# 2027 Premium Standard Formulary

Effective January 1, 2027



## For the most current list of covered medications or if you have questions:

Call the number on your member ID card.

Visit your plan's website on your member ID card or log on to the Optum Rx app to:

- Find a participating retail pharmacy by ZIP code.
- Look up possible lower-cost medication alternatives.
- Compare medication pricing and options.

Optum Rx®

ASPIRUS® HEALTH PLAN

# Understanding your formulary

## What is a formulary?

A formulary is a list of prescribed medications or other pharmacy care products, services or supplies chosen for their safety, cost, and effectiveness. Medications are listed by categories or classes and are placed into cost levels known as tiers. It includes both brand and generic prescription medications.

To create the list, Optum Rx® is guided by the Pharmacy and Therapeutics Committee. This group of doctors and pharmacists reviews which medications will be covered, how well the drugs work, and overall value. They also make sure there are safe and covered options.



### About this formulary

Where differences exist between this list and your benefit plan, the benefit plan documents rule. This is not a complete list of your covered medications. Please review your benefit plan documents for full details. Not all formulary alternatives listed in this document may be appropriate for your specific condition. Please talk to your doctor.

## How do I use my formulary?

You and your doctor can use the formulary to help you choose the most cost-effective prescription medications. This guide tells you if a medication is generic or brand, and if special rules apply. If your medication is not listed here, please visit your plan's website or call the number on your member ID card.

## What are tiers?

Tiers are the different cost levels you pay for a medication. Each tier is assigned a cost, set by your employer or plan sponsor.

## When does the formulary change?

- Medications may move to a lower tier at any time.
- Medications may move to a higher tier when a generic equal becomes available.
- Medications may move to a higher tier or be excluded from coverage on January 1 or July 1 of each year.

If a medication changes tiers, you may have to pay a different amount for that medication.

## Why are some medications excluded from coverage?

A medication may be excluded from coverage under your pharmacy benefit when it works the same as or is similar to another prescription or over-the-counter (OTC) medication.

## What if I don't agree with a decision about an excluded medication?

You, your authorized representative, or your doctor can ask for a coverage request by calling the number on your member ID card.

# Medication tips

## What is the difference between brand-name and generic medications?

Generic medications contain the same active ingredients (offer the same effect) as brand-name medications, but they often cost less. In some situations, brand-name medications could be lower in cost.

## What if my doctor writes a brand-name prescription?

If your doctor gives you a prescription for a brand-name medication, ask if a lower-cost option could be right for you.

## What if I am taking a specialty medication?

Specialty medications are used to treat complex conditions and are generally higher in cost. Please note, not all specialty medications are listed in the formulary. Our specialty pharmacy can provide most of your specialty medications along with helpful programs and services. Aspirus Employee Group Health Plan members, call the number on the back your member ID card. All other plan members, call **1-855-427-4682** and learn more about where you can fill your specialty prescriptions.



## Over-the-counter medications (OTC)

Talk to your doctor about OTC options. Even though OTC medications may not be covered by your pharmacy benefit, they may cost less than a prescription medication.

# Reading your formulary

The formulary gives you choices so you and your doctor can decide your best course of treatment. In this formulary, brand-name medications are shown in UPPERCASE (for example, CLOBEX). Generic medications are shown in lowercase (for example, clobetasol).

## Tier information

Using lower tier or preferred medications can help you lower your out-of-pocket cost. Your plan may have multiple or no tiers. Please note: If you have a high-deductible plan, the tier cost levels will apply once you meet your deductible.

| Drug tier | Includes | | Helpful tips |
|---|---|---|---|
| **Tier 1** | $ | **Lower-cost** generics and some brand name | Use tier 1 drugs for the lowest out-of-pocket costs. |
| **Tier 2** | $$ | **Mid-range cost** preferred brand name | Use tier 2 drugs instead of tier 3 to help reduce your out-of-pocket costs. |

| Drug tier | Includes | Helpful tips |
|---|---|---|
| **Tier 3** | $$$ **Higher-cost** brand name and some generics | Many tier 3 drugs have lower-cost options in tier 1 or 2. Ask your doctor if they could work for you. |
| **Tier 4** | $$$$ **Specialty** | Generally highest in copayment and cost. These drugs are sometimes used for complex and chronic conditions and may require special monitoring and handling. |
| **Tier E** | ⊗ **Excluded** | May not be covered or need prior authorization. Lower-cost options are available and covered. |

## Drug list information

In this drug list, some medications are noted with letters next to them to help you see which ones may have coverage requirements or limits. Your benefit plan decides how these medications may be covered.

| | |
|---|---|
| **ACA** | **Affordable Care Act** – As part of the Affordable Care Act, certain drugs are available at a $0 copay (no member cost-share) if the member meets specific conditions, such as age or gender. If the member does not meet the specific conditions, the usual member benefit will apply. Some restrictions may apply, call Member Services (1-844-284-0142). |
| **AL** | **Age Limit** – Medication may be subject to a minimum or maximum age. |
| **PA** | **Prior authorization** – Your doctor is required to give Optum Rx more information to determine coverage. |
| **PV** | **Preventive** – For members enrolled in an IRS-qualified High Deductible Health Plan (HDHP) with a Health Savings Account (HSA), certain preventive medications, products, and services may be covered at a $0 member cost share before the deductible is met. Please refer to the plan Summary of Benefits or call Member Services (1-844-284-0142). |
| **QL** | **Quantity limit** – Medication may be limited to a certain quantity. |
| **SP** | **Specialty medication** – Medication is designated as specialty. |
| **ST** | **Step therapy** – Must try lower-cost medication(s) before a higher-cost medication can be covered |

