



# Health Ins. Market Individual Small Group 4 T Formulary

April 2025 Plan Year  
(Updated April 2025)

The formulary is regularly updated. Please visit [bcbsnd.com](http://bcbsnd.com) or Prime Therapeutics website at [www.MyPrime.com](http://www.MyPrime.com) for the most up-to-date information.

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## Introduction

The Blue Cross Blue Shield of North Dakota (BCBSND) BlueValue formulary contains covered drugs for a broad range of diseases.

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 (non-preferred) drug. Some generic products have no reference brand.

Brand prescription drugs are shown in capital letters followed by the generic name.

The BCBSND BlueValue 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).

To save the most money on prescription drugs, take this formulary with you each time you visit your provider. Consider asking your provider to prescribe generic and formulary drugs, 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 provider in accordance with the patient/provider relationship.

The current version of this formulary is available at the BCBSND website at **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.

Please refer to your benefit materials for coverage details and the plan website for current information as this formulary list will be reviewed periodically and is subject to change.

## How formulary drugs are selected

Formulary drugs are selected based on the recommendations of a committee made up of physicians and pharmacists from throughout the country. The committee, which includes at least one representative from your health plan, reviews drugs regulated by the U.S. Food and Drug Administration (FDA).

Drugs that are newly approved by the FDA as well as those that have been on the market for some time are considered. Newly marketed prescription drugs will not be covered until the Committee has had an opportunity to review the drug to determine whether the drug will be covered and, if so, which tier will apply. Drugs are selected based on safety, efficacy, cost and how they compare to other drugs currently on the list.

## Coverage considerations

Most prescription drug benefit plans provide coverage for up to a 90-day supply of medication, with some exceptions. Some plans may exclude coverage for certain agents or drug categories, like those used for sexual dysfunction (example: Viagra) or infertility (example: Follistim AQ). You should refer to your benefit plan booklet for details about your particular benefits.

## Tiers

This prescription benefit is multi-tiered, placing prescription drugs into one of four copay/coinsurance levels:

- Tier 1 – Generic
- Tier 2 – Preferred Brand
- Tier 3 – Non-preferred Brand
- Tier 4 – Specialty

Note: If a drug displays an “A” in the Drug Tier column, this indicates the drug may only be covered if a member meets the criteria for \$0 copay under the Affordable Care Act.

## Affordable Care Act

Drugs marked in the ACA column are covered at \$0 cost share when meeting the conditions outlined under the Affordable Care Act. Examples of categories of drugs that may be subject to limited or \$0 cost share include aspirin, breast cancer preventive, fluoride supplements, folic acid supplements, gonorrhea prophylaxis (newborn), iron supplements, tobacco cessation, vaccines, vitamin D supplements, HIV Pre-exposure prophylaxis (PrEP), and some contraceptive drugs and devices. If you do not find the drug you are searching for, consult or contact BCBSND to find out if the drug is available over the counter or is covered under your medical benefit.

## 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.

## Limited Distribution

Drugs marked as “Limited Distribution” have restrictions on where you may fill them, as only a limited number of pharmacies may have access to them. This may include requiring the use of a designated pharmacy to fill a prescription.

## Step Therapy

Your benefit plan may include a step therapy program. This means you may need to try another proven, cost-effective medication before coverage may be available for the drug included in the program. Many brand drugs have less-expensive generic or brand alternatives that might be an option for you. If a step therapy is required for a medication listed in this document, it will be noted next to the medication with a dot under the Step Therapy column.

## Prior Approval

Your benefit plan may require prior approval for certain drugs that are high-cost or have the potential for misuse. This means that your doctor will need to submit a prior approval request for coverage of these medications, and the request will need to be approved, before the medication will be covered under your plan. If a prior approval is required for a medication listed in this document, it will be noted next to the medication with a dot under the Prior Approval column.

## Dispensing Limits

Drug dispensing limits help encourage medication use as intended by the FDA. Dispensing limits are placed on medications in certain drug categories. For the medications listed in this document, if a dispensing limit applies, it will be noted next to the medication with a dot under the Dispensing Limits column.

Limits may include: quantity of covered medication per prescription and/or quantity of covered medication in a given time period. If your doctor prescribes a greater quantity of medication than what the dispensing limit allows, you can still get the medication. However, you will be responsible for the full cost of the prescription beyond what your coverage allows.

## Providers

Use of some products may be approved only after certain criteria are met. If prior approval is not obtained, benefits may be denied. A provider (or clinic personnel) should submit a written request for prior approval consideration.

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 prior authorization request form.

Products in certain drug categories may have a Step Therapy program to encourage utilizing the most cost-effective medication. This program requires the previous use of one or more drugs before coverage of a different drug is provided. Requests for medication that require a step therapy should be submitted on the Step Therapy forms available.

## 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



In accordance with federal regulations, Blue Cross Blue Shield of North Dakota is required to provide you the following disclosure:

Blue Cross Blue Shield of North Dakota complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex. Blue Cross Blue Shield of North Dakota does not exclude people or treat them differently because of race, color, national origin, age, disability, gender identity, sexual orientation or sex.

Blue Cross Blue Shield of North Dakota:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, please call Member Services at 1-844-363-8457 (toll-free) or through the North Dakota Relay at 1-800-366-6888 or 711.

If you believe that Blue Cross Blue Shield of North Dakota has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, gender identity, sexual orientation or sex, you can file a grievance with:

Civil Rights Coordinator

4510 13th Ave S

Fargo, ND 58121

701-297-1638 or North Dakota Relay at 800-366-6888 or 711

701-282-1804 (fax)

[CivilRightsCoordinator@bcbsnd.com](mailto:CivilRightsCoordinator@bcbsnd.com) (email) (Communication by unencrypted email presents a risk.)

You can file a grievance in person or by mail, fax, or email within 180 days of the date of the alleged discrimination. Grievance forms are available at <http://www.bcbsnd.com/report> or by calling 1-844-363-8457. If you need help filing a grievance, the Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue SW.

Room 509F, HHH Building

Washington, DC 20201

800-368-1019 or 800-537-7697 (TDD)

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>

### **Español (Spanish)**

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-844-363-8457 (TTY: 1-800-366-6888 o 711).

### **Deutsch (German)**

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-844-363-8457 (TTY: 1-800-366-6888 oder 711).

## 中文 (Chinese)

注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-844-363-8457 (TTY: 1-800-366-6888 或 711)。

## Oroomiffa (Oromo)

XIYYEEFFANNAA: Afaan dubbattu Oroomiffa, tajaajila gargaarsa afaanii, kanfaltiidhaan ala, ni argama. Bilbilaa 1-844-363-8457 (TTY: 1-800-366-6888 ykn 711).

## Tiếng Việt (Vietnamese)

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số 1-844-363-8457 (TTY: 1-800-366-6888 hoặc 711).

## Ikirundi (Bantu – Kirundi)

ICITONDERWA: Nimba uvuga Ikirundi, uzohabwa serivisi zo gufasha mu ndimi, ku buntu. Woterefona 1-844-363-8457 (TTY: 1-800-366-6888 canke 711).

## العربية (Arabic)

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم 1-844-363-8457 (رقم هاتف الصم والبكم: 1-800-366-6888 أو 711).

## Kiswahili (Swahili)

KUMBUKA: Ikiwa unazungumza Kiswahili, unaweza kupata, huduma za lugha, bila malipo. Piga simu 1-844-363-8457 (TTY: 1-800-366-6888 au 711).

## Русский (Russian)

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-844-363-8457 (телетайп: 1-800-366-6888 или 711).

## 日本語 (Japanese)

注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。1-844-363-8457 (TTY: 1-800-366-6888 または 711) まで、お電話にてご連絡ください。

## नेपाली (Nepali)

ध्यान दिनुहोस्: तपाईंले नेपाली बोल्नुहुन्छ भने तपाईंको निम्ति भाषा सहायता सेवाहरू निःशुल्क रूपमा उपलब्ध छ। फोन गर्नुहोस् 1-844-363-8457 (टिटिवाइ: 1-800-366-6888 वा 711)।

## Français (French)

ATTENTION : Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-844-363-8457 (ATS : 1-800-366-6888 ou 711).

## 한국어 (Korean)

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 1-844-363-8457 (TTY: 1-800-366-6888 또는 711)번으로 전화해 주십시오.

## Tagalog (Tagalog – Filipino)

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-844-363-8457 (TTY: 1-800-366-6888 o 711).

## Norsk (Norwegian)

MERK: Hvis du snakker norsk, er gratis språkassistanstjenester tilgjengelige for deg. Ring 1-844-363-8457 (TTY: 1-800-366-6888 eller 711).

## Diné Bizaad (Navajo)

Díí baa akó nínízin: Díí saad bee yáníłti'go Diné Bizaad, saad bee áká'ánída'áwo'déé', t'áá jii'eh, éí ná hóló, kojí' hódííłnih 1-844-363-8457 (TTY: 1-800-366-6888 éí doodagó 711.)

