



Kaiser Permanente Colorado Commercial Formulary

(List of Covered Drugs)

Please Read: This document contains information about the drugs we cover when you participate in a Kaiser Permanente Colorado Commercial Mid and Large group plan. The listing does not provide information regarding specific coverage, including specific exclusions, copays, or coinsurances. That information can be found by referring to the *Evidence of Coverage or Individual Membership Agreement*. If you have specific questions about your prescription benefits, please contact Member Services at **303-338-3800 (TTY 711)** or toll free at 1-800-632-9700.

What is the Kaiser Permanente Colorado Commercial Drug Formulary?

A formulary is a list of covered drugs chosen by a group of Kaiser Permanente physicians and pharmacists known as the Pharmacy and Therapeutics Committee. This committee meets regularly to evaluate and select the safest, most effective medications for our members. Kaiser Permanente may add or remove drugs from the formulary during the year. Our Pharmacy and Therapeutics Committee thoroughly reviews medical literature and selects drugs for our formulary based on how safe and effective they are, among other factors.

What drugs are covered?

Kaiser Permanente will generally cover brand name (when no generic is available), generic and specialty tier drugs listed on our formulary, if the drug is medically necessary, the prescription is filled at a Kaiser Permanente or a participating network pharmacy, and other plan rules are followed.

Drugs listed on the formulary are covered by your prescription drug benefit when dispensed for use in an outpatient setting. Some drugs have restrictions. Using drugs on the formulary helps maintain quality care for our members while keeping the cost of prescription drugs affordable.

What is a generic drug?

A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name and specialty tier drugs. In most cases, a generic equivalent is dispensed when available. Members will be notified at the time of service when a generic equivalent is dispensed in place of a brand name drug.

What is a brand name drug?

Brand name drugs are manufactured and sold by the drug company that originally researched and developed the drug. When the patent on a brand name drug expires, other drug companies may manufacture and sell an FDA-approved generic version of the drug with the same active ingredient(s) at lower prices.

What is a specialty tier drug?

Drugs listed as a specialty tier drug are very high-cost drugs.

Are Over-the-Counter (OTC) items covered on the formulary?

Generally, most plans exclude drugs that are also available over-the-counter. Your plan may allow for the following types of over-the-counter items to be covered:

Aspirin – Covered when used for the prevention of cardiovascular disease, when the potential harm of an increase in gastrointestinal hemorrhage is outweighed by a potential benefit of a reduction in myocardial infarctions (men aged 45-79 years; women age 55 to 79 years). Covered after 12 weeks of gestation in women who are at high risk for preeclampsia.

Oral Fluoride – Covered for dental caries in preschool children and should be prescribed at currently recommended doses to preschool children older than 6 months whose primary water source is deficient in fluoride.

Folic Acid – Covered for woman planning or capable of getting pregnant.

Iron Supplements – Covered for asymptomatic children aged 6 to 12 months who are at increased risk for iron deficiency anemia.

Contraceptives – Covered over-the-counter items such as spermicides, condoms, and sponges.

Colonoscopy (bowel) preparation medications – Covered when medically necessary when associated with a preventive colonoscopy.

Nicotine Replacement – Covered over-the-counter items for tobacco cessation products such as nicotine patches, gum or lozenges if your plan allows.

What drugs are not covered?

Drugs not listed on the formulary are referred to as non-preferred or non-formulary drugs and are not covered unless Kaiser Permanente determines that they are medically necessary through the formulary exception process.

Prescriptions for non-preferred or non-formulary medications that are determined not to be medically necessary may be filled at Kaiser Permanente or a participating network pharmacy for the full retail price.

Are there any restrictions on the drugs covered on the formulary?

Some covered drugs may have additional requirements or limits on coverage. For these drugs, Kaiser Permanente may require you or your provider to get an approval from us before you fill your prescription. Additionally, when there is a national shortage of a drug, we may limit the quantity of the drug dispensed. These restriction types are noted in the formulary list within this document.

The type of restrictions that may require an approval or may be limited include:

Restriction Type	Guidelines	Description
AGE	Age Limits	A drug that is restricted to a specific age or age range.
PR	Physician Restrictions	A drug that is required to be written by a provider specialized in the treatment of certain conditions. For example, a drug used for cancer may be restricted to providers specialized in Oncology.
PA	Prior Authorization	A drug that requires specific medical criteria be met and requires approval by the plan prior to being dispensed for benefit.
RB	Restricted to Benefit	A drug that is restricted to a certain benefit for coverage and the cost share may be different than the tier listed.
QL	Quantity Limits	A drug that has a quantity limit.
DS	Day Supply Limits	A drug that is limited to a specific day supply.
ST	Step Therapy	A drug that requires a similar therapy be tried prior to dispensing this drug for prescription benefit.

MO	Maintenance Medication	A drug that is considered to be a maintenance medication. Note: Not all maintenance medications can be mailed from our mail order pharmacy such as high-cost drugs or drugs that require special handling.
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How to request an exception to a drug not covered on the formulary or a drug that has a restriction or limitation?

You should contact us to ask for an initial coverage decision for a formulary or restriction exception. When requesting an exception, we will need a statement from your provider supporting the request. Generally, we must make our decision within 72 hours of getting your providers supporting statement.

What drugs are eligible to be mailed from the mail order pharmacy?

Most drugs can be mailed from our mail order pharmacy. Some drugs (such as high-cost drugs or drugs that require special handling) may not be eligible for mailing. Drugs cannot be mailed outside the United States.

Your prescription drug plan may allow you to receive an extended day supply (e.g., 90-day supply) of maintenance medications for only one or two copayments if you use the mail order pharmacy. A maintenance medication is one that Kaiser Permanente has determined would be taken long term and for chronic conditions for most of the population. These medications are noted with a MO in the formulary list within this document.

You can order refills through our mail-order service online at kp.org/refill or by phone or mobile app. There is no extra charge for mail order. The appropriate cost share will apply.

Kaiser Permanente Formulary

The formulary list within this document provides the drugs covered under your plan and notes any restrictions or limits required for a drug.

The first column of the chart lists the drug name.

- Generic drugs are listed by their generic name (in *italics*) (e.g., atorvastatin oral tablet 10 mg, 20 mg)
- Some generic drugs have a proprietary (brand) name and are listed in CAPITAL letters (e.g., JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG)
- Brand drugs are listed by their brand name in CAPITAL letters (e.g., JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG)

The second column, "Drug Tier," will indicate what tier number the drug is in. Drugs on our formulary are categorized in one of seven tiers.

Tier Value	Guideline	Description
1	Tier 1	Preventive drugs under the Affordable Care Act
2	Tier 2	Preferred Generic Drugs
3	Tier 3	Preferred Brand Drugs
4	Tier 4	Non-Preferred Generic and Brand Drugs
5	Tier 5	Specialty Drugs
6	Tier 6	Medical Service Drugs administered in a medical office
7	Tier 7	Diabetic Supplies allowed under the prescription benefit

Note: Not all plans have a different cost share for each tier designated. Also, some drugs are required to be covered at no cost to members. Refer to your *Evidence of Coverage* or *Individual Membership Agreement* for information on specific drug coverage for your plan.

The third column of the chart will indicate any restrictions or limits for that drug.

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Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Allergy		
Antihistamines - 1St Generation		
cyproheptadine oral syrup 2 mg/5 ml	Tier 2	
cyproheptadine oral tablet 4 mg	Tier 2	
diphenhydramine hcl injection solution 50 mg/ml	Tier 2	
hydroxyzine hcl intramuscular solution 50 mg/ml	Tier 2	
hydroxyzine hcl oral solution 10 mg/5 ml	Tier 2	MO
hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg	Tier 2	MO
promethazine injection solution 25 mg/ml	Tier 2	
promethazine oral tablet 12.5 mg, 25 mg	Tier 2	
Nasal Antihistamine		
azelastine nasal aerosol,spray 137 mcg (0.1 %)	Tier 2	MO
Antiemesis/Antivertigo		
Antiemetic, Cannabinoid-Type		
dronabinol oral capsule 10 mg, 2.5 mg, 5 mg	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antiemetic/Antivertigo Agents		
COMPRO RECTAL SUPPOSITORY 25 MG	Tier 2	
dimenhydrinate injection solution 50 mg/ml	Tier 2	
fosaprepitant intravenous recon soln 150 mg	Tier 2	
granisetron hcl oral tablet 1 mg	Tier 2	
ondansetron hcl (pf) injection solution 4 mg/2 ml	Tier 2	
ondansetron hcl oral solution 4 mg/5 ml	Tier 2	
ondansetron hcl oral tablet 4 mg, 8 mg	Tier 2	
ondansetron oral tablet,disintegrating 4 mg, 8 mg	Tier 2	
PHENADOZ RECTAL SUPPOSITORY 12.5 MG, 25 MG	Tier 2	
prochlorperazine edisylate injection solution 10 mg/2 ml (5 mg/ml)	Tier 2	
prochlorperazine maleate oral tablet 10 mg, 5 mg	Tier 2	
prochlorperazine rectal suppository 25 mg	Tier 2	
promethazine rectal suppository 12.5 mg, 25 mg	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
PROMETHEGAN RECTAL SUPPOSITORY 12.5 MG, 25 MG	Tier 2		<i>terbutaline</i> <i>subcutaneous solution 1 mg/ml</i>	Tier 2	
scopolamine base transdermal patch 3 day 1 mg over 3 days	Tier 2		Beta-Adrenergic Agents, Inhaled, Short Acting		
TRANSDERM-SCOP TRANSDERMAL PATCH 3 DAY 1 MG OVER 3 DAYS	Tier 3		<i>albuterol sulfate inhalation hfa aerosol inhaler 90 mcg/actuation</i>	Tier 2	MO
Asthma And Copd			<i>albuterol sulfate inhalation solution for nebulization 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</i>	Tier 2	MO
Anticholinergic, Orally Inhaled Short Acting			<i>levalbuterol hcl inhalation solution for nebulization 0.31 mg/3 ml, 0.63 mg/3 ml, 1.25 mg/0.5 ml, 1.25 mg/3 ml</i>	Tier 2	MO
<i>ipratropium bromide inhalation solution 0.02 %</i>	Tier 2	MO	<i>levalbuterol tartrate inhalation hfa aerosol inhaler 45 mcg/actuation</i>	Tier 2	MO
Anticholinergics, Orally Inhaled Long Acting			XOPENEX CONCENTRATE INHALATION SOLUTION FOR NEBULIZATION 1.25 MG/0.5 ML	Tier 3	MO
SPIRIVA RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	Tier 3	MO	XOPENEX HFA INHALATION HFA AEROSOL INHALER 45 MCG/ACTUATION	Tier 3	MO
Beta-Adrenergic Agents					
<i>albuterol sulfate oral syrup 2 mg/5 ml</i>	Tier 2	MO			
<i>albuterol sulfate oral tablet 2 mg, 4 mg</i>	Tier 2	MO			
<i>albuterol sulfate oral tablet extended release 12 hr 4 mg, 8 mg</i>	Tier 2	MO			
<i>terbutaline oral tablet 2.5 mg, 5 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
XOPENEX INHALATION SOLUTION FOR NEBULIZATION 0.31 MG/3 ML, 0.63 MG/3 ML, 1.25 MG/3 ML	Tier 3	MO	Beta-Adrenergic And Glucocorticoid Combinations		
Beta-Adrenergic Agents, Inhaled, Ultra-Long Acting			ADVAIR HFA INHALATION HFA AEROSOL INHALER 115-21 MCG/ACTUATION, 230-21 MCG/ACTUATION, 45-21 MCG/ACTUATION	Tier 3	PA; MO
STRIVERDI RESPIMAT INHALATION MIST 2.5 MCG/ACTUATION	Tier 3	MO	BREYNA INHALATION HFA AEROSOL INHALER 160-4.5 MCG/ACTUATION, 80-4.5 MCG/ACTUATION	Tier 2	MO
Beta-Adrenergic Agents, Orally Inhaled, Long Acting			fluticasone propion-salmeterol inhalation blister with device 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose	Tier 2	MO
arformoterol inhalation solution for nebulization 15 mcg/2 ml	Tier 5	DS	WIXELA INHUB INHALATION BLISTER WITH DEVICE 100-50 MCG/DOSE, 250-50 MCG/DOSE, 500-50 MCG/DOSE	Tier 2	MO
Beta-Adrenergic And Anticholinergic Combinations			Glucocorticoids, Orally Inhaled		
ipratropium-albuterol inhalation solution for nebulization 0.5 mg-3 mg(2.5 mg base)/3 ml	Tier 2	MO	ALVESCO INHALATION HFA AEROSOL INHALER 160 MCG/ACTUATION, 80 MCG/ACTUATION	Tier 3	MO
STIOLTO RESPIMAT INHALATION MIST 2.5-2.5 MCG/ACTUATION	Tier 3	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ASMANEX HFA INHALATION HFA AEROSOL INHALER 100 MCG/ACTUATION, 200 MCG/ACTUATION	Tier 3	PA; MO	Interleukin-5(II-5) Receptor Alpha Antagonist, Mab		
ASMANEX TWISTHALER INHALATION AEROSOL POWDR BREATH ACTIVATED 110 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (120), 220 MCG/ ACTUATION (30), 220 MCG/ ACTUATION (60)	Tier 3	PA; MO	FASENRA PEN SUBCUTANEOUS AUTO-INJECTOR 30 MG/ML	Tier 5	PA; DS
budesonide inhalation suspension for nebulization 0.25 mg/2 ml, 0.5 mg/2 ml	Tier 2	MO	Leukotriene Receptor Antagonists		
fluticasone propionate inhalation hfa aerosol inhaler 44 mcg/actuation	Tier 2	MO; Age	montelukast oral tablet 10 mg	Tier 2	MO
Interleukin-4(II-4) Receptor Alpha Antagonist, Mab			montelukast oral tablet, chewable 4 mg, 5 mg	Tier 2	MO
DUPIXENT PEN SUBCUTANEOUS PEN INJECTOR 200 MG/1.14 ML, 300 MG/2 ML	Tier 5	PA; DS	Mast Cell Stabilizers, Orally Inhaled		
DUPIXENT SYRINGE SUBCUTANEOUS SYRINGE 200 MG/1.14 ML, 300 MG/2 ML	Tier 5	PA; DS	cromolyn inhalation solution for nebulization 20 mg/2 ml	Tier 2	MO
			Xanthines		
			ELIXOPHYLLIN ORAL ELIXIR 80 MG/15 ML	Tier 2	MO
			THEO-24 ORAL CAPSULE, EXTENDED RELEASE 24HR 300 MG	Tier 3	MO
			theophylline oral elixir 80 mg/15 ml	Tier 2	MO
			theophylline oral tablet extended release 12 hr 100 mg, 200 mg, 300 mg, 450 mg	Tier 2	MO
			theophylline oral tablet extended release 24 hr 400 mg	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Autonomic Nervous System Disorders					
Alzheimer's Therapy, Nmda Receptor Antagonists					
<i>memantine oral tablet 10 mg, 5 mg</i>	Tier 2	MO	Alpha-2 Receptor Antagonist Antidepressants		
<i>memantine oral tablets, dose pack 5-10 mg</i>	Tier 2		<i>mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg</i>	Tier 2	MO
Cholinesterase Inhibitors					
<i>donepezil oral tablet 10 mg, 5 mg</i>	Tier 2	MO	Maois - Non-Selective & Irreversible		
<i>galantamine oral capsule, ext rel. pellets 24 hr 16 mg, 24 mg, 8 mg</i>	Tier 2	MO	<i>phenelzine oral tablet 15 mg</i>	Tier 2	MO
<i>galantamine oral tablet 12 mg, 4 mg, 8 mg</i>	Tier 2	MO	<i>tranylcypromine oral tablet 10 mg</i>	Tier 2	MO
MESTINON ORAL SYRUP 60 MG/5 ML	Tier 3	MO	Norepinephrine And Dopamine Reuptake Inhib (Ndris)		
<i>physostigmine salicylate injection solution 1 mg/ml</i>	Tier 2		<i>bupropion hcl oral tablet 100 mg, 75 mg</i>	Tier 2	MO
<i>pyridostigmine bromide oral syrup 60 mg/5 ml</i>	Tier 2	MO	<i>bupropion hcl oral tablet extended release 24 hr 150 mg, 300 mg</i>	Tier 2	MO
<i>pyridostigmine bromide oral tablet 60 mg</i>	Tier 2	MO	Selective Serotonin Reuptake Inhibitor (Ssris)		
<i>pyridostigmine bromide oral tablet extended release 180 mg</i>	Tier 2	MO	<i>citalopram oral solution 10 mg/5 ml</i>	Tier 2	MO
			<i>citalopram oral tablet 10 mg, 20 mg, 40 mg</i>	Tier 2	MO
			<i>escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg</i>	Tier 2	MO
			<i>fluoxetine oral capsule 10 mg, 20 mg, 40 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
fluoxetine oral solution 20 mg/5 ml (4 mg/ml)	Tier 2	MO	Ssri & 5Ht1a Partial Agonist Antidepressant		
fluvoxamine oral tablet 100 mg, 25 mg, 50 mg	Tier 2	MO	vilazodone oral tablet 10 mg, 20 mg, 40 mg	Tier 2	MO
paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg	Tier 2	MO	Tricyclic Antidepressants & Rel. Non-Sel. Ru-Inhib		
sertraline oral tablet 100 mg, 25 mg, 50 mg	Tier 2	MO	amitriptyline oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 2	MO
Serotonin-2 Antagonist/Reuptake Inhibitors (Saris)			clomipramine oral capsule 25 mg, 50 mg, 75 mg	Tier 2	MO
nefazodone oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg	Tier 2	MO	desipramine oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 2	MO
trazodone oral tablet 100 mg, 150 mg, 50 mg	Tier 2	MO	doxepin oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg	Tier 2	MO
Serotonin-Norepinephrine Reuptake-Inhib (Snris)			doxepin oral concentrate 10 mg/ml	Tier 2	MO
duloxetine oral capsule, delayed release(dr/lec) 20 mg, 30 mg, 60 mg	Tier 2	MO	imipramine hcl oral tablet 10 mg, 25 mg, 50 mg	Tier 2	MO
venlafaxine oral capsule, extended release 24hr 150 mg, 37.5 mg, 75 mg	Tier 2	MO	nortriptyline oral capsule 10 mg, 25 mg, 50 mg, 75 mg	Tier 2	MO
venlafaxine oral tablet 100 mg, 50 mg, 75 mg	Tier 2	MO	nortriptyline oral solution 10 mg/5 ml	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	
Behavioral Health - Other						
Adrenergics, Aromatic, Non-Catecholamine						
<i>dextroamphetamine sulfate oral capsule, extended release 10 mg, 15 mg, 5 mg</i>	Tier 2	DS	<i>diazepam injection syringe 5 mg/ml</i>	Tier 2	DS	
<i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i>	Tier 2	DS	<i>diazepam oral tablet 10 mg, 2 mg, 5 mg</i>	Tier 2	DS	
<i>dextroamphetamine-amphetamine oral capsule, extended release 24hr 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg</i>	Tier 2	DS	LORAZEPAM INTENSOL ORAL CONCENTRATE 2 MG/ML	Tier 2	DS	
<i>dextroamphetamine-amphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 30 mg, 5 mg, 7.5 mg</i>	Tier 2	DS	<i>lorazepam oral concentrate 2 mg/ml</i>	Tier 2	DS	
Anti-Alcoholic Preparations				<i>lorazepam oral tablet 0.5 mg, 1 mg, 2 mg</i>	Tier 2	DS
<i>acamprosate oral tablet, delayed release (dr/lec) 333 mg</i>	Tier 2	MO	<i>oxazepam oral capsule 10 mg, 15 mg, 30 mg</i>	Tier 2	DS	
<i>disulfiram oral tablet 250 mg, 500 mg</i>	Tier 2	MO	Anti-Anxiety Drugs			
Anti-Anxiety - Benzodiazepines				<i>buspirone oral tablet 10 mg, 15 mg, 5 mg, 7.5 mg</i>	Tier 2	MO
<i>alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg</i>	Tier 2	DS	Anti-Mania Drugs			
<i>chlordiazepoxide hcl oral capsule 10 mg, 25 mg, 5 mg</i>	Tier 2	DS	<i>lithium carbonate oral capsule 150 mg, 300 mg</i>	Tier 2	MO	
<i>diazepam injection solution 5 mg/ml</i>	Tier 2	DS	<i>lithium carbonate oral tablet 300 mg</i>	Tier 2	MO	
Antipsych,Dopamine Antag.,Diphenylbutyliperidines				<i>lithium carbonate oral tablet extended release 300 mg, 450 mg</i>	Tier 2	MO
				<i>lithium citrate oral solution 8 meq/5 ml</i>	Tier 2	MO
				Antipsych,Dopamine Antag.,Diphenylbutyliperidines		
			<i>pimozide oral tablet 2 mg</i>	Tier 2	MO	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antipsychotics, Atyp, D2 Partial Agonist/5Ht Mixed			<i>ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg</i>	Tier 2	MO
<i>ariPIPRAZOLE oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg</i>	Tier 2	MO	Antipsychotics,Dop amine Antagonists, Thioxanthenes		
Antipsychotics, Dopamine & Serotonin Antagonists			<i>thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	Tier 2	MO
<i>loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg</i>	Tier 2	MO	Antipsychotics,Dop amine Antagonists,Butyrop henones		
Antipsychotics,Atyp ical,Dopamine,& Serotonin Antag			<i>droperidol injection solution 2.5 mg/ml</i>	Tier 2	
<i>clozapine oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 2	DS	<i>haloperidol decanoate intramuscular solution 100 mg/ml</i>	Tier 2	MO
<i>lurasidone oral tablet 120 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	Tier 2	MO	<i>haloperidol lactate injection solution 5 mg/ml</i>	Tier 2	
<i>olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg</i>	Tier 2	MO	<i>haloperidol lactate oral concentrate 2 mg/ml</i>	Tier 2	MO
<i>quetiapine oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</i>	Tier 2	MO	<i>haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg</i>	Tier 2	MO
<i>quetiapine oral tablet extended release 24 hr 150 mg, 200 mg, 300 mg, 400 mg, 50 mg</i>	Tier 2	MO	Anti-Psychotics,Phenothiazines		
<i>risperidone oral solution 1 mg/ml</i>	Tier 2	MO	<i>chlorpromazine injection solution 25 mg/ml</i>	Tier 2	
<i>risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg</i>	Tier 2	MO	<i>chlorpromazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	Tier 2	MO
			<i>fluphenazine decanoate injection solution 25 mg/ml</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
fluphenazine hcl oral concentrate 5 mg/ml	Tier 2	MO	Narcotic Antagonists		
fluphenazine hcl oral elixir 2.5 mg/5 ml	Tier 2	MO	naloxone injection solution 0.4 mg/ml	Tier 2	
fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg	Tier 2	MO	naloxone injection syringe 1 mg/ml	Tier 2	
perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg	Tier 2	MO	naloxone nasal spray,non-aerosol 4 mg/actuation	Tier 2	
thioridazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg	Tier 2	MO	naltrexone oral tablet 50 mg	Tier 2	MO
trifluoperazine oral tablet 1 mg, 10 mg, 2 mg, 5 mg	Tier 2	MO	Sedative-Hypnotics - Benzodiazepines		
Barbiturates			temazepam oral capsule 15 mg, 30 mg	Tier 2	DS
phenobarbital oral elixir 20 mg/5 ml (4 mg/ml)	Tier 2	MO	triazolam oral tablet 0.125 mg, 0.25 mg	Tier 2	DS
phenobarbital oral tablet 100 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg	Tier 2	MO	Sedative-Hypnotics,Non-Barbiturate		
SECONAL SODIUM ORAL CAPSULE 100 MG	Tier 3		zolpidem oral tablet 10 mg, 5 mg	Tier 2	DS
Narcolepsy And Sleep Disorder Therapy Agents			Tx For Adhd - Selective Alpha-2A Receptor Agonist		
armodafinil oral tablet 150 mg, 200 mg, 250 mg, 50 mg	Tier 2	DS	guanfacine oral tablet extended release 24 hr 1 mg, 2 mg, 3 mg, 4 mg	Tier 2	MO
modafinil oral tablet 100 mg, 200 mg	Tier 2	DS	Tx For Attention Deficit-Hyperact(Adhd)/Narcolepsy		
			dexmethylphenidate oral capsule,er biphasic 50-50 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg	Tier 2	DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
dexmethylphenidate oral tablet 10 mg, 2.5 mg, 5 mg	Tier 2	DS	amiodarone oral tablet 200 mg	Tier 2	MO
METADATE ER ORAL TABLET EXTENDED RELEASE 20 MG	Tier 2	DS	disopyramide phosphate oral capsule 100 mg, 150 mg	Tier 2	MO
methylphenidate hcl oral capsule, er biphasic 30-70 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg	Tier 2	DS	dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg	Tier 2	MO
methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg	Tier 2	DS	flecainide oral tablet 100 mg, 150 mg, 50 mg	Tier 2	MO
methylphenidate hcl oral tablet extended release 10 mg, 20 mg	Tier 2	DS	lidocaine (pf) intravenous syringe 100 mg/5 ml (2 %), 50 mg/5 ml (1 %)	Tier 2	
methylphenidate hcl oral tablet extended release 24hr 18 mg, 27 mg, 36 mg, 54 mg	Tier 2	DS	mexiletine oral capsule 150 mg, 200 mg, 250 mg	Tier 2	MO
Tx For Attention Deficit-Hyperact.(Adhd), Nri-Type			NORPACE CR ORAL CAPSULE, EXTENDED RELEASE 100 MG, 150 MG	Tier 3	MO
atomoxetine oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg	Tier 2	MO	PACERONE ORAL TABLET 200 MG	Tier 2	MO
Cardiovascular Disease - Arrhythmia			procainamide injection solution 100 mg/ml	Tier 2	
Antiarrhythmics			propafenone oral tablet 150 mg, 225 mg, 300 mg	Tier 2	MO
adenosine intravenous syringe 3 mg/ml	Tier 2		quinidine gluconate oral tablet extended release 324 mg	Tier 2	MO
amiodarone intravenous solution 50 mg/ml	Tier 2		quinidine sulfate oral tablet 200 mg, 300 mg	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Cardiovascular Disease - Cardiac Stimulant				Cardiovascular Disease - Hypertension	
Adrenergic Agents,Catecholamines				Ace Inhibitor/Thiazide & Thiazide-Like Diuretic	
ADRENALIN INJECTION SOLUTION 1 MG/ML, 1 MG/ML (1 ML)	Tier 3		<i>lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg</i>	Tier 2	MO
<i>epinephrine injection solution 1 mg/ml, 1 mg/ml (1 ml)</i>	Tier 2		Alpha/Beta-Adrenergic Blocking Agents		
<i>epinephrine injection syringe 0.1 mg/ml</i>	Tier 2		<i>carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg</i>	Tier 2	MO
Digitalis Glycosides			<i>labetalol oral tablet 100 mg, 200 mg, 300 mg</i>	Tier 2	MO
DIGITEK ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	Tier 2	MO	Alpha-Adrenergic Blocking Agents		
DIGOX ORAL TABLET 125 MCG (0.125 MG), 250 MCG (0.25 MG)	Tier 2	MO	<i>doxazosin oral tablet 1 mg, 2 mg, 4 mg, 8 mg</i>	Tier 2	MO
<i>digoxin injection solution 250 mcg/ml (0.25 mg/ml)</i>	Tier 2		<i>phenoxybenzamine oral capsule 10 mg</i>	Tier 2	
<i>digoxin oral solution 50 mcg/ml (0.05 mg/ml)</i>	Tier 3	MO	<i>phentolamine injection recon soln 5 mg</i>	Tier 2	RB; QL
<i>digoxin oral tablet 125 mcg (0.125 mg), 250 mcg (0.25 mg)</i>	Tier 2	MO	<i>prazosin oral capsule 1 mg, 2 mg, 5 mg</i>	Tier 2	MO
			<i>terazosin oral capsule 1 mg, 10 mg, 2 mg, 5 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Angiotensin Receptor Antag./Thiazide Diuretic Comb			<i>methyldopa oral tablet 250 mg, 500 mg</i>	Tier 2	MO
<i>losartan-hydrochlorothiazide oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg</i>	Tier 2	MO	Antihypertensives, Vasodilators		
			<i>hydralazine oral tablet 10 mg, 100 mg, 25 mg, 50 mg</i>	Tier 2	MO
			<i>minoxidil oral tablet 10 mg, 2.5 mg</i>	Tier 2	MO
Antihypertensives, Ace Inhibitors			Beta-Adrenergic Blocking Agents		
<i>benazepril oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	Tier 2	MO	<i>acebutolol oral capsule 200 mg, 400 mg</i>	Tier 2	MO
<i>captopril oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg</i>	Tier 2	MO	<i>atenolol oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 2	MO
<i>lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	Tier 2	MO	<i>bisoprolol fumarate oral tablet 10 mg, 5 mg</i>	Tier 2	MO
Antihypertensives, Angiotensin Receptor Antagonist			<i>metoprolol succinate oral tablet extended release 24 hr 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 2	MO
<i>losartan oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 2	MO	<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 2	MO
Antihypertensives, Miscellaneous			<i>nadolol oral tablet 20 mg, 40 mg, 80 mg</i>	Tier 2	MO
<i>sodium nitroprusside intravenous solution 25 mg/ml</i>	Tier 2		<i>propranolol oral capsule,extended release 24 hr 120 mg, 160 mg, 60 mg, 80 mg</i>	Tier 2	MO
Antihypertensives, Sympatholytic			<i>propranolol oral solution 20 mg/5 ml (4 mg/ml), 40 mg/5 ml (8 mg/ml)</i>	Tier 2	MO
<i>clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg</i>	Tier 2	MO			
<i>guanfacine oral tablet 1 mg, 2 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>propranolol oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg</i>	Tier 2	MO	<i>diltiazem hcl oral capsule,ext.rel 24h degradable 120 mg, 180 mg, 240 mg</i>	Tier 2	MO
SORINE ORAL TABLET 120 MG, 160 MG, 240 MG, 80 MG	Tier 2	MO	<i>diltiazem hcl oral capsule,extended release 24hr 120 mg, 180 mg, 240 mg, 300 mg, 360 mg</i>	Tier 2	MO
SOTALOL AF ORAL TABLET 120 MG, 160 MG, 80 MG	Tier 2	MO	<i>diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg</i>	Tier 2	MO
<i>sotalol oral tablet 120 mg, 160 mg, 240 mg, 80 mg</i>	Tier 2	MO	DILT-XR ORAL CAPSULE,EXT.REL 24H DEGRADABLE 120 MG, 180 MG, 240 MG	Tier 2	MO
Beta-Adrenergic Blocking Agents/Thiazide & Related			<i>felodipine oral tablet extended release 24 hr 10 mg, 2.5 mg, 5 mg</i>	Tier 2	MO
<i>atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg</i>	Tier 2	MO	KATERZIA ORAL SUSPENSION 1 MG/ML	Tier 3	MO; Age
<i>bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg</i>	Tier 2	MO	<i>nifedipine oral capsule 10 mg, 20 mg</i>	Tier 2	MO
Calcium Channel Blocking Agents			<i>nifedipine oral tablet extended release 24hr 30 mg, 60 mg, 90 mg</i>	Tier 2	MO
<i>amlodipine oral tablet 10 mg, 2.5 mg, 5 mg</i>	Tier 2	MO	<i>nimodipine oral capsule 30 mg</i>	Tier 2	
CARTIA XT ORAL CAPSULE,EXTENDED RELEASE 24HR 120 MG, 180 MG, 240 MG, 300 MG	Tier 2	MO	<i>verapamil intravenous solution 2.5 mg/ml</i>	Tier 2	
<i>diltiazem hcl intravenous solution 5 mg/ml</i>	Tier 2		<i>verapamil oral tablet 120 mg, 40 mg, 80 mg</i>	Tier 2	MO
			<i>verapamil oral tablet extended release 120 mg, 180 mg, 240 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Loop Diuretics					
bumetanide oral tablet 0.5 mg, 1 mg, 2 mg	Tier 2	MO	spironolactone-hydrochlorothiazide oral tablet 25-25 mg	Tier 2	MO
ethacrynone sodium intravenous reconstitute soln 50 mg	Tier 5	DS	triamterene-hydrochlorothiazide oral capsule 37.5-25 mg	Tier 2	MO
furosemide injection solution 10 mg/ml	Tier 2		triamterene-hydrochlorothiazide oral tablet 37.5-25 mg, 75-50 mg	Tier 2	MO
furosemide injection syringe 10 mg/ml	Tier 2		Pulm.Anti-Htn,Sel.C-Gmp Phosphodiesterase T5 Inhib		
furosemide oral solution 10 mg/ml	Tier 2	MO	ADCIRCA ORAL TABLET 20 MG	Tier 5	DS
furosemide oral tablet 20 mg, 40 mg, 80 mg	Tier 2	MO	ALYQ ORAL TABLET 20 MG	Tier 2	MO
torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg	Tier 2	MO	sildenafil (pulm.hypertension) oral suspension for reconstitution 10 mg/ml	Tier 2	DS; PR
Potassium Sparing Diuretics					
amiloride oral tablet 5 mg	Tier 2	MO	sildenafil (pulm.hypertension) oral tablet 20 mg	Tier 2	RB; MO; PR; QL
DYRENIUM ORAL CAPSULE 100 MG, 50 MG	Tier 3	MO	tadalafil (pulm. hypertension) oral tablet 20 mg	Tier 2	MO; QL
spironolactone oral suspension 25 mg/5 ml	Tier 2	MO; Age	Pulmonary Anti-Htn, Endothelin Receptor Antagonist		
spironolactone oral tablet 100 mg, 25 mg, 50 mg	Tier 2	MO	ambrisentan oral tablet 10 mg, 5 mg	Tier 2	MO
triamterene oral capsule 100 mg, 50 mg	Tier 2	MO	bosentan oral tablet 125 mg, 62.5 mg	Tier 2	MO
Potassium Sparing Diuretics In Combination					
amiloride-hydrochlorothiazide oral tablet 5-50 mg	Tier 2	MO	OPSUMIT ORAL TABLET 10 MG	Tier 5	PA; DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Thiazide And Related Diuretics					
<i>chlorthalidone oral tablet 25 mg, 50 mg</i>	Tier 2	MO	<i>lovastatin oral tablet 10 mg, 20 mg, 40 mg</i>	Tier 2	MO; \$0 COPAY IF AGE 40-75 YEARS AND NO HISTORY OF CARDIOVASCULAR DISEASE PREVENTION MEDICATIONS IN 120 DAYS
<i>hydrochlorothiazide oral capsule 12.5 mg</i>	Tier 2	MO			
<i>hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg</i>	Tier 2	MO			
<i>metolazone oral tablet 10 mg, 2.5 mg, 5 mg</i>	Tier 2	MO			
Vasodilators, Combination					
<i>isosorbide-hydralazine oral tablet 20-37.5 mg</i>	Tier 2	MO	<i>pravastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	Tier 2	MO; \$0 COPAY IF AGE 40-75 YEARS AND NO HISTORY OF CARDIOVASCULAR DISEASE PREVENTION MEDICATIONS IN 120 DAYS
Cardiovascular Disease - Lipid Irregularity					
Antihyperlipidemic - Hmg Coa Reductase Inhibitors					
<i>atorvastatin oral tablet 10 mg, 20 mg, 40 mg, 80 mg</i>	Tier 2	MO; \$0 COPAY IF AGE 40-75 YEARS AND NO HISTORY OF CARDIOVASCULAR DISEASE PREVENTION MEDICATIONS IN 120 DAYS	<i>rosuvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg</i>	Tier 2	MO; \$0 COPAY IF AGE 40-75 YEARS AND NO HISTORY OF CARDIOVASCULAR DISEASE PREVENTION MEDICATIONS IN 120 DAYS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg, 80 mg</i>	Tier 2	MO; \$0 COPAY IF AGE 40-75 YEARS AND NO HISTORY OF CARDIOVASCULAR DISEASE PREVENTION MEDICATIONS IN 120 DAYS	<i>colestipol oral tablet 1 gram</i>	Tier 2	MO
			<i>PREVALITE ORAL POWDER 4 GRAM</i>	Tier 2	MO
			<i>PREVALITE ORAL POWDER IN PACKET 4 GRAM</i>	Tier 2	MO
			<i>QUESTRAN ORAL POWDER 4 GRAM</i>	Tier 3	MO
Lipotropics					
<i>ezetimibe oral tablet 10 mg</i>			<i>ezetimibe oral tablet 10 mg</i>	Tier 2	MO
<i>fenofibrate oral tablet 160 mg, 54 mg</i>			<i>fenofibrate oral tablet 160 mg, 54 mg</i>	Tier 2	MO
			<i>gemfibrozil oral tablet 600 mg</i>	Tier 2	MO
Cardiovascular Disease - Miscellaneous Agents					
Adrenergic Vasopressor Agents					
			<i>droxidopa oral capsule 100 mg, 200 mg, 300 mg</i>	Tier 5	DS
			<i>midodrine oral tablet 10 mg, 2.5 mg, 5 mg</i>	Tier 2	MO
Angiotensin Receptor-Neprilysin Inhibitor Comb(Arni)					
			<i>ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG</i>	Tier 3	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Cardiovascular Disease - Vasodilation					
Vasodilators,Coronary					
ISORDIL ORAL TABLET 40 MG	Tier 3	MO	<i>nitroglycerin translingual spray,non-aerosol 400 mcg/spray</i>	Tier 2	MO
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 40 mg, 5 mg</i>	Tier 2	MO	Vasodilators,Peripheral		
<i>isosorbide mononitrate oral tablet extended release 24 hr 120 mg, 30 mg, 60 mg</i>	Tier 2	MO	<i>ergoloid oral tablet 1 mg</i>	Tier 2	MO
MINITRAN TRANSDERMAL PATCH 24 HOUR 0.1 MG/HR, 0.2 MG/HR, 0.4 MG/HR, 0.6 MG/HR	Tier 2	MO	Contraception/Oxytocics		
NITRO-BID TRANSDERMAL OINTMENT 2 %	Tier 3	MO	ELURYNG VAGINAL RING 0.12-0.015 MG/24 HR	Tier 1	MO; QL
NITRO-DUR TRANSDERMAL PATCH 24 HOUR 0.3 MG/HR, 0.8 MG/HR	Tier 3	MO	ENILLORING VAGINAL RING 0.12-0.015 MG/24 HR	Tier 1	MO; QL
<i>nitroglycerin sublingual tablet 0.3 mg, 0.4 mg, 0.6 mg</i>	Tier 2	MO	<i>etongestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24 hr</i>	Tier 1	MO; QL
<i>nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr</i>	Tier 2	MO	HALOETTE VAGINAL RING 0.12-0.015 MG/24 HR	Tier 1	MO; QL
Contraceptives,Injectable					
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML			DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SYRINGE 104 MG/0.65 ML	Tier 6	MO
Contraceptives,Oral					
AFIRMELLE ORAL TABLET 0.1-20 MG-MCG			AFIRMELLE ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO
ALTAVERA (28) ORAL TABLET 0.15-0.03 MG			ALTAVERA (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ALYACEN 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO	BALZIVA (28) ORAL TABLET 0.4-35 MG-MCG	Tier 1	MO
ALYACEN 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	Tier 1	MO	BLISOVI FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO
APRI ORAL TABLET 0.15-0.03 MG	Tier 1	MO	BLISOVI FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO
ARANELLE (28) ORAL TABLET 0.5/1/0.5-35 MG-MCG	Tier 1	MO	BRIELLYN ORAL TABLET 0.4-35 MG-MCG	Tier 1	MO
AUBRA EQ ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	CAMILA ORAL TABLET 0.35 MG	Tier 1	MO
AUBRA ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	CHATEAL (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO
AUROVELA 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	Tier 1	MO	CHATEAL EQ (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO
AUROVELA 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1	MO	CYCLAFEM 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO
AUROVELA FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO	CYCLAFEM 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	Tier 1	MO
AUROVELA FE 1-20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO	CYRED EQ ORAL TABLET 0.15-0.03 MG	Tier 1	MO
AVIANE ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	CYRED ORAL TABLET 0.15-0.03 MG	Tier 1	MO
AYUNA ORAL TABLET 0.15-0.03 MG	Tier 1	MO	DASSETTA 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
DASETTA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG	Tier 1	MO	GIANVI (28) ORAL TABLET 3-0.02 MG	Tier 1	MO
DEBLITANE ORAL TABLET 0.35 MG	Tier 1	MO	HAILEY FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.03 mg</i>	Tier 1	MO	HAILEY FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO
<i>drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg</i>	Tier 1	MO	HAILEY ORAL TABLET 1.5-30 MG-MCG	Tier 1	MO
ELLA ORAL TABLET 30 MG	Tier 1		HEATHER ORAL TABLET 0.35 MG	Tier 1	MO
EMOQUETTE ORAL TABLET 0.15-0.03 MG	Tier 1	MO	INCASSIA ORAL TABLET 0.35 MG	Tier 1	MO
ENPRESSE ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	Tier 1	MO	ISIBLOOM ORAL TABLET 0.15-0.03 MG	Tier 1	MO
ENSKYCE ORAL TABLET 0.15-0.03 MG	Tier 1	MO	JASMIEL (28) ORAL TABLET 3-0.02 MG	Tier 1	MO
ERRIN ORAL TABLET 0.35 MG	Tier 1	MO	JENCYCLA ORAL TABLET 0.35 MG	Tier 1	MO
ESTARYLLA ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	JOLIVETTE ORAL TABLET 0.35 MG	Tier 1	MO
<i>ethynodiol diac-eth estradiol oral tablet 1-35 mg-mcg, 1-50 mg-mcg</i>	Tier 1	MO	JULEBER ORAL TABLET 0.15-0.03 MG	Tier 1	MO
FALMINA (28) ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	JUNEL 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	Tier 1	MO
FEMYNOR ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	JUNEL 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1	MO
			JUNEL FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
JUNEL FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO	LEVONEST (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	Tier 1	MO
KALLIGA ORAL TABLET 0.15-0.03 MG	Tier 1	MO	<i>levonorgestrel-ethinylestradiol oral tablet 0.1-20 mg-mcg, 0.15-0.03 mg</i>	Tier 1	MO
KELNOR 1/35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO	<i>levonorgestrel estradiol triphasic oral tablet 50-30 (6)/75-40 (5)/125-30(10)</i>	Tier 1	MO
KELNOR 1-50 (28) ORAL TABLET 1-50 MG-MCG	Tier 1	MO	LEVORA-28 ORAL TABLET 0.15-0.03 MG	Tier 1	MO
KURVELO (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO	LILLOW (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO
LARIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	Tier 1	MO	LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1	MO
LARIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1	MO	LORYNA (28) ORAL TABLET 3-0.02 MG	Tier 1	MO
LARIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO	LO-ZUMANDIMINE (28) ORAL TABLET 3-0.02 MG	Tier 1	MO
LARIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO	LUTERA (28) ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO
LARISSIA ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	LYLEQ ORAL TABLET 0.35 MG	Tier 1	MO
LEENA 28 ORAL TABLET 0.5/1/0.5-35 MG-MCG	Tier 1	MO	LYZA ORAL TABLET 0.35 MG	Tier 1	MO
LESSINA ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	MARLISSA (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO
			MICROGESTIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG	Tier 1	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
MICROGESTIN 1/20 (21) ORAL TABLET 1-20 MG-MCG	Tier 1	MO	<i>norethindrone-e.estradol-iron oral tablet 1 mg-20 mcg (21)/75 mg (7), 1.5 mg-30 mcg (21)/75 mg (7)</i>	Tier 1	MO
MICROGESTIN FE 1.5/30 (28) ORAL TABLET 1.5 MG-30 MCG (21)/75 MG (7)	Tier 1	MO	<i>norgestimate-ethynodiol dihydrogen phosphate oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg (28), 0.25-35 mg-mcg</i>	Tier 1	MO
MICROGESTIN FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO	<i>NORLYDA ORAL TABLET 0.35 MG</i>	Tier 1	MO
MILI ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	<i>NORTREL 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG</i>	Tier 1	MO
MONO-LINYAH ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	<i>NORTREL 1/35 (21) ORAL TABLET 1-35 MG-MCG (21)</i>	Tier 1	MO
MONONESSA (28) ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	<i>NORTREL 1/35 (28) ORAL TABLET 1-35 MG-MCG</i>	Tier 1	MO
MYZILRA ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	Tier 1	MO	<i>NORTREL 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG</i>	Tier 1	MO
NECON 0.5/35 (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1	MO	<i>NYLIA 1/35 (28) ORAL TABLET 1-35 MG-MCG</i>	Tier 1	MO
NIKKI (28) ORAL TABLET 3-0.02 MG	Tier 1	MO	<i>NYLIA 7/7/7 (28) ORAL TABLET 0.5/0.75/1 MG- 35 MCG</i>	Tier 1	MO
NORA-BE ORAL TABLET 0.35 MG	Tier 1	MO	<i>NYMYO ORAL TABLET 0.25-35 MG-MCG</i>	Tier 1	MO
<i>norethindrone (contraceptive) oral tablet 0.35 mg</i>	Tier 1	MO	<i>OCELLA ORAL TABLET 3-0.03 MG</i>	Tier 1	MO
<i>norethindrone ac-eth estradiol oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	Tier 1	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ORSYTHIA ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	TRI FEMYNOR ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
PHILITH ORAL TABLET 0.4-35 MG-MCG	Tier 1	MO	TRI-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
PIRMELLA ORAL TABLET 0.5/0.75/1 MG- 35 MCG, 1-35 MG-MCG	Tier 1	MO	TRI-LINYAH ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
PORTIA 28 ORAL TABLET 0.15-0.03 MG	Tier 1	MO	TRI-LO-ESTARYLLA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1	MO
PREVIFEM ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	TRI-LO-MARZIA ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1	MO
RECLIPSEN (28) ORAL TABLET 0.15-0.03 MG	Tier 1	MO	TRI-LO-MILI ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1	MO
SHAROBEL ORAL TABLET 0.35 MG	Tier 1	MO	TRI-LO-SPRINTEC ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1	MO
SPRINTEC (28) ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	TRI-MILI ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
SRONYX ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	TRI-NYMYO ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
SYEDA ORAL TABLET 3-0.03 MG	Tier 1	MO	TRI-PREVIFEM (28) ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO
TARINA FE 1/20 (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO			
TARINA FE 1-20 EQ (28) ORAL TABLET 1 MG-20 MCG (21)/75 MG (7)	Tier 1	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TRI-SPRINTEC (28) ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO	ZUMANDIMINE (28) ORAL TABLET 3-0.03 MG	Tier 1	MO
TRIVORA (28) ORAL TABLET 50-30 (6)/75-40 (5)/125-30(10)	Tier 1	MO	Oxytocics		
TRI-VYLIBRA LO ORAL TABLET 0.18/0.215/0.25 MG-25 MCG	Tier 1	MO	<i>carboprost tromethamine intramuscular solution 250 mcg/ml</i>	Tier 5	DS
TRI-VYLIBRA ORAL TABLET 0.18/0.215/0.25 MG-35 MCG (28)	Tier 1	MO	HEMABATE INTRAMUSCULAR SOLUTION 250 MCG/ML	Tier 5	DS
TULANA ORAL TABLET 0.35 MG	Tier 1	MO	<i>methylergonovine injection solution 0.2 mg/ml (1 ml)</i>	Tier 2	
VESTURA (28) ORAL TABLET 3-0.02 MG	Tier 1	MO	<i>methylergonovine oral tablet 0.2 mg</i>	Tier 2	
VIENVA ORAL TABLET 0.1-20 MG-MCG	Tier 1	MO	<i>oxytocin injection solution 10 unit/ml</i>	Tier 3	
VYFEMLA (28) ORAL TABLET 0.4-35 MG-MCG	Tier 1	MO	PITOCIN INJECTION SOLUTION 10 UNIT/ML	Tier 3	
VYLIBRA ORAL TABLET 0.25-35 MG-MCG	Tier 1	MO	Cough And Cold		
WERA (28) ORAL TABLET 0.5-35 MG-MCG	Tier 1	MO	Antitussives,Non-Narcotic		
ZARAH ORAL TABLET 3-0.03 MG	Tier 1	MO	<i>benzonatate oral capsule 100 mg, 200 mg</i>	Tier 2	
ZOVIA 1/35E (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO	Narcotic Antitussive-1St Generation Antihistamine		
ZOVIA 1-35 (28) ORAL TABLET 1-35 MG-MCG	Tier 1	MO	<i>hydrocodone-chlorpheniramine oral suspension,extended rel 12 hr 10-8 mg/5 ml</i>	Tier 2	DS; QL; Age