**Aspirus Health Plan**

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| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Analgesics - Drugs for Pain** | | |
| acetaminophen intravenous solution 10 mg/ml | 1 | |
| acetaminophen-codeine oral solution 120-12 mg/5ml, 300-30 mg/12.5ml | 1 | QL (136 ML per 1 day) |
| acetaminophen-codeine oral tablet 300-15 mg | 1 | QL (13 EA per 1 day) |
| acetaminophen-codeine oral tablet 300-30 mg | 1 | QL (10 EA per 1 day) |
| acetaminophen-codeine oral tablet 300-60 mg | 1 | QL (5 EA per 1 day) |
| apap-caff-dihydrocodeine oral capsule 320.5-30-16 mg | 1 | QL (12 EA per 1 day) |
| ascomp-codeine oral capsule 50-325-40-30 mg | 1 | |
| bac (butalbital-acetamin-caff) oral tablet 50-325-40 mg | 1 | |
| BELBUCA BUCCAL FILM 150 MCG, 300 MCG, 450 MCG, 600 MCG, 75 MCG, 750 MCG, 900 MCG | 2 | PA; QL (2 EA per 1 day) |
| buprenorphine hcl injection solution 0.3 mg/ml | 1 | |
| buprenorphine transdermal patch weekly 10 mcg/hr, 15 mcg/hr, 20 mcg/hr, 5 mcg/hr, 7.5 mcg/hr | 1 | PA; QL (0.15 EA per 1 day) |
| butalbital-acetaminophen oral tablet 50-325 mg | 1 | |
| butalbital-apap-caff-cod oral capsule 50-325-40-30 mg | 1 | |
| butalbital-apap-caffeine oral capsule 50-300-40 mg | 1 | |
| butalbital-apap-caffeine oral tablet 50-325-40 mg | 1 | |
| butalbital-asa-caff-codeine oral capsule 50-325-40-30 mg | 1 | |
| butalbital-aspirin-caffeine oral capsule 50-325-40 mg | 1 | |
| butorphanol tartrate injection solution 1 mg/ml, 2 mg/ml | 1 | |
| butorphanol tartrate nasal solution 10 mg/ml | 1 | QL (2.5 ML per 1 fill) |
| BUTRANS TRANSDERMAL PATCH WEEKLY 10 MCG/HR, 15 MCG/HR, 20 MCG/HR, 5 MCG/HR, 7.5 MCG/HR | E | |
| codeine sulfate oral tablet 15 mg | 1 | QL (21 EA per 1 day) |
| codeine sulfate oral tablet 30 mg | 1 | QL (10 EA per 1 day) |
| codeine sulfate oral tablet 60 mg | 1 | QL (5 EA per 1 day) |
| CONZIP ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG | E | |
| DEMEROL INJECTION SOLUTION 25 MG/ML, 50 MG/ML | 3 | |
| DILAUDID INJECTION SOLUTION 0.2 MG/ML, 1 MG/ML, 2 MG/ML | 3 | |
| DILAUDID ORAL LIQUID 1 MG/ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DILAUDID ORAL TABLET 2 MG, 4 MG, 8 MG | E | |
| DISKETS ORAL TABLET SOLUBLE 40 MG | 3 | |
| DURAMORPH INJECTION SOLUTION 0.5 MG/ML, 1 MG/ML | 3 | |
| endocet oral tablet 10-325 mg | 1 | QL (3 EA per 1 day) |
| endocet oral tablet 2.5-325 mg | 1 | QL (12 EA per 1 day) |
| endocet oral tablet 5-325 mg | 1 | QL (6 EA per 1 day) |
| endocet oral tablet 7.5-325 mg | 1 | QL (4 EA per 1 day) |
| fentanyl citrate injection solution prefilled syringe 100 mcg/2ml | 1 | |
| FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION 1.25-0.9 MG/250ML-% | 3 | |
| FENTANYL CITRATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MCG/2ML-%, 10-0.9 MCG/ML-%, 5-0.9 MCG/ML-%, 550-0.9 MCG/55ML-% | 3 | |
| fentanyl transdermal patch 72 hour 100 mcg/hr, 75 mcg/hr | 1 | PA; QL (1 EA per 1 day) |
| fentanyl transdermal patch 72 hour 12 mcg/hr, 25 mcg/hr, 37.5 mcg/hr, 50 mcg/hr, 62.5 mcg/hr, 87.5 mcg/hr | 1 | PA; QL (0.5 EA per 1 day) |
| FIORICET ORAL CAPSULE 50-300-40 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| hydrocodone bitartrate er oral capsule extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg | 1 | PA; QL (2 EA per 1 day) |
| hydrocodone bitartrate er oral capsule extended release 12 hour 50 mg | 1 | PA; QL (4 EA per 1 day) |
| hydrocodone bitartrate er oral tablet er 24 hour abuse-deterrent 100 mg, 120 mg, 20 mg, 30 mg, 40 mg, 60 mg, 80 mg | 1 | PA; QL (1 EA per 1 day) |
| hydrocodone-acetaminophen oral solution 10-300 mg/15ml | 1 | QL (73.5 ML per 1 day) |
| hydrocodone-acetaminophen oral solution 2.5-108 mg/5ml, 5-217 mg/10ml, 7.5-325 mg/15ml | 1 | QL (98 ML per 1 day) |
| hydrocodone-acetaminophen oral tablet 10-300 mg, 10-325 mg | 1 | QL (4 EA per 1 day) |
| hydrocodone-acetaminophen oral tablet 2.5-325 mg | 1 | QL (12 EA per 1 day) |
| hydrocodone-acetaminophen oral tablet 5-300 mg, 5-325 mg | 1 | QL (9 EA per 1 day) |
| hydrocodone-acetaminophen oral tablet 7.5-300 mg, 7.5-325 mg | 1 | QL (6 EA per 1 day) |
| hydrocodone-ibuprofen oral tablet 10-200 mg | 1 | QL (4 EA per 1 day) |
| hydrocodone-ibuprofen oral tablet 5-200 mg | 1 | QL (9 EA per 1 day) |
| hydrocodone-ibuprofen oral tablet 7.5-200 mg | 1 | QL (6 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| hydromorphone hcl er oral tablet extended release 24 hour 12 mg, 16 mg, 32 mg, 8 mg | 1 | PA; QL (2 EA per 1 day) |
| hydromorphone hcl injection solution 0.25 mg/0.5ml, 2 mg/ml, 4 mg/ml | 1 | |
| hydromorphone hcl oral liquid 1 mg/ml | 1 | QL (10 ML per 1 day) |
| hydromorphone hcl oral tablet 2 mg | 1 | QL (5 EA per 1 day) |
| hydromorphone hcl oral tablet 4 mg | 1 | QL (2 EA per 1 day) |
| hydromorphone hcl oral tablet 8 mg | 1 | QL (1 EA per 1 day) |
| hydromorphone hcl pf injection solution 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml, 50 mg/5ml, 500 mg/50ml | 1 | |
| hydromorphone hcl solution 0.2 mg/ml injection | 1 | |
| HYDROMORPHONE HCL SOLUTION 0.2 MG/ML INJECTION | 3 | |
| HYDROMORPHONE HCL SOLUTION 1 MG/ML INJECTION | 3 | |
| hydromorphone hcl solution 1 mg/ml injection | 1 | |
| HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION 20-0.9 MG/100ML-%, 25-0.9 MG/50ML-%, 30-0.9 MG/30ML-%, 50-0.9 MG/50ML-%, 6-0.9 MG/30ML-% | 3 | |
| HYDROMORPHONE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.5-0.9 MG/0.5ML-%, 1-0.9 MG/5ML-%, 1-0.9 MG/ML-%, 10-0.9 MG/50ML-%, 2-0.9 MG/ML-%, 50-0.9 MG/50ML-%, 55-0.9 MG/55ML-%, 6-0.9 MG/30ML-% | 3 | |
| HYSINGLA ER ORAL TABLET ER 24 HOUR ABUSE-DETERRENT 100 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG | E | |
| INFUMORPH 200 INJECTION SOLUTION 200 MG/20ML (10 MG/ML) | 3 | |
| INFUMORPH 500 INJECTION SOLUTION 500 MG/20ML (25 MG/ML) | 3 | |
| JOURNAVX ORAL TABLET 50 MG | 3 | QL (2.5 EA per 1 day) |
| meperidine hcl injection solution 100 mg/ml, 25 mg/ml, 50 mg/ml | 1 | |
| meperidine hcl oral solution 50 mg/5ml | 1 | QL (49 ML per 1 day) |
| meperidine hcl oral tablet 50 mg | 1 | QL (9 EA per 1 day) |
| methadone hcl injection solution 10 mg/ml | 1 | |
| methadone hcl intensol oral concentrate 10 mg/ml | 1 | |
| methadone hcl oral concentrate 10 mg/ml | 1 | |
| methadone hcl oral solution 10 mg/5ml, 5 mg/5ml | 1 | PA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| methadone hcl oral tablet 10 mg, 5 mg | 1 | PA |
| methadone hcl oral tablet soluble 40 mg | 1 | |
| METHADOSE ORAL CONCENTRATE 10 MG/ML | 3 | |
| methadose oral tablet soluble 40 mg | 1 | |
| METHADOSE SUGAR-FREE ORAL CONCENTRATE 10 MG/ML | 3 | |
| mitigo injection solution 200 mg/20ml (10 mg/ml), 500 mg/20ml (25 mg/ml) | 1 | |
| morphine sulfate (concentrate) oral solution 100 mg/5ml | 1 | QL (2.4 ML per 1 day) |
| morphine sulfate (pf) injection solution 0.5 mg/ml, 1 mg/ml, 10 mg/ml, 2 mg/ml, 4 mg/ml | 1 | |
| morphine sulfate (pf) intravenous solution 1 mg/ml, 2 mg/ml, 4 mg/ml | 1 | |
| morphine sulfate er beads oral capsule extended release 24 hour 120 mg | 1 | PA; QL (2 EA per 1 day) |
| morphine sulfate er beads oral capsule extended release 24 hour 30 mg, 45 mg, 60 mg, 75 mg, 90 mg | 1 | PA; QL (1 EA per 1 day) |
| morphine sulfate er oral tablet extended release 100 mg, 15 mg, 200 mg, 30 mg, 60 mg | 1 | PA; QL (3 EA per 1 day) |
| MORPHINE SULFATE INJECTION SOLUTION 1 MG/ML | 3 | |
| morphine sulfate injection solution 2 mg/ml, 4 mg/ml | 1 | |
| MORPHINE SULFATE INTRAVENOUS SOLUTION 0.5 MG/ML, 1 MG/ML | 3 | |
| morphine sulfate intravenous solution 10 mg/ml, 2 mg/ml, 4 mg/ml, 50 mg/ml, 8 mg/ml | 1 | |
| morphine sulfate oral solution 10 mg/5ml | 1 | QL (24.5 ML per 1 day) |
| morphine sulfate oral solution 20 mg/5ml | 1 | QL (12.25 ML per 1 day) |
| morphine sulfate oral tablet 15 mg | 1 | QL (3 EA per 1 day) |
| morphine sulfate oral tablet 30 mg | 1 | QL (1 EA per 1 day) |
| MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION 500-0.9 MG/100ML-% | 3 | |
| MORPHINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 150-0.9 MG/30ML-%, 2-0.9 MG/ML-%, 4-0.9 MG/ML-%, 55-0.9 MG/55ML-% | 3 | |
| MS CONTIN ORAL TABLET EXTENDED RELEASE 15 MG, 30 MG, 60 MG | E | |
| nalbuphine hcl injection solution 10 mg/ml, 20 mg/ml | 1 | |
| NUCYNTA ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG | E | |
| NUCYNTA ORAL TABLET 100 MG, 50 MG, 75 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| oxycodone hcl oral capsule 5 mg | 1 | QL (6 EA per 1 day) |
| oxycodone hcl oral concentrate 100 mg/5ml | 1 | QL (1.6 ML per 1 day) |
| oxycodone hcl oral solution 5 mg/5ml | 1 | QL (32.6 ML per 1 day) |
| oxycodone hcl oral tablet 10 mg | 1 | QL (3 EA per 1 day) |
| oxycodone hcl oral tablet 15 mg | 1 | QL (2 EA per 1 day) |
| oxycodone hcl oral tablet 20 mg, 30 mg | 1 | QL (1 EA per 1 day) |
| oxycodone hcl oral tablet 5 mg | 1 | QL (6 EA per 1 day) |
| OXYCODONE HCL POWDER | E | |
| OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML | 3 | QL (32.6 ML per 1 day) |
| oxycodone-acetaminophen oral tablet 10-325 mg | 1 | QL (3 EA per 1 day) |
| oxycodone-acetaminophen oral tablet 2.5-325 mg | 1 | QL (12 EA per 1 day) |
| oxycodone-acetaminophen oral tablet 5-325 mg | 1 | QL (6 EA per 1 day) |
| oxycodone-acetaminophen oral tablet 7.5-325 mg | 1 | QL (4 EA per 1 day) |
| OXYCONTIN ORAL TABLET ER 12 HOUR ABUSE-DETERRENT 10 MG, 15 MG, 20 MG, 30 MG, 40 MG, 60 MG, 80 MG | E | |
| oxymorphone hcl er oral tablet extended release 12 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 5 mg, 7.5 mg | 1 | PA; QL (4 EA per 1 day) |
| oxymorphone hcl oral tablet 10 mg | 1 | QL (1 EA per 1 day) |
| oxymorphone hcl oral tablet 5 mg | 1 | QL (3 EA per 1 day) |
| pentazocine-naloxone hcl oral tablet 50-0.5 mg | 1 | QL (5 EA per 1 day) |
| PERCOCET ORAL TABLET 10-325 MG, 5-325 MG, 7.5-325 MG | E | |
| remifentanil hcl intravenous solution reconstituted 1 mg, 2 mg, 5 mg | 1 | |
| ROXICODONE ORAL TABLET 15 MG, 30 MG | E | |
| ROXYBOND ORAL TABLET ABUSE-DETERRENT 10 MG, 15 MG, 30 MG, 5 MG | E | |
| TAPENTADOL HCL ER ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG, 250 MG, 50 MG | E | |
| tapentadol hcl oral tablet 100 mg, 75 mg | 1 | QL (1 EA per 1 day) |
| tapentadol hcl oral tablet 50 mg | 1 | QL (2 EA per 1 day) |
| TENCON ORAL TABLET 50-325 MG | 3 | |
| TRAMADOL HCL (ER BIPHASIC) ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG | E | |
| tramadol hcl (er biphasic) oral tablet extended release 24 hour 200 mg, 300 mg | 1 | PA; QL (1 EA per 1 day) |
| tramadol hcl er oral tablet extended release 24 hour 100 mg, 200 mg, 300 mg | 1 | PA; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRAMADOL HCL ORAL SOLUTION 5 MG/ML | E | |
| tramadol hcl oral tablet 100 mg | 1 | QL (2 EA per 1 day) |
| tramadol hcl oral tablet 50 mg | 1 | QL (5 EA per 1 day) |
| tramadol-acetaminophen oral tablet 37.5-325 mg | 1 | QL (6 EA per 1 day) |
| TREZIX ORAL CAPSULE 320.5-30-16 MG | 3 | QL (12 EA per 1 day) |
| ULTIVA INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG | 3 | |
| XTAMPZA ER ORAL CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5 MG, 18 MG, 27 MG, 36 MG, 9 MG | 2 | PA; QL (4 EA per 1 day) |
| **Analgesics - Drugs for Pain and Inflammation** | | |
| ARTHROTEC ORAL TABLET DELAYED RELEASE 50-0.2 MG, 75-0.2 MG | E | |
| CALDOLOR INTRAVENOUS SOLUTION 800 MG/200ML, 800 MG/8ML | 3 | |
| CELEBREX ORAL CAPSULE 100 MG, 200 MG, 400 MG, 50 MG | E | |
| celecoxib oral capsule 100 mg, 200 mg, 400 mg, 50 mg | 1 | QL (2 EA per 1 day) |
| COMBOGESIC INTRAVENOUS SOLUTION 1000-300 MG/100ML | 3 | |
| COMBOGESIC ORAL TABLET 325-97.5 MG | E | |
| COXANTO ORAL CAPSULE 300 MG | E | |
| DICLOFENAC PATCH EXTERNAL PATCH 1.3 % | E | |
| diclofenac potassium oral tablet 50 mg | 1 | |
| diclofenac sodium er oral tablet extended release 24 hour 100 mg | 1 | |
| diclofenac sodium external solution 1.5 % | 1 | PA |
| diclofenac sodium oral tablet delayed release 25 mg, 50 mg, 75 mg | 1 | |
| diflunisal oral tablet 500 mg | 1 | |
| ELYXYB ORAL SOLUTION 120 MG/4.8ML | E | |
| etodolac er oral tablet extended release 24 hour 400 mg, 500 mg, 600 mg | 1 | |
| etodolac oral capsule 200 mg, 300 mg | 1 | |
| etodolac oral tablet 400 mg, 500 mg | 1 | |
| FLECTOR EXTERNAL PATCH 1.3 % | E | |
| flurbiprofen oral tablet 100 mg, 50 mg | 1 | |
| ibuprofen lysine intravenous solution 10 mg/ml | 1 | |
| ibuprofen oral suspension 100 mg/5ml, 200 mg/10ml | 1 | |
| ibuprofen oral tablet 400 mg, 600 mg, 800 mg | 1 | |
| ibuprofen-famotidine oral tablet 800-26.6 mg | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| indomethacin er oral capsule extended release 75 mg | 1 | |
| indomethacin oral capsule 25 mg, 50 mg | 1 | |
| indomethacin sodium intravenous solution reconstituted 1 mg | 1 | |
| ketorolac tromethamine +rfid injection solution 30 mg/ml | 1 | |
| ketorolac tromethamine injection solution 15 mg/ml, 30 mg/ml | 1 | |
| ketorolac tromethamine intramuscular solution 60 mg/2ml | 1 | |
| ketorolac tromethamine oral tablet 10 mg | 1 | QL (20 EA per 1 fill) |
| LICART EXTERNAL PATCH 24 HOUR 1.3 % | E | |
| LODINE ORAL TABLET 400 MG | 3 | |
| meloxicam oral tablet 7.5 mg | 1 | |
| nabumetone oral tablet 500 mg, 750 mg | 1 | |
| NAPRELAN ORAL TABLET EXTENDED RELEASE 24 HOUR 375 MG, 500 MG | E | |
| naproxen oral tablet 250 mg, 375 mg, 500 mg | 1 | |
| naproxen sodium oral tablet 275 mg, 550 mg | 1 | |
| NEOPROFEN INTRAVENOUS SOLUTION 10 MG/ML | 3 | |
| ORUDIS ORAL CAPSULE 75 MG | E | |
| OXAPROZIN ORAL CAPSULE 300 MG | E | |
| oxaprozin oral tablet 600 mg | 1 | |
| piroxicam oral capsule 10 mg, 20 mg | 1 | |
| RELAFEN DS ORAL TABLET 1000 MG | E | |
| SPRIX NASAL SOLUTION 15.75 MG/SPRAY | E | |
| sulindac oral tablet 150 mg, 200 mg | 1 | |
| TOLECTIN 600 ORAL TABLET 600 MG | E | |
| TOLECTIN DS ORAL CAPSULE 400 MG | E | |
| tolmetin sodium oral tablet 200 mg | 1 | |
| VYSCOXA ORAL SUSPENSION 10 MG/ML | E | |
| ZIPSOR ORAL CAPSULE 25 MG | E | |
| ZYBIC ORAL SUSPENSION 7.5 MG/5ML | E | |
| ZYNRELEF INJECTION SOLUTION 200-6 MG/7ML, 400-12 MG/14ML | 3 | |
| **Anesthetics** | | |
| ARTICADENT DENTAL INJECTION SOLUTION CARTRIDGE 4 %-1:100000 | 3 | |
| bupivacaine fisiopharma injection solution 0.5 %, 2.5 mg/ml | 1 | |
| bupivacaine hcl (pf) injection solution 0.25 %, 0.5 %, 0.75 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| bupivacaine hcl solution 0.25 % injection | 1 | |
| BUPIVACAINE HCL SOLUTION 0.25 % INJECTION | 3 | |
| bupivacaine hcl solution 0.5 % injection | 1 | |
| BUPIVACAINE HCL SOLUTION 0.5 % INJECTION | 3 | |
| bupivacaine-epinephrine (pf) injection solution 0.25% -1:200000, 0.5% - 1:200000 | 1 | |
| bupivacaine-epinephrine injection solution 0.25% - 1:200000, 0.5% - 1:200000 | 1 | |
| chloroprocaine hcl (pf) injection solution 2 %, 3 % | 1 | |
| COCAINE HCL NASAL SOLUTION 40 MG/ML | 3 | |
| ethyl chloride external aerosol | 1 | |
| EXPAREL INJECTION SUSPENSION 1.3 % | 3 | |
| glydo external prefilled syringe 2 % | 1 | |
| lidocaine external ointment 5 % | 1 | |
| lidocaine external patch 5 % | 1 | |
| lidocaine hcl (cardiac) pf intravenous solution 100 mg/5ml | 1 | |
| lidocaine hcl (cardiac) pf intravenous solution prefilled syringe 100 mg/5ml, 50 mg/5ml | 1 | |
| lidocaine hcl (pf) injection solution 0.5 %, 1 %, 1.5 %, 2 %, 4 % | 1 | |
| lidocaine hcl external solution 4 % | 1 | |
| lidocaine hcl injection solution 0.5 %, 2 % | 1 | |
| LIDOCAINE HCL INJECTION SOLUTION PREFILLED SYRINGE 10 MG/ML | 3 | |
| lidocaine hcl solution 1 % injection | 1 | |
| LIDOCAINE HCL SOLUTION 1 % INJECTION | 3 | |
| lidocaine hcl solution prefilled syringe 100 mg/5ml injection | 1 | |
| LIDOCAINE HCL SOLUTION PREFILLED SYRINGE 100 MG/5ML INJECTION | 3 | |
| lidocaine hcl urethral/mucosal external gel 2 % | 1 | |
| lidocaine hcl urethral/mucosal external prefilled syringe 2 % | 1 | |
| lidocaine in d5w intravenous solution 4-5 mg/ml-%, 8-5 mg/ml-% | 1 | |
| lidocaine-epinephrine (pf) injection solution 1.5 %-1:200000, 2 %-1:200000 | 1 | |
| lidocaine-epinephrine injection solution 0.5 %-1:200000, 1 %-1:100000, 2 %-1:100000 | 1 | |
| lidocaine-prilocaine external cream 2.5-2.5 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LIDOCAINE-SODIUM BICARBONATE INJECTION SOLUTION PREFILLED SYRINGE 1-8.4 % | 3 | |
| LIDOCAN EXTERNAL PATCH 5 % | E | |
| LIDODERM EXTERNAL PATCH 5 % | E | |
| MARCAINE INJECTION SOLUTION 0.5 % | 3 | |
| MARCAINE PRESERVATIVE FREE INJECTION SOLUTION 0.25 %, 0.5 %, 0.75 % | 3 | |
| MARCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.25- 1:200000 %, 0.5% - 1:200000 | 3 | |
| MARCAINE/EPINEPHRINE PF INJECTION SOLUTION 0.25% - 1:200000, 0.25- 1:200000 %, 0.5% - 1:200000 | 3 | |
| NAROPIN INJECTION SOLUTION 10 MG/ML, 5 MG/ML, 7.5 MG/ML | 3 | |
| NESACAINE INJECTION SOLUTION 1 %, 2 % | 3 | |
| NESACAINE-MPF INJECTION SOLUTION 2 %, 3 % | 3 | |
| ORABLOC INJECTION SOLUTION CARTRIDGE 4 %-1:100000, 4 %-1:200000 | 3 | |
| POLOCAINE INJECTION SOLUTION 1 %, 2 % | 3 | |
| POLOCAINE-MPF INJECTION SOLUTION 1 %, 1.5 %, 2 % | 3 | |
| ropivacaine hcl injection solution 10 mg/ml, 2 mg/ml, 5 mg/ml, 7.5 mg/ml | 1 | |
| ROPIVACAINE HCL-NACL INJECTION SOLUTION 0.2-0.9 % | 3 | |
| SENSORCAINE INJECTION SOLUTION 0.25 %, 0.5 % | 3 | |
| SENSORCAINE/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.5% - 1:200000 | 3 | |
| SENSORCAINE-MPF INJECTION SOLUTION 0.25 %, 0.5 %, 0.75 % | 3 | |
| SENSORCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 0.25% - 1:200000, 0.5% - 1:200000, 0.75-1:200000 % | 3 | |
| TRIDACAINE III EXTERNAL PATCH 5 % | E | |
| VENIPUNCTURE PX1 PHLEBOTOMY EXTERNAL KIT 2 % | 3 | |
| XYLOCAINE INJECTION SOLUTION 0.5 %, 1 %, 2 % | 3 | |
| XYLOCAINE MPF +RFID INJECTION SOLUTION 1 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| XYLOCAINE/EPINEPHRINE INJECTION SOLUTION 0.5 %-1:200000, 1 %-1:100000, 2 %-1:100000 | 3 | |
| XYLOCAINE-MPF +RFID INJECTION SOLUTION 2 % | 3 | |
| XYLOCAINE-MPF INJECTION SOLUTION 0.5 %, 1 %, 1.5 %, 2 % | 3 | |
| XYLOCAINE-MPF/EPINEPHRINE INJECTION SOLUTION 1 %-1:200000, 1.5 %-1:200000, 2 %-1:200000 | 3 | |
| ZTLIDO EXTERNAL PATCH 1.8 % | E | |
| **Anti-Addiction / Substance Abuse Treatment Agents** | | |
| acamprosate calcium oral tablet delayed release 333 mg | 1 | |
| BRIXADI (MONTHLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.36ML, 64 MG/0.18ML, 96 MG/0.27ML | 4 | SP |
| BRIXADI (WEEKLY) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 16 MG/0.32ML, 24 MG/0.48ML, 32 MG/0.64ML, 8 MG/0.16ML | 4 | SP |
| buprenorphine hcl sublingual tablet 2 mg, 8 mg | 1 | |
| buprenorphine hcl-naloxone hcl sublingual film 12-3 mg, 2-0.5 mg, 4-1 mg, 8-2 mg | 1 | |
| buprenorphine hcl-naloxone hcl sublingual tablet 2-0.5 mg, 8-2 mg | 1 | |
| bupropion hcl er (smoking det) oral tablet extended release 12 hour 150 mg | 1 | ACA; QL (180 day supply per 365 days) |
| CHANTIX CONTINUING MONTH PAK ORAL TABLET 1 MG | E | |
| CHANTIX ORAL TABLET 0.5 MG, 1 MG | E | |
| CHANTIX STARTING MONTH PAK ORAL TABLET THERAPY PACK 0.5 MG X 11 & 1 MG X 42 | E | |
| disulfiram oral tablet 250 mg, 500 mg | 1 | |
| ft naloxone hcl nasal liquid 4 mg/0.1ml | 1 | |
| KLOXXADO NASAL LIQUID 8 MG/0.1ML | 2 | |
| lofexidine hcl oral tablet 0.18 mg | 1 | QL (16 EA per 1 day) |
| NALMEFENE HCL INJECTION SOLUTION 1 MG/ML | 3 | |
| naloxone hcl injection solution 0.4 mg/ml, 4 mg/10ml | 1 | |
| naloxone hcl injection solution cartridge 0.4 mg/ml | 1 | |
| naloxone hcl injection solution prefilled syringe 0.4 mg/ml, 2 mg/2ml | 1 | |
| naloxone hcl nasal liquid 4 mg/0.1ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| naltrexone hcl oral tablet 50 mg | 1 | |
| NARCAN NASAL LIQUID 4 MG/0.1ML | 2 | |
| NICOTROL NS NASAL SOLUTION 10 MG/ML | 3 | ACA; QL (180 day supply per 365 days) |
| OPVEE NASAL SOLUTION 2.7 MG/0.1ML | 2 | |
| REXTOVY NASAL LIQUID 4 MG/0.25ML | 2 | |
| REZENOPY NASAL LIQUID 10 MG/0.11ML | E | |
| SUBLOCADE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.5ML, 300 MG/1.5ML | 4 | SP |
| SUBOXONE SUBLINGUAL FILM 12-3 MG, 2-0.5 MG, 4-1 MG, 8-2 MG | E | |
| varenicline tartrate (starter) oral tablet therapy pack 0.5 mg x 11 & 1 mg x 42 | 1 | ACA; QL (180 day supply per 365 days) |
| varenicline tartrate oral tablet 0.5 mg, 1 mg | 1 | ACA; QL (180 day supply per 365 days) |
| varenicline tartrate(continue) oral tablet 1 mg | 1 | ACA; QL (180 day supply per 365 days) |
| VIVITROL INTRAMUSCULAR SUSPENSION RECONSTITUTED 380 MG | 4 | SP |
| ZUBSOLV SUBLINGUAL TABLET 0.7-0.18 MG, 1.4-0.36 MG, 11.4-2.9 MG, 2.9-0.71 MG, 5.7-1.4 MG, 8.6-2.1 MG | 2 | |
| ZURNAI INJECTION SOLUTION AUTO-INJECTOR 1.5 MG/0.5ML | E | |
| **Antibacterials** | | |
| amikacin sulfate injection solution 1 gm/4ml, 500 mg/2ml | 1 | |
| amoxicillin oral capsule 250 mg, 500 mg | 1 | |
| amoxicillin oral suspension reconstituted 125 mg/5ml, 200 mg/5ml, 250 mg/5ml, 400 mg/5ml | 1 | |
| amoxicillin oral tablet 500 mg, 875 mg | 1 | |
| amoxicillin oral tablet chewable 125 mg, 250 mg | 1 | |
| amoxicillin trihydrate oral suspension reconstituted 250 mg/5ml | 1 | |
| amoxicillin-potassium clavulanate er oral tablet extended release 12 hour 1000-62.5 mg | 1 | |
| amoxicillin-potassium clavulanate oral suspension reconstituted 200-28.5 mg/5ml, 250-62.5 mg/5ml, 400-57 mg/5ml, 600-42.9 mg/5ml | 1 | |
| amoxicillin-potassium clavulanate oral tablet 250-125 mg, 500-125 mg, 875-125 mg | 1 | |
| amoxicillin-potassium clavulanate oral tablet chewable 200-28.5 mg, 400-57 mg | 1 | |
| ampicillin oral capsule 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ampicillin sodium injection solution reconstituted 1 gm, 2 gm, 250 mg, 500 mg | 1 | |
| ampicillin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm | 1 | |
| ampicillin-sulbactam sodium injection solution reconstituted 1.5 (1-0.5) gm, 3 (2-1) gm | 1 | |
| ampicillin-sulbactam sodium intravenous solution reconstituted 15 (10-5) gm | 1 | |
| ARIKAYCE INHALATION SUSPENSION 590 MG/8.4ML | 4 | PA; SP |
| AUGMENTIN ES-600 ORAL SUSPENSION RECONSTITUTED 600-42.9 MG/5ML | 3 | |
| AUGMENTIN ORAL SUSPENSION RECONSTITUTED 125-31.25 MG/5ML | 3 | |
| AVIDOXY ORAL TABLET 100 MG | 3 | ST |
| AVYCAZ INTRAVENOUS SOLUTION RECONSTITUTED 2.5 (2-0.5) GM | 3 | |
| azithromycin intravenous solution reconstituted 500 mg | 1 | |
| azithromycin oral suspension reconstituted 100 mg/5ml, 200 mg/5ml | 1 | |
| azithromycin oral tablet 250 mg, 500 mg, 600 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| aztreonam injection solution reconstituted 1 gm, 2 gm | 1 | |
| BACTRIM DS ORAL TABLET 800-160 MG | 3 | |
| BACTRIM ORAL TABLET 400-80 MG | 3 | |
| benzalkonium chloride external solution , 50 % | 1 | |
| BICILLIN C-R 900/300 INTRAMUSCULAR SUSPENSION 900000-300000 UNIT/2ML | 3 | |
| BICILLIN C-R INTRAMUSCULAR SUSPENSION 1200000 UNIT/2ML | 3 | |
| BICILLIN L-A INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1200000 UNIT/2ML, 2400000 UNIT/4ML, 600000 UNIT/ML | 3 | |
| BLUJEPA ORAL TABLET 750 MG | 3 | ST; QL (20 EA per 28 days) |
| cefaclor er oral tablet extended release 12 hour 500 mg | 1 | |
| cefaclor oral capsule 250 mg, 500 mg | 1 | |
| cefaclor oral suspension reconstituted 250 mg/5ml | 1 | |
| cefadroxil oral capsule 500 mg | 1 | |
| cefadroxil oral suspension reconstituted 250 mg/5ml, 500 mg/5ml | 1 | |
| cefadroxil oral tablet 1 gm | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CEFAZOLIN IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 2-0.9 GM/100ML-% | 3 | |
| cefazolin sodium injection solution reconstituted 1 gm, 10 gm, 100 gm, 2 gm, 3 gm, 300 gm, 500 mg | 1 | |
| CEFAZOLIN SODIUM INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 GM/10ML, 2 GM/20ML | 3 | |
| cefazolin sodium intravenous solution reconstituted 2 gm, 3 gm | 1 | |
| cefazolin sodium-dextrose intravenous solution 1-4 gm/50ml-%, 2-4 gm/100ml-%, 3-4 gm/150ml-% | 1 | |
| cefazolin sodium-dextrose intravenous solution reconstituted 1-4 gm-%(50ml), 2-3 gm-%(50ml), 3-2 gm-%(50ml) | 1 | |
| cefdinir oral capsule 300 mg | 1 | |
| cefdinir oral suspension reconstituted 125 mg/5ml, 250 mg/5ml | 1 | |
| cefepime hcl injection solution reconstituted 1 gm | 1 | |
| cefepime hcl intravenous solution 1 gm/50ml, 2 gm/100ml | 1 | |
| cefepime hcl intravenous solution reconstituted 2 gm | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| cefepime-dextrose intravenous solution reconstituted 1-5 gm-%(50ml), 2-5 gm-%(50ml) | 1 | |
| cefixime oral capsule 400 mg | 1 | |
| cefixime oral suspension reconstituted 100 mg/5ml, 200 mg/5ml | 1 | |
| CEFOTAN INJECTION SOLUTION RECONSTITUTED 2 GM | 3 | |
| CEFOTAXIME SODIUM INJECTION SOLUTION RECONSTITUTED 1 GM, 2 GM | 3 | |
| cefotetan disodium injection solution reconstituted 1 gm, 2 gm | 1 | |
| cefoxitin sodium intravenous solution reconstituted 1 gm, 10 gm, 2 gm | 1 | |
| CEFOXITIN SODIUM-DEXTROSE INTRAVENOUS SOLUTION RECONSTITUTED 1-4 GM-%(50ML), 2-2.2 GM-%(50ML) | 3 | |
| cefpodoxime proxetil oral suspension reconstituted 100 mg/5ml, 50 mg/5ml | 1 | |
| cefpodoxime proxetil oral tablet 100 mg, 200 mg | 1 | |
| cefprozil oral suspension reconstituted 125 mg/5ml, 250 mg/5ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| cefprozil oral tablet 250 mg, 500 mg | 1 | |
| ceftaroline fosamil intravenous solution reconstituted 400 mg, 600 mg | 1 | |
| ceftazidime injection solution reconstituted 1 gm, 6 gm | 1 | |
| ceftazidime intravenous solution reconstituted 2 gm | 1 | |
| ceftriaxone sodium in dextrose intravenous solution 20 mg/ml, 40 mg/ml | 1 | |
| ceftriaxone sodium injection solution reconstituted 1 gm, 100 gm, 2 gm, 250 mg, 500 mg | 1 | |
| ceftriaxone sodium intravenous solution reconstituted 10 gm, 2 gm | 1 | |
| ceftriaxone sodium-dextrose intravenous solution reconstituted 1-3.74 gm-%(50ml), 2-2.22 gm-%(50ml) | 1 | |
| cefuroxime axetil oral tablet 250 mg, 500 mg | 1 | |
| cefuroxime sodium injection solution reconstituted 750 mg | 1 | |
| cefuroxime sodium intravenous solution reconstituted 1.5 gm | 1 | |
| cephalexin oral capsule 250 mg, 500 mg | 1 | |
| cephalexin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml | 1 | |
| cephalexin oral tablet 250 mg, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| chloramphenicol sod succinate intravenous solution reconstituted 1 gm | 1 | |
| CIPRO ORAL SUSPENSION RECONSTITUTED 250 MG/5ML (5%), 500 MG/5ML (10%) | 3 | |
| ciprofloxacin hcl oral tablet 250 mg, 500 mg, 750 mg | 1 | |
| ciprofloxacin in d5w intravenous solution 200 mg/100ml, 400 mg/200ml | 1 | |
| clarithromycin er oral tablet extended release 24 hour 500 mg | 1 | |
| clarithromycin oral suspension reconstituted 125 mg/5ml, 250 mg/5ml | 1 | |
| clarithromycin oral tablet 250 mg, 500 mg | 1 | |
| CLEOCIN ORAL CAPSULE 150 MG, 300 MG, 75 MG | 3 | |
| CLEOCIN ORAL SOLUTION RECONSTITUTED 75 MG/5ML | 3 | |
| CLEOCIN PHOSPHATE INJECTION SOLUTION 300 MG/2ML, 600 MG/4ML, 900 MG/6ML | 3 | |
| CLEOCIN VAGINAL CREAM 2 % | E | |
| CLEOCIN VAGINAL SUPPOSITORY 100 MG | E | |
| clindamycin hcl oral capsule 150 mg, 300 mg, 75 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| clindamycin palmitate hcl oral solution reconstituted 75 mg/5ml | 1 | |
| clindamycin phosphate in d5w intravenous solution 300 mg/50ml, 600 mg/50ml, 900 mg/50ml | 1 | |
| CLINDAMYCIN PHOSPHATE IN NACL INTRAVENOUS SOLUTION 300-0.9 MG/50ML-%, 600-0.9 MG/50ML-%, 900-0.9 MG/50ML-% | 3 | |
| clindamycin phosphate injection solution 300 mg/2ml, 600 mg/4ml, 900 mg/6ml | 1 | |
| clindamycin phosphate vaginal cream 2 % | 1 | |
| CLINDESSE VAGINAL CREAM 2 % | 3 | |
| colistimethate sodium (cba) injection solution reconstituted 150 mg | 1 | |
| COLY-MYCIN M INJECTION SOLUTION RECONSTITUTED 150 MG | 3 | |
| CONTEPO INTRAVENOUS SOLUTION RECONSTITUTED 6 GM | 3 | |
| dalbavancin hcl intravenous solution reconstituted 500 mg | 1 | |
| daptomycin intravenous solution reconstituted 350 mg, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DAPTOMYCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 1000-0.9 MG/100ML-%, 350-0.9 MG/50ML-%, 500-0.9 MG/50ML-%, 700-0.9 MG/100ML-% | 3 | |
| demeclocycline hcl oral tablet 150 mg, 300 mg | 1 | |
| dicloxacillin sodium oral capsule 250 mg, 500 mg | 1 | |
| DIFICID ORAL SUSPENSION RECONSTITUTED 40 MG/ML | 3 | |
| DIFICID ORAL TABLET 200 MG | E | |
| DORYX MPC ORAL TABLET DELAYED RELEASE 60 MG | E | |
| doxy 100 intravenous solution reconstituted 100 mg | 1 | |
| doxycycline hyclate intravenous solution reconstituted 100 mg | 1 | |
| doxycycline hyclate oral capsule 100 mg, 50 mg | 1 | |
| doxycycline hyclate oral tablet 100 mg, 20 mg | 1 | |
| doxycycline monohydrate oral capsule 100 mg, 50 mg | 1 | |
| doxycycline monohydrate oral suspension reconstituted 25 mg/5ml | 1 | |
| doxycycline monohydrate oral tablet 100 mg, 150 mg, 50 mg, 75 mg | 1 | |
| E.E.S. 400 ORAL TABLET 400 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| E.E.S. GRANULES ORAL SUSPENSION RECONSTITUTED 200 MG/5ML | 3 | |
| EMBLAVEO INTRAVENOUS SOLUTION RECONSTITUTED 1.5-0.5 GM | 3 | |
| ertapenem sodium injection solution reconstituted 1 gm | 1 | |
| ERYPED 400 ORAL SUSPENSION RECONSTITUTED 400 MG/5ML | 3 | |
| ERYTHROCIN LACTOBIONATE INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 3 | |
| erythromycin base oral capsule delayed release particles 250 mg | 1 | |
| erythromycin base oral tablet 250 mg, 500 mg | 1 | |
| erythromycin base oral tablet delayed release 250 mg, 333 mg, 500 mg | 1 | |
| erythromycin ethylsuccinate oral suspension reconstituted 200 mg/5ml, 400 mg/5ml | 1 | |
| erythromycin lactobionate intravenous solution reconstituted 500 mg | 1 | |
| erythromycin oral tablet delayed release 250 mg, 333 mg, 500 mg | 1 | |
| FETROJA INTRAVENOUS SOLUTION RECONSTITUTED 1 GM | 3 | |
| fidaxomicin oral tablet 200 mg | 1 | |
| FIRVANQ ORAL SOLUTION RECONSTITUTED 25 MG/ML, 50 MG/ML | 3 | |
| fosfomycin tromethamine oral packet 3 gm | 1 | |
| gentamicin in saline intravenous solution 0.8-0.9 mg/ml-%, 1-0.9 mg/ml-%, 1.2-0.9 mg/ml-%, 1.6-0.9 mg/ml-%, 2-0.9 mg/ml-% | 1 | |
| gentamicin sulfate external cream 0.1 % | 1 | |
| gentamicin sulfate external ointment 0.1 % | 1 | |
| gentamicin sulfate injection solution 10 mg/ml, 40 mg/ml | 1 | |
| HUMATIN ORAL CAPSULE 250 MG | 2 | |
| hydrogen peroxide solution 30 % | 1 | |
| imipenem-cilastatin intravenous solution reconstituted 250 mg, 500 mg | 1 | |
| KIMYRSA INTRAVENOUS SOLUTION RECONSTITUTED 1200 MG | 3 | |
| LENTOCILIN INTRAMUSCULAR SUSPENSION RECONSTITUTED 1200000 UNIT | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| levofloxacin in d5w intravenous solution 250 mg/50ml, 500 mg/100ml, 750 mg/150ml | 1 | |
| levofloxacin intravenous solution 25 mg/ml | 1 | |
| levofloxacin oral solution 25 mg/ml | 1 | |
| levofloxacin oral tablet 250 mg, 500 mg, 750 mg | 1 | |
| LIKMEZ ORAL SUSPENSION 500 MG/5ML | E | |
| LINCOCIN INJECTION SOLUTION 300 MG/ML | 3 | |
| lincomycin hcl injection solution 300 mg/ml | 1 | |
| linezolid in sodium chloride intravenous solution 600-0.9 mg/300ml-% | 1 | |
| linezolid intravenous solution 600 mg/300ml | 1 | |
| linezolid oral suspension reconstituted 100 mg/5ml | 1 | QL (65 ML per 1 day) |
| linezolid oral tablet 600 mg | 1 | QL (2 EA per 1 day) |
| LUGOLS STRONG IODINE EXTERNAL SOLUTION 5-10 % | 3 | |
| meropenem intravenous solution reconstituted 1 gm, 2 gm, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| MEROPENEM-SODIUM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM/50ML, 500 MG/50ML | 3 | |
| methenamine hippurate oral tablet 1 gm | 1 | |
| metronidazole intravenous solution 500 mg/100ml | 1 | |
| metronidazole oral tablet 250 mg, 500 mg | 1 | |
| metronidazole vaginal gel 0.75 % | 1 | |
| MINOCIN INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 3 | |
| minocycline hcl oral capsule 100 mg, 50 mg, 75 mg | 1 | |
| MONDOXYNE NL ORAL CAPSULE 100 MG | 3 | ST |
| moxifloxacin hcl in nacl intravenous solution 400 mg/250ml | 1 | |
| MOXIFLOXACIN HCL INTRAVENOUS SOLUTION 400 MG/250ML | 3 | |
| moxifloxacin hcl oral tablet 400 mg | 1 | |
| mupirocin external ointment 2 % | 1 | |
| NAFCILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 2 GM/100ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| nafcillin sodium injection solution reconstituted 1 gm, 2 gm | 1 | |
| nafcillin sodium intravenous solution reconstituted 10 gm | 1 | |
| neomycin sulfate oral tablet 500 mg | 1 | |
| neomycin-polymyxin b gu irrigation solution 40-200000 | 1 | |
| nitrofurantoin macrocrystal oral capsule 100 mg, 25 mg, 50 mg | 1 | |
| nitrofurantoin monohydrate macrocrystals oral capsule 100 mg | 1 | |
| NITROFURANTOIN ORAL SUSPENSION 50 MG/5ML | E | |
| NUVESSA VAGINAL GEL 1.3 % | E | |
| NUZYRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 3 | |
| NUZYRA ORAL TABLET 150 MG | 3 | QL (30 EA per 14 days) |
| ofloxacin oral tablet 400 mg | 1 | |
| ORBACTIV INTRAVENOUS SOLUTION RECONSTITUTED 400 MG | 3 | |
| ORLYNVAH ORAL TABLET 500-500 MG | E | |
| OXACILLIN SODIUM IN DEXTROSE INTRAVENOUS SOLUTION 2 GM/50ML | 3 | |
| oxacillin sodium injection solution reconstituted 1 gm, 2 gm | 1 | |
| oxacillin sodium intravenous solution reconstituted 10 gm | 1 | |
| PENICILLIN G POT IN DEXTROSE INTRAVENOUS SOLUTION 40000 UNIT/ML, 60000 UNIT/ML | 3 | |
| penicillin g potassium injection solution reconstituted 20000000 unit, 5000000 unit | 1 | |
| penicillin g sodium injection solution reconstituted 5000000 unit | 1 | |
| penicillin v potassium oral solution reconstituted 125 mg/5ml, 250 mg/5ml | 1 | |
| penicillin v potassium oral tablet 250 mg, 500 mg | 1 | |
| PFIZERPEN INJECTION SOLUTION RECONSTITUTED 20000000 UNIT, 5000000 UNIT | 3 | |
| piperacillin sod-tazobactam so intravenous solution reconstituted 13.5 (12-1.5) gm, 2.25 (2-0.25) gm, 3-0.375 gm, 3.375 (3-0.375) gm, 4.5 (4-0.5) gm, 40.5 (36-4.5) gm | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PIPERACILLIN-TAZOBACTAM-NACL INTRAVENOUS SOLUTION RECONSTITUTED 2-0.25 GM/50ML, 3-0.375 GM/50ML, 4-0.5 GM/100ML | 3 | |
| PIVYA ORAL TABLET 185 MG | 3 | ST; QL (21 EA per 28 days) |
| polymyxin b sulfate injection solution reconstituted 500000 unit | 1 | |
| PRIMAXIN IV INTRAVENOUS SOLUTION RECONSTITUTED 500-500 MG | 3 | |
| RECARBRIO INTRAVENOUS SOLUTION RECONSTITUTED 1.25 GM | 3 | |
| SEYSARA ORAL TABLET 100 MG, 150 MG, 60 MG | 3 | ST |
| SILVADENE EXTERNAL CREAM 1 % | E | |
| silver sulfadiazine external cream 1 % | 1 | |
| SIVEXTRO INTRAVENOUS SOLUTION RECONSTITUTED 200 MG | 3 | QL (6 EA per 30 days) |
| SOLOSEC ORAL PACKET 2 GM | 3 | ST |
| ssd external cream 1 % | 1 | |
| streptomycin sulfate intramuscular solution reconstituted 1 gm | 1 | |
| sulfadiazine oral tablet 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| sulfamethoxazole-trimethoprim intravenous solution 400-80 mg/5ml | 1 | |
| sulfamethoxazole-trimethoprim oral suspension 200-40 mg/5ml, 800-160 mg/20ml | 1 | |
| sulfamethoxazole-trimethoprim oral tablet 400-80 mg, 800-160 mg | 1 | |
| sulfatrim pediatric oral suspension 200-40 mg/5ml | 1 | |
| TARGADOX ORAL TABLET 50 MG | E | |
| tazicef injection solution reconstituted 1 gm | 1 | |
| TAZICEF INTRAVENOUS SOLUTION 1 GM/50ML | 3 | |
| tazicef intravenous solution reconstituted 2 gm, 6 gm | 1 | |
| TEFLARO INTRAVENOUS SOLUTION RECONSTITUTED 400 MG, 600 MG | 3 | |
| tetracycline hcl oral capsule 250 mg, 500 mg | 1 | |
| tigecycline intravenous solution reconstituted 50 mg | 1 | |
| tinidazole oral tablet 250 mg, 500 mg | 1 | |
| tobramycin sulfate injection solution 1.2 gm/30ml, 10 mg/ml, 80 mg/2ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| tobramycin sulfate injection solution reconstituted 1.2 gm | 1 | |
| trimethoprim oral tablet 100 mg | 1 | |
| TYGACIL INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 3 | |
| TYZAVAN INTRAVENOUS SOLUTION 1000 MG/200ML, 1250 MG/250ML, 1500 MG/300ML, 1750 MG/350ML, 2000 MG/400ML, 500 MG/100ML, 750 MG/150ML | 3 | |
| UNASYN INJECTION SOLUTION RECONSTITUTED 1.5 (1-0.5) GM, 3 (2-1) GM | 3 | |
| UNASYN INTRAVENOUS SOLUTION RECONSTITUTED 15 (10-5) GM | 3 | |
| VABOMERE INTRAVENOUS SOLUTION RECONSTITUTED 2 (1-1) GM | 3 | |
| VANCOMYCIN HCL IN DEXTROSE INTRAVENOUS SOLUTION 1.5-5 GM/250ML-% | 3 | |
| vancomycin hcl in dextrose intravenous solution 1-5 gm/200ml-%, 1.5-5 gm/300ml-%, 500-5 mg/100ml-%, 750-5 mg/150ml-% | 1 | |
| vancomycin hcl in dextrose solution 1.25-5 gm/250ml-% intravenous | 1 | |
| VANCOMYCIN HCL IN DEXTROSE SOLUTION 1.25-5 GM/250ML-% INTRAVENOUS | 3 | |
| VANCOMYCIN HCL IN NACL INTRAVENOUS SOLUTION 1.75-0.9 GM/250ML-% | 3 | |
| vancomycin hcl in nacl intravenous solution 1-0.9 gm/200ml-%, 500-0.9 mg/100ml-% | 1 | |
| VANCOMYCIN HCL IN NACL SOLUTION 750-0.9 MG/150ML-% INTRAVENOUS | 3 | |
| vancomycin hcl in nacl solution 750-0.9 mg/150ml-% intravenous | 1 | |
| vancomycin hcl intravenous solution 1000 mg/200ml, 1250 mg/250ml, 1500 mg/300ml, 1750 mg/350ml, 2000 mg/400ml, 500 mg/100ml, 750 mg/150ml | 1 | |
| vancomycin hcl intravenous solution reconstituted 1 gm, 1.25 gm, 1.5 gm, 1.75 gm, 10 gm, 100 gm, 2 gm, 5 gm, 500 mg, 750 mg | 1 | |
| vancomycin hcl oral capsule 125 mg, 250 mg | 1 | |
| vancomycin hcl oral solution reconstituted 25 mg/ml, 250 mg/5ml, 50 mg/ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VANDAZOLE VAGINAL GEL 0.75 % | 3 | ST |
| VIBATIV INTRAVENOUS SOLUTION RECONSTITUTED 750 MG | 3 | |
| XACIATO VAGINAL GEL 2 % | 3 | |
| XEPI EXTERNAL CREAM 1 % | 3 | |
| XERAVA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG | 3 | |
| XIFAXAN ORAL TABLET 200 MG | E | |
| XIFAXAN ORAL TABLET 550 MG | 3 | PA |
| ZEMDRI INTRAVENOUS SOLUTION 500 MG/10ML | 3 | |
| ZERBAXA INTRAVENOUS SOLUTION RECONSTITUTED 1.5 (1-0.5) GM | 3 | |
| ZEVTERA INTRAVENOUS SOLUTION RECONSTITUTED 667 MG | 3 | |
| ZITHROMAX ORAL SUSPENSION RECONSTITUTED 200 MG/5ML | 3 | |
| ZITHROMAX ORAL TABLET 250 MG, 500 MG | 3 | |
| ZITHROMAX TRI-PAK ORAL TABLET 500 MG | 3 | |
| ZITHROMAX Z-PAK ORAL TABLET 250 MG | 3 | |
| ZOSYN INTRAVENOUS SOLUTION 2-0.25 GM/50ML, 3-0.375 GM/50ML, 4-0.5 GM/100ML | 3 | |
| ZYVOX INTRAVENOUS SOLUTION 600 MG/300ML | 3 | |
| **Anticoagulants** | | |
| ACD FORMULA A EXTRACORPOREAL SOLUTION 0.73-2.45-2.2 GM/100ML | 3 | |
| ACD-A NOCLOT-50 EXTRACORPOREAL SOLUTION 0.73-2.45-2.2 GM/100ML | 3 | |
| ANTICOAGULANT SODIUM CITRATE EXTRACORPOREAL SOLUTION 4 %, 4 GM/100ML | 3 | |
| bivalirudin trifluoroacetate intravenous solution reconstituted 250 mg | 1 | |
| dabigatran etexilate mesylate oral capsule 110 mg, 150 mg, 75 mg | 1 | QL (2 EA per 1 day) |
| DEFENCATH SOLUTION 1000-13.5 UNIT-MG/ML | 3 | |
| ELIQUIS (1.5 MG PACK) ORAL TABLET SOLUBLE 3 X 0.5 MG | 2 | QL (12 EA per 1 day) |
| ELIQUIS (2 MG PACK) ORAL TABLET SOLUBLE 4 X 0.5 MG | 2 | QL (16 EA per 1 day) |
| ELIQUIS DVT/PE STARTER PACK ORAL TABLET THERAPY PACK 5 MG | 2 | QL (148 EA per 365 days) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ELIQUIS ORAL CAPSULE SPRINKLE 0.15 MG | 2 | QL (2 EA per 1 day) |
| ELIQUIS ORAL TABLET 2.5 MG, 5 MG | 2 | QL (2 EA per 1 day) |
| ELIQUIS ORAL TABLET SOLUBLE 0.5 MG | 2 | QL (4 EA per 1 day) |
| enoxaparin sodium injection solution 300 mg/3ml | 1 | |
| enoxaparin sodium injection solution prefilled syringe 100 mg/ml, 120 mg/0.8ml, 150 mg/ml, 30 mg/0.3ml, 40 mg/0.4ml, 60 mg/0.6ml, 80 mg/0.8ml | 1 | |
| fondaparinux sodium subcutaneous solution 10 mg/0.8ml, 2.5 mg/0.5ml, 5 mg/0.4ml, 7.5 mg/0.6ml | 1 | |
| FRAGMIN SUBCUTANEOUS SOLUTION 10000 UNIT/4ML, 95000 UNIT/3.8ML | 3 | |
| FRAGMIN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10000 UNIT/ML, 12500 UNIT/0.5ML, 15000 UNIT/0.6ML, 18000 UNT/0.72ML, 2500 UNIT/0.2ML, 5000 UNIT/0.2ML, 7500 UNIT/0.3ML | 3 | |
| heparin (porcine) in nacl intravenous solution | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HEPARIN (PORCINE) IN NACL INTRAVENOUS SOLUTION 2500-0.9 UT/500ML-%, 30000-0.9 UNIT/L-%, 500-0.9 UT/500ML-%, 5000-0.9 UNIT/L-%, 5000-0.9 UT/500ML-% | 3 | |
| heparin sod (porcine) in d5w intravenous solution 100 unit/ml, 25000-5 ut/500ml-%, 40-5 unit/ml-% | 1 | |
| heparin sodium (porcine) +rfid injection solution 1000 unit/ml | 1 | |
| heparin sodium (porcine) injection solution 1000 unit/ml, 10000 unit/ml, 20000 unit/ml, 5000 unit/ml | 1 | |
| heparin sodium (porcine) injection solution prefilled syringe 5000 unit/0.5ml | 1 | |
| heparin sodium (porcine) pf injection solution 1000 unit/ml, 5000 unit/0.5ml, 5000 unit/ml | 1 | |
| LOVENOX INJECTION SOLUTION 300 MG/3ML | 3 | |
| PRADAXA ORAL PACKET 110 MG, 30 MG, 40 MG, 50 MG | 3 | QL (4 EA per 1 day) |
| PRADAXA ORAL PACKET 150 MG, 20 MG | 3 | QL (2 EA per 1 day) |
| rivaroxaban oral suspension reconstituted 1 mg/ml | 1 | QL (20 ML per 1 day) |
| rivaroxaban oral tablet 2.5 mg | 1 | QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SAVAYSA ORAL TABLET 15 MG, 30 MG, 60 MG | 3 | QL (1 EA per 1 day) |
| SODIUM CITRATE IN VITRO SOLUTION PREFILLED SYRINGE 4 % | 3 | |
| SODIUM CITRATE LOCK FLUSH INTRAVENOUS SOLUTION PREFILLED SYRINGE 120 MG/3ML | 3 | |
| SODIUM CITRATE-GENTAMICIN SULF INTRAVENOUS SOLUTION 4-320 %-MCG/ML | 3 | |
| TRICITRASOL EXTRACORPOREAL CONCENTRATE 46.7 % | 3 | |
| warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 6 mg, 7.5 mg | 1 | |
| XARELTO ORAL SUSPENSION RECONSTITUTED 1 MG/ML | 2 | QL (20 ML per 1 day) |
| XARELTO ORAL TABLET 10 MG, 20 MG | 2 | QL (1 EA per 1 day) |
| XARELTO ORAL TABLET 15 MG, 2.5 MG | 2 | QL (2 EA per 1 day) |
| XARELTO STARTER PACK ORAL TABLET THERAPY PACK 15 & 20 MG | 2 | QL (102 EA per 365 days) |
| **Anticonvulsants - Drugs for Seizures** | | |
| APTIOM ORAL TABLET 200 MG, 400 MG, 600 MG, 800 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| brivaracetam intravenous solution 50 mg/5ml | 1 | |
| brivaracetam oral solution 10 mg/ml | 1 | |
| brivaracetam oral tablet 10 mg, 100 mg, 25 mg, 50 mg, 75 mg | 1 | |
| BRIVIACT INTRAVENOUS SOLUTION 50 MG/5ML | E | |
| BRIVIACT ORAL SOLUTION 10 MG/ML | E | |
| BRIVIACT ORAL TABLET 10 MG, 100 MG, 25 MG, 50 MG, 75 MG | E | |
| carbamazepine er oral capsule extended release 12 hour 100 mg, 200 mg, 300 mg | 1 | |
| carbamazepine er oral tablet extended release 12 hour 100 mg, 200 mg, 400 mg | 1 | |
| carbamazepine oral suspension 100 mg/5ml, 200 mg/10ml | 1 | |
| carbamazepine oral tablet 200 mg | 1 | |
| carbamazepine oral tablet chewable 100 mg | 1 | |
| CARBATROL ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG | E | |
| CEREBYX INJECTION SOLUTION 100 MG PE/2ML, 500 MG PE/10ML | 3 | |
| clobazam oral suspension 2.5 mg/ml | 1 | PA |
| clobazam oral tablet 10 mg, 20 mg | 1 | PA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DEPAKOTE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 250 MG, 500 MG | E | |
| DEPAKOTE ORAL TABLET DELAYED RELEASE 125 MG, 250 MG, 500 MG | E | |
| DEPAKOTE SPRINKLES ORAL CAPSULE DELAYED RELEASE SPRINKLE 125 MG | E | |
| DIACOMIT ORAL CAPSULE 250 MG, 500 MG | 4 | PA; SP |
| DIACOMIT ORAL PACKET 250 MG, 500 MG | 4 | PA; SP |
| diazepam rectal gel 10 mg, 2.5 mg, 20 mg | 1 | QL (2 EA per 1 fill) |
| DILANTIN INFATABS ORAL TABLET CHEWABLE 50 MG | E | |
| DILANTIN ORAL CAPSULE 100 MG | E | |
| DILANTIN ORAL CAPSULE 30 MG | 3 | |
| DILANTIN-125 ORAL SUSPENSION 125 MG/5ML | E | |
| divalproex sodium er oral tablet extended release 24 hour 250 mg, 500 mg | 1 | |
| divalproex sodium oral capsule delayed release sprinkle 125 mg | 1 | |
| divalproex sodium oral tablet delayed release 125 mg, 250 mg, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ELEPSIA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 1000 MG, 1500 MG | E | |
| EPIDIOLEX ORAL SOLUTION 100 MG/ML | 4 | PA; SP |
| EPRONTIA ORAL SOLUTION 25 MG/ML | E | |
| eslicarbazepine acetate oral tablet 200 mg, 400 mg, 600 mg, 800 mg | 1 | |
| ethosuximide oral capsule 250 mg | 1 | |
| ethosuximide oral solution 250 mg/5ml | 1 | |
| felbamate oral suspension 600 mg/5ml | 1 | |
| felbamate oral tablet 400 mg, 600 mg | 1 | |
| FINTEPLA ORAL SOLUTION 2.2 MG/ML | 4 | PA; SP |
| fosphenytoin sodium injection solution 100 mg pe/2ml, 500 mg pe/10ml | 1 | |
| FYCOMPA ORAL SUSPENSION 0.5 MG/ML | 3 | |
| FYCOMPA ORAL TABLET 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG | 3 | |
| gabapentin oral capsule 100 mg, 300 mg, 400 mg | 1 | |
| gabapentin oral solution 250 mg/5ml, 300 mg/6ml | 1 | |
| gabapentin oral tablet 600 mg, 800 mg | 1 | |
| GABARONE ORAL TABLET 100 MG, 400 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| KEPPRA INTRAVENOUS SOLUTION 500 MG/5ML | 3 | |
| KEPPRA ORAL SOLUTION 100 MG/ML | E | |
| KEPPRA ORAL TABLET 1000 MG, 250 MG, 500 MG, 750 MG | E | |
| KEPPRA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 500 MG, 750 MG | E | |
| lacosamide intravenous solution 200 mg/20ml | 1 | |
| lacosamide oral solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml | 1 | |
| lacosamide oral tablet 100 mg, 150 mg, 200 mg, 50 mg | 1 | |
| LAMICTAL ODT ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 42 X 50 MG & 14X100 MG | E | |
| LAMICTAL ODT ORAL TABLET DISPERSIBLE 100 MG, 200 MG, 25 MG, 50 MG | E | |
| LAMICTAL ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG | E | |
| LAMICTAL ORAL TABLET CHEWABLE 25 MG, 5 MG | E | |
| LAMICTAL STARTER ORAL KIT 35 X 25 MG, 42 X 25 MG & 7 X 100 MG, 84 X 25 MG & 14X100 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LAMICTAL XR ORAL KIT 21 X 25 MG & 7 X 50 MG, 25 & 50 & 100 MG, 50 & 100 & 200 MG | 3 | |
| LAMICTAL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 250 MG, 300 MG, 50 MG | E | |
| lamotrigine er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 250 mg, 300 mg, 50 mg | 1 | |
| lamotrigine odt oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg | 1 | |
| lamotrigine oral kit 21 x 25 mg & 7 x 50 mg, 25 & 50 & 100 mg, 42 x 50 mg & 14x100 mg | 1 | |
| lamotrigine oral tablet 100 mg, 150 mg, 200 mg, 25 mg | 1 | |
| lamotrigine oral tablet chewable 25 mg, 5 mg | 1 | |
| lamotrigine oral tablet dispersible 100 mg, 200 mg, 25 mg, 50 mg | 1 | |
| lamotrigine starter kit-blue oral kit 35 x 25 mg | 1 | |
| lamotrigine starter kit-green oral kit 84 x 25 mg & 14x100 mg | 1 | |
| lamotrigine starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg | 1 | |
| levetiracetam er oral tablet extended release 24 hour 500 mg, 750 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| levetiracetam in nacl intravenous solution 1000 mg/100ml, 1500 mg/100ml, 500 mg/100ml | 1 | |
| levetiracetam intravenous solution 500 mg/5ml | 1 | |
| levetiracetam oral solution 100 mg/ml, 500 mg/5ml | 1 | |
| levetiracetam oral tablet 1000 mg, 250 mg, 500 mg, 750 mg | 1 | |
| LEVETIRACETAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG, 500 MG | E | |
| methsuximide oral capsule 300 mg | 1 | |
| MOTPOLY XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG | 3 | ST |
| NAYZILAM NASAL SOLUTION 5 MG/0.1ML | 3 | QL (0.34 EA per 1 day) |
| NEURONTIN ORAL CAPSULE 100 MG, 300 MG, 400 MG | E | |
| NEURONTIN ORAL SOLUTION 250 MG/5ML | E | |
| NEURONTIN ORAL TABLET 600 MG, 800 MG | E | |
| ONFI ORAL SUSPENSION 2.5 MG/ML | E | |
| ONFI ORAL TABLET 10 MG, 20 MG | E | |
| oxcarbazepine er oral tablet extended release 24 hour 150 mg, 300 mg, 600 mg | 1 | ST |
| oxcarbazepine oral suspension 300 mg/5ml | 1 | |
| oxcarbazepine oral tablet 150 mg, 300 mg, 600 mg | 1 | |
| OXTELLAR XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG, 600 MG | E | |
| pentobarbital sodium injection solution 50 mg/ml | 1 | |
| perampanel oral suspension 0.5 mg/ml | 1 | |
| perampanel oral tablet 10 mg, 12 mg, 2 mg, 4 mg, 6 mg, 8 mg | 1 | |
| phenobarbital oral elixir 20 mg/5ml, 30 mg/7.5ml, 60 mg/15ml | 1 | |
| phenobarbital oral tablet 100 mg, 15 mg, 16.2 mg, 30 mg, 32.4 mg, 60 mg, 64.8 mg, 97.2 mg | 1 | |
| phenobarbital sodium injection solution 130 mg/ml, 65 mg/ml | 1 | |
| phenytek oral capsule 200 mg, 300 mg | 1 | |
| phenytoin infatabs oral tablet chewable 50 mg | 1 | |
| phenytoin oral suspension 125 mg/5ml | 1 | |
| phenytoin oral tablet chewable 50 mg | 1 | |
| phenytoin sodium extended oral capsule 100 mg, 200 mg, 300 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| phenytoin sodium injection solution 50 mg/ml | 1 | |
| primidone oral tablet 250 mg, 50 mg | 1 | |
| RELGAABI ORAL CAPSULE 200 MG, 300 MG, 400 MG | E | |
| roweepra oral tablet 500 mg | 1 | |
| rufinamide oral suspension 40 mg/ml | 1 | PA |
| rufinamide oral tablet 200 mg, 400 mg | 1 | PA |
| SABRIL ORAL PACKET 500 MG | E | |
| SABRIL ORAL TABLET 500 MG | E | |
| SEZABY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 3 | |
| SPRITAM ORAL TABLET DISINTEGRATING SOLUBLE 250 MG, 500 MG | E | |
| SUBVENITE ORAL SUSPENSION 10 MG/ML | E | |
| subvenite oral tablet 100 mg, 150 mg, 200 mg, 25 mg | 1 | |
| subvenite starter kit-blue oral kit 35 x 25 mg | 1 | |
| subvenite starter kit-green oral kit 84 x 25 mg & 14x100 mg | 1 | |
| subvenite starter kit-orange oral kit 42 x 25 mg & 7 x 100 mg | 1 | |
| SYMPAZAN ORAL FILM 10 MG, 20 MG, 5 MG | 3 | PA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TEGRETOL ORAL SUSPENSION 100 MG/5ML | E | |
| TEGRETOL ORAL TABLET 200 MG | E | |
| TEGRETOL-XR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 400 MG | E | |
| tiagabine hcl oral tablet 12 mg, 16 mg, 2 mg, 4 mg | 1 | |
| TOPAMAX ORAL TABLET 100 MG, 200 MG, 25 MG, 50 MG | E | |
| TOPAMAX SPRINKLE ORAL CAPSULE SPRINKLE 15 MG, 25 MG | E | |
| topiramate er oral capsule er 24 hour sprinkle 100 mg, 150 mg, 200 mg, 25 mg, 50 mg | 1 | |
| topiramate er oral capsule extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg | 1 | ST |
| topiramate oral capsule sprinkle 15 mg, 25 mg, 50 mg | 1 | |
| topiramate oral solution 25 mg/ml | 1 | |
| topiramate oral tablet 100 mg, 200 mg, 25 mg, 50 mg | 1 | |
| TRILEPTAL ORAL SUSPENSION 300 MG/5ML | E | |
| TRILEPTAL ORAL TABLET 150 MG, 300 MG, 600 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TROKENDI XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG | E | |
| valproate sodium intravenous solution 100 mg/ml, 500 mg/5ml | 1 | |
| valproic acid oral capsule 250 mg | 1 | |
| valproic acid oral solution 250 mg/5ml, 500 mg/10ml | 1 | |
| VALTOCO 10 MG DOSE NASAL LIQUID 10 MG/0.1ML | 3 | QL (0.34 EA per 1 day) |
| VALTOCO 15 MG DOSE NASAL LIQUID THERAPY PACK 2 X 7.5 MG/0.1ML | 3 | QL (0.67 EA per 1 day) |
| VALTOCO 20 MG DOSE NASAL LIQUID THERAPY PACK 2 X 10 MG/0.1ML | 3 | QL (0.67 EA per 1 day) |
| VALTOCO 5 MG DOSE NASAL LIQUID 5 MG/0.1ML | 3 | QL (0.34 EA per 1 day) |
| vigabatrin oral packet 500 mg | 4 | PA; SP |
| vigabatrin oral tablet 500 mg | 4 | PA; SP |
| VIGADRONE ORAL PACKET 500 MG | E | |
| VIGADRONE ORAL TABLET 500 MG | E | |
| VIGAFYDE ORAL SOLUTION 100 MG/ML | 4 | PA; SP |
| VIMPAT INTRAVENOUS SOLUTION 200 MG/20ML | E | |
| VIMPAT ORAL SOLUTION 10 MG/ML | E | |
| VIMPAT ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG | E | |
| XCOPRI ORAL TABLET 100 MG, 150 MG, 200 MG, 25 MG, 50 MG | 3 | ST |
| XCOPRI ORAL TABLET THERAPY PACK 100 & 150 MG, 14 X 12.5 MG & 14 X 25 MG, 14 X 150 MG & 14 X200 MG, 14 X 50 MG & 14 X100 MG, 150 & 200 MG | 3 | ST |
| ZARONTIN ORAL CAPSULE 250 MG | 3 | |
| ZARONTIN ORAL SOLUTION 250 MG/5ML | 3 | |
| ZONEGRAN ORAL CAPSULE 100 MG, 25 MG | E | |
| ZONISADE ORAL SUSPENSION 100 MG/5ML | E | |
| zonisamide oral capsule 100 mg, 25 mg, 50 mg | 1 | |
| ZTALMY ORAL SUSPENSION 50 MG/ML | 4 | PA; SP |
| **Antidementia Agents - Drugs for Alzheimer's Disease and Dementia** | | |
| donepezil hcl oral tablet 10 mg, 23 mg, 5 mg | 1 | |
| donepezil hcl oral tablet dispersible 10 mg, 5 mg | 1 | |
| galantamine hydrobromide er oral capsule extended release 24 hour 16 mg, 24 mg, 8 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| galantamine hydrobromide oral solution 4 mg/ml | 1 | |
| galantamine hydrobromide oral tablet 12 mg, 4 mg, 8 mg | 1 | |
| KISUNLA INTRAVENOUS SOLUTION 350 MG/20ML | E | |
| LEQEMBI INTRAVENOUS SOLUTION 200 MG/2ML, 500 MG/5ML | E | |
| LEQEMBI IQLIK (500 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 2 X 250 MG/1.25ML | E | |
| LEQEMBI IQLIK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 360 MG/1.8ML | E | |
| memantine hcl er oral capsule extended release 24 hour 14 mg, 21 mg, 28 mg, 7 mg | 1 | QL (1 EA per 1 day) |
| memantine hcl oral solution 10 mg/5ml, 2 mg/ml | 1 | |
| memantine hcl oral tablet 10 mg, 28 x 5 mg & 21 x 10 mg, 5 mg | 1 | |
| memantine hcl-donepezil hcl er oral capsule extended release 24 hour 14-10 mg, 21-10 mg, 28-10 mg | 1 | QL (1 EA per 1 day) |
| NAMZARIC ORAL CAPSULE EXTENDED RELEASE 24 HOUR 14-10 MG, 21-10 MG, 28-10 MG, 7-10 MG | E | |
| rivastigmine tartrate oral capsule 1.5 mg, 3 mg, 4.5 mg, 6 mg | 1 | |
| ZUNVEYL ORAL TABLET DELAYED RELEASE 10 MG, 15 MG, 5 MG | E | |
| **Antidepressants** | | |
| amitriptyline hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg | 1 | |
| amoxapine oral tablet 100 mg, 150 mg, 25 mg, 50 mg | 1 | |
| APLENZIN ORAL TABLET EXTENDED RELEASE 24 HOUR 174 MG, 348 MG, 522 MG | E | |
| AUVELITY ORAL TABLET EXTENDED RELEASE 30-105 MG | 3 | |
| AUVELITY ORAL TABLET EXTENDED RELEASE 45-105 MG | 3 | ST; QL (2 EA per 1 day) |
| AUVELITY TITRATION PACK ORAL TABLET EXTENDED RELEASE THERAPY PACK 30-105 MG & 45-105 MG | 3 | ST; QL (2 EA per 250 days) |
| bupropion hcl er (sr) oral tablet extended release 12 hour 100 mg, 150 mg, 200 mg | 1 | QL (2 EA per 1 day) |
| bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg | 1 | QL (3 EA per 1 day) |
| bupropion hcl er (xl) oral tablet extended release 24 hour 300 mg | 1 | QL (1 EA per 1 day) |
| BUPROPION HCL ER (XL) ORAL TABLET EXTENDED RELEASE 24 HOUR 450 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| bupropion hcl oral tablet 100 mg, 75 mg | 1 | |
| CELEXA ORAL TABLET 10 MG, 20 MG, 40 MG | E | |
| chlordiazepoxide-amitriptyline oral tablet 10-25 mg, 5-12.5 mg | 1 | |
| citalopram hydrobromide oral solution 10 mg/5ml, 20 mg/10ml | 1 | |
| citalopram hydrobromide oral tablet 10 mg, 20 mg, 40 mg | 1 | |
| clomipramine hcl oral capsule 25 mg, 50 mg, 75 mg | 1 | |
| desipramine hcl oral tablet 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg | 1 | |
| DESVENLAFAXINE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 50 MG | 3 | ST; QL (1 EA per 1 day) |
| desvenlafaxine succinate er oral tablet extended release 24 hour 100 mg, 25 mg, 50 mg | 1 | QL (1 EA per 1 day) |
| doxepin hcl oral capsule 10 mg, 100 mg, 150 mg, 25 mg, 50 mg, 75 mg | 1 | |
| doxepin hcl oral concentrate 10 mg/ml | 1 | |
| duloxetine hcl oral capsule delayed release particles 120 mg, 80 mg, 90 mg | 1 | QL (1 EA per 1 day) |
| duloxetine hcl oral capsule delayed release particles 20 mg, 40 mg, 60 mg | 1 | QL (2 EA per 1 day) |
| duloxetine hcl oral capsule delayed release particles 30 mg | 1 | QL (3 EA per 1 day) |
| EFFEXOR XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 150 MG, 37.5 MG, 75 MG | E | |
| EMSAM TRANSDERMAL PATCH 24 HOUR 12 MG/24HR, 6 MG/24HR, 9 MG/24HR | 3 | QL (1 EA per 1 day) |
| ESCITALOPRAM OXALATE ORAL CAPSULE 15 MG | E | |
| escitalopram oxalate oral solution 5 mg/5ml | 1 | |
| escitalopram oxalate oral tablet 10 mg, 20 mg, 5 mg | 1 | |
| EXXUA ORAL TABLET EXTENDED RELEASE 24 HOUR 18.2 MG, 36.3 MG, 54.5 MG, 72.6 MG | E | |
| EXXUA TITRATION PACK ORAL TABLET EXTENDED RELEASE 24 HOUR 18.2 MG | E | |
| FETZIMA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 20 MG, 40 MG, 80 MG | 3 | ST; QL (1 EA per 1 day) |
| FETZIMA TITRATION ORAL CAPSULE ER 24 HOUR THERAPY PACK 20 & 40 MG | 3 | ST; QL (56 EA per 365 days) |
| fluoxetine hcl oral capsule 10 mg, 20 mg, 40 mg | 1 | |
| fluoxetine hcl oral capsule delayed release 90 mg | 1 | QL (0.15 EA per 1 day) |
| fluoxetine hcl oral solution 20 mg/5ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| fluoxetine hcl oral tablet 10 mg, 60 mg | 1 | |
| fluvoxamine maleate er oral capsule extended release 24 hour 100 mg, 150 mg | 1 | QL (2 EA per 1 day) |
| fluvoxamine maleate oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| imipramine hcl oral tablet 10 mg, 25 mg, 50 mg | 1 | |
| imipramine pamoate oral capsule 100 mg, 125 mg, 150 mg, 75 mg | 1 | |
| LEXAPRO ORAL TABLET 10 MG, 20 MG, 5 MG | E | |
| MARPLAN ORAL TABLET 10 MG | 3 | |
| mirtazapine oral tablet 15 mg, 30 mg, 45 mg, 7.5 mg | 1 | |
| mirtazapine oral tablet dispersible 15 mg, 30 mg, 45 mg | 1 | |
| nefazodone hcl oral tablet 100 mg, 150 mg, 200 mg, 250 mg, 50 mg | 1 | |
| nortriptyline hcl oral capsule 10 mg, 25 mg, 50 mg, 75 mg | 1 | |
| nortriptyline hcl oral solution 10 mg/5ml | 1 | |
| olanzapine-fluoxetine hcl oral capsule 12-25 mg, 12-50 mg, 6-50 mg | 1 | QL (1 EA per 1 day) |
| olanzapine-fluoxetine hcl oral capsule 3-25 mg, 6-25 mg | 1 | QL (3 EA per 1 day) |
| paroxetine hcl er oral tablet extended release 24 hour 12.5 mg, 25 mg, 37.5 mg | 1 | |
| paroxetine hcl oral suspension 10 mg/5ml | 1 | |
| paroxetine hcl oral tablet 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| PAXIL CR ORAL TABLET EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG | E | |
| PAXIL ORAL TABLET 10 MG, 20 MG, 30 MG, 40 MG | E | |
| perphenazine-amitriptyline oral tablet 2-10 mg, 2-25 mg, 4-10 mg, 4-25 mg, 4-50 mg | 1 | |
| phenelzine sulfate oral tablet 15 mg | 1 | |
| PRISTIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 25 MG, 50 MG | E | |
| protriptyline hcl oral tablet 10 mg, 5 mg | 1 | |
| RALDESY ORAL SOLUTION 10 MG/ML | 3 | PA |
| REMERON SOLTAB ORAL TABLET DISPERSIBLE 15 MG, 30 MG, 45 MG | 3 | |
| sertraline hcl oral concentrate 20 mg/ml | 1 | |
| sertraline hcl oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| SPRAVATO (56 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE | 4 | PA; SP |
| SPRAVATO (84 MG DOSE) NASAL SOLUTION THERAPY PACK 28 MG/DEVICE | 4 | PA; SP |
| tranylcypromine sulfate oral tablet 10 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| trazodone hcl oral tablet 100 mg, 150 mg, 25 mg, 300 mg, 50 mg, 75 mg | 1 | |
| trimipramine maleate oral capsule 100 mg, 25 mg, 50 mg | 1 | |
| TRINTELLIX ORAL TABLET 10 MG, 20 MG, 5 MG | 3 | ST; QL (1 EA per 1 day) |
| VENLAFAXINE BESYLATE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 112.5 MG | E | |
| venlafaxine hcl er oral capsule extended release 24 hour 150 mg | 1 | QL (2 EA per 1 day) |
| venlafaxine hcl er oral capsule extended release 24 hour 37.5 mg | 1 | QL (1 EA per 1 day) |
| venlafaxine hcl er oral capsule extended release 24 hour 75 mg | 1 | QL (3 EA per 1 day) |
| venlafaxine hcl er oral tablet extended release 24 hour 225 mg | 1 | |
| venlafaxine hcl oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg | 1 | |
| VIIBRYD ORAL TABLET 10 MG, 20 MG, 40 MG | E | |
| vilazodone hcl oral tablet 10 mg, 20 mg, 40 mg | 1 | QL (1 EA per 1 day) |
| WELLBUTRIN SR ORAL TABLET EXTENDED RELEASE 12 HOUR 100 MG, 150 MG, 200 MG | E | |
| WELLBUTRIN XL ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 300 MG | E | |
| ZOLOFT ORAL CONCENTRATE 20 MG/ML | E | |
| ZOLOFT ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| ZURZUVAE ORAL CAPSULE 20 MG, 25 MG, 30 MG | 3 | PA; QL (14 day supply per 1 fill) |
| **Antiemetics - Drugs for Nausea and Vomiting** | | |
| AKYNZEO (READY-TO-USE) INTRAVENOUS SOLUTION 235-0.25 MG/20ML | 3 | |
| AKYNZEO (TO-BE-DILUTED) INTRAVENOUS SOLUTION 235-0.25 MG/20ML | 3 | |
| AKYNZEO ORAL CAPSULE 300-0.5 MG | 3 | QL (0.07 EA per 1 day) |
| APONVIE INTRAVENOUS EMULSION 32 MG/4.4ML | 3 | |
| aprepitant oral capsule 125 mg | 1 | QL (6 EA per 30 days) |
| aprepitant oral capsule 40 mg | 1 | QL (1 EA per 30 days) |
| aprepitant oral capsule 80 mg | 1 | QL (4 EA per 30 days) |
| aprepitant oral capsule therapy pack 80 & 125 mg | 1 | QL (6 EA per 30 days) |
| BARHEMSYS INTRAVENOUS SOLUTION 10 MG/4ML, 5 MG/2ML | 3 | |
| BONJESTA ORAL TABLET EXTENDED RELEASE 20-20 MG | 3 | PA; QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CINVANTI INTRAVENOUS EMULSION 130 MG/18ML | 3 | |
| COMPRO RECTAL SUPPOSITORY 25 MG | 3 | |
| DICLEGIS ORAL TABLET DELAYED RELEASE 10-10 MG | 3 | PA; QL (4 EA per 1 day) |
| dimenhydrinate injection solution 50 mg/ml | 1 | |
| doxylamine-pyridoxine oral tablet delayed release 10-10 mg | 1 | PA; QL (4 EA per 1 day) |
| dronabinol oral capsule 10 mg, 2.5 mg, 5 mg | 1 | PA; QL (2 EA per 1 day) |
| droperidol injection solution 2.5 mg/ml | 1 | |
| EMEND INTRAVENOUS SOLUTION RECONSTITUTED 150 MG | 3 | |
| EMEND ORAL SUSPENSION RECONSTITUTED 125 MG/5ML | 3 | QL (0.2 EA per 1 day) |
| FOCINVEZ INTRAVENOUS SOLUTION 150 MG/50ML | 3 | |
| fosaprepitant dimeglumine intravenous solution reconstituted 150 mg | 1 | |
| GIMOTI NASAL SOLUTION 15 MG/ACT | E | |
| granisetron hcl intravenous solution 1 mg/ml, 4 mg/4ml | 1 | |
| granisetron hcl oral tablet 1 mg | 1 | QL (0.14 EA per 1 day) |
| meclizine hcl oral tablet 12.5 mg, 25 mg, 50 mg | 1 | |
| meclizine hcl oral tablet chewable 25 mg | 1 | |
| metoclopramide hcl +rfid injection solution 5 mg/ml | 1 | |
| metoclopramide hcl injection solution 5 mg/ml | 1 | |
| metoclopramide hcl oral solution 10 mg/10ml, 5 mg/5ml | 1 | |
| metoclopramide hcl oral tablet 10 mg, 5 mg | 1 | |
| NEREUS ORAL CAPSULE 85 MG | E | |
| ondansetron hcl +rfid injection solution 4 mg/2ml | 1 | |
| ondansetron hcl +rfid injection solution prefilled syringe 4 mg/2ml | 1 | |
| ondansetron hcl injection solution 4 mg/2ml, 40 mg/20ml | 1 | |
| ondansetron hcl injection solution prefilled syringe 4 mg/2ml | 1 | |
| ondansetron hcl oral solution 4 mg/5ml | 1 | QL (8 ML per 1 day) |
| ondansetron hcl oral tablet 4 mg, 8 mg | 1 | |
| ondansetron odt oral tablet dispersible 4 mg, 8 mg | 1 | |
| palonosetron hcl intravenous solution 0.25 mg/5ml | 1 | |
| palonosetron hcl intravenous solution prefilled syringe 0.25 mg/5ml | 1 | |
| perphenazine oral tablet 16 mg, 2 mg, 4 mg, 8 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PHENERGAN INJECTION SOLUTION 25 MG/ML, 50 MG/ML | 3 | |
| prochlorperazine edisylate injection solution 10 mg/2ml | 1 | |
| prochlorperazine maleate oral tablet 10 mg, 5 mg | 1 | |
| prochlorperazine rectal suppository 25 mg | 1 | |
| promethazine hcl injection solution 25 mg/ml, 50 mg/ml | 1 | |
| promethazine hcl oral solution 12.5 mg/10ml, 6.25 mg/5ml | 1 | |
| promethazine hcl oral tablet 12.5 mg, 25 mg, 50 mg | 1 | |
| promethazine hcl rectal suppository 12.5 mg, 25 mg | 1 | |
| PROMETHEGAN RECTAL SUPPOSITORY 50 MG | 3 | |
| SANCUSO TRANSDERMAL PATCH 3.1 MG/24HR | E | |
| scopolamine transdermal patch 72 hour 1 mg/3days | 1 | |
| SUSTOL SUBCUTANEOUS PREFILLED SYRINGE 10 MG/0.4ML | 3 | QL (0.03 ML per 1 day) |
| SYNDROS ORAL SOLUTION 5 MG/ML | 3 | PA; QL (4 ML per 1 day) |
| TIGAN INTRAMUSCULAR SOLUTION 100 MG/ML | 3 | |
| TRANSDERM SCOP TRANSDERMAL PATCH 72 HOUR 1 MG/3DAYS | 3 | |
| trimethobenzamide hcl intramuscular solution 100 mg/ml | 1 | |
| trimethobenzamide hcl oral capsule 300 mg | 1 | |
| VARUBI (180 MG DOSE) ORAL TABLET THERAPY PACK 2 X 90 MG | 3 | QL (0.15 EA per 1 day) |
| **Antifungals** | | |
| AMBISOME INTRAVENOUS SUSPENSION RECONSTITUTED 50 MG | 3 | |
| amphotericin b intravenous solution reconstituted 50 mg | 1 | |
| amphotericin b liposome intravenous suspension reconstituted 50 mg | 1 | |
| ANCOBON ORAL CAPSULE 250 MG, 500 MG | 3 | |
| caspofungin acetate intravenous solution reconstituted 50 mg, 70 mg | 1 | |
| ciclodan external solution 8 % | 1 | |
| ciclopirox external gel 0.77 % | 1 | |
| ciclopirox external shampoo 1 % | 1 | |
| ciclopirox external solution 8 % | 1 | |
| ciclopirox olamine external cream 0.77 % | 1 | |
| ciclopirox olamine external suspension 0.77 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| clotrimazole external cream 1 % | 1 | |
| clotrimazole external solution 1 % | 1 | |
| clotrimazole mouth/throat troche 10 mg | 1 | |
| clotrimazole-betamethasone external cream 1-0.05 % | 1 | |
| clotrimazole-betamethasone external lotion 1-0.05 % | 1 | |
| CRESEMBA INTRAVENOUS SOLUTION RECONSTITUTED 372 MG | 3 | |
| CRESEMBA ORAL CAPSULE 186 MG, 74.5 MG | 3 | PA |
| DIFLUCAN ORAL SUSPENSION RECONSTITUTED 40 MG/ML | 3 | |
| econazole nitrate external cream 1 % | 1 | |
| ECONAZOLE NITRATE EXTERNAL FOAM 1 % | E | |
| ERAXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 50 MG | 3 | |
