)

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TARCEVA - erlotinib hcl tab 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/30 days)
TARGRETIN - bexarotene cap 75 mg	3	SP	PA
TASIGNA - nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	2	SP	PA, QL (120 capsules/30 days)
TAZVERIK - tazemetostat hbr tab 200 mg	2	SP	PA, LD, QL (240 tablets/30 days)
temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg	1	SP	PA
temozolomide cap 250 mg (Temodar)	1	SP	PA
TEPMETKO - tepotinib hcl tab 225 mg	2	SP	PA, LD, QL (60 tablets/30 days)
TIBSOVO - ivosidenib tab 250 mg	2	SP	PA, LD, QL (60 tablets/30 days)
toremifene citrate tab 60 mg (base equivalent) (Fareston)	1		
tretinoin cap 10 mg	1	SP	PA
TUKYSA - tucatinib tab 50 mg	2	SP	PA, LD, QL (300 tablets/30 days)
TUKYSA - tucatinib tab 150 mg	2	SP	PA, LD, QL (120 tablets/30 days)
TURALIO - pexidartinib hcl cap 125 mg (base equivalent)	2	SP	PA, LD, QL (120 capsules/30 days)
TYKERB - lapatinib ditosylate tab 250 mg (base equiv)	3	SP	PA, QL (180 tablets/30 days)
VENCLEXTA - venetoclax tab 10 mg	2	SP	PA, LD, QL (60 tablets/30 days)
VENCLEXTA - venetoclax tab 50 mg	2	SP	PA, LD, QL (30 tablets/30 days)
VENCLEXTA - venetoclax tab 100 mg	2	SP	PA, LD, QL (120 tablets/30 days)
VENCLEXTA STARTING PACK - venetoclax tab therapy starter pack 10 & 50 & 100 mg	2	SP	PA, LD, QL (1 pack/180 days)
VERZENIO - abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	2	SP	PA, LD, QL (60 tablets/30 days)
VITRAKVI - larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	2	SP	PA, LD, QL (300 mls/30 days)
VITRAKVI - larotrectinib sulfate cap 25 mg (base equivalent)	2	SP	PA, LD, QL (180 capsules/30 days)
VITRAKVI - larotrectinib sulfate cap 100 mg (base equivalent)	2	SP	PA, LD, QL (60 capsules/30 days)
VIZIMPRO - dacomitinib tab 15 mg, 30 mg, 45 mg	2	SP	PA, LD, QL (30 tablets/30 days)
VONJO - pacritinib citrate cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
VOTRIENT - pazopanib hcl tab 200 mg (base equiv)	2	SP	PA, QL (120 tablets/30 days)
WELIREG - belzutifan tab 40 mg	2	SP	PA, LD, QL (90 tablets/30 days)
XALKORI - crizotinib cap 200 mg, 250 mg	2	SP	PA, LD, QL (60 capsules/30 days)
XOSPATA - gilteritinib fumarate tablet 40 mg (base equivalent)	2	SP	PA, LD, QL (90 tablets/30 days)
XPOVIO - selinexor tab therapy pack 40 mg (40 mg once weekly), 60 mg (60 mg once weekly)	2	SP	PA, LD, QL (4 tablets/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
XPOVIO - selinexor tab therapy pack 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly)	2	SP	PA, LD, QL (8 tablets/28 days)
XPOVIO 60 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (60 mg twice weekly)	2	SP	PA, LD, QL (24 tablets/28 days)
XPOVIO 80 MG TWICE WEEKLY - selinexor tab therapy pack 20 mg (80 mg twice weekly)	2	SP	PA, LD, QL (32 tablets/28 days)
XTANDI - enzalutamide cap 40 mg	2	SP	PA, LD, QL (120 capsules/30 days)
XTANDI - enzalutamide tab 40 mg	2	SP	PA, LD, QL (120 tablets/30 days)
XTANDI - enzalutamide tab 80 mg	2	SP	PA, LD, QL (60 tablets/30 days)
YONSA - abiraterone acetate micronized tab 125 mg	2	SP	PA, LD, QL (120 tablets/30 days)
ZEJULA - niraparib tosylate cap 100 mg (base equivalent)	2	SP	PA, LD, QL (90 capsules/30 days)
ZELBORAF - vemurafenib tab 240 mg	2	SP	PA, LD, QL (240 tablets/30 days)
ZOLINZA - vorinostat cap 100 mg	2	SP	PA, LD, QL (120 capsules/30 days)
ZYDELIG - idelalisib tab 100 mg, 150 mg	2	SP	PA, LD, QL (60 tablets/30 days)
ZYKADIA - ceritinib tab 150 mg	2	SP	PA, LD, QL (90 tablets/30 days)

ENDOCRINE AND METABOLIC DRUGS

CORTICOSTEROIDS

budesonide delayed release particles cap 3 mg	1		
budesonide tab er 24hr 9 mg (Uceris)	1		
CORTISONE ACETATE - cortisone acetate tab 25 mg	3		
DEXAMETHASONE - dexamethasone tab 0.5 mg, 0.75 mg, 1 mg	2		
DEXAMETHASONE - dexamethasone soln 0.5 mg/5ml	2		
dexamethasone elixir 0.5 mg/5ml	1		
DEXAMETHASONE INTENSOL - dexamethasone conc 1 mg/ml	3		
dexamethasone tab 1.5 mg, 2 mg, 4 mg, 6 mg	1		
EMFLAZA - deflazacort susp 22.75 mg/ml	3	SP	PA, LD
EMFLAZA - deflazacort tab 6 mg	3	SP	PA, LD, QL (60 tablets/30 days)
EMFLAZA - deflazacort tab 18 mg	3	SP	PA, LD, QL (30 tablets/30 days)
EMFLAZA - deflazacort tab 30 mg, 36 mg	3	SP	PA, LD
fludrocortisone acetate tab 0.1 mg	1		
hydrocortisone tab 5 mg, 10 mg, 20 mg (Cortef)	1		
MEDROL - methylprednisolone tab 2 mg, 4 mg, 8 mg, 16 mg	3		
MEDROL DOSEPAK - methylprednisolone tab therapy pack 4 mg (21)	3		
methylprednisolone tab therapy pack 4 mg (21) (Medrol dosepak)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg (Medrol)	1		
PEDIAPRED - prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)	3		
PREDNISOLONE - prednisolone soln 15 mg/5ml	2		
prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base) (Pediapred)	1		
prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)	1		
PREDNISOLONE SODIUM PHOSP - prednisolone sod phos orally disintegr tab 10 mg (base eq), 15 mg (base eq), 30 mg (base eq)	3		
prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)	1		
prednisolone tab 5 mg	1		
PREDNISONONE - prednisone oral soln 5 mg/5ml	2		
PREDNISONONE INTENSOL - prednisone conc 5 mg/ml	3		
prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)	1		
prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg	1		
TARPEYO - budesonide delayed release cap 4 mg	3	SP	PA, LD, QL (120 capsules/30 days)
ANDROGEN-ANABOLIC			
danazol cap 50 mg, 100 mg, 200 mg	1		PA
METHITEST - methyltestosterone oral tab 10 mg	3		PA, QL (600 tablets/30 days)
methyltestosterone cap 10 mg	1		PA, QL (600 capsules/30 days)
oxandrolone tab 2.5 mg, 10 mg	1		PA
testosterone cypionate im inj in oil 100 mg/ml (Depo-testosterone)	1		QL (1 vial/28 days)
testosterone cypionate im inj in oil 200 mg/ml (Depo-testosterone)	1		QL (10 vials/28 days)
TESTOSTERONE ENANTHATE - testosterone enanthate im inj in oil 200 mg/ml	3		QL (1 vial/28 days)
testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%) (Androgel)	1		PA, QL (60 packets/30 days)
testosterone td gel 12.5 mg/act (1%)	1		PA, QL (4 pumps/30 days)
testosterone td gel 20.25 mg/act (1.62%) (Androgel pump)	1		PA, QL (2 pumps/30 days)
testosterone td gel 10mg/act (2%) (Fortesta)	1		PA, QL (2 pumps/30 days)
testosterone td soln 30 mg/act	1		PA, QL (2 pumps/30 days)
ESTROGENS			

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ALORA - estradiol td patch twice weekly 0.025 mg/24hr, 0.075 mg/24hr	3		QL (8 patches/28 days)
ANGELIQ - drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	3		
BIJUVA - estradiol-progesterone cap 1-100 mg	3		
CLIMARA PRO - estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	2		QL (4 patches/28 days)
COMBIPATCH - estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	3		
DIVIGEL - estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%)	3		QL (30 packets/30 days)
DUAVEE - conjugated estrogens-bazedoxifene tab 0.45-20 mg	2		
ELESTRIN - estradiol gel 0.06% (0.52 mg/0.87 gm metered-dose pump)	3		QL (1 pump/30 days)
ESTRACE - estradiol tab 0.5 mg, 1 mg, 2 mg	3		
estradiol & norethindrone acetate tab 0.5-0.1 mg	1		
estradiol & norethindrone acetate tab 1-0.5 mg (Activella)	1		
estradiol tab 0.5 mg, 1 mg, 2 mg (Estrace)	1		
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm (0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25 mg/1.25gm (0.1%) (Divigel)	1		QL (30 packets/30 days)
estradiol td patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Vivelle-dot)	1		QL (8 patches/28 days)
estradiol td patch weekly 0.025 mg/24hr, 0.0375 mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr (Climara)	1		QL (4 patches/28 days)
ESTROGEL - estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)	2		QL (1 pump/30 days)
EVAMIST - estradiol transdermal spray 1.53 mg/spray	3		QL (1 canister/30 days)
MENEST - esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg	2		
MENOSTAR - estradiol td patch weekly 14 mcg/24hr	3		QL (4 patches/28 days)
MYFEMBREE - relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	2		PA, QL (30 tablets/30 days)
norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg	1		
ORIAHNN - elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack	2		PA, QL (56 capsules/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PREFEST - estradiol tab 1 mg(15)/estradiol-norgestimate tab 1-0.09mg(15)	3		
PREMARIN - estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	2		
PREMPHASE - conj est 0.625(14)/conj est-medroxyprogesterone acetate tab 0.625-5mg(14)	2		
PREMPRO - conjugated estrogen-medroxyprogesterone acetate tab 0.3-1.5 mg, 0.45-1.5 mg, 0.625-2.5 mg, 0.625-5 mg	2		
CONTRACEPTIVES			
BEYAZ - drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg	3		
desogestrel-ethinyl estradiol & ethinyl estradiol tab 0.15-0.02/0.01 mg(21/5) (Mircette)	1		
desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg	1		
drospirenone-ethinyl estradiol-levomefolate tab 3-0.02-0.451 mg (Beyaz)	1		
drospirenone-ethinyl estradiol-levomefolate tab 3-0.03-0.451 mg (Safyral)	1		
drospirenone-ethinyl estradiol tab 3-0.02 mg (Yaz)	1		
drospirenone-ethinyl estradiol tab 3-0.03 mg (Yasmin 28)	1		
ELLA - ulipristal acetate tab 30 mg	2		
ethinodiol diacetate & ethinyl estradiol tab 1 mg-35 mcg, 1 mg-50 mcg	1		
etonogestrel-ethinyl estradiol vaginal ring 0.120-0.015 mg/24hr (Nuvaring)	1		PA
GENERESS FE - norethindrone & ethinyl estradiol-ferrous fumarate chew tab 0.8 mg-25 mcg	3		
levonorgestrel-ethinyl estradiol tab 0.15-0.02/0.025/0.03 mg & ethinyl estradiol 0.01 mg (Quartette)	1		
levonorgestrel-ethinyl estradiol tab 0.1-0.02mg(84) & ethinyl estradiol 0.01mg(7) (Loseasonique)	1		
levonorgestrel-ethinyl estradiol tab 0.15-0.03mg(84) & ethinyl estradiol 0.01mg(7) (Seasonique)	1		
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	1		
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	1		
levonorgestrel tab 1.5 mg	1		
levonorgestrel-ethinyl estradiol tab 0.05-30/0.075-40/0.125-30mg-mcg	1		

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VELIVET - desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0.025mg-mg	2		
YASMIN 28 - drospirenone-ethinyl estradiol tab 3-0.03 mg	3		
YAZ - drospirenone-ethinyl estradiol tab 3-0.02 mg	3		
PROGESTINS			
AYGESTIN - norethindrone acetate tab 5 mg	3		
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg (Provera)	1		
norethindrone acetate tab 5 mg (Aygestin)	1		
progesterone cap 100 mg, 200 mg (Prometrium)	1		
PROVERA - medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg	3		
ANTIDIABETICS			
<i>Antidiabetics</i>			
acarbose tab 25 mg, 50 mg, 100 mg (Precose)	1		
BAQSIMI ONE PACK - glucagon nasal powder 3 mg/ dose	2		
BAQSIMI TWO PACK - glucagon nasal powder 3 mg/ dose	2		
BYDUREON BCISE - exenatide extended release susp auto-injector 2 mg/0.85ml	3		PA, QL (4 pens/28 days)
CYCLOSET - bromocriptine mesylate tab 0.8 mg (base equivalent)	3		
diazoxide susp 50 mg/ml (Proglycem)	1		
FARXIGA - dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	2		ST, QL (30 tablets/30 days)
glimepiride tab 1 mg, 2 mg, 4 mg (Amaryl)	1		
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg (Glucotrol xl)	1		
glipizide tab 5 mg, 10 mg	1		
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg	1		
GLUCAGEN HYPOKIT - glucagon hcl (rdna) for inj 1 mg (base equiv)	3		
glucagon (rdna) for inj kit 1 mg (Glucagon emergency k)	1		
GLUCAGON EMERGENCY KIT - glucagon (rdna) for inj kit 1 mg	3		
GLUCAGON EMERGENCY KIT FO - glucagon hcl for inj 1 mg	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
glyburide micronized tab 1.5 mg, 3 mg, 6 mg (Glynase)	1		
glyburide tab 1.25 mg, 2.5 mg, 5 mg	1		
glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg	1		
GLYNASE - glyburide micronized tab 1.5 mg, 3 mg, 6 mg	3		
GLYXAMBI - empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	2		ST, QL (30 tablets/30 days)
GVOKE HYPOPEN 1-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2		
GVOKE HYPOPEN 2-PACK - glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2		
GVOKE KIT - glucagon subcutaneous soln 1 mg/0.2ml	2		
GVOKE PFS - glucagon subcutaneous soln pref syringe 0.5 mg/0.1ml, 1 mg/0.2ml	2		
JANUMET - sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	2		ST, QL (60 tablets/30 days)
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-500 mg, 100-1000 mg	2		ST, QL (30 tablets/30 days)
JANUMET XR - sitagliptin-metformin hcl tab er 24hr 50-1000 mg	2		ST, QL (60 tablets/30 days)
JANUVIA - sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2		ST, QL (30 tablets/30 days)
JARDIANCE - empagliflozin tab 10 mg, 25 mg	2		ST, QL (30 tablets/30 days)
KORLYM - mifepristone tab 300 mg	3	SP	PA, LD, QL (120 tablets/30 days)
metformin hcl tab er 24hr 500 mg, 750 mg	1		
metformin hcl tab 500 mg, 850 mg, 1000 mg	1		
miglitol tab 25 mg, 50 mg, 100 mg	1		
MOUNJARO - tirzepatide soln pen-injector 2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml, 10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml	2		PA, QL (4 pens/28 days)
nateglinide tab 60 mg, 120 mg	1		
OZEMPIC - semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	2		PA, QL (1 pen/28 days)
pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv) (Actos)	1		
pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg (Actoplus met)	1		
PROGLYCEM - diazoxide susp 50 mg/ml	3		
repaglinide tab 0.5 mg, 1 mg, 2 mg	1		
RYBELSUS - semaglutide tab 3 mg	2		PA, QL (30 tablets/180 days)

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RYBELSUS - semaglutide tab 7 mg, 14 mg	2		PA, QL (30 tablets/30 days)
SOLIQUA 100/33 - insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	2		ST, QL (6 pens/30 days)
SYMLINPEN 120 - pramlintide acetate pen-inj 2700 mcg/2.7ml (1000 mcg/ml)	2		
SYMLINPEN 60 - pramlintide acetate pen-inj 1500 mcg/1.5ml (1000 mcg/ml)	2		
SYNJARDY - empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	2		ST, QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg	2		ST, QL (60 tablets/30 days)
SYNJARDY XR - empagliflozin-metformin hcl tab er 24hr 25-1000 mg	2		ST, QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg	2		ST, QL (60 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 10-5-1000 mg, 25-5-1000 mg	2		ST, QL (30 tablets/30 days)
TRIJARDY XR - empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg	2		ST, QL (60 tablets/30 days)
TRULICITY - dulaglutide soln pen-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	2		PA, QL (4 pens/28 days)
VICTOZA - liraglutide soln pen-injector 18 mg/3ml (6 mg/ml)	2		PA, QL (3 pens/30 days)
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 2.5-1000 mg, 5-1000 mg	2		ST, QL (60 tablets/30 days)
XIGDUO XR - dapagliflozin-metformin hcl tab er 24hr 5-500 mg, 10-500 mg, 10-1000 mg	2		ST, QL (30 tablets/30 days)
XULTOPHY 100/3.6 - insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	2		ST, QL (5 pens/30 days)
ZEGALOGUE - dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	2		
ZEGALOGUE - dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	2		
Rapid-Acting Insulins			
FIASP - insulin aspart (with niacinamide) inj 100 unit/ml	2		
FIASP FLEXTOUCH - insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	2		
FIASP PENFILL - insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2		
INSULIN ASPART - insulin aspart inj soln 100 unit/ml	2		
INSULIN ASPART FLEXPEN - insulin aspart soln pen-injector 100 unit/ml	2		

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NOVOLIN N FLEXPEN - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		
NOVOLIN N FLEXPEN RELION - insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2		
NOVOLIN N RELION - insulin nph (human) (isophane) inj 100 unit/ml	2		
NOVOLIN 70/30 - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 FLEXPEN - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 FLEXPEN REL - insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2		
NOVOLIN 70/30 RELION - insulin nph isophane & regular human inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 PREFILL - insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	2		
NOVOLOG MIX 70/30 RELION - insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2		
Basal Insulins			
BASAGLAR KWIKPEN - insulin glargine soln pen-injector 100 unit/ml	3		
BASAGLAR TEMPO PEN - insulin glargine pen-inj with transmitter port 100 unit/ml	3		
INSULIN DEGLUDEC - insulin degludec inj 100 unit/ml	2		
INSULIN DEGLUDEC FLEXTOUC - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2		
INSULIN GLARGINE - insulin glargine inj 100 unit/ml	2		
INSULIN GLARGINE SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml	2		
LANTUS - insulin glargine inj 100 unit/ml	2		
LANTUS SOLOSTAR - insulin glargine soln pen-injector 100 unit/ml	2		
LEVEMIR - insulin detemir inj 100 unit/ml	2		
LEVEMIR FLEXPEN - insulin detemir soln pen-injector 100 unit/ml	2		
TOUJEO MAX SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	2		
TOUJEO SOLOSTAR - insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	2		
TRESIBA - insulin degludec inj 100 unit/ml	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
TRESIBA FLEXTOUCH - insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2		
THYROID AGENTS			
ADTHYZA - thyroid tab 16.25 mg, 32.5 mg, 65 mg, 97.5 mg, 130 mg	3		
ARMOUR THYROID - thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	3		
ERMEZA - levothyroxine sodium oral solution 150 mcg/5ml	3		
levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg (Synthroid)	1		
liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg (Cytomel)	1		
methimazole tab 5 mg, 10 mg	1		
NP THYROID 120 - thyroid tab 120 mg (2 grain)	3		
NP THYROID 15 - thyroid tab 15 mg (1/4 grain)	3		
NP THYROID 30 - thyroid tab 30 mg (1/2 grain)	3		
NP THYROID 60 - thyroid tab 60 mg (1 grain)	3		
NP THYROID 90 - thyroid tab 90 mg (1 1/2 grain)	3		
propylthiouracil tab 50 mg	1		
SYNTHROID - levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	2		
THYQUIDITY - levothyroxine sodium oral solution 100 mcg/5ml	3		
OXYTOCICS			
methylergonovine maleate tab 0.2 mg	1		QL (28 tablets/270 days)
ENDOCRINE and METABOLIC AGENTS - MISC.			
ACTHAR - corticotropin inj gel 80 unit/ml	3	SP	PA, LD, QL (7 vials/21 days)
ALENDRONATE SODIUM - alendronate sodium tab 5 mg	3		
alendronate sodium oral soln 70 mg/75ml	1		
alendronate sodium tab 10 mg, 35 mg	1		
alendronate sodium tab 70 mg (Fosamax)	1		
betaine powder for oral solution (Cystadane)	1	SP	PA
BINOSTO - alendronate sodium effervescent tab 70 mg	3		
BUPHENYL - sodium phenylbutyrate tab 500 mg	3	SP	PA, LD, QL (1200 tablets/30 days)
cabergoline tab 0.5 mg	1		

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calcitonin (salmon) inj 200 unit/ml (Miacalcin)	1		
calcitonin (salmon) nasal soln 200 unit/act	1		
calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol)	1		
calcitriol oral soln 1 mcg/ml (Rocaltrol)	1		
CARBAGLU - carglumic acid soluble tab 200 mg	3	SP	LD
carglumic acid soluble tab 200 mg (Carbaglu)	1	SP	
CARNITOR - levocarnitine tab 330 mg	3		
CARNITOR - levocarnitine oral soln 1 gm/10ml (10%)	3		
CARNITOR SF - levocarnitine oral soln 1 gm/10ml (10%)	3		
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) (Sensipar)	1		PA
CYSTADANE - betaine powder for oral solution	3	SP	PA, LD
DDAVP - desmopressin acetate inj 4 mcg/ml	3		
DDAVP - desmopressin acetate preservative free (pf) inj 4 mcg/ml	3		
DESMOPRESSIN ACETATE - desmopressin acetate nasal soln 1.5 mg/ml	2		
desmopressin acetate inj 4 mcg/ml (Ddavp)	1		
desmopressin acetate nasal spray soln 0.01% (refrigerated), 0.01%	1		
desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddavp)	1		
desmopressin acetate tab 0.1 mg, 0.2 mg (Ddavp)	1		
doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg	1		
EGRIFTA SV - tesamorelin acetate for inj 2 mg (base equiv)	3	SP	PA
FORTEO - teriparatide (recombinant) soln pen-inj 600 mcg/2.4ml	2	SP	PA
FOSAMAX - alendronate sodium tab 70 mg	3		
GALAFOLD - migalastat hcl cap 123 mg (base equivalent)	3	SP	PA, LD, QL (14 capsules/28 days)
GENOTROPIN - somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	2	SP	PA
GENOTROPIN MINIQUICK - somatropin for subcutaneous inj prefilled syr 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	2	SP	PA
ibandronate sodium tab 150 mg (base equivalent)	1		
INCRELEX - mecasermin inj 40 mg/4ml (10 mg/ml)	2	SP	PA, LD
ISTURISA - osilodrostat phosphate tab 1 mg	3	SP	PA, LD, QL (240 tablets/30 days)
ISTURISA - osilodrostat phosphate tab 5 mg	3	SP	PA, LD, QL (300 tablets/30 days)
ISTURISA - osilodrostat phosphate tab 10 mg	3	SP	PA, LD, QL (180 tablets/30 days)

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JYNARQUE - tolvaptan tab therapy pack 15 mg, 30 & 15 mg	3	SP	PA, LD, QL (56 tablets/28 days)
JYNARQUE - tolvaptan tab therapy pack 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	3	SP	PA, LD, QL (4 blisters/28 days)
JYNARQUE - tolvaptan tab 15 mg	3	SP	PA, LD, QL (60 tablets/30 days)
JYNARQUE - tolvaptan tab 30 mg	3	SP	PA, LD, QL (30 tablets/30 days)
KERENDIA - finerenone tab 10 mg, 20 mg	3		PA, QL (30 tablets/30 days)
KUVAN - sapropterin dihydrochloride tab 100 mg	3	SP	PA, LD
KUVAN - sapropterin dihydrochloride powder packet 100 mg, 500 mg	3	SP	PA, LD
levocarnitine oral soln 1 gm/10ml (10%) (Carnitor)	1		
levocarnitine tab 330 mg (Carnitor)	1		
MIACALCIN - calcitonin (salmon) inj 200 unit/ml	3		
MIFEPREX - mifepristone tab 200 mg	2		QL (1 tablet/30 days)
mifepristone tab 200 mg (Mifeprex)	1		QL (1 tablet/30 days)
MYALEPT - metreleptin for subcutaneous inj 11.3 mg	3	SP	PA, LD, QL (30 vials/30 days)
MYCAPSSA - octreotide acetate cap delayed release 20 mg	3	SP	PA, LD, QL (120 capsules/30 days)
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg (Orfadin)	1	SP	PA, LD
NITYR - nitisinone tab 2 mg, 5 mg, 10 mg	2	SP	PA
NORDITROPIN FLEXPPO - somatropin solution pen-injector 5 mg/1.5ml, 10 mg/1.5ml, 15 mg/1.5ml, 30 mg/3ml	2	SP	PA
NULIBRY - fosdenopterin hydrobromide for iv soln 9.5 mg	3	SP	PA, LD
OCTREOTIDE ACETATE - octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	3	SP	
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml) (Sandostatin)	1	SP	
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)	1	SP	
ORFADIN - nitisinone susp 4 mg/ml	2	SP	PA, LD
ORFADIN - nitisinone cap 2 mg, 5 mg, 10 mg	3	SP	PA, LD
ORFADIN - nitisinone cap 20 mg	2	SP	PA, LD
ORLISSA - elagolix sodium tab 150 mg (base equiv)	2		PA, QL (30 tablets/30 days)
ORLISSA - elagolix sodium tab 200 mg (base equiv)	2		PA, QL (60 tablets/30 days)
OSPHENA - ospemifene tab 60 mg	3		
OVIDREL - choriogonadotropin alfa inj 250 mcg/0.5ml	2		
PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml	3	SP	PA, LD, QL (30 syringes/30 days)

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PALYNZIQ - pegvaliase-pqpz subcutaneous soln pref syringe 20 mg/ml	3	SP	PA, LD, QL (60 syringes/30 days)
paricalcitol cap 1 mcg, 2 mcg (Zemplar)	1		
paricalcitol cap 4 mcg	1		
PHEBURANE - sodium phenylbutyrate oral pellets 483 mg/gm	3	SP	PA, LD, QL (7 bottles/29 days)
raloxifene hcl tab 60 mg (Evista)	1		
RAVICTI - glycerol phenylbutyrate liquid 1.1 gm/ml	3	SP	PA, LD, QL (525 mls/30 days)
risedronate sodium tab delayed release 35 mg (Atelvia)	1		
risedronate sodium tab 5 mg, 30 mg	1		
risedronate sodium tab 35 mg, 150 mg (Actonel)	1		
ROCALTROL - calcitriol cap 0.25 mcg, 0.5 mcg	3		
ROCALTROL - calcitriol oral soln 1 mcg/ml	3		
SAMSCA - tolvaptan tab 15 mg	3	SP	LD, QL (30 tablets/365 days)
SANDOSTATIN - octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)	3	SP	
sapropterin dihydrochloride powder packet 100 mg, 500 mg (Kuvan)	1	SP	PA, LD
sapropterin dihydrochloride tab 100 mg (Kuvan)	1	SP	PA, LD
SENSIPAR - cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)	3		PA
SEROSTIM - somatropin (non-refrigerated) for subcutaneous inj 4 mg, 5 mg, 6 mg	3	SP	PA, LD
SIGNIFOR - pasireotide diaspertate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	3	SP	PA, LD, QL (60 vials/30 days)
SIGNIFOR LAR - pasireotide pamoate for im er susp 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv)	3	SP	PA, LD, QL (1 vial/28 days)
sodium phenylbutyrate oral powder 3 gm/teaspoonful (Buphenyl)	1	SP	PA, QL (600 grams/30 days)
sodium phenylbutyrate tab 500 mg (Buphenyl)	1	SP	PA, QL (1200 tablets/30 days)
SOMAVERT - pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	2	SP	LD
STRENSIQ - asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	2	SP	PA, LD
SYNAREL - nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	2	SP	
TERIPARATIDE - teriparatide (recombinant) soln pen-inj 620 mcg/2.48ml	3	SP	PA

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Drug Name	Drug Tier	Specialty	Requirements/Limits
tolvaptan tab 15 mg (Samsca)	1	SP	QL (30 tablets/365 days)
tolvaptan tab 30 mg (Samsca)	1	SP	QL (60 tablets/365 days)
TYMLOS - abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	2	SP	PA, LD
VOXZOGO - vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	3	SP	PA, LD, QL (30 vials/30 days)
XURIDEN - uridine triacetate oral granules packet 2 gm	3	SP	PA, LD
ZEMPLAR - paricalcitol cap 1 mcg, 2 mcg	3		
CARDIOVASCULAR AGENTS			
CARDIOTONICS			
DIGOXIN - digoxin oral soln 0.05 mg/ml	3		
digoxin oral soln 0.05 mg/ml (Digoxin)	1		
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin)	1		
LANOXIN - digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	3		
ANTIANGINAL AGENTS			
isosorbide dinitrate tab 5 mg, 40 mg (Isordil titradose)	1		
isosorbide dinitrate tab 10 mg, 20 mg, 30 mg	1		
ISOSORBIDE MONONITRATE - isosorbide mononitrate tab 10 mg, 20 mg	2		
isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg	1		
NITRO-BID - nitroglycerin oint 2%	2		
NITRO-DUR - nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr	3		
NITRO-DUR - nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	2		
NITRO-TIME - nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	3		
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)	1		
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)	1		
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray) (Nitrolingual pumpspr)	1		
NITROLINGUAL PUMPSPRAY - nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)	3		
NITROSTAT - nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg	3		
ranolazine tab er 12hr 500 mg, 1000 mg (Ranexa)	1		
BETA BLOCKERS			
acebutolol hcl cap 200 mg, 400 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
atenolol tab 25 mg, 50 mg, 100 mg (Tenormin)	1		
betaxolol hcl tab 10 mg, 20 mg	1		
bisoprolol fumarate tab 5 mg, 10 mg	1		
carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg)	1		
CORGARD - nadolol tab 20 mg, 40 mg	3		
INNOPRAN XL - propranolol hcl sustained-release beads cap er 24hr 80 mg, 120 mg	2		
labetalol hcl tab 100 mg, 200 mg, 300 mg	1		
LOPRESSOR - metoprolol tartrate tab 50 mg, 100 mg	3		
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) (Toprol xl)	1		
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg	1		
metoprolol tartrate tab 50 mg, 100 mg (Lopressor)	1		
nadolol tab 20 mg, 40 mg, 80 mg (Corgard)	1		
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) (Bystolic)	1		
pindolol tab 5 mg, 10 mg	1		
PROPRANOLOL HCL - propranolol hcl oral soln 40 mg/5ml	2		
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg (Inderal la)	1		
propranolol hcl oral soln 20 mg/5ml	1		
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1		
sotalol hcl (afib/af) tab 80 mg, 120 mg, 160 mg (Betapace af)	1		
sotalol hcl tab 80 mg, 120 mg, 160 mg (Betapace)	1		
sotalol hcl tab 240 mg	1		
timolol maleate tab 5 mg, 10 mg, 20 mg	1		
TOPROL XL - metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)	3		
CALCIUM CHANNEL BLOCKERS			
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)	1		
CALAN SR - verapamil hcl tab er 120 mg, 180 mg, 240 mg	3		
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1		
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg (Cardizem cd)	1		
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)	1		
diltiazem hcl tab er 24hr 420 mg (Cardizem la)	1		
diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)	1		
diltiazem hcl tab 90 mg	1		
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1		
isradipine cap 2.5 mg, 5 mg	1		
nicardipine hcl cap 20 mg, 30 mg	1		
nifedipine cap 10 mg, 20 mg	1		
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg	1		
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)	1		
nimodipine cap 30 mg	1		QL (252 capsules/180 days)
NISOLDIPINE ER - nisoldipine tab er 24hr 20 mg, 25.5 mg, 30 mg, 40 mg	2		
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg (Sular)	1		
NYMALIZE - nimodipine oral soln 6 mg/ml	3		QL (1320 mls/180 days)
SULAR - nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg	3		
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)	1		
VERAPAMIL HCL ER - verapamil hcl cap er 24hr 100 mg, 300 mg	3		
VERAPAMIL HCL SR - verapamil hcl cap er 24hr 360 mg	3		
verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)	1		
verapamil hcl tab 40 mg, 80 mg, 120 mg	1		
VERAPAMIL HYDROCHLORIDE E - verapamil hcl cap er 24hr 100 mg, 200 mg	3		
VERELAN - verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg, 360 mg	3		
ANTIARRHYTHMICS			
amiodarone hcl tab 100 mg, 200 mg, 400 mg	1		
disopyramide phosphate cap 100 mg, 150 mg (Norpace)	1		
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) (Tikosyn)	1		
flecainide acetate tab 50 mg, 100 mg, 150 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
mexiletine hcl cap 150 mg, 200 mg, 250 mg	1		
MULTAQ - dronedarone hcl tab 400 mg (base equivalent)	2		
NORPACE - disopyramide phosphate cap 100 mg, 150 mg	3		
NORPACE CR - disopyramide phosphate cap er 12hr 100 mg, 150 mg	3		
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg (Rythmol sr)	1		
propafenone hcl tab 150 mg, 225 mg, 300 mg	1		
quinidine gluconate tab er 324 mg	1		
QUINIDINE SULFATE - quinidine sulfate tab 200 mg, 300 mg	3		
ANTIHYPERTENSIVES			
ACCURETIC - quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	3		
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent) (Tekturna)	1		QL (30 tablets/30 days)
amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg	1		
amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg (Lotrel)	1		
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Azor)	1		QL (30 tablets/30 days)
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)	1		QL (30 tablets/30 days)
amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg (Exforge hct)	1		QL (30 tablets/30 days)
atenolol & chlorthalidone tab 50-25 mg (Tenoretic 50)	1		
atenolol & chlorthalidone tab 100-25 mg (Tenoretic 100)	1		
benazepril & hydrochlorothiazide tab 5-6.25 mg	1		
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Lotensin hct)	1		
benazepril hcl tab 5 mg	1		
benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin)	1		
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg (Ziac)	1		
candesartan cilexetil tab 4 mg, 8 mg, 16 mg (Atacand)	1		QL (60 tablets/30 days)
candesartan cilexetil tab 32 mg (Atacand)	1		QL (30 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct)	1		QL (30 tablets/30 days)
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1		
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg	1		
clonidine td patch weekly 0.1 mg/24hr (Catapres- tts-1)	1		
clonidine td patch weekly 0.2 mg/24hr (Catapres- tts-2)	1		
clonidine td patch weekly 0.3 mg/24hr (Catapres- tts-3)	1		
DIBENZYLINE - phenoxybenzamine hcl cap 10 mg	3		
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg (Cardura)	1		
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1		
enalapril maleate & hydrochlorothiazide tab 10-25 mg (Vaseretic)	1		
enalapril maleate oral soln 1 mg/ml (Epaned)	1		QL (300 mls/30 days)
enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg (Vasotec)	1		
EPANED - enalapril maleate oral soln 1 mg/ml	3		QL (300 mls/30 days)
eplerenone tab 25 mg, 50 mg (Inspra)	1		
fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg	1		
fosinopril sodium tab 10 mg, 20 mg, 40 mg	1		
guanfacine hcl tab 1 mg, 2 mg	1		
hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1		
irbesartan tab 75 mg, 150 mg, 300 mg (Avapro)	1		QL (30 tablets/30 days)
irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg (Avalide)	1		QL (30 tablets/30 days)
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg (Zestoretic)	1		
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg (Zestril)	1		
losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg (Hyzaar)	1		QL (30 tablets/30 days)
losartan potassium tab 25 mg, 50 mg (Cozaar)	1		QL (60 tablets/30 days)
losartan potassium tab 100 mg (Cozaar)	1		QL (30 tablets/30 days)
LOTENSIN - benazepril hcl tab 10 mg, 20 mg, 40 mg	3		
LOTENSIN HCT - benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg	3		
METHYLDOPA - methyldopa tab 250 mg, 500 mg	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg	1		
MINIPRESS - prazosin hcl cap 1 mg, 2 mg, 5 mg	3		
minoxidil tab 2.5 mg, 10 mg	1		
moexipril hcl tab 7.5 mg, 15 mg	1		
olmesartan medoxomil tab 5 mg (Benicar)	1		QL (60 tablets/30 days)
olmesartan medoxomil tab 20 mg, 40 mg (Benicar)	1		QL (30 tablets/30 days)
olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg (Benicar hct)	1		QL (30 tablets/30 days)
olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg (Tribenzor)	1		QL (30 tablets/30 days)
PERINDOPRIL ERBUMINE - perindopril erbumine tab 8 mg	2		
perindopril erbumine tab 2 mg, 4 mg	1		
phenoxybenzamine hcl cap 10 mg (Dibenzyline)	1		
prazosin hcl cap 1 mg, 2 mg, 5 mg (Minipress)	1		
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg (Accupril)	1		
QUINAPRIL/HYDROCHLOROTHIA - quinapril-hydrochlorothiazide tab 20-12.5 mg, 20-25 mg	3		
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg (Altace)	1		
TEKTURNA - aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent)	3		ST, QL (30 tablets/30 days)
telmisartan tab 20 mg, 40 mg, 80 mg (Micardis)	1		QL (30 tablets/30 days)
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg (Micardis hct)	1		QL (30 tablets/30 days)
telmisartan-hydrochlorothiazide tab 80-12.5 mg (Micardis hct)	1		QL (60 tablets/30 days)
TELMISARTAN/AMLODIPINE - telmisartan-amlodipine tab 40-5 mg, 40-10 mg, 80-5 mg, 80-10 mg	3		ST, QL (30 tablets/30 days)
TENORETIC 100 - atenolol & chlorthalidone tab 100-25 mg	3		
TENORETIC 50 - atenolol & chlorthalidone tab 50-25 mg	3		
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1		
trandolapril tab 1 mg, 2 mg, 4 mg	1		
TRANDOLAPRIL/VERAPAMIL HC - trandolapril-verapamil hcl tab er 1-240 mg, 2-180 mg, 2-240 mg, 4-240 mg	3		
valsartan tab 40 mg, 80 mg, 160 mg (Diovan)	1		QL (60 tablets/30 days)

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valsartan tab 320 mg (Diovan)	1		QL (30 tablets/30 days)
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg (Diovan hct)	1		QL (30 tablets/30 days)
VECAMYL - mecamylamine hcl tab 2.5 mg	3		LD
DIURETICS			
acetazolamide cap er 12hr 500 mg	1		
acetazolamide tab 125 mg, 250 mg	1		
ALDACTAZIDE - spironolactone & hydrochlorothiazide tab 25-25 mg	3		
amiloride hcl tab 5 mg	1		
AMILORIDE/HYDROCHLOROTHIA - amiloride & hydrochlorothiazide tab 5-50 mg	2		
bumetanide tab 0.5 mg (Bumex)	1		
bumetanide tab 1 mg, 2 mg	1		
BUMEX - bumetanide tab 0.5 mg	3		
chlorthalidone tab 25 mg, 50 mg	1		
dichlorphenamide tab 50 mg (Keveyis)	1	SP	PA, QL (120 tablets/30 days)
DIURIL - chlorothiazide susp 250 mg/5ml	3		
DYRENIUM - triamterene cap 50 mg, 100 mg	3		
EDECRIN - ethacrynic acid tab 25 mg	3		
ethacrynic acid tab 25 mg (Edecrin)	1		
FUROSCIX - furosemide subcutaneous cartridge kit 80 mg/10ml	3	SP	PA, QL (8 kits/30 days)
FUROSEMIDE - furosemide oral soln 8 mg/ml	3		
furosemide oral soln 10 mg/ml	1		
furosemide tab 20 mg, 40 mg, 80 mg (Lasix)	1		
hydrochlorothiazide cap 12.5 mg	1		
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1		
indapamide tab 1.25 mg, 2.5 mg	1		
KEVEYIS - dichlorphenamide tab 50 mg	3	SP	PA, LD, QL (120 tablets/30 days)
LASIX - furosemide tab 20 mg, 40 mg, 80 mg	3		
MAXZIDE - triamterene & hydrochlorothiazide tab 75-50 mg	3		
MAXZIDE-25 - triamterene & hydrochlorothiazide tab 37.5-25 mg	3		
methazolamide tab 25 mg, 50 mg	1		
metolazone tab 2.5 mg, 5 mg, 10 mg	1		
spironolactone & hydrochlorothiazide tab 25-25 mg (Aldactazide)	1		

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spironolactone tab 25 mg, 50 mg, 100 mg (Aldactone)	1		
toremide tab 5 mg, 10 mg, 20 mg, 100 mg	1		
triamterene & hydrochlorothiazide cap 37.5-25 mg	1		
triamterene & hydrochlorothiazide tab 37.5-25 mg (Maxzide-25)	1		
triamterene & hydrochlorothiazide tab 75-50 mg (Maxzide)	1		
triamterene cap 50 mg, 100 mg (Dyrenium)	1		
VASOPRESSORS			
EPINEPHRINE - epinephrine solution auto-injector 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	3		
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)	1		
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) (Epipen 2-pak)	1		
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	1		
SYMJEPI - epinephrine soln prefilled syringe 0.15 mg/0.3ml (1:2000)	2		
SYMJEPI - epinephrine solution prefilled syringe 0.3 mg/0.3ml (1:1000)	2		
ANTIHYPERLIPIDEMICS			
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent) (Lipitor)	1		QL (45 tablets/30 days)
atorvastatin calcium tab 80 mg (base equivalent) (Lipitor)	1		QL (30 tablets/30 days)
cholestyramine light powder packets 4 gm	1		
cholestyramine light powder 4 gm/dose (Questran light)	1		
cholestyramine powder packets 4 gm (Questran)	1		
cholestyramine powder 4 gm/dose (Questran)	1		
choline fenofibrate cap dr 45 mg (fenofibric acid equiv) (Trilipix)	1		QL (60 capsules/30 days)
choline fenofibrate cap dr 135 mg (fenofibric acid equiv) (Trilipix)	1		QL (30 capsules/30 days)
colesevelam hcl packet for susp 3.75 gm (Welchol)	1		
colesevelam hcl tab 625 mg (Welchol)	1		
COLESTID - colestipol hcl tab 1 gm	3		
COLESTID - colestipol hcl granules 5 gm	3		
COLESTID - colestipol hcl granule packets 5 gm	3		
COLESTID FLAVORED - colestipol hcl granules 5 gm	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
COLESTID FLAVORED - colestipol hcl granule packets 5 gm	3		
colestipol hcl granule packets 5 gm (Colestid flavored)	1		
colestipol hcl granules 5 gm (Colestid flavored)	1		
colestipol hcl tab 1 gm (Colestid)	1		
ezetimibe tab 10 mg (Zetia)	1		
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)	1		QL (30 tablets/30 days)
fenofibrate micronized cap 43 mg	1		QL (60 capsules/30 days)
fenofibrate micronized cap 67 mg, 130 mg, 134 mg, 200 mg	1		QL (30 capsules/30 days)
fenofibrate tab 48 mg (Tricor)	1		QL (60 tablets/30 days)
fenofibrate tab 54 mg	1		QL (60 tablets/30 days)
fenofibrate tab 145 mg (Tricor)	1		QL (30 tablets/30 days)
fenofibrate tab 160 mg	1		QL (30 tablets/30 days)
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	1		QL (60 capsules/30 days)
fluvastatin sodium tab er 24 hr 80 mg (base equivalent) (Lescol xl)	1		QL (30 tablets/30 days)
gemfibrozil tab 600 mg (Lopid)	1		QL (60 tablets/30 days)
JUXTAPID - lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	3	SP	PA, LD, QL (30 capsules/30 days)
LIVALO - pitavastatin calcium tab 1 mg, 2 mg	3		ST, QL (45 tablets/30 days)
LIVALO - pitavastatin calcium tab 4 mg	3		ST, QL (30 tablets/30 days)
LOPID - gemfibrozil tab 600 mg	3		ST, QL (60 tablets/30 days)
lovastatin tab 10 mg, 20 mg, 40 mg	1		QL (60 tablets/30 days)
NEXLETOL - bempedoic acid tab 180 mg	2		PA, QL (30 tablets/30 days)
NEXLIZET - bempedoic acid-ezetimibe tab 180-10 mg	2		PA, QL (30 tablets/30 days)
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic)	1		
niacin tab er 1000 mg (antihyperlipidemic) (Niaspan)	1		
omega-3-acid ethyl esters cap 1 gm (Lovaza)	1		
pravastatin sodium tab 10 mg, 20 mg, 40 mg	1		QL (45 tablets/30 days)
pravastatin sodium tab 80 mg	1		QL (30 tablets/30 days)
QUESTRAN - cholestyramine powder 4 gm/dose	3		
QUESTRAN - cholestyramine powder packets 4 gm	3		
QUESTRAN LIGHT - cholestyramine light powder 4 gm/dose	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
REPATHA - evolocumab subcutaneous soln prefilled syringe 140 mg/ml	2		PA, QL (2 syringes/28 days)
REPATHA PUSHTRONEX SYSTEM - evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	2		PA, QL (2 cartridges/28 days)
REPATHA SURECLICK - evolocumab subcutaneous soln auto-injector 140 mg/ml	2		PA, QL (2 pens/28 days)
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg (Crestor)	1		QL (45 tablets/30 days)
rosuvastatin calcium tab 40 mg (Crestor)	1		QL (30 tablets/30 days)
simvastatin tab 5 mg	1		QL (45 tablets/30 days)
simvastatin tab 10 mg, 40 mg (Zocor)	1		QL (45 tablets/30 days)
simvastatin tab 20 mg (Zocor)	1		QL (60 tablets/30 days)
simvastatin tab 80 mg	1		QL (30 tablets/30 days)
TRICOR - fenofibrate tab 48 mg	3		ST, QL (60 tablets/30 days)
TRICOR - fenofibrate tab 145 mg	3		ST, QL (30 tablets/30 days)
VASCEPA - icosapent ethyl cap 0.5 gm	2		PA, QL (240 capsules/30 days)
VASCEPA - icosapent ethyl cap 1 gm	2		PA, QL (120 capsules/30 days)
CARDIOVASCULAR AGENTS - MISC.			
ADEMPAS - riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	3	SP	PA, LD, QL (90 tablets/30 days)
ambrisentan tab 5 mg, 10 mg (Letairis)	1	SP	PA, LD, QL (30 tablets/30 days)
BIDIL - isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg	3		
bosentan tab 62.5 mg, 125 mg (Tracleer)	1	SP	PA, QL (60 tablets/30 days)
CAMZYOS - mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	3	SP	PA, LD, QL (30 capsules/30 days)
CORLANOR - ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)	2		
CORLANOR - ivabradine hcl oral soln 5 mg/5ml (base equiv)	2		
ENTRESTO - sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	2		QL (60 tablets/30 days)
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg (Bidil)	1		
LETAIRIS - ambrisentan tab 5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
OPSUMIT - macitentan tab 10 mg	2	SP	PA, LD, QL (30 tablets/30 days)
ORENITRAM - treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	3	SP	PA, LD
ORENITRAM TITRATION KIT M - treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg,	3	SP	PA, LD, QL (1 kit/180 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.25mg&84x1mg			
REMODULIN - treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml)	3	SP	PA, LD
sildenafil citrate for suspension 10 mg/ml (Revatio)	1		PA, QL (224 mls/30 days)
sildenafil citrate tab 20 mg (Revatio)	1		PA, QL (90 tablets/30 days)
tadalafil tab 20 mg (pah) (Adcirca)	1	SP	PA, QL (60 tablets/30 days)
TRACLEER - bosentan tab 62.5 mg, 125 mg	3	SP	PA, LD, QL (60 tablets/30 days)
TRACLEER - bosentan tab for oral susp 32 mg	2	SP	PA, LD, QL (120 tablets/30 days)
treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml) (Remodulin)	1	SP	PA
TYVASO - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (28 ampules/28 days)
TYVASO DPI MAINTENANCE KI - treprostinil inh powder 16 mcg/cartridge, 32 mcg/cartridge, 48 mcg/cartridge, 64 mcg/cartridge	3	SP	PA, LD, QL (112 cartridges/28 days)
TYVASO DPI TITRATION KIT - treprostinil inh powder 112 x 16mcg & 84 x 32mcg	3	SP	PA, LD, QL (196 cartridges/180 days)
TYVASO DPI TITRATION KIT - treprostinil inh powd 112 x 16mcg & 112 x 32mcg & 28 x 48mcg	3	SP	PA, LD, QL (252 cartridges/180 days)
TYVASO REFILL - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (28 ampules/28 days)
TYVASO STARTER - treprostinil inhalation solution 0.6 mg/ml	3	SP	PA, LD, QL (1 kit/180 days)
UPTRAVI - selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	2	SP	PA, LD, QL (60 tablets/30 days)
UPTRAVI TITRATION PACK - selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	2	SP	PA, LD, QL (1 pack/180 days)
VENTAVIS - iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	2	SP	PA, LD, QL (68 ampules/30 days)
VERQUVO - vericiguat tab 2.5 mg, 5 mg, 10 mg	2		PA, QL (30 tablets/30 days)
VYNDAMAX - tafamidis cap 61 mg	2	SP	PA, QL (30 capsules/30 days)
VYNDAQEL - tafamidis meglumine (cardiac) cap 20 mg	2	SP	PA, QL (120 capsules/30 days)
ERECTILE DYSFUNCTION			
CIALIS - tadalafil tab 2.5 mg, 5 mg	3		QL (30 tablets/30 days)
tadalafil tab 2.5 mg, 5 mg (Cialis)	1		QL (30 tablets/30 days)
RESPIRATORY AGENTS			
ANTI-HISTAMINES			
CARBINOXAMINE MALEATE - carbinoxamine maleate soln 4 mg/5ml	3		
carbinoxamine maleate tab 4 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CLEMASTINE FUMARATE - clemastine fumarate tab 2.68 mg	3		
cyproheptadine hcl syrup 2 mg/5ml	1		
cyproheptadine hcl tab 4 mg	1		
desloratadine tab 5 mg (Clarinet)	1		
levocetirizine dihydrochloride tab 5 mg	1		
loratadine oral soln 5 mg/5ml	1		
loratadine rapidly-disintegrating tab 10 mg (Claritin)	1		
loratadine syrup 5 mg/5ml	1		
loratadine tab 10 mg	1		
promethazine hcl suppos 12.5 mg, 25 mg	1		
promethazine hcl syrup 6.25 mg/5ml	1		
promethazine hcl tab 12.5 mg, 25 mg, 50 mg	1		
PROMETHEGAN - promethazine hcl suppos 50 mg	3		
NASAL AGENTS - SYSTEMIC and TOPICAL			
azelastine hcl nasal spray 0.1% (137 mcg/spray)	1		QL (2 bottles/30 days)
flunisolide nasal soln 25 mcg/act (0.025%)	1		QL (3 bottles/30 days)
fluticasone propionate nasal susp 50 mcg/act	1		QL (1 bottle/30 days)
ipratropium bromide nasal soln 0.03% (21 mcg/spray)	1		QL (2 bottles/30 days)
ipratropium bromide nasal soln 0.06% (42 mcg/spray)	1		QL (3 bottles/30 days)
olopatadine hcl nasal soln 0.6% (Patanase)	1		QL (1 bottle/30 days)
XHANCE - fluticasone propionate nasal exhaler susp 93 mcg/act	3		PA, QL (2 bottles/30 days)
COUGH/COLD/ALLERGY			
acetylcysteine inhal soln 10%, 20%	1		
benzonatate cap 100 mg, 200 mg	1		
HYCODAN - hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg	3		
HYCODAN - hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml	3		
hydrocod polst-chlorphen polst er susp 10-8 mg/5ml	1		
hydrocodone bitart-homatropine methylbrom soln 5-1.5 mg/5ml (Hycodan)	1		
hydrocodone bitart-homatropine methylbromide tab 5-1.5 mg (Hycodan)	1		
HYPERSAL - sodium chloride soln nebu 7%	3		
loratadine & pseudoephedrine tab er 12hr 5-120 mg	1		
loratadine & pseudoephedrine tab er 24hr 10-240 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PROMETHAZINE VC - promethazine & phenylephrine syrup 6.25-5 mg/5ml	2		
PROMETHAZINE VC/CODEINE - promethazine-phenylephrine-codeine syrup 6.25-5-10 mg/5ml	2		
promethazine w/ codeine syrup 6.25-10 mg/5ml	1		
promethazine-dm syrup 6.25-15 mg/5ml	1		
pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml	1		
sodium chloride soln nebu 3%, 10%	1		
sodium chloride soln nebu 7% (Hypersal)	1		
ANTIASTHMATIC and BRONCHODILATOR AGENTS			
ACCOLATE - zafirlukast tab 10 mg, 20 mg	3		
ADVAIR DISKUS - fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act	2		QL (60 blisters/30 days)
ADVAIR HFA - fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act	2		QL (1 canister/30 days)
ALBUTEROL SULFATE - albuterol sulfate soln nebu 0.5% (5 mg/ml)	2		
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proventil hfa)	1		QL (2 inhalers/30 days)
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)	1		
albuterol sulfate syrup 2 mg/5ml	1		
albuterol sulfate tab 2 mg, 4 mg	1		
ANORO ELLIPTA - umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act	2		QL (1 inhaler/30 days)
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) (Brovana)	1		
ARNUITY ELLIPTA - fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2		QL (30 blisters/30 days)
ASMANEX HFA - mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 120 ME - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 30 MET - mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ASMANEX TWISTHALER 60 MET - mometasone furoate inhal powd 220 mcg/act (breath activated)	2		QL (1 canister/30 days)
ATROVENT HFA - ipratropium bromide hfa inhal aerosol 17 mcg/act	2		QL (2 canisters/30 days)
BEVESPI AEROSPHERE - glycopyrrolate-formoterol fumarate aerosol 9-4.8 mcg/act	3		QL (1 canister/30 days)