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use		
Narcotic Antitussive-Anticholinergic Comb.					Nose Preparations, Vasoconstrictors (Rx)		
					ADRENALIN NASAL SOLUTION 1 MG/ML		
hydrocodone-homatropine oral syrup 5-1.5 mg/5 ml	Tier 2	DS; QL; Age		Tier 3			
HYDROMET ORAL SYRUP 5-1.5 MG/5 ML	Tier 2	DS; QL; Age	epinephrine hcl nasal solution 1 mg/ml	Tier 2			
Narcotic Antitussive-Expectorant Combination					Dermatology - Acne		
CHERATUSSIN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	Acne Agents, Systemic				
codeine-guaifenesin oral liquid 10-100 mg/5 ml	Tier 2	DS; QL; Age	ACCUTANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 2			
G TUSSIN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	AMNESTEEM ORAL CAPSULE 10 MG, 20 MG, 40 MG	Tier 2			
GUAIATUSSIN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	CLARAVIS ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 2			
GUAIFENESIN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg	Tier 2			
MAXI-TUSS AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	MYORISAN ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 2			
ROBAFEN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	ZENATANE ORAL CAPSULE 10 MG, 20 MG, 30 MG, 40 MG	Tier 2			
VIRTUSSIN AC ORAL LIQUID 10-100 MG/5 ML	Tier 2	DS; QL; Age	Acne Agents, Topical				
			clindamycin-benzoyl peroxide topical gel 1-5 %	Tier 2	MO		
			sulfacetamide sodium (acne) topical suspension 10 %	Tier 2	MO		
Rosacea Agents, Topical							
			metronidazole topical cream 0.75 %	Tier 2			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>metronidazole topical gel 0.75 %</i>	Tier 2		<i>clindamycin phosphate topical solution 1 %</i>	Tier 2	MO
ROSADAN TOPICAL CREAM 0.75 %	Tier 2		<i>erythromycin with ethanol topical gel 2 %</i>	Tier 2	MO
Topical Preparations, Antibacterials					
DERMAZENE TOPICAL CREAM 1-1 %	Tier 2		<i>erythromycin with ethanol topical solution 2 %</i>	Tier 2	MO
<i>hydrocortisone-iodoquinol topical cream 1-1 %</i>	Tier 2		<i>gentamicin topical cream 0.1 %</i>	Tier 2	
Vitamin A Derivatives					
<i>adapalene topical gel 0.3 %</i>	Tier 2	MO	<i>gentamicin topical ointment 0.1 %</i>	Tier 2	
AVITA TOPICAL CREAM 0.025 %	Tier 2	MO; Age	<i>mupirocin calcium topical cream 2 %</i>	Tier 2	
AVITA TOPICAL GEL 0.025 %	Tier 2	MO; Age	<i>mupirocin topical ointment 2 %</i>	Tier 2	
RETIN-A TOPICAL CREAM 0.025 %, 0.05 %, 0.1 %	Tier 3	MO; Age	Topical Antifungal/Antiinflammatory, Steroid Agent		
RETIN-A TOPICAL GEL 0.01 %, 0.025 %	Tier 3	MO; Age	<i>clotrimazole-betamethasone topical cream 1-0.05 %</i>	Tier 2	
<i>tretinoiin topical cream 0.025 %, 0.05 %, 0.1 %</i>	Tier 2	MO; Age	Topical Antifungals		
<i>tretinoiin topical gel 0.01 %, 0.025 %</i>	Tier 2	MO; Age	<i>ciclopirox topical cream 0.77 %</i>	Tier 2	
Dermatology - Antiinfective			<i>ketonconazole topical cream 2 %</i>	Tier 2	
Topical Antibiotics			<i>ketonconazole topical shampoo 2 %</i>	Tier 2	
<i>clindamycin phosphate topical lotion 1 %</i>	Tier 2	MO	CLAYESTA TOPICAL POWDER 100,000 UNIT/GRAM	Tier 2	
			NYAMYC TOPICAL POWDER 100,000 UNIT/GRAM	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>nystatin topical cream 100,000 unit/gram</i>	Tier 2		Topical Anti-Inflammatory Steroidal		
<i>nystatin topical ointment 100,000 unit/gram</i>	Tier 2		<i>alclometasone topical ointment 0.05 %</i>	Tier 2	MO
<i>nystatin topical powder 100,000 unit/gram</i>	Tier 2		<i>betamethasone dipropionate topical lotion 0.05 %</i>	Tier 2	MO
<i>nystatin-triamcinolone topical cream 100,000-0.1 unit/g-%</i>	Tier 2		<i>betamethasone dipropionate topical ointment 0.05 %</i>	Tier 2	MO
<i>nystatin-triamcinolone topical ointment 100,000-0.1 unit/gram-%</i>	Tier 2		<i>betamethasone valerate topical cream 0.1 %</i>	Tier 2	MO
NYSTOP TOPICAL POWDER 100,000 UNIT/GRAM	Tier 2		<i>betamethasone valerate topical lotion 0.1 %</i>	Tier 2	MO
Topical Antiparasitics			<i>betamethasone valerate topical ointment 0.1 %</i>	Tier 2	MO
<i>permethrin topical cream 5 %</i>	Tier 2		<i>betamethasone, augmented topical cream 0.05 %</i>	Tier 2	MO
Topical Sulfonamides			<i>betamethasone, augmented topical gel 0.05 %</i>	Tier 2	MO
<i>silver sulfadiazine topical cream 1 %</i>	Tier 2		<i>betamethasone, augmented topical lotion 0.05 %</i>	Tier 2	MO
SSD TOPICAL CREAM 1 %	Tier 2		<i>betamethasone, augmented topical ointment 0.05 %</i>	Tier 2	MO
Dermatology - Antiinflammatory			<i>clobetasol scalp solution 0.05 %</i>	Tier 2	MO
Interleukin-13 (IL-13) Inhibitors, Mab			<i>clobetasol topical cream 0.05 %</i>	Tier 2	MO
ADBRY SUBCUTANEOUS SYRINGE 150 MG/ML	Tier 5	PA; DS	<i>clobetasol topical gel 0.05 %</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
clobetasol topical ointment 0.05 %	Tier 2	MO	fluocinonide topical ointment 0.05 %	Tier 2	MO
clobetasol topical shampoo 0.05 %	Tier 2	MO	fluocinonide topical solution 0.05 %	Tier 2	MO
clobetasol-emollient topical cream 0.05 %	Tier 2	MO	FLUOCINONIDE-E TOPICAL CREAM 0.05 %	Tier 2	MO
CLOBEX TOPICAL SHAMPOO 0.05 %	Tier 3	MO	fluocinonide-emollient topical cream 0.05 %	Tier 2	MO
CLODAN TOPICAL SHAMPOO 0.05 %	Tier 3	MO	halobetasol propionate topical cream 0.05 %	Tier 2	MO
CORDRAN TAPE LARGE ROLL TOPICAL TAPE 4 MCG/CM2	Tier 3	MO	halobetasol propionate topical ointment 0.05 %	Tier 2	MO
CORMAX SCALP SOLUTION 0.05 %	Tier 2	MO	hydrocortisone butyrate topical cream 0.1 %	Tier 2	MO
desonide topical cream 0.05 %	Tier 2	MO	hydrocortisone butyrate topical ointment 0.1 %	Tier 2	MO
desonide topical ointment 0.05 %	Tier 2	MO	hydrocortisone butyrate topical solution 0.1 %	Tier 2	MO
desoximetasone topical cream 0.25 %	Tier 2	MO	hydrocortisone butyr-emollient topical cream 0.1 %	Tier 2	MO
fluocinolone and shower cap scalp oil 0.01 %	Tier 2	MO	hydrocortisone topical cream 2.5 %	Tier 2	MO
fluocinolone topical cream 0.01 %, 0.025 %	Tier 2	MO	hydrocortisone topical cream with perineal applicator 2.5 %	Tier 2	MO
fluocinolone topical oil 0.01 %	Tier 2	MO	hydrocortisone topical lotion 2.5 %	Tier 2	MO
fluocinolone topical ointment 0.025 %	Tier 2	MO	hydrocortisone topical ointment 2.5 %	Tier 2	MO
fluocinolone topical solution 0.01 %	Tier 2	MO	mometasone topical cream 0.1 %	Tier 2	MO
fluocinonide topical cream 0.05 %	Tier 2	MO			
fluocinonide topical gel 0.05 %	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>mometasone topical ointment 0.1 %</i>	Tier 2	MO	Antiseborrheic Agents		
<i>mometasone topical solution 0.1 %</i>	Tier 2	MO	<i>selenium sulfide topical lotion 2.5 %</i>	Tier 2	
PROCTO-MED HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	Tier 2	MO	Irrigants		
PROCTOSOL HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	Tier 2	MO	AQUA CARE SODIUM CHLORIDE IRRIGATION SOLUTION 0.9 %	Tier 2	
PROCTOZONE-HC TOPICAL CREAM WITH PERINEAL APPLICATOR 2.5 %	Tier 2	MO	AQUA CARE STERILE WATER IRRIGATION SOLUTION	Tier 2	
<i>triamcinolone acetonide topical aerosol 0.147 mg/gram</i>	Tier 2	MO	<i>lactated ringers irrigation solution</i>	Tier 3	
<i>triamcinolone acetonide topical cream 0.025 %, 0.1 %, 0.5 %</i>	Tier 2	MO	<i>ringer's irrigation solution</i>	Tier 2	
<i>triamcinolone acetonide topical ointment 0.025 %, 0.1 %, 0.5 %</i>	Tier 2	MO	<i>sodium chloride irrigation solution 0.9 %</i>	Tier 2	
TRIDERM TOPICAL CREAM 0.1 %, 0.5 %	Tier 2	MO	<i>water for irrigation, sterile irrigation solution</i>	Tier 2	
Dermatology - Miscellaneous			Keratolytics		
Antiperspirants			<i>podofilox topical solution 0.5 %</i>	Tier 2	MO
DRYSOL DAB-O-MATIC TOPICAL SOLUTION 20 %	Tier 3	MO	Topical Antineoplastic & Premalignant Lesion Agnts		
DRYSOL TOPICAL SOLUTION 20 %	Tier 3	MO	<i>fluorouracil topical cream 5 %</i>	Tier 2	
			<i>fluorouracil topical solution 2 %, 5 %</i>	Tier 2	
Topical Local Anesthetics					
			<i>ethyl chloride topical aerosol,spray 100 %</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>lidocaine topical ointment 5 %</i>	Tier 2		<i>calcipotriene topical cream 0.005 %</i>	Tier 2	PA; MO
<i>lidocaine-prilocaine topical cream 2.5-2.5 %</i>	Tier 2	MO	<i>calcitriol topical ointment 3 mcg/gram</i>	Tier 2	MO
Topical/Mucous Membr./Subcut. Enzymes					
AMPHADASE INJECTION SOLUTION 150 UNIT/ML	Tier 5	DS	DRITHOCREME HP TOPICAL CREAM 1 %	Tier 3	MO
SANTYL TOPICAL OINTMENT 250 UNIT/GRAM	Tier 3		<i>tazarotene topical cream 0.1 %</i>	Tier 2	MO
Dermatology - Psoriasis/Eczema					
Antipsoriatic Agents, Systemic					
<i>acitretin oral capsule 10 mg, 25 mg</i>	Tier 2		TAZORAC TOPICAL CREAM 0.05 %	Tier 3	MO
COSENTYX (2 SYRINGES) SUBCUTANEOUS SYRINGE 150 MG/ML	Tier 5	MO	TAZORAC TOPICAL GEL 0.05 %, 0.1 %	Tier 3	MO
COSENTYX PEN (2 PENS) SUBCUTANEOUS PEN INJECTOR 150 MG/ML	Tier 5	MO	VECTICAL TOPICAL OINTMENT 3 MCG/GRAM	Tier 3	MO
<i>methoxsalen oral capsule, liqd-filled, rapid rel 10 mg</i>	Tier 2		Topical Immunosuppressive Agents		
Antipsoriatics Agents					
<i>calcipotriene scalp solution 0.005 %</i>	Tier 2	MO	<i>tacrolimus topical ointment 0.03 %, 0.1 %</i>	Tier 2	MO
Diabetes					
Antihypergly, Incretin Mimetic(Glp-1 Recep.Agonist)					
OZEMPIC SUBCUTANEOUS PEN INJECTOR 0.25 MG OR 0.5 MG (2 MG/3 ML), 1 MG/DOSE (4 MG/3 ML), 2 MG/DOSE (8 MG/3 ML)	Tier 3	PA; DS			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antihyperglycemic-Sod/Gluc Cotransport2(Sglt2)Inhib			<i>metformin oral tablet 1,000 mg, 500 mg, 850 mg</i>	Tier 2	MO
JARDIANCE ORAL TABLET 10 MG, 25 MG	Tier 3	MO	<i>metformin oral tablet extended release 24 hr 500 mg, 750 mg</i>	Tier 2	MO
Antihyperglycemic, Alpha-Glucosidase Inhib (N-S)			RIOMET ORAL SOLUTION 500 MG/5 ML	Tier 3	MO
<i>acarbose oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 2	MO	Blood Sugar Diagnostics		
Antihyperglycemic, Insulin-Release Stimulant Type			ACCU-CHEK AVIVA PLUS TEST STRIP STRIP	Tier 7	MO; QL
<i>glimepiride oral tablet 1 mg, 2 mg, 4 mg</i>	Tier 2	MO	ACCU-CHEK COMPACT PLUS TEST STRIP	Tier 7	MO; QL
<i>glipizide oral tablet 10 mg, 5 mg</i>	Tier 2	MO	ACCU-CHEK GUIDE TEST STRIPS STRIP	Tier 7	MO; QL
<i>glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg</i>	Tier 2	MO	ACCU-CHEK SMARTVIEW TEST STRIP STRIP	Tier 7	MO; QL
<i>repaglinide oral tablet 0.5 mg, 1 mg, 2 mg</i>	Tier 2	MO	ACCUTREND GLUCOSE TEST STRIPS STRIP	Tier 7	MO; QL
Antihyperglycemic, Insulin-Response Enhancer (N-S)			ADVANCED GLUC METER TEST STRIP STRIP	Tier 7	MO; QL
<i>pioglitazone oral tablet 15 mg, 30 mg, 45 mg</i>	Tier 2	MO	ADVOCATE REDI-CODE PLUS STRIP	Tier 7	MO; QL
Antihyperglycemic, Biguanide Type(Non-Sulfonylurea)			ADVOCATE REDI-CODE STRIP	Tier 7	MO; QL
<i>metformin oral solution 500 mg/5 ml</i>	Tier 2	MO	ADVOCATE TEST STRIPS STRIP	Tier 7	MO; QL
			AGAMATRIX AMP TEST STRIPS STRIP	Tier 7	MO; QL
			AGAMATRIX PRESTO TEST STRIPS STRIP	Tier 7	MO; QL

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ASSURE 4 STRIPS STRIP	Tier 7	MO; QL	DARIO BLOOD GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL
ASSURE PLATINUM TEST STRIP STRIP	Tier 7	MO; QL	DIATRUE PLUS TEST STRIP STRIP	Tier 7	MO; QL
ASSURE PRISM MULTI STRIP STRIP	Tier 7	MO; QL	EASY GLUCO G2 STRIP	Tier 7	MO; QL
BIONIME RIGHTEST TEST STRIPS STRIP	Tier 7	MO; QL	EASY PLUS II TEST STRIP	Tier 7	MO; QL
BLOOD GLUCOSE TEST STRIP	Tier 7	MO; QL	EASY STEP STRIP	Tier 7	MO; QL
BREEZE 2 TEST STRIPS STRIP	Tier 7	MO; QL	EASY TALK GLUCOSE TEST STRIP	Tier 7	MO; QL
CARESENS N TEST STRIPS STRIP	Tier 7	MO; QL	EASY TALK PLUS II TEST STRIP STRIP	Tier 7	MO; QL
CARETOUCH TEST STRIP STRIP	Tier 7	MO; QL	EASY TOUCH BLU LINK TEST STRIP STRIP	Tier 7	MO; QL
CHOICEDM CLARUS STRIP	Tier 7	MO; QL	EASY TOUCH TEST STRIP STRIP	Tier 7	MO; QL
CLEVER CHOICE MICRO TEST STRIP STRIP	Tier 7	MO; QL	EASY TRAK GLUCOSE TEST STRIP	Tier 7	MO; QL
CLEVER CHOICE PRO STRIP	Tier 7	MO; QL	EASY TRAK II TEST STRIP STRIP	Tier 7	MO; QL
CLEVER CHOICE TALK TEST STRIP	Tier 7	MO; QL	EASYGLUCO PLUS STRIP	Tier 7	MO; QL
CLEVER CHOICE TEST STRIPS STRIP	Tier 7	MO; QL	EASYGLUCO TEST STRIP	Tier 7	MO; QL
CLEVER CHOICE VOICE PLUS TEST STRIP	Tier 7	MO; QL	EASymax 15 TEST STRIPS STRIP	Tier 7	MO; QL
CONTOUR NEXT TEST STRIPS STRIP	Tier 7	MO; QL	EASymax STRIP	Tier 7	MO; QL
CONTOUR TEST STRIPS STRIP	Tier 7	MO; QL	ELEMENT COMPACT TEST STRIPS STRIP	Tier 7	MO; QL
COOL GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL	ELEMENT TEST STRIPS STRIP	Tier 7	MO; QL