| EXODERM EXTERNAL LOTION 25-1 % | 3 | |
| fluconazole in sodium chloride intravenous solution 200-0.9 mg/100ml-%, 400-0.9 mg/200ml-% | 1 | |
| fluconazole oral suspension reconstituted 10 mg/ml, 40 mg/ml | 1 | |
| fluconazole oral tablet 100 mg, 150 mg, 200 mg, 50 mg | 1 | |
| flucytosine oral capsule 250 mg, 500 mg | 1 | |
| griseofulvin microsize oral suspension 125 mg/5ml | 1 | |
| griseofulvin microsize oral tablet 500 mg | 1 | |
| griseofulvin ultramicrosize oral tablet 125 mg, 250 mg | 1 | |
| GYNAZOLE-1 VAGINAL CREAM 2 % | 3 | |
| itraconazole oral capsule 100 mg | 1 | PA |
| itraconazole oral solution 10 mg/ml | 1 | PA |
| JUBLIA EXTERNAL SOLUTION 10 % | E | |
| ketoconazole external cream 2 % | 1 | |
| ketoconazole external shampoo 2 % | 1 | |
| ketoconazole oral tablet 200 mg | 1 | |
| klayesta external powder 100000 unit/gm | 1 | |
| micafungin sodium intravenous solution reconstituted 100 mg, 50 mg | 1 | |
| MICAFUNGIN SODIUM-NACL INTRAVENOUS SOLUTION 100-0.9 MG/100ML-%, 150-0.9 MG/150ML-%, 50-0.9 MG/50ML-% | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| miconazole 3 vaginal suppository 200 mg | 1 | |
| NOXAFIL ORAL PACKET 300 MG | 3 | PA |
| nystatin external cream 100000 unit/gm | 1 | |
| nystatin external ointment 100000 unit/gm | 1 | |
| nystatin external powder 100000 unit/gm | 1 | |
| nystatin mouth/throat suspension 100000 unit/ml, 500000 unit/5ml | 1 | |
| nystatin oral tablet 500000 unit | 1 | |
| nystatin-triamcinolone external cream 100000-0.1 unit/gm-% | 1 | |
| nystatin-triamcinolone external ointment 100000-0.1 unit/gm-% | 1 | |
| nystop external powder 100000 unit/gm | 1 | |
| posaconazole intravenous solution 300 mg/16.7ml | 1 | |
| posaconazole oral suspension 40 mg/ml | 1 | PA |
| posaconazole oral tablet delayed release 100 mg | 1 | PA |
| SPORANOX ORAL CAPSULE 100 MG | 3 | PA |
| tavaborole external solution 5 % | 1 | PA |
| terbinafine hcl oral tablet 250 mg | 1 | QL (84 day supply per 180 days) |
| terconazole vaginal cream 0.4 %, 0.8 % | 1 | |
| terconazole vaginal suppository 80 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TOLSURA ORAL CAPSULE 65 MG | E | |
| VFEND IV INTRAVENOUS SOLUTION RECONSTITUTED 200 MG | 3 | |
| VFEND ORAL SUSPENSION RECONSTITUTED 40 MG/ML | 3 | PA |
| VIVJOA ORAL CAPSULE THERAPY PACK 150 MG | E | |
| voriconazole intravenous solution 200 mg/20ml | 1 | |
| voriconazole intravenous solution reconstituted 200 mg | 1 | |
| voriconazole oral suspension reconstituted 40 mg/ml | 1 | PA |
| voriconazole oral tablet 200 mg, 50 mg | 1 | PA |
| **Antigout Agents** | | |
| allopurinol oral tablet 100 mg, 300 mg | 1 | |
| allopurinol sodium intravenous solution reconstituted 500 mg | 1 | |
| ALOPRIM INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 3 | |
| colchicine oral capsule 0.6 mg | 1 | |
| colchicine oral tablet 0.6 mg | 1 | |
| colchicine-probenecid oral tablet 0.5-500 mg | 1 | |
| febuxostat oral tablet 40 mg, 80 mg | 1 | ST |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| GLOPERBA ORAL SOLUTION 0.6 MG/5ML | E | |
| MITIGARE ORAL CAPSULE 0.6 MG | E | |
| probenecid oral tablet 500 mg | 1 | |
| **Antimigraine Agents** | | |
| AIMOVIG SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML | 2 | PA; QL (0.04 ML per 1 day) |
| AIMOVIG | 2 | PA; QL (0.07 ML per 1 day) |
| AJOVY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 225 MG/1.5ML | E | |
| AJOVY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 225 MG/1.5ML | E | |
| BREKIYA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1 MG/ML | E | |
| CAMBIA ORAL PACKET 50 MG | E | |
| dihydroergotamine mesylate injection solution 1 mg/ml | 1 | PA; QL (0.86 ML per 1 day) |
| dihydroergotamine mesylate nasal solution 4 mg/ml | 1 | PA; QL (0.27 ML per 1 day) |
| eletriptan hydrobromide oral tablet 20 mg, 40 mg | 1 | QL (12 EA per 30 days) |
| EMGALITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/ML | 2 | PA; QL (0.04 ML per 1 day) |
| EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML | 2 | PA; QL (0.11 ML per 1 day) |
| EMGALITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML | 2 | PA; QL (0.04 ML per 1 day) |
| ERGOMAR SUBLINGUAL TABLET SUBLINGUAL 2 MG | 3 | PA; QL (0.72 EA per 1 day) |
| ergotamine-caffeine oral tablet 1-100 mg | 1 | PA; QL (1.43 EA per 1 day) |
| IMITREX ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| IMITREX STATDOSE REFILL SUBCUTANEOUS SOLUTION CARTRIDGE 4 MG/0.5ML, 6 MG/0.5ML | E | |
| IMITREX STATDOSE SYSTEM SUBCUTANEOUS SOLUTION AUTO-INJECTOR 4 MG/0.5ML, 6 MG/0.5ML | E | |
| MAXALT ORAL TABLET 10 MG | E | |
| MAXALT-MLT ORAL TABLET DISPERSIBLE 10 MG | E | |
| MIGERGOT RECTAL SUPPOSITORY 2-100 MG | 3 | PA; QL (0.72 EA per 1 day) |
| naratriptan hcl oral tablet 1 mg, 2.5 mg | 1 | QL (0.3 EA per 1 day) |
| NURTEC ORAL TABLET DISPERSIBLE 75 MG | 2 | PA; QL (0.54 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ONZETRA XSAIL NASAL EXHALER POWDER 11 MG/NOSEPC | E | |
| QULIPTA ORAL TABLET 10 MG, 30 MG, 60 MG | 2 | PA; QL (1 EA per 1 day) |
| RELPAX ORAL TABLET 20 MG, 40 MG | E | |
| rizatriptan benzoate oral tablet 10 mg | 1 | QL (0.4 EA per 1 day) |
| rizatriptan benzoate oral tablet 5 mg | 1 | QL (0.6 EA per 1 day) |
| rizatriptan benzoate oral tablet dispersible 10 mg | 1 | QL (0.4 EA per 1 day) |
| rizatriptan benzoate oral tablet dispersible 5 mg | 1 | QL (0.6 EA per 1 day) |
| sumatriptan nasal solution 20 mg/act, 5 mg/act | 1 | QL (0.4 EA per 1 day) |
| sumatriptan succinate oral tablet 100 mg, 25 mg, 50 mg | 1 | QL (0.3 EA per 1 day) |
| sumatriptan succinate subcutaneous solution 6 mg/0.5ml | 1 | QL (0.17 ML per 1 day) |
| sumatriptan succinate subcutaneous solution auto-injector 6 mg/0.5ml | 1 | QL (0.17 ML per 1 day) |
| SYMBRAVO ORAL TABLET 20-10 MG | E | |
| TOSYMRA NASAL SOLUTION 10 MG/ACT | E | |
| TREXIMET ORAL TABLET 85-500 MG | E | |
| TRUDHESA NASAL AEROSOL SOLUTION 0.725 MG/ACT | E | |
| UBRELVY ORAL TABLET 100 MG, 50 MG | 2 | PA; QL (0.54 EA per 1 day) |
| ZAVZPRET NASAL SOLUTION 10 MG/ACT | 3 | PA; QL (0.2 EA per 1 day) |
| ZEMBRACE SYMTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 3 MG/0.5ML | E | |
| zolmitriptan nasal solution 5 mg | 1 | QL (0.4 EA per 1 day) |
| zolmitriptan oral tablet 2.5 mg, 5 mg | 1 | QL (0.4 EA per 1 day) |
| zolmitriptan oral tablet dispersible 2.5 mg, 5 mg | 1 | QL (0.4 EA per 1 day) |
| ZOMIG ORAL TABLET 2.5 MG, 5 MG | E | |
| **Antimyasthenic Agents** | | |
| pyridostigmine bromide er oral tablet extended release 180 mg | 1 | |
| pyridostigmine bromide oral solution 60 mg/5ml | 1 | |
| pyridostigmine bromide oral tablet 30 mg, 60 mg | 1 | |
| REGONOL INTRAVENOUS SOLUTION 10 MG/2ML | 3 | |
| VYVGART HYTRULO SUBCUTANEOUS SOLUTION 180-2000 MG-UNIT/ML | 4 | PA; SP |
| VYVGART HYTRULO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1000-10000 MG-UNT/5ML | 4 | PA; SP; QL (0.8 ML per 1 day) |
| VYVGART INTRAVENOUS SOLUTION 400 MG/20ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Antimycobacterials** | | |
| cycloserine oral capsule 250 mg | 1 | |
| dapsone oral tablet 100 mg, 25 mg | 1 | |
| ethambutol hcl oral tablet 100 mg, 400 mg | 1 | |
| isoniazid injection solution 100 mg/ml | 1 | |
| isoniazid oral syrup 50 mg/5ml | 1 | |
| isoniazid oral tablet 100 mg, 300 mg | 1 | |
| PRETOMANID ORAL TABLET 200 MG | 3 | |
| PRIFTIN ORAL TABLET 150 MG | 3 | |
| pyrazinamide oral tablet 500 mg | 1 | |
| rifabutin oral capsule 150 mg | 1 | |
| rifampin intravenous solution reconstituted 600 mg | 1 | |
| rifampin oral capsule 150 mg, 300 mg | 1 | |
| rifapentine oral tablet 150 mg | 1 | |
| SIRTURO ORAL TABLET 100 MG, 20 MG | 3 | |
| **Antineoplastics - Drugs for Cancer** | | |
| abiraterone acetate oral tablet 250 mg | 4 | PA; SP |
| abirtega oral tablet 250 mg | 4 | PA; SP |
| ABRAXANE INTRAVENOUS SUSPENSION RECONSTITUTED 100 MG | 4 | SP |
| ADCETRIS INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 4 | PA; SP |
| adriamycin intravenous solution reconstituted 50 mg | 4 | SP |
| AFINITOR DISPERZ ORAL TABLET SOLUBLE 2 MG, 3 MG, 5 MG | E | |
| AFINITOR ORAL TABLET 10 MG, 2.5 MG, 5 MG, 7.5 MG | E | |
| AKEEGA ORAL TABLET 100-500 MG, 50-500 MG | E | |
| ALECENSA ORAL CAPSULE 150 MG | 4 | PA; SP |
| ALUNBRIG ORAL TABLET 180 MG, 90 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| ALUNBRIG ORAL TABLET 30 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| ALUNBRIG ORAL TABLET THERAPY PACK 90 & 180 MG | 4 | PA; SP; QL (30 EA per 365 days) |
| ALYMSYS INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | E | |
| anastrozole oral tablet 1 mg | 1 | ACA |
| ANKTIVA INTRAVESICAL SOLUTION 400 MCG/0.4ML | 4 | PA; SP |
| ARIMIDEX ORAL TABLET 1 MG | E | |
| ARRANON INTRAVENOUS SOLUTION 5 MG/ML | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| arsenic trioxide intravenous solution 10 mg/10ml, 12 mg/6ml | 4 | SP |
| ASPARLAS INTRAVENOUS SOLUTION 3750 UNIT/5ML | 4 | SP |
| AUGTYRO ORAL CAPSULE 160 MG, 40 MG | 4 | PA; SP |
| AVASTIN INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | 4 | PA; SP |
| AVGEMSI INTRAVENOUS SOLUTION 1 GM/26.3ML, 2 GM/52.6ML | E | |
| AVMAPKI FAKZYNJA CO-PACK ORAL THERAPY PACK 0.8 & 200 MG | 4 | PA; SP |
| AVOPEF INTRAVENOUS SOLUTION 100 MG/5ML, 500 MG/25ML | E | |
| AXTLE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 500 MG | 4 | SP |
| AYVAKIT ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| azacitidine injection suspension reconstituted 100 mg | 4 | SP |
| BALVERSA ORAL TABLET 3 MG, 4 MG, 5 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BAVENCIO INTRAVENOUS SOLUTION 200 MG/10ML | 4 | PA; SP |
| BEIZRAY INTRAVENOUS CONCENTRATE 20 MG/ML | E | |
| BEIZRAY INTRAVENOUS SOLUTION 2 X 80 MG/4ML & 25%(50 ML), 80 MG/4ML & 25%(50 ML) | E | |
| BELEODAQ INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 4 | PA; SP |
| BELRAPZO INTRAVENOUS SOLUTION 100 MG/4ML | E | |
| BENDAMUSTINE HCL INTRAVENOUS SOLUTION 100 MG/4ML | E | |
| bendamustine hcl intravenous solution reconstituted 100 mg, 25 mg | 4 | PA; SP |
| BENDEKA INTRAVENOUS SOLUTION 100 MG/4ML | 4 | PA; SP |
| BESPONSA INTRAVENOUS SOLUTION RECONSTITUTED 0.9 MG | 4 | PA; SP |
| BESREMI PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 MCG/0.5ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BESREMI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 500 MCG/ML | 4 | PA; SP |
| bexarotene external gel 1 % | 4 | PA; SP |
| bexarotene oral capsule 75 mg | 4 | PA; SP |
| bicalutamide oral tablet 50 mg | 1 | |
| BIZENGRI (750 MG DOSE) INTRAVENOUS SOLUTION THERAPY PACK 375 MG/18.75ML | 4 | PA; SP |
| BLENREP INTRAVENOUS SOLUTION RECONSTITUTED 70 MG | E | |
| bleomycin sulfate injection solution reconstituted 15 unit, 30 unit | 4 | SP |
| BLINCYTO INTRAVENOUS SOLUTION RECONSTITUTED 35 MCG | 4 | PA; SP |
| bortezomib injection solution reconstituted 1 mg, 2.5 mg, 3.5 mg | 4 | PA; SP |
| BORUZU INJECTION SOLUTION 3.5 MG/1.4ML | 4 | PA; SP |
| BOSULIF ORAL CAPSULE 100 MG, 50 MG | 4 | PA; SP |
| BOSULIF ORAL TABLET 100 MG, 400 MG, 500 MG | 4 | PA; SP |
| bosutinib oral tablet 100 mg, 400 mg, 500 mg | 4 | PA; SP |
| BRAFTOVI ORAL CAPSULE 75 MG | 4 | PA; SP |
| BRUKINSA ORAL CAPSULE 80 MG | 4 | PA; SP |
| BRUKINSA ORAL TABLET 160 MG | 4 | PA; SP |
| busulfan intravenous solution 6 mg/ml | 4 | SP |
| BUSULFEX INTRAVENOUS SOLUTION 6 MG/ML | 4 | SP |
| CABOMETYX ORAL TABLET 20 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| CABOMETYX ORAL TABLET 40 MG, 60 MG | 4 | PA; SP |
| CALQUENCE ORAL TABLET 100 MG | 4 | PA; SP |
| CAMPTOSAR INTRAVENOUS SOLUTION 100 MG/5ML, 300 MG/15ML, 40 MG/2ML | 4 | SP |
| capecitabine oral tablet 150 mg, 500 mg | 4 | SP |
| CAPRELSA ORAL TABLET 100 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| CAPRELSA ORAL TABLET 300 MG | 4 | PA; SP |
| carboplatin intravenous solution 150 mg/15ml, 450 mg/45ml, 50 mg/5ml, 600 mg/60ml | 4 | SP |
| carmustine intravenous solution reconstituted 100 mg | 4 | SP |
| CASODEX ORAL TABLET 50 MG | 3 | |
| cisplatin intravenous solution 100 mg/100ml, 200 mg/200ml, 50 mg/50ml | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CISPLATIN INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 4 | SP |
| cladribine intravenous solution 10 mg/10ml | 4 | SP |
| clofarabine intravenous solution 1 mg/ml | 4 | SP |
| COLUMVI INTRAVENOUS SOLUTION 10 MG/10ML, 2.5 MG/2.5ML | 4 | PA; SP |
| COMETRIQ ORAL KIT 20 MG, 3 X 20 MG & 80 MG, 80 & 20 MG | 4 | PA; SP |
| COPIKTRA ORAL CAPSULE 15 MG, 25 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| COSELA INTRAVENOUS SOLUTION RECONSTITUTED 300 MG | E | |
| COTELLIC ORAL TABLET 20 MG | 4 | PA; SP |
| cyclophosphamide injection solution reconstituted 1 gm, 2 gm, 500 mg | 4 | SP |
| CYCLOPHOSPHAMIDE INTRAVENOUS SOLUTION 1 GM/2ML, 1000 MG/10ML, 2 GM/10ML, 2 GM/4ML, 2000 MG/20ML, 500 MG/5ML, 500 MG/ML | 4 | SP |
| cyclophosphamide intravenous solution 1 gm/5ml, 500 mg/2.5ml | 4 | SP |
| cyclophosphamide oral capsule 25 mg, 50 mg | 1 | |
| CYCLOPHOSPHAMIDE ORAL TABLET 50 MG | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CYRAMZA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | 4 | PA; SP |
| cytarabine (pf) injection solution 100 mg/ml, 20 mg/ml | 4 | SP |
| cytarabine injection solution 20 mg/ml | 4 | SP |
| dacarbazine intravenous solution reconstituted 100 mg, 200 mg | 4 | SP |
| dactinomycin intravenous solution reconstituted 0.5 mg | 4 | SP |
| DANYELZA INTRAVENOUS SOLUTION 40 MG/10ML | 4 | PA; SP |
| DANZITEN ORAL TABLET 71 MG, 95 MG | 4 | PA; SP |
| DARZALEX FASPRO SUBCUTANEOUS SOLUTION 1800-30000 MG-UT/15ML | E | |
| DARZALEX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML | 4 | PA; SP |
| dasatinib oral tablet 100 mg, 140 mg, 20 mg, 50 mg, 70 mg, 80 mg | 4 | PA; SP |
| DATROWAY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP |
| daunorubicin hcl intravenous solution 20 mg/4ml, 50 mg/10ml | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DAURISMO ORAL TABLET 100 MG, 25 MG | 4 | PA; SP |
| decitabine intravenous solution reconstituted 50 mg | 4 | SP |
| dexrazoxane hcl intravenous solution reconstituted 250 mg, 500 mg | 4 | SP |
| docetaxel intravenous concentrate 160 mg/8ml, 20 mg/ml, 80 mg/4ml | 4 | SP |
| docetaxel intravenous solution 160 mg/16ml, 20 mg/2ml, 80 mg/8ml | 4 | SP |
| DOCIVYX INTRAVENOUS SOLUTION 160 MG/16ML, 20 MG/2ML, 80 MG/8ML | 4 | SP |
| DOXIL INTRAVENOUS SUSPENSION 2 MG/ML | 4 | SP |
| doxorubicin hcl intravenous solution 2 mg/ml | 4 | SP |
| doxorubicin hcl intravenous solution reconstituted 10 mg, 50 mg | 4 | SP |
| doxorubicin hcl liposomal intravenous suspension 2 mg/ml | 4 | SP |
| DROXIA ORAL CAPSULE 200 MG, 300 MG, 400 MG | 3 | |
| ELITEK INTRAVENOUS SOLUTION RECONSTITUTED 1.5 MG, 7.5 MG | 4 | SP |
| ELLENCE INTRAVENOUS SOLUTION 200 MG/100ML, 50 MG/25ML | 4 | SP |
| ELREXFIO SUBCUTANEOUS SOLUTION 44 MG/1.1ML, 76 MG/1.9ML | 4 | PA; SP |
| EMPLICITI INTRAVENOUS SOLUTION RECONSTITUTED 300 MG, 400 MG | 4 | PA; SP |
| EMRELIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 20 MG | 4 | PA; SP |
| ENHERTU INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP |
| ENSACOVE ORAL CAPSULE 100 MG, 25 MG | 4 | PA; SP |
| EPKINLY SUBCUTANEOUS SOLUTION 4 MG/0.8ML, 48 MG/0.8ML | 4 | PA; SP |
| ERBITUX INTRAVENOUS SOLUTION 100 MG/50ML, 200 MG/100ML | 4 | PA; SP |
| eribulin mesylate intravenous solution 1 mg/2ml | 4 | PA; SP |
| ERIVEDGE ORAL CAPSULE 150 MG | 4 | PA; SP |
| ERLEADA ORAL TABLET 240 MG, 60 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| erlotinib hcl oral tablet 100 mg, 150 mg | 4 | PA; SP |
| erlotinib hcl oral tablet 25 mg | 4 | PA; SP; QL (3 EA per 1 day) |
| ETHYOL INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 3 | |
| ETOPOPHOS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | SP |
| etoposide intravenous solution 1 gm/50ml, 100 mg/5ml, 500 mg/25ml | 4 | SP |
| etoposide oral capsule 50 mg | 4 | SP |
| EULEXIN ORAL CAPSULE 125 MG | 3 | |
| EVDI INTRAVENOUS SOLUTION 1 MG/20ML | 4 | PA; SP |
| everolimus oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| everolimus oral tablet soluble 2 mg, 3 mg, 5 mg | 4 | PA; SP |
| EVOMELA INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 4 | SP |
| exemestane oral tablet 25 mg | 1 | ACA |
| FAVLYXA INTRAVENOUS SOLUTION 2.5 GM/100ML, 250 MG/10ML | E | |
| floxuridine injection solution reconstituted 0.5 gm | 4 | SP |
| fludarabine phosphate intravenous solution 50 mg/2ml | 4 | SP |
| fludarabine phosphate intravenous solution reconstituted 50 mg | 4 | SP |
| fluorouracil intravenous solution 1 gm/20ml, 2.5 gm/50ml, 5 gm/100ml, 500 mg/10ml | 4 | SP |
| FOLOTYN INTRAVENOUS SOLUTION 20 MG/ML, 40 MG/2ML | 4 | PA; SP |
| FOTIVDA ORAL CAPSULE 0.89 MG, 1.34 MG | E | |
| FRINDOVYX INTRAVENOUS SOLUTION 1 GM/2ML, 2 GM/4ML, 500 MG/ML | 4 | SP |
| FRUZAQLA ORAL CAPSULE 1 MG, 5 MG | 4 | PA; SP |
| fulvestrant intramuscular solution prefilled syringe 250 mg/5ml | 4 | SP |
| FYARRO INTRAVENOUS SUSPENSION RECONSTITUTED 100 MG | 4 | PA; SP |
| GAVRETO ORAL CAPSULE 100 MG | 4 | PA; SP |
| GAZYVA INTRAVENOUS SOLUTION 1000 MG/40ML | 4 | PA; SP |
| gefitinib oral tablet 250 mg | 4 | PA; SP |
| gemcitabine hcl intravenous solution 1 gm/26.3ml, 2 gm/52.6ml, 200 mg/5.26ml | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| gemcitabine hcl intravenous solution reconstituted 1 gm, 2 gm, 200 mg | 4 | SP |
| GILOTRIF ORAL TABLET 20 MG, 30 MG, 40 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| GLEEVEC ORAL TABLET 100 MG, 400 MG | E | |
| GOMEKLI ORAL CAPSULE 1 MG, 2 MG | 4 | PA; SP |
| GOMEKLI ORAL TABLET SOLUBLE 1 MG | 4 | PA; SP |
| GRAFAPEX INTRAVENOUS SOLUTION RECONSTITUTED 1 GM, 5 GM | 4 | SP |
| HALAVEN INTRAVENOUS SOLUTION 1 MG/2ML | 4 | PA; SP |
| HERCEPTIN HYLECTA SUBCUTANEOUS SOLUTION 600-10000 MG-UNT/5ML | 4 | PA; SP |
| HERCEPTIN INTRAVENOUS SOLUTION RECONSTITUTED 150 MG | 4 | PA; SP |
| HERCESSI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | E | |
| HERNEXEOS ORAL TABLET 60 MG | 4 | PA; SP |
| HERZUMA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HYCAMTIN INTRAVENOUS SOLUTION RECONSTITUTED 4 MG | 4 | SP |
| HYCAMTIN ORAL CAPSULE 0.25 MG, 1 MG | 4 | SP |
| hydroxyurea oral capsule 500 mg | 1 | |
| HYRNUO ORAL TABLET 10 MG | 4 | PA; SP |
| IBRANCE ORAL CAPSULE 125 MG | 4 | PA; SP |
| IBRANCE ORAL TABLET 100 MG, 125 MG, 75 MG | 4 | PA; SP |
| IBTROZI ORAL CAPSULE 200 MG | 4 | PA; SP |
| ICLUSIG ORAL TABLET 10 MG, 15 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| ICLUSIG ORAL TABLET 30 MG, 45 MG | 4 | PA; SP |
| IDAMYCIN PFS INTRAVENOUS SOLUTION 10 MG/10ML, 20 MG/20ML, 5 MG/5ML | 4 | SP |
| idarubicin hcl intravenous solution 10 mg/10ml, 20 mg/20ml, 5 mg/5ml | 4 | SP |
| IDHIFA ORAL TABLET 100 MG, 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| IFEX INTRAVENOUS SOLUTION RECONSTITUTED 1 GM, 3 GM | 4 | SP |
| ifosfamide intravenous solution 1 gm/20ml, 3 gm/60ml | 4 | SP |
| ifosfamide intravenous solution reconstituted 1 gm, 3 gm | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| imatinib mesylate oral tablet 100 mg, 400 mg | 4 | PA; SP |
| IMBRUVICA ORAL CAPSULE 140 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| IMBRUVICA ORAL CAPSULE 70 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| IMBRUVICA ORAL SUSPENSION 70 MG/ML | 4 | PA; SP |
| IMBRUVICA ORAL TABLET 140 MG, 280 MG | E | |
| IMBRUVICA ORAL TABLET 420 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| IMDELLTRA INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 10 MG | 4 | PA; SP |
| IMFINZI INTRAVENOUS SOLUTION 120 MG/2.4ML, 500 MG/10ML | 4 | PA; SP |
| IMJUDO INTRAVENOUS SOLUTION 25 MG/1.25ML, 300 MG/15ML | 4 | PA; SP |
| IMKELDI ORAL SOLUTION 80 MG/ML | 4 | PA; SP |
| INLEXZO INTRAVESICAL IMPLANT 225 MG | E | |
| INLURIYO ORAL TABLET 200 MG | 4 | PA; SP |
| INLYTA ORAL TABLET 1 MG, 5 MG | 4 | PA; SP |
| INQOVI ORAL TABLET 35-100 MG | E | |
| INREBIC ORAL CAPSULE 100 MG | 4 | PA; SP |
| irinotecan hcl intravenous solution 100 mg/5ml, 300 mg/15ml, 40 mg/2ml, 500 mg/25ml | 4 | SP |
| ISTODAX INTRAVENOUS SOLUTION RECONSTITUTED 10 MG | 4 | PA; SP |
| ITOVEBI ORAL TABLET 3 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| ITOVEBI ORAL TABLET 9 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| IVRA INTRAVENOUS SOLUTION 90 MG/ML | E | |
| IXEMPRA KIT INTRAVENOUS SOLUTION RECONSTITUTED 15 MG, 45 MG | 4 | SP |
| JAKAFI ORAL TABLET 10 MG, 5 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| JAKAFI ORAL TABLET 15 MG, 20 MG, 25 MG | 4 | PA; SP |
| JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| JAKAFI XR ORAL TABLET EXTENDED RELEASE 24 HOUR 33 MG, 44 MG, 55 MG | 4 | PA; SP |
| JAYPIRCA ORAL TABLET 100 MG | 4 | PA; SP |
| JAYPIRCA ORAL TABLET 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| JEMPERLI INTRAVENOUS SOLUTION 500 MG/10ML | 4 | PA; SP |
| JEVTANA INTRAVENOUS SOLUTION 60 MG/1.5ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| JOBEVNE INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | E | |
| KADCYLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 160 MG | 4 | PA; SP |
| KANJINTI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | 4 | PA; SP |
| KEYTRUDA INTRAVENOUS SOLUTION 100 MG/4ML | 4 | PA; SP |
| KEYTRUDA QLEX SUBCUTANEOUS SOLUTION 395-4800 MG -UNT/2.4ML, 790-9600 MG -UNT/4.8ML | 4 | PA; SP |
| KHAPZORY INTRAVENOUS SOLUTION RECONSTITUTED 175 MG | 4 | SP |
| KIMMTRAK INTRAVENOUS SOLUTION 100 MCG/0.5ML | 4 | PA; SP |
| KISQALI (200 MG DOSE) ORAL TABLET THERAPY PACK 200 MG | 4 | PA; SP |
| KISQALI (400 MG DOSE) ORAL TABLET THERAPY PACK 200 MG | 4 | PA; SP |
| KISQALI (600 MG DOSE) ORAL TABLET THERAPY PACK 200 MG | 4 | PA; SP |
| KOMZIFTI ORAL CAPSULE 200 MG | 4 | PA; SP |
| KOSELUGO ORAL CAPSULE 10 MG, 25 MG | 4 | PA; SP |
| KOSELUGO ORAL CAPSULE SPRINKLE 5 MG, 7.5 MG | 4 | PA; SP |
| KRAZATI ORAL TABLET 200 MG | 4 | PA; SP |
| KYPROLIS INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 30 MG, 60 MG | 4 | PA; SP |
| KYXATA INTRAVENOUS SOLUTION 500 MG/50ML, 80 MG/8ML | E | |
| lapatinib ditosylate oral tablet 250 mg | 4 | PA; SP |
| LAZCLUZE ORAL TABLET 240 MG | 4 | PA; SP |
| LAZCLUZE ORAL TABLET 80 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| lederle leucovorin oral tablet 5 mg | 1 | |
| lenalidomide oral capsule 10 mg, 15 mg, 2.5 mg, 20 mg, 25 mg, 5 mg | 4 | PA; SP |
| LENVIMA ORAL CAPSULE THERAPY PACK 10 & 4 MG, 10 MG, 10 MG & 2 X 4 MG, 2 X 10 MG, 2 X 10 MG & 4 MG, 2 X 4 MG, 3 X 4 MG, 4 MG | 4 | PA; SP |
| letrozole oral tablet 2.5 mg | 1 | ACA |
| leucovorin calcium injection solution 100 mg/10ml, 500 mg/50ml | 1 | |
| leucovorin calcium injection solution reconstituted 100 mg, 200 mg, 350 mg, 50 mg, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| leucovorin calcium oral tablet 10 mg, 15 mg, 25 mg, 5 mg | 1 | |
| LEUKERAN ORAL TABLET 2 MG | 4 | SP |
| levoleucovorin calcium intravenous solution reconstituted 50 mg | 4 | SP |
| levoleucovorin calcium pf intravenous solution 175 mg/17.5ml, 250 mg/25ml | 4 | SP |
| LIBTAYO INTRAVENOUS SOLUTION 350 MG/7ML | 4 | PA; SP |
| LIFYORLI (125 MG DOSE) ORAL CAPSULE THERAPY PACK 1 X 25 MG & 1 X 100 MG | 4 | PA; SP |
| LIFYORLI (150 MG DOSE) ORAL CAPSULE THERAPY PACK 2 X 25 MG & 1 X 100 MG | 4 | PA; SP |
| lomustine oral capsule 10 mg, 100 mg, 40 mg | 4 | SP |
| LONSURF ORAL TABLET 15-6.14 MG, 20-8.19 MG | 4 | PA; SP |
| LOQTORZI INTRAVENOUS SOLUTION 240 MG/6ML | 4 | PA; SP |
| LORBRENA ORAL TABLET 100 MG, 25 MG | 4 | PA; SP |
| LUMAKRAS ORAL TABLET 120 MG, 240 MG, 320 MG | 4 | PA; SP |
| LUNSUMIO INTRAVENOUS SOLUTION 1 MG/ML, 30 MG/30ML | 4 | PA; SP |
| LUNSUMIO VELO SUBCUTANEOUS SOLUTION 45 MG/ML, 5 MG/0.5ML | E | |
| LYMPHIR INTRAVENOUS SOLUTION RECONSTITUTED 300 MCG | E | |
| LYNOZYFIC INTRAVENOUS SOLUTION 200 MG/10ML, 5 MG/2.5ML | 4 | PA; SP |
| LYNPARZA ORAL TABLET 100 MG, 150 MG | 4 | PA; SP |
| LYSODREN ORAL TABLET 500 MG | 2 | |
| LYTGOBI (12 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG | 4 | PA; SP |
| LYTGOBI (16 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG | 4 | PA; SP |
| LYTGOBI (20 MG DAILY DOSE) ORAL TABLET THERAPY PACK 4 MG | 4 | PA; SP |
| MARGENZA INTRAVENOUS SOLUTION 250 MG/10ML | 4 | PA; SP |
| MATULANE ORAL CAPSULE 50 MG | 4 | SP |
| MEKINIST ORAL SOLUTION RECONSTITUTED 0.05 MG/ML | 4 | PA; SP |
| MEKINIST ORAL TABLET 0.5 MG, 2 MG | 4 | PA; SP |
| MEKTOVI ORAL TABLET 15 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| melphalan hcl intravenous solution reconstituted 50 mg | 4 | SP |
| mercaptopurine oral suspension 2000 mg/100ml | 4 | SP |
| mercaptopurine oral tablet 50 mg | 1 | |
| mesna intravenous solution 100 mg/ml | 4 | SP |
| mesna oral tablet 400 mg | 4 | SP |
| MESNEX INTRAVENOUS SOLUTION 100 MG/ML | 4 | SP |
| MESNEX ORAL TABLET 400 MG | 4 | SP |
| mitomycin intravenous solution reconstituted 20 mg, 40 mg, 5 mg | 4 | SP |
| mitoxantrone hcl intravenous concentrate 20 mg/10ml, 25 mg/12.5ml, 30 mg/15ml | 4 | PA; SP |
| MODEYSO ORAL CAPSULE 125 MG | 4 | PA; SP |
| MONJUVI INTRAVENOUS SOLUTION RECONSTITUTED 200 MG | 4 | PA; SP |
| MUTAMYCIN INTRAVENOUS SOLUTION RECONSTITUTED 40 MG, 5 MG | 4 | SP |
| MVASI INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | 4 | PA; SP |
| MYLERAN ORAL TABLET 2 MG | 2 | |
| MYLOTARG INTRAVENOUS SOLUTION RECONSTITUTED 4.5 MG | 4 | PA; SP |
| nelarabine intravenous solution 5 mg/ml | 4 | SP |
| NERLYNX ORAL TABLET 40 MG | 4 | PA; SP; QL (6 EA per 1 day) |
| NIKTIMVO INTRAVENOUS SOLUTION 22 MG/0.44ML, 22 MG/2.2ML, 9 MG/0.18ML, 9 MG/0.9ML | E | |
| nilotinib hcl oral capsule 150 mg, 200 mg, 50 mg | 4 | PA; SP |
| nilutamide oral tablet 150 mg | 4 | SP |
| NINLARO ORAL CAPSULE 2.3 MG, 3 MG, 4 MG | 4 | PA; SP |
| NIPENT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG | 4 | SP |
| NUBEQA ORAL TABLET 300 MG | 4 | PA; SP |
| ODOMZO ORAL CAPSULE 200 MG | 4 | PA; SP |
| OGIVRI INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | E | |
| OGSIVEO ORAL TABLET 100 MG, 150 MG | 4 | PA; SP |
| OJEMDA ORAL SUSPENSION RECONSTITUTED 25 MG/ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| OJEMDA ORAL TABLET 100 MG | 4 | PA; SP |
| OJJAARA ORAL TABLET 100 MG, 150 MG, 200 MG | E | |
| ONCASPAR INJECTION SOLUTION 750 UNIT/ML | 4 | SP |
| ONIVYDE INTRAVENOUS SUSPENSION 43 MG/10ML | 4 | SP |
| ONTRUZANT INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | E | |
| ONUREG ORAL TABLET 200 MG, 300 MG | 4 | PA; SP |
| OPDIVO INTRAVENOUS SOLUTION 100 MG/10ML, 120 MG/12ML, 240 MG/24ML, 40 MG/4ML | 4 | PA; SP |
| OPDIVO QVANTIG SUBCUTANEOUS SOLUTION 300-5000 MG -UT/2.5ML, 600-10000 MG-UT/5ML | 4 | PA; SP |
| OPDUALAG INTRAVENOUS SOLUTION 240-80 MG/20ML | 4 | PA; SP |
| ORGOVYX ORAL TABLET 120 MG | 4 | PA; SP |
| ORSERDU ORAL TABLET 345 MG, 86 MG | 4 | PA; SP |
| oxaliplatin intravenous solution 100 mg/20ml, 200 mg/40ml, 50 mg/10ml | 4 | SP |
| oxaliplatin intravenous solution reconstituted 100 mg, 50 mg | 4 | SP |
| paclitaxel intravenous concentrate 100 mg/16.7ml, 150 mg/25ml, 30 mg/5ml, 300 mg/50ml | 4 | SP |
| paclitaxel protein-bound part intravenous suspension reconstituted 100 mg | 4 | SP |
| PADCEV INTRAVENOUS SOLUTION RECONSTITUTED 20 MG, 30 MG | 4 | PA; SP |
| PANRETIN EXTERNAL GEL 0.1 % | 3 | |
| pazopanib hcl oral tablet 200 mg | 4 | PA; SP; QL (3 EA per 1 day) |
| pazopanib hcl oral tablet 400 mg | 4 | PA; SP |
| PEMAZYRE ORAL TABLET 13.5 MG, 4.5 MG, 9 MG | E | |
| PEMETREXED DISODIUM INTRAVENOUS SOLUTION 1 GM/40ML, 100 MG/4ML, 500 MG/20ML | 4 | SP |
| pemetrexed disodium intravenous solution reconstituted 100 mg, 1000 mg, 500 mg, 750 mg | 4 | SP |
| PEMETREXED INTRAVENOUS SOLUTION 1 GM/40ML, 100 MG/4ML, 500 MG/20ML | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PEMFEXY INTRAVENOUS SOLUTION 500 MG/20ML | 4 | SP |
| PEMRYDI RTU INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | 4 | SP |
| PERJETA INTRAVENOUS SOLUTION 420 MG/14ML | 4 | PA; SP |
| PHESGO SUBCUTANEOUS SOLUTION 60-60-2000 MG-MG-U/ML, 80-40-2000 MG-MG-U/ML | 4 | PA; SP |
| PHOTOFRIN INTRAVENOUS SOLUTION RECONSTITUTED 75 MG | 4 | SP |
| PHYRAGO ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG | E | |
| PIQRAY ORAL TABLET THERAPY PACK 2 X 150 MG, 200 & 50 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| PIQRAY ORAL TABLET THERAPY PACK 200 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| POLIVY INTRAVENOUS SOLUTION RECONSTITUTED 140 MG, 30 MG | 4 | PA; SP |
| pomalidomide oral capsule 1 mg, 2 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| pomalidomide oral capsule 3 mg, 4 mg | 4 | PA; SP |
| POMALYST ORAL CAPSULE 1 MG, 2 MG, 3 MG, 4 MG | E | |
| POTELIGEO INTRAVENOUS SOLUTION 20 MG/5ML | 4 | PA; SP |
| pralatrexate intravenous solution 20 mg/ml, 40 mg/2ml | 4 | PA; SP |
| PROLEUKIN INTRAVENOUS SOLUTION RECONSTITUTED 22000000 UNIT | 4 | SP |
| QINLOCK ORAL TABLET 50 MG | 4 | PA; SP |
| RASONQUE ORAL TABLET 100 MG, 150 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| RETEVMO ORAL TABLET 120 MG, 160 MG | 4 | PA; SP |
| RETEVMO ORAL TABLET 40 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| RETEVMO ORAL TABLET 80 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| REVLIMID ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 20 MG, 25 MG, 5 MG | E | |
| REVUFORJ ORAL TABLET 110 MG, 160 MG, 25 MG | 4 | PA; SP |
| REZLIDHIA ORAL CAPSULE 150 MG | E | |
| RIABNI INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | E | |
| RITUXAN HYCELA SUBCUTANEOUS SOLUTION 1400-23400 MG -UT/11.7ML, 1600-26800 MG -UT/13.4ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| RITUXAN INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | 4 | PA; SP |
| ROMIDEPSIN INTRAVENOUS SOLUTION 27.5 MG/5.5ML | 4 | PA; SP |
| romidepsin intravenous solution reconstituted 10 mg | 4 | PA; SP |
| ROMVIMZA ORAL CAPSULE 14 MG, 20 MG, 30 MG | 4 | PA; SP |
| ROZLYTREK ORAL CAPSULE 100 MG, 200 MG | 4 | PA; SP |
| ROZLYTREK ORAL PACKET 50 MG | 4 | PA; SP |
| RUBRACA ORAL TABLET 200 MG, 250 MG, 300 MG | E | |
| RUXIENCE INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | 4 | PA; SP |
| RYBREVANT FASPRO SUBCUTANEOUS SOLUTION 1600-20000 MG-UT/10ML, 2240-28000 MG-UT/14ML, 2400-30000 MG-UT/15ML, 3520-44000 MG-UT/22ML | E | |
| RYBREVANT INTRAVENOUS SOLUTION 350 MG/7ML | 4 | PA; SP |
| RYDAPT ORAL CAPSULE 25 MG | 4 | PA; SP |
| RYLAZE INTRAMUSCULAR SOLUTION 10 MG/0.5ML | E | |
| RYTELO INTRAVENOUS SOLUTION RECONSTITUTED 188 MG, 47 MG | 4 | PA; SP |
| SARCLISA INTRAVENOUS SOLUTION 100 MG/5ML, 500 MG/25ML | 4 | PA; SP |
| SCEMBLIX ORAL TABLET 100 MG | 4 | PA; SP |
| SCEMBLIX ORAL TABLET 20 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| SCEMBLIX ORAL TABLET 40 MG | 4 | PA; SP; QL (8 EA per 1 day) |
| SOLTAMOX ORAL SOLUTION 10 MG/5ML | 3 | ACA |
| sorafenib tosylate oral tablet 200 mg | 4 | PA; SP |
| SPRYCEL ORAL TABLET 100 MG, 140 MG, 20 MG, 50 MG, 70 MG, 80 MG | E | |
| STIVARGA ORAL TABLET 40 MG | 4 | PA; SP |
| sunitinib malate oral capsule 12.5 mg, 25 mg, 37.5 mg, 50 mg | 4 | PA; SP |
| SUTENT ORAL CAPSULE 12.5 MG, 25 MG, 37.5 MG, 50 MG | E | |
| SYLVANT INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 400 MG | 4 | PA; SP |
| TABLOID ORAL TABLET 40 MG | 4 | SP |
| TABRECTA ORAL TABLET 150 MG, 200 MG | 4 | PA; SP |
| TAFINLAR ORAL CAPSULE 50 MG, 75 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TAFINLAR ORAL TABLET SOLUBLE 10 MG | 4 | PA; SP |
| TAGRISSO ORAL TABLET 40 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| TAGRISSO ORAL TABLET 80 MG | 4 | PA; SP |
| TALVEY SUBCUTANEOUS SOLUTION 3 MG/1.5ML, 40 MG/ML | 4 | PA; SP |
| TALZENNA ORAL CAPSULE 0.1 MG, 0.25 MG, 0.35 MG, 0.5 MG, 0.75 MG, 1 MG | E | |
| tamoxifen citrate oral tablet 10 mg | 1 | |
| tamoxifen citrate oral tablet 20 mg | 1 | ACA |
| TARGRETIN ORAL CAPSULE 75 MG | E | |
| TASIGNA ORAL CAPSULE 150 MG, 200 MG, 50 MG | E | |
| TECENTRIQ HYBREZA SUBCUTANEOUS SOLUTION 1875-30000 MG-UT/15ML | 4 | PA; SP |
| TECENTRIQ INTRAVENOUS SOLUTION 1200 MG/20ML, 840 MG/14ML | 4 | PA; SP |
| TECVAYLI SUBCUTANEOUS SOLUTION 153 MG/1.7ML, 30 MG/3ML | 4 | PA; SP |
| TEMODAR INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | SP |
| temozolomide oral capsule 100 mg, 140 mg, 180 mg, 20 mg, 250 mg, 5 mg | 4 | PA; SP |
| TEPADINA INJECTION SOLUTION RECONSTITUTED 100 MG, 15 MG | E | |
| TEPADINA INTRAVENOUS SOLUTION RECONSTITUTED 200 MG/200ML, 400 MG/400ML | E | |
| TEPMETKO ORAL TABLET 225 MG | 4 | PA; SP |
| TEVIMBRA INTRAVENOUS SOLUTION 100 MG/10ML, 150 MG/15ML | 4 | PA; SP |
| THALOMID ORAL CAPSULE 100 MG, 50 MG | 4 | PA; SP |
| thiotepa injection solution reconstituted 100 mg, 15 mg | 4 | SP |
| TIBSOVO ORAL TABLET 250 MG | 4 | PA; SP |
| TICE BCG INTRAVESICAL SUSPENSION RECONSTITUTED 50 MG | 4 | SP |
| TIVDAK INTRAVENOUS SOLUTION RECONSTITUTED 40 MG | 4 | PA; SP |
| topotecan hcl intravenous solution 4 mg/4ml | 4 | SP |
| topotecan hcl intravenous solution reconstituted 4 mg | 4 | SP |
| toremifene citrate oral tablet 60 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| torpenz oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| TRAZIMERA INTRAVENOUS SOLUTION RECONSTITUTED 150 MG, 420 MG | 4 | PA; SP |
| TREANDA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 25 MG | E | |
| tretinoin oral capsule 10 mg | 4 | SP |
| TRISENOX INTRAVENOUS SOLUTION 12 MG/6ML | 4 | SP |
| TRODELVY INTRAVENOUS SOLUTION RECONSTITUTED 180 MG | 4 | PA; SP |
| TRUQAP ORAL TABLET THERAPY PACK 160 MG, 200 MG | 4 | PA; SP |
| TRUXIMA INTRAVENOUS SOLUTION 100 MG/10ML, 500 MG/50ML | E | |
| TUKYSA ORAL TABLET 150 MG, 50 MG | 4 | PA; SP |
| TURALIO ORAL CAPSULE 125 MG | 4 | PA; SP |
| UNITUXIN INTRAVENOUS SOLUTION 17.5 MG/5ML | 4 | PA; SP |
| UNLOXCYT INTRAVENOUS SOLUTION 300 MG/5ML | E | |
| UVADEX EXTRACORPOREAL SOLUTION 20 MCG/ML | 3 | |
| VALCHLOR EXTERNAL GEL 0.016 % | 4 | PA; SP |
| valrubicin intravesical solution 40 mg/ml | 4 | SP |
| VALSTAR INTRAVESICAL SOLUTION 40 MG/ML | 4 | SP |
| VANFLYTA ORAL TABLET 17.7 MG, 26.5 MG | 4 | PA; SP |
| VECTIBIX INTRAVENOUS SOLUTION 100 MG/5ML, 400 MG/20ML | 4 | SP |
| VEGZELMA INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | E | |
| VELCADE INJECTION SOLUTION RECONSTITUTED 3.5 MG | 4 | PA; SP |
| VENCLEXTA ORAL TABLET 10 MG, 100 MG, 50 MG | 4 | PA; SP |
| VENCLEXTA STARTING PACK ORAL TABLET THERAPY PACK 10 & 50 & 100 MG | 4 | PA; SP |
| VEPESID ORAL CAPSULE 50 MG | 4 | SP |
| VEPPANU ORAL TABLET 100 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VEPPANU ORAL TABLET 200 MG | 4 | PA; SP |
| VERZENIO ORAL TABLET 100 MG, 150 MG, 200 MG, 50 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VIDAZA INJECTION SUSPENSION RECONSTITUTED 100 MG | 4 | SP |
| VIJOICE ORAL PACKET 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VIJOICE ORAL TABLET THERAPY PACK 125 MG, 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VIJOICE ORAL TABLET THERAPY PACK 200 & 50 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| vinblastine sulfate intravenous solution 1 mg/ml | 4 | SP |
| vincristine sulfate intravenous solution 1 mg/ml, 2 mg/2ml | 4 | SP |
| vinorelbine tartrate intravenous solution 10 mg/ml, 50 mg/5ml | 4 | SP |
| VITRAKVI ORAL CAPSULE 100 MG, 25 MG | 4 | PA; SP |
| VITRAKVI ORAL SOLUTION 20 MG/ML | 4 | PA; SP |
| VIVIMUSTA SOLUTION 100 MG/4ML INTRAVENOUS | 4 | PA; SP |
| VIVIMUSTA SOLUTION 100 MG/4ML INTRAVENOUS | E | |
| VONJO ORAL CAPSULE 100 MG | 4 | PA; SP |
| VORANIGO ORAL TABLET 10 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| VORANIGO ORAL TABLET 40 MG | 4 | PA; SP |
| VORAXAZE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VYKOURA INJECTION SOLUTION 350 MG/35ML, 50 MG/5ML, 500 MG/50ML | E | |
| VYLOY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG, 300 MG | 4 | PA; SP |
| VYXEOS INTRAVENOUS SUSPENSION RECONSTITUTED 44-100 MG | 4 | PA; SP |
| WELIREG ORAL TABLET 40 MG | 4 | PA; SP |
| XALKORI ORAL CAPSULE 200 MG, 250 MG | E | |
| XALKORI ORAL CAPSULE SPRINKLE 150 MG, 20 MG, 50 MG | E | |
| XOFIGO INTRAVENOUS SOLUTION 30 MCCI/ML | 2 | |
| XOSPATA ORAL TABLET 40 MG | 4 | PA; SP |
| XPOVIO (100 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 50 MG | 4 | PA; SP |
| XPOVIO (40 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 10 MG | 4 | PA; SP |
| XPOVIO (40 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 40 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| XPOVIO (60 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 60 MG | 4 | PA; SP |
| XPOVIO (60 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG | 4 | PA; SP |
| XPOVIO (80 MG ONCE WEEKLY) ORAL TABLET THERAPY PACK 40 MG, 80 MG | 4 | PA; SP |
| XPOVIO (80 MG TWICE WEEKLY) ORAL TABLET THERAPY PACK 20 MG | 4 | PA; SP |
| XROMI ORAL SOLUTION 100 MG/ML | 3 | PA |
| XTANDI ORAL CAPSULE 40 MG | 4 | PA; SP |
| XTANDI ORAL TABLET 40 MG, 80 MG | 4 | PA; SP |
| YERVOY INTRAVENOUS SOLUTION 200 MG/40ML, 50 MG/10ML | 4 | PA; SP |
| YONDELIS INTRAVENOUS SOLUTION RECONSTITUTED 1 MG | 4 | SP |
| YONSA ORAL TABLET 125 MG | E | |
| yulithira oral tablet 10 mg, 2.5 mg, 5 mg, 7.5 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| ZALTRAP INTRAVENOUS SOLUTION 100 MG/4ML, 200 MG/8ML | 4 | PA; SP |
| ZEJULA ORAL TABLET 100 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| ZEJULA ORAL TABLET 200 MG, 300 MG | 4 | PA; SP |
| ZELBORAF ORAL TABLET 240 MG | 4 | PA; SP |
| ZEPZELCA INTRAVENOUS SOLUTION RECONSTITUTED 4 MG | 4 | PA; SP |
| ZEVALIN Y-90 INTRAVENOUS KIT 3.2 MG/2ML | 4 | SP |
| ZIIHERA INTRAVENOUS SOLUTION RECONSTITUTED 300 MG | 4 | PA; SP |
| ZIRABEV INTRAVENOUS SOLUTION 100 MG/4ML, 400 MG/16ML | 4 | PA; SP |
| ZOLINZA ORAL CAPSULE 100 MG | 4 | PA; SP |
| ZUSDURI INTRAVESICAL KIT 2 X 40 MG | 4 | PA; SP |
| ZYDELIG ORAL TABLET 100 MG, 150 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| ZYKADIA ORAL TABLET 150 MG | 4 | PA; SP |
| ZYNLONTA INTRAVENOUS SOLUTION RECONSTITUTED 10 MG | 4 | PA; SP |
| ZYNYZ INTRAVENOUS SOLUTION 500 MG/20ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ZYTIGA ORAL TABLET 250 MG, 500 MG | E | |
| **Antiparasitics** | | |
| albendazole oral tablet 200 mg | 1 | PA; QL (120 EA per 180 days) |
| ARAKODA ORAL TABLET 100 MG | 3 | |
| ARTESUNATE INTRAVENOUS SOLUTION RECONSTITUTED 110 MG | 3 | |
| atovaquone oral suspension 750 mg/5ml | 1 | |
| atovaquone-proguanil hcl oral tablet 250-100 mg, 62.5-25 mg | 1 | |
| BENZNIDAZOLE ORAL TABLET 100 MG, 12.5 MG | 3 | |
| BILTRICIDE ORAL TABLET 600 MG | 2 | QL (105 EA per 180 days) |
| chloroquine phosphate oral tablet 250 mg, 500 mg | 1 | |
| COARTEM ORAL TABLET 20-120 MG | 3 | |
| EGATEN ORAL TABLET 250 MG | 3 | |
| EMVERM ORAL TABLET CHEWABLE 100 MG | 2 | QL (6 EA per 180 days) |
| hydroxychloroquine sulfate oral tablet 100 mg, 200 mg, 300 mg, 400 mg | 1 | |
| IMPAVIDO ORAL CAPSULE 50 MG | 3 | |
| ivermectin oral tablet 3 mg | 1 | QL (18 EA per 180 days) |
| KRINTAFEL ORAL TABLET 150 MG | 3 | |
| LAMPIT ORAL TABLET 120 MG, 30 MG | 3 | |
| MALARONE ORAL TABLET 250-100 MG, 62.5-25 MG | 3 | |
| malathion external lotion 0.5 % | 1 | |
| mefloquine hcl oral tablet 250 mg | 1 | |
| MEPRON ORAL SUSPENSION 750 MG/5ML | 3 | |
| NATROBA EXTERNAL SUSPENSION 0.9 % | E | |
| NEBUPENT INHALATION SOLUTION RECONSTITUTED 300 MG | 3 | |
| nitazoxanide oral tablet 500 mg | 1 | |
| OVIDE EXTERNAL LOTION 0.5 % | 3 | |
| PENTAM INJECTION SOLUTION RECONSTITUTED 300 MG | 3 | |
| pentamidine isethionate inhalation solution reconstituted 300 mg | 1 | |
| pentamidine isethionate injection solution reconstituted 300 mg | 1 | |
| permethrin external cream 5 % | 1 | |
| PLAQUENIL ORAL TABLET 200 MG | E | |
| praziquantel oral tablet 600 mg | 1 | QL (105 EA per 180 days) |
| primaquine phosphate oral tablet 26.3 (15 base) mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PRURADIK EXTERNAL LOTION 10 % | E | |
| pyrimethamine oral tablet 25 mg | 4 | PA; SP |
| quinine sulfate oral capsule 324 mg | 1 | PA |
| SOVUNA ORAL TABLET 200 MG, 300 MG | E | |
| spinosad external suspension 0.9 % | 1 | |
| STROMECTOL ORAL TABLET 3 MG | 3 | QL (18 EA per 180 days) |
| sulfurated lime external solution | 1 | |
| **Antiparkinson Agents** | | |
| amantadine hcl oral capsule 100 mg | 1 | |
| amantadine hcl oral solution 100 mg/10ml, 50 mg/5ml | 1 | |
| amantadine hcl oral tablet 100 mg | 1 | |
| apomorphine hcl subcutaneous solution cartridge 30 mg/3ml | 4 | PA; SP; QL (3 ML per 1 day) |
| benztropine mesylate injection solution 1 mg/ml | 1 | |
| benztropine mesylate oral tablet 0.5 mg, 1 mg, 2 mg | 1 | |
| bromocriptine mesylate oral capsule 5 mg | 1 | |
| bromocriptine mesylate oral tablet 2.5 mg | 1 | |
| carbidopa oral tablet 25 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CARBIDOPA-LEVODOPA ER ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG | E | |
| carbidopa-levodopa er oral tablet extended release 25-100 mg, 50-200 mg | 1 | |
| carbidopa-levodopa oral tablet 10-100 mg, 25-100 mg, 25-250 mg | 1 | |
| carbidopa-levodopa oral tablet dispersible 10-100 mg, 25-100 mg, 25-250 mg | 1 | |
| carbidopa-levodopa-entacapone oral tablet 12.5-50-200 mg, 18.75-75-200 mg, 25-100-200 mg, 31.25-125-200 mg, 37.5-150-200 mg, 50-200-200 mg | 1 | |
| CREXONT ORAL CAPSULE EXTENDED RELEASE 35-140 MG, 52.5-210 MG, 70-280 MG, 87.5-350 MG | 3 | ST |
| DHIVY ORAL TABLET 25-100 MG | E | |
| DUOPA ENTERAL SUSPENSION 4.63-20 MG/ML | 3 | PA |
| entacapone oral tablet 200 mg | 1 | |
| GOCOVRI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 137 MG, 68.5 MG | E | |
| INBRIJA INHALATION CAPSULE 42 MG | 4 | PA; SP |
| JUVMO ORAL TABLET 10 MG, 15 MG, 5 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| JUVMO TITRATION PACK ORAL TABLET THERAPY PACK 36X0.25 & 64X1 MG | 3 | |
| NEUPRO TRANSDERMAL PATCH 24 HOUR 1 MG/24HR, 2 MG/24HR, 3 MG/24HR, 4 MG/24HR, 6 MG/24HR, 8 MG/24HR | 3 | |
| NOURIANZ ORAL TABLET 20 MG, 40 MG | 3 | PA |
| ONAPGO SUBCUTANEOUS SOLUTION CARTRIDGE 98 MG/20ML | 4 | PA; SP; QL (3 ML per 1 day) |
| ONGENTYS ORAL CAPSULE 25 MG, 50 MG | 3 | ST |
| pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 0.75 mg, 1 mg, 1.5 mg | 1 | |
| rasagiline mesylate oral tablet 0.5 mg, 1 mg | 1 | |
| ropinirole hcl er oral tablet extended release 24 hour 12 mg, 2 mg, 4 mg, 6 mg, 8 mg | 1 | |
| ropinirole hcl oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg, 5 mg | 1 | |
| RYTARY ORAL CAPSULE EXTENDED RELEASE 23.75-95 MG, 36.25-145 MG, 48.75-195 MG, 61.25-245 MG | E | |
| selegiline hcl oral capsule 5 mg | 1 | |
| selegiline hcl oral tablet 5 mg | 1 | |
| TASMAR ORAL TABLET 100 MG | 3 | |
| tolcapone oral tablet 100 mg | 1 | |
| trihexyphenidyl hcl oral solution 0.4 mg/ml | 1 | |
| trihexyphenidyl hcl oral tablet 2 mg, 5 mg | 1 | |
| **Antiplatelets** | | |
| AGGRASTAT INTRAVENOUS CONCENTRATE 3.75 MG/15ML | 3 | |
| AGGRASTAT INTRAVENOUS SOLUTION 12.5-0.9 MG/250ML-%, 5-0.9 MG/100ML-% | 3 | |
| aspirin-dipyridamole er oral capsule extended release 12 hour 25-200 mg | 1 | |
| BRILINTA ORAL TABLET 60 MG, 90 MG | E | |
| CABLIVI INJECTION KIT 11 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| cilostazol oral tablet 100 mg, 50 mg | 1 | |
| clopidogrel bisulfate oral tablet 300 mg, 75 mg | 1 | |
| dipyridamole oral tablet 25 mg, 50 mg, 75 mg | 1 | |
| eptifibatide intravenous solution 20 mg/10ml, 200 mg/100ml, 75 mg/100ml | 1 | |
| KENGREAL INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 3 | |
| PLAVIX ORAL TABLET 75 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| prasugrel hcl oral tablet 10 mg, 5 mg | 1 | |
| ticagrelor oral tablet 60 mg, 90 mg | 1 | |
| tirofiban hcl in nacl intravenous solution 12.5-0.9 mg/250ml-%, 5-0.9 mg/100ml-% | 1 | |
| YOSPRALA ORAL TABLET DELAYED RELEASE 325-40 MG, 81-40 MG | E | |
| ZONTIVITY ORAL TABLET 2.08 MG | 3 | |
| **Antipsychotics - Drugs for Mood Disorders** | | |
| ABILIFY ASIMTUFII INTRAMUSCULAR PREFILLED SYRINGE 720 MG/2.4ML, 960 MG/3.2ML | 3 | |
| ABILIFY MAINTENA INTRAMUSCULAR PREFILLED SYRINGE 300 MG, 400 MG | 3 | |
| ABILIFY MAINTENA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 300 MG, 400 MG | 3 | |
| ABILIFY ORAL TABLET 10 MG, 15 MG, 2 MG, 20 MG, 30 MG, 5 MG | E | |
| aripiprazole oral solution 1 mg/ml | 1 | QL (25 ML per 1 day) |
| aripiprazole oral tablet 10 mg, 15 mg, 2 mg, 20 mg, 30 mg, 5 mg | 1 | QL (1 EA per 1 day) |
| aripiprazole oral tablet dispersible 10 mg, 15 mg | 1 | QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ARISTADA INITIO INTRAMUSCULAR PREFILLED SYRINGE 675 MG/2.4ML | 3 | |
| ARISTADA INTRAMUSCULAR PREFILLED SYRINGE 1064 MG/3.9ML, 441 MG/1.6ML, 662 MG/2.4ML, 882 MG/3.2ML | 3 | |
| asenapine maleate sublingual tablet sublingual 10 mg, 2.5 mg, 5 mg | 1 | QL (2 EA per 1 day) |
| BYSANTI ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG | 3 | QL (2 EA per 1 day) |
| BYSANTI TITRATION PACK A ORAL TABLET THERAPY PACK 1 & 2 & 4 & 6 MG | 3 | QL (16 EA per 365 days) |
| BYSANTI TITRATION PACK B ORAL TABLET THERAPY PACK 1 & 2 & 6 & 8 MG | 3 | QL (24 EA per 365 days) |
| BYSANTI TITRATION PACK C ORAL TABLET THERAPY PACK 1 & 2 & 6 MG | 3 | QL (16 EA per 365 days) |
| CAPLYTA ORAL CAPSULE 10.5 MG, 21 MG, 42 MG | 3 | ST; QL (1 EA per 1 day) |
| chlorpromazine hcl injection solution 25 mg/ml, 50 mg/2ml | 1 | |
| chlorpromazine hcl oral concentrate 100 mg/ml, 30 mg/ml | 1 | |
| chlorpromazine hcl oral tablet 10 mg, 100 mg, 200 mg, 25 mg, 50 mg | 1 | |
| clozapine oral tablet 100 mg, 25 mg | 1 | QL (9 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| clozapine oral tablet 200 mg | 1 | QL (4 EA per 1 day) |
| clozapine oral tablet 50 mg | 1 | QL (6 EA per 1 day) |
| clozapine oral tablet dispersible 100 mg, 25 mg | 1 | QL (9 EA per 1 day) |
| clozapine oral tablet dispersible 12.5 mg | 1 | QL (3 EA per 1 day) |
| clozapine oral tablet dispersible 150 mg | 1 | QL (6 EA per 1 day) |
| clozapine oral tablet dispersible 200 mg | 1 | QL (4 EA per 1 day) |
| COBENFY ORAL CAPSULE 100-20 MG, 125-30 MG, 50-20 MG | 3 | ST; QL (2 EA per 1 day) |
| COBENFY STARTER PACK ORAL CAPSULE THERAPY PACK 50-20 & 100-20 MG | 3 | ST; QL (102 EA per 365 days) |
| ERZOFRI INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 351 MG/2.25ML, 39 MG/0.25ML, 78 MG/0.5ML | 3 | |
| FANAPT ORAL TABLET 1 MG, 10 MG, 12 MG, 2 MG, 4 MG, 6 MG, 8 MG | 3 | ST; QL (2 EA per 1 day) |
| FANAPT TITRATION PACK A ORAL TABLET 1 & 2 & 4 & 6 MG | 3 | ST; QL (16 EA per 365 days) |
| FANAPT TITRATION PACK B ORAL TABLET 1 & 2 & 6 & 8 MG | 3 | ST; QL (24 EA per 365 days) |
| FANAPT TITRATION PACK C ORAL TABLET 1 & 2 & 6 MG | 3 | ST; QL (16 EA per 365 days) |
| fluphenazine decanoate injection solution 25 mg/ml | 1 | |
| fluphenazine hcl injection solution 2.5 mg/ml | 1 | |
| fluphenazine hcl oral concentrate 5 mg/ml | 1 | |
| fluphenazine hcl oral elixir 2.5 mg/5ml | 1 | |
| fluphenazine hcl oral tablet 1 mg, 10 mg, 2.5 mg, 5 mg | 1 | |
| GEODON INTRAMUSCULAR SOLUTION RECONSTITUTED 20 MG | 3 | |
| haloperidol decanoate intramuscular solution 100 mg/ml, 50 mg/ml | 1 | |
| haloperidol lactate injection solution 5 mg/ml | 1 | |
| haloperidol lactate oral concentrate 2 mg/ml | 1 | |
| haloperidol oral tablet 0.5 mg, 1 mg, 10 mg, 2 mg, 20 mg, 5 mg | 1 | |
| INVEGA HAFYERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1092 MG/3.5ML, 1560 MG/5ML | 3 | ST |
| INVEGA SUSTENNA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 117 MG/0.75ML, 156 MG/ML, 234 MG/1.5ML, 39 MG/0.25ML, 78 MG/0.5ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| INVEGA TRINZA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 273 MG/0.88ML, 410 MG/1.32ML, 546 MG/1.75ML, 819 MG/2.63ML | 3 | |
| LATUDA ORAL TABLET 120 MG, 20 MG, 40 MG, 60 MG, 80 MG | E | |
| loxapine succinate oral capsule 10 mg, 25 mg, 5 mg, 50 mg | 1 | |
| lurasidone hcl oral tablet 120 mg, 20 mg, 40 mg, 60 mg | 1 | QL (1 EA per 1 day) |
| lurasidone hcl oral tablet 80 mg | 1 | QL (2 EA per 1 day) |
| LYBALVI ORAL TABLET 10-10 MG, 15-10 MG, 20-10 MG, 5-10 MG | 3 | ST; QL (1 EA per 1 day) |
| molindone hcl oral tablet 10 mg, 25 mg, 5 mg | 1 | |
| NUPLAZID ORAL CAPSULE 34 MG | 3 | PA |
| NUPLAZID ORAL TABLET 10 MG | 3 | PA |
| olanzapine intramuscular solution reconstituted 10 mg | 1 | |
| olanzapine oral tablet 10 mg, 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg | 1 | QL (1 EA per 1 day) |
| olanzapine oral tablet dispersible 10 mg, 15 mg, 20 mg, 5 mg | 1 | QL (1 EA per 1 day) |
| OPIPZA ORAL FILM 10 MG, 5 MG | 3 | ST; QL (3 EA per 1 day) |
| OPIPZA ORAL FILM 2 MG | 3 | ST; QL (1 EA per 1 day) |
| paliperidone er oral tablet extended release 24 hour 1.5 mg, 3 mg, 9 mg | 1 | QL (1 EA per 1 day) |
| paliperidone er oral tablet extended release 24 hour 6 mg | 1 | QL (2 EA per 1 day) |
| PERSERIS SUBCUTANEOUS PREFILLED SYRINGE 120 MG, 90 MG | 3 | |
| pimozide oral tablet 1 mg, 2 mg | 1 | |
| quetiapine fumarate er oral tablet extended release 24 hour 150 mg, 200 mg, 300 mg, 400 mg, 50 mg | 1 | QL (2 EA per 1 day) |
| quetiapine fumarate oral tablet 100 mg, 150 mg, 200 mg, 25 mg, 50 mg | 1 | QL (3 EA per 1 day) |
| quetiapine fumarate oral tablet 300 mg, 400 mg | 1 | QL (2 EA per 1 day) |
| REXULTI ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | 3 | QL (1 EA per 1 day) |
| RISPERDAL CONSTA INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 12.5 MG, 25 MG, 37.5 MG, 50 MG | 3 | ST |
| RISPERDAL ORAL SOLUTION 1 MG/ML | E | |
| RISPERDAL ORAL TABLET 0.5 MG, 1 MG, 2 MG, 3 MG, 4 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| risperidone microspheres er intramuscular suspension reconstituted er 12.5 mg, 25 mg, 37.5 mg, 50 mg | 1 | |
| risperidone oral solution 1 mg/ml | 1 | QL (8 ML per 1 day) |
| risperidone oral tablet 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg | 1 | QL (2 EA per 1 day) |
| risperidone oral tablet dispersible 0.25 mg, 0.5 mg, 1 mg, 2 mg, 3 mg, 4 mg | 1 | QL (2 EA per 1 day) |
| RYKINDO INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 25 MG | 3 | |
| SAPHRIS SUBLINGUAL TABLET SUBLINGUAL 10 MG, 2.5 MG, 5 MG | E | |
| SECUADO TRANSDERMAL PATCH 24 HOUR 3.8 MG/24HR, 5.7 MG/24HR, 7.6 MG/24HR | E | |
| SEROQUEL ORAL TABLET 100 MG, 200 MG, 25 MG, 300 MG, 400 MG, 50 MG | E | |
| SEROQUEL XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG, 200 MG, 300 MG, 400 MG, 50 MG | E | |
| thioridazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg | 1 | |
| thiothixene oral capsule 1 mg, 10 mg, 2 mg, 5 mg | 1 | |
| trifluoperazine hcl oral tablet 1 mg, 10 mg, 2 mg, 5 mg | 1 | |
| UZEDY SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 100 MG/0.28ML, 125 MG/0.35ML, 150 MG/0.42ML, 200 MG/0.56ML, 250 MG/0.7ML, 50 MG/0.14ML, 75 MG/0.21ML | 3 | |
| VERSACLOZ ORAL SUSPENSION 50 MG/ML | 3 | QL (18 ML per 1 day) |
| VRAYLAR ORAL CAPSULE 0.5 MG, 0.75 MG, 1.5 MG, 3 MG, 4.5 MG, 6 MG | 3 | QL (1 EA per 1 day) |
| ziprasidone hcl oral capsule 20 mg, 40 mg, 60 mg, 80 mg | 1 | QL (2 EA per 1 day) |
| ziprasidone mesylate intramuscular solution reconstituted 20 mg | 1 | |
| ZYPREXA INTRAMUSCULAR SOLUTION RECONSTITUTED 10 MG | E | |
| ZYPREXA ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 5 MG, 7.5 MG | E | |
| ZYPREXA RELPREVV INTRAMUSCULAR SUSPENSION RECONSTITUTED 210 MG, 300 MG, 405 MG | 3 | |
| **Antivirals** | | |
| abacavir sulfate oral solution 20 mg/ml | 1 | |
| abacavir sulfate oral tablet 300 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| abacavir sulfate-lamivudine oral tablet 600-300 mg | 1 | |
| acyclovir external ointment 5 % | 1 | QL (1 GM per 1 day) |
| acyclovir oral capsule 200 mg | 1 | |
| acyclovir oral suspension 200 mg/5ml | 1 | |
| acyclovir oral tablet 400 mg, 800 mg | 1 | |
| acyclovir sodium intravenous solution 50 mg/ml | 1 | |
| adefovir dipivoxil oral tablet 10 mg | 1 | |
| APRETUDE INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 MG/3ML | 2 | ACA |
| APTIVUS ORAL CAPSULE 250 MG | 2 | |
| atazanavir sulfate oral capsule 150 mg, 200 mg, 300 mg | 1 | |
| BARACLUDE ORAL SOLUTION 0.05 MG/ML | 3 | QL (630 ML per 30 days) |
| BARACLUDE ORAL TABLET 0.5 MG, 1 MG | E | |
| BIKTARVY ORAL TABLET 30-120-15 MG, 50-200-25 MG | 3 | |
| CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 400 & 600 MG/2ML | 2 | QL (0.15 ML per 1 day) |
| CABENUVA INTRAMUSCULAR SUSPENSION EXTENDED RELEASE 600 & 900 MG/3ML | 2 | QL (0.22 ML per 1 day) |
| cidofovir intravenous solution 75 mg/ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CIMDUO ORAL TABLET 300-300 MG | 2 | |
| darunavir oral tablet 600 mg, 800 mg | 1 | |
| DELSTRIGO ORAL TABLET 100-300-300 MG | 2 | |
| DESCOVY ORAL TABLET 120-15 MG | 3 | |
| DESCOVY ORAL TABLET 200-25 MG | 3 | PA; ACA |
| DOVATO ORAL TABLET 50-300 MG | 2 | |
| EDURANT ORAL TABLET 25 MG | E | |
| EDURANT PED ORAL TABLET SOLUBLE 2.5 MG | 2 | |
| efavirenz oral tablet 600 mg | 1 | |
| efavirenz-emtricitab-tenofo df oral tablet 600-200-300 mg | 1 | |
| efavirenz-lamivudine-tenofovir oral tablet 400-300-300 mg, 600-300-300 mg | 1 | |
| emtricitabine oral capsule 200 mg | 1 | |
| emtricitabine-tenofovir df oral tablet 100-150 mg, 133-200 mg, 167-250 mg | 1 | |
| emtricitabine-tenofovir df oral tablet 200-300 mg | 1 | ACA |
| emtricitab-rilpivir-tenofov df oral tablet 200-25-300 mg | 1 | |
| EMTRIVA ORAL CAPSULE 200 MG | 3 | |
| EMTRIVA ORAL SOLUTION 10 MG/ML | 2 | |
| entecavir oral tablet 0.5 mg, 1 mg | 1 | QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EPCLUSA ORAL PACKET 150-37.5 MG, 200-50 MG | E | |
| EPCLUSA ORAL TABLET 200-50 MG, 400-100 MG | E | |
| EPIVIR ORAL SOLUTION 10 MG/ML | 3 | |
| EPIVIR ORAL TABLET 150 MG, 300 MG | 3 | |
| etravirine oral tablet 100 mg, 200 mg | 1 | |
| EVOTAZ ORAL TABLET 300-150 MG | 2 | |
| famciclovir oral tablet 125 mg, 250 mg, 500 mg | 1 | |
| fosamprenavir calcium oral tablet 700 mg | 1 | |
| foscarnet sodium intravenous solution 6000 mg/250ml | 1 | |
| FOSCAVIR INTRAVENOUS SOLUTION 6000 MG/250ML | 3 | |
| ganciclovir sodium intravenous solution 500 mg/10ml | 1 | |
| ganciclovir sodium intravenous solution reconstituted 500 mg | 1 | |
| GENVOYA ORAL TABLET 150-150-200-10 MG | 3 | |
| HARVONI ORAL PACKET 33.75-150 MG, 45-200 MG | E | |
| HARVONI ORAL TABLET 45-200 MG, 90-400 MG | E | |
| HEPCLUDEX SUBCUTANEOUS SOLUTION RECONSTITUTED 8.5 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| IDVYNSO ORAL TABLET 100-0.25 MG | 2 | PA; QL (1 EA per 1 day) |
| INTELENCE ORAL TABLET 25 MG | 2 | |
| ISENTRESS HD ORAL TABLET 600 MG | 2 | |
| ISENTRESS ORAL PACKET 100 MG | 2 | |
| ISENTRESS ORAL TABLET 400 MG | 2 | |
| ISENTRESS ORAL TABLET CHEWABLE 100 MG, 25 MG | 2 | |
| JULUCA ORAL TABLET 50-25 MG | 2 | |
| KALETRA ORAL SOLUTION 400-100 MG/5ML | 3 | |
| LAGEVRIO ORAL CAPSULE 200 MG | 3 | QL (8 EA per 1 day); AL (Min 18 Years) |
| lamivudine oral solution 10 mg/ml, 300 mg/30ml | 1 | |
| lamivudine oral tablet 100 mg, 150 mg, 300 mg | 1 | |
| lamivudine-zidovudine oral tablet 150-300 mg | 1 | |
| LEDIPASVIR-SOFOSBUVIR ORAL TABLET 90-400 MG | E | |
| LIVTENCITY ORAL TABLET 200 MG | 4 | PA; SP |
| lopinavir-ritonavir oral tablet 100-25 mg, 200-50 mg | 1 | |
| maraviroc oral tablet 150 mg, 300 mg | 1 | PA |
| MAVYRET ORAL PACKET 50-20 MG | 4 | PA; SP; QL (5 EA per 1 day) |
| MAVYRET ORAL TABLET 100-40 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| nevirapine er oral tablet extended release 24 hour 400 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| nevirapine oral suspension 50 mg/5ml | 1 | |
| nevirapine oral tablet 200 mg | 1 | |
| NORVIR ORAL PACKET 100 MG | 2 | |
| NORVIR ORAL TABLET 100 MG | 3 | |
| ODEFSEY ORAL TABLET 200-25-25 MG | 3 | |
| oseltamivir phosphate oral capsule 30 mg | 1 | QL (40 EA per 365 days) |
| oseltamivir phosphate oral capsule 45 mg, 75 mg | 1 | QL (20 EA per 365 days) |
| oseltamivir phosphate oral suspension reconstituted 6 mg/ml | 1 | QL (360 ML per 365 days) |
| PAPZIMEOS SUBCUTANEOUS SUSPENSION 500000000000 PU/ML | E | |
| PAXLOVID (150/100) ORAL TABLET THERAPY PACK 10 X 150 MG & 10 X 100MG | 2 | QL (4 EA per 1 day); AL (Min 12 Years) |
| PAXLOVID (300/100 & 150/100) ORAL TABLET THERAPY PACK 6 X 150 MG & 5 X 100MG | 2 | QL (11 EA per 56 days); AL (Max 11 Years) |
| PAXLOVID (300/100) ORAL TABLET THERAPY PACK 20 X 150 MG & 10 X 100MG | 2 | QL (6 EA per 1 day); AL (Min 12 Years) |
| PEGASYS SUBCUTANEOUS SOLUTION 180 MCG/ML | 4 | PA; SP |
| PEGASYS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 180 MCG/0.5ML | 4 | PA; SP |
| PIFELTRO ORAL TABLET 100 MG | 2 | |
| PREVYMIS INTRAVENOUS SOLUTION 240 MG/12ML, 480 MG/24ML | 4 | SP |
| PREVYMIS ORAL PACKET 120 MG, 20 MG | 4 | SP |
| PREVYMIS ORAL TABLET 240 MG, 480 MG | 4 | SP |
| PREZCOBIX ORAL TABLET 675-150 MG, 800-150 MG | 2 | |
| PREZISTA ORAL SUSPENSION 100 MG/ML | 2 | |
| PREZISTA ORAL TABLET 150 MG, 75 MG | 2 | |
| RAPIVAB INTRAVENOUS SOLUTION 200 MG/20ML | 3 | |
| RELENZA DISKHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 5 MG/ACT | 3 | QL (40 EA per 365 days) |
| RETROVIR INTRAVENOUS SOLUTION 10 MG/ML | 2 | |
| RETROVIR ORAL CAPSULE 100 MG | 3 | |
| RETROVIR ORAL SYRUP 50 MG/5ML | 3 | |
| REYATAZ ORAL PACKET 50 MG | 2 | |
| ribavirin oral capsule 200 mg | 4 | SP |
| ribavirin oral tablet 200 mg | 4 | SP |
| rilpivirine hcl oral tablet 25 mg | 1 | |
| rimantadine hcl oral tablet 100 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ritonavir oral tablet 100 mg | 1 | |
| RUKOBIA ORAL TABLET EXTENDED RELEASE 12 HOUR 600 MG | 2 | |
| SOFOSBUVIR-VELPATASVIR ORAL TABLET 400-100 MG | E | |
| SOVALDI ORAL PACKET 150 MG, 200 MG | E | |
| SOVALDI ORAL TABLET 200 MG, 400 MG | E | |
| STRIBILD ORAL TABLET 150-150-200-300 MG | 3 | |
| SUNLENCA ORAL TABLET 300 MG | 3 | PA; QL (8 EA per 365 days) |
| SUNLENCA ORAL TABLET THERAPY PACK 5 X 300 MG | 3 | PA; QL (10 EA per 365 days) |
| SUNLENCA SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML | 3 | PA; QL (9 ML per 365 days) |
| SYMFI ORAL TABLET 600-300-300 MG | 2 | |
| SYMTUZA ORAL TABLET 800-150-200-10 MG | 3 | |
| TAMIFLU ORAL CAPSULE 75 MG | E | |
| TAMIFLU ORAL SUSPENSION RECONSTITUTED 6 MG/ML | E | |
| TEMBEXA ORAL SUSPENSION 10 MG/ML | 3 | |
| TEMBEXA ORAL TABLET 100 MG | 3 | |
| tenofovir disoproxil fumarate oral tablet 300 mg | 1 | ACA |
| TIVICAY ORAL TABLET 50 MG | 3 | |
| TIVICAY PD ORAL TABLET SOLUBLE 5 MG | 3 | |
| TPOXX INTRAVENOUS SOLUTION 200 MG/20ML | 3 | |
| TPOXX ORAL CAPSULE 200 MG | 3 | |
| TRIUMEQ ORAL TABLET 600-50-300 MG | 2 | |
| TRIUMEQ PD ORAL TABLET SOLUBLE 60-5-30 MG | 3 | |
| TROGARZO INTRAVENOUS SOLUTION 200 MG/1.33ML | 3 | |
| TRUVADA ORAL TABLET 100-150 MG, 133-200 MG, 167-250 MG, 200-300 MG | E | |
| valacyclovir hcl oral tablet 1 gm, 500 mg | 1 | QL (4 EA per 1 day) |
| valganciclovir hcl oral solution reconstituted 50 mg/ml | 1 | |
| valganciclovir hcl oral tablet 450 mg | 1 | |
| VALTREX ORAL TABLET 1 GM, 500 MG | E | |
| VEKLURY INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 3 | QL (2 EA per 1 day); AL (Min 12 Years) |
| VEMLIDY ORAL TABLET 25 MG | E | |
| VIRACEPT ORAL TABLET 250 MG, 625 MG | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VIREAD ORAL POWDER 40 MG/GM | 2 | |
| VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG | 2 | |
| VOCABRIA ORAL TABLET 30 MG | E | ACA |
| VOSEVI ORAL TABLET 400-100-100 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| XOCOVA ORAL TABLET 125 MG | 2 | QL (7 EA per 30 days) |
| XOFLUZA (40 MG DOSE) ORAL TABLET THERAPY PACK 1 X 40 MG | 3 | QL (2 EA per 365 days) |
| XOFLUZA (80 MG DOSE) ORAL TABLET THERAPY PACK 1 X 80 MG | 3 | QL (2 EA per 365 days) |
| YEZTUGO ORAL TABLET 300 MG | E | |
| YEZTUGO SUBCUTANEOUS SOLUTION 463.5 MG/1.5ML | E | |
| ZIAGEN ORAL SOLUTION 20 MG/ML | 3 | |
| zidovudine oral capsule 100 mg | 1 | |
| zidovudine oral syrup 50 mg/5ml | 1 | |
| zidovudine oral tablet 300 mg | 1 | |
| ZOVIRAX EXTERNAL CREAM 5 % | E | |
| ZOVIRAX EXTERNAL OINTMENT 5 % | E | |
| **Anxiolytics - Drugs for Anxiety** | | |
| alprazolam er oral tablet extended release 24 hour 0.5 mg, 1 mg | 1 | QL (1 EA per 1 day) |
| alprazolam er oral tablet extended release 24 hour 2 mg | 1 | QL (5 EA per 1 day) |
| alprazolam er oral tablet extended release 24 hour 3 mg | 1 | QL (3 EA per 1 day) |
| alprazolam intensol oral concentrate 1 mg/ml | 1 | QL (10 ML per 1 day) |
| alprazolam oral tablet 0.25 mg, 0.5 mg, 1 mg | 1 | QL (4 EA per 1 day) |
| alprazolam oral tablet 2 mg | 1 | QL (5 EA per 1 day) |
| alprazolam xr oral tablet extended release 24 hour 0.5 mg, 1 mg | 1 | QL (1 EA per 1 day) |
| alprazolam xr oral tablet extended release 24 hour 2 mg | 1 | QL (5 EA per 1 day) |
| alprazolam xr oral tablet extended release 24 hour 3 mg | 1 | QL (3 EA per 1 day) |
| ATIVAN INJECTION SOLUTION 2 MG/ML, 4 MG/ML | 3 | |
| ATIVAN ORAL TABLET 0.5 MG, 1 MG, 2 MG | E | |
| BUCAPSOL ORAL CAPSULE 10 MG, 15 MG, 5 MG, 7.5 MG | E | |
| buspirone hcl oral tablet 10 mg, 15 mg, 30 mg, 5 mg, 7.5 mg | 1 | |
| chlordiazepoxide hcl oral capsule 10 mg | 1 | QL (30 EA per 1 day) |
| chlordiazepoxide hcl oral capsule 25 mg | 1 | QL (12 EA per 1 day) |
| chlordiazepoxide hcl oral capsule 5 mg | 1 | QL (4 EA per 1 day) |
| clonazepam oral tablet 0.25 mg, 0.5 mg, 1 mg | 1 | QL (3 EA per 1 day) |
| clonazepam oral tablet 2 mg | 1 | QL (10 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| clonazepam oral tablet dispersible 0.125 mg, 0.25 mg, 0.5 mg, 1 mg | 1 | QL (3 EA per 1 day) |
| clonazepam oral tablet dispersible 2 mg | 1 | QL (10 EA per 1 day) |
| clorazepate dipotassium oral tablet 15 mg | 1 | QL (6 EA per 1 day) |
| clorazepate dipotassium oral tablet 3.75 mg | 1 | QL (24 EA per 1 day) |
| clorazepate dipotassium oral tablet 7.5 mg | 1 | QL (12 EA per 1 day) |
| diazepam injection solution 10 mg/2ml | 1 | |
| diazepam intensol oral concentrate 5 mg/ml | 1 | |
| diazepam oral concentrate 5 mg/ml | 1 | |
| diazepam oral solution 5 mg/5ml | 1 | |
| diazepam oral tablet 10 mg, 2 mg, 5 mg | 1 | |
| diazepam solution 5 mg/ml injection | 1 | |
| DIAZEPAM SOLUTION 5 MG/ML INJECTION | 3 | |
| estazolam oral tablet 1 mg, 2 mg | 1 | QL (1 EA per 1 day) |
| HYDROXYZINE HCL INTRAMUSCULAR SOLUTION 25 MG/ML, 50 MG/ML | 3 | |
| hydroxyzine hcl oral syrup 10 mg/5ml, 50 mg/25ml | 1 | |
| hydroxyzine hcl oral tablet 10 mg, 25 mg, 50 mg | 1 | |
| hydroxyzine pamoate oral capsule 25 mg, 50 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| KLONOPIN ORAL TABLET 0.5 MG, 1 MG, 2 MG | E | |
| lorazepam injection solution 2 mg/ml, 4 mg/ml | 1 | |
| lorazepam intensol oral concentrate 2 mg/ml | 1 | QL (5 ML per 1 day) |
| lorazepam oral concentrate 2 mg/ml | 1 | QL (5 ML per 1 day) |
| lorazepam oral tablet 0.5 mg, 1 mg | 1 | QL (3 EA per 1 day) |
| lorazepam oral tablet 2 mg | 1 | QL (5 EA per 1 day) |
| LOREEV XR ORAL CAPSULE ER 24 HOUR SPRINKLE 1 MG, 1.5 MG, 2 MG, 3 MG | E | |
| meprobamate oral tablet 200 mg, 400 mg | 1 | |
| oxazepam oral capsule 10 mg, 15 mg, 30 mg | 1 | QL (4 EA per 1 day) |
| quazepam oral tablet 15 mg | 1 | QL (1 EA per 1 day) |
| triazolam oral tablet 0.125 mg, 0.25 mg | 1 | QL (2 EA per 1 day) |
| VALIUM ORAL TABLET 10 MG, 2 MG, 5 MG | E | |
| XANAX ORAL TABLET 0.25 MG, 0.5 MG, 1 MG, 2 MG | E | |
| **Bipolar Agents - Drugs for Mood Disorders** | | |
| EQUETRO ORAL CAPSULE EXTENDED RELEASE 12 HOUR 100 MG, 200 MG, 300 MG | 3 | |
| lithium carbonate er oral tablet extended release 300 mg, 450 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| lithium carbonate oral capsule 150 mg, 300 mg, 600 mg | 1 | |
| lithium carbonate oral tablet 300 mg | 1 | |
| lithium oral solution 8 meq/5ml | 1 | |
| **Blood Products and Modifiers - Drugs for Blood Disorders** | | |
| ADAKVEO INTRAVENOUS SOLUTION 100 MG/10ML | 4 | PA; SP |
| ADVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| ADYNOVATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT, 750 UNIT | 4 | SP |
| AFSTYLA INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| ALHEMO SUBCUTANEOUS SOLUTION PEN-INJECTOR 150 MG/1.5ML, 300 MG/3ML, 60 MG/1.5ML | 4 | SP |
| ALPHANATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT | 4 | SP |
| ALPHANINE SD INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT | 4 | SP |
