

2017

List of Covered Drugs (Formulary)

Humana Gold Plus
Integrated H3480-001
(Medicare-Medicaid Plan)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN. THIS FORMULARY WAS UPDATED ON 12/26/2017. IF YOU HAVE QUESTIONS, PLEASE CALL HUMANA GOLD PLUS INTEGRATED H3480-001 (MEDICARE-MEDICAID PLAN) AT 1-855-280-4002 (TTY: 711), 8 A.M. to 8 P.M., MONDAY THROUGH FRIDAY, EASTERN TIME. THIS CALL IS FREE.

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If you have questions, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit [Humana.com](https://www.humana.com).



Humana Gold Plus Integrated H3480-001 (Medicare-Medicaid Plan) | 2017 List of Covered Drugs (Formulary)

This is a list of drugs that members can get in Humana Gold Plus Integrated, a Commonwealth Coordinated Care Plan.

- Humana Gold Plus Integrated H3480-001 (Medicare-Medicaid Plan) is a health plan that contracts with both Medicare and the Virginia Department of Medical Assistance Services to provide benefits of both programs to enrollees.
- The List of Covered Drugs and/or pharmacy and provider networks may change throughout the year. We will send you a notice before we make a change that affects you.
- Benefits and/or co-payments may change on January 1 of each year.
- You can always check Humana Gold Plus Integrated's up-to-date List of Covered Drugs online at **Humana.com**.
- Limitations, copays, and restrictions may apply. For more information, call Humana Gold Plus Integrated Customer Care or read the Humana Gold Plus Integrated Member Handbook.
- Copays for prescription drugs may vary based on the level of Extra Help you get. Please contact the plan for more details.
- You can get this information for free in other languages. Call 1-855-280-4002 (TTY: 711) Monday - Friday, from 8 a.m. - 8 p.m. Eastern Time. The call is free.
- Puede obtener esta información gratis en otros idiomas. Llame al 1-855-280-4002 (TTY: 711) de lunes a viernes de 8 a.m. a 8 p.m. hora del este. La llamada es gratuita.
- You can get this information for free in other formats, such as large print, braille, or audio. Call 1-855-280-4002 (TTY: 711) Monday - Friday, from 8 a.m. - 8 p.m. Eastern Time. The call is free.
- You can make a standing request to get materials, now and in the future, in a language other than English or in an alternate format. Call Customer Care at the number at the bottom of the page. The call is free.



Frequently Asked Questions (FAQ)

Find answers here to questions you have about this List of Covered Drugs. You can read all of the FAQ to learn more, or look for a question and answer.

1. What prescription drugs are on the List of Covered Drugs? (We call the List of Covered Drugs the “Drug List” for short.)

The drugs on the List of Covered Drugs that starts on page 11, are the drugs covered by Humana Gold Plus Integrated. These drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as "network pharmacies."

- Humana Gold Plus Integrated will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy, **and**
 - you fill the prescription at a Humana Gold Plus Integrated network pharmacy.
- Humana Gold Plus Integrated may have additional steps to access certain drugs (see question #5 below).

You can also see an up-to-date list of drugs that we cover on our website at **Humana.com** or call Customer Care at the number at the bottom of the page.

2. Does the Drug List ever change?

Yes. Humana Gold Plus Integrated may add or remove drugs on the Drug List during the year. Generally, the Drug List will only change if:

- a cheaper drug comes along that works as well as a drug on the Drug List now, **or**
- we learn that a drug is not safe.

We may also change our rules about drugs. For example, we could:

- Decide to require or not require prior approval for a drug. (*Prior approval* is permission from Humana Gold Plus Integrated before you can get a drug.)
- Add or change the amount of a drug you can get (called “quantity limits”).
- Add or change step therapy restrictions on a drug. (*Step therapy* means you must try one drug before we will cover another drug.)

(For more information on these drug rules, see page 11.)

We will tell you when a drug you are taking is removed from the Drug List. We will also tell you when we change our rules for covering a drug. Questions 3, 4, and 7 below have more information on what happens when the Drug List changes.

- You can always check Humana Gold Plus Integrated's up-to-date Drug List online at **Humana.com**. You can also call Customer Care to check the current Drug List at the number at the bottom of the page.
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3. What happens when a cheaper drug comes along that works as well as a drug on the Drug List now?

If you are taking a drug that is removed because a cheaper drug that works just as well comes along, we will tell you. We will tell you at least 60 days before we remove it from the Drug List **or** when you ask for a refill. Then you can get a 60-day supply of the drug before the change to the Drug List is made. You will be notified by mail of any changes.

If you have questions, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit **Humana.com**.



4. What happens when we find out a drug is not safe?

If the Food and Drug Administration (FDA) says a drug you are taking is not safe, we will take it off the Drug List right away. We will also send you a letter telling you that. Talk to your doctor about other alternative medicines that could be used to treat your medical conditions.

5. Are there any restrictions or limits on drug coverage? Or are there any required actions to take in order to get certain drugs?

Yes, some drugs have coverage rules or have limits on the amount you can get. In some cases you or your doctor or other prescriber must do something before you can get the drug. For example:

- **Prior approval (or prior authorization):** For some drugs, you or your doctor or other prescriber must get approval from Humana Gold Plus Integrated before you fill your prescription. If you don't get approval, Humana Gold Plus Integrated may not cover the drug.
- **Quantity limits:** Sometimes Humana Gold Plus Integrated limits the amount of a drug you can get.
- **Step therapy:** Sometimes Humana Gold Plus Integrated requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.

You can find out if your drug has any additional requirements or limits by looking in the tables beginning on page 12. You can also get more information by visiting our website at **Humana.com**. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can also ask for an "exception" from these limits. Please see question 11 for more information on exceptions.

- If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List, or if you cannot easily get the drug you need, we can help. We will cover a 31-day emergency supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Humana Gold Plus Integrated member. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. Please see question 11 for more information about exceptions.
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6. How will you know if the drug you want has limitations or if there are required actions to take to get the drug?

The List of Covered Drugs on page 11 has a column labeled "Necessary actions, restrictions, or limits on use."

7. What happens if we change our rules on how we cover some drugs? For example, if we add prior authorization (approval), quantity limits, and/or step therapy restrictions on a drug.

We will tell you if we add prior approval, quantity limits, and/or step therapy restrictions on a drug. We will tell you at least 60 days before the restriction is added or when you next ask for a refill. Then, you can get a 60-day supply of the drug before the change to the Drug List is made. This gives you time to talk to your doctor or other prescriber about what to do next.

8. How can you find a drug on the Drug List?

There are two ways to find a drug:

- You can search alphabetically (if you know how to spell the drug), **or**
- You can search by medical condition.

To search **alphabetically**, go to the Alphabetical Listing section. You can find it by beginning on page 195.

To search by medical condition, find the section labeled “List of drugs by medical condition” on page 255. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, heart-related conditions. That is where you will find drugs that treat heart conditions.

9. What if the drug you want to take is not on the Drug List?

If you don't see your drug on the Drug List, call Customer Care at the number at the bottom of the page and ask about it. If you learn that Humana Gold Plus Integrated will not cover the drug, you can do one of these things:

- Ask Customer Care for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. He or she can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. Please see question 11 for more information about exceptions.

10. What if you are a new Humana Gold Plus Integrated member and can't find your drug on the Drug List or have a problem getting your drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of Humana Gold Plus Integrated. This will give you time to talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

We will cover a 30-day supply of your drug if:

- you are taking a drug that is not on our Drug List, **or**
- health plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior approval by Humana Gold Plus Integrated, **or**
- you are taking a drug that is part of a step therapy restriction.

If you live in a nursing home or other long-term care facility, you may refill your prescription for as long as 98 days. You may refill the drug multiple times during the 90 days in the plan. This gives your prescriber time to change your drugs to ones on the Drug List or ask for an exception.

Humana wants to be sure that you, as a new or existing member, safely transition into the 2017 plan year. In 2017, you may not be able to receive your current drug therapy if the drug:

- Is not on Humana's drug list *or*
- Requires prior authorization because of quantity limits, step therapy requirements, or confirmation of your clinical history

Cost-sharing for Drugs provided through the Transition Policy

If you're eligible for the low-income subsidy (LIS) in 2017, your copayment or coinsurance for a temporary supply of drugs provided during your transition period won't exceed your LIS limit. If you don't receive LIS, your copayment or coinsurance will be based on your plan's approved drug cost sharing tiers.



One-Time Transition Supply at a Retail or Mail-Order Pharmacy

When you have limited ability to receive your current prescription therapy:

- Humana will cover a one-time, 30-day supply of a Part D-covered drug *unless* the prescription is written for less than 30 days (in which case Humana will allow multiple fills to provide up to a total of 30 days of medication) during the first 90 days of your eligibility. Humana will provide refills for transition prescriptions dispensed for less than the written amount due to quantity limits for safety purposes or drug utilization edits that are based on approved product labeling.
- After you have your 30-day supply, you'll receive a letter that explains the temporary nature of the transition medication supply. After you receive the letter, talk to your doctor and decide if you should switch to an alternative drug or request an exception or prior authorization. Humana may not pay for refills of temporary supply drugs until an exception or prior authorization has been requested and approved.

Transition Supply for Residents of Long-Term Care Facilities

For those members who are new to the plan and reside in a long-term care facility, Humana will cover a temporary supply of your drug during the first 90 days of your membership in the plan. The total supply allowed will be for a maximum of 98 days, or less if your prescription is written for fewer days. (Please note that the long-term care pharmacy may provide the drug in smaller amounts at a time to prevent waste.) If needed, we will cover additional refills during your first 90 days in the plan.

This coverage is offered anytime during the first 90 days of your eligibility when your current prescription therapy is filled at a long-term care pharmacy. Whether or not you are a new plan member we will cover up to a 31 day supply of the drug you need if it is not on the Drug list, or if you cannot easily get the drug you need, so you can continue therapy while you pursue an exception or prior authorization.

Transition Supply for Current Members

Throughout the plan year, you may have a change in your treatment setting due to the level of care you require. Such transitions include:

- Members discharged from a hospital or skilled nursing facility to a home setting
- Members admitted to a hospital or skilled nursing facility from a home setting
- Members who transfer from one skilled nursing facility to another and serviced by a different pharmacy
- Members who end their skilled nursing facility Medicare Part A stay - where payments include all pharmacy charges - and who need to now use their Part D plan benefit
- Members who give up Hospice status and revert back to standard Medicare Part A and B coverage
- Members discharged from chronic psychiatric hospitals with highly individualized drug regimens

For these changes in treatment settings, Humana will cover up to a 31-day supply of a Part D-covered drug when your prescription is filled at a pharmacy. If you change treatment settings multiple times within the same month, you may have to request an exception or prior authorization and receive approval for continued coverage of your drug.

Humana will review these requests for continuation of therapy on a case-by-case basis when you have a stabilized drug regimen that, if altered, is known to have risks.

Transition Extension

Humana makes arrangements to continue to provide necessary drugs to you via an extension of the transition period, on a case-by case basis, when your exception request or appeal has not been processed by the end of your transition period.

If you have questions, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit [Humana.com](https://www.humana.com).



Public Notice of Transition Policy

This Transition Policy is available on Humana's Website, **Humana.com**, in the same area where the Part D Formulary is displayed.

If you need help understanding this information, please contact Customer Care at the number at the bottom of the page.

11. Can you ask for an exception to cover your drug?

Yes. You can ask Humana Gold Plus Integrated to make an exception to cover a drug that is not on the Drug List.

You can also ask us to change the rules on your drug.

- For example, Humana Gold Plus Integrated may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
 - Other examples: You can ask us to drop step therapy restrictions or prior approval requirements.
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12. How long does it take to get an exception?

First, we must get a statement from your prescriber supporting your request for an exception. After we get the statement, we will give you a decision on your exception request within 72 hours.

If you or your prescriber think your health may be harmed if you have to wait 72 hours for a decision, you can ask for an expedited exception. This is a faster decision. If your prescriber supports your request, we will give you a decision within 24 hours of getting your prescriber's supporting statement.

13. How can you ask for an exception?

To ask for an exception, call Humana Clinical Pharmacy Review (HCPR) at 1-800-555-CLIN (2546) (TTY: 711) Monday - Friday, from 8 a.m. - 8 p.m. Eastern Time. Humana Clinical Pharmacy Review will work with you and your provider to help you ask for an exception.

14. What are generic drugs?

Generic drugs are made up of the same active ingredients as brand name drugs. They usually cost less than the brand name drug and usually don't have well-known names. Generic drugs are approved by the Food and Drug Administration (FDA).


Humana Gold Plus Integrated covers both brand name drugs and generic drugs.

15. What are OTC drugs?

OTC stands for "over-the-counter".

Humana Gold Plus Integrated covers some OTC drugs when they are written as prescriptions by your provider.

You can read the Humana Gold Plus Integrated Drug List to see what OTC drugs are covered.

 **If you have questions**, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit **Humana.com**.

16. What is your copay?

You can read the Humana Gold Plus Integrated Drug List to learn about the copay for each drug.

Humana Gold Plus Integrated members living in nursing homes or other long-term care facilities will have no copays. Some members getting long-term care in the community will also have no copays.

- Tier 1 drugs have the lowest copay. They are generic drugs. The copay is from \$0 to \$3.30, depending on your income.
- Tier 2 drugs have a medium copay. They are brand name drugs. The copay is from \$0 to \$8.25, depending on your income.
- Tier 3 drugs have the highest copay. They have a copay of \$0.
- Tier 4 drugs have a copay of \$0.

17. What are drug tiers?

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs are generic drugs
- Tier 2 drugs brand name drugs
- Tier 3 drugs are Non-Medicare Rx Drugs
- Tier 4 drugs are Non-Medicare OTC drugs



List of Covered Drugs

The list of covered drugs that begins on the next page gives you information about the drugs covered by Humana Gold Plus Integrated. If you have trouble finding your drug in the list, turn to the Index that begins on page 195.

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

The information in the necessary actions, restrictions, or limits on use column tells you if Humana Gold Plus Integrated has any rules for covering your drug.

Note: The (*) next to a drug means the drug is not a “Part D drug.” The amount you pay when you fill a prescription for this drug does not count towards your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are getting Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for these drugs. These drugs also have different rules for appeals. An *appeal* is a formal way of asking us to review a coverage decision and to change it if you think we made a mistake. For example, we might decide that a drug that you want is not covered or is no longer covered by Medicare or Medicaid. If you or your doctor disagrees with our decision, you can appeal. To ask for instructions on how to appeal, call Customer Care at the number at the bottom of the page. You can also read the Member Handbook to learn how to appeal a decision.

Here are the meanings of the codes used in the “Necessary actions, restrictions, or limits on use” column:

QL = Quantity Limit: only a specific quantity of a drug is allowed per a given period of days.

PA = Prior authorization (approval): you must have approval from the plan before you can get this drug.

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

BvsD = Medicare Part B or Part D review (approval): administration location of the drug is reviewed and must be approved before the plan will cover the cost of this drug.

(*) = Not a Part D Drug.

MO = Drug is typically available through mail-order.

List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, heart-related conditions. That is where you will find drugs that treat heart conditions.

ANTI-INFECTIVE AGENTS - Drugs used to treat an infection

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>abacavir 20 mg/ml solution</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (960 per 30 days)
<i>abacavir 300 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>abacavir-lamivudine 600-300 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>abacavir-lamivudine-zidov tab</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
ABELCET 5 MG/ML INTRAVENOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>acyclovir 200 mg capsule; acyclovir 200 mg/5 ml susp; acyclovir 400 mg, 800 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>acyclovir 1,000 mg/20 ml vial; acyclovir sodium 50 mg/ml, 500 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>adefovir dipivoxil 10 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
ALBENZA 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
ALINIA 100 MG/5 ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (150 per 30 days)
ALINIA 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (40 per 30 days)
AMBISOME 50 MG INTRAVENOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>amikacin sulf 500 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amoxicillin 125 mg, 250 mg tab chew; amoxicillin 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml susp; amoxicillin 250 mg, 500 mg capsule; amoxicillin 500 mg, 875 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amox-clav 200-28.5 mg, 400-57 mg tab chew; amox-clav 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml sus; amox-clav 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml susp; amox-clav 250-125 mg, 500-125 mg, 875-125 mg tablet; amox-clav er 1,000-62.5 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amphotericin b 50 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>ampicillin 125 mg/5 ml, 250 mg/5 ml susp; ampicillin 250 mg, 500 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 11. **If you have questions**, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit Humana.com.



DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>ampicillin 1 gm vial; ampicillin 1 gram, 10 gram, 125 mg vial; ampicillin 10 gm vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>ampicillin-sulbactam 15 gm vl; ampicillin-sulbactam 3 gm vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
APTIVUS 100 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (285 per 28 days)
APTIVUS 250 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
<i>atovaquone 750 mg/5 ml susp</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>atovaquone-proguanil 250-100; atovaquone-proguanil 62.5-25</i> ^{MO}	Up to \$3.30 (Tier 1)	
ATRIPLA 600 MG-200 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>azithromycin 1 gm pwd packet; azithromycin 100 mg/5 ml, 200 mg/5 ml susp; azithromycin 250 mg, 500 mg, 600 mg tablet; azithromycin i.v. 500 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>aztreonam 1 gm vial; aztreonam 2 gm vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>bacitracin 50,000 unit vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
BARACLUDE 0.05 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (630 per 30 days)
BETHKIS 300 MG/4 ML SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (224 per 28 days)
BICILLIN C-R 1,200,000 UNIT/2 ML INTRAMUSCULAR SYRINGE; BICILLIN C-R 900,000 UNIT-300K UNIT/2 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
BICILLIN L-A 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
CANCIDAS 50 MG, 70 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
CAPASTAT 1 GRAM SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
<i>caspofungin acetate 50 mg, 70 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
CAYSTON 75 MG/ML SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (84 per 28 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 11. **If you have questions**, please call Humana Gold Plus Integrated (Medicare-Medicaid Plan) at 1-855-280-4002 (TTY: 711), 8 a.m. to 8 p.m., Monday through Friday, Eastern time. The call is free. **For more information**, visit [Humana.com](https://www.humana.com).



DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
cefaclor 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml susp; cefaclor 125 mg/5 ml, 250 mg/5 ml, 375 mg/5 ml suspen; cefaclor 250 mg, 500 mg capsule; cefaclor er 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
cefadroxil 1 gm tablet; cefadroxil 250 mg/5 ml, 500 mg/5 ml susp; cefadroxil 500 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
cefazolin 1 gm vial; cefazolin 1 gram, 10 gram, 500 mg vial; cefazolin 10 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
cefazolin 1 g/50 ml-dextrose; cefazolin 2 g/100 ml-dextrose ^{MO}	Up to \$3.30 (Tier 1)	
cefdinir 125 mg/5 ml, 250 mg/5 ml susp; cefdinir 300 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
cefepime hcl 1 gm vial; cefepime hcl 1 gram, 2 gram vial ^{MO}	Up to \$3.30 (Tier 1)	
cefotaxime sodium 1 gm vial; cefotaxime sodium 1 gram, 10 gram, 2 gram, 500 mg vial; cefotaxime sodium 10 gm vial; cefotaxime sodium 2 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
cefotetan 1 gm vial; cefotetan 10 gm vial; cefotetan 2 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
cefoxitin 1 gm vial; cefoxitin 10 gm vial; cefoxitin 2 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
cefoxitin 1 gm piggyback bag; cefoxitin 2 gm piggyback bag ^{MO}	Up to \$3.30 (Tier 1)	
cefpodoxime 100 mg, 200 mg tablet; cefpodoxime 100 mg/5 ml, 50 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
cefprozil 125 mg/5 ml, 250 mg/5 ml susp; cefprozil 250 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ceftazidime 1 gm vial; ceftazidime 2 gm vial; ceftazidime 6 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
ceftazidime 1 gm piggyback; ceftazidime 2 gm piggyback ^{MO}	Up to \$3.30 (Tier 1)	
ceftriaxone 1 gm vial; ceftriaxone 1 gram, 10 gram, 2 gram, 250 mg, 500 mg vial; ceftriaxone 10 gm vial; ceftriaxone 2 gm add vial ^{MO}	Up to \$3.30 (Tier 1)	
cefuroxime axetil 250 mg, 500 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
cefuroxime sod 1.5 gm vial; cefuroxime sod 1.5 gram, 7.5 gram, 750 mg vial; cefuroxime sod 7.5 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
cephalexin 125 mg/5 ml, 250 mg/5 ml susp; cephalexin 250 mg, 500 mg tablet; cephalexin 250 mg, 500 mg, 750 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
chloramphen na succ 1 gm vial ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
chloroquine ph 250 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ciprofloxacin hcl 100 mg, 250 mg, 500 mg, 750 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
ciprofloxacin-d5w 200 mg/100 ml, 400 mg/200 ml ^{MO}	Up to \$3.30 (Tier 1)	
clarithromycin 125 mg/5 ml, 250 mg/5 ml sus; clarithromycin 250 mg, 500 mg tablet; clarithromycin er 500 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin hcl 150 mg, 300 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml-ns ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin-d5w 300 mg/50 ml, 600 mg/50 ml, 900 mg/50 ml ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin 75 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin pediatric 75 mg/5 ml oral solution ^{MO}	Up to \$3.30 (Tier 1)	
clindamycin ph 900 mg/6 ml v ^{MO}	Up to \$3.30 (Tier 1)	
COARTEM 20 MG-120 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (24 per 30 days)
colistimethate 150 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
COMPLERA 200 MG-25 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
CRESEMBA 186 MG CAPSULE; CRESEMBA 372 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
CRIXIVAN 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (450 per 30 days)
CRIXIVAN 400 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (270 per 30 days)
CUBICIN 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
CUBICIN RF 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
cycloserine 250 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
DAKLINZA 30 MG, 60 MG, 90 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
dapsone 100 mg, 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
daptomycin 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
DARAPRIM 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
demeclocycline 150 mg, 300 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
DESCOVY 200 MG-25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
dicloxacillin 250 mg, 500 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
didanosine dr 125 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
didanosine dr 200 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
didanosine dr 250 mg, 400 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
DIFICID 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (20 per 10 days)
DORIBAX 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
doripenem 250 mg, 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
doxy-100 100 mg intravenous solution ^{MO}	Up to \$3.30 (Tier 1)	
doxycycline hyc 100 mg vial; doxycycline hyclate 100 mg tab; doxycycline hyclate 100 mg, 50 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
doxycycline 25 mg/5 ml susp; doxycycline mono 100 mg, 150 mg, 50 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
doxycycline mono 100 mg, 50 mg, 75 mg cap; doxycycline mono 100 mg, 50 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
EDURANT 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
EMTRIVA 10 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (680 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
EMTRIVA 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
entecavir 0.5 mg, 1 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
EPCLUSA 400 MG-100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
EPIVIR HBV 25 MG/5 ML (5 MG/ML) ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
EPZICOM 600 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
ERAXIS(WATER DILUENT) 100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ERYTHROCIN 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
erythromycin 250 mg, 500 mg filmtab ^{MO}	Up to \$3.30 (Tier 1)	
ethambutol hcl 100 mg, 400 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
EVOTAZ 300 MG-150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
famciclovir 125 mg, 250 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
fluconazole 10 mg/ml, 40 mg/ml susp; fluconazole 100 mg, 150 mg, 200 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
fluconazole-dext 400 mg/200 ml ^{MO}	Up to \$3.30 (Tier 1)	
fluconazole-nacl 200 mg/100 ml, 400 mg/200 ml ^{MO}	Up to \$3.30 (Tier 1)	
flucytosine 250 mg, 500 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
fosamprenavir 700 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
foscarnet 24 mg/ml infus bttl ^{MO}	Up to \$3.30 (Tier 1)	B vs D
FUZEON 90 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
ganciclovir 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
gentamicin 80 mg/2 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
gentamicin 70 mg/ns 50 ml pb; gentamicin 90 mg/ns 100 ml pb; iso gentamicin 100 mg/100 ml, 60 mg/50 ml, 70 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml, 90 mg/100 ml; isoton gentamicin 100 mg/100 ml, 60 mg/50 ml, 70 mg/50 ml, 80 mg/100 ml, 80 mg/50 ml, 90 mg/100 ml ^{MO}	Up to \$3.30 (Tier 1)	
GENVOYA 150 MG-150 MG-200 MG-10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
griseofulvin 125 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
griseofulvin ultra 125 mg, 250 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
HARVONI 90 MG-400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
hydroxychloroquine 200 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
imipenem-cilastatin 250 mg, 500 mg vl ^{MO}	Up to \$3.30 (Tier 1)	
INTELENCE 100 MG, 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
INTELENCE 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
INTRON A 10 MILLION UNIT (1 ML), 10 MILLION UNIT/ML, 18 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML), 6 MILLION UNIT/ML INJECTION SOLUTION; INTRON A 10 MILLION UNIT (1 ML), 10 MILLION UNIT/ML, 18 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML), 6 MILLION UNIT/ML SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA
INVANZ 1 GRAM, 1 GRAM INTRAVENOUS SOLUTION; INVANZ 1 GRAM, 1 GRAM SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
INVIRASE 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (300 per 30 days)
INVIRASE 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
ISENTRESS 100 MG ORAL POWDER PACKET ^{MO}	Up to \$8.25 (Tier 2)	QL (300 per 30 days)
ISENTRESS 100 MG, 25 MG CHEWABLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (180 per 30 days)
ISENTRESS 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ISENTRESS HD 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
isoniazid 100 mg, 300 mg tablet; isoniazid 100 mg/ml, 50 mg/5 ml solution; isoniazid 100 mg/ml, 50 mg/5 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
itraconazole 100 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
ivermectin 3 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
JULUCA 50 MG-25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
KALETRA 100 MG-25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (300 per 30 days)
KALETRA 200 MG-50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (150 per 30 days)
KALETRA 400 MG-100 MG/5 ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
KETEK 300 MG, 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
ketoconazole 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
lamivudine 10 mg/ml oral soln ^{MO}	Up to \$3.30 (Tier 1)	QL (960 per 30 days)
lamivudine 150 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
lamivudine 300 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
lamivudine hbv 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
lamivudine-zidovudine tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
levofloxacin 25 mg/ml solution; levofloxacin 250 mg, 500 mg, 750 mg tablet; levofloxacin 500 mg/20 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
levofloxacin 500 mg/100 ml, 750 mg/150 ml-d5w ^{MO}	Up to \$3.30 (Tier 1)	
LEXIVA 50 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (1575 per 28 days)
LEXIVA 700 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
lincomycin hcl 600 mg/2 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
linezolid 100 mg/5 ml susp; linezolid 600 mg tablet; linezolid 600 mg/300 ml iv sol ^{MO}	Up to \$3.30 (Tier 1)	
linezolid-0.9% nacl 600 mg/300 ^{MO}	Up to \$3.30 (Tier 1)	
lopinavir-ritonavir 80-20mg/ml ^{MO}	Up to \$3.30 (Tier 1)	
mefloquine hcl 250 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
meropenem iv 1 gm vial; meropenem iv 1 gram, 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
meropenem-0.9% nacl 1 gram/50; meropenem-0.9% nacl 500 mg/50 ^{MO}	Up to \$3.30 (Tier 1)	
methenamine hipp 1 gm tablet ^{MO}	Up to \$3.30 (Tier 1)	
metronidazole 250 mg, 500 mg tablet; metronidazole 375 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
metronidazole 500 mg/100 ml ^{MO}	Up to \$3.30 (Tier 1)	
minocycline 100 mg, 50 mg, 75 mg capsule; minocycline hcl 100 mg, 50 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nafcillin 1 gm vial; nafcillin 10 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
nafcillin 1 gm/ 50 ml inj ^{MO}	Up to \$3.30 (Tier 1)	
NEBUPENT 300 MG SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
neomycin 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nevirapine 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
nevirapine 50 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	QL (1200 per 30 days)
nevirapine er 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
nevirapine er 400 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
nitrofurantoin 25 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
nitrofurantoin mcr 100 mg, 50 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
nitrofurantoin mono-mcr 100 mg ^{MO}	Up to \$3.30 (Tier 1)	
NORVIR 100 MG CAPSULE; NORVIR 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (360 per 30 days)
NORVIR 80 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (480 per 30 days)
NOXAFIL 100 MG TABLET, DELAYED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (93 per 30 days)
NOXAFIL 200 MG/5 ML (40 MG/ML) ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (840 per 28 days)
NOXAFIL 300 MG/16.7 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
nystatin 100,000 unit/ml susp; nystatin 500,000 unit oral tab ^{MO}	Up to \$3.30 (Tier 1)	
ODEFSEY 200 MG-25 MG-25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
ofloxacin 300 mg, 400 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
okebo 100 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
oseltamivir 6 mg/ml suspension ^{MO}	Up to \$3.30 (Tier 1)	QL (720 per 365 days)
oseltamivir phos 30 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (112 per 365 days)
oseltamivir phos 45 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (56 per 365 days)
paromomycin 250 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
PASER 4 GRAM GRANULES DELAYED-RELEASE PACKET ^{MO}	Up to \$8.25 (Tier 2)	
PEGINTRON 120 MCG KIT; PEGINTRON 120 MCG/0.5 ML, 150 MCG/0.5 ML, 50 MCG/0.5 ML, 80 MCG/0.5 ML SUBCUTANEOUS KIT; PEGINTRON 150 MCG KIT; PEGINTRON 80 MCG KIT ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (4 per 28 days)
PEGINTRON REDIPEN 120 MCG 4PK; PEGINTRON REDIPEN 150 MCG; PEGINTRON REDIPEN 50 MCG; PEGINTRON REDIPEN 80 MCG ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (4 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
penicillin g k 20 million unit, 5 million unit; penicillin gk 20 million unit, 5 million unit ^{MO}	Up to \$3.30 (Tier 1)	
penicillin g na 5 million unit ^{MO}	Up to \$3.30 (Tier 1)	
penicillin vk 125 mg/5 ml, 250 mg/5 ml soln; penicillin vk 250 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
PENTAM 300 MG SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
pfizerpen-g 20 million unit, 5 million unit solution for injection ^{MO}	Up to \$3.30 (Tier 1)	
piperacil-tazobact 13.5 gm vl; piperacil-tazobact 13.5 gram, 2.25 gram, 3.375 gram, 4.5 gram, 40.5 gram; piperacil-tazobact 2.25 gm vl; piperacil-tazobact 3.375 gm vl; piperacil-tazobact 4.5 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
polymyxin b sulfite vial ^{MO}	Up to \$3.30 (Tier 1)	
PREZCOBIX 800 MG-150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
PREZISTA 100 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (360 per 30 days)
PREZISTA 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (240 per 30 days)
PREZISTA 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
PREZISTA 75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (480 per 30 days)
PREZISTA 800 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
PRIFTIN 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
primaquine 26.3 mg tablet ^{MO}	Up to \$8.25 (Tier 2)	
PRIMSOL 50 MG/5 ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
pyrazinamide 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
quinine sulfate 324 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (42 per 7 days)
REBETOL 40 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (1000 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
RELENZA DISKHALER 5 MG/ACTUATION POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 180 days)
RESCRIPTOR 100 MG DISPERSIBLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (360 per 30 days)
RESCRIPTOR 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (180 per 30 days)
RETROVIR 10 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
REYATAZ 150 MG, 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
REYATAZ 300 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
REYATAZ 50 MG ORAL POWDER PACKET ^{MO}	Up to \$8.25 (Tier 2)	
<i>ribasphere 200 mg capsule; ribasphere 200 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (168 per 28 days)
<i>ribavirin 200 mg capsule; ribavirin 200 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (168 per 28 days)
<i>ribavirin 6 gm inhalation vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>rifabutin 150 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
RIFAMATE 300 MG-150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
<i>rifampin 150 mg, 300 mg capsule; rifampin iv 600 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
RIFATER 50 MG-120 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>rimantadine hcl 100 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
SELZENTRY 150 MG, 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (240 per 30 days)
SELZENTRY 20 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (920 per 30 days)
SELZENTRY 300 MG, 75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
SIRTURO 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (68 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
SIVEXTRO 200 MG INTRAVENOUS SOLUTION; SIVEXTRO 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (6 per 28 days)
SOVALDI 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
stavudine 1 mg/ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (2400 per 30 days)
stavudine 15 mg, 20 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
stavudine 30 mg, 40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
streptomycin sulf 1 gm vial ^{MO}	Up to \$3.30 (Tier 1)	
STRIBILD 150 MG-150 MG-200 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
sulfadiazine 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
sulfamethoxazole-tmp ds tablet; sulfamethoxazole-tmp inj vial; sulfamethoxazole-tmp ss tablet; sulfamethoxazole-tmp susp ^{MO}	Up to \$3.30 (Tier 1)	
sulfasalazine 500 mg, 500 mg tablet; sulfasalazine dr 500 mg, 500 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
SUPRAX 400 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
SUSTIVA 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
SUSTIVA 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (480 per 30 days)
SUSTIVA 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
SYLATRON 200 MCG, 300 MCG, 600 MCG SUBCUTANEOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4 per 28 days)
SYNAGIS 100 MG/ML, 50 MG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
SYNERCID 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
TAMIFLU 30 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (112 per 365 days)
TAMIFLU 45 MG, 75 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (56 per 365 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
TAMIFLU 6 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (720 per 365 days)
TEFLARO 400 MG, 600 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
<i>terbinafine hcl 250 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 365 days)
<i>tetracycline 250 mg, 500 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tigecycline 50 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tinidazole 250 mg, 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
TIVICAY 10 MG, 25 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
TOBI PODHALER 28 MG, 28 MG CAPSULE WITH INHALATION DEVICE; TOBI PODHALER 28 MG, 28 MG CAPSULES FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (224 per 28 days)
<i>tobramycin 10 mg/ml, 40 mg/ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
TRECTOR 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>trimethoprim 100 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
TRIUMEQ 600 MG-50 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
TRUVADA 100 MG-150 MG TABLET; TRUVADA 133 MG-200 MG TABLET; TRUVADA 167 MG-250 MG TABLET; TRUVADA 200 MG-300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
TYGACIL 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
TYZEKA 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>valacyclovir hcl 1 gram, 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
<i>valganciclovir 450 mg tablet; valganciclovir hcl 50 mg/ml</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>vancomycin 1 gm vial; vancomycin 1,000 mg, 10 gram, 500 mg vial; vancomycin hcl 10 gm vial; vancomycin hcl 125 mg, 250 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
VEMLIDY 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
VIDEX 2 GRAM PEDIATRIC 10 MG/ML (FINAL CONC.) ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (1200 per 30 days)
VIDEX 4 GRAM PEDIATRIC 10 MG/ML (FINAL CONC.) ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (1200 per 30 days)
VIRACEPT 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (300 per 30 days)
VIRACEPT 625 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
VIRAZOLE 6 GRAM SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
VIREAD 150 MG, 200 MG, 250 MG, 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
VIREAD 40 MG/SCOOP (40 MG/GRAM) ORAL POWDER ^{MO}	Up to \$8.25 (Tier 2)	QL (240 per 30 days)
VITEKTA 150 MG, 85 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>voriconazole 200 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>voriconazole 200 mg, 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (120 per 30 days)
<i>voriconazole 40 mg/ml susp</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (400 per 30 days)
XIFAXAN 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (9 per 30 days)
XIFAXAN 550 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (84 per 28 days)
ZERBAXA 1.5 GRAM INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ZERIT 1 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (2400 per 30 days)
ZIAGEN 20 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (960 per 30 days)
<i>zidovudine 100 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
<i>zidovudine 300 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>zidovudine 50 mg/5 ml syrup</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (1680 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ZYVOX 100 MG/5 ML ORAL SUSPENSION; ZYVOX 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	

ANTIHISTAMINE DRUGS - Drugs used to treat allergies

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
clemastine fum 2.68 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
cyproheptadine 2 mg/5 ml syrup; cyproheptadine 4 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
diphenhydramine 50 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	
levocetirizine 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
promethazine 12.5 mg, 25 mg, 50 mg tablet; promethazine 6.25 mg/5 ml syr ^{MO}	Up to \$3.30 (Tier 1)	
promethegan 12.5 mg, 25 mg, 50 mg rectal suppository ^{MO}	Up to \$3.30 (Tier 1)	

ANTINEOPLASTIC AGENTS - Drugs used to treat cancer

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ABRAXANE 100 MG INTRAVENOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA
adriamycin 10 mg/5 ml, 2 mg/ml, 20 mg/10 ml, 50 mg/25 ml intravenous solution ^{MO}	Up to \$3.30 (Tier 1)	B vs D
AFINITOR 10 MG, 2.5 MG, 5 MG, 7.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
AFINITOR DISPERZ 2 MG, 3 MG, 5 MG TABLET FOR ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA
ALECENSA 150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (240 per 30 days)
ALIMTA 100 MG, 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ALIQOPA 60 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (3 per 28 days)
ALKERAN 2 MG TABLET; ALKERAN 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
ALUNBRIG 30 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
ARRANON 250 MG/50 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ARZERRA 1,000 MG/50 ML, 100 MG/5 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (400 per 28 days)
AVASTIN 25 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>azacitidine 100 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	PA
BAVENCIO 20 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
BELEODAQ 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
BENDEKA 25 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
BESPONSA 0.9 MG(0.25 MG/ML INITIAL CONCENTRATION) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>bexarotene 75 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (300 per 30 days)
<i>bicalutamide 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
BICNU 100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>bleomycin sulfate 15 unit, 30 unit vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
BOSULIF 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
BOSULIF 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 1 days)
BOSULIF 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>busulfan 60 mg/10 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
BUSULFEX 60 MG/10 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CABOMETYX 20 MG, 40 MG, 60 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
CALQUENCE 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
CAPRELSA 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
CAPRELSA 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>carboplatin 50 mg/5 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
<i>cisplatin 50 mg/50 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
<i>cladribine 10 mg/10 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
<i>clofarabine 20 mg/20 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
CLOLAR 20 MG/20 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
COMETRIQ 100 MG/DAY (80 MG X 1-20 MG X 1) CAPSULES ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (56 per 28 days)
COMETRIQ 140 MG/DAY (80 MG X 1-20 MG X 3) CAPSULES ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (112 per 28 days)
COMETRIQ 60 MG/DAY (20 MG X 3/DAY) CAPSULES ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (84 per 28 days)
COSMEGEN 0.5 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
COTELLIC 20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (63 per 28 days)
<i>cyclophosphamide 1 gm vial; cyclophosphamide 1 gram, 2 gram, 500 mg vial; cyclophosphamide 2 gm vial; cyclophosphamide 25 mg, 50 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
CYRAMZA 10 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (200 per 28 days)
<i>cytarabine 20 mg/ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
<i>cytarabine 100 mg/5 ml (20 mg/ml), 2 gram/20 ml (100 mg/ml), 20 mg/ml vial; cytarabine 100 mg/5 ml vial; cytarabine 2 g/20 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D

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dacarbazine 100 mg, 200 mg vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
dactinomycin 0.5 mg vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
DARZALEX 20 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (400 per 30 days)
daunorubicin 20 mg/4 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
DAUNOXOME 50 MG (2 MG/ML) VIAL ^{MO}	Up to \$8.25 (Tier 2)	B vs D
decitabine 50 mg vial ^{MO}	Up to \$3.30 (Tier 1)	PA
DOCEFREZ 20 MG, 80 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
docetaxel 160 mg/16 ml vial; docetaxel 160 mg/8 ml vial; docetaxel 20 mg/2 ml vial; docetaxel 20 mg/ml vial; docetaxel 200 mg/10 ml vial; docetaxel 80 mg/4 ml vial; docetaxel 80 mg/8 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
docetaxel 200 mg/20 ml vial ^{MO}	Up to \$8.25 (Tier 2)	B vs D
doxorubicin 10 mg, 10 mg/5 ml, 2 mg/ml, 20 mg/10 ml, 50 mg, 50 mg/25 ml vial; doxorubicin 150 mg/75 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
doxorubicin liposome 50mg/25ml ^{MO}	Up to \$3.30 (Tier 1)	PA
DROXIA 200 MG, 300 MG, 400 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
EMCYT 140 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
EMPLICITI 300 MG, 400 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
epirubicin 200 mg, 200 mg/100 ml, 50 mg, 50 mg/25 ml vial; epirubicin hcl 200 mg, 200 mg/100 ml, 50 mg, 50 mg/25 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
ERBITUX 100 MG/50 ML, 200 MG/100 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
ERIVEDGE 150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
ERWINAZE 10,000 UNIT SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 28 days)
ETOPOPHOS 100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>etoposide 100 mg/5 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
EVOMELA 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
FARYDAK 10 MG, 15 MG, 20 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 21 days)
FASLODEX 250 MG/5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (30 per 30 days)
<i>fludarabine 50 mg, 50 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>fluorouracil 1 gram/20 ml, 2.5 gram/50 ml, 5 gram/100 ml, 500 mg/10 ml vial; fluorouracil 1,000 mg/20 ml vl; fluorouracil 2,500 mg/50 ml vl; fluorouracil 5,000 mg/100 ml</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>flutamide 125 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
FOLOTYN 20 MG/ML (1 ML), 40 MG/2 ML (20 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
GAZYVA 1,000 MG/40 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 28 days)
<i>gemcitabine 1 gram/26.3 ml vl; gemcitabine 2 gram/52.6 ml vl; gemcitabine 200 mg/5.26 ml vl; gemcitabine hcl 1 gram, 1 gram/26.3 ml (38 mg/ml), 2 gram, 2 gram/52.6 ml (38 mg/ml), 200 mg, 200 mg/5.26 ml (38 mg/ml) vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
GILOTRIF 20 MG, 30 MG, 40 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
GLEEVEC 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
GLEEVEC 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
GLEOSTINE 10 MG, 100 MG, 40 MG, 5 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
HALAVEN 1 MG/2 ML (0.5 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
HERCEPTIN 150 MG, 440 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
HEXALEN 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
HYCAMTIN 4 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
hydroxyurea 500 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
IBRANCE 100 MG, 125 MG, 75 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (21 per 28 days)
ICLUSIG 15 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
ICLUSIG 45 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
IDAMYCIN PFS 1 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
idarubicin hcl 20 mg/20 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
IDHIFA 100 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
ifosfamide 1 gm vial; ifosfamide 1 gm/20 ml vial; ifosfamide 3 gm vial; ifosfamide 3 gm/ 60 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
IMBRUVICA 140 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
IMFINZI 50 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
IMLYGIC 10EXP6 (1 MILLION) PFU/ML SUSPENSION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4 per 365 days)
IMLYGIC 10EXP8 (100 MILLION) PFU/ML SUSPENSION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (8 per 28 days)
INLYTA 1 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
INLYTA 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
IRESSA 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
irinotecan hcl 100 mg/5 ml, 40 mg/2 ml, 500 mg/25 ml vial; irinotecan hcl 100 mg/5 ml, 40 mg/2 ml, 500 mg/25 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
ISTODAX 10 MG/2 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
IXEMPRA 15 MG, 45 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
JAKAFI 10 MG, 15 MG, 20 MG, 25 MG, 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
JEVTANA 10 MG/ML (FIRST DILUTION) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
KADCYLA 100 MG, 160 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
KEYTRUDA 25 MG/ML, 50 MG INTRAVENOUS SOLUTION; KEYTRUDA 25 MG/ML, 50 MG VIAL ^{MO}	Up to \$8.25 (Tier 2)	PA
KISQALI 200 MG/DAY (200 MG X 1) TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (21 per 28 days)
KISQALI 400 MG/DAY (200 MG X 2) TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (42 per 28 days)
KISQALI 600 MG/DAY (200 MG X 3) TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (63 per 28 days)
KISQALI FEMARA CO-PACK 200 MG/DAY(200 MG X 1)-2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (49 per 28 days)
KISQALI FEMARA CO-PACK 400 MG/DAY(200 MG X 2)-2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (70 per 28 days)
KISQALI FEMARA CO-PACK 600 MG/DAY(200 MG X 3)-2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (91 per 28 days)
KYPROLIS 30 MG, 60 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
LARTRUVO 10 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
LENVIMA 10 MG/DAY (10 MG X 1/DAY) CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
LENVIMA 14 MG/DAY(10 MG X 1-4 MG X 1), 20 MG/DAY (10 MG X 2), 8 MG/DAY (4 MG X 2) CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
LENVIMA 18 MG/DAY (10 MG X 1 AND 4 MG X 2) CAPSULE; LENVIMA 24 MG PER DAY (10 MG X 2 AND 4 MG X 1) CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
LEUKERAN 2 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
LONSURF 15 MG-6.14 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (100 per 30 days)
LONSURF 20 MG-8.19 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (80 per 30 days)
LYNPARZA 100 MG, 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
LYNPARZA 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (448 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
LYSODREN 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
MARQIBO 5 MG/31 ML (0.16 MG/ML) (FINAL CONC.) INTRAVENOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA
MATULANE 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
MEKINIST 0.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
MEKINIST 2 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>melphalan 2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>melphalan 50 mg vial w-diluent</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>mercaptopurine 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>methotrexate 2.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>methotrexate 50 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>methotrexate 1 gm vial; methotrexate 50 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>mitomycin 20 mg, 40 mg, 5 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>mitoxantrone 25 mg/12.5 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
MUSTARGEN 10 MG SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
MYLOTARG 4.5 MG (1 MG/ML INITIAL CONCENTRATION) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
NERLYNX 40 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
NEXAVAR 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
NILANDRON 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
<i>nilutamide 150 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
NINLARO 2.3 MG, 3 MG, 4 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (3 per 28 days)
ODOMZO 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
ONCASPAR 750 UNIT/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
ONIVYDE 4.3 MG/ML INTRAVENOUS DISPERSION ^{MO}	Up to \$8.25 (Tier 2)	PA
OPDIVO 100 MG/10 ML, 40 MG/4 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (80 per 28 days)
<i>oxaliplatin 100 mg, 100 mg/20 ml, 50 mg, 50 mg/10 ml (5 mg/ml) vial; oxaliplatin 50 mg/10 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>paclitaxel 100 mg/16.7 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
PERJETA 420 MG/14 ML (30 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
POMALYST 1 MG, 2 MG, 3 MG, 4 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (21 per 28 days)
PORTRAZZA 800 MG/50 ML (16 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (100 per 21 days)
PROLEUKIN 22 MILLION UNIT INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PURIXAN 20 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (300 per 30 days)
REVLIMID 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
RHEUMATREX 2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D
RITUXAN 10 MG/ML CONCENTRATE,INTRAVENOUS ^{MO}	Up to \$8.25 (Tier 2)	PA
RITUXAN HYCELA 1,400 MG/11.7 ML (120 MG/ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (46.8 per 28 days)
RITUXAN HYCELA 1,600 MG/13.4 ML (120 MG/ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (13.4 per 28 days)
RUBRACA 200 MG, 250 MG, 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
RYDAPT 25 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (224 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
SPRYCEL 100 MG, 50 MG, 70 MG, 80 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
SPRYCEL 140 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
SPRYCEL 20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
STIVARGA 40 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (84 per 28 days)
SUTENT 12.5 MG, 25 MG, 37.5 MG, 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
SYLVANT 100 MG, 400 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
SYNRIBO 3.5 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
TABLOID 40 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
TAFINLAR 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
TAFINLAR 75 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
TAGRISSE 40 MG, 80 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
TARCEVA 100 MG, 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
TARCEVA 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
TARGRETIN 75 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (300 per 30 days)
TASIGNA 150 MG, 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
TAXOTERE 80 MG/4 ML (20 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
TECENTRIQ 1,200 MG/20 ML (60 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (20 per 21 days)
TEMODAR 100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (27 per 30 days)
<i>thiotepa 15 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>toposar 20 mg/ml intravenous solution</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>topotecan hcl 4 mg, 4 mg/4 ml (1 mg/ml) vial; topotecan hcl 4 mg/4 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
TORISEL 30 MG/3 ML (10 MG/ML) (FIRST DILUTION) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (8 per 28 days)
TREANDA 100 MG, 180 MG/2 ML, 25 MG, 45 MG/0.5 ML INTRAVENOUS POWDER FOR SOLUTION; TREANDA 100 MG, 180 MG/2 ML, 25 MG, 45 MG/0.5 ML VIAL ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>tretinoin 10 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
TREXALL 10 MG, 15 MG, 5 MG, 7.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D
TRISENOX 10 MG/10 ML, 2 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
TYKERB 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (150 per 30 days)
UNITUXIN 3.5 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (40 per 30 days)
VECTIBIX 100 MG/5 ML (20 MG/ML), 400 MG/20 ML (20 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
VELCADE 3.5 MG SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4 per 21 days)
VENCLEXTA 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
VENCLEXTA 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
VENCLEXTA 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (14 per 28 days)
VENCLEXTA STARTING PACK 10 MG-50 MG-100 MG TABLETS IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (42 per 28 days)
VERZENIO 100 MG, 150 MG, 200 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
<i>vinblastine 1 mg/ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>vincasar pfs 1 mg/ml, 2 mg/2 ml intravenous solution</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>vincristine 1 mg/ml, 2 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>vinorelbine 10 mg/ml, 50 mg/5 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
VOTRIENT 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
VYXEOS 44 MG-100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
XALKORI 200 MG, 250 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
XATMEP 2.5 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 28 days)
XTANDI 40 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
YERVOY 200 MG/40 ML (5 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (280 per 21 days)
YERVOY 50 MG/10 ML (5 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (250 per 21 days)
YONDELIS 1 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
ZALTRAP 100 MG/4 ML (25 MG/ML), 200 MG/8 ML (25 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (40 per 28 days)
ZANOSAR 1 GRAM INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
ZEJULA 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
ZELBORAF 240 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (240 per 30 days)
ZOLINZA 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
ZYDELIG 100 MG, 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
ZYKADIA 150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (150 per 30 days)
ZYTIGA 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
ZYTIGA 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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ANTITOXINS,IMMUNE GLOB,TOXOIDS,VACCINES - Drugs used to help prevent and fight diseases