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
EMBRACE BLOOD GLUCOSE SYSTEM STRIP	Tier 7	MO; QL	FORA D15G STRIPS STRIP	Tier 7	MO; QL
EMBRACE EVO TEST STRIPS STRIP	Tier 7	MO; QL	FORA D20 STRIP	Tier 7	MO; QL
EMBRACE PRO TEST STRIPS STRIP	Tier 7	MO; QL	FORA D40-G31 TEST STRIPS STRIP	Tier 7	MO; QL
EMBRACE TALK TEST STRIPS STRIP	Tier 7	MO; QL	FORA G20 STRIP	Tier 7	MO; QL
EMBRACE WAVE GLUCOSE TEST STRP STRIP	Tier 7	MO; QL	FORA G30-PREMIUM V10 TEST STRP STRIP	Tier 7	MO; QL
EVENCARE G2 STRIP	Tier 7	MO; QL	FORA GD50 TEST STRIPS STRIP	Tier 7	MO; QL
EVENCARE G3 TEST STRIP	Tier 7	MO; QL	FORA GTEL GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL
EVENCARE MINI GLUCOSE TEST STR STRIP	Tier 7	MO; QL	FORA TEST STRIP STRIP	Tier 7	MO; QL
EVENCARE PROVIEW TEST STRIP STRIP	Tier 7	MO; QL	FORA TN'G ADVAN PRO TEST STRIP STRIP	Tier 7	MO; QL
EVENCARE TEST STRIP	Tier 7	MO; QL	FORA TN'G VOICE TEST STRIPS STRIP	Tier 7	MO; QL
EVOLUTION TEST STRIPS STRIP	Tier 7	MO; QL	FORA V10 STRIP	Tier 7	MO; QL
EZ SMART PLUS TEST STRIP	Tier 7	MO; QL	FORA V10-V12-D10-D20 STRIPS STRIP	Tier 7	MO; QL
EZ SMART TEST STRIP	Tier 7	MO; QL	FORA V12 GLUCOSE STRIP	Tier 7	MO; QL
FIFTY50 TEST STRIP STRIP	Tier 7	MO; QL	FORA V20 STRIP	Tier 7	MO; QL
FORA 6 CONNECT GLUCOSE STRIP STRIP	Tier 7	MO; QL	FORA V30A STRIP	Tier 7	MO; QL
FORA 6CONN-GTEL-TN'G ADV STRIP STRIP	Tier 7	MO; QL	FORACARE GD20 STRIP	Tier 7	MO; QL
			FORACARE GD40 TEST STRIPS STRIP	Tier 7	MO; QL
			FORTISCARE G1 TEST STRIP STRIP	Tier 7	MO; QL
			FORTISCARE GLUCOSE TEST STRIPS STRIP	Tier 7	MO; QL

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
FREESTYLE INSULINX STRIP	Tier 7	MO; QL	GOJJI BLOOD GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL
FREESTYLE INSULINX TEST STRIPS STRIP	Tier 7	MO; QL	GOODLIFE AC-302 TEST STRIP STRIP	Tier 7	MO; QL
FREESTYLE LITE STRIPS STRIP	Tier 7	MO; QL	HARMONY GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL
FREESTYLE PRECISION NEO STRIPS STRIP	Tier 7	MO; QL	HEALTHPRO TEST STRIPS STRIP	Tier 7	MO; QL
FREESTYLE TEST STRIP	Tier 7	MO; QL	IGLUCOSE TEST STRIP STRIP	Tier 7	MO; QL
GE100 BLOOD GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL	INFINITY TEST STRIPS STRIP	Tier 7	MO; QL
GE333 BLOOD GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL	INFINITY VOICE TEST STRIP STRIP	Tier 7	MO; QL
GENSTRIP TEST STRIP STRIP	Tier 7	MO; QL	MICRO BLOOD GLUCOSE STRIP	Tier 7	MO; QL
GENULTIMATE TEST STRIP STRIP	Tier 7	MO; QL	MICRODOT BLOOD GLUCOSE SYSTEM STRIP	Tier 7	MO; QL
GLUCO NAVII TEST STRIP STRIP	Tier 7	MO; QL	MICRODOT XTRA BLOOD GLUCOSE STRIP	Tier 7	MO; QL
GLUCOCARD 01 SENSOR PLUS STRIP	Tier 7	MO; QL	MYGLUCOHEALTH STRIP	Tier 7	MO; QL
GLUCOCARD EXPRESSION STRIP	Tier 7	MO; QL	NEUTEK 2TEK TEST STRIPS STRIP	Tier 7	MO; QL
GLUCOCARD SHINE TEST STRIPS STRIP	Tier 7	MO; QL	NOVA MAX GLUCOSE TEST STRIP	Tier 7	MO; QL
GLUCOCARD VITAL SENSOR STRIP	Tier 7	MO; QL	ON CALL EXPRESS TEST STRIP STRIP	Tier 7	MO; QL
GLUCOCARD VITAL TEST STRIPS STRIP	Tier 7	MO; QL	ON CALL PLUS TEST STRIP STRIP	Tier 7	MO; QL
GLUCOCOM GLUCOSE STRIP	Tier 7	MO; QL	ON CALL VIVID TEST STRIP STRIP	Tier 7	MO; QL
GM100 STRIP	Tier 7	MO; QL			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ONETOUCH ULTRA TEST STRIP	Tier 7	MO; QL	REFUAH PLUS STRIP	Tier 7	MO; QL
ONETOUCH VERIO TEST STRIPS STRIP	Tier 7	MO; QL	RELION CONFIRM-MICRO STRIP	Tier 7	MO; QL
OPTIUM EZ STRIP	Tier 7	MO; QL	RELION PRIME TEST STRIPS STRIP	Tier 7	MO; QL
OPTIUM TEST STRIP	Tier 7	MO; QL	RELION ULTIMA STRIP	Tier 7	MO; QL
OPTUMRX STRIP	Tier 7	MO; QL	REVEAL TEST STRIP STRIP	Tier 7	MO; QL
PHARMACIST CHOICE STRIP	Tier 7	MO; QL	RIGHTEST GS250S TEST STRIPS STRIP	Tier 7	MO; QL
PIP BLOOD GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL	RIGHTEST GS260 TEST STRIPS STRIP	Tier 7	MO; QL
PRECISION PCX PLUS TEST STRIP	Tier 7	MO; QL	RIGHTEST GS550 TEST STRIPS STRIP	Tier 7	MO; QL
PRECISION PCX TEST STRIP	Tier 7	MO; QL	RIGHTEST GS700 TEST STRIP STRIP	Tier 7	MO; QL
PRECISION POINT OF CARE TEST STRIP	Tier 7	MO; QL	RIGHTEST GT333 TEST STRIP STRIP	Tier 7	MO; QL
PRECISION Q-I-D TEST STRIP	Tier 7	MO; QL	RIGHTEST MAX TEST STRIP STRIP	Tier 7	MO; QL
PRECISION XTRA TEST STRIP	Tier 7	MO; QL	SMART SENSE TEST STRIPS STRIP	Tier 7	MO; QL
PREMIER TEST STRIP STRIP	Tier 7	MO; QL	SMARTEST TEST STRIP	Tier 7	MO; QL
PREMIUM V10 STRIP	Tier 7	MO; QL	SOLUS V2 TEST STRIPS STRIP	Tier 7	MO; QL
PRO VOICE V8-V9 TEST STRIP STRIP	Tier 7	MO; QL	SURE-TEST EASYPLUS MINI STRIP	Tier 7	MO; QL
PRODIGY NO CODING STRIP	Tier 7	MO; QL	TD GOLD TEST STRIP STRIP	Tier 7	MO; QL
PTS PANELS EGLU TEST STRIP STRIP	Tier 7	MO; QL	TELCARE TEST STRIPS STRIP	Tier 7	MO; QL
QUINTET AC STRIP	Tier 7	MO; QL	TEST N'GO TEST STRIP	Tier 7	MO; QL
QUINTET GLUCOSE TEST STRIPS STRIP	Tier 7	MO; QL			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TRUE METRIX GLUCOSE TEST STRIP STRIP	Tier 7	MO; QL	ACCU-CHEK COMPACT PLUS CONTROL SOLUTION	Tier 7	MO
TRUE METRIX PRO TEST STRIP STRIP	Tier 7	MO; QL	ACCU-CHEK FASTCLIX LANCING DEV KIT	Tier 7	MO
TRUETEST TEST STRIPS STRIP	Tier 7	MO; QL	ACCU-CHEK GUIDE GLUCOSE METER	Tier 7	MO
TRUETRACK TEST STRIP	Tier 7	MO; QL	ACCU-CHEK GUIDE L1-L2 CTRL SOL SOLUTION	Tier 7	MO
ULTIMA TEST STRIPS STRIP	Tier 7	MO; QL	ACCU-CHEK GUIDE ME GLUCOSE MTR	Tier 7	MO
ULTRATRAK STRIP	Tier 7	MO; QL	ACCU-CHEK MULTICLIX LANCET KIT	Tier 7	MO
ULTRATRAK ULTIMATE STRIP	Tier 7	MO; QL	ACCU-CHEK NANO	Tier 7	MO
UNISTRIP1 TEST STRIP STRIP	Tier 7	MO; QL	ACCU-CHEK SMARTVIEW CONTRL SOL SOLUTION	Tier 7	MO
VERASENS TEST STRIP STRIP	Tier 7	MO; QL	ACCU-CHEK SOFT DEV LANCETS KIT	Tier 7	MO
VIVAGUARD INO TEST STRIP STRIP	Tier 7	MO; QL	ACCUTREND GLUCOSE CONTROL SOLUTION	Tier 7	MO
WAVESENSE JAZZ STRIP	Tier 7	MO; QL	ADJUSTABLE LANCING DEVICE	Tier 7	
WAVESENSE PRESTO STRIP	Tier 7	MO; QL	ADVANCED GLUCOSE METER	Tier 7	MO
Diabetic Supplies			ADVANCED LANCING DEVICE KIT	Tier 7	MO
2TEK CONTROL (HIGH-NORMAL) SOLUTION	Tier 7	MO	ADVOCATE BLOOD GLUCOSE MONITOR	Tier 7	MO
2TEK GLUCOSE/BLOOD PRESSURE KIT	Tier 7	MO			
ACCU-CHEK AVIVA CONTROL SOLN SOLUTION	Tier 7	MO			
ACCU-CHEK AVIVA PLUS METER	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ADVOCATE CONTROL SOLUTION HIGH SOLUTION	Tier 7	MO	AGAMATRIX CONTROL SOLN-LEVEL 2 SOLUTION	Tier 7	MO
ADVOCATE DUO DEVICE	Tier 7		AGAMATRIX CONTROL SOLN-LEVEL 4 SOLUTION	Tier 7	MO
ADVOCATE LANCING DEVICE	Tier 7		ALTERNATE SITE LANCING DEVICE	Tier 7	
ADVOCATE LOW CONTROL SOLUTION	Tier 7	MO	AQUA LANCE LANCING DEVICE	Tier 7	
ADVOCATE RAPID-SAFE LANCING	Tier 7		ASSURE 4 CONTROL SOLUTION COMBO PACK	Tier 7	MO
ADVOCATE REDI-CODE DUO METER DEVICE	Tier 7		ASSURE DOSE NORMAL CONTROL SOLUTION	Tier 7	MO
ADVOCATE REDI-CODE GLU MONITOR	Tier 7	MO	ASSURE DOSE NORM-HI CONTROL SOLUTION	Tier 7	MO
ADVOCATE REDI-CODE GLU MONITOR KIT	Tier 7	MO	ASSURE PLATINUM GLUCOSE METER	Tier 7	MO
ADVOCATE REDI-CODE PLUS	Tier 7	MO	ASSURE PRISM CONTROL 1-2 SOLN SOLUTION	Tier 7	MO
ADVOCATE REDI-CODE PLUS CTRL L SOLUTION	Tier 7	MO	ASSURE PRISM MULTI METER	Tier 7	MO
ADVOCATE REDI-CODE+ CTRL HIGH SOLUTION	Tier 7	MO	AUTOJECT 2 INJECTION DEVICE SUBCUTANEOUS INSULIN PEN	Tier 7	PA; MO
AGAMATRIX AMP GLUC MONITOR SYS	Tier 7	MO	AUTO-LANCET MINI	Tier 7	
AGAMATRIX CONTROL HIGH SOLUTION	Tier 7	MO	AUTOLET IMPRESSION LANC DEV KIT	Tier 7	MO
AGAMATRIX CONTROL NORM-HI SOLUTION	Tier 7	MO	AUTOLET LANCING DEVICE	Tier 7	
			AUTOLET PLUS LANCING DEVICE	Tier 7	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
AUTOPEN 1 TO 21 UNITS SUBCUTANEOUS INSULIN PEN	Tier 7	PA; MO	CARESENS CONTROL A AND B SOLUTION	Tier 7	MO
AUTOPEN 2 TO 42 UNITS SUBCUTANEOUS INSULIN PEN	Tier 7	PA; MO	CARESENS CONTROL A NORMAL SOLUTION	Tier 7	MO
BIONIME RIGHTEST GM300 SYSTEM KIT	Tier 7	MO	CARESENS N	Tier 7	MO
BIOTEL CARE BGM-4 METER	Tier 7	MO	CARESENS N FELIZ BT GLUC METER	Tier 7	MO
<i>blood glucose contrl hi,normal solution</i>	Tier 7	MO	CARESENS N FELIZ GLUCOSE METER	Tier 7	MO
<i>blood glucose control, normal solution</i>	Tier 7	MO	CARESENS N KIT	Tier 7	MO
<i>blood glucose ctl high,nml,low solution</i>	Tier 7	MO	CARESENS N VOICE	Tier 7	MO
BLOOD GLUCOSE MONITORING KIT	Tier 7	MO	CARESENS N VOICE KIT	Tier 7	MO
<i>blood-glucose meter</i>	Tier 7	MO	CARESENS PREM LANCING DEVICE	Tier 7	
<i>blood-glucose meter kit</i>	Tier 7	MO	CARESOFT LANCING DEVICE	Tier 7	
BREEZE 2 CONTROL SOLUTION, LOW SOLUTION	Tier 7	MO	CARETOUCH CONTROL SOLN L2-L3 SOLUTION	Tier 7	MO
BREEZE 2 CONTROL SOLUTION, NML SOLUTION	Tier 7	MO	CARETOUCH GLUCOSE MONITORING KIT	Tier 7	MO
BREEZE 2 CONTROL SOLUTION,HIGH SOLUTION	Tier 7	MO	CARETOUCH LANCING DEVICE	Tier 7	
CARELANCE ULT LANCING DEVICE	Tier 7		CHOICE DM CLARUS NORM CONTROL SOLUTION	Tier 7	MO
CAREONE LANCING DEVICE	Tier 7	MO; QL	CHOICEDM CLARUS	Tier 7	MO
			CLEVER CHEK BLOOD GLUCOSE	Tier 7	MO
			CLEVER CHEK BLOOD GLUCOSE SYST KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
CLEVER CHOICE BLOOD GLUC SYS	Tier 7	MO	CONTOUR NEXT GEN METER	Tier 7	MO
CLEVER CHOICE GLUCOSE MONITOR	Tier 7	MO	CONTOUR NEXT GEN METER KIT	Tier 7	MO
CLEVER CHOICE LEVEL 1 CONTROL SOLUTION	Tier 7	MO	CONTOUR NEXT GLUCOSE METER KIT	Tier 7	MO
CLEVER CHOICE LEVEL 2 CONTROL SOLUTION	Tier 7	MO	CONTOUR NEXT LEV 1 CONTROL SOL SOLUTION	Tier 7	MO
CLEVER CHOICE LEVEL 3 CONTROL SOLUTION	Tier 7	MO	CONTOUR NEXT LEV 2 CONTROL SOL SOLUTION	Tier 7	MO
CLEVER CHOICE MICRO	Tier 7	MO	CONTOUR NEXT METER	Tier 7	MO
CLEVER CHOICE PRO	Tier 7	MO	CONTOUR NEXT ONE METER	Tier 7	MO
CLEVER CHOICE TALK GLUCOSE SYS	Tier 7	MO	CONTROL AST MONITORING SYSTEM	Tier 7	MO
CONTOUR CONTROL SOLUTION, HIGH SOLUTION	Tier 7	MO	COOL BLOOD GLUCOSE METER	Tier 7	MO
CONTOUR CONTROL SOLUTION, LOW SOLUTION	Tier 7	MO	COOL BLOOD GLUCOSE METER KIT	Tier 7	MO
CONTOUR CONTROL SOLUTION, NML SOLUTION	Tier 7	MO	COOL CONTROL A SOLUTION SOLUTION	Tier 7	MO
CONTOUR METER	Tier 7	MO	COOL CONTROL B SOLUTION SOLUTION	Tier 7	MO
CONTOUR METER KIT	Tier 7	MO	DIATRUE CONTROL SOLN NORMAL SOLUTION	Tier 7	MO
CONTOUR NEXT EZ METER	Tier 7	MO	DIATRUE CONTROL SOLUTION HIGH SOLUTION	Tier 7	MO
CONTOUR NEXT EZ METER KIT	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
DIATRUE CONTROL SOLUTION LOW SOLUTION	Tier 7	MO	EASY TALK LOW CONTROL SOLUTION	Tier 7	MO
DIATRUE PLUS BLOOD GLUCOSE MET	Tier 7	MO	EASY TALK PLUS II HIGH CONTROL SOLUTION	Tier 7	MO
DROPLET GENTEL LANCING DEVICE	Tier 7		EASY TALK PLUS II LOW CONTROL SOLUTION	Tier 7	MO
DROPLET LANCING DEVICE	Tier 7		EASY TOUCH BLU CTRL SOLN-L1,L3 SOLUTION	Tier 7	MO
EASY MINI EJECT LANCING DEVICE	Tier 7		EASY TOUCH BLU LINK GLUC SYST	Tier 7	MO
EASY PLUS II BLOOD GLUCOSE MET	Tier 7	MO	EASY TOUCH GLUCOSE MONITOR	Tier 7	MO
EASY PLUS II HIGH CONTROL SOLUTION	Tier 7	MO	EASY TOUCH HIGH-LOW CONTROL SOLUTION	Tier 7	MO
EASY PLUS II LOW CONTROL SOLUTION	Tier 7	MO	EASY TOUCH LANCING DEVICE	Tier 7	
EASY STEP BLOOD GLUCOSE METER	Tier 7	MO	EASY TRAK BLOOD GLUCOSE METER	Tier 7	MO
EASY STEP HIGH CONTROL SOLN SOLUTION	Tier 7	MO	EASY TRAK HIGH CONTROL SOLUTION	Tier 7	MO
EASY STEP LOW CONTROL SOLUTION SOLUTION	Tier 7	MO	EASY TRAK II BLOOD GLUCOSE MTR	Tier 7	MO
EASY STEP NORMAL CONTROL SOLN SOLUTION	Tier 7	MO	EASY TRAK II CTRL SOLN-NORMAL SOLUTION	Tier 7	MO
EASY TALK BLOOD GLUCOSE METER	Tier 7	MO	EASY TRAK LOW CONTROL SOLUTION	Tier 7	MO
EASY TALK HIGH CONTROL SOLUTION	Tier 7	MO	EASYGLUCO METER KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
EASYGLUCO MONITORING SYSTEM KIT	Tier 7	MO	ELEMENT LOW CONTROL SOLUTION	Tier 7	MO
EASYGLUCO PLUS NORMAL CONTROL SOLUTION	Tier 7	MO	ELEMENT NORMAL CONTROL SOLUTION	Tier 7	MO
EASymax 15 LEVEL 2 SOLUTION	Tier 7	MO	ELEMENT PLUS BLOOD GLUCOSE KIT KIT	Tier 7	MO
EASymax LOW CONTROL SOLUTION	Tier 7	MO	EMBRACE BLOOD GLUCOSE KIT	Tier 7	MO
EASymax NG	Tier 7	MO	EMBRACE BLOOD GLUCOSE SYSTEM	Tier 7	MO
EASymax NG KIT	Tier 7	MO	EMBRACE EVO BLOOD GLUCOSE KIT KIT	Tier 7	MO
EASymax NORMAL CONTROL SOLUTION	Tier 7	MO	EMBRACE EVO GLUCOSE MONITOR	Tier 7	MO
EASymax V SPEAKING GLUCOSE SYS	Tier 7	MO	EMBRACE EVO LEVEL 1 SOLUTION	Tier 7	MO
EASY-TOUCH BLOOD GLUCOSE METER	Tier 7	MO	EMBRACE GLUCOSE CONTROL HIGH SOLUTION	Tier 7	MO
ELEMENT COMPACT GLUCOSE METER	Tier 7	MO	EMBRACE GLUCOSE CONTROL LOW SOLUTION	Tier 7	MO
ELEMENT COMPACT HIGH CONTROL SOLUTION	Tier 7	MO	EMBRACE LANCING DEVICE	Tier 7	
ELEMENT COMPACT NORMAL CONTROL SOLUTION	Tier 7	MO	EMBRACE PRO GLUCOSE METER	Tier 7	MO
ELEMENT COMPACT V GLUCOSE MTR	Tier 7	MO	EMBRACE PRO SOLUTION	Tier 7	MO
ELEMENT HIGH CONTROL SOLUTION	Tier 7	MO	EMBRACE TALK BLOOD GLUCOSE SYS KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
EMBRACE TALK CONTROL-HIGH (L2) SOLUTION	Tier 7	MO	EZ SMART CONTROL SOLUTION	Tier 7	MO
EMBRACE TALK CONTROL-LOW (L1) SOLUTION	Tier 7	MO	EZ SMART PLUS SYSTEM KIT	Tier 7	MO; QL
EMBRACE TALK GLUCOSE MONITOR	Tier 7	MO	EZ SMART SYSTEM KIT	Tier 7	MO
EMBRACE WAVE PLUS GLUCOSE MTR	Tier 7	MO	FORA D10 KIT	Tier 7	MO
EVENCARE G2	Tier 7	MO	FORA D15 GLUCOSE-BP MONITOR DEVICE	Tier 7	MO
EVENCARE G2 SOLUTION	Tier 7	MO	FORA D20 KIT	Tier 7	MO
EVENCARE G3 CONTROL SOLUTION	Tier 7	MO	FORA D40D GLUCOSE-BP MONITOR DEVICE	Tier 7	MO
EVENCARE G3 GLUCOSE METER KIT	Tier 7	MO	FORA D40G GLUCOSE-BP MONITOR DEVICE	Tier 7	MO
EVENCARE KIT	Tier 7	MO	FORA G20 KIT	Tier 7	MO
EVENCARE MINI GLUCOSE CONTROL SOLUTION	Tier 7	MO	FORA G30A	Tier 7	MO
EVENCARE MINI MONITOR SYSTEM	Tier 7	MO	FORA GD50 BLOOD GLUCOSE SYSTEM	Tier 7	MO
EVENCARE PROVIEW CONTROL-L2,L3 SOLUTION	Tier 7	MO	FORA HIGH CONTROL SOLUTION	Tier 7	MO
EVENCARE SOLUTION	Tier 7	MO	FORA LANCING DEVICE	Tier 7	
EVOLUTION BLOOD GLUCOSE METER KIT	Tier 7	MO	FORA LOW CONTROL SOLUTION	Tier 7	MO
EVOLUTION NORMAL CONTROL SOLUTION	Tier 7	MO	FORA NORMAL CONTROL SOLUTION	Tier 7	MO
			FORA PREMIUM V10 GLUCOSE METER	Tier 7	MO
			FORA TEST N'GO VOICE METER	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
FORA TN'G VOICE METER	Tier 7	MO	FREESTYLE CONTROL SOLUTION	Tier 7	MO
FORA V10 KIT	Tier 7	MO	FREESTYLE FLASH SYSTEM KIT	Tier 7	MO
FORA V12 BLOOD GLUCOSE SYSTEM	Tier 7	MO	FREESTYLE FREEDOM KIT	Tier 7	MO
FORA V12 BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO	FREESTYLE FREEDOM LITE KIT	Tier 7	MO
FORA V20 KIT	Tier 7	MO	FREESTYLE INSULINX	Tier 7	MO
FORA V30A	Tier 7	MO	FREESTYLE LITE METER KIT	Tier 7	MO
FORA V30A KIT	Tier 7	MO	FREESTYLE PRECISION NEO METER	Tier 7	MO
FORACARE GD20 GLUCOSE METER	Tier 7	MO	FREESTYLE SIDEKICK II KIT	Tier 7	MO
FORACARE GD40A GLUCOSE METER	Tier 7	MO	FREESTYLE SYSTEM KIT KIT	Tier 7	MO
FORACARE GD40B GLUCOSE METER	Tier 7	MO	GDRIVE KIT	Tier 7	MO
FORACARE GDH HIGH CONTROL SOLUTION	Tier 7	MO	GE100 BLOOD GLUCOSE SYSTEM	Tier 7	MO
FORACARE GDH LOW CONTROL SOLUTION	Tier 7	MO	GE100 BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO
FORACARE GDH NORMAL CONTROL SOLUTION	Tier 7	MO	GE100 CONTROL SOLUTION NORMAL SOLUTION	Tier 7	MO
FORTISCARE BLOOD GLUCOSE SYST KIT	Tier 7	MO	GE333 BLOOD GLUCOSE SYSTEM	Tier 7	MO
FORTISCARE HIGH SOLUTION	Tier 7	MO	GE333 CONTROL SOLUTION NORMAL SOLUTION	Tier 7	MO
FORTISCARE LOW SOLUTION	Tier 7	MO	GLUCO NAVII GLUCOSE MONITOR KIT	Tier 7	MO
FORTISCARE NORMAL SOLUTION	Tier 7	MO			
FORTISCARE T1 BLOOD GLUC SYS	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
GLUCOCARD 01 HI-NORMAL CONTROL SOLUTION	Tier 7	MO	GLUCOSE CONTROL SOLUTION	Tier 7	MO
GLUCOCARD 01 METER KIT	Tier 7	MO	GLUCOSE KETONE CONTROL SOLN SOLUTION	Tier 7	MO
GLUCOCARD 01 NORMAL CONTROL SOLUTION	Tier 7	MO	GM100 KIT	Tier 7	MO
GLUCOCARD EXPRESSION	Tier 7	MO	GOJJI GLUCOSE CNTRL SOL-NORMAL SOLUTION	Tier 7	MO
GLUCOCARD EXPRESSION KIT	Tier 7	MO	GOJJI LANCING DEVICE	Tier 7	
GLUCOCARD EXPRESSION SOLUTION	Tier 7	MO	GOODLIFE AC-302 GLUCOSE METER	Tier 7	MO
GLUCOCARD SHINE CONNEX METER	Tier 7	MO	HARMONY CONTROL L1,L3 SOLUTION	Tier 7	MO
GLUCOCARD SHINE EXPRESS METER	Tier 7	MO	HEALTHPRO GLUCOSE MONITOR	Tier 7	MO
GLUCOCARD SHINE METER	Tier 7	MO	HEALTHPRO HIGH-LOW CONTROL SOLUTION	Tier 7	MO
GLUCOCARD SHINE METER KIT KIT	Tier 7	MO	HEALTHY ACCENTS AUTOLET	Tier 7	
GLUCOCARD SHINE SOLUTION	Tier 7	MO	HYPOLANCE AST LANCING KIT	Tier 7	MO
GLUCOCARD SHINE XL METER	Tier 7	MO	IGLUCOSE BLOOD GLUCOSE MONITOR KIT	Tier 7	MO
GLUCOCARD VITAL KIT	Tier 7	MO	INCONTROL LANCING DEVICE	Tier 7	
GLUCOCOM BLOOD GLUCOSE KIT	Tier 7	MO	INFINITY CONTROL SOLUTION HIGH SOLUTION	Tier 7	MO
GLUCOCOM CONTROL HIGH SOLUTION	Tier 7	MO	INFINITY CONTROL SOLUTION LOW SOLUTION	Tier 7	MO
GLUCOCOM CONTROL NORMAL SOLUTION	Tier 7	MO			