| ALPROLIX INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| ALTUVIIIO INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| ALVAIZ ORAL TABLET 18 MG, 36 MG, 54 MG, 9 MG | 4 | PA; SP |
| aminocaproic acid intravenous solution 250 mg/ml | 1 | |
| aminocaproic acid oral solution 0.25 gm/ml | 1 | |
| aminocaproic acid oral tablet 1000 mg, 500 mg | 1 | |
| anagrelide hcl oral capsule 0.5 mg, 1 mg | 1 | |
| APHEXDA SUBCUTANEOUS SOLUTION RECONSTITUTED 62 MG | 4 | SP |
| AQVESME ORAL TABLET 100 MG | 4 | PA; SP; QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION 100 MCG/ML, 200 MCG/ML, 25 MCG/ML, 40 MCG/ML, 60 MCG/ML | 4 | PA; SP |
| ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML, 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML | 4 | PA; SP |
| BALFAXAR INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 500 UNIT | 3 | |
| BENEFIX INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| BKEMV INTRAVENOUS SOLUTION 300 MG/30ML | 4 | PA; SP |
| COAGADEX INTRAVENOUS SOLUTION RECONSTITUTED 250 UNIT, 500 UNIT | 4 | SP |
| CORIFACT INTRAVENOUS KIT 1000-1600 UNIT | 4 | SP |
| CYKLOKAPRON INTRAVENOUS SOLUTION 1000 MG/10ML | 3 | |
| DOPTELET ORAL TABLET 20 MG | 4 | PA; SP |
| DOPTELET SPRINKLE ORAL CAPSULE SPRINKLE 10 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| ELOCTATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT, 5000 UNIT, 6000 UNIT, 750 UNIT | 4 | SP |
| eltrombopag olamine oral packet 12.5 mg, 25 mg | 4 | PA; SP |
| eltrombopag olamine oral tablet 12.5 mg, 25 mg, 50 mg, 75 mg | 4 | PA; SP |
| EMPAVELI SUBCUTANEOUS SOLUTION 1080 MG/20ML | 4 | PA; SP |
| ENJAYMO INTRAVENOUS SOLUTION 1100 MG/22ML | 4 | PA; SP |
| EPOGEN INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML | E | |
| EPYSQLI INTRAVENOUS SOLUTION 300 MG/30ML | 4 | PA; SP |
| ESPEROCT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| FABHALTA ORAL CAPSULE 200 MG | 4 | PA; SP; QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FEIBA INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2500 UNIT, 500 UNIT | 4 | SP |
| FESILTY INTRAVENOUS SOLUTION RECONSTITUTED 1 GM | 4 | SP |
| FIBRYGA INTRAVENOUS SOLUTION RECONSTITUTED 1 GM, 2 GM | 4 | SP |
| FULPHILA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | E | |
| FYLNETRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | E | |
| GRANIX SUBCUTANEOUS SOLUTION 300 MCG/ML | E | |
| GRANIX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | E | |
| HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 12 MG/0.4ML, 150 MG/ML, 30 MG/ML, 300 MG/2ML, 60 MG/0.4ML | 4 | SP |
| HEMOFIL M INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1700 UNIT, 250 UNIT, 500 UNIT | 4 | SP |
| hetastarch-nacl intravenous solution 6-0.9 % | 1 | |
| HEXTEND INTRAVENOUS SOLUTION 6 % | 3 | |
| HUMATE-P INTRAVENOUS SOLUTION RECONSTITUTED 1000-2400 UNIT, 250-600 UNIT, 500-1200 UNIT | 4 | SP |
| HYMPAVZI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/0.5ML | 4 | SP |
| IDELVION INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3500 UNIT, 500 UNIT | 4 | SP |
| IXINITY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| JIVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| KCENTRA INTRAVENOUS KIT 1000 UNIT, 500 UNIT | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| KOATE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 250 UNIT, 500 UNIT | 4 | SP |
| KOATE-DVI INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT | 4 | SP |
| KOVALTRY INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| LEUKINE INJECTION SOLUTION RECONSTITUTED 250 MCG | 4 | PA; SP |
| LMD IN D5W INTRAVENOUS SOLUTION 10-5 % | 3 | |
| LMD IN NACL INTRAVENOUS SOLUTION 10-0.9 % | 3 | |
| MIRCERA INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.3ML, 120 MCG/0.3ML, 150 MCG/0.3ML, 200 MCG/0.3ML, 30 MCG/0.3ML, 50 MCG/0.3ML, 75 MCG/0.3ML | 4 | PA; SP |
| MULPLETA ORAL TABLET 3 MG | 4 | PA; SP |
| NEULASTA ONPRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | 4 | PA; SP |
| NEULASTA SUBCUTANEOUS SOLUTION 4 MG/0.4ML | 4 | PA; SP |
| NEULASTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | 4 | PA; SP |
| NEUPOGEN INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML | E | |
| NEUPOGEN INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | E | |
| NIVESTYM INJECTION SOLUTION 300 MCG/ML, 480 MCG/1.6ML | 4 | PA; SP |
| NIVESTYM INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | 4 | PA; SP |
| NOVOEIGHT INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| NOVOSEVEN RT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG, 8 MG | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NPLATE SUBCUTANEOUS SOLUTION RECONSTITUTED 125 MCG, 250 MCG, 500 MCG | 4 | PA; SP |
| NUWIQ INTRAVENOUS KIT 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| NUWIQ INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 2000 UNIT, 250 UNIT, 2500 UNIT, 3000 UNIT, 4000 UNIT, 500 UNIT | 4 | SP |
| NYPOZI INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | E | |
| NYVEPRIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | E | |
| OBIZUR INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT | 4 | SP |
| PIASKY INJECTION SOLUTION 340 MG/2ML | E | |
| plerixafor subcutaneous solution 24 mg/1.2ml | 4 | SP |
| PROCRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML | 4 | PA; SP |
| PROFILNINE INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 1500 UNIT, 500 UNIT | 4 | SP |
| PROMACTA ORAL PACKET 12.5 MG, 25 MG | E | |
| PROMACTA ORAL TABLET 12.5 MG, 25 MG, 50 MG, 75 MG | E | |
| protamine sulfate intravenous solution 10 mg/ml | 1 | |
| PYRUKYND ORAL TABLET 20 MG, 5 MG, 50 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| PYRUKYND TAPER PACK ORAL TABLET THERAPY PACK 5 MG, 7 X 20 MG & 7 X 5 MG, 7 X 50 MG & 7 X 20 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| QFITLIA SUBCUTANEOUS SOLUTION 20 MG/0.2ML | 4 | PA; SP |
| QFITLIA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML | 4 | PA; SP |
| REBINYN INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| REBLOZYL SUBCUTANEOUS SOLUTION RECONSTITUTED 25 MG, 75 MG | 4 | PA; SP |
| RECOMBINATE INTRAVENOUS SOLUTION RECONSTITUTED 1241-1800 UNIT, 1801-2400 UNIT, 220-400 UNIT, 401-800 UNIT, 801-1240 UNIT | 4 | SP |
| RECOTHROM EXTERNAL SOLUTION RECONSTITUTED 20000 UNIT, 5000 UNIT | 3 | |
| RECOTHROM SPRAY KIT EXTERNAL SOLUTION RECONSTITUTED 20000 UNIT | 3 | |
| RELEUKO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | E | |
| RETACRIT INJECTION SOLUTION 10000 UNIT/ML, 2000 UNIT/ML, 20000 UNIT/ML, 3000 UNIT/ML, 4000 UNIT/ML, 40000 UNIT/ML | 4 | PA; SP |
| RIASTAP INTRAVENOUS SOLUTION RECONSTITUTED 1 GM | 4 | SP |
| RIXUBIS INTRAVENOUS SOLUTION RECONSTITUTED 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| ROLVEDON SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 13.2 MG/0.6ML | E | |
| RYZNEUTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML | E | |
| SEVENFACT INTRAVENOUS SOLUTION RECONSTITUTED 1 MG, 2 MG, 5 MG | E | |
| SOLIRIS INTRAVENOUS SOLUTION 300 MG/30ML | E | |
| STIMUFEND SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | E | |
| TAVALISSE ORAL TABLET 100 MG, 150 MG | 4 | PA; SP |
| THROMBIN-JMI EPISTAXIS EXTERNAL KIT 5000 UNIT | 3 | |
| THROMBIN-JMI EXTERNAL KIT 20000 UNIT, 5000 UNIT | 3 | |
| THROMBIN-JMI EXTERNAL SOLUTION RECONSTITUTED 20000 UNIT, 5000 UNIT | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| THROMBOGEN EXTERNAL KIT 10000 UNIT | 3 | |
| THROMBOGEN EXTERNAL SOLUTION RECONSTITUTED 1000 UNIT, 10000 UNIT | 3 | |
| tranexamic acid intravenous solution 1000 mg/10ml | 1 | |
| tranexamic acid oral tablet 650 mg | 1 | |
| tranexamic acid-nacl intravenous solution 1000-0.7 mg/100ml-% | 1 | |
| TRETTEN INTRAVENOUS SOLUTION RECONSTITUTED 2500 UNIT | 4 | SP |
| UDENYCA ONBODY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | 4 | PA; SP |
| UDENYCA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6 MG/0.6ML | 4 | PA; SP |
| UDENYCA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | 4 | PA; SP |
| ULTOMIRIS INTRAVENOUS SOLUTION 1100 MG/11ML, 300 MG/3ML | 4 | PA; SP |
| VAFSEO ORAL TABLET 150 MG, 300 MG | E | |
| VONVENDI INTRAVENOUS SOLUTION RECONSTITUTED 1300 UNIT, 650 UNIT | 4 | SP |
| VOYDEYA ORAL TABLET 100 MG | 4 | PA; SP; QL (6 EA per 1 day) |
| VOYDEYA ORAL TABLET THERAPY PACK 50 & 100 MG | 4 | PA; SP; QL (6 EA per 1 day) |
| WAYRILZ ORAL TABLET 400 MG | E | |
| WILATE INTRAVENOUS KIT 1000-1000 UNIT, 500-500 UNIT | 4 | SP |
| XOLREMDI ORAL CAPSULE 100 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| XYNTHA INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 500 UNIT | 4 | SP |
| XYNTHA SOLOFUSE INTRAVENOUS KIT 1000 UNIT, 2000 UNIT, 250 UNIT, 3000 UNIT, 500 UNIT | 4 | SP |
| YARTEMLEA INTRAVENOUS SOLUTION 370 MG/2ML | 4 | PA; SP |
| ZARXIO INJECTION SOLUTION PREFILLED SYRINGE 300 MCG/0.5ML, 480 MCG/0.8ML | 4 | PA; SP |
| ZIEXTENZO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6 MG/0.6ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Cardiovascular Agents - Drugs for Heart and Circulation Conditions** | | |
| acebutolol hcl oral capsule 200 mg, 400 mg | 1 | |
| acetazolamide sodium injection solution reconstituted 500 mg | 1 | |
| adenosine intravenous solution 12 mg/4ml, 6 mg/2ml | 1 | |
| AKOVAZ INTRAVENOUS SOLUTION 50 MG/ML | 3 | |
| AKOVAZ INTRAVENOUS SOLUTION PREFILLED SYRINGE 25 MG/5ML | 3 | |
| aliskiren fumarate oral tablet 150 mg, 300 mg | 1 | |
| amiloride hcl oral tablet 5 mg | 1 | |
| amiloride-hydrochlorothiazide oral tablet 5-50 mg | 1 | |
| amiodarone hcl intravenous solution 150 mg/3ml, 450 mg/9ml, 900 mg/18ml | 1 | |
| amiodarone hcl oral tablet 100 mg, 200 mg, 400 mg | 1 | |
| amlodipine besylate oral tablet 10 mg, 2.5 mg, 5 mg | 1 | |
| amlodipine besylate-benazepril hcl oral capsule 10-20 mg, 10-40 mg, 2.5-10 mg, 5-10 mg, 5-20 mg, 5-40 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| amlodipine besylate-valsartan oral tablet 10-160 mg, 10-320 mg, 5-160 mg, 5-320 mg | 1 | |
| amlodipine-atorvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg, 2.5-10 mg, 2.5-20 mg, 2.5-40 mg, 5-10 mg, 5-20 mg, 5-40 mg, 5-80 mg | 1 | |
| amlodipine-valsartan-hctz oral tablet 10-160-12.5 mg, 10-160-25 mg, 10-320-25 mg, 5-160-12.5 mg, 5-160-25 mg | 1 | |
| ARBLI ORAL SUSPENSION 10 MG/ML | 3 | PA; AL (Max 10 Years) |
| ASCLERA INTRAVENOUS SOLUTION 0.5 %, 1 % | 3 | |
| ATACAND ORAL TABLET 16 MG, 32 MG, 4 MG, 8 MG | E | |
| atenolol oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| atenolol-chlorthalidone oral tablet 100-25 mg, 50-25 mg | 1 | |
| ATORVALIQ ORAL SUSPENSION 20 MG/5ML | E | |
| atorvastatin calcium oral tablet 10 mg, 20 mg | 1 | ACA |
| atorvastatin calcium oral tablet 40 mg, 80 mg | 1 | |
| ATTRUBY ORAL TABLET THERAPY PACK 356 MG | E | |
| AVAPRO ORAL TABLET 150 MG, 300 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| azilsartan medoxomil oral tablet 40 mg, 80 mg | 1 | |
| AZOR ORAL TABLET 10-20 MG, 10-40 MG, 5-20 MG, 5-40 MG | E | |
| BAXFENDY ORAL TABLET 1 MG, 2 MG | 3 | PA; QL (1 EA per 1 day) |
| benazepril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg | 1 | |
| benazepril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg, 5-6.25 mg | 1 | |
| BENICAR HCT ORAL TABLET 20-12.5 MG, 40-12.5 MG, 40-25 MG | E | |
| BENICAR ORAL TABLET 20 MG, 40 MG, 5 MG | E | |
| betaxolol hcl oral tablet 10 mg, 20 mg | 1 | |
| BIDIL ORAL TABLET 20-37.5 MG | 3 | |
| BIORPHEN INTRAVENOUS SOLUTION 0.5 MG/5ML | 3 | |
| bisoprolol fumarate oral tablet 10 mg, 5 mg | 1 | |
| bisoprolol-hydrochlorothiazide oral tablet 10-6.25 mg, 2.5-6.25 mg, 5-6.25 mg | 1 | |
| BREVIBLOC IN NACL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML | 3 | |
| BREVIBLOC INTRAVENOUS SOLUTION 100 MG/10ML | 3 | |
| BREVIBLOC PREMIXED DS INTRAVENOUS SOLUTION 2000 MG/100ML | 3 | |
| BREVIBLOC PREMIXED INTRAVENOUS SOLUTION 2500 MG/250ML | 3 | |
| bumetanide injection solution 0.25 mg/ml | 1 | |
| bumetanide oral tablet 0.5 mg, 1 mg, 2 mg | 1 | |
| BYSTOLIC ORAL TABLET 10 MG, 2.5 MG, 20 MG, 5 MG | E | |
| CAMZYOS ORAL CAPSULE 10 MG, 15 MG, 2.5 MG, 5 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| captopril-hydrochlorothiazide oral tablet 25-15 mg, 25-25 mg, 50-15 mg, 50-25 mg | 1 | |
| CARDAMYST NASAL SOLUTION 2 X 70 MG/DOSE | E | |
| CARDENE IV INTRAVENOUS SOLUTION 2.5 MG/ML, 20-0.86 MG/200ML-%, 40-0.83 MG/200ML-% | 3 | |
| CARDIZEM LA ORAL TABLET EXTENDED RELEASE 24 HOUR 120 MG, 180 MG, 240 MG, 300 MG, 360 MG, 420 MG | E | |
| cartia xt oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg | 1 | |
| carvedilol oral tablet 12.5 mg, 25 mg, 3.125 mg, 6.25 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CATAPRES-TTS-1 TRANSDERMAL PATCH WEEKLY 0.1 MG/24HR | E | |
| CATAPRES-TTS-2 TRANSDERMAL PATCH WEEKLY 0.2 MG/24HR | E | |
| CATAPRES-TTS-3 TRANSDERMAL PATCH WEEKLY 0.3 MG/24HR | E | |
| chlorothiazide sodium intravenous solution reconstituted 500 mg | 1 | |
| chlorthalidone oral tablet 25 mg, 50 mg | 1 | |
| cholestyramine light oral packet 4 gm | 1 | |
| cholestyramine light oral powder 4 gm/dose | 1 | |
| cholestyramine oral packet 4 gm | 1 | |
| cholestyramine oral powder 4 gm/dose | 1 | |
| CLEVIPREX INTRAVENOUS EMULSION 25 MG/50ML, 50 MG/100ML | 3 | |
| clonidine hcl oral tablet 0.1 mg, 0.2 mg, 0.3 mg | 1 | |
| colesevelam hcl oral tablet 625 mg | 1 | |
| COLESTID ORAL GRANULES 5 GM | E | |
| COLESTID ORAL TABLET 1 GM | E | |
| colestipol hcl oral granules 5 gm | 1 | |
| colestipol hcl oral packet 5 gm | 1 | |
| colestipol hcl oral tablet 1 gm | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CONJUPRI ORAL TABLET 2.5 MG, 5 MG | E | |
| COREG CR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 20 MG, 40 MG, 80 MG | E | |
| COREG ORAL TABLET 12.5 MG, 25 MG, 3.125 MG, 6.25 MG | E | |
| CORLANOR ORAL SOLUTION 5 MG/5ML | E | |
| CORLANOR ORAL TABLET 5 MG, 7.5 MG | E | |
| CORVERT INTRAVENOUS SOLUTION 1 MG/10ML | 3 | |
| COZAAR ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| CRESTOR ORAL TABLET 10 MG, 20 MG, 40 MG, 5 MG | E | |
| digoxin injection solution 0.25 mg/ml | 1 | |
| digoxin oral solution 0.05 mg/ml | 1 | |
| digoxin oral tablet 125 mcg, 250 mcg, 62.5 mcg | 1 | |
| diltiazem hcl er beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg | 1 | |
| diltiazem hcl er coated beads oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| diltiazem hcl er oral capsule extended release 12 hour 60 mg, 90 mg | 1 | |
| diltiazem hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg | 1 | |
| diltiazem hcl intravenous solution 125 mg/25ml, 25 mg/5ml, 50 mg/10ml | 1 | |
| diltiazem hcl oral tablet 120 mg, 30 mg, 60 mg, 90 mg | 1 | |
| DILTIAZEM HCL-DEXTROSE INTRAVENOUS SOLUTION 125-5 MG/125ML-% | 3 | |
| DILTIAZEM HCL-SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.72 MG/100ML-% | 3 | |
| dilt-xr oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg | 1 | |
| DIOVAN HCT ORAL TABLET 160-12.5 MG, 160-25 MG, 320-12.5 MG, 320-25 MG, 80-12.5 MG | E | |
| DIOVAN ORAL TABLET 160 MG, 320 MG, 40 MG, 80 MG | E | |
| disopyramide phosphate oral capsule 100 mg, 150 mg | 1 | |
| dobutamine hcl intravenous solution 12.5 mg/ml | 1 | |
| dobutamine-dextrose intravenous solution 1-5 mg/ml-%, 2-5 mg/ml-%, 4-5 mg/ml-% | 1 | |
| dofetilide oral capsule 125 mcg, 250 mcg, 500 mcg | 1 | |
| dopamine hcl intravenous solution 40 mg/ml | 1 | |
| dopamine-dextrose intravenous solution 0.8-5 mg/ml-%, 1.6-5 mg/ml-%, 3.2-5 mg/ml-% | 1 | |
| doxazosin mesylate oral tablet 1 mg, 2 mg, 4 mg, 8 mg | 1 | |
| EDARBI ORAL TABLET 40 MG, 80 MG | E | |
| EDARBYCLOR ORAL TABLET 40-12.5 MG, 40-25 MG | 3 | ST |
| EMERPHED INTRAVENOUS SOLUTION PREFILLED SYRINGE 25 MG/5ML | 3 | |
| enalapril maleate oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg | 1 | |
| enalaprilat intravenous solution 1.25 mg/ml | 1 | |
| enalapril-hydrochlorothiazide oral tablet 10-25 mg, 5-12.5 mg | 1 | |
| ENBUMYST NASAL SOLUTION 0.5 MG/0.1ML | E | |
| ENTRESTO ORAL CAPSULE SPRINKLE 15-16 MG, 6-6 MG | 2 | QL (8 EA per 1 day) |
| ENTRESTO ORAL TABLET 24-26 MG, 49-51 MG, 97-103 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ephedrine sulf (pressors)+rfid intravenous solution prefilled syringe 25 mg/5ml | 1 | |
| ephedrine sulfate (pressors) intravenous solution 50 mg/ml | 1 | |
| ephedrine sulfate (pressors) solution prefilled syringe 25 mg/5ml intravenous | 1 | |
| EPHEDRINE SULFATE (PRESSORS) SOLUTION PREFILLED SYRINGE 25 MG/5ML INTRAVENOUS | 3 | |
| EPHEDRINE SULFATE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 10-0.9 MG/ML-%, 100-0.9 MG/10ML-%, 25-0.9 MG/5ML-%, 50-0.9 MG/10ML-%, 50-0.9 MG/5ML-% | 3 | |
| EPINEPHRINE HCL-DEXTROSE INTRAVENOUS SOLUTION 4-5 MG/250ML-% | 3 | |
| EPINEPHRINE HCL-NACL INTRAVENOUS SOLUTION 8-0.9 MG/250ML-% | 3 | |
| EPINEPHRINE INJECTION SOLUTION PREFILLED SYRINGE 1 MG/ML | 3 | |
| epinephrine intravenous solution prefilled syringe 1 mg/10ml | 1 | |
| epinephrine pf injection solution 1 mg/ml | 1 | |
| EPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 2-5 MG/250ML-% | 3 | |
| EPINEPHRINE-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-% | 3 | |
| eplerenone oral tablet 25 mg, 50 mg | 1 | |
| esmolol hcl intravenous solution 100 mg/10ml | 1 | |
| ESMOLOL HCL INTRAVENOUS SOLUTION 2000 MG/100ML, 2500 MG/250ML | 3 | |
| esmolol hcl-sodium chloride intravenous solution 2000 mg/100ml, 2500 mg/250ml | 1 | |
| ethacrynate sodium intravenous solution reconstituted 50 mg | 1 | |
| ethacrynic acid oral tablet 25 mg | 1 | |
| ETHAMOLIN INTRAVENOUS SOLUTION 5 % | 3 | |
| EVKEEZA INTRAVENOUS SOLUTION 1200 MG/8ML, 345 MG/2.3ML | 4 | PA; SP |
| EXFORGE HCT ORAL TABLET 10-160-12.5 MG, 10-160-25 MG, 10-320-25 MG, 5-160-12.5 MG, 5-160-25 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EXFORGE ORAL TABLET 10-160 MG, 10-320 MG, 5-160 MG, 5-320 MG | E | |
| ezetimibe oral tablet 10 mg | 1 | |
| ezetimibe-simvastatin oral tablet 10-10 mg, 10-20 mg, 10-40 mg, 10-80 mg | 1 | |
| felodipine er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg | 1 | |
| fenofibrate micronized oral capsule 134 mg, 200 mg, 43 mg, 67 mg | 1 | |
| fenofibrate oral capsule 134 mg, 200 mg, 67 mg | 1 | |
| fenofibrate oral tablet 145 mg, 160 mg, 48 mg, 54 mg | 1 | |
| fenofibric acid oral capsule delayed release 135 mg, 45 mg | 1 | |
| flecainide acetate oral tablet 100 mg, 150 mg, 50 mg | 1 | |
| fosinopril sodium oral tablet 10 mg, 20 mg, 40 mg | 1 | |
| fosinopril sodium-hctz oral tablet 10-12.5 mg, 20-12.5 mg | 1 | |
| FUROSCIX SUBCUTANEOUS CARTRIDGE KIT 80 MG/10ML | E | |
| FUROSEMIDE IN SODIUM CHLORIDE INTRAVENOUS SOLUTION 100-0.9 MG/100ML-% | 3 | |
| furosemide injection solution 10 mg/ml | 1 | |
| furosemide oral solution 10 mg/ml, 8 mg/ml | 1 | |
| furosemide oral tablet 20 mg, 40 mg, 80 mg | 1 | |
| gemfibrozil oral tablet 600 mg | 1 | |
| guanfacine hcl oral tablet 1 mg, 2 mg | 1 | |
| HEMANGEOL ORAL SOLUTION 4.28 MG/ML | 3 | PA |
| HEMICLOR ORAL TABLET 12.5 MG | E | |
| hydralazine hcl injection solution 20 mg/ml | 1 | |
| hydralazine hcl oral tablet 10 mg, 100 mg, 25 mg, 50 mg | 1 | |
| hydrochlorothiazide oral capsule 12.5 mg | 1 | |
| hydrochlorothiazide oral tablet 12.5 mg, 25 mg, 50 mg | 1 | |
| HYZAAR ORAL TABLET 100-12.5 MG, 100-25 MG, 50-12.5 MG | E | |
| ibutilide fumarate intravenous solution 1 mg/10ml | 1 | |
| icosapent ethyl oral capsule 0.5 gm, 1 gm | 1 | PA |
| IMMPHENTIV INTRAVENOUS SOLUTION 0.5 MG/5ML, 1 MG/10ML | 3 | |
| indapamide oral tablet 1.25 mg, 2.5 mg | 1 | |
| INDERAL LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 160 MG, 60 MG, 80 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| INDERAL XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG | E | |
| INNOPRAN XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 120 MG, 80 MG | E | |
| INPEFA ORAL TABLET 200 MG, 400 MG | E | |
| INZIRQO ORAL SUSPENSION RECONSTITUTED 10 MG/ML | E | |
| irbesartan oral tablet 150 mg, 300 mg, 75 mg | 1 | |
| irbesartan-hydrochlorothiazide oral tablet 150-12.5 mg, 300-12.5 mg | 1 | |
| isosorb dinitrate-hydralazine oral tablet 20-37.5 mg | 1 | |
| isosorbide dinitrate oral tablet 10 mg, 20 mg, 30 mg, 5 mg | 1 | |
| isosorbide mononitrate er oral tablet extended release 24 hour 120 mg, 30 mg, 60 mg | 1 | |
| isosorbide mononitrate oral tablet 10 mg, 20 mg | 1 | |
| isradipine oral capsule 2.5 mg, 5 mg | 1 | |
| ivabradine hcl oral tablet 5 mg, 7.5 mg | 1 | QL (2 EA per 1 day) |
| JAVADIN ORAL SOLUTION 0.02 MG/ML | E | |
| JUXTAPID ORAL CAPSULE 10 MG, 5 MG | 4 | PA; SP; QL (56 EA per 365 days) |
| JUXTAPID ORAL CAPSULE 2 MG | 4 | PA; SP; QL (112 EA per 365 days) |
| JUXTAPID ORAL CAPSULE 20 MG, 30 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| KAPSPARGO SPRINKLE ORAL CAPSULE ER 24 HOUR SPRINKLE 100 MG, 200 MG, 25 MG, 50 MG | E | |
| KATERZIA ORAL SUSPENSION 1 MG/ML | E | |
| labetalol hcl intravenous solution 5 mg/ml | 1 | |
| LABETALOL HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 20 MG/4ML | 3 | |
| labetalol hcl oral tablet 100 mg, 200 mg, 300 mg, 400 mg | 1 | |
| LANOXIN INJECTION SOLUTION 0.25 MG/ML | 3 | |
| LANOXIN PEDIATRIC INJECTION SOLUTION 0.1 MG/ML | 3 | |
| LASIX ONYU SUBCUTANEOUS CARTRIDGE KIT 80 MG/2.67ML | E | |
| LASIX ORAL TABLET 20 MG, 40 MG, 80 MG | E | |
| LEQVIO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 284 MG/1.5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LEROCHOL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/1.2ML | E | |
| LESCOL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 80 MG | E | |
| LEVAMLODIPINE MALEATE ORAL TABLET 2.5 MG, 5 MG | E | |
| LEVOPHED INTRAVENOUS SOLUTION 1 MG/ML | 3 | |
| LIPITOR ORAL TABLET 10 MG, 20 MG, 40 MG, 80 MG | E | |
| lisinopril oral tablet 10 mg, 2.5 mg, 20 mg, 30 mg, 40 mg, 5 mg | 1 | |
| lisinopril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg | 1 | |
| LIVALO ORAL TABLET 1 MG, 2 MG, 4 MG | E | |
| LODOCO ORAL TABLET 0.5 MG | E | |
| LOPID ORAL TABLET 600 MG | 3 | |
| LOPRESSOR ORAL SOLUTION 10 MG/ML | 3 | PA |
| LOPRESSOR ORAL TABLET 100 MG, 12.5 MG, 50 MG | 3 | |
| losartan potassium oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| losartan potassium-hctz oral tablet 100-12.5 mg, 100-25 mg, 50-12.5 mg | 1 | |
| LOTENSIN HCT ORAL TABLET 10-12.5 MG, 20-12.5 MG, 20-25 MG | 3 | |
| LOTENSIN ORAL TABLET 10 MG, 20 MG, 40 MG | 3 | |
| lovastatin oral tablet 10 mg, 20 mg, 40 mg | 1 | ACA |
| LOVAZA ORAL CAPSULE 1 GM | E | |
| mannitol intravenous solution 20 %, 25 % | 1 | |
| methyldopa oral tablet 250 mg, 500 mg | 1 | |
| metolazone oral tablet 10 mg, 2.5 mg, 5 mg | 1 | |
| metoprolol succinate er oral tablet extended release 24 hour 100 mg, 200 mg, 25 mg, 50 mg | 1 | |
| metoprolol tartrate intravenous solution 5 mg/5ml | 1 | |
| metoprolol tartrate oral tablet 100 mg, 25 mg, 37.5 mg, 50 mg, 75 mg | 1 | |
| METOPROLOL TARTRATE ORAL TABLET 12.5 MG | 3 | |
| metoprolol-hydrochlorothiazide oral tablet 100-25 mg, 100-50 mg, 50-25 mg | 1 | |
| metyrosine oral capsule 250 mg | 1 | PA; QL (16 EA per 1 day) |
| mexiletine hcl oral capsule 150 mg, 200 mg, 250 mg | 1 | |
| MICARDIS HCT ORAL TABLET 40-12.5 MG, 80-12.5 MG, 80-25 MG | E | |
| midodrine hcl oral tablet 10 mg, 2.5 mg, 5 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| milrinone lactate in dextrose intravenous solution 20-5 mg/100ml-%, 40-5 mg/200ml-% | 1 | |
| milrinone lactate intravenous solution 10 mg/10ml, 20 mg/20ml, 50 mg/50ml | 1 | |
| minoxidil oral tablet 10 mg, 2.5 mg | 1 | |
| moexipril hcl oral tablet 15 mg, 7.5 mg | 1 | |
| MULTAQ ORAL TABLET 400 MG | 3 | |
| MYQORZO ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| nadolol oral tablet 20 mg, 40 mg, 80 mg | 1 | |
| nebivolol hcl oral tablet 10 mg, 2.5 mg, 20 mg, 5 mg | 1 | |
| NEXLETOL ORAL TABLET 180 MG | 2 | PA; QL (1 EA per 1 day) |
| NEXLIZET ORAL TABLET 180-10 MG | 2 | PA; QL (1 EA per 1 day) |
| NEXTERONE INTRAVENOUS SOLUTION 150-4.21 MG/100ML-%, 360-4.14 MG/200ML-% | 3 | |
| niacin er (antihyperlipidemic) oral tablet extended release 1000 mg, 500 mg, 750 mg | 1 | |
| nicardipine hcl in nacl intravenous solution 20-0.86 mg/200ml-%, 20-0.9 mg/200ml-%, 40-0.83 mg/200ml-%, 40-0.9 mg/200ml-% | 1 | |
| NICARDIPINE HCL IN NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 1-0.9 MG/10ML-% | 3 | |
| nicardipine hcl intravenous solution 2.5 mg/ml | 1 | |
| nifedipine er oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg | 1 | |
| nifedipine er osmotic release oral tablet extended release 24 hour 30 mg, 60 mg, 90 mg | 1 | |
| nifedipine oral capsule 10 mg, 20 mg | 1 | |
| nimodipine oral capsule 30 mg | 1 | |
| NIMODIPINE ORAL SOLUTION 60 MG/20ML | 3 | |
| nitro-bid transdermal ointment 2 % | 1 | |
| nitroglycerin in d5w intravenous solution 100-5 mcg/ml-%, 200-5 mcg/ml-%, 400-5 mcg/ml-% | 1 | |
| nitroglycerin intravenous solution 5 mg/ml | 1 | |
| nitroglycerin rectal ointment 0.4 % | 1 | |
| nitroglycerin sublingual tablet sublingual 0.3 mg, 0.4 mg, 0.6 mg | 1 | |
| nitroglycerin transdermal ointment 2 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| nitroglycerin transdermal patch 24 hour 0.1 mg/hr, 0.2 mg/hr, 0.4 mg/hr, 0.6 mg/hr | 1 | |
| nitroglycerin translingual solution 0.4 mg/spray | 1 | |
| NITROLINGUAL TRANSLINGUAL SOLUTION 0.4 MG/SPRAY | 3 | |
| nitroprusside sodium intravenous solution 25 mg/ml | 1 | |
| NITROSTAT SUBLINGUAL TABLET SUBLINGUAL 0.3 MG, 0.4 MG, 0.6 MG | E | |
| norepinephrine bitartrate intravenous solution 1 mg/ml | 1 | |
| NOREPINEPHRINE-DEXTROSE INTRAVENOUS SOLUTION 16-5 MG/250ML-%, 4-5 MG/250ML-%, 8-5 MG/250ML-%, 8-5 MG/500ML-% | 3 | |
| NOREPINEPHRINE-SODIUM CHLORIDE INTRAVENOUS SOLUTION 16-0.9 MG/250ML-%, 4-0.9 MG/250ML-%, 8-0.9 MG/250ML-% | 3 | |
| NORLIQVA ORAL SOLUTION 1 MG/ML | 3 | PA; AL (Max 10 Years) |
| NORPACE ORAL CAPSULE 100 MG, 150 MG | 3 | |
| NORVASC ORAL TABLET 10 MG, 2.5 MG, 5 MG | E | |
| NYMALIZE ORAL SOLUTION 6 MG/ML | 3 | |
| olmesartan medoxomil oral tablet 20 mg, 40 mg, 5 mg | 1 | |
| olmesartan medoxomil-hctz oral tablet 20-12.5 mg, 40-12.5 mg, 40-25 mg | 1 | |
| olmesartan-amlodipine-hctz oral tablet 20-5-12.5 mg, 40-10-12.5 mg, 40-10-25 mg, 40-5-12.5 mg, 40-5-25 mg | 1 | |
| omega-3-acid ethyl esters oral capsule 1 gm | 1 | |
| OSMITROL INTRAVENOUS SOLUTION 10 %, 20 % | 3 | |
| pentoxifylline er oral tablet extended release 400 mg | 1 | |
| perindopril erbumine oral tablet 2 mg, 4 mg, 8 mg | 1 | |
| phenoxybenzamine hcl oral capsule 10 mg | 1 | PA |
| phentolamine mesylate injection solution reconstituted 5 mg | 1 | |
| phenylephrine hcl intravenous solution 10 mg/ml, 100 mg/10ml, 50 mg/5ml | 1 | |
| PHENYLEPHRINE HCL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.4 MG/10ML, 0.5 MG/5ML, 0.8 MG/10ML, 1 MG/10ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION 10-0.9 MG/250ML-%, 20-0.9 MG/250ML-%, 40-0.9 MG/250ML-%, 50-0.9 MG/250ML-%, 80-0.9 MG/250ML-% | 3 | |
| PHENYLEPHRINE HCL-NACL INTRAVENOUS SOLUTION PREFILLED SYRINGE 0.5-0.9 MG/5ML-%, 0.8-0.9 MG/10ML-%, 1-0.9 MG/10ML-%, 20-0.9 MG/50ML-% | 3 | |
| pindolol oral tablet 10 mg, 5 mg | 1 | |
| PRALUENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML, 75 MG/ML | E | |
| pravastatin sodium oral tablet 10 mg, 20 mg, 40 mg, 80 mg | 1 | ACA |
| prazosin hcl oral capsule 1 mg, 2 mg, 5 mg | 1 | |
| PRESTALIA ORAL TABLET 14-10 MG, 3.5-2.5 MG, 7-5 MG | 3 | |
| prevalite oral packet 4 gm | 1 | |
| procainamide hcl injection solution 100 mg/ml, 500 mg/ml | 1 | |
| propafenone hcl er oral capsule extended release 12 hour 225 mg, 325 mg, 425 mg | 1 | |
| propafenone hcl oral tablet 150 mg, 225 mg, 300 mg | 1 | |
| propranolol hcl er oral capsule extended release 24 hour 120 mg, 160 mg, 60 mg, 80 mg | 1 | |
| propranolol hcl intravenous solution 1 mg/ml | 1 | |
| propranolol hcl oral solution 20 mg/5ml, 40 mg/5ml | 1 | |
| propranolol hcl oral tablet 10 mg, 20 mg, 40 mg, 60 mg, 80 mg | 1 | |
| QUESTRAN LIGHT ORAL POWDER 4 GM/DOSE | E | |
| QUESTRAN ORAL PACKET 4 GM | E | |
| QUESTRAN ORAL POWDER 4 GM/DOSE | E | |
| quinapril hcl oral tablet 10 mg, 20 mg, 40 mg, 5 mg | 1 | |
| quinapril-hydrochlorothiazide oral tablet 10-12.5 mg, 20-12.5 mg, 20-25 mg | 1 | |
| quinidine gluconate er oral tablet extended release 324 mg | 1 | |
| quinidine sulfate oral tablet 200 mg, 300 mg | 1 | |
| ramipril oral capsule 1.25 mg, 10 mg, 2.5 mg, 5 mg | 1 | |
| ranolazine er oral tablet extended release 12 hour 1000 mg, 500 mg | 1 | |
| REDEMPLO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| REPATHA SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 140 MG/ML | 2 | QL (0.11 ML per 1 day) |
| rosuvastatin calcium oral tablet 10 mg, 5 mg | 1 | ACA |
| rosuvastatin calcium oral tablet 20 mg, 40 mg | 1 | |
| sacubitril-valsartan oral tablet 24-26 mg | 1 | QL (6 EA per 1 day) |
| sacubitril-valsartan oral tablet 49-51 mg, 97-103 mg | 1 | QL (2 EA per 1 day) |
| SDAMLO ORAL SOLUTION RECONSTITUTED 10 MG, 2.5 MG, 5 MG | E | |
| simvastatin oral tablet 10 mg, 20 mg, 40 mg, 5 mg | 1 | ACA |
| simvastatin oral tablet 80 mg | 1 | |
| SOAANZ ORAL TABLET 40 MG | E | |
| sodium nitroprusside intravenous solution 25 mg/ml | 1 | |
| sotalol hcl (af) oral tablet 120 mg, 160 mg, 80 mg | 1 | |
| sotalol hcl oral tablet 120 mg, 160 mg, 240 mg, 80 mg | 1 | |
| SOTYLIZE ORAL SOLUTION 5 MG/ML | 3 | |
| spironolactone oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| spironolactone-hctz oral tablet 25-25 mg | 1 | |
| TEKTURNA ORAL TABLET 150 MG, 300 MG | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| telmisartan oral tablet 20 mg, 40 mg, 80 mg | 1 | |
| telmisartan-amlodipine oral tablet 40-10 mg, 40-5 mg, 80-10 mg, 80-5 mg | 1 | |
| TENORMIN ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| THALITONE ORAL TABLET 15 MG | E | |
| tiadylt er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 300 mg, 360 mg, 420 mg | 1 | |
| TIKOSYN ORAL CAPSULE 125 MCG, 250 MCG, 500 MCG | E | |
| timolol maleate oral tablet 10 mg, 20 mg, 5 mg | 1 | |
| TOPROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 25 MG, 50 MG | E | |
| torsemide oral tablet 10 mg, 100 mg, 20 mg, 5 mg | 1 | |
| trandolapril oral tablet 1 mg, 2 mg, 4 mg | 1 | |
| triamterene-hctz oral capsule 37.5-25 mg | 1 | |
| triamterene-hctz oral tablet 37.5-25 mg, 75-50 mg | 1 | |
| TRIBENZOR ORAL TABLET 20-5-12.5 MG, 40-10-12.5 MG, 40-10-25 MG, 40-5-12.5 MG, 40-5-25 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRYNGOLZA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.8ML, 80 MG/0.8ML | 4 | PA; SP; QL (0.03 ML per 1 day) |
| TRYVIO ORAL TABLET 12.5 MG | 3 | PA; QL (1 EA per 1 day) |
| valsartan oral tablet 160 mg, 320 mg, 40 mg, 80 mg | 1 | |
| valsartan-hydrochlorothiazide oral tablet 160-12.5 mg, 160-25 mg, 320-12.5 mg, 320-25 mg, 80-12.5 mg | 1 | |
| VARITHENA INTRAVENOUS FOAM 180 MG/18ML | 3 | |
| VASCEPA ORAL CAPSULE 0.5 GM, 1 GM | 2 | PA |
| VECAMYL ORAL TABLET 2.5 MG | 3 | |
| verapamil hcl er oral tablet extended release 120 mg, 180 mg, 240 mg | 1 | |
| verapamil hcl intravenous solution 2.5 mg/ml | 1 | |
| verapamil hcl oral tablet 120 mg, 40 mg, 80 mg | 1 | |
| VERQUVO ORAL TABLET 10 MG, 2.5 MG, 5 MG | 3 | PA; QL (1 EA per 1 day) |
| VYNDAMAX ORAL CAPSULE 61 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VYTORIN ORAL TABLET 10-10 MG, 10-20 MG, 10-40 MG, 10-80 MG | E | |
| WELCHOL ORAL PACKET 3.75 GM | E | |
| WELCHOL ORAL TABLET 625 MG | E | |
| ZETIA ORAL TABLET 10 MG | E | |
| ZOCOR ORAL TABLET 10 MG, 20 MG, 40 MG | E | |
| ZYPITAMAG ORAL TABLET 2 MG, 4 MG | E | |
| **Central Nervous System Agents** | | |
| SKYCLARYS ORAL CAPSULE 50 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| **Central Nervous System Agents - Drugs for Attention Deficit Disorder** | | |
| ADDERALL ORAL TABLET 10 MG, 12.5 MG, 15 MG, 20 MG, 30 MG, 5 MG, 7.5 MG | E | |
| ADDERALL XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 5 MG | E | |
| ADZENYS XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 12.5 MG, 15.7 MG, 18.8 MG, 3.1 MG, 6.3 MG, 9.4 MG | E | |
| amphetamine er oral tablet extended release dispersible 12.5 mg, 15.7 mg, 18.8 mg, 3.1 mg, 6.3 mg, 9.4 mg | 1 | QL (1 EA per 1 day) |
| amphetamine sulfate oral tablet 10 mg, 5 mg | 1 | QL (6 EA per 1 day) |
| amphetamine-dextroamphetamine er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 5 mg | 1 | QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| amphetamine-dextroamphetamine oral tablet 10 mg, 12.5 mg, 15 mg, 20 mg, 5 mg, 7.5 mg | 1 | QL (3 EA per 1 day) |
| amphetamine-dextroamphetamine oral tablet 30 mg | 1 | QL (2 EA per 1 day) |
| amphet-dextroamphet 3-bead er oral capsule extended release 24 hour 12.5 mg, 25 mg, 37.5 mg, 50 mg | 1 | QL (1 EA per 1 day) |
| atomoxetine hcl oral capsule 10 mg, 100 mg, 18 mg, 25 mg, 40 mg, 60 mg, 80 mg | 1 | QL (1 EA per 1 day) |
| ATOMOXETINE HCL ORAL SOLUTION 4 MG/ML | 3 | QL (25 ML per 1 day) |
| ATONCY ORAL SOLUTION 4 MG/ML | 3 | QL (25 ML per 1 day) |
| AZSTARYS ORAL CAPSULE 26.1-5.2 MG, 39.2-7.8 MG, 52.3-10.4 MG | 2 | ST; QL (1 EA per 1 day) |
| clonidine hcl er oral tablet extended release 12 hour 0.1 mg | 1 | |
| CONCERTA ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 54 MG | 3 | ST; QL (1 EA per 1 day) |
| CONCERTA ORAL TABLET EXTENDED RELEASE 36 MG | 3 | ST; QL (2 EA per 1 day) |
| COTEMPLA XR-ODT ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG, 25.9 MG, 8.6 MG | E | |
| DAYTRANA TRANSDERMAL PATCH 10 MG/9HR, 15 MG/9HR, 20 MG/9HR, 30 MG/9HR | E | |
| dexmethylphenidate hcl er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 25 mg, 30 mg, 35 mg, 40 mg, 5 mg | 1 | QL (1 EA per 1 day) |
| dexmethylphenidate hcl oral tablet 10 mg, 2.5 mg, 5 mg | 1 | QL (2 EA per 1 day) |
| dextroamphetamine sulfate er oral capsule extended release 24 hour 10 mg | 1 | QL (6 EA per 1 day) |
| dextroamphetamine sulfate er oral capsule extended release 24 hour 15 mg | 1 | QL (4 EA per 1 day) |
| dextroamphetamine sulfate er oral capsule extended release 24 hour 5 mg | 1 | QL (3 EA per 1 day) |
| dextroamphetamine sulfate oral solution 5 mg/5ml | 1 | QL (60 ML per 1 day) |
| dextroamphetamine sulfate oral tablet 10 mg | 1 | QL (6 EA per 1 day) |
| dextroamphetamine sulfate oral tablet 15 mg, 2.5 mg, 20 mg, 5 mg, 7.5 mg | 1 | QL (3 EA per 1 day) |
| dextroamphetamine sulfate oral tablet 30 mg | 1 | QL (2 EA per 1 day) |
| DYANAVEL XR ORAL SUSPENSION EXTENDED RELEASE 2.5 MG/ML | E | |
| DYANAVEL XR ORAL TABLET EXTENDED RELEASE 10 MG, 15 MG, 20 MG, 5 MG | E | |
| EVEKEO ORAL TABLET 10 MG, 5 MG | E | |
| FOCALIN ORAL TABLET 10 MG, 2.5 MG, 5 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FOCALIN XR ORAL CAPSULE EXTENDED RELEASE 24 HOUR 10 MG, 15 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG, 5 MG | E | |
| guanfacine hcl er oral tablet extended release 24 hour 1 mg, 2 mg, 3 mg, 4 mg | 1 | |
| INTUNIV ORAL TABLET EXTENDED RELEASE 24 HOUR 1 MG, 2 MG, 3 MG, 4 MG | E | |
| JORNAY PM ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 20 MG, 40 MG, 60 MG, 80 MG | 3 | ST; QL (1 EA per 1 day) |
| METADATE CD ORAL CAPSULE EXTENDED RELEASE 10 MG, 20 MG, 30 MG, 40 MG, 50 MG, 60 MG | E | |
| METHYLIN ORAL SOLUTION 10 MG/5ML | 3 | ST; QL (30 ML per 1 day) |
| METHYLIN ORAL SOLUTION 5 MG/5ML | 3 | ST; QL (60 ML per 1 day) |
| METHYLPHENIDATE ER ORAL TABLET EXTENDED RELEASE DISPERSIBLE 17.3 MG | 3 | QL (3 EA per 1 day) |
| METHYLPHENIDATE ER ORAL TABLET EXTENDED RELEASE DISPERSIBLE 25.9 MG | 3 | QL (2 EA per 1 day) |
| METHYLPHENIDATE ER ORAL TABLET EXTENDED RELEASE DISPERSIBLE 8.6 MG | 3 | QL (6 EA per 1 day) |
| methylphenidate hcl er (cd) oral capsule extended release 10 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg | 1 | QL (1 EA per 1 day) |
| methylphenidate hcl er (la) oral capsule extended release 24 hour 10 mg, 20 mg, 30 mg, 40 mg, 60 mg | 1 | QL (1 EA per 1 day) |
| methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 54 mg | 1 | QL (1 EA per 1 day) |
| methylphenidate hcl er (osm) oral tablet extended release 36 mg | 1 | QL (2 EA per 1 day) |
| methylphenidate hcl er (xr) oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg, 40 mg, 50 mg, 60 mg | 1 | QL (1 EA per 1 day) |
| methylphenidate hcl er oral tablet extended release 10 mg | 1 | QL (2 EA per 1 day) |
| methylphenidate hcl er oral tablet extended release 20 mg | 1 | QL (3 EA per 1 day) |
| methylphenidate hcl er oral tablet extended release 24 hour 18 mg, 27 mg, 54 mg | 1 | QL (1 EA per 1 day) |
| methylphenidate hcl er oral tablet extended release 24 hour 36 mg | 1 | QL (2 EA per 1 day) |
| methylphenidate hcl oral solution 10 mg/5ml | 1 | QL (30 ML per 1 day) |
| methylphenidate hcl oral solution 5 mg/5ml | 1 | QL (60 ML per 1 day) |
| methylphenidate hcl oral tablet 10 mg, 20 mg, 5 mg | 1 | QL (3 EA per 1 day) |
| methylphenidate hcl oral tablet chewable 10 mg | 1 | QL (6 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| methylphenidate hcl oral tablet chewable 2.5 mg, 5 mg | 1 | QL (3 EA per 1 day) |
| MYDAYIS ORAL CAPSULE EXTENDED RELEASE 24 HOUR 12.5 MG, 25 MG, 37.5 MG, 50 MG | E | |
| ONYDA XR ORAL SUSPENSION EXTENDED RELEASE 0.1 MG/ML | 3 | ST; QL (4 ML per 1 day) |
| QELBREE ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 150 MG, 200 MG | E | |
| QUILLICHEW ER ORAL TABLET CHEWABLE EXTENDED RELEASE 20 MG, 30 MG, 40 MG | E | |
| QUILLIVANT XR ORAL SUSPENSION RECONSTITUTED ER 25 MG/5ML | E | |
| RITALIN LA ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG | E | |
| RITALIN ORAL TABLET 10 MG, 20 MG, 5 MG | E | |
| XELSTRYM TRANSDERMAL PATCH 13.5 MG/9HR, 18 MG/9HR, 4.5 MG/9HR, 9 MG/9HR | 3 | ST; QL (1 EA per 1 day) |
| ZENZEDI ORAL TABLET 10 MG, 15 MG, 2.5 MG, 20 MG, 30 MG, 5 MG, 7.5 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Central Nervous System Agents - Drugs for Multiple Sclerosis** | | |
| AMPYRA ORAL TABLET EXTENDED RELEASE 12 HOUR 10 MG | E | |
| AUBAGIO ORAL TABLET 14 MG, 7 MG | E | |
| AVONEX PEN INTRAMUSCULAR AUTO-INJECTOR KIT 30 MCG/0.5ML | 4 | PA; SP; QL (0.04 EA per 1 day) |
| AVONEX PREFILLED INTRAMUSCULAR PREFILLED SYRINGE KIT 30 MCG/0.5ML | 4 | PA; SP; QL (0.04 EA per 1 day) |
| BAFIERTAM ORAL CAPSULE DELAYED RELEASE 95 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| BETASERON SUBCUTANEOUS KIT 0.3 MG | 4 | PA; SP; QL (0.5 EA per 1 day) |
| BRIUMVI INTRAVENOUS SOLUTION 150 MG/6ML | 4 | PA; SP |
| cladribine (10 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| cladribine (4 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| cladribine (5 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| cladribine (6 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| cladribine (7 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| cladribine (8 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| cladribine (9 tabs) oral tablet therapy pack 10 mg | 4 | PA; SP; QL (40 EA per 1 lifetime) |
| COPAXONE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/ML, 40 MG/ML | E | |
| dalfampridine er oral tablet extended release 12 hour 10 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| dimethyl fumarate oral capsule delayed release 120 mg, 240 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| dimethyl fumarate starter pack oral capsule delayed release therapy pack 120 & 240 mg | 4 | PA; SP; QL (120 EA per 365 days) |
| fingolimod hcl oral capsule 0.5 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| GILENYA ORAL CAPSULE 0.25 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| GILENYA ORAL CAPSULE 0.5 MG | E | |
| glatiramer acetate subcutaneous solution prefilled syringe 20 mg/ml | 4 | PA; SP; QL (1 ML per 1 day) |
| glatiramer acetate subcutaneous solution prefilled syringe 40 mg/ml | 4 | PA; SP; QL (0.43 ML per 1 day) |
| glatopa subcutaneous solution prefilled syringe 20 mg/ml | 4 | PA; SP; QL (1 ML per 1 day) |
| glatopa subcutaneous solution prefilled syringe 40 mg/ml | 4 | PA; SP; QL (0.43 ML per 1 day) |
| KESIMPTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| LEMTRADA INTRAVENOUS SOLUTION 12 MG/1.2ML | 4 | PA; SP; QL (3.6 ML per 350 days) |
| MAVENCLAD ORAL TABLET THERAPY PACK 10 MG | E | |
| MAYZENT ORAL TABLET 0.25 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| MAYZENT ORAL TABLET 1 MG, 2 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG | 4 | PA; SP; QL (24 EA per 365 days) |
| MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 7 X 0.25 MG | 4 | PA; SP; QL (14 EA per 365 days) |
| OCREVUS INTRAVENOUS SOLUTION 300 MG/10ML | 4 | PA; SP |
| OCREVUS ZUNOVO SUBCUTANEOUS SOLUTION 920-23000 MG-UT/23ML | 4 | PA; SP; QL (180 day supply per 1 fill) |
| PLEGRIDY INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML | E | |
| PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 63 & 94 MCG/0.5ML | E | |
| PLEGRIDY STARTER PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 63 & 94 MCG/0.5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PLEGRIDY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MCG/0.5ML | E | |
| PLEGRIDY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MCG/0.5ML | E | |
| PONVORY ORAL TABLET 20 MG | E | |
| PONVORY STARTER PACK ORAL TABLET THERAPY PACK 2-3-4-5-6-7-8-9 & 10 MG | E | |
| REBIF REBIDOSE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22 MCG/0.5ML, 44 MCG/0.5ML | E | |
| REBIF REBIDOSE TITRATION PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 6X8.8 & 6X22 MCG | E | |
| REBIF SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 22 MCG/0.5ML, 44 MCG/0.5ML | E | |
| REBIF TITRATION PACK SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 6X8.8 & 6X22 MCG | E | |
| TASCENSO ODT ORAL TABLET DISPERSIBLE 0.25 MG, 0.5 MG | E | |
| TECFIDERA ORAL CAPSULE DELAYED RELEASE 120 MG, 240 MG | E | |
| TECFIDERA ORAL CAPSULE DELAYED RELEASE THERAPY PACK 120 & 240 MG | E | |
| teriflunomide oral tablet 14 mg, 7 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| TYRUKO INTRAVENOUS CONCENTRATE 300 MG/15ML | 4 | PA; SP; QL (0.54 ML per 1 day) |
| TYSABRI INTRAVENOUS CONCENTRATE 300 MG/15ML | 4 | PA; SP; QL (0.54 ML per 1 day) |
| VUMERITY ORAL CAPSULE DELAYED RELEASE 231 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| ZEPOSIA 7-DAY STARTER PACK ORAL CAPSULE THERAPY PACK 4 X 0.23MG & 3 X 0.46MG | 4 | PA; SP; QL (14 EA per 365 days) |
| ZEPOSIA ORAL CAPSULE 0.92 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| ZEPOSIA STARTER KIT ORAL CAPSULE THERAPY PACK 0.23MG &0.46MG 0.92MG(21) | 4 | PA; SP; QL (56 EA per 365 days) |
| **Central Nervous System Agents - Miscellaneous** | | |
| ADDYI ORAL TABLET 100 MG | 3 | PA; QL (1 EA per 1 day) |
| AMVUTTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 25 MG/0.5ML | 4 | PA; SP; QL (0.5 ML per 81 days) |
| AUSTEDO ORAL TABLET 12 MG, 6 MG, 9 MG | 4 | PA; SP; QL (4 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| AUSTEDO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 12 MG, 18 MG, 24 MG, 30 MG, 36 MG, 42 MG, 48 MG, 6 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| AUSTEDO XR PATIENT TITRATION ORAL TABLET EXTENDED RELEASE THERAPY PACK 12 & 18 & 24 & 30 MG | 4 | PA; SP; QL (56 EA per 365 days) |
| caffeine citrate intravenous solution 60 mg/3ml | 1 | |
| caffeine citrate oral solution 60 mg/3ml | 1 | |
| CAFFEINE-SODIUM BENZOATE INJECTION SOLUTION 125-125 MG/ML | 3 | |
| CONTRAVE ORAL TABLET EXTENDED RELEASE 12 HOUR 8-90 MG | E | |
| DAYBUE ORAL SOLUTION 200 MG/ML | E | |
| DAYBUE STIX ORAL PACKET 5000 MG, 6000 MG, 8000 MG | E | |
| dextromethorphan-quinidine oral capsule 20-10 mg | 1 | PA |
| DOPRAM INTRAVENOUS SOLUTION 20 MG/ML | 3 | |
| edaravone intravenous solution 30 mg/100ml | 4 | PA; SP |
| gabapentin (once-daily) oral tablet 300 mg | 1 | ST; QL (6 EA per 1 day) |
| gabapentin (once-daily) oral tablet 450 mg, 600 mg | 1 | ST; QL (3 EA per 1 day) |
| gabapentin (once-daily) oral tablet 750 mg, 900 mg | 1 | ST; QL (2 EA per 1 day) |
| GRALISE ORAL TABLET 300 MG | 3 | ST; QL (6 EA per 1 day) |
| GRALISE ORAL TABLET 450 MG, 600 MG | 3 | ST; QL (3 EA per 1 day) |
| GRALISE ORAL TABLET 750 MG, 900 MG | 3 | ST; QL (2 EA per 1 day) |
| HORIZANT ORAL TABLET EXTENDED RELEASE 300 MG, 600 MG | E | |
| INGREZZA ORAL CAPSULE 40 MG, 60 MG, 80 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| INGREZZA ORAL CAPSULE SPRINKLE 40 MG, 60 MG, 80 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| INGREZZA ORAL CAPSULE THERAPY PACK 40 & 80 MG | 4 | PA; SP; QL (56 EA per 365 days) |
| LYRICA CR ORAL TABLET EXTENDED RELEASE 24 HOUR 165 MG, 330 MG, 82.5 MG | E | |
| LYRICA ORAL CAPSULE 100 MG, 150 MG, 200 MG, 225 MG, 25 MG, 300 MG, 50 MG, 75 MG | E | |
| LYRICA ORAL SOLUTION 20 MG/ML | E | |
| milnacipran hcl oral 12.5 & 25 & 50 mg | 1 | QL (110 EA per 365 days) |
| milnacipran hcl oral tablet 100 mg, 12.5 mg, 25 mg, 50 mg | 1 | QL (2 EA per 1 day) |
| NUEDEXTA ORAL CAPSULE 20-10 MG | 3 | PA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ONPATTRO INTRAVENOUS SOLUTION 10 MG/5ML | 4 | PA; SP |
| pregabalin oral capsule 100 mg, 150 mg, 200 mg, 225 mg, 25 mg, 50 mg, 75 mg | 1 | QL (3 EA per 1 day) |
| pregabalin oral capsule 300 mg | 1 | QL (2 EA per 1 day) |
| pregabalin oral solution 20 mg/ml | 1 | QL (30 ML per 1 day) |
| RADICAVA ORS ORAL SUSPENSION 105 MG/5ML | 4 | PA; SP |
| RADICAVA ORS STARTER KIT ORAL SUSPENSION 105 MG/5ML | 4 | PA; SP |
| riluzole oral tablet 50 mg | 1 | |
| SAVELLA ORAL TABLET 100 MG, 12.5 MG, 25 MG, 50 MG | E | |
| SAVELLA TITRATION PACK ORAL 12.5 & 25 & 50 MG | E | |
| TEGLUTIK ORAL SUSPENSION 50 MG/10ML | 2 | ST; QL (20 ML per 1 day) |
| tetrabenazine oral tablet 12.5 mg, 25 mg | 4 | PA; SP |
| TIGLUTIK ORAL SUSPENSION 50 MG/10ML | 2 | ST; QL (20 ML per 1 day) |
| TONMYA SUBLINGUAL TABLET SUBLINGUAL 2.8 MG | E | |
| VYLEESI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 1.75 MG/0.3ML | 3 | PA; QL (0.06 ML per 1 day) |
| WAINUA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.8ML | 4 | PA; SP; QL (0.03 ML per 1 day) |
| WAINUA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.8ML | 4 | PA; SP; QL (0.03 ML per 1 day) |
| **Dental and Oral Agents - Drugs for Mouth and Throat Conditions** | | |
| AQUORAL MOUTH/THROAT SOLUTION | 3 | |
| cevimeline hcl oral capsule 30 mg | 1 | |
| chlorhexidine gluconate mouth/throat solution 0.12 % | 1 | |
| CLINPRO 5000 DENTAL PASTE 1.1 % | 3 | |
| DENTA 5000 PLUS DENTAL CREAM 1.1 % | 3 | |
| DENTA 5000 PLUS SENSITIVE DENTAL GEL 1.1-5 % | 3 | |
| DENTAGEL DENTAL GEL 1.1 % | 3 | |
| EASYGEL DENTAL GEL 0.4 % | 3 | |
| FLUORIDEX DAILY RENEWAL MOUTH/THROAT CONCENTRATE 0.63 % | 3 | |
| FLUORIDEX DENTAL PASTE 1.1 % | 3 | |
| FLUORIDEX ENHANCED WHITENING DENTAL PASTE 1.1 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FLUORIMAX 5000 DENTAL PASTE 1.1 % | 3 | |
| FLUORIMAX 5000 SENSITIVE DENTAL GEL 1.1-5 % | 3 | |
| JUST RIGHT 5000 DENTAL PASTE 1.1 % | 3 | |
| KEPIVANCE INTRAVENOUS SOLUTION RECONSTITUTED 5.16 MG | 4 | SP |
| KOURZEQ MOUTH/THROAT PASTE 0.1 % | 3 | |
| lidocaine viscous hcl mouth/throat solution 2 % | 1 | |
| MI PASTE DENTAL PASTE | 3 | |
| MI PASTE PLUS DENTAL PASTE | 3 | |
| ORALONE MOUTH/THROAT PASTE 0.1 % | 3 | |
| PERIDEX MOUTH/THROAT SOLUTION 0.12 % | 3 | |
| periogard mouth/throat solution 0.12 % | 1 | |
| pilocarpine hcl oral tablet 5 mg, 7.5 mg | 1 | |
| PREVIDENT 5000 BOOSTER PLUS DENTAL PASTE 1.1 % | 3 | |
| PREVIDENT 5000 DRY MOUTH DENTAL GEL 1.1 % | 3 | |
| PREVIDENT 5000 ENAMEL PROTECT DENTAL GEL 1.1-5 % | 3 | |
| PREVIDENT 5000 KIDS DENTAL PASTE 1.1 % | 3 | |
| PREVIDENT 5000 ORTHO DEFENSE DENTAL PASTE 1.1 % | 3 | |
| PREVIDENT 5000 PLUS DENTAL CREAM 1.1 % | 3 | |
| PREVIDENT 5000 SENSITIVE DENTAL GEL 1.1-5 % | 3 | |
| PREVIDENT DENTAL GEL 1.1 % | 3 | |
| PREVIDENT MOUTH/THROAT SOLUTION 0.2 % | 3 | |
| REMESENSE DENTAL 3 % | 3 | |
| sf 5000 plus dental cream 1.1 % | 1 | |
| sf dental gel 1.1 % | 1 | |
| sod fluoride-potassium nitrate dental gel 1.1-5 % | 1 | |
| sodium fluoride 5000 enamel dental gel 1.1-5 % | 1 | |
| sodium fluoride 5000 plus dental cream 1.1 % | 1 | |
| sodium fluoride 5000 ppm dental gel 1.1 % | 1 | |
| sodium fluoride 5000 ppm dental paste 1.1 % | 1 | |
| sodium fluoride 5000 sensitive dental gel 1.1-5 % | 1 | |
| sodium fluoride dental cream 1.1 % | 1 | |
| sodium fluoride dental gel 1.1 % | 1 | |
| sodium fluoride mouth/throat solution 0.2 % | 1 | |
| triamcinolone acetonide mouth/throat paste 0.1 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VANISH DENTAL LIQUID EXTENDED RELEASE 5 % | 3 | |
| **Dermatological Agents - Drugs for Skin Conditions** | | |
| ABSORICA LD ORAL CAPSULE 16 MG, 24 MG, 32 MG, 8 MG | 3 | PA |
| ABSORICA ORAL CAPSULE 10 MG, 20 MG, 25 MG, 30 MG, 35 MG, 40 MG | E | |
| ACANYA EXTERNAL GEL 1.2-2.5 % | E | |
| accutane oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| acitretin oral capsule 10 mg, 17.5 mg, 25 mg | 1 | |
| ACZONE EXTERNAL GEL 7.5 % | E | |
| adapalene external cream 0.1 % | 1 | |
| adapalene external gel 0.1 %, 0.3 % | 1 | |
| adapalene-benzoyl peroxide external gel 0.1-2.5 %, 0.3-2.5 % | 1 | |
| ADBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ADBRY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| AKLIEF EXTERNAL CREAM 0.005 % | 3 | PA |
| ALA SCALP EXTERNAL LOTION 2 % | E | |
| ala-cort external cream 1 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| alclometasone dipropionate external cream 0.05 % | 1 | |
| alclometasone dipropionate external ointment 0.05 % | 1 | |
| ALTRENO EXTERNAL LOTION 0.05 % | 3 | PA |
| ammonium lactate external cream 12 % | 1 | |
| ammonium lactate external lotion 12 % | 1 | |
| amnesteem oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| AMZEEQ EXTERNAL FOAM 4 % | 3 | |
| ANZUPGO EXTERNAL CREAM 20 MG/GM | 3 | PA; QL (1.1 GM per 1 day) |
| AQUACEL AG BURN EXTERNAL PAD 4"X5" | 3 | |
| ARAZLO EXTERNAL LOTION 0.045 % | E | |
| ATRALIN EXTERNAL GEL 0.05 % | 3 | PA |
| ATRAPRO DERMAL SPRAY EXTERNAL LIQUID | 3 | |
| attero external suspension 0.005-0.064 % | 1 | QL (4 GM per 1 day) |
| azelaic acid external gel 15 % | 1 | |
| B & C EXTERNAL OINTMENT | 3 | |
| balsam peru-castor oil external ointment | 1 | |
| BENZAMYCIN EXTERNAL GEL 5-3 % | E | |
| benzoyl peroxide-erythromycin external gel 5-3 % | 1 | |
| betamethasone dipropionate aug external cream 0.05 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| betamethasone dipropionate aug external gel 0.05 % | 1 | |
| betamethasone dipropionate aug external lotion 0.05 % | 1 | |
| betamethasone dipropionate aug external ointment 0.05 % | 1 | |
| betamethasone dipropionate external cream 0.05 % | 1 | |
| betamethasone dipropionate external lotion 0.05 % | 1 | |
| betamethasone dipropionate external ointment 0.05 % | 1 | |
| betamethasone valerate external cream 0.1 % | 1 | |
| betamethasone valerate external foam 0.12 % | 1 | |
| betamethasone valerate external lotion 0.1 % | 1 | |
| betamethasone valerate external ointment 0.1 % | 1 | |
| BPCO EXTERNAL OINTMENT | 3 | |
| brimonidine tartrate external gel 0.33 % | 1 | |
| CABTREO EXTERNAL GEL 0.15-3.1-1.2 % | E | |
| calcipotriene external cream 0.005 % | 1 | |
| CALCIPOTRIENE EXTERNAL FOAM 0.005 % | E | |
| calcipotriene external ointment 0.005 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| calcipotriene external solution 0.005 % | 1 | |
| calcipotriene-betameth diprop external suspension 0.005-0.064 % | 1 | QL (4 GM per 1 day) |
| CALCITRENE EXTERNAL OINTMENT 0.005 % | 3 | |
| calcitriol external ointment 3 mcg/gm | 1 | |
| CIBINQO ORAL TABLET 100 MG, 200 MG, 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| claravis oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| CLEOCIN-T EXTERNAL LOTION 1 % | 3 | |
| clindacin etz external swab 1 % | 1 | |
| clindacin-p external swab 1 % | 1 | |
| CLINDAGEL EXTERNAL GEL 1 % | E | |
| clindamycin phos (twice-daily) external gel 1 % | 1 | |
| clindamycin phos-benzoyl perox external gel 1.2-3.75 % | E | |
| clindamycin phos-benzoyl perox external gel 1-5 %, 1.2-2.5 %, 1.2-5 % | 1 | |
| clindamycin phosphate external lotion 1 % | 1 | |
| clindamycin phosphate external solution 1 % | 1 | |
| clindamycin phosphate external swab 1 % | 1 | |
| clobetasol prop emollient base external cream 0.05 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CLOBETASOL PROPIONATE EXTERNAL CREAM 0.025 % | E | |
| clobetasol propionate external cream 0.05 % | 1 | |
| clobetasol propionate external foam 0.05 % | 1 | |
| clobetasol propionate external gel 0.05 % | 1 | |
| clobetasol propionate external liquid 0.05 % | 1 | |
| clobetasol propionate external lotion 0.05 % | 1 | |
| clobetasol propionate external ointment 0.05 % | 1 | |
| clobetasol propionate external shampoo 0.05 % | 1 | |
| clobetasol propionate external solution 0.05 % | 1 | |
| clodan external shampoo 0.05 % | 1 | |
| coal tar external solution 20 % | 1 | |
| CORDRAN EXTERNAL TAPE 4 MCG/SQCM | E | |
| DERMA-SMOOTHE/FS BODY EXTERNAL OIL 0.01 % | 3 | |
| DERMA-SMOOTHE/FS SCALP EXTERNAL OIL 0.01 % | 3 | |
| desonide external cream 0.05 % | 1 | |
| desonide external lotion 0.05 % | 1 | |
| desonide external ointment 0.05 % | 1 | |
| desoximetasone external cream 0.25 % | 1 | |
| desoximetasone external gel 0.05 % | 1 | |
| desoximetasone external liquid 0.25 % | 1 | |
| desoximetasone external ointment 0.25 % | 1 | |
| diclofenac sodium external gel 3 % | 1 | QL (10 GM per 1 day) |
| DIPROLENE EXTERNAL OINTMENT 0.05 % | 3 | |
| doxycycline oral capsule delayed release 40 mg | E | |
| DRYSOL EXTERNAL SOLUTION 20 % | 3 | |
| DUOBRII EXTERNAL LOTION 0.01-0.045 % | E | |
| DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.14ML | 4 | PA; SP; QL (0.17 ML per 1 day) |
| DUPIXENT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML | 4 | PA; SP; QL (0.29 ML per 1 day) |
| DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML | 4 | PA; SP; QL (0.17 ML per 1 day) |
| DUPIXENT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML | 4 | PA; SP; QL (0.29 ML per 1 day) |
| EBGLYSS SUBCUTANEOUS SOLUTION AUTO-INJECTOR 250 MG/2ML | 4 | PA; SP; QL (0.15 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EBGLYSS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 250 MG/2ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| EMROSI ORAL CAPSULE EXTENDED RELEASE 24 HOUR 40 MG | E | |
| ENSTILAR EXTERNAL FOAM 0.005-0.064 % | 3 | QL (15 GM per 1 day) |
| EPIFOAM EXTERNAL FOAM 1-1 % | 3 | |
| EPSOLAY EXTERNAL CREAM 5 % | E | |
| ERY EXTERNAL PAD 2 % | 3 | |
| erythromycin external gel 2 % | 1 | |
| erythromycin external solution 2 % | 1 | |
| EUCRISA EXTERNAL OINTMENT 2 % | 2 | ST |
| FILSUVEZ EXTERNAL GEL 10 % | 4 | PA; SP; QL (15 GM per 1 day) |
| FINACEA EXTERNAL FOAM 15 % | 3 | |
| fluocinolone acetonide body external oil 0.01 % | 1 | |
| fluocinolone acetonide external cream 0.01 %, 0.025 % | 1 | |
| fluocinolone acetonide external ointment 0.025 % | 1 | |
| fluocinolone acetonide external solution 0.01 % | 1 | |
| fluocinolone acetonide scalp external oil 0.01 % | 1 | |
| fluocinonide emulsified base external cream 0.05 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| fluocinonide external cream 0.05 %, 0.1 % | 1 | |
| fluocinonide external gel 0.05 % | 1 | |
| fluocinonide external ointment 0.05 % | 1 | |
| fluocinonide external solution 0.05 % | 1 | |
| FLUOROURACIL EXTERNAL CREAM 0.5 % | E | |
| fluorouracil external cream 5 % | 1 | |
| fluorouracil external solution 2 %, 5 % | 1 | |
| fluticasone propionate external cream 0.05 % | 1 | |
| fluticasone propionate external ointment 0.005 % | 1 | |
| GORDOFILM EXTERNAL SOLUTION 16.7-16.7 % | 3 | |
| halobetasol propionate external cream 0.05 % | 1 | |
| HALOBETASOL PROPIONATE EXTERNAL LOTION 0.05 % | E | |
| halobetasol propionate external ointment 0.05 % | 1 | |
| HALOG EXTERNAL CREAM 0.1 % | E | |
| HYDROCORTISONE ACETATE EXTERNAL CREAM 2.5 % | E | |
| hydrocortisone butyrate external cream 0.1 % | 1 | |
| hydrocortisone butyrate external ointment 0.1 % | 1 | |
| hydrocortisone butyrate external solution 0.1 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| hydrocortisone external cream 1 %, 2.5 % | 1 | |
| hydrocortisone external lotion 2.5 % | 1 | |
| hydrocortisone external ointment 1 %, 2.5 % | 1 | |
| HYDROCORTISONE EXTERNAL SOLUTION 2.5 % | E | |
| hydrocortisone valerate external cream 0.2 % | 1 | |
| hydrocortisone valerate external ointment 0.2 % | 1 | |
| HYFTOR EXTERNAL GEL 0.2 % | E | |
| HYPOCYN ANTIPRURITIC EXTERNAL GEL 0.012 % | 3 | |
| imiquimod external cream 5 % | 1 | |
| IMPOYZ EXTERNAL CREAM 0.025 % | E | |
| isotretinoin oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| ivermectin external cream 1 % | 1 | |
| KERALYT EXTERNAL SHAMPOO 6 % | 3 | |
| KLARON EXTERNAL LOTION 10 % | 3 | |
| KLISYRI (250 MG) EXTERNAL OINTMENT 1 % | 3 | ST |
| KLISYRI (350 MG) EXTERNAL OINTMENT 1 % | 3 | ST |
| lactic acid e external cream 10-3500 %-unt/30gm | 1 | |
| LEQSELVI ORAL TABLET 8 MG | 4 | PA; SP; QL (2 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LEVULAN KERASTICK EXTERNAL SOLUTION RECONSTITUTED 20 % | 3 | |
| LEXETTE EXTERNAL FOAM 0.05 % | E | |
| LITFULO ORAL CAPSULE 50 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| L-MESITRAN SOFT WOUND EXTERNAL GEL | 3 | |
| LUXAMEND EXTERNAL CREAM | 3 | |
| MEDIHONEY WOUND/BURN DRESSING EXTERNAL GEL | 3 | |
| methoxsalen rapid oral capsule 10 mg | 1 | |
| metronidazole external cream 0.75 % | 1 | |
| metronidazole external gel 0.75 %, 1 % | 1 | |
| metronidazole external lotion 0.75 % | 1 | |
| MICROCYN EXTERNAL LIQUID 0.023 % | 3 | |
| mometasone furoate external cream 0.1 % | 1 | |
| mometasone furoate external ointment 0.1 % | 1 | |
| mometasone furoate external solution 0.1 % | 1 | |
| NEMLUVIO SUBCUTANEOUS AUTO-INJECTOR 30 MG | 4 | PA; SP; QL (0.08 EA per 1 day) |
| NEO-SYNALAR EXTERNAL CREAM 0.5-0.025 % | 3 | |
| neuac external gel 1.2-5 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NORITATE EXTERNAL CREAM 1 % | E | |
| ONEXTON EXTERNAL GEL 1.2-3.75 % | 1 | |
| OPZELURA EXTERNAL CREAM 1.5 % | 2 | ST; QL (3.34 GM per 1 day) |
| ORACEA ORAL CAPSULE DELAYED RELEASE 40 MG | E | |
| oxymetazoline hcl external cream 1 % | 1 | |
| PETROLEUM GAUZE NON-WOVEN 3X9" EXTERNAL | 3 | |
| pimecrolimus external cream 1 % | 1 | ST; QL (2 GM per 1 day) |
| PODOCON-25 EXTERNAL SOLUTION 25 % | 3 | |
| podofilox external gel 0.5 % | 1 | |
| podofilox external solution 0.5 % | 1 | |
| PROPECIA ORAL TABLET 1 MG | E | |
| PYROGALLIC ACID EXTERNAL OINTMENT 25-2 % | 3 | |
| QBREXZA EXTERNAL PAD 2.4 % | 3 | QL (1 EA per 1 day) |
| RADIAPLEXRX EXTERNAL GEL | 3 | |
| REGENECARE EXTERNAL GEL 2 % | 3 | |
| RETIN-A EXTERNAL CREAM 0.025 %, 0.05 %, 0.1 % | E | |
| RETIN-A EXTERNAL GEL 0.01 %, 0.025 % | E | |
| RHOFADE EXTERNAL CREAM 1 % | E | |
| SANTYL EXTERNAL OINTMENT 250 UNIT/GM | 3 | QL (3 GM per 1 day) |
| SCENESSE SUBCUTANEOUS IMPLANT 16 MG | 4 | PA; SP |
| selenium sulfide external lotion 2.5 % | 1 | |
| SOFDRA EXTERNAL GEL 12.45 % | 3 | QL (1.4 ML per 1 day) |
| SOOLANTRA EXTERNAL CREAM 1 % | 3 | |
| SORILUX EXTERNAL FOAM 0.005 % | E | |
| sulfacetamide sodium (acne) external lotion 10 % | 1 | |
| SYNALAR EXTERNAL CREAM 0.025 % | 3 | |
| SYNALAR EXTERNAL OINTMENT 0.025 % | 3 | |
| TACLONEX EXTERNAL SUSPENSION 0.005-0.064 % | E | |
| tacrolimus external ointment 0.03 %, 0.1 % | 1 | QL (2 GM per 1 day) |
| tazarotene external cream 0.05 %, 0.1 % | 1 | PA |
| TAZAROTENE EXTERNAL FOAM 0.1 % | E | |
| tazarotene external gel 0.05 % | 1 | PA |
| TAZORAC EXTERNAL CREAM 0.05 %, 0.1 % | E | |
| TAZORAC EXTERNAL GEL 0.05 %, 0.1 % | E | |
| TOLAK EXTERNAL CREAM 4 % | 3 | |
| TOPICORT EXTERNAL OINTMENT 0.05 %, 0.25 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TOPICORT SPRAY EXTERNAL LIQUID 0.25 % | E | |
| tretinoin external cream 0.025 %, 0.05 %, 0.1 % | 1 | |
| tretinoin external gel 0.01 %, 0.025 %, 0.05 % | 1 | |
| tretinoin microsphere pump external gel 0.06 % | 1 | |
| triamcinolone acetonide external cream 0.025 %, 0.1 %, 0.5 % | 1 | |
| triamcinolone acetonide external lotion 0.025 %, 0.1 % | 1 | |
| triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 % | 1 | |
| triderm external cream 0.5 % | 1 | |
| TWYNEO EXTERNAL CREAM 0.1-3 % | E | |
| ULTRAVATE EXTERNAL LOTION 0.05 % | E | |
| urea external cream 20 % | 1 | |
| VENELEX EXTERNAL OINTMENT | 3 | |
| VTAMA EXTERNAL CREAM 1 % | 2 | ST |
| WINLEVI EXTERNAL CREAM 1 % | E | |
| WYNZORA EXTERNAL CREAM 0.005-0.064 % | 3 | QL (15 GM per 1 day) |
| XALIX EXTERNAL SOLUTION 28 % | 3 | |
| XERAC AC EXTERNAL SOLUTION 6.25 % | 3 | |
| YCANTH EXTERNAL SOLUTION 0.7 % | 3 | PA |
| ZELSUVMI EXTERNAL GEL 10.3 % | 3 | PA |
| zenatane oral capsule 10 mg, 20 mg, 30 mg, 40 mg | 1 | |
| ZEVASKYN BATCH UP TO 12 SHEETS EXTERNAL SHEET | E | |
| ZIANA EXTERNAL GEL 1.2-0.025 % | E | |
| ZILXI EXTERNAL FOAM 1.5 % | 3 | ST |
| ZORYVE EXTERNAL CREAM 0.05 %, 0.15 %, 0.3 % | 2 | ST |
| ZORYVE EXTERNAL FOAM 0.3 % | 2 | ST |
| ZYCLARA PUMP EXTERNAL CREAM 3.75 % | E | |
| **Diabetes - Antidiabetic Agents** | | |
| acarbose oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| ALOGLIPTIN BENZOATE ORAL TABLET 12.5 MG, 25 MG, 6.25 MG | E | |
| ALOGLIPTIN-METFORMIN HCL ORAL TABLET 12.5-1000 MG, 12.5-500 MG | E | |
| ALOGLIPTIN-PIOGLITAZONE ORAL TABLET 12.5-30 MG, 25-15 MG, 25-30 MG, 25-45 MG | E | |
| BEXAGLIFLOZIN ORAL TABLET 20 MG | E | |
| BRENZAVVY ORAL TABLET 20 MG | E | |
| BRYNOVIN ORAL SOLUTION 25 MG/ML | E | |
| CYCLOSET ORAL TABLET 0.8 MG | 3 | ST |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| dapagliflozin oral tablet 10 mg, 5 mg | 1 | |
| dapagliflozin-metformin hcl er oral tablet extended release 24 hour 10-1000 mg, 10-500 mg, 5-1000 mg, 5-500 mg | 1 | |
| DAPAGLIFLOZIN-SAXAGLIPTIN ORAL TABLET 10-5 MG | E | |
| DUETACT ORAL TABLET 30-2 MG, 30-4 MG | 3 | |
| FARXIGA ORAL TABLET 10 MG, 5 MG | E | |
| glimepiride oral tablet 1 mg, 2 mg, 4 mg | 1 | |
| glipizide er oral tablet extended release 24 hour 10 mg, 2.5 mg, 5 mg | 1 | |
| glipizide oral tablet 10 mg, 5 mg | 1 | |
| glipizide-metformin hcl oral tablet 2.5-250 mg, 2.5-500 mg, 5-500 mg | 1 | |
| GLUCOTROL XL ORAL TABLET EXTENDED RELEASE 24 HOUR 5 MG | 3 | |
| glyburide oral tablet 1.25 mg, 2.5 mg, 5 mg | 1 | |
| glyburide-metformin oral tablet 1.25-250 mg, 2.5-500 mg, 5-500 mg | 1 | |
| GLYXAMBI ORAL TABLET 10-5 MG, 25-5 MG | 2 | |
| INVOKAMET ORAL TABLET 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG | E | |
| INVOKAMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150-1000 MG, 150-500 MG, 50-1000 MG, 50-500 MG | E | |
| INVOKANA ORAL TABLET 100 MG, 300 MG | E | |
| JANUMET ORAL TABLET 50-1000 MG, 50-500 MG | E | |
| JANUMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG | E | |
| JANUVIA ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| JARDIANCE ORAL TABLET 10 MG, 25 MG | 2 | |
| JENTADUETO ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 2.5-850 MG | 2 | |
| JENTADUETO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 2.5-1000 MG, 5-1000 MG | 2 | |
| liraglutide subcutaneous solution pen-injector 18 mg/3ml | 1 | PA; QL (0.3 ML per 1 day) |
| metformin hcl er (mod) oral tablet extended release 24 hour 1000 mg, 500 mg | E | |
| metformin hcl er (osm) oral tablet extended release 24 hour 1000 mg, 500 mg | E | |
| metformin hcl er oral tablet extended release 24 hour 500 mg, 750 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| metformin hcl oral solution 500 mg/5ml | 1 | |
| metformin hcl oral tablet 1000 mg, 500 mg, 850 mg | 1 | |
| metformin hcl oral tablet 625 mg | E | |
| miglitol oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| MOUNJARO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML | 2 | PA; QL (0.08 ML per 1 day) |
| nateglinide oral tablet 120 mg, 60 mg | 1 | |
| OZEMPIC ORAL TABLET 1.5 MG, 4 MG, 9 MG | 2 | PA; QL (1 EA per 1 day) |
| OZEMPIC SUBCUTANEOUS SOLUTION PEN-INJECTOR 2 MG/3ML, 4 MG/3ML, 8 MG/3ML | 2 | PA; QL (0.11 ML per 1 day) |
| pioglitazone hcl oral tablet 15 mg, 30 mg, 45 mg | 1 | |
| pioglitazone hcl-glimepiride oral tablet 30-2 mg, 30-4 mg | 1 | |
| pioglitazone hcl-metformin hcl oral tablet 15-500 mg, 15-850 mg | 1 | |
