

# Blue Cross Blue Shield of North Dakota Drug Formulary

January 2027 – Updated as of 10/1/26

Please consider talking to your doctor about prescribing formulary medications, 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 [bcbsnd.com](http://bcbsnd.com) for the most up-to-date information.

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## Therapeutic Class Drug List

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## Introduction

### Formulary

The goal of the Blue Cross Blue Shield of North Dakota (BCBSND) formulary is to provide our members broad access to drugs and supplies at a reasonable overall cost. The BCBSND Drug Formulary is the list of products (drugs and supplies) that reflect the current recommendations of the BCBSND Pharmacy & Therapeutics (P&T) Committee. The formulary is intended for use in the ambulatory setting. Drugs are selected for addition to the formulary after considering safety, efficacy, uniqueness, and market considerations. **Providers are encouraged to prescribe formulary drugs.**

Benefits are not limited to the drugs on this formulary list. Products not listed in this formulary are non-formulary (NF). The P&T committee may choose to not add a drug or remove a drug from formulary for reasons including safety or efficacy concerns, or because a clinically similar, more cost-effective drug is already on formulary. Newly marketed prescription drugs will not have benefit coverage until the P&T Committee has had an opportunity to review the drug to determine whether the drug will be covered based on safety, efficacy, and the availability of other products within that class of drugs. This formulary list is subject to change. **Drug coverage is dependent on individual plan benefits.**

### Members

To save the most money on prescription drugs, take this Formulary with you each time you visit your physician. Consider asking your physician to prescribe drugs listed in this Formulary, if appropriate. Any and all decisions that require or pertain to independent professional medical judgment or training, or the need for, and dosage of, a prescription drug, must be made solely by you and your physician in accordance with the patient/physician relationship.

The current version and recent changes to this Formulary is available at the BCBSND website at **www.bcbsnd.com** or by calling the customer service number listed on your identification card. **Online pharmacy tools** are available through the Prime Therapeutics® website at **www.MyPrime.com**. BCBSND members can find drug cost estimates or check if a particular drug is on the BCBSND formulary.

Under some circumstances, formulary drugs may be excluded from coverage under the drug benefit (e.g., oral contraceptives, nicotine replacement therapy, Retin-A, various injectables, etc.). In all cases, plan inclusions/exclusions determine specific coverage regardless of formulary status. Drugs not listed are non-formulary.

### Specialty Products

Specialty Products are medications or drugs that may have other considerations such as special drug administration, limited availability, unique delivery, and dispensing, or unique and/or required patient support or monitoring that are generally high cost.

## Providers

### Generic Utilization

The BCBSND Committee encourages generic utilization as a way to provide high-quality drugs at a reduced cost. By prescribing drugs listed in this formulary that are available generically, you are providing a product that can be expected to have the same effectiveness and safety profile as the brand product while lowering overall medical insurance costs for your patients. In addition, your patient will likely have a lower cost share for generic drugs because most benefit plans are based on a tiered or brand/generic copayment and coinsurance structure.

### Prior Approval

Use of some products may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied. A physician (or clinic personnel) should submit a written request to the address shown below for prior approval consideration. The Prior Approval Request form is available at <https://www.bcbsnd.com/web/providers/forms>. A list of the products requiring prior approval may be found at <https://www.bcbsnd.com/web/providers/pharmacy> under **Restricted-Use Drugs**.

Fax to: (701) 277-2971

Mail to:

BCBSND

Attn: Medical Management

4510 13th Ave S

Fargo, ND 58121

### Dispensing Limits

Products in certain drug categories may have dispensing limits to encourage appropriate prescribing quantities as recommended by the FDA approved product labeling, or as otherwise clinically appropriate. Requests for a quantity that exceeds the dispensing limit should be submitted for consideration on the Dispensing Limits Authorization form available at <https://www.myprime.com/v/BCBSND/COMMERCIAL/en/forms.html>. A list of products with dispensing limits may also be found at this site and at <https://www.bcbsnd.com/web/providers/pharmacy> under **Restricted-Use Drugs**.

Fax to: (877) 480-8130

Mail to:

Prime Therapeutics LLC, Clinical Review Department

1305 Corporate Center Drive

Eagan, Minnesota 55121

## How to use this list

The Formulary is organized into broad categories (e.g. Anti-Infective drugs). Within most categories, drugs are sub-grouped by drug class (e.g. Penicillins) or by use for a specific medical condition (e.g. Diabetes). These categories can help determine which specific product is on formulary. The graphic below shows the information that is provided in each column of the medication list and is an example only. Please use the drug search function to find current information for drugs on the medication list.

| 1                                                               | 2         | 3                                   |
|-----------------------------------------------------------------|-----------|-------------------------------------|
| Drug Name                                                       | Specialty | Prior Approval<br>Dispensing Limits |
| <b>ANTI-INFECTIVE AGENTS</b>                                    |           |                                     |
| <b>PENICILLINS</b>                                              |           |                                     |
| AMOXICILLIN – amoxicillin (trihydrate)<br>chew tab 125 mg       |           |                                     |
| AMOXICILLIN – amoxicillin (trihydrate)<br>chew tab 250 mg       |           |                                     |
| <b>amoxicillin (trihydrate) cap 250 mg</b>                      |           |                                     |
| <b>amoxicillin (trihydrate) cap 500 mg</b>                      |           |                                     |
| <b>amoxicillin (trihydrate) for susp<br/>125 mg/5ml</b>         |           |                                     |
| <b>amoxicillin (trihydrate) for susp<br/>200 mg/5ml</b>         |           |                                     |
| <b>amoxicillin (trihydrate) for susp<br/>250 mg/5ml</b>         |           |                                     |
| <b>amoxicillin (trihydrate) for susp<br/>400 mg/5ml</b>         |           |                                     |
| <b>amoxicillin (trihydrate) tab 500 mg</b>                      |           |                                     |
| <b>amoxicillin (trihydrate) tab 875 mg</b>                      |           |                                     |
| <b>amoxicillin &amp; k clavulanate chew tab<br/>200-28.5 mg</b> |           |                                     |

- 1 The first column of the chart lists the drug name. Generic drugs are shown in lower-case **boldface** type. Most generic drugs are followed by a reference brand drug in (parentheses). The reference brand is a non-formulary drug. Some generic products have no reference brand.  
  
Brand prescription drugs are shown in capital letters followed by the generic name.
- 2 The second column indicates if the drug is a specialty drug. **Note:** Additional information about specialty drugs can be found in this document under the header for Specialty Products.
- 3 The columns indicates the Utilization Management (UM) program(s) that apply to the prescription drug (e.g., Prior Approval and Dispensing Limits). If an indicator is present in the column(s), then the UM program noted is possibly applied to your benefit. Some plans may have UM on additional medications 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

| Drug Name                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>ANTI-INFECTIVE AGENTS</b>                                                                    |           |                |                   |
| <b>PENICILLINS</b>                                                                              |           |                |                   |
| AMOXICILLIN – amoxicillin (trihydrate)<br>chew tab 125 mg, 250 mg                               |           |                |                   |
| <b>amoxicillin (trihydrate) cap 250 mg,<br/>500 mg</b>                                          |           |                |                   |
| <b>amoxicillin (trihydrate) for susp<br/>125 mg/5ml, 200 mg/5ml, 250 mg/5ml,<br/>400 mg/5ml</b> |           |                |                   |
| <b>amoxicillin (trihydrate) tab 500 mg,<br/>875 mg</b>                                          |           |                |                   |
| <b>amoxicillin &amp; k clavulanate for susp<br/>200-28.5 mg/5ml, 400-57 mg/5ml</b>              |           |                |                   |
| <b>amoxicillin &amp; k clavulanate for susp<br/>250-62.5 mg/5ml (Augmentin)</b>                 |           |                |                   |
| <b>amoxicillin &amp; k clavulanate for susp<br/>600-42.9 mg/5ml (Augmentin es-600)</b>          |           |                |                   |
| <b>amoxicillin &amp; k clavulanate tab er 12hr<br/>1000-62.5 mg</b>                             |           |                |                   |
| <b>amoxicillin &amp; k clavulanate tab<br/>250-125 mg</b>                                       |           |                |                   |
| <b>amoxicillin &amp; k clavulanate tab<br/>500-125 mg, 875-125 mg (Augmentin)</b>               |           |                |                   |
| AMOXICILLIN/POTASSIUM CLA –<br>amoxicillin & k clavulanate chew tab<br>200-28.5 mg, 400-57 mg   |           |                |                   |
| <b>ampicillin cap 500 mg</b>                                                                    |           |                |                   |
| AUGMENTIN – amoxicillin & k clavulanate<br>for susp 125-31.25 mg/5ml                            |           |                |                   |
| <b>dicloxacillin sodium cap 250 mg, 500 mg</b>                                                  |           |                |                   |
| PENICILLIN V POTASSIUM – penicillin<br>v potassium for soln 125 mg/5ml, 250<br>mg/5ml           |           |                |                   |
| <b>penicillin v potassium tab 250 mg,<br/>500 mg</b>                                            |           |                |                   |
| <b>CEPHALOSPORINS</b>                                                                           |           |                |                   |
| CEFACTOR – cefactor cap 250 mg, 500 mg                                                          |           |                |                   |
| CEFADROXIL – cefadroxil tab 1 gm                                                                |           |                |                   |
| <b>cefadroxil cap 500 mg</b>                                                                    |           |                |                   |

| Drug Name                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>cefadroxil for susp 250 mg/5ml,<br/>500 mg/5ml</b>                         |           |                |                   |
| <b>cefdinir cap 300 mg</b>                                                    |           |                |                   |
| <b>cefdinir for susp 125 mg/5ml, 250 mg/5ml</b>                               |           |                |                   |
| CEFIXIME – cefixime for susp 100 mg/5ml                                       |           |                |                   |
| <b>cefixime cap 400 mg (Suprax)</b>                                           |           |                |                   |
| <b>cefixime for susp 200 mg/5ml (Suprax)</b>                                  |           |                |                   |
| CEFPODOXIME PROXETIL – cefpodoxime<br>proxetil for susp 50 mg/5ml, 100 mg/5ml |           |                |                   |
| <b>cefpodoxime proxetil tab 100 mg, 200 mg</b>                                |           |                |                   |
| <b>cefprozil for susp 125 mg/5ml,<br/>250 mg/5ml</b>                          |           |                |                   |
| <b>cefprozil tab 250 mg, 500 mg</b>                                           |           |                |                   |
| <b>cefuroxime axetil tab 250 mg, 500 mg<br/>(Ceftin)</b>                      |           |                |                   |
| <b>cephalexin cap 250 mg, 500 mg (Keflex)</b>                                 |           |                |                   |
| <b>cephalexin for susp 125 mg/5ml,<br/>250 mg/5ml</b>                         |           |                |                   |
| <b>MACROLIDES</b>                                                             |           |                |                   |
| <b>azithromycin for susp 100 mg/5ml,<br/>200 mg/5ml (Zithromax)</b>           |           |                |                   |
| <b>azithromycin tab 250 mg, 500 mg,<br/>600 mg (Zithromax)</b>                |           |                |                   |
| CLARITHROMYCIN – clarithromycin for<br>susp 125 mg/5ml, 250 mg/5ml            |           |                |                   |
| <b>clarithromycin tab er 24hr 500 mg</b>                                      |           |                |                   |
| <b>clarithromycin tab 250 mg, 500 mg<br/>(Biaxin)</b>                         |           |                |                   |
| DIFICID – fidaxomicin for susp 40 mg/ml                                       |           |                |                   |
| <b>fidaxomicin tab 200 mg (Difcid)</b>                                        |           |                |                   |
| <b>TETRACYCLINES</b>                                                          |           |                |                   |
| <b>demeclocycline hcl tab 150 mg, 300 mg</b>                                  |           |                |                   |
| <b>doxycycline hyclate cap 50 mg</b>                                          |           |                |                   |
| <b>doxycycline hyclate cap 100 mg<br/>(Vibramycin)</b>                        |           |                |                   |
| <b>doxycycline hyclate tab 20 mg, 100 mg</b>                                  |           |                |                   |
| <b>doxycycline monohydrate cap 50 mg</b>                                      |           |                |                   |

| Drug Name                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>doxycycline monohydrate cap 75 mg, 100 mg</b> (Monodox)                    |           |                |                   |
| <b>doxycycline monohydrate cap 150 mg</b> (Adoxa)                             |           |                |                   |
| <b>doxycycline monohydrate tab 50 mg, 75 mg</b> (Adoxa)                       |           |                |                   |
| <b>doxycycline monohydrate tab 100 mg</b> (Adoxa pak 1/100)                   |           |                |                   |
| <b>doxycycline monohydrate tab 150 mg</b> (Adoxa pak 1/150)                   |           |                |                   |
| <b>minocycline hcl cap 50 mg, 75 mg, 100 mg</b> (Minocin)                     |           |                |                   |
| <b>tetracycline hcl cap 250 mg, 500 mg</b> (Tetracycline hcl)                 |           |                |                   |
| <b>FLUOROQUINOLONES</b>                                                       |           |                |                   |
| CIPRO – ciprofloxacin for oral susp 500 mg/5ml (10%) (10 gm/100ml)            |           |                |                   |
| <b>ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv)</b> (Cipro) |           |                |                   |
| <b>ciprofloxacin hcl tab 750 mg (base equiv)</b>                              |           |                |                   |
| <b>levofloxacin oral soln 25 mg/ml</b> (Levaquin)                             |           |                |                   |
| <b>levofloxacin tab 250 mg, 500 mg, 750 mg</b> (Levaquin)                     |           |                |                   |
| <b>moxifloxacin hcl tab 400 mg (base equiv)</b> (Avelox)                      |           |                |                   |
| <b>AMINOGLYCOSIDES</b>                                                        |           |                |                   |
| HUMATIN – paromomycin sulfate cap 250 mg                                      |           |                |                   |
| <b>neomycin sulfate tab 500 mg</b>                                            |           |                |                   |
| <b>tobramycin nebu soln 300 mg/5ml</b> (Tobi)                                 | •         |                |                   |
| <b>TUBERCULOSIS</b>                                                           |           |                |                   |
| <b>ethambutol hcl tab 100 mg, 400 mg</b> (Myambutol)                          |           |                |                   |
| <b>isoniazid syrup 50 mg/5ml</b>                                              |           |                |                   |
| <b>isoniazid tab 100 mg, 300 mg</b>                                           |           |                |                   |
| PRETOMANID – pretomanid tab 200 mg                                            |           |                |                   |
| PRIFTIN – rifapentine tab 150 mg                                              |           |                |                   |

| Drug Name                                                                  | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>pyrazinamide tab 500 mg</b>                                             |           |                |                   |
| <b>rifabutin cap 150 mg</b> (Mycobutin)                                    |           |                |                   |
| <b>rifampin cap 150 mg, 300 mg</b> (Rifadin)                               |           |                |                   |
| <b>rifapentine tab 150 mg</b> (Priftin)                                    |           |                |                   |
| SIRTURO – bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv) | •         |                |                   |
| <b>FUNGAL INFECTIONS</b>                                                   |           |                |                   |
| <b>fluconazole for susp 10 mg/ml, 40 mg/ml</b> (Diflucan)                  |           |                |                   |
| <b>fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg</b> (Diflucan)            |           |                |                   |
| <b>flucytosine cap 250 mg, 500 mg</b> (Ancobon)                            |           |                |                   |
| <b>griseofulvin microsize susp 125 mg/5ml</b>                              |           |                |                   |
| <b>griseofulvin microsize tab 500 mg</b> (Grifulvin v)                     |           |                |                   |
| <b>itraconazole cap 100 mg</b> (Sporanox)                                  |           |                |                   |
| <b>itraconazole oral soln 10 mg/ml</b> (Sporanox)                          |           |                |                   |
| NOXAFIL – posaconazole for delayed release susp packet 300 mg              |           | •              |                   |
| <b>nystatin tab 500000 unit</b>                                            |           |                |                   |
| <b>posaconazole susp 40 mg/ml</b> (Noxafil)                                |           | •              |                   |
| <b>posaconazole tab delayed release 100 mg</b> (Noxafil)                   |           | •              |                   |
| <b>terbinafine hcl tab 250 mg</b> (Lamisil)                                |           |                |                   |
| <b>voriconazole for susp 40 mg/ml</b> (Vfend)                              |           | •              |                   |
| <b>voriconazole tab 50 mg, 200 mg</b> (Vfend)                              |           | •              |                   |
| <b>VIRAL INFECTIONS</b>                                                    |           |                |                   |
| <b>Cytomegalovirus</b>                                                     |           |                |                   |
| <b>valganciclovir hcl for soln 50 mg/ml (base equiv)</b> (Valcyte)         |           |                |                   |
| <b>valganciclovir hcl tab 450 mg (base equivalent)</b> (Valcyte)           |           |                |                   |
| <b>Hepatitis</b>                                                           |           |                |                   |
| <b>adefovir dipivoxil tab 10 mg</b> (Hepsera)                              |           |                |                   |
| BARACLUDGE – entecavir oral soln 0.05 mg/ml                                |           |                |                   |

| Drug Name                                                           | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>entecavir tab 0.5 mg, 1 mg</b> (Baraclude)                       |           |                |                   |
| EPCLUSA – sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg | •         | •              | •                 |
| EPCLUSA – sofosbuvir-velpatasvir tab 200-50 mg, 400-100 mg          | •         | •              | •                 |
| HARVONI – ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg | •         | •              | •                 |
| HARVONI – ledipasvir-sofosbuvir tab 45-200 mg, 90-400 mg            | •         | •              | •                 |
| <b>lamivudine tab 100 mg (hbv)</b> (Epivir hbv)                     |           |                |                   |
| LEDIPASVIR/SOFOSBUVIR – ledipasvir-sofosbuvir tab 90-400 mg         | •         | •              | •                 |
| MAVYRET – glecaprevir-pibrentasvir tab 100-40 mg                    | •         | •              | •                 |
| MAVYRET – glecaprevir-pibrentasvir pellet pack 50-20 mg             | •         | •              | •                 |
| PEGASYS – peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml    | •         |                |                   |
| PEGASYS – peginterferon alfa-2a inj 180 mcg/ml                      | •         |                |                   |
| RIBAVIRIN – ribavirin cap 200 mg                                    | •         |                |                   |
| RIBAVIRIN – ribavirin tab 200 mg                                    | •         |                |                   |
| SOFOSBUVIR/VELPATASVIR – sofosbuvir-velpatasvir tab 400-100 mg      | •         | •              | •                 |
| SOVALDI – sofosbuvir tab 200 mg, 400 mg                             | •         | •              | •                 |
| SOVALDI – sofosbuvir pellet pack 150 mg, 200 mg                     | •         | •              | •                 |
| VOSEVI – sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg     | •         | •              | •                 |
| <b>Herpes</b>                                                       |           |                |                   |
| <b>acyclovir cap 200 mg</b> (Zovirax)                               |           |                |                   |
| <b>acyclovir susp 200 mg/5ml</b> (Zovirax)                          |           |                |                   |
| <b>acyclovir tab 400 mg, 800 mg</b> (Zovirax)                       |           |                |                   |
| <b>famciclovir tab 125 mg, 250 mg, 500 mg</b> (Famvir)              |           |                |                   |
| <b>valacyclovir hcl tab 500 mg, 1 gm</b> (Valtrex)                  |           |                |                   |
| <b>HIV/AIDS</b>                                                     |           |                |                   |

| Drug Name                                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>abacavir sulfate soln 20 mg/ml (base equiv)</b> (Ziagen)                                                     |           |                |                   |
| <b>abacavir sulfate tab 300 mg (base equiv)</b> (Ziagen)                                                        |           |                |                   |
| <b>abacavir sulfate-lamivudine tab 600-300 mg</b> (Epzicom)                                                     |           |                |                   |
| APRETUDE – cabotegravir im extended release susp 600 mg/3ml                                                     |           |                |                   |
| <b>atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv)</b> (Reyataz)           |           |                |                   |
| BIKTARVY – bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg                                |           |                |                   |
| CIMDUO – lamivudine-tenofovir disoproxil fumarate tab 300-300 mg                                                |           |                |                   |
| <b>darunavir tab 600 mg, 800 mg</b> (Prezista)                                                                  |           |                |                   |
| DELSTRIGO – doravirine-lamivudine-tenofovir df tab 100-300-300 mg                                               |           |                |                   |
| DESCOVY – emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg, 200-25 mg                                 |           |                |                   |
| DOVATO – dolutegravir sodium-lamivudine tab 50-300 mg (base eq)                                                 |           |                |                   |
| <b>efavirenz tab 600 mg</b> (Sustiva)                                                                           |           |                |                   |
| <b>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</b> (Atripla)                                        |           |                |                   |
| <b>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</b> (Symfi)                                             |           |                |                   |
| EFAVIRENZ/LAMIVUDINE/TENO – efavirenz-lamivudine-tenofovir df tab 400-300-300 mg                                |           |                |                   |
| <b>emtricitabine-rilpivirine-tenofovir df tab 200-25-300 mg</b> (Complera)                                      |           |                |                   |
| <b>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg, 200-300 mg</b> (Truvada) |           |                |                   |
| <b>etravirine tab 100 mg, 200 mg</b> (Intelence)                                                                |           |                |                   |
| EVOTAZ – atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)                                              |           |                |                   |

| Drug Name                                                                          | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| GENVOYA – elvitegrav-cobic-emtricitab-tenofovir af tab 150-150-200-10 mg           |           |                |                   |
| INTELENCE – etravirine tab 25 mg                                                   |           |                |                   |
| ISENTRESS – raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv) |           |                |                   |
| ISENTRESS – raltegravir potassium tab 400 mg (base equiv)                          |           |                |                   |
| ISENTRESS – raltegravir potassium packet for susp 100 mg (base equiv)              |           |                |                   |
| ISENTRESS HD – raltegravir potassium tab 600 mg (base equiv)                       |           |                |                   |
| JULUCA – dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)                |           |                |                   |
| KALETRA – lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml)                    |           |                |                   |
| <b>lamivudine oral soln 10 mg/ml</b> (Epivir)                                      |           |                |                   |
| <b>lamivudine tab 150 mg, 300 mg</b> (Epivir)                                      |           |                |                   |
| <b>lamivudine-zidovudine tab 150-300 mg</b> (Combivir)                             |           |                |                   |
| <b>lopinavir-ritonavir tab 100-25 mg, 200-50 mg</b> (Kaletra)                      |           |                |                   |
| NEVIRAPINE – nevirapine susp 50 mg/5ml                                             |           |                |                   |
| <b>nevirapine tab er 24hr 400 mg</b> (Viramune xr)                                 |           |                |                   |
| <b>nevirapine tab 200 mg</b> (Viramune)                                            |           |                |                   |
| NORVIR – ritonavir powder packet 100 mg                                            |           |                |                   |
| ODEFSEY – emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg                  |           |                |                   |
| PREZCOBIX – darunavir-cobicistat tab 675-150 mg, 800-150 mg                        |           |                |                   |
| PREZISTA – darunavir tab 75 mg, 150 mg                                             |           |                |                   |
| PREZISTA – darunavir oral susp 100 mg/ml                                           |           |                |                   |
| <b>ritonavir tab 100 mg</b> (Norvir)                                               |           |                |                   |
| STRIBILD – elvitegrav-cobic-emtricitab-tenofovir df tab 150-150-200-300 mg         |           |                |                   |
| SYMTUZA – darunavir-cobic-emtricitab-tenofovir af tab 800-150-200-10 mg            |           |                |                   |

| Drug Name                                                                                             | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>tenofovir disoproxil fumarate tab 300 mg</b> (Viread)                                              |           |                |                   |
| TIVICAY – dolutegravir sodium tab 50 mg (base equiv)                                                  |           |                |                   |
| TIVICAY PD – dolutegravir sodium tab for oral susp 5 mg (base equiv)                                  |           |                |                   |
| TRIUMEQ – abacavir-dolutegravir-lamivudine tab 600-50-300 mg                                          |           |                |                   |
| TRIUMEQ PD – abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg                             |           |                |                   |
| VIREAD – tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg                                     |           |                |                   |
| VIREAD – tenofovir disoproxil fumarate oral powder 40 mg/gm                                           |           |                |                   |
| YEZTUGO – lenacapavir sodium tab 300 mg (prophylaxis)                                                 |           |                |                   |
| YEZTUGO – lenacapavir sodium subcut soln 463.5 mg/1.5ml (prophylaxis)                                 |           |                |                   |
| <b>zidovudine cap 100 mg</b> (Retrovir)                                                               |           |                |                   |
| <b>zidovudine syrup 10 mg/ml</b> (Retrovir)                                                           |           |                |                   |
| <b>zidovudine tab 300 mg</b>                                                                          |           |                |                   |
| <b>Influenza</b>                                                                                      |           |                |                   |
| <b>oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv)</b> (Tamiflu) |           |                |                   |
| <b>oseltamivir phosphate for susp 6 mg/ml (base equiv)</b> (Tamiflu)                                  |           |                |                   |
| RELENZA DISKHALER – zanamivir aerosol powder breath activated 5 mg/act                                |           |                |                   |
| <b>MALARIA</b>                                                                                        |           |                |                   |
| <b>atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg</b> (Malarone)                                 |           |                |                   |
| CHLOROQUINE PHOSPHATE – chloroquine phosphate tab 250 mg                                              |           |                |                   |
| <b>chloroquine phosphate tab 500 mg</b>                                                               |           |                |                   |
| COARTEM – artemether-lumefantrine tab 20-120 mg                                                       |           |                |                   |
| HYDROXYCHLOROQUINE SULFAT – hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg                     |           |                |                   |

| Drug Name                                                                               | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>hydroxychloroquine sulfate tab 200 mg</b><br>(Plaquenil)                             |           |                |                   |
| <b>mefloquine hcl tab 250 mg</b>                                                        |           |                |                   |
| <b>primaquine phosphate tab 26.3 mg</b><br>(15 mg base) (Primaquine phosphate)          |           |                |                   |
| <b>pyrimethamine tab 25 mg</b> (Daraprim)                                               |           |                |                   |
| <b>WORM INFECTIONS</b>                                                                  |           |                |                   |
| <b>albendazole tab 200 mg</b> (Albenza)                                                 |           |                |                   |
| <b>BENZNIDAZOLE</b> – benznidazole tab 12.5 mg, 100 mg                                  |           |                |                   |
| <b>ivermectin tab 3 mg</b> (Stromectol)                                                 |           |                |                   |
| <b>praziquantel tab 600 mg</b> (Biltricide)                                             |           |                |                   |
| <b>SULFONAMIDES</b>                                                                     |           |                |                   |
| <b>sulfamethoxazole-trimethoprim susp 200-40 mg/5ml</b>                                 |           |                |                   |
| <b>sulfamethoxazole-trimethoprim tab 400-80 mg</b> (Bactrim)                            |           |                |                   |
| <b>sulfamethoxazole-trimethoprim tab 800-160 mg</b> (Bactrim ds)                        |           |                |                   |
| <b>OTHER ANTI-INFECTIVES</b>                                                            |           |                |                   |
| <b>atovaquone susp 750 mg/5ml</b> (Mepron)                                              |           |                |                   |
| <b>clindamycin hcl cap 75 mg, 150 mg, 300 mg</b> (Cleocin)                              |           |                |                   |
| <b>clindamycin palmitate hcl for soln 75 mg/5ml (base equiv)</b> (Cleocin pediatric gr) |           |                |                   |
| <b>dapsone tab 25 mg, 100 mg</b>                                                        |           |                |                   |
| <b>IMPAVIDO</b> – miltefosine cap 50 mg                                                 |           |                |                   |
| <b>LAGEVRIO</b> – molnupiravir cap 200 mg                                               |           |                | •                 |
| <b>linezolid for susp 100 mg/5ml</b> (Zyvox)                                            |           |                |                   |
| <b>linezolid tab 600 mg</b> (Zyvox)                                                     |           |                |                   |
| <b>metronidazole tab 250 mg, 500 mg</b> (Flagyl)                                        |           |                |                   |
| <b>nitazoxanide tab 500 mg</b>                                                          |           |                |                   |
| <b>nitrofurantoin macrocrystalline cap 50 mg, 100 mg</b> (Macrobid)                     |           |                |                   |
| <b>nitrofurantoin monohydrate macrocrystalline cap 100 mg</b> (Macrobid)                |           |                |                   |

