



Tufts Health Plan Senior Care Options (HMO-SNP)

2021 List of Covered Drugs (Formulary)

Tufts Health Plan Senior Care Options

PLEASE READ: This document contains information about the drugs we cover in this plan

21576 Version 21

This formulary was updated on 12/01/2021. For more recent information or other questions, please contact Tufts Health Plan Senior Care Options Customer Relations at **1-855-670-5934** or, for TTY users, 711, 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday-Friday from April 1 to September 30, or visit www.thpmp.org/sco.

Tufts Health Plan Senior Care Options (HMO-SNP) | 2021 *List of Covered Drugs (Formulary)*

Introduction

This document is called the *List of Covered Drugs* (also known as the Drug List). It tells you which prescription drugs are covered by Tufts Health Plan Senior Care Options. The Drug List also tells you if there are any special rules or restrictions on any drugs covered by Tufts Health Plan Senior Care Options.

Our contact information, along with the date we last updated the Drug List, appears on the front and back cover pages. Key terms and their definitions appear in the last chapter of the *Evidence of Coverage*.

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A. Disclaimers

This is a list of drugs that members can get in *Tufts Health Plan Senior Care Options*.

- ❖ Tufts Health Plan is an HMO-SNP plan with a Medicare contract and a contract with the Commonwealth of Massachusetts Medicaid program. Enrollment in Tufts Health Plan depends on contract renewal. Tufts Health Plan Senior Care Options is a voluntary MassHealth (Medicaid) program in association with the Executive Office of Health and Human Services (EOHHS) and the Centers for Medicare & Medicaid Services (CMS).
- ❖ You can always check Tufts Health Plan Senior Care Options' up-to-date *List of Covered Drugs* online at www.thpmp.org/sco-member or by calling 1-855-670-5934 (TTY: 711).
- ❖ You can get this document for free in other formats, such as large print, braille, or audio. Call 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday - Friday from April 1 to September 30. The call is free.

Tufts Health Plan complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Tufts Health Plan does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

Tufts Health Plan:

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

If you need these services, contact Tufts Health Plan at 1-855-670-5934 (TTY: 711).

If you believe that Tufts Health Plan has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with:

Tufts Health Plan, Attention:

Civil Rights Coordinator Legal Dept.
705 Mount Auburn St. Watertown, MA 02472
Phone: 1-888-880-8699 ext. 48000, (TTY: 711)
Fax: 617-972-9048
Email: OCRCordinator@tufts-health.com

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Tufts Health Plan Civil Rights Coordinator is available to help you.

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

U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)
Complaint forms are available at www.hhs.gov/ocr/office/file/index.html.

www.thpmp.org/sco-member | 1-855-670-5934 (TTY: 711)

English: ATTENTION: If you speak English, language assistance services, free of charge, are available to you. Call 1-855-670-5934 (TTY: 711).

Arabic: ملحوظة: إذا كنت تتحدث إذكر اللغة، فإن خدمات المساعدة اللغوية متوافر لك بالمجان. اتصل ببرقم 1-855-670-5934-1 (رقم هاتف 711).

Chinese: 注意：如果您使用繁體中文，您可以免費獲得語言援助服務。請致電 1-855-670-5934 (TTY 711)。
Farsi: توجه: اگر به زبان فارسی گفتگو می کنید، تسهیلات زبانی بصورت رایگان برای شما فراهم می باشد.
1-855-670-5934 (TTY: 711)

French: ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le 1-855-670-5934 (ATS : 711).

German: ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: 1-855-670-5934 (TTY: 711).

Greek: ΠΡΟΣΟΧΗ: Αν μιλάτε ελληνικά, στη διάθεσή σας βρίσκονται υπηρεσίες γλωσσικής υποστήριξης, οι οποίες παρέχονται δωρεάν. Καλέστε 1-855-670-5934 (TTY: 711).

Gujarati: સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિઃશુદ્ધ ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. કોન્ટોન કરો 1-855-670-5934 (TTY: 711).

Haitian Creole: ATANSYON: Si w pale Kreyòl Ayisyen, gen sèvis èd pou lang ki disponib gratis pou ou. Rele 1-855-670-5934 (TTY: 711).

Italian: ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero 1-855-670-5934 (TTY: 711).

Japanese: 注意事項：日本語を話される場合、無料の言語支援をご利用いただけます。
1-855-670-5934 (TTY: 711) まで、お電話にてご連絡ください。

Khmer (Cambodian): ប្រយ័ត្ន៖ បើសិនជាអ្នកនិយាយ ភាសាខ្មែរ, សេវាឌំនួយថ្មីការសា ដោយមិនគឺតិចល្អេល្អ ពីអាជមានសំរាប់ប៉ុន្មោះ។ ចូរ ទូរស័ព្ទ 1-855-670-5934 (TTY: 711).

Korean: 주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다.
1-855-670-5934 (TTY: 711) 번으로 전화해 주십시오.

Laotian: ໂປ່າຊາບ: ທ່າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອດ້ານພາສາ, ໂດຍບໍ່ແຈ້ງຄ່າ,
ແມ່ນມີພັນໃຫ້ທ່ານ. ໂທ 1-855-670-5934 (TTY: 711).

Navajo: Díí baa akó nínízin: Díí saad bee yáníltígo Diné Bizaad, saad bee áká'ánída'áwo'dę́ę́, t'áá jiikéh, éí ná
hóló, koji' hódíílnih 1800-701-9000 (TTY: 711.)

Polish: UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej.
Zadzwoń pod numer 1-855-670-5934 (TTY: 711).

Portuguese: ATENÇÃO: Se fala português, encontram-se disponíveis serviços linguísticos, grátis.
Ligue para 1-855-670-5934 (TTY: 711).

Russian: ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните 1-855-670-5934 (телефон: 711).

Spanish: ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.
Llame al 1-855-670-5934 (TTY: 711).

Tagalog: PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tumawag sa 1-855-670-5934 (TTY: 711).

Vietnamese: CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn.
Gọi số 1-855-670-5934 (TTY: 711).

B. Frequently Asked Questions (FAQ)

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

B1. What prescription drugs are on the *List of Covered Drugs*? (We call the *List of Covered Drugs* the “Drug List” for short.)

The drugs on the *List of Covered Drugs* that starts on page 19 are the drugs covered by Tufts Health Plan Senior Care Options. The drugs are available at pharmacies within our network. A pharmacy is in our network if we have an agreement with them to work with us and provide you services. We refer to these pharmacies as “network pharmacies.”

- Tufts Health Plan Senior Care Options will cover all medically necessary drugs on the Drug List if:
 - your doctor or other prescriber says you need them to get better or stay healthy,
 - Tufts Health Plan Senior Care Options agrees that the drug is medically necessary for you, **and**
 - you fill the prescription at a Tufts Health Plan Senior Care Options network pharmacy.
- In some cases, you have to do something before you can get a drug. See question B4 for more information.

You can also see an up-to-date list of drugs that we cover on our website at www.thpmp.org/sco-member or call Customer Relations at 1-855-670-5934 (TTY: 711).

B2. Does the Drug List ever change?

Yes, and Tufts Health Plan Senior Care Options must follow Medicare and MassHealth rules when making changes. We may add or remove drugs on the Drug List during the year.

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

- Decide to require or not require prior authorization for a drug. (Prior authorization is permission from Tufts Health Plan Senior Care Options before you can get a drug.)
- Add or change the amount of a drug you can get (called quantity limits).
- Add or change step therapy restrictions on a drug. (Step therapy means you must try one drug before we will cover another drug.)

For more information on these drug rules, see question B4.

If you are taking a drug that was covered at the **beginning** of the year, we will generally not remove or change coverage of that drug **during the rest of the year** unless:

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

Questions B3 and B6 below have more information on what happens when the Drug List changes.

- You can always check Tufts Health Plan Senior Care Options' up-to-date Drug List online at www.thpmp.org/sco-member.
- You can also call Customer Relations at 1-855-670-5934 (TTY: 711) to check the current Drug List.

B3. What happens when there is a change to the Drug List?

Some changes to the Drug List will happen **immediately**. For example:

- **A new generic drug becomes available.** Sometimes, a new generic drug comes on the market that works as well as a brand name drug on the Drug List now. When that happens, we may remove the brand name drug, and add the new generic drug, but your cost for the new drug will remain \$0. When we add the new generic drug, we may also decide to keep the brand name drug on the list but change its coverage rules or limits.
 - We may not tell you before we make this change, but we will send you information about the specific change we made once it happens.
 - You or your provider can ask for an exception from these changes. We will send you a notice with the steps you can take to ask for an exception. Please see questions B10-B12 for more information on exceptions.
- **A drug is taken off the market.** If the Food and Drug Administration (FDA) says a drug you are taking is not safe or the drug's manufacturer takes a drug off the market, we will take it off the Drug List. If you are taking the drug, we will let you know. You can then talk to your doctor or other prescriber. He or she can help you decide if there is a similar drug on the Drug List you can take instead.

We may make other changes that affect the drugs you take. We will tell you in advance about these other changes to the Drug List. These changes might happen if:

- The FDA provides new guidance or there are new clinical guidelines about a drug.
- We add a generic drug that is new to the market **and**
 - Replace a brand name drug currently on the Drug List **or**
 - Change the coverage rules or limits for the brand name drug.

When these changes happen, we will:

- Tell you at least 30 days before we make the change to the Drug List **or**
- Let you know and give you a 30-day supply of the drug after you ask for a refill.

This will give you time to talk to your doctor or other prescriber. They can help you decide:

- If there is a similar drug on the Drug List you can take instead or
- Whether to ask for an exception from these changes. To learn more about exceptions, see questions B10-B12.

B4. Are there any restrictions or limits on drug coverage or any required actions to take to get certain drugs?

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

- **Prior authorization:** For some drugs, you or your doctor or other prescriber must get authorization from Tufts Health Plan Senior Care Options before you fill your prescription. Prior authorization is different from a referral. Tufts Health Plan Senior Care Options may not cover the drug if you don't get prior authorization.
- **Quantity limits:** Sometimes Tufts Health Plan Senior Care Options limits the amount of a drug you can get.
- **Step therapy:** Sometimes Tufts Health Plan Senior Care Options requires you to do step therapy. This means you will have to try drugs in a certain order for your medical condition. You might have to try one drug before we will cover another drug. If your doctor thinks the first drug doesn't work for you, then we will cover the second.
- **Non-extended day supply drug:** For certain drugs, Tufts Health Plan Senior Care Options limits quantities up to a 30-day supply per fill.

You can find out if your drug has any additional requirements or limits by looking in the tables beginning on page 19. You can also get more information by visiting our website at www.thpmp.org/sco-member. We have posted online a document that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy.

You can ask for an exception from these limits. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception. See questions B10-B12 for more information about exceptions.

B5. How will I know if the drug I want has limits or if there are required actions to take to get the drug?

The *List of Covered Drugs* on page 19 has a column labeled "Necessary actions, restrictions, or limits on use."

B6. What happens if Tufts Health Plan Senior Care Options changes their rules about how they cover some drugs (for example, prior authorization, quantity limits, and/or step therapy restrictions)?

In some cases, we will tell you in advance if we add or change prior authorization, quantity limits, and/or step therapy restrictions on a drug. See question B3 for more information about this advance notice and situations where we may not be able to tell you in advance when our rules about drugs on the Drug List change.

B7. How can I find a drug on the Drug List?

There are two ways to find a drug:

- You can search alphabetically, **or**
- You can search by medical condition.

To search **alphabetically**, look for your drug in the Index of Covered Drugs section. You can find it on page 101.

To search **by medical condition**, find the section labeled “List of drugs by medical condition” on page 17. The drugs in this section are grouped into categories depending on the type of medical conditions they are used to treat. For example, if you have a heart condition, you should look in the category “Cardiovascular Agents”. That is where you will find drugs that treat heart conditions.

B8. What if the drug I want to take is not on the Drug List?

If you don't see your drug on the Drug List, call Customer Relations at 1-855-670-5934 (TTY: 711) and ask about it. If you learn that Tufts Health Plan Senior Care Options will not cover the drug, you can do one of these things:

- Ask Customer Relations for a list of drugs like the one you want to take. Then show the list to your doctor or other prescriber. They can prescribe a drug on the Drug List that is like the one you want to take. **Or**
- You can ask the health plan to make an exception to cover your drug. See questions B10-B12 for more information about exceptions.

B9. What if I am a new Tufts Health Plan Senior Care Options member and can't find my drug on the Drug List or have a problem getting my drug?

We can help. We may cover a temporary 30-day supply of your drug during the first 90 days you are a member of Tufts Health Plan Senior Care Options. This will give you time to talk to your doctor or other prescriber. They can help you decide if there is a similar drug on the Drug List you can take instead or whether to ask for an exception.

If your prescription is written for fewer days, we will allow multiple refills to provide up to a maximum of 30 days of medication.

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

- you are taking a drug that is not on our Drug List, **or**
- our plan rules do not let you get the amount ordered by your prescriber, **or**
- the drug requires prior authorization by Tufts Health Plan Senior Care Options, **or**
- you are taking a drug that is part of a step therapy restriction.

If you are taking a drug that Tufts Health Plan Senior Care Options does not consider to be a Part D drug, you have the right to get a one-time, 72-hour supply of the drug.

If you are in a nursing home or other long-term care facility and need a drug that is not on the Drug List or if you cannot easily get the drug you need, we can help. If you have been in the plan for more than 90 days, live in a long-term care facility, and need a supply right away:

- We will cover one 31-day supply of the drug you need (unless you have a prescription for fewer days), whether or not you are a new Tufts Health Plan Senior Care Options member.
- This is in addition to the temporary supply during the first 90 days you are a member of Tufts Health Plan Senior Care Options.

As a current member, if you are admitted to or discharged from a long-term facility and experience an unplanned drug change, you can request that we approve a one-time, temporary fill of the non-covered medication to allow you time to discuss a transition plan with your physician. Your physician can also request an exception to coverage for the non-covered drug based on review for medical necessity following the standard exception process outlined previously. The temporary "first fill" will generally be up to a 31-day supply, but may be extended to allow you and your physician time to manage the complexities of multiple medications or when special circumstances warrant. You can request a temporary prescription fill by calling the Tufts Health Plan Senior Care Options Customer Relations department.

B10. Can I ask for an exception to cover my drug?

Yes. You can ask Tufts Health Plan Senior Care Options to make an exception to cover a drug that is not on the Drug List.

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

- For example, Tufts Health Plan Senior Care Options may limit the amount of a drug we will cover. If your drug has a limit, you can ask us to change the limit and cover more.
- Other examples: You can ask us to drop step therapy restrictions or prior authorization requirements.

B11. How can I ask for an exception?

To ask for an exception, call Customer Relations. A Customer Relations representative will work with you and your provider to help you ask for an exception. You can also read Chapter 9 of the *Evidence of Coverage* to learn more about exceptions.

B12. How long does it take to get an exception?

First, we must get a statement from your prescriber supporting your request for an exception. For a faster decision, include this medical information from your doctor or other prescriber when you ask for the exception. After we get the statement, we will give you a decision on your exception request within 72 hours.

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

B13. What are generic drugs?

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

Tufts Health Plan Senior Care Options covers both brand name drugs and generic drugs.

B14. What are OTC drugs?

OTC stands for “over-the-counter”. Tufts Health Plan Senior Care Options covers some OTC drugs when they are written as prescriptions by your provider.

You can read the MassHealth Standard Over-the-Counter Drug List to see what OTC drugs are covered.

In addition to the MassHealth Standard (Medicaid) OTC Drug List, Tufts Health Plan Senior Care Options provides coverage for the following drugs under your Medicare benefit:

- Benzonatate
- Chondroitin/MSM
- Coenzyme – Q10
- Fexofenadine
- Fleet Prep kits (w/o enema)
- Glucosamine/Chondroitin/MSM
- Glucosamine/MSM
- Magnesium Citrate
- Methylsulfonylmethane (MSM)
- Mucinex 600 mg
- Omega 3/Fish Oil
- Robitussin Cough + Chest Congestion DM (liquid)

B15. Does Tufts Health Plan Senior Care Options cover non-drug OTC products?

Tufts Health Plan Senior Care Options covers some non-drug OTC products when they are written as prescriptions by your provider.

Examples of non-drug OTC products include band-aids and gauze.

You can read the Tufts Health Plan Senior Care Options Drug List to see what non-drug OTC products are covered.

B16. Does Tufts Health Plan Senior Care Options cover long-term supplies of prescriptions?

- **Mail-Order Programs.** We offer a mail-order program that allows you to get up to a 90-day supply of your prescription drugs sent directly to your home. You have a \$0 copay.
- **90-Day Retail Pharmacy Programs.** Some retail pharmacies may also offer up to a 90-day supply of covered prescription drugs. You have a \$0 copay.

B17. Can I get prescriptions delivered to my home from my local pharmacy?

Your local pharmacy may be able to deliver your prescription to your home. You can call your pharmacy to find out if they offer home delivery.

B18. What is my copay?

Tufts Health Plan Senior Care Options members have no copays for prescription and over-the-counter (OTC) drugs and non-drug products as long as the member follows the plan's rules. See questions B14 and B15 for more information about OTC drugs and non-drug products.

Tiers are groups of drugs on our Drug List.

- Tier 1 drugs (Preferred Generic) have a \$0 copay
- Tier 2 drugs (Generic) have a \$0 copay
- Tier 3 drugs (Preferred Brand) have a \$0 copay
- Tier 4 drugs (Non-preferred Drug) have a \$0 copay
- Tier 5 drugs (Specialty Tier) have a \$0 copay
- Tier 6 drugs (Vaccines) have a \$0 copay

OTCs have a \$0 copay.

If you have questions, call Customer Relations at 1-855-670-5934 (TTY: 711).

C. Overview of the *List of Covered Drugs*

The *List of Covered Drugs* gives you information about the drugs covered by Tufts Health Plan Senior Care Options. If you have trouble finding your drug in the list, turn to the Index of Covered Drugs that begins on page 101. The index alphabetically lists all drugs covered by Tufts Health Plan Senior Care Options.

C1. List of drugs by medical condition

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

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

B vs D: Medicare Part B or D.

These drugs require prior authorization to determine appropriate coverage under Medicare Part B or Part D.

QL: Quantity Limit Applies.

Because of potential safety and utilization concerns, Tufts Health Plan Senior Care Options has placed dispensing limitations on a small number of prescription drugs. This means that the pharmacy will only dispense a certain quantity of a drug within a given time period. These quantities are based on recognized standards of care, such as U.S. Food and Drug Administration recommendations for use.

HI: Home Infusion Drug.

This prescription drug is covered under our medical benefit.

LA: Limited Access Drug.

This prescription may be available only at certain pharmacies.

PA: Prior Authorization Required.

The Prior Authorization process encourages rational prescribing of drug products with significant safety and/ or financial concerns. A provider can submit a request for coverage based on a member's medical need for a particular drug.

This section is continued on the next page

STPA: Step Therapy Prior Authorization Applies.

Step Therapy is an automated form of Prior Authorization, which uses claims history for approval of a drug at the point of sale. Step Therapy Programs help encourage the clinically proven use of first-line therapies and are designed to ensure the utilization of the most therapeutically appropriate and cost-effective agents first, before other treatments may be covered.

Members who are currently on drugs that meet the initial Step Therapy criteria will automatically be able to fill their prescriptions for a stepped medication. If the member does not meet the initial Step Therapy criteria, the prescription will deny at the point of sale with a message indicating that Prior Authorization (PA) is required. Physicians may submit Prior Authorization requests to Tufts Health Plan Senior Care Options for members who do not meet the Step Therapy criteria at the point of sale under the Medical Review process.

Transplant:

This drug is covered under Part B when used for a Medicare covered organ transplant.

Part B Drug:

No co-payment is required and the cost of the medication does not apply to your Part D benefit.

NEDS: Non-extended Day Supply Drug.

In an effort to contain drug costs, certain high-cost drugs will be limited up to a 30-day supply per fill.

SP: Available Through a Designated Special Pharmacy Provider.

You have the option to obtain this drug through a designated Specialty Pharmacy provider. These pharmacies specialize in supplying a select number of medications directly to our members. They also provide free delivery to your home, educational support 24/7 by phone, support of nurses and pharmacists, and will work closely with your doctor. Medications include, but are not limited to, drugs used in the treatment of multiple sclerosis, hepatitis C, rheumatoid arthritis, and cancers treated with oral medications.

SP-CVS specialty: 1-800-237-2767

The first column of the table lists the name of the drug. Generic drugs are listed in lower-case italics (for example, *omeprazole*), brand name drugs are capitalized (for example, ENTRESTO). The information in the “Necessary actions, restrictions, or limits on use” column tells you if Tufts Health Plan Senior Care Options has any rules for covering your drug.