| repaglinide oral tablet 0.5 mg, 1 mg, 2 mg | 1 | |
| RIOMET ORAL SOLUTION 500 MG/5ML | 3 | ST |
| RYBELSUS ORAL TABLET 14 MG, 7 MG | 2 | PA; QL (1 EA per 1 day) |
| RYBELSUS ORAL TABLET 3 MG | 2 | PA; QL (60 EA per 365 days) |
| saxagliptin hcl oral tablet 2.5 mg, 5 mg | 1 | |
| saxagliptin-metformin er oral tablet extended release 24 hour 2.5-1000 mg, 5-1000 mg, 5-500 mg | 1 | |
| SEGLUROMET ORAL TABLET 2.5-1000 MG, 2.5-500 MG, 7.5-1000 MG, 7.5-500 MG | E | |
| sitaglip phos-metformin hcl er oral tablet extended release 24 hour 100-1000 mg, 50-1000 mg, 50-500 mg | 1 | |
| SITAGLIPT BASE-METFORM HCL ER ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG | E | |
| SITAGLIPTIN BASE-METFORMIN HCL ORAL TABLET 50-1000 MG, 50-500 MG | E | |
| SITAGLIPTIN ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| sitagliptin phos-metformin hcl oral tablet 50-1000 mg, 50-500 mg | 1 | |
| sitagliptin phosphate oral tablet 100 mg, 25 mg, 50 mg | 1 | |
| SOLIQUA SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-33 UNT-MCG/ML | 2 | |
| STEGLATRO ORAL TABLET 15 MG, 5 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| STEGLUJAN ORAL TABLET 15-100 MG, 5-100 MG | E | |
| SYNJARDY ORAL TABLET 12.5-1000 MG, 12.5-500 MG, 5-1000 MG, 5-500 MG | 2 | |
| SYNJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 12.5-1000 MG, 25-1000 MG, 5-1000 MG | 2 | |
| TRADJENTA ORAL TABLET 5 MG | 2 | |
| TRIJARDY XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-5-1000 MG, 12.5-2.5-1000 MG, 25-5-1000 MG, 5-2.5-1000 MG | 2 | |
| TRULICITY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.75 MG/0.5ML, 1.5 MG/0.5ML, 3 MG/0.5ML, 4.5 MG/0.5ML | 2 | PA; QL (0.08 ML per 1 day) |
| TZIELD INTRAVENOUS SOLUTION 2 MG/2ML | E | |
| VICTOZA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML | E | |
| XIGDUO XR ORAL TABLET EXTENDED RELEASE 24 HOUR 10-1000 MG, 10-500 MG, 2.5-1000 MG, 5-1000 MG, 5-500 MG | E | |
| XULTOPHY SUBCUTANEOUS SOLUTION PEN-INJECTOR 100-3.6 UNIT-MG/ML | 3 | |
| ZITUVIMET ORAL TABLET 50-1000 MG, 50-500 MG | E | |
| ZITUVIMET XR ORAL TABLET EXTENDED RELEASE 24 HOUR 100-1000 MG, 50-1000 MG, 50-500 MG | E | |
| ZITUVIO ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| **Diabetes - Glucose Monitoring** | | |
| ACCU-CHEK AVIVA IN VITRO SOLUTION | E | |
| ACCU-CHEK AVIVA PLUS IN VITRO STRIP | E | |
| ACCU-CHEK AVIVA PLUS KIT W/DEVICE | E | |
| ACCU-CHEK FASTCLIX LANCET KIT KIT | 2 | |
| ACCU-CHEK GUIDE CONTROL IN VITRO LIQUID | E | |
| ACCU-CHEK GUIDE KIT W/DEVICE | E | |
| ACCU-CHEK GUIDE ME KIT W/DEVICE | E | |
| ACCU-CHEK GUIDE TEST IN VITRO STRIP | E | |
| ACCU-CHEK SMARTVIEW CONTROL IN VITRO LIQUID | E | |
| ACCU-CHEK SMARTVIEW TEST STRIPS IN VITRO STRIP | E | |
| ACCU-CHEK SOFTCLIX LANCET DEVICE KIT | 2 | |
| ACCU-CHEK ULTRAFLEX INF SET | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ACCUTREND GLUCOSE CONTROL IN VITRO SOLUTION | E | |
| ACCUTREND GLUCOSE IN VITRO STRIP | E | |
| ADVANCE INTUITION CONTROL IN VITRO LIQUID NORMAL | E | |
| ADVANCE INTUITION METER DEVICE | E | |
| ADVANCE INTUITION MONITOR KIT | E | |
| ADVANCE INTUITION TEST IN VITRO STRIP | E | |
| ADVANCE MICRO-DRAW CONTROL IN VITRO LIQUID | E | |
| ADVANCE MICRO-DRAW METER DEVICE | E | |
| ADVANCE MICRO-DRAW NORMAL IN VITRO LIQUID | E | |
| ADVANCE MICRO-DRAW TEST IN VITRO STRIP | E | |
| ADVANTAGE SAFETY LANCETS 28G | 2 | |
| ADVOCATE BLOOD GLUCOSE MONITOR DEVICE | E | |
| ADVOCATE BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| ADVOCATE CONTROL SOLUTION IN VITRO LIQUID HIGH , LOW | E | |
| ADVOCATE REDI-CODE DEVICE | E | |
| ADVOCATE REDI-CODE IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ADVOCATE REDI-CODE KIT W/DEVICE | E | |
| ADVOCATE REDI-CODE+ CONTROL IN VITRO SOLUTION HIGH , LOW | E | |
| ADVOCATE REDI-CODE+ DEVICE | E | |
| ADVOCATE REDI-CODE+ TEST IN VITRO STRIP | E | |
| ADVOCATE SAFETY LANCETS 21G | 2 | |
| ADVOCATE SAFETY LANCETS 23G | 2 | |
| ADVOCATE SAFETY LANCETS 28G | 2 | |
| ADVOCATE TEST IN VITRO STRIP | E | |
| AGAMATRIX AMP TEST IN VITRO STRIP | E | |
| AGAMATRIX CONTROL IN VITRO SOLUTION HIGH , NORMAL | E | |
| AGAMATRIX CONTROL LEVEL 2 IN VITRO SOLUTION | E | |
| AGAMATRIX CONTROL LEVEL 4 IN VITRO SOLUTION | E | |
| AGAMATRIX CONTROL NORMAL/HIGH IN VITRO SOLUTION | E | |
| AGAMATRIX JAZZ TEST IN VITRO STRIP | E | |
| AGAMATRIX JAZZ WIRELESS 2 KIT W/DEVICE | E | |
| AGAMATRIX PRESTO KIT W/DEVICE | E | |
| AGAMATRIX PRESTO TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ASSURE 3 CONTROL IN VITRO LIQUID | E | |
| ASSURE 3 TEST IN VITRO STRIP | E | |
| ASSURE 4 CONTROL LEVEL 1 & 2 IN VITRO LIQUID | E | |
| ASSURE 4 METER DEVICE | E | |
| ASSURE 4 TEST IN VITRO STRIP | E | |
| ASSURE CONTROL SOLUTION 2/3 IN VITRO LIQUID | E | |
| ASSURE DOSE CONTROL IN VITRO SOLUTION NORMAL | E | |
| ASSURE DOSE NORM/HIGH CONTROL IN VITRO SOLUTION | E | |
| ASSURE II CHECK IN VITRO STRIP | E | |
| ASSURE II CONTROL IN VITRO LIQUID | E | |
| ASSURE II CONTROL LEVEL 1 & 2 IN VITRO LIQUID | E | |
| ASSURE II IN VITRO STRIP | E | |
| ASSURE PLATINUM IN VITRO STRIP | E | |
| ASSURE PLATINUM METER DEVICE | E | |
| ASSURE PRISM CONTROL LEVEL 1&2 IN VITRO SOLUTION | E | |
| ASSURE PRISM MULTI METER DEVICE | E | |
| ASSURE PRISM MULTI TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ASSURE PRO BLOOD GLUCOSE METER DEVICE | E | |
| ASSURE PRO CONTROL LEVEL 1 & 2 IN VITRO LIQUID | E | |
| ASSURE PRO TEST IN VITRO STRIP | E | |
| ASSURE TITANIUM BLOOD GLUCOSE DEVICE | E | |
| ASSURE TITANIUM IN VITRO STRIP | E | |
| AUTOLET II CLINISAFE KIT | 3 | |
| AUTOLET LANCING DEVICE | 3 | |
| AUTOLET LITE LANCING DEVICE | 3 | |
| BD LATITUDE DIABETES KIT | E | |
| BD LOGIC BLOOD GLUCOSE MONITOR KIT W/DEVICE | E | |
| BIGFOOT UNITY PROGRAM KIT | E | |
| BIOTEL CARE BLOOD GLUCOSE KIT W/DEVICE | E | |
| BIOTEL CARE BLOOD GLUCOSE SYST KIT W/DEVICE | E | |
| BIOTEL CARE TEST STRIPS IN VITRO STRIP | E | |
| BLOOD GLUCOSE MONITOR SYSTEM KIT W/DEVICE | E | |
| BLOOD GLUCOSE MONITORING 333 DEVICE | E | |
| BLOOD GLUCOSE TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BLOOD GLUCOSE TEST STRIPS 333 IN VITRO STRIP | E | |
| BLULINK CONTROL HIGH & LOW IN VITRO LIQUID | E | |
| BLULINK GLUCOSE MONITORING SYS DEVICE | E | |
| BLULINK GLUCOSE TEST IN VITRO STRIP | E | |
| CARESENS CONTROL A IN VITRO SOLUTION | E | |
| CARESENS CONTROL SOLUTION A/B IN VITRO SOLUTION | E | |
| CARESENS LANCETS 30G | 2 | |
| CARESENS N FELIZ BT DEVICE | E | |
| CARESENS N FELIZ DEVICE | E | |
| CARESENS N GLUCOSE SYSTEM DEVICE | E | |
| CARESENS N GLUCOSE TEST IN VITRO STRIP | E | |
| CARESENS N PLUS BT KIT W/DEVICE | E | |
| CARESENS N VOICE SYSTEM DEVICE | E | |
| CARESENS S CONTROL SOLN A/B IN VITRO LIQUID | E | |
| CARESENS S FIT BLOOD GLUC MON DEVICE | E | |
| CARESENS S FIT BT BLOOD GLUC DEVICE | E | |
| CARESENS S GLUCOSE TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CARETOUCH CONTROL SOL LEVEL 2 IN VITRO LIQUID | E | |
| CARETOUCH LANCING/EJECTOR | 3 | |
| CARETOUCH MONITOR SYSTEM KIT W/DEVICE | E | |
| CARETOUCH TEST IN VITRO STRIP | E | |
| CHEMSTRIP BG LOG BOOK | 3 | |
| CHEMSTRIP K IN VITRO STRIP | 3 | |
| CHEMSTRIP UGK IN VITRO STRIP | 3 | |
| CHOSEN LANCETS 30G | 2 | |
| CHOSEN LANCING DEVICE | 3 | |
| CHOSEN SAFETY LANCETS 28G | 2 | |
| CLEVER CHEK AUTO-CODE SYSTEM DEVICE | E | |
| CLEVER CHEK AUTO-CODE TEST IN VITRO STRIP | E | |
| CLEVER CHEK AUTO-CODE VOICE DEVICE | E | |
| CLEVER CHEK AUTO-CODE VOICE IN VITRO STRIP | E | |
| CLEVER CHEK SYSTEM KIT W/DEVICE | E | |
| CLEVER CHEK TEST IN VITRO STRIP | E | |
| CLEVER CHOICE AUTO-CODE SYSTEM DEVICE | E | |
| CLEVER CHOICE AUTO-CODE TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CLEVER CHOICE COMFORT EZ | 2 | |
| CLEVER CHOICE GLUCOSE CONTROL IN VITRO LIQUID HIGH , LOW | E | |
| CLEVER CHOICE MICRO SYSTEM KIT W/DEVICE | E | |
| CLEVER CHOICE MICRO TEST IN VITRO STRIP | E | |
| CLEVER CHOICE MINI SYSTEM DEVICE | E | |
| CLEVER CHOICE NO CODING IN VITRO STRIP | E | |
| CLEVER CHOICE TALK SYSTEM DEVICE | E | |
| CLEVER CHOICE TALK SYSTEM IN VITRO STRIP | E | |
| COMFORT TOUCH TWIST LANCET 30G | 2 | |
| CONTOUR CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL | 2 | |
| CONTOUR NEXT CONTROL IN VITRO SOLUTION LOW , NORMAL | 2 | |
| CONTOUR NEXT IN VITRO STRIP | 2 | QL (3.4 EA per 1 day) |
| CONTOUR NEXT TEST IN VITRO STRIP | 2 | QL (3.4 EA per 1 day) |
| CONTOUR PLUS CONTROL SOLUTION IN VITRO LIQUID | 3 | |
| CONTOUR PLUS TEST IN VITRO STRIP | 2 | QL (3.4 EA per 1 day) |
| CONTOUR TEST IN VITRO STRIP | 2 | QL (3.4 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| COOL BLOOD GLUCOSE TEST STRIPS IN VITRO STRIP | E | |
| COOL CONTROL A IN VITRO SOLUTION | E | |
| COOL CONTROL B IN VITRO SOLUTION | E | |
| COOL MONITOR DEVICE | E | |
| COOL MONITOR KIT KIT W/DEVICE | E | |
| CVS ADVANCED GLUCOSE TEST IN VITRO STRIP | E | |
| CVS BLOOD GLUCOSE METER DEVICE | E | |
| CVS BLOOD GLUCOSE METER KIT W/DEVICE | E | |
| CVS GLUCOSE METER TEST STRIPS IN VITRO STRIP | E | |
| CVS TRUE METRIX GLUCOSE TEST IN VITRO STRIP | E | |
| D-CARE BLOOD GLUCOSE IN VITRO STRIP | E | |
| D-CARE GLUCOMETER KIT W/DEVICE | E | |
| DEXCOM G6 RECEIVER DEVICE | 2 | PA |
| DEXCOM G6 SENSOR | 2 | PA |
| DEXCOM G6 TRANSMITTER | 2 | PA |
| DEXCOM G7 15 DAY SENSOR | 2 | PA |
| DEXCOM G7 RECEIVER DEVICE | 2 | PA |
| DEXCOM G7 SENSOR | 2 | PA |
| DIABETES CARE KIT | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DIASTIX REAGENT IN VITRO STRIP | 2 | |
| DIATHRIVE BLOOD GLUCOSE METER DEVICE | E | |
| DIATHRIVE BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| DIATHRIVE GLUCOSE CONTROL SOLN IN VITRO LIQUID | E | |
| DIATHRIVE GLUCOSE TEST IN VITRO STRIP | E | |
| DIATHRIVE LANCING DEVICE | 3 | |
| DIATHRIVE+ GLUCOSE MONITOR DEVICE | E | |
| DIATHRIVE+ GLUCOSE TEST IN VITRO STRIP | E | |
| DROPLET GENTEEL LANCING DEVICE | 3 | |
| DROPLET MEDLANCE LANCET 30G | 2 | |
| DROPSAFE ACTI-LANCE 23G | 2 | |
| DROPSAFE ACTI-LANCE LANCET 17G | 2 | |
| DROPSAFE ACTI-LANCE LANCET 23G | 2 | |
| DROPSAFE ACTI-LANCE LANCET 28G | 2 | |
| DROPSAFE ERGOLANCE LANCET 21G | 2 | |
| DROPSAFE ERGOLANCE LANCET 25G | 2 | |
| DROPSAFE ERGOLANCE LANCET 30G | 2 | |
| DROPSAFE HAEMOLANCE LANCET 1.5 | 2 | |
| DROPSAFE HAEMOLANCE LANCET 18G | 2 | |
| DROPSAFE HAEMOLANCE LANCET 21G | 2 | |
| DROPSAFE HAEMOLANCE LANCET 25G | 2 | |
| DROPSAFE HAEMOLANCE LANCET 28G | 2 | |
| DROPSAFE MEDISAFE LANCET 23G | 2 | |
| DROPSAFE MEDISAFE LANCET 29G | 2 | |
| DROPSAFE MEDLANCE LANCET 0.8MM | 2 | |
| DROPSAFE MEDLANCE LANCET 21G | 2 | |
| DROPSAFE MEDLANCE LANCET 25G | 2 | |
| DROPSAFE MEDLANCE LANCET 30G | 2 | |
| DUO-CARE CONTROL SOLUTION IN VITRO LIQUID | E | |
| DUO-CARE TEST IN VITRO STRIP | E | |
| EASY MAX BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EASY MAX T1 GLUCOSE SYSTEM KIT W/DEVICE | E | |
| EASY PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EASY PLUS II GLUCOSE SYSTEM DEVICE | E | |
| EASY PLUS II GLUCOSE TEST IN VITRO STRIP | E | |
| EASY STEP CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |
| EASY STEP GLUCOSE MONITOR DEVICE | E | |
| EASY STEP TEST IN VITRO STRIP | E | |
| EASY TALK BLOOD GLUCOSE SYSTEM DEVICE | E | |
| EASY TALK BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EASY TALK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |
| EASY TALK PLUS II CONTROL IN VITRO SOLUTION HIGH , LOW | E | |
| EASY TALK PLUS II TEST STRIPS IN VITRO STRIP | E | |
| EASY TOUCH CONTROL HIGH & LOW IN VITRO SOLUTION | E | |
| EASY TOUCH GLUCOSE SYSTEM KIT W/DEVICE | E | |
| EASY TOUCH HEALTHPRO GLUCOSE IN VITRO STRIP | E | |
| EASY TOUCH HEALTHPRO GLUCOSE KIT W/DEVICE | E | |
| EASY TOUCH HEALTHPRO HIGH/LOW IN VITRO LIQUID | E | |
| EASY TOUCH LANCING DEVICE | 3 | |
| EASY TOUCH TEST IN VITRO STRIP | E | |
| EASY TRAK BLOOD GLUCOSE SYSTEM DEVICE | E | |
| EASY TRAK BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EASY TRAK CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |
| EASY TRAK II BLOOD GLUCOSE SYS DEVICE | E | |
| EASY TRAK II CONTROL IN VITRO LIQUID NORMAL | E | |
| EASY TRAK II GLUCOSE TEST IN VITRO STRIP | E | |
| EASYGLUCO IN VITRO STRIP | E | |
| EASYMAX 15 LEVEL 2 CONTROL IN VITRO SOLUTION | E | |
| EASYMAX 15 LEVEL 2-3 CONTROL IN VITRO LIQUID | E | |
| EASYMAX 15 TEST IN VITRO STRIP | E | |
| EASYMAX CONTROL IN VITRO SOLUTION NORMAL | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EASYMAX CONTROL NORMAL/HIGH IN VITRO LIQUID | E | |
| EASYMAX NG BLOOD GLUCOSE DEVICE | E | |
| EASYMAX NG BLOOD GLUCOSE KIT W/DEVICE | E | |
| EASYMAX TEST IN VITRO STRIP | E | |
| EASYMAX V BLOOD GLUCOSE DEVICE | E | |
| EASYPRO BLOOD GLUCOSE MONITOR KIT W/DEVICE | E | |
| EASYPRO BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EASYPRO PLUS IN VITRO STRIP | E | |
| EASYPRO PLUS KIT W/DEVICE | E | |
| ELEMENT AUTOCODE SYSTEM KIT W/DEVICE | E | |
| ELEMENT COMPACT CONTROL 2 IN VITRO SOLUTION | E | |
| ELEMENT COMPACT CONTROL 3 IN VITRO SOLUTION | E | |
| ELEMENT COMPACT GLUCOSE SYSTEM DEVICE | E | |
| ELEMENT COMPACT TEST IN VITRO STRIP | E | |
| ELEMENT COMPACT V GLUCOSE SYS DEVICE | E | |
| ELEMENT CONTROL IN VITRO LIQUID HIGH , LOW , NORMAL | E | |
| ELEMENT PLUS DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ELEMENT TEST IN VITRO STRIP | E | |
| EMBRACE BLOOD GLUCOSE MONITOR DEVICE | E | |
| EMBRACE BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EMBRACE CONTROL IN VITRO SOLUTION LOW | E | |
| EMBRACE EVO BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EMBRACE EVO CONTROL LEVEL 1 IN VITRO LIQUID LOW | E | |
| EMBRACE EVO GLUCOSE MONITORING KIT W/DEVICE | E | |
| EMBRACE GLUCOSE CONTROL IN VITRO LIQUID HIGH | E | |
| EMBRACE LANCING DEVICE/EJECTOR | 3 | |
| EMBRACE PRO GLUCOSE CONTROL IN VITRO LIQUID | E | |
| EMBRACE PRO GLUCOSE METER DEVICE | E | |
| EMBRACE PRO GLUCOSE TEST IN VITRO STRIP | E | |
| EMBRACE TALK BLOOD GLUCOSE DEVICE | E | |
| EMBRACE TALK GLUCOSE CONTROL IN VITRO SOLUTION HIGH , LOW | E | |
| EMBRACE TALK GLUCOSE TEST IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EMBRACE TALK MONITORING SYSTEM KIT W/DEVICE | E | |
| EMBRACE WAVE BLOOD GLUCOSE DEVICE | E | |
| EMBRACE WAVE BLOOD GLUCOSE IN VITRO STRIP | E | |
| EMBRACE WAVE GLUCOSE CONTROL IN VITRO LIQUID HIGH | E | |
| EMBRACE WAVE GLUCOSE METER DEVICE | E | |
| ENLITE GLUCOSE SENSOR | 3 | PA |
| EQ BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| EVERSENSE 365 SENSOR/HOLDER | E | |
| EVERSENSE 365 SMART TRANSMIT | E | |
| EVERSENSE SENSOR/HOLDER | E | |
| EVOLUTION AUTOCODE DEVICE | E | |
| EVOLUTION AUTOCODE IN VITRO STRIP | E | |
| EVOLUTION CONTROL IN VITRO SOLUTION NORMAL | E | |
| EXTENDED INFUSION SET 23"/6MM | 3 | |
| EXTENDED INFUSION SET 23"/9MM | 3 | |
| EXTENDED INFUSION SET 32"/6MM | 3 | |
| EXTENDED INFUSION SET 32"/9MM | 3 | |
| EXTENDED INFUSION SET 43"/6MM | 3 | |
| EXTENDED INFUSION SET 43"/9MM | 3 | |
| EXTENDED RESERVOIR 3ML | 3 | |
| FIFTY50 GLUCOSE METER 2.0 KIT W/DEVICE | E | |
| FIFTY50 GLUCOSE TEST 2.0 IN VITRO STRIP | E | |
| FONDCIRCLE BLOOD GLUCOSE MONIT KIT W/DEVICE | E | |
| FONDCIRCLE BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FONDCIRCLE CONTROL SOLUTION IN VITRO LIQUID NORMAL | E | |
| FONDCIRCLE LANCING DEVICE | 3 | |
| FONDCIRCLE SINGLE USE LANCETS | 2 | |
| FORA 6 CONNECT IN VITRO STRIP | E | |
| FORA 6 CONNECT/GTEL TEST IN VITRO STRIP | E | |
| FORA CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |
| FORA D40/G31 BLOOD GLUCOSE IN VITRO STRIP | E | |
| FORA G20 BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| FORA G20 BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FORA G30A BLOOD GLUCOSE SYSTEM DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FORA GD20 BLOOD GLUCOSE SYSTEM DEVICE | E | |
| FORA GD20 TEST IN VITRO STRIP | E | |
| FORA GD50 BLOOD GLUCOSE SYSTEM DEVICE | E | |
| FORA GD50 BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FORA GTEL BLOOD GLUCOSE SYSTEM DEVICE | E | |
| FORA GTEL BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FORA PREMIUM V10 BLE SYSTEM DEVICE | E | |
| FORA TEST N' GO MONITOR DEVICE | E | |
| FORA TN'G ADVANCE PRO IN VITRO STRIP | E | |
| FORA TN'G VOICE KIT W/DEVICE | E | |
| FORA TN'G/TN'G VOICE IN VITRO STRIP | E | |
| FORA V10 BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FORA V12 BLOOD GLUCOSE SYSTEM DEVICE | E | |
| FORA V30A BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| FORACARE GD40 MONITOR DEVICE | E | |
| FORACARE GD40 TEST IN VITRO STRIP | E | |
| FORACARE GDH CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FORACARE PREMIUM V10 DEVICE | E | |
| FORACARE PREMIUM V10 TEST IN VITRO STRIP | E | |
| FORACARE TEST N GO MONITOR DEVICE | E | |
| FORACARE TEST N GO TEST IN VITRO STRIP | E | |
| FREESTYLE CONTROL SOLUTION IN VITRO LIQUID | E | |
| FREESTYLE FREEDOM LITE KIT W/DEVICE | E | |
| FREESTYLE INSULINX TEST IN VITRO STRIP | E | |
| FREESTYLE LIBRE 14 DAY READER DEVICE | E | |
| FREESTYLE LIBRE 14 DAY SENSOR | E | |
| FREESTYLE LIBRE 2 PLUS SENSOR | E | |
| FREESTYLE LIBRE 2 READER DEVICE | E | |
| FREESTYLE LIBRE 2 SENSOR | E | |
| FREESTYLE LIBRE 3 PLUS SENSOR | E | |
| FREESTYLE LIBRE 3 READER DEVICE | E | |
| FREESTYLE LIBRE 3 SENSOR | E | |
| FREESTYLE LITE DEVICE | E | |
| FREESTYLE LITE KIT W/DEVICE | E | |
| FREESTYLE LITE TEST IN VITRO STRIP | E | |
| FREESTYLE PRECISION NEO SYSTEM KIT W/DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FREESTYLE PRECISION NEO TEST IN VITRO STRIP | E | |
| FREESTYLE TEST IN VITRO STRIP | E | |
| GE100 BLOOD GLUCOSE SYSTEM DEVICE | E | |
| GE100 BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| GE100 BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| GE100 CONTROL IN VITRO SOLUTION NORMAL | E | |
| GENTEEL LANCING KIT (BLUE) KIT | 3 | |
| GENULTIMATE TEST IN VITRO STRIP | E | |
| GHT BLOOD GLUCOSE MONITOR KIT W/DEVICE | E | |
| GHT TEST IN VITRO STRIP | E | |
| GLUCO PERFECT 3 METER DEVICE | E | |
| GLUCO PERFECT 3 TEST IN VITRO STRIP | E | |
| GLUCOCARD 01 BLOOD GLUCOSE DEVICE | E | |
| GLUCOCARD 01 BLOOD GLUCOSE KIT W/DEVICE | E | |
| GLUCOCARD 01 CONTROL IN VITRO LIQUID | E | |
| GLUCOCARD 01 CONTROL IN VITRO SOLUTION NORMAL | E | |
| GLUCOCARD 01 SENSOR PLUS IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| GLUCOCARD 01 TEST IN VITRO STRIP | E | |
| GLUCOCARD 01-MINI GLUCOSE KIT W/DEVICE | E | |
| GLUCOCARD EXPRESSION CONTROL IN VITRO SOLUTION | E | |
| GLUCOCARD EXPRESSION MONITOR KIT W/DEVICE | E | |
| GLUCOCARD EXPRESSION TEST IN VITRO STRIP | E | |
| GLUCOCARD SHINE CONNEX KIT W/DEVICE | E | |
| GLUCOCARD SHINE CONTROL IN VITRO SOLUTION | E | |
| GLUCOCARD SHINE DEVICE | E | |
| GLUCOCARD SHINE EXPRESS KIT W/DEVICE | E | |
| GLUCOCARD SHINE KIT W/DEVICE | E | |
| GLUCOCARD SHINE TEST IN VITRO STRIP | E | |
| GLUCOCARD SHINE XL DEVICE | E | |
| GLUCOCARD VITAL MONITOR KIT W/DEVICE | E | |
| GLUCOCARD VITAL TEST IN VITRO STRIP | E | |
| GLUCOCARD X-METER KIT W/DEVICE | E | |
| GLUCOCARD X-SENSOR CONTROL IN VITRO SOLUTION NORMAL | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| GLUCOCARD X-SENSOR IN VITRO STRIP | E | |
| GLUCOCOM BLOOD GLUCOSE MONITOR DEVICE | E | |
| GLUCOCOM CONTROL IN VITRO LIQUID HIGH , NORMAL | E | |
| GLUCOCOM MONITOR KIT W/DEVICE | E | |
| GLUCOCOM TEST IN VITRO STRIP | E | |
| GLUCONAVII BLOOD GLUCOSE SYS KIT W/DEVICE | E | |
| GLUCONAVII BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| GLUCOSE METER TEST IN VITRO STRIP | E | |
| GNP EASY TOUCH CONT HIGH/LOW IN VITRO LIQUID | E | |
| GNP EASY TOUCH CONT HIGH/LOW IN VITRO SOLUTION | E | |
| GNP EASY TOUCH GLUCOSE METER DEVICE | E | |
| GNP EASY TOUCH GLUCOSE TEST IN VITRO STRIP | E | |
| GNP TRUE METRIX AIR METER KIT W/DEVICE | E | |
| GNP TRUE METRIX GLUCOSE METER KIT W/DEVICE | E | |
| GNP TRUE METRIX GLUCOSE STRIPS IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| GNP TRUETRACK SMART SYSTEM IN VITRO STRIP | E | |
| GNP TRUETRACK TEST STRIPS IN VITRO STRIP | E | |
| GOJJI BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| GOJJI BLOOD TEST STRIP/LANCETS IN VITRO STRIP | E | |
| GOJJI CONTROL IN VITRO SOLUTION NORMAL | E | |
| GOJJI LANCING DEVICE/CLEAR CAP | 3 | |
| GOJJI STERILE LANCETS | 2 | |
| GUARDIAN 4 GLUCOSE SENSOR | 3 | PA |
| GUARDIAN 4 TRANSMITTER | 3 | PA |
| GUARDIAN REAL-TIME CHARGER | 3 | |
| GUARDIAN REAL-TIME TEST PLUG | 3 | |
| GUARDIAN SENSOR 3 | 3 | PA |
| HEALTHPRO BLOOD GLUCOSE MONITO KIT W/DEVICE | E | |
| HM EMBRACE TALK SYSTEM KIT W/DEVICE | E | |
| HW EMBRACE PRO GLUCOSE METER DEVICE | E | |
| HW EMBRACE PRO GLUCOSE TEST IN VITRO STRIP | E | |
| HW EMBRACE TALK BLOOD GLUCOSE DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HW EMBRACE TALK GLUCOSE TEST IN VITRO STRIP | E | |
| IGLUCOSE MONITORING SYSTEM KIT W/DEVICE | E | |
| IGLUCOSE TEST STRIPS IN VITRO STRIP | E | |
| IHEALTH BLOOD GLUCOSE TEST STR IN VITRO STRIP | E | |
| IHEALTH CONTROL SOLUTION IN VITRO LIQUID | E | |
| IHEALTH GLUCO+ KIT 10 KIT | E | |
| IHEALTH GLUCO+ KIT 100 KIT | E | |
| IHEALTH LANCING DEVICE | 3 | |
| ILET CONTACT DETACH 23" 6MM | 3 | |
| ILET INFUSION-FLEX 23" 6MM | 3 | |
| ILET INFUSION-INSET 23" 6MM | 3 | |
| ILET INFUSION-INSET 32" 6MM | 3 | |
| ILET INSULIN PUMP DEVICE | 3 | |
| ILET STARTER - CONTACT DETACH | 3 | |
| ILET STARTER KIT - INSET 23" | 3 | |
| ILET STARTER KIT - INSET 32" | 3 | |
| IN TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| IN TOUCH DEVICE | E | |
| IN TOUCH GLUCOSE CONTROL IN VITRO SOLUTION | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| INFINITY BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| INFINITY BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| INFINITY CONTROL IN VITRO SOLUTION HIGH , LOW , NORMAL | E | |
| INFINITY VOICE IN VITRO LIQUID NORMAL | E | |
| INFINITY VOICE IN VITRO STRIP | E | |
| INFINITY VOICE KIT W/DEVICE | E | |
| INSUL-TOTE ULTIMATE | 3 | |
| KETO-DIASTIX IN VITRO STRIP | 3 | |
| KETONE CARE IN VITRO STRIP | 3 | |
| KETOSTIX IN VITRO STRIP | 3 | |
| KROGER HEALTHPRO CONTROL HI/LO IN VITRO LIQUID | E | |
| KROGER HEALTHPRO GLUCOSE TEST IN VITRO STRIP | E | |
| KT TAPE CGM PATCH | 3 | |
| LANCETS | 2 | |
| LANCETS 28G THIN | 2 | |
| LANCETS SUPER THIN | 2 | |
| MEDISENSE GLUCOSE KETONE CONTR IN VITRO LIQUID | E | |
| MEIJER TRUE2GO BLOOD GLUCOSE KIT W/DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| MEIJER TRUERESULT GLUCOSE SYS KIT W/DEVICE | E | |
| MEIJER TRUETEST TEST IN VITRO STRIP | E | |
| MEIJER TRUETRACK GLUCOSE SYS KIT W/DEVICE | E | |
| MEIJER TRUETRACK TEST IN VITRO STRIP | E | |
| MICRODOT BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| MICRODOT CONTROL HIGH/LOW IN VITRO SOLUTION | E | |
| MICRODOT TEST IN VITRO STRIP | E | |
| MICROLET NEXT LANCETS | 2 | |
| MICROLET NEXT LANCING DEVICE | 3 | |
| MINIMED 780G INSULIN PUMP KIT | 3 | |
| MINIMED EXTENDED SUPPLY KIT | 3 | |
| MINIMED FLEX STARTER KIT KIT | 3 | |
| MINIMED INSTINCT GLUC SENSOR | 3 | PA |
| MINIMED MIO ADVANCE INFUSE SET | 3 | |
| MINIMED PUMP RESERVOIR 3ML | 3 | |
| MINIMED QUICK SET INF SET 18" | 3 | |
| MINIMED QUICK SET INF SET 23" | 3 | |
| MINIMED QUICK SET INF SET 32" | 3 | |
| MINIMED QUICK SET INF SET 43" | 3 | |
| MINIMED RESERVOIR 3ML | 3 | |
| MINIMED SILHOUETTE INF SET 32" | 3 | |
| MINIMED SILHOUETTE INF SET 43" | 3 | |
| MM BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| MM BLULINK GLUCOSE MONIT SYS DEVICE | E | |
| MM BLULINK GLUCOSE TEST IN VITRO STRIP | E | |
| MM EASY TOUCH GLUCOSE IN VITRO STRIP | E | |
| MM EASY TOUCH GLUCOSE METER KIT W/DEVICE | E | |
| MOBI CONNECT LANCING DEVICE | 3 | |
| MOBI CONNECT TWIST LANCETS | 2 | |
| MOBILE LANCETS 30G | 2 | |
| MYGLUCOHEALTH BLOOD GLUCOSE KIT W/DEVICE | E | |
| MYGLUCOHEALTH CONTROL IN VITRO SOLUTION | E | |
| MYGLUCOHEALTH TEST IN VITRO STRIP | E | |
| NEUTEK 2TEK CONTROL IN VITRO SOLUTION | E | |
| NEUTEK 2TEK TEST IN VITRO STRIP | E | |
| NOVA MAX BLOOD GLUCOSE SYSTEM DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NOVA MAX BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| NOVA MAX GLUCOSE TEST IN VITRO STRIP | E | |
| NOVA MAX PLUS GLU/KET CONTROL IN VITRO LIQUID | E | |
| ON CALL EXPRESS BLOOD GLUCOSE IN VITRO STRIP | E | |
| ON CALL EXPRESS MONITORING SYS KIT W/DEVICE | E | |
| ONE DROP BLOOD GLUCOSE MONITOR KIT W/DEVICE | E | |
| ONE DROP TEST IN VITRO STRIP | E | |
| ONETOUCH DELICA PLUS LANCING | 3 | |
| ONETOUCH DELICA SAFETY LANCING | 2 | |
| ONETOUCH ULTRA 2 KIT W/DEVICE | E | |
| ONETOUCH ULTRA BLUE TEST IN VITRO STRIP | E | |
| ONETOUCH ULTRA CONTROL IN VITRO LIQUID | E | |
| ONETOUCH ULTRA IN VITRO LIQUID | E | |
| ONETOUCH ULTRA IN VITRO STRIP | E | |
| ONETOUCH ULTRA TEST IN VITRO STRIP | E | |
| ONETOUCH VERIO FLEX SYSTEM DEVICE | E | |
| ONETOUCH VERIO FLEX SYSTEM KIT W/DEVICE | E | |
| ONETOUCH VERIO IN VITRO LIQUID , HIGH | E | |
| ONETOUCH VERIO TEST STRIPS | E | |
| ONETOUCH VERIO REFLECT KIT W/DEVICE | E | |
| OPTIUMEZ TEST IN VITRO STRIP | E | |
| PERFECT POINT SAFETY LANCETS | 2 | |
| PHARMACIST CHOICE AUTOCODE IN VITRO STRIP | E | |
| PHARMACIST CHOICE AUTOCODE SYS KIT W/DEVICE | E | |
| PHARMACIST CHOICE MINI SYSTEM DEVICE | E | |
| PHARMACIST CHOICE NO CODING IN VITRO STRIP | E | |
| PIP BLOOD GLUCOSE MONITORING DEVICE | E | |
| PIP BLOOD GLUCOSE TEST STRIP IN VITRO STRIP | E | |
| PIP GLUCOSE CONTROL SOLUTION IN VITRO LIQUID | E | |
| POCKETCHEM EZ CONTROL IN VITRO SOLUTION | E | |
| POCKETCHEM EZ SYSTEM KIT W/DEVICE | E | |
| POCKETCHEM EZ TEST IN VITRO STRIP | E | |
| POGO AUTOMATIC BLOOD GLUCOSE DEVICE | E | |
| POGO AUTOMATIC TEST CARTRIDGES IN VITRO DIAGNOSTIC TEST | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PRECISION GLUCOSE KETONE CONTR IN VITRO LIQUID | E | |
| PRECISION XTRA BLOOD GLUCOSE IN VITRO STRIP | E | |
| PRO VOICE V8/V9 GLUCOSE IN VITRO STRIP | E | |
| PRO VOICE V9 GLUCOSE SYSTEM DEVICE | E | |
| PRODIGY AUTOCODE BLOOD GLUCOSE DEVICE | E | |
| PRODIGY AUTOCODE BLOOD GLUCOSE KIT W/DEVICE | E | |
| PRODIGY CONTROL SOLUTION IN VITRO SOLUTION HIGH , LOW | E | |
| PRODIGY NO CODING BLOOD GLUC IN VITRO STRIP | E | |
| PRODIGY NO CODING BLOOD GLUC KIT W/DEVICE | E | |
| PRODIGY POCKET BLOOD GLUCOSE KIT W/DEVICE | E | |
| PRODIGY VOICE BLOOD GLUCOSE KIT W/DEVICE | E | |
| PTS PANELS EGLU TEST IN VITRO STRIP | E | |
| PURE COMFORT SAFETY LANCET 30G | 2 | |
| QUICK TOUCH BLOOD GLUCOSE KIT W/DEVICE | E | |
| QUICK TOUCH BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| QUICKTEK CONTROL SOLUTION IN VITRO LIQUID | E | |
| QUICKTEK TEST IN VITRO STRIP | E | |
| QUICKTEK/METER KIT | E | |
| QUINTET AC BLOOD GLUCOSE DEVICE | E | |
| QUINTET AC BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| QUINTET BLOOD GLUCOSE SYSTEM DEVICE | E | |
| QUINTET BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| QUINTET CONTROL HIGH/NORMAL IN VITRO SOLUTION | E | |
| REFUAH PLUS BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| REFUAH PLUS GLUCOSE CONTROL IN VITRO SOLUTION | E | |
| REFUAH PLUS MONITORING SYSTEM KIT W/DEVICE | E | |
| RELION ALL-IN-ONE DEVICE | E | |
| RELION BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| RELION CONFIRM GLUCOSE MONITOR KIT W/DEVICE | E | |
| RELION CONFIRM/MICRO TEST IN VITRO STRIP | E | |
| RELION GLUCOSE TEST STRIPS IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| RELION MICRO KIT W/DEVICE | E | |
| RELION PREMIER BLU MONITOR DEVICE | E | |
| RELION PREMIER CLASSIC DEVICE | E | |
| RELION PREMIER COMPACT SYSTEM KIT W/DEVICE | E | |
| RELION PREMIER TEST IN VITRO STRIP | E | |
| RELION PREMIER VOICE MONITOR DEVICE | E | |
| RELION PRIME MONITOR DEVICE | E | |
| RELION PRIME TEST IN VITRO STRIP | E | |
| RELION TRUE MET AIR GLUC METER KIT W/DEVICE | E | |
| RELION TRUE METRIX TEST STRIPS IN VITRO STRIP | E | |
| RELION ULTIMA GLUCOSE SYSTEM KIT W/DEVICE | E | |
| RELION ULTIMA TEST IN VITRO STRIP | E | |
| REXALL BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| RIGHTEST GC300 CONTROL IN VITRO LIQUID HIGH , NORMAL | E | |
| RIGHTEST GM100 BLOOD GLUCOSE KIT W/DEVICE | E | |
| RIGHTEST GM300 BLOOD GLUCOSE KIT W/DEVICE | E | |
| RIGHTEST GM550 BLOOD GLUCOSE KIT W/DEVICE | E | |
| RIGHTEST GS100 BLOOD GLUCOSE IN VITRO STRIP | E | |
| RIGHTEST GS300 BLOOD GLUCOSE IN VITRO STRIP | E | |
| RIGHTEST GS550 BLOOD GLUCOSE IN VITRO STRIP | E | |
| RIGHTEST GT333 BLOOD GLUCOSE DEVICE | E | |
| RIGHTEST GT333 BLOOD GLUCOSE IN VITRO STRIP | E | |
| RIGHTEST GT333 GLUCOSE TEST IN VITRO STRIP | E | |
| SENSILANCE SAFETY LANCETS 21G | 2 | |
| SENSILANCE SAFETY LANCETS 26G | 2 | |
| SENSILANCE SAFETY LANCETS 28G | 2 | |
| SILHOUETTE 23" INFUSION SET | 3 | |
| SILHOUETTE 43" INFUSION SET | 3 | |
| SILHOUETTE INFUSION SET 18" | 3 | |
| SIMPLERA SENSOR | 3 | PA |
| SIMPLERA SYNC SENSOR | 3 | PA |
| SIMPLERA SYSTEM | 3 | PA |
| SMARTEST BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| SMARTEST CONTROL MEDIUM IN VITRO SOLUTION | E | |
| SMARTEST EJECT DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SMARTEST EJECT STARTER KIT W/DEVICE | E | |
| SMARTEST PERSONA STARTER KIT W/DEVICE | E | |
| SMARTEST PRONTO STARTER KIT W/DEVICE | E | |
| SMARTEST PROTEGE DEVICE | E | |
| SMARTEST PROTEGE STARTER KIT W/DEVICE | E | |
| SOLUS V2 BLOOD GLUCOSE SYSTEM DEVICE | E | |
| SOLUS V2 BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| SOLUS V2 CONTROL IN VITRO SOLUTION HIGH , LOW | E | |
| SOLUS V2 TEST IN VITRO STRIP | E | |
| SUPREME II HIGH/LOW CONTROL IN VITRO LIQUID | E | |
| SUPREME TEST IN VITRO STRIP | E | |
| SURE T INFUSION SET 18"/6MM | 3 | |
| SURE T INFUSION SET 23"/10MM | 3 | |
| SURE T INFUSION SET 23"/6MM | 3 | |
| SURE T INFUSION SET 23"/8MM | 3 | |
| SURE T INFUSION SET 32"/10MM | 3 | |
| SURE T INFUSION SET 32"/6MM | 3 | |
| SURE T INFUSION SET 32"/8MM | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| T:SLIM X2 STARTER 7.10 KIT | 3 | |
| TAI DOC CONTROL IN VITRO SOLUTION NORMAL | E | |
| TANDEM MOBI AUTOSOFT30 10PK23" | 3 | |
| TANDEM MOBI AUTOSOFT30 14PK23" | 3 | |
| TANDEM MOBI AUTOSOFTXC 10PK23" | 3 | |
| TANDEM MOBI AUTOSOFTXC 10PK5" | 3 | |
| TANDEM MOBI AUTOSOFTXC 14PK23" | 3 | |
| TANDEM MOBI AUTOSOFTXC 14PK5" | 3 | |
| TANDEM MOBI SYSTEM STARTER KIT | 3 | |
| TANDEM MOBI TRUSTEEL 10PK23" | 3 | |
| TANDEM T:SLIM ASFT 30 PK10 23" | 3 | |
| TANDEM T:SLIM ASFT 30 PK14 23" | 3 | |
| TANDEM T:SLIM ASFT XC PK10 23" | 3 | |
| TANDEM T:SLIM ASFT XC PK14 23" | 3 | |
| TANDEM T:SLIM TRUSTL PK10 23" | 3 | |
| TECHLITE LANCETS 26G | 2 | |
| TGT BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| TRUE FOCUS BLOOD GLUCOSE METER DEVICE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRUE FOCUS BLOOD GLUCOSE STRIP IN VITRO STRIP | E | |
| TRUE METRIX AIR GLUCOSE METER DEVICE | E | |
| TRUE METRIX AIR GLUCOSE METER KIT W/DEVICE | E | |
| TRUE METRIX BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| TRUE METRIX GO GLUCOSE METER KIT W/DEVICE | E | |
| TRUE METRIX LEVEL 1 IN VITRO SOLUTION LOW | E | |
| TRUE METRIX LEVEL 2 IN VITRO SOLUTION NORMAL | E | |
| TRUE METRIX LEVEL 3 IN VITRO SOLUTION HIGH | E | |
| TRUE METRIX METER KIT W/DEVICE | E | |
| TRUE METRIX PRO BLOOD GLUCOSE IN VITRO STRIP | E | |
| TRUENESS BLOOD GLUCOSE MONITOR DEVICE | E | |
| TRUENESS BLOOD GLUCOSE STRIPS IN VITRO STRIP | E | |
| TRUERESULT BLOOD GLUCOSE KIT W/DEVICE | E | |
| TRUETEST TEST IN VITRO STRIP | E | |
| TRUETRACK BLOOD GLUCOSE DEVICE | E | |
| TRUETRACK BLOOD GLUCOSE KIT W/DEVICE | E | |
| TRUETRACK SMART SYSTEM KIT | E | |
| TRUETRACK TEST IN VITRO STRIP | E | |
| ULTRA-CARE SAFETY LANCETS 30G | 2 | |
| UNISTRIP CONTROL IN VITRO SOLUTION HIGH , LOW | E | |
| UNISTRIP1 GENERIC IN VITRO STRIP | E | |
| VERASENS BLOOD GLUCOSE METER DEVICE | E | |
| VERASENS BLOOD GLUCOSE SYSTEM KIT W/DEVICE | E | |
| VERASENS BLOOD GLUCOSE TEST IN VITRO STRIP | E | |
| VERASENS GLUCOSE CONTROL IN VITRO LIQUID | E | |
| VERIFINE SAFE LANCET MINI 21G | 2 | |
| VERIFINE SAFE LANCET MINI 23G | 2 | |
| VERIFINE SAFE LANCET MINI 28G | 2 | |
| VERIFINE SAFE LANCET MINI 30G | 2 | |
| VIVAGUARD INO CONTROL SOLUTION IN VITRO LIQUID | E | |
| VIVAGUARD INO GLUCOSE METER DEVICE | E | |
| VIVAGUARD INO GLUCOSE METER KIT | E | |
| VIVAGUARD INO SMART GLUC METER DEVICE | E | |
| VIVAGUARD INO TEST STRIPS IN VITRO STRIP | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VIVAGUARD LANCETS 30G | 2 | |
| VIVAGUARD LANCING DEVICE | 3 | |
| VIVAGUARD SAFETY LANCETS 28G | 2 | |
| **Diabetes - Glycemic Agents** | | |
| BAQSIMI ONE PACK NASAL POWDER 3 MG/DOSE | 2 | |
| BAQSIMI TWO PACK NASAL POWDER 3 MG/DOSE | 2 | |
| diazoxide oral suspension 50 mg/ml | 1 | |
| glucagon emergency kit injection solution reconstituted 1 mg | 1 | |
| GLUCAGON EMERGENCY KIT | 2 | |
| GVOKE HYPOPEN 1-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML | 2 | |
| GVOKE HYPOPEN 2-PACK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 0.5 MG/0.1ML, 1 MG/0.2ML | 2 | |
| GVOKE KIT SUBCUTANEOUS SOLUTION 1 MG/0.2ML | 2 | |
| GVOKE PFS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 MG/0.2ML | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Diabetes - Insulins** | | |
| ADMELOG INJECTION SOLUTION 100 UNIT/ML | 1 | |
| ADMELOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| AFREZZA INHALATION POWDER 12 UNIT, 4 UNIT, 60X4 &60X8 & 60X12 UNIT, 8 UNIT, 90 X 4 UNIT & 90X8 UNIT, 90 X 8 UNIT & 90X12 UNIT | 3 | PA |
| APIDRA SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| APIDRA VIAL INJECTION SOLUTION 100 UNIT/ML | 1 | |
| AQ INSULIN SYRINGE 29G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 2 | |
| AQINJECT PEN NEEDLE 31G X 5 MM , 32G X 4 MM | 2 | |
| ASSURE ID DUO PRO PEN NEEDLES 31G X 5 MM | 2 | |
| ASSURE ID PRO PEN NEEDLES 30G X 5 MM | 2 | |
| AUM INSULIN SAFETY PEN NEEDLE 31G X 4 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| AUM MINI INSULIN PEN NEEDLE 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM | 2 | |
| AUM PEN NEEDLE 32G X 5 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM | 2 | |
| AUM READYGARD DUO PEN NEEDLE 32G X 4 MM | 2 | |
| AUM SAFETY PEN NEEDLE 31G X 4 MM , 31G X 5 MM | 2 | |
| AUTOKEEPER SAFETY PEN NEEDLE 30G X 5 MM , 30G X 8 MM | 2 | |
| BASAGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| BD AUTOSHIELD DUO PEN NEEDLES | 2 | |
| BD PEN NEEDLE MICRO ULTRAFINE 32G X 6 MM | 2 | |
| BD PEN NEEDLE MINI ULTRAFINE 31G X 5 MM | 2 | |
| BD PEN NEEDLE NANO ULTRAFINE 32G X 4 MM | 2 | |
| BD PEN NEEDLE ORIG ULTRAFINE 29G X 12.7MM | 2 | |
| BD PEN NEEDLE SHORT ULTRAFINE 31G X 8 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BD ULTRA-FINE INSULIN SYRINGES 27G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 31G X 6MM 0.5 ML | 2 | |
| BD ULTRA-FINE PEN NEEDLES | 2 | |
| BD VEO INSULIN SYR ULTRAFINE 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML | 2 | |
| CEQUR SIMPL EXT WEAR INSERTER | 2 | |
| CEQUR SIMPLICITY 1U EXTND WEAR DEVICE | 2 | |
| CEQUR SIMPLICITY 2U DEVICE | 2 | |
| CEQUR SIMPLICITY 2U EXTND WEAR DEVICE | 2 | |
| CEQUR SIMPLICITY INSERTER | 2 | |
| CLEVER CHOICE COMFORT EZ PLUS 32G X 4 MM | 2 | |
| COMFORT EZ PRO PEN NEEDLES 30G X 8 MM , 31G X 4 MM , 31G X 5 MM | 2 | |
| DROPLET MICRON 34G X 3.5 MM | 2 | |
| DROPSAFE AUTOPROTECT DUO 31G X 4 MM , 31G X 5 MM , 31G X 8 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DROPSAFE SAFETY SYRINGE/NEEDLE 29G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 2 | |
| EMBECTA AUTOSHIELD DUO 30G X 5 MM | 2 | |
| EMBECTA INS SYR U/F 1/2 UNIT 31G X 15/64" 0.3 ML, 31G X 5/16" 0.3 ML | 2 | |
| EMBECTA INSULIN SYR ULTRAFINE 29G X 1/2" 0.5 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 2 | |
| EMBECTA INSULIN SYRINGE 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML | 2 | |
| EMBECTA INSULIN SYRINGE U-100 27G X 5/8" 1 ML | 2 | |
| EMBECTA INSULIN SYRINGE U-500 31G X 6MM 0.5 ML | 2 | |
| EMBECTA PEN NEEDLE NANO 2 GEN 32G X 4 MM | 2 | |
| EMBECTA PEN NEEDLE NANO 32G X 4 MM | 2 | |
| EMBECTA PEN NEEDLE ULTRAFINE 29G X 12.7MM , 31G X 5 MM , 31G X 8 MM , 32G X 6 MM | 2 | |
| EMBRACE PEN NEEDLES 30G X 5 MM , 30G X 8 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM | 2 | |
| FIASP FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| FIASP INJECTION SOLUTION 100 UNIT/ML | 1 | |
| FIASP PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML | 1 | |
| FIASP PUMPCART SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML | 1 | |
| HUMALOG INJECTION SOLUTION 100 UNIT/ML | 1 | |
| HUMALOG U-100 AND U-200 KWIKPEN | 1 | |
| HUMALOG MIX 50/50 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (50-50) 100 UNIT/ML | 1 | |
| HUMALOG MIX 75/25 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML | 1 | |
| HUMALOG MIX 75/25 VIAL SUBCUTANEOUS SUSPENSION (75-25) 100 UNIT/ML | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HUMALOG SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML | 1 | |
| HUMALOG U-100 JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| HUMULIN 70/30 KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | 1 | |
| HUMULIN 70/30 VIAL SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML | 1 | |
| HUMULIN N KWIKPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML | 1 | |
| HUMULIN N VIAL SUBCUTANEOUS SUSPENSION 100 UNIT/ML | 1 | |
| HUMULIN R U-500 KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 500 UNIT/ML | 1 | |
| HUMULIN R VIAL INJECTION SOLUTION 100 UNIT/ML | 1 | |
| INCONTROL ULTICARE PEN NEEDLES 31G X 6 MM , 31G X 8 MM , 32G X 4 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| INSULIN GLARGINE MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML | E | |
| INSULIN GLARGINE SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML | E | |
| INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION 100 UNIT/ML | E | |
| INSULIN GLARGINE-YFGN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | E | |
| INSULIN LISPRO (1 UNIT DIAL) SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| INSULIN LISPRO INJECTION SOLUTION 100 UNIT/ML | 1 | |
| INSULIN LISPRO JUNIOR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| INSULIN LISPRO PROT & LISPRO SUBCUTANEOUS SUSPENSION PEN-INJECTOR (75-25) 100 UNIT/ML | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| INSULIN PEN NEEDLES 29G X 10MM , 29G X 12.7MM , 29G X 12MM , 29G X 4MM , 29G X 5MM , 29G X 8MM , 30G X 5 MM , 30G X 6 MM , 30G X 8 MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM , 34G X 3.5 MM | 2 | |
| INSULIN SYRINGES 27G X 1/2" 0.5 ML, 27G X 1/2" 1 ML, 27G X 5/8" 1 ML, 28G X 1/2" 0.5 ML, 28G X 1/2" 1 ML, 29G X 1/2" 0.3 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 29G X 5/16" 0.5 ML, 29G X 5/16" 1 ML, 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.3 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 1/2" 0.3 ML, 31G X 15/64" 0.3 ML, 31G X 15/64" 0.5 ML, 31G X 15/64" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML, 32G X 5/16" 0.5 ML, 32G X 5/16" 1 ML | 2 | |
| INSUPEN32G EXTR3ME 32G X 6 MM | 2 | |
| LANTUS SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LANTUS U-100 VIAL SUBCUTANEOUS SOLUTION 100 UNIT/ML | 1 | |
| LYUMJEV KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML | 1 | |
| LYUMJEV VIAL INJECTION SOLUTION 100 UNIT/ML | 1 | |
| MERILOG SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| MERILOG SUBCUTANEOUS SOLUTION 100 UNIT/ML | 1 | |
| MYXREDLIN INTRAVENOUS SOLUTION 100-0.9 UT/100ML-% | 3 | |
| NOVOFINE PEN NEEDLE 32G X 6 MM | 2 | |
| NOVOFINE PLUS PEN NEEDLE 32G X 4 MM | 2 | |
| NOVOLIN 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | E | |
| NOVOLIN 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | 1 | |
| NOVOLIN 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NOVOLIN 70/30 VIAL SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML | 1 | |
| NOVOLIN N FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML | E | |
| NOVOLIN N FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR 100 UNIT/ML | 1 | |
| NOVOLIN N RELION SUBCUTANEOUS SUSPENSION 100 UNIT/ML | E | |
| NOVOLIN N VIAL SUBCUTANEOUS SUSPENSION 100 UNIT/ML | 1 | |
| NOVOLIN R FLEXPEN INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| NOVOLIN R FLEXPEN RELION INJECTION SOLUTION PEN-INJECTOR 100 UNIT/ML | E | |
| NOVOLIN R RELION INJECTION SOLUTION 100 UNIT/ML | E | |
| NOVOLIN R VIAL INJECTION SOLUTION 100 UNIT/ML | 1 | |
| NOVOLOG 70/30 FLEXPEN RELION SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | E | |
| NOVOLOG FLEXPEN RELION SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | E | |
| NOVOLOG FLEXPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| NOVOLOG MIX 70/30 FLEXPEN SUBCUTANEOUS SUSPENSION PEN-INJECTOR (70-30) 100 UNIT/ML | 1 | |
| NOVOLOG MIX 70/30 RELION SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML | E | |
| NOVOLOG MIX 70/30 VIAL SUBCUTANEOUS SUSPENSION (70-30) 100 UNIT/ML | 1 | |
| NOVOLOG PENFILL SUBCUTANEOUS SOLUTION CARTRIDGE 100 UNIT/ML | 1 | |
| NOVOLOG RELION INJECTION SOLUTION 100 UNIT/ML | E | |
| NOVOLOG U-100 VIAL INJECTION SOLUTION 100 UNIT/ML | 1 | |
| NOVOPEN ECHO DEVICE | 3 | |
| PEN NEEDLE/5-BEVEL TIP 31G X 8 MM , 32G X 4 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PENTIPS GENERIC PEN NEEDLES 32G X 6 MM | 2 | |
| PIP PEN NEEDLES 32G X 4MM 32G X 4 MM | 2 | |
| PURE COMFORT SAFETY PEN NEEDLE 31G X 5 MM , 31G X 6 MM , 32G X 4 MM | 2 | |
| QUICK TOUCH INSULIN PEN NEEDLE 29G X 12.7MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM , 32G X 4 MM , 32G X 5 MM , 32G X 6 MM , 32G X 8 MM , 33G X 4 MM , 33G X 5 MM , 33G X 6 MM , 33G X 8 MM | 2 | |
| RAYA SURE PEN NEEDLE 29G X 12MM , 31G X 4 MM , 31G X 5 MM , 31G X 6 MM , 31G X 8 MM | 2 | |
| REZVOGLAR KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | 1 | |
| SAFETY PEN NEEDLES 30G X 5 MM , 30G X 8 MM | 2 | |
| SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION 100 UNIT/ML | E | |
| SEMGLEE (YFGN) SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML | E | |
| TECHLITE PLUS PEN NEEDLES 32G X 4 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TOPFINE INSULIN PEN NEEDLE 32G X 4 MM | 2 | |
| TOUJEO MAX SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML | 1 | |
| TOUJEO SOLOSTAR SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNIT/ML | 1 | |
| TRESIBA FLEXTOUCH SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 UNIT/ML, 200 UNIT/ML | E | |
| TRESIBA SUBCUTANEOUS SOLUTION 100 UNIT/ML | E | |
| TRUE COMFORT SAFETY PEN NEEDLE 31G X 5 MM , 31G X 6 MM , 32G X 4 MM | 2 | |
| ULTIGUARD SAFEPACK SYR/NEEDLE 30G X 1/2" 0.3 ML, 30G X 1/2" 0.5 ML, 30G X 1/2" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 2 | |
| ULTRA COMFORT PEN NEEDLES 32G X 4 MM | 2 | |
| UNIFINE OTC PEN NEEDLES 31G X 5 MM , 32G X 4 MM | 2 | |
| UNIFINE PROTECT PEN NEEDLE 30G X 5 MM , 30G X 8 MM , 32G X 4 MM | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VERIFINE INSULIN PEN NEEDLE 29G X 12MM , 31G X 5 MM , 31G X 8 MM , 32G X 4 MM , 32G X 6 MM | 2 | |
| VERIFINE INSULIN SYRINGE 28G X 1/2" 1 ML, 29G X 1/2" 0.5 ML, 29G X 1/2" 1 ML, 30G X 1/2" 1 ML, 30G X 5/16" 0.5 ML, 30G X 5/16" 1 ML, 31G X 5/16" 0.3 ML, 31G X 5/16" 0.5 ML, 31G X 5/16" 1 ML | 2 | |
| VERIFINE PLUS PEN NEEDLE 31G X 5 MM , 31G X 8 MM , 32G X 4 MM | 2 | |
| VERISAFE SAFETY INSULIN SYR 29G X 1/2" 1 ML | 2 | |
| **Electrolytes / Minerals / Metals / Vitamins** | | |
| ACCRUFER ORAL CAPSULE 30 MG | E | |
| AFLORA ORAL TABLET | E | |
| ALTRIVA ORAL TABLET CHEWABLE | E | |
| AMINO ACID INTRAVENOUS SOLUTION 5 % | 3 | |
| AMINO ACID-CALCIUM-HEP IN D10W INTRAVENOUS SOLUTION 3 % | 3 | |
| AMINOPROTECT INTRAVENOUS SOLUTION 5 % | 3 | |
| AMINOSYN II INTRAVENOUS SOLUTION 10 %, 15 % | 3 | |
| AMINOSYN-PF 7% INTRAVENOUS SOLUTION 7 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| AMINOSYN-PF INTRAVENOUS SOLUTION 10 % | 3 | |
| AMLADEX ORAL TABLET | E | |
| ARGININE HCL INJECTION SOLUTION 6 GM/30ML | 3 | |
| ARGYLE STERILE SALINE IRRIGATION SOLUTION 0.9 % | 3 | |
| ARGYLE STERILE WATER IRRIGATION SOLUTION | 3 | |
| AVOWISE ORAL TABLET | E | |
| AZENTRA ORAL TABLET 13-1 MG | E | |
| AZESCO ORAL TABLET 13-1 MG | E | |
| CALCIFOL ORAL WAFER 1342-1.6 MG | 3 | |
| calcium chloride solution 10 % intravenous | 1 | |
| CALCIUM CHLORIDE SOLUTION 10 % INTRAVENOUS | 3 | |
| calcium gluconate intravenous solution 10 % | 1 | |
| calcium gluconate-nacl intravenous solution 1-0.675 gm/50ml-%, 1-0.8 gm/100ml-%, 2-0.675 gm/100ml-% | 1 | |
| CALCIUM GLUCONATE-NACL INTRAVENOUS SOLUTION 1-0.9 GM/100ML-%, 2-0.9 GM/100ML-% | 3 | |
| carglumic acid oral tablet soluble 200 mg | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CARNITOR INTRAVENOUS SOLUTION 200 MG/ML | 3 | |
| CARNITOR ORAL SOLUTION 1 GM/10ML | E | |
| CARNITOR ORAL TABLET 330 MG | E | |
| CARNITOR SF ORAL SOLUTION 1 GM/10ML | E | |
| CHEMET ORAL CAPSULE 100 MG | 3 | |
| chromic chloride intravenous solution 40 mcg/10ml | 1 | |
| CITRANATAL 90 DHA ORAL 90-1 & 300 MG | E | |
| CLINIMIX E/DEXTROSE (2.75/5) INTRAVENOUS SOLUTION 2.75 % | 3 | |
| CLINIMIX E/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 % | 3 | |
| CLINIMIX E/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 % | 3 | |
| CLINIMIX E/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 % | 3 | |
| CLINIMIX E/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 % | 3 | |
| CLINIMIX E/DEXTROSE (8/10) INTRAVENOUS SOLUTION 8 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CLINIMIX E/DEXTROSE (8/14) INTRAVENOUS SOLUTION 8 % | 3 | |
| CLINIMIX/DEXTROSE (4.25/10) INTRAVENOUS SOLUTION 4.25 % | 3 | |
| CLINIMIX/DEXTROSE (4.25/5) INTRAVENOUS SOLUTION 4.25 % | 3 | |
| CLINIMIX/DEXTROSE (5/15) INTRAVENOUS SOLUTION 5 % | 3 | |
| CLINIMIX/DEXTROSE (5/20) INTRAVENOUS SOLUTION 5 % | 3 | |
| CLINIMIX/DEXTROSE (6/5) INTRAVENOUS SOLUTION 6 % | 3 | |
| CLINIMIX/DEXTROSE (8/10) INTRAVENOUS SOLUTION 8 % | 3 | |
| CLINIMIX/DEXTROSE (8/14) INTRAVENOUS SOLUTION 8 % | 3 | |
| CLINISOL SF INTRAVENOUS SOLUTION 15 % | 3 | |
| CLINOLIPID INTRAVENOUS EMULSION 20 % | 3 | |
| COBALEFOL ORAL CAPSULE 1 MG | E | |
| COREVIA ORAL TABLET | E | |
| cupric chloride intravenous solution 0.4 mg/ml | 1 | |
| CURITY STERILE SALINE IRRIGATION SOLUTION 0.9 % | 3 | |
| CUVRIOR ORAL TABLET 300 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| cyanocobalamin injection solution 1000 mcg/ml | 1 | |
| cyanocobalamin nasal solution 500 mcg/0.1ml | 1 | |
| DAVIMET-FLUORIDE ORAL TABLET CHEWABLE 0.75 MG | E | |
| DAVIMET-M ORAL TABLET CHEWABLE | E | |
| DAYAVITE ORAL TABLET | E | |
| deferasirox granules oral packet 180 mg, 360 mg, 90 mg | 1 | PA |
| deferasirox oral packet 180 mg, 360 mg, 90 mg | 1 | PA |
| deferasirox oral tablet 180 mg, 360 mg, 90 mg | 1 | PA |
| deferasirox oral tablet soluble 125 mg, 250 mg, 500 mg | 1 | PA |
| DEPLINPRO MOOD HEALTH ORAL CAPSULE | E | |
| DERMACINRX BOOSTERVITE ORAL TABLET | E | |
| DERMACINRX DAVIMET ORAL TABLET CHEWABLE | E | |
| DERMACINRX MULTITAM ORAL TABLET | E | |
| DERMACINRX MULTIVITAMIN ORAL TABLET CHEWABLE | E | |
| DERMACINRX PNV PRENATOL ORAL TABLET 27-1 MG | E | |
| DERMACINRX PRETRATE ORAL TABLET 1 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DERMACINRX RIBOTIN-E ORAL TABLET | E | |
| DERMACINRX ZINTREXYL-C ORAL TABLET | E | |
| DEXATRAN ORAL CAPSULE | E | |
| DEXIFOL ORAL TABLET 5 MG | E | |
| DEXPANTHENOL INJECTION SOLUTION 250 MG/ML | 3 | |
| dextrose intravenous solution 10 %, 20 %, 30 %, 40 %, 5 %, 70 % | 1 | |
| DEXTROSE SOLUTION 250 MG/ML INTRAVENOUS | 3 | |
| dextrose solution 250 mg/ml intravenous | 1 | |
| DEXTROSE SOLUTION 50 % INTRAVENOUS | 3 | |
| dextrose solution 50 % intravenous | 1 | |
| DIATROL ORAL TABLET | E | |
| DUOVANCE ORAL TABLET | E | |
| EDETATE DISODIUM INTRAVENOUS SOLUTION 150 MG/ML | 3 | |
| EFFER-K ORAL TABLET EFFERVESCENT 10 MEQ, 20 MEQ, 25 MEQ | 3 | |
| EMBRIVA ORAL TABLET 13-1 MG | E | |
| ENBRACE HR ORAL CAPSULE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ENLYTE GUMMY+ ORAL TABLET CHEWABLE | E | |
| ergocalciferol oral capsule 1.25 mg (50000 ut) | 1 | |
| EVERCORE ORAL TABLET | E | |
| EVERVITA ORAL TABLET | E | |
| FEONYX ORAL TABLET | E | |
| ferric carboxymaltose intravenous solution 100 mg/2ml, 1000 mg/20ml, 750 mg/15ml | 1 | |
| FERRIPROX ORAL SOLUTION 100 MG/ML | 3 | PA |
| FERRLECIT INTRAVENOUS SOLUTION 12.5 MG/ML | 3 | |
| ferumoxytol intravenous solution 510 mg/17ml | 1 | ST |
| FINAZOL ORAL TABLET | E | |
| FLORAVITA MINI ORAL TABLET | E | |
| FLORRAXYL ORAL TABLET | E | |
| FLOTREX ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG | E | |
| FOLA-B COMPLEX ORAL TABLET 1-10-0.4 MG | E | |
| FOLACHEW ORAL TABLET CHEWABLE | E | |
| FOLAGENT DHA ORAL CAPSULE | E | |
| FOLAMAX ORAL TABLET | E | |
| FOLAMED DHA ORAL CAPSULE | E | |
| FOLAPRIME ORAL TABLET | E | |
| FOLAREX ORAL TABLET | E | |
| FOLASYNC DHA ORAL CAPSULE | E | |
| FOLATEN ORAL TABLET | E | |
| FOLATEXCEL ORAL TABLET 20-1 MG | E | |
| FOLAWISE ORAL TABLET | E | |
| FOLCYTEINE ORAL TABLET | E | |
| FOLETRA ORAL CAPSULE 1 MG | E | |
| folic acid injection solution 5 mg/ml | 1 | |
| folic acid oral tablet 1 mg | 1 | |
| FOLICORE B COMPLEX ORAL TABLET 1-10-0.4 MG | E | |
| FOLIFLEX ORAL TABLET | E | |
| FOLIKA-BC ORAL TABLET 1 MG | E | |
| FOLITIN-Z ORAL TABLET | E | |
| FOLIVANCE ORAL CAPSULE | E | |
| FOLIVEX ORAL CAPSULE | E | |
| FOLIVRA ORAL TABLET | E | |
| FOLIXIA ORAL TABLET | E | |
| FOLTREXYL ORAL TABLET 1-5000 MG-UNIT | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FOLVITA COMPLEX ORAL TABLET 1-10-0.4 MG | E | |
| FOLYRA ORAL TABLET | E | |
| GALZIN ORAL CAPSULE 25 MG, 50 MG | 3 | |
| GESTYRA ORAL TABLET 13-1 MG | E | |
| GLP CORE ORAL TABLET | E | |
| GLP-DLAX ORAL TABLET | E | |
| GLUTATHIONE INJECTION SOLUTION 200 MG/ML | 3 | |
| GLUTATHIONE INTRAVENOUS SOLUTION 6 GM/30ML | 3 | |
| GLYCINE INJECTION SOLUTION 50 MG/ML | 3 | |
| GLYCOPHOS INTRAVENOUS SOLUTION 1 MMOLE/ML | 3 | |
| HEMATINIC/FOLIC ACID ORAL TABLET 324-1 MG | 3 | |
| hydroxocobalamin acetate intramuscular solution 1000 mcg/ml | 1 | |
| HYLAVITE ORAL TABLET | E | |
| HYLAZINC ORAL TABLET | E | |
| HYVITE ORAL TABLET | E | |
| INFED INJECTION SOLUTION 50 MG/ML | 3 | |
| INJECTAFER INTRAVENOUS SOLUTION 100 MG/2ML, 1000 MG/20ML, 750 MG/15ML | 3 | ST |
| INTRALIPID INTRAVENOUS EMULSION 20 %, 30 % | 3 | |
| iodine strong oral solution 5 % | 1 | |
| iron sucrose intravenous solution 20 mg/ml | 1 | |
| JENLIVA PRENATAL/POSTNATAL ORAL CAPSULE 1 MG | E | |
| JYNARQUE ORAL TABLET 15 MG, 30 MG | E | |
| JYNARQUE ORAL TABLET THERAPY PACK 15 MG, 30 & 15 MG, 45 & 15 MG, 60 & 30 MG, 90 & 30 MG | E | |
| KABIVEN INTRAVENOUS EMULSION 3.3-10.8-3.9 % | 3 | |
| KEYLOSA ORAL TABLET | E | |
| KIONEX COMBINATION SUSPENSION 15 GM/60ML | 3 | |
| klor-con 10 oral tablet extended release 10 meq | 1 | |
| klor-con m10 oral tablet extended release 10 meq | 1 | |
| klor-con m15 oral tablet extended release 15 meq | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| klor-con m20 oral tablet extended release 20 meq | 1 | |
| klor-con oral packet 20 meq | 1 | |
| klor-con oral tablet extended release 8 meq | 1 | |
| K-PHOS ORAL TABLET 500 MG | 3 | |
| lactated ringers irrigation solution | 1 | |
| LEVOCARNITINE INJECTION SOLUTION 500 MG/ML | 3 | |
| levocarnitine intravenous solution 200 mg/ml | 1 | |
| levocarnitine oral solution 1 gm/10ml | 1 | |
| levocarnitine oral tablet 330 mg | 1 | |
| levocarnitine sf oral solution 1 gm/10ml | 1 | |
| LIPO INTRAMUSCULAR SOLUTION 50-50-25 MG/ML | 3 | |
| LIPO-C INTRAMUSCULAR SOLUTION | 3 | |
| LOKELMA ORAL PACKET 10 GM, 5 GM | 3 | |
| LUMAVEX ORAL CAPSULE | E | |
| LUMIVANCE ORAL CAPSULE | E | |
| LUNAVIRA ORAL CAPSULE | E | |
| LYSINE HCL INJECTION SOLUTION 100 MG/ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| magnesium chloride injection solution 200 mg/ml | 1 | |
| magnesium sulfate in d5w intravenous solution 1-5 gm/100ml-% | 1 | |
| MAGNESIUM SULFATE-NACL INTRAVENOUS SOLUTION 2-0.9 GM/50ML-% | 3 | |
| MATERNACEL ORAL TABLET 20-1 MG | E | |
| MATERVIA ORAL CAPSULE 0.5 MG | E | |
| MATRIAPRO ORAL TABLET CHEWABLE 29-1 MG | E | |
| MEDI TAB ORAL TABLET | E | |
| MENATROL ORAL CAPSULE | E | |
| METANXPRO NERVE HEALTH ORAL CAPSULE 3-2-35-500 MG | E | |
| METAVAX ORAL TABLET 1 MG | E | |
| METAVEX ORAL TABLET | E | |
| METAVITE ORAL TABLET | E | |
| METHYLCOBALAMIN INJECTION SOLUTION RECONSTITUTED 10000 MCG, 50000 MCG | 3 | |
| MICRONEX ORAL CAPSULE | E | |
| MINOVIA ORAL TABLET | E | |
| MIREXA ORAL TABLET | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| MI-VITE RX ORAL TABLET 1 MG | E | |
| MONOFERRIC INTRAVENOUS SOLUTION 1000 MG/10ML | 3 | ST |
| MULTIPRO ORAL CAPSULE | E | |
| MULTITOL-M ORAL TABLET | E | |
| multivitamin/fluoride oral suspension 0.25 mg/ml | E | |
| MULTRYS INTRAVENOUS SOLUTION 60-3-6-1000 MCG/ML | 3 | |
| na ferric gluc cplx in sucrose intravenous solution 12.5 mg/ml | 1 | |
| NATAL PNV ORAL TABLET 6-0.5 MG | E | |
| NATALCHEW ORAL TABLET CHEWABLE 29-1 MG | E | |
| NATALCORE ORAL TABLET CHEWABLE 29-1 MG | E | |
| NEEVO DHA ORAL CAPSULE 27-1.13 MG | E | |
| NEOKE ALCAR ORAL POWDER | 3 | |
| NEOMATERNA ORAL TABLET 20-1 MG | E | |
| NEO-VITAL RX ORAL TABLET 1 MG | E | |
| NESTABS DHA ORAL 32-1 MG | E | |
| NESTABS ONE ORAL CAPSULE 38-1-225 MG | E | |
| NEURODANA B-COMPLEX SUPPORT ORAL CAPSULE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NEWVITE ORAL TABLET | E | |
| NEXOCHEW ORAL TABLET CHEWABLE | E | |
| NICADAN ORAL TABLET | E | |
| NICAZEL FORTE ORAL TABLET | E | |
| NICAZEL ORAL TABLET | E | |
| NICOMIDE ORAL TABLET 750-27-2-0.5 MG | E | |
| NORIXA ORAL TABLET | E | |
| NORVEXA ORAL TABLET | E | |
| NOVENTRA ORAL TABLET | E | |
| NOVITE ORAL CAPSULE | E | |
| NOVYRA ORAL TABLET 27-1 MG | E | |
| NURTIVA ORAL TABLET 27-1 MG | E | |
| NUTRALYN ORAL TABLET | E | |
| NUTRAVANCE ORAL TABLET | E | |
| NUTRA-Z+ ORAL CAPSULE | E | |
| NUTRIBOOST ORAL CAPSULE 1 MG | E | |
| NUTRICORE ORAL TABLET 0.8 MG | E | |
| NUTRILIPID INTRAVENOUS EMULSION 20 % | 3 | |
| NUTRIONE ORAL CAPSULE 0.4 MG | E | |
| NUTRIVEX ORAL TABLET CHEWABLE 29-1 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| NUTRIVIO ORAL CAPSULE 1 MG | E | |
| OB COMPLETE ONE ORAL CAPSULE 50-1-476 MG | E | |
| OB COMPLETE PETITE ORAL CAPSULE 35-5-1-200 MG | E | |
| OB COMPLETE PREMIER ORAL TABLET 30-20-1 MG | E | |
| OCULYRA ORAL TABLET | E | |
| PAXLYTE ORAL CAPSULE | E | |
| PERIKABIVEN INTRAVENOUS EMULSION 2.4-6.8-3.5-0.5 % | 3 | |
| phosphorous oral tablet 155-852-130 mg | 1 | |
| PHOSPHO-TRIN 250 NEUTRAL ORAL TABLET 155-852-130 MG | 3 | |
| PHOSPHO-TRIN K500 ORAL TABLET 500 MG | 3 | |
| PHYSIOLYTE IRRIGATION SOLUTION | 3 | |
| phytonadione injection solution 1 mg/0.5ml, 10 mg/ml | 1 | |
| phytonadione oral tablet 5 mg | 1 | |
| PLENAMINE INTRAVENOUS SOLUTION 15 % | 3 | |
| POKONZA ORAL PACKET 10 MEQ, 15 MEQ | E | |
| POKONZA ORAL SOLUTION 10 MEQ/15ML (5%) | E | |
| POLY-VI-FLOR ORAL SUSPENSION 0.25 MG/ML | E | |
| POLY-VI-FLOR ORAL TABLET CHEWABLE 0.25 MG, 0.5 MG, 1 MG | E | |
| POLY-VI-FLOR/IRON ORAL SUSPENSION 0.25-7 MG/ML | E | |
| POLY-VI-FLOR/IRON ORAL TABLET CHEWABLE 0.5-10 MG | E | |
| potassium acetate intravenous solution 2 meq/ml | 1 | |
| potassium chloride crys er oral tablet extended release 10 meq, 15 meq, 20 meq | 1 | |
| potassium chloride er oral capsule extended release 10 meq, 8 meq | 1 | |
| potassium chloride er oral tablet extended release 10 meq, 15 meq, 20 meq, 8 meq | 1 | |
| potassium chloride intravenous solution 10 meq/100ml, 10 meq/50ml, 2 meq/ml, 20 meq/100ml, 20 meq/50ml, 40 meq/100ml | 1 | |
| potassium chloride oral packet 20 meq | 1 | |
| potassium chloride oral solution 10 %, 20 meq/15ml (10%), 40 meq/15ml (20%) | 1 | |
| potassium citrate er oral tablet extended release 10 meq (1080 mg), 15 meq (1620 mg), 5 meq (540 mg) | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| potassium phosphates intravenous solution 15 mmole/5ml, 150 mmole/50ml, 45 mmole/15ml | 1 | |
| potassium phosphates(66 meq k) intravenous solution 45 mmole/15ml | 1 | |
| PREGEN DHA ORAL CAPSULE 28-1-35 MG | E | |
| PREGENNA ORAL TABLET 20-1 MG | E | |
| PREMASOL INTRAVENOUS SOLUTION 10 % | 3 | |
| PRENACHEW ORAL TABLET CHEWABLE 29-1 MG | E | |
| PRENACORE ORAL TABLET CHEWABLE 29-1 MG | E | |
| PRENATE DHA ORAL CAPSULE 18-0.6-0.4-300 MG | E | |
| PRENATE ELITE ORAL TABLET 20-0.6-0.4 MG | E | |
| PRENATE ENHANCE ORAL CAPSULE 28-0.6-0.4-400 MG | E | |
| PRENATE ESSENTIAL ORAL CAPSULE 18-0.6-0.4-300 MG | E | |
| PRENATE MINI ORAL CAPSULE 18-0.6-0.4-350 MG | E | |
| PRENATE ORAL TABLET CHEWABLE 0.6-0.4 MG | E | |
| PRENATE PIXIE ORAL CAPSULE 10-0.6-0.4-200 MG | E | |
| PRENATE RESTORE ORAL CAPSULE 27-0.6-0.4-400 MG | E | |
| PRENATOL-M ORAL TABLET 27-1.2 MG | E | |
| PRENATRIX ORAL TABLET 27-1 MG | E | |
| PRENATRYL ORAL TABLET 27-1 MG | E | |
| PRENOVA ORAL TABLET 0.8 MG | E | |
| PRENYRA ORAL TABLET 13-1 MG | E | |
| PRENYVIA ORAL TABLET CHEWABLE 0.18-67 MG | E | |
| PREV-RX ORAL TABLET | E | |
| PRISMASOL B22GK 4/0 EXTRACORPOREAL SOLUTION 22-4 MEQ/L | 3 | |
| PRISMASOL BGK 0/2.5 EXTRACORPOREAL SOLUTION 32-2.5 MEQ/L | 3 | |
| PRISMASOL BGK 2/0 EXTRACORPOREAL SOLUTION 32-2 MEQ/L | 3 | |
| PRISMASOL BGK 2/3.5 EXTRACORPOREAL SOLUTION 32-2-3.5 MEQ/L | 3 | |
| PRISMASOL BGK 4/2.5 EXTRACORPOREAL SOLUTION 32-4-2.5 MEQ/L | 3 | |
| PRISMASOL BK 0/0/1.2 EXTRACORPOREAL SOLUTION 32-1.2 MEQ/L | 3 | |
| PROFOLA ORAL TABLET | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PROSOL INTRAVENOUS SOLUTION 20 % | 3 | |
| PUREVITA SUPER B-COMPLEX ORAL CAPSULE | E | |
| pyridoxine hcl solution 100 mg/ml injection | 1 | |
| PYRIDOXINE HCL SOLUTION 100 MG/ML INJECTION | 3 | |
| RELEVIA ORAL TABLET 27-1 MG | E | |
| REMEDIENT ORAL CAPSULE | E | |
| REVYRA ORAL TABLET | E | |
| ringers irrigation irrigation solution | 1 | |
| SELECT-OB ORAL TABLET CHEWABLE 29-0.6-0.4 MG | E | |
| SELECT-OB+DHA ORAL 29-1 & 250 MG | E | |
| SMOFLIPID INTRAVENOUS EMULSION 20 % | 3 | |
| sod citrate-citric acid oral solution 1500-1002 mg/15ml, 3000-2004 mg/30ml, 500-334 mg/5ml | 1 | |
| sodium acetate intravenous solution 2 meq/ml, 4 meq/ml | 1 | |
| sodium bicarbonate intravenous solution 4.2 % | 1 | |
| sodium bicarbonate solution 8.4 % intravenous | 1 | |
| SODIUM BICARBONATE SOLUTION 8.4 % INTRAVENOUS | 3 | |
| sodium chloride (pf) injection solution 0.9 % | 1 | |
| sodium chloride injection solution 2.5 meq/ml | 1 | |
| sodium chloride intravenous solution 0.45 %, 0.9 %, 3 %, 4 meq/ml, 5 % | 1 | |
| sodium chloride irrigation solution 0.9 % | 1 | |
| sodium citrate-citric acid oral solution 1500-1002 mg/15ml, 3000-2004 mg/30ml | 1 | |
| sodium fluoride oral solution 1.1 (0.5 f) mg/ml | 1 | ACA |
| sodium fluoride oral tablet 1.1 (0.5 f) mg, 2.2 (1 f) mg | 1 | ACA |
| sodium fluoride oral tablet chewable 0.55 (0.25 f) mg, 1.1 (0.5 f) mg, 2.2 (1 f) mg | 1 | ACA |
| sodium phosphates intravenous solution 15 mmole/5ml, 150 mmole/50ml, 45 mmole/15ml | 1 | |
| sodium polystyrene sulfonate combination suspension 15 gm/60ml | 1 | |
| sodium polystyrene sulfonate oral powder | 1 | |
| SOLIVITE ORAL CAPSULE 0.4 MG | E | |
| SPS (SODIUM POLYSTYRENE SULF) COMBINATION SUSPENSION 15 GM/60ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SPS (SODIUM POLYSTYRENE SULF) RECTAL SUSPENSION 30 GM/120ML | 3 | |
| sterile water for irrigation irrigation solution | 1 | |
| SYMTREX ORAL TABLET 0.8 MG | E | |
| SYNVERA ORAL TABLET | E | |
| SYPRINE ORAL CAPSULE 250 MG | E | |
| TAURINE INJECTION SOLUTION 50 MG/ML | 3 | |
| TERAVAX ORAL CAPSULE 0.4 MG | E | |
| THAM INTRAVENOUS SOLUTION 30 MEQ/100ML | 3 | |
| TM-DAILY VITE ORAL TABLET | E | |
| tolvaptan (hyponatremia) oral tablet 15 mg, 30 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| tolvaptan oral tablet 15 mg, 30 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| tolvaptan oral tablet therapy pack 15 mg, 30 & 15 mg, 45 & 15 mg, 60 & 30 mg, 90 & 30 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| TRALEMENT INTRAVENOUS SOLUTION 300-55-60-3000 MCG/ML | 3 | |
| TRAVASOL INTRAVENOUS SOLUTION 10 % | 3 | |
| TREXION ORAL CAPSULE | E | |
| TREXVIA ORAL CAPSULE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRI-AMINO INJECTION SOLUTION 100-100-100 MG/ML | 3 | |
| trientine hcl oral capsule 250 mg, 500 mg | 4 | PA; SP |
| TRISTART DHA ORAL CAPSULE 31-0.6-0.4-200 MG | E | |
| TRI-VITAMIN WITH FLUORIDE ORAL SUSPENSION 0.25 MG/ML | E | |
| tromethamine intravenous solution 30 meq/100ml | 1 | |
| TRONVITE ORAL TABLET 1 MG | E | |
| TROPHAMINE INTRAVENOUS SOLUTION 10 % | 3 | |
| TRUE DAILY VITE ORAL TABLET | E | |
| TRUE MULTIVITAMIN ORAL TABLET | E | |
| TRUEBOOST ORAL TABLET 1 MG | E | |
| TRUEONE ORAL TABLET | E | |
| TRUEVITE ORAL TABLET | E | |
| VALENTRA ORAL TABLET | E | |
| VANTREX ORAL TABLET | E | |
| VELTASSA ORAL PACKET 1 GM, 16.8 GM, 25.2 GM, 8.4 GM | 3 | |
| VENEXA FE ORAL TABLET | E | |
| VENEXA ORAL TABLET | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VENOFER INTRAVENOUS SOLUTION 20 MG/ML | 3 | |
| VENTRIXYL FE ORAL TABLET | E | |
| VENTRIXYL ORAL TABLET | E | |
| VIRELIX ORAL TABLET | E | |
| VIREXA ORAL TABLET | E | |
| VITACHEW ORAL TABLET CHEWABLE | E | |
| VITACORE ORAL TABLET | E | |
| VITAFOL FE+ ORAL CAPSULE 90-0.6-0.4-200 MG | E | |
| VITAFOL GUMMIES ORAL TABLET CHEWABLE 3.33-0.333-34.8 MG | E | |
| VITAFOL ULTRA ORAL CAPSULE 29-0.6-0.4-200 MG | E | |
| VITAFOL-OB ORAL TABLET | E | |
| VITAFOL-OB+DHA ORAL 65-1 & 250 MG | E | |
| VITAFOL-ONE ORAL CAPSULE 29-1-200 MG | E | |
| VITALARA ORAL TABLET 20-1 MG | E | |
| VITALUX ORAL TABLET | E | |
| vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut) | 1 | |
| vitamin k1 injection solution 1 mg/0.5ml, 10 mg/ml | 1 | |
| VITANEX ORAL CAPSULE 0.4 MG | E | |
| VITA-PAC ORAL CAPSULE 0.9 MG | E | |
| VITASCRIPT ORAL TABLET | E | |
| VITASURE ORAL TABLET 1 MG | E | |
| VITATHELY WITH GINGER ORAL TABLET 27-1 MG | E | |
| VITAVERA ORAL TABLET CHEWABLE | E | |
| VITRAMYN ORAL TABLET | E | |
| VITRANOL FE ORAL TABLET | E | |
| VITRANOL ORAL TABLET | E | |
| VITRAX ORAL TABLET | E | |
| VITREXATE FE ORAL TABLET | E | |
| VITREXATE ORAL TABLET | E | |
| VITREXYL + IRON ORAL TABLET | E | |
| VITREXYL ORAL TABLET | E | |
| VITRION ORAL TABLET | E | |
| VYLARIS ORAL TABLET | E | |
| water for irrigation, sterile irrigation solution | 1 | |
| WELLFOLA ORAL TABLET | E | |
| WESTGEL DHA ORAL CAPSULE 31-0.6-0.4-200 MG | E | |
| ZALVIT ORAL TABLET 13-1 MG | E | |
| ZELDANA ORAL CAPSULE | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| zinc chloride intravenous solution 1 mg/ml | 1 | |
| zinc sulfate intravenous solution 1 mg/ml, 3 mg/ml, 5 mg/ml | 1 | |
| ZIPHEX ORAL TABLET 13-1 MG | E | |
| ZYCUBO SUBCUTANEOUS SOLUTION RECONSTITUTED 2.9 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| **Gastrointestinal Agents - Drugs for Acid Reflux and Ulcer** | | |
| ACIPHEX ORAL TABLET DELAYED RELEASE 20 MG | E | |
| CARAFATE ORAL TABLET 1 GM | E | |
| CYTOTEC ORAL TABLET 100 MCG, 200 MCG | 3 | |
| DEXILANT ORAL CAPSULE DELAYED RELEASE 30 MG, 60 MG | E | |
| esomeprazole magnesium oral capsule delayed release 20 mg, 40 mg | 1 | QL (1 EA per 1 day) |
| esomeprazole magnesium oral packet 10 mg, 2.5 mg, 20 mg, 40 mg, 5 mg | 1 | QL (1 EA per 1 day) |
| esomeprazole sodium intravenous solution reconstituted 40 mg | 1 | |
| famotidine (pf) intravenous solution 20 mg/2ml | 1 | |
| famotidine intravenous solution 20 mg/5ml, 200 mg/20ml, 200 mg/50ml, 40 mg/10ml, 40 mg/4ml | 1 | |
| famotidine oral suspension reconstituted 40 mg/5ml | 1 | |
| famotidine oral tablet 20 mg, 40 mg | 1 | |
| famotidine premixed intravenous solution 20-0.9 mg/50ml-% | 1 | |
| FIRST-LANSOPRAZOLE ORAL SUSPENSION 3 MG/ML | 3 | ST |
| KONVOMEP ORAL SUSPENSION RECONSTITUTED 2-84 MG/ML | E | |
| lansoprazole oral capsule delayed release 15 mg, 30 mg | 1 | QL (1 EA per 1 day) |
| misoprostol oral tablet 100 mcg, 200 mcg | 1 | |
| NEXIUM ORAL CAPSULE DELAYED RELEASE 20 MG, 40 MG | E | |
| NEXIUM ORAL PACKET 10 MG, 2.5 MG, 20 MG, 40 MG, 5 MG | 3 | QL (1 EA per 1 day) |
| nizatidine oral capsule 150 mg, 300 mg | 1 | |
| omeprazole oral capsule delayed release 10 mg, 20 mg, 40 mg | 1 | QL (1 EA per 1 day) |