| Drug Name                                                                                   | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>nitrofurantoin susp 25 mg/5ml</b>                                                        |           |                |                   |
| <b>PAXLOVID</b> – nirmatrelvir tab 6 x 150 mg & ritonavir tab 5 x 100 mg pak                |           |                | •                 |
| <b>PAXLOVID</b> – nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak              |           |                | •                 |
| <b>PAXLOVID</b> – nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak              |           |                | •                 |
| <b>pentamidine isethionate for nebulization soln 300 mg</b> (Nebupent)                      |           |                |                   |
| <b>SIVEXTRO</b> – tedizolid phosphate tab 200 mg                                            |           |                |                   |
| <b>sulfadiazine tab 500 mg</b>                                                              |           |                |                   |
| <b>trimethoprim tab 100 mg</b>                                                              |           |                |                   |
| <b>vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent)</b> (Vancocin hcl) |           |                |                   |
| <b>XIFAXAN</b> – rifaximin tab 550 mg                                                       |           |                |                   |
| <b>IMMUNIZING AGENTS</b>                                                                    |           |                |                   |
| <b>GRASTEK</b> – timothy grass pollen allergen ext sl tab 2800 bau                          |           |                |                   |
| <b>ORALAIR</b> – grass mixed pollen ext sl tab 300 ir (index of reactivity)                 |           |                |                   |
| <b>RAGWITEK</b> – short ragweed pollen allergen extract sl tab 12 amb a 1-u                 |           |                |                   |
| <b>CANCER DRUGS</b>                                                                         |           |                |                   |
| <b>abiraterone acetate tab 250 mg, 500 mg</b> (Zytiga)                                      | •         | •              | •                 |
| <b>ACTIMMUNE</b> – interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)               | •         |                |                   |
| <b>ALECENSA</b> – alectinib hcl cap 150 mg (base equivalent)                                | •         | •              | •                 |
| <b>ALUNBRIG</b> – brigatinib tab initiation therapy pack 90 mg & 180 mg                     | •         | •              | •                 |
| <b>ALUNBRIG</b> – brigatinib tab 30 mg, 90 mg, 180 mg                                       | •         | •              | •                 |
| <b>anastrozole tab 1 mg</b> (Arimidex)                                                      |           |                |                   |
| <b>AYVAKIT</b> – avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg                       | •         | •              | •                 |

| Drug Name                                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| BESREMI – ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml                                            | •         | •              | •                 |
| BESREMI PEN – ropeginterferon alfa-2b-njft soln pen inj 500 mcg/0.5ml                                           | •         | •              | •                 |
| <b>bexarotene cap 75 mg</b> (Targretin)                                                                         | •         | •              |                   |
| <b>bicalutamide tab 50 mg</b> (Casodex)                                                                         |           |                |                   |
| BOSULIF – bosutinib cap 50 mg, 100 mg                                                                           | •         | •              | •                 |
| BOSULIF – bosutinib tab 100 mg, 400 mg, 500 mg                                                                  | •         | •              | •                 |
| <b>bosutinib tab 100 mg, 400 mg, 500 mg</b> (Bosulif)                                                           | •         | •              | •                 |
| BRUKINSA – zanubrutinib cap 80 mg                                                                               | •         | •              | •                 |
| BRUKINSA – zanubrutinib tab 160 mg                                                                              | •         | •              | •                 |
| CABOMETYX – cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent) | •         | •              | •                 |
| CALQUENCE – acalabrutinib maleate tab 100 mg                                                                    | •         | •              | •                 |
| <b>capecitabine tab 150 mg, 500 mg</b> (Xeloda)                                                                 | •         | •              |                   |
| CAPRELSA – vandetanib tab 100 mg, 300 mg                                                                        | •         | •              | •                 |
| COMETRIQ – cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit                                                 | •         | •              | •                 |
| COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit                                          | •         | •              | •                 |
| COMETRIQ – cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit                                          | •         | •              | •                 |
| COTELLIC – cobimetinib fumarate tab 20 mg (base equivalent)                                                     | •         | •              | •                 |
| <b>cyclophosphamide cap 25 mg, 50 mg</b> (Cyclophosphamide)                                                     |           |                |                   |
| <b>dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg</b> (Sprycel)                                       | •         | •              | •                 |
| ERIVEDGE – vismodegib cap 150 mg                                                                                | •         | •              | •                 |
| ERLEADA – apalutamide tab 60 mg, 240 mg                                                                         | •         | •              | •                 |
| <b>erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent)</b> (Tarceva)  | •         | •              | •                 |

| Drug Name                                                                                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| ETOPOSIDE – etoposide cap 50 mg                                                                                                                               | •         |                |                   |
| <b>everolimus tab for oral susp 2 mg, 3 mg, 5 mg</b> (Afinitor disperz)                                                                                       | •         | •              | •                 |
| <b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg</b> (Afinitor)                                                                                                  | •         | •              | •                 |
| <b>exemestane tab 25 mg</b> (Aromasin)                                                                                                                        |           |                |                   |
| <b>gefitinib tab 250 mg</b> (Iressa)                                                                                                                          | •         | •              | •                 |
| GILOTRIF – afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)                                                   | •         | •              | •                 |
| HYCAMTIN – topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)                                                                                          | •         | •              |                   |
| <b>hydroxyurea cap 500 mg</b> (Hydrea)                                                                                                                        |           |                |                   |
| IBRANCE – palbociclib cap 125 mg                                                                                                                              | •         | •              | •                 |
| IBRANCE – palbociclib tab 75 mg, 100 mg, 125 mg                                                                                                               | •         | •              | •                 |
| ICLUSIG – ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)                                                    | •         | •              | •                 |
| <b>imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)</b> (Gleevec)                                                                     | •         | •              | •                 |
| IMBRUVICA – ibrutinib cap 70 mg, 140 mg                                                                                                                       | •         | •              | •                 |
| IMBRUVICA – ibrutinib tab 140 mg, 280 mg, 420 mg                                                                                                              | •         | •              | •                 |
| IMBRUVICA – ibrutinib oral susp 70 mg/ml                                                                                                                      | •         | •              | •                 |
| INLYTA – axitinib tab 1 mg, 5 mg                                                                                                                              | •         | •              | •                 |
| ITOVEBI – inavolisib tab 3 mg, 9 mg                                                                                                                           | •         | •              | •                 |
| JAKAFI – ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent) | •         | •              | •                 |
| KISQALI – ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)                                     | •         | •              | •                 |
| <b>lapatinib ditosylate tab 250 mg (base equiv)</b> (Tykerb)                                                                                                  | •         | •              | •                 |
| LAZCLUZE – lazertinib mesylate tab 80 mg, 240 mg                                                                                                              | •         | •              | •                 |

| Drug Name                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| LENVIMA 10 MG DAILY DOSE – lenvatinib cap therapy pack 10 mg (10 mg daily dose)               | •         | •              | •                 |
| LENVIMA 12MG DAILY DOSE – lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)             | •         | •              | •                 |
| LENVIMA 14 MG DAILY DOSE – lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)           | •         | •              | •                 |
| LENVIMA 18 MG DAILY DOSE – lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)       | •         | •              | •                 |
| LENVIMA 20 MG DAILY DOSE – lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)           | •         | •              | •                 |
| LENVIMA 24 MG DAILY DOSE – lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)       | •         | •              | •                 |
| LENVIMA 4 MG DAILY DOSE – lenvatinib cap therapy pack 4 mg (4 mg daily dose)                  | •         | •              | •                 |
| LENVIMA 8 MG DAILY DOSE – lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)              | •         | •              | •                 |
| <b>letrozole tab 2.5 mg</b> (Femara)                                                          |           |                |                   |
| <b>leucovorin calcium tab 5 mg, 15 mg, 25 mg</b>                                              |           |                |                   |
| LEUKERAN – chlorambucil tab 2 mg                                                              | •         |                |                   |
| <b>lomustine cap 10 mg, 40 mg, 100 mg</b> (Gleostine)                                         | •         |                |                   |
| LONSURF – trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg                                   | •         | •              | •                 |
| LYNPARZA – olaparib tab 100 mg, 150 mg                                                        | •         | •              | •                 |
| LYSODREN – mitotane tab 500 mg                                                                | •         | •              |                   |
| MATULANE – procarbazine hcl cap 50 mg                                                         | •         | •              |                   |
| <b>megestrol acetate susp 40 mg/ml</b> (Megace oral)                                          |           |                |                   |
| <b>megestrol acetate tab 20 mg, 40 mg</b>                                                     |           |                |                   |
| MEKINIST – trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent) | •         | •              | •                 |

| Drug Name                                                                                                      | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| MEKINIST – trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)                                         | •         | •              | •                 |
| <b>mercaptopurine susp 2000 mg/100ml (20 mg/ml)</b> (Purixan)                                                  | •         |                |                   |
| <b>mercaptopurine tab 50 mg</b> (Purinethol)                                                                   |           |                |                   |
| <b>mesna tab 400 mg</b> (Mesnex)                                                                               |           |                |                   |
| METHOTREXATE SODIUM – methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)                     |           |                |                   |
| <b>methotrexate sodium for inj 1 gm</b>                                                                        |           |                |                   |
| <b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</b>        |           |                |                   |
| <b>methotrexate sodium tab 2.5 mg (base equiv)</b>                                                             |           |                |                   |
| MYLERAN – busulfan tab 2 mg                                                                                    | •         |                |                   |
| <b>nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)</b> (Tasigna) | •         | •              | •                 |
| NILUTAMIDE – nilutamide tab 150 mg                                                                             | •         |                |                   |
| NINLARO – ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)        | •         | •              | •                 |
| NUBEQA – darolutamide tab 300 mg                                                                               | •         | •              | •                 |
| ODOMZO – sonidegib phosphate cap 200 mg (base equivalent)                                                      | •         | •              | •                 |
| OGSIVEO – nirogacestat hydrobromide tab 100 mg, 150 mg                                                         | •         | •              | •                 |
| <b>pazopanib hcl tab 200 mg (base equiv)</b> (Votrient)                                                        | •         | •              | •                 |
| PIQRAY 200MG DAILY DOSE – alpelisib tab therapy pack 200 mg daily dose                                         | •         | •              | •                 |
| PIQRAY 250MG DAILY DOSE – alpelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)                           | •         | •              | •                 |
| PIQRAY 300MG DAILY DOSE – alpelisib tab pack 300 mg daily dose (2x150 mg tab)                                  | •         | •              | •                 |
| <b>pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg</b> (Pomalyst)                                                      | •         | •              | •                 |

| Drug Name                                                                                                                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| RETEVMO – selpercatinib tab 40 mg, 80 mg, 120 mg, 160 mg                                                                                                                                        | •         | •              | •                 |
| ROMVIMZA – vimseltinib cap 14 mg, 20 mg, 30 mg                                                                                                                                                  | •         | •              | •                 |
| ROZLYTREK – entrectinib cap 100 mg, 200 mg                                                                                                                                                      | •         | •              | •                 |
| ROZLYTREK – entrectinib pellet pack 50 mg                                                                                                                                                       | •         | •              | •                 |
| RUBRACA – rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)                                                                                  | •         | •              | •                 |
| RYDAPT – midostaurin cap 25 mg                                                                                                                                                                  | •         | •              | •                 |
| SCSEMBLIX – asciminib hcl tab 20 mg, 40 mg, 100 mg                                                                                                                                              | •         | •              | •                 |
| SOLTAMOX – tamoxifen citrate oral soln 10 mg/5ml (base equivalent)                                                                                                                              |           |                |                   |
| <b>sorafenib tosylate tab 200 mg (base equivalent)</b> (Nexavar)                                                                                                                                | •         | •              | •                 |
| STIVARGA – regorafenib tab 40 mg                                                                                                                                                                | •         | •              | •                 |
| <b>sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent)</b> (Sutent)                                                     | •         | •              | •                 |
| TABLOID – thioguanine tab 40 mg                                                                                                                                                                 | •         |                |                   |
| TABRECTA – capmatinib hcl tab 150 mg, 200 mg                                                                                                                                                    | •         | •              | •                 |
| TAFINLAR – dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)                                                                                                             | •         | •              | •                 |
| TAFINLAR – dabrafenib mesylate tab for oral susp 10 mg (base equiv)                                                                                                                             | •         | •              | •                 |
| TAGRISSO – osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)                                                                                                            | •         | •              | •                 |
| TALZENNA – talazoparib tosylate cap 0.1 mg (base equivalent), 0.25 mg (base equivalent), 0.35 mg (base equivalent), 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1 mg (base equivalent) | •         | •              | •                 |
| <b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</b>                                                                                                                   |           |                |                   |

| Drug Name                                                                                                    | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg</b> (Temodar)                                | •         | •              |                   |
| TEPMETKO – tepotinib hcl tab 225 mg                                                                          | •         | •              | •                 |
| TIBSOVO – ivosidenib tab 250 mg                                                                              | •         | •              | •                 |
| <b>toremifene citrate tab 60 mg (base equivalent)</b> (Fareston)                                             | •         |                |                   |
| <b>tretinoin cap 10 mg</b>                                                                                   | •         | •              |                   |
| TRUQAP – capivasertib tab therapy pack 160 mg, 200 mg                                                        | •         | •              | •                 |
| TRUQAP – capivasertib tab 200 mg                                                                             | •         | •              | •                 |
| VENCLEXTA – venetoclax tab 10 mg, 50 mg, 100 mg                                                              | •         | •              | •                 |
| VENCLEXTA STARTING PACK – venetoclax tab therapy starter pack 10 & 50 & 100 mg                               | •         | •              | •                 |
| VERZENIO – abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg                                                     | •         | •              | •                 |
| VITRAKVI – larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)                       | •         | •              | •                 |
| VITRAKVI – larotrectinib sulfate oral soln 20 mg/ml (base equivalent)                                        | •         | •              | •                 |
| VORANIGO – vorasidenib tab 10 mg, 40 mg                                                                      | •         | •              | •                 |
| XALKORI – crizotinib cap 200 mg, 250 mg                                                                      | •         | •              | •                 |
| XALKORI – crizotinib cap sprinkle 20 mg, 50 mg, 150 mg                                                       | •         | •              | •                 |
| XTANDI – enzalutamide cap 40 mg                                                                              | •         | •              | •                 |
| XTANDI – enzalutamide tab 40 mg, 80 mg                                                                       | •         | •              | •                 |
| YONSA – abiraterone acetate micronized tab 125 mg                                                            | •         | •              | •                 |
| ZEJULA – niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent) | •         | •              | •                 |
| ZELBORAF – vemurafenib tab 240 mg                                                                            | •         | •              | •                 |
| ZOLINZA – vorinostat cap 100 mg                                                                              | •         | •              | •                 |
| ZYDELIG – idelalisib tab 100 mg, 150 mg                                                                      | •         | •              | •                 |
| ZYKADIA – ceritinib tab 150 mg                                                                               | •         | •              | •                 |
| <b>HORMONES, DIABETES AND RELATED DRUGS</b>                                                                  |           |                |                   |

| Drug Name                                                                            | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>CORTICOSTEROIDS</b>                                                               |           |                |                   |
| <b>budesonide delayed release particles cap 3 mg</b> (Entocort ec)                   |           |                |                   |
| DEXAMETHASONE – dexamethasone soln 0.5 mg/5ml                                        |           |                |                   |
| <b>dexamethasone elixir 0.5 mg/5ml</b>                                               |           |                |                   |
| DEXAMETHASONE INTENSOL – dexamethasone conc 1 mg/ml                                  |           |                |                   |
| <b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</b>             |           |                |                   |
| <b>fludrocortisone acetate tab 0.1 mg</b>                                            |           |                |                   |
| <b>hydrocortisone tab 5 mg, 10 mg, 20 mg</b> (Cortef)                                |           |                |                   |
| <b>methylprednisolone tab therapy pack 4 mg (21)</b> (Medrol dosepak)                |           |                |                   |
| <b>methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg</b> (Medrol)                      |           |                |                   |
| <b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>                   |           |                |                   |
| <b>prednisolone sod phosphate oral soln 5 mg/5ml (base equiv)</b> (Pediapred)        |           |                |                   |
| <b>prednisolone soln 15 mg/5ml</b>                                                   |           |                |                   |
| PREDNISONE – prednisone oral soln 5 mg/5ml                                           |           |                |                   |
| <b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</b>      |           |                |                   |
| <b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</b>                        |           |                |                   |
| <b>MALE HORMONES</b>                                                                 |           |                |                   |
| <b>danazol cap 50 mg, 100 mg, 200 mg</b>                                             |           |                |                   |
| <b>testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml</b> (Depo-testosterone) |           |                | •                 |
| TESTOSTERONE ENANTHATE – testosterone enanthate im inj in oil 200 mg/ml              |           |                | •                 |
| <b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%)</b> (Androgel)               |           |                | •                 |
| <b>testosterone td gel 12.5 mg/act (1%)</b>                                          |           |                | •                 |

| Drug Name                                                                                                                                        | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>testosterone td gel 20.25 mg/act (1.62%)</b> (Androgel pump)                                                                                  |           |                | •                 |
| <b>testosterone td soln 30 mg/act</b> (Axiron)                                                                                                   |           |                | •                 |
| <b>ESTROGENS</b>                                                                                                                                 |           |                |                   |
| CLIMARA PRO – estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day                                                                        |           |                |                   |
| DUAVEE – conjugated estrogens-bazedoxifene tab 0.45-20 mg                                                                                        |           |                |                   |
| <b>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg</b> (Activella)                                                                |           |                |                   |
| <b>estradiol tab 0.5 mg, 1 mg, 2 mg</b> (Estrace)                                                                                                |           |                |                   |
| <b>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%)</b> (Divigel)       |           |                |                   |
| <b>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</b> (Vivelle-dot)                     |           |                |                   |
| <b>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</b> (Climara) |           |                |                   |
| <b>estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg</b> (Premarin)                                                           |           |                |                   |
| MYFEMBREE – relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg                                                                            |           | •              | •                 |
| <b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</b> (Femhrt low dose)                                                              |           |                |                   |
| <b>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</b>                                                                                    |           |                |                   |
| ORIAHNN – elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack                                                                        |           | •              | •                 |
| PREMARIN – estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg                                                                  |           |                |                   |
| PREMPHASE – conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)                                                                          |           |                |                   |
| 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                                  |           |                |                   |

| Drug Name                                                                                                                                                                                                                                                            | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>PROGESTINS</b>                                                                                                                                                                                                                                                    |           |                |                   |
| <b>medroxyprogesterone acetate tab</b><br><b>2.5 mg, 5 mg, 10 mg</b> (Provera)                                                                                                                                                                                       |           |                |                   |
| <b>norethindrone acetate tab 5 mg</b><br>(Aygestin)                                                                                                                                                                                                                  |           |                |                   |
| <b>progesterone cap 100 mg, 200 mg</b><br>(Prometrium)                                                                                                                                                                                                               |           |                |                   |
| <b>BIRTH CONTROL</b><br>Most generic oral contraceptives are formulary products. Selected brands that are not available generically are also on the formulary and appear as: TRADE NAME followed by the generic name, e.g., OGESTREL – norgestrel/ethinyl estradiol. |           |                |                   |
| ARANELLE – norethindrone-eth estradiol<br>tab 0.5-35/1-35/0.5-35 mg-mcg                                                                                                                                                                                              |           |                |                   |
| <b>desogest-eth estrad &amp; eth estrad tab</b><br><b>0.15-0.02/0.01 mg(21/5)</b> (Mircette)                                                                                                                                                                         |           |                |                   |
| <b>desogestrel &amp; ethinyl estradiol tab</b><br><b>0.15 mg-30 mcg</b> (Desogen)                                                                                                                                                                                    |           |                |                   |
| <b>drospirenone-ethinyl estradiol tab</b><br><b>3-0.02 mg</b> (Yaz)                                                                                                                                                                                                  |           |                |                   |
| <b>drospirenone-ethinyl estradiol tab</b><br><b>3-0.03 mg</b> (Yasmin 28)                                                                                                                                                                                            |           |                |                   |
| ELLA – ulipristal acetate tab 30 mg                                                                                                                                                                                                                                  |           |                |                   |
| <b>ethynodiol diacetate &amp; ethinyl estradiol</b><br><b>tab 1 mg-35 mcg</b>                                                                                                                                                                                        |           |                |                   |
| <b>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth</b><br><b>est tab 0.01mg(7)</b> (Loseasonique)                                                                                                                                                                      |           |                |                   |
| <b>levonorg-eth est tab 0.15-0.03mg(84) &amp;</b><br><b>eth est tab 0.01mg(7)</b> (Seasonique)                                                                                                                                                                       |           |                |                   |
| <b>levonorgestrel &amp; ethinyl estradiol (91-</b><br><b>day) tab 0.15-0.03 mg</b>                                                                                                                                                                                   |           |                |                   |
| <b>levonorgestrel &amp; ethinyl estradiol tab</b><br><b>0.1 mg-20 mcg, 0.15 mg-30 mcg</b>                                                                                                                                                                            |           |                |                   |
| <b>levonorgestrel-eth estra tab</b><br><b>0.05-30/0.075-40/0.125-30mg-mcg</b>                                                                                                                                                                                        |           |                |                   |
| LO LOESTRIN FE – norethin-eth estradiol-<br>fe tab 1 mg-10 mcg (24)/10 mcg (2)                                                                                                                                                                                       |           |                |                   |
| <b>medroxyprogesterone acetate im susp</b><br><b>prefilled syr 150 mg/ml</b> (Depo-provera<br>contrac)                                                                                                                                                               |           |                |                   |

| Drug Name                                                                                             | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>medroxyprogesterone acetate im susp</b><br><b>150 mg/ml</b> (Depo-provera contrac)                 |           |                |                   |
| <b>norelgestromin-ethinyl estradiol td ptwk</b><br><b>150-35 mcg/24hr</b>                             |           |                |                   |
| <b>norethindrone &amp; ethinyl estradiol tab</b><br><b>0.4 mg-35 mcg</b> (Ovcon-35)                   |           |                |                   |
| <b>norethindrone &amp; ethinyl estradiol tab</b><br><b>0.5 mg-35 mcg</b> (Brevicon-28)                |           |                |                   |
| <b>norethindrone &amp; ethinyl estradiol tab</b><br><b>1 mg-35 mcg</b> (Norinyl 1+35)                 |           |                |                   |
| <b>norethindrone ac-ethinyl estrad-fe tab</b><br><b>1-20/1-30/1-35 mg-mcg</b> (Estrostep fe)          |           |                |                   |
| <b>norethindrone ace &amp; ethinyl estradiol tab</b><br><b>1 mg-20 mcg</b> (Loestrin 1/20-21)         |           |                |                   |
| <b>norethindrone ace &amp; ethinyl estradiol tab</b><br><b>1.5 mg-30 mcg</b> (Loestrin 1.5/30-21)     |           |                |                   |
| <b>norethindrone ace &amp; ethinyl estradiol-fe</b><br><b>tab 1 mg-20 mcg</b> (Loestrin fe 1/20)      |           |                |                   |
| <b>norethindrone ace &amp; ethinyl estradiol-fe</b><br><b>tab 1.5 mg-30 mcg</b> (Loestrin fe 1.5/30)  |           |                |                   |
| <b>norethindrone tab 0.35 mg</b> (Nor-qd)                                                             |           |                |                   |
| <b>norethindrone-eth estradiol tab</b><br><b>0.5-35/0.75-35/1-35 mg-mcg</b> (Ortho-<br>novum 7/7/7)   |           |                |                   |
| <b>norgestimate &amp; ethinyl estradiol tab</b><br><b>0.25 mg-35 mcg</b> (Ortho-cyclen)               |           |                |                   |
| <b>norgestimate-eth estrad tab</b><br><b>0.18-25/0.215-25/0.25-25 mg-mcg</b> (Ortho<br>tri-cyclen lo) |           |                |                   |
| <b>norgestimate-eth estrad tab</b><br><b>0.18-35/0.215-35/0.25-35 mg-mcg</b> (Ortho<br>tri-cyclen)    |           |                |                   |
| <b>norgestrel &amp; ethinyl estradiol tab</b><br><b>0.3 mg-30 mcg</b>                                 |           |                |                   |
| NUVARING – etonogestrel-ethinyl estradiol<br>va ring 0.12-0.015 mg/24hr                               |           |                |                   |
| TYBLUME – levonorgestrel & ethinyl<br>estradiol chew tab 0.1 mg-20 mcg                                |           |                |                   |
| VALTYA 1/50 – ethynodiol diacetate &<br>ethinyl estradiol tab 1 mg-50 mcg                             |           |                |                   |