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ACTHIB (PF) 10 MCG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ADACEL (TDAP ADOLESN/ADULT)(PF)2 LF-(2.5-5-3-5)-5 LF/0.5 ML IM SYRINGE; ADACEL (TDAP ADOLESN/ADULT)(PF)2LF-(2.5-5-3-5MCG)-5 LF/0.5 ML IM SUSP ^{MO}	Up to \$8.25 (Tier 2)	
BCG VACCINE (TICE STRAIN) VIAL ^{MO}	Up to \$8.25 (Tier 2)	
BEXSERO 50 MCG-50 MCG-50 MCG-25 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
BOOSTRIX TDAP 2.5 LF UNIT-8 MCG-5 LF/0.5 ML INTRAMUSCULAR SUSPENSION; BOOSTRIX TDAP 2.5 LF UNIT-8 MCG-5 LF/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
DAPTACEL (DTAP PEDIATRIC) (PF) 15 LF UNIT-10 MCG-5 LF/0.5 ML IM SUSP ^{MO}	Up to \$8.25 (Tier 2)	
ENGERIX-B (PF) 20 MCG/ML INTRAMUSCULAR SUSPENSION; ENGERIX-B (PF) 20 MCG/ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	B vs D
ENGERIX-B 10 MCG/0.5 ML PED VL; ENGERIX-B PEDIATRIC (PF) 10 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	B vs D
GAMUNEX-C 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 40 GRAM/400 ML (10 %), 5 GRAM/50 ML (10 %) INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
GARDASIL SYRINGE; GARDASIL VIAL ^{MO}	Up to \$8.25 (Tier 2)	QL (1.5 per 365 days)
GARDASIL 9 (PF) 0.5 ML INTRAMUSCULAR SUSPENSION; GARDASIL 9 (PF) 0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1.5 per 365 days)
HAVRIX (PF) 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML INTRAMUSCULAR SUSPENSION; HAVRIX (PF) 1,440 ELISA UNIT/ML, 720 ELISA UNIT/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
HIBERIX (PF) 10 MCG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
HYPERRAB S/D (PF) 150 UNIT/ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
IMOGAM RABIES-HT (PF) 150 UNIT/ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
IMOVAX RABIES VACCINE (PF) 2.5 UNIT INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
INFANRIX (DTAP) (PF) 25 LF UNIT-58 MCG-10 LF/0.5ML INTRAMUSCULAR SUSP; INFANRIX (DTAP)(PF) 25 LF UNIT-58MCG-10 LF/0.5ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
IPOLE 40 UNIT-8 UNIT-32 UNIT/0.5 ML SUSPENSION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
IXIARO (PF) 6 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
KINRIX (PF) 25 LF-58 MCG-10 LF/0.5 ML INTRAMUSCULAR SUSPENSION; KINRIX (PF) 25 LF-58 MCG-10 LF/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
M-M-R II (PF) 1,000-12,500 TCID50/0.5 ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
MENACTRA (PF) 4 MCG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
MENHIBRIX (PF) 5 MCG-2.5 MCG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
MENOMUNE-A-C-Y-W-135 W-DILUENT ^{MO}	Up to \$8.25 (Tier 2)	
MENOMUNE-A-C-Y-W-135 W-DILUENT ^{MO}	Up to \$8.25 (Tier 2)	
MENVEO A-C-Y-W-135-DIP (PF) 10 MCG-5 MCG/0.5 ML INTRAMUSCULAR KIT ^{MO}	Up to \$8.25 (Tier 2)	
PEDIARIX (PF) 10 MCG-25 LF-25 MCG-10 LF/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
PEDVAX HIB (PF) 7.5 MCG/0.5 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PENTACEL (PF) 15 LF UNIT-20 MCG-5 LF /0.5 ML INTRAMUSCULAR KIT ^{MO}	Up to \$8.25 (Tier 2)	
PRIVIGEN 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
PROQUAD (PF) 10EXP3-4.3-3-3.99TCID50/0.5ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
QUADRACEL (PF) 15 LF-48 MCG-5 LF UNIT/0.5 ML INTRAMUSCULAR SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
RABAVERT (PF) 2.5 UNIT INTRAMUSCULAR SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
RECOMBIVAX HB (PF) 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5 ML INTRAMUSCULAR SUSPENSION; RECOMBIVAX HB (PF) 10 MCG/ML, 5 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	B vs D
ROTARIX 10EXP6 CCID50/ML SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
ROTATEQ VACCINE 2 ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
TENIVAC (PF) 5 LF UNIT-2 LF UNIT/0.5 ML INTRAMUSCULAR SUSPENSION; TENIVAC (PF) 5 LF UNIT-2 LF UNIT/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
<i>diphtheria-tetanus toxoids-ped</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tetanus diphtheria toxoids</i> ^{MO}	Up to \$3.30 (Tier 1)	
TRUMENBA 120 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
TWINRIX (PF) 720 ELISA UNIT-20 MCG/ML INTRAMUSCULAR SYRINGE; TWINRIX VACCINE VIAL ^{MO}	Up to \$8.25 (Tier 2)	
TYPHIM VI 25 MCG/0.5 ML INTRAMUSCULAR SOLUTION; TYPHIM VI 25 MCG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
VAQTA (PF) 25 UNIT/0.5 ML, 50 UNIT/ML INTRAMUSCULAR SUSPENSION; VAQTA (PF) 25 UNIT/0.5 ML, 50 UNIT/ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	
VARIVAX (PF) 1,350 UNIT/0.5 ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
VARIZIG 125 UNIT INTRAMUSCULAR POWDER FOR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (10 per 30 days)
VARIZIG 125 UNIT/1.2 ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (12 per 30 days)
WINRHO SDF 1,500 UNIT/1.3 ML, 15,000 UNIT/13 ML, 2,500 UNIT/2.2 ML, 5,000 UNIT/4.4 ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
YF-VAX (PF) 10 EXP4.74 UNIT/0.5 ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
ZOSTAVAX (PF) 19,400 UNIT/0.65 ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 365 days)

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AUTONOMIC DRUGS - Drugs used to treat an autoimmune disorder

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>albuterol 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml sol; albuterol 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml solution; albuterol sul 0.63 mg/3 ml, 1.25 mg/3 ml, 2.5 mg /3 ml (0.083 %), 2.5 mg/0.5 ml, 5 mg/ml sol; albuterol sul 2.5 mg/3 ml soln^{MO}</i>	Up to \$3.30 (Tier 1)	B vs D
<i>albuterol sulf 2 mg/5 ml syrup; albuterol sulfate 2 mg, 4 mg tab; albuterol sulfate er 4 mg, 8 mg tab^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>alfuzosin hcl er 10 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
ATROVENT HFA 17 MCG/ACTUATION AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (25.8 per 30 days)
<i>baclofen 10 mg, 20 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>bethanechol 10 mg, 25 mg, 5 mg, 50 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
BROVANA 15 MCG/2 ML SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
<i>carisoprodol 350 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
CHANTIX 0.5 MG, 1 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (56 per 28 days)
CHANTIX CONTINUING MONTH BOX 1 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (56 per 28 days)
CHANTIX STARTING MONTH BOX 0.5 MG (11)-1 MG (42) TABLETS IN DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	QL (56 per 28 days)
<i>cyclobenzaprine 10 mg, 5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dantrolene sodium 100 mg, 25 mg, 50 mg cap^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dicyclomine 10 mg capsule; dicyclomine 10 mg/5 ml soln; dicyclomine 20 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dihydroergotamine 1 mg/ml amp^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>donepezil hcl 10 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>donepezil hcl 10 mg, 5 mg, 5 mg tablet; donepezil hcl odt 10 mg, 5 mg, 5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
EPINEPHRINE 0.15 MG AUTO-INJECT ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
epinephrine 0.3 mg auto-inject ^{MO}	Up to \$3.30 (Tier 1)	
EPIPEN 0.3 MG/0.3 ML INJECTION, AUTO-INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	
EPIPEN 2-PAK 0.3 MG/0.3 ML INJECTION, AUTO-INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	
EPIPEN JR 0.15 MG/0.3 ML INJECTION,AUTO-INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	
EPIPEN JR 2-PAK 0.15 MG/0.3 ML INJECTION,AUTO-INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	
ERGOMAR 2 MG SUBLINGUAL TABLET ^{MO}	Up to \$8.25 (Tier 2)	
EXELON PATCH 13.3 MG/24 HOUR, 4.6 MG/24 HR, 9.5 MG/24 HR TRANSDERMAL ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
galantamine 4 mg/ml oral soln ^{MO}	Up to \$3.30 (Tier 1)	QL (200 per 30 days)
galantamine er 16 mg, 24 mg, 8 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
galantamine hbr 12 mg, 4 mg, 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
glycopyrrolate 0.2 mg/ml vial; glycopyrrolate 1 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
guanidine hcl 125 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ipratropium br 0.02% soln ^{MO}	Up to \$3.30 (Tier 1)	B vs D
iprat-albut 0.5-3(2.5) mg/3 ml ^{MO}	Up to \$3.30 (Tier 1)	B vs D
metaproterenol 10 mg, 20 mg tablet; metaproterenol 10 mg/5 ml syr ^{MO}	Up to \$3.30 (Tier 1)	
metaxalone 400 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
metaxalone 800 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
methocarbamol 500 mg, 750 mg tablet ^{MO}	Up to \$8.25 (Tier 2)	
midodrine hcl 10 mg, 2.5 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
NICOTROL NS 10 MG/ML NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	
NORTHERA 100 MG, 200 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
NORTHERA 300 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
<i>orphenadrine er 100 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
PERFORMIST 20 MCG/2 ML SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
<i>pilocarpine hcl 5 mg, 7.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>propantheline 15 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>pyridostigmine br 60 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>rivastigmine 1.5 mg, 3 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
<i>rivastigmine 4.5 mg, 6 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
SEREVENT DISKUS 50 MCG/DOSE POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
SPIRIVA RESPIMAT 1.25 MCG/ACTUATION, 2.5 MCG/ACTUATION SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 28 days)
SPIRIVA WITH HANDIHALER 18 MCG AND INHALATION CAPSULES ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
STIOLTO RESPIMAT 2.5 MCG-2.5 MCG/ACTUATION SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 28 days)
STRIVERDI RESPIMAT 2.5 MCG/ACTUATION SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 30 days)
<i>tamsulosin hcl 0.4 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>terbutaline sulf 1 mg/ml vial; terbutaline sulfate 2.5 mg, 5 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tizanidine hcl 2 mg, 4 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
VENTOLIN HFA 90 MCG/ACTUATION AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (36 per 30 days)

BLOOD FORMATION, COAGULATION, THROMBOSIS - Drugs used to treat blood clotting

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
AMICAR 1,000 MG, 500 MG TABLET; AMICAR 250 MG/ML (25 %) ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
<i>anagrelide hcl 0.5 mg, 1 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	
BRILINTA 60 MG, 90 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
<i>cilostazol 100 mg, 50 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>clopidogrel 300 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>clopidogrel 75 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
COUMADIN 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
CYKLOKAPRON 1,000 MG/10 ML (100 MG/ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
EFFIENT 10 MG, 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
ELIQUIS 2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
ELIQUIS 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (74 per 30 days)
<i>enoxaparin 100 mg/ml, 150 mg/ml syringe^{MO}</i>	Up to \$3.30 (Tier 1)	QL (28 per 28 days)
<i>enoxaparin 120 mg/0.8 ml, 80 mg/0.8 ml syr^{MO}</i>	Up to \$3.30 (Tier 1)	QL (22.4 per 28 days)
<i>enoxaparin 30 mg/0.3 ml, 60 mg/0.6 ml syr^{MO}</i>	Up to \$3.30 (Tier 1)	QL (16.8 per 28 days)
<i>enoxaparin 300 mg/3 ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	QL (84 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>enoxaparin 40 mg/0.4 ml syr</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (11.2 per 28 days)
EPOGEN 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (14 per 30 days)
EPOGEN 20,000 UNIT/2 ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 30 days)
<i>fondaparinux 10 mg/0.8 ml syr</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (24 per 30 days)
<i>fondaparinux 2.5 mg/0.5 ml syr</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (15 per 30 days)
<i>fondaparinux 5 mg/0.4 ml syr</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (12 per 30 days)
<i>fondaparinux 7.5 mg/0.6 ml syr</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (18 per 30 days)
FRAGMIN 10,000 ANTI-XA UNIT/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
FRAGMIN 12,500 ANTI-XA UNIT/0.5 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (15 per 30 days)
FRAGMIN 15,000 ANTI-XA UNIT/0.6 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (18 per 30 days)
FRAGMIN 18,000 ANTI-XA UNIT/0.72 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (21.6 per 30 days)
FRAGMIN 2,500 ANTI-XA UNIT/0.2 ML, 5,000 ANTI-XA UNIT/0.2 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (6 per 30 days)
FRAGMIN 25,000 ANTI-XA UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (22.8 per 30 days)
FRAGMIN 7,500 ANTI-XA UNIT/0.3 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (9 per 30 days)
GRANIX 300 MCG/0.5 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7 per 28 days)
GRANIX 480 MCG/0.8 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (11.2 per 28 days)
<i>heparin 40,000 units/4 ml vial; heparin sod 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml vial; heparin sod 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml v</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>heparin 20,000 unit/500 ml-d5w</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>heparin-1/2ns 25,000 units/500</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>jantoven 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
LEUKINE 250 MCG SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	PA
MOZOBIL 24 MG/1.2 ML (20 MG/ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (9.6 per 30 days)
NEULASTA 6 MG/0.6 ML SUBCUTANEOUS SYRINGE; NEULASTA 6 MG/0.6 ML, 6 MG/0.6ML WITH WEARABLE SUBCUTANEOUS INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1.2 per 28 days)
NEUPOGEN 300 MCG/0.5 ML INJECTION SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7 per 30 days)
NEUPOGEN 300 MCG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (14 per 30 days)
NEUPOGEN 480 MCG/0.8 ML INJECTION SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (11.2 per 30 days)
NEUPOGEN 480 MCG/1.6 ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (22.4 per 30 days)
<i>pentoxifylline er 400 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>prasugrel 10 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
PROCRIT 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (14 per 30 days)
PROCRIT 20,000 UNIT/2 ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 30 days)
PROMACTA 12.5 MG, 75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
PROMACTA 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
PROMACTA 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
<i>ticlopidine 250 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tranexamic acid 1,000 mg/10 ml</i> ^{MO}	Up to \$3.30 (Tier 1)	PA
<i>tranexamic acid 650 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 5 days)
<i>warfarin sodium 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
XARELTO 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (35 per 60 days)
XARELTO 15 MG (42)-20 MG (9) TABLETS IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	QL (51 per 30 days)
XARELTO 15 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
XARELTO 20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
ZARXIO 300 MCG/0.5 ML INJECTION SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7 per 30 days)
ZARXIO 480 MCG/0.8 ML INJECTION SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (11.2 per 30 days)
ZONTIVITY 2.08 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)

CARDIOVASCULAR DRUGS - Drugs used to treat heart-related conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>acebutolol 200 mg, 400 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
ADCIRCA 20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
<i>afeditab cr 30 mg, 60 mg tablet, extended release</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>amiodarone 150 mg/3 ml syringe; amiodarone 900 mg/18 ml vial; amiodarone hcl 100 mg, 200 mg, 400 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amlodipine besylate 10 mg, 2.5 mg, 5 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amlodipine-benazepril 10-20 mg, 2.5-10 mg, 5-10 mg, 5-20 mg; amlodipine-benazepril 2.5-10</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>amlodipine-benazepril 10-40 mg, 5-40 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>aspirin-dipyridam er 25-200 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	ST
<i>atenolol 100 mg, 25 mg, 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
atenolol-chlorthalidone 100-25; atenolol-chlorthalidone 50-25 ^{MO}	Up to \$3.30 (Tier 1)	
atorvastatin 10 mg, 20 mg, 40 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
benazepril hcl 10 mg, 20 mg, 40 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
benazepril-hctz 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
BIDIL 20 MG-37.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (180 per 30 days)
bisoprolol fumarate 10 mg, 5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
bisoprolol-hctz 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg tab; bisoprolol-hctz 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg tb ^{MO}	Up to \$3.30 (Tier 1)	
candesartan cilexetil 16 mg, 4 mg, 8 mg tab; candesartan cilexetil 16 mg, 4 mg, 8 mg tb ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
candesartan cilexetil 32 mg tb ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
candesartan-hctz 16-12.5 mg, 32-12.5 mg, 32-25 mg tab; candesartan-hctz 16-12.5 mg, 32-12.5 mg, 32-25 mg tb ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
captopril 100 mg, 12.5 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
captopril-hctz 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
cartia xt 120 mg, 180 mg, 240 mg capsule, extended release ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
cartia xt 300 mg capsule, extended release ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
carvedilol 12.5 mg, 25 mg, 3.125 mg, 6.25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
cholestyramine packet; cholestyramine powder ^{MO}	Up to \$3.30 (Tier 1)	
cholestyramine light 4 gram, 4 gram oral powder; cholestyramine light 4 gram, 4 gram powder for susp in a packet ^{MO}	Up to \$3.30 (Tier 1)	
clonidine 0.1 mg/day patch; clonidine 0.2 mg/day patch; clonidine 0.3 mg/day patch ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
clonidine hcl 0.1 mg, 0.2 mg, 0.3 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
clonidine hcl er 0.1 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
clorpres 0.1 mg-15 mg tablet; clorpres 0.2 mg-15 mg tablet; clorpres 0.3 mg-15 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
colestipol hcl granules; colestipol hcl granules packet; colestipol micronized 1 gm tab ^{MO}	Up to \$3.30 (Tier 1)	
CORLANOR 5 MG, 7.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
digitek 125 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
digitek 250 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
digox 125 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
digox 250 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
digoxin 0.05 mg/ml solution; digoxin 250 mcg tablet; digoxin 500 mcg/2 ml ampule ^{MO}	Up to \$3.30 (Tier 1)	
digoxin 125 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
dilt-xr 120 mg, 180 mg, 240 mg capsule, extended release ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
diltiazem 120 mg, 30 mg, 60 mg, 90 mg tablet; diltiazem 12hr er 120 mg, 60 mg, 90 mg cap; diltiazem hcl 100 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
diltiazem 24hr er 120 mg, 120 mg, 180 mg, 180 mg, 240 mg, 240 mg cap; diltiazem er 120 mg, 180 mg, 240 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
diltiazem 24hr er 300 mg, 300 mg, 360 mg, 420 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
dipyridamole 25 mg, 50 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
disopyramide 100 mg, 150 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
dofetilide 125 mcg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
dofetilide 250 mcg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
dofetilide 500 mcg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
doxazosin mesylate 1 mg, 2 mg, 4 mg, 8 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
enalapril maleate 10 mg, 2.5 mg, 20 mg, 5 mg tab; enalapril maleate 10 mg, 2.5 mg, 20 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
enalapril-hctz 10-25 mg, 5-12.5 mg tab; enalapril-hctz 10-25 mg, 5-12.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ENTRESTO 24 MG-26 MG TABLET; ENTRESTO 49 MG-51 MG TABLET; ENTRESTO 97 MG-103 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
eplerenone 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ezetimibe 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
felodipine er 10 mg, 2.5 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
fenofibrate 160 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
fenofibrate 54 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
fenofibrate 134 mg, 200 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
fenofibrate 67 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
fenofibrate 145 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
fenofibrate 48 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
fenofibric acid dr 135 mg, 45 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
flecainide acetate 100 mg, 150 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
fosinopril sodium 10 mg, 20 mg, 40 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
fosinopril-hctz 10-12.5 mg, 20-12.5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
gemfibrozil 600 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
guanfacine 1 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
hydralazine 10 mg, 100 mg, 25 mg, 50 mg tablet; hydralazine 20 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	
irbesartan 150 mg, 300 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
irbesartan-hctz 150-12.5 mg, 300-12.5 mg tb ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
isosorbide dn 10 mg, 20 mg, 30 mg, 5 mg tablet; isosorbide dn er 40 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
isosorbide mn 10 mg, 20 mg tablet; isosorbide mn er 120 mg, 30 mg, 60 mg tab; isosorbide mn er 120 mg, 30 mg, 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
isradipine 2.5 mg, 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
KYNAMRO 200 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4 per 28 days)
labetalol hcl 100 mg, 200 mg, 300 mg tablet; labetalol hcl 100 mg/20 ml v ^{MO}	Up to \$3.30 (Tier 1)	
LANOXIN 125 MCG, 187.5 MCG, 62.5 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
LANOXIN 250 MCG TABLET; LANOXIN 250 MCG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
LANOXIN PEDIATRIC 100 MCG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
lisinopril 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
lisinopril-hctz 10-12.5 mg, 20-12.5 mg, 20-25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
losartan potassium 100 mg, 25 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
losartan-hctz 100-12.5 mg, 100-25 mg, 50-12.5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
lovastatin 10 mg, 20 mg, 40 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
methyldopa 250 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
methyldopa-hctz 250-15 mg, 250-25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
metoprolol succ er 100 mg, 200 mg, 25 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
metoprolol-hctz 100-25 mg, 100-50 mg, 50-25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
metoprolol tart 5 mg/5 ml vial; metoprolol tartrate 100 mg, 25 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
metoprolol tartrate 37.5 mg, 75 mg tab; metoprolol tartrate 37.5 mg, 75 mg tb ^{MO}	Up to \$8.25 (Tier 2)	
mexiletine 150 mg, 200 mg, 250 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
minoxidil 10 mg, 2.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
moexipril hcl 15 mg, 7.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
moexipril-hctz 15-12.5 mg, 15-25 mg, 7.5-12.5 mg tab; moexipril-hctz 15-12.5 mg, 15-25 mg, 7.5-12.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
MULTAQ 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
nadolol 20 mg, 40 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nadolol-bendroflu 40-5 mg, 80-5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
niacor 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nicardipine 20 mg, 30 mg capsule; nicardipine 25 mg/10 ml ampule ^{MO}	Up to \$3.30 (Tier 1)	
nifedical xl 30 mg, 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
nifedipine er 30 mg, 30 mg, 60 mg, 60 mg, 90 mg, 90 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
nimodipine 30 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
nitroglycerin 0.1 mg/hr, 0.2 mg/hr, 0.6 mg/hr patch ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
nitroglycerin 0.3 mg, 0.4 mg, 0.6 mg tablet sl; nitroglycerin 5 mg/ml vial; nitroglycerin lingual 0.4 mg ^{MO}	Up to \$3.30 (Tier 1)	
nitroglycerin 0.4 mg/hr patch ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
NITROSTAT 0.3 MG, 0.4 MG, 0.6 MG SUBLINGUAL TABLET ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
omega-3 ethyl esters 1 gm cap ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
PACERONE 100 MG, 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
pacerone 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
perindopril erbumine 2 mg, 4 mg, 8 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
pindolol 10 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
PRALUENT PEN 150 MG/ML, 75 MG/ML SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (2 per 28 days)
PRALUENT 150 MG/ML, 75 MG/ML SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (2 per 28 days)
pravastatin sodium 10 mg, 20 mg, 80 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
pravastatin sodium 40 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
prazosin 1 mg, 2 mg, 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
prevalite 4 gram, 4 gram oral powder; prevalite 4 gram, 4 gram powder for susp in a packet ^{MO}	Up to \$3.30 (Tier 1)	
procainamide 100 mg/ml, 500 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	
propafenone hcl 150 mg, 225 mg, 300 mg tab; propafenone hcl 150 mg, 225 mg, 300 mg tablet; propafenone hcl er 225 mg, 325 mg, 425 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
propranolol 1 mg/ml, 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml) vial; propranolol 10 mg, 20 mg, 40 mg, 60 mg, 80 mg tablet; propranolol 20 mg/5 ml soln; propranolol 40 mg/5 ml soln; propranolol er 120 mg, 160 mg, 60 mg, 80 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
propranolol-hctz 40-25 mg, 80-25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
quinapril 10 mg, 20 mg, 40 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
quinapril-hctz 10-12.5 mg, 20-12.5 mg, 20-25 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
quinidine gluc 80 mg/ml vial; quinidine gluc er 324 mg tab ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
quinidine sulfate 200 mg, 300 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
ramipril 1.25 mg, 10 mg, 2.5 mg, 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
RANEXA 1,000 MG, 500 MG TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (120 per 30 days)
REPATHA PUSHTRONEX 420 MG/3.5 ML SUBCUTANEOUS WEARABLE INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (3.5 per 28 days)
REPATHA SURECLICK 140 MG/ML SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (3 per 28 days)
REPATHA SYRINGE 140 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (3 per 28 days)
reserpine 0.1 mg, 0.25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
REVATIO 10 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
rosuvastatin calcium 10 mg, 20 mg, 40 mg, 5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
sildenafil 20 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (90 per 30 days)
simvastatin 10 mg, 20 mg, 40 mg, 5 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
sorine 120 mg, 160 mg, 240 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
sotalol 120 mg, 160 mg, 240 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
sotalol af 120 mg, 160 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
spironolactone-hctz 25-25 tab ^{MO}	Up to \$3.30 (Tier 1)	
spironolactone 100 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
taztia xt 120 mg, 180 mg, 240 mg capsule,extended release ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
taztia xt 300 mg, 360 mg capsule,extended release ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
TEKTURNA 150 MG, 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
telmisartan 20 mg, 40 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
telmisartan 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
telmisartan-amlodipine 40-10; telmisartan-amlodipine 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg; telmisartan-amlodipine 80-10 ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
terazosin 1 mg, 10 mg, 2 mg, 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
TIKOSYN 125 MCG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (240 per 30 days)
TIKOSYN 250 MCG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
TIKOSYN 500 MCG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
timolol maleate 10 mg, 20 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
trandolapril 1 mg, 2 mg, 4 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
triklo 1 gram capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
valsartan 160 mg, 320 mg, 40 mg, 80 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
valsartan-hctz 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
VASCEPA 0.5 GRAM CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (240 per 30 days)
VASCEPA 1 GRAM CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
verapamil 120 mg, 180 mg, 240 mg, 360 mg cap pellet; verapamil er 120 mg, 180 mg, 240 mg, 360 mg capsule; verapamil er pm 200 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
verapamil 120 mg, 40 mg, 80 mg tablet; verapamil 2.5 mg/ml ampul; verapamil er 120 mg, 180 mg, 240 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
verapamil er pm 100 mg, 300 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
WELCHOL 3.75 GRAM ORAL POWDER PACKET; WELCHOL 625 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ZETIA 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)

CENTRAL NERVOUS SYSTEM AGENTS - Drugs used to treat brain and spinal conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ABILIFY MAINTENA 300 MG, 400 MG INTRAMUSCULAR SUSPENSION, EXTENDED RELEASE; ABILIFY MAINTENA 300 MG, 400 MG SUSPENSION, EXTENDED REL. INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 28 days)
acamprosate calc dr 333 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
acetamin-codein 300-30 mg/12.5; acetaminop-codeine 120-12 mg/5 ^{MO}	Up to \$3.30 (Tier 1)	QL (2700 per 30 days)
acetaminophen-cod #2 tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (390 per 30 days)
acetaminophen-cod #3 tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
acetaminophen-cod #4 tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
alprazolam 0.25 mg, 0.5 mg, 1 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
alprazolam 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (150 per 30 days)
amantadine 100 mg capsule; amantadine 100 mg tablet; amantadine 50 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	
amitriptyline hcl 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
amoxapine 100 mg, 150 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
APOKYN 10 MG/ML SUBCUTANEOUS CARTRIDGE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 28 days)
APTIOM 200 MG, 400 MG, 800 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (30 per 30 days)
APTIOM 600 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (60 per 30 days)
aripiprazole 1 mg/ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (750 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>aripiprazole 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>aripiprazole odt 10 mg, 15 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
ARISTADA 1,064 MG/3.9 ML SUSPENSION, EXTEND.REL. IM SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (3.9 per 56 days)
ARISTADA 441 MG/1.6 ML SUSPENSION, EXTEND.REL. IM SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1.6 per 28 days)
ARISTADA 662 MG/2.4 ML SUSPENSION, EXTEND.REL. IM SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (2.4 per 28 days)
ARISTADA 882 MG/3.2 ML SUSPENSION, EXTEND.REL. IM SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (3.2 per 28 days)
<i>armodafinil 150 mg, 200 mg, 250 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (30 per 30 days)
<i>armodafinil 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
<i>atomoxetine hcl 10 mg, 18 mg, 25 mg, 40 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
<i>atomoxetine hcl 100 mg, 60 mg, 80 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (30 per 30 days)
AZILECT 0.5 MG, 1 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
BANZEL 200 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (480 per 30 days)
BANZEL 40 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (2760 per 30 days)
BANZEL 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (240 per 30 days)
<i>benztropine 2 mg/2 ml ampule; benztropine mes 0.5 mg, 1 mg, 2 mg tab; benztropine mes 0.5 mg, 1 mg, 2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
BRINTELLIX 10 MG, 20 MG, 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (30 per 30 days)
BRIVIACT 10 MG, 100 MG, 25 MG, 50 MG, 75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
BRIVIACT 10 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (600 per 30 days)
BRIVIACT 50 MG/5 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
bromocriptine 2.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
buprenorphine 0.3 mg/ml syring ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (240 per 30 days)
buprenorphine 2 mg, 8 mg tablet sl ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (90 per 30 days)
buproban 150 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
bupropion hcl 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
bupropion hcl 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
bupropion hcl sr 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
bupropion hcl sr 150 mg tablet; bupropion hcl xl 150 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
bupropion hcl sr 200 mg tablet; bupropion hcl xl 300 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
bupropion hcl sr 150 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
buspironone hcl 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
butalbital compound with codeine 30 mg-50 mg-325 mg-40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
butalb-caff-acetaminoph-codein ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
butalbital-acetaminophn 50-325 ^{MO}	Up to \$8.25 (Tier 2)	QL (180 per 30 days)
butalb-acetamin-caff 50-325-40; butalbit-acetaminophen-caff cp ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
butalb-aspirin-caffe 50-325-40; butalbital-asa-caffeine cap ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
BUTISOL 30 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
butorphanol 1 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (960 per 30 days)
butorphanol 10 mg/ml spray ^{MO}	Up to \$3.30 (Tier 1)	QL (5 per 28 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
butorphanol 2 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (480 per 30 days)
cabergoline 0.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (16 per 28 days)
capacet 50 mg-325 mg-40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
CAPITAL WITH CODEINE 120 MG-12 MG/5 ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (2700 per 30 days)
carbamazepine 100 mg tab chew; carbamazepine 100 mg/5 ml susp; carbamazepine 200 mg tablet; carbamazepine er 100 mg, 200 mg, 300 mg cap; carbamazepine er 100 mg, 200 mg, 400 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
carbidopa-levodopa 10-100 mg, 10-100 mg, 25-100 mg, 25-100 mg, 25-250 mg, 25-250 mg odt; carbidopa-levodopa er 25-100 tab; carbidopa-levodopa er 50-200 tab; carbidopa-levodopa 10-100 tab; carbidopa-levodopa 25-100 tab; carbidopa-levodopa 25-250 tab ^{MO}	Up to \$3.30 (Tier 1)	
CELONTIN 300 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
chlorpromazine 10 mg, 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D
chlorpromazine 100 mg, 200 mg, 50 mg tablet; chlorpromazine 25 mg/ml amp ^{MO}	Up to \$3.30 (Tier 1)	
citalopram hbr 10 mg, 40 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
citalopram hbr 10 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
citalopram hbr 20 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
clomipramine 25 mg, 50 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
clonazepam 0.125 mg, 0.25 mg, 0.5 mg, 0.5 mg, 1 mg, 1 mg, 2 mg, 2 mg dis tab; clonazepam 0.125 mg, 0.25 mg, 0.5 mg, 0.5 mg, 1 mg, 1 mg, 2 mg, 2 mg dis tablet; clonazepam 0.125 mg, 0.25 mg, 0.5 mg, 0.5 mg, 1 mg, 1 mg, 2 mg, 2 mg odt; clonazepam 0.125 mg, 0.25 mg, 0.5 mg, 0.5 mg, 1 mg, 1 mg, 1 mg, 2 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
clorazepate 15 mg, 3.75 mg, 7.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
clozapine 100 mg, 200 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
clozapine odt 100 mg, 12.5 mg, 150 mg, 200 mg, 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
codeine sulfate 15 mg, 30 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
codeine sulfate 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
CYCLOSET 0.8 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
desipramine 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
desvenlafaxine suc er 100 mg, 25 mg, 50 mg; desvenlafaxine suc er 100 mg, 25 mg, 50 mg tb ^{MO}	Up to \$3.30 (Tier 1)	ST,QL (30 per 30 days)
dexmethylphenidate 10 mg, 2.5 mg, 5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
dexmethylphenidate er 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg cap; dexmethylphenidate er 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg cp ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
d-amphetamine er 10 mg capsule; dextroamphetamine 10 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
d-amphetamine er 15 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
d-amphetamine er 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
dextroamphetamine 5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (150 per 30 days)
dextroamp-amphet er 10 mg, 15 mg, 5 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
dextroamp-amphet er 20 mg, 25 mg, 30 mg cap; dextroamp-amphetamin 30 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
dextroamp-amphetam 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg tab; dextroamp-amphetamin 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg tab; dextroamp-amphetamine 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
DIASTAT 2.5 MG RECTAL KIT ^{MO}	Up to \$8.25 (Tier 2)	
DIASTAT ACUDIAL 12.5 MG-15 MG-17.5 MG-20 MG RECTAL KIT; DIASTAT ACUDIAL 5 MG-7.5 MG-10 MG RECTAL KIT ^{MO}	Up to \$8.25 (Tier 2)	
diazepam 10 mg rectal gel syst; diazepam 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg rectal gel sys; diazepam 20 mg rectal gel syst ^{MO}	Up to \$3.30 (Tier 1)	
diazepam 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
diazepam 2 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
diazepam 5 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (1200 per 30 days)
diazepam 5 mg/ml oral conc ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
diazepam intensol 5 mg/ml oral concentrate ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
diclofenac pot 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
diclofenac sod ec 25 mg, 50 mg, 75 mg tab; diclofenac sod er 100 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
diflunisal 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
DILANTIN 30 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
DILANTIN EXTENDED 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
DILANTIN INFATABS 50 MG CHEWABLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	
DILANTIN-125 125 MG/5 ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
divalproex dr 125 mg cap sprnk; divalproex sod dr 125 mg, 250 mg, 500 mg tab; divalproex sod er 250 mg, 500 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
doxepin 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg capsule; doxepin 10 mg/ml oral conc ^{MO}	Up to \$3.30 (Tier 1)	
duloxetine hcl dr 20 mg, 30 mg, 40 mg, 60 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
DURAMORPH (PF) 0.5 MG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (7200 per 30 days)
DURAMORPH (PF) 1 MG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (3600 per 30 days)
EMBEDA 100 MG-4 MG CAPSULE, EXTEND RELEASE, ORAL ONLY; EMBEDA 20 MG-0.8 MG CAPSULE, EXTEND RELEASE, ORAL ONLY; EMBEDA 30 MG-1.2 MG CAPSULE, EXTEND RELEASE, ORAL ONLY; EMBEDA 50 MG-2 MG CAPSULE, EXTEND RELEASE, ORAL ONLY; EMBEDA 60 MG-2.4 MG CAPSULE, EXTEND RELEASE, ORAL ONLY; EMBEDA 80 MG-3.2 MG CAPSULE, EXTEND RELEASE, ORAL ONLY ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
EMSAM 12 MG/24 HR, 6 MG/24 HR, 9 MG/24 HR TRANSDERMAL 24 HOUR PATCH ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
endocet 10 mg-325 mg tablet; endocet 2.5 mg-325 mg tablet; endocet 5 mg-325 mg tablet; endocet 7.5 mg-325 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
entacapone 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (300 per 30 days)
epitol 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
EQUETRO 100 MG, 200 MG, 300 MG CAPSULE, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	
escitalopram 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (45 per 30 days)
escitalopram 20 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
escitalopram oxalate 5 mg/5 ml ^{MO}	Up to \$3.30 (Tier 1)	QL (600 per 30 days)
eszopiclone 1 mg, 2 mg, 3 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
ethosuximide 250 mg capsule; ethosuximide 250 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
etodolac 200 mg, 300 mg capsule; etodolac 400 mg, 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
FANAPT 1 MG, 10 MG, 12 MG, 1MG(2)-2MG(2)- 4MG(2)-6MG(2), 2 MG, 4 MG, 6 MG, 8 MG TABLET; FANAPT 1MG(2)-2 MG(2)-4MG(2)-6 MG(2) TABLETS IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
felbamate 400 mg, 600 mg tablet; felbamate 600 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
fentanyl 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hour, 50 mcg/hr, 62.5 mcg/hour, 75 mcg/hr, 87.5 mcg/hour patch; fentanyl 37.5 mcg/hr patch; fentanyl 62.5 mcg/hr patch; fentanyl 87.5 mcg/hr patch ^{MO}	Up to \$3.30 (Tier 1)	QL (20 per 30 days)
fentanyl cit ofc 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg; fentanyl citrate ofc 1,200 mcg, 1,600 mcg, 200 mcg, 400 mcg, 600 mcg, 800 mcg ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (120 per 30 days)
fentanyl 100 mcg/2 ml ampul; fentanyl 100 mcg/2 ml syringe ^{MO}	Up to \$3.30 (Tier 1)	QL (720 per 30 days)
FETZIMA 120 MG, 20 MG, 40 MG, 80 MG CAPSULE,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
FETZIMA 20 MG (2)-40 MG (26) CAPSULE,EXTENDED RELEASE,24 HR,DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
fluoxetine 20 mg/5 ml solution; fluoxetine hcl 10 mg, 20 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
fluoxetine dr 90 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
fluoxetine hcl 10 mg, 40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
fluoxetine hcl 20 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
fluoxetine hcl 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
fluphenazine dec 125 mg/5 ml ^{MO}	Up to \$3.30 (Tier 1)	
fluphenazine 1 mg, 10 mg, 2.5 mg, 5 mg tablet; fluphenazine 2.5 mg/5 ml elix; fluphenazine 2.5 mg/ml vial; fluphenazine 5 mg/ml conc ^{MO}	Up to \$3.30 (Tier 1)	
flurbiprofen 100 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
flvoxamine er 100 mg, 150 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
flvoxamine maleate 100 mg, 25 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
fosphenytoin 100 mg pe/2 ml, 500 mg pe/10 ml; fosphenytoin 100 mg pe/2 ml, 500 mg pe/10 ml vl ^{MO}	Up to \$3.30 (Tier 1)	
FYCOMPA 0.5 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (680 per 28 days)
FYCOMPA 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
gabapentin 100 mg, 300 mg, 400 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (270 per 30 days)
gabapentin 250 mg/5 ml soln; gabapentin 250 mg/5 ml, 250 mg/5 ml (5 ml), 300 mg/6 ml (6 ml) soln; gabapentin 300 mg/6 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
gabapentin 600 mg, 800 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
GEODON 20 MG/ML (FINAL CONCENTRATION) INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
haloperidol 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
haloperidol dec 100 mg/ml, 50 mg/ml vial; haloperidol decan 100 mg/ml, 50 mg/ml amp ^{MO}	Up to \$3.30 (Tier 1)	
haloperidol lac 2 mg/ml conc; haloperidol lac 5 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
HETLIOZ 20 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
hydrocodone-acetamin 10-325 mg, 2.5-325 mg, 5-325 mg, 7.5-325 mg; hydrocodone-acetamin 2.5-325; hydrocodone-acetamin 7.5-325 ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
hydrocodone-acetamin 10-325/15; hydrocodone-acetamin 5-163/7.5 ^{MO}	Up to \$3.30 (Tier 1)	QL (2700 per 30 days)
hydrocodone-ibuprofen 10-200; hydrocodone-ibuprofen 10-200 mg, 5-200 mg, 7.5-200 mg; hydrocodone-ibuprofen 7.5-200 ^{MO}	Up to \$3.30 (Tier 1)	QL (150 per 30 days)
hydromorphone 2 mg, 4 mg tablet; hydromorphone 2 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
hydromorphone 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
hydromorphone hcl 1 mg/ml amp ^{MO}	Up to \$3.30 (Tier 1)	QL (720 per 30 days)
hydromorphone hcl 4 mg/ml amp ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
hydromorphone hcl 10 mg/ml vl ^{MO}	Up to \$3.30 (Tier 1)	QL (144 per 30 days)
hydroxyzine 10 mg/5 ml soln; hydroxyzine hcl 10 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
hydroxyzine pam 100 mg, 25 mg, 50 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
ibuprofen 100 mg/5 ml susp; ibuprofen 400 mg, 600 mg, 800 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
oxycodone-ibuprofen 5-400 tab ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
imipramine hcl 10 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
imipramine pamoate 100 mg, 125 mg, 150 mg, 75 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
indomethacin 25 mg, 50 mg, 75 mg capsule; indomethacin er 25 mg, 50 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
INFUMORPH P/F 10 MG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (360 per 30 days)
INFUMORPH P/F 25 MG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (150 per 30 days)
INGREZZA 40 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
INGREZZA 80 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
INVEGA SUSTENNA 117 MG/0.75 ML, 234 MG/1.5 ML, 39 MG/0.25 ML, 78 MG/0.5 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1.5 per 28 days)
INVEGA SUSTENNA 156 MG/ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 28 days)
INVEGA TRINZA 273 MG/0.875 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (0.87 per 90 days)
INVEGA TRINZA 410 MG/1.315 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1.31 per 90 days)
INVEGA TRINZA 546 MG/1.75 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1.75 per 90 days)
INVEGA TRINZA 819 MG/2.625 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (2.62 per 90 days)
ketoprofen 50 mg, 75 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
lamotrigine 100 mg, 100 mg, 150 mg, 200 mg, 200 mg, 25 mg, 25 mg, 25 mg (21) -50 mg (7), 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14), 25 mg(14)-50 mg (14)-100 mg (7), 50 mg, 50 mg (42) -100 mg (14) tablet; lamotrigine 25 mg tb start kit; lamotrigine 25 mg, 5 mg disper tab; lamotrigine 25 mg, 5 mg disper tablet; lamotrigine er 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg tablet; lamotrigine odt 100 mg, 100 mg, 150 mg, 200 mg, 200 mg, 25 mg, 25 mg, 25 mg (21) -50 mg (7), 25 mg (35), 25 mg (42) -100 mg (7), 25 mg (84) -100 mg (14), 25 mg(14)-50 mg (14)-100 mg (7), 50 mg, 50 mg (42) -100 mg (14) tablet; lamotrigine odt kit (blue); lamotrigine odt kit (green); lamotrigine odt kit (orange); lamotrigine tab start kt-green; lamotrigine tab start kt-orang ^{MO}	Up to \$3.30 (Tier 1)	
LATUDA 120 MG, 20 MG, 40 MG, 60 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
LATUDA 80 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
LAZANDA 100 MCG/SPRAY, 300 MCG/SPRAY, 400 MCG/SPRAY NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
levetiracetam 1,000 mg, 250 mg, 500 mg, 750 mg tablet; levetiracetam 100 mg/ml, 500 mg/5 ml, 500 mg/5 ml (5 ml) soln; levetiracetam 100 mg/ml, 500 mg/5 ml, 500 mg/5 ml (5 ml) vial; levetiracetam 500 mg/5 ml soln; levetiracetam er 500 mg, 750 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
levetiracetam-nacl 1,000mg/100; levetiracetam-nacl 1,500mg/100; levetiracetam-nacl 500 mg/100 ^{MO}	Up to \$3.30 (Tier 1)	
levorphanol 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>lithium carbonate 150 mg, 300 mg, 600 mg cap; lithium carbonate 300 mg tab; lithium carbonate er 300 mg, 450 mg tb</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>lithium 8 meq/5 ml solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>lorazepam 0.5 mg, 1 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
<i>lorazepam 2 mg tablet; lorazepam 2 mg/ml oral concent</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (150 per 30 days)
<i>lorazepam intensol 2 mg/ml oral concentrate</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (150 per 30 days)
<i>loxapine 10 mg, 25 mg, 5 mg, 50 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
LYRICA 100 MG, 150 MG, 200 MG, 25 MG, 50 MG, 75 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (90 per 30 days)
LYRICA 20 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	QL (900 per 30 days)
LYRICA 225 MG, 300 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
<i>magnesium sulfate 50% syringe; magnesium sulfate 50% vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>magnesium sulf 1 g/100 ml-d5w</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>magnesium sulf 20 g/500 ml bag; magnesium sulf 4 g/50 ml bag</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>maprotiline 25 mg, 50 mg, 75 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
MARPLAN 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>meclofenamate 100 mg, 50 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>meloxicam 15 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>meloxicam 7.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>meloxicam 7.5 mg/5 ml susp</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (300 per 30 days)
<i>memantine 5-10 mg titration pk</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (98 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
memantine hcl 10 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
memantine hcl 2 mg/ml solution ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (360 per 30 days)
meperidine 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
meperidine 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (480 per 30 days)
meperidine 50 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (720 per 30 days)
methadone 10 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (1800 per 30 days)
methadone 10 mg/ml oral conc; methadone hcl 10 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
methadone 5 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	QL (3600 per 30 days)
methadone hcl 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
methadone hcl 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (480 per 30 days)
METHADOSE 10 MG/ML ORAL CONCENTRATE ^{MO}	Up to \$8.25 (Tier 2)	QL (360 per 30 days)
methylphenidate 10 mg, 20 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
methylphenidate 10 mg/5 ml sol ^{MO}	Up to \$3.30 (Tier 1)	QL (900 per 30 days)
methylphenidate 5 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (1800 per 30 days)
methylphenidate er 10 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
mirtazapine 15 mg, 15 mg, 30 mg, 30 mg, 45 mg, 45 mg odt; mirtazapine 15 mg, 15 mg, 30 mg, 30 mg, 45 mg, 45 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
mirtazapine 7.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
modafinil 100 mg, 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
molindone hcl 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (240 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
molindone hcl 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (270 per 30 days)
molindone hcl 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (360 per 30 days)
morphine 10 mg/ml carpject; morphine 10 mg/ml isecure syrg; morphine sulfate 10 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
morphine 2 mg/ml carpject; morphine 2 mg/ml isecure syr ^{MO}	Up to \$3.30 (Tier 1)	QL (1800 per 30 days)
morphine 4 mg/ml carpject; morphine 4 mg/ml isecure syr; morphine sulfate 4 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (900 per 30 days)
morphine 8 mg/ml isecure syrng; morphine 8 mg/ml syringe; morphine sulfate 8 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (450 per 30 days)
morphine sulf 10 mg, 20 mg, 30 mg, 5 mg suppos; morphine sulf er 100 mg tablet; morphine sulfate ir 15 mg, 30 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (180 per 30 days)
morphine sulf 10 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (2700 per 30 days)
morphine sulf 20 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (1350 per 30 days)
morphine sulf er 15 mg, 30 mg, 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
morphine sulf er 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
morphine 0.5 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (7200 per 30 days)
morphine 1 mg/ml vial p-f ^{MO}	Up to \$3.30 (Tier 1)	QL (3600 per 30 days)
morphine sulf 100 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (540 per 30 days)
nabumetone 500 mg, 750 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nalbuphine 100 mg/10 ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
nalbuphine 200 mg/10 ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
naloxone 0.4 mg/ml vial; naloxone 0.4 mg/ml, 1 mg/ml carpject; naloxone 2 mg/2 ml syringe ^{MO}	Up to \$3.30 (Tier 1)	
naltrexone 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
NAMENDA XR 14 MG, 21 MG, 28 MG, 7 MG CAPSULE SPRINKLE,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
NAMENDA XR 7 MG-14 MG-21 MG-28 MG CAPSULE,SPRINKLE,ER 24HR,DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (28 per 28 days)
NAMZARIC 14 MG-10 MG CAPSULE SPRINKLE,EXTENDED RELEASE; NAMZARIC 21 MG-10 MG CAPSULE SPRINKLE,EXTENDED RELEASE; NAMZARIC 28 MG-10 MG CAPSULE SPRINKLE,EXTENDED RELEASE; NAMZARIC 7 MG-10 MG CAPSULE SPRINKLE,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
NAMZARIC 7/14/21/28 MG-10 MG CAPSULE,SPRINKLE,ER 24HR,DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	QL (28 per 28 days)
<i>naproxen 125 mg/5 ml suspen; naproxen 250 mg, 375 mg, 375 mg, 500 mg, 500 mg tablet; naproxen dr 250 mg, 375 mg, 375 mg, 500 mg, 500 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>naproxen sodium 275 mg, 550 mg tab^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>naratriptan hcl 1 mg, 2.5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (9 per 30 days)
NARCAN 2 MG NASAL SPRAY; NARCAN 2 MG/ACTUATION, 4 MG/ACTUATION NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	QL (2 per 30 days)
<i>nefazodone hcl 100 mg, 150 mg, 200 mg, 250 mg, 50 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
NEUPRO 1 MG/24 HOUR, 2 MG/24 HOUR, 3 MG/24 HOUR, 4 MG/24 HOUR, 6 MG/24 HOUR, 8 MG/24 HOUR TRANSDERMAL 24 HOUR PATCH ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>nortriptyline 10 mg/5 ml sol; nortriptyline hcl 10 mg, 25 mg, 50 mg, 75 mg cap^{MO}</i>	Up to \$3.30 (Tier 1)	
NUEDEXTA 20 MG-10 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
NUPLAZID 17 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
<i>olanzapine 10 mg vial^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>olanzapine 10 mg, 10 mg, 2.5 mg, 5 mg, 5 mg, 7.5 mg tablet; olanzapine odt 10 mg, 10 mg, 2.5 mg, 5 mg, 5 mg, 7.5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>olanzapine 15 mg, 15 mg, 20 mg, 20 mg tablet; olanzapine odt 15 mg, 15 mg, 20 mg, 20 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
ONFI 10 MG, 20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
ONFI 2.5 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (480 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
oxaprozin 600 mg caplet ^{MO}	Up to \$3.30 (Tier 1)	
oxazepam 10 mg, 15 mg, 30 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
oxcarbazepine 150 mg, 300 mg, 600 mg tablet; oxcarbazepine 300 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
oxycodon 10 mg/0.5 ml oral syr; oxycodone hcl 100 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (270 per 30 days)
oxycodone hcl 10 mg, 15 mg, 20 mg, 30 mg, 5 mg tablet; oxycodone hcl 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
oxycodone hcl 5 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (5400 per 30 days)
oxycodon-acetaminophen 2.5-325; oxycodon-acetaminophen 7.5-325; oxycodone-acetaminophen 10-325; oxycodone-acetaminophen 5-325 ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
oxycodone-aspirin 4.8355-325 ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
paliperidone er 1.5 mg, 3 mg, 9 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (30 per 30 days)
paliperidone er 6 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
paroxetine hcl 10 mg, 20 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
paroxetine hcl 30 mg, 40 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
PAXIL 10 MG/5 ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
PEGANONE 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
pentazocine-naloxone tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (360 per 30 days)
perphenazine 16 mg, 2 mg, 4 mg, 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
perphen-amitrip 2 mg-10 mg tab; perphen-amitrip 2 mg-25 mg tab; perphen-amitrip 4 mg-10 mg tab; perphen-amitrip 4 mg-25 mg tab; perphen-amitrip 4 mg-50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
phenelzine sulfate 15 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
phenobarbital 100 mg, 16.2 mg, 32.4 mg, 64.8 mg, 97.2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
phenobarbital 15 mg, 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
phenobarbital 20 mg/5 ml elix ^{MO}	Up to \$3.30 (Tier 1)	QL (1500 per 30 days)
phenobarbital 30 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (300 per 30 days)
PHENYTEK 200 MG, 300 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
phenytoin 100 mg/4 ml, 125 mg/5 ml susp; phenytoin 50 mg tablet chew ^{MO}	Up to \$3.30 (Tier 1)	
phenytoin 50 mg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	
phenytoin sod ext 100 mg, 200 mg, 300 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
pimozide 1 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
piroxicam 10 mg, 20 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
POTIGA 200 MG, 300 MG, 400 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA
pramipexole 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
primidone 250 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
PRISTIQ 100 MG, 25 MG, 50 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	ST, QL (30 per 30 days)
protriptyline hcl 10 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
quetiapine fumarate 100 mg, 300 mg, 400 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
quetiapine fumarate 200 mg, 25 mg, 50 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
rasagiline mesylate 0.5 mg, 1 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
REXULTI 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (30 per 30 days)
riluzole 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
RISPERDAL CONSTA 12.5 MG/2 ML, 25 MG/2 ML, 37.5 MG/2 ML, 50 MG/2 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (2 per 28 days)
risperidone 0.25 mg, 0.25 mg, 1 mg, 1 mg, 2 mg, 2 mg, 3 mg, 3 mg, 4 mg, 4 mg odt; risperidone 0.25 mg, 0.25 mg, 1 mg, 1 mg, 2 mg, 2 mg, 3 mg, 3 mg, 4 mg, 4 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
risperidone 0.5 mg, 0.5 mg odt; risperidone 0.5 mg, 0.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
risperidone 1 mg/ml solution ^{MO}	Up to \$3.30 (Tier 1)	
rizatriptan 10 mg, 10 mg, 5 mg, 5 mg odt; rizatriptan 10 mg, 10 mg, 5 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (12 per 30 days)
ropinirole hcl 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
roweepra 1,000 mg, 500 mg, 750 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
SABRIL 500 MG ORAL POWDER PACKET; SABRIL 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (180 per 30 days)
SAPHRIS (BLACK CHERRY) 10 MG, 2.5 MG, 5 MG SUBLINGUAL TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
SAVELLA 100 MG, 12.5 MG, 12.5 MG (5)-25 MG(8)-50 MG(42), 25 MG, 50 MG TABLET; SAVELLA 12.5 MG (5)-25 MG(8)-50MG(42) TABLETS IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
selegiline hcl 5 mg capsule; selegiline hcl 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
sertraline 20 mg/ml oral conc ^{MO}	Up to \$3.30 (Tier 1)	
sertraline hcl 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
sertraline hcl 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
SPRITAM 1,000 MG TABLET FOR ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (90 per 30 days)
SPRITAM 250 MG TABLET FOR ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (360 per 30 days)
SPRITAM 500 MG TABLET FOR ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (180 per 30 days)
SPRITAM 750 MG TABLET FOR ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (120 per 30 days)
STRATTERA 10 MG, 18 MG, 25 MG, 40 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
STRATTERA 100 MG, 60 MG, 80 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
SUBOXONE 12 MG-3 MG SUBLINGUAL FILM ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
SUBOXONE 2 MG-0.5 MG SUBLINGUAL FILM; SUBOXONE 4 MG-1 MG SUBLINGUAL FILM; SUBOXONE 8 MG-2 MG SUBLINGUAL FILM ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
sulindac 150 mg, 200 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
sumatriptan 20 mg nasal spray; sumatriptan 5 mg nasal spray ^{MO}	Up to \$3.30 (Tier 1)	QL (12 per 30 days)
sumatriptan 4 mg/0.5 ml, 6 mg/0.5 ml cart; sumatriptan 4 mg/0.5 ml, 6 mg/0.5 ml refill; sumatriptan 6 mg/0.5 ml inject; sumatriptan 6 mg/0.5 ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (6 per 30 days)
sumatriptan succ 100 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (9 per 30 days)
SURMONTIL 100 MG, 25 MG, 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
temazepam 15 mg, 30 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
tetrabenazine 12.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (240 per 30 days)
tetrabenazine 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (120 per 30 days)
thioridazine 10 mg, 100 mg, 25 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
thiothixene 1 mg, 10 mg, 2 mg, 5 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
tiagabine hcl 2 mg, 4 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
tolcapone 100 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA
topiramate 100 mg, 200 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
topiramate 15 mg, 25 mg sprinkle cap ^{MO}	Up to \$3.30 (Tier 1)	
topiramate 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
tramadol hcl 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
tramadol-acetaminophn 37.5-325 ^{MO}	Up to \$3.30 (Tier 1)	QL (240 per 30 days)
tranylcypromine sulf 10 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
trazodone 100 mg, 150 mg, 300 mg, 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
trifluoperazine 1 mg, 10 mg, 2 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
trihexyphenidyl 2 mg, 5 mg tablet; trihexyphenidyl 2 mg/5 ml elx ^{MO}	Up to \$3.30 (Tier 1)	
trimipramine maleate 100 mg, 25 mg, 50 mg cap; trimipramine maleate 100 mg, 25 mg, 50 mg cp ^{MO}	Up to \$3.30 (Tier 1)	
TRINTELLIX 10 MG, 20 MG, 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (30 per 30 days)
valproate sod 500 mg/5 ml v ^{MO}	Up to \$3.30 (Tier 1)	
valproic acid 250 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
valproic acid 250 mg/5 ml soln; valproic acid 250 mg/5 ml, 250 mg/5 ml (5 ml), 500 mg/10 ml (10 ml) soln; valproic acid 500 mg/10 ml sol ^{MO}	Up to \$3.30 (Tier 1)	
venlafaxine hcl 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
venlafaxine hcl er 150 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
venlafaxine hcl er 37.5 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
venlafaxine hcl er 75 mg cap ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
VERSACLOZ 50 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (540 per 30 days)
vigabatrin 500 mg powder packt ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (180 per 30 days)
VIIBRYD 10 MG (7)-20 MG (23) TABLETS IN A DOSE PACK; VIIBRYD 10 MG, 10 MG (7)- 20 MG (23), 20 MG, 40 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
VIMPAT 10 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1395 per 30 days)
VIMPAT 100 MG, 150 MG, 200 MG, 50 MG TABLET; VIMPAT 200 MG/20 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
VOLTAREN 1 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	
VRAYLAR 1.5 MG (1)-3 MG (6) CAPSULES IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	PA
VRAYLAR 1.5 MG, 3 MG, 4.5 MG, 6 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
XTAMPZA ER 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG CAPSULE SPRINKLE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
XYREM 500 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (540 per 30 days)
<i>zaleplon 10 mg, 5 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>ziprasidone hcl 20 mg, 40 mg, 60 mg, 80 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>zolpidem tartrate 10 mg, 5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>zonisamide 100 mg, 25 mg, 50 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	
ZYPREXA RELPREVV 210 MG INTRAMUSCULAR SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 28 days)
ZYPREXA RELPREVV 300 MG INTRAMUSCULAR SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (2 per 28 days)
ZYPREXA RELPREVV 405 MG INTRAMUSCULAR SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 28 days)