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>ANTI-INFECTIVE AGENTS</b>							
<b>PENICILLINS</b>							
AMOXICILLIN amoxicillin (trihydrate) chew tab 125 mg, 250 mg	3						
<b>amoxicillin (trihydrate) cap 250 mg, 500 mg</b>	1						
<b>amoxicillin (trihydrate) for susp 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml</b>	1						
<b>amoxicillin (trihydrate) tab 500 mg, 875 mg</b>	1						
<b>amoxicillin &amp; k clavulanate for susp 200-28.5 mg/5ml, 400-57 mg/5ml</b>	1						
<b>amoxicillin &amp; k clavulanate for susp 250-62.5 mg/5ml Augmentin</b>	1						
<b>amoxicillin &amp; k clavulanate for susp 600-42.9 mg/5ml Augmentin es-600</b>	1						
<b>amoxicillin &amp; k clavulanate tab 250-125 mg</b>	1						
<b>amoxicillin &amp; k clavulanate tab 500-125 mg, 875-125 mg Augmentin</b>	1						
AMOXICILLIN/CLAVULANATE P amoxicillin & k clavulanate chew tab 400-57 mg	3						
AMOXICILLIN/CLAVULANATE P amoxicillin & k clavulanate tab er 12hr 1000-62.5 mg	3						
<b>ampicillin cap 500 mg</b>	1						
AUGMENTIN amoxicillin & k clavulanate for susp 125-31.25 mg/5ml	3						
<b>dicloxacillin sodium cap 250 mg, 500 mg</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
PENICILLIN V POTASSIUM penicillin v potassium for soln 125 mg/5ml, 250 mg/5ml	3						
<b>penicillin v potassium tab 250 mg, 500 mg</b>	1						
<b>CEPHALOSPORINS</b>							
CEFACLOR cefaclor cap 250 mg, 500 mg	3						
<b>cefadroxil cap 500 mg</b>	1						
<b>cefadroxil for susp 250 mg/5ml, 500 mg/5ml</b>	1						
<b>cefdinir cap 300 mg</b>	1						
<b>cefdinir for susp 125 mg/5ml, 250 mg/5ml</b>	1						
<b>cefixime for susp 100 mg/5ml, 200 mg/5ml Suprax</b>	1						
<b>cefepodoxime proxetil for susp 50 mg/5ml, 100 mg/5ml</b>	1						
<b>cefepodoxime proxetil tab 100 mg, 200 mg</b>	1						
<b>cefprozil for susp 125 mg/5ml, 250 mg/5ml</b>	1						
<b>cefprozil tab 250 mg, 500 mg</b>	1						
<b>cefuroxime axetil tab 250 mg, 500 mg Ceftin</b>	1						
<b>cephalexin cap 250 mg, 500 mg, 750 mg Keflex</b>	1						
<b>cephalexin for susp 125 mg/5ml, 250 mg/5ml</b>	1						
<b>MACROLIDES</b>							
<b>azithromycin for susp 100 mg/5ml, 200 mg/5ml Zithromax</b>	1						
<b>azithromycin tab 250 mg, 500 mg, 600 mg Zithromax</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CLARITHROMYCIN clarithromy for susp 125 mg/5ml, 250 mg/5ml	3						
<b>clarithromycin tab er 24hr 500 mg</b>	1						
<b>clarithromycin tab 250 mg, 500 mg</b> Biaxin	1						
DIFICID fidaxomicin for susp 40 mg/ml	2						
DIFICID fidaxomicin tab 200 mg	2						
ERYTHROMYCIN DR erythromycin w/ delayed release particles cap 250 mg	3						
<b>erythromycin ethylsuccinate for susp 200 mg/5ml</b> E.e.s. granules	1						
<b>erythromycin ethylsuccinate for susp 400 mg/5ml</b> Eryped 400	1						
<b>erythromycin ethylsuccinate tab 400 mg</b>	1						
<b>erythromycin tab delayed release 250 mg, 333 mg, 500 mg</b>	1						
<b>erythromycin tab 250 mg, 500 mg</b>	1						
<b>TETRACYCLINES</b>							
<b>demeclocycline hcl tab 150 mg, 300 mg</b>	1						
<b>doxycycline hyclate cap 50 mg</b>	1						
<b>doxycycline hyclate cap 100 mg</b> Vibramycin	1						
<b>doxycycline hyclate tab 20 mg, 100 mg</b>	1						
<b>doxycycline monohydrate cap 50 mg</b>	1						
<b>doxycycline monohydrate cap 100 mg</b> Monodox	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>doxycycline monohydrate for susp 25 mg/5ml</b> Vibramycin	1						
<b>doxycycline monohydrate tab 50 mg, 75 mg</b> Adoxa	1						
<b>doxycycline monohydrate tab 100 mg</b> Adoxa pak 1/100	1						
<b>doxycycline monohydrate tab 150 mg</b> Adoxa pak 1/150	1						
<b>minocycline hcl cap 50 mg, 75 mg, 100 mg</b> Minocin	1						
NUZYRA omadacycline tosylate tab 150 mg (base equivalent)	3						•
<b>tetracycline hcl cap 250 mg, 500 mg</b> Tetracycline hcl	1						
<b>FLUOROQUINOLONES</b>							
BAXDELA delafloxacin meglumine tab 450 mg (base equiv)	3						
CIPRO ciprofloxacin for oral susp 250 mg/5ml (5%) (5 gm/100ml)	3						
<b>ciprofloxacin hcl tab 250 mg (base equiv), 500 mg (base equiv)</b> Cipro	1						
<b>ciprofloxacin hcl tab 750 mg (base equiv)</b>	1						
<b>levofloxacin oral soln 25 mg/ml</b> Levaquin	1						
<b>levofloxacin tab 250 mg, 500 mg, 750 mg</b> Levaquin	1						
<b>moxifloxacin hcl tab 400 mg (base equiv)</b> Avelox	1						
OFLOXACIN ofloxacin tab 300 mg	3						
<b>ofloxacin tab 400 mg</b>	1						
<b>AMINOGLYCOSIDES</b>							
HUMATIN paromomycin sulfate cap 250 mg	2						•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
neomycin sulfate tab 500 mg	1						
tobramycin nebu soln 300 mg/5ml Tobi	4				•		
<b>SULFONAMIDES</b>							
sulfadiazine tab 500 mg	1						
<b>ANTIMYCOBACTERIAL AGENTS</b>							
cycloserine cap 250 mg	1						
ethambutol hcl tab 100 mg, 400 mg Myambutol	1						
isoniazid syrup 50 mg/5ml	1						
isoniazid tab 100 mg, 300 mg	1						
PRETOMANID pretomanid tab 200 mg	3						•
PRIFTIN rifapentine tab 150 mg	2						
pyrazinamide tab 500 mg	1						
rifabutin cap 150 mg Mycobutin	1						
rifampin cap 150 mg, 300 mg Rifadin	1						
SIRTURO bedaquiline fumarate tab 20 mg (base equiv), 100 mg (base equiv)	4				•		•
TRECTOR ethionamide tab 250 mg	3						
<b>ANTIFUNGALS</b>							
CRESEMBA isavuconazonium sulfate cap 74.5 mg, 186 mg	3	•					
fluconazole for susp 10 mg/ ml, 40 mg/ml Diflucan	1						
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mg Diflucan	1						
flucytosine cap 250 mg, 500 mg Ancobon	1						
griseofulvin microsize susp 125 mg/5ml	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
griseofulvin microsize tab 500 mg Grifulvin v	1						
griseofulvin ultramicrosize tab 125 mg, 250 mg Gris- peg	1						
itraconazole cap 100 mg Sporanox	1						
itraconazole oral soln 10 mg/ ml Sporanox	1						
ketoconazole tab 200 mg	1						
NOXAFIL posaconazole for delayed release susp packet 300 mg	2	•					
nystatin tab 500000 unit	1						
posaconazole susp 40 mg/ ml Noxafil	1	•					
posaconazole tab delayed release 100 mg Noxafil	1	•					
terbinafine hcl tab 250 mg Lamisil	1						
voriconazole for susp 40 mg/ml Vfend	1	•					
voriconazole tab 50 mg, 200 mg Vfend	1	•					
<b>ANTIVIRALS</b>							
abacavir sulfate soln 20 mg/ ml (base equiv) Ziagen	1						
abacavir sulfate tab 300 mg (base equiv) Ziagen	1						
abacavir sulfate-lamivudine tab 600-300 mg Epzicom	1						
acyclovir cap 200 mg Zovirax	1						
acyclovir susp 200 mg/5ml Zovirax	1						
acyclovir tab 400 mg, 800 mg Zovirax	1						
adefovir dipivoxil tab 10 mg Hepsera	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
APRETUDE cabotegravir im extended release susp 600 mg/3ml	2					•	•
APTIVUS tipranavir cap 250 mg	3						
<b>atazanavir sulfate cap 150 mg (base equiv), 200 mg (base equiv), 300 mg (base equiv)</b> Reyataz	1						
BARACLUDGE entecavir oral soln 0.05 mg/ml	2						
BIKTARVY bictegravir-emtricitabine-tenofovir af tab 30-120-15 mg, 50-200-25 mg	2						
CIMDUO lamivudine-tenofovir disoproxil fumarate tab 300-300 mg	2						
COMPLERA emtricitabine- rilpivirine-tenofovir df tab 200-25-300 mg	2						
<b>darunavir tab 600 mg, 800 mg</b> Prezista	1						
DELSTRIGO doravirine-lamivudine-tenofovir df tab 100-300-300 mg	2						
DESCOVY emtricitabine-tenofovir alafenamide fumarate tab 120-15 mg	2						
DESCOVY emtricitabine-tenofovir alafenamide fumarate tab 200-25 mg	2					•	
DOVATO dolutegravir sodium-lamivudine tab 50-300 mg (base eq)	2						
EDURANT rilpivirine hcl tab 25 mg (base equivalent)	3						
<b>efavirenz tab 600 mg</b> Sustiva	1						
<b>efavirenz-emtricitabine-tenofovir df tab 600-200-300 mg</b> Atripla	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>efavirenz-lamivudine-tenofovir df tab 400-300-300 mg</b> Symfi lo	1						
<b>efavirenz-lamivudine-tenofovir df tab 600-300-300 mg</b> Symfi	1						
<b>emtricitabine caps 200 mg</b> Emtriva	1						
<b>emtricitabine-tenofovir disoproxil fumarate tab 100-150 mg, 133-200 mg, 167-250 mg</b> Truvada	1						
<b>emtricitabine-tenofovir disoproxil fumarate tab 200-300 mg</b> Truvada	1					•	
EMTRIVA emtricitabine soln 10 mg/ml	3						
<b>entecavir tab 0.5 mg, 1 mg</b> Baraclude	1						
EPCLUSA sofosbuvir-velpatasvir pellet pack 150-37.5 mg, 200-50 mg	4	•		•	•		
EPCLUSA sofosbuvir-velpatasvir tab 200-50 mg	4	•		•	•		
<b>etravirine tab 100 mg, 200 mg</b> Intelence	1						
EVOTAZ atazanavir sulfate-cobicistat tab 300-150 mg (base equiv)	2						
<b>famciclovir tab 125 mg, 250 mg, 500 mg</b> Famvir	1						
<b>fosamprenavir calcium tab 700 mg (base equiv)</b> Lexiva	1						
FUZEON enfuvirtide for inj 90 mg	4					•	
GENVOYA elvitegrav-cobic-emtricitab-tenofov af tab 150-150-200-10 mg	2						
HARVONI ledipasvir-sofosbuvir pellet pack 33.75-150 mg, 45-200 mg	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
HARVONI ledipasvir-sofosbuvir tab 45-200 mg	4	•		•	•		
INTELENCE etravirine tab 25 mg	2						
ISENTRESS raltegravir potassium chew tab 25 mg (base equiv), 100 mg (base equiv)	2						
ISENTRESS raltegravir potassium packet for susp 100 mg (base equiv)	2						
ISENTRESS raltegravir potassium tab 400 mg (base equiv)	2						
ISENTRESS HD raltegravir potassium tab 600 mg (base equiv)	2						
JULUCA dolutegravir sodium-rilpivirine hcl tab 50-25 mg (base eq)	2						
LAGEVRIO molnupiravir cap 200 mg	2			•			
lamivudine oral soln 10 mg/ml EpiVir	1						
lamivudine tab 100 mg (hbv) EpiVir hbv	1						
lamivudine tab 150 mg, 300 mg EpiVir	1						
lamivudine-zidovudine tab 150-300 mg Combivir	1						
LEDIPASVIR/SOFOSBUVIR ledipasvir-sofosbuvir tab 90-400 mg	3	•		•	•		
LIVTENCITY maribavir tab 200 mg	4				•		•
lopinavir-ritonavir soln 400-100 mg/5ml (80-20 mg/ml) Kaletra	1						
lopinavir-ritonavir tab 100-25 mg, 200-50 mg Kaletra	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
maraviroc tab 150 mg, 300 mg Selzentry	1						
MAVYRET glecaprevir-pibrentasvir pellet pack 50-20 mg	4	•		•	•		
MAVYRET glecaprevir-pibrentasvir tab 100-40 mg	4	•		•	•		
NEVIRAPINE nevirapine susp 50 mg/5ml	3						
nevirapine tab er 24hr 400 mg Viramune xr	1						
nevirapine tab 200 mg Viramune	1						
NORVIR ritonavir powder packet 100 mg	3						
ODEFSEY emtricitabine-rilpivirine-tenofovir af tab 200-25-25 mg	2						
oseltamivir phosphate cap 30 mg (base equiv), 45 mg (base equiv), 75 mg (base equiv) Tamiflu	1						
oseltamivir phosphate for susp 6 mg/ml (base equiv) Tamiflu	1						
PAXLOVID nirmatrelvir tab 10 x 150 mg & ritonavir tab 10 x 100 mg pak	2			•			
PAXLOVID nirmatrelvir tab 20 x 150 mg & ritonavir tab 10 x 100 mg pak	2			•			
PEGASYS peginterferon alfa-2a inj 180 mcg/ml	4				•		
PEGASYS peginterferon alfa-2a soln prefilled syr 180 mcg/0.5ml	4				•		
PREVYMIS letermovir pellet pack 20 mg, 120 mg	3						
PREVYMIS letermovir tab 240 mg, 480 mg	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
PREZCOBIX darunavir-cobicistat tab 800-150 mg	2						
PREZISTA darunavir oral susp 100 mg/ml	2						
PREZISTA darunavir tab 75 mg, 150 mg, 600 mg, 800 mg	2						
RELENZA DISKHALER zanamivir aerosol powder breath activated 5 mg/act	3						
REYATAZ atazanavir sulfate oral powder packet 50 mg (base equiv)	3						
RIBAVIRIN ribavirin cap 200 mg	4				•		
RIBAVIRIN ribavirin tab 200 mg	4				•		
ritonavir tab 100 mg Norvir	1						
RUKOBIA fostemsavir tromethamine tab er 12hr 600 mg	3						
SELZENTRY maraviroc oral soln 20 mg/ml	3						
SOFOSBUVIR/VELPATASVIR sofosbuvir-velpatasvir tab 400-100 mg	4	•		•	•		
SOVALDI sofosbuvir pellet pack 150 mg, 200 mg	4	•		•	•		
SOVALDI sofosbuvir tab 200 mg, 400 mg	4	•		•	•		
STRIBILD elvitegrav-cobic-emtricitab-tenofovd f tab 150-150-200-300 mg	2						
SUNLENCA lenacapavir sodium tab therapy pack 4 x 300 mg, 5 x 300 mg	4				•		•
SYMTUZA darunavir-cobic-emtricitab-tenofov af tab 800-150-200-10 mg	2						
tenofovir disoproxil fumarate tab 300 mg Viread	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
TIVICAY dolutegravir sodium tab 50 mg (base equiv)	2						
TIVICAY PD dolutegravir sodium tab for oral susp 5 mg (base equiv)	2						
TRIUMEQ abacavir-dolutegravir-lamivudine tab 600-50-300 mg	2						
TRIUMEQ PD abacavir-dolutegravir-lamivudine tab for oral sus 60-5-30 mg	2						
TYBOST cobicistat tab 150 mg	3						
valacyclovir hcl tab 500 mg, 1 gm Valtrex	1						
valganciclovir hcl for soln 50 mg/ml (base equiv) Valcyte	1						
valganciclovir hcl tab 450 mg (base equivalent) Valcyte	1						
VEMLIDY tenofovir alafenamide fumarate tab 25 mg	3						
VIRACEPT nelfinavir mesylate tab 250 mg, 625 mg	3						
VIREAD tenofovir disoproxil fumarate oral powder 40 mg/gm	2						
VIREAD tenofovir disoproxil fumarate tab 150 mg, 200 mg, 250 mg	2						
VOSEVI sofosbuvir-velpatasvir-voxilaprevir tab 400-100-100 mg	4	•		•	•		
XOFLUZA baloxavir marboxil tab therapy pack 1 x 40 mg (40 mg dose), 1 x 80 mg (80 mg dose)	3						
zidovudine cap 100 mg Retrovir	1						
zidovudine syrup 10 mg/ml Retrovir	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
zidovudine tab 300 mg	1						
<b>ANTIMALARIALS</b>							
atovaquone-proguanil hcl tab 62.5-25 mg, 250-100 mg Malarone	1						
chloroquine phosphate tab 250 mg, 500 mg	1						
COARTEM artemether-lumefantrine tab 20-120 mg	3						
hydroxychloroquine sulfate tab 100 mg, 300 mg, 400 mg	1						
hydroxychloroquine sulfate tab 200 mg Plaquenil	1						
mefloquine hcl tab 250 mg	1						
primaquine phosphate tab 26.3 mg (15 mg base) Primaquine phosphate	1						
pyrimethamine tab 25 mg Daraprim	1						
quinine sulfate cap 324 mg Qualaquin	1						
<b>ANTHELMINTICS</b>							
albendazole tab 200 mg Albenza	1						
BENZNIDAZOLE benznidazole tab 12.5 mg, 100 mg	2						•
EMVERM mebendazole chew tab 100 mg	3						
ivermectin tab 3 mg Stromectol	1						
praziquantel tab 600 mg Biltricide	1						
<b>ANTI-INFECTIVE AGENTS - MISC.</b>							
atovaquone susp 750 mg/5ml Mepron	1						
CAYSTON aztreonam lysine for inhal soln 75 mg (base equivalent)	4				•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
clindamycin hcl cap 75 mg, 150 mg, 300 mg Cleocin	1						
clindamycin palmitate hcl for soln 75 mg/5ml (base equiv) Cleocin pediatric gr	1						
dapsone tab 25 mg, 100 mg	1						
fosfomycin tromethamine powd pack 3 gm (base equivalent) Monurol	1						
IMPAVIDO miltefosine cap 50 mg	2						
LAMPIT nifurtimox tab 30 mg, 120 mg	3						•
linezolid for susp 100 mg/5ml Zyvox	1						
linezolid tab 600 mg Zyvox	1						
methenamine hippurate tab 1 gm Hiprex	1						
metronidazole tab 250 mg, 500 mg Flagyl	1						
NITAZOXANIDE nitazoxanide tab 500 mg	2						
nitrofurantoin macrocrystalline cap 50 mg, 100 mg Macrochantin	1						
nitrofurantoin monohydrate macrocrystalline cap 100 mg Macrobid	1						
nitrofurantoin susp 25 mg/5ml	1						
pentamidine isethionate for nebulization soln 300 mg Nebupent	1						
SIVEXTRO tedizolid phosphate tab 200 mg	3						
sulfamethoxazole-trimethoprim susp 200-40 mg/5ml	1						
sulfamethoxazole-trimethoprim tab 400-80 mg Bactrim	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>sulfamethoxazole-trimethoprim tab 800-160 mg</b> Bactrim ds	1						
<b>tinidazole tab 250 mg, 500 mg</b> Tindamax	1						
<b>trimethoprim tab 100 mg</b>	1						
<b>vancomycin hcl cap 125 mg (base equivalent), 250 mg (base equivalent)</b> Vancocin hcl	1						
<b>vancomycin hcl for oral soln 25 mg/ml (base equivalent), 50 mg/ml (base equivalent)</b> Firvanq	1						
XIFAXAN rifaximin tab 200 mg	3						
XIFAXAN rifaximin tab 550 mg	2						
<b>BIOLOGICALS</b>							
<b>VACCINES</b>							
ABRYSVO rsv pre-fusion f a&b vac recomb for im soln 120 mcg/0.5ml	2						
ACTHIB haemophilus b polysaccharide conjugate vaccine for inj	2						
AFLURIA 2024-2025 influenza virus vaccine split im susp	2						
AFLURIA 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	2						
AREXVY rsvpref3 vaccine recomb adjuvanted for im susp 120 mcg/0.5ml	2						
BEXSERO meningococcal vac b (recomb omv adjuv) inj prefilled syringe	2						
CAPVAXIVE pneumococcal 21-valent conjugate vaccine soln pref syr 0.5ml	2						
COMIRNATY 2024-25 covid-19 mrna vac tris-pfizer im susp pref syr 30 mcg/0.3ml	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ENGERIX-B hepatitis b vaccine (recombinant) susp pref syr 10 mcg/0.5ml, 20 mcg/ml	2						
ENGERIX-B hepatitis b vaccine (recombinant) susp 20 mcg/ml	2						
FLUAD 2024-2025 influenza vac type a&b surface ant adj susp pref syr 0.5 ml	2						
FLUARIX 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	2						
FLUBLOK 2024-2025 influenza virus vacc recombinant ha pf soln pref syr 0.5 ml	2						
FLUCELVAX 2024-2025 influenza virus vac tiss-cult subunit im susp	2						
FLUCELVAX 2024-2025 influenza virus vac tiss-cult subunit susp pref syr 0.5 ml	2						
FLULAVAL 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	2						
FLUMIST NASAL VACCINE 202 influenza virus vaccine live intranasal liquid	2						
FLUZONE HIGH-DOSE 2024-20 influenza virus vac split high-dose pf susp pref syr 0.5ml	2						
FLUZONE 2024-2025 influenza virus vaccine split im susp	2						
FLUZONE 2024-2025 influenza virus vaccine split pf susp pref syringe 0.5 ml	2						
GARDASIL 9 human papillomavirus (hvp) 9-valent recomb vac im susp	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
GARDASIL 9 human papillomavirus (hpv) 9-valent recomb vac susp pref syr	2						
HAVRIX hepatitis a vaccine inj susp 720 el unit/0.5ml, 1440 el unit/ml	2						
HEPLISAV-B hepatitis b vaccine recomb adjuvanted pref syr 20 mcg/0.5ml	2						
HIBERIX haemophilus b polysaccharide conjugate vac for inj 10 mcg	2						
IMOVAX RABIES (H.D.C.V.) rabies virus vaccine, hdc for inj susp	3						
IPOL INACTIVATED IPV poliovirus vaccine, ipv injection	2						
JYNNEOS smallpox & monkeypox vac, live, non-replicating inj 0.5 ml	2						
M-M-R II measles-mumps-rubella virus vaccines for inj soln	2						
MENQUADFI meningococcal (a, c, y, and w-135) tetanus conjugate vaccine	2						
MENVEO meningococcal (a, c, y, and w-135) oligo conj vac for inj	2						
MENVEO meningococcal (a, c, y, and w-135) oligo conj vac im soln	2						
MODERNA COVID-19 VACCINE covid-19 mrna vac 6mo-11yr-moderna im susp pfs 25 mcg/0.25ml	2						
MRESVIA rsv mrna pre-f vaccine im susp pref syr 50 mcg/0.5ml	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NOVAVAX COVID-19 VACCINE/ covid-19 subunit vacc-novavax im susp pref syr 5 mcg/0.5ml	2						
PEDVAX HIB haemophilus b polysaccharide conj vac im susp 7.5 mcg/0.5 ml	3						
PENBRAYA meningococcal acyw (tet conj)-mening b (rcmb) vacc for inj	2						
PFIZER-BIONTECH COVID-19 covid-19 mrna vac tris-s 5-11y-pfizer im susp 10 mcg/0.3ml	2						
PFIZER-BIONTECH COVID-19 covid-19 mrna vac tris-s 6mo-4y-pfizer im susp 3 mcg/0.3ml	2						
PNEUMOVAX 23 pneumococcal vaccine polyvalent soln pref syr 25 mcg/0.5ml	3						
PREVNAR 20 pneumococcal 20-valent conjugate vaccine sus pref syr 0.5 ml	2						
PRIORIX measles-mumps-rubella virus vaccines for subcutaneous susp	2						
PROQUAD measles-mumps-rubella-varicella virus vaccines for susp	3						
RABAVERT rabies vaccine, pcec for inj	3						
RECOMBIVAX HB hepatitis b vaccine (recombinant) susp pref syr 5 mcg/0.5ml, 10 mcg/ml	3						
RECOMBIVAX HB hepatitis b vaccine (recombinant) susp 5 mcg/0.5ml, 10 mcg/ml, 40 mcg/ml	3						
ROTARIX rotavirus vaccine, live oral susp	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ROTATEQ rotavirus vaccine, live oral pentavalent soln	3						
SHINGRIX zoster vac recombinant adjuvanted for im inj 50 mcg/0.5ml	2						
SPIKEVAX COVID-19 VACCINE covid-19 mrna vaccine-moderna im susp pref syr 50 mcg/0.5ml	2						
TRUMENBA meningococcal group b vac (recomb) im susp prefilled syr	3						
TWINRIX hep a-hep b vaccine susp pref syr 720-20 elu-mcg/ml	3						
VAQTA hepatitis a vaccine inj susp 25 unit/0.5ml, 50 unit/ml	3						
VARIVAX varicella virus vac live for inj 1350 pfu/0.5ml	3						
VAXNEUVANCE pneumococcal 15-valent conjugate vaccine sus pref syr 0.5 ml	2						
<b>TOXOIDS</b>							
ADACEL tet tox-diph-acell pertuss ad inj 5-2-15.5 lf-lf-mcg/0.5ml	2						
BOOSTRIX tet-diph-acell pertuss ad pref syr 5-2.5-18.5 lf-mcg/0.5ml	2						
DAPTACEL diph, acellular pert & tet tox inj 15 lf-23 mcg-5 lf/0.5ml	2						
INFANRIX diph, acellular pert & tet tox inj 25 lf-58 mcg-10 lf/0.5ml	2						
KINRIX diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	2						
PEDIARIX diph-tet tox-acell pert-hep b-polio ipv vac susp pref syr	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
PENTACEL diph-ac per-tet tox ad-poliov-haemoph b poly vac for im susp	3						
QUADRACEL diph-tetanus tox ad-acell pert & polio virus, ipv vac inj	3						
QUADRACEL diph-tetanus-acell pert-polio, ipv vacc susp pref syr 0.5 ml	3						
TDVAX tetanus-diphtheria toxoids (td) inj 2-2 lf/0.5ml	3						
TENIVAC tetanus-diphtheria toxoids (td) inj 5-2 lfu	3						
VAXELIS diph-tet tox-ac pert ad-polio ipv-hib-hep b rec susp pre syr	2						
VAXELIS diph-tet tox-ac pert ad-polio ipv-hib-hepatitis b recmb susp	2						
<b>BIOLOGICALS MISC</b>							
GRASTEK timothy grass pollen allergen ext sl tab 2800 bau	3						
ODACTRA dust mite mixed ext sl tab 12 sq-hdm	3						
RAGWITEK short ragweed pollen allergen extract sl tab 12 amb a 1-u	3						
<b>ANTINEOPLASTIC AGENTS</b>							
<b>ANTINEOPLASTICS</b>							
abiraterone acetate tab 250 mg, 500 mg Zytiga	4	•		•	•		
ACTIMMUNE interferon gamma-1b inj 100 mcg/0.5ml (2000000 unit/0.5ml)	4				•		•
AKEEGA niraparib tosylate-abiraterone acetate tab 50-500 mg, 100-500 mg	4	•		•	•		•
ALECENSA alectinib hcl cap 150 mg (base equivalent)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ALUNBRIG brigatinib tab initiation therapy pack 90 mg & 180 mg	4	•		•	•		•
ALUNBRIG brigatinib tab 30 mg, 90 mg, 180 mg	4	•		•	•		•
<b>anastrozole tab</b> <b>1 mg</b> Arimidex	1					•	
AUGTYRO repotrectinib cap 40 mg, 160 mg	4	•		•	•		
AYVAKIT avapritinib tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg	4	•		•	•		•
BALVERSA erdafitinib tab 3 mg, 4 mg, 5 mg	4	•		•	•		•
BESREMI ropeginterferon alfa-2b-njft soln prefilled syr 500 mcg/ml	4	•		•	•		•
<b>bexarotene cap</b> <b>75 mg</b> Targretin	4	•			•		
<b>bicalutamide tab</b> <b>50 mg</b> Casodex	1						
BOSULIF bosutinib cap 50 mg, 100 mg	4	•		•	•		•
BOSULIF bosutinib tab 100 mg, 400 mg, 500 mg	4	•		•	•		•
BRAFTOVI encorafenib cap 75 mg	4	•		•	•		•
BRUKINSA zanubrutinib cap 80 mg	4	•		•	•		•
CABOMETYX cabozantinib s-malate tab 20 mg (base equivalent), 40 mg (base equivalent), 60 mg (base equivalent)	4	•		•	•		•
CALQUENCE acalabrutinib maleate tab 100 mg	4	•		•	•		•
<b>capecitabine tab 150 mg, 500 mg</b> Xeloda	4	•			•		
CAPRELSA vandetanib tab 100 mg, 300 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
COMETRIQ cabozantinib s-mal cap 1 x 80 mg & 1 x 20 mg (100 dose) kit	4	•		•	•		•
COMETRIQ cabozantinib s-mal cap 1 x 80 mg & 3 x 20 mg (140 dose) kit	4	•		•	•		•
COMETRIQ cabozantinib s-malate cap 3 x 20 mg (60 mg dose) kit	4	•		•	•		•
COPIKTRA duvelisib cap 15 mg, 25 mg	4	•		•	•		•
COTELLIC cobimetinib fumarate tab 20 mg (base equivalent)	4	•		•	•		•
CYCLOPHOSPHAMIDE cyclophosphamide tab 25 mg, 50 mg	2						
<b>cyclophosphamide cap 25 mg, 50 mg</b> Cyclophosphamide	1						
<b>dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg</b> Sprycel	4	•		•	•		
DAURISMO glasdegib maleate tab 25 mg (base equivalent), 100 mg (base equivalent)	4	•		•	•		•
ELIGARD leuprolide acetate (3 month) for subcutaneous inj kit 22.5mg	4				•		
ELIGARD leuprolide acetate (4 month) for subcutaneous inj kit 30 mg	4				•		
ELIGARD leuprolide acetate (6 month) for subcutaneous inj kit 45 mg	4				•		
ELIGARD leuprolide acetate for subcutaneous inj kit 7.5 mg	4				•		
ERIVEDGE vismodegib cap 150 mg	4	•		•	•		•
ERLEADA apalutamide tab 60 mg, 240 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>erlotinib hcl tab 25 mg (base equivalent), 100 mg (base equivalent), 150 mg (base equivalent)</b> Tarceva	4	•		•	•		
ETOPOSIDE etoposide cap 50 mg	4				•		
<b>everolimus tab for oral susp 2 mg, 3 mg, 5 mg</b> Afinitor disperz	4	•		•	•		
<b>everolimus tab 2.5 mg, 5 mg, 7.5 mg, 10 mg</b> Afinitor	4	•		•	•		
<b>exemestane tab 25 mg</b> Aromasin	1						
FOTIVDA tivozanib hcl cap 0.89 mg (base equivalent), 1.34 mg (base equivalent)	4	•		•	•		•
FRUZAQLA fruquintinib cap 1 mg, 5 mg	4	•		•	•		
GAVRETO pralsetinib cap 100 mg	4	•		•	•		•
<b>gefitinib tab 250 mg</b> Iressa	4	•		•	•		
GILOTRIF afatinib dimaleate tab 20 mg (base equivalent), 30 mg (base equivalent), 40 mg (base equivalent)	4	•		•	•		•
GLEOSTINE lomustine cap 10 mg, 40 mg, 100 mg	4				•		
HYCAMTIN topotecan hcl cap 0.25 mg (base equiv), 1 mg (base equiv)	4	•			•		
<b>hydroxyurea cap 500 mg</b> Hydrea	1						
IBRANCE palbociclib cap 75 mg, 100 mg, 125 mg	4	•		•	•		•
IBRANCE palbociclib tab 75 mg, 100 mg, 125 mg	4	•		•	•		•
ICLUSIG ponatinib hcl tab 10 mg (base equiv), 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
IDHIFA enasidenib mesylate tab 50 mg (base equivalent), 100 mg (base equivalent)	4	•		•	•		•
<b>imatinib mesylate tab 100 mg (base equivalent), 400 mg (base equivalent)</b> Gleevec	4	•		•	•		
IMBRUVICA ibrutinib cap 70 mg, 140 mg	4	•		•	•		•
IMBRUVICA ibrutinib oral susp 70 mg/ml	4	•		•	•		•
IMBRUVICA ibrutinib tab 140 mg, 280 mg, 420 mg	4	•		•	•		•
INLYTA axitinib tab 1 mg, 5 mg	4	•		•	•		•
INQOVI decitabine-cedazuridine tab 35-100 mg	4	•		•	•		•
INREBIC fedratinib hcl cap 100 mg	4	•		•	•		•
IRESSA gefitinib tab 250 mg	4	•		•	•		•
IWILFIN eflornithine hcl tab 192 mg	4	•		•	•		
JAKAFI ruxolitinib phosphate tab 5 mg (base equivalent), 10 mg (base equivalent), 15 mg (base equivalent), 20 mg (base equivalent), 25 mg (base equivalent)	4	•		•	•		•
JAYPIRCA pirtobrutinib tab 50 mg, 100 mg	4	•		•	•		•
KISQALI ribociclib succinate tab pack 200 mg daily dose, 400 mg daily dose (200 mg tab), 600 mg daily dose (200 mg tab)	4	•		•	•		
KOSELUGO selumetinib sulfate cap 10 mg, 25 mg	4	•		•	•		•
KRAZATI adagrasib tab 200 mg	4	•		•	•		•
<b>lapatinib ditosylate tab 250 mg (base equiv)</b> Tykerb	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
LAZCLUZE lazertinib mesylate tab 80 mg, 240 mg	4	•		•	•		
LENVIMA 10 MG DAILY DOSE lenvatinib cap therapy pack 10 mg (10 mg daily dose)	4	•		•	•		•
LENVIMA 12MG DAILY DOSE lenvatinib cap therapy pack 3 x 4 mg (12 mg daily dose)	4	•		•	•		•
LENVIMA 14 MG DAILY DOSE lenvatinib cap therapy pack 10 & 4 mg (14 mg daily dose)	4	•		•	•		•
LENVIMA 18 MG DAILY DOSE lenvatinib cap ther pack 10 mg & 2 x 4 mg (18 mg daily dose)	4	•		•	•		•
LENVIMA 20 MG DAILY DOSE lenvatinib cap therapy pack 2 x 10 mg (20 mg daily dose)	4	•		•	•		•
LENVIMA 24 MG DAILY DOSE lenvatinib cap ther pack 2 x 10 mg & 4 mg (24 mg daily dose)	4	•		•	•		•
LENVIMA 4 MG DAILY DOSE lenvatinib cap therapy pack 4 mg (4 mg daily dose)	4	•		•	•		•
LENVIMA 8 MG DAILY DOSE lenvatinib cap therapy pack 2 x 4 mg (8 mg daily dose)	4	•		•	•		•
<b>letrozole tab 2.5 mg Femara</b>	1						
<b>leucovorin calcium tab 5 mg, 15 mg, 25 mg</b>	1						
LEUKERAN chlorambucil tab 2 mg	4				•		
LEUPROLIDE ACETATE leuprolide acetate (3 month) for inj 22.5 mg	4				•		
<b>leuprolide acetate inj kit 1 mg/0.2ml (5 mg/ml)</b>	4				•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
LONSURF trifluridine-tipiracil tab 15-6.14 mg, 20-8.19 mg	4	•		•	•		•
LORBRENA lorlatinib tab 25 mg, 100 mg	4	•		•	•		•
LUMAKRAS sotorasib tab 120 mg, 240 mg, 320 mg	4	•		•	•		•
LUPRON DEPOT (1-MONTH) leuprolide acetate for inj kit 3.75 mg, 7.5 mg	4				•		
LUPRON DEPOT (3-MONTH) leuprolide acetate (3 month) for inj kit 11.25 mg, 22.5 mg	4				•		
LUPRON DEPOT (4-MONTH) leuprolide acetate (4 month) for inj kit 30 mg	4				•		
LUPRON DEPOT (6-MONTH) leuprolide acetate (6 month) for inj kit 45 mg	4				•		
LYNPARZA olaparib tab 100 mg, 150 mg	4	•		•	•		•
LYSODREN mitotane tab 500 mg	4	•			•		•
LYTGOBI futibatinib tab therapy pack 4 mg (12 mg daily dose), 4 mg (16 mg daily dose), 4 mg (20 mg daily dose)	4	•		•	•		•
MATULANE procarbazine hcl cap 50 mg	4	•			•		•
<b>megestrol acetate susp 40 mg/ml Megace oral</b>	1						
<b>megestrol acetate tab 20 mg, 40 mg</b>	1						
MEKINIST trametinib dimethyl sulfoxide for soln 0.05 mg/ml (base eq)	4	•		•	•		
MEKINIST trametinib dimethyl sulfoxide tab 0.5 mg (base equivalent), 2 mg (base equivalent)	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
MEKTOVI binimetinib tab 15 mg	4	•		•	•		•
<b>mercaptapurine tab 50 mg</b>	1						
<b>mesna tab 400 mg</b> Mesnex	1						
MESNEX mesna tab 400 mg	2						
METHOTREXATE SODIUM methotrexate sodium inj 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml)	3						
<b>methotrexate sodium for inj 1 gm</b>	1						
<b>methotrexate sodium inj pf 50 mg/2ml (25 mg/ml), 250 mg/10ml (25 mg/ml), 1000 mg/40ml (25 mg/ml)</b>	1						
<b>methotrexate sodium tab 2.5 mg (base equiv)</b>	1						
MYLERAN busulfan tab 2 mg	4				•		
NERLYNX neratinib maleate tab 40 mg (base equivalent)	4	•		•	•		•
<b>nilutamide tab 150 mg</b> Nilandron	4				•		
NINLARO ixazomib citrate cap 2.3 mg (base equivalent), 3 mg (base equivalent), 4 mg (base equivalent)	4	•		•	•		•
NUBEQA darolutamide tab 300 mg	4	•		•	•		
ODOMZO sonidegib phosphate cap 200 mg (base equivalent)	4	•		•	•		•
OGSIVEO nirogacestat hydrobromide tab 50 mg, 100 mg, 150 mg	4	•		•	•		•
OJEMDA tovorafenib for oral susp 25 mg/ml	4	•		•	•		
OJEMDA tovorafenib tab 100 mg	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
OJJAARA momelotinib dihydrochloride tab 100 mg, 150 mg, 200 mg	4	•		•	•		•
ONUREG azacitidine tab 200 mg, 300 mg	4	•		•	•		
ORGOVYX relugolix tab 120 mg	4	•		•	•		•
ORSERDU elacestrant hydrochloride tab 86 mg, 345 mg	4	•		•	•		•
<b>pazopanib hcl tab 200 mg (base equiv)</b> Votrient	4	•		•	•		
PEMAZYRE pemigatinib tab 4.5 mg, 9 mg, 13.5 mg	4	•		•	•		•
PIQRAY 200MG DAILY DOSE apelisib tab therapy pack 200 mg daily dose	4	•		•	•		
PIQRAY 250MG DAILY DOSE apelisib tab pack 250 mg daily dose (200 mg & 50 mg tabs)	4	•		•	•		
PIQRAY 300MG DAILY DOSE apelisib tab pack 300 mg daily dose (2x150 mg tab)	4	•		•	•		
POMALYST pomalidomide cap 1 mg, 2 mg, 3 mg, 4 mg	4	•		•	•		•
PURIXAN mercaptopurine susp 2000 mg/100ml (20 mg/ml)	4				•		•
QINLOCK ripretinib tab 50 mg	4	•		•	•		•
RETEVMO selpercatinib tab 40 mg, 80 mg, 120 mg, 160 mg	4	•		•	•		•
REZLIDHIA olutasidenib cap 150 mg	4	•		•	•		•
ROZLYTREK entrectinib cap 100 mg, 200 mg	4	•		•	•		•
ROZLYTREK entrectinib pellet pack 50 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
RUBRACA rucaparib camsylate tab 200 mg (base equivalent), 250 mg (base equivalent), 300 mg (base equivalent)	4	•		•	•		•
RYDAPT midostaurin cap 25 mg	4	•		•	•		
SCEMBLIX asciminib hcl tab 20 mg, 40 mg, 100 mg	4	•		•	•		•
SOLTAMOX tamoxifen citrate oral soln 10 mg/5ml (base equivalent)	3						
<b>sorafenib tosylate tab 200 mg (base equivalent) Nexavar</b>	4	•		•	•		
SPRYCEL dasatinib tab 20 mg, 50 mg, 70 mg, 80 mg, 100 mg, 140 mg	4	•		•	•		
STIVARGA regorafenib tab 40 mg	4	•		•	•		•
<b>sunitinib malate cap 12.5 mg (base equivalent), 25 mg (base equivalent), 37.5 mg (base equivalent), 50 mg (base equivalent) Sutent</b>	4	•		•	•		
TABLOID thioguanine tab 40 mg	4				•		
TABRECTA capmatinib hcl tab 150 mg, 200 mg	4	•		•	•		
TAFINLAR dabrafenib mesylate cap 50 mg (base equivalent), 75 mg (base equivalent)	4	•		•	•		
TAFINLAR dabrafenib mesylate tab for oral susp 10 mg (base equiv)	4	•		•	•		
TAGRISSO osimertinib mesylate tab 40 mg (base equivalent), 80 mg (base equivalent)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
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)	4	•		•	•		•
<b>tamoxifen citrate tab 10 mg (base equivalent), 20 mg (base equivalent)</b>	1					•	
TASIGNA nilotinib hcl cap 50 mg (base equivalent), 150 mg (base equivalent), 200 mg (base equivalent)	4	•		•	•		
TAZVERIK tazemetostat hbr tab 200 mg	4	•		•	•		•
<b>temozolomide cap 5 mg, 20 mg, 100 mg, 140 mg, 180 mg, 250 mg Temodar</b>	4	•			•		
TEPMETKO tepotinib hcl tab 225 mg	4	•		•	•		•
TIBSOVO ivosidenib tab 250 mg	4	•		•	•		•
<b>toremifene citrate tab 60 mg (base equivalent) Fareston</b>	4				•		
<b>tretinoin cap 10 mg</b>	4	•			•		
TRUQAP capivasertib tab therapy pack 160 mg, 200 mg	4	•		•	•		•
TRUQAP capivasertib tab 200 mg	4	•		•	•		•
TUKYSA tucatinib tab 50 mg, 150 mg	4	•		•	•		•
TURALIO pexidartinib hcl cap 125 mg (base equivalent)	4	•		•	•		•
VANFLYTA quizartinib dihydrochloride tab 17.7 mg, 26.5 mg	4	•		•	•		•
VENCLEXTA venetoclax tab 10 mg, 50 mg, 100 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
VENCLEXTA STARTING PACK venetoclax tab therapy starter pack 10 & 50 & 100 mg	4	•		•	•		•
VERZENIO abemaciclib tab 50 mg, 100 mg, 150 mg, 200 mg	4	•		•	•		•
VITRAKVI larotrectinib sulfate cap 25 mg (base equivalent), 100 mg (base equivalent)	4	•		•	•		•
VITRAKVI larotrectinib sulfate oral soln 20 mg/ml (base equivalent)	4	•		•	•		•
VIZIMPRO dacomitinib tab 15 mg, 30 mg, 45 mg	4	•		•	•		•
VONJO pacritinib citrate cap 100 mg	4	•		•	•		•
VORANIGO vorasidenib tab 10 mg, 40 mg	4	•		•	•		•
VOTRIENT pazopanib hcl tab 200 mg (base equiv)	4	•		•	•		•
WELIREG belzutifan tab 40 mg	4	•		•	•		•
XALKORI crizotinib cap sprinkle 20 mg, 50 mg, 150 mg	4	•		•	•		•
XALKORI crizotinib cap 200 mg, 250 mg	4	•		•	•		•
XOSPATA gilteritinib fumarate tablet 40 mg (base equivalent)	4	•		•	•		•
XPOVIO selinexor tab therapy pack 40 mg (40 mg once weekly), 40 mg (40 mg twice weekly), 40 mg (80 mg once weekly), 50 mg (100 mg once weekly), 60 mg (60 mg once weekly)	4	•		•	•		•
XPOVIO 60 MG TWICE WEEKLY selinexor tab therapy pack 20 mg (60 mg twice weekly)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
XPOVIO 80 MG TWICE WEEKLY selinexor tab therapy pack 20 mg (80 mg twice weekly)	4	•		•	•		•
XTANDI enzalutamide cap 40 mg	4	•		•	•		•
XTANDI enzalutamide tab 40 mg, 80 mg	4	•		•	•		•
YONSA abiraterone acetate micronized tab 125 mg	4	•		•	•		•
ZEJULA niraparib tosylate tab 100 mg (base equivalent), 200 mg (base equivalent), 300 mg (base equivalent)	4	•		•	•		•
ZELBORAF vemurafenib tab 240 mg	4	•		•	•		•
ZOLINZA vorinostat cap 100 mg	4	•		•	•		•
ZYDELIG idelalisib tab 100 mg, 150 mg	4	•		•	•		•
ZYKADIA ceritinib tab 150 mg	4	•		•	•		•
<b>ENDOCRINE AND METABOLIC DRUGS</b>							
<b>CORTICOSTEROIDS</b>							
<b>budesonide delayed release particles cap 3 mg</b> Entocort ec	1						
DEXAMETHASONE dexametha soln 0.5 mg/5ml	3						
<b>dexamethasone elixir 0.5 mg/5ml</b>	1						
DEXAMETHASONE INTENSOL dexamethasone conc 1 mg/ml	3						
<b>dexamethasone tab 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg</b>	1						
<b>fludrocortisone acetate tab 0.1 mg</b>	1						
<b>hydrocortisone tab 5 mg, 10 mg, 20 mg</b> Cortef	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>methylprednisolone tab therapy pack 4 mg (21)</b> Medrol dosepak	1						
<b>methylprednisolone tab 4 mg, 8 mg, 16 mg, 32 mg</b> Medrol	1						
<b>prednisolone sod phosph oral soln 6.7 mg/5ml (5 mg/5ml base)</b> Pediapred	1						
<b>prednisolone sod phosphate oral soln 15 mg/5ml (base equiv)</b>	1						
<b>prednisolone sodium phosphate oral soln 25 mg/5ml (base eq)</b>	1						
<b>prednisolone soln 15 mg/5ml</b>	1						
<b>PREDNISON</b> prednisone oral soln 5 mg/5ml	2						
<b>prednisone tab therapy pack 5 mg (21), 5 mg (48), 10 mg (21), 10 mg (48)</b>	1						
<b>prednisone tab 1 mg, 2.5 mg, 5 mg, 10 mg, 20 mg, 50 mg</b>	1						
<b>ANDROGEN-ANABOLIC</b>							
<b>danazol cap 50 mg, 100 mg, 200 mg</b>	1						
<b>METHITEST</b> methyltestosterone oral tab 10 mg	3			•			
<b>testosterone cypionate im inj in oil 100 mg/ml, 200 mg/ml</b> Depo-testosterone	1			•			
<b>TESTOSTERONE ENANTHATE</b> testosterone enanthate im inj in oil 200 mg/ml	3			•			
<b>testosterone td gel 25 mg/2.5gm (1%), 50 mg/5gm (1%)</b> Androgel	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>testosterone td gel 12.5 mg/act (1%), 20.25 mg/act (1.62%)</b> Androgel pump	1			•			
<b>testosterone td soln 30 mg/act</b> Axiron	1			•			
<b>ESTROGENS</b>							
<b>ANGELIQ</b> drospirenone-estradiol tab 0.25-0.5 mg, 0.5-1 mg	3						
<b>BIJUVA</b> estradiol-progesterone cap 0.5-100 mg, 1-100 mg	3						
<b>CLIMARA PRO</b> estradiol-levonorgestrel td patch weekly 0.045-0.015 mg/day	2						
<b>COMBIPATCH</b> estradiol-norethindrone ace td pttw 0.05-0.14 mg/day, 0.05-0.25 mg/day	3						
<b>DEPO-ESTRADIOL</b> estradiol cypionate im in oil 5 mg/ml	3						
<b>DUAVEE</b> conjugated estrogens-bazedoxifene tab 0.45-20 mg	2						
<b>estradiol &amp; norethindrone acetate tab 0.5-0.1 mg, 1-0.5 mg</b> Activella	1						
<b>estradiol gel 0.06% (0.75 mg/1.25 gm metered-dose pump)</b> Estrogel	1						
<b>estradiol tab 0.5 mg, 1 mg, 2 mg</b> Estrace	1						
<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	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<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	1						
<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	1						
<b>estradiol valerate im in oil 10 mg/ml, 20 mg/ml, 40 mg/ml</b> Delestrogen	1						
EVAMIST estradiol transdermal spray 1.53 mg/spray	3						
MENEST esterified estrogens tab 0.3 mg, 0.625 mg, 1.25 mg, 2.5 mg	3						
MYFEMBREE relugolix-estradiol-norethindrone acetate tab 40-1-0.5 mg	2	•		•			
<b>norethindrone acetate-ethinyl estradiol tab 0.5 mg-2.5 mcg</b> Femhrt low dose	1						
<b>norethindrone acetate-ethinyl estradiol tab 1 mg-5 mcg</b>	1						
ORIAHNN elagolix-estradiol-noreth 300-1-0.5mg & elagolix 300mg cap pack	2	•		•			
PREMARIN estrogens, conjugated tab 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg	3						
PREMPHASE conj est 0.625(14)/conj est-medroxypro ac tab 0.625-5mg(14)	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
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	3						
<b>CONTRACEPTIVES</b>							
DEPO-SUBQ PROVERA 104 medroxyprogesterone acetate susp pref syr 104 mg/0.65ml	A					•	
<b>desogest-eth estrad &amp; eth estrad tab 0.15-0.02/0.01 mg(21/5)</b> Mirce	A					•	
<b>desogestrel &amp; ethinyl estradiol tab 0.15 mg-30 mcg</b> Desogen	A					•	
<b>drospirenone-ethinyl estrad-levomefolate tab 3-0.02-0.451 mg</b> Beyaz	A					•	
<b>drospirenone-ethinyl estradiol tab 3-0.02 mg</b> Yaz	A					•	
<b>drospirenone-ethinyl estradiol tab 3-0.03 mg</b> Yasmin 28	A					•	
DROSPIRENONE/ETHINYL ESTR drospirenone-ethinyl estrad-levomefolate tab 3-0.03-0.451 mg	A					•	
ELLA ulipristal acetate tab 30 mg	A					•	
<b>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-35 mcg</b>	A					•	
<b>ethynodiol diacetate &amp; ethinyl estradiol tab 1 mg-50 mcg</b> Zovia 1/50e	A					•	
<b>levonor-eth est tab 0.15-0.02/0.025/0.03 mg &amp; eth est 0.01 mg</b> Quartette	A					•	
<b>levonorg-eth est tab 0.1-0.02mg(84) &amp; eth est tab 0.01mg(7)</b> Loseasonique	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
levonorg-eth est tab 0.15-0.03mg(84) & eth est tab 0.01mg(7) Seasonique	A					•	
levonorgestrel & ethinyl estradiol (91-day) tab 0.15-0.03 mg	A					•	
levonorgestrel & ethinyl estradiol tab 0.1 mg-20 mcg, 0.15 mg-30 mcg	A					•	
levonorgestrel tab 1.5 mg	A					•	
levonorgestrel-eth estra tab 0.05-30/0.075-40/0.125-30mg mcg	A					•	
levonorgestrel-ethinyl estradiol (continuous) tab 90-20 mcg	A					•	
LO LOESTRIN FE norethin-eth estradiol-fe tab 1 mg-10 mcg (24)/10 mcg (2)	A					•	
medroxyprogesterone acetate im susp prefilled syr 150 mg/ml Depo-provera contrac	A					•	
medroxyprogesterone acetate im susp 150 mg/ml Depo-provera contrac	A					•	
NATAZIA estradiol valerate-dienogest tab 3 mg /2-2 mg/2-3 mg/1 mg	3						
norelgestromin-ethinyl estradiol td ptwk 150-35 mcg/24hr	A					•	
norethindrone & ethinyl estradiol tab 0.4 mg-35 mcg Ovcon-35	A					•	
norethindrone & ethinyl estradiol tab 0.5 mg-35 mcg Brevicon-28	A					•	
norethindrone & ethinyl estradiol tab 1 mg-35 mcg Norinyl 1+35	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
norethindrone & ethinyl estradiol-fe chew tab 0.4 mg-35 mcg Femcon fe	A					•	
norethindrone & ethinyl estradiol-fe chew tab 0.8 mg-25 mcg Generess fe	A					•	
norethindrone ac-ethinyl estrad-fe tab 1-20/1-30/1-35 mg-mcg Estrostep fe	A					•	
norethindrone ace & ethinyl estradiol tab 1 mg-20 mcg Loestrin 1/20-21	A					•	
norethindrone ace & ethinyl estradiol tab 1.5 mg-30 mcg Loestrin 1.5/30-21	A					•	
norethindrone ace & ethinyl estradiol-fe tab 1 mg-20 mcg Loestrin fe 1/20	A					•	
norethindrone ace & ethinyl estradiol-fe tab 1.5 mg-30 mcg Loestrin fe 1.5/30	A					•	
norethindrone ace-eth estradiol-fe chew tab 1 mg-20 mcg (24) Minastrin 24 fe	A					•	
norethindrone ace-ethinyl estradiol-fe tab 1 mg-20 mcg (24)	A					•	
norethindrone tab 0.35 mg Nor-qd	A					•	
norethindrone-eth estradiol tab 0.5-35/0.75-35/1-35 mg-mcg Ortho-novum 7/7/7	A					•	
norethindrone-eth estradiol tab 0.5-35/1-35/0.5-35 mg-mcg Tri-norinyl 28	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>norgestimate &amp; ethinyl estradiol tab 0.25 mg-35 mcg</b> Ortho-cyclen	A					•	
<b>norgestimate-eth estrad tab 0.18-25/0.215-25/0.25-25 mg-mcg</b> Ortho tri-cyclen lo	A					•	
<b>norgestimate-eth estrad tab 0.18-35/0.215-35/0.25-35 mg-mcg</b> Ortho tri-cyclen	A					•	
<b>norgestrel &amp; ethinyl estradiol tab 0.3 mg-30 mcg</b>	A					•	
NUVARING etonogestrel-ethinyl estradiol va ring 0.12-0.015 mg/24hr	A					•	
OPILL norgestrel tab 0.075 mg	A					•	
TYBLUME levonorgestrel & ethinyl estradiol chew tab 0.1 mg-20 mcg	3						
VELIVET desogest-ethin est tab 0.1-0.025/0.125-0.025/0.15-0. mg	3						
<b>PROGESTINS</b>							
<b>medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg</b> Provera	1						
<b>norethindrone acetate tab 5 mg</b> Aygestin	1						
<b>progesterone cap 100 mg, 200 mg</b> Prometrium	1						
<b>progesterone im in oil 50 mg/ml</b>	1						
<b>Antidiabetics</b>							
<b>acarbose tab 25 mg, 50 mg, 100 mg</b> Precose	1						
BAQSIMI ONE PACK glucagon nasal powder 3 mg/dose	2						
BAQSIMI TWO PACK glucagon nasal powder 3 mg/dose	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>diazoxide susp 50 mg/ml</b> Proglycem	1						
FARXIGA dapagliflozin propanediol tab 5 mg (base equivalent), 10 mg (base equivalent)	2						
<b>glimepiride tab 1 mg, 2 mg, 4 mg</b> Amaryl	1						
GLIPIZIDE glipizide tab 2.5 mg	3						
<b>glipizide tab er 24hr 2.5 mg, 5 mg, 10 mg</b> Glucotrol xl	1						
<b>glipizide tab 5 mg, 10 mg</b> Glucotrol	1						
<b>glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg</b>	1						
GLUCAGON EMERGENCY KIT FO glucagon (rdna) for inj kit 1 mg	3						
GLUCAGON EMERGENCY KIT FO glucagon hcl for inj 1 mg	2						
GLYBURIDE MICRONIZED glyburide micronized tab 1.5 mg, 3 mg, 6 mg	3						
<b>glyburide tab 1.25 mg, 2.5 mg, 5 mg</b>	1						
<b>glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mg</b> Glucovance	1						
GLYXAMBI empagliflozin-linagliptin tab 10-5 mg, 25-5 mg	2						
GVOKE HYPOPEN 1-PACK glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
GVOKE HYPOPEN 2-PACK glucagon subcutaneous solution auto-injector 0.5 mg/0.1ml, 1 mg/0.2ml	2						
GVOKE KIT glucagon subcutaneous soln 1 mg/0.2ml	2						
GVOKE PFS glucagon subcutaneous soln pref syringe 1 mg/0.2ml	2						
JANUMET sitagliptin-metformin hcl tab 50-500 mg, 50-1000 mg	2						
JANUMET XR sitagliptin-metformin hcl tab er 24hr 50-500 mg, 50-1000 mg, 100-1000 mg	2						
JANUVIA sitagliptin phosphate tab 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv)	2						
JARDIANCE empagliflozin tab 10 mg, 25 mg	2						
<b>metformin hcl tab er 24hr 500 mg, 750 mg</b> Glucophage xr	1						
<b>metformin hcl tab 500 mg, 850 mg, 1000 mg</b> Glucophage	1						
<b>mifepristone tab 300 mg</b> Korlym	4	•	•	•			
MOUNJARO tirzepatide 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	2	•	•				
OZEMPIC semaglutide soln pen-inj 0.25 or 0.5 mg/dose (2 mg/3ml), 1 mg/dose (4 mg/3ml), 2 mg/dose (8 mg/3ml)	2	•	•				