| Drug Name                                                                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| VELIVET – desogest-ethin est tab<br>0.1-0.025/0.125-0.025/0.15-0.025mg-mg                                                           |           |                |                   |
| <b>INFERTILITY</b>                                                                                                                  |           |                |                   |
| <b>cetrorelix acetate for inj kit 0.25 mg</b><br>(Cetrotide)                                                                        | •         |                |                   |
| FOLLISTIM AQ – follitropin beta inj<br>300 unit/0.36ml, 600 unit/0.72ml, 900<br>unit/1.08ml                                         | •         |                |                   |
| <b>ganirelix acetate soln prefilled syringe</b><br><b>250 mcg/0.5ml</b> (Ganirelix acetate)                                         | •         |                |                   |
| GONAL-F – follitropin alfa for inj 450 unit,<br>1050 unit                                                                           | •         |                |                   |
| GONAL-F RFF REDIRECT – follitropin<br>alfa subcutaneous soln pen-inj 300<br>unit/0.48ml, 450 unit/0.72ml, 900<br>unit/1.44ml        | •         |                |                   |
| MENOPUR – menopins for<br>subcutaneous inj 75 unit                                                                                  | •         |                |                   |
| OVIDREL – choriogonadotropin alfa soln<br>prefilled syr 250 mcg/0.5ml                                                               | •         |                |                   |
| PREGNYL – chorionic gonadotropin for im<br>inj 10000 unit                                                                           | •         |                |                   |
| PREGNYL W/DILUENT BENZYL –<br>chorionic gonadotropin for im inj 10000<br>unit                                                       | •         |                |                   |
| <b>DIABETES</b>                                                                                                                     |           |                |                   |
| <b>acarbose tab 25 mg, 50 mg, 100 mg</b><br>(Precose)                                                                               |           |                |                   |
| BAQSIMI ONE PACK – glucagon nasal<br>powder 3 mg/dose                                                                               |           |                |                   |
| BAQSIMI TWO PACK – glucagon nasal<br>powder 3 mg/dose                                                                               |           |                |                   |
| <b>dapagliflozin free base-metformin hcl</b><br><b>tab er 24hr 5-500 mg, 5-1000 mg,</b><br><b>10-500 mg, 10-1000 mg</b> (Xigduo xr) |           |                |                   |
| <b>dapagliflozin tab 5 mg, 10 mg</b> (Farxiga)                                                                                      |           |                |                   |
| <b>diazoxide susp 50 mg/ml</b> (Proglycem)                                                                                          |           |                |                   |
| <b>glimepiride tab 1 mg, 2 mg, 4 mg</b> (Amaryl)                                                                                    |           |                |                   |
| <b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg</b><br>(Glucotrol xl)                                                                  |           |                |                   |

| Drug Name                                                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>glipizide tab 5 mg, 10 mg</b> (Glucotrol)                                                                                    |           |                |                   |
| <b>glipizide-metformin hcl tab 2.5-250 mg,</b><br><b>2.5-500 mg, 5-500 mg</b>                                                   |           |                |                   |
| GLUCAGON EMERGENCY KIT FO –<br>glucagon hcl for inj 1 mg                                                                        |           |                |                   |
| <b>glucagon for inj 1 mg</b>                                                                                                    |           |                |                   |
| <b>glyburide tab 1.25 mg, 2.5 mg, 5 mg</b>                                                                                      |           |                |                   |
| <b>glyburide-metformin tab 1.25-250 mg,</b><br><b>2.5-500 mg, 5-500 mg</b> (Glucovance)                                         |           |                |                   |
| GLYXAMBI – empagliflozin-linagliptin tab<br>10-5 mg, 25-5 mg                                                                    |           |                |                   |
| GVOKE HYPOPEN 1-PACK – glucagon<br>subcutaneous solution auto-injector 0.5<br>mg/0.1ml, 1 mg/0.2ml                              |           |                |                   |
| GVOKE HYPOPEN 2-PACK – glucagon<br>subcutaneous solution auto-injector 0.5<br>mg/0.1ml, 1 mg/0.2ml                              |           |                |                   |
| GVOKE KIT – glucagon subcutaneous soln<br>1 mg/0.2ml                                                                            |           |                |                   |
| GVOKE PFS – glucagon subcutaneous soln<br>pref syringe 1 mg/0.2ml                                                               |           |                |                   |
| JANUMET XR – sitagliptin phosphate-<br>metformin hcl tab er 24hr 50-500 mg,<br>50-1000 mg, 100-1000 mg                          |           |                |                   |
| JARDIANCE – empagliflozin tab 10 mg, 25<br>mg                                                                                   |           |                |                   |
| <b>metformin hcl tab er 24hr 500 mg,</b><br><b>750 mg</b> (Glucophage xr)                                                       |           |                |                   |
| <b>metformin hcl tab 500 mg, 850 mg,</b><br><b>1000 mg</b> (Glucophage)                                                         |           |                |                   |
| MOUNJARO – tirzepatide soln auto-injector<br>2.5 mg/0.5ml, 5 mg/0.5ml, 7.5 mg/0.5ml,<br>10 mg/0.5ml, 12.5 mg/0.5ml, 15 mg/0.5ml |           | •              | •                 |
| <b>nateglinide tab 60 mg, 120 mg</b> (Starlix)                                                                                  |           |                |                   |
| OZEMPIC – semaglutide soln pen-inj 0.25<br>or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4<br>mg/3ml), 2 mg/dose (8 mg/3ml)             |           | •              | •                 |
| OZEMPIC – semaglutide tab 1.5 mg, 4 mg,<br>9 mg                                                                                 |           | •              | •                 |

| Drug Name                                                                                              | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)</b> (Actos)         |           |                |                   |
| <b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg</b> (Actoplus met)                          |           |                |                   |
| RYBELSUS – semaglutide tab 3 mg, 7 mg, 14 mg                                                           |           | •              | •                 |
| <b>sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)</b> (Januvia) |           |                |                   |
| <b>sitagliptin phosphate-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg</b> (Janumet xr) |           |                |                   |
| <b>sitagliptin phosphate-metformin hcl tab 50-500 mg, 50-1000 mg</b> (Janumet)                         |           |                |                   |
| SOLIQUA 100/33 – insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml                          |           |                | •                 |
| SYNJARDY – empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg              |           |                |                   |
| SYNJARDY XR – empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg  |           |                |                   |
| TRIJARDY XR – empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg |           |                |                   |
| TRIJARDY XR – empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg                          |           |                |                   |
| TRULICITY – dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml       |           | •              | •                 |
| XIGDUO XR – dapagliflozin free bas-metformin hcl tab er 24hr 2.5-1000 mg                               |           |                |                   |
| XULTOPHY 100/3.6 – insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml                         |           |                | •                 |
| <b>DIABETES - INSULINS</b>                                                                             |           |                |                   |
| <b>Rapid-Acting Insulins</b>                                                                           |           |                |                   |
| FIASP – insulin aspart (with niacinamide) inj 100 unit/ml                                              |           |                |                   |
| FIASP FLEXTOUCH – insulin aspart (with niacinamide) sol pen-inj 100 unit/ml                            |           |                |                   |

| Drug Name                                                                                 | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| FIASP PENFILL – insulin aspart (with niacinamide) soln cartridge 100 unit/ml              |           |                | •                 |
| HUMALOG – insulin lispro soln cartridge 100 unit/ml                                       |           |                |                   |
| HUMALOG – insulin lispro inj soln 100 unit/ml                                             |           |                |                   |
| HUMALOG JUNIOR KWIKPEN – insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)     |           |                |                   |
| HUMALOG KWIKPEN – insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml |           |                |                   |
| LYUMJEV – insulin lispro-aabc inj 100 unit/ml                                             |           |                |                   |
| LYUMJEV KWIKPEN – insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)              |           |                |                   |
| LYUMJEV KWIKPEN – insulin lispro-aabc soln pen-injector 200 unit/ml                       |           |                |                   |
| NOVOLOG – insulin aspart inj soln 100 unit/ml                                             |           |                |                   |
| NOVOLOG FLEXPEN – insulin aspart soln pen-injector 100 unit/ml                            |           |                |                   |
| NOVOLOG PENFILL – insulin aspart soln cartridge 100 unit/ml                               |           |                |                   |
| <b>Short-Acting Insulins</b>                                                              |           |                |                   |
| HUMULIN R – insulin regular (human) inj 100 unit/ml                                       |           |                |                   |
| HUMULIN R U-500 KWIKPEN – insulin regular (human) soln pen-injector 500 unit/ml           |           |                |                   |
| NOVOLIN R – insulin regular (human) inj 100 unit/ml                                       |           |                |                   |
| NOVOLIN R FLEXPEN – insulin regular (human) soln pen-injector 100 unit/ml                 |           |                |                   |
| <b>Intermediate-Acting Insulins</b>                                                       |           |                |                   |
| HUMALOG MIX 50/50 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)  |           |                |                   |
| HUMALOG MIX 75/25 – insulin lispro prot & lispro inj 100 unit/ml (75-25)                  |           |                |                   |

| Drug Name                                                                                | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| HUMALOG MIX 75/25 KWIKPEN – insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25) |           |                |                   |
| HUMULIN N – insulin nph (human) (isophane) inj 100 unit/ml                               |           |                |                   |
| HUMULIN N KWIKPEN – insulin nph (human) (isophane) susp pen-injector 100 unit/ml         |           |                |                   |
| HUMULIN 70/30 – insulin nph isophane & regular human inj 100 unit/ml (70-30)             |           |                |                   |
| HUMULIN 70/30 KWIKPEN – insulin nph & regular susp pen-inj 100 unit/ml (70-30)           |           |                |                   |
| NOVOLIN N – insulin nph (human) (isophane) inj 100 unit/ml                               |           |                |                   |
| NOVOLIN N FLEXPEN – insulin nph (human) (isophane) susp pen-injector 100 unit/ml         |           |                |                   |
| NOVOLIN 70/30 – insulin nph isophane & regular human inj 100 unit/ml (70-30)             |           |                |                   |
| NOVOLIN 70/30 FLEXPEN – insulin nph & regular susp pen-inj 100 unit/ml (70-30)           |           |                |                   |
| NOVOLOG MIX 70/30 – insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)         |           |                |                   |
| NOVOLOG MIX 70/30 PREFILL – insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30) |           |                |                   |
| <b>Basal Insulins</b>                                                                    |           |                |                   |
| INSULIN GLARGINE-YFGN – insulin glargine-yfgn soln pen-injector 100 unit/ml              |           |                |                   |
| INSULIN GLARGINE-YFGN – insulin glargine-yfgn inj 100 unit/ml                            |           |                |                   |
| SEMGLEE – insulin glargine-yfgn soln pen-injector 100 unit/ml                            |           |                |                   |
| SEMGLEE – insulin glargine-yfgn inj 100 unit/ml                                          |           |                |                   |
| TOUJEO MAX SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml (2 unit dial)       |           |                |                   |
| TOUJEO SOLOSTAR – insulin glargine soln pen-injector 300 unit/ml (1 unit dial)           |           |                |                   |
| TRESIBA – insulin degludec inj 100 unit/ml                                               |           |                |                   |

| Drug Name                                                                                                                                          | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| TRESIBA FLEXTOUCH – insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml                                                                    |           |                |                   |
| <b>THYROID REGULATION</b>                                                                                                                          |           |                |                   |
| <b>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</b> (Synthroid) |           |                |                   |
| <b>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg</b> (Cytomel)                                                                                     |           |                |                   |
| <b>methimazole tab 5 mg, 10 mg</b> (Tapazole)                                                                                                      |           |                |                   |
| <b>propylthiouracil tab 50 mg</b>                                                                                                                  |           |                |                   |
| <b>GROWTH HORMONE</b>                                                                                                                              |           |                |                   |
| GENOTROPIN – somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)                                                                       | •         | •              |                   |
| GENOTROPIN MINISQUICK – 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   | •         | •              |                   |
| INCRELEX – mecasermin inj 40 mg/4ml (10 mg/ml)                                                                                                     | •         |                |                   |
| OMNITROPE – somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml                                                                                  | •         | •              |                   |
| OMNITROPE – somatropin for inj 5.8 mg                                                                                                              | •         | •              |                   |
| <b>OTHER HORMONES AND RELATED DRUGS</b>                                                                                                            |           |                |                   |
| <b>alendronate sodium tab 10 mg, 35 mg</b>                                                                                                         |           |                |                   |
| <b>alendronate sodium tab 70 mg</b> (Fosamax)                                                                                                      |           |                |                   |
| <b>betaine powder for oral solution</b> (Cystadane)                                                                                                | •         |                |                   |
| <b>cabergoline tab 0.5 mg</b>                                                                                                                      |           |                |                   |
| <b>calcitonin (salmon) nasal soln 200 unit/act</b> (Miacalcin)                                                                                     |           |                |                   |
| <b>calcitriol cap 0.25 mcg, 0.5 mcg</b> (Rocaltrol)                                                                                                |           |                |                   |
| <b>carglumic acid soluble tab 200 mg</b> (Carbaglu)                                                                                                | •         | •              |                   |
| <b>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv)</b> (Sensipar)                                                    | •         | •              |                   |

| Drug Name                                                                                   | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| DESMOPRESSIN ACETATE – desmopressin acetate nasal spray soln 0.01%                          |           |                |                   |
| <b>desmopressin acetate inj 4 mcg/ml</b> (Ddvp)                                             |           |                |                   |
| <b>desmopressin acetate nasal spray soln 0.01% (refrigerated)</b>                           |           |                |                   |
| <b>desmopressin acetate preservative free (pf) inj 4 mcg/ml</b> (Ddvp)                      |           |                |                   |
| <b>desmopressin acetate tab 0.1 mg, 0.2 mg</b> (Ddvp)                                       |           |                |                   |
| <b>ibandronate sodium tab 150 mg (base equivalent)</b> (Boniva)                             |           |                |                   |
| JYNARQUE – tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg | •         | •              | •                 |
| JYNARQUE – tolvaptan tab 15 mg, 30 mg                                                       | •         | •              | •                 |
| KERENDIA – finerenone tab 10 mg, 20 mg, 40 mg                                               |           | •              | •                 |
| <b>levocarnitine oral soln 1 gm/10ml (10%)</b> (Carnitor)                                   |           |                |                   |
| <b>levocarnitine tab 330 mg</b> (Carnitor)                                                  |           |                |                   |
| <b>methylergonovine maleate tab 0.2 mg</b>                                                  |           |                |                   |
| NITYR – nitisinone tab 2 mg, 5 mg, 10 mg                                                    | •         |                |                   |
| ORILISSA – elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)                     |           | •              | •                 |
| PHEBURANE – sodium phenylbutyrate oral pellets 483 mg/gm                                    | •         |                |                   |
| <b>raloxifene hcl tab 60 mg</b> (Evista)                                                    |           |                |                   |
| REDEMPLO – plozasiran sodium subcut soln pref syr 25 mg/0.5ml (base eq)                     | •         | •              | •                 |
| <b>sapropterin dihydrochloride powder packet 100 mg, 500 mg</b> (Kuvan)                     | •         | •              |                   |
| <b>sapropterin dihydrochloride tab 100 mg</b> (Kuvan)                                       | •         | •              |                   |
| STRENSIQ – asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml  | •         | •              |                   |
| <b>teriparatide soln pen-inj 560 mcg/2.24ml</b> (Forteo)                                    | •         | •              | •                 |

| Drug Name                                                                                                  | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| TRYNGOLZA – olezarsen sod subcut soln auto-inject 50 mg/0.8ml (base eq), auto-inject 80 mg/0.8ml (base eq) | •         | •              | •                 |
| TYMLOS – abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml                                      | •         | •              | •                 |
| <b>HEART AND CIRCULATORY DRUGS</b>                                                                         |           |                |                   |
| <b>ANGIOTENSIN CONVERTING ENZYME (ACE) INHIBITORS AND COMBINATIONS</b>                                     |           |                |                   |
| <b>benazepril &amp; hydrochlorothiazide tab 5-6.25 mg</b>                                                  |           |                |                   |
| <b>benazepril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg</b> (Lotensin hct)            |           |                |                   |
| <b>benazepril hcl tab 5 mg</b>                                                                             |           |                |                   |
| <b>benazepril hcl tab 10 mg, 20 mg, 40 mg</b> (Lotensin)                                                   |           |                |                   |
| <b>captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg</b>                                                         |           |                |                   |
| CAPTOPRIL/HYDROCHLOROTHIA – captopril & hydrochlorothiazide tab 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg     |           |                |                   |
| <b>enalapril maleate &amp; hydrochlorothiazide tab 5-12.5 mg</b>                                           |           |                |                   |
| <b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</b> (Vaseretic)                                |           |                |                   |
| <b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg</b> (Vasotec)                                          |           |                |                   |
| <b>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b>                              |           |                |                   |
| <b>fosinopril sodium tab 10 mg, 20 mg, 40 mg</b>                                                           |           |                |                   |
| <b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg</b> (Zestoretic)              |           |                |                   |
| <b>lisinopril tab 2.5 mg, 30 mg, 40 mg</b> (Zestril)                                                       |           |                |                   |
| <b>lisinopril tab 5 mg, 10 mg, 20 mg</b> (Prinivil)                                                        |           |                |                   |
| <b>moexipril hcl tab 7.5 mg, 15 mg</b> (Univasc)                                                           |           |                |                   |
| PERINDOPRIL ERBUMINE – perindopril erbumine tab 2 mg, 8 mg                                                 |           |                |                   |

| Drug Name                                                                                                                                | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>perindopril erbumine tab 4 mg</b> (Aceon)                                                                                             |           |                |                   |
| <b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</b> (Accupril)                                                                            |           |                |                   |
| QUINAPRIL/HYDROCHLOROTHIA –<br>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg                                        |           |                |                   |
| <b>ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg</b> (Altace)                                                                                |           |                |                   |
| <b>trandolapril tab 1 mg, 2 mg, 4 mg</b> (Mavik)                                                                                         |           |                |                   |
| <b>ANGIOTENSIN II RECEPTOR ANTAGONISTS (ARBs) AND COMBINATIONS</b>                                                                       |           |                |                   |
| <b>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</b> (Exforge hct) |           |                |                   |
| <b>candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg</b> (Atacand)                                                                      |           |                |                   |
| <b>candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg</b> (Atacand hct)                                      |           |                |                   |
| <b>irbesartan tab 75 mg, 150 mg, 300 mg</b> (Avapro)                                                                                     |           |                |                   |
| <b>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg</b> (Avalide)                                                             |           |                |                   |
| <b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg</b> (Hyzaar)                                      |           |                |                   |
| <b>losartan potassium tab 25 mg, 50 mg, 100 mg</b> (Cozaar)                                                                              |           |                |                   |
| <b>telmisartan tab 20 mg, 40 mg, 80 mg</b> (Micardis)                                                                                    |           |                |                   |
| <b>valsartan tab 40 mg, 80 mg, 160 mg, 320 mg</b> (Diovan)                                                                               |           |                |                   |
| <b>valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg</b> (Diovan hct)                         |           |                |                   |
| <b>BETA BLOCKERS AND COMBINATIONS</b>                                                                                                    |           |                |                   |
| <b>acebutolol hcl cap 200 mg, 400 mg</b> (Sectral)                                                                                       |           |                |                   |

| Drug Name                                                                                                                                            | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>atenolol &amp; chlorthalidone tab 50-25 mg</b> (Tenoretic 50)                                                                                     |           |                |                   |
| <b>atenolol &amp; chlorthalidone tab 100-25 mg</b> (Tenoretic 100)                                                                                   |           |                |                   |
| <b>atenolol tab 25 mg, 50 mg, 100 mg</b> (Tenormin)                                                                                                  |           |                |                   |
| <b>bisoprolol &amp; hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg</b> (Ziac)                                                            |           |                |                   |
| <b>bisoprolol fumarate tab 5 mg, 10 mg</b> (Zebeta)                                                                                                  |           |                |                   |
| <b>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg</b> (Coreg)                                                                                      |           |                |                   |
| <b>labetalol hcl tab 100 mg, 200 mg, 300 mg</b> (Trandate)                                                                                           |           |                |                   |
| <b>metoprolol &amp; hydrochlorothiazide tab 50-25 mg, 100-25 mg</b> (Lopressor hct)                                                                  |           |                |                   |
| <b>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</b>                                                                                            |           |                |                   |
| <b>metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)</b> (Toprol xl) |           |                |                   |
| <b>metoprolol tartrate tab 25 mg</b>                                                                                                                 |           |                |                   |
| <b>metoprolol tartrate tab 50 mg, 100 mg</b> (Lopressor)                                                                                             |           |                |                   |
| <b>nadolol tab 20 mg, 40 mg, 80 mg</b> (Corgard)                                                                                                     |           |                |                   |
| <b>pindolol tab 5 mg, 10 mg</b>                                                                                                                      |           |                |                   |
| PROPRANOLOL HCL – propranolol hcl oral soln 40 mg/5ml                                                                                                |           |                |                   |
| <b>propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg</b> (Inderal la)                                                                         |           |                |                   |
| <b>propranolol hcl oral soln 20 mg/5ml</b>                                                                                                           |           |                |                   |
| <b>propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</b>                                                                                         |           |                |                   |
| <b>CALCIUM CHANNEL BLOCKERS AND COMBINATIONS</b>                                                                                                     |           |                |                   |

| Drug Name                                                                                                          | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) (Norvasc)</b> |           |                |                   |
| <b>amlodipine besylate-benazepril hcl cap 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg (Lotrel)</b>    |           |                |                   |
| <b>amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg (Exforge)</b>                        |           |                |                   |
| <b>diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg</b>                                                            |           |                |                   |
| <b>diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg (Cardizem cd)</b>                                 |           |                |                   |
| <b>diltiazem hcl coated beads cap er 24hr 300 mg</b>                                                               |           |                |                   |
| <b>diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg (Tiazac)</b>    |           |                |                   |
| <b>diltiazem hcl tab 30 mg, 60 mg, 120 mg (Cardizem)</b>                                                           |           |                |                   |
| <b>diltiazem hcl tab 90 mg</b>                                                                                     |           |                |                   |
| <b>ENTRESTO – sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg</b>                                               |           |                |                   |
| <b>felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg</b>                                                                  |           |                |                   |
| <b>nifedipine tab er 24hr 30 mg, 60 mg, 90 mg (Adalat cc)</b>                                                      |           |                |                   |
| <b>nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg (Procardia xl)</b>                                   |           |                |                   |
| <b>nimodipine cap 30 mg</b>                                                                                        |           |                |                   |
| <b>sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg (Entresto)</b>                                           |           |                |                   |
| <b>verapamil hcl cap er 24hr 120 mg, 180 mg, 240 mg (Verelan)</b>                                                  |           |                |                   |
| <b>verapamil hcl tab er 120 mg, 180 mg, 240 mg (Calan sr)</b>                                                      |           |                |                   |
| <b>verapamil hcl tab 40 mg</b>                                                                                     |           |                |                   |
| <b>verapamil hcl tab 80 mg, 120 mg (Calan)</b>                                                                     |           |                |                   |
| <b>CHEST PAIN (ANGINA)</b>                                                                                         |           |                |                   |

| Drug Name                                                                                                                                    | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>isosorbide dinitrate tab 5 mg (Isordil titradose)</b>                                                                                     |           |                |                   |
| <b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</b>                                                                                          |           |                |                   |
| <b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</b>                                                                               |           |                |                   |
| <b>isosorbide mononitrate tab 10 mg, 20 mg</b>                                                                                               |           |                |                   |
| <b>NITRO-TIME – nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg</b>                                                                                |           |                |                   |
| <b>nitroglycerin oint 2%</b>                                                                                                                 |           |                |                   |
| <b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg (Nitrostat)</b>                                                                               |           |                |                   |
| <b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr (Nitro-dur)</b>                                                    |           |                |                   |
| <b>CHOLESTEROL LOWERING</b>                                                                                                                  |           |                |                   |
| <b>atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) (Lipitor)</b> |           |                |                   |
| <b>cholestyramine light powder 4 gm/dose (Questran light)</b>                                                                                |           |                |                   |
| <b>cholestyramine powder 4 gm/dose (Questran)</b>                                                                                            |           |                |                   |
| <b>colesevelam hcl packet for susp 3.75 gm (Welchol)</b>                                                                                     |           |                |                   |
| <b>colesevelam hcl tab 625 mg (Welchol)</b>                                                                                                  |           |                |                   |
| <b>colestipol hcl granule packets 5 gm (Colestid flavored)</b>                                                                               |           |                |                   |
| <b>colestipol hcl granules 5 gm (Colestid flavored)</b>                                                                                      |           |                |                   |
| <b>colestipol hcl tab 1 gm (Colestid)</b>                                                                                                    |           |                |                   |
| <b>ezetimibe tab 10 mg (Zetia)</b>                                                                                                           |           |                |                   |
| <b>ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg (Vytorin)</b>                                                            |           |                |                   |
| <b>fenofibrate micronized cap 43 mg (Antara)</b>                                                                                             |           |                |                   |
| <b>fenofibrate micronized cap 67 mg, 134 mg, 200 mg (Lofibra)</b>                                                                            |           |                |                   |
| <b>fenofibrate tab 48 mg, 145 mg (Tricor)</b>                                                                                                |           |                |                   |

| Drug Name                                                                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>fenofibrate tab 54 mg, 160 mg</b> (Lofibra)                                                                                      |           |                |                   |
| <b>gemfibrozil tab 600 mg</b> (Lopid)                                                                                               |           |                |                   |
| <b>icosapent ethyl cap 0.5 gm, 1 gm</b> (Vascepa)                                                                                   |           | •              | •                 |
| JUXTAPID – lomitapide mesylate cap 2 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv) | •         |                |                   |
| <b>lovastatin tab 10 mg</b>                                                                                                         |           |                |                   |
| <b>lovastatin tab 20 mg, 40 mg</b> (Mevacor)                                                                                        |           |                |                   |
| NEXLETOL – bempedoic acid tab 180 mg                                                                                                |           | •              | •                 |
| NEXLIZET – bempedoic acid-ezetimibe tab 180-10 mg                                                                                   |           | •              | •                 |
| <b>niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic)</b> (Niaspan)               |           |                |                   |
| <b>omega-3-acid ethyl esters cap 1 gm</b> (Lovaza)                                                                                  |           |                |                   |
| <b>pravastatin sodium tab 10 mg</b>                                                                                                 |           |                |                   |
| <b>pravastatin sodium tab 20 mg, 40 mg, 80 mg</b> (Pravachol)                                                                       |           |                |                   |
| REPATHA SURECLICK – evolocumab subcutaneous soln auto-injector 140 mg/ml                                                            |           | •              | •                 |
| <b>rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg</b> (Crestor)                                                                 |           |                |                   |
| <b>simvastatin tab 5 mg, 10 mg, 20 mg, 40 mg, 80 mg</b> (Zocor)                                                                     |           |                |                   |
| VASCEPA – icosapent ethyl cap 0.5 gm, 1 gm                                                                                          |           | •              | •                 |
| <b>FLUID REDUCTION</b>                                                                                                              |           |                |                   |
| <b>acetazolamide cap er 12hr 500 mg</b> (Diamox)                                                                                    |           |                |                   |
| <b>acetazolamide tab 125 mg, 250 mg</b>                                                                                             |           |                |                   |
| <b>amiloride hcl tab 5 mg</b>                                                                                                       |           |                |                   |
| AMILORIDE/HYDROCHLOROTHIA – amiloride & hydrochlorothiazide tab 5-50 mg                                                             |           |                |                   |
| <b>bumetanide tab 0.5 mg, 1 mg, 2 mg</b>                                                                                            |           |                |                   |