DEVICES - Supplies used to help manage diabetes

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
1ST TIER UNIFINE PENTIPS 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
1ST TIER UNIFINE PENTIPS PLUS 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
ADVOCATE PEN NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 33 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ADVOCATE SYRINGES 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16; ADVOCATE SYRINGES 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
ASSURE ID INSULIN SAFETY 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2" SYRINGE MO	Up to \$3.30 (Tier 1)	
AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN MO	Up to \$3.30 (Tier 1)	
AUTOPEN 1 TO 16 UNITS MO	Up to \$3.30 (Tier 1)	
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS MO	Up to \$3.30 (Tier 1)	
AUTOPEN 2 TO 32 UNITS MO	Up to \$3.30 (Tier 1)	
AUTOPEN 2 TO 42 UNITS SUBCUTANEOUS MO	Up to \$3.30 (Tier 1)	
BD AUTOSHIELD DUO PEN NEEDLE 30 GAUGE X 3/16" MO	Up to \$3.30 (Tier 1)	
BD AUTOSHIELD NEEDLE 5MMX29G; BD AUTOSHIELD NEEDLE 8MMX29G MO	Up to \$3.30 (Tier 1)	
BD ECLIPSE LUER-LOK 1 ML 30 GAUGE X 1/2" SYRINGE MO	Up to \$3.30 (Tier 1)	
BD INSULIN PEN NEEDLE UF MINI 31 GAUGE X 3/16" MO	Up to \$3.30 (Tier 1)	
BD INSULIN PEN NEEDLE UF ORIGINAL 29 GAUGE X 1/2" MO	Up to \$3.30 (Tier 1)	
BD INSULIN PEN NEEDLE UF SHORT 31 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
BD INSULIN SYRINGE 1 ML 25 GAUGE X 5/8", 1 ML 25 X 1", 1 ML 26 X 1/2", 1 ML 28 GAUGE X 1/2" MO	Up to \$3.30 (Tier 1)	
BD INSULIN SYRINGE HALF UNIT 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 0.3 ML 28, 1 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"GX1/2"; BD INSULIN SYR 0.5 ML 28GX1/2"; BD INSULIN SYRINGE MICRO-FINE 0.3 ML 28, 1 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2" MO	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
BD INSULIN SYRINGE SAFETY-LOK 1 ML 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYRINGE SLIP TIP 1 ML ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYRINGE U-500 1/2 ML 31 GAUGE X 15/64" ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYRINGE ULT-FINE II 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 1 ML 29GX1/2"; BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64"; BD INSULIN SYRINGE ULTRA-FINE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 1/2", 1/2 ML 31 GAUGE X 15/64" ^{MO}	Up to \$3.30 (Tier 1)	
BD INTEGRA SYR 1 ML 29GX1/2" ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 0.3 ML 28GX1/2"; BD LO-DOSE MICRO-FINE IV 0.3 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 0.3 ML 29GX1/2"; BD LO-DOSE ULTRA-FINE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 0.5 ML 29GX1/2"; BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; BD SAFETYGLIDE INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
BD SAFETYGLIDE SYRINGE 1 ML 27 GAUGE X 5/8" ^{MO}	Up to \$3.30 (Tier 1)	
BD ULTRA-FINE MICRO PEN NEEDLE 32 GAUGE X 1/4" ^{MO}	Up to \$3.30 (Tier 1)	
BD ULTRA-FINE NANO PEN NEEDLES 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
CAREFINE PEN NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
CARETOUCH INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
CARETOUCH PEN NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
CLICKFINE 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE MO	Up to \$3.30 (Tier 1)	
COMFORT EZ PEN NEEDLES 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 1/4", 33 GAUGE X 3/16", 33 GAUGE X 5/16", 33 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
COMFORT EZ SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; COMFORT EZ SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
DROPLET PEN NEEDLE 29 GAUGE X 1/2", 29 GAUGE X 3/8", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
EASY COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; EASY COMFORT INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
EASY COMFORT PEN NEEDLES 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
EASY TOUCH 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 3/16", 32 GAUGE X 5/32" NEEDLE MO	Up to \$3.30 (Tier 1)	
EASY TOUCH FLIPLOCK INSULIN 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16" SYRINGE; EASY TOUCH FLIPLOCK INSULIN SYRINGE 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	
EASY TOUCH INSULIN SAFETY SYRINGE 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2" MO	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
EASY TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; EASY TOUCH INSULIN SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
EASY TOUCH LUER LOCK INSULIN 1 ML SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
EASY TOUCH SHEATHLOCK INSULIN 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16" SYRINGE; EASY TOUCH SHEATHLOCK INSULIN SYRINGE 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
EASY TOUCH UNI-SLIP 1 ML SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
EXEL INSULIN 0.3 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16 SYRINGE; EXEL INSULIN 0.3 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
FREESTYLE PRECISION 0.5 ML 31 GAUGE X 5/16, 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
HEALTHY ACCENTS UNIFINE PENTIP 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
INCONTROL PEN NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
INSULIN SYR 0.3ML 31GX1/4(1/2) ^{MO}	Up to \$3.30 (Tier 1)	
INSULIN SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; PV INSULIN SYRINGE 0.5 ML; PV INSULIN SYRINGE 1 ML ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN U100-3/10 ML SYR; INSULIN SYRINGE MICROFINE 0.3 ML 28 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8", 1/2 ML 28 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
BD LUER-LOK SYRINGE 1 ML ^{MO}	Up to \$3.30 (Tier 1)	

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BD INSULIN SYR 0.5 ML 29GX1/2" ^{MO}	Up to \$3.30 (Tier 1)	
BD INSULIN SYR 1 ML 25GX5/8"; INSULIN 1 ML SYRINGE; INSULIN 1/2 ML SYRINGE; INSULIN 3/10 ML SYRINGE; INSULIN SYRIN 0.3 ML 30GX1/2"; INSULIN SYRIN 0.3 ML 31GX5/16"; INSULIN SYRIN 0.5 ML 30GX1/2"; INSULIN SYRIN 0.5 ML 31GX5/16"; INSULIN SYRINGE 0.3 ML 31GX1/4; INSULIN SYRINGE 0.5 ML 31GX1/4; INSULIN SYRINGE 1 ML 30GX1/2"; INSULIN SYRINGE 1 ML 31GX1/4"; INSULIN SYRINGE 1 ML 31GX5/16"; KMART VALU PLUS SYR 1/2 ML; PREFERRED PLUS SYRINGE 0.5 ML; PREFERRED PLUS SYRINGE 1 ML; RELI-ON INSULIN 0.3 ML SYR; RELI-ON INSULIN 1 ML SYR; RELION INS SYR 0.3 ML 29GX1/2"; RELION INS SYR 0.3 ML 30GX5/16; RELION INS SYR 0.3 ML 31GX6MM; RELION INS SYR 0.5 ML 31GX6MM; RELION INS SYR 1 ML 29GX1/2"; RELION INS SYR 1 ML 30GX5/16"; RELION INS SYR 1 ML 31GX15/64"; RELION SYR 0.5 ML 30GX5/16"; TERUMO INS SYRINGE U100-1 ML; ULTICARE INS SYR 1 ML 28GX1/2"; ULTICARE SYR 0.5 ML 29GX1/2"; ULTICARE SYRIN 0.5 ML 28GX1/2" ^{MO}	Up to \$3.30 (Tier 1)	
INSULIN SYRINGE U100 1 ML ^{MO}	Up to \$3.30 (Tier 1)	
INSUPEN 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/16", 32 GAUGE X 5/32", 33 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
LITE TOUCH INSULIN PEN NEEDLES 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
LITE TOUCH INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE, 1/2 ML 30 GAUGE X 5/16; LITE TOUCH INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE, 1/2 ML 30 GAUGE X 5/16"; LITE TOUCH INSULIN SYRINGE 1/2 ML 29 ^{MO}	Up to \$3.30 (Tier 1)	
MAGELLAN INSULIN SAFETY SYRINGE 0.3 ML 29 X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
MAGELLAN SYRINGE 0.3 ML 30 X 5/16", 0.5 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
MAXI-COMFORT INSULIN SYRINGE 1 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
MINI ULTRA-THIN II 31 GAUGE X 3/16" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
MONOJECT INSULIN SAFETY SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16, 29 GAUGE X 1/2"; MONOJECT INSULIN SAFETY SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16, 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
MONOJECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 25 GAUGE X 5/8", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; MONOJECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 25 GAUGE X 5/8", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16"; MONOJECT INSULIN SYRINGE 1 ML ^{MO}	Up to \$3.30 (Tier 1)	
MONOJECT SYRINGE 1/2 ML 28 GAUGE ^{MO}	Up to \$3.30 (Tier 1)	
MONOJECT ULTRA COMFORT INSULIN 1/2 ML 28 GAUGE SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
NOVOFINE 30 30 GAUGE X 1/3" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
NOVOFINE 32 32 GAUGE X 1/4" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
NOVOFINE AUTOCOVER 30 GAUGE X 1/3" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
NOVOFINE PLUS 32 GAUGE X 1/6" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
NOVOPEN ECHO SUBCUTANEOUS ^{MO}	Up to \$3.30 (Tier 1)	
NOVOTWIST 30 GAUGE X 1/3", 32 GAUGE X 1/5" NEEDLE; NOVOTWIST NEEDLE 30G 8MM ^{MO}	Up to \$3.30 (Tier 1)	
PEN NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
COMFORT POINT PEN NDL 31GX1/3"; COMFORT POINT PEN NDL 31GX1/6"; FIFTY50 PEN 31G X 3/16" NEEDLE; FIFTY50 PEN NEEDLE 32G X 1/4"; LEADER PEN NEEDLES 12MM 29G; LEADER PEN NEEDLES 31G; PEN NEEDLE 32G X 3/16"; PEN NEEDLE 32G X 5/32"; PEN NEEDLES 6MM 31G ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
PENTIPS 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
PRO COMFORT PEN NEEDLE 32 GAUGE X 1/4", 32 GAUGE X 3/16" ^{MO}	Up to \$3.30 (Tier 1)	
PRODIGY INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2"; PRODIGY INSULIN SYRINGE 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
RELION NEEDLES 31 GAUGE X 1/4" ^{MO}	Up to \$3.30 (Tier 1)	
RELION PEN NEEDLES 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
SAFESNAP INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
SURE COMFORT INSULIN SYRINGE U-100 0.5 ML 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
SURE COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16, 1/2 ML 31 GAUGE X 1/4"; SURE COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 1/4", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16, 1/2 ML 31 GAUGE X 1/4" ^{MO}	Up to \$3.30 (Tier 1)	
SURE COMFORT PEN NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
SURE-FINE PEN NEEDLES 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
SURE-JECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16; SURE-JECT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" ^{MO}	Up to \$3.30 (Tier 1)	
TECHLITE PEN NEEDLE 29 GAUGE X 1/2", 29 GAUGE X 3/8", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 1/4", 32 GAUGE X 5/16", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	
TERUMO INSULIN SYRINGE 0.3 ML 30 X 3/8", 0.5 ML 29 GAUGE X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 X 3/8" ^{MO}	Up to \$3.30 (Tier 1)	
THINPRO INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 X 3/8", 0.3 ML 31 X 3/8", 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 X 3/8", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 3/8", 1 ML 31 X 3/8", 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 X 3/8" ^{MO}	Up to \$3.30 (Tier 1)	
TOPCARE CLICKFINE 31 GAUGE X 1/4", 31 GAUGE X 5/16" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
TOPCARE ULTRA COMFORT 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16 SYRINGE; TOPCARE ULTRA COMFORT 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
TRUEPLUS INSULIN 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16 SYRINGE; TRUEPLUS INSULIN 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" SYRINGE ^{MO}	Up to \$3.30 (Tier 1)	
TRUEPLUS PEN NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ULTICARE 0.3 ML 29 X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 X5/16 ", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 29 X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 29 X 1/2 ", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16" SYRINGE; ULTICARE 0.3 ML 29 X 1/2", 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 X5/16 ", 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 29 X 1/2", 1 ML 30 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 29 X 1/2 ", 1/2 ML 30 GAUGE X 1/2", 1/2 ML 30 GAUGE X 5/16"" SYRINGE; ULTICARE SYR 0.3 ML 29GX1/2"; ULTICARE SYR 0.3 ML 30GX5/16"; ULTICARE SYR 0.5 ML 29GX1/2"; ULTICARE SYR 0.5 ML 30GX5/16"; ULTICARE SYR 1 ML 30GX5/16"; ULTICARE SYRINGE 1 ML 29GX1/2" MO	Up to \$3.30 (Tier 1)	
ULTICARE INSULIN SYRINGE HALF UNIT 0.3 ML 31 GAUGE X 1/4" MO	Up to \$3.30 (Tier 1)	
ULTICARE INSULIN SYRINGE 0.3 ML 31 GAUGE X 1/4", 1 ML 31 GAUGE X 1/4", 1/2 ML 31 GAUGE X 1/4" MO	Up to \$3.30 (Tier 1)	
ULTICARE PEN NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16; ULTILET INSULIN SYRINGE 0.3 ML 29 GAUGE, 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16"; ULTILET INSULIN SYRINGE 1/2 ML 29 MO	Up to \$3.30 (Tier 1)	
ULTILET PEN NEEDLE 29 GAUGE, 32 GAUGE X 5/32" MO	Up to \$3.30 (Tier 1)	
ULTRA COMFORT INSULIN SYRINGE HALF UNIT 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16" MO	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ULTRA COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE, 1/2 ML 30 GAUGE X 5/16; ULTRA COMFORT INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 30, 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 29 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16, 1 ML 28 GAUGE, 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE, 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 30 GAUGE X 7/16", 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE, 1/2 ML 28 GAUGE X 1/2", 1/2 ML 30 GAUGE, 1/2 ML 30 GAUGE X 5/16"; ULTRA COMFORT INSULIN SYRINGE 1/2 ML 29 ^{MO}	Up to \$3.30 (Tier 1)	
ULTRA-THIN II (SHORT) INSULIN SYRINGE 0.3 ML 30 GAUGE X 5/16, 0.3 ML 31 GAUGE X 5/16, 0.5 ML 31 GAUGE X 5/16, 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 30 GAUGE X 5/16 ^{MO}	Up to \$3.30 (Tier 1)	
ULTRA-THIN II (SHORT) PEN NDL 31 GAUGE X 5/16" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
ULTRA-THIN II INSULIN PEN NEEDLES 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
ULTRA-THIN II INSULIN SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	
UNIFINE PENTIP NEEDLES; UNIFINE PENTIPS 29 GAUGE, 29 GAUGE X 1/2", 29 GAUGE X 5/16", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
UNIFINE PENTIPS PLUS 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32" NEEDLE ^{MO}	Up to \$3.30 (Tier 1)	
VANISHPOINT SYRINGE 1 ML 29 GAUGE X 1/2", 1/2 ML 30 GAUGE X 1/2" ^{MO}	Up to \$3.30 (Tier 1)	

DIAGNOSTIC AGENTS - Drugs used for diagnosis of disease

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ACTHAR H.P. 80 UNIT/ML INJECTION GEL ^{MO}	Up to \$8.25 (Tier 2)	PA

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ELECTROLYTIC, CALORIC, AND WATER BALANCE - Drugs used to treat conditions such as high blood pressure and water retention

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>amiloride hcl 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>amiloride hcl-hctz 5-50 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
AMINOSYN 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN 8.5 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN 8.5 % WITH ELECTROLYTES INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN II 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN II 15 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN II 7 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN II 8.5 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN II 8.5 % WITH ELECTROLYTES INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN M 3.5 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN-HBC 7% INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN-PF 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
AMINOSYN-PF 7 % (SULFITE-FREE) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>bumetanide 0.25 mg/ml vial; bumetanide 0.5 mg, 1 mg, 2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>calcium acetate 667 mg gelcap; calcium acetate 667 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
CARBAGLU 200 MG DISPERSIBLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>chlorothiazide 250 mg, 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>chlorothiazide sod 500 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>chlorthalidone 25 mg, 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
CLINIMIX 5 % IN 15 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 5 % IN 25 % DEXTROSE SULFITE-FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 2.75 % IN 5 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 4.25 % IN 20 % DEXTROSE (SULFITE-FREE) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 4.25 % IN 25 % DEXTROSE (SULFITE-FREE) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 4.25 % IN 10 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 4.25 % IN 5 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX 5 % IN 20 % DEXTROSE (SULFITE-FREE) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 2.75 % IN 10 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 2.75 % IN 5 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 4.25 % IN 25 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 4.25 % IN 5 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 5 % IN 15 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 5 % IN 20 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CLINIMIX E 5 % IN 25 % DEXTROSE SULFITE FREE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>constulose 10 gram/15 ml oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>dextrose 10%-0.45% nacl iv sol</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
dextrose 2.5%-0.45% nacl iv ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 5%-0.9% nacl iv soln ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 5%-0.45% nacl iv soln ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 10%-0.2% nacl iv soln ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 10%-water iv solution ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 5%-water iv soln; dextrose 5%-water iv soln ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 5%-0.2% nacl iv soln ^{MO}	Up to \$3.30 (Tier 1)	
dextrose 5%-0.3% nacl iv soln ^{MO}	Up to \$3.30 (Tier 1)	
DIURIL 250 MG/5 ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
dextrose 5%-electrolyte 48 ^{MO}	Up to \$3.30 (Tier 1)	
enulose 10 gram/15 ml oral solution ^{MO}	Up to \$3.30 (Tier 1)	
ethacrynate sodium 50 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
furosemide 10 mg/ml, 10 mg/ml, 40 mg/5 ml (8 mg/ml) solution; furosemide 20 mg, 40 mg, 80 mg tablet; furosemide 40 mg/4 ml vial; furosemide 40 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
generlac 10 gram/15 ml oral solution ^{MO}	Up to \$3.30 (Tier 1)	
HEPATAMINE 8% INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
hydrochlorothiazide 12.5 mg cp; hydrochlorothiazide 12.5 mg, 25 mg, 50 mg tab; hydrochlorothiazide 12.5 mg, 25 mg, 50 mg tb ^{MO}	Up to \$3.30 (Tier 1)	
indapamide 1.25 mg, 2.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
INTRALIPID 20 %, 30 % INTRAVENOUS EMULSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
IONOSOL-B IN D5W INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
IONOSOL-MB IN D5W INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ISOLYTE-P IN 5 % DEXTROSE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
ISOLYTE-S INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
KABIVEN 3.31 %-9.8 %-3.9 % INTRAVENOUS EMULSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>kionex oral powder</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>kionex (with sorbitol) 15 gram-19.3 gram/60 ml oral suspension</i> ^{MO}	Up to \$3.30 (Tier 1)	
KLOR-CON 10 MEQ TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	
KLOR-CON 8 MEQ TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	
<i>klor-con m10 meq tablet,extended release</i> ^{MO}	Up to \$3.30 (Tier 1)	
KLOR-CON M15 MEQ TABLET,EXTENDED RELEASE ^{MO}	Up to \$3.30 (Tier 1)	
<i>klor-con m20 meq tablet,extended release</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>klor-con sprinkle 10 meq, 8 meq capsule,extended release</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>lactated ringers injection; lactated ringers irrigation</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>lactulose 10 gm/15 ml solution; lactulose 20 gm/30 ml solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
LITHOSTAT 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>methyclothiazide 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>metolazone 10 mg, 2.5 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
NEPHRAMINE 5.4 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
NORMOSOL-M IN 5 % DEXTROSE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
NORMOSOL-R INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NORMOSOL-R IN 5 % DEXTROSE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NORMOSOL-R PH 7.4 INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NUTRILIPID 20 % INTRAVENOUS EMULSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
PERIKABIVEN 2.36 %-6.8 %-3.5 % INTRAVENOUS EMULSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
PHOSLYRA 667 MG (169 MG CALCIUM)/5 ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PHYSIOLYTE 140 MEQ-5 MEQ-3 MEQ-98 MEQ/L IRRIGATION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PHYSIOSOL IRRIGATION 140 MEQ-5 MEQ-3 MEQ-98 MEQ/L SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PLASMA-LYTE A INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
PLASMA-LYTE-56 IN 5 % DEXTROSE INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
d5%-1/2ns-kcl 10 meq/l, 20 meq/l, 30 meq/l, 40 meq/l iv sol; kcl 20 meq in d5w-0.45% nacl ^{MO}	Up to \$3.30 (Tier 1)	
potassium cl 10 meq/100 ml, 10 meq/50 ml, 20 meq/50 ml, 30 meq/100 ml sol; potassium cl 10% (20 meq/15 ml, 40 meq/15 ml); potassium cl 20 meq/10 ml conc; potassium cl 20% (20 meq/15 ml, 40 meq/15 ml); potassium cl er 10 meq, 20 meq tablet; potassium cl er 10 meq, 20 meq, 8 meq tablet; potassium cl er 10 meq, 8 meq capsule ^{MO}	Up to \$3.30 (Tier 1)	
kcl 20 meq-ns 1,000 ml iv soln; kcl 40 meq-ns 1,000 ml iv soln ^{MO}	Up to \$3.30 (Tier 1)	
d5w-kcl 20 meq/l, 30 meq/l, 40 meq/l iv solution; kcl 20 meq in d5w solution; kcl 40 meq in d5w solution ^{MO}	Up to \$3.30 (Tier 1)	
kcl 20 meq in d5w-lact ringer; kcl 40 meq in d5w-lact ringer ^{MO}	Up to \$3.30 (Tier 1)	
potassium cl 20 meq-0.45% nacl ^{MO}	Up to \$3.30 (Tier 1)	
d5%-1/4ns-kcl 20 meq/l, 40 meq/l iv sol; kcl 20 meq in d5w-0.225% nacl ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>kcl 20 meq in d5w-0.3% nacl</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>kcl 20 meq in d5w-ns; kcl 40 meq in d5w-nacl 0.9%</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>potassium citrate er 10 meq (1,080 mg), 15 meq, 5 meq (540 mg) tb; potassium citrate er 10 meq tb; potassium citrate er 5 meq tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
PREMASOL 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
PREMASOL 6 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>probenecid 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>probenecid-colchicine tabs</i> ^{MO}	Up to \$3.30 (Tier 1)	
PROCALAMINE 3% INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
REVELA 0.8 GRAM ORAL POWDER PACKET; REVELA 800 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (540 per 30 days)
REVELA 2.4 GRAM ORAL POWDER PACKET ^{MO}	Up to \$8.25 (Tier 2)	QL (180 per 30 days)
<i>ringer's iv solution; ringers irrigation solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
SAMSCA 15 MG, 30 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
SMOFLIPID 20 % INTRAVENOUS EMULSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>sodium bicarb 7.5% abboject; sodium bicarb 8.4% abboject</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>sodium chloride 0.9% irrig.; sodium chloride 100 meq/40 ml</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>saline 0.45% soln-excel con; sodium chloride 0.45% soln</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>sodium chloride 0.9% solution; sodium chloride 0.9% solution; sodium chloride 0.9% vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>sodium chloride 3% iv soln</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>sodium chloride 5% iv soln</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
SODIUM EDECRIN 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
<i>sodium lactate 5 meq/ml vial^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>sodium phenylbutyrate powder^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>sodium polystyrene sulfonate (sorbitol free) 15 gram/60 ml oral susp^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>sps 15 gm/60 ml suspension^{MO}</i>	Up to \$3.30 (Tier 1)	
SPS (WITH SORBITOL) 15 GRAM-20 GRAM/60 ML ORAL SUSPENSION ^{MO}	Up to \$3.30 (Tier 1)	
<i>toremide 10 mg, 100 mg, 20 mg, 5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
TPN ELECTROLYTES 35 MEQ-20 MEQ-5 MEQ/20 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
TRAVASOL 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>triamterene-hctz 37.5-25 mg, 50-25 mg cap; triamterene-hctz 37.5-25 mg, 50-25 mg cp; triamterene-hctz 37.5-25 mg, 75-50 mg tab; triamterene-hctz 37.5-25 mg, 75-50 mg tb^{MO}</i>	Up to \$3.30 (Tier 1)	
TROPHAMINE 10 % INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
TROPHAMINE 6% INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
VELTASSA 16.8 GRAM, 25.2 GRAM, 8.4 GRAM ORAL POWDER PACKET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>sterile water for irrigation^{MO}</i>	Up to \$3.30 (Tier 1)	

ENZYMES - Drugs used to treat genetic conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ADAGEN 250 UNIT/ML INTRAMUSCULAR SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
CEREZYME 400 UNIT INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ELELYSO 200 UNIT INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (70 per 30 days)
ELITEK 1.5 MG, 7.5 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
FABRAZYME 35 MG, 5 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
LUMIZYME 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
NAGLAZYME 5 MG/5 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
STRENSIQ 100 MG/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (38.4 per 30 days)
STRENSIQ 40 MG/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
SUCRAID 8,500 UNIT/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
VPRIV 400 UNIT INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA

EYE, EAR, NOSE AND THROAT (EENT) PREPS. - Drugs used to treat eye, ear, nose, and throat conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
acetazol hc ear drops ^{MO}	Up to \$3.30 (Tier 1)	
acetazolamide 125 mg, 250 mg tablet; acetazolamide er 500 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
acetazolamide sod 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
acetic acid 2% ear solution ^{MO}	Up to \$3.30 (Tier 1)	
ak-poly-bac eye ointment ^{MO}	Up to \$3.30 (Tier 1)	
apraclonidine hcl 0.5% drops ^{MO}	Up to \$3.30 (Tier 1)	
atropine 1% eye drops ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
AZASITE 1 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
azelastine 0.1% (137 mcg) spry ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 25 days)
azelastine hcl 0.05% drops ^{MO}	Up to \$3.30 (Tier 1)	
AZOPT 1 % EYE DROPS,SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
bacitracin 500 unit/gm ophth ^{MO}	Up to \$3.30 (Tier 1)	
bacitracin-polymyxin eye oint ^{MO}	Up to \$3.30 (Tier 1)	
BESIVANCE 0.6 % EYE DROPS,SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
betaxolol hcl 0.5% eye drop ^{MO}	Up to \$3.30 (Tier 1)	
brimonidine 0.2% eye drop; brimonidine tartrate 0.15% drp ^{MO}	Up to \$3.30 (Tier 1)	
carteolol hcl 1% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
chlorhexidine 0.12% rinse ^{MO}	Up to \$3.30 (Tier 1)	
ciprofloxacin 0.3% eye drop ^{MO}	Up to \$3.30 (Tier 1)	
COMBIGAN 0.2 %-0.5 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
CYSTARAN 0.44 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 28 days)
dexamethasone 0.1% eye drop ^{MO}	Up to \$3.30 (Tier 1)	
diclofenac 0.1% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
dorzolamide hcl 2% eye drops ^{MO}	Up to \$3.30 (Tier 1)	QL (10 per 30 days)
dorzolamide-timolol eye drops ^{MO}	Up to \$3.30 (Tier 1)	QL (10 per 30 days)
doxycycline hyclate 20 mg tab ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
DUREZOL 0.05 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
epinastine hcl 0.05% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
erythromycin 0.5% eye ointment ^{MO}	Up to \$3.30 (Tier 1)	
flunisolide 0.025% spray ^{MO}	Up to \$3.30 (Tier 1)	QL (50 per 30 days)
fluorometholone 0.1% drops ^{MO}	Up to \$3.30 (Tier 1)	
flurbiprofen 0.03% eye drop ^{MO}	Up to \$3.30 (Tier 1)	
gatifloxacin 0.5% eye drops ^{MO}	Up to \$3.30 (Tier 1)	QL (2.5 per 25 days)
gentak 0.3 % (3 mg/gram) eye ointment ^{MO}	Up to \$3.30 (Tier 1)	
gentamicin 0.3% eye drops; gentamicin 0.3% eye ointment ^{MO}	Up to \$3.30 (Tier 1)	
hydrocortison-acetic acid soln ^{MO}	Up to \$3.30 (Tier 1)	
ILEVRO 0.3 % EYE DROPS,SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
ipratropium 0.03% spray ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
ipratropium 0.06% spray ^{MO}	Up to \$3.30 (Tier 1)	QL (45 per 30 days)
ISOPTO CARPINE 1 %, 2 %, 4 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
ketorolac 0.4% ophth solution; ketorolac 0.5% ophth solution ^{MO}	Up to \$3.30 (Tier 1)	
latanoprost 0.005% eye drops ^{MO}	Up to \$3.30 (Tier 1)	QL (5 per 25 days)
levobunolol 0.5% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
levofloxacin 0.5% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
lidocaine 2% viscous soln; lidocaine hcl 2% jelly; lidocaine hcl 2% jelly; lidocaine hcl 4% solution ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>lidocaine viscous 2 % mucosal solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
LUMIGAN 0.01 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	QL (2.5 per 25 days)
<i>methazolamide 25 mg, 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>metipranolol 0.3% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>moxifloxacin 0.5% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>naphazoline 0.1% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neo-polycin 3.5 mg-400 unit-10,000 unit/g eye ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neo-polycin hc 3.5 mg-400-10,000 unit/g-1 % eye ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neo-bacit-poly-hc eye ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neomyc-bacit-polymix eye oint</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neomyc-polym-dexamet eye ointm; neomyc-polym-dexameth eye drop</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neomyc-polym-gramicid eye drop</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neomycin-poly-hc eye drops; neomycin-polymyxin-hc ear soln; neomycin-polymyxin-hc ear susp</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>neosporin eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>ofloxacin 0.3% ear drops; ofloxacin 0.3% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>paroex oral rinse 0.12 % mouthwash</i> ^{MO}	Up to \$3.30 (Tier 1)	
PATADAY 0.2 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
PAZEO 0.7 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	QL (2.5 per 25 days)
<i>periogard 0.12 % mouthwash</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
PHOSPHOLINE IODIDE 0.125 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
<i>pilocarpine 1% eye drops; pilocarpine 2% eye drops; pilocarpine 4% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>polycin 500 unit-10,000 unit/gram eye ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>polymyxin b-tmp eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
PRED-G 0.3 %-1 % EYE DROPS,SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
PRED-G S.O.P. 0.3 %-0.6 % EYE OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	
<i>prednisolone ac 1% eye drop</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>prednisolone sod 1% eye drop</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>proparacaine 0.5% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
RESTASIS 0.05 % EYE DROPS IN A DROPPERETTE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
RESTASIS MULTIDOSE 0.05 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	QL (5.5 per 25 days)
<i>sulfacetamide 10% eye drops; sulfacetamide 10% eye ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>sulf-pred 10-0.23% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>timolol 0.25% gel-solution; timolol 0.5% gel-solution; timolol maleate 0.25% eye drop; timolol maleate 0.5% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tobramycin 0.3% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tobramycin-dexameth ophth susp</i> ^{MO}	Up to \$3.30 (Tier 1)	
TOBREX 0.3 % EYE OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	
TRAVATAN Z 0.004 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	QL (2.5 per 25 days)
<i>trifluridine 1% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
tropicamide 0.5% eye drops; tropicamide 1% eye drops ^{MO}	Up to \$3.30 (Tier 1)	
VIGAMOX 0.5 % EYE DROPS ^{MO}	Up to \$8.25 (Tier 2)	
ZIRGAN 0.15 % EYE GEL ^{MO}	Up to \$8.25 (Tier 2)	QL (5 per 30 days)

GASTROINTESTINAL DRUGS - Drugs used to treat stomach and intestinal conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
alosetron hcl 0.5 mg, 1 mg tablet ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
AMITIZA 24 MCG, 8 MCG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
aprepitant 125 mg, 40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (2 per 28 days)
aprepitant 125-80-80 mg pack ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (6 per 28 days)
aprepitant 80 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (4 per 28 days)
APRISO 0.375 GRAM CAPSULE,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
balsalazide disodium 750 mg cp ^{MO}	Up to \$3.30 (Tier 1)	
CANASA 1,000 MG RECTAL SUPPOSITORY ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
CHENODAL 250 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA
CHOLBAM 250 MG, 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
cimetidine 200 mg, 300 mg, 400 mg, 800 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
cimetidine 300 mg/5 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
compro 25 mg rectal suppository ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
CREON 12,000-38,000-60,000 UNIT CAPSULE,DELAYED RELEASE; CREON 24,000-76,000-120,000 UNIT CAPSULE,DELAYED RELEASE; CREON 3,000 UNIT-9,500 UNIT-15,000 UNIT CAPSULE,DELAYED RELEASE; CREON 36,000 UNIT-114,000 UNIT-180,000 UNIT CAPSULE,DELAYED RELEASE; CREON 6,000-19,000-30,000 UNIT CAPSULE,DELAYED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	
<i>diphenoxylat-atrop 2.5-0.025/5; diphenoxylate-atrop 2.5-0.025</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>dronabinol 10 mg, 2.5 mg, 5 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (120 per 30 days)
EMEND 125 MG (1)-80 MG (2) CAPSULES IN A DOSE PACK ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (6 per 28 days)
EMEND 125 MG (25 MG/ML FINAL CONC.) ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (3 per 28 days)
EMEND 125 MG, 40 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (2 per 28 days)
EMEND 80 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (4 per 28 days)
<i>famotidine 20 mg, 40 mg tablet; famotidine 40 mg/4 ml vial; famotidine 40 mg/5 ml susp</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>famotidine 20 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>famotidine 20 mg piggyback</i> ^{MO}	Up to \$3.30 (Tier 1)	
GATTEX 30-VIAL 5 MG SUBCUTANEOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA
GATTEX ONE-VIAL 5 MG SUBCUTANEOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>gavilyte-c 240 gram-22.72 gram-6.72 gram-5.84 gram oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gavilyte-g 236 gram-22.74 gram-6.74 gram-5.86 gram oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gavilyte-n 420 gram oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>granisetron hcl 0.1 mg/ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>granisetron hcl 1 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (28 per 28 days)
<i>granisetron hcl 1 mg/ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
granisetron hcl 4 mg/4 ml vial ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
lansoprazole dr 30 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
LIALDA 1.2 GRAM TABLET,DELAYED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
LINZESS 145 MCG, 290 MCG, 72 MCG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
mesalamine 4 gm/60 ml enema ^{MO}	Up to \$3.30 (Tier 1)	QL (1800 per 30 days)
mesalamine 4 gm/60 ml kit ^{MO}	Up to \$3.30 (Tier 1)	
metoclopramide 10 mg, 5 mg tablet; metoclopramide 10 mg/2 ml syr; metoclopramide 10 mg/2 ml vial; metoclopramide 5 mg/5 ml, 5 mg/ml soln ^{MO}	Up to \$3.30 (Tier 1)	
misoprostol 100 mcg, 200 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
omeprazole dr 10 mg, 20 mg, 40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
ondansetron odt 4 mg, 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (90 per 30 days)
ondansetron 4 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (450 per 30 days)
ondansetron 40 mg/20 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
ondansetron hcl 24 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (30 per 30 days)
ondansetron hcl 4 mg, 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D,QL (90 per 30 days)
ondansetron hcl 4 mg/2 ml syr; ondansetron hcl 4 mg/2 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
pantoprazole sod dr 20 mg, 40 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
pantoprazole sodium 40 mg vial ^{MO}	Up to \$3.30 (Tier 1)	
peg 3350 electrolyte soln; peg-3350 and electrolytes soln ^{MO}	Up to \$3.30 (Tier 1)	
peg 3350-electrolyte solution ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>prochlorperazine 25 mg supp</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>prochlorperazine 10 mg/2 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>prochlorperazine 10 mg, 5 mg tab; prochlorperazine 10 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
PROTONIX 40 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
<i>ranitidine 15 mg/ml syrup; ranitidine 150 mg, 300 mg capsule; ranitidine 150 mg, 300 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
RELISTOR 12 MG/0.6 ML SUBCUTANEOUS SOLUTION; RELISTOR 12 MG/0.6 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (36 per 28 days)
RELISTOR 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (90 per 30 days)
RELISTOR 8 MG/0.4 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (12 per 30 days)
SANCUSO 3.1 MG/24 HOUR TRANSDERMAL PATCH ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 30 days)
<i>scopolamine 1 mg/3 day patch</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (10 per 30 days)
<i>sucralfate 1 gm tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
SUPREP BOWEL PREP KIT 17.5 GRAM-3.13 GRAM-1.6 GRAM ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
TRANSDERM-SCOP 1.5 MG TRANSDERMAL PATCH (1 MG OVER 3 DAYS) ^{MO}	Up to \$8.25 (Tier 2)	QL (10 per 30 days)
<i>trilyte with flavor packets 420 gram oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>trimethobenzamide 300 mg cap</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>ursodiol 250 mg, 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
VIBERZI 100 MG, 75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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GOLD COMPOUNDS - Drugs used to treat arthritis

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
RIDAURA 3 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	

HEAVY METAL ANTAGONISTS - Drugs used to treat high levels of metal in the blood

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
CHEMET 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
CUPRIMINE 250 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
EXJADE 125 MG, 250 MG, 500 MG DISPERSIBLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA
SYPRINE 250 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	

HORMONES AND SYNTHETIC SUBSTITUTES - Drugs used to treat hormone imbalance

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>a-hydrocort 100 mg solution for injection^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>acarbose 100 mg, 25 mg, 50 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>altavera (28) 0.15 mg-0.03 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>amabelz 0.5 mg-0.1 mg tablet; amabelz 1 mg-0.5 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>amethia lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack^{MO}</i>	Up to \$3.30 (Tier 1)	QL (91 per 90 days)
ANADROL-50 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>anastrozole 1 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
ANDROGEL 1.62 % (20.25 MG/1.25 GRAM) TRANSDERMAL GEL PACKET ^{MO}	Up to \$8.25 (Tier 2)	QL (37.5 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ANDROGEL 1.62 % (40.5 MG/2.5 GRAM), 20.25 MG/1.25 GRAM (1.62 %) TRANSDERMAL GEL PACKET; ANDROGEL 1.62 % (40.5 MG/2.5 GRAM), 20.25 MG/1.25 GRAM (1.62 %) TRANSDERMAL GEL PUMP ^{MO}	Up to \$8.25 (Tier 2)	QL (150 per 30 days)
androxy 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
apri 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
aranelle (28) 0.5 mg/1 mg/0.5 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
aubra 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
AVANDIA 2 MG, 4 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
aviane 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
azurette (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
bekyree (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
blisovi fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
blisovi fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
budesonide ec 3 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
calcitonin-salmon 200 units sp ^{MO}	Up to \$3.30 (Tier 1)	QL (3.7 per 28 days)
camila 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
camrese lo 0.10 mg-20 mcg (84)/10 mcg(7) tablets,3 month dose pack ^{MO}	Up to \$3.30 (Tier 1)	QL (91 per 90 days)
caziant (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
chorionic gonad 10,000 unit v1 ^{MO}	Up to \$8.25 (Tier 2)	PA
cortisone 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
cryselle (28) 0.3 mg-30 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>cyclafem 1/35 (28) 1 mg-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>cyclafem 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>cyred 0.15 mg-0.03 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
CYTOMEL 25 MCG, 5 MCG, 50 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>danazol 100 mg, 200 mg, 50 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dasetta 1/35 (28) 1 mg-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dasetta 7/7/7 (28) 0.5 mg(7)/0.75 mg(7)/1 mg(7)-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>deblitane 0.35 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>delyla (28) 0.1 mg-20 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
DEPO-ESTRADIOL 5 MG/ML INTRAMUSCULAR OIL ^{MO}	Up to \$8.25 (Tier 2)	
<i>desmopressin 0.01% solution; desmopressin 0.1 mg/ml sol; desmopressin 10 mcg/0.1 ml spr; desmopressin ac 0.1 mg/ml (refrigerate), 4 mcg/ml vial; desmopressin acetate 0.1 mg, 0.2 mg tb^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>desogestr-eth estrad eth estra^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>desogestrel-ethinyl estrad tab^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dexamethasone 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg tablet; dexamethasone 0.5 mg/5 ml elx; dexamethasone 0.5 mg/5 ml liq^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dexamethasone intensol 1 mg/ml drops (concentrate)^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>dexamethasone 10 mg/ml, 4 mg/ml vial; dexamethasone 4 mg/ml syringe^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>drospirenone-ee 3-0.02 mg, 3-0.03 mg tab^{MO}</i>	Up to \$3.30 (Tier 1)	
DUAVEE 0.45 MG-20 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
EGRIFTA 1 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
EGRIFTA 2 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
elinest 0.3 mg-30 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ELLA 30 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 30 days)
emoquette 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
enpresse 50-30 (6)/75-40(5)/125-30(10) tablet ^{MO}	Up to \$3.30 (Tier 1)	
enskyce 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
errin 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ESTRACE 0.01% (0.1 MG/GRAM) VAGINAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	
estradiol 0.0375 mg/day patch; estradiol 0.06 mg/day patch; estradiol 0.075 mg/day patch; estradiol tds 0.025 mg/day; estradiol tds 0.05 mg/day; estradiol tds 0.1 mg/day ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
estradiol 0.5 mg, 1 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
estradiol valerate 20 mg/ml, 40 mg/ml v ^{MO}	Up to \$3.30 (Tier 1)	
estradiol-noreth 0.5-0.1 mg, 1-0.5 mg tab; estradiol-noreth 0.5-0.1 mg, 1-0.5 mg tb ^{MO}	Up to \$3.30 (Tier 1)	
estropipate 0.625(0.75 mg, 1.5 mg, 3 mg) tab; estropipate 1.25(0.75 mg, 1.5 mg, 3 mg) tab; estropipate 2.5(0.75 mg, 1.5 mg, 3 mg) tab ^{MO}	Up to \$3.30 (Tier 1)	
ethynodiol-eth estra 1mg-35mcg; ethynodiol-eth estra 1mg-50mcg ^{MO}	Up to \$3.30 (Tier 1)	
exemestane 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
falmina (28) 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
FARESTON 60 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
FEMCON FE CHEWABLE TABLET ^{MO}	Up to \$8.25 (Tier 2)	
femynor 0.25 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
FIASP 100 UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
FIASP FLEXTOUCH 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
FIRMAGON KIT WITH DILUENT SYRINGE 120 MG, 80 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>fludrocortisone 0.1 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
FORTEO 20 MCG/DOSE (600 MCG/2.4 ML) SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	ST,QL (2.4 per 28 days)
FORTICAL 200 UNITS NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	QL (3.7 per 28 days)
<i>gianvi (28) 3 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gildess 1.5 mg-30 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gildess 1 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gildess 24 fe 1-0.02 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gildess fe 1.5-30 tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>gildess fe 1-20 tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>glimepiride 1 mg, 2 mg, 4 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>glipizide 10 mg, 5 mg tablet; glipizide er 10 mg, 2.5 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>glipizide-metformin 2.5-250 mg, 2.5-500 mg, 5-500 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	
GLUCAGEN HYPOKIT 1 MG INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
GLUCAGON EMERGENCY KIT (HUMAN-RECOMB) 1 MG INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
GLYSET 100 MG, 25 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
GLYXAMBI 10 MG-5 MG TABLET; GLYXAMBI 25 MG-5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>heather 0.35 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>hydrocortisone 10 mg, 20 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
INCRELEX 10 MG/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>introvale 0.15 mg-30 mcg tablets,3 month dose pack</i> ^{MO}	Up to \$3.30 (Tier 1)	
INVOKAMET 150 MG-1,000 MG TABLET; INVOKAMET 150 MG-500 MG TABLET; INVOKAMET 50 MG-1,000 MG TABLET; INVOKAMET 50 MG-500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
INVOKAMET XR 150 MG-1,000 MG TABLET, EXTENDED RELEASE; INVOKAMET XR 150 MG-500 MG TABLET, EXTENDED RELEASE; INVOKAMET XR 50 MG-1,000 MG TABLET, EXTENDED RELEASE; INVOKAMET XR 50 MG-500 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
INVOKANA 100 MG, 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>isibloom 0.15 mg-0.03 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
JANUMET 50 MG-1,000 MG TABLET; JANUMET 50 MG-500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
JANUMET XR 100 MG-1,000 MG TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
JANUMET XR 50 MG-1,000 MG TABLET,EXTENDED RELEASE; JANUMET XR 50 MG-500 MG TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
JANUVIA 100 MG, 25 MG, 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
JARDIANCE 10 MG, 25 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>jencycla 0.35 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
JENTADUETO 2.5 MG-1,000 MG TABLET; JENTADUETO 2.5 MG-500 MG TABLET; JENTADUETO 2.5 MG-850 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
JENTADUETO XR 2.5 MG-1,000 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
JENTADUETO XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>juleber 0.15 mg-0.03 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
junel 1.5/30 (21) 1.5 mg-30 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
junel 1/20 (21) 1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
junel fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
junel fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
junel fe 24 1 mg-20 mcg (24)/75 mg (4) tablet ^{MO}	Up to \$3.30 (Tier 1)	
kariva (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
kelnor 1/35 (28) 1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
kimidess (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
KORLYM 300 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (120 per 30 days)
kurvelo 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
levono-e estrad 0.10-0.02-0.01 ^{MO}	Up to \$3.30 (Tier 1)	QL (91 per 90 days)
LANTUS 100 UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
LANTUS SOLOSTAR 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
larin 1.5/30 (21) 1.5 mg-30 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
larin 1/20 (21) 1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
larin 24 fe 1 mg-20 mcg (24)/75 mg (4) tablet ^{MO}	Up to \$3.30 (Tier 1)	
larin fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
larin fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
larissia 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>lessina 0.1 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>letrozole 2.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>leuprolide 2wk 14 mg/2.8 ml kt</i> ^{MO}	Up to \$3.30 (Tier 1)	
LEVEMIR 100 UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
LEVEMIR FLEXTOUCH 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
<i>levonest (28) 50-30 (6)/75-40(5)/125-30(10) tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>levonor-eth estrad triphasic</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>levonor-eth estrad 0.1-0.02 mg; levonor-eth estrad 0.15-0.03</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>levora-28 0.15 mg-0.03 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>levothyroxine 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
LEVOXYL 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>lillow 0.15 mg-0.03 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>liothyronine sod 10 mcg/ml vl; liothyronine sod 25 mcg, 5 mcg, 50 mcg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>loryna (28) 3 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>low-ogestrel (28) 0.3 mg-30 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
LUPRON DEPOT 3.75 MG, 7.5 MG INTRAMUSCULAR SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 30 days)
LUPRON DEPOT 11.25 MG, 22.5 MG (3 MONTH) INTRAMUSCULAR SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 90 days)
LUPRON DEPOT 30 MG (4 MONTH) INTRAMUSCULAR SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 112 days)
LUPRON DEPOT (6 MONTH) 45 MG INTRAMUSCULAR SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 168 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
LUPRON DEPOT-PED 11.25 MG, 15 MG, 7.5 MG (PED) INTRAMUSCULAR KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 28 days)
LUPRON DEPOT-PED 11.25 MG, 30 MG (3 MONTH) INTRAMUSCULAR SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 90 days)
lutera (28) 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
lyza 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
marlissa 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
medroxyprogesterone 10 mg, 2.5 mg, 5 mg tab ^{MO}	Up to \$3.30 (Tier 1)	
medroxyprogesterone 150 mg/ml ^{MO}	Up to \$3.30 (Tier 1)	QL (1 per 90 days)
megestrol 20 mg, 40 mg tablet; megestrol acet 40 mg/ml susp; megestrol acet 400 mg/10 ml ^{MO}	Up to \$3.30 (Tier 1)	
MENEST 0.3 MG, 0.625 MG, 1.25 MG, 2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
metformin hcl 1,000 mg, 500 mg, 850 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
metformin hcl er 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
metformin hcl er 750 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
methimazole 10 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
METHITEST 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
methylprednisolone 16 mg, 32 mg, 4 mg, 4 mg, 8 mg dosepk; methylprednisolone 16 mg, 32 mg, 4 mg, 4 mg, 8 mg tab; methylprednisolone 16 mg, 32 mg, 4 mg, 4 mg, 8 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D
methylprednisolone 40 mg/ml, 80 mg/ml v ^{MO}	Up to \$3.30 (Tier 1)	
methylprednisolone ss 1 gm v ^l ; methylprednisolone ss 1,000 mg, 125 mg, 40 mg; methylprednisolone ss 1,000 mg, 125 mg, 40 mg v ^{MO}	Up to \$3.30 (Tier 1)	
methyltestosterone 10 mg cap ^{MO}	Up to \$3.30 (Tier 1)	
MIACALCIN 200 UNIT/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>microgestin 1.5/30 (21) 1.5 mg-30 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>microgestin 1/20 (21) 1 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
MICROGESTIN 24 FE 1 MG-20 MCG (24)/75 MG (4) TABLET ^{MO}	Up to \$3.30 (Tier 1)	
<i>microgestin fe 1.5/30 (28) 1.5 mg-30 mcg (21)/75 mg (7) tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>microgestin fe 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>miglitol 100 mg, 25 mg, 50 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>mimvey 1 mg-0.5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
MYALEPT 5 MG/ML (FINAL CONCENTRATION) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>myzilra 50-30 (6)/75-40(5)/125-30(10) tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>nateglinide 120 mg, 60 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
NATPARA 100 MCG/DOSE, 25 MCG/DOSE, 50 MCG/DOSE, 75 MCG/DOSE SUBCUTANEOUS CARTRIDGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (2 per 28 days)
<i>necon 0.5/35 (28) 0.5 mg-35 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>necon 1-35-28 tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>necon 10-11-28 tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>nikki (28) 3 mg-20 mcg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>noret-estr-fe 0.4-0.035(21)-75</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>norethindrone 0.35 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>norethind-eth estrad 1-0.02 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>norethindrone 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
noreth-estradiol-ferrous fumarate 1-0.02(21)-75 ^{MO}	Up to \$3.30 (Tier 1)	
norg-estrel 0.18-0.215-0.25/0.025; norg-estrel 0.18-0.215-0.25/0.035; norg-estrel ethin estradiol 0.25-0.035 mg ^{MO}	Up to \$3.30 (Tier 1)	
norlyda 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
norlyroc 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nortrel 0.5/35 (28) 0.5 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nortrel 1/35 (21) 1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nortrel 1/35 (28) 1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
nortrel 7/7/7 (28) 0.5 mg/0.75 mg/1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
NOVOLIN 70/30 100 UNIT/ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLIN N 100 UNIT/ML SUBCUTANEOUS SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLIN R 100 UNIT/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLOG 100 UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLOG FLEXPEN 100 UNIT/ML SUBCUTANEOUS ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLOG MIX 70-30 100 UNIT/ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLOG MIX 70-30 FLEXPEN 100 UNIT/ML SUBCUTANEOUS PEN ^{MO}	Up to \$8.25 (Tier 2)	
NOVOLOG PENFILL 100 UNIT/ML SUBCUTANEOUS CARTRIDGE ^{MO}	Up to \$8.25 (Tier 2)	
ogestrel (28) 0.5 mg-50 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
OMNITROPE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML) SUBCUTANEOUS CARTRIDGE; OMNITROPE 5.8 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
orsythia 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
oxandrolone 10 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (60 per 30 days)
oxandrolone 2.5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (120 per 30 days)
pimtrex (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
pioglitazone hcl 15 mg, 30 mg, 45 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
pioglitazone-glimepiride 30-2; pioglitazone-glimepiride 30-4 ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
pioglitazone-metformin 15-500; pioglitazone-metformin 15-850 ^{MO}	Up to \$3.30 (Tier 1)	QL (90 per 30 days)
pirmella 0.5/0.75/1 mg-35 mcg tablet; pirmella 1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
portia 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
prednisolone 15 mg/5 ml syrup ^{MO}	Up to \$3.30 (Tier 1)	
prednisolone 15 mg/5 ml soln; prednisolone 20 mg/5 ml soln; prednisolone 5 mg/5 ml soln; prednisolone sod ph 25 mg/5 ml ^{MO}	Up to \$3.30 (Tier 1)	
prednisone 1 mg, 10 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 5 mg, 50 mg tab dose pack; prednisone 1 mg, 10 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 5 mg, 50 mg tablet; prednisone 5 mg/5 ml solution ^{MO}	Up to \$3.30 (Tier 1)	B vs D
prednisone intensol 5 mg/ml oral concentrate ^{MO}	Up to \$3.30 (Tier 1)	B vs D
PREMARIN 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG TABLET; PREMARIN 0.625 MG/GRAM VAGINAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	
PREMPHASE 0.625 MG(14)/0.625 MG-5MG(14) TABLET ^{MO}	Up to \$8.25 (Tier 2)	
PREMPRO 0.3 MG-1.5 MG TABLET; PREMPRO 0.45 MG-1.5 MG TABLET; PREMPRO 0.625 MG-2.5 MG TABLET; PREMPRO 0.625 MG-5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
previfem 0.25 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
progesterone in oil 50 mg/ml intramuscular ^{MO}	Up to \$3.30 (Tier 1)	
progesterone 100 mg, 200 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
PROGLYCEM 50 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
propylthiouracil 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
quasense 0.15 mg-30 mcg tablets,3 month dose pack ^{MO}	Up to \$3.30 (Tier 1)	
raloxifene hcl 60 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
reclipsen (28) 0.15 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
repaglinide 0.5 mg, 1 mg, 2 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
SENSIPAR 30 MG, 60 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
SENSIPAR 90 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
SEROSTIM 4 MG, 5 MG, 6 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
setlakin 0.15 mg-30 mcg tablets,3 month dose pack ^{MO}	Up to \$3.30 (Tier 1)	
sharobel 0.35 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
SIGNIFOR 0.3 MG/ML (1 ML), 0.6 MG/ML (1 ML), 0.9 MG/ML (1 ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
SOLTAMOX 10 MG/5 ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
SOLU-MEDROL 1,000 MG, 2 GRAM INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
SOLU-MEDROL (PF) 125 MG/2 ML, 40 MG/ML, 500 MG/4 ML INTRAVENOUS SOLUTION; SOLU-MEDROL (PF) 125 MG/2 ML, 40 MG/ML, 500 MG/4 ML SOLUTION FOR INJECTION ^{MO}	Up to \$8.25 (Tier 2)	
SOMATULINE DEPOT 120 MG/0.5 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (0.5 per 28 days)
SOMATULINE DEPOT 60 MG/0.2 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (0.2 per 28 days)
SOMATULINE DEPOT 90 MG/0.3 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (0.3 per 28 days)
SOMAVERT 10 MG, 15 MG, 20 MG SUBCUTANEOUS SOLUTION; SOMAVERT 10 MG, 15 MG, 20 MG VIAL ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
SOMAVERT 25 MG, 30 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>sprintec</i> (28) 0.25 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
<i>sronyx</i> 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
STIMATE 150 MCG/SPRAY (0.1 ML) NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	
<i>syeda</i> 3 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
SYMLINPEN 120 2,700 MCG/2.7 ML SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	QL (10.8 per 30 days)
SYMLINPEN 60 1,500 MCG/1.5 ML SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	QL (10.5 per 30 days)
SYNAREL 2 MG/ML NASAL SPRAY ^{MO}	Up to \$8.25 (Tier 2)	
SYNJARDY 12.5 MG-1,000 MG TABLET; SYNJARDY 12.5 MG-500 MG TABLET; SYNJARDY 5 MG-1,000 MG TABLET; SYNJARDY 5 MG-500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
SYNJARDY XR 10 MG-1,000 MG TABLET, EXTENDED RELEASE; SYNJARDY XR 25 MG-1,000 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
SYNJARDY XR 12.5 MG-1,000 MG TABLET, EXTENDED RELEASE; SYNJARDY XR 5 MG-1,000 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
SYNTHROID 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>tamoxifen</i> 10 mg, 20 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
<i>tarina fe</i> 1/20 (28) 1 mg-20 mcg (21)/75 mg (7) tablet ^{MO}	Up to \$3.30 (Tier 1)	
<i>testosteron cyp</i> 1,000 mg/10 ml; <i>testosterone cyp</i> 100 mg/ml, 200 mg/ml ^{MO}	Up to \$3.30 (Tier 1)	
<i>testosterone enan</i> 200 mg/ml ^{MO}	Up to \$3.30 (Tier 1)	
THYROLAR-1 12.5 MCG-50 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
THYROLAR-1/2 6.25 MCG-25 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
THYROLAR-1/4 3.1 MCG-12.5 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
THYROLAR-2 25 MCG-100 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
THYROLAR-3 37.5 MCG-150 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
<i>tilia fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tolbutamide 500 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
TOUJEO SOLOSTAR 300 UNIT/ML (1.5 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
TRADJENTA 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
TRELSTAR 11.25 MG, 22.5 MG, 3.75 MG INTRAMUSCULAR SUSPENSION; TRELSTAR 11.25 MG/2 ML, 22.5 MG/2 ML, 3.75 MG/2 ML INTRAMUSCULAR SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA
TRESIBA FLEXTOUCH U-100 100 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
TRESIBA FLEXTOUCH U-200 200 UNIT/ML (3 ML) SUBCUTANEOUS INSULIN PEN ^{MO}	Up to \$8.25 (Tier 2)	
<i>tri femynor (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tri-legest fe 1-20 (5)/1-30(7)/1mg-35mcg(9) tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tri-lo-estarylla 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tri-lo-sprintec 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tri-previfem (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>tri-sprintec (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>trinessa (28) 0.18 mg(7)/0.215 mg(7)/0.25 mg(7)-35 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>trinessa lo 0.18 mg/0.215 mg/0.25 mg-25 mcg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>trivora (28) 50-30 (6)/75-40(5)/125-30(10) tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
TRULICITY 0.75 MG/0.5 ML, 1.5 MG/0.5 ML SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	QL (2 per 28 days)
UNITHROID 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
velivet triphasic regimen (28) 0.1 mg/0.125 mg/0.15 mg-25 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
VERIPRED 20 20 MG/5 ML (4 MG/ML) ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
vestura (28) 3 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
VICTOZA 2-PAK 0.6 MG/0.1 ML (18 MG/3 ML) SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	QL (9 per 30 days)
VICTOZA 3-PAK 0.6 MG/0.1 ML (18 MG/3 ML) SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	QL (9 per 30 days)
vienna 0.1 mg-20 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
violele (28) 0.15 mg-0.02 mg (21)/0.01 mg (5) tablet ^{MO}	Up to \$3.30 (Tier 1)	
wera (28) 0.5 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
wymzya fe 0.4 mg-35 mcg (21)/75 mg (7) chewable tablet ^{MO}	Up to \$3.30 (Tier 1)	
zarah 3 mg-0.03 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
zenchent fe tablet chewable ^{MO}	Up to \$3.30 (Tier 1)	
zovia 1/35e (28) 1 mg-35 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	
zovia 1/50e (28) 1 mg-50 mcg tablet ^{MO}	Up to \$3.30 (Tier 1)	