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INFINITY CONTROL SOLUTION NORM SOLUTION	Tier 7	MO	MEDISENSE CONTROLS 1-HI 1-LO COMBO PACK	Tier 7	MO
INFINITY METER KIT KIT	Tier 7	MO	MEDISENSE GLUCOSE KETONE COMBO PACK	Tier 7	MO
INFINITY STARTER KIT KIT	Tier 7	MO	MEDISENSE MID CONTROL SOLUTION	Tier 7	MO
INFINITY VOICE CTRL SOLN-LVL 2 SOLUTION	Tier 7	MO	MEDPOINT NORMAL CONTROL SOLUTION	Tier 7	MO
INFINITY VOICE GLUCOSE MONITOR	Tier 7	MO	METER-CHECK SOLUTION	Tier 7	MO
INPEN (FOR HUMALOG) BLUE SUBCUTANEOUS INSULIN PEN	Tier 7	MO	MICRODOT BLOOD GLUCOSE SYSTEM	Tier 7	MO
INPEN (FOR HUMALOG) GREY SUBCUTANEOUS INSULIN PEN	Tier 7	MO	MICRODOT BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO
INPEN (FOR HUMALOG) PINK SUBCUTANEOUS INSULIN PEN	Tier 7	MO	MICRODOT HIGH-LOW CONTROL SOLUTION	Tier 7	MO
JAZZ WIRELESS 2 METER KIT KIT	Tier 7	MO	MICRODOT NORMAL CONTROL SOLUTION	Tier 7	MO
<i>lancing device</i>	Tier 7		MICROLET 2 LANCING DEVICE KIT	Tier 7	MO
LANCING DEVICE WITH LANCETS	Tier 7		MICROLET NEXT LANCING DEVICE KIT	Tier 7	MO
<i>lancing device with lancets kit</i>	Tier 7	MO	MINI LANCING DEVICE	Tier 7	
LANCING SYSTEM	Tier 7		MULTI-LANCET DEVICE 2 KIT	Tier 7	MO
LANZO LANCING DEVICE KIT	Tier 7	MO	MYGLUCOHEALTH CONTROL SOLUTION SOLUTION	Tier 7	MO
LITE TOUCH LANCING DEVICE	Tier 7				
MEDISENSE COMBO PACK	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
MYGLUCOHEALTH KIT	Tier 7	MO	ON CALL VIVID PAL METER KIT	Tier 7	MO
NOVA MAX GLUCOSE CONTROL SOLUTION	Tier 7	MO	ONETOUCH DELICA LANC DEVICE KIT	Tier 7	MO
NOVAMAX PLUS GLU-KET SOLUTION	Tier 7	MO	ONETOUCH DELICA PLUS LANC DEV KIT	Tier 7	MO
NOVOPEN ECHO SUBCUTANEOUS INSULIN PEN	Tier 7	PA; MO	ONETOUCH SOLUTIONS COMPLETE KIT	Tier 7	MO
ON CALL EXPRESS CONTROL SOLUTION	Tier 7	MO	ONETOUCH SOLUTIONS FIT KIT	Tier 7	MO
ON CALL EXPRESS METER	Tier 7	MO	ONETOUCH SOLUTIONS STARTER KIT	Tier 7	MO
ON CALL EXPRESS METER KIT	Tier 7	MO	ONETOUCH SURESOFT LANCING DEV 18 GAUGE, 21 GAUGE	Tier 7	MO; QL
ON CALL LANCING DEVICE	Tier 7		ONETOUCH ULTRA CONTROL SOLUTION	Tier 7	MO
ON CALL PLUS CONTROL SOLUTION	Tier 7	MO	ONETOUCH ULTRA2 METER	Tier 7	MO
ON CALL PLUS LANCING DEVICE	Tier 7		ONETOUCH ULTRA2 METER KIT	Tier 7	MO
ON CALL PLUS METER	Tier 7	MO	ONETOUCH ULTRAMINI KIT	Tier 7	MO
ON CALL PLUS METER KIT	Tier 7	MO	ONETOUCH VERIO FLEX METER	Tier 7	MO
ON CALL VIVID CONTROL SOLUTION	Tier 7	MO	ONETOUCH VERIO FLEX START KIT	Tier 7	MO
ON CALL VIVID METER	Tier 7	MO	ONETOUCH VERIO HIGH CONTROL SOLUTION	Tier 7	MO
ON CALL VIVID METER KIT	Tier 7	MO	ONETOUCH VERIO IQ METER	Tier 7	MO
ON CALL VIVID PAL METER	Tier 7	MO	ONETOUCH VERIO IQ METER KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ONETOUCH VERIO METER	Tier 7	MO	PREMIER CLASSIC GLUCOSE METER	Tier 7	MO
ONETOUCH VERIO MID CONTROL SOLUTION	Tier 7	MO	PREMIER COMPACT GLUCOSE METER KIT	Tier 7	MO
ONETOUCH VERIO REFLECT METER	Tier 7	MO	PREMIER VOICE GLUCOSE METER	Tier 7	MO
ONETOUCH VERIO REFLECT START KIT	Tier 7	MO	PREMIUM BLOOD GLUCOSE MONITOR	Tier 7	MO
OPTUMRX	Tier 7	MO	PREMIUM V10	Tier 7	MO
OPTUMRX KIT	Tier 7	MO	PRESTO PRO BLOOD GLUCOSE METER	Tier 7	MO
OPTUMRX SOLUTION	Tier 7	MO	PRO VOICE V8 GLUCOSE MONITOR	Tier 7	MO
PHARMACIST CHOICE GLUCOSE SYS	Tier 7	MO	PRO VOICE V9 GLUCOSE MONITOR	Tier 7	MO
PIP BLOOD GLUCOSE MONITOR	Tier 7	MO	PRODIGY AUTOCODE METER KIT	Tier 7	MO
PIP GLUCOSE CONTROL SOLN L1-L2 SOLUTION	Tier 7	MO	PRODIGY AUTOCODE MONITOR SYST	Tier 7	MO
POGO AUTOMATIC BLOOD GLUC SYS	Tier 7	MO	PRODIGY CONTROL SOLUTION, LOW SOLUTION	Tier 7	MO
PRECISION	Tier 7	MO	PRODIGY CONTROL SOLUTION,HIGH SOLUTION	Tier 7	MO
PRECISION GLUCOSE CONTROL SOLN COMBO PACK	Tier 7	MO	PRODIGY LANCING DEVICE	Tier 7	
PRECISION GLUCOSE/KETONE CONTR COMBO PACK	Tier 7	MO	PRODIGY POCKET METER KIT	Tier 7	MO
PRECISION XTRA MONITOR	Tier 7	MO	PRODIGY VOICE GLUCOSE METER KIT	Tier 7	MO
PREMIER BLU GLUCOSE METER	Tier 7	MO	QUINTET AC	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
QUINTET BLOOD GLUCOSE METER	Tier 7	MO	RIGHTEST GD500 LANCING DEVICE	Tier 7	
REFUAH PLUS GLUCOSE CONTROL SOLUTION	Tier 7	MO	RIGHTEST GM250S GLUCOSE METER	Tier 7	MO
REFUAH PLUS GLUCOSE MONITOR KIT	Tier 7	MO	RIGHTEST GM260 GLUCOSE METER	Tier 7	MO
RELIAMED MINI LANCING DEVICE	Tier 7		RIGHTEST GM550 SYSTEM KIT	Tier 7	MO
RELION ALL-IN-ONE METER KIT	Tier 7	MO	RIGHTEST GM700SB GLUCOSE METER	Tier 7	MO
RELION CONFIRM KIT	Tier 7	MO	RIGHTEST GT333 GLUCOSE METER	Tier 7	MO
RELION MICRO GLUCOSE MONITOR	Tier 7	MO	RIGHTEST GT333 LEV 2 CTRL SOLN SOLUTION	Tier 7	MO
RELION MICRO GLUCOSE MONITOR KIT	Tier 7	MO	RIGHTEST MAX PLUS GLUCOSE MTR	Tier 7	MO
RELION PRIME METER	Tier 7	MO	SAFE-CLIP BY MAIL DEVICE	Tier 7	MO
REVEAL BLOOD GLUCOSE METER KIT	Tier 7	MO	SAFE-CLIP NEEDLE STORAGE DEV DEVICE	Tier 7	MO
RIGHTEST CONTROL SOLUTION HIGH SOLUTION	Tier 7	MO	SIDEKICK BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO
RIGHTEST CONTROL SOLUTION NORM SOLUTION	Tier 7	MO	SMART CARESENS N KIT	Tier 7	MO
RIGHTEST GC250S CNTRL SOL NORM SOLUTION	Tier 7	MO	SMART SENSE MONITORING SYSTEM	Tier 7	MO
RIGHTEST GC700 LEV 2 CTRL SOLN SOLUTION	Tier 7	MO	SMARTDIABETES VANTAGE	Tier 7	
			SMARTTEST CONTROL SOLUTION	Tier 7	MO
			SMARTTEST EJECT KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
SMARTEST PERSONA GLUCOSE METER	Tier 7	MO	SURE-PEN LANCING DEVICE	Tier 7	
SMARTEST PERSONA STARTER KIT	Tier 7	MO	SURE-TEST EASYPLUS MINI METER	Tier 7	MO
SMARTEST PRONTO GLUCOSE METER	Tier 7	MO	SURE-TEST EASYPLUS MINI SOLUTION	Tier 7	MO
SMARTEST PRONTO STARTER KIT	Tier 7	MO	TD GOLD BLOOD GLUCOSE MONITOR	Tier 7	MO
SMARTEST PROTEGE KIT	Tier 7	MO	TD GOLD LEVEL 1 CONTROL SOLUTION	Tier 7	MO
SMARTEST SMART CODE METER KIT	Tier 7	MO	TD GOLD LEVEL 2 CONTROL SOLUTION	Tier 7	MO
SMARTEST TALKING METER KIT	Tier 7	MO	TD GOLD LEVEL 3 CONTROL SOLUTION	Tier 7	MO
SOLUS V2 AUDIBLE METER	Tier 7	MO	TD GOLD VOICE GLUCOSE MONITOR	Tier 7	MO
SOLUS V2 AUDIBLE METER KIT	Tier 7	MO	TEL CARE BGM KIT	Tier 7	MO
SOLUS V2 CONTROL SOLUTION, LOW SOLUTION	Tier 7	MO	TEL CARE BLOOD GLUCOSE KIT KIT	Tier 7	MO
SOLUS V2 CONTROL SOLUTION, HIGH SOLUTION	Tier 7	MO	TEL CARE CONTROL SOLUTION	Tier 7	MO
SOLUS V2 LANCING DEVICE KIT	Tier 7	MO	TEST N'GO BLOOD GLUCOSE SYSTEM	Tier 7	MO
SURE COMFORT LANCING PEN	Tier 7		TRUE METRIX AIR GLUCOSE METER	Tier 7	MO
SUREFLEX DEVICE WITH LANCETS KIT	Tier 7	MO	TRUE METRIX AIR GLUCOSE METER KIT	Tier 7	MO
SUREFLEX LANCING DEVICE	Tier 7		TRUE METRIX GLUCOSE METER	Tier 7	MO
			TRUE METRIX GLUCOSE METER KIT	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TRUE METRIX GO GLUCOSE METER	Tier 7	MO	ULTRATRAK NORMAL CONTROL SOLUTION	Tier 7	MO
TRUE METRIX LEVEL 1 SOLUTION	Tier 7	MO	ULTRATRAK ULTIMATE	Tier 7	MO
TRUE METRIX LEVEL 2 SOLUTION	Tier 7	MO	ULTRATRAK ULTIMATE SOLUTION	Tier 7	MO
TRUE METRIX LEVEL 3 SOLUTION	Tier 7	MO	UNISTIK 2 COMFORT LANCET 28 GAUGE	Tier 7	MO
TRUE2GO BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO	UNISTIK 2 DEVICE KIT	Tier 7	MO
TRUECONTROL LEVEL 0 SOLUTION	Tier 7	MO	UNISTIK 2 EXTRA LANCET 21 GAUGE	Tier 7	MO
TRUECONTROL LEVEL 1 SOLUTION	Tier 7	MO	UNISTIK 2 NORMAL LANCET 21 GAUGE	Tier 7	MO
TRUEDRAW LANCING DEVICE	Tier 7		UNISTIK 3 COMFORT LANCET 28 GAUGE	Tier 7	MO; QL
TRUERESULT BLOOD GLUCOSE SYSTM KIT	Tier 7	MO	UNISTIK 3 DUAL LANCET 18 GAUGE	Tier 7	MO
TRUETRACK BLOOD GLUCOSE SYSTEM KIT	Tier 7	MO	UNISTIK 3 NORMAL LANCET 23 GAUGE	Tier 7	MO; QL
TRUETRACK SMART SYSTEM KIT	Tier 7	MO	UNISTRIP HIGH CONTROL SOLUTION	Tier 7	MO
ULTI-LANCE	Tier 7		UNISTRIP LOW CONTROL SOLUTION	Tier 7	MO
ULTI-LANCE KIT	Tier 7	MO	VERASENS BLOOD GLUCOSE METER	Tier 7	MO
ULTIMA MONITOR	Tier 7	MO	VERASENS CONTROL SOLN-LEVEL 1 SOLUTION	Tier 7	MO
ULTRATRAK GLUCOSE METER	Tier 7	MO	VERASENS METER STARTER KIT KIT	Tier 7	MO
ULTRATRAK GLUCOSE METER KIT	Tier 7	MO			
ULTRATRAK HIGH-LOW CONTROL SOLUTION	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
VIVAGUARD INO CTRL SOLN-L1,2,3 SOLUTION	Tier 7	MO	Insulins		
VIVAGUARD INO CTRL SOLN-L1,L3 SOLUTION	Tier 7	MO	ADMELOG SOLOSTAR U-100 INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	Tier 3	PA; MO
VIVAGUARD INO CTRL SOLN-L2 SOLUTION	Tier 7	MO	HUMALOG JUNIOR KWIKPEN U-100 SUBCUTANEOUS INSULIN PEN, HALF-UNIT 100 UNIT/ML	Tier 3	PA; MO
VIVAGUARD INO SMART GLUC METER	Tier 7	MO	HUMALOG KWIKPEN INSULIN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML	Tier 3	PA; MO
VIVAGUARD LANCING DEVICE	Tier 7		HUMALOG U-100 INSULIN SUBCUTANEOUS CARTRIDGE 100 UNIT/ML	Tier 3	PA; MO
WAVESENSE AMP KIT	Tier 7	MO	HUMALOG U-100 INSULIN SUBCUTANEOUS SOLUTION 100 UNIT/ML	Tier 3	MO
WAVESENSE CONTROL SOLUTION SOLUTION	Tier 7	MO	HUMULIN 70/30 U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML (70-30)	Tier 3	MO
WAVESENSE PRESTO	Tier 7	MO	HUMULIN N NPH INSULIN KWIKPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	Tier 3	PA; MO
Hyperglycemics					
BAQSIMI NASAL SPRAY, NON-AEROSOL 3 MG/ACTUATION	Tier 3				
GLUCAGON EMERGENCY KIT (HUMAN) INJECTION RECON SOLN 1 MG	Tier 2				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
HUMULIN N NPH U-100 INSULIN SUBCUTANEOUS SUSPENSION 100 UNIT/ML	Tier 3	MO	Urine Glucose Test Aids		
HUMULIN R REGULAR U-100 INSULIN INJECTION SOLUTION 100 UNIT/ML	Tier 3	MO	DASTIX STRIP	Tier 7	MO
HUMULIN R U-500 (CONC) INSULIN SUBCUTANEOUS SOLUTION 500 UNIT/ML	Tier 3	MO	NO-STICK GLUCOSE STRIP	Tier 7	MO
HUMULIN R U-500 (CONC) KWIKPEN SUBCUTANEOUS INSULIN PEN 500 UNIT/ML (3 ML)	Tier 3	MO	Urine Glucose/Acetone Test Aids,Strips		
<i>insulin glargine-yfgn subcutaneous insulin pen 100 unit/ml (3 ml)</i>	Tier 3	PA; MO	KETO-DIASTIX STRIP	Tier 7	MO
<i>insulin glargine-yfgn subcutaneous solution 100 unit/ml</i>	Tier 3	MO	Ear - General Disorders		
<i>insulin lispro subcutaneous insulin pen 100 unit/ml</i>	Tier 2	PA; MO	Ear Preparations, Misc. Anti-Infectives		
<i>insulin lispro subcutaneous insulin pen, half-unit 100 unit/ml</i>	Tier 2	PA; MO	<i>acetic acid otic (ear) solution 2 %</i>	Tier 2	MO
<i>insulin lispro subcutaneous solution 100 unit/ml</i>	Tier 2	MO	<i>hydrocortisone-acetic acid otic (ear) drops 1-2 %</i>	Tier 2	
NOVOLIN N FLEXPEN SUBCUTANEOUS INSULIN PEN 100 UNIT/ML (3 ML)	Tier 3	MO	Ear Preparations,Antibiotics		
			COLY-MYCIN S OTIC (EAR) DROPS,SUSPENSIO N 3.3-3-10-0.5 MG/ML	Tier 3	
			CORTISPORIN-TC OTIC (EAR) DROPS,SUSPENSIO N 3.3-3-10-0.5 MG/ML	Tier 3	
			<i>neomycin-polymyxin-hc otic (ear) drops,suspension 3.5-10,000-1 mg/ml-unit/ml-%</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
neomycin-polymyxin-hc otic (ear) solution 3.5-10,000-1 mg/ml-unit/ml-%	Tier 2		KIONEX (WITH SORBITOL) ORAL SUSPENSION 15-19.3 GRAM/60 ML	Tier 2	
ofloxacin otic (ear) drops 0.3 %	Tier 2		LOKELMA ORAL POWDER IN PACKET 10 GRAM, 5 GRAM	Tier 5	DS; PR; QL
Otic Preparations, Anti-Inflammatory-Antibiotics			sevelamer carbonate oral powder in packet 2.4 gram	Tier 2	MO
ciprofloxacin-dexamethasone otic (ear) drops, suspension 0.3-0.1 %	Tier 2		sevelamer carbonate oral tablet 800 mg	Tier 2	MO
Electrolyte Regulation			sodium polystyrene sulfonate oral powder	Tier 2	
Bicarbonate Producing/Containing Agents			SPS (WITH SORBITOL) ORAL SUSPENSION 15-20 GRAM/60 ML	Tier 2	
sodium bicarbonate intravenous solution 1 meq/ml (8.4 %)	Tier 2		SPS (WITH SORBITOL) RECTAL ENEMA 30-40 GRAM/120 ML	Tier 3	
sodium bicarbonate intravenous syringe 10 meq/10 ml (8.4 %), 7.5 % (0.9 meq/ml), 8.4 % (1 meq/ml)	Tier 2		Electrolyte Maintenance		
Electrolyte Depleters			<i>lactated ringers intravenous parenteral solution</i>	Tier 3	
calcium acetate(phosphat bind) oral capsule 667 mg	Tier 2	MO	<i>ringer's intravenous parenteral solution</i>	Tier 2	
calcium acetate(phosphat bind) oral tablet 667 mg	Tier 2	MO	Potassium Replacement		
			KLOR-CON 10 ORAL TABLET EXTENDED RELEASE 10 MEQ	Tier 3	MO
			KLOR-CON 8 ORAL TABLET EXTENDED RELEASE 8 MEQ	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
KLOR-CON M10 ORAL TABLET,ER PARTICLES/CRYSTALS 10 MEQ	Tier 2	MO	BD PRE-FILLED NORMAL SALINE INJECTION SYRINGE	Tier 2	
KLOR-CON M20 ORAL TABLET,ER PARTICLES/CRYSTALS 20 MEQ	Tier 2	MO	BD PRE-FILLED SALINE BLUNT CAN INJECTION SYRINGE	Tier 2	
K-TAB ORAL TABLET EXTENDED RELEASE 10 MEQ	Tier 3	MO	CLEARSHIELD SODIUM CHLOR FLUSH INJECTION SYRINGE	Tier 2	
<i>potassium chlorid-d5-0.45%nacl intravenous parenteral solution 10 meq/l, 20 meq/l, 40 meq/l</i>	Tier 2		NORMAL SALINE FLUSH INJECTION SYRINGE	Tier 2	
<i>potassium chloride intravenous solution 2 meq/ml</i>	Tier 2		<i>sodium chlor 0.9% bacteriostat injection solution 0.9 %</i>	Tier 2	
<i>potassium chloride oral capsule, extended release 10 meq, 8 meq</i>	Tier 2	MO	<i>sodium chloride 0.45 % intravenous parenteral solution 0.45 %</i>	Tier 2	
<i>potassium chloride oral tablet extended release 10 meq, 20 meq, 8 meq</i>	Tier 2	MO	<i>sodium chloride 0.9 % (flush) injection syringe</i>	Tier 2	
<i>potassium chloride oral tablet,er particles/crystals 10 meq, 20 meq</i>	Tier 2	MO	<i>sodium chloride 0.9 % injection solution</i>	Tier 2	
Sodium/Saline Preparations			<i>sodium chloride 0.9 % intravenous parenteral solution</i>	Tier 2	
BD POSIFLUSH NORMAL SALINE 0.9 INJECTION SYRINGE	Tier 2		<i>sodium chloride 0.9 % intravenous piggyback</i>	Tier 2	
			<i>sodium chloride injection syringe 0.9 %</i>	Tier 2	
			<i>sodium chloride intravenous parenteral solution 4 meq/ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Endocrine Disorder - Fertility					
Drugs To Treat Impotency					
CAVERJECT IMPULSE INTRACAVERNOSAL KIT 10 MCG, 20 MCG	Tier 3	RB; QL	GONAL-F RFF REDI-JECT SUBCUTANEOUS PEN INJECTOR 300/0.5 UNIT/ML, 450/0.75 UNIT/ML, 900/1.5 UNIT/ML	Tier 5	DS
CAVERJECT INTRACAVERNOSAL RECON SOLN 20 MCG, 40 MCG	Tier 3	RB; QL	GONAL-F RFF SUBCUTANEOUS RECON SOLN 75 UNIT	Tier 5	DS
EDEX INTRACAVERNOSAL KIT 10 MCG, 20 MCG, 40 MCG	Tier 3	RB; QL	GONAL-F SUBCUTANEOUS RECON SOLN 1,050 UNIT, 450 UNIT	Tier 5	DS
MUSE INTRA-URETHRAL SUPPOSITORY 1,000 MCG, 125 MCG, 250 MCG, 500 MCG	Tier 3	RB; QL	Human Chorionic Gonadotropin (Hcg)		
<i>tadalafil oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg</i>	Tier 2	RB; MO; QL	<i>chorionic gonadotropin, human intramuscular recon soln 10,000 unit</i>	Tier 5	DS
Fertility Stimulating Preparations, Non-Fsh					
CLOMID ORAL TABLET 50 MG	Tier 3		NOVAREL INTRAMUSCULAR RECON SOLN 10,000 UNIT	Tier 5	DS
<i>clomiphene citrate oral tablet 50 mg</i>	Tier 2		PREGNYL INTRAMUSCULAR RECON SOLN 10,000 UNIT	Tier 5	DS
Follicle Stim./Luteinizing Hormones					
MENOPUR SUBCUTANEOUS RECON SOLN 75 UNIT	Tier 5	DS	Endocrine Disorder - Other		
			ACTHAR INJECTION GEL 80 UNIT/ML	Tier 5	PA; DS
			CORTROPHIN GEL INJECTION GEL 80 UNIT/ML	Tier 5	PA; DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antidiuretic And Vasopressor Hormones					Calcimimetic, Parathyroid Calcium Enhancer
<i>desmopressin injection solution 4 mcg/ml</i>	Tier 2		<i>cinacalcet oral tablet 30 mg, 60 mg, 90 mg</i>	Tier 5	DS
Growth Hormones					
<i>desmopressin nasal spray with pump 10 mcg/spray non-refrig (0.1 ml)</i>	Tier 2	MO	<i>OMNITROPE SUBCUTANEOUS CARTRIDGE 10 MG/1.5 ML (6.7 MG/ML), 5 MG/1.5 ML (3.3 MG/ML)</i>	Tier 3	PA; DS
<i>desmopressin nasal spray, non-aerosol 10 mcg/spray refrig (0.1 ml)</i>	Tier 2	MO	Lhrh(Gnrh) Agonist Analog Pituitary Suppressants		
<i>desmopressin oral tablet 0.1 mg, 0.2 mg</i>	Tier 2	MO	<i>SYNAREL NASAL SPRAY, NON-AEROSOL 2 MG/ML</i>	Tier 3	PA
Antineoplastic Lhrh(Gnrh) Agonist, Pituitary Suppr.					Lhrh(Gnrh) Antagonist, Pituitary Suppressant Agents
<i>leuprolide subcutaneous kit 1 mg/0.2 ml</i>	Tier 2	MO	<i>FYREMADEL SUBCUTANEOUS SYRINGE 250 MCG/0.5 ML</i>	Tier 5	
Bone Resorption Inhibitors					<i>ganirelix subcutaneous syringe 250 mcg/0.5 ml</i>
<i>alendronate oral tablet 35 mg, 70 mg</i>	Tier 2	MO	<i>ORILISSA ORAL TABLET 150 MG, 200 MG</i>	Tier 5	PA; DS
<i>calcitonin (salmon) nasal spray, non-aerosol 200 unit/actuation</i>	Tier 2	MO	Menopausal Sympt Supp-Sel Estrogen Recep Modulator		
<i>pamidronate intravenous recon soln 90 mg</i>	Tier 6		<i>OSPHENA ORAL TABLET 60 MG</i>	Tier 3	RB; DS; QL
<i>raloxifene oral tablet 60 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Pituitary Suppressive Agents			<i>liothyronine oral tablet</i> 25 mcg, 5 mcg, 50 mcg	Tier 2	MO
<i>cabergoline oral tablet</i> 0.5 mg	Tier 2	MO	Eye - General Disorders		
<i>danazol oral capsule</i> 100 mg, 200 mg, 50 mg	Tier 2	MO	Eye Antibiotic-Corticoid Combinations		
Endocrine Disorder - Thyroid			<i>neomycin-polymyxin b-dexameth ophthalmic (eye) drops,suspension</i> 3.5mg/ml-10,000 unit/ml-0.1 %	Tier 2	
Antithyroid Preparations			<i>neomycin-polymyxin b-dexameth ophthalmic (eye) ointment</i> 3.5 mg/g-10,000 unit/g-0.1 %	Tier 2	
<i>methimazole oral tablet</i> 10 mg, 5 mg	Tier 2	MO	<i>neomycin-polymyxin-hc ophthalmic (eye) drops,suspension</i> 3.5-10,000-10 mg-unit-mg/ml	Tier 2	
<i>propylthiouracil oral tablet</i> 50 mg	Tier 2	MO	<i>PRED-G OPHTHALMIC (EYE) DROPS,SUSPENSION</i> 0.3-1 %	Tier 3	
Iodine Containing Agents			Eye Antiinflammatory Agents		
<i>potassium iodide oral solution</i> 1 gram/ml	Tier 2		<i>dexamethasone sodium phosphate ophthalmic (eye) drops</i> 0.1 %	Tier 2	MO
<i>SSKI ORAL SOLUTION</i> 1 GRAM/ML	Tier 2		<i>diclofenac sodium ophthalmic (eye) drops</i> 0.1 %	Tier 2	
Thyroid Hormones					
<i>EUTHYROX ORAL TABLET</i> 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG	Tier 2	MO			
<i>levothyroxine oral tablet</i> 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>fluorometholone ophthalmic (eye) drops, suspension 0.1 %</i>	Tier 2	MO	ALTACAIN OPHTHALMIC (EYE) DROPS 0.5 %	Tier 2	
<i>flurbiprofen sodium ophthalmic (eye) drops 0.03 %</i>	Tier 2		ALTAFLUOR BENOX OPHTHALMIC (EYE) DROPS 0.25-0.4 %	Tier 2	
<i>FML FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION 0.25 %</i>	Tier 3	MO	FLUCAINE OPHTHALMIC (EYE) DROPS 0.25-0.5 %	Tier 2	
<i>ketorolac ophthalmic (eye) drops 0.5 %</i>	Tier 2		<i>fluorescein- proparacaine ophthalmic (eye) drops 0.25-0.5 %</i>	Tier 2	
<i>OMNIPRED OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %</i>	Tier 3	MO	<i>proparacaine ophthalmic (eye) drops 0.5 %</i>	Tier 2	
<i>PRED FORTE OPHTHALMIC (EYE) DROPS,SUSPENSION 1 %</i>	Tier 3	MO	<i>tetracaine hcl ophthalmic (eye) drops 0.5 %</i>	Tier 2	
<i>PRED MILD OPHTHALMIC (EYE) DROPS,SUSPENSION 0.12 %</i>	Tier 3	MO	Eye Sulfonamides		
<i>prednisolone acetate ophthalmic (eye) drops,suspension 1 %</i>	Tier 2	MO	BLEPH-10 OPHTHALMIC (EYE) DROPS 10 %	Tier 2	
<i>prednisolone sodium phosphate ophthalmic (eye) drops 1 %</i>	Tier 2	MO	BLEPHAMIDE OPHTHALMIC (EYE) DROPS,SUSPENSION 10-0.2 %	Tier 3	
Eye Antivirals			BLEPHAMIDE S.O.P. OPHTHALMIC (EYE) OINTMENT 10-0.2 %	Tier 3	
<i>trifluridine ophthalmic (eye) drops 1 %</i>	Tier 2		<i>sulacetamide sodium ophthalmic (eye) drops 10 %</i>	Tier 2	
Eye Local Anesthetics			<i>sulacetamide- prednisolone ophthalmic (eye) drops 10 %-0.23 % (0.25 %)</i>	Tier 2	
<i>ALCAINE OPHTHALMIC (EYE) DROPS 0.5 %</i>	Tier 2				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Eye Vasoconstrictors (Rx Only)			<i>moxifloxacin ophthalmic (eye) drops 0.5 %</i>	Tier 2	
<i>phenylephrine hcl ophthalmic (eye) drops 10 %, 2.5 %</i>	Tier 2		<i>ofloxacin ophthalmic (eye) drops 0.3 %</i>	Tier 2	
Ophthalmic Antibiotics			POLYCIN OPHTHALMIC (EYE) OINTMENT 500-10,000 UNIT/GRAM	Tier 2	
AK-POLY-BAC OPHTHALMIC (EYE) OINTMENT 500-10,000 UNIT/GRAM	Tier 2		<i>polymyxin b sulf-trimethoprim ophthalmic (eye) drops 10,000 unit- 1 mg/ml</i>	Tier 2	
<i>bacitracin ophthalmic (eye) ointment 500 unit/gram</i>	Tier 2		<i>tobramycin ophthalmic (eye) drops 0.3 %</i>	Tier 2	
<i>bacitracin-polymyxin b ophthalmic (eye) ointment 500-10,000 unit/gram</i>	Tier 2		TOBREX OPHTHALMIC (EYE) OINTMENT 0.3 %	Tier 3	
CILOXAN OPHTHALMIC (EYE) OINTMENT 0.3 %	Tier 3		Ophthalmic Anti-Inflammatory Immunomodulator-Type		
<i>ciprofloxacin hcl ophthalmic (eye) drops 0.3 %</i>	Tier 2		<i>cyclosporine ophthalmic (eye) dropperette 0.05 %</i>	Tier 2	DS; QL
<i>erythromycin ophthalmic (eye) ointment 5 mg/gram (0.5 %)</i>	Tier 2		Ophthalmic Mast Cell Stabilizers		
<i>gatifloxacin ophthalmic (eye) drops 0.5 %</i>	Tier 2		<i>cromolyn ophthalmic (eye) drops 4 %</i>	Tier 2	MO
GENTAK OPHTHALMIC (EYE) OINTMENT 0.3 % (3 MG/GRAM)	Tier 2		Ophthalmic Preparations, Miscellaneous		
<i>gentamicin ophthalmic (eye) drops 0.3 %</i>	Tier 2		BIOLON INTRAOCULAR SYRINGE 10 MG/ML	Tier 3	
			HEALON PRO INTRAOCULAR SYRINGE 10 MG/ML	Tier 3	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
PROVISC INTRAOCULAR SYRINGE 10 MG/ML	Tier 3		PHOSPHOLINE IODIDE OPHTHALMIC (EYE) DROPS 0.125 %	Tier 3	MO
Eye - Glaucoma			<i>pilocarpine hcl ophthalmic (eye) drops 1 %, 2 %, 4 %</i>	Tier 2	MO
Carbonic Anhydrase Inhibitors			<i>timolol maleate ophthalmic (eye) drops 0.25 %, 0.5 %</i>	Tier 2	MO
acetazolamide oral capsule, extended release 500 mg	Tier 2	MO	Mydriatics		
acetazolamide oral tablet 125 mg, 250 mg	Tier 2	MO	<i>atropine ophthalmic (eye) drops 1 %</i>	Tier 2	MO
acetazolamide sodium injection recon soln 500 mg	Tier 2		<i>atropine ophthalmic (eye) ointment 1 %</i>	Tier 2	MO
methazolamide oral tablet 25 mg, 50 mg	Tier 2	MO	CYCLOGYL OPHTHALMIC (EYE) DROPS 0.5 %, 2 %	Tier 3	
Miotics/Other Intraoc. Pressure Reducers			CYCLOMYDRIL OPHTHALMIC (EYE) DROPS 0.2-1 %	Tier 3	
betaxolol ophthalmic (eye) drops 0.5 %	Tier 2	MO	<i>cyclopentolate ophthalmic (eye) drops 0.5 %, 1 %, 2 %</i>	Tier 2	
brimonidine ophthalmic (eye) drops 0.2 %	Tier 2	MO	HOMATROPAIRE OPHTHALMIC (EYE) DROPS 5 %	Tier 2	MO
dorzolamide ophthalmic (eye) drops 2 %	Tier 2	MO	<i>homatropine hbr ophthalmic (eye) drops 5 %</i>	Tier 2	MO
dorzolamide-timolol ophthalmic (eye) drops 22.3-6.8 mg/ml	Tier 2	MO	ISOPTO ATROPINE OPHTHALMIC (EYE) DROPS 1 %	Tier 3	MO
latanoprost ophthalmic (eye) drops 0.005 %	Tier 2	MO	<i>tropicamide ophthalmic (eye) drops 0.5 %, 1 %</i>	Tier 2	
levobunolol ophthalmic (eye) drops 0.5 %	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Eye - Miscellaneous					
Artificial Tears					
LACRISERT OPHTHALMIC (EYE) INSERT 5 MG	Tier 3	MO	<i>d5 %-0.45 % sodium chloride intravenous parenteral solution</i>	Tier 2	
Eye Diagnostic Agents					
BIOGLO OPHTHALMIC (EYE) STRIP 1 MG	Tier 2		<i>dextrose 5%-0.2 % sod chloride intravenous parenteral solution</i>	Tier 2	
GLOSTRIPS OPHTHALMIC (EYE) STRIP 1 MG	Tier 2		Iv Solutions: Dextrose-Water		
BALANCED SALT INTRAOCULAR SOLUTION	Tier 2		<i>dextrose 5 % in water (d5w) intravenous parenteral solution</i>	Tier 2	
Ophth Vasc. Endothelial Growth Factor Antagonists			Gout And Related Diseases		
EYLEA INTRAVITREAL SOLUTION 2 MG/0.05 ML	Tier 6	MO	Colchicine		
Ophth. Vegf-A Receptor Antag. Rcmb Mc Antibody			<i>colchicine oral tablet 0.6 mg</i>	Tier 2	MO
BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05 ML	Tier 6	MO	Hyperuricemia Tx - Purine Inhibitors		
Fluid Replacement			<i>allopurinol oral tablet 100 mg, 300 mg</i>	Tier 2	MO
Iv Solutions: Dextrose-Saline			<i>febuxostat oral tablet 40 mg, 80 mg</i>	Tier 2	ST; MO; QL
<i>d5 % and 0.9 % sodium chloride intravenous parenteral solution</i>	Tier 2		Uricosuric Agents		
			<i>probenecid oral tablet 500 mg</i>	Tier 2	MO
Hematological Disorders			Anticoagulants,Cou marin Type		
			<i>JANTOVEN ORAL TABLET 1 MG, 10 MG, 2 MG, 2.5 MG, 3 MG, 4 MG, 5 MG, 6 MG, 7.5 MG</i>	Tier 2	MO
			<i>warfarin oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antifibrinolytic Agents			HUMATE-P INTRAVENOUS RECON SOLN 1,000-2,400 UNIT, 500-1,200 UNIT	Tier 5	DS
AMICAR ORAL SOLUTION 250 MG/ML (25 %)	Tier 3		KOATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT	Tier 6	DS
<i>aminocaproic acid oral solution 250 mg/ml (25 %)</i>	Tier 2		KOGENATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	Tier 5	DS
<i>aminocaproic acid oral tablet 1,000 mg, 500 mg</i>	Tier 2		KOGENATE FS INTRAVENOUS RECON SOLN 2,000 (+/-) UNIT, 250 (+/-) UNIT	Tier 6	DS
Antihemophilic Factors			KOVALTRY INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	Tier 5	DS
ADVATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 1,500 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	Tier 5	DS	KOVALTRY INTRAVENOUS RECON SOLN 2,000 (+/-) UNIT, 250 (+/-) UNIT	Tier 6	DS
ADVATE INTRAVENOUS RECON SOLN 2,000 (+/-) UNIT, 250 (+/-) UNIT	Tier 6	DS	RECOMBINATE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT	Tier 5	DS
HELIXATE FS INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT, 3,000 (+/-) UNIT, 500 (+/-) UNIT	Tier 5	DS	RECOMBINATE INTRAVENOUS RECON SOLN 250 (+/-) UNIT	Tier 6	DS
HELIXATE FS INTRAVENOUS RECON SOLN 2,000 (+/-) UNIT, 250 (+/-) UNIT	Tier 6	DS			
HEMOFIL M HIGH INTRAVENOUS RECON SOLN 801-1,500 UNIT	Tier 6	DS			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Direct Factor Xa Inhibitors			PROCRIT INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML, 40,000 UNIT/ML	Tier 5	DS
XARELTO DVT-PE TREAT 30D START ORAL TABLETS,DOSE PACK 15 MG (42)- 20 MG (9)	Tier 3				
XARELTO ORAL TABLET 10 MG, 2.5 MG	Tier 3	MO; QL			
Factor IX Complex (Pcc) Preparations			Hemorrhologic Agents		
PROFILNINE INTRAVENOUS RECON SOLN 1,000 (+/-) UNIT	Tier 5	DS	<i>pentoxifylline oral tablet extended release 400 mg</i>	Tier 2	MO
Factor IX Preparations			Heparin And Related Preparations		
ALPHANINE SD INTRAVENOUS RECON SOLN 500 (+/-) UNIT	Tier 6	DS	<i>enoxaparin subcutaneous syringe 100 mg/ml, 120 mg/0.8 ml, 150 mg/ml, 30 mg/0.3 ml, 40 mg/0.4 ml, 60 mg/0.6 ml, 80 mg/0.8 ml</i>	Tier 2	
Hematinics, Other			<i>HEP FLUSH-10 (PF) INTRAVENOUS SOLUTION 10 UNIT/ML</i>	Tier 2	
EPOGEN INJECTION SOLUTION 10,000 UNIT/ML, 2,000 UNIT/ML, 20,000 UNIT/2 ML, 20,000 UNIT/ML, 3,000 UNIT/ML, 4,000 UNIT/ML	Tier 5	DS	<i>heparin (porcine) in 5 % dex intravenous parenteral solution 25,000 unit/500 ml (50 unit/ml)</i>	Tier 2	
			<i>heparin (porcine) injection cartridge 5,000 unit/ml (1 ml)</i>	Tier 2	
			<i>heparin (porcine) injection solution 1,000 unit/ml, 10,000 unit/ml, 20,000 unit/ml, 5,000 unit/ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
heparin lock flush (porcine) intravenous solution 10 unit/ml, 100 unit/ml	Tier 2		Leukocyte (Wbc) Stimulants		
HEPARIN LOCKFLUSH(PORCINE)(PF) INTRAVENOUS SYRINGE 10 UNIT/ML, 100 UNIT/ML	Tier 2		NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6 ML	Tier 5	DS
heparin, porcine (pf) injection solution 1,000 unit/ml	Tier 2		NIVESTYM SUBCUTANEOUS SYRINGE 300 MCG/0.5 ML, 480 MCG/0.8 ML	Tier 5	DS
heparin, porcine (pf) injection syringe 5,000 unit/0.5 ml	Tier 2		Plasma Expanders		
heparin, porcine (pf) intravenous solution 100 unit/ml (1 ml)	Tier 2		hetastarch 6 % in 0.9 % nacl intravenous solution 6 %	Tier 2	
heparin, porcine (pf) intravenous syringe 10 unit/ml, 100 unit/ml	Tier 2		Platelet Aggregation Inhibitors		
LOVENOX SUBCUTANEOUS SYRINGE 100 MG/ML, 120 MG/0.8 ML, 150 MG/ML, 30 MG/0.3 ML, 40 MG/0.4 ML, 60 MG/0.6 ML, 80 MG/0.8 ML	Tier 3		aspirin-dipyridamole oral capsule, er multiphase 12 hr 25-200 mg	Tier 2	MO
Human Monoclonal Antibody Complement(C5) Inhibitor			BRILINTA ORAL TABLET 60 MG, 90 MG	Tier 3	MO
ULTOMIRIS INTRAVENOUS SOLUTION 10 MG/ML, 100 MG/ML	Tier 3	MO	cilostazol oral tablet 100 mg, 50 mg	Tier 2	MO
			clopidogrel oral tablet 75 mg	Tier 2	MO
			dipyridamole oral tablet 25 mg, 50 mg, 75 mg	Tier 2	MO
			prasugrel oral tablet 10 mg, 5 mg	Tier 2	MO
Platelet Reducing Agents					
			anagrelide oral capsule 0.5 mg, 1 mg	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Thrombin Inhibitors, Selective, Direct, & Reversible					Vitamin K Preparations
dabigatran etexilate oral capsule 150 mg	Tier 2	MO	MEPHYTON ORAL TABLET 5 MG	Tier 3	
PRADAXA ORAL CAPSULE 110 MG, 150 MG	Tier 3	MO	phytonadione (vitamin k1) injection solution 10 mg/ml	Tier 5	DS
Thrombolytic Enzymes					phytonadione (vitamin k1) oral tablet 5 mg
ACTIVASE INTRAVENOUS RECON SOLN 100 MG	Tier 3		VITAMIN K1 INJECTION SOLUTION 10 MG/ML	Tier 5	DS
CATHFLO ACTIVASE INTRA-CATHETER RECON SOLN 2 MG	Tier 3		Hormonal Deficiency		
Topical Hemostatics					Androgenic Agents
GELFOAM COMPRESSED SIZE 100 TOPICAL SPONGE 100 CM	Tier 3		ANADROL-50 ORAL TABLET 50 MG	Tier 5	DS
GELFOAM SPONGE SIZE 100 TOPICAL SPONGE 100	Tier 3		ANDROID ORAL CAPSULE 10 MG	Tier 3	MO
GELFOAM SPONGE SIZE 12-7MM TOPICAL SPONGE 12-7 MM	Tier 3		DEPO-TESTOSTERONE INTRAMUSCULAR OIL 100 MG/ML, 200 MG/ML	Tier 3	DS
GELFOAM SPONGE SIZE 50 TOPICAL SPONGE 50	Tier 3		METHITEST ORAL TABLET 10 MG	Tier 3	MO
SURGIFOAM TOPICAL SPONGE 100 , 100 CM, 12-7 MM, 50	Tier 3		<i>methyltestosterone</i> oral capsule 10 mg	Tier 2	MO
THROMBIN-JMI TOPICAL RECON SOLN 20,000 UNIT, 5,000 UNIT	Tier 2		<i>testosterone cypionate</i> intramuscular oil 100 mg/ml, 200 mg/ml	Tier 2	DS
			<i>testosterone transdermal gel in metered-dose pump</i> 20.25 mg/1.25 gram (1.62 %)	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TESTRED ORAL CAPSULE 10 MG	Tier 3	MO	<i>estradiol oral tablet 0.5 mg, 1 mg, 2 mg</i>	Tier 2	MO
Estrogen/Androgen Combinations			<i>estradiol transdermal patch semiweekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	Tier 2	MO
COVARYX H.S. ORAL TABLET 0.625-1.25 MG	Tier 2	MO	<i>estradiol transdermal patch weekly 0.025 mg/24 hr, 0.0375 mg/24 hr, 0.05 mg/24 hr, 0.06 mg/24 hr, 0.075 mg/24 hr, 0.1 mg/24 hr</i>	Tier 2	MO
COVARYX ORAL TABLET 1.25-2.5 MG	Tier 2	MO	<i>estradiol valerate intramuscular oil 20 mg/ml, 40 mg/ml</i>	Tier 2	
EEMT HS ORAL TABLET 0.625-1.25 MG	Tier 2	MO	LYLLANA TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	Tier 2	MO
EEMT ORAL TABLET 1.25-2.5 MG	Tier 2	MO	PREMARIN INJECTION RECON SOLN 25 MG	Tier 3	
<i>estrogens-methyltestosterone oral tablet 0.625-1.25 mg, 1.25-2.5 mg</i>	Tier 2	MO	Progestational Agents		
Estrogenic Agents			<i>medroxyprogesterone oral tablet 10 mg, 2.5 mg, 5 mg</i>	Tier 2	MO
CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.06 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	Tier 3	MO	<i>norethindrone acetate oral tablet 5 mg</i>	Tier 2	MO
DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML	Tier 3		<i>progesterone intramuscular oil 50 mg/ml</i>	Tier 2	
DOTTI TRANSDERMAL PATCH SEMIWEEKLY 0.025 MG/24 HR, 0.0375 MG/24 HR, 0.05 MG/24 HR, 0.075 MG/24 HR, 0.1 MG/24 HR	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
progesterone micronized oral capsule 100 mg, 200 mg	Tier 2	MO	HYQVIA SUBCUTANEOUS SOLUTION 10 GRAM /100 ML (10 %), 2.5 GRAM /25 ML (10 %), 20 GRAM /200 ML (10 %), 30 GRAM /300 ML (10 %), 5 GRAM /50 ML (10 %)	Tier 5	PA; DS
Immunization			Immunosuppression /Modulation		
Antisera			Immunomodulators		
GAMMAKED INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	Tier 3	DS	<i>imiquimod topical cream in packet 5 %</i>	Tier 2	
GAMUNEX-C INJECTION SOLUTION 1 GRAM/10 ML (10 %), 10 GRAM/100 ML (10 %), 2.5 GRAM/25 ML (10 %), 20 GRAM/200 ML (10 %), 5 GRAM/50 ML (10 %)	Tier 3	DS	INTRON A INJECTION RECON SOLN 10 MILLION UNIT (1 ML), 18 MILLION UNIT (1 ML), 50 MILLION UNIT (1 ML)	Tier 6	DS
HIZENTRA SUBCUTANEOUS SOLUTION 1 GRAM/5 ML (20 %), 10 GRAM/50 ML (20 %), 2 GRAM/10 ML (20 %), 4 GRAM/20 ML (20 %)	Tier 3	DS	INTRON A INJECTION SOLUTION 10 MILLION UNIT/ML, 6 MILLION UNIT/ML	Tier 6	DS
HYPERTET (PF) INTRAMUSCULAR SYRINGE 250 UNIT/ML	Tier 3		Immunosupp - Monoclonal Ab Inhibiting T Lymph Fxn		
			SIMULECT INTRAVENOUS RECON SOLN 10 MG	Tier 6	
			Immunosuppressive s		
			<i>azathioprine oral tablet 50 mg</i>	Tier 2	MO
			<i>cyclosporine modified oral capsule 100 mg, 25 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
cyclosporine modified oral solution 100 mg/ml	Tier 2	MO	sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg	Tier 2	MO
GENGRAF ORAL CAPSULE 100 MG, 25 MG	Tier 2	MO	SULFATRIM ORAL SUSPENSION 200-40 MG/5 ML	Tier 2	MO
GENGRAF ORAL SOLUTION 100 MG/ML	Tier 2	MO	Betalactams		
mycophenolate mofetil oral capsule 250 mg	Tier 2	MO	<i>aztreonam injection recon soln 1 gram, 2 gram</i>	Tier 2	
mycophenolate mofetil oral suspension for reconstitution 200 mg/ml	Tier 2	MO	CAYSTON INHALATION SOLUTION FOR NEBULIZATION 75 MG/ML	Tier 5	DS
mycophenolate mofetil oral tablet 500 mg	Tier 2	MO	Carbapenems (Thienamycins)		
NULOJIX INTRAVENOUS RECON SOLN 250 MG	Tier 6	MO	<i>ertapenem injection recon soln 1 gram</i>	Tier 5	DS
sirolimus oral solution 1 mg/ml	Tier 5	MO	<i>imipenem-cilastatin intravenous recon soln 500 mg</i>	Tier 2	
sirolimus oral tablet 0.5 mg, 1 mg, 2 mg	Tier 2	MO	Cephalosporins - 1St Generation		
tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg	Tier 2	MO	<i>cefazolin in dextrose (iso-os) intravenous piggyback 1 gram/50 ml</i>	Tier 2	
Infectious Disease - Bacterial			<i>cefazolin injection recon soln 1 gram, 10 gram, 500 mg</i>	Tier 2	
Absorbable Sulfonamides			<i>cephalexin oral capsule 250 mg, 500 mg</i>	Tier 2	
sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5 ml	Tier 2	MO	<i>cephalexin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Cephalosporins - 2Nd Generation			<i>ceftriaxone in dextrose,iso-os intravenous piggyback 1 gram/50 ml, 2 gram/50 ml</i>	Tier 2	
<i>cefotetan injection recon soln 1 gram, 2 gram</i>	Tier 2		<i>ceftriaxone injection recon soln 1 gram, 10 gram, 2 gram, 250 mg, 500 mg</i>	Tier 2	
<i>cefuroxime axetil oral tablet 250 mg, 500 mg</i>	Tier 2		<i>ceftriaxone intravenous recon soln 1 gram, 2 gram</i>	Tier 2	
<i>cefuroxime sodium injection recon soln 750 mg</i>	Tier 2		CLAFORAN INJECTION RECON SOLN 2 GRAM	Tier 3	
<i>cefuroxime sodium intravenous recon soln 1.5 gram</i>	Tier 2		CLAFORAN INTRAVENOUS RECON SOLN 1 GRAM, 2 GRAM	Tier 3	
Cephalosporins - 3Rd Generation			TAZICEF INJECTION RECON SOLN 2 GRAM, 6 GRAM	Tier 2	
<i>cefdinir oral capsule 300 mg</i>	Tier 2		TAZICEF INTRAVENOUS RECON SOLN 1 GRAM	Tier 3	
<i>cefdinir oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	Tier 2		Cephalosporins - 4Th Generation		
<i>cefixime oral capsule 400 mg</i>	Tier 2		<i>cefepime injection recon soln 1 gram, 2 gram</i>	Tier 2	
<i>cefixime oral suspension for reconstitution 100 mg/5 ml</i>	Tier 2		Chemotherapeutics, Antibacterial, Misc.		
<i>cefotaxime injection recon soln 2 gram</i>	Tier 2		<i>fosfomycin tromethamine oral packet 3 gram</i>	Tier 2	
<i>cefpodoxime oral suspension for reconstitution 100 mg/5 ml</i>	Tier 2		<i>methenamine hippurate oral tablet 1 gram</i>	Tier 2	
<i>ceftazidime injection recon soln 2 gram, 6 gram</i>	Tier 2				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
PRIMSOL ORAL SOLUTION 50 MG/5 ML	Tier 3		ERY-TAB ORAL TABLET,DELAYED RELEASE (DR/EC) 250 MG, 500 MG	Tier 2	
<i>trimethoprim oral tablet 100 mg</i>	Tier 2		ERYTHROCIN INTRAVENOUS RECON SOLN 500 MG	Tier 3	
TRIMPEX ORAL SOLUTION 50 MG/5 ML	Tier 3		<i>erythromycin ethylsuccinate oral suspension for reconstitution 200 mg/5 ml, 400 mg/5 ml</i>	Tier 2	
Macrolides			<i>erythromycin ethylsuccinate oral tablet 400 mg</i>	Tier 2	
<i>azithromycin oral packet 1 gram</i>	Tier 2	MO	<i>erythromycin lactobionate intravenous recon soln 500 mg</i>	Tier 2	
<i>azithromycin oral suspension for reconstitution 100 mg/5 ml, 200 mg/5 ml</i>	Tier 2	MO	<i>erythromycin oral capsule,delayed release(dr/ec) 250 mg</i>	Tier 2	
<i>azithromycin oral tablet 250 mg, 500 mg, 600 mg</i>	Tier 2	MO	<i>erythromycin oral tablet,delayed release(dr/ec) 250 mg, 333 mg, 500 mg</i>	Tier 2	
<i>clarithromycin oral suspension for reconstitution 125 mg/5 ml, 250 mg/5 ml</i>	Tier 2		ZITHROMAX ORAL PACKET 1 GRAM	Tier 3	MO
<i>clarithromycin oral tablet 250 mg, 500 mg</i>	Tier 2		Nitrofuran Derivatives		
E.E.S. 400 ORAL TABLET 400 MG	Tier 2		<i>nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg</i>	Tier 2	
E.E.S. GRANULES ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	Tier 3		<i>nitrofurantoin monohyd/m-cryst oral capsule 100 mg</i>	Tier 2	
ERYPED 200 ORAL SUSPENSION FOR RECONSTITUTION 200 MG/5 ML	Tier 3				
ERYPED 400 ORAL SUSPENSION FOR RECONSTITUTION 400 MG/5 ML	Tier 3				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>nitrofurantoin oral suspension 25 mg/5 ml</i>	Tier 2		<i>amoxicillin-pot clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg</i>	Tier 2	
Oxazolidinones					
<i>linezolid oral suspension for reconstitution 100 mg/5 ml</i>	Tier 5	DS	<i>amoxicillin-pot clavulanate oral tablet, chewable 200-28.5 mg, 400-57 mg</i>	Tier 2	
<i>linezolid oral tablet 600 mg</i>	Tier 2	DS	<i>ampicillin oral capsule 250 mg, 500 mg</i>	Tier 2	
ZYVOX INTRAVENOUS PIGGYBACK 200 MG/100 ML	Tier 5	DS	<i>ampicillin sodium injection recon soln 1 gram, 10 gram, 2 gram, 500 mg</i>	Tier 2	
Penicillins					
<i>amoxicillin oral capsule 250 mg, 500 mg</i>	Tier 2		<i>ampicillin-sulbactam injection recon soln 1.5 gram, 3 gram</i>	Tier 2	
<i>amoxicillin oral suspension for reconstitution 125 mg/5 ml, 200 mg/5 ml, 250 mg/5 ml, 400 mg/5 ml</i>	Tier 2		<i>ampicillin-sulbactam intravenous recon soln 1.5 gram, 3 gram</i>	Tier 2	
<i>amoxicillin oral tablet 500 mg, 875 mg</i>	Tier 2		<i>AUGMENTIN ORAL SUSPENSION FOR RECONSTITUTION 125-31.25 MG/5 ML</i>	Tier 3	
<i>amoxicillin oral tablet, chewable 125 mg, 250 mg</i>	Tier 2		<i>BICILLIN L-A INTRAMUSCULAR SYRINGE 1,200,000 UNIT/2 ML, 2,400,000 UNIT/4 ML, 600,000 UNIT/ML</i>	Tier 3	
<i>amoxicillin-pot clavulanate oral suspension for reconstitution 200-28.5 mg/5 ml, 250-62.5 mg/5 ml, 400-57 mg/5 ml, 600-42.9 mg/5 ml</i>	Tier 2		<i>dicloxacillin oral capsule 250 mg, 500 mg</i>	Tier 2	
			<i>oxacillin in dextrose(iso-osm) intravenous piggyback 2 gram/50 ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
penicillin g potassium injection recon soln 20 million unit, 5 million unit	Tier 2		CIPRO ORAL SUSPENSION,MICROCAPSULE RECON 250 MG/5 ML	Tier 3	
penicillin g procaine intramuscular syringe 1.2 million unit/2 ml, 600,000 unit/ml	Tier 2		ciprofloxacin hcl oral tablet 100 mg, 250 mg, 500 mg, 750 mg	Tier 2	
penicillin g sodium injection recon soln 5 million unit	Tier 2		ciprofloxacin in 5 % dextrose intravenous piggyback 200 mg/100 ml, 400 mg/200 ml	Tier 2	
penicillin v potassium oral recon soln 125 mg/5 ml, 250 mg/5 ml	Tier 2		ciprofloxacin oral suspension,microcapsule recon 250 mg/5 ml, 500 mg/5 ml	Tier 2	
penicillin v potassium oral tablet 250 mg, 500 mg	Tier 2		levofloxacin in d5w intravenous piggyback 500 mg/100 ml, 750 mg/150 ml	Tier 2	
PFIZERPEN-G INJECTION RECON SOLN 20 MILLION UNIT, 5 MILLION UNIT	Tier 2		levofloxacin oral solution 250 mg/10 ml	Tier 2	
piperacillin-tazobactam intravenous recon soln 2.25 gram, 3.375 gram, 4.5 gram	Tier 2		levofloxacin oral tablet 250 mg, 500 mg, 750 mg	Tier 2	
ZOSYN IN DEXTROSE (ISO-OSM) INTRAVENOUS PIGGYBACK 2.25 GRAM/50 ML, 3.375 GRAM/50 ML, 4.5 GRAM/100 ML	Tier 3		moxifloxacin oral tablet 400 mg	Tier 2	
Quinolones			moxifloxacin-sod.chloride(iso) intravenous piggyback 400 mg/250 ml	Tier 2	
Tetracyclines			DOXY-100 INTRAVENOUS RECON SOLN 100 MG	Tier 2	MO
AVELOX IN NACL (ISO-OSMOTIC) INTRAVENOUS PIGGYBACK 400 MG/250 ML	Tier 3				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>doxycycline hyclate intravenous recon soln 100 mg</i>	Tier 2	MO	<i>fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg</i>	Tier 2	
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	Tier 2	MO	<i>flucytosine oral capsule 250 mg, 500 mg</i>	Tier 5	DS
<i>doxycycline monohydrate oral suspension for reconstitution 25 mg/5 ml</i>	Tier 2	MO	<i>ketoconazole oral tablet 200 mg</i>	Tier 2	PA
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg</i>	Tier 2	MO	<i>posaconazole oral tablet, delayed release (dr/ec) 100 mg</i>	Tier 5	PA; DS
<i>minocycline oral capsule 100 mg, 50 mg, 75 mg</i>	Tier 2	MO	<i>terbinafine hcl oral tablet 250 mg</i>	Tier 2	
<i>minocycline oral tablet 100 mg</i>	Tier 2	MO	<i>voriconazole oral suspension for reconstitution 200 mg/5 ml (40 mg/ml)</i>	Tier 2	
MONDOXYNE NL ORAL CAPSULE 100 MG	Tier 2	MO	<i>voriconazole oral tablet 200 mg, 50 mg</i>	Tier 2	
<i>tetracycline oral capsule 250 mg, 500 mg</i>	Tier 2		Antifungal Antibiotics		
Infectious Disease - Fungal			<i>AMBISOME INTRAVENOUS SUSPENSION FOR RECONSTITUTION 50 MG</i>	Tier 5	DS
Antifungal Agents			<i>amphotericin b injection recon soln 50 mg</i>	Tier 5	DS
<i>clotrimazole mucous membrane troche 10 mg</i>	Tier 2		<i>amphotericin b liposome intravenous suspension for reconstitution 50 mg</i>	Tier 5	DS
<i>fluconazole in nacl (iso-osm) intravenous piggyback 200 mg/100 ml</i>	Tier 2		<i>caspofungin intravenous recon soln 50 mg, 70 mg</i>	Tier 5	DS
<i>fluconazole oral suspension for reconstitution 10 mg/ml, 40 mg/ml</i>	Tier 2		<i>griseofulvin microsize oral suspension 125 mg/5 ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
griseofulvin microsize oral tablet 500 mg	Tier 2		THALOMID ORAL CAPSULE 100 MG, 150 MG, 200 MG, 50 MG	Tier 3	DS
griseofulvin ultramicrosize oral tablet 125 mg, 250 mg	Tier 2		Anti-Mycobacterium Agents		
nystatin oral suspension 100,000 unit/ml	Tier 2		ethambutol oral tablet 100 mg, 400 mg	Tier 2	
nystatin oral tablet 500,000 unit	Tier 2		isoniazid oral solution 50 mg/5 ml	Tier 2	
Infectious Disease - Miscellaneous			isoniazid oral tablet 100 mg, 300 mg	Tier 2	
Aminoglycosides			pyrazinamide oral tablet 500 mg	Tier 2	
amikacin injection solution 1,000 mg/4 ml, 500 mg/2 ml	Tier 2		Antitubercular Antibiotics		
gentamicin injection solution 20 mg/2 ml, 40 mg/ml	Tier 2		rifampin oral capsule 150 mg, 300 mg	Tier 2	
gentamicin sulfate (ped) (pf) injection solution 20 mg/2 ml	Tier 2		Lincosamides		
neomycin oral tablet 500 mg	Tier 2		clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg	Tier 2	
streptomycin intramuscular recon soln 1 gram	Tier 2		clindamycin palmitate hcl oral recon soln 75 mg/5 ml	Tier 2	
tobramycin in 0.225 % nacl inhalation solution for nebulization 300 mg/5 ml	Tier 2	DS	CLINDAMYCIN PEDIATRIC ORAL RECON SOLN 75 MG/5 ML	Tier 2	
tobramycin sulfate injection solution 10 mg/ml, 40 mg/ml	Tier 2		clindamycin phosphate injection solution 150 mg/ml	Tier 2	
Antileprotics			Vancomycin And Derivatives		
dapsone oral tablet 100 mg, 25 mg	Tier 2	MO	FIRVANQ ORAL RECON SOLN 25 MG/ML, 50 MG/ML	Tier 3	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>vancomycin in dextrose 5 % intravenous piggyback 1 gram/200 ml, 500 mg/100 ml</i>	Tier 2		<i>chloroquine phosphate oral tablet 250 mg</i>	Tier 2	
<i>vancomycin intravenous recon soln 10 gram, 5 gram, 500 mg</i>	Tier 2		<i>chloroquine phosphate oral tablet 500 mg</i>	Tier 2	MO
<i>vancomycin oral capsule 125 mg, 250 mg</i>	Tier 2		DARAPRIM ORAL TABLET 25 MG	Tier 5	DS
<i>vancomycin oral recon soln 25 mg/ml, 50 mg/ml</i>	Tier 2		<i>hydroxychloroquine oral tablet 200 mg</i>	Tier 2	MO
Infectious Disease - Parasitic			<i>mefloquine oral tablet 250 mg</i>	Tier 2	MO
Amebacides			<i>primaquine oral tablet 26.3 mg</i>	Tier 3	
<i>paromomycin oral capsule 250 mg</i>	Tier 2		<i>pyrimethamine oral tablet 25 mg</i>	Tier 5	DS
Anaerobic Antiprotozoal-Antibacterial Agents			Antiprotozoal Drugs,Miscellaneous		
<i>metronidazole oral capsule 375 mg</i>	Tier 2		<i>atovaquone oral suspension 750 mg/5 ml</i>	Tier 5	DS
<i>metronidazole oral tablet 250 mg, 500 mg</i>	Tier 2		NEBUPENT INHALATION RECON SOLN 300 MG	Tier 3	MO
Anthelmintics			<i>pentamidine inhalation recon soln 300 mg</i>	Tier 2	MO
<i>albendazole oral tablet 200 mg</i>	Tier 2		<i>pentamidine injection recon soln 300 mg</i>	Tier 2	
<i>ivermectin oral tablet 3 mg</i>	Tier 2		Infectious Disease - Viral		
<i>praziquantel oral tablet 600 mg</i>	Tier 2		Antiretroviral-Integrase Inhibitor And Nnrti Comb.		
Antimalarial Drugs			JULUCA ORAL TABLET 50-25 MG	Tier 5	MO
<i>atovaquone-proguanil oral tablet 250-100 mg, 62.5-25 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antiretroviral-Integrase Inhibitor And Nrti Comb.			<i>oseltamivir oral capsule 30 mg, 45 mg, 75 mg</i>	Tier 2	
DOVATO ORAL TABLET 50-300 MG	Tier 5	MO	<i>oseltamivir oral suspension for reconstitution 6 mg/ml</i>	Tier 2	
Antiviral - Main Protease (Mpro) Inhibitor			<i>rimantadine oral tablet 100 mg</i>	Tier 2	
PAXLOVID ORAL TABLETS,DOSE PACK 150-100 MG, 300 MG (150 MG X 2)-100 MG	Tier 3	QL; Age	<i>valacyclovir oral tablet 1 gram, 500 mg</i>	Tier 2	MO
Antivirals, General			<i>valganciclovir oral recon soln 50 mg/ml</i>	Tier 5	DS
<i>acyclovir oral capsule 200 mg</i>	Tier 2	MO	<i>valganciclovir oral tablet 450 mg</i>	Tier 5	DS
<i>acyclovir oral suspension 200 mg/5 ml</i>	Tier 2	MO	Antivirals, Hiv-Spec, Non-Peptidic Protease Inhib		
<i>acyclovir oral tablet 400 mg, 800 mg</i>	Tier 2	MO	APTIVUS (WITH VITAMIN E) ORAL SOLUTION 100 MG/ML	Tier 3	MO
<i>acyclovir sodium intravenous recon soln 1,000 mg</i>	Tier 2		APTIVUS ORAL CAPSULE 250 MG	Tier 3	MO
<i>acyclovir sodium intravenous solution 50 mg/ml</i>	Tier 2		<i>darunavir oral tablet 600 mg, 800 mg</i>	Tier 5	MO
<i>famciclovir oral tablet 125 mg, 250 mg, 500 mg</i>	Tier 2	MO	PREZISTA ORAL TABLET 150 MG, 75 MG	Tier 5	MO
FLUMADINE ORAL TABLET 100 MG	Tier 3		Antivirals, Hiv-Spec, Nucleoside-Nucleotide Analog		
<i>foscarnet intravenous solution 24 mg/ml</i>	Tier 2		CIMDUO ORAL TABLET 300-300 MG	Tier 5	MO
FOSCAVIR INTRAVENOUS SOLUTION 24 MG/ML	Tier 3		<i>emtricitabine-tenofovir (tdf) oral tablet 200-300 mg</i>	Tier 2	MO; \$0 COPAY IF USED FOR PREVENTION OF HIV