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BREO ELLIPTA - fluticasone furoate-vilanterol aero powd ba 100-25 mcg/act, 200-25 mcg/act	2		QL (60 blisters/30 days)
BREZTRI AEROSPHERE - budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	2		QL (1 inhaler/30 days)
BROVANA - arformoterol tartrate soln nebu 15 mcg/2ml (base equiv)	3		
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)	1		
COMBIVENT RESPIMAT - ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	2		QL (2 canisters/30 days)
cromolyn sodium soln nebu 20 mg/2ml	1		
DALIRESP - roflumilast tab 250 mcg, 500 mcg	3		
DULERA - mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	2		QL (3 canisters/30 days)
FASENRA PEN - benralizumab subcutaneous soln auto-injector 30 mg/ml	2	SP	PA, QL (1 pen/56 days)
FLOVENT DISKUS - fluticasone propionate aer pow ba 50 mcg/act, 100 mcg/act	2		QL (60 blisters/30 days)
FLOVENT DISKUS - fluticasone propionate aer pow ba 250 mcg/act	2		QL (240 blisters/30 days)
FLOVENT HFA - fluticasone propionate hfa inhal aero 44 mcg/act (50/valve)	2		QL (1 canister/30 days)
FLOVENT HFA - fluticasone propionate hfa inhal aer 110 mcg/act (125/valve)	2		QL (1 canister/30 days)
FLOVENT HFA - fluticasone propionate hfa inhal aer 220 mcg/act (250/valve)	2		QL (2 canisters/30 days)
FLUTICASONE PROPIONATE/SA - fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	2		QL (1 inhaler/30 days)
fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)	1		PA, QL (60 blisters/30 days)
INCRUSE ELLIPTA - umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	2		QL (30 blisters/30 days)
ipratropium bromide inhal soln 0.02%	1		
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml	1		
levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv) (Xopenex concentrate)	1		
levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv) (Xopenex)	1		
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv) (Singulair)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
montelukast sodium tab 10 mg (base equiv) (Singulair)	1		
NUCALA - mepolizumab subcutaneous solution auto-injector 100 mg/ml	2	SP	PA, LD, QL (3 pens/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml	2	SP	PA, LD, QL (1 syringe/28 days)
NUCALA - mepolizumab subcutaneous solution pref syringe 100 mg/ml	2	SP	PA, LD, QL (3 syringes/28 days)
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 40 mcg/act	2		QL (1 canister/30 days)
QVAR REDHALER - beclomethasone diprop hfa breath act inh aer 80 mcg/act	2		QL (2 canisters/30 days)
roflumilast tab 250 mcg, 500 mcg (Daliresp)	1		
SEREVENT DISKUS - salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	2		QL (60 blisters/30 days)
SPIRIVA HANDIHALER - tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	2		QL (30 capsules/30 days)
SPIRIVA RESPIMAT - tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	2		QL (1 cartridge/30 days)
STIOLTO RESPIMAT - tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act	2		QL (1 cartridge/30 days)
STRIVERDI RESPIMAT - olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	2		QL (1 cartridge/30 days)
SYMBICORT - budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	2		QL (3 inhalers/30 days)
terbutaline sulfate tab 2.5 mg, 5 mg	1		
THEO-24 - theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	3		
theophylline elixir 80 mg/15ml	1		
theophylline soln 80 mg/15ml	1		
theophylline tab er 12hr 300 mg, 450 mg	1		
theophylline tab er 24hr 400 mg, 600 mg	1		
TRELEGY ELLIPTA - fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	2		QL (1 inhaler/30 days)
VENTOLIN HFA - albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)	2		QL (2 inhalers/30 days)
XOLAIR - omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	2	SP	PA, LD
zafirlukast tab 10 mg, 20 mg (Accolate)	1		
zileuton tab er 12hr 600 mg	1		PA, QL (120 tablets/30 days)
RESPIRATORY AGENTS - MISC.			
BRONCHITOL - mannitol inhal cap 40 mg	3	SP	QL (600 capsules/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BRONCHITOL TOLERANCE TEST - mannitol inhal cap 40 mg	3	SP	QL (600 capsules/30 days)
ESBRIET - pirfenidone cap 267 mg	3	SP	PA, LD, QL (180 capsules/30 days)
ESBRIET - pirfenidone tab 267 mg	3	SP	PA, LD, QL (180 tablets/30 days)
ESBRIET - pirfenidone tab 801 mg	3	SP	PA, LD, QL (90 tablets/30 days)
KALYDECO - ivacaftor tab 150 mg	2	SP	PA, LD, QL (60 tablets/30 days)
KALYDECO - ivacaftor packet 13.4 mg, 25 mg, 50 mg, 75 mg	2	SP	PA, QL (56 packets/28 days)
OFEV - nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (60 capsules/30 days)
ORKAMBI - lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	3	SP	PA, LD, QL (120 tablets/30 days)
ORKAMBI - lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	3	SP	PA, LD, QL (60 packets/30 days)
PIRFENIDONE - pirfenidone tab 534 mg	3	SP	PA, QL (21 tablets/180 days)
pirfenidone cap 267 mg (Esbriet)	1	SP	PA, QL (180 capsules/30 days)
pirfenidone tab 267 mg (Esbriet)	1	SP	PA, QL (180 tablets/30 days)
pirfenidone tab 801 mg (Esbriet)	1	SP	PA, QL (90 tablets/30 days)
PULMOZYME - dornase alfa inhal soln 2.5 mg/2.5ml	2	SP	
SYMDEKO - tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	2	SP	PA, LD, QL (56 tablets/28 days)
SYMDEKO - tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	2	SP	PA, LD, QL (60 tablets/30 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	2	SP	PA, LD, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	2	SP	PA, LD, QL (56 packets/28 days)
TRIKAFTA - elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	2	SP	PA, LD, QL (90 tablets/30 day)
TRIKAFTA - elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	2	SP	PA, LD, QL (90 tablets/30 days)

GASTROINTESTINAL AGENTS

LAXATIVES

GAVILYTE-C - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	3		
GOLYTELY - peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm	3		
lactulose solution 10 gm/15ml	1		
MOVIPREP - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm	3		
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm (Golytely)	1		

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peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm (Moviprep)	1		
peg 3350-kcl-sod bicarb-nacl for soln 420 gm	1		
PEG-PREP - bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	3		
PLENVU - peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 140 gm	3		
sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml (Suprep bowel prep ki)	1		
SUPREP BOWEL PREP KIT - sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml	3		
SUTAB - sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	3		
ANTIDIARRHEALS			
diphenoxylate w/ atropine tab 2.5-0.025 mg (Lomotil)	1		
LOMOTIL - diphenoxylate w/ atropine tab 2.5-0.025 mg	3		
MYTESI - crofelemer tab delayed release 125 mg	3		LD
ULCER DRUGS			
CUVPOSA - glycopyrrolate oral soln 1 mg/5ml	3		
CYTOTEC - misoprostol tab 100 mcg, 200 mcg	3		
dicyclomine hcl cap 10 mg	1		
dicyclomine hcl oral soln 10 mg/5ml	1		
dicyclomine hcl tab 20 mg	1		
esomeprazole magnesium cap delayed release 40 mg (base eq) (Nexium)	1		QL (30 capsules/30 days)
esomeprazole magnesium for delayed release susp packet 10 mg, 20 mg, 40 mg (Nexium)	1		QL (30 packets/30 days)
famotidine for susp 40 mg/5ml	1		
famotidine tab 20 mg, 40 mg (Pepcid)	1		
glycopyrrolate oral soln 1 mg/5ml (Cuvposa)	1		
glycopyrrolate tab 1 mg (Robinul)	1		
glycopyrrolate tab 2 mg (Robinul forte)	1		
HELIDAC THERAPY - metronidaz tab-tetracyc cap-bis subsal chew tab therapy pack	3		
lansoprazole cap delayed release 30 mg (Prevacid)	1		QL (60 capsules/30 days)
methscopolamine bromide tab 2.5 mg, 5 mg	1		
misoprostol tab 100 mcg, 200 mcg (Cytotec)	1		
NEXIUM - esomeprazole magnesium for delayed release susp pack 2.5 mg	2		QL (30 packets/30 days)
NEXIUM - esomeprazole magnesium for delayed release susp packet 5 mg	2		QL (30 packets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
NIZATIDINE - nizatidine cap 150 mg, 300 mg	3		
omeprazole cap delayed release 10 mg, 40 mg	1		QL (60 capsules/30 days)
omeprazole cap delayed release 20 mg	1		QL (120 capsules/30 days)
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) (Protonix)	1		QL (60 tablets/30 days)
pantoprazole sodium for delayed release susp packet 40 mg (Protonix)	1		QL (60 packets/30 days)
rabeprazole sodium ec tab 20 mg (Aciphex)	1		QL (60 tablets/30 days)
sucralfate tab 1 gm (Carafate)	1		
ANTIEMETICS			
AKYNZEO - netupitant-palonosetron cap 300-0.5 mg	3		PA, QL (2 capsules/30 days)
ANZEMET - dolasetron mesylate tab 50 mg	3		QL (7 tablets/30 days)
aprepitant capsule therapy pack 80 & 125 mg (Emend tripack)	1		QL (2 packs/30 days)
aprepitant capsule 40 mg	1		
aprepitant capsule 80 mg (Emend)	1		QL (4 capsules/30 days)
aprepitant capsule 125 mg	1		QL (2 capsules/30 days)
BONJESTA - doxylamine-pyridoxine tab er 20-20 mg	3		PA, QL (60 tablets/30 days)
DICLEGIS - doxylamine-pyridoxine tab delayed release 10-10 mg	3		PA, QL (120 tablets/30 days)
doxylamine-pyridoxine tab delayed release 10-10 mg (Diclegis)	1		PA, QL (120 tablets/30 days)
dronabinol cap 2.5 mg (Marinol)	1		
dronabinol cap 5 mg, 10 mg	1		
EMEND - aprepitant capsule 80 mg	3		QL (4 capsules/30 days)
EMEND - aprepitant for oral susp 125 mg (125 mg/5ml)	2		QL (6 packages/30 days)
EMEND TRIPACK - aprepitant capsule therapy pack 80 & 125 mg	3		QL (2 packs/30 days)
granisetron hcl tab 1 mg	1		QL (14 tablets/30 days)
meclizine hcl tab 12.5 mg, 25 mg	1		
ONDANSETRON HCL - ondansetron hcl tab 24 mg	3		QL (1 tablet/30 days)
ondansetron hcl oral soln 4 mg/5ml	1		
ondansetron hcl tab 4 mg, 8 mg	1		
ondansetron orally disintegrating tab 4 mg, 8 mg	1		
SANCUSO - granisetron td patch 3.1 mg/24hr (contains 34.3 mg)	3		PA, QL (2 patches/30 days)
scopolamine td patch 72hr 1 mg/3days (Transderm-scop)	1		
TRANSDERM-SCOP - scopolamine td patch 72hr 1 mg/3days	3		
trimethobenzamide hcl cap 300 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VARUBI - rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	2	SP	LD, QL (4 tablets/30 days)
DIGESTIVE AIDS			
CREON - pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	2		
SUCRAID - sacrosidase soln 8500 unit/ml	3	SP	PA, LD, QL (236 mls/29 days)
ZENPEP - pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit	2		
GASTROINTESTINAL AGENTS- MISC.			
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) (Lotronex)	1		PA, QL (60 tablets/30 days)
AZULFIDINE - sulfasalazine tab 500 mg	3		
AZULFIDINE EN-TABS - sulfasalazine tab delayed release 500 mg	3		
balsalazide disodium cap 750 mg (Colзал)	1		
BYLVAY - odevixibat cap 400 mcg	3	SP	PA, LD, QL (450 capsules/30 days)
BYLVAY - odevixibat cap 1200 mcg	3	SP	PA, LD, QL (150 capsules/30 days)
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 200 mcg	3	SP	PA, LD, QL (900 capsules/30 days)
BYLVAY (PELLETS) - odevixibat pellets cap sprinkle 600 mcg	3	SP	PA, LD, QL (300 capsules/30 days)
calcium acetate (phosphate binder) cap 667 mg (169 mg ca)	1		
calcium acetate (phosphate binder) tab 667 mg	1		
CHENODAL - chenodiol tab 250 mg	2	SP	LD
CHOLBAM - cholic acid cap 50 mg, 250 mg	3	SP	PA, LD
CIMZIA - certolizumab pegol for inj kit 2 x 200 mg	3	SP	PA, QL (2 kits/28 days)
CIMZIA - certolizumab pegol prefilled syringe kit 2 x 200 mg/ml	3	SP	PA, QL (2 kits/28 days)
CIMZIA STARTER KIT - certolizumab pegol prefilled syringe kit 6 x 200 mg/ml	3	SP	PA, QL (1 kit/180 days)
cromolyn sodium oral conc 100 mg/5ml (Gastrocrom)	1		
DELZICOL - mesalamine cap dr 400 mg	3		
FOSRENOL - lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental)	3		ST

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FOSRENOL - lanthanum carbonate oral powder pack 750 mg (elemental), 1000 mg (elemental)	3		ST
GATTEX - teduglutide (rdna) for inj kit 5 mg	3	SP	PA, LD, QL (30 vials/30 days)
lactulose (encephalopathy) solution 10 gm/15ml	1		
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental) (Fosrenol)	1		ST
LIVMARLI - maralixibat chloride oral soln 9.5 mg/ml	3	SP	PA, LD, QL (90 mls/30 days)
lubiprostone cap 8 mcg (Amitiza)	1		PA, QL (120 capsules/30 days)
lubiprostone cap 24 mcg (Amitiza)	1		PA, QL (60 capsules/30 days)
mesalamine cap dr 400 mg (Delzicol)	1		
mesalamine cap er 24hr 0.375 gm (Apriso)	1		
MESALAMINE DR - mesalamine tab delayed release 800 mg	3		
mesalamine enema 4 gm	1		
mesalamine suppos 1000 mg (Canasa)	1		
mesalamine tab delayed release 1.2 gm (Lialda)	1		
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)	1		
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent) (Reglan)	1		
MOVANTIK - naloxegol oxalate tab 12.5 mg (base equivalent), 25 mg (base equivalent)	2		PA, QL (30 tablets/30 days)
OCALIVA - obeticholic acid tab 5 mg, 10 mg	3	SP	PA, LD, QL (30 tablets/30 days)
PHOSLYRA - calcium acetate (phosphate binder) oral soln 667 mg/5ml	3		
REGLAN - metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)	3		
RENAGEL - sevelamer hcl tab 800 mg	3		ST
sevelamer carbonate packet 0.8 gm, 2.4 gm (Renvela)	1		
sevelamer carbonate tab 800 mg (Renvela)	1		
sevelamer hcl tab 800 mg (Renagel)	1		
SEVELAMER HYDROCHLORIDE - sevelamer hcl tab 400 mg	3		ST
SFROWASA - mesalamine sulfite-free (sf) enema 4 gm/60ml	3		
SKYRIZI - risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	2	SP	PA, QL (1 cartridge/56 days)
sulfasalazine tab delayed release 500 mg (Azulfidine en-tabs)	1		
sulfasalazine tab 500 mg (Azulfidine)	1		

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SYMPROIC - naldemedine tosylate tab 0.2 mg (base equivalent)	2		PA, QL (30 tablets/30 days)
TRULANCE - plecanatide tab 3 mg	2		PA, QL (30 tablets/30 days)
ursodiol cap 300 mg	1		
ursodiol tab 250 mg (Urso 250)	1		
ursodiol tab 500 mg (Urso forte)	1		
VELPHORO - sucroferriic oxyhydroxide chew tab 500 mg	2		ST
VIBERZI - eluxadolone tab 75 mg, 100 mg	2		PA, QL (60 tablets/30 days)
XERMELO - telotristat ethyl tab 250 mg (as telotristat etiprate)	3	SP	PA, LD
GENITOURINARY AGENTS			
URINARY ANTISPASMODICS			
bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg	1		
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)	1		QL (30 tablets/30 days)
fesoterodine fumarate tab er 24hr 4 mg, 8 mg (Toviaz)	1		QL (30 tablets/30 days)
flavoxate hcl tab 100 mg	1		
MYRBETRIQ - mirabegron granules for oral extended release susp 8 mg/ml	2		QL (300 mls/28 days)
MYRBETRIQ - mirabegron tab er 24 hr 25 mg, 50 mg	2		QL (30 tablets/30 days)
OXYBUTYNIN CHLORIDE - oxybutynin chloride tab 2.5 mg	3		QL (90 tablets/30 days)
OXYBUTYNIN CHLORIDE - oxybutynin chloride solution 5 mg/5ml	3		QL (600 mls/30 days)
oxybutynin chloride syrup 5 mg/5ml	1		QL (600 mls/30 days)
oxybutynin chloride tab er 24hr 5 mg (Ditropan xl)	1		QL (30 tablets/30 days)
oxybutynin chloride tab er 24hr 10 mg (Ditropan xl)	1		QL (60 tablets/30 days)
oxybutynin chloride tab er 24hr 15 mg	1		QL (60 tablets/30 days)
oxybutynin chloride tab 5 mg	1		QL (120 tablets/30 days)
solifenacin succinate tab 5 mg, 10 mg (Vesicare)	1		QL (30 tablets/30 days)
tolterodine tartrate cap er 24hr 2 mg, 4 mg (Detrol la)	1		QL (30 capsules/30 days)
tolterodine tartrate tab 1 mg, 2 mg (Detrol)	1		QL (60 tablets/30 days)
tropium chloride cap er 24hr 60 mg	1		QL (30 capsules/30 days)
tropium chloride tab 20 mg	1		QL (60 tablets/30 days)
VESICARE - solifenacin succinate tab 5 mg, 10 mg	3		QL (30 tablets/30 days)
VAGINAL PRODUCTS			
CLEOCIN - clindamycin phosphate vaginal cream 2%	3		
CLEOCIN - clindamycin phosphate vaginal suppos 100 mg	2		
clindamycin phosphate vaginal cream 2% (Cleocin)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CLINDESSE - clindamycin phosphate (one dose) vaginal cream 2%	3		
CRINONE - progesterone vaginal gel 4%	3		
ENCARE - nonoxynol-9 vaginal suppos 100 mg	3		
ESTRACE - estradiol vaginal cream 0.1 mg/gm	3		QL (255 grams/365 days)
estradiol vaginal cream 0.1 mg/gm (Estrace)	1		QL (255 grams/365 days)
estradiol vaginal tab 10 mcg (Vagifem)	1		PA
ESTRING - estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	2		QL (1 ring/90 days)
GYNAZOLE-1 - butoconazole nitrate (one dose) vaginal cream 2%	3		
IMVEXXY MAINTENANCE PACK - estradiol vaginal insert 4 mcg, 10 mcg	3		QL (8 suppositories/28 days)
IMVEXXY STARTER PACK - estradiol vaginal insert starter pack 4 mcg, 10 mcg	3		QL (18 suppositories/180 days)
INTRAROSA - prasterone vaginal insert 6.5 mg	3		
metronidazole vaginal gel 0.75%	1		
MICONAZOLE 3 - miconazole nitrate vaginal suppos 200 mg	3		
OPTIONS GYNOL II VAGINAL - nonoxynol-9 gel 3%	3		
PHEXXI - lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	2		
PREMARIN - estrogens, conjugated vaginal cream 0.625 mg/gm	2		
SHUR-SEAL - nonoxynol-9 gel 2%	3		
terconazole vaginal cream 0.4%, 0.8%	1		
terconazole vaginal suppos 80 mg	1		
TODAY SPONGE - nonoxynol-9 vaginal sponge 1000 mg	3		
VANDAZOLE - metronidazole vaginal gel 0.75%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 foam 12.5%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 film 28%	3		
VCF VAGINAL CONTRACEPTIVE - nonoxynol-9 gel 4%	3		
GENITOURINARY AGENTS - MISC.			
acetic acid irrigation soln 0.25%	1		
alfuzosin hcl tab er 24hr 10 mg (Uroxatral)	1		
CYSTAGON - cysteamine bitartrate cap 50 mg, 150 mg	2		LD
dutasteride cap 0.5 mg (Avodart)	1		
dutasteride-tamsulosin hcl cap 0.5-0.4 mg (Jalyn)	1		
ELMIRON - pentosan polysulfate sodium caps 100 mg	3		PA

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finasteride tab 5 mg (Proscar)	1		
JALYN - dutasteride-tamsulosin hcl cap 0.5-0.4 mg	3		
K-PHOS NO 2 - potassium & sodium acid phosphates tab 305-700 mg	2		
LITHOSTAT - acetohydroxamic acid tab 250 mg	3		
potassium citrate tab er 5 meq (540 mg) (Urocit-k 5)	1		
potassium citrate tab er 10 meq (1080 mg) (Urocit-k 10)	1		
potassium citrate tab er 15 meq (1620 mg) (Urocit-k 15)	1		
PROCYSBI - cysteamine bitartrate delayed release granules packet 75 mg, 300 mg	3	SP	PA, LD
PROCYSBI - cysteamine bitartrate cap delayed release 25 mg (base equiv), 75 mg (base equiv)	3	SP	PA, LD
PROSCAR - finasteride tab 5 mg	3		
RAPAFLO - silodosin cap 4 mg, 8 mg	3		
silodosin cap 4 mg, 8 mg (Rapaflo)	1		
sodium chloride irrigation soln 0.9%	1		
sodium citrate & citric acid soln 500-334 mg/5ml	1		
tamsulosin hcl cap 0.4 mg (Flomax)	1		
THIOLA - tiopronin tab 100 mg	3	SP	PA, LD, QL (600 tablets/30 days)
THIOLA EC - tiopronin tab delayed release 100 mg	3	SP	PA, LD, QL (600 tablets/30 days)
THIOLA EC - tiopronin tab delayed release 300 mg	3	SP	PA, LD, QL (180 tablets/30 days)
tiopronin tab 100 mg (Thiola)	1	SP	PA, QL (600 tablets/30 days)
UROCIT-K 10 - potassium citrate tab er 10 meq (1080 mg)	3		
UROCIT-K 15 - potassium citrate tab er 15 meq (1620 mg)	3		
UROCIT-K 5 - potassium citrate tab er 5 meq (540 mg)	3		

CENTRAL NERVOUS SYSTEM DRUGS

ANTI-ANXIETY AGENTS

ALPRAZOLAM INTENSOL - alprazolam conc 1 mg/ml	3		
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg	1		
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg (Xanax xr)	1		
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg (Xanax)	1		
bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg	1		
chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	1		
clorazepate dipotassium tab 3.75 mg, 15 mg	1		
clorazepate dipotassium tab 7.5 mg (Tranxene t)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
diazepam conc 5 mg/ml	1		
diazepam oral soln 1 mg/ml	1		
diazepam tab 2 mg, 5 mg, 10 mg (Valium)	1		
hydroxyzine hcl syrup 10 mg/5ml	1		
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg	1		
HYDROXYZINE PAMOATE - hydroxyzine pamoate cap 100 mg	3		
hydroxyzine pamoate cap 25 mg, 50 mg (Vistaril)	1		
lorazepam conc 2 mg/ml	1		
lorazepam tab 0.5 mg, 1 mg, 2 mg (Ativan)	1		
meprobamate tab 200 mg	1		QL (120 tablets/30 days)
meprobamate tab 400 mg	1		QL (180 tablets/30 days)
oxazepam cap 10 mg, 15 mg, 30 mg	1		
VISTARIL - hydroxyzine pamoate cap 25 mg, 50 mg	3		
ANTIDEPRESSANTS			
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1		
AMOXAPINE - amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg	3		
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr)	1		
bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl)	1		
bupropion hcl tab 75 mg, 100 mg	1		
citalopram hydrobromide oral soln 10 mg/5ml	1		
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) (Celexa)	1		
clomipramine hcl cap 25 mg, 50 mg, 75 mg (Anafranil)	1		
desipramine hcl tab 10 mg, 25 mg (Norpramin)	1		
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg	1		
DESVENLAFAXINE ER - desvenlafaxine tab er 24hr 50 mg, 100 mg	3		ST, QL (30 tablets/30 days)
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)	1		QL (30 tablets/30 days)
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1		
doxepin hcl conc 10 mg/ml	1		
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) (Cymbalta)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
EMSAM - selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	3		
escitalopram oxalate soln 5 mg/5ml (base equiv)	1		
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) (Lexapro)	1		
FETZIMA - levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	3		ST, QL (30 capsules/30 days)
FETZIMA TITRATION PACK - levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	3		ST, QL (1 pack/180 days)
FLUOXETINE DR - fluoxetine hcl cap delayed release 90 mg	3		ST
fluoxetine hcl cap 10 mg, 20 mg, 40 mg (Prozac)	1		
fluoxetine hcl solution 20 mg/5ml	1		
flvoxamine maleate tab 25 mg, 50 mg	1		QL (30 tablets/30 days)
flvoxamine maleate tab 100 mg	1		QL (90 tablets/30 days)
imipramine hcl tab 10 mg, 25 mg, 50 mg	1		
MARPLAN - isocarboxazid tab 10 mg	3		
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg (Remeron soltab)	1		QL (30 tablets/30 days)
mirtazapine tab 7.5 mg, 45 mg	1		QL (30 tablets/30 days)
mirtazapine tab 15 mg, 30 mg (Remeron)	1		QL (30 tablets/30 days)
NARDIL - phenelzine sulfate tab 15 mg	3		
NEFAZODONE HYDROCHLORIDE - nefazodone hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3		
NORPRAMIN - desipramine hcl tab 10 mg, 25 mg	3		
NORTRIPTYLINE HCL - nortriptyline hcl soln 10 mg/5ml	2		
nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor)	1		
PAMELOR - nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg	3		
PARNATE - tranylcypromine sulfate tab 10 mg	3		
paroxetine hcl oral susp 10 mg/5ml (base equiv) (Paxil)	1		
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg (Paxil)	1		
PHENELZINE SULFATE - phenelzine sulfate tab 15 mg	2		
protriptyline hcl tab 5 mg, 10 mg	1		
sertraline hcl oral concentrate for solution 20 mg/ml (Zoloft)	1		
sertraline hcl tab 25 mg, 50 mg, 100 mg (Zoloft)	1		
tranylcypromine sulfate tab 10 mg (Parnate)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
trazodone hcl tab 50 mg, 100 mg, 150 mg	1		
trimipramine maleate cap 25 mg, 50 mg, 100 mg	1		
TRINTELLIX - vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	3		ST, QL (30 tablets/30 days)
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent) (Effexor xr)	1		
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)	1		
VIIBRYD - vilazodone hcl tab 10 mg, 20 mg, 40 mg	3		ST, QL (30 tablets/30 days)
VIIBRYD STARTER PACK - vilazodone hcl tab starter kit 10 (7) & 20 (23) mg	3		ST, QL (1 kit/180 days)
vilazodone hcl tab 10 mg, 20 mg, 40 mg (Viibryd)	1		QL (30 tablets/30 days)
ZOLOFT - sertraline hcl oral concentrate for solution 20 mg/ml	3		ST
ANTIPSYCHOTICS			
aripiprazole oral solution 1 mg/ml	1		QL (750 mls/30 days)
aripiprazole orally disintegrating tab 10 mg, 15 mg	1		QL (60 tablets/30 days)
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg (Abilify)	1		QL (30 tablets/30 days)
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv) (Saphris)	1		QL (60 tablets/30 days)
CAPLYTA - lumateperone tosylate cap 10.5 mg, 21 mg, 42 mg	3		ST, QL (30 capsules/30 days)
chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg	1		
CHLORPROMAZINE HYDROCHLOR - chlorpromazine hcl conc 30 mg/ml, 100 mg/ml	3		
CLOZAPINE ODT - clozapine orally disintegrating tab 12.5 mg, 150 mg, 200 mg	3		
clozapine orally disintegrating tab 25 mg, 100 mg	1		
clozapine tab 25 mg, 50 mg, 100 mg, 200 mg (Clozaril)	1		
EQUETRO - carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	3		
FANAPT - iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3		ST, QL (60 tablets/30 days)
FANAPT TITRATION PACK - iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	3		ST, QL (1 pack/180 days)
FLUPHENAZINE HCL - fluphenazine hcl oral conc 5 mg/ml	2		
fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg	1		

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FLUPHENAZINE HYDROCHLORID - fluphenazine hcl elixir 2.5 mg/5ml	2		
haloperidol lactate oral conc 2 mg/ml	1		
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg	1		
INVEGA - paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg	3		ST, QL (30 tablets/30 days)
INVEGA - paliperidone tab er 24hr 6 mg	3		ST, QL (60 tablets/30 days)
LITHIUM CARBONATE - lithium carbonate cap 150 mg, 300 mg, 600 mg	3		
lithium carbonate cap 150 mg, 300 mg, 600 mg (Lithium carbonate)	1		
lithium carbonate tab er 300 mg (Lithobid)	1		
lithium carbonate tab er 450 mg	1		
lithium carbonate tab 300 mg	1		
LITHOBID - lithium carbonate tab er 300 mg	3		
loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg	1		
lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg (Latuda)	1		QL (30 tablets/30 days)
lurasidone hcl tab 80 mg (Latuda)	1		QL (60 tablets/30 days)
MOLINDONE HYDROCHLORIDE - molindone hcl tab 5 mg, 10 mg, 25 mg	3		
NUPLAZID - pimavanserin tartrate cap 34 mg (base equivalent)	3	SP	PA, LD, QL (30 capsules/30 days)
NUPLAZID - pimavanserin tartrate tab 10 mg (base equivalent)	3	SP	PA, LD, QL (30 tablets/30 days)
olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg (Zyprexa zydis)	1		QL (30 tablets/30 days)
olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg (Zyprexa)	1		QL (30 tablets/30 days)
paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg (Invega)	1		QL (30 tablets/30 days)
paliperidone tab er 24hr 6 mg (Invega)	1		QL (60 tablets/30 days)
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg	1		
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)	1		
prochlorperazine suppos 25 mg	1		
QUETIAPINE FUMARATE - quetiapine fumarate tab 150 mg	3		ST, QL (30 tablets/30 days)
quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg (Seroquel xr)	1		QL (60 tablets/30 days)
quetiapine fumarate tab er 24hr 150 mg, 200 mg (Seroquel xr)	1		QL (30 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg (Seroquel)	1		QL (90 tablets/30 days)
quetiapine fumarate tab 300 mg, 400 mg (Seroquel)	1		QL (60 tablets/30 days)
REXULTI - brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	3		QL (30 tablets/30 days)
RISPERIDONE ODT - risperidone orally disintegrating tab 0.25 mg	3		ST, QL (60 tablets/30 days)
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg	1		QL (60 tablets/30 days)
risperidone orally disintegrating tab 4 mg	1		QL (120 tablets/30 days)
risperidone soln 1 mg/ml (Risperdal)	1		QL (480 mls/30 days)
risperidone tab 0.25 mg	1		QL (60 tablets/30 days)
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg (Risperdal)	1		QL (60 tablets/30 days)
risperidone tab 4 mg (Risperdal)	1		QL (120 tablets/30 days)
SAPHRIS - asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)	3		ST, QL (60 tablets/30 days)
SECUADO - asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	3		ST, QL (30 patches/30 days)
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1		
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg	1		
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1		
VERSACLOZ - clozapine susp 50 mg/ml	3		ST, QL (540 mls/30 days)
VRAYLAR - cariprazine hcl cap therapy pack 1.5 mg (1) & 3 mg (6)	3		ST, QL (1 pack/180 days)
VRAYLAR - cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	3		ST, QL (30 capsules/30 days)
ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg (Geodon)	1		QL (60 capsules/30 days)
HYPNOTICS			
doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv) (Silenor)	1		QL (30 tablets/30 days)
estazolam tab 1 mg, 2 mg	1		
eszopiclone tab 1 mg, 2 mg, 3 mg (Lunesta)	1		QL (30 tablets/30 days)
HETLIOZ - tasimelteon capsule 20 mg	3	SP	PA, LD, QL (30 capsules/30 days)
HETLIOZ LQ - tasimelteon oral susp 4 mg/ml	3	SP	PA, LD, QL (158 mls/30 days)
phenobarbital elixir 20 mg/5ml	1		
phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg	1		
ramelteon tab 8 mg (Rozerem)	1		QL (30 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ROZEREM - ramelteon tab 8 mg	3		ST, QL (30 tablets/30 days)
SILENOR - doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv)	3		ST, QL (30 tablets/30 days)
tasimelteon capsule 20 mg (Hetlioz)	1	SP	PA, QL (30 capsules/30 days)
temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg (Restoril)	1		
zaleplon cap 5 mg, 10 mg	1		QL (30 capsules/30 days)
zolpidem tartrate tab er 6.25 mg, 12.5 mg (Ambien cr)	1		QL (30 tablets/30 days)
zolpidem tartrate tab 5 mg, 10 mg (Ambien)	1		QL (30 tablets/30 days)
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS			
ADDERALL - amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg	3		QL (60 tablets/30 days)
ADDERALL - amphetamine-dextroamphetamine tab 20 mg	3		QL (90 tablets/30 days)
ADDERALL XR - amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg	3		QL (30 capsules/30 days)
ADDERALL XR - amphetamine-dextroamphetamine cap er 24hr 20 mg, 25 mg, 30 mg	3		QL (60 capsules/30 days)
amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg (Adderall xr)	1		QL (30 capsules/30 days)
amphetamine-dextroamphetamine cap er 24hr 20 mg, 25 mg, 30 mg (Adderall xr)	1		QL (60 capsules/30 days)
amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg (Adderall)	1		QL (60 tablets/30 days)
amphetamine-dextroamphetamine tab 20 mg (Adderall)	1		QL (90 tablets/30 days)
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg (Nuvigil)	1		QL (30 tablets/30 days)
atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv) (Strattera)	1		QL (60 capsules/30 days)
atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv) (Strattera)	1		QL (30 capsules/30 days)
caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)	1		
clonidine hcl tab er 12hr 0.1 mg (Kapvay)	1		QL (120 tablets/30 days)
CONCERTA - methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg	3		QL (30 tablets/30 days)
CONCERTA - methylphenidate hcl tab er osmotic release (osm) 36 mg	3		QL (60 tablets/30 days)
DESOXYN - methamphetamine hcl tab 5 mg	3		PA, QL (150 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr)	1		QL (30 capsules/30 days)
dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin)	1		QL (60 tablets/30 days)
dextroamphetamine sulfate cap er 24hr 5 mg	1		QL (90 capsules/30 days)
dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg (Dexedrine)	1		QL (120 capsules/30 days)
dextroamphetamine sulfate oral solution 5 mg/5ml	1		QL (1800 mls/30 days)
dextroamphetamine sulfate tab 5 mg	1		QL (90 tablets/30 days)
dextroamphetamine sulfate tab 10 mg	1		QL (180 tablets/30 days)
FOCALIN - dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg	3		PA, QL (60 tablets/30 days)
guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) (Intuniv)	1		QL (30 tablets/30 days)
IMCIVREE - setmelanotide acetate subcutaneous soln 10 mg/ml	3	SP	PA, LD, QL (10 vials/30 days)
methamphetamine hcl tab 5 mg (Desoxyn)	1		QL (150 tablets/30 days)
METHYLIN - methylphenidate hcl soln 5 mg/5ml	3		PA, QL (450 mls/30 days)
METHYLIN - methylphenidate hcl soln 10 mg/5ml	3		PA, QL (900 mls/30 days)
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)	1		QL (30 capsules/30 days)
methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) (Ritalin la)	1		QL (30 capsules/30 days)
methylphenidate hcl chew tab 2.5 mg, 5 mg	1		QL (90 tablets/30 days)
methylphenidate hcl chew tab 10 mg	1		QL (180 tablets/30 days)
methylphenidate hcl soln 5 mg/5ml (Methylin)	1		QL (450 mls/30 days)
methylphenidate hcl soln 10 mg/5ml (Methylin)	1		QL (900 mls/30 days)
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg (Concerta)	1		QL (30 tablets/30 days)
methylphenidate hcl tab er osmotic release (osm) 36 mg (Concerta)	1		QL (60 tablets/30 days)
methylphenidate hcl tab er 10 mg, 20 mg	1		QL (90 tablets/30 days)
methylphenidate hcl tab er 24hr 27 mg, 54 mg	1		QL (30 tablets/30 days)
methylphenidate hcl tab er 24hr 36 mg	1		QL (60 tablets/30 days)
methylphenidate hcl tab 5 mg, 10 mg, 20 mg (Ritalin)	1		QL (90 tablets/30 days)
METHYLPHENIDATE HYDROCHLO - methylphenidate hcl tab er 24hr 18 mg	3		PA, QL (30 tablets/30 days)
modafinil tab 100 mg, 200 mg (Provigil)	1		QL (30 tablets/30 days)
QUILLICHEW ER - methylphenidate hcl chew tab extended release 20 mg, 40 mg	3		PA, QL (30 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
QUILLICHEW ER - methylphenidate hcl chew tab extended release 30 mg	3		PA, QL (60 tablets/30 days)
QUILLIVANT XR - methylphenidate hcl for er susp 25 mg/5ml (5 mg/ml)	3		PA, QL (360 mls/30 days)
RITALIN - methylphenidate hcl tab 5 mg, 10 mg, 20 mg	3		PA, QL (90 tablets/30 days)
SUNOSI - solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	2		PA, QL (30 tablets/30 days)
VYVANSE - lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	2		QL (30 capsules/30 days)
VYVANSE - lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	2		QL (30 tablets/30 days)
WAKIX - pitolisant hcl tab 4.45 mg (base equivalent), 17.8 mg (base equivalent)	3	SP	PA, LD, QL (60 tablets/30 days)
PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.			
acamprosate calcium tab delayed release 333 mg	1		
AUBAGIO - teriflunomide tab 7 mg, 14 mg	3	SP	PA, LD, QL (30 tablets/30 days)
AUSTEDO - deutetrabenazine tab 6 mg	3	SP	PA, QL (60 tablets/30 days)
AUSTEDO - deutetrabenazine tab 9 mg, 12 mg	3	SP	PA, QL (120 tablets/30 days)
AVONEX - interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
AVONEX PEN - interferon beta-1a im auto-injector kit 30 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
BETASERON - interferon beta-1b for inj kit 0.3 mg	2	SP	PA, QL (1 kit/28 days)
bupropion hcl (smoking deterrent) tab er 12hr 150 mg	1		
CHLORDIAZEPOXIDE/AMITRIPT - chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	3		
dalfampridine tab er 12hr 10 mg (Ampyra)	1		PA, QL (60 tablets/30 days)
dimethyl fumarate capsule delayed release 120 mg (Tecfidera)	1	SP	QL (14 capsules/180 days)
dimethyl fumarate capsule delayed release 240 mg (Tecfidera)	1	SP	QL (60 capsules/30 days)
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg (Tecfidera starter pa)	1	SP	QL (1 pack/180 days)
disulfiram tab 250 mg, 500 mg	1		
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	1		
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg (Aricept)	1		
ERGOLOID MESYLATES - ergoloid mesylates tab 1 mg	3		
EXELON - rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
 fingolimod hcl cap 0.5 mg (base equiv) (Gilenya)	1	SP	QL (30 capsules/30 days)
GALANTAMINE HYDROBROMIDE - galantamine hydrobromide oral soln 4 mg/ml	3		
 galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg (Razadyne er)	1		
 galantamine hydrobromide tab 4 mg, 8 mg, 12 mg	1		
 glatiramer acetate soln prefilled syringe 20 mg/ml (Copaxone)	1	SP	QL (30 syringes/30 days)
 glatiramer acetate soln prefilled syringe 40 mg/ml (Copaxone)	1	SP	QL (12 syringes/28 days)
INGREZZA - valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	3	SP	PA, LD, QL (28 capsules/180 days)
INGREZZA - valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	3	SP	PA, LD, QL (30 capsules/30 days)
KESIMPTA - ofatumumab soln auto-injector 20 mg/0.4ml	2	SP	PA, QL (1 pen/28 days)
LUCEMYRA - lofexidine hcl tab 0.18 mg (base equivalent)	3		PA, QL (228 tablets/180 days)
LYBALVI - olanzapine-samidorphane l-malate tab 5-10 mg, 10-10 mg, 15-10 mg, 20-10 mg	3		ST, QL (30 tablets/30 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (4 tabs), 10 mg (8 tabs)	2	SP	PA, LD, QL (8 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (5 tabs)	2	SP	PA, LD, QL (10 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (6 tabs)	2	SP	PA, LD, QL (12 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (7 tabs)	2	SP	PA, LD, QL (14 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (9 tabs)	2	SP	PA, LD, QL (9 tablets/301 days)
MAVENCLAD - cladribine tab therapy pack 10 mg (10 tabs)	2	SP	PA, LD, QL (20 tablets/301 days)
MAYZENT - siponimod fumarate tab 0.25 mg (base equiv)	2	SP	PA, LD, QL (120 tablets/30 days)
MAYZENT - siponimod fumarate tab 1 mg (base equiv), 2 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (7) starter pack	2	SP	PA, LD, QL (7 tablets/180 days)
MAYZENT STARTER PACK - siponimod fumarate tab 0.25 mg (12) starter pack	2	SP	PA, LD, QL (12 tablets/180 days)
 memantine hcl oral solution 2 mg/ml	1		
 memantine hcl tab 5 mg, 10 mg (Namenda)	1		
 memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack (Namenda titration pa)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
nicotine polacrilex gum 2 mg, 4 mg	1		
nicotine polacrilex lozenge 2 mg, 4 mg	1		
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	1		
NICOTROL INHALER - nicotine inhaler system 10 mg (4 mg delivered)	2		
NICOTROL NS - nicotine nasal spray 10 mg/ml (0.5 mg/spray)	2		
NUDEXTA - dextromethorphan hbr-quinidine sulfate cap 20-10 mg	3		PA, QL (60 capsules/30 days)
paroxetine mesylate cap 7.5 mg (base equiv)	1		
PERPHENAZINE/AMITRIPTYLIN - perphenazine-amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	3		
PIMOZIDE - pimozone tab 1 mg, 2 mg	3		
PLEGRIDY - peginterferon beta-1a soln pen-injector 125 mcg/0.5ml	2	SP	PA, LD, QL (2 pens/28 days)
PLEGRIDY - peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	2	SP	PA, LD, QL (2 syringes/28 days)
PLEGRIDY - peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	2	SP	PA, LD, QL (2 syringes/28 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pen-inj 63 & 94 mcg/0.5ml pack	2	SP	PA, LD, QL (1 kit/180 days)
PLEGRIDY STARTER PACK - peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	2	SP	PA, LD, QL (1 kit/180 days)
PONVORY - ponesimod tab 20 mg	3	SP	PA, LD, QL (30 tablets/30 days)
PONVORY 14-DAY STARTER PA - ponesimod tab starter pack 2,3,4,5,6,7,8,9 & 10 mg	3	SP	PA, QL (14 tablets/180 days)
REBIF - interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE - interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	2	SP	PA, QL (12 syringes/28 days)
REBIF REBIDOSE TITRATION - interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
REBIF TITRATION PACK - interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	2	SP	PA, QL (1 kit/28 days)
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	1		
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr (Exelon)	1		
SAVELLA - milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	3		ST, QL (60 tablets/30 days)

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SAVELLA TITRATION PACK - milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	3		ST, QL (1 pack/180 days)
SODIUM OXYBATE - sodium oxybate oral solution 500 mg/ml	3	SP	PA, QL (540 ml/30 days)
TASCENSO ODT - fingolimod lauryl sulfate tablet disintegrating 0.25 mg	2	SP	PA, QL (30 tablets/30 days)
TEGSEDI - inotersen sod subcutaneous pref syr 284 mg/1.5ml (base eq)	3	SP	PA, LD, QL (4 syringes/28 days)
teriflunomide tab 7 mg, 14 mg (Aubagio)	1	SP	QL (30 tablets/30 days)
tetrabenazine tab 12.5 mg (Xenazine)	1	SP	PA, QL (240 tablets/30 days)
tetrabenazine tab 25 mg (Xenazine)	1	SP	PA, QL (120 tablets/30 days)
VARENICLINE STARTING MONT - varenicline tartrate tab 11 x 0.5 mg & 42 x 1 mg start pack	2		
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)	1		
XYREM - sodium oxybate oral solution 500 mg/ml	3	SP	PA, LD, QL (540 ml/30 days)
XYWAV - calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	3	SP	PA, LD, QL (540 mls/30 days)
ZEPOSIA - ozanimod hcl cap 0.92 mg	2	SP	PA, QL (30 capsules/30 days)
ZEPOSIA STARTER KIT - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 30 x 0.92 mg	2	SP	PA, QL (37 capsules/180 days)
ZEPOSIA 7-DAY STARTER PAC - ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	2	SP	PA, QL (7 capsules/180 days)
ANALGESICS AND ANESTHETICS			
ANALGESICS - NON-NARCOTIC			
aspirin chew tab 81 mg	1		
aspirin tab delayed release 81 mg	1		
butalbital-acetaminophen cap 50-300 mg (Butalbital/ acetamino)	1		QL (180 capsules/30 days)
butalbital-acetaminophen tab 50-325 mg	1		QL (180 tablets/30 days)
butalbital-acetaminophen-caffeine tab 50-325-40 mg (Esgic)	1		QL (180 tablets/30 days)
butalbital-aspirin-caffeine cap 50-325-40 mg	1		QL (180 capsules/30 days)
diflunisal tab 500 mg	1		
TENCON - butalbital-acetaminophen tab 50-325 mg	3		QL (180 tablets/30 days)
ANALGESICS - NARCOTIC			
acetaminophen w/ codeine tab 300-15 mg (Tylenol/ codeine)	1		PA, QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-30 mg	1		PA, QL (360 tablets/30 days)
acetaminophen w/ codeine tab 300-60 mg	1		PA, QL (180 tablets/30 days)
ACETAMINOPHEN/CODEINE - acetaminophen w/ codeine soln 120-12 mg/5ml	2		PA, QL (2700 mls/30 days)

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ACTIQ - fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg	3		PA, QL (120 lozenges/30 days)
APADAZ - benzhydrocodone hcl-acetaminophen tab 4.08-325 mg	3		PA, QL (360 tablets/30 days)
BELBUCA - buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	2		PA, QL (60 films/30 days)
BENZHYDROCODONE/ACETAMINO - benzhydrocodone hcl-acetaminophen tab 4.08-325 mg	3		PA, QL (360 tablets/30 days)
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)	1		QL (90 tablets/30 days)
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv) (Suboxone)	1		QL (120 films/30 days)
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv), 12-3 mg (base equiv) (Suboxone)	1		QL (60 films/30 days)
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (Suboxone)	1		QL (90 films/30 days)
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv)	1		QL (120 tablets/30 days)
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv)	1		QL (90 tablets/30 days)
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr (Butrans)	1		PA, QL (4 patches/28 days)
butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg	1		PA, QL (180 capsules/30 days)
butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg	1		PA, QL (180 capsules/30 days)
butorphanol tartrate nasal soln 10 mg/ml	1		PA, QL (2 bottles/30 days)
CODEINE SULFATE - codeine sulfate tab 15 mg, 30 mg, 60 mg	3		PA, QL (180 tablets/30 days)
codeine sulfate tab 30 mg (Codeine sulfate)	1		PA, QL (180 tablets/30 days)
DILAUDID - hydromorphone hcl liqd 1 mg/ml	3		PA, QL (1440 mls/30 days)
fentanyl citrate lozenge on a handle 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1200 mcg, 1600 mcg (Actiq)	1		PA, QL (120 lozenges/30 days)
fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr	1		PA, QL (15 patches/30 days)
HYDROCODONE BITARTRATE ER - hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	3		PA, QL (60 capsules/30 days)
hydrocodone-acetaminophen soln 7.5-325 mg/15ml	1		PA, QL (3600 mls/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
hydrocodone-acetaminophen tab 10-325 mg, 7.5-325 mg	1		PA, QL (180 tablets/30 days)
hydrocodone-acetaminophen tab 5-325 mg	1		PA, QL (360 tablets/30 days)
hydrocodone-ibuprofen tab 7.5-200 mg	1		PA, QL (150 tablets/30 days)
HYDROCODONE/IBUPROFEN - hydrocodone-ibuprofen tab 5-200 mg	3		PA, QL (150 tablets/30 days)
hydromorphone hcl liqd 1 mg/ml (Dilaudid)	1		PA, QL (1440 mls/30 days)
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg	1		PA, QL (30 tablets/30 days)
hydromorphone hcl tab 2 mg, 4 mg, 8 mg (Dilaudid)	1		PA, QL (180 tablets/30 days)
levorphanol tartrate tab 2 mg	1		PA, QL (120 tablets/30 days)
MEPERIDINE HCL - meperidine hcl oral soln 50 mg/5ml	3		PA, QL (2400 mls/30 days)
METHADONE HCL - methadone hcl soln 5 mg/5ml	3		PA, QL (900 mls/30 days)
METHADONE HCL - methadone hcl soln 10 mg/5ml	3		PA, QL (450 mls/30 days)
methadone hcl conc 10 mg/ml (Methadose)	1		PA, QL (90 mls/30 days)
methadone hcl soln 5 mg/5ml (Methadone hcl)	1		PA, QL (900 mls/30 days)
methadone hcl soln 10 mg/5ml (Methadone hcl)	1		PA, QL (450 mls/30 days)
methadone hcl tab for oral susp 40 mg	1		PA, QL (90 tablets/30 days)
methadone hcl tab 5 mg, 10 mg	1		PA, QL (90 tablets/30 days)
METHADOSE - methadone hcl conc 10 mg/ml	3		PA, QL (90 mls/30 days)
METHADOSE SUGAR-FREE - methadone hcl conc 10 mg/ml	3		PA, QL (90 mls/30 days)
MORPHINE SULFATE - morphine sulfate oral soln 20 mg/5ml	2		PA, QL (1350 mls/30 days)
MORPHINE SULFATE - morphine sulfate tab 15 mg	3		PA, QL (240 tablets/30 days)
MORPHINE SULFATE - morphine sulfate tab 30 mg	3		PA, QL (180 tablets/30 days)
MORPHINE SULFATE ER - morphine sulfate beads cap er 24hr 30 mg, 45 mg, 60 mg, 75 mg, 90 mg, 120 mg	3		PA, QL (30 capsules/30 days)
morphine sulfate oral soln 10 mg/5ml	1		PA, QL (2700 mls/30 days)
morphine sulfate oral soln 100 mg/5ml (20 mg/ml)	1		PA, QL (270 mls/30 days)
morphine sulfate tab er 15 mg, 30 mg, 60 mg (Ms contin)	1		PA, QL (120 tablets/30 days)
morphine sulfate tab er 100 mg, 200 mg (Ms contin)	1		PA, QL (180 tablets/30 days)
morphine sulfate tab 15 mg (Morphine sulfate)	1		PA, QL (240 tablets/30 days)
morphine sulfate tab 30 mg (Morphine sulfate)	1		PA, QL (180 tablets/30 days)
NUCYNTA ER - tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3		PA, QL (60 tablets/30 days)
oxycodone hcl cap 5 mg	1		PA, QL (360 capsules/30 days)
oxycodone hcl conc 100 mg/5ml (20 mg/ml)	1		PA, QL (270 mls/30 days)
oxycodone hcl soln 5 mg/5ml	1		PA, QL (5400 mls/30 days)
oxycodone hcl tab 5 mg (Roxicodone)	1		PA, QL (360 tablets/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
oxycodone hcl tab 10 mg	1		PA, QL (180 tablets/30 days)
oxycodone hcl tab 15 mg, 30 mg (Roxicodone)	1		PA, QL (120 tablets/30 days)
oxycodone hcl tab 20 mg	1		PA, QL (120 tablets/30 days)
OXYCODONE HYDROCHLORIDE/A - oxycodone w/ acetaminophen soln 5-325 mg/5ml	3		PA, QL (1800 mls/30 days)
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg (Percocet)	1		PA, QL (360 tablets/30 days)
oxycodone w/ acetaminophen tab 7.5-325 mg (Percocet)	1		PA, QL (240 tablets/30 days)
oxycodone w/ acetaminophen tab 10-325 mg (Percocet)	1		PA, QL (180 tablets/30 days)
OXYCODONE/ACETAMINOPHEN - oxycodone w/ acetaminophen tab 2.5-300 mg	3		PA, QL (360 tablets/30 days)
pentazocine w/ naloxone hcl tab 50-0.5 mg	1		PA, QL (360 tablets/30 days)
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	1		PA, QL (30 tablets/30 days)
tramadol hcl tab 50 mg (Ultram)	1		PA, QL (240 tablets/30 days)
tramadol-acetaminophen tab 37.5-325 mg (Ultracet)	1		PA, QL (240 tablets/30 days)
XTAMPZA ER - oxycodone cap er 12hr abuse-deterrent 9 mg, 13.5 mg, 18 mg, 27 mg, 36 mg	2		PA, QL (180 capsules/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 11.4-2.9 mg (base eq)	3		QL (30 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 1.4-0.36 mg (base eq)	3		QL (90 tablets/30 days)
ZUBSOLV - buprenorphine hcl-naloxone hcl sl tab 8.6-2.1 mg (base eq)	3		QL (60 tablets/30 days)
ANALGESICS - ANTI-INFLAMMATORY			
ACTEMRA - tocilizumab subcutaneous soln prefilled syringe 162 mg/0.9ml	2	SP	PA, LD, QL (4 syringes/28 days)
ACTEMRA ACTPEN - tocilizumab subcutaneous soln auto-injector 162 mg/0.9ml	2	SP	PA, QL (4 pens/28 days)
ANAPROX DS - naproxen sodium tab 550 mg	3		
ARCALYST - riloncept for inj 220 mg	2	SP	PA, LD, QL (4 vials/28 days)
celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex)	1		
DAYPRO - oxaprozin tab 600 mg	3		
diclofenac potassium tab 50 mg	1		
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg	1		
diclofenac w/ misoprostol tab delayed release 50-0.2 mg (Arthrotec 50)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
diclofenac w/ misoprostol tab delayed release 75-0.2 mg (Arthrotec 75)	1		
ENBREL - etanercept subcutaneous inj 25 mg/0.5ml	2	SP	PA, QL (8 vials/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml	2	SP	PA, QL (8 syringes/28 days)
ENBREL - etanercept subcutaneous soln prefilled syringe 50 mg/ml	2	SP	PA, QL (4 syringes/28 days)
ENBREL MINI - etanercept subcutaneous solution cartridge 50 mg/ml	2	SP	PA, QL (4 cartridges/28 days)
ENBREL SURECLICK - etanercept subcutaneous solution auto-injector 50 mg/ml	2	SP	PA, QL (4 pens/28 days)
etodolac cap 200 mg, 300 mg	1		
etodolac tab er 24hr 400 mg, 500 mg, 600 mg	1		
etodolac tab 400 mg (Lodine)	1		
etodolac tab 500 mg	1		
FELDENE - piroxicam cap 10 mg, 20 mg	3		
fenoprofen calcium tab 600 mg (Nalfon)	1		
FLURBIPROFEN - flurbiprofen tab 50 mg	3		
flurbiprofen tab 100 mg	1		
ibuprofen tab 400 mg, 600 mg, 800 mg	1		
indomethacin cap er 75 mg	1		
indomethacin cap 25 mg, 50 mg	1		
KETOPROFEN - ketoprofen cap 50 mg	3		
ketorolac tromethamine tab 10 mg	1		QL (20 tablets/5 days)
KEVZARA - sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	3	SP	PA, QL (2 pens/28 days)
KEVZARA - sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	3	SP	PA, QL (2 syringes/28 days)
KINERET - anakinra subcutaneous soln prefilled syringe 100 mg/0.67ml	3	SP	PA, LD, QL (30 syringes/30 days)
leflunomide tab 10 mg, 20 mg (Arava)	1		
LODINE - etodolac tab 400 mg	3		
MECLOFENAMATE SODIUM - meclofenamate sodium cap 50 mg, 100 mg	3		
MELOXICAM - meloxicam susp 7.5 mg/5ml	3		
meloxicam tab 7.5 mg, 15 mg	1		
nabumetone tab 500 mg, 750 mg	1		
NAPROSYN - naproxen tab 500 mg	3		
naproxen sodium tab 275 mg	1		
naproxen sodium tab 550 mg (Anaprox ds)	1		
naproxen tab 250 mg, 375 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
naproxen tab 500 mg (Naprosyn)	1		
OLUMIANT - baricitinib tab 1 mg, 2 mg, 4 mg	3	SP	PA, LD, QL (30 tablets/30 days)
ORENCIA - abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	3	SP	PA, QL (4 syringes/28 days)
ORENCIA CLICKJECT - abatacept subcutaneous soln auto-injector 125 mg/ml	3	SP	PA, QL (4 pens/28 days)
OTEZLA - apremilast tab starter therapy pack 10 mg & 20 mg & 30 mg	2	SP	PA, QL (55 tablets/180 days)
OTEZLA - apremilast tab 30 mg	2	SP	PA, QL (60 tablets/30 days)
OTREXUP - methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml	2		ST
oxaprozin tab 600 mg (Daypro)	1		
piroxicam cap 10 mg, 20 mg (Feldene)	1		
REDITREX - methotrexate soln prefilled syringe 7.5 mg/0.3ml, 10 mg/0.4ml, 12.5 mg/0.5ml, 15 mg/0.6ml, 17.5 mg/0.7ml, 20 mg/0.8ml, 22.5 mg/0.9ml, 25 mg/ml	2		ST
RIDAURA - auranofin cap 3 mg	2		
RINVOQ - upadacitinib tab er 24hr 15 mg, 30 mg	2	SP	PA, LD, QL (30 tablets/30 days)
RINVOQ - upadacitinib tab er 24hr 45 mg	2	SP	PA, LD, QL (56 tablets/365 days)
SIMPONI - golimumab subcutaneous soln auto-injector 50 mg/0.5ml	3	SP	PA, QL (1 pen/28 days)
SIMPONI - golimumab subcutaneous soln auto-injector 100 mg/ml	2	SP	PA, QL (1 pen/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 50 mg/0.5ml	3	SP	PA, QL (1 syringe/28 days)
SIMPONI - golimumab subcutaneous soln prefilled syringe 100 mg/ml	2	SP	PA, QL (1 syringe/28 days)
sulindac tab 150 mg, 200 mg	1		
TOLMETIN SODIUM - tolmetin sodium tab 600 mg	3		
XELJANZ - tofacitinib citrate oral soln 1 mg/ml (base equivalent)	2	SP	PA, QL (240 mls/30 days)
XELJANZ - tofacitinib citrate tab 5 mg (base equivalent)	2	SP	PA, QL (60 tablets/30 days)
XELJANZ - tofacitinib citrate tab 10 mg (base equivalent)	2	SP	PA, QL (240 tablets/365 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 11 mg (base equivalent)	2	SP	PA, QL (30 tablets/30 days)
XELJANZ XR - tofacitinib citrate tab er 24hr 22 mg (base equivalent)	2	SP	PA, QL (120 tablets/365 days)

