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Medicare Plus BlueSM Group PPO

2023 UAW Trust Comprehensive Formulary

(List of Covered Drugs)

PLEASE READ: THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN THIS PLAN.

This formulary was updated on December 1, 2023. For more recent information or other questions, please contact us, **Medicare Plus Blue Group Customer Service**, at 1-888-322-5616 or, for TTY users 711, Monday through Friday, 8 a.m. to 7 p.m. Eastern time or visit www.bcbsm.com/medicare.

- **Important message about what you pay for vaccines** – Our plan covers most Part D vaccines at no cost to you. Call Customer Service for more information.
- **Important message about what you pay for insulin** – You won't pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on.



When visiting your doctor(s), please bring your personal drug list and this 2023 Blue Cross Drug List with you.

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Formulary 23083, Version 19
www.bcbsm.com/medicare



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Advantage Plans

Note to existing members:

When this drug list (formulary) refers to "we," "us," or "our," it means Blue Cross Blue Shield of Michigan. When it refers to "plan" or "our plan," it means **Medicare Plus Blue Group PPO**.

This document includes a list of the drugs (formulary) for our plan which is current as of December 1, 2023. For an updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2024, and from time to time during the year.

What is the Medicare Plus Blue Group PPO UAW Trust Comprehensive Formulary?

A formulary is a list of covered drugs selected by **Medicare Plus Blue Group PPO** in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. **Medicare Plus Blue Group PPO** will generally cover the drugs listed in our formulary as long as the drug is medically necessary, the prescription is filled at a **Medicare Plus Blue Group PPO** network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **New generic drugs.** We may immediately remove a brand-name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost-sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand-name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand-name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand-name drug for you. The notice we provide you will also include information on how to request an exception, and you can find information in the section below titled "How do I request an exception to the **Medicare Plus Blue Group PPO UAW Trust Comprehensive Formulary?"**
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will

immediately remove the drug from our formulary and provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand-name drug currently on the formulary; or add new restrictions to the brand-name drug or move it to a different cost-sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, add prior authorization, or quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 31-day supply of the drug.

- If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand-name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "How do I request an exception to the **Medicare Plus Blue Group PPO UAW Trust Comprehensive Formulary?"**

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2023 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2023 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed formulary is current as of December 1, 2023. To get updated information about the drugs covered by **Medicare Plus Blue Group PPO**, please contact us. Our contact information appears on the front and back cover pages. In the event of any CMS approved, mid-year non-maintenance formulary changes, you will be notified.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, "Cardiovascular Agents." If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 83. The Index provides an alphabetical list of all of the drugs included in this document. Both brand-name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Medicare Plus Blue Group PPO covers both brand-name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand-name drug. Generally, generic drugs cost less than brand-name drugs.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization: Medicare Plus Blue**
Group PPO requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval from **Medicare Plus Blue Group PPO** before you fill your prescriptions. If you don't get approval, **Medicare Plus Blue Group PPO** may not cover the drug.
- **Quantity Limits:** For certain drugs, **Medicare Plus Blue Group PPO** limits the amount of the drug that **Medicare Plus Blue Group PPO** will cover. For example, **Medicare Plus Blue Group PPO** provides 31 tablets per prescription for pioglitazone.
- **Step Therapy:** In some cases, **Medicare Plus Blue Group PPO** requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, **Medicare Plus Blue Group PPO** may not cover Drug B unless you try Drug A first. If Drug A does not work for you, **Medicare Plus Blue Group PPO** will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our website. We have posted online a document that explains our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask **Medicare Plus Blue Group PPO** to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to the **Medicare Plus Blue Group PPO UAW Trust Comprehensive** formulary?" on page iii for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Customer Service and ask if your drug is covered.

If you learn that **Medicare Plus Blue Group PPO** does not cover your drug, you have two options:

- You can ask Customer Service for a list of similar drugs that are covered by **Medicare Plus Blue Group PPO**. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by **Medicare Plus Blue Group PPO**.
- You can ask **Medicare Plus Blue Group PPO** to make an exception and cover your drug. See below for information about how to request an exception.

How do I request an exception to the Medicare Plus Blue Group PPO UAW Trust Comprehensive Formulary?

You can ask **Medicare Plus Blue Group PPO** to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered on Tier 3 and you would not be able to ask us to provide the drug at a lower cost-sharing level.
- You can ask us to cover a formulary drug at a lower cost-sharing level. If approved, this would lower the amount you must pay for your drug.

- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, **Medicare Plus Blue Group PPO** limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, **Medicare Plus Blue Group PPO** will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, tier or utilization restriction exception. **When you request a formulary, tier or utilization restriction exception, you should submit a statement from your prescriber or physician supporting your request.** Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan, you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 108 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 31-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 31-day supply of medication. After your first 31-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 108 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 108 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

If you move into (or out of) a long-term care facility, a skilled nursing facility or if you are discharged from a hospital, you will continue to have access to your medications during the transition. If needed, limits on early prescription refills will be waived to assure that your medications are available through a new pharmacy provider when you are moving to or from a long-term care facility. Contact Customer Service if you require assistance in your transition. For more detailed information about our Transition Policy, refer to Chapter 5, Section 5.2 of your *Evidence of Coverage* or visit our website at

www.bcbsm.com/medicare/help/understanding-plans/pharmacy-prescription-drugs/transition.html.

We will send you a letter within three business days of your filling a temporary transition supply, notifying you that this was a temporary supply and explaining your options.

For more information

For more detailed information about your **Medicare Plus Blue Group PPO** prescription drug coverage, please review your *Evidence of Coverage* and other plan materials.

If you have questions about **Medicare Plus Blue Group PPO**, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day, 7 days a week. TTY users should call 1-877-486-2048. Or, visit **www.medicare.gov**.

Medicare Plus Blue Group PPO UAW Trust Comprehensive Formulary

The formulary that begins on the next page provides coverage information about the drugs covered by **Medicare Plus Blue Group PPO**. If you have trouble finding your drug in the list, turn to the Index that begins on page 83.

The first column of the chart lists the drug name. Brand-name drugs are capitalized (e.g., ENTRESTO[®]) and generic drugs are listed in lower-case italics (e.g., pioglitazone).

The information in the Requirements/Limits column tells you if **Medicare Plus Blue Group PPO** has any special requirements for coverage of your drug.

Tier	Standard retail cost sharing (up to a 31-day supply)	Standard retail cost sharing (up to a 90-day supply)*	Mail order cost sharing (up to a 90-day supply)*
Cost-Sharing Tier 1 (Preferred Generic)	\$5	\$15	\$5
Cost-Sharing Tier 2 (Preferred Brand)	\$40	\$120	\$40
Cost-Sharing Tier 3 (Non-Preferred Drug)	\$115	\$345	\$115

Out-of-network pharmacy coverage is limited to certain situations. Consult your *Evidence of Coverage* for details.

*Most pharmacies will fill a 90-day supply of medication. Check with your pharmacist.

Drug Tier	Includes
Cost-Sharing Tier 1 (Preferred Generic)	Most generic drugs
Cost-Sharing Tier 2 (Preferred Brand)	Many common brand-name drugs, called preferred brands, and some higher-cost generic drugs
Cost-Sharing Tier 3 (Non-Preferred Drug)	Non-preferred generic and non-preferred brand-name drugs

Drug Notes Code Definitions

Symbol	Definition
B/D	This prescription drug may be covered under Medicare Part B or D depending on the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.
EX	This prescription drug is not normally covered in a Medicare Prescription Drug Plan. The amount you pay when you fill a prescription for this drug does not count toward your total drug costs (that is, the amount you pay does not help you qualify for catastrophic coverage). In addition, if you are receiving Extra Help to pay for your prescriptions, you will not get any Extra Help to pay for this drug.
NDS	Non-Extended Day Supply. Most specialty and opioid drugs are limited to a 31-day supply through retail and mail.
PA	Prior Authorization. The plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescription. If you don't get approval, we may not cover the drug.
QL	Quantity Limit. For certain drugs, the plan limits the amount of the drug that we will cover.
ST	Step Therapy. In some cases, the plan requires you to first try a certain drug to treat your condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

Drug Name	Drug Tier	Requirements/Limits
Analgesics		
Nonsteroidal Anti-inflammatory Drugs		
<i>celecoxib capsule</i>	1	QL(62 EA per 31 days)
<i>diclofenac potassium tablet 50mg</i>	1	
<i>diclofenac sodium dr</i>	1	
<i>diclofenac sodium er</i>	1	
<i>diclofenac sodium/misoprostol</i>	1	
<i>diclofenac sodium gel 1%</i>	1	QL(1000 GM per 30 days)
<i>diclofenac sodium external solution 1.5%</i>	1	QL(300 ML per 30 days)
<i>diflunisal tablet 500mg</i>	1	
<i>ec-naproxen</i>	1	
<i>etodolac er</i>	1	
<i>etodolac capsule, tablet</i>	1	
<i>flurbiprofen tablet 100mg</i>	1	
<i>ibu</i>	1	
<i>ibuprofen suspension</i>	1	
<i>ibuprofen tablet 400mg, 600mg, 800mg</i>	1	
<i>ketorolac tromethamine injection 15mg/ml, 30mg/ml, 60mg/2ml</i>	1	PA
<i>meloxicam tablet</i>	1	
<i>nabumetone tablet</i>	1	
<i>naproxen sodium tablet 275mg, 550mg</i>	1	
<i>naproxen tablet delayed release</i>	1	
<i>naproxen suspension</i>	1	NDS
<i>naproxen tablet 250mg, 375mg, 500mg</i>	1	
<i>oxaprozin</i>	1	
<i>piroxicam capsule</i>	1	
<i>salsalate tablet</i>	1	
<i>sulindac tablet</i>	1	
Opioid Analgesics, Long-acting		
<i>buprenorphine</i>	1	QL(4 EA per 28 days); PA; NDS
<i>fentanyl</i>	1	QL(15 EA per 30 days); PA; NDS
<i>methadone hcl injection</i>	1	PA; NDS
<i>methadone hcl oral solution 10mg/5ml</i>	1	QL(1860 ML per 31 days); PA; NDS
<i>methadone hcl oral solution 5mg/5ml</i>	1	QL(3720 ML per 31 days); PA; NDS
<i>methadone hcl tablet 5mg</i>	1	QL(248 EA per 31 days); PA; NDS
<i>methadone hcl tablet 10mg</i>	1	QL(372 EA per 31 days); PA; NDS
<i>methadone hydrochloride intensol</i>	1	QL(372 ML per 31 days); PA; NDS
<i>methadone hydrochloride concentrate</i>	1	QL(372 ML per 31 days); PA; NDS
<i>METHADOSE SUGAR-FREE</i>	1	QL(372 ML per 31 days); PA; NDS
<i>METHADOSE CONCENTRATE 10MG/ML</i>	1	QL(372 ML per 31 days); PA; NDS
<i>mitigo</i>	1	B/D; NDS

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You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.

Drug Name	Drug Tier	Requirements/Limits
<i>morphine sulfate er capsule extended release 24 hour 75mg, 90mg</i>	1	QL(124 EA per 31 days); PA; NDS
<i>morphine sulfate er capsule extended release 24 hour 10mg, 20mg, 30mg, 40mg, 45mg, 50mg, 60mg</i>	1	QL(62 EA per 31 days); PA; NDS
<i>morphine sulfate er capsule extended release 24 hour 100mg, 120mg, 60mg, 80mg</i>	1	QL(93 EA per 31 days); PA; NDS
<i>morphine sulfate er tablet extended release 30mg, 60mg</i>	1	QL(124 EA per 31 days); PA; NDS
<i>morphine sulfate er tablet extended release 200mg</i>	1	QL(62 EA per 31 days); PA; NDS
<i>morphine sulfate er tablet extended release 100mg, 15mg</i>	1	QL(93 EA per 31 days); PA; NDS
<i>oxymorphone hydrochloride er tablet extended release 12 hour 30mg</i>	1	QL(124 EA per 31 days); PA; NDS
<i>oxymorphone hydrochloride er tablet extended release 12 hour 10mg, 15mg, 20mg, 5mg, 7.5mg</i>	1	QL(62 EA per 31 days); PA; NDS
<i>oxymorphone hydrochlorideer</i>	1	QL(93 EA per 31 days); PA; NDS
<i>tramadol hcl er tablet extended release 24 hour</i>	1	QL(31 EA per 31 days); NDS
<i>tramadol hydrochloride er</i>	1	QL(31 EA per 31 days); NDS
Opioid Analgesics, Short-acting		
<i>acetaminophen/codeine tablet</i>	1	QL(403 EA per 31 days); NDS
<i>acetaminophen/codeine solution</i>	1	QL(4650 ML per 31 days); NDS
<i>butorphanol tartrate injection</i>	1	NDS
<i>butorphanol tartrate nasal solution</i>	1	QL(5 ML per 30 days); NDS
<i>CODEINE SULFATE TABLET 15MG, 60MG</i>	1	QL(186 EA per 31 days); NDS
<i>codeine sulfate tablet 30mg</i>	1	QL(186 EA per 31 days); NDS
<i>DURAMORPH</i>	1	NDS
<i>endocet tablet 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg</i>	1	QL(372 EA per 31 days); NDS
<i>fentanyl citrate oral transmucosal</i>	1	QL(124 EA per 31 days); PA; NDS
<i>FENTANYL CITRATE INJECTION 500MCG/10ML</i>	1	B/D; NDS
<i>fentanyl citrate injection 1000mcg/20ml, 100mcg/2ml, 2500mcg/50ml, 250mcg/5ml, 50mcg/ml</i>	1	B/D; NDS
<i>hydrocodone bitartrate/acetaminophen solution 325mg/15ml; 7.5mg/15ml</i>	1	QL(5580 ML per 31 days); NDS
<i>hydrocodone bitartrate/acetaminophen tablet 325mg; 10mg, 325mg; 5mg</i>	1	QL(372 EA per 31 days); NDS
<i>hydrocodone bitartrate/acetaminophen tablet 300mg; 10mg, 300mg; 5mg, 300mg; 7.5mg</i>	1	QL(403 EA per 31 days); NDS
<i>hydrocodone/acetaminophen tablet 325mg; 7.5mg</i>	1	QL(372 EA per 31 days); NDS
<i>hydromorphone hcl liquid</i>	1	QL(1550 ML per 31 days); NDS
<i>HYDROMORPHONE HCL INJECTION 1MG/ML, 4MG/ML</i>	1	NDS
<i>hydromorphone hcl injection 10mg/ml</i>	1	NDS
<i>hydromorphone hcl tablet 8mg</i>	1	QL(186 EA per 31 days); NDS
<i>hydromorphone hcl tablet 2mg, 4mg</i>	1	QL(248 EA per 31 days); NDS

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Drug Name	Drug Tier	Requirements/Limits
hydromorphone hydrochloride dosette	1	NDS
HYDROMORPHONE HYDROCHLORIDE INJECTION 1MG/ML, 2MG/ML, 4MG/ML	1	NDS
hydromorphone hydrochloride injection 2mg/ml, 50mg/5ml	1	NDS
MORPHINE SULFATE INJECTION 10MG/ML, 2MG/ML, 4MG/ML, 5MG/ML, 8MG/ML	1	NDS
morphine sulfate injection 0.5mg/ml, 10mg/ml, 1mg/ml, 4mg/ml, 8mg/ml	1	NDS
MORPHINE SULFATE ORAL SOLUTION 20MG/5ML	1	QL(1550 ML per 31 days); NDS
morphine sulfate oral solution 20mg/ml	1	QL(310 ML per 31 days); NDS
morphine sulfate oral solution 10mg/5ml	1	QL(3100 ML per 31 days); NDS
morphine sulfate tablet 30mg	1	QL(186 EA per 31 days); NDS
morphine sulfate tablet 15mg	1	QL(248 EA per 31 days); NDS
nalbuphine hcl injection 10mg/ml, 20mg/ml	1	NDS
oxycodone hcl capsule	1	QL(372 EA per 31 days); NDS
oxycodone hydrochloride concentrate	1	QL(186 ML per 31 days); NDS
oxycodone hydrochloride capsule	1	QL(372 EA per 31 days); NDS
oxycodone hydrochloride solution	1	QL(4030 ML per 31 days); NDS
oxycodone hydrochloride tablet 20mg, 30mg	1	QL(186 EA per 31 days); NDS
oxycodone hydrochloride tablet 15mg	1	QL(248 EA per 31 days); NDS
oxycodone hydrochloride tablet 10mg, 5mg	1	QL(372 EA per 31 days); NDS
oxycodone/acetaminophen tablet 325mg; 10mg, 325mg; 2.5mg, 325mg; 5mg, 325mg; 7.5mg	1	QL(372 EA per 31 days); NDS
oxymorphone hydrochloride	1	QL(186 EA per 31 days); NDS
tramadol hcl tablet	1	QL(248 EA per 31 days); NDS
tramadol hydrochloride/acetaminophen	1	QL(248 EA per 31 days); NDS
Anesthetics		
Local Anesthetics		
lidocaine hcl jelly	1	QL(60 ML per 31 days)
lidocaine hcl injection 0.5%, 1%, 1.5%, 2%, 4%	1	B/D
lidocaine hcl prefilled syringe 2%	1	QL(60 ML per 31 days)
lidocaine hcl external solution 4%	1	
lidocaine hcl mouth/throat solution 4%	1	
lidocaine hydrochloride viscous	1	
lidocaine hydrochloride injection 1%, 2%	1	B/D
lidocaine viscous	1	
lidocaine-prilocaine-cream base cream	1	QL(60 GM per 31 days)
lidocaine/epinephrine injection 1:100000; 1%, 1:100000; 2%, 1:200000; 0.5%, 1:200000; 1.5%, 1:200000; 2%	1	
lidocaine/prilocaine cream	1	QL(60 GM per 31 days)
lidocaine ointment 5%	1	QL(152 GM per 30 days)
lidocaine patch 5%	1	QL(90 EA per 30 days); PA
premium lidocaine	1	QL(152 GM per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>xylocaine dental injection 1:100000; 2%</i>	1	
Anti-Addiction/Substance Abuse Treatment Agents		
Alcohol Deterrents/Anti-craving		
<i>acamprosate calcium dr</i>	1	
<i>disulfiram tablet</i>	1	
<i>naltrexone hcl tablet</i>	1	
VIVITROL	2	NDS
Opioid Dependence		
<i>buprenorphine hcl/naloxone hcl</i>	1	QL(93 EA per 31 days)
<i>buprenorphine hcl injection</i>	1	
<i>buprenorphine hcl tablet sublingual</i>	1	QL(93 EA per 31 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride film 12mg; 3mg</i>	1	QL(62 EA per 31 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride film 2mg; 0.5mg, 4mg; 1mg, 8mg; 2mg</i>	1	QL(93 EA per 31 days)
<i>buprenorphine hydrochloride injection</i>	1	
Opioid Reversal Agents		
<i>naloxone hcl injection 2mg/2ml, 4mg/10ml</i>	1	
<i>naloxone hydrochloride liquid</i>	1	
<i>naloxone hydrochloride injection 0.4mg/ml, 2mg/2ml</i>	1	
NARCAN LIQUID	2	
Smoking Cessation Agents		
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 150mg</i>	1	QL(62 EA per 31 days)
NICOTROL INHALER	3	
NICOTROL NS	3	
<i>varenicline starting month box</i>	1	
<i>varenicline tartrate</i>	1	
Antibacterials		
Aminoglycosides		
<i>amikacin sulfate injection 1gm/4ml, 500mg/2ml</i>	1	
ARIKAYCE	2	QL(235.2 ML per 28 days); PA; NDS
<i>gentamicin sulfate pediatric</i>	1	
<i>gentamicin sulfate/0.9% sodium chloride injection 1.2mg/ml; 0.9%, 1.6mg/ml; 0.9%, 1mg/ml; 0.9%, 2mg/ml; 0.9%</i>	1	
<i>gentamicin sulfate injection 40mg/ml</i>	1	
<i>isotonic gentamicin injection 0.8mg/ml; 0.9%</i>	1	
<i>neomycin sulfate</i>	1	
<i>paromomycin sulfate</i>	1	
<i>streptomycin sulfate injection 1gm</i>	2	NDS
<i>tobramycin sulfate injection</i>	1	
Antibacterials, Other		

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Drug Name	Drug Tier	Requirements/Limits
<i>aztreonam</i>	1	
<i>chloramphenicol sodium succinate</i>	1	
<i>clindamycin hcl capsule 300mg</i>	1	
<i>clindamycin hydrochloride capsule 150mg, 75mg</i>	1	
<i>clindamycin palmitate hcl</i>	1	
<i>clindamycin phosphate in d5w</i>	1	
<i>clindamycin phosphate/dextrose</i>	1	
<i>clindamycin phosphate cream 2%</i>	1	
<i>clindamycin phosphate injection 300mg/2ml, 600mg/4ml, 9000mg/60ml, 900mg/6ml</i>	1	
<i>clindamycin/sodium chloride</i>	1	
<i>colistimethate sodium</i>	1	NDS
<i>daptomycin</i>	1	NDS
<i>linezolid injection</i>	1	
<i>linezolid suspension reconstituted</i>	1	QL(1800 ML per 30 days); NDS
<i>linezolid tablet</i>	1	QL(56 EA per 28 days)
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate tablet 0.5gm, 1gm</i>	1	
<i>metronidazole vaginal</i>	1	
<i>metronidazole cream, gel, lotion, tablet</i>	1	
<i>metronidazole injection 500mg/100ml</i>	1	
<i>nitrofurantoin macrocrystals</i>	1	
<i>nitrofurantoin monohydrate/macrocrys</i>	1	
<i>nitrofurantoin suspension 25mg/5ml</i>	1	NDS
<i>rosadan gel</i>	1	
SYNERCID INJECTION 350MG; 150MG	2	NDS
<i>tigecycline</i>	1	NDS
<i>tinidazole</i>	1	
<i>trimethoprim tablet</i>	1	
VANCOMYCIN HCL INJECTION 0.9%; 1GM/200ML	1	
<i>vancomycin hcl injection 100gm, 10gm</i>	1	
VANCOMYCIN HYDROCHLORIDE/DEXTROSE INJECTION 5%; 1GM/200ML, 5%; 500MG/100ML, 5%; 750MG/150ML	1	
<i>vancomycin hydrochloride capsule 125mg</i>	1	QL(40 EA per 10 days)
<i>vancomycin hydrochloride capsule 250mg</i>	1	QL(80 EA per 10 days)
VANCOMYCIN HYDROCHLORIDE INJECTION 1.25GM, 1000MG/200ML, 250MG, 500MG/100ML, 750MG/150ML	1	
<i>vancomycin hydrochloride injection 1.5gm, 1gm, 500mg, 5gm, 750mg</i>	1	
VANCOMYCIN INJECTION 0.9%; 500MG/100ML, 0.9%; 750MG/150ML	1	
VANDAZOLE	1	

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Drug Name	Drug Tier	Requirements/Limits
XIFAXAN TABLET 200MG	2	QL(9 EA per 30 days); PA; NDS
XIFAXAN TABLET 550MG	2	QL(93 EA per 31 days); PA; NDS
Beta-lactam, Cephalosporins		
cefaclor capsule	1	
cefaclor suspension reconstituted 125mg/5ml, 250mg/5ml	1	
cefadroxil	1	
cefazolin sodium/dextrose injection 1gm; 4%, 2gm; 3%	1	
cefazolin sodium injection 100gm, 10gm, 1gm/50ml; 4%, 1gm, 300gm, 500mg	1	
CEFAZOLIN INJECTION 2GM, 3GM	1	
cefazolin injection 2gm/100ml; 4%, 2gm	1	
cefdinir	1	
cefepime	1	
cefepime hydrochloride injection 1gm, 2gm	1	
cefepime/dextrose	1	
cefixime	1	
cefotaxime sodium injection 1gm, 2gm	3	
cefoxitin sodium	1	
cefpodoxime proxetil	1	
ceftazidime	1	
ceftazidime/dextrose	1	
ceftazidime injection 1gm, 2gm, 6gm	1	
ceftriaxone in iso-osmotic dextrose	1	
ceftriaxone sodium injection	1	
ceftriaxone/dextrose	1	
cefuroxime axetil tablet	1	
cefuroxime sodium injection 1.5gm, 7.5gm, 750mg	1	
cephalexin capsule 250mg, 500mg	1	
cephalexin suspension reconstituted, tablet	1	
tazicef injection 1gm, 2gm, 6gm	1	
TEFLARO	2	NDS
Beta-lactam, Penicillins		
amoxicillin/clavulanate potassium	1	
amoxicillin/clavulanate potassium er	1	
amoxicillin capsule, suspension reconstituted, tablet	1	
amoxicillin tablet chewable 125mg, 250mg	1	
ampicillin sodium injection	1	
ampicillin-sulbactam	1	
ampicillin/sulbactam injection 2gm; 1gm	1	
ampicillin capsule 500mg	1	
BICILLIN C-R INJECTION 300000UNIT/ML; 300000UNIT/ML, 900000UNIT/2ML; 300000UNIT/2ML	2	