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANTI-INFECTIVES AND INFECTIOUS DISEASE		
ANTIFUNGALS, SYSTEMIC AND ORAL TOPICAL		
<i>clotrimazole mouth/throat troche</i>	\$0 (Tier-2)	
CRESEMBA ORAL CAPSULE	\$0 (Tier-5)	NEDS
<i>fluconazole oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>fluconazole oral tablet</i>	\$0 (Tier-2)	
<i>flucytosine oral capsule</i>	\$0 (Tier-5)	NEDS
<i>griseofulvin microsize oral suspension</i>	\$0 (Tier-2)	
<i>griseofulvin microsize oral tablet</i>	\$0 (Tier-2)	
<i>griseofulvin ultramicrosize oral tablet</i>	\$0 (Tier-2)	
<i>itraconazole oral capsule</i>	\$0 (Tier-2)	
<i>itraconazole oral solution</i>	\$0 (Tier-3)	
<i>ketoconazole oral tablet</i>	\$0 (Tier-2)	
<i>micafungin sodium intravenous solution reconstituted</i>	\$0 (Tier-3)	
NOXAFIL ORAL SUSPENSION	\$0 (Tier-5)	NEDS
<i>nystatin oral tablet</i>	\$0 (Tier-2)	
<i>posaconazole oral tablet delayed release</i>	\$0 (Tier-5)	NEDS
<i>terbinafine hcl oral tablet</i>	\$0 (Tier-1)	QL (42 EA per 42 days)
<i>voriconazole oral suspension reconstituted</i>	\$0 (Tier-5)	NEDS
<i>voriconazole oral tablet 200 mg</i>	\$0 (Tier-5)	QL (28 EA per 14 days); NEDS
<i>voriconazole oral tablet 50 mg</i>	\$0 (Tier-4)	QL (56 EA per 14 days)
ANTI-INFECTIVES, MISCELLANEOUS		
AEMCOLO ORAL TABLET DELAYED RELEASE	\$0 (Tier-4)	QL (12 EA per 3 days)
<i>albendazole oral tablet</i>	\$0 (Tier-5)	NEDS
ARIKAYCE INHALATION SUSPENSION	\$0 (Tier-5)	NEDS
FIRVANQ ORAL SOLUTION RECONSTITUTED	\$0 (Tier-4)	
<i>fosfomycin tromethamine oral packet</i>	\$0 (Tier-3)	
<i>ivermectin oral tablet</i>	\$0 (Tier-2)	
<i>linezolid oral suspension reconstituted</i>	\$0 (Tier-5)	NEDS
<i>linezolid oral tablet</i>	\$0 (Tier-4)	
<i>methenamine hippurate oral tablet</i>	\$0 (Tier-2)	
<i>metronidazole oral capsule</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metronidazole oral tablet</i>	\$0 (Tier-2)	
MONUROL ORAL PACKET	\$0 (Tier-4)	
<i>neomycin sulfate oral tablet</i>	\$0 (Tier-1)	
<i>nitazoxanide oral tablet</i>	\$0 (Tier-3)	
<i>nitrofurantoin macrocrystal oral capsule</i>	\$0 (Tier-2)	
<i>nitrofurantoin monohyd macro oral capsule</i>	\$0 (Tier-2)	
<i>praziquantel oral tablet</i>	\$0 (Tier-3)	
SIVEXTRO ORAL TABLET	\$0 (Tier-5)	NEDS
STROMECTOL ORAL TABLET	\$0 (Tier-3)	
<i>trimethoprim oral tablet</i>	\$0 (Tier-1)	
<i>vancomycin hcl oral capsule</i>	\$0 (Tier-3)	
<i>vancomycin hcl oral solution reconstituted</i>	\$0 (Tier-4)	
XENLETA ORAL TABLET	\$0 (Tier-5)	NEDS
XIFAXAN ORAL TABLET 200 MG	\$0 (Tier-5)	NEDS
XIFAXAN ORAL TABLET 550 MG	\$0 (Tier-5)	PA; NEDS
ANTIMALARIALS AND ANTIPROTOZOALS		
<i>atovaquone oral suspension</i>	\$0 (Tier-5)	NEDS
<i>atovaquone-proguanil hcl oral tablet</i>	\$0 (Tier-4)	
BENZNIDAZOLE ORAL TABLET	\$0 (Tier-4)	
<i>chloroquine phosphate oral tablet</i>	\$0 (Tier-2)	
COARTEM ORAL TABLET	\$0 (Tier-3)	QL (24 EA per 3 days)
<i>dapsone oral tablet</i>	\$0 (Tier-4)	
DARAPRIM ORAL TABLET	\$0 (Tier-3)	
<i>hydroxychloroquine sulfate oral tablet</i>	\$0 (Tier-2)	
IMPAVIDO ORAL CAPSULE	\$0 (Tier-5)	NEDS
KRINTAFEL ORAL TABLET	\$0 (Tier-3)	
LAMPIT ORAL TABLET	\$0 (Tier-4)	
<i>mefloquine hcl oral tablet</i>	\$0 (Tier-2)	
<i>paromomycin sulfate oral capsule</i>	\$0 (Tier-2)	
PENTAM INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>pentamidine isethionate inhalation solution reconstituted</i>	\$0 (Tier-3)	B vs D
<i>pentamidine isethionate injection solution reconstituted</i>	\$0 (Tier-3)	
<i>primaquine phosphate oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>pyrimethamine oral tablet</i>	\$0 (Tier-3)	
<i>quinine sulfate oral capsule</i>	\$0 (Tier-2)	
<i>tinidazole oral tablet</i>	\$0 (Tier-2)	
ANTIVIRALS		
<i>abacavir sulfate oral solution</i>	\$0 (Tier-3)	
<i>abacavir sulfate oral tablet</i>	\$0 (Tier-2)	
<i>abacavir sulfate-lamivudine oral tablet</i>	\$0 (Tier-3)	
<i>abacavir-lamivudine-zidovudine oral tablet</i>	\$0 (Tier-5)	NEDS
<i>acyclovir oral capsule</i>	\$0 (Tier-1)	
<i>acyclovir oral suspension</i>	\$0 (Tier-3)	
<i>acyclovir oral tablet</i>	\$0 (Tier-2)	
<i>adefovir dipivoxil oral tablet</i>	\$0 (Tier-5)	NEDS
<i>amantadine hcl oral capsule</i>	\$0 (Tier-2)	
<i>amantadine hcl oral solution</i>	\$0 (Tier-2)	
<i>amantadine hcl oral syrup</i>	\$0 (Tier-2)	
<i>amantadine hcl oral tablet</i>	\$0 (Tier-2)	
APTIVUS ORAL CAPSULE	\$0 (Tier-5)	NEDS
<i>atazanavir sulfate oral capsule</i>	\$0 (Tier-4)	
ATRIPLA ORAL TABLET	\$0 (Tier-5)	NEDS
BIKTARVY ORAL TABLET	\$0 (Tier-5)	NEDS
CIMDUO ORAL TABLET	\$0 (Tier-5)	NEDS
COMPLERA ORAL TABLET	\$0 (Tier-5)	NEDS
DELSTRIGO ORAL TABLET	\$0 (Tier-3)	
DESCOVY ORAL TABLET	\$0 (Tier-5)	NEDS
DOVATO ORAL TABLET	\$0 (Tier-5)	NEDS
EDURANT ORAL TABLET	\$0 (Tier-5)	NEDS
<i>efavirenz oral capsule</i>	\$0 (Tier-3)	
<i>efavirenz oral tablet</i>	\$0 (Tier-5)	NEDS
<i>efavirenz-emtricitab-tenofovir oral tablet</i>	\$0 (Tier-5)	NEDS
<i>efavirenz-lamivudine-tenofovir oral tablet</i>	\$0 (Tier-5)	NEDS
<i>emtricitabine oral capsule</i>	\$0 (Tier-3)	
<i>emtricitabine-tenofovir df oral tablet</i>	\$0 (Tier-5)	NEDS
EMTRIVA ORAL CAPSULE	\$0 (Tier-3)	
EMTRIVA ORAL SOLUTION	\$0 (Tier-3)	
<i>entecavir oral tablet</i>	\$0 (Tier-3)	
EPCLUSIA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EPIVIR ORAL SOLUTION	\$0 (Tier-3)	
<i>etravirine oral tablet 100 mg</i>	\$0 (Tier-3)	
<i>etravirine oral tablet 200 mg</i>	\$0 (Tier-5)	NEDS
EVOTAZ ORAL TABLET	\$0 (Tier-5)	NEDS
<i>famciclovir oral tablet</i>	\$0 (Tier-4)	
<i>fosamprenavir calcium oral tablet</i>	\$0 (Tier-5)	NEDS
FUZEON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	SP-CVS specialty; NEDS
GENVOYA ORAL TABLET	\$0 (Tier-5)	NEDS
HARVONI ORAL PACKET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HARVONI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
INTELENCE ORAL TABLET 100 MG, 25 MG	\$0 (Tier-3)	
INTELENCE ORAL TABLET 200 MG	\$0 (Tier-5)	NEDS
INTRON A INJECTION SOLUTION	\$0 (Tier-3)	SP-CVS specialty
INTRON A INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	SP-CVS specialty
INVIRASE ORAL TABLET	\$0 (Tier-5)	NEDS
ISENTRESS HD ORAL TABLET	\$0 (Tier-5)	QL (60 EA per 30 days); NEDS
ISENTRESS ORAL PACKET	\$0 (Tier-3)	
ISENTRESS ORAL TABLET	\$0 (Tier-5)	QL (120 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 100 MG	\$0 (Tier-5)	QL (180 EA per 30 days); NEDS
ISENTRESS ORAL TABLET CHEWABLE 25 MG	\$0 (Tier-3)	QL (720 EA per 30 days)
JULUCA ORAL TABLET	\$0 (Tier-5)	NEDS
KALETRA ORAL TABLET 100-25 MG	\$0 (Tier-3)	
KALETRA ORAL TABLET 200-50 MG	\$0 (Tier-5)	NEDS
<i>lamivudine oral solution</i>	\$0 (Tier-2)	
<i>lamivudine oral tablet</i>	\$0 (Tier-2)	
<i>lamivudine-zidovudine oral tablet</i>	\$0 (Tier-2)	
LEXIVA ORAL SUSPENSION	\$0 (Tier-3)	
<i>lopinavir-ritonavir oral solution</i>	\$0 (Tier-3)	
<i>lopinavir-ritonavir oral tablet 100-25 mg</i>	\$0 (Tier-3)	
<i>lopinavir-ritonavir oral tablet 200-50 mg</i>	\$0 (Tier-4)	
MAVYRET ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>nevirapine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nevirapine oral suspension</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nevirapine oral tablet</i>	\$0 (Tier-2)	
NORVIR ORAL PACKET	\$0 (Tier-3)	
NORVIR ORAL SOLUTION	\$0 (Tier-3)	
ODEFSEY ORAL TABLET	\$0 (Tier-5)	NEDS
<i>oseltamivir phosphate oral capsule</i>	\$0 (Tier-1)	
<i>oseltamivir phosphate oral suspension reconstituted</i>	\$0 (Tier-1)	
PEGASYS SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; QL (4 ML per 28 days); NEDS
PIFELTRO ORAL TABLET	\$0 (Tier-5)	NEDS
PREVYMIS ORAL TABLET	\$0 (Tier-5)	PA; NEDS
PREZCOBIX ORAL TABLET	\$0 (Tier-5)	NEDS
PREZISTA ORAL SUSPENSION	\$0 (Tier-5)	NEDS
PREZISTA ORAL TABLET 150 MG, 600 MG, 800 MG	\$0 (Tier-5)	NEDS
PREZISTA ORAL TABLET 75 MG	\$0 (Tier-4)	
RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (60 EA per 180 days)
REYATAZ ORAL PACKET	\$0 (Tier-5)	NEDS
<i>ribavirin oral capsule</i>	\$0 (Tier-2)	SP-CVS specialty
<i>ribavirin oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty
<i>rimantadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>ritonavir oral tablet</i>	\$0 (Tier-3)	
RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-5)	NEDS
SELZENTRY ORAL SOLUTION	\$0 (Tier-3)	QL (1800 ML per 30 days)
SELZENTRY ORAL TABLET 150 MG	\$0 (Tier-5)	QL (60 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 25 MG	\$0 (Tier-3)	QL (120 EA per 30 days)
SELZENTRY ORAL TABLET 300 MG	\$0 (Tier-5)	QL (120 EA per 30 days); NEDS
SELZENTRY ORAL TABLET 75 MG	\$0 (Tier-3)	QL (60 EA per 30 days)
STRIBILD ORAL TABLET	\$0 (Tier-5)	NEDS
SYMFI LO ORAL TABLET	\$0 (Tier-5)	NEDS
SYMFI ORAL TABLET	\$0 (Tier-5)	NEDS
SYMTUZA ORAL TABLET	\$0 (Tier-5)	NEDS
TEMIXYS ORAL TABLET	\$0 (Tier-5)	NEDS
<i>tenofovir disoproxil fumarate oral tablet</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TIVICAY ORAL TABLET 10 MG	\$0 (Tier-3)	
TIVICAY ORAL TABLET 25 MG, 50 MG	\$0 (Tier-5)	NEDS
TIVICAY PD ORAL TABLET SOLUBLE	\$0 (Tier-4)	
TRIUMEQ ORAL TABLET	\$0 (Tier-5)	NEDS
TRUVADA ORAL TABLET	\$0 (Tier-5)	NEDS
TYBOST ORAL TABLET	\$0 (Tier-3)	
<i>valacyclovir hcl oral tablet</i>	\$0 (Tier-3)	
<i>valganciclovir hcl oral solution reconstituted</i>	\$0 (Tier-5)	NEDS
<i>valganciclovir hcl oral tablet</i>	\$0 (Tier-5)	NEDS
VEMLIDY ORAL TABLET	\$0 (Tier-5)	NEDS
VIDEX EC ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-3)	
VIDEX ORAL SOLUTION RECONSTITUTED	\$0 (Tier-3)	
VIRACEPT ORAL TABLET 250 MG	\$0 (Tier-3)	
VIRACEPT ORAL TABLET 625 MG	\$0 (Tier-5)	NEDS
VIREAD ORAL POWDER	\$0 (Tier-5)	NEDS
VIREAD ORAL TABLET	\$0 (Tier-5)	NEDS
VOSEVI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-4)	QL (1 EA per 7 days)
XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-4)	QL (1 EA per 7 days)
ZIAGEN ORAL TABLET	\$0 (Tier-3)	
<i>zidovudine oral capsule</i>	\$0 (Tier-2)	
<i>zidovudine oral syrup</i>	\$0 (Tier-2)	
<i>zidovudine oral tablet</i>	\$0 (Tier-2)	
BETA-LACTAM ANTIBIOTICS		
<i>amoxicillin oral capsule</i>	\$0 (Tier-1)	
<i>amoxicillin oral suspension reconstituted</i>	\$0 (Tier-1)	
<i>amoxicillin oral tablet</i>	\$0 (Tier-1)	
<i>amoxicillin oral tablet chewable</i>	\$0 (Tier-1)	
<i>amoxicillin-pot clavulanate er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet</i>	\$0 (Tier-2)	
<i>amoxicillin-pot clavulanate oral tablet chewable</i>	\$0 (Tier-2)	
<i>ampicillin oral capsule</i>	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN C-R INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
BICILLIN L-A INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
<i>cefaclor er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>cefaclor oral capsule</i>	\$0 (Tier-2)	
<i>cefaclor oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral capsule</i>	\$0 (Tier-1)	
<i>cefadroxil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefadroxil oral tablet</i>	\$0 (Tier-2)	
<i>cefdinir oral capsule</i>	\$0 (Tier-2)	
<i>cefdinir oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefixime oral capsule</i>	\$0 (Tier-3)	
<i>cefixime oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefpodoxime proxetil oral tablet</i>	\$0 (Tier-2)	
<i>cefprozil oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>cefprozil oral tablet</i>	\$0 (Tier-2)	
<i>cefuroxime axetil oral tablet</i>	\$0 (Tier-2)	
<i>cephalexin oral capsule</i>	\$0 (Tier-1)	
<i>cephalexin oral suspension reconstituted</i>	\$0 (Tier-3)	
<i>cephalexin oral tablet</i>	\$0 (Tier-2)	
<i>dicloxacillin sodium oral capsule</i>	\$0 (Tier-3)	
<i>penicillin v potassium oral solution reconstituted</i>	\$0 (Tier-1)	
<i>penicillin v potassium oral tablet</i>	\$0 (Tier-1)	
SUPRAX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-4)	
SUPRAX ORAL TABLET CHEWABLE	\$0 (Tier-4)	
MACROLIDES AND CLINDAMYCIN		
<i>azithromycin oral packet</i>	\$0 (Tier-2)	
<i>azithromycin oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>azithromycin oral tablet</i>	\$0 (Tier-1)	
<i>clarithromycin er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>clarithromycin oral suspension reconstituted</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>clarithromycin oral tablet</i>	\$0 (Tier-2)	
<i>clindamycin hcl oral capsule</i>	\$0 (Tier-1)	
<i>clindamycin palmitate hcl oral solution reconstituted</i>	\$0 (Tier-3)	
DIFICID ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-5)	PA; NEDS
DIFICID ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>e.e.s. 400 oral tablet</i>	\$0 (Tier-2)	
<i>erythrocin stearate oral tablet</i>	\$0 (Tier-3)	
<i>erythromycin base oral capsule delayed release particles</i>	\$0 (Tier-2)	
<i>erythromycin base oral tablet</i>	\$0 (Tier-3)	
<i>erythromycin base oral tablet delayed release</i>	\$0 (Tier-3)	
<i>erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml</i>	\$0 (Tier-3)	
<i>erythromycin ethylsuccinate oral suspension reconstituted 400 mg/5ml</i>	\$0 (Tier-2)	
<i>erythromycin ethylsuccinate oral tablet</i>	\$0 (Tier-2)	
MYCOBACTERIAL INFECTIONS		
<i>ethambutol hcl oral tablet</i>	\$0 (Tier-3)	
<i>isoniazid oral syrup</i>	\$0 (Tier-2)	
<i>isoniazid oral tablet</i>	\$0 (Tier-1)	
PASER ORAL PACKET	\$0 (Tier-4)	
<i>pretomanid oral tablet</i>	\$0 (Tier-4)	
PRIFTIN ORAL TABLET	\$0 (Tier-3)	
<i>pyrazinamide oral tablet</i>	\$0 (Tier-2)	
<i>rifabutin oral capsule</i>	\$0 (Tier-2)	
<i>rifampin oral capsule</i>	\$0 (Tier-3)	
SIRTURO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
TRECATOR ORAL TABLET	\$0 (Tier-4)	
QUINOLONES		
BAXDELA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	HI; NEDS
BAXDELA ORAL TABLET	\$0 (Tier-5)	NEDS
<i>ciprofloxacin hcl oral tablet</i>	\$0 (Tier-1)	
<i>levofloxacin oral solution</i>	\$0 (Tier-3)	
<i>levofloxacin oral tablet</i>	\$0 (Tier-1)	
<i>moxifloxacin hcl oral tablet</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>ofloxacin oral tablet</i>	\$0 (Tier-2)	
SULFONAMIDES		
<i>sulfadiazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral suspension</i>	\$0 (Tier-2)	
<i>sulfamethoxazole-trimethoprim oral tablet</i>	\$0 (Tier-1)	
TETRACYCLINES		
<i>demeclacycline hcl oral tablet</i>	\$0 (Tier-4)	
<i>doxycycline hyclate oral capsule 100 mg</i>	\$0 (Tier-3)	
<i>doxycycline hyclate oral capsule 50 mg</i>	\$0 (Tier-1)	
<i>doxycycline hyclate oral tablet</i>	\$0 (Tier-2)	
<i>doxycycline hyclate oral tablet delayed release</i>	\$0 (Tier-3)	
<i>doxycycline monohydrate oral capsule</i>	\$0 (Tier-1)	
<i>doxycycline monohydrate oral suspension reconstituted</i>	\$0 (Tier-2)	
<i>doxycycline monohydrate oral tablet 100 mg, 50 mg, 75 mg</i>	\$0 (Tier-1)	
<i>doxycycline monohydrate oral tablet 150 mg</i>	\$0 (Tier-3)	
<i>minocycline hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>minocycline hcl oral capsule</i>	\$0 (Tier-2)	
<i>minocycline hcl oral tablet</i>	\$0 (Tier-4)	
<i>monodoxine nl oral capsule</i>	\$0 (Tier-1)	
NUZYRA ORAL TABLET	\$0 (Tier-5)	NEDS
<i>tetracycline hcl oral capsule</i>	\$0 (Tier-3)	
VIBRAMYCIN ORAL SYRUP	\$0 (Tier-4)	
BLOOD MODIFYING AGENTS		
ANTIPLATELET THERAPY		
<i>anagrelide hcl oral capsule</i>	\$0 (Tier-2)	
<i>aspirin-dipyridamole er oral capsule extended release 12 hour</i>	\$0 (Tier-3)	
BRILINTA ORAL TABLET	\$0 (Tier-3)	
<i>cilostazol oral tablet</i>	\$0 (Tier-1)	
<i>clopidogrel bisulfate oral tablet</i>	\$0 (Tier-1)	
<i>dipyridamole oral tablet</i>	\$0 (Tier-3)	
<i>prasugrel hcl oral tablet</i>	\$0 (Tier-3)	
BLOOD CELL STIMULATORS		
DOPTELET ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
LEUKINE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-5)	SP-CVS specialty; NEDS
MULPLETA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
PROMACTA ORAL PACKET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PROMACTA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 10000 UNIT/ML(1ML), 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML	\$0 (Tier-3)	SP-CVS specialty
RETACRIT INJECTION SOLUTION 40000 UNIT/ML	\$0 (Tier-5)	SP-CVS specialty; NEDS
UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
ZARXIO INJECTION SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
BLOOD THINNERS		
ELIQUIS DVT/PE STARTER PACK ORAL TABLET	\$0 (Tier-3)	
ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
ELIQUIS ORAL TABLET	\$0 (Tier-3)	
<i>enoxaparin sodium subcutaneous solution</i>	\$0 (Tier-3)	
<i>fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 5 mg/0.4ml, 7.5 mg/0.6ml</i>	\$0 (Tier-5)	NEDS
<i>fondaparinux sodium subcutaneous solution 2.5 mg/0.5ml</i>	\$0 (Tier-2)	
FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 7500 UNIT/0.3ML, 95000 UNIT/3.8ML	\$0 (Tier-5)	NEDS
FRAGMIN SUBCUTANEOUS SOLUTION 2500 UNIT/0.2ML, 5000 UNIT/0.2ML	\$0 (Tier-3)	
<i>jantoven oral tablet</i>	\$0 (Tier-1)	
PRADAXA ORAL CAPSULE	\$0 (Tier-4)	
<i>warfarin sodium oral tablet</i>	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XARELTO ORAL TABLET	\$0 (Tier-3)	
XARELTO STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-3)	
BLOOD, MISCELLANEOUS		
CABLIVI INJECTION KIT	\$0 (Tier-5)	NEDS
OXBRYTA ORAL TABLET	\$0 (Tier-5)	SP-CVS specialty; NEDS
<i>pentoxifylline er oral tablet extended release</i>	\$0 (Tier-2)	
TAVALISSE ORAL TABLET	\$0 (Tier-5)	QL (60 EA per 30 days); NEDS
<i>tranexamic acid oral tablet</i>	\$0 (Tier-2)	
CANCER DRUGS		
INJECTABLE AGENTS		
SYNRIBO SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	NEDS
ORAL AGENTS		
<i>abiraterone acetate oral tablet</i>	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
AFINITOR DISPERZ ORAL TABLET SOLUBLE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
AFINITOR ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
ALECensa ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ALKERAN ORAL TABLET	\$0 (Tier-3)	Part B
ALUNBRIG ORAL TABLET	\$0 (Tier-5)	PA; NEDS
ALUNBRIG ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
<i>anastrozole oral tablet</i>	\$0 (Tier-1)	
AYVAKIT ORAL TABLET	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
BALVERSA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>bexarotene oral capsule</i>	\$0 (Tier-5)	SP-CVS specialty; NEDS
<i>bicalutamide oral tablet</i>	\$0 (Tier-2)	SP-CVS specialty
BOSULIF ORAL TABLET 100 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
BOSULIF ORAL TABLET 400 MG, 500 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
BRAFTOVI ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
BRUKINSA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
CABOMETYX ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
CALQUENCE ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
<i>capecitabine oral tablet</i>	\$0 (Tier-5)	Part B; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CAPRELSA ORAL TABLET 100 MG	\$0 (Tier-5)	PA; QL (60 EA per 30 days); NEDS
CAPRELSA ORAL TABLET 300 MG	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
COMETRIQ (100 MG DAILY DOSE) ORAL KIT	\$0 (Tier-5)	PA; NEDS
COMETRIQ (140 MG DAILY DOSE) ORAL KIT	\$0 (Tier-5)	PA; NEDS
COMETRIQ (60 MG DAILY DOSE) ORAL KIT	\$0 (Tier-5)	PA; NEDS
COPIKTRA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
COTELLIC ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>cyclophosphamide oral capsule</i>	\$0 (Tier-3)	B vs D; SP-CVS specialty
<i>cyclophosphamide oral tablet</i>	\$0 (Tier-3)	B vs D; SP-CVS specialty
DAURISMO ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
DROXIA ORAL CAPSULE	\$0 (Tier-3)	
EMCYT ORAL CAPSULE	\$0 (Tier-3)	SP-CVS specialty
ERIVEDGE ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ERLEADA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>erlotinib hcl oral tablet 100 mg</i>	\$0 (Tier-5)	SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>erlotinib hcl oral tablet 150 mg, 25 mg</i>	\$0 (Tier-5)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>etoposide oral capsule</i>	\$0 (Tier-2)	Part B; SP-CVS specialty
<i>everolimus oral tablet</i>	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
<i>exemestane oral tablet</i>	\$0 (Tier-2)	
FARYDAK ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>flutamide oral capsule</i>	\$0 (Tier-2)	
FOTIVDA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
GAVRETO ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
GILOTRIF ORAL TABLET	\$0 (Tier-5)	PA; NEDS
HYCAMTIN ORAL CAPSULE	\$0 (Tier-3)	Part B; SP-CVS specialty
<i>hydroxyurea oral capsule</i>	\$0 (Tier-2)	
IBRANCE ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
IBRANCE ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ICLUSIG ORAL TABLET	\$0 (Tier-5)	PA; NEDS
IDHIFA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>imatinib mesylate oral tablet</i>	\$0 (Tier-5)	SP-CVS specialty; NEDS
IMBRUVICA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
IMBRUVICA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
INLYTA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
INQOVI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
INREBIC ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
IRESSA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
JAKAFI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (400 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA (600 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KISQALI FEMARA(200 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KOSELUGO ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
<i>lapatinib ditosylate oral tablet</i>	\$0 (Tier-5)	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
LENVIMA (10 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (12 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (14 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (18 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (20 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (24 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (4 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LENVIMA (8 MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>letrozole oral tablet</i>	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
LEUKERAN ORAL TABLET	\$0 (Tier-3)	
LONSURF ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LORBRENA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LUMAKRAS ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LYNPARZA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
LYSODREN ORAL TABLET	\$0 (Tier-3)	
MATULANE ORAL CAPSULE	\$0 (Tier-5)	NEDS
<i>megestrol acetate oral tablet</i>	\$0 (Tier-1)	
MEKINIST ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
MEKTOVI ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>melphalan oral tablet</i>	\$0 (Tier-2)	Part B
<i>mercaptopurine oral tablet</i>	\$0 (Tier-2)	
MYLERAN ORAL TABLET	\$0 (Tier-3)	Part B
NERLYNX ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NEXAVAR ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (220 EA per 30 days); NEDS
<i>nilutamide oral tablet</i>	\$0 (Tier-5)	NEDS
NINLARO ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUBEQA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
ODOMZO ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ONUREG ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ORGOVYXX ORAL TABLET	\$0 (Tier-5)	PA; NEDS
PEMAZYRE ORAL TABLET	\$0 (Tier-5)	PA; NEDS
PIQRAY (200 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PIQRAY (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PIQRAY (300 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
POMALYST ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PURIXAN ORAL SUSPENSION	\$0 (Tier-5)	NEDS
QINLOCK ORAL TABLET	\$0 (Tier-5)	PA; NEDS
RETEVMO ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
REVLIMID ORAL CAPSULE	\$0 (Tier-5)	PA; LA; SP-CVS specialty; NEDS
ROZLYTREK ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
RUBRACA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RYDAPT ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
SOLTAMOX ORAL SOLUTION	\$0 (Tier-3)	
SPRYCEL ORAL TABLET 100 MG, 140 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
SPRYCEL ORAL TABLET 20 MG, 50 MG, 70 MG, 80 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
STIVARGA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
<i>sunitinib malate oral capsule</i>	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
SUTENT ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
TABLOID ORAL TABLET	\$0 (Tier-3)	SP-CVS specialty
TABRECTA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
TAFINLAR ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
TAGRISSO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
TALZENNA ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>tamoxifen citrate oral tablet</i>	\$0 (Tier-2)	
TARGETIN ORAL CAPSULE	\$0 (Tier-5)	SP-CVS specialty; NEDS
TASIGNA ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
TAZVERIK ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>temozolomide oral capsule</i>	\$0 (Tier-3)	Part B; SP-CVS specialty
TEPMETKO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
THALOMID ORAL CAPSULE	\$0 (Tier-5)	SP-CVS specialty; NEDS
TIBSOVO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>toremifene citrate oral tablet</i>	\$0 (Tier-3)	
<i>tretinooin oral capsule</i>	\$0 (Tier-5)	SP-CVS specialty; NEDS
TRUSELTIQ (100MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; NEDS
TRUSELTIQ (125MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; NEDS
TRUSELTIQ (50MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; NEDS
TRUSELTIQ (75MG DAILY DOSE) ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; NEDS
TUKYSA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
TURALIO ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
TYKERB ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (180 EA per 30 days); NEDS
UKONIQ ORAL TABLET	\$0 (Tier-5)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VENCLEXTA ORAL TABLET 10 MG, 50 MG	\$0 (Tier-3)	PA
VENCLEXTA ORAL TABLET 100 MG	\$0 (Tier-5)	PA; NEDS
VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
VERZENIO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
VITRAKVI ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
VITRAKVI ORAL SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
VIZIMPRO ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
VOTRIENT ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
WELIREG ORAL TABLET	\$0 (Tier-5)	PA; NEDS
XALKORI ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
XOSPATA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XTANDI ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
XTANDI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
YONSA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ZEJULA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
ZELBORA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ZOLINZA ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ZYDELIG ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ZYKADIA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PROTECTIVE AGENTS		
leucovorin calcium oral tablet	\$0 (Tier-2)	
MESNEX ORAL TABLET	\$0 (Tier-5)	NEDS