MIGRAINE PRODUCTS

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Drug Name	Drug Tier	Specialty	Requirements/Limits
AIMOVIG - erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	2		PA, QL (1 pen/28 days)
AJOVY - fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	2		PA, QL (3 pens/84 days)
AJOVY - fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	2		PA, QL (3 syringes/84 days)
almotriptan malate tab 6.25 mg, 12.5 mg	1		PA, QL (12 tablets/30 days)
CAFERGOT - ergotamine w/ caffeine tab 1-100 mg	3		PA, QL (40 tablets/28 days)
dihydroergotamine mesylate inj 1 mg/ml	1		PA, QL (24 ampules/28 days)
dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)	1		PA, QL (8 vials/28 days)
eletriptan hydrobromide tab 20 mg (base equivalent) (Relpax)	1		QL (12 tablets/30 days)
eletriptan hydrobromide tab 40 mg (base equivalent) (Relpax)	1		QL (6 tablets/30 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	2		PA, QL (1 pen/28 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml	2		PA, QL (9 syringes/180 days)
EMGALITY - galcanezumab-gnlm subcutaneous soln prefilled syr 120 mg/ml	2		PA, QL (1 syringe/28 days)
ergotamine w/ caffeine tab 1-100 mg (Cafergot)	1		PA, QL (40 tablets/28 days)
frovatriptan succinate tab 2.5 mg (base equivalent) (Frova)	1		PA, QL (18 tablets/30 days)
MIGERGOT - ergotamine w/ caffeine suppos 2-100 mg	3		PA, QL (20 suppositories/28 days)
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv)	1		QL (18 tablets/30 days)
NURTEC - rimegepant sulfate tab disint 75 mg	2		PA, QL (16 tablets/30 days)
QULIPTA - atogepant tab 10 mg, 30 mg, 60 mg	2		PA, QL (30 tablets/30 days)
REYVOW - lasmiditan succinate tab 50 mg, 100 mg	2		PA, QL (8 tablets/30 days)
rizatriptan benzoate oral disintegrating tab 5 mg (base eq)	1		QL (24 tablets/30 days)
rizatriptan benzoate oral disintegrating tab 10 mg (base eq) (Maxalt-mlt)	1		QL (12 tablets/30 days)
rizatriptan benzoate tab 5 mg (base equivalent)	1		QL (24 tablets/30 days)
rizatriptan benzoate tab 10 mg (base equivalent) (Maxalt)	1		QL (12 tablets/30 days)
sumatriptan nasal spray 5 mg/act (Imitrex)	1		QL (6 packs/30 days)
sumatriptan nasal spray 20 mg/act (Imitrex)	1		QL (2 packs/30 days)
sumatriptan succinate inj 6 mg/0.5ml	1		QL (8 vials/30 days)
SUMATRIPTAN SUCCINATE REF - sumatriptan succinate solution cartridge 4 mg/0.5ml	2		PA, QL (12 doses/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
SUMATRIPTAN SUCCINATE REF - sumatriptan succinate solution cartridge 6 mg/0.5ml	2		PA, QL (8 doses/30 days)
sumatriptan succinate solution auto-injector 4 mg/0.5ml (Imitrex statdose sys)	1		QL (12 doses/30 days)
sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)	1		QL (8 doses/30 days)
sumatriptan succinate tab 25 mg (Imitrex)	1		QL (36 tablets/30 days)
sumatriptan succinate tab 50 mg (Imitrex)	1		QL (18 tablets/30 days)
sumatriptan succinate tab 100 mg (Imitrex)	1		QL (9 tablets/30 days)
TRUDHESA - dihydroergotamine mesylate hfa nasal aerosol 0.725 mg/act	3		PA, QL (12 mls/28 days)
UBRELVY - ubrogepant tab 50 mg, 100 mg	2		PA, QL (16 tablets/30 days)
zolmitriptan nasal spray 5 mg/spray unit (Zomig)	1		QL (12 units/30 days)
zolmitriptan orally disintegrating tab 2.5 mg, 5 mg	1		QL (12 tablets/30 days)
zolmitriptan tab 2.5 mg, 5 mg (Zomig)	1		QL (12 tablets/30 days)
ZOMIG - zolmitriptan nasal spray 2.5 mg/spray unit, 5 mg/spray unit	3		PA, QL (2 packs/30 days)
GOUT AGENTS			
allopurinol tab 100 mg, 300 mg (Zyloprim)	1		
colchicine tab 0.6 mg (Colcrys)	1		
colchicine w/ probenecid tab 0.5-500 mg	1		
febuxostat tab 40 mg, 80 mg (Uloric)	1		QL (30 tablets/30 days)
probenecid tab 500 mg	1		
NEUROMUSCULAR DRUGS			
ANTICONVULSANTS			
APTIOM - eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	2		
BANZEL - rufinamide tab 200 mg, 400 mg	3		
BANZEL - rufinamide susp 40 mg/ml	3		
BRIVIACT - brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	3		
BRIVIACT - brivaracetam oral soln 10 mg/ml	3		
BRIVIACT - brivaracetam iv soln 50 mg/5ml	3		
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol)	1		
carbamazepine chew tab 100 mg	1		
carbamazepine susp 100 mg/5ml (Tegretol)	1		
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr)	1		
carbamazepine tab 200 mg (Tegretol)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CARBATROL - carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	3		
CELONTIN - methsuximide cap 300 mg	2		
clobazam suspension 2.5 mg/ml (Onfi)	1		
clobazam tab 10 mg, 20 mg (Onfi)	1		
clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	1		
clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin)	1		
DEPAKOTE - divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg	3		
DEPAKOTE ER - divalproex sodium tab er 24 hr 250 mg, 500 mg	3		
DEPAKOTE SPRINKLES - divalproex sodium cap delayed release sprinkle 125 mg	3		
DIACOMIT - stiripentol cap 250 mg, 500 mg	3	SP	
DIACOMIT - stiripentol packet 250 mg, 500 mg	3	SP	
DIASTAT ACUDIAL - diazepam rectal gel delivery system 10 mg, 20 mg	2		
DIASTAT PEDIATRIC - diazepam rectal gel delivery system 2.5 mg	2		
DIAZEPAM RECTAL GEL - diazepam rectal gel delivery system 2.5 mg, 10 mg, 20 mg	3		
DILANTIN - phenytoin sodium extended cap 30 mg	2		
DILANTIN - phenytoin sodium extended cap 100 mg	3		
DILANTIN INFATABS - phenytoin chew tab 50 mg	3		
DILANTIN-125 - phenytoin susp 125 mg/5ml	3		
divalproex sodium cap delayed release sprinkle 125 mg (Depakote sprinkles)	1		
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg (Depakote)	1		
divalproex sodium tab er 24 hr 250 mg, 500 mg (Depakote er)	1		
EPIDIOLEX - cannabidiol soln 100 mg/ml	2	SP	PA, LD
EPRONTIA - topiramate oral soln 25 mg/ml	3		QL (473 mls/29 days)
ethosuximide cap 250 mg (Zarontin)	1		
ethosuximide soln 250 mg/5ml (Zarontin)	1		
felbamate susp 600 mg/5ml (Felbatol)	1		
felbamate tab 400 mg, 600 mg (Felbatol)	1		
FELBATOL - felbamate tab 400 mg, 600 mg	3		
FELBATOL - felbamate susp 600 mg/5ml	3		
FINTEPLA - fenfluramine hcl oral soln 2.2 mg/ml	3	SP	PA, LD

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FYCOMPA - perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3		
FYCOMPA - perampanel susp 0.5 mg/ml	3		
gabapentin cap 100 mg, 300 mg, 400 mg (Neurontin)	1		
gabapentin oral soln 250 mg/5ml (Neurontin)	1		
gabapentin tab 600 mg, 800 mg (Neurontin)	1		
GABITRIL - tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg	3		
KEPPRA - levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg	3		
KEPPRA - levetiracetam oral soln 100 mg/ml	3		
KEPPRA XR - levetiracetam tab er 24hr 500 mg, 750 mg	3		
lacosamide oral solution 10 mg/ml (Vimpat)	1		
lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg (Vimpat)	1		
LAMICTAL - lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg	3		
LAMICTAL CHEWABLE DISPERS - lamotrigine tab chewable dispersible 5 mg, 25 mg	3		
LAMICTAL ODT - lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg	3		
LAMICTAL ODT - lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit	3		
LAMICTAL ODT - lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit	3		
LAMICTAL ODT - lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit	3		
LAMICTAL STARTER/NOT TAKI - lamotrigine tab 25 mg (42) & 100 mg (7) starter kit	3		
LAMICTAL STARTER/TAKING C - lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit	3		
LAMICTAL STARTER/TAKING V - lamotrigine tab 35 x 25 mg starter kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg	3		
LAMICTAL XR - lamotrigine tab er 24hr 21 x 25 mg & 7 x 50 mg titration kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 25 (14) & 50 mg (14) & 100 mg(7) kit	3		
LAMICTAL XR - lamotrigine tab er 24hr 50 (14) & 100 mg(14) & 200 mg(7) kit	3		
lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg (Lamictal odt)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
lamotrigine tab chewable dispersible 5 mg, 25 mg (Lamictal chewable di)	1		
lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit (Lamictal odt)	1		
lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit (Lamictal odt)	1		
lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit (Lamictal odt)	1		
lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg (Lamictal xr)	1		
lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg (Lamictal)	1		
lamotrigine tab 35 x 25 mg starter kit (Lamictal starter/tak)	1		
lamotrigine tab 25 mg (42) & 100 mg (7) starter kit (Lamictal starter/not)	1		
lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit (Lamictal starter/tak)	1		
levetiracetam oral soln 100 mg/ml (Keppra)	1		
levetiracetam tab er 24hr 500 mg, 750 mg (Keppra xr)	1		
levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg (Keppra)	1		
LYRICA - pregabalin soln 20 mg/ml	3		ST, QL (900 mls/30 days)
methsuximide cap 300 mg (Celontin)	1		
NAYZILAM - midazolam nasal spray soln 5 mg/0.1 ml	3		QL (10 bottles/30 days)
NEURONTIN - gabapentin cap 100 mg, 300 mg, 400 mg	3		
NEURONTIN - gabapentin tab 600 mg, 800 mg	3		
NEURONTIN - gabapentin oral soln 250 mg/5ml	3		
ONFI - clobazam tab 10 mg, 20 mg	3		
ONFI - clobazam suspension 2.5 mg/ml	3		
oxcarbazepine susp 300 mg/5ml (60 mg/ml) (Trileptal)	1		
oxcarbazepine tab 150 mg, 300 mg, 600 mg (Trileptal)	1		
OXTELLAR XR - oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg	3		
PHENYTEK - phenytoin sodium extended cap 200 mg, 300 mg	3		
phenytoin chew tab 50 mg (Dilantin infatabs)	1		
phenytoin sodium extended cap 100 mg (Dilantin)	1		
phenytoin sodium extended cap 200 mg, 300 mg (Phenytek)	1		
phenytoin susp 125 mg/5ml (Dilantin-125)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg (Lyrica)	1		QL (90 capsules/30 days)
pregabalin cap 225 mg, 300 mg (Lyrica)	1		QL (60 capsules/30 days)
pregabalin soln 20 mg/ml (Lyrica)	1		QL (900 mls/30 days)
primidone tab 50 mg, 250 mg (Mysoline)	1		
QUDEXY XR - topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg	3		PA, QL (30 capsules/30 days)
QUDEXY XR - topiramate cap er 24hr sprinkle 200 mg	3		PA, QL (60 capsules/30 days)
rufinamide susp 40 mg/ml (Banzel)	1		
rufinamide tab 200 mg, 400 mg (Banzel)	1		
SABRIL - vigabatrin tab 500 mg	3	SP	LD
SABRIL - vigabatrin powd pack 500 mg	3	SP	LD
SYMPAZAN - clobazam oral film 5 mg, 10 mg, 20 mg	2		
TEGRETOL - carbamazepine tab 200 mg	3		
TEGRETOL - carbamazepine susp 100 mg/5ml	3		
TEGRETOL-XR - carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	3		
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg (Gabitril)	1		
TOPAMAX - topiramate tab 25 mg, 50 mg, 100 mg, 200 mg	3		
TOPAMAX SPRINKLE - topiramate sprinkle cap 15 mg, 25 mg	3		
topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg (Qudexy xr)	1		PA, QL (30 capsules/30 days)
topiramate cap er 24hr sprinkle 200 mg (Qudexy xr)	1		PA, QL (60 capsules/30 days)
topiramate cap er 24hr 25 mg, 50 mg, 100 mg (Trokendi xr)	1		PA, QL (30 capsules/30 days)
topiramate cap er 24hr 200 mg (Trokendi xr)	1		PA, QL (60 capsules/30 days)
topiramate sprinkle cap 15 mg, 25 mg (Topamax sprinkle)	1		
topiramate tab 25 mg, 50 mg, 100 mg, 200 mg (Topamax)	1		
TRILEPTAL - oxcarbazepine tab 150 mg, 300 mg, 600 mg	3		
TRILEPTAL - oxcarbazepine susp 300 mg/5ml (60 mg/ml)	3		
TROKENDI XR - topiramate cap er 24hr 25 mg, 50 mg, 100 mg	3		PA, QL (30 capsules/30 days)
TROKENDI XR - topiramate cap er 24hr 200 mg	3		PA, QL (60 capsules/30 days)
valproate sodium oral soln 250 mg/5ml (base equiv)	1		
valproic acid cap 250 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VALTOCO - diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose), 2 x 10 mg/0.1ml (20 mg dose)	3		QL (10 bottles/30 days)
VALTOCO - diazepam nasal spray 5 mg/0.1 ml, 10 mg/0.1 ml	3		QL (10 bottles/30 days)
vigabatrin powd pack 500 mg (Sabril)	1	SP	LD
vigabatrin tab 500 mg (Sabril)	1	SP	LD
VIMPAT - lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	3		
VIMPAT - lacosamide oral solution 10 mg/ml	3		
XCOPRI - cenobamate tab 50 mg, 100 mg, 150 mg, 200 mg	3		
XCOPRI - cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	3		
XCOPRI - cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	3		
XCOPRI - cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	3		
ZARONTIN - ethosuximide cap 250 mg	3		
ZARONTIN - ethosuximide soln 250 mg/5ml	3		
ZONEGRAN - zonisamide cap 25 mg, 100 mg	3		
zonisamide cap 25 mg, 100 mg (Zonegran)	1		
zonisamide cap 50 mg	1		
ZTALMY - ganaxolone susp 50 mg/ml	3	SP	PA, LD, QL (1100 mls/30 days)
ANTIPARKINSON AGENTS			
amantadine hcl cap 100 mg	1		
amantadine hcl soln 50 mg/5ml	1		
amantadine hcl tab 100 mg	1		
APOKYN - apomorphine hcl soln cartridge 30 mg/3ml	3	SP	PA, LD
apomorphine hcl soln cartridge 30 mg/3ml (Apokyn)	1	SP	PA
benztropine mesylate tab 0.5 mg, 1 mg, 2 mg	1		
bromocriptine mesylate cap 5 mg (base equivalent) (Parlodel)	1		
bromocriptine mesylate tab 2.5 mg (base equivalent) (Parlodel)	1		
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	1		
carbidopa & levodopa tab 10-100 mg, 25-100 mg (Sinemet)	1		
carbidopa & levodopa tab 25-250 mg	1		
carbidopa tab 25 mg (Lodosyn)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50)	1		
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75)	1		
carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100)	1		
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125)	1		
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150)	1		
carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200)	1		
CARBIDOPA/LEVODOPA ODT - carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	3		
COMTAN - entacapone tab 200 mg	3		
entacapone tab 200 mg (Comtan)	1		
INBRIJA - levodopa inhal powder cap 42 mg	2	SP	PA, LD
KYNMOBI - apomorphine hydrochloride film 10 mg, 15 mg, 20 mg, 25 mg, 30 mg	2		
LODOSYN - carbidopa tab 25 mg	3		
NEUPRO - rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	3		
NOURIANZ - istradefylline tab 20 mg, 40 mg	3	SP	PA, LD
PARLODEL - bromocriptine mesylate cap 5 mg (base equivalent)	3		
PARLODEL - bromocriptine mesylate tab 2.5 mg (base equivalent)	3		
pramipexole dihydrochloride tab er 24hr 0.375 mg, 0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg (Mirapex er)	1		
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg	1		
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv) (Azilect)	1		
ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent)	1		
ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg	1		
selegiline hcl cap 5 mg	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
selegiline hcl tab 5 mg	1		
SINEMET - carbidopa & levodopa tab 10-100 mg, 25-100 mg	3		
TASMAR - tolcapone tab 100 mg	3		
tolcapone tab 100 mg (Tasmar)	1		
TRIHXYPHENIDYL HCL - trihexyphenidyl hcl oral soln 0.4 mg/ml	3		
trihxyphenidyl hcl tab 2 mg, 5 mg	1		
NEUROMUSCULAR AGENTS			
EVRYSDI - risdiplam for soln 0.75 mg/ml	3	SP	PA, LD, QL (80 mls/12 days)
EXSERVAN - riluzole oral film 50 mg	3	SP	PA, LD, QL (60 films/30 days)
RADICAVA ORS - edaravone oral susp 105 mg/5ml	3	SP	PA, LD, QL (50 mls/28 days)
RADICAVA ORS STARTER KIT - edaravone oral susp 105 mg/5ml	3	SP	PA, LD, QL (70 mls/180 days)
RELYVRIO - sodium phenylbutyrate-taurursodiol powd pack 3-1 gm	3	SP	PA, LD, QL (56 packets/28 days)
riluzole tab 50 mg (Rilutek)	1		
TIGLUTIK - riluzole susp 50 mg/10ml	3	SP	PA, LD, QL (600 mls/30 days)
MUSCULOSKELETAL THERAPY AGENTS			
baclofen tab 10 mg, 20 mg	1		
carisoprodol tab 350 mg (Soma)	1		
chlorzoxazone tab 500 mg	1		
cyclobenzaprine hcl tab 5 mg, 10 mg	1		
DANTRIUM - dantrolene sodium cap 25 mg	3		
dantrolene sodium cap 25 mg (Dantrium)	1		
dantrolene sodium cap 50 mg, 100 mg	1		
metaxalone tab 400 mg, 800 mg	1		
METHOCARBAMOL - methocarbamol tab 1000 mg	3		
methocarbamol tab 500 mg, 750 mg	1		
orphenadrine citrate tab er 12hr 100 mg	1		
tizanidine hcl tab 2 mg (base equivalent)	1		
tizanidine hcl tab 4 mg (base equivalent) (Zanaflex)	1		
ZANAFLEX - tizanidine hcl tab 4 mg (base equivalent)	3		
ANTIMYASTHENIC AGENTS			
FIRDAPSE - amifampridine phosphate tab 10 mg (base equivalent)	3	SP	PA, LD, QL (240 tablets/30 days)
pyridostigmine bromide oral soln 60 mg/5ml (Mestinon)	1		
pyridostigmine bromide tab er 180 mg (Mestinon timespan)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
pyridostigmine bromide tab 60 mg (Mestinon)	1		
NUTRITIONAL PRODUCTS			
VITAMINS			
cholecalciferol cap 1.25 mg (50000 unit)	1		
DRISDOL - ergocalciferol cap 1.25 mg (50000 unit)	3		
ergocalciferol cap 1.25 mg (50000 unit) (Drisdol)	1		
phytonadione tab 5 mg (Mephyton)	1		QL (2 tablets/30 days)
MULTIVITAMINS			
ATABEX OB - prenatal vit w/ fe bisglycinate chelate-fa tab 29-1 mg	3		
CITRANATAL B-CALM - prenat w/o a w/fecbn-feglu-fa tab 20-1 mg & vit b6 tab pak	3		
CITRANATAL MEDLEY - prenat w/o a w/fe fum-fe cbn-fa-dha cap 27-1-200 mg	3		
CO-NATAL FA - prenatal vit w/ fe fumarate-fa tab 29-1 mg	2		
COMPLETE NATAL DHA - prenat-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	2		
COMPLETENATE - prenatal vit w/ fe fumarate-fa chew tab 29-1 mg	2		
CONCEPT DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	2		
CONCEPT OB - prenatal w/o a w/fe fum-fe poly-fa cap 130-92.4-1 mg	2		
FOLIVANE-OB - prenatal w/o a w/fe fum-fe poly-fa cap 85-1 mg	2		
INATAL GT - prenatal vit w/ dss-iron carbonyl-fa tab 90-1 mg	3		
JENLIVA PRENATAL/POSTNATA - prenatal multivitamins & minerals w/ iron & fa cap 1 mg	3		
M-NATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
NATALVIT - prenatal vit w/ fe fumarate-fa tab 75-1 mg	3		
NEONATAL COMPLETE - prenatal vit w/ fe fumarate-fa tab 27-1 mg, 29-1 mg	2		
NEONATAL PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
NESTABS - prenatal vit w/o vit a w/ fe bisglycinate-fa tab 32-1 mg	3		
NIVA-PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
OBSTETRIX DHA - prenat w/fecbn-fa-dss tab 29-1 mg & omega 3 cap 387 mg pak	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
VITAFOL STRIPS - prenatal w/ b6-b12-cholecalciferol-folic acid film 1 mg	3		
VITATHELY/GINGER - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
WESCAP-C DHA - prenatal w/fe fum-fe poly -fa-omega 3 cap 53.5-38-1 mg	2		
WESNATAL DHA COMPLETE - prenatal-fe bis-fe prot succ-fa-ca tab & omega 3 cap 200 pk	3		
WESTAB PLUS - prenatal vit w/ fe fumarate-fa tab 27-1 mg	2		
MINERALS and ELECTROLYTES			
FLORIVA - sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml	3		
GALZIN - zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)	3		
K-PHOS - potassium phosphate monobasic tab 500 mg	3		
K-PHOS NEUTRAL - pot phos monobasic w/sod phos di & monobas tab 155-852-130mg	3		
K-TAB - potassium chloride tab er 10 meq, 20 meq (1500 mg)	3		
pot phos monobasic w/sod phos di & monobas tab 155-852-130mg (K-phos neutral)	1		
potassium chloride cap er 8 meq, 10 meq	1		
POTASSIUM CHLORIDE ER - potassium chloride tab er 8 meq (600 mg)	3		
potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq	1		
potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)	1		
potassium chloride tab er 8 meq (600 mg)	1		
potassium chloride tab er 10 meq, 20 meq (1500 mg) (K-tab)	1		
potassium phosphate monobasic tab 500 mg (K-phos)	1		
SODIUM FLUORIDE - sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	2		
sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)	1		
sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf), 0.5 mg/ml f (from 1.1 mg/ml naf)	1		
NUTRIENTS			
DOJOLVI - triheptanoin oral liquid 100%	3	SP	PA, LD

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Drug Name	Drug Tier	Specialty	Requirements/Limits
HEMATOLOGICAL AGENTS			
HEMATOPOIETIC AGENTS			
ARANESP ALBUMIN FREE - darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml	2	SP	PA
ARANESP ALBUMIN FREE - darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml	2	SP	PA
carbonyl iron susp 15 mg/1.25ml (elemental iron)	1		
CERDELGA - eliglustat tartrate cap 84 mg (base equivalent)	2	SP	PA, LD, QL (60 capsules/30 days)
cyanocobalamin inj 1000 mcg/ml	1		
DOPTELET - avatrombopag maleate tab 20 mg (base equiv)	2	SP	PA, LD, QL (30 tablets/30 days)
DROXIA - hydroxyurea cap 200 mg, 300 mg, 400 mg	2		
ENDARI - glutamine (sickle cell) powd pack 5 gm	3	SP	PA, LD
EPOGEN - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml	3	SP	PA
FERROUS SULFATE - ferrous sulfate liquid 220 mg/5ml (44 mg/5ml elemental fe)	3		
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental fe)	1		
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe)	1		
folic acid tab 400 mcg, 800 mcg, 1 mg	1		
FULPHILA - pegfilgrastim-jmdb soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
FYLNETRA - pegfilgrastim-pbbk soln prefilled syringe 6 mg/0.6ml	3	SP	PA, QL (2 syringes/28 days)
LEUKINE - sargramostim lyophilized for inj 250 mcg	3	SP	PA
miglustat cap 100 mg (Zavesca)	1	SP	PA, QL (90 capsules/30 days)
MIRCERA - methoxy peg-epoetin beta soln prefilled syr 30 mcg/0.3ml, 50 mcg/0.3ml, 75 mcg/0.3ml, 100 mcg/0.3ml, 120 mcg/0.3ml, 150 mcg/0.3ml, 200 mcg/0.3ml	3	SP	PA
MULPLETA - lusutrombopag tab 3 mg	3	SP	PA, QL (7 tablets/7 days)
NEULASTA - pegfilgrastim soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
NIVESTYM - filgrastim-aafi soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	SP	PA
NIVESTYM - filgrastim-aafi inj 300 mcg/ml, 480 mcg/1.6ml (300 mcg/ml)	2	SP	PA

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NYVEPRIA - pegfilgrastim-apgf soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
OXBRYTA - voxelotor tab 300 mg, 500 mg	3	SP	PA, LD, QL (90 tablets/30 days)
OXBRYTA - voxelotor tab for oral susp 300 mg	3	SP	PA, LD, QL (90 tablets/30 days)
PROCRIT - epoetin alfa inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ ml	2	SP	PA
PROMACTA - eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	3	SP	PA, QL (30 tablets/30 days)
PROMACTA - eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	3	SP	PA, QL (30 packets/30 days)
RETACRIT - epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	2	SP	PA
STIMUFEND - pegfilgrastim-fpgk soln prefilled syringe 6 mg/0.6ml	3	SP	PA, QL (2 syringes/28 days)
UDENYCA - pegfilgrastim-cbqv soln auto-injector 6 mg/0.6ml	3		PA, QL (2 pens/28 days)
UDENYCA - pegfilgrastim-cbqv soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
ZARXIO - filgrastim-sndz soln prefilled syringe 300 mcg/0.5ml, 480 mcg/0.8ml	2	SP	PA
ZAVESCA - miglustat cap 100 mg	3	SP	PA, LD, QL (90 capsules/30 days)
ZIEXTENZO - pegfilgrastim-bmez soln prefilled syringe 6 mg/0.6ml	2	SP	PA, QL (2 syringes/28 days)
ANTICOAGULANTS			
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq) (Pradaxa)	1		QL (60 capsules/30 days)
ELIQUIS - apixaban tab 2.5 mg	2		QL (60 tablets/30 days)
ELIQUIS - apixaban tab 5 mg	2		QL (74 tablets/30 days)
ELIQUIS STARTER PACK - apixaban tab starter pack 5 mg	2		QL (1 pack/180 days)
enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml (Lovenox)	1		QL (30 syringes/90 days)
enoxaparin sodium inj 300 mg/3ml (Lovenox)	1		QL (10 vials/90 days)
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)	1		QL (30 syringes/90 days)
FRAGMIN - dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	3		QL (30 syringes/90 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
FRAGMIN - dalteparin sodium subcutaneous soln 10000 unit/4ml	3		QL (30 vials/90 days)
FRAGMIN - dalteparin sodium subcutaneous soln 95000 unit/3.8ml	3		QL (10 vials/90 days)
HEPARIN SODIUM - heparin sodium (porcine) pf inj 5000 unit/ml	3		
heparin sodium (porcine) inj 5000 unit/ml, 10000 unit/ml	1		
PRADAXA - dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq)	3		QL (60 capsules/30 days)
PRADAXA - dabigatran etexilate mesylate cap 110 mg (etexilate base eq)	3		QL (120 capsules/30 days)
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg	1		
XARELTO - rivaroxaban for susp 1 mg/ml	2		QL (620 mls/30 days)
XARELTO - rivaroxaban tab 2.5 mg, 15 mg	2		QL (60 tablets/30 days)
XARELTO - rivaroxaban tab 10 mg, 20 mg	2		QL (30 tablets/30 days)
XARELTO STARTER PACK - rivaroxaban tab starter therapy pack 15 mg & 20 mg	2		QL (1 pack/30 days)
HEMOSTATICS			
aminocaproic acid oral soln 0.25 gm/ml (Amicar)	1		
aminocaproic acid tab 500 mg, 1000 mg (Amicar)	1		
tranexamic acid tab 650 mg (Lysteda)	1		
HEMATOLOGICAL AGENTS - MISC.			
ADVATE - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	2	SP	PA
ADYNOVATE - antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA
AFSTYLA - antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	2	SP	PA, LD
AGRYLIN - anagrelide hcl cap 0.5 mg	3		
ALPHANATE - antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	2	SP	PA, LD
ALPHANINE SD - coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	2	SP	PA
ALPROLIX - coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	2	SP	PA, LD

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ALTUVIIIIO - antihemophilic fact rcmb fc-vwf-xten-ehlt for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	3	SP	PA, LD
anagrelide hcl cap 0.5 mg (Agrylin)	1		
anagrelide hcl cap 1 mg	1		
aspirin-dipyridamole cap er 12hr 25-200 mg	1		
BENEFIX - coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
BERINERT - c1 esterase inhibitor (human) for iv inj kit 500 unit	3	SP	PA, LD, QL (16 vials/30 days)
BRILINTA - ticagrelor tab 60 mg, 90 mg	2		
CABLIVI - caplacizumab-yhdp for inj kit 11 mg	3	SP	PA, LD, QL (30 kits/30 days)
cilostazol tab 50 mg, 100 mg	1		
CINRYZE - c1 esterase inhibitor (human) for iv inj 500 unit	2	SP	PA, LD, QL (20 vials/30 days)
clopidogrel bisulfate tab 75 mg (base equiv) (Plavix)	1		
clopidogrel bisulfate tab 300 mg (base equiv)	1		
COAGADEX - coagulation factor x (human) for inj 250 unit, 500 unit	2	SP	PA, LD
CORIFACT - factor xiii concentrate (human) for inj kit 1000-1600 unit	2	SP	PA, LD
dipyridamole tab 25 mg, 50 mg, 75 mg	1		
ELOCTATE - antihemophilic factor rcmb (bdd-rfviiiifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	2	SP	PA
EMPAVELI - pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	2	SP	PA, LD, QL (8 vials/28 days)
ESPEROCT - antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	3	SP	PA, LD
FEIBA - antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	2	SP	PA
FIBRYGA - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	2	SP	PA
HAEGARDA - c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	2	SP	PA, LD, QL (16 vials/30 days)
HEMLIBRA - emicizumab-kxwh subcutaneous soln 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml	2	SP	PA, LD
HEMOFIL M - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	2	SP	PA
HUMATE-P - antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	2	SP	PA

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icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)	1	SP	PA, LD, QL (12 syringes/30 days)
IDELVION - coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	2	SP	PA
IXINITY - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA, LD
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	2	SP	PA
JIVI - antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit	2	SP	PA
KALBITOR - ecallantide inj 10 mg/ml	3	SP	PA, LD, QL (12 vials/30 days)
KOATE - antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	2	SP	PA
KOATE-DVI - antihemophilic factor (human) for inj 500 unit, 1000 unit	2	SP	PA
KOGENATE FS - antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
KOVALTRY - antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
NOVOEIGHT - antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	2	SP	PA
NOVOSEVEN RT - coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	2	SP	PA, LD
NUWIQ - antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	2	SP	PA, LD
NUWIQ - antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	2	SP	PA, LD
NUWIQ - antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	2	SP	PA, LD
NUWIQ - antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	2	SP	PA, LD
OBIZUR - antihemophilic factor (recomb porc) rpfviii for inj 500 unit	2	SP	PA, LD
ORLADEYO - berotralstat hcl cap 110 mg, 150 mg	3	SP	PA, LD, QL (30 capsules/30 days)
pentoxifylline tab er 400 mg	1		
prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)	1		
PROFILNINE - factor ix complex for inj 500 unit, 1000 unit, 1500 unit	2	SP	PA

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PYRUKYND - mitapivat sulfate tab 5 mg, 20 mg, 50 mg	3	SP	PA, LD, QL (56 tablets/28 days)
PYRUKYND TAPER PACK - mitapivat sulfate tab therapy pack 5 mg, 7 x 20 mg & 7 x 5 mg, 7 x 50 mg & 7 x 20 mg	3	SP	PA, LD, QL (1 pack/365 days)
REBINYN - coagulation factor ix recomb glycopegylated for inj 500 unt, 1000 unt, 2000 unt, 3000 unt	2	SP	PA, LD
RECOMBIMATE - antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	2	SP	PA
RIASTAP - fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	2	SP	PA, LD
RIXUBIS - coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	2	SP	PA
RUCONEST - c1 esterase inhibitor (recombinant) for iv inj 2100 unit	3	SP	PA, LD, QL (16 vials/30 days)
RYPLAZIM - plasminogen, human-tvmh for iv soln 68.8 mg	3	SP	PA, LD
SEVENFACT - coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 5 mg (5000 mcg)	3	SP	PA, LD
TAKHZYRO - lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	2	SP	PA, LD, QL (2 syringes/28 days)
TAKHZYRO - lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	2	SP	PA, LD, QL (2 vials/28 days)
TAVALISSE - fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	3	SP	PA, LD, QL (60 tablets/30 days)
TAVNEOS - avacopan cap 10 mg	3	SP	PA, LD, QL (180 capsules/30 days)
TRETTEN - coagulation factor xiii a-subunit for inj 2000-3125 unit	2	SP	PA, LD
VONVENDI - von willebrand factor (recombinant) for inj 650 unit, 1300 unit	2	SP	PA
WILATE - antihemophilic factor/vwf (human) for inj 500-500 unit kit	2	SP	PA
WILATE - antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	2	SP	PA
XYNTHA - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	2	SP	PA
XYNTHA - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	2	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	2	SP	PA
XYNTHA SOLOFUSE - antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	2	SP	PA

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ZONTIVITY - vorapaxar sulfate tab 2.08 mg (base equivalent)	3		
TOPICAL PRODUCTS			
OPHTHALMIC AGENTS			
ACULAR - ketorolac tromethamine ophth soln 0.5%	3		
ACULAR LS - ketorolac tromethamine ophth soln 0.4%	3		
AKTEN - lidocaine hcl ophth gel 3.5%	3		
ALOCRIAL - nedocromil sodium ophth soln 2%	3		
ALOMIDE - Iodoxamide tromethamine ophth soln 0.1%	3		
ALPHAGAN P - brimonidine tartrate ophth soln 0.15%	3		
ALREX - loteprednol etabonate ophth susp 0.2%	3		
APRACLONIDINE - apraclonidine hcl ophth soln 0.5% (base equivalent)	2		
ATROPINE SULFATE - atropine sulfate ophth soln 1%	3		
atropine sulfate ophth soln 1% (Atropine sulfate)	1		
azelastine hcl ophth soln 0.05%	1		
BACITRACIN - bacitracin ophth oint 500 unit/gm	2		
bacitracin-polymyxin b ophth oint	1		
bacitracin-polymyxin-neomycin-hc ophth oint 1%	1		
bepotastine besilate ophth soln 1.5% (Bepreve)	1		
BEPREVE - bepotastine besilate ophth soln 1.5%	3		
BESIVANCE - besifloxacin hcl ophth susp 0.6% (base equiv)	3		
BETADINE OPHTHALMIC PREP - povidone-iodine ophth soln 5%	3		
BETAXOLOL HCL - betaxolol hcl ophth soln 0.5%	2		
bimatoprost ophth soln 0.03%	1		QL (2.5 mls/30 days)
brimonidine tartrate ophth soln 0.15% (Alphagan p)	1		
brimonidine tartrate ophth soln 0.2%	1		
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5% (Combigan)	1		
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)	1		
CARTEOLOL HCL - carteolol hcl ophth soln 1%	3		
CEQUA - cyclosporine (ophth) soln 0.09% (pf)	3		PA, QL (60 vials/30 days)
ciprofloxacin hcl ophth soln 0.3% (base equivalent)	1		
COMBIGAN - brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%	3		
CROMOLYN SODIUM - cromolyn sodium ophth soln 4%	2		
CYCLOGYL - cyclopentolate hcl ophth soln 0.5%, 2%	2		
CYCLOGYL - cyclopentolate hcl ophth soln 1%	3		

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CYCLOMYDRIL - cyclopentolate w/ phenylephrine ophth soln 0.2-1%	3		
cyclopentolate hcl ophth soln 1% (Cyclogyl)	1		
CYSTADROPS - cysteamine hcl ophth soln 0.37% (base equivalent)	3	SP	PA, LD, QL (20 mls/28 days)
CYSTARAN - cysteamine hcl ophth soln 0.44% (base equivalent)	3	SP	PA, LD, QL (60 mls/28 days)
DEXAMETHASONE SODIUM PHOS - dexamethasone sodium phosphate ophth soln 0.1%	3		
diclofenac sodium ophth soln 0.1%	1		
difluprednate ophth emulsion 0.05% (Durezol)	1		
dorzolamide hcl ophth soln 2% (Trusopt)	1		
dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml (Cosopt)	1		
dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ml pf (Cosopt pf)	1		
DUREZOL - difluprednate ophth emulsion 0.05%	3		
epinastine hcl ophth soln 0.05%	1		
erythromycin ophth oint 5 mg/gm	1		
FLAREX - fluorometholone acetate ophth susp 0.1%	3		
fluorometholone ophth susp 0.1% (Fml liquifilm)	1		
FLURBIPROFEN SODIUM - flurbiprofen sodium ophth soln 0.03%	3		
FML FORTE - fluorometholone ophth susp 0.25%	3		
FML LIQUIFILM - fluorometholone ophth susp 0.1%	3		
gatifloxacin ophth soln 0.5% (Zymaxid)	1		
gentamicin sulfate ophth soln 0.3%	1		
ILEVRO - nepafenac ophth susp 0.3%	2		
IOPIDINE - apraclonidine hcl ophth soln 1% (base equivalent)	3		
ISOPTO ATROPINE - atropine sulfate ophth soln 1%	3		
ketorolac tromethamine ophth soln 0.4% (Acular Is)	1		
ketorolac tromethamine ophth soln 0.5% (Acular)	1		
LACRISERT - artificial tear ophth insert	3		
latanoprost ophth soln 0.005% (Xalatan)	1		QL (2.5 mls/30 days)
LEVOBUNOLOL HCL - levobunolol hcl ophth soln 0.5%	3		
LEVOFLOXACIN - levofloxacin ophth soln 1.5%	3		
LOTEMAX - loteprednol etabonate ophth oint 0.5%	2		
LOTEMAX - loteprednol etabonate ophth susp 0.5%	3		
LOTEMAX - loteprednol etabonate ophth gel 0.5%	2		
LOTEMAX SM - loteprednol etabonate ophth gel 0.38%	2		

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LOTEPREDNOL ETABONATE - loteprednol etabonate ophth gel 0.5%	2		
loteprednol etabonate ophth susp 0.5% (Lotemax)	1		
LUMIGAN - bimatoprost ophth soln 0.01%	2		QL (2.5 mls/30 days)
MAXIDEX - dexamethasone ophth susp 0.1%	3		
MAXITROL - neomycin-polymyxin-dexamethasone ophth susp 0.1%	3		
MAXITROL - neomycin-polymyxin-dexamethasone ophth oint 0.1%	3		
moxifloxacin hcl ophth soln 0.5% (base equiv) (Vigamox)	1		
MYDRIACYL - tropicamide ophth soln 1%	3		
NATACYN - natamycin ophth susp 5%	2		
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin	1		
neomycin-polymyxin-dexamethasone ophth oint 0.1% (Maxitrol)	1		
neomycin-polymyxin-dexamethasone ophth susp 0.1% (Maxitrol)	1		
NEOMYCIN/POLYMYXIN/GRAMIC - neomycin-polymygramicid op sol 1.75-10000-0.025mg-unt-mg/ml	3		
OCUFLOX - ofloxacin ophth soln 0.3%	3		
ofloxacin ophth soln 0.3% (Ocuflox)	1		
OXERVATE - cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	3	SP	PA, LD, QL (56 vials/28 days)
phenylephrine hcl ophth soln 2.5%, 10%	1		
PHOSPHOLINE IODIDE - echothiophate iodide ophth for soln 0.125%	3		LD
pilocarpine hcl ophth soln 1%, 2%, 4%	1		
polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1% (Polytrim)	1		
POLYTRIM - polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%	3		
PRED MILD - prednisolone acetate ophth susp 0.12%	3		
PREDNISOLONE ACETATE - prednisolone acetate ophth susp 1%	2		
PREDNISOLONE SODIUM PHOSP - prednisolone sodium phosphate ophth soln 1%	3		
proparacaine hcl ophth soln 0.5% (Alcaine)	1		
RESTASIS - cyclosporine (ophth) emulsion 0.05%	2		PA, QL (60 vials/30 days)
RHOPRESSA - netarsudil dimesylate ophth soln 0.02%	3		ST, QL (2.5 mls/30 days)

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ROCKLATAN - netarsudil dimesylate-latanoprost ophth soln 0.02-0.005%	3		ST, QL (2.5 mls/30 days)
SIMBRINZA - brinzolamide-brimonidine tartrate ophth susp 1-0.2%	2		
SULFACETAMIDE SODIUM - sulfacetamide sodium ophth oint 10%	3		
sulfacetamide sodium ophth soln 10%	1		
SULFACETAMIDE SODIUM/PRED - sulfacetamide sodium-prednisolone ophth soln 10-0.23(0.25)%	3		
tafluprost preservative free (pf) ophth soln 0.0015% (Zioptan)	1		QL (30 containers/30 days)
tetracaine hcl ophth soln 0.5%	1		
timolol maleate ophth gel forming soln 0.25%, 0.5% (Timoptic-xe)	1		
timolol maleate ophth soln 0.25%, 0.5% (Timoptic)	1		
timolol maleate ophth soln 0.5% (once-daily) (Istalol)	1		
timolol maleate preservative free ophth soln 0.25%, 0.5% (Timoptic ocudose)	1		
TIMOPTIC-XE - timolol maleate ophth gel forming soln 0.25%, 0.5%	3		
TOBRADEX - tobramycin-dexamethasone ophth oint 0.3-0.1%	2		
TOBRADEX - tobramycin-dexamethasone ophth susp 0.3-0.1%	3		
TOBRADEX ST - tobramycin-dexamethasone ophth susp 0.3-0.05%	3		
tobramycin ophth soln 0.3%	1		
tobramycin-dexamethasone ophth susp 0.3-0.1% (Tobradex)	1		
TOBREX - tobramycin ophth oint 0.3%	3		
TRAVATAN Z - travoprost ophth soln 0.004% (benzalkonium free) (bak free)	3		QL (2.5 mls/30 days)
travoprost ophth soln 0.004% (benzalkonium free) (bak free) (Travatan z)	1		QL (2.5 mls/30 days)
TRIFLURIDINE - trifluridine ophth soln 1%	2		
tropicamide ophth soln 0.5%	1		
tropicamide ophth soln 1% (Mydracyl)	1		
XIIDRA - lifitegrast ophth soln 5%	3		PA, QL (60 vials/30 days)
ZERVIAE - cetirizine hcl ophth soln 0.24% (base equiv)	3		PA, QL (60 vials/30 days)
ZIOPTAN - tafluprost preservative free (pf) ophth soln 0.0015%	3		QL (30 containers/30 days)
ZIRGAN - ganciclovir ophth gel 0.15%	3		

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ZYMAXID - gatifloxacin ophth soln 0.5%	3		
OTIC AGENTS			
acetic acid otic soln 2%	1		
CIPRO HC - ciprofloxacin-hydrocortisone otic susp 0.2-1%	3		
CIPRODEX - ciprofloxacin-dexamethasone otic susp 0.3-0.1%	3		
CIPROFLOXACIN - ciprofloxacin hcl otic soln 0.2% (base equivalent)	3		
ciprofloxacin-dexamethasone otic susp 0.3-0.1% (Ciprodex)	1		
CORTISPORIN-TC - neomycin-colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	3		
DERMOTIC - fluocinolone acetonide (otic) oil 0.01%	3		
fluocinolone acetonide (otic) oil 0.01% (Dermotic)	1		
HYDROCORTISONE/ACETIC ACI - hydrocortisone w/ acetic acid otic soln 1-2%	2		
neomycin-polymyxin-hc otic soln 1%	1		
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%	1		
ofloxacin otic soln 0.3%	1		
MOUTH/THROAT/DENTAL AGENTS			
cevimeline hcl cap 30 mg (Evoxac)	1		
chlorhexidine gluconate soln 0.12% (Peridex)	1		
clotrimazole troche 10 mg	1		
FLUORIDEX SENSITIVITY REL - sodium fluoride-potassium nitrate paste 1.1-5%	3		
FLUORIMAX 5000 SENSITIVE - sodium fluoride-potassium nitrate paste 1.1-5%	3		
LIDOCAINE HCL - lidocaine hcl laryngotracheal soln 4%	3		
lidocaine hcl viscous soln 2%	1		
nystatin susp 100000 unit/ml	1		
ORAVIG - miconazole buccal tab 50 mg (mouth-throat)	3		
PERIDEX - chlorhexidine gluconate soln 0.12%	3		
pilocarpine hcl tab 5 mg, 7.5 mg (Salagen)	1		
PREVIDENT RINSE - sodium fluoride rinse 0.2%	2		
SALAGEN - pilocarpine hcl tab 5 mg, 7.5 mg	3		
sodium fluoride cream 1.1% (Prevident 5000 plus)	1		
sodium fluoride gel 1.1% (0.5% f) (Prevident fluoride)	1		
sodium fluoride paste 1.1% (Prevident 5000 boost)	1		
stannous fluoride gel 0.4%	1		

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triamcinolone acetonide dental paste 0.1%	1		
ANORECTAL AGENTS			
ANALPRAM HC - hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	3		
ANALPRAM HC SINGLES - hydrocortisone acetate w/ pramoxine perianal cream 2.5-1%	3		
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	3		
ANALPRAM-HC - hydrocortisone acetate w/ pramoxine perianal cream 1-1%	3		
ANUSOL-HC - hydrocortisone perianal cream 2.5%	3		
CORTENEMA - hydrocortisone enema 100 mg/60ml	3		
CORTIFOAM - hydrocortisone acetate perianal foam 10% (90 mg/dose)	3		
hydrocortisone acetate w/ pramoxine perianal cream 1-1% (Analpram-hc)	1		
hydrocortisone enema 100 mg/60ml (Cortenema)	1		
hydrocortisone perianal cream 1% (Proctocort)	1		
hydrocortisone perianal cream 2.5% (Anusol-hc)	1		
PROCTOFOAM HC - hydrocortisone acetate w/ pramoxine perianal foam 1-1%	2		
RECTIV - nitroglycerin oint 0.4%	3		
DERMATOLOGICALS			
acitretin cap 10 mg, 17.5 mg, 25 mg	1		
acyclovir oint 5% (Zovirax)	1		
adapalene gel 0.1%	1		
ADBRY - tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	2	SP	PA, LD, QL (4 syringes/28 days)
AFTERTEST TOPICAL PAIN RE - benzocaine stick 10%	3		
alclometasone dipropionate cream 0.05%	1		QL (120 grams/30 days)
alclometasone dipropionate oint 0.05%	1		QL (120 grams/30 days)
ALTABAX - retapamulin oint 1%	3		
AMCINONIDE - amcinonide lotion 0.1%	3		ST, QL (120 mls/30 days)
azelaic acid gel 15% (Finacea)	1		
BENZAMYCIN - benzoyl peroxide-erythromycin gel 5-3%	3		
benzoyl peroxide-erythromycin gel 5-3% (Benzamycin)	1		
BETAMETHASONE DIPROPIONAT - betamethasone dipropionate augmented gel 0.05%	3		ST, QL (200 grams/28 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
betamethasone dipropionate augmented cream 0.05%	1		QL (200 grams/28 days)
betamethasone dipropionate augmented lotion 0.05%	1		QL (210 mls/30 days)
betamethasone dipropionate augmented oint 0.05% (Diprolene)	1		QL (200 grams/28 days)
betamethasone dipropionate cream 0.05%	1		QL (135 grams/30 days)
betamethasone dipropionate lotion 0.05%	1		QL (120 mls/30 days)
betamethasone dipropionate oint 0.05%	1		QL (135 grams/30 days)
betamethasone valerate cream 0.1% (base equivalent)	1		QL (135 grams/30 days)
betamethasone valerate lotion 0.1% (base equivalent)	1		QL (120 mls/30 days)
betamethasone valerate oint 0.1% (base equivalent)	1		QL (135 grams/30 days)
bexarotene gel 1% (Targretin)	1	SP	PA
brimonidine tartrate gel 0.33% (base equivalent) (Mirvaso)	1		
calcipotriene cream 0.005% (Dovonex)	1		QL (120 grams/30 days)
calcipotriene oint 0.005%	1		QL (120 grams/30 days)
calcipotriene soln 0.005% (50 mcg/ml)	1		QL (120 mls/30 days)
calcipotriene-betamethasone dipropionate oint 0.005-0.064% (Taclonex)	1		QL (120 grams/30 days)
calcipotriene-betamethasone dipropionate susp 0.005-0.064% (Taclonex)	1		QL (120 grams/30 days)
CALCITRIOL - calcitriol oint 3 mcg/gm	3		QL (200 grams/30 days)
ciclopirox gel 0.77%	1		
ciclopirox olamine cream 0.77% (base equiv) (Loprox)	1		
ciclopirox olamine susp 0.77% (base equiv) (Loprox)	1		
ciclopirox shampoo 1% (Loprox shampoo)	1		
ciclopirox solution 8% (Penlac Nail Lacquer)	1		QL (6.6 mls/30 days)
CLEOCIN-T - clindamycin phosphate lotion 1%	3		
clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%	1		
clindamycin phosphate gel 1% (Clindagel)	1		
clindamycin phosphate lotion 1% (Cleocin-t)	1		
clindamycin phosphate soln 1%	1		QL (120 grams/30 days)
clindamycin phosphate swab 1%	1		
clindamycin phosphate-benzoyl peroxide gel 1-5%	1		
clobetasol propionate cream 0.05%	1		QL (210 grams/28 days)
clobetasol propionate emollient base cream 0.05%	1		QL (210 grams/28 days)