| omeprazole-sodium bicarbonate oral capsule 20-1100 mg, 40-1100 mg | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| omeprazole-sodium bicarbonate oral packet 20-1680 mg, 40-1680 mg | E | |
| pantoprazole sodium intravenous solution reconstituted 40 mg | 1 | |
| pantoprazole sodium oral tablet delayed release 20 mg, 40 mg | 1 | QL (1 EA per 1 day) |
| PANTOPRAZOLE SODIUM-NACL INTRAVENOUS SOLUTION 40-0.9 MG/100ML-%, 40-0.9 MG/50ML-%, 80-0.9 MG/100ML-% | 3 | |
| PREVACID ORAL CAPSULE DELAYED RELEASE 30 MG | E | |
| PREVACID SOLUTAB ORAL TABLET DELAYED RELEASE DISPERSIBLE 15 MG, 30 MG | E | |
| PROTONIX INTRAVENOUS SOLUTION RECONSTITUTED 40 MG | 3 | |
| RABEPRAZOLE SODIUM ORAL CAPSULE SPRINKLE 10 MG | E | |
| rabeprazole sodium oral tablet delayed release 20 mg | 1 | QL (1 EA per 1 day) |
| sucralfate oral tablet 1 gm | 1 | |
| VOQUEZNA ORAL TABLET 10 MG, 20 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Gastrointestinal Agents - Drugs for Bowel, Intestine and Stomach Conditions** | | |
| alosetron hcl oral tablet 0.5 mg, 1 mg | 1 | PA |
| alvimopan oral capsule 12 mg | 1 | |
| AMITIZA ORAL CAPSULE 24 MCG, 8 MCG | E | |
| atropine sulfate injection solution 8 mg/20ml | 1 | |
| atropine sulfate injection solution prefilled syringe 0.25 mg/5ml, 0.5 mg/5ml, 1 mg/10ml | 1 | |
| atropine sulfate intravenous solution 0.4 mg/ml, 1 mg/ml | 1 | |
| ATROPINE SULFATE INTRAVENOUS SOLUTION PREFILLED SYRINGE 1 MG/2.5ML, 1.2 MG/3ML | 3 | |
| bis subcit-metronid-tetracyc oral capsule 140-125-125 mg | 1 | |
| bismuth/metronidaz/tetracyclin oral capsule 140-125-125 mg | 1 | |
| CLENPIQ ORAL SOLUTION 10-3.5-12 MG-GM -GM/175ML | 3 | |
| constulose oral solution 10 gm/15ml | 1 | |
| cromolyn sodium oral concentrate 100 mg/5ml | 1 | |
| CTEXLI ORAL TABLET 250 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| dicyclomine hcl intramuscular solution 10 mg/ml | 1 | |
| dicyclomine hcl oral capsule 10 mg | 1 | |
| dicyclomine hcl oral solution 10 mg/5ml | 1 | |
| dicyclomine hcl oral tablet 20 mg | 1 | |
| diphenoxylate-atropine oral liquid 2.5-0.025 mg/5ml | 1 | |
| diphenoxylate-atropine oral tablet 2.5-0.025 mg | 1 | |
| enulose oral solution 10 gm/15ml | 1 | |
| GATTEX SUBCUTANEOUS KIT 5 MG | 4 | PA; SP |
| gavilyte-c oral solution reconstituted 240 gm | 1 | ACA |
| gavilyte-g oral solution reconstituted 236 gm | 1 | ACA |
| gavilyte-n with flavor pack oral solution reconstituted 420 gm | 1 | ACA |
| generlac oral solution 10 gm/15ml | 1 | |
| glycopyrrolate +rfid injection solution 0.2 mg/ml | 1 | PA |
| glycopyrrolate injection solution 0.2 mg/ml | 1 | PA |
| glycopyrrolate injection solution 0.4 mg/2ml, 1 mg/5ml, 4 mg/20ml | 1 | |
| GLYCOPYRROLATE INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML | 3 | |
| glycopyrrolate oral solution 1 mg/5ml | 1 | PA |
| glycopyrrolate oral tablet 1 mg, 2 mg | 1 | QL (4 EA per 1 day) |
| glycopyrrolate pf +rfid injection solution prefilled syringe 0.2 mg/ml, 0.4 mg/2ml | 1 | |
| GLYCOPYRROLATE PF +RFID INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML | 3 | PA |
| glycopyrrolate pf injection solution prefilled syringe 0.2 mg/ml, 0.4 mg/2ml | 1 | |
| GLYCOPYRROLATE PF INJECTION SOLUTION PREFILLED SYRINGE 0.6 MG/3ML | 3 | PA |
| GLYRX-PF INJECTION SOLUTION 0.2 MG/ML, 0.4 MG/2ML | 3 | |
| GLYRX-PF INJECTION SOLUTION PREFILLED SYRINGE 1 MG/5ML | 3 | |
| GOLYTELY ORAL SOLUTION RECONSTITUTED 236 GM | E | |
| hyoscyamine sulfate er oral tablet extended release 12 hour 0.375 mg | 1 | |
| hyoscyamine sulfate oral elixir 0.125 mg/5ml | 1 | |
| hyoscyamine sulfate oral tablet 0.125 mg | 1 | |
| hyoscyamine sulfate oral tablet dispersible 0.125 mg | 1 | |
| hyoscyamine sulfate sl sublingual tablet sublingual 0.125 mg | 1 | |
| hyoscyamine sulfate sublingual tablet sublingual 0.125 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| IBSRELA ORAL TABLET 50 MG | E | |
| IQIRVO ORAL TABLET 80 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| lactulose encephalopathy oral solution 10 gm/15ml | 1 | |
| lactulose oral solution 10 gm/15ml, 20 gm/30ml | 1 | |
| LINZESS ORAL CAPSULE 145 MCG, 290 MCG, 72 MCG | 2 | ST; QL (1 EA per 1 day) |
| LIVDELZI ORAL CAPSULE 10 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| loperamide hcl oral capsule 2 mg | 1 | |
| lubiprostone oral capsule 24 mcg, 8 mcg | 1 | QL (2 EA per 1 day) |
| methscopolamine bromide oral tablet 2.5 mg, 5 mg | 1 | |
| MOTEGRITY ORAL TABLET 1 MG, 2 MG | E | |
| MOTOFEN ORAL TABLET 1-0.025 MG | E | |
| MOVANTIK ORAL TABLET 12.5 MG, 25 MG | E | |
| MOVIPREP ORAL SOLUTION RECONSTITUTED 100 GM | E | |
| MYTESI ORAL TABLET DELAYED RELEASE 125 MG | 3 | QL (2 EA per 1 day) |
| na sulfate-k sulfate-mg sulf oral solution 17.5-3.13-1.6 gm/177ml | 1 | ACA |
| OSCIMIN ORAL TABLET 0.125 MG | 3 | |
| OSCIMIN SUBLINGUAL TABLET SUBLINGUAL 0.125 MG | 3 | |
| peg 3350-kcl-na bicarb-nacl oral solution reconstituted 420 gm | 1 | ACA |
| peg-3350/electrolytes oral solution reconstituted 236 gm | 1 | ACA |
| peg-3350/electrolytes/ascorbat oral solution reconstituted 100 gm | 1 | QL (2 EA per 365 days) |
| peg-kcl-nacl-nasulf-na asc-c oral solution reconstituted 100 gm | 1 | QL (2 EA per 365 days) |
| PEG-PREP ORAL KIT 5-210 MG-GM | 3 | |
| prucalopride succinate oral tablet 1 mg, 2 mg | 1 | ST; QL (1 EA per 1 day) |
| PYLERA ORAL CAPSULE 140-125-125 MG | 2 | |
| REBYOTA RECTAL SUSPENSION 150 ML | 4 | PA; SP |
| RELISTOR ORAL TABLET 150 MG | E | |
| RELISTOR SUBCUTANEOUS SOLUTION 12 MG/0.6ML | E | |
| RELISTOR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 12 MG/0.6ML, 8 MG/0.4ML | E | |
| RELTONE ORAL CAPSULE 200 MG, 400 MG | E | |
| RESTORA RX ORAL CAPSULE 60-1.25 MG | 3 | |
| REZDIFFRA ORAL TABLET 100 MG, 60 MG, 80 MG | 3 | PA; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SEROSTIM SUBCUTANEOUS SOLUTION RECONSTITUTED 4 MG, 5 MG, 6 MG | 4 | PA; SP |
| SUFLAVE ORAL SOLUTION RECONSTITUTED 178.7 GM | 3 | |
| SUPREP BOWEL PREP KIT ORAL SOLUTION 17.5-3.13-1.6 GM/177ML | 3 | |
| SUTAB ORAL TABLET 1479-225-188 MG | 3 | |
| SYMPROIC ORAL TABLET 0.2 MG | 2 | ST; QL (1 EA per 1 day) |
| TALICIA ORAL CAPSULE DELAYED RELEASE 250-12.5-10 MG | 2 | |
| TRULANCE ORAL TABLET 3 MG | E | |
| URSODIOL ORAL CAPSULE 200 MG, 400 MG | E | |
| ursodiol oral capsule 300 mg | 1 | |
| ursodiol oral tablet 250 mg, 500 mg | 1 | |
| VIBERZI ORAL TABLET 100 MG, 75 MG | 3 | PA; QL (2 EA per 1 day) |
| VOWST ORAL CAPSULE | E | |
| XERMELO ORAL TABLET 250 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| **Genetic or Enzyme Disorder - Drugs for Replacement, Modification, Treatment** | | |
| ADZYNMA INTRAVENOUS KIT 1500 UNIT, 500 UNIT | 4 | PA; SP |
| ALDURAZYME INTRAVENOUS SOLUTION 2.9 MG/5ML | 4 | PA; SP |
| AMONDYS 45 INTRAVENOUS SOLUTION 100 MG/2ML | E | |
| betaine oral powder | 4 | SP |
| BUPHENYL ORAL POWDER 3 GM/TSP | E | |
| BUPHENYL ORAL TABLET 500 MG | E | |
| CERDELGA ORAL CAPSULE 84 MG | 4 | PA; SP |
| CEREZYME INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT | 4 | PA; SP |
| CHOLBAM ORAL CAPSULE 250 MG, 50 MG | 4 | PA; SP |
| CREON ORAL CAPSULE DELAYED RELEASE PARTICLES 12000-38000 UNIT, 24000-76000 UNIT, 3000-9500 UNIT, 36000-114000 UNIT, 6000-19000 UNIT | 2 | |
| CRYSVITA SUBCUTANEOUS SOLUTION 10 MG/ML, 20 MG/ML, 30 MG/ML | 4 | PA; SP |
| CYSTADANE ORAL POWDER | 4 | SP |
| CYSTAGON ORAL CAPSULE 150 MG, 50 MG | 4 | SP |
| DUVYZAT ORAL SUSPENSION 8.86 MG/ML | E | |
| ELAPRASE INTRAVENOUS SOLUTION 6 MG/3ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ELELYSO INTRAVENOUS SOLUTION RECONSTITUTED 200 UNIT | 4 | PA; SP |
| ELEVIDYS INTRAVENOUS KIT 10 X 10 ML, 11 X 10 ML, 12 X 10 ML, 13 X 10 ML, 14 X 10 ML, 15 X 10 ML, 16 X 10 ML, 17 X 10 ML, 18 X 10 ML, 19 X 10 ML, 20 X 10 ML, 21 X 10 ML, 22 X 10 ML, 23 X 10 ML, 24 X 10 ML, 25 X 10 ML, 26 X 10 ML, 27 X 10 ML, 28 X 10 ML, 29 X 10 ML, 30 X 10 ML, 31 X 10 ML, 32 X 10 ML, 33 X 10 ML, 34 X 10 ML, 35 X 10 ML, 36 X 10 ML, 37 X 10 ML, 38 X 10 ML, 39 X 10 ML, 40 X 10 ML, 41 X 10 ML, 42 X 10 ML, 43 X 10 ML, 44 X 10 ML, 45 X 10 ML, 46 X 10 ML, 47 X 10 ML, 48 X 10 ML, 49 X 10 ML, 50 X 10 ML, 51 X 10 ML, 52 X 10 ML, 53 X 10 ML, 54 X 10 ML, 55 X 10 ML, 56 X 10 ML, 57 X 10 ML, 58 X 10 ML, 59 X 10 ML, 60 X 10 ML, 61 X 10 ML, 62 X 10 ML, 63 X 10 ML, 64 X 10 ML, 65 X 10 ML, 66 X 10 ML, 67 X 10 ML, 68 X 10 ML, 69 X 10 ML, 70 X 10 ML | E | |
| ELFABRIO INTRAVENOUS SOLUTION 20 MG/10ML, 5 MG/2.5ML | E | |
| EVRYSDI ORAL SOLUTION RECONSTITUTED 0.75 MG/ML | 4 | PA; SP; QL (8 ML per 1 day) |
| EVRYSDI ORAL TABLET 5 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| EXONDYS 51 INTRAVENOUS SOLUTION 100 MG/2ML, 500 MG/10ML | E | |
| FABRAZYME INTRAVENOUS SOLUTION RECONSTITUTED 35 MG, 5 MG | 4 | PA; SP |
| FORZINITY SUBCUTANEOUS SOLUTION 280 MG/3.5ML | 4 | PA; SP; QL (0.5 ML per 1 day) |
| GALAFOLD ORAL CAPSULE 123 MG | 4 | PA; SP; QL (0.5 EA per 1 day) |
| HARLIKU ORAL TABLET 2 MG | E | |
| IMCIVREE SUBCUTANEOUS SOLUTION 10 MG/ML | E | |
| JAVYGTOR ORAL PACKET 100 MG, 500 MG | E | |
| JAVYGTOR ORAL TABLET 100 MG | E | |
| KANUMA INTRAVENOUS SOLUTION 20 MG/10ML | 4 | PA; SP |
| KUVAN ORAL PACKET 100 MG, 500 MG | E | |
| KUVAN ORAL TABLET 100 MG | E | |
| KYGEVVI ORAL PACKET 2-2 GM | 4 | PA; SP |
| LUMIZYME INTRAVENOUS SOLUTION RECONSTITUTED 50 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| MEPSEVII INTRAVENOUS SOLUTION 10 MG/5ML | 4 | PA; SP |
| miglustat oral capsule 100 mg | 4 | PA; SP |
| MYALEPT SUBCUTANEOUS SOLUTION RECONSTITUTED 11.3 MG | 4 | PA; SP |
| NAGLAZYME INTRAVENOUS SOLUTION 1 MG/ML | 4 | PA; SP |
| NEXVIAZYME INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP |
| nitisinone oral capsule 10 mg, 2 mg, 20 mg, 5 mg | 4 | PA; SP |
| NITYR ORAL TABLET 10 MG, 2 MG, 5 MG | 4 | PA; SP |
| NULIBRY INTRAVENOUS SOLUTION RECONSTITUTED 9.5 MG | 4 | PA; SP |
| OLPRUVA (2 GM DOSE) ORAL THERAPY PACK 2 GM | E | |
| OLPRUVA (3 GM DOSE) ORAL THERAPY PACK 3 GM | E | |
| OLPRUVA (4 GM DOSE) ORAL THERAPY PACK 2 & 2 GM | E | |
| OLPRUVA (5 GM DOSE) ORAL THERAPY PACK 2 & 3 GM | E | |
| OLPRUVA (6 GM DOSE) ORAL THERAPY PACK 3 & 3 GM | E | |
| OLPRUVA (6.67 GM DOSE) ORAL THERAPY PACK 3 & 3.67 GM | E | |
| OPFOLDA ORAL CAPSULE 65 MG | 4 | PA; SP; QL (0.3 EA per 1 day) |
| ORFADIN ORAL CAPSULE 10 MG, 2 MG, 20 MG, 5 MG | 4 | PA; SP |
| ORFADIN ORAL SUSPENSION 4 MG/ML | 4 | PA; SP |
| PALYNZIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML, 2.5 MG/0.5ML, 20 MG/ML | E | |
| PANCREAZE ORAL CAPSULE DELAYED RELEASE PARTICLES 10500-35500 UNIT, 16800-56800 UNIT, 21000-54700 UNIT, 2600-8800 UNIT, 37000-97300 UNIT, 4200-14200 UNIT | E | |
| PERTZYE ORAL CAPSULE DELAYED RELEASE PARTICLES 16000-57500 UNIT, 24000-86250 UNIT, 4000-14375 UNIT, 8000-28750 UNIT | E | |
| PHEBURANE ORAL PELLET 483 MG/GM | 4 | PA; SP |
| POMBILITI INTRAVENOUS SOLUTION RECONSTITUTED 105 MG | 4 | PA; SP |
| RAVICTI ORAL LIQUID 1.1 GM/ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| REVCOVI INTRAMUSCULAR SOLUTION 2.4 MG/1.5ML | 4 | PA; SP |
| sapropterin dihydrochloride oral packet 100 mg, 500 mg | 4 | PA; SP |
| sapropterin dihydrochloride oral tablet 100 mg | 4 | PA; SP |
| SEPHIENCE ORAL PACKET 1000 MG, 250 MG | E | |
| sod benz-sod phenylacet intravenous solution 10-10 % | 1 | |
| sodium phenylbutyrate oral powder 3 gm/tsp | 4 | PA; SP |
| sodium phenylbutyrate oral tablet 500 mg | 4 | PA; SP |
| STRENSIQ SUBCUTANEOUS SOLUTION 18 MG/0.45ML, 28 MG/0.7ML, 40 MG/ML, 80 MG/0.8ML | 4 | PA; SP |
| SUCRAID ORAL SOLUTION 8500 UNIT/ML | 4 | PA; SP |
| VILTEPSO INTRAVENOUS SOLUTION 250 MG/5ML | E | |
| VIMIZIM INTRAVENOUS SOLUTION 5 MG/5ML | 4 | PA; SP |
| VIOKACE ORAL TABLET 10440-39150 UNIT, 20880-78300 UNIT | E | |
| VOXZOGO SUBCUTANEOUS SOLUTION RECONSTITUTED 0.4 MG, 0.56 MG, 1.2 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VPRIV INTRAVENOUS SOLUTION RECONSTITUTED 400 UNIT | 4 | PA; SP |
| VYONDYS 53 INTRAVENOUS SOLUTION 100 MG/2ML | E | |
| XURIDEN ORAL PACKET 2 GM | 4 | PA; SP; QL (4 EA per 1 day) |
| yargesa oral capsule 100 mg | 4 | PA; SP |
| YUVIWEL SUBCUTANEOUS SOLUTION RECONSTITUTED 1.3 MG, 2.8 MG | 4 | PA; SP; QL (0.15 EA per 1 day) |
| YUVIWEL SUBCUTANEOUS SOLUTION RECONSTITUTED 5.5 MG | 4 | PA; SP; QL (0.29 EA per 1 day) |
| zelvysia oral packet 100 mg, 500 mg | 4 | PA; SP |
| ZENPEP ORAL CAPSULE DELAYED RELEASE PARTICLES 10000-32000 UNIT, 15000-47000 UNIT, 20000-63000 UNIT, 25000-79000 UNIT, 3000-10000 UNIT, 40000-126000 UNIT, 5000-24000 UNIT, 60000-189600 UNIT | 2 | |
| **Genitourinary Agents - Drugs for Bladder, Genital and Kidney Conditions** | | |
| acetic acid irrigation solution 0.25 % | 1 | |
| AURYXIA ORAL TABLET 1 GM 210 MG(FE) | E | |
| bethanechol chloride oral tablet 10 mg, 25 mg, 5 mg, 50 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| calcium acetate (phos binder) oral capsule 667 mg | 1 | |
| calcium acetate (phos binder) oral tablet 667 mg | 1 | |
| calcium acetate oral tablet 667 mg | 1 | |
| CERVIDIL VAGINAL INSERT 10 MG | 3 | |
| CIALIS ORAL TABLET 10 MG, 20 MG, 5 MG | E | |
| CUPRIMINE ORAL CAPSULE 250 MG | E | |
| darifenacin hydrobromide er oral tablet extended release 24 hour 15 mg, 7.5 mg | 1 | |
| DEPEN TITRATABS ORAL TABLET 250 MG | 4 | PA; SP |
| dimethyl sulfoxide intravesical solution 50 % | 1 | |
| ELMIRON ORAL CAPSULE 100 MG | E | |
| FILSPARI ORAL TABLET 200 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| FILSPARI ORAL TABLET 400 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| flavoxate hcl oral tablet 100 mg | 1 | |
| FOSRENOL ORAL PACKET 1000 MG, 750 MG | 3 | ST |
| GEMTESA ORAL TABLET 75 MG | E | |
| glycine irrigation solution 1.5 % | 1 | |
| glycine urologic irrigation solution 1.5 % | 1 | |
| INTRAROSA VAGINAL INSERT 6.5 MG | 3 | ST |
| LITHOSTAT ORAL TABLET 250 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| mirabegron er oral suspension reconstituted er 8 mg/ml | 1 | |
| mirabegron er oral tablet extended release 24 hour 25 mg, 50 mg | 1 | |
| MYRBETRIQ ORAL SUSPENSION RECONSTITUTED ER 8 MG/ML | E | |
| MYRBETRIQ ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG, 50 MG | E | |
| OXLUMO SUBCUTANEOUS SOLUTION 94.5 MG/0.5ML | 4 | PA; SP |
| oxybutynin chloride er oral tablet extended release 24 hour 10 mg, 15 mg, 5 mg | 1 | |
| oxybutynin chloride oral solution 5 mg/5ml | 1 | |
| oxybutynin chloride oral tablet 5 mg | 1 | |
| OXYTROL TRANSDERMAL PATCH TWICE WEEKLY 3.9 MG/24HR | 3 | ST; QL (0.29 EA per 1 day) |
| penicillamine oral capsule 250 mg | E | |
| penicillamine oral tablet 250 mg | 4 | PA; SP |
| phenazopyridine hcl oral tablet 100 mg, 200 mg | 1 | |
| PREPIDIL VAGINAL GEL 0.5 MG/3GM | 3 | |
| RENACIDIN IRRIGATION SOLUTION | 3 | |
| RIMSO-50 INTRAVESICAL SOLUTION 50 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| RIVFLOZA SUBCUTANEOUS SOLUTION 80 MG/0.5ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 128 MG/0.8ML | 4 | PA; SP; QL (0.03 ML per 1 day) |
| RIVFLOZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| sevelamer carbonate oral packet 0.8 gm, 2.4 gm | 1 | |
| sevelamer carbonate oral tablet 800 mg | 1 | |
| sildenafil citrate oral tablet 100 mg, 25 mg, 50 mg | 1 | QL (0.2 EA per 1 day) |
| solifenacin succinate oral tablet 10 mg, 5 mg | 1 | |
| STENDRA ORAL TABLET 100 MG, 200 MG, 50 MG | E | |
| tadalafil oral tablet 10 mg, 20 mg | 1 | QL (0.2 EA per 1 day) |
| tadalafil oral tablet 2.5 mg, 5 mg | 1 | QL (1 EA per 1 day) |
| THIOLA EC ORAL TABLET DELAYED RELEASE 100 MG, 300 MG | 4 | SP |
| THIOLA ORAL TABLET 100 MG | 4 | SP |
| tiopronin oral tablet 100 mg | 4 | SP |
| tiopronin oral tablet delayed release 100 mg, 300 mg | 4 | SP |
| tolterodine tartrate er oral capsule extended release 24 hour 2 mg, 4 mg | 1 | |
| tolterodine tartrate oral tablet 1 mg, 2 mg | 1 | |
| TOVIAZ ORAL TABLET EXTENDED RELEASE 24 HOUR 4 MG, 8 MG | E | |
| trospium chloride oral tablet 20 mg | 1 | |
| URIBEL ORAL TABLET 81.6 MG | 3 | |
| VANRAFIA ORAL TABLET 0.75 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VELPHORO ORAL TABLET CHEWABLE 500 MG | E | |
| VENXXIVA ORAL TABLET DELAYED RELEASE 100 MG, 300 MG | E | |
| VIAGRA ORAL TABLET 100 MG, 25 MG, 50 MG | E | |
| VOYXACT SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 400 MG/2ML | 4 | PA; SP; QL (0.8 ML per 1 day) |
| VYBRIQUE ORAL FILM 100 MG, 25 MG, 50 MG, 75 MG | E | |
| **Genitourinary Agents - Drugs for Prostate Conditions** | | |
| alfuzosin hcl er oral tablet extended release 24 hour 10 mg | 1 | |
| AVODART ORAL CAPSULE 0.5 MG | E | |
| dutasteride oral capsule 0.5 mg | 1 | |
| finasteride oral tablet 5 mg | 1 | |
| JALYN ORAL CAPSULE 0.5-0.4 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| silodosin oral capsule 4 mg, 8 mg | 1 | |
| tamsulosin hcl oral capsule 0.4 mg | 1 | |
| terazosin hcl oral capsule 1 mg, 10 mg, 2 mg, 5 mg | 1 | |
| TEZRULY ORAL SOLUTION 1 MG/ML | E | |
| **Hormonal Agents - Adrenal** | | |
| AGAMREE ORAL SUSPENSION 40 MG/ML | 4 | PA; SP |
| ALKINDI SPRINKLE ORAL CAPSULE SPRINKLE 0.5 MG, 1 MG, 2 MG, 5 MG | E | |
| betamethasone sod phos & acet injection suspension 6 (3-3) mg/ml | 1 | |
| BETAMETHASONE SODIUM PHOSPHATE INJECTION SOLUTION 12 MG/2ML, 6 MG/ML | 3 | |
| BLT-25 INJECTION KIT 40 & 0.25 & 1 MG/ML-%-% | 3 | |
| CELESTONE SOLUSPAN INJECTION SUSPENSION 6 (3-3) MG/ML | 3 | |
| CORTEF ORAL TABLET 10 MG, 20 MG, 5 MG | E | |
| CORTISONE ACETATE ORAL TABLET 25 MG | E | |
| DEPO-MEDROL INJECTION SUSPENSION 20 MG/ML, 40 MG/ML, 80 MG/ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| dexameth sod phos (pf) +rfid injection solution prefilled syringe 10 mg/ml | 1 | |
| DEXAMETHASONE (LA) INJECTION SUSPENSION 16 MG/ML, 8 MG/ML | 3 | |
| dexamethasone intensol oral concentrate 1 mg/ml | 1 | |
| dexamethasone oral elixir 0.5 mg/5ml | 1 | |
| dexamethasone oral solution 0.5 mg/5ml | 1 | |
| dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 1.5 mg, 2 mg, 4 mg, 6 mg | 1 | |
| dexamethasone oral tablet therapy pack 1.5 mg (21), 1.5 mg (35), 1.5 mg (51) | 1 | |
| dexamethasone sod phos (pf) injection solution prefilled syringe 10 mg/ml | 1 | |
| dexamethasone sod phos +rfid injection solution prefilled syringe 4 mg/ml | 1 | |
| dexamethasone sod phosphate pf injection solution 10 mg/ml | 1 | |
| dexamethasone sodium phosphate injection solution 100 mg/10ml, 120 mg/30ml, 20 mg/5ml, 4 mg/ml | 1 | |
| DEXAMETHASONE SODIUM PHOSPHATE SOLUTION 10 MG/ML INJECTION | 3 | |
| dexamethasone sodium phosphate solution 10 mg/ml injection | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DEXONTO 0.4% IONTOPHORESIS SOLUTION 20 MG/5ML | 3 | |
| EMFLAZA ORAL SUSPENSION 22.75 MG/ML | E | |
| EMFLAZA ORAL TABLET 18 MG, 30 MG, 36 MG, 6 MG | E | |
| fludrocortisone acetate oral tablet 0.1 mg | 1 | |
| HEMADY ORAL TABLET 20 MG | E | |
| HEXATRIONE INTRA-ARTICULAR SUSPENSION 20 MG/ML | 3 | |
| hydrocortisone oral tablet 10 mg, 20 mg, 5 mg | 1 | |
| hydrocortisone sod suc (pf) injection solution reconstituted 100 mg | 1 | |
| KENALOG-10 INJECTION SUSPENSION 10 MG/ML | E | |
| KENALOG-40 INJECTION SUSPENSION 40 MG/ML | E | |
| KENALOG-80 INJECTION SUSPENSION 80 MG/ML | 3 | |
| KHINDIVI ORAL SOLUTION 1 MG/ML | E | |
| MEDROL ORAL TABLET 16 MG, 4 MG, 8 MG | 3 | |
| MEDROL ORAL TABLET 2 MG | 2 | |
| MEDROL ORAL TABLET THERAPY PACK 4 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| methylprednisolone acetate injection suspension 40 mg/ml, 80 mg/ml | 1 | |
| METHYLPREDNISOLONE ACETATE INJECTION SUSPENSION 50 MG/ML | 3 | |
| methylprednisolone oral tablet 16 mg, 32 mg, 4 mg, 8 mg | 1 | |
| methylprednisolone oral tablet therapy pack 4 mg | 1 | |
| methylprednisolone sodium succ injection solution reconstituted 1000 mg, 125 mg, 40 mg, 500 mg | 1 | |
| METHYLPREDNISOLONE-BUPIVACAINE INJECTION SUSPENSION 40-5 MG/ML, 80-5 MG/ML | 3 | |
| PHYSICIAN EZ USE M-PRED INJECTION KIT 40-0.5 MG/ML-% | 3 | |
| prednisolone oral solution 15 mg/5ml | 1 | |
| prednisolone sodium phosphate oral solution 15 mg/5ml, 25 mg/5ml, 5 mg/5ml | 1 | |
| prednisolone sodium phosphate oral tablet dispersible 10 mg, 15 mg, 30 mg | 1 | |
| prednisone oral solution 5 mg/5ml | 1 | |
| prednisone oral tablet 1 mg, 10 mg, 2.5 mg, 20 mg, 5 mg, 50 mg | 1 | |
| PREDNISONE ORAL TABLET DELAYED RELEASE 1 MG, 2 MG, 5 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| prednisone oral tablet therapy pack 10 mg (21), 10 mg (48), 5 mg (21), 5 mg (48) | 1 | |
| SOLU-CORTEF INJECTION SOLUTION RECONSTITUTED 100 MG, 1000 MG, 250 MG, 500 MG | 3 | |
| SOLU-MEDROL (PF) INJECTION SOLUTION RECONSTITUTED 1000 MG, 125 MG, 40 MG, 500 MG | 3 | |
| SOLU-MEDROL INJECTION SOLUTION RECONSTITUTED 1000 MG, 2 GM, 500 MG | 3 | |
| triamcinolone acetonide injection suspension 10 mg/ml, 40 mg/ml | 1 | |
| TRIAMCINOLONE DIACETATE INJECTION SUSPENSION 80 MG/ML | 3 | |
| TRIAMCINOLONE-BUPIVACAINE INJECTION SUSPENSION 40-5 MG/ML | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Hormonal Agents - Men's Health** | | |
| ANDRELA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1.25 MG/0.05ML, 10 MG/0.4ML, 12.5 MG/0.05ML, 12.5 MG/0.25ML, 15 MG/0.3ML, 2.5 MG/0.1ML, 20 MG/0.4ML, 5 MG/0.2ML, 7.5 MG/0.3ML | E | |
| ANDRENYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.4ML, 150 MG/0.6ML, 200 MG/0.8ML, 25 MG/0.1ML, 50 MG/0.2ML, 75 MG/0.3ML | E | |
| ANDROGEL PUMP TRANSDERMAL GEL 20.25 MG/ACT (1.62%) | E | |
| AVEED INTRAMUSCULAR SOLUTION 750 MG/3ML | E | |
| AZMIRO INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 200 MG/ML | E | |
| danazol oral capsule 100 mg, 200 mg, 50 mg | 1 | |
| DEPO-TESTOSTERONE INTRAMUSCULAR SOLUTION 100 MG/ML, 200 MG/ML | E | |
| JATENZO ORAL CAPSULE 158 MG, 198 MG, 237 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| METHITEST ORAL TABLET 10 MG | 3 | PA; QL (20 EA per 1 day) |
| NATESTO NASAL GEL 5.5 MG/ACT | E | |
| TESTIM TRANSDERMAL GEL 50 MG/5GM (1%) | E | |
| TESTOPEL IMPLANT PELLET 75 MG | E | |
| testosterone cypionate intramuscular solution 100 mg/ml, 200 mg/ml | 1 | PA; QL (0.4 ML per 1 day) |
| testosterone enanthate intramuscular solution 200 mg/ml | 1 | PA; QL (0.2 ML per 1 day) |
| testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%) | 1 | PA; QL (10 GM per 1 day) |
| testosterone transdermal gel 20.25 mg/act (1.62%), 40.5 mg/2.5gm (1.62%) | 1 | PA; QL (5 GM per 1 day) |
| testosterone transdermal solution 30 mg/act | 1 | PA; QL (6 ML per 1 day) |
| TLANDO ORAL CAPSULE 112.5 MG | E | |
| VOGELXO PUMP TRANSDERMAL GEL 12.5 MG/ACT (1%) | E | |
| VOGELXO TRANSDERMAL GEL 50 MG/5GM (1%) | E | |
| XYOSTED SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/0.5ML, 50 MG/0.5ML, 75 MG/0.5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Hormonal Agents - Pituitary** | | |
| ACTHAR GEL SUBCUTANEOUS PEN-INJECTOR 40 UNIT/0.5ML, 80 UNIT/ML | 4 | PA; SP |
| ACTHAR INJECTION GEL 80 UNIT/ML | 4 | PA; SP |
| BYNFEZIA PEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 2500 MCG/ML | E | |
| cabergoline oral tablet 0.5 mg | 1 | |
| carboprost tromethamine intramuscular solution 250 mcg/ml | 1 | |
| CETROTIDE SUBCUTANEOUS KIT 0.25 MG | E | |
| CORTROPHIN GEL SUBCUTANEOUS PREFILLED SYRINGE 40 UNIT/0.5ML, 80 UNIT/ML | 4 | PA; SP |
| CORTROPHIN INJECTION GEL 80 UNIT/ML | 4 | PA; SP |
| CRENESSITY ORAL CAPSULE 100 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| CRENESSITY ORAL CAPSULE 25 MG, 50 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| CRENESSITY ORAL SOLUTION 50 MG/ML | 4 | PA; SP; QL (8 ML per 1 day) |
| DESMODA ORAL SOLUTION 0.05 MG/ML | E | |
| desmopressin ace spray refrig nasal solution 0.01 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| desmopressin acetate injection solution 4 mcg/ml | 1 | |
| desmopressin acetate oral tablet 0.1 mg, 0.2 mg | 1 | |
| desmopressin acetate pf injection solution 4 mcg/ml | 1 | |
| desmopressin acetate spray nasal solution 0.01 % | 1 | |
| EGRIFTA SV SUBCUTANEOUS SOLUTION RECONSTITUTED 2 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| EGRIFTA WR SUBCUTANEOUS KIT 11.6 MG | 4 | PA; SP; QL (0.04 EA per 1 day) |
| ELIGARD SUBCUTANEOUS KIT 22.5 MG | 4 | PA; SP; QL (0.012 EA per 1 day) |
| ELIGARD SUBCUTANEOUS KIT 30 MG | 4 | PA; SP; QL (0.009 EA per 1 day) |
| ELIGARD SUBCUTANEOUS KIT 45 MG | 4 | PA; SP; QL (0.006 EA per 1 day) |
| ELIGARD SUBCUTANEOUS KIT 7.5 MG | 4 | PA; SP; QL (0.036 EA per 1 day) |
| FENSOLVI (6 MONTH) SUBCUTANEOUS KIT 45 MG | 4 | PA; SP; QL (0.006 EA per 1 day) |
| FIRMAGON (240 MG DOSE) SUBCUTANEOUS SOLUTION RECONSTITUTED 120 MG/VIAL | 4 | PA; SP; QL (2 EA per 365 days) |
| FIRMAGON SUBCUTANEOUS SOLUTION RECONSTITUTED 80 MG | 4 | PA; SP; QL (0.036 EA per 1 day) |
| GENOTROPIN MINIQUICK SUBCUTANEOUS PREFILLED SYRINGE 0.2 MG, 0.4 MG, 0.6 MG, 0.8 MG, 1 MG, 1.2 MG, 1.4 MG, 1.6 MG, 1.8 MG, 2 MG | E | |
| GENOTROPIN SUBCUTANEOUS CARTRIDGE 12 MG, 5 MG | E | |
| GONAL-F INJECTION SOLUTION RECONSTITUTED 450 UNIT | E | |
| GONAL-F RFF REDIJECT SUBCUTANEOUS SOLUTION PEN-INJECTOR 300 UNT/0.48ML, 450 UNT/0.72ML, 900 UNT/1.44ML | E | |
| HEMABATE INTRAMUSCULAR SOLUTION 250 MCG/ML | 3 | |
| HUMATROPE INJECTION CARTRIDGE 12 MG, 24 MG, 6 MG | E | |
| INCRELEX SUBCUTANEOUS SOLUTION 40 MG/4ML | 4 | PA; SP |
| ISTURISA ORAL TABLET 1 MG, 5 MG | E | |
| lanreotide acetate subcutaneous solution 120 mg/0.5ml | 4 | PA; SP |
| leuprolide acetate injection kit 1 mg/0.2ml | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| LEUPROLIDE ACETATE-BUPIVACAINE INTRAMUSCULAR SOLUTION 25-5 MG/ML | 3 | |
| LUMVOA INTRAVENOUS SOLUTION 500 MG/10ML | 4 | PA; SP |
| LUPRON DEPOT (1-MONTH) INTRAMUSCULAR KIT 3.75 MG, 7.5 MG | 4 | PA; SP |
| LUPRON DEPOT (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 22.5 MG | 4 | PA; SP |
| LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG INTRAMUSCULAR KIT 30 MG | 4 | PA; SP |
| LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG INTRAMUSCULAR KIT 45 MG | 4 | PA; SP |
| LUPRON DEPOT-PED (1-MONTH) INTRAMUSCULAR KIT 11.25 MG, 15 MG, 7.5 MG | 4 | PA; SP; QL (0.04 EA per 1 day) |
| LUPRON DEPOT-PED (3-MONTH) INTRAMUSCULAR KIT 11.25 MG, 30 MG | 4 | PA; SP; QL (0.02 EA per 1 day) |
| LUPRON DEPOT-PED (6-MONTH) INTRAMUSCULAR KIT 45 MG | 4 | PA; SP; QL (0.01 EA per 1 day) |
| LUTRATE DEPOT INTRAMUSCULAR INJECTABLE 22.5 MG | E | |
| MYCAPSSA ORAL CAPSULE DELAYED RELEASE 20 MG | E | |
| NGENLA SUBCUTANEOUS SOLUTION PEN-INJECTOR 24 MG/1.2ML, 60 MG/1.2ML | 4 | PA; SP |
| octreotide acetate injection solution 100 mcg/ml, 1000 mcg/ml, 200 mcg/ml, 50 mcg/ml, 500 mcg/ml | 4 | PA; SP |
| octreotide acetate subcutaneous solution prefilled syringe 100 mcg/ml, 50 mcg/ml, 500 mcg/ml | 4 | PA; SP |
| OMNITROPE SUBCUTANEOUS SOLUTION CARTRIDGE 10 MG/1.5ML, 5 MG/1.5ML | 4 | PA; SP |
| OMNITROPE SUBCUTANEOUS SOLUTION RECONSTITUTED 5.8 MG | 4 | PA; SP |
| ORILISSA ORAL TABLET 150 MG | 2 | PA; QL (1 EA per 1 day) |
| ORILISSA ORAL TABLET 200 MG | 2 | PA; QL (2 EA per 1 day) |
| oxytocin +rfid injection solution 10 unit/ml | 1 | |
| oxytocin solution 10 unit/ml injection | 1 | |
| OXYTOCIN SOLUTION 10 UNIT/ML INJECTION | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| OXYTOCIN-LACTATED RINGERS INTRAVENOUS SOLUTION 15 UNIT/250ML, 20 UNIT/L, 30 UNIT/500ML | 3 | |
| OXYTOCIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 15-0.9 UT/250ML-%, 30-0.9 UT/500ML-% | 3 | |
| PALSONIFY ORAL TABLET 20 MG, 30 MG | E | |
| PITOCIN INJECTION SOLUTION 10 UNIT/ML | 3 | |
| RECORLEV ORAL TABLET 150 MG | E | |
| SANDOSTATIN INJECTION SOLUTION 100 MCG/ML, 50 MCG/ML, 500 MCG/ML | E | |
| SIGNIFOR LAR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 10 MG, 20 MG, 30 MG, 60 MG | 4 | PA; SP; QL (0.04 EA per 1 day) |
| SIGNIFOR SUBCUTANEOUS SOLUTION 0.3 MG/ML, 0.6 MG/ML, 0.9 MG/ML | E | |
| SKYTROFA SUBCUTANEOUS CARTRIDGE 0.7 MG, 1.4 MG, 1.8 MG, 11 MG, 13.3 MG, 2.1 MG, 2.5 MG, 3 MG, 3.6 MG, 4.3 MG, 5.2 MG, 6.3 MG, 7.6 MG, 9.1 MG | 4 | PA; SP |
| SOGROYA SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/1.5ML, 15 MG/1.5ML, 5 MG/1.5ML | 4 | PA; SP |
| SOMATULINE DEPOT SUBCUTANEOUS SOLUTION 120 MG/0.5ML, 60 MG/0.2ML, 90 MG/0.3ML | 4 | PA; SP |
| SOMAVERT SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 15 MG, 20 MG, 25 MG, 30 MG | 4 | PA; SP |
| SUPPRELIN LA SUBCUTANEOUS KIT 50 MG | 4 | PA; SP; QL (1 EA per 250 days) |
| SYNAREL NASAL SOLUTION 2 MG/ML | 2 | |
| TEPEZZA INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 4 | PA; SP |
| TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 11.25 MG | 4 | PA; SP; QL (0.012 EA per 1 day) |
| TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 22.5 MG | 4 | PA; SP; QL (0.006 EA per 1 day) |
| TRELSTAR MIXJECT INTRAMUSCULAR SUSPENSION RECONSTITUTED 3.75 MG | 4 | PA; SP; QL (0.036 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRIPTODUR INTRAMUSCULAR SUSPENSION RECONSTITUTED ER 22.5 MG | 4 | PA; SP; QL (0.006 EA per 1 day) |
| VABRINTY SUBCUTANEOUS KIT 22.5 MG, 30 MG, 45 MG, 7.5 MG | E | |
| vasopressin +rfid intravenous solution 20 unit/ml | 1 | |
| vasopressin intravenous solution 20 unit/ml | 1 | |
| VASOPRESSIN-SODIUM CHLORIDE INTRAVENOUS SOLUTION 20-0.9 UT/100ML-%, 40-0.9 UT/100ML-% | 3 | |
| VASOSTRICT INTRAVENOUS SOLUTION 20 UNIT/ML | 3 | |
| ZOLADEX SUBCUTANEOUS IMPLANT 10.8 MG | 4 | SP; QL (0.012 EA per 1 day) |
| ZOLADEX SUBCUTANEOUS IMPLANT 3.6 MG | 4 | SP; QL (0.036 EA per 1 day) |
| ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 10 MG, 5 MG | E | |
| **Hormonal Agents - Prostaglandins** | | |
| mifepristone oral tablet 300 mg | 4 | PA; SP; QL (4 EA per 1 day) |
| **Hormonal Agents - Selective Estrogen Receptor Modifying Agents** | | |
| OSPHENA ORAL TABLET 60 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| raloxifene hcl oral tablet 60 mg | 1 | ACA |
| **Hormonal Agents - Sex Hormones and Birth Control** | | |
| abigale lo oral tablet 0.5-0.1 mg | 1 | |
| abigale oral tablet 1-0.5 mg | 1 | |
| afirmelle oral tablet 0.1-20 mg-mcg | 1 | ACA |
| ALORA TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | 3 | |
| altavera oral tablet 0.15-30 mg-mcg | 1 | ACA |
| alyacen 1/35 oral tablet 1-35 mg-mcg | 1 | ACA |
| alyacen 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg | 1 | ACA |
| amethyst oral tablet 90-20 mcg | 1 | ACA |
| ANGELIQ ORAL TABLET 0.25-0.5 MG, 0.5-1 MG | 3 | |
| ANNOVERA VAGINAL RING 0.013-0.15 MG/24HR | 3 | ACA; QL (1 EA per 350 days) |
| apri oral tablet 0.15-30 mg-mcg | 1 | ACA |
| aranelle oral tablet 0.5/1/0.5-35 mg-mcg | 1 | ACA |
| ashlyna oral tablet 0.15-0.03 &0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| aubra eq oral tablet 0.1-20 mg-mcg | 1 | ACA |
| aurovela 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| aurovela 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| aurovela 24 fe oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| aurovela fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| aurovela fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| aviane oral tablet 0.1-20 mg-mcg | 1 | ACA |
| ayuna oral tablet 0.15-30 mg-mcg | 1 | ACA |
| azurette oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |
| BALCOLTRA ORAL TABLET 0.1-20 MG-MCG(21) | 3 | ACA |
| balziva oral tablet 0.4-35 mg-mcg | 1 | ACA |
| BEYAZ ORAL TABLET 3-0.02-0.451 MG | E | ACA |
| BIJUVA ORAL CAPSULE 0.5-100 MG, 1-100 MG | 3 | |
| blisovi 24 fe oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| blisovi fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| blisovi fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| briellyn oral tablet 0.4-35 mg-mcg | 1 | ACA |
| camila oral tablet 0.35 mg | 1 | ACA |
| camrese lo oral tablet 0.1-0.02 & 0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| camrese oral tablet 0.15-0.03 &0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| charlotte 24 fe oral tablet chewable 1-20 mg-mcg(24) | 1 | ACA |
| chateal eq oral tablet 0.15-30 mg-mcg | 1 | ACA |
| CLIMARA PRO TRANSDERMAL PATCH WEEKLY 0.045-0.015 MG/DAY | 2 | |
| CLIMARA TRANSDERMAL PATCH WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.06 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | E | |
| COMBIPATCH TRANSDERMAL PATCH TWICE WEEKLY 0.05-0.14 MG/DAY, 0.05-0.25 MG/DAY | 3 | |
| CRINONE VAGINAL GEL 4 %, 8 % | 3 | QL (0.6 GM per 1 day) |
| cryselle oral tablet 0.3-30 mg-mcg | 1 | ACA |
| cyred eq oral tablet 0.15-30 mg-mcg | 1 | ACA |
| dasetta 1/35 (28) oral tablet 1-35 mg-mcg | 1 | ACA |
| dasetta 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg | 1 | ACA |
| daysee oral tablet 0.15-0.03 &0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| deblitane oral tablet 0.35 mg | 1 | ACA |
| DELESTROGEN INTRAMUSCULAR OIL 10 MG/ML, 20 MG/ML | E | |
| delyla oral tablet 0.1-20 mg-mcg | 1 | ACA |
| DEPO-ESTRADIOL INTRAMUSCULAR OIL 5 MG/ML | 3 | |
| DEPO-PROVERA INTRAMUSCULAR SUSPENSION 150 MG/ML | 3 | ACA; QL (0.02 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DEPO-PROVERA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 150 MG/ML | 3 | ACA; QL (0.02 ML per 1 day) |
| DEPO-SUBQ PROVERA 104 SUBCUTANEOUS SUSPENSION PREFILLED SYRINGE 104 MG/0.65ML | 3 | ACA; QL (0.02 ML per 1 day) |
| DIVIGEL TRANSDERMAL GEL 0.25 MG/0.25GM, 0.5 MG/0.5GM, 0.75 MG/0.75GM, 1 MG/GM, 1.25 MG/1.25GM | 3 | |
| dolishale oral tablet 90-20 mcg | 1 | ACA |
| dotti transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 1 | |
| drospiren-eth estrad-levomefol oral tablet 3-0.02-0.451 mg, 3-0.03-0.451 mg | 1 | ACA |
| drospirenone-ethinyl estradiol oral tablet 3-0.02 mg, 3-0.03 mg | 1 | ACA |
| DUAVEE ORAL TABLET 0.45-20 MG | 2 | |
| ELESTRIN TRANSDERMAL GEL 0.52 MG/0.87 GM (0.06%) | 3 | |
| elinest oral tablet 0.3-30 mg-mcg | 1 | ACA |
| ELLA ORAL TABLET 30 MG | 3 | ACA |
| eluryng vaginal ring 0.12-0.015 mg/24hr | 1 | ACA |
| emzahh oral tablet 0.35 mg | 1 | ACA |
| ENDOMETRIN VAGINAL INSERT 100 MG | 2 | |
| enilloring vaginal ring 0.12-0.015 mg/24hr | 1 | ACA |
| enskyce oral tablet 0.15-30 mg-mcg | 1 | ACA |
| errin oral tablet 0.35 mg | 1 | ACA |
| estarylla oral tablet 0.25-35 mg-mcg | 1 | ACA |
| ESTRACE VAGINAL CREAM 0.01 % | E | |
| estradiol oral tablet 0.5 mg, 1 mg, 2 mg | 1 | |
| estradiol transdermal gel 0.25 mg/0.25gm, 0.5 mg/0.5gm, 0.75 mg/0.75gm, 0.75 mg/1.25 gm (0.06%), 1 mg/gm, 1.25 mg/1.25gm | 1 | |
| estradiol transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 1 | |
| estradiol transdermal patch weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.06 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 1 | |
| estradiol vaginal cream 0.01 % | 1 | |
| estradiol vaginal tablet 10 mcg | 1 | |
| estradiol valerate intramuscular oil 10 mg/ml, 20 mg/ml, 40 mg/ml | 1 | |
| estradiol-norethindrone acet oral tablet 0.5-0.1 mg, 1-0.5 mg | 1 | |
| ESTRING VAGINAL RING 7.5 MCG/24HR | 3 | QL (0.012 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ESTROGEL TRANSDERMAL GEL 0.75 MG/1.25 GM (0.06%) | E | |
| estrogens conjugated oral tablet 0.3 mg, 0.45 mg, 0.625 mg, 0.9 mg, 1.25 mg | 1 | |
| etonogestrel-ethinyl estradiol vaginal ring 0.12-0.015 mg/24hr | 1 | ACA |
| EVAMIST TRANSDERMAL SOLUTION 1.53 MG/SPRAY | 3 | |
| falmina oral tablet 0.1-20 mg-mcg | 1 | ACA |
| feirza 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| feirza 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| FEMLYV ORAL TABLET DISPERSIBLE 1-0.02 MG | 3 | ST; ACA |
| FEMRING VAGINAL RING 0.05 MG/24HR, 0.1 MG/24HR | 3 | ST; QL (0.012 EA per 1 day) |
| finzala oral tablet chewable 1-20 mg-mcg(24) | 1 | ACA |
| fyavolv oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg | 1 | |
| galbriela oral tablet chewable 0.8-25 mg-mcg | 1 | ACA |
| gallifrey oral tablet 5 mg | 1 | |
| gemmily oral capsule 1-20 mg-mcg(24) | 1 | ACA |
| hailey 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| hailey 24 fe oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| hailey fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| hailey fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| heather oral tablet 0.35 mg | 1 | ACA |
| iclevia oral tablet 0.15-0.03 mg | 1 | ACA; QL (1 EA per 1 day) |
| IMVEXXY MAINTENANCE PACK VAGINAL INSERT 10 MCG, 4 MCG | 2 | |
| IMVEXXY STARTER PACK VAGINAL INSERT 10 MCG, 4 MCG | 2 | |
| incassia oral tablet 0.35 mg | 1 | ACA |
| introvale oral tablet 0.15-0.03 mg | 1 | ACA; QL (1 EA per 1 day) |
| isibloom oral tablet 0.15-30 mg-mcg | 1 | ACA |
| jaimiess oral tablet 0.15-0.03 &0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| jasmiel oral tablet 3-0.02 mg | 1 | ACA |
| jencycla oral tablet 0.35 mg | 1 | ACA |
| jinteli oral tablet 1-5 mg-mcg | 1 | |
| jolessa oral tablet 0.15-0.03 mg | 1 | ACA; QL (1 EA per 1 day) |
| joyeaux oral tablet 0.1-20 mg-mcg(21) | 1 | ACA |
| juleber oral tablet 0.15-30 mg-mcg | 1 | ACA |
| junel 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| junel 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| junel fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| junel fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| junel fe 24 oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| kaitlib fe oral tablet chewable 0.8-25 mg-mcg | 1 | ACA |
| kalliga oral tablet 0.15-30 mg-mcg | 1 | ACA |
| kariva oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |
| kelnor 1/35 oral tablet 1-35 mg-mcg | 1 | ACA |
| kurvelo oral tablet 0.15-30 mg-mcg | 1 | ACA |
| KYLEENA INTRAUTERINE INTRAUTERINE DEVICE 19.5 MG | 3 | ACA |
| larin 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| larin 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| larin 24 fe oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| larin fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| larin fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| lessina oral tablet 0.1-20 mg-mcg | 1 | ACA |
| levonest oral tablet 50-30/75-40/ 125-30 mcg | 1 | ACA |
| levonorgest-eth estrad 91-day oral tablet 0.15-0.03 mg | 1 | ACA; QL (1 EA per 1 day) |
| levonorgest-eth estradiol-iron oral tablet 0.1-20 mg-mcg(21) | 1 | ACA |
| levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 90-20 mcg | 1 | ACA |
| levonorg-eth estrad triphasic oral tablet 50-30/75-40/ 125-30 mcg | 1 | ACA |
| LILETTA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 20.1 MCG/DAY | 3 | ACA |
| LO LOESTRIN FE ORAL TABLET 1 MG-10 MCG / 10 MCG | E | ACA |
| LOESTRIN 1.5/30 (21) ORAL TABLET 1.5-30 MG-MCG | E | ACA |
| LOESTRIN 1/20 (21) ORAL TABLET 1-20 MG-MCG | E | ACA |
| LOESTRIN FE 1.5/30 ORAL TABLET 1.5-30 MG-MCG | E | ACA |
| LOESTRIN FE 1/20 ORAL TABLET 1-20 MG-MCG | E | ACA |
| lojaimiess oral tablet 0.1-0.02 & 0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| loryna oral tablet 3-0.02 mg | 1 | ACA |
| low-ogestrel oral tablet 0.3-30 mg-mcg | 1 | ACA |
| lo-zumandimine oral tablet 3-0.02 mg | 1 | ACA |
| luizza 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| luizza 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| lutera oral tablet 0.1-20 mg-mcg | 1 | ACA |
| lyleq oral tablet 0.35 mg | 1 | ACA |
| lyllana transdermal patch twice weekly 0.025 mg/24hr, 0.0375 mg/24hr, 0.05 mg/24hr, 0.075 mg/24hr, 0.1 mg/24hr | 1 | |
| lyza oral tablet 0.35 mg | 1 | ACA |
| marlissa oral tablet 0.15-30 mg-mcg | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| medroxyprogesterone acetate intramuscular suspension 150 mg/ml | 1 | ACA; QL (0.02 ML per 1 day) |
| medroxyprogesterone acetate intramuscular suspension prefilled syringe 150 mg/ml | 1 | ACA; QL (0.02 ML per 1 day) |
| medroxyprogesterone acetate oral tablet 10 mg, 2.5 mg, 5 mg | 1 | |
| megestrol acetate oral suspension 40 mg/ml, 400 mg/10ml, 800 mg/20ml | 1 | |
| megestrol acetate oral tablet 20 mg, 40 mg | 1 | |
| meleya oral tablet 0.35 mg | 1 | ACA |
| MENOSTAR TRANSDERMAL PATCH WEEKLY 14 MCG/24HR | 3 | ST |
| mibelas 24 fe oral tablet chewable 1-20 mg-mcg(24) | 1 | ACA |
| microgestin 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| microgestin 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| microgestin fe 1.5/30 oral tablet 1.5-30 mg-mcg | 1 | ACA |
| microgestin fe 1/20 oral tablet 1-20 mg-mcg | 1 | ACA |
| mili oral tablet 0.25-35 mg-mcg | 1 | ACA |
| mimvey oral tablet 1-0.5 mg | 1 | |
| minzoya oral tablet 0.1-20 mg-mcg(21) | 1 | ACA |
| MIRENA (52 MG) INTRAUTERINE INTRAUTERINE DEVICE 21 MCG/DAY | 3 | ACA |
| MIUDELLA INTRAUTERINE INTRAUTERINE DEVICE | 3 | ACA |
| mono-linyah oral tablet 0.25-35 mg-mcg | 1 | ACA |
| MYFEMBREE ORAL TABLET 40-1-0.5 MG | 2 | PA; QL (1 EA per 1 day) |
| NATAZIA ORAL TABLET 3/2-2/2-3/1 MG | 2 | ACA |
| necon 0.5/35 (28) oral tablet 0.5-35 mg-mcg | 1 | ACA |
| NEXPLANON SUBCUTANEOUS IMPLANT 68 MG | 3 | ACA |
| NEXTSTELLIS ORAL TABLET 3-14.2 MG | 3 | ACA |
| nikki oral tablet 3-0.02 mg | 1 | ACA |
| nora-be oral tablet 0.35 mg | 1 | ACA |
| norelgestromin-eth estradiol transdermal patch weekly 150-35 mcg/24hr | 1 | ACA |
| norethin ace-eth estrad-fe oral capsule 1-20 mg-mcg(24) | 1 | ACA |
| norethin ace-eth estrad-fe oral tablet chewable 1-20 mg-mcg(24) | 1 | ACA |
| norethindrone acetate oral tablet 5 mg | 1 | |
| norethindrone acet-ethinyl est oral tablet 1-20 mg-mcg | 1 | ACA |
| norethindrone oral tablet 0.35 mg | 1 | ACA |
| norethindrone-eth estradiol oral tablet 0.5-2.5 mg-mcg, 1-5 mg-mcg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| norgestimate-eth estradiol oral tablet 0.25-35 mg-mcg | 1 | ACA |
| norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-25 mcg, 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| norlyroc oral tablet 0.35 mg | 1 | ACA |
| nortrel 0.5/35 (28) oral tablet 0.5-35 mg-mcg | 1 | ACA |
| nortrel 1/35 (21) oral tablet 1-35 mg-mcg | 1 | ACA |
| nortrel 1/35 (28) oral tablet 1-35 mg-mcg | 1 | ACA |
| nortrel 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg | 1 | ACA |
| NUVARING VAGINAL RING 0.12-0.015 MG/24HR | E | ACA |
| nylia 1/35 oral tablet 1-35 mg-mcg | 1 | ACA |
| nylia 7/7/7 oral tablet 0.5/0.75/1-35 mg-mcg | 1 | ACA |
| ORIAHNN ORAL CAPSULE THERAPY PACK 300-1-0.5 & 300 MG | 2 | PA; QL (2 EA per 1 day) |
| orquidea oral tablet 0.35 mg | 1 | ACA |
| PARAGARD INTRAUTERINE COPPER INTRAUTERINE INTRAUTERINE DEVICE | 3 | ACA |
| philith oral tablet 0.4-35 mg-mcg | 1 | ACA |
| pimtrea oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |
| portia-28 oral tablet 0.15-30 mg-mcg | 1 | ACA |
| PREMARIN INJECTION SOLUTION RECONSTITUTED 25 MG | 3 | |
| PREMARIN ORAL TABLET 0.3 MG, 0.45 MG, 0.625 MG, 0.9 MG, 1.25 MG | E | |
| PREMARIN VAGINAL CREAM 0.625 MG/GM | 2 | |
| PREMPHASE ORAL TABLET 0.625-5 MG | 2 | |
| PREMPRO ORAL TABLET 0.3-1.5 MG, 0.45-1.5 MG, 0.625-2.5 MG, 0.625-5 MG | 2 | |
| progesterone intramuscular oil 50 mg/ml | 1 | |
| progesterone oral capsule 100 mg, 200 mg | 1 | |
| progesterone vaginal insert 100 mg | 1 | |
| PROMETRIUM ORAL CAPSULE 100 MG, 200 MG | E | |
| PROVERA ORAL TABLET 10 MG, 2.5 MG, 5 MG | 3 | |
| reclipsen oral tablet 0.15-30 mg-mcg | 1 | ACA |
| rivelsa oral tablet 42-21-21-7 days | 1 | ACA; QL (1 EA per 1 day) |
| rosyrah oral tablet 42-21-21-7 days | 1 | ACA; QL (1 EA per 1 day) |
| SAFYRAL ORAL TABLET 3-0.03-0.451 MG | E | ACA |
| setlakin oral tablet 0.15-0.03 mg | 1 | ACA; QL (1 EA per 1 day) |
| sharobel oral tablet 0.35 mg | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| simliya oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |
| simpesse oral tablet 0.15-0.03 &0.01 mg | 1 | ACA; QL (1 EA per 1 day) |
| SKYLA INTRAUTERINE INTRAUTERINE DEVICE 13.5 MG | 3 | ACA |
| SLYND ORAL TABLET 4 MG | E | ACA |
| sprintec 28 oral tablet 0.25-35 mg-mcg | 1 | ACA |
| syeda oral tablet 3-0.03 mg | 1 | ACA |
| tarina 24 fe oral tablet 1-20 mg-mcg(24) | 1 | ACA |
| tarina fe 1/20 eq oral tablet 1-20 mg-mcg | 1 | ACA |
| taysofy oral capsule 1-20 mg-mcg(24) | 1 | ACA |
| TAYTULLA ORAL CAPSULE 1-20 MG-MCG(24) | 3 | ACA |
| tilia fe oral tablet 1-20/1-30/1-35 mg-mcg | 1 | ACA |
| tri-estarylla oral tablet 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| tri-legest fe oral tablet 1-20/1-30/1-35 mg-mcg | 1 | ACA |
| tri-linyah oral tablet 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| tri-lo-estarylla oral tablet 0.18/0.215/0.25 mg-25 mcg | 1 | ACA |
| tri-lo-marzia oral tablet 0.18/0.215/0.25 mg-25 mcg | 1 | ACA |
| tri-lo-mili oral tablet 0.18/0.215/0.25 mg-25 mcg | 1 | ACA |
| tri-lo-sprintec oral tablet 0.18/0.215/0.25 mg-25 mcg | 1 | ACA |
| tri-mili oral tablet 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| tri-sprintec oral tablet 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| tri-vylibra lo oral tablet 0.18/0.215/0.25 mg-25 mcg | 1 | ACA |
| tri-vylibra oral tablet 0.18/0.215/0.25 mg-35 mcg | 1 | ACA |
| turqoz oral tablet 0.3-30 mg-mcg | 1 | ACA |
| TWIRLA TRANSDERMAL PATCH WEEKLY 120-30 MCG/24HR | E | ACA |
| TYBLUME ORAL TABLET CHEWABLE 0.1-20 MG-MCG | 3 | ACA |
| tydemy oral tablet 3-0.03-0.451 mg | 1 | ACA |
| VAGIFEM VAGINAL TABLET 10 MCG | E | |
| valtya 1/35 oral tablet 1-35 mg-mcg | 1 | ACA |
| valtya 1/50 oral tablet 1-50 mg-mcg | 1 | ACA |
| velivet oral tablet 0.1/0.125/0.15 -0.025 mg | 1 | ACA |
| vestura oral tablet 3-0.02 mg | 1 | ACA |
| vienva oral tablet 0.1-20 mg-mcg | 1 | ACA |
| viorele oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VIVELLE-DOT TRANSDERMAL PATCH TWICE WEEKLY 0.025 MG/24HR, 0.0375 MG/24HR, 0.05 MG/24HR, 0.075 MG/24HR, 0.1 MG/24HR | E | |
| volnea oral tablet 0.15-0.02/0.01 mg (21/5) | 1 | ACA |
| vyfemla oral tablet 0.4-35 mg-mcg | 1 | ACA |
| vylibra oral tablet 0.25-35 mg-mcg | 1 | ACA |
| wera oral tablet 0.5-35 mg-mcg | 1 | ACA |
| wymzya fe oral tablet chewable 0.4-35 mg-mcg | 1 | ACA |
| xarah fe oral tablet 1-20/1-30/1-35 mg-mcg | 1 | ACA |
| xelria fe oral tablet chewable 0.4-35 mg-mcg | 1 | ACA |
| xulane transdermal patch weekly 150-35 mcg/24hr | 1 | ACA |
| YASMIN 28 ORAL TABLET 3-0.03 MG | E | ACA |
| YAZ ORAL TABLET 3-0.02 MG | E | ACA |
| yuvafem vaginal tablet 10 mcg | 1 | |
| zafemy transdermal patch weekly 150-35 mcg/24hr | 1 | ACA |
| zovia 1/35 (28) oral tablet 1-35 mg-mcg | 1 | ACA |
| zumandimine oral tablet 3-0.03 mg | 1 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Hormonal Agents - Thyroid** | | |
| CYTOMEL ORAL TABLET 25 MCG, 5 MCG, 50 MCG | E | |
| EVEXITHROID ORAL TABLET 120 MG, 15 MG, 30 MG, 45 MG, 60 MG, 75 MG, 90 MG | E | |
| levothyroxine sodium intravenous solution 100 mcg/5ml, 100 mcg/ml, 200 mcg/5ml, 500 mcg/5ml | 1 | |
| levothyroxine sodium intravenous solution reconstituted 100 mcg, 200 mcg, 500 mcg | 1 | |
| LEVOTHYROXINE SODIUM ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 50 MCG, 75 MCG, 88 MCG | E | |
| levothyroxine sodium oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg | 1 | |
| levoxyl oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 50 mcg, 75 mcg, 88 mcg | 1 | |
| liomny oral tablet 25 mcg, 5 mcg, 50 mcg | 1 | |
| liothyronine sodium intravenous solution 10 mcg/ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| liothyronine sodium oral tablet 25 mcg, 5 mcg, 50 mcg | 1 | |
| methimazole oral tablet 10 mg, 5 mg | 1 | |
| propylthiouracil oral tablet 50 mg | 1 | |
| RENTHYROID ORAL TABLET 120 MG, 15 MG, 30 MG, 45 MG, 60 MG, 75 MG, 90 MG | E | |
| SODIUM IODIDE I-131 ORAL SOLUTION 1000 MCI/ML | 3 | |
| SYNTHROID ORAL TABLET 100 MCG, 112 MCG, 125 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 300 MCG, 50 MCG, 75 MCG, 88 MCG | E | |
| THYQUIDITY ORAL SOLUTION 100 MCG/5ML | E | |
| TIROSINT ORAL CAPSULE 100 MCG, 112 MCG, 125 MCG, 13 MCG, 137 MCG, 150 MCG, 175 MCG, 200 MCG, 25 MCG, 37.5 MCG, 44 MCG, 50 MCG, 62.5 MCG, 75 MCG, 88 MCG | E | |
| TIROSINT-SOL ORAL SOLUTION 100 MCG/ML, 112 MCG/ML, 125 MCG/ML, 13 MCG/ML, 137 MCG/ML, 150 MCG/ML, 175 MCG/ML, 200 MCG/ML, 25 MCG/ML, 37.5 MCG/ML, 44 MCG/ML, 50 MCG/ML, 62.5 MCG/ML, 75 MCG/ML, 88 MCG/ML | E | |
| unithroid oral tablet 100 mcg, 112 mcg, 125 mcg, 137 mcg, 150 mcg, 175 mcg, 200 mcg, 25 mcg, 300 mcg, 50 mcg, 75 mcg, 88 mcg | 1 | |
| **Immunological Agents - Drugs for Immune System Stimulation or Suppression** | | |
| ABRILADA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ABRILADA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ABRILADA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML | E | |
| ACTEMRA ACTPEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML | 4 | PA; SP; QL (0.13 ML per 1 day) |
| ACTEMRA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML | 4 | PA; SP |
| ACTEMRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML | 4 | PA; SP; QL (0.13 ML per 1 day) |
| ACTIMMUNE SUBCUTANEOUS SOLUTION 100 MCG/0.5ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ADALIMUMAB-AACF (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ADALIMUMAB-AACF (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.8ML | E | |
| ADALIMUMAB-AACF(CD/UC/HS STRT) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ADALIMUMAB-AACF(PS/UV STARTER) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML | 4 | PA; SP; QL (0.15 EA per 1 day) |
| ADALIMUMAB-AATY (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML | 4 | PA; SP; QL (0.08 EA per 1 day) |
| ADALIMUMAB-AATY (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML | 4 | PA; SP; QL (0.15 EA per 1 day) |
| ADALIMUMAB-AATY (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML | 4 | PA; SP; QL (0.15 EA per 1 day) |
| ADALIMUMAB-AATY CD/UC/HS START SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML | 4 | PA; SP; QL (0.08 EA per 1 day) |
| ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML | E | |
| ADALIMUMAB-ADAZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML | E | |
| ADALIMUMAB-ADBM (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML | E | |
| ADALIMUMAB-ADBM (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML | E | |
| ADALIMUMAB-BWWD SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML | E | |
| ADALIMUMAB-BWWD SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML | E | |
| ADALIMUMAB-FKJP (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| ADALIMUMAB-FKJP (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML, 40 MG/0.8ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ADALIMUMAB-RYVK (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML | E | |
| ADALIMUMAB-RYVK (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML | E | |
| ADALIMUMAB-RYVK (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 40 MG/0.4ML | E | |
| ALYGLO INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML | E | |
| ANASCORP INTRAVENOUS SOLUTION RECONSTITUTED | 3 | |
| ANAVIP INTRAVENOUS SOLUTION RECONSTITUTED | 3 | |
| ANDEMBRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/1.2ML | 4 | PA; SP; QL (0.05 ML per 1 day) |
| ARCALYST SUBCUTANEOUS SOLUTION RECONSTITUTED 220 MG | 4 | PA; SP |
| ASCENIV INTRAVENOUS SOLUTION 5 GM/50ML | E | |
| ASTAGRAF XL ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.5 MG, 1 MG, 5 MG | 3 | |
| AURANOFIN ORAL CAPSULE 3 MG | 4 | SP |
| AVSOLA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP |
| AVTOZMA INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML | 4 | PA; SP |
| AVTOZMA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML | 4 | PA; SP; QL (0.13 ML per 1 day) |
| AVTOZMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML | 4 | PA; SP; QL (0.13 ML per 1 day) |
| AZASAN ORAL TABLET 100 MG, 75 MG | 3 | |
| azathioprine oral tablet 100 mg, 50 mg, 75 mg | 1 | |
| azathioprine sodium injection solution reconstituted 100 mg | 1 | |
| BENLYSTA INTRAVENOUS SOLUTION RECONSTITUTED 120 MG, 400 MG | 4 | PA; SP |
| BENLYSTA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/ML | 4 | PA; SP |
| BENLYSTA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/ML | 4 | PA; SP |
| BERINERT INTRAVENOUS KIT 500 UNIT | 4 | PA; SP; QL (0.34 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 100 MG/ML | 2 | ACA; QL (2 ML per 300 days); AL (Max 24 Months) |
| BEYFORTUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 50 MG/0.5ML | 2 | ACA; QL (0.5 ML per 300 days); AL (Max 24 Months) |
| BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 160 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| BIMZELX SUBCUTANEOUS SOLUTION AUTO-INJECTOR 320 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 160 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| BIMZELX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 320 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| BIVIGAM INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML | 4 | PA; SP |
| CELLCEPT INTRAVENOUS INTRAVENOUS SOLUTION RECONSTITUTED 500 MG | 3 | |
| CELLCEPT ORAL CAPSULE 250 MG | 3 | |
| CELLCEPT ORAL SUSPENSION RECONSTITUTED 200 MG/ML | 3 | |
| CELLCEPT ORAL TABLET 500 MG | 3 | |
| CIMZIA (1 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML | 4 | PA; SP; QL (0.08 EA per 1 day) |
| CIMZIA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML | 4 | PA; SP; QL (0.08 EA per 1 day) |
| CIMZIA VIAL KIT | 4 | PA; SP; QL (0.08 EA per 1 day) |
| CIMZIA-STARTER SUBCUTANEOUS PREFILLED SYRINGE KIT 200 MG/ML | 4 | PA; SP; QL (0.08 EA per 1 day) |
| CINRYZE INTRAVENOUS SOLUTION RECONSTITUTED 500 UNIT | E | |
| CNJ-016 INTRAVENOUS SOLUTION 50000 UNIT/VIAL | 3 | |
| COSENTYX (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | E | |
| COSENTYX 150 MG/ML INTRAVENOUS SOLUTION 125 MG/5ML | E | |
| COSENTYX 150 MG/ML SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| COSENTYX SENSOREADY (300 MG) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | E | |
| COSENTYX SENSOREADY PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | E | |
| COSENTYX UNOREADY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML | E | |
| CROFAB INTRAVENOUS SOLUTION RECONSTITUTED | 3 | |
| CUTAQUIG SUBCUTANEOUS SOLUTION 1 GM/6ML, 1.65 GM/10ML, 2 GM/12ML, 3.3 GM/20ML, 4 GM/24ML, 8 GM/48ML | 4 | PA; SP |
| CUVITRU SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML, 8 GM/40ML | 4 | PA; SP |
| cyclosporine modified oral capsule 100 mg, 25 mg, 50 mg | 1 | |
| cyclosporine modified oral solution 100 mg/ml | 1 | |
| cyclosporine oral capsule 100 mg, 25 mg | 1 | |
| CYLTEZO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML | E | |
| CYLTEZO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.2ML, 20 MG/0.4ML, 40 MG/0.4ML, 40 MG/0.8ML | E | |
| DAWNZERA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML | 4 | PA; SP; QL (0.03 ML per 1 day) |
| EKTERLY ORAL TABLET 300 MG | E | |
| ENBREL MINI SUBCUTANEOUS SOLUTION CARTRIDGE 50 MG/ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ENBREL SUBCUTANEOUS SOLUTION 25 MG/0.5ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ENBREL SUBCUTANEOUS SOLUTION PREFILLED SYRINGE | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ENBREL SURECLICK SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ENFLONSIA INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 105 MG/0.7ML | 2 | ACA; QL (0.7 ML per 300 days) |
| ENSPRYNG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/ML | 4 | PA; SP |
| ENTYVIO INTRAVENOUS SOLUTION RECONSTITUTED 300 MG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ENTYVIO PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 108 MG/0.68ML | 4 | PA; SP; QL (0.05 ML per 1 day) |
| ENVARSUS XR ORAL TABLET EXTENDED RELEASE 24 HOUR 0.75 MG, 1 MG, 4 MG | 3 | |
| everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg | 1 | |
| FIRAZYR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML | E | |
| FLEBOGAMMA DIF INTRAVENOUS SOLUTION 10 GM/200ML, 20 GM/400ML, 5 GM/100ML | 4 | PA; SP |
| GAMASTAN INTRAMUSCULAR SOLUTION | 4 | PA; SP |
| GAMIFANT INTRAVENOUS SOLUTION 10 MG/2ML, 100 MG/20ML, 50 MG/10ML | 4 | PA; SP |
| GAMMAGARD ERC INJECTION SOLUTION 10 GM/100ML, 5 GM/50ML | 4 | PA; SP |
| GAMMAGARD INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML | 4 | PA; SP |
| GAMMAGARD S/D LESS IGA INTRAVENOUS SOLUTION RECONSTITUTED 10 GM, 5 GM | 4 | PA; SP |
| GAMMAKED INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 20 GM/200ML, 5 GM/50ML | 4 | PA; SP |
| GAMMAPLEX INTRAVENOUS SOLUTION 10 GM/100ML, 10 GM/200ML, 20 GM/200ML, 20 GM/400ML, 5 GM/100ML, 5 GM/50ML | 4 | PA; SP |
| GAMUNEX-C INJECTION SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML | 4 | PA; SP |
| gengraf oral capsule 100 mg, 25 mg | 1 | |
| HADLIMA PUSHTOUCH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 40 MG/0.8ML | E | |
| HADLIMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML, 40 MG/0.8ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 2000 UNIT | 4 | PA; SP; QL (0.9 EA per 1 day) |
| HAEGARDA SUBCUTANEOUS SOLUTION RECONSTITUTED 3000 UNIT | 4 | PA; SP; QL (0.6 EA per 1 day) |
| HEPAGAM B INJECTION SOLUTION 312 UNIT/ML | 3 | |
| HIZENTRA SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML | 4 | PA; SP |
| HIZENTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML | 4 | PA; SP |
| HULIO (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.8ML | E | |
| HULIO (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.4ML | E | |
| HUMIRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML | E | |
| HUMIRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML | E | |
| HUMIRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML | E | |
| HUMIRA-CD/UC/HS STARTER SUBCUTANEOUS AUTO-INJECTOR KIT 80 MG/0.8ML | E | |
| HYPERHEP B INTRAMUSCULAR SOLUTION 220 UNIT/ML | 3 | |
| HYPERHEP B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 110 UNIT/0.5ML | 3 | |
| HYPERRHO INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT | 2 | |
| HYPERRHO MINI-DOSE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 250 UNIT | 2 | |
| HYQVIA SUBCUTANEOUS KIT 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML | 4 | PA; SP |
| HYRIMOZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HYRIMOZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML | E | |
| HYRIMOZ-CROHNS/UC STARTER SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML | E | |
| HYRIMOZ-PED<40KG CROHN STARTER SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML & 40MG/0.4ML | E | |
| HYRIMOZ-PED>/=40KG CROHN START SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/0.8ML | E | |
| HYRIMOZ-PLAQ PSOR/UVEIT START SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML & 40MG/0.4ML | E | |
| HYRIMOZ-PLAQUE PSORIASIS START SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/0.8ML & 40MG/0.4ML | E | |
| icatibant acetate subcutaneous solution prefilled syringe 30 mg/3ml | 4 | PA; SP; QL (0.6 ML per 1 day) |
| ICOTYDE ORAL TABLET 200 MG | 4 | PA; SP; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ILARIS SUBCUTANEOUS SOLUTION 150 MG/ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| ILUMYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| IMAAVY INTRAVENOUS SOLUTION 1200 MG/6.5ML, 300 MG/1.62ML | E | |
| IMULDOSA INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| IMULDOSA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| IMURAN ORAL TABLET 50 MG | 3 | |
| INFLECTRA INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP |
| INFLIXIMAB INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | E | |
| JOENJA ORAL TABLET 40 MG, 50 MG, 70 MG | E | |
| JYLAMVO ORAL SOLUTION 2 MG/ML | 3 | PA; AL (Max 10 Years) |
| KALBITOR SUBCUTANEOUS SOLUTION 10 MG/ML | 4 | PA; SP; QL (0.4 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| KEVZARA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/1.14ML, 200 MG/1.14ML | 4 | PA; SP; QL (0.09 ML per 1 day) |
| KEVZARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/1.14ML | 4 | PA; SP; QL (0.09 ML per 1 day) |
| KINERET SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/0.67ML | 4 | PA; SP |
| leflunomide oral tablet 10 mg, 20 mg | 1 | |
| LUPKYNIS ORAL CAPSULE 7.9 MG | E | |
| methotrexate sodium (pf) injection solution 1 gm/40ml, 1000 mg/40ml, 250 mg/10ml, 50 mg/2ml | 1 | |
| methotrexate sodium injection solution 250 mg/10ml, 50 mg/2ml | 1 | |
| methotrexate sodium injection solution reconstituted 1 gm | 1 | |
| methotrexate sodium oral tablet 2.5 mg | 1 | |
| mycophenolate mofetil hcl intravenous solution reconstituted 500 mg | 1 | |
| mycophenolate mofetil intravenous solution reconstituted 500 mg | 1 | |
| mycophenolate mofetil oral capsule 250 mg | 1 | |
| mycophenolate mofetil oral suspension reconstituted 200 mg/ml | 1 | |
| mycophenolate mofetil oral tablet 500 mg | 1 | |
| mycophenolate sodium oral tablet delayed release 180 mg, 360 mg | 1 | |
| mycophenolic acid oral tablet delayed release 180 mg, 360 mg | 1 | |
| MYFORTIC ORAL TABLET DELAYED RELEASE 180 MG, 360 MG | 3 | |
| MYHIBBIN ORAL SUSPENSION 200 MG/ML | 3 | |
| NABI-HB INTRAMUSCULAR SOLUTION 312 UNIT/ML | 3 | |
| NEORAL ORAL CAPSULE 100 MG, 25 MG | 3 | |
| NEORAL ORAL SOLUTION 100 MG/ML | 3 | |
| NULOJIX INTRAVENOUS SOLUTION RECONSTITUTED 250 MG | 3 | |
| OCTAGAM INTRAVENOUS SOLUTION 1 GM/20ML, 10 GM/100ML, 10 GM/200ML, 2 GM/20ML, 2.5 GM/50ML, 20 GM/200ML, 30 GM/300ML, 5 GM/100ML, 5 GM/50ML | 4 | PA; SP |
| OLUMIANT ORAL TABLET 1 MG, 2 MG, 4 MG | 4 | PA; SP; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML & 200 MG/2ML | 4 | PA; SP; QL (0.11 ML per 1 day) |
| OMVOH (300 MG DOSE) SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML & 200 MG/2ML | 4 | PA; SP; QL (0.18 ML per 1 day) |
| OMVOH INTRAVENOUS SOLUTION 300 MG/15ML | 4 | PA; SP; QL (135 ML per 365 days) |
| OMVOH SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| OMVOH SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| ORENCIA CLICKJECT SUBCUTANEOUS SOLUTION AUTO-INJECTOR 125 MG/ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ORENCIA INTRAVENOUS SOLUTION RECONSTITUTED 250 MG | 4 | PA; SP |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 125 MG/ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.4ML | 4 | PA; SP; QL (0.06 ML per 1 day) |
| ORENCIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 87.5 MG/0.7ML | 4 | PA; SP; QL (0.1 ML per 1 day) |
| ORLADEYO ORAL CAPSULE 110 MG, 150 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| ORLADEYO ORAL PACKET 108 MG, 132 MG, 72 MG, 96 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| OTEZLA ORAL TABLET 20 MG, 30 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| OTEZLA ORAL TABLET THERAPY PACK 10 & 20 & 30 MG, 4 X 10 & 51 X20 MG | 4 | PA; SP; QL (55 EA per 365 days) |
| OTEZLA XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| OTEZLA/OTEZLA XR INITIATION PK ORAL TABLET THERAPY PACK 10&20&30&(ER)75 MG | 4 | PA; SP; QL (55 EA per 365 days) |
| OTULFI INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| OTULFI SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| OTULFI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PANZYGA INTRAVENOUS SOLUTION 1 GM/10ML, 10 GM/100ML, 2.5 GM/25ML, 20 GM/200ML, 30 GM/300ML, 5 GM/50ML | 4 | PA; SP |
| PEMGARDA INTRAVENOUS SOLUTION 500 MG/4ML | 3 | QL (36 ML per 70 days) |
| PRIVIGEN INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 40 GM/400ML, 5 GM/50ML | 4 | PA; SP |
| PROGRAF INTRAVENOUS SOLUTION 5 MG/ML | 3 | |
| PROGRAF ORAL CAPSULE 0.5 MG, 1 MG, 5 MG | 3 | |
| PROGRAF ORAL PACKET 0.2 MG, 1 MG | 3 | |
| PYZCHIVA INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| PYZCHIVA SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| PYZCHIVA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 45 MG/0.5ML, 90 MG/ML | E | |
| PYZCHIVA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| QIVIGY INTRAVENOUS SOLUTION 10 GM/100ML, 5 GM/50ML | E | |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 10 MG/0.2ML, 7.5 MG/0.15ML | 2 | PA; QL (0.03 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 12.5 MG/0.25ML | 2 | PA; QL (0.04 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 15 MG/0.3ML, 17.5 MG/0.35ML | 2 | PA; QL (0.05 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 20 MG/0.4ML | 2 | PA; QL (0.06 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 22.5 MG/0.45ML | 2 | PA; QL (0.07 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 25 MG/0.5ML | 2 | PA; QL (0.08 ML per 1 day) |
| RASUVO SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/0.6ML | 2 | PA; QL (0.09 ML per 1 day) |