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TEMIXYS ORAL TABLET 300-300 MG	Tier 5	MO	<i>nevirapine oral tablet 200 mg</i>	Tier 2	MO
Antivirals, Hiv-Specific, Nucleoside Analog, Rti Comb			Antivirals, Hiv-Specific, Nucleoside Analog, Rti		
<i>abacavir-lamivudine oral tablet 600-300 mg</i>	Tier 5	MO	<i>abacavir oral solution 20 mg/ml</i>	Tier 2	MO
<i>abacavir-lamivudine-zidovudine oral tablet 300-150-300 mg</i>	Tier 5	MO	<i>abacavir oral tablet 300 mg</i>	Tier 2	MO
<i>lamivudine-zidovudine oral tablet 150-300 mg</i>	Tier 2	MO	<i>didanosine oral capsule, delayed release(dr/ec) 250 mg, 400 mg</i>	Tier 2	MO
Antivirals, Hiv-Specific, Ccr5 Co-Receptor Antag.			<i>emtricitabine oral capsule 200 mg</i>	Tier 2	MO
<i>maraviroc oral tablet 150 mg, 300 mg</i>	Tier 5	MO	EMTRIVA ORAL CAPSULE 200 MG	Tier 3	MO
SELZENTRY ORAL TABLET 25 MG, 75 MG	Tier 5	MO	<i>lamivudine oral solution 10 mg/ml</i>	Tier 2	MO
Antivirals, Hiv-Specific, Non-Nucleoside, Rti			<i>lamivudine oral tablet 150 mg, 300 mg</i>	Tier 2	MO
EDURANT ORAL TABLET 25 MG	Tier 5	MO	<i>stavudine oral capsule 15 mg, 20 mg, 30 mg, 40 mg</i>	Tier 2	MO
<i>efavirenz oral capsule 200 mg, 50 mg</i>	Tier 2	MO	<i>zidovudine oral capsule 100 mg</i>	Tier 2	MO
<i>efavirenz oral tablet 600 mg</i>	Tier 2	MO	<i>zidovudine oral syrup 10 mg/ml</i>	Tier 2	MO
<i>etravirine oral tablet 100 mg, 200 mg</i>	Tier 5	MO	<i>zidovudine oral tablet 300 mg</i>	Tier 2	MO
INTELENCE ORAL TABLET 25 MG	Tier 3	MO	Antivirals, Hiv-Specific, Nucleotide Analog, Rti		
<i>nevirapine oral suspension 50 mg/5 ml</i>	Tier 2	MO	<i>tenofovir disoproxil fumarate oral tablet 300 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antivirals, Hiv-Specific, Protease Inhibitor Comb					Artv Cmb Nucleoside,Nucleotide,&Non-Nucleoside Rti
<i>lopinavir-ritonavir oral solution 400-100 mg/5 ml</i>	Tier 5	MO	COMPLERA ORAL TABLET 200-25-300 MG	Tier 5	MO
<i>lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg</i>	Tier 5	MO	<i>efavirenz-lamivu-tenofovir disop oral tablet 400-300-300 mg, 600-300-300 mg</i>	Tier 2	MO
Antivirals, Hiv-Specific, Protease Inhibitors					ODEFSEY ORAL TABLET 200-25-25 MG
<i>atazanavir oral capsule 150 mg, 200 mg, 300 mg</i>	Tier 2	MO	SYMFY LO ORAL TABLET 400-300-300 MG	Tier 3	MO
<i>fosamprenavir oral tablet 700 mg</i>	Tier 2	MO	SYMFY ORAL TABLET 600-300-300 MG	Tier 3	MO
<i>INVIRASE ORAL TABLET 500 MG</i>	Tier 5	MO	Arv Cmb- Nrti,N(T)Rti, Integrase Inhibitor		
<i>ritonavir oral tablet 100 mg</i>	Tier 2	MO	BIKTARVY ORAL TABLET 50-200-25 MG	Tier 3	MO
<i>VIRACEPT ORAL TABLET 250 MG, 625 MG</i>	Tier 5	MO	GENVOYA ORAL TABLET 150-150-200-10 MG	Tier 3	MO
Antivirals,Hiv-1 Integrase Strand Transfer Inhibtr					Hep C - Ns5a, Ns3/4A, Nucleotide Ns5b Inhib Combo
<i>ISENTRESS ORAL TABLET 400 MG</i>	Tier 5	MO	VOSEVI ORAL TABLET 400-100-100 MG	Tier 3	PA; DS
<i>TIVICAY ORAL TABLET 10 MG, 25 MG, 50 MG</i>	Tier 5	MO	Hep C Virus - Ns5a & Ns5b Polymerase Inhib. Combo.		
<i>TIVICAY PD ORAL TABLET FOR SUSPENSION 5 MG</i>	Tier 5	MO	<i>ledipasvir-sofosbuvir oral tablet 90-400 mg</i>	Tier 5	PA; DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use		
sofosbuvir-velpatasvir oral tablet 400-100 mg	Tier 5	PA; DS	Inflammatory Disease				
Hep C					Anti-Arthritic And Chelating Agents		
Virus,Nucleotide Analog Ns5b Polymerase Inh			penicillamine oral capsule 250 mg	Tier 2	MO		
SOVALDI ORAL TABLET 400 MG	Tier 3	DS	Anti-Flam. Interleukin-1 Receptor Antagonist				
Hepatitis B Treatment Agents					KINERET SUBCUTANEOUS SYRINGE 100 MG/0.67 ML	Tier 5	DS
adefovir oral tablet 10 mg	Tier 2	DS	Anti-Inflammatory Tumor Necrosis Factor Inhibitor				
entecavir oral tablet 0.5 mg, 1 mg	Tier 2	MO	AMJEVITA(CF) AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 40 MG/0.8 ML	Tier 3	PA; MO		
EPIVIR HBV ORAL SOLUTION 25 MG/5 ML (5 MG/ML)	Tier 3	MO	AMJEVITA(CF) SUBCUTANEOUS SYRINGE 10 MG/0.2 ML, 20 MG/0.4 ML, 40 MG/0.8 ML	Tier 3	PA; MO		
lamivudine oral tablet 100 mg	Tier 2	MO	ENBREL SUBCUTANEOUS RECON SOLN 25 MG (1 ML)	Tier 5	PA; DS		
Hepatitis C Treatment Agents					ENBREL SUBCUTANEOUS SYRINGE 25 MG/0.5 ML (0.5), 50 MG/ML (1 ML)	Tier 5	PA; DS
PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML	Tier 5	DS	ENBREL SURECLICK SUBCUTANEOUS PEN INJECTOR 50 MG/ML (1 ML)	Tier 5	PA; DS		
PEGASYS SUBCUTANEOUS SYRINGE 180 MCG/0.5 ML	Tier 5	DS					
RIBASPHERE ORAL CAPSULE 200 MG	Tier 2						
ribavirin oral capsule 200 mg	Tier 2						
ribavirin oral tablet 200 mg	Tier 2						