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clobetasol propionate gel 0.05%	1		QL (210 grams/28 days)
clobetasol propionate oint 0.05%	1		QL (210 grams/28 days)
clobetasol propionate soln 0.05%	1		QL (200 mls/28 days)
clocortolone pivalate cream 0.1% (Cloderm)	1		QL (135 grams/30 days)
CLODERM - clocortolone pivalate cream 0.1%	3		ST, QL (135 grams/30 days)
clotrimazole w/ betamethasone cream 1-0.05%	1		
CONDYLOX - podofilox gel 0.5%	2		
CORDRAN - flurandrenolide tape 4 mcg/sqcm	3		ST, QL (1 box/30 days)
COSENTYX - secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	2	SP	PA, LD, QL (1 syringe/28 days)
COSENTYX - secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	2	SP	PA, LD, QL (2 syringes/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous soln auto-injector 150 mg/ml	2	SP	PA, LD, QL (1 pen/28 days)
COSENTYX SENSOREADY PEN - secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	2	SP	PA, LD, QL (2 pens/28 days)
CROTAN - crotamiton lotion 10%	3		
DENAVIR - penciclovir cream 1%	3		
DERMA-SMOOTH/FS BODY - fluocinolone acetonide oil 0.01% (body oil)	3		ST, QL (118.28 mls/30 days)
DERMA-SMOOTH/FS SCALP - fluocinolone acetonide oil 0.01% (scalp oil)	3		ST, QL (118.28 mls/30 days)
desonide cream 0.05% (Desowen)	1		QL (120 grams/30 days)
desonide oint 0.05%	1		QL (120 grams/30 days)
desoximetasone cream 0.05%, 0.25% (Topicort)	1		QL (120 grams/30 days)
desoximetasone gel 0.05% (Topicort)	1		QL (120 grams/30 days)
desoximetasone oint 0.05%, 0.25% (Topicort)	1		QL (120 grams/30 days)
desoximetasone spray 0.25% (Topicort)	1		QL (100 mls/30 days)
diclofenac sodium soln 1.5%	1		QL (150 mls/30 days)
DIPROLENE - betamethasone dipropionate augmented oint 0.05%	3		ST, QL (200 grams/28 days)
doxepin hcl cream 5% (Prudoxin)	1		PA, QL (45 grams/30 days)
DUPIXENT - dupilumab subcutaneous soln pen-injector 200 mg/1.14ml, 300 mg/2ml	2	SP	PA, QL (2 pens/28 days)
DUPIXENT - dupilumab subcutaneous soln prefilled syringe 100 mg/0.67ml, 200 mg/1.14ml, 300 mg/2ml	2	SP	PA, QL (2 syringes/28 days)
econazole nitrate cream 1%	1		QL (120 grams/30 days)
EFUDEX - fluorouracil cream 5%	3		PA, QL (240 grams/84 days)
EPIFOAM - pramoxine-hc aerosol foam 1-1%	3		
ERTACZO - sertaconazole nitrate cream 2%	3		PA
ERY - erythromycin pads 2%	3		

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ERYGEL - erythromycin gel 2%	3		
erythromycin gel 2% (Erygel)	1		
erythromycin soln 2%	1		
EXELDERM - sulconazole nitrate solution 1%	3		PA
EXELDERM - sulconazole nitrate cream 1%	3		PA
FINACEA - azelaic acid gel 15%	3		
fluocinolone acetonide cream 0.01%	1		QL (120 grams/30 days)
fluocinolone acetonide cream 0.025% (Synalar)	1		QL (120 grams/30 days)
fluocinolone acetonide oil 0.01% (body oil) (Derma-smoothe/fs bod)	1		QL (118.28 mls/30 days)
fluocinolone acetonide oil 0.01% (scalp oil) (Derma-smoothe/fs sca)	1		QL (118.28 mls/30 days)
fluocinolone acetonide oint 0.025% (Synalar)	1		QL (120 grams/30 days)
fluocinolone acetonide soln 0.01% (Synalar)	1		QL (120 mls/30 days)
fluocinonide cream 0.05%	1		QL (120 grams/30 days)
fluocinonide emulsified base cream 0.05%	1		QL (120 grams/30 days)
fluocinonide gel 0.05%	1		QL (120 grams/30 days)
fluocinonide oint 0.05%	1		QL (120 grams/30 days)
fluocinonide soln 0.05%	1		QL (120 mls/30 days)
FLUOROURACIL - fluorouracil soln 2%, 5%	3		
fluorouracil cream 5% (Efudex)	1		PA, QL (240 grams/84 days)
fluticasone propionate cream 0.05%	1		QL (120 grams/30 days)
fluticasone propionate oint 0.005%	1		QL (120 grams/30 days)
gentamicin sulfate cream 0.1%	1		QL (60 grams/30 days)
gentamicin sulfate oint 0.1%	1		
halcinonide cream 0.1% (Halog)	1		QL (120 grams/30 days)
halobetasol propionate cream 0.05%	1		QL (200 grams/28 days)
HALOG - halcinonide soln 0.1%	3		ST, QL (120 mls/30 days)
HALOG - halcinonide oint 0.1%	3		ST, QL (120 grams/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate soln 0.1%	3		ST, QL (120 mls/30 days)
HYDROCORTISONE BUTYRATE - hydrocortisone butyrate cream 0.1%	3		ST, QL (135 grams/30 days)
hydrocortisone butyrate oint 0.1%	1		QL (135 grams/30 days)
hydrocortisone cream 2.5%	1		QL (454 grams/30 days)
hydrocortisone lotion 2.5%	1		QL (118 mls/30 days)
hydrocortisone oint 2.5%	1		QL (454 grams/30 days)
hydrocortisone valerate cream 0.2%	1		QL (120 grams/30 days)
hydrocortisone valerate oint 0.2%	1		QL (120 grams/30 days)
HYFTOR - sirolimus gel 0.2%	3		PA, LD, QL (70 grams/84 days)

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imiquimod cream 5%	1		QL (48 packets/112 days)
isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg (Absorica)	1		
ivermectin cream 1% (Soolantra)	1		PA
ketoconazole cream 2%	1		QL (120 grams/30 days)
ketoconazole shampoo 2%	1		
KLARON - sulfacetamide sodium lotion 10% (acne)	3		
KLISYRI - tirbanibulin ointment 1%	3		PA, QL (5 boxes/90 days)
lidocaine hcl soln 4%	1		QL (150 mls/30 days)
lidocaine hcl urethral/mucosal gel prefilled syringe 2%	1		
lidocaine patch 5% (Lidoderm)	1		PA, QL (90 patches/30 days)
lidocaine-prilocaine cream 2.5-2.5%	1		QL (60 grams/30 days)
LINDANE - lindane shampoo 1%	3		
LOPROX - ciclopirox olamine susp 0.77% (base equiv)	3		
mafenide acetate packet for topical soln 5% (50 gm) (Sulfamylon)	1		
malathion lotion 0.5% (Ovide)	1		
MENTAX - butenafine hcl cream 1%	3		
METHOXSALEN - methoxsalen rapid cap 10 mg	3		
METROGEL - metronidazole gel 1%	3		
METROLOTION - metronidazole lotion 0.75%	3		
metronidazole cream 0.75% (Metrocream)	1		
metronidazole gel 0.75%	1		
metronidazole gel 1% (Metrogel)	1		
metronidazole lotion 0.75% (Metrolotion)	1		
mometasone furoate cream 0.1%	1		QL (135 grams/30 days)
mometasone furoate oint 0.1%	1		QL (135 grams/30 days)
mometasone furoate solution 0.1% (lotion)	1		QL (120 mls/30 days)
mupirocin oint 2%	1		
NATROBA - spinosad susp 0.9%	3		
NEO-SYNALAR - neomycin sulfate-fluocinolone acetonide cream 0.5-0.025%	3		
nystatin cream 100000 unit/gm	1		
nystatin oint 100000 unit/gm	1		
nystatin topical powder 100000 unit/gm	1		
nystatin-triamcinolone cream 100000-0.1 unit/gm-%	1		
nystatin-triamcinolone oint 100000-0.1 unit/gm-%	1		
OPZELURA - ruxolitinib phosphate cream 1.5%	3		PA, QL (60 grams/30 days)
OVIDE - malathion lotion 0.5%	3		

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oxiconazole nitrate cream 1% (Oxistat)	1		PA
PANRETIN - alitretinoin gel 0.1%	3		
penciclovir cream 1% (Denavir)	1		
permethrin cream 5%	1		
pimecrolimus cream 1% (Elidel)	1		ST, QL (100 grams/30 days)
podofilox soln 0.5%	1		
PRUDOXIN - doxepin hcl cream 5%	3		PA, QL (45 grams/30 days)
REGRANEX - becaplermin gel 0.01%	3		
RETIN-A - tretinoin gel 0.01%, 0.025%	3		
SANTYL - collagenase oint 250 unit/gm	2		QL (90 grams/30 days)
selenium sulfide lotion 2.5%	1		
SILIQ - brodalumab subcutaneous soln prefilled syringe 210 mg/1.5ml	3	SP	PA, QL (2 syringes/28 days)
SILVADENE - silver sulfadiazine cream 1%	3		
silver sulfadiazine cream 1% (Silvadene)	1		
SKYRIZI - risankizumab-rzaa soln prefilled syringe 150 mg/ml	2	SP	PA, QL (1 syringe/84 days)
SKYRIZI PEN - risankizumab-rzaa soln auto-injector 150 mg/ml	2	SP	PA, QL (1 pen/84 days)
SOOLANTRA - ivermectin cream 1%	2		
SOTYKTU - deucravacitinib tab 6 mg	3	SP	PA, LD, QL (30 tablets/30 days)
SPINOSAD - spinosad susp 0.9%	3		
STELARA - ustekinumab inj 45 mg/0.5ml	2	SP	PA, QL (1 vial/84 days)
STELARA - ustekinumab soln prefilled syringe 45 mg/0.5ml	2	SP	PA, QL (1 syringe/84 days)
STELARA - ustekinumab soln prefilled syringe 90 mg/ml	2	SP	PA, QL (1 syringe/56 days)
SULCONAZOLE NITRATE - sulconazole nitrate solution 1%	3		PA
SULCONAZOLE NITRATE - sulconazole nitrate cream 1%	3		PA
sulfacetamide sodium lotion 10% (acne) (Klaron)	1		
SULFAMYLON - mafenide acetate packet for topical soln 5% (50 gm)	3		
SULFAMYLON - mafenide acetate cream 85 mg/gm	3		
SYNERA - lidocaine-tetracaine topical patch 70-70 mg	3		PA, QL (4 patches/30 days)
tacrolimus oint 0.03%, 0.1% (Protopic)	1		ST, QL (100 grams/30 days)
TALTZ - ixekizumab subcutaneous soln auto-injector 80 mg/ml	3	SP	PA, LD, QL (1 pen/28 days)
TALTZ - ixekizumab subcutaneous soln prefilled syringe 80 mg/ml	3	SP	PA, LD, QL (1 syringe/28 days)
TARGRETIN - bexarotene gel 1%	3	SP	PA

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tazarotene cream 0.1% (Tazorac)	1		QL (120 grams/30 days)
tazarotene gel 0.05%, 0.1% (Tazorac)	1		QL (100 grams/30 days)
TAZORAC - tazarotene cream 0.05%	2		QL (120 grams/30 days)
TAZORAC - tazarotene gel 0.05%, 0.1%	3		QL (100 grams/30 days)
TOPICORT - desoximetasone cream 0.25%	3		ST, QL (120 grams/30 days)
TOPICORT - desoximetasone gel 0.05%	3		ST, QL (120 grams/30 days)
TOPICORT - desoximetasone oint 0.25%	3		ST, QL (120 grams/30 days)
TREMFYA - guselkumab soln pen-injector 100 mg/ml	2	SP	PA, QL (1 pen/56 days)
TREMFYA - guselkumab soln prefilled syringe 100 mg/ml	2	SP	PA, QL (1 syringe/56 days)
tretinoin cream 0.025%, 0.05%, 0.1% (Retin-a)	1		
tretinoin gel 0.01%, 0.025% (Retin-a)	1		
triamcinolone acetonide aerosol soln 0.147 mg/gm (Kenalog)	1		QL (126 grams/30 days)
triamcinolone acetonide cream 0.025%, 0.1%, 0.5%	1		QL (454 grams/30 days)
triamcinolone acetonide lotion 0.025%, 0.1%	1		QL (120 mls/30 days)
triamcinolone acetonide oint 0.025%, 0.1%	1		QL (454 grams/30 days)
triamcinolone acetonide oint 0.5%	1		QL (120 grams/30 days)
VALCHLOR - mechlorethamine hcl gel 0.016% (base equivalent)	2	SP	LD
VECTICAL - calcitriol oint 3 mcg/gm	3		QL (200 grams/30 days)
ZONALON - doxepin hcl cream 5%	3		PA, QL (45 grams/30 days)
MISCELLANEOUS PRODUCTS			
ANTIDOTES			
CHEMET - succimer cap 100 mg	2	SP	PA
deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle)	1	SP	
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (Exjade)	1	SP	
deferasirox tab 90 mg, 180 mg, 360 mg (Jadenu)	1	SP	
deferiprone tab 500 mg, 1000 mg (Ferriprox)	1	SP	
EXJADE - deferasirox tab for oral susp 125 mg, 250 mg, 500 mg	3	SP	
FERRIPROX - deferiprone tab 500 mg, 1000 mg	3	SP	LD
FERRIPROX - deferiprone oral soln 100 mg/ml	3	SP	LD
JADENU - deferasirox tab 90 mg, 180 mg, 360 mg	3	SP	
JADENU SPRINKLE - deferasirox granules packet 90 mg, 180 mg, 360 mg	3	SP	
KLOXXADO - naloxone hcl nasal spray 8 mg/0.1ml	2		QL (4 bottles/30 days)
naloxone hcl inj 0.4 mg/ml	1		QL (4 vials/30 days)
naloxone hcl inj 4 mg/10ml	1		QL (1 vial/30 days)

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naloxone hcl nasal spray 4 mg/0.1ml (Narcan)	1		QL (4 bottles/30 days)
naloxone hcl soln prefilled syringe 2 mg/2ml	1		QL (4 vials/30 days)
NALOXONE HYDROCHLORIDE - naloxone hcl soln cartridge 0.4 mg/ml	3		QL (4 cartridges/30 days)
naltrexone hcl tab 50 mg	1		
NARCAN - naloxone hcl nasal spray 4 mg/0.1ml	3		QL (4 bottles/30 days)
RADIOGARDASE - prussian blue insoluble cap 0.5 gm	3		
VISTOGARD - uridine triacetate oral granules packet 10 gm	3	SP	PA, LD
ZIMHI - naloxone hcl soln prefilled syringe 5 mg/0.5ml	3		QL (4 syringes/30 days)
DIAGNOSTIC PRODUCTS			
ACCU-CHEK AVIVA PLUS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK COMPACT STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK COMPACT TEST DR - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK GUIDE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCU-CHEK SMARTVIEW STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
ACCUTREND GLUCOSE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVANCE INTUITION TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVANCE MICRO-DRAW TEST S - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE REDI-CODE - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE REDI-CODE+ TEST - glucose blood test strip	3		PA, QL (204 strips/30 days)
ADVOCATE TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX AMP NO CODE TES - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX JAZZ TEST STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX KEYNOTE TEST ST - glucose blood test strip	3		PA, QL (204 strips/30 days)
AGAMATRIX PRESTO TEST STR - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II CHECK STRIP - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE II TEST STRIPS - glucose blood test strip	3		PA, QL (204 strips/30 days)
ASSURE PLATINUM TEST STRI - glucose blood test strip	3		PA, QL (204 strips/30 days)

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MEDICAL DEVICES			
ABOUTTIME PEN NEEDLE 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ABOUTTIME PEN NEEDLES 30G - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
ABOUTTIME PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
ACCU-CHEK AVIVA PLUS - blood glucose monitoring kit w/ device	3		
ACCU-CHEK FASTCLIX LANCET - lancets	2		
ACCU-CHEK FASTCLIX LANCET - lancets kit	2		
ACCU-CHEK GUIDE - blood glucose monitoring kit w/ device	3		
ACCU-CHEK GUIDE ME - blood glucose monitoring kit w/ device	3		
ACCU-CHEK SAFE-T-PRO LANC - lancets	2		
ACCU-CHEK SAFE-T-PRO PLUS - lancets	2		
ACCU-CHEK SOFTCLIX LANCET - lancets	2		
ACCU-CHEK SOFTCLIX LANCET - lancets kit	2		
ACTI-LANCE LANCETS 28G - lancets	2		
ACTI-LANCE LITE SAFETY LA - lancets	2		
ACTI-LANCE SPECIAL SAFETY - lancets	2		
ACTI-LANCE UNIVERSAL SAFE - lancets	2		
ADJUSTABLE LANCING DEVICE - lancet devices	2		
ADVANCE INTUITION BLOOD G - blood glucose monitoring devices	3		
ADVANCE INTUITION BLOOD G - blood glucose monitoring kit w/ device	3		
ADVANCE MICRO-DRAW METER - blood glucose monitoring devices	3		
ADVANCED MOBILE LANCET 30 - lancets	2		
ADVOCATE BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
ADVOCATE BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
ADVOCATE INSULIN PEN NEED - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ADVOCATE INSULIN PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
ADVOCATE INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		

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AUM MINI INSULIN PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
AUM MINI INSULIN PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
AUM PEN NEEDLE/32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
AUM PEN NEEDLE/32GX5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
AUM PEN NEEDLE/32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
AUM PEN NEEDLE/33GX4MM - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
AUM PEN NEEDLE/33GX5MM - insulin pen needle 33 g x 5 mm (1/5" or 3/16")	2		
AUM PEN NEEDLE/33GX6MM - insulin pen needle 33 g x 6 mm (1/4" or 15/64")	2		
AUM READYGARD DUO SAFETY - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
AUM SAFETY PEN NEEDLE/31 - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
AURORA LANCET SUPER THIN - lancets	2		
AURORA LANCET THIN 23G - lancets	2		
AURORA PEN NEEDLES 29GX12 - insulin pen needle 29 g x 12 mm (1/2")	2		
AURORA PEN NEEDLES 31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
AURORA UNIFINE PENTIPS/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
AURORA UNIFINE PENTIPS/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
AUTO-LANCET - lancet devices	2		
AUTO-LANCET MINI - lancet devices	2		
AUTOLET IMPRESSION LANCIN - lancet devices	2		
AUTOLET LANCING DEVICE - lancet devices	2		
AUTOLET MINI - lancet devices	2		
AUTOLET PLUS - lancet devices	2		
AUTOPEN - injection device for insulin	3		
B-D INSULIN SYRINGE MICRO - insulin syringe/needle u-100 1 ml 28 x 1/2"	2		

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B-D INSULIN SYRINGE ULTRA - insulin syringe/needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 0.3 ml 31 x 5/16"	2		
BD LO-DOSE INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2		
BD ALLERGY SYRINGE 0.5ML/ - tuberculin/allergy syringe/needle (disp) 1/2 ml 27 x 1/2", 1/2 ml 27 x 3/8"	3		
BD ALLERGY SYRINGE 1ML/27 - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 3/8"	3		
BD ALLERGY SYRINGE/NEEDLE - tuberculin/allergy syringe/needle (disp) 1/2 ml 27 x 3/8"	3		
BD ALLERGY/SYRINGE/NEEDLE - tuberculin/allergy syringe/needle (disp) 1 ml 28 x 1/2"	3		
BD AUTOSHIELD DUO 30G X 5 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
BD AUTOSHIELD 29G X 3/16" - insulin pen needle 29 g x 5 mm (1/5" or 3/16")	2		
BD AUTOSHIELD 29G X 5/16" - insulin pen needle 29 g x 8 mm (1/3" or 5/16")	2		
BD BLUNT FILL NEEDLE/18G - needle (disp) 18 x 1-1/2"	3		
BD DISPOSABLE NEEDLE REGU - needle (disp) 25 x 1"	2		
BD DISPOSABLE NEEDLE 23GX - needle (disp) 23 x 1"	2		
BD DISPOSABLE NEEDLE 23GX - needle (disp) 23 x 1-1/4"	3		
BD DISPOSABLE NEEDLE 27GX - needle (disp) 27 x 1-1/4"	3		
BD ECLIPSE NEEDLE 21G X 1 - needle (disp) 21 x 1", 21 x 1-1/2"	3		
BD ECLIPSE NEEDLE 25G X 1 - needle (disp) 25 x 1-1/2"	3		
BD ECLIPSE NEEDLE 25GX1" - needle (disp) 25 x 1"	2		
BD ECLIPSE NEEDLE/LUER-LO - needle (disp) 30 x 1/2"	3		
BD ECLIPSE NEEDLE/25G X - needle (disp) 25 x 5/8"	3		
BD ECLIPSE 18G X 1-1/2" - needle (disp) 18 x 1-1/2"	3		
BD ECLIPSE 23G X 1" NEEDL - needle (disp) 23 x 1"	3		
BD HYPODERMIC NEEDLE REGU - needle (disp) 18 x 1-1/2"	2		
BD HYPODERMIC NEEDLES 16G - needle (disp) 16 x 1"	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD INSULIN SYRINGE/U-500/ - insulin syringe/needle u-500 0.5 ml 31g x 6mm (15/64")	2		
BD INSULIN SYRINGE/0.3ML/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2		
BD INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
BD INSULIN SYRINGE/1ML/27 - insulin syringe/needle u-100 1 ml 27 x 1/2"	2		
BD INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
BD INTEGRA RETRACTABLE NE - needle (disp) 23 x 1"	3		
BD INTEGRA SYRINGE/3ML/22 - syringe/needle (disp) 3 ml 22 x 1-1/2"	2		
BD LANCET ULTRAFINE 30G - lancets	2		
BD LANCET ULTRAFINE 33G - lancets	2		
BD LATITUDE DIABETES MANA - blood glucose monitoring kit w/ device	3		
BD LOGIC BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
BD LUER LOCK SYRINGE/1ML/ - syringe/needle (disp) 1 ml 20 x 1"	2		
BD MAGNI-GUIDE MAGNIFIER - blood glucose monitoring supplies	3		
BD MICROTAINER LANCETS - lancets	2		
BD NEEDLE BLUNT 5 MICRON - needle (disp) 18 x 1-1/2"	3		
BD NEEDLE SAFETYGLIDE/27G - needle (disp) 27 x 5/8"	3		
BD NEEDLE 30G X 1" - needle (disp) 30 x 1"	3		
BD NEEDLE/16G X 1-1/2" - needle (disp) 16 x 1-1/2"	3		
BD NEEDLE/18G 1-1/2" - needle (disp) 18 x 1-1/2"	2		
BD NEEDLE/19G X 1" - needle (disp) 19 x 1"	3		
BD NEEDLE/20G X 1-1/2" - needle (disp) 20 x 1-1/2"	3		
BD NEEDLE/20G X 1" - needle (disp) 20 x 1"	2		
BD NEEDLE/21G 1-1/2" - needle (disp) 21 x 1-1/2"	2		
BD NEEDLE/22G X 1-1/2" - needle (disp) 22 x 1-1/2"	2		
BD NEEDLE/25G X 5/8" - needle (disp) 25 x 5/8"	2		
BD NEEDLE/25G X 7/8" - needle (disp) 25 x 7/8"	2		
BD NEEDLE/27G X 1/2" - needle (disp) 27 x 1/2"	2		
BD NEEDLE/30G X 1/2" - needle (disp) 30 x 1/2"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BD NOKOR NEEDLE ADMIX THI - needle (disp) 18 x 1-1/2"	3		
BD NOKOR VENTED NEEDLE 18 - needle (disp) 18 x 1"	3		
BD PEN - injection device for insulin	3		
BD PEN MINI - injection device for insulin	3		
BD PEN NEEDLE/MICRO/ULTRA - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
BD PEN NEEDLE/MINI/ULTRA- - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
BD PEN NEEDLE/NANO 2ND GE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
BD PEN NEEDLE/NANO/ULTRA - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
BD PEN NEEDLE/ORIGINAL/UL - insulin pen needle 29 g x 12.7 mm (1/2")	2		
BD PEN NEEDLE/SHORT/ULTRA - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
BD PLASTIPAK SYRINGES ALL - tuberculin/allergy syringe/needle (disp) 1 ml 28 x 1/2"	3		
BD PRECISIONGLIDE NEEDLE - needle (disp) 27 x 1-1/2"	3		
BD PRECISIONGLIDE 23GX1-1 - needle (disp) 23 x 1-1/2"	3		
BD SAFETY-GLIDE INSULIN S - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
BD SAFETY-LOK INSULIN SYR - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
BD SAFETYGLIDE HYPODERMIC - needle (disp) 18 x 1-1/2"	3		
BD SAFETYGLIDE HYPODERMIC - needle (disp) 25 x 5/8"	2		
BD SAFETYGLIDE INSULIN SY - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
BD SAFETYGLIDE NEEDLE 25G - needle (disp) 25 x 1"	3		
BD SAFETYGLIDE NEEDLE/SHI - needle (disp) 22 x 1-1/2"	3		
BD SAFETYGLIDE SHIELDED N - needle (disp) 23 x 1"	3		
BD SAFETYGLIDE SYRINGE 5M - syringe/needle (disp) 5 ml 22 x 1-1/2"	2		

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BD SAFETYGLIDE 21G X 1-1/2 - needle (disp) 21 x 1-1/2"	3		
BD SAFETYGLIDE 21G X 1" - needle (disp) 21 x 1"	3		
BD SYRINGE BLUNT PLASTIC - syringe (disposable) 10 ml	2		
BD SYRINGE LUER-LOK/1ML - syringe (disposable) 1 ml	2		
BD SYRINGE 10ML/20G X 1" - syringe/needle (disp) 10 ml 20 x 1"	2		
BD TUBERCULIN SYRINGE/NEE - tuberculin/allergy syringe/needle (disp) 1 ml 21 x 1"	3		
BD VEO INSULIN SYRINGE UL - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
BD 1/2ML TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1/2 ml 27 x 1/2"	3		
BD 1ML ALLERGY SYRINGE SA - tuberculin/allergy syringe/needle (disp) 1 ml 27 x 1/2"	3		
BD 1ML SLIP TIP SYRINGE 2 - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 26 x 3/8"	2		
BD 1ML TUBERCULIN SYRINGE - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2"	2		
BD 10ML LUER-LOK SYRINGE - syringe/needle (disp) 10 ml 21 x 1"	2		
BD 10ML SYRINGE/DUAL CANN - syringe (disposable) 10 ml	2		
BD 3ML LUER-LOK SYRINGE 1 - syringe/needle (disp) 3 ml 18 x 1-1/2"	2		
BD 3ML LUER-LOK SYRINGE/2 - syringe/needle (disp) 3 ml 20 x 1", 3 ml 23 x 1-1/2", 3 ml 25 x 1", 3 ml 26 x 5/8"	2		
BD 3ML SYRINGE LUER-LOK 2 - syringe/needle (disp) 3 ml 21 x 1-1/2", 3 ml 22 x 1", 3 ml 22 x 1-1/2", 3 ml 23 x 1", 3 ml 25 x 5/8", 3 ml 25 x 1-1/2"	2		
BD 5ML LUER-LOK SYRINGE/2 - syringe/needle (disp) 5 ml 20 x 1", 5 ml 21 x 1-1/2", 5 ml 22 x 1", 5 ml 22 x 1-1/2"	2		
BIGFOOT UNITY PROGRAM KIT - blood glucose monitor kit w/ monitor device & digital app	3		
BIOTEL CARE BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
BIOTEL CARE CONNECTED BLO - blood glucose monitoring kit w/ device	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
BLOOD GLUCOSE MONITORING - blood glucose monitoring devices	3		
BLOOD GLUCOSE MONITORING - blood glucose monitoring kit w/ device	3		
BLOOD GLUCOSE SYSTEM PAK - blood glucose monitoring kit w/ device	3		
BLULINK BLOOD GLUCOSE MON - blood glucose monitoring devices	3		
CARDIOCOM LANCING DEVICE - lancet devices	2		
CAREFINE PEN NEEDLE 32GX4 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CAREFINE PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		
CAREFINE PEN NEEDLES 30GX - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
CAREFINE PEN NEEDLES 31GX - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CAREFINE PEN NEEDLES 32GX - insulin pen needle 32 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
CAREONE ADVANCED LANCING - lancet devices	2		
CAREONE BLOOD GLUCOSE MON - blood glucose monitoring kit w/ device	3		
CAREONE INSULIN SYRINGES/ - insulin syringe/ needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
CAREONE LANCET SUPER THIN - lancets	2		
CAREONE LANCET THIN - lancets	2		
CAREONE LANCET ULTRA THIN - lancets	2		
CAREONE UNIFINE PENTIPS P - insulin pen needle 29 g x 12 mm (1/2")	2		
CAREONE UNIFINE PENTIPS P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CAREONE UNIFINE PENTIPS P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CAREONE UNIFINE PENTIPS P - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
CAREONE UNIFINE PENTIPS 2 - insulin pen needle 29 g x 12 mm (1/2")	2		
CAREONE UNIFINE PENTIPS 3 - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CAREPOINT PRECISION POLY - needle (disp) 18 x 1", 18 x 1-1/2", 20 x 1", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 1", 23 x 1-1/2", 25 x 5/8", 25 x 1", 25 x 1-1/2", 27 x 1/2", 30 x 1/2"	3		
CAREPOINT PRECISION SYRIN - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8"	3		
CAREPOINT SAFETY 1ST NEED - needle (disp) 23 x 1", 23 x 1-1/2", 25 x 5/8", 25 x 1", 25 x 1-1/2"	3		
CARESENS LANCETS - lancets	2		
CARESENS N GLUCOSE MONITO - blood glucose monitoring devices	3		
CARESENS N VOICE BLOOD GL - blood glucose monitoring devices	3		
CARETOUCH BLOOD GLUCOSE M - blood glucose monitoring kit w/ device	3		
CARETOUCH HYPODERMIC NEED - needle (disp) 18 x 1-1/2", 20 x 1", 22 x 1", 23 x 1", 23 x 1-1/2", 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 1", 27 x 1-1/2"	3		
CARETOUCH INSULIN SYRINGE - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 5/16", u-100 1 ml 29 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
CARETOUCH LANCING DEVICE - lancet devices	2		
CARETOUCH PEN NEEDLE 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		
CARETOUCH PEN NEEDLE 33GX - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
CARETOUCH PEN NEEDLES 31 - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
CARETOUCH PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
CARETOUCH PEN NEEDLES 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
CARETOUCH SAFETY LANCETS/ - lancets	2		
CARETOUCH TWIST LANCETS M - lancets	2		
CARETOUCH TWIST LANCETS 2 - lancets	2		
CARETOUCH TWIST LANCETS 3 - lancets	2		
CAYA - diaphragm arc-spring	3		
CHEMSTRIP BG LOG BOOK - blood glucose monitoring misc.	3		
CLEANLET LANCETS 28G - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CLEVER CHEK AUTO CODE VOI - blood glucose monitoring devices	3		
CLEVER CHEK AUTO-CODE BLO - blood glucose monitoring devices	3		
CLEVER CHEK AUTO-CODE VOI - blood glucose monitoring devices	3		
CLEVER CHEK BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
CLEVER CHEK LANCETS ULTRA - lancets	2		
CLEVER CHOICE AUTO-CODE P - blood glucose monitoring devices	3		
CLEVER CHOICE COMFORT EZ - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
CLEVER CHOICE COMFORT EZ - insulin pen needle 29 g x 12 mm (1/2")	2		
CLEVER CHOICE COMFORT EZ - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLEVER CHOICE COMFORT EZ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLEVER CHOICE COMFORT EZ - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLEVER CHOICE COMFORT EZ - lancets	2		
CLEVER CHOICE MICRO BLOOD - blood glucose monitoring kit w/ device	3		
CLEVER CHOICE MINI BLOOD - blood glucose monitoring devices	3		
CLEVER CHOICE TALK BLOOD - blood glucose monitoring devices	3		
CLICKFINE PEN NEEDLE UNIV - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
CLICKFINE PEN NEEDLE 32GX - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CLICKFINE PEN NEEDLES 31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
CLICKFINE PEN NEEDLES 32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
CLICKFINE UNIVERSAL PEN N - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
COAGUCHEK LANCETS - lancets	2		
COMFORT ASSIST INSULIN SY - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
COMFORT ASSURED LANCETS M - lancets	2		
COMFORT ASSURED LANCETS S - lancets	2		
COMFORT EZ INSULIN SYRING - insulin syringe/ needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 31 x 5/16"	2		
COMFORT EZ MICRO/32G X 4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
COMFORT EZ SHORT/31G X 8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
COMFORT EZ/31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
COMFORT EZ/31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
COMFORT LANCETS - lancets	2		
COMFORT TOUCH LANCETS ULT - lancets	2		
COMFORT TOUCH PEN NEEDLES - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
COMFORT TOUCH PEN NEEDLES - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
COMFORT TOUCH PEN NEEDLES - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
COMFORT TOUCH PLUS SAFETY - lancets	2		
CONDOMS - condoms - male	3		
CONTOUR BLOOD GLUCOSE MON - blood glucose monitoring devices	2		
CONTOUR NEXT BLOOD GLUCOS - blood glucose monitoring kit w/ device	2		
CONTOUR NEXT EZ BLOOD GLU - blood glucose monitoring kit w/ device	2		
CONTOUR NEXT GEN BLOOD GL - blood glucose monitoring kit w/ device	2		
CONTOUR NEXT LINK BLOOD G - blood glucose monitoring kit w/ device	2		

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CONTOUR NEXT LINK WIRELES - blood glucose monitoring kit w/ device	2		
CONTOUR NEXT LINK 2.4 WIR - blood glucose monitoring kit w/ device	3		
CONTOUR NEXT ONE BLOOD GL - blood glucose monitoring devices	2		
CONTOUR NEXT ONE BLOOD GL - blood glucose monitoring kit	2		
COOL BLOOD GLUCOSE MONITO - blood glucose monitoring devices	3		
COOL BLOOD GLUCOSE MONITO - blood glucose monitoring kit w/ device	3		
CVS ADVANCED GLUCOSE METE - blood glucose monitoring kit w/ device	3		
CVS LANCETS MICRO THIN 33 - lancets	2		
CVS LANCETS MICRO-THIN 33 - lancets	2		
CVS LANCETS ORIGINAL - lancets	2		
CVS LANCETS THIN 26G - lancets	2		
CVS LANCETS ULTRA THIN 30 - lancets	2		
CVS LANCETS ULTRA-THIN 30 - lancets	2		
CVS LANCETS 21G - lancets	2		
CVS LANCING DEVICE - lancet devices	2		
CVS ULTRA THIN LANCETS - lancets	2		
D-CARE GLUCOMETER KIT/GLU - blood glucose monitoring kit w/ device	3		
DIABETES MONITORING DIGIT - blood glucose monitor kit w/ monitor device & digital app	3		
DIATHRIVE BLOOD GLUCOSE M - blood glucose monitoring devices	3		
DIATHRIVE LANCETS - lancets	2		
DIATHRIVE LANCETS ULTRA T - lancets	2		
DIATHRIVE LANCING DEVICE - lancet devices	2		
DIATHRIVE PEN NEEDLE/31 G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
DIATHRIVE PEN NEEDLE/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
DIATHRIVE PEN NEEDLE/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
DIATHRIVE+ BLOOD GLUCOSE - blood glucose monitoring devices	3		
DIATRUE PLUS BLOOD GLUCOS - blood glucose monitoring devices	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 3/8", 26 x 1/2", 26 x 5/8", 27 x 1/2", 27 x 1-1/4", 27 x 1-1/2", 30 x 1/2", 30 x 1", 31 x 5/16" (8 mm), 32 x 5/16" (8 mm)			
EASY TOUCH INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 27 x 1/2", u-100 1 ml 27 x 5/8", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
EASY TOUCH LANCETS 21G/PR - lancets	2		
EASY TOUCH LANCETS 23G/PR - lancets	2		
EASY TOUCH LANCETS 26G/PR - lancets	2		
EASY TOUCH LANCETS 26G/PU - lancets	2		
EASY TOUCH LANCETS 28G/PR - lancets	2		
EASY TOUCH LANCETS 28G/PU - lancets	2		
EASY TOUCH LANCETS 28G/TW - lancets	2		
EASY TOUCH LANCETS 30G/BU - lancets	2		
EASY TOUCH LANCETS 30G/PR - lancets	2		
EASY TOUCH LANCETS 30G/PU - lancets	2		
EASY TOUCH LANCETS 30G/TW - lancets	2		
EASY TOUCH LANCETS 32G/PR - lancets	2		
EASY TOUCH LANCETS 32G/PU - lancets	2		
EASY TOUCH LANCETS 32G/TW - lancets	2		
EASY TOUCH LANCETS 33G/TW - lancets	2		
EASY TOUCH LANCING DEVICE - lancet devices	2		
EASY TOUCH PEN NEEDLE 30 - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
EASY TOUCH PEN NEEDLE/30 - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
EASY TOUCH PEN NEEDLES 29 - insulin pen needle 29 g x 12 mm (1/2")	2		
EASY TOUCH PEN NEEDLES 31 - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
EASY TOUCH PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
EASY TOUCH PEN NEEDLES/31 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
EASY TOUCH SAFETY LANCETS - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
EASYPOINT NEEDLE/22G X 1" - needle (disp) 22 x 1"	3		
EASYPRO BLOOD GLUCOSE MON - blood glucose monitoring kit w/ device	3		
EASYPRO PLUS - blood glucose monitoring kit w/ device	3		
ELEMENT AUTOCODE SYSTEM - blood glucose monitoring kit w/ device	3		
ELEMENT COMPACT BLOOD GLU - blood glucose monitoring devices	3		
ELEMENT COMPACT V BLOOD - blood glucose monitoring devices	3		
ELEMENT PLUS BLOOD GLUCOS - blood glucose monitoring devices	3		
EMBRACE BLOOD GLUCOSE MON - blood glucose monitoring devices	3		
EMBRACE EVO BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
EMBRACE EVO COMPACT BLOOD - blood glucose monitoring devices	3		
EMBRACE LANCETS ULTRA THI - lancets	2		
EMBRACE LANCING DEVICE WI - lancet devices	2		
EMBRACE PEN NEEDLES/29G X - insulin pen needle 29 g x 12 mm (1/2")	2		
EMBRACE PEN NEEDLES/30G X - insulin pen needle 30 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
EMBRACE PEN NEEDLES/31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
EMBRACE PEN NEEDLES/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
EMBRACE PRESSURE ACTIVATE - lancets	2		
EMBRACE PRO BLOOD GLUCOSE - blood glucose monitoring devices	3		
EMBRACE TALK BLOOD GLUCOS - blood glucose monitoring devices	3		
EMBRACE TALK BLOOD GLUCOS - blood glucose monitoring kit w/ device	3		
EQL COLOR LANCETS MICRO T - lancets	2		
EQL COLOR LANCETS 21G - lancets	2		
EQL INSULIN SYRINGE/0.3ML - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GLOBAL EASE INJECT PEN NE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
GLOBAL EASY GLIDE INSULIN - insulin syringe/needle u-100 0.3 ml 31 x 15/64", u-100 0.3 ml 31 x 5/16", u-100 1/2 ml 31 x 15/64", u-100 1 ml 31 x 15/64"	2		
GLOBAL EASY GLIDE PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
GLOBAL INJECT EASE INSULI - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GLOBAL INJECT EASE LANCET - lancets	2		
GLOBAL INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 30 x 1/2"	2		
GLOBAL INSULIN SYRINGES/U - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
GLOBAL LANCING DEVICE - lancet devices	2		
GLUCO PERFECT 3 BLOOD GLU - blood glucose monitoring devices	3		
GLUCOCARD EXPRESSION AUDI - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE - blood glucose monitoring devices	3		
GLUCOCARD SHINE - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE CONNEX BL - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE EXPRESS B - blood glucose monitoring kit w/ device	3		
GLUCOCARD SHINE XL - blood glucose monitoring devices	3		
GLUCOCARD VITAL BLOOD GLU - blood glucose monitoring kit w/ device	3		
GLUCOCARD X-METER - blood glucose monitoring kit w/ device	3		
GLUCOCARD 01 BLOOD GLUCOS - blood glucose monitoring devices	3		
GLUCOCARD 01 BLOOD GLUCOS - blood glucose monitoring kit w/ device	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GLUCOCARD 01-MINI BLOOD G - blood glucose monitoring kit w/ device	3		
GLUCOCOM AUTOLINK TELEMON - blood glucose monitoring misc.	3		
GLUCOCOM BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
GLUCOCOM BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
GLUCOCOM LANCETS 28G - lancets	2		
GLUCOCOM LANCETS 30G - lancets	2		
GLUCOCOM LANCETS 33G - lancets	2		
GLUCONAVII BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
GLUCOPRO INSULIN SYRINGE/ - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GNP CLICKFINE UNIVERSAL P - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
GNP EASY TOUCH GLUCOSE MO - blood glucose monitoring devices	3		
GNP INSULIN SYRINGE/0.3ML - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
GNP INSULIN SYRINGE/0.5ML - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
GNP INSULIN SYRINGE/1ML/2 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
GNP INSULIN SYRINGE/1ML/3 - insulin syringe/needle u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
GNP INSULIN SYRINGES/0.3M - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
GNP INSULIN SYRINGES/1/2M - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
GNP INSULIN SYRINGES/1ML/ - insulin syringe/needle u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2		
GNP INSULIN SYRINGES/3ML/ - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
GNP LANCETS THIN 26G - lancets	2		
GNP LANCETS 21G - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
GNP LANCING SYSTEM DEVICE - lancet devices	2		
GNP STERILE LANCETS 28G - lancets	2		
GNP STERILE LANCETS 30G - lancets	2		
GNP STERILE LANCETS 33G - lancets	2		
GNP TRUE METRIX AIR SELF - blood glucose monitoring kit w/ device	3		
GNP TRUE METRIX SELF MONI - blood glucose monitoring kit w/ device	3		
GNP ULTICARE PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
GNP ULTICARE PEN NEEDLES/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
GNP ULTIGUARD SAFEPACK/MI - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GNP ULTIGUARD SAFEPACK/SH - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
GNP ULTRA COMFORT INSULIN - insulin syringe/ needle u-100 1 ml 28 x 1/2"	2		
GOJJI LANCING DEVICE/CLEA - lancet devices	2		
GOJJI STERILE LANCETS 30G - lancets	2		
GOODSENSE CLICKFINE SAFET - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
GOODSENSE COLOR LANCETS M - lancets	2		
GOODSENSE LANCETS MICRO-T - lancets	2		
GOODSENSE LANCETS ULTRA-T - lancets	2		
GOODSENSE LANCING DEVICE - lancet devices	2		
GOODSENSE PEN NEEDLE/PENF - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
GOODSENSE PEN NEEDLE/PENF - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
GOODSENSE PREMIUM BLOOD - blood glucose monitoring kit w/ device	3		
H-E-B IN CONTROL PEN NEED - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
H-E-B IN CONTROL PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
H-E-B IN CONTROL UNIFINE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
HYPODERMIC NEEDLES 27GX1/ - needle (disp) 27 x 1/2"	3		
IGLUOSE BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
IN TOUCH - blood glucose monitoring devices	3		
IN TOUCH DIABETES MANAGEM - blood glucose monitoring misc.	3		
IN TOUCH LANCING DEVICE - lancet devices	2		
IN TOUCH STERILE LANCETS - lancets	2		
INCONTROL ULTICARE MINI P - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
INCONTROL ULTICARE MINI P - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
INFINITY BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
INFINITY VOICE - blood glucose monitoring kit w/ device	3		
INPEN 100/BLUE/LILLY/HUMA - injection device for insulin	3		
INPEN 100/BLUE/NOVOLOG/FI - injection device for insulin	3		
INPEN 100/GREY/LILLY/HUMA - injection device for insulin	3		
INPEN 100/GREY/NOVOLOG/FI - injection device for insulin	3		
INPEN 100/PINK/LILLY/HUMA - injection device for insulin	3		
INPEN 100/PINK/NOVOLOG/FI - injection device for insulin	3		
INSUL-TOTE - blood glucose monitoring supplies	3		
INSUL-TOTE JR - blood glucose monitoring supplies	3		
INSULIN SYRINGE 1ML/31G X - insulin syringe/needle u-100 1 ml 31 x 1/4" (6 mm)	2		
INSULIN SYRINGE/NEEDLE 0. - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
INSULIN SYRINGE/NEEDLE 1M - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
INSULIN SYRINGE/U-100/0.3 - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
INSULIN SYRINGE/U-100/0.5 - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
INSULIN SYRINGE/U-100/1ML - insulin syringe/needle u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
INSULIN SYRINGE/0.3ML/30G - insulin syringe/needle u-100 0.3 ml 30 x 5/16"	2		
INSULIN SYRINGE/0.3ML/31G - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
INSULIN SYRINGE/0.5ML/28G - insulin syringe/needle u-100 1/2 ml 28 x 1/2"	2		
INSULIN SYRINGE/0.5ML/30G - insulin syringe/needle u-100 1/2 ml 30 x 5/16"	2		
INSULIN SYRINGE/0.5ML/31G - insulin syringe/needle u-100 1/2 ml 31 x 5/16"	2		
INSULIN SYRINGE/1ML/29G X - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
INSULIN SYRINGE/1ML/30G X - insulin syringe/needle u-100 1 ml 30 x 5/16"	2		
INSULIN SYRINGES 0.3ML/31 - insulin syringe/needle u-100 0.3 ml 31 x 1/4" (6 mm)	2		
INSULIN SYRINGES 0.5ML/31 - insulin syringe/needle u-100 0.5 ml 31 x 1/4" (6 mm)	2		
INSULIN SYRINGES/U-100/0. - insulin syringe/needle u-100 1/2 ml 27 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
INSULIN SYRINGES/U-100/1M - insulin syringe/needle u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2		
INSUPEN PEN NEEDLES 32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
INSUPEN SENSITIVE 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
INSUPEN SENSITIVE 32GX8MM - insulin pen needle 32 g x 8 mm (1/3" or 5/16")	2		
INSUPEN ULTRAFIN 30GX8MM - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
INSUPEN ULTRAFIN 31GX6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
INSUPEN ULTRAFIN 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
INSUPEN 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MEIJER TRUERESULT BLOOD G - blood glucose monitoring kit w/ device	3		
MEIJER TRUETRACK BLOOD GL - blood glucose monitoring kit w/ device	3		
MEIJER TRUE2GO BLOOD GLUC - blood glucose monitoring kit w/ device	3		
MICRODOT BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
MICRODOT PEN NEEDLE/31G X - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
MICRODOT PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
MICRODOT PEN NEEDLE/33G X - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
MICROLET LANCETS - lancets	2		
MICROLET NEXT - lancet devices	2		
MINI LANCING DEVICE - lancet devices	2		
MM EASY TOUCH BLOOD GLUCO - blood glucose monitoring kit w/ device	3		
MM INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
MM LANCING DEVICE - lancet devices	2		
MM PEN NEEDLES 31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
MM PEN NEEDLES 31G X 3/16 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
MM PEN NEEDLES 31G X 5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
MM PEN NEEDLES 32G X 5/32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
MM TWIST LANCETS - lancets	2		
MONOJECT BLUNT CANNULA/20 - needle (disp) 20 x 1-1/2"	3		
MONOJECT BLUNT CANNULA/21 - needle (disp) 21 x 1"	3		
MONOJECT HYPO/ALUM HUB/LU - needle (disp) 14 x 1", 14 x 2", 16 x 5/8", 16 x 3/4", 16 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 22 x 1", 22 x 1-1/2", 23 x 1", 25 x 5/8", 25 x 1-1/4", 25 x 2", 27 x 1/2", 27 x 1-1/4"	3		
MONOJECT HYPO/ALUM HUB/LU - needle (disp) 18 x 1", 18 x 1-1/2", 20 x 1-1/2"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MONOJECT HYPO/ALUM HUB/16 - needle (disp) 16 x 1"	3		
MONOJECT HYPO/ALUM HUB/18 - needle (disp) 18 x 1-1/2"	2		
MONOJECT HYPO/POLYPROPYLE - needle (disp) 18 x 1", 18 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 3/4", 23 x 1", 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 1/2", 27 x 1/2", 30 x 3/4"	3		
MONOJECT HYPODERMIC NEEDL - needle (disp) 18 x 1", 27 x 1-1/2", 30 x 3/4"	3		
MONOJECT INSULIN SYRINGE - insulin syringe (disp) u-100 1 ml	2		
MONOJECT INSULIN SYRINGE/ - insulin syringe (disp) u-100 1 ml	2		
MONOJECT INSULIN SYRINGE/ - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 25 x 5/8", u-100 1 ml 27 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16"	2		
MONOJECT MAGELLAN SAFETY - needle (disp) 18 x 1", 18 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 5/8", 21 x 1", 21 x 1-1/2", 22 x 1", 22 x 1-1/2", 23 x 5/8", 23 x 1", 25 x 5/8", 25 x 1"	2		
MONOJECT MAGELLAN SAFETY - needle (disp) 19 x 1", 19 x 1-1/2"	3		
MONOJECT MEDICATION TRANS - hypodermic needles (disposable)	3		
MONOJECT STANDARD HYPODER - needle (disp) 14 x 1-1/2", 18 x 1", 18 x 1-1/2", 19 x 1", 19 x 1-1/2", 20 x 1", 20 x 1-1/2", 21 x 1", 21 x 1-1/2", 21 x 2", 22 x 1", 22 x 1-1/2", 23 x 1", 25 x 5/8", 25 x 1", 25 x 1-1/2", 26 x 1-1/2", 27 x 1/2"	3		
MONOJECT SYRINGE PHARMACY - syringe (disposable) 1 ml	2		
MONOJECT TB SYRINGE-NDL 1 - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2"	3		
MONOJECT TUBERCULIN SAFET - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8", 1 ml 28 x 1/2"	3		
MONOJECT TUBERCULIN SYRIN - syringe (disposable) 1 ml	2		
MONOJECT TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1 ml 25 x 5/8"	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
MONOJECT TUBERCULIN SYRIN - tuberculin/allergy syringe/needle (disp) 1 ml 26 x 3/8", 1 ml 27 x 1/2", 1 ml 28 x 1/2"	3		
MONOJECT ULTRA COMFORT IN - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 0.3 ml 31 x 5/16"	2		
MONOJECT 1ML LUER LOCK TU - syringe (disposable) 1 ml	2		
MONOLET LANCETS - lancets	2		
MONOLET OPD LANCETS - lancets	2		
MONOLETTOR SAFETY LANCETS - lancets	2		
MPD SAFETY LANCET 21G/1.8 - lancets	2		
MPD SAFETY LANCET 28G/1.8 - lancets	2		
MPD SAFETY LANCET 30G/1.8 - lancets	2		
MPD SAFETY LANCETS 23G/1. - lancets	2		
MS INSULIN SYRINGE/0.3ML/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
MS INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16"	2		
MS INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
MS INSULIN SYRINGE/1ML/30 - insulin syringe/needle u-100 1 ml 30 x 5/16"	2		
MS INSULIN SYRINGE/1ML/31 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2		
MULTI-LANCET DEVICE - lancet devices	2		
MYGLUCOHEALTH BLOOD GLUCO - blood glucose monitoring kit w/ device	3		
MYGLUCOHEALTH MGH SOFTLAN - lancets	2		
NOVA MAX BLOOD GLUCOSE MO - blood glucose monitoring devices	3		
NOVA MAX BLOOD GLUCOSE MO - blood glucose monitoring kit w/ device	3		
NOVA SAFETY LANCETS 23G - lancets	2		
NOVA SAFETY LANCETS 28G - lancets	2		
NOVA SUREFLEX LANCETS - lancets	2		
NOVA SUREFLEX LANCING DEV - lancet devices	2		
NOVOFINE AUTOCOVER PEN NE - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PC UNIFINE PENTIPS 31G X - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PEN NEEDLES 30GX5MM - insulin pen needle 30 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 30GX8MM - insulin pen needle 30 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX5/16" - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 31GX6MM (1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 31GX8MM (5/16 - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES 32G X 5MM - insulin pen needle 32 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES 32G X 6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES 33G X 5/32" - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
PEN NEEDLES/29G X 1/2" - insulin pen needle 29 g x 12 mm (1/2")	2		
PEN NEEDLES/31G X 1/4" - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PEN NEEDLES/31G X 3/16" - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PEN NEEDLES/31G X 5/16" - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PEN NEEDLES/31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PEN NEEDLES/32G X 5/32" - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PEN-TOTE - blood glucose monitoring supplies	3		
PENTIPS 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PENTIPS 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PENTIPS 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PENTIPS 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PENTIPS 31GX5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PENTIPS 31GX6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PENTIPS 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PENTIPS 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PENTIPS 32GX4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PENTIPS 32GX6MM - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
PERFECT LANCETS 30G - lancets	2		
PERFECT PRESSURE ACTIVATE - lancets	2		
PHARMACIST CHOICE AUTOCOD - blood glucose monitoring kit w/ device	3		
PHARMACIST CHOICE MINI BL - blood glucose monitoring devices	3		
PHARMACIST CHOICE SELECT - lancets	2		
PHARMACIST CHOICE ULTRA T - lancets	2		
PHARMACY COUNTER LANCETS - lancets	2		
PIP BLOOD GLUCOSE MONITOR - blood glucose monitoring devices	3		
PIP LANCETS/28G - lancets	2		
PIP LANCETS/30G - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PIP PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PIP PEN NEEDLES 32G X 4MM - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
POCKETCHEM EZ BLOOD GLUCO - blood glucose monitoring kit w/ device	3		
POGO AUTOMATIC BLOOD GLUC - blood glucose monitoring devices	3		
POLY HUB NEEDLE/18G X 1-1 - needle (disp) 18 x 1-1/2"	3		
POLY HUB NEEDLE/18G X 1" - needle (disp) 18 x 1"	3		
POLY HUB NEEDLE/21G X 1-1 - needle (disp) 21 x 1-1/2"	3		
POLY HUB NEEDLE/21G X 1" - needle (disp) 21 x 1"	3		
POLY HUB NEEDLE/22G X 1-1 - needle (disp) 22 x 1-1/2"	3		
POLY HUB NEEDLE/22G X 1" - needle (disp) 22 x 1"	3		
POLY HUB NEEDLE/23G X 1-1 - needle (disp) 23 x 1-1/2"	3		
POLY HUB NEEDLE/23G X 1" - needle (disp) 23 x 1"	3		
POLY HUB NEEDLE/25G X 1-1 - needle (disp) 25 x 1-1/2"	3		
POLY HUB NEEDLE/25G X 1" - needle (disp) 25 x 1"	3		
POLY HUB NEEDLE/25G X 5/8 - needle (disp) 25 x 5/8"	3		
POLY HUB NEEDLE/27G X 1-1 - needle (disp) 27 x 1-1/4"	3		
POLY HUB NEEDLE/27G X 1/2 - needle (disp) 27 x 1/2"	3		
POLY HUB NEEDLE/30G X 1/2 - needle (disp) 30 x 1/2"	3		
PRECISION SURE-DOSE INSUL - insulin syringe/ needle u-100 0.3 ml 30 x 5/16"	2		
PRECISION THINS GP LANCET - lancets	2		
PRECISION XTRA - blood glucose monitoring kit w/ device	3		
PREFERRED PLUS INSULIN SY - insulin syringe/ needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16"	2		
PREFERRED PLUS LANCETS CO - lancets	2		
PREFERRED PLUS LANCETS SU - lancets	2		
PREFERRED PLUS LANCETS TH - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PREFERRED PLUS UNIFINE PE - insulin pen needle 29 g x 12 mm (1/2")	2		
PREFERRED PLUS UNIFINE PE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PREFERRED PLUS UNIFINE PE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PREVENT DROPSAFE SAFETY P - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PREVENT SAFETY PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PRO COMFORT INSULIN SYRIN - insulin syringe/ needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16"	2		
PRO COMFORT PEN NEEDLES/ - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PRO COMFORT PEN NEEDLES/ - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
PRO COMFORT SAFETY LANCET - lancets	2		
PRO VOICE V8 BLOOD GLUCOS - blood glucose monitoring devices	3		
PRO VOICE V9 BLOOD GLUCOS - blood glucose monitoring devices	3		
PRODIGY AUTOCODE BLOOD GL - blood glucose monitoring devices	3		
PRODIGY AUTOCODE BLOOD GL - blood glucose monitoring kit w/ device	3		
PRODIGY INSULIN SYRINGE/U- - insulin syringe/needle u-100 0.3 ml 31 x 5/16"	2		
PRODIGY INSULIN SYRINGE/1 - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1 ml 28 x 1/2"	2		
PRODIGY LANCING DEVICE - lancet devices	2		
PRODIGY NO CODING BLOOD G - blood glucose monitoring kit w/ device	3		
PRODIGY POCKET BLOOD GLUC - blood glucose monitoring kit w/ device	3		
PRODIGY PRESSURE ACTIVATE - lancets	2		
PRODIGY SAFETY LANCETS - lancets	2		
PRODIGY TWIST TOP LANCETS - lancets	2		
PRODIGY VOICE BLOOD GLUCO - blood glucose monitoring kit w/ device	3		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
PSS SELECT GP LANCETS - lancets	2		
PSS SELECT SAFETY LANCETS - lancets	2		
PURE COMFORT PEN NEEDLE 3 - insulin pen needle 32 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
PURE COMFORT PEN NEEDLE/3 - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16")	2		
PURE COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
PURE COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
PX ADVANCED LANCING DEVIC - lancet devices	2		
PX EXTRA SHORT PEN NEEDLE - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		
PX INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 1/2 ml 30 x 1/2"	2		
PX LANCET AUTO INJECTOR - lancet devices	2		
PX LANCETS MICROTHIN 33G - lancets	2		
PX LANCETS ULTRA THIN - lancets	2		
PX LANCETS ULTRA THIN 28G - lancets	2		
PX MINI PEN NEEDLES 31GX5 - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
PX PEN NEEDLE 29GX12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
PX PEN NEEDLE 31GX8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
PX SHORTLENGTH PEN NEEDLE - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
QC ADVANCED LANCING DEVIC - lancet devices	2		
QC INSULIN SYRINGE/0.3ML/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
QC INSULIN SYRINGE/1ML/31 - insulin syringe/needle u-100 1 ml 31 x 5/16"	2		
QC LANCETS SUPER THIN - lancets	2		
QC LANCETS ULTRA THIN - lancets	2		
QC PEN NEEDLES 29G X 12MM - insulin pen needle 29 g x 12 mm (1/2")	2		
QC PEN NEEDLES 31G X 6MM - insulin pen needle 31 g x 6 mm (1/4" or 15/64")	2		