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BICILLIN L-A INJECTION 1200000UNIT/2ML, 2400000UNIT/4ML, 600000UNIT/ML	2	
<i>dicloxacillin sodium</i>	1	
<i>nafcillin</i>	1	
<i>nafcillin sodium injection 10gm, 1gm, 2gm</i>	1	
OXACILLIN SODIUM INJECTION 1.5GM/50ML; 1GM/50ML	1	
OXACILLIN SODIUM INJECTION 300MG/50ML; 2GM/50ML	1	NDS
<i>oxacillin sodium injection 10gm, 1gm, 2gm</i>	1	
PENICILLIN G POTASSIUM IN ISO-OSMOTIC DEXTROSE	2	
<i>penicillin g potassium injection 20000000unit, 5000000unit</i>	1	
<i>penicillin g procaine</i>	1	
<i>penicillin g sodium</i>	1	
<i>penicillin v potassium</i>	1	
<i>piperacillin sodium/tazobactam sodium</i>	1	
Carbapenems		
<i>ertapenem</i>	1	
<i>imipenem/cilastatin</i>	1	
<i>meropenem</i>	1	
<i>meropenem/sodium chloride</i>	1	
Macrolides		
<i>azithromycin suspension reconstituted, tablet</i>	1	
<i>azithromycin injection 500mg</i>	1	
<i>clarithromycin er</i>	1	
<i>clarithromycin suspension reconstituted, tablet</i>	1	
DIFICID SUSPENSION RECONSTITUTED	2	QL(136 ML per 10 days); NDS
DIFICID TABLET	2	QL(20 EA per 10 days); NDS
<i>erythrocin lactobionate injection 500mg</i>	2	
<i>erythromycin base tablet 250mg</i>	1	
<i>erythromycin dr</i>	1	
<i>erythromycin ethylsuccinate suspension reconstituted 200mg/5ml</i>	1	
<i>erythromycin lactobionate</i>	1	
<i>erythromycin tablet 250mg</i>	1	
Quinolones		
<i>ciprofloxacin hcl tablet 100mg, 750mg</i>	1	
<i>ciprofloxacin hydrochloride tablet 250mg, 500mg</i>	1	
<i>ciprofloxacin i.v.-in d5w</i>	1	
<i>levofloxacin</i>	1	
<i>levofloxacin in d5w</i>	1	
<i>moxifloxacin hydrochloride/sodium hydrochloride</i>	1	

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<i>moxifloxacin hydrochloride injection 400mg/250ml</i>	1	
<i>moxifloxacin hydrochloride tablet 400mg</i>	1	
<i>ofloxacin tablet 400mg</i>	1	
Sulfonamides		
<i>sulfadiazine tablet</i>	1	
<i>sulfamethoxazole/trimethoprim</i>	1	
<i>sulfamethoxazole/trimethoprim ds</i>	1	
<i>sulfatrim pediatric</i>	1	
Tetracyclines		
<i>demeclerycline hcl tablet</i>	1	
<i>doxy 100</i>	1	
<i>doxycycline hydiate capsule, injection</i>	1	
<i>doxycycline hydiate tablet 100mg, 20mg</i>	1	
<i>doxycycline suspension reconstituted</i>	1	
MINOCIN INJECTION	2	NDS
<i>minocycline hcl capsule 75mg</i>	1	
<i>minocycline hydrochloride capsule 100mg, 50mg</i>	1	
<i>morgodox 1x100mg capsule</i>	1	
<i>morgodox 2x100mg capsule</i>	1	
<i>tetracycline hydrochloride capsule</i>	1	
Anticonvulsants		
Anticonvulsants, Other		
BRIVIACT INJECTION	2	PA
BRIVIACT ORAL SOLUTION	2	QL(600 ML per 30 days); PA
BRIVIACT TABLET	2	QL(62 EA per 31 days); PA
EPIDIOLEX	2	PA
EPRONTIA	3	
<i>felbamate</i>	1	
FINTEPLA	2	QL(360 ML per 30 days); PA
FYCOMPA TABLET	2	QL(31 EA per 31 days)
FYCOMPA SUSPENSION	2	QL(720 ML per 30 days)
<i>lamotrigine er</i>	1	
<i>lamotrigine odt</i>	1	
<i>lamotrigine starter kit/blue</i>	1	
<i>lamotrigine starter kit/green</i>	1	
<i>lamotrigine starter kit/orange</i>	1	
<i>lamotrigine tablet chewable, tablet</i>	1	
<i>levetiracetam er</i>	1	
<i>levetiracetam/sodium chloride</i>	1	
<i>levetiracetam injection, oral solution, tablet</i>	1	
<i>roweepra tablet 500mg</i>	1	
SPRITAM TABLET DISINTEGRATING SOLUBLE 750MG	2	QL(124 EA per 31 days)

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SPRITAM TABLET DISINTEGRATING SOLUBLE 250MG, 500MG	2	QL(62 EA per 31 days)
SPRITAM TABLET DISINTEGRATING SOLUBLE 1000MG	2	QL(93 EA per 31 days)
<i>subvenite</i>	1	
<i>subvenite starter kit/blue</i>	1	
<i>subvenite starter kit/green</i>	1	
<i>subvenite starter kit/orange</i>	1	
<i>topiramate capsule sprinkle, tablet</i>	1	
<i>valproate sodium injection 100mg/ml</i>	1	
<i>valproic acid</i>	1	
XCOPRI TABLET THERAPY PACK 0	2	QL(56 EA per 28 days); PA
XCOPRI TABLET THERAPY PACK 0	2	QL(56 EA per 365 days); PA
XCOPRI TABLET 100MG, 50MG	2	QL(31 EA per 31 days); PA
XCOPRI TABLET 150MG, 200MG	2	QL(62 EA per 31 days); PA
Calcium Channel Modifying Agents		
CELONTIN CAPSULE 300MG	2	
<i>ethosuximide</i>	1	
<i>methsuximide</i>	1	
Gamma-aminobutyric Acid (GABA) Augmenting Agents		
<i>clobazam</i>	1	
DIACOMIT	2	
<i>diazepam rectal gel</i>	1	
<i> gabapentin solution</i>	1	QL(2232 ML per 31 days)
<i> gabapentin capsule</i>	1	QL(279 EA per 31 days)
<i> gabapentin tablet 800mg</i>	1	QL(124 EA per 31 days)
<i> gabapentin tablet 600mg</i>	1	QL(186 EA per 31 days)
NAYZILAM	2	PA
<i> pentobarbital sodium injection</i>	1	PA
<i> phenobarbital sodium injection 130mg/ml, 65mg/ml</i>	1	PA
<i> phenobarbital elixir 20mg/5ml</i>	1	PA
<i> phenobarbital tablet 100mg, 15mg, 16.2mg, 30mg, 32.4mg, 60mg, 64.8mg, 97.2mg</i>	1	PA
<i> primidone tablet</i>	1	
SYMPAZAN	2	QL(62 EA per 31 days); PA
<i> tiagabine hydrochloride</i>	1	
VALTOCO 10 MG DOSE	2	QL(10 EA per 30 days); PA; NDS
VALTOCO 15 MG DOSE	2	QL(10 EA per 30 days); PA; NDS
VALTOCO 20 MG DOSE	2	QL(10 EA per 30 days); PA; NDS
VALTOCO 5 MG DOSE	2	QL(10 EA per 30 days); PA; NDS
<i> vigabatrin tablet</i>	1	PA
<i> vigabatrin packet</i>	1	QL(186 EA per 31 days); PA
<i> vigadronе tablet</i>	1	PA; NDS

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vigadronone packet	1	QL(186 EA per 31 days); PA
ZTALMY	2	PA
Sodium Channel Agents		
APTIOM TABLET 200MG, 400MG	2	QL(31 EA per 31 days)
APTIOM TABLET 600MG, 800MG	2	QL(62 EA per 31 days)
carbamazepine er	1	
carbamazepine tablet chewable, suspension, tablet	1	
dilantin capsule 30mg	2	
epitol	1	
fosphenytoin sodium	1	
lacosamide injection	1	NDS
lacosamide oral solution	1	QL(1200 ML per 30 days)
lacosamide tablet	1	QL(62 EA per 31 days)
oxcarbazepine	1	
PEGANONE TABLET 250MG	2	
phenytoin sodium extended	1	
phenytoin sodium injection	1	
phenytoin tablet chewable, suspension	1	
rufinamide suspension	1	QL(2480 ML per 31 days)
rufinamide tablet 200mg	1	QL(186 EA per 31 days)
rufinamide tablet 400mg	1	QL(248 EA per 31 days)
VIMPAT INJECTION	2	NDS
ZONISADE	3	
zonisamide	1	
Antidementia Agents		
Antidementia Agents, Other		
ergoloid mesylates tablet	1	PA
Cholinesterase Inhibitors		
donepezil hcl tablet disintegrating 5mg	1	QL(31 EA per 31 days)
donepezil hcl tablet disintegrating 10mg	1	QL(62 EA per 31 days)
donepezil hcl tablet 10mg	1	QL(62 EA per 31 days)
donepezil hydrochloride odt tablet disintegrating 5mg	1	QL(31 EA per 31 days)
donepezil hydrochloride odt tablet disintegrating 10mg	1	QL(62 EA per 31 days)
donepezil hydrochloride tablet 5mg	1	QL(31 EA per 31 days)
galantamine hydrobromide er	1	QL(31 EA per 31 days)
galantamine hydrobromide solution	1	QL(186 ML per 31 days)
galantamine hydrobromide tablet	1	QL(62 EA per 31 days)
rivastigmine tartrate	1	QL(62 EA per 31 days)
rivastigmine transdermal system	1	QL(31 EA per 31 days)
N-methyl-D-aspartate (NMDA) Receptor Antagonist		
MEMANTINE HCL TITRATION PAK	2	QL(98 EA per 365 days); PA
memantine hydrochloride er	1	QL(31 EA per 31 days); PA
memantine hydrochloride solution	1	QL(310 ML per 31 days); PA

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<i>memantine hydrochloride tablet 10mg</i>	1	QL(62 EA per 31 days); PA
<i>memantine hydrochloride tablet 5mg</i>	1	QL(93 EA per 31 days); PA
Antidepressants		
<i>Antidepressants, Other</i>		
AUVELITY	2	QL(62 EA per 31 days); ST; NDS
<i>bupropion hcl tablet 100mg</i>	1	
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 200mg</i>	1	QL(62 EA per 31 days)
<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 100mg, 150mg</i>	1	QL(93 EA per 31 days)
<i>bupropion hydrochloride er (xl) tablet extended release 24 hour 300mg</i>	1	QL(31 EA per 31 days)
<i>bupropion hydrochloride er (xl) tablet extended release 24 hour 150mg</i>	1	QL(93 EA per 31 days)
<i>bupropion hydrochloride tablet 75mg</i>	1	
<i>chlordiazepoxide/amitriptyline</i>	1	PA
<i>mirtazapine odt</i>	1	QL(31 EA per 31 days)
<i>mirtazapine tablet</i>	1	QL(31 EA per 31 days)
<i>olanzapine/fluoxetine capsule 25mg; 12mg, 50mg; 12mg, 50mg; 6mg</i>	1	QL(31 EA per 31 days); ST
<i>olanzapine/fluoxetine capsule 25mg; 3mg, 25mg; 6mg</i>	1	QL(93 EA per 31 days); ST
<i>perphenazine/amitriptyline</i>	1	PA
SPRAVATO 56MG DOSE	2	QL(16 EA per 28 days); PA; NDS
SPRAVATO 84MG DOSE	2	QL(24 EA per 28 days); PA; NDS
Monoamine Oxidase Inhibitors		
EMSAM	2	QL(31 EA per 31 days); NDS
MARPLAN	2	
<i>phenelzine sulfate</i>	1	
<i>tranylcypromine sulfate</i>	1	
SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)		
<i>citalopram hydrobromide tablet</i>	1	QL(31 EA per 31 days)
<i>citalopram hydrobromide solution</i>	1	QL(620 ML per 31 days)
DESVENLAFAKINE ER TABLET EXTENDED RELEASE 24 HOUR 100MG, 50MG	2	QL(31 EA per 31 days); ST
<i>desvenlafaxine er tablet extended release 24 hour 100mg, 25mg, 50mg</i>	1	QL(31 EA per 31 days)
<i>escitalopram oxalate tablet</i>	1	QL(31 EA per 31 days)
<i>escitalopram oxalate solution</i>	1	QL(620 ML per 31 days)
FETZIMA	2	QL(31 EA per 31 days); ST
FETZIMA TITRATION PACK	2	QL(56 EA per 365 days); ST
<i>fluoxetine dr</i>	1	QL(4 EA per 28 days); ST
<i>fluoxetine hcl capsule</i>	1	QL(31 EA per 31 days)

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<i>fluoxetine hcl solution</i>	1	QL(620 ML per 31 days)
<i>fluoxetine hydrochloride capsule 10mg</i>	1	QL(31 EA per 31 days)
<i>fluoxetine hydrochloride capsule 40mg</i>	1	QL(62 EA per 31 days)
<i>fluoxetine hydrochloride tablet</i>	1	QL(31 EA per 31 days); ST
<i>fluoxetine hydrochloride solution</i>	1	QL(620 ML per 31 days)
<i>fluvoxamine maleate</i>	1	QL(93 EA per 31 days)
<i>fluvoxamine maleate er</i>	1	QL(62 EA per 31 days); ST
<i>nefazodone hydrochloride</i>	1	
<i>paroxetine hcl er tablet extended release 24 hour 12.5mg, 37.5mg</i>	1	QL(62 EA per 31 days); PA
<i>paroxetine hcl er tablet extended release 24 hour 25mg</i>	1	QL(93 EA per 31 days); PA
<i>paroxetine hcl tablet 40mg</i>	1	QL(47 EA per 31 days); PA
<i>paroxetine hcl tablet 30mg</i>	1	QL(62 EA per 31 days); PA
<i>paroxetine hydrochloride tablet</i>	1	QL(31 EA per 31 days); PA
<i>paroxetine hydrochloride suspension</i>	1	QL(930 ML per 31 days); PA
<i>sertraline hcl concentrate</i>	1	
<i>sertraline hcl tablet 25mg</i>	1	QL(62 EA per 31 days)
<i>sertraline hcl tablet 50mg</i>	1	QL(93 EA per 31 days)
<i>sertraline hydrochloride</i>	1	QL(62 EA per 31 days)
<i>trazodone hydrochloride</i>	1	
TRINTELLIX	2	QL(31 EA per 31 days); ST
VENLAFAKINE BESYLATE ER	3	QL(62 EA per 31 days)
<i>venlafaxine hcl er capsule extended release 24 hour 37.5mg</i>	1	QL(31 EA per 31 days)
<i>venlafaxine hcl er capsule extended release 24 hour 150mg</i>	1	QL(62 EA per 31 days)
<i>venlafaxine hydrochloride</i>	1	QL(93 EA per 31 days)
<i>venlafaxine hydrochloride er capsule extended release 24 hour</i>	1	QL(93 EA per 31 days)
<i>venlafaxine hydrochloride er tablet extended release 24 hour</i>	3	QL(31 EA per 31 days)
VIIBRYD STARTER PACK	2	QL(60 EA per 365 days); ST
<i>vilazodone hydrochloride</i>	1	QL(31 EA per 31 days); ST
Tricyclics		
<i>amitriptyline hcl tablet 100mg, 150mg, 25mg, 75mg</i>	1	
<i>amitriptyline hydrochloride tablet 100mg, 10mg, 50mg</i>	1	
<i>amoxapine</i>	1	PA
<i>clomipramine hydrochloride</i>	1	PA
<i>desipramine hydrochloride</i>	1	PA
<i>doxepin hcl capsule 75mg</i>	1	PA
<i>doxepin hcl concentrate</i>	1	PA
<i>doxepin hydrochloride capsule 100mg, 10mg, 150mg, 25mg, 50mg</i>	1	PA
<i>imipramine hcl tablet 25mg, 50mg</i>	1	PA
<i>imipramine hydrochloride tablet 10mg</i>	1	PA
<i>imipramine pamoate</i>	1	PA

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<i>nortriptyline hcl capsule 25mg, 75mg</i>	1	PA
<i>nortriptyline hcl solution</i>	1	PA
<i>nortriptyline hydrochloride capsule 10mg, 50mg</i>	1	PA
<i>protriptyline hcl</i>	1	PA
<i>trimipramine maleate capsule</i>	1	PA
Antiemetics		
Antiemetics, Other		
<i>compro</i>	1	
<i>meclizine hcl tablet</i>	1	
<i>metoclopramide hcl injection, oral solution</i>	1	
<i>metoclopramide hcl tablet 5mg</i>	1	
<i>metoclopramide hydrochloride injection</i>	1	
<i>metoclopramide hydrochloride oral solution 10mg/10ml</i>	1	
<i>metoclopramide hydrochloride tablet 10mg</i>	1	
<i>perphenazine tablet</i>	1	
<i>prochlorperazine edisylate injection 10mg/2ml, 50mg/10ml</i>	1	
<i>prochlorperazine maleate tablet</i>	1	
<i>prochlorperazine suppository 25mg</i>	1	
<i>promethazine hcl plain</i>	1	PA
<i>promethazine hcl injection</i>	1	PA
<i>promethazine hcl suppository 12.5mg, 25mg</i>	1	PA
<i>promethazine hcl tablet 12.5mg</i>	1	PA
<i>promethazine hydrochloride tablet 25mg, 50mg</i>	1	PA
<i>promethegan</i>	1	PA
<i>scopolamine</i>	1	QL(10 EA per 30 days); PA
Emetogenic Therapy Adjuncts		
<i>aprepitant</i>	1	B/D
<i>dronabinol</i>	1	B/D
<i>fosaprepitant dimeglumine</i>	1	
<i>gransetron hydrochloride tablet</i>	1	B/D
<i>ondansetron hcl solution</i>	1	B/D
<i>ondansetron hcl tablet 24mg</i>	1	B/D
<i>ondansetron hydrochloride injection</i>	1	
<i>ondansetron hydrochloride tablet</i>	1	B/D
<i>ondansetron odt</i>	1	B/D
<i>SANCUSO</i>	2	QL(4 EA per 28 days); NDS
Antifungals		
Antifungals		
<i>ABELCET</i>	2	B/D
<i>AMBISOME</i>	2	B/D; NDS
<i>amphotericin b liposome</i>	1	B/D; NDS
<i>amphotericin b injection</i>	1	B/D
<i>caspofungin acetate injection 70mg</i>	1	

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<i>caspofungin acetate injection 50mg</i>	1	NDS
<i>clotrimazole troche 10mg</i>	1	
CRESEMBA	2	PA; NDS
<i>fluconazole in sodium chloride</i>	1	
<i>fluconazole suspension reconstituted, tablet</i>	1	
<i>flucytosine capsule</i>	1	NDS
<i>griseofulvin microsize</i>	1	
<i>griseofulvin ultramicrosize tablet 125mg, 250mg</i>	1	
<i>itraconazole solution</i>	1	PA
<i>itraconazole capsule</i>	1	QL(124 EA per 31 days); PA
<i>ketoconazole tablet 200mg</i>	1	
<i>micafungin</i>	1	
NOXAFIL SUSPENSION	2	NDS
<i>nystatin suspension 100000unit/ml</i>	1	
<i>nystatin tablet 500000unit</i>	1	
<i>posaconazole dr</i>	1	PA; NDS
<i>posaconazole suspension</i>	1	NDS
<i>terbinafine hcl tablet</i>	1	
<i>terconazole cream</i>	1	
<i>voriconazole injection</i>	1	PA
<i>voriconazole suspension reconstituted</i>	1	QL(600 ML per 30 days); NDS
<i>voriconazole tablet 200mg</i>	1	QL(124 EA per 31 days)
<i>voriconazole tablet 50mg</i>	1	QL(496 EA per 31 days)
Antigout Agents		
Antigout Agents		
<i>allopurinol sodium</i>	1	
<i>allopurinol tablet 100mg, 300mg</i>	1	
<i>colchicine tablet 0.6mg</i>	1	QL(124 EA per 31 days)
<i>febuxostat</i>	1	QL(31 EA per 31 days); ST
KRYSTEXXA	2	PA; NDS
<i>probenecid/colchicine</i>	1	
<i>probenecid tablet</i>	1	
Antimigraine Agents		
Acute		
<i>almotriptan</i>	1	QL(12 EA per 28 days); ST
<i>almotriptan malate</i>	1	QL(12 EA per 28 days); ST
<i>eletriptan hydrobromide</i>	1	QL(12 EA per 28 days); ST
<i>frovatriptan succinate</i>	1	QL(18 EA per 28 days); ST
<i>naratriptan hcl</i>	1	QL(9 EA per 28 days)
<i>rizatriptan benzoate</i>	1	QL(12 EA per 28 days)
<i>rizatriptan benzoate odt</i>	1	QL(12 EA per 28 days)
<i>sumatriptan</i>	1	QL(12 EA per 28 days)
<i>sumatriptan succinate refill</i>	1	QL(4 ML per 28 days)

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<i>sumatriptan succinate injection</i>	1	QL(4 ML per 28 days)
<i>sumatriptan succinate tablet</i>	1	QL(9 EA per 28 days)
<i>zolmitriptan</i>	1	QL(12 EA per 28 days)
<i>zolmitriptan odt</i>	1	QL(12 EA per 28 days)
Ergot Alkaloids		
<i>dihydroergotamine mesylate solution</i>	1	QL(8 ML per 28 days); NDS
<i>ergotamine tartrate/caffeine</i>	1	
Prophylactic		
<i>AIMOVIG</i>	2	QL(1 ML per 28 days); PA
<i>AJOVY</i>	2	QL(1.5 ML per 28 days); PA
<i>EMGALITY INJECTION 120MG/ML</i>	2	QL(2 ML per 28 days); PA
<i>EMGALITY INJECTION 100MG/ML</i>	2	QL(3 ML per 28 days); PA
<i>NURTEC</i>	3	QL(18 EA per 30 days); PA; NDS
<i>timolol maleate tablet 10mg, 20mg, 5mg</i>	1	
Antimyasthenic Agents		
Parasympathomimetics		
<i>pyridostigmine bromide er</i>	1	
<i>pyridostigmine bromide solution</i>	1	NDS
<i>pyridostigmine bromide tablet 60mg</i>	1	
Antimycobacterials		
Antimycobacterials, Other		
<i>dapsone tablet</i>	1	
<i>rifabutin</i>	1	
Antituberculars		
<i>CAPASTAT SULFATE</i>	2	
<i>cycloserine</i>	1	NDS
<i>ethambutol hydrochloride</i>	1	
<i>isoniazid injection, syrup, tablet</i>	1	
<i>paser</i>	2	
<i>PRIFTIN</i>	2	
<i>pyrazinamide tablet</i>	1	
<i>rifampin capsule, injection</i>	1	
<i>SIRTURO</i>	2	NDS
<i>TRECATOR</i>	2	
Antineoplastics		
Alkylating Agents		
<i>BELRAPZO</i>	2	PA; NDS
<i>BENDAMUSTINE HYDROCHLORIDE INJECTION 100MG/4ML</i>	2	PA
<i>bendamustine hydrochloride injection 100mg, 25mg</i>	1	PA; NDS
<i>BENDEKA</i>	2	PA; NDS
<i>busulfan</i>	1	NDS

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Drug Name	Drug Tier	Requirements/Limits
<i>carboplatin injection 150mg/15ml, 450mg/45ml, 50mg/5ml, 600mg/60ml</i>	1	
<i>carmustine</i>	1	NDS
<i>cisplatin injection 100mg/100ml, 200mg/200ml, 50mg/50ml</i>	1	
CYCLOPHOSPHAMIDE MONOHYDRATE INJECTION	2	NDS
<i>cyclophosphamide capsule</i>	1	B/D
CYCLOPHOSPHAMIDE INJECTION 500MG/ML	1	NDS
CYCLOPHOSPHAMIDE INJECTION 2GM/10ML	2	
CYCLOPHOSPHAMIDE INJECTION 1GM/5ML, 500MG/2.5ML	2	NDS
<i>cyclophosphamide injection 1gm, 500mg</i>	1	
<i>cyclophosphamide injection 2gm</i>	1	NDS
CYCLOPHOSPHAMIDE TABLET 50MG	2	B/D
<i>cyclophosphamide tablet 25mg</i>	2	B/D
<i>dacarbazine injection 100mg, 200mg</i>	1	
GLEOSTINE CAPSULE 10MG, 40MG	2	
GLEOSTINE CAPSULE 100MG	2	NDS
IFOSFAMIDE INJECTION 3GM	1	
<i>ifosfamide injection 1gm/20ml, 1gm, 3gm/60ml</i>	1	
LEUKERAN	2	NDS
MATULANE	2	NDS
<i>melphalan hydrochloride</i>	1	
<i>oxaliplatin</i>	1	
<i>paraplatin injection 1000mg/100ml, 450mg/45ml, 50mg/5ml</i>	1	
TEMODAR INJECTION	2	NDS
<i>thiotepa injection 100mg, 15mg</i>	1	NDS
TREANDA INJECTION 100MG, 25MG	2	PA; NDS
VALCHLOR	2	PA; NDS
VIVIMUSTA	2	PA; NDS
YONDELIS	2	PA; NDS
ZANOSAR	2	
ZEPZELCA	2	PA; NDS
Antiandrogens		
<i>abiraterone acetate tablet 250mg</i>	1	QL(124 EA per 31 days); PA
<i>abiraterone acetate tablet 500mg</i>	1	QL(62 EA per 31 days); PA; NDS
<i>bicalutamide</i>	1	
ERLEADA TABLET 60MG	2	QL(120 EA per 30 days); PA; NDS
ERLEADA TABLET 240MG	2	QL(30 EA per 30 days); PA; NDS
<i>flutamide</i>	1	
<i>nilutamide</i>	1	NDS
NUBEQA	2	QL(124 EA per 31 days); PA; NDS
XTANDI CAPSULE	2	QL(124 EA per 31 days); PA; NDS
XTANDI TABLET 40MG	2	QL(124 EA per 31 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
XTANDI TABLET 80MG	2	QL(62 EA per 31 days); PA; NDS
YONSA	2	QL(124 EA per 31 days); PA; NDS
Antiangiogenic Agents		
FOTIVDA	2	QL(21 EA per 28 days); PA; NDS
<i>lenalidomide</i>	1	QL(28 EA per 28 days); PA; NDS
POMALYST	2	QL(21 EA per 28 days); PA; NDS
QINLOCK	2	QL(93 EA per 31 days); PA; NDS
REVLIMID	2	QL(28 EA per 28 days); PA; NDS
TABRECTA	2	QL(124 EA per 31 days); PA; NDS
THALOMID CAPSULE 100MG, 200MG, 50MG	2	QL(31 EA per 31 days); PA; NDS
THALOMID CAPSULE 150MG	2	QL(62 EA per 31 days); PA; NDS
Antiestrogens/Modifiers		
EMCYT	2	
<i>fulvestrant</i>	1	NDS
ORSERDU TABLET 345MG	2	QL(31 EA per 31 days); PA; NDS
ORSERDU TABLET 86MG	2	QL(93 EA per 31 days); PA; NDS
SOLTAMOX	2	NDS
<i>tamoxifen citrate tablet</i>	1	
<i>toremifene citrate</i>	1	NDS
Antimetabolites		
ALIMTA	2	PA; NDS
<i>azacitidine</i>	1	PA; NDS
<i>cladribine</i>	1	B/D; NDS
<i>clofarabine</i>	1	NDS
<i>cytarabine aqueous</i>	1	B/D
<i>cytarabine injection 100mg/ml, 20mg/ml</i>	1	B/D
DROXIA	2	
<i>flouxuridine injection</i>	1	B/D; NDS
<i>fluorouracil injection 1gm/20ml, 2.5gm/50ml, 500mg/10ml, 5gm/100ml</i>	1	B/D
FOLOTYN	2	NDS
<i>gemcitabine hcl</i>	1	
GEMCITABINE HYDROCHLORIDE INJECTION 1GM/10ML, 200MG/2ML, 2GM/20ML	1	
<i>gemcitabine hydrochloride injection 1gm/26.3ml, 200mg/5.26ml, 2gm/52.6ml</i>	1	
<i>hydroxyurea capsule</i>	1	
<i>mercaptopurine tablet</i>	1	
NIPENT	2	NDS
ONUREG	2	QL(14 EA per 28 days); PA; NDS
<i>penetrexed disodium</i>	1	PA; NDS
PEMETREXED INJECTION 100MG/4ML, 100MG, 1GM/40ML, 500MG/20ML, 500MG, 850MG/34ML	3	PA