| REMICADE INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| RENFLEXIS INTRAVENOUS SOLUTION RECONSTITUTED 100 MG | E | |
| REZUROCK ORAL TABLET 200 MG | E | |
| RHAPSIDO ORAL TABLET 25 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| RHOGAM ULTRA-FILTERED PLUS INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 1500 UNIT | 2 | |
| RHOPHYLAC INJECTION SOLUTION PREFILLED SYRINGE 1500 UNIT/2ML | 2 | |
| RIDAURA ORAL CAPSULE 3 MG | 4 | SP |
| RINVOQ LQ ORAL SOLUTION 1 MG/ML | 4 | PA; SP; QL (12 ML per 1 day) |
| RINVOQ ORAL TABLET EXTENDED RELEASE 24 HOUR 15 MG, 30 MG, 45 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| RUCONEST INTRAVENOUS SOLUTION RECONSTITUTED 2100 UNIT | 4 | PA; SP; QL (0.27 EA per 1 day) |
| SAJAZIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/3ML | E | |
| SANDIMMUNE INTRAVENOUS SOLUTION 50 MG/ML | 2 | |
| SANDIMMUNE ORAL CAPSULE 100 MG, 25 MG | 3 | |
| SAPHNELO INTRAVENOUS SOLUTION 300 MG/2ML | 4 | PA; SP |
| SAPHNELO PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 120 MG/0.8ML | 4 | PA; SP; QL (0.12 ML per 1 day) |
| SAPHNELO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/0.8ML | 4 | PA; SP; QL (0.12 ML per 1 day) |
| SELARSDI INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| SELARSDI SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| SELARSDI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| SILIQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.5ML | 4 | PA; SP; QL (0.11 ML per 1 day) |
| SIMLANDI (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML, 80 MG/0.8ML | E | |
| SIMLANDI (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 40 MG/0.4ML | E | |
| SIMLANDI (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 20 MG/0.2ML, 40 MG/0.4ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SIMPONI ARIA INTRAVENOUS SOLUTION 50 MG/4ML | 4 | PA; SP |
| SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| SIMPONI SUBCUTANEOUS SOLUTION AUTO-INJECTOR 50 MG/0.5ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| SIMPONI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 50 MG/0.5ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| SIMULECT INTRAVENOUS SOLUTION RECONSTITUTED 10 MG, 20 MG | 3 | |
| sirolimus oral solution 1 mg/ml | 1 | |
| sirolimus oral tablet 0.5 mg, 1 mg, 2 mg | 1 | |
| SKYRIZI INTRAVENOUS SOLUTION 600 MG/10ML | 4 | PA; SP |
| SKYRIZI PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| SKYRIZI SUBCUTANEOUS | 4 | PA; SP; QL (0.03 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SKYRIZI SUBCUTANEOUS SOLUTION CARTRIDGE 360 MG/2.4ML | 4 | PA; SP; QL (0.05 ML per 1 day) |
| SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| SKYRIZI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 55 MG/0.37ML | 4 | PA; SP; QL (0.005 ML per 1 day) |
| SOTYKTU ORAL TABLET 6 MG | E | |
| SPEVIGO INTRAVENOUS SOLUTION 450 MG/7.5ML | 4 | PA; SP; QL (30 ML per 84 days) |
| SPEVIGO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 300 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| STARJEMZA INTRAVENOUS SOLUTION 130 MG/26ML | 4 | PA; SP |
| STARJEMZA SUBCUTANEOUS SOLUTION 45 MG/0.5ML | 4 | PA; SP; QL (0.009 ML per 1 day) |
| STARJEMZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML | 4 | PA; SP; QL (0.009 ML per 1 day) |
| STARJEMZA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 90 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| STELARA INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| STELARA SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| STELARA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| STEQEYMA INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| STEQEYMA SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| STEQEYMA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| tacrolimus er oral capsule extended release 24 hour 0.5 mg, 1 mg, 5 mg | 1 | |
| tacrolimus intravenous solution 5 mg/ml | 1 | |
| tacrolimus oral capsule 0.5 mg, 1 mg, 5 mg | 1 | |
| TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| TAKHZYRO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML | 4 | PA; SP; QL (0.15 ML per 1 day) |
| TALTZ SUBCUTANEOUS SOLUTION AUTO-INJECTOR 80 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.25ML | 4 | PA; SP; QL (0.01 ML per 1 day) |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.5ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| TALTZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 80 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| temsirolimus intravenous solution 25 mg/ml | 4 | SP |
| THYMOGLOBULIN INTRAVENOUS SOLUTION RECONSTITUTED 25 MG | 3 | |
| tofacitinib citrate er oral tablet extended release 24 hour 11 mg, 22 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| tofacitinib citrate oral solution 1 mg/ml | 4 | PA; SP; QL (10 ML per 1 day) |
| tofacitinib citrate oral tablet 10 mg, 5 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| TOFIDENCE INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML | E | |
| TORISEL INTRAVENOUS SOLUTION 25 MG/ML | 4 | SP |
| TREMFYA INTRAVENOUS SOLUTION 200 MG/20ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TREMFYA ONE-PRESS SUBCUTANEOUS SOLUTION PEN-INJECTOR 100 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| TREMFYA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| TREMFYA SUBCUTANEOUS | 4 | PA; SP; QL (0.02 ML per 1 day) |
| TREMFYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 200 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| TREMFYA-CD/UC INDUCTION SUBCUTANEOUS SOLUTION AUTO-INJECTOR 200 MG/2ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| TREXALL ORAL TABLET 10 MG, 15 MG, 5 MG, 7.5 MG | 3 | |
| TYENNE INTRAVENOUS SOLUTION 200 MG/10ML, 400 MG/20ML, 80 MG/4ML | E | |
| TYENNE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 162 MG/0.9ML | E | |
| TYENNE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 162 MG/0.9ML | E | |
| UPLIZNA INTRAVENOUS SOLUTION 100 MG/10ML | 4 | PA; SP |
| USTEKINUMAB INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| USTEKINUMAB SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| USTEKINUMAB SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| USTEKINUMAB-AAUZ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| USTEKINUMAB-AEKN SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| USTEKINUMAB-TTWE INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION 45 MG/0.5ML | E | |
| USTEKINUMAB-TTWE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 45 MG/0.5ML, 90 MG/ML | E | |
| VARIZIG INTRAMUSCULAR SOLUTION 125 UNIT/1.2ML | 3 | PA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VELSIPITY ORAL TABLET 2 MG | 4 | PA; SP; QL (1 EA per 1 day) |
| VEOPOZ INJECTION SOLUTION 400 MG/2ML | 4 | PA; SP |
| WEZLANA INTRAVENOUS SOLUTION 130 MG/26ML | E | |
| WINRHO SDF INJECTION SOLUTION 1500 UNIT/1.3ML | 2 | |
| XATMEP ORAL SOLUTION 2.5 MG/ML | 3 | PA; AL (Max 10 Years) |
| XELJANZ ORAL SOLUTION 1 MG/ML | E | |
| XELJANZ ORAL TABLET 10 MG, 5 MG | E | |
| XELJANZ XR ORAL TABLET EXTENDED RELEASE 24 HOUR 11 MG, 22 MG | E | |
| XEMBIFY SUBCUTANEOUS SOLUTION 1 GM/5ML, 10 GM/50ML, 2 GM/10ML, 4 GM/20ML | 4 | PA; SP |
| YESINTEK INTRAVENOUS SOLUTION 130 MG/26ML | **E** | |
| YIMMUGO INTRAVENOUS SOLUTION 10 GM/100ML, 20 GM/200ML, 5 GM/50ML | E | |
| YUSIMRY SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.8ML | E | |
| ZINPLAVA INTRAVENOUS SOLUTION 1000 MG/40ML | 3 | PA |
| ZORTRESS ORAL TABLET 0.25 MG, 0.5 MG, 0.75 MG, 1 MG | 3 | |
| ZYMFENTRA (1 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 120 MG/ML | E | |
| ZYMFENTRA (2 PEN) SUBCUTANEOUS AUTO-INJECTOR KIT 120 MG/ML | E | |
| ZYMFENTRA (2 SYRINGE) SUBCUTANEOUS PREFILLED SYRINGE KIT 120 MG/ML | E | |
| **Immunological Agents - Drugs for Vaccination** | | |
| ABRYSVO INTRAMUSCULAR SOLUTION RECONSTITUTED 120 MCG/0.5ML | 3 | ACA; QL (1 EA per 999 days) |
| ACAM2000 INJECTION SOLUTION RECONSTITUTED | 3 | |
| ACTHIB INTRAMUSCULAR SOLUTION RECONSTITUTED | 3 | ACA |
| ADACEL INTRAMUSCULAR SUSPENSION 5-2-15.5 LF-MCG/0.5 | 3 | ACA |
| ADACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2-15.5 LF-MCG/0.5 | 3 | ACA |
| AREXVY INTRAMUSCULAR SUSPENSION RECONSTITUTED 120 MCG/0.5ML | 3 | ACA; QL (1 EA per 999 days); AL (Min 60 Years) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| AUDENZ INTRAMUSCULAR EMULSION | 3 | |
| AUDENZ INTRAMUSCULAR PREFILLED SYRINGE 0.5 ML | 3 | |
| BCG VACCINE INJECTION SOLUTION RECONSTITUTED 50 MG | 3 | |
| BEXSERO INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| BOOSTRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5-2.5-18.5 LF-MCG/0.5 | 3 | ACA |
| CAPVAXIVE INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| COMIRNATY 5-11 YEARS INTRAMUSCULAR SUSPENSION 10 MCG/0.3ML | 3 | ACA |
| COMIRNATY INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 30 MCG/0.3ML | 3 | ACA |
| DAPTACEL INTRAMUSCULAR SUSPENSION 23-15-5 | 3 | ACA |
| DENGVAXIA SUBCUTANEOUS SUSPENSION RECONSTITUTED | 3 | ACA |
| ENGERIX-B INJECTION SUSPENSION 20 MCG/ML | 3 | ACA |
| ENGERIX-B INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/0.5ML, 20 MCG/ML | 3 | ACA |
| ERVEBO INTRAMUSCULAR SUSPENSION | 3 | |
| FLUAD INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| FLUARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| FLUBLOK INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| FLUCELVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| FLULAVAL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| FLUMIST NASAL LIQUID | 3 | ACA |
| FLUZONE HIGH-DOSE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| FLUZONE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| GARDASIL 9 INTRAMUSCULAR SUSPENSION 0.5 ML | 3 | ACA |
| GARDASIL 9 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| HAVRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1440 EL U/ML, 720 EL U/0.5ML | 3 | ACA |
| HEPLISAV-B INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 20 MCG/0.5ML | 3 | ACA |
| HIBERIX INJECTION SOLUTION RECONSTITUTED 10 MCG | 3 | ACA |
| IMOVAX RABIES INTRAMUSCULAR SUSPENSION RECONSTITUTED 2.5 UNIT/ML | 3 | |
| INFANRIX INTRAMUSCULAR SUSPENSION 25-58-10 | 3 | ACA |
| IPOL INJECTION SUSPENSION | 3 | ACA |
| IXIARO INTRAMUSCULAR SUSPENSION | 3 | |
| JYNNEOS SUBCUTANEOUS SUSPENSION 0.5 ML | 3 | ACA |
| KINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| MENQUADFI INTRAMUSCULAR SOLUTION 0.5 ML | 3 | ACA |
| MENVEO INTRAMUSCULAR SOLUTION | 3 | ACA |
| MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED | 3 | ACA |
| MFLUSIVA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.38 ML | 3 | |
| M-M-R II INJECTION SOLUTION RECONSTITUTED | 3 | ACA |
| MNEXSPIKE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 10 MCG/0.2ML | 3 | ACA |
| MRESVIA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML | 3 | ACA; QL (0.5 ML per 999 days) |
| NUVAXOVID COVID-19 VACCINE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 5 MCG/0.5ML | 3 | ACA |
| PEDIARIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE | 3 | ACA |
| PEDVAXHIB INTRAMUSCULAR SUSPENSION 7.5 MCG/0.5ML | 3 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PENBRAYA INTRAMUSCULAR SUSPENSION RECONSTITUTED | 3 | ACA |
| PENMENVY INTRAMUSCULAR SUSPENSION RECONSTITUTED | 3 | ACA |
| PENTACEL INTRAMUSCULAR SUSPENSION RECONSTITUTED | 3 | ACA |
| PNEUMOVAX 23 INJECTION SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML | 3 | ACA |
| PREVNAR 20 INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| PRIORIX SUBCUTANEOUS SUSPENSION RECONSTITUTED | 3 | ACA |
| PROQUAD SUBCUTANEOUS SUSPENSION RECONSTITUTED | 3 | ACA |
| QUADRACEL INTRAMUSCULAR SUSPENSION | 3 | ACA |
| QUADRACEL INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| RABAVERT INTRAMUSCULAR SUSPENSION RECONSTITUTED | 3 | |
| RECOMBIVAX HB INJECTION SUSPENSION 10 MCG/ML, 40 MCG/ML, 5 MCG/0.5ML | 3 | ACA |
| RECOMBIVAX HB INJECTION SUSPENSION PREFILLED SYRINGE 10 MCG/ML, 5 MCG/0.5ML | 3 | ACA |
| ROTARIX ORAL SUSPENSION | 3 | ACA |
| ROTATEQ ORAL SOLUTION | 3 | ACA |
| SHINGRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML | 3 | ACA |
| SPIKEVAX 6M-11Y INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 MCG/0.25ML | 3 | ACA |
| SPIKEVAX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 50 MCG/0.5ML | 3 | ACA |
| TENIVAC INTRAMUSCULAR SUSPENSION 5-2 LF/0.5ML | 3 | ACA |
| TICOVAC INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 1.2 MCG/0.25ML, 2.4 MCG/0.5ML | 3 | |
| TRUMENBA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| TWINRIX INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 720-20 ELU-MCG/ML | 3 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TYPHIM VI INTRAMUSCULAR SOLUTION PREFILLED SYRINGE 25 MCG/0.5ML | 3 | |
| VAQTA INTRAMUSCULAR SUSPENSION 25 UNIT/0.5ML, 50 UNIT/ML | 3 | ACA |
| VAQTA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 25 UNIT/0.5ML, 50 UNIT/ML | 3 | ACA |
| VARIVAX INJECTION SUSPENSION RECONSTITUTED 1350 PFU/0.5ML | 3 | ACA |
| VAXCHORA ORAL SUSPENSION RECONSTITUTED | 3 | |
| VAXELIS INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE | 3 | ACA |
| VAXNEUVANCE INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 0.5 ML | 3 | ACA |
| VIMKUNYA INTRAMUSCULAR SUSPENSION PREFILLED SYRINGE 40 MCG/0.8ML | 3 | |
| VIVOTIF ORAL CAPSULE DELAYED RELEASE | 3 | |
| YF-VAX SUBCUTANEOUS SUSPENSION RECONSTITUTED | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| **Inflammatory Bowel Disease Agents** | | |
| APRISO ORAL CAPSULE EXTENDED RELEASE 24 HOUR 0.375 GM | 2 | |
| AZULFIDINE EN-TABS ORAL TABLET DELAYED RELEASE 500 MG | 3 | |
| balsalazide disodium oral capsule 750 mg | 1 | |
| budesonide oral capsule delayed release particles 3 mg | 1 | |
| budesonide rectal foam 2 mg, 2 mg/act | 1 | |
| CANASA RECTAL SUPPOSITORY 1000 MG | E | |
| CORTENEMA RECTAL ENEMA 100 MG/60ML | 3 | |
| CORTIFOAM EXTERNAL FOAM 10 % | 3 | |
| DIPENTUM ORAL CAPSULE 250 MG | E | |
| EOHILIA ORAL SUSPENSION 2 MG/10ML | 3 | PA; QL (20 ML per 1 day) |
| hydrocortisone (perianal) external cream 1 %, 2.5 % | 1 | |
| hydrocortisone ace-pramoxine external cream 1-1 % | 1 | |
| hydrocortisone rectal enema 100 mg/60ml | 1 | |
| LIALDA ORAL TABLET DELAYED RELEASE 1.2 GM | E | |
| mesalamine er oral capsule extended release 24 hour 0.375 gm | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| mesalamine er oral capsule extended release 250 mg, 500 mg | 1 | |
| mesalamine oral capsule delayed release 400 mg | 1 | |
| mesalamine oral tablet delayed release 1.2 gm | 1 | |
| mesalamine rectal enema 4 gm | 1 | |
| mesalamine rectal suppository 1000 mg | 1 | |
| PENTASA ORAL CAPSULE EXTENDED RELEASE 250 MG, 500 MG | E | |
| PROCTOFOAM HC EXTERNAL FOAM 1-1 % | 2 | |
| procto-med hc external cream 2.5 % | 1 | |
| sulfasalazine oral tablet 500 mg | 1 | |
| sulfasalazine oral tablet delayed release 500 mg | 1 | |
| TARPEYO ORAL CAPSULE DELAYED RELEASE 4 MG | E | |
| UCERIS ORAL TABLET EXTENDED RELEASE 24 HOUR 9 MG | E | |
| UCERIS RECTAL FOAM 2 MG/ACT | 3 | |
| **Metabolic Bone Disease Agents** | | |
| AUKELSO SUBCUTANEOUS SOLUTION 120 MG/1.7ML | E | |
| BILPREVDA SUBCUTANEOUS SOLUTION 120 MG/1.7ML | 4 | PA; SP |
| BOMYNTRA SUBCUTANEOUS SOLUTION 120 MG/1.7ML | E | |
| BOMYNTRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 120 MG/1.7ML | E | |
| OSENVELT SUBCUTANEOUS SOLUTION 120 MG/1.7ML | 4 | PA; SP |
| WYOST SUBCUTANEOUS SOLUTION 120 MG/1.7ML | E | |
| XGEVA SUBCUTANEOUS SOLUTION 120 MG/1.7ML | E | |
| XTRENBO SUBCUTANEOUS SOLUTION 120 MG/1.7ML | 4 | PA; SP |
| **Metabolic Bone Disease Agents - Drugs for Osteoporosis** | | |
| alendronate sodium oral solution 70 mg/75ml | 1 | |
| alendronate sodium oral tablet 10 mg | 1 | |
| alendronate sodium oral tablet 35 mg, 70 mg | 1 | QL (0.15 EA per 1 day) |
| ATELVIA ORAL TABLET DELAYED RELEASE 35 MG | 3 | QL (0.15 EA per 1 day) |
| BILDYOS SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | 4 | PA; SP; QL (2 ML per 250 days) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BONSITY SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML | 4 | PA; SP |
| BOSAYA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | E | |
| calcitonin (salmon) injection solution 200 unit/ml | 1 | |
| calcitonin (salmon) nasal solution 200 unit/act | 1 | QL (0.13 ML per 1 day) |
| CONEXXENCE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | E | |
| ENOBY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | 4 | PA; SP; QL (2 ML per 250 days) |
| EVENITY SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 105 MG/1.17ML | 4 | PA; SP; QL (0.09 ML per 1 day) |
| FORTEO SUBCUTANEOUS SOLUTION PEN-INJECTOR 560 MCG/2.24ML | E | |
| ibandronate sodium intravenous solution 3 mg/3ml | 1 | QL (0.04 ML per 1 day) |
| ibandronate sodium oral tablet 150 mg | 1 | QL (0.04 EA per 1 day) |
| JUBBONTI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | E | |
| JUBEREQ SUBCUTANEOUS SOLUTION 120 MG/1.7ML | 4 | PA; SP |
| MIACALCIN INJECTION SOLUTION 200 UNIT/ML | 3 | |
| OSPOMYV SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | E | |
| OSVYRTI SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | 4 | PA; SP; QL (2 ML per 250 days) |
| pamidronate disodium intravenous solution 30 mg/10ml, 6 mg/ml, 90 mg/10ml | 1 | SP |
| PROLIA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | E | |
| risedronate sodium oral tablet 150 mg | 1 | QL (0.04 EA per 1 day) |
| risedronate sodium oral tablet 30 mg, 5 mg | 1 | |
| risedronate sodium oral tablet 35 mg | 1 | QL (0.15 EA per 1 day) |
| risedronate sodium oral tablet delayed release 35 mg | 1 | QL (0.15 EA per 1 day) |
| STOBOCLO SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 60 MG/ML | 4 | PA; SP; QL (2 ML per 250 days) |
| teriparatide solution pen-injector 560 mcg/2.24ml subcutaneous | 1 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TERIPARATIDE SOLUTION PEN-INJECTOR 560 MCG/2.24ML SUBCUTANEOUS | 4 | PA; SP |
| TYMLOS SUBCUTANEOUS SOLUTION PEN-INJECTOR 3120 MCG/1.56ML | 4 | PA; SP |
| zoledronic acid intravenous concentrate 4 mg/5ml | 1 | SP |
| zoledronic acid intravenous solution 4 mg/100ml, 5 mg/100ml | 1 | SP |
| **Metabolic Bone Disease Agents - Other** | | |
| calcitriol intravenous solution 1 mcg/ml | 1 | |
| calcitriol oral capsule 0.25 mcg, 0.5 mcg | 1 | |
| calcitriol oral solution 1 mcg/ml | 1 | |
| cinacalcet hcl oral tablet 30 mg, 60 mg, 90 mg | 1 | PA |
| doxercalciferol intravenous solution 4 mcg/2ml | 1 | |
| paricalcitol intravenous solution 2 mcg/ml, 5 mcg/ml | 1 | |
| paricalcitol oral capsule 1 mcg, 2 mcg, 4 mcg | 1 | |
| PARSABIV INTRAVENOUS SOLUTION 10 MG/2ML, 2.5 MG/0.5ML, 5 MG/ML | 4 | SP |
| RAYALDEE ORAL CAPSULE EXTENDED RELEASE 30 MCG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| SENSIPAR ORAL TABLET 30 MG, 60 MG, 90 MG | E | |
| ZEMPLAR INTRAVENOUS SOLUTION 2 MCG/ML, 5 MCG/ML | 3 | |
| ZEMPLAR ORAL CAPSULE 1 MCG, 2 MCG | 3 | |
| **Miscellaneous Therapeutic Agents** | | |
| ACETADOTE INTRAVENOUS SOLUTION 200 MG/ML | 3 | |
| acetylcysteine intravenous solution 200 mg/ml | 1 | |
| AEROCHAMBER HOLDING CHAMBER DEVICE | 2 | |
| AEROCHAMBER MINI CHAMBER DEVICE | 2 | |
| AEROCHAMBER MV | 2 | |
| AEROCHAMBER PLS FLOVU MTHPIECE DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU INTERM DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU LARGE DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU MEDIUM DEVICE | 2 | |
| AEROCHAMBER PLUS FLO-VU SMALL DEVICE | 2 | |
| AEROCHAMBER PLUS FLOW VU | 2 | |
| AEROCHAMBER2GO ANTI-STATIC DEVICE | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ALCOHOL PREP PADS PAD , 70 % | 3 | |
| ALCOHOL PREP PADS SHEET 70 % | 3 | |
| ALPHA-LIPOIC ACID INJECTION SOLUTION 25 MG/ML | 3 | |
| AMD FOAM DRESSING PAD 3-1/2"X3" , 4"X4" , 6"X6" | 3 | |
| AMD FOAM DRESSING TOPSHEET PAD 4"X4" | 3 | |
| AMERICAN BEECH POLLEN SUBCUTANEOUS SOLUTION 1:20 | 3 | |
| AMPHADASE INJECTION SOLUTION 150 UNIT/ML | 3 | |
| ANTICHOLIUM INTRAVENOUS SOLUTION 2 MG/5ML | 3 | |
| AQNEURSA ORAL PACKET 1 GM | 4 | PA; SP; QL (4 EA per 1 day) |
| ARTISS EXTERNAL KIT 10 ML, 2 ML, 4 ML | 3 | |
| ASTRINGYN EXTERNAL SOLUTION 259 MG/GM | 3 | |
| AUM ALCOHOL PREP PADS PAD 70 % | 3 | |
| BACTERIOSTATIC WATER(BENZ ALC) INJECTION SOLUTION | 3 | |
| BIGFOOT UNITY PEN CAP/ADMELOG | E | |
| BIGFOOT UNITY PEN CAP/APIDRA | E | |
| BIGFOOT UNITY PEN CAP/ASPART | E | |
| BIGFOOT UNITY PEN CAP/BASAGLAR | E | |
| BIGFOOT UNITY PEN CAP/FIASP | E | |
| BIGFOOT UNITY PEN CAP/HUMALOG | E | |
| BIGFOOT UNITY PEN CAP/LANTUS | E | |
| BIGFOOT UNITY PEN CAP/LISPRO | E | |
| BIGFOOT UNITY PEN CAP/LYUMJEV | E | |
| BIGFOOT UNITY PEN CAP/NOVOLOG | E | |
| BIGFOOT UNITY PEN CAP/TOUJEO | E | |
| BIGFOOT UNITY PEN CAP/TOUJEO M | E | |
| BIGFOOT UNITY PEN CAP/TRESIBA | E | |
| BOTOX INJECTION SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT | 3 | PA |
| BREATHE COMFORT CHAMBER/ADULT DEVICE | 2 | |
| BREATHE COMFORT CHAMBER/CHILD DEVICE | 2 | |
| BREATHE EASE LARGE DEVICE | 2 | |
| BREATHE EASE MEDIUM DEVICE | 2 | |
| BREATHE EASE SMALL DEVICE | 2 | |
| BREATHERITE VALVED MDI CHAMBER DEVICE | 2 | |
| BYLVAY (PELLETS) ORAL CAPSULE SPRINKLE 200 MCG, 600 MCG | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BYLVAY ORAL CAPSULE 1200 MCG, 400 MCG | 4 | PA; SP |
| CAYA VAGINAL DIAPHRAGM | 3 | ACA |
| CHLORHEXIDINE GLUCONATE SOLUTION 20 % | 3 | |
| CLEVER CHOICE HOLDING CHAMBER DEVICE | 2 | |
| COMPACT SPACE CHAMBER DEVICE | 2 | |
| COMPACT SPACE CHAMBER/LG MASK DEVICE | 2 | |
| COMPACT SPACE CHAMBER/MED MASK DEVICE | 2 | |
| COMPACT SPACE CHAMBER/SM MASK DEVICE | 2 | |
| CURITY AMD ANTIMICROBIAL SPNGE PAD 4"X4" | 3 | |
| CURITY AMD ANTIMICROBIAL STRIP | 3 | |
| CURITY IODOFORM PACKING STRIP | 3 | |
| CYANOKIT INTRAVENOUS SOLUTION RECONSTITUTED 5 GM | 3 | |
| CYTOTINE ORAL POWDER | 3 | |
| DAXXIFY INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT | 3 | PA |
| deferoxamine mesylate injection solution reconstituted 2 gm, 500 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DESFERAL INJECTION SOLUTION RECONSTITUTED 500 MG | 3 | |
| DIASCREEN 10 | 3 | |
| DIASCREEN 1B | 3 | |
| DIASCREEN 1G STRIP | 3 | |
| DIASCREEN 1K | 3 | |
| DIASCREEN 1K STRIP | 3 | |
| DIASCREEN 2GK STRIP | 3 | |
| DIASCREEN 2GP | 3 | |
| DIASCREEN 3 | 3 | |
| DIASCREEN 4NL | 3 | |
| DIASCREEN 4OBL | 3 | |
| DIASCREEN 4PH | 3 | |
| DIASCREEN 5 | 3 | |
| DIASCREEN 6 | 3 | |
| DIASCREEN 7 | 3 | |
| DIASCREEN 8 | 3 | |
| DIASCREEN 9 | 3 | |
| DIASCREEN LIQUID URINE CONTROL | 3 | |
| DIGIFAB INTRAVENOUS SOLUTION RECONSTITUTED 40 MG | 3 | |
| diluent for treprostinil intravenous solution | 1 | |
| DOG EPITHELIUM SUBCUTANEOUS SOLUTION 1:10 | 3 | |
| DOJOLVI ORAL LIQUID 100 % | E | |
| DROPSAFE ALCOHOL PREP PAD 70 % | 3 | |
| DUROLANE INTRA-ARTICULAR PREFILLED SYRINGE 60 MG/3ML | 2 | PA; QL (180 day supply per 1 fill) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DYSPORT INTRAMUSCULAR SOLUTION RECONSTITUTED 300 UNIT, 500 UNIT | 2 | PA |
| EASIVENT | 2 | |
| EDETATE CALCIUM DISODIUM INJECTION SOLUTION 1 GM/5ML | 3 | |
| ENDARI ORAL PACKET 5 GM | E | |
| EUA PATIENT ASSESSMENT | 3 | |
| EUFLEXXA INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML | 2 | PA; QL (180 day supply per 1 fill) |
| EXCILON AMD DRAIN SPONGES PAD 4"X4" | 3 | |
| FEMCAP VAGINAL DEVICE 22 MM, 26 MM, 30 MM | 3 | ACA |
| FIRDAPSE ORAL TABLET 10 MG | E | |
| FLEXICHAMBER ADULT MASK/SMALL | 2 | |
| FLEXICHAMBER CHILD MASK/LARGE | 2 | |
| FLEXICHAMBER CHILD MASK/SMALL | 2 | |
| FLEXICHAMBER DEVICE | 2 | |
| flumazenil intravenous solution 0.5 mg/5ml, 1 mg/10ml | 1 | |
| fomepizole intravenous solution 1.5 gm/1.5ml | 1 | |
| FORA D40G GLUCOSE/PRESSURE DEVICE | 3 | |
| formaldehyde external solution 37 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| GEL-ONE INTRA-ARTICULAR PREFILLED SYRINGE 30 MG/3ML | E | |
| GELSYN-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16.8 MG/2ML | 2 | PA; QL (180 day supply per 1 fill) |
| GENVISC 850 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML | E | |
| glutaraldehyde external solution 25 % | 1 | |
| GOHIBIC INTRAVENOUS SOLUTION 200 MG/20ML | 3 | |
| GOODSENSE ALCOHOL SWABS PAD 70 % | 3 | |
| GRASTEK SUBLINGUAL TABLET SUBLINGUAL 2800 BAU | 3 | PA; QL (1 EA per 1 day) |
| HYALGAN INTRA-ARTICULAR SOLUTION 20 MG/2ML | E | |
| HYALGAN INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML | E | |
| HYLENEX INJECTION SOLUTION 150 UNIT/ML | 3 | |
| HYMOVIS INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 24 MG/3ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HYMOVIS ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 32 MG/4ML | E | |
| IGALMI SUBLINGUAL FILM 120 MCG, 180 MCG | 3 | PA |
| INSPIREASE RESERVOIR BAGS | 2 | |
| IWILFIN ORAL TABLET 192 MG | 4 | PA; SP |
| J-TIP KIT W/VIAL ADAPTERS KIT | 3 | |
| KERENDIA ORAL TABLET 10 MG, 20 MG, 40 MG | 3 | PA; QL (1 EA per 1 day) |
| KERLIX AMD ANTIMICROBIAL | 3 | |
| KERLIX AMD SUPER SPONGES PAD 6"X6-3/4" | 3 | |
| KORSUVA INTRAVENOUS SOLUTION 65 MCG/1.3ML | 4 | PA; SP |
| LASIX ONYU REUSABLE UNIT/CHARG | E | |
| l-glutamine oral packet 5 gm | 1 | PA |
| LIVMARLI ORAL SOLUTION 19 MG/ML, 9.5 MG/ML | E | |
| LIVMARLI ORAL TABLET 10 MG, 15 MG, 20 MG, 30 MG | E | |
| LYNAVOY ORAL TABLET 40 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| LYNKUET ORAL CAPSULE 60 MG | 3 | PA; QL (2 EA per 1 day) |
| METHERGINE ORAL TABLET 0.2 MG | 3 | QL (28 EA per 1 fill) |
| methylene blue (antidote) intravenous solution 1 % | 1 | |
| methylene blue intravenous solution 50 mg/10ml | 1 | |
| methylergonovine maleate injection solution 0.2 mg/ml | 1 | |
| methylergonovine maleate oral tablet 0.2 mg | 1 | QL (28 EA per 1 fill) |
| MICROCHAMBER DEVICE | 2 | |
| MINIMED APP MANAGER DEVICE | 3 | |
| MIPLYFFA ORAL CAPSULE 124 MG, 47 MG, 62 MG, 93 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| MONOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 88 MG/4ML | E | |
| MYOBLOC INTRAMUSCULAR SOLUTION 10000 UNIT/2ML, 2500 UNIT/0.5ML, 5000 UNIT/ML | 2 | PA |
| NEOKE RA LIPOIC ORAL POWDER 800 MG/GM | 3 | |
| NEXAVIR INJECTION SOLUTION 25.5 MG/ML | 3 | |
| NITHIODOTE INTRAVENOUS KIT 300MG/10ML&12.5 GM/50ML | 3 | |
| ODACTRA SUBLINGUAL TABLET SUBLINGUAL 12 SQ-HDM | 3 | PA; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| OMNIPOD 5 DEXG7G6 INTRO GEN 5 KIT | 2 | |
| OMNIPOD 5 DEXCOM PODS | 2 | QL (0.34 EA per 1 day) |
| OMNIPOD 5 LIBRE INTRO KIT | 2 | |
| OMNIPOD 5 LIBRE PODS | 2 | QL (0.34 EA per 1 day) |
| OMNIPOD DASH INTRO (GEN 4) KIT | 2 | |
| OMNIPOD DASH PDM (GEN 4) KIT | 2 | |
| OMNIPOD DASH PODS | 2 | QL (0.34 EA per 1 day) |
| OMNIPOD POD PALS | 3 | |
| OPTICHAMBER DIAMOND | 2 | |
| OPTICHAMBER DIAMOND-LG MASK DEVICE | 2 | |
| OPTICHAMBER DIAMOND-MD MASK | 2 | |
| OPTICHAMBER DIAMOND-SM MASK | 2 | |
| ORALAIR ADULT STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 300 IR | 3 | PA; QL (1 EA per 1 day) |
| ORALAIR CHILDRENS STARTER PACK SUBLINGUAL TABLET SUBLINGUAL 100 IR | 3 | PA; QL (6 EA per 365 days) |
| ORALAIR SUBLINGUAL TABLET SUBLINGUAL 300 IR | 3 | PA; QL (1 EA per 1 day) |
| ORTHOVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 30 MG/2ML | E | |
| PANDA MASK LARGE | 2 | |
| PANDA MASK MEDIUM | 2 | |
| PANDA MASK SMALL | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PARI VORTEX ADULT MASK | 2 | |
| PARI VORTEX PEDIATRIC MASK | 2 | |
| PEDIATRIC PANDA MASK | 2 | |
| PEDMARK INTRAVENOUS SOLUTION 12.5 % | 3 | PA |
| PHEXX VAGINAL GEL 1.8-1-0.4 % | E | ACA |
| PIVOT INSULIN PUMP STARTER KIT KIT | 3 | |
| PIVOT SUPPLY KIT KIT | 3 | QL (0.04 EA per 1 day) |
| POCKET SPACER DEVICE | 2 | |
| PRO COMFORT SPACER ADULT | 2 | |
| PRO COMFORT SPACER CHILD | 2 | |
| PRO COMFORT SPACER INFANT DEVICE | 2 | |
| PROCARE SPACER/ADULT MASK DEVICE | 2 | |
| PROCARE SPACER/CHILD MASK DEVICE | 2 | |
| PROTOPAM CHLORIDE INTRAVENOUS SOLUTION RECONSTITUTED 1 GM | 3 | |
| PROVAYBLUE INTRAVENOUS SOLUTION 50 MG/10ML | 3 | |
| PURE COMFORT SPACER CHAMBER DEVICE | 2 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| PYRIDOSTIGMINE BROMIDE ER ORAL TABLET EXTENDED RELEASE 24 HOUR 105 MG | 3 | |
| RADIOGARDASE ORAL CAPSULE 0.5 GM | 3 | |
| RAGWITEK SUBLINGUAL TABLET SUBLINGUAL 12 AMB A 1-U | 3 | PA; QL (1 EA per 1 day) |
| RAPPORT RLS KIT | 3 | |
| RAPPORT VTD KIT | 3 | |
| RYSTIGGO SUBCUTANEOUS SOLUTION 280 MG/2ML, 420 MG/3ML | 4 | PA; SP; QL (0.5 ML per 1 day) |
| RYSTIGGO SUBCUTANEOUS SOLUTION 560 MG/4ML | 4 | PA; SP; QL (0.6 ML per 1 day) |
| RYSTIGGO SUBCUTANEOUS SOLUTION 840 MG/6ML | 4 | PA; SP; QL (0.9 ML per 1 day) |
| saline bacteriostatic injection solution 0.9 % | 1 | |
| SALINE-PHENOL INJECTION SOLUTION 0.4-0.9 % | 3 | |
| SAXENDA SUBCUTANEOUS SOLUTION PEN-INJECTOR 18 MG/3ML | E | |
| sodium chloride bacteriostatic injection solution 0.9 % | 1 | |
| sodium nitrite intravenous solution 30 mg/ml | 1 | |
| sodium saccharin powder | 1 | |
| sodium thiosulfate intravenous solution 250 mg/ml | 1 | |
| SOHONOS ORAL CAPSULE 1 MG | 4 | PA; SP; QL (20 EA per 1 day) |
| SOHONOS ORAL CAPSULE 1.5 MG | 4 | PA; SP; QL (13 EA per 1 day) |
| SOHONOS ORAL CAPSULE 10 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| SOHONOS ORAL CAPSULE 2.5 MG | 4 | PA; SP; QL (8 EA per 1 day) |
| SOHONOS ORAL CAPSULE 5 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| SORBITOL IRRIGATION SOLUTION 3 % | 3 | |
| sorbitol-mannitol irrigation solution 2.7-0.54 gm/100ml | 1 | |
| STERILE DILUENT FOR REMODULIN INTRAVENOUS SOLUTION | 3 | |
| STERILE WATER FOR INJECTION INJECTION SOLUTION | 3 | |
| SUPARTZ FX INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML | E | |
| SYNOJOYNT INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML | E | |
| SYNVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 16 MG/2ML | E | |
| SYNVISC ONE INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 48 MG/6ML | E | |
| TAVNEOS ORAL CAPSULE 10 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TELFA AMD ISLAND DRESSING PAD 4"X5" , 4"X8" | 3 | |
| TELFA AMD NON-ADHERENT PAD 3"X8" | 3 | |
| TISSEEL EXTERNAL KIT 10 ML, 2 ML, 4 ML | 3 | |
| TISSEEL EXTERNAL SOLUTION | 3 | |
| TRILURON INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 20 MG/2ML | E | |
| TRIVISC INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML | E | |
| TWIIST REFILL KIT KIT | 2 | QL (0.04 EA per 1 day) |
| TWIIST REFILL KIT/INFUSION SET KIT | 2 | QL (0.04 EA per 1 day) |
| TWIIST STARTER KIT KIT | 2 | |
| UDSX MEDICATED SYSTEM COMBINATION KIT 20 MG | 3 | |
| UDSXMP MEDICATED SYSTEM COMBINATION KIT 20 MG | 3 | |
| VEOZAH ORAL TABLET 45 MG | 3 | PA; QL (1 EA per 1 day) |
| V-GO 20 KIT 20 UNIT/24HR | 3 | ST; QL (1 EA per 1 day) |
| V-GO 30 KIT 30 UNIT/24HR | 3 | ST; QL (1 EA per 1 day) |
| V-GO 40 KIT 40 UNIT/24HR | 3 | ST; QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VISCO-3 INTRA-ARTICULAR SOLUTION PREFILLED SYRINGE 25 MG/2.5ML | E | |
| VISTOGARD ORAL PACKET 10 GM | 3 | |
| VORTEX VALVE CHAMBER-PEDI MASK DEVICE | 2 | |
| VORTEX VALVED HOLDING CHAMBER DEVICE | 2 | |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 150 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 25 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| VYKAT XR ORAL TABLET EXTENDED RELEASE 24 HOUR 75 MG | 4 | PA; SP; QL (7 EA per 1 day) |
| WIDE-SEAL DIAPHRAGM 60 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 65 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 70 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 75 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 80 VAGINAL DIAPHRAGM 2 % | 3 | ACA |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| WIDE-SEAL DIAPHRAGM 85 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 90 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| WIDE-SEAL DIAPHRAGM 95 VAGINAL DIAPHRAGM 2 % | 3 | ACA |
| XEOMIN INTRAMUSCULAR SOLUTION RECONSTITUTED 100 UNIT, 200 UNIT, 50 UNIT | 2 | PA |
| XIAFLEX INJECTION SOLUTION RECONSTITUTED 0.9 MG | 4 | PA; SP |
| XPHOZAH ORAL TABLET 20 MG, 30 MG | E | |
| YONI FIT BLADDER SUPPORT KIT 1 VAGINAL DEVICE | 3 | |
| YONI FIT BLADDER SUPPORT KIT 2 VAGINAL DEVICE | 3 | |
| YONI FIT BLADDER SUPPORT KIT 3 VAGINAL DEVICE | 3 | |
| YONI FIT BLADDER SUPPORT KIT 4 VAGINAL DEVICE | 3 | |
| YONI FIT BLADDER SUPPORT KIT 5 VAGINAL DEVICE | 3 | |
| YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 168 MCG/0.56ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 294 MCG/0.98ML | 4 | PA; SP; QL (0.07 ML per 1 day) |
| YORVIPATH SUBCUTANEOUS SOLUTION PEN-INJECTOR 420 MCG/1.4ML | 4 | PA; SP; QL (0.1 ML per 1 day) |
| ZEPBOUND KWIKPEN SUBCUTANEOUS SOLUTION PEN-INJECTOR 10 MG/0.6ML, 12.5 MG/0.6ML, 15 MG/0.6ML, 2.5 MG/0.6ML, 5 MG/0.6ML, 7.5 MG/0.6ML | E | |
| ZEPBOUND SUBCUTANEOUS SOLUTION 10 MG/0.5ML, 12.5 MG/0.5ML, 15 MG/0.5ML, 2.5 MG/0.5ML, 5 MG/0.5ML, 7.5 MG/0.5ML | E | |
| ZILBRYSQ SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 16.6 MG/0.416ML, 23 MG/0.574ML, 32.4 MG/0.81ML | 4 | PA; SP |
| ZOKINVY ORAL CAPSULE 50 MG, 75 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| **Ophthalmic Agents - Drugs for Eye Allergy, Infection and Inflammation** | | |
| ACULAR LS OPHTHALMIC SOLUTION 0.4 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| AZASITE OPHTHALMIC SOLUTION 1 % | 3 | |
| azelastine hcl ophthalmic solution 0.05 % | 1 | |
| BESIFLOXACIN HCL OPHTHALMIC SUSPENSION 0.6 % | E | |
| BESIVANCE OPHTHALMIC SUSPENSION 0.6 % | 3 | |
| BETADINE OPHTHALMIC PREP OPHTHALMIC SOLUTION 5 % | 3 | |
| BROMSITE OPHTHALMIC SOLUTION 0.075 % | E | |
| BYQLOVI OPHTHALMIC SUSPENSION 0.05 % | E | |
| ciprofloxacin hcl ophthalmic solution 0.3 % | 1 | |
| cromolyn sodium ophthalmic solution 4 % | 1 | |
| dexamethasone sodium phosphate ophthalmic solution 0.1 % | 1 | |
| diclofenac sodium ophthalmic solution 0.1 % | 1 | |
| difluprednate ophthalmic emulsion 0.05 % | 1 | |
| epinastine hcl ophthalmic solution 0.05 % | 1 | |
| erythromycin ophthalmic ointment 5 mg/gm | 1 | |
| EYSUVIS OPHTHALMIC SUSPENSION 0.25 % | 3 | PA; QL (0.3 ML per 1 day) |
| FLAREX OPHTHALMIC SUSPENSION 0.1 % | 3 | |
| fluorometholone ophthalmic suspension 0.1 % | 1 | |
| flurbiprofen sodium ophthalmic solution 0.03 % | 1 | |
| FML FORTE OPHTHALMIC SUSPENSION 0.25 % | 3 | |
| FML LIQUIFILM OPHTHALMIC SUSPENSION 0.1 % | 3 | |
| gatifloxacin ophthalmic solution 0.5 % | 1 | |
| gentamicin sulfate ophthalmic solution 0.3 % | 1 | |
| ILEVRO OPHTHALMIC SUSPENSION 0.3 % | E | |
| ketorolac tromethamine ophthalmic solution 0.4 %, 0.5 % | 1 | |
| levofloxacin ophthalmic solution 0.5 %, 1.5 % | 1 | |
| LOTEMAX OPHTHALMIC SUSPENSION 0.5 % | E | |
| LOTEMAX SM OPHTHALMIC GEL 0.38 % | 3 | |
| loteprednol etabonate ophthalmic gel 0.5 % | 1 | QL (20 GM per 365 days) |
| MAXIDEX OPHTHALMIC SUSPENSION 0.1 % | 3 | |
| MAXITROL OPHTHALMIC OINTMENT 3.5-10000-0.1 | 3 | |
| MITOSOL OPHTHALMIC KIT 0.2 MG | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| moxifloxacin hcl ophthalmic solution 0.5 % | 1 | |
| NATACYN OPHTHALMIC SUSPENSION 5 % | 2 | |
| neomycin-polymyxin-dexameth ophthalmic ointment 3.5-10000-0.1 | 1 | |
| neomycin-polymyxin-dexameth ophthalmic suspension 0.1 %, 3.5-10000-0.1 | 1 | |
| neomycin-polymyxin-hc ophthalmic suspension 3.5-10000-1 | 1 | |
| NEVANAC OPHTHALMIC SUSPENSION 0.1 % | E | |
| ofloxacin ophthalmic solution 0.3 % | 1 | |
| olopatadine hcl ophthalmic solution 0.2 % | 1 | |
| POVIDONE-IODINE OPHTHALMIC SOLUTION 5 % | 3 | |
| PRED FORTE OPHTHALMIC SUSPENSION 1 % | E | |
| PRED MILD OPHTHALMIC SUSPENSION 0.12 % | 3 | |
| prednisolone acetate ophthalmic suspension 1 % | 1 | |
| prednisolone sodium phosphate ophthalmic solution 1 % | 1 | |
| PROLENSA OPHTHALMIC SOLUTION 0.07 % | E | |
| sulfacetamide sodium ophthalmic solution 10 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TOBRADEX OPHTHALMIC OINTMENT 0.3-0.1 % | 3 | |
| TOBRADEX ST OPHTHALMIC SUSPENSION 0.3-0.05 % | 3 | |
| tobramycin ophthalmic solution 0.3 % | 1 | |
| tobramycin-dexamethasone ophthalmic suspension 0.3-0.1 % | 1 | |
| TOBREX OPHTHALMIC OINTMENT 0.3 % | 3 | |
| trifluridine ophthalmic solution 1 % | 1 | |
| UPNEEQ OPHTHALMIC SOLUTION 0.1 % | 3 | PA |
| VIGAMOX OPHTHALMIC SOLUTION 0.5 % | E | |
| XDEMVY OPHTHALMIC SOLUTION 0.25 % | E | |
| ZERVIATE OPHTHALMIC SOLUTION 0.24 % | E | |
| ZIRGAN OPHTHALMIC GEL 0.15 % | 3 | |
| **Ophthalmic Agents - Drugs for Glaucoma** | | |
| acetazolamide er oral capsule extended release 12 hour 500 mg | 1 | |
| acetazolamide oral tablet 125 mg, 250 mg | 1 | |
| ALPHAGAN P OPHTHALMIC SOLUTION 0.1 %, 0.15 % | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| apraclonidine hcl ophthalmic solution 0.5 % | 1 | |
| AZOPT OPHTHALMIC SUSPENSION 1 % | E | |
| betaxolol hcl ophthalmic solution 0.5 % | 1 | |
| bimatoprost ophthalmic solution 0.01 %, 0.03 % | 1 | QL (0.1 ML per 1 day) |
| brimonidine tartrate ophthalmic solution 0.1 %, 0.15 %, 0.2 % | 1 | |
| brimonidine tartrate-timolol ophthalmic solution 0.2-0.5 % | 1 | |
| carteolol hcl ophthalmic solution 1 % | 1 | |
| COMBIGAN OPHTHALMIC SOLUTION 0.2-0.5 % | E | |
| COSOPT OPHTHALMIC SOLUTION 2-0.5 % | E | |
| COSOPT PF OPHTHALMIC SOLUTION 2-0.5 % | E | |
| dichlorphenamide oral tablet 50 mg | 4 | PA; SP; QL (4 EA per 1 day) |
| dorzolamide hcl ophthalmic solution 2 % | 1 | |
| dorzolamide hcl-timolol mal ophthalmic solution 2-0.5 % | 1 | |
| dorzolamide hcl-timolol mal pf ophthalmic solution 2-0.5 % | 1 | |
| IOPIDINE OPHTHALMIC SOLUTION 1 % | 3 | |
| IYUZEH OPHTHALMIC SOLUTION 0.005 % | E | |
| KEVEYIS ORAL TABLET 50 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| latanoprost ophthalmic solution 0.005 % | 1 | |
| levobunolol hcl ophthalmic solution 0.5 % | 1 | |
| LUMIGAN OPHTHALMIC SOLUTION 0.01 % | E | |
| methazolamide oral tablet 25 mg, 50 mg | 1 | |
| OMLONTI OPHTHALMIC SOLUTION 0.002 % | E | |
| pilocarpine hcl ophthalmic solution 1 %, 2 %, 4 % | 1 | |
| QLOSI OPHTHALMIC SOLUTION 0.4 % | E | |
| RHOPRESSA OPHTHALMIC SOLUTION 0.02 % | 3 | QL (0.1 ML per 1 day) |
| ROCKLATAN OPHTHALMIC SOLUTION 0.02-0.005 % | 3 | QL (0.1 ML per 1 day) |
| SIMBRINZA OPHTHALMIC SUSPENSION 1-0.2 % | 2 | |
| tafluprost (pf) ophthalmic solution 0.0015 % | 1 | QL (1 EA per 1 day) |
| timolol maleate (once-daily) ophthalmic solution 0.5 % | 1 | |
| timolol maleate ophthalmic solution 0.25 %, 0.5 % | 1 | |
| TIMOPTIC OCUDOSE OPHTHALMIC SOLUTION 0.25 %, 0.5 % | E | |
| TRAVATAN Z OPHTHALMIC SOLUTION 0.004 % | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| travoprost (bak free) ophthalmic solution 0.004 % | 1 | QL (0.12 ML per 1 day) |
| VYZULTA OPHTHALMIC SOLUTION 0.024 % | E | |
| XALATAN OPHTHALMIC SOLUTION 0.005 % | E | |
| XELPROS OPHTHALMIC EMULSION 0.005 % | 3 | ST; QL (0.1 ML per 1 day) |
| ZIOPTAN OPHTHALMIC SOLUTION 0.0015 % | E | |
| ZOLYMBUS OPHTHALMIC GEL 0.01 % | 3 | QL (1 EA per 1 day) |
| **Ophthalmic Agents - Drugs for Miscellaneous Eye Conditions** | | |
| AKTEN OPHTHALMIC GEL 3.5 % | 3 | |
| ALCAINE OPHTHALMIC SOLUTION 0.5 % | 3 | |
| ALTACAINE OPHTHALMIC SOLUTION 0.5 % | 3 | |
| ATROPINE SULFATE OPHTHALMIC SOLUTION 0.025 %, 0.05 % | 3 | |
| atropine sulfate ophthalmic solution 1 % | 1 | |
| bacitracin-polymyxin b ophthalmic ointment 500-10000 unit/gm | 1 | |
| bacitra-neomycin-polymyxin-hc ophthalmic ointment 1 % | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| BEOVU INTRAVITREAL SOLUTION PREFILLED SYRINGE 6 MG/0.05ML | E | |
| BEVACIZUMAB INTRAVITREAL SOLUTION PREFILLED SYRINGE 1.25 MG/0.05ML, 2.25 MG/0.09ML, 2.75 MG/0.11ML | 4 | SP |
| BYOOVIZ INTRAVITREAL SOLUTION 0.5 MG/0.05ML | E | |
| CEQUA OPHTHALMIC SOLUTION 0.09 % | 3 | PA; QL (2 EA per 1 day) |
| CIMERLI INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML | 4 | PA; SP |
| CYCLOGYL OPHTHALMIC SOLUTION 0.5 %, 1 %, 2 % | 3 | |
| CYCLOMYDRIL OPHTHALMIC SOLUTION 0.2-1 % | 3 | |
| cyclopentolate hcl ophthalmic solution 1 % | 1 | |
| cyclosporine (pf) ophthalmic emulsion 0.05 % | E | |
| CYSTADROPS OPHTHALMIC SOLUTION 0.37 % | 4 | SP; QL (0.72 ML per 1 day) |
| CYSTARAN OPHTHALMIC SOLUTION 0.44 % | 4 | SP; QL (2.15 ML per 1 day) |
| ENCELTO INTRAVITREAL IMPLANT 200000 CELLS | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| EYLEA HD INTRAVITREAL SOLUTION 8 MG/0.07ML | 4 | PA; SP |
| EYLEA INTRAVITREAL SOLUTION 2 MG/0.05ML | 4 | PA; SP |
| EYLEA INTRAVITREAL SOLUTION PREFILLED SYRINGE 2 MG/0.05ML | 4 | PA; SP |
| IZERVAY INTRAVITREAL SOLUTION 2 MG/0.1ML | 4 | PA; SP |
| LATISSE EXTERNAL SOLUTION 0.03 % | E | |
| loteprednol-tobramycin ophthalmic suspension 0.5-0.3 % | 1 | |
| LUCENTIS INTRAVITREAL SOLUTION PREFILLED SYRINGE 0.3 MG/0.05ML, 0.5 MG/0.05ML | E | |
| MIEBO OPHTHALMIC SOLUTION 1.338 GM/ML | 2 | PA; QL (0.1 ML per 1 day) |
| neomycin-bacitracin zn-polymyx ophthalmic ointment 5-400-10000 | 1 | |
| neomycin-polymyxin-gramicidin ophthalmic solution 1.75-10000-.025 | 1 | |
| NUFYMCO INTRAVITREAL SOLUTION 0.3 MG/0.05ML, 0.5 MG/0.05ML | 4 | PA; SP |
| OXERVATE OPHTHALMIC SOLUTION 0.002 % | 4 | PA; SP; QL (2 ML per 1 day) |
| phenylephrine hcl ophthalmic solution 10 %, 2.5 % | 1 | |
| polymyxin b-trimethoprim ophthalmic solution 10000-0.1 unit/ml-% | 1 | |
| proparacaine hcl ophthalmic solution 0.5 % | 1 | |
| RESTASIS MULTIDOSE OPHTHALMIC EMULSION 0.05 % | 2 | PA; QL (2 ML per 1 day) |
| RESTASIS OPHTHALMIC EMULSION 0.05 % | 1 | PA; QL (2 EA per 1 day) |
| sulfacetamide-prednisolone ophthalmic solution 10-0.23 % | 1 | |
| SUSVIMO (IMPLANT REFILL) INTRAVITREAL SOLUTION 10 MG/0.1ML | 4 | PA; SP |
| SYFOVRE INTRAVITREAL SOLUTION 15 MG/0.1ML | 4 | PA; SP |
| tetracaine hcl ophthalmic solution 0.5 % | 1 | |
| TRYPTYR OPHTHALMIC SOLUTION 0.003 % | 2 | PA; QL (2 EA per 1 day) |
| TYRVAYA NASAL SOLUTION 0.03 MG/ACT | 3 | PA; QL (0.3 ML per 1 day) |
| VABYSMO INTRAVITREAL SOLUTION 6 MG/0.05ML | 4 | PA; SP |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| VABYSMO INTRAVITREAL SOLUTION PREFILLED SYRINGE 6 MG/0.05ML | 4 | PA; SP |
| VERKAZIA OPHTHALMIC EMULSION 0.1 % | E | |
| VEVYE OPHTHALMIC SOLUTION 0.1 % | 3 | PA; QL (0.07 ML per 1 day) |
| VISUDYNE INTRAVENOUS SOLUTION RECONSTITUTED 15 MG | 4 | SP |
| VIZZ OPHTHALMIC SOLUTION 1.44 % | E | |
| XIIDRA OPHTHALMIC SOLUTION 5 % | 2 | PA; QL (2 EA per 1 day) |
| YUVEZZI OPHTHALMIC SOLUTION 2.75-0.1 % | E | |
| ZYLET OPHTHALMIC SUSPENSION 0.5-0.3 % | 3 | |
| **Otic Agents - Drugs for Ear Conditions** | | |
| acetic acid otic solution 2 % | 1 | |
| CETRAXAL OTIC SOLUTION 0.2 % | 3 | ST |
| ciprofloxacin hcl otic solution 0.2 % | 1 | |
| ciprofloxacin-dexamethasone otic suspension 0.3-0.1 % | 1 | |
| CORTISPORIN-TC OTIC SUSPENSION 3.3-3-10-0.5 MG/ML | 3 | |
| DERMOTIC OTIC OIL 0.01 % | 3 | |
| fluocinolone acetonide otic oil 0.01 % | 1 | |
| hydrocortisone-acetic acid otic solution 1-2 % | 1 | |
| neomycin-polymyxin-hc otic solution 1 %, 3.5-10000-1 | 1 | |
| neomycin-polymyxin-hc otic suspension 3.5-10000-1 | 1 | |
| ofloxacin otic solution 0.3 % | 1 | |
| PRAMOTIC OTIC LIQUID 1-0.1 % | 3 | |
| **Respiratory Tract / Pulmonary Agents - Drugs for Allergies, Cough, Cold** | | |
| azelastine hcl nasal solution 0.1 %, 137 mcg/spray | 1 | QL (2 ML per 1 day) |
| azelastine-fluticasone nasal suspension 137-50 mcg/act | 1 | QL (0.77 GM per 1 day) |
| benzonatate oral capsule 100 mg, 150 mg, 200 mg | 1 | |
| carbinoxamine maleate oral solution 4 mg/5ml | 1 | |
| carbinoxamine maleate oral tablet 4 mg | 1 | |
| cetirizine hcl oral solution 1 mg/ml, 5 mg/5ml | 1 | |
| CINQAIR INTRAVENOUS SOLUTION 100 MG/10ML | 4 | PA; SP |
| CLARINEX ORAL TABLET 5 MG | E | |
| CLARINEX-D 12 HOUR ORAL TABLET EXTENDED RELEASE 12 HOUR 2.5-120 MG | E | |
| clemastine fumarate oral tablet 2.68 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| CUROSURF INTRATRACHEAL SUSPENSION 120 MG/1.5ML, 240 MG/3ML | 3 | |
| cyproheptadine hcl oral syrup 2 mg/5ml | 1 | |
| cyproheptadine hcl oral tablet 4 mg | 1 | |
| DESLORATADINE ORAL SOLUTION 0.5 MG/ML | E | |
| diphenhydramine hcl +rfid injection solution 50 mg/ml | 1 | |
| diphenhydramine hcl injection solution 50 mg/ml | 1 | |
| diphenhydramine hcl oral elixir 12.5 mg/5ml | 1 | |
| DYMISTA NASAL SUSPENSION 137-50 MCG/ACT | E | |
| flunisolide nasal solution 25 mcg/act (0.025%) | 1 | QL (0.84 ML per 1 day) |
| fluticasone propionate nasal suspension 50 mcg/act | 1 | |
| guaifenesin-codeine oral solution 100-10 mg/5ml, 200-20 mg/10ml | 1 | QL (240 ML per 1 fill) |
| hydrocod poli-chlorphe poli er oral suspension extended release 10-8 mg/5ml | 1 | QL (240 ML per 1 fill) |
| hydrocodone bit-homatrop mbr oral solution 5-1.5 mg/5ml | 1 | QL (240 ML per 1 fill) |
| hydrocodone bit-homatrop mbr oral tablet 5-1.5 mg | 1 | QL (6 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| HYPERSAL INHALATION NEBULIZATION SOLUTION 3.5 %, 7 % | 3 | |
| INFASURF INTRATRACHEAL SUSPENSION 35-0.9 MG/ML-% | 3 | |
| ipratropium bromide nasal solution 0.03 %, 0.06 % | 1 | |
| levocetirizine dihydrochloride oral tablet 5 mg | 1 | |
| maxi-tuss ac oral solution 100-10 mg/5ml | 1 | QL (240 ML per 1 fill) |
| mometasone furoate nasal suspension 50 mcg/act | 1 | QL (1.14 GM per 1 day) |
| NEBUSAL INHALATION NEBULIZATION SOLUTION 6 % | 3 | |
| OMNARIS NASAL SUSPENSION 50 MCG/ACT | 3 | QL (0.42 GM per 1 day) |
| promethazine-codeine oral solution 6.25-10 mg/5ml | 1 | QL (240 ML per 1 fill) |
| promethazine-codeine oral syrup 6.25-10 mg/5ml | 1 | QL (240 ML per 1 fill) |
| promethazine-dm oral syrup 6.25-15 mg/5ml | 1 | |
| promethazine-phenylephrine oral syrup 6.25-5 mg/5ml | E | |
| pseudoephedrine-bromphen-dm oral syrup 30-2-10 mg/5ml | 1 | |
| PULMOSAL INHALATION NEBULIZATION SOLUTION 7 % | 3 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| QNASL CHILDRENS NASAL AEROSOL SOLUTION 40 MCG/ACT | 3 | QL (0.23 GM per 1 day) |
| QNASL NASAL AEROSOL SOLUTION 80 MCG/ACT | 3 | QL (0.36 GM per 1 day) |
| RYALTRIS NASAL SUSPENSION 665-25 MCG/ACT | E | |
| sodium chloride inhalation nebulization solution 0.9 %, 10 %, 3 %, 7 % | 1 | |
| SURVANTA INTRATRACHEAL SUSPENSION 25-0.9 MG/ML-% | 3 | |
| XHANCE NASAL EXHALER SUSPENSION 93 MCG/ACT | E | |
| **Respiratory Tract / Pulmonary Agents - Drugs for Asthma and Other Lung Conditions** | | |
| acetylcysteine inhalation solution 10 %, 20 % | 1 | |
| ADVAIR DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100-50 MCG/ACT, 250-50 MCG/ACT, 500-50 MCG/ACT | E | |
| ADVAIR HFA INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT | 1 | QL (0.4 GM per 1 day) |
| AIRSUPRA INHALATION AEROSOL 90-80 MCG/ACT | 2 | QL (1.1 GM per 1 day) |
| albuterol sulfate hfa inhalation aerosol solution 108 (90 base) mcg/act | 1 | QL (1.2 GM per 1 day) |
| albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083% | 1 | QL (18 ML per 1 day) |
| albuterol sulfate inhalation nebulization solution (5 mg/ml) 0.5% | 1 | QL (5 ML per 1 day) |
| albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml | 1 | QL (12.5 ML per 1 day) |
| albuterol sulfate inhalation nebulization solution 2.5 mg/0.5ml | 1 | QL (5 EA per 1 day) |
| albuterol sulfate oral syrup 2 mg/5ml, 8 mg/20ml | 1 | |
| albuterol sulfate oral tablet 2 mg, 4 mg | 1 | |
| ALVESCO INHALATION AEROSOL SOLUTION 160 MCG/ACT, 80 MCG/ACT | E | |
| aminophylline intravenous solution 25 mg/ml | 1 | |
| ANORO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT | 2 | QL (2 EA per 1 day) |
| ARALAST NP INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 500 MG | 4 | PA; SP |
| arformoterol tartrate inhalation nebulization solution 15 mcg/2ml | 1 | QL (4 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| ARNUITY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT | 2 | QL (1 EA per 1 day) |
| ASMANEX (120 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT | E | |
| ASMANEX (14 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT | E | |
| ASMANEX (30 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 110 MCG/ACT, 220 MCG/ACT | E | |
| ASMANEX (60 METERED DOSES) INHALATION AEROSOL POWDER BREATH ACTIVATED 220 MCG/ACT | E | |
| ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT | E | |
| ATROVENT HFA INHALATION AEROSOL SOLUTION 17 MCG/ACT | E | |
| AUVI-Q INJECTION SOLUTION AUTO-INJECTOR 0.1 MG/0.1ML, 0.15 MG/0.15ML, 0.3 MG/0.3ML | 3 | |
| BECLOMETHASONE DIPROP HFA INHALATION AEROSOL SOLUTION 40 MCG/ACT, 80 MCG/ACT | E | |
| BEVESPI AEROSPHERE INHALATION AEROSOL 9-4.8 MCG/ACT | E | |
| BREO ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT, 50-25 MCG/INH | 1 | QL (2 EA per 1 day) |
| breyna inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act | E | |
| BREZTRI AEROSPHERE INHALATION AEROSOL 160-18-4.8 MCG/ACT, 160-9-4.8 MCG/ACT | 2 | QL (0.36 GM per 1 day) |
| BRINSUPRI ORAL TABLET 10 MG, 25 MG | E | |
| budesonide inhalation suspension 0.25 mg/2ml, 0.5 mg/2ml, 1 mg/2ml | 1 | QL (4 ML per 1 day) |
| budesonide-formoterol fumarate inhalation aerosol 160-4.5 mcg/act, 80-4.5 mcg/act | E | |
| COMBIVENT RESPIMAT INHALATION AEROSOL SOLUTION 20-100 MCG/ACT | 2 | QL (0.27 GM per 1 day) |
| cromolyn sodium inhalation nebulization solution 20 mg/2ml | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| DUAKLIR PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400-12 MCG/ACT | E | |
| DULERA INHALATION AEROSOL 100-5 MCG/ACT, 200-5 MCG/ACT, 50-5 MCG/ACT | E | |
| elixophyllin oral elixir 80 mg/15ml | 1 | |
| epinephrine injection solution auto-injector 0.15 mg/0.15ml, 0.15 mg/0.3ml, 0.3 mg/0.3ml | 1 | |
| EPIPEN 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.3 MG/0.3ML | 3 | ST |
| EPIPEN JR 2-PAK INJECTION SOLUTION AUTO-INJECTOR 0.15 MG/0.3ML | E | |
| ESBRIET ORAL TABLET 267 MG, 801 MG | E | |
| EXDENSUR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML | E | |
| FASENRA PEN SUBCUTANEOUS SOLUTION AUTO-INJECTOR 30 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 10 MG/0.5ML | 4 | PA; SP; QL (0.01 ML per 1 day) |
| FASENRA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 30 MG/ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| FLUTICASONE FUROATE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 200 MCG/ACT, 50 MCG/ACT | E | |
| FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT, 200-25 MCG/ACT | E | |
| FLUTICASONE PROPIONATE DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 100 MCG/ACT, 250 MCG/ACT, 50 MCG/ACT | E | |
| fluticasone propionate hfa aerosol 44 mcg/act inhalation | 1 | QL (0.71 GM per 1 day) |
| fluticasone propionate hfa aerosol 44 mcg/act inhalation | E | |
| FLUTICASONE PROPIONATE HFA INHALATION AEROSOL 110 MCG/ACT, 220 MCG/ACT | E | |
| FLUTICASONE-SALMETEROL INHALATION AEROSOL 115-21 MCG/ACT, 230-21 MCG/ACT, 45-21 MCG/ACT | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act | 1 | ST; QL (2 EA per 1 day) |
| FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT | E | |
| formoterol fumarate inhalation nebulization solution 20 mcg/2ml | 1 | QL (4 ML per 1 day) |
| GLASSIA INTRAVENOUS SOLUTION 1000 MG/50ML, 4 GM/200ML, 5 GM/250ML | 4 | PA; SP |
| INCRUSE ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/ACT | E | |
| ipratropium bromide hfa inhalation aerosol solution 17 mcg/act | 1 | QL (0.86 GM per 1 day) |
| ipratropium bromide inhalation solution 0.02 % | 1 | QL (10.42 ML per 1 day) |
| ipratropium-albuterol inhalation solution 0.5-2.5 (3) mg/3ml | 1 | QL (18 ML per 1 day) |
| isoproterenol hcl injection solution 0.2 mg/ml | 1 | |
| JASCAYD ORAL TABLET 18 MG, 9 MG | E | |
| levalbuterol hcl inhalation nebulization solution 0.31 mg/3ml, 0.63 mg/3ml | 1 | QL (18 ML per 1 day) |
| levalbuterol hcl inhalation nebulization solution 1.25 mg/0.5ml | 1 | QL (3 EA per 1 day) |
| levalbuterol hcl inhalation nebulization solution 1.25 mg/3ml | 1 | QL (9 ML per 1 day) |
| LEVALBUTEROL HFA INHALATION AEROSOL 45 MCG/ACT | E | |
| montelukast sodium oral packet 4 mg | 1 | |
| montelukast sodium oral tablet 10 mg | 1 | |
| montelukast sodium oral tablet chewable 4 mg, 5 mg | 1 | |
| NEFFY NASAL SOLUTION 1 MG/0.1ML, 2 MG/0.1ML | 3 | |
| nintedanib esylate oral capsule 100 mg, 150 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 100 MG/ML | 4 | PA; SP; QL (0.11 ML per 1 day) |
| NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML | 4 | PA; SP; QL (0.11 ML per 1 day) |
| NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML | 4 | PA; SP; QL (0.02 ML per 1 day) |
| NUCALA SUBCUTANEOUS SOLUTION RECONSTITUTED 100 MG | 4 | PA; SP; QL (0.11 EA per 1 day) |
| OFEV ORAL CAPSULE 100 MG, 150 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| OHTUVAYRE INHALATION SUSPENSION 3 MG/2.5ML | E | |
| PERFOROMIST INHALATION NEBULIZATION SOLUTION 20 MCG/2ML | 3 | QL (4 ML per 1 day) |
| pirfenidone oral capsule 267 mg | 4 | PA; SP; QL (9 EA per 1 day) |
| pirfenidone oral tablet 267 mg | 4 | PA; SP; QL (9 EA per 1 day) |
| pirfenidone oral tablet 534 mg | 4 | PA; SP |
| pirfenidone oral tablet 801 mg | 4 | PA; SP; QL (3 EA per 1 day) |
| PROAIR RESPICLICK INHALATION AEROSOL POWDER BREATH ACTIVATED 108 (90 BASE) MCG/ACT | E | |
| PROLASTIN-C INTRAVENOUS SOLUTION 1000 MG/20ML | 4 | PA; SP |
| PULMICORT FLEXHALER INHALATION AEROSOL POWDER BREATH ACTIVATED 180 MCG/ACT, 90 MCG/ACT | E | |
| PULMICORT SUSPENSION INHALATION SUSPENSION 0.25 MG/2ML, 0.5 MG/2ML, 1 MG/2ML | E | |
| QVAR REDIHALER INHALATION AEROSOL BREATH ACTIVATED 40 MCG/ACT, 80 MCG/ACT | 2 | QL (0.71 GM per 1 day) |
| roflumilast oral tablet 250 mcg, 500 mcg | 1 | PA |
| SEREVENT DISKUS INHALATION AEROSOL POWDER BREATH ACTIVATED 50 MCG/ACT | 2 | QL (2 EA per 1 day) |
| SINGULAIR ORAL PACKET 4 MG | E | |
| SINGULAIR ORAL TABLET 10 MG | E | |
| SINGULAIR ORAL TABLET CHEWABLE 4 MG, 5 MG | E | |
| SPIRIVA HANDIHALER INHALATION CAPSULE 18 MCG | E | |
| SPIRIVA RESPIMAT INHALATION AEROSOL SOLUTION 1.25 MCG/ACT, 2.5 MCG/ACT | 2 | QL (0.14 GM per 1 day) |
| STERITALC INTRAPLEURAL POWDER 2 GM, 3 GM, 4 GM | 3 | |
| STIOLTO RESPIMAT INHALATION AEROSOL SOLUTION 2.5-2.5 MCG/ACT | 2 | QL (0.14 GM per 1 day) |
| STRIVERDI RESPIMAT INHALATION AEROSOL SOLUTION 2.5 MCG/ACT | 2 | QL (4.2 GM per 30 days) |
| SYMBICORT INHALATION AEROSOL 160-4.5 MCG/ACT, 80-4.5 MCG/ACT | 1 | QL (0.35 GM per 1 day) |
| terbutaline sulfate injection solution 1 mg/ml | 1 | |
| terbutaline sulfate oral tablet 2.5 mg, 5 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TEZSPIRE SUBCUTANEOUS SOLUTION AUTO-INJECTOR 210 MG/1.91ML | 4 | PA; SP; QL (0.07 ML per 1 day) |
| TEZSPIRE SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 210 MG/1.91ML | 4 | PA; SP; QL (0.07 ML per 1 day) |
| THEO-24 ORAL CAPSULE EXTENDED RELEASE 24 HOUR 100 MG, 200 MG, 300 MG, 400 MG | 3 | |
| theophylline er oral tablet extended release 12 hour 100 mg, 200 mg, 300 mg, 450 mg | 1 | |
| theophylline er oral tablet extended release 24 hour 400 mg, 600 mg | 1 | |
| theophylline oral elixir 80 mg/15ml | 1 | |
| theophylline oral solution 80 mg/15ml | 1 | |
| tiotropium bromide inhalation capsule 18 mcg | 1 | QL (1 EA per 1 day) |
| TRELEGY ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 100-62.5-25 MCG/ACT, 200-62.5-25 MCG/ACT | 2 | QL (2 EA per 1 day) |
| TUDORZA PRESSAIR INHALATION AEROSOL POWDER BREATH ACTIVATED 400 MCG/ACT | E | |
| UMECLIDINIUM ELLIPTA INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5 MCG/INH | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| UMECLIDINIUM-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 62.5-25 MCG/ACT | E | |
| VENTOLIN HFA INHALATION AEROSOL SOLUTION 108 (90 BASE) MCG/ACT | E | |
| wixela inhub inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act | 1 | ST; QL (2 EA per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 300 MG/2ML | 4 | PA; SP; QL (0.3 ML per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION AUTO-INJECTOR 75 MG/0.5ML | 4 | PA; SP; QL (0.04 ML per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML | 4 | PA; SP; QL (0.08 ML per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 300 MG/2ML | 4 | PA; SP; QL (0.3 ML per 1 day) |
| XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 75 MG/0.5ML | 4 | PA; SP; QL (0.04 ML per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| XOLAIR SUBCUTANEOUS SOLUTION RECONSTITUTED 150 MG | 4 | PA; SP |
| XOPENEX HFA INHALATION AEROSOL 45 MCG/ACT | E | |
| YUPELRI INHALATION NEBULIZATION SOLUTION 175 MCG/3ML | 3 | QL (3 ML per 1 day) |
| zafirlukast oral tablet 10 mg, 20 mg | 1 | |
| ZEMAIRA INTRAVENOUS SOLUTION RECONSTITUTED 1000 MG, 4000 MG, 5000 MG | 4 | PA; SP |
| **Respiratory Tract / Pulmonary Agents - Drugs for Cystic Fibrosis** | | |
| ALYFTREK ORAL TABLET 10-50-125 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| ALYFTREK ORAL TABLET 4-20-50 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| BETHKIS INHALATION NEBULIZATION SOLUTION 300 MG/4ML | E | |
| BRONCHITOL INHALATION CAPSULE 40 MG | E | |
| BRONCHITOL TOLERANCE TEST INHALATION CAPSULE 40 MG | E | |
| CAYSTON INHALATION SOLUTION RECONSTITUTED 75 MG | E | |
| KALYDECO ORAL PACKET 13.4 MG, 25 MG, 5.8 MG, 50 MG, 75 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| KALYDECO ORAL TABLET 150 MG | 4 | PA; SP |
| KITABIS PAK (W/ NEBULIZER) INHALATION NEBULIZATION SOLUTION 300 MG/5ML | E | |
| ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG, 75-94 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| ORKAMBI ORAL TABLET 100-125 MG, 200-125 MG | 4 | PA; SP; QL (4 EA per 1 day) |
| PULMOZYME INHALATION SOLUTION 2.5 MG/2.5ML | 4 | PA; SP |
| SYMDEKO ORAL TABLET THERAPY PACK 100-150 & 150 MG, 50-75 & 75 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| TOBI NEBULIZER INHALATION NEBULIZATION SOLUTION 300 MG/5ML | E | |
| TOBI PODHALER INHALATION CAPSULE 28 MG | 4 | SP; QL (224 EA per 40 days) |
| tobramycin inhalation nebulization solution 300 mg/4ml | 4 | SP; QL (8 ML per 1 day) |
| tobramycin nebulization solution 300 mg/5ml inhalation | 4 | SP; QL (10 ML per 1 day) |
| TOBRAMYCIN NEBULIZATION SOLUTION 300 MG/5ML INHALATION | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRIKAFTA ORAL TABLET THERAPY PACK 100-50-75 & 150 MG, 50-25-37.5 & 75 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| TRIKAFTA ORAL THERAPY PACK 100-50-75 & 75 MG, 80-40-60 & 59.5 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| **Respiratory Tract / Pulmonary Agents - Drugs for Pulmonary Hypertension** | | |
| ADCIRCA ORAL TABLET 20 MG | E | |
| ADEMPAS ORAL TABLET 0.5 MG, 1 MG, 1.5 MG, 2 MG, 2.5 MG | 4 | PA; SP; QL (3 EA per 1 day) |
| alyq oral tablet 20 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| ambrisentan oral tablet 10 mg, 5 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| bosentan oral tablet 125 mg, 62.5 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| bosentan oral tablet soluble 32 mg | 4 | PA; SP; QL (4 EA per 1 day) |
| epoprostenol sodium intravenous solution reconstituted 0.5 mg, 1.5 mg | 4 | PA; SP |
| LETAIRIS ORAL TABLET 10 MG, 5 MG | E | |
| macitentan oral tablet 10 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| OPSUMIT ORAL TABLET 10 MG | E | |
| OPSYNVI ORAL TABLET 10-20 MG, 10-40 MG | E | |
| ORENITRAM MONTH 1 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG | 4 | PA; SP; QL (336 EA per 365 days) |
| ORENITRAM MONTH 2 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 MG | 4 | PA; SP; QL (672 EA per 365 days) |
| ORENITRAM MONTH 3 ORAL TABLET EXTENDED RELEASE THERAPY PACK 0.125 & 0.25 | 4 | PA; SP; QL (504 EA per 365 days) |
| ORENITRAM ORAL TABLET EXTENDED RELEASE 0.125 MG, 0.25 MG, 1 MG, 2.5 MG, 5 MG | 4 | PA; SP |
| REMODULIN INJECTION SOLUTION 100 MG/20ML, 20 MG/20ML, 200 MG/20ML, 50 MG/20ML, 8 MG/20ML | E | |
| REVATIO INTRAVENOUS SOLUTION 10 MG/12.5ML | E | |
| REVATIO ORAL TABLET 20 MG | E | |
| riociguat oral tablet 0.5 mg, 1 mg, 1.5 mg, 2 mg, 2.5 mg | 4 | PA; SP; QL (3 EA per 1 day) |
| sildenafil citrate intravenous solution 10 mg/12.5ml | 4 | PA; SP |
| sildenafil citrate oral suspension reconstituted 10 mg/ml | 4 | PA; SP; QL (7.5 ML per 1 day) |
| sildenafil citrate oral tablet 20 mg | 4 | PA; SP; QL (3 EA per 1 day) |
| tadalafil (pah) oral tablet 20 mg | 4 | PA; SP; QL (2 EA per 1 day) |
| TADLIQ ORAL SUSPENSION 20 MG/5ML | E | |
| TRACLEER ORAL TABLET 125 MG, 62.5 MG | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| TRACLEER ORAL TABLET SOLUBLE 32 MG | E | |
| treprostinil injection solution 100 mg/20ml, 20 mg/20ml, 200 mg/20ml, 50 mg/20ml | 4 | PA; SP |
| TYVASO DPI INSTITUTIONAL KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG, 80 MCG | 4 | PA; SP; QL (4 EA per 1 day) |
| TYVASO DPI MAINTENANCE KIT INHALATION POWDER 112 X 32MCG & 112 X64MCG, 112 X 48MCG & 112 X64MCG, 112 X 48MCG & 112 X80MCG | 4 | PA; SP; QL (8 EA per 1 day) |
| TYVASO DPI MAINTENANCE KIT INHALATION POWDER 16 MCG, 32 MCG, 48 MCG, 64 MCG, 80 MCG | 4 | PA; SP; QL (4 EA per 1 day) |
| TYVASO DPI TITRATION KIT INHALATION POWDER 16 & 32 & 48 MCG | 4 | PA; SP; QL (2 EA per 365 days) |
| TYVASO INHALATION SOLUTION 0.6 MG/ML | 4 | PA; SP; QL (2.9 ML per 1 day) |
| TYVASO REFILL KIT INHALATION SOLUTION 0.6 MG/ML | 4 | PA; SP; QL (2.9 ML per 1 day) |
| TYVASO STARTER KIT INHALATION SOLUTION 0.6 MG/ML | 4 | PA; SP; QL (2.9 ML per 1 day) |
| UPTRAVI INTRAVENOUS SOLUTION RECONSTITUTED 1800 MCG | 4 | PA; SP |
| UPTRAVI ORAL TABLET 100 MCG, 1000 MCG, 1200 MCG, 1400 MCG, 150 MCG, 1600 MCG, 200 MCG, 400 MCG, 600 MCG, 800 MCG | 4 | PA; SP; QL (2 EA per 1 day) |
| UPTRAVI TITRATION ORAL TABLET THERAPY PACK 200 & 800 MCG | 4 | PA; SP; QL (400 EA per 365 days) |
| VELETRI INTRAVENOUS SOLUTION RECONSTITUTED 0.5 MG, 1.5 MG | 4 | PA; SP |
| WINREVAIR SUBCUTANEOUS KIT 2 X 45 MG, 2 X 60 MG, 45 MG, 60 MG | 4 | PA; SP; QL (0.05 EA per 1 day) |
| YUTREPIA INHALATION CAPSULE 106 MCG | 4 | PA; SP; QL (8 EA per 1 day) |
| YUTREPIA INHALATION CAPSULE 26.5 MCG, 53 MCG | 4 | PA; SP; QL (5 EA per 1 day) |
| YUTREPIA INHALATION CAPSULE 79.5 MCG | 4 | PA; SP; QL (10 EA per 1 day) |
| **Skeletal Muscle Relaxants - Drugs for Muscle Pain and Spasm** | | |
| AMRIX ORAL CAPSULE EXTENDED RELEASE 24 HOUR 15 MG, 30 MG | E | |
| ATMEKSI ORAL SUSPENSION 750 MG/5ML | E | |
| baclofen oral tablet 10 mg, 15 mg, 20 mg, 5 mg | 1 | |
| carisoprodol oral tablet 250 mg, 350 mg | 1 | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| chlorzoxazone oral tablet 500 mg | 1 | |
| cyclobenzaprine hcl oral tablet 10 mg, 5 mg | 1 | |
| DANTRIUM INTRAVENOUS SOLUTION RECONSTITUTED 20 MG | 3 | |
| dantrolene sodium intravenous solution reconstituted 20 mg | 1 | |
| dantrolene sodium oral capsule 100 mg, 25 mg, 50 mg | 1 | |
| FLEQSUVY ORAL SUSPENSION 25 MG/5ML | E | |
| LYVISPAH ORAL PACKET 10 MG | E | |
| methocarbamol injection solution 1000 mg/10ml | 1 | |
| methocarbamol oral tablet 500 mg, 750 mg | 1 | |
| NORGESIC FORTE ORAL TABLET 50-770-60 MG | E | |
| NORGESIC ORAL TABLET 25-385-30 MG | E | |
| ONTRALFY ORAL SOLUTION 2 MG/5ML | E | |
| orphenadrine citrate er oral tablet extended release 12 hour 100 mg | 1 | QL (2 EA per 1 day) |
| orphenadrine citrate injection solution 30 mg/ml | 1 | |
| ORPHENGESIC FORTE ORAL TABLET 50-770-60 MG | E | |
| OZOBAX DS ORAL SOLUTION 10 MG/5ML | E | |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| revonto intravenous solution reconstituted 20 mg | 1 | |
| ROBAXIN INJECTION SOLUTION 1000 MG/10ML | 3 | |
| RYANODEX INTRAVENOUS SUSPENSION RECONSTITUTED 250 MG | 3 | |
| SOMA ORAL TABLET 250 MG, 350 MG | E | |
| tizanidine hcl oral capsule 6 mg | 1 | |
| tizanidine hcl oral tablet 2 mg, 4 mg | 1 | |
| ZANAFLEX ORAL CAPSULE 2 MG, 4 MG, 6 MG, 8 MG | E | |
| ZANAFLEX ORAL TABLET 4 MG | E | |
| **Sleep Disorder Agents** | | |
| AMBIEN CR ORAL TABLET EXTENDED RELEASE 12.5 MG, 6.25 MG | E | |
| AMBIEN ORAL TABLET 10 MG, 5 MG | E | |
| armodafinil oral tablet 150 mg, 200 mg, 250 mg | 1 | PA; QL (1 EA per 1 day) |
| armodafinil oral tablet 50 mg | 1 | PA; QL (2 EA per 1 day) |
| BELSOMRA ORAL TABLET 10 MG, 15 MG, 20 MG, 5 MG | 3 | QL (1 EA per 1 day) |
| DAYVIGO ORAL TABLET 10 MG, 5 MG | E | |
| doxepin hcl oral tablet 3 mg, 6 mg | 1 | QL (1 EA per 1 day) |
| eszopiclone oral tablet 1 mg, 2 mg, 3 mg | 1 | QL (1 EA per 1 day) |