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QC PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
QC UNIFINE PENTIPS 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
QC UNILET LANCETS 28G/ULT - lancets	2		
QC UNILET LANCETS 33G/MIC - lancets	2		
QUICKTEK - blood glucose monitoring kit	3		
QUICKTEK - blood glucose monitoring kit w/ device	3		
QUINTET AC BLOOD GLUCOSE - blood glucose monitoring devices	3		
QUINTET BLOOD GLUCOSE MON - blood glucose monitoring devices	3		
RA E-ZJECT LANCETS THIN 2 - lancets	2		
RA E-ZJECT LANCETS ULTRA - lancets	2		
RA E-ZJECT LANCETS 28G - lancets	2		
RA INSULIN SYRINGE/U-100/ - insulin syringe/needle u-100 1/2 ml 30 x 5/16", u-100 1 ml 30 x 5/16"	2		
RA INSULIN SYRINGE/0.5ML/ - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
RA INSULIN SYRINGE/1ML/29 - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
RA PEN NEEDLES 31G X 5MM - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
RA PEN NEEDLES 31G X 8MM - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
RAYA SURE PEN NEEDLE 29G - insulin pen needle 29 g x 12 mm (1/2")	2		
RAYA SURE PEN NEEDLE 31G - insulin pen needle 31 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
READYLANCE SAFETY LANCETS - lancets	2		
REALITY INSULIN SYRINGE/U - insulin syringe/needle u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1 ml 28 x 1/2", u-100 1 ml 29 x 1/2"	2		
REALITY LANCETS - lancets	2		
REALITY LATEX CONDOMS/LUB - condoms latex lubricated	3		
REALITY LATEX/ULTRA TEXTU - condoms latex lubricated	3		
REALITY LATEX/ULTRA THIN - condoms latex lubricated	3		
REALITY TRIGGER LANCETS - lancets	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
TRUE COMFORT PRO PEN NEED - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
TRUE COMFORT PRO PEN NEED - insulin pen needle 33 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
TRUE COMFORT SAFETY LANCE - lancets	2		
TRUE COMFORT SAFETY PEN N - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
TRUE COMFORT SAFETY PEN N - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
TRUE COMFORT TWIST TOP LA - lancets	2		
TRUE FOCUS BLOOD GLUCOSE - blood glucose monitoring devices	3		
TRUE METRIX - blood glucose monitoring devices	3		
TRUE METRIX AIR BLOOD GLU - blood glucose monitoring devices	3		
TRUE METRIX AIR BLOOD GLU - blood glucose monitoring kit w/ device	3		
TRUE METRIX AIR W/BLUETOOTH - blood glucose monitoring kit w/ device	3		
TRUE METRIX BLOOD GLUCOSE - blood glucose monitoring kit w/ device	3		
TRUE METRIX GO BLOOD GLUC - blood glucose monitoring kit w/ device	3		
TRUEDRAW LANCING DEVICE - lancet devices	2		
TRUEPLUS INSULIN SYRINGE - insulin syringe/needle u-100 1 ml 29 x 1/2"	2		
TRUEPLUS INSULIN SYRINGE/ - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 28 x 1/2", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 28 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
TRUEPLUS LANCETS 26G - lancets	2		
TRUEPLUS LANCETS 28G - lancets	2		
TRUEPLUS LANCETS 28G SUPE - lancets	2		
TRUEPLUS LANCETS 30G - lancets	2		
TRUEPLUS LANCETS 30G ULTR - lancets	2		
TRUEPLUS LANCETS 33G - lancets	2		
TRUEPLUS LANCETS 33G MICR - lancets	2		
TRUEPLUS PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
ULTIGUARD SAFEPACK INSULI - insulin syringe/ needle u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTIGUARD SAFEPACK MINI P - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTIGUARD SAFEPACK PEN NE - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTIGUARD SAFEPACK/MICRO - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTIGUARD SAFEPACK/MINI P - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
ULTIGUARD SAFEPACK/MINI P - insulin pen needle 32 g x 6 mm (1/4" or 15/64")	2		
ULTIGUARD SAFEPACK/SHORT - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ULTIGUARD SAFEPACK/SYRING - insulin syringe/ needle u-100 1/2 ml 31 x 5/16"	2		
ULTILET CLASSIC LANCETS - lancets	2		
ULTILET LANCETS - lancets	2		
ULTILET LANCETS 33G - lancets	2		
ULTILET PEN NEEDLE 29GX12 - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTILET PEN NEEDLE 31GX5M - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTILET PEN NEEDLE 31GX8M - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ULTILET PEN NEEDLE 32GX4M - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTILET SAFETY LANCETS 21 - lancets	2		
ULTILET SAFETY LANCETS 23 - lancets	2		
ULTILET SHORT PEN NEEDLES - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
ULTRA COMFORT INSULIN SYR - insulin syringe/ needle u-100 0.3 ml 30 x 5/16"	2		
ULTRA FLO INSULIN PEN NEE - insulin pen needle 29 g x 12 mm (1/2")	2		
ULTRA FLO INSULIN PEN NEE - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 8 mm (1/3" or 5/16")	2		
ULTRA FLO INSULIN PEN NEE - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTRA FLO INSULIN PEN NEE - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		

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ULTRA FLO INSULIN SYRINGE - insulin syringe/needle u-100 0.3 ml 29 x 1/2", u-100 0.3 ml 30 x 5/16", u-100 0.3 ml 30 x 1/2", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTRA INSULIN SYRINGE/U-1 - insulin syringe/needle u-100 1/2 ml 29 x 1/2"	2		
ULTRA THIN LANCETS 28G - lancets	2		
ULTRA THIN LANCETS 31G - lancets	2		
ULTRA THIN PEN NEEDLES 32 - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		
ULTRA-THIN II AUTO LANCET - lancets	2		
ULTRA-THIN II INSULIN SYR - insulin syringe/needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 29 x 1/2", u-100 1/2 ml 30 x 5/16", u-100 1 ml 29 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTRA-THIN II LANCETS 28G - lancets	2		
ULTRA-THIN II LANCETS 30G - lancets	2		
ULTRA-THIN II MINI PEN NE - insulin pen needle 31 g x 5 mm (1/5" or 3/16")	2		
ULTRA-THIN II PEN NEEDLES - insulin pen needle 29 g x 12.7 mm (1/2")	2		
ULTRA-THIN II PEN NEEDLES - insulin pen needle 31 g x 8 mm (1/3" or 5/16")	2		
ULTRACARE INSULIN SYRINGE - insulin syringe/ needle u-100 0.3 ml 30 x 5/16", u-100 1/2 ml 31 x 5/16", u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 5/16", u-100 1 ml 30 x 1/2", u-100 1 ml 31 x 5/16", u-100 0.3 ml 31 x 5/16"	2		
ULTRACARE PEN NEEDLES/31G - insulin pen needle 31 g x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
ULTRACARE PEN NEEDLES/32G - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 5 mm (1/5" or 3/16"), x 6 mm (1/4" or 15/64")	2		
ULTRACARE PEN NEEDLES/33G - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
ULTRATRAK ACTIVE - blood glucose monitoring devices	3		
UNIFINE PEN NEEDLE/32G X - insulin pen needle 32 g x 4 mm (1/6" or 5/32")	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
UNILET COMFORTOUCH LANCET - lancets	2		
UNILET EXCELITE - lancets	2		
UNILET EXCELITE II - lancets	2		
UNILET G.P. LANCET - lancets	2		
UNILET G.P. SUPERLITE LAN - lancets	2		
UNILET GP 28 ULTRA THIN - lancets	2		
UNILET LANCET - lancets	2		
UNILET LANCETS MICRO-THIN - lancets	2		
UNILET LANCETS SUPER-THIN - lancets	2		
UNILET LANCETS ULTRA-THIN - lancets	2		
UNILET SUPERLITE LANCET - lancets	2		
UNISTIK PRO SAFETY LANCET - lancets	2		
UNISTIK SAFETY LANCETS 28 - lancets	2		
UNISTIK SAFETY LANCETS 30 - lancets	2		
UNISTIK TOUCH SAFETY LANC - lancets	2		
UNISTIK 3 GENTLE - lancets	2		
UNIVERSAL 1 LANCETS THIN - lancets	2		
UNIVERSAL 1 LANCETS ULTRA - lancets	2		
UNIVERSAL 1 LANCETS/33G/M - lancets	2		
V-GO 20 - insulin infusion disposable pump kit 20 unit/24hr	3		QL (30 systems/30 days)
V-GO 30 - insulin infusion disposable pump kit 30 unit/24hr	3		QL (30 systems/30 days)
V-GO 40 - insulin infusion disposable pump kit 40 unit/24hr	3		QL (30 systems/30 days)
VALUE HEALTH INSULIN SYRI - insulin syringe/needle u-100 1/2 ml 29 x 1/2", u-100 1 ml 29 x 1/2"	2		
VALUE PLUS LANCETS STANDA - lancets	2		
VALUE PLUS LANCETS SUPER - lancets	2		
VALUE PLUS LANCETS THIN 2 - lancets	2		
VALUE PLUS LANCING DEVICE - lancet devices	2		
VALUMARK LANCET SUPER THI - lancets	2		
VALUMARK LANCET ULTRA THI - lancets	2		
VALUMARK PEN NEEDLES 29GX - insulin pen needle 29 g x 12 mm (1/2")	2		
VALUMARK PEN NEEDLES 31G - insulin pen needle 31 g x 6 mm (1/4" or 15/64"), x 8 mm (1/3" or 5/16")	2		
VANISHPOINT INSULIN SYRIN - insulin syringe/needle u-100 1/2 ml 30 x 5/16", u-100 1/2 ml 30 x 1/2", u-100 1 ml 30 x 3/16" (5 mm), u-100 0.5 ml 30 x 3/16" (5	2		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
1ST TIER UNIFINE PENTIPS - insulin pen needle 32 g x 4 mm (1/6" or 5/32"), x 6 mm (1/4" or 15/64")	2		
1ST TIER UNIFINE PENTIPS - insulin pen needle 33 g x 4 mm (1/6" or 5/32")	2		
1ST TIER UNILET COMFORTOU - lancets	2		
10ML SYRINGE LUER-LOK TIP - syringe (disposable) 10 ml	2		
ASSORTED CLASSES			
ASTAGRAF XL - tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	3		
azathioprine tab 50 mg (Imuran)	1		
BENLYSTA - belimumab subcutaneous solution auto-injector 200 mg/ml	3	SP	PA, LD, QL (4 pens/28 days)
BENLYSTA - belimumab subcutaneous solution prefilled syringe 200 mg/ml	3	SP	PA, LD, QL (4 syringes/28 days)
CELLCEPT - mycophenolate mofetil cap 250 mg	3		
CELLCEPT - mycophenolate mofetil tab 500 mg	3		
CELLCEPT - mycophenolate mofetil for oral susp 200 mg/ml	3		
cyclosporine cap 25 mg, 100 mg (Sandimmune)	1		
cyclosporine modified cap 25 mg, 100 mg (Neoral)	1		
cyclosporine modified cap 50 mg	1		
cyclosporine modified oral soln 100 mg/ml (Neoral)	1		
ENSPRYNG - satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	3	SP	PA, LD, QL (1 syringe/28 days)
ENVARUSUS XR - tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	3		
everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg (Zortress)	1		
IMURAN - azathioprine tab 50 mg	3		
irrigation solution, physiological	1		
JOENJA - leniolisib phosphate tab 70 mg	3	SP	PA, LD, QL (60 tablets/30 days)
lactated ringer's for irrigation	1		
lenalidomide caps 2.5 mg (Revlimid)	1	SP	PA, QL (30 capsules/30 days)
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg (Revlimid)	1	SP	PA, QL (30 capsules/30 days)
LOKELMA - sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	2		
LUPKYNIS - voclosporin cap 7.9 mg	3	SP	PA, LD, QL (60 capsules/30 days)
mycophenolate mofetil cap 250 mg (Cellcept)	1		
mycophenolate mofetil for oral susp 200 mg/ml (Cellcept)	1		

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Drug Name	Drug Tier	Specialty	Requirements/Limits
mycophenolate mofetil tab 500 mg (Cellcept)	1		
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) (Myfortic)	1		
MYFORTIC - mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)	3		
NEORAL - cyclosporine modified cap 25 mg, 100 mg	3		
NEORAL - cyclosporine modified oral soln 100 mg/ml	3		
penicillamine tab 250 mg (Depen titratabs)	1	SP	PA
PROGRAF - tacrolimus cap 0.5 mg, 1 mg, 5 mg	3		
PROGRAF - tacrolimus packet for susp 0.2 mg, 1 mg	3		
RAPAMUNE - sirolimus tab 0.5 mg, 1 mg, 2 mg	3		
RAPAMUNE - sirolimus oral soln 1 mg/ml	3		
REVLIMID - lenalidomide caps 2.5 mg	2	SP	PA, LD, QL (30 capsules/30 days)
REVLIMID - lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	2	SP	PA, LD, QL (30 capsules/30 days)
REZUROCK - belumosudil mesylate tab 200 mg	3	SP	PA, LD, QL (30 tablets/30 days)
ringer's solution for irrigation	1		
SANDIMMUNE - cyclosporine cap 25 mg, 100 mg	3		
SANDIMMUNE - cyclosporine oral soln 100 mg/ml	3		
sirolimus oral soln 1 mg/ml (Rapamune)	1		
sirolimus tab 0.5 mg, 1 mg, 2 mg (Rapamune)	1		
sodium polystyrene sulfonate powder	1		
SPS - sodium polystyrene sulfonate oral susp 15 gm/60ml	3		
SYPRINE - trientine hcl cap 250 mg	3	SP	PA
tacrolimus cap 0.5 mg, 1 mg, 5 mg (Prograf)	1		
THALOMID - thalidomide cap 50 mg, 100 mg	2	SP	PA, LD, QL (30 capsules/30 days)
THALOMID - thalidomide cap 150 mg, 200 mg	2	SP	PA, LD, QL (60 capsules/30 days)
trientine hcl cap 250 mg (Syprine)	1	SP	PA
VELTASSA - patiomer sorbitex calcium for susp packet 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	2		
water for irrigation, sterile irrigation soln	1		
ZOKINVY - lonafarnib cap 50 mg, 75 mg	2	SP	PA, LD
ZORTRESS - everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg	3		

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INDEX

A

abacavir sulfate-lamivudine tab 600-300 mg.....	5	acyclovir susp 200 mg/5ml.....	5
abacavir sulfate soln 20 mg/ml (base equiv).....	5	acyclovir tab 400 mg, 800 mg.....	5
abacavir sulfate tab 300 mg (base equiv).....	5	ADACEL.....	16
abiraterone acetate tab 250 mg.....	18	adapalene gel 0.1%.....	101
abiraterone acetate tab 500 mg.....	18	ADBRY.....	101
ABOUTTIME PEN NEEDLE 32G.....	116	ADDERALL.....	67
ABOUTTIME PEN NEEDLES 30G.....	116	ADDERALL XR.....	67
ABOUTTIME PEN NEEDLES 31G.....	116	adefovir dipivoxil tab 10 mg.....	5
acamprosate calcium tab delayed release 333 mg.....	69	ADEMPAS.....	48
acarbose tab 25 mg, 50 mg, 100 mg.....	30	ADJUSTABLE LANCING DEVICE.....	116
ACCOLATE.....	51	ADTHYZA.....	35
ACCU-CHEK AVIVA PLUS.....	108	ADVAIR DISKUS.....	51
ACCU-CHEK COMPACT STRIPS.....	108	ADVAIR HFA.....	51
ACCU-CHEK COMPACT TEST DR.....	108	ADVANCED MOBILE LANCET 30.....	116
ACCU-CHEK FASTCLIX LANCET.....	116	ADVANCE INTUITION BLOOD G.....	116
ACCU-CHEK GUIDE.....	108	ADVANCE INTUITION TEST ST.....	108
ACCU-CHEK GUIDE ME.....	116	ADVANCE MICRO-DRAW METER.....	116
ACCU-CHEK SAFE-T-PRO LANC.....	116	ADVANCE MICRO-DRAW TEST S.....	108
ACCU-CHEK SAFE-T-PRO PLUS.....	116	ADVATE.....	92
ACCU-CHEK SMARTVIEW STRIP.....	108	ADVOCATE BLOOD GLUCOSE MO.....	116
ACCU-CHEK SOFTCLIX LANCET.....	116	ADVOCATE INSULIN PEN NEED.....	116
ACCURETIC.....	42	ADVOCATE INSULIN SYRINGE/.....	117
ACCUTREND GLUCOSE.....	108	ADVOCATE LANCETS.....	117
acebutolol hcl cap 200 mg, 400 mg.....	39	ADVOCATE LANCETS 30G.....	117
ACETAMINOPHEN/CODEINE.....	72	ADVOCATE LANCING DEVICE.....	117
acetaminophen w/ codeine tab 300-15 mg.....	72	ADVOCATE RAPID-SAFE LANCI.....	117
acetaminophen w/ codeine tab 300-30 mg.....	72	ADVOCATE REDI-CODE.....	108
acetaminophen w/ codeine tab 300-60 mg.....	72	ADVOCATE REDI-CODE/TALKIN.....	117
acetazolamide cap er 12hr 500 mg.....	45	ADVOCATE REDI-CODE+ BLOOD.....	117
acetazolamide tab 125 mg, 250 mg.....	45	ADVOCATE REDI-CODE+ TEST.....	108
acetic acid irrigation soln 0.25%.....	60	ADVOCATE SAFETY LANCETS 2.....	117
acetic acid otic soln 2%.....	100	ADVOCATE TEST STRIPS.....	108
acetylcysteine inhal soln 10%, 20%.....	50	ADYNOVATE.....	92
acitretin cap 10 mg, 17.5 mg, 25 mg.....	101	AEMCOLO.....	11
ACTEMRA.....	75	AEROCHAMBER MINI AEROSOL.....	117
ACTEMRA ACTPEN.....	75	AEROCHAMBER MV.....	117
ACTHAR.....	35	AEROCHAMBER PLUS FLOW-VU.....	117
ACTHIB.....	13	AEROCHAMBER PLUS FLOW-VU/.....	117
ACTI-LANCE LANCETS 28G.....	116	AEROCHAMBER Z-STAT PLUS/F.....	117
ACTI-LANCE LITE SAFETY LA.....	116	AEROCHAMBER Z-STAT PLUS/L.....	117
ACTI-LANCE SPECIAL SAFETY.....	116	AEROCHAMBER Z-STAT PLUS/M.....	117
ACTI-LANCE UNIVERSAL SAFE.....	116	AEROCHAMBER Z-STAT PLUS/S.....	117
ACTIMMUNE.....	18	AEROCHAMBER Z-STAT PLUS V.....	117
ACTIQ.....	73	AFINITOR.....	18
ACULAR.....	96	AFINITOR DISPERZ.....	18
ACULAR LS.....	96	AF LANCETS SUPER THIN.....	117
acyclovir cap 200 mg.....	5	AFLURIA QUADRIVALENT 2022.....	13
acyclovir oint 5%.....	101	AFREZZA.....	33
		AFSTYLA.....	92
		AFTERTEST TOPICAL PAIN RE.....	101
		AGAMATRIX AMP NO CODE ADV.....	117
		AGAMATRIX AMP NO CODE TES.....	108
		AGAMATRIX JAZZ TEST STRIP.....	108

KEY	PA = Prior Authorization	ST = Responsible Steps
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AGAMATRIX JAZZ WIRELESS 2.....	117	ALTUVIIIIO.....	93
AGAMATRIX KEYNOTE TEST ST.....	108	ALUNBRIG.....	18
AGAMATRIX PRESTO.....	117	amantadine hcl cap 100 mg.....	84
AGAMATRIX PRESTO PRO METE.....	117	amantadine hcl soln 50 mg/5ml.....	84
AGAMATRIX PRESTO TEST STR.....	108	amantadine hcl tab 100 mg.....	84
AGAMATRIX ULTRA-THIN LANC.....	118	ambrisentan tab 5 mg, 10 mg.....	48
AGRYLIN.....	92	AMCINONIDE.....	101
AIMOVIG.....	78	AMILORIDE/HYDROCHLOROTHIA.....	45
AIMSCO LUBRICATED.....	118	amiloride hcl tab 5 mg.....	45
AIMSCO TWIST LANCETS 32G.....	118	aminocaproic acid oral soln 0.25 gm/ml.....	92
AIMSCO TWIST LANCETS 33G.....	118	aminocaproic acid tab 500 mg, 1000 mg.....	92
AJOVY.....	78	amiodarone hcl tab 100 mg, 200 mg, 400 mg.....	41
AKTEN.....	96	amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....	62
AKYNZEO.....	56	amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-40 mg.....	42
albendazole tab 200 mg.....	11	amlodipine besylate-benazepril hcl cap 5-10 mg, 5-20 mg, 10-20 mg, 10-40 mg.....	42
ALBUTEROL SULFATE.....	51	amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg.....	42
albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv).....	51	amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	40
albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....	51	amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg.....	42
albuterol sulfate syrup 2 mg/5ml.....	51	amlodipine-valsartan-hydrochlorothiazide tab 5-160-12.5 mg, 5-160-25 mg, 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg.....	42
albuterol sulfate tab 2 mg, 4 mg.....	51	AMOXAPINE.....	62
alclometasone dipropionate cream 0.05%.....	101	AMOXICILLIN.....	1
alclometasone dipropionate oint 0.05%.....	101	AMOXICILLIN/CLAVULANATE P.....	1
ALDACTAZIDE.....	45	amoxicillin & k clavulanate for susp 600-42.9 mg/5ml.....	1
ALECENSA.....	18	amoxicillin & k clavulanate for susp 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml.....	1
ALENDRONATE SODIUM.....	35	amoxicillin & k clavulanate tab 500-125 mg.....	1
alendronate sodium oral soln 70 mg/75ml.....	35	amoxicillin & k clavulanate tab 250-125 mg, 875-125 mg.....	1
alendronate sodium tab 70 mg.....	35	amoxicillin (trihydrate) cap 250 mg, 500 mg.....	1
alendronate sodium tab 10 mg, 35 mg.....	35	amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml.....	1
alfuzosin hcl tab er 24hr 10 mg.....	60	amoxicillin (trihydrate) tab 500 mg, 875 mg.....	1
ALINIA.....	11	amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg.....	67
aliskiren fumarate tab 150 mg (base equivalent), 300 mg (base equivalent).....	42	amphetamine-dextroamphetamine cap er 24hr 20 mg, 25 mg, 30 mg.....	67
ALKERAN.....	18	amphetamine-dextroamphetamine tab 20 mg.....	67
allopurinol tab 100 mg, 300 mg.....	79	amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 30 mg.....	67
almotriptan malate tab 6.25 mg, 12.5 mg.....	78	AMPICILLIN.....	1
ALOCRIL.....	96	anagrelide hcl cap 0.5 mg.....	93
ALOMIDE.....	96	anagrelide hcl cap 1 mg.....	93
ALORA.....	27	ANALPRAM-HC.....	101
alosepron hcl tab 0.5 mg (base equiv), 1 mg (base equiv).....	57	ANALPRAM HC.....	101
ALPHAGAN P.....	96		
ALPHANATE.....	92		
ALPHANINE SD.....	92		
ALPRAZOLAM INTENSOL.....	61		
alprazolam orally disintegrating tab 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	61		
alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg.....	61		
alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	61		
ALPROLIX.....	92		
ALREX.....	96		
ALTABAX.....	101		

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ANALPRAM HC SINGLES.....	101	ASSURE ID SAFETY PEN NEED.....	118
ANAPROX DS.....	75	ASSURE II.....	108
anastrozole tab 1 mg.....	18	ASSURE II CHECK STRIP.....	108
ANCOBON.....	4	ASSURE II TEST STRIPS.....	108
ANGELIQ.....	27	ASSURE LANCE LANCETS.....	118
ANORO ELLIPTA.....	51	ASSURE LANCE LANCETS 21G.....	118
ANUSOL-HC.....	101	ASSURE LANCE PLUS SAFETY.....	118
ANZEMET.....	56	ASSURE LANCE SAFETY LANCE.....	118
APADAZ.....	73	ASSURE 3 METER.....	118
APOKYN.....	84	ASSURE PLATINUM BLOOD GLU.....	118
apomorphine hcl soln cartridge 30 mg/3ml.....	84	ASSURE PLATINUM TEST STRI.....	108
APRACLONIDINE.....	96	ASSURE PRISM MULTI BLOOD.....	118
aprepitant capsule 40 mg.....	56	ASSURE PRISM MULTI TEST S.....	109
aprepitant capsule 80 mg.....	56	ASSURE PRO BLOOD GLUCOSE.....	118
aprepitant capsule 125 mg.....	56	ASSURE PRO TEST STRIPS.....	109
aprepitant capsule therapy pack 80 & 125 mg.....	56	ASSURE 3 TEST STRIPS.....	109
APTIOM.....	79	ASSURE 4 TEST STRIPS.....	109
APTIVUS.....	5	ASTAGRAF XL.....	176
AQINJECT PEN NEEDLE/31G X.....	118	ATABEX OB.....	87
AQINJECT PEN NEEDLE/32G X.....	118	atazanavir sulfate cap 150 mg (base equiv).....	5
AQ INSULIN SYRINGE/0.5ML/.....	118	atazanavir sulfate cap 200 mg (base equiv).....	5
AQ INSULIN SYRINGE/1ML/29.....	118	atazanavir sulfate cap 300 mg (base equiv).....	5
AQ INSULIN SYRINGE/1ML/31.....	118	atenolol & chlorthalidone tab 50-25 mg.....	42
ARAKODA.....	10	atenolol & chlorthalidone tab 100-25 mg.....	42
ARANESP ALBUMIN FREE.....	90	atenolol tab 25 mg, 50 mg, 100 mg.....	40
ARCALYST.....	75	AT LAST BLOOD GLUCOSE SYS.....	118
arformoterol tartrate soln nebu 15 mcg/2ml (base equiv).....	51	AT LAST LANCETS.....	118
ARIKAYCE.....	3	AT LAST TEST STRIPS.....	109
aripiprazole orally disintegrating tab 10 mg, 15 mg.....	64	atomoxetine hcl cap 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv).....	67
aripiprazole oral solution 1 mg/ml.....	64	atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv).....	67
aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg.....	64	atorvastatin calcium tab 80 mg (base equivalent).....	46
armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg.....	67	atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent).....	46
ARMOUR THYROID.....	35	atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg.....	10
ARNUITY ELLIPTA.....	51	atovaquone susp 750 mg/5ml.....	11
asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv).....	64	ATROPINE SULFATE.....	96
ASMANEX HFA.....	51	atropine sulfate ophth soln 1%.....	96
ASMANEX TWISTHALER 120 ME.....	51	ATROVENT HFA.....	51
ASMANEX TWISTHALER 30 MET.....	51	AUBAGIO.....	69
ASMANEX TWISTHALER 60 MET.....	51	AUGMENTIN.....	1
aspirin chew tab 81 mg.....	72	AUGMENTIN ES-600.....	1
aspirin-dipyridamole cap er 12hr 25-200 mg.....	93	AUM INSULIN SAFETY PEN NE.....	118
aspirin tab delayed release 81 mg.....	72	AUM MINI INSULIN PEN NEED.....	119
ASSURE 4 BLOOD GLUCOSE ME.....	118	AUM PEN NEEDLE/32GX4MM.....	119
ASSURE COMFORT LANCETS UL.....	118	AUM PEN NEEDLE/32GX5MM.....	119
ASSURE HAEMOLANCE PLUS HI.....	118	AUM PEN NEEDLE/32GX6MM.....	119
ASSURE HAEMOLANCE PLUS LO.....	118	AUM PEN NEEDLE/33GX4MM.....	119
ASSURE HAEMOLANCE PLUS MI.....	118	AUM PEN NEEDLE/33GX5MM.....	119
ASSURE HAEMOLANCE PLUS NO.....	118	AUM PEN NEEDLE/33GX6MM.....	119
ASSURE HAEMOLANCE PLUS PE.....	118	AUM READYGARD DUO SAFETY.....	119
ASSURE ID INSULIN SAFETY.....	118		

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AUM SAFETY PEN NEEDLE/31.....	119	BD AUTOSHIELD 29G X 5/16".....	120
AURORA LANCET SUPER THIN.....	119	BD BLUNT FILL NEEDLE/18G.....	120
AURORA LANCET THIN 23G.....	119	BD DISPOSABLE NEEDLE 23GX.....	120
AURORA PEN NEEDLES 29GX12.....	119	BD DISPOSABLE NEEDLE 27GX.....	120
AURORA PEN NEEDLES 31G X.....	119	BD DISPOSABLE NEEDLE REGU.....	120
AURORA UNIFINE PENTIPS/32.....	119	BD ECLIPSE 18G X 1-1/2".....	120
AURORA UNIFINE PENTIPS/MI.....	119	BD ECLIPSE 23G X 1" NEEDL.....	120
AUSTEDO.....	69	BD ECLIPSE NEEDLE/25G X.....	120
AUTO-LANCET.....	119	BD ECLIPSE NEEDLE/LUER-LO.....	120
AUTO-LANCET MINI.....	119	BD ECLIPSE NEEDLE 21G X 1.....	120
AUTOLET IMPRESSION LANCIN.....	119	BD ECLIPSE NEEDLE 25G X 1.....	120
AUTOLET LANCING DEVICE.....	119	BD ECLIPSE NEEDLE 25GX1".....	120
AUTOLET MINI.....	119	BD HYPODERMIC NEEDLE REGU.....	120
AUTOLET PLUS.....	119	BD HYPODERMIC NEEDLES 16G.....	120
AUTOPEN.....	119	BD HYPODERMIC NEEDLES 18G.....	121
AVONEX.....	69	BD HYPODERMIC NEEDLES 19G.....	121
AVONEX PEN.....	69	BD HYPODERMIC NEEDLES 21G.....	121
AYGESTIN.....	30	BD HYPODERMIC NEEDLES 22G.....	121
AYVAKIT.....	18	BD HYPODERMIC NEEDLES 23G.....	121
azathioprine tab 50 mg.....	176	BD HYPODERMIC NEEDLES 25G.....	121
azelaic acid gel 15%.....	101	BD HYPODERMIC NEEDLES 26G.....	121
azelastine hcl nasal spray 0.1% (137 mcg/spray).....	50	BD INSULIN SYRINGE/DETACH.....	121
azelastine hcl ophth soln 0.05%.....	96	BD INSULIN SYRINGE/0.3ML/.....	122
AZITHROMYCIN.....	2	BD INSULIN SYRINGE/0.5ML/.....	122
azithromycin for susp 100 mg/5ml, 200 mg/5ml.....	2	BD INSULIN SYRINGE/1ML/27.....	122
azithromycin tab 600 mg.....	2	BD INSULIN SYRINGE/1ML/29.....	122
azithromycin tab 250 mg, 500 mg.....	2	BD INSULIN SYRINGE/U-100/.....	121
AZULFIDINE.....	57	BD INSULIN SYRINGE/U-500/.....	122
AZULFIDINE EN-TABS.....	57	BD INSULIN SYRINGE LUER-L.....	121
B			
BACITRACIN.....	96	B-D INSULIN SYRINGE MICRO.....	119
bacitracin-polymyxin b ophth oint.....	96	BD INSULIN SYRINGE MICROF.....	121
bacitracin-polymyxin-neomycin-hc ophth oint 1%.....	96	BD INSULIN SYRINGE SAFETY.....	121
baclofen tab 10 mg, 20 mg.....	86	BD INSULIN SYRINGE SLIP T.....	121
BACTRIM.....	11	B-D INSULIN SYRINGE ULTRA.....	120
BACTRIM DS.....	11	BD INSULIN SYRINGE ULTRA.....	121
balsalazide disodium cap 750 mg.....	57	BD INSULIN SYRINGE ULTRA-.....	121
BALVERSA.....	18	BD INSULIN SYRINGE ULTRAF.....	121
BANZEL.....	79	BD INTEGRA RETRACTABLE NE.....	122
BAQSIMI ONE PACK.....	30	BD INTEGRA SYRINGE/3ML/22.....	122
BAQSIMI TWO PACK.....	30	BD LANCET ULTRAFINE 30G.....	122
BARACLUDE.....	5	BD LANCET ULTRAFINE 33G.....	122
BASAGLAR KWIKPEN.....	34	BD LATITUDE DIABETES MANA.....	122
BASAGLAR TEMPO PEN.....	34	BD LO-DOSE INSULIN SYRIN.....	120
BAXDELA.....	3	BD LOGIC BLOOD GLUCOSE MO.....	122
BD 1/2ML TUBERCULIN SYRIN.....	124	BD LUER LOCK SYRINGE/1ML/.....	122
BD ALLERGY/SYRINGE/NEEDLE.....	120	BD MAGNI-GUIDE MAGNIFIER.....	122
BD ALLERGY SYRINGE/NEEDLE.....	120	BD MICROTAINER LANCETS.....	122
BD ALLERGY SYRINGE 0.5ML/.....	120	BD 1ML ALLERGY SYRINGE SA.....	124
BD ALLERGY SYRINGE 1ML/27.....	120	BD 3ML LUER-LOK SYRINGE 1.....	124
BD AUTOSHIELD DUO 30G X 5.....	120	BD 10ML LUER-LOK SYRINGE.....	124
BD AUTOSHIELD 29G X 3/16".....	120	BD 3ML LUER-LOK SYRINGE/2.....	124
		BD 5ML LUER-LOK SYRINGE/2.....	124
		BD 1ML SLIP TIP SYRINGE 2.....	124

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	LD = Limited Distribution	QL = Quantity Limit (Max Quantity/Time)
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BD 10ML SYRINGE/DUAL CANN.....	124	BENZAMYCIN.....	101
BD 3ML SYRINGE LUER-LOK 2.....	124	BENZHYDROCODONE/ACETAMINO.....	73
BD 1ML TUBERCULIN SYRINGE.....	124	BENZNIDAZOLE.....	11
BD NEEDLE/18G 1-1/2".....	122	benzonatate cap 100 mg, 200 mg.....	50
BD NEEDLE/21G 1-1/2".....	122	benzoyl peroxide-erythromycin gel 5-3%.....	101
BD NEEDLE/16G X 1-1/2".....	122	benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....	84
BD NEEDLE/20G X 1-1/2".....	122	bepotastine besilate ophth soln 1.5%.....	96
BD NEEDLE/22G X 1-1/2".....	122	BEPREVE.....	96
BD NEEDLE/25G X 5/8".....	122	BERINERT.....	93
BD NEEDLE/25G X 7/8".....	122	BESIVANCE.....	96
BD NEEDLE/27G X 1/2".....	122	BESREMI.....	18
BD NEEDLE/30G X 1/2".....	122	BETADINE OPHTHALMIC PREP.....	96
BD NEEDLE/19G X 1".....	122	betaine powder for oral solution.....	35
BD NEEDLE/20G X 1".....	122	BETAMETHASONE DIPROPIONAT.....	101
BD NEEDLE BLUNT 5 MICRON.....	122	betamethasone dipropionate augmented cream	
BD NEEDLE 30G X 1".....	122	0.05%.....	102
BD NEEDLE SAFETYGLIDE/27G.....	122	betamethasone dipropionate augmented lotion	
BD NOKOR NEEDLE ADMIX THI.....	123	0.05%.....	102
BD NOKOR VENTED NEEDLE 18.....	123	betamethasone dipropionate augmented oint	
BD PEN.....	123	0.05%.....	102
BD PEN MINI.....	123	betamethasone dipropionate cream 0.05%.....	102
BD PEN NEEDLE/MICRO/ULTRA.....	123	betamethasone dipropionate lotion 0.05%.....	102
BD PEN NEEDLE/MINI/ULTRA.....	123	betamethasone dipropionate oint 0.05%.....	102
BD PEN NEEDLE/NANO/ULTRA.....	123	betamethasone valerate cream 0.1% (base	
BD PEN NEEDLE/NANO 2ND GE.....	123	equivalent).....	102
BD PEN NEEDLE/ORIGINAL/UL.....	123	betamethasone valerate lotion 0.1% (base	
BD PEN NEEDLE/SHORT/ULTRA.....	123	equivalent).....	102
BD PLASTIPAK SYRINGES ALL.....	123	betamethasone valerate oint 0.1% (base	
BD PRECISIONGLIDE 23GX1-1.....	123	equivalent).....	102
BD PRECISIONGLIDE NEEDLE.....	123	BETASERON.....	69
BD SAFETYGLIDE 21G X 1-1/.....	124	BETAXOLOL HCL.....	96
BD SAFETYGLIDE 21G X 1".....	124	betaxolol hcl tab 10 mg, 20 mg.....	40
BD SAFETYGLIDE HYPODERMIC.....	123	bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50	
BD SAFETY-GLIDE INSULIN S.....	123	mg.....	59
BD SAFETYGLIDE INSULIN SY.....	123	BETHKIS.....	4
BD SAFETYGLIDE NEEDLE/SHI.....	123	BEVESPI AEROSPHERE.....	51
BD SAFETYGLIDE NEEDLE 25G.....	123	bexarotene cap 75 mg.....	18
BD SAFETYGLIDE SHIELDED N.....	123	bexarotene gel 1%.....	102
BD SAFETYGLIDE SYRINGE 5M.....	123	BEXSERO.....	13
BD SAFETY-LOK INSULIN SYR.....	123	BEYAZ.....	28
BD SYRINGE BLUNT PLASTIC.....	124	bicalutamide tab 50 mg.....	18
BD SYRINGE LUER-LOK/1ML.....	124	BIDIL.....	48
BD SYRINGE 10ML/20G X 1".....	124	BIGFOOT UNITY PROGRAM KIT.....	124
BD TUBERCULIN SYRINGE/NEE.....	124	BIJUVA.....	27
BD VEO INSULIN SYRINGE UL.....	124	BIKTARVY.....	5
BELBUCA.....	73	BILTRICIDE.....	11
benazepril & hydrochlorothiazide tab 5-6.25 mg.....	42	bimatoprost ophth soln 0.03%.....	96
benazepril & hydrochlorothiazide tab 10-12.5 mg,		BINOSTO.....	35
20-12.5 mg, 20-25 mg.....	42	BIOTEL CARE BLOOD GLUCOSE.....	124
benazepril hcl tab 5 mg.....	42	BIOTEL CARE CONNECTED BLO.....	124
benazepril hcl tab 10 mg, 20 mg, 40 mg.....	42	bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg,	
BENEFIX.....	93	5-6.25 mg, 10-6.25 mg.....	42
BENLYSTA.....	176	bisoprolol fumarate tab 5 mg, 10 mg.....	40

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BLOOD GLUCOSE MONITORING.....	125	bupropion hcl (smoking deterrent) tab er 12hr 150 mg.....	69
BLOOD GLUCOSE SYSTEM PAK.....	125	bupropion hcl tab er 24hr 150 mg, 300 mg.....	62
BLOOD GLUCOSE TEST STRIPS.....	109	bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg.....	62
BLULINK BLOOD GLUCOSE MON.....	125	bupropion hcl tab 75 mg, 100 mg.....	62
BLULINK GLUCOSE TEST STRI.....	109	bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg.....	61
BONJESTA.....	56	butalbital-acetaminophen-caffeine tab 50-325-40 mg.....	72
BOOSTRIX.....	16	butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg.....	73
bosentan tab 62.5 mg, 125 mg.....	48	butalbital-acetaminophen cap 50-300 mg.....	72
BOSULIF.....	18	butalbital-acetaminophen tab 50-325 mg.....	72
BRAFTOVI.....	18	butalbital-aspirin-caffeine cap 50-325-40 mg.....	72
BREO ELLIPTA.....	52	butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg.....	73
BREZTRI AEROSPHERE.....	52	butorphanol tartrate nasal soln 10 mg/ml.....	73
BRILINTA.....	93	BYDUREON BCISE.....	30
brimonidine tartrate gel 0.33% (base equivalent).....	102	BYLVAY.....	57
brimonidine tartrate ophth soln 0.15%.....	96	BYLVAY (PELLETS).....	57
brimonidine tartrate ophth soln 0.2%.....	96	C	
brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%.....	96	cabergoline tab 0.5 mg.....	35
BRIVIACT.....	79	CABLVI.....	93
bromfenac sodium ophth soln 0.09% (base equiv) (once-daily).....	96	CABOMETYX.....	18
bromocriptine mesylate cap 5 mg (base equivalent).....	84	CAFERGOT.....	78
bromocriptine mesylate tab 2.5 mg (base equivalent).....	84	caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv).....	67
BRONCHITOL.....	53	CALAN SR.....	40
BRONCHITOL TOLERANCE TEST.....	54	calcipotriene-betamethasone dipropionate oint 0.005-0.064%.....	102
BROVANA.....	52	calcipotriene-betamethasone dipropionate susp 0.005-0.064%.....	102
BRUKINSA.....	18	calcipotriene cream 0.005%.....	102
budesonide delayed release particles cap 3 mg.....	25	calcipotriene oint 0.005%.....	102
budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml.....	52	calcipotriene soln 0.005% (50 mcg/ml).....	102
budesonide tab er 24hr 9 mg.....	25	calcitonin (salmon) inj 200 unit/ml.....	36
bumetanide tab 0.5 mg.....	45	calcitonin (salmon) nasal soln 200 unit/act.....	36
bumetanide tab 1 mg, 2 mg.....	45	CALCITRIOL.....	102
BUMEX.....	45	calcitriol cap 0.25 mcg, 0.5 mcg.....	36
BUPHENYL.....	35	calcitriol oral soln 1 mcg/ml.....	36
buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv).....	73	calcium acetate (phosphate binder) cap 667 mg (169 mg ca).....	57
buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv).....	73	calcium acetate (phosphate binder) tab 667 mg.....	57
buprenorphine hcl-naloxone hcl sl film 4-1 mg (base equiv), 12-3 mg (base equiv).....	73	CALQUENCE.....	18
buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv).....	73	CAMZYOS.....	48
buprenorphine hcl-naloxone hcl sl tab 8-2 mg (base equiv).....	73	candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg.....	43
buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....	73	candesartan cilexetil tab 32 mg.....	42
buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr.....	73	candesartan cilexetil tab 4 mg, 8 mg, 16 mg.....	42
		capecitabine tab 150 mg, 500 mg.....	18
		CAPLYTA.....	64
		CAPRELSA.....	18

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captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	43	CARETOUCH BLOOD GLUCOSE M.....	126
CARBAGLU.....	36	CARETOUCH BLOOD GLUCOSE T.....	109
carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	79	CARETOUCH HYPODERMIC NEED.....	126
carbamazepine chew tab 100 mg	79	CARETOUCH INSULIN SYRINGE.....	126
carbamazepine susp 100 mg/5ml	79	CARETOUCH LANCING DEVICE.....	126
carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	79	CARETOUCH PEN NEEDLE 29GX.....	126
carbamazepine tab 200 mg	79	CARETOUCH PEN NEEDLE 33GX.....	126
CARBATROL.....	80	CARETOUCH PEN NEEDLES 31.....	126
CARBIDOPA/LEVODOPA ODT.....	85	CARETOUCH PEN NEEDLES 31G.....	126
carbidopa & levodopa tab er 25-100 mg, 50-200 mg	84	CARETOUCH PEN NEEDLES 32G.....	126
carbidopa & levodopa tab 25-250 mg	84	CARETOUCH SAFETY LANCETS/.....	126
carbidopa & levodopa tab 10-100 mg, 25-100 mg	84	CARETOUCH TWIST LANCETS 2.....	126
carbidopa-levodopa-entacapone tabs 12.5-50-200 mg	85	CARETOUCH TWIST LANCETS 3.....	126
carbidopa-levodopa-entacapone tabs 18.75-75-200 mg	85	CARETOUCH TWIST LANCETS M.....	126
carbidopa-levodopa-entacapone tabs 31.25-125-200 mg	85	carglumic acid soluble tab 200 mg	36
carbidopa-levodopa-entacapone tabs 37.5-150-200 mg	85	carisoprodol tab 350 mg	86
carbidopa-levodopa-entacapone tabs 25-100-200 mg	85	CARNITOR.....	36
carbidopa-levodopa-entacapone tabs 50-200-200 mg	85	CARNITOR SF.....	36
carbidopa tab 25 mg	84	CARTEOLOL HCL.....	96
CARBINOXAMINE MALEATE.....	49	carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg	40
carbinoxamine maleate tab 4 mg	49	CAYA.....	126
carbonyl iron susp 15 mg/1.25ml (elemental iron)	90	CAYSTON.....	11
CARDIOCOM LANCING DEVICE.....	125	CEFACTOR.....	1
CAREFINE PEN NEEDLE 32GX4.....	125	CEFADROXIL.....	1
CAREFINE PEN NEEDLES 29GX.....	125	cefadroxil cap 500 mg	1
CAREFINE PEN NEEDLES 30GX.....	125	cefadroxil for susp 250 mg/5ml, 500 mg/5ml	1
CAREFINE PEN NEEDLES 31GX.....	125	cefdinir cap 300 mg	1
CAREFINE PEN NEEDLES 32GX.....	125	cefdinir for susp 125 mg/5ml, 250 mg/5ml	1
CAREONE ADVANCED LANCING.....	125	cefixime cap 400 mg	1
CAREONE BLOOD GLUCOSE MON.....	125	cefixime for susp 100 mg/5ml	2
CAREONE BLOOD GLUCOSE TES.....	109	cefixime for susp 200 mg/5ml	2
CAREONE INSULIN SYRINGES/.....	125	cefpodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml	2
CAREONE LANCET SUPER THIN.....	125	cefpodoxime proxetil tab 100 mg, 200 mg	2
CAREONE LANCET THIN.....	125	cefprozil for susp 125 mg/5ml, 250 mg/5ml	2
CAREONE LANCET ULTRA THIN.....	125	cefprozil tab 250 mg, 500 mg	2
CAREONE UNIFINE PENTIPS 2.....	125	cefuroxime axetil tab 250 mg, 500 mg	2
CAREONE UNIFINE PENTIPS 3.....	125	celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg	75
CAREONE UNIFINE PENTIPS P.....	125	CELLCEPT.....	176
CAREPOINT PRECISION POLY.....	126	CELONTIN.....	80
CAREPOINT PRECISION SYRIN.....	126	cephalexin cap 250 mg, 500 mg	2
CAREPOINT SAFETY 1ST NEED.....	126	cephalexin for susp 125 mg/5ml, 250 mg/5ml	2
CARESENS LANCETS.....	126	CEQUA.....	96
CARESENS N BLOOD GLUCOSE.....	109	CERDELGA.....	90
CARESENS N GLUCOSE MONITO.....	126	cevimeline hcl cap 30 mg	100
CARESENS N VOICE BLOOD GL.....	126	CHEMET.....	107
		CHEMSTRIP BG LOG BOOK.....	126
		CHEMSTRIP-K.....	109
		CHENODAL.....	57
		CHLORDIAZEPOXIDE/AMITRIPT.....	69
		chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg	61
		chlorhexidine gluconate soln 0.12%	100
		chloroquine phosphate tab 250 mg, 500 mg	10