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>pioglitazone hcl tab 15 mg (base equiv), 30 mg (base equiv), 45 mg (base equiv)</b> Actos	1						
<b>pioglitazone hcl-metformin hcl tab 15-500 mg, 15-850 mg</b> Actoplus met	1						
<b>repaglinide tab 0.5 mg, 1 mg, 2 mg</b> Prandin	1						
RYBELSUS semaglutide tab 1.5 mg, 4 mg, 9 mg	2						
RYBELSUS semaglutide tab 3 mg, 7 mg, 14 mg	2	•		•			
SOLIQUA 100/33 insulin glargine-lixisenatide sol pen-inj 100-33 unit-mcg/ml	2			•			
SYNJARDY empagliflozin-metformin hcl tab 5-500 mg, 5-1000 mg, 12.5-500 mg, 12.5-1000 mg	2						
SYNJARDY XR empagliflozin-metformin hcl tab er 24hr 5-1000 mg, 10-1000 mg, 12.5-1000 mg, 25-1000 mg	2						
TRIJARDY XR empagliflozin-linagliptin-metformin tab er 24hr 12.5-2.5-1000mg	2						
TRIJARDY XR empagliflozin-linagliptin-metformin tab er 24hr 5-2.5-1000mg, 10-5-1000 mg, 25-5-1000 mg	2						
TRULICITY dulaglutide soln auto-injector 0.75 mg/0.5ml, 1.5 mg/0.5ml, 3 mg/0.5ml, 4.5 mg/0.5ml	2	•		•			
XIGDUO XR dapagliflozin prop-metformin hcl tab er 24hr 2.5-1000 mg, 5-500 mg, 5-1000 mg, 10-500 mg, 10-1000 mg	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
XULTOPHY 100/3.6 insulin degludec-liraglutide sol pen-inj 100-3.6 unit-mg/ml	2			•			
ZEGALOGUE dasiglucagon hcl subcutaneous soln auto-inj 0.6 mg/0.6ml	2						
ZEGALOGUE dasiglucagon hcl subcutaneous soln pref syringe 0.6 mg/0.6ml	2						
<b>Rapid-Acting Insulins</b>							
FIASP insulin aspart (with niacinamide) inj 100 unit/ml	2						
FIASP FLEXTOUCH insulin aspart (with niacinamide) sol pen-inj 100 unit/ml	2						
FIASP PENFILL insulin aspart (with niacinamide) soln cartridge 100 unit/ml	2						
HUMALOG insulin lispro inj soln 100 unit/ml	2						
HUMALOG insulin lispro soln cartridge 100 unit/ml	2						
HUMALOG JUNIOR KWIKPEN insulin lispro soln pen-injector 100 unit/ml (0.5 unit dial)	2						
HUMALOG KWIKPEN insulin lispro soln pen-injector 100 unit/ml (1 unit dial), 200 unit/ml	2						
HUMALOG TEMPO PEN insulin lispro soln pen-inj w/transmitter port 100 unit/ml	2						
LYUMJEV insulin lispro-aabc inj 100 unit/ml	2						
LYUMJEV KWIKPEN insulin lispro-aabc soln pen-injector 200 unit/ml	2						
LYUMJEV KWIKPEN insulin lispro-aabc soln pen-inj 100 unit/ml (1 unit dial)	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
LYUMJEV TEMPO PEN insulin lispro-aabc soln pen-inj w/transmit port 100 unit/ml	2						
NOVOLOG insulin aspart inj soln 100 unit/ml	2						
NOVOLOG FLEXPEN insulin aspart soln pen-injector 100 unit/ml	2						
NOVOLOG FLEXPEN RELION insulin aspart soln pen-injector 100 unit/ml	2						
NOVOLOG PENFILL insulin aspart soln cartridge 100 unit/ml	2						
NOVOLOG RELION insulin aspart inj soln 100 unit/ml	2						
<b>Short-Acting Insulins</b>							
HUMULIN R insulin regular (human) inj 100 unit/ml	2						
HUMULIN R U-500 (CONCENTR insulin regular (human) inj 500 unit/ml	2						
HUMULIN R U-500 KWIKPEN insulin regular (human) soln pen-injector 500 unit/ml	2						
NOVOLIN R insulin regular (human) inj 100 unit/ml	2						
NOVOLIN R FLEXPEN insulin regular (human) soln pen-injector 100 unit/ml	2						
NOVOLIN R FLEXPEN RELION insulin regular (human) soln pen-injector 100 unit/ml	2						
NOVOLIN R RELION insulin regular (human) inj 100 unit/ml	2						
RELION R insulin regular (human) inj 100 unit/ml	2						
<b>Intermediate-Acting Insulins</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
HUMALOG MIX 50/50 KWIKPEN insulin lispro prot & lispro sus pen-inj 100 unit/ml (50-50)	2						
HUMALOG MIX 75/25 insulin lispro prot & lispro inj 100 unit/ml (75-25)	2						
HUMALOG MIX 75/25 KWIKPEN insulin lispro prot & lispro sus pen-inj 100 unit/ml (75-25)	2						
HUMULIN N insulin nph (human) (isophane) inj 100 unit/ml	2						
HUMULIN N KWIKPEN insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2						
HUMULIN 70/30 insulin nph isophane & regular human inj 100 unit/ml (70-30)	2						
HUMULIN 70/30 KWIKPEN insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2						
NOVOLIN N insulin nph (human) (isophane) inj 100 unit/ml	2						
NOVOLIN N FLEXPEN insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2						
NOVOLIN N FLEXPEN RELION insulin nph (human) (isophane) susp pen-injector 100 unit/ml	2						
NOVOLIN N RELION insulin nph (human) (isophane) inj 100 unit/ml	2						
NOVOLIN 70/30 insulin nph isophane & regular human inj 100 unit/ml (70-30)	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NOVOLIN 70/30 FLEXPEN insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2						
NOVOLIN 70/30 FLEXPEN REL insulin nph & regular susp pen-inj 100 unit/ml (70-30)	2						
NOVOLIN 70/30 RELION insulin nph isophane & regular human inj 100 unit/ml (70-30)	2						
NOVOLOG MIX 70/30 insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2						
NOVOLOG MIX 70/30 PREFILL insulin aspart prot & aspart sus pen-inj 100 unit/ml (70-30)	2						
NOVOLOG MIX 70/30 RELION insulin aspart prot & aspart (human) inj 100 unit/ml (70-30)	2						
<b>Basal Insulins</b>							
INSULIN DEGLUDEC insulin degludec inj 100 unit/ml	2						
INSULIN DEGLUDEC FLEXTOUC insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2						
INSULIN GLARGINE-YFGN insulin glargine-yfgn inj 100 unit/ml	2						
INSULIN GLARGINE-YFGN insulin glargine-yfgn soln pen-injector 100 unit/ml	2						
SEMGLEE insulin glargine-yfgn inj 100 unit/ml	2						
SEMGLEE insulin glargine-yfgn soln pen-injector 100 unit/ml	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
TOUJEO MAX SOLOSTAR insulin glargine soln pen-injector 300 unit/ml (2 unit dial)	2						
TOUJEO SOLOSTAR insulin glargine soln pen-injector 300 unit/ml (1 unit dial)	2						
TRESIBA insulin degludec inj 100 unit/ml	2						
TRESIBA FLEXTOUCH insulin degludec soln pen-injector 100 unit/ml, 200 unit/ml	2						
<b>THYROID AGENTS</b>							
ADTHYZA thyroid tab 15 mg (1/4 grain), 16.25 mg, 30 mg (1/2 grain), 32.5 mg, 60 mg (1 grain), 65 mg, 90 mg (1 1/2 grain), 97.5 mg, 120 mg (2 grain), 130 mg	3						
ARMOUR THYROID thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain), 180 mg (3 grain), 240 mg (4 grain), 300 mg (5 grain)	3						
ERMEZA levothyroxine sodium oral solution 150 mcg/5ml	3						
LEVOTHYROXINE SODIUM levothyroxine sodium cap 13 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	3						
<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 Synthroid</b>	1						
<b>liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg Cytomel</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>methimazole tab 5 mg, 10 mg Tapazole</b>	1						
NIVA THYROID thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	3						
NP THYROID 120 thyroid tab 120 mg (2 grain)	3						
NP THYROID 15 thyroid tab 15 mg (1/4 grain)	3						
NP THYROID 30 thyroid tab 30 mg (1/2 grain)	3						
NP THYROID 60 thyroid tab 60 mg (1 grain)	3						
NP THYROID 90 thyroid tab 90 mg (1 1/2 grain)	3						
<b>propylthiouracil tab 50 mg</b>	1						
SYNTHROID levothyroxine sodium tab 25 mcg, 50 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 300 mcg	2						
THYQUIDITY levothyroxine sodium oral solution 100 mcg/5ml	3						
THYROID thyroid tab 15 mg (1/4 grain), 30 mg (1/2 grain), 60 mg (1 grain), 90 mg (1 1/2 grain), 120 mg (2 grain)	3						
TIROSINT levothyroxine sodium cap 13 mcg, 25 mcg, 37.5 mcg, 44 mcg, 50 mcg, 62.5 mcg, 75 mcg, 88 mcg, 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
TIROSINT-SOL levothyroxine sodium oral solution 13 mcg/ml, 25 mcg/ml, 37.5 mcg/ml, 44 mcg/ml, 50 mcg/ml, 62.5 mcg/ml, 75 mcg/ml, 88 mcg/ml, 100 mcg/ml, 112 mcg/ml, 125 mcg/ml, 137 mcg/ml, 150 mcg/ml, 175 mcg/ml, 200 mcg/ml	3						
<b>OXYTOCICS</b>							
CERVIDIL dinoprostone vaginal inserts 10 mg	3						
<b>methylergonovine maleate tab 0.2 mg</b>	1						
PREPIDIL dinoprostone cervical gel 0.5 mg/3gm	3						
<b>ENDOCRINE and METABOLIC AGENTS - MISC.</b>							
ACTHAR corticotropin inj gel 80 unit/ml	4	•			•		•
ACTHAR GEL corticotropin subcutaneous gel auto-injector 40 unit/0.5ml, 80 unit/ml	4	•			•		•
<b>alendronate sodium oral soln 70 mg/75ml</b>	1						
<b>alendronate sodium tab 10 mg, 35 mg</b>	1						
<b>alendronate sodium tab 70 mg Fosamax</b>	1						
<b>betaine powder for oral solution Cystadane</b>	4				•		
<b>cabergoline tab 0.5 mg</b>	1						
<b>calcitonin (salmon) nasal soln 200 unit/act Miacalcin</b>	1						
<b>calcitriol cap 0.25 mcg, 0.5 mcg Rocaltrol</b>	1						
<b>carglumic acid soluble tab 200 mg Carbaglu</b>	4	•			•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>cinacalcet hcl tab 30 mg (base equiv), 60 mg (base equiv), 90 mg (base equiv) Sensipar</b>	4	•			•		
<b>desmopressin acetate inj 4 mcg/ml Ddavp</b>	1						
<b>desmopressin acetate nasal spray soln 0.01% Ddavp</b>	1						
<b>desmopressin acetate nasal spray soln 0.01% (refrigerated)</b>	1						
<b>desmopressin acetate preservative free (pf) inj 4 mcg/ml Ddavp</b>	1						
<b>desmopressin acetate tab 0.1 mg, 0.2 mg Ddavp</b>	1						
GALAFOLD migalastat hcl cap 123 mg (base equivalent)	4	•		•	•		•
GENOTROPIN somatropin for subcutaneous inj cartridge 5 mg, 12 mg (36 unit)	4	•			•		
GENOTROPIN MINIQUICK somatropin for subcutaneous inj prefilled syr 0.2 mg, 0.4 mg, 0.6 mg, 0.8 mg, 1 mg, 1.2 mg, 1.4 mg, 1.6 mg, 1.8 mg, 2 mg	4	•			•		
<b>ibandronate sodium tab 150 mg (base equivalent) Boniva</b>	1						
INCRELEX mecasemin inj 40 mg/4ml (10 mg/ml)	4				•		•
ISTURISA osilodrostat phosphate tab 1 mg, 5 mg	4	•		•	•		•
JYNARQUE tolvaptan tab therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg	4	•		•	•		•
JYNARQUE tolvaptan tab 15 mg, 30 mg	4	•		•	•		•
KERENDIA finerenone tab 10 mg, 20 mg	2	•		•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution	Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>levocarnitine oral soln</b> <b>1 gm/10ml (10%)</b> Carnitor	1							OPFOLDA miglustat (gaa deficiency) cap 65 mg	4	•		•	•		•
<b>levocarnitine tab</b> <b>330 mg</b> Carnitor	1							ORFADIN nitisinone susp 4 mg/ml	4				•		•
LUPRON DEPOT-PED (1-MONTH leuprolide acetate for inj pediatric kit 7.5 mg, 11.25 mg, 15 mg)	4				•			ORLISSA elagolix sodium tab 150 mg (base equiv), 200 mg (base equiv)	2	•		•			
LUPRON DEPOT-PED (3-MONTH leuprolide acetate (3 month) for inj pediatric kit 11.25 mg, 30 mg)	4				•			PALYNZIQ pegvaliase-pqpz subcutaneous soln pref syringe 2.5 mg/0.5ml, 10 mg/0.5ml, 20 mg/ml	4	•			•		•
LUPRON DEPOT-PED (6-MONTH leuprolide acet (6 month) for im inj pediatric kit 45 mg)	4				•			PHEBURANE sodium phenylbutyrate oral pellets 483 mg/gm	4				•		•
MYALEPT metreleptin for subcutaneous inj 11.3 mg	4	•			•		•	<b>raloxifene hcl tab</b> <b>60 mg</b> Evista	1					•	
MYCAPSSA octreotide acetate cap delayed release 20 mg	4				•		•	RAVICTI glycerol phenylbutyrate liquid 1.1 gm/ml	4				•		•
<b>nitisinone cap 2 mg, 5 mg, 10 mg, 20 mg</b> Orfadin	4				•		•	REVCOVI elapegamase-lvlr im soln 2.4 mg/1.5ml (1.6 mg/ml)	4				•		•
NULIBRY fosdenopterin hydrobromide for iv soln 9.5 mg	3						•	<b>risedronate sodium tab 5 mg, 35 mg, 150 mg</b> Actonel	1						
OCTREOTIDE ACETATE octreotide acetate subcutaneous soln pref syr 50 mcg/ml, 100 mcg/ml, 500 mcg/ml	4				•			<b>sapropterin dihydrochloride powder packet 100 mg, 500 mg</b> Kuvan	4	•			•		•
<b>octreotide acetate inj 50 mcg/ml (0.05 mg/ml), 100 mcg/ml (0.1 mg/ml), 500 mcg/ml (0.5 mg/ml)</b> Sandostatin	4				•			<b>sapropterin dihydrochloride tab 100 mg</b> Kuvan	4	•			•		•
<b>octreotide acetate inj 200 mcg/ml (0.2 mg/ml), 1000 mcg/ml (1 mg/ml)</b>	4				•			SIGNIFOR pasireotide diaspartate inj 0.3 mg/ml (base equiv), 0.6 mg/ml (base equiv), 0.9 mg/ml (base equiv)	4				•		•
OMNITROPE somatropin for inj 5.8 mg	4	•			•		•	SKYTROFA lonapegsomatropin tcdg for subcutaneous inj cartridge 3 mg, 3.6 mg, 4.3 mg, 5.2 mg, 6.3 mg, 7.6 mg, 9.1 mg, 11 mg	4	•			•		•
OMNITROPE somatropin solution cartridge 5 mg/1.5ml, 10 mg/1.5ml	4	•			•		•	SKYTROFA lonapegsomatropin tcdg for subcutaneous inj cart 13.3 mg	4	•			•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>sodium phenylbutyrate oral powder 3 gm/teaspoonful</b> Buphenyl	4				•		
<b>sodium phenylbutyrate tab 500 mg</b> Buphenyl	4				•		
SOMAVERT pegvisomant for inj 10 mg (as protein), 15 mg (as protein), 20 mg (as protein), 25 mg (as protein), 30 mg (as protein)	4				•		•
STRENSIQ asfotase alfa subcutaneous inj 18 mg/0.45ml, 28 mg/0.7ml, 40 mg/ml, 80 mg/0.8ml	4	•			•		•
SYNAREL nafarelin acetate nasal soln 2 mg/ml (200 mcg/act) (base eq)	4				•		
<b>teriparatide soln pen-inj 600 mcg/2.4ml</b> Forteo	4	•		•	•		
<b>tolvaptan tab 15 mg, 30 mg</b> Samsca	4	•		•	•		
TYMLOS abaloparatide subcutaneous soln pen-injector 3120 mcg/1.56ml	4	•		•	•		•
VOXZOGO vosoritide for subcutaneous inj 0.4 mg, 0.56 mg, 1.2 mg	4				•		•
<b>CARDIOVASCULAR AGENTS</b>							
<b>CARDIOTONICS</b>							
DIGOXIN digoxin oral soln 0.05 mg/ml	3						
<b>digoxin oral soln 0.05 mg/ml</b> Digoxin	1						
<b>digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)</b> Lanoxin	1						
LANOXIN digoxin tab 62.5 mcg (0.0625 mg), 125 mcg (0.125 mg), 250 mcg (0.25 mg)	3						
<b>ANTIANGINAL AGENTS</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>isosorbide dinitrate tab 5 mg</b> Isordil titradose	1						
<b>isosorbide dinitrate tab 10 mg, 20 mg, 30 mg</b>	1						
ISOSORBIDE MONONITRATE isosorbide mononitrate tab 10 mg, 20 mg	3						
<b>isosorbide mononitrate tab er 24hr 30 mg, 60 mg, 120 mg</b>	1						
NITRO-BID nitroglycerin oint 2%	3						
NITRO-DUR nitroglycerin td patch 24hr 0.3 mg/hr, 0.8 mg/hr	3						
NITRO-TIME nitroglycerin cap er 2.5 mg, 6.5 mg, 9 mg	3						
<b>nitroglycerin sl tab 0.3 mg, 0.4 mg, 0.6 mg</b> Nitrostat	1						
<b>nitroglycerin td patch 24hr 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</b> Nitro-dur	1						
<b>nitroglycerin tl soln 0.4 mg/spray (400 mcg/spray)</b> Nitrolingual pumpspr	1						
<b>ranolazine tab er 12hr 500 mg, 1000 mg</b> Ranexa	1						
<b>BETA BLOCKERS</b>							
<b>acebutolol hcl cap 200 mg, 400 mg</b> Sectral	1						
<b>atenolol tab 25 mg, 50 mg, 100 mg</b> Tenormin	1						
<b>betaxolol hcl tab 10 mg, 20 mg</b> Kerlone	1						
<b>bisoprolol fumarate tab 5 mg, 10 mg</b> Zebeta	1						
<b>carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25 mg</b> Coreg	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
labetalol hcl tab 100 mg, 200 mg, 300 mg Trandate	1						
metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv) Toprol xl	1						
metoprolol tartrate tab 25 mg	1						
metoprolol tartrate tab 50 mg, 100 mg Lopressor	1						
nadolol tab 20 mg, 40 mg, 80 mg Corgard	1						
nebivolol hcl tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent), 20 mg (base equivalent) Bystolic	1						
pindolol tab 5 mg, 10 mg	1						
PROPRANOLOL HCL propranolol hcl oral soln 20 mg/5ml	1						
PROPRANOLOL HCL propranolol hcl oral soln 40 mg/5ml	2						
propranolol hcl cap er 24hr 60 mg, 80 mg, 120 mg, 160 mg Inderal la	1						
propranolol hcl tab 10 mg, 20 mg, 40 mg, 60 mg, 80 mg	1						
PROPRANOLOL HYDROCHLORIDE propranolol hcl oral soln 20 mg/5ml	1						
sotalol hcl (afib/afib) tab 80 mg, 120 mg, 160 mg Betapace af	1						
sotalol hcl tab 80 mg, 120 mg, 160 mg Betapace	1						
sotalol hcl tab 240 mg	1						
<b>CALCIUM CHANNEL BLOCKERS</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
amlodipine besylate tab 2.5 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent) Norvasc	1						
diltiazem hcl cap er 12hr 60 mg, 90 mg	1						
diltiazem hcl cap er 24hr 120 mg, 180 mg, 240 mg	1						
diltiazem hcl coated beads cap er 24hr 120 mg, 180 mg, 240 mg Cardizem cd	1						
diltiazem hcl coated beads cap er 24hr 300 mg	1						
diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg Tiazac	1						
diltiazem hcl tab er 24hr 120 mg Cardizem la	1						
diltiazem hcl tab 30 mg, 60 mg, 120 mg Cardizem	1						
diltiazem hcl tab 90 mg	1						
felodipine tab er 24hr 2.5 mg, 5 mg, 10 mg	1						
nifedipine cap 10 mg Procardia	1						
nifedipine cap 20 mg	1						
nifedipine tab er 24hr 30 mg, 60 mg, 90 mg Adalat cc	1						
nifedipine tab er 24hr osmotic release 30 mg, 60 mg, 90 mg Procardia xl	1						
nimodipine cap 30 mg	1						
verapamil hcl tab er 120 mg, 180 mg, 240 mg Calan sr	1						
verapamil hcl tab 40 mg	1						
verapamil hcl tab 80 mg, 120 mg Calan	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>ANTIARRHYTHMICS</b>							
amiodarone hcl tab 100 mg	1						
amiodarone hcl tab 200 mg Cordarone	1						
disopyramide phosphate cap 100 mg, 150 mg Norpace	1						
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg) Tikosyn	1						
flecainide acetate tab 50 mg, 100 mg, 150 mg	1						
mexiletine hcl cap 150 mg, 200 mg, 250 mg	1						
MULTAQ dronedarone hcl tab 400 mg (base equivalent)	2						
NORPACE CR disopyramide phosphate cap er 12hr 100 mg, 150 mg	3						
propafenone hcl cap er 12hr 225 mg, 325 mg, 425 mg Rythmol sr	1						
propafenone hcl tab 150 mg, 225 mg Rythmol	1						
propafenone hcl tab 300 mg	1						
quinidine gluconate tab er 324 mg	1						
QUINIDINE SULFATE quinidine sulfate tab 200 mg, 300 mg	3						
<b>ANTIHYPERTENSIVES</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	1						
amlodipine besylate-olmesartan medoxomil tab 5-20 mg, 5-40 mg, 10-20 mg, 10-40 mg Azor	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
amlodipine besylate-valsartan tab 5-160 mg, 5-320 mg, 10-160 mg, 10-320 mg Exforge	1			•			
atenolol & chlorthalidone tab 50-25 mg Tenoretic 50	1						
atenolol & chlorthalidone tab 100-25 mg Tenoretic 100	1						
benazepril & hydrochlorothiazide tab 5-6.25 mg	1						
benazepril & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg Lotensin hct	1						
benazepril hcl tab 5 mg	1						
benazepril hcl tab 10 mg, 20 mg, 40 mg Lotensin	1						
bisoprolol & hydrochlorothiazide tab 2.5-6.25 mg, 5-6.25 mg, 10-6.25 mg Ziac	1						
candesartan cilexetil tab 4 mg, 8 mg, 16 mg, 32 mg Atacand	1			•			
captopril tab 12.5 mg, 25 mg, 50 mg, 100 mg	1						
clonidine hcl tab 0.1 mg, 0.2 mg, 0.3 mg Catapres	1						
clonidine td patch weekly 0.1 mg/24hr Catapres-tts-1	1						
clonidine td patch weekly 0.2 mg/24hr Catapres-tts-2	1						
clonidine td patch weekly 0.3 mg/24hr Catapres-tts-3	1						
doxazosin mesylate tab 1 mg, 2 mg, 4 mg, 8 mg Cardura	1						
enalapril maleate & hydrochlorothiazide tab 5-12.5 mg	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>enalapril maleate &amp; hydrochlorothiazide tab 10-25 mg</b> Vaseretec	1						
<b>enalapril maleate tab 2.5 mg, 5 mg, 10 mg, 20 mg</b> Vasotec	1						
<b>eplerenone tab 25 mg, 50 mg</b> Inspra	1						
<b>fosinopril sodium &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b>	1						
<b>fosinopril sodium tab 10 mg, 20 mg, 40 mg</b>	1						
<b>guanfacine hcl tab 1 mg, 2 mg</b> Tenex	1						
<b>hydralazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg</b>	1						
<b>irbesartan tab 75 mg, 150 mg, 300 mg</b> Avapro	1			•			
<b>irbesartan-hydrochlorothiazide tab 150-12.5 mg, 300-12.5 mg</b> Avalide	1			•			
<b>lisinopril &amp; hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg, 20-25 mg</b> Zestoretic	1						
<b>lisinopril tab 2.5 mg, 30 mg, 40 mg</b> Zestril	1						
<b>lisinopril tab 5 mg, 10 mg, 20 mg</b> Prinivil	1						
<b>losartan potassium &amp; hydrochlorothiazide tab 50-12.5 mg, 100-12.5 mg, 100-25 mg</b> Hyzaar	1			•			
<b>losartan potassium tab 25 mg, 50 mg, 100 mg</b> Cozaar	1			•			
<b>METHYLDOPA methyldopa tab 250 mg, 500 mg</b>	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>metoprolol &amp; hydrochlorothiazide tab 50-25 mg, 100-25 mg</b> Lopressor hct	1						
<b>metoprolol &amp; hydrochlorothiazide tab 100-50 mg</b>	1						
<b>minoxidil tab 2.5 mg, 10 mg</b>	1						
<b>moexipril hcl tab 7.5 mg, 15 mg</b>	1						
<b>olmesartan medoxomil tab 5 mg, 20 mg, 40 mg</b> Benicar	1			•			
<b>olmesartan medoxomil-hydrochlorothiazide tab 20-12.5 mg, 40-12.5 mg, 40-25 mg</b> Benicar hct	1			•			
<b>olmesartan-amlodipine-hydrochlorothiazide tab 20-5-12.5 mg, 40-5-12.5 mg, 40-5-25 mg, 40-10-12.5 mg, 40-10-25 mg</b> Tribenzor	1			•			
<b>PERINDOPRIL ERBUMINE perindopril erbumine tab 2 mg, 8 mg</b>	3						
<b>perindopril erbumine tab 4 mg</b> Aceon	1						
<b>phenoxybenzamine hcl cap 10 mg</b> Dibenzyline	1						
<b>prazosin hcl cap 1 mg, 2 mg, 5 mg</b> Minipress	1						
<b>quinapril hcl tab 5 mg, 10 mg, 20 mg, 40 mg</b> Accupril	1						
<b>quinapril-hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg</b> Accuretic	1						
<b>QUINAPRIL/ HYDROCHLOROTHIA quinapril hydrochlorothiazide tab 20-25 mg</b>	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ramipril cap 1.25 mg, 2.5 mg, 5 mg, 10 mg Altace	1						
telmisartan tab 20 mg, 40 mg, 80 mg Micardis	1			•			
terazosin hcl cap 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)	1						
trandolapril tab 1 mg, 2 mg, 4 mg Mavik	1						
valsartan tab 40 mg, 80 mg, 160 mg, 320 mg Diovan	1			•			
valsartan-hydrochlorothiazide tab 80-12.5 mg, 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg Diovan hct	1			•			
VECAMYL mecamylamine hcl tab 2.5 mg	4				•		•
<b>DIURETICS</b>							
acetazolamide cap er 12hr 500 mg Diamox	1						
acetazolamide tab 125 mg, 250 mg	1						
amiloride hcl tab 5 mg	1						
AMILORIDE/ HYDROCHLOROTHIA amiloride & hydrochlorothiazide tab 5-50 mg	3						
bumetanide tab 0.5 mg, 1 mg, 2 mg	1						
chlorthalidone tab 25 mg, 50 mg	1						
DIURIL chlorothiazide susp 250 mg/5ml	3						
ethacrynic acid tab 25 mg Edecrin	1						
FUROSCIX furosemide subcutaneous cartridge kit 80 mg/10ml	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
furosemide oral soln 10 mg/ml	1						
furosemide tab 20 mg, 40 mg, 80 mg Lasix	1						
hydrochlorothiazide cap 12.5 mg Microzide	1						
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg	1						
indapamide tab 1.25 mg, 2.5 mg	1						
methazolamide tab 25 mg, 50 mg Neptazane	1						
metolazone tab 2.5 mg, 5 mg, 10 mg	1						
spironolactone & hydrochlorothiazide tab 25-25 mg Aldactazide	1						
spironolactone tab 25 mg, 50 mg, 100 mg Aldactone	1						
toremide tab 5 mg, 10 mg, 20 mg, 100 mg Demadex	1						
triamterene & hydrochlorothiazide cap 37.5-25 mg Dyazide	1						
triamterene & hydrochlorothiazide tab 37.5-25 mg Maxzide-25	1						
triamterene & hydrochlorothiazide tab 75-50 mg Maxzide	1						
<b>VASOPRESSORS</b>							
AUVI-Q epinephrine solution auto-injector 0.1 mg/0.1ml, 0.15 mg/0.15ml (1:1000), 0.3 mg/0.3ml (1:1000)	2						
epinephrine solution auto-injector 0.15 mg/0.3ml (1:2000) Epipen-jr 2-pak	1						
epinephrine solution auto-injector 0.3 mg/0.3ml (1:1000) Epipen 2-pak	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
midodrine hcl tab 2.5 mg, 5 mg, 10 mg	1						
<b>ANTIHYPERTENSIVES</b>							
atorvastatin calcium tab 10 mg (base equivalent), 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent) Lipitor	1						
cholestyramine light powder 4 gm/dose Questran light	1						
cholestyramine powder 4 gm/dose Questran	1						
colesevelam hcl tab 625 mg Welchol	1						
colestipol hcl granule packets 5 gm Colestid flavored	1						
colestipol hcl granules 5 gm Colestid flavored	1						
colestipol hcl tab 1 gm Colestid	1						
ezetimibe tab 10 mg Zetia	1						
ezetimibe-simvastatin tab 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg Vytorin	1						
fenofibrate micronized cap 67 mg, 134 mg, 200 mg Lofibra	1						
fenofibrate tab 48 mg, 145 mg Tricor	1						
fenofibrate tab 54 mg, 160 mg Lofibra	1						
fluvastatin sodium cap 20 mg (base equivalent), 40 mg (base equivalent)	1						
gemfibrozil tab 600 mg Lopid	1						
icosapent ethyl cap 0.5 gm, 1 gm Vascepa	1	•		•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
JUXTAPID lomitapide mesylate cap 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv), 30 mg (base equiv)	4	•		•	•		•
lovastatin tab 10 mg	1						
lovastatin tab 20 mg	1					•	
lovastatin tab 40 mg Mevacor	1					•	
NEXLETOL bempedoic acid tab 180 mg	2	•		•			
NEXLIZET bempedoic acid-ezetimibe tab 180-10 mg	2	•		•			
niacin tab er 500 mg (antihyperlipidemic), 750 mg (antihyperlipidemic), 1000 mg (antihyperlipidemic) Niaspan	1						
pravastatin sodium tab 10 mg	1					•	
pravastatin sodium tab 20 mg, 40 mg, 80 mg Pravachol	1					•	
REPATHA evolocumab subcutaneous soln prefilled syringe 140 mg/ml	2	•		•			
REPATHA PUSHTRONEX SYSTEM evolocumab subcutaneous soln cartridge/infusor 420 mg/3.5ml	2	•		•			
REPATHA SURECLICK evolocumab subcutaneous soln auto-injector 140 mg/ml	2	•		•			
rosuvastatin calcium tab 5 mg, 10 mg, 20 mg, 40 mg Crestor	1					•	
simvastatin tab 5 mg, 80 mg Zocor	1						
simvastatin tab 10 mg, 20 mg, 40 mg Zocor	1					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
VASCEPA icosapent ethyl cap 0.5 gm, 1 gm	1	•		•			
<b>CARDIOVASCULAR AGENTS - MISC.</b>							
ADEMPAS riociguat tab 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg	4	•		•	•		•
<b>ambrisentan tab 5 mg, 10 mg</b> Letairis	4	•		•	•		•
<b>bosentan tab 62.5 mg, 125 mg</b> Tracleer	4	•		•	•		
CAMZYOS mavacamten cap 2.5 mg, 5 mg, 10 mg, 15 mg	4	•		•	•		•
CORLANOR ivabradine hcl oral soln 5 mg/5ml (base equiv)	2	•		•			•
ENTRESTO sacubitril-valsartan sprinkle cap 6-6 mg, 15-16 mg	2						
ENTRESTO sacubitril-valsartan tab 24-26 mg, 49-51 mg, 97-103 mg	2						
<b>isosorbide dinitrate-hydralazine hcl tab 20-37.5 mg</b> Bidil	1						
<b>ivabradine hcl tab 5 mg (base equiv), 7.5 mg (base equiv)</b> Corlanor	1	•		•			
OPSUMIT macitentan tab 10 mg	4	•		•	•		•
ORENITRAM treprostinil diolamine tab er 0.125 mg (base equiv), 0.25 mg (base equiv), 1 mg (base equiv), 2.5 mg (base equiv), 5 mg (base equiv)	4	•			•		•
ORENITRAM TITRATION KIT M treprostinil tab er titr pk (mo1) 126 x0.125mg & 42 x0.25mg, titr pk (mo2) 126 x0.125mg & 210 x0.25mg, titr pk(mo3)126x0.125mg&42x0.2	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>sildenafil citrate tab 20 mg</b> Revatio	4	•		•	•		
<b>tadalafil tab 20 mg (pah)</b> Adcirca	4	•		•	•		
TRACLEER bosentan tab for oral susp 32 mg	4	•		•	•		•
TYVASO treprostinil inhalation solution 0.6 mg/ml	4	•		•	•		•
TYVASO REFILL KIT treprostinil inhalation solution 0.6 mg/ml	4	•		•	•		•
TYVASO STARTER KIT treprostinil inhalation solution 0.6 mg/ml	4	•		•	•		•
UPTRAVI selexipag tab 200 mcg, 400 mcg, 600 mcg, 800 mcg, 1000 mcg, 1200 mcg, 1400 mcg, 1600 mcg	4	•		•	•		•
UPTRAVI TITRATION PACK selexipag tab therapy pack 200 mcg (140) & 800 mcg (60)	4	•		•	•		•
VENTAVIS iloprost inhalation solution 10 mcg/ml, 20 mcg/ml	4	•		•	•		•
VYNDAMAX tafamidis cap 61 mg	4	•		•	•		
VYNDAQEL tafamidis meglumine (cardiac) cap 20 mg	4	•		•	•		
WINREVAIR sotatercept-csrk for subcutaneous soln kit 45 mg, 60 mg, 2 x 45 mg, 2 x 60 mg	4	•		•	•		•
<b>RESPIRATORY AGENTS</b>							
<b>ANTI-HISTAMINES</b>							
<b>carbinoxamine maleate tab 4 mg</b>	1						
CLEMASTINE FUMARATE clemastine fumarate tab 2.68 mg	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>cyproheptadine hcl syrup 2 mg/5ml</b>	1						
<b>cyproheptadine hcl tab 4 mg</b>	1						
<b>promethazine hcl oral soln 6.25 mg/5ml</b>	1						
<b>promethazine hcl suppos 12.5 mg, 25 mg</b>	1						
<b>promethazine hcl tab 12.5 mg, 25 mg, 50 mg</b>	1						
PROMETHEGAN promethazine hcl suppos 50 mg	3						
RYCLORA dexchlorpheniramine maleate oral soln 2 mg/5ml	3						
<b>NASAL AGENTS - SYSTEMIC and TOPICAL</b>							
<b>azelastine hcl nasal spray 0.1% (137 mcg/spray)</b>	1						
<b>fluticasone propionate nasal susp 50 mcg/act</b>	1						
<b>ipratropium bromide nasal soln 0.03% (21 mcg/ spray), 0.06% (42 mcg/ spray) Atrovent</b>	1						
<b>olopatadine hcl nasal soln 0.6% Patanase</b>	1						
<b>COUGH/COLD/ALLERGY</b>							
<b>acetylcysteine inhal soln 10%, 20%</b>	1						
<b>guaifenesin-codeine soln 100-10 mg/5ml</b>	1						
<b>promethazine w/ codeine syrup 6.25-10 mg/5ml</b>	1						
<b>promethazine-dm syrup 6.25-15 mg/5ml</b>	1						
<b>sodium chloride soln nebu 3%</b>	1						
<b>sodium chloride soln nebu 7% Hyper-sal</b>	1						
<b>ANTIASTHMATIC and BRONCHODILATOR AGENTS</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ADVAIR HFA fluticasone- salmeterol inhal aerosol 45-21 mcg/act, 115-21 mcg/ act, 230-21 mcg/act	2			•			
ALBUTEROL SULFATE albuterol sulfate soln nebu 0.5% (5 mg/ml)	1						
<b>albuterol sulfate inhal aero 108 mcg/act (90mcg base equiv) Proventil hfa</b>	1			•			
<b>albuterol sulfate soln nebu 0.083% (2.5 mg/3ml), 0.63 mg/3ml (base equiv), 1.25 mg/3ml (base equiv)</b>	1						
<b>albuterol sulfate syrup 2 mg/5ml</b>	1						
<b>albuterol sulfate tab 2 mg, 4 mg</b>	1						
ANORO ELLIPTA umeclidinium- vilanterol aero powd ba 62.5-25 mcg/act	2			•			
<b>arformoterol tartrate soln nebu 15 mcg/2ml (base equiv) Brovana</b>	1						
ARNUITY ELLIPTA fluticasone furoate aerosol powder breath activ 50 mcg/act, 100 mcg/act, 200 mcg/act	2			•			
ASMANEX HFA mometasone furoate inhal aerosol suspension 50 mcg/act, 100 mcg/act, 200 mcg/act	2			•			
ASMANEX TWISTHALER 120 ME mometasone furoate inhal powd 220 mcg/act (breath activated)	2			•			
ASMANEX TWISTHALER 30 MET mometasone furoate inhal powd 110 mcg/act (breath activated), 220 mcg/ act (breath activated)	2			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ASMANEX TWISTHALER 60 MET mometasone furoate inhal powd 220 mcg/act (breath activated)	2			•			
ATROVENT HFA ipratropium bromide hfa inhal aerosol 17 mcg/act	3			•			
BREO ELLIPTA fluticasone furoate-vilanterol aero powd ba 50-25 mcg/act, 100-25 mcg/act, 200-25 mcg/act	2			•			
BREZTRI AEROSPHERE budesonide-glycopyrrolate-formoterol aers 160-9-4.8 mcg/act	2			•			
<b>budesonide inhalation susp 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml</b> Pulmicort	1						
COMBIVENT RESPIMAT ipratropium-albuterol inhal aerosol soln 20-100 mcg/act	2			•			
<b>cromolyn sodium soln nebu 20 mg/2ml</b>	1						
DULERA mometasone furoate-formoterol fumarate aerosol 50-5 mcg/act, 100-5 mcg/act, 200-5 mcg/act	2			•			
FASENRA PEN benralizumab subcutaneous soln auto-injector 30 mg/ml	4	•		•	•		•
FLUTICASONE PROPIONATE/SA fluticasone-salmeterol aer powder ba 55-14 mcg/act, 113-14 mcg/act, 232-14 mcg/act	1			•			
<b>fluticasone-salmeterol aer powder ba 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</b> Advair diskus	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
INCRUSE ELLIPTA umeclidinium br aero powd breath act 62.5 mcg/act (base eq)	2			•			
<b>ipratropium bromide inhal soln 0.02%</b>	1						
<b>ipratropium-albuterol nebu soln 0.5-2.5(3) mg/3ml</b>	1						
<b>levalbuterol hcl soln nebu conc 1.25 mg/0.5ml (base equiv)</b> Xopenex concentrate	1						
<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	1						
<b>montelukast sodium chew tab 4 mg (base equiv), 5 mg (base equiv)</b> Singulair	1						
<b>montelukast sodium tab 10 mg (base equiv)</b> Singulair	1						
NUCALA mepolizumab subcutaneous solution auto-injector 100 mg/ml	4	•		•	•		•
NUCALA mepolizumab subcutaneous solution pref syringe 40 mg/0.4ml, 100 mg/ml	4	•		•	•		•
QVAR REDIHALER beclomethasone diprop hfa breath act inh aer 40 mcg/act, 80 mcg/act	2			•			
<b>roflumilast tab 250 mcg, 500 mcg</b> Daliresp	1						
SEREVENT DISKUS salmeterol xinafoate aer pow ba 50 mcg/act (base equiv)	2			•			
SPIRIVA HANDIHALER tiotropium bromide monohydrate inhal cap 18 mcg (base equiv)	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
SPIRIVA RESPIMAT tiotropium bromide monohydrate inhal aerosol 1.25 mcg/act, 2.5 mcg/act	2			•			
STIOLTO RESPIMAT tiotropium bromide olodaterol inhal aerosol 2.5-2.5 mcg/act	2			•			
STRIVERDI RESPIMAT olodaterol hcl inhal aerosol soln 2.5 mcg/act (base equiv)	2			•			
SYMBICORT budesonide-formoterol fumarate dihyd aerosol 80-4.5 mcg/act, 160-4.5 mcg/act	1			•			
<b>terbutaline sulfate tab 2.5 mg, 5 mg</b>	1						
TEZSPIRE tezepelumab-ekko subcutaneous soln auto-inj 210 mg/1.91ml	4	•		•	•		•
THEO-24 theophylline cap er 24hr 100 mg, 200 mg, 300 mg, 400 mg	3						
<b>theophylline elixir 80 mg/15ml</b>	1						
<b>theophylline soln 80 mg/15ml</b>	1						
<b>theophylline tab er 12hr 300 mg, 450 mg</b>	1						
<b>theophylline tab er 24hr 400 mg, 600 mg</b>	1						
TRELEGY ELLIPTA fluticasone-umeclidinium-vilanterol aepb 100-62.5-25 mcg/act, 200-62.5-25 mcg/act	2			•			
VENTOLIN HFA albuterol sulfate inhal aerosol 108 mcg/act (90mcg base equiv)	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
XOLAIR omalizumab subcutaneous soln auto-injector 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	4	•			•		•
XOLAIR omalizumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml, 300 mg/2ml	4	•			•		•
<b>zafirlukast tab 10 mg, 20 mg Accolate</b>	1						
<b>zileuton tab er 12hr 600 mg Zylflo cr</b>	1						
<b>RESPIRATORY AGENTS - MISC.</b>							
KALYDECO ivacaftor packet 5.8 mg, 13.4 mg, 25 mg, 50 mg, 75 mg	4	•		•	•		•
KALYDECO ivacaftor tab 150 mg	4	•		•	•		•
OFEV nintedanib esylate cap 100 mg (base equivalent), 150 mg (base equivalent)	4	•		•	•		•
ORKAMBI lumacaftor-ivacaftor granules packet 75-94 mg, 100-125 mg, 150-188 mg	4	•		•	•		•
ORKAMBI lumacaftor-ivacaftor tab 100-125 mg, 200-125 mg	4	•		•	•		•
PIRFENIDONE pirfenidone tab 534 mg	4	•		•	•		
<b>pirfenidone cap 267 mg Esbriet</b>	4	•		•	•		
<b>pirfenidone tab 267 mg, 801 mg Esbriet</b>	4	•		•	•		
PULMOZYME dornase alfa inhal soln 2.5 mg/2.5ml	4				•		
SYMDEKO tezacaftor-ivacaftor 50-75 mg & ivacaftor 75 mg tab tbpk	4	•		•	•		•
SYMDEKO tezacaftor-ivacaftor 100-150 mg & ivacaftor 150 mg tab tbpk	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
TRIKAFTA elexacaf-tezacaf-ivacaf 80-40-60 mg& ivacaf 59.5mg thpk gran	4	•		•	•		•
TRIKAFTA elexacaf-tezacaf-ivacaf 100-50-75 mg& ivacaf 75mg thpk gran	4	•		•	•		•
TRIKAFTA elexacaf-tezacaf-ivacaf 50-25-37.5 mg & ivacaftor 75 mg tbpk	4	•		•	•		•
TRIKAFTA elexacaf-tezacaf-ivacaf 100-50-75 mg & ivacaftor 150 mg tbpk	4	•		•	•		•