| Drug Name                                                                  | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>chlorthalidone tab 25 mg, 50 mg</b>                                     |           |                |                   |
| FUROSEMIDE – furosemide oral soln 10 mg/ml                                 |           |                |                   |
| <b>furosemide tab 20 mg, 40 mg, 80 mg</b> (Lasix)                          |           |                |                   |
| <b>hydrochlorothiazide cap 12.5 mg</b> (Microzide)                         |           |                |                   |
| <b>hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg</b>                       |           |                |                   |
| <b>indapamide tab 1.25 mg, 2.5 mg</b>                                      |           |                |                   |
| <b>metolazone tab 2.5 mg, 5 mg</b> (Zaroxolyn)                             |           |                |                   |
| <b>metolazone tab 10 mg</b>                                                |           |                |                   |
| <b>spironolactone &amp; hydrochlorothiazide tab 25-25 mg</b> (Aldactazide) |           |                |                   |
| <b>spironolactone tab 25 mg, 50 mg, 100 mg</b> (Aldactone)                 |           |                |                   |
| <b>toremide tab 5 mg, 10 mg, 20 mg, 100 mg</b> (Demadex)                   |           |                |                   |
| <b>triamterene &amp; hydrochlorothiazide cap 37.5-25 mg</b> (Dyazide)      |           |                |                   |
| <b>triamterene &amp; hydrochlorothiazide tab 37.5-25 mg</b> (Maxzide-25)   |           |                |                   |
| <b>triamterene &amp; hydrochlorothiazide tab 75-50 mg</b> (Maxzide)        |           |                |                   |
| <b>HEART RHYTHM</b>                                                        |           |                |                   |
| <b>amiodarone hcl tab 100 mg</b>                                           |           |                |                   |
| <b>amiodarone hcl tab 200 mg</b> (Cordarone)                               |           |                |                   |
| <b>disopyramide phosphate cap 100 mg, 150 mg</b> (Norpac)                  |           |                |                   |
| <b>flecainide acetate tab 50 mg, 100 mg, 150 mg</b>                        |           |                |                   |
| <b>mexiletine hcl cap 150 mg, 200 mg, 250 mg</b>                           |           |                |                   |
| MULTAQ – dronedarone hcl tab 400 mg (base equivalent)                      |           |                |                   |
| <b>propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg</b> (Rythmol sr)     |           |                |                   |
| <b>propafenone hcl tab 150 mg, 225 mg</b> (Rythmol)                        |           |                |                   |

| Drug Name                                                                       | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>propafenone hcl tab 300 mg</b>                                               |           |                |                   |
| <b>quinidine gluconate tab er 324 mg</b>                                        |           |                |                   |
| QUINIDINE SULFATE – quinidine sulfate<br>tab 200 mg, 300 mg                     |           |                |                   |
| <b>sotalol hcl (afib/af) tab 80 mg, 120 mg,<br/>160 mg (Betapace af)</b>        |           |                |                   |
| <b>sotalol hcl tab 80 mg, 120 mg, 160 mg</b><br>(Betapace)                      |           |                |                   |
| <b>sotalol hcl tab 240 mg</b>                                                   |           |                |                   |
| <b>OTHER HEART RELATED DRUGS</b>                                                |           |                |                   |
| <b>ambrisentan tab 5 mg, 10 mg (Letairis)</b>                                   | •         | •              | •                 |
| ATTRUBY – acoramidis hcl tab pack 356<br>mg (712 mg twice daily)                | •         | •              | •                 |
| <b>bosentan tab for oral susp 32 mg</b><br>(Tracleer)                           | •         | •              | •                 |
| <b>bosentan tab 62.5 mg, 125 mg (Tracleer)</b>                                  | •         | •              | •                 |
| <b>clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg</b><br>(Catapres)                   |           |                |                   |
| <b>clonidine td patch weekly 0.1 mg/24hr</b><br>(Catapres-tts-1)                |           |                |                   |
| <b>clonidine td patch weekly 0.2 mg/24hr</b><br>(Catapres-tts-2)                |           |                |                   |
| <b>clonidine td patch weekly 0.3 mg/24hr</b><br>(Catapres-tts-3)                |           |                |                   |
| CORLANOR – ivabradine hcl oral soln 5<br>mg/5ml (base equiv)                    |           | •              | •                 |
| <b>digoxin oral soln 0.05 mg/ml (Digoxin)</b>                                   |           |                |                   |
| <b>digoxin tab 125 mcg (0.125 mg), 250 mcg</b><br>(0.25 mg) (Lanoxin)           |           |                |                   |
| <b>doxazosin mesylate tab 1 mg, 2 mg,<br/>4 mg, 8 mg (Cardura)</b>              |           |                |                   |
| <b>eplerenone tab 25 mg, 50 mg (Inspra)</b>                                     |           |                |                   |
| <b>guanfacine hcl tab 1 mg, 2 mg (Tenex)</b>                                    |           |                |                   |
| <b>hydralazine hcl tab 10 mg, 25 mg, 50 mg,<br/>100 mg</b>                      |           |                |                   |
| <b>ivabradine hcl tab 5 mg (base equiv),<br/>7.5 mg (base equiv) (Corlanor)</b> |           | •              | •                 |
| <b>macitentan tab 10 mg (Opsumit)</b>                                           | •         | •              | •                 |

| Drug Name                                                                                                                        | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| METHYLDOPA – methyldopa tab 500 mg                                                                                               |           |                |                   |
| <b>methyldopa tab 250 mg</b>                                                                                                     |           |                |                   |
| <b>midodrine hcl tab 2.5 mg, 5 mg, 10 mg</b>                                                                                     |           |                |                   |
| <b>minoxidil tab 2.5 mg, 10 mg</b>                                                                                               |           |                |                   |
| <b>phenoxybenzamine hcl cap 10 mg</b><br>(Dibenzylamine)                                                                         |           |                |                   |
| <b>prazosin hcl cap 1 mg, 2 mg, 5 mg</b><br>(Minipress)                                                                          |           |                |                   |
| <b>sildenafil citrate tab 20 mg (Revatio)</b>                                                                                    | •         | •              | •                 |
| <b>tadalafil tab 20 mg (pah) (Adcirca)</b>                                                                                       | •         | •              | •                 |
| <b>terazosin hcl cap 1 mg (base equivalent),<br/>2 mg (base equivalent), 5 mg (base<br/>equivalent), 10 mg (base equivalent)</b> |           |                |                   |
| UPTRAVI – selexipag tab 100 mcg, 150<br>mcg, 200 mcg, 400 mcg, 600 mcg, 800<br>mcg, 1000 mcg, 1200 mcg, 1400 mcg,<br>1600 mcg    | •         | •              | •                 |
| UPTRAVI TITRATION PACK – selexipag<br>tab therapy pack 200 mcg (140) & 800<br>mcg (60)                                           | •         | •              | •                 |
| VYNDAMAX – tafamidis cap 61 mg                                                                                                   | •         | •              | •                 |
| <b>BEE STING KITS</b>                                                                                                            |           |                |                   |
| AUVI-Q – epinephrine solution auto-injector<br>0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000),<br>0.3 mg/0.3ml (1:1000)                   |           |                |                   |
| <b>epinephrine solution auto-injector<br/>0.15 mg/0.3ml (1:2000) (Epipen-jr 2-pak)</b>                                           |           |                |                   |
| <b>epinephrine solution auto-injector<br/>0.3 mg/0.3ml (1:1000) (Epipen 2-pak)</b>                                               |           |                |                   |
| <b>RESPIRATORY AGENTS</b>                                                                                                        |           |                |                   |
| <b>ANTI-HISTAMINES</b>                                                                                                           |           |                |                   |
| <b>cyproheptadine hcl syrup 2 mg/5ml</b>                                                                                         |           |                |                   |
| <b>cyproheptadine hcl tab 4 mg</b>                                                                                               |           |                |                   |
| <b>promethazine hcl oral soln 6.25 mg/5ml</b>                                                                                    |           |                |                   |
| <b>promethazine hcl suppos 12.5 mg, 25 mg</b>                                                                                    |           |                |                   |
| <b>promethazine hcl tab 12.5 mg, 25 mg,<br/>50 mg</b>                                                                            |           |                |                   |
| PROMETHEGAN – promethazine hcl<br>suppos 50 mg                                                                                   |           |                |                   |

| Drug Name                                                                                                                  | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>NASAL PRODUCTS</b>                                                                                                      |           |                |                   |
| <b>azelastine hcl nasal spray 0.1% (137 mcg/spray)</b>                                                                     |           |                |                   |
| <b>flunisolide nasal soln 25 mcg/act (0.025%)</b>                                                                          |           |                |                   |
| <b>fluticasone propionate nasal susp 50 mcg/act (Flonase)</b>                                                              |           |                |                   |
| <b>ipratropium bromide nasal soln 0.03% (21 mcg/spray), 0.06% (42 mcg/spray) (Atrovent)</b>                                |           |                |                   |
| <b>COUGH/COLD/ALLERGY</b>                                                                                                  |           |                |                   |
| <b>acetylcysteine inhal soln 10%, 20%</b>                                                                                  |           |                |                   |
| <b>HYPERSAL – sodium chloride soln nebu 7%</b>                                                                             |           |                |                   |
| <b>NEBUSAL – sodium chloride soln nebu 3%</b>                                                                              |           |                |                   |
| <b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>                                                                        |           |                |                   |
| <b>PULMOSAL – sodium chloride soln nebu 7%</b>                                                                             |           |                |                   |
| <b>SODIUM CHLORIDE – sodium chloride soln nebu 3%, 7%</b>                                                                  |           |                |                   |
| <b>ASTHMA/COPD</b>                                                                                                         |           |                |                   |
| <b>ADVAIR HFA – fluticasone-salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/act, 230-21 mcg/act</b>                     |           |                | •                 |
| <b>AIRSUPRA – albuterol-budesonide inhalation aerosol 90-80 mcg/act</b>                                                    |           |                | •                 |
| <b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) (Proair hfa)</b>                                            |           |                | •                 |
| <b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.5% (5 mg/ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b> |           |                |                   |
| <b>albuterol sulfate syrup 2 mg/5ml</b>                                                                                    |           |                |                   |
| <b>albuterol sulfate tab 2 mg, 4 mg</b>                                                                                    |           |                |                   |
| <b>ANORO ELLIPTA – umeclidinium-vilanterol aero powd ba 62.5-25 mcg/act</b>                                                |           |                | •                 |
| <b>ARNUIITY ELLIPTA – fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act</b>             |           |                | •                 |

| Drug Name                                                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>ASMANEX HFA – mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act</b>                           |           |                | •                 |
| <b>ASMANEX TWISTHALER 120 ME – mometasone furoate inhal powd 220 mcg/act (breath activated)</b>                                 |           |                | •                 |
| <b>ASMANEX TWISTHALER 30 MET – mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/act (breath activated)</b> |           |                | •                 |
| <b>ASMANEX TWISTHALER 60 MET – mometasone furoate inhal powd 220 mcg/act (breath activated)</b>                                 |           |                | •                 |
| <b>ATROVENT HFA – ipratropium bromide hfa inhal aerosol 17 mcg/act</b>                                                          |           |                | •                 |
| <b>BREO ELLIPTA – fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act</b>                 |           |                | •                 |
| <b>BREZTRI AEROSPHERE – budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act</b>                                         |           |                | •                 |
| <b>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort)</b>                                                 |           |                |                   |
| <b>budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort)</b>                                 |           |                | •                 |
| <b>COMBIVENT RESPIMAT – ipratropium-albuterol inhal aerosol soln 20-100 mcg/act</b>                                             |           |                | •                 |
| <b>cromolyn sodium soln nebu 20 mg/2ml</b>                                                                                      |           |                |                   |
| <b>DULERA – mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act</b>                       |           |                | •                 |
| <b>FASENRA PEN – benralizumab subcutaneous soln auto-injector 30 mg/ml</b>                                                      | •         | •              | •                 |
| <b>FLUTICASONE PROPIONATE/SA – fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act</b>           |           |                | •                 |
| <b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act (Advair diskus)</b>                      |           |                | •                 |

| Drug Name                                                                                                                | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| INCRUSE ELLIPTA – umeclidinium br aero powd breath act 62.5 mcg/act (base eq)                                            |           |                | •                 |
| <b>ipratropium bromide hfa inhal aerosol 17 mcg/act</b> (Atrovent hfa)                                                   |           |                | •                 |
| <b>ipratropium bromide inhal soln 0.02%</b>                                                                              |           |                |                   |
| <b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</b> (Duoneb)                                                        |           |                |                   |
| <b>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</b>                                                        |           |                |                   |
| <b>levalbuterol hcl soln nebu 0.31 mg/3ml (base equiv), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b> (Xopenex) |           |                |                   |
| <b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)</b> (Singulair)                                      |           |                |                   |
| <b>montelukast sodium oral granules packet 4 mg (base equiv)</b> (Singulair)                                             |           |                |                   |
| <b>montelukast sodium tab 10 mg (base equiv)</b> (Singulair)                                                             |           |                |                   |
| NUCALA – mepolizumab subcutaneous solution auto-injector 100 mg/ml                                                       | •         | •              | •                 |
| NUCALA – mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml                                           | •         | •              | •                 |
| PROAIR RESPICLICK – albuterol sulfate aer pow ba 108 mcg/act (90 mcg base equiv)                                         |           |                | •                 |
| QVAR REDHALER – beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act                                      |           |                | •                 |
| SEREVENT DISKUS – salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)                                                |           |                | •                 |
| SPIRIVA RESPIMAT – tiotropium bromide inhal aerosol 1.25 mcg/act, 2.5 mcg/act                                            |           |                | •                 |
| STIOLTO RESPIMAT – tiotropium br-olodaterol inhal aero soln 2.5-2.5 mcg/act                                              |           |                | •                 |
| SYMBICORT – budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act                                 |           |                | •                 |
| <b>terbutaline sulfate tab 2.5 mg, 5 mg</b>                                                                              |           |                |                   |

| Drug Name                                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| TEZSPIRE – tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml                                | •         | •              | •                 |
| <b>theophylline tab er 12hr 300 mg, 450 mg</b>                                                      |           |                |                   |
| <b>theophylline tab er 24hr 400 mg, 600 mg</b>                                                      |           |                |                   |
| TRELEGY ELLIPTA – fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act |           |                | •                 |
| VENTOLIN HFA – albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv)                          |           |                | •                 |
| XOLAIR – omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml              | •         | •              |                   |
| XOLAIR – omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml          | •         | •              |                   |
| <b>zafirlukast tab 10 mg, 20 mg</b> (Accolate)                                                      |           |                |                   |
| <b>OTHER RESPIRATORY DRUGS</b>                                                                      |           |                |                   |
| ALYFTREK – vanzacaftor-tezacaftor-deutivacaftor tab 4-20-50 mg, 10-50-125 mg                        | •         | •              | •                 |
| KALYDECO – ivacaftor tab 150 mg                                                                     | •         | •              | •                 |
| KALYDECO – ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg                                    | •         | •              | •                 |
| <b>nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)</b> (Ofev)             | •         | •              | •                 |
| <b>pirfenidone cap 267 mg</b> (Esbriet)                                                             | •         | •              | •                 |
| <b>pirfenidone tab 267 mg, 801 mg</b> (Esbriet)                                                     | •         | •              | •                 |
| PULMOZYME – dornase alfa inhal soln 2.5 mg/2.5ml                                                    | •         |                |                   |
| SYMDEKO – tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk                                  | •         | •              | •                 |
| SYMDEKO – tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk                               | •         | •              | •                 |
| TRIKAFTA – elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran                             | •         | •              | •                 |
| TRIKAFTA – elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran                              | •         | •              | •                 |

| Drug Name                                                                                                | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| TRIKAFTA – elexacaf-tezacaf-ivacaf<br>50-25-37.5 mg & ivacaftor 75 mg tbpk                               | •         | •              | •                 |
| TRIKAFTA – elexacaf-tezacaf-ivacaf<br>100-50-75 mg & ivacaftor 150 mg tbpk                               | •         | •              | •                 |
| <b>GASTROINTESTINAL DRUGS</b>                                                                            |           |                |                   |
| <b>LAXATIVES</b>                                                                                         |           |                |                   |
| GAVILYTE-C – peg 3350-kcl-na bicarb-nacl-<br>na sulfate for soln 240 gm                                  |           |                |                   |
| <b>lactulose solution 10 gm/15ml</b>                                                                     |           |                |                   |
| <b>peg 3350-kcl-na bicarb-nacl-na sulfate<br/>for soln 236 gm</b> (Golytely)                             |           |                |                   |
| <b>peg 3350-kcl-sod bicarb-nacl for soln<br/>420 gm</b> (Nulytely/flavor pack)                           |           |                |                   |
| <b>ULCER/GERD</b>                                                                                        |           |                |                   |
| <b>cimetidine hcl soln 300 mg/5ml</b>                                                                    |           |                |                   |
| <b>cimetidine tab 300 mg, 400 mg, 800 mg</b>                                                             |           |                |                   |
| <b>dicyclomine hcl cap 10 mg</b> (Bentyl)                                                                |           |                |                   |
| <b>dicyclomine hcl oral soln 10 mg/5ml</b>                                                               |           |                |                   |
| <b>dicyclomine hcl tab 20 mg</b> (Bentyl)                                                                |           |                |                   |
| <b>esomeprazole magnesium cap delayed<br/>release 20 mg (base eq), 40 mg (base<br/>eq)</b> (Nexium)      |           |                | •                 |
| <b>esomeprazole magnesium for delayed<br/>release susp packet 5 mg, 10 mg,<br/>20 mg, 40 mg</b> (Nexium) |           |                | •                 |
| <b>esomeprazole magnesium for delayed<br/>release susp pack 2.5 mg</b> (Nexium)                          |           |                | •                 |
| <b>famotidine for susp 40 mg/5ml</b>                                                                     |           |                |                   |
| <b>famotidine tab 40 mg</b> (Pepcid)                                                                     |           |                |                   |
| <b>glycopyrrolate tab 1 mg</b> (Robinul)                                                                 |           |                |                   |
| <b>glycopyrrolate tab 2 mg</b> (Robinul forte)                                                           |           |                |                   |
| <b>lansoprazole cap delayed release 15 mg,<br/>30 mg</b> (Prevacid)                                      |           |                | •                 |
| LANSOPRAZOLE/AMOXICILLIN/ –<br>amoxicil cap & clarithro tab & lansopraz<br>cap dr 500 & 500 & 30mg       |           |                |                   |
| <b>misoprostol tab 100 mcg, 200 mcg</b><br>(Cytotec)                                                     |           |                |                   |

| Drug Name                                                                                                                                                                                                                                                               | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>omeprazole cap delayed release 10 mg,<br/>20 mg, 40 mg</b> (Prilosec)                                                                                                                                                                                                |           |                | •                 |
| <b>pantoprazole sodium ec tab 20 mg (base<br/>equiv), 40 mg (base equiv)</b> (Protonix)                                                                                                                                                                                 |           |                | •                 |
| <b>rabeprazole sodium ec tab 20 mg</b><br>(Aciphex)                                                                                                                                                                                                                     |           |                | •                 |
| <b>sucalfate tab 1 gm</b> (Carafate)                                                                                                                                                                                                                                    |           |                |                   |
| <b>NAUSEA AND VOMITING</b>                                                                                                                                                                                                                                              |           |                |                   |
| <b>aprepitant capsule therapy pack 80 &amp;<br/>125 mg</b> (Emend tripack)                                                                                                                                                                                              |           |                |                   |
| <b>aprepitant capsule 40 mg, 80 mg, 125 mg</b><br>(Emend)                                                                                                                                                                                                               |           |                |                   |
| EMEND – aprepitant for oral susp 125 mg<br>(125 mg/5ml)                                                                                                                                                                                                                 |           |                |                   |
| ONDANSETRON HCL – ondansetron hcl<br>tab 24 mg                                                                                                                                                                                                                          |           |                |                   |
| <b>ondansetron hcl oral soln 4 mg/5ml</b><br>(Zofran)                                                                                                                                                                                                                   |           |                |                   |
| <b>ondansetron hcl tab 4 mg, 8 mg</b> (Zofran)                                                                                                                                                                                                                          |           |                |                   |
| <b>ondansetron orally disintegrating tab<br/>4 mg, 8 mg</b> (Zofran odt)                                                                                                                                                                                                |           |                |                   |
| <b>trimethobenzamide hcl cap 300 mg</b><br>(Tigan)                                                                                                                                                                                                                      |           |                |                   |
| <b>DIGESTIVE ENZYMES</b>                                                                                                                                                                                                                                                |           |                |                   |
| CREON – pancrelipase (lip-prot-<br>amyl) dr cap 3000-9500-15000<br>unit, 6000-19000-30000 unit,<br>12000-38000-60000 unit,<br>24000-76000-120000 unit,<br>36000-114000-180000 unit                                                                                      |           |                |                   |
| ZENPEP – pancrelipase (lip-prot-<br>amyl) dr cap 3000-10000-14000<br>unit, 5000-17000-24000 unit,<br>10000-32000-42000 unit,<br>15000-47000-63000 unit,<br>20000-63000-84000 unit,<br>25000-79000-105000 unit,<br>40000-126000-168000 unit,<br>60000-189600-252600 unit |           |                |                   |
| <b>OTHER GASTROINTESTINAL DRUGS</b>                                                                                                                                                                                                                                     |           |                |                   |

| Drug Name                                                                              | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv)</b> (Lotronex)             |           |                |                   |
| <b>balsalazide disodium cap 750 mg</b> (Colazal)                                       |           |                |                   |
| <b>calcium acetate (phosphate binder) cap 667 mg (169 mg ca)</b> (Phoslo)              |           |                |                   |
| <b>calcium acetate (phosphate binder) tab 667 mg</b> (Eliphos)                         |           |                |                   |
| CTEXLI – chenodiol (basds) tab 250 mg                                                  | •         | •              | •                 |
| ENTYVIO PEN – vedolizumab soln auto-injector 108 mg/0.68ml                             | •         | •              | •                 |
| IQIRVO – elafibranor tab 80 mg                                                         | •         | •              | •                 |
| <b>lactulose (encephalopathy) solution 10 gm/15ml</b>                                  |           |                |                   |
| LIVDELZI – seladelpar lysine cap 10 mg                                                 | •         | •              | •                 |
| <b>lubiprostone cap 8 mcg, 24 mcg</b> (Amitiza)                                        |           |                |                   |
| <b>mesalamine cap er 24hr 0.375 gm</b> (Apriso)                                        |           |                |                   |
| MESALAMINE DR – mesalamine cap dr 400 mg                                               |           |                |                   |
| <b>mesalamine enema 4 gm</b>                                                           |           |                |                   |
| <b>mesalamine suppos 1000 mg</b> (Canasa)                                              |           |                |                   |
| <b>mesalamine tab delayed release 800 mg</b>                                           |           |                |                   |
| <b>mesalamine tab delayed release 1.2 gm</b> (Lialda)                                  |           |                |                   |
| <b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>                      |           |                |                   |
| <b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)</b> (Reglan) |           |                |                   |
| OMVOH – mirikizumab-mrkz subcutaneous soln auto-injector 200 mg/2ml                    | •         | •              | •                 |
| OMVOH – mirikizumab-mrkz subcutaneous auto-inj 100 mg/ml & 200mg/2ml                   | •         | •              | •                 |
| OMVOH – mirikizumab-mrkz subcutaneous sol prefill syringe 200 mg/2ml                   | •         | •              | •                 |
| OMVOH – mirikizumab-mrkz subcutaneous pref syr 100 mg/ml & 200mg/2ml                   | •         | •              | •                 |

| Drug Name                                                                          | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| RELISTOR – methylnaltrexone bromide soln pref syr 8 mg/0.4ml, 12 mg/0.6ml          |           |                |                   |
| RELISTOR – methylnaltrexone bromide inj 12 mg/0.6ml (20 mg/ml)                     |           |                |                   |
| <b>sevelamer carbonate packet 0.8 gm, 2.4 gm</b> (Renvela)                         |           |                |                   |
| <b>sevelamer carbonate tab 800 mg</b> (Renvela)                                    |           |                |                   |
| SKYRIZI – risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml | •         | •              | •                 |
| <b>sulfasalazine tab delayed release 500 mg</b> (Azulfidine en-tabs)               |           |                |                   |
| <b>sulfasalazine tab 500 mg</b> (Azulfidine)                                       |           |                |                   |
| TREMFYA – guselkumab soln prefilled syringe 200 mg/2ml                             | •         | •              | •                 |
| TREMFYA – guselkumab soln auto-injector 200 mg/2ml                                 | •         | •              | •                 |
| TREMFYA INDUCTION PACK FO – guselkumab soln auto-injector 200 mg/2ml               | •         | •              | •                 |
| <b>ursodiol cap 300 mg</b> (Actigall)                                              |           |                |                   |
| <b>ursodiol tab 250 mg</b> (Urso 250)                                              |           |                |                   |
| <b>ursodiol tab 500 mg</b> (Urso forte)                                            |           |                |                   |
| VIBERZI – eluxadoline tab 75 mg, 100 mg                                            |           |                |                   |
| <b>GENITOURINARY DRUGS</b>                                                         |           |                |                   |
| <b>URINARY TRACT SPASMS</b>                                                        |           |                |                   |
| <b>mirabegron granules for oral extended release susp 8 mg/ml</b> (Myrbetriq)      |           |                |                   |
| <b>mirabegron tab er 24 hr 25 mg, 50 mg</b> (Myrbetriq)                            |           |                |                   |
| MYRBETRIQ – mirabegron granules for oral extended release susp 8 mg/ml             |           |                |                   |
| MYRBETRIQ – mirabegron tab er 24 hr 25 mg, 50 mg                                   |           |                |                   |
| <b>oxybutynin chloride solution 5 mg/5ml</b>                                       |           |                |                   |
| <b>oxybutynin chloride tab er 24hr 5 mg, 10 mg, 15 mg</b> (Ditropan xl)            |           |                |                   |
| <b>oxybutynin chloride tab 5 mg</b>                                                |           |                |                   |