LOCAL ANESTHETICS (PARENTERAL) - Drugs used to help with local pain

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
lidocaine hcl 0.5% vial; lidocaine hcl 1% ampul; lidocaine hcl 2% vial ^{MO}	Up to \$3.30 (Tier 1)	
lidocaine hcl 1% vial; lidocaine hcl 2% vial ^{MO}	Up to \$3.30 (Tier 1)	



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MISCELLANEOUS THERAPEUTIC AGENTS - Drugs used to treat arthritis and other conditions such as MS and osteoporosis

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
acetylcysteine 6 gram/30 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
ACTIMMUNE 100 MCG (2 MILLION UNIT)/0.5 ML SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
alendronate sodium 10 mg, 40 mg, 5 mg tab; alendronate sodium 10 mg, 40 mg, 5 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
alendronate sodium 35 mg, 70 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
allopurinol 100 mg, 300 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
amifostine 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
AMPYRA 10 MG TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
ARCALYST 220 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
ATELVIA 35 MG TABLET,DELAYED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (4 per 28 days)
azathioprine 50 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D
BENLYSTA 120 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (20 per 28 days)
BENLYSTA 200 MG/ML SUBCUTANEOUS AUTO-INJECTOR; BENLYSTA 200 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4 per 28 days)
BENLYSTA 400 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
BETASERON 0.3 MG SUBCUTANEOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (15 per 30 days)
CELLCEPT 200 MG/ML ORAL SUSPENSION; CELLCEPT 250 MG CAPSULE; CELLCEPT 500 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CELLCEPT INTRAVENOUS 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
CERDELGA 84 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
CINRYZE 500 UNIT (5 ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (20 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
COLCRYS 0.6 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (120 per 30 days)
COPAXONE 20 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
COPAXONE 40 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (12 per 28 days)
<i>cyclosporine 100 mg, 25 mg capsule; cyclosporine 50 mg/ml ampul</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>cyclosporine 100 mg/ml soln; cyclosporine modified 100 mg, 25 mg, 50 mg</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
CYSTADANE 1 GRAM/1.7 ML ORAL POWDER ^{MO}	Up to \$8.25 (Tier 2)	
CYSTAGON 150 MG, 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
DEMSER 250 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
<i>dexrazoxane 250 mg, 500 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>disulfiram 250 mg, 500 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>dutasteride 0.5 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>dutasteride-tamsulosin 0.5-0.4</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
ELMIRON 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
ENBREL 25 MG (1 ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (8 per 28 days)
ENBREL 25 MG/0.5 ML (0.51 ML) SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (4.08 per 28 days)
ENBREL 50 MG/ML (0.98 ML) SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7.84 per 28 days)
ENBREL MINI 50 MG/ML (0.98 ML) SUBCUTANEOUS CARTRIDGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7.84 per 28 days)
ENBREL SURECLICK 50 MG/ML (0.98 ML) SUBCUTANEOUS PEN INJECTOR ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (7.84 per 28 days)
<i>etidronate disodium 200 mg, 400 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
EXONDYS 51 50 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>finasteride 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
FIRAZYR 30 MG/3 ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (18 per 30 days)
<i>fluoride 1 mg tablet chewable</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>fomepizole 1.5 gm/1.5 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
FUSILEV 50 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>gengraf 100 mg, 25 mg, 50 mg capsule; gengraf 100 mg/ml oral solution</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
GILENYA 0.5 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
HUMIRA 10 MG/0.2 ML SUBCUTANEOUS SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (2 per 28 days)
HUMIRA 20 MG/0.4 ML, 40 MG/0.8 ML SUBCUTANEOUS SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
HUMIRA PEDIATRIC CROHN'S STARTER 40 MG/0.8 ML SUBCUTANEOUS SYRINGE KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
HUMIRA PEN 40 MG/0.8 ML SUBCUTANEOUS ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
HUMIRA PEN CROHN'S-ULC COLITIS-HID SUP STARTER 40 MG/0.8 ML SUBCUT KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
HUMIRA PEN PSORIASIS-UVEITIS STARTER 40 MG/0.8 ML SUBCUTANEOUS KIT ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
IMURAN 50 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D
KUVAN 100 MG SOLUBLE TABLET; KUVAN 100 MG, 500 MG ORAL POWDER PACKET ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>leflunomide 10 mg, 20 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>leucovorin calcium 10 mg, 15 mg, 25 mg, 5 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>leucovorin calcium 100 mg, 200 mg, 350 mg, 50 mg, 500 mg vial; leucovorin calcium 100 mg, 200 mg, 350 mg, 50 mg, 500 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
levocarnitine 200 mg/ml vial; levocarnitine 330 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
levocarnitine 1 g/10 ml soln ^{MO}	Up to \$3.30 (Tier 1)	
levoleucovorin 10 mg/ml, 175 mg, 50 mg vial; levoleucovorin 250 mg/25 ml vial ^{MO}	Up to \$3.30 (Tier 1)	PA
mesna 1 gram/10 ml vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
MESNEX 400 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
mycophenolate 200 mg/ml susp; mycophenolate 250 mg capsule; mycophenolate 500 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	B vs D
mycophenolate 500 mg vial ^{MO}	Up to \$3.30 (Tier 1)	B vs D
mycophenolic acid dr 180 mg, 360 mg tb ^{MO}	Up to \$3.30 (Tier 1)	B vs D
MYFORTIC 180 MG, 360 MG TABLET, DELAYED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	B vs D
NULOJIX 250 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA, QL (20 per 30 days)
octreotide 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml vial; octreotide acet 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml vial; octreotide acet 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	PA
ORFADIN 10 MG, 2 MG, 20 MG, 5 MG CAPSULE; ORFADIN 4 MG/ML ORAL SUSPENSION ^{MO}	Up to \$8.25 (Tier 2)	
pamidronate 30 mg/10 ml vial; pamidronate 60 mg/10 ml vial; pamidronate 90 mg/10 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
PROGRAF 5 MG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
PROLIA 60 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	QL (1 per 180 days)
RAPAMUNE 0.5 MG, 1 MG, 2 MG TABLET; RAPAMUNE 1 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
REMICADE 100 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
risedronate sod dr 35 mg tab ^{MO}	Up to \$3.30 (Tier 1)	QL (4 per 28 days)
SANDIMMUNE 100 MG/ML ORAL SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
SANDOSTATIN LAR DEPOT 10 MG, 20 MG, 30 MG INTRAMUSCULAR SUSP,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA
SIMPONI 100 MG/ML SUBCUTANEOUS PEN INJECTOR; SIMPONI 100 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1 per 30 days)
SIMULECT 10 MG, 20 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
<i>sirolimus 0.5 mg, 1 mg, 2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>tacrolimus 0.5 mg, 1 mg, 5 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
THALOMID 100 MG, 200 MG, 50 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
THALOMID 150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
THIOLA 100 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	
THYMOGLOBULIN 25 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
TYBOST 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
TYSABRI 300 MG/15 ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
XELJANZ 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
XELJANZ XR 11 MG TABLET,EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
XGEVA 120 MG/1.7 ML (70 MG/ML) SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (1.7 per 28 days)
ZAVESCA 100 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
<i>zoledronic acid 4 mg vial</i> ^{MO}	Up to \$3.30 (Tier 1)	PA
<i>zoledronic acid 4 mg/5 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (15 per 21 days)
<i>zoledronic acid 5 mg/100 ml</i> ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (100 per 365 days)
ZORTRESS 0.25 MG, 0.75 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ZORTRESS 0.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (120 per 30 days)

OXYTOCICS - Drugs used to help with post-partum bleeding

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>methergine 0.2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>methylergonovine 0.2 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

PHARMACEUTICAL AIDS - Supplies used for wound treatment and other conditions

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
BAND-AID GAUZE PADS 2" X 2" BANDAGE ^{MO}	Up to \$3.30 (Tier 1)	
BORDERED GAUZE 2" X 2" BANDAGE ^{MO}	Up to \$3.30 (Tier 1)	
CURITY GAUZE 2" X 2" BANDAGE ^{MO}	Up to \$3.30 (Tier 1)	
DERMACEA 2" X 2" BANDAGE ^{MO}	Up to \$3.30 (Tier 1)	
GAUZE PADS 2"X2" ^{MO}	Up to \$3.30 (Tier 1)	
GAUZE PAD 2" X 2" BANDAGE ^{MO}	Up to \$3.30 (Tier 1)	
GAUZE PADS, STERILE 2"X2" ^{MO}	Up to \$3.30 (Tier 1)	

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RESPIRATORY TRACT AGENTS - Drugs used to treat asthma

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>acetylcysteine 10% vial; acetylcysteine 20% vial</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
ADEMPAS 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
ADVAIR DISKUS 100 MCG-50 MCG/DOSE POWDER FOR INHALATION; ADVAIR DISKUS 250 MCG-50 MCG/DOSE POWDER FOR INHALATION; ADVAIR DISKUS 500 MCG-50 MCG/DOSE POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
ADVAIR HFA 115 MCG-21 MCG/ACTUATION AEROSOL INHALER; ADVAIR HFA 230 MCG-21 MCG/ACTUATION AEROSOL INHALER; ADVAIR HFA 45 MCG-21 MCG/ACTUATION AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (12 per 30 days)
ARALAST NP 1,000 MG, 500 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
ARNUITY ELLIPTA 100 MCG/ACTUATION, 200 MCG/ACTUATION POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
BREO ELLIPTA 100 MCG-25 MCG/DOSE POWDER FOR INHALATION; BREO ELLIPTA 200 MCG-25 MCG/DOSE POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
<i>budesonide 0.25 mg/2 ml, 0.5 mg/2 ml susp</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
<i>cromolyn 100 mg/5 ml oral conc; cromolyn 4% eye drops</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>cromolyn 20 mg/2 ml neb soln</i> ^{MO}	Up to \$3.30 (Tier 1)	B vs D
DALIRESP 500 MCG TABLET ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
ESBRIET 267 MG CAPSULE; ESBRIET 267 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (270 per 30 days)
ESBRIET 801 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (90 per 30 days)
FLOVENT DISKUS 100 MCG/ACTUATION, 250 MCG/ACTUATION, 50 MCG/ACTUATION POWDER FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	QL (60 per 30 days)
FLOVENT HFA 110 MCG/ACTUATION, 220 MCG/ACTUATION AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (24 per 30 days)
FLOVENT HFA 44 MCG/ACTUATION AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (10.6 per 30 days)
GLASSIA 1 GRAM/50 ML (2 %) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
KALYDECO 150 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
KALYDECO 50 MG, 75 MG ORAL GRANULES IN PACKET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (56 per 28 days)
LETAIRIS 10 MG, 5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
<i>montelukast sod 10 mg tablet; montelukast sod 4 mg granules; montelukast sod 4 mg, 5 mg tab chew</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
OFEV 100 MG, 150 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
OPSUMIT 10 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (30 per 30 days)
ORKAMBI 100 MG-125 MG TABLET; ORKAMBI 200 MG-125 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (112 per 28 days)
PULMOZYME 1 MG/ML SOLUTION FOR INHALATION ^{MO}	Up to \$8.25 (Tier 2)	B vs D,QL (150 per 30 days)
REMODULIN 1 MG/ML, 10 MG/ML, 2.5 MG/ML, 5 MG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA
SYMBICORT 160 MCG-4.5 MCG/ACTUATION HFA AEROSOL INHALER; SYMBICORT 80 MCG-4.5 MCG/ACTUATION HFA AEROSOL INHALER ^{MO}	Up to \$8.25 (Tier 2)	QL (10.2 per 30 days)
TRACLEER 125 MG, 62.5 MG TABLET ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 30 days)
TYVASO 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA
TYVASO INSTITUTIONAL STARTER KIT 1.74 MG/2.9 ML SOLN FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA
TYVASO REFILL KIT 1.74 MG/2.9 ML (0.6 MG/ML) SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA
TYVASO STARTER KIT 1.74 MG/2.9 ML SOLUTION FOR NEBULIZATION ^{MO}	Up to \$8.25 (Tier 2)	PA
XOLAIR 150 MG SUBCUTANEOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (6 per 28 days)
<i>zafirlukast 10 mg, 20 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)

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SKIN AND MUCOUS MEMBRANE AGENTS - Drugs used to treat skin problems

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
8-MOP 10 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
acitretin 10 mg, 17.5 mg, 25 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
acyclovir 5% ointment ^{MO}	Up to \$3.30 (Tier 1)	PA
adapalene 0.1% gel ^{MO}	Up to \$3.30 (Tier 1)	
alclometasone dipr 0.05% oint; alclometasone dipro 0.05% crm ^{MO}	Up to \$3.30 (Tier 1)	
ALCOHOL PADS ^{MO}	Up to \$3.30 (Tier 1)	
ALCOHOL PREP PADS ^{MO}	Up to \$3.30 (Tier 1)	
ALCOHOL PREP SWABS ^{MO}	Up to \$3.30 (Tier 1)	
ALCOHOL 70% SWABS ^{MO}	Up to \$3.30 (Tier 1)	
ALCOHOL WIPES ^{MO}	Up to \$3.30 (Tier 1)	
ALTABAX 1 % TOPICAL OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	
BD ALCOHOL SWABS ^{MO}	Up to \$3.30 (Tier 1)	
betamethasone dp 0.05% crm; betamethasone dp 0.05% lot; betamethasone dp 0.05% oint ^{MO}	Up to \$3.30 (Tier 1)	
betamethasone va 0.1% cream; betamethasone va 0.1% lotion; betamethasone valer 0.1% ointm ^{MO}	Up to \$3.30 (Tier 1)	
betamethasone dp aug 0.05% crm; betamethasone dp aug 0.05% gel; betamethasone dp aug 0.05% lot; betamethasone dp aug 0.05% oin ^{MO}	Up to \$3.30 (Tier 1)	
calcipotriene 0.005% cream ^{MO}	Up to \$3.30 (Tier 1)	QL (120 per 30 days)
calcipotriene 0.005% solution ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
CARETOUCH ALCOHOL PREP PAD TOPICAL PADS ^{MO}	Up to \$3.30 (Tier 1)	
ciclodan 0.77 % topical cream; ciclodan 8 % topical solution ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>ciclopirox 0.77% cream; ciclopirox 0.77% gel; ciclopirox 0.77% topical susp; ciclopirox 1% shampoo; ciclopirox 8% solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>clindamycin 2% vaginal cream; clindamycin ph 1% gel; clindamycin ph 1% solution; clindamycin phos 1% pledget; clindamycin phosp 1% lotion</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>clobetasol 0.05% cream; clobetasol 0.05% gel; clobetasol 0.05% ointment; clobetasol 0.05% solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>clobetasol emollient 0.05% crm</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>clotrimazole 1% cream; clotrimazole 1% solution; clotrimazole 10 mg troche</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>clotrimazole-betamethasone crm; clotrimazole-betamethasone lot</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>colocort 100 mg/60 ml enema</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>cormax 0.05 % scalp solution</i> ^{MO}	Up to \$3.30 (Tier 1)	
COSENTYX 150 MG/ML SUBCUTANEOUS SYRINGE ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (32 per 365 days)
COSENTYX (2 SYRINGES) 300 MG (150 MG/ML) SUBCUTANEOUS ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (32 per 365 days)
COSENTYX PEN 150 MG/ML SUBCUTANEOUS ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (32 per 365 days)
COSENTYX PEN (2 PENS) 300 MG (150 MG/ML) SUBCUTANEOUS ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (32 per 365 days)
CURITY ALCOHOL SWABS ^{MO}	Up to \$3.30 (Tier 1)	
DENAVIR 1 % TOPICAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>desonide 0.05% cream; desonide 0.05% lotion; desonide 0.05% ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>desoximetasone 0.05% cream; desoximetasone 0.05% gel; desoximetasone 0.05% ointment; desoximetasone 0.25% cream; desoximetasone 0.25% ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
EASY TOUCH ALCOHOL PREP PADS ^{MO}	Up to \$3.30 (Tier 1)	
<i>econazole nitrate 1% cream</i> ^{MO}	Up to \$3.30 (Tier 1)	
ELIDEL 1 % TOPICAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ery pads 2 % topical swab ^{MO}	Up to \$3.30 (Tier 1)	
erythromycin 2% gel; erythromycin 2% pledgets; erythromycin 2% solution ^{MO}	Up to \$3.30 (Tier 1)	
erythromycin-benzoyl gel ^{MO}	Up to \$3.30 (Tier 1)	
fluocinolone 0.01% cream; fluocinolone 0.01% solution; fluocinolone 0.025% cream; fluocinolone 0.025% ointment ^{MO}	Up to \$3.30 (Tier 1)	
fluocinolone 0.01% scalp oil ^{MO}	Up to \$3.30 (Tier 1)	
fluocinonide 0.05% cream; fluocinonide 0.05% gel; fluocinonide 0.05% ointment; fluocinonide 0.05% solution ^{MO}	Up to \$3.30 (Tier 1)	
fluocinonide-e 0.05 % topical cream ^{MO}	Up to \$3.30 (Tier 1)	
fluocinonide-e 0.05% cream ^{MO}	Up to \$3.30 (Tier 1)	
fluorouracil 2% topical soln; fluorouracil 5% cream; fluorouracil 5% topical soln ^{MO}	Up to \$3.30 (Tier 1)	
fluticasone prop 0.005% oint; fluticasone prop 0.05% cream ^{MO}	Up to \$3.30 (Tier 1)	
gentamicin 0.1% cream; gentamicin 0.1% ointment ^{MO}	Up to \$3.30 (Tier 1)	
halobetasol prop 0.05% cream; halobetasol prop 0.05% ointmnt ^{MO}	Up to \$3.30 (Tier 1)	
hydrocortisone 1% cream; hydrocortisone 1% ointment; hydrocortisone 100 mg/60 ml; hydrocortisone 2.5% cream; hydrocortisone 2.5% lotion; hydrocortisone 2.5% ointment ^{MO}	Up to \$3.30 (Tier 1)	
hydrocortisone butyr 0.1% cream; hydrocortisone butyr 0.1% oint; hydrocortisone butyr 0.1% soln ^{MO}	Up to \$3.30 (Tier 1)	
hydrocortisone val 0.2% cream; hydrocortisone val 0.2% ointmt ^{MO}	Up to \$3.30 (Tier 1)	
imiquimod 5% cream packet ^{MO}	Up to \$3.30 (Tier 1)	QL (12 per 30 days)
INCONTROL ALCOHOL PADS ^{MO}	Up to \$3.30 (Tier 1)	
IV PREP WIPES MEDICATED ^{MO}	Up to \$3.30 (Tier 1)	
KEPIVANCE 6.25 MG INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ketoconazole 2% cream; ketoconazole 2% shampoo ^{MO}	Up to \$3.30 (Tier 1)	
lidocaine 5% patch ^{MO}	Up to \$3.30 (Tier 1)	PA,QL (90 per 30 days)
lidocaine-prilocaine cream ^{MO}	Up to \$3.30 (Tier 1)	
lindane 1% lotion; lindane 1% shampoo ^{MO}	Up to \$3.30 (Tier 1)	
malathion 0.5% lotion ^{MO}	Up to \$3.30 (Tier 1)	
MENTAX 1 % TOPICAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	
methoxsalen 10 mg softgel ^{MO}	Up to \$3.30 (Tier 1)	
metronidazole 0.75% cream; metronidazole 0.75% lotion; metronidazole topical 0.75% gl; metronidazole topical 1% gel; metronidazole vaginal 0.75% gl ^{MO}	Up to \$3.30 (Tier 1)	
miconazole-3 200 mg vaginal suppository ^{MO}	Up to \$3.30 (Tier 1)	
mometasone furoate 0.1% cream; mometasone furoate 0.1% oint; mometasone furoate 0.1% soln ^{MO}	Up to \$3.30 (Tier 1)	
mupirocin 2% ointment ^{MO}	Up to \$3.30 (Tier 1)	
mupirocin 2% cream ^{MO}	Up to \$3.30 (Tier 1)	
myorisan 10 mg, 20 mg, 30 mg, 40 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
neomy-polymyxin b 40 mg/ml amp ^{MO}	Up to \$3.30 (Tier 1)	
nyamyc 100,000 unit/gram topical powder ^{MO}	Up to \$3.30 (Tier 1)	
nyata 100,000 unit/gram topical powder ^{MO}	Up to \$3.30 (Tier 1)	
nystatin 100,000 unit/gm cream; nystatin 100,000 unit/gm powd; nystatin 100,000 units/gm oint ^{MO}	Up to \$3.30 (Tier 1)	
nystatin-triamcinolone cream; nystatin-triamcinolone ointm ^{MO}	Up to \$3.30 (Tier 1)	
nystop 100,000 unit/gram topical powder ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
oralone 0.1 % dental paste ^{MO}	Up to \$3.30 (Tier 1)	
PANRETIN 0.1 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	
permethrin 5% cream ^{MO}	Up to \$3.30 (Tier 1)	
podofilox 0.5% topical soln ^{MO}	Up to \$3.30 (Tier 1)	
prednicarbate 0.1% cream; prednicarbate 0.1% ointment ^{MO}	Up to \$3.30 (Tier 1)	
PRO COMFORT ALCOHOL PADS ^{MO}	Up to \$3.30 (Tier 1)	
procto-med hc 2.5 % topical cream perineal applicator ^{MO}	Up to \$3.30 (Tier 1)	
procto-pak 1 % topical cream perineal applicator ^{MO}	Up to \$3.30 (Tier 1)	
proctosol hc 2.5 % topical cream perineal applicator ^{MO}	Up to \$3.30 (Tier 1)	
proctozone-hc 2.5 % topical cream perineal applicator ^{MO}	Up to \$3.30 (Tier 1)	
RECTIV 0.4 % (W/W) OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
REG GRANEX 0.01 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	
SANTYL 250 UNIT/GRAM TOPICAL OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	
silver sulfadiazine 1% cream ^{MO}	Up to \$3.30 (Tier 1)	
SORIATANE 10 MG, 17.5 MG, 25 MG CAPSULE ^{MO}	Up to \$8.25 (Tier 2)	
SSD 1 % TOPICAL CREAM ^{MO}	Up to \$3.30 (Tier 1)	
sulfacetamide sod 10% top susp ^{MO}	Up to \$3.30 (Tier 1)	
SURE COMFORT ALCOHOL PREP PADS ^{MO}	Up to \$3.30 (Tier 1)	
SURE-PREP ALCOHOL PREP PADS ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>tacrolimus 0.03% ointment; tacrolimus 0.1% ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
TARGRETIN 1 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>tazarotene 0.1% cream</i> ^{MO}	Up to \$3.30 (Tier 1)	PA
TAZORAC 0.05 %, 0.1 % TOPICAL CREAM; TAZORAC 0.05 %, 0.1 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	PA
<i>terconazole 0.4% cream; terconazole 0.8% cream; terconazole 80 mg suppository</i> ^{MO}	Up to \$3.30 (Tier 1)	
THERMAZENE 1% CREAM ^{MO}	Up to \$8.25 (Tier 2)	
TOLAK 4 % TOPICAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	
<i>tretinoin 0.01% gel; tretinoin 0.025% cream; tretinoin 0.025% gel; tretinoin 0.05% cream; tretinoin 0.1% cream</i> ^{MO}	Up to \$3.30 (Tier 1)	PA
<i>triamcinolone 0.025% cream; triamcinolone 0.025% lotion; triamcinolone 0.025% oint; triamcinolone 0.1% cream; triamcinolone 0.1% lotion; triamcinolone 0.1% ointment; triamcinolone 0.1% paste; triamcinolone 0.5% cream; triamcinolone 0.5% ointment</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>triderm 0.1 %, 0.5 % topical cream</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>u-cort 1% cream</i> ^{MO}	Up to \$3.30 (Tier 1)	
ULTILET ALCOHOL SWAB ^{MO}	Up to \$3.30 (Tier 1)	
UVADEX 20 MCG/ML INJECTION SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	B vs D
VALCHLOR 0.016 % TOPICAL GEL ^{MO}	Up to \$8.25 (Tier 2)	PA,QL (60 per 28 days)
VEREGEN 15 % TOPICAL OINTMENT ^{MO}	Up to \$8.25 (Tier 2)	
WEBCOL TOPICAL PADS ^{MO}	Up to \$3.30 (Tier 1)	
<i>zenatane 10 mg, 20 mg, 30 mg, 40 mg capsule</i> ^{MO}	Up to \$3.30 (Tier 1)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ZOVIRAX 5 % TOPICAL CREAM ^{MO}	Up to \$8.25 (Tier 2)	PA

SMOOTH MUSCLE RELAXANTS - Drugs used to treat bladder problems

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>aminophylline 250 mg/10 ml vial</i> ^{MO}	Up to \$3.30 (Tier 1)	
ELIXOPHYLLIN 80 MG/15 ML ORAL ELIXIR ^{MO}	Up to \$8.25 (Tier 2)	
<i>flavoxate hcl 100 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
MYRBETRIQ 25 MG, 50 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>oxybutynin 5 mg tablet; oxybutynin 5 mg/5 ml syrup</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>oxybutynin cl er 10 mg, 15 mg, 5 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>theophylline er 100 mg, 200 mg, 300 mg, 450 mg tab; theophylline er 100 mg, 200 mg, 300 mg, 450 mg tablet; theophylline er 400 mg, 600 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	
<i>tolterodine tart er 2 mg, 4 mg cap</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (30 per 30 days)
<i>tolterodine tartrate 1 mg, 2 mg tab</i> ^{MO}	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
TOVIAZ 4 MG, 8 MG TABLET, EXTENDED RELEASE ^{MO}	Up to \$8.25 (Tier 2)	QL (30 per 30 days)
<i>tropium chloride 20 mg tablet</i> ^{MO}	Up to \$3.30 (Tier 1)	

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VITAMINS - Drugs used to treat vitamin deficiencies

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
calcitriol 0.25 mcg, 0.5 mcg capsule; calcitriol 1 mcg/ml, 1 mcg/ml ampul; calcitriol 1 mcg/ml, 1 mcg/ml solution ^{MO}	Up to \$3.30 (Tier 1)	
doxercalciferol 0.5 mcg, 1 mcg, 2.5 mcg cap; doxercalciferol 0.5 mcg, 1 mcg, 2.5 mcg capsule; doxercalciferol 4 mcg/2 ml vial ^{MO}	Up to \$3.30 (Tier 1)	
HECTOROL 2 MCG/ML (1 ML) INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	
paricalcitol 1 mcg, 2 mcg, 4 mcg capsule; paricalcitol 10 mcg/2 ml vial; paricalcitol 2 mcg/ml, 2 mcg/ml, 5 mcg/ml, 5 mcg/ml vial ^{MO}	Up to \$3.30 (Tier 1)	
prn ob+dha 27 mg-1 mg-50 mg-250 mg oral pack ^{MO}	Up to \$3.30 (Tier 1)	
pr natal 400 29 mg-1 mg-400 mg oral pack ^{MO}	Up to \$3.30 (Tier 1)	
pr natal 400 ec 29 mg-1 mg-400 mg tablet-capsule, delayed release ^{MO}	Up to \$3.30 (Tier 1)	
pr natal 430 29 mg iron-1 mg-430 mg oral pack ^{MO}	Up to \$3.30 (Tier 1)	
pr natal 430 ec 29 mg-1 mg-430 mg tablet-capsule, delayed release ^{MO}	Up to \$3.30 (Tier 1)	
PRENATABS FA 29 MG-1 MG TABLET ^{MO}	Up to \$3.30 (Tier 1)	
prenatal plus (calcium carbonate) 27 mg iron-1 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
thrivite-19 29 mg iron-1 mg-25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
ZEMPLAR 2 MCG/ML, 5 MCG/ML INTRAVENOUS SOLUTION ^{MO}	Up to \$8.25 (Tier 2)	

NON PART D DRUGS

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
adipex-p 37.5 mg capsule(*) ^{MO}	\$0 (Tier 3)	
ADIPEX-P 37.5 MG TABLET(*) ^{MO}	\$0 (Tier 3)	
AQUASOL A 50,000 UNIT/ML INTRAMUSCULAR SOLUTION(*) ^{MO}	\$0 (Tier 3)	
BELVIQ 10 MG TABLET(*) ^{MO}	\$0 (Tier 3)	QL (60 per 30 days)
BELVIQ XR 20 MG TABLET, EXTENDED RELEASE(*) ^{MO}	\$0 (Tier 3)	QL (30 per 30 days)

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
benzonatate 100 mg capsule(*) ^{MO}	\$0 (Tier 3)	
benzphetamine hcl 50 mg tablet(*) ^{MO}	\$0 (Tier 3)	
bromfed dm 2 mg-30 mg-10 mg/5 ml syrup(*) ^{MO}	\$0 (Tier 3)	
bromphenir-pseudoephed-dm syr(*) ^{MO}	\$0 (Tier 3)	
calcium chloride 10% syringe(*) ^{MO}	\$0 (Tier 3)	
chromium cl 40 mcg/10 ml vial(*) ^{MO}	\$0 (Tier 3)	
CONTRAVE 8 MG-90 MG TABLET,EXTENDED RELEASE(*) ^{MO}	\$0 (Tier 3)	QL (120 per 30 days)
copper chloride 0.4 mg/ml intravenous solution(*) ^{MO}	\$0 (Tier 3)	
cyanocobalamin 1,000 mcg/ml(*) ^{MO}	\$0 (Tier 3)	
diethylpropion 25 mg tablet; diethylpropion er 75 mg tablet(*) ^{MO}	\$0 (Tier 3)	
DRISDOL 50,000 UNITS CAPSULE(*) ^{MO}	\$0 (Tier 3)	
vit d2 1.25 mg (50,000 unit)(*) ^{MO}	\$0 (Tier 3)	
FERAHEME 510 MG/17 ML (30 MG/ML) INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
FERRLECIT 62.5 MG/5 ML INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
folic acid 1 mg tablet; folic acid 5 mg/ml vial(*) ^{MO}	\$0 (Tier 3)	
hydrocodone-chlorphen er susp(*) ^{MO}	\$0 (Tier 3)	
hydrocodone-homatropine 5-1.5; hydrocodone-homatropine syrup(*) ^{MO}	\$0 (Tier 3)	
hydromet 5 mg-1.5 mg/5 ml syrup(*) ^{MO}	\$0 (Tier 3)	
hydroxocobalamin 1,000 mcg/ml(*) ^{MO}	\$0 (Tier 3)	
INFED 100 MG/2 ML (50 MG/ML) INJECTION SOLUTION(*) ^{MO}	\$0 (Tier 3)	
INFUVITE ADULT 3300 UNIT-150 MCG/10 ML INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
INFUVITE PEDIATRIC 80 MG-400 UNIT-200 MCG/5 ML INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
M.V.I. ADULT 3,300 UNIT-150 MCG/10 ML INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
M.V.I. PEDIATRIC 80 MG-400 UNIT-200 MCG INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
M.V.I.-12 (WITHOUT VIT K) 3,300 UNIT-200 UNIT/10 ML INTRAVENOUS SOLN(*) ^{MO}	\$0 (Tier 3)	
manganese 1 mg/10 ml vial(*) ^{MO}	\$0 (Tier 3)	
MEPHYTON 5 MG TABLET(*) ^{MO}	\$0 (Tier 3)	
phendimetrazine 35 mg tablet; phendimetrazine er 105 mg cap(*) ^{MO}	\$0 (Tier 3)	
phentermine 15 mg, 30 mg, 37.5 mg capsule; phentermine 37.5 mg tablet(*) ^{MO}	\$0 (Tier 3)	
promethazine vc-codeine 6.25 mg-5 mg-10 mg/5 ml syrup(*) ^{MO}	\$0 (Tier 3)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>promethazine-codeine syrup</i> (*) ^{MO}	\$0 (Tier 3)	
<i>promethazine-dm syrup</i> (*) ^{MO}	\$0 (Tier 3)	
<i>pyridoxine 100 mg/ml vial</i> (*) ^{MO}	\$0 (Tier 3)	
QSYMIA 11.25 MG-69 MG CAPSULE, EXTENDED RELEASE; QSYMIA 15 MG-92 MG CAPSULE, EXTENDED RELEASE; QSYMIA 3.75 MG-23 MG CAPSULE, EXTENDED RELEASE; QSYMIA 7.5 MG-46 MG CAPSULE, EXTENDED RELEASE(*) ^{MO}	\$0 (Tier 3)	QL (30 per 30 days)
SAXENDA 3 MG/0.5 ML (18 MG/3 ML) SUBCUTANEOUS PEN INJECTOR(*) ^{MO}	\$0 (Tier 3)	
SUPRENZA ODT 15 MG, 30 MG TABLET(*) ^{MO}	\$0 (Tier 3)	
SUPRENZA ODT 37.5 MG TABLET(*) ^{MO}	\$0 (Tier 3)	QL (30 per 30 days)
TESSALON PERLES 100 MG CAPSULE(*) ^{MO}	\$0 (Tier 3)	
<i>thiamine 200 mg/2 ml vial</i> (*) ^{MO}	\$0 (Tier 3)	
TUSSICAPS 10 MG-8 MG CAPSULE,EXTENDED RELEASE; TUSSICAPS 5 MG-4 MG CAPSULE,EXTENDED RELEASE(*) ^{MO}	\$0 (Tier 3)	
TUSSIONEX PENNKINETIC ER 10 MG-8 MG/5 ML SUSPENSION,EXTENDED RELEASE(*) ^{MO}	\$0 (Tier 3)	
VENOFER 100 MG IRON/5 ML, 200 MG IRON/10 ML, 50 MG IRON/2.5 ML INTRAVENOUS SOLUTION(*) ^{MO}	\$0 (Tier 3)	
<i>vitamin d2 50,000 unit capsule</i> (*) ^{MO}	\$0 (Tier 3)	
<i>vitamin k 1 mg/0.5 ml injection solution</i> (*) ^{MO}	\$0 (Tier 3)	
<i>vitamin k1 10 mg/ml injection solution</i> (*) ^{MO}	\$0 (Tier 3)	
XENICAL 120 MG CAPSULE(*) ^{MO}	\$0 (Tier 3)	
<i>zinc chloride 10 mg/10 ml vial</i> (*) ^{MO}	\$0 (Tier 3)	