**GASTROINTESTINAL AGENTS****LAXATIVES**

GAVILYTE-C peg 3350-kcl-na bicarb-nacl-na sulfate for soln 240 gm	3						
<b>lactulose solution 10 gm/15ml</b>	1						
<b>peg 3350-kcl-na bicarb-nacl-na sulfate for soln 236 gm Golytely</b>	1					•	
<b>peg 3350-kcl-nacl-na sulfate-na ascorbate-c for soln 100 gm Moviprep</b>	1						
<b>peg 3350-kcl-sod bicarb-nacl for soln 420 gm Nulytely/ flavor pack</b>	1					•	
PEG-PREP bisacodyl tab & peg 3350-kcl-sod bicarb-nacl for soln kit	3						
<b>sod sulfate-pot sulf-mg sulf oral sol 17.5-3.13-1.6 gm/177ml Supr bowel prep ki</b>	1						
SUTAB sod sulfate-mg sulfate-pot chloride tab 1479-225-188 mg	3						

**ANTIDIARRHEALS**

<b>diphenoxylate w/ atropine tab 2.5-0.025 mg Lomotil</b>	1						
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Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>ULCER DRUGS</b>							
<b>cimetidine hcl soln 300 mg/5ml</b>	1						
<b>dexlansoprazole cap delayed release 30 mg, 60 mg Dexilant</b>	1			•			
<b>dicyclomine hcl cap 10 mg Bentyl</b>	1						
<b>dicyclomine hcl oral soln 10 mg/5ml</b>	1						
<b>dicyclomine hcl tab 20 mg Bentyl</b>	1						
<b>esomeprazole magnesium cap delayed release 20 mg (base eq), 40 mg (base eq) Nexium</b>	1			•			
<b>esomeprazole magnesium for delayed release susp packet 5 mg, 10 mg, 20 mg, 40 mg Nexium</b>	1			•			
<b>esomeprazole magnesium for delayed release susp pack 2.5 mg Nexium</b>	1			•			
<b>famotidine for susp 40 mg/5ml Pepcid</b>	1						
<b>famotidine tab 40 mg Pepcid</b>	1						
<b>glycopyrrolate oral soln 1 mg/5ml Cuvposa</b>	1						
<b>glycopyrrolate tab 1 mg Robinul</b>	1						
<b>glycopyrrolate tab 2 mg Robinul forte</b>	1						
<b>lansoprazole cap delayed release 30 mg Prevacid</b>	1			•			
<b>methscopolamine bromide tab 2.5 mg Pamine</b>	1						
<b>methscopolamine bromide tab 5 mg Pamine forte</b>	1						
<b>misoprostol tab 100 mcg, 200 mcg Cytotec</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NIZATIDINE nizatidine cap 300 mg	3						
nizatidine cap 150 mg	1						
omeprazole cap delayed release 10 mg, 20 mg, 40 mg Prilosec	1			•			
pantoprazole sodium ec tab 20 mg (base equiv), 40 mg (base equiv) Protonix	1			•			
rabeprazole sodium ec tab 20 mg Aciphex	1			•			
sucralfate tab 1 gm Carafate	1						
<b>ANTIEMETICS</b>							
aprepitant capsule therapy pack 80 & 125 mg Emend	1			•			
aprepitant capsule 40 mg Emend	1						
aprepitant capsule 80 mg, 125 mg Emend	1			•			
dronabinol cap 2.5 mg, 5 mg, 10 mg Marinol	1						
EMEND aprepitant for oral susp 125 mg (125 mg/5ml)	3			•			
granisetron hcl tab 1 mg	1			•			
ondansetron hcl oral soln 4 mg/5ml Zofran	1			•			
ondansetron hcl tab 4 mg, 8 mg Zofran	1			•			
ondansetron orally disintegrating tab 4 mg, 8 mg Zofran odt	1			•			
scopolamine td patch 72hr 1 mg/3days Transderm-scop	1						
trimethobenzamide hcl cap 300 mg Tigan	1						
VARUBI rolapitant hcl tab therapy pack 2 x 90 mg (base equiv)	2			•			•
<b>DIGESTIVE AIDS</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CREON pancrelipase (lip-prot-amyl) dr cap 3000-9500-15000 unit, 6000-19000-30000 unit, 12000-38000-60000 unit, 24000-76000-120000 unit, 36000-114000-180000 unit	2						
ZENPEP pancrelipase (lip-prot-amyl) dr cap 3000-10000-14000 unit, 5000-17000-24000 unit, 10000-32000-42000 unit, 15000-47000-63000 unit, 20000-63000-84000 unit, 25000-79000-105000 unit, 40000-126000-168000 unit, 60000-189600-252600 unit	2						
<b>GASTROINTESTINAL AGENTS- MISC.</b>							
alosetron hcl tab 0.5 mg (base equiv), 1 mg (base equiv) Lotronex	1						
AURYXIA ferric citrate tab 1 gm (210 mg ferric iron)	3						
balsalazide disodium cap 750 mg Colazal	1						
BYLVAY odevixibat cap 400 mcg, 1200 mcg	4				•		•
BYLVAY (PELLETS) odevixibat pellets cap sprinkle 200 mcg, 600 mcg	4				•		•
calcium acetate (phosphate binder) cap 667 mg (169 mg ca) Phoslo	1						
calcium acetate (phosphate binder) tab 667 mg	1						
CHENODAL chenodiol tab 250 mg	4				•		•
CIMZIA certolizumab pegol prefilled syringe kit 200 mg/ml	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CIMZIA STARTER KIT certolizumab pegol prefilled syringe kit 200 mg/ ml	4	•		•	•		
<b>cromolyn sodium oral conc 100 mg/5ml</b> Gastrocrom	1						
DIPENTUM olsalazine sodium cap 250 mg	3						
ENTYVIO PEN vedolizumab soln auto-injector 108 mg/0.68ml	4	•		•	•		•
IQIRVO elafibranor tab 80 mg	4	•		•	•		•
<b>lactulose (encephalopathy) solution 10 gm/15ml</b>	1						
<b>lanthanum carbonate chew tab 500 mg (elemental), 750 mg (elemental), 1000 mg (elemental)</b> Fosrenol	1						
LIVMARLI maralixibat chloride oral soln 9.5 mg/ml, 19 mg/ ml	4				•		•
<b>lubiprostone cap 8 mcg, 24 mcg</b> Amitiza	1						
<b>mesalamine cap dr 400 mg</b> Delzicol	1						
<b>mesalamine cap er 24hr 0.375 gm</b> Apriso	1						
<b>mesalamine enema 4 gm</b>	1						
<b>mesalamine suppos 1000 mg</b> Canasa	1						
<b>mesalamine tab delayed release 800 mg</b>	1						
<b>mesalamine tab delayed release 1.2 gm</b> Lialda	1						
<b>metoclopramide hcl soln 5 mg/5ml (10 mg/10ml) (base equiv)</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>metoclopramide hcl tab 5 mg (base equivalent), 10 mg (base equivalent)</b> Reglan	1						
METOCLOPRAMIDE ODT metoclopramide hcl orally disintegrating tab 5 mg (base eq)	3						
OCALIVA obeticholic acid tab 5 mg, 10 mg	4	•		•	•		•
OMVOH mirikizumab-mrkz subcutaneous sol prefill syringe 100 mg/ml	4	•		•	•		•
OMVOH mirikizumab-mrkz subcutaneous soln auto- injector 100 mg/ml	4	•		•	•		•
<b>sevelamer carbonate packet 0.8 gm, 2.4 gm</b> Renvela	1						
<b>sevelamer carbonate tab 800 mg</b> Renvela	1						
<b>sevelamer hcl tab 400 mg</b>	1						
SKYRIZI risankizumab-rzaa subcutaneous soln cartridge 180 mg/1.2ml, 360 mg/2.4ml	4	•		•	•		
<b>sulfasalazine tab delayed release 500 mg</b> Azulfidine en-tabs	1						
<b>sulfasalazine tab 500 mg</b> Azulfidine	1						
SYMPROIC naldemedine tosylate tab 0.2 mg (base equivalent)	2						
TRULANCE plecanatide tab 3 mg	2						
<b>ursodiol cap 300 mg</b> Actigall	1						
<b>ursodiol tab 250 mg</b> Urso 250	1						
<b>ursodiol tab 500 mg</b> Urso forte	1						
VELPHORO sucroferic oxyhydroxide chew tab 500 mg	2						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
VIBERZI eluxadoline tab 75 mg, 100 mg	3						
VOWST fecal microbiota spores, live-brpk caps	4				•		•
XERMELO telotristat ethyl tab 250 mg (as telotristat etiprate)	4				•		•
ZYMFENTRA 1-PEN infliximab-dyyb soln auto-injector kit 120 mg/ml	4	•		•	•		•
ZYMFENTRA 2-PEN infliximab-dyyb soln auto-injector kit 120 mg/ml	4	•		•	•		•
ZYMFENTRA 2-SYRINGE infliximab-dyyb soln prefilled syringe kit 120 mg/ml	4	•		•	•		•
<b>GENITOURINARY AGENTS</b>							
<b>URINARY ANTISPASMODICS</b>							
<b>bethanechol chloride tab 5 mg, 10 mg, 25 mg, 50 mg</b> Urecholine	1						
<b>darifenacin hydrobromide tab er 24hr 7.5 mg (base equiv), 15 mg (base equiv)</b> Enablex	1						
<b>flavoxate hcl tab 100 mg</b>	1						
<b>mirabegron tab er 24 hr 25 mg, 50 mg</b> Myrbetriq	1						
MYRBETRIQ mirabegron granules for oral extended release susp 8 mg/ml	2		•				
MYRBETRIQ mirabegron tab er 24 hr 25 mg, 50 mg	2		•				
<b>oxybutynin chloride solution 5 mg/5ml</b>	1						
<b>oxybutynin chloride tab er 24hr 5 mg, 10 mg, 15 mg</b> Ditropan xl	1						
<b>oxybutynin chloride tab 5 mg</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>solifenacin succinate tab 5 mg, 10 mg</b> Vesicare	1						
<b>tolterodine tartrate cap er 24hr 2 mg, 4 mg</b> Detrol la	1						
<b>tolterodine tartrate tab 1 mg, 2 mg</b> Detrol	1						
<b>tropium chloride cap er 24hr 60 mg</b>	1						
<b>tropium chloride tab 20 mg</b>	1						
<b>VAGINAL PRODUCTS</b>							
<b>clindamycin phosphate vaginal cream 2%</b> Cleocin	1						
ENCARE nonoxynol-9 vaginal suppos 100 mg	A					•	
<b>estradiol vaginal cream 0.1 mg/gm</b> Estrace	1						
<b>estradiol vaginal tab 10 mcg</b> Vagifem	1						
ESTRING estradiol vaginal ring 2 mg (7.5 mcg/24hrs)	3						
FEMRING estradiol acetate vaginal ring 0.05 mg/24hr, 0.1 mg/24hr	3						
GYNAZOLE-1 butoconazole nitrate (one dose) vaginal cream 2%	3						
<b>metronidazole vaginal gel 0.75%</b> Metrogel-vaginal	1						
MICONAZOLE 3 miconazole nitrate vaginal suppos 200 mg	3						
OPTIONS GYNOL II VAGINAL nonoxynol-9 gel 3%	A					•	
PHEXXI lactic acid-citric acid-potassium bitartrate gel 1.8-1-0.4%	A					•	
PREMARIN estrogens, conjugated vaginal cream 0.625 mg/gm	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>terconazole vaginal cream 0.4% Terazol 7</b>	1						
<b>terconazole vaginal cream 0.8%</b>	1						
<b>terconazole vaginal suppos 80 mg</b>	1						
TODAY SPONGE nonoxynol-9 vaginal sponge 1000 mg	A					•	
VCF VAGINAL CONTRACEPTIVE nonoxynol gel 4%	A					•	
VCF VAGINAL CONTRACEPTIVE nonoxynol film 28%	A					•	
VCF VAGINAL CONTRACEPTIVE nonoxynol foam 12.5%	A					•	
<b>GENITOURINARY AGENTS - MISC.</b>							
<b>alfuzosin hcl tab er 24hr 10 mg Uroxatral</b>	1						
CYSTAGON cysteamine bitartrate cap 50 mg, 150 mg	4				•		•
<b>dutasteride cap 0.5 mg Avodart</b>	1						
ELMIRON pentosan polysulfate sodium caps 100 mg	3						
FILSPARI sparsentan tab 200 mg, 400 mg	4	•		•	•		•
<b>finasteride tab 5 mg Proscar</b>	1						
K-PHOS NO 2 potassium & sodium acid phosphates tab 305-700 mg	2						
LITHOSTAT acetohydroxamic acid tab 250 mg	3						
<b>potassium citrate tab er 5 meq (540 mg) Urocit-k 5</b>	1						
<b>potassium citrate tab er 10 meq (1080 mg) Urocit-k 10</b>	1						
<b>potassium citrate tab er 15 meq (1620 mg) Urocit-k 15</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>silodosin cap 4 mg, 8 mg Rapaflo</b>	1						
<b>sodium citrate &amp; citric acid soln 500-334 mg/5ml Shohls solution modi</b>	1						
<b>tamsulosin hcl cap 0.4 mg Flomax</b>	1						
<b>tiopronin tab delayed release 100 mg, 300 mg Thiola ec</b>	1						•
<b>tiopronin tab 100 mg Thiola</b>	1						•
<b>CENTRAL NERVOUS SYSTEM DRUGS</b>							
<b>ANTIANSXIETY AGENTS</b>							
<b>alprazolam tab er 24hr 0.5 mg, 1 mg, 2 mg, 3 mg Xanax xr</b>	1						
<b>alprazolam tab 0.25 mg, 0.5 mg, 1 mg, 2 mg Xanax</b>	1						
<b>bupirone hcl tab 5 mg, 10 mg, 15 mg, 30 mg</b>	1						
<b>chlordiazepoxide hcl cap 5 mg, 10 mg, 25 mg</b>	1						
<b>clorazepate dipotassium tab 3.75 mg, 7.5 mg, 15 mg Tranxene t</b>	1						
<b>diazepam conc 5 mg/ml</b>	1						
<b>diazepam oral soln 1 mg/ml</b>	1						
<b>diazepam tab 2 mg, 5 mg, 10 mg Valium</b>	1						
<b>hydroxyzine hcl syrup 10 mg/5ml</b>	1						
<b>hydroxyzine hcl tab 10 mg, 25 mg, 50 mg</b>	1						
<b>hydroxyzine pamoate cap 25 mg, 50 mg Vistaril</b>	1						
<b>lorazepam conc 2 mg/ml Lorazepam intensol</b>	1						
<b>lorazepam tab 0.5 mg, 1 mg, 2 mg Ativan</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
meprobamate tab 200 mg, 400 mg	1						
oxazepam cap 10 mg, 15 mg, 30 mg	1						
<b>ANTIDEPRESSANTS</b>							
amitriptyline hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1						
amoxapine tab 25 mg, 50 mg, 100 mg, 150 mg	1						
bupropion hcl tab er 12hr 100 mg, 150 mg, 200 mg Wellbutrin sr	1			•			
bupropion hcl tab er 24hr 150 mg, 300 mg Wellbutrin xl	1			•			
bupropion hcl tab 75 mg, 100 mg Wellbutrin	1			•			
citalopram hydrobromide oral soln 10 mg/5ml	1			•			
citalopram hydrobromide tab 10 mg (base equiv), 20 mg (base equiv), 40 mg (base equiv) Celexa	1			•			
clomipramine hcl cap 25 mg, 50 mg, 75 mg Anafranil	1						
desipramine hcl tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg Norpramin	1						
desvenlafaxine succinate tab er 24hr 25 mg (base equiv), 50 mg (base equiv), 100 mg (base equiv) Pristiq	1			•			
doxepin hcl cap 10 mg, 25 mg, 50 mg, 75 mg, 100 mg, 150 mg	1						
doxepin hcl conc 10 mg/ml	1						
duloxetine hcl enteric coated pellets cap 20 mg (base eq), 30 mg (base eq), 60 mg (base eq) Cymbalta	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
EMSAM selegiline td patch 24hr 6 mg/24hr, 9 mg/24hr, 12 mg/24hr	3						
escitalopram oxalate soln 5 mg/5ml (base equiv) Lexapro	1			•			
escitalopram oxalate tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv) Lexapro	1			•			
FETZIMA levomilnacipran hcl cap er 24hr 20 mg (base equivalent), 40 mg (base equivalent), 80 mg (base equivalent), 120 mg (base equivalent)	3			•	•		
FETZIMA TITRATION PACK levomilnacipran hcl cap er 24hr 20 & 40 mg therapy pack	3			•	•		
FLUOXETINE DR fluoxetine hcl cap delayed release 90 mg	3			•	•		
fluoxetine hcl cap 10 mg, 20 mg, 40 mg Prozac	1			•			
fluoxetine hcl solution 20 mg/5ml	1			•			
fluoxetine hcl tab 10 mg, 20 mg	1			•			
fluvoxamine maleate tab 25 mg, 50 mg, 100 mg	1			•			
imipramine hcl tab 10 mg, 25 mg, 50 mg Tofranil	1						
MARPLAN isocarboxazid tab 10 mg	3						
mirtazapine orally disintegrating tab 15 mg, 30 mg, 45 mg Remeron soltab	1			•			
mirtazapine tab 7.5 mg	1			•			
mirtazapine tab 15 mg, 30 mg, 45 mg Remeron	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NEFAZODONE HYDROCHLORIDE nefazodon hcl tab 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3						
<b>nortriptyline hcl cap 10 mg, 25 mg, 50 mg, 75 mg</b> Pamelor	1						
<b>nortriptyline hcl soln 10 mg/5ml</b>	1						
<b>paroxetine hcl tab 10 mg, 20 mg, 30 mg, 40 mg</b> Paxil	1			•			
PHENELZINE SULFATE phenelzine sulfate tab 15 mg	3						
<b>protriptyline hcl tab 5 mg, 10 mg</b>	1						
<b>sertraline hcl oral concentrate for solution 20 mg/ml</b> Zoloft	1			•			
<b>sertraline hcl tab 25 mg, 50 mg, 100 mg</b> Zoloft	1			•			
<b>tranylcypromine sulfate tab 10 mg</b> Parnate	1						
<b>trazodone hcl tab 50 mg, 100 mg, 150 mg</b>	1						
<b>trimipramine maleate cap 25 mg, 50 mg, 100 mg</b>	1						
TRINTELLIX vortioxetine hbr tab 5 mg (base equiv), 10 mg (base equiv), 20 mg (base equiv)	3		•	•			
<b>venlafaxine hcl cap er 24hr 37.5 mg (base equivalent), 75 mg (base equivalent), 150 mg (base equivalent)</b> Effexor xr	1			•			
<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>	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>vilazodone hcl tab 10 mg, 20 mg, 40 mg</b> Viibryd	1			•			
ZURZUVAE zuranolone cap 20 mg, 25 mg, 30 mg	2			•			
<b>ANTIPSYCHOTICS</b>							
<b>aripiprazole oral solution 1 mg/ml</b>	1			•			
<b>aripiprazole orally disintegrating tab 10 mg, 15 mg</b>	1			•			
<b>aripiprazole tab 2 mg, 5 mg, 10 mg, 15 mg, 20 mg, 30 mg</b> Abilify	1			•			
<b>asenapine maleate sl tab 2.5 mg (base equiv), 5 mg (base equiv), 10 mg (base equiv)</b> Saphris	1			•			
<b>chlorpromazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg, 200 mg</b>	1						
CLOZAPINE ODT clozapine orally disintegrating tab 12.5 mg	3		•	•			
<b>clozapine orally disintegrating tab 25 mg, 100 mg</b> Fazaclo	1			•			
<b>clozapine orally disintegrating tab 150 mg, 200 mg</b>	1			•			
<b>clozapine tab 25 mg, 100 mg</b> Clozaril	1			•			
<b>clozapine tab 50 mg, 200 mg</b>	1			•			
EQUETRO carbamazepine (mood) cap er 12hr 100 mg, 200 mg, 300 mg	3						
FANAPT iloperidone tab 1 mg, 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3		•	•			
FANAPT TITRATION PACK iloperidone tab 1 mg & 2 mg & 4 mg & 6 mg titration pak	3		•	•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
FLUPHENAZINE HCL fluphenazine hcl oral conc 5 mg/ml	3						
<b>fluphenazine hcl tab 1 mg, 2.5 mg, 5 mg, 10 mg</b>	1						
FLUPHENAZINE HYDROCHLORID fluphenazin hcl elixir 2.5 mg/5ml	3						
<b>haloperidol lactate oral conc 2 mg/ml</b>	1						
<b>haloperidol tab 0.5 mg, 1 mg, 2 mg, 5 mg, 10 mg, 20 mg</b>	1						
LITHIUM CARBONATE lithium carbonate cap 150 mg, 300 mg, 600 mg	3						
<b>lithium carbonate cap 150 mg, 600 mg</b> Lithium carbonate	1						
<b>lithium carbonate cap 300 mg</b>	1						
<b>lithium carbonate tab er 300 mg</b> Lithobid	1						
<b>lithium carbonate tab er 450 mg</b>	1						
<b>lithium carbonate tab 300 mg</b>	1						
LITHOBID lithium carbonate tab er 300 mg	3						
<b>loxapine succinate cap 5 mg, 10 mg, 25 mg, 50 mg</b>	1						
<b>lurasidone hcl tab 20 mg, 40 mg, 60 mg, 80 mg, 120 mg</b> Latuda	1			•			
MOLINDONE HYDROCHLORIDE molindone hcl tab 5 mg, 10 mg, 25 mg	3						
<b>olanzapine orally disintegrating tab 5 mg, 10 mg, 15 mg, 20 mg</b> Zyprexa zydis	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>olanzapine tab 2.5 mg, 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg</b> Zyprexa	1			•			
<b>paliperidone tab er 24hr 1.5 mg, 3 mg, 6 mg, 9 mg</b> Invega	1			•			
<b>perphenazine tab 2 mg, 4 mg, 8 mg, 16 mg</b>	1						
<b>prochlorperazine maleate tab 5 mg (base equivalent), 10 mg (base equivalent)</b> Compazine	1						
<b>prochlorperazine suppos 25 mg</b>	1						
<b>quetiapine fumarate tab er 24hr 50 mg, 150 mg, 200 mg, 300 mg, 400 mg</b> Seroquel xr	1			•			
<b>quetiapine fumarate tab 25 mg, 50 mg, 100 mg, 200 mg, 300 mg, 400 mg</b> Seroquel	1			•			
REXULTI brexpiprazole tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg	2			•			
RISPERIDONE ODT risperidone orally disintegrating tab 0.25 mg	3		•	•			
<b>risperidone orally disintegrating tab 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b> Risperdal m-tab	1			•			
<b>risperidone soln 1 mg/ ml</b> Risperdal	1			•			
<b>risperidone tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</b> Risperdal	1			•			
SECUADO asenapine td patch 24 hr 3.8 mg/24hr, 5.7 mg/24hr, 7.6 mg/24hr	3		•	•			
THIORIDAZINE HCL thioridazine hcl tab 10 mg, 25 mg, 50 mg, 100 mg	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>thiothixene cap 1 mg, 2 mg, 5 mg, 10 mg</b>	1						
<b>trifluoperazine hcl tab 1 mg (base equivalent), 2 mg (base equivalent), 5 mg (base equivalent), 10 mg (base equivalent)</b>	1						
VERSACLOZ clozapine susp 50 mg/ml	3		•	•			
VRAYLAR cariprazine hcl cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)	2			•			
<b>ziprasidone hcl cap 20 mg, 40 mg, 60 mg, 80 mg Geodon</b>	1			•			
<b>HYPNOTICS</b>							
BELSOMRA suvorexant tab 5 mg, 10 mg, 15 mg, 20 mg	3		•	•			
<b>estazolam tab 1 mg, 2 mg</b>	1						
<b>eszopiclone tab 1 mg, 2 mg, 3 mg Lunesta</b>	1			•			
HETLIOZ LQ tasimelteon oral susp 4 mg/ml	4	•		•	•		•
<b>phenobarbital elixir 20 mg/5ml</b>	1						
<b>phenobarbital tab 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg, 100 mg</b>	1						
<b>tasimelteon capsule 20 mg HetlioZ</b>	4	•		•	•		
<b>temazepam cap 15 mg, 30 mg Restoril</b>	1						
<b>zaleplon cap 5 mg, 10 mg Sonata</b>	1			•			
<b>zolpidem tartrate tab er 6.25 mg, 12.5 mg Ambien cr</b>	1			•			
<b>zolpidem tartrate tab 5 mg, 10 mg Ambien</b>	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS</b>							
<b>amphetamine-dextroamphetamine cap er 24hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg Adderall xr</b>	1				•		
<b>amphetamine-dextroamphetamine tab 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg Adderall</b>	1				•		
<b>armodafinil tab 50 mg, 150 mg, 200 mg, 250 mg Nuvigil</b>	1						
<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) Strattera</b>	1				•		
<b>caffeine citrate oral soln 60 mg/3ml (10 mg/ml base equiv)</b>	1						
<b>clonidine hcl tab er 12hr 0.1 mg Kapvay</b>	1				•		
<b>dexmethylphenidate hcl cap er 24 hr 5 mg, 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg Focalin xr</b>	1				•		
<b>dexmethylphenidate hcl tab 2.5 mg, 5 mg, 10 mg Focalin</b>	1				•		
<b>dextroamphetamine sulfate cap er 24hr 5 mg, 10 mg, 15 mg Dexedrine</b>	1				•		
<b>dextroamphetamine sulfate oral solution 5 mg/5ml Procentra</b>	1				•		
<b>dextroamphetamine sulfate tab 5 mg, 10 mg</b>	1				•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv) Intuniv</b>	1			•			
IMCIVREE setmelanotide acetate subcutaneous soln 10 mg/ml	4	•		•	•		•
<b>lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg Vyvanse</b>	1			•			
<b>lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg Vyvanse</b>	1			•			
LOMAIRA phentermine hcl tab 8 mg	3	•		•			
METHAMPHETAMINE HYDROCHLO methamphetamine hcl tab 5 mg	3		•	•			
<b>methylphenidate hcl cap er 10 mg (cd), 20 mg (cd), 30 mg (cd), 40 mg (cd), 50 mg (cd), 60 mg (cd)</b>	1			•			
<b>methylphenidate hcl cap er 24hr 10 mg (la), 20 mg (la), 30 mg (la), 40 mg (la) Ritalin la</b>	1			•			
<b>methylphenidate hcl cap er 24hr 60 mg (la)</b>	1			•			
<b>methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg</b>	1			•			
<b>methylphenidate hcl soln 5 mg/5ml, 10 mg/5ml Methylin</b>	1			•			
<b>methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mg Concerta</b>	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>methylphenidate hcl tab er osmotic release (osm) 72 mg</b>	1						
<b>methylphenidate hcl tab er 10 mg, 20 mg</b>	1			•			
<b>methylphenidate hcl tab 5 mg, 10 mg, 20 mg Ritalin</b>	1			•			
METHYLPHENIDATE HYDROCHLO methylphenidate hcl tab er 24hr 18 mg	1			•			
METHYLPHENIDATE HYDROCHLO methylphenidate hcl tab er 24hr 27 mg, 36 mg, 54 mg	3			•			
<b>modafinil tab 100 mg, 200 mg Provigil</b>	1						
ORLISTAT orlistat cap 120 mg	3	•		•			
<b>phentermine hcl cap 15 mg, 30 mg, 37.5 mg</b>	1	•		•			
<b>phentermine hcl tab 37.5 mg Adipex-p</b>	1	•		•			
QSYMIA phentermine hcl-topiramate cap er 24hr 3.75-23 mg, 7.5-46 mg, 11.25-69 mg, 15-92 mg	3	•		•			
SAXENDA liraglutide (weight mngmt) soln pen-inj 18 mg/3ml (6 mg/ml)	2	•		•			
SUNOSI solriamfetol hcl tab 75 mg (base equiv), 150 mg (base equiv)	2	•		•			
VYVANSE lisdexamfetamine dimesylate cap 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg, 70 mg	2		•	•			
VYVANSE lisdexamfetamine dimesylate chew tab 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	2		•	•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
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	2	•		•			
XENICAL orlistat cap 120 mg	3	•		•			
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	2	•		•			
<b>PSYCHOTHERAPEUTIC and NEUROLOGICAL AGENTS - MISC.</b>							
acamprosate calcium tab delayed release 333 mg	1						
AUSTEDO deutetrabenazine tab 6 mg, 9 mg, 12 mg	4	•		•	•		
AUSTEDO XR deutetrabenazine tab er 24hr 6 mg, 12 mg, 18 mg, 24 mg, 30 mg, 36 mg, 42 mg, 48 mg	4	•		•	•		
AUSTEDO XR PATIENT TITRAT deutetrabenazine tab er titration pack 12 & 18 & 24 & 30 mg	4	•		•	•		
AVONEX interferon beta-1a im prefilled syringe kit 30 mcg/0.5ml	4	•		•	•		
AVONEX PEN interferon beta-1a im auto-injector kit 30 mcg/0.5ml	4	•		•	•		
BETASERON interferon beta-1b for inj kit 0.3 mg	4	•		•	•		
bupropion hcl (smoking deterrent) tab er 12hr 150 mg Zyban	A					•	
CHLORDIAZEPOXIDE/AMITRIPT chlordiazepoxide-amitriptyline tab 5-12.5 mg, 10-25 mg	3						
dalfampridine tab er 12hr 10 mg Ampyra	4				•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
dimethyl fumarate capsule delayed release 120 mg, 240 mg Tecfidera	3	•		•	•		
dimethyl fumarate capsule dr starter pack 120 mg & 240 mg Tecfidera starter pa	3	•		•	•		
disulfiram tab 250 mg, 500 mg Antabuse	1						
donepezil hydrochloride orally disintegrating tab 5 mg, 10 mg	1						
donepezil hydrochloride tab 5 mg, 10 mg, 23 mg Aricept	1						
fingolimod hcl cap 0.5 mg (base equiv) Gilenya	4	•		•	•		
GALANTAMINE HYDROBROMIDE galantamine hydrobromide oral soln 4 mg/ml	3						
galantamine hydrobromide cap er 24hr 8 mg, 16 mg, 24 mg Razadyne er	1						
galantamine hydrobromide tab 4 mg, 8 mg, 12 mg Razadyne	1						
GILENYA fingolimod hcl cap 0.25 mg (base equiv)	4	•		•	•		
glatiramer acetate soln prefilled syringe 20 mg/ml, 40 mg/ml Copaxone	4	•		•	•		
INGREZZA valbenazine tosylate cap therapy pack 40 mg (7) & 80 mg (21)	4	•		•	•		•
INGREZZA valbenazine tosylate cap 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	4	•		•	•		•
INGREZZA valbenazine tosylate capsule sprinkle 40 mg (base equiv), 60 mg (base equiv), 80 mg (base equiv)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
KESIMPTA ofatumumab soln auto-injector 20 mg/0.4ml	4	•		•	•		
<b>lofexidine hcl tab 0.18 mg (base equivalent) Lucemyra</b>	1						