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<i>pemetrexed injection 1000mg, 100mg, 500mg, 750mg</i>	1	PA; NDS
<i>pemetrexed injection 100mg/4ml, 500mg/20ml</i>	3	PA; NDS
PURIXAN	2	NDS
TABLOID	2	
Antineoplastics, Other		
ABRAXANE	2	PA; NDS
<i>adriamycin injection 10mg, 2mg/ml, 50mg</i>	1	B/D
ADSTILADRIN	2	PA; NDS
AKEEGA	2	QL(62 EA per 31 days); PA; NDS
<i>arsenic trioxide</i>	1	NDS
ASPARLAS	2	NDS
<i>bleomycin sulfate</i>	1	B/D
BORTEZOMIB INJECTION 3.5MG/1.4ML	1	PA
BORTEZOMIB INJECTION 3.5MG	2	PA; NDS
<i>bortezomib injection 1mg, 2.5mg</i>	1	PA
<i>bortezomib injection 3.5mg</i>	1	PA; NDS
<i>dactinomycin</i>	1	NDS
DAUNORUBICIN HYDROCHLORIDE INJECTION 50MG/10ML	1	
<i>daunorubicin hydrochloride injection 20mg/4ml</i>	1	
<i>decitabine</i>	1	NDS
<i>docetaxel injection 160mg/16ml, 160mg/8ml, 20mg/2ml, 20mg/ml, 80mg/4ml, 80mg/8ml</i>	1	
<i>doxorubicin hcl injection 2mg/ml, 50mg</i>	1	B/D
<i>doxorubicin hydrochloride liposomal</i>	1	NDS
<i>doxorubicin hydrochloride injection 10mg, 2mg/ml</i>	1	B/D
ELLENCE	2	
ELREXFIO	2	PA
ELZONRIS	2	PA; NDS
<i>epirubicin hcl injection 200mg/100ml, 50mg/25ml</i>	1	
ERWINASE	2	NDS
<i>fludarabine phosphate injection 50mg/2ml, 50mg</i>	1	NDS
HALAVEN	2	NDS
<i>idarubicin hcl</i>	1	NDS
IDHIFA	2	QL(31 EA per 31 days); PA; NDS
<i>irinotecan hydrochloride</i>	1	
<i>irinotecan injection 500mg/25ml</i>	1	
ISTODAX	2	NDS
IXEMPRA KIT	2	NDS
KIMMTRAK	2	PA; NDS
KRAZATI	2	QL(186 EA per 31 days); PA; NDS
KYPROLIS	2	PA; NDS
LONSURF TABLET 6.14MG; 15MG	2	QL(100 EA per 28 days); PA; NDS

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LONSURF TABLET 8.19MG; 20MG	2	QL(80 EA per 28 days); PA; NDS
LUMAKRAS TABLET 120MG	2	QL(248 EA per 31 days); PA; NDS
LUMAKRAS TABLET 320MG	2	QL(93 EA per 31 days); PA; NDS
MARQIBO	2	
<i>mitomycin injection 20mg, 40mg, 5mg</i>	1	NDS
<i>mitoxantrone hcl injection 2mg/ml</i>	1	
<i>mutamycin</i>	1	NDS
<i>nelarabine</i>	1	NDS
NINLARO	2	QL(3 EA per 28 days); PA; NDS
ONCASPAR	2	NDS
ONIVYDE	2	NDS
<i>paclitaxel</i>	1	
<i>paclitaxel protein-bound particles</i>	2	PA; NDS
PEMAZYRE	2	QL(14 EA per 21 days); PA; NDS
RETEVMO CAPSULE 80MG	2	QL(124 EA per 31 days); PA; NDS
RETEVMO CAPSULE 40MG	2	QL(186 EA per 31 days); PA; NDS
ROMIDEPSIN INJECTION 27.5MG/5.5ML	2	NDS
<i>romidepsin injection 10mg</i>	1	NDS
RYLAZE	2	NDS
SYNRIBO	2	PA; NDS
TALVEY	2	PA
TAZVERIK	2	QL(248 EA per 31 days); PA; NDS
TECVAYLI INJECTION 30MG/3ML	2	PA
TECVAYLI INJECTION 153MG/1.7ML	2	PA; NDS
TICE BCG	2	
TRUSELTIQ	2	PA; NDS
TUKYSA TABLET 150MG	2	QL(124 EA per 31 days); PA; NDS
TUKYSA TABLET 50MG	2	QL(248 EA per 31 days); PA; NDS
UVADEX	2	NDS
<i>valrubicin</i>	1	PA; NDS
VELCADE	2	PA; NDS
<i>vinblastine sulfate injection 1mg/ml</i>	1	B/D
<i>vincasar pfs</i>	1	B/D
<i>vincristine sulfate</i>	1	B/D
<i>vinorelbine tartrate</i>	1	
VONJO	2	QL(124 EA per 31 days); PA; NDS
VYXEOS	2	NDS
XPOVIO 100 MG ONCE WEEKLY	2	QL(20 EA per 28 days); PA; NDS
XPOVIO 40 MG ONCE WEEKLY	2	QL(8 EA per 28 days); PA; NDS
XPOVIO 40 MG TWICE WEEKLY	2	QL(16 EA per 28 days); PA; NDS
XPOVIO 60 MG ONCE WEEKLY	2	QL(12 EA per 28 days); PA; NDS
XPOVIO 60 MG TWICE WEEKLY	2	QL(24 EA per 28 days); PA; NDS
XPOVIO 80 MG ONCE WEEKLY	2	QL(16 EA per 28 days); PA; NDS

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XPOVIO 80 MG TWICE WEEKLY	2	QL(32 EA per 28 days); PA; NDS
XPOVIO TABLET THERAPY PACK 40MG, 60MG	2	QL(4 EA per 28 days); PA; NDS
XPOVIO TABLET THERAPY PACK 40MG, 50MG	2	QL(8 EA per 28 days); PA; NDS
ZALTRAP	2	PA; NDS
ZOLINZA	2	QL(124 EA per 31 days); PA; NDS
Aromatase Inhibitors, 3rd Generation		
<i>anastrozole tablet</i>	1	
<i>exemestane</i>	1	QL(62 EA per 31 days)
<i>letrozole</i>	1	QL(31 EA per 31 days)
Enzyme Inhibitors		
ETOPOPHOS	2	
<i>etoposide injection 100mg/5ml, 1gm/50ml, 500mg/25ml</i>	1	
<i>toposar injection 100mg/5ml, 1gm/50ml, 500mg/25ml</i>	1	
<i>topotecan hcl</i>	1	
Molecular Target Inhibitors		
ALECENSA	2	QL(248 EA per 31 days); PA; NDS
ALIQOPA	2	PA; NDS
ALUNBRIG TABLET THERAPY PACK	2	QL(60 EA per 365 days); PA; NDS
ALUNBRIG TABLET 30MG	2	QL(124 EA per 31 days); PA; NDS
ALUNBRIG TABLET 180MG, 90MG	2	QL(31 EA per 31 days); PA; NDS
AYVAKIT	2	QL(31 EA per 31 days); PA; NDS
BALVERSA	2	PA; NDS
BELEODAQ	2	NDS
BOSULIF TABLET 400MG, 500MG	2	QL(31 EA per 31 days); PA; NDS
BOSULIF TABLET 100MG	2	QL(93 EA per 31 days); PA; NDS
BRAFTOVI CAPSULE 75MG	2	QL(186 EA per 31 days); PA; NDS
BRUKINSA	2	QL(124 EA per 31 days); PA; NDS
CABOMETYX	2	QL(31 EA per 31 days); PA; NDS
CALQUENCE	2	QL(62 EA per 31 days); PA; NDS
CAPRELSA TABLET 300MG	2	QL(31 EA per 31 days); PA; NDS
CAPRELSA TABLET 100MG	2	QL(62 EA per 31 days); PA; NDS
COMETRIQ KIT 0	2	QL(112 EA per 28 days); PA; NDS
COMETRIQ KIT 0	2	QL(56 EA per 28 days); PA; NDS
COMETRIQ KIT 20MG	2	QL(84 EA per 28 days); PA; NDS
COPIKTRA	2	QL(56 EA per 28 days); PA; NDS
COTELLIC	2	QL(63 EA per 28 days); PA; NDS
CYRAMZA	2	NDS
DAURISMO TABLET 100MG	2	QL(31 EA per 31 days); PA; NDS
DAURISMO TABLET 25MG	2	QL(93 EA per 31 days); PA; NDS
ERIVEDGE	2	QL(31 EA per 31 days); PA; NDS
<i>erlotinib hydrochloride tablet 100mg, 150mg</i>	1	QL(31 EA per 31 days); PA; NDS
<i>erlotinib hydrochloride tablet 25mg</i>	1	QL(93 EA per 31 days); PA; NDS
<i>everolimus tablet soluble 2mg, 3mg, 5mg</i>	1	PA; NDS

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everolimus tablet 10mg, 2.5mg, 5mg, 7.5mg	1	QL(31 EA per 31 days); PA; NDS
EXKIVITY	2	QL(124 EA per 31 days); PA; NDS
FARYDAK	2	QL(6 EA per 21 days); PA; NDS
FYARRO	2	PA; NDS
GAVRETO	2	QL(124 EA per 31 days); PA; NDS
gefitinib	1	QL(31 EA per 31 days); PA; NDS
GILOTrif	2	QL(31 EA per 31 days); PA; NDS
IBRANCE	2	QL(21 EA per 28 days); PA; NDS
ICLUSIG	2	QL(31 EA per 31 days); PA; NDS
imatinib mesylate tablet 400mg	1	QL(62 EA per 31 days); PA
imatinib mesylate tablet 100mg	1	QL(93 EA per 31 days); PA
IMBRUvICA SUSPENSION	2	QL(248 ML per 31 days); PA; NDS
IMBRUvICA CAPSULE, TABLET	2	QL(31 EA per 31 days); PA; NDS
INLYTA	2	QL(124 EA per 31 days); PA; NDS
INQOVI	2	QL(5 EA per 28 days); PA; NDS
INREBIC	2	QL(124 EA per 31 days); PA; NDS
IRESSA	2	QL(31 EA per 31 days); PA; NDS
JAKAFI	2	QL(62 EA per 31 days); PA; NDS
JAYPIRCA TABLET 50MG	2	QL(31 EA per 31 days); PA; NDS
JAYPIRCA TABLET 100MG	2	QL(93 EA per 31 days); PA; NDS
JEVTANA	2	NDS
KISQALI FEMARA 200 DOSE	2	QL(49 EA per 28 days); PA; NDS
KISQALI FEMARA 400 DOSE	2	QL(70 EA per 28 days); PA; NDS
KISQALI FEMARA 600 DOSE	2	QL(91 EA per 28 days); PA; NDS
KISQALI TABLET THERAPY PACK 200MG	2	QL(21 EA per 28 days); PA; NDS
KISQALI TABLET THERAPY PACK 200MG	2	QL(42 EA per 28 days); PA; NDS
KISQALI TABLET THERAPY PACK 200MG	2	QL(63 EA per 28 days); PA; NDS
KOSELUGO CAPSULE 25MG	2	QL(124 EA per 31 days); PA; NDS
KOSELUGO CAPSULE 10MG	2	QL(248 EA per 31 days); PA; NDS
lapatinib ditosylate	1	QL(186 EA per 31 days); PA; NDS
LENVIMA 10 MG DAILY DOSE	2	QL(30 EA per 30 days); PA; NDS
LENVIMA 12MG DAILY DOSE	2	QL(90 EA per 30 days); PA; NDS
LENVIMA 14 MG DAILY DOSE	2	QL(60 EA per 30 days); PA; NDS
LENVIMA 18 MG DAILY DOSE	2	QL(90 EA per 30 days); PA; NDS
LENVIMA 20 MG DAILY DOSE	2	QL(60 EA per 30 days); PA; NDS
LENVIMA 24 MG DAILY DOSE	2	QL(90 EA per 30 days); PA; NDS
LENVIMA 4 MG DAILY DOSE	2	QL(30 EA per 30 days); PA; NDS
LENVIMA 8 MG DAILY DOSE	2	QL(60 EA per 30 days); PA; NDS
LORBRENA TABLET 100MG	2	QL(31 EA per 31 days); PA; NDS
LORBRENA TABLET 25MG	2	QL(93 EA per 31 days); PA; NDS
LYNPARZA TABLET	2	QL(124 EA per 31 days); PA; NDS
LYTGOBI TABLET THERAPY PACK 4MG	2	QL(112 EA per 28 days); PA
LYTGOBI TABLET THERAPY PACK 4MG	2	QL(140 EA per 28 days); PA

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LYTGOBI TABLET THERAPY PACK 4MG	2	QL(84 EA per 28 days); PA
MEKINIST SOLUTION RECONSTITUTED	2	QL(1240 ML per 31 days); PA; NDS
MEKINIST TABLET 0.5MG	2	QL(124 EA per 31 days); PA; NDS
MEKINIST TABLET 2MG	2	QL(31 EA per 31 days); PA; NDS
MEKTOVI	2	QL(186 EA per 31 days); PA; NDS
NERLYNX	2	QL(186 EA per 31 days); PA; NDS
ODOMZO	2	QL(31 EA per 31 days); PA; NDS
OJJAARA	2	QL(31 EA per 31 days); PA; NDS
PIQRAY 200MG DAILY DOSE	2	QL(28 EA per 28 days); PA; NDS
PIQRAY 250MG DAILY DOSE	2	QL(56 EA per 28 days); PA; NDS
PIQRAY 300MG DAILY DOSE	2	QL(56 EA per 28 days); PA; NDS
REZLIDHIA	2	QL(62 EA per 31 days); PA; NDS
ROZLYTREK CAPSULE 100MG	2	QL(155 EA per 31 days); PA; NDS
ROZLYTREK CAPSULE 200MG	2	QL(93 EA per 31 days); PA; NDS
RUBRACA	2	QL(124 EA per 31 days); PA; NDS
RYDAPT	2	QL(224 EA per 28 days); PA; NDS
SCEMBLIX TABLET 40MG	2	QL(310 EA per 31 days); PA; NDS
SCEMBLIX TABLET 20MG	2	QL(62 EA per 31 days); PA; NDS
<i>sorafenib</i>	1	QL(124 EA per 31 days); PA; NDS
<i>sorafenib tosylate</i>	1	QL(124 EA per 31 days); PA; NDS
SPRYCEL TABLET 100MG, 140MG, 50MG, 80MG	2	QL(31 EA per 31 days); PA; NDS
SPRYCEL TABLET 70MG	2	QL(62 EA per 31 days); PA; NDS
SPRYCEL TABLET 20MG	2	QL(93 EA per 31 days); PA; NDS
STIVARGA	2	QL(84 EA per 28 days); PA; NDS
<i>sunitinib malate</i>	1	QL(31 EA per 31 days); PA; NDS
TAFINLAR TABLET SOLUBLE	2	QL(930 EA per 31 days); PA; NDS
TAFINLAR CAPSULE 75MG	2	QL(124 EA per 31 days); PA; NDS
TAFINLAR CAPSULE 50MG	2	QL(186 EA per 31 days); PA; NDS
TAGRISSO	2	QL(31 EA per 31 days); PA; NDS
TALZENNA CAPSULE 0.1MG, 0.35MG, 0.5MG, 0.75MG, 1MG	2	QL(31 EA per 31 days); PA; NDS
TALZENNA CAPSULE 0.25MG	2	QL(93 EA per 31 days); PA; NDS
TASIGNA CAPSULE 150MG, 200MG	2	QL(112 EA per 28 days); PA; NDS
TASIGNA CAPSULE 50MG	2	QL(434 EA per 31 days); PA; NDS
<i>temsirolimus</i>	1	NDS
TEPMETKO	2	QL(62 EA per 31 days); PA; NDS
TIBSOVO	2	QL(62 EA per 31 days); PA; NDS
TURALIO CAPSULE 125MG	2	QL(124 EA per 31 days); PA
TURALIO CAPSULE 200MG	2	QL(124 EA per 31 days); PA; NDS
UKONIQ	2	QL(124 EA per 31 days); PA
VANFLYTA	2	QL(62 EA per 31 days); PA; NDS
VENCLEXTA STARTING PACK	2	QL(84 EA per 365 days); PA; NDS
VENCLEXTA TABLET 100MG	2	QL(124 EA per 31 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
VENCLEXTA TABLET 50MG	2	QL(31 EA per 31 days); PA; NDS
VENCLEXTA TABLET 10MG	2	QL(62 EA per 31 days); PA
VERZENIO	2	QL(62 EA per 31 days); PA; NDS
VITRAKVI SOLUTION	2	QL(300 ML per 30 days); PA; NDS
VITRAKVI CAPSULE 25MG	2	QL(186 EA per 31 days); PA; NDS
VITRAKVI CAPSULE 100MG	2	QL(62 EA per 31 days); PA; NDS
VIZIMPRO	2	QL(31 EA per 31 days); PA; NDS
VOTRIENT	2	QL(124 EA per 31 days); PA; NDS
WELIREG	2	QL(93 EA per 31 days); PA; NDS
XALKORI	2	QL(62 EA per 31 days); PA; NDS
XOSPATA	2	QL(93 EA per 31 days); PA; NDS
ZEJULA TABLET	2	QL(31 EA per 31 days); PA; NDS
ZEJULA CAPSULE	2	QL(93 EA per 31 days); PA; NDS
ZELBORAF	2	QL(248 EA per 31 days); PA; NDS
ZYDELIG	2	QL(62 EA per 31 days); PA; NDS
ZYKADIA TABLET	2	QL(155 EA per 31 days); PA; NDS
<i>Monoclonal Antibody/Antibody-Drug Conjugate</i>		
ADCETRIS	2	PA; NDS
ARZERRA	2	NDS
AVASTIN	2	PA; NDS
BAVENCIO	2	PA; NDS
BESPONSA	2	PA; NDS
BLINCYTO	2	B/D; NDS
COLUMVI	2	PA
DANYELZA	2	PA; NDS
DARZALEX	2	PA; NDS
DARZALEX FASPRO	2	PA; NDS
ELAHERE	2	PA
EMPLICITI	2	PA; NDS
ENHERTU	2	PA; NDS
EPKINLY	2	PA; NDS
ERBITUX	2	NDS
GAZYVA	2	NDS
HERCEPTIN HYLECTA	2	PA; NDS
HERCEPTIN INJECTION 150MG	2	PA; NDS
IMFINZI	2	PA; NDS
IMJUDO	2	PA; NDS
JEMPERLI	2	PA; NDS
KADCYLA	2	PA; NDS
<i>kanjinti</i>	2	PA; NDS
KEYTRUDA INJECTION 100MG/4ML	2	PA; NDS
LIBTAYO	2	PA; NDS
LUMOXITI	2	PA; NDS

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LUNSUMIO	2	PA; NDS
MARGENZA	2	PA; NDS
MONJUVI	2	PA; NDS
MYLOTARG	2	PA; NDS
<i>ogivri injection 1.1%; 420mg, 150mg</i>	2	PA; NDS
OPDIVO	2	PA; NDS
OPDUALAG	2	PA; NDS
PADCEV	2	PA; NDS
PERJETA	2	NDS
PHESGO	2	PA; NDS
POLIVY	2	PA; NDS
PORTRAZZA	2	NDS
POTELIGEO	2	PA; NDS
RITUXAN	2	PA; NDS
RYBREVANT	2	PA; NDS
SARCLISA	2	PA; NDS
TECENTRIQ	2	PA; NDS
TIVDAK	2	PA; NDS
TRODELVY	2	PA; NDS
UNITUXIN	2	NDS
VECTIBIX INJECTION 100MG/5ML, 400MG/20ML	2	PA; NDS
YERVOY	2	NDS
ZEVALIN Y-90	2	PA; NDS
ZYNLONTA	2	PA; NDS
ZYNYZ	2	PA; NDS
Retinoids		
<i>bexarotene</i>	1	PA; NDS
PANRETIN	2	PA; NDS
<i>tretinoin capsule 10mg</i>	1	NDS
Treatment Adjuncts		
<i>dexrazoxane</i>	1	NDS
ELITEK	2	NDS
KEPIVANCE	2	NDS
<i>leucovorin calcium tablet</i>	1	
<i>leucovorin calcium injection 100mg/10ml, 100mg, 200mg, 350mg, 500mg/50ml, 500mg, 50mg</i>	1	
<i>levoleucovorin</i>	1	
<i>levoleucovorin calcium</i>	1	
<i>mesna</i>	1	
MESNEX TABLET	2	
VISTOGARD	2	NDS
Antiparasitics		
Anthelmintics		

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Drug Name	Drug Tier	Requirements/Limits
<i>albendazole tablet</i>	1	
<i>emverm</i>	3	QL(6 EA per 30 days); NDS
<i>ivermectin tablet</i>	1	PA
<i>praziquantel tablet</i>	1	
Antiprotozoals		
<i>atovaquone</i>	1	QL(420 ML per 30 days); NDS
<i>atovaquone/proguanil hcl</i>	1	
BENZNIDAZOLE	2	
<i>chloroquine phosphate tablet</i>	1	
COARTEM	2	QL(24 EA per 30 days)
<i>hydroxychloroquine sulfate tablet 200mg</i>	1	
IMPAVIDO	2	NDS
LAMPIT	2	PA
<i>mefloquine hcl</i>	1	
<i>nitazoxanide</i>	1	QL(14 EA per 30 days); NDS
<i>pentamidine isethionate injection</i>	1	
<i>pentamidine isethionate inhalation solution reconstituted</i>	1	QL(1 EA per 28 days); B/D
<i>primaquine phosphate tablet</i>	1	
<i>pyrimethamine tablet</i>	1	NDS
<i>quinine sulfate capsule 324mg</i>	1	QL(42 EA per 30 days); PA
Antiparkinson Agents		
Anticholinergics		
<i>benztropine mesylate tablet</i>	1	PA
<i>trihexyphenidyl hcl solution</i>	1	PA
<i>trihexyphenidyl hydrochloride</i>	1	PA
Antiparkinson Agents, Other		
<i>amantadine hcl capsule, solution, tablet</i>	1	
<i>carbidopa/levodopa/entacapone</i>	1	
<i>entacapone</i>	1	
NOURIANZ	2	PA
ONGENTYS	2	QL(31 EA per 31 days); ST
<i>tolcapone</i>	1	NDS
Dopamine Agonists		
<i>apomorphine hydrochloride injection</i>	1	QL(60 ML per 30 days); PA; NDS
<i>bromocriptine mesylate capsule, tablet</i>	1	
KYNMOBI	2	QL(155 EA per 31 days); PA; NDS
KYNMOBI TITRATION KIT	2	QL(20 EA per 365 days); PA; NDS
NEUPRO	2	QL(31 EA per 31 days)
<i>pramipexole dihydrochloride</i>	1	
<i>pramipexole dihydrochloride er</i>	1	
<i>ropinirole er</i>	1	
<i>ropinirole hcl tablet 0.5mg, 1mg, 2mg, 4mg, 5mg</i>	1	
<i>ropinirole hydrochloride tablet 0.25mg, 3mg</i>	1	