| Drug Name                                                                    | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>solifenacin succinate tab 5 mg, 10 mg</b><br>(Vesicare)                   |           |                |                   |
| <b>tolterodine tartrate cap er 24hr 2 mg, 4 mg</b> (Detrol la)               |           |                |                   |
| <b>tolterodine tartrate tab 1 mg, 2 mg</b><br>(Detrol)                       |           |                |                   |
| <b>VAGINAL PRODUCTS</b>                                                      |           |                |                   |
| <b>clindamycin phosphate vaginal cream 2%</b> (Cleocin)                      |           |                |                   |
| <b>estradiol vaginal tab 10 mcg</b> (Vagifem)                                |           |                |                   |
| <b>metronidazole vaginal gel 0.75%</b><br>(Metrogel-vaginal)                 |           |                |                   |
| PREMARIN – estrogens, conjugated<br>vaginal cream 0.625 mg/gm                |           |                |                   |
| <b>terconazole vaginal cream 0.4%</b> (Terazol 7)                            |           |                |                   |
| <b>terconazole vaginal cream 0.8%</b>                                        |           |                |                   |
| <b>terconazole vaginal suppos 80 mg</b>                                      |           |                |                   |
| VANDAZOLE – metronidazole vaginal gel<br>0.75%                               |           |                |                   |
| <b>OTHER GENITOURINARY DRUGS</b>                                             |           |                |                   |
| <b>alfuzosin hcl tab er 24hr 10 mg</b> (Uroxatral)                           |           |                |                   |
| CYSTAGON – cysteamine bitartrate cap 50 mg, 150 mg                           | •         |                |                   |
| <b>finasteride tab 5 mg</b> (Proscar)                                        |           |                |                   |
| <b>potassium citrate tab er 5 meq (540 mg)</b><br>(Urocit-k 5)               |           |                |                   |
| <b>potassium citrate tab er 10 meq (1080 mg)</b> (Urocit-k 10)               |           |                |                   |
| <b>potassium citrate tab er 15 meq (1620 mg)</b> (Urocit-k 15)               |           |                |                   |
| <b>silodosin cap 4 mg, 8 mg</b> (Rapaflo)                                    |           |                |                   |
| SODIUM CITRATE AND CITRIC – sodium citrate & citric acid soln 500-334 mg/5ml |           |                |                   |
| SODIUM CITRATE/CITRIC ACI – sodium citrate & citric acid soln 500-334 mg/5ml |           |                |                   |
| <b>tamsulosin hcl cap 0.4 mg</b> (Flomax)                                    |           |                |                   |
| <b>CENTRAL NERVOUS SYSTEM DRUGS</b>                                          |           |                |                   |

| Drug Name                                                                                              | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>ANXIETY</b>                                                                                         |           |                |                   |
| ALPRAZOLAM INTENSOL – alprazolam<br>conc 1 mg/ml                                                       |           |                |                   |
| <b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg</b> (Xanax xr)                                      |           |                |                   |
| <b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg</b> (Xanax)                                              |           |                |                   |
| <b>buspirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg</b>                                             |           |                |                   |
| <b>clorazepate dipotassium tab 3.75 mg, 7.5 mg, 15 mg</b> (Tranxene t)                                 |           |                |                   |
| <b>diazepam conc 5 mg/ml</b>                                                                           |           |                |                   |
| <b>diazepam oral soln 1 mg/ml</b>                                                                      |           |                |                   |
| <b>diazepam tab 2 mg, 5 mg, 10 mg</b> (Valium)                                                         |           |                |                   |
| <b>hydroxyzine hcl syrup 10 mg/5ml</b>                                                                 |           |                |                   |
| <b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg</b>                                                         |           |                |                   |
| HYDROXYZINE PAMOATE – hydroxyzine pamoate cap 100 mg                                                   |           |                |                   |
| <b>hydroxyzine pamoate cap 25 mg, 50 mg</b><br>(Vistaril)                                              |           |                |                   |
| <b>lorazepam conc 2 mg/ml</b> (Lorazepam intensol)                                                     |           |                |                   |
| <b>lorazepam tab 0.5 mg, 1 mg, 2 mg</b><br>(Ativan)                                                    |           |                |                   |
| <b>DEPRESSION</b>                                                                                      |           |                |                   |
| <b>amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b>                                |           |                |                   |
| <b>bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg</b> (Wellbutrin sr)                                |           |                |                   |
| <b>bupropion hcl tab er 24hr 150 mg, 300 mg</b> (Wellbutrin xl)                                        |           |                |                   |
| <b>bupropion hcl tab 75 mg, 100 mg</b><br>(Wellbutrin)                                                 |           |                |                   |
| <b>citalopram hydrobromide oral soln 10 mg/5ml</b>                                                     |           |                |                   |
| <b>citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv)</b> (Celexa) |           |                |                   |

| Drug Name                                                                                                         | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>clomipramine hcl cap 25 mg, 50 mg, 75 mg</b> (Anafranil)                                                       |           |                |                   |
| <b>desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg</b> (Norpramin)                                 |           |                |                   |
| <b>desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)</b> (Pristiq) |           |                |                   |
| <b>DOXEPIN HCL</b> – doxepin hcl conc 10 mg/ml                                                                    |           |                |                   |
| <b>doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg</b>                                                         |           |                |                   |
| <b>DOXEPIN HYDROCHLORIDE</b> – doxepin hcl cap 150 mg                                                             |           |                |                   |
| <b>duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq)</b> (Cymbalta)     |           |                |                   |
| <b>escitalopram oxalate soln 5 mg/5ml (base equiv)</b> (Lexapro)                                                  |           |                |                   |
| <b>escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)</b> (Lexapro)               |           |                |                   |
| <b>fluoxetine hcl cap 10 mg, 20 mg, 40 mg</b> (Prozac)                                                            |           |                |                   |
| <b>fluoxetine hcl solution 20 mg/5ml</b>                                                                          |           |                |                   |
| <b>fluoxetine hcl tab 10 mg, 20 mg</b>                                                                            |           |                |                   |
| <b>fluvoxamine maleate tab 25 mg, 50 mg, 100 mg</b>                                                               |           |                |                   |
| <b>imipramine hcl tab 10 mg, 25 mg, 50 mg</b> (Tofranil)                                                          |           |                |                   |
| <b>mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg</b> (Remeron soltab)                                 |           |                |                   |
| <b>mirtazapine tab 7.5 mg</b>                                                                                     |           |                |                   |
| <b>mirtazapine tab 15 mg, 30 mg, 45 mg</b> (Remeron)                                                              |           |                |                   |
| <b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg</b> (Pamelor)                                                 |           |                |                   |
| <b>nortriptyline hcl soln 10 mg/5ml</b>                                                                           |           |                |                   |
| <b>paroxetine hcl tab er 24hr 12.5 mg, 25 mg, 37.5 mg</b> (Paxil cr)                                              |           |                |                   |

| Drug Name                                                                                                                                                 | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg</b> (Paxil)                                                                                              |           |                |                   |
| <b>PHENELZINE SULFATE</b> – phenelzine sulfate tab 15 mg                                                                                                  |           |                |                   |
| <b>sertraline hcl oral concentrate for solution 20 mg/ml</b> (Zoloft)                                                                                     |           |                |                   |
| <b>sertraline hcl tab 25 mg, 50 mg, 100 mg</b> (Zoloft)                                                                                                   |           |                |                   |
| <b>tranylcypromine sulfate tab 10 mg</b> (Parnate)                                                                                                        |           |                |                   |
| <b>trazodone hcl tab 50 mg, 100 mg, 150 mg</b>                                                                                                            |           |                |                   |
| <b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent)</b> (Effexor xr)                              |           |                |                   |
| <b>venlafaxine hcl tab 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent), 75 mg (base equivalent), 100 mg (base equivalent)</b> |           |                |                   |
| <b>ZURZUVAE</b> – zuranolone cap 20 mg, 25 mg, 30 mg                                                                                                      |           |                |                   |
| <b>PSYCHOTIC AND BIPOLAR DISORDERS</b>                                                                                                                    |           |                |                   |
| <b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg</b> (Abilify)                                                                                  |           |                | •                 |
| <b>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</b>                                                                                         |           |                |                   |
| <b>clozapine tab 25 mg, 100 mg</b> (Clozaril)                                                                                                             |           |                | •                 |
| <b>clozapine tab 50 mg, 200 mg</b>                                                                                                                        |           |                | •                 |
| <b>FLUPHENAZINE HCL</b> – fluphenazine hcl oral conc 5 mg/ml                                                                                              |           |                |                   |
| <b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b>                                                                                                     |           |                |                   |
| <b>FLUPHENAZINE HYDROCHLORID</b> – fluphenazine hcl elixir 2.5 mg/5ml                                                                                     |           |                |                   |
| <b>haloperidol lactate oral conc 2 mg/ml</b>                                                                                                              |           |                |                   |
| <b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</b>                                                                                             |           |                |                   |
| <b>LITHIUM CARBONATE</b> – lithium carbonate cap 150 mg                                                                                                   |           |                |                   |

| Drug Name                                                                                       | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>lithium carbonate cap 150 mg, 600 mg</b><br>(Lithium carbonate)                              |           |                |                   |
| <b>lithium carbonate cap 300 mg</b>                                                             |           |                |                   |
| <b>lithium carbonate tab er 300 mg</b> (Lithobid)                                               |           |                |                   |
| <b>lithium carbonate tab er 450 mg</b>                                                          |           |                |                   |
| <b>lithium carbonate tab 300 mg</b>                                                             |           |                |                   |
| <b>loxapine succinate cap 5 mg</b> (Loxitane)                                                   |           |                |                   |
| <b>loxapine succinate cap 10 mg, 25 mg, 50 mg</b>                                               |           |                |                   |
| <b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg</b> (Latuda)                           |           |                | •                 |
| <b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg</b> (Zyprexa zydis)           |           |                | •                 |
| <b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg</b> (Zyprexa)                       |           |                | •                 |
| <b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</b>                                                 |           |                |                   |
| <b>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</b> (Compazine) |           |                |                   |
| <b>prochlorperazine suppos 25 mg</b>                                                            |           |                |                   |
| <b>quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg</b> (Seroquel xr)      |           |                | •                 |
| <b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg</b> (Seroquel)          |           |                | •                 |
| <b>REXULTI – brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b>                      |           |                | •                 |
| <b>RISPERIDONE ODT – risperidone orally disintegrating tab 0.25 mg</b>                          |           |                | •                 |
| <b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b> (Risperdal m-tab)   |           |                | •                 |
| <b>risperidone soln 1 mg/ml</b> (Risperdal)                                                     |           |                | •                 |
| <b>risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b> (Risperdal)                      |           |                | •                 |
| <b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</b>                                                  |           |                |                   |

| Drug Name                                                                                                                                                                                    | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>                                                               |           |                |                   |
| <b>VRAYLAR – cariprazine hcl cap 0.5 mg (base equivalent), 0.75 mg (base equivalent), 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b> |           |                | •                 |
| <b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg</b> (Geodon)                                                                                                                               |           |                | •                 |
| <b>SLEEP AIDS</b>                                                                                                                                                                            |           |                |                   |
| <b>estazolam tab 1 mg, 2 mg</b>                                                                                                                                                              |           |                |                   |
| <b>eszopiclone tab 1 mg, 2 mg, 3 mg</b> (Lunesta)                                                                                                                                            |           |                | •                 |
| <b>PHENOBARBITAL – phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg</b>                                                                                     |           |                |                   |
| <b>PHENOBARBITAL – phenobarbital elixir 20 mg/5ml</b>                                                                                                                                        |           |                |                   |
| <b>temazepam cap 7.5 mg, 15 mg, 22.5 mg, 30 mg</b> (Restoril)                                                                                                                                |           |                |                   |
| <b>zaleplon cap 5 mg, 10 mg</b> (Sonata)                                                                                                                                                     |           |                | •                 |
| <b>zolpidem tartrate tab er 6.25 mg, 12.5 mg</b> (Ambien cr)                                                                                                                                 |           |                | •                 |
| <b>zolpidem tartrate tab 5 mg, 10 mg</b> (Ambien)                                                                                                                                            |           |                | •                 |
| <b>HYPERACTIVITY/NARCOLEPSY</b>                                                                                                                                                              |           |                |                   |
| <b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg</b> (Adderall xr)                                                                                       |           |                | •                 |
| <b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg</b> (Adderall)                                                                                        |           |                | •                 |
| <b>atomoxetine hcl cap 10 mg (base equiv), 18 mg (base equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv), 100 mg (base equiv)</b> (Strattera)           |           |                | •                 |
| <b>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</b> (Cafcit)                                                                                                                   |           |                |                   |

| Drug Name                                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg</b> (Focalin xr) |           |                | •                 |
| <b>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg</b> (Focalin)                                               |           |                | •                 |
| <b>dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg</b> (Dexedrine)                                   |           |                | •                 |
| <b>dextroamphetamine sulfate tab 5 mg, 10 mg</b>                                                              |           |                | •                 |
| FOUNDAYO – orforglipron calcium (weight management) tab 0.8 mg, 2.5 mg, 5.5 mg, 9 mg, 14.5 mg, 17.2 mg        |           | •              | •                 |
| <b>liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)</b> (Saxenda)                                  |           | •              | •                 |
| <b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg</b> (Vyvanse)              |           |                | •                 |
| <b>lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg</b> (Vyvanse)                |           |                | •                 |
| <b>methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)</b>      |           |                | •                 |
| <b>methylphenidate hcl cap er 24hr 20 mg (la), 30 mg (la), 40 mg (la)</b> (Ritalin la)                        |           |                | •                 |
| <b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg</b> (Concerta)                 |           |                | •                 |
| <b>methylphenidate hcl tab er 10 mg, 20 mg</b>                                                                |           |                | •                 |
| <b>methylphenidate hcl tab 5 mg, 10 mg, 20 mg</b> (Ritalin)                                                   |           |                | •                 |
| METHYLPHENIDATE HYDROCHLO – methylphenidate hcl tab er 24hr 18 mg, 27 mg, 36 mg, 54 mg                        |           |                | •                 |
| <b>modafinil tab 100 mg, 200 mg</b> (Provigil)                                                                |           |                | •                 |
| SUNOSI – solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)                                         |           | •              | •                 |
| WEGOVY – semaglutide (weight management) tab 1.5 mg, 4 mg, 9 mg, 25 mg                                        |           | •              | •                 |

| Drug Name                                                                                                                                                      | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| WEGOVY – semaglutide (weight mngmt) soln auto-injector 0.25 mg/0.5ml, 0.5 mg/0.5ml, 1 mg/0.5ml, 1.7 mg/0.75ml, 2.4 mg/0.75ml                                   |           | •              | •                 |
| WEGOVY HD – semaglutide (weight mngmt) soln auto-injector 7.2 mg/0.75ml                                                                                        |           | •              | •                 |
| ZEPBOUND – tirzepatide (weight mngmt) soln auto-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                       |           | •              | •                 |
| <b>MULTIPLE SCLEROSIS</b>                                                                                                                                      |           |                |                   |
| AVONEX – interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml                                                                                              | •         | •              | •                 |
| AVONEX PEN – interferon beta-1a im auto-injector kit 30 mcg/0.5ml                                                                                              | •         | •              | •                 |
| BETASERON – interferon beta-1b for inj kit 0.3 mg                                                                                                              | •         | •              | •                 |
| <b>cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5 tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs), 10 mg (9 tabs), 10 mg (10 tabs)</b> (Mavenclad) | •         | •              | •                 |
| <b>dimethyl fumarate capsule delayed release 120 mg, 240 mg</b> (Tecfidera)                                                                                    | •         | •              | •                 |
| <b>dimethyl fumarate capsule dr starter pack 120 mg &amp; 240 mg</b> (Tecfidera starter pa)                                                                    | •         | •              | •                 |
| <b>fingolimod hcl cap 0.5 mg (base equiv)</b> (Gilenya)                                                                                                        | •         | •              | •                 |
| <b>glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml</b> (Copaxone)                                                                                 | •         | •              | •                 |
| KESIMPTA – ofatumumab soln auto-injector 20 mg/0.4ml                                                                                                           | •         | •              | •                 |
| MAYZENT – siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)                                                                    | •         | •              | •                 |
| MAYZENT STARTER PACK – siponimod fumarate tab 0.25 mg (7) starter pack                                                                                         | •         | •              | •                 |
| MAYZENT STARTER PACK – siponimod fumarate tab 0.25 mg (12) starter pack                                                                                        | •         | •              | •                 |
| PLEGRIDY – peginterferon beta-1a soln auto-injector 125 mcg/0.5ml                                                                                              | •         | •              | •                 |

| Drug Name                                                                               | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| PLEGRIDY – peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml                   | •         | •              | •                 |
| PLEGRIDY – peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml                    | •         | •              | •                 |
| PLEGRIDY STARTER PACK – peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack      | •         | •              | •                 |
| PLEGRIDY STARTER PACK – peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack      | •         | •              | •                 |
| REBIF – interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml                     | •         | •              | •                 |
| REBIF REBIDOSE – interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml            | •         | •              | •                 |
| REBIF REBIDOSE TITRATION – interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml | •         | •              | •                 |
| REBIF TITRATION PACK – interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml     | •         | •              | •                 |
| <b>teriflunomide tab 7 mg, 14 mg</b> (Aubagio)                                          | •         | •              | •                 |
| VUMERITY – diroximel fumarate capsule delayed release 231 mg                            | •         | •              | •                 |
| ZEPOSIA – ozanimod hcl cap 0.92 mg                                                      | •         | •              | •                 |
| ZEPOSIA STARTER KIT – ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg        | •         | •              | •                 |
| ZEPOSIA 7-DAY STARTER PAC – ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg                 | •         | •              | •                 |
| <b>TOBACCO CESSATION</b>                                                                |           |                |                   |
| <b>bupropion hcl (smoking deterrent) tab er 12hr 150 mg</b> (Zyban)                     |           |                |                   |
| <b>nicotine polacrilex gum 2 mg, 4 mg</b>                                               |           |                |                   |
| <b>nicotine polacrilex lozenge 2 mg, 4 mg</b>                                           |           |                |                   |
| <b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr</b>                         |           |                |                   |
| NICOTINE TRANSDERMAL SYST – nicotine td patch 24 hr kit 21-14-7 mg/24hr                 |           |                |                   |

| Drug Name                                                                                                   | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| NICOTROL NS – nicotine nasal spray 10 mg/ml (0.5 mg/spray)                                                  |           |                |                   |
| <b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)</b>                                      |           |                |                   |
| <b>OTHER CENTRAL NERVOUS SYSTEM DRUGS</b>                                                                   |           |                |                   |
| <b>acamprosate calcium tab delayed release 333 mg</b> (Campral)                                             |           |                |                   |
| <b>disulfiram tab 250 mg, 500 mg</b> (Antabuse)                                                             |           |                |                   |
| <b>donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg</b> (Aricept odt)                          |           |                |                   |
| <b>donepezil hydrochloride tab 5 mg, 10 mg</b> (Aricept)                                                    |           |                |                   |
| <b>galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg</b> (Razadyne er)                                |           |                |                   |
| <b>galantamine hydrobromide tab 4 mg, 8 mg, 12 mg</b> (Razadyne)                                            |           |                |                   |
| INGREZZA – valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)                                     | •         | •              | •                 |
| INGREZZA – valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)              | •         | •              | •                 |
| INGREZZA – valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv) | •         | •              | •                 |
| LEQEMBI IQLIK – lecanemab-irmb soln auto-inj 2 x 250 mg/1.25ml (500 mg dose), 360 mg/1.8ml                  | •         | •              | •                 |
| <b>memantine hcl cap er 24hr 7 mg, 14 mg, 21 mg, 28 mg</b> (Namenda xr)                                     |           |                |                   |
| <b>memantine hcl oral solution 2 mg/ml</b> (Namenda)                                                        |           |                |                   |
| <b>memantine hcl tab 5 mg, 10 mg</b> (Namenda)                                                              |           |                |                   |
| MEMANTINE HCL TITRATION P – memantine hcl tab 28 x 5 mg & 21 x 10 mg titration pack                         |           |                |                   |
| <b>olanzapine-fluoxetine hcl cap 3-25 mg, 6-25 mg, 6-50 mg, 12-25 mg, 12-50 mg</b> (Symbyax)                |           |                |                   |
| <b>pimozide tab 1 mg, 2 mg</b>                                                                              |           |                |                   |

| Drug Name                                                                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b> |           |                |                   |
| <b>tetrabenazine tab 12.5 mg, 25 mg</b><br>(Xenazine)                                                                               | •         | •              | •                 |
| <b>PAIN RELIEF DRUGS</b>                                                                                                            |           |                |                   |
| <b>NON-NARCOTIC DRUGS</b>                                                                                                           |           |                |                   |
| <b>butalbital-acetaminophen-caffeine tab 50-325-40 mg</b>                                                                           |           |                | •                 |
| <b>butalbital-aspirin-caffeine cap 50-325-40 mg</b> (Fiorinal)                                                                      |           |                | •                 |
| <b>NARCOTIC DRUGS</b>                                                                                                               |           |                |                   |
| <b>acetaminophen w/ codeine tab 300-15 mg</b> (Tylenol/codeine)                                                                     |           |                | •                 |
| <b>acetaminophen w/ codeine tab 300-30 mg</b> (Tylenol/codeine #3)                                                                  |           |                | •                 |
| <b>acetaminophen w/ codeine tab 300-60 mg</b> (Tylenol/codeine #4)                                                                  |           |                | •                 |
| <b>ACETAMINOPHEN/CODEINE – acetaminophen w/ codeine soln 120-12 mg/5ml</b>                                                          |           |                | •                 |
| <b>buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)</b>                                                                |           |                |                   |
| <b>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</b> (Fiorinal/codeine #3)                                                 |           |                | •                 |
| <b>codeine sulfate tab 30 mg</b>                                                                                                    |           |                | •                 |
| <b>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</b> (Duragesic)                                    |           | •              | •                 |
| <b>HYDROCODONE BITARTRATE/AC – hydrocodone-acetaminophen tab 2.5-325 mg</b>                                                         |           |                | •                 |
| <b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</b> (Hycet)                                                                       |           |                | •                 |
| <b>hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg</b> (Norco)                                                        |           |                | •                 |
| <b>hydrocodone-acetaminophen tab 5-300 mg</b> (Xodol)                                                                               |           |                | •                 |

| Drug Name                                                                                          | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>hydrocodone-ibuprofen tab 7.5-200 mg</b> (Vicoprofen)                                           |           |                | •                 |
| <b>HYDROCODONE/IBUPROFEN – hydrocodone-ibuprofen tab 5-200 mg, 10-200 mg</b>                       |           |                | •                 |
| <b>hydromorphone hcl liqd 1 mg/ml</b> (Dilaudid)                                                   |           |                | •                 |
| <b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg</b> (Dilaudid)                                           |           |                | •                 |
| <b>methadone hcl conc 10 mg/ml</b> (Methadose)                                                     |           |                | •                 |
| <b>methadone hcl soln 5 mg/5ml, 10 mg/5ml</b> (Methadone hcl)                                      |           |                | •                 |
| <b>methadone hcl tab for oral susp 40 mg</b>                                                       |           |                | •                 |
| <b>methadone hcl tab 5 mg</b> (Dolophine hcl)                                                      |           |                | •                 |
| <b>methadone hcl tab 10 mg</b> (Dolophine)                                                         |           |                | •                 |
| <b>morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml)</b>                                 |           |                | •                 |
| <b>morphine sulfate oral soln 20 mg/5ml</b> (Morphine sulfate)                                     |           |                | •                 |
| <b>morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg</b> (Ms contin)                     |           | •              | •                 |
| <b>morphine sulfate tab 15 mg, 30 mg</b> (Morphine sulfate)                                        |           |                | •                 |
| <b>oxycodone hcl conc 100 mg/5ml (20 mg/ml)</b> (Oxycodone hcl)                                    |           |                | •                 |
| <b>oxycodone hcl soln 5 mg/5ml</b> (Oxycodone hcl)                                                 |           |                | •                 |
| <b>oxycodone hcl tab 5 mg, 15 mg, 30 mg</b> (Roxicodone)                                           |           |                | •                 |
| <b>oxycodone hcl tab 10 mg, 20 mg</b>                                                              |           |                | •                 |
| <b>oxycodone w/ acetaminophen tab 5-325 mg, 7.5-325 mg, 10-325 mg</b> (Percocet)                   |           |                | •                 |
| <b>OXYCONTIN – oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg</b> |           | •              | •                 |
| <b>tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg</b>                                             |           | •              | •                 |
| <b>tramadol hcl tab 50 mg</b> (Ultram)                                                             |           |                | •                 |

| Drug Name                                                                                      | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>tramadol-acetaminophen tab 37.5-325 mg</b> (Ultracet)                                       |           |                | •                 |
| <b>RHEUMATOID AND OSTEOARTHRITIS</b>                                                           |           |                |                   |
| ADALIMUMAB-AATY CD/UC/HS – adalimumab-aaty auto-injector kit 80 mg/0.8ml                       | •         | •              | •                 |
| ADALIMUMAB-AATY 1-PEN KIT – adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml         | •         | •              | •                 |
| ADALIMUMAB-AATY 2-PEN KIT – adalimumab-aaty auto-injector kit 40 mg/0.4ml                      | •         | •              | •                 |
| ADALIMUMAB-AATY 2-SYRINGE – adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml     | •         | •              | •                 |
| ADALIMUMAB-ADAZ – adalimumab-adaz soln auto-injector 40 mg/0.4ml, 80 mg/0.8ml                  | •         | •              | •                 |
| ADALIMUMAB-ADAZ – adalimumab-adaz soln prefilled syringe 10 mg/0.1ml, 20 mg/0.2ml, 40 mg/0.4ml | •         | •              | •                 |
| AVTOZMA – tocilizumab-anoh subcutaneous soln auto-inj 162 mg/0.9ml                             | •         | •              | •                 |
| AVTOZMA – tocilizumab-anoh subcutaneous soln pref syr 162 mg/0.9ml                             | •         | •              | •                 |
| <b>celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg</b> (Celebrex)                                  |           |                |                   |
| <b>diclofenac potassium tab 50 mg</b> (Cataflam)                                               |           |                |                   |
| <b>diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg</b>                               |           |                |                   |
| ENBREL – etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml                  | •         | •              | •                 |
| ENBREL – etanercept subcutaneous inj 25 mg/0.5ml                                               | •         | •              | •                 |
| ENBREL MINI – etanercept subcutaneous solution cartridge 50 mg/ml                              | •         | •              | •                 |
| ENBREL SURECLICK – etanercept subcutaneous solution auto-injector 50 mg/ml                     | •         | •              | •                 |
| <b>etodolac cap 200 mg, 300 mg</b>                                                             |           |                |                   |

| Drug Name                                                                                                                                                                  | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>etodolac tab er 24hr 400 mg, 500 mg, 600 mg</b>                                                                                                                         |           |                |                   |
| <b>etodolac tab 400 mg, 500 mg</b>                                                                                                                                         |           |                |                   |
| HADLIMA – adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml                                                                                                  | •         | •              | •                 |
| HADLIMA PUSHTOUCH – adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml                                                                                            | •         | •              | •                 |
| <b>ibuprofen susp 100 mg/5ml</b>                                                                                                                                           |           |                |                   |
| <b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>                                                                                                                                |           |                |                   |
| <b>indomethacin cap 25 mg, 50 mg</b>                                                                                                                                       |           |                |                   |
| <b>ketorolac tromethamine tab 10 mg</b>                                                                                                                                    |           |                | •                 |
| <b>leflunomide tab 10 mg, 20 mg</b> (Arava)                                                                                                                                |           |                |                   |
| <b>meloxicam tab 7.5 mg, 15 mg</b> (Mobic)                                                                                                                                 |           |                |                   |
| <b>nabumetone tab 500 mg, 750 mg</b>                                                                                                                                       |           |                |                   |
| <b>naproxen sodium tab 275 mg</b> (Anaprox)                                                                                                                                |           |                |                   |
| <b>naproxen sodium tab 550 mg</b> (Anaprox ds)                                                                                                                             |           |                |                   |
| <b>naproxen tab 250 mg, 375 mg, 500 mg</b> (Naprosyn)                                                                                                                      |           |                |                   |
| OTEZLA – apremilast tab 20 mg, 30 mg                                                                                                                                       | •         | •              | •                 |
| OTEZLA – apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg                                                                                 | •         | •              | •                 |
| OTEZLA XR – apremilast tab er 24hr 75 mg                                                                                                                                   | •         | •              | •                 |
| OTEZLA/OTEZLA XR 28 DAY T – apremilast tab start pack 10 mg & 20 mg & 30 mg & (er) 75 mg                                                                                   | •         | •              | •                 |
| <b>oxaprozin tab 600 mg</b> (Daypro)                                                                                                                                       |           |                |                   |
| <b>piroxicam cap 10 mg, 20 mg</b> (Feldene)                                                                                                                                |           |                |                   |
| RASUVO – methotrexate soln pf auto-injector 7.5 mg/0.15ml, 10 mg/0.2ml, 12.5 mg/0.25ml, 15 mg/0.3ml, 17.5 mg/0.35ml, 20 mg/0.4ml, 22.5 mg/0.45ml, 25 mg/0.5ml, 30 mg/0.6ml |           |                |                   |
| RINVOQ – upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg                                                                                                                      | •         | •              | •                 |