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
XURIDEN ORAL PACKET	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
CARDIOVASCULAR AGENTS		
ACE INHIBITORS		
<i>benazepril hcl oral tablet</i>	\$0 (Tier-1)	
<i>captopril oral tablet</i>	\$0 (Tier-4)	
<i>enalapril maleate oral tablet</i>	\$0 (Tier-2)	
<i>fosinopril sodium oral tablet</i>	\$0 (Tier-1)	
<i>lisinopril oral tablet</i>	\$0 (Tier-1)	
<i>moexipril hcl oral tablet</i>	\$0 (Tier-3)	
<i>perindopril erbumine oral tablet</i>	\$0 (Tier-3)	
<i>quinapril hcl oral tablet</i>	\$0 (Tier-1)	
<i>ramipril oral capsule</i>	\$0 (Tier-1)	
<i>trandolapril oral tablet</i>	\$0 (Tier-2)	
ALPHA1 BLOCKERS		
CARDURA XL ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
<i>doxazosin mesylate oral tablet</i>	\$0 (Tier-1)	
<i>prazosin hcl oral capsule</i>	\$0 (Tier-1)	
<i>terazosin hcl oral capsule</i>	\$0 (Tier-2)	
ANGINA		
CORLANOR ORAL SOLUTION	\$0 (Tier-4)	
CORLANOR ORAL TABLET	\$0 (Tier-4)	
<i>isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg</i>	\$0 (Tier-1)	
<i>isosorbide dinitrate oral tablet 40 mg</i>	\$0 (Tier-3)	
<i>isosorbide mononitrate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isosorbide mononitrate oral tablet</i>	\$0 (Tier-2)	
NITRO-BID TRANSDERMAL OINTMENT	\$0 (Tier-4)	
<i>nitroglycerin sublingual tablet sublingual</i>	\$0 (Tier-2)	
<i>nitroglycerin transdermal patch 24 hour</i>	\$0 (Tier-2)	
<i>nitroglycerin translingual solution</i>	\$0 (Tier-3)	
NITROSTAT SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-3)	
<i>ranolazine er oral tablet extended release 12 hour</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ANGIOTENSIN II RECEPTOR BLOCKERS		
<i>candesartan cilexetil oral tablet</i>	\$0 (Tier-2)	
<i>irbesartan oral tablet</i>	\$0 (Tier-2)	
<i>losartan potassium oral tablet</i>	\$0 (Tier-1)	
<i>olmesartan medoxomil oral tablet</i>	\$0 (Tier-3)	
<i>telmisartan oral tablet</i>	\$0 (Tier-3)	
<i>valsartan oral tablet</i>	\$0 (Tier-2)	
ANTI-ARRHYTHMICS AND CARDIAC GLYCOSIDES		
<i>amiodarone hcl oral tablet</i>	\$0 (Tier-2)	
<i>digitek oral tablet</i>	\$0 (Tier-1)	
<i>digox oral tablet</i>	\$0 (Tier-1)	
<i>digoxin oral solution</i>	\$0 (Tier-1)	
<i>digoxin oral tablet</i>	\$0 (Tier-1)	
<i>disopyramide phosphate oral capsule</i>	\$0 (Tier-4)	
<i>dofetilide oral capsule</i>	\$0 (Tier-4)	
<i>flecainide acetate oral tablet</i>	\$0 (Tier-2)	
LANOXIN ORAL TABLET	\$0 (Tier-4)	
<i>mexiletine hcl oral capsule</i>	\$0 (Tier-2)	
MULTAQ ORAL TABLET	\$0 (Tier-4)	
NORPACE CR ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-4)	
<i>propafenone hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-4)	
<i>propafenone hcl oral tablet</i>	\$0 (Tier-2)	
<i>quinidine gluconate er oral tablet extended release</i>	\$0 (Tier-2)	
<i>quinidine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>sorine oral tablet</i>	\$0 (Tier-2)	
<i>sotalol hcl (af) oral tablet</i>	\$0 (Tier-1)	
<i>sotalol hcl oral tablet</i>	\$0 (Tier-1)	
SOTYLIZE ORAL SOLUTION	\$0 (Tier-4)	
ANTIHYPERTENSIVE FIXED-DOSE COMBINATION PRODUCTS		
<i>amlodipine besy-benazepril hcl oral capsule</i>	\$0 (Tier-1)	
<i>amlodipine besylate-valsartan oral tablet</i>	\$0 (Tier-2)	
<i>amlodipine-atorvastatin oral tablet</i>	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>amlodipine-olmesartan oral tablet</i>	\$0 (Tier-3)	
<i>amlodipine-valsartan-hctz oral tablet</i>	\$0 (Tier-3)	
<i>atenolol-chlorthalidone oral tablet</i>	\$0 (Tier-1)	
<i>benazepril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-1)	
<i>candesartan cilexetil-hctz oral tablet</i>	\$0 (Tier-1)	
<i>enalapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-1)	
ENTRESTO ORAL TABLET	\$0 (Tier-3)	
<i>fosinopril sodium-hctz oral tablet</i>	\$0 (Tier-1)	
<i>irbesartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>lisinopril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-1)	
<i>losartan potassium-hctz oral tablet</i>	\$0 (Tier-1)	
<i>metoprolol-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
<i>olmesartan medoxomil-hctz oral tablet</i>	\$0 (Tier-3)	
<i>olmesartan-amlodipine-hctz oral tablet</i>	\$0 (Tier-3)	
<i>quinapril-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
TEKTURNA HCT ORAL TABLET	\$0 (Tier-3)	
<i>telmisartan-amlodipine oral tablet</i>	\$0 (Tier-1)	
<i>telmisartan-hctz oral tablet</i>	\$0 (Tier-3)	
<i>trandolapril-verapamil hcl er oral tablet extended release</i>	\$0 (Tier-2)	
<i>valsartan-hydrochlorothiazide oral tablet</i>	\$0 (Tier-2)	
BETA AND ALPHA BLOCKERS		
<i>carvedilol oral tablet</i>	\$0 (Tier-1)	
<i>carvedilol phosphate er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>labetalol hcl oral tablet</i>	\$0 (Tier-2)	
BETA BLOCKERS		
<i>acebutolol hcl oral capsule</i>	\$0 (Tier-2)	
<i>atenolol oral tablet</i>	\$0 (Tier-1)	
<i>betaxolol hcl oral tablet</i>	\$0 (Tier-2)	
<i>bisoprolol fumarate oral tablet</i>	\$0 (Tier-2)	
BYSTOLIC ORAL TABLET	\$0 (Tier-4)	
<i>metoprolol succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	\$0 (Tier-1)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	\$0 (Tier-3)	
<i>nadolol oral tablet</i>	\$0 (Tier-3)	
<i>nebivolol hcl oral tablet</i>	\$0 (Tier-3)	
<i>pindolol oral tablet</i>	\$0 (Tier-3)	
<i>propranolol hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>propranolol hcl oral solution</i>	\$0 (Tier-2)	
<i>propranolol hcl oral tablet</i>	\$0 (Tier-1)	
<i>timolol maleate oral tablet</i>	\$0 (Tier-2)	
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate oral tablet</i>	\$0 (Tier-1)	
<i>cartia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er coated beads oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	\$0 (Tier-2)	
<i>diltiazem hcl oral tablet</i>	\$0 (Tier-1)	
<i>dilt-xr oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>felodipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>isradipine oral capsule</i>	\$0 (Tier-4)	
<i>matzim la oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nicardipine hcl oral capsule</i>	\$0 (Tier-4)	
<i>nifedipine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine er osmotic release oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>nifedipine oral capsule</i>	\$0 (Tier-2)	
<i>nimodipine oral capsule</i>	\$0 (Tier-2)	
<i>nisoldipine er oral tablet extended release 24 hour</i>	\$0 (Tier-4)	
NYMALIZE ORAL SOLUTION	\$0 (Tier-5)	NEEDS
<i>taztia xt oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>tiadylt er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>verapamil hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
verapamil hcl er oral tablet extended release	\$0 (Tier-1)	
verapamil hcl oral tablet	\$0 (Tier-1)	
CARDIOVASCULAR AGENTS, MISCELLANEOUS		
VERQUVO ORAL TABLET	\$0 (Tier-4)	
CENTRALLY ACTING AGENTS		
clonidine hcl oral tablet	\$0 (Tier-1)	
clonidine transdermal patch weekly	\$0 (Tier-3)	
droxidopa oral capsule	\$0 (Tier-5)	PA; NEDS
midodrine hcl oral tablet	\$0 (Tier-2)	
NORTHERA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
DIRECT RENIN INHIBITORS		
aliskiren fumarate oral tablet	\$0 (Tier-3)	
DIURETICS		
amiloride hcl oral tablet	\$0 (Tier-2)	
amiloride-hydrochlorothiazide oral tablet	\$0 (Tier-1)	
bumetanide oral tablet	\$0 (Tier-3)	
CAROSPIR ORAL SUSPENSION	\$0 (Tier-4)	
chlorthalidone oral tablet	\$0 (Tier-1)	
eplerenone oral tablet	\$0 (Tier-2)	
ethacrynic acid oral tablet	\$0 (Tier-4)	
furosemide oral solution	\$0 (Tier-1)	
furosemide oral tablet	\$0 (Tier-1)	
hydrochlorothiazide oral capsule	\$0 (Tier-1)	
hydrochlorothiazide oral tablet	\$0 (Tier-1)	
indapamide oral tablet	\$0 (Tier-1)	
KERENDIA ORAL TABLET	\$0 (Tier-4)	PA
metolazone oral tablet	\$0 (Tier-2)	
spironolactone oral tablet	\$0 (Tier-1)	
spironolactone-hctz oral tablet	\$0 (Tier-2)	
torsemide oral tablet	\$0 (Tier-2)	
triamterene-hctz oral capsule	\$0 (Tier-1)	
triamterene-hctz oral tablet	\$0 (Tier-1)	
LIPID LOWERING AGENTS		
atorvastatin calcium oral tablet	\$0 (Tier-1)	
cholestyramine light oral powder	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cholestyramine oral packet</i>	\$0 (Tier-3)	
<i>colesevelam hcl oral packet</i>	\$0 (Tier-3)	
<i>colesevelam hcl oral tablet</i>	\$0 (Tier-3)	
<i>colestipol hcl oral packet</i>	\$0 (Tier-2)	
<i>colestipol hcl oral tablet</i>	\$0 (Tier-2)	
<i>ezetimibe oral tablet</i>	\$0 (Tier-3)	
<i>ezetimibe-simvastatin oral tablet</i>	\$0 (Tier-3)	
<i>fenofibrate micronized oral capsule</i>	\$0 (Tier-3)	
<i>fenofibrate oral capsule 134 mg</i>	\$0 (Tier-3)	
<i>fenofibrate oral capsule 150 mg, 50 mg</i>	\$0 (Tier-2)	
<i>fenofibrate oral tablet</i>	\$0 (Tier-2)	
<i>fenofibric acid oral capsule delayed release</i>	\$0 (Tier-3)	
FLOLIPID ORAL SUSPENSION	\$0 (Tier-3)	
<i>fluvastatin sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-4)	
<i>fluvastatin sodium oral capsule</i>	\$0 (Tier-3)	
<i>gemfibrozil oral tablet</i>	\$0 (Tier-1)	
<i>icosapent ethyl oral capsule</i>	\$0 (Tier-3)	
JUXTAPIID ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
<i>lovastatin oral tablet</i>	\$0 (Tier-1)	
NEXLETOL ORAL TABLET	\$0 (Tier-3)	PA
NEXLIZET ORAL TABLET	\$0 (Tier-3)	PA
<i>niacin er (antihyperlipidemic) oral tablet extended release</i>	\$0 (Tier-3)	
<i>niacor oral tablet</i>	\$0 (Tier-2)	
<i>omega-3-acid ethyl esters oral capsule</i>	\$0 (Tier-3)	
PRALUENT SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-4)	PA
<i>pravastatin sodium oral tablet</i>	\$0 (Tier-2)	
<i>prevalite oral packet</i>	\$0 (Tier-3)	
<i>rosuvastatin calcium oral tablet</i>	\$0 (Tier-2)	
<i>simvastatin oral tablet</i>	\$0 (Tier-1)	
VASCEPA ORAL CAPSULE	\$0 (Tier-3)	
POTASSIUM REPLACEMENT		
<i>klor-con 10 oral tablet extended release</i>	\$0 (Tier-1)	
<i>klor-con m10 oral tablet extended release</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
KLOR-CON M15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	
<i>klor-con m20 oral tablet extended release</i>	\$0 (Tier-1)	
<i>klor-con oral packet</i>	\$0 (Tier-1)	
<i>klor-con oral tablet extended release</i>	\$0 (Tier-1)	
K-TAB ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	
<i>potassium chloride crys er oral tablet extended release 10 meq, 20 meq</i>	\$0 (Tier-1)	
<i>potassium chloride crys er oral tablet extended release 15 meq</i>	\$0 (Tier-4)	
<i>potassium chloride er oral capsule extended release</i>	\$0 (Tier-1)	
<i>potassium chloride er oral tablet extended release</i>	\$0 (Tier-1)	
<i>potassium chloride oral packet</i>	\$0 (Tier-1)	
<i>potassium chloride oral solution</i>	\$0 (Tier-1)	
VASODILATORS		
BIDIL ORAL TABLET	\$0 (Tier-3)	
<i>hydralazine hcl oral tablet</i>	\$0 (Tier-1)	
<i>minoxidil oral tablet</i>	\$0 (Tier-1)	
DIABETES MELLITUS		
DIABETIC SUPPLIES		
<i>assure insulin safety syringe</i>	\$0 (Tier-2)	
<i>bd disp needle</i>	\$0 (Tier-2)	
<i>bd insulin syringe</i>	\$0 (Tier-2)	
<i>bd insulin syringe u-500</i>	\$0 (Tier-2)	
<i>comfort assist insulin syringe</i>	\$0 (Tier-2)	
<i>cvs gauze sterile pad</i>	\$0 (Tier-2)	
DEXCOM RECEIVER DEVICE	\$0 (Tier-3)	Part B; PA
DEXCOM SENSOR	\$0 (Tier-3)	Part B; PA
DEXCOM TRANSMITTER	\$0 (Tier-3)	Part B; PA
<i>exel comfort point pen needle</i>	\$0 (Tier-2)	
FREESTYLE LIBRE READER DEVICE	\$0 (Tier-3)	Part B; PA
FREESTYLE LIBRE SENSOR SYSTEM	\$0 (Tier-3)	Part B; PA
<i>gauze pads pad</i>	\$0 (Tier-2)	
<i>global alcohol prep ease pad</i>	\$0 (Tier-2)	
<i>insulin syringe</i>	\$0 (Tier-2)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>lancets</i>	\$0 (Tier-2)	Part B
ONETOUCH TEST STRIPS	\$0 (Tier-3)	Part B
<i>preferred plus insulin syringe</i>	\$0 (Tier-2)	
<i>reli-on insulin syringe</i>	\$0 (Tier-2)	
<i>techlite insulin syringe</i>	\$0 (Tier-2)	
<i>techlite pen needles</i>	\$0 (Tier-2)	
<i>trueplus insulin syringe</i>	\$0 (Tier-2)	
<i>trueplus pen needles</i>	\$0 (Tier-2)	
GLUCOSE ELEVATING		
<i>diazoxide oral suspension</i>	\$0 (Tier-3)	
GLUCAGEN HYPOKIT INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	
GLUCAGON EMERGENCY INJECTION KIT	\$0 (Tier-3)	
GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	
GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	
INSULINS		
HUMALOG JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 50/50 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMALOG MIX 75/25 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMALOG SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-3)	
HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
HUMULIN 70/30 SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR	\$0 (Tier-3)	
HUMULIN N SUBCUTANEOUS SUSPENSION	\$0 (Tier-3)	
HUMULIN R INJECTION SOLUTION	\$0 (Tier-3)	
HUMULIN R U-500 (CONCENTRATED) SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LANTUS SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
LEVEMIR FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
LEVEMIR SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
TRESIBA SUBCUTANEOUS SOLUTION	\$0 (Tier-3)	
NON-INSULIN INJECTABLES		
BYDUREON BCISE SUBCUTANEOUS AUTO-INJECTOR	\$0 (Tier-3)	
BYETTA 10 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-4)	
BYETTA 5 MCG PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-4)	
OZEMPIC (0.25 OR 0.5 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
OZEMPIC (1 MG/DOSE) SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
SYMLINPEN 120 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
SYMLINPEN 60 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TRULICITY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-3)	
ORAL AGENTS		
acarbose oral tablet	\$0 (Tier-1)	
CYCLOSET ORAL TABLET	\$0 (Tier-3)	
FARXIGA ORAL TABLET	\$0 (Tier-3)	
glimepiride oral tablet	\$0 (Tier-1)	
glipizide er oral tablet extended release 24 hour	\$0 (Tier-1)	
glipizide oral tablet	\$0 (Tier-1)	
glipizide-metformin hcl oral tablet	\$0 (Tier-1)	
glyburide micronized oral tablet	\$0 (Tier-1)	PA
glyburide oral tablet	\$0 (Tier-2)	PA
glyburide-metformin oral tablet	\$0 (Tier-2)	PA
GLYXAMBI ORAL TABLET	\$0 (Tier-3)	
JANUMET ORAL TABLET	\$0 (Tier-3)	
JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
JANUVIA ORAL TABLET	\$0 (Tier-3)	
JARDIANCE ORAL TABLET	\$0 (Tier-3)	
JENTADUETO ORAL TABLET	\$0 (Tier-3)	
JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
metformin hcl er oral tablet extended release 24 hour (generic glucophage xl)	\$0 (Tier-1)	
metformin hcl oral solution	\$0 (Tier-3)	
metformin hcl oral tablet	\$0 (Tier-1)	
miglitol oral tablet	\$0 (Tier-3)	
nateglinide oral tablet	\$0 (Tier-3)	
pioglitazone hcl oral tablet	\$0 (Tier-1)	
pioglitazone hcl-glimepiride oral tablet	\$0 (Tier-2)	
pioglitazone hcl-metformin hcl oral tablet	\$0 (Tier-3)	
repaglinide oral tablet	\$0 (Tier-1)	
RIOMET ORAL SOLUTION	\$0 (Tier-3)	
RYBELSUS ORAL TABLET	\$0 (Tier-3)	
SYNJARDY ORAL TABLET	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
TRADJENTA ORAL TABLET	\$0 (Tier-3)	
XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
EAR, NOSE AND THROAT		
EAR		
<i>acetic acid otic solution</i>	\$0 (Tier-2)	
CIPRODEX OTIC SUSPENSION	\$0 (Tier-3)	
<i>ciprofloxacin hcl otic solution</i>	\$0 (Tier-2)	
<i>ciprofloxacin-dexamethasone otic suspension</i>	\$0 (Tier-3)	
<i>flac otic oil</i>	\$0 (Tier-2)	
<i>fluocinolone acetonide otic oil</i>	\$0 (Tier-3)	
<i>hydrocortisone-acetic acid otic solution</i>	\$0 (Tier-2)	
<i>ofloxacin otic solution</i>	\$0 (Tier-3)	
MOUTH AND THROAT		
<i>cevimeline hcl oral capsule</i>	\$0 (Tier-3)	
<i>chlorhexidine gluconate mouth/throat solution</i>	\$0 (Tier-1)	
<i>periogard mouth/throat solution</i>	\$0 (Tier-1)	
<i>pilocarpine hcl oral tablet</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide mouth/throat paste</i>	\$0 (Tier-2)	
NOSE		
<i>azelastine hcl nasal solution</i>	\$0 (Tier-2)	QL (120 ML per 90 days)
<i>cyproheptadine hcl oral syrup</i>	\$0 (Tier-2)	
<i>cyproheptadine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet</i>	\$0 (Tier-2)	
<i>desloratadine oral tablet dispersible</i>	\$0 (Tier-4)	
<i>flunisolide nasal solution</i>	\$0 (Tier-3)	QL (150 ML per 90 days)
<i>fluticasone propionate nasal suspension</i>	\$0 (Tier-1)	QL (48 GM per 90 days)
<i>hydroxyzine hcl oral syrup</i>	\$0 (Tier-2)	PA
<i>hydroxyzine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>hydroxyzine pamoate oral capsule</i>	\$0 (Tier-2)	PA
<i>ipratropium bromide nasal solution 0.03 %</i>	\$0 (Tier-2)	QL (180 ML per 90 days)
<i>ipratropium bromide nasal solution 0.06 %</i>	\$0 (Tier-2)	QL (90 ML per 90 days)
<i>levocetirizine dihydrochloride oral solution</i>	\$0 (Tier-2)	
<i>levocetirizine dihydrochloride oral tablet</i>	\$0 (Tier-2)	
<i>mometasone furoate nasal suspension</i>	\$0 (Tier-3)	QL (102 GM per 90 days)

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>olopatadine hcl nasal solution</i>	\$0 (Tier-3)	QL (91.5 GM per 90 days)
EYE		
ALLERGY		
ALOCRIL OPHTHALMIC SOLUTION	\$0 (Tier-4)	
ALOMIDE OPHTHALMIC SOLUTION	\$0 (Tier-4)	
<i>azelastine hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>bepotastine besilate ophthalmic solution</i>	\$0 (Tier-3)	
<i>cromolyn sodium ophthalmic solution</i>	\$0 (Tier-1)	
<i>epinastine hcl ophthalmic solution</i>	\$0 (Tier-4)	
LASTACAFT OPHTHALMIC SOLUTION	\$0 (Tier-4)	
<i>loteprednol etabonate ophthalmic gel</i>	\$0 (Tier-3)	
<i>olopatadine hcl ophthalmic solution</i>	\$0 (Tier-3)	
ANTI-INFECTIVES		
AZASITE OPHTHALMIC SOLUTION	\$0 (Tier-4)	
<i>bacitracin ophthalmic ointment</i>	\$0 (Tier-4)	
<i>bacitracin-polymyxin b ophthalmic ointment</i>	\$0 (Tier-2)	
<i>bacitra-neomycin-polymyxin-hc ophthalmic ointment</i>	\$0 (Tier-2)	
BESIVANCE OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
BLEPHAMIDE OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
BLEPHAMIDE S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-4)	
<i>ciprofloxacin hcl ophthalmic solution</i>	\$0 (Tier-1)	
<i>erythromycin ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gatifloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>gentak ophthalmic ointment</i>	\$0 (Tier-2)	
<i>gentamicin sulfate ophthalmic solution</i>	\$0 (Tier-2)	
<i>levofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl ophthalmic solution</i>	\$0 (Tier-3)	
<i>neomycin-bacitracin zn-polymyx ophthalmic ointment</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
<i>ofloxacin ophthalmic solution</i>	\$0 (Tier-2)	
<i>polymyxin b-trimethoprim ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic ointment</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>sulfacetamide-prednisolone ophthalmic solution</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TOBRADEX OPHTHALMIC OINTMENT	\$0 (Tier-3)	
TOBRADEX ST OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>tobramycin ophthalmic solution</i>	\$0 (Tier-2)	
<i>tobramycin-dexamethasone ophthalmic suspension</i>	\$0 (Tier-2)	
ANTI-INFLAMMATORIES		
ALREX OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bromfenac sodium (once-daily) ophthalmic solution</i>	\$0 (Tier-3)	
BROMSITE OPHTHALMIC SOLUTION	\$0 (Tier-4)	
<i>dexamethasone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
<i>diclofenac sodium ophthalmic solution</i>	\$0 (Tier-2)	
<i>difluprednate ophthalmic emulsion</i>	\$0 (Tier-3)	
DUREZOL OPHTHALMIC EMULSION	\$0 (Tier-3)	
FLAREX OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
<i>fluorometholone ophthalmic suspension</i>	\$0 (Tier-2)	
<i>flurbiprofen sodium ophthalmic solution</i>	\$0 (Tier-1)	
FML FORTE OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
FML OPHTHALMIC OINTMENT	\$0 (Tier-3)	
ILEVRO OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
INVELTYS OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
<i>ketorolac tromethamine ophthalmic solution</i>	\$0 (Tier-2)	
<i>loteprednol etabonate ophthalmic suspension</i>	\$0 (Tier-3)	
MAXIDEX OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-dexameth ophthalmic suspension</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-gramicidin ophthalmic solution</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc ophthalmic suspension</i>	\$0 (Tier-2)	
<i>neomycin-polymyxin-hc</i>	\$0 (Tier-2)	
PRED MILD OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
PRED-G OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
PRED-G S.O.P. OPHTHALMIC OINTMENT	\$0 (Tier-3)	
<i>prednisolone acetate ophthalmic suspension</i>	\$0 (Tier-3)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>prednisolone sodium phosphate ophthalmic solution</i>	\$0 (Tier-2)	
PROLENSA OPHTHALMIC SOLUTION	\$0 (Tier-4)	
ZYLET OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
ANTIVIRALS		
<i>trifluridine ophthalmic solution</i>	\$0 (Tier-2)	
ZIRGAN OPHTHALMIC GEL	\$0 (Tier-4)	
GLAUCOMA		
<i>acetazolamide er oral capsule extended release 12 hour</i>	\$0 (Tier-3)	
<i>acetazolamide oral tablet</i>	\$0 (Tier-2)	
ALPHAGAN P OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>apraclonidine hcl ophthalmic solution</i>	\$0 (Tier-2)	
AZOPT OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>betaxolol hcl ophthalmic solution</i>	\$0 (Tier-3)	
BETIMOL OPHTHALMIC SOLUTION	\$0 (Tier-4)	
BETOPTIC-S OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>bimatoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>brimonidine tartrate ophthalmic solution</i>	\$0 (Tier-2)	
<i>brinzolamide ophthalmic suspension</i>	\$0 (Tier-3)	
<i>carteolol hcl ophthalmic solution</i>	\$0 (Tier-2)	
COMBIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>dorzolamide hcl ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal ophthalmic solution</i>	\$0 (Tier-2)	
<i>dorzolamide hcl-timolol mal pf ophthalmic solution</i>	\$0 (Tier-3)	
IOPIDINE OPHTHALMIC SOLUTION	\$0 (Tier-4)	
<i>latanoprost ophthalmic solution</i>	\$0 (Tier-2)	
<i>levobunolol hcl ophthalmic solution</i>	\$0 (Tier-1)	
LUMIGAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
<i>methazolamide oral tablet</i>	\$0 (Tier-4)	
<i>pilocarpine hcl ophthalmic solution</i>	\$0 (Tier-2)	
RHOPRESSA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
ROCKLATAN OPHTHALMIC SOLUTION	\$0 (Tier-4)	
SIMBRINZA OPHTHALMIC SUSPENSION	\$0 (Tier-3)	
<i>timolol maleate ophthalmic gel forming solution</i>	\$0 (Tier-3)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>timolol maleate ophthalmic solution 0.25 %, 0.5 %</i>	\$0 (Tier-1)	
<i>timolol maleate ophthalmic solution 0.5 % (daily)</i>	\$0 (Tier-3)	
<i>timolol maleate pf ophthalmic solution</i>	\$0 (Tier-3)	
<i>travoprost (bak free) ophthalmic solution</i>	\$0 (Tier-3)	
VYZULTA OPHTHALMIC SOLUTION	\$0 (Tier-3)	
OPHTHALMIC DRUGS, MISCELLANEOUS		
<i>atropine sulfate ophthalmic solution</i>	\$0 (Tier-2)	
CYSTADROPS OPHTHALMIC SOLUTION	\$0 (Tier-3)	
CYSTARAN OPHTHALMIC SOLUTION	\$0 (Tier-3)	
EYLEA INTRAVITREAL SOLUTION	\$0 (Tier-5)	SP-CVS specialty; NEDS
LUCENTIS INTRAVITREAL SOLUTION	\$0 (Tier-5)	SP-CVS specialty; NEDS
LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
NATACYN OPHTHALMIC SUSPENSION	\$0 (Tier-4)	
OXERVATE OPHTHALMIC SOLUTION	\$0 (Tier-5)	PA; NEDS
RESTASIS OPHTHALMIC EMULSION	\$0 (Tier-3)	
GASTROINTESTINAL DRUGS		
EMESIS		
<i>aprepitant oral capsule 125 mg</i>	\$0 (Tier-5)	B vs D; NEDS
<i>aprepitant oral capsule 40 mg, 80 & 125 mg, 80 mg</i>	\$0 (Tier-3)	B vs D
<i>dronabinol oral capsule</i>	\$0 (Tier-3)	B vs D
EMEND ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-3)	B vs D
<i>gransetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>meclizine hcl oral tablet</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral solution</i>	\$0 (Tier-2)	
<i>metoclopramide hcl oral tablet</i>	\$0 (Tier-1)	
<i>metoclopramide hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ondansetron hcl oral solution</i>	\$0 (Tier-2)	B vs D
<i>ondansetron hcl oral tablet</i>	\$0 (Tier-2)	B vs D
<i>ondansetron oral tablet dispersible</i>	\$0 (Tier-2)	B vs D
<i>prochlorperazine maleate oral tablet</i>	\$0 (Tier-1)	
<i>prochlorperazine rectal suppository</i>	\$0 (Tier-3)	
<i>promethazine hcl oral syrup</i>	\$0 (Tier-2)	PA

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>promethazine hcl oral tablet</i>	\$0 (Tier-2)	PA
SANCUSO TRANSDERMAL PATCH	\$0 (Tier-5)	NEDS
<i>scopolamine transdermal patch 72 hour</i>	\$0 (Tier-3)	
VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-4)	B vs D
VARUBI ORAL TABLET	\$0 (Tier-4)	B vs D
ENZYMEs		
CARBAGLU ORAL TABLET	\$0 (Tier-5)	PA; NEDS
CREON ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-3)	
CYSTAGON ORAL CAPSULE	\$0 (Tier-4)	
ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES	\$0 (Tier-4)	
GASTROINTESTINAL DRUGS, MISCELLANEOUS		
<i>alosetron hcl oral tablet</i>	\$0 (Tier-5)	NEDS
CHOLBAM ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
<i>constulose oral solution</i>	\$0 (Tier-2)	
<i>cromolyn sodium oral concentrate</i>	\$0 (Tier-5)	NEDS
<i>dicyclomine hcl oral capsule</i>	\$0 (Tier-1)	
<i>dicyclomine hcl oral solution</i>	\$0 (Tier-1)	
<i>dicyclomine hcl oral tablet</i>	\$0 (Tier-2)	
<i>enulose oral solution</i>	\$0 (Tier-2)	
GATTEX SUBCUTANEOUS KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>gavilyte-g oral solution reconstituted</i>	\$0 (Tier-2)	
<i>generlac oral solution</i>	\$0 (Tier-2)	
<i>glycopyrrolate oral tablet</i>	\$0 (Tier-2)	
KRISTALOSE ORAL PACKET	\$0 (Tier-3)	
<i>lactulose oral packet</i>	\$0 (Tier-3)	
<i>lactulose oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral solution</i>	\$0 (Tier-2)	
<i>levocarnitine oral tablet</i>	\$0 (Tier-2)	
<i>loperamide hcl oral capsule</i>	\$0 (Tier-2)	
<i>megestrol acetate oral suspension</i>	\$0 (Tier-2)	
MOVANTIK ORAL TABLET	\$0 (Tier-3)	
MOVIPREP ORAL SOLUTION RECONSTITUTED	\$0 (Tier-4)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MYTESI ORAL TABLET DELAYED RELEASE	\$0 (Tier-3)	PA
OCALIVA ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
OSMOPREP ORAL TABLET	\$0 (Tier-4)	
<i>peg 3350-kcl-na bicarb-nacl oral solution reconstituted</i>	\$0 (Tier-2)	
<i>peg-3350/electrolytes oral solution reconstituted</i>	\$0 (Tier-2)	
<i>peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted</i>	\$0 (Tier-3)	
RELISTOR ORAL TABLET	\$0 (Tier-5)	NEDS
RELISTOR SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	NEDS
SUPREP BOWEL PREP KIT ORAL SOLUTION	\$0 (Tier-4)	
UCERIS RECTAL FOAM	\$0 (Tier-4)	
<i>ursodiol oral capsule</i>	\$0 (Tier-2)	
<i>ursodiol oral tablet</i>	\$0 (Tier-4)	
XERMELO ORAL TABLET	\$0 (Tier-5)	PA; NEDS
GASTROINTESTINAL DRUGS, PEPTIC ULCER TREATMENT, REFLUX (GERD)		
<i>amoxicill-clarithro-lansopraz oral</i>	\$0 (Tier-3)	
<i>cimetidine hcl oral solution</i>	\$0 (Tier-2)	
<i>cimetidine oral tablet</i>	\$0 (Tier-3)	
DEXILANT ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-4)	
<i>esomeprazole magnesium oral capsule delayed release</i>	\$0 (Tier-3)	
<i>esomeprazole magnesium oral packet</i>	\$0 (Tier-4)	
<i>famotidine oral suspension reconstituted</i>	\$0 (Tier-4)	
<i>famotidine oral tablet</i>	\$0 (Tier-1)	
<i>lansoprazole oral capsule delayed release</i>	\$0 (Tier-3)	
<i>lansoprazole oral tablet delayed release dispersible</i>	\$0 (Tier-4)	
<i>methscopolamine bromide oral tablet</i>	\$0 (Tier-4)	
<i>misoprostol oral tablet</i>	\$0 (Tier-2)	
<i>nizatidine oral capsule</i>	\$0 (Tier-2)	
<i>nizatidine oral solution</i>	\$0 (Tier-2)	
<i>omeprazole oral capsule delayed release</i>	\$0 (Tier-1)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>omeprazole-sodium bicarbonate oral capsule</i>	\$0 (Tier-5)	NEDS
<i>omeprazole-sodium bicarbonate oral packet</i>	\$0 (Tier-5)	NEDS
<i>pantoprazole sodium oral packet</i>	\$0 (Tier-4)	
<i>pantoprazole sodium oral tablet delayed release</i>	\$0 (Tier-2)	
PYLERA ORAL CAPSULE	\$0 (Tier-3)	
<i>rabeprazole sodium oral tablet delayed release</i>	\$0 (Tier-3)	
<i>sucralfate oral suspension</i>	\$0 (Tier-3)	
<i>sucralfate oral tablet</i>	\$0 (Tier-2)	
INFLAMMATORY BOWEL DISEASE		
AMITIZA ORAL CAPSULE	\$0 (Tier-3)	
<i>balsalazide disodium oral capsule</i>	\$0 (Tier-2)	
<i>budesonide er oral tablet extended release 24 hour</i>	\$0 (Tier-5)	NEDS
<i>budesonide 3 mg oral capsule delayed release</i>	\$0 (Tier-3)	
<i>hydrocortisone rectal enema</i>	\$0 (Tier-2)	
LINZESS ORAL CAPSULE	\$0 (Tier-4)	
<i>lubiprostone oral capsule</i>	\$0 (Tier-3)	
<i>mesalamine er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>mesalamine oral capsule delayed release</i>	\$0 (Tier-3)	
<i>mesalamine oral tablet delayed release</i>	\$0 (Tier-3)	
<i>mesalamine rectal enema</i>	\$0 (Tier-2)	
<i>mesalamine rectal suppository</i>	\$0 (Tier-4)	
ROWASA RECTAL KIT	\$0 (Tier-4)	
<i>sulfasalazine oral tablet</i>	\$0 (Tier-2)	
<i>sulfasalazine oral tablet delayed release</i>	\$0 (Tier-2)	
HOME INFUSION THERAPY		
ACUTE CARE DRUGS		
ABELCET INTRAVENOUS SUSPENSION	\$0 (Tier-4)	PA
<i>acyclovir sodium intravenous solution</i>	\$0 (Tier-2)	PA
AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED	\$0 (Tier-5)	PA; NEDS
<i>amikacin sulfate injection solution</i>	\$0 (Tier-2)	HI
<i>amphotericin b intravenous solution reconstituted</i>	\$0 (Tier-2)	PA
<i>ampicillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>ampicillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ampicillin-sulbactam sodium injection solution reconstituted	\$0 (Tier-2)	HI
ampicillin-sulbactam sodium intravenous solution reconstituted	\$0 (Tier-2)	HI
AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
azithromycin intravenous solution reconstituted	\$0 (Tier-2)	HI
aztreonam injection solution reconstituted	\$0 (Tier-2)	HI
bumetanide injection solution	\$0 (Tier-2)	
caspofungin acetate intravenous solution reconstituted	\$0 (Tier-5)	NEDS
cefazolin sodium injection solution reconstituted	\$0 (Tier-2)	HI
cefepime hcl injection solution reconstituted	\$0 (Tier-2)	HI
cefotetan disodium injection solution reconstituted	\$0 (Tier-2)	HI
cefoxitin sodium injection solution reconstituted	\$0 (Tier-2)	HI
cefoxitin sodium intravenous solution reconstituted	\$0 (Tier-2)	HI
ceftazidime injection solution reconstituted	\$0 (Tier-2)	HI
ceftazidime intravenous solution reconstituted	\$0 (Tier-2)	HI
ceftriaxone sodium injection solution reconstituted	\$0 (Tier-2)	HI
ceftriaxone sodium intravenous solution reconstituted	\$0 (Tier-2)	HI
cefuroxime sodium injection solution reconstituted	\$0 (Tier-2)	HI
cefuroxime sodium intravenous solution reconstituted	\$0 (Tier-2)	HI
ciprofloxacin in d5w intravenous solution	\$0 (Tier-2)	HI
clindamycin phosphate in d5w intravenous solution	\$0 (Tier-2)	HI
clindamycin phosphate injection solution	\$0 (Tier-2)	HI
colistimethate sodium (cba) injection solution reconstituted	\$0 (Tier-2)	HI
DALVANCE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
daptomycin intravenous solution reconstituted	\$0 (Tier-2)	HI
DOXY 100 INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>ertapenem sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>fluconazole in sodium chloride intravenous solution</i>	\$0 (Tier-2)	
<i>furosemide injection solution</i>	\$0 (Tier-2)	
<i>gentamicin in saline intravenous solution</i>	\$0 (Tier-2)	HI
<i>gentamicin sulfate injection solution</i>	\$0 (Tier-2)	HI
<i>heparin sodium (porcine) injection solution</i>	\$0 (Tier-2)	
<i>imipenem-cilastatin intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
INVANZ INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
<i>levofloxacin in d5w intravenous solution</i>	\$0 (Tier-2)	HI
<i>levofloxacin intravenous solution</i>	\$0 (Tier-2)	HI
<i>linezolid intravenous solution</i>	\$0 (Tier-2)	HI
<i>meropenem intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>methotrexate sodium (pf) injection solution</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
<i>methotrexate sodium injection solution</i>	\$0 (Tier-2)	B vs D; SP-CVS specialty
<i>metronidazole in nacl intravenous solution</i>	\$0 (Tier-2)	
<i>moxifloxacin hcl in nacl intravenous solution</i>	\$0 (Tier-2)	HI
MYCAMINE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	
<i>nafcillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>nafcillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium in dextrose intravenous solution</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>oxacillin sodium intravenous solution reconstituted</i>	\$0 (Tier-2)	HI
<i>penicillin g pot in dextrose intravenous solution</i>	\$0 (Tier-2)	HI
<i>penicillin g potassium injection solution reconstituted</i>	\$0 (Tier-2)	HI
<i>penicillin g procaine intramuscular suspension</i>	\$0 (Tier-2)	HI
<i>penicillin g sodium injection solution reconstituted</i>	\$0 (Tier-2)	HI