LUMRYZ sodium oxybate pack for oral er susp 4.5 gm, 6 gm, 7.5 gm, 9 gm	4	•		•	•		•
LUMRYZ STARTER PACK sodium oxybate pack for er susp 4.5 & 6 & 7.5 gm starter pak	4	•		•	•		•
MAVENCLAD 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)	4	•		•	•		•
MAYZENT siponimod fumarate tab 0.25 mg (base equiv), 1 mg (base equiv), 2 mg (base equiv)	4	•		•	•		•
MAYZENT STARTER PACK siponimod fumarate tab 0.25 mg (7) starter pack	4	•		•	•		•
MAYZENT STARTER PACK siponimod fumarate tab 0.25 mg (12) starter pack	4	•		•	•		•
<b>memantine hcl oral solution 2 mg/ml Namenda</b>	1						
<b>memantine hcl tab 5 mg, 10 mg Namenda</b>	1						
<b>memantine hcl tab 28 x 5 mg &amp; 21 x 10 mg titration pack Namenda titration pa</b>	1						
NICODERM CQ nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr	A					•	
NICORETTE nicotine polacrilex gum 2 mg, 4 mg	A					•	
NICORETTE nicotine polacrilex lozenge 2 mg, 4 mg	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NICORETTE MINI nicotine polacrilex lozenge 2 mg, 4 mg	A					•	
NICORETTE STARTER KIT nicotine polacrilex gum 2 mg, 4 mg	A					•	
<b>nicotine polacrilex gum 2 mg, 4 mg</b>	A					•	
<b>nicotine polacrilex lozenge 2 mg, 4 mg</b>	A					•	
<b>nicotine td patch 24hr 7 mg/24hr, 14 mg/24hr, 21 mg/24hr</b>	A					•	
NICOTINE TRANSDERMAL SYST nicotine td patch 24 hr kit 21-14-7 mg/24hr	A					•	
NICOTROL INHALER nicotine inhaler system 10 mg (4 mg delivered)	A					•	
NICOTROL NS nicotine nasal spray 10 mg/ml (0.5 mg/spray)	A					•	
PERPHENAZINE/AMITRIPTYLIN perphenazine amitriptyline tab 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg	3						
PIMOZIDE pimozone tab 1 mg, 2 mg	3						
PLEGRIDY peginterferon beta-1a soln auto-injector 125 mcg/0.5ml	4	•		•	•		•
PLEGRIDY peginterferon beta-1a soln prefilled syringe 125 mcg/0.5ml	4	•		•	•		•
PLEGRIDY peginterferon beta-1a im soln prefilled syr 125 mcg/0.5ml	4	•		•	•		•
PLEGRIDY STARTER PACK peginterferon beta-1a soln auto-inj 63 & 94 mcg/0.5ml pack	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
PLEGRIDY STARTER PACK peginterferon beta-1a soln pref syr 63 & 94 mcg/0.5ml pack	4	•		•	•		•
REBIF interferon beta-1a soln pref syr 22 mcg/0.5ml, 44 mcg/0.5ml	4	•		•	•		
REBIF REBIDOSE interferon beta-1a soln auto-inj 22 mcg/0.5ml, 44 mcg/0.5ml	4	•		•	•		
REBIF REBIDOSE TITRATION interferon beta-1a auto-inj 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	4	•		•	•		
REBIF TITRATION PACK interferon beta-1a pref syr 6x8.8 mcg/0.2ml & 6x22 mcg/0.5ml	4	•		•	•		
<b>rivastigmine tartrate cap 1.5 mg (base equivalent), 3 mg (base equivalent), 4.5 mg (base equivalent), 6 mg (base equivalent)</b>	1						
<b>rivastigmine td patch 24hr 4.6 mg/24hr, 9.5 mg/24hr, 13.3 mg/24hr Exelon</b>	1						
SAVELLA milnacipran hcl tab 12.5 mg, 25 mg, 50 mg, 100 mg	3		•				
SAVELLA TITRATION PACK milnacipran hcl tab 12.5 mg (5) & 25 mg (8) & 50 mg (42) pak	3		•				
SODIUM OXYBATE sodium oxybate oral solution 500 mg/ml	4	•		•	•		•
<b>teriflunomide tab 7 mg, 14 mg Aubagio</b>	4	•		•	•		
<b>tetrabenazine tab 12.5 mg, 25 mg Xenazine</b>	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>varenicline tartrate tab 0.5 mg (base equiv), 1 mg (base equiv)</b>	A					•	
<b>varenicline tartrate tab 11 x 0.5 mg &amp; 42 x 1 mg start pack</b>	A					•	
VUMERITY diroximel fumarate capsule delayed release 231 mg	4	•		•	•		•
WAINUA eplontersen sodium subcutaneous soln auto-inj 45 mg/0.8ml	4	•		•	•		•
XYWAV calcium, mag, potassium, & sod oxybates oral soln 500 mg/ml	4	•		•	•		•
ZEPOSIA ozanimod hcl cap 0.92 mg	4	•		•	•		
ZEPOSIA STARTER KIT ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg & 21 x 0.92 mg	4	•		•	•		
ZEPOSIA 7-DAY STARTER PAC ozanimod cap pack 4 x 0.23 mg & 3 x 0.46 mg	4	•		•	•		
<b>ANALGESICS AND ANESTHETICS</b>							
<b>ANALGESICS - NON-NARCOTIC</b>							
<b>aspirin chew tab 81 mg</b>	A					•	
<b>aspirin tab delayed release 81 mg</b>	A					•	
<b>butalbital-acetaminophen tab 50-325 mg</b>	1			•			
<b>butalbital-acetaminophen- caffeine tab 50-325-40 mg Esgic</b>	1			•			
<b>butalbital-aspirin-caffeine cap 50-325-40 mg Fiorinal</b>	1			•			
<b>diflunisal tab 500 mg</b>	1						
TENCON butalbital- acetaminophen tab 50-325 mg	3			•			
<b>ANALGESICS - NARCOTIC</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>acetaminophen w/ codeine tab 300-15 mg</b> Tylenol/ codeine	1			•			
<b>acetaminophen w/ codeine tab 300-30 mg</b> Tylenol/ codeine #3	1			•			
<b>acetaminophen w/ codeine tab 300-60 mg</b> Tylenol/ codeine #4	1			•			
ACETAMINOPHEN/ CODEINE acetaminophen w/ codeine soln 120-12 mg/5ml	3			•			
BELBUCA buprenorphine hcl buccal film 75 mcg (base equivalent), 150 mcg (base equivalent), 300 mcg (base equivalent), 450 mcg (base equivalent), 600 mcg (base equivalent), 750 mcg (base equivalent), 900 mcg (base equivalent)	2						
<b>buprenorphine hcl sl tab 2 mg (base equiv), 8 mg (base equiv)</b>	1						
<b>buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 12-3 mg (base equiv)</b>	1						
<b>buprenorphine hcl-naloxone hcl sl film 8-2 mg (base equiv)</b> Suboxone	1						
<b>buprenorphine hcl-naloxone hcl sl tab 2-0.5 mg (base equiv), 8-2 mg (base equiv)</b>	1						
<b>buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr</b> Butrans	1						
<b>butalbital-acetaminophen-caff w/ cod cap 50-325-40-30 mg</b>	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>butalbital-aspirin-caff w/ codeine cap 50-325-40-30 mg</b> Fiorinal/ codeine #3	1			•			
<b>butorphanol tartrate nasal soln 10 mg/ml</b>	1			•			
BUTRANS buprenorphine td patch weekly 5 mcg/hr, 7.5 mcg/hr, 10 mcg/hr, 15 mcg/hr, 20 mcg/hr	3						
<b>codeine sulfate tab 30 mg</b> Codeine sulfate	1			•			
<b>fentanyl td patch 72hr 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr, 100 mcg/hr</b> Duragesic	1	•		•			
HYDROCODONE BITARTRATE ER hydrocodone bitartrate cap er 12hr 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg	3	•		•			
HYDROCODONE BITARTRATE/ AC hydrocodone-acetaminophen tab 2.5-325 mg	2			•			
<b>hydrocodone-acetaminophen soln 7.5-325 mg/15ml</b> Hycet	1			•			
<b>hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mg</b> Norco	1			•			
<b>hydrocodone-ibuprofen tab 7.5-200 mg</b> Vicoprofen	1			•			
<b>hydromorphone hcl liqd 1 mg/ml</b> Dilaudid	1			•			
<b>hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg</b>	1	•		•			
<b>hydromorphone hcl tab 2 mg, 4 mg, 8 mg</b> Dilaudid	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
methadone hcl conc 10 mg/ml Methadose	1			•			
methadone hcl soln 5 mg/5ml, 10 mg/5ml Methadone hcl	1			•			
methadone hcl tab for oral susp 40 mg	1			•			
methadone hcl tab 5 mg Dolophine hcl	1			•			
methadone hcl tab 10 mg Dolophine	1			•			
morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml)	1			•			
morphine sulfate oral soln 20 mg/5ml Morphine sulfate	1						
morphine sulfate tab er 15 mg, 30 mg, 60 mg, 100 mg, 200 mg Ms contin	1	•		•			
morphine sulfate tab 15 mg, 30 mg Morphine sulfate	1			•			
NUCYNTA ER tapentadol hcl tab er 12hr 50 mg, 100 mg, 150 mg, 200 mg, 250 mg	3	•		•			
oxycodone hcl conc 100 mg/5ml (20 mg/ml) Oxycodone hcl	1			•			
oxycodone hcl soln 5 mg/5ml Oxycodone hcl	1			•			
oxycodone hcl tab 5 mg, 15 mg, 30 mg Roxicodone	1			•			
oxycodone hcl tab 10 mg, 20 mg	1			•			
oxycodone w/ acetaminophen tab 2.5-325 mg, 5-325 mg, 7.5-325 mg, 10-325 mg Percocet	1			•			
OXYCONTIN oxycodone hcl tab er 12hr deter 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg	2	•		•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
oxymorphone hcl tab 5 mg, 10 mg Opana	1			•			
OXYMORPHONE HYDROCHLORIDE oxymorph hcl tab er 12hr 5 mg, 7.5 mg, 10 mg, 15 mg, 20 mg, 30 mg, 40 mg	3	•		•			
SUBOXONE buprenorphine hcl-naloxone hcl sl film 2-0.5 mg (base equiv), 4-1 mg (base equiv), 8-2 mg (base equiv), 12-3 mg (base equiv)	3						
tramadol hcl tab er 24hr 100 mg, 200 mg, 300 mg	1	•		•			
tramadol hcl tab 50 mg Ultram	1			•			
tramadol-acetaminophen tab 37.5-325 mg Ultracet	1			•			
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)	2						
<b>ANALGESICS - ANTI-INFLAMMATORY</b>							
ADALIMUMAB-AATY 1-PEN KIT adalimumab-aaty auto-injector kit 40 mg/0.4ml, 80 mg/0.8ml	4	•		•	•		
ADALIMUMAB-AATY 2-PEN KIT adalimumab-aaty auto-injector kit 40 mg/0.4ml	4	•		•	•		
ADALIMUMAB-AATY 2-SYRINGE adalimumab-aaty prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml	4	•		•	•		
ADALIMUMAB-ADAZ adalimumab-adaz soln auto-injector 40 mg/0.4ml	4	•		•	•		
ADALIMUMAB-ADAZ adalimumab-adaz soln prefilled syringe 40 mg/0.4ml	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ARCALYST rilonacept for inj 220 mg	4	•		•	•		•
AURANOFIN auranofin cap 3 mg	3						
<b>celecoxib cap 50 mg, 100 mg, 200 mg, 400 mg Celebrex</b>	1						
<b>diclofenac potassium tab 50 mg</b>	1						
<b>diclofenac sodium tab delayed release 25 mg, 50 mg, 75 mg</b>	1						
<b>diclofenac w/ misoprostol tab delayed release 50-0.2 mg Arthrotec 50</b>	1						
<b>diclofenac w/ misoprostol tab delayed release 75-0.2 mg Arthrotec 75</b>	1						
ENBREL etanercept subcutaneous inj 25 mg/0.5ml	4	•		•	•		
ENBREL etanercept subcutaneous soln prefilled syringe 25 mg/0.5ml, 50 mg/ml	4	•		•	•		
ENBREL MINI etanercept subcutaneous solution cartridge 50 mg/ml	4	•		•	•		
ENBREL SURECLICK etanercept subcutaneous solution auto-injector 50 mg/ml	4	•		•	•		
<b>etodolac cap 200 mg, 300 mg</b>	1						
<b>etodolac tab 400 mg, 500 mg</b>	1						
<b>fenoprofen calcium tab 600 mg</b>	1						
FLURBIPROFEN flurbiprofen tab 50 mg	3						
<b>flurbiprofen tab 100 mg</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
HADLIMA adalimumab-bwwd soln prefilled syringe 40 mg/0.4ml, 40 mg/0.8ml	4	•		•	•		
HADLIMA PUSHTOUCH adalimumab-bwwd soln auto-injector 40 mg/0.4ml, 40 mg/0.8ml	4	•		•	•		
<b>ibuprofen tab 400 mg, 600 mg, 800 mg</b>	1						
<b>indomethacin cap er 75 mg</b>	1						
<b>indomethacin cap 25 mg, 50 mg</b>	1						
<b>ketorolac tromethamine tab 10 mg</b>	1			•			
KEVZARA sarilumab subcutaneous soln prefilled syringe 150 mg/1.14ml, 200 mg/1.14ml	4	•		•	•		
KEVZARA sarilumab subcutaneous solution auto-injector 150 mg/1.14ml, 200 mg/1.14ml	4	•		•	•		
<b>leflunomide tab 10 mg, 20 mg Arava</b>	1						
MECLOFENAMATE SODIUM meclufenamate sodium cap 50 mg, 100 mg	3						
<b>mefenamic acid cap 250 mg</b>	1						
<b>meloxicam tab 7.5 mg, 15 mg Mobic</b>	1						
<b>nabumetone tab 500 mg, 750 mg</b>	1						
<b>naproxen sodium tab 275 mg Anaprox</b>	1						
<b>naproxen sodium tab 550 mg Anaprox ds</b>	1						
<b>naproxen tab 250 mg, 375 mg, 500 mg Naprosyn</b>	1						
OLUMIANT baricitinib tab 1 mg, 2 mg, 4 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ORENCIA abatacept subcutaneous soln prefilled syringe 50 mg/0.4ml, 87.5 mg/0.7ml, 125 mg/ml	4	•		•	•		
ORENCIA CLICKJECT abatacept subcutaneous soln auto-injector 125 mg/ml	4	•		•	•		
OTEZLA apremilast tab starter therapy pack 4 x 10 mg & 51 x 20 mg, 10 mg & 20 mg & 30 mg	4	•		•	•		
OTEZLA apremilast tab 20 mg, 30 mg	4	•		•	•		
OTREXUP methotrexate soln pf auto-injector 10 mg/0.4ml, 12.5 mg/0.4ml, 15 mg/0.4ml, 17.5 mg/0.4ml, 20 mg/0.4ml, 22.5 mg/0.4ml, 25 mg/0.4ml	2						
<b>oxaprozin tab 600 mg</b> Daypro	1						
<b>piroxicam cap 10 mg, 20 mg</b> Feldene	1						
RIDAURA auranofin cap 3 mg	3						
RINVOQ upadacitinib tab er 24hr 15 mg, 30 mg, 45 mg	4	•		•	•		•
RINVOQ LQ upadacitinib oral soln 1 mg/ml	4	•		•	•		•
SIMLANDI adalimumab-ryvk prefilled syringe kit 20 mg/0.2ml, 40 mg/0.4ml, 80 mg/0.8ml	4	•		•	•		
SIMLANDI 1-PEN KIT adalimumab-ryvk auto-injector kit 40 mg/0.4ml	4	•		•	•		
SIMLANDI 2-PEN KIT adalimumab-ryvk auto-injector kit 40 mg/0.4ml	4	•		•	•		
SIMPONI golimumab subcutaneous soln auto-injector 100 mg/ml	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
SIMPONI golimumab subcutaneous soln prefilled syringe 100 mg/ml	4	•		•	•		
<b>sulindac tab 150 mg, 200 mg</b>	1						
TYENNE tocilizumab-aazg subcutaneous soln auto-inj 162 mg/0.9ml	4	•		•	•		
TYENNE tocilizumab-aazg subcutaneous soln pref syr 162 mg/0.9ml	4	•		•	•		
XELJANZ tofacitinib citrate oral soln 1 mg/ml (base equivalent)	4	•		•	•		
XELJANZ tofacitinib citrate tab 5 mg (base equivalent), 10 mg (base equivalent)	4	•		•	•		
XELJANZ XR tofacitinib citrate tab er 24hr 11 mg (base equivalent), 22 mg (base equivalent)	4	•		•	•		
<b>MIGRAINE PRODUCTS</b>							
AIMOVIG erenumab-aooe subcutaneous soln auto-injector 70 mg/ml, 140 mg/ml	2	•		•			
AJOVY fremanezumab-vfrm subcutaneous soln auto-inj 225 mg/1.5ml	2	•		•			
AJOVY fremanezumab-vfrm subcutaneous soln pref syr 225 mg/1.5ml	2	•		•			
<b>dihydroergotamine mesylate inj 1 mg/ml</b> D.h.e. 45	1						
<b>eletriptan hydrobromide tab 20 mg (base equivalent), 40 mg (base equivalent)</b> Relpax	1			•			
EMGALITY galcanezumab-gnlm subcutaneous soln auto-injector 120 mg/ml	2	•		•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
EMGALITY galcanezumab-gnlm subcutaneous soln prefilled syr 100 mg/ml, 120 mg/ml	2	•		•			
ERGOMAR ergotamine tartrate sl tab 2 mg	3						
ERGOTAMINE TARTRATE/CAFFE ergotamine w/ caffeine tab 1-100 mg	3						
<b>frovatriptan succinate tab 2.5 mg (base equivalent) Frova</b>	1		•	•			
<b>naratriptan hcl tab 1 mg (base equiv), 2.5 mg (base equiv) Amerge</b>	1			•			
NURTEC rimegepant sulfate tab disint 75 mg	2	•		•			
QULIPTA atogepant tab 10 mg, 30 mg, 60 mg	2	•		•			
REYVOW lasmiditan succinate tab 50 mg, 100 mg	2	•		•			
<b>rizatriptan benzoate oral disintegrating tab 5 mg (base eq), 10 mg (base eq) Maxalt-mlt</b>	1			•			
<b>rizatriptan benzoate tab 5 mg (base equivalent), 10 mg (base equivalent) Maxalt</b>	1			•			
<b>sumatriptan nasal spray 5 mg/act, 20 mg/act Imitrex</b>	1			•			
<b>sumatriptan succinate inj 6 mg/0.5ml Imitrex</b>	1			•			
<b>sumatriptan succinate solution auto-injector 4 mg/0.5ml, 6 mg/0.5ml Imitrex statdose sys</b>	1			•			
<b>sumatriptan succinate tab 25 mg, 50 mg, 100 mg Imitrex</b>	1			•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
UBRELVY ubrogepant tab 50 mg, 100 mg	2	•		•			
<b>zolmitriptan tab 2.5 mg, 5 mg Zomig</b>	1			•			
<b>GOUT AGENTS</b>							
<b>allopurinol tab 100 mg, 300 mg Zyloprim</b>	1						
<b>colchicine tab 0.6 mg Colcrys</b>	1						
<b>colchicine w/ probenecid tab 0.5-500 mg</b>	1						
<b>febuxostat tab 40 mg, 80 mg Uloric</b>	1						
<b>probenecid tab 500 mg</b>	1						
<b>NEUROMUSCULAR DRUGS</b>							
<b>ANTICONVULSANTS</b>							
APTIOM eslicarbazepine acetate tab 200 mg, 400 mg, 600 mg, 800 mg	2						
BRIVIACT brivaracetam oral soln 10 mg/ml	3						
BRIVIACT brivaracetam tab 10 mg, 25 mg, 50 mg, 75 mg, 100 mg	3						
CARBAMAZEPINE carbamazepine chew tab 200 mg	3						
<b>carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg Carbatrol</b>	1						
<b>carbamazepine chew tab 100 mg</b>	1						
<b>carbamazepine susp 100 mg/5ml Tegretol</b>	1						
<b>carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg Tegretol-xr</b>	1						
<b>carbamazepine tab 200 mg Tegretol</b>	1						
CARBATROL carbamazepine cap er 12hr 100 mg, 200 mg, 300 mg	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CELONTIN methsuximide cap 300 mg	3						
<b>clobazam suspension 2.5 mg/ml</b> Onfi	1						
<b>clobazam tab 10 mg, 20 mg</b> Onfi	1						
<b>clonazepam orally disintegrating tab 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg</b>	1						
<b>clonazepam tab 0.5 mg, 1 mg, 2 mg</b> Klonopin	1						
DIACOMIT stiripentol cap 250 mg, 500 mg	4				•		
DIACOMIT stiripentol packet 250 mg, 500 mg	4				•		
DIAZEPAM RECTAL GEL diazepam rectal gel delivery system 2.5 mg	2						
<b>diazepam rectal gel delivery system 10 mg, 20 mg</b> Diastat acudial	1						
DILANTIN phenytoin sodium extended cap 30 mg, 100 mg	3						
DILANTIN INFATABS phenytoin chew tab 50 mg	3						
DILANTIN-125 phenytoin susp 125 mg/5ml	3						
<b>divalproex sodium cap delayed release sprinkle 125 mg</b> Depakote sprinkles	1						
<b>divalproex sodium tab delayed release 125 mg, 250 mg, 500 mg</b> Depakote	1						
<b>divalproex sodium tab er 24 hr 250 mg, 500 mg</b> Depakote er	1						
EPIDIOLEX cannabidiol soln 100 mg/ml	4	•			•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>ethosuximide cap 250 mg</b> Zarontin	1						
<b>ethosuximide soln 250 mg/5ml</b> Zarontin	1						
<b>felbamate susp 600 mg/5ml</b> Felbatol	1						
<b>felbamate tab 400 mg, 600 mg</b> Felbatol	1						
FINTEPLA fenfluramine hcl oral soln 2.2 mg/ml	4				•		•
FYCOMPA perampanel susp 0.5 mg/ml	3						
FYCOMPA perampanel tab 2 mg, 4 mg, 6 mg, 8 mg, 10 mg, 12 mg	3						
<b>gabapentin cap 100 mg, 300 mg, 400 mg</b> Neurontin	1						
<b>gabapentin oral soln 250 mg/5ml</b> Neurontin	1						
<b>gabapentin tab 600 mg, 800 mg</b> Neurontin	1						
<b>lacosamide oral solution 10 mg/ml</b> Vimpat	1						
<b>lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg</b> Vimpat	1						
<b>lamotrigine orally disintegrating tab 25 mg, 50 mg, 100 mg, 200 mg</b> Lamictal odt	1						
<b>lamotrigine tab chewable dispersible 5 mg, 25 mg</b> Lamictal chewable di	1						
<b>lamotrigine tab er 24hr 25 mg, 50 mg, 100 mg, 200 mg, 250 mg, 300 mg</b> Lamictal xr	1						
<b>lamotrigine tab 25 mg, 100 mg, 150 mg, 200 mg</b> Lamictal	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>levetiracetam oral soln 100 mg/ml</b> Keppra	1						
<b>levetiracetam tab er 24hr 500 mg, 750 mg</b> Keppra xr	1						
<b>levetiracetam tab 250 mg, 500 mg, 750 mg, 1000 mg</b> Keppra	1						
<b>methsuximide cap 300 mg</b> Celontin	1						
MYSOLINE primidone tab 50 mg, 250 mg	3						
NAYZILAM midazolam nasal spray soln 5 mg/0.1 ml	3						
ONFI clobazam suspension 2.5 mg/ml	3						
ONFI clobazam tab 10 mg, 20 mg	3						
<b>oxcarbazepine susp 300 mg/5ml (60 mg/ml)</b> Trileptal	1						
<b>oxcarbazepine tab 150 mg, 300 mg, 600 mg</b> Trileptal	1						
<b>phenytoin chew tab 50 mg</b> Dilantin infatabs	1						
<b>phenytoin sodium extended cap 100 mg</b> Dilantin	1						
<b>phenytoin sodium extended cap 200 mg, 300 mg</b> Phenytek	1						
<b>phenytoin susp 125 mg/5ml</b> Dilantin-125	1						
<b>pregabalin cap 25 mg, 50 mg, 75 mg, 100 mg, 150 mg, 200 mg, 225 mg, 300 mg</b> Lyrica	1						
<b>pregabalin soln 20 mg/ml</b> Lyrica	1						
PRIMIDONE primidone tab 125 mg	3						
<b>primidone tab 50 mg, 250 mg</b> Mysoline	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
TEGRETOL carbamazepine susp 100 mg/5ml	3						
TEGRETOL carbamazepine tab 200 mg	3						
TEGRETOL- XR carbamazepine tab er 12hr 100 mg, 200 mg, 400 mg	3						
<b>tiagabine hcl tab 2 mg, 4 mg, 12 mg, 16 mg</b> Gabitril	1						
<b>topiramate cap er 24hr sprinkle 25 mg, 50 mg, 100 mg, 150 mg, 200 mg</b> Qudexy xr	1						
<b>topiramate cap er 24hr 25 mg, 50 mg, 100 mg, 200 mg</b> Trokendi xr	1						
<b>topiramate sprinkle cap 15 mg, 25 mg</b> Topamax sprinkle	1						
<b>topiramate tab 25 mg, 50 mg, 100 mg, 200 mg</b> Topamax	1						
<b>valproate sodium oral soln 250 mg/5ml (base equiv)</b> Depakene	1						
<b>valproic acid cap 250 mg</b> Depakene	1						
VALTOCO 10 MG DOSE diazepam nasal spray 10 mg/0.1 ml	3						
VALTOCO 15 MG DOSE diazepam nasal spray ther pack 2 x 7.5 mg/0.1ml (15 mg dose)	3						
VALTOCO 20 MG DOSE diazepam nasal spray ther pack 2 x 10 mg/0.1ml (20 mg dose)	3						
VALTOCO 5 MG DOSE diazepam nasal spray 5 mg/0.1 ml	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>vigabatrin powd pack 500 mg</b> Sabril	4				•		•
<b>vigabatrin tab 500 mg</b> Sabril	4				•		•
VIMPAT lacosamide oral solution 10 mg/ml	3						
VIMPAT lacosamide tab 50 mg, 100 mg, 150 mg, 200 mg	3						
XCOPRI cenobamate tab pack 100 mg & 150 mg tabs (250 mg daily dose)	3						
XCOPRI cenobamate tab pack 150 mg & 200 mg tabs (350 mg daily dose)	3						
XCOPRI cenobamate tab titration pack 14 x 12.5 mg & 14 x 25 mg, 14 x 50 mg & 14 x 100 mg, 14 x 150 mg & 14 x 200 mg	3						
XCOPRI cenobamate tab 25 mg, 50 mg, 100 mg, 150 mg, 200 mg	3						
ZARONTIN ethosuximide cap 250 mg	3						
ZARONTIN ethosuximide soln 250 mg/5ml	3						
<b>zonisamide cap 25 mg, 100 mg</b> Zonegran	1						
<b>zonisamide cap 50 mg</b>	1						
ZTALMY ganaxolone susp 50 mg/ml	4				•		•
<b>ANTIPARKINSON AGENTS</b>							
<b>amantadine hcl cap 100 mg</b>	1						
<b>amantadine hcl soln 50 mg/5ml</b>	1						
APOKYN apomorphine hcl soln cartridge 30 mg/3ml	4				•		•
<b>apomorphine hcl soln cartridge 30 mg/3ml</b> Apokyn	4				•		
<b>benztropine mesylate tab 0.5 mg, 1 mg, 2 mg</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>bromocriptine mesylate cap 5 mg (base equivalent)</b> Parlodel	1						
<b>bromocriptine mesylate tab 2.5 mg (base equivalent)</b> Parlodel	1						
<b>carbidopa &amp; levodopa tab er 25-100 mg, 50-200 mg</b> Sinemet cr	1						
<b>carbidopa &amp; levodopa tab 10-100 mg, 25-100 mg, 25-250 mg</b> Sinemet	1						
<b>carbidopa tab 25 mg</b> Lodosyn	1						
<b>carbidopa-levodopa-entacapone tabs 12.5-50-200 mg</b> Stalevo 50	1						
<b>carbidopa-levodopa-entacapone tabs 18.75-75-200 mg</b> Stalevo 75	1						
<b>carbidopa-levodopa-entacapone tabs 25-100-200 mg</b> Stalevo 100	1						
<b>carbidopa-levodopa-entacapone tabs 31.25-125-200 mg</b> Stalevo 125	1						
<b>carbidopa-levodopa-entacapone tabs 37.5-150-200 mg</b> Stalevo 150	1						
<b>carbidopa-levodopa-entacapone tabs 50-200-200 mg</b> Stalevo 200	1						
CARBIDOPA/LEVODOPA ODT carbidopa & levodopa orally disintegrating tab 10-100 mg, 25-100 mg, 25-250 mg	3						
DUOPA carbidopa-levodopa enteral susp 4.63-20 mg/ml	3						•
<b>entacapone tab 200 mg</b> Comtan	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
INBRIJA levodopa inhal powder cap 42 mg	4				•		•
NEUPRO rotigotine td patch 24hr 1 mg/24hr, 2 mg/24hr, 3 mg/24hr, 4 mg/24hr, 6 mg/24hr, 8 mg/24hr	3						
<b>pramipexole dihydrochloride tab 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</b> Mirapex	1						
<b>rasagiline mesylate tab 0.5 mg (base equiv), 1 mg (base equiv)</b> Azilect	1						
<b>ropinirole hydrochloride tab 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</b> Requip	1						
RYTARY carbidopa & levodopa cap er 23.75-95 mg, 36.25-145 mg, 48.75-195 mg, 61.25-245 mg	3						
<b>selegiline hcl cap 5 mg</b> Eldepryl	1						
<b>selegiline hcl tab 5 mg</b>	1						
<b>tolcapone tab 100 mg</b> Tasmar	1						
TRIHENYPHENIDYL HCL trihexyphenidyl hcl oral soln 0.4 mg/ml	3						
<b>trihexyphenidyl hcl tab 2 mg, 5 mg</b>	1						
<b>NEUROMUSCULAR AGENTS</b>							
DAYBUE trofinetide oral soln 200 mg/ml	4				•		•
DUVYZAT givinostat hcl oral susp 8.86 mg/ml	4	•		•	•		
EVRYSDI risdiplam for soln 0.75 mg/ml	4	•		•	•		•
EVRYSDI risdiplam tab 5 mg	4	•		•	•		
RADICAVA ORS edaravone oral susp 105 mg/5ml	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
RADICAVA ORS STARTER KIT edaravone oral susp 105 mg/5ml	4	•		•	•		•
<b>riluzole tab 50 mg</b> Rilutek	4				•		
SKYCLARYS omaveloxolone cap 50 mg	4				•		
<b>MUSCULOSKELETAL THERAPY AGENTS</b>							
<b>baclofen tab 10 mg, 20 mg</b>	1						
<b>carisoprodol tab 250 mg, 350 mg</b> Soma	1						
<b>chlorzoxazone tab 500 mg</b>	1						
<b>cyclobenzaprine hcl tab 5 mg, 10 mg</b>	1						
<b>dantrolene sodium cap 25 mg, 50 mg</b> Dantrium	1						
<b>dantrolene sodium cap 100 mg</b>	1						
<b>metaxalone tab 400 mg</b>	1						
<b>metaxalone tab 800 mg</b> Skelaxin	1						
<b>methocarbamol tab 500 mg</b> Robaxin	1						
<b>methocarbamol tab 750 mg</b> Robaxin-750	1						
<b>orphenadrine citrate tab er 12hr 100 mg</b>	1						
SOHONOS palovarotene cap 1 mg, 1.5 mg, 2.5 mg, 5 mg, 10 mg	4	•		•	•		•
<b>tizanidine hcl tab 2 mg (base equivalent)</b>	1						
<b>tizanidine hcl tab 4 mg (base equivalent)</b> Zanaflex	1						
<b>ANTIMYASTHENIC AGENTS</b>							
<b>pyridostigmine bromide oral soln 60 mg/5ml</b> Mestinon	1						
<b>pyridostigmine bromide tab 60 mg</b> Mestinon	1						
<b>NUTRITIONAL PRODUCTS</b>							