| Drug Name | Drug Tier | Notes |
|---|---|---|
| flurazepam hcl oral capsule 15 mg, 30 mg | 1 | PA; QL (1 EA per 1 day) |
| HETLIOZ LQ ORAL SUSPENSION 4 MG/ML | E | |
| HETLIOZ ORAL CAPSULE 20 MG | E | |
| LUMRYZ ORAL PACKET 4.5 GM, 6 GM, 7.5 GM, 9 GM | E | |
| LUMRYZ STARTER PACK ORAL THERAPY PACK 4.5 & 6 & 7.5 GM | E | |
| LUNESTA ORAL TABLET 1 MG, 2 MG, 3 MG | E | |
| modafinil oral tablet 100 mg, 200 mg | 1 | PA; QL (1 EA per 1 day) |
| NUVIGIL ORAL TABLET 150 MG, 200 MG, 250 MG, 50 MG | E | |
| PROVIGIL ORAL TABLET 100 MG, 200 MG | E | |
| QUVIVIQ ORAL TABLET 25 MG, 50 MG | E | |
| ramelteon oral tablet 8 mg | 1 | QL (1 EA per 1 day) |
| RESTORIL ORAL CAPSULE 15 MG, 22.5 MG, 30 MG, 7.5 MG | E | |
| sodium oxybate oral solution 500 mg/ml | 4 | PA; SP; QL (18 ML per 1 day) |
| SUNOSI ORAL TABLET 150 MG, 75 MG | 2 | PA; QL (1 EA per 1 day) |
| tasimelteon oral capsule 20 mg | 4 | PA; SP; QL (1 EA per 1 day) |
| temazepam oral capsule 15 mg, 22.5 mg, 30 mg, 7.5 mg | 1 | QL (1 EA per 1 day) |
| WAKIX ORAL TABLET 17.8 MG, 4.45 MG | 4 | PA; SP; QL (2 EA per 1 day) |
| XYREM ORAL SOLUTION 500 MG/ML | E | |
| XYWAV ORAL SOLUTION 500 MG/ML | 4 | PA; SP; QL (18 ML per 1 day) |
| zaleplon oral capsule 10 mg | 1 | QL (2 EA per 1 day) |
| zaleplon oral capsule 5 mg | 1 | QL (1 EA per 1 day) |
| zolpidem tartrate er oral tablet extended release 12.5 mg, 6.25 mg | 1 | QL (1 EA per 1 day) |
| ZOLPIDEM TARTRATE ORAL CAPSULE 7.5 MG | E | |
| zolpidem tartrate oral tablet 10 mg, 5 mg | 1 | QL (1 EA per 1 day) |

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