| Drug Name                                                                                            | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| RINVOQ LQ – upadacitinib oral soln 1 mg/ml                                                           | •         | •              | •                 |
| SIMLANDI – adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml                            | •         | •              | •                 |
| SIMLANDI 1-PEN KIT – adalimumab-ryvk auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml                      | •         | •              | •                 |
| SIMLANDI 2-PEN KIT – adalimumab-ryvk auto-injector kit 40 mg/0.4ml                                   | •         | •              | •                 |
| SIMPONI – golimumab subcutaneous soln auto-injector 100 mg/ml                                        | •         | •              | •                 |
| SIMPONI – golimumab subcutaneous soln prefilled syringe 100 mg/ml                                    | •         | •              | •                 |
| <b>sulindac tab 150 mg, 200 mg</b>                                                                   |           |                |                   |
| <b>tofacitinib citrate oral soln 1 mg/ml (base equivalent) (Xeljanz)</b>                             | •         | •              | •                 |
| <b>tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent) (Xeljanz xr)</b> | •         | •              | •                 |
| <b>tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent) (Xeljanz)</b>             | •         | •              | •                 |
| TYENNE – tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml                                    | •         | •              | •                 |
| TYENNE – tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml                                    | •         | •              | •                 |
| XELJANZ – tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)                    | •         | •              | •                 |
| XELJANZ – tofacitinib citrate oral soln 1 mg/ml (base equivalent)                                    | •         | •              | •                 |
| XELJANZ XR – tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)        | •         | •              | •                 |
| <b>MIGRAINE HEADACHES</b>                                                                            |           |                |                   |
| AIMOVIG – erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml                          |           | •              | •                 |
| AJOVY – fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml                                    |           | •              | •                 |
| AJOVY – fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml                                    |           | •              | •                 |

| Drug Name                                                                                        | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45)</b>                                        |           |                |                   |
| <b>dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal)</b>                                 |           | •              | •                 |
| EMGALITY – galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml                           |           | •              | •                 |
| EMGALITY – galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml                |           | •              | •                 |
| IMITREX STATDOSE SYSTEM – sumatriptan succinate solution auto-injector 4 mg/0.5ml                |           |                | •                 |
| <b>naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) (Amerge)</b>                       |           |                | •                 |
| NURTEC – rimegepant sulfate tab disint 75 mg                                                     |           | •              | •                 |
| QULIPTA – atogepant tab 10 mg, 30 mg, 60 mg                                                      |           | •              | •                 |
| <b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq), 10 mg (base eq) (Maxalt-mlt)</b> |           |                | •                 |
| <b>rizatriptan benzoate tab 5 mg (base equivalent), 10 mg (base equivalent) (Maxalt)</b>         |           |                | •                 |
| <b>sumatriptan nasal spray 5 mg/act, 20 mg/act (Imitrex)</b>                                     |           |                | •                 |
| <b>sumatriptan succinate inj 6 mg/0.5ml (Imitrex)</b>                                            |           |                | •                 |
| <b>sumatriptan succinate solution auto-injector 6 mg/0.5ml (Imitrex statdose sys)</b>            |           |                | •                 |
| <b>sumatriptan succinate tab 25 mg, 50 mg, 100 mg (Imitrex)</b>                                  |           |                | •                 |
| UBRELVY – ubrogepant tab 50 mg, 100 mg                                                           |           | •              | •                 |
| <b>zolmitriptan tab 2.5 mg, 5 mg (Zomig)</b>                                                     |           |                | •                 |
| <b>GOUT</b>                                                                                      |           |                |                   |
| <b>allopurinol tab 100 mg, 300 mg (Zyloprim)</b>                                                 |           |                |                   |
| <b>colchicine tab 0.6 mg (Colcrys)</b>                                                           |           |                |                   |
| <b>colchicine w/ probenecid tab 0.5-500 mg</b>                                                   |           |                |                   |

| Drug Name                                                                         | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>probenecid tab 500 mg</b>                                                      |           |                |                   |
| <b>NEUROMUSCULAR DRUGS</b>                                                        |           |                |                   |
| <b>SEIZURES</b>                                                                   |           |                |                   |
| <b>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg</b> (Carbatrol)               |           |                |                   |
| <b>carbamazepine chew tab 100 mg</b>                                              |           |                |                   |
| <b>carbamazepine susp 100 mg/5ml</b> (Tegretol)                                   |           |                |                   |
| <b>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg</b> (Tegretol-xr)             |           |                |                   |
| <b>carbamazepine tab 200 mg</b> (Tegretol)                                        |           |                |                   |
| <b>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</b> |           |                |                   |
| <b>clonazepam tab 0.5 mg, 1 mg, 2 mg</b> (Klonopin)                               |           |                |                   |
| <b>diazepam rectal gel delivery system 10 mg, 20 mg</b> (Diastat acudial)         |           |                |                   |
| DILANTIN – phenytoin sodium extended cap 30 mg, 100 mg                            |           |                |                   |
| DILANTIN-125 – phenytoin susp 125 mg/5ml                                          |           |                |                   |
| <b>divalproex sodium cap delayed release sprinkle 125 mg</b> (Depakote sprinkles) |           |                |                   |
| <b>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg</b> (Depakote)    |           |                |                   |
| <b>divalproex sodium tab er 24 hr 250 mg, 500 mg</b> (Depakote er)                |           |                |                   |
| EPIDIOLEX – cannabidiol soln 100 mg/ml                                            | •         | •              | •                 |
| <b>ethosuximide cap 250 mg</b> (Zarontin)                                         |           |                |                   |
| <b>ethosuximide soln 250 mg/5ml</b> (Zarontin)                                    |           |                |                   |
| <b>felbamate susp 600 mg/5ml</b> (Felbatol)                                       |           |                |                   |
| <b>felbamate tab 400 mg, 600 mg</b> (Felbatol)                                    |           |                |                   |
| <b>gabapentin cap 100 mg, 300 mg, 400 mg</b> (Neurontin)                          |           |                |                   |
| <b>gabapentin oral soln 250 mg/5ml</b> (Neurontin)                                |           |                |                   |
| <b>gabapentin tab 600 mg, 800 mg</b> (Neurontin)                                  |           |                |                   |

| Drug Name                                                                                  | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>lamotrigine tab chewable dispersible 5 mg, 25 mg</b> (Lamictal chewable di)             |           |                |                   |
| <b>lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg</b> (Lamictal)                            |           |                |                   |
| <b>levetiracetam oral soln 100 mg/ml</b> (Keppra)                                          |           |                |                   |
| <b>levetiracetam tab er 24hr 500 mg, 750 mg</b> (Keppra xr)                                |           |                |                   |
| <b>levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg</b> (Keppra)                          |           |                |                   |
| <b>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</b> (Trileptal)                                |           |                |                   |
| <b>oxcarbazepine tab er 24hr 150 mg, 300 mg, 600 mg</b> (Oxtellar xr)                      |           |                |                   |
| <b>oxcarbazepine tab 150 mg, 300 mg, 600 mg</b> (Trileptal)                                |           |                |                   |
| <b>phenytoin chew tab 50 mg</b> (Dilantin infatabs)                                        |           |                |                   |
| <b>phenytoin sodium extended cap 100 mg</b> (Dilantin)                                     |           |                |                   |
| <b>phenytoin sodium extended cap 200 mg, 300 mg</b> (Phenytek)                             |           |                |                   |
| <b>phenytoin susp 125 mg/5ml</b> (Dilantin)                                                |           |                |                   |
| <b>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg</b> (Lyrica) |           |                | •                 |
| <b>pregabalin soln 20 mg/ml</b> (Lyrica)                                                   |           |                | •                 |
| <b>primidone tab 50 mg, 250 mg</b> (Mysoline)                                              |           |                |                   |
| <b>rufinamide susp 40 mg/ml</b> (Banzel)                                                   |           |                |                   |
| <b>rufinamide tab 200 mg, 400 mg</b> (Banzel)                                              |           |                |                   |
| <b>topiramate sprinkle cap 15 mg, 25 mg</b> (Topamax sprinkle)                             |           |                |                   |
| <b>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg</b> (Topamax)                               |           |                |                   |
| <b>valproate sodium oral soln 250 mg/5ml (base equiv)</b> (Depakene)                       |           |                |                   |
| <b>valproic acid cap 250 mg</b> (Depakene)                                                 |           |                |                   |
| <b>vigabatrin powd pack 500 mg</b> (Sabril)                                                | •         |                |                   |
| <b>vigabatrin tab 500 mg</b> (Sabril)                                                      | •         |                |                   |

| Drug Name                                                                                         | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>zonisamide cap 25 mg, 100 mg</b><br>(Zonegran)                                                 |           |                |                   |
| <b>zonisamide cap 50 mg</b>                                                                       |           |                |                   |
| <b>PARKINSON'S DISEASE</b>                                                                        |           |                |                   |
| <b>amantadine hcl soln 50 mg/5ml</b>                                                              |           |                |                   |
| <b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>                                                |           |                |                   |
| <b>carbidopa &amp; levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg</b>         |           |                |                   |
| <b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg</b> (Sinemet cr)                          |           |                |                   |
| <b>carbidopa &amp; levodopa tab 10-100 mg, 25-100 mg, 25-250 mg</b> (Sinemet)                     |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</b> (Stalevo 50)                             |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</b> (Stalevo 75)                            |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 25-100-200 mg</b> (Stalevo 100)                             |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</b> (Stalevo 125)                          |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</b> (Stalevo 150)                           |           |                |                   |
| <b>carbidopa-levodopa-entacapone tabs 50-200-200 mg</b> (Stalevo 200)                             |           |                |                   |
| <b>entacapone tab 200 mg</b> (Comtan)                                                             |           |                |                   |
| <b>INBRIJA – levodopa inhal powder cap 42 mg</b>                                                  | •         |                |                   |
| <b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</b> (Mirapex) |           |                |                   |
| <b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b> (Requip)        |           |                |                   |
| <b>selegiline hcl cap 5 mg</b> (Eldepryl)                                                         |           |                |                   |
| <b>selegiline hcl tab 5 mg</b>                                                                    |           |                |                   |
| <b>trihexyphenidyl hcl oral soln 0.4 mg/ml</b>                                                    |           |                |                   |
| <b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>                                                         |           |                |                   |

| Drug Name                                                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>MUSCLE RELAXANTS</b>                                                                                                       |           |                |                   |
| <b>baclofen tab 10 mg, 20 mg</b>                                                                                              |           |                |                   |
| <b>chlorzoxazone tab 500 mg</b>                                                                                               |           |                |                   |
| <b>cyclobenzaprine hcl tab 5 mg, 10 mg</b>                                                                                    |           |                |                   |
| <b>methocarbamol tab 500 mg</b> (Robaxin)                                                                                     |           |                |                   |
| <b>methocarbamol tab 750 mg</b> (Robaxin-750)                                                                                 |           |                |                   |
| <b>orphenadrine citrate tab er 12hr 100 mg</b>                                                                                |           |                |                   |
| <b>OTHER NEUROMUSCULAR DRUGS</b>                                                                                              |           |                |                   |
| <b>pyridostigmine bromide oral soln 60 mg/5ml</b> (Mestinon)                                                                  |           |                |                   |
| <b>pyridostigmine bromide tab er 180 mg</b> (Mestinon timespan)                                                               |           |                |                   |
| <b>pyridostigmine bromide tab 60 mg</b> (Mestinon)                                                                            |           |                |                   |
| <b>riluzole tab 50 mg</b> (Rilutek)                                                                                           | •         |                |                   |
| <b>VITAMINS</b>                                                                                                               |           |                |                   |
| <b>ergocalciferol cap 1.25 mg (50000 unit)</b> (Drisdol)                                                                      |           |                |                   |
| <b>phytonadione inj 1 mg/0.5ml (2 mg/ml), 10 mg/ml</b>                                                                        |           |                |                   |
| <b>phytonadione tab 5 mg</b> (Mephyton)                                                                                       |           |                |                   |
| <b>MULTIVITAMINS</b>                                                                                                          |           |                |                   |
| <b>PRENATAL PLUS – prenatal vit w/ fe fumarate-fa tab 27-1 mg</b>                                                             |           |                |                   |
| <b>PRENATAL 19 – prenatal vit w/ fe fumarate-fa chew tab 29-1 mg</b>                                                          |           |                |                   |
| <b>PRENATAL-U – prenatal w/o a vit w/ fe fumarate-fa cap 106.5-1 mg</b>                                                       |           |                |                   |
| <b>TRINATE – prenatal vit w/ fe fumarate-fa tab 28-1 mg</b>                                                                   |           |                |                   |
| <b>VINATE DHA RF – prenatal w/o a w/fe-fum-methylfol-omegas cap 27-1.13 mg</b>                                                |           |                |                   |
| <b>MINERALS AND ELECTROLYTES</b>                                                                                              |           |                |                   |
| <b>FLUORIDE – 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)</b> |           |                |                   |

| Drug Name                                                                                                                          | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| K-PHOS NEUTRAL – pot phos monobasic w/sod phos di & monobas tab 155-852-130mg                                                      |           |                |                   |
| PHOSPHA 250 NEUTRAL – pot phos monobasic w/sod phos di & monobas tab 155-852-130mg                                                 |           |                |                   |
| PHOSPHO-TRIN 250 NEUTRAL – pot phos monobasic w/sod phos di & monobas tab 155-852-130mg                                            |           |                |                   |
| PHOSPHOROUS – pot phos monobasic w/sod phos di & monobas tab 155-852-130mg                                                         |           |                |                   |
| <b>potassium chloride cap er 8 meq, 10 meq (Micro-k)</b>                                                                           |           |                |                   |
| <b>potassium chloride microencapsulated crys er tab 10 meq, 20 meq</b>                                                             |           |                |                   |
| <b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)</b>                                                           |           |                |                   |
| <b>potassium chloride powder packet 20 meq</b>                                                                                     |           |                |                   |
| <b>potassium chloride tab er 8 meq (600 mg)</b>                                                                                    |           |                |                   |
| <b>potassium chloride tab er 10 meq (K-tab)</b>                                                                                    |           |                |                   |
| SODIUM FLUORIDE – sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)                                         |           |                |                   |
| SODIUM FLUORIDE – 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)      |           |                |                   |
| SODIUM FLUORIDE – sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)                                                            |           |                |                   |
| ZYCUBO – copper histidinate for subcutaneous soln 2.9 mg                                                                           | •         |                | •                 |
| <b>BLOOD MODIFYING DRUGS</b>                                                                                                       |           |                |                   |
| ADVATE – antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit | •         | •              |                   |
| ADYNOVATE – antihemophilic factor recomb pegylated for inj 250 unit, 500                                                           | •         | •              |                   |

| Drug Name                                                                                                                                                              | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit                                                                                                             |           |                |                   |
| AFSTYLA – antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit                                  | •         | •              |                   |
| ALTUVIIIO – antihemophilic fact rcmb fc-vwf-xten-ehtl for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit                                           | •         | •              |                   |
| <b>aminocaproic acid tab 500 mg (Amicar)</b>                                                                                                                           |           |                |                   |
| <b>anagrelide hcl cap 0.5 mg (Agrylin)</b>                                                                                                                             |           |                |                   |
| <b>anagrelide hcl cap 1 mg</b>                                                                                                                                         |           |                |                   |
| ANDEMBRY – garadacimab-gxii soln auto-injector 200 mg/1.2ml                                                                                                            | •         | •              | •                 |
| <b>aspirin-dipyridamole cap er 12hr 25-200 mg (Aggrenox)</b>                                                                                                           |           |                |                   |
| CERDELGA – eliglustat tartrate cap 84 mg (base equivalent)                                                                                                             | •         | •              | •                 |
| <b>cilostazol tab 50 mg, 100 mg (Pletal)</b>                                                                                                                           |           |                |                   |
| <b>clopidogrel bisulfate tab 75 mg (base equiv), 300 mg (base equiv) (Plavix)</b>                                                                                      |           |                |                   |
| <b>cyanocobalamin inj 1000 mcg/ml</b>                                                                                                                                  |           |                |                   |
| DAWNZERA – donidalorsen sodium subcutaneous soln auto-inj 80 mg/0.8ml                                                                                                  | •         | •              | •                 |
| <b>dipyridamole tab 25 mg, 50 mg, 75 mg (Persantine)</b>                                                                                                               |           |                |                   |
| ELIQUIS – apixaban tab 2.5 mg, 5 mg                                                                                                                                    |           |                | •                 |
| ELIQUIS – apixaban tab for oral susp 0.5 mg                                                                                                                            |           |                | •                 |
| ELIQUIS – apixaban tab for oral susp pack 3 x 0.5 mg (1.5 mg), 4 x 0.5 mg (2 mg)                                                                                       |           |                | •                 |
| ELIQUIS – apixaban cap sprinkle 0.15 mg                                                                                                                                |           |                | •                 |
| ELIQUIS STARTER PACK – apixaban tab starter pack 5 mg                                                                                                                  |           |                | •                 |
| ELOCTATE – antihemophilic factor rcmb (bdd-rfviiifc) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit | •         | •              |                   |

| Drug Name                                                                                                                                   | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq) (Promacta)</b>                                            | •         | •              | •                 |
| <b>eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv) (Promacta)</b>                  | •         | •              | •                 |
| EMPAVELI – pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)                                                                          | •         | •              | •                 |
| <b>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)</b> |           |                |                   |
| <b>enoxaparin sodium inj 300 mg/3ml (Lovenox)</b>                                                                                           |           |                |                   |
| ESPEROCT – antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit               | •         | •              |                   |
| FABHALTA – iptacopan hcl cap 200 mg                                                                                                         | •         | •              | •                 |
| FIBRYGA – fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)                                                                      | •         |                |                   |
| FIBRYGA – fibrinogen concentrate (human) for iv soln 2 gm                                                                                   | •         |                |                   |
| <b>folic acid tab 1 mg</b>                                                                                                                  |           |                |                   |
| <b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml (Arixtra)</b>                                   |           |                |                   |
| <b>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml</b>                                                |           |                |                   |
| <b>heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml</b>                                                                        |           |                |                   |
| <b>icatibant acetate subcutaneous soln pref syr 30 mg/3ml (Firazyr)</b>                                                                     | •         | •              | •                 |
| JIVI – antihemophil fact rcmb(bdd-rfviii peg-aucI) for inj 500 unit                                                                         | •         | •              |                   |
| JIVI – antihemophil fact rcmb(bdd-rfviii peg-aucI)for inj 1000 unit, 2000 unit, 3000 unit, 4000 unit                                        | •         | •              |                   |

| Drug Name                                                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| KOGENATE FS – antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit           | •         | •              |                   |
| KOVALTRY – antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit                | •         | •              |                   |
| NOVOEIGHT – antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit | •         | •              |                   |
| <b>pentoxifylline tab er 400 mg</b>                                                                                           |           |                |                   |
| <b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) (Effient)</b>                                                      |           |                |                   |
| PYRUKYND – mitapivat sulfate tab 5 mg, 20 mg, 50 mg                                                                           | •         | •              | •                 |
| 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                    | •         | •              | •                 |
| RIASTAP – fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)                                                        | •         |                |                   |
| <b>rivaroxaban for susp 1 mg/ml (Xarelto)</b>                                                                                 |           |                | •                 |
| <b>rivaroxaban tab 2.5 mg (Xarelto)</b>                                                                                       |           |                | •                 |
| <b>ticagrelor tab 60 mg, 90 mg (Brilinta)</b>                                                                                 |           |                |                   |
| <b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg (Coumadin)</b>                               |           |                |                   |
| XARELTO – rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg                                                                         |           |                | •                 |
| XARELTO – rivaroxaban for susp 1 mg/ml                                                                                        |           |                | •                 |
| XARELTO STARTER PACK – rivaroxaban tab starter therapy pack 15 mg & 20 mg                                                     |           |                | •                 |
| <b>TOPICAL PRODUCTS</b>                                                                                                       |           |                |                   |
| <b>EYE</b>                                                                                                                    |           |                |                   |
| <b>Anti-infectives</b>                                                                                                        |           |                |                   |
| BACITRACIN/POLYMYXIN B – bacitracin-polymyxin b ophth oint                                                                    |           |                |                   |
| CILOXAN – ciprofloxacin hcl ophth oint 0.3%                                                                                   |           |                |                   |
| <b>ciprofloxacin hcl ophth soln 0.3% (base equivalent) (Ciloxan)</b>                                                          |           |                |                   |
| <b>erythromycin ophth oint 5 mg/gm</b>                                                                                        |           |                |                   |

| Drug Name                                                                                      | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>gentamicin sulfate ophth soln 0.3%</b><br>(Garamycin)                                       |           |                |                   |
| <b>moxifloxacin hcl ophth soln 0.5% (base equiv)</b> (Vigamox)                                 |           |                |                   |
| NATACYN – natamycin ophth susp 5%                                                              |           |                |                   |
| NEOMYCIN/POLYMYXIN/BACITR –<br>neomycin-bacitrac zn-polymyx<br>5(3.5)mg-400unt-10000unt op oin |           |                |                   |
| NEOMYCIN/POLYMYXIN/GRAMIC –<br>neomycin-polymy-gramicid op sol<br>1.75-10000-0.025mg-unt-mg/ml |           |                |                   |
| <b>ofloxacin ophth soln 0.3%</b> (Ocuflox)                                                     |           |                |                   |
| <b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</b> (Polytrim)                       |           |                |                   |
| SULFACETAMIDE SODIUM –<br>sulfacetamide sodium ophth soln 10%                                  |           |                |                   |
| <b>tobramycin ophth soln 0.3%</b> (Tobrex)                                                     |           |                |                   |
| TRIFLURIDINE – trifluridine ophth soln 1%                                                      |           |                |                   |
| <b>Steroids and Combination Products</b>                                                       |           |                |                   |
| DEXAMETHASONE SODIUM PHOS –<br>dexamethasone sodium phosphate ophth<br>soln 0.1%               |           |                |                   |
| <b>fluorometholone ophth susp 0.1%</b> (Fml<br>liquifilm)                                      |           |                |                   |
| LOTEMAX – loteprednol etabonate ophth<br>oint 0.5%                                             |           |                |                   |
| LOTEMAX SM – loteprednol etabonate<br>ophth gel 0.38%                                          |           |                |                   |
| <b>loteprednol etabonate ophth gel 0.5%</b><br>(Lotemax)                                       |           |                |                   |
| <b>loteprednol etabonate ophth susp 0.5%</b><br>(Lotemax)                                      |           |                |                   |
| <b>loteprednol etabonate-tobramycin ophth<br/>susp 0.5-0.3%</b> (Zylet)                        |           |                |                   |
| <b>neomycin-polymyxin-dexamethasone<br/>ophth oint 0.1%</b> (Maxitrol)                         |           |                |                   |
| <b>neomycin-polymyxin-dexamethasone<br/>ophth susp 0.1%</b> (Maxitrol)                         |           |                |                   |

| Drug Name                                                                                     | Specialty | Prior Approval | Dispensing Limits |
|-----------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| NEOMYCIN/POLYMYXIN/BACITR –<br>bacitracin-polymyxin-neomycin-hc ophth<br>oint 1%              |           |                |                   |
| <b>prednisolone acetate ophth susp 1%</b><br>(Pred forte)                                     |           |                |                   |
| PREDNISOLONE SODIUM PHOSP –<br>prednisolone sodium phosphate ophth<br>soln 1%                 |           |                |                   |
| SULFACETAMIDE SODIUM/PRED –<br>sulfacetamide sodium-prednisolone ophth<br>soln 10-0.23(0.25)% |           |                |                   |
| TOBRADEX – tobramycin-dexamethasone<br>ophth oint 0.3-0.1%                                    |           |                |                   |
| <b>tobramycin-dexamethasone ophth susp<br/>0.3-0.1%</b> (Tobradex)                            |           |                |                   |
| <b>Glaucoma</b>                                                                               |           |                |                   |
| <b>bimatoprost ophth soln 0.01%</b> (Lumigan)                                                 |           |                | •                 |
| <b>brimonidine tartrate ophth soln 0.1%,<br/>0.15%</b> (Alphagan p)                           |           |                |                   |
| <b>brimonidine tartrate ophth soln 0.2%</b>                                                   |           |                |                   |
| CARTEOLOL HCL – carteolol hcl ophth<br>soln 1%                                                |           |                |                   |
| <b>dorzolamide hcl ophth soln 2%</b> (Trusopt)                                                |           |                |                   |
| <b>dorzolamide hcl-timolol maleate ophth<br/>soln 2-0.5%</b> (Cosopt)                         |           |                |                   |
| <b>latanoprost ophth soln 0.005%</b> (Xalatan)                                                |           |                | •                 |
| LEVOBUNOLOL HCL – levobunolol hcl<br>ophth soln 0.5%                                          |           |                |                   |
| LUMIGAN – bimatoprost ophth soln 0.01%                                                        |           |                | •                 |
| <b>pilocarpine hcl ophth soln 1%, 2%, 4%</b><br>(Isopto carpine)                              |           |                |                   |
| SIMBRINZA – brinzolamide-brimonidine<br>tartrate ophth susp 1-0.2%                            |           |                |                   |
| <b>timolol maleate ophth soln 0.25%, 0.5%</b><br>(Timoptic)                                   |           |                |                   |
| <b>Other Eye Products</b>                                                                     |           |                |                   |
| <b>atropine sulfate ophth soln 1%</b> (Atropine<br>sulfate)                                   |           |                |                   |
| <b>azelastine hcl ophth soln 0.05%</b> (Optivar)                                              |           |                |                   |