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
piperacillin sod-tazobactam so intravenous solution reconstituted	\$0 (Tier-2)	HI
polymyxin b sulfate injection solution reconstituted	\$0 (Tier-2)	HI
rifampin intravenous solution reconstituted	\$0 (Tier-2)	
SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
streptomycin sulfate intramuscular solution reconstituted	\$0 (Tier-2)	HI
TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
tigecycline intravenous solution reconstituted	\$0 (Tier-2)	HI
tobramycin sulfate injection solution	\$0 (Tier-2)	HI
VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	HI
vancomycin hcl intravenous solution reconstituted	\$0 (Tier-2)	HI
voriconazole intravenous solution reconstituted	\$0 (Tier-2)	
ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	HI; NEDS
ZOSYN INTRAVENOUS SOLUTION	\$0 (Tier-3)	HI
ELECTROLYTES		
dextrose intravenous solution	\$0 (Tier-2)	
dextrose-nacl intravenous solution	\$0 (Tier-2)	
ISOLYTE-P IN D5W INTRAVENOUS SOLUTION	\$0 (Tier-3)	
ISOLYTE-S INTRAVENOUS SOLUTION	\$0 (Tier-3)	
kcl in dextrose-nacl intravenous solution	\$0 (Tier-2)	
kcl-lactated ringers-d5w intravenous solution	\$0 (Tier-2)	
magnesium sulfate injection solution	\$0 (Tier-2)	
PLASMA-LYTE 148 INTRAVENOUS SOLUTION	\$0 (Tier-3)	
PLASMA-LYTE A INTRAVENOUS SOLUTION	\$0 (Tier-3)	
potassium chloride in dextrose intravenous solution	\$0 (Tier-2)	
potassium chloride in nacl intravenous solution	\$0 (Tier-2)	
potassium chloride intravenous solution	\$0 (Tier-2)	
sodium chloride intravenous solution	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
IV NUTRITION		
AMINOSYN II INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
AMINOSYN-PF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
CLINISOL SF INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
INTRALIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
NUTRILIPID INTRAVENOUS EMULSION	\$0 (Tier-3)	B vs D
PLENAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PREMASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PROCALAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
PROSOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
<i>tpn electrolytes intravenous concentrate</i>	\$0 (Tier-2)	B vs D
<i>tpn electrolytes intravenous solution</i>	\$0 (Tier-2)	B vs D
TRAVASOL INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
TROPHAMINE INTRAVENOUS SOLUTION	\$0 (Tier-3)	B vs D
HORMONES		
ADRENAL CORTICOSTEROIDS		
ACTHAR INJECTION GEL	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>dexamethasone oral elixir</i>	\$0 (Tier-2)	
<i>dexamethasone oral tablet</i>	\$0 (Tier-1)	
<i>dexamethasone oral tablet therapy pack</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>fludrocortisone acetate oral tablet</i>	\$0 (Tier-2)	
<i>hydrocortisone oral tablet</i>	\$0 (Tier-2)	
MEDROL ORAL TABLET	\$0 (Tier-4)	Transplant
<i>methylprednisolone oral tablet</i>	\$0 (Tier-2)	Transplant
<i>methylprednisolone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant
MILLIPRED ORAL TABLET	\$0 (Tier-4)	Transplant
ORAPRED ODT ORAL TABLET DISPERSIBLE	\$0 (Tier-4)	Transplant
<i>prednisolone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisolone sodium phosphate oral tablet dispersible</i>	\$0 (Tier-2)	Transplant
PREDNISONE INTENSOL ORAL CONCENTRATE	\$0 (Tier-4)	Transplant
<i>prednisone oral solution</i>	\$0 (Tier-2)	Transplant
<i>prednisone oral tablet</i>	\$0 (Tier-1)	Transplant
<i>prednisone oral tablet therapy pack</i>	\$0 (Tier-2)	Transplant
ANDROGENS		
AVEED INTRAMUSCULAR SOLUTION	\$0 (Tier-4)	
<i>danazol oral capsule</i>	\$0 (Tier-4)	
DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION	\$0 (Tier-4)	
METHITEST ORAL TABLET	\$0 (Tier-4)	
<i>methyltestosterone oral capsule</i>	\$0 (Tier-5)	NEDS
<i>oxandrolone oral tablet</i>	\$0 (Tier-2)	
<i>testosterone cypionate intramuscular solution</i>	\$0 (Tier-3)	
<i>testosterone enanthate intramuscular solution</i>	\$0 (Tier-2)	
<i>testosterone transdermal gel</i>	\$0 (Tier-3)	
<i>testosterone transdermal solution</i>	\$0 (Tier-2)	
XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-4)	
GONADOTROPIN RELEASING AGONISTS		
ELIGARD SUBCUTANEOUS KIT	\$0 (Tier-3)	
FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG	\$0 (Tier-5)	NEDS
FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG	\$0 (Tier-3)	
<i>leuprolide acetate injection kit</i>	\$0 (Tier-2)	
LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-5)	NEDS
LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-5)	NEDS
LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-5)	NEDS
LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT	\$0 (Tier-5)	NEDS
SYNAREL NASAL SOLUTION	\$0 (Tier-5)	NEDS
TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-5)	NEDS
THYROID REPLACEMENT AND ANTITHYROID AGENTS		
ARMOUR THYROID ORAL TABLET	\$0 (Tier-4)	
<i>euthyrox oral tablet</i>	\$0 (Tier-1)	
<i>levo-t oral tablet</i>	\$0 (Tier-1)	
<i>levothyroxine sodium oral capsule</i>	\$0 (Tier-3)	
<i>levothyroxine sodium oral tablet</i>	\$0 (Tier-1)	
<i>levoxyl oral tablet</i>	\$0 (Tier-2)	
<i>liothyronine sodium oral tablet</i>	\$0 (Tier-2)	
<i>methimazole oral tablet</i>	\$0 (Tier-1)	
<i>propylthiouracil oral tablet</i>	\$0 (Tier-2)	
SYNTHROID ORAL TABLET	\$0 (Tier-4)	
THYQUIDITY ORAL SOLUTION	\$0 (Tier-4)	
TIROSINT ORAL CAPSULE	\$0 (Tier-4)	
TIROSINT-SOL ORAL SOLUTION	\$0 (Tier-4)	
<i>unithroid oral tablet</i>	\$0 (Tier-1)	
IMMUNOLOGIC AGENTS		
IMMUNE STIMULANTS		
ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-6)	
ACTIMMUNE SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	NEDS
ADACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
BCG VACCINE INJECTION INJECTABLE	\$0 (Tier-6)	
BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
BIVIGAM INTRAVENOUS SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
BOOSTRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
DAPTACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
<i>diphtheria-tetanus toxoids dt intramuscular suspension</i>	\$0 (Tier-6)	
ENGERIX-B INJECTION SUSPENSION	\$0 (Tier-6)	B vs D
FLEBOGAMMA DIF INTRAVENOUS SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GAMMAGARD INJECTION SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GAMMAKED INJECTION SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GAMMAPLEX INTRAVENOUS SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GAMUNEX-C INJECTION SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
GARDASIL 9 INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
HAVRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
HIBERIX INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-6)	
IMOVAX RABIES INTRAMUSCULAR INJECTABLE	\$0 (Tier-6)	
INFANRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
IPOP INJECTION INJECTABLE	\$0 (Tier-6)	
IXIARO INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
KINRIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
MENACTRA INTRAMUSCULAR INJECTABLE	\$0 (Tier-6)	
MENACTRA INTRAMUSCULAR SOLUTION	\$0 (Tier-6)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MENQUADFI INTRAMUSCULAR INJECTABLE	\$0 (Tier-6)	
MENQUADFI INTRAMUSCULAR SOLUTION	\$0 (Tier-6)	
MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-6)	
M-M-R II INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-6)	
OCTAGAM INTRAVENOUS SOLUTION	\$0 (Tier-3)	PA; HI; SP-CVS specialty
PANZYGA INTRAVENOUS SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
PEDIARIX INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
PEDVAX HIB INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
PNEUMOVAX 23 INJECTION INJECTABLE	\$0 (Tier-6)	Part B
PREVNAR 13 INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	Part B
PRIVIGEN INTRAVENOUS SOLUTION	\$0 (Tier-5)	PA; HI; SP-CVS specialty; NEDS
PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
QUADRACEL INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	
RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
RECOMBIVAX HB INJECTION SUSPENSION	\$0 (Tier-6)	B vs D
ROTARIX ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
ROTATEQ ORAL SOLUTION	\$0 (Tier-6)	
SHINGRIX INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
STAMARIL INJECTION SUSPENSION RECONSTITUTED	\$0 (Tier-6)	
<i>tdvax intramuscular suspension</i>	\$0 (Tier-6)	
TENIVAC INTRAMUSCULAR INJECTABLE	\$0 (Tier-6)	
TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-6)	
TYPHIM VI INTRAMUSCULAR SOLUTION	\$0 (Tier-6)	
VAQTA INTRAMUSCULAR SUSPENSION	\$0 (Tier-6)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VARIVAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-6)	
VARIZIG INTRAMUSCULAR SOLUTION	\$0 (Tier-6)	
YF-VAX SUBCUTANEOUS INJECTABLE	\$0 (Tier-6)	
IMMUNOSUPPRESSIVES		
ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	B vs D
BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
CELLCEPT ORAL SUSPENSION RECONSTITUTED	\$0 (Tier-5)	B vs D; NEDS
<i>cyclosporine modified oral capsule</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine modified oral solution</i>	\$0 (Tier-2)	B vs D
<i>cyclosporine oral capsule</i>	\$0 (Tier-2)	B vs D
ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	B vs D; SP-CVS specialty
<i>everolimus oral tablet</i>	\$0 (Tier-5)	B vs D; QL (60 EA per 30 days); NEDS
<i>gengraf oral capsule</i>	\$0 (Tier-2)	B vs D
<i>gengraf oral solution</i>	\$0 (Tier-2)	B vs D
LUPKYNIS ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
<i>mycophenolate mofetil oral capsule</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate mofetil oral suspension reconstituted</i>	\$0 (Tier-5)	B vs D; NEDS
<i>mycophenolate mofetil oral tablet</i>	\$0 (Tier-2)	B vs D
<i>mycophenolate sodium oral tablet delayed release</i>	\$0 (Tier-4)	B vs D
PROGRAF ORAL PACKET 0.2 MG	\$0 (Tier-4)	B vs D
PROGRAF ORAL PACKET 1 MG	\$0 (Tier-5)	B vs D; NEDS
REZUROCK ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>sirolimus oral solution</i>	\$0 (Tier-3)	B vs D
<i>sirolimus oral tablet</i>	\$0 (Tier-2)	B vs D
<i>tacrolimus oral capsule</i>	\$0 (Tier-2)	B vs D
ZORTRESS ORAL TABLET	\$0 (Tier-5)	B vs D; QL (60 EA per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MISCELLANEOUS DRUGS		
ACROMEGALY		
MYCAPSSA ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>octreotide acetate injection solution</i>	\$0 (Tier-2)	SP-CVS specialty
SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
AMYLOIDOSIS-ASSOCIATED CARDIOMYOPATHY		
VYNDAMAX ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
VYNDAQEL ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (120 EA per 30 days); NEDS
AMYLOIDOSIS-ASSOCIATED POLYNEUROPATHY		
TEGSEDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; QL (6 ML per 30 days); NEDS
AMYOTROPHIC LATERAL SCLEROSIS		
EXSERVAN ORAL FILM	\$0 (Tier-5)	NEDS
<i>riluzole oral tablet</i>	\$0 (Tier-3)	
TIGLUTIK ORAL SUSPENSION	\$0 (Tier-5)	NEDS
ANAPHYLAXIS EMERGENCY		
<i>epinephrine injection solution</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
<i>epinephrine injection solution auto-injector</i>	\$0 (Tier-2)	QL (2 EA per 1 day)
CRYOPYRIN-ASSOCIATED PERIODIC SYNDROMES		
ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; QL (20.1 ML per 28 days); NEDS
CUSHING'S SYNDROME		
ISTURISA ORAL TABLET 1 MG	\$0 (Tier-5)	PA; QL (240 EA per 30 days); NEDS
ISTURISA ORAL TABLET 10 MG	\$0 (Tier-5)	PA; QL (180 EA per 30 days); NEDS
ISTURISA ORAL TABLET 5 MG	\$0 (Tier-5)	PA; QL (60 EA per 30 days); NEDS

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
KORLYM ORAL TABLET	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
SIGNIFOR SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; QL (60 ML per 30 days); NEDS
CYSTIC FIBROSIS		
BETHKIS INHALATION NEBULIZATION SOLUTION	\$0 (Tier-5)	B vs D; NEDS
BRONCHITOL INHALATION CAPSULE	\$0 (Tier-5)	QL (560 EA per 28 days); NEDS
CAYSTON INHALATION SOLUTION RECONSTITUTED	\$0 (Tier-5)	SP-CVS specialty; NEDS
KALYDECO ORAL PACKET	\$0 (Tier-5)	PA; QL (56 EA per 28 days); NEDS
KALYDECO ORAL TABLET	\$0 (Tier-5)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL PACKET	\$0 (Tier-5)	PA; QL (56 EA per 28 days); NEDS
ORKAMBI ORAL TABLET	\$0 (Tier-5)	PA; QL (112 EA per 28 days); NEDS
PULMOZYME INHALATION SOLUTION	\$0 (Tier-5)	B vs D; NEDS
SYMDEKO ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
TOBI PODHALER INHALATION CAPSULE	\$0 (Tier-5)	NEDS
<i>tobramycin inhalation nebulization solution</i>	\$0 (Tier-5)	B vs D; NEDS
TRIKAFTA ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; QL (84 EA per 28 days); NEDS
CYSTINURIA		
CYSTADANE ORAL POWDER	\$0 (Tier-5)	NEDS
THIOLA EC ORAL TABLET DELAYED RELEASE	\$0 (Tier-5)	NEDS
<i>tioprorin oral tablet</i>	\$0 (Tier-5)	NEDS
DETOXIFICATION AGENTS		
CHEMET ORAL CAPSULE	\$0 (Tier-4)	
<i>deferasirox granules oral packet</i>	\$0 (Tier-5)	NEDS
<i>deferasirox oral tablet</i>	\$0 (Tier-5)	NEDS
<i>deferasirox oral tablet soluble</i>	\$0 (Tier-5)	NEDS
<i>deferiprone oral tablet</i>	\$0 (Tier-5)	NEDS
FERRIPROX ORAL SOLUTION	\$0 (Tier-5)	NEDS
FERRIPROX ORAL TABLET	\$0 (Tier-5)	NEDS
DUCHENNE MUSCULAR DYSTROPHY		
EMFLAZA ORAL SUSPENSION	\$0 (Tier-5)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
EMFLAZA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
FABRY DISEASE		
GALAFOLD ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
GAUCHER'S DISEASE		
CERDELGA ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>miglustat oral capsule</i>	\$0 (Tier-5)	PA; NEDS
GROWTH HORMONE DEFICIENCY		
EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
GENOTROPIN MINIQUICK SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
GENOTROPIN SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
HUMATROPE INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
INCRELEX SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NORDITROPIN FLEXPRO SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 10 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 20 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUTROPIN AQ NUSPIN 5 SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION 10 MG/1.5ML	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
OMNITROPE SUBCUTANEOUS SOLUTION 5 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 5 MG/1.5ML	\$0 (Tier-3)	PA; SP-CVS specialty
OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
SAIZEN INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
SAIZENPREP INJECTION SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-3)	PA; SP-CVS specialty
ZORBTIVE SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HEREDITARY ANGIOEDEMA		
BERINERT INTRAVENOUS KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>icatibant acetate subcutaneous solution</i>	\$0 (Tier-5)	PA; SP-CVS specialty; QL (18 ML per 30 days); NEDS
ORLADEYO ORAL CAPSULE	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	SP-CVS specialty; NEDS
TAKHZYRO SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HEREDITARY TYROSINEMIA TYPE 1		
<i>nitisinone oral capsule</i>	\$0 (Tier-5)	PA; NEDS
NITYR ORAL TABLET	\$0 (Tier-5)	PA; NEDS
ORFADIN ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
ORFADIN ORAL SUSPENSION	\$0 (Tier-5)	PA; NEDS
HUNTINGTON'S CHOREA		
AUSTEDO ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>tetrabenazine oral tablet</i>	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HYPERPARATHYROIDISM		
<i>calcitriol oral capsule</i>	\$0 (Tier-2)	
<i>calcitriol oral solution</i>	\$0 (Tier-2)	
<i>cinacalcet hcl oral tablet 30 mg</i>	\$0 (Tier-4)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>cinacalcet hcl oral tablet 60 mg, 90 mg</i>	\$0 (Tier-5)	NEDS
<i>doxercalciferol oral capsule</i>	\$0 (Tier-4)	
<i>paricalcitol oral capsule</i>	\$0 (Tier-2)	
HYPOPARTHYROIDISM		
NATPARA SUBCUTANEOUS CARTRIDGE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (2 EA per 28 days); NEDS
LAMBERT-EATON MYASTHENIC SYNDROME		
FIRDAPSE ORAL TABLET	\$0 (Tier-5)	PA; NEDS
RUZURGI ORAL TABLET	\$0 (Tier-5)	PA; NEDS
LONG-CHAIN FATTY ACID OXIDATION DISORDERS		
DOJOLVI ORAL LIQUID	\$0 (Tier-5)	NEDS
MULTIPLE SCLEROSIS		
AUBAGIO ORAL TABLET	\$0 (Tier-5)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT	\$0 (Tier-5)	SP-CVS specialty; QL (4 EA per 28 days); NEDS
AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT	\$0 (Tier-5)	SP-CVS specialty; QL (4 EA per 28 days); NEDS
BAFIERTAM ORAL CAPSULE DELAYED RELEASE	\$0 (Tier-5)	SP-CVS specialty; QL (120 EA per 30 days); NEDS
BETASERON SUBCUTANEOUS KIT	\$0 (Tier-5)	SP-CVS specialty; QL (15 EA per 30 days); NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML	\$0 (Tier-5)	SP-CVS specialty; QL (30 ML per 30 days); NEDS
COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/ML	\$0 (Tier-5)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
<i>dalfampridine er oral tablet extended release 12 hour</i>	\$0 (Tier-5)	SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>dimethyl fumarate oral capsule delayed release</i>	\$0 (Tier-5)	SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>dimethyl fumarate starter pack oral</i>	\$0 (Tier-5)	SP-CVS specialty; NEDS
EXTAVIA SUBCUTANEOUS KIT	\$0 (Tier-5)	SP-CVS specialty; QL (15 EA per 30 days); NEDS
GILENYA ORAL CAPSULE	\$0 (Tier-5)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MAVENCLAD (10 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (4 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (5 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (6 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (7 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (8 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAVENCLAD (9 TABS) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
MAYZENT ORAL TABLET 0.25 MG	\$0 (Tier-5)	SP-CVS specialty; QL (120 EA per 30 days); NEDS
MAYZENT ORAL TABLET 2 MG	\$0 (Tier-5)	SP-CVS specialty; QL (30 EA per 30 days); NEDS
MAYZENT STARTER PACK ORAL TABLET THERAPY PACK	\$0 (Tier-5)	SP-CVS specialty; NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	SP-CVS specialty; QL (1 ML per 28 days); NEDS
PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; QL (1 ML per 28 days); NEDS
REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-5)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-5)	SP-CVS specialty; NEDS
REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; QL (12 ML per 28 days); NEDS
REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	SP-CVS specialty; NEDS
MYASTHENIA GRAVIS		
pyridostigmine bromide er oral tablet extended release	\$0 (Tier-4)	
pyridostigmine bromide oral solution	\$0 (Tier-3)	
pyridostigmine bromide oral tablet	\$0 (Tier-2)	
OPIOID ANTAGONISTS		
buprenorphine hcl sublingual tablet sublingual 2 mg	\$0 (Tier-2)	QL (360 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
buprenorphine hcl sublingual tablet sublingual 8 mg	\$0 (Tier-2)	QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 8-2 mg	\$0 (Tier-2)	QL (90 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg	\$0 (Tier-2)	QL (360 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual film 4-1 mg	\$0 (Tier-2)	QL (180 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 2-0.5 mg	\$0 (Tier-2)	QL (360 EA per 30 days)
buprenorphine hcl-naloxone hcl sublingual tablet sublingual 8-2 mg	\$0 (Tier-2)	QL (90 EA per 30 days)
LUCEMYRA ORAL TABLET	\$0 (Tier-5)	QL (224 EA per 14 days); NEDS
naloxone hcl injection solution	\$0 (Tier-2)	
naloxone hcl injection solution cartridge	\$0 (Tier-2)	
naloxone hcl injection solution prefilled syringe	\$0 (Tier-2)	
NARCAN NASAL LIQUID	\$0 (Tier-3)	QL (4 EA per 30 days)
PHENYLKETONURIA		
KUVAN ORAL PACKET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KUVAN ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
KUVAN ORAL TABLET SOLUBLE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; NEDS
sapropterin dihydrochloride oral packet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
sapropterin dihydrochloride oral tablet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
sapropterin dihydrochloride oral tablet soluble	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
PHEOCHROMOCYTOMA		
DEMSER ORAL CAPSULE	\$0 (Tier-5)	NEDS
DIBENZYLINE ORAL CAPSULE	\$0 (Tier-4)	
metyrosine oral capsule	\$0 (Tier-5)	NEDS
phenoxybenzamine hcl oral capsule	\$0 (Tier-3)	
PHOSPHATE BINDERS		
AURYXIA ORAL TABLET	\$0 (Tier-5)	PA; NEDS
calcium acetate (phos binder) oral capsule	\$0 (Tier-2)	
calcium acetate (phos binder) oral tablet	\$0 (Tier-2)	
sevelamer carbonate oral packet	\$0 (Tier-3)	
sevelamer carbonate oral tablet	\$0 (Tier-3)	
sevelamer hcl oral tablet	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
POTASSIUM BINDER		
LOKELMA ORAL PACKET	\$0 (Tier-4)	
<i>sodium polystyrene sulfonate oral powder</i>	\$0 (Tier-2)	
<i>sps oral suspension</i>	\$0 (Tier-2)	
VELTASSA ORAL PACKET	\$0 (Tier-4)	
PRIMARY PERIODIC PARALYSIS		
KEVEYIS ORAL TABLET	\$0 (Tier-5)	PA; NEDS
SMOKING CESSATION		
<i>bupropion hcl er (smoking det) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
CHANTIX CONTINUING MONTH PAK ORAL TABLET	\$0 (Tier-3)	QL (56 EA per 28 days)
CHANTIX ORAL TABLET	\$0 (Tier-3)	QL (60 EA per 30 days)
CHANTIX STARTING MONTH PAK ORAL TABLET	\$0 (Tier-3)	QL (53 EA per 28 days)
NICOTROL INHALATION INHALER	\$0 (Tier-3)	
NICOTROL NS NASAL SOLUTION	\$0 (Tier-4)	
<i>varenicline tartrate oral tablet</i>	\$0 (Tier-3)	QL (60 EA per 30 days)
SPINAL MUSCULAR ATROPHY		
EVRYSDI ORAL SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; NEDS
SUCRASE DEFICIENCY		
SUCRAID ORAL SOLUTION	\$0 (Tier-5)	NEDS
SYMPTOMATIC BENIGN PROSTATIC HYPERPLASIA		
<i>alfuzosin hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>dutasteride oral capsule</i>	\$0 (Tier-2)	
<i>dutasteride-tamsulosin hcl oral capsule</i>	\$0 (Tier-3)	
<i>finasteride oral tablet</i>	\$0 (Tier-1)	
<i>silodosin oral capsule</i>	\$0 (Tier-3)	
<i>tadalafil oral tablet</i>	\$0 (Tier-3)	PA; QL (30 EA per 30 days)
<i>tamsulosin hcl oral capsule</i>	\$0 (Tier-2)	
TARDIVE DYSKINESIA		
INGREZZA ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
INGREZZA ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UREA CYCLE DISORDERS		
RAVICTI ORAL LIQUID	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>sodium phenylbutyrate oral powder</i>	\$0 (Tier-5)	NEDS
<i>sodium phenylbutyrate oral tablet</i>	\$0 (Tier-5)	NEDS
UROLOGIC DISORDERS		
<i>bethanechol chloride oral tablet</i>	\$0 (Tier-3)	
<i>darifenacin hydrobromide er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>desmopressin ace spray refrig nasal solution</i>	\$0 (Tier-2)	
<i>desmopressin acetate oral tablet</i>	\$0 (Tier-2)	
ELMIRON ORAL CAPSULE	\$0 (Tier-4)	
<i>flavoxate hcl oral tablet</i>	\$0 (Tier-2)	
JYNARQUE ORAL TABLET	\$0 (Tier-5)	NEDS
JYNARQUE ORAL TABLET THERAPY PACK	\$0 (Tier-5)	NEDS
MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER	\$0 (Tier-4)	
MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
<i>oxybutynin chloride er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>oxybutynin chloride oral syrup</i>	\$0 (Tier-1)	
<i>oxybutynin chloride oral tablet</i>	\$0 (Tier-1)	
<i>potassium citrate er oral tablet extended release</i>	\$0 (Tier-2)	
SAMSCA ORAL TABLET	\$0 (Tier-5)	NEDS
<i>solifenacain succinate oral tablet</i>	\$0 (Tier-3)	
<i>tolterodine tartrate er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>tolterodine tartrate oral tablet</i>	\$0 (Tier-3)	
<i>tolvaptan oral tablet</i>	\$0 (Tier-5)	NEDS
TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-3)	
<i>trospium chloride er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>trospium chloride oral tablet</i>	\$0 (Tier-3)	
UROCIT-K 10 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	
UROCIT-K 15 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
UROCIT-K 5 ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	
WILSON'S DISEASE		
<i>penicillamine oral capsule</i>	\$0 (Tier-5)	NEDS
<i>penicillamine oral tablet</i>	\$0 (Tier-3)	
<i>trientine hcl oral capsule</i>	\$0 (Tier-5)	NEDS
NEUROLOGICAL DRUGS		
ALZHEIMER'S DISEASE		
<i>donepezil hcl oral tablet</i>	\$0 (Tier-1)	
<i>donepezil hcl oral tablet dispersible</i>	\$0 (Tier-2)	
<i>ergoloid mesylates oral tablet</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	
<i>galantamine hydrobromide oral solution</i>	\$0 (Tier-3)	
<i>galantamine hydrobromide oral tablet</i>	\$0 (Tier-2)	
<i>memantine hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-3)	
<i>memantine hcl oral solution</i>	\$0 (Tier-3)	
<i>memantine hcl oral tablet</i>	\$0 (Tier-2)	
NAMZARIC ORAL CAPSULE ER 24 HOUR THERAPY PACK	\$0 (Tier-4)	
NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
<i>rivastigmine tartrate oral capsule</i>	\$0 (Tier-2)	
<i>rivastigmine transdermal patch 24 hour</i>	\$0 (Tier-2)	
MIGRAINE THERAPY		
AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; QL (1 ML per 30 days)
<i>almotriptan malate oral tablet</i>	\$0 (Tier-4)	
<i>dihydroergotamine mesylate nasal solution</i>	\$0 (Tier-5)	NEDS
<i>eletriptan hydrobromide oral tablet</i>	\$0 (Tier-3)	
EMGALITY (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (3 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA; QL (2 ML per 30 days)
<i>frovatriptan succinate oral tablet</i>	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
MIGERGOT RECTAL SUPPOSITORY	\$0 (Tier-5)	NEDS
<i>naratriptan hcl oral tablet</i>	\$0 (Tier-4)	
NAYZILAM NASAL SOLUTION	\$0 (Tier-4)	PA; QL (10 EA per 30 days)
<i>rizatriptan benzoate oral tablet</i>	\$0 (Tier-2)	
<i>rizatriptan benzoate oral tablet dispersible</i>	\$0 (Tier-2)	
<i>sumatriptan nasal solution 20 mg/act</i>	\$0 (Tier-3)	
<i>sumatriptan nasal solution 5 mg/act</i>	\$0 (Tier-2)	
<i>sumatriptan succinate oral tablet</i>	\$0 (Tier-2)	
<i>sumatriptan succinate refill subcutaneous solution cartridge 4 mg/0.5ml</i>	\$0 (Tier-2)	
<i>sumatriptan succinate refill subcutaneous solution cartridge 6 mg/0.5ml</i>	\$0 (Tier-3)	
<i>sumatriptan succinate subcutaneous solution</i>	\$0 (Tier-3)	
<i>sumatriptan succinate subcutaneous solution auto-injector 4 mg/0.5ml</i>	\$0 (Tier-2)	
<i>sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml</i>	\$0 (Tier-3)	
<i>sumatriptan-naproxen sodium oral tablet</i>	\$0 (Tier-3)	
<i>zolmitriptan oral tablet</i>	\$0 (Tier-4)	
<i>zolmitriptan oral tablet dispersible</i>	\$0 (Tier-2)	
PARKINSON'S DISEASE		
APOKYN SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-5)	NEDS
<i>benztropine mesylate oral tablet</i>	\$0 (Tier-1)	PA
<i>bromocriptine mesylate oral capsule</i>	\$0 (Tier-2)	
<i>bromocriptine mesylate oral tablet</i>	\$0 (Tier-2)	
<i>cabergoline oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa er oral tablet extended release</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa oral tablet</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa oral tablet dispersible</i>	\$0 (Tier-2)	
<i>carbidopa-levodopa-entacapone oral tablet</i>	\$0 (Tier-2)	
DUOPA ENTERAL SUSPENSION	\$0 (Tier-4)	
<i>entacapone oral tablet</i>	\$0 (Tier-2)	
INBRIJA INHALATION CAPSULE	\$0 (Tier-5)	PA; NEDS
KYNMOBI SUBLINGUAL FILM	\$0 (Tier-5)	NEDS
NEUPRO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-4)	QL (30 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
NOURIANZ ORAL TABLET	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
ONGENTYS ORAL CAPSULE	\$0 (Tier-4)	PA
<i>pramipexole dihydrochloride er oral tablet extended release 24 hour</i>	\$0 (Tier-4)	
<i>pramipexole dihydrochloride oral tablet</i>	\$0 (Tier-1)	
<i>rasagiline mesylate oral tablet</i>	\$0 (Tier-4)	
<i>ropinirole hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>ropinirole hcl oral tablet</i>	\$0 (Tier-1)	
RYTARY ORAL CAPSULE EXTENDED RELEASE	\$0 (Tier-4)	
<i>selegiline hcl oral capsule</i>	\$0 (Tier-2)	
<i>selegiline hcl oral tablet</i>	\$0 (Tier-2)	
<i>tolcapone oral tablet</i>	\$0 (Tier-5)	NEDS
<i>trihexyphenidyl hcl oral solution</i>	\$0 (Tier-1)	PA
<i>trihexyphenidyl hcl oral tablet</i>	\$0 (Tier-1)	PA
PSEUDOBULBAR AFFECT		
NUEDEXTA ORAL CAPSULE	\$0 (Tier-3)	PA
SEIZURES		
APTIOM ORAL TABLET	\$0 (Tier-4)	
BANZEL ORAL SUSPENSION	\$0 (Tier-4)	
BANZEL ORAL TABLET	\$0 (Tier-4)	
BRIVIACT ORAL SOLUTION	\$0 (Tier-5)	PA; NEDS
BRIVIACT ORAL TABLET	\$0 (Tier-5)	PA; NEDS
<i>carbamazepine er oral capsule extended release 12 hour</i>	\$0 (Tier-3)	
<i>carbamazepine er oral tablet extended release 12 hour</i>	\$0 (Tier-3)	
<i>carbamazepine oral suspension</i>	\$0 (Tier-4)	
<i>carbamazepine oral tablet</i>	\$0 (Tier-1)	
<i>carbamazepine oral tablet chewable</i>	\$0 (Tier-2)	
CELONTIN ORAL CAPSULE	\$0 (Tier-4)	
<i>clobazam oral suspension</i>	\$0 (Tier-3)	
<i>clobazam oral tablet</i>	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>clonazepam oral tablet</i>	\$0 (Tier-1)	
<i>clonazepam oral tablet dispersible</i>	\$0 (Tier-3)	
DIACOMIT ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DIACOMIT ORAL PACKET	\$0 (Tier-5)	PA; NEDS
DIASTAT ACUDIAL RECTAL GEL	\$0 (Tier-3)	
DIASTAT PEDIATRIC RECTAL GEL	\$0 (Tier-3)	
<i>diazepam oral concentrate</i>	\$0 (Tier-2)	
<i>diazepam oral solution</i>	\$0 (Tier-2)	
<i>diazepam oral tablet</i>	\$0 (Tier-2)	
<i>diazepam rectal gel</i>	\$0 (Tier-2)	
DILANTIN INFATABS ORAL TABLET CHEWABLE	\$0 (Tier-3)	
DILANTIN ORAL CAPSULE	\$0 (Tier-3)	
DILANTIN ORAL SUSPENSION	\$0 (Tier-3)	
<i>divalproex sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>divalproex sodium oral capsule delayed release sprinkle</i>	\$0 (Tier-2)	
<i>divalproex sodium oral tablet delayed release</i>	\$0 (Tier-2)	
EPIDIOLEX ORAL SOLUTION	\$0 (Tier-4)	PA; SP-CVS specialty
<i>epitol oral tablet</i>	\$0 (Tier-1)	
<i>ethosuximide oral capsule</i>	\$0 (Tier-2)	
<i>ethosuximide oral solution</i>	\$0 (Tier-2)	
<i>felbamate oral suspension</i>	\$0 (Tier-2)	
<i>felbamate oral tablet</i>	\$0 (Tier-2)	
FINTEPLA ORAL SOLUTION	\$0 (Tier-5)	PA; NEDS
FYCOMPA ORAL SUSPENSION	\$0 (Tier-4)	PA
FYCOMPA ORAL TABLET	\$0 (Tier-4)	PA
<i>gabapentin oral capsule</i>	\$0 (Tier-1)	
<i>gabapentin oral solution</i>	\$0 (Tier-2)	
<i>gabapentin oral tablet</i>	\$0 (Tier-1)	
HORIZANT ORAL TABLET EXTENDED RELEASE	\$0 (Tier-4)	QL (60 EA per 30 days)
<i>lamotrigine er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>lamotrigine oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet</i>	\$0 (Tier-1)	
<i>lamotrigine oral tablet chewable</i>	\$0 (Tier-2)	
<i>lamotrigine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-blue oral kit</i>	\$0 (Tier-2)	
<i>lamotrigine starter kit-green oral kit</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
lamotrigine starter kit-orange oral kit	\$0 (Tier-2)	
levetiracetam er oral tablet extended release 24 hour	\$0 (Tier-2)	
levetiracetam oral solution	\$0 (Tier-2)	
levetiracetam oral tablet	\$0 (Tier-2)	
LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
oxcarbazepine oral suspension	\$0 (Tier-2)	
oxcarbazepine oral tablet	\$0 (Tier-2)	
phenobarbital oral elixir	\$0 (Tier-2)	PA
phenobarbital oral tablet	\$0 (Tier-2)	PA
phenytoin oral suspension	\$0 (Tier-2)	
phenytoin oral tablet chewable	\$0 (Tier-2)	
phenytoin sodium extended oral capsule	\$0 (Tier-2)	
pregabalin er oral tablet extended release 24 hour	\$0 (Tier-3)	
pregabalin oral capsule	\$0 (Tier-3)	
pregabalin oral solution	\$0 (Tier-3)	
primidone oral tablet	\$0 (Tier-2)	
QUDEXY XR ORAL CAPSULE ER 24 HOUR SPRINKLE	\$0 (Tier-4)	
roweepra oral tablet	\$0 (Tier-2)	
rufinamide oral suspension	\$0 (Tier-3)	
rufinamide oral tablet	\$0 (Tier-3)	
SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE	\$0 (Tier-4)	
SYMPAZAN ORAL FILM	\$0 (Tier-4)	
tiagabine hcl oral tablet 12 mg, 2 mg, 4 mg	\$0 (Tier-4)	
tiagabine hcl oral tablet 16 mg	\$0 (Tier-5)	NEDS
topiramate er oral capsule er 24 hour sprinkle	\$0 (Tier-2)	
topiramate oral capsule sprinkle	\$0 (Tier-2)	
topiramate oral tablet	\$0 (Tier-1)	
valproic acid oral capsule	\$0 (Tier-2)	
valproic acid oral solution	\$0 (Tier-2)	
VALTOCO 10 MG DOSE NASAL LIQUID	\$0 (Tier-4)	PA; QL (10 EA per 30 days)
VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-4)	PA; QL (10 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK	\$0 (Tier-4)	PA; QL (10 EA per 30 days)
VALTOCO 5 MG DOSE NASAL LIQUID	\$0 (Tier-4)	PA; QL (10 EA per 30 days)
<i>vigabatrin oral packet</i>	\$0 (Tier-5)	NEDS
<i>vigabatrin oral tablet</i>	\$0 (Tier-5)	NEDS
<i>vigadrone oral packet</i>	\$0 (Tier-5)	NEDS
VIMPAT ORAL SOLUTION	\$0 (Tier-4)	
VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG	\$0 (Tier-5)	QL (60 EA per 30 days); NEDS
VIMPAT ORAL TABLET 50 MG	\$0 (Tier-4)	QL (60 EA per 30 days)
XCOPRI (250 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-4)	PA
XCOPRI (350 MG DAILY DOSE) ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; NEDS
XCOPRI ORAL TABLET	\$0 (Tier-5)	PA; NEDS
XCOPRI ORAL TABLET THERAPY PACK 14 X 12.5 MG & 14 X 25 MG	\$0 (Tier-4)	PA
XCOPRI ORAL TABLET THERAPY PACK 14 X 150 MG & 14 X 200 MG, 14 X 50 MG & 14 X 100 MG	\$0 (Tier-5)	PA; NEDS
<i>zonisamide oral capsule</i>	\$0 (Tier-2)	
SPASTICITY		
<i>baclofen oral tablet</i>	\$0 (Tier-1)	
<i>cyclobenzaprine hcl oral tablet</i>	\$0 (Tier-3)	PA
<i>dantrolene sodium oral capsule</i>	\$0 (Tier-2)	
<i>tizanidine hcl oral capsule 2 mg, 4 mg</i>	\$0 (Tier-4)	
<i>tizanidine hcl oral capsule 6 mg</i>	\$0 (Tier-3)	
<i>tizanidine hcl oral tablet</i>	\$0 (Tier-2)	
PAIN AND INFLAMMATORY DISEASES		
ARTHRITIS		
AZASAN ORAL TABLET	\$0 (Tier-4)	B vs D
<i>azathioprine oral tablet</i>	\$0 (Tier-2)	B vs D
ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8.16 ML per 28 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/ML	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
ENBREL SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8 EA per 28 days); NEDS
ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-5)	PA; SP-CVS specialty; QL (8 ML per 28 days); NEDS
HUMIRA PEDIATRIC CROHNS START SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML	\$0 (Tier-5)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
HUMIRA PEN SUBCUTANEOUS PEN-INJECTOR KIT 80 MG/0.8ML	\$0 (Tier-5)	PA; SP-CVS specialty; QL (4 EA per 28 days); NEDS
HUMIRA PEN-CD/UC/HS STARTER SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PEDIATRIC UC START SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PS/UV/ADOL HS START SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HUMIRA PEN-PSOR/UVEIT STARTER SUBCUTANEOUS PEN-INJECTOR KIT	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-5)	PA; SP-CVS specialty; QL (6 EA per 28 days); NEDS
<i>leflunomide oral tablet</i>	\$0 (Tier-2)	
<i>methotrexate oral tablet</i>	\$0 (Tier-2)	B vs D
RASUVO SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-4)	
REMICADE INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
RIDAURA ORAL CAPSULE	\$0 (Tier-5)	NEDS
RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
SKYRIZI (150 MG DOSE) SUBCUTANEOUS PREFILLED SYRINGE KIT	\$0 (Tier-5)	PA; SP-CVS specialty; QL (1 EA per 28 days); NEDS
SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-5)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS
STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (1 ML per 28 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (4 ML per 28 days); NEDS
TREXALL ORAL TABLET	\$0 (Tier-4)	B vs D
XATMEP ORAL SOLUTION	\$0 (Tier-4)	B vs D
XELJANZ ORAL SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; QL (300 ML per 30 days); NEDS
XELJANZ ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR	\$0 (Tier-5)	PA; SP-CVS specialty; QL (30 EA per 30 days); NEDS
GOUT		
<i>allopurinol oral tablet</i>	\$0 (Tier-1)	
<i>colchicine oral capsule</i>	\$0 (Tier-3)	
<i>colchicine oral tablet</i>	\$0 (Tier-2)	
<i>colchicine-probenecid oral tablet</i>	\$0 (Tier-2)	
<i>febuxostat oral tablet</i>	\$0 (Tier-3)	STPA
GLOPERBA ORAL SOLUTION	\$0 (Tier-4)	
<i>probenecid oral tablet</i>	\$0 (Tier-2)	
PAIN, NSAID ANALGESICS		
<i>celecoxib oral capsule</i>	\$0 (Tier-3)	
<i>diclofenac potassium 50mg oral tablet</i>	\$0 (Tier-3)	
<i>diclofenac sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>diclofenac sodium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>diclofenac-misoprostol oral tablet delayed release</i>	\$0 (Tier-4)	
<i>diflunisal oral tablet</i>	\$0 (Tier-3)	
<i>etodolac er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>etodolac oral capsule</i>	\$0 (Tier-3)	
<i>etodolac oral tablet</i>	\$0 (Tier-2)	
<i>fenoprofen calcium oral capsule</i>	\$0 (Tier-4)	
<i>fenoprofen calcium oral tablet</i>	\$0 (Tier-2)	
<i>flurbiprofen oral tablet</i>	\$0 (Tier-2)	
<i>ibuprofen oral suspension</i>	\$0 (Tier-2)	
<i>ibuprofen oral tablet</i>	\$0 (Tier-1)	
INDOCIN ORAL SUSPENSION	\$0 (Tier-4)	
<i>indomethacin er oral capsule extended release</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>indomethacin oral capsule</i>	\$0 (Tier-1)	
<i>ketoprofen er oral capsule extended release 24 hour</i>	\$0 (Tier-4)	
<i>ketoprofen oral capsule</i>	\$0 (Tier-2)	
<i>meclofenamate sodium oral capsule</i>	\$0 (Tier-4)	
<i>mefenamic acid oral capsule</i>	\$0 (Tier-2)	
<i>meloxicam oral capsule</i>	\$0 (Tier-3)	
<i>meloxicam oral tablet</i>	\$0 (Tier-1)	
<i>nabumetone oral tablet</i>	\$0 (Tier-2)	
<i>naproxen dr oral tablet delayed release</i>	\$0 (Tier-2)	
<i>naproxen oral suspension</i>	\$0 (Tier-2)	
<i>naproxen oral tablet</i>	\$0 (Tier-1)	
<i>naproxen oral tablet delayed release</i>	\$0 (Tier-2)	
<i>naproxen sodium er oral tablet extended release 24 hour</i>	\$0 (Tier-5)	NEDS
<i>naproxen sodium oral tablet</i>	\$0 (Tier-1)	
<i>oxaprozin oral tablet</i>	\$0 (Tier-4)	
<i>piroxicam oral capsule</i>	\$0 (Tier-3)	
<i>sulindac oral tablet</i>	\$0 (Tier-2)	