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
HUMIRA(CF) SUBCUTANEOUS SYRINGE KIT 10 MG/0.1 ML	Tier 5	PA; DS	ORENCIA SUBCUTANEOUS SYRINGE 125 MG/ML	Tier 5	PA; MO
INFLECTRA INTRAVENOUS RECON SOLN 100 MG	Tier 6	DS	Bradykinin B2 Receptor Antagonists		
Anti-Inflammatory, Pyrimidine Synthesis Inhibitor			<i>icatibant</i> <i>subcutaneous syringe 30 mg/3 ml</i>	Tier 5	DS; QL
<i>leflunomide oral tablet 10 mg, 20 mg</i>	Tier 2	MO	SAJAZIR SUBCUTANEOUS SYRINGE 30 MG/3 ML	Tier 5	DS; QL
Anti-Inflammatory, Phosp hodiesterase-4(Pde4) Inhib.			Glucocorticoids		
OTEZLA ORAL TABLET 30 MG	Tier 5	DS	A-HYDROCORT INJECTION RECON SOLN 100 MG	Tier 2	
OTEZLA STARTER ORAL TABLETS,DOSE PACK 10 MG (4)-20 MG (4)-30 MG (47)	Tier 5	DS	<i>betamethasone acet,sod phos injection suspension 6 mg/ml</i>	Tier 2	
Antinflammatory, Sel.Costim.Mod., T-Cell Inhibitor			<i>budesonide oral capsule,delayed,extended.release 3 mg</i>	Tier 2	
ORENCIA (WITH MALTOSE) INTRAVENOUS RECON SOLN 250 MG	Tier 6	DS	<i>cortisone oral tablet 25 mg</i>	Tier 2	
ORENCIA CLICKJECT SUBCUTANEOUS AUTO-INJECTOR 125 MG/ML	Tier 5	PA; MO	DECADRON ORAL ELIXIR 0.5 MG/5 ML	Tier 2	
			DECADRON ORAL TABLET 0.5 MG, 0.75 MG, 4 MG, 6 MG	Tier 2	
			DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML, 80 MG/ML	Tier 3	
			DEXAMETHASONE INTENSOL ORAL DROPS 1 MG/ML	Tier 3	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
dexamethasone oral elixir 0.5 mg/5 ml	Tier 2		<i>prednisolone sodium phosphate oral solution 15 mg/5 ml (3 mg/ml), 5 mg base/5 ml (6.7 mg/5 ml)</i>	Tier 2	
dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg	Tier 2		<i>prednisone oral solution 5 mg/5 ml</i>	Tier 2	MO
dexamethasone sodium phosphate injection solution 10 mg/ml, 4 mg/ml	Tier 2		<i>prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg</i>	Tier 2	MO
hydrocortisone oral tablet 10 mg, 20 mg, 5 mg	Tier 2	MO	<i>prednisone oral tablets, dose pack 5 mg</i>	Tier 2	MO
KENALOG INJECTION SUSPENSION 10 MG/ML	Tier 6		SOLU-CORTEF ACT-O-VIAL (PF) INJECTION RECON SOLN 1,000 MG/8 ML, 100 MG/2 ML, 250 MG/2 ML, 500 MG/4 ML	Tier 3	
MEDROL ORAL TABLET 2 MG	Tier 3		SOLU-CORTEF INJECTION RECON SOLN 100 MG	Tier 3	
<i>methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml</i>	Tier 2		SOLU-MEDROL (PF) INJECTION RECON SOLN 125 MG/2 ML, 40 MG/ML	Tier 3	
<i>methylprednisolone oral tablet 16 mg, 4 mg</i>	Tier 2		SOLU-MEDROL (PF) INTRAVENOUS RECON SOLN 1,000 MG/8 ML	Tier 3	
<i>methylprednisolone oral tablets, dose pack 4 mg</i>	Tier 2		SOLU-MEDROL INTRAVENOUS RECON SOLN 500 MG	Tier 3	
<i>methylprednisolone sodium succ injection recon soln 125 mg, 40 mg</i>	Tier 2		<i>triamcinolone acetonide injection suspension 40 mg/ml</i>	Tier 6	
MILLIPRED ORAL TABLET 5 MG	Tier 3				
<i>prednisolone oral solution 15 mg/5 ml</i>	Tier 2				
<i>prednisolone oral tablet 5 mg</i>	Tier 2				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Gold Salts					
RIDAURA ORAL CAPSULE 3 MG	Tier 3	MO	<i>etodolac oral tablet 400 mg, 500 mg</i>	Tier 2	MO
Interleukin-6 (IL-6) Receptor Inhibitors					
ACTEMRA ACTPEN SUBCUTANEOUS PEN INJECTOR 162 MG/0.9 ML	Tier 5	PA; DS	<i>ibuprofen oral tablet 400 mg, 600 mg, 800 mg</i>	Tier 2	MO
ACTEMRA SUBCUTANEOUS SYRINGE 162 MG/0.9 ML	Tier 5	PA; DS	<i>indomethacin oral capsule 25 mg, 50 mg</i>	Tier 2	
Janus Kinase (Jak) Inhibitors					
XELJANZ ORAL SOLUTION 1 MG/ML	Tier 5	PA; DS	<i>indomethacin oral capsule, extended release 75 mg</i>	Tier 2	
XELJANZ ORAL TABLET 10 MG	Tier 3	DS; QL	<i>ketoprofen oral capsule 50 mg, 75 mg</i>	Tier 2	
XELJANZ ORAL TABLET 5 MG	Tier 5	PA; DS; QL	<i>ketorolac injection solution 15 mg/ml, 30 mg/ml (1 ml)</i>	Tier 2	
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HR 11 MG	Tier 5	PA; DS	<i>meloxicam oral tablet 15 mg, 7.5 mg</i>	Tier 2	MO
Mineralocorticoids					
<i>fludrocortisone oral tablet 0.1 mg</i>	Tier 2	MO	<i>nabumetone oral tablet 500 mg, 750 mg</i>	Tier 2	MO
Nsaids, Cyclooxygenase 2 Inhibitor - Type					
celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg	Tier 2	MO	<i>naproxen oral tablet 250 mg, 375 mg, 500 mg</i>	Tier 2	MO
Nsaids, Cyclooxygenase Inhibitor-Type					
<i>etodolac oral capsule 200 mg, 300 mg</i>	Tier 2	MO	<i>sulindac oral tablet 150 mg, 200 mg</i>	Tier 2	
Local Anesthesia					
Local Anesthetics					
<i>bupivacaine (pf) injection solution 0.25 % (2.5 mg/ml), 0.5 % (5 mg/ml), 0.75 % (7.5 mg/ml)</i>			Tier 2		
<i>bupivacaine hcl injection solution 0.25 % (2.5 mg/ml)</i>			Tier 2		

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
bupivacaine hcl injection solution 0.5 % (5 mg/ml)	Tier 6		SENSORCAINE-EPINEPHRINE INJECTION SOLUTION 0.25 %-1:200,000, 0.5 %-1:200,000	Tier 2	
bupivacaine-epinephrine (pf) injection solution 0.25 %-1:200,000, 0.5 %-1:200,000	Tier 2		SENSORCAINE-MPF INJECTION SOLUTION 0.75 % (7.5 MG/ML)	Tier 2	
bupivacaine-epinephrine injection solution 0.25 %-1:200,000, 0.5 %-1:200,000	Tier 2		SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.25 %-1:200,000	Tier 2	
lidocaine (pf) injection solution 10 mg/ml (1 %)	Tier 2		VIVACAINE INJECTION CARTRIDGE 0.5 %-1:200,000	Tier 2	
lidocaine hcl injection solution 10 mg/ml (1 %), 20 mg/ml (2 %)	Tier 2		XYLOCAINE-MPF INJECTION SOLUTION 10 MG/ML (1 %)	Tier 3	
lidocaine hcl mucous membrane solution 2 %, 4 % (40 mg/ml)	Tier 2	MO	Lower Gastrointestinal Disorders - Bowel Inflamat		
LIDOCAINE VISCOUS MUCOUS MEMBRANE SOLUTION 2 %	Tier 2	MO	Chronic Inflam. Colon Dx, 5-A-Salicylat,Rectal Tx		
lidocaine-epinephrine injection solution 0.5 %-1:200,000, 1 %-1:100,000, 2 %-1:100,000	Tier 2		mesalamine rectal enema 4 gram/60 ml	Tier 2	MO
MARCAINE-EPINEPHRINE INJECTION CARTRIDGE 0.5 %-1:200,000	Tier 2		mesalamine rectal suppository 1,000 mg	Tier 2	MO
NESACAINE INJECTION SOLUTION 10 MG/ML (1 %), 20 MG/ML (2 %)	Tier 3		Drug Tx-Chronic Inflam. Colon Dx,5-Aminosalicylat		
			balsalazide oral capsule 750 mg	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>mesalamine oral capsule, extended release 500 mg</i>	Tier 2	MO	Rectal/Lower Bowel Prep., Glucocort. (Non-Hemorr)		
<i>mesalamine oral tablet, delayed release (dr/lec) 1.2 gram</i>	Tier 2	MO	COLOCORT RECTAL ENEMA 100 MG/60 ML	Tier 2	MO
PENTASA ORAL CAPSULE, EXTENDED RELEASE 250 MG, 500 MG	Tier 3	MO	<i>hydrocortisone rectal enema 100 mg/60 ml</i>	Tier 2	MO
<i>sulfasalazine oral tablet 500 mg</i>	Tier 2	MO	Lower Gastrointestinal Disorders - Other		
<i>sulfasalazine oral tablet, delayed release (dr/lec) 500 mg</i>	Tier 2	MO	Ammonia Inhibitors		
Integrin Receptor Antagonist, Monoclonal Antibody			ENULOSE ORAL SOLUTION 10 GRAM/15 ML	Tier 2	MO
ENTYVIO PEN SUBCUTANEOUS PEN INJECTOR 108 MG/0.68 ML	Tier 5	DS	GENERLAC ORAL SOLUTION 10 GRAM/15 ML	Tier 2	MO
Irritable Bowel Agents, Guanylate Cylase-C Agonist			Antidiarrheals		
TRULANCE ORAL TABLET 3 MG	Tier 3	PA; MO	<i>diphenoxylate-atropine oral liquid 2.5-0.025 mg/5 ml</i>	Tier 2	
Rectal Preparations			<i>diphenoxylate-atropine oral tablet 2.5-0.025 mg</i>	Tier 2	
ANUCORT-HC RECTAL SUPPOSITORY 25 MG	Tier 2	MO	Bile Salts		
<i>hydrocortisone acetate rectal suppository 25 mg</i>	Tier 2	MO	<i>ursodiol oral tablet 250 mg, 500 mg</i>	Tier 2	MO
			Laxatives And Cathartics		
			COLYTE WITH FLAVOR PACKS ORAL RECON SOLN 240-22.72-6.72 -5.84 GRAM	Tier 1	
			CONSTULOSE ORAL SOLUTION 10 GRAM/15 ML	Tier 2	MO

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GAVILYTE-C ORAL RECON SOLN 240-22.72-6.72 -5.84 GRAM	Tier 1		ACCU-CHEK SOFTCLIX LANCETS	Tier 7	MO; QL
GAVILYTE-G ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	Tier 1		ACTI-LANCE LANCETS 23 GAUGE, 28 GAUGE	Tier 7	MO; QL
GOLYTELY ORAL RECON SOLN 236-22.74-6.74 -5.86 GRAM	Tier 1		ADVANCED TRAVEL LANCETS 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
<i>lactulose oral solution 10 gram/15 ml</i>	Tier 2	MO	ADVOCATE LANCET 21 GAUGE, 23 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
<i>lubiprostone oral capsule 24 mcg, 8 mcg</i>	Tier 2	PA; MO	ALTERNATE SITE LANCET 26 GAUGE	Tier 7	MO; QL
<i>peg 3350-electrolytes oral recon soln 236-22.74-6.74 -5.86 gram, 240-22.72-6.72 -5.84 gram</i>	Tier 1		ASSURE HAEMOLANCE PLUS 18 GAUGE, 21 GAUGE, 28 GAUGE	Tier 7	MO; QL
Medical Supplies			ASSURE LANCE 28 GAUGE	Tier 7	MO; QL
Durable Medical Equipment,Misc(Group 1)			ASSURE LANCE PLUS 21 GAUGE, 30 GAUGE	Tier 7	MO; QL
1ST TIER UNILET COMFORTOUCH 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	BD MICROTAINER LANCET 21 GAUGE, 30 GAUGE	Tier 7	MO; QL
2-IN-1 LANCET DEVICE 30 GAUGE	Tier 7	MO; QL	BD ULTRA FINE LANCETS 33 GAUGE	Tier 7	MO; QL
ACCU-CHEK FASTCLIX LANCET DRUM	Tier 7	MO; QL	BD ULTRA-FINE II LANCETS 30 GAUGE	Tier 7	MO; QL
ACCU-CHEK SAFE-T-PRO 23 GAUGE	Tier 7	MO; QL	BULLSEYE MINI SAFETY LANCETS 21 GAUGE, 28 GAUGE	Tier 7	MO; QL
ACCU-CHEK SAFE-T-PRO PLUS 23 GAUGE	Tier 7	MO; QL	BUTTERFLY TOUCH LANCET 30 GAUGE	Tier 7	MO; QL
			CAREONE THIN LANCET	Tier 7	MO; QL

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CAREONE ULTRA THIN LANCET	Tier 7	MO; QL	EASY TOUCH SAFETY LANCETS 21 GAUGE, 23 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE, 32 GAUGE	Tier 7	MO; QL
CARESENS LANCETS 30 GAUGE	Tier 7	MO; QL	EASY TOUCH TWIST LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE, 32 GAUGE, 33 GAUGE	Tier 7	MO; QL
CARETOUCH SAFETY LANCETS 26 GAUGE, 28 GAUGE	Tier 7	MO; QL	EASY TWIST AND CAP LANCETS 28 GAUGE	Tier 7	MO; QL
CARETOUCH TWIST LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL	EMBRACE LANCETS 30 GAUGE	Tier 7	MO; QL
CLEVER CHEK LANCETS 30 GAUGE	Tier 7	MO; QL	EMBRACE SAFETY LANCET 21 GAUGE, 28 GAUGE	Tier 7	MO; QL
COAGUCHEK LANCETS	Tier 7	MO; QL	E-Z JECT LANCETS , 26 GAUGE, 30 GAUGE, 32 GAUGE, 33 GAUGE	Tier 7	MO; QL
COLOR LANCETS 21 GAUGE	Tier 7	MO; QL	E-Z JECT THIN LANCETS 28 GAUGE	Tier 7	MO; QL
COMFORT EZ LANCETS 21 GAUGE, 23 GAUGE, 28 GAUGE	Tier 7	MO; QL	EZ SMART LANCETS 28 GAUGE	Tier 7	MO; QL
COMFORT LANCETS	Tier 7	MO; QL	EZ-LETS 26 GAUGE	Tier 7	MO; QL
COMFORT TOUCH PLUS SAFETY LANC 30 GAUGE	Tier 7	MO; QL	FIFTY50 SAFETY SEAL LANCETS 30 GAUGE, 32 GAUGE	Tier 7	MO; QL
COMFORT TOUCH ULT THIN LANCETS 31 GAUGE	Tier 7	MO; QL	FINE 30 UNIVERSAL LANCETS 30 GAUGE	Tier 7	MO; QL
DROPLET LANCETS 30 GAUGE	Tier 7	MO; QL	FINGERSTIX LANCETS	Tier 7	MO; QL
EASY COMFORT LANCETS 30 GAUGE	Tier 7	MO; QL	FORACARE LANCETS 30 GAUGE	Tier 7	MO; QL
EASY TOUCH LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE, 32 GAUGE	Tier 7	MO; QL	FREESTYLE LANCETS 28 GAUGE	Tier 7	MO; QL

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FREESTYLE UNISTIK 2	Tier 7	MO; QL	MEDLANCE PLUS LANCETS 21 GAUGE, 30 GAUGE	Tier 7	MO; QL
GLUCOCOM LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL	MICRO THIN LANCETS 33 GAUGE	Tier 7	MO; QL
GOJJI LANCETS 30 GAUGE	Tier 7	MO; QL	MICROLET LANCET	Tier 7	MO; QL
HEALTHY ACCENTS UNILET LANCET 30 GAUGE	Tier 7	MO; QL	MOBILE LANCETS 30 GAUGE	Tier 7	MO; QL
INCONTROL SUPER THIN LANCETS 30 GAUGE	Tier 7	MO; QL	MONOLET LANCETS 21 GAUGE	Tier 7	MO; QL
INCONTROL ULTRA THIN LANCETS 28 GAUGE	Tier 7	MO; QL	MONOLET THIN LANCETS 28 GAUGE	Tier 7	MO; QL
INJECT EASE LANCETS 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	MYGLUCOHEALTH LANCETS 30 GAUGE	Tier 7	MO; QL
INVACARE LANCETS 30 GAUGE	Tier 7	MO; QL	NOVA SAFETY LANCETS 23 GAUGE, 28 GAUGE	Tier 7	MO; QL
<i>lancets , 21 gauge, 26 gauge, 28 gauge, 30 gauge, 33 gauge</i>	Tier 7	MO; QL	NOVA SUREFLEX LANCETS	Tier 7	MO; QL
LANCETS, SUPER THIN	Tier 7	MO; QL	ON CALL LANCET 30 GAUGE	Tier 7	MO; QL
LANCETS,THIN , 23 GAUGE, 28 GAUGE	Tier 7	MO; QL	ON CALL PLUS LANCET 30 GAUGE	Tier 7	MO; QL
LANCETS,ULTRA THIN , 26 GAUGE	Tier 7	MO; QL	ONETOUCH DELICA LANCETS 30 GAUGE, 33 GAUGE	Tier 7	MO; QL
LITE TOUCH LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL	ONETOUCH DELICA PLUS LANCET 30 GAUGE, 33 GAUGE	Tier 7	MO; QL
MEDISENSE THIN LANCETS 28 GAUGE	Tier 7	MO; QL	ONETOUCH DELICA SAFETY LANCET 30 GAUGE	Tier 7	MO; QL
			ONETOUCH SURESOFT LANCING DEV 28 GAUGE	Tier 7	MO; QL
			ONETOUCH ULTRASOFT 2 LANCET 30 GAUGE	Tier 7	MO; QL

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ONETOUCH ULTRASOFT LANCETS	Tier 7	MO; QL	RELIAMED LANCET 23 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
ON-THE-GO LANCETS 30 GAUGE	Tier 7	MO; QL	RELIAMED SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
PIP LANCET 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	RELIAMED TWIST AND CAP LANCET 28 GAUGE	Tier 7	MO; QL
PRESSURE ACTIVATED LANCETS 21 GAUGE, 28 GAUGE	Tier 7	MO; QL	RELION THIN LANCETS 26 GAUGE	Tier 7	MO; QL
PRO COMFORT LANCET 30 GAUGE, 31 GAUGE	Tier 7	MO; QL	RELION ULTRA THIN PLUS LANCETS	Tier 7	MO; QL
PRO COMFORT SAFETY LANCET 30 GAUGE	Tier 7	MO; QL	RIGHTEST GL300 LANCETS 30 GAUGE	Tier 7	MO; QL
PRODIGY LANCETS 26 GAUGE, 28 GAUGE	Tier 7	MO; QL	SAFETY LANCETS 21 GAUGE, 26 GAUGE, 28 GAUGE	Tier 7	MO; QL
PRODIGY TWIST TOP LANCET 28 GAUGE	Tier 7	MO; QL	SAFETY SEAL LANCETS 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
PURE COMFORT LANCETS 30 GAUGE	Tier 7	MO; QL	SAFETY-LET LANCETS 30 GAUGE	Tier 7	MO; QL
PURE COMFORT SAFETY LANCETS 30 GAUGE	Tier 7	MO; QL	SINGLE-LET	Tier 7	MO; QL
PUSH BUTTON SAFETY LANCETS 21 GAUGE, 28 GAUGE	Tier 7	MO; QL	SMART SENSE LANCETS 21 GAUGE, 26 GAUGE, 33 GAUGE	Tier 7	MO; QL
READYLANCE SAFETY LANCETS 21 GAUGE, 23 GAUGE, 26 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	SMARTEST LANCET	Tier 7	MO; QL
			SOFT TOUCH LANCETS	Tier 7	MO; QL
			SOLUS V2 LANCETS 28 GAUGE, 30 GAUGE	Tier 7	MO; QL
			STERILANCE TL 30 GAUGE, 32 GAUGE	Tier 7	MO; QL
			SUPER THIN LANCETS , 28 GAUGE, 30 GAUGE	Tier 7	MO; QL

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SURE COMFORT LANCETS 18 GAUGE, 21 GAUGE, 23 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	ULTILET LANCETS 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL
SURE-LANCE , 26 GAUGE, 28 GAUGE	Tier 7	MO; QL	ULTILET SAFETY LANCETS 23 GAUGE	Tier 7	MO; QL
SURE-LANCE ULTRA THIN 30 GAUGE	Tier 7	MO; QL	ULTRA FINE LANCETS 30 GAUGE	Tier 7	MO; QL
SURE-TOUCH LANCET	Tier 7	MO; QL	ULTRA THIN II LANCETS 30 GAUGE	Tier 7	MO; QL
TECHLITE LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL	ULTRA THIN LANCETS , 28 GAUGE, 30 GAUGE, 31 GAUGE, 33 GAUGE	Tier 7	MO; QL
TELCARE LANCETS 30 GAUGE	Tier 7	MO; QL	ULTRA THIN PLUS LANCETS 33 GAUGE	Tier 7	MO; QL
THIN LANCETS 26 GAUGE	Tier 7	MO; QL	ULTRA TLC LANCETS	Tier 7	MO; QL
TOPCARE UNIVERSAL1 LANCET , 33 GAUGE	Tier 7	MO; QL	ULTRA-CARE LANCETS 30 GAUGE	Tier 7	MO; QL
TRUE COMFORT LANCET 30 GAUGE	Tier 7	MO; QL	ULTRALANCE LANCETS 26 GAUGE, 28 GAUGE	Tier 7	MO; QL
TRUEPLUS LANCETS 26 GAUGE, 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL	ULTRA-THIN II LANCETS 28 GAUGE	Tier 7	MO; QL
TWIST LANCETS 30 GAUGE, 32 GAUGE	Tier 7	MO; QL	UNILET COMFORTOUCH LANCET , 26 GAUGE	Tier 7	MO; QL
ULTILET BASIC LANCETS 30 GAUGE	Tier 7	MO; QL	UNILET EXCELITE II LANCET	Tier 7	MO; QL
ULTILET CLASSIC LANCETS , 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL	UNILET EXCELITE LANCET	Tier 7	MO; QL
			UNILET GP LANCET	Tier 7	MO; QL
			UNILET LANCET 28 GAUGE, 33 GAUGE	Tier 7	MO; QL
			UNILET LANCETS 30 GAUGE	Tier 7	MO; QL

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UNILET SUPER THIN LANCETS 30 GAUGE	Tier 7	MO; QL	VERIFINE UNIVERSAL LANCET 28 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL
UNISTIK 3 EXTRA LANCET 21 GAUGE	Tier 7	MO; QL	VIVAGUARD LANCET 30 GAUGE	Tier 7	MO; QL
UNISTIK 3 GENTLE 30 GAUGE	Tier 7	MO; QL	Syringes And Accessories		
UNISTIK 3 LANCETS 21 GAUGE	Tier 7	MO; QL	ADVOCATE SYRINGES SYRINGE 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 30 GAUGE X 5/16", 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	Tier 7	MO
UNISTIK COMFORT LANCETS 28 GAUGE	Tier 7	MO	BD ECLIPSE LUER-LOK SYRINGE 1 ML 30 GAUGE X 1/2"	Tier 7	MO
UNISTIK CZT LANCET 23 GAUGE, 28 GAUGE	Tier 7	MO; QL	BD INSULIN SYRINGE (HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 5/16"	Tier 7	MO
UNISTIK EXTRA LANCETS 21 GAUGE	Tier 7	MO	BD INSULIN SYRINGE MICRO-FINE SYRINGE 1 ML 28 GAUGE X 1/2"	Tier 7	MO
UNISTIK NORMAL LANCETS 23 GAUGE	Tier 7	MO	BD INSULIN SYRINGE SAFETY-LOK SYRINGE 1 ML 29 GAUGE X 1/2"	Tier 7	MO
UNISTIK PRO LANCET 21 GAUGE, 28 GAUGE	Tier 7	MO; QL	BD INSULIN SYRINGE SLIP TIP SYRINGE 1 ML	Tier 7	MO
UNISTIK SAFETY 28 GAUGE, 30 GAUGE	Tier 7	MO; QL			
UNISTIK TOUCH LANCETS 21 GAUGE, 23 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL			
UNIVERSAL 1 LANCETS 21 GAUGE, 26 GAUGE, 30 GAUGE, 33 GAUGE	Tier 7	MO; QL			
VERIFINE SAFETY LANCET MINI 21 GAUGE, 23 GAUGE, 28 GAUGE, 30 GAUGE	Tier 7	MO; QL			

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BD INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 25 GAUGE X 5/8", 1 ML 25 X 1", 1 ML 26 X 1/2", 1 ML 27 GAUGE X 1/2", 1 ML 28 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Tier 7	MO	BD VEO INSULIN SYRINGE UF SYRINGE 0.3 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 15/64", 1/2 ML 31 GAUGE X 15/64"	Tier 7	MO
BD INSULIN SYRINGE ULTRA-FINE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16"	Tier 7	MO	CARETOUCH INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 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	Tier 7	MO
BD LO-DOSE MICRO-FINE IV SYRINGE 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO	COMFORT EZ INSULIN SYRINGE 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 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 0.5 ML 32 GAUGE X 5/16"	Tier 7	MO
BD LO-DOSE ULTRA-FINE SYRINGE 0.5 ML 29 GAUGE X 1/2"	Tier 7	MO	COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 32 GAUGE X 5/16"	Tier 7	MO
BD SAFETYGLIDE INSULIN SYRINGE SYRINGE 1 ML 29 GAUGE X 1/2"	Tier 7	MO	COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 32 GAUGE X 5/16"	Tier 7	MO
BD SAFETYGLIDE SYRINGE SYRINGE 1 ML 27 GAUGE X 5/8"	Tier 7	MO	COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 32 GAUGE X 5/16"	Tier 7	MO
BD VEO INSULIN SYR (HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 15/64"	Tier 7	MO	COMFORT EZ INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 32 GAUGE X 5/16"	Tier 7	MO

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DROPLET INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16", 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 15/64", 1 ML 31 GAUGE X 5/16	Tier 7	MO	EASY TOUCH INSULIN SYRINGE 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 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 27 GAUGE X 1/2", 1 ML 27 GAUGE X 5/8", 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"	Tier 7	MO
EASY COMFORT INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16	Tier 7	MO	EASY TOUCH LUER LOCK INSULIN SYRINGE 1 ML	Tier 7	MO
EASY GLIDE INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 15/64", 1/2 ML 31 GAUGE X 15/64"	Tier 7	MO	EASY TOUCH UNI-SLIP SYRINGE 1 ML	Tier 7	MO
			EXEL INSULIN SYRINGE 0.5 ML 30 GAUGE X 5/16", 1 ML 30 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO

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FREESTYLE PRECISION SYRINGE 0.5 ML 30 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	Tier 7	MO	<i>insulin syringe-needle u-100 syringe 0.3 ml 29 gauge, 0.3 ml 30, 0.3 ml 30 gauge x 1/2", 0.3 ml 30 gauge x 5/16", 0.3 ml 31 gauge x 15/64", 0.3 ml 31 gauge x 5/16", 0.5 ml 29 gauge x 1/2", 0.5 ml 30 gauge x 1/2", 0.5 ml 30 gauge x 5/16", 0.5 ml 31 gauge x 5/16", 1 ml 27 gauge x 1/2", 1 ml 28 gauge, 1 ml 28 gauge x 1/2", 1 ml 29 gauge x 1/2", 1 ml 29 gauge x 7/16", 1 ml 30 gauge x 1/2", 1 ml 30 gauge x 3/8", 1 ml 30 gauge x 5/16, 1 ml 30 gauge x 7/16", 1 ml 31 gauge x 15/64", 1 ml 31 gauge x 5/16, 1/2 ml 27 gauge x 1/2", 1/2 ml 28 gauge, 1/2 ml 28 gauge x 1/2", 1/2 ml 29 , 1/2 ml 30 gauge, 1/2 ml 31 gauge x 15/64"</i>	Tier 7	MO
HEALTHWISE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 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	Tier 7	MO			
INSULIN SYRINGE MICROFINE SYRINGE 1 ML 27 GAUGE X 5/8", 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO			
<i>insulin syringe needleless syringe 1 ml</i>	Tier 7	MO			
INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Tier 7	MO			

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LITE TOUCH INSULIN SYRINGE SYRINGE 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 30 GAUGE X 5/16", 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 29 , 1/2 ML 30 GAUGE	Tier 7	MO	MONOJECT INSULIN SYRINGE SYRINGE 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 30 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML , 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"	Tier 7	MO
MAXICOMFORT INSULIN SYRINGE SYRINGE 1 ML 27 GAUGE X 1/2", 1/2 ML 27 GAUGE X 1/2"	Tier 7	MO	MONOJECT SYRINGE SYRINGE 1/2 ML 28 GAUGE	Tier 7	MO
MAXI-COMFORT INSULIN SYRINGE SYRINGE 1 ML 28 GAUGE X 1/2", 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO	MONOJECT ULTRA COMFORT INSULIN SYRINGE 1/2 ML 28 GAUGE	Tier 7	MO
MINIMED SYRINGE RESERVOIR 1.8 ML	Tier 7	MO	PARADIGM RESERVOIR 1.8 ML	Tier 7	MO
MONOJECT INSULIN SAFETY SYRINGE 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", 29 GAUGE X 1/2"	Tier 7	MO	PRO COMFORT INSULIN SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 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	Tier 7	MO