OVER THE COUNTER DRUGS - Over the Counter Drugs

DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>1-day 6.5 % vaginal ointment</i>	\$0 (Tier 4)	
<i>cvs 12hr cold relief caplet</i>	\$0 (Tier 4)	
<i>12 hour decongestant er 120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>12 hour nasal relief spray 0.05 %</i>	\$0 (Tier 4)	
<i>12 hour nasal spray 0.05 %</i>	\$0 (Tier 4)	
<i>12-hour cough relief 30 mg/5 ml oral suspension,extended release</i>	\$0 (Tier 4)	
<i>24 hour allergy relief 50 mcg/actuation nasal spray,suspension</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
24hour allergy 10 mg tablet	\$0 (Tier 4)	
3 day vaginal 200 mg/5 gram (4 %) cream	\$0 (Tier 4)	
3-day vaginal 2 % cream	\$0 (Tier 4)	
8 hour pain reliever 650 mg tablet,extended release	\$0 (Tier 4)	
A AND D (LAN, PET) TOPICAL OINTMENT	\$0 (Tier 4)	
ABREVA 10 % TOPICAL CREAM	\$0 (Tier 4)	
ACEPHEN 120 MG RECTAL SUPPOSITORY	\$0 (Tier 4)	
acephen 325 mg, 650 mg rectal suppository	\$0 (Tier 4)	
acetadryl 25 mg-500 mg tablet	\$0 (Tier 4)	
acetaminophen 120 mg, 650 mg suppos; acetaminophen 160 mg/5 ml (5 ml), 325 mg/10.15 ml, 650 mg/20.3 ml; acetaminophen 160 mg/5 ml elx; acetaminophen 160 mg/5 ml liq; acetaminophen 160 mg/5 ml sol; acetaminophen 160 mg/5 ml susp; acetaminophen 325 mg, 500 mg, 80 mg rapid tab; acetaminophen 80 mg tab chew; acetaminophen 80 mg/0.8 ml drp; acetaminophen er 650 mg tablet; eq acetaminophen 325 mg, 500 mg, 80 mg gelcap; eq acetaminophen 325 mg, 500 mg, 80 mg tablet	\$0 (Tier 4)	
acetaminophen extra strength 500 mg tablet	\$0 (Tier 4)	
acetaminophen pain relief 500 mg tablet	\$0 (Tier 4)	
acetaminophen pm 25 mg-500 mg tablet	\$0 (Tier 4)	
acetaminophen pm extra strength 25 mg-500 mg tablet	\$0 (Tier 4)	
acid control (ranitidine) 150 mg tablet	\$0 (Tier 4)	
acid controller 10 mg, 20 mg tablet	\$0 (Tier 4)	
acid controller complete 10 mg-800 mg-165 mg chewable tablet	\$0 (Tier 4)	
acid gone antacid 95 mg-358 mg/15 ml oral suspension	\$0 (Tier 4)	
acid gone antacid extra strength 160 mg-105 mg chewable tablet	\$0 (Tier 4)	
acid reducer (cimetidine) 200 mg tablet	\$0 (Tier 4)	
acid reducer (famotidine) 10 mg, 20 mg tablet	\$0 (Tier 4)	
acid reducer (ranitidine) 150 mg, 75 mg tablet	\$0 (Tier 4)	
acid reducer complete (famotidine) 10 mg-800 mg-165 mg chewable tablet	\$0 (Tier 4)	
pv acid relief 200 mg tablet	\$0 (Tier 4)	
acne cleansing bar 10 %	\$0 (Tier 4)	
acne control cleanser 10 % cream	\$0 (Tier 4)	
acne foaming wash 10 % topical cleanser	\$0 (Tier 4)	
acne medication 10 % topical gel	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ACNE MEDICATION 10 %, 5 % LOTION; ACNE MEDICATION 5 % TOPICAL GEL	\$0 (Tier 4)	
<i>acne treatment (benzoyl peroxide) 10 % topical gel</i>	\$0 (Tier 4)	
<i>acne vanishing 10 % cream</i>	\$0 (Tier 4)	
<i>acne-clear 10 % topical gel</i>	\$0 (Tier 4)	
<i>acticon (dexbrompheniramine-pseudoephedrine) 2 mg-60 mg tablet</i>	\$0 (Tier 4)	
<i>actinel 30 mg-15 mg-200 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>actinel pediatric 15 mg-5 mg-50 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>actisep 2 %-0.5 %-0.1 % mucosal spray</i>	\$0 (Tier 4)	
<i>added strength headache relief 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>adt robitussin peak cld dm max</i>	\$0 (Tier 4)	
<i>adult cough formula dm max 10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>adult nasal decongestant 15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
ADT ROBITUSSIN NGT M-S COLD LQ	\$0 (Tier 4)	
<i>adult robitussin peak cold dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>adult tussin cough congestion dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>adult tussin dm 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>adult tussin multi-symptom cold 5 mg-10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>adult wal-tussin 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>adult wal-tussin dm max 10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>advanced antacid-antigas 200 mg-200 mg-20 mg/5 ml oral suspension; advanced antacid-antigas 400 mg-400 mg-40 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>advanced exfoliating cleanser 5 % topical</i>	\$0 (Tier 4)	
<i>advanced formula eye drops 0.05 %-0.1 %-1 %-1 %</i>	\$0 (Tier 4)	
<i>advil 100 mg chewable tablet; advil 100 mg tablet</i>	\$0 (Tier 4)	
ADVIL 200 MG TABLET	\$0 (Tier 4)	
ADVIL ALLERGY SINUS 2 MG-30 MG-200 MG TABLET	\$0 (Tier 4)	
ADVIL ALLERGY-CONGESTION RELIEF 4 MG-10 MG-200 MG TABLET	\$0 (Tier 4)	
ADVIL COLD AND SINUS 30 MG-200 MG CAPSULE; ADVIL COLD AND SINUS 30 MG-200 MG TABLET	\$0 (Tier 4)	
ADVIL LIQUI-GEL 200 MG CAPSULE	\$0 (Tier 4)	
ADVIL MIGRAINE 200 MG CAPSULE	\$0 (Tier 4)	
ADVIL PM 200 MG-38 MG TABLET	\$0 (Tier 4)	
ADVIL PM LIQUI-GELS 200 MG-25 MG CAPSULE	\$0 (Tier 4)	
<i>af 1 % topical spray powder</i>	\$0 (Tier 4)	
AFRIN (OXYMETAZOLINE) 0.05 % NASAL SPRAY	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>afirin no drip (oxymetazoline) 0.05 % nasal mist</i>	\$0 (Tier 4)	
AFRIN SINUS (OXYMETAZOLINE) 0.05 % NASAL SPRAY	\$0 (Tier 4)	
<i>aftera 1.5 mg tablet</i>	\$0 (Tier 4)	
ALA-HIST DM LIQUID	\$0 (Tier 4)	
<i>ala-hist ir 2 mg tablet</i>	\$0 (Tier 4)	
ALA-HIST PE 2 MG-10 MG TABLET	\$0 (Tier 4)	
ALA SEB SHAMPOO	\$0 (Tier 4)	
<i>alavert 10 mg disintegrating tablet</i>	\$0 (Tier 4)	
<i>alavert d-12 allergy-sinus 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	
ALAWAY 0.025 % (0.035 %) EYE DROPS	\$0 (Tier 4)	
ALCOHOL, RUBBING 70 % SOLUTION	\$0 (Tier 4)	
<i>aler-cap 25 mg capsule</i>	\$0 (Tier 4)	
<i>alertness aid 200 mg tablet</i>	\$0 (Tier 4)	
ALEVAZOL 1 % TOPICAL OINTMENT	\$0 (Tier 4)	
ALEVE 220 MG CAPSULE; ALEVE 220 MG TABLET	\$0 (Tier 4)	
ALEVE COLD AND SINUS 220 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ALEVE SINUS AND HEADACHE 220 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ALEVE-D SINUS AND COLD 220 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ALEVE-D SINUS AND HEADACHE 220 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ALKA-SELTZER ORIGINAL 325 MG-1,916 MG-1,000 MG EFFERVESCENT TABLET	\$0 (Tier 4)	
<i>alka-seltzer plus allergy 25 mg tablet</i>	\$0 (Tier 4)	
ALKA-SELTZER PLUS COLD (PE) 2 MG-7.8 MG-325 MG EFFERVESCENT TABLET	\$0 (Tier 4)	
<i>alka-seltzer plus day 5 mg-10 mg-325 mg capsule</i>	\$0 (Tier 4)	
<i>alka-seltzer plus mucus-congestion 10 mg-200 mg capsule</i>	\$0 (Tier 4)	
ALKA-SELTZER PLUS NIGHT 6.25 MG-5 MG-10 MG-325 MG CAPSULE	\$0 (Tier 4)	
ALKA-SELTZER PLUS SINUS-ALLERGY-CGH 6.25 MG-5 MG-10 MG-325 MG CAPSULE	\$0 (Tier 4)	
<i>alka-seltzer plus sinus-cough 5 mg-10 mg-325 mg capsule</i>	\$0 (Tier 4)	
<i>all day allergy (cetirizine) 10 mg chewable tablet; all day allergy (cetirizine) 10 mg tablet</i>	\$0 (Tier 4)	
<i>all day allergy relief (cetirizine) 10 mg tablet</i>	\$0 (Tier 4)	
<i>all day allergy-d 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>all day pain relief sinus and cold 220 mg-120 mg tablet,extend release</i>	\$0 (Tier 4)	
<i>all day relief 220 mg tablet</i>	\$0 (Tier 4)	
<i>all-nite cold-flu 6.25 mg-15 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
ALLEGRA ALLERGY 180 MG, 60 MG TABLET	\$0 (Tier 4)	
ALLEGRA-D 12 HOUR 60 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ALLER-CHLOR 2 MG/5 ML SYRUP	\$0 (Tier 4)	
<i>aller-ease 180 mg, 60 mg tablet</i>	\$0 (Tier 4)	
<i>aller-fex 180 mg tablet</i>	\$0 (Tier 4)	
<i>aller-flo 50 mcg/actuation nasal spray,suspension</i>	\$0 (Tier 4)	
<i>aller-g-time 25 mg tablet</i>	\$0 (Tier 4)	
<i>aller-tec 10 mg tablet</i>	\$0 (Tier 4)	
<i>aller-tec d 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>allerclear 10 mg tablet</i>	\$0 (Tier 4)	
<i>allerclear d-12hr 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>allerclear d-24hr 10 mg-240 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>sb allerfed cold-allergy tab</i>	\$0 (Tier 4)	
<i>allergy 25 mg tablet</i>	\$0 (Tier 4)	
<i>allergy (chlorpheniramine) 4 mg tablet</i>	\$0 (Tier 4)	
<i>allergy (diphenhydramine) 25 mg capsule; allergy (diphenhydramine) 25 mg tablet</i>	\$0 (Tier 4)	
<i>allergy 4-hour 4 mg tablet</i>	\$0 (Tier 4)	
<i>allergy and cold pe 12.5 mg-5 mg-325 mg tablet</i>	\$0 (Tier 4)	
<i>allergy and congestion relief 10 mg-240 mg tablet,extend release 24 hr; allergy and congestion relief 5 mg-120 mg tablet,extend release 12 hr</i>	\$0 (Tier 4)	
<i>allergy complete-d 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>pv allergy 2% cream</i>	\$0 (Tier 4)	
<i>allergy d-12 5 mg-120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>allergy eye (ketotifen) 0.025 % (0.035 %) drops</i>	\$0 (Tier 4)	
<i>allergy eye (naphazoline-pheniramine) 0.025 %-0.3 % drops</i>	\$0 (Tier 4)	
<i>ra allergy multi-symptom cplt</i>	\$0 (Tier 4)	
<i>allergy medication 25 mg capsule</i>	\$0 (Tier 4)	
<i>allergy medicine 12.5 mg/5 ml oral liquid; allergy medicine 25 mg capsule; allergy medicine 25 mg tablet</i>	\$0 (Tier 4)	
<i>allergy multi-symptom 2 mg-5 mg-325 mg tablet</i>	\$0 (Tier 4)	
<i>allergy plus severe sinus ha 25 mg-5 mg-325 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
allergy relief (cetirizine) 1 mg/ml oral solution; allergy relief (cetirizine) 10 mg tablet	\$0 (Tier 4)	
allergy relief (clemastine) 1.34 mg tablet	\$0 (Tier 4)	
allergy relief (fexofenadine) 180 mg, 60 mg tablet	\$0 (Tier 4)	
allergy relief (fluticasone) 50 mcg/actuation nasal spray,suspension	\$0 (Tier 4)	
allergy relief (loratadine) 10 mg, 10 mg disintegrating tablet; allergy relief (loratadine) 10 mg, 10 mg tablet; allergy relief (loratadine) 5 mg/5 ml oral solution	\$0 (Tier 4)	
allergy relief d-24 10 mg-240 mg tablet,extended release	\$0 (Tier 4)	
allergy relief d12 5 mg-120 mg tablet,extended release	\$0 (Tier 4)	
allergy relief multi-symptom 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
allergy relief(chlorpheniramine-acetaminophen) 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
allergy relief (chlorpheniramine) 4 mg tablet; allergy relief (chlorpheniramine) er 12 mg tablet,extended release	\$0 (Tier 4)	
allergy relief (diphenhydramine) 12.5 mg/5 ml oral liquid; allergy relief (diphenhydramine) 25 mg capsule; allergy relief (diphenhydramine) 25 mg tablet	\$0 (Tier 4)	
allergy relief and nasal decongestant 10 mg-240 mg tablet,extended rel	\$0 (Tier 4)	
allergy relief-d (loratadine) 5 mg-120 mg tablet,extended release	\$0 (Tier 4)	
allergy relief-d (fexofenadine) 60 mg-120 mg tablet,extended release	\$0 (Tier 4)	
pv allergy rlf-sinus headache	\$0 (Tier 4)	
allergy sinus headache (pe) 12.5 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
allergy sinus pe 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
allergy plus congestn relief-d(cetiriz) 5 mg-120 mg tablet,ext.release	\$0 (Tier 4)	
allergy-congestion relief-d (fexo) 60 mg-120 mg tablet,extend release	\$0 (Tier 4)	
allergy-congestion relief-d 10 mg-240 mg tablet,extended release 24 hr; allergy-congestion relief-d 5 mg-120 mg tablet,extended release 12 hr	\$0 (Tier 4)	
allergy-time 4 mg tablet	\$0 (Tier 4)	
allerhist-1 1.34 mg tablet	\$0 (Tier 4)	
ALLFEN 400 MG TABLET	\$0 (Tier 4)	
allfen dm 20 mg-400 mg tablet	\$0 (Tier 4)	
ALLI 60 MG CAPSULE	\$0 (Tier 4)	
ALMACONE 200 MG-200 MG-20 MG/5 ML ORAL SUSPENSION; ALMACONE 200 MG-200 MG-25 MG CHEWABLE TABLET	\$0 (Tier 4)	
almacone-2 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
aloe burn relief 0.5 % topical spray	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ALOE VESTA 36% PROTECTIVE SPRY; ALOE VESTA 43 % TOPICAL OINTMENT	\$0 (Tier 4)	
aloe vesta antifungal (miconazole) 2 % topical ointment	\$0 (Tier 4)	
ALOE VESTA SKIN CONDITIONER 2	\$0 (Tier 4)	
alophen 5 mg tablet,delayed release	\$0 (Tier 4)	
altachlore 5 % eye drops; altachlore 5 % eye ointment	\$0 (Tier 4)	
altamist 0.65 % nasal spray aerosol	\$0 (Tier 4)	
altazine 0.05 % eye drops	\$0 (Tier 4)	
altipres 5 mg-10 mg-200 mg/5 ml oral liquid	\$0 (Tier 4)	
altipres-b 4 mg-10 mg-20 mg/5 ml oral liquid	\$0 (Tier 4)	
aluminum hydroxide gel	\$0 (Tier 4)	
ambi 10peh-4cpm tablet	\$0 (Tier 4)	
ambi 60pse-400gfn tablet	\$0 (Tier 4)	
ambi 60pse-4cpm tablet	\$0 (Tier 4)	
amlactin 12 % lotion	\$0 (Tier 4)	
gnp iodides tincture	\$0 (Tier 4)	
ammonium lactate 12% cream; ammonium lactate 12% lotion ^{MO}	Up to \$3.30 (Tier 1)	
anecream5 5 % topical	\$0 (Tier 4)	
anefrin 0.05 % nasal mist; anefrin 0.05 % nasal spray	\$0 (Tier 4)	
antacid (calcium carbonate) 200 mg calcium (500 mg), 200 mg calcium (500 mg), 215 mg calcium (500 mg) chewable tablet	\$0 (Tier 4)	
antacid anti-gas 200 mg-200 mg-20 mg/5 ml oral suspension; antacid anti-gas 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid anti-gas (calcium carb-simeth) 1,000 mg-60 mg chewable tablet	\$0 (Tier 4)	
antacid anti-gas double str 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid calcium 215 mg calcium (500 mg) chewable tablet	\$0 (Tier 4)	
antacid extra strength (mag carb-al hyd) 160 mg-105 mg chewable tablet	\$0 (Tier 4)	
antacid extra strength (calcium carb) 300 mg (750 mg) chewable tablet	\$0 (Tier 4)	
antacid extra-strength 200 mg-200 mg-20 mg/5 ml oral suspension; antacid extra-strength 300 mg (750 mg) chewable tablet; pv antacid extra strength susp	\$0 (Tier 4)	
antacid liquid 200 mg-200 mg-20 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid m 200 mg-200 mg-20 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid maximum strength 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid plus anti-gas 200 mg-200 mg-20 mg/5 ml oral suspension; antacid plus anti-gas 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
antacid regular strength 200 mg-200 mg-20 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid ultra strength 1,177 mg, 400 mg calcium (1,000 mg) chewable tablet	\$0 (Tier 4)	
cvs antacid-simethicone liquid	\$0 (Tier 4)	
antacid-antigas 200 mg-200 mg-20 mg/5 ml oral suspension; antacid-antigas 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
antacid-simethicone 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
anti-dandruff 1 % shampoo	\$0 (Tier 4)	
anti-dandruff (coal tar) 0.5 % shampoo	\$0 (Tier 4)	
anti-diarrhea 2 mg tablet	\$0 (Tier 4)	
anti-diarrheal 262 mg/15 ml oral suspension	\$0 (Tier 4)	
anti-diarrheal (loperamide) 1 mg/5 ml, 1 mg/7.5 ml oral liquid; anti-diarrheal (loperamide) 2 mg tablet	\$0 (Tier 4)	
cvs anti-fungal 2% powder; pv anti-fungal 2% liquid spray	\$0 (Tier 4)	
anti-gas ultra strength 180 mg capsule	\$0 (Tier 4)	
anti-itch (hydrocortisone) 1 % topical cream; anti-itch (hydrocortisone) 1 % topical ointment	\$0 (Tier 4)	
anti-itch (menthol/camphor) 0.5 %-0.5 % lotion	\$0 (Tier 4)	
anti-itch (diphenhydramine) with zinc 2 %-0.1 % topical cream	\$0 (Tier 4)	
anti-nausea oral solution	\$0 (Tier 4)	
antibiotic (bacitracin zinc) 500 unit/gram topical ointment	\$0 (Tier 4)	
antibiotic(neomy-bacit-polym) 3.5 mg-400 unit-5,000 unit/gram top oint	\$0 (Tier 4)	
antibiotic plus (pramoxine) 3.5 mg-10,000 unit-10 mg/gram top cream	\$0 (Tier 4)	
antibiotic plus pain relief 3.5 mg-10,000 unit-10 mg/gram top cream	\$0 (Tier 4)	
antibiotic-pain relief(bacit)3.5 mg-500 unit-10,000 unit/gram ointment	\$0 (Tier 4)	
antifungal (clotrimazole) 1 % topical cream	\$0 (Tier 4)	
antifungal (terbinafine) 1 % topical cream	\$0 (Tier 4)	
antifungal (tolnaftate) 1 % topical cream; antifungal (tolnaftate) 1 % topical powder; antifungal (tolnaftate) 1 % topical spray	\$0 (Tier 4)	
antifungal cream 2 % topical	\$0 (Tier 4)	
antifungal spray 1 % topical powder	\$0 (Tier 4)	
antihistamine 25 mg capsule; antihistamine 25 mg tablet	\$0 (Tier 4)	
antiseptic 10 % topical solution	\$0 (Tier 4)	
antiseptic skin cleanser (chlorhexidine) 4 % liquid	\$0 (Tier 4)	
antitussive dm 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
anu-med 0.25 % rectal suppository	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ap-hist dm 4 mg-7.5 mg-15 mg/5 ml oral liquid	\$0 (Tier 4)	
aprodine 2.5 mg-60 mg tablet	\$0 (Tier 4)	
arthritis pain relief (acetaminophen) er 650 mg tablet,extend release	\$0 (Tier 4)	
arthritis pain reliever 650 mg tablet,extended release	\$0 (Tier 4)	
ARTIFICIAL TEARS (PETROLATUM/MINERAL OIL) 83 %-15 % EYE OINTMENT	\$0 (Tier 4)	
artificial tears (pf) 0.1 %-0.3 % drops in a dropperette	\$0 (Tier 4)	
artificial tears (dextran 70-hypromellose) 0.1 %-0.3 % eye drops; artificial tears (dextran 70-hypromellose) eye drops	\$0 (Tier 4)	
pv artificial tears	\$0 (Tier 4)	
artificial tears (polyvinyl alcohol/povidone) 0.5 %-0.6 % eye drops	\$0 (Tier 4)	
aspir-81 81 mg tablet,delayed release	\$0 (Tier 4)	
aspir-low 81 mg tablet,delayed release	\$0 (Tier 4)	
aspir-trin 325 mg tablet,delayed release	\$0 (Tier 4)	
aspirin 81 mg chewable tablet; aspirin ec 325 mg, 325 mg, 81 mg tablet; gnp aspirin 325 mg, 325 mg, 81 mg tablet; sm aspirin ec 325 mg, 325 mg, 81 mg tablet	\$0 (Tier 4)	
aspirin childrens 81 mg chewable tablet	\$0 (Tier 4)	
aspirin low dose 81 mg tablet,delayed release	\$0 (Tier 4)	
cvs buffered aspirin 325 mg tb	\$0 (Tier 4)	
ASTHMANEFRIN REFILL 2.25 % SOLUTION FOR NEBULIZATION	\$0 (Tier 4)	
astringent 952 mg-1,347 mg topical powder in packet	\$0 (Tier 4)	
athenol 325 mg tablet	\$0 (Tier 4)	
athlete's foot 2 % powder; athlete's foot 2 % topical spray powder	\$0 (Tier 4)	
athlete's foot (clotrimazole) 1 % topical cream	\$0 (Tier 4)	
athlete's foot (tolnaftate) 1 % topical cream; athlete's foot (tolnaftate) 1 % topical spray; athlete's foot (tolnaftate) 1 % topical spray powder	\$0 (Tier 4)	
athlete's foot af 1 % topical cream	\$0 (Tier 4)	
athletic foot cream 1 % topical	\$0 (Tier 4)	
AURO EARDROPS 6.5 %	\$0 (Tier 4)	
awake 200 mg tablet	\$0 (Tier 4)	
AYR SALINE 0.65 % NASAL SPRAY AEROSOL	\$0 (Tier 4)	
azolen tincture 2 % topical	\$0 (Tier 4)	
bacitracin 500 unit/gm ointmnt; bacitracin 500 unit/gm ointmnt	\$0 (Tier 4)	
bacitracin zinc ointment; bacitracin zn 500 unit/gm oint	\$0 (Tier 4)	
bacitracin-polymyxin ointment; bacitracin-polymyxin ointment	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>bacitracin plus 500 unit/gram topical ointment</i>	\$0 (Tier 4)	
<i>balamine dm (chlorpheniram-phenyleph) 2 mg-5 mg-10 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>ban-acid 300 mg (750 mg) chewable tablet</i>	\$0 (Tier 4)	
<i>banophen 12.5 mg/5 ml oral liquid; banophen 25 mg tablet; banophen 25 mg, 50 mg capsule</i>	\$0 (Tier 4)	
<i>banophen anti-itch 2 %-0.1 % topical cream</i>	\$0 (Tier 4)	
BAYER ASPIRIN 325 MG TABLET	\$0 (Tier 4)	
BAYER CHEWABLE LOW DOSE ASPIRIN 81 MG TABLET	\$0 (Tier 4)	
<i>baza antifungal 2 % topical cream</i>	\$0 (Tier 4)	
BENADRYL 25 MG CAPSULE	\$0 (Tier 4)	
<i>benadryl extra strength 2 %-0.1 % topical cream</i>	\$0 (Tier 4)	
BENZ-ALL TOPICAL LIQUID	\$0 (Tier 4)	
BENZEDREX NASAL INHALER	\$0 (Tier 4)	
<i>benzepro 5.3 %, 9.8 % topical foam</i>	\$0 (Tier 4)	
<i>benzoyl peroxide 10% gel; benzoyl peroxide 10% lotion; benzoyl peroxide 10% wash; benzoyl peroxide 2.5% gel; benzoyl peroxide 5% gel; benzoyl peroxide 5% wash; benzoyl peroxide 6% cleanser</i>	\$0 (Tier 4)	
<i>beta med 2 % shampoo</i>	\$0 (Tier 4)	
BETADINE 10 % TOPICAL SOLUTION	\$0 (Tier 4)	
<i>betasal 3 % shampoo</i>	\$0 (Tier 4)	
<i>betasept surgical scrub 4 % topical liquid</i>	\$0 (Tier 4)	
<i>betatemp 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
BIO T PRES 5 MG-10 MG-200 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>bio t pres-b 4 mg-10 mg-20 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>bio-b kids 4 mg-10 mg-15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>biocotron 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
BIOCOTRON-D 5 MG-10 MG-200 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>biodesp dm 5 mg-15 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
BION TEARS (PF) 0.1 %-0.3 % DROPS IN A DROPPERETTE	\$0 (Tier 4)	
<i>bionel 30 mg-15 mg-200 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>bionel pediatric 15 mg-5 mg-50 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>bisa-lax 5 mg tablet, delayed release</i>	\$0 (Tier 4)	
BISAC-EVAC 10 MG RECTAL SUPPOSITORY	\$0 (Tier 4)	
<i>bisacodyl 10 mg suppository; bisacodyl ec 5 mg tablet</i>	\$0 (Tier 4)	
<i>biscolax 10 mg rectal suppository</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
bismatrol 262 mg chewable tablet; bismatrol 262 mg/15 ml, 525 mg/15 ml oral suspension	\$0 (Tier 4)	
bismuth 262 mg chewable tablet; bismuth 262 mg tablet; bismuth 262 mg/15 ml oral suspension	\$0 (Tier 4)	
bismuth 262 mg tablet chew	\$0 (Tier 4)	
blis-to-sol (tolnaftate) 1 % topical solution	\$0 (Tier 4)	
BONINE 25 MG CHEWABLE TABLET	\$0 (Tier 4)	
bp 10 %, 5 % topical gel	\$0 (Tier 4)	
bp foam 5.3 %, 9.8 % topical	\$0 (Tier 4)	
bp wash 10 %, 5 % topical cleanser	\$0 (Tier 4)	
bpo-10 10 % topical cleanser	\$0 (Tier 4)	
bpo-5 5 % topical cleanser	\$0 (Tier 4)	
brohist d 4 mg-10 mg tablet	\$0 (Tier 4)	
bpm-dm-phen syrup	\$0 (Tier 4)	
bronchial asthma relief 12.5 mg-200 mg tablet	\$0 (Tier 4)	
BROTAPP 1 MG-15 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
BROTAPP DM 1 MG-15 MG-5 MG/5 ML ORAL ELIXIR	\$0 (Tier 4)	
BROVEX PEB DM 4 MG-10 MG-20 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
buffered aspirin 325 mg tablet	\$0 (Tier 4)	
bufferin 325 mg tablet	\$0 (Tier 4)	
burn relief 0.5 % topical spray	\$0 (Tier 4)	
burn relief with aloe 0.5 % topical spray	\$0 (Tier 4)	
cvs caffeine 200 mg tablet	\$0 (Tier 4)	
calaclear lotion	\$0 (Tier 4)	
CALADRYL 1 %-8 % LOTION	\$0 (Tier 4)	
calagesic 1 %-8 % lotion	\$0 (Tier 4)	
calahist clear lotion	\$0 (Tier 4)	
calahist with pramoxine 1 %-8 % lotion	\$0 (Tier 4)	
pv calamine lotion	\$0 (Tier 4)	
calamine medicated 1 %-8 % lotion	\$0 (Tier 4)	
sm calamine phenolated lotion	\$0 (Tier 4)	
calamine plus (pramoxine-calamine) 1 %-8 % lotion	\$0 (Tier 4)	
gnp calamine suspension	\$0 (Tier 4)	
gnp calamine suspension	\$0 (Tier 4)	
calcium 600 600 mg calcium (1,500 mg) tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
calcium 600 + d(3) 600 mg (1,500 mg)-200 unit tablet	\$0 (Tier 4)	
calcium 600 with vitamin d3 600 mg (1,500 mg)-200 unit tablet	\$0 (Tier 4)	
calcium antacid 200 mg calcium (500 mg), 300 mg (750 mg), 320 mg calcium (750 mg), 400 mg calcium (1,000 mg) chewable tablet	\$0 (Tier 4)	
calcium antacid tropical 300 mg (750 mg) chewable tablet	\$0 (Tier 4)	
calcium antacid ultra max st 400 mg calcium (1,000 mg) chewable tablet	\$0 (Tier 4)	
calcium 500 mg chewable tablet; calcium carb 1,250 mg/5 ml sus; gnp calcium 600 mg tablet; pv calcium 500 mg tablet	\$0 (Tier 4)	
calcium carb 500 mg tab chew; calcium carbonate 750 mg chew	\$0 (Tier 4)	
calcium 250-vit d3 125 tablet; calcium 500+d tablet chew; calcium 500-vit d3 200 tablet; calcium 600-vit d3 200 tablet; calcium 600-vit d3 800 caplet; calcium-500 mg tablet chewable; gnp calcium 500-vit d3 600 tab	\$0 (Tier 4)	
calcium polycarbophil 625 mg	\$0 (Tier 4)	
caldyphen 1 %-8 % lotion	\$0 (Tier 4)	
caldyphen clear lotion	\$0 (Tier 4)	
callergy clear lotion	\$0 (Tier 4)	
CAPCOF 2 MG-5 MG-10 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
CAPMIST DM 60 MG-15 MG-400 MG TABLET	\$0 (Tier 4)	
CAPRON DM 7.5 MG-7.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
carbamoxide ear drops 6.5 %	\$0 (Tier 4)	
CARRINGTON MOIST BARRIER-ZINC 10 %-78 % TOPICAL CREAM	\$0 (Tier 4)	
CARRINGTON MOISTURE BARRIER CR 61 % TOPICAL CREAM	\$0 (Tier 4)	
CEPACOL SORE THROAT (BENZOCAINE-MENTHOL) 15 MG-3.6 MG LOZENGES	\$0 (Tier 4)	
CEPACOL SORETHROAT-COUGH 5 MG-7.5 MG LOZENGES	\$0 (Tier 4)	
cetiri-d 5 mg-120 mg tablet,extended release	\$0 (Tier 4)	
cetirizine hcl 1 mg/ml soln ^{MO}	Up to \$3.30 (Tier 1)	QL (300 per 30 days)
cetirizine hcl 10 mg, 5 mg chew tab; cetirizine hcl 10 mg, 5 mg tablet	\$0 (Tier 4)	
cetirizine-pse er 5-120 mg tab	\$0 (Tier 4)	
cheratussin ac 10 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
cheratussin dac syrup	\$0 (Tier 4)	
chest congestion relief 400 mg tablet	\$0 (Tier 4)	
chest congestion relief + dm 20 mg-400 mg tablet	\$0 (Tier 4)	
pv chest congest relief cplt	\$0 (Tier 4)	
chest congestion relief pe 10 mg-400 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
chest rub 4.8 %-1.2 %-2.6 % topical ointment	\$0 (Tier 4)	
children's allergy relief (cetirizine) 1 mg/ml oral solution; children's allergy relief (cetirizine) 10 mg chewable tablet	\$0 (Tier 4)	
cvs child aspirin chew tab	\$0 (Tier 4)	
cvs chest congest + cough liq	\$0 (Tier 4)	
cvs cough & sore throat susp	\$0 (Tier 4)	
child delsym cough+chest dm lq	\$0 (Tier 4)	
CHILD DELSYM COUGH+COLD NIGHT	\$0 (Tier 4)	
child ibuprofen 100 mg/5 ml oral suspension	\$0 (Tier 4)	
children's mucinex chest congestion 100 mg/5 ml oral liquid	\$0 (Tier 4)	
CHILDREN MUCINEX CONGESTION-COUGH 2.5 MG-5 MG-100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
CHILD MUCINEX M-S COLD DAY-NITE 325 MG-12.5 MG-5 MG/10 ML(NT) ORAL LIQ	\$0 (Tier 4)	
CHILDREN'S MUCINEX STUFFY NOSE AND COLD 2.5 MG-100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
child mucus relief cough 5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
child mucus relief expectorant 100 mg/5 ml oral liquid	\$0 (Tier 4)	
child multi-symptom cold-fever 5 mg-10 mg-325 mg/10 ml oral liquid	\$0 (Tier 4)	
child multi-symptom cold/cough 2.5 mg-5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
pv child non-aspirin 80 mg tab	\$0 (Tier 4)	
children's pain reliever and fever reducer 120 mg rectal suppository	\$0 (Tier 4)	
children's triaminic cold and allergy 1 mg-2.5 mg/5 ml oral solution	\$0 (Tier 4)	
child triaminic cough-congestion 5 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
chld triaminic cgh-sor thr sus	\$0 (Tier 4)	
children's triaminic ms fevcold 1 mg-2.5 mg-5 mg-160 mg/5 ml oral susp	\$0 (Tier 4)	
children's wal-tap cold-allergy 1 mg-2.5 mg/5 ml oral solution	\$0 (Tier 4)	
children's all day allergy (cetirizine) 1 mg/ml oral solution	\$0 (Tier 4)	
child's mucus relief m-s cold 2.5 mg-5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
children night time cold-cough 6.25 mg-2.5 mg/5 ml oral liquid	\$0 (Tier 4)	
children's acetaminophen 80 mg chewable tablet; children's acetaminophen 80 mg disintegrating tablet	\$0 (Tier 4)	
children's advil 100 mg/5 ml oral suspension	\$0 (Tier 4)	
CHILDREN'S ALLEGRA ALLERGY 30 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
children's aller-tec 1 mg/ml oral solution	\$0 (Tier 4)	
children's allergy (diphenhydramine) 12.5 mg/5 ml oral liquid	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
children's allergy complete 1 mg/ml oral solution	\$0 (Tier 4)	
children's allergy relief (fexofenadine) 30 mg/5 ml oral suspension	\$0 (Tier 4)	
children's allergy relief (loratadine) 5 mg/5 ml oral solution	\$0 (Tier 4)	
children's allergy (cetirizine) 1 mg/ml oral solution	\$0 (Tier 4)	
children's aspirin 81 mg chewable tablet	\$0 (Tier 4)	
children's cetirizine 1 mg/ml oral solution; children's cetirizine 10 mg, 5 mg chewable tablet	\$0 (Tier 4)	
children's chest congestion 100 mg/5 ml oral liquid	\$0 (Tier 4)	
CHILDREN'S CLARITIN 5 MG CHEWABLE TABLET; CHILDREN'S CLARITIN 5 MG/5 ML ORAL SOLUTION	\$0 (Tier 4)	
children's cold and cough (pe) 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
children's cold and cough dm 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
children's cold-allergy (phenylephrine) 1 mg-2.5 mg/5 ml oral solution	\$0 (Tier 4)	
children's cold-cough daytime 2.5 mg-5 mg/5 ml oral liquid	\$0 (Tier 4)	
children's cold-cough-sore throat 5 mg-10 mg-325 mg/10 ml oral liquid	\$0 (Tier 4)	
children's cough 5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
children's cough dm er 30 mg/5 ml oral suspension,extended release	\$0 (Tier 4)	
children's cough and cold relief 2 mg-15 mg/15 ml oral liquid	\$0 (Tier 4)	
CHILDREN'S DELSYM COUGH 30 MG/5 ML ORAL SUSPENSION,EXTENDED RELEASE	\$0 (Tier 4)	
children's dibromm cold and allergy 1 mg-2.5 mg/5 ml oral solution	\$0 (Tier 4)	
children's dibromm dm cold-cough 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
children's easy-melts 80 mg disintegrating tablet	\$0 (Tier 4)	
children's fever reducing 120 mg rectal suppository	\$0 (Tier 4)	
CHILDREN'S FLONASE ALLERGY RELIEF 50 MCG/ACTUATION NASAL SPRAY,SUSP	\$0 (Tier 4)	
children's flu relief 1 mg-2.5 mg-5 mg-160 mg/5 ml oral suspension	\$0 (Tier 4)	
child ibu-drops 50 mg/1.25 ml	\$0 (Tier 4)	
children's ibuprofen 100 mg/5 ml oral suspension	\$0 (Tier 4)	
children mult-sympt cold day-nite 325 mg-12.5 mg-5 mg/10 ml(nt) liquid	\$0 (Tier 4)	
children's mapap 80 mg disintegrating tablet	\$0 (Tier 4)	
CHILDREN'S MUCINEX COLD-FEVER 5 MG-10 MG-325 MG/10 ML ORAL LIQUID	\$0 (Tier 4)	
children's mucinex cough 5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
CHILDREN'S MUCINEX MULTI-SYMPTOM 2.5 MG-5 MG-100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
CHILDREN'S MUCINEX NIGHT TIME 12.5 MG-5 MG-325 MG/10 ML ORAL LIQUID	\$0 (Tier 4)	
children's non-aspirin 160 mg/5 ml oral suspension; children's non-aspirin 80 mg chewable tablet; pv child non-aspirin 160 mg/5	\$0 (Tier 4)	
children's pain relief 160 mg/5 ml oral suspension; epl child pain rlf 160 mg/5 ml	\$0 (Tier 4)	
children's pain reliever 160 mg/5 ml oral suspension; children's pain reliever 80 mg disintegrating tablet; sm pain reliever chew tab	\$0 (Tier 4)	
children's pain and fever relief 160 mg disintegrating tablet; children's pain and fever relief 160 mg/5 ml oral liquid; children's pain and fever relief 160 mg/5 ml, 160 mg/5 ml oral suspension	\$0 (Tier 4)	
children's pepto 400 mg chewable tablet	\$0 (Tier 4)	
children's plus flu 1 mg-2.5 mg-5 mg-160 mg/5 ml oral suspension	\$0 (Tier 4)	
children's profen ib 100 mg/5 ml oral suspension	\$0 (Tier 4)	
children's q-pap 160 mg/5 ml	\$0 (Tier 4)	
children's saline nasal spray 0.65 % aerosol	\$0 (Tier 4)	
children's silapap 160 mg/5 ml oral liquid	\$0 (Tier 4)	
children's silfedrine 15 mg/5 ml oral liquid	\$0 (Tier 4)	
children's soothe 400 mg chewable tablet	\$0 (Tier 4)	
children's stuffy nose-cold 2.5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
children's sudafed 15 mg/5 ml oral liquid	\$0 (Tier 4)	
children's sudafed pe cough and cold 2.5 mg-5 mg/5 ml oral liquid	\$0 (Tier 4)	
children's tactinal 80 mg chewable tablet	\$0 (Tier 4)	
children's wal-dryl allergy 12.5 mg/5 ml oral liquid	\$0 (Tier 4)	
children's wal-fex 30 mg/5 ml oral suspension	\$0 (Tier 4)	
children's wal-zyr 1 mg/ml oral solution; children's wal-zyr 10 mg chewable tablet	\$0 (Tier 4)	
CHILDREN'S ZYRTEC ALLERGY 1 MG/ML ORAL SOLUTION	\$0 (Tier 4)	
children's cold & allergy elxr	\$0 (Tier 4)	
children's plus multi-symp cold 1 mg-2.5 mg-5 mg-160 mg/5 ml oral susp	\$0 (Tier 4)	
CHLO TUSS 1 MG-30 MG-12.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
25cpd-200gfn liquid	\$0 (Tier 4)	
CHLOR-TRIMETON 4 MG TABLET	\$0 (Tier 4)	
chloraseptic throat spray 1.4 % aerosol	\$0 (Tier 4)	
chlorhexidine 4% scrub	\$0 (Tier 4)	
chlorhist 4 mg tablet	\$0 (Tier 4)	
chlorphen sr 12 mg tablet, extended release	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>chlorpheniramine er 12 mg tab; qc chlorpheniramine 4 mg tab</i>	\$0 (Tier 4)	
<i>2cpm-15dm-5peh liquid</i>	\$0 (Tier 4)	
<i>chlortabs 4 mg tablet</i>	\$0 (Tier 4)	
<i>chocolate laxative 15 mg chewable tablet</i>	\$0 (Tier 4)	
<i>cimetidine 200 mg, 300 mg, 400 mg, 800 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>citrate of magnesia oral</i>	\$0 (Tier 4)	
CITROMA ORAL SOLUTION	\$0 (Tier 4)	
<i>citrucel 500 mg tablet</i>	\$0 (Tier 4)	
<i>clarispray 50 mcg/actuation nasal spray,suspension</i>	\$0 (Tier 4)	
CLARITIN 10 MG TABLET; CLARITIN 5 MG/5 ML ORAL SOLUTION	\$0 (Tier 4)	
CLARITIN LIQUI-GEL 10 MG CAPSULE	\$0 (Tier 4)	
CLARITIN REDITABS 10 MG, 5 MG DISINTEGRATING TABLET	\$0 (Tier 4)	
CLARITIN-D 12 HOUR 5 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
CLARITIN-D 24 HOUR 10 MG-240 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
CLEAR EYES REDNESS RELIEF 0.012 %-0.2 % DROPS	\$0 (Tier 4)	
<i>clearasil daily clear (benzoyl peroxide) 10 % topical cream</i>	\$0 (Tier 4)	
<i>clearlax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>clotrim 1% vaginal cream</i>	\$0 (Tier 4)	
<i>clotrimazole 1% cream; clotrimazole 1% solution; clotrimazole 10 mg troche^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>clotrimazole 3 day 2 % vaginal cream</i>	\$0 (Tier 4)	
<i>clotrimazole af 1 % topical cream</i>	\$0 (Tier 4)	
<i>clotrimazole-3 2 % vaginal cream</i>	\$0 (Tier 4)	
<i>clotrimazole-7 1 % vaginal cream</i>	\$0 (Tier 4)	
<i>cloverine topical ointment</i>	\$0 (Tier 4)	
<i>codeine-guaifen 10-100 mg/5 ml</i>	\$0 (Tier 4)	
<i>codituss dm syrup</i>	\$0 (Tier 4)	
<i>col-rite 100 mg, 250 mg capsule</i>	\$0 (Tier 4)	
COLACE 100 MG CAPSULE	\$0 (Tier 4)	
<i>cold and allergy 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>cold and allergy (bromphen-pe) 1 mg-2.5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>cold and allergy pe 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>sm cold & allergy tablet</i>	\$0 (Tier 4)	
<i>cold and cough (diphenhydr-pe) 6.25 mg-2.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
cold and cough dm 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
cold and cough elixir 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
cold and flu relief (diphen-pe) 12.5 mg-5 mg-325 mg/10 ml oral liquid	\$0 (Tier 4)	
cold and flu severe 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
cold and sinus multi-symptom 10 mg-650 mg-400 mg/20 ml oral liquid	\$0 (Tier 4)	
cold and sinus pain relief 30 mg-200 mg tablet	\$0 (Tier 4)	
pv cold head congestion caplet	\$0 (Tier 4)	
cold head congestion day/nite 2 mg-5 mg-10 mg-325 mg tablets	\$0 (Tier 4)	
cold head congestion nighttime 2 mg-5 mg-10 mg-325 mg tablet	\$0 (Tier 4)	
cold head congestion severe daytime 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
cold multi-symptom 5 mg-10 mg-325 mg tablet	\$0 (Tier 4)	
cold multi-symptom (chlorpheniramine) 2 mg-5 mg-10 mg-325 mg tablet	\$0 (Tier 4)	
cold multi-symptom day/night 2 mg-5 mg-10 mg-325 mg tablets	\$0 (Tier 4)	
cold multisymptom nighttime 6.25 mg-5 mg-10 mg-325 mg/15 ml oral liquid	\$0 (Tier 4)	
cold relief 2 mg-7.8 mg-325 mg effervescent tablet	\$0 (Tier 4)	
cold relief multi-symptom day/night 2 mg-5 mg-10 mg-325 mg tablets	\$0 (Tier 4)	
cold relief plus 2 mg-7.8 mg-325 mg effervescent tablet	\$0 (Tier 4)	
cold severe congestion 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
cold-flu relief 12.5 mg-30 mg-1,000 mg/30 ml oral liquid; cold-flu relief 5 mg-10 mg-325 mg/15 ml oral liquid	\$0 (Tier 4)	
cold-sinus relief 30 mg-200 mg tablet	\$0 (Tier 4)	
COLEMAN 100 MAX INSECT REPELLENT 98.11 % TOPICAL PUMP SPRAY; COLEMAN 100 MAX INSECT REPELLENT 98.11 % TOPICAL SPRAY	\$0 (Tier 4)	
COLEMAN BOTANICALS INSECT REPELLENT 30 % TOPICAL SPRAY	\$0 (Tier 4)	
COLEMAN HIGH AND DRY INSECT REPELLENT 25 % TOPICAL SPRAY POWDER	\$0 (Tier 4)	
COLEMAN SKINSMART INSECT REPELLENT 20 % TOPICAL PUMP SPRAY; COLEMAN SKINSMART INSECT REPELLENT 20 % TOPICAL SPRAY	\$0 (Tier 4)	
COLEMAN SPORTSMEN INSECT REPELLENT 40 % TOPICAL SPRAY	\$0 (Tier 4)	
comfort gel 200 mg-200 mg-20 mg/5 ml oral suspension	\$0 (Tier 4)	
comfort gel extra strength 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
complete 10 mg-800 mg-165 mg chewable tablet	\$0 (Tier 4)	
complete allergy 12.5 mg/5 ml oral liquid; complete allergy 25 mg capsule; complete allergy 25 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
complete allergy medicine 25 mg capsule; complete allergy medicine 25 mg tablet	\$0 (Tier 4)	
complete lice treatment 4 %-0.33 %-0.5 % topical kit	\$0 (Tier 4)	
COMPOUND W 17 % TOPICAL GEL	\$0 (Tier 4)	
compoz 25 mg tablet	\$0 (Tier 4)	
CONEX 1 MG-30 MG/5 ML ORAL SOLUTION	\$0 (Tier 4)	
conex 2 mg-60 mg tablet	\$0 (Tier 4)	
congest-eze 60 mg-400 mg tablet	\$0 (Tier 4)	
congest-eze pe 10 mg-400 mg tablet	\$0 (Tier 4)	
congestac tablet	\$0 (Tier 4)	
congestion relief (ibuprofen-phenylephrine) 200 mg-10 mg tablet	\$0 (Tier 4)	
contac cold-flu night 12.5 mg-30 mg-1,000 mg/30 ml oral liquid	\$0 (Tier 4)	
coricidin hbp 10 mg-200 mg capsule	\$0 (Tier 4)	
CORICIDIN HBP 2 MG-15 MG-500 MG TABLET	\$0 (Tier 4)	
coricidin hbp cold and flu 2 mg-325 mg tablet	\$0 (Tier 4)	
coricidin hbp cold-multi symptom 6.25 mg-15 mg-325 mg/15 ml oral liqd	\$0 (Tier 4)	
CORICIDIN HBP COUGH AND COLD 4 MG-30 MG TABLET	\$0 (Tier 4)	
CORRECTOL 5 MG TABLET	\$0 (Tier 4)	
CORTAID 1 % TOPICAL CREAM	\$0 (Tier 4)	
cortizone-10 1 % topical cream; cortizone-10 1 % topical ointment	\$0 (Tier 4)	
cortizone-10 plus 1 % topical cream	\$0 (Tier 4)	
cough and cold 5 mg-10 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
cough and cold (chlorpheniramine-dm) 4 mg-30 mg tablet	\$0 (Tier 4)	
cough and cold bp 4 mg-30 mg tablet	\$0 (Tier 4)	
cough and cold mucus relief cf 5 mg-10 mg-200 mg/5 ml oral liquid	\$0 (Tier 4)	
cough and severe cold 25 mg-10 mg-650 mg oral powder packet	\$0 (Tier 4)	
cough control (dextromethorphan) 15 mg capsule	\$0 (Tier 4)	
sb cough control cf liquid	\$0 (Tier 4)	
cough control dm 10 mg-100 mg/5 ml syrup; sb cough control dm liquid	\$0 (Tier 4)	
cough dm er 30 mg/5 ml oral suspension,extended release	\$0 (Tier 4)	
cough drops 5 mg, 9.1 mg	\$0 (Tier 4)	
cough formula dm 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
cough relief 15 mg/5 ml oral liquid; pv cough relief 15 mg softgel	\$0 (Tier 4)	
cough suppressant-expectorant 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
cough syrup 100 mg/5 ml oral liquid	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
cough syrup dm 10 mg-100 mg/5 ml	\$0 (Tier 4)	
cough-chest congestion dm 5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
cough-cold relief hbp 4 mg-30 mg tablet	\$0 (Tier 4)	
cough-sore throat night 12.5 mg-30 mg-1,000 mg/30 ml oral liquid	\$0 (Tier 4)	
coughtab 200 mg tablet	\$0 (Tier 4)	
coughtab 400 400 mg tablet	\$0 (Tier 4)	
creamy acne face 4 % topical cleanser	\$0 (Tier 4)	
CRITIC-AID 20 %-51 % TOPICAL PASTE	\$0 (Tier 4)	
critic-aid clear af 2 % topical ointment	\$0 (Tier 4)	
cutter backwoods 25 % topical pump spray; cutter backwoods 25 % topical spray	\$0 (Tier 4)	
cutter backwoods dry 25 % topical spray	\$0 (Tier 4)	
cutter lemon eucalyptus 30 % topical spray	\$0 (Tier 4)	
cutter natural insect repellent 5 %-2 %-0.4 %-0.1 % topical spray	\$0 (Tier 4)	
cutter natural insect repellent2 5 %-2 % topical spray	\$0 (Tier 4)	
cutter skinsations 7 % topical spray	\$0 (Tier 4)	
daily fiber 0.52 gram capsule	\$0 (Tier 4)	
daily fiber (psyllium-sucrose) 3.4 gram/12 gram, 3.4 gram/7 gram oral powder	\$0 (Tier 4)	
dallergy (chlorpheniramine-phenylephrine) 1 mg-2.5 mg/ml oral drops	\$0 (Tier 4)	
DALLERGY (DEXBROMPHENIRAMINE-PE) 1 MG-5 MG TABLET; DALLERGY (DEXBROMPHENIRAMINE-PE) 1 MG-5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
dayhist 1.34 mg tablet	\$0 (Tier 4)	
dayhist allergy 1.34 mg tablet	\$0 (Tier 4)	
daytime and nighttime cold 2 mg-5 mg-10 mg-325 mg tablets	\$0 (Tier 4)	
daytime cold and cough 1,000 mg-30 mg/30 ml oral liquid	\$0 (Tier 4)	
daytime cold-flu 5 mg-10 mg-325 mg/15 ml oral liquid	\$0 (Tier 4)	
daytime cold and flu relief (phenylephrine) 5 mg-10 mg-325 mg capsule	\$0 (Tier 4)	
daytime sinus 5 mg-325 mg capsule	\$0 (Tier 4)	
daytime sinus-congestion cp	\$0 (Tier 4)	
daytime-cold nighttime-cold-flu 10 mg-650 mg/20 ml(day-night) oral liq; daytime-cold nighttime-cold-flu 5 mg-325 mg-200 mg (day-night) tablets	\$0 (Tier 4)	
DEBROX 6.5 % EAR DROPS	\$0 (Tier 4)	
DECONEX DMX TABLET	\$0 (Tier 4)	
DECONEX IR TABLET	\$0 (Tier 4)	
deep sea nasal 0.65 % spray aerosol	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>delsym cough-chest congestion dm 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
DELSYM COUGH-COLD DAYTIME LIQ	\$0 (Tier 4)	
DELSYM COUGH-COLD NIGHTTIME 12.5 MG-5 MG-325 MG/10 ML ORAL LIQUID	\$0 (Tier 4)	
<i>dermafungal 2 % topical ointment</i>	\$0 (Tier 4)	
DERMAL WOUND CLEANSER 0.13 %	\$0 (Tier 4)	
<i>dermarest psoriasis medicated 3 % shampoo</i>	\$0 (Tier 4)	
<i>dermasarra 0.5 %-0.5 % lotion</i>	\$0 (Tier 4)	
<i>dermazinc shampoo 2 %</i>	\$0 (Tier 4)	
<i>desenex 2 % topical powder</i>	\$0 (Tier 4)	
<i>desgen dm 5 mg-10 mg-100 mg/5 ml oral liquid; desgen dm 5 mg-15 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>despec dm-g 5 mg-10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>despec-dm (phenylephrine-dm-guaif) 5 mg-10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>12.5cpd-1dcpm-30pse liquid</i>	\$0 (Tier 4)	
<i>dextromethorphan er 30 mg/5 ml</i>	\$0 (Tier 4)	
<i>guaifenesin dm 400-20 mg tab; guaifenesin dm syrup</i>	\$0 (Tier 4)	
<i>dhs sal 3 % shampoo</i>	\$0 (Tier 4)	
DHS TAR 0.5 % SHAMPOO	\$0 (Tier 4)	
DHS TAR GEL 0.5 % SHAMPOO	\$0 (Tier 4)	
DHS ZINC 2 % SHAMPOO	\$0 (Tier 4)	
<i>diabetic siltussin das-na 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>diabetic siltussin-dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>diabetic siltussin-dm max str 10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>diabetic tussin dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>dialyvite 800 0.8 mg tablet</i>	\$0 (Tier 4)	
<i>diamode 2 mg tablet</i>	\$0 (Tier 4)	
<i>diaper rash relief 10 % topical ointment</i>	\$0 (Tier 4)	
<i>diarrhea relief (bismuth subsalicylate) 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>dibucaine 1% ointment</i>	\$0 (Tier 4)	
<i>digestive relief 262 mg chewable tablet; digestive relief 262 mg tablet; digestive relief 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>dimaphen (pe) 1 mg-2.5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>dimetapp cold-allergy (pe) 1 mg-2.5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>dimetapp cold-congestion 6.25 mg-2.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>dimetapp dm cold-cough (pe) 1 mg-2.5 mg-5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>dimetapp long-acting(chlorpheniramine-dm) 1 mg-7.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
DIOCTO 50 MG/5 ML ORAL LIQUID; DIOCTO 60 MG/15 ML SYRUP	\$0 (Tier 4)	
<i>dioctyl 60 mg/15 ml syrup</i>	\$0 (Tier 4)	
<i>diotame 262 mg chewable tablet</i>	\$0 (Tier 4)	
<i>diphedryl 12.5 mg/5 ml oral liquid; diphedryl 25 mg capsule; diphedryl 25 mg tablet</i>	\$0 (Tier 4)	
<i>diphedryl allergy 12.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>diphenhist 12.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>diphenhydramine 12.5 mg/5 ml; diphenhydramine 25 mg caplet; diphenhydramine 25 mg, 50 mg capsule; diphenhydramine cough syrup</i>	\$0 (Tier 4)	
<i>25dph-7.5peh liquid</i>	\$0 (Tier 4)	
<i>enema ready to use</i>	\$0 (Tier 4)	
<i>dm max 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>doc-q-lace 100 mg capsule</i>	\$0 (Tier 4)	
<i>doc-q-lax tablet</i>	\$0 (Tier 4)	
<i>docu 50 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>docuprene 100 mg tablet</i>	\$0 (Tier 4)	
<i>docusate cal 240 mg softgel</i>	\$0 (Tier 4)	
<i>docusate sod 60 mg/15 ml syr; docusate sodium 100 mg tablet; docusate sodium 100 mg, 250 mg softgel</i>	\$0 (Tier 4)	
<i>docusil 100 mg capsule</i>	\$0 (Tier 4)	
<i>dok 100 mg tablet</i>	\$0 (Tier 4)	
<i>dok plus 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
DOMEBORO 952 MG-1,347 MG TOPICAL POWDER IN PACKET	\$0 (Tier 4)	
DONATUSSIN 4 MG-10 MG-20 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>double antibiotic 500 unit-10,000 unit/gram topical ointment</i>	\$0 (Tier 4)	
<i>double antibiotic (bacitrcn zn) 500 unit-10,000 unit/gram top ointment</i>	\$0 (Tier 4)	
<i>double antibiotic-pain relief 3.5 mg-10,000 unit-10 mg/gram top cream</i>	\$0 (Tier 4)	
DR. SMITH'S ADULT BARRIER 10 % TOPICAL SPRAY	\$0 (Tier 4)	
DR. SMITH'S DIAPER 10 % TOPICAL OINTMENT	\$0 (Tier 4)	
DR. SMITH'S DIAPER RASH 10 % TOPICAL SPRAY	\$0 (Tier 4)	
DR. SMITH'S RASH-SKIN SPRAY	\$0 (Tier 4)	
DRAMAMINE 50 MG TABLET	\$0 (Tier 4)	
<i>dramamine less drowsy 25 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>driminate 50 mg tablet</i>	\$0 (Tier 4)	
DRISTAN COLD 2 MG-5 MG-325 MG TABLET	\$0 (Tier 4)	
DRISTAN LONG LASTING 0.05 % NASAL MIST	\$0 (Tier 4)	
<i>ducodyl 5 mg tablet, delayed release</i>	\$0 (Tier 4)	
DULCOLAX (BISACODYL) 10 MG RECTAL SUPPOSITORY; DULCOLAX (BISACODYL) 5 MG TABLET, DELAYED RELEASE	\$0 (Tier 4)	
<i>dulcolax stool softener (docusate) 100 mg capsule</i>	\$0 (Tier 4)	
<i>duo fusion 10 mg-800 mg-165 mg chewable tablet</i>	\$0 (Tier 4)	
DURAFLU TABLET	\$0 (Tier 4)	
DURAVENT DM 10 MG-15 MG-395 MG TABLET	\$0 (Tier 4)	
<i>dyna-hex 4 % topical liquid</i>	\$0 (Tier 4)	
<i>e.c. prin 325 mg tablet, delayed release</i>	\$0 (Tier 4)	
<i>ear drops for swimmers 95 %-5 %</i>	\$0 (Tier 4)	
<i>ear drops otc 6.5 %</i>	\$0 (Tier 4)	
<i>ear dry 95 %-5 % drops</i>	\$0 (Tier 4)	
<i>ear wax removal kit 6.5 % drops</i>	\$0 (Tier 4)	
<i>ear wax removal system 6.5 % drops</i>	\$0 (Tier 4)	
<i>eazze the pain 25 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>econtra ez 1.5 mg tablet</i>	\$0 (Tier 4)	
ECOTRIN 325 MG TABLET, ENTERIC COATED	\$0 (Tier 4)	
<i>ecotrin low strength 81 mg tablet, enteric coated</i>	\$0 (Tier 4)	
<i>eczema anti-itch 1 % topical cream</i>	\$0 (Tier 4)	
<i>ed a-hist 4 mg-10 mg tablet; ed a-hist 4 mg-10 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
ED A-HIST DM 4 MG-10 MG-10 MG TABLET	\$0 (Tier 4)	
<i>ed a-hist dm 4 mg-10 mg-15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>ed a-hist pse 2.5 mg-60 mg tablet</i>	\$0 (Tier 4)	
<i>ed bron gp 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
ED CHLORPED D 2 MG-5 MG/ML ORAL DROPS	\$0 (Tier 4)	
<i>ed chlorped jr 2 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>ed-apap 160 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
ED-CHLORPED 2 MG/ML ORAL DROPS	\$0 (Tier 4)	
<i>ed-chlortan 4 mg tablet</i>	\$0 (Tier 4)	
<i>effervescent pain relief antacid 325 mg-1,916 mg-1,000 mg tablet</i>	\$0 (Tier 4)	
<i>effervescent pain relief tab</i>	\$0 (Tier 4)	
<i>elon dual defense 25 % topical solution</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
emetrol oral solution	\$0 (Tier 4)	
endacof - dm 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
enema 19 gram-7 gram/118 ml; pv enema	\$0 (Tier 4)	
enema disposable 19 gram-7 gram/118 ml	\$0 (Tier 4)	
enteric coated aspirin 81 mg tablet, delayed release	\$0 (Tier 4)	
ephrine 1 % nasal drops	\$0 (Tier 4)	
epsom salt 495 mg/5 gram oral granules	\$0 (Tier 4)	
eq gentle 0.3 % eye drops	\$0 (Tier 4)	
ETHYL RUBBING ALCOHOL 70% LIQ	\$0 (Tier 4)	
evac-u-gen (sennosides) 8.6 mg tablet	\$0 (Tier 4)	
EX-LAX (SENNOSIDES) 15 MG CHEWABLE TABLET; EX-LAX (SENNOSIDES) 15 MG TABLET	\$0 (Tier 4)	
EX-LAX MAXIMUM STRENGTH 25 MG TABLET	\$0 (Tier 4)	
excedrin migraine 250 mg-250 mg-65 mg tablet	\$0 (Tier 4)	
EXCEDRIN TENSION HEADACHE CPLT	\$0 (Tier 4)	
expectorant 100 mg/5 ml oral liquid; expectorant 200 mg tablet	\$0 (Tier 4)	
expectorant cough syrup 100 mg/5 ml oral liquid	\$0 (Tier 4)	
expectorant dm 10 mg-100 mg/5 ml syrup; expectorant dm 20 mg-300 mg/5 ml oral liquid	\$0 (Tier 4)	
extra pain relief 250 mg-250 mg-65 mg tablet	\$0 (Tier 4)	
extraprin 250 mg-250 mg-65 mg tablet	\$0 (Tier 4)	
eye allergy relief (naphazoline-pheniramine) 0.025 %-0.3 % drops	\$0 (Tier 4)	
eye drops (tetrahydrozoline) 0.05 %	\$0 (Tier 4)	
eye drops (with povidone) 0.05 %-0.1 %-1 %-1 %	\$0 (Tier 4)	
eye drops advanced relief 0.05 %-0.1 %-1 %-1 %	\$0 (Tier 4)	
eye itch relief 0.025 % (0.035 %) drops	\$0 (Tier 4)	
EYE STREAM SOLUTION	\$0 (Tier 4)	
ez nite sleep 25 mg capsule	\$0 (Tier 4)	
ezfe 200 200 mg iron capsule	\$0 (Tier 4)	
fallback solo 1.5 mg tablet	\$0 (Tier 4)	
famotidine 10 mg tablet	\$0 (Tier 4)	
famotidine 20 mg, 40 mg tablet; famotidine 40 mg/4 ml vial; famotidine 40 mg/5 ml susp ^{MO}	Up to \$3.30 (Tier 1)	
fast acting nasal 1 % spray	\$0 (Tier 4)	
fast mucus relief severe cold 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
fast mucus relief congestion-cough 2.5 mg-5 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>fe c 100 mg-250 mg tablet</i>	\$0 (Tier 4)	
<i>fenesin dm ir 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>fenesin ir 400 mg tablet</i>	\$0 (Tier 4)	
<i>fenesin pe ir 10 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>ferrex 150 mg iron capsule</i>	\$0 (Tier 4)	
<i>ferric x-150 150 mg iron capsule</i>	\$0 (Tier 4)	
<i>fever reducer 120 mg rectal suppository</i>	\$0 (Tier 4)	
<i>fever reducer an pain reliever 160 mg/5 ml oral suspension; pv pain-fever 500 mg/15ml liq</i>	\$0 (Tier 4)	
<i>feverall 120 mg, 325 mg, 650 mg rectal suppository</i>	\$0 (Tier 4)	
FEVERALL 80 MG RECTAL SUPPOSITORY	\$0 (Tier 4)	
<i>fexofenadine hcl 180 mg, 60 mg tablet; fexofenadine hcl 30 mg/5 ml</i>	\$0 (Tier 4)	
<i>fexofenadine-pse er 60-120 tab</i>	\$0 (Tier 4)	
<i>fiber oral powder</i>	\$0 (Tier 4)	
<i>fiber (calcium polycarbophil) 625 mg tablet</i>	\$0 (Tier 4)	
<i>fiber (psyllium husk) 0.52 gram capsule</i>	\$0 (Tier 4)	
<i>fiber (psyllium husk/sugar) 3.4 gram/11 gram, 3.4 gram/12 gram, 3.4 gram/7 gram oral powder</i>	\$0 (Tier 4)	
<i>fiber (with aspartame) 3.4 gram/5.8 gram, 3.4 gram/5.8 gram oral powder</i>	\$0 (Tier 4)	
<i>fiber laxative (calcium polycarbophil) 625 mg tablet</i>	\$0 (Tier 4)	
<i>fiber laxative (methylcellulose) 500 mg tablet</i>	\$0 (Tier 4)	
<i>fiber laxative (psyllium husk) 0.52 gram capsule</i>	\$0 (Tier 4)	
<i>pv fiber laxative powder</i>	\$0 (Tier 4)	
<i>fiber smooth oral powder</i>	\$0 (Tier 4)	
<i>fiber smooth (with sucrose) oral powder</i>	\$0 (Tier 4)	
<i>fiber therapy (ca polycarbophil) 625 mg tablet</i>	\$0 (Tier 4)	
FIBER THERAPY (METHYLCELLULOSE-SUGAR) 2 GRAM/19 GRAM ORAL POWDER	\$0 (Tier 4)	
<i>fiber therapy (methylcellulose) 500 mg tablet</i>	\$0 (Tier 4)	
<i>fiber therapy laxative (psyllium husk) 0.52 gram capsule</i>	\$0 (Tier 4)	
<i>fiber therapy (psyllium seed-sucrose) oral powder</i>	\$0 (Tier 4)	
<i>fiber-caps (psyllium husk) 0.52 gram capsule</i>	\$0 (Tier 4)	
<i>fiber-lax 625 mg tablet</i>	\$0 (Tier 4)	
<i>fiber-tabs 625 mg tablet</i>	\$0 (Tier 4)	
FIBERCON 625 MG TABLET	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>first aid abx pain relief 3.5 mg-10,000 unit-10 mg/gram topical cream</i>	\$0 (Tier 4)	
<i>first aid antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment</i>	\$0 (Tier 4)	
<i>first aid antibiotic-pain rlf 3.5 mg-500 unit-10,000 unit/g top oint</i>	\$0 (Tier 4)	
<i>first aid antiseptic 10 % topical solution</i>	\$0 (Tier 4)	
<i>flanax (naproxen) 220 mg tablet</i>	\$0 (Tier 4)	
<i>flanax antacid liquid</i>	\$0 (Tier 4)	
<i>flavor chews antacid 300 mg (750 mg) tablet</i>	\$0 (Tier 4)	
FLEET ENEMA 19 GRAM-7 GRAM/118 ML	\$0 (Tier 4)	
<i>fleet glycerin (adult) rectal suppository</i>	\$0 (Tier 4)	
<i>fleet glycerin (child) rectal suppository</i>	\$0 (Tier 4)	
FLEET LAXATIVE 5 MG TABLET,DELAYED RELEASE	\$0 (Tier 4)	
FLEET MINERAL OIL ENEMA	\$0 (Tier 4)	
FLONASE ALLERGY RELIEF 50 MCG/ACTUATION NASAL SPRAY,SUSPENSION	\$0 (Tier 4)	
<i>flu and severe cold-daytime 5 mg-10 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>flu and severe cold-nighttime 25 mg-10 mg-650 mg/30 ml oral liquid</i>	\$0 (Tier 4)	
<i>pv flu & sore throat rlf liq</i>	\$0 (Tier 4)	
<i>flu hbp 2 mg-15 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>flu relief therapy daytime 5 mg-10 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>flu relief therapy nighttime 25 mg-10 mg-650 mg/30 ml oral liquid</i>	\$0 (Tier 4)	
<i>flu-severe cold-cough daytime 10 mg-20 mg-650 mg oral powder packet</i>	\$0 (Tier 4)	
<i>fluticasone prop 50 mcg spray^{MO}</i>	Up to \$3.30 (Tier 1)	QL (16 per 30 days)
<i>foaming antacid 95 mg-358 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>pv foaming antacid chew tablet</i>	\$0 (Tier 4)	
<i>foltabs 800 0.8 mg-10 mg-115 mcg tablet</i>	\$0 (Tier 4)	
<i>foot and sneaker 1 % topical spray powder</i>	\$0 (Tier 4)	
<i>pv foot odor control 1% powder</i>	\$0 (Tier 4)	
<i>formula 3 1 % topical solution</i>	\$0 (Tier 4)	
<i>formula em oral solution</i>	\$0 (Tier 4)	
FRESHKOTE 2 %-0.9 %-1.8 % EYE DROPS	\$0 (Tier 4)	
<i>full spectrum b-vitamin c 0.8 mg tablet</i>	\$0 (Tier 4)	
<i>fungi-nail 25 % topical solution</i>	\$0 (Tier 4)	
FUNGOID TINCTURE 2 % TOPICAL; FUNGOID TINCTURE 2 % TOPICAL KIT	\$0 (Tier 4)	
<i>fungoid-d 1 % topical cream</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>g-fenesin 400 mg tablet</i>	\$0 (Tier 4)	
<i>g-fenesin dm 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>g-tron 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>gas relief 125 mg, 180 mg capsule</i>	\$0 (Tier 4)	
<i>gas relief 80 80 mg chewable tablet</i>	\$0 (Tier 4)	
<i>gas relief extra strength 125 mg capsule; gas relief extra strength 125 mg chewable tablet</i>	\$0 (Tier 4)	
<i>gas relief ultra strength 180 mg capsule</i>	\$0 (Tier 4)	
GAS-X TABLET CHEWABLE	\$0 (Tier 4)	
<i>gas-x extra strength 125 mg capsule</i>	\$0 (Tier 4)	
GAS-X EXTRA STRENGTH 125 MG CHEWABLE TABLET	\$0 (Tier 4)	
GAS-X ULTRA-STRENGTH 180 MG CAPSULE	\$0 (Tier 4)	
<i>gavilax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
GAVISCAN 80 MG-14.2 MG CHEWABLE TABLET; GAVISCON 95 MG-358 MG/15 ML ORAL SUSPENSION	\$0 (Tier 4)	
GAVISCAN EXTRA STRENGTH 160 MG-105 MG CHEWABLE TABLET; GAVISCON EXTRA STRENGTH 254 MG-237.5 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>gelusil antacid & antigas liq</i>	\$0 (Tier 4)	
GELUSIL ANTACID AND ANTI-GAS 200 MG-200 MG-25 MG CHEWABLE TABLET	\$0 (Tier 4)	
<i>gencontuss 2 mg-5 mg-10 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
GENTEAL MILD-MODERATE EYE DROP	\$0 (Tier 4)	
GENTEAL GEL DROPS	\$0 (Tier 4)	
<i>gentle laxative 10 mg rectal suppository; gentle laxative 5 mg tablet, delayed release</i>	\$0 (Tier 4)	
<i>gentlelax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>geri-dryl 25 mg tablet</i>	\$0 (Tier 4)	
<i>geri-hydrolac 12 % topical cream</i>	\$0 (Tier 4)	
<i>geri-kot 8.6 mg tablet</i>	\$0 (Tier 4)	
<i>geri-lanta 200 mg-200 mg-20 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>geri-mucil 3.4 gram/5.8 gram oral powder</i>	\$0 (Tier 4)	
<i>geri-pectate 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>geri-tussin 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>geri-tussin dm 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>gnp glycerin suppository</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>gnp glycerin suppository</i>	\$0 (Tier 4)	
<i>glycolax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>goody's migraine relief 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>guaiasorb dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>guaiatussin ac 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>guaifenesin 1,200 mg, 200 mg, 400 mg, 600 mg tablet; guaifenesin 300 mg/15 ml soln; guaifenesin er 1,200 mg, 200 mg, 400 mg, 600 mg tablet</i>	\$0 (Tier 4)	
<i>guaifenesin ac 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>guaifenesin dac 30 mg-10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>guaifenesin-dm solution</i>	\$0 (Tier 4)	
<i>gyne-lotrimin 2 % vaginal cream</i>	\$0 (Tier 4)	
<i>gyne-lotrimin 7 1 % vaginal cream</i>	\$0 (Tier 4)	
<i>hair regrowth for men 5 % topical solution</i>	\$0 (Tier 4)	
<i>cvs hair regrowth 2% solution</i>	\$0 (Tier 4)	
<i>hair regrowth treatment 2 %, 5 % topical solution</i>	\$0 (Tier 4)	
<i>head congestion day-night 2 mg-5 mg-10 mg-325 mg tablets</i>	\$0 (Tier 4)	
<i>headache formula tablet</i>	\$0 (Tier 4)	
<i>headache pm 25 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>headache relief (asa-acetaminophn-caffeine) 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>healthylax 17 gram oral powder packet</i>	\$0 (Tier 4)	
<i>heartburn antacid 160 mg-105 mg chewable tablet</i>	\$0 (Tier 4)	
<i>heartburn prevention 10 mg, 20 mg tablet</i>	\$0 (Tier 4)	
<i>heartburn relief 160 mg-105 mg chewable tablet</i>	\$0 (Tier 4)	
<i>heartburn relief (cimetidine) 200 mg tablet</i>	\$0 (Tier 4)	
<i>heartburn relief (famotidine) 10 mg, 20 mg tablet</i>	\$0 (Tier 4)	
<i>heartburn relief (ranitidine) 150 mg, 75 mg tablet</i>	\$0 (Tier 4)	
<i>heartburn treatment 24 hour 15 mg capsule, delayed release</i>	\$0 (Tier 4)	
<i>hemorrhoidal 0.25 %-14 %-74.9 % ointment; hemorrhoidal ointment</i>	\$0 (Tier 4)	
<i>hemorrhoidal (phenyleph-cocoa) 0.25 %-88.44 % rectal suppository</i>	\$0 (Tier 4)	
<i>hemorrhoidal (witch hazel) 50 % topical pads</i>	\$0 (Tier 4)	
<i>hemorrhoidal cooling 0.25 %-50 % topical gel</i>	\$0 (Tier 4)	
<i>hemorrhoidal cream 0.25 %-1 % rectal</i>	\$0 (Tier 4)	
<i>hemorrhoidal hygiene 50 % topical pads</i>	\$0 (Tier 4)	
<i>hemorrhoidal medicated topical pads</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
HIBICLENS 4 % TOPICAL LIQUID	\$0 (Tier 4)	
HISTEX (TRIPROLIDINE) 2.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
HISTEX DM 2.5 MG-10 MG-20 MG/5 ML SYRUP	\$0 (Tier 4)	
HISTEX PD 0.938 MG/ML ORAL DROPS	\$0 (Tier 4)	
<i>histex pe 10 mg-2.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>hospital antiseptic soln</i>	\$0 (Tier 4)	
<i>hot steam liquid</i>	\$0 (Tier 4)	
HYDROCIL ORAL POWDER	\$0 (Tier 4)	
<i>hydrocortisone 0.5% ointment; hydrocortisone 1% cream</i>	\$0 (Tier 4)	
<i>hydrocortisone 1% cream; hydrocortisone 1% ointment; hydrocortisone 100 mg/60 ml; hydrocortisone 2.5% cream; hydrocortisone 2.5% lotion; hydrocortisone 2.5% ointment^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>hydrocortisone plus 1 % topical cream</i>	\$0 (Tier 4)	
<i>eq hydrocortisone-aloe 1% crm</i>	\$0 (Tier 4)	
<i>hydrocream 1 % topical</i>	\$0 (Tier 4)	
<i>hydrolatum topical ointment</i>	\$0 (Tier 4)	
<i>hydroskin with aloe 1 % cream</i>	\$0 (Tier 4)	
<i>i-prin 200 mg tablet</i>	\$0 (Tier 4)	
<i>ibu-drops 50 mg/1.25 ml oral drops,suspension</i>	\$0 (Tier 4)	
<i>ibuprofen 100 mg, 200 mg tablet; ibuprofen 200 mg softgel; ibuprofen jr str 100 mg tb chw; sm ibuprofen ib 100 mg, 200 mg tablet</i>	\$0 (Tier 4)	
<i>ibuprofen 100 mg/5 ml susp; ibuprofen 400 mg, 600 mg, 800 mg tablet^{MO}</i>	Up to \$3.30 (Tier 1)	
<i>ibuprofen cold-sinus (with pseudoephedrine) 30 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>ibuprofen ib 100 mg chewable tablet; ibuprofen ib 200 mg tablet</i>	\$0 (Tier 4)	
<i>ibuprofen jr strength 100 mg chewable tablet</i>	\$0 (Tier 4)	
<i>ibuprofen pm 200 mg-25 mg capsule; ibuprofen pm 200 mg-38 mg tablet</i>	\$0 (Tier 4)	
<i>cvs ibuprofen pm caplet</i>	\$0 (Tier 4)	
<i>pv ibuprofen-diphenhydram cap</i>	\$0 (Tier 4)	
ICAR 15 MG/1.25 ML ORAL SUSPENSION	\$0 (Tier 4)	
ICAR-C 100 MG-250 MG TABLET	\$0 (Tier 4)	
<i>ice blue gel 2 % topical</i>	\$0 (Tier 4)	
<i>pv ice gel</i>	\$0 (Tier 4)	
<i>iferex 150 150 mg iron capsule</i>	\$0 (Tier 4)	
IMODIUM A-D 1 MG/7.5 ML ORAL LIQUID	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>infant fever reducer-pain relief 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>infant pain reliever 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>infant's acetaminophen 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
INFANT'S MOTRIN 50 MG/1.25 ML ORAL DROPS,SUSPENSION	\$0 (Tier 4)	
<i>pv infant non-asa 80 mg/0.8 ml</i>	\$0 (Tier 4)	
<i>infant's pain relief 160 mg/5 ml oral suspension; infant's pain relief 80 mg/0.8 ml oral drops,suspension</i>	\$0 (Tier 4)	
<i>infant's pain reliever 80 mg/0.8 ml oral drops,suspension</i>	\$0 (Tier 4)	
INFANT'S TYLENOL 160 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>infants gas relief 40 mg/0.6 ml oral drops,suspension</i>	\$0 (Tier 4)	
<i>infants ibu-drops 50 mg/1.25 ml oral drops,suspension</i>	\$0 (Tier 4)	
<i>infants profenib 50 mg/1.25 ml oral drops,suspension</i>	\$0 (Tier 4)	
<i>infants' pain and fever 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>infants' pain relief 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>insect repellent (deet) 15 % topical spray</i>	\$0 (Tier 4)	
INSECT REPELLENT (PICARIDIN) 20 % TOPICAL SPRAY WITH PUMP	\$0 (Tier 4)	
<i>inzo antifungal 2 % topical cream</i>	\$0 (Tier 4)	
<i>iodides tincture topical</i>	\$0 (Tier 4)	
<i>iophen-c nr liquid</i>	\$0 (Tier 4)	
<i>iophen dm-nr liquid</i>	\$0 (Tier 4)	
<i>iophen nr liquid</i>	\$0 (Tier 4)	
<i>iron 100-vitamin c tablet</i>	\$0 (Tier 4)	
GNP ISOPROPYL ALCOHOL 91%; GNP ISOPROPYL ALCOHOL 99%; SWAN ISOPROPYL ALCOHOL 70%	\$0 (Tier 4)	
<i>isopropyl alcohol-wintergreen topical liquid</i>	\$0 (Tier 4)	
ISOPTO TEARS 0.5 % EYE DROPS	\$0 (Tier 4)	
<i>itch relief 2 %-0.1 % topical cream</i>	\$0 (Tier 4)	
<i>itch relief (clotrimazole) 1 % topical cream</i>	\$0 (Tier 4)	
J-MAX SYRUP	\$0 (Tier 4)	
J-TAN PD DROPS	\$0 (Tier 4)	
<i>jock itch 1 % topical spray powder</i>	\$0 (Tier 4)	
<i>jock itch (clotrimazole) 1 % topical cream</i>	\$0 (Tier 4)	
<i>jock itch (terbinafine) 1 % topical cream</i>	\$0 (Tier 4)	
<i>jr. acetaminophen 160 mg, 160 mg disintegrating tablet</i>	\$0 (Tier 4)	
<i>jr. str non-aspirin pain 160 mg disintegrating tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>jr. strength pain reliever 160 mg disintegrating tablet</i>	\$0 (Tier 4)	
<i>junior mapap 160 mg rapid tab</i>	\$0 (Tier 4)	
<i>kao-tin (bismuth subsalicylate) 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>kao-tin (docusate calcium) 240 mg capsule</i>	\$0 (Tier 4)	