PAIN, OPIOID AND OTHER ANALGESICS

<i>acetaminophen-codeine #3 oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>acetaminophen-codeine oral solution</i>	\$0 (Tier-2)	QL (3600 ML per 30 days)
<i>acetaminophen-codeine oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
<i>ACTIQ BUCCAL LOZENGE ON A HANDLE</i>	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
<i>BELBUCA BUCCAL FILM</i>	\$0 (Tier-4)	QL (60 EA per 30 days)
<i>buprenorphine transdermal patch weekly</i>	\$0 (Tier-3)	QL (4 EA per 28 days)
<i>butorphanol tartrate nasal solution</i>	\$0 (Tier-2)	QL (7.5 ML per 30 days)
<i>codeine sulfate oral tablet</i>	\$0 (Tier-3)	QL (180 EA per 30 days)
<i>endocet oral tablet</i>	\$0 (Tier-3)	QL (240 EA per 30 days)
<i>fentanyl citrate buccal lozenge on a handle</i>	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl citrate buccal tablet</i>	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
<i>fentanyl 12 mcg/hr, 25 mcg/hr, 50mg/hr, 75 mg/hr, 100 mg/hr transdermal patch</i>	\$0 (Tier-2)	QL (10 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrant	\$0 (Tier-3)	QL (60 EA per 30 days)
hydrocodone-acetaminophen oral solution	\$0 (Tier-2)	QL (3600 ML per 30 days)
hydrocodone-acetaminophen oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days)
hydrocodone-ibuprofen oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days)
hydromorphone hcl er oral tablet er 24 hour abuse-deterrant	\$0 (Tier-3)	QL (30 EA per 30 days)
hydromorphone hcl er oral tablet extended release 24 hour	\$0 (Tier-3)	QL (30 EA per 30 days)
hydromorphone hcl oral liquid	\$0 (Tier-2)	QL (1350 ML per 30 days)
hydromorphone hcl oral tablet 2 mg, 4 mg	\$0 (Tier-2)	QL (240 EA per 30 days)
hydromorphone hcl oral tablet 8 mg	\$0 (Tier-2)	QL (120 EA per 30 days)
HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT	\$0 (Tier-3)	QL (60 EA per 30 days)
LAZANDA NASAL SOLUTION 100 MCG/ACT	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
LAZANDA NASAL SOLUTION 400 MCG/ACT	\$0 (Tier-5)	PA; QL (15 EA per 30 days); NEDS
levorphanol tartrate oral tablet	\$0 (Tier-5)	QL (240 EA per 30 days); NEDS
methadone hcl oral solution 10 mg/5ml	\$0 (Tier-2)	QL (600 ML per 30 days)
methadone hcl oral solution 5 mg/5ml	\$0 (Tier-2)	QL (1200 ML per 30 days)
methadone hcl oral tablet	\$0 (Tier-2)	QL (120 EA per 30 days)
morphine sulfate (concentrate) oral solution	\$0 (Tier-2)	QL (180 ML per 30 days)
morphine sulfate er beads oral capsule extended release 24 hour	\$0 (Tier-4)	QL (60 EA per 30 days)
morphine sulfate er oral capsule extended release 24 hour	\$0 (Tier-4)	QL (60 EA per 30 days)
morphine sulfate er oral tablet extended release	\$0 (Tier-3)	QL (60 EA per 30 days)
morphine sulfate oral solution	\$0 (Tier-2)	QL (900 ML per 30 days)
morphine sulfate oral tablet	\$0 (Tier-2)	QL (180 EA per 30 days)
oxycodone hcl er oral tablet er 12 hour abuse-deterrant	\$0 (Tier-3)	QL (60 EA per 30 days)
oxycodone hcl oral capsule	\$0 (Tier-2)	QL (240 EA per 30 days)
oxycodone hcl oral concentrate	\$0 (Tier-2)	QL (120 ML per 30 days)
oxycodone hcl oral solution	\$0 (Tier-2)	QL (2400 ML per 30 days)
oxycodone hcl oral tablet 10 mg, 15 mg	\$0 (Tier-2)	QL (180 EA per 30 days)
oxycodone hcl oral tablet 20 mg, 30 mg	\$0 (Tier-2)	QL (120 EA per 30 days)
oxycodone hcl oral tablet 5 mg	\$0 (Tier-2)	QL (240 EA per 30 days)
oxycodone-acetaminophen oral tablet	\$0 (Tier-2)	QL (240 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>oxymorphone hcl er oral tablet extended release 12 hour</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
<i>oxymorphone hcl oral tablet</i>	\$0 (Tier-2)	QL (180 EA per 30 days)
SUBSYS SUBLINGUAL LIQUID	\$0 (Tier-5)	PA; QL (120 EA per 30 days); NEDS
<i>tramadol hcl er (biphasic) oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl er oral capsule extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	QL (30 EA per 30 days)
<i>tramadol hcl oral tablet 100 mg</i>	\$0 (Tier-2)	QL (120 EA per 30 days)
<i>tramadol hcl oral tablet 50 mg</i>	\$0 (Tier-1)	QL (240 EA per 30 days)
<i>tramadol-acetaminophen oral tablet</i>	\$0 (Tier-2)	QL (240 EA per 30 days)
PSYCHIATRIC		
ALCOHOL DETERRENTS		
<i>acamprosate calcium oral tablet delayed release</i>	\$0 (Tier-2)	
<i>disulfiram oral tablet</i>	\$0 (Tier-2)	
<i>naltrexone hcl oral tablet</i>	\$0 (Tier-2)	
VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-5)	SP-CVS specialty; NEDS
ANXIETY		
<i>alprazolam er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>alprazolam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>alprazolam oral tablet</i>	\$0 (Tier-1)	
<i>alprazolam oral tablet dispersible</i>	\$0 (Tier-3)	
<i>buspirone hcl oral tablet</i>	\$0 (Tier-1)	
<i>chlordiazepoxide-amitriptyline oral tablet</i>	\$0 (Tier-2)	
<i>clorazepate dipotassium oral tablet</i>	\$0 (Tier-4)	
<i>lorazepam intensol oral concentrate</i>	\$0 (Tier-2)	
<i>lorazepam oral tablet</i>	\$0 (Tier-1)	
<i>oxazepam oral capsule</i>	\$0 (Tier-3)	
ATTENTION DEFICIT DISORDER		
<i>amphetamine er oral suspension extended release</i>	\$0 (Tier-3)	
<i>amphetamine sulfate oral tablet</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
amphetamine-dextroamphetamine oral capsule extended release 24 hour	\$0 (Tier-3)	
amphetamine-dextroamphetamine oral tablet	\$0 (Tier-3)	
atomoxetine hcl oral capsule 10 mg, 18 mg, 25 mg, 40 mg, 60 mg	\$0 (Tier-4)	QL (60 EA per 30 days)
atomoxetine hcl oral capsule 100 mg, 80 mg	\$0 (Tier-4)	QL (30 EA per 30 days)
clonidine hcl er oral tablet extended release 12 hour	\$0 (Tier-2)	
DESOXYN ORAL TABLET	\$0 (Tier-4)	PA
DEXEDRINE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
dexamphetamine hcl er oral capsule extended release 24 hour	\$0 (Tier-3)	
dexamphetamine hcl oral tablet	\$0 (Tier-2)	
dextroamphetamine sulfate er oral capsule extended release 24 hour	\$0 (Tier-3)	
dextroamphetamine sulfate oral solution	\$0 (Tier-2)	
dextroamphetamine sulfate oral tablet	\$0 (Tier-3)	
guanfacine hcl er oral tablet extended release 24 hour	\$0 (Tier-3)	QL (90 EA per 90 days)
KAPVAY ORAL TABLET EXTENDED RELEASE 12 HOUR	\$0 (Tier-4)	
methamphetamine hcl oral tablet	\$0 (Tier-2)	PA
METHYLIN ORAL SOLUTION	\$0 (Tier-3)	
methylphenidate hcl er (cd) oral capsule extended release	\$0 (Tier-2)	
methylphenidate hcl er (la) oral capsule extended release 24 hour	\$0 (Tier-2)	
methylphenidate hcl er oral tablet extended release	\$0 (Tier-2)	
methylphenidate hcl er oral tablet extended release 24 hour	\$0 (Tier-2)	
methylphenidate hcl oral solution	\$0 (Tier-2)	
methylphenidate hcl oral tablet	\$0 (Tier-2)	
methylphenidate hcl oral tablet chewable	\$0 (Tier-2)	
QUEBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	
QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER	\$0 (Tier-4)	
relexxii oral tablet extended release	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
VYVANSE ORAL CAPSULE	\$0 (Tier-4)	PA
VYVANSE ORAL TABLET CHEWABLE	\$0 (Tier-4)	PA
BIPOLAR DISORDER		
EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR	\$0 (Tier-4)	
<i>lithium carbonate er oral tablet extended release</i>	\$0 (Tier-1)	
<i>lithium carbonate oral capsule</i>	\$0 (Tier-1)	
<i>lithium carbonate oral tablet</i>	\$0 (Tier-1)	
<i>olanzapine-fluoxetine hcl oral capsule</i>	\$0 (Tier-2)	
RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-3)	
<i>risperidone oral solution</i>	\$0 (Tier-2)	
<i>risperidone oral tablet</i>	\$0 (Tier-1)	
<i>risperidone oral tablet dispersible</i>	\$0 (Tier-2)	
DEPRESSION		
<i>amitriptyline hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>amoxapine oral tablet</i>	\$0 (Tier-2)	
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG	\$0 (Tier-4)	STPA
APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 522 MG	\$0 (Tier-5)	STPA; NEDS
<i>bupropion hcl er (sr) oral tablet extended release 12 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl er (xl) oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>bupropion hcl oral tablet</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral solution</i>	\$0 (Tier-2)	
<i>citalopram hydrobromide oral tablet</i>	\$0 (Tier-1)	
<i>clomipramine hcl oral capsule</i>	\$0 (Tier-2)	PA
<i>desipramine hcl oral tablet</i>	\$0 (Tier-2)	
<i>desvenlafaxine er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>desvenlafaxine succinate er oral tablet extended release 24 hour</i>	\$0 (Tier-2)	
<i>doxepin hcl oral capsule</i>	\$0 (Tier-3)	
<i>doxepin hcl oral concentrate</i>	\$0 (Tier-2)	
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 20 MG, 60 MG	\$0 (Tier-4)	QL (60 EA per 30 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DRIZALMA SPRINKLE ORAL CAPSULE DELAYED RELEASE SPRINKLE 30 MG, 40 MG	\$0 (Tier-4)	QL (90 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 60 mg</i>	\$0 (Tier-3)	QL (60 EA per 30 days)
<i>duloxetine hcl oral capsule delayed release particles 30 mg, 40 mg</i>	\$0 (Tier-3)	QL (90 EA per 30 days)
EMSAM TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-5)	STPA; NEDS
<i>escitalopram oxalate oral solution</i>	\$0 (Tier-4)	
<i>escitalopram oxalate oral tablet</i>	\$0 (Tier-1)	
FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR	\$0 (Tier-4)	STPA
FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK	\$0 (Tier-4)	STPA
<i>fluoxetine hcl (pmdd) oral tablet</i>	\$0 (Tier-3)	
<i>fluoxetine hcl oral capsule</i>	\$0 (Tier-1)	
<i>fluoxetine hcl oral capsule delayed release</i>	\$0 (Tier-1)	
<i>fluoxetine hcl oral solution</i>	\$0 (Tier-3)	
<i>fluoxetine hcl oral tablet</i>	\$0 (Tier-4)	
<i>fluvoxamine maleate er oral capsule extended release 24 hour</i>	\$0 (Tier-4)	
<i>fluvoxamine maleate oral tablet</i>	\$0 (Tier-2)	
<i>imipramine hcl oral tablet</i>	\$0 (Tier-2)	PA
<i>imipramine pamoate oral capsule</i>	\$0 (Tier-4)	PA
MARPLAN ORAL TABLET	\$0 (Tier-4)	
<i>mirtazapine oral tablet</i>	\$0 (Tier-2)	
<i>mirtazapine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>nefazodone hcl oral tablet</i>	\$0 (Tier-2)	
<i>nortriptyline hcl oral capsule</i>	\$0 (Tier-1)	
<i>nortriptyline hcl oral solution</i>	\$0 (Tier-1)	
<i>paroxetine hcl er oral tablet extended release 24 hour</i>	\$0 (Tier-4)	
<i>paroxetine hcl oral tablet</i>	\$0 (Tier-1)	
<i>paroxetine mesylate oral capsule</i>	\$0 (Tier-1)	
PAXIL ORAL SUSPENSION	\$0 (Tier-4)	
PEXEVA ORAL TABLET	\$0 (Tier-4)	STPA
<i>phenelzine sulfate oral tablet</i>	\$0 (Tier-2)	
<i>protriptyline hcl oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
sertraline hcl oral concentrate	\$0 (Tier-2)	
sertraline hcl oral tablet	\$0 (Tier-1)	
tranylcypromine sulfate oral tablet	\$0 (Tier-2)	
trazodone hcl oral tablet	\$0 (Tier-1)	
trimipramine maleate oral capsule	\$0 (Tier-2)	PA
TRINTELLIX ORAL TABLET	\$0 (Tier-4)	
venlafaxine hcl er oral capsule extended release 24 hour	\$0 (Tier-2)	
venlafaxine hcl er oral tablet extended release 24 hour	\$0 (Tier-2)	
venlafaxine hcl oral tablet	\$0 (Tier-2)	
VIIBRYD ORAL TABLET	\$0 (Tier-4)	
VIIBRYD STARTER PACK ORAL KIT	\$0 (Tier-4)	
INSOMNIA		
doxepin hcl oral tablet	\$0 (Tier-3)	QL (30 EA per 30 days)
estazolam oral tablet	\$0 (Tier-2)	
eszopiclone oral tablet	\$0 (Tier-3)	
flurazepam hcl oral capsule	\$0 (Tier-2)	
HETLIOZ LQ ORAL SUSPENSION	\$0 (Tier-5)	PA; NEDS
HETLIOZ ORAL CAPSULE	\$0 (Tier-5)	PA; NEDS
ramelteon oral tablet	\$0 (Tier-3)	QL (30 EA per 30 days)
temazepam oral capsule	\$0 (Tier-2)	
triazolam oral tablet	\$0 (Tier-2)	
zaleplon oral capsule	\$0 (Tier-2)	
zolpidem tartrate er oral tablet extended release	\$0 (Tier-4)	
zolpidem tartrate oral tablet	\$0 (Tier-2)	
zolpidem tartrate sublingual tablet sublingual	\$0 (Tier-3)	
NARCOLEPSY		
armodafinil oral tablet	\$0 (Tier-3)	PA
modafinil oral tablet	\$0 (Tier-4)	PA
SUNOSI ORAL TABLET	\$0 (Tier-4)	PA
WAKIX ORAL TABLET	\$0 (Tier-5)	PA; QL (60 EA per 30 days); NEDS
XYREM ORAL SOLUTION	\$0 (Tier-5)	LA; NEDS
XYWAV ORAL SOLUTION	\$0 (Tier-5)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PSYCHOSES		
ABILITY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-5)	NEDS
ABILITY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER	\$0 (Tier-5)	NEDS
ABILITY MYCITE ORAL TABLET	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
<i>ariPIPrazole oral solution</i>	\$0 (Tier-3)	
<i>ariPIPrazole oral tablet</i>	\$0 (Tier-3)	
<i>ariPIPrazole oral tablet dispersible</i>	\$0 (Tier-3)	
ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-5)	NEDS
ARISTADA INTRAMUSCULAR PREFILLED SYRINGE	\$0 (Tier-5)	NEDS
<i>asenapine maleate sublingual tablet sublingual</i>	\$0 (Tier-3)	STPA
CAPLYTA ORAL CAPSULE	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
<i>chlorpromazine hcl oral concentrate</i>	\$0 (Tier-4)	
<i>chlorpromazine hcl oral tablet</i>	\$0 (Tier-4)	
<i>clozapine oral tablet</i>	\$0 (Tier-2)	
<i>clozapine oral tablet dispersible</i>	\$0 (Tier-2)	
FANAPT ORAL TABLET	\$0 (Tier-4)	STPA
FANAPT TITRATION PACK ORAL TABLET	\$0 (Tier-4)	STPA
<i>fluphenazine decanoate injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl injection solution</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral concentrate</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral elixir</i>	\$0 (Tier-2)	
<i>fluphenazine hcl oral tablet</i>	\$0 (Tier-2)	
GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-4)	
<i>haloperidol decanoate intramuscular solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate injection solution</i>	\$0 (Tier-2)	
<i>haloperidol lactate oral concentrate</i>	\$0 (Tier-1)	
<i>haloperidol oral tablet</i>	\$0 (Tier-1)	
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 78 MG/0.5ML	\$0 (Tier-5)	NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 39 MG/0.25ML	\$0 (Tier-3)	
INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG	\$0 (Tier-4)	STPA; QL (30 EA per 30 days)
LATUDA ORAL TABLET 80 MG	\$0 (Tier-4)	STPA; QL (60 EA per 30 days)
<i>loxpiprazine succinate oral capsule</i>	\$0 (Tier-2)	
<i>molindone hcl oral tablet</i>	\$0 (Tier-3)	
NUPLAZID ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
NUPLAZID ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
<i>olanzapine intramuscular solution reconstituted</i>	\$0 (Tier-2)	
<i>olanzapine oral tablet</i>	\$0 (Tier-2)	
<i>olanzapine oral tablet dispersible</i>	\$0 (Tier-2)	
<i>paliperidone er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>perphenazine oral tablet</i>	\$0 (Tier-3)	
<i>perphenazine-amitriptyline oral tablet</i>	\$0 (Tier-3)	
PERSERIS SUBCUTANEOUS PREFILLED SYRINGE	\$0 (Tier-5)	NEDS
<i>pimozide oral tablet</i>	\$0 (Tier-4)	
<i>quetiapine fumarate er oral tablet extended release 24 hour</i>	\$0 (Tier-3)	
<i>quetiapine fumarate oral tablet 100 mg, 200 mg, 300 mg, 400 mg</i>	\$0 (Tier-2)	
<i>quetiapine fumarate oral tablet 25 mg, 50 mg</i>	\$0 (Tier-2)	QL (60 EA per 30 days)
REXULTI ORAL TABLET 0.25 MG	\$0 (Tier-4)	
REXULTI ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG	\$0 (Tier-5)	NEDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG	\$0 (Tier-5)	STPA; NEDS
SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 2.5 MG, 5 MG	\$0 (Tier-4)	STPA
SECUADO TRANSDERMAL PATCH 24 HOUR	\$0 (Tier-5)	NEDS
<i>thioridazine hcl oral tablet</i>	\$0 (Tier-1)	PA
<i>thiothixene oral capsule</i>	\$0 (Tier-3)	