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PRODIGY INSULIN SYRINGE SYRINGE 0.3 ML 31 GAUGE X 5/16", 0.5 ML 31 GAUGE X 5/16", 1 ML 28 GAUGE X 1/2"	Tier 7	MO	SURE-JECT INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2", 1 ML 30 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"	Tier 7	MO
SAFESNAP INSULIN SYRINGE 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"	Tier 7	MO	TECHLITE INSULIN SYRINGE SYRINGE 1 ML 29 GAUGE X 1/2", 1 ML 30 GAUGE X 5/16, 1 ML 31 GAUGE X 15/64", 1 ML 31 GAUGE X 5/16	Tier 7	MO
SURE COMFORT INS. SYR. U-100 SYRINGE 0.5 ML 29 GAUGE X 1/2"	Tier 7	MO	TECHLITE INSULN SYR(HALF UNIT) SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 15/64", 0.3 ML 31 GAUGE X 5/16"	Tier 7	MO
SURE COMFORT INSULIN SYRINGE 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 30 GAUGE X 1/2", 0.5 ML 30 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 31 GAUGE X 5/16, 1 ML 31 GAUGE X 5/16, 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO	TERUMO INSULIN SYRINGE 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 28 GAUGE X 1/2", 1/2 ML 30 X 3/8"	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
THINPRO INSULIN SYRINGE SYRINGE 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"	Tier 7	MO	TRUEPLUS INSULIN SYRINGE 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 30 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 5/16", 1 ML 31 GAUGE X 5/16", 1/2 ML 28 GAUGE X 1/2"	Tier 7	MO
TOPCARE ULTRA COMFORT SYRINGE 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 30 GAUGE X 5/16", 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	Tier 7	MO	ULTICARE SYRINGE 0.3 ML 30 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 31 GAUGE X 5/16", 1 ML 30 GAUGE X 1/2", 1 ML 31 GAUGE X 5/16	Tier 7	MO
TRUE COMFORT INSULIN SYRINGE SYRINGE 0.5 ML 31 GAUGE X 5/16", 1 ML 31 GAUGE X 5/16	Tier 7	MO	ULTILET INSULIN SYRINGE SYRINGE 0.3 ML 29 GAUGE, 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 30 GAUGE X 5/16", 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 29	Tier 7	MO
TRUE COMFORT PRO INS SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 0.5 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	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ULTRA CMFT INS SYR (HALF UNIT) SYRINGE 0.3 ML 29 GAUGE X 1/2", 0.3 ML 31 GAUGE X 5/16"	Tier 7	MO	ULTRACARE INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 GAUGE X 1/2", 0.5 ML 30 GAUGE X 5/16", 0.5 ML 31 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"	Tier 7	MO
ULTRA COMFORT INSULIN SYRINGE SYRINGE 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 30 GAUGE X 5/16", 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 29 , 1/2 ML 30 GAUGE	Tier 7	MO	ULTRA-THIN II (SHORT) INS SYR SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 30 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"	Tier 7	MO
ULTRA FLO INSUL SYR(HALF UNIT) SYRINGE 0.3 ML 31 GAUGE X 5/16"	Tier 7	MO	ULTRA-THIN II INSULIN SYRINGE SYRINGE 0.5 ML 29 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Tier 7	MO
ULTRA FLO INSULIN SYRINGE SYRINGE 0.3 ML 30 GAUGE X 5/16", 0.3 ML 31 GAUGE X 5/16", 0.5 ML 29 GAUGE X 1/2"	Tier 7	MO	VANISHPOINT SYRINGE SYRINGE 0.5 ML 30 GAUGE X 1/2", 1 ML 29 GAUGE X 1/2"	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
VERIFINE INSULIN SYRINGE SYRINGE 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 31 GAUGE X 5/16	Tier 7	MO	EPINEPHRINESNAP-V INJECTION KIT 1 MG/ML	Tier 2	
Miscellaneous Agents			EPISNAP INJECTION KIT 1 MG/ML	Tier 3	
Anaphylaxis Therapy Agents			Parasympathetic Agents		
ADYPHREN AMP INJECTION KIT 1 MG/ML	Tier 3		<i>bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg</i>	Tier 2	MO
ADYPHREN INJECTION KIT 1 MG/ML	Tier 3		<i>pilocarpine hcl oral tablet 5 mg</i>	Tier 2	MO
EPINEPHINE PROFESSIONAL EMS INJECTION KIT 1 MG/ML	Tier 2		Pku Tx Agent-Cofactor Of Phenylalanine Hydroxylase		
<i>epinephrine injection auto-injector 0.15 mg/0.15 ml, 0.15 mg/0.3 ml, 0.3 mg/0.3 ml</i>	Tier 2	QL	<i>sapropterin oral powder in packet 100 mg</i>	Tier 5	DS
EPINEPHRINE PROFESSIONAL INJECTION KIT 1 MG/ML	Tier 2		<i>sapropterin oral tablet, soluble 100 mg</i>	Tier 5	DS
EPINEPHRINESNAP INJECTION KIT 1 MG/ML	Tier 3		Neoplastic Disease		
EPINEPHRINESNAP-EMS INJECTION KIT 1 MG/ML	Tier 3		Alkylating Agents		
			<i>cyclophosphamide intravenous recon soln 1 gram, 2 gram</i>	Tier 6	
			<i>cyclophosphamide oral capsule 25 mg, 50 mg</i>	Tier 2	
			GLEOSTINE ORAL CAPSULE 10 MG, 100 MG, 40 MG	Tier 3	
			<i>hydroxyurea oral capsule 500 mg</i>	Tier 2	MO
			IFEX INTRAVENOUS RECON SOLN 3 GRAM	Tier 6	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>ifosfamide</i> <i>intravenous recon soln 3 gram</i>	Tier 6		<i>daunorubicin</i> <i>intravenous solution 5 mg/ml</i>	Tier 6	
LEUKERAN ORAL TABLET 2 MG	Tier 3		<i>doxorubicin</i> <i>intravenous recon soln 50 mg</i>	Tier 6	
<i>melphalan oral tablet 2 mg</i>	Tier 2		<i>mitomycin</i> <i>intravenous recon soln 40 mg, 5 mg</i>	Tier 6	
MYLERAN ORAL TABLET 2 MG	Tier 3		MUTAMYCIN INTRAVENOUS RECON SOLN 40 MG, 5 MG	Tier 6	
<i>temozolomide oral capsule 100 mg, 140 mg, 180 mg, 250 mg</i>	Tier 5	DS	Anti-Cd20 (B Lymphocyte) Monoclonal Antibody		
<i>temozolomide oral capsule 20 mg, 5 mg</i>	Tier 2		RIABNI INTRAVENOUS SOLUTION 10 MG/ML	Tier 6	
<i>thiotepa injection recon soln 15 mg</i>	Tier 6	DS	Antimetabolites		
Antiandrogenic Agents			ADRUCIL INTRAVENOUS SOLUTION 5 GRAM/100 ML	Tier 6	
<i>abiraterone oral tablet 250 mg</i>	Tier 2	DS	<i>azacitidine injection recon soln 100 mg</i>	Tier 6	
<i>bicalutamide oral tablet 50 mg</i>	Tier 2	MO	<i>capecitabine oral tablet 150 mg</i>	Tier 2	
<i>flutamide oral capsule 125 mg</i>	Tier 2	MO	<i>capecitabine oral tablet 500 mg</i>	Tier 2	MO
XTANDI ORAL CAPSULE 40 MG	Tier 5	DS	<i>cytarabine (pf) injection solution 2 gram/20 ml (100 mg/ml)</i>	Tier 6	
XTANDI ORAL TABLET 80 MG	Tier 5	DS	<i>cytarabine injection solution 20 mg/ml</i>	Tier 6	
Antibiotic Antineoplastics					
ADRIAMYCIN INTRAVENOUS RECON SOLN 50 MG	Tier 6				
<i>bleomycin injection recon soln 15 unit, 30 unit</i>	Tier 6				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
fluorouracil intravenous solution 1 gram/20 ml, 5 gram/100 ml	Tier 6		Antineoplast Hum Vegf Inhibitor Recomb Mc Antibody		
gemcitabine intravenous recon soln 200 mg	Tier 6		MVASI INTRAVENOUS SOLUTION 25 MG/ML	Tier 6	
mercaptopurine oral tablet 50 mg	Tier 2	MO	Antineoplastic Aromatase Inhibitors		
methotrexate sodium (pf) injection solution 25 mg/ml	Tier 2	MO	<i>anastrozole oral tablet 1 mg</i>	Tier 2	MO
methotrexate sodium injection solution 25 mg/ml	Tier 2	MO	<i>exemestane oral tablet 25 mg</i>	Tier 2	MO
methotrexate sodium oral tablet 2.5 mg	Tier 2	MO	<i>letrozole oral tablet 2.5 mg</i>	Tier 2	MO
pemetrexed disodium intravenous solution 25 mg/ml	Tier 6	MO	Antineoplastic - Braf Kinase Inhibitors		
PURIXAN ORAL SUSPENSION 20 MG/ML	Tier 5	DS	ZELBORAF ORAL TABLET 240 MG	Tier 5	DS
TABLOID ORAL TABLET 40 MG	Tier 3	MO	Antineoplastic - Mek1 And Mek2 Kinase Inhibitors		
Antineoplast Egf Receptor Blocker Rcmb Mc Antibody			COTELLIC ORAL TABLET 20 MG	Tier 3	DS
ERBITUX INTRAVENOUS SOLUTION 100 MG/50 ML	Tier 6		Antineoplastic - Mtor Kinase Inhibitors		
KANJINTI INTRAVENOUS RECON SOLN 420 MG	Tier 6	MO	<i>everolimus (antineoplastic) oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg</i>	Tier 5	DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antineoplastic Immunomodulator Agents			IMBRUVICA ORAL CAPSULE 140 MG, 70 MG	Tier 5	PA; DS
<i>lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg</i>	Tier 5	DS	IMBRUVICA ORAL TABLET 420 MG, 560 MG	Tier 5	PA; DS
Antineoplastic Systemic Enzyme Inhibitors			KISQALI ORAL TABLET 200 MG/DAY (200 MG X 1), 400 MG/DAY (200 MG X 2), 600 MG/DAY (200 MG X 3)	Tier 5	DS
ALECensa ORAL CAPSULE 150 MG	Tier 3	DS	<i>lapatinib oral tablet 250 mg</i>	Tier 5	DS
ALIQOPA INTRAVENOUS RECON SOLN 60 MG	Tier 6	MO	<i>pazopanib oral tablet 200 mg</i>	Tier 5	DS
BRUKINSA ORAL CAPSULE 80 MG	Tier 5	DS	SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG	Tier 5	PA; DS
CALQUENCE (ACALABRUTINIB MAL) ORAL TABLET 100 MG	Tier 5	DS	<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg</i>	Tier 5	DS
<i>erlotinib oral tablet 100 mg, 150 mg, 25 mg</i>	Tier 2	DS	TAGRISSO ORAL TABLET 40 MG, 80 MG	Tier 5	DS
<i>gefitinib oral tablet 250 mg</i>	Tier 5	DS	TASIGNA ORAL CAPSULE 150 MG, 200 MG	Tier 5	PA; DS
IBRANCE ORAL CAPSULE 100 MG, 125 MG, 75 MG	Tier 5	DS	TUKYSA ORAL TABLET 150 MG, 50 MG	Tier 5	DS; QL
IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG	Tier 5	DS	ZYDELIG ORAL TABLET 100 MG, 150 MG	Tier 5	DS
<i>imatinib oral tablet 100 mg, 400 mg</i>	Tier 2	DS			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Antineoplastic,Anti-Programmed Death-1 (Pd-1) Mab			IMFINZI INTRAVENOUS SOLUTION 50 MG/ML	Tier 6	DS
KEYTRUDA INTRAVENOUS SOLUTION 25 MG/ML	Tier 6	DS	Chemotherapy Rescue/Antidote Agents		
Antineoplastic-B Cell Lymphoma-2(Bcl-2) Inhibitors			<i>leucovorin calcium injection recon soln 50 mg</i>	Tier 2	
VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG	Tier 5	DS	<i>leucovorin calcium oral tablet 25 mg</i>	Tier 2	
VENCLEXTA STARTING PACK ORAL TABLETS,DOSE PACK 10 MG-50 MG-100 MG	Tier 5	DS	<i>leucovorin calcium oral tablet 5 mg</i>	Tier 2	MO
Antineoplastics,Mis cellaneous			MESNEX ORAL TABLET 400 MG	Tier 3	
<i>dacarbazine intravenous recon soln 100 mg</i>	Tier 6		Selective Estrogen Receptor Modulators (Serm)		
<i>etoposide oral capsule 50 mg</i>	Tier 2		<i>tamoxifen oral tablet 10 mg, 20 mg</i>	Tier 2	MO
LYSODREN ORAL TABLET 500 MG	Tier 3	DS	Steroid Antineoplastics		
MATULANE ORAL CAPSULE 50 MG	Tier 5	DS	EMCYT ORAL CAPSULE 140 MG	Tier 5	DS
<i>tretinooin (antineoplastic) oral capsule 10 mg</i>	Tier 2	DS	<i>megestrol oral tablet 20 mg, 40 mg</i>	Tier 2	MO
Anti-Programmed Cell Death-Ligand 1 (Pd-L1) Mab			Vinca Alkaloids		
BAVENCIO INTRAVENOUS SOLUTION 20 MG/ML	Tier 6	MO	VINCASAR PFS INTRAVENOUS SOLUTION 1 MG/ML	Tier 6	
			<i>vincristine intravenous solution 1 mg/ml</i>	Tier 6	
			<i>vinorelbine intravenous solution 50 mg/5 ml</i>	Tier 6	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Neurological Disease - Miscellaneous					
Agents To Treat Multiple Sclerosis					
AVONEX INTRAMUSCULAR PEN INJECTOR KIT 30 MCG/0.5 ML	Tier 5	PA; DS	GLATOPA SUBCUTANEOUS SYRINGE 20 MG/ML, 40 MG/ML	Tier 2	DS
AVONEX INTRAMUSCULAR SYRINGE KIT 30 MCG/0.5 ML	Tier 5	PA; DS	<i>teriflunomide oral tablet 14 mg, 7 mg</i>	Tier 2	MO
BETASERON SUBCUTANEOUS KIT 0.3 MG	Tier 3	DS	Agts Tx Neuromusc Transmission Dis,Pot-Chan Blkr		
BETASERON SUBCUTANEOUS RECON SOLN 0.3 MG	Tier 3	DS	<i>dalfampridine oral tablet extended release 12 hr 10 mg</i>	Tier 2	MO
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 120 mg</i>	Tier 2	MO; QL	Amyotrophic Lateral Sclerosis Agents		
<i>dimethyl fumarate oral capsule, delayed release(dr/ec) 240 mg</i>	Tier 2	MO	<i>riluzole oral tablet 50 mg</i>	Tier 2	MO
EXTAVIA SUBCUTANEOUS KIT 0.3 MG	Tier 3	DS	Fibromyalgia Agents,Serotonin-Norepineph Ru Inhib		
EXTAVIA SUBCUTANEOUS RECON SOLN 0.3 MG	Tier 3	DS	SAVELLA ORAL TABLET 100 MG	Tier 3	PA; MO
<i>fingolimod oral capsule 0.5 mg</i>	Tier 2	MO; QL	SAVELLA ORAL TABLET 12.5 MG, 25 MG, 50 MG	Tier 3	PA; MO; QL
<i>glatiramer subcutaneous syringe 20 mg/ml, 40 mg/ml</i>	Tier 2	DS	Movement Disorders(Drug Therapy)		
			<i>tetrabenazine oral tablet 12.5 mg, 25 mg</i>	Tier 2	MO
Oral/Pharyngeal Disorders					
Dental Aids And Preparations					
			<i>chlorhexidine gluconate mucous membrane mouthwash 0.12 %</i>	Tier 2	
			ORALONE DENTAL PASTE 0.1 %	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
PAROEX ORAL RINSE MUCOUS MEMBRANE MOUTHWASH 0.12 %	Tier 2		Blood Testing Preparations, In-Vitro		
PERIOGARD MUCOUS MEMBRANE MOUTHWASH 0.12 %	Tier 2		CARETOUCH KETONE TEST STRIP STRIP	Tier 7	MO
<i>triamcinolone acetonide dental paste 0.1 %</i>	Tier 2	MO	FORA 6 CONNECT KETONE STRIP STRIP	Tier 7	MO
Nose Preparations, Miscellaneous (Rx)			FORA GTEL KETONE TEST STRIP STRIP	Tier 7	MO
<i>ipratropium bromide nasal spray, non-aerosol 21 mcg (0.03 %)</i>	Tier 2	ST; MO	FORA TN'G ADV VOICE KETO STRIP STRIP	Tier 7	MO
Periodontal Collagenase Inhibitors			GOJJI BLOOD KETONE TEST STRIP STRIP	Tier 7	MO
<i>doxycycline hyclate oral tablet 20 mg</i>	Tier 2	MO	NOVAMAX PLUS KETONE STRIP	Tier 7	MO
Other Drugs			PRECISION XTRA B-KETONE STRIP	Tier 7	MO; QL
Abortifacient, Progestrone Receptor Antagonist-Typ			General Anesthetics - Benzodiazepine, Injectable		
MIFEPREX ORAL TABLET 200 MG	Tier 3		<i>midazolam (pf) injection solution 5 mg/ml</i>	Tier 2	DS; QL
<i>mifepristone oral tablet 200 mg</i>	Tier 2		<i>midazolam injection solution 5 mg/ml</i>	Tier 2	DS; QL
Appetite Stim. For Anorexia, Cachexia, Wasting Synd.			General Anesthetics, Inhalant		
<i>megestrol oral suspension 400 mg/10 ml (10 ml), 400 mg/10 ml (40 mg/ml)</i>	Tier 2	MO	<i>desflurane inhalation liquid 100 %</i>	Tier 2	
			<i>isoflurane inhalation liquid 99.9 %</i>	Tier 2	
			<i>sevoflurane inhalation liquid</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
TERRELL INHALATION LIQUID 99.9 %	Tier 2		Metabolic Function Diagnostics		
General Anesthetics, Injectables					
BREVITAL INJECTION RECON SOLN 500 MG	Tier 3		METOPIRONE ORAL CAPSULE 250 MG	Tier 3	
<i>ketamine injection solution 100 mg/ml</i>	Tier 2		Metallic Poison, Agents To Treat		
General Inhalation Agents					
NEBUSAL INHALATION SOLUTION FOR NEBULIZATION 3 %	Tier 2		BAL IN OIL INTRAMUSCULAR SOLUTION 100 MG/ML	Tier 5	DS
<i>sodium chloride inhalation solution for nebulization 0.9 %, 3 %, 7 %</i>	Tier 2		CHEMET ORAL CAPSULE 100 MG	Tier 3	
Metabolic Deficiency Agents			<i>deferasirox oral tablet 180 mg, 360 mg, 90 mg</i>	Tier 2	MO
CARNITOR (SUGAR-FREE) ORAL SOLUTION 100 MG/ML	Tier 3	MO	<i>deferasirox oral tablet, dispersible 125 mg, 250 mg, 500 mg</i>	Tier 2	MO
CARNITOR ORAL SOLUTION 100 MG/ML	Tier 3	MO	<i>deferoxamine injection recon soln 500 mg</i>	Tier 5	DS
CARNITOR ORAL TABLET 330 MG	Tier 3	MO	<i>sodium thiosulfate intravenous solution 12.5 gram/50 ml (250 mg/ml)</i>	Tier 2	
<i>levocarnitine (with sugar) oral solution 100 mg/ml</i>	Tier 2	MO	Needles/Needleless Devices		
<i>levocarnitine oral solution 100 mg/ml</i>	Tier 2	MO	1ST TIER UNIFINE PENTIPS 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"	Tier 7	MO
<i>levocarnitine oral tablet 330 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
1ST TIER UNIFINE PENTIPS PLUS 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"	Tier 7	MO	BD ULTRA-FINE NANO PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	Tier 7	MO
ABOUTTIME PEN NEEDLE NEEDLE 30 GAUGE X 5/16", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	BD ULTRA-FINE ORIG PEN NEEDLE NEEDLE 29 GAUGE X 1/2"	Tier 7	MO
ADVOCATE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16"	Tier 7	MO	BD ULTRA-FINE SHORT PEN NEEDLE NEEDLE 31 GAUGE X 5/16"	Tier 7	MO
AQINJECT PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32"	Tier 7	MO	CAREFINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	Tier 7	MO
ASSURE ID DUO-SHIELD NEEDLE 30 GAUGE X 3/16"	Tier 7	MO	CARETOUCH PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 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"	Tier 7	MO
BD AUTOSHIELD DUO PEN NEEDLE NEEDLE 30 GAUGE X 3/16"	Tier 7	MO	CLICKFINE PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO
BD NANO 2ND GEN PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	Tier 7	MO			
BD ULTRA-FINE MINI PEN NEEDLE NEEDLE 31 GAUGE X 3/16"	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
COMFORT EZ PEN NEEDLES NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	EASY TOUCH NEEDLE 29 GAUGE X 1/2", 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"	Tier 7	MO
COMFORT TOUCH PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	EASY TOUCH PEN NEEDLE NEEDLE 30 GAUGE X 5/16"	Tier 7	MO
DROPLET PEN NEEDLE 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 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	EMBRACE PEN NEEDLE 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"	Tier 7	MO
EASY COMFORT PEN NEEDLES NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	HEALTHWISE PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO
			HEALTHY ACCENTS UNIFINE PENTIP 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"	Tier 7	MO
			INCONTROL PEN NEEDLE 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"	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
INSUPEN PEN NEEDLE 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 5/16", 32 GAUGE X 5/32"	Tier 7	MO	PEN NEEDLE 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"	Tier 7	MO
LITE TOUCH INSULIN PEN NEEDLES NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16"	Tier 7	MO	<i>pen needle, diabetic 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 3/16", 32 gauge x 5/16", 32 gauge x 5/32"</i>	Tier 7	MO
MAXICOMFORT II PEN NEEDLE NEEDLE 31 GAUGE X 1/4"	Tier 7	MO	PENTIPS 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"	Tier 7	MO
MICRODOT INSULIN PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 32 GAUGE X 5/32"	Tier 7	MO	PIP PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 32 GAUGE X 5/32"	Tier 7	MO
MINI ULTRA-THIN II NEEDLE 31 GAUGE X 3/16"	Tier 7	MO	PRO COMFORT PEN NEEDLE NEEDLE 31 GAUGE X 5/16", 32 GAUGE X 3/16", 32 GAUGE X 5/32"	Tier 7	MO
NOVOFINE AUTOCOVER NEEDLE 30 GAUGE X 1/3"	Tier 7	MO	PURE COMFORT PEN NEEDLE 32 GAUGE X 3/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO
NOVOTWIST NEEDLE 32 GAUGE X 1/5"	Tier 7	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
RELION NEEDLES NEEDLE 31 GAUGE X 1/4"	Tier 7	MO	TRUEPLUS PEN NEEDLE 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"	Tier 7	MO
RELION PEN NEEDLES NEEDLE 32 GAUGE X 5/32"	Tier 7	MO	ULTICARE PEN NEEDLE 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"	Tier 7	MO
SURE COMFORT PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 30 GAUGE X 5/16", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	ULTILET PEN NEEDLE NEEDLE 29 GAUGE, 32 GAUGE X 5/32"	Tier 7	MO
SURE-FINE PEN NEEDLES NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16"	Tier 7	MO	ULTRA FLO PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO
TECHLITE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	ULTRA THIN PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	Tier 7	MO
TOPCARE CLICKFINE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 5/16"	Tier 7	MO	ULTRACARE PEN NEEDLE 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"	Tier 7	MO
TRUE COMFORT PEN NEEDLE 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"	Tier 7	MO	ULTRA-THIN II (SHORT) PEN NDL NEEDLE 31 GAUGE X 5/16"	Tier 7	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ULTRA-THIN II INS PEN NEEDLES NEEDLE 29 GAUGE X 1/2"	Tier 7	MO	VERIFINE PEN NEEDLE NEEDLE 29 GAUGE X 1/2", 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"	Tier 7	MO
UNIFINE PEN NEEDLE NEEDLE 32 GAUGE X 5/32"	Tier 7	MO	VERIFINE PLUS PEN NEEDLE NEEDLE 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO
UNIFINE PENTIPS NEEDLE 29 GAUGE, 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"	Tier 7	MO	Neuromuscular Blocking Agents		
UNIFINE PENTIPS PLUS 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"	Tier 7	MO	BOTOX INJECTION RECON SOLN 100 UNIT	Tier 6	
UNIFINE PROTECT NEEDLE 30 GAUGE X 3/16"	Tier 7	MO	<i>succinylcholine chloride injection solution 20 mg/ml</i>	Tier 2	
UNIFINE SAFECONTROL NEEDLE 30 GAUGE X 3/16"	Tier 7	MO	Parenteral Amino Acid Solutions And Combinations		
UNIFINE ULTRA PEN NEEDLE NEEDLE 31 GAUGE X 1/4", 31 GAUGE X 3/16", 31 GAUGE X 5/16", 32 GAUGE X 5/32"	Tier 7	MO	CLINISOL SF 15 % INTRAVENOUS PARENTERAL SOLUTION 15 %	Tier 3	
			SYNTHAMIN 17 WITHOUT ELYTE INTRAVENOUS PARENTERAL SOLUTION 10 %	Tier 3	
			TRAVASOL 10 % INTRAVENOUS PARENTERAL SOLUTION 10 %	Tier 3	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Somatostatic Agents					
<i>octreotide acetate injection solution 1,000 mcg/ml, 100 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml</i>	Tier 2	MO	CHEMSTRIP MICRAL STRIP	Tier 7	
Water					
			BACTERIOSTATIC WATER-KANJINTI INJECTION SOLUTION	Tier 3	
			BACTERIOSTATIC WATER-TRAZIMERA INJECTION SOLUTION	Tier 3	
			STERILE WATER FOR INJECTION INJECTION SOLUTION	Tier 2	
			<i>water for inject, bacteriostat injection solution</i>	Tier 2	
			<i>water for injection, sterile injection solution</i>	Tier 2	
Suspending Agents					
GELFILM IMPLANT FILM	Tier 3		Other Respiratory Disorders		
Urine Acetone Test Aids					
KETONE CARE STRIP	Tier 7	MO	Antifibrotic Therapy - Pyridone Analogs		
KETONE URINE TEST STRIP	Tier 7	MO	pirfenidone oral tablet 267 mg, 801 mg	Tier 2	DS
KETOSTIX STRIP	Tier 7	MO	Mucolytics		
TRUEPLUS KETONE STRIP	Tier 7	MO	<i>acetylcysteine solution 100 mg/ml (10 %), 200 mg/ml (20 %)</i>	Tier 2	
Urine Test Aids,Miscellaneous			PULMOZYME INHALATION SOLUTION 1 MG/ML	Tier 5	DS
ALBUSTIX REAGENT STRIP	Tier 7				
CHEMSTRIP 2 STRIP	Tier 7				

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Pain Management - Analgesics					
Analgesic/Antipyretics, Salicylates					
salsalate oral tablet 500 mg, 750 mg	Tier 2		hydromorphone injection syringe 1 mg/ml, 2 mg/ml, 4 mg/ml	Tier 2	DS
Analgesics Narcotic, Anesthetic Adjunct Agents					
fentanyl citrate (pf) injection solution 50 mcg/ml	Tier 2	DS	hydromorphone oral liquid 1 mg/ml	Tier 2	DS
Analgesics,Narcotics					
buprenorphine transdermal patch weekly 10 mcg/hour, 15 mcg/hour, 20 mcg/hour, 5 mcg/hour, 7.5 mcg/hour	Tier 2	PA; DS	hydromorphone oral tablet 2 mg, 4 mg	Tier 2	DS
butorphanol injection solution 1 mg/ml, 2 mg/ml	Tier 2	DS	hydromorphone rectal suppository 3 mg	Tier 2	DS
codeine sulfate oral tablet 15 mg, 30 mg, 60 mg	Tier 2	DS; Age	METHADONE INTENSOL ORAL CONCENTRATE 10 MG/ML	Tier 2	DS
fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr	Tier 2	DS	methadone oral concentrate 10 mg/ml	Tier 2	DS
hydromorphone (pf) injection solution 10 mg/ml	Tier 2	DS	methadone oral solution 5 mg/5 ml	Tier 2	DS
hydromorphone injection solution 1 mg/ml	Tier 2	DS	methadone oral tablet 10 mg, 5 mg	Tier 2	DS
			methadone oral tablet,soluble 40 mg	Tier 2	DS
			METHADOSE ORAL TABLET,SOLUBLE 40 MG	Tier 2	DS
			morphine concentrate oral solution 100 mg/5 ml (20 mg/ml)	Tier 2	DS
			morphine oral tablet 15 mg, 30 mg	Tier 2	DS
			morphine oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg	Tier 2	DS
			morphine rectal suppository 10 mg, 20 mg, 30 mg, 5 mg	Tier 2	DS
			oxycodone oral capsule 5 mg	Tier 2	DS

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
oxycodone oral concentrate 20 mg/ml	Tier 2	DS	<i>naratriptan oral tablet 1 mg, 2.5 mg</i>	Tier 2	QL
oxycodone oral solution 5 mg/5 ml	Tier 2	DS	<i>rizatriptan oral tablet 10 mg, 5 mg</i>	Tier 2	QL
oxycodone oral tablet 5 mg	Tier 2	DS	<i>rizatriptan oral tablet,disintegrating 10 mg, 5 mg</i>	Tier 2	QL
tramadol oral tablet 50 mg	Tier 2	DS; Age	<i>sumatriptan nasal spray,non-aerosol 20 mg/actuation, 5 mg/actuation</i>	Tier 2	QL
Antimigraine Preparations			<i>sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 2	QL
AJOVY AUTOINJECTOR SUBCUTANEOUS AUTO-INJECTOR 225 MG/1.5 ML	Tier 3	MO; PR; QL	<i>sumatriptan succinate subcutaneous cartridge 6 mg/0.5 ml</i>	Tier 2	QL
AJOVY SYRINGE SUBCUTANEOUS SYRINGE 225 MG/1.5 ML	Tier 3	MO; PR; QL	<i>sumatriptan succinate subcutaneous pen injector 6 mg/0.5 ml</i>	Tier 2	QL
CAFERGOT ORAL TABLET 1-100 MG	Tier 3	QL	<i>sumatriptan succinate subcutaneous solution 6 mg/0.5 ml</i>	Tier 2	QL
<i>dihydroergotamine injection solution 1 mg/ml</i>	Tier 2	QL	<i>zolmitriptan nasal spray,non-aerosol 2.5 mg, 5 mg</i>	Tier 2	ST; QL
<i>dihydroergotamine nasal spray,non-aerosol 0.5 mg/pump act. (4 mg/ml)</i>	Tier 5	ST	<i>zolmitriptan oral tablet 2.5 mg, 5 mg</i>	Tier 2	QL
<i>eletiptan oral tablet 20 mg, 40 mg</i>	Tier 2	QL	Narcotic Analgesic & Non-Salicylate Analgesic Comb		
ERGOMAR SUBLINGUAL TABLET 2 MG	Tier 3	QL	<i>acetaminophen-codeine oral solution 120-12 mg/5 ml</i>	Tier 2	DS; QL; Age
<i>ergotamine-caffeine oral tablet 1-100 mg</i>	Tier 2	QL	<i>acetaminophen-codeine oral tablet 300-15 mg, 300-30 mg, 300-60 mg</i>	Tier 2	DS; Age
MIGERGOT RECTAL SUPPOSITORY 2-100 MG	Tier 3	QL			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ENDOCET ORAL TABLET 5-325 MG	Tier 2	DS	<i>trihexyphenidyl oral tablet 2 mg, 5 mg</i>	Tier 2	MO
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15 ml</i>	Tier 2	DS	Antiparkinsonism Drugs, Other		
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 2	DS	<i>amantadine hcl oral capsule 100 mg</i>	Tier 2	MO
LORCET (HYDROCODONE) ORAL TABLET 5-325 MG	Tier 2	DS	<i>amantadine hcl oral solution 50 mg/5 ml</i>	Tier 2	MO
LORCET HD ORAL TABLET 10-325 MG	Tier 2	DS	<i>amantadine hcl oral tablet 100 mg</i>	Tier 2	MO
LORCET PLUS ORAL TABLET 7.5-325 MG	Tier 2	DS	<i>bromocriptine oral capsule 5 mg</i>	Tier 2	MO
<i>oxycodone-acetaminophen oral tablet 5-325 mg</i>	Tier 2	DS	<i>bromocriptine oral tablet 2.5 mg</i>	Tier 2	MO
PERCOCET ORAL TABLET 5-325 MG	Tier 2	DS	<i>carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg</i>	Tier 2	MO
Narcotic Withdrawal Therapy Agents			<i>carbidopa-levodopa oral tablet extended release 25-100 mg, 50-200 mg</i>	Tier 2	MO
<i>buprenorphine-naloxone sublingual tablet 2-0.5 mg, 8-2 mg</i>	Tier 2	DS	<i>entacapone oral tablet 200 mg</i>	Tier 2	MO
Parkinsons Disease			<i>pramipexole oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg</i>	Tier 2	MO
Antiparkinsonism Drugs, Anticholinergics			<i>ropinirole oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg</i>	Tier 2	MO
<i>benztropine injection solution 1 mg/ml</i>	Tier 2		<i>selegiline hcl oral capsule 5 mg</i>	Tier 2	MO
<i>benztropine oral tablet 0.5 mg, 1 mg, 2 mg</i>	Tier 2	MO	<i>selegiline hcl oral tablet 5 mg</i>	Tier 2	MO