KAOPLECTATE (DOCUSATE CALCIUM) 240 MG CAPSULE	\$0 (Tier 4)	
<i>kaoplectate ex str (bismuth ss) 525 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>ketotifen fum 0.025% eye drops</i>	\$0 (Tier 4)	
<i>kidkare cough/cold 1 mg-15 mg-5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>konsyl (sugar) 3.4 gram, 3.4 gram/11 gram, 3.4 gram/12 gram oral powder; konsyl (sugar) 3.4 gram, 3.4 gram/11 gram, 3.4 gram/12 gram oral powder packet</i>	\$0 (Tier 4)	
<i>konsyl fiber 625 mg tablet</i>	\$0 (Tier 4)	
<i>konsyl sugar-free 0.52 gram capsule</i>	\$0 (Tier 4)	
LAC-HYDRIN FIVE 5 % LOTION	\$0 (Tier 4)	
LAMISIL (AEROSOL) 1 % TOPICAL SPRAY	\$0 (Tier 4)	
<i>lamisil af 1 % topical spray powder</i>	\$0 (Tier 4)	
<i>lamisil at 1 % topical cream</i>	\$0 (Tier 4)	
LAMISIL AT 1 % TOPICAL GEL	\$0 (Tier 4)	
<i>lansoprazole dr 15 mg capsule^{MO}</i>	Up to \$3.30 (Tier 1)	QL (60 per 30 days)
<i>laxative stool softener with senna 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
<i>laxacin 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
<i>laxaclear 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>laxative (bisacodyl) 5 mg, 5 mg tablet; laxative (bisacodyl) 5 mg, 5 mg tablet, delayed release</i>	\$0 (Tier 4)	
<i>laxative (glycerin-pediatric) rectal suppository</i>	\$0 (Tier 4)	
<i>laxative (sennosides) 15 mg chewable tablet; laxative (sennosides) 15 mg, 25 mg tablet; pv laxative 15 mg, 25 mg tablet</i>	\$0 (Tier 4)	
<i>laxative feminine 5 mg tablet</i>	\$0 (Tier 4)	
<i>laxative maximum strength 25 mg tablet</i>	\$0 (Tier 4)	
<i>laxative peg 3350 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>laxative pills 25 mg tablet</i>	\$0 (Tier 4)	
<i>laxative pills regular 15 mg tablet</i>	\$0 (Tier 4)	
<i>laxative plus stool softener 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
<i>lc-5 5 % topical cream</i>	\$0 (Tier 4)	
<i>levonorgestrel 1.5 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
lice complete kit 1-2-3 4 %-0.33 %-0.5 % topical kit	\$0 (Tier 4)	
lice killing 0.33 %-4 % shampoo	\$0 (Tier 4)	
lice killing (permethrin) 1 % topical liquid	\$0 (Tier 4)	
lice pyrinyl shampoo 0.33 %-4 %	\$0 (Tier 4)	
lice solution 4 %-0.33 %-0.5 % topical kit	\$0 (Tier 4)	
lice treatment 0.33 %-4 % shampoo; lice treatment 1 % topical liquid	\$0 (Tier 4)	
lice treatment (permethrin) 1 % topical liquid	\$0 (Tier 4)	
lidocaine 4% cream; lidocaine anorectal 5% cream	\$0 (Tier 4)	
LIP TREATMENT TOPICAL JELLY	\$0 (Tier 4)	
liqubid d-r 10 mg-400 mg tablet	\$0 (Tier 4)	
liquid antacid 200 mg-200 mg-20 mg/5 ml oral suspension; liquid antacid 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
liquitears 1.4 % eye drops	\$0 (Tier 4)	
lite coat aspirin 325 mg tablet	\$0 (Tier 4)	
little remedies 0.65 % nasal spray aerosol	\$0 (Tier 4)	
little remedies fever and pain reliever 160 mg/5 ml oral liquid	\$0 (Tier 4)	
LMX 5 5 % TOPICAL CREAM	\$0 (Tier 4)	
LODRANE D 4 MG-60 MG CAPSULE	\$0 (Tier 4)	
lohist - d 2 mg-30 mg/5 ml oral liquid	\$0 (Tier 4)	
lohist-dm 2 mg-5 mg-10 mg/5 ml oral liquid	\$0 (Tier 4)	
long acting nasal decongestant (pse) 120 mg tablet,extended release	\$0 (Tier 4)	
long acting nasal spray 0.05 %	\$0 (Tier 4)	
loperamide 1 mg/5 ml solution; loperamide 2 mg tablet	\$0 (Tier 4)	
loperamide 2 mg capsule ^{MO}	Up to \$3.30 (Tier 1)	
loradamed 10 mg tablet	\$0 (Tier 4)	
lorata-d 10 mg-240 mg tablet,extended release	\$0 (Tier 4)	
lorata-dine d 10 mg-240 mg tablet,extended release	\$0 (Tier 4)	
loratadine 10 mg, 10 mg tablet; loratadine 5 mg/5 ml syrup; sm loratadine 10 mg, 10 mg odt	\$0 (Tier 4)	
loratadine-d 10 mg-240 mg tablet,extended release 24 hr; loratadine-d 5 mg-120 mg tablet,extended release 12 hr	\$0 (Tier 4)	
LORTUSS DM 6.25 MG-30 MG-15 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
lortuss ex 30 mg-10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
LORTUSS LQ 6.25 MG-30 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
lotrimin af 2 % topical powder; lotrimin af 2 % topical spray	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
LOTRIMIN AF (CLOTRIMAZOLE) 1 % TOPICAL CREAM	\$0 (Tier 4)	
<i>lotrimin af jock itch powder 2 % topical spray</i>	\$0 (Tier 4)	
<i>lotrimin af powder 2 % topical spray</i>	\$0 (Tier 4)	
<i>lotrimin ultra 1 % topical cream</i>	\$0 (Tier 4)	
<i>lubricant dry eye relief 1 % eye liquid gel drops</i>	\$0 (Tier 4)	
<i>lubricant eye 57.3 %-42.5 % ointment; lubricant eye 83 %-15 % ointment</i>	\$0 (Tier 4)	
<i>lubricant eye (cmc-glycerin) (pf) 0.5 %-0.9 % drops in a dropperette</i>	\$0 (Tier 4)	
<i>lubricant eye (cmc-glycerin) 0.5 %-0.9 % drops</i>	\$0 (Tier 4)	
<i>lubricant eye (pg-peg 400) 0.4 %-0.3 % drops</i>	\$0 (Tier 4)	
<i>lubricant eye (pg-peg 400) (pf) 0.4 %-0.3 % drops in a dropperette</i>	\$0 (Tier 4)	
<i>pv lubricant 1.4 % eye drops</i>	\$0 (Tier 4)	
<i>lubricant eye drops 0.5 %; lubricant eye drops 0.5 % drops in a dropperette</i>	\$0 (Tier 4)	
<i>lubricant gel 0.25 %-0.3 % eye liquid gel drops</i>	\$0 (Tier 4)	
<i>lubricant plus 0.5 % eye drops in a dropperette</i>	\$0 (Tier 4)	
<i>lubricating drops 0.5 %-0.9 % eye drops</i>	\$0 (Tier 4)	
<i>lubricating plus 0.5 % eye drops in a dropperette</i>	\$0 (Tier 4)	
<i>lubricating relief 0.4 %-0.3 % eye drops</i>	\$0 (Tier 4)	
<i>lubrifresh pm 83 %-15 % eye ointment</i>	\$0 (Tier 4)	
<i>m-clear wc 6.3 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
M-END DMX 0.667 MG-20 MG-10 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
M-END MAX D LIQUID	\$0 (Tier 4)	
M-END PE 1.33 MG-3.33 MG-6.33 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
MAALOX ADVANCED 1,000 MG-60 MG CHEWABLE TABLET; MAALOX ADVANCED 200 MG-200 MG-20 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>maalox maximum strength 400 mg-400 mg-40 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
MAG-AL 200 MG-200 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
MAG-AL PLUS 200 MG-200 MG-20 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>mag-al plus extra strength 400 mg-400 mg-40 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>mag-g 27 mg (500 mg) tablet</i>	\$0 (Tier 4)	
<i>maglox 200 mg-200 mg-20 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>magnesium citrate solution</i>	\$0 (Tier 4)	
<i>magnesium gluc 500 mg tablet</i>	\$0 (Tier 4)	
<i>mag-oxide magnesium 200 mg tab; magnesium 200 mg magnesium, 420 mg, 500 mg tablet; magnesium oxide 200 mg magnesium, 420 mg, 500 mg tablet</i>	\$0 (Tier 4)	
MAGOX 400 MG TABLET	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
major-prep hemorrhoidal 0.25 %-14 %-74.9 % ointment	\$0 (Tier 4)	
mapap (acetaminophen) 160 mg/5 ml oral suspension; mapap (acetaminophen) 160 mg/5 ml, 500 mg/15 ml oral liquid; mapap (acetaminophen) 325 mg tablet; mapap (acetaminophen) 80 mg chewable tablet	\$0 (Tier 4)	
mapap arthritis pain 650 mg tablet, extended release	\$0 (Tier 4)	
mapap cold formula 5 mg-10 mg-325 mg tablet	\$0 (Tier 4)	
mapap extra strength 500 mg tablet	\$0 (Tier 4)	
mapap pm 25 mg-500 mg tablet	\$0 (Tier 4)	
mapap sinus maximum strength (pe) 5 mg-325 mg tablet	\$0 (Tier 4)	
MAR-COF BP 2 MG-30 MG-7.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
MAR-COF CG 7.5 MG-225 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
masanti double strength 400 mg-400 mg-40 mg/5 ml oral suspension	\$0 (Tier 4)	
masophen 325 mg, 500 mg tablet	\$0 (Tier 4)	
MAXIMUM D3 10,000 UNIT CAPSULE	\$0 (Tier 4)	
ra maximum strength flu tablet	\$0 (Tier 4)	
maxiphen 10 mg-400 mg tablet	\$0 (Tier 4)	
MAXIPHEN DM 10 MG-20 MG-400 MG TABLET	\$0 (Tier 4)	
meclizine 12.5 mg, 25 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
meclizine 25 mg tablet chew	\$0 (Tier 4)	
medi pads topical	\$0 (Tier 4)	
medi-laxx tablet	\$0 (Tier 4)	
medi-meclizine 25 mg tablet	\$0 (Tier 4)	
MEDICATED BODY POWDER	\$0 (Tier 4)	
medicated chest rub topical ointment	\$0 (Tier 4)	
medicated pads topical pads	\$0 (Tier 4)	
medicidin-d 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
mediproxen 220 mg tablet	\$0 (Tier 4)	
men-phor 0.5 %-0.5 % lotion	\$0 (Tier 4)	
METAMUCIL 0.52 GRAM CAPSULE	\$0 (Tier 4)	
METAMUCIL (WITH SUGAR) 3.4 GRAM, 3.4 GRAM/12 GRAM, 3.4 GRAM/12 GRAM, 3.4 GRAM/7 GRAM ORAL POWDER; METAMUCIL (WITH SUGAR) 3.4 GRAM, 3.4 GRAM/12 GRAM, 3.4 GRAM/12 GRAM, 3.4 GRAM/7 GRAM ORAL POWDER PACKET	\$0 (Tier 4)	
METAMUCIL FIBER SINGLES 3.4 GRAM ORAL POWDER PACKET	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
METAMUCIL SUGAR-FREE (ASPARTAME) 3.4 GRAM/5.8 GRAM ORAL POWDER	\$0 (Tier 4)	
<i>mgo 400 mg tablet</i>	\$0 (Tier 4)	
<i>mi-acid 200 mg-200 mg-20 mg/5 ml oral suspension; mi-acid 400 mg-400 mg-40 mg/5 ml oral suspension; mi-acid 700 mg-300 mg chewable tablet</i>	\$0 (Tier 4)	
<i>mi-acid gas relief 80 mg chewable tablet</i>	\$0 (Tier 4)	
<i>micatin 2 % topical cream</i>	\$0 (Tier 4)	
<i>miconazole 7 100 mg vaginal suppository; miconazole 7 2 % vaginal cream</i>	\$0 (Tier 4)	
<i>eq miconazole nitrate 2% crm; miconazole 100 mg vag supp; miconazole 2% spray powder; pv miconazole nitrate 2% cream</i>	\$0 (Tier 4)	
<i>miconazole-3 200 mg-2 % (9 gram) vaginal kit</i>	\$0 (Tier 4)	
<i>miconazole 3 combo pack</i>	\$0 (Tier 4)	
<i>miconazorb af 2 % topical powder</i>	\$0 (Tier 4)	
<i>micro-guard 2 % topical powder</i>	\$0 (Tier 4)	
MIDOL (NAPROXEN) 220 MG TABLET	\$0 (Tier 4)	
<i>migraine formula 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>pv migraine pain-reliever tab</i>	\$0 (Tier 4)	
<i>migraine relief 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>milk of magnesia 400 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>milk of magnesia concentrated 2,400 mg/10 ml oral suspension</i>	\$0 (Tier 4)	
<i>mineral freez 2 % topical gel</i>	\$0 (Tier 4)	
<i>gnp mineral oil enema</i>	\$0 (Tier 4)	
<i>minoxidil 5% solution</i>	\$0 (Tier 4)	
<i>mintox 200 mg-200 mg-20 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>mintox maximum strength 400 mg-400 mg-40 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>mintox plus 200 mg-200 mg-25 mg chewable tablet</i>	\$0 (Tier 4)	
MIRALAX 17 GRAM, 17 GRAM/DOSE ORAL POWDER; MIRALAX 17 GRAM, 17 GRAM/DOSE ORAL POWDER PACKET	\$0 (Tier 4)	
<i>moisturizing lubricant 0.5 % eye drops</i>	\$0 (Tier 4)	
MONISTAT 1 COMBO PACK 1,200 MG-2 % VAGINAL OVULE AND CREAM	\$0 (Tier 4)	
MONISTAT 3 4 % (200 MG)-2 % (9 GRAM)VAGINAL PACK,PREFIL APPL AND CREAM; MONISTAT 3 200 MG-2 % (9 GRAM) VAGINAL KIT	\$0 (Tier 4)	
MONISTAT 7 2 % VAGINAL CREAM	\$0 (Tier 4)	
<i>motion relief (meclizine) 25 mg tablet</i>	\$0 (Tier 4)	
<i>motion sickness 50 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>motion sickness (meclizine) 25 mg tablet</i>	\$0 (Tier 4)	
<i>motion sickness ii 25 mg tablet</i>	\$0 (Tier 4)	
<i>motion sickness relief 50 mg tablet</i>	\$0 (Tier 4)	
<i>pv motion sickness rel ii tab</i>	\$0 (Tier 4)	
<i>motion sickness relief (meclizine) 25 mg chewable tablet; motion sickness relief (meclizine) 25 mg tablet</i>	\$0 (Tier 4)	
<i>motion-time 25 mg chewable tablet</i>	\$0 (Tier 4)	
<i>motrin pm 200 mg-38 mg tablet</i>	\$0 (Tier 4)	
<i>move it along 100 mg tablet</i>	\$0 (Tier 4)	
<i>mucaphed tablet</i>	\$0 (Tier 4)	
MUCINEX 1,200 MG, 600 MG TABLET, EXTENDED RELEASE	\$0 (Tier 4)	
MUCINEX COLD & SINUS LIQUID	\$0 (Tier 4)	
MUCINEX COUGH MINI-MELTS 5 MG-100 MG ORAL GRANULES IN PACKET	\$0 (Tier 4)	
MUCINEX D 60 MG-600 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
MUCINEX D MAXIMUM STRENGTH 120 MG-1,200 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
MUCINEX DM 60 MG-1,200 MG TABLET,EXTENDED RELEASE 12 HR	\$0 (Tier 4)	
MUCINEX FAST-MAX COLD-FLU-SORE THROAT 5 MG-10 MG-325 MG-200 MG CAPSULE	\$0 (Tier 4)	
MUCINEX FAST-MAX CONGESTION-COUGH 2.5 MG-5 MG-100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>mucinex fast-max congestion-headache 5 mg-10 mg-325 mg capsule</i>	\$0 (Tier 4)	
MUCINEX FAST-MAX DAYCONGES-COUGH-NT COLD-FLU 25-10-650MG/20ML ORAL LIQ; MUCINEX FAST-MAX DAYCONGEST-COUGH-NITECOLD-FLU 5MG/25-5-325 MG(NT) TAB	\$0 (Tier 4)	
MUCINEX FAST-MAX DAY COLD-NT COLD-FLU(DOXYLAM)6.25-5-10-325MG(NT) CAP	\$0 (Tier 4)	
<i>mucinex fast-max dm max 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>mucinex fast-max nite cold-flu</i>	\$0 (Tier 4)	
<i>mucinex fast-max nite cold-flu</i>	\$0 (Tier 4)	
MUCINEX FAST-MAX NITE COLD-FLU 12.5 MG-5 MG-325 MG/10 ML ORAL LIQUID	\$0 (Tier 4)	
MUCINEX FAST-MAX SEVERE COLD 10 MG-20 MG-650 MG/20 ML ORAL LIQUID	\$0 (Tier 4)	
<i>mucinex fast-max cold-sinus cp</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
MUCINEX FAST-MAX DAY SEV COLD-NITE COLD-FLU 10 MG-650 MG/20 ML LIQUID; MUCINEX FAST-MAX DAY SEV COLD-NITE COLD-FLU 5 MG-325 MG-200 MG TABLETS	\$0 (Tier 4)	
MUCINEX MINI-MELTS 100 MG ORAL GRANULES IN PACKET	\$0 (Tier 4)	
<i>mucinex sinus-max nasal spray</i>	\$0 (Tier 4)	
MUCINEX SINUS-MAX DAY-NIGHT TB	\$0 (Tier 4)	
MUCINEX SINUS-MAX DY-NT LIQGEL	\$0 (Tier 4)	
MUCINEX SINUS-MAX NITE CONGEST	\$0 (Tier 4)	
MUCINEX SINUS-MAX PRESSURE LIQ	\$0 (Tier 4)	
MUCINEX SINUS-MAX CONGEST RLF	\$0 (Tier 4)	
MUCINEX SINUS-MAX SEV CONGESTION 10 MG-650 MG-400 MG/20 ML ORAL LIQUID	\$0 (Tier 4)	
<i>mucinex sinus-max sev congestion 5 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucosa 400 mg tablet</i>	\$0 (Tier 4)	
<i>mucosa dm 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>mucus and cough relief 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>mucus d 60 mg-600 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>mucus relief 200 mg, 400 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief chest 400 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief cold and sinus 10 mg-650 mg-400 mg/20 ml oral liquid; mucus relief cold and sinus 5 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief cold-flu-sore throat 10 mg-20 mg-650 mg/20 ml oral liquid; mucus relief cold-flu-sore throat 5 mg-10 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief congestion-cough 2.5 mg-5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>mucus relief cough 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>pv mucus relief d tablet</i>	\$0 (Tier 4)	
<i>mucus relief d (pseudoephed) 120 mg-1,200 mg tablet,extended release; mucus relief d (pseudoephed) 60 mg-600 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>mucus relief dm 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief dm max 5 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>mucus relief er 1,200 mg, 600 mg tablet, extended release</i>	\$0 (Tier 4)	
<i>mucus relief pe 10 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>ra mucus relief plus caplet</i>	\$0 (Tier 4)	
<i>mucus relief sev congest-cold 5 mg-10 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief severe cold 10 mg-20 mg-650 mg/20 ml oral liquid; mucus relief severe cold 5 mg-10 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
MUCUS RELIEF SINUS 10 MG-400 MG TABLET	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>mucus relief sinus pressure and pain 5 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucus relief severe sinus congestion 5 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>mucus-er max 1,200 mg tablet, extended release</i>	\$0 (Tier 4)	
<i>multi antibiotic plus 3.5 mg-10,000 unit-10 mg/gram topical cream</i>	\$0 (Tier 4)	
<i>multi-symptom cold(with phenylephrine) 5 mg-10 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
<i>multi-symptom cold (pe-cpm) 1 mg-2.5 mg-5 mg-160 mg/5 ml oral susp</i>	\$0 (Tier 4)	
<i>ra multi-symptom cold caplet</i>	\$0 (Tier 4)	
<i>ra multi-symptom cold caplet</i>	\$0 (Tier 4)	
MURINE EAR 6.5 % DROPS	\$0 (Tier 4)	
<i>murine ear wax removal system 6.5 % drops</i>	\$0 (Tier 4)	
<i>muro 128 2 % eye drops; muro 128 5 % eye ointment</i>	\$0 (Tier 4)	
MURO 128 5 % EYE DROPS	\$0 (Tier 4)	
<i>pv muscle relief 0.075% cream</i>	\$0 (Tier 4)	
<i>myco nail a 25 % topical solution</i>	\$0 (Tier 4)	
<i>myferon 150 150 mg iron capsule</i>	\$0 (Tier 4)	
<i>mytab gas 80 mg chewable tablet</i>	\$0 (Tier 4)	
<i>mytab gas maximum strength 125 mg chewable tablet</i>	\$0 (Tier 4)	
<i>naphcon-a 0.025 %-0.3 % eye drops</i>	\$0 (Tier 4)	
<i>naproxen sodium 220 mg caplet</i>	\$0 (Tier 4)	
<i>nasal allergy symptom control 5.2 mg/spray (4 %) spray</i>	\$0 (Tier 4)	
<i>nasal-sinus decongest tab</i>	\$0 (Tier 4)	
<i>nasal decongest-antihist tab</i>	\$0 (Tier 4)	
<i>nasal decongestant (oxymetazoline) 0.05 % spray</i>	\$0 (Tier 4)	
<i>eql nasal decngstnt nose drops</i>	\$0 (Tier 4)	
<i>nasal decongestant (phenylephrine) 10 mg tablet</i>	\$0 (Tier 4)	
<i>nasal decongestant (pseudoephedrine) 120 mg tablet,extended release; nasal decongestant (pseudoephedrine) 30 mg tablet</i>	\$0 (Tier 4)	
NASAL DECONGESTANT (PSEUDOEPHEDRINE) 30 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>nasal decongest-antihist tab</i>	\$0 (Tier 4)	
<i>nasal four 1 % spray</i>	\$0 (Tier 4)	
<i>nasal moisturizing 0.65 % spray aerosol</i>	\$0 (Tier 4)	
<i>nasal spray (oxymetazoline) 0.05 %</i>	\$0 (Tier 4)	
<i>nasal spray (sodium chloride) 0.65 % aerosol</i>	\$0 (Tier 4)	
<i>nasal spray 12 hour 0.05 %; nasal spray 12 hour 0.05 % mist</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>eql sinus nasal spray</i>	\$0 (Tier 4)	
<i>nasal spray extra moisturizing 0.05 %</i>	\$0 (Tier 4)	
<i>nasal spray long acting 0.05 %</i>	\$0 (Tier 4)	
<i>v-r nasal spry moisturizing</i>	\$0 (Tier 4)	
<i>nasal spray sinus 0.05 %</i>	\$0 (Tier 4)	
NASALCROM 5.2 MG/SPRAY (4 %) SPRAY	\$0 (Tier 4)	
NASOPEN PE 50 MG-10 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
NATRAPEL 20 % TOPICAL SPRAY	\$0 (Tier 4)	
<i>natura-lax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>natural balance tears drops</i>	\$0 (Tier 4)	
<i>natural calcium 500 mg calcium (1,250 mg) tablet</i>	\$0 (Tier 4)	
<i>natural daily fiber 3.4 gram/5.8 gram oral powder</i>	\$0 (Tier 4)	
<i>natural fiber laxative 0.52 gram capsule</i>	\$0 (Tier 4)	
<i>natural fiber laxative (sugar) 3.4 gram/12 gram, 3.4 gram/7 gram oral powder; natural fiber laxative (sugar) oral powder</i>	\$0 (Tier 4)	
<i>natural fiber laxative therapy oral powder</i>	\$0 (Tier 4)	
<i>natural fiber supplement 3.4 gram oral powder packet</i>	\$0 (Tier 4)	
<i>natural laxative 25 mg tablet</i>	\$0 (Tier 4)	
<i>natural psyllium fiber 3.4 gram/5.8 gram oral powder</i>	\$0 (Tier 4)	
<i>natural senna laxative tab</i>	\$0 (Tier 4)	
<i>natural tears (pf) 0.1 %-0.3 % drops in a dropperette</i>	\$0 (Tier 4)	
<i>natural vegetable powder</i>	\$0 (Tier 4)	
<i>natural vegetable laxative (sennosides) 8.6 mg, 8.6 mg tablet</i>	\$0 (Tier 4)	
<i>natural vegetable oral powder</i>	\$0 (Tier 4)	
<i>natural vegetable (psyllium) oral powder</i>	\$0 (Tier 4)	
<i>nature's tears drops</i>	\$0 (Tier 4)	
<i>nausea control oral solution</i>	\$0 (Tier 4)	
<i>nausea relief oral solution</i>	\$0 (Tier 4)	
<i>neo-synephrine (phenylephrine) 1 % nasal spray</i>	\$0 (Tier 4)	
<i>neo-synephrine 12 hour nasal spray (oxymetazoline) 0.05 %</i>	\$0 (Tier 4)	
NEOSPORIN (NEO-BAC-POLYM) 3.5 MG-400 UNIT-5,000 UNIT/GRAM TOP OINTMENT	\$0 (Tier 4)	
<i>neospurin(neo-bac-polym) 3.5 mg-400 unit-5,000 unit top ointment packt</i>	\$0 (Tier 4)	
NEOSPORIN + PAIN RELIEF 3.5 MG-10,000 UNIT-10 MG/GRAM TOPICAL CREAM	\$0 (Tier 4)	
<i>neospurin 1% anti-itch cream</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
NEOSPORIN PLUS PAIN RELIEF (BACIT) 3.5 MG-500 UNIT-10,000 UNIT/G TOP OINT	\$0 (Tier 4)	
NEPHRO-VITE 0.8 MG TABLET	\$0 (Tier 4)	
NEUTROGENA T-GEL 0.5 % SHAMPOO	\$0 (Tier 4)	
NEUTROGENA T-GEL CONDITIONER	\$0 (Tier 4)	
NEUTROGENA T-SAL SHAMPOO	\$0 (Tier 4)	
<i>niacin 250 mg, 500 mg capsule sa; niacin sa 250 mg, 500 mg capsule</i>	\$0 (Tier 4)	
<i>nicoderm cq 14 mg/24 hr, 21 mg/24 hr, 7 mg/24 hr daily transdermal patch</i>	\$0 (Tier 4)	
<i>nicorelief 2 mg, 4 mg gum</i>	\$0 (Tier 4)	
NICORETTE 2 MG, 2 MG, 4 MG, 4 MG BUCCAL LOZENGE; NICORETTE 2 MG, 2 MG, 4 MG, 4 MG BUCCAL MINI LOZENGE; NICORETTE 2 MG, 4 MG GUM	\$0 (Tier 4)	
<i>eq nicotine 14 mg/24hr patch; nicotine 21 mg/24hr patch; nicotine 7 mg/24hr patch; nicotine transdermal system</i>	\$0 (Tier 4)	
<i>cvs nicotine 2 mg, 4 mg mini lozenge; gnp nicotine 2 mg, 4 mg mini lozenge; nicotine 2 mg, 4 mg chewing gum</i>	\$0 (Tier 4)	
<i>night time 6.25 mg-15 mg-325 mg capsule</i>	\$0 (Tier 4)	
<i>night time cold and flu relief 6.25 mg-15 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>night time cold med liquid</i>	\$0 (Tier 4)	
<i>pv night time cold-flu relief</i>	\$0 (Tier 4)	
<i>night time cough & sore throat</i>	\$0 (Tier 4)	
<i>night time pain medicine 25 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>nighttime sleep 50 mg capsule</i>	\$0 (Tier 4)	
<i>nighttime allergy relief 25 mg tablet</i>	\$0 (Tier 4)	
<i>nighttime cold-flu 6.25 mg-15 mg-325 mg capsule</i>	\$0 (Tier 4)	
<i>nighttime cough 6.25 mg-15 mg/15 ml oral solution</i>	\$0 (Tier 4)	
<i>pv nighttime cough-cold liquid</i>	\$0 (Tier 4)	
<i>nighttime sinus-congestion cp</i>	\$0 (Tier 4)	
<i>nighttime sleep aid (diphenhydramine) 25 mg, 50 mg capsule; nighttime sleep aid (diphenhydramine) 50 mg/30 ml oral liquid</i>	\$0 (Tier 4)	
<i>nighttime sleep-aid (doxylamine) 25 mg tablet</i>	\$0 (Tier 4)	
NINJACOF 12.5 MG-12.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
NINJACOF-A 12.5 MG-12.5 MG-160 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>ninjacof-xg 8 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>nite time cold-flu 6.25 mg-15 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>pv night cold-flu plus liq gel</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
nite time-d cold-flu relief 6.25 mg-30 mg-15mg-500mg/15ml oral liquid	\$0 (Tier 4)	
nite-time cold-flu 6.25 mg-15 mg-325 mg capsule	\$0 (Tier 4)	
nitetime multi-symptom 12.5 mg-30 mg-1,000 mg/30 ml oral liquid	\$0 (Tier 4)	
niva-hist dm 4 mg-7.5 mg-15 mg/5 ml oral liquid	\$0 (Tier 4)	
nivanex dmx 10 mg-15 mg-380 mg tablet	\$0 (Tier 4)	
NIX CREME RINSE 1 % TOPICAL LIQUID	\$0 (Tier 4)	
NO DOZ 200 MG TABLET	\$0 (Tier 4)	
no drip 0.05 % nasal spray	\$0 (Tier 4)	
noble formula 2 % shampoo	\$0 (Tier 4)	
noble formula hc 1 % topical cream	\$0 (Tier 4)	
nohist-dm 4 mg-10 mg-15 mg/5 ml oral liquid	\$0 (Tier 4)	
nohist-lq 4 mg-10 mg/5 ml oral liquid	\$0 (Tier 4)	
non-aspirin 160 mg/5 ml oral elixir; non-aspirin 160 mg/5 ml oral suspension; non-aspirin 325 mg tablet; non-aspirin 80 mg chewable tablet	\$0 (Tier 4)	
pv non-aspirin 8-hr 650 mg	\$0 (Tier 4)	
non-aspirin child 120 mg sup	\$0 (Tier 4)	
non-aspirin 500 mg softgel; non-aspirin extra strength 500 mg tablet; non-aspirin extra strength 500 mg/15 ml oral liquid	\$0 (Tier 4)	
non-aspirin nighttime 25 mg-500 mg tablet	\$0 (Tier 4)	
non-aspirin pain relief 325 mg, 500 mg tablet	\$0 (Tier 4)	
non-aspirin pain relief pm 25 mg-500 mg tablet	\$0 (Tier 4)	
non-aspirin pm 25 mg-500 mg tablet	\$0 (Tier 4)	
pv non-asa severe congest cplt	\$0 (Tier 4)	
non-drowsy allergy 10 mg tablet	\$0 (Tier 4)	
nortemp 160 mg/5 ml oral suspension; nortemp 80 mg/0.8 ml oral drops	\$0 (Tier 4)	
nose drops 1 %	\$0 (Tier 4)	
nose drops extra strength 1 %	\$0 (Tier 4)	
nose 0.05% spray pump	\$0 (Tier 4)	
nts step 1 21 mg/24 hr transdermal 24 hour patch	\$0 (Tier 4)	
pv nu-way 1% nasal spray	\$0 (Tier 4)	
NU-IRON 150 MG IRON CAPSULE	\$0 (Tier 4)	
nuzole 2% cream	\$0 (Tier 4)	
nyquil d cold & flu liquid	\$0 (Tier 4)	
pv nyt-time sleep 25 mg caplet	\$0 (Tier 4)	
nytol 25 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
OCEAN FOR KIDS 0.65% NASAL SPY	\$0 (Tier 4)	
OCEAN NASAL 0.65 % SPRAY AEROSOL	\$0 (Tier 4)	
odor control foot-sneaker 1 % topical spray powder	\$0 (Tier 4)	
off active 15 % topical spray	\$0 (Tier 4)	
off deep woods 25 % topical pump spray; off deep woods 25 % topical spray	\$0 (Tier 4)	
off deep woods dry 25 % topical spray powder	\$0 (Tier 4)	
off deep woods sportsmen 25 %, 98.25 % topical spray pump; off deep woods sportsmen 30 % topical spray	\$0 (Tier 4)	
off familycare (with deet) 15 % topical spray powder; off familycare (with deet) 5 %, 7 % topical spray	\$0 (Tier 4)	
off familycare (with picaridin) 5 % topical spray with pump	\$0 (Tier 4)	
omeprazole mag dr 20.6 mg cap	\$0 (Tier 4)	
opcicon one-step 1.5 mg tablet	\$0 (Tier 4)	
opti-clear 0.05 % eye drops	\$0 (Tier 4)	
ora relief 1.4 % mucosal spray	\$0 (Tier 4)	
oral relief sore throat spray 1.4 % aerosol	\$0 (Tier 4)	
ORASEP 2 %-0.5 %-0.1 % MUCOSAL SPRAY	\$0 (Tier 4)	
original nasal spray 0.05 %	\$0 (Tier 4)	
ormir 50 mg capsule	\$0 (Tier 4)	
pub oxymetazoline hcl 0.05%	\$0 (Tier 4)	
oysco-500 500 mg calcium (1,250 mg) tablet	\$0 (Tier 4)	
oyster shell calcium 500 mg calcium (1,250 mg) tablet	\$0 (Tier 4)	
oyster shell calcium 500 500 mg calcium (1,250 mg) tablet	\$0 (Tier 4)	
oyster shell calcium-vit d tab	\$0 (Tier 4)	
PAIN AND FEVER 325 MG, 500 MG TABLET	\$0 (Tier 4)	
pain and sleep 25 mg-500 mg tablet	\$0 (Tier 4)	
pain relief 160 mg/5 ml oral liquid; pain relief 500 mg capsule; pain relief 500 mg tablet; pain relief 650 mg tablet, extended release	\$0 (Tier 4)	
pain relief (acetaminophen-aspirin-caff) 250 mg-250 mg-65 mg tablet	\$0 (Tier 4)	
pain relief adult 500 mg/15 ml oral liquid	\$0 (Tier 4)	
pain relief allergy sinus 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
pain relief cold and cough 1,000 mg-30 mg/30 ml oral liquid	\$0 (Tier 4)	
pain relief extra strength 500 mg tablet	\$0 (Tier 4)	
pain relief pm 25 mg-500 mg tablet	\$0 (Tier 4)	
pain relief pm rapid release 25 mg-500 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>pain relief regular strength 325 mg tablet</i>	\$0 (Tier 4)	
<i>pain relief sinus pe 5 mg-325 mg tablet</i>	\$0 (Tier 4)	
<i>pain reliever 325 mg, 500 mg tablet; pain reliever 500 mg capsule</i>	\$0 (Tier 4)	
<i>pain reliever (acetaminophen-aspirin) 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>pain reliever extra strength 500 mg tablet</i>	\$0 (Tier 4)	
<i>pain reliever plus 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>pain reliever pm 25 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>pain reliever pm ex-strength 25 mg-500 mg tablet</i>	\$0 (Tier 4)	
<i>pain relieving (methyl salicylate-menthol) 15 %-1 % topical cream</i>	\$0 (Tier 4)	
<i>pain-off 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>pamprin max 250 mg-250 mg-65 mg tablet</i>	\$0 (Tier 4)	
PANOXYL 10 % BAR; PANOXYL 3 % TOPICAL CREAM	\$0 (Tier 4)	
<i>panoxyl 10 % topical cleanser</i>	\$0 (Tier 4)	
<i>panoxyl-4 4 % topical cleanser</i>	\$0 (Tier 4)	
PEDI-BORO SOAK 839 MG-1,191 MG TOPICAL POWDER IN PACKET	\$0 (Tier 4)	
<i>sm pedia relief liquid</i>	\$0 (Tier 4)	
PEDIA RELIEF COUGH-COLD 1 MG-15 MG-5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>pediacare fever reducer 160 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>pediacare multi-symptom cold 2.5 mg-5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>pediatric cough and cold 1 mg-15 mg-5 mg/5 ml oral liquid; pediatric cough-cold syrup</i>	\$0 (Tier 4)	
<i>peg3350 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>pep-t-med 262 mg chewable tablet</i>	\$0 (Tier 4)	
PEPCID AC 10 MG, 20 MG TABLET	\$0 (Tier 4)	
PEPCID COMPLETE 10 MG-800 MG-165 MG CHEWABLE TABLET	\$0 (Tier 4)	
<i>peptic relief 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
PEPTO-BISMOL 262 MG CHEWABLE TABLET; PEPTO-BISMOL 262 MG/15 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>pepto-bismol 262 mg tablet</i>	\$0 (Tier 4)	
PEPTO-BISMOL MAX ST 525 MG/15 ML ORAL SUSPENSION	\$0 (Tier 4)	
PEPTO-BISMOL TO-GO 262 MG CHEWABLE TABLET	\$0 (Tier 4)	
PERCOGESIC 12.5 MG-325 MG TABLET	\$0 (Tier 4)	
PERDIEM OVERNIGHT RELIEF 15 MG TABLET	\$0 (Tier 4)	
PERI-COLACE TABLET	\$0 (Tier 4)	
PERIGUARD TOPICAL OINTMENT	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>cvs permethrin 1% lotion</i>	\$0 (Tier 4)	
PERSA-GEL 10 % TOPICAL	\$0 (Tier 4)	
PETROLEUM JELLY TOPICAL	\$0 (Tier 4)	
PETROLEUM JELLY, WHITE TOPICAL	\$0 (Tier 4)	
<i>pharbecchlor 4 mg tablet</i>	\$0 (Tier 4)	
<i>pharbedryl 25 mg, 50 mg capsule</i>	\$0 (Tier 4)	
<i>pharbetol 325 mg, 500 mg tablet</i>	\$0 (Tier 4)	
PHAZYME 180 MG CAPSULE	\$0 (Tier 4)	
<i>phenaseptic 1.4 % mucosal spray</i>	\$0 (Tier 4)	
<i>12.5cpd-120gfn-5peh liquid</i>	\$0 (Tier 4)	
<i>15dm-100gfn-5peh liquid; 20dm-100gfn-10peh liquid</i>	\$0 (Tier 4)	
<i>phenylhistine dh liquid</i>	\$0 (Tier 4)	
PHILLIPS MILK OF MAGNESIA 400 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>phillips' liqui-gels 100 mg capsule</i>	\$0 (Tier 4)	
<i>pink bismuth 262 mg chewable tablet; pink bismuth 262 mg tablet; pink bismuth 262 mg/15 ml, 525 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>pink bismuth maximum strength 525 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
PLAN B ONE-STEP 1.5 MG TABLET	\$0 (Tier 4)	
<i>podactin 1% powder</i>	\$0 (Tier 4)	
<i>pv poly bacitracin ointment</i>	\$0 (Tier 4)	
POLY HIST FORTE (DOXYLAMINE) 7.5 MG-10 MG TABLET	\$0 (Tier 4)	
POLY HIST PD 6.25 MG-6.25 MG/ML ORAL DROPS	\$0 (Tier 4)	
POLY-HIST DM (THONZYLAMINE) 25 MG-5 MG-10 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>poly-iron 150 mg iron capsule</i>	\$0 (Tier 4)	
POLY-TUSSIN AC 4 MG-10 MG-10 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
POLY-VENT DM 60 MG-20 MG-380 MG TABLET	\$0 (Tier 4)	
POLY-VENT IR 60 MG-380 MG TABLET	\$0 (Tier 4)	
<i>polyethylene glycol 3350 powd^{MO}</i>	Up to \$3.30 (Tier 1)	
POLYSPORIN 500 UNIT-10,000 UNIT/GRAM TOPICAL OINTMENT	\$0 (Tier 4)	
<i>polyvinyl alcoh 1.4 % eyedrop</i>	\$0 (Tier 4)	
<i>povidone-iodine 10% ointment; povidone-iodine 10% swabstick; povidone-iodine 7.5% scrub; qc povidone-iodine 10% soln</i>	\$0 (Tier 4)	
<i>powderlax 17 gram/dose oral</i>	\$0 (Tier 4)	
<i>pramoxine hcl 1% foam</i>	\$0 (Tier 4)	
<i>pre-moistened hemorrhoidal topical pads</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
PREPARATION H 0.25 %-14 %-74.9 % OINTMENT	\$0 (Tier 4)	
<i>preparation h (witch hazel) 50 % topical pads</i>	\$0 (Tier 4)	
<i>preparation h hydrocortisone 1 % topical cream</i>	\$0 (Tier 4)	
PREPARATION H MAXIMUM STRENGTH 0.25 %-1 % RECTAL CREAM	\$0 (Tier 4)	
PREPARATION H (PHENYLEPHRINE,WITCH HAZEL) 0.25 %-50 % TOPICAL GEL	\$0 (Tier 4)	
PREPARATION H(PHENYLEPH,COCOA BUTTR) 0.25 %-88.44 % RECTAL SUPPOSITORY	\$0 (Tier 4)	
<i>pres gen 5 mg-10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>presgen b 4 mg-10 mg-20 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>pv pressure-pain caplet</i>	\$0 (Tier 4)	
<i>pressure-pain pe plus mucus 5 mg-325 mg-200 mg tablet</i>	\$0 (Tier 4)	
PREVACID 24HR 15 MG CAPSULE,DELAYED RELEASE	\$0 (Tier 4)	
PRIOSEC OTC 20 MG TABLET,DELAYED RELEASE	\$0 (Tier 4)	
PRIMATENE ASTHMA 12.5 MG-200 MG TABLET	\$0 (Tier 4)	
PRO-CHLO LIQUID	\$0 (Tier 4)	
PRO-CLEAR AC SYRUP	\$0 (Tier 4)	
PRO-RED AC (WITH DEXCHLORPHENIRAMINE) 1 MG-5 MG-9 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>promolaxin 100 mg tablet</i>	\$0 (Tier 4)	
PROSHIELD PLUS 1 % TOPICAL OINTMENT	\$0 (Tier 4)	
<i>protective ointment</i>	\$0 (Tier 4)	
<i>provil 200 mg tablet</i>	\$0 (Tier 4)	
<i>gnp pseudoephedrine er 120 mg; pseudoephed 30 mg/5 ml soln; pseudoephedrine 30 mg tablet</i>	\$0 (Tier 4)	
<i>guaifenesin-pse er 600-60 mg</i>	\$0 (Tier 4)	
<i>psyllium fiber 0.52 g capsule</i>	\$0 (Tier 4)	
<i>pure and gentle disposable 19 gram-7 gram/118 ml enema</i>	\$0 (Tier 4)	
<i>pure and gentle eye 0.3 % drops</i>	\$0 (Tier 4)	
<i>purelax 17 gram/dose oral powder</i>	\$0 (Tier 4)	
<i>pyridoxine 25 mg, 50 mg tablet</i>	\$0 (Tier 4)	
<i>phenylephrine-pyramine 10-25</i>	\$0 (Tier 4)	
<i>q-dryl 12.5 mg/5 ml liquid; q-dryl 25 mg capsule</i>	\$0 (Tier 4)	
<i>q-pap 160 mg/5 ml liquid; q-pap 325 mg, 500 mg tablet; q-pap ex-str 325 mg, 500 mg tablet</i>	\$0 (Tier 4)	
<i>q-pap ex-str 500 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
q-tapp elixir	\$0 (Tier 4)	
q-tapp dm elixir	\$0 (Tier 4)	
q-tussin 100 mg/5 ml solution	\$0 (Tier 4)	
q-tussin dm syrup	\$0 (Tier 4)	
quenalin 12.5 mg/5 ml syrup	\$0 (Tier 4)	
quit 2 mg buccal lozenge; quit 2 mg gum	\$0 (Tier 4)	
quit 4 mg buccal lozenge; quit 4 mg gum	\$0 (Tier 4)	
racepinephrine 2.25% soln	\$0 (Tier 4)	
ranitidine 15 mg/ml syrup; ranitidine 150 mg, 300 mg capsule; ranitidine 150 mg, 300 mg tablet ^{MO}	Up to \$3.30 (Tier 1)	
react 1.5 mg tablet	\$0 (Tier 4)	
ready-to-use enema 19 gram-7 gram/118 ml	\$0 (Tier 4)	
ready-to-use enema (mineral oil)	\$0 (Tier 4)	
recort plus 1% cream	\$0 (Tier 4)	
rectasmoothe 5 % topical cream	\$0 (Tier 4)	
RECTICARE 5 % TOPICAL CREAM	\$0 (Tier 4)	
redness relief 0.012 %-0.2 % eye drops	\$0 (Tier 4)	
redness reliever eye drops 0.05 %	\$0 (Tier 4)	
refenesen 200 mg, 400 mg tablet	\$0 (Tier 4)	
refenesen dm 20 mg-400 mg tablet	\$0 (Tier 4)	
refenesen pe 10 mg-400 mg tablet	\$0 (Tier 4)	
REFRESH CELLUVISC 1 % EYE GEL IN A DROPPERETTE	\$0 (Tier 4)	
REFRESH CLASSIC (PF) 1.4 %-0.6 % EYE DROPS IN A DROPPERETTE	\$0 (Tier 4)	
REFRESH LACRI-LUBE 56.8 %-42.5 % EYE OINTMENT	\$0 (Tier 4)	
REFRESH OPTIVE ADVANCED 0.5 %-1 %-0.5 % EYE DROPS	\$0 (Tier 4)	
REFRESH OPTIVE ADVANCED (PF) 0.5 %-1 %-0.5 % EYE DROPS IN DROPPERETTE	\$0 (Tier 4)	
REFRESH OPTIVE SENSITIVE (PF) 0.5 %-0.9 % EYE DROPS IN A DROPPERETTE	\$0 (Tier 4)	
REFRESH P.M. 57.3 %-42.5 % EYE OINTMENT	\$0 (Tier 4)	
REFRESH PLUS 0.5 % EYE DROPS IN A DROPPERETTE	\$0 (Tier 4)	
reguloid oral powder	\$0 (Tier 4)	
reguloid capsule	\$0 (Tier 4)	
reguloid, sugar free oral powder	\$0 (Tier 4)	
relcof c 6.3 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
relcof dm 4-15-7.5 mg/5 ml liq	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>relcofir 10 mg-380 mg tablet</i>	\$0 (Tier 4)	
<i>relhist bp 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>relhist dmx 10 mg-15 mg-380 mg tablet</i>	\$0 (Tier 4)	
<i>remedy 4-in-1 cleanser topical liquid</i>	\$0 (Tier 4)	
REMEDY ANTIFUNGAL 2 % TOPICAL CREAM	\$0 (Tier 4)	
<i>remedy antifungal 2 % topical powder</i>	\$0 (Tier 4)	
REMEDY CALAZIME SKIN PASTE 0.4 %-20 % TOPICAL PASTE	\$0 (Tier 4)	
REMEDY CLEANSING BODY 1.5 % TOPICAL CLEANSER	\$0 (Tier 4)	
REMEDY DIMETHICONE CREAM 5 % TOPICAL	\$0 (Tier 4)	
REMEDY NUTRASHIELD SKIN PROTEC 1 % CREAM	\$0 (Tier 4)	
<i>remedy phytoplex antifungal 2 % topical ointment; remedy phytoplex antifungal 2 % topical powder</i>	\$0 (Tier 4)	
REMEDY SKIN REPAIR 1.5 % CREAM	\$0 (Tier 4)	
<i>rena-vite 0.8 mg tablet</i>	\$0 (Tier 4)	
<i>renal vitamin 0.8 mg tablet</i>	\$0 (Tier 4)	
<i>renal-vite 0.8 mg tablet</i>	\$0 (Tier 4)	
<i>repe1 100 98.11 % topical pump spray</i>	\$0 (Tier 4)	
<i>repe1 family 10 % topical spray; repe1 family 15 % topical spray powder</i>	\$0 (Tier 4)	
<i>repe1 hunter's 25 % topical spray</i>	\$0 (Tier 4)	
<i>repe1 sportsmen 25 % topical spray</i>	\$0 (Tier 4)	
<i>repe1 sportsmen dry 25 % topical spray</i>	\$0 (Tier 4)	
<i>repe1 sportsmen max 40 % lotion; repe1 sportsmen max 40 % topical pump spray; repe1 sportsmen max 40 % topical spray</i>	\$0 (Tier 4)	
<i>repe1 tick defense 15 % topical spray</i>	\$0 (Tier 4)	
RESCON 2 MG-60 MG TABLET	\$0 (Tier 4)	
RESCON-DM 2 MG-30 MG-10 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
RESCON-GG 5 MG-100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
RESPAIRE-30 30 MG-150 MG CAPSULE	\$0 (Tier 4)	
<i>pv rest simply 25 mg caplet</i>	\$0 (Tier 4)	
<i>restfully sleep 25 mg tablet</i>	\$0 (Tier 4)	
<i>restore tears 0.5 % eye drops</i>	\$0 (Tier 4)	
<i>retaine cmc 0.5 % eye drops in a dropperette</i>	\$0 (Tier 4)	
<i>revive plus 0.5 % eye drops in a dropperette</i>	\$0 (Tier 4)	
<i>ri-gel 200 mg-200 mg-20 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>ri-gel ii 400 mg-400 mg-40 mg/5 ml oral suspension</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>ri-mox 200 mg-200 mg-20 mg/5 ml oral suspension</i>	\$0 (Tier 4)	
<i>ri-tussin 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>ri-tussin dm 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
RID COMPLETE LICE ELIMINATION KIT 0.5 % SPRAY; RID COMPLETE LICE ELIMINATION KIT 4 %-0.33 %-0.5 % TOPICAL	\$0 (Tier 4)	
<i>rid lice killing 0.33 %-4 % shampoo</i>	\$0 (Tier 4)	
<i>ringworm 1 % topical cream</i>	\$0 (Tier 4)	
<i>robafen 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>robafen cf (phenylephrine) 5 mg-10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>robafen dm cough 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>robafen dm cough-chest congestion 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>robitussin cough and cold cf 2.5 mg-5 mg-50 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>robitussin cough-chest congestion dm 10 mg-200 mg capsule; robitussin cough-chest dm liq</i>	\$0 (Tier 4)	
ROBITUSSIN COUGHGEL 15 MG CAPSULE	\$0 (Tier 4)	
<i>robitussin long-acting 1 mg-7.5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>robitussin m-s cold cf max liq</i>	\$0 (Tier 4)	
ROBITUSSIN NIGHTTIME COUGH DM 12.5 MG-30 MG/10 ML ORAL LIQUID	\$0 (Tier 4)	
<i>robitussin pediatric 7.5 mg/5 ml syrup</i>	\$0 (Tier 4)	
ROGAINE 2 % TOPICAL SOLUTION	\$0 (Tier 4)	
ROGAINE EXTRA STRENGTH FOR MEN 5 % TOPICAL SOLUTION	\$0 (Tier 4)	
<i>ru-hist d 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
RUBBING ALCOHOL (ETHANOL) 70 % TOPICAL SOLUTION	\$0 (Tier 4)	
RULOX 200 MG-200 MG-20 MG/5 ML ORAL SUSPENSION	\$0 (Tier 4)	
<i>rycontuss 2 mg-5 mg-10 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>rydex 1.3 mg-10 mg-6.3 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
RYMED (DEXCHLORPHENIRAMINE-PHENYLEPHRINE) 2 MG-10 MG TABLET	\$0 (Tier 4)	
<i>rynex dm 1 mg-2.5 mg-5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>rynex pe 1 mg-2.5 mg/5 ml oral solution</i>	\$0 (Tier 4)	
<i>rynex pse 1 mg-15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
S2 RACEPINEPHRINE 2.25 % SOLUTION FOR NEBULIZATION	\$0 (Tier 4)	
<i>safe tussin dm 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>sal-plant 17 % topical gel</i>	\$0 (Tier 4)	
<i>salactic film 17 % topical liquid</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
saline mist 0.65 % nasal spray aerosol	\$0 (Tier 4)	
saline nasal 0.65 % spray aerosol	\$0 (Tier 4)	
saline nasal mist 0.65 % spray aerosol	\$0 (Tier 4)	
saline nose 0.65 % spray aerosol	\$0 (Tier 4)	
saline wound wash (benzethonium chloride) 0.13 % topical cleanser	\$0 (Tier 4)	
SANI-SUPP (ADULT) RECTAL	\$0 (Tier 4)	
SANI-SUPP (INFANT) RECTAL	\$0 (Tier 4)	
SARNA ANTI-ITCH 0.5 %-0.5 % LOTION	\$0 (Tier 4)	
SCOT-TUSSIN EXPECTORANT 100 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
scrub care povidone iodine 10 % topical solution	\$0 (Tier 4)	
sea soft 0.65% nasal mist	\$0 (Tier 4)	
sebex 2 %-2 % shampoo	\$0 (Tier 4)	
secura antifungal 2 % topical cream	\$0 (Tier 4)	
secura antifungal extra thick 2 % topical cream	\$0 (Tier 4)	
secura dimethicone 5 % topical cream	\$0 (Tier 4)	
SECURA MOISTURIZING 0.13 % TOPICAL CLEANSER	\$0 (Tier 4)	
SECURA PERSONAL 0.13 % TOPICAL CLEANSER	\$0 (Tier 4)	
secura protective topical ointment	\$0 (Tier 4)	
SECURA PROTECTIVE (ZINC OXIDE) 10 % TOPICAL CREAM	\$0 (Tier 4)	
SECURA TOTAL BODY CLEANSER 0.13 % FOAM	\$0 (Tier 4)	
selsun blue 1 % shampoo	\$0 (Tier 4)	
selsun blue (salicylic acid) 3 % shampoo	\$0 (Tier 4)	
selsun blue naturals 3 % shampoo	\$0 (Tier 4)	
sen-o-tab 8.6 mg tablet	\$0 (Tier 4)	
senexon 8.6 mg tablet; senexon 8.8 mg/5 ml liquid	\$0 (Tier 4)	
senexon-s 8.6 mg-50 mg tablet	\$0 (Tier 4)	
senna 8.6 mg tablet; senna 8.8 mg/5 ml syrup	\$0 (Tier 4)	
senna lax 8.6 mg tablet	\$0 (Tier 4)	
senna laxative 25 mg, 8.6 mg tablet	\$0 (Tier 4)	
senna laxative-stool softener 8.6 mg-50 mg tablet	\$0 (Tier 4)	
senna plus 8.6 mg-50 mg tablet	\$0 (Tier 4)	
senna with docusate sodium 8.6 mg-50 mg tablet	\$0 (Tier 4)	
senna-s 8.6 mg-50 mg tablet	\$0 (Tier 4)	
senna-time s 8.6 mg-50 mg tablet	\$0 (Tier 4)	
sennalax-s tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
senno 8.6 mg tablet	\$0 (Tier 4)	
sennosides-docusate sodium tab	\$0 (Tier 4)	
SENOKOT 8.6 MG TABLET	\$0 (Tier 4)	
SENOKOT-S 8.6 MG-50 MG TABLET	\$0 (Tier 4)	
SENSI-CARE PROTECTIVE OINTMENT	\$0 (Tier 4)	
SENSI-CARE MOISTURIZING 2 CRM	\$0 (Tier 4)	
severe allergy-sinus headache 25 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
severe cold 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
pv severe cold caplet	\$0 (Tier 4)	
severe cold and flu (phenylephrine) 5 mg-10 mg-325 mg-200 mg tablet; severe cold-flu (phenylephrine) 5 mg-10 mg-325 mg-200 mg/15 ml liquid	\$0 (Tier 4)	
severe cold-flu nighttime 6.25 mg-5 mg-10 mg-325 mg/15 ml oral liquid	\$0 (Tier 4)	
severe cold cough-flu 25 mg-10 mg-650 mg oral powder packet	\$0 (Tier 4)	
severe cold multi-symptom 5 mg-10 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
severe cold pe 12.5 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
pv severe congestion nose spray	\$0 (Tier 4)	
pv severe congest-cough max lq	\$0 (Tier 4)	
severe sinus 5 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
severe sinus congestion allergy-cough 6.25 mg-5 mg-10 mg-325 mg cap	\$0 (Tier 4)	
shake that ache 500 mg tablet	\$0 (Tier 4)	
silace 50 mg/5 ml oral liquid; silace 60 mg/15 ml syrup	\$0 (Tier 4)	
siladryl sa 12.5 mg/5 ml oral liquid	\$0 (Tier 4)	
silphen cough 12.5 mg/5 ml syrup	\$0 (Tier 4)	
siltussin dm das 10 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
siltussin sa 100 mg/5 ml oral liquid	\$0 (Tier 4)	
siltussin-dm 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
gnp simethicone 125 mg, 180 mg softgel; simethicone 125 mg, 180 mg softgel; simethicone 125 mg, 80 mg tab chew; simethicone 40 mg/0.6 ml drop	\$0 (Tier 4)	
sinus 12 hour 120 mg tablet,extended release	\$0 (Tier 4)	
pv sinus & allergy 120 mg cplt	\$0 (Tier 4)	
sinus and allergy pe 4 mg-10 mg tablet	\$0 (Tier 4)	
sm sinus and allergy tablet	\$0 (Tier 4)	
sinus and cold-d 220 mg-120 mg tablet,extended release	\$0 (Tier 4)	
sinus congestion and pain day-night 2 mg-5 mg-325 mg tablets	\$0 (Tier 4)	
sinus congestion and pain 5 mg-325 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
sinus congestion and pain (chlorpheniramine) 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
sinus congestion and pain (guaifenesin) 5 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
sinus decongestant (pe) 10 mg tablet	\$0 (Tier 4)	
sinus headache pe 5 mg-325 mg tablet	\$0 (Tier 4)	
sinus maximum strength 5 mg-325 mg tablet	\$0 (Tier 4)	
sinus nasal spray 0.05 %	\$0 (Tier 4)	
sinus pain relief 5 mg-325 mg tablet	\$0 (Tier 4)	
sinus pe decongestant 10 mg tablet	\$0 (Tier 4)	
sinus relief (non-drowsy) 5 mg-325 mg tablet	\$0 (Tier 4)	
sinus relief (oxymetazoline) 0.05 % nasal mist; sinus relief (oxymetazoline) 0.05 % nasal spray	\$0 (Tier 4)	
sinus relief pressure and pain 5 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
sinus relief severe congestion 5 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
sinus and allergy (phenylephrine) 4 mg-10 mg tablet	\$0 (Tier 4)	
sinutrol pe 2 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
skin protectant a and d topical ointment	\$0 (Tier 4)	
skin treatment 12 % lotion	\$0 (Tier 4)	
sleep 25 mg tablet	\$0 (Tier 4)	
sleep aid (diphenhydramine) 25 mg tablet; sleep aid (diphenhydramine) 25 mg, 50 mg capsule; sleep aid (diphenhydramine) 50 mg/30 ml oral liquid	\$0 (Tier 4)	
sleep aid (doxylamine) 25 mg tablet	\$0 (Tier 4)	
sleep aid max strength (diphenhydramine) 50 mg capsule	\$0 (Tier 4)	
sleep ii 25 mg tablet	\$0 (Tier 4)	
sleep tablet (diphenhydramine) 25 mg tablet	\$0 (Tier 4)	
sleep time 50 mg/30 ml oral liquid	\$0 (Tier 4)	
sleepgels 50 mg	\$0 (Tier 4)	
sleeping 50 mg capsule	\$0 (Tier 4)	
smooth antacid 300 mg (750 mg) chewable tablet	\$0 (Tier 4)	
smoothlax 17 gram, 17 gram/dose oral powder; smoothlax 17 gram, 17 gram/dose oral powder packet	\$0 (Tier 4)	
sochlor 5 % eye drops; sochlor 5 % eye ointment	\$0 (Tier 4)	
sodium bicarb 325 mg, 650 mg tablet	\$0 (Tier 4)	
cvs sodium chloride 5% eye drp; cvs sodium chloride 5% oint	\$0 (Tier 4)	
sodium chloride 1,000 mg tab	\$0 (Tier 4)	
sof-lax 100 mg capsule	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>ra soluble fiber 500 mg cplt</i>	\$0 (Tier 4)	
<i>soothe (bismuth subsalicylate) 262 mg chewable tablet; soothe (bismuth subsalicylate) 262 mg tablet</i>	\$0 (Tier 4)	
SOOTHE AND COOL INZO BARRIER 5 % TOPICAL CREAM	\$0 (Tier 4)	
SOOTHE AND COOL MEDSEPTIC 50 % TOPICAL OINTMENT	\$0 (Tier 4)	
<i>soothe and cool skin paste topical ointment</i>	\$0 (Tier 4)	
<i>soothe regular strength 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
SOOTHE AND COOL MOISTURE BARRIER 92.8 %, 98.3 % TOPICAL OINTMENT	\$0 (Tier 4)	
SOOTHE-COOL PROTECT MEDSEPTIC 50 % TOPICAL OINTMENT	\$0 (Tier 4)	
<i>soothing care (hydrocortisone) 1 % topical cream</i>	\$0 (Tier 4)	
<i>sorbugen nr 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>pv sore throat lozenge</i>	\$0 (Tier 4)	
<i>sore throat (phenol) 1.4 % aerosol spray</i>	\$0 (Tier 4)	
<i>sore throat & cough lozenge</i>	\$0 (Tier 4)	
<i>st joseph aspirin 81 mg chewable tablet</i>	\$0 (Tier 4)	
<i>st. joseph aspirin 81 mg tablet, delayed release</i>	\$0 (Tier 4)	
STAFLEX TABLET	\$0 (Tier 4)	
STAHIST AD 25 MG-60 MG TABLET; STAHIST AD 25 MG-60 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
<i>stay awake 200 mg tablet</i>	\$0 (Tier 4)	
<i>stay awake maximum strength 200 mg tablet</i>	\$0 (Tier 4)	
<i>sterile eye drops 0.05 %</i>	\$0 (Tier 4)	
<i>stimulant laxative plus 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
<i>stomach relief 262 mg chewable tablet; stomach relief 262 mg tablet</i>	\$0 (Tier 4)	
<i>stomach relief max strength 525 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>stomach relief original 262 mg/15 ml oral suspension</i>	\$0 (Tier 4)	
<i>stool softener 100 mg tablet; stool softener 100 mg, 250 mg capsule; stool softener 50 mg/5 ml oral liquid; stool softener 60 mg/15 ml syrup</i>	\$0 (Tier 4)	
<i>stool softener-stimulant laxative 8.6 mg-50 mg tablet</i>	\$0 (Tier 4)	
SUDAFED 30 MG TABLET	\$0 (Tier 4)	
SUDAFED 12 HOUR 120 MG TABLET, EXTENDED RELEASE	\$0 (Tier 4)	
SUDAFED PE PRESSURE+PAIN 5 MG-325 MG TABLET	\$0 (Tier 4)	
<i>sudafed pe pressure+pain+cough 5 mg-10 mg-325 mg tablet</i>	\$0 (Tier 4)	
SUDAFED PE PRESSURE+PAIN+MUCUS 5 MG-325 MG-200 MG TABLET	\$0 (Tier 4)	
<i>sudogest 30 mg, 60 mg tablet</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>sudogest 12-hour 120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>sudogest cold and allergy 4 mg-60 mg tablet</i>	\$0 (Tier 4)	
<i>sudogest pe 10 mg tablet</i>	\$0 (Tier 4)	
<i>sudogest sinus and allergy 4 mg-60 mg tablet</i>	\$0 (Tier 4)	
<i>super calcium 600 mg calcium (1,500 mg) tablet</i>	\$0 (Tier 4)	
<i>cvs super pain relief tab</i>	\$0 (Tier 4)	
<i>suphedrin 15 mg/5 ml oral liquid; suphedrin 30 mg tablet</i>	\$0 (Tier 4)	
<i>suphedrin 12 hour 120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>suphedrine 30 mg tablet</i>	\$0 (Tier 4)	
<i>suphedrine 12 hour 120 mg tablet,extended release</i>	\$0 (Tier 4)	
<i>suphedrine pe 10 mg tablet</i>	\$0 (Tier 4)	
<i>suphedrine pe cold and allergy 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>suphedrine pe sinus and allergy 4 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>suphedrine pe sinus headache 5 mg-325 mg tablet</i>	\$0 (Tier 4)	
<i>suppository adult rectal</i>	\$0 (Tier 4)	
SURFAK 240 MG CAPSULE	\$0 (Tier 4)	
<i>swim ear 95 %-5 % drops</i>	\$0 (Tier 4)	
<i>swimmer's instant ear dry 95 %-5 % drops</i>	\$0 (Tier 4)	
SYSTANE (PF) 0.4 %-0.3 % EYE DROPS IN A DROPPERETTE	\$0 (Tier 4)	
SYSTANE (PROPYLENE GLYCOL) 0.4 %-0.3 % EYE DROPS	\$0 (Tier 4)	
SYSTANE GEL 0.3 % EYE GEL; SYSTANE GEL 0.4 %-0.3 % EYE DROPS	\$0 (Tier 4)	
SYSTANE NIGHTTIME 94 %-3 % EYE OINTMENT	\$0 (Tier 4)	
SYSTANE ULTRA 0.4 %-0.3 % EYE DROPS	\$0 (Tier 4)	
SYSTANE ULTRA 0.4-0.3% EYE DRP	\$0 (Tier 4)	
<i>t-plus 0.5 % shampoo</i>	\$0 (Tier 4)	
<i>tab tussin 400 mg tablet</i>	\$0 (Tier 4)	
<i>tab tussin dm 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>tactinal 325 mg tablet</i>	\$0 (Tier 4)	
<i>tactinal extra strength 500 mg tablet</i>	\$0 (Tier 4)	
TAGAMET HB 200 MG TABLET	\$0 (Tier 4)	
TAKE ACTION 1.5 MG TABLET	\$0 (Tier 4)	
<i>tears again (pva) 1.4 % eye drops</i>	\$0 (Tier 4)	
TEARS NATURALE FORTE DROPS	\$0 (Tier 4)	
<i>tears naturale free drops</i>	\$0 (Tier 4)	
<i>tears naturale-ii eye drops</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
TEARS NATURALE PM EYE OINT	\$0 (Tier 4)	
<i>tears pure drops</i>	\$0 (Tier 4)	
<i>tension headache 500 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>tension headache pain reliever 500 mg-65 mg tablet</i>	\$0 (Tier 4)	
<i>pv tension headache rlf caplet</i>	\$0 (Tier 4)	
<i>tera-gel tar shampoo 0.5 %</i>	\$0 (Tier 4)	
<i>terbinafine 1% cream</i>	\$0 (Tier 4)	
<i>the magic bullet 10 mg rectal suppository</i>	\$0 (Tier 4)	
<i>thera-gel 0.5 % shampoo</i>	\$0 (Tier 4)	
THERA-GESIC 15 %-1 % TOPICAL CREAM	\$0 (Tier 4)	
THERA-GESIC PLUS 25 %-4 % TOPICAL CREAM	\$0 (Tier 4)	
<i>theraflu expressmax cold-cough day 5 mg-10 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>theraflu expressmax cold-cough night 25 mg-10 mg-650 mg/30 ml oral liq</i>	\$0 (Tier 4)	
THERAFLU FLU-SORE THROAT 20 MG-10 MG-650 MG ORAL POWDER PACKET	\$0 (Tier 4)	
THERAFLU NIGHTTIME SEVERE COLD-COUGH 25 MG-10 MG-650 MG POWDER PACKET	\$0 (Tier 4)	
<i>therapeutic mineral ice 2 % topical gel</i>	\$0 (Tier 4)	
<i>cvs therapeutic 3% shampoo; therapeutic shampoo 0.5 %, 3 %</i>	\$0 (Tier 4)	
<i>therapeutic t plus 3 % shampoo</i>	\$0 (Tier 4)	
<i>theratears 1 % gel in a dropperette</i>	\$0 (Tier 4)	
<i>throat spray 1.4 % aerosol</i>	\$0 (Tier 4)	
TINACTIN 1 % TOPICAL CREAM; TINACTIN 1 % TOPICAL POWDER; TINACTIN 1 % TOPICAL SPRAY; TINACTIN 1 % TOPICAL SPRAY POWDER	\$0 (Tier 4)	
<i>cvs tioconazole 1 6.5% ointmnt</i>	\$0 (Tier 4)	
<i>tioconazole-1 6.5 % vaginal ointment</i>	\$0 (Tier 4)	
<i>gnp tolnaftate 1% cream; tolnaftate 1% powder; tolnaftate 1% solution; tolnaftate 1% spray powder</i>	\$0 (Tier 4)	
<i>total allergy medicine 25 mg tablet</i>	\$0 (Tier 4)	
<i>total home insect repellent 30 % topical spray</i>	\$0 (Tier 4)	
<i>travel sickness 50 mg tablet</i>	\$0 (Tier 4)	
<i>tri-biozene ointment</i>	\$0 (Tier 4)	
<i>tri-buffered aspirin 325 mg tablet</i>	\$0 (Tier 4)	
<i>vr triacting cold-cough liq</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>triaminic cold and cough (pe) 2.5 mg-5 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
TRIAMINIC COLD AND COUGH NIGHT TIME(PE)6.25 MG-2.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
TRIPLE ANTIBIOTIC 3.5 MG-400 UNIT-5,000 UNIT TOPICAL OINTMENT IN PACKET	\$0 (Tier 4)	
<i>triple antibiotic 3.5 mg-400 unit-5,000 unit/gram topical ointment</i>	\$0 (Tier 4)	
<i>triple antibiotic (pram) extra 3.5 mg-500 unit-10,000 unit/g top oint</i>	\$0 (Tier 4)	
<i>triple antibiotic plus 3.5 mg-500 unit-10,000 unit/gram top ointment</i>	\$0 (Tier 4)	
<i>triple antibiotic-pain relief 3.5 mg-500 unit-10,000 unit/gram ointmnt</i>	\$0 (Tier 4)	
<i>triple paste af 2 % topical ointment</i>	\$0 (Tier 4)	
<i>trixaicin 0.025% cream</i>	\$0 (Tier 4)	
<i>trixaicin hp 0.075% cream</i>	\$0 (Tier 4)	
<i>tucks (witch hazel) 50 % topical pads</i>	\$0 (Tier 4)	
TUMS 200 MG CALCIUM (500 MG), 300 MG (750 MG) CHEWABLE TABLET	\$0 (Tier 4)	
<i>tums dual action (famotidine) 10 mg-800 mg-165 mg chewable tablet</i>	\$0 (Tier 4)	
TUMS E-X 300 MG (750 MG) CHEWABLE TABLET	\$0 (Tier 4)	
TUMS EXTRA STRENGTH SMOOTHIES 300 MG (750 MG) CHEWABLE TABLET	\$0 (Tier 4)	
TUMS FRESHERS 200 MG CALCIUM (500 MG) CHEWABLE TABLET	\$0 (Tier 4)	
<i>tums ultra 1,177 mg chewable tablet</i>	\$0 (Tier 4)	
TUMS ULTRA 400 MG CALCIUM (1,000 MG) CHEWABLE TABLET	\$0 (Tier 4)	
<i>tusicof 10 mg-20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>tusnel c 30 mg-10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>tusnel diabetic 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
TUSNEL NEW FORMULA 30 MG-15 MG-200 MG/5 ML ORAL SOLUTION; TUSNEL NEW FORMULA 60 MG-30 MG-400 MG TABLET	\$0 (Tier 4)	
TUSNEL PEDIATRIC 15 MG-5 MG-50 MG/5 ML ORAL LIQUID; TUSNEL PEDIATRIC 7.5 MG-50 MG/ML ORAL DROPS	\$0 (Tier 4)	
TUSNEL-DM PEDIATRIC 7.5 MG-2.5 MG-25 MG/ML ORAL DROPS	\$0 (Tier 4)	
<i>tussi pres-b 4 mg-10 mg-20 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussi-pres 5 mg-10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin 100 mg/5 ml oral liquid; tussin 400 mg tablet</i>	\$0 (Tier 4)	
<i>tussin cf cough-cold 5 mg-10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin cf max 5 mg-10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin chest congestion 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin cough (dm only) 15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
<i>pv tussin cough dm liquid</i>	\$0 (Tier 4)	
<i>tussin cough and chest congestion 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin dm 10 mg-100 mg/5 ml oral liquid; tussin dm 20 mg-400 mg tablet</i>	\$0 (Tier 4)	
<i>tussin dm clear 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>tussin dm cough 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>cvs tussin dm cough-chest liq; kro tussin dm cough-chest cong; tussin dm cough and chest 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>pv tussin dm max liquid; tussin dm max 10 mg-200 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin expectorant 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>tussin honey 100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>cvs tussin max-str syrup</i>	\$0 (Tier 4)	
<i>tussin maximum strength cough 15 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>pv tussin pe liquid</i>	\$0 (Tier 4)	
TYLENOL 325 MG TABLET	\$0 (Tier 4)	
TYLENOL ARTHRITIS PAIN 650 MG TABLET, EXTENDED RELEASE	\$0 (Tier 4)	
TYLENOL COLD AND FLU SEVERE 5 MG-10 MG-325 MG-200 MG TABLET; TYLENOL COLD AND FLU SEVERE 5 MG-10 MG-325 MG-200 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
TYLENOL COLD HEAD CONGESTION SEVERE 5 MG-325 MG-200 MG TABLET	\$0 (Tier 4)	
<i>tylenol cold max day 5 mg-10 mg-325 mg tablet</i>	\$0 (Tier 4)	
TYLENOL COLD MAX NIGHT 6.25 MG-5 MG-10 MG-325MG/15ML ORAL LIQUID	\$0 (Tier 4)	
TYLENOL SINUS SEVERE 5 MG-325 MG-200 MG TABLET	\$0 (Tier 4)	
TYLENOL SORE THROAT 500 MG/15	\$0 (Tier 4)	
<i>tylophen 500 mg capsule</i>	\$0 (Tier 4)	
<i>ultra a-d 2 mg tablet</i>	\$0 (Tier 4)	
<i>ultra dm free and clear 10 mg-100 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
<i>ultra fresh 0.5 % eye drops</i>	\$0 (Tier 4)	
<i>ultra fresh pm eye ointment</i>	\$0 (Tier 4)	
<i>ultra lubricant eye 0.4 %-0.3 % drops</i>	\$0 (Tier 4)	
<i>ultra sleep (doxylamine succinate) 25 mg tablet</i>	\$0 (Tier 4)	
<i>ultra strength antacid 400 mg calcium (1,000 mg) chewable tablet</i>	\$0 (Tier 4)	
<i>ultra strength calcium antacid 400 mg calcium (1,000 mg) chew tablet</i>	\$0 (Tier 4)	
<i>ultra tuss safe 10 mg-100 mg/5 ml syrup</i>	\$0 (Tier 4)	
<i>ultrathon 25 % topical spray</i>	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
ULTRATHON 34.34 % LOTION	\$0 (Tier 4)	
<i>unisom (diphenhydramine) 50 mg/30 ml oral liquid</i>	\$0 (Tier 4)	
UNISOM (DOXYLAMINE) 25 MG TABLET	\$0 (Tier 4)	
<i>unisom sleepgels 50 mg capsule</i>	\$0 (Tier 4)	
<i>vagistat-3 combo pack</i>	\$0 (Tier 4)	
<i>sm allergy relief 12.5 mg/5 ml; valu-dryl allergy 25 mg capsule; valu-dryl allergy med tab</i>	\$0 (Tier 4)	
<i>valu-tapp 1 mg-15 mg/5 ml oral liquid</i>	\$0 (Tier 4)	
VANACOF 1 MG-30 MG-12.5 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
VANACOF DM 10 MG-18 MG-200 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
VANACOF-8 50 MG-25 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
VANA HIST PD 0.625 MG/ML ORAL DROPS	\$0 (Tier 4)	
<i>vaniplly 1% ointment</i>	\$0 (Tier 4)	
<i>vaporizing rub 4.8 %-1.2 %-2.6 % topical ointment</i>	\$0 (Tier 4)	
<i>vaporizing steam liquid</i>	\$0 (Tier 4)	
<i>vazotab (pyrilamine) 25 mg-10 mg tablet</i>	\$0 (Tier 4)	
<i>verticalm 25 mg tablet</i>	\$0 (Tier 4)	
VICKS CHILDREN'S NYQUIL COLD AND COUGH 2 MG-15 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
<i>vicks dayquil cold and flu relief 5 mg-10 mg-325 mg capsule; vicks dayquil cold and flu relief 5 mg-10 mg-325 mg/15 ml oral liquid</i>	\$0 (Tier 4)	
<i>vicks dayquil cough 5 mg/5 ml syrup</i>	\$0 (Tier 4)	
VICKS DAYQUIL MUCUS CONTROL DM 10 MG-200 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
<i>vicks dayquil severe cold-flu 5 mg-10 mg-325 mg-200 mg tablet; vicks dayquil severe cold-flu 5 mg-10 mg-325 mg-200 mg/15 ml liquid</i>	\$0 (Tier 4)	
<i>vicks nature fusion caplets</i>	\$0 (Tier 4)	
<i>vicks nature fusion cough liq</i>	\$0 (Tier 4)	
VICKS NYQUIL COLD/FLU (CPM) 4 MG-30 MG-650 MG/30 ML ORAL LIQUID	\$0 (Tier 4)	
<i>vicks nyquil cold/flu liquicap 6.25 mg-15 mg-325 mg capsule</i>	\$0 (Tier 4)	
VICKS NYQUIL COUGH 6.25 MG-15 MG/15 ML ORAL SOLUTION	\$0 (Tier 4)	
VICKS NYQUIL NIGHTTIME RELIEF 6.25 MG-15 MG-325 MG/15 ML ORAL LIQUID	\$0 (Tier 4)	
VICKS NYQUIL SEVERE COLD-FLU 6.25 MG-5 MG-10 MG-325 MG TABLET	\$0 (Tier 4)	
<i>vicks nyquil severe cold-flu 6.25 mg-5 mg-10 mg-325mg/15ml oral liquid</i>	\$0 (Tier 4)	
VICKS NYQUIL SINEX LIQUICAPS	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
vicks qlearquil allergy 10 mg	\$0 (Tier 4)	
VICKS QLEARQUIL DAY LIQUICAPS	\$0 (Tier 4)	
VICKS QLEARQUIL NIGHT LIQUICAP	\$0 (Tier 4)	
vicks qlearquil night 25 mg	\$0 (Tier 4)	
vicks qlearquil 0.05 % nasal mist	\$0 (Tier 4)	
vicks sinex 12-hour 0.05 % nasal spray	\$0 (Tier 4)	
vicks sinex ultra fine mist 12-hour 0.05 % nasal spray	\$0 (Tier 4)	
VICKS VAPODROPS 1.7 MG, 3.3 MG	\$0 (Tier 4)	
VICKS VAPORUB 4.7 %-1.2 %-2.6 % TOPICAL OINTMENT	\$0 (Tier 4)	
vicks vaporub 4.8 %-1.2 %-2.6 % topical ointment	\$0 (Tier 4)	
vicks vaposteam liquid	\$0 (Tier 4)	
virtussin dac 30 mg-10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
visine 0.05 % eye drops	\$0 (Tier 4)	
VISINE-A 0.025 %-0.3 % EYE DROPS	\$0 (Tier 4)	
vitamin a and d ointment	\$0 (Tier 4)	
vitamin a and d grx topical ointment; vitamin a and d grx topical ointment in packet	\$0 (Tier 4)	
vitamin b-6 25 mg, 50 mg tablet	\$0 (Tier 4)	
VIVARIN 200 MG TABLET	\$0 (Tier 4)	
wal-act d cold and allergy 2.5 mg-60 mg tablet	\$0 (Tier 4)	
wal-dram 50 mg tablet	\$0 (Tier 4)	
wal-dryl (diphenhydramine-zn acetate) 2 %-0.1 % topical cream	\$0 (Tier 4)	
wal-dryl allergy 12.5 mg/5 ml oral liquid; wal-dryl allergy 25 mg capsule; wal-dryl allergy 25 mg tablet	\$0 (Tier 4)	
wal-dryl severe allergy-sinus 25 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
wal-fex allergy 180 mg, 60 mg tablet	\$0 (Tier 4)	
wal-fex d 12 hour 60 mg-120 mg tablet,extended release	\$0 (Tier 4)	
wal-finatate 4 mg tablet	\$0 (Tier 4)	
wal-finatate-d 4 mg-60 mg tablet	\$0 (Tier 4)	
wal-flu cold and sore throat 20 mg-10 mg-325 mg oral powder packet	\$0 (Tier 4)	
wal-flu night severe cold 25 mg-10 mg-650 mg/30 ml oral liquid	\$0 (Tier 4)	
wal-flu night time 20 mg-10 mg-650 mg oral powder packet	\$0 (Tier 4)	
wal-flu severe cold and cough 25 mg-10 mg-650 mg oral powder packet	\$0 (Tier 4)	
wal-flu severe cold-cough 10 mg-20 mg-650 mg oral powder packet	\$0 (Tier 4)	
wal-four 1 % nasal spray	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
wal-itin 10 mg tablet; wal-itin 5 mg/5 ml oral solution	\$0 (Tier 4)	
wal-itin d 10 mg-240 mg tablet, extended release	\$0 (Tier 4)	
wal-itin d 12 hour 5 mg-120 mg tablet, extended release	\$0 (Tier 4)	
wal-mucil fiber 0.52 gram capsule	\$0 (Tier 4)	
wal-mucil fiber (aspartame) 3.4 gram/5.8 gram oral powder	\$0 (Tier 4)	
wal-mucil fiber (sugar) 3.4 gram/7 gram oral powder	\$0 (Tier 4)	
wal-nadol pm 25 mg-500 mg tablet	\$0 (Tier 4)	
wal-phed 30 mg tablet	\$0 (Tier 4)	
wal-phed 4 mg-60 mg tablet	\$0 (Tier 4)	
wal-phed 12 hour 120 mg tablet, extended release	\$0 (Tier 4)	
wal-phed d 120 mg tablet, extended release	\$0 (Tier 4)	
wal-phed pe 10 mg tablet	\$0 (Tier 4)	
wal-phed pe nighttime cold 25 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
wal-phed pe severe cold 12.5 mg-5 mg-325 mg tablet	\$0 (Tier 4)	
wal-phed pe sinus and allergy 4 mg-10 mg tablet	\$0 (Tier 4)	
wal-phed pe sinus headache 5 mg-325 mg tablet	\$0 (Tier 4)	
wal-phed pe triple relief 5 mg-325 mg-200 mg tablet	\$0 (Tier 4)	
wal-profen 200 mg capsule; wal-profen 200 mg tablet	\$0 (Tier 4)	
wal-profen cold-sinus 30 mg-200 mg tablet	\$0 (Tier 4)	
wal-profen d cold and sinus 30 mg-200 mg tablet	\$0 (Tier 4)	
wal-proxen 220 mg tablet	\$0 (Tier 4)	
wal-sleep z 25 mg capsule; wal-sleep z 50 mg/30 ml oral liquid	\$0 (Tier 4)	
wal-som (diphenhydramine) 50 mg capsule	\$0 (Tier 4)	
wal-som (doxylamine) 25 mg tablet	\$0 (Tier 4)	
wal-sporin 500 unit-10,000 unit/gram topical ointment	\$0 (Tier 4)	
wal-tap 1 mg-2.5 mg/5 ml oral solution	\$0 (Tier 4)	
wal-tap dm 1 mg-2.5 mg-5 mg/5 ml oral solution	\$0 (Tier 4)	
wal-tussin 100 mg/5 ml oral liquid	\$0 (Tier 4)	
wal-tussin cough 15 mg capsule; wal-tussin cough 15 mg/5 ml oral liquid	\$0 (Tier 4)	
wal-tussin cough and cold cf 5 mg-10 mg-100 mg/5 ml oral liquid	\$0 (Tier 4)	
wal-tussin dm 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
wal-tussin dm clear 10 mg-100 mg/5 ml syrup	\$0 (Tier 4)	
wal-tussin max strength cough 15 mg/5 ml syrup	\$0 (Tier 4)	
wal-zan 150 150 mg tablet	\$0 (Tier 4)	
wal-zan 75 75 mg tablet	\$0 (Tier 4)	