| Drug Name                                                         | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------|-----------|----------------|-------------------|
| CROMOLYN SODIUM – cromolyn sodium ophth soln 4%                   |           |                |                   |
| <b>cyclopentolate hcl ophth soln 1%</b><br>(Cyclogyl)             |           |                |                   |
| <b>diclofenac sodium ophth soln 0.1%</b>                          |           |                |                   |
| FLURBIPROFEN SODIUM – flurbiprofen sodium ophth soln 0.03%        |           |                |                   |
| KETOROLAC TROMETHAMINE – ketorolac tromethamine ophth soln 0.4%   |           |                |                   |
| <b>ketorolac tromethamine ophth soln 0.5%</b><br>(Acular)         |           |                |                   |
| <b>EAR</b>                                                        |           |                |                   |
| <b>acetic acid otic soln 2%</b>                                   |           |                |                   |
| <b>ciprofloxacin-dexamethasone otic susp 0.3-0.1%</b> (Ciprodex)  |           |                |                   |
| <b>ciprofloxacin-hydrocortisone otic susp 0.2-1%</b> (Cipro hc)   |           |                |                   |
| <b>hydrocortisone w/ acetic acid otic soln 1-2%</b>               |           |                |                   |
| <b>neomycin-polymyxin-hc otic soln 1%</b><br>(Cortisporin)        |           |                |                   |
| <b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ml-1%</b> |           |                |                   |
| <b>ofloxacin otic soln 0.3%</b>                                   |           |                |                   |
| <b>MOUTH AND THROAT (LOCAL)</b>                                   |           |                |                   |
| <b>chlorhexidine gluconate soln 0.12%</b><br>(Peridex)            |           |                |                   |
| DENTA 5000 PLUS – sodium fluoride cream 1.1%                      |           |                |                   |
| DENTAGEL – sodium fluoride gel 1.1% (0.5% f)                      |           |                |                   |
| <b>lidocaine hcl viscous soln 2%</b>                              |           |                |                   |
| <b>nystatin susp 100000 unit/ml</b>                               |           |                |                   |
| <b>pilocarpine hcl tab 5 mg, 7.5 mg</b><br>(Salagen)              |           |                |                   |
| PREVIDENT FLUORIDE – sodium fluoride gel 1.1% (0.5% f)            |           |                |                   |
| PREVIDENT 5000 DRY MOUTH – sodium fluoride gel 1.1% (0.5% f)      |           |                |                   |

| Drug Name                                                                                | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| PREVIDENT 5000 PLUS – sodium fluoride cream 1.1%                                         |           |                |                   |
| SF – sodium fluoride gel 1.1% (0.5% f)                                                   |           |                |                   |
| SF 5000 PLUS – sodium fluoride cream 1.1%                                                |           |                |                   |
| SODIUM FLUORIDE – sodium fluoride cream 1.1%                                             |           |                |                   |
| SODIUM FLUORIDE – sodium fluoride gel 1.1% (0.5% f)                                      |           |                |                   |
| SODIUM FLUORIDE 5000 PLUS – sodium fluoride cream 1.1%                                   |           |                |                   |
| SODIUM FLUORIDE 5000 PPM – sodium fluoride gel 1.1% (0.5% f)                             |           |                |                   |
| <b>triamcinolone acetonide dental paste 0.1%</b>                                         |           |                |                   |
| <b>ANORECTAL</b>                                                                         |           |                |                   |
| ANUCORT-HC – hydrocortisone acetate suppos 25 mg                                         |           |                |                   |
| ANUSOL-HC – hydrocortisone acetate suppos 25 mg                                          |           |                |                   |
| HEMMOREX-HC – hydrocortisone acetate suppos 25 mg                                        |           |                |                   |
| HYDROCORTISONE ACETATE – hydrocortisone acetate suppos 25 mg                             |           |                |                   |
| <b>hydrocortisone enema 100 mg/60ml</b><br>(Cortenema)                                   |           |                |                   |
| <b>hydrocortisone perianal cream 2.5%</b><br>(Anusol-hc)                                 |           |                |                   |
| <b>SKIN CONDITIONS/PRODUCTS</b>                                                          |           |                |                   |
| <b>Acne</b>                                                                              |           |                |                   |
| <b>adapalene cream 0.1%</b> (Differin)                                                   |           | •              |                   |
| <b>adapalene gel 0.1%</b> (Differin)                                                     |           | •              |                   |
| <b>azelaic acid gel 15%</b> (Finacea)                                                    |           |                |                   |
| <b>benzoyl peroxide-erythromycin gel 5-3%</b><br>(Benzamycin)                            |           |                |                   |
| <b>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%, NF = Neuac</b><br>(Duac) |           |                |                   |

| Drug Name                                                                       | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>clindamycin phosphate gel 1% (twice-daily)</b>                               |           |                |                   |
| <b>clindamycin phosphate lotion 1%</b><br>(Cleocin-t)                           |           |                |                   |
| <b>clindamycin phosphate soln 1%</b> (Cleocin-t)                                |           |                |                   |
| <b>clindamycin phosphate swab 1%</b><br>(Cleocin-t)                             |           |                |                   |
| ERY – erythromycin pads 2%                                                      |           |                |                   |
| ERYTHROMYCIN – erythromycin gel 2%                                              |           |                |                   |
| <b>erythromycin soln 2%</b>                                                     |           |                |                   |
| <b>isotretinoin cap 10 mg, 20 mg, 40 mg</b>                                     |           |                |                   |
| <b>isotretinoin cap 30 mg</b>                                                   |           |                |                   |
| <b>ivermectin cream 1%</b> (Soolantra)                                          |           |                |                   |
| <b>metronidazole cream 0.75%</b> (Metrocream)                                   |           |                |                   |
| <b>metronidazole gel 0.75%</b>                                                  |           |                |                   |
| <b>metronidazole gel 1%</b> (Metrogel)                                          |           |                |                   |
| <b>sulfacetamide sodium lotion 10% (acne)</b><br>(Klaron)                       |           |                |                   |
| <b>tazarotene cream 0.05%</b> (Tazorac)                                         |           |                |                   |
| <b>tazarotene cream 0.1%</b> (Tazorac)                                          |           | •              |                   |
| <b>tazarotene gel 0.05%, 0.1%</b> (Tazorac)                                     |           | •              |                   |
| <b>tretinoin cream 0.025%, 0.05%, 0.1%</b><br>(Retin-a)                         |           | •              |                   |
| <b>tretinoin gel 0.01%</b> (Retin-a)                                            |           | •              |                   |
| <b>Anti-infectives</b>                                                          |           |                |                   |
| <b>acyclovir oint 5%</b> (Zovirax)                                              |           |                |                   |
| <b>ciclopirox gel 0.77%</b> (Loprox)                                            |           |                |                   |
| <b>ciclopirox olamine cream 0.77% (base equiv)</b>                              |           |                |                   |
| <b>ciclopirox olamine susp 0.77% (base equiv)</b>                               |           |                |                   |
| <b>ciclopirox shampoo 1%</b> (Loprox shampoo)                                   |           |                |                   |
| <b>clotrimazole w/ betamethasone cream 1-0.05%</b> (Lotrisone)                  |           |                |                   |
| <b>CLOTRIMAZOLE/BETAMETHASON – clotrimazole w/ betamethasone lotion 1-0.05%</b> |           |                |                   |

| Drug Name                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>econazole nitrate cream 1%</b>                                                   |           |                |                   |
| <b>gentamicin sulfate cream 0.1%</b>                                                |           |                |                   |
| <b>ketoconazole cream 2%</b>                                                        |           |                |                   |
| <b>ketoconazole shampoo 2%</b> (Nizoral)                                            |           |                |                   |
| <b>mupirocin oint 2%</b> (Bactroban)                                                |           |                |                   |
| <b>nystatin cream 100000 unit/gm</b>                                                |           |                |                   |
| <b>nystatin oint 100000 unit/gm</b>                                                 |           |                |                   |
| <b>nystatin topical powder 100000 unit/gm</b>                                       |           |                |                   |
| <b>silver sulfadiazine cream 1%</b> (Silvadene)                                     |           |                |                   |
| <b>Corticosteroids</b>                                                              |           |                |                   |
| ALCLOMETASONE DIPROPIONAT –<br>alclometasone dipropionate oint 0.05%                |           |                | •                 |
| <b>alclometasone dipropionate cream 0.05%</b><br>(Aclovate)                         |           |                | •                 |
| AMCINONIDE – amcinonide cream 0.1%                                                  |           |                | •                 |
| BETAMETHASONE DIPROPIONAT –<br>betamethasone dipropionate augmented<br>gel 0.05%    |           |                | •                 |
| <b>betamethasone dipropionate augmented<br/>cream 0.05%</b> (Diprolene af)          |           |                | •                 |
| <b>betamethasone dipropionate augmented<br/>lotion 0.05%</b> (Diprolene)            |           |                | •                 |
| <b>betamethasone dipropionate augmented<br/>oint 0.05%</b> (Diprolene)              |           |                | •                 |
| <b>betamethasone dipropionate cream<br/>0.05%</b>                                   |           |                | •                 |
| <b>betamethasone dipropionate lotion<br/>0.05%</b>                                  |           |                | •                 |
| <b>betamethasone dipropionate oint 0.05%</b>                                        |           |                | •                 |
| BETAMETHASONE VALERATE –<br>betamethasone valerate lotion 0.1% (base<br>equivalent) |           |                | •                 |
| <b>betamethasone valerate cream 0.1%</b><br>(base equivalent)                       |           |                | •                 |
| <b>betamethasone valerate oint 0.1%</b> (base<br>equivalent)                        |           |                | •                 |
| <b>clobetasol propionate cream 0.05%</b><br>(Temovate)                              |           |                | •                 |

| Drug Name                                                            | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>clobetasol propionate emollient base cream 0.05%</b> (Temovate e) |           |                | •                 |
| <b>clobetasol propionate foam 0.05%</b> (Olux)                       |           |                | •                 |
| <b>clobetasol propionate gel 0.05%</b> (Temovate)                    |           |                | •                 |
| <b>clobetasol propionate oint 0.05%</b> (Temovate)                   |           |                | •                 |
| <b>clobetasol propionate soln 0.05%</b> (Temovate)                   |           |                | •                 |
| <b>desonide cream 0.05%</b> (Desowen)                                |           |                | •                 |
| <b>desonide oint 0.05%</b> (Desowen)                                 |           |                | •                 |
| <b>desoximetasone cream 0.25%</b> (Topicort)                         |           |                | •                 |
| <b>desoximetasone oint 0.25%</b> (Topicort)                          |           |                | •                 |
| <b>fluocinolone acetonide cream 0.01%</b>                            |           |                | •                 |
| <b>fluocinolone acetonide oint 0.025%</b> (Synalar)                  |           |                | •                 |
| <b>fluocinolone acetonide soln 0.01%</b> (Synalar)                   |           |                | •                 |
| <b>fluocinonide cream 0.05%</b>                                      |           |                | •                 |
| <b>fluocinonide cream 0.1%</b> (Vanos)                               |           |                | •                 |
| <b>fluocinonide emulsified base cream 0.05%</b>                      |           |                | •                 |
| <b>fluocinonide gel 0.05%</b>                                        |           |                | •                 |
| <b>fluocinonide oint 0.05%</b>                                       |           |                | •                 |
| <b>fluocinonide soln 0.05%</b>                                       |           |                | •                 |
| <b>fluticasone propionate cream 0.05%</b> (Cutivate)                 |           |                | •                 |
| <b>fluticasone propionate oint 0.005%</b> (Cutivate)                 |           |                | •                 |
| <b>halobetasol propionate cream 0.05%</b> (Ultravate)                |           |                | •                 |
| <b>HYDROCORTISONE</b> – hydrocortisone lotion 2.5%                   |           |                | •                 |
| <b>hydrocortisone cream 2.5%</b>                                     |           |                | •                 |
| <b>hydrocortisone oint 2.5%</b>                                      |           |                | •                 |
| <b>hydrocortisone valerate cream 0.2%</b>                            |           |                | •                 |
| <b>mometasone furoate cream 0.1%</b> (Elocon)                        |           |                | •                 |
| <b>mometasone furoate oint 0.1%</b> (Elocon)                         |           |                | •                 |

| Drug Name                                                                           | Specialty | Prior Approval | Dispensing Limits |
|-------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>mometasone furoate solution 0.1% (lotion)</b> (Elocon)                           |           |                | •                 |
| <b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>                            |           |                |                   |
| <b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</b>                             |           |                |                   |
| TRIAMCINOLONE ACETONIDE – triamcinolone acetonide lotion 0.025%                     |           |                | •                 |
| <b>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</b>                             |           |                | •                 |
| <b>triamcinolone acetonide lotion 0.1%</b>                                          |           |                | •                 |
| <b>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</b>                              |           |                | •                 |
| <b>Other Products</b>                                                               |           |                |                   |
| <b>acitretin cap 10 mg, 17.5 mg, 25 mg</b> (Soriatane)                              |           |                |                   |
| ADBRY – tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml                | •         | •              | •                 |
| ADBRY – tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml                 | •         | •              | •                 |
| CALCIPOTRIENE – calcipotriene soln 0.005% (50 mcg/ml)                               |           |                |                   |
| <b>calcipotriene cream 0.005%</b> (Dovonex)                                         |           |                |                   |
| CIBINQO – abrocitinib tab 50 mg, 100 mg, 200 mg                                     | •         | •              | •                 |
| COSENTYX – secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml   | •         | •              | •                 |
| COSENTYX – secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)                | •         | •              | •                 |
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| COSENTYX SENSOREADY PEN – secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose) | •         | •              | •                 |
| COSENTYX UNOREADY – secukinumab subcutaneous soln auto-injector 300 mg/2ml          | •         | •              | •                 |

| Drug Name                                                                          | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>diclofenac sodium (actinic keratoses) gel 3%</b> (Solaraze)                     |           |                |                   |
| DUPIXENT – dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml     | •         | •              | •                 |
| DUPIXENT – dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml | •         | •              | •                 |
| EBGLYSS – lebrikizumab-lbkz subcutaneous soln auto-inject 250 mg/2ml               | •         | •              | •                 |
| EBGLYSS – lebrikizumab-lbkz solution prefilled syringe 250 mg/2ml                  | •         | •              | •                 |
| FLUOROURACIL – fluorouracil soln 2%                                                |           |                |                   |
| <b>fluorouracil cream 5%</b> (Efudex)                                              |           |                |                   |
| <b>fluorouracil soln 5%</b>                                                        |           |                |                   |
| ICOTYDE – icotrokinra hcl tab 200 mg                                               | •         | •              | •                 |
| <b>imiquimod cream 5%</b> (Aldara)                                                 |           |                |                   |
| <b>lidocaine-prilocaine cream 2.5-2.5%</b> (Emla)                                  |           |                |                   |
| <b>malathion lotion 0.5%</b> (Ovide)                                               |           |                |                   |
| NEMLUVIO – nemolizumab-ilto for subcutaneous auto-injector 30 mg                   | •         | •              | •                 |
| <b>permethrin cream 5%</b> (Elimite)                                               |           |                |                   |
| PODOFILOX – podofilox soln 0.5%                                                    |           |                |                   |
| SELENIUM SULFIDE – selenium sulfide lotion 2.5%                                    |           |                |                   |
| SKYRIZI – risankizumab-rzaa soln prefilled syringe 55 mg/0.37ml, 150 mg/ml         | •         | •              | •                 |
| SKYRIZI PEN – risankizumab-rzaa soln auto-injector 150 mg/ml                       | •         | •              | •                 |
| SOTYKTU – deucravacitinib tab 6 mg                                                 | •         | •              | •                 |
| STEQEYMA – ustekinumab-stba soln prefilled syringe 45 mg/0.5ml, 90 mg/ml           | •         | •              | •                 |
| STEQEYMA – ustekinumab-stba subcutaneous soln 45 mg/0.5ml                          | •         | •              | •                 |
| <b>tacrolimus oint 0.03%, 0.1%</b> (Protopic)                                      |           |                |                   |
| TREMFYA – guselkumab soln pen-injector 100 mg/ml                                   | •         | •              | •                 |
| TREMFYA – guselkumab soln prefilled syringe 100 mg/ml                              | •         | •              | •                 |

| Drug Name                                                                      | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------------------|-----------|----------------|-------------------|
| TREMFYA PEN – guselkumab soln auto-injector 100 mg/ml                          | •         | •              | •                 |
| VALCHLOR – mechlorethamine hcl gel 0.016% (base equivalent)                    | •         |                |                   |
| YESINTEK – ustekinumab-kfce soln prefilled syringe 45 mg/0.5ml, 90 mg/ml       | •         | •              | •                 |
| YESINTEK – ustekinumab-kfce subcutaneous soln 45 mg/0.5ml                      | •         | •              | •                 |
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| <b>DIABETIC SUPPLIES</b>                                                       |           |                |                   |
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| CONTOUR BLOOD GLUCOSE TES – glucose blood test strip                           |           |                |                   |
| CONTOUR HIGH CONTROL – blood glucose calibration - liquid - high               |           |                |                   |
| CONTOUR LOW CONTROL – blood glucose calibration - liquid - low                 |           |                |                   |
| CONTOUR NEXT BLOOD GLUCOS – glucose blood test strip                           |           |                |                   |
| CONTOUR NEXT BLOOD GLUCOS – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NEXT CONTROL LEVE – blood glucose calibration - liquid - normal, - low |           |                |                   |
| CONTOUR NEXT EZ BLOOD GLU – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NEXT GEN BLOOD GL – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NEXT LINK BLOOD G – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NEXT LINK WIRELES – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NEXT ONE BLOOD GL – blood glucose monitoring kit                       |           |                |                   |
| CONTOUR NEXT ONE BLOOD GL – blood glucose monitoring kit w/ device             |           |                |                   |
| CONTOUR NORMAL CONTROL – blood glucose calibration - liquid - normal           |           |                |                   |
| CONTOUR PLUS BLOOD GLUCOS – glucose blood test strip                           |           |                |                   |

| Drug Name                                                          | Specialty | Prior Approval | Dispensing Limits |
|--------------------------------------------------------------------|-----------|----------------|-------------------|
| CONTOUR PLUS BLUE BLOOD G – blood glucose monitoring kit w/ device |           |                |                   |
| CONTOUR PLUS CONTROL SOLU – blood glucose calibration - liquid     |           |                |                   |
| DEXCOM G6 RECEIVER – continuous glucose system receiver            |           | •              | •                 |
| DEXCOM G6 SENSOR – continuous glucose system sensor                |           | •              | •                 |
| DEXCOM G6 TRANSMITTER – continuous glucose system transmitter      |           | •              | •                 |
| DEXCOM G7 RECEIVER – continuous glucose system receiver            |           | •              | •                 |
| DEXCOM G7 SENSOR – continuous glucose system sensor                |           | •              | •                 |
| DEXCOM G7 15 DAY SENSOR – continuous glucose system sensor         |           | •              | •                 |
| FREESTYLE LIBRE 14 DAY/RE – continuous glucose system receiver     |           | •              | •                 |
| FREESTYLE LIBRE 14 DAY/SE – continuous glucose system sensor       |           | •              | •                 |
| FREESTYLE LIBRE 2 PLUS/SE – continuous glucose system sensor       |           | •              | •                 |
| FREESTYLE LIBRE 2/READER/ – continuous glucose system receiver     |           | •              | •                 |
| FREESTYLE LIBRE 2/SENSOR/ – continuous glucose system sensor       |           | •              | •                 |
| FREESTYLE LIBRE 3 PLUS/SE – continuous glucose system sensor       |           | •              | •                 |
| FREESTYLE LIBRE 3/READER/ – continuous glucose system receiver     |           | •              | •                 |
| FREESTYLE LIBRE 3/SENSOR/ – continuous glucose system sensor       |           | •              | •                 |
| FREESTYLE PRECISION NEO B – glucose blood test strip               |           |                |                   |
| FREESTYLE PRECISION NEO B – blood glucose monitoring kit w/ device |           |                |                   |
| INSULIN PEN NEEDLES – NOVOFINE, NOVOTWIST; various                 |           |                |                   |
| INSULIN SYRINGES – various                                         |           |                |                   |
| LANCETS – various                                                  |           |                |                   |

| Drug Name                                                                                                                 | Specialty | Prior Approval | Dispensing Limits |
|---------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| MEDISENSE GLUCOSE KETONE – blood glucose calibration - liquid                                                             |           |                |                   |
| OMNIPOD DASH INTRO KIT (G – insulin infusion disposable pump kit)                                                         |           | •              |                   |
| OMNIPOD DASH PODS (GEN 4) – insulin infusion disposable pump reservoir                                                    |           | •              |                   |
| OPTIUMEZ TEST STRIPS – glucose blood test strip                                                                           |           |                |                   |
| PRECISION GLUCOSE KETONE – blood glucose calibration - liquid                                                             |           |                |                   |
| PRECISION XTRA – blood glucose/ketone monitoring devices                                                                  |           |                |                   |
| PRECISION XTRA BLOOD GLUC – glucose blood test strip                                                                      |           |                |                   |
| <b>MEDICAL DEVICES</b>                                                                                                    |           |                |                   |
| INHALER ASSIST DEVICES – spacers                                                                                          |           |                |                   |
| <b>MISCELLANEOUS DRUGS</b>                                                                                                |           |                |                   |
| <b>azathioprine tab 50 mg</b> (Imuran)                                                                                    |           |                |                   |
| <b>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 12-3 mg (base equiv)</b> (SUBOXONE) |           |                |                   |
| <b>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</b> (Suboxone)                                              |           |                |                   |
| <b>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)</b>                                   |           |                |                   |
| CHEMET – succimer cap 100 mg                                                                                              |           |                |                   |
| <b>cyclosporine cap 25 mg, 100 mg</b> (Sandimmune)                                                                        |           |                |                   |
| <b>cyclosporine modified cap 25 mg, 100 mg</b> (Neoral)                                                                   |           |                |                   |
| <b>cyclosporine modified oral soln 100 mg/ml</b> (Neoral)                                                                 |           |                |                   |
| <b>deferasirox granules packet 90 mg, 180 mg, 360 mg</b> (Jadenu sprinkle)                                                | •         |                |                   |
| <b>deferasirox tab for oral susp 125 mg, 250 mg, 500 mg</b> (EXJADE)                                                      | •         |                |                   |
| <b>deferasirox tab 90 mg, 360 mg</b> (Jadenu)                                                                             | •         |                |                   |
| <b>deferasirox tab 180 mg</b>                                                                                             | •         |                |                   |

| Drug Name                                                                                                        | Specialty | Prior Approval | Dispensing Limits |
|------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</b> (Zortress)                                                  |           |                |                   |
| KLOXXADO – naloxone hcl nasal spray 8 mg/0.1ml                                                                   |           |                |                   |
| <b>lenalidomide caps 2.5 mg</b> (Revlimid)                                                                       | •         | •              | •                 |
| <b>lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg</b> (Revlimid)                                              | •         | •              | •                 |
| LOKELMA – sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm                                             |           |                |                   |
| <b>mycophenolate mofetil cap 250 mg</b> (Cellcept)                                                               |           |                |                   |
| <b>mycophenolate mofetil for oral susp 200 mg/ml</b> (Cellcept)                                                  |           |                |                   |
| <b>mycophenolate mofetil tab 500 mg</b> (Cellcept)                                                               |           |                |                   |
| <b>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv)</b> (Myfortic) |           |                |                   |
| MYHIBBIN – mycophenolate mofetil oral susp 200 mg/ml                                                             |           |                |                   |
| <b>naloxone hcl inj 0.4 mg/ml, 4 mg/10ml</b>                                                                     |           |                |                   |
| <b>naloxone hcl soln prefilled syringe 0.4 mg/ml</b>                                                             |           |                |                   |
| NALOXONE HYDROCHLORIDE – naloxone hcl soln cartridge 0.4 mg/ml                                                   |           |                |                   |
| <b>naltrexone hcl tab 50 mg</b> (Revia)                                                                          |           |                |                   |
| OPVEE – nalmefene hcl nasal spray 2.7 mg/0.1ml (base equiv)                                                      |           |                |                   |
| <b>penicillamine tab 250 mg</b> (Depen titratabs)                                                                | •         |                |                   |
| REXTOVY – naloxone hcl nasal spray 4 mg/0.25ml                                                                   |           |                |                   |
| REZENOPY – naloxone hcl nasal spray 10 mg/0.11ml                                                                 |           |                |                   |
| RHAPSIDO – remibrutinib tab 25 mg                                                                                | •         | •              | •                 |
| <b>sirolimus oral soln 1 mg/ml</b> (Rapamune)                                                                    |           |                |                   |
| <b>sirolimus tab 0.5 mg, 1 mg, 2 mg</b> (Rapamune)                                                               |           |                |                   |
| <b>sodium polystyrene sulfonate powder</b> (Kayexalate)                                                          |           |                |                   |