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>VITAMINS</b>							
<b>cholecalciferol cap 1.25 mg (50000 unit)</b>	1						
<b>ergocalciferol cap 1.25 mg (50000 unit)</b> Drisdol	1						
<b>phytonadione tab 5 mg</b> Mephyton	1						
<b>MULTIVITAMINS</b>							
<b>BRAND PRENATAL VITAMINS - VARIOUS</b>	2						
<b>MINERALS and ELECTROLYTES</b>							
<b>FLORICAL sodium fluoride w/ calcium carb cap 8.3-364 mg</b>	A					•	
<b>FLORICAL sodium fluoride w/ calcium carb tab 8.3-364 mg</b>	A					•	
<b>FLORIVA sodium fluoride-vitamin d liqd drops 0.25 mg/ml-400 unit/ml</b>	3					•	
<b>GALZIN zinc acetate cap 25 mg (elemental zinc), 50 mg (elemental zinc)</b>	3						
<b>MONOCAL sodium monofluorophosphate-calcium carb tab 22.75-625 mg</b>	A					•	
<b>pot phos monobasic w/sod phos di &amp; monobas tab 155-852-130mg</b> K-phos neutral	1						
<b>potassium chloride cap er 8 meq, 10 meq</b> Micro-k	1						
<b>potassium chloride microencapsulated crys er tab 10 meq, 15 meq, 20 meq</b>	1						
<b>potassium chloride oral soln 10% (20 meq/15ml), 20% (40 meq/15ml)</b>	1						
<b>potassium chloride powder packet 20 meq</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>potassium chloride tab er 8 meq (600 mg)</b>	1						
<b>potassium chloride tab er 10 meq, 20 meq (1500 mg)</b> K-tab	1						
<b>potassium phosphate monobasic tab 500 mg</b> K-phos	1						
<b>SODIUM FLUORIDE sodium fluoride soln 0.5 mg/ml f (from 1.1 mg/ml naf)</b>	3					•	
<b>SODIUM FLUORIDE sodium fluoride tab 0.5 mg f (from 1.1 mg naf), 1 mg f (from 2.2 mg naf)</b>	3					•	
<b>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> Luride	1					•	
<b>HEMATOLOGICAL AGENTS</b>							
<b>HEMATOPOIETIC AGENTS</b>							
<b>ARANESP ALBUMIN FREE darbepoetin alfa soln inj 25 mcg/ml, 40 mcg/ml, 60 mcg/ml, 100 mcg/ml, 200 mcg/ml</b>	4					•	
<b>ARANESP ALBUMIN FREE darbepoetin alfa soln prefilled syringe 10 mcg/0.4ml, 25 mcg/0.42ml, 40 mcg/0.4ml, 60 mcg/0.3ml, 100 mcg/0.5ml, 150 mcg/0.3ml, 200 mcg/0.4ml, 300 mcg/0.6ml, 500 mcg/ml</b>	4					•	
<b>carbonyl iron susp 15 mg/1.25ml (elemental iron)</b>	A					•	
<b>CERDELGA eliglustat tartrate cap 84 mg (base equivalent)</b>	4	•		•	•		•
<b>cyanocobalamin inj 1000 mcg/ml</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
DROXIA hydroxyurea cap 200 mg, 300 mg, 400 mg	4				•		
FERRETT'S CHEWABLE IRON carbonyl iron chew tab 18 mg (elemental iron)	A					•	
<b>ferrous sulfate soln 75 mg/ml (15 mg/ml elemental fe), 220 mg/5ml (44 mg/5ml elemental fe), 300 mg/5ml (60 mg/5ml elemental fe)</b>	A					•	
<b>folic acid cap 0.8 mg</b>	A					•	
<b>folic acid tab 400 mcg, 800 mcg</b>	A					•	
<b>folic acid tab 1 mg</b>	1						
<b>glutamine (sickle cell) powd pack 5 gm</b> Endari	4	•			•		
HYDROXOCOBALAMIN hydrox acetate inj 1000 mcg/ml (base equivalent)	3						
IRON CHEWS PEDIATRIC carbonyl iron chew tab 15 mg (elemental iron)	A					•	
IRON UP polysaccharide iron complex liquid 15 mg/0.5ml (fe equiv)	2						
MULPLETA lusutrombopag tab 3 mg	4	•		•	•		
NOVAFERRUM PEDIATRIC DROP polysaccharide iron complex liquid 15 mg/ml (fe equiv)	2						
PROMACTA eltrombopag olamine powder pack for susp 25 mg (base equiv), 12.5 mg (base eq)	4	•		•	•		
PROMACTA eltrombopag olamine tab 12.5 mg (base equiv), 25 mg (base equiv), 50 mg (base equiv), 75 mg (base equiv)	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
RETACRIT epoetin alfa-epbx inj 2000 unit/ml, 3000 unit/ml, 4000 unit/ml, 10000 unit/ml, 20000 unit/ml, 40000 unit/ml	4				•		
SIKLOS hydroxyurea tab 100 mg, 1000 mg	3						
XOLREMDI mavorixafor cap 100 mg	4	•		•	•		•
<b>ANTICOAGULANTS</b>							
<b>dabigatran etexilate mesylate cap 75 mg (etexilate base eq), 110 mg (etexilate base eq), 150 mg (etexilate base eq)</b> Pradaxa	1				•		
ELIQUIS apixaban tab 2.5 mg, 5 mg	2				•		
ELIQUIS STARTER PACK apixaban tab starter pack 5 mg	2				•		
<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</b> Lovenox	1				•		
<b>enoxaparin sodium inj 300 mg/3ml</b> Lovenox	1				•		
<b>fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8ml</b> Arixtra	1				•		
FRAGMIN dalteparin sodium soln prefilled syr 2500 unit/0.2ml, 5000 unit/0.2ml, 7500 unit/0.3ml, 10000 unit/ml, 12500 unit/0.5ml, 15000 unit/0.6ml, 18000 unit/0.72ml	3				•		
FRAGMIN dalteparin sodium subcutaneous soln 10000 unit/4ml, 95000 unit/3.8ml	3				•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
HEPARIN SODIUM heparin sodium (porcine) pf inj 5000 unit/ml	3						
<b>heparin sodium (porcine) inj 1000 unit/ml, 5000 unit/ml, 10000 unit/ml, 20000 unit/ml</b>	1						
<b>heparin sodium (porcine) pf inj 1000 unit/ml, 5000 unit/0.5ml</b>	1						
PRADAXA dabigatran etexilate mesylate pellet pack 20 mg, 30 mg, 40 mg, 50 mg, 110 mg, 150 mg	3			•			
<b>warfarin sodium tab 1 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg, 10 mg</b> Coumadin	1						
XARELTO rivaroxaban for susp 1 mg/ml	2			•			
XARELTO rivaroxaban tab 2.5 mg, 10 mg, 15 mg, 20 mg	2			•			
XARELTO STARTER PACK rivaroxaban tab starter therapy pack 15 mg & 20 mg	2			•			
<b>HEMOSTATICS</b>							
<b>tranexamic acid tab 650 mg</b> Lysteda	1						
<b>HEMATOLOGICAL AGENTS - MISC.</b>							
ADVATE antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	4	•			•		
ADYNOVATE antihemophilic factor recomb pegylated for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	4	•			•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
AFSTYLA antihemophilic fact rcmb single chain for inj kit 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit	4	•			•		•
ALPHANATE antihemophilic factor/vwf (human) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit	4	•			•		•
ALPHANINE SD coagulation factor ix for inj 500 unit, 1000 unit, 1500 unit	4	•			•		
ALPROLIX coagulation factor ix (recomb) (rfixfc) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	4	•			•		•
ALTUVIIIO antihemophilic fact rcmb fc-vwf-xten-eh1 for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit, 4000 unit	4	•			•		
<b>anagrelide hcl cap 0.5 mg</b> Agrylin	1						
<b>anagrelide hcl cap 1 mg</b>	1						
<b>aspirin-dipyridamole cap er 12hr 25-200 mg</b> Aggrenox	1						
BENEFIX coagulation factor ix (recombinant) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	4	•			•		
BRILINTA ticagrelor tab 60 mg, 90 mg	2						
CABLIVI caplacizumab-yhdp for inj kit 11 mg	4			•	•		•
<b>cilostazol tab 50 mg, 100 mg</b> Pletal	1						
<b>clopidogrel bisulfate tab 75 mg (base equiv)</b> Plavix	1						
COAGADEX coagulation factor x (human) for inj 250 unit, 500 unit	4				•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CORIFACT factor xiii concentrate (human) for inj kit 1000-1600 unit	4				•		•
<b>dipyridamole tab 25 mg, 50 mg, 75 mg</b> Persantine	1						
ELOCTATE antihemophilic factor rcmb (bdd-rfviiiic) for inj 250 unit, 500 unit, 750 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit, 5000 unit, 6000 unit	4	•			•		
EMPAVELI pegcetacoplan subcutaneous soln 1080 mg/20ml (54 mg/ml)	4	•		•	•		•
ESPEROCT antihemophilic factor recomb glycopeg-exei for inj 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit, 4000 unit	4	•			•		•
FABHALTA iptacopan hcl cap 200 mg	4	•		•	•		•
FEIBA antiinhibitor coagulant complex for iv soln 500 unit, 1000 unit, 2500 unit	4				•		
FIBRYGA fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	4				•		
HAEGARDA c1 esterase inhibitor (human) for subcutaneous inj 2000 unit, 3000 unit	4	•		•	•		•
HEMLIBRA emicizumab-kxwh subcutaneous soln 12 mg/0.4ml (30 mg/ml)	4	•			•		•
HEMLIBRA emicizumab-kxwh subcutaneous soln 30 mg/ml, 60 mg/0.4ml (150 mg/ml), 105 mg/0.7ml (150 mg/ml), 150 mg/ml, 300 mg/2ml (150 mg/ml)	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
HEMOFIL M antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit, 1700 unit	4	•			•		
HUMATE-P antihemophilic factor/vwf (human) for inj 250-600 unit, 500-1200 unit, 1000-2400 unit	4	•			•		
<b>icatibant acetate subcutaneous soln pref syr 30 mg/3ml</b> Firazyr	4	•		•	•		•
IDELVION coagulation factor ix (recomb) (rix-fp) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3500 unit	4	•			•		
IXINITY coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	4	•			•		•
JIVI antihemophil fact rcmb(bdd-rfviii peg-aucl) for inj 500 unit	4	•			•		
JIVI antihemophil fact rcmb(bdd-rfviii peg-aucl)for inj 1000 unit, 2000 unit, 3000 unit, 4000 unit	4	•			•		
KOATE antihemophilic factor (human) for inj 250 unit, 500 unit, 1000 unit	4	•			•		
KOATE-DVI antihemophilic factor (human) for inj 500 unit, 1000 unit	4	•			•		
KOGENATE FS antihemophilic factor recomb (rfviii) for inj kit 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	4	•			•		
KOVALTRY antihemophilic factor recomb (rahf-pfm) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	4	•			•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NOVOEIGHT antihemophilic fact rcmb (bd trunc-rfviii) for inj 250 unit, 500 unit, 1000 unit, 1500 unit, 2000 unit, 3000 unit	4	•			•		
NOVOSEVEN RT coagulation factor viia (recomb) for inj 1 mg (1000 mcg), 2 mg (2000 mcg), 5 mg (5000 mcg), 8 mg (8000 mcg)	4	•			•		•
NUWIQ antihemophil fact rcmb (bdd-rfviii,sim) for inj kit 250 unit, 500 unit	4	•			•		•
NUWIQ antihemophil fact rcmb(bdd-rfviii,sim) for inj kit 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	4	•			•		•
NUWIQ antihemophilic fact rcmb (bdd-rfviii,sim) for inj 1000 unit, 1500 unit, 2000 unit, 2500 unit, 3000 unit, 4000 unit	4	•			•		•
NUWIQ antihemophilic factor rcmb (bdd-rfviii,sim) for inj 250 unit, 500 unit	4	•			•		•
OBIZUR antihemophilic factor (recomb porc) rpfviii for inj 500 unit	4				•		•
ORLADEYO berotralstat hcl cap 110 mg, 150 mg	4	•		•	•		•
<b>pentoxifylline tab er 400 mg</b>	1						
<b>prasugrel hcl tab 5 mg (base equiv), 10 mg (base equiv) Effient</b>	1						
PROFILNINE factor ix complex for inj 500 unit, 1000 unit, 1500 unit	4	•			•		
PYRUKYND mitapivat sulfate tab 5 mg, 20 mg, 50 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
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	4	•			•		•
REBINYN coagulation factor ix recomb glycopegylated for inj 500 unt, 1000 unt, 2000 unt, 3000 unt	4	•			•		•
RECOMBINATE antihemophilic factor recomb (rfviii) for inj 220-400 unit, 401-800 unit, 801-1240 unit, 1241-1800 unit, 1801-2400 unit	4	•			•		
RIASTAP fibrinogen conc (human) inj approximately 1 gm (900-1300 mg)	4				•		•
RIXUBIS coagulation factor ix (recombinant) for inj 250 unit, 500 unit, 1000 unit, 2000 unit, 3000 unit	4	•			•		
SEVENFACT coagulation factor viia (recom)-jncw for inj 1 mg (1000 mcg), 5 mg (5000 mcg)	4	•			•		•
TAKHZYRO lanadelumab-flyo inj 300 mg/2ml (150 mg/ml)	4	•		•	•		•
TAKHZYRO lanadelumab-flyo soln pref syringe 150 mg/ml, 300 mg/2ml (150 mg/ml)	4	•		•	•		•
TAVALISSE fostamatinib disodium tab 100 mg (base equivalent), 150 mg (base equivalent)	4	•		•	•		•
TRETTEN coagulation factor xiii a-subunit for inj 2500 unit	4				•		•
VONVENDI von willebrand factor (recombinant) for inj 650 unit, 1300 unit	4	•			•		
WILATE antihemophilic factor/vwf (human) for inj 500-500 unit kit	4	•			•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
WILATE antihemophilic factor/vwf (human) for inj 1000-1000 unit kit	4	•			•		
XYNTHA antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	4	•			•		
XYNTHA antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit	4	•			•		
XYNTHA SOLOFUSE antihemophil fact rcmb (bdd-rfviii,mor) for inj kit 250 unit, 500 unit	4	•			•		
XYNTHA SOLOFUSE antihemophil fact rcmb(bdd-rfviii,mor) for inj kit 1000 unit, 2000 unit, 3000 unit	4	•			•		
ZONTIVITY vorapaxar sulfate tab 2.08 mg (base equivalent)	3						
<b>TOPICAL PRODUCTS</b>							
<b>OPHTHALMIC AGENTS</b>							
ALOCRIIL nedocromil sodium ophth soln 2%	3						
APRACLONIDINE apraclonidine hcl ophth soln 0.5% (base equivalent)	3						
ATROPINE SULFATE atropine sulfate ophth soln 1%	3						
<b>atropine sulfate ophth soln 1%</b> Atropine sulfate	1						
AZASITE azithromycin ophth soln 1%	3						
<b>azelastine hcl ophth soln 0.05%</b>	1						
BACITRACIN bacitracin ophth oint 500 unit/gm	2						
<b>bacitracin-polymyxin b ophth oint</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>bacitracin-polymyxin-neomycin-hc ophth oint 1%</b>	1						
<b>bepotastine besilate ophth soln 1.5%</b> Bepreve	1						
BETAXOLOL HCL betaxolol hcl ophth soln 0.5%	3						
<b>brimonidine tartrate ophth soln 0.2%</b>	1						
<b>brimonidine tartrate-timolol maleate ophth soln 0.2-0.5%</b> Combigan	1						
<b>brinzolamide ophth susp 1%</b> Azopt	1						
<b>bromfenac sodium ophth soln 0.09% (base equiv) (once-daily)</b>	1						
CARTEOLOL HCL carteolol hcl ophth soln 1%	3						
<b>ciprofloxacin hcl ophth soln 0.3% (base equivalent)</b> Ciloxan	1						
CROMOLYN SODIUM cromolyn sodium ophth soln 4%	3						
CYCLOMYDRIL cyclopentolate w/ phenylephrine ophth soln 0.2-1%	3						
<b>cyclopentolate hcl ophth soln 1%</b> Cyclogyl	1						
CYSTADROPS cysteamine hcl ophth soln 0.37% (base equivalent)	4				•		•
CYSTARAN cysteamine hcl ophth soln 0.44% (base equivalent)	4				•		•
DEXAMETHASONE SODIUM PHOS dexamethasone sodium phosphate ophth soln 0.1%	3						
<b>diclofenac sodium ophth soln 0.1%</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>difluprednate ophth emulsion 0.05%</b> Durezol	1						
<b>dorzolamide hcl ophth soln 2%</b> Trusopt	1						
<b>dorzolamide hcl-timolol maleate ophth soln 2-0.5%</b> Cosopt	1						
<b>epinastine hcl ophth soln 0.05%</b> Elestat	1						
ERYTHROMYCIN erythromycin ophth oint 5 mg/gm	2						
<b>erythromycin ophth oint 5 mg/gm</b>	1						
<b>fluorometholone ophth susp 0.1%</b> Fml liquifilm	1						
FLURBIPROFEN SODIUM flurbiprofen sodium ophth soln 0.03%	3						
<b>gatifloxacin ophth soln 0.5%</b> Zymaxid	1						
<b>gentamicin sulfate ophth soln 0.3%</b> Garamycin	1						
<b>ketorolac tromethamine ophth soln 0.4%</b> Acular Is	1						
<b>ketorolac tromethamine ophth soln 0.5%</b> Acular	1						
<b>latanoprost ophth soln 0.005%</b> Xalatan	1			•			
LEVOBUNOLOL HCL levobunolol hcl ophth soln 0.5%	3						
LOTEMAX loteprednol etabonate ophth oint 0.5%	3						
LOTEMAX SM loteprednol etabonate ophth gel 0.38%	3						
<b>loteprednol etabonate ophth gel 0.5%</b> Lotemax	1						
<b>loteprednol etabonate ophth susp 0.5%</b> Lotemax	1						
LUMIGAN bimatoprost ophth soln 0.01%	3		•	•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>moxifloxacin hcl ophth soln 0.5% (base equiv)</b> Vigamox	1						
NATACYN natamycin ophth susp 5%	2						
<b>neomycin-bacitrac zn-polymyx 5(3.5)mg-400unt-10000unt op oin</b>	1						
<b>neomycin-polymyxin-dexamethasone ophth oint 0.1%</b> Maxitrol	1						
<b>neomycin-polymyxin-dexamethasone ophth susp 0.1%</b> Maxitrol	1						
NEOMYCIN/POLYMYXIN/GRAMIC neomycin-polymy-gramicid op sol 1.75-10000-0.025mg-unt-mg/ml	3						
<b>ofloxacin ophth soln 0.3%</b> Ocuflax	1						
OXERVATE cenegermin-bkbj ophth soln 0.002% (20 mcg/ml)	4	•		•	•		•
<b>phenylephrine hcl ophth soln 2.5%, 10%</b>	1						
<b>pilocarpine hcl ophth soln 1%, 2%, 4%</b> Isopto carpine	1						
<b>polymyxin b-trimethoprim ophth soln 10000 unit/ml-0.1%</b> Polytrim	1						
<b>prednisolone acetate ophth susp 1%</b> Pred forte	1						
RESTASIS cyclosporine (ophth) emulsion 0.05%	1						
RHOPRESSA netarsudil dimesylate ophth soln 0.02%	3						
SIMBRINZA brinzolamide-brimonidine tartrate ophth susp 1-0.2%	2						
<b>sulfacetamide sodium ophth soln 10%</b> Bleph-10	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
SULFACETAMIDE SODIUM/ PRED sulfacetamide sodium- prednisolone ophth soln 10-0.23(0.25)%	3						
<b>tafluprost preservative free (pf) ophth soln 0.0015%</b> Zioptan	1			•			
<b>tetracaine hcl ophth soln 0.5%</b>	1						
<b>timolol maleate ophth soln 0.25%, 0.5%</b> Timoptic	1						
TOBRADEX tobramycin- dexamethasone ophth oint 0.3-0.1%	3						
<b>tobramycin ophth soln 0.3%</b> Tobrex	1						
<b>tobramycin-dexamethasone ophth susp 0.3-0.1%</b> Tobradex	1						
<b>travoprost ophth soln 0.004% (benzalkonium free) (bak free)</b> Travatan z	1			•			
TRIFLURIDINE trifluridine ophth soln 1%	2						
XIIDRA lifitegrast ophth soln 5%	3						
ZERVIAE cetirizine hcl ophth soln 0.24% (base equiv)	3						
<b>OTIC AGENTS</b>							
<b>acetic acid otic soln 2%</b>	1						
<b>ciprofloxacin hcl otic soln 0.2% (base equivalent)</b> Cetraxal	1						
<b>ciprofloxacin- dexamethasone otic susp 0.3-0.1%</b> Ciprodex	1						
CORTISPORIN-TC neomycin- colistin-hc-thonzonium otic susp 3.3-3-10-0.5 mg/ml	3						
<b>fluocinolone acetonide (otic) oil 0.01%</b> Dermotic	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>hydrocortisone w/ acetic acid otic soln 1-2%</b>	1						
<b>neomycin-polymyxin-hc otic soln 1%</b> Cortisporin	1						
<b>neomycin-polymyxin-hc otic susp 3.5 mg/ml-10000 unit/ ml-1%</b>	1						
<b>ofloxacin otic soln 0.3%</b>	1						
<b>MOUTH/THROAT/DENTAL AGENTS</b>							
<b>cevimeline hcl cap 30 mg</b> Evoxac	1						
<b>chlorhexidine gluconate soln 0.12%</b> Peridex	1						
<b>clotrimazole troche 10 mg</b>	1						
FLUORIDEX SENSITIVITY REL sodium fluoride- potassium nitrate gel 1.1-5%	2					•	
<b>lidocaine hcl viscous soln 2%</b>	1						
<b>nystatin susp 100000 unit/ml</b>	1						
ORAVIG miconazole buccal tab 50 mg (mouth-throat)	3						
PARODONTAX stannous fluoride paste 0.454%	A					•	
<b>pilocarpine hcl tab 5 mg, 7.5 mg</b> Salagen	1						
SENSODYNE COMPLETE PROTEC stannous fluoride paste 0.454%	A					•	
SENSODYNE RAPID RELIEF stannous fluoride paste 0.454%	A					•	
SENSODYNE REPAIR & PROTEC stannous fluoride paste 0.454%	A					•	
<b>sodium fluoride cream 1.1%</b> Prevident 5000 plus	1					•	
<b>sodium fluoride gel 1.1% (0.5% f)</b> Prevident fluoride	1					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>sodium fluoride paste 1.1%</b> Preident 5000 boost	1					•	
<b>sodium fluoride rinse 0.05%</b>	A					•	
SODIUM FLUORIDE 5000 PPM sodium fluoride-potassium nitrate gel 1.1-5%	2					•	
SODIUM FLUORIDE/ POTASSIUM sodium fluoride-potassium nitrate gel 1.1-5%	2					•	
<b>stannous fluoride conc 0.63%</b> Gel-kam oral care ri	A					•	
<b>stannous fluoride gel 0.4%</b>	A					•	
<b>triamcinolone acetonide dental paste 0.1%</b>	1						
<b>ANORECTAL AGENTS</b>							
ANALPRAM- HC hydrocortisone acetate w/ pramoxine perianal lotn 2.5-1%	3						
CORTIFOAM hydrocortisone acetate perianal foam 10% (90 mg/dose)	2						
<b>hydrocortisone acetate suppos 25 mg</b>	1						
<b>hydrocortisone enema 100 mg/60ml</b> Cortenema	1						
<b>hydrocortisone perianal cream 1%</b> Proctocort	1						
<b>hydrocortisone perianal cream 2.5%</b> Anusol-hc	1						
<b>nitroglycerin oint 0.4%</b> Rectiv	1						
PROCTOFOAM HC hydrocortisone acetate w/ pramoxine perianal foam 1-1%	3						
<b>DERMATOLOGICALS</b>							
<b>acitretin cap 10 mg, 17.5 mg, 25 mg</b> Soriatane	1						
<b>acyclovir oint 5%</b> Zovirax	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
ADBRY tralokinumab-ldrm subcutaneous soln auto-injector 300 mg/2ml	4	•		•	•		•
ADBRY tralokinumab-ldrm subcutaneous soln prefilled syr 150 mg/ml	4	•		•	•		•
ALCLOMETASONE DIPROPIONAT alclometasone dipropionate oint 0.05%	3						
<b>alclometasone dipropionate cream 0.05%</b> Aclovene	1						
<b>azelaic acid gel 15%</b> Finacea	1						
BETAMETHASONE DIPROPIONAT betamethason dipropionate augmented gel 0.05%	3						
<b>betamethasone dipropionate augmented cream 0.05%</b> Diprolene af	1						
<b>betamethasone dipropionate augmented lotion 0.05%</b> Diprolene	1						
<b>betamethasone dipropionate augmented oint 0.05%</b> Diprolene	1						
<b>betamethasone dipropionate cream 0.05%</b>	1						
<b>betamethasone dipropionate lotion 0.05%</b>	1						
<b>betamethasone dipropionate oint 0.05%</b>	1						
<b>betamethasone valerate cream 0.1% (base equivalent)</b>	1						
<b>betamethasone valerate lotion 0.1% (base equivalent)</b>	1						
<b>betamethasone valerate oint 0.1% (base equivalent)</b>	1						
<b>brimonidine tartrate gel 0.33% (base equivalent)</b> Mirvaso	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CALCIPOTRIENE calcipotriene soln 0.005% (50 mcg/ml)	3						
<b>calcipotriene cream 0.005%</b> Dovonex	1						
CALCITRIOL calcitriol oint 3 mcg/gm	3						
CIBINQO abrocitinib tab 50 mg, 100 mg, 200 mg	4	•		•	•		
<b>ciclopirox gel 0.77%</b>	1						
<b>ciclopirox olamine cream 0.77% (base equiv)</b>	1						
<b>ciclopirox olamine susp 0.77% (base equiv)</b>	1						
<b>ciclopirox shampoo 1%</b> Loprox shampoo	1						
<b>ciclopirox solution 8%</b> Penlac Nail Lacquer	1						
<b>clindamycin phosph-benzoyl peroxide (refrig) gel 1.2 (1)-5%</b> Duac	1						
<b>clindamycin phosphate gel 1%</b> Cleocin-t	1						
<b>clindamycin phosphate lotion 1%</b> Cleocin-t	1						
<b>clindamycin phosphate soln 1%</b> Cleocin-t	1						
<b>clindamycin phosphate swab 1%</b> Cleocin-t	1						
<b>clobetasol propionate cream 0.05%</b> Temovate	1						
<b>clobetasol propionate emollient base cream 0.05%</b> Temovate e	1						
<b>clobetasol propionate gel 0.05%</b> Temovate	1						
<b>clobetasol propionate oint 0.05%</b> Temovate	1						
<b>clobetasol propionate soln 0.05%</b> Temovate	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>clocortolone pivalate cream 0.1%</b> Cloderm	1						
<b>clotrimazole w/ betamethasone cream 1-0.05%</b> Lotrisone	1						
COSENTYX secukinumab subcutaneous pref syr 150 mg/ml (300 mg dose)	4	•		•	•		•
COSENTYX secukinumab subcutaneous soln prefilled syringe 75 mg/0.5ml, 150 mg/ml	4	•		•	•		•
COSENTYX SENSOREADY PEN secukinumab subcutaneous auto-inj 150 mg/ml (300 mg dose)	4	•		•	•		•
COSENTYX SENSOREADY PEN secukinumab subcutaneous soln auto-injector 150 mg/ml	4	•		•	•		•
COSENTYX UNOREADY secukinumab subcutaneous soln auto-injector 300 mg/2ml	4	•		•	•		•
CROTAN crotamiton lotion 10%	3						
<b>desonide cream 0.05%</b> Desowen	1						
<b>desonide oint 0.05%</b> Desowen	1						
<b>desoximetasone cream 0.25%</b> Topicort	1						
<b>desoximetasone oint 0.25%</b> Topicort	1						
<b>diclofenac sodium soln 1.5%</b>	1			•			
DIFLORASONE DIACETATE diflorasone diacetate cream 0.05%	3						
DUPIXENT dupilumab subcutaneous soln auto-injector 200 mg/1.14ml, 300 mg/2ml	4	•		•	•		