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DRUG NAME	TIER	UTILIZATION MANAGEMENT REQUIREMENTS
wal-zyr (cetirizine) 1 mg/ml oral solution; wal-zyr (cetirizine) 10 mg tablet	\$0 (Tier 4)	
wal-zyr (ketotifen) 0.025 % (0.035 %) eye drops	\$0 (Tier 4)	
wal-zyr d 5 mg-120 mg tablet,extended release	\$0 (Tier 4)	
wart remover 17 % topical gel; wart remover 17 % topical liquid	\$0 (Tier 4)	
wee care 15 mg/1.25 ml oral suspension	\$0 (Tier 4)	
PETROLEUM JELLY	\$0 (Tier 4)	
white petrolatum skin protect	\$0 (Tier 4)	
WHITE PETROLEUM JELLY TOPICAL	\$0 (Tier 4)	
hm witch hazel solution	\$0 (Tier 4)	
qc witch hazel astringent	\$0 (Tier 4)	
woman's laxative 5 mg, 5 mg tablet; woman's laxative 5 mg, 5 mg tablet,delayed release	\$0 (Tier 4)	
women's gentle laxative (bisacodyl) 5 mg tablet,delayed release	\$0 (Tier 4)	
women's laxative (bisacodyl) 5 mg, 5 mg tablet; women's laxative (bisacodyl) 5 mg, 5 mg tablet,delayed release	\$0 (Tier 4)	
womans stool softener 100 mg	\$0 (Tier 4)	
z-sleep 25 mg capsule; z-sleep 50 mg/30 ml oral liquid	\$0 (Tier 4)	
Z-TUSS AC 2 MG-9 MG/5 ML ORAL LIQUID	\$0 (Tier 4)	
ZANTAC 75 MG TABLET	\$0 (Tier 4)	
ZANTAC MAXIMUM STRENGTH 150 MG TABLET	\$0 (Tier 4)	
zeasorb (miconazole) 2 % topical powder	\$0 (Tier 4)	
ZIKS ARTHRITIS PAIN RELIEF 0.025 %-12 %-1 % TOPICAL CREAM	\$0 (Tier 4)	
gnp zinc oxide 20% ointment	\$0 (Tier 4)	
zyncof 20 mg-400 mg tablet	\$0 (Tier 4)	
ZYRTEC 10 MG TABLET	\$0 (Tier 4)	
ZYRTEC-D 5 MG-120 MG TABLET,EXTENDED RELEASE	\$0 (Tier 4)	
ZZZQUIL 25 MG CAPSULE; ZZZQUIL 50 MG/30 ML ORAL LIQUID	\$0 (Tier 4)	