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Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
<i>carbidopa/levodopa</i>	1	
<i>carbidopa/levodopa er</i>	1	
<i>carbidopa/levodopa odt</i>	1	
<i>carbidopa tablet</i>	1	
Monoamine Oxidase B (MAO-B) Inhibitors		
<i>rasagiline mesylate tablet</i>	1	
<i>selegiline hcl capsule, tablet</i>	1	
Antipsychotics		
1st Generation/Typical		
<i>chlorpromazine hcl injection, tablet</i>	1	
<i>chlorpromazine hydrochloride tablet</i>	1	
<i>chlorpromazine hydrochloride concentrate</i>	3	
<i>fluphenazine decanoate injection</i>	1	
<i>fluphenazine hcl concentrate, injection, tablet</i>	1	
<i>fluphenazine hydrochloride elixir</i>	1	
<i>haloperidol decanoate injection</i>	1	
<i>haloperidol lactate</i>	1	
<i>haloperidol concentrate, tablet</i>	1	
<i>loxapine</i>	1	
<i>molindone hydrochloride</i>	1	
<i>pimozide</i>	1	
<i>thioridazine hcl tablet 100mg, 10mg, 25mg, 50mg</i>	1	
<i>thiothixene capsule 10mg, 1mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hcl tablet 10mg, 2mg, 5mg</i>	1	
<i>trifluoperazine hydrochloride tablet 1mg</i>	1	
2nd Generation/Atypical		
<i>ABILIFY MAINTENA</i>	2	QL(1 EA per 28 days); NDS
<i>ariPIPRAZOLE odt</i>	1	QL(62 EA per 31 days); ST
<i>ariPIPRAZOLE tablet</i>	1	QL(31 EA per 31 days)
<i>ariPIPRAZOLE solution</i>	1	QL(930 ML per 31 days)
<i>ARISTADA INITIO</i>	2	QL(2.4 ML per 180 days); NDS
<i>ARISTADA INJECTION 441MG/1.6ML</i>	2	QL(1.6 ML per 28 days); NDS
<i>ARISTADA INJECTION 662MG/2.4ML</i>	2	QL(2.4 ML per 28 days); NDS
<i>ARISTADA INJECTION 882MG/3.2ML</i>	2	QL(3.2 ML per 28 days); NDS
<i>ARISTADA INJECTION 1064MG/3.9ML</i>	2	QL(3.9 ML per 56 days); NDS
<i>asenapine maleate sl</i>	1	QL(62 EA per 31 days)
<i>CAPLYTA</i>	2	QL(31 EA per 31 days); PA
<i>FANAPT</i>	2	QL(62 EA per 31 days); PA
<i>FANAPT TITRATION PACK</i>	2	QL(16 EA per 365 days); PA
<i>INVEGA HAFYERA</i>	2	NDS
<i>INVEGA SUSTENNA INJECTION 39MG/0.25ML</i>	2	

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INVEGA SUSTENNA INJECTION 117MG/0.75ML, 156MG/ML, 234MG/1.5ML, 78MG/0.5ML	2	NDS
INVEGA TRINZA	2	NDS
LATUDA TABLET 120MG, 20MG, 40MG, 60MG	2	QL(31 EA per 31 days)
LATUDA TABLET 80MG	2	QL(62 EA per 31 days)
<i>lurasidone hydrochloride tablet 120mg, 20mg, 40mg, 60mg</i>	1	QL(31 EA per 31 days)
<i>lurasidone hydrochloride tablet 80mg</i>	1	QL(62 EA per 31 days)
NUPLAZID CAPSULE	2	QL(31 EA per 31 days); PA
NUPLAZID TABLET 10MG	2	QL(31 EA per 31 days); PA
<i>olanzapine odt tablet disintegrating 15mg, 20mg</i>	1	QL(31 EA per 31 days); ST
<i>olanzapine odt tablet disintegrating 10mg, 5mg</i>	1	QL(62 EA per 31 days); ST
<i>olanzapine injection</i>	1	QL(31 EA per 31 days)
<i>olanzapine tablet 15mg, 20mg</i>	1	QL(31 EA per 31 days)
<i>olanzapine tablet 10mg, 2.5mg, 5mg, 7.5mg</i>	1	QL(62 EA per 31 days)
<i>paliperidone er tablet extended release 24 hour 1.5mg, 3mg, 9mg</i>	1	QL(31 EA per 31 days); ST
<i>paliperidone er tablet extended release 24 hour 6mg</i>	1	QL(62 EA per 31 days); ST
<i>quetiapine fumarate er tablet extended release 24 hour 150mg, 200mg</i>	1	QL(31 EA per 31 days)
<i>quetiapine fumarate er tablet extended release 24 hour 300mg, 400mg, 50mg</i>	1	QL(62 EA per 31 days)
<i>quetiapine fumarate tablet 300mg, 400mg</i>	1	QL(62 EA per 31 days)
<i>quetiapine fumarate tablet 100mg, 150mg, 200mg, 25mg, 50mg</i>	1	QL(93 EA per 31 days)
REXULTI	2	QL(31 EA per 31 days)
RISPERDAL CONSTA INJECTION 12.5MG, 25MG	2	
RISPERDAL CONSTA INJECTION 37.5MG, 50MG	2	NDS
<i>risperidone odt</i>	1	QL(62 EA per 31 days); ST
<i>risperidone solution</i>	1	QL(248 ML per 31 days)
<i>risperidone tablet</i>	1	QL(62 EA per 31 days)
SECUADO	2	QL(31 EA per 31 days); ST; NDS
VRAYLAR CAPSULE THERAPY PACK	2	QL(14 EA per 365 days); PA
VRAYLAR CAPSULE	2	QL(31 EA per 31 days); PA
<i>ziprasidone hcl</i>	1	QL(62 EA per 31 days)
<i>ziprasidone mesylate</i>	1	QL(62 EA per 31 days)
ZYPREXA RELPREVV	2	NDS
Treatment-Resistant		
<i>clozapine odt tablet disintegrating 100mg, 25mg</i>	1	QL(279 EA per 31 days); ST
<i>clozapine odt tablet disintegrating 12.5mg</i>	1	QL(93 EA per 31 days); ST
<i>clozapine odt tablet disintegrating 200mg</i>	3	QL(124 EA per 31 days); ST
<i>clozapine odt tablet disintegrating 150mg</i>	3	QL(186 EA per 31 days); ST
<i>clozapine tablet 200mg</i>	1	QL(120 EA per 31 days)
<i>clozapine tablet 50mg</i>	1	QL(186 EA per 31 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>clozapine tablet 100mg, 25mg</i>	1	QL(279 EA per 31 days)
VERSACLOZ	2	QL(558 ML per 31 days); ST; NDS
Antispasticity Agents		
Antispasticity Agents		
<i>baclofen tablet</i>	1	
<i>baclofen injection 2000mcg/20ml, 500mcg/ml</i>	1	B/D
<i>baclofen injection 40mg/20ml</i>	1	B/D; NDS
BOTOX	2	PA
<i>dantrolene sodium capsule</i>	1	
<i>tizanidine hcl tablet 2mg</i>	1	
<i>tizanidine hydrochloride tablet 4mg</i>	1	
XEOMIN	2	PA
Antivirals		
Anti-cytomegalovirus (CMV) Agents		
<i>cidofovir</i>	1	
<i>ganciclovir injection 500mg/10ml, 500mg</i>	1	B/D
LIVTENCITY	2	PA; NDS
PREVYMIS INJECTION	2	PA; NDS
PREVYMIS TABLET	2	QL(30 EA per 30 days); PA; NDS
<i>valganciclovir</i>	1	QL(124 EA per 31 days)
<i>valganciclovir hydrochloride</i>	1	QL(1116 ML per 31 days); NDS
ZIRGAN	2	
Anti-hepatitis B (HBV) Agents		
<i>adefovir dipivoxil</i>	1	
BARACLUDE SOLUTION	2	QL(630 ML per 31 days); NDS
<i>entecavir</i>	1	QL(31 EA per 31 days)
EPIVIR HBV SOLUTION	2	
<i>lamivudine tablet 100mg</i>	1	QL(31 EA per 31 days)
VEMLIDY	2	QL(31 EA per 31 days); NDS
Anti-hepatitis C (HCV) Agents		
EPCLUSA	2	QL(28 EA per 28 days); PA; NDS
HARVONI	2	QL(28 EA per 28 days); PA; NDS
MAVYRET PACKET	2	QL(140 EA per 28 days); PA; NDS
MAVYRET TABLET	2	QL(84 EA per 28 days); PA; NDS
<i>ribavirin capsule</i>	1	
VOSEVI	2	QL(28 EA per 28 days); PA; NDS
Anti-HIV Agents, Integrase Inhibitors (INSTI)		
APRETUDE	2	QL(3 ML per 31 days); NDS
BIKTARVY	2	QL(31 EA per 31 days)
CABENUVA	2	NDS
DOVATO	2	QL(31 EA per 31 days)
GENVOYA	2	QL(31 EA per 31 days)
ISENTRESS HD	2	QL(62 EA per 31 days)

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ISENTRESS TABLET	2	QL(124 EA per 31 days)
ISENTRESS TABLET CHEWABLE, PACKET	2	QL(186 EA per 31 days)
JULUCA	2	QL(31 EA per 31 days)
STRIBILD	2	QL(31 EA per 31 days)
TIVICAY	2	QL(62 EA per 31 days)
TIVICAY PD	2	QL(186 EA per 31 days)
VOCABRIA	2	QL(31 EA per 31 days)
Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		
COMPLERA	2	QL(31 EA per 31 days)
DELSTRIGO	2	QL(31 EA per 31 days)
EDURANT	2	QL(62 EA per 31 days)
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	1	QL(31 EA per 31 days)
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	1	QL(31 EA per 31 days)
<i>efavirenz capsule 50mg</i>	1	QL(186 EA per 31 days)
<i>efavirenz capsule 200mg</i>	1	QL(62 EA per 31 days)
<i>efavirenz tablet</i>	1	QL(31 EA per 31 days)
<i>etravirine</i>	1	QL(62 EA per 31 days)
INTELENCE TABLET 25MG	2	QL(186 EA per 31 days)
<i>nevirapine er tablet extended release 24 hour 400mg</i>	1	QL(31 EA per 31 days)
<i>nevirapine er tablet extended release 24 hour 100mg</i>	1	QL(93 EA per 31 days)
<i>nevirapine suspension</i>	1	QL(1240 ML per 31 days)
<i>nevirapine tablet</i>	1	QL(62 EA per 31 days)
PIFELTRO	2	QL(62 EA per 31 days)
Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)		
<i>abacavir sulfate/lamivudine</i>	1	QL(31 EA per 31 days)
<i>abacavir sulfate/lamivudine/zidovudine</i>	1	QL(62 EA per 31 days)
<i>abacavir tablet</i>	1	QL(62 EA per 31 days)
<i>abacavir solution</i>	1	QL(930 ML per 31 days)
CIMDUO	2	QL(31 EA per 31 days)
DESCOVY	2	QL(31 EA per 31 days)
<i>emtricitabine</i>	1	QL(31 EA per 31 days)
<i>emtricitabine/tenofovir disoproxil</i>	1	QL(31 EA per 31 days)
<i>emtricitabine/tenofovir disoproxil fumarate</i>	1	QL(31 EA per 31 days)
EMTRIVA SOLUTION	2	QL(744 ML per 31 days)
<i>lamivudine/zidovudine</i>	1	QL(62 EA per 31 days)
<i>lamivudine solution 10mg/ml</i>	1	QL(930 ML per 31 days)
<i>lamivudine tablet 300mg</i>	1	QL(31 EA per 31 days)
<i>lamivudine tablet 150mg</i>	1	QL(62 EA per 31 days)
ODEFSEY	2	QL(31 EA per 31 days)
RETROVIR IV INFUSION	2	
<i>stavudine capsule</i>	1	QL(62 EA per 31 days)

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TEMIXYS	2	QL(31 EA per 31 days)
<i>tenofovir disoproxil fumarate</i>	1	QL(31 EA per 31 days)
TRIUMEQ	2	QL(31 EA per 31 days)
TRIUMEQ PD	2	QL(186 EA per 31 days)
TRIZIVIR	2	QL(62 EA per 31 days)
VIREAD POWDER	2	
VIREAD TABLET 150MG, 200MG, 250MG	2	QL(31 EA per 31 days)
<i>zidovudine capsule</i>	1	QL(186 EA per 31 days)
<i>zidovudine syrup</i>	1	QL(1860 ML per 31 days)
<i>zidovudine tablet</i>	1	QL(62 EA per 31 days)
Anti-HIV Agents, Other		
FUZEON	2	QL(62 EA per 31 days); NDS
<i>maraviroc</i>	1	QL(124 EA per 31 days)
RUKOBIA	2	QL(62 EA per 31 days)
SELZENTRY SOLUTION	2	QL(1860 ML per 31 days)
SELZENTRY TABLET 25MG, 75MG	2	QL(124 EA per 31 days)
SUNLENCA INJECTION	2	QL(9 ML per 365 days)
SUNLENCA TABLET THERAPY PACK 300MG	2	QL(10 EA per 365 days)
SUNLENCA TABLET THERAPY PACK 300MG	2	QL(8 EA per 365 days)
TROGARZO	2	NDS
TYBOST	2	
Anti-HIV Agents, Protease Inhibitors		
APТИVUS CAPSULE	2	QL(124 EA per 31 days)
APТИVUS SOLUTION	2	QL(310 ML per 31 days)
<i>atazanavir sulfate</i>	1	QL(31 EA per 31 days)
<i>atazanavir capsule 150mg</i>	1	QL(31 EA per 31 days)
<i>atazanavir capsule 200mg</i>	1	QL(62 EA per 31 days)
CRIXIVAN CAPSULE 400MG	2	QL(186 EA per 31 days)
CRIXIVAN CAPSULE 200MG	2	QL(279 EA per 31 days)
<i>darunavir tablet 800mg</i>	1	QL(31 EA per 31 days)
<i>darunavir tablet 600mg</i>	1	QL(62 EA per 31 days)
EVOTAZ	2	QL(31 EA per 31 days)
<i>fosamprenavir calcium</i>	1	QL(124 EA per 31 days)
INVIRASE	2	QL(124 EA per 31 days)
LEXIVA	2	QL(1736 ML per 31 days)
<i>lopinavir/ritonavir solution</i>	1	QL(403 ML per 31 days)
<i>lopinavir/ritonavir tablet 200mg; 50mg</i>	1	QL(124 EA per 31 days)
<i>lopinavir/ritonavir tablet 100mg; 25mg</i>	1	QL(310 EA per 31 days)
NORVIR PACKET	2	QL(372 EA per 31 days)
NORVIR SOLUTION	2	QL(465 ML per 31 days)
PREZCOBIX	2	QL(31 EA per 31 days)
PREZISTA SUSPENSION	2	QL(372 ML per 31 days)
PREZISTA TABLET 150MG	2	QL(186 EA per 31 days)

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PREZISTA TABLET 800MG	2	QL(31 EA per 31 days)
PREZISTA TABLET 75MG	2	QL(310 EA per 31 days)
PREZISTA TABLET 600MG	2	QL(62 EA per 31 days)
REYATAZ	2	QL(248 EA per 31 days)
ritonavir	1	QL(372 EA per 31 days)
SYMTUZA	2	QL(31 EA per 31 days)
VIRACEPT TABLET 625MG	2	QL(124 EA per 31 days)
VIRACEPT TABLET 250MG	2	QL(279 EA per 31 days)
Anti-influenza Agents		
<i>oseltamivir phosphate capsule 30mg</i>	1	QL(168 EA per 365 days)
<i>oseltamivir phosphate capsule 45mg, 75mg</i>	1	QL(84 EA per 365 days)
<i>oseltamivir phosphate suspension reconstituted</i>	1	QL(1080 ML per 365 days)
RELENZA DISKHALER	2	QL(60 EA per 180 days)
<i>rimantadine hydrochloride</i>	1	
XOFLUZA	2	
Antiherpetic Agents		
<i>acyclovir sodium injection 50mg/ml</i>	1	B/D
<i>acyclovir capsule, suspension, tablet</i>	1	
<i>acyclovir ointment</i>	1	QL(30 GM per 30 days)
DENAVIR	2	NDS
<i>famciclovir tablet</i>	1	
<i>penciclovir cream</i>	1	NDS
<i>valacyclovir hcl tablet 1gm</i>	1	QL(124 EA per 31 days)
<i>valacyclovir hydrochloride tablet 500mg</i>	1	QL(62 EA per 31 days)
Anxiolytics		
Anxiolytics, Other		
<i>buspirone hcl tablet 15mg, 30mg</i>	1	
<i>buspirone hydrochloride tablet 10mg, 5mg, 7.5mg</i>	1	
<i>hydroxyzine hcl tablet 50mg</i>	1	PA
<i>hydroxyzine hydrochloride tablet 10mg, 25mg</i>	1	PA
Benzodiazepines		
<i>alprazolam tablet 2mg</i>	1	QL(155 EA per 31 days)
<i>alprazolam tablet 0.25mg, 0.5mg, 1mg</i>	1	QL(93 EA per 31 days)
<i>chlordiazepoxide hcl capsule 10mg, 5mg</i>	1	QL(124 EA per 31 days); PA
<i>chlordiazepoxide hydrochloride capsule 25mg</i>	1	QL(124 EA per 31 days); PA
<i>clonazepam odt tablet disintegrating 2mg</i>	1	QL(310 EA per 31 days)
<i>clonazepam odt tablet disintegrating 0.125mg, 0.25mg, 0.5mg, 1mg</i>	1	QL(93 EA per 31 days)
<i>clonazepam tablet 2mg</i>	1	QL(310 EA per 31 days)
<i>clonazepam tablet 0.5mg, 1mg</i>	1	QL(93 EA per 31 days)
<i>clorazepate dipotassium tablet 3.75mg, 7.5mg</i>	1	QL(124 EA per 31 days); PA
<i>clorazepate dipotassium tablet 15mg</i>	1	QL(186 EA per 31 days); PA
<i>diazepam intensol</i>	1	QL(248 ML per 31 days); PA

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Drug Name	Drug Tier	Requirements/Limits
<i>diazepam tablet</i>	1	QL(124 EA per 31 days); PA
<i>diazepam oral solution</i>	1	QL(1240 ML per 31 days); PA
<i>diazepam concentrate</i>	1	QL(248 ML per 31 days); PA
<i>diazepam injection 50mg/10ml, 5mg/ml</i>	1	PA
<i>lorazepam intensol</i>	1	QL(155 ML per 31 days); PA
LORAZEPAM INJECTION 4MG/ML	1	PA
<i>lorazepam injection 2mg/ml, 4mg/ml</i>	1	PA
<i>lorazepam tablet 2mg</i>	1	QL(155 EA per 31 days); PA
<i>lorazepam tablet 0.5mg, 1mg</i>	1	QL(93 EA per 31 days); PA
<i>oxazepam</i>	1	QL(124 EA per 31 days); PA
Bipolar Agents		
Mood Stabilizers		
<i>divalproex sodium dr</i>	1	
<i>divalproex sodium er</i>	1	
<i>divalproex sodium capsule delayed release sprinkle</i>	1	
EQUETRO	2	
LITHIUM	1	
<i>lithium carbonate er</i>	1	
<i>lithium carbonate capsule, tablet</i>	1	
Blood Glucose Regulators		
Antidiabetic Agents		
<i>acarbose tablet 50mg</i>	1	QL(186 EA per 31 days)
<i>acarbose tablet 25mg</i>	1	QL(372 EA per 31 days)
<i>acarbose tablet 100mg</i>	1	QL(93 EA per 31 days)
BYDUREON BCISE	2	QL(3.4 ML per 28 days)
BYDUREON PEN	2	QL(4 EA per 28 days)
BYETTA INJECTION 5MCG/0.02ML	2	QL(1.2 ML per 30 days)
BYETTA INJECTION 10MCG/0.04ML	2	QL(2.4 ML per 30 days)
<i>glimepiride tablet 2mg</i>	1	QL(124 EA per 31 days)
<i>glimepiride tablet 1mg</i>	1	QL(248 EA per 31 days)
<i>glimepiride tablet 4mg</i>	1	QL(62 EA per 31 days)
<i>glipizide er tablet extended release 24 hour 5mg</i>	1	QL(124 EA per 31 days)
<i>glipizide er tablet extended release 24 hour 2.5mg</i>	1	QL(248 EA per 31 days)
<i>glipizide er tablet extended release 24 hour 10mg</i>	1	QL(62 EA per 31 days)
<i>glipizide xl tablet extended release 24 hour 5mg</i>	1	QL(124 EA per 31 days)
<i>glipizide xl tablet extended release 24 hour 2.5mg</i>	1	QL(248 EA per 31 days)
<i>glipizide xl tablet extended release 24 hour 10mg</i>	1	QL(62 EA per 31 days)
<i>glipizide/metformin hydrochloride tablet 2.5mg; 500mg, 5mg; 500mg</i>	1	QL(124 EA per 31 days)
<i>glipizide/metformin hydrochloride tablet 2.5mg; 250mg</i>	1	QL(248 EA per 31 days)
<i>glipizide tablet 10mg</i>	1	QL(124 EA per 31 days)
<i>glipizide tablet 5mg</i>	1	QL(248 EA per 31 days)
<i>glyburide micronized tablet 3mg</i>	1	QL(124 EA per 31 days)

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glyburide micronized tablet 1.5mg	1	QL(248 EA per 31 days)
glyburide micronized tablet 6mg	1	QL(62 EA per 31 days)
glyburide/metformin hydrochloride tablet 2.5mg; 500mg, 5mg; 500mg	1	QL(124 EA per 31 days)
glyburide/metformin hydrochloride tablet 1.25mg; 250mg	1	QL(248 EA per 31 days)
glyburide tablet 5mg	1	QL(124 EA per 31 days)
glyburide tablet 2.5mg	1	QL(248 EA per 31 days)
glyburide tablet 1.25mg	1	QL(496 EA per 31 days)
GLYXAMBI	2	QL(31 EA per 31 days)
INVOKAMET	2	QL(62 EA per 31 days)
INVOKAMET XR	2	QL(62 EA per 31 days)
INVOKANA	2	QL(31 EA per 31 days)
JANUMET	2	QL(62 EA per 31 days)
JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 100MG, 500MG; 50MG	2	QL(31 EA per 31 days)
JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 50MG	2	QL(62 EA per 31 days)
JANUVIA	2	QL(31 EA per 31 days)
JARDIANCE	2	QL(31 EA per 31 days)
JENTADUETO	2	QL(62 EA per 31 days)
JENTADUETO XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 1000MG	2	QL(31 EA per 31 days)
JENTADUETO XR TABLET EXTENDED RELEASE 24 HOUR 2.5MG; 1000MG	2	QL(62 EA per 31 days)
KOMBIGLYZE XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 5MG, 500MG; 5MG	2	QL(31 EA per 31 days); ST
KOMBIGLYZE XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 2.5MG	2	QL(62 EA per 31 days); ST
metformin hydrochloride er tablet extended release 24 hour 500mg	1	QL(124 EA per 31 days)
metformin hydrochloride er tablet extended release 24 hour 750mg	1	QL(62 EA per 31 days)
metformin hydrochloride solution	1	QL(791 ML per 31 days)
metformin hydrochloride tablet 500mg	1	QL(155 EA per 31 days)
metformin hydrochloride tablet 1000mg	1	QL(78 EA per 31 days)
metformin hydrochloride tablet 850mg	1	QL(93 EA per 31 days)
miglitol tablet 50mg	1	QL(186 EA per 31 days)
miglitol tablet 25mg	1	QL(372 EA per 31 days)
miglitol tablet 100mg	1	QL(93 EA per 31 days)
MOUNJARO	2	QL(2 ML per 28 days)
nateglinide tablet 60mg	1	QL(186 EA per 31 days)
nateglinide tablet 120mg	1	QL(93 EA per 31 days)
NESINA	2	QL(31 EA per 31 days); ST

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Drug Name	Drug Tier	Requirements/Limits
ONGLYZA	2	QL(31 EA per 31 days); ST
OSENI	2	QL(31 EA per 31 days)
OZEMPIC INJECTION 2MG/1.5ML	2	QL(1.5 ML per 28 days)
OZEMPIC INJECTION 2MG/1.5ML, 2MG/3ML, 5.5MG/ML; 14MG/ML; 8MG/3ML	2	QL(3 ML per 28 days)
OZEMPIC INJECTION 4MG/3ML	2	QL(6 ML per 28 days)
<i>pioglitazone hcl-glimepiride</i>	1	QL(31 EA per 31 days)
<i>pioglitazone hcl/metformin hcl</i>	1	QL(93 EA per 31 days)
<i>pioglitazone hcl tablet 45mg</i>	1	QL(31 EA per 31 days)
<i>pioglitazone hydrochloride tablet 15mg, 30mg</i>	1	QL(31 EA per 31 days)
<i>repaglinide tablet 2mg</i>	1	QL(248 EA per 31 days)
<i>repaglinide tablet 1mg</i>	1	QL(496 EA per 31 days)
<i>repaglinide tablet 0.5mg</i>	1	QL(992 EA per 31 days)
RYBELSUS	2	QL(31 EA per 31 days)
<i>saxagliptin hydrochloride</i>	1	QL(31 EA per 31 days)
<i>saxagliptin hydrochloride/metformin hydrochloride er tablet extended release 24 hour 1000mg; 5mg, 500mg; 5mg</i>	1	QL(31 EA per 31 days)
<i>saxagliptin hydrochloride/metformin hydrochloride er tablet extended release 24 hour 1000mg; 2.5mg</i>	1	QL(62 EA per 31 days)
SOLIQUA 100/33	2	QL(15 ML per 25 days)
SYMLINPEN 120	2	QL(10.8 ML per 30 days); NDS
SYMLINPEN 60	2	QL(6 ML per 30 days); NDS
SYNJARDY	2	QL(62 EA per 31 days)
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 25MG; 1000MG	2	QL(31 EA per 31 days)
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 1000MG, 12.5MG; 1000MG, 5MG; 1000MG	2	QL(62 EA per 31 days)
TRADJENTA	2	QL(31 EA per 31 days)
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 5MG; 1000MG, 25MG; 5MG; 1000MG	2	QL(31 EA per 31 days)
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 12.5MG; 2.5MG; 1000MG, 5MG; 2.5MG; 1000MG	2	QL(62 EA per 31 days)
TRULICITY	2	QL(2 ML per 28 days)
VICTOZA	2	QL(9 ML per 30 days)
XULTOPHY 100/3.6	2	QL(15 ML per 30 days)
Glycemic Agents		
BAQSIMI ONE PACK	2	
BAQSIMI TWO PACK	2	
<i>diazoxide suspension</i>	1	
GLUCAGEN HYPOKIT	2	
<i>glucagon emergency kit</i>	2	
<i>glucagon emergency kit for low blood sugar</i>	2	
GVOKE HYPOOPEN 1-PACK	2	