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Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
trifluoperazine hcl oral tablet	\$0 (Tier-2)	
VERSACLOZ ORAL SUSPENSION	\$0 (Tier-5)	NEDS
VRAYLAR ORAL CAPSULE	\$0 (Tier-5)	NEDS
VRAYLAR ORAL CAPSULE THERAPY PACK	\$0 (Tier-4)	
ziprasidone hcl oral capsule	\$0 (Tier-2)	
ziprasidone mesylate intramuscular solution reconstituted	\$0 (Tier-3)	
ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED	\$0 (Tier-3)	
ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED	\$0 (Tier-3)	
RESPIRATORY DRUGS		
ASTHMA		
ADVAIR HFA INHALATION AEROSOL	\$0 (Tier-3)	QL (72 GM per 90 days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act	\$0 (Tier-1)	QL (51 GM per 90 days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020503)	\$0 (Tier-1)	QL (40.2 GM per 90 days)
albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act (nda020983)	\$0 (Tier-1)	QL (108 GM per 90 days)
albuterol sulfate inhalation nebulization solution	\$0 (Tier-2)	B vs D
albuterol sulfate oral syrup	\$0 (Tier-1)	
albuterol sulfate oral tablet	\$0 (Tier-3)	
ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
arformoterol tartrate inhalation nebulization solution	\$0 (Tier-3)	B vs D
ATROVENT HFA INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (77.4 GM per 90 days)
BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
BREZTRI AEROSPHERE INHALATION AEROSOL	\$0 (Tier-3)	QL (32.1 GM per 90 days)
BROVANA INHALATION NEBULIZATION SOLUTION	\$0 (Tier-4)	B vs D
budesonide inhalation suspension	\$0 (Tier-2)	B vs D
budesonide-formoterol fumarate inhalation aerosol	\$0 (Tier-3)	QL (30.6 GM per 90 days)

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (24 GM per 90 days)
<i>cromolyn sodium inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
DUPIXENT SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-Injector	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/dose, 250-50 mcg/dose, 500-50 mcg/dose</i>	\$0 (Tier-3)	QL (180 EA per 90 days)
<i>fluticasone-salmeterol inhalation aerosol powder breath activated 113-14 mcg/act, 232-14 mcg/act, 55-14 mcg/act</i>	\$0 (Tier-2)	QL (3 EA per 90 days)
<i>formoterol fumarate inhalation nebulization solution</i>	\$0 (Tier-3)	B vs D
<i>ipratropium bromide inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>ipratropium-albuterol inhalation solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol hcl inhalation nebulization solution</i>	\$0 (Tier-2)	B vs D
<i>levalbuterol tartrate inhalation aerosol</i>	\$0 (Tier-3)	QL (90 GM per 90 days)
<i>montelukast sodium oral packet</i>	\$0 (Tier-2)	
<i>montelukast sodium oral tablet</i>	\$0 (Tier-1)	
<i>montelukast sodium oral tablet chewable</i>	\$0 (Tier-2)	
PERFOROMIST INHALATION NEBULIZATION SOLUTION	\$0 (Tier-3)	B vs D
PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (6 EA per 90 days)
QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED	\$0 (Tier-3)	QL (63.6 GM per 90 days)
SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
SPIRIVA HANDIHALER INHALATION CAPSULE	\$0 (Tier-3)	QL (90 EA per 90 days)
SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-3)	QL (12 GM per 90 days)
STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION	\$0 (Tier-4)	QL (180 GM per 90 days)
<i>terbutaline sulfate oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
theophylline er oral tablet extended release 12 hour	\$0 (Tier-2)	
theophylline er oral tablet extended release 24 hour	\$0 (Tier-2)	
theophylline oral solution	\$0 (Tier-2)	
TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED	\$0 (Tier-3)	QL (180 EA per 90 days)
wixela inhale inhalation aerosol powder breath activated	\$0 (Tier-3)	QL (180 EA per 90 days)
zafirlukast oral tablet	\$0 (Tier-3)	
zileuton er oral tablet extended release 12 hour	\$0 (Tier-5)	NEDS

IDIOPATHIC PULMONARY FIBROSIS

ESBRIET ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 267 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (270 EA per 30 days); NEDS
ESBRIET ORAL TABLET 801 MG	\$0 (Tier-5)	PA; SP-CVS specialty; QL (90 EA per 30 days); NEDS
OFEV ORAL CAPSULE	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS

PULMONARY HYPERTENSION

ADEMPAS ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
alyq oral tablet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ambrisentan oral tablet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
bosentan oral tablet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
OPSUMIT ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG	\$0 (Tier-4)	PA; SP-CVS specialty
ORENITRAM ORAL TABLET EXTENDED RELEASE 5 MG	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
sildenafil citrate oral suspension reconstituted	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
sildenafil citrate oral tablet	\$0 (Tier-3)	PA; SP-CVS specialty
tadalafil (pah) oral tablet	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
TRACLEER ORAL TABLET SOLUBLE	\$0 (Tier-5)	PA; LA; SP-CVS specialty; NEDS
UPTRAVI ORAL TABLET	\$0 (Tier-5)	PA; SP-CVS specialty; QL (60 EA per 30 days); NEDS
UPTRAVI ORAL TABLET THERAPY PACK	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
VENTAVIS INHALATION SOLUTION	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
RESPIRATORY DRUGS, MISCELLANEOUS		
<i>acetylcysteine inhalation solution</i>	\$0 (Tier-2)	B vs D
BEVESPI AEROSPHERE INHALATION AEROSOL	\$0 (Tier-3)	QL (10.7 GM per 30 days)
DALIRESP ORAL TABLET	\$0 (Tier-4)	
NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
ORALAIR SUBLINGUAL TABLET SUBLINGUAL	\$0 (Tier-4)	PA
PROLASTIN-C INTRAVENOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	NEDS
XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
SKIN		
ACNE ROSACEA		
<i>azelaic acid external gel</i>	\$0 (Tier-3)	
<i>metronidazole external cream</i>	\$0 (Tier-2)	
<i>metronidazole external gel</i>	\$0 (Tier-2)	
<i>metronidazole external lotion</i>	\$0 (Tier-4)	
ACNE VULGARIS		
<i>accutane oral capsule</i>	\$0 (Tier-4)	
<i>adapalene external cream</i>	\$0 (Tier-2)	PA
<i>adapalene external gel</i>	\$0 (Tier-4)	PA
<i>adapalene external solution</i>	\$0 (Tier-3)	PA
<i>adapalene-benzoyl peroxide external gel</i>	\$0 (Tier-3)	PA
<i>amnesteem oral capsule</i>	\$0 (Tier-2)	
ATRALIN EXTERNAL GEL	\$0 (Tier-4)	PA
<i>avita external cream</i>	\$0 (Tier-2)	PA
<i>avita external gel</i>	\$0 (Tier-2)	PA
AZELEX EXTERNAL CREAM	\$0 (Tier-4)	
<i>benzoyl peroxide-erythromycin external gel</i>	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>claravis oral capsule</i>	\$0 (Tier-4)	
<i>clindamycin phos-benzoyl perox external gel</i>	\$0 (Tier-4)	
<i>clindamycin phosphate external foam</i>	\$0 (Tier-4)	
<i>clindamycin phosphate external gel</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external lotion</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external solution</i>	\$0 (Tier-2)	
<i>clindamycin phosphate external swab</i>	\$0 (Tier-2)	
<i>ery external pad</i>	\$0 (Tier-2)	
<i>erythromycin external gel</i>	\$0 (Tier-2)	
<i>erythromycin external solution</i>	\$0 (Tier-2)	
EVOCLIN EXTERNAL FOAM	\$0 (Tier-4)	
FABIOR EXTERNAL FOAM	\$0 (Tier-4)	PA
<i>isotretinoin oral capsule</i>	\$0 (Tier-4)	
RETIN-A EXTERNAL CREAM	\$0 (Tier-4)	PA
RETIN-A EXTERNAL GEL	\$0 (Tier-4)	PA
RETIN-A MICRO EXTERNAL GEL	\$0 (Tier-4)	PA
RETIN-A MICRO PUMP EXTERNAL GEL	\$0 (Tier-4)	PA
<i>tazarotene external foam</i>	\$0 (Tier-4)	PA
<i>tretinoi external cream</i>	\$0 (Tier-2)	PA
<i>tretinoi external gel</i>	\$0 (Tier-4)	PA
<i>tretinoi microsphere external gel</i>	\$0 (Tier-4)	PA
BACTERIAL INFECTIONS, TOPICAL		
<i>gentamicin sulfate external cream</i>	\$0 (Tier-3)	
<i>gentamicin sulfate external ointment</i>	\$0 (Tier-3)	
<i>mupirocin calcium external cream</i>	\$0 (Tier-3)	QL (180 GM per 30 days)
<i>mupirocin external ointment</i>	\$0 (Tier-2)	QL (44 GM per 30 days)
<i>silver sulfadiazine external cream</i>	\$0 (Tier-2)	
<i>ssd external cream</i>	\$0 (Tier-2)	
XEPI EXTERNAL CREAM	\$0 (Tier-4)	QL (60 GM per 30 days)
CORTICOSTEROIDS, TOPICAL		
ALA SCALP EXTERNAL LOTION	\$0 (Tier-4)	
<i>ala-cort external cream</i>	\$0 (Tier-1)	
<i>alclometasone dipropionate external cream</i>	\$0 (Tier-4)	
<i>alclometasone dipropionate external ointment</i>	\$0 (Tier-2)	
<i>amcinonide external cream</i>	\$0 (Tier-4)	
<i>amcinonide external lotion</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
amcinonide external ointment	\$0 (Tier-4)	
APEXICON E EXTERNAL CREAM	\$0 (Tier-4)	
betamethasone dipropionate aug external cream	\$0 (Tier-2)	
betamethasone dipropionate aug external gel	\$0 (Tier-4)	
betamethasone dipropionate aug external lotion	\$0 (Tier-4)	
betamethasone dipropionate aug external ointment	\$0 (Tier-2)	
betamethasone dipropionate external cream	\$0 (Tier-4)	
betamethasone dipropionate external lotion	\$0 (Tier-2)	
betamethasone dipropionate external ointment	\$0 (Tier-4)	
betamethasone valerate external cream	\$0 (Tier-2)	
betamethasone valerate external foam	\$0 (Tier-4)	
betamethasone valerate external lotion	\$0 (Tier-2)	
betamethasone valerate external ointment	\$0 (Tier-2)	
CAPEX EXTERNAL SHAMPOO	\$0 (Tier-4)	
clobetasol propionate e external cream	\$0 (Tier-3)	QL (240 GM per 30 days)
clobetasol propionate emulsion external foam	\$0 (Tier-4)	QL (200 GM per 30 days)
clobetasol propionate external cream	\$0 (Tier-4)	QL (240 GM per 30 days)
clobetasol propionate external foam	\$0 (Tier-4)	QL (200 GM per 30 days)
clobetasol propionate external gel	\$0 (Tier-3)	QL (240 GM per 30 days)
clobetasol propionate external liquid	\$0 (Tier-4)	QL (250 ML per 30 days)
clobetasol propionate external lotion	\$0 (Tier-4)	QL (236 ML per 30 days)
clobetasol propionate external ointment	\$0 (Tier-4)	QL (240 GM per 30 days)
clobetasol propionate external shampoo	\$0 (Tier-4)	QL (236 ML per 30 days)
clobetasol propionate external solution	\$0 (Tier-3)	QL (200 ML per 30 days)
clorcortolone pivalate external cream	\$0 (Tier-4)	
clodan external shampoo	\$0 (Tier-3)	
CORDRAN EXTERNAL TAPE	\$0 (Tier-4)	
desonide external cream	\$0 (Tier-4)	
desonide external gel	\$0 (Tier-4)	
desonide external lotion	\$0 (Tier-4)	
desonide external ointment	\$0 (Tier-4)	
desoximetasone external cream	\$0 (Tier-4)	
desoximetasone external gel	\$0 (Tier-4)	
desoximetasone external liquid	\$0 (Tier-4)	
desoximetasone external ointment	\$0 (Tier-4)	
diflorasone diacetate external cream	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>diflorasone diacetate external ointment</i>	\$0 (Tier-4)	
<i>fluocinolone acetonide external cream</i>	\$0 (Tier-3)	
<i>fluocinolone acetonide external ointment</i>	\$0 (Tier-3)	
<i>fluocinolone acetonide external solution</i>	\$0 (Tier-4)	
<i>fluocinolone acetonide scalp external oil</i>	\$0 (Tier-3)	
<i>fluocinonide emulsified base external cream</i>	\$0 (Tier-4)	
<i>fluocinonide external cream 0.05 %</i>	\$0 (Tier-4)	
<i>fluocinonide external cream 0.1 %</i>	\$0 (Tier-4)	QL (120 GM per 30 days)
<i>fluocinonide external gel</i>	\$0 (Tier-4)	
<i>fluocinonide external ointment</i>	\$0 (Tier-4)	
<i>fluocinonide external solution</i>	\$0 (Tier-4)	
<i>flurandrenolide external cream</i>	\$0 (Tier-3)	
<i>flurandrenolide external lotion</i>	\$0 (Tier-3)	
<i>flurandrenolide external ointment</i>	\$0 (Tier-4)	QL (120 GM per 30 days)
<i>fluticasone propionate external cream</i>	\$0 (Tier-2)	
<i>fluticasone propionate external lotion</i>	\$0 (Tier-4)	
<i>fluticasone propionate external ointment</i>	\$0 (Tier-2)	
<i>halcinonide external cream</i>	\$0 (Tier-3)	
<i>halobetasol propionate external cream</i>	\$0 (Tier-4)	
<i>halobetasol propionate external ointment</i>	\$0 (Tier-4)	
HALOG EXTERNAL OINTMENT	\$0 (Tier-4)	
<i>hydrocortisone butyrate external cream</i>	\$0 (Tier-4)	
<i>hydrocortisone butyrate external lotion</i>	\$0 (Tier-1)	
<i>hydrocortisone butyrate external ointment</i>	\$0 (Tier-4)	
<i>hydrocortisone butyrate external solution</i>	\$0 (Tier-4)	
<i>hydrocortisone external cream</i>	\$0 (Tier-1)	
<i>hydrocortisone external lotion</i>	\$0 (Tier-1)	
<i>hydrocortisone external ointment</i>	\$0 (Tier-1)	
<i>hydrocortisone valerate external cream</i>	\$0 (Tier-4)	
<i>hydrocortisone valerate external ointment</i>	\$0 (Tier-4)	
KENALOG EXTERNAL AEROSOL SOLUTION	\$0 (Tier-4)	
<i>mometasone furoate external cream</i>	\$0 (Tier-1)	
<i>mometasone furoate external ointment</i>	\$0 (Tier-1)	
<i>mometasone furoate external solution</i>	\$0 (Tier-2)	
<i>nolix external cream</i>	\$0 (Tier-3)	
<i>nolix external lotion</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
PANDEL EXTERNAL CREAM	\$0 (Tier-4)	
<i>prednicarbate external ointment</i>	\$0 (Tier-2)	
TOVET EXTERNAL FOAM	\$0 (Tier-4)	QL (200 GM per 30 days)
<i>triamcinolone acetonide external aerosol solution</i>	\$0 (Tier-4)	
<i>triamcinolone acetonide external cream</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external lotion</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</i>	\$0 (Tier-2)	
<i>triamcinolone acetonide external ointment 0.05 %</i>	\$0 (Tier-3)	
TRIANEX EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>triderm external cream</i>	\$0 (Tier-2)	
FUNGAL INFECTIONS, TOPICAL		
<i>ciclopirox external gel</i>	\$0 (Tier-2)	
<i>ciclopirox external shampoo</i>	\$0 (Tier-4)	
<i>ciclopirox external solution</i>	\$0 (Tier-3)	
<i>ciclopirox olamine external cream</i>	\$0 (Tier-2)	
<i>ciclopirox olamine external suspension</i>	\$0 (Tier-2)	
<i>clotrimazole external cream</i>	\$0 (Tier-3)	
<i>clotrimazole external solution</i>	\$0 (Tier-2)	
<i>clotrimazole-betamethasone external cream</i>	\$0 (Tier-3)	
<i>clotrimazole-betamethasone external lotion</i>	\$0 (Tier-4)	
<i>econazole nitrate external cream</i>	\$0 (Tier-3)	
<i>ketoconazole external cream</i>	\$0 (Tier-3)	QL (120 GM per 30 days)
<i>ketoconazole external foam</i>	\$0 (Tier-4)	
<i>ketoconazole external shampoo</i>	\$0 (Tier-2)	
KETODAN EXTERNAL FOAM	\$0 (Tier-4)	
<i>luliconazole external cream</i>	\$0 (Tier-3)	
MENTAX EXTERNAL CREAM	\$0 (Tier-4)	
<i>naftifine hcl external cream 1 %</i>	\$0 (Tier-4)	
<i>naftifine hcl external cream 2 %</i>	\$0 (Tier-3)	
<i>nyamyc external powder</i>	\$0 (Tier-2)	
<i>nystatin external cream</i>	\$0 (Tier-2)	
<i>nystatin external ointment</i>	\$0 (Tier-2)	
<i>nystatin external powder</i>	\$0 (Tier-2)	
<i>nystatin mouth/throat suspension</i>	\$0 (Tier-2)	
<i>nystatin-triamcinolone external cream</i>	\$0 (Tier-3)	
<i>nystatin-triamcinolone external ointment</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>nystop external powder</i>	\$0 (Tier-2)	
<i>oxiconazole nitrate external cream</i>	\$0 (Tier-4)	QL (90 GM per 30 days)
PSORIASIS AND SEBORRHEA		
<i>acitretin oral capsule 10 mg, 25 mg</i>	\$0 (Tier-4)	
<i>acitretin oral capsule 17.5 mg</i>	\$0 (Tier-5)	NEDS
<i>calcipotriene external cream</i>	\$0 (Tier-3)	QL (120 GM per 30 days)
<i>calcipotriene external ointment</i>	\$0 (Tier-4)	QL (120 GM per 30 days)
<i>calcipotriene external solution</i>	\$0 (Tier-4)	QL (120 ML per 30 days)
<i>calcipotriene-betameth diprop external ointment</i>	\$0 (Tier-5)	NEDS
<i>calcipotriene-betameth diprop external suspension</i>	\$0 (Tier-5)	NEDS
<i>calcitriol external ointment</i>	\$0 (Tier-3)	
<i>methoxsalen rapid oral capsule</i>	\$0 (Tier-5)	NEDS
<i>tazarotene external cream</i>	\$0 (Tier-3)	PA
TAZORAC EXTERNAL CREAM	\$0 (Tier-4)	PA
TAZORAC EXTERNAL GEL	\$0 (Tier-4)	PA
SCABIES AND PEDICULOSIS		
<i>ivermectin external cream</i>	\$0 (Tier-4)	
<i>ivermectin external lotion</i>	\$0 (Tier-3)	
<i>lindane external shampoo</i>	\$0 (Tier-2)	
<i>malathion external lotion</i>	\$0 (Tier-2)	
<i>permethrin external cream</i>	\$0 (Tier-3)	
TOPICAL, MISCELLANEOUS		
<i>ammonium lactate external cream</i>	\$0 (Tier-3)	
<i>ammonium lactate external lotion</i>	\$0 (Tier-2)	
ANUSOL-HC EXTERNAL CREAM	\$0 (Tier-4)	
ANUSOL-HC RECTAL CREAM	\$0 (Tier-4)	
<i>diclofenac epolamine external patch</i>	\$0 (Tier-3)	PA; QL (60 EA per 30 days)
<i>diclofenac epolamine transdermal patch</i>	\$0 (Tier-3)	PA; QL (60 EA per 30 days)
<i>diclofenac sodium external gel 1 %</i>	\$0 (Tier-3)	QL (960 GM per 30 days)
<i>diclofenac sodium external gel 3 %</i>	\$0 (Tier-3)	QL (200 GM per 30 days)
<i>diclofenac sodium external solution</i>	\$0 (Tier-2)	QL (300 ML per 30 days)
<i>diclofenac sodium transdermal gel 1 %</i>	\$0 (Tier-3)	QL (960 GM per 30 days)
<i>diclofenac sodium transdermal gel 3 %</i>	\$0 (Tier-3)	QL (200 GM per 30 days)
<i>diclofenac sodium transdermal solution</i>	\$0 (Tier-2)	QL (300 ML per 30 days)
<i>doxepin hcl external cream</i>	\$0 (Tier-5)	QL (90 GM per 30 days); NEDS

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
EUCRISA EXTERNAL OINTMENT	\$0 (Tier-4)	PA
<i>fluorouracil external cream</i>	\$0 (Tier-2)	
<i>fluorouracil external solution</i>	\$0 (Tier-4)	
<i>hydrocortisone ace-pramoxine external cream</i>	\$0 (Tier-2)	
<i>hydrocortisone ace-pramoxine rectal cream</i>	\$0 (Tier-2)	
KLISYRI EXTERNAL OINTMENT	\$0 (Tier-5)	PA; NEDS
<i>lidocaine external ointment</i>	\$0 (Tier-3)	QL (100 GM per 30 days)
<i>lidocaine external patch</i>	\$0 (Tier-3)	PA; QL (90 EA per 30 days)
<i>lidocaine hcl external solution</i>	\$0 (Tier-2)	QL (100 ML per 30 days)
<i>lidocaine viscous hcl mouth/throat solution</i>	\$0 (Tier-2)	
<i>lidocaine-prilocaine external cream</i>	\$0 (Tier-3)	QL (60 GM per 30 days)
<i>mafenide acetate external packet</i>	\$0 (Tier-3)	
PANRETIN EXTERNAL GEL	\$0 (Tier-5)	NEDS
<i>pimecrolimus external cream</i>	\$0 (Tier-3)	
<i>procto-med hc external cream</i>	\$0 (Tier-2)	
<i>procto-med hc rectal cream</i>	\$0 (Tier-2)	
<i>procto-pak external cream</i>	\$0 (Tier-2)	
<i>procto-pak rectal cream</i>	\$0 (Tier-2)	
<i>proctosol hc rectal cream</i>	\$0 (Tier-2)	
<i>proctozone-hc external cream</i>	\$0 (Tier-2)	
<i>proctozone-hc rectal cream</i>	\$0 (Tier-2)	
PRUDOXIN EXTERNAL CREAM	\$0 (Tier-4)	QL (90 GM per 30 days)
RECTIV RECTAL OINTMENT	\$0 (Tier-4)	QL (30 GM per 30 days)
REGRANEX EXTERNAL GEL	\$0 (Tier-3)	
SANTYL EXTERNAL OINTMENT	\$0 (Tier-3)	
<i>selenium sulfide external lotion</i>	\$0 (Tier-2)	
<i>sodium chloride irrigation solution</i>	\$0 (Tier-2)	
<i>sulfacetamide sodium (acne) external lotion</i>	\$0 (Tier-2)	
SULFAMYLYON EXTERNAL CREAM	\$0 (Tier-4)	
SULFAMYLYON EXTERNAL PACKET	\$0 (Tier-4)	
<i>tacrolimus external ointment</i>	\$0 (Tier-3)	
TARGRETIN EXTERNAL GEL	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
VALCHLOR EXTERNAL GEL	\$0 (Tier-5)	NEDS
VIRAL INFECTIONS, TOPICAL		
<i>acyclovir external cream</i>	\$0 (Tier-3)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
CONDYLOX EXTERNAL GEL	\$0 (Tier-4)	
DENAVIR EXTERNAL CREAM	\$0 (Tier-5)	NEDS
<i>imiquimod external cream</i>	\$0 (Tier-4)	
<i>imiquimod pump external cream</i>	\$0 (Tier-4)	
<i>podofilox external solution</i>	\$0 (Tier-2)	
WOMEN'S HEALTH		
CONTRACEPTIVES		
<i>amethia oral tablet</i>	\$0 (Tier-2)	
ANNOVERA VAGINAL RING	\$0 (Tier-4)	QL (1 EA per 365 days)
<i>apri oral tablet</i>	\$0 (Tier-2)	
<i>aranelle oral tablet</i>	\$0 (Tier-2)	
<i>ashlyna oral tablet</i>	\$0 (Tier-2)	
<i>aubra oral tablet</i>	\$0 (Tier-2)	
<i>aviane oral tablet</i>	\$0 (Tier-2)	
<i>balziva oral tablet</i>	\$0 (Tier-2)	
<i>brielllyn oral tablet</i>	\$0 (Tier-2)	
<i>camila oral tablet</i>	\$0 (Tier-2)	
<i>deblitane oral tablet</i>	\$0 (Tier-2)	
<i>desogestrel-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>drospirenone-ethinyl estradiol oral tablet</i>	\$0 (Tier-2)	
<i>eluryng vaginal ring</i>	\$0 (Tier-3)	
<i>emoquette oral tablet</i>	\$0 (Tier-2)	
<i>errin oral tablet</i>	\$0 (Tier-2)	
<i>estradiol-norethindrone acet oral tablet</i>	\$0 (Tier-2)	
<i>etonogestrel-ethinyl estradiol vaginal ring</i>	\$0 (Tier-3)	
<i>falmina oral tablet</i>	\$0 (Tier-2)	
<i>iclevia oral tablet</i>	\$0 (Tier-2)	
<i>introvale oral tablet</i>	\$0 (Tier-2)	
<i>junel 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1.5/30 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 1/20 oral tablet</i>	\$0 (Tier-2)	
<i>junel fe 24 oral tablet</i>	\$0 (Tier-2)	
<i>kariva oral tablet</i>	\$0 (Tier-2)	
<i>kelnor 1/35 oral tablet</i>	\$0 (Tier-2)	
<i>larin 1.5/30 oral tablet</i>	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
larin 1/20 oral tablet	\$0 (Tier-2)	
larin fe 1.5/30 oral tablet	\$0 (Tier-2)	
larin fe 1/20 oral tablet	\$0 (Tier-2)	
lessina oral tablet	\$0 (Tier-2)	
levonest oral tablet	\$0 (Tier-2)	
levonorgest-eth estrad 91-day oral tablet	\$0 (Tier-2)	
levonorgestrel-ethynodiol oral tablet	\$0 (Tier-2)	
levora 0.15/30 (28) oral tablet	\$0 (Tier-2)	
LO LOESTRIN FE ORAL TABLET	\$0 (Tier-4)	
marlissa oral tablet	\$0 (Tier-2)	
microgestin 1.5/30 oral tablet	\$0 (Tier-2)	
microgestin 1/20 oral tablet	\$0 (Tier-2)	
microgestin fe 1.5/30 oral tablet	\$0 (Tier-2)	
microgestin fe 1/20 oral tablet	\$0 (Tier-2)	
necon 0.5/35 (28) oral tablet	\$0 (Tier-2)	
NEXTSTELLIS ORAL TABLET	\$0 (Tier-4)	
nikki oral tablet	\$0 (Tier-2)	
norethin-eth estradiol-fe oral tablet chewable	\$0 (Tier-2)	
nortrel 0.5/35 (28) oral tablet	\$0 (Tier-2)	
nortrel 1/35 (21) oral tablet	\$0 (Tier-2)	
nortrel 1/35 (28) oral tablet	\$0 (Tier-2)	
nortrel 7/7/7 oral tablet	\$0 (Tier-2)	
ORIAHNN ORAL CAPSULE THERAPY PACK	\$0 (Tier-5)	PA; QL (56 EA per 28 days); NEDS
orsythia oral tablet	\$0 (Tier-2)	
portia-28 oral tablet	\$0 (Tier-2)	
sharobel oral tablet	\$0 (Tier-2)	
tarina fe 1/20 eq oral tablet	\$0 (Tier-2)	
tri-previfem oral tablet	\$0 (Tier-2)	
tri-sprintec oral tablet	\$0 (Tier-2)	
trivora (28) oral tablet	\$0 (Tier-2)	
velivet oral tablet	\$0 (Tier-2)	
vyfemla oral tablet	\$0 (Tier-2)	
zovia 1/35e (28) oral tablet	\$0 (Tier-2)	
MENOPAUSAL SYMPTOMS/OSTEOPOROSIS		
alendronate sodium oral solution	\$0 (Tier-2)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>alendronate sodium oral tablet</i>	\$0 (Tier-1)	
ANGELIQ ORAL TABLET	\$0 (Tier-4)	
<i>calcitonin (salmon) nasal solution</i>	\$0 (Tier-2)	
COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY	\$0 (Tier-4)	PA
CRINONE VAGINAL GEL	\$0 (Tier-3)	PA
DELESTROGEN INTRAMUSCULAR OIL	\$0 (Tier-4)	
DEPO-ESTRADIOL INTRAMUSCULAR OIL	\$0 (Tier-3)	
DEPO-PROVERA INTRAMUSCULAR SUSPENSION	\$0 (Tier-3)	
DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE	\$0 (Tier-3)	
DIVIGEL TRANSDERMAL GEL	\$0 (Tier-4)	
<i>dotti transdermal patch twice weekly</i>	\$0 (Tier-2)	PA
DUAVEE ORAL TABLET	\$0 (Tier-4)	
ELESTRIN TRANSDERMAL GEL	\$0 (Tier-4)	
<i>estradiol oral tablet</i>	\$0 (Tier-1)	PA
<i>estradiol transdermal patch twice weekly</i>	\$0 (Tier-2)	PA
<i>estradiol transdermal patch weekly</i>	\$0 (Tier-2)	PA
<i>estradiol vaginal cream</i>	\$0 (Tier-3)	
<i>estradiol vaginal tablet</i>	\$0 (Tier-3)	
<i>estradiol valerate intramuscular oil</i>	\$0 (Tier-2)	
ESTRING VAGINAL RING	\$0 (Tier-3)	
EVAMIST TRANSDERMAL SOLUTION	\$0 (Tier-4)	
EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-5)	PA; NEDS
FEMHRT LOW DOSE ORAL TABLET	\$0 (Tier-4)	PA
FEMHRT ORAL TABLET	\$0 (Tier-4)	PA
FEMRING VAGINAL RING	\$0 (Tier-3)	
FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
<i>fyavolv oral tablet</i>	\$0 (Tier-3)	PA
<i>ibandronate sodium oral tablet</i>	\$0 (Tier-2)	
IMVEXXY MAINTENANCE PACK VAGINAL INSERT	\$0 (Tier-4)	
IMVEXXY STARTER PACK VAGINAL INSERT	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
jinteli oral tablet	\$0 (Tier-2)	PA
medroxyprogesterone acetate intramuscular suspension	\$0 (Tier-1)	
medroxyprogesterone acetate intramuscular suspension prefilled syringe	\$0 (Tier-1)	
medroxyprogesterone acetate oral tablet	\$0 (Tier-1)	
MENEST ORAL TABLET	\$0 (Tier-4)	PA
MENOSTAR TRANSDERMAL PATCH WEEKLY	\$0 (Tier-4)	PA
norethindrone acetate oral tablet	\$0 (Tier-2)	
norethindrone-eth estradiol oral tablet	\$0 (Tier-2)	PA
ORILISSA ORAL TABLET 150 MG	\$0 (Tier-5)	PA; QL (30 EA per 30 days); NEDS
ORILISSA ORAL TABLET 200 MG	\$0 (Tier-5)	PA; QL (60 EA per 30 days); NEDS
PREMARIN ORAL TABLET	\$0 (Tier-4)	PA
PREMARIN VAGINAL CREAM	\$0 (Tier-4)	
PREMPHASE ORAL TABLET	\$0 (Tier-4)	PA
PREMPRO ORAL TABLET	\$0 (Tier-4)	PA
progesterone micronized oral capsule	\$0 (Tier-2)	
progesterone oral capsule	\$0 (Tier-2)	
PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE	\$0 (Tier-3)	PA
raloxifene hcl oral tablet	\$0 (Tier-2)	
risedronate sodium oral tablet	\$0 (Tier-3)	
risedronate sodium oral tablet delayed release	\$0 (Tier-3)	
teriparatide (recombinant) subcutaneous solution pen-injector	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR	\$0 (Tier-5)	PA; SP-CVS specialty; NEDS
XGEVA SUBCUTANEOUS SOLUTION	\$0 (Tier-5)	PA; NEDS
yuvafem vaginal tablet	\$0 (Tier-3)	
PRENATAL VITAMINS		
prenatal oral tablet	\$0 (Tier-2)	
VAGINAL INFECTIONS		
CLEOCIN VAGINAL SUPPOSITORY	\$0 (Tier-4)	
clindamycin phosphate vaginal cream	\$0 (Tier-2)	
GYNAZOLE-1 VAGINAL CREAM	\$0 (Tier-4)	