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chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....	64	CLEVER CHEK AUTO-CODE TES.....	109
CHLORPROMAZINE HYDROCHLOR.....	64	CLEVER CHEK AUTO-CODE VOI.....	109
chlorthalidone tab 25 mg, 50 mg.....	45	CLEVER CHEK AUTO CODE VOI.....	127
chlorzoxazone tab 500 mg.....	86	CLEVER CHEK BLOOD GLUCOSE.....	127
CHOLBAM.....	57	CLEVER CHEK LANCETS ULTRA.....	127
cholecalciferol cap 1.25 mg (50000 unit).....	87	CLEVER CHEK TEST STRIPS.....	109
cholestyramine light powder 4 gm/dose.....	46	CLEVER CHOICE AUTO-CODE P.....	109
cholestyramine light powder packets 4 gm.....	46	CLEVER CHOICE COMFORT EZ.....	127
cholestyramine powder 4 gm/dose.....	46	CLEVER CHOICE MICRO BLOOD.....	127
cholestyramine powder packets 4 gm.....	46	CLEVER CHOICE MICRO TEST.....	109
choline fenofibrate cap dr 45 mg (fenofibric acid equiv).....	46	CLEVER CHOICE MINI BLOOD.....	127
choline fenofibrate cap dr 135 mg (fenofibric acid equiv).....	46	CLEVER CHOICE NO CODING T.....	109
CIALIS.....	49	CLEVER CHOICE TALK BLOOD.....	127
ciclopirox gel 0.77%.....	102	CLEVER CHOICE TALK NO COD.....	109
ciclopirox olamine cream 0.77% (base equiv).....	102	CLICKFINE PEN NEEDLE 32GX.....	127
ciclopirox olamine susp 0.77% (base equiv).....	102	CLICKFINE PEN NEEDLES 31G.....	127
ciclopirox shampoo 1%.....	102	CLICKFINE PEN NEEDLES 32G.....	128
ciclopirox solution 8%.....	102	CLICKFINE PEN NEEDLE UNIV.....	127
cilostazol tab 50 mg, 100 mg.....	93	CLICKFINE UNIVERSAL PEN N.....	128
CIMDUO.....	5	CLIMARA PRO.....	27
CIMZIA.....	57	clindamycin hcl cap 75 mg, 150 mg, 300 mg.....	11
CIMZIA STARTER KIT.....	57	clindamycin palmitate hcl for soln 75 mg/5ml (base equiv).....	11
cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv).....	36	clindamycin phosphate-benzoyl peroxide gel 1-5%.....	102
CINRYZE.....	93	clindamycin phosphate gel 1%.....	102
CIPRO.....	3	clindamycin phosphate lotion 1%.....	102
CIPRODEX.....	100	clindamycin phosphate soln 1%.....	102
CIPROFLOXACIN.....	100	clindamycin phosphate swab 1%.....	102
ciprofloxacin-dexamethasone otic susp 0.3-0.1%.....	100	clindamycin phosphate vaginal cream 2%.....	59
CIPROFLOXACIN HCL.....	3	clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%.....	102
ciprofloxacin hcl ophth soln 0.3% (base equivalent).....	96	CLINDESSE.....	60
ciprofloxacin hcl tab 750 mg (base equiv).....	3	clobazam suspension 2.5 mg/ml.....	80
ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv).....	3	clobazam tab 10 mg, 20 mg.....	80
CIPRO HC.....	100	clobetasol propionate cream 0.05%.....	102
citalopram hydrobromide oral soln 10 mg/5ml.....	62	clobetasol propionate emollient base cream 0.05%.....	102
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv).....	62	clobetasol propionate gel 0.05%.....	103
CITRANATAL B-CALM.....	87	clobetasol propionate oint 0.05%.....	103
CITRANATAL MEDLEY.....	87	clobetasol propionate soln 0.05%.....	103
CLARITHROMYCIN.....	2	clocortolone pivalate cream 0.1%.....	103
clarithromycin tab er 24hr 500 mg.....	2	CLODERM.....	103
clarithromycin tab 250 mg, 500 mg.....	2	clomipramine hcl cap 25 mg, 50 mg, 75 mg.....	62
CLEANLET LANCETS 28G.....	126	clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg.....	80
CLEMASTINE FUMARATE.....	50	clonazepam tab 0.5 mg, 1 mg, 2 mg.....	80
CLEOCIN.....	11	clonidine hcl tab er 12hr 0.1 mg.....	67
CLEOCIN PEDIATRIC GRANULE.....	11	clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg.....	43
CLEOCIN-T.....	102	clonidine td patch weekly 0.1 mg/24hr.....	43
CLEVER CHEK AUTO-CODE BLO.....	127	clonidine td patch weekly 0.2 mg/24hr.....	43
		clonidine td patch weekly 0.3 mg/24hr.....	43
		clopidogrel bisulfate tab 75 mg (base equiv).....	93

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clopidogrel bisulfate tab 300 mg (base equiv).....	93	CONTOUR BLOOD GLUCOSE MON.....	128
clorazepate dipotassium tab 7.5 mg.....	61	CONTOUR BLOOD GLUCOSE TES.....	109
clorazepate dipotassium tab 3.75 mg, 15 mg.....	61	CONTOUR NEXT BLOOD GLUCOS.....	109
clotrimazole troche 10 mg.....	100	CONTOUR NEXT EZ BLOOD GLU.....	128
clotrimazole w/ betamethasone cream 1-0.05%.....	103	CONTOUR NEXT GEN BLOOD GL.....	128
CLOZAPINE ODT.....	64	CONTOUR NEXT LINK BLOOD G.....	128
clozapine orally disintegrating tab 25 mg, 100 mg.....	64	CONTOUR NEXT LINK 2.4 WIR.....	129
clozapine tab 25 mg, 50 mg, 100 mg, 200 mg.....	64	CONTOUR NEXT LINK WIRELES.....	129
COAGADEX.....	93	CONTOUR NEXT ONE BLOOD GL.....	129
COAGUCHEK LANCETS.....	128	COOL BLOOD GLUCOSE MONITO.....	129
COARTEM.....	10	COOL BLOOD GLUCOSE TEST S.....	109
CODEINE SULFATE.....	73	COPIKTRA.....	19
codeine sulfate tab 30 mg.....	73	CORDRAN.....	103
colchicine tab 0.6 mg.....	79	CORGARD.....	40
colchicine w/ probenecid tab 0.5-500 mg.....	79	CORIFACT.....	93
colesevelam hcl packet for susp 3.75 gm.....	46	CORLANOR.....	48
colesevelam hcl tab 625 mg.....	46	CORTENEMA.....	101
COLESTID.....	46	CORTIFOAM.....	101
COLESTID FLAVORED.....	46	CORTISONE ACETATE.....	25
colestipol hcl granule packets 5 gm.....	47	CORTISPORIN-TC.....	100
colestipol hcl granules 5 gm.....	47	COSENTYX.....	103
colestipol hcl tab 1 gm.....	47	COSENTYX SENSOREADY PEN.....	103
colistimethate sod for inj 150 mg (colistin base activity).....	11	COTELLIC.....	19
COLY-MYCIN M.....	11	CREON.....	57
COMBIGAN.....	96	CRESEMBA.....	4
COMBIPATCH.....	27	CRINONE.....	60
COMBIVENT RESPIMAT.....	52	CROMOLYN SODIUM.....	96
COMBIVIR.....	5	cromolyn sodium oral conc 100 mg/5ml.....	57
COMETRIQ.....	18	cromolyn sodium soln nebu 20 mg/2ml.....	52
COMFORT ASSIST INSULIN SY.....	128	CROTAN.....	103
COMFORT ASSURED LANCETS M.....	128	CUVPOSA.....	55
COMFORT ASSURED LANCETS S.....	128	CVS ADVANCED GLUCOSE METE.....	109
COMFORT EZ/31G X 5MM.....	128	CVS GLUCOSE METER TEST ST.....	109
COMFORT EZ/31G X 6MM.....	128	CVS LANCETS 21G.....	129
COMFORT EZ INSULIN SYRING.....	128	CVS LANCETS MICRO-THIN 33.....	129
COMFORT EZ MICRO/32G X 4M.....	128	CVS LANCETS MICRO THIN 33.....	129
COMFORT EZ SHORT/31G X 8M.....	128	CVS LANCETS ORIGINAL.....	129
COMFORT LANCETS.....	128	CVS LANCETS THIN 26G.....	129
COMFORT TOUCH LANCETS ULT.....	128	CVS LANCETS ULTRA-THIN 30.....	129
COMFORT TOUCH PEN NEEDLES.....	128	CVS LANCETS ULTRA THIN 30.....	129
COMFORT TOUCH PLUS SAFETY.....	128	CVS LANCING DEVICE.....	129
COMIRNATY.....	13	CVS ULTRA THIN LANCETS.....	129
COMPLERA.....	6	cyanocobalamin inj 1000 mcg/ml.....	90
COMPLETE NATAL DHA.....	87	cyclobenzaprine hcl tab 5 mg, 10 mg.....	86
COMPLETENATE.....	87	CYCLOGYL.....	96
COMTAN.....	85	CYCLOMYDRIL.....	97
CO-NATAL FA.....	87	cyclopentolate hcl ophth soln 1%.....	97
CONCEPT DHA.....	87	CYCLOPHOSPHAMIDE.....	19
CONCEPT OB.....	87	cyclophosphamide cap 25 mg, 50 mg.....	19
CONCERTA.....	67	cycloserine cap 250 mg.....	4
CONDOMS.....	128	CYCLOSET.....	30
CONDYLOX.....	103	cyclosporine cap 25 mg, 100 mg.....	176
		cyclosporine modified cap 50 mg.....	176

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cyclosporine modified cap 25 mg, 100 mg.....	176	desmopressin acetate preservative free (pf) inj 4 mcg/ ml.....	36
cyclosporine modified oral soln 100 mg/ml.....	176	desmopressin acetate tab 0.1 mg, 0.2 mg.....	36
cyproheptadine hcl syrup 2 mg/5ml.....	50	desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5).....	28
cyproheptadine hcl tab 4 mg.....	50	desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg.....	28
CYSTADANE.....	36	desonide cream 0.05%.....	103
CYSTADROPS.....	97	desonide oint 0.05%.....	103
CYSTAGON.....	60	desoximetasone cream 0.05%, 0.25%.....	103
CYSTARAN.....	97	desoximetasone gel 0.05%.....	103
CYTOTEC.....	55	desoximetasone oint 0.05%, 0.25%.....	103
D			
dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 150 mg (etexilate base eq).....	91	desoximetasone spray 0.25%.....	103
dalfampridine tab er 12hr 10 mg.....	69	DESOXYN.....	67
DALIRESP.....	52	DESVENLAFAXINE ER.....	62
danazol cap 50 mg, 100 mg, 200 mg.....	26	desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv).....	62
DANTRIUM.....	86	DEXAMETHASONE.....	25
dantrolene sodium cap 25 mg.....	86	dexamethasone elixir 0.5 mg/5ml.....	25
dantrolene sodium cap 50 mg, 100 mg.....	86	DEXAMETHASONE INTENSOL.....	25
dapsone tab 25 mg, 100 mg.....	11	DEXAMETHASONE SODIUM PHOS.....	97
DAPTACEL.....	16	dexamethasone tab 1.5 mg, 2 mg, 4 mg, 6 mg.....	25
DARAPRIM.....	10	dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg.....	68
darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv).....	59	dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg.....	68
DAURISMO.....	19	dextroamphetamine sulfate cap er 24hr 5 mg.....	68
DAYPRO.....	75	dextroamphetamine sulfate cap er 24hr 10 mg, 15 mg.....	68
D-CARE GLUCOMETER KIT/GLU.....	129	dextroamphetamine sulfate oral solution 5 mg/5ml.....	68
DDAVP.....	36	dextroamphetamine sulfate tab 5 mg.....	68
deferasirox granules packet 90 mg, 180 mg, 360 mg.....	107	dextroamphetamine sulfate tab 10 mg.....	68
deferasirox tab for oral susp 125 mg, 250 mg, 500 mg.....	107	DIABETES MONITORING DIGIT.....	129
deferasirox tab 90 mg, 180 mg, 360 mg.....	107	DIACOMIT.....	80
deferiprone tab 500 mg, 1000 mg.....	107	DIASTAT ACUDIAL.....	80
DELSTRIGO.....	6	DIASTAT PEDIATRIC.....	80
DELZICOL.....	57	DIATHRIVE+ BLOOD GLUCOSE.....	110
demeclocycline hcl tab 150 mg, 300 mg.....	3	DIATHRIVE BLOOD GLUCOSE M.....	129
DENAVIR.....	103	DIATHRIVE BLOOD GLUCOSE T.....	109
DEPAKOTE.....	80	DIATHRIVE LANCETS.....	129
DEPAKOTE ER.....	80	DIATHRIVE LANCETS ULTRA T.....	129
DEPAKOTE SPRINKLES.....	80	DIATHRIVE LANCING DEVICE.....	129
DERMA-SMOOTH/FS BODY.....	103	DIATHRIVE PEN NEEDLE/31G.....	129
DERMA-SMOOTH/FS SCALP.....	103	DIATHRIVE PEN NEEDLE/32G.....	129
DERMOTIC.....	100	DIATHRIVE PEN NEEDLE/31 G.....	129
DESCOVY.....	6	DIATRUE PLUS BLOOD GLUCOS.....	110
desipramine hcl tab 10 mg, 25 mg.....	62	diazepam conc 5 mg/ml.....	62
desipramine hcl tab 50 mg, 75 mg, 100 mg, 150 mg.....	62	diazepam oral soln 1 mg/ml.....	62
desloratadine tab 5 mg.....	50	DIAZEPAM RECTAL GEL.....	80
DESMOPRESSIN ACETATE.....	36	diazepam tab 2 mg, 5 mg, 10 mg.....	62
desmopressin acetate inj 4 mcg/ml.....	36	diazoxide susp 50 mg/ml.....	30
desmopressin acetate nasal spray soln 0.01% (refrigerated), 0.01%.....	36	DIBENZYLIN.....	43
		dichlorphenamide tab 50 mg.....	45
		DICLEGIS.....	56

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diclofenac potassium tab 50 mg.....	75	dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg).....	41
diclofenac sodium ophth soln 0.1%.....	97	DOJOLVI.....	89
diclofenac sodium soln 1.5%.....	103	donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg.....	69
diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg.....	75	donepezil hydrochloride tab 5 mg, 10 mg, 23 mg.....	69
diclofenac w/ misoprostol tab delayed release 50-0.2 mg.....	75	DOPTELET.....	90
diclofenac w/ misoprostol tab delayed release 75-0.2 mg.....	76	dorzolamide hcl ophth soln 2%.....	97
dicloxacillin sodium cap 250 mg, 500 mg.....	1	dorzolamide hcl-timolol maleate ophth sol 22.3-6.8 mg/ ml pf.....	97
dicyclomine hcl cap 10 mg.....	55	dorzolamide hcl-timolol maleate ophth soln 22.3-6.8 mg/ml.....	97
dicyclomine hcl oral soln 10 mg/5ml.....	55	DOVATO.....	6
dicyclomine hcl tab 20 mg.....	55	doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg.....	43
DIFICID.....	2	doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg.....	62
DIFLUCAN.....	4	doxepin hcl conc 10 mg/ml.....	62
diflunisal tab 500 mg.....	72	doxepin hcl cream 5%.....	103
difluprednate ophth emulsion 0.05%.....	97	doxepin hcl (sleep) tab 3 mg (base equiv), 6 mg (base equiv).....	66
DIGOXIN.....	39	doxercalciferol cap 0.5 mcg, 1 mcg, 2.5 mcg.....	36
digoxin oral soln 0.05 mg/ml.....	39	doxycycline hyclate cap 50 mg.....	3
digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg).....	39	doxycycline hyclate cap 100 mg.....	3
dihydroergotamine mesylate inj 1 mg/ml.....	78	doxycycline hyclate tab 20 mg, 50 mg, 100 mg.....	3
dihydroergotamine mesylate nasal spray 4 mg/ml.....	78	doxycycline monohydrate cap 50 mg, 100 mg.....	3
DILANTIN.....	80	doxycycline monohydrate for susp 25 mg/5ml.....	3
DILANTIN-125.....	80	doxycycline monohydrate tab 50 mg, 75 mg, 100 mg.....	3
DILANTIN INFATABS.....	80	doxylamine-pyridoxine tab delayed release 10-10 mg.....	56
DILAUDID.....	73	DRISDOL.....	87
diltiazem hcl cap er 12hr 60 mg, 90 mg, 120 mg.....	40	dronabinol cap 2.5 mg.....	56
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	41	dronabinol cap 5 mg, 10 mg.....	56
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg.....	41	DROPLET GENTEEL LANCING D.....	130
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg.....	41	DROPLET INSULIN SYRINGE 0.....	130
diltiazem hcl tab er 24hr 420 mg.....	41	DROPLET INSULIN SYRINGE 1.....	130
diltiazem hcl tab 90 mg.....	41	DROPLET INSULIN SYRINGE/U.....	130
diltiazem hcl tab 30 mg, 60 mg, 120 mg.....	41	DROPLET INSULIN SYRINGE U.....	130
dimethyl fumarate capsule delayed release 120 mg.....	69	DROPLET LANCETS ULTRA THI.....	130
dimethyl fumarate capsule delayed release 240 mg.....	69	DROPLET LANCING DEVICE.....	130
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg.....	69	DROPLET MICRON 34G X 9/64.....	130
diphenoxylate w/ atropine tab 2.5-0.025 mg.....	55	DROPLET PEN NEEDLES 29GX1.....	130
DIPROLENE.....	103	DROPLET PEN NEEDLES 31GX5.....	130
dipyridamole tab 25 mg, 50 mg, 75 mg.....	93	DROPLET PEN NEEDLES 31GX6.....	130
disopyramide phosphate cap 100 mg, 150 mg.....	41	DROPLET PEN NEEDLES 31GX8.....	130
disulfiram tab 250 mg, 500 mg.....	69	DROPLET PEN NEEDLES 32GX4.....	130
DIURIL.....	45	DROPLET PEN NEEDLES 32GX5.....	130
divalproex sodium cap delayed release sprinkle 125 mg.....	80	DROPLET PEN NEEDLES 32GX6.....	131
divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg.....	80	DROPLET PEN NEEDLES 32GX8.....	131
divalproex sodium tab er 24 hr 250 mg, 500 mg.....	80	DROPLET PEN NEEDLES 29G X.....	130
DIVIGEL.....	27	DROPLET PEN NEEDLES 30G X.....	130
		DROPLET PEN NEEDLES 31G X.....	130
		DROPLET PEN NEEDLES 32G X.....	130

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DROPLET PERSONAL LANCETS.....	131	EASYPOINT NEEDLE/22G X 1".....	135
DROPSAFE INSULIN SAFETY S.....	131	EASYPOINT NEEDLE 25GX1-1/.....	134
DROPSAFE SAFETY PEN NEEDL.....	131	EASYPOINT NEEDLE 25G X 5/.....	134
DROPSAFE SAFTEY PEN NEEDL.....	131	EASYPOINT NEEDLE 23G X 1".....	134
drospirenone-ethinyl estradiol tab 3-0.02 mg.....	28	EASYPOINT NEEDLE 25G X 1".....	134
drospirenone-ethinyl estradiol tab 3-0.03 mg.....	28	EASYPRO BLOOD GLUCOSE MON.....	135
drospirenone-ethinyl estrad-levomefolate tab		EASYPRO BLOOD GLUCOSE TES.....	110
3-0.02-0.451 mg.....	28	EASYPRO PLUS.....	110
drospirenone-ethinyl estrad-levomefolate tab		EASY STEP BLOOD GLUCOSE M.....	132
3-0.03-0.451 mg.....	28	EASY STEP TEST STRIPS.....	110
DROXIA.....	90	EASY TALK BLOOD GLUCOSE M.....	132
DRUG MART ADJUSTABLE LANC.....	131	EASY TALK BLOOD GLUCOSE T.....	110
DRUG MART LANCETS THIN.....	131	EASY TALK PLUS II BLOOD G.....	110
DRUG MART LANCETS ULTRA T.....	131	EASY TOUCH ALLERGY TRAY S.....	132
DRUG MART ON-THE-GO LANCE.....	131	EASY TOUCH FLILOCK NEEDL.....	132
DRUG MART UNIFINE PENTIPS.....	131	EASY TOUCH FLILOCK SAFET.....	132
DRUG MART UNILET LANCETS.....	131	EASY TOUCH GLUCOSE MONITO.....	132
DRUG MART UNILET MICRO TH.....	131	EASY TOUCH GLUCOSE TEST S.....	110
DUANE READE LANCET ALTERN.....	131	EASY TOUCH 32GX5MM.....	134
DUANE READE LANCET SUPER.....	131	EASY TOUCH 32GX6MM.....	134
DUANE READE LANCET ULTRA.....	131	EASY TOUCH HEALTHPRO GLUC.....	110
DUANE READE UNIFINE PENTI.....	131	EASY TOUCH HYPODERMIC NEE.....	132
DUAVEE.....	27	EASY TOUCH INSULIN SYRING.....	133
DULERA.....	52	EASY TOUCH LANCETS 30G/BU.....	133
duloxetine hcl enteric coated pellets cap 20 mg (base		EASY TOUCH LANCETS 21G/PR.....	133
eq), 30 mg (base eq), 60 mg (base eq).....	62	EASY TOUCH LANCETS 23G/PR.....	133
DUO-CARE TEST STRIPS.....	110	EASY TOUCH LANCETS 26G/PR.....	133
DUPIXENT.....	103	EASY TOUCH LANCETS 28G/PR.....	133
DUREX REALFEEL NON-LATEX.....	131	EASY TOUCH LANCETS 30G/PR.....	133
DUREZOL.....	97	EASY TOUCH LANCETS 32G/PR.....	133
dutasteride cap 0.5 mg.....	60	EASY TOUCH LANCETS 26G/PU.....	133
dutasteride-tamsulosin hcl cap 0.5-0.4 mg.....	60	EASY TOUCH LANCETS 28G/PU.....	133
DYRENIUM.....	45	EASY TOUCH LANCETS 30G/PU.....	133
		EASY TOUCH LANCETS 32G/PU.....	133
E		EASY TOUCH LANCETS 28G/TW.....	133
EASY COMFORT INSULIN SYRI.....	132	EASY TOUCH LANCETS 30G/TW.....	133
EASY COMFORT PEN NEEDLES.....	132	EASY TOUCH LANCETS 32G/TW.....	133
EASY GLIDE PEN NEEDLES 33.....	132	EASY TOUCH LANCETS 33G/TW.....	133
EASYGLUCO.....	110	EASY TOUCH LANCING DEVICE.....	133
EASYMAX NG SELF-MONITORIN.....	134	EASY TOUCH PEN NEEDLE 30.....	133
EASYMAX TEST STRIPS.....	110	EASY TOUCH PEN NEEDLE/30.....	133
EASYMAX 15 TEST STRIPS.....	110	EASY TOUCH PEN NEEDLES 29.....	133
EASYMAX V BLOOD GLUCOSE S.....	134	EASY TOUCH PEN NEEDLES 31.....	133
EASY MINI EJECT LANCING D.....	132	EASY TOUCH PEN NEEDLES 32.....	133
EASY MINI LANCING DEVICE.....	132	EASY TOUCH PEN NEEDLES/31.....	133
EASY PLUS II BLOOD GLUCOS.....	110	EASY TOUCH SAFETY LANCETS.....	133
EASYPOINT NEEDLE/18G X 1-.....	134	EASY TOUCH SAFETY PEN NEE.....	134
EASYPOINT NEEDLE/20G X 1-.....	134	EASY TOUCH SHEATHLOCK SAF.....	134
EASYPOINT NEEDLE/21G X 1-.....	134	EASY TOUCH TUBERCULIN FLI.....	134
EASYPOINT NEEDLE/22G X 1-.....	134	EASY TOUCH TUBERCULIN SHE.....	134
EASYPOINT NEEDLE/18G X 1".....	134	EASY TRAK BLOOD GLUCOSE M.....	134
EASYPOINT NEEDLE/20G X 1".....	134	EASY TRAK BLOOD GLUCOSE T.....	110
EASYPOINT NEEDLE/21G X 1".....	134	EASY TRAK II BLOOD GLUCOS.....	110

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econazole nitrate cream 1%.....	103	emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg.....	6
EDECIN.....	45	EMTRIVA.....	6
EDURANT.....	6	EMVERM.....	11
E.E.S. 400.....	2	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	43
E.E.S. GRANULES.....	2	enalapril maleate & hydrochlorothiazide tab 10-25 mg.....	43
EFAVIRENZ.....	6	enalapril maleate oral soln 1 mg/ml.....	43
efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg.....	6	enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg.....	43
efavirenz-lamivudine-tenofovir df tab 400-300-300 mg.....	6	ENBREL.....	76
efavirenz-lamivudine-tenofovir df tab 600-300-300 mg.....	6	ENBREL MINI.....	76
efavirenz tab 600 mg.....	6	ENBREL SURECLICK.....	76
EFUDEX.....	103	ENCARE.....	60
EGATEN.....	11	ENDARI.....	90
EGRIFTA SV.....	36	ENGERIX-B.....	13
ELEMENT AUTOCODE SYSTEM.....	135	enoxaparin sodium inj 300 mg/3ml.....	91
ELEMENT COMPACT BLOOD GLU.....	135	enoxaparin sodium inj soln pref syr 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml, 100 mg/ml, 120 mg/0.8ml, 150 mg/ml.....	91
ELEMENT COMPACT TEST STRI.....	110	ENSPRYNG.....	176
ELEMENT COMPACT V BLOOD.....	135	entacapone tab 200 mg.....	85
ELEMENT PLUS BLOOD GLUCOS.....	135	entecavir tab 0.5 mg, 1 mg.....	6
ELEMENT TEST STRIPS.....	110	ENTRESTO.....	48
ELESTRIN.....	27	ENVARBUS XR.....	176
eletriptan hydrobromide tab 20 mg (base equivalent).....	78	EPANED.....	43
eletriptan hydrobromide tab 40 mg (base equivalent).....	78	EPCLUSA.....	6
ELIQUIS.....	91	EPIDIOLEX.....	80
ELIQUIS STARTER PACK.....	91	EPIFOAM.....	103
ELLA.....	28	epinastine hcl ophth soln 0.05%.....	97
ELMIRON.....	60	EPINEPHRINE.....	46
ELOCTATE.....	93	epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000).....	46
EMBRACE BLOOD GLUCOSE MON.....	135	epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000).....	46
EMBRACE BLOOD GLUCOSE TES.....	110	EPIVIR.....	6
EMBRACE EVO BLOOD GLUCOSE.....	110	eplerenone tab 25 mg, 50 mg.....	43
EMBRACE EVO COMPACT BLOOD.....	135	EPOGEN.....	90
EMBRACE LANCETS ULTRA THI.....	135	EPRONTIA.....	80
EMBRACE LANCING DEVICE WI.....	135	EPZICOM.....	6
EMBRACE PEN NEEDLES/29G X.....	135	EQ BLOOD GLUCOSE TEST STR.....	110
EMBRACE PEN NEEDLES/30G X.....	135	EQL COLOR LANCETS 21G.....	135
EMBRACE PEN NEEDLES/31G X.....	135	EQL COLOR LANCETS MICRO T.....	135
EMBRACE PEN NEEDLES/32G X.....	135	EQL INSULIN SYRINGE/0.3ML.....	135
EMBRACE PRESSURE ACTIVATE.....	135	EQL INSULIN SYRINGE/0.5ML.....	136
EMBRACE PRO BLOOD GLUCOSE.....	110	EQL INSULIN SYRINGE/1ML/2.....	136
EMBRACE TALK BLOOD GLUCOS.....	110	EQL INSULIN SYRINGE/1ML/3.....	136
EMCYT.....	19	EQL SHORT PEN NEEDLES 31G.....	136
EMEND.....	56	EQL SUPER THIN LANCETS 30.....	136
EMEND TRIPACK.....	56	EQL THIN LANCETS 26G.....	136
EMFLAZA.....	25	EQL ULTRA SHORT PEN NEEDL.....	136
EMGALITY.....	78	EQUETRO.....	64
EMPAVELI.....	93	ergocalciferol cap 1.25 mg (50000 unit).....	87
EMSAM.....	63		
emtricitabine caps 200 mg.....	6		

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ERGOLOID MESYLATES.....	69	ethambutol hcl tab 100 mg.....	4
ergotamine w/ caffeine tab 1-100 mg.....	78	ethambutol hcl tab 400 mg.....	4
ERIVEDGE.....	19	ethosuximide cap 250 mg.....	80
ERLEADA.....	19	ethosuximide soln 250 mg/5ml.....	80
erlotinib hcl tab 25 mg (base equivalent).....	19	ethynodiol diacetate & ethinyl estradiol tab 1 mg-35	
erlotinib hcl tab 100 mg (base equivalent), 150 mg		mcg, 1 mg-50 mcg.....	28
(base equivalent).....	19	etodolac cap 200 mg, 300 mg.....	76
ERMEZA.....	35	etodolac tab er 24hr 400 mg, 500 mg, 600 mg.....	76
ERTACZO.....	103	etodolac tab 400 mg.....	76
ERY.....	103	etodolac tab 500 mg.....	76
ERYGEL.....	104	etonogestrel-ethinyl estradiol va ring 0.120-0.015	
ERYPED 200.....	2	mg/24hr.....	28
ERYPED 400.....	2	ETOPOSIDE.....	19
ERYTHROCIN STEARATE.....	2	etravirine tab 100 mg, 200 mg.....	6
ERYTHROMYCIN.....	2	EULEXIN.....	19
ERYTHROMYCIN ETHYLSUCCINA.....	2	EVAMIST.....	27
erythromycin ethylsuccinate for susp 200 mg/5ml.....	3	EVENCARE BLOOD GLUCOSE MO.....	136
erythromycin ethylsuccinate for susp 400 mg/5ml.....	3	EVENCARE BLOOD GLUCOSE TE.....	110
erythromycin gel 2%.....	104	everolimus tab for oral susp 3 mg.....	19
erythromycin ophth oint 5 mg/gm.....	97	everolimus tab for oral susp 2 mg, 5 mg.....	19
erythromycin soln 2%.....	104	everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg.....	19
erythromycin tab delayed release 250 mg, 333 mg, 500		everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg.....	176
mg.....	3	EVOLUTION AUTOCODE.....	110
erythromycin tab 250 mg, 500 mg.....	3	EVOTAZ.....	6
ESBRIET.....	54	EVRYSDI.....	86
escitalopram oxalate soln 5 mg/5ml (base equiv).....	63	EXELDERM.....	104
escitalopram oxalate tab 5 mg (base equiv), 10 mg		EXELON.....	69
(base equiv), 20 mg (base equiv).....	63	exemestane tab 25 mg.....	19
esomeprazole magnesium cap delayed release 40 mg		EXJADE.....	107
(base eq).....	55	EXKIVITY.....	19
esomeprazole magnesium for delayed release susp		EXSERVAN.....	86
packet 10 mg, 20 mg, 40 mg.....	55	ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40	
ESPEROCT.....	93	mg, 10-80 mg.....	47
estazolam tab 1 mg, 2 mg.....	66	ezetimibe tab 10 mg.....	47
ESTRACE.....	27	E-Z JECT LANCETS.....	131
estradiol & norethindrone acetate tab 0.5-0.1 mg.....	27	E-Z JECT LANCETS COLOR.....	131
estradiol & norethindrone acetate tab 1-0.5 mg.....	27	E-Z JECT LANCETS 21G.....	131
estradiol tab 0.5 mg, 1 mg, 2 mg.....	27	E-ZJECT LANCETS MICRO-THI.....	131
estradiol td gel 0.25 mg/0.25gm (0.1%), 0.5 mg/0.5gm		E-Z JECT LANCETS SUPER TH.....	131
(0.1%), 0.75 mg/0.75gm (0.1%), 1 mg/gm (0.1%), 1.25		E-Z JECT LANCETS THIN 26G.....	131
mg/1.25gm (0.1%).....	27	EZ-LETS LANCETS 21G.....	136
estradiol td patch twice weekly 0.025 mg/24hr,		EZ-LETS LANCETS 30G.....	136
0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1		EZ-LETS LANCETS 26G SUPER.....	136
mg/24hr.....	27	EZ-LETS LANCETS 28G ULTRA.....	136
estradiol td patch weekly 0.025 mg/24hr, 0.0375			
mg/24hr (37.5 mcg/24hr), 0.05 mg/24hr, 0.06 mg/24hr,			
0.075 mg/24hr, 0.1 mg/24hr.....	27		
estradiol vaginal cream 0.1 mg/gm.....	60		
estradiol vaginal tab 10 mcg.....	60		
ESTRING.....	60		
ESTROGEL.....	27		
eszopiclone tab 1 mg, 2 mg, 3 mg.....	66		
ethacrynic acid tab 25 mg.....	45		

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famciclovir tab 125 mg, 250 mg, 500 mg.....	6
famotidine for susp 40 mg/5ml.....	55
famotidine tab 20 mg, 40 mg.....	55
FANAPT.....	64
FANAPT TITRATION PACK.....	64
FANTASY LUBRICATED.....	136
FANTASY LUBRICATED/SPERMI.....	136

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FARESTON.....	19	FIRDAPSE.....	86
FARXIGA.....	30	FIRVANQ.....	12
FASENRA PEN.....	52	FLAGYL.....	12
FC2 FEMALE CONDOM.....	136	FLAREX.....	97
febuxostat tab 40 mg, 80 mg.....	79	flavoxate hcl tab 100 mg.....	59
FEIBA.....	93	flecainide acetate tab 50 mg, 100 mg, 150 mg.....	41
felbamate susp 600 mg/5ml.....	80	FLORIVA.....	89
felbamate tab 400 mg, 600 mg.....	80	FLOVENT DISKUS.....	52
FELBATOL.....	80	FLOVENT HFA.....	52
FELDENE.....	76	FLOW-EZE VENTED NEEDLE.....	137
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg.....	41	FLUAD QUADRIVALENT 2022-2.....	13
FEMCAP.....	136	FLUARIX QUADRIVALENT 2022.....	13
fenofibrate micronized cap 43 mg.....	47	FLUBLOK QUADRIVALENT 2022.....	13
fenofibrate micronized cap 67 mg, 130 mg, 134 mg,		FLUCELVAX QUADRIVALENT 20.....	13
200 mg.....	47	fluconazole for susp 10 mg/ml, 40 mg/ml.....	4
fenofibrate tab 48 mg.....	47	fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg.....	4
fenofibrate tab 54 mg.....	47	flucytosine cap 250 mg, 500 mg.....	4
fenofibrate tab 145 mg.....	47	fludrocortisone acetate tab 0.1 mg.....	25
fenofibrate tab 160 mg.....	47	FLULAVAL QUADRIVALENT 202.....	13
fenopropfen calcium tab 600 mg.....	76	flunisolide nasal soln 25 mcg/act (0.025%).....	50
fantanyl citrate lozenge on a handle 200 mcg, 400 mcg,		fluocinolone acetonide cream 0.01%.....	104
600 mcg, 800 mcg, 1200 mcg, 1600 mcg.....	73	fluocinolone acetonide cream 0.025%.....	104
fantanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr,		fluocinolone acetonide oil 0.01% (body oil).....	104
75 mcg/hr, 100 mcg/hr.....	73	fluocinolone acetonide oil 0.01% (scalp oil).....	104
FERRIPROX.....	107	fluocinolone acetonide oint 0.025%.....	104
FERROUS SULFATE.....	90	fluocinolone acetonide (otic) oil 0.01%.....	100
ferrous sulfate elixir 220 mg/5ml (44 mg/5ml elemental		fluocinolone acetonide soln 0.01%.....	104
fe).....	90	fluocinonide cream 0.05%.....	104
ferrous sulfate soln 75 mg/ml (15 mg/ml elemental		fluocinonide emulsified base cream 0.05%.....	104
fe).....	90	fluocinonide gel 0.05%.....	104
fesoterodine fumarate tab er 24hr 4 mg, 8 mg.....	59	fluocinonide oint 0.05%.....	104
FETZIMA.....	63	fluocinonide soln 0.05%.....	104
FETZIMA TITRATION PACK.....	63	FLUORIDEX SENSITIVITY REL.....	100
FIASP.....	32	FLUORIMAX 5000 SENSITIVE.....	100
FIASP FLEXTOUCH.....	32	fluorometholone ophth susp 0.1%.....	97
FIASP PENFILL.....	32	FLUOROURACIL.....	104
FIBRYGA.....	93	fluorouracil cream 5%.....	104
FIFTY50 GLUCOSE METER 2.0.....	136	FLUOXETINE DR.....	63
FIFTY50 GLUCOSE TEST STRI.....	110	fluoxetine hcl cap 10 mg, 20 mg, 40 mg.....	63
FIFTY50 PEN NEEDLES/31GX8.....	136	fluoxetine hcl solution 20 mg/5ml.....	63
FIFTY50 PEN NEEDLES/32GX4.....	136	FLUPHENAZINE HCL.....	64
FIFTY50 PEN NEEDLES/32GX6.....	136	fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg.....	64
FIFTY50 PEN NEEDLES 31GX5.....	136	FLUPHENAZINE HYDROCHLORID.....	65
FIFTY50 PEN NEEDLES 31G X.....	136	FLURBIPROFEN.....	76
FIFTY50 SAFETY SEAL LANCE.....	136	FLURBIPROFEN SODIUM.....	97
FIFTY50 SUPERIOR COMFORT.....	136	flurbiprofen tab 100 mg.....	76
FIFTY50 UNILET LANCETS 33.....	136	FLUTICASONE PROPIONATE/SA.....	52
FINACEA.....	104	fluticasone propionate cream 0.05%.....	104
finasteride tab 5 mg.....	61	fluticasone propionate nasal susp 50 mcg/act.....	50
FINE 30.....	137	fluticasone propionate oint 0.005%.....	104
FINGERSTIX LANCETS.....	137	fluticasone-salmeterol aer powder ba 100-50 mcg/act,	
ingolimod hcl cap 0.5 mg (base equiv).....	70	250-50 mcg/act, 500-50 mcg/act.....	52
FINTEPLA.....	80		

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fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent).....	47	FORTEO.....	36
fluvastatin sodium tab er 24 hr 80 mg (base equivalent).....	47	FORTISCARE BLOOD GLUCOSE.....	111
fluvoxamine maleate tab 100 mg.....	63	FORTISCARE G1 BLOOD GLUCO.....	111
fluvoxamine maleate tab 25 mg, 50 mg.....	63	FORTISCARE T1 SELF-MONITO.....	137
FLUZONE HIGH-DOSE PF 2022.....	14	FOSAMAX.....	36
FLUZONE QUADRIVALENT 2022.....	14	fosamprenavir calcium tab 700 mg (base equiv).....	6
FML FORTE.....	97	fosfomycin tromethamine powd pack 3 gm (base equivalent).....	12
FML LIQUIFILM.....	97	fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg.....	43
FOCALIN.....	68	fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	43
folic acid tab 400 mcg, 800 mcg, 1 mg.....	90	FOSRENOL.....	57
FOLIVANE-OB.....	87	FOTIVDA.....	19
fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml.....	91	FRAGMIN.....	91
FORA BLOOD GLUCOSE TEST S.....	111	FREDS PHARMACY AUTOLET LA.....	138
FORACARE GD40.....	111	FREDS PHARMACY UNIFINE PE.....	138
FORACARE GD40 BLOOD GLUCO.....	137	FREDS PHARMACY UNILET LAN.....	138
FORACARE PREMIUM V10 BLOO.....	137	FREESTYLE FREEDOM LITE.....	138
FORACARE PREMIUM V10 TEST.....	111	FREESTYLE INSULINX BLOOD.....	111
FORACARE TEST N GO BLOOD.....	137	FREESTYLE LANCETS.....	138
FORACARE TEST N GO TEST S.....	111	FREESTYLE LIBRE 2/READER/.....	138
FORA 6 CONNECT.....	111	FREESTYLE LIBRE/READER/FL.....	138
FORA D40/G31 BLOOD GLUCOS.....	111	FREESTYLE LIBRE 2/SENSOR/.....	138
FORA D20 BLOOD GLUCOSE TE.....	111	FREESTYLE LIBRE 3/SENSOR/.....	138
FORA D15G BLOOD GLUCOSE T.....	111	FREESTYLE LIBRE 14 DAY/RE.....	138
FORA G30/PREMIUM V10 BLOO.....	111	FREESTYLE LIBRE 14 DAY/SE.....	138
FORA G30A BLOOD GLUCOSE M.....	137	FREESTYLE LITE BLOOD GLUC.....	138
FORA G20 BLOOD GLUCOSE MO.....	137	FREESTYLE LITE TEST STRIP.....	111
FORA G20 BLOOD GLUCOSE TE.....	111	FREESTYLE PRECISION NEO B.....	112
FORA GD20 BLOOD GLUCOSE M.....	137	FREESTYLE TEST STRIPS.....	112
FORA GD50 BLOOD GLUCOSE M.....	137	FREESTYLE UNISTICK II LAN.....	138
FORA GD50 BLOOD GLUCOSE T.....	111	frovatriptan succinate tab 2.5 mg (base equivalent).....	78
FORA GD20 TEST STRIPS.....	111	FULPHILA.....	90
FORA GTEL BLOOD GLUCOSE M.....	137	FUROSCIX.....	45
FORA GTEL BLOOD GLUCOSE T.....	111	FUROSEMIDE.....	45
FORA LANCETS.....	137	furosemide oral soln 10 mg/ml.....	45
FORA LANCING DEVICE.....	137	furosemide tab 20 mg, 40 mg, 80 mg.....	45
FORA LANCING DEVICE/CLEAR.....	137	FUZEON.....	6
FORA PREMIUM V10 BLE BLOO.....	137	FYCOMPA.....	81
FORA TEST N' GO VOICE BLO.....	137	FYLNETRA.....	90
FORA TN'G/TN'G VOICE BLOO.....	111	G	
FORA TN'G ADVANCE PRO BLO.....	111	gabapentin cap 100 mg, 300 mg, 400 mg.....	81
FORA TN'G VOICE BLOOD GLU.....	137	gabapentin oral soln 250 mg/5ml.....	81
FORA V10/V12/D10/D20 BLOO.....	137	gabapentin tab 600 mg, 800 mg.....	81
FORA V30A BLOOD GLUCOSE M.....	137	GABITRIL.....	81
FORA V30A BLOOD GLUCOSE T.....	111	GALAFOLD.....	36
FORA V10 BLOOD GLUCOSE MO.....	137	GALANTAMINE HYDROBROMIDE.....	70
FORA V12 BLOOD GLUCOSE MO.....	137	galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg.....	70
FORA V20 BLOOD GLUCOSE MO.....	137	galantamine hydrobromide tab 4 mg, 8 mg, 12 mg.....	70
FORA V10 BLOOD GLUCOSE TE.....	111	GALZIN.....	89
FORA V12 BLOOD GLUCOSE TE.....	111		
FORA V20 BLOOD GLUCOSE TE.....	111		

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GAMMAGARD LIQUID.....	16	GLUCOCARD 01 SENSOR PLUS.....	112
GAMMAKED.....	16	GLUCOCARD SHINE.....	139
GAMUNEX-C.....	16	GLUCOCARD SHINE CONNEX BL.....	139
GARDASIL 9.....	14	GLUCOCARD SHINE EXPRESS B.....	139
gatifloxacin ophth soln 0.5%.....	97	GLUCOCARD SHINE TEST STRI.....	112
GATTEX.....	58	GLUCOCARD SHINE XL.....	139
GAVILYTE-C.....	54	GLUCOCARD VITAL BLOOD GLU.....	139
GAVRETO.....	19	GLUCOCARD VITAL TEST STRI.....	112
GE100 BLOOD GLUCOSE MONIT.....	138	GLUCOCARD X-METER.....	139
GE100 BLOOD GLUCOSE TEST.....	112	GLUCOCARD X-SENSOR.....	112
gefitinib tab 250 mg.....	19	GLUCOCOM AUTOLINK TELEMON.....	140
gemfibrozil tab 600 mg.....	47	GLUCOCOM BLOOD GLUCOSE MO.....	140
GENERESS FE.....	28	GLUCOCOM LANCETS 28G.....	140
GENOTROPIN.....	36	GLUCOCOM LANCETS 30G.....	140
GENOTROPIN MINIQUICK.....	36	GLUCOCOM LANCETS 33G.....	140
gentamicin sulfate cream 0.1%.....	104	GLUCOCOM TEST STRIPS.....	112
gentamicin sulfate oint 0.1%.....	104	GLUCONAVII BLOOD GLUCOSE.....	112
gentamicin sulfate ophth soln 0.3%.....	97	GLUCO PERFECT 3 BLOOD GLU.....	139
GENTEEL BUTTERFLY TOUCH L.....	138	GLUCO PERFECT 3 TEST STRI.....	112
GENTEEL PLUS LANCING DEVI.....	138	GLUCOPRO INSULIN SYRINGE/.....	140
GENTLE-LET GP LANCETS.....	138	GLUCOSE METER TEST STRIPS.....	112
GENTLE-LET LANCETS GENERA.....	138	glyburide-metformin tab 1.25-250 mg, 2.5-500 mg,	
GENTLE-LET LANCETS SAFETY.....	138	5-500 mg.....	31
GENULTIMATE TEST STRIPS.....	112	glyburide micronized tab 1.5 mg, 3 mg, 6 mg.....	31
GENVOYA.....	7	glyburide tab 1.25 mg, 2.5 mg, 5 mg.....	31
GHT BLOOD GLUCOSE MONITO.....	138	glycopyrrolate oral soln 1 mg/5ml.....	55
GHT TEST STRIPS.....	112	glycopyrrolate tab 1 mg.....	55
GILOTRIF.....	19	glycopyrrolate tab 2 mg.....	55
glatiramer acetate soln prefilled syringe 20 mg/ml.....	70	GLYNASE.....	31
glatiramer acetate soln prefilled syringe 40 mg/ml.....	70	GLYXAMBI.....	31
GLEOSTINE.....	19	GNP CLICKFINE UNIVERSAL P.....	140
glimepiride tab 1 mg, 2 mg, 4 mg.....	30	GNP EASY TOUCH GLUCOSE MO.....	140
glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg,		GNP EASY TOUCH GLUCOSE TE.....	112
5-500 mg.....	30	GNP INSULIN SYRINGE/0.3ML.....	140
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg.....	30	GNP INSULIN SYRINGE/0.5ML.....	140
glipizide tab 5 mg, 10 mg.....	30	GNP INSULIN SYRINGE/1ML/2.....	140
GLOBAL EASE INJECT PEN NE.....	138	GNP INSULIN SYRINGE/1ML/3.....	140
GLOBAL EASY GLIDE INSULIN.....	139	GNP INSULIN SYRINGES/1/2M.....	140
GLOBAL EASY GLIDE PEN NEE.....	139	GNP INSULIN SYRINGES/0.3M.....	140
GLOBAL INJECT EASE INSULI.....	139	GNP INSULIN SYRINGES/1ML/.....	140
GLOBAL INJECT EASE LANCET.....	139	GNP INSULIN SYRINGES/3ML/.....	140
GLOBAL INSULIN SYRINGE/U.....	139	GNP LANCETS 21G.....	140
GLOBAL INSULIN SYRINGES/U.....	139	GNP LANCETS THIN 26G.....	140
GLOBAL LANCING DEVICE.....	139	GNP LANCING SYSTEM DEVICE.....	141
GLUCAGEN DIAGNOSTIC.....	112	GNP STERILE LANCETS 28G.....	141
GLUCAGEN HYPOKIT.....	30	GNP STERILE LANCETS 30G.....	141
GLUCAGON EMERGENCY KIT.....	30	GNP STERILE LANCETS 33G.....	141
GLUCAGON EMERGENCY KIT FO.....	30	GNP TRUE METRIX AIR SELF.....	141
glucagon (rdna) for inj kit 1 mg.....	30	GNP TRUE METRIX SELF MONI.....	112
GLUCOCARD 01 BLOOD GLUCOS.....	139	GNP TRUETRACK BLOOD GLUCO.....	112
GLUCOCARD EXPRESSION AUDI.....	139	GNP TRUETRACK SMART SYSTE.....	112
GLUCOCARD EXPRESSION BLOO.....	112	GNP ULTICARE PEN NEEDLES.....	141
GLUCOCARD 01-MINI BLOOD G.....	140	GNP ULTICARE PEN NEEDLES/.....	141

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GNP ULTIGUARD SAFEPACK/MI.....	141	HEALTHWISE SHORT PEN NEED.....	142
GNP ULTIGUARD SAFEPACK/SH.....	141	HEALTHWISE UNIFINE PENTIP.....	142
GNP ULTRA COMFORT INSULIN.....	141	HEALTHY ACCENTS AUTOLET I.....	142
GOJJI BLOOD GLUCOSE TEST.....	112	HEALTHY ACCENTS UNIFINE P.....	142
GOJJI LANCING DEVICE/CLEA.....	141	HEALTHY ACCENTS UNILET LA.....	143
GOJJI STERILE LANCETS 30G.....	141	H-E-B INCONTROL ADVANCED.....	142
GOLYTELY.....	54	H-E-B INCONTROL LANCETS M.....	142
GOODSENSE CLICKFINE SAFET.....	141	H-E-B INCONTROL LANCETS S.....	142
GOODSENSE COLOR LANCETS M.....	141	H-E-B INCONTROL LANCETS U.....	142
GOODSENSE LANCETS MICRO-T.....	141	H-E-B IN CONTROL PEN NEED.....	141
GOODSENSE LANCETS ULTRA-T.....	141	H-E-B INCONTROL PEN NEEDL.....	142
GOODSENSE LANCING DEVICE.....	141	H-E-B IN CONTROL UNIFINE.....	141
GOODSENSE PEN NEEDLE/PENF.....	141	HELIDAC THERAPY.....	55
GOODSENSE PREMIUM BLOOD.....	141	HEMLIBRA.....	93
GOODSENSE PREMIUM BLOOD G.....	112	HEMOPIL M.....	93
granisetron hcl tab 1 mg.....	56	HEPARIN SODIUM.....	92
GRASTEK.....	17	heparin sodium (porcine) inj 5000 unit/ml, 10000 unit/	92
griseofulvin microsize susp 125 mg/5ml.....	4	ml.....	92
griseofulvin microsize tab 500 mg.....	4	HEPLISAV-B.....	14
griseofulvin ultramicrosize tab 125 mg, 250 mg.....	5	HETLIOZ.....	66
guanfacine hcl tab er 24hr 1 mg (base equiv), 2	68	HETLIOZ LQ.....	66
mg (base equiv), 3 mg (base equiv), 4 mg (base	68	HIBERIX.....	14
equiv).....	68	HIPREX.....	12
guanfacine hcl tab 1 mg, 2 mg.....	43	HIZENTRA.....	16
GVOKE HYPOPEN 1-PACK.....	31	HM ULTICARE INSULIN SYRIN.....	143
GVOKE HYPOPEN 2-PACK.....	31	HM ULTICARE MINI PEN NEED.....	143
GVOKE KIT.....	31	HM ULTICARE SHORT PEN NEE.....	143
GVOKE PFS.....	31	HUMATE-P.....	93
GYNAZOLE-1.....	60	HUMATIN.....	4
H		HUMULIN R U-500 (CONCENTR.....	33
HAEGARDA.....	93	HUMULIN R U-500 KWIKPEN.....	33
HAEMOLANCE.....	142	HW EMBRACE PRO BLOOD GLUC.....	112
HAEMOLANCE LOW FLOW LANCE.....	142	HW EMBRACE TALK BLOOD GLU.....	112
HAEMOLANCE PLUS.....	142	HYCANTIN.....	19
HAEMOLANCE PLUS HIGH FLOW.....	142	HYCODAN.....	50
HAEMOLANCE PLUS LOW FLOW.....	142	hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	43
HAEMOLANCE PLUS MAX FLOW.....	142	HYDREA.....	20
HAEMOLANCE PLUS PEDIATRIC.....	142	hydrochlorothiazide cap 12.5 mg.....	45
halcinonide cream 0.1%.....	104	hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....	45
halobetasol propionate cream 0.05%.....	104	HYDROCODONE/IBUPROFEN.....	74
HALOG.....	104	hydrocodone-acetaminophen soln 7.5-325	73
haloperidol lactate oral conc 2 mg/ml.....	65	mg/15ml.....	73
haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20	65	hydrocodone-acetaminophen tab 5-325 mg.....	74
mg.....	65	hydrocodone-acetaminophen tab 10-325 mg, 7.5-325	74
HARVONI.....	7	mg.....	74
HAVRIX.....	14	hydrocodone bitart-homatropine methylbromide tab	50
HEALTH CARE LANCING DEVIC.....	142	5-1.5 mg.....	50
HEALTHPRO BLOOD GLUCOSE M.....	142	hydrocodone bitart-homatropine methylbrom soln	50
HEALTHWISE INSULIN SYRING.....	142	5-1.5 mg/5ml.....	50
HEALTHWISE MICRON PEN NEE.....	142	HYDROCODONE BITARTRATE ER.....	73
HEALTHWISE MINI PEN NEEDL.....	142	hydrocodone-ibuprofen tab 7.5-200 mg.....	74
HEALTHWISE PEN NEEDLES 29.....	142	hydrocod polst-chlorphen polst er susp 10-8	50
		mg/5ml.....	50