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GVOKE HYPOOPEN 2-PACK	2	
GVOKE KIT	2	
GVOKE PFS	2	
Insulins		
APIDRA	2	ST
APIDRA SOLOSTAR	2	ST
HUMALOG	1	
HUMALOG JUNIOR KWIKPEN	1	
HUMALOG KWIKPEN	1	
HUMALOG MIX 50/50	1	
HUMALOG MIX 50/50 KWIKPEN	1	
HUMALOG MIX 75/25	1	
HUMALOG MIX 75/25 KWIKPEN	1	
HUMULIN 70/30	1	
HUMULIN 70/30 KWIKPEN	1	
HUMULIN N	1	
HUMULIN N KWIKPEN	1	
HUMULIN R	1	
HUMULIN R U-500 (CONCENTRATED)	1	
HUMULIN R U-500 KWIKPEN	1	
LANTUS	2	
LANTUS SOLOSTAR	2	
LEVEMIR	2	
LEVEMIR FLEXPEN	2	
LEVEMIR FLEXTOUCH	2	
NOVOLIN 70/30	2	ST
NOVOLIN 70/30 FLEXPEN	2	ST
NOVOLIN 70/30 FLEXPEN RELION	2	ST
NOVOLIN 70/30 RELION	2	ST
NOVOLIN N	2	ST
NOVOLIN N FLEXPEN	2	ST
NOVOLIN N FLEXPEN RELION	2	ST
NOVOLIN N RELION	2	ST
NOVOLIN R	2	ST
NOVOLIN R FLEXPEN	2	ST
NOVOLIN R FLEXPEN RELION	2	ST
NOVOLIN R RELION	2	ST
NOVOLOG	2	ST
NOVOLOG FLEXPEN	2	ST
NOVOLOG FLEXPEN RELION	2	ST
NOVOLOG MIX 70/30	2	ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN	2	ST
NOVOLOG MIX 70/30 PREFILLED FLEXPEN RELION	2	ST

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Drug Name	Drug Tier	Requirements/Limits
NOVOLOG MIX 70/30 RELION	2	ST
NOVOLOG PENFILL	2	ST
NOVOLOG RELION	2	ST
TOUJEO MAX SOLOSTAR	2	
TOUJEO SOLOSTAR	2	
TRESIBA	2	
TRESIBA FLEXTOUCH	2	
Blood Products and Modifiers		
Anticoagulants		
CEPROTIN	2	NDS
<i>dabigatran etexilate</i>	1	QL(62 EA per 31 days)
ELIQUIS	2	QL(62 EA per 31 days)
ELIQUIS STARTER PACK	2	QL(148 EA per 365 days)
<i>enoxaparin sodium injection 300mg/3ml</i>	1	
<i>enoxaparin sodium injection 40mg/0.4ml</i>	1	QL(11.2 ML per 28 days)
<i>enoxaparin sodium injection 30mg/0.3ml, 60mg/0.6ml</i>	1	QL(16.8 ML per 28 days)
<i>enoxaparin sodium injection 120mg/0.8ml, 80mg/0.8ml</i>	1	QL(22.4 ML per 28 days)
<i>enoxaparin sodium injection 100mg/ml, 150mg/ml</i>	1	QL(28 ML per 28 days)
<i>fondaparinux sodium injection 2.5mg/0.5ml</i>	1	
<i>fondaparinux sodium injection 10mg/0.8ml, 5mg/0.4ml, 7.5mg/0.6ml</i>	1	NDS
HEPARIN SODIUM/D5W INJECTION 5%; 100UNIT/ML, 5%; 25000UNIT/500ML, 5%; 40UNIT/ML	1	
HEPARIN SODIUM/DEXTROSE INJECTION 5%; 25000UNIT/250ML, 5%; 25000UNIT/500ML	1	
HEPARIN SODIUM/NACL 0.45% INJECTION 25000UNIT/250ML; 0.45%	1	
<i>heparin sodium/sodium chloride 0.9% premix injection 1000unit/500ml; 0.9%, 2000unit/l; 0.9%</i>	1	
<i>heparin sodium/sodium chloride 0.9% injection 1000unit/500ml; 0.9%, 2000unit/l; 0.9%</i>	1	
HEPARIN SODIUM/SODIUM CHLORIDE INJECTION 25000UNIT/250ML; 0.45%, 25000UNIT/500ML; 0.45%	1	
HEPARIN SODIUM INJECTION 5000UNIT/0.5ML	1	
<i>heparin sodium injection 10000unit/ml, 20000unit/ml, 5000unit/0.5ml, 5000unit/ml</i>	1	
<i>heparin sodium injection 1000unit/ml</i>	1	B/D
jantoven	1	
PRADAXA CAPSULE	3	QL(62 EA per 31 days); ST
<i>warfarin sodium tablet</i>	1	
XARELTO STARTER PACK	2	QL(102 EA per 365 days)
XARELTO SUSPENSION RECONSTITUTED	2	QL(930 ML per 31 days)
XARELTO TABLET 10MG, 20MG	2	QL(31 EA per 31 days)

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Drug Name	Drug Tier	Requirements/Limits
XARELTO TABLET 15MG, 2.5MG	2	QL(62 EA per 31 days)
Blood Products and Modifiers, Other		
ADAKVEO	2	PA; NDS
<i>anagrelide hydrochloride</i>	1	
ARANESP ALBUMIN FREE INJECTION 10MCG/0.4ML, 25MCG/0.42ML, 25MCG/ML, 300MCG/ML, 40MCG/0.4ML, 40MCG/ML, 60MCG/ML	3	PA
ARANESP ALBUMIN FREE INJECTION 100MCG/0.5ML, 100MCG/ML, 150MCG/0.3ML, 200MCG/0.4ML, 200MCG/ML, 300MCG/0.6ML, 500MCG/ML, 60MCG/0.3ML	3	PA; NDS
<i>fulphila</i>	2	PA; NDS
GRANIX	2	PA; NDS
LEUKINE INJECTION 250MCG	2	PA; NDS
MOZOBIL	2	NDS
MULPLETA	2	QL(7 EA per 7 days); PA; NDS
NEULASTA	2	PA; NDS
NEULASTA ONPRO KIT	2	PA; NDS
NEUPOGEN	2	PA; NDS
<i>nivestym</i>	1	PA; NDS
NPLATE	2	PA; NDS
<i>plerixafor</i>	1	
PROCRT INJECTION 10000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML	2	PA
PROCRT INJECTION 20000UNIT/ML, 40000UNIT/ML	2	PA; NDS
PROMACTA PACKET	2	QL(186 EA per 31 days); PA; NDS
PROMACTA TABLET 12.5MG, 25MG	2	QL(31 EA per 31 days); PA; NDS
PROMACTA TABLET 50MG, 75MG	2	QL(62 EA per 31 days); PA; NDS
PYRUKYND TAPER PACK TABLET THERAPY PACK 0	2	QL(14 EA per 14 days); PA; NDS
PYRUKYND TAPER PACK TABLET THERAPY PACK 5MG	2	QL(7 EA per 7 days); PA; NDS
PYRUKYND TABLET 50MG	2	QL(112 EA per 28 days); PA; NDS
PYRUKYND TABLET 20MG, 5MG	2	QL(56 EA per 28 days); PA; NDS
REBLOZYL	2	PA; NDS
<i>retacrit</i>	2	PA
UDENYCA INJECTION 6MG/0.6ML	2	PA; NDS
<i>udenyca injection 6mg/0.6ml</i>	2	PA; NDS
<i>zarxio</i>	1	PA; NDS
<i>ziextenzo</i>	2	PA; NDS
Hemostasis Agents		
<i>aminocaproic acid solution</i>	1	NDS
<i>aminocaproic acid tablet 500mg</i>	1	
<i>aminocaproic acid tablet 1000mg</i>	1	NDS

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<i>tranexamic acid tablet</i>	1	QL(30 EA per 5 days)
Platelet Modifying Agents		
<i>aspirin/dipyridamole er</i>	1	QL(62 EA per 31 days)
<i>BRILINTA</i>	2	QL(62 EA per 31 days)
<i>CABLIVI</i>	2	PA; NDS
<i>cilostazol</i>	1	
<i>clopidogrel tablet 300mg</i>	1	QL(1 EA per 31 days)
<i>clopidogrel tablet 75mg</i>	1	QL(31 EA per 31 days)
<i>dipyridamole tablet</i>	1	PA
<i>prasugrel</i>	1	QL(31 EA per 31 days)
Cardiovascular Agents		
Alpha-adrenergic Agonists		
<i>clonidine hcl patch weekly</i>	1	QL(4 EA per 28 days)
<i>clonidine hydrochloride tablet</i>	1	
<i>droxidopa capsule 300mg</i>	1	QL(186 EA per 31 days); PA; NDS
<i>droxidopa capsule 100mg, 200mg</i>	1	QL(93 EA per 31 days); PA
<i>methyldopa tablet 250mg, 500mg</i>	1	PA
<i>midodrine hcl</i>	1	
Alpha-adrenergic Blocking Agents		
<i>doxazosin mesylate tablet 1mg, 2mg, 4mg</i>	1	QL(31 EA per 31 days)
<i>doxazosin mesylate tablet 8mg</i>	1	QL(62 EA per 31 days)
<i>phenoxybenzamine hydrochloride</i>	1	NDS
<i>prazosin hydrochloride capsule</i>	1	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil</i>	1	QL(31 EA per 31 days)
<i>irbesartan</i>	1	QL(31 EA per 31 days)
<i>losartan potassium tablet</i>	1	QL(31 EA per 31 days)
<i>olmesartan medoxomil tablet 20mg, 40mg</i>	1	QL(31 EA per 31 days)
<i>olmesartan medoxomil tablet 5mg</i>	1	QL(62 EA per 31 days)
<i>telmisartan</i>	1	QL(31 EA per 31 days)
<i>valsartan tablet 320mg, 40mg, 80mg</i>	1	QL(31 EA per 31 days)
<i>valsartan tablet 160mg</i>	1	QL(62 EA per 31 days)
Angiotensin-converting Enzyme (ACE) Inhibitors		
<i>benazepril hcl tablet 10mg, 40mg, 5mg</i>	1	QL(62 EA per 31 days)
<i>benazepril hydrochloride tablet 20mg</i>	1	QL(62 EA per 31 days)
<i>captopril tablet 100mg</i>	1	QL(124 EA per 31 days)
<i>captopril tablet 50mg</i>	1	QL(279 EA per 31 days)
<i>captopril tablet 12.5mg, 25mg</i>	1	QL(93 EA per 31 days)
<i>enalapril maleate tablet</i>	1	QL(62 EA per 31 days)
<i>fosinopril sodium</i>	1	QL(62 EA per 31 days)
<i>lisinopril tablet</i>	1	QL(62 EA per 31 days)
<i>moexipril hcl</i>	1	QL(62 EA per 31 days)
<i>perindopril erbumine</i>	1	QL(62 EA per 31 days)

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quinapril hcl tablet 20mg, 40mg	1	QL(62 EA per 31 days)
quinapril hydrochloride	1	QL(62 EA per 31 days)
ramipril	1	QL(62 EA per 31 days)
trandolapril tablet 1mg, 2mg	1	QL(31 EA per 31 days)
trandolapril tablet 4mg	1	QL(62 EA per 31 days)
Antiarrhythmics		
adenosine injection 12mg/4ml, 6mg/2ml	1	
amiodarone hcl injection 50mg/ml, 900mg/18ml	1	
amiodarone hydrochloride	1	
dofetilide	1	
flecainide acetate	1	
ibutilide fumarate	1	
lidocaine hcl injection 100mg/5ml, 50mg/5ml	1	B/D
mexiletine hcl	1	
MULTAQ	2	
pacerone tablet 100mg, 200mg, 400mg	1	
procainamide hcl injection	1	
procainamide hydrochloride injection 100mg/ml	1	
propafenone hcl	1	
propafenone hydrochloride er	1	
quinidine gluconate cr	1	
quinidine gluconate er	1	
quinidine sulfate tablet	1	
sorine	1	
sotalol hcl	1	
sotalol hydrochloride (af)	1	
sotalol hydrochloride tablet 120mg, 160mg, 80mg	1	
SOTYLIZE	2	
Beta-adrenergic Blocking Agents		
acebutolol hydrochloride	1	
atenolol tablet	1	
betaxolol hcl tablet 10mg, 20mg	1	
bisoprolol fumarate	1	
carvedilol	1	
labetalol hydrochloride tablet	1	
metoprolol succinate er	1	
metoprolol tartrate injection 5mg/5ml	1	
metoprolol tartrate tablet 100mg, 25mg, 50mg	1	
nadolol tablet 20mg, 40mg, 80mg	1	
nebivolol hydrochloride	1	
pindolol tablet	1	
propranolol hcl er capsule extended release 24 hour 120mg, 160mg	1	

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<i>propranolol hcl solution</i>	1	
<i>propranolol hcl tablet 40mg</i>	1	
<i>propranolol hydrochloride er capsule extended release 24 hour 60mg, 80mg</i>	1	
<i>propranolol hydrochloride tablet 10mg, 20mg, 60mg, 80mg</i>	1	
Calcium Channel Blocking Agents, Dihydropyridines		
<i>amlodipine besylate tablet</i>	1	
<i>felodipine er</i>	1	
<i>isradipine</i>	1	
<i>nicardipine hcl capsule</i>	1	
<i>nifedipine er</i>	1	
<i>nimodipine capsule</i>	1	
<i>nisoldipine er</i>	1	
Calcium Channel Blocking Agents, Nondihydropyridines		
CARDIZEM LA TABLET EXTENDED RELEASE 24 HOUR 120MG	3	
<i>cartia xt</i>	1	
<i>dilt-xr</i>	1	
<i>diltiazem hcl cd</i>	1	
<i>diltiazem hcl er capsule extended release 24 hour 120mg, 180mg, 240mg, 420mg</i>	1	
<i>diltiazem hcl er capsule extended release 12 hour, tablet extended release 24 hour</i>	1	
<i>diltiazem hcl injection 100mg, 125mg/25ml, 50mg/10ml</i>	1	
<i>diltiazem hcl tablet 30mg, 60mg, 90mg</i>	1	
<i>diltiazem hydrochloride er capsule extended release 24 hour</i>	1	
<i>diltiazem hydrochloride er tablet extended release 24 hour 120mg, 180mg, 240mg, 300mg, 360mg</i>	1	
<i>diltiazem hydrochloride injection 25mg/5ml</i>	1	
<i>diltiazem hydrochloride tablet 120mg</i>	1	
<i>matzim la</i>	1	
<i>taztia xt</i>	1	
<i>tiadylt er</i>	1	
VERAPAMIL HCL ER CAPSULE EXTENDED RELEASE 24 HOUR 100MG, 300MG	1	
<i>verapamil hcl er capsule extended release 24 hour 120mg, 180mg, 240mg</i>	1	
<i>verapamil hcl er tablet extended release 120mg, 240mg</i>	1	
VERAPAMIL HCL SR CAPSULE EXTENDED RELEASE 24 HOUR 360MG	1	
<i>verapamil hcl sr capsule extended release 24 hour 120mg, 180mg, 240mg</i>	1	
<i>verapamil hcl tablet 40mg, 80mg</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
VERAPAMIL HYDROCHLORIDE ER CAPSULE EXTENDED RELEASE 24 HOUR 200MG	1	
<i>verapamil hydrochloride er tablet extended release 180mg</i>	1	
<i>verapamil hydrochloride tablet 120mg</i>	1	
Cardiovascular Agents, Other		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>acetazolamide sodium</i>	1	
ALDACTAZIDE TABLET 50MG; 50MG	3	
<i>aliskiren</i>	1	QL(31 EA per 31 days); ST
<i>amiloride/hydrochlorothiazide</i>	1	
<i>amlodipine besylate/atorvastatin calcium</i>	1	QL(31 EA per 31 days)
<i>amlodipine besylate/benazepril hydrochloride</i>	1	QL(31 EA per 31 days)
<i>amlodipine besylate/valsartan</i>	1	QL(31 EA per 31 days)
<i>amlodipine/olmesartan medoxomil</i>	1	QL(31 EA per 31 days)
<i>amlodipine/valsartan/hydrochlorothiazide</i>	1	QL(31 EA per 31 days)
<i>atenolol/chlorthalidone</i>	1	
<i>benazepril hcl/hydrochlorothiazide</i>	1	QL(31 EA per 31 days)
<i>benazepril hydrochloride/hydrochlorothiazide tablet 10mg; 12.5mg, 20mg; 12.5mg, 20mg; 25mg</i>	1	QL(31 EA per 31 days)
<i>bisoprolol fumarate/hydrochlorothiazide</i>	1	
<i>candesartan cilexetil/hydrochlorothiazide</i>	1	QL(31 EA per 31 days)
<i>captopril/hydrochlorothiazide tablet 25mg; 25mg, 50mg; 25mg</i>	1	QL(62 EA per 31 days)
<i>captopril/hydrochlorothiazide tablet 25mg; 15mg, 50mg; 15mg</i>	1	QL(93 EA per 31 days)
CORLANOR SOLUTION	2	QL(465 ML per 31 days); PA
CORLANOR TABLET	2	QL(62 EA per 31 days); PA
DEMSEER	2	NDS
<i>digitek tablet 0.125mg</i>	1	QL(31 EA per 31 days)
<i>digitek tablet 0.25mg</i>	1	QL(31 EA per 31 days); PA
<i>digoxin solution</i>	1	QL(155 ML per 31 days); PA
<i>digoxin tablet 125mcg, 62.5mcg</i>	1	QL(31 EA per 31 days)
<i>digoxin tablet 250mcg</i>	1	QL(31 EA per 31 days); PA
<i>digox tablet 125mcg</i>	1	QL(31 EA per 31 days)
<i>digox tablet 250mcg</i>	1	QL(31 EA per 31 days); PA
<i>enalapril maleate/hydrochlorothiazide tablet 5mg; 12.5mg</i>	1	QL(31 EA per 31 days)
<i>enalapril maleate/hydrochlorothiazide tablet 10mg; 25mg</i>	1	QL(62 EA per 31 days)
ENTRESTO	2	QL(62 EA per 31 days)
<i>fosinopril sodium/hydrochlorothiazide</i>	1	QL(124 EA per 31 days)
<i>irbesartan/hydrochlorothiazide</i>	1	QL(31 EA per 31 days)
<i>isosorbide dinitrate/hydralazine hydrochloride</i>	1	QL(186 EA per 31 days)
KERENDIA	2	QL(30 EA per 30 days); PA

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Drug Name	Drug Tier	Requirements/Limits
lisinopril/hydrochlorothiazide tablet 12.5mg; 20mg	1	QL(124 EA per 31 days)
lisinopril/hydrochlorothiazide tablet 12.5mg; 10mg	1	QL(31 EA per 31 days)
lisinopril/hydrochlorothiazide tablet 25mg; 20mg	1	QL(62 EA per 31 days)
losartan potassium/hydrochlorothiazide tablet 12.5mg; 100mg, 25mg; 100mg	1	QL(31 EA per 31 days)
losartan potassium/hydrochlorothiazide tablet 12.5mg; 50mg	1	QL(62 EA per 31 days)
metoprolol/hydrochlorothiazide	1	
metyrosine	1	NDS
olmesartan medoxomil/amlodipine/hydrochlorothiazide	1	QL(31 EA per 31 days)
olmesartan medoxomil/hydrochlorothiazide	1	QL(31 EA per 31 days)
pentoxifylline er	1	
quinapril/hydrochlorothiazide tablet 12.5mg; 10mg	1	QL(31 EA per 31 days)
quinapril/hydrochlorothiazide tablet 12.5mg; 20mg, 25mg; 20mg	1	QL(62 EA per 31 days)
ranolazine er	1	QL(62 EA per 31 days)
spironolactone/hydrochlorothiazide	1	
telmisartan/amlodipine	1	QL(31 EA per 31 days)
telmisartan/hydrochlorothiazide tablet 12.5mg; 40mg, 25mg; 80mg	1	QL(31 EA per 31 days)
telmisartan/hydrochlorothiazide tablet 12.5mg; 80mg	1	QL(62 EA per 31 days)
trandolapril/verapamil hcl er	1	QL(31 EA per 31 days)
triamterene/hydrochlorothiazide capsule 25mg; 37.5mg	1	
triamterene/hydrochlorothiazide tablet	1	
valsartan/hydrochlorothiazide	1	QL(31 EA per 31 days)
Diuretics, Loop		
bumetanide injection, tablet	1	
ethacrynic acid tablet	1	
furosemide oral solution, tablet	1	
furosemide injection	1	B/D
torsemide tablet	1	
Diuretics, Potassium-sparing		
amiloride hcl tablet	1	
eplerenone	1	
spironolactone tablet	1	
Diuretics, Thiazide		
chlorthalidone tablet 25mg, 50mg	1	
hydrochlorothiazide capsule, tablet	1	
indapamide tablet	1	
metolazone	1	
Dyslipidemics, Fibrin Acid Derivatives		
fenofibrate micronized capsule 134mg, 200mg, 67mg	1	
fenofibrate capsule 130mg, 43mg	1	
fenofibrate tablet 145mg, 160mg, 48mg, 54mg	1	

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<i>fenofibric acid dr</i>	1	
<i>gemfibrozil tablet</i>	1	
Dyslipidemics, HMG CoA Reductase Inhibitors		
<i>atorvastatin calcium</i>	1	QL(31 EA per 31 days)
<i>fluvastatin capsule 20mg</i>	1	QL(31 EA per 31 days)
<i>fluvastatin capsule 40mg</i>	1	QL(62 EA per 31 days)
<i>lovastatin tablet 10mg</i>	1	QL(31 EA per 31 days)
<i>lovastatin tablet 20mg, 40mg</i>	1	QL(62 EA per 31 days)
<i>pravastatin sodium</i>	1	QL(31 EA per 31 days)
<i>rosuvastatin calcium</i>	1	QL(31 EA per 31 days)
<i>simvastatin tablet</i>	1	QL(31 EA per 31 days)
Dyslipidemics, Other		
<i>cholestyramine light</i>	1	
<i>cholestyramine packet, powder</i>	1	
<i>colesevelam hydrochloride</i>	1	
<i>colestipol hcl</i>	1	
<i>ezetimibe</i>	1	QL(31 EA per 31 days)
<i>ezetimibe/simvastatin</i>	1	QL(31 EA per 31 days)
<i>icosapent ethyl capsule 1gm</i>	1	QL(124 EA per 31 days)
<i>icosapent ethyl capsule 0.5gm</i>	1	QL(248 EA per 31 days)
<i>JUXTAPID CAPSULE 10MG, 5MG</i>	2	QL(31 EA per 31 days); PA; NDS
<i>JUXTAPID CAPSULE 20MG, 30MG</i>	2	QL(62 EA per 31 days); PA; NDS
<i>niacin er</i>	1	
<i>niacor</i>	2	
<i>omega-3-acid ethyl esters</i>	1	QL(124 EA per 31 days)
<i>PRALUENT</i>	2	QL(2 ML per 28 days); PA
<i>prevalite</i>	1	
<i>REPATHA</i>	2	QL(3 ML per 28 days); PA
<i>REPATHA PUSHTRONEX SYSTEM</i>	2	QL(7 ML per 28 days); PA
<i>REPATHA SURECLICK</i>	2	QL(3 ML per 28 days); PA
<i>VASCEPA CAPSULE 1GM</i>	2	QL(124 EA per 31 days)
<i>VASCEPA CAPSULE 0.5GM</i>	2	QL(248 EA per 31 days)
Vasodilators, Direct-acting Arterial/Venous		
<i>isosorbide dinitrate tablet 10mg, 20mg, 30mg, 5mg</i>	1	
<i>isosorbide mononitrate</i>	1	
<i>isosorbide mononitrate er</i>	1	
<i>minitran</i>	1	
<i>nitro-bid</i>	1	
<i>nitroglycerin lingual solution</i>	1	
<i>nitroglycerin transdermal</i>	1	
<i>nitroglycerin tablet sublingual 0.3mg, 0.4mg, 0.6mg</i>	1	
<i>RECTIV</i>	2	
<i>VERQUVO</i>	2	PA