You can find information on what the symbols and abbreviations on this table mean by going to page 15.

Name of drug	What the drug will cost you (tier level)	Necessary actions, restrictions, or limits on use
<i>metronidazole vaginal gel</i>	\$0 (Tier-3)	
<i>miconazole 3 vaginal suppository</i>	\$0 (Tier-2)	
SOLOSEC ORAL PACKET	\$0 (Tier-4)	
<i>terconazole vaginal cream</i>	\$0 (Tier-2)	
<i>terconazole vaginal suppository</i>	\$0 (Tier-2)	
<i>vandazole vaginal gel</i>	\$0 (Tier-3)	
WOMEN'S HEALTH, MISCELLANEOUS		
INTRAROSA VAGINAL INSERT	\$0 (Tier-4)	
MYFEMBREE ORAL TABLET	\$0 (Tier-5)	PA; QL (28 EA per 28 days); NEDS
OSPHENA ORAL TABLET	\$0 (Tier-4)	

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ADVAIR HFA	89	amoxicillin	25	AUBAGIO	67
AEMCOLO	20	amoxicillin-pot clavulanate	25	aura	99
AFINITOR	30	amoxicillin-pot clavulanate er	25	AURYXIA	69
AFINITOR DISPERZ	30	amphetamine er	82	AUSTEDO	66
AIMOVIG	72	amphetamine sulfate	82	AVEED	58
ALA SCALP	93	amphetamine-dextroamphet er	83	aviane	99
ala-cort	93	amphetamine- dextroamphetamine	83	avita	92
albendazole	20	amphotericin b	53	AVONEX PEN	67
albuterol sulfate	89	ampicillin	25	AVONEX PREFILLED	67
albuterol sulfate hfa	89	ampicillin sodium	53	AVYCAZ	54
alclometasone dipropionate	93	ampicillin-sulbactam sodium	54	AYVAKIT	30
ALECENSA	30	anagrelide hcl	28	AZASAN	77
alendronate sodium	100, 101	anastrozole	30	AZASITE	47
alfuzosin hcl er	70	ANGELIQ	101	azathioprine	77
aliskiren fumarate	40	ANNOVERA	99	azelaic acid	92
ALKERAN	30	ANORO ELLIPTA	89	azelastine hcl	46, 47
allopurinol	79	ANUSOL-HC	97	AZELEX	92
almotriptan malate	72	APEXICON E	94	azithromycin	26, 54
ALOCRIL	47	APLENZIN	84	AZOPT	49
ALOMIDE	47	APOKYN	73	aztreonam	54
alosetron hcl	51	apraclonidine hcl	49	bacitracin	47
ALPHAGAN P 0.1%	49			bacitracin-polymyxin b	47

bacitracine-neomycin-polymyxin-hc	47	BREZTRI AEROSPHERE	89	carbidopa-levodopa-entacapone	73
baclofen	77	briellyn	99	CARDURA XL	36
BAFIERTAM	67	BRILINTA	28	CAROSPIR	40
balsalazide disodium	53	brimonidine tartrate	49	carteolol hcl	49
BALVERSA	30	brinzolamide	49	cartia xt	39
balziva	99	BRIVIACT	74	carvedilol	38
BANZEL	74	bromfenac sodium (once-daily)	48	carvedilol phosphate er	38
BAXDELA	27	bromocriptine mesylate	73	caspofungin acetate	54
BCG VACCINE	60	BROMSITE	48	CAYSTON	64
bd disp needle	42	BRONCHITOL	64	cefaclor	26
bd insulin syringe	42	BROVANA	89	cefaclor er	26
bd insulin syringe u-500	42	BRUKINSA	30	cefadroxil	26
BELBUCA	80	budesonide	53, 89	cefazolin sodium	54
benazepril hcl	36	budesonide er	53	cefdinir	26
benazepril-hydrochlorothiazide	38	budesonide-formoterol fumarate	89	cefepime hcl	54
BENLYSTA	62	bumetanide	40, 54	ceftixime	26
BENZNIDAZOLE	21	buprenorphine	80	cefotetan disodium	54
benzoyl peroxide-erythromycin	92	buprenorphine hcl	68, 69	cefoxitin sodium	54
benztropine mesylate	73	buprenorphine hcl-naloxone hcl	69	cefpodoxime proxetil	26
bepotastine besilate	47	bupropion hcl	84	ceprozil	26
BERINERT	66	bupropion hcl er (smoking det)	70	ceftazidime	54
BESIVANCE	47	bupropion hcl er (sr)	84	ceftriaxone sodium	54
betamethasone dipropionate	94	bupropion hcl er (xl)	84	cefuroxime axetil	26
betamethasone dipropionate aug	94	buspirone hcl	82	cefuroxime sodium	54
betamethasone valerate	94	butorphanol tartrate	80	celecoxib	79
BETASERON	67	BYDUREON BCISE	44	CELLCEPT	62
betaxolol hcl	38, 49	BYETTA 10 MCG PEN	44	CELONTIN	74
bethanechol chloride	71	BYETTA 5 MCG PEN	44	cephalexin	26
BETHKIS	64	BYSTOLIC	38	CERDELGA	65
BETIMOL	49	cabergoline	73	cevimeline hcl	46
BETOPTIC-S	49	CABLIVI	30	CHANTIX	70
BEVESPI AEROSPHERE	92	CABOMETYX	30	CHANTIX CONTINUING	
bexarotene	30	calcipotriene	97	MONTH PAK	70
BEXSERO	60	calcipotriene-betameth diprop	97	CHANTIX STARTING	
bicalutamide	30	calcitonin (salmon)	101	MONTH PAK	70
BICILLIN C-R	26	calcitriol	66, 97	CHEMET	64
BICILLIN C-R 900/300	26	calcium acetate (phos binder)	69	chlordiazepoxide-amitriptyline	82
BICILLIN L-A	26	CALQUENCE	30	chlorhexidine gluconate	46
BIDIL	42	camila	99	chloroquine phosphate	21
BIKTARVY	22	candesartan cilexetil	37	chlorpromazine hcl	87
bimatoprost	49	candesartan cilexetil-hctz	38	chlorthalidone	40
bisoprolol fumarate	38	capecitabine	30	CHOLBAM	51
bisoprolol-hydrochlorothiazide	38	CAPEX	94	cholestyramine	41
BIVIGAM	60	CAPLYTA	87	cholestyramine light	40
BLEPHAMIDE	47	CAPRELSA	31	ciclopirox	96
BLEPHAMIDE S.O.P.	47	captopril	36	ciclopirox olamine	96
BOOSTRIX	60	CARBAGLU	51	cilostazol	28
bosentan	91	carbamazepine	74	CIMDUO	22
BOSULIF	30	carbamazepine er	74	cimetidine	52
BRAFTOVI	30	carbidopa	73	cimetidine solution	52
BREO ELLIPTA	89	carbidopa-levodopa	73	cinacalcet hcl	66, 67
		carbidopa-levodopa er	73	CINRYZE	66

CIPRODEX	46	colestipol hcl	41	demeclocycline hcl	28
ciprofloxacin hcl	27, 46, 47	colistimethate sodium (cba)	54	DEM SER	69
ciprofloxacin in d5w	54	COMBIGAN	49	DENAVIR	99
ciprofloxacin-dexamethasone	46	COMBIPATCH	101	DEPO-ESTRADIOL	101
citalopram hydrobromide	84	COMBIVENT RESPIMAT	90	DEPO-PROVERA	101
claravis	93	COMETRIQ (100 MG DAILY		DEPO-SUBQ PROVERA	104, 101
clarithromycin	26, 27	DOSE)	31	DEPO-TESTOSTERONE	58
clarithromycin er	26	COMETRIQ (140 MG DAILY		DESCOVY	22
CLEOCIN	102	DOSE)	31	desipramine hcl	84
clindamycin capsules	27	COMETRIQ (60 MG DAILY		desloratadine	46
clindamycin oral solution	27	DOSE)	31	desmopressin ace spray refrigerated	71
clindamycin phos-benzoyl perox.	93	comfort assist insulin syringe	42	desmopressin acetate	71
clindamycin phosphate	54, 93, 102	COMPLERA	22	desogestrel-ethynodiol estradiol	99
clindamycin phosphate in d5w	54	CONDYLOX	99	desonide	94
CLINIMIX E/DEXTROSE		constulose	51	desoximetasone	94
(2.75/5)	57	COPAXONE	67	DESOXYN	83
CLINIMIX E/DEXTROSE		COPIKTRA	31	desvenlafaxine er	84
(4.25/10)	57	CORDRAN	94	desvenlafaxine succinate er	84
CLINIMIX E/DEXTROSE		CORLANOR	36	dexamethasone	57
(4.25/5)	57	COTELLIC	31	dexamethasone sodium	
CLINIMIX E/DEXTROSE		CREON	51	phosphate	48
(5/15)	57	CRESEMDA	20	DEXCOM G6 RECEIVER	42
CLINIMIX E/DEXTROSE		CRINONE	101	DEXCOM SENSOR	42
(5/20)	57	cromolyn sodium	47, 51, 90	DEXCOM TRANSMITTER	42
CLINIMIX/DEXTROSE		cvs gauze sterile	42	DEXEDRINE	83
(4.25/10)	57	cyclobenzaprine hcl	77	DEXILANT	52
CLINIMIX/DEXTROSE		cyclophosphamide	31	dexmethylphenidate hcl	83
(4.25/5)	57	CYCLOSET	45	dexmethylphenidate hcl er	83
CLINIMIX/DEXTROSE (5/15)	57	cyclosporine	62	dextroamphetamine sulfate	83
CLINIMIX/DEXTROSE (5/20)	57	cyclosporine modified	62	dextroamphetamine sulfate er	83
CLINISOL SF	57	cyproheptadine hcl	46	dextrose	56
clobazam	74	CYSTADANE	64	dextrose-nacl	56
clobetasol propionate	94	CYSTADROPS	50	DIACOMIT	74, 75
clobetasol propionate e	94	CYSTAGON	51	DIASTAT ACUDIAL	75
clobetasol propionate emulsion	94	CYSTARAN	50	DIASTAT PEDIATRIC	75
clocortolone pivalate	94	dalfampridine er	67	diazepam	75
clodan	94	DALIRESP	92	diazoxide	43
clomipramine hcl	84	DALVANCE	54	DIBENZYLINE	69
clonazepam	74	danazol	58	diclofenac epolamine	97
clonidine	40	dantrolene sodium	77	diclofenac potassium	79
clonidine hcl	40	dapsone tablets	21	diclofenac sodium	48, 79, 97
clonidine hcl er	83	DAPTACEL	60	diclofenac sodium er	79
clopidogrel bisulfate	28	daptomycin	54	diclofenac-misoprostol	79
clorazepate dipotassium	82	DARAPRIM	21	dicloxacillin sodium	26
clotrimazole	20, 96	darifenacin hydrobromide er	71	dicyclomine hcl	51
clotrimazole-betamethasone	96	DAURISMO	31	DIFICID	27
clozapine	87	deblitane	99	diflorasone diacetate	94, 95
COARTEM	21	deferasirox	64	diflunisal	79
codeine sulfate	80	deferasirox granules	64	difluprednate	48
colchicine	79	deferiprone	64	digitek	37
colchicine-probenecid	79	DELESTROGEN	101	digox	37
colesevelam hcl	41	DELSTRIGO	22	digoxin	37

dihydroergotamine mesylate	72	eletriptan hydrobromide	72	erythromycin ethylsuccinate	27
DILANTIN	75	ELIGARD	58	ESBRIET	91
DILANTIN INFATABS	75	ELIQUIS	29	escitalopram oxalate	85
diltiazem hcl	39	ELIQUIS DVT/PE STARTER PACK	29	esomeprazole magnesium	52
diltiazem hcl er	39	ELMIRON	71	estazolam	86
diltiazem hcl er beads	39	eluryng	99	estradiol	101
diltiazem hcl er coated beads	39	EMCYT	31	estradiol valerate	101
dilt-xr	39	EMEND	50	estradiol-norethindrone acet	99
dimethyl fumarate	67	EMFLAZA	64, 65	ESTRING	101
dimethyl fumarate starter pack	67	EMGALITY	72	eszopiclone	86
diphtheria-tetanus toxoids dt	60	EMGALITY (300 MG DOSE)	72	ethacrynic acid	40
dipyridamole	28	emoquette	99	ethambutol hcl	27
disopyramide phosphate	37	EMSAM	85	ethosuximide	75
disulfiram	82	emtricitabine	22	etodolac	79
divalproex sodium	75	emtricitabine-tenofovir df	22	etodolac er	79
divalproex sodium er	75	EMTRIVA	22	etonogestrel-ethinyl estradiol	99
DIVIGEL	101	enalapril maleate	36	etoposide	31
dofetilide	37	enalapril-hydrochlorothiazide	38	etravirine	23
DOJOLVI	67	ENBREL	77, 78	EUCRISA	98
donepezil hcl	72	ENBREL MINI	77	euthyrox	59
DOPTELET	28	ENBREL SURECLICK	78	EVAMIST	101
dorzolamide hcl	49	endocet	80	EVENITY	101
dorzolamide hcl-timolol mal	49	ENGERIX-B	60	everolimus	31, 62
dorzolamide hcl-timolol mal pf	49	enoxaparin sodium	29	EVOCLIN	93
dotti	101	ENSPRYNG	62	EVOTAZ	23
DOVATO	22	entacapone	73	EVRYSDI	70
doxazosin mesylate	36	entecavir	22	exel comfort point pen needle	42
doxepin hcl	84, 86, 97	ENTRESTO	38	exemestane	31
doxercalciferol	67	enulose	51	EXSERVAN	63
DOXY 100	54	ENVARSUS XR	62	EXTAVIA	67
doxycycline hydiate	28	EPCLUSIA	22	EYLEA	50
doxycycline monohydrate	28	EPIDIOLEX	75	ezetimibe	41
DRIZALMA SPRINKLE	84, 85	epinastine hcl	47	ezetimibe-simvastatin	41
dronabinol	50	epinephrine	63	FABIOR	93
drospirenone-ethinyl estradiol	99	epitol	75	falmina	99
DROXIA	31	EPIVIR	23	famciclovir	23
droxidopa	40	eplerenone	40	famotidine tablet	52
DUAVEE	101	EQUETRO	84	FANAPT	87
duloxetine hcl	85	ERAXIS	55	FANAPT TITRATION PACK	87
DUOPA	73	ergoloid mesylates	72	FARXIGA	45
DUPIXENT	90, 98	ERIVEDGE	31	FARYDAK	31
DUREZOL	48	ERLEADA	31	FASENRA	90
dutasteride	70	erlotinib hcl	31	FASENRA PEN	90
dutasteride-tamsulosin hcl	70	errin	99	febuxostat	79
e.e.s. 400	27	ertapenem sodium	55	felbamate	75
econazole nitrate	96	ery	93	felodipine er	39
EDURANT	22	ERYTHROCIN		FEMHRT	101
efavirenz	22	LACTOBIONATE	55	FEMHRT LOW DOSE	101
efavirenz-emtricitab-tenofovir	22	erythrocin stearate	27	FEMRING	101
efavirenz-lamivudine-tenofovir	22	erythromycin	47, 93	fenofibrate	41
EGRIFTA SV	65	erythromycin base	27	fenofibrate micronized	41
ELESTRIN	101			fenofibric acid	41

<i>fenoprofen calcium</i>	79	<i>fosinopril sodium-hctz</i>	38	<i>glyburide-metformin</i>	45
<i>fentanyl</i>	80	FOTIVDA	31	<i>glycopyrrolate</i>	51
<i>fentanyl citrate</i>	80	FRAGMIN	29	GLYXAMBI	45
FERRIPROX	64	FREESTYLE LIBRE READER	42	<i>granisetron hcl</i>	50
FETZIMA	85	FREESTYLE LIBRE SENSOR		<i>griseofulvin microsize</i>	20
FETZIMA TITRATION	85	SYSTEM	42	<i>griseofulvin ultramicrosize</i>	20
<i>finasteride</i>	70	<i>frovatriptan succinate</i>	72	<i>guanfacine hcl er</i>	83
FINTEPLA	75	FULPHILA	29	GVOKE HYPOPEN 2-PACK	43
FIRDAPSE	67	<i>furosemide</i>	40, 55	GVOKE PFS	43
FIRMAGON	59	FUZEON	23	GYNIAZOLE-1	102
FIRMAGON (240 MG DOSE)	58	<i>fyavolv</i>	101	HAEGARDA	66
FIRVANQ	20	FYCOMPA	75	<i>halcinonide</i>	95
<i>flac</i>	46	<i>gabapentin</i>	75	<i>halobetasol propionate</i>	95
FLAREX	48	GALAFOLD	65	HALOG	95
<i>flavoxate hcl</i>	71	<i>galantamine hydrobromide</i>	72	<i>haloperidol</i>	87
FLEBOGAMMA DIF	60	<i>galantamine hydrobromide er</i>	72	<i>haloperidol decanoate</i>	87
<i>flecainide acetate</i>	37	GAMMAGARD	60	<i>haloperidol lactate</i>	87
FLOLIPID	41	GAMMAGARD S/D LESS		HARVONI	23
<i>fluconazole</i>	20	IGA	60	HAVRIX	60
<i>fluconazole in sodium chloride</i>	55	GAMMAKED	60	<i>heparin sodium (porcine)</i>	55
<i>flucytosine</i>	20	GAMMAPLEX	60	HETLIOZ	86
<i>fludrocortisone acetate</i>	58	GAMUNEX-C	60	HETLIOZ LQ	86
<i>flunisolide</i>	46	GARDASIL 9	60	HIBERIX	60
<i>fluocinolone acetonide</i>	46, 95	<i>gatifloxacin</i>	47	HORIZANT	75
<i>fluocinolone acetonide scalp</i>	95	GATTEX	51	HUMALOG	43
<i>fluocinonide</i>	95	<i>gauze pads</i>	42	HUMALOG JUNIOR	
<i>fluocinonide emulsified base</i>	95	<i>gavilyte-g</i>	51	KWIKPEN	43
<i>fluorometholone</i>	48	GAVRETO	31	HUMALOG KWIKPEN	43
<i>fluorouracil</i>	98	<i>gemfibrozil</i>	41	HUMALOG MIX 50/50	43
<i>fluoxetine hcl</i>	85	<i>generlac</i>	51	HUMALOG MIX 50/50	
<i>fluoxetine hcl (pmdd)</i>	85	<i>gengraf</i>	62	KWIKPEN	43
<i>fluphenazine decanoate</i>	87	GENOTROPIN	65	HUMALOG MIX 75/25	43
<i>fluphenazine hcl</i>	87	GENOTROPIN MINIQUICK	65	HUMALOG MIX 75/25	
<i>flurandrenolide</i>	95	<i>gentak</i>	47	KWIKPEN	43
<i>flurazepam hcl</i>	86	<i>gentamicin in saline</i>	55	HUMATROPE	65
<i>flurbiprofen</i>	79	<i>gentamicin sulfate</i>	47, 55, 93	HUMIRA	78
<i>flurbiprofen sodium</i>	48	GENVOYA	23	HUMIRA PEDIATRIC	
<i>flutamide</i>	31	GEODON		CROHNS START	78
<i>fluticasone propionate</i>	46, 95	INTRAMUSCULAR		HUMIRA PEN	78
<i>fluticasone-salmeterol</i>	90	INJECTION	87	HUMIRA PEN-CD/UC/HS	
<i>fluvastatin sodium</i>	41	GILENYA	67	STARTER	78
<i>fluvastatin sodium er</i>	41	GILOTrif	31	HUMIRA PEN-PEDIATRIC	
<i>fluvoxamine maleate</i>	85	<i>glimepiride</i>	45	UC START	78
<i>fluvoxamine maleate er</i>	85	<i>glipizide</i>	45	HUMIRA PEN-PS/UV/ADOL	
FML	48	<i>glipizide er</i>	45	HS START	78
FML FORTE	48	<i>glipizide-metformin hcl</i>	45	HUMIRA PEN-PSOR/UVEIT	
<i>fondaparinux sodium</i>	29	<i>global alcohol prep ease</i>	42	STARTER	78
<i>formoterol fumarate</i>	90	GLOPERBA	79	HUMULIN 70/30	44
FORTEO	101	GLUCAGEN HYPOKIT	43	HUMULIN 70/30 KWIKPEN	43
<i>fosamprenavir calcium</i>	23	GLUCAGON EMERGENCY	43	HUMULIN N	44
<i>fosfomycin tromethamine</i>	20	<i>glyburide</i>	45	HUMULIN N KWIKPEN	44
<i>fosinopril sodium</i>	36	<i>glyburide micronized</i>	45	HUMULIN R	44

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HYCAMTIN.....	31	<i>insulin syringe</i>	42	<i>kariva</i>	99
<i>hydralazine hcl</i>	42	INTELENCE.....	23	<i>kcl in dextrose-nacl</i>	56
<i>hydrochlorothiazide</i>	40	INTRALIPID.....	57	<i>kcl-lactated ringers-d5w</i>	56
<i>hydrocodone bitartrate er</i>	81	INTRAROSA.....	103	<i>kelnor 1/35</i>	99
<i>hydrocodone-acetaminophen</i>	81	INTRON A.....	23	KENALOG.....	95
<i>hydrocodone-ibuprofen</i>	81	<i>introvale</i>	99	KERENDIA.....	40
<i>hydrocortisone</i>	53, 58, 95	INVANZ.....	55	KESIMPTA.....	67
<i>hydrocortisone ace-pramoxine</i>	98	INVEGA SUSTENNA.....	87, 88	<i>ketoconazole</i>	20, 96
<i>hydrocortisone butyrate</i>	95	INVEGA TRINZA.....	88	KETODAN.....	96
<i>hydrocortisone valerate</i>	95	INVELTYS.....	48	<i>ketoprofen</i>	80
<i>hydrocortisone-acetic acid</i>	46	INVIRASE.....	23	<i>ketoprofen er</i>	80
<i>hydromorphone hcl</i>	81	IOPIDINE.....	49	<i>ketorolac tromethamine</i>	48
<i>hydromorphone hcl er</i>	81	IPOL.....	60	KEVEYIS.....	70
<i>hydroxychloroquine sulfate</i>	21	<i>ipratropium bromide</i>	46, 90	KINERET.....	63
<i>hydroxyurea</i>	31	<i>ipratropium-albuterol</i>	90	KINRIX.....	60
<i>hydroxyzine hcl</i>	46	<i>irbesartan</i>	37	KISQALI (200 MG DOSE).....	32
<i>hydroxyzine pamoate</i>	46	<i>irbesartan-hydrochlorothiazide</i>	38	KISQALI (400 MG DOSE).....	32
HYSINGLA ER.....	81	IRESSA.....	32	KISQALI (600 MG DOSE).....	32
<i>ibandronate sodium</i>	101	ISENTRESS.....	23	KISQALI FEMARA (400 MG	
IBRANCE.....	31	ISENTRESS HD.....	23	DOSE).....	32
<i>ibuprofen</i>	79	ISOLYTE-P IN D5W.....	56	KISQALI FEMARA (600 MG	
<i>icatibant acetate</i>	66	ISOLYTE-S.....	56	DOSE).....	32
<i>iclevia</i>	99	<i>isoniazid</i>	27	KISQALI FEMARA(200 MG	
ICLUSIG.....	31	<i>isosorbide dinitrate</i>	36	DOSE).....	32
<i>icosapent ethyl</i>	41	<i>isosorbide mononitrate</i>	36	KLISYRI.....	98
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ILEVRO.....	48	<i>isotretinoin</i>	93	<i>klor-con 10</i>	41
<i>imatinib mesylate</i>	32	<i>isradipine</i>	39	<i>klor-con m10</i>	41
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<i>imipenem-cilastatin</i>	55	<i>itraconazole</i>	20	<i>klor-con m20</i>	42
<i>imipramine hcl</i>	85	<i>ivermectin</i>	20, 97	KORLYM.....	64
<i>imipramine pamoate</i>	85	IXIARO.....	60	KOSELUGO.....	32
<i>imiquimod</i>	99	JAKAFI.....	32	KRINTAFEL.....	21
<i>imiquimod pump</i>	99	<i>jantoven</i>	29	KRISTALOSE.....	51
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INCRELEX.....	65	<i>jinteli</i>	102	<i>lamivudine-zidovudine</i>	23
<i>indapamide</i>	40	JULUCA.....	23	<i>lamotrigine</i>	75
INDOCIN ORAL		<i>junel 1.5/30</i>	99	<i>lamotrigine er</i>	75
SUSPENSION.....	79	<i>junel 1/20</i>	99	<i>lamotrigine starter kit-blue</i>	75
<i>indomethacin</i>	80	<i>junel fe 1.5/30</i>	99	<i>lamotrigine starter kit-green</i>	75
<i>indomethacin er</i>	79	<i>junel fe 1/20</i>	99	<i>lamotrigine starter kit-orange</i>	76
INFANRIX.....	60	<i>junel fe 24</i>	99	LAMPIT.....	21
INGREZZA.....	70	JUXTAPIID.....	41	<i>lancets</i>	43
		JYNARQUE.....	71	LANOXIN.....	37