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
DUPIXENT dupilumab subcutaneous soln prefilled syringe 200 mg/1.14ml, 300 mg/2ml	4	•		•	•		
<b>econazole nitrate cream 1%</b>	1						
ENSTILAR calcipotriene-betamethasone dipropionate foam 0.005-0.064%	3						
ERY erythromycin pads 2%	3		•				
<b>erythromycin gel 2%</b> Erygel	1						
<b>erythromycin soln 2%</b>	1						
EXELDERM sulconazole nitrate cream 1%	3						
EXELDERM sulconazole nitrate solution 1%	3						
FILSUEVZ birch triterpenes gel 10%	4				•		•
<b>fluocinolone acetonide cream 0.01%</b>	1						
<b>fluocinolone acetonide cream 0.025%</b> Synalar	1						
<b>fluocinolone acetonide oil 0.01% (body oil)</b> Derma-smoothe/fs bod	1						
<b>fluocinolone acetonide oil 0.01% (scalp oil)</b> Derma-smoothe/fs sca	1						
<b>fluocinolone acetonide oint 0.025%</b> Synalar	1						
<b>fluocinolone acetonide soln 0.01%</b> Synalar	1						
<b>fluocinonide cream 0.05%</b>	1						
<b>fluocinonide cream 0.1%</b> Vanos	1						
<b>fluocinonide emulsified base cream 0.05%</b>	1						
<b>fluocinonide oint 0.05%</b>	1						
<b>fluocinonide soln 0.05%</b>	1						
FLUOROURACIL fluorouracil soln 2%	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>fluorouracil cream 5%</b> Efudex	1						
<b>fluorouracil soln 5%</b>	1						
<b>fluticasone propionate cream 0.05%</b> Cutivate	1						
<b>fluticasone propionate oint 0.005%</b>	1						
<b>gentamicin sulfate cream 0.1%</b>	1						
<b>gentamicin sulfate oint 0.1%</b>	1						
<b>halobetasol propionate cream 0.05%</b> Ultravate	1						
HYDROCORTISONE hydrocortisone lotion 2.5%	3						
HYDROCORTISONE BUTYRATE hydrocortisone butyrate cream 0.1%	3						
<b>hydrocortisone cream 2.5%</b>	1						
<b>hydrocortisone oint 2.5%</b>	1						
<b>hydrocortisone valerate cream 0.2%</b>	1						
HYFTOR sirolimus gel 0.2%	3						•
<b>imiquimod cream 5%</b> Aldara	1						
<b>isotretinoin cap 10 mg, 20 mg, 30 mg, 40 mg</b>	1						
<b>ketoconazole cream 2%</b>	1						
<b>ketoconazole shampoo 2%</b> Nizoral	1						
<b>lactic acid (ammonium lactate) cream 12%</b> Lac-hydrin	1						
<b>lactic acid (ammonium lactate) lotion 12%</b> Lac-hydrin	1						
<b>lidocaine hcl soln 4%</b> Xylocaine	1						
<b>lidocaine oint 5%</b>	1						
<b>lidocaine patch 5%</b> Lidoderm	1						
<b>lidocaine-prilocaine cream 2.5-2.5%</b> Emla	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
MAFENIDE ACETATE mafenide acetate packet for topical soln 5% (50 gm)	3						
<b>malathion lotion 0.5%</b> Ovide	1						
METHOXSALEN methoxsalen rapid cap 10 mg	3						
<b>metronidazole cream 0.75%</b> Metrocream	1						
<b>metronidazole gel 0.75%</b>	1						
<b>metronidazole gel 1%</b> Metrogel	1						
<b>mometasone furoate cream 0.1%</b> Elocon	1						
<b>mometasone furoate oint 0.1%</b> Elocon	1						
<b>mometasone furoate solution 0.1% (lotion)</b> Elocon	1						
<b>mupirocin oint 2%</b> Bactroban	1						
NAFTIFINE HCL naftifine hcl cream 1%	3						
<b>naftifine hcl cream 2%</b> Naftin	1						
NATROBA spinosad susp 0.9%	3						
<b>nystatin cream 100000 unit/gm</b>	1						
<b>nystatin oint 100000 unit/gm</b>	1						
<b>nystatin topical powder 100000 unit/gm</b>	1						
<b>nystatin-triamcinolone cream 100000-0.1 unit/gm-%</b>	1						
<b>nystatin-triamcinolone oint 100000-0.1 unit/gm-%</b>	1						
<b>oxiconazole nitrate cream 1%</b> Oxistat	1						
<b>permethrin cream 5%</b> Elimite	1						
<b>pimecrolimus cream 1%</b> Elidel	1		•				