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HYDROCORTISONE/ACETIC ACI.....	100	ICLUSIG.....	20
hydrocortisone acetate w/ pramoxine perianal cream		IDELVION.....	94
1-1%.....	101	IDHIFA.....	20
HYDROCORTISONE BUTYRATE.....	104	IGLUCOSE BLOOD GLUCOSE MO.....	144
hydrocortisone butyrate oint 0.1%.....	104	IGLUCOSE BLOOD GLUCOSE TE.....	112
hydrocortisone cream 2.5%.....	104	ILEVRO.....	97
hydrocortisone enema 100 mg/60ml.....	101	imatinib mesylate tab 100 mg (base equivalent).....	20
hydrocortisone lotion 2.5%.....	104	imatinib mesylate tab 400 mg (base equivalent).....	20
hydrocortisone oint 2.5%.....	104	IMBRUVICA.....	20
hydrocortisone perianal cream 1%.....	101	IMCIVREE.....	68
hydrocortisone perianal cream 2.5%.....	101	imipramine hcl tab 10 mg, 25 mg, 50 mg.....	63
hydrocortisone tab 5 mg, 10 mg, 20 mg.....	25	imiquimod cream 5%.....	105
hydrocortisone valerate cream 0.2%.....	104	IMPAVIDO.....	12
hydrocortisone valerate oint 0.2%.....	104	IMURAN.....	176
hydromorphone hcl liqd 1 mg/ml.....	74	IMVEXXY MAINTENANCE PACK.....	60
hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32		IMVEXXY STARTER PACK.....	60
mg.....	74	INATAL GT.....	87
hydromorphone hcl tab 2 mg, 4 mg, 8 mg.....	74	INBRIJA.....	85
hydroxychloroquine sulfate tab 200 mg.....	10	INCONTROL ULTICARE MINI P.....	144
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400		INCRELEX.....	36
mg.....	10	INCRUSE ELLIPTA.....	52
hydroxyurea cap 500 mg.....	20	indapamide tab 1.25 mg, 2.5 mg.....	45
hydroxyzine hcl syrup 10 mg/5ml.....	62	indomethacin cap er 75 mg.....	76
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	62	indomethacin cap 25 mg, 50 mg.....	76
HYDROXYZINE PAMOATE.....	62	INFANRIX.....	16
hydroxyzine pamoate cap 25 mg, 50 mg.....	62	INFINITY BLOOD GLUCOSE MO.....	144
HYFTOR.....	104	INFINITY BLOOD GLUCOSE TE.....	113
HYPERSAL.....	50	INFINITY VOICE.....	113
HYPODERMIC NEEDLES 18GX1.....	143	INGREZZA.....	70
HYPODERMIC NEEDLES 20GX1.....	143	INLYTA.....	20
HYPODERMIC NEEDLES 21GX1.....	143	INNOPRAN XL.....	40
HYPODERMIC NEEDLES 22GX1.....	143	INPEN 100/BLEU/LILLY/HUMA.....	144
HYPODERMIC NEEDLES 23GX1.....	143	INPEN 100/BLEU/NOVOLOG/FI.....	144
HYPODERMIC NEEDLES 25GX1.....	143	INPEN 100/GREY/LILLY/HUMA.....	144
HYPODERMIC NEEDLES 27GX1.....	143	INPEN 100/GREY/NOVOLOG/FI.....	144
HYPODERMIC NEEDLES 25GX5/.....	143	INPEN 100/PINK/LILLY/HUMA.....	144
HYPODERMIC NEEDLES 26GX1/.....	143	INPEN 100/PINK/NOVOLOG/FI.....	144
HYPODERMIC NEEDLES 27GX1/.....	144	INQOVI.....	20
HYPODERMIC NEEDLES 18GX1".....	143	INREBIC.....	20
HYPODERMIC NEEDLES 20GX1".....	143	INSULIN ASPART.....	32
HYPODERMIC NEEDLES 21GX1".....	143	INSULIN ASPART FLEXPEN.....	32
HYPODERMIC NEEDLES 22GX1".....	143	INSULIN ASPART PENFILL.....	33
HYPODERMIC NEEDLES 23GX1".....	143	INSULIN ASPART PROTAMINE/.....	33
HYQVIA.....	17	INSULIN DEGLUDEC.....	34
HY-VEE LANCETS.....	143	INSULIN DEGLUDEC FLEXTOUC.....	34
HY-VEE THIN LANCETS.....	143	INSULIN GLARGINE.....	34
I		INSULIN GLARGINE SOLOSTAR.....	34
ibandronate sodium tab 150 mg (base equivalent).....	36	INSULIN SYRINGE/0.3ML/30G.....	145
IBRANCE.....	20	INSULIN SYRINGE/0.3ML/31G.....	145
ibuprofen tab 400 mg, 600 mg, 800 mg.....	76	INSULIN SYRINGE/0.5ML/28G.....	145
icatibant acetate subcutaneous soln pref syr 30		INSULIN SYRINGE/0.5ML/30G.....	145
mg/3ml.....	94	INSULIN SYRINGE/0.5ML/31G.....	145
		INSULIN SYRINGE/1ML/29G X.....	145

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INSULIN SYRINGE/1ML/30G X.....	145	isosorbide dinitrate tab 10 mg, 20 mg, 30 mg.....	39
INSULIN SYRINGE/NEEDLE 0.....	144	ISOSORBIDE MONONITRATE.....	39
INSULIN SYRINGE/NEEDLE 1M.....	144	isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120	
INSULIN SYRINGE/U-100/0.3.....	144	mg.....	39
INSULIN SYRINGE/U-100/0.5.....	145	isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg.....	105
INSULIN SYRINGE/U-100/1ML.....	145	isradipine cap 2.5 mg, 5 mg.....	41
INSULIN SYRINGE 1ML/31G X.....	144	ISTURISA.....	36
INSULIN SYRINGES/U-100/0.....	145	itraconazole cap 100 mg.....	5
INSULIN SYRINGES/U-100/1M.....	145	itraconazole oral soln 10 mg/ml.....	5
INSULIN SYRINGES 0.3ML/31.....	145	ivermectin cream 1%.....	105
INSULIN SYRINGES 0.5ML/31.....	145	ivermectin tab 3 mg.....	11
INSUL-TOTE.....	144	IXINITY.....	94
INSUL-TOTE JR.....	144	J	
INSUPEN 33GX4MM.....	146	JADENU.....	107
INSUPEN 29G X 12MM.....	145	JADENU SPRINKLE.....	107
INSUPEN 31G X 5MM.....	146	JAKAFI.....	20
INSUPEN 31G X 8MM.....	146	JALYN.....	61
INSUPEN 32G X 4MM.....	146	JANSSEN COVID-19 VACCINE.....	14
INSUPEN PEN NEEDLES 32G X.....	145	JANUMET.....	31
INSUPEN SENSITIVE 32GX6MM.....	145	JANUMET XR.....	31
INSUPEN SENSITIVE 32GX8MM.....	145	JANUVIA.....	31
INSUPEN ULTRAFIN 30GX8MM.....	145	JARDIANCE.....	31
INSUPEN ULTRAFIN 31GX6MM.....	145	JAYPIRCA.....	20
INSUPEN ULTRAFIN 31GX8MM.....	145	JENLIVA PRENATAL/POSTNATA.....	87
INTELENCE.....	7	JIVI.....	94
IN TOUCH.....	144	JOENJA.....	176
IN TOUCH BLOOD GLUCOSE TE.....	113	JULUCA.....	7
IN TOUCH DIABETES MANAGEM.....	144	JUXTAPID.....	47
IN TOUCH LANCING DEVICE.....	144	JYNARQUE.....	37
IN TOUCH STERILE LANCETS.....	144	JYNNEOS.....	14
INTRAROSA.....	60	K	
INVEGA.....	65	KALBITOR.....	94
IOPIDINE.....	97	KALETRA.....	7
IPOL INACTIVATED IPV.....	14	KALYDECO.....	54
ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml.....	52	KAMELEON LUBRICATED.....	146
ipratropium bromide inhal soln 0.02%.....	52	KEPPRA.....	81
ipratropium bromide nasal soln 0.03% (21 mcg/		KEPPRA XR.....	81
spray).....	50	KERENDIA.....	37
ipratropium bromide nasal soln 0.06% (42 mcg/		KESIMPTA.....	70
spray).....	50	KETOCARE.....	113
irbesartan-hydrochlorothiazide tab 150-12.5 mg,		ketoconazole cream 2%.....	105
300-12.5 mg.....	43	ketoconazole shampoo 2%.....	105
irbesartan tab 75 mg, 150 mg, 300 mg.....	43	ketoconazole tab 200 mg.....	5
IRESSA.....	20	KETONE.....	113
irrigation solution, physiological.....	176	KETONE TEST STRIPS.....	113
ISENTRESS.....	7	KETOPROFEN.....	76
ISENTRESS HD.....	7	ketorolac tromethamine ophth soln 0.4%.....	97
ISONIAZID.....	4	ketorolac tromethamine ophth soln 0.5%.....	97
isoniazid syrup 50 mg/5ml.....	4	ketorolac tromethamine tab 10 mg.....	76
isoniazid tab 300 mg.....	4	KETOSTIX.....	113
ISOPTO ATROPINE.....	97	KEVEYIS.....	45
isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg.....	48		
isosorbide dinitrate tab 5 mg, 40 mg.....	39		

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KEVZARA.....	76	KROGER LANCING DEVICE.....	147
KIMONO COLORS.....	146	KROGER PEN NEEDLES/31G X.....	147
KIMONO LUBRICATED.....	146	KROGER PEN NEEDLES/32G X.....	147
KIMONO MICRO THIN.....	146	KROGER PEN NEEDLES/33G X.....	147
KIMONO MICRO THIN PLUS SP.....	146	KROGER PEN NEEDLES 29G X.....	147
KIMONO PLUS SPERMICIDE/LU.....	146	KROGER PEN NEEDLES 31G X.....	147
KIMONO PLUS SPERMICIDE LU.....	146	KROGER PEN NEEDLES 31GX1/.....	147
KIMONO PS LUBRICATED.....	146	KROGER PREMIUM BLOOD GLUC.....	113
KIMONO PS PLUS SPERMICIDE.....	146	K-TAB.....	89
KIMONO SENSATION LUBRICAT.....	146	KUVAN.....	37
KIMONO SENSATION PLUS SPE.....	146	K-Y ME & YOU EXTRA LUBRIC.....	146
KIMONO SPECIAL.....	146	K-Y ME & YOU INTENSE.....	146
KINERET.....	76	KYNMOBI.....	85
KINNEY LANCETS.....	146		
KINNEY THIN LANCETS.....	146	L	
KINRAY INSULIN SYRINGE/0.....	146	labetalol hcl tab 100 mg, 200 mg, 300 mg.....	40
KINRAY INSULIN SYRINGE PR.....	146	lacosamide oral solution 10 mg/ml.....	81
KINRIX.....	16	lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg.....	81
KISQALI.....	20	LACRISERT.....	97
KISQALI FEMARA 200 DOSE.....	20	lactated ringer's for irrigation.....	176
KISQALI FEMARA 400 DOSE.....	20	lactulose (encephalopathy) solution 10 gm/15ml.....	58
KISQALI FEMARA 600 DOSE.....	20	lactulose solution 10 gm/15ml.....	54
KITABIS PAK.....	4	LAGEVRIO.....	7
KLARON.....	105	LAMICTAL.....	81
KLISYRI.....	105	LAMICTAL CHEWABLE DISPERS.....	81
KLOXXADO.....	107	LAMICTAL ODT.....	81
KMART VALU PLUS INSULIN S.....	146	LAMICTAL STARTER/NOT TAKI.....	81
KOATE.....	94	LAMICTAL STARTER/TAKING C.....	81
KOATE-DVI.....	94	LAMICTAL STARTER/TAKING V.....	81
KOGENATE FS.....	94	LAMICTAL XR.....	81
KORLYM.....	31	lamivudine oral soln 10 mg/ml.....	7
KOSELUGO.....	20	lamivudine tab 150 mg.....	7
KOVALTRY.....	94	lamivudine tab 300 mg.....	7
K-PHOS.....	89	lamivudine tab 100 mg (hbv).....	7
K-PHOS NEUTRAL.....	89	lamivudine-zidovudine tab 150-300 mg.....	7
K-PHOS NO 2.....	61	lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg.....	81
KRAZATI.....	20	lamotrigine tab chewable dispersible 5 mg, 25 mg.....	82
KRINTAFEL.....	10	lamotrigine tab disint 25 (14) & 50 mg (14) & 100 mg (7) kit.....	82
KROGER AUTOLET LANCING DE.....	146	lamotrigine tab disint 21 x 25 mg & 7 x 50 mg titration kit.....	82
KROGER BLOOD GLUCOSE MONI.....	146	lamotrigine tab disint 42 x 50mg & 14 x 100mg titration kit.....	82
KROGER BLOOD GLUCOSE TEST.....	113	lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg.....	82
KROGER HEALTHPRO GLUCOSE.....	113	lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg.....	82
KROGER HEALTHPRO TWIST LA.....	146	lamotrigine tab 25 mg (42) & 100 mg (7) starter kit.....	82
KROGER INSULIN SYRINGE/0.....	147	lamotrigine tab 84 x 25 mg & 14 x 100 mg starter kit.....	82
KROGER INSULIN SYRINGE/1M.....	147	lamotrigine tab 35 x 25 mg starter kit.....	82
KROGER INSULIN SYRINGE/U.....	147	LAMPIT.....	12
KROGER LANCETS.....	147	LANCET DEVICE ADJUSTABLE.....	147
KROGER LANCETS 21G.....	147		
KROGER LANCETS MICRO THIN.....	147		
KROGER LANCETS SUPER THIN.....	147		
KROGER LANCETS THIN.....	147		
KROGER LANCETS THIN 26G.....	147		
KROGER LANCETS ULTRATHIN.....	147		

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LANCET DEVICE WITH EJECTO.....	147	levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv).....	52
LANCETS.....	147	levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv).....	52
LANCETS 28G.....	147	LEVEMIR.....	34
LANCETS 30G.....	147	LEVEMIR FLEXPEN.....	34
LANCETS 30G/TWIST TOP.....	148	levetiracetam oral soln 100 mg/ml.....	82
LANCETS 33G EXTRA FINE.....	148	levetiracetam tab er 24hr 500 mg, 750 mg.....	82
LANCETS 30G TWIST TOP.....	148	levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg.....	82
LANCETS 33G UNIVERSAL DES.....	148	LEVOBUNOLOL HCL.....	97
LANCETS MICRO THIN 33G.....	147	levocarnitine oral soln 1 gm/10ml (10%).....	37
LANCETS SUPER THIN 28G.....	147	levocarnitine tab 330 mg.....	37
LANCETS THIN.....	147	levocetirizine dihydrochloride tab 5 mg.....	50
LANCETS ULTRA THIN.....	147	LEVOFLOXACIN.....	3
LANCETS ULTRA THIN 30G.....	147	levofloxacin tab 250 mg, 500 mg, 750 mg.....	3
LANCING DEVICE.....	148	levonor-eth est tab 0.15-0.02/0.025/0.03 mg & eth est 0.01 mg.....	28
LANOXIN.....	39	levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg.....	28
lansoprazole cap delayed release 30 mg.....	55	levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg.....	28
lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental).....	58	levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg-mcg.....	28
LANTUS.....	34	levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg.....	29
LANTUS SOLOSTAR.....	34	levonorgestrel tab 1.5 mg.....	28
LANZO.....	148	levonorg-eth est tab 0.1-0.02mg(84) & eth est tab 0.01mg(7).....	28
lapatinib ditosylate tab 250 mg (base equiv).....	20	levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7).....	28
LASIX.....	45	levorphanol tartrate tab 2 mg.....	74
latanoprost ophth soln 0.005%.....	97	levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg.....	35
LEADER ADVANCED LANCING D.....	148	LEXIVA.....	7
LEADER INSULIN SYRINGE/0.....	148	LIBERTY BLOOD GLUCOSE MET.....	148
LEADER INSULIN SYRINGE/1M.....	148	LIBERTY MEDICAL LANCETS 3.....	148
LEADER LANCETS COLORED.....	148	LIBERTY MINI LANCING DEVI.....	148
LEADER SUPER THIN LANCET.....	148	LIBERTY NEXT GENERATION B.....	113
LEADER THIN LANCETS.....	148	LIBERTY TEST STRIPS.....	113
LEADER UNIFINE PENTIPS/MI.....	148	LIDOCAINE HCL.....	100
LEADER UNIFINE PENTIPS/NA.....	148	lidocaine hcl soln 4%.....	105
LEADER UNIFINE PENTIPS/PL.....	148	lidocaine hcl urethral/mucosal gel prefilled syringe 2%.....	105
LEADER UNIFINE PENTIPS PL.....	148	lidocaine hcl viscous soln 2%.....	100
LEDIPASVIR/SOFOSBUVIR.....	7	lidocaine patch 5%.....	105
leflunomide tab 10 mg, 20 mg.....	76	lidocaine-prilocaine cream 2.5-2.5%.....	105
lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg.....	176	LIFESCAN UNISTIK 2 DEEP P.....	148
lenalidomide caps 2.5 mg.....	176	LINDANE.....	105
LENVIMA 4 MG DAILY DOSE.....	21	linezolid for susp 100 mg/5ml.....	12
LENVIMA 8 MG DAILY DOSE.....	21	linezolid tab 600 mg.....	12
LENVIMA 10 MG DAILY DOSE.....	20		
LENVIMA 12MG DAILY DOSE.....	21		
LENVIMA 14 MG DAILY DOSE.....	21		
LENVIMA 18 MG DAILY DOSE.....	21		
LENVIMA 20 MG DAILY DOSE.....	21		
LENVIMA 24 MG DAILY DOSE.....	21		
LETAIRIS.....	48		
letrozole tab 2.5 mg.....	21		
leucovorin calcium tab 5 mg, 10 mg, 15 mg, 25 mg.....	21		
LEUKERAN.....	21		
LEUKINE.....	90		
leuprolide acetate inj kit 5 mg/ml.....	21		

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liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg.....	35	loratadine tab 10 mg.....	50
lisinopril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg.....	43	lorazepam conc 2 mg/ml.....	62
lisinopril tab 2.5 mg, 5 mg, 10 mg, 20 mg, 30 mg, 40 mg.....	43	lorazepam tab 0.5 mg, 1 mg, 2 mg.....	62
LITETOUCH INSULIN PEN NEE.....	148	LORBRENA.....	21
LITETOUCH INSULIN SYRINGE.....	148	losartan potassium & hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg.....	43
LITE TOUCH LANCETS.....	148	losartan potassium tab 100 mg.....	43
LITETOUCH LANCETS MICRO T.....	149	losartan potassium tab 25 mg, 50 mg.....	43
LITE TOUCH LANCING PEN.....	148	LOTEMAX.....	97
LITETOUCH PEN NEEDLES/31.....	149	LOTEMAX SM.....	97
LITETOUCH PEN NEEDLES/31G.....	149	LOTENSIN.....	43
LITETOUCH PEN NEEDLES 29G.....	149	LOTENSIN HCT.....	43
LITETOUCH PEN NEEDLES 31G.....	149	LOTEPREDNOL ETABONATE.....	98
LITHIUM CARBONATE.....	65	loteprednol etabonate ophth susp 0.5%.....	98
lithium carbonate cap 150 mg, 300 mg, 600 mg.....	65	lovastatin tab 10 mg, 20 mg, 40 mg.....	47
lithium carbonate tab er 300 mg.....	65	loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg....	65
lithium carbonate tab er 450 mg.....	65	lubiprostone cap 8 mcg.....	58
lithium carbonate tab 300 mg.....	65	lubiprostone cap 24 mcg.....	58
LITHOBID.....	65	LUCEMYRA.....	70
LITHOSTAT.....	61	LUMAKRAS.....	21
LIVALO.....	47	LUMIGAN.....	98
LIVE BETTER ADVANCED LANC.....	149	LUPKYNIS.....	176
LIVE BETTER LANCET SUPER.....	149	lurasidone hcl tab 80 mg.....	65
LIVE BETTER LANCET ULTRA.....	149	lurasidone hcl tab 20 mg, 40 mg, 60 mg, 120 mg.....	65
LIVE BETTER PEN NEEDLES 2.....	149	LYBALVI.....	70
LIVE BETTER PEN NEEDLES 3.....	149	LYNPARZA.....	21
LIVMARLI.....	58	LYRICA.....	82
LIVTENCITY.....	7	LYSODREN.....	21
LODINE.....	76	LYTGOBI.....	21
LODOSYN.....	85	M	
LOKELMA.....	176	MACROBID.....	12
LO LOESTRIN FE.....	29	MACRODANTIN.....	12
LOMOTIL.....	55	mafenide acetate packet for topical soln 5% (50 gm).....	105
LONGS INSULIN SYRINGE/0.5.....	149	MAGELLAN INSULIN SAFETY S.....	149
LONGS LANCETS STANDARD.....	149	MAGELLAN TUBERCULIN SAFET.....	149
LONGS LANCETS THIN.....	149	malathion lotion 0.5%.....	105
LONGS LANCETS ULTRA THIN.....	149	MARATHON MEDICAL PENTIPS.....	149
LONSURF.....	21	maraviroc tab 150 mg.....	7
LOPID.....	47	maraviroc tab 300 mg.....	7
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ ml).....	7	MARPLAN.....	63
lopinavir-ritonavir tab 100-25 mg.....	7	MATULANE.....	21
lopinavir-ritonavir tab 200-50 mg.....	7	MAVENCLAD.....	70
LOPRESSOR.....	40	MAVYRET.....	7
LOPROX.....	105	MAXICOMFORT II PEN NEEDLE.....	149
loratadine & pseudoephedrine tab er 12hr 5-120 mg.....	50	MAXI-COMFORT INSULIN SYRI.....	149
loratadine & pseudoephedrine tab er 24hr 10-240 mg.....	50	MAXICOMFORT INSULIN SYRIN.....	149
loratadine oral soln 5 mg/5ml.....	50	MAXI-COMFORT SAFETY PEN N.....	149
loratadine rapidly-disintegrating tab 10 mg.....	50	MAXIDEX.....	98
loratadine syrup 5 mg/5ml.....	50	MAXITROL.....	98
		MAXX LUBRICATED.....	149
		MAXX PLUS SPERMICIDE LUBR.....	150

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MAXZIDE.....	45	melphalan tab 2 mg.....	22
MAXZIDE-25.....	45	memantine hcl oral solution 2 mg/ml.....	70
MAYZENT.....	70	memantine hcl tab 5 mg, 10 mg.....	70
MAYZENT STARTER PACK.....	70	memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack.....	70
meclizine hcl tab 12.5 mg, 25 mg.....	56	MENACTRA.....	14
MECLOFENAMATE SODIUM.....	76	MENEST.....	27
MEDICHOICE PRE-SET SAFETY.....	150	MENOSTAR.....	27
MEDICHOICE SAFETY LANCET.....	150	MENQUADFI.....	14
MEDICINE SHOPPE LANCETS.....	150	MENTAX.....	105
MEDICINE SHOPPE LANCETS T.....	150	MENVEO.....	14
MEDICINE SHOPPE PEN NEEDL.....	150	MEPERIDINE HCL.....	74
MEDIC INSULIN SYRINGE/0.3.....	150	meprobamate tab 200 mg.....	62
MEDIC INSULIN SYRINGE/0.5.....	150	meprobamate tab 400 mg.....	62
MEDLANCE/EXTRA.....	150	MEPRON.....	12
MEDLANCE/LITE.....	150	mercaptopurine tab 50 mg.....	22
MEDLANCE/UNIVERSAL.....	150	mesalamine cap dr 400 mg.....	58
MEDLANCE PLUS/LITE 25G.....	150	mesalamine cap er 24hr 0.375 gm.....	58
MEDLANCE PLUS EXTRA LANCE.....	150	MESALAMINE DR.....	58
MEDLANCE PLUS LANCETS.....	150	mesalamine enema 4 gm.....	58
MEDLANCE PLUS LANCETS LIT.....	150	mesalamine suppos 1000 mg.....	58
MEDLANCE PLUS LITE LANCET.....	150	mesalamine tab delayed release 1.2 gm.....	58
MEDLANCE PLUS SPECIAL LAN.....	150	MESNEX.....	22
MEDLANCE PLUS SUPERLITE 3.....	150	metaxalone tab 400 mg, 800 mg.....	86
MEDLANCE PLUS UNIVERSAL L.....	150	metformin hcl tab er 24hr 500 mg, 750 mg.....	31
MEDROL.....	25	metformin hcl tab 500 mg, 850 mg, 1000 mg.....	31
MEDROL DOSEPAK.....	25	METHADONE HCL.....	74
medroxyprogesterone acetate im susp 150 mg/ml.....	29	methadone hcl conc 10 mg/ml.....	74
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml.....	29	methadone hcl soln 5 mg/5ml.....	74
medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg.....	30	methadone hcl soln 10 mg/5ml.....	74
mefloquine hcl tab 250 mg.....	10	methadone hcl tab for oral susp 40 mg.....	74
megestrol acetate susp 40 mg/ml.....	21	methadone hcl tab 5 mg, 10 mg.....	74
megestrol acetate tab 20 mg, 40 mg.....	21	METHADOSE.....	74
MEIJER BLOOD GLUCOSE MONI.....	150	METHADOSE SUGAR-FREE.....	74
MEIJER BLOOD GLUCOSE TEST.....	113	methamphetamine hcl tab 5 mg.....	68
MEIJER COLOR LANCETS UNIV.....	150	methazolamide tab 25 mg, 50 mg.....	45
MEIJER ESSENTIAL BLOOD GL.....	113	methenamine hippurate tab 1 gm.....	12
MEIJER LANCETS.....	150	methimazole tab 5 mg, 10 mg.....	35
MEIJER LANCETS THIN.....	150	METHITEST.....	26
MEIJER LANCETS UNIVERSAL.....	150	METHOCARBAMOL.....	86
MEIJER PEN NEEDLES 29G X.....	150	methocarbamol tab 500 mg, 750 mg.....	86
MEIJER PEN NEEDLES 31G X.....	150	METHOTREXATE SODIUM.....	22
MEIJER PREMIUM BLOOD GLUC.....	150	methotrexate sodium for inj 1 gm.....	22
MEIJER SUPER THIN LANCETS.....	150	methotrexate sodium inj 50 mg/2ml (25 mg/ml).....	22
MEIJER TRUE2GO BLOOD GLUC.....	151	methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml).....	22
MEIJER TRUERESULT BLOOD G.....	151	methotrexate sodium tab 2.5 mg (base equiv).....	22
MEIJER TRUETEST BLOOD GLU.....	113	METHOXSALEN.....	105
MEIJER TRUETRACK BLOOD GL.....	113	methscopolamine bromide tab 2.5 mg, 5 mg.....	55
MEKINIST.....	21	methsuximide cap 300 mg.....	82
MEKTOVI.....	21	METHYLDOPA.....	43
MELOXICAM.....	76	methylergonovine maleate tab 0.2 mg.....	35
meloxicam tab 7.5 mg, 15 mg.....	76	METHYLIN.....	68

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methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la).....	68	midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	46
methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd).....	68	MIFEPREX.....	37
methylphenidate hcl chew tab 10 mg.....	68	mifepristone tab 200 mg.....	37
methylphenidate hcl chew tab 2.5 mg, 5 mg.....	68	MIGERGOT.....	78
methylphenidate hcl soln 5 mg/5ml.....	68	miglitol tab 25 mg, 50 mg, 100 mg.....	31
methylphenidate hcl soln 10 mg/5ml.....	68	miglustat cap 100 mg.....	90
methylphenidate hcl tab er 24hr 36 mg.....	68	MINI LANCING DEVICE.....	151
methylphenidate hcl tab er 24hr 27 mg, 54 mg.....	68	MINIPRESS.....	44
methylphenidate hcl tab er 10 mg, 20 mg.....	68	minocycline hcl cap 50 mg, 75 mg, 100 mg.....	3
methylphenidate hcl tab er osmotic release (osm) 36 mg.....	68	minoxidil tab 2.5 mg, 10 mg.....	44
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 54 mg.....	68	MIRCERA.....	90
methylphenidate hcl tab 5 mg, 10 mg, 20 mg.....	68	mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg.....	63
METHYLPHENIDATE HYDROCHLO.....	68	mirtazapine tab 7.5 mg, 45 mg.....	63
methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg.....	26	mirtazapine tab 15 mg, 30 mg.....	63
methylprednisolone tab therapy pack 4 mg (21).....	25	misoprostol tab 100 mcg, 200 mcg.....	55
methyltestosterone cap 10 mg.....	26	10ML SYRINGE LUER-LOK TIP.....	176
metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv).....	58	1ML VANISHPOINT TUBERCULI.....	175
metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent).....	58	MM EASY TOUCH BLOOD GLUCO.....	151
metolazone tab 2.5 mg, 5 mg, 10 mg.....	45	MM EASY TOUCH GLUCOSE TES.....	113
METOPIRONE.....	113	MM INSULIN SYRINGE/U-100/.....	151
metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mg, 100-50 mg.....	44	MM LANCING DEVICE.....	151
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv).....	40	MM PEN NEEDLES 31G X 3/16.....	151
metoprolol tartrate tab 50 mg, 100 mg.....	40	MM PEN NEEDLES 31G X 5/16.....	151
metoprolol tartrate tab 25 mg, 37.5 mg, 75 mg.....	40	MM PEN NEEDLES 32G X 5/32.....	151
METROGEL.....	105	MM PEN NEEDLES 31G X 1/4".....	151
METROLOTION.....	105	M-M-R II.....	14
metronidazole cap 375 mg.....	12	MM TWIST LANCETS.....	151
metronidazole cream 0.75%.....	105	M-NATAL PLUS.....	87
metronidazole gel 0.75%.....	105	modafinil tab 100 mg, 200 mg.....	68
metronidazole gel 1%.....	105	MODERNA COVID-19 VACCINE/.....	14
metronidazole lotion 0.75%.....	105	moexipril hcl tab 7.5 mg, 15 mg.....	44
metronidazole tab 250 mg, 500 mg.....	12	MOLINDONE HYDROCHLORIDE.....	65
metronidazole vaginal gel 0.75%.....	60	mometasone furoate cream 0.1%.....	105
mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	42	mometasone furoate oint 0.1%.....	105
MIACALCIN.....	37	mometasone furoate solution 0.1% (lotion).....	105
MICONAZOLE 3.....	60	MONOJECT BLUNT CANNULA/20.....	151
MICRODOT BLOOD GLUCOSE MO.....	151	MONOJECT BLUNT CANNULA/21.....	151
MICRODOT PEN NEEDLE/31G X.....	151	MONOJECT HYPO/ALUM HUB/16.....	152
MICRODOT PEN NEEDLE/32G X.....	151	MONOJECT HYPO/ALUM HUB/18.....	152
MICRODOT PEN NEEDLE/33G X.....	151	MONOJECT HYPO/ALUM HUB/LU.....	151
MICRODOT TEST STRIPS.....	113	MONOJECT HYPO/POLYPROPYLE.....	152
MICRODOT XTRA TEST STRIPS.....	113	MONOJECT HYPODERMIC NEEDL.....	152
MICROLET LANCETS.....	151	MONOJECT INSULIN SYRINGE.....	152
MICROLET NEXT.....	151	MONOJECT INSULIN SYRINGE/.....	152
		MONOJECT MAGELLAN SAFETY.....	152
		MONOJECT MEDICATION TRANS.....	152
		MONOJECT 1ML LUER LOCK TU.....	153
		MONOJECT STANDARD HYPODER.....	152
		MONOJECT SYRINGE PHARMACY.....	152
		MONOJECT TB SYRINGE-NDL 1.....	152
		MONOJECT TUBERCULIN SAFET.....	152
		MONOJECT TUBERCULIN SYRIN.....	152

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MONOJECT ULTRA COMFORT IN.....	153
MONOLET LANCETS.....	153
MONOLET OPD LANCETS.....	153
MONOLETTOR SAFETY LANCETS.....	153
montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv).....	52
montelukast sodium tab 10 mg (base equiv).....	53
MONUROL.....	12
MORPHINE SULFATE.....	74
MORPHINE SULFATE ER.....	74
morphine sulfate oral soln 10 mg/5ml.....	74
morphine sulfate oral soln 100 mg/5ml (20 mg/ml).....	74
morphine sulfate tab er 100 mg, 200 mg.....	74
morphine sulfate tab er 15 mg, 30 mg, 60 mg.....	74
morphine sulfate tab 15 mg.....	74
morphine sulfate tab 30 mg.....	74
MOUNJARO.....	31
MOVANTIK.....	58
MOVIPREP.....	54
moxifloxacin hcl ophth soln 0.5% (base equiv).....	98
moxifloxacin hcl tab 400 mg (base equiv).....	3
MPD SAFETY LANCET 21G/1.8.....	153
MPD SAFETY LANCET 28G/1.8.....	153
MPD SAFETY LANCET 30G/1.8.....	153
MPD SAFETY LANCETS 23G/1.....	153
MS INSULIN SYRINGE/0.3ML/.....	153
MS INSULIN SYRINGE/0.5ML/.....	153
MS INSULIN SYRINGE/1ML/29.....	153
MS INSULIN SYRINGE/1ML/30.....	153
MS INSULIN SYRINGE/1ML/31.....	153
MULPLETA.....	90
MULTAQ.....	42
MULTI-LANCET DEVICE.....	153
mupirocin oint 2%.....	105
MYALEPT.....	37
MYAMBUTOL.....	4
MYCAPSSA.....	37
MYCOBUTIN.....	4
mycophenolate mofetil cap 250 mg.....	176
mycophenolate mofetil for oral susp 200 mg/ml.....	176
mycophenolate mofetil tab 500 mg.....	177
mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv).....	177
MYDRIACYL.....	98
MYFEMBREE.....	27
MYFORTIC.....	177
MYGLUCOHEALTH BLOOD GLUCO.....	113
MYGLUCOHEALTH MGH SOFTLAN.....	153
MYLERAN.....	22
MYRBETRIQ.....	59
MYTESI.....	55

N

nabumetone tab 500 mg, 750 mg.....	76
nadolol tab 20 mg, 40 mg, 80 mg.....	40
naloxone hcl inj 0.4 mg/ml.....	107
naloxone hcl inj 4 mg/10ml.....	107
naloxone hcl nasal spray 4 mg/0.1ml.....	108
naloxone hcl soln prefilled syringe 2 mg/2ml.....	108
NALOXONE HYDROCHLORIDE.....	108
naltrexone hcl tab 50 mg.....	108
NAPROSYN.....	76
naproxen sodium tab 275 mg.....	76
naproxen sodium tab 550 mg.....	76
naproxen tab 500 mg.....	77
naproxen tab 250 mg, 375 mg.....	76
naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv).....	78
NARCAN.....	108
NARDIL.....	63
NATACYN.....	98
NATALVIT.....	87
NATAZIA.....	29
nateglinide tab 60 mg, 120 mg.....	31
NATROBA.....	105
NAYZILAM.....	82
neбиволol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent).....	40
NEBUPENT.....	12
NEFAZODONE HYDROCHLORIDE.....	63
NEOMYCIN/POLYMYXIN/GRAMIC.....	98
neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin.....	98
neomycin-polymyxin-dexamethasone ophth oint 0.1%.....	98
neomycin-polymyxin-dexamethasone ophth susp 0.1%.....	98
neomycin-polymyxin-hc otic soln 1%.....	100
neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%.....	100
neomycin sulfate tab 500 mg.....	4
NEONATAL COMPLETE.....	87
NEONATAL PLUS.....	87
NEORAL.....	177
NEO-SYNALAR.....	105
NERLYNX.....	22
NESTABS.....	87
NEULASTA.....	90
NEUPRO.....	85
NEURONTIN.....	82
NEUTEK 2TEK TEST STRIPS.....	113
NEVIRAPINE.....	8
NEVIRAPINE ER.....	8

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nevirapine tab er 24hr 400 mg.....	8	norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	29
nevirapine tab 200 mg.....	8	norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg, 1.5 mg-30 mcg.....	29
NEXAVAR.....	22	norethindrone ace-ethinyl estradiol-fe cap 1 mg-20 mcg (24).....	29
NEXIUM.....	55	norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg, 1 mg-5 mcg.....	27
NEXLETOL.....	47	norethindrone acetate tab 5 mg.....	30
NEXLIZET.....	47	norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg.....	29
niacin tab er 1000 mg (antihyperlipidemic).....	47	norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg, 0.5-35/1-35/0.5-35 mg-mcg.....	29
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic).....	47	norethindrone tab 0.35 mg.....	29
nicardipine hcl cap 20 mg, 30 mg.....	41	norgestimate & ethinyl estradiol tab 0.25 mg-35 mcg.....	29
nicotine polacrilex gum 2 mg, 4 mg.....	71	norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg, 0.18-35/0.215-35/0.25-35 mg-mcg.....	29
nicotine polacrilex lozenge 2 mg, 4 mg.....	71	norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....	29
nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr.....	71	NORPACE.....	42
NICOTROL INHALER.....	71	NORPACE CR.....	42
NICOTROL NS.....	71	NORPRAMIN.....	63
nifedipine cap 10 mg, 20 mg.....	41	NORTRIPTYLINE HCL.....	63
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg.....	41	nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg.....	63
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg.....	41	NORVIR.....	8
NILANDRON.....	22	NOURIANZ.....	85
nilutamide tab 150 mg.....	22	NOVA MAX BLOOD GLUCOSE MO.....	153
nimodipine cap 30 mg.....	41	NOVA MAX GLUCOSE TEST STR.....	113
NINLARO.....	22	NOVA SAFETY LANCETS 23G.....	153
NISOLDIPINE ER.....	41	NOVA SAFETY LANCETS 28G.....	153
nisoldipine tab er 24hr 8.5 mg, 17 mg, 34 mg.....	41	NOVA SUREFLEX LANCETS.....	153
nitazoxanide tab 500 mg.....	12	NOVA SUREFLEX LANCING DEV.....	153
nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg.....	37	NOVAVAX COVID-19 VACCINE.....	14
NITRO-BID.....	39	NOVOEIGHT.....	94
NITRO-DUR.....	39	NOVOFINE AUTOCOVER PEN NE.....	153
nitrofurantoin macrocrystalline cap 25 mg, 50 mg, 100 mg.....	12	NOVOFINE PEN NEEDLE 32G X.....	154
nitrofurantoin monohydrate macrocrystalline cap 100 mg.....	12	NOVOFINE PLUS PEN NEEDLE.....	154
nitrofurantoin susp 25 mg/5ml.....	12	NOVOLIN 70/30.....	34
nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg.....	39	NOVOLIN 70/30 FLEXPEN.....	34
nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr.....	39	NOVOLIN 70/30 FLEXPEN REL.....	34
nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray).....	39	NOVOLIN 70/30 RELION.....	34
NITROLINGUAL PUMPSPRAY.....	39	NOVOLIN N.....	33
NITROSTAT.....	39	NOVOLIN N FLEXPEN.....	34
NITRO-TIME.....	39	NOVOLIN N FLEXPEN RELION.....	34
NITYR.....	37	NOVOLIN N RELION.....	34
NIVA-PLUS.....	87	NOVOLIN R.....	33
NIVESTYM.....	90	NOVOLIN R FLEXPEN.....	33
NIZATIDINE.....	56	NOVOLIN R FLEXPEN RELION.....	33
NORDITROPIN FLEXPEN.....	37	NOVOLIN R RELION.....	33
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr.....	29	NOVOLOG.....	33
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg.....	29	NOVOLOG FLEXPEN.....	33
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg, 0.5 mg-35 mcg, 1 mg-35 mcg.....	29	NOVOLOG FLEXPEN RELION.....	33
		NOVOLOG MIX 70/30.....	34

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NOVOLOG MIX 70/30 PREFILL.....	34	olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg.....	65
NOVOLOG MIX 70/30 RELION.....	34	olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg.....	65
NOVOLOG PENFILL.....	33	olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg.....	44
NOVOLOG RELION.....	33	olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg.....	44
NOVOPEN ECHO.....	154	olmesartan medoxomil tab 5 mg.....	44
NOVOSEVEN RT.....	94	olmesartan medoxomil tab 20 mg, 40 mg.....	44
NOXAFIL.....	5	olopatadine hcl nasal soln 0.6%.....	50
NP THYROID 15.....	35	OLUMIANT.....	77
NP THYROID 30.....	35	omega-3-acid ethyl esters cap 1 gm.....	47
NP THYROID 60.....	35	omeprazole cap delayed release 20 mg.....	56
NP THYROID 90.....	35	omeprazole cap delayed release 10 mg, 40 mg.....	56
NP THYROID 120.....	35	OMNIFLEX DIAPHRAGM.....	154
NUBEQA.....	22	OMNIPOD CLASSIC PODS (GEN.....	154
NUCALA.....	53	OMNIPOD DASH INTRO KIT (G.....	154
NUCYNTA ER.....	74	OMNIPOD DASH PODS (GEN 4).....	154
NUDEXTA.....	71	OMNIPOD 5 G6 INTRO KIT (G.....	154
NULIBRY.....	37	OMNIPOD 5 G6 PODS (GEN 5).....	154
NUPLAZID.....	65	ON CALL EXPRESS BLOOD GLU.....	113
NURTEC.....	78	ONDANSETRON HCL.....	56
NUVARING.....	29	ondansetron hcl oral soln 4 mg/5ml.....	56
NUWIQ.....	94	ondansetron hcl tab 4 mg, 8 mg.....	56
NUZYRA.....	3	ondansetron orally disintegrating tab 4 mg, 8 mg.....	56
NYMALIZE.....	41	ONE DROP BLOOD GLUCOSE MO.....	154
nystatin cream 100000 unit/gm.....	105	ONE DROP BLOOD GLUCOSE TE.....	113
nystatin oint 100000 unit/gm.....	105	ONETOUCH DELICA LANCETS E.....	154
nystatin susp 100000 unit/ml.....	100	ONETOUCH DELICA LANCETS F.....	154
nystatin tab 500000 unit.....	5	ONETOUCH DELICA LANCING D.....	154
nystatin topical powder 100000 unit/gm.....	105	ONETOUCH DELICA PLUS LANC.....	154
nystatin-triamcinolone cream 100000-0.1 unit/gm-%.....	105	ONETOUCH DELICA SAFETY LA.....	154
nystatin-triamcinolone oint 100000-0.1 unit/gm-%.....	105	ONETOUCH LANCETS.....	154
NYVEPRIA.....	91	ONETOUCH ULTRA.....	113
O		ONETOUCH ULTRA 2.....	154
OBIZUR.....	94	ONETOUCH ULTRA BLUE.....	114
OBSTETRIX DHA.....	87	ONETOUCH ULTRASOFT 2 LANC.....	154
OBSTETRIX EC.....	88	ONETOUCH ULTRA TEST STRIP.....	114
OBSTETRIX ONE.....	88	ONETOUCH VERIO.....	154
OALIVA.....	58	ONETOUCH VERIO FLEX BLOOD.....	154
OCTREOTIDE ACETATE.....	37	ONETOUCH VERIO IN VITRO M.....	114
octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml).....	37	ONETOUCH VERIO IQ BLOOD G.....	154
octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml).....	37	ONETOUCH VERIO REFLECT.....	154
OCUFLOX.....	98	ONETOUCH VERIO TEST STRIP.....	114
ODACTRA.....	17	ONE VITE WOMENS PRENATAL.....	88
ODEFSEY.....	8	ONFI.....	82
ODOMZO.....	22	ONUREG.....	22
OFEV.....	54	OPSUMIT.....	48
OFLOXACIN.....	3	OPTIONS GYNOL II VAGINAL.....	60
ofloxacin ophth soln 0.3%.....	98	OPTIUMEZ TEST STRIPS.....	114
ofloxacin otic soln 0.3%.....	100	OPZELURA.....	105
ofloxacin tab 400 mg.....	3		

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ORAVIG.....	100
ORENCIA.....	77
ORENCIA CLICKJECT.....	77
ORENITRAM.....	48
ORENITRAM TITRATION KIT M.....	48
ORFADIN.....	37
ORGOVYX.....	22
ORIAHNN.....	27
ORILISSA.....	37
ORKAMBI.....	54
ORLADEYO.....	94
orphenadrine citrate tab er 12hr 100 mg.....	86
ORSERDU.....	22
oseltamivir phosphate cap 30 mg (base equiv).....	8
oseltamivir phosphate cap 45 mg (base equiv), 75 mg (base equiv).....	8
oseltamivir phosphate for susp 6 mg/ml (base equiv).....	8
OSPHENA.....	37
OTEZLA.....	77
OTREXUP.....	77
OVIDE.....	105
OVIDREL.....	37
oxandrolone tab 2.5 mg, 10 mg.....	26
oxaprozin tab 600 mg.....	77
oxazepam cap 10 mg, 15 mg, 30 mg.....	62
OXBRYTA.....	91
oxcarbazepine susp 300 mg/5ml (60 mg/ml).....	82
oxcarbazepine tab 150 mg, 300 mg, 600 mg.....	82
OXERVATE.....	98
oxiconazole nitrate cream 1%.....	106
OXTELLAR XR.....	82
OXYBUTYNIN CHLORIDE.....	59
oxybutynin chloride syrup 5 mg/5ml.....	59
oxybutynin chloride tab er 24hr 5 mg.....	59
oxybutynin chloride tab er 24hr 10 mg.....	59
oxybutynin chloride tab er 24hr 15 mg.....	59
oxybutynin chloride tab 5 mg.....	59
OXYCODONE/ACETAMINOPHEN.....	75
oxycodone hcl cap 5 mg.....	74
oxycodone hcl conc 100 mg/5ml (20 mg/ml).....	74
oxycodone hcl soln 5 mg/5ml.....	74
oxycodone hcl tab 5 mg.....	74
oxycodone hcl tab 10 mg.....	75
oxycodone hcl tab 20 mg.....	75
oxycodone hcl tab 15 mg, 30 mg.....	75
OXYCODONE HYDROCHLORIDE/A.....	75
oxycodone w/ acetaminophen tab 7.5-325 mg.....	75
oxycodone w/ acetaminophen tab 10-325 mg.....	75
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg.....	75
OZEMPIC.....	31

P

PALFORZIA INITIAL DOSE ES.....	17
PALFORZIA LEVEL 1.....	17
PALFORZIA LEVEL 2.....	17
PALFORZIA LEVEL 3.....	17
PALFORZIA LEVEL 4.....	17
PALFORZIA LEVEL 5.....	17
PALFORZIA LEVEL 6.....	17
PALFORZIA LEVEL 7.....	17
PALFORZIA LEVEL 8.....	17
PALFORZIA LEVEL 9.....	17
PALFORZIA LEVEL 10.....	17
PALFORZIA LEVEL 11 (MAINT.....	17
PALFORZIA LEVEL 11 (TITRA.....	17
paliperidone tab er 24hr 6 mg.....	65
paliperidone tab er 24hr 1.5 mg, 3 mg, 9 mg.....	65
PALYNZIQ.....	37
PAMELOR.....	63
PANRETIN.....	106
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv).....	56
pantoprazole sodium for delayed release susp packet 40 mg.....	56
paricalcitol cap 4 mcg.....	38
paricalcitol cap 1 mcg, 2 mcg.....	38
PARLODEL.....	85
PARNATE.....	63
paromomycin sulfate cap 250 mg.....	4
paroxetine hcl oral susp 10 mg/5ml (base equiv).....	63
paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg.....	63
paroxetine mesylate cap 7.5 mg (base equiv).....	71
PAXLOVID.....	8
PC LANCETS SUPER THIN 30G.....	154
PC UNIFINE PENTIPS 29G X.....	154
PC UNIFINE PENTIPS 31G X.....	155
PEDIAPRED.....	26
PEDIARIX.....	16
PEDVAX HIB.....	14
PEGASYS.....	8
peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm.....	54
peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm.....	55
peg 3350-kcl-sod bicarb-nacl for soln 420 gm.....	55
PEG-PREP.....	55
PEMAZYRE.....	22
penciclovir cream 1%.....	106
penicillamine tab 250 mg.....	177
PENICILLIN V POTASSIUM.....	1
penicillin v potassium tab 250 mg, 500 mg.....	1
PEN NEEDLES.....	155
PEN NEEDLES/29G X 1/2".....	155

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PEN NEEDLES/31G X 1/4".....	155	PHEBURANE.....	38
PEN NEEDLES/31G X 3/16".....	156	PHENELZINE SULFATE.....	63
PEN NEEDLES/31G X 5/16".....	156	phenobarbital elixir 20 mg/5ml.....	66
PEN NEEDLES/32G X 5/32".....	156	phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg.....	66
PEN NEEDLES/31G X 6MM.....	156	phenoxybenzamine hcl cap 10 mg.....	44
PEN NEEDLES 31GX5/16".....	155	phenylephrine hcl ophth soln 2.5%, 10%.....	98
PEN NEEDLES 31G X 3/16".....	155	PHENYTEK.....	82
PEN NEEDLES 33G X 5/32".....	155	phenytoin chew tab 50 mg.....	82
PEN NEEDLES 30GX5MM.....	155	phenytoin sodium extended cap 100 mg.....	82
PEN NEEDLES 30GX8MM.....	155	phenytoin sodium extended cap 200 mg, 300 mg.....	82
PEN NEEDLES 31GX5MM.....	155	phenytoin susp 125 mg/5ml.....	82
PEN NEEDLES 31GX8MM.....	155	PHEXXI.....	60
PEN NEEDLES 32GX4MM.....	155	PHOSLYRA.....	58
PEN NEEDLES 29GX12MM.....	155	PHOSPHOLINE IODIDE.....	98
PEN NEEDLES 31G X 5MM.....	155	phytonadione tab 5 mg.....	87
PEN NEEDLES 31G X 6MM.....	155	PIFELTRO.....	8
PEN NEEDLES 31G X 8MM.....	155	pilocarpine hcl ophth soln 1%, 2%, 4%.....	98
PEN NEEDLES 32G X 4MM.....	155	pilocarpine hcl tab 5 mg, 7.5 mg.....	100
PEN NEEDLES 32G X 5MM.....	155	pimecrolimus cream 1%.....	106
PEN NEEDLES 32G X 6MM.....	155	PIMOZIDE.....	71
PEN NEEDLES 31GX8MM (5/16.....	155	pindolol tab 5 mg, 10 mg.....	40
PEN NEEDLES 31GX6MM (1/4".....	155	pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg.....	31
PENTACEL.....	16	pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv).....	31
pentamidine isethionate for nebulization soln 300 mg.....	12	PIP BLOOD GLUCOSE MONITOR.....	156
pentazocine w/ naloxone hcl tab 50-0.5 mg.....	75	PIP BLOOD GLUCOSE TEST ST.....	114
PENTIPS 31GX5MM.....	156	PIP LANCETS/28G.....	156
PENTIPS 31GX6MM.....	156	PIP LANCETS/30G.....	156
PENTIPS 31GX8MM.....	156	PIP PEN NEEDLES 31G X 5MM.....	157
PENTIPS 32GX4MM.....	156	PIP PEN NEEDLES 32G X 4MM.....	157
PENTIPS 32GX6MM.....	156	PIQRAY 200MG DAILY DOSE.....	22
PENTIPS 29GX12MM.....	156	PIQRAY 250MG DAILY DOSE.....	22
PENTIPS 29G X 12MM.....	156	PIQRAY 300MG DAILY DOSE.....	22
PENTIPS 31G X 5MM.....	156	PIRFENIDONE.....	54
PENTIPS 31G X 8MM.....	156	pirfenidone cap 267 mg.....	54
PENTIPS 32G X 4MM.....	156	pirfenidone tab 267 mg.....	54
PEN-TOTE.....	156	pirfenidone tab 801 mg.....	54
pentoxifylline tab er 400 mg.....	94	piroxicam cap 10 mg, 20 mg.....	77
PERFECT LANCETS 30G.....	156	PLAN B ONE-STEP.....	29
PERFECT PRESSURE ACTIVATE.....	156	PLAQUENIL.....	11
PERIDEX.....	100	PLEGRIDY.....	71
PERINDOPRIL ERBUMINE.....	44	PLEGRIDY STARTER PACK.....	71
perindopril erbumine tab 2 mg, 4 mg.....	44	PLENVU.....	55
permethrin cream 5%.....	106	PNEUMOVAX 23.....	15
PERPHENAZINE/AMITRIPTYLIN.....	71	PNEUMOVAX 23/1 DOSE.....	15
perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg.....	65	PNV-DHA+DOCUSATE.....	88
PFIZER-BIONTECH COVID-19.....	14	PNV-OMEGA.....	88
PHARMACIST CHOICE AUTOCOD.....	114	POCKETCHEM EZ BLOOD GLUCO.....	114
PHARMACIST CHOICE MINI BL.....	156	podofilox soln 0.5%.....	106
PHARMACIST CHOICE NO CODI.....	114	POGO AUTOMATIC BLOOD GLUC.....	157
PHARMACIST CHOICE SELECT.....	156	POGO AUTOMATIC TEST CARTR.....	114
PHARMACIST CHOICE ULTRA T.....	156		
PHARMACY COUNTER LANCETS.....	156		