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BAVENCIO	28	BENADRYL	145
BAYER ASPIRIN	145	benadryl extra strength	145
BAYER CHEWABLE ASPIRIN	145	benazepril	49
baza antifungal	145	benazepril-hydrochlorothiazide	49
BCG VACCINE, LIVE (PF)	39	BENDEKA	28

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BENLYSTA	119	bio-b kids	145
BENZ-ALL	145	biocotron	145
BENZEDREX	145	BIOCOTRON-D	145
benzepto	145	biodesp dm	145
benzonatate	135	BION TEARS (PF)	145
benzoyl peroxide	145	bionel	145
benzphetamine	135	bionel pediatric	145
benztropine	58	bisa-lax	145
BESIVANCE	95	BISAC-EVAC	145
BESPONSA	28	bisacodyl	145
beta med	145	biscolax	145
BETADINE	145	bismatrol	146
betamethasone dipropionate	127	bismuth	146
betamethasone valerate	127	bismuth subsalicylate	146
betamethasone, augmented	127	bisoprolol fumarate	49
betasal	145	bisoprolol-hydrochlorothiazide	49
betasept surgical scrub	145	bleomycin	28
BETASERON	119	blis-to-sol (tolnaftate)	146
betatemp	145	blisovi fe 1.5/30 (28)	104
betaxolol	95	blisovi fe 1/20 (28)	104
bethanechol chloride	42	BONINE	146
BETHKIS	13	BOOSTRIX TDAP	39
bexarotene	28	BORDERED GAUZE	124
BEXSERO	39	BOSULIF	28
bicalutamide	28	bp	146
BICILLIN C-R	13	bp foam	146
BICILLIN L-A	13	bp wash	146
BICNU	28	bpo-10	146
BIDIL	49	bpo-5	146
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brimonidine	95	BUTISOL	59
BRINTELLIX	58	butorphanol tartrate	59, 60
BRIVIACT	58	C	
brohist d	146	cabergoline	60
bromfed dm	135	CABOMETYX	29
bromocriptine	59	caffeine	146
brompheniramin-phenylephrin-dm	146	calaclear	146
brompheniramine-pseudoeph-dm	135	CALADRYL	146
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BROTAPP	146	calahist clear	146
BROTAPP DM	146	calahist with pramoxine	146
BROVANA	42	calamine	146
BROVEX PEB DM	146	calamine medicated	146
budesonide	104, 125	calamine phenolated	146
buffered aspirin	146	calamine plus (pramox-calamin)	146
bufferin	146	calamine-zinc oxide	146
bumetanide	87	calamine-zinc oxide-phenol	146
buprenorphine hcl	59	calcipotriene	127
buproban	59	calcitonin (salmon)	104
bupropion hcl	59	calcitriol	134
bupropion hcl (smoking deter)	59	calcium acetate	87
burn relief	146	calcium antacid	147
burn relief with aloe	146	calcium antacid tropical	147
bupirone	59	calcium antacid ultra max st	147
busulfan	28	calcium carbonate	147
BUSULFEX	29	calcium carbonate-vitamin d3	147
butalbital compound w/codeine	59	calcium chloride	135
butalbital-acetaminop-caf-cod	59	calcium polycarbophil	147
butalbital-acetaminophen	59	calcium 600	146
butalbital-acetaminophen-caff	59	calcium 600 + d(3)	147
butalbital-aspirin-caffeine	59	calcium 600 with vitamin d3	147

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caldyphen	147	carteolol	95
caldyphen clear	147	cartia xt	49
callergy clear	147	carvedilol	49
CALQUENCE	29	caspofungin	13
camila	104	CAYSTON	13
camrese lo	104	caziant (28)	104
CANASA	99	cefaclor	14
CANCIDAS	13	cefadroxil	14
candesartan	49	cefazolin	14
candesartan-hydrochlorothiazid	49	cefazolin in dextrose (iso-os)	14
capacet	60	cefdinir	14
CAPASTAT	13	cefepime	14
CAPCOF	147	cefotaxime	14
CAPITAL WITH CODEINE	60	cefotetan	14
CAPMIST DM	147	cefoxitin	14
CAPRELSA	29	cefoxitin in dextrose, iso-osm	14
CAPRON DM	147	cefpodoxime	14
captopril	49	cefprozil	14
captopril-hydrochlorothiazide	49	ceftazidime	14
CARBAGLU	87	ceftazidime in d5w	14
carbamazepine	60	ceftriaxone	14
carbamide ear drops	147	cefuroxime axetil	14
carbidopa-levodopa	60	cefuroxime sodium	14
carboplatin	29	CELLCEPT	119
CAREFINE PEN NEEDLE	78	CELLCEPT INTRAVENOUS	119
CARETOUCH ALCOHOL PREP PAD	127	CELONTIN	60
CARETOUCH INSULIN SYRINGE	78	CEPACOL SORE THROAT (BENZ-MEN)	147
CARETOUCH PEN NEEDLE	79	CEPACOL SORETHROAT-COUGH	147
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cetiri-d	147	child pain rel-fever reducer	148
cetirizine	147	child triaminic cold-allergy	148
cetirizine-pseudoephedrine	147	child triaminic cough-congest	148
CHANTIX	42	child triaminic cough-sore thr	148
CHANTIX CONTINUING MONTH BOX	42	child triaminic ms fever-cold	148
CHANTIX STARTING MONTH BOX	42	child wal-tap cold-allergy	148
CHEMET	103	child's all day allergy(cetir)	148
CHENODAL	99	child's mucus relief m-s cold	148
cheratussin ac	147	children night time cold-cough	148
cheratussin dac	147	children's acetaminophen	148
chest congestion relief	147	children's advil	148
chest congestion relief + dm	147	CHILDREN'S ALLEGRA ALLERGY	148
chest congestion relief d	147	children's aller-tec	148
chest congestion relief pe	147	children's allergy (diphenhyd)	148
chest rub	148	children's allergy complete	149
child allergy relf(cetirizine)	148	children's allergy relief(fex)	149
child aspirin	148	children's allergy relief(lor)	149
child chest congestion + cough	148	children's allergy(cetirizine)	149
child cough and sore throat	148	children's aspirin	149
child delsym cough+chest dm	148	children's cetirizine	149
CHILD DELSYM COUGH+COLD	148	children's chest congestion	149
child ibuprofen	148	CHILDREN'S CLARITIN	149
child mucinex chest congestion	148	children's cold and cough (pe)	149
CHILD MUCINEX CONGESTION-COUGH	148	children's cold and cough dm	149
CHILD MUCINEX M-S COLD DAY-NTE	148	children's cold-allergy (pe)	149
CHILD MUCINEX STUFFY NOSE-COLD	148	children's cold-cough daytime	149
child mucus relief cough	148	children's cold-cough-sore	149
child mucus relief expectorant	148	children's cough	149
child multi-symptom cold-fever	148	children's cough dm er	149
child multi-symptom cold/cough	148	children's cough-cold relief	149
child non-aspirin quick melts	148	CHILDREN'S DELSYM COUGH	149

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children's dibromm cold-allerg	149	children's wal-fex	150
children's dibromm dm cold-cou	149	children's wal-zyr	150
children's easy-melts	149	CHILDREN'S ZYRTEC ALLERGY	150
children's fever reducing	149	childrens cold-alrgy (p-ephed)	150
CHILDREN'S FLONASE ALLERGY RLF	149	childrens plus multi-symp cold	150
children's flu relief	149	CHLO TUSS	150
children's ibu-drops	149	chlophedianol-guaifenesin	150
children's ibuprofen	149	CHLOR-TRIMETON	150
children's m-s cold day-night	149	chloramphenicol sod succinate	14
children's mapap	149	chloraseptic throat spray	150
CHILDREN'S MUCINEX COLD-FEVER	149	chlorhexidine gluconate	95, 150
children's mucinex cough	149	chlorhist	150
CHILDREN'S MUCINEX MULTI-SYMP	149	chloroquine phosphate	15
CHILDREN'S MUCINEX NIGHT TIME	150	chlorothiazide	87
children's non-aspirin	150	chlorothiazide sodium	88
children's pain relief	150	chlorphen sr	150
children's pain reliever	150	chlorpheniramine maleate	151
children's pain-fever relief	150	chlorpheniramine-phenyleph-dm	151
children's pepto	150	chlorpromazine	60
children's plus flu	150	chlortabs	151
children's profen ib	150	chlorthalidone	88
children's q-pap	150	chocolate laxative	151
children's saline nasal spray	150	CHOLBAM	99
children's silapap	150	cholestyramine (with sugar)	49
children's silfedrine	150	cholestyramine light	49
children's soothe	150	chorionic gonadotropin, human	104
children's stuffy nose-cold	150	chromium chloride	135
children's sudafed	150	ciclodan	127
children's sudafed pe cough	150	ciclopirox	128
children's tactinal	150	cilostazol	45
children's wal-dryl allergy	150	cimetidine	99, 151

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cimetidine hcl	99	CLINIMIX E 4.25%/D5W SULF FREE	88
CINRYZE	119	CLINIMIX E 5%/D15W SULFIT FREE	88
ciprofloxacin hcl	15, 95	CLINIMIX E 5%/D20W SULFIT FREE	88
ciprofloxacin in 5 % dextrose	15	CLINIMIX E 5%/D25W SULFIT FREE	88
cisplatin	29	CLINIMIX 2.75%/D5W SULFIT FREE	88
citalopram	60	CLINIMIX 4.25%-D20W SULF-FREE	88
citrate of magnesia	151	CLINIMIX 4.25%-D25W SULF-FREE	88
CITROMA	151	CLINIMIX 4.25%/D10W SULF FREE	88
citrucel	151	CLINIMIX 4.25%/D5W SULFIT FREE	88
cladribine	29	CLINIMIX 5%-D20W(SULFITE-FREE)	88
clarispray	151	CLINIMIX 5%/D15W SULFITE FREE	88
clarithromycin	15	CLINIMIX 5%/D25W SULFITE-FREE	88
CLARITIN	151	clobetasol	128
CLARITIN LIQUI-GEL	151	clobetasol-emollient	128
CLARITIN REDITABS	151	clofarabine	29
CLARITIN-D 12 HOUR	151	CLOLAR	29
CLARITIN-D 24 HOUR	151	clomipramine	60
CLEAR EYES REDNESS RELIEF	151	clonazepam	60
clearasil daily clear(benzoyl)	151	clonidine	49
clearlax	151	clonidine hcl	49, 50
clemastine	27	clopidogrel	45
CLICKFINE	79	clorazepate dipotassium	60
clindamycin hcl	15	clorpres	50
clindamycin in 0.9 % sod chlor	15	clotrimazole	128, 151
clindamycin in 5 % dextrose	15	clotrimazole af	151
clindamycin palmitate hcl	15	clotrimazole 3 day	151
clindamycin pediatric	15	clotrimazole-betamethasone	128
clindamycin phosphate	15, 128	clotrimazole-3	151
CLINIMIX E 2.75%/D10W SUL FREE	88	clotrimazole-7	151
CLINIMIX E 2.75%/D5W SULF FREE	88	cloverine	151
CLINIMIX E 4.25%/D25W SUL FREE	88	clozapine	60

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COARTEM	15	cold-sinus relief	152
codeine sulfate	61	COLEMAN BOTANICALS INSECT	152
codeine-guaifenesin	151	COLEMAN HIGH-DRY INSECT REPEL	152
codituss dm	151	COLEMAN SKINSMART INSECT REP	152
col-rite	151	COLEMAN SPORTSMEN INSECT REPEL	152
COLACE	151	COLEMAN 100 MAX INSECT REPEL	152
COLCRYS	120	colestipol	50
cold and allergy	151	colistin (colistimethate na)	15
cold and allergy (bromphen-pe)	151	colocort	128
cold and allergy pe	151	COMBIGAN	95
cold and allergy(triprolidine)	151	COMETRIQ	29
cold and cough (diphenhydr-pe)	151	COMFORT EZ PEN NEEDLES	79
cold and cough dm	152	COMFORT EZ SYRINGE	79
cold and cough elixir	152	comfort gel	152
cold and flu relief(diphen-pe)	152	comfort gel extra strength	152
cold and flu severe	152	COMPLERA	15
cold and sinus multi-symptom	152	complete	152
cold and sinus pain relief	152	complete allergy	152
cold head congest(gg-pe-acetm)	152	complete allergy medicine	153
cold head congestion day/nite	152	complete lice treatment	153
cold head congestion nighttime	152	COMPOUND W	153
cold head congestion sever day	152	compoz	153
cold multi-symptom	152	compro	99
cold multi-symptom (chlorphen)	152	CONEX	153
cold multi-symptom day/night	152	congest-eze	153
cold multi-symptom nighttime	152	congest-eze pe	153
cold relief	152	congestac	153
cold relief m/s day/night	152	congestion relief (ibuprof-pe)	153
cold relief plus	152	constulose	88
cold severe congestion	152	contac cold-flu night	153
cold-flu relief	152	CONTRAIVE	135

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COPAXONE	120	cough suppressant-expectorant	153
copper chloride	135	cough syrup	153
coricidin hbp	153	cough syrup dm	154
coricidin hbp cold and flu	153	cough-chest congestion dm	154
coricidin hbp cold-multi sympt	153	cough-cold relief hbp	154
CORICIDIN HBP COUGH AND COLD	153	cough-sore throat night	154
CORLANOR	50	coughtab	154
cormax	128	coughtab 400	154
CORRECTOL	153	COUMADIN	45
CORTAID	153	creamy acne face	154
cortisone	104	CREON	100
cortizone-10	153	CRESEMBA	15
cortizone-10 plus	153	CRITIC-AID	154
COSENTYX	128	critic-aid clear af	154
COSENTYX (2 SYRINGES)	128	CRIXIVAN	15
COSENTYX PEN	128	cromolyn	125
COSENTYX PEN (2 PENS)	128	cryselle (28)	104
COSMEGEN	29	CUBICIN	15
COTELLIC	29	CUBICIN RF	15
cough and cold	153	CUPRIMINE	103
cough and cold (chlorphen-dm)	153	CURITY ALCOHOL SWABS	128
cough and cold bp	153	CURITY GAUZE	124
cough and cold mucus relief cf	153	cutter backwoods	154
cough and severe cold	153	cutter backwoods dry	154
cough control (dextromethorph)	153	cutter lemon eucalyptus	154
cough control cf (pe)	153	cutter natural insect repellnt	154
cough control dm	153	cutter natural repellent2	154
cough dm er	153	cutter skinsations	154
cough drops	153	cyanocobalamin (vitamin b-12)	135
cough formula dm	153	cyclafem 1/35 (28)	105
cough relief	153	cyclafem 7/7/7 (28)	105

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cyclobenzaprine	42	DARZALEX	30
cyclophosphamide	29	dasetta 1/35 (28)	105
cycloserine	15	dasetta 7/7/7 (28)	105
CYCLOSET	61	daunorubicin	30
cyclosporine	120	DAUNOXOME	30
cyclosporine modified	120	dayhist	154
CYKLOKAPRON	45	dayhist allergy	154
cyproheptadine	27	daytime and nighttime cold	154
CYRAMZA	29	daytime cold and cough	154
cyred	105	daytime cold-flu	154
CYSTADANE	120	daytime cold-flu relief (pe)	154
CYSTAGON	120	daytime sinus	154
CYSTARAN	95	daytime sinus-congestion	154
cytarabine	29	daytime-cold nighttime-cld-flu	154
cytarabine (pf)	29	deblitane	105
CYTOMEL	105	DEBROX	154
D		decitabine	30
dacarbazine	30	DECONEX DMX	154
dactinomycin	30	DECONEX IR	154
daily fiber	154	deep sea nasal	154
daily fiber (psyllium-sucrose)	154	delsym cough-chest congest dm	155
DAKLINZA	16	DELSYM COUGH-COLD DAYTIME	155
DALIRESP	125	DELSYM COUGH-COLD NIGHTTIME	155
dallergy (chlorpheniramine-pe)	154	delyla (28)	105
DALLERGY (DEXBROMPHENIRAMN-PE)	154	demeclocycline	16
danazol	105	DEM SER	120
dantrolene	42	DENAVIR	128
dapsone	16	DEPO-ESTRADIOL	105
DAPTACEL (DTAP PEDIATRIC) (PF)	39	DERMACEA	124
daptomycin	16	dermafungal	155
DARAPRIM	16	DERMAL WOUND CLEANSER	155

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dermarest psoriasis medicated	155	DHS TAR	155
dermasarra	155	DHS TAR GEL	155
dermazinc shampoo	155	DHS ZINC	155
DESCOVY	16	diabetic siltussin das-na	155
desenex	155	diabetic siltussin-dm	155
desgen dm	155	diabetic siltussin-dm max str	155
desipramine	61	diabetic tussin dm	155
desmopressin	105	dialyvite 800	155
desog-e.estradiol/e.estradiol	105	diamode	155
desogestrel-ethinyl estradiol	105	diaper rash relief	155
desonide	128	diarrhea relief (bismuth subs)	155
desoximetasone	128	DIASTAT	61
despec dm-g	155	DIASTAT ACUDIAL	61
despec-dm (phenyleph-dm-guaif)	155	diazepam	61, 62
desvenlafaxine succinate	61	diazepam intensol	62
dexamethasone	105	dibucaine	155
dexamethasone intensol	105	diclofenac potassium	62
dexamethasone sodium phosphate	95, 105	diclofenac sodium	62, 95
dexchlorphen-pse-chlophedianol	155	dicloxacillin	16
dexmethylphenidate	61	dicyclomine	42
dexrazoxane hcl	120	didanosine	16
dextroamphetamine	61	diethylpropion	135
dextroamphetamine-amphetamine	61	DIFICID	16
dextromethorphan polistirex	155	diflunisal	62
dextromethorphan-guaifenesin	155	digestive relief	155
dextrose 10 % and 0.2 % nacl	89	digitek	50
dextrose 10 % in water (d10w)	89	digox	50
dextrose 5 % in water (d5w)	89	digoxin	50
dextrose 5%-0.2 % sod chloride	89	dihydroergotamine	42
dextrose 5%-0.3 % sod.chloride	89	DILANTIN	62
dhs sal	155	DILANTIN EXTENDED	62

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DILANTIN INFATABS	62	docusate calcium	156
DILANTIN-125	62	docusate sodium	156
dilt-xr	50	docusil	156
diltiazem hcl	50	dofetilide	50
dimaphen (pe)	155	dok	156
dimetapp cold-allergy (pe)	155	dok plus	156
dimetapp cold-congestion	155	DOMEBORO	156
dimetapp dm cold-cough (pe)	156	DONATUSSIN	156
dimetapp long-acting (cpm-dm)	156	donepezil	42
DIOCTO	156	DORIBAX	16
dioctyl	156	doripenem	16
diotame	156	dorzolamide	95
diphedryl	156	dorzolamide-timolol	95
diphedryl allergy	156	double antibiotic	156
diphenhist	156	double antibiotic (b.tracn zn)	156
diphenhydramine hcl	27, 156	double antibiotic-pain relief	156
diphenhydramine-phenylephrine	156	doxazosin	51
diphenoxylate-atropine	100	doxepin	62
dipyridamole	50	doxercalciferol	134
disopyramide phosphate	50	doxorubicin	30
disposable enema	156	doxorubicin, peg-liposomal	30
disulfiram	120	doxy-100	16
DIURIL	89	doxycycline hyclate	16, 95
divalproex	62	doxycycline monohydrate	16
dm max	156	DR. SMITH'S ADULT BARRIER	156
doc-q-lace	156	DR. SMITH'S DIAPER	156
doc-q-lax	156	DR. SMITH'S DIAPER RASH	156
DOCEFREZ	30	DR. SMITH'S RASH-SKIN	156
docetaxel	30	DRAMAMINE	156
docu	156	dramamine less drowsy	156
docuprene	156	driminate	157

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DRISDOL	135	EASY COMFORT INSULIN SYRINGE	79
DRISTAN COLD	157	EASY COMFORT PEN NEEDLES	79
DRISTAN LONG LASTING	157	EASY TOUCH	79
dronabinol	100	EASY TOUCH ALCOHOL PREP PADS	128
DROPLET PEN NEEDLE	79	EASY TOUCH FLIPLOCK INSULIN	79
drospirenone-ethinyl estradiol	105	EASY TOUCH INSULIN SAFETY SYR	79
DROXIA	30	EASY TOUCH INSULIN SYRINGE	80
DUAVEE	105	EASY TOUCH LUER LOCK INSULIN	80
ducodyl	157	EASY TOUCH SHEATHLOCK INSULIN	80
DULCOLAX (BISACODYL)	157	EASY TOUCH UNI-SLIP	80
dulcolax stool softener (dss)	157	eazze the pain	157
duloxetine	62	econazole	128
duo fusion	157	econtra ez	157
DURAFLU	157	ECOTRIN	157
DURAMORPH (PF)	62	ecotrin low strength	157
DURAVENT DM	157	eczema anti-itch	157
DUREZOL	96	ed a-hist	157
dutasteride	120	ED A-HIST DM	157
dutasteride-tamsulosin	120	ed a-hist pse	157
dyna-hex	157	ed bron gp	157
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FYCOMPA	64	gemcitabine	31
G		gemfibrozil	51
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GLEOSTINE	31	hair regrowth treatment	162
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gyne-lotrimin 7	162	hemorrhoidal cream	162
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heparin (porcine)	46	hydrocortisone plus	163
heparin (porcine) in 5 % dex	46	hydrocortisone valerate	129
heparin(porcine) in 0.45% nacl	46	hydrocortisone-acetic acid	96
HEPATAMINE 8%	89	hydrocortisone-aloe vera	163
HERCEPTIN	31	hydrocream	163
HETLIOZ	65	hydrolatum	163
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HISTEX DM	163	hydroxocobalamin	135
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INVOKAMET	108	ISTODAX	32
INVOKAMET XR	108	itch relief	164
INVOKANA	108	itch relief (clotrimazole)	164
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junel fe 24	109	klor-con m20	90
junel 1.5/30 (21)	109	klor-con sprinkle	90
junel 1/20 (21)	109	KLOR-CON 10	90
junior mapap	165	KLOR-CON 8	90
K		konsyl (sugar)	165
KABIVEN	90	konsyl fiber	165
KADCYLA	33	konsyl sugar-free	165
KALETRA	19	KORLYM	109
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ketoconazole	19, 130	lactulose	90
ketoprofen	66	LAMISIL (AEROSOL)	165
ketorolac	96	lamisil af	165
ketotifen fumarate	165	lamisil at	165
KEYTRUDA	33	lamivudine	19
kidkare cough/cold	165	lamivudine-zidovudine	19
kimidess (28)	109	lamotrigine	66
KINRIX (PF)	40	LANOXIN	52
kionex	90	LANOXIN PEDIATRIC	52
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larin 1.5/30 (21)	109	LEVEMIR FLEXTOUCH	110
larin 1/20 (21)	109	levetiracetam	66
larin 24 fe	109	levetiracetam in nacl (iso-os)	66
larissia	109	levobunolol	96
LARTRUVO	33	levocarnitine	122
latanoprost	96	levocarnitine (with sugar)	122
LATUDA	66	levocetirizine	27
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laxacin	165	levofloxacin in d5w	19
laxaclear	165	levoleucovorin	122
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laxative (glycerin-pediatric)	165	levonorg-eth estrad triphasic	110
laxative (sennosides)	165	levonorgestrel	165
laxative feminine	165	levonorgestrel-ethinyl estrad	110
laxative maximum strength	165	levora-28	110
laxative peg 3350	165	levorphanol tartrate	66
laxative pills	165	levothyroxine	110
laxative pills regular	165	LEVOXYL	110
laxative plus stool softener	165	LEXIVA	19
LAZANDA	66	LIALDA	101
lc-5	165	lice complete kit 1-2-3	166
leflunomide	121	lice killing	166
LENVIMA	33	lice killing (permethrin)	166
lessina	110	lice pyrinyl shampoo	166
LETAIRIS	126	lice solution	166
letrozole	110	lice treatment	166
leucovorin calcium	121	lice treatment (permethrin)	166
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lidocaine-prilocaine	130	loradamed	166
lillow	110	lorata-d	166
lincomycin	20	lorata-dine d	166
lindane	130	loratadine	166
linezolid	20	loratadine-d	166
linezolid-0.9% sodium chloride	20	lorazepam	67
LINZESS	101	lorazepam intensol	67
liothyronine	110	LORTUSS DM	166
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liquitears	166	losartan	52
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lisinopril-hydrochlorothiazide	52	lotrimin af	166
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LITE TOUCH INSULIN PEN NEEDLES	81	lotrimin af jock itch powder	167
LITE TOUCH INSULIN SYRINGE	81	lotrimin af powder	167
lithium carbonate	67	lotrimin ultra	167
lithium citrate	67	lovastatin	52
LITHOSTAT	90	low-ogestrel (28)	110
little remedies	166	loxapine succinate	67
little remedies fever and pain	166	lubricant dry eye relief	167
LMX 5	166	lubricant eye	167
LODRANE D	166	lubricant eye (cmc-glycer)(pf)	167
lohist - d	166	lubricant eye (cmc-glycerin)	167
lohist-dm	166	lubricant eye (pg-peg 400)	167
long acting nasal decong (pse)	166	lubricant eye (pg-peg 400)(pf)	167
long acting nasal spray	166	lubricant eye (polyv alcohol)	167
LONSURF	33	lubricant eye drops	167
loperamide	166	lubricant gel	167
lopinavir-ritonavir	20	lubricant plus	167

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lubricating drops	167	mag-g	167
lubricating plus	167	MAGELLAN INSULIN SAFETY SYRNG	81
lubricating relief	167	MAGELLAN SYRINGE	81
lubrifresh pm	167	maglox	167
LUMIGAN	97	magnesium citrate	167
LUMIZYME	94	magnesium gluconate	167
LUPRON DEPOT	110	magnesium oxide	167
LUPRON DEPOT (3 MONTH)	110	magnesium sulfate	67
LUPRON DEPOT (4 MONTH)	110	magnesium sulfate in d5w	67
LUPRON DEPOT (6 MONTH)	110	magnesium sulfate in water	67
LUPRON DEPOT-PED	111	MAGOX	167
LUPRON DEPOT-PED (3 MONTH)	111	major-prep hemorrhoidal	168
lutera (28)	111	malathion	130
LYNPARZA	33	manganese chloride	135
LYRICA	67	mapap (acetaminophen)	168
LYSODREN	34	mapap arthritis pain	168
lyza	111	mapap cold formula	168
		mapap extra strength	168
		mapap pm	168
		mapap sinus max strength (pe)	168
		maprotiline	67
		MAR-COF BP	168
		MAR-COF CG	168
		marlissa	111
		MARPLAN	67
		MARQIBO	34
		masanti double strength	168
		masophen	168
		MATULANE	34
		MAXI-COMFORT INSULIN SYRINGE	81
		MAXIMUM D3	168

M

M.V.I. ADULT	135		
M.V.I. PEDIATRIC	135		
M.V.I.-12 (WITHOUT VITAMIN K)	135		
m-clear wc	167		
M-END DMX	167		
M-END MAX D	167		
M-END PE	167		
M-M-R II (PF)	40		
MAALOX ADVANCED	167		
maalox maximum strength	167		
MAG-AL	167		
MAG-AL PLUS	167		
mag-al plus extra strength	167		

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maximum strength flu	168	mercaptopurine	34
maxiphen	168	meropenem	20
MAXIPHEN DM	168	meropenem-0.9% sodium chloride	20
meclizine	168	mesalamine	101
meclofenamate	67	mesalamine with cleansing wipe	101
medi pads	168	mesna	122
medi-laxx	168	MESNEX	122
medi-meclizine	168	METAMUCIL	168
MEDICATED BODY POWDER	168	METAMUCIL (WITH SUGAR)	168
medicated chest rub	168	METAMUCIL FIBER SINGLES	168
medicated pads	168	METAMUCIL SUGAR-FREE (ASPART)	169
medicidin-d	168	metaproterenol	43
mediproxen	168	metaxalone	43
medroxyprogesterone	111	metformin	111
mefloquine	20	methadone	68
megestrol	111	METHADOSE	68
MEKINIST	34	methazolamide	97
meloxicam	67	methenamine hippurate	20
melphalan	34	methergine	124
melphalan hcl	34	methimazole	111
memantine	67, 68	METHITEST	111
men-phor	168	methocarbamol	43
MENACTRA (PF)	40	methotrexate sodium	34
MENEST	111	methotrexate sodium (pf)	34
MENHIBRIX (PF)	40	methoxsalen	130
MENOMUNE - A/C/Y/W-135	40	methyclothiazide	90
MENOMUNE - A/C/Y/W-135 (PF)	40	methyl dopa	52
MENTAX	130	methyl dopa-hydrochlorothiazide	52
MENVEO A-C-Y-W-135-DIP (PF)	40	methylergonovine	124
meperidine	68	methylphenidate hcl	68
MEPHYTON	135	methylprednisolone	111

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methylprednisolone acetate	111	migraine formula	169
methylprednisolone sodium succ	111	migraine pain reliever	169
methyltestosterone	111	migraine relief	169
metipranolol	97	milk of magnesia	169
metoclopramide hcl	101	milk of magnesia concentrated	169
metolazone	90	mimvey	112
metoprolol succinate	52	mineral freez	169
metoprolol ta-hydrochlorothiaz	53	mineral oil	169
metoprolol tartrate	53	MINI ULTRA-THIN II	82
metronidazole	20, 130	minocycline	20
metronidazole in nacl (iso-os)	20	minoxidil	53, 169
mexiletine	53	mintox	169
mgo	169	mintox maximum strength	169
mi-acid	169	mintox plus	169
mi-acid gas relief	169	MIRALAX	169
MIACALCIN	111	mirtazapine	68
micatin	169	misoprostol	101
miconazole nitrate	169	mitomycin	34
miconazole 7	169	mitoxantrone	34
miconazole-skin clnsr17	169	modafinil	68
miconazole-3	130, 169	moexipril	53
miconazorb af	169	moexipril-hydrochlorothiazide	53
micro-guard	169	moisturizing lubricant	169
microgestin fe 1.5/30 (28)	112	molindone	68, 69
microgestin fe 1/20 (28)	112	mometasone	130
microgestin 1.5/30 (21)	112	MONISTAT 1 COMBO PACK	169
microgestin 1/20 (21)	112	MONISTAT 3	169
MICROGESTIN 24 FE	112	MONISTAT 7	169
midodrine	43	MONOJECT INSULIN SAFETY SYRINGE	82
MIDOL (NAPROXEN)	169	MONOJECT INSULIN SYRINGE	82
miglitol	112	MONOJECT SYRINGE	82

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MONOJECT ULTRA COMFORT INSULIN	82	mucinex fast-max nite cold-flu	170
montelukast	126	MUCINEX FAST-MAX SEVERE COLD	170
morphine	69	mucinex fast-maxsev cold-sinus	170
morphine (pf)	69	MUCINEX FST-MX DY-NT COLD(DPH)	171
morphine concentrate	69	MUCINEX MINI-MELTS	171
motion relief (meclizine)	169	mucinex sinus-max	171
motion sickness	169	MUCINEX SINUS-MAX D-N (DIPHEN)	171
motion sickness (meclizine)	170	MUCINEX SINUS-MAX DY-NT (DXYL)	171
motion sickness ii	170	MUCINEX SINUS-MAX NITE CONGEST	171
motion sickness relief	170	MUCINEX SINUS-MAX PRESSUR-PAIN	171
motion sickness relief ii	170	MUCINEX SINUS-MAX SEV CONG(DM)	171
motion sickness relief(mecliz)	170	MUCINEX SINUS-MAX SEV CONGESTN	171
motion-time	170	mucosa	171
motrin pm	170	mucosa dm	171
move it along	170	mucus and cough relief	171
moxifloxacin	97	mucus d	171
MOZOBIL	47	mucus relief	171
mucaphed	170	mucus relief chest	171
MUCINEX	170	mucus relief cold and sinus	171
MUCINEX COLD AND SINUS	170	mucus relief cold-flu-sore thr	171
MUCINEX COUGH MINI-MELTS	170	mucus relief congestion-cough	171
MUCINEX D	170	mucus relief cough	171
MUCINEX D MAXIMUM STRENGTH	170	mucus relief d (phenylephrine)	171
MUCINEX DM	170	mucus relief d (pseudoephed)	171
MUCINEX FAST-MAX COLD-FLU-THRT	170	mucus relief dm	171
MUCINEX FAST-MAX CONGEST-COUGH	170	mucus relief dm max	171
mucinex fast-max congest-head	170	mucus relief er	171
MUCINEX FAST-MAX DAY-NITE CONG	170	mucus relief pe	171
MUCINEX FAST-MAX DAY-NT(DOXYL)	170	mucus relief plus	171
mucinex fast-max dm max	170	mucus relief sev congest-cold	171
mucinex fast-max nite (doxyl)	170	mucus relief severe cold	171

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MUCUS RELIEF SINUS	171	nabumetone	69
mucus relief sinuspressur-pain	172	nadolol	53
mucus rlf severe sinus congest	172	nadolol-bendroflumethiazide	53
mucus-er max	172	nafcillin	20
MULTAQ	53	nafcillin in dextrose iso-osm	20
multi antibiotic plus	172	NAGLAZYME	94
multi-symptom cold (pe)	172	nalbuphine	69
multi-symptom cold (pe-cpm)	172	naloxone	69
multi-symptom cold daytime	172	naltrexone	69
multi-symptom cold night time	172	NAMENDA XR	70
mupirocin	130	NAMZARIC	70
mupirocin calcium	130	naphazoline	97
MURINE EAR	172	naphcon-a	172
murine ear wax removal system	172	naproxen	70
muro 128	172	naproxen sodium	70, 172
muscle relief	172	naratriptan	70
MUSTARGEN	34	NARCAN	70
MYALEPT	112	nasal allergy symptom control	172
myco nail a	172	nasal and sinus decongestant	172
mycophenolate mofetil	122	nasal decongest-antihistamine	172
mycophenolate mofetil hcl	122	nasal decongestant (oxymetazl)	172
mycophenolate sodium	122	nasal decongestant (pe)	172
myferon 150	172	nasal decongestant (pseudoeph)	172
MYFORTIC	122	nasal decongestant-antihist	172
MYLOTARG	34	nasal four	172
myorisan	130	nasal moisturizing	172
MYRBETRIQ	133	nasal spray (oxymetazoline)	172
mytab gas	172	nasal spray (sodium chloride)	172
mytab gas maximum strength	172	nasal spray extra moisturizing	173
myzilra	112	nasal spray long acting	173
		nasal spray moisturizing	173

N

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nasal spray sinus	173	nefazodone	70
nasal spray 12 hour	172	neo-polycin	97
nasal spray 12 hour sinus	173	neo-polycin hc	97
NASALCROM	173	neo-synephrine (phenylephrine)	173
NASOPEN PE	173	neo-synephrine 12 h spr (oxym)	173
nateglinide	112	neomycin	20
NATPARA	112	neomycin-bacitracin-poly-hc	97
NATRAPEL	173	neomycin-bacitracin-polymyxin	97
natura-lax	173	neomycin-polymyxin b gu	130
natural balance	173	neomycin-polymyxin b-dexameth	97
natural calcium	173	neomycin-polymyxin-gramicidin	97
natural daily fiber	173	neomycin-polymyxin-hc	97
natural fiber laxative	173	NEOSPORIN (NEO-BAC-POLYM)	173
natural fiber laxative (sugar)	173	neosporin (neo-polym-gramicid)	97
natural fiber laxative therapy	173	NEOSPORIN + PAIN RELIEF	173
natural fiber supplement	173	neosporin anti-itch	173
natural laxative	173	NEOSPORIN PLUS PAINRELIEF(BAC)	174
natural psyllium fiber	173	NEPHRAMINE 5.4 %	90
natural senna laxative	173	NEPHRO-VITE	174
natural tears (pf)	173	NERLYNX	34
natural veg laxative(dextrose)	173	NEULASTA	47
natural veg laxative(sennosid)	173	NEUPOGEN	47
natural vegetable	173	NEUPRO	70
natural vegetable (psyllium)	173	NEUTROGENA T-GEL	174
nature's tears (hypromellose)	173	NEUTROGENA T-GEL CONDITIONER	174
nausea control	173	NEUTROGENA T/SAL	174
nausea relief	173	nevirapine	20
NEBUPENT	20	NEXAVAR	34
necon 0.5/35 (28)	112	niacin	174
necon 1/35 (28)	112	niacor	53
necon 10/11 (28)	112	nicardipine	53

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nicoderm cq	174	nite time cold-flu relief (pe)	174
nicorelief	174	nite time-d cold-flu relief	175
NICORETTE	174	nite-time cold-flu	175
nicotine	174	nitetime multi-symptom	175
nicotine (polacrilex)	174	nitrofurantoin	21
NICOTROL NS	44	nitrofurantoin macrocrystal	21
nifedical xl	53	nitrofurantoin monohyd/m-cryst	21
nifedipine	53	nitroglycerin	53
night time	174	NITROSTAT	53
night time cold and flu relief	174	niva-hist dm	175
night time cold medicine	174	nivanex dmx	175
night time cold-flu	174	NIX CREME RINSE	175
night time cough-sore throat	174	NO DOZ	175
night time pain medicine	174	no drip	175
nighttime sleep	174	noble formula	175
nighttime allergy relief	174	noble formula hc	175
nighttime cold-flu	174	nohist-dm	175
nighttime cough	174	nohist-lq	175
nighttime cough-cold	174	non-aspirin	175
nighttime sinus-congestion	174	non-aspirin child	175
nighttime sleep aid (diphen)	174	non-aspirin extra strength	175
nighttime sleep-aid (doxylamn)	174	non-aspirin nighttime	175
nikki (28)	112	non-aspirin pain relief	175
NILANDRON	34	non-aspirin pain relief pm	175
nilutamide	34	non-aspirin pm	175
nimodipine	53	non-aspirin severe congest m-s	175
NINJACOF	174	non-aspirin 8 hour	175
NINJACOF-A	174	non-drowsy allergy	175
ninjacof-xg	174	noreth-ethinyl estradiol-iron	112
NINLARO	35	norethindrone (contraceptive)	112
nite time cold-flu	174	norethindrone ac-eth estradiol	112

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norethindrone acetate	112	NOVOLOG PENFILL	113
norethindrone-e.estradiol-iron	113	NOVOPEN ECHO	82
norgestimate-ethinyl estradiol	113	NOVOTWIST	82
norlyda	113	NOXAFIL	21
norlyroc	113	nts step 1	175
NORMOSOL-M IN 5 % DEXTROSE	90	nu way	175
NORMOSOL-R	91	NU-IRON	175
NORMOSOL-R IN 5 % DEXTROSE	91	NUEDEXTA	70
NORMOSOL-R PH 7.4	91	NULOJIX	122
nortemp	175	NUPLAZID	70
NORTHERA	44	NUTRILIPID	91
nortrel 0.5/35 (28)	113	nuzole	175
nortrel 1/35 (21)	113	nyamyc	130
nortrel 1/35 (28)	113	nyata	130
nortrel 7/7/7 (28)	113	nyquil d	175
nortriptyline	70	nystatin	21, 130
NORVIR	21	nystatin-triamcinolone	130
nose drops	175	nystop	130
nose drops extra strength	175	nyt-time sleep	175
nose spray	175	nytol	175
NOVOFINE AUTOCOVER	82		
NOVOFINE PLUS	82	O	
NOVOFINE 30	82	OCEAN FOR KIDS	176
NOVOFINE 32	82	OCEAN NASAL	176
NOVOLIN N	113	octreotide acetate	122
NOVOLIN R	113	ODEFSEY	21
NOVOLIN 70/30	113	ODOMZO	35
NOVOLOG	113	odor control foot-sneaker	176
NOVOLOG FLEXPEN	113	OFEV	126
NOVOLOG MIX 70-30	113	off active	176
NOVOLOG MIX 70-30 FLEXPEN	113	off deep woods	176
		off deep woods dry	176

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off deep woods sportsmen	176	oseltamivir	21
off familycare (with deet)	176	oxaliplatin	35
off familycare(with picaridin)	176	oxandrolone	114
ofloxacin	21, 97	oxaprozin	71
ogestrel (28)	113	oxazepam	71
okebo	21	oxcarbazepine	71
olanzapine	70	oxybutynin chloride	133
omega-3 acid ethyl esters	54	oxycodone	71
omeprazole	101	oxycodone-acetaminophen	71
omeprazole magnesium	176	oxycodone-aspirin	71
OMNITROPE	113	oxymetazoline	176
ONCASPAR	35	oysco-500	176
ondansetron	101	oyster shell calcium	176
ondansetron hcl	101	oyster shell calcium 500	176
ondansetron hcl (pf)	101	oyster shell calcium-vit d2	176
ONFI	70	P	
ONIVYDE	35	PACERONE	54
opcicon one-step	176	paclitaxel	35
OPDIVO	35	PAIN AND FEVER	176
OPSUMIT	126	pain and sleep	176
opti-clear	176	pain relief	176
ora relief	176	pain relief (acetamin-asp-caf)	176
oral relief sore throat spray	176	pain relief adult	176
oralone	131	pain relief allergy sinus	176
ORASEP	176	pain relief cold and cough	176
ORFADIN	122	pain relief extra strength	176
original nasal spray	176	pain relief pm	176
ORKAMBI	126	pain relief pm rapid release	176
ormir	176	pain relief regular strength	177
orphenadrine citrate	44	pain relief sinus pe	177
orsythia	113	pain reliever	177

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pain reliever (acetam-aspirin)	177	peg-electrolyte soln	101
pain reliever extra strength	177	PEGANONE	71
pain reliever plus	177	PEGINTRON	21
pain reliever pm	177	PEGINTRON REDIPEN	21
pain reliever pm ex-strength	177	peg3350	177
pain relieving (m-salic-men)	177	PEN NEEDLE	82
pain-off	177	PEN NEEDLE, DIABETIC	82
paliperidone	71	penicillin g potassium	22
pamidronate	122	penicillin g sodium	22
pamprin max	177	penicillin v potassium	22
PANOXYL	177	PENTACEL (PF)	40
panoxyl-4	177	PENTAM	22
PANRETIN	131	pentazocine-naloxone	71
pantoprazole	101	PENTIPS	83
paricalcitol	134	pentoxifylline	47
paroex oral rinse	97	pep-t-med	177
paromomycin	21	PEPCID AC	177
paroxetine hcl	71	PEPCID COMPLETE	177
PASER	21	peptic relief	177
PATADAY	97	PEPTO-BISMOL	177
PAXIL	71	PEPTO-BISMOL MAX ST	177
PAZEO	97	PEPTO-BISMOL TO-GO	177
PEDI-BORO SOAK	177	PERCOGESIC	177
pedia relief	177	PERDIEM OVERNIGHT RELIEF	177
PEDIA RELIEF COUGH-COLD	177	PERFOROMIST	44
pediacare fever reducer	177	PERI-COLACE	177
pediacare multi-symptom cold	177	PERIGUARD	177
PEDIARIX (PF)	40	PERIKABIVEN	91
pediatric cough and cold	177	perindopril erbumine	54
PEDVAX HIB (PF)	40	periogard	97
peg 3350-electrolytes	101	PERJETA	35

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permethrin	131, 178	pimtrex (28)	114
perphenazine	71	pindolol	54
perphenazine-amitriptyline	71	pink bismuth	178
PERSA-GEL	178	pink bismuth maximum strength	178
PETROLEUM JELLY	178	pioglitazone	114
PETROLEUM JELLY, WHITE	178	pioglitazone-glimepiride	114
pfizerpen-g	22	pioglitazone-metformin	114
pharbecchlor	178	piperacillin-tazobactam	22
pharbedryl	178	pirmella	114
pharbetol	178	piroxicam	72
PHAZYME	178	PLAN B ONE-STEP	178
phenaseptic	178	PLASMA-LYTE A	91
phendimetrazine tartrate	135	PLASMA-LYTE 148	91
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phentermine	135	podactin	178
phenylephrine-chlophedianol-gg	178	podofilox	131
phenylephrine-dm-guaifenesin	178	poly bacitracin (zinc)	178
phenylhistine dh	178	POLY HIST FORTE (DOXYLAMINE)	178
PHENYTEK	72	POLY HIST PD	178
phenytoin	72	POLY-HIST DM (THONZYLAMINE)	178
phenytoin sodium	72	poly-iron	178
phenytoin sodium extended	72	POLY-TUSSIN AC	178
PHILLIPS MILK OF MAGNESIA	178	POLY-VENT DM	178
phillips' liqui-gels	178	POLY-VENT IR	178
PHOSLYRA	91	polycin	98
PHOSPHOLINE IODIDE	98	polyethylene glycol 3350	178
PHYSIOLYTE	91	polymyxin b sulf-trimethoprim	98
PHYSIOSOL IRRIGATION	91	polymyxin b sulfate	22
pilocarpine hcl	44, 98	POLYSPORIN	178
pimozide	72	polyvinyl alcohol	178

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POMALYST	35	prednisolone	114
portia	114	prednisolone acetate	98
PORTRAZZA	35	prednisolone sodium phosphate	98, 114
potassium chlorid-d5-0.45%nacl	91	prednisone	114
potassium chloride	91	prednisone intensol	114
potassium chloride in lr-d5	91	PREMARIN	114
potassium chloride in 0.9%nacl	91	PREMASOL 10 %	92
potassium chloride in 5 % dex	91	PREMASOL 6 %	92
potassium chloride-d5-0.2%nacl	91	PREMPHASE	114
potassium chloride-d5-0.3%nacl	92	PREMPRO	114
potassium chloride-d5-0.9%nacl	92	PRENATABS FA	134
potassium chloride-0.45 % nacl	91	prenatal plus (calcium carb)	134
potassium citrate	92	PREPARATION H	179
POTIGA	72	preparation h (witch hazel)	179
povidone-iodine	178	preparation h hydrocortisone	179
powderlax	178	PREPARATION H MAXIMUM STRENGTH	179
pr natal 400	134	PREPARATION H(PE, WITCH HAZEL)	179
pr natal 400 ec	134	PREPARATION H(PE,CB)	179
pr natal 430	134	pres gen	179
pr natal 430 ec	134	presgen b	179
PRALUENT PEN	54	pressure and pain	179
PRALUENT SYRINGE	54	pressure-pain pe plus mucus	179
pramipexole	72	PREVACID 24HR	179
pramoxine	178	prevalite	54
prasugrel	47	previfem	114
pravastatin	54	PREZCOBIX	22
prazosin	54	PREZISTA	22
pre-moistened hemorrhoidal	178	PRIFTIN	22
PRED-G	98	PRILOSEC OTC	179
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REPATHA SURECLICK	55	ri-tussin	182
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senexon	183	severe congestion and coughmax	184
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sinus nasal spray	185	sodium chloride 0.9 %	92
sinus pain relief	185	sodium chloride 3 %	92
sinus pe decongestant	185	sodium chloride 5 %	92
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spironolactone	55	SUCRAID	94
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SPRYCEL	36	SUDAFED PE PRESSURE+PAIN	186
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sronyx	116	SUDAFED PE PRESSURE+PAIN+MUCUS	186
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st joseph aspirin	186	sudogest	186
st. joseph aspirin	186	sudogest cold and allergy	187
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STAHIST AD	186	sudogest sinus and allergy	187
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tactinal extra strength	187	tension headache	188
TAFINLAR	36	tension headache pain reliever	188
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TAKE ACTION	187	terazosin	56
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TAXOTERE	36	tetanus-diphtheria toxoids-td	41
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TRELSTAR	117	TRIPLE ANTIBIOTIC	189
TRESIBA FLEXTOUCH U-100	117	triple antibiotic (pram) extra	189
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tussin dm max	190	ULTICARE INSULIN SYRINGE	85
tussin expectorant	190	ULTICARE PEN NEEDLE	85
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TYGACIL	25	ultra fresh	190
TYKERB	37	ultra fresh pm	190
TYLENOL	190	ultra lubricant eye	190
TYLENOL ARTHRITIS PAIN	190	ultra sleep (doxylamine succ)	190
TYLENOL COLD AND FLU SEVERE	190	ultra strength antacid	190
TYLENOL COLD HEAD CONGEST SEVR	190	ultra strength calcium antacid	190
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List of Drugs by Medical Condition

The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category, heart-related conditions. That is where you will find drugs that treat heart conditions.

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U.S. Department of Health and Human Services

200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

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