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Vasodilators, Direct-acting Arterial		
hydralazine hcl tablet 10mg	1	
hydralazine hydrochloride tablet 100mg, 25mg, 50mg	1	
minoxidil tablet	1	
Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines		
amphetamine/dextroamphetamine capsule extended release 24 hour	1	QL(31 EA per 31 days)
amphetamine/dextroamphetamine tablet 1.25mg; 1.25mg; 1.25mg; 1.25mg, 1.875mg; 1.875mg; 1.875mg; 2.5mg; 2.5mg; 2.5mg; 3.125mg; 3.125mg; 3.125mg, 3.75mg; 3.75mg; 3.75mg, 7.5mg; 7.5mg; 7.5mg	1	QL(62 EA per 31 days)
amphetamine/dextroamphetamine tablet 5mg; 5mg; 5mg	1	QL(93 EA per 31 days)
dextroamphetamine sulfate er capsule extended release 24 hour 10mg, 15mg	1	QL(124 EA per 31 days)
dextroamphetamine sulfate er capsule extended release 24 hour 5mg	1	QL(93 EA per 31 days)
dextroamphetamine sulfate tablet 10mg	1	QL(186 EA per 31 days)
dextroamphetamine sulfate tablet 5mg	1	QL(93 EA per 31 days)
lisdexamfetamine dimesylate	1	QL(31 EA per 31 days)
VYVANSE	2	QL(31 EA per 31 days)
Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
atomoxetine hydrochloride capsule 10mg, 25mg	1	QL(31 EA per 31 days)
atomoxetine capsule 100mg, 18mg, 40mg, 60mg, 80mg	1	QL(31 EA per 31 days)
clonidine hydrochloride er	1	PA
dexmethylphenidate hcl tablet 10mg, 5mg	1	QL(62 EA per 31 days)
dexmethylphenidate hydrochloride tablet 2.5mg	1	QL(62 EA per 31 days)
guanfacine er tablet extended release 24 hour 2mg	1	PA
guanfacine hydrochloride tablet extended release 24 hour 1mg, 3mg, 4mg	1	PA
methylphenidate hydrochloride cd capsule extended release 10mg, 20mg, 50mg, 60mg	1	QL(31 EA per 31 days)
methylphenidate hydrochloride cd capsule extended release 30mg	1	QL(62 EA per 31 days)
methylphenidate hydrochloride er capsule extended release 40mg	1	QL(31 EA per 31 days)
methylphenidate hydrochloride er tablet extended release 24 hour 18mg, 27mg, 54mg	1	QL(31 EA per 31 days)
methylphenidate hydrochloride er tablet extended release 24 hour 36mg	1	QL(62 EA per 31 days)

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<i>methylphenidate hydrochloride er tablet extended release 18mg, 27mg, 54mg</i>	1	QL(31 EA per 31 days)
<i>methylphenidate hydrochloride er tablet extended release 36mg</i>	1	QL(62 EA per 31 days)
<i>methylphenidate hydrochloride er tablet extended release 10mg, 20mg</i>	1	QL(93 EA per 31 days)
<i>methylphenidate hydrochloride tablet</i>	1	QL(93 EA per 31 days)
<i>methylphenidate hydrochloride solution 5mg/5ml</i>	1	QL(1860 ML per 31 days)
<i>methylphenidate hydrochloride solution 10mg/5ml</i>	1	QL(930 ML per 31 days)
<i>methylphenidate hydrochloride tablet chewable 10mg</i>	1	QL(186 EA per 31 days)
<i>methylphenidate hydrochloride tablet chewable 2.5mg, 5mg</i>	1	QL(93 EA per 31 days)
Central Nervous System, Other		
FIRDAPSE	2	QL(248 EA per 31 days); PA; NDS
NUEDEXTA	2	QL(62 EA per 31 days); PA; NDS
RADICAVA	2	PA; NDS
RADICAVA ORS	2	QL(50 ML per 28 days); PA; NDS
RADICAVA ORS STARTER KIT	2	QL(140 ML per 365 days); PA; NDS
riluzole	1	
SKYCLARYS	2	QL(93 EA per 31 days); PA; NDS
<i>tetrabenazine tablet 25mg</i>	1	QL(124 EA per 31 days); PA; NDS
<i>tetrabenazine tablet 12.5mg</i>	1	QL(93 EA per 31 days); PA
Fibromyalgia Agents		
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 20MG, 40MG, 60MG	2	QL(62 EA per 31 days); PA
DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 30MG	2	QL(93 EA per 31 days); PA
<i>duloxetine hcl capsule delayed release particles 40mg</i>	1	QL(62 EA per 31 days)
<i>duloxetine hydrochloride capsule delayed release particles 20mg, 60mg</i>	1	QL(62 EA per 31 days)
<i>duloxetine hydrochloride capsule delayed release particles 30mg</i>	1	QL(93 EA per 31 days)
<i>pregabalin capsule 225mg, 300mg</i>	1	QL(62 EA per 31 days)
<i>pregabalin capsule 100mg, 150mg, 200mg, 25mg, 50mg, 75mg</i>	1	QL(93 EA per 31 days)
<i>pregabalin solution</i>	1	QL(930 ML per 31 days)
SAVELLA	2	QL(62 EA per 31 days)
SAVELLA TITRATION PACK	2	QL(55 EA per 180 days)
Multiple Sclerosis Agents		
AUBAGIO	2	QL(31 EA per 31 days); NDS
AVONEX PEN	2	QL(1 EA per 28 days); NDS
AVONEX INJECTION 30MCG/0.5ML	2	QL(4 EA per 28 days); NDS
BETASERON	2	QL(15 EA per 30 days); NDS
<i>dalfampridine er</i>	1	QL(62 EA per 31 days)

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Drug Name	Drug Tier	Requirements/Limits
<i>dimethyl fumarate starterpack</i>	1	QL(120 EA per 365 days); NDS
<i>dimethyl fumarate capsule delayed release 120mg</i>	1	QL(14 EA per 31 days); NDS
<i>dimethyl fumarate capsule delayed release 240mg</i>	1	QL(62 EA per 31 days); NDS
EXTAVIA	2	QL(15 EA per 30 days); NDS
<i>fingolimod</i>	1	QL(31 EA per 31 days); NDS
GILENYA	2	QL(31 EA per 31 days); NDS
<i>glatiramer acetate injection 40mg/ml</i>	1	QL(12 ML per 28 days); NDS
<i>glatiramer acetate injection 20mg/ml</i>	1	QL(30 ML per 30 days); NDS
<i>glatopa injection 40mg/ml</i>	1	QL(12 ML per 28 days); NDS
<i>glatopa injection 20mg/ml</i>	1	QL(30 ML per 30 days); NDS
KESIMPTA	2	
LEMTRADA	2	PA; NDS
MAYZENT STARTER PACK TABLET THERAPY PACK 0.25MG	2	QL(14 EA per 365 days)
MAYZENT STARTER PACK TABLET THERAPY PACK 0.25MG	2	QL(24 EA per 365 days); NDS
MAYZENT TABLET 0.25MG	2	QL(124 EA per 31 days); NDS
MAYZENT TABLET 1MG, 2MG	2	QL(31 EA per 31 days); NDS
OCREVUS	2	PA; NDS
PLEGRIDY	2	QL(1 ML per 28 days); NDS
PLEGRIDY STARTER PACK	2	QL(2 ML per 365 days); NDS
REBIF	2	QL(6 ML per 28 days); NDS
REBIF REBIDOSE	2	QL(6 ML per 28 days); NDS
REBIF REBIDOSE TITRATION PACK	2	QL(8.4 ML per 365 days); NDS
REBIF TITRATION PACK	2	QL(8.4 ML per 365 days); NDS
<i>teriflunomide</i>	1	QL(31 EA per 31 days); NDS
TYSABRI	2	PA; NDS
ZEPOSIA	2	QL(31 EA per 31 days); PA; NDS
ZEPOSIA 7-DAY STARTER PACK	2	QL(14 EA per 365 days); PA; NDS
ZEPOSIA STARTER KIT CAPSULE THERAPY PACK 0	2	QL(56 EA per 365 days); PA
ZEPOSIA STARTER KIT CAPSULE THERAPY PACK 0	2	QL(74 EA per 365 days); PA

Dental and Oral Agents

Dental and Oral Agents		
<i>cevimeline hydrochloride</i>	1	
<i>chlorhexidine gluconate solution</i>	1	
FIRST-MOUTHWASH BLM SUSPENSION 1.58GM/119ML; 0.1GM/119ML; 0.8GM/119ML; 1.58GM/119ML; 0.158GM/119ML	2	
<i>paroex</i>	1	
<i>periogard</i>	1	
<i>pilocarpine hydrochloride</i>	1	
<i>triamcinolone acetonide dental paste</i>	1	

Dermatological Agents

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Drug Name	Drug Tier	Requirements/Limits
Acne and Rosacea Agents		
acitretin	1	
adapalene pump	1	PA
adapalene cream, gel	1	PA
amnesteem	1	
azelaic acid	1	
claravis	1	
clindamycin phosphate/benzoyl peroxide gel 5%; 1.2%	1	
clindamycin/benzoyl peroxide	1	
erythromycin/benzoyl peroxide	1	
isotretinoin capsule	1	
myorisan	1	
neuac	1	
tazarotene cream	1	PA
tazarotene gel	1	QL(100 GM per 31 days); PA
TAZORAC GEL	2	QL(100 GM per 31 days); PA
TAZORAC CREAM 0.05%	2	PA
tretinooin cream 0.025%, 0.05%, 0.1%	1	PA
tretinooin gel 0.01%, 0.025%, 0.05%	1	PA
zenatane	1	
Dermatitis and Pruritus Agents		
ala-cort	1	
aclometasone dipropionate	1	
ammonium lactate	1	
betamethasone dipropionate	1	
betamethasone dipropionate augmented	1	
betamethasone valerate	1	
clobetasol propionate e	1	QL(120 GM per 28 days)
clobetasol propionate emollient	1	QL(100 GM per 30 days)
clobetasol propionate foam	1	QL(100 GM per 30 days)
clobetasol propionate lotion	1	QL(118 ML per 30 days)
clobetasol propionate cream, gel, ointment	1	QL(120 GM per 28 days)
clobetasol propionate shampoo, solution	1	QL(120 ML per 28 days)
clodan	1	QL(120 ML per 28 days)
desonide	1	
desoximetasone	1	
doxepin hydrochloride cream 5%	1	QL(90 GM per 30 days); PA
fluocinolone acetonide body	1	
fluocinolone acetonide scalp	1	
fluocinolone acetonide topical	1	
fluocinolone acetonide cream 0.01%, 0.025%	1	
fluocinolone acetonide ointment 0.025%	1	
fluocinolone acetonide solution 0.01%	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>fluocinonide emulsified base</i>	1	QL(60 GM per 30 days)
<i>fluocinonide cream</i>	1	QL(120 GM per 28 days)
<i>fluocinonide gel, ointment</i>	1	QL(60 GM per 30 days)
<i>fluocinonide solution</i>	1	QL(60 ML per 30 days)
<i>fluticasone propionate cream 0.05%</i>	1	
<i>fluticasone propionate lotion 0.05%</i>	1	
<i>fluticasone propionate ointment 0.005%</i>	1	
<i>halobetasol propionate</i>	1	
<i>hydrocortisone butyrate</i>	1	
<i>hydrocortisone butyrate (lipid)</i>	1	
<i>hydrocortisone butyrate (lipophilic)</i>	1	
<i>hydrocortisone valerate</i>	1	
<i>hydrocortisone cream 1%, 2.5%</i>	1	
<i>hydrocortisone lotion 2.5%</i>	1	
<i>hydrocortisone ointment 2.5%</i>	1	
<i>mometasone furoate</i>	1	
<i>pimecrolimus</i>	1	QL(100 GM per 30 days); ST
<i>prednicarbate</i>	1	
<i>selenium sulfide</i>	1	
<i>tacrolimus ointment 0.03%, 0.1%</i>	1	QL(100 GM per 31 days)
<i>tovet</i>	1	QL(100 GM per 30 days)
<i>triamcinolone acetonide cream 0.025%, 0.1%, 0.5%</i>	1	
<i>triamcinolone acetonide lotion 0.025%, 0.1%</i>	1	
<i>triamcinolone acetonide ointment 0.025%, 0.1%, 0.5%</i>	1	
Dermatological Agents, Other		
<i>calcipotriene/betamethasone dipropionate</i>	1	QL(400 GM per 28 days)
<i>calcipotriene cream, ointment</i>	1	QL(120 GM per 30 days)
<i>calcipotriene solution</i>	1	QL(120 ML per 30 days)
<i>CALCITRIOL OINTMENT 3MCG/GM</i>	1	
<i>clotrimazole/betamethasone dipropionate lotion</i>	1	QL(60 ML per 28 days)
<i>clotrimazole/betamethasone dipropionate cream</i>	1	QL(90 GM per 30 days)
<i>diclofenac sodium gel 3%</i>	1	QL(100 GM per 30 days)
<i>fluorouracil cream 5%</i>	1	
<i>fluorouracil cream 0.5%</i>	1	QL(30 GM per 30 days); PA; NDS
<i>fluorouracil external solution 2%, 5%</i>	1	
<i>imiquimod cream 5%</i>	1	QL(24 EA per 31 days)
<i>methoxsalen capsule</i>	1	NDS
<i>nystatin/triamcinolone</i>	1	QL(60 GM per 28 days)
<i>podofilox</i>	1	
<i>REGRANEX</i>	2	PA; NDS
<i>SANTYL</i>	2	
<i>silver sulfadiazine</i>	1	
<i>SSD</i>	1	

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VYJUVEK	2	PA
Pediculicides/Scabicides		
malathion	1	
permethrin cream	1	
Topical Anti-infectives		
ciclodan solution	1	
ciclopirox nail lacquer	1	
ciclopirox olamine	1	QL(90 GM per 28 days)
ciclopirox shampoo	1	QL(120 ML per 28 days)
ciclopirox gel	1	QL(45 GM per 28 days)
ciclopirox suspension	1	QL(60 ML per 28 days)
clindamycin phosphate gel 1%	1	QL(120 GM per 31 days)
clindamycin phosphate lotion 1%	1	QL(120 ML per 31 days)
clindamycin phosphate external solution 1%	1	QL(120 ML per 31 days)
clindamycin phosphate swab 1%	1	
clotrimazole cream 1%	1	QL(45 GM per 28 days)
clotrimazole solution 1%	1	QL(30 ML per 28 days)
econazole nitrate	1	QL(90 GM per 30 days)
ery	1	
erythromycin gel 2%	1	
erythromycin solution 2%	1	
gentamicin sulfate cream 0.1%	1	
gentamicin sulfate ointment 0.1%	1	
ketoconazole cream 2%	1	QL(90 GM per 30 days)
ketoconazole shampoo 2%	1	QL(120 ML per 28 days)
mupirocin	1	
nyamyc	1	
nystatin cream 100000unit/gm	1	QL(30 GM per 28 days)
nystatin ointment 100000unit/gm	1	QL(30 GM per 28 days)
nystatin powder 100000unit/gm	1	
nystop	1	
sulfacetamide sodium lotion 10%	1	PA
SULFAMYLYON CREAM	2	
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		

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Drug Name	Drug Tier	Requirements/Limits
AMINOSYN II INJECTION 107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 405MG/100ML; 750MG/100ML; 993MG/100ML; 1018MG/100ML; 700MG/100ML; 738MG/100ML; 500MG/100ML; 300MG/100ML; 660MG/100ML; 1000MG/100ML; 1050MG/100ML; 172MG/100ML; 270MG/100ML; 298MG/100ML; 722MG/100ML; 530MG/100ML; 400MG/100ML; 200MG/100ML; 500MG/100ML	2	B/D
AMINOSYN-PF 7% INJECTION 32.5MEQ/L; 490MG/100ML; 861MG/100ML; 370MG/100ML; 576MG/100ML; 270MG/100ML; 220MG/100ML; 534MG/100ML; 831MG/100ML; 475MG/100ML; 125MG/100ML; 10.69GM/L; 300MG/100ML; 570MG/100ML; 70GM/L; 347MG/100ML; 50MG/100ML; 360MG/100ML; 125MG/100ML; 44MG/100ML; 452MG/100ML	2	B/D
AMINOSYN-PF INJECTION 46MEQ/L; 698MG/100ML; 1227MG/100ML; 527MG/100ML; 820MG/100ML; 385MG/100ML; 312MG/100ML; 760MG/100ML; 1200MG/100ML; 677MG/100ML; 180MG/100ML; 427MG/100ML; 812MG/100ML; 495MG/100ML; 70MG/100ML; 512MG/100ML; 180MG/100ML; 44MG/100ML; 673MG/100ML	2	B/D
<i>carglumic acid</i>	1	NDS
<i>cavarest</i>	1	
CLINIMIX 4.25%/DEXTROSE 10%	2	B/D
CLINIMIX 4.25%/DEXTROSE 5%	2	B/D
CLINIMIX 5%/DEXTROSE 15%	2	B/D
CLINIMIX 5%/DEXTROSE 20%	2	B/D
CLINIMIX 6/5	2	B/D
CLINIMIX 8/10	2	B/D
CLINIMIX 8/14	2	B/D
CLINIMIX E 2.75%/DEXTROSE 5%	2	B/D
CLINIMIX E 4.25%/DEXTROSE 10%	2	B/D
CLINIMIX E 4.25%/DEXTROSE 5%	2	B/D
CLINIMIX E 5%/DEXTROSE 15%	2	B/D
CLINIMIX E 5%/DEXTROSE 20%	2	B/D
CLINIMIX E 8/10	2	B/D
CLINIMIX E 8/14	2	B/D
<i>clinpro 5000</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
DEXTROSE 10%/NACL 0.45%	1	
DEXTROSE 5% /ELECTROLYTE #48 VIAFLEX	1	
<i>dextrose 10%</i>	1	
DEXTROSE 10%/NACL 0.2%	1	
<i>dextrose 2.5%/nacl 0.45%</i>	1	
DEXTROSE 25% INJECTION 250MG/ML	1	
<i>dextrose 5%</i>	1	B/D
DEXTROSE 5%/LACTATED RINGERS INJECTION 2.7MEQ/L; 109MEQ/L; 5%; 28MEQ/L; 4MEQ/L; 130MEQ/L	1	
DEXTROSE 5%/NACL 0.2%	1	
<i>dextrose 5%/nacl 0.3%</i>	1	
DEXTROSE 5%/NACL 0.33%	1	
<i>dextrose 5%/nacl 0.45%</i>	1	
<i>dextrose 5%/nacl 0.9%</i>	1	B/D
DEXTROSE 50% INJECTION 50%	1	
<i>dextrose 50% injection 50%</i>	1	
DEXTROSE 70%	1	
<i>dextrose/sodium chloride</i>	1	
<i>effer-k tablet effervescent 25meq</i>	1	
<i>fluoride tablet chewable 1mg</i>	1	
<i>fluoridex daily defense</i>	2	
<i>fluoridex enhanced whitening</i>	2	
<i>fluoridex sensitivity relief/sls free</i>	1	
<i>fluorimax 5000</i>	1	
<i>fluorimax 5000 sensitive</i>	1	
FREAMINE III INJECTION 89MEQ/L; 710MG/100ML; 950MG/100ML; 3MEQ/L; 24MG/100ML; 1400MG/100ML; 280MG/100ML; 690MG/100ML; 910MG/100ML; 730MG/100ML; 530MG/100ML; 560MG/100ML; 10MMOLE/L; 120MG/100ML; 1120MG/100ML; 590MG/100ML; 10MEQ/L; 400MG/100ML; 150MG/100ML; 660MG/100ML	2	B/D
HEPATAMINE INJECTION 62MEQ/L; 770MG/100ML; 600MG/100ML; 3MEQ/L; 20MG/100ML; 900MG/100ML; 240MG/100ML; 900MG/100ML; 1100MG/100ML; 610MG/100ML; 100MG/100ML; 100MG/100ML; 115MG/100ML; 800MG/100ML; 500MG/100ML; 450MG/100ML; 66MG/100ML; 840MG/100ML	2	B/D
INTRALIPID	2	B/D
ISOLYTE-P/DEXTROSE 5%	2	

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Drug Name	Drug Tier	Requirements/Limits
ISOLYTE-S PH 7.4	2	
ISOLYTE-S INJECTION 27MEQ/L; 98MEQ/L; 23MEQ/L; 3MEQ/L; 5MEQ/L; 140MEQ/L	2	
<i>just right 5000</i>	1	
K-PHOS	2	
K-PHOS NO 2	2	
K-TAB TABLET EXTENDED RELEASE 8MEQ	1	
KCL 0.075%/D5W/NACL 0.45% INJECTION 5%; 10MEQ/L; 0.45%	1	
KCL 0.15%/D5W/NACL 0.2%	1	
<i>kcl 0.15%/d5w/nacl 0.225% injection 5%; 20meq/l; 0.225%</i>	1	
KCL 0.15%/D5W/NACL 0.45% INJECTION 5%; 20MEQ/L; 0.45%	1	
KCL 0.15%/D5W/NACL 0.9% INJECTION 5%; 20MEQ/L; 0.9%	1	
KCL 0.3%/D5W/NACL 0.45% INJECTION 5%; 40MEQ/L; 0.45%	1	
KCL 0.3%/D5W/NACL 0.9% INJECTION 5%; 40MEQ/L; 0.9%	1	
<i>klor-con</i>	1	
KLOR-CON 10	1	
KLOR-CON 8	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
<i>klor-con/ef</i>	1	
LACTATED RINGERS IRRIGATION	1	
<i>lactated ringers injection 3meq/l; 109meq/l; 28meq/l; 4meq/l; 130meq/l</i>	1	B/D
MAGNESIUM SULFATE INJECTION 50%	1	
<i>magnesium sulfate injection 50%</i>	1	
<i>multiple electrolytes injection type 1</i>	1	
<i>nafrinse</i>	1	
ORACIT	2	
PLASMA-LYTE A	2	
PLASMA-LYTE-148	2	
<i>plenamine</i>	2	B/D
<i>potassium chloride cr tablet extended release 10meq</i>	1	
<i>potassium chloride er</i>	1	
POTASSIUM CHLORIDE/DEXTROSE/LACTATED RINGERS INJECTION 3MEQ/L; 149MEQ/L; 5%; 28MEQ/L; 24MEQ/L; 130MEQ/L	1	

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Drug Name	Drug Tier	Requirements/Limits
POTASSIUM CHLORIDE/DEXTROSE/SODIUM CHLORIDE INJECTION 5%; 10MEQ/L; 0.45%, 5%; 20MEQ/L; 0.45%, 5%; 20MEQ/L; 0.9%, 5%; 30MEQ/L; 0.45%, 5%; 40MEQ/L; 0.45%, 5%; 40MEQ/L; 0.9%	1	
<i>potassium chloride/dextrose/sodium chloride injection 5%; 20meq/l; 0.225%</i>	1	
POTASSIUM CHLORIDE/DEXTROSE INJECTION 5%; 20MEQ/L	1	B/D
<i>potassium chloride/dextrose injection 5%; 10meq/l</i>	1	B/D
POTASSIUM CHLORIDE/SODIUM CHLORIDE INJECTION 20MEQ/L; 0.9%, 40MEQ/L; 0.9%	1	B/D
<i>potassium chloride/sodium chloride injection 20meq/l; 0.45%</i>	1	B/D
<i>potassium chloride packet, oral solution</i>	1	
<i>potassium chloride injection 10meq/100ml, 10meq/50ml, 20meq/100ml, 20meq/50ml, 2meq/ml, 40meq/100ml</i>	1	B/D
<i>potassium citrate er</i>	1	
<i>premasol injection 52meq/l; 1760mg/100ml; 880mg/100ml; 34meq/l; 1760mg/100ml; 372mg/100ml; 406mg/100ml; 526mg/100ml; 492mg/100ml; 492mg/100ml; 526mg/100ml; 356mg/100ml; 356mg/100ml; 390mg/100ml; 34mg/100ml; 152mg/100ml</i>	2	B/D
<i>prevident 5000 booster plus</i>	2	
<i>prevident 5000 dry mouth</i>	2	
<i>prevident 5000 enamel protect</i>	2	
<i>prevident 5000 ortho defense</i>	2	
<i>prevident 5000 plus</i>	2	
<i>prevident 5000 sensitive</i>	2	
<i>prevident fluoride</i>	2	
<i>prevident rinse</i>	2	
PROCALAMINE	2	B/D
PROSOL	2	B/D
RINGERS INJECTION INJECTION 4.5MEQ/L; 156MEQ/L; 4MEQ/L; 147MEQ/L	1	
RINGERS IRRIGATION	1	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sodium chloride 0.45% injection</i>	1	
SODIUM CHLORIDE 0.9% SOLUTION	1	
SODIUM CHLORIDE INJECTION 5%	1	B/D
<i>sodium chloride injection 0.45%</i>	1	
<i>sodium chloride injection 0.9%, 3%</i>	1	B/D
<i>sodium citrate/citric acid solution 334mg/5ml; 500mg/5ml</i>	1	
<i>sodium fluoride 1.1</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
sodium fluoride 5000 plus	1	
sodium fluoride 5000 ppm	1	
sodium fluoride 5000 ppm dry mouth	1	
sodium fluoride 5000 ppm enamel protect	1	
sodium fluoride 5000 ppm sensitive	1	
sodium fluoride gel, solution	1	
sodium fluoride tablet chewable 1mg	1	
sodium fluoride tablet 1mg	1	
TRAVASOL INJECTION 52MEQ/L; 1760MG/100ML; 880MG/100ML; 34MEQ/L; 1760MG/100ML; 372MG/100ML; 406MG/100ML; 526MG/100ML; 492MG/100ML; 492MG/100ML; 526MG/100ML; 356MG/100ML; 500MG/100ML; 356MG/100ML; 390MG/100ML; 34MG/100ML; 152MG/100ML	2	B/D
TROPHAMINE INJECTION 0.54GM/100ML; 1.2GM/100ML; 0.32GM/100ML; 0; 0; 0.5GM/100ML; 0.36GM/100ML; 0.48GM/100ML; 0.82GM/100ML; 1.4GM/100ML; 1.2GM/100ML; 0.34GM/100ML; 0.48GM/100ML; 0.68GM/100ML; 0.38GM/100ML; 5MEQ/L; 0.025GM/100ML; 0.42GM/100ML; 0.2GM/100ML; 0.24GM/100ML; 0.78GM/100ML	2	B/D
XENPOZYME INJECTION 20MG	2	PA; NDS
Electrolyte/Mineral/Metal Modifiers		
CHEMET	2	NDS
deferasirox tablet	1	PA
deferasirox packet, tablet soluble	1	PA; NDS
deferiprone	1	PA; NDS
deferoxamine mesylate	1	B/D
FERRIPROX TWICE-A-DAY	2	PA; NDS
FERRIPROX SOLUTION	2	PA; NDS
FERRIPROX TABLET 1000MG	2	PA; NDS
JYNARQUE TABLET	2	QL(112 EA per 28 days); PA; NDS
JYNARQUE TABLET THERAPY PACK	2	QL(56 EA per 28 days); PA; NDS
tolvaptan tablet 15mg	1	QL(124 EA per 31 days); PA; NDS
tolvaptan tablet 30mg	1	QL(62 EA per 31 days); PA; NDS
trientine hydrochloride	1	PA; NDS
Electrolytes/Minerals/Metals/Vitamins		
argyle sterile saline	1	
curity sterile saline	1	
Phosphate Binders		
calcium acetate capsule	1	
calcium acetate tablet 667mg	1	
FOSRENOL PACKET	2	NDS