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
PODOFILOX podofilox soln 0.5%	3						
REGRANEX becaplermin gel 0.01%	3						
SANTYL collagenase oint 250 unit/gm	3						
<b>selenium sulfide lotion 2.5%</b>	1						
<b>silver sulfadiazine cream 1%</b> Silvadene	1						
SKYRIZI risankizumab-rzaa soln prefilled syringe 150 mg/ml	4	•		•	•		
SKYRIZI PEN risankizumab-rzaa soln auto-injector 150 mg/ml	4	•		•	•		
SOOLANTRA ivermectin cream 1%	1						
SOTYKTU deucravacitinib tab 6 mg	4	•		•	•		•
SPEVIGO spesolimab-sbzo subcutaneous soln pref syr 150 mg/ml	4	•		•	•		
SPINOSAD spinosad susp 0.9%	3						
STELARA ustekinumab inj 45 mg/0.5ml	4	•		•	•		
STELARA ustekinumab soln prefilled syringe 45 mg/0.5ml, 90 mg/ml	4	•		•	•		
SULCONAZOLE NITRATE sulconazole nitrate cream 1%	3						
SULCONAZOLE NITRATE sulconazole nitrate solution 1%	3						
<b>sulfacetamide sodium lotion 10% (acne)</b> Klaron	1						
SULFAMYLON mafenide acetate cream 85 mg/gm	3						
<b>tacrolimus oint 0.03%, 0.1%</b> Protopic	1		•				

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>tazarotene cream 0.1% Tazorac</b>	1	•					
<b>tazarotene gel 0.05% Tazorac</b>	1	•					
TREMFYA guselkumab soln auto-injector 100 mg/ml, 200 mg/2ml	4	•		•	•		
TREMFYA guselkumab soln prefilled syringe 100 mg/ml, 200 mg/2ml	4	•		•	•		
<b>tretinoin cream 0.025%, 0.05%, 0.1% Retin-a</b>	1	•					
<b>tretinoin gel 0.01% Retin-a</b>	1	•					
<b>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</b>	1						
<b>triamcinolone acetonide lotion 0.025%, 0.1%</b>	1						
<b>triamcinolone acetonide oint 0.025%, 0.1%, 0.5%</b>	1						
VALCHLOR mechlorethamine hcl gel 0.016% (base equivalent)	4				•		•
<b>MISCELLANEOUS PRODUCTS</b>							
<b>ANTIDOTES</b>							
CHEMET succimer cap 100 mg	2						
<b>deferiprone tab 500 mg, 1000 mg Ferriprox</b>	4				•		
KLOXXADO naloxone hcl nasal spray 8 mg/0.1ml	2						
<b>naloxone hcl inj 0.4 mg/ml, 4 mg/10ml</b>	1						
<b>naloxone hcl nasal spray 4 mg/0.1ml Narcan</b>	1						
<b>naloxone hcl soln prefilled syringe 2 mg/2ml</b>	1						
NALOXONE HYDROCHLORIDE naloxone hcl soln cartridge 0.4 mg/ml	3						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
NALOXONE HYDROCHLORIDE naloxone hcl soln prefilled syringe 0.4 mg/ml	3						
<b>naltrexone hcl tab 50 mg Revia</b>	1						
NARCAN naloxone hcl nasal spray 4 mg/0.1ml	2						
OPVEE nalmeferene hcl nasal spray 2.7 mg/0.1ml (base equiv)	2						
REXTOVY naloxone hcl nasal spray 4 mg/0.25ml	2						
RIVIVE naloxone hcl nasal spray 3 mg/0.1ml	2						
ZIMHI naloxone hcl soln prefilled syringe 5 mg/0.5ml	3						
<b>DIAGNOSTIC PRODUCTS</b>							
CONTOUR BLOOD GLUCOSE TES glucose blood test strip	2			•			
CONTOUR NEXT BLOOD GLUCOS glucose blood test strip	2			•			
CONTOUR PLUS BLOOD GLUCOS glucose blood test strip	2			•			
KETONE BLOOD TEST STRIPS - VARIOUS	3						
ONETOUCH ULTRA glucose blood test strip	2			•			
ONETOUCH ULTRA BLUE TEST glucose blood test strip	2			•			
ONETOUCH VERIO TEST STRIP glucose blood test strip	2			•			
URINE TEST STRIPS - VARIOUS	3						
<b>MEDICAL DEVICES</b>							
CAYA diaphragm arc-spring	A					•	
CONDOMS-MALE - VARIOUS	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
CONTOUR BLOOD GLUCOSE MON blood glucose monitoring devices	2						
CONTOUR NEXT BLOOD GLUCOS blood glucose monitoring kit w/ device	2						
CONTOUR NEXT EZ BLOOD GLU blood glucose monitoring kit w/ device	2						
CONTOUR NEXT GEN BLOOD GL blood glucose monitoring devices	2						
CONTOUR NEXT GEN BLOOD GL blood glucose monitoring kit w/ device	2						
CONTOUR NEXT LINK BLOOD G blood glucose monitoring kit w/ device	2						
CONTOUR NEXT LINK WIRELES blood glucose monitoring kit w/ device	2						
CONTOUR NEXT ONE BLOOD GL blood glucose monitoring devices	2						
CONTOUR NEXT ONE BLOOD GL blood glucose monitoring kit	2						
CONTOUR PLUS BLUE BLOOD G blood glucose monitoring kit w/ device	2						
DEXCOM G6 RECEIVER continuous glucose system receiver	2	•		•			
DEXCOM G6 SENSOR continuous glucose system sensor	2	•		•			
DEXCOM G6 TRANSMITTER continuous glucose system transmitter	2	•		•			
DEXCOM G7 RECEIVER continuous glucose system receiver	2	•		•			

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
DEXCOM G7 SENSOR continuous glucose system sensor	2	•		•			
FC2 FEMALE CONDOM condoms - female	A					•	
FEMCAP cervical cap 22 mm, 26 mm, 30 mm	A					•	
FREESTYLE LIBRE 14 DAY/ RE continuous glucose system receiver	2	•		•			
FREESTYLE LIBRE 14 DAY/ SE continuous glucose system sensor	2	•		•			
FREESTYLE LIBRE 2 PLUS/ SE continuous glucose system sensor	2	•		•			
FREESTYLE LIBRE 2/ READER/ continuous glucose system receiver	2	•		•			
FREESTYLE LIBRE 2/ SENSOR/ continuous glucose system sensor	2	•		•			
FREESTYLE LIBRE 3 PLUS/ SE continuous glucose system sensor	2	•		•			
FREESTYLE LIBRE 3/ READER/ continuous glucose system receiver	2	•		•			
FREESTYLE LIBRE 3/ SENSOR/ continuous glucose system sensor	2	•		•			
FREESTYLE LIBRE/READER/ FL continuous glucose system receiver	2	•		•			
INSULIN PEN NEEDLES - VARIOUS	2						
INSULIN SYRINGES - VARIOUS	2						
LANCETS - VARIOUS	2						
OMNIFLEX DIAPHRAGM diaphragms	A					•	

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
OMNIPOD DASH PODS (GEN 4) insulin infusion disposable pump reservoir	2	•					
OMNIPOD 5 DEXCOM G7G6 INT insulin infusion disposable pump kit	2	•					
OMNIPOD 5 DEXCOM G7G6 POD insulin infusion disposable pump reservoir	2	•					
OMNIPOD 5 LIBRE2 PLUS G6 insulin infusion disposable pump kit	2	•					
OMNIPOD 5 LIBRE2 PLUS G6 insulin infusion disposable pump reservoir	2	•					
ONETOUCH ULTRA 2 blood glucose monitoring kit w/ device	2						
ONETOUCH VERIO blood glucose monitoring kit w/ device	2						
ONETOUCH VERIO FLEX BLOOD blood glucose monitoring kit w/ device	2						
ONETOUCH VERIO IQ BLOOD G blood glucose monitoring kit w/ device	2						
ONETOUCH VERIO REFLECT blood glucose monitoring kit w/ device	2						
WIDE-SEAL SILICONE DIAPHR diaphragm wide seal 60 mm, 65 mm, 70 mm, 75 mm, 80 mm, 85 mm, 90 mm, 95 mm	A					•	
<b>ASSORTED CLASSES</b>							
ASTAGRAF XL tacrolimus cap er 24hr 0.5 mg, 1 mg, 5 mg	3						
azathioprine tab 50 mg Imuran	1						
azathioprine tab 75 mg, 100 mg	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
BENLYSTA belimumab subcutaneous solution auto-injector 200 mg/ml	4	•		•	•		•
BENLYSTA belimumab subcutaneous solution prefilled syringe 200 mg/ml	4	•		•	•		•
<b>cyclosporine cap 25 mg, 100 mg Sandimmune</b>	1						
<b>cyclosporine modified cap 25 mg, 100 mg Neoral</b>	1						
<b>cyclosporine modified cap 50 mg Cyclosporine modifie</b>	1						
<b>cyclosporine modified oral soln 100 mg/ml Neoral</b>	1						
ENSPRYNG satralizumab-mwge subcutaneous soln pref syringe 120 mg/ml	4	•		•	•		•
ENVARUSUS XR tacrolimus tab er 24hr 0.75 mg, 1 mg, 4 mg	3						
<b>everolimus tab 0.25 mg, 0.5 mg, 0.75 mg, 1 mg Zortress</b>	1						
JOENJA leniolisib phosphate tab 70 mg	4				•		•
<b>lenalidomide caps 2.5 mg Revlimid</b>	4	•		•	•		
<b>lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg Revlimid</b>	4	•		•	•		
LOKELMA sodium zirconium cyclosilicate for susp packet 5 gm, 10 gm	2						
LUPKYNIS voclosporin cap 7.9 mg	4	•		•	•		•
<b>mycophenolate mofetil cap 250 mg Cellcept</b>	1						
<b>mycophenolate mofetil for oral susp 200 mg/ml Cellcept</b>	1						
<b>mycophenolate mofetil tab 500 mg Cellcept</b>	1						

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>mycophenolate sodium tab dr 180 mg (mycophenolic acid equiv), 360 mg (mycophenolic acid equiv) Myfortic</b>	1						
MYHIBBIN mycophenolate mofetil oral susp 200 mg/ml	2						
NEORAL cyclosporine modified cap 25 mg, 100 mg	3						
NEORAL cyclosporine modified oral soln 100 mg/ml	3						
<b>penicillamine tab 250 mg</b> Depen titratabs	4				•		
PROGRAF tacrolimus cap 0.5 mg, 1 mg, 5 mg	3						
PROGRAF tacrolimus packet for susp 0.2 mg, 1 mg	3						
REVLIMID lenalidomide caps 2.5 mg	4	•		•	•		•
REVLIMID lenalidomide cap 5 mg, 10 mg, 15 mg, 20 mg, 25 mg	4	•		•	•		•
REZUROCK belumosudil mesylate tab 200 mg	4	•		•	•		•
SANDIMMUNE cyclosporine cap 25 mg, 100 mg	3						
<b>sirolimus oral soln 1 mg/ml</b> Rapamune	1						
<b>sirolimus tab 0.5 mg, 1 mg, 2 mg</b> Rapamune	1						
<b>sodium polystyrene sulfonate powder</b>	1						
<b>sodium polystyrene sulfonate susp 15 gm/60ml</b>	1						
SPS sodium polystyrene sulfonate rectal susp 30 gm/120ml	3						
<b>tacrolimus cap 0.5 mg, 1 mg, 5 mg</b> Prograf	1						
THALOMID thalidomide cap 50 mg, 100 mg	4	•		•	•		•

Drug Name	Drug Tier	Prior Approval	Step Therapy	Dispensing Limits	Specialty	ACA	Limited Distribution
<b>trientine hcl cap 250 mg</b> Syprine	4				•		
VELTASSA patiomer sorbitex calcium for susp packet 1 gm (base eq), 8.4 gm (base eq), 16.8 gm (base eq), 25.2 gm (base eq)	2						
VIJOICE alpelisib (pros) oral granules packet 50 mg	4				•		
VIJOICE alpelisib (pros) pak 250 mg daily dose (200 mg & 50 mg tabs)	4				•		
VIJOICE alpelisib (pros) tab therapy pack 50 mg daily dose, 125 mg daily dose	4				•		
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mgStalevo 50.....	57	CIBINQO.....	68
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mgStalevo 75.....	57	ciclopirox olamine cream 0.77% (base equiv).....	68
carbidopa-levodopa-entacapone tabs 25-100-200		ciclopirox olamine susp 0.77% (base equiv).....	68
mgStalevo 100.....	57	ciclopirox shampoo 1%Loprox shampoo.....	68
carbidopa-levodopa-entacapone tabs 31.25-125-200		ciclopirox solution 8%Penlac Nail Lacquer.....	68
mgStalevo 125.....	57	cilostazol tab 50 mg, 100 mgPletal.....	61
carbidopa-levodopa-entacapone tabs 37.5-150-200		CIMDUO.....	4
mgStalevo 150.....	57	cimetidine hcl soln 300 mg/5ml.....	37
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mgStalevo 200.....	57	CIMZIA STARTER KIT.....	39
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carbonyl iron susp 15 mg/1.25ml (elemental iron).....	59	CIPRO.....	2
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carisoprodol tab 250 mg, 350 mgSoma.....	58	0.3-0.1%Ciprodex.....	66
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carvedilol tab 3.125 mg, 6.25 mg, 12.5 mg, 25		equivalent)Ciloxan.....	64
mgCoreg.....	27	ciprofloxacin hcl otic soln 0.2% (base	
CAYA.....	71	equivalent)Cetraxal.....	66
CAYSTON.....	7	ciprofloxacin hcl tab 750 mg (base equiv).....	2
CEFACLOR.....	1	ciprofloxacin hcl tab 250 mg (base equiv), 500 mg	
cefadroxil cap 500 mg.....	1	(base equiv)Cipro.....	2
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cefdinir cap 300 mg.....	1	citalopram hydrobromide tab 10 mg (base equiv), 20	
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mg/5ml.....	1	clarithromycin tab 250 mg, 500 mgBiaxin.....	2
cefpodoxime proxetil tab 100 mg, 200 mg.....	1	CLEMASTINE FUMARATE.....	33
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clindamycin phosphate gel 1%Cleocin-t.....	68	COMBIPATCH.....	17
clindamycin phosphate lotion 1%Cleocin-t.....	68	COMBIVENT RESPIMAT.....	35
clindamycin phosphate soln 1%Cleocin-t.....	68	COMETRIQ.....	11
clindamycin phosphate swab 1%Cleocin-t.....	68	COMIRNATY 2024-25.....	8
clindamycin phosphate vaginal cream 2%Cleocin.....	40	COMPLERA.....	4
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clobetasol propionate emollient base cream 0.05%Temovate e.....	68	CONTOUR NEXT EZ BLOOD GLU.....	72
clobetasol propionate gel 0.05%Temovate.....	68	CONTOUR NEXT GEN BLOOD GL.....	72
clobetasol propionate oint 0.05%Temovate.....	68	CONTOUR NEXT LINK BLOOD G.....	72
clobetasol propionate soln 0.05%Temovate.....	68	CONTOUR NEXT LINK WIRELES.....	72
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		<b>cyclosporine cap 25 mg, 100 mgSandimmune.....</b>	<b>73</b>
		<b>cyclosporine modified cap 25 mg, 100 mgNeoral.....</b>	<b>73</b>
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		<b>cyclosporine modified oral soln 100 mg/mlNeoral.....</b>	<b>73</b>
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DEXCOM G6 SENSOR.....	72	diltiazem hcl extended release beads cap er 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mgTiazac.....	28
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divalproex sodium tab delayed release 125 mg, 250 mg, 500 mgDepakote.....	55	efavirenz-lamivudine-tenofovir df tab 600-300-300 mgSymfi.....	4
divalproex sodium tab er 24 hr 250 mg, 500 mgDepakote er.....	55	efavirenz-lamivudine-tenofovir df tab 400-300-300 mgSymfi lo.....	4
dofetilide cap 125 mcg (0.125 mg), 250 mcg (0.25 mg), 500 mcg (0.5 mg)Tikosyn.....	29	efavirenz tab 600 mgSustiva.....	4
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doxycycline monohydrate for susp 25 mg/5mlVibramycin.....	2	emtricitabine-tenofovir disoproxil fumarate tab 200-300 mgTruvada.....	4
doxycycline monohydrate tab 50 mg, 75 mgAdoxa.....	2	EMTRIVA.....	4
doxycycline monohydrate tab 100 mgAdoxa pak 1/100.....	2	EMVERM.....	7
doxycycline monohydrate tab 150 mgAdoxa pak 1/150.....	2	enalapril maleate & hydrochlorothiazide tab 5-12.5 mg.....	29
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		enoxaparin sodium inj 300 mg/3mlLovenox.....	60
		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/mlLovenox.....	60
		ENSPRYNG.....	73
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FLUARIX 2024-2025.....	8	fondaparinux sodium subcutaneous inj 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml, 10 mg/0.8mlArixtra.....	60
FLUBLOK 2024-2025.....	8	fosamprenavir calcium tab 700 mg (base equiv)Lexiva.....	4
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fluconazole for susp 10 mg/ml, 40 mg/mlDiflucan.....	3	fosinopril sodium & hydrochlorothiazide tab 10-12.5 mg, 20-12.5 mg.....	30
fluconazole tab 50 mg, 100 mg, 150 mg, 200 mgDiflucan.....	3	fosinopril sodium tab 10 mg, 20 mg, 40 mg.....	30
flucytosine cap 250 mg, 500 mgAncobon.....	3	FOTIVDA.....	12
fludrocortisone acetate tab 0.1 mg.....	16	FRAGMIN.....	60
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fluocinolone acetonide oil 0.01% (body oil)Derma-smoothe/fs bod.....	69	FREESTYLE LIBRE 3/SENSOR/.....	72
fluocinolone acetonide oil 0.01% (scalp oil)Derma-smoothe/fs sca.....	69	FREESTYLE LIBRE 14 DAY/RE.....	72
fluocinolone acetonide oint 0.025%Synalar.....	69	FREESTYLE LIBRE 14 DAY/SE.....	72
fluocinolone acetonide (otic) oil 0.01%Dermotic.....	66	FREESTYLE LIBRE 2 PLUS/SE.....	72
fluocinolone acetonide soln 0.01%Synalar.....	69	FREESTYLE LIBRE 3 PLUS/SE.....	72
fluocinonide cream 0.05%.....	69	frovatriptan succinate tab 2.5 mg (base equivalent)Frova.....	54
fluocinonide cream 0.1%Vanos.....	69	FRUZAQLA.....	12
fluocinonide emulsified base cream 0.05%.....	69	FUROSCIX.....	31
fluocinonide oint 0.05%.....	69	furosemide oral soln 10 mg/ml.....	31
fluocinonide soln 0.05%.....	69	furosemide tab 20 mg, 40 mg, 80 mgLasix.....	31
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gabapentin oral soln 250 mg/5mlNeurontin.....	55
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GENOTROPIN MINIQUICK.....	25
gentamicin sulfate cream 0.1%.....	69
gentamicin sulfate oint 0.1%.....	69
gentamicin sulfate ophth soln 0.3%Garamycin.....	65
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glipizide-metformin hcl tab 2.5-250 mg, 2.5-500 mg, 5-500 mg.....	20
glipizide tab er 24hr 2.5 mg, 5 mg, 10 mgGlucotrol xl.....	20
glipizide tab 5 mg, 10 mgGlucotrol.....	20
GLUCAGON EMERGENCY KIT FO.....	20
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glyburide-metformin tab 1.25-250 mg, 2.5-500 mg, 5-500 mgGlucovance.....	20
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glyburide tab 1.25 mg, 2.5 mg, 5 mg.....	20
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griseofulvin microsize tab 500 mgGrifulvin v.....	3
griseofulvin ultramicrosize tab 125 mg, 250 mgGris-peg.....	3
guaifenesin-codeine soln 100-10 mg/5ml.....	34

guanfacine hcl tab er 24hr 1 mg (base equiv), 2 mg (base equiv), 3 mg (base equiv), 4 mg (base equiv)Intuniv.....	46
guanfacine hcl tab 1 mg, 2 mgTenex.....	30
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hydrochlorothiazide cap 12.5 mgMicrozide.....	31
hydrochlorothiazide tab 12.5 mg, 25 mg, 50 mg.....	31
hydrocodone-acetaminophen soln 7.5-325 mg/15mlHycet.....	50
hydrocodone-acetaminophen tab 10-325 mg, 5-325 mg, 7.5-325 mgNorco.....	50
HYDROCODONE BITARTRATE/AC.....	50
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hydrocortisone perianal cream 1%Proctocort.....	67	ipratropium bromide inhal soln 0.02%.....	35
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hydromorphone hcl tab er 24hr 8 mg, 12 mg, 16 mg, 32 mg.....	50	IRESSA.....	12
hydromorphone hcl tab 2 mg, 4 mg, 8 mgDilaudid.....	50	IRON CHEWS PEDIATRIC.....	60
HYDROXOCOBALAMIN.....	60	IRON UP.....	60
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hydroxychloroquine sulfate tab 200 mgPlaquenil.....	7	ISENTRESS HD.....	5
hydroxyurea cap 500 mgHydrea.....	12	isoniazid syrup 50 mg/5ml.....	3
hydroxyzine hcl syrup 10 mg/5ml.....	41	isoniazid tab 100 mg, 300 mg.....	3
hydroxyzine hcl tab 10 mg, 25 mg, 50 mg.....	41	isosorbide dinitrate-hydralazine hcl tab 20-37.5 mgBidil.....	33
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ketoconazole tab 200 mg.....	3	LENVIMA 4 MG DAILY DOSE.....	13
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ketorolac tromethamine tab 10 mg.....	52	LENVIMA 14 MG DAILY DOSE.....	13
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lactic acid (ammonium lactate) cream 12%Lac-hydrin.....	69	levocarnitine tab 330 mgCarnitor.....	26
lactic acid (ammonium lactate) lotion 12%Lac-hydrin.....	69	levofloxacin oral soln 25 mg/mlLevaquin.....	2
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liothyronine sodium tab 5 mcg, 25 mcg, 50 mcg Cytomel.....	24	LUPRON DEPOT (4-MONTH).....	13
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lorazepam tab 0.5 mg, 1 mg, 2 mg Ativan.....	41	medroxyprogesterone acetate im susp prefilled syr 150 mg/ml Depo-provera contrac.....	19
LORBRENA.....	13	medroxyprogesterone acetate tab 2.5 mg, 5 mg, 10 mg Provera.....	20
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losartan potassium tab 25 mg, 50 mg, 100 mg Cozaar.....	30	mefloquine hcl tab 250 mg.....	7
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lovastatin tab 20 mg.....	32	memantine hcl oral solution 2 mg/ml Namenda.....	48
lovastatin tab 40 mg Mevacor.....	32	memantine hcl tab 5 mg, 10 mg Namenda.....	48
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		mesalamine suppos 1000 mg Canasa.....	39
		mesalamine tab delayed release 1.2 gm Lialda.....	39
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metaxalone tab 800 mgSkelaxin.....	58	metoprolol & hydrochlorothiazide tab 100-50 mg.....	30
metformin hcl tab er 24hr 500 mg, 750 mgGlucophage xr.....	21	metoprolol & hydrochlorothiazide tab 50-25 mg, 100-25 mgLopressor hct.....	30
metformin hcl tab 500 mg, 850 mg, 1000 mgGlucophage.....	21	metoprolol succinate tab er 24hr 25 mg (tartrate equiv), 50 mg (tartrate equiv), 100 mg (tartrate equiv), 200 mg (tartrate equiv)Toprol xl.....	28
methadone hcl conc 10 mg/mlMethadose.....	51	metoprolol tartrate tab 25 mg.....	28
methadone hcl soln 5 mg/5ml, 10 mg/5mlMethadone hcl.....	51	metoprolol tartrate tab 50 mg, 100 mgLopressor.....	28
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methadone hcl tab 5 mgDolophine hcl.....	51	metronidazole gel 1%Metrogel.....	70
METHAMPHETAMINE HYDROCHLO.....	46	metronidazole tab 250 mg, 500 mgFlagyl.....	7
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methenamine hippurate tab 1 gmHiprex.....	7	mexiletine hcl cap 150 mg, 200 mg, 250 mg.....	29
methimazole tab 5 mg, 10 mgTapazole.....	24	MICONAZOLE 3.....	40
METHITEST.....	17	midodrine hcl tab 2.5 mg, 5 mg, 10 mg.....	32
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methylphenidate hcl chew tab 2.5 mg, 5 mg, 10 mg.....	46	mometasone furoate solution 0.1% (lotion)Elocon.....	70
methylphenidate hcl soln 5 mg/5ml, 10 mg/5mlMethylin.....	46	MONOCAL.....	59
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methylphenidate hcl tab er osmotic release (osm) 72 mg.....	46	montelukast sodium tab 10 mg (base equiv)Singulair.....	35
methylphenidate hcl tab er osmotic release (osm) 18 mg, 27 mg, 36 mg, 54 mgConcerta.....	46	morphine sulfate oral soln 10 mg/5ml, 100 mg/5ml (20 mg/ml).....	51
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