<i>lansoprazole</i>	52	<i>levothyroxine sodium</i>	59	<i>MAVENCLAD (6 TABS)</i>	68
LANTUS	44	<i>levoxyl</i>	59	<i>MAVENCLAD (7 TABS)</i>	68
LANTUS SOLOSTAR	44	<i>LEXIVA</i>	23	<i>MAVENCLAD (8 TABS)</i>	68
<i>lapatinib ditosylate</i>	32	<i>lidocaine</i>	98	<i>MAVENCLAD (9 TABS)</i>	68
<i>larin 1.5/30</i>	99	<i>lidocaine hcl</i>	98	<i>MAVYRET</i>	23
<i>larin 1/20</i>	100	<i>lidocaine viscous hcl</i>	98	<i>MAXIDEX</i>	48
<i>larin fe 1.5/30</i>	100	<i>lidocaine-prilocaine</i>	98	<i>MAYZENT</i>	68
<i>larin fe 1/20</i>	100	<i>lindane</i>	97	<i>MAYZENT STARTER PACK</i>	68
LASTACAFT	47	<i>linezolid</i>	20, 55	<i>meclizine hcl</i>	50
<i>latanoprost</i>	49	<i>LINZESS</i>	53	<i>meclofenamate sodium</i>	80
LATUDA	88	<i>liothyronine sodium</i>	59	<i>MEDROL</i>	58
LAZANDA	81	<i>lisinopril</i>	36	<i>medroxyprogesterone acetate</i>	102
<i>leflunomide</i>	78	<i>lisinopril-hydrochlorothiazide</i>	38	<i>mefenamic acid</i>	80
LENVIMA (10 MG DAILY DOSE)	32	<i>lithium carbonate</i>	84	<i>mefloquine hcl</i>	21
LENVIMA (12 MG DAILY DOSE)	32	<i>lithium carbonate er</i>	84	<i>megestrol acetate</i>	33, 51
LENVIMA (14 MG DAILY DOSE)	32	<i>LO LOESTRIN FE</i>	100	<i>MEKINIST</i>	33
LENVIMA (18 MG DAILY DOSE)	32	<i>LOKELMA</i>	70	<i>MEKTOVI</i>	33
LENVIMA (20 MG DAILY DOSE)	32	<i>LONSURF</i>	33	<i>meloxicam</i>	80
LENVIMA (24 MG DAILY DOSE)	32	<i>loperamide hcl</i>	51	<i>melphalan</i>	33
LENVIMA (4 MG DAILY DOSE)	32	<i>lopinavir-ritonavir</i>	23	<i>memantine hcl</i>	72
LENVIMA (8 MG DAILY DOSE)	32	<i>lorazepam</i>	82	<i>memantine hcl er</i>	72
<i>lessina</i>	100	<i>lorazepam intensol</i>	82	<i>MENACTRA</i>	60
<i>letrozole</i>	32	<i>LORBRENA</i>	33	<i>MENEST</i>	102
<i>leucovorin calcium</i>	35	<i>losartan potassium</i>	37	<i>MENOSTAR</i>	102
LEUKERAN	33	<i>losartan potassium-hctz</i>	38	<i>MENQUADFI</i>	61
LEUKINE	29	<i>loteprednol etabonate</i>	47, 48	<i>MENTAX</i>	96
<i>leuprolide acetate</i>	59	<i>lovastatin</i>	41	<i>MENVEO</i>	61
<i>levalbuterol hcl</i>	90	<i>loxapine succinate</i>	88	<i>mercaptopurine</i>	33
<i>levalbuterol tartrate</i>	90	<i>lubiprostone</i>	53	<i>meropenem</i>	55
LEVEMIR	44	<i>LUCEMYRA</i>	69	<i>mesalamine</i>	53
LEVEMIR FLEXTOUCH	44	<i>LUCENTIS</i>	50	<i>mesalamine er</i>	53
<i>levetiracetam</i>	76	<i>luliconazole</i>	96	<i>MESNEX</i>	35
<i>levetiracetam er</i>	76	<i>LUMAKRAS</i>	33	<i>metformin hcl</i>	45
<i>levobunolol hcl</i>	49	<i>LUMIGAN</i>	49	<i>metformin hcl er</i>	45
<i>levocarnitine</i>	51	<i>LUPKYNIS</i>	62	<i>methadone hcl</i>	81
<i>levocetirizine dihydrochloride</i>	46	<i>LUPRON DEPOT (1-MONTH)</i>	59	<i>methamphetamine hcl</i>	83
<i>levofloxacin</i>	27, 47, 55	<i>LUPRON DEPOT (3-MONTH)</i>	59	<i>methazolamide</i>	49
<i>levofloxacin in d5w</i>	55	<i>LUPRON DEPOT (4-MONTH)</i>	59	<i>methenamine hippurate</i>	20
<i>levonest</i>	100	<i>LUPRON DEPOT (6-MONTH)</i>	59	<i>methimazole</i>	59
<i>levonorgest-eth estrad 91-day</i>	100	<i>LYNPARZA</i>	33	<i>METHITEST</i>	58
<i>levonorgestrel-ethynodiol estradiol</i>	100	<i>LYRICA CR</i>	76	<i>methotrexate</i>	78
<i>levora 0.15/30 (28)</i>	100	<i>LYSODREN</i>	33	<i>methotrexate sodium</i>	55
<i>levorphanol tartrate</i>	81	<i>mafенide acetate</i>	98	<i>methotrexate sodium (pf)</i>	55
<i>levo-t</i>	59	<i>magnesium sulfate</i>	56	<i>methoxsalen rapid</i>	97
		<i>malathion</i>	97	<i>methscopolamine bromide</i>	52
		<i>marlissa</i>	100	<i>METHYLIN</i>	83
		<i>MARPLAN</i>	85	<i>methylphenidate hcl</i>	83
		<i>MATULANE</i>	33	<i>methylphenidate hcl er</i>	83
		<i>matzim la</i>	39	<i>methylphenidate hcl er (cd)</i>	83
		<i>MAVENCLAD (10 TABS)</i>	68	<i>methylphenidate hcl er (la)</i>	83
		<i>MAVENCLAD (4 TABS)</i>	68	<i>methylprednisolone</i>	58
		<i>MAVENCLAD (5 TABS)</i>	68	<i>methyltestosterone</i>	58

<i>metoclopramide hcl</i>	50	MYTESI	52	<i>nitrofurantoin macrocrystal</i>	21
<i>metolazone</i>	40	<i>nabumetone</i>	80	<i>nitrofurantoin monohyd macro</i>	21
<i>metoprolol succinate er</i>	38	<i>nadolol</i>	39	<i>nitroglycerin</i>	36
<i>metoprolol tartrate</i>	38, 39	<i>nafcillin sodium</i>	55	NITROSTAT	36
<i>metoprolol-hydrochlorothiazide</i>	38	<i>naftifine hcl</i>	96	NITYR	66
<i>metronidazole</i>	20, 21, 92, 103	<i>naloxone hcl</i>	69	<i>nizatidine</i>	52
<i>metronidazole in nacl</i>	55	<i>naltrexone hcl</i>	82	<i>nolix</i>	95
<i>metyrosine</i>	69	NAMZARIC	72	NORDITROPIN FLEXPRO	65
<i>mexiletine hcl</i>	37	<i>naproxen</i>	80	<i>norethindrone acetate</i>	102
<i>micafungin sodium</i>	20	<i>naproxen dr</i>	80	<i>norethindrone-eth estradiol</i>	102
<i>miconazole 3</i>	103	<i>naproxen sodium</i>	80	<i>norethin-eth estradiol-fe</i>	100
<i>microgestin 1.5/30</i>	100	<i>naproxen sodium er</i>	80	NORPACE CR	37
<i>microgestin 1/20</i>	100	<i>naratriptan hcl</i>	73	NORTHERA	40
<i>microgestin fe 1.5/30</i>	100	NARCAN	69	<i>nortrel 0.5/35 (28)</i>	100
<i>microgestin fe 1/20</i>	100	NATACYN	50	<i>nortrel 1/35 (21)</i>	100
<i>midodrine hcl</i>	40	<i>nateglinide</i>	45	<i>nortrel 1/35 (28)</i>	100
MIGERGOT	73	NATPARA	67	<i>nortrel 7/7/7</i>	100
<i>miglitol</i>	45	NAYZILAM	73	<i>nortriptyline hcl</i>	85
<i>miglustat</i>	65	<i>nebivolol hcl</i>	39	NORVIR	24
MILLIPRED	58	<i>necon 0.5/35 (28)</i>	100	NOURIANZ	74
<i>minocycline hcl</i>	28	<i>nefazodone hcl</i>	85	NOXAFL	20
<i>minocycline hcl er</i>	28	<i>neomycin sulfate</i>	21	NUBEQA	33
<i>minoxidil</i>	42	<i>neomycin-bacitracin zn-</i>		NUCALA	92
<i>mirtazapine</i>	85	<i>polymyx</i>	47	NUEDEXTA	74
<i>misoprostol</i>	52	<i>neomycin-polymyxin-dexameth</i>	48	NUPLAZID	88
M-M-R II	61	<i>neomycin-polymyxin-gramicidin</i>	48	NUTRILIPID	57
<i>modafinil</i>	86	<i>neomycin-polymyxin-hc</i>	47, 48	NUTROPIN AQ NUSPIN 10	65
<i>moexipril hcl</i>	36	NERLYNX	33	NUTROPIN AQ NUSPIN 20	65
<i>molindone hcl</i>	88	NEULASTA	29	NUTROPIN AQ NUSPIN 5	65
<i>mometasone furoate</i>	46, 95	NEUPRO	73	NUZYRA	28
<i>monodoxyne nl</i>	28	<i>nevirapine</i>	23, 24	<i>nyamyc</i>	96
<i>montelukast sodium</i>	90	<i>nevirapine er</i>	23	NYMALIZE	39
MONUROL	21	NEXAVAR	33	<i>nystatin</i>	20, 96
<i>morphine sulfate</i>	81	NEXLETOL	41	<i>nystatin-triamcinolone</i>	96
<i>morphine sulfate (concentrate)</i>	81	NEXLIZET	41	<i>nystop</i>	97
<i>morphine sulfate er</i>	81	NEXTSTELLIS	100	OCALIVA	52
<i>morphine sulfate er beads</i>	81	<i>niacin er</i>	41	OCTAGAM	61
MOVANTIK	51	<i>niacor</i>	41	<i>octreotide acetate</i>	63
MOVIPREP	51	<i>nicardipine hcl</i>	39	ODEFSEY	24
<i>moxifloxacin hcl</i>	27, 47	NICOTROL	70	ODOMZO	33
<i>moxifloxacin hcl in nacl</i>	55	NICOTROL NS	70	OFEV	91
MULPLETA	29	<i>nifedipine</i>	39	<i>ofloxacin</i>	28, 46, 47
MULTAQ	37	<i>nifedipine er</i>	39	<i>olanzapine</i>	88
<i>mupirocin</i>	93	<i>nifedipine er osmotic release</i>	39	<i>olanzapine-fluoxetine hcl</i>	84
<i>mupirocin calcium</i>	93	<i>nikki</i>	100	<i>olmesartan medoxomil</i>	37
MYCAMEINE	55	<i>nilutamide</i>	33	<i>olmesartan medoxomil-hctz</i>	38
MYCAPSSA	63	<i>nimodipine</i>	39	<i>olmesartan-amlodipine-hctz</i>	38
<i>mycophenolate mofetil</i>	62	NINLARO	33	<i>olopatadine hcl</i>	47
<i>mycophenolate sodium</i>	62	<i>nisoldipine er</i>	39	<i>omega-3-acid ethyl esters</i>	41
MYFEMBREE	103	<i>nitazoxanide</i>	21	<i>omeprazole</i>	52
MYLERAN	33	<i>nitisinone</i>	66	<i>omeprazole-sodium bicarbonate</i>	53
MYRBETRIQ	71	NITRO-BID	36	OMNITROPE	65, 66

ondansetron	50	PEDIARIX	61	polymyxin b sulfate	56
ondansetron hcl	50	PEDVAX HIB	61	polymyxin b-trimethoprim	47
ONETOUCH VERIO	43	peg 3350-kcl-na bicarb-nacl	52	POMALYST	33
ONGENTYS	74	peg-3350/electrolytes	52	portia-28	100
ONUREG	33	PEGASYS	24	posaconazole	20
OPSUMIT	91	peg-kcl-nacl-nasulf-na asc-c	52	potassium chloride	42, 56
ORALAIR	92	PEMAZYRE	33	potassium chloride crys er	42
ORAPRED ODT	58	penicillamine	72	potassium chloride er	42
ORENITRAM	91	penicillin g pot in dextrose	55	potassium chloride in dextrose	56
ORFADIN	66	penicillin g potassium	55	potassium chloride in nacl	56
ORGOVYX	33	penicillin g procaine	55	potassium citrate er	71
ORIAHNN	100	penicillin g sodium	55	PRADAXA	29
ORILISSA	102	penicillin v potassium	26	PRALUENT	41
ORKAMBI	64	PENTACEL	61	pramipexole dihydrochloride	74
ORLADEYO	66	PENTAM	21	pramipexole dihydrochloride er	74
orsythia	100	pentamidine isethionate	21	prasugrel hcl	28
oseltamivir phosphate	24	pentoxifylline er	30	pravastatin sodium	41
OSMOPREP	52	PERFOROMIST	90	praziquantel	21
OSPHENA	103	perindopril erbumine	36	prazosin hcl	36
oxacillin sodium	55	periogard	46	PRED MILD	48
oxacillin sodium in dextrose	55	permethrin	97	PRED-G	48
oxandrolone	58	perphenazine	88	PRED-G S.O.P.	48
oxaprozin	80	perphenazine-amitriptyline	88	prednicarbate	96
oxazepam	82	PERSERIS	88	prednisolone	58
OXBRYTA	30	PEXEVA	85	prednisolone acetate	48
oxcarbazepine	76	phenelzine sulfate	85	prednisolone sodium phosphate	49, 58
OXERVATE	50	phenobarbital	76	prednisone	58
oxiconazole nitrate	97	phenoxybenzamine hcl	69	PREDNISONE INTENSOL	58
oxybutynin chloride	71	phenytoin	76	preferred plus insulin syringe	43
oxybutynin chloride er	71	phenytoin sodium extended	76	pregabalin	76
oxycodone hcl	81	PIFELTRO	24	pregabalin er	76
oxycodone hcl er	81	pilocarpine hcl	46, 49	PREMARIN	102
oxycodone-acetaminophen	81	pimecrolimus	98	PREMASOL	57
OXYCONTIN	82	pimozone	88	PREMPHASE	102
oxymorphone hcl	82	pindolol	39	PREMPRO	102
oxymorphone hcl er	82	pioglitazone hcl	45	prenatal	102
OZEMPIC (0.25 OR 0.5 MG/DOSE)	44	pioglitazone hcl-glimepiride	45	pretomanid	27
OZEMPIC (1 MG/DOSE)	44	pioglitazone hcl-metformin hcl	45	prevalite	41
paliperidone er	88	piperacillin sod-tazobactam so	56	PREVNAR 13	61
PALYNZIQ	69	PIQRAY (200 MG DAILY DOSE)	33	PREVYMIS	24
PANDEL	96	PIQRAY (250 MG DAILY DOSE)	33	PREZCOBIX	24
PANRETIN	98	PIQRAY (300 MG DAILY DOSE)	33	PREZISTA	24
pantoprazole sodium	53	PIQRAY (300 MG DAILY DOSE)	33	PRIFTIN	27
PANZYGA	61	piroxicam	80	primaquine phosphate	21
paricalcitol	67	PLASMA-LYTE 148	56	primidone	76
paromomycin sulfate	21	PLASMA-LYTE A	56	PRIVIGEN	61
paroxetine hcl	85	PLEGRIDY	68	PROAIR RESPICLICK	90
paroxetine hcl er	85	PLENAMINE	57	probenecid	79
paroxetine mesylate	85	PNEUMOVAX 23	61	PROCALAMINE	57
PASER	27	podoflox	99	prochlorperazine	50
PAXIL ORAL SUSPENSION	85			prochlorperazine maleate	50

<i>procto-med hc</i>	98	REBIF REBIDOSE	RYBELSUS	45
<i>procto-pak</i>	98	TITRATION PACK	RYDAPT	34
<i>proctosol hc</i>	98	REBIF TITRATION PACK	RYTARY	74
<i>proctozone-hc</i>	98	RECOMBIVAX HB	SAIZEN	66
<i>progesterone</i>	102	RECTIV	SAIZENPREP	66
<i>progesterone micronized</i>	102	REGRANEX	SAMSCA	71
PROGRAF INJECTION	62	RELENZA DISKHALER	SANCUSO	51
PROLASTIN-C	92	<i>relexxii</i>	SANTYL	98
PROLENSA	49	<i>reli-on insulin syringe</i>	SAPHRIS	88
PROLIA	102	RELISTOR	<i>sapropterin dihydrochloride</i>	69
PROMACTA	29	REMICADE	<i>scopolamine</i>	51
<i>promethazine hcl</i>	50, 51	<i>repaglinide</i>	SECUADO	88
<i>propafenone hcl</i>	37	RESTASIS	<i>selegiline hcl</i>	74
<i>propafenone hcl er</i>	37	RETACRIT	<i>selenium sulfide</i>	98
<i>propranolol hcl</i>	39	RETEVMO	SELZENTRY	24
<i>propranolol hcl er</i>	39	RETIN-A	SEREVENT DISKUS	90
<i>propylthiouracil</i>	59	RETIN-A MICRO	SEROSTIM	66
PROQUAD	61	RETIN-A MICRO PUMP	<i>sertraline hcl</i>	86
PROSOL	57	REVLIMID	<i>sevelamer carbonate oral</i>	
<i>protriptyline hcl</i>	85	REXULTI	<i>packets</i>	69
PRUDOXIN	98	REYATAZ	<i>sevelamer hcl</i>	69
PULMOZYME	64	REZUROCK	<i>sharobel</i>	100
PURIXAN	33	RHOPRESSA	SHINGRIX	61
PYLERA	53	<i>ribavirin</i>	SIGNIFOR	64
<i>pyrazinamide</i>	27	RIDAURA	<i>sildenafil citrate</i>	91
<i>pyridostigmine bromide</i>	68	rifabutin	<i>silodosin</i>	70
<i>pyridostigmine bromide er</i>	68	rifampin	<i>silver sulfadiazine</i>	93
<i>pyrimethamine</i>	22	riluzole	SIMBRINZA	49
QUELBREE	83	rimantadine hcl	<i>simvastatin</i>	41
QINLOCK	33	RINVOQ	<i>sirolimus</i>	62
QUADRACEL	61	RIOMET	SIRTURO	27
QUDEXY XR	76	risedronate sodium	SIVEXTRO	21, 56
<i>quetiapine fumarate</i>	88	RISPERDAL CONSTA	SKYRIZI	78
<i>quetiapine fumarate er</i>	88	risperidone	SKYRIZI (150 MG DOSE)	78
QUILLIVANT XR	83	ritonavir	SKYRIZI PEN	78
<i>quinapril hcl</i>	36	rivastigmine	<i>sodium chloride</i>	56, 98
<i>quinapril-hydrochlorothiazide</i>	38	rivastigmine tartrate	<i>sodium phenylbutyrate</i>	71
<i>quinidine gluconate er</i>	37	rizatriptan benzoate	<i>sodium polystyrene sulfonate</i>	70
<i>quinidine sulfate</i>	37	ROCKLATAN	<i>solifenacin succinate</i>	71
<i>quinine sulfate</i>	22	ropinirole hcl	SOLOSEC	103
QVAR REDIHALER	90	ropinirole hcl er	SOLTAMOX	34
RABAVERT	61	rosuvastatin calcium	SOMAVERT	63
<i>rabeprozole sodium</i>	53	ROTARIX	<i>sorine</i>	37
<i>raloxifene hcl</i>	102	ROTATEQ	<i>sotalol hcl</i>	37
<i>ramelteon</i>	86	ROWASA	<i>sotalol hcl (af)</i>	37
<i>ramipril</i>	36	<i>roweepra</i>	SOTYLIZE	37
<i>ranolazine er</i>	36	ROZLYTREK	SPIRIVA HANDIHALER	90
<i>rasagiline mesylate</i>	74	RUBRACA	SPIRIVA RESPIMAT	90
RASUVO	78	RUCONEST	<i>spironolactone</i>	40
RAVICTI	71	<i>rufinamide</i>	<i>spironolactone-hctz</i>	40
REBIF	68	RUKOBIA	SPRITAM	76
REBIF REBIDOSE	68	RUZURGI	SPRYCEL	34

sps.....	70	tamsulosin hcl.....	70	TIVICAY.....	25
ssd.....	93	TARGRETIN.....	34, 98	TIVICAY PD.....	25
STAMARIL.....	61	tarina fe 1/20 eq.....	100	tizanidine hcl.....	77
STELARA.....	78	TASIGNA.....	34	TOBI PODHALER.....	64
STIVARGA.....	34	TAVALISSE.....	30	TOBRADEX.....	48
streptomycin sulfate.....	56	tazarotene.....	93, 97	TOBRADEX ST.....	48
STRIBILD.....	24	TAZORAC.....	97	tobramycin.....	48, 64
STRIVERDI RESPIMAT.....	90	taztia xt.....	39	tobramycin sulfate.....	56
STROMECTOL.....	21	TAZVERIK.....	34	tobramycin-dexamethasone.....	48
SUBSYS.....	82	tdvax.....	61	tolcapone.....	74
SUCRAID.....	70	techlite insulin syringe.....	43	tolterodine tartrate.....	71
sucralfate.....	53	techlite pen needles.....	43	tolterodine tartrate er.....	71
sulfacetamide sodium.....	47	TEFLARO.....	56	tolvaptan.....	71
sulfacetamide sodium (acne).....	98	TEGSEDI.....	63	topiramate.....	76
sulfacetamide-prednisolone.....	47	TEKTURNA HCT.....	38	topiramate er.....	76
sulfadiazine.....	28	telmisartan.....	37	toremifene citrate.....	34
sulfamethoxazole-trimethoprim ..	28	telmisartanamlodipine.....	38	torsemide.....	40
SULFAMYLYON.....	98	telmisartan-hctz.....	38	TOUJEON MAX SOLOSTAR.....	44
sulfasalazine.....	53	temazepam.....	86	TOUJEON SOLOSTAR.....	44
sulindac.....	80	TEMIXYS.....	24	TOVET.....	96
sumatriptan.....	73	temozolomide.....	34	TOVIAZ.....	71
sumatriptan succinate.....	73	TENIVAC.....	61	tpn electrolytes.....	57
sumatriptan succinate refill.....	73	tenofovir disoproxil fumarate ..	24	TRACLEER.....	91
sumatriptan-naproxen sodium....	73	TEPMETKO.....	34	TRADJENTA.....	46
sunitinib malate.....	34	terazosin hcl.....	36	tramadol hcl.....	82
SUNOSI.....	86	terbinafine hcl.....	20	tramadol hcl er.....	82
SUPRAX.....	26	terbutaline sulfate.....	90	tramadol hcl er (biphasic).....	82
SUPREP BOWEL PREP KIT ..	52	terconazole.....	103	tramadol-acetaminophen.....	82
SUTENT.....	34	teriparatide (recombinant).....	102	trandolapril.....	36
SYMDEKO.....	64	testosterone.....	58	trandolapril-verapamil hcl er ..	38
SYMFI.....	24	testosterone cypionate	58	tranexamic acid.....	30
SYMFIL O.....	24	testosterone enanthate.....	58	tranylcypromine sulfate.....	86
SYMLINPEN 120.....	44	tetrabenazine.....	66	TRAVASOL.....	57
SYMLINPEN 60.....	44	tetracycline hcl.....	28	travoprost (bak free).....	50
SYMPAZAN.....	76	THALOMID.....	34	trazodone hcl.....	86
SYMTUZA.....	24	theophylline.....	91	TRECATOR.....	27
SYNAREL.....	59	theophylline er.....	91	TRELEGY ELLIPTA.....	91
SYNJARDY	45	THIOLA EC.....	64	TRELSTAR MIXJECT	59
SYNJARDY XR.....	46	thioridazine hcl.....	88	TRESIBA.....	44
SYNRIBO.....	30	thiothixene.....	88	TRESIBA FLEXTOUCH	44
SYNTROID.....	59	THYQUIDITY.....	59	tretinoin.....	34, 93
TABLOID.....	34	tiadylt er.....	39	tretinoin microsphere	93
TABRECTA.....	34	tiagabine hcl.....	76	TREXALL.....	79
tacrolimus.....	62, 98	TIBSOVO.....	34	triamicinolone acetonide	46, 96
tadalafil.....	70	tigecycline	56	triaterene-hctz.....	40
tadalafil (pah).....	91	TIGLUTIK.....	63	TRIANEX.....	96
TAFINLAR.....	34	timolol maleate	39, 49, 50	triazolam.....	86
TAGRISSO.....	34	timolol maleate pf.....	50	triderm.....	96
TAKHZYRO.....	66	tinidazole.....	22	trientine hcl.....	72
TALTZ.....	79	tiopronin.....	64	trifluoperazine hcl	89
TALZENNA.....	34	TIROSINT.....	59	trifluridine	49
tamoxifen citrate	34	TIROSINT-SOL.....	59	trihexyphenidyl hcl	74

TRIKAFTA	64	vandazole	103	XATMEP	79
<i>trimethoprim</i>	21	VAQTA	61	XCOPRI	77
<i>trimipramine maleate</i>	86	<i>varenicline tartrate</i>	70	XCOPRI (250 MG DAILY	
TRINTELLIX	86	VARIVAX	62	DOSE)	77
<i>tri-previfem</i>	100	VARIZIG	62	XCOPRI (350 MG DAILY	
<i>tri-sprintec</i>	100	VARUBI	51	DOSE)	77
TRIUMEQ	25	VARUBI (180 MG DOSE)	51	XELJANZ	79
<i>trivora (28)</i>	100	VASCEPA	41	XELJANZ XR	79
TROPHAMINE	57	<i>velivet</i>	100	XENLETA	21
<i>trospium chloride</i>	71	VELTASSA	70	XEPI	93
<i>trospium chloride er</i>	71	VEMLIDY	25	XERMELO	52
<i>trueplus insulin syringe</i>	43	VENCLEXTA	35	XGEVA	102
<i>trueplus pen needles</i>	43	VENCLEXTA STARTING		XIFAXAN	21
TRULICITY	45	PACK	35	XIGDUO XR	46
TRUMENBA	61	<i>venlafaxine hcl</i>	86	XOFLUZA (40 MG DOSE)	25
TRUSELTIQ (100MG DAILY		<i>venlafaxine hcl er</i>	86	XOFLUZA (80 MG DOSE)	25
DOSE)	34	VENTAVIS	91	XOLAIR	92
TRUSELTIQ (125MG DAILY		<i>verapamil hcl</i>	40	XOSPATA	35
DOSE)	34	<i>verapamil hcl er</i>	39, 40	XPOVIO (100 MG ONCE	
TRUSELTIQ (50MG DAILY		VERQUVO	40	WEEKLY)	35
DOSE)	34	VERSACLOZ	89	XPOVIO (40 MG ONCE	
TRUSELTIQ (75MG DAILY		VERZENIO	35	WEEKLY)	35
DOSE)	34	VIBRAMYCIN	28	XPOVIO (40 MG TWICE	
TRUVADA	25	VICTOZA	45	WEEKLY)	35
TUKYSA	34	VIDEX	25	XPOVIO (60 MG ONCE	
TURALIO	34	VIDEX EC	25	WEEKLY)	35
TWINRIX	61	<i>vigabatrin</i>	77	XPOVIO (60 MG TWICE	
TYBOST	25	<i>vigadron</i>	77	WEEKLY)	35
TYKERB	34	VIIBRYD	86	XPOVIO (80 MG ONCE	
TYMLOS	102	VIIBRYD STARTER PACK	86	WEEKLY)	35
TYPHIM VI	61	VIMPAT	77	XPOVIO (80 MG TWICE	
UCERIS	52	VIRACEPT	25	WEEKLY)	35
UDENYCA	29	VIREAD	25	XTANDI	35
UKONIQ	34	VITRAKVI	35	XURIDEN	36
<i>unithroid</i>	59	VIVITROL	82	XYOSTED	58
UPTRAVI	91	VIZIMPRO	35	XYREM	86
UROCIT-K 10	71	<i>voriconazole</i>	20, 56	XYWAV	86
UROCIT-K 15	71	VOSEVI	25	YF-VAX	62
UROCIT-K 5	72	VOTRIENT	35	YONSA	35
<i>ursodiol</i>	52	VRAYLAR	89	<i>yuvafem</i>	102
VABOMERE	56	<i>vyfemla</i>	100	<i>zafirlukast</i>	91
<i>valacyclovir hcl</i>	25	VYNDAMAX	63	<i>zaleplon</i>	86
VALCHLOR	98	VYNDAQEL	63	ZARXIO	29
<i>valganciclovir hcl</i>	25	VYVANSE	84	ZEJULA	35
<i>valproic acid</i>	76	VYZULTA	50	ZELBORAF	35
<i>valsartan</i>	37	WAKIX	86	ZENPEP	51
<i>valsartan-hydrochlorothiazide</i>	38	<i>warfarin sodium</i>	29	ZERBAXA	56
VALTOCO 10 MG DOSE	76	WELIREG	35	ZIAGEN	25
VALTOCO 15 MG DOSE	76	<i>wixela inhub</i>	91	<i>zidovudine</i>	25
VALTOCO 20 MG DOSE	77	XALKORI	35	ZIEXTENZO	29
VALTOCO 5 MG DOSE	77	XARELTO	30	<i>zileuton er</i>	91
<i>vancomycin hcl</i>	21, 56	XARELTO STARTER PACK	30	<i>ziprasidone hcl</i>	89

<i>ziprasidone mesylate</i>	89
ZIRGAN	49
ZOLINZA	35
<i>zolmitriptan</i>	73
<i>zolpidem tartrate</i>	86
<i>zolpidem tartrate er</i>	86
ZOMACTON	66
<i>zonisamide</i>	77
ZORBTIVE	66
ZORTRESS	62
ZOSYN	56
<i>zovia 1/35e (28)</i>	100
ZYDELIG	35
ZYKADIA	35
ZYLET	49
ZYPREXA	89
ZYPREXA RELPREVV	89



This formulary was updated on 12/01/2021. For more recent information or other questions, please contact Tufts Health Plan Senior Care Options Customer Relations at **1-855-670-5934** or, for TTY users, 711, 8:00 a.m. to 8:00 p.m., 7 days a week from October 1 to March 31 and Monday-Friday from April 1 to September 30, or visit www.thpmp.org/sco.



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