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Decarboxylase Inhibitors			VALTOCO NASAL SPRAY, NON-AEROSOL 15 MG/2 SPRAY (7.5/0.1ML X 2), 20 MG/2 SPRAY (10MG/0.1ML X2)	Tier 5	PA; DS
carbidopa oral tablet 25 mg	Tier 2	MO	Anticonvulsants		
Seizure Disorder			carbamazepine oral capsule, er multiphase 12 hr 100 mg, 200 mg, 300 mg	Tier 2	MO
Anticonvulsant - Benzodiazepine Type			carbamazepine oral suspension 100 mg/5 ml	Tier 2	MO
clobazam oral suspension 2.5 mg/ml	Tier 2	MO	carbamazepine oral tablet 200 mg	Tier 2	MO
clobazam oral tablet 10 mg, 20 mg	Tier 2	MO	carbamazepine oral tablet extended release 12 hr 100 mg, 200 mg, 400 mg	Tier 2	MO
clonazepam oral tablet 0.5 mg, 1 mg, 2 mg	Tier 2	DS	carbamazepine oral tablet, chewable 100 mg	Tier 2	MO
clonazepam oral tablet, disintegrating 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 2 mg	Tier 2	DS	CELONTIN ORAL CAPSULE 300 MG	Tier 3	MO
DIASTAT ACUDIAL RECTAL KIT 12.5-15-17.5-20 MG, 5-7.5-10 MG	Tier 3	DS	DILANTIN INFATABS ORAL TABLET, CHEWABLE 50 MG	Tier 3	MO
DIASTAT RECTAL KIT 2.5 MG	Tier 3	DS	DILANTIN ORAL CAPSULE 30 MG	Tier 3	MO
diazepam rectal kit 12.5-15-17.5-20 mg, 2.5 mg, 5-7.5-10 mg	Tier 2	DS	divalproex oral capsule, delayed rel sprinkle 125 mg	Tier 2	MO
NAYZILAM NASAL SPRAY, NON-AEROSOL 5 MG/SPRAY (0.1 ML)	Tier 5	PA; DS	divalproex oral tablet extended release 24 hr 250 mg, 500 mg	Tier 2	MO
VALTOCO NASAL SPRAY, NON-AEROSOL 10 MG/SPRAY (0.1 ML), 5 MG/SPRAY (0.1 ML)	Tier 3	PA; DS			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
divalproex oral tablet, delayed release (dr/lec) 125 mg, 250 mg, 500 mg	Tier 2	MO	levetiracetam oral solution 100 mg/ml, 500 mg/5 ml (5 ml)	Tier 2	MO
EPITOL ORAL TABLET 200 MG	Tier 2	MO	levetiracetam oral tablet 1,000 mg, 250 mg, 500 mg, 750 mg	Tier 2	MO
EPRONTIA ORAL SOLUTION 25 MG/ML	Tier 3	MO; Age	levetiracetam oral tablet extended release 24 hr 500 mg, 750 mg	Tier 2	MO
ethosuximide oral capsule 250 mg	Tier 2	MO	methsuximide oral capsule 300 mg	Tier 2	MO
ethosuximide oral solution 250 mg/5 ml	Tier 2	MO	oxcarbazepine oral suspension 300 mg/5 ml (60 mg/ml)	Tier 2	MO
felbamate oral suspension 600 mg/5 ml	Tier 2	MO	oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg	Tier 2	MO
felbamate oral tablet 400 mg, 600 mg	Tier 2	MO	phenytoin oral suspension 100 mg/4 ml, 125 mg/5 ml	Tier 2	MO
gabapentin oral capsule 100 mg, 300 mg, 400 mg	Tier 2	MO	phenytoin oral tablet, chewable 50 mg	Tier 2	MO
gabapentin oral tablet 600 mg, 800 mg	Tier 2	MO	phenytoin sodium extended oral capsule 100 mg	Tier 2	MO
lacosamide oral solution 10 mg/ml	Tier 2	MO	phenytoin sodium intravenous solution 50 mg/ml	Tier 2	
lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg	Tier 2	MO	pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 300 mg, 50 mg, 75 mg	Tier 2	MO
lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg	Tier 2	MO	primidone oral tablet 250 mg, 50 mg	Tier 2	MO
lamotrigine oral tablet extended release 24hr 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg	Tier 2	MO	SUBVENITE ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG	Tier 2	MO
lamotrigine oral tablet, chewable dispersible 25 mg, 5 mg	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
<i>topiramate oral capsule, sprinkle 15 mg, 25 mg</i>	Tier 2	MO			Smoking Cessation
<i>topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg</i>	Tier 2	MO			Smoking Deterrent- Nicotinic Recept.Partial Agonist
<i>valproic acid (as sodium salt) oral solution 250 mg/5 ml</i>	Tier 2	MO	<i>CHANTIX CONTINUING MONTH BOX ORAL TABLET 1 MG</i>	Tier 1	
<i>valproic acid oral capsule 250 mg</i>	Tier 2	MO	<i>CHANTIX ORAL TABLET 1 MG</i>	Tier 1	
<i>ZONISADE ORAL SUSPENSION 100 MG/5 ML</i>	Tier 3	MO; Age	<i>varenicline oral tablet 1 mg</i>	Tier 1	
<i>zonisamide oral capsule 100 mg, 25 mg, 50 mg</i>	Tier 2	MO			Smoking Deterrents, Other
Skeletal Muscle Disorder			<i>bupropion hcl (smoking deter) oral tablet extended release 12 hr 150 mg</i>	Tier 1	
Skeletal Muscle Relaxants					Upper Gastrointestinal Disorders - Digestive
<i>baclofen oral tablet 10 mg, 20 mg</i>	Tier 2	MO			Pancreatic Enzymes
<i>cyclobenzaprine oral tablet 10 mg, 5 mg</i>	Tier 2		<i>CREON ORAL CAPSULE,DELAYED RELEASE(DR/EC) 12,000-38,000 - 60,000 UNIT, 24,000- 76,000 -120,000 UNIT, 3,000-9,500- 15,000 UNIT, 36,000- 114,000- 180,000 UNIT, 6,000-19,000 - 30,000 UNIT</i>	Tier 3	MO
<i>dantrolene oral capsule 100 mg, 25 mg, 50 mg</i>	Tier 2	MO			
<i>methocarbamol oral tablet 500 mg, 750 mg</i>	Tier 2				
<i>tizanidine oral tablet 2 mg, 4 mg</i>	Tier 2	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
ZENPEP ORAL CAPSULE,DELAYED RELEASE(DR/EC) 10,000-32,000 - 42,000 UNIT, 15,000-47,000 -63,000 UNIT, 20,000-63,000- 84,000 UNIT, 25,000-79,000- 105,000 UNIT, 40,000- 126,000- 168,000 UNIT, 5,000-17,000- 24,000 UNIT	Tier 3	MO	Upper Gastrointestinal Disorders - Ulcer Disease		
Upper Gastrointestinal Disorders - Spastic Disease			Anticholinergics,Quaternary Ammonium		
Anticholinergics/Antispasmodics			<i>chlordiazepoxide-clidinium oral capsule 5-2.5 mg</i>	Tier 2	DS
<i>dicyclomine intramuscular solution 10 mg/ml</i>	Tier 2		<i>glycopyrrolate injection solution 0.2 mg/ml</i>	Tier 2	MO
<i>dicyclomine oral capsule 10 mg</i>	Tier 2	MO	<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Tier 2	MO
<i>dicyclomine oral solution 10 mg/5 ml</i>	Tier 2	MO	<i>propantheline oral tablet 15 mg</i>	Tier 2	
Belladonna Alkaloids			Anti-Ulcer Preparations		
<i>atropine injection solution 0.4 mg/ml</i>	Tier 2		<i>misoprostol oral tablet 100 mcg, 200 mcg</i>	Tier 2	MO
			<i>sucralfate oral tablet 1 gram</i>	Tier 2	MO
			Histamine H2-Receptor Inhibitors		
			<i>cimetidine hcl oral solution 300 mg/5 ml</i>	Tier 2	MO
			<i>famotidine (pf) intravenous solution 20 mg/2 ml</i>	Tier 2	
			<i>famotidine (pf)-nacl (iso-os) intravenous piggyback 20 mg/50 ml</i>	Tier 2	
			<i>famotidine intravenous solution 10 mg/ml</i>	Tier 2	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
famotidine oral suspension for reconstitution 40 mg/5 ml (8 mg/ml)	Tier 2	MO	Urinary Tract - Functional Disorders		
nizatidine oral solution 150 mg/10 ml	Tier 2	MO	Benign Prostatic Hypertrophy/Micturition Agents		
Intestinal Motility Stimulants					
metoclopramide hcl injection solution 5 mg/ml	Tier 2		alfuzosin oral tablet extended release 24 hr 10 mg	Tier 2	MO
metoclopramide hcl injection syringe 5 mg/ml	Tier 2		finasteride oral tablet 5 mg	Tier 2	MO
metoclopramide hcl oral solution 5 mg/5 ml	Tier 2		tamsulosin oral capsule 0.4 mg	Tier 2	MO
metoclopramide hcl oral tablet 10 mg, 5 mg	Tier 2		Cystine-Depleting Agents, Nephropathic Cystinosis		
Proton-Pump Inhibitors					
lansoprazole oral capsule,delayed release(dr/ec) 30 mg	Tier 2	MO	CYSTAGON ORAL CAPSULE 150 MG, 50 MG	Tier 3	MO
omeprazole oral capsule,delayed release(dr/ec) 10 mg, 20 mg, 40 mg	Tier 2	MO	Kidney Stone Agents		
pantoprazole oral tablet,delayed release (dr/ec) 20 mg, 40 mg	Tier 2	MO	tiopronin oral tablet 100 mg	Tier 5	DS
Urinary Ph Modifiers					
K-PHOS ORIGINAL ORAL TABLET,SOLUBLE 500 MG			K-PHOS ORIGINAL ORAL TABLET,SOLUBLE 500 MG	Tier 3	
potassium citrate oral tablet extended release 10 meq (1,080 mg), 5 meq (540 mg)			potassium citrate oral tablet extended release 10 meq (1,080 mg), 5 meq (540 mg)	Tier 2	MO
UROQID-ACID NO.2 ORAL TABLET 500-500 MG			UROQID-ACID NO.2 ORAL TABLET 500-500 MG	Tier 3	

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Urinary Tract Analgesic Agents			<i>estradiol vaginal cream 0.01 % (0.1 mg/gram)</i>		
RIMSO-50 INTRAVESICAL SOLUTION 50 %	Tier 6		Tier 2	MO	
Urinary Tract Antispasmodic, M(3) Selective Antag.			Vitamin And/Or Mineral Deficiency		
<i>solifenacin oral tablet 10 mg, 5 mg</i>	Tier 2	MO; QL	Folic Acid Preparations		
Urinary Tract Antispasmodic/Antiincontinence Agent			<i>folic acid injection solution 5 mg/ml</i>	Tier 2	
<i>oxybutynin chloride oral syrup 5 mg/5 ml</i>	Tier 2	MO	<i>folic acid oral tablet 1 mg</i>	Tier 2	MO
<i>oxybutynin chloride oral tablet 5 mg</i>	Tier 2	MO	Iron Replacement		
<i>oxybutynin chloride oral tablet extended release 24hr 10 mg, 15 mg, 5 mg</i>	Tier 2	MO	VENOFER INTRAVENOUS SOLUTION 100 MG IRON/5 ML	Tier 3	
<i>trospium oral tablet 20 mg</i>	Tier 2	MO	Magnesium Salts Replacement		
Vaginal Disorders			<i>magnesium sulfate injection solution 500 mg/ml (50 %)</i>	Tier 2	
Vaginal Antibiotics			Mineral Replacement,Miscellaneous		
<i>clindamycin phosphate vaginal cream 2 %</i>	Tier 2		ADDAMEL N INTRAVENOUS SOLUTION 5.33-0.34-0.54 MCG-MG-MG/ML	Tier 2	
<i>metronidazole vaginal gel 0.75 % (37.5mg/5 gram)</i>	Tier 2		COPPER CHLORIDE INTRAVENOUS SOLUTION 0.4 MG/ML	Tier 2	
<i>VANDAZOLE VAGINAL GEL 0.75 % (37.5MG/5 GRAM)</i>	Tier 2		<i>cupric chloride intravenous solution 0.4 mg/ml</i>	Tier 2	
Vaginal Estrogen Preparations					
ESTRACE VAGINAL CREAM 0.01 % (0.1 MG/GRAM)	Tier 3	MO			

Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use	Drug Name	Drug Tier	Necessary Actions, Restrictions, or Limits on Use
Multivitamin Preparations			<i>cholecalciferol (vitamin d3) oral capsule 1,250 mcg (50,000 unit)</i>	Tier 2	
INFUVITE ADULT INTRAVENOUS SOLUTION 3,300 UNIT- 150 MCG/10 ML	Tier 3		DECARA ORAL CAPSULE 1,250 MCG (50,000 UNIT)	Tier 2	
Vitamin A Preparations			<i>ergocalciferol (vitamin d2) oral capsule 1,250 mcg (50,000 unit)</i>	Tier 2	MO
AQUASOL A INTRAMUSCULAR SOLUTION 50,000 UNIT/ML	Tier 5	DS	OPTIMAL D3 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	Tier 2	
Vitamin B1 Preparations			VITAMIN D2 ORAL CAPSULE 1,250 MCG (50,000 UNIT)	Tier 2	MO
<i>thiamine hcl (vitamin b1) injection solution 100 mg/ml</i>	Tier 2		WEEKLY-D ORAL CAPSULE 1,250 MCG (50,000 UNIT)	Tier 2	
Vitamin B12 Preparations			Zinc Replacement		
<i>cyanocobalamin (vitamin b-12) injection solution 1,000 mcg/ml</i>	Tier 2	MO	<i>zinc sulfate intravenous solution 5 mg/ml</i>	Tier 2	
DODEX INJECTION SOLUTION 1,000 MCG/ML	Tier 2	MO	Weight Reduction		
Vitamin B6 Preparations			Anorexic Agents		
<i>pyridoxine (vitamin b6) injection solution 100 mg/ml</i>	Tier 2		<i>diethylpropion oral tablet 25 mg</i>	Tier 2	RB; DS
Vitamin D Preparations			<i>diethylpropion oral tablet extended release 75 mg</i>	Tier 2	RB; DS
<i>calcitriol oral capsule 0.25 mcg, 0.5 mcg</i>	Tier 2	MO	<i>phentermine oral tablet 37.5 mg</i>	Tier 2	RB
			QSYMIA ORAL CAPSULE, ER MULTIPHASE 24 HR 11.25-69 MG, 15-92 MG, 3.75-23 MG, 7.5-46 MG	Tier 3	PA; RB; MO

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LORCET (HYDROCODONE)	115	<i>memantine</i>	7	MICROGESTIN 1.5/30 (21)	22
LORCET HD	115	<i>MENOPUR</i>	56	MICROGESTIN 1/20 (21)	23
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<i>loxapine succinate</i>	10	<i>METER-CHECK</i>	46	MICROLET LANCET	88
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<i>lurasidone</i>	10	METHADONE INTENSOL	113	<i>midazolam</i>	105
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LYLEQ	22	<i>methazolamide</i>	61	<i>midodrine</i>	18
LYLLANA	67	<i>methenamine hippurate</i>	70	MIFEPREX	105
LYSODREN	103	<i>methimazole</i>	58	<i>mifepristone</i>	105
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<i>magnesium sulfate</i>	121	<i>methocarbamol</i>	118	MILI	23
<i>maraviroc</i>	78	<i>methotrexate sodium</i>	101	MILLIPRED	82
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MAXICOMFORT II PEN NEEDLE	109	<i>methyldopa</i>	14	RESERVOIR	95
MAXICOMFORT INSULIN SYRINGE	95	<i>methylergonovine</i>	25	MINITRAN	19
MAXI-COMFORT INSULIN SYRINGE	95	<i>methylphenidate hcl</i>	12	<i>minocycline</i>	74
MAXI-TUSS AC	26	<i>methylprednisolone</i>	82	<i>minoxidil</i>	14
MEDISENSE	46	<i>methylprednisolone acetate</i>	82	<i>mirtazapine</i>	7
MEDISENSE CONTROLS 1-HI 1-LO	46	<i>methylprednisolone sodium</i>		<i>misoprostol</i>	119
MEDISENSE GLUCOSE KETONE	46	<i>succ</i>	82	<i>mitomycin</i>	100
MEDISENSE MID CONTROL	46	<i>methyltestosterone</i>	66	MOBILE LANCETS	88
MEDISENSE THIN LANCETS	88	<i>metoclopramide hcl</i>	120	<i>modafinil</i>	11
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<i>morphine concentrate</i>	113	<i>NIVESTYM</i>	65	<i>OMNIPRED</i>	59
<i>moxifloxacin</i>	60, 73	<i>nizatidine</i>	120	<i>OMNITROPE</i>	57
<i>moxifloxacin-sod.chloride(iso)</i>	73	<i>NORA-BE</i>	23	<i>ON CALL EXPRESS</i>	
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<i>mupirocin</i>	27	(contraceptive)	23	<i>ON CALL EXPRESS</i>	
<i>mupirocin calcium</i>	27	<i>norethindrone acetate</i>	67	<i>METER</i>	47
<i>MUSE</i>	56	<i>norethindrone ac-eth</i>		<i>ON CALL EXPRESS TEST</i>	
<i>MUTAMYCIN</i>	100	<i>estradiol</i>	23	<i>STRIP</i>	35
<i>MVASI</i>	101	<i>norethindrone-e.estriadiol-iron</i>	23	<i>ON CALL LANCET</i>	88
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MYORISAN	26	<i>NORTREL 1/35 (21)</i>	23	<i>DEVICE</i>	47
MYZILRA	23	<i>NORTREL 1/35 (28)</i>	23	<i>ON CALL PLUS METER</i>	47
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<i>nadolol</i>	14	<i>nortriptyline</i>	8	<i>STRIP</i>	35
<i>naloxone</i>	11	<i>NO-STICK GLUCOSE</i>	53	<i>ON CALL VIVID CONTROL</i>	47
<i>naltrexone</i>	11	<i>NOVA MAX GLUCOSE</i>		<i>ON CALL VIVID METER</i>	47
<i>naproxen</i>	83	CONTROL	47	<i>ON CALL VIVID PAL</i>	
<i>naratriptan</i>	114	<i>NOVA MAX GLUCOSE</i>		<i>METER</i>	47
NAYZILAM	116	TEST	35	<i>ON CALL VIVID TEST</i>	
NEBUPENT	76	<i>NOVA SAFETY LANCETS</i>	88	<i>STRIP</i>	35
NEBUSAL	106	<i>NOVA SUREFLEX</i>		<i>ondansetron</i>	3
NECON 0.5/35 (28)	23	LANCETS	88	<i>ondansetron hcl</i>	3
<i>nefazodone</i>	8	<i>NOVAMAX PLUS GLU-KET</i>	47	<i>ondansetron hcl (pf)</i>	3
<i>neomycin</i>	75	<i>NOVAMAX PLUS KETONE</i>	105	<i>ONETOUCH DELICA LANC DEVICE</i>	47
<i>neomycin-polymyxin b-dexameth</i>	58	<i>NOVAREL</i>	56	<i>ONETOUCH DELICA LANC</i>	
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<i>nifedipine</i>	15	<i>NULOJIX</i>	69	<i>ONETOUCH DELICA SAFETY LANCET</i>	88
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<i>nimodipine</i>	15	<i>NYLIA 1/35 (28)</i>	23	<i>COMPLETE</i>	47
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<i>nitrofurantoin monohyd/m-cryst</i>	71	<i>NYSTOP</i>	28	<i>ONETOUCH SURESOFT</i>	
		<i>OCELLA</i>	23	<i>LANCING DEV</i>	47, 88
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		<i>ODEFSEY</i>	79	<i>CONTROL</i>	47
		<i>ofloxacin</i>	54, 60	<i>ONETOUCH ULTRA TEST</i>	36
		<i>olanzapine</i>	10		

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METER	47	OZEMPIC	31	PIP BLOOD GLUCOSE	
ONETOUCH ULTRAMINI	47	PACERONE	12	MONITOR	48
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LANCET	88	pantoprazole	120	TEST STRIP	36
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METER	47	paroxetine hcl	8	PIP PEN NEEDLE	109
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ONETOUCH VERIO IQ		pemetrexed disodium	101	podofilox	30
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METER	48	penicillamine	80	POLYCIN	60
ONETOUCH VERIO MID		penicillin g potassium	73	polymyxin b sulf-	
CONTROL	48	penicillin g procaine	73	trimethoprim	60
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REFLECT METER	48	penicillin v potassium	73	posaconazole	74
ONETOUCH VERIO		pentamidine	76	potassium chlorid-d5-	
REFLECT START	48	PENTASA	85	0.45%nacl	55
ONETOUCH VERIO TEST		PENTIPS	109	potassium chloride	55
STRIPS	36	pentoxifylline	64	potassium citrate	120
ON-THE-GO LANCETS	89	PERCOCET	115	potassium iodide	58
OPSUMIT	16	PERIOGARD	105	PRADAXA	66
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ORENCIA CLICKJECT	81	phenobarbital	11	PRECISION	
ORILISSA	57	phenoxybenzamine	13	GLUCOSE/KETONE	
ORSYTHIA	24	phentermine	122	CONTR	48
oseltamivir	77	phentolamine	13	PRECISION PCX PLUS	
OSPHENA	57	phenylephrine hcl	60	TEST	36
OTEZLA	81	phenytoin	117	PRECISION PCX TEST	36
OTEZLA STARTER	81	phenytoin sodium	117	PRECISION POINT OF	
oxacillin in dextrose(iso-		phenytoin sodium extended	117	CARE TEST	36
osm)	72	PHILITH	24	PRECISION Q-I-D TEST	36
oxazepam	9	PHOSPHOLINE IODIDE	61	PRECISION XTRA B-	
oxcarbazepine	117	physostigmine salicylate	7	KETONE	105
oxybutynin chloride	121	phytonadione (vitamin k1)	66	PRECISION XTRA	
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oxycodone-acetaminophen.	115	pimozide	9	PRECISION XTRA TEST	36

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PRED MILD	59	<i>prochlorperazine maleate</i>3	<i>pyridoxine (vitamin b6)</i>122
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<i>prednisolone sodium</i>		PROCTOZONE-HC	<i>quetiapine</i>10
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MONITOR	48	PURE COMFORT PEN	RELION THIN LANCETS
PRO VOICE V8-V9 TEST		NEEDLE	RELION ULTIMA
STRIP	36	PURE COMFORT SAFETY	RELION ULTRA THIN PLUS
PRO VOICE V9 GLUCOSE		LANCETS	LANCETS
MONITOR	48	PURIXAN	<i>repaglinide</i>
<i>probencid</i>	62	PUSH BUTTON SAFETY	RETIN-A
<i>procainamide</i>	12	LANCETS	REVEAL BLOOD
<i>prochlorperazine</i>	3	<i>pyrazinamide</i>	GLUCOSE METER

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RIABNI	100	<i>ritonavir</i>	79	49 SMART SENSE TEST
RIBASPHERE	80	<i>rizatriptan</i>	114	STRIPS
<i>ribavirin</i>	80	ROBAFEN AC	26	36 SMARTDIABETES
RIDAURA	83	<i>ropinirole</i>	115	VANTAGE
<i>rifampin</i>	75	ROSADAN	27	49 SMARTTEST CONTROL
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CTRL SOLN	49	SAFETY SEAL LANCETS	89	GLUCOSE METER
RIGHTEST GD500		SAFETY-LET LANCETS	89	50 SMARTTEST PRONTO
LANCING DEVICE	49	SAJAZIR	81	STARTER
RIGHTEST GL300		<i>salsalate</i>	113	50 SMARTTEST PROTEGE
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RIGHTEST GM250S		DEPOT	112	METER
GLUCOSE METER	49	SANTYL	31	50 SMARTTEST TALKING
RIGHTEST GM260		<i>sapropterin</i>	99	METER
GLUCOSE METER	49	SAVELLA	104	36 SMARTTEST TEST
RIGHTEST GM550		<i>scopolamine base</i>	4	54 sodium bicarbonate
SYSTEM	49	SECONAL SODIUM	11	sodium chlor 0.9 %
RIGHTEST GM700SB		<i>selegiline hcl</i>	115	55 bacteriostat
GLUCOSE METER	49	<i>selenium sulfide</i>	30	55 sodium chloride
RIGHTEST GS250S TEST		SELZENTRY	78	106 sodium chloride 0.45 %
STRIPS	36	SENSORCAINE-		55 sodium chloride 0.9 %
RIGHTEST GS260 TEST		EPINEPHRINE	84	55 sodium chloride 0.9 %
STRIPS	36	SENSORCAINE-MPF	84	(flush)
RIGHTEST GS550 TEST		SENSORCAINE-		14 sodium nitroprusside
STRIPS	36	MPF/EPINEPHRINE	84	54 sodium polystyrene
RIGHTEST GS700 TEST		<i>sertraline</i>	8	54 sulfonate
STRIP	36	<i>sevelamer carbonate</i>	54	106 sodium thiosulfate
RIGHTEST GT333		<i>sevoflurane</i>	105	80 sofosbuvir-velpatasvir
GLUCOSE METER	49	SHAROBEL	24	89 SOFT TOUCH LANCETS
RIGHTEST GT333 LEV 2		SIDEKICK BLOOD		121 <i>solifenacin</i>
CTRL SOLN	49	GLUCOSE SYSTEM	49	82 SOLU-CORTEF
RIGHTEST GT333 TEST		<i>sildenafil</i>		82 SOLU-CORTEF ACT-O-
STRIP	36	(pulm.hypertension)	16	82 VIAL (PF)
RIGHTEST MAX PLUS		<i>silver sulfadiazine</i>	28	82 SOLU-MEDROL
GLUCOSE MTR	49	SIMULECT	68	82 SOLU-MEDROL (PF)
RIGHTEST MAX TEST		<i>simvastatin</i>	18	82 SOLUS V2 AUDIBLE
STRIP	36	SINGLE-LET	89	50 METER
<i>riluzole</i>	104	<i>sirolimus</i>	69	50 SOLUS V2 CONTROL
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SORINE	15	110	TECHLITE INSULIN
sotalol	15	SUREFLEX DEVICE WITH		SYRINGE
SOTALOL AF	15	LANCETS	50	96
SOVALDI	80	SUREFLEX LANCING		TECHLITE INSULN
SPIRIVA RESPIMAT	4	DEVICE	50	SYR(HALF UNIT)
spironolactone	16	SURE-JECT INSULIN		96
spironolacton-hydrochlorothiaz	16	SYRINGE	96	TECHLITE LANCETS
SPRINTEC (28)	24	SURE-LANCE	90	90
SPRYCEL	102	SURE-LANCE ULTRA THIN	90	TECHLITE PEN NEEDLE ...
SPS (WITH SORBITOL)	54	SURE-PEN LANCING		110
SRONYX	24	DEVICE	50	TELCARE BGM
SSD	28	SURE-TEST EASYPLUS		50
SSKI	58	MINI	36, 50	TELCARE BLOOD
stavudine	78	SURE-TEST EASYPLUS		GLUCOSE KIT
STERILANCE TL	89	MINI METER	50	50
STERILE WATER FOR INJECTION	112	SURE-TOUCH LANCET	90	TELCARE CONTROL
STIOLTO RESPIMAT	5	SURGIFOAM	66	90
streptomycin	75	SYEDA	24	TELCARE TEST STRIPS
STRIVERDI RESPIMAT	5	SYMFI	79	36
SUBVENITE	117	SYMFI LO	79	temazepam
succinylcholine chloride	111	SYNAREL	57	11
sucralfate	119	SYNTHAMIN 17 WITHOUT		TEMIXYS
sulfacetamide sodium	59	ELYTE	111	100
sulfacetamide sodium (acne)	26	TABLOID	101	tenofovir disoproxil fumarate
sulfacetamide-prednisolone	59	tacrolimus	31, 69	78
sulfamethoxazole-trimethoprim	69	tadalafil	56	terazosin
sulfasalazine	85	tadalafil (pulm. hypertension)	16	74
SULFATRIM	69	TAGRISSO	102	terbinafine hcl
sulindac	83	tamoxifen	103	74
sumatriptan	114	tamsulosin	120	terbutaline
sumatriptan succinate	114	TARINA FE 1/20 (28)	24	4
sunitinib malate	102	TARINA FE 1-20 EQ (28)	24	teriflunomide
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SYR. U-100	96	TAZICEF	70	106
SURE COMFORT INSULIN SYRINGE	96	TAZORAC	31	TERUMO INSULIN
SURE COMFORT LANCETS	90	TD GOLD BLOOD		SYRINGE
SURE COMFORT LANCING PEN	50	GLUCOSE MONITOR	50	96
		TD GOLD LEVEL 1		TEST N'GO BLOOD
		CONTROL	50	GLUCOSE SYSTEM
		TD GOLD LEVEL 2		50
		CONTROL	50	TEST N'GO TEST
		TD GOLD LEVEL 3		36
		CONTROL	50	testosterone
		TD GOLD TEST STRIP	36	66
				testosterone cypionate
				TESTRED
				67
				tetrabenazine
				104
				tetracaine hcl
				59
				tetracycline
				74
				THALOMID
				75
				THEO-24
				6
				theophylline
				6
				thiamine hcl (vitamin b1)
				122
				THIN LANCETS
				90
				THINPRO INSULIN
				SYRINGE
				97
				thioridazine
				11
				thiotepa
				100
				thiothixene
				10
				THROMBIN-JMI
				66
				timolol maleate
				61
				tiopronin
				120
				TIVICAY
				79
				TIVICAY PD
				79

<i>tizanidine</i>	118	TRUE COMFORT LANCET ..	90	ULTILET PEN NEEDLE.....	110
<i>tobramycin</i>	60	TRUE COMFORT PEN NEEDLE.....	110	ULTILET SAFETY LANCETS.....	90
<i>tobramycin in 0.225 % nacl</i>	75	TRUE COMFORT PRO INS SYRINGE.....	97	ULTIMA MONITOR.....	51
<i>tobramycin sulfate</i>	75	TRUE COMFORT AIR GLUCOSE METER.....	50	ULTIMA TEST STRIPS.....	37
TOBREX	60	TRUE METRIX AIR GLUCOSE METER.....	50	ULTOMIRIS.....	65
TOPCARE CLICKFINE	110	TRUE METRIX GLUCOSE METER.....	50	ULTRA CMFT INS SYR (HALF UNIT).....	98
TOPCARE ULTRA COMFORT	97	TRUE METRIX GLUCOSE TEST STRIP.....	37	ULTRA COMFORT INSULIN SYRINGE.....	98
TOPCARE UNIVERSAL1 LANCET	90	TRUE METRIX GO GLUCOSE METER.....	51	ULTRA FINE LANCETS.....	90
<i>topiramate</i>	118	TRUE METRIX LEVEL 1.....	51	ULTRA FLO INSUL SYR(HALF UNIT).....	98
<i>torsemide</i>	16	TRUE METRIX LEVEL 2.....	51	ULTRA FLO INSULIN SYRINGE.....	98
<i>tramadol</i>	114	TRUE METRIX LEVEL 3.....	51	ULTRA FLO PEN NEEDLE	110
TRANSDERM-SCOP	4	TRUE METRIX PRO TEST STRIP.....	37	ULTRA THIN II LANCETS.....	90
<i>tranylcypromine</i>	7	TRUE2GO BLOOD GLUCOSE SYSTEM.....	51	ULTRA THIN LANCETS.....	90
TRAVASOL 10 %	111	TRUECONTROL LEVEL 0....	51	ULTRA THIN PEN NEEDLE	110
<i>trazodone</i>	8	TRUECONTROL LEVEL 1....	51	ULTRA THIN PLUS LANCETS.....	90
<i>tretinoi</i> n	27	TRUEDRAW LANCING DEVICE.....	51	ULTRA TLC LANCETS.....	90
<i>tretinoi</i> n (antineoplastic)	103	TRUEPLUS INSULIN.....	97	ULTRACARE INSULIN SYRINGE.....	98
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<i>triamicinolone acetonide</i>		TRUEPLUS LANCETS.....	90	ULTRACARE PEN NEEDLE	
	30, 82, 105	TRUEPLUS PEN NEEDLE..	110	ULTRALANCE LANCETS.....	90
<i>triamterene</i>	16	TRUERESULT BLOOD GLUCOSE SYSTM.....	51	ULTRA-THIN II (SHORT) INS SYR.....	98
<i>triamterene-</i> <i>hydrochlorothiazid</i>	16	TRUETEST TEST STRIPS...	37	ULTRA-THIN II (SHORT) PEN NDL.....	110
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<i>trifluoperazine</i>	11	TRULANCE.....	85	ULTRA-THIN II LANCETS.....	90
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TRI-SPRINTEC (28)	25				
TRIVORA (28)	25				
TRI-VYLIBRA	25				
TRI-VYLIBRA LO	25				
<i>tropicamide</i>	61				
<i>trospium</i>	121				
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ተዘጋጀተዋል፡ ወደ ማረከተለው ቁጥር ፭.፻፭፻፷፻ **1-800-632-9700 (TTY 711)**.

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