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<i>lanthanum carbonate</i>	1	NDS
PHOSLYRA	2	
<i>sevelamer carbonate tablet</i>	1	
<i>sevelamer carbonate packet</i>	1	NDS
<i>sevelamer hydrochloride</i>	1	
Potassium Binders		
LOKELMA	2	
<i>sodium polystyrene sulfonate powder</i>	1	
<i>sps</i>	1	
VELTASSA PACKET 8.4GM	2	QL(31 EA per 31 days)
VELTASSA PACKET 16.8GM, 25.2GM	2	QL(31 EA per 31 days); NDS
Vitamins		
<i>phytonadione tablet</i>	1	
<i>prenatal tablet 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg</i>	1	
<i>vitamin d capsule 50000unit</i>	1	
WESNATAL DHA COMPLETE	1	
Gastrointestinal Agents		
Anti-Constipation Agents		
AMITIZA	2	QL(62 EA per 31 days)
<i>constulose</i>	1	
<i>enulose</i>	1	
<i>generlac</i>	1	
<i>lactulose solution</i>	1	
LINZESS	2	QL(31 EA per 31 days)
<i>lubiprostone</i>	1	QL(62 EA per 31 days)
MOVANTIK	2	QL(31 EA per 31 days)
RELISTOR TABLET	2	QL(93 EA per 31 days); PA; NDS
RELISTOR INJECTION 8MG/0.4ML	2	QL(12.4 ML per 31 days); PA; NDS
RELISTOR INJECTION 12MG/0.6ML	2	QL(18.6 ML per 31 days); PA; NDS
Anti-Diarrheal Agents		
<i>alosetron hydrochloride</i>	1	NDS
<i>diphenoxylate hydrochloride/atropine sulfate</i>	1	PA
<i>diphenoxylate/atropine liquid</i>	1	PA
<i>loperamide hcl capsule</i>	1	
MYTESI	2	QL(62 EA per 31 days); PA; NDS
XERMELO	2	QL(84 EA per 28 days); PA; NDS
Antispasmodics, Gastrointestinal		
<i>dicyclomine hcl solution</i>	1	
<i>dicyclomine hydrochloride capsule, tablet</i>	1	
<i>glycopyrrolate tablet 1mg, 2mg</i>	1	PA
Gastrointestinal Agents, Other		

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Drug Name	Drug Tier	Requirements/Limits
<i>chenodal</i>	2	PA; NDS
GATTEX	2	PA; NDS
<i>gavilyte-c</i>	1	
<i>gavilyte-g</i>	1	
<i>gavilyte-n/flavor pack</i>	1	
MYALEPT	2	PA; NDS
OCALIVA	2	QL(31 EA per 31 days); PA; NDS
<i>peg-3350/electrolytes</i>	1	
<i>peg-3350/nacl/na bicarbonate/kcl</i>	1	
<i>trilyte</i>	1	
<i>ursodiol capsule 300mg</i>	1	
<i>ursodiol tablet</i>	1	
VOWST	2	PA
ZINPLAVA	2	PA; NDS
Histamine2 (H2) Receptor Antagonists		
<i>cimetidine hcl solution</i>	1	
<i>cimetidine hydrochloride solution 300mg/5ml</i>	1	
<i>cimetidine tablet</i>	1	
<i>famotidine premixed</i>	1	
<i>famotidine suspension reconstituted</i>	1	
<i>famotidine injection 200mg/20ml, 20mg/2ml, 40mg/4ml</i>	1	
<i>famotidine tablet 20mg, 40mg</i>	1	
<i>nizatidine capsule</i>	1	
Protectants		
<i>misoprostol</i>	1	
<i>sucralfate suspension, tablet</i>	1	
Proton Pump Inhibitors		
<i>lansoprazole capsule delayed release 30mg</i>	2	
<i>lansoprazole capsule delayed release 15mg</i>	2	QL(31 EA per 31 days)
<i>omeprazole dr capsule delayed release 10mg</i>	2	QL(31 EA per 31 days)
<i>omeprazole capsule delayed release 40mg</i>	2	
<i>omeprazole capsule delayed release 20mg</i>	2	QL(31 EA per 31 days)
<i>pantoprazole sodium dr tablet delayed release 40mg</i>	2	
<i>pantoprazole sodium injection</i>	2	
<i>pantoprazole sodium tablet delayed release 40mg</i>	2	
<i>pantoprazole sodium tablet delayed release 20mg</i>	2	QL(31 EA per 31 days)
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment		
<i>ALDURAZYME</i>	2	NDS
<i>ARALAST NP INJECTION 1000MG, 500MG</i>	2	PA; NDS
<i>betaine anhydrous</i>	1	NDS

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Drug Name	Drug Tier	Requirements/Limits
CERDELGA	2	QL(62 EA per 31 days); PA; NDS
CEREZYME	2	NDS
CHOLBAM	2	PA; NDS
CREON CAPSULE DELAYED RELEASE PARTICLES 120000UNIT; 24000UNIT; 76000UNIT, 15000UNIT; 3000UNIT; 9500UNIT, 180000UNIT; 36000UNIT; 114000UNIT, 30000UNIT; 6000UNIT; 19000UNIT, 60000UNIT; 12000UNIT; 38000UNIT	2	
<i>cromolyn sodium concentrate 100mg/5ml</i>	1	
CRYSVITA	2	PA; NDS
CYSTAGON	2	
ELAPRASE	2	NDS
ELELYSO	2	NDS
EVRYSDI	2	PA; NDS
FABRAZYME	2	NDS
GIVLAARI	2	PA; NDS
GLASSIA	2	PA; NDS
KANUMA	2	NDS
LEVOCARNITINE TABLET	1	
<i>levocarnitine solution</i>	1	
LUMIZYME	2	NDS
MEPSEVII	2	PA; NDS
<i>miglustat</i>	1	NDS
NAGLAZYME	2	NDS
<i>nitisinone</i>	1	NDS
NULIBRY	2	PA; NDS
ONPATTRO	2	PA; NDS
ORFADIN SUSPENSION	2	NDS
ORFADIN CAPSULE 20MG	2	NDS
OXLUMO	2	PA; NDS
PALYNZIQ	2	QL(93 ML per 31 days); PA; NDS
PANCREAZE CAPSULE DELAYED RELEASE PARTICLES 15200UNIT; 2600UNIT; 8800UNIT, 24600UNIT; 4200UNIT; 14200UNIT, 61500UNIT; 10500UNIT; 35500UNIT, 98400UNIT; 16800UNIT; 56800UNIT	2	
PANCREAZE CAPSULE DELAYED RELEASE PARTICLES 149900UNIT; 37000UNIT; 97300UNIT, 83900UNIT; 21000UNIT; 54700UNIT	2	NDS
PROLASTIN-C	2	PA; NDS
RAVICTI	2	QL(525 ML per 30 days); NDS
REVCovi	2	PA; NDS
<i>sapropterin dihydrochloride</i>	1	NDS

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sodium phenylacetate/sodium benzoate	1	NDS
STRENSIQ	2	PA; NDS
SUCRAID	2	NDS
VIMIZIM	2	NDS
VIOKACE TABLET 39150UNIT; 10440UNIT; 39150UNIT	2	
VIOKACE TABLET 78300UNIT; 20880UNIT; 78300UNIT	2	NDS
VYNDAQEL	2	QL(124 EA per 31 days); PA; NDS
XENPOZYME INJECTION 4MG	2	PA; NDS
XIAFLEX	2	NDS
XURIDEN	2	NDS
yargesa	1	
ZEMAIRA	2	PA; NDS
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 105000UNIT; 25000UNIT; 79000UNIT, 14000UNIT; 3000UNIT; 10000UNIT, 168000UNIT; 40000UNIT; 126000UNIT, 24000UNIT; 5000UNIT; 17000UNIT, 42000UNIT; 10000UNIT; 32000UNIT, 63000UNIT; 15000UNIT; 47000UNIT, 84000UNIT; 20000UNIT; 63000UNIT	2	
ZOKINVY	2	QL(124 EA per 31 days); PA; NDS
Genitourinary Agents		
Antispasmodics, Urinary		
darifenacin hydrobromide er	1	
flavoxate hcl	1	
MYRBETRIQ SUSPENSION RECONSTITUTED ER	2	
MYRBETRIQ TABLET EXTENDED RELEASE 24 HOUR	2	QL(31 EA per 31 days)
oxybutynin chloride er	1	
oxybutynin chloride solution	1	
oxybutynin chloride tablet 5mg	1	
tolterodine tartrate	1	
tolterodine tartrate er	1	QL(31 EA per 31 days)
trospium chloride	1	
trospium chloride er	1	QL(31 EA per 31 days)
Benign Prostatic Hypertrophy Agents		
alfuzosin hcl er	1	QL(31 EA per 31 days)
dutasteride/tamsulosin hydrochloride	1	QL(31 EA per 31 days); ST
dutasteride capsule	1	QL(31 EA per 31 days); ST
finasteride 5mg tablet	1	
tadalafil tablet 2.5mg, 5mg	1	QL(31 EA per 31 days); PA
tamsulosin hydrochloride	1	QL(62 EA per 31 days)
terazosin hcl capsule 1mg, 5mg	1	QL(31 EA per 31 days)
terazosin hcl capsule 10mg	1	QL(62 EA per 31 days)
terazosin hydrochloride capsule 2mg	1	QL(31 EA per 31 days)

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Genitourinary Agents, Other		
ACETIC ACID 0.25%	1	
bethanechol chloride tablet	1	
ELMIRON	2	NDS
penicillamine tablet	1	NDS
penicillamine capsule	1	PA; NDS
RENACIDIN SOLUTION 1980.6MG/30ML; 59.4MG/30ML; 980.4MG/30ML	2	
THIOLA EC	2	NDS
tiopronin	1	NDS
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
ACTHAR	2	PA; NDS
betamethasone sodium phosphate/betamethasone acetate	1	
DEPO-MEDROL INJECTION 20MG/ML	2	
dexamethasone sodium phosphate injection 100mg/10ml, 10mg/ml, 120mg/30ml, 20mg/5ml, 4mg/ml	1	
dexamethasone elixir, solution	1	
dexamethasone tablet 0.5mg, 0.75mg, 1.5mg, 1mg, 2mg, 4mg, 6mg	1	
fludrocortisone acetate tablet	1	
HEMADY	2	QL(24 EA per 28 days)
hydrocortisone tablet 10mg, 20mg, 5mg	1	
methylprednisolone acetate injection 40mg/ml, 80mg/ml	1	
methylprednisolone dose pack tablet therapy pack	1	
methylprednisolone sodium succinate	1	
methylprednisolone sodiumsuccinate injection 125mg, 40mg	1	
methylprednisolone tablet	1	
millipred tablet	1	
prednisolone sodium phosphate oral solution 10mg/5ml, 15mg/5ml, 20mg/5ml, 25mg/5ml	1	
prednisolone solution, tablet	1	
prednisone intensol	1	
prednisone solution	1	
prednisone tablet 10mg, 1mg, 2.5mg, 20mg, 50mg, 5mg	1	
SOLU-CORTEF	2	
SOLU-MEDROL INJECTION 2GM	2	
triamcinolone acetonide injection 400mg/10ml, 40mg/ml	1	
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)		
desmopressin acetate tablet	1	
desmopressin acetate solution 0.01%	1	
GENOTROPIN MINIQUICK	2	PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
GENOTROPIN INJECTION 5MG	2	PA
GENOTROPIN INJECTION 12MG	2	PA; NDS
HUMATROPE INJECTION 12MG, 24MG, 6MG	2	PA; NDS
INCRELEX	2	NDS
NORDITROPIN FLEXPRO	2	PA; NDS
NOVAREL	2	PA
NUTROPIN AQ NUSPIN 10	2	PA; NDS
NUTROPIN AQ NUSPIN 20	2	PA; NDS
NUTROPIN AQ NUSPIN 5	2	PA; NDS
OMNITROPE	2	PA; NDS
SEROSTIM	2	PA; NDS
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</i>		
KORLYM	2	QL(124 EA per 31 days); PA; NDS
<i>mifepristone</i>	1	PA
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)		
<i>Anabolic Steroids</i>		
<i>oxandrolone tablet 2.5mg</i>	1	QL(248 EA per 31 days); PA
<i>oxandrolone tablet 10mg</i>	1	QL(62 EA per 31 days); PA
<i>Androgens</i>		
ANDRODERM PATCH 24 HOUR 2MG/24HR, 4MG/24HR	2	QL(30 EA per 30 days); PA
<i>danazol capsule</i>	1	
<i>testosterone cypionate injection 100mg/ml, 200mg/ml</i>	1	PA
<i>testosterone enanthate injection</i>	1	PA
<i>testosterone pump gel 1.62%</i>	1	QL(150 GM per 30 days); PA
<i>testosterone pump gel 1%</i>	1	QL(300 GM per 30 days); PA
<i>testosterone gel 10mg/act</i>	1	QL(120 GM per 30 days); PA
<i>testosterone gel 40.5mg/2.5gm</i>	1	QL(150 GM per 30 days); PA
<i>testosterone gel 25mg/2.5gm, 50mg/5gm</i>	1	QL(300 GM per 30 days); PA
<i>testosterone gel 20.25mg/1.25gm</i>	1	QL(37.5 GM per 30 days); PA
<i>testosterone solution</i>	1	QL(180 ML per 30 days); PA
<i>Estrogens</i>		
<i>afirmelle</i>	1	
<i>altavera</i>	1	
<i>alyacen 1/35</i>	1	
<i>alyacen 7/7/7</i>	1	
<i>amabelz</i>	1	PA
<i>amethia</i>	1	
<i>amethyst</i>	1	
<i>apri</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>aranelle</i>	1	
<i>ashlyna</i>	1	
<i>aubra</i>	1	
<i>aubra eq</i>	1	
<i>aurovela 1.5/30</i>	1	
<i>aurovela 1/20</i>	1	
<i>aurovela 24 fe</i>	1	
<i>aurovela fe 1.5/30</i>	1	
<i>aurovela fe 1/20</i>	1	
<i>aviane</i>	1	
<i>ayuna</i>	1	
<i>azurette</i>	1	
<i>balziva</i>	1	
<i>blisovi 24 fe</i>	1	
<i>blisovi fe 1.5/30</i>	1	
<i>blisovi fe 1/20</i>	1	
<i>briellyn</i>	1	
<i>camrese</i>	1	
<i>camrese lo</i>	1	
<i>caziant</i>	1	
<i>chateal</i>	1	
<i>chateal eq</i>	1	
COMBIPATCH	3	PA
<i>cryselle-28</i>	1	
<i>cyclafem 1/35</i>	1	
<i>cyclafem 7/7/7</i>	1	
<i>cyred</i>	1	
<i>cyred eq</i>	1	
<i>dasetta 1/35</i>	1	
<i>dasetta 7/7/7</i>	1	
<i>daysee</i>	1	
<i>delyla</i>	1	
<i>depo-estradiol injection 5mg/ml</i>	2	
<i>desogestrel/ethinyl estradiol</i>	1	
DIVIGEL GEL 0.25MG/0.25GM, 0.5MG/0.5GM, 0.75MG/0.75GM	2	QL(31 EA per 31 days); PA
DIVIGEL GEL 1MG/GM	2	QL(31 GM per 31 days); PA
DIVIGEL GEL 1.25MG/1.25GM	2	QL(38.75 GM per 31 days); PA
<i>dolishale</i>	1	
<i>dotti</i>	1	QL(8 EA per 28 days); PA
<i>drospirenone/ethinyl estradiol</i>	1	
<i>elinest</i>	1	
<i>eluryng</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>emoquette</i>	1	
<i>enilloring</i>	1	
<i>enpresse-28</i>	1	
<i>enskyce</i>	1	
<i>estarrylla</i>	1	
<i>estradiol valerate injection</i>	1	
<i>estradiol/norethindrone acetate</i>	1	PA
<i>estradiol gel 0.25mg/0.25gm, 0.5mg/0.5gm, 0.75mg/0.75gm</i>	1	QL(31 EA per 31 days); PA
<i>estradiol gel 1mg/gm</i>	1	QL(31 GM per 31 days); PA
<i>estradiol gel 1.25mg/1.25gm</i>	1	QL(38.75 GM per 31 days); PA
<i>estradiol cream, vaginal tablet</i>	1	
<i>estradiol oral tablet</i>	1	PA
<i>estradiol patch weekly</i>	1	QL(4 EA per 28 days); PA
<i>estradiol patch twice weekly</i>	1	QL(8 EA per 28 days); PA
ESTRING RING 7.5MCG/24HR	2	
<i>ethynodiol diacetate/ethinyl estradiol</i>	1	
<i>etonogestrel/ethinyl estradiol</i>	1	
EVAMIST	2	QL(16.2 ML per 30 days); PA
<i>falmina</i>	1	
<i>fayosim</i>	1	
FEMRING	2	
<i>femynor</i>	1	
<i>fyavolv</i>	1	PA
<i>gianvi</i>	1	
<i>hailey 1.5/30</i>	1	
<i>hailey 24 fe</i>	1	
<i>hailey fe 1.5/30</i>	1	
<i>hailey fe 1/20</i>	1	
<i>haloette</i>	1	
<i>iclevia</i>	1	
<i>introvale</i>	1	
<i>isibloom</i>	1	
<i>jaimiess</i>	1	
<i>jasmiel</i>	1	
<i>jinteli</i>	1	PA
<i>jolessa</i>	1	
<i>juleber</i>	1	
<i>junel 1.5/30</i>	1	
<i>junel 1/20</i>	1	
<i>junel fe 1.5/30</i>	1	
<i>junel fe 1/20</i>	1	
<i>junel fe 24</i>	1	
<i>kalliga</i>	1	

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<i>kariva</i>	1	
<i>kelnor 1/35</i>	1	
<i>kelnor 1/50</i>	1	
<i>kurvelo</i>	1	
<i>larin 1.5/30</i>	1	
<i>larin 1/20</i>	1	
<i>larin 24 fe</i>	1	
<i>larin fe 1.5/30</i>	1	
<i>larin fe 1/20</i>	1	
<i>larissia</i>	1	
<i>leena</i>	1	
<i>lessina</i>	1	
<i>levonest</i>	1	
<i>levonorgestrel and ethinyl estradiol</i>	1	
<i>levonorgestrel/ethinyl estradiol</i>	1	
<i>levora 0.15/30-28</i>	1	
<i>lillow</i>	1	
<i>lo-zumandimine</i>	1	
<i>lojaimiess</i>	1	
LOPREEZA TABLET 1MG; 0.5MG	1	PA
<i>loryna</i>	1	
<i>low-ogestrel</i>	1	
<i>lutera</i>	1	
<i>lyllana</i>	1	QL(8 EA per 28 days); PA
<i>marlissa</i>	1	
<i>menest</i>	2	PA
MENOSTAR	2	QL(4 EA per 28 days); PA
<i>microgestin 1.5/30</i>	1	
<i>microgestin 1/20</i>	1	
<i>microgestin 24 fe</i>	1	
<i>microgestin fe 1.5/30</i>	1	
<i>microgestin fe 1/20</i>	1	
<i>mili</i>	1	
<i>mimvey</i>	1	PA
<i>mono-linyah</i>	1	
<i>necon 0.5/35-28</i>	1	
<i>nikki</i>	1	
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate tablet</i>	1	
<i>norethindrone acetate/ethinyl estradiol tablet 20mcg; 1mg, 30mcg; 1.5mg</i>	1	
<i>norethindrone acetate/ethinyl estradiol tablet 2.5mcg; 0.5mg, 5mcg; 1mg</i>	1	PA

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Drug Name	Drug Tier	Requirements/Limits
<i>norgestimate/ethinyl estradiol</i>	1	
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35</i>	1	
<i>nortrel 7/7/7</i>	1	
<i>nylia 1/35</i>	1	
<i>nylia 7/7/7</i>	1	
<i>nymyo</i>	1	
<i>ocella</i>	1	
<i>orsythia</i>	1	
<i>philith</i>	1	
<i>pimtrea</i>	1	
<i>pirmella 1/35</i>	1	
<i>pirmella 7/7/7</i>	1	
<i>portia-28</i>	1	
PREMARIN CREAM	2	
PREMARIN TABLET 0.3MG, 0.45MG, 0.625MG, 0.9MG, 1.25MG	2	PA
<i>previfem</i>	1	
<i>reclipsen</i>	1	
<i>rivelsa</i>	1	
<i>setlakin</i>	1	
<i>simliya</i>	1	
<i>simpesse</i>	1	
<i>sprintec 28</i>	1	
<i>sronyx</i>	1	
<i>syeda</i>	1	
<i>tarina 24 fe</i>	1	
<i>tarina fe 1/20</i>	1	
<i>tarina fe 1/20 eq</i>	1	
<i>tilia fe</i>	1	
<i>tri femynor</i>	1	
<i>tri-estarrylla</i>	1	
<i>tri-legest fe</i>	1	
<i>tri-linyah</i>	1	
<i>tri-lo-estarrylla</i>	1	
<i>tri-lo-marzia</i>	1	
<i>tri-lo-mili</i>	1	
<i>tri-lo-sprintec</i>	1	
<i>tri-mili</i>	1	
<i>tri-nymyo</i>	1	
<i>tri-previfem</i>	1	
<i>tri-sprintec</i>	1	
<i>tri-vylibra</i>	1	

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<i>tri-vylibra lo</i>	1	
<i>trivora-28</i>	1	
<i>velivet</i>	1	
<i>vestura</i>	1	
<i>vienna</i>	1	
<i>vioverele</i>	1	
<i>volnea</i>	1	
<i>vyfemla</i>	1	
<i>vylibra</i>	1	
<i>wera</i>	1	
<i>xulane</i>	1	
<i>yuvafem</i>	1	
<i>zafemy</i>	1	
<i>zarah</i>	1	
<i>zovia 1/35</i>	1	
<i>zovia 1/35e</i>	1	
<i>zumandimine</i>	1	
Progestins		
<i>camila</i>	1	
<i>CRINONE</i>	2	PA
<i>deblitane</i>	1	
<i>DEPO-SUBQ PROVERA 104</i>	2	
<i>ELLA</i>	2	
<i>errin</i>	1	
<i>heather</i>	1	
<i>hydroxyprogesterone caproate injection 1.25gm/5ml</i>	1	PA; NDS
<i>incassia</i>	1	
<i>jencycla</i>	1	
<i>lyleg</i>	1	
<i>lyza</i>	1	
<i>medroxyprogesterone acetate injection, tablet</i>	1	
<i>megestrol acetate suspension, tablet</i>	1	PA
<i>nora-be</i>	1	
<i>norethindrone acetate tablet</i>	1	
<i>norethindrone tablet</i>	1	
<i>norlyda</i>	1	
<i>norlyroc</i>	1	
<i>progesterone capsule</i>	1	
<i>sharobel</i>	1	
<i>tulana</i>	1	
Selective Estrogen Receptor Modifying Agents		
<i>OSPHENA</i>	2	QL(31 EA per 31 days); PA
<i>raloxifene hydrochloride</i>	1	QL(31 EA per 31 days)