| Drug Name                                                                                                                                                                              | Specialty | Prior Approval | Dispensing Limits |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|----------------|-------------------|
| <b>sodium polystyrene sulfonate susp 15 gm/60ml</b>                                                                                                                                    |           |                |                   |
| SPS – sodium polystyrene sulfonate rectal susp 30 gm/120ml                                                                                                                             |           |                |                   |
| <b>tacrolimus cap 0.5 mg, 1 mg, 5 mg</b> (Prograf)                                                                                                                                     |           |                |                   |
| THALOMID – thalidomide cap 50 mg, 100 mg                                                                                                                                               | •         | •              | •                 |
| VIVITROL – naltrexone for im extended release susp 380 mg                                                                                                                              |           |                |                   |
| ZOKINVY – lonafarnib cap 50 mg, 75 mg                                                                                                                                                  | •         | •              | •                 |
| ZUBSOLV – buprenorphine hcl-naloxone hcl sl tab 0.7-0.18 mg (base eq), 1.4-0.36 mg (base eq), 2.9-0.71 mg (base eq), 5.7-1.4 mg (base eq), 8.6-2.1 mg (base eq), 11.4-2.9 mg (base eq) |           |                |                   |
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| anagrelide hcl cap 0.5 mg (Agrylin).....                                                                                                                                                  | 33 | baclofen tab 10 mg, 20 mg.....                                                               | 32 |
| anastrozole tab 1 mg (Arimidex).....                                                                                                                                                      | 5  | balsalazide disodium cap 750 mg (Colazal).....                                               | 22 |
| ANDEMBRY.....                                                                                                                                                                             | 33 | BAQSIMI ONE PACK.....                                                                        | 11 |
| ANORO ELLIPTA.....                                                                                                                                                                        | 19 | BAQSIMI TWO PACK.....                                                                        | 11 |
| ANUCORT-HC.....                                                                                                                                                                           | 36 | BARACLUDE.....                                                                               | 2  |
| ANUSOL-HC.....                                                                                                                                                                            | 36 | benazepril & hydrochlorothiazide tab 5-6.25 mg.....                                          | 14 |
| aprepitant capsule 40 mg, 80 mg, 125 mg (Emend).....                                                                                                                                      | 21 | benazepril & hydrochlorothiazide tab 10-12.5 mg,<br>20-12.5 mg, 20-25 mg (Lotensin hct)..... | 14 |
| aprepitant capsule therapy pack 80 & 125 mg (Emend<br>tripack).....                                                                                                                       | 21 | benazepril hcl tab 5 mg.....                                                                 | 14 |
| APRETUDE.....                                                                                                                                                                             | 3  | benazepril hcl tab 10 mg, 20 mg, 40 mg (Lotensin).....                                       | 14 |
| ARANELLE.....                                                                                                                                                                             | 10 | BENZNIDAZOLE.....                                                                            | 5  |
| aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30<br>mg (Abilify).....                                                                                                                 | 24 | benzoyl peroxide-erythromycin gel 5-3%<br>(Benzamycin).....                                  | 36 |
| ARNUITY ELLIPTA.....                                                                                                                                                                      | 19 | benztropine mesylate tab 0.5 mg, 1 mg, 2 mg.....                                             | 32 |
| ASMANEX HFA.....                                                                                                                                                                          | 19 | BESREMI.....                                                                                 | 6  |
| ASMANEX TWISTHALER 120 ME.....                                                                                                                                                            | 19 | BESREMI PEN.....                                                                             | 6  |
| ASMANEX TWISTHALER 30 MET.....                                                                                                                                                            | 19 | betaine powder for oral solution (Cystadane).....                                            | 13 |
| ASMANEX TWISTHALER 60 MET.....                                                                                                                                                            | 19 | BETAMETHASONE DIPROPIONAT.....                                                               | 37 |
| aspirin-dipyridamole cap er 12hr 25-200 mg<br>(Aggrenox).....                                                                                                                             | 33 | betamethasone dipropionate augmented cream 0.05%<br>(Diprolene af).....                      | 37 |
| atazanavir sulfate cap 150 mg (base equiv), 200 mg<br>(base equiv), 300 mg (base equiv) (Reyataz).....                                                                                    | 3  | betamethasone dipropionate augmented lotion 0.05%<br>(Diprolene).....                        | 37 |
| atenolol & chlorthalidone tab 50-25 mg (Tenoretic<br>50).....                                                                                                                             | 15 | betamethasone dipropionate augmented oint 0.05%<br>(Diprolene).....                          | 37 |
| atenolol & chlorthalidone tab 100-25 mg (Tenoretic<br>100).....                                                                                                                           | 15 | betamethasone dipropionate cream 0.05%.....                                                  | 37 |
| atenolol tab 25 mg, 50 mg, 100 mg (Tenormin).....                                                                                                                                         | 15 | betamethasone dipropionate lotion 0.05%.....                                                 | 37 |
| atomoxetine hcl cap 10 mg (base equiv), 18 mg (base<br>equiv), 25 mg (base equiv), 40 mg (base equiv), 60 mg<br>(base equiv), 80 mg (base equiv), 100 mg (base equiv)<br>(Strattera)..... | 25 | betamethasone dipropionate oint 0.05%.....                                                   | 37 |
| atorvastatin calcium tab 10 mg (base equivalent), 20<br>mg (base equivalent), 40 mg (base equivalent), 80 mg<br>(base equivalent) (Lipitor).....                                          | 16 | BETAMETHASONE VALERATE.....                                                                  | 37 |
| atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg<br>(Malarone).....                                                                                                                    | 4  | betamethasone valerate cream 0.1% (base<br>equivalent).....                                  | 37 |
| atovaquone susp 750 mg/5ml (Mepron).....                                                                                                                                                  | 5  | betamethasone valerate oint 0.1% (base<br>equivalent).....                                   | 37 |
| atropine sulfate ophth soln 1% (Atropine sulfate).....                                                                                                                                    | 35 | BETASERON.....                                                                               | 26 |
| ATROVENT HFA.....                                                                                                                                                                         | 19 | bexarotene cap 75 mg (Targretin).....                                                        | 6  |
| ATTRUBY.....                                                                                                                                                                              | 18 | bicalutamide tab 50 mg (Casodex).....                                                        | 6  |
| AUGMENTIN.....                                                                                                                                                                            | 1  | BIKTARVY.....                                                                                | 3  |
| AUVI-Q.....                                                                                                                                                                               | 18 | bimatoprost ophth soln 0.01% (Lumigan).....                                                  | 35 |
| AVONEX.....                                                                                                                                                                               | 26 | bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg,<br>5-6.25 mg, 10-6.25 mg (Ziac).....       | 15 |
| AVONEX PEN.....                                                                                                                                                                           | 26 | bisoprolol fumarate tab 5 mg, 10 mg (Zebeta).....                                            | 15 |
| AVTOZMA.....                                                                                                                                                                              | 29 | bosentan tab for oral susp 32 mg (Tracleer).....                                             | 18 |
| AYVAKIT.....                                                                                                                                                                              | 5  | bosentan tab 62.5 mg, 125 mg (Tracleer).....                                                 | 18 |
| azathioprine tab 50 mg (Imuran).....                                                                                                                                                      | 40 | BOSULIF.....                                                                                 | 6  |
| azelaic acid gel 15% (Finacea).....                                                                                                                                                       | 36 | bosutinib tab 100 mg, 400 mg, 500 mg (Bosulif).....                                          | 6  |
| azelastine hcl nasal spray 0.1% (137 mcg/spray).....                                                                                                                                      | 19 | BREO ELLIPTA.....                                                                            | 19 |
| azelastine hcl ophth soln 0.05% (Optivar).....                                                                                                                                            | 35 | BREZTRI AEROSPHERE.....                                                                      | 19 |
|                                                                                                                                                                                           |    | brimonidine tartrate ophth soln 0.2%.....                                                    | 35 |
|                                                                                                                                                                                           |    | brimonidine tartrate ophth soln 0.1%, 0.15% (Alphagan<br>p).....                             | 35 |

|                                                                                                                         |    |                                                                                     |    |
|-------------------------------------------------------------------------------------------------------------------------|----|-------------------------------------------------------------------------------------|----|
| BRUKINSA.....                                                                                                           | 6  | carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg (Carbatrol).....                   | 31 |
| budesonide delayed release particles cap 3 mg (Entocort ec).....                                                        | 9  | carbamazepine chew tab 100 mg.....                                                  | 31 |
| budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act (Symbicort).....                           | 19 | carbamazepine susp 100 mg/5ml (Tegretol).....                                       | 31 |
| budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml (Pulmicort).....                                           | 19 | carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg (Tegretol-xr).....                 | 31 |
| bumetanide tab 0.5 mg, 1 mg, 2 mg.....                                                                                  | 17 | carbamazepine tab 200 mg (Tegretol).....                                            | 31 |
| buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 12-3 mg (base equiv) (SUBOXONE)..... | 40 | carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg..... | 32 |
| buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv) (Suboxone).....                                              | 40 | carbidopa & levodopa tab er 25-100 mg, 50-200 mg (Sinemet cr).....                  | 32 |
| buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv).....                                   | 40 | carbidopa & levodopa tab 10-100 mg, 25-100 mg, 25-250 mg (Sinemet).....             | 32 |
| buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv).....                                                      | 28 | carbidopa-levodopa-entacapone tabs 12.5-50-200 mg (Stalevo 50).....                 | 32 |
| bupropion hcl (smoking deterrent) tab er 12hr 150 mg (Zyban).....                                                       | 27 | carbidopa-levodopa-entacapone tabs 18.75-75-200 mg (Stalevo 75).....                | 32 |
| bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg (Wellbutrin sr).....                                                   | 23 | carbidopa-levodopa-entacapone tabs 25-100-200 mg (Stalevo 100).....                 | 32 |
| bupropion hcl tab er 24hr 150 mg, 300 mg (Wellbutrin xl).....                                                           | 23 | carbidopa-levodopa-entacapone tabs 31.25-125-200 mg (Stalevo 125).....              | 32 |
| bupropion hcl tab 75 mg, 100 mg (Wellbutrin).....                                                                       | 23 | carbidopa-levodopa-entacapone tabs 37.5-150-200 mg (Stalevo 150).....               | 32 |
| bupirone hcl tab 5 mg, 7.5 mg, 10 mg, 15 mg, 30 mg.....                                                                 | 23 | carbidopa-levodopa-entacapone tabs 50-200-200 mg (Stalevo 200).....                 | 32 |
| butalbital-acetaminophen-caffeine tab 50-325-40 mg.....                                                                 | 28 | carglumic acid soluble tab 200 mg (Carbaglu).....                                   | 13 |
| butalbital-aspirin-caffeine cap 50-325-40 mg (Fiorinal).....                                                            | 28 | CARTEOLOL HCL.....                                                                  | 35 |
| butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg (Fiorinal/codeine #3).....                                       | 28 | carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg (Coreg).....                       | 15 |
| <b>C</b>                                                                                                                |    | CEFACLOL.....                                                                       | 1  |
| cabergoline tab 0.5 mg.....                                                                                             | 13 | CEFADROXIL.....                                                                     | 1  |
| CABOMETYX.....                                                                                                          | 6  | cefadroxil cap 500 mg.....                                                          | 1  |
| caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv) (Cafcit).....                                                | 25 | cefadroxil for susp 250 mg/5ml, 500 mg/5ml.....                                     | 1  |
| CALCIPOTRIENE.....                                                                                                      | 38 | cefdinir cap 300 mg.....                                                            | 1  |
| calcipotriene cream 0.005% (Dovonex).....                                                                               | 38 | cefdinir for susp 125 mg/5ml, 250 mg/5ml.....                                       | 1  |
| calcitonin (salmon) nasal soln 200 unit/act (Miacalcin).....                                                            | 13 | CEFIXIME.....                                                                       | 1  |
| calcitriol cap 0.25 mcg, 0.5 mcg (Rocaltrol).....                                                                       | 13 | cefixime cap 400 mg (Suprax).....                                                   | 1  |
| calcium acetate (phosphate binder) cap 667 mg (169 mg ca) (Phoslo).....                                                 | 22 | cefixime for susp 200 mg/5ml (Suprax).....                                          | 1  |
| calcium acetate (phosphate binder) tab 667 mg (Eliphos).....                                                            | 22 | CEFPODOXIME PROXETIL.....                                                           | 1  |
| CALQUENCE.....                                                                                                          | 6  | cefpodoxime proxetil tab 100 mg, 200 mg.....                                        | 1  |
| candesartan cilexetil-hydrochlorothiazide tab 16-12.5 mg, 32-12.5 mg, 32-25 mg (Atacand hct).....                       | 15 | cefprozil for susp 125 mg/5ml, 250 mg/5ml.....                                      | 1  |
| candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg (Atacand).....                                                       | 15 | cefprozil tab 250 mg, 500 mg.....                                                   | 1  |
| capecitabine tab 150 mg, 500 mg (Xeloda).....                                                                           | 6  | cefuroxime axetil tab 250 mg, 500 mg (Ceftin).....                                  | 1  |
| CAPRELSA.....                                                                                                           | 6  | celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg (Celebrex).....                         | 29 |
| CAPTOPRIL/HYDROCHLOROTHIA.....                                                                                          | 14 | cephalexin cap 250 mg, 500 mg (Keflex).....                                         | 1  |
| captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg.....                                                                        | 14 | cephalexin for susp 125 mg/5ml, 250 mg/5ml.....                                     | 1  |
|                                                                                                                         |    | CERDELGA.....                                                                       | 33 |
|                                                                                                                         |    | cetrorelix acetate for inj kit 0.25 mg (Cetrotide).....                             | 11 |
|                                                                                                                         |    | CHEMET.....                                                                         | 40 |
|                                                                                                                         |    | chlorhexidine gluconate soln 0.12% (Peridex).....                                   | 36 |
|                                                                                                                         |    | CHLOROQUINE PHOSPHATE.....                                                          | 4  |
|                                                                                                                         |    | chloroquine phosphate tab 500 mg.....                                               | 4  |
|                                                                                                                         |    | chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg.....                     | 24 |
|                                                                                                                         |    | chlorthalidone tab 25 mg, 50 mg.....                                                | 17 |

|                                                                                                                                                                    |    |                                                                                    |    |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------------------------------------------------------------------------------|----|
| chlorzoxazone tab 500 mg.....                                                                                                                                      | 32 | clomipramine hcl cap 25 mg, 50 mg, 75 mg<br>(Anafranil).....                       | 24 |
| cholestyramine light powder 4 gm/dose (Questran<br>light).....                                                                                                     | 16 | clonazepam orally disintegrating tab 0.125 mg, 0.25<br>mg, 0.5 mg, 1 mg, 2 mg..... | 31 |
| cholestyramine powder 4 gm/dose (Questran).....                                                                                                                    | 16 | clonazepam tab 0.5 mg, 1 mg, 2 mg (Klonopin).....                                  | 31 |
| CIBINQO.....                                                                                                                                                       | 38 | clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg (Catapres).....                           | 18 |
| ciclopirox gel 0.77% (Loprox).....                                                                                                                                 | 37 | clonidine td patch weekly 0.1 mg/24hr (Catapres-<br>tts-1).....                    | 18 |
| ciclopirox olamine cream 0.77% (base equiv).....                                                                                                                   | 37 | clonidine td patch weekly 0.2 mg/24hr (Catapres-<br>tts-2).....                    | 18 |
| ciclopirox olamine susp 0.77% (base equiv).....                                                                                                                    | 37 | clonidine td patch weekly 0.3 mg/24hr (Catapres-<br>tts-3).....                    | 18 |
| ciclopirox shampoo 1% (Loprox shampoo).....                                                                                                                        | 37 | clopidogrel bisulfate tab 75 mg (base equiv), 300 mg<br>(base equiv) (Plavix)..... | 33 |
| cilostazol tab 50 mg, 100 mg (Pletal).....                                                                                                                         | 33 | clorazepate dipotassium tab 3.75 mg, 7.5 mg, 15 mg<br>(Tranxene t).....            | 23 |
| CILOXAN.....                                                                                                                                                       | 34 | CLOTTRIMAZOLE/BETAMETHASON.....                                                    | 37 |
| CIMDUO.....                                                                                                                                                        | 3  | clotrimazole w/ betamethasone cream 1-0.05%<br>(Lotrisone).....                    | 37 |
| cimetidine hcl soln 300 mg/5ml.....                                                                                                                                | 21 | clozapine tab 50 mg, 200 mg.....                                                   | 24 |
| cimetidine tab 300 mg, 400 mg, 800 mg.....                                                                                                                         | 21 | clozapine tab 25 mg, 100 mg (Clozaril).....                                        | 24 |
| cinacalcet hcl tab 30 mg (base equiv), 60 mg (base<br>equiv), 90 mg (base equiv) (Sensipar).....                                                                   | 13 | COARTEM.....                                                                       | 4  |
| CIPRO.....                                                                                                                                                         | 2  | codeine sulfate tab 30 mg.....                                                     | 28 |
| ciprofloxacin-dexamethasone otic susp 0.3-0.1%<br>(Ciprodex).....                                                                                                  | 36 | colchicine tab 0.6 mg (Colcrys).....                                               | 30 |
| ciprofloxacin hcl ophth soln 0.3% (base equivalent)<br>(Ciloxan).....                                                                                              | 34 | colchicine w/ probenecid tab 0.5-500 mg.....                                       | 30 |
| ciprofloxacin hcl tab 750 mg (base equiv).....                                                                                                                     | 2  | colesevelam hcl packet for susp 3.75 gm<br>(Welchol).....                          | 16 |
| ciprofloxacin hcl tab 250 mg (base equiv), 500 mg<br>(base equiv) (Cipro).....                                                                                     | 2  | colesevelam hcl tab 625 mg (Welchol).....                                          | 16 |
| ciprofloxacin-hydrocortisone otic susp 0.2-1% (Cipro<br>hc).....                                                                                                   | 36 | colestipol hcl granule packets 5 gm (Colestid<br>flavored).....                    | 16 |
| citalopram hydrobromide oral soln 10 mg/5ml.....                                                                                                                   | 23 | colestipol hcl granules 5 gm (Colestid flavored).....                              | 16 |
| citalopram hydrobromide tab 10 mg (base equiv), 20<br>mg (base equiv), 40 mg (base equiv) (Celexa).....                                                            | 23 | colestipol hcl tab 1 gm (Colestid).....                                            | 16 |
| cladribine tab therapy pack 10 mg (4 tabs), 10 mg (5<br>tabs), 10 mg (6 tabs), 10 mg (7 tabs), 10 mg (8 tabs),<br>10 mg (9 tabs), 10 mg (10 tabs) (Mavenclad)..... | 26 | COMBIVENT RESPIMAT.....                                                            | 19 |
| CLARITHROMYCIN.....                                                                                                                                                | 1  | COMETRIQ.....                                                                      | 6  |
| clarithromycin tab er 24hr 500 mg.....                                                                                                                             | 1  | CONTOUR BLOOD GLUCOSE MON.....                                                     | 39 |
| clarithromycin tab 250 mg, 500 mg (Biaxin).....                                                                                                                    | 1  | CONTOUR BLOOD GLUCOSE TES.....                                                     | 39 |
| CLIMARA PRO.....                                                                                                                                                   | 9  | CONTOUR HIGH CONTROL.....                                                          | 39 |
| clindamycin hcl cap 75 mg, 150 mg, 300 mg<br>(Cleocin).....                                                                                                        | 5  | CONTOUR LOW CONTROL.....                                                           | 39 |
| clindamycin palmitate hcl for soln 75 mg/5ml (base<br>equiv) (Cleocin pediatric gr).....                                                                           | 5  | CONTOUR NEXT BLOOD GLUCOS.....                                                     | 39 |
| clindamycin phosphate gel 1% (twice-daily).....                                                                                                                    | 37 | CONTOUR NEXT CONTROL LEVE.....                                                     | 39 |
| clindamycin phosphate lotion 1% (Cleocin-t).....                                                                                                                   | 37 | CONTOUR NEXT EZ BLOOD GLU.....                                                     | 39 |
| clindamycin phosphate soln 1% (Cleocin-t).....                                                                                                                     | 37 | CONTOUR NEXT GEN BLOOD GL.....                                                     | 39 |
| clindamycin phosphate swab 1% (Cleocin-t).....                                                                                                                     | 37 | CONTOUR NEXT LINK BLOOD G.....                                                     | 39 |
| clindamycin phosphate vaginal cream 2%<br>(Cleocin).....                                                                                                           | 23 | CONTOUR NEXT LINK WIRELES.....                                                     | 39 |
| clindamycin phosph-benzoyl peroxide (refrig) gel 1.2<br>(1)-5%, NF = Neuac (Duac).....                                                                             | 36 | CONTOUR NEXT ONE BLOOD GL.....                                                     | 39 |
| clobetasol propionate cream 0.05% (Temovate).....                                                                                                                  | 37 | CONTOUR NORMAL CONTROL.....                                                        | 39 |
| clobetasol propionate emollient base cream 0.05%<br>(Temovate e).....                                                                                              | 38 | CONTOUR PLUS BLOOD GLUCOS.....                                                     | 39 |
| clobetasol propionate foam 0.05% (Olux).....                                                                                                                       | 38 | CONTOUR PLUS BLUE BLOOD G.....                                                     | 40 |
| clobetasol propionate gel 0.05% (Temovate).....                                                                                                                    | 38 | CONTOUR PLUS CONTROL SOLU.....                                                     | 40 |
| clobetasol propionate oint 0.05% (Temovate).....                                                                                                                   | 38 | CORLANOR.....                                                                      | 18 |
| clobetasol propionate soln 0.05% (Temovate).....                                                                                                                   | 38 | COSENTYX.....                                                                      | 38 |
|                                                                                                                                                                    |    | COSENTYX SENSOREADY PEN.....                                                       | 38 |
|                                                                                                                                                                    |    | COSENTYX UNOREADY.....                                                             | 38 |
|                                                                                                                                                                    |    | COTELLIC.....                                                                      | 6  |
|                                                                                                                                                                    |    | CREON.....                                                                         | 21 |
|                                                                                                                                                                    |    | CROMOLYN SODIUM.....                                                               | 36 |

|                                                                                                               |    |                                                                                                                 |    |
|---------------------------------------------------------------------------------------------------------------|----|-----------------------------------------------------------------------------------------------------------------|----|
| cromolyn sodium soln nebu 20 mg/2ml.....                                                                      | 19 | desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) (Pristiq)..... | 24 |
| CTEXLI.....                                                                                                   | 22 | DEXAMETHASONE.....                                                                                              | 9  |
| cyanocobalamin inj 1000 mcg/ml.....                                                                           | 33 | dexamethasone elixir 0.5 mg/5ml.....                                                                            | 9  |
| cyclobenzaprine hcl tab 5 mg, 10 mg.....                                                                      | 32 | DEXAMETHASONE INTENSOL.....                                                                                     | 9  |
| cyclopentolate hcl ophth soln 1% (Cyclogyl).....                                                              | 36 | DEXAMETHASONE SODIUM PHOS.....                                                                                  | 35 |
| cyclophosphamide cap 25 mg, 50 mg (Cyclophosphamide).....                                                     | 6  | dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg.....                                          | 9  |
| cyclosporine cap 25 mg, 100 mg (Sandimmune).....                                                              | 40 | DEXCOM G7 15 DAY SENSOR.....                                                                                    | 40 |
| cyclosporine modified cap 25 mg, 100 mg (Neoral).....                                                         | 40 | DEXCOM G6 RECEIVER.....                                                                                         | 40 |
| cyclosporine modified oral soln 100 mg/ml (Neoral).....                                                       | 40 | DEXCOM G7 RECEIVER.....                                                                                         | 40 |
| cypheptadine hcl syrup 2 mg/5ml.....                                                                          | 18 | DEXCOM G6 SENSOR.....                                                                                           | 40 |
| cypheptadine hcl tab 4 mg.....                                                                                | 18 | DEXCOM G7 SENSOR.....                                                                                           | 40 |
| CYSTAGON.....                                                                                                 | 23 | DEXCOM G6 TRANSMITTER.....                                                                                      | 40 |
| <b>D</b>                                                                                                      |    |                                                                                                                 |    |
| danazol cap 50 mg, 100 mg, 200 mg.....                                                                        | 9  | dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg (Focalin xr).....     | 26 |
| dapagliflozin free base-metformin hcl tab er 24hr 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg (Xigduo xr)..... | 11 | dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg (Focalin).....                                                   | 26 |
| dapagliflozin tab 5 mg, 10 mg (Farxiga).....                                                                  | 11 | dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg (Dexedrine).....                                       | 26 |
| dapsone tab 25 mg, 100 mg.....                                                                                | 5  | dextroamphetamine sulfate tab 5 mg, 10 mg.....                                                                  | 26 |
| darunavir tab 600 mg, 800 mg (Prezista).....                                                                  | 3  | diazepam conc 5 mg/ml.....                                                                                      | 23 |
| dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg (Sprycel).....                                       | 6  | diazepam oral soln 1 mg/ml.....                                                                                 | 23 |
| DAWNZERA.....                                                                                                 | 33 | diazepam rectal gel delivery system 10 mg, 20 mg (Diastat acudial).....                                         | 31 |
| deferasirox granules packet 90 mg, 180 mg, 360 mg (Jadenu sprinkle).....                                      | 40 | diazepam tab 2 mg, 5 mg, 10 mg (Valium).....                                                                    | 23 |
| deferasirox tab for oral susp 125 mg, 250 mg, 500 mg (EXJADE).....                                            | 40 | diazoxide susp 50 mg/ml (Proglycem).....                                                                        | 11 |
| deferasirox tab 180 mg.....                                                                                   | 40 | diclofenac potassium tab 50 mg (Cataflam).....                                                                  | 29 |
| deferasirox tab 90 mg, 360 mg (Jadenu).....                                                                   | 40 | diclofenac sodium (actinic keratoses) gel 3% (Solaraze).....                                                    | 39 |
| DELSTRIGO.....                                                                                                | 3  | diclofenac sodium ophth soln 0.1%.....                                                                          | 36 |
| demeclocycline hcl tab 150 mg, 300 mg.....                                                                    | 1  | diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg.....                                                  | 29 |
| DENTAGEL.....                                                                                                 | 36 | dicloxacin sodium cap 250 mg, 500 mg.....                                                                       | 1  |
| DENTA 5000 PLUS.....                                                                                          | 36 | dicyclomine hcl cap 10 mg (Bentyl).....                                                                         | 21 |
| DESCOVY.....                                                                                                  | 3  | dicyclomine hcl oral soln 10 mg/5ml.....                                                                        | 21 |
| desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg (Norpramin).....                               | 24 | dicyclomine hcl tab 20 mg (Bentyl).....                                                                         | 21 |
| DESMOPRESSIN ACETATE.....                                                                                     | 14 | DIFICID.....                                                                                                    | 1  |
| desmopressin acetate inj 4 mcg/ml (Ddvp).....                                                                 | 14 | digoxin oral soln 0.05 mg/ml (Digoxin).....                                                                     | 18 |
| desmopressin acetate nasal spray soln 0.01% (refrigerated).....                                               | 14 | digoxin tab 125 mcg (0.125 mg), 250 mcg (0.25 mg) (Lanoxin).....                                                | 18 |
| desmopressin acetate preservative free (pf) inj 4 mcg/ml (Ddvp).....                                          | 14 | dihydroergotamine mesylate inj 1 mg/ml (D.h.e. 45).....                                                         | 30 |
| desmopressin acetate tab 0.1 mg, 0.2 mg (Ddvp).....                                                           | 14 | dihydroergotamine mesylate nasal spray 4 mg/ml (Migranal).....                                                  | 30 |
| desogest-eth estrad & eth estrad tab 0.15-0.02/0.01 mg(21/5) (Mircette).....                                  | 10 | DILANTIN.....                                                                                                   | 31 |
| desogestrel & ethinyl estradiol tab 0.15 mg-30 mcg (Desogen).....                                             | 10 | DILANTIN-125.....                                                                                               | 31 |
| desonide cream 0.05% (Desowen).....                                                                           | 38 | diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg.....                                                           | 16 |
| desonide oint 0.05% (Desowen).....                                                                            | 38 | diltiazem hcl coated beads cap er 24hr 300 mg.....                                                              | 16 |
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| norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg (Ortho tri-cyclen).....        | 10 | OMVOH.....                                                                                          | 22 |
| norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg (Ortho tri-cyclen lo).....     | 10 | ONDANSETRON HCL.....                                                                                | 21 |
| norgestrel & ethinyl estradiol tab 0.3 mg-30 mcg.....                                      | 10 | ondansetron hcl oral soln 4 mg/5ml (Zofran).....                                                    | 21 |
| nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg (Pamelor).....                            | 24 | ondansetron hcl tab 4 mg, 8 mg (Zofran).....                                                        | 21 |
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| phytonadione inj 1 mg/0.5ml (2 mg/ml), 10 mg/ml.....                                         | 32 | prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg.....                                     | 9  |
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| <b>primidone tab 50 mg, 250 mg (Mysoline).....</b>                                                             | <b>31</b> |
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| <b>progesterone cap 100 mg, 200 mg (Prometrium).....</b>                                                       | <b>10</b> |
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