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POLY HUB NEEDLE/18G X 1-1.....	157	PRED MILD.....	98
POLY HUB NEEDLE/21G X 1-1.....	157	PREDNISOLONE.....	26
POLY HUB NEEDLE/22G X 1-1.....	157	PREDNISOLONE ACETATE.....	98
POLY HUB NEEDLE/23G X 1-1.....	157	PREDNISOLONE SODIUM PHOSP.....	26
POLY HUB NEEDLE/25G X 1-1.....	157	prednisolone sodium phosphate oral soln 25 mg/5ml	
POLY HUB NEEDLE/27G X 1-1.....	157	(base eq).....	26
POLY HUB NEEDLE/25G X 5/8.....	157	prednisolone sod phosphate oral soln 15 mg/5ml	
POLY HUB NEEDLE/27G X 1/2.....	157	(base equiv).....	26
POLY HUB NEEDLE/30G X 1/2.....	157	prednisolone sod phosph oral soln 6.7 mg/5ml (5	
POLY HUB NEEDLE/18G X 1".....	157	mg/5ml base).....	26
POLY HUB NEEDLE/21G X 1".....	157	prednisolone tab 5 mg.....	26
POLY HUB NEEDLE/22G X 1".....	157	PREDNISONE.....	26
POLY HUB NEEDLE/23G X 1".....	157	PREDNISONE INTENSOL.....	26
POLY HUB NEEDLE/25G X 1".....	157	prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50	
polymyxin b-trimethoprim ophth soln 10000 unit/		mg.....	26
ml-0.1%.....	98	prednisone tab therapy pack 5 mg (21), 5 mg (48), 10	
POLYTRIM.....	98	mg (21), 10 mg (48).....	26
POMALYST.....	22	PREFERRED PLUS INSULIN SY.....	157
PONVORY.....	71	PREFERRED PLUS LANCETS CO.....	157
PONVORY 14-DAY STARTER PA.....	71	PREFERRED PLUS LANCETS SU.....	157
posaconazole susp 40 mg/ml.....	5	PREFERRED PLUS LANCETS TH.....	157
posaconazole tab delayed release 100 mg.....	5	PREFERRED PLUS UNIFINE PE.....	158
potassium chloride cap er 8 meq, 10 meq.....	89	PREFEST.....	28
POTASSIUM CHLORIDE ER.....	89	pregabalin cap 225 mg, 300 mg.....	83
potassium chloride microencapsulated crys er tab 10		pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg,	
meq, 15 meq, 20 meq.....	89	200 mg.....	83
potassium chloride oral soln 10% (20 meq/15ml), 20%		pregabalin soln 20 mg/ml.....	83
(40 meq/15ml).....	89	PREHEVBRIO.....	15
potassium chloride tab er 10 meq, 20 meq (1500		PREMARIN.....	28
mg).....	89	PREMIUM BLOOD GLUCOSE TES.....	114
potassium chloride tab er 8 meq (600 mg).....	89	PREMPHASE.....	28
potassium citrate tab er 5 meq (540 mg).....	61	PREMPRO.....	28
potassium citrate tab er 10 meq (1080 mg).....	61	PRENAISSANCE.....	88
potassium citrate tab er 15 meq (1620 mg).....	61	PRENATAL.....	88
potassium phosphate monobasic tab 500 mg.....	89	PRENATAL 19.....	88
pot phos monobasic w/sod phos di & monobas tab		PRENATAL PLUS.....	88
155-852-130mg.....	89	PRENATAL PLUS VITAMIN AND.....	88
PRADAXA.....	92	PRENATAL-U.....	88
pramipexole dihydrochloride tab er 24hr 0.375 mg,		PRESTIGE TEST STRIPS.....	114
0.75 mg, 1.5 mg, 2.25 mg, 3 mg, 3.75 mg, 4.5 mg.....	85	PRETOMANID.....	4
pramipexole dihydrochloride tab 0.125 mg, 0.25 mg,		PREVENT DROPSAFE SAFETY P.....	158
0.5 mg, 0.75 mg, 1 mg, 1.5 mg.....	85	PREVENT SAFETY PEN NEEDLE.....	158
prasugrel hcl tab 5 mg (base equiv), 10 mg (base		PREVIDENT RINSE.....	100
equiv).....	94	PREVNAR 13.....	15
pravastatin sodium tab 80 mg.....	47	PREVNAR 20.....	15
pravastatin sodium tab 10 mg, 20 mg, 40 mg.....	47	PREVYMIS.....	8
praziquantel tab 600 mg.....	11	PREZCOBIX.....	8
prazosin hcl cap 1 mg, 2 mg, 5 mg.....	44	PREZISTA.....	8
PRECISION SOF-TACT TEST S.....	114	PRIFTIN.....	4
PRECISION SURE-DOSE INSUL.....	157	PRIMAQUINE PHOSPHATE.....	11
PRECISION THINS GP LANCET.....	157	primaquine phosphate tab 26.3 mg (15 mg base).....	11
PRECISION XTRA.....	157	primidone tab 50 mg, 250 mg.....	83
PRECISION XTRA BLOOD GLUC.....	114	PRIORIX.....	15

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probenecid tab 500 mg.....	79	pseudoephed-bromphen-dm syrup 30-2-10 mg/5ml.....	51
prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent).....	65	PSS SELECT GP LANCETS.....	159
prochlorperazine suppos 25 mg.....	65	PSS SELECT SAFETY LANCETS.....	159
PRO COMFORT INSULIN SYRIN.....	158	PTS PANELS EGLU.....	114
PRO COMFORT PEN NEEDLES/.....	158	PULMOZYME.....	54
PRO COMFORT SAFETY LANCET.....	158	PURE COMFORT PEN NEEDLE 3.....	159
PROCRIT.....	91	PURE COMFORT PEN NEEDLE/3.....	159
PROCTOFOAM HC.....	101	PURE COMFORT SAFETY PEN N.....	159
PROCYSBI.....	61	PURIXAN.....	22
PRODIGY AUTOCODE BLOOD GL.....	158	PX ADVANCED LANCING DEVIC.....	159
PRODIGY INSULIN SYRINGE/U.....	158	PX EXTRA SHORT PEN NEEDLE.....	159
PRODIGY INSULIN SYRINGE/1.....	158	PX INSULIN SYRINGE/U-100/.....	159
PRODIGY LANCING DEVICE.....	158	PX LANCET AUTO INJECTOR.....	159
PRODIGY NO CODING BLOOD G.....	114	PX LANCETS MICROTHIN 33G.....	159
PRODIGY POCKET BLOOD GLUC.....	158	PX LANCETS ULTRA THIN.....	159
PRODIGY PRESSURE ACTIVATE.....	158	PX LANCETS ULTRA THIN 28G.....	159
PRODIGY SAFETY LANCETS.....	158	PX MINI PEN NEEDLES 31GX5.....	159
PRODIGY TWIST TOP LANCETS.....	158	PX PEN NEEDLE 31GX8MM.....	159
PRODIGY VOICE BLOOD GLUCO.....	158	PX PEN NEEDLE 29GX12MM.....	159
PROFILNINE.....	94	PX SHORTLENGTH PEN NEEDLE.....	159
progesterone cap 100 mg, 200 mg.....	30	pyrazinamide tab 500 mg.....	4
PROGLYCEM.....	31	pyridostigmine bromide oral soln 60 mg/5ml.....	86
PROGRAF.....	177	pyridostigmine bromide tab er 180 mg.....	86
PROMACTA.....	91	pyridostigmine bromide tab 60 mg.....	87
promethazine-dm syrup 6.25-15 mg/5ml.....	51	pyrimethamine tab 25 mg.....	11
promethazine hcl suppos 12.5 mg, 25 mg.....	50	PYRUKYND.....	95
promethazine hcl syrup 6.25 mg/5ml.....	50	PYRUKYND TAPER PACK.....	95
promethazine hcl tab 12.5 mg, 25 mg, 50 mg.....	50	Q	
PROMETHAZINE VC.....	51	QC ADVANCED LANCING DEVIC.....	159
PROMETHAZINE VC/CODEINE.....	51	QC INSULIN SYRINGE/0.3ML/.....	159
promethazine w/ codeine syrup 6.25-10 mg/5ml.....	51	QC INSULIN SYRINGE/0.5ML/.....	159
PROMETHEGAN.....	50	QC INSULIN SYRINGE/1ML/29.....	159
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg.....	42	QC INSULIN SYRINGE/1ML/31.....	159
propafenone hcl tab 150 mg, 225 mg, 300 mg.....	42	QC LANCETS SUPER THIN.....	159
proparacaine hcl ophth soln 0.5%.....	98	QC LANCETS ULTRA THIN.....	159
PROPRANOLOL HCL.....	40	QC PEN NEEDLES 29G X 12MM.....	159
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg.....	40	QC PEN NEEDLES 31G X 6MM.....	159
propranolol hcl oral soln 20 mg/5ml.....	40	QC PEN NEEDLES 31G X 8MM.....	160
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg.....	40	QC UNIFINE PENTIPS 32GX4M.....	160
propylthiouracil tab 50 mg.....	35	QC UNILET LANCETS 33G/MIC.....	160
PROQUAD.....	15	QC UNILET LANCETS 28G/ULT.....	160
PROSCAR.....	61	QINLOCK.....	22
protriptyline hcl tab 5 mg, 10 mg.....	63	QUADRACEL.....	16
PROVERA.....	30	QUALAQUIN.....	11
PROVIDA OB.....	88	QUDEXY XR.....	83
PRO VOICE V8/V9 BLOOD GLU.....	114	QUESTRAN.....	47
PRO VOICE V8 BLOOD GLUCOS.....	158	QUESTRAN LIGHT.....	47
PRO VOICE V9 BLOOD GLUCOS.....	158	QUETIAPINE FUMARATE.....	65
PRUDOXIN.....	106	quetiapine fumarate tab er 24hr 150 mg, 200 mg.....	65
		quetiapine fumarate tab er 24hr 50 mg, 300 mg, 400 mg.....	65
		quetiapine fumarate tab 300 mg, 400 mg.....	66

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quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg.....	66	REBINYN.....	95
QUICKTEK.....	160	RECOMBINATE.....	95
QUICKTEK TEST STRIPS.....	114	RECOMBIVAX HB.....	15
QUILLICHEW ER.....	68	RECTIV.....	101
QUILLIVANT XR.....	69	REDITREX.....	77
QUINAPRIL/HYDROCHLOROTHIA.....	44	REFUAH PLUS BLOOD GLUCOSE.....	114
quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg.....	44	REGLAN.....	58
quinidine gluconate tab er 324 mg.....	42	REGRANEX.....	106
QUINIDINE SULFATE.....	42	RELENZA DISKHALER.....	8
quinine sulfate cap 324 mg.....	11	RELION CONFIRM/MICRO TEST.....	114
QUINTET AC BLOOD GLUCOSE.....	114	RELION CONFIRM BLOOD GLUC.....	161
QUINTET BLOOD GLUCOSE MON.....	160	RELION 2-IN-1 LANCET DEV.....	162
QUINTET BLOOD GLUCOSE TES.....	114	RELION 2-IN-1 LANCING DEV.....	162
QULIPTA.....	78	RELION INSULIN SYRINGE 0.....	161
QVAR REDIHALER.....	53	RELION INSULIN SYRINGE/U.....	161
		RELION INSULIN SYRINGE 1M.....	161
R		RELION KETONE TEST STRIPS.....	114
rabeprazole sodium ec tab 20 mg.....	56	RELION LANCETS.....	161
RADICAVA ORS.....	86	RELION LANCETS MICRO-THIN.....	161
RADICAVA ORS STARTER KIT.....	86	RELION LANCETS THIN 26G.....	161
RADIOGARDASE.....	108	RELION LANCETS ULTRA-THIN.....	161
RA E-ZJECT LANCETS 28G.....	160	RELION LANCING DEVICE.....	161
RA E-ZJECT LANCETS THIN 2.....	160	RELION MICRO BLOOD GLUCOS.....	161
RA E-ZJECT LANCETS ULTRA.....	160	RELION MINI PEN NEEDLES 3.....	161
RAGWITEK.....	17	RELION PEN NEEDLES/31G X.....	161
RA INSULIN SYRINGE/0.5ML/.....	160	RELION PEN NEEDLES 29GX12.....	161
RA INSULIN SYRINGE/1ML/29.....	160	RELION PEN NEEDLES 31G X.....	161
RA INSULIN SYRINGE/U-100/.....	160	RELION PEN NEEDLES 32G X.....	161
raloxifene hcl tab 60 mg.....	38	RELION PEN NEEDLES 31GX5/.....	161
ramelteon tab 8 mg.....	66	RELION PEN NEEDLES 31GX6M.....	161
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg.....	44	RELION PEN NEEDLES 31GX8M.....	161
ranolazine tab er 12hr 500 mg, 1000 mg.....	39	RELION PEN NEEDLES 32GX4M.....	161
RAPAFLO.....	61	RELION PREMIER BLOOD GLUC.....	114
RAPAMUNE.....	177	RELION PREMIER BLU BLOOD.....	161
RA PEN NEEDLES 31G X 5MM.....	160	RELION PREMIER CLASSIC BL.....	161
RA PEN NEEDLES 31G X 8MM.....	160	RELION PREMIER COMPACT BL.....	162
rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv).....	85	RELION PREMIER VOICE BLOO.....	162
RAVICTI.....	38	RELION PRIME BLOOD GLUCOS.....	115
RAYA SURE PEN NEEDLE 29G.....	160	RELION R.....	33
RAYA SURE PEN NEEDLE 31G.....	160	RELION SHORT PEN NEEDLES.....	162
READYLANCE SAFETY LANCETS.....	160	RELION THIN LANCETS.....	162
REALITY INSULIN SYRINGE/U.....	160	RELION TRUE METRIX AIR BL.....	162
REALITY LANCETS.....	160	RELION TRUE METRIX BLOOD.....	115
REALITY LATEX/ULTRA TEXTU.....	160	RELION ULTIMA BLOOD GLUCO.....	115
REALITY LATEX/ULTRA THIN.....	160	RELION ULTRA THIN LANCETS.....	162
REALITY LATEX CONDOMS/LUB.....	160	RELION ULTRA THIN PLUS LA.....	162
REALITY TRIGGER LANCETS.....	160	RELYVRIO.....	86
REBIF.....	71	REMODULIN.....	49
REBIF REBIDOSE.....	71	RENAGEL.....	58
REBIF REBIDOSE TITRATION.....	71	repaglinide tab 0.5 mg, 1 mg, 2 mg.....	31
REBIF TITRATION PACK.....	71	REPATHA.....	48
		REPATHA PUSHTRONEX SYSTEM.....	48
		REPATHA SURECLICK.....	48

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RESTASIS.....	98	rizatriptan benzoate oral disintegrating tab 5 mg (base eq).....	78
RETACRIT.....	91	rizatriptan benzoate oral disintegrating tab 10 mg (base eq).....	78
RETEVMO.....	22	rizatriptan benzoate tab 5 mg (base equivalent).....	78
RETIN-A.....	106	rizatriptan benzoate tab 10 mg (base equivalent).....	78
RETROVIR.....	8	ROCALTROL.....	38
REVLIMID.....	177	ROCKLATAN.....	99
REXALL BLOOD GLUCOSE MONI.....	162	roflumilast tab 250 mcg, 500 mcg.....	53
REXALL BLOOD GLUCOSE TEST.....	115	ropinirole hydrochloride tab er 24hr 2 mg (base equivalent), 4 mg (base equivalent), 6 mg (base equivalent), 8 mg (base equivalent), 12 mg (base equivalent).....	85
REXALL LANCETS ULTRA THIN.....	162	ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg.....	85
REXULTI.....	66	rosuvastatin calcium tab 40 mg.....	48
REYATAZ.....	8	rosuvastatin calcium tab 5 mg, 10 mg, 20 mg.....	48
REYVOW.....	78	ROTARIX.....	15
REZLIDHIA.....	22	ROTATEQ.....	15
REZUROCK.....	177	ROZEREM.....	67
RHOPRESSA.....	98	ROZLYTREK.....	23
RIASTAP.....	95	RUBRACA.....	23
RIBAVIRIN.....	8	RUCONEST.....	95
RIDAURA.....	77	rufinamide susp 40 mg/ml.....	83
rifabutin cap 150 mg.....	4	rufinamide tab 200 mg, 400 mg.....	83
rifampin cap 150 mg, 300 mg.....	4	RUKOBIA.....	9
RIGHTEST GD500 LANCING DE.....	162	RYBELSUS.....	31
RIGHTEST GL300 LANCETS.....	162	RYDAPT.....	23
RIGHTEST GM100 BLOOD GLUC.....	162	RYPLAZIM.....	95
RIGHTEST GM300 BLOOD GLUC.....	162	S	
RIGHTEST GM550 BLOOD GLUC.....	162	SABRIL.....	83
RIGHTEST GS100 BLOOD GLUC.....	115	SAFE-T-LANCE LOW FLOW 25G.....	162
RIGHTEST GS300 BLOOD GLUC.....	115	SAFE-T-LANCE NORMAL FLOW.....	162
RIGHTEST GS333 BLOOD GLUC.....	115	SAFE-T-LANCE PLUS SAFETY.....	162
RIGHTEST GS550 BLOOD GLUC.....	115	SAFETY LANCETS.....	162
RIGHTEST GT333 BLOOD GLUC.....	115	SAFETY LANCETS 21G.....	162
riluzole tab 50 mg.....	86	SAFETY LANCETS 23G.....	162
RIMANTADINE HYDROCHLORIDE.....	9	SAFETY LANCETS 28G.....	162
ringer's solution for irrigation.....	177	SAFETY PEN NEEDLES/30G X.....	162
RINVOQ.....	77	SAFYRAL.....	29
risedronate sodium tab delayed release 35 mg.....	38	SALAGEN.....	100
risedronate sodium tab 5 mg, 30 mg.....	38	SAMSCA.....	38
risedronate sodium tab 35 mg, 150 mg.....	38	SANCUSO.....	56
RISPERIDONE ODT.....	66	SANDIMMUNE.....	177
risperidone orally disintegrating tab 4 mg.....	66	SANDOSTATIN.....	38
risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg.....	66	SANTYL.....	106
risperidone soln 1 mg/ml.....	66	SAPHRIS.....	66
risperidone tab 0.25 mg.....	66	sapropterin dihydrochloride powder packet 100 mg, 500 mg.....	38
risperidone tab 4 mg.....	66	sapropterin dihydrochloride tab 100 mg.....	38
risperidone tab 0.5 mg, 1 mg, 2 mg, 3 mg.....	66	SAPSCARE TWIST TOP LANCET.....	163
RITALIN.....	69	SAPS HEALTH CARE TWIST TO.....	162
ritonavir tab 100 mg.....	9		
rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent).....	71		
rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr.....	71		
RIXUBIS.....	95		

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SAPS HEALTH PLUS TWIST TO.....	162	SIMPONI.....	77
SAPS HEALTH TWIST TOP LAN.....	162	simvastatin tab 5 mg.....	48
SAVELLA.....	71	simvastatin tab 20 mg.....	48
SAVELLA TITRATION PACK.....	72	simvastatin tab 80 mg.....	48
SB INSULIN SYRINGE/U-100/.....	163	simvastatin tab 10 mg, 40 mg.....	48
SB LANCETS THIN.....	163	SINEMET.....	86
SB LANCETS ULTRA THIN.....	163	SINGLE-LET.....	163
SCEMBLIX.....	23	sirolimus oral soln 1 mg/ml.....	177
SCHNUCKS INSULIN SYRINGE.....	163	sirolimus tab 0.5 mg, 1 mg, 2 mg.....	177
scopolamine td patch 72hr 1 mg/3days.....	56	SIRTURO.....	4
SEASONIQUE.....	29	SIVEXTRO.....	12
SECUADO.....	66	SKYRIZI.....	58
SECURESAFE SAFETY HYPODER.....	163	SKYRIZI PEN.....	106
SECURESAFE SAFETY INSULIN.....	163	SLYND.....	29
SECURESAFE SAFETY PEN NEE.....	163	SMART DIABETES VANTAGE LA.....	163
SELECT-LITE LANCING DEVIC.....	163	SMARTEST BLOOD GLUCOSE TE.....	115
SELECT-OB.....	88	SMARTEST EJECT BLOOD GLUC.....	164
selegiline hcl cap 5 mg.....	85	SMARTEST EJECT STARTER KI.....	164
selegiline hcl tab 5 mg.....	86	SMARTEST LANCETS 28G.....	164
selenium sulfide lotion 2.5%.....	106	SMARTEST PERSONA STARTER.....	164
SELZENTRY.....	9	SMARTEST PRONTO STARTER.....	164
SE-NATAL 19.....	88	SMARTEST PROTEGE BLOOD GL.....	164
SENSIPAR.....	38	SMARTEST PROTEGE STARTER.....	164
SEREVENT DISKUS.....	53	SMART SENSE COLOR LANCETS.....	163
SEROSTIM.....	38	SMART SENSE PREMIUM BLOOD.....	115
sertraline hcl oral concentrate for solution 20 mg/ ml.....	63	SMART SENSE STANDARD LANC.....	163
sertraline hcl tab 25 mg, 50 mg, 100 mg.....	63	SMART SENSE SUPER THIN LA.....	164
sevelamer carbonate packet 0.8 gm, 2.4 gm.....	58	SMART SENSE THIN LANCETS.....	164
sevelamer carbonate tab 800 mg.....	58	SMART SENSE VALUE BLOOD.....	164
sevelamer hcl tab 800 mg.....	58	SMART SENSE VALUE BLOOD G.....	115
SEVELAMER HYDROCHLORIDE.....	58	SM MICRO THIN LANCETS 33G.....	163
SEVENFACT.....	95	SM TRUEDRAW LANCING DEVIC.....	163
SFROWASA.....	58	sodium chloride irrigation soln 0.9%.....	61
SHINGRIX.....	15	sodium chloride soln nebu 7%.....	51
SHOPKO AUTOLET LANCING DE.....	163	sodium chloride soln nebu 3%, 10%.....	51
SHOPKO ON-THE-GO COMFORT.....	163	sodium citrate & citric acid soln 500-334 mg/5ml.....	61
SHOPKO UNIFINE PENTIPS PE.....	163	SODIUM FLUORIDE.....	89
SHOPKO UNIFINE PENTIPS PL.....	163	sodium fluoride chew tab 0.25 mg f (from 0.55 mg naf), 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf).....	89
SHOPKO UNILET LANCETS SUP.....	163	sodium fluoride cream 1.1%.....	100
SHOPKO UNILET LANCETS ULT.....	163	sodium fluoride gel 1.1% (0.5% f).....	100
SHUR-SEAL.....	60	sodium fluoride paste 1.1%.....	100
SIGNIFOR.....	38	sodium fluoride soln 0.125 mg/drop f (0.275 mg/drop naf), 0.5 mg/ml f (from 1.1 mg/ml naf).....	89
SIGNIFOR LAR.....	38	SODIUM OXYBATE.....	72
sildenafil citrate for suspension 10 mg/ml.....	49	sodium phenylbutyrate oral powder 3 gm/ teaspoonful.....	38
sildenafil citrate tab 20 mg.....	49	sodium phenylbutyrate tab 500 mg.....	38
SILENOR.....	67	sodium polystyrene sulfonate powder.....	177
SILIQ.....	106	sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml.....	55
silodosin cap 4 mg, 8 mg.....	61	SOFOSBUVIR/VELPATASVIR.....	9
SILVADENE.....	106		
silver sulfadiazine cream 1%.....	106		
SIMBRINZA.....	99		
SIMPLE DIAGNOSTICS LANCIN.....	163		

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solifenacin succinate tab 5 mg, 10 mg	59	sulfamethoxazole-trimethoprim tab 400-80 mg	12
SOLIQUA 100/33.....	32	sulfamethoxazole-trimethoprim tab 800-160 mg	12
SOLTAMOX.....	23	SULFAMYLON.....	106
SOLUS V2 AUDIBLE BLOOD GL.....	164	sulfasalazine tab delayed release 500 mg	58
SOLUS V2 AUDIBLE TEST.....	115	sulfasalazine tab 500 mg	58
SOLUS V2 LANCING DEVICE.....	164	sulindac tab 150 mg, 200 mg	77
SOLUS V2 PRESSURE ACTIVAT.....	164	sumatriptan nasal spray 5 mg/act	78
SOLUS V2 TWIST LANCETS 30.....	164	sumatriptan nasal spray 20 mg/act	78
SOMAVERT.....	38	sumatriptan succinate inj 6 mg/0.5ml	78
SOOLANTRA.....	106	SUMATRIPTAN SUCCINATE REF.....	78
sorafenib tosylate tab 200 mg (base equivalent)	23	sumatriptan succinate solution auto-injector 4	
sotalol hcl (afib/afI) tab 80 mg, 120 mg, 160 mg	40	mg/0.5ml	79
sotalol hcl tab 240 mg	40	sumatriptan succinate solution auto-injector 6	
sotalol hcl tab 80 mg, 120 mg, 160 mg	40	mg/0.5ml	79
SOTYKTU.....	106	sumatriptan succinate tab 25 mg	79
SOVALDI.....	9	sumatriptan succinate tab 50 mg	79
SPIKEVAX COVID-19 VACCINE.....	15	sumatriptan succinate tab 100 mg	79
SPINOSAD.....	106	sunitinib malate cap 12.5 mg (base equivalent)	23
SPIRIVA HANDIHALER.....	53	sunitinib malate cap 25 mg (base equivalent), 37.5 mg	
SPIRIVA RESPIMAT.....	53	(base equivalent), 50 mg (base equivalent)	23
spironolactone & hydrochlorothiazide tab 25-25		SUNOSI.....	69
mg	45	SUPER THIN LANCETS.....	164
spironolactone tab 25 mg, 50 mg, 100 mg	46	SUPRAX.....	2
SPORANOX.....	5	SUPREME II CONFIDENCE PAD.....	164
SPRYCEL.....	23	SUPREME TEST STRIPS.....	115
SPS.....	177	SUPREP BOWEL PREP KIT.....	55
stannous fluoride gel 0.4%	100	SURE COMFORT AUTOKEEPER S.....	164
STAVUDINE.....	9	SURE COMFORT INSULIN SYRI.....	164
1ST CHOICE LANCETS SUPER.....	175	SURE COMFORT LANCETS 18G.....	164
1ST CHOICE LANCETS THIN.....	175	SURE COMFORT LANCETS 21G.....	164
1ST CHOICE LANCETS ULTRA.....	175	SURE COMFORT LANCETS 23G.....	165
STELARA.....	106	SURE COMFORT LANCETS 28G.....	165
STERILANCE TL.....	164	SURE COMFORT LANCETS 30G.....	165
STIMUFEND.....	91	SURE COMFORT LANCING PEN.....	165
STIOLTO RESPIMAT.....	53	SURE COMFORT PEN NEEDLES.....	165
STIVARGA.....	23	SURELITE LANCETS.....	165
STRENSIQ.....	38	SUTAB.....	55
STRIBILD.....	9	SUTENT.....	23
STRIVERDI RESPIMAT.....	53	SYMBICORT.....	53
STROMECTOL.....	11	SYMDEKO.....	54
1ST TIER UNIFINE PENTIPS.....	175	SYMFI.....	9
1ST TIER UNILET COMFORTOU.....	176	SYMFI LO.....	9
SUCRAID.....	57	SYMJEPI.....	46
sucralfate tab 1 gm	56	SYMLINPEN 60.....	32
SULAR.....	41	SYMLINPEN 120.....	32
SULCONAZOLE NITRATE.....	106	SYMPAZAN.....	83
SULFACETAMIDE SODIUM.....	99	SYMPROIC.....	59
SULFACETAMIDE SODIUM/PRED.....	99	SYMTUZA.....	9
sulfacetamide sodium lotion 10% (acne)	106	SYNAREL.....	38
sulfacetamide sodium ophth soln 10%	99	SYNERA.....	106
SULFADIAZINE.....	4	SYNJARDY.....	32
sulfamethoxazole-trimethoprim susp 200-40		SYNJARDY XR.....	32
mg/5ml	12	SYNRIBO.....	23

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SYNTHROID.....	35	temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg.....	67
SYPRINE.....	177	TEMBEXA.....	9
T		temozolomide cap 250 mg.....	24
TABLOID.....	23	temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg.....	24
TABRECTA.....	23	TEMPO REFILL.....	165
tacrolimus cap 0.5 mg, 1 mg, 5 mg.....	177	TEMPO SMART BUTTON.....	165
tacrolimus oint 0.03%, 0.1%.....	106	TEMPO WELCOME.....	165
tadalafil tab 2.5 mg, 5 mg.....	49	TENCON.....	72
tadalafil tab 20 mg (pah).....	49	TENIVAC.....	16
TAFINLAR.....	23	tenofovir disoproxil fumarate tab 300 mg.....	9
tafluprost preservative free (pf) ophth soln 0.0015%.....	99	TENORETIC 50.....	44
TAGRISSE.....	23	TENORETIC 100.....	44
TAKHZYRO.....	95	TEPMETKO.....	24
TALTZ.....	106	terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	44
TALZENNA.....	23	terbinafine hcl tab 250 mg.....	5
TAMIFLU.....	9	terbutaline sulfate tab 2.5 mg, 5 mg.....	53
tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent).....	23	terconazole vaginal cream 0.4%, 0.8%.....	60
tamsulosin hcl cap 0.4 mg.....	61	terconazole vaginal suppos 80 mg.....	60
TARCEVA.....	23	teriflunomide tab 7 mg, 14 mg.....	72
TARGRETIN.....	24	TERIPARATIDE.....	38
TARON-C DHA.....	88	testosterone cypionate im inj in oil 100 mg/ml.....	26
TARPEYO.....	26	testosterone cypionate im inj in oil 200 mg/ml.....	26
TASCENSO ODT.....	72	TESTOSTERONE ENANTHATE.....	26
TASIGNA.....	24	testosterone td gel 12.5 mg/act (1%).....	26
tasimelteon capsule 20 mg.....	67	testosterone td gel 20.25 mg/act (1.62%).....	26
TASMAR.....	86	testosterone td gel 10mg/act (2%).....	26
TAVALISSE.....	95	testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%).....	26
TAVNEOS.....	95	testosterone td soln 30 mg/act.....	26
tazarotene cream 0.1%.....	107	tetrabenazine tab 12.5 mg.....	72
tazarotene gel 0.05%, 0.1%.....	107	tetrabenazine tab 25 mg.....	72
TAZORAC.....	107	tetracaine hcl ophth soln 0.5%.....	99
TAZVERIK.....	24	tetracycline hcl cap 250 mg, 500 mg.....	3
TDVAX.....	16	TGT ADVANCED LANCING DEVI.....	165
TECHLITE AST LANCETS.....	165	TGT BLOOD GLUCOSE MONITOR.....	165
TECHLITE INSULIN SYRINGE.....	165	TGT BLOOD GLUCOSE TEST ST.....	115
TECHLITE LANCETS.....	165	TGT LANCET ALTERNATE SITE.....	165
TECHLITE LANCETS 30G.....	165	TGT LANCET MICRO THIN 33G.....	165
TECHLITE PEN NEEDLES/31G.....	165	TGT LANCET SUPER THIN 30G.....	166
TECHLITE PEN NEEDLES/32G.....	165	TGT LANCET THIN 23G.....	166
TECHLITE PEN NEEDLES 29G.....	165	TGT LANCET THIN 26G.....	166
TECHLITE PEN NEEDLES 31G.....	165	TGT LANCET ULTRA THIN 28G.....	166
TEGRETOL.....	83	TGT LANCET ULTRA THIN 30G.....	166
TEGRETOL-XR.....	83	TGT LANCING DEVICE.....	166
TEGSEDI.....	72	THALOMID.....	177
TEKTRUNA.....	44	THEO-24.....	53
TELMISARTAN/AMLODIPINE.....	44	theophylline elixir 80 mg/15ml.....	53
telmisartan-hydrochlorothiazide tab 80-12.5 mg.....	44	theophylline soln 80 mg/15ml.....	53
telmisartan-hydrochlorothiazide tab 40-12.5 mg, 80-25 mg.....	44	theophylline tab er 12hr 300 mg, 450 mg.....	53
telmisartan tab 20 mg, 40 mg, 80 mg.....	44	theophylline tab er 24hr 400 mg, 600 mg.....	53

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THINLETS GP LANCETS.....	166	topiramate cap er 24hr 25 mg, 50 mg, 100 mg.....	83
THIOLA.....	61	topiramate cap er 24hr sprinkle 200 mg.....	83
THIOLA EC.....	61	topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg.....	83
thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg.....	66	topiramate sprinkle cap 15 mg, 25 mg.....	83
thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg.....	66	topiramate tab 25 mg, 50 mg, 100 mg, 200 mg.....	83
THRIVITE RX.....	88	TOPROL XL.....	40
THYQUIDITY.....	35	toremifene citrate tab 60 mg (base equivalent).....	24
tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg.....	83	torsemide tab 5 mg, 10 mg, 20 mg, 100 mg.....	46
TIBSOVO.....	24	TOUJEO MAX SOLOSTAR.....	34
TIGLUTIK.....	86	TOUJEO SOLOSTAR.....	34
timolol maleate ophth gel forming soln 0.25%, 0.5%.....	99	TRACER II 3 VOLT BATTERY.....	166
timolol maleate ophth soln 0.25%, 0.5%.....	99	TRACLEER.....	49
timolol maleate ophth soln 0.5% (once-daily).....	99	tramadol-acetaminophen tab 37.5-325 mg.....	75
timolol maleate preservative free ophth soln 0.25%, 0.5%.....	99	tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg.....	75
timolol maleate tab 5 mg, 10 mg, 20 mg.....	40	tramadol hcl tab 50 mg.....	75
TIMOPTIC-XE.....	99	TRANDOLAPRIL/VERAPAMIL HC.....	44
tinidazole tab 250 mg, 500 mg.....	12	trandolapril tab 1 mg, 2 mg, 4 mg.....	44
tiopronin tab 100 mg.....	61	tranexamic acid tab 650 mg.....	92
TIVICAY.....	9	TRANSDERM-SCOP.....	56
TIVICAY PD.....	9	tranylcypromine sulfate tab 10 mg.....	63
tizanidine hcl tab 2 mg (base equivalent).....	86	TRAVATAN Z.....	99
tizanidine hcl tab 4 mg (base equivalent).....	86	TRAVEL LANCETS ADVANCED 2.....	166
TOBI PODHALER.....	4	TRAVEL LANCETS 30G.....	166
TOBRADEX.....	99	travoprost ophth soln 0.004% (benzalkonium free) (bak free).....	99
TOBRADEX ST.....	99	trazodone hcl tab 50 mg, 100 mg, 150 mg.....	64
TOBRAMYCIN.....	4	TRECTOR.....	4
tobramycin-dexamethasone ophth susp 0.3-0.1%.....	99	TRELEGY ELLIPTA.....	53
tobramycin nebu soln 300 mg/5ml.....	4	TREMFYA.....	107
tobramycin nebu soln 300 mg/4ml.....	4	treprostinil inj soln 20 mg/20ml (1 mg/ml), 50 mg/20ml (2.5 mg/ml), 100 mg/20ml (5 mg/ml), 200 mg/20ml (10 mg/ml).....	49
tobramycin ophth soln 0.3%.....	99	TRESIBA.....	34
TOBREX.....	99	TRESIBA FLEXTOUCH.....	35
TODAYS HEALTH ADVANCED LA.....	166	tretinoin cap 10 mg.....	24
TODAYS HEALTH MINI PEN NE.....	166	tretinoin cream 0.025%, 0.05%, 0.1%.....	107
TODAYS HEALTH ORIGINAL PE.....	166	tretinoin gel 0.01%, 0.025%.....	107
TODAYS HEALTH SHORT PEN N.....	166	TRETTEN.....	95
TODAYS HEALTH SUPER THIN.....	166	triamcinolone acetonide aerosol soln 0.147 mg/ gm.....	107
TODAYS HEALTH ULTRA THIN.....	166	triamcinolone acetonide cream 0.025%, 0.1%, 0.5%.....	107
TODAY SPONGE.....	60	triamcinolone acetonide dental paste 0.1%.....	101
tolcapone tab 100 mg.....	86	triamcinolone acetonide lotion 0.025%, 0.1%.....	107
TOLMETIN SODIUM.....	77	triamcinolone acetonide oint 0.5%.....	107
tolterodine tartrate cap er 24hr 2 mg, 4 mg.....	59	triamcinolone acetonide oint 0.025%, 0.1%.....	107
tolterodine tartrate tab 1 mg, 2 mg.....	59	triamterene & hydrochlorothiazide cap 37.5-25 mg.....	46
tolvaptan tab 15 mg.....	39	triamterene & hydrochlorothiazide tab 37.5-25 mg.....	46
tolvaptan tab 30 mg.....	39	triamterene & hydrochlorothiazide tab 75-50 mg.....	46
TOPAMAX.....	83	triamterene cap 50 mg, 100 mg.....	46
TOPAMAX SPRINKLE.....	83	TRICARE.....	88
TOPCARE CLICKFINE UNIVERS.....	166	TRICOR.....	48
TOPCARE LANCETS MICRO-THI.....	166		
TOPCARE ULTRA COMFORT INS.....	166		
TOPICORT.....	107		
topiramate cap er 24hr 200 mg.....	83		

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trientine hcl cap 250 mg.....	177	TRUEPLUS PEN NEEDLES 31GX.....	168
trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent).....	66	TRUEPLUS PEN NEEDLES 32GX.....	168
TRIFLURIDINE.....	99	TRUEPLUS SAFETY LANCETS 2.....	168
TRIHXYPHENIDYL HCL.....	86	TRUERESULT BLOOD GLUCOSE.....	168
trihexyphenidyl hcl tab 2 mg, 5 mg.....	86	TRUETEST STRIPS.....	115
TRIJARDY XR.....	32	TRUETRACK BLOOD GLUCOSE M.....	168
TRIKAFTA.....	54	TRUETRACK BLOOD GLUCOSE T.....	115
TRILEPTAL.....	83	TRUETRACK SMART SYSTEM.....	168
trimethobenzamide hcl cap 300 mg.....	56	TRUETRACK TEST.....	115
TRIMETHOPRIM.....	12	TRULANCE.....	59
trimethoprim tab 100 mg.....	12	TRULICITY.....	32
trimipramine maleate cap 25 mg, 50 mg, 100 mg.....	64	TRUMENBA.....	15
TRINATAL RX 1.....	88	TRUSTEX/RIA LUBRICATED.....	168
TRINATE.....	88	TRUSTEX/RIA LUBRICATED/SP.....	168
TRINTELLIX.....	64	TRUSTEX/RIA LUBRICATED SP.....	168
TRIUMEQ.....	9	TRUSTEX/RIA NON-LUBRICATE.....	168
TRIUMEQ PD.....	9	TRUSTEX COLOR CONDOMS + L.....	168
TRIZIVIR.....	10	TRUSTEX LUBRICATED.....	168
TROKENDI XR.....	83	TRUSTEX LUBRICATED/RIBBED.....	168
tropicamide ophth soln 0.5%.....	99	TRUSTEX LUBRICATED/SPERMI.....	168
tropicamide ophth soln 1%.....	99	TRUSTEX LUBRICATED EXTRA.....	168
trospium chloride cap er 24hr 60 mg.....	59	TRUSTEX NATURAL CONDOMS +.....	168
trospium chloride tab 20 mg.....	59	TRUSTEX NON-LUBRICATED.....	168
TRUDHESA.....	79	TRUSTEX WITH NONOXYNOL-9/.....	168
TRUE COMFORT INSULIN SYRI.....	166	TRUVADA.....	10
TRUE COMFORT PEN NEEDLES.....	166	TUKYSA.....	24
TRUE COMFORT PRO INSULIN.....	166	TURALIO.....	24
TRUE COMFORT PRO PEN NEED.....	166	TWINRIX.....	15
TRUE COMFORT SAFETY LANCE.....	167	TWIST TOP LANCETS 30G.....	169
TRUE COMFORT SAFETY PEN N.....	167	TYBLUME.....	29
TRUE COMFORT TWIST TOP LA.....	167	TYBOST.....	10
TRUEDRAW LANCING DEVICE.....	167	TYKERB.....	24
TRUE FOCUS BLOOD GLUCOSE.....	167	TYMLOS.....	39
TRUE FOCUS SELF MONITORIN.....	115	TYVASO.....	49
TRUE METRIX.....	167	TYVASO DPI MAINTENANCE KI.....	49
TRUE METRIX AIR BLOOD GLU.....	167	TYVASO DPI TITRATION KIT.....	49
TRUE METRIX AIR W/BLUETOO.....	167	TYVASO REFILL.....	49
TRUE METRIX BLOOD GLUCOSE.....	115	TYVASO STARTER.....	49
TRUE METRIX GO BLOOD GLUC.....	167		
TRUE METRIX SELF MONITORI.....	115	U	
TRUEPLUS 5-BEVEL PEN NEED.....	168	UBRELVY.....	79
TRUEPLUS INSULIN SYRINGE.....	167	UDENYCA.....	91
TRUEPLUS INSULIN SYRINGE/.....	167	ULTICARE INSULIN SAFETY S.....	169
TRUEPLUS LANCETS 26G.....	167	ULTICARE INSULIN SYRINGE.....	169
TRUEPLUS LANCETS 28G.....	167	ULTICARE INSULIN SYRINGE/.....	169
TRUEPLUS LANCETS 30G.....	167	ULTICARE MICRO PEN NEEDLE.....	169
TRUEPLUS LANCETS 33G.....	167	ULTICARE MINI PEN NEEDLES.....	169
TRUEPLUS LANCETS 33G MICR.....	167	ULTICARE MINI SAFETY PEN.....	169
TRUEPLUS LANCETS 28G SUPE.....	167	ULTICARE ORIGINAL PEN NEE.....	169
TRUEPLUS LANCETS 30G ULTR.....	167	ULTICARE PEN NEEDLES/29G.....	169
TRUEPLUS PEN NEEDLES 29GX.....	167	ULTICARE PEN NEEDLES 31G.....	169
		ULTICARE SHORT PEN NEEDLE.....	169
		ULTICARE SHORT SAFETY PEN.....	169

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ULTICARE TUBERCULIN SAFET.....	169	UNIFINE PENTIPS PLUS 29GX.....	172
ULTICARE U-100 INSULIN SY.....	169	UNIFINE PENTIPS PLUS 31GX.....	172
ULTIGUARD INSULIN SYRINGE.....	169	UNIFINE PENTIPS PLUS 32GX.....	172
ULTIGUARD SAFEPACK/MICRO.....	170	UNIFINE PENTIPS PLUS 33GX.....	172
ULTIGUARD SAFEPACK/MINI P.....	170	UNIFINE SAFECONTROL PEN N.....	172
ULTIGUARD SAFEPACK/SHORT.....	170	UNIFINE ULTRA PEN NEEDLE/.....	172
ULTIGUARD SAFEPACK/SYRING.....	170	UNILET COMFORTOUCH LANCET.....	173
ULTIGUARD SAFEPACK INSULI.....	170	UNILET EXCELITE.....	173
ULTIGUARD SAFEPACK MINI P.....	170	UNILET EXCELITE II.....	173
ULTIGUARD SAFEPACK PEN NE.....	170	UNILET G.P. LANCET.....	173
ULTI-LANCE AUTOMATIC/ CLE.....	169	UNILET G.P. SUPERLITE LAN.....	173
ULTILET CLASSIC LANCETS.....	170	UNILET GP 28 ULTRA THIN.....	173
ULTILET LANCETS.....	170	UNILET LANCET.....	173
ULTILET LANCETS 33G.....	170	UNILET LANCETS MICRO-THIN.....	173
ULTILET PEN NEEDLE 29GX12.....	170	UNILET LANCETS SUPER-THIN.....	173
ULTILET PEN NEEDLE 31GX5M.....	170	UNILET LANCETS ULTRA-THIN.....	173
ULTILET PEN NEEDLE 31GX8M.....	170	UNILET SUPERLITE LANCET.....	173
ULTILET PEN NEEDLE 32GX4M.....	170	UNISTIK 3 GENTLE.....	173
ULTILET SAFETY LANCETS 21.....	170	UNISTIK PRO SAFETY LANCET.....	173
ULTILET SAFETY LANCETS 23.....	170	UNISTIK SAFETY LANCETS 28.....	173
ULTILET SHORT PEN NEEDLES.....	170	UNISTIK SAFETY LANCETS 30.....	173
ULTRACARE INSULIN SYRINGE.....	171	UNISTIK TOUCH SAFETY LANC.....	173
ULTRACARE PEN NEEDLES/31G.....	171	UNISTRIP1 GENERIC.....	115
ULTRACARE PEN NEEDLES/32G.....	171	UNIVERSAL 1 LANCETS/33G/M.....	173
ULTRACARE PEN NEEDLES/33G.....	171	UNIVERSAL 1 LANCETS THIN.....	173
ULTRA COMFORT INSULIN SYR.....	170	UNIVERSAL 1 LANCETS ULTRA.....	173
ULTRA FLO INSULIN PEN NEE.....	170	UPTRAVI.....	49
ULTRA FLO INSULIN SYRINGE.....	171	UPTRAVI TITRATION PACK.....	49
ULTRA INSULIN SYRINGE/U-1.....	171	UROCIT-K 5.....	61
ULTRA-THIN II AUTO LANCET.....	171	UROCIT-K 10.....	61
ULTRA-THIN II INSULIN SYR.....	171	UROCIT-K 15.....	61
ULTRA-THIN II LANCETS 28G.....	171	ursodiol cap 300 mg.....	59
ULTRA-THIN II LANCETS 30G.....	171	ursodiol tab 250 mg.....	59
ULTRA-THIN II MINI PEN NE.....	171	ursodiol tab 500 mg.....	59
ULTRA-THIN II PEN NEEDLES.....	171	V	
ULTRA THIN LANCETS 28G.....	171	valacyclovir hcl tab 500 mg, 1 gm.....	10
ULTRA THIN LANCETS 31G.....	171	VALCHLOR.....	107
ULTRA THIN PEN NEEDLES 32.....	171	valganciclovir hcl for soln 50 mg/ml (base equiv).....	10
ULTRATRAK ACTIVE.....	171	valganciclovir hcl tab 450 mg (base equivalent).....	10
UNIFINE PEN NEEDLE/32G X.....	171	valproate sodium oral soln 250 mg/5ml (base	
UNIFINE PENTIPS/30G X 3/1.....	172	equiv).....	83
UNIFINE PENTIPS 31G X 3/1.....	172	valproic acid cap 250 mg.....	83
UNIFINE PENTIPS 31GX5MM.....	172	valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5	
UNIFINE PENTIPS 31GX6MM.....	172	mg, 160-25 mg, 320-12.5 mg, 320-25 mg.....	45
UNIFINE PENTIPS 31GX8MM.....	172	valsartan tab 320 mg.....	45
UNIFINE PENTIPS 32GX4MM.....	172	valsartan tab 40 mg, 80 mg, 160 mg.....	44
UNIFINE PENTIPS 32GX6MM.....	172	VALTOCO.....	84
UNIFINE PENTIPS 33GX4MM.....	172	VALUE HEALTH INSULIN SYRI.....	173
UNIFINE PENTIPS 29GX12MM.....	172	VALUE PLUS LANCETS STANDA.....	173
UNIFINE PENTIPS 31G X 6MM.....	172	VALUE PLUS LANCETS SUPER.....	173
UNIFINE PENTIPS 31G X 8MM.....	172	VALUE PLUS LANCETS THIN 2.....	173
UNIFINE PENTIPS PLUS/30G.....	172	VALUE PLUS LANCING DEVICE.....	173
UNIFINE PENTIPS PLUS 33G.....	172		

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VALUMARK LANCET SUPER THI.....	173	VERZENIO.....	24
VALUMARK LANCET ULTRA THI.....	173	VESICARE.....	59
VALUMARK PEN NEEDLES 31G.....	173	VFEND.....	5
VALUMARK PEN NEEDLES 29GX.....	173	V-GO 20.....	173
VANOCOCIN.....	13	V-GO 30.....	173
vancomycin hcl cap 125 mg (base equivalent).....	13	V-GO 40.....	173
vancomycin hcl cap 250 mg (base equivalent).....	13	VIBERZI.....	59
VANCOMYCIN HYDROCHLORIDE.....	13	VICTOZA.....	32
VANDAZOLE.....	60	VIDA MIA AUTOLET LANCING.....	174
VANISHPOINT INSULIN SYRIN.....	173	VIDA MIA UNIFINE PENTIPS.....	174
VANISHPOINT SAFETY SYRING.....	174	VIDA MIA UNILET LANCETS S.....	174
VANISHPOINT TUBERCULIN SY.....	174	VIDA MIA UNILET LANCETS U.....	174
VAQTA.....	15	VIDA MIA UNIPFINE PENTIPS.....	174
VARENICLINE STARTING MONT.....	72	vigabatrin powd pack 500 mg.....	84
varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv).....	72	vigabatrin tab 500 mg.....	84
VARIVAX.....	15	VIIBRYD.....	64
VARUBI.....	57	VIIBRYD STARTER PACK.....	64
VASCEPA.....	48	vilazodone hcl tab 10 mg, 20 mg, 40 mg.....	64
VAXCHORA.....	15	VIMPAT.....	84
VAXELIS.....	16	VINATE II.....	88
VAXNEUVANCE.....	15	VINATE ONE.....	88
VCF VAGINAL CONTRACEPTIVE.....	60	VIRACEPT.....	10
VECAMYL.....	45	VIREAD.....	10
VECTICAL.....	107	VISTARIL.....	62
VELIVET.....	30	VISTOGARD.....	108
VELPHORO.....	59	VITAFOL STRIPS.....	89
VELTASSA.....	177	VITATHELY/GINGER.....	89
VEMLIDY.....	10	VITRAKVI.....	24
VENCLEXTA.....	24	VIVAGUARD INO BLOOD GLUCO.....	115
VENCLEXTA STARTING PACK.....	24	VIVAGUARD INO SMART BLOOD.....	174
venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent).....	64	VIVAGUARD LANCETS.....	174
venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent).....	64	VIVAGUARD LANCING DEVICE.....	174
VENTAVIS.....	49	VIVAGUARD SAFETY LANCETS/.....	174
VENTOLIN HFA.....	53	VIVJOA.....	5
verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg.....	41	VIVOTIF.....	15
VERAPAMIL HCL ER.....	41	VIZIMPRO.....	24
VERAPAMIL HCL SR.....	41	VONJO.....	24
verapamil hcl tab er 120 mg, 180 mg, 240 mg.....	41	VONVENDI.....	95
verapamil hcl tab 40 mg, 80 mg, 120 mg.....	41	voriconazole for susp 40 mg/ml.....	5
VERAPAMIL HYDROCHLORIDE E.....	41	voriconazole tab 50 mg, 200 mg.....	5
VERASENS BLOOD GLUCOSE MO.....	174	VOSEVI.....	10
VERASENS BLOOD GLUCOSE TE.....	115	VOTRIENT.....	24
VERELAN.....	41	VOXZOGO.....	39
VERIFINE INSULIN PEN NEED.....	174	VP INSULIN SYRINGE/U-100/.....	175
VERIFINE INSULIN SYRINGE.....	174	VRAYLAR.....	66
VERIFINE UNIVERSAL LANCET.....	174	VYNDAMAX.....	49
VERQUVO.....	49	VYNDAQEL.....	49
VERSACLOZ.....	66	VYVANSE.....	69
		W	
		WAKIX.....	69
		WALGREENS ADVANCED TRAVEL.....	175
		WALGREENS COMFORT ASSURED.....	175

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WALGREENS LANCETS.....	175	ZARONTIN.....	84
WALGREENS THIN LANCETS.....	175	ZARXIO.....	91
WALGREENS ULTRA THIN LANC.....	175	ZAVESCA.....	91
warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5		ZEGALOGUE.....	32
mg, 6 mg, 7.5 mg, 10 mg.....	92	ZEJULA.....	25
water for irrigation, sterile irrigation soln.....	177	ZELBORAF.....	25
WAVESENSE AMP.....	175	ZEMPLAR.....	39
WEGMANS UNIFINE PENTIPS P.....	175	ZENPEP.....	57
WELIREG.....	24	ZEPOSIA.....	72
WESCAP-C DHA.....	89	ZEPOSIA 7-DAY STARTER PAC.....	72
WESNATAL DHA COMPLETE.....	89	ZEPOSIA STARTER KIT.....	72
WESTAB PLUS.....	89	ZERVIATE.....	99
WIDE-SEAL SILICONE DIAPHR.....	175	ZEV RX INSULIN SYRINGE/0.5.....	175
WILATE.....	95	ZEV RX INSULIN SYRINGE/1ML.....	175
X		ZEV RX PEN NEEDLES 31G X 5.....	175
XALKORI.....	24	ZEV RX PEN NEEDLES 31G X 6.....	175
XARELTO.....	92	ZEV RX PEN NEEDLES 31G X 8.....	175
XARELTO STARTER PACK.....	92	ZEV RX PEN NEEDLES 32G X 4.....	175
XCOPRI.....	84	ZEV RX TWIST TOP LANCETS 3.....	175
XELJANZ.....	77	ZIAGEN.....	10
XELJANZ XR.....	77	zidovudine cap 100 mg.....	10
XENLETA.....	13	zidovudine syrup 10 mg/ml.....	10
XERMELO.....	59	zidovudine tab 300 mg.....	10
XHANCE.....	50	ZIEXTENZO.....	91
XIFAXAN.....	13	zileuton tab er 12hr 600 mg.....	53
XIGDUO XR.....	32	ZIMHI.....	108
XIIDRA.....	99	ZIOPTAN.....	99
XOFLUZA.....	10	ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg.....	66
XOLAIR.....	53	ZIRGAN.....	99
XOSPATA.....	24	ZITHROMAX.....	3
XPOVIO.....	24	ZOKINVY.....	177
XPOVIO 60 MG TWICE WEEKLY.....	25	ZOLINZA.....	25
XPOVIO 80 MG TWICE WEEKLY.....	25	zolmitriptan nasal spray 5 mg/spray unit.....	79
XTAMPZA ER.....	75	zolmitriptan orally disintegrating tab 2.5 mg, 5 mg.....	79
XTANDI.....	25	zolmitriptan tab 2.5 mg, 5 mg.....	79
XULTOPHY 100/3.6.....	32	ZOLOFT.....	64
XURIDEN.....	39	zolpidem tartrate tab er 6.25 mg, 12.5 mg.....	67
XYNTHA.....	95	zolpidem tartrate tab 5 mg, 10 mg.....	67
XYNTHA SOLOFUSE.....	95	ZOMIG.....	79
XYREM.....	72	ZONALON.....	107
XYWAV.....	72	ZONEGRAN.....	84
Y		zonisamide cap 50 mg.....	84
YALE NEEDLES 21G X 1-1/4".....	175	zonisamide cap 25 mg, 100 mg.....	84
YASMIN 28.....	30	ZONTIVITY.....	96
YAZ.....	30	ZORTRESS.....	177
YONSA.....	25	ZTALMY.....	84
Z		ZUBSOLV.....	75
zafirlukast tab 10 mg, 20 mg.....	53	ZYDELIG.....	25
zaleplon cap 5 mg, 10 mg.....	67	ZYKADIA.....	25
ZANAFLEX.....	86	ZYMAXID.....	100

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