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Drug Name	Drug Tier	Requirements/Limits
Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)		
<i>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</i>		
ARMOUR THYROID	2	
EUTHYROX TABLET 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG, 25MCG, 50MCG, 75MCG, 88MCG	1	
<i>levothyroxine sodium tablet</i>	1	
LEVOOTHYROXINE SODIUM INJECTION 100MCG/5ML, 100MCG/ML, 200MCG/5ML, 500MCG/5ML	1	NDS
<i>levothyroxine sodium injection 100mcg, 200mcg, 500mcg</i>	1	NDS
LEVOXYL TABLET 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG, 25MCG, 50MCG, 75MCG, 88MCG	1	
<i>liothyronine sodium injection, tablet</i>	1	
<i>np thyroid 120</i>	1	
<i>np thyroid 15</i>	1	
<i>np thyroid 30</i>	1	
<i>np thyroid 60</i>	1	
<i>np thyroid 90</i>	1	
UNITHROID	1	
Hormonal Agents, Suppressant (Adrenal)		
<i>Hormonal Agents, Suppressant (Adrenal)</i>		
ISTURISA	2	PA; NDS
LYSODREN	2	NDS
Hormonal Agents, Suppressant (Pituitary)		
<i>Hormonal Agents, Suppressant (Pituitary)</i>		
<i>cabergoline</i>	1	
ELIGARD	2	PA
FIRMAGON INJECTION 80MG	2	PA
FIRMAGON INJECTION 120MG/VIAL	2	PA; NDS
LANREOTIDE ACETATE	2	NDS
<i>leuprolide acetate injection 1mg/0.2ml</i>	1	PA
LUPRON DEPOT (1-MONTH)	2	PA
LUPRON DEPOT (3-MONTH)	2	PA
LUPRON DEPOT (4-MONTH)	2	PA
LUPRON DEPOT (6-MONTH)	2	PA
LUPRON DEPOT-PED (1-MONTH)	2	PA; NDS
LUPRON DEPOT-PED (3-MONTH)	2	PA; NDS
LUPRON DEPOT-PED INJECTION 45MG	2	QL(1 EA per 168 days); PA; NDS
MYFEMBREE	2	QL(28 EA per 28 days); PA; NDS
<i>octreotide acetate</i>	1	PA
ORGOVYX	2	QL(31 EA per 31 days); PA; NDS
ORIAHNN	2	QL(56 EA per 28 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
SANDOSTATIN LAR DEPOT	2	PA; NDS
SIGNIFOR	2	QL(62 ML per 31 days); PA; NDS
SOMATULINE DEPOT	2	NDS
SOMAVERT	2	QL(31 EA per 31 days); PA; NDS
SYNAREL	2	NDS
TRELSTAR MIXJECT	2	NDS
VANTAS	2	PA
ZOLADEX	2	
Hormonal Agents, Suppressant (Thyroid)		
<i>Antithyroid Agents</i>		
<i>methimazole tablet 10mg, 5mg</i>	1	
<i>propylthiouracil tablet</i>	1	
Immunological Agents		
<i>Angioedema Agents</i>		
BERINERT	2	PA; NDS
CINRYZE	2	PA; NDS
<i>icatibant acetate</i>	1	QL(18 ML per 31 days); PA; NDS
<i>Immunoglobulins</i>		
ATGAM	2	NDS
BIVIGAM INJECTION 10%, 5GM/50ML	2	PA; NDS
FLEBOGAMMA DIF	2	PA; NDS
GAMASTAN	2	
GAMMAGARD LIQUID	2	PA; NDS
GAMMAGARD S/D IGA LESS THAN 1MCG/ML	2	PA; NDS
GAMMAKED INJECTION 10GM/100ML, 1GM/10ML, 20GM/200ML, 5GM/50ML	2	PA; NDS
GAMMAPLEX INJECTION 10GM/100ML, 10GM/200ML, 20GM/200ML, 20GM/400ML, 5GM/100ML, 5GM/50ML	2	PA; NDS
GAMUNEX-C	2	PA; NDS
HIZENTRA	2	PA; NDS
HYPERRHO S/D MINI-DOSE	2	
HYPERRHO S/D INJECTION 1500UNIT	2	
HYQVIA	2	PA; NDS
MICRHOGAM ULTRA-FILTERED PLUS	2	
NABI-HB INJECTION 312UNIT/ML	2	B/D
OCTAGAM	2	PA; NDS
PANZYGA	2	PA; NDS
PRIVIGEN	2	PA; NDS
RHOGAM ULTRA-FILTERED PLUS	2	
THYMOGLOBULIN	2	NDS
VARIZIG INJECTION 125UNIT/1.2ML	2	NDS
WINRHO SDF INJECTION 15000UNIT/13ML, 1500UNIT/1.3ML, 2500UNIT/2.2ML, 5000UNIT/4.4ML	2	NDS

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Drug Name	Drug Tier	Requirements/Limits
Immunological Agents, Other		
ACTEMRA ACTPEN	2	QL(3.6 ML per 28 days); PA; NDS
ACTEMRA INJECTION 200MG/10ML, 400MG/20ML, 80MG/4ML	2	PA; NDS
ACTEMRA INJECTION 162MG/0.9ML	2	QL(3.6 ML per 28 days); PA; NDS
ARCALYST	2	PA; NDS
BENLYSTA	2	QL(4 ML per 28 days); PA; NDS
COSENTYX SENSOREADY PEN	2	PA; NDS
COSENTYX UNOREADY	2	PA; NDS
COSENTYX INJECTION 150MG/ML, 75MG/0.5ML	2	PA; NDS
DUPIXENT INJECTION 100MG/0.67ML	2	QL(1.34 ML per 28 days); PA; NDS
DUPIXENT INJECTION 200MG/1.14ML	2	QL(4.56 ML per 28 days); PA; NDS
DUPIXENT INJECTION 300MG/2ML	2	QL(8 ML per 28 days); PA; NDS
EMPAVELI	2	QL(160 ML per 28 days); PA; NDS
ENJAYMO	2	PA; NDS
ENTYVIO INJECTION 300MG	2	PA; NDS
GAMIFANT	2	PA; NDS
ILARIS INJECTION 150MG/ML	2	PA; NDS
KINERET	2	QL(18.8 ML per 28 days); PA; NDS
NULOJIX	2	NDS
ORENCIA CLICKJECT	2	QL(4 ML per 28 days); PA; NDS
ORENCIA INJECTION 250MG	2	PA; NDS
ORENCIA INJECTION 50MG/0.4ML	2	QL(1.6 ML per 28 days); PA; NDS
ORENCIA INJECTION 87.5MG/0.7ML	2	QL(2.8 ML per 28 days); PA; NDS
ORENCIA INJECTION 125MG/ML	2	QL(4 ML per 28 days); PA; NDS
OTEZLA TABLET THERAPY PACK	2	QL(110 EA per 365 days); PA; NDS
OTEZLA TABLET	2	QL(62 EA per 31 days); PA; NDS
RIDAURA	2	NDS
RINVOQ	2	QL(31 EA per 31 days); PA; NDS
SIMULECT	2	NDS
SKYRIZI PEN	2	PA; NDS
SKYRIZI INJECTION 150MG/ML, 75MG/0.83ML	2	PA; NDS
SKYRIZI INJECTION 180MG/1.2ML	2	QL(1.2 ML per 56 days); PA; NDS
SKYRIZI INJECTION 360MG/2.4ML	2	QL(2.4 ML per 56 days); PA; NDS
SKYRIZI INJECTION 600MG/10ML	2	QL(30 ML per 365 days); PA; NDS
SOLIRIS	2	PA; NDS
STELARA	2	PA; NDS
SYNAGIS	2	NDS
TEPEZZA	2	PA; NDS
XELJANZ XR	2	QL(31 EA per 31 days); PA; NDS
XELJANZ SOLUTION	2	PA; NDS
XELJANZ TABLET	2	QL(62 EA per 31 days); PA; NDS
XOLAIR INJECTION 75MG/0.5ML	2	QL(1 ML per 28 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
XOLAIR INJECTION 150MG	2	QL(4 EA per 28 days); PA; NDS
XOLAIR INJECTION 150MG/ML	2	QL(8 ML per 28 days); PA; NDS
Immunostimulants		
ACTIMMUNE	2	NDS
BESREMI	2	PA; NDS
INTRON A	2	PA; NDS
PEGASYS INJECTION 180MCG/0.5ML	2	QL(2 ML per 28 days); NDS
PEGASYS INJECTION 180MCG/ML	2	QL(4 ML per 28 days); NDS
Immunosuppressants		
<i>azathioprine injection</i>	1	B/D; NDS
<i>azathioprine tablet 50mg</i>	1	B/D
CIMZIA STARTER KIT	2	QL(6 EA per 365 days); PA; NDS
CIMZIA INJECTION 200MG	2	QL(1 EA per 28 days); PA; NDS
CIMZIA INJECTION 200MG/ML	2	QL(2 EA per 28 days); PA; NDS
<i>cyclosporine modified</i>	1	B/D
<i>cyclosporine capsule 100mg, 25mg</i>	1	B/D
<i>cyclosporine injection 50mg/ml</i>	1	NDS
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS	2	PA
CYLTEZO STARTER PACKAGE FOR PSORIASIS	2	PA
CYLTEZO INJECTION 10MG/0.2ML, 20MG/0.4ML	2	QL(2 EA per 28 days); PA
CYLTEZO INJECTION 40MG/0.8ML	2	QL(4 EA per 28 days); PA
ENBREL MINI	2	QL(8 ML per 28 days); PA; NDS
ENBREL SURECLICK	2	QL(8 ML per 28 days); PA; NDS
ENBREL INJECTION 25MG	2	QL(16 EA per 28 days); PA; NDS
ENBREL INJECTION 25MG/0.5ML	2	QL(16 ML per 28 days); PA; NDS
ENBREL INJECTION 50MG/ML	2	QL(8 ML per 28 days); PA; NDS
ENSPRYNG	2	PA; NDS
<i>everolimus tablet 0.25mg, 0.5mg, 0.75mg, 1mg</i>	1	B/D
<i>gengraf capsule 100mg, 25mg</i>	1	B/D
<i>gengraf solution</i>	1	B/D
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 0	2	QL(4 EA per 365 days); PA; NDS
HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 80MG/0.8ML	2	QL(6 EA per 365 days); PA; NDS
HUMIRA PEN-CD/UC/HS STARTER	2	PA; NDS
HUMIRA PEN-PEDIATRIC UC STARTER PACK	2	PA; NDS
HUMIRA PEN-PS/UV STARTER INJECTION 40MG/0.8ML	2	PA; NDS
HUMIRA PEN-PS/UV STARTER INJECTION 0	2	QL(6 EA per 365 days); PA; NDS
HUMIRA PEN INJECTION 80MG/0.8ML	2	QL(2 EA per 28 days); PA; NDS
HUMIRA PEN INJECTION 40MG/0.4ML, 40MG/0.8ML	2	QL(4 EA per 28 days); PA; NDS
HUMIRA INJECTION 10MG/0.1ML, 20MG/0.2ML	2	QL(2 EA per 28 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
HUMIRA INJECTION 40MG/0.4ML, 40MG/0.8ML	2	QL(4 EA per 28 days); PA; NDS
<i>inflectra</i>	2	PA; NDS
<i>leflunomide</i>	1	QL(31 EA per 31 days)
<i>methotrexate sodium tablet</i>	1	
<i>methotrexate sodium injection 1gm/40ml, 1gm, 250mg/10ml, 50mg/2ml</i>	1	
<i>methotrexate injection 50mg/2ml</i>	1	
<i>mycophenolate mofetil capsule, injection, suspension reconstituted, tablet</i>	1	B/D
<i>mycophenolic acid dr</i>	1	B/D
PROGRAF INJECTION	2	
PROGRAF PACKET	2	B/D
REMICADE	2	PA; NDS
<i>renflexis</i>	2	PA; NDS
REZUROCK	2	QL(62 EA per 31 days); PA; NDS
SANDIMMUNE SOLUTION	2	B/D
SIMPONI INJECTION 100MG/ML	2	PA; NDS
SIMPONI INJECTION 50MG/0.5ML	2	QL(0.5 ML per 28 days); PA; NDS
<i>sirolimus solution, tablet</i>	1	B/D
<i>tacrolimus capsule 0.5mg, 1mg, 5mg</i>	1	B/D
XATMEP	3	PA
<i>yuflyma 1-pen kit</i>	2	QL(6 EA per 28 days); PA
<i>yuflyma 2-pen kit</i>	2	QL(6 EA per 28 days); PA
YUFLYMA 2-SYRINGE KIT	2	QL(3 EA per 28 days); PA
Vaccines		
ABRYSVO	2	QL(1 EA per 1 days); PA
ACTHIB INJECTION 0	2	QL(1 EA per 1 days)
ADACEL	1	QL(0.5 ML per 1 days)
AREXVY	2	QL(1 EA per 1 days); PA
BCG VACCINE INJECTION 50MG	2	QL(1 EA per 1 days)
BEXSERO	2	QL(0.5 ML per 1 days)
BOOSTRIX	1	QL(0.5 ML per 1 days)
DAPTACEL INJECTION 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	1	QL(0.5 ML per 1 days)
DENGVAXIA	2	QL(1 EA per 1 days)
DIPHTHERIA/TETANUS TOXOIDS ADSORBED PEDIATRIC	2	QL(0.5 ML per 1 days)
ENGERIX-B INJECTION 10MCG/0.5ML	2	QL(0.5 ML per 1 days); B/D
ENGERIX-B INJECTION 20MCG/ML	2	QL(1 ML per 1 days); B/D
GARDASIL 9	2	QL(0.5 ML per 1 days)
HAVRIX INJECTION 720ELU/0.5ML	2	QL(1 ML per 999 days)
HAVRIX INJECTION 1440ELU/ML	2	QL(2 ML per 999 days)
HEPLISAV-B	2	QL(0.5 ML per 1 days); B/D

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Drug Name	Drug Tier	Requirements/Limits
HIBERIX	2	QL(1 EA per 1 days)
IMOVAZ RABIES (H.D.C.V.)	2	QL(1 EA per 1 days); B/D
INFANRIX	1	QL(0.5 ML per 1 days)
IPOP INACTIVATED IPV	2	QL(0.5 ML per 1 days)
IXIARO	2	QL(0.5 ML per 1 days)
JYNNEOS	2	QL(0.5 ML per 1 days)
KINRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	1	QL(0.5 ML per 1 days)
M-M-R II	1	QL(1 EA per 1 days)
MENACTRA	2	QL(0.5 ML per 1 days)
MENQUADFI	2	QL(0.5 ML per 1 days)
MENVEO INJECTION 0	2	QL(1 EA per 1 days)
MENVEO INJECTION 0	2	QL(1 ML per 1 days)
PEDIARIX INJECTION 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	2	QL(0.5 ML per 1 days)
PEDVAX HIB INJECTION 7.5MCG/0.5ML	2	QL(0.5 ML per 1 days)
PENTACEL	2	QL(1 EA per 1 days)
PREHEVBRIOD	2	QL(1 ML per 1 days); B/D
PRIORIX	1	QL(1 EA per 1 days)
PROQUAD	1	QL(1 EA per 1 days)
QUADRACEL	1	QL(0.5 ML per 1 days)
RABAVERT	2	QL(1 EA per 1 days); B/D
RECOMBIVAX HB INJECTION 5MCG/0.5ML	2	QL(0.5 ML per 1 days); B/D
RECOMBIVAX HB INJECTION 10MCG/ML, 40MCG/ML	2	QL(1 ML per 1 days); B/D
ROTARIX SUSPENSION RECONSTITUTED	2	QL(1 ML per 1 days)
ROTARIX SUSPENSION	2	QL(1.5 ML per 1 days); NDS
ROTAQUE SOLUTION	2	QL(2 ML per 1 days)
SHINGRIX	1	QL(1 EA per 1 days); PA
stamaril	2	QL(1 EA per 1 days)
TDVAX	2	QL(0.5 ML per 1 days)
TENIVAC	2	QL(0.5 ML per 1 days)
TICOVAC INJECTION 1.2MCG/0.25ML	2	QL(0.25 ML per 1 days)
TICOVAC INJECTION 2.4MCG/0.5ML	2	QL(0.5 ML per 1 days)
TRUMENBA	2	QL(0.5 ML per 1 days)
TWINRIX	2	QL(1 ML per 1 days)
TYPHIM VI	2	QL(0.5 ML per 1 days)
VAQTA INJECTION 25UNIT/0.5ML	2	QL(1 ML per 999 days)
VAQTA INJECTION 50UNIT/ML	2	QL(2 ML per 999 days)
VARIVAX	2	QL(1 EA per 1 days)
YF-VAX	2	QL(1 EA per 1 days)

Inflammatory Bowel Disease Agents

Aminosalicylates

balsalazide disodium

1

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Drug Name	Drug Tier	Requirements/Limits
DIPENTUM	2	NDS
<i>mesalamine dr</i>	1	
<i>mesalamine er</i>	1	
<i>mesalamine suppository</i>	1	
<i>mesalamine enema</i>	1	QL(1860 ML per 31 days)
<i>mesalamine kit</i>	1	QL(4 EA per 28 days)
PENTASA	2	
SFROWASA	3	QL(1860 ML per 31 days); NDS
<i>sulfasalazine tablet, tablet delayed release</i>	1	
Glucocorticoids		
<i>budesonide er</i>	1	NDS
<i>budesonide capsule delayed release particles 3mg</i>	1	
<i>hydrocortisone cream 1%, 2.5%</i>	1	
<i>hydrocortisone enema 100mg/60ml</i>	1	
<i>procto-med hc</i>	1	
<i>procto-pak</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
Metabolic Bone Disease Agents		
Metabolic Bone Disease Agents		
<i>alendronate sodium solution</i>	1	QL(300 ML per 28 days)
<i>alendronate sodium tablet 10mg</i>	1	QL(31 EA per 31 days)
<i>alendronate sodium tablet 35mg, 70mg</i>	1	QL(4 EA per 28 days)
<i>calcitonin-salmon solution</i>	1	QL(3.7 ML per 30 days)
<i>calcitriol capsule 0.25mcg, 0.5mcg</i>	1	B/D
<i>calcitriol injection 1mcg/ml</i>	1	B/D
<i>calcitriol oral solution 1mcg/ml</i>	1	B/D
<i>cinacalcet hydrochloride tablet 90mg</i>	1	QL(124 EA per 31 days)
<i>cinacalcet hydrochloride tablet 30mg, 60mg</i>	1	QL(62 EA per 31 days)
<i>doxercalciferol</i>	1	B/D
FORTEO INJECTION 600MCG/2.4ML	2	QL(2.4 ML per 28 days); PA; NDS
<i>ibandronate sodium injection</i>	1	B/D
<i>ibandronate sodium tablet</i>	1	QL(1 EA per 28 days)
NATPARA	2	QL(2 EA per 28 days); PA; NDS
<i>paricalcitol capsule</i>	1	B/D
PROLIA	2	QL(1 ML per 180 days)
<i>risedronate sodium dr</i>	1	QL(4 EA per 28 days); ST
<i>risedronate sodium tablet 150mg</i>	1	QL(1 EA per 28 days); ST
<i>risedronate sodium tablet 30mg</i>	1	QL(31 EA per 31 days)
<i>risedronate sodium tablet 5mg</i>	1	QL(31 EA per 31 days); ST
<i>risedronate sodium tablet 35mg</i>	1	QL(4 EA per 28 days); ST
TERIPARATIDE	2	QL(2.48 ML per 28 days); PA; NDS
TYMLOS	2	QL(1.56 ML per 30 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
XGEVA	2	PA; NDS
zoledronic acid injection 4mg/100ml, 4mg/5ml, 5mg/100ml	1	B/D
Miscellaneous Therapeutic Agents		
<i>Miscellaneous Therapeutic Agents</i>		
alcohol prep pads	1	
AQUASTAT	2	
argyle sterile water 100ml	1	
b-d insulin syringe ultrafine ii/0.3ml/31g x 5/16"	2	QL(200 EA per 31 days)
BACTERIOSTATIC WATER FOR INJECTION/BENZYL ALCOHOL INJECTION 0.9%; 0	2	
bd insulin syringe safetyglide/1ml/29g x 1/2"	2	QL(200 EA per 31 days)
bd insulin syringe ultra-fine/0.5ml/30g x 12.7mm	2	QL(200 EA per 31 days)
bd insulin syringe ultra-fine/1ml/31g x 8mm	2	QL(200 EA per 31 days)
bd pen needle/original/ultra-fine/29g x 12.7mm	2	QL(200 EA per 31 days)
bd posiflush	1	
curity gauze pads 2"x2"	2	
heparin lock flush injection 100unit/ml, 10unit/ml, 1unit/ml	1	
heparin sodium lock flush injection 100unit/ml, 10unit/ml	1	
IGALMI	2	PA
lagevrio	2	QL(40 EA per 5 days)
monoject pharma grade flush syringe	1	
monoject sodium chloride flush	1	
normal saline i.v. flush	1	
omnipod 5 g6 intro kit (gen 5)	2	
omnipod 5 g6 pods (gen 5)	2	
omnipod classic pdm starter kit (gen 3)	2	
omnipod classic pods (gen 3)	2	
omnipod dash intro kit (gen 4)	2	
omnipod dash pdm kit (gen 4)	2	
omnipod dash pods (gen 4)	2	
omnipod go 10 units/day	2	
omnipod go 15 units/day	2	
omnipod go 20 units/day	2	
omnipod go 25 units/day	2	
omnipod go 30 units/day	2	
omnipod go 35 units/day	2	
omnipod go 40 units/day	2	
paxlovid tablet therapy pack 150mg; 100mg	2	QL(20 EA per 5 days)
paxlovid tablet therapy pack 150mg; 100mg	2	QL(30 EA per 5 days)
REMDESIVIR INJECTION 100MG	2	NDS
saline flush	1	
saline flush zr/sterile field	1	
sodium chloride flush	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>sterile water for injection</i>	1	
STERILE WATER FOR IRRIGATION	1	
<i>swabflush saline flush</i>	1	
v-go 20	2	
v-go 30	2	
v-go 40	2	
VEKLURY INJECTION 100MG	2	NDS
Ophthalmic Agents		
<i>Ophthalmic Agents, Other</i>		
<i>atropine sulfate solution 1%</i>	1	
BLEPHAMIDE	2	
<i>blephamide s.o.p.</i>	2	
<i>brimonidine tartrate/timolol maleate</i>	1	
byooviz	2	NDS
CEQUA	2	QL(60 EA per 30 days); PA
<i>cyclosporine emulsion 0.05%</i>	1	QL(60 EA per 30 days)
CYSTADROPS	2	QL(20 ML per 28 days); NDS
CYSTARAN	2	QL(60 ML per 28 days); NDS
<i>dorzolamide hcl/timolol maleate</i>	1	
EYLEA	2	NDS
LACRISERT	2	
LUCENTIS	2	NDS
<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	1	
<i>neomycin/polymyxin/dexamethasone</i>	1	
<i>neomycin/polymyxin/hydrocortisone ophthalmic suspension 1%; 3.5mg/ml; 10000unit/ml</i>	1	
OXERVATE	2	QL(28 ML per 28 days); PA; NDS
PRED-G	2	
PRED-G S.O.P.	2	
<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	1	
SYFOVRE	2	PA; NDS
TOBRADEX OINTMENT	2	
<i>tobramycin/dexamethasone</i>	1	
IIDRA	2	QL(60 EA per 30 days); PA
ZYLET	2	
<i>Ophthalmic Anti-allergy Agents</i>		
ALOCRIL	2	
ALOMIDE	2	
<i>azelastine hcl ophthalmic solution 0.05%</i>	1	
<i>cromolyn sodium solution 4%</i>	1	
<i>epinastine hcl</i>	1	
LASTACRAFT	2	
<i>olopatadine hcl ophthalmic solution 0.1%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
<i>olopatadine hydrochloride solution 0.2%</i>	1	
Ophthalmic Anti-Infectives		
<i>ak-poly-bac</i>	1	
<i>AZASITE</i>	2	
<i>bacitracin</i>	1	
<i>bacitracin/polymyxin b</i>	1	
<i>BESIVANCE</i>	2	
<i>CILOXAN OINTMENT</i>	2	
<i>ciprofloxacin hydrochloride solution 0.3%</i>	1	
<i>erythromycin ointment 5mg/gm</i>	1	
<i>gatifloxacin</i>	1	
<i>gentak ointment</i>	1	
<i>gentamicin sulfate ophthalmic solution 0.3%</i>	1	
<i>KLARITY-A</i>	2	
<i>moxifloxacin hydrochloride ophthalmic solution 0.5%</i>	1	
<i>NATACYN</i>	2	
<i>neomycin/bacitracin/polymyxin</i>	1	
<i>neomycin/polymyxin/bacitracin</i>	1	
<i>neomycin/polymyxin/gramicidin</i>	1	
<i>ofloxacin ophthalmic solution 0.3%</i>	1	
<i>polycin</i>	1	
<i>polymyxin b sulfate(trimethoprim sulfate)</i>	1	
<i>sulfacetamide sodium ointment 10%</i>	1	
<i>sulfacetamide sodium solution 10%</i>	1	
<i>tobramycin solution 0.3%</i>	1	
<i>TOBREX OINTMENT</i>	2	
<i>trifluridine</i>	1	
<i>trimethoprim sulfate/polymyxin b sulfate</i>	1	
Ophthalmic Anti-inflammatories		
<i>ALREX</i>	2	
<i>bromfenac</i>	1	
<i>dexamethasone sodium phosphate ophthalmic solution 0.1%</i>	1	
<i>diclofenac sodium ophthalmic solution 0.1%</i>	1	
<i>difluprednate</i>	1	
<i>FLAREX</i>	2	
<i>fluorometholone</i>	1	
<i>flurbiprofen sodium</i>	1	
<i>FML</i>	2	
<i>FML FORTE</i>	2	
<i>ILEVRO</i>	2	QL(6 ML per 31 days)
<i>ketorolac tromethamine ophthalmic solution 0.4%, 0.5%</i>	1	
<i>LOTEMAX SM</i>	2	
<i>LOTEMAX OINTMENT</i>	2	

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Drug Name	Drug Tier	Requirements/Limits
LOTEMAX GEL	3	
<i>loteprednol etabonate</i>	1	
MAXIDEX SUSPENSION	2	
NEVANAC	2	QL(6 ML per 31 days)
OZURDEX	2	
PRED MILD	2	
<i>prednisolone acetate</i>	1	
<i>prednisolone sodium phosphate ophthalmic solution 1%</i>	1	
PROLENSA	3	
<i>Ophthalmic Beta-Adrenergic Blocking Agents</i>		
<i>betaxolol hcl solution 0.5%</i>	1	
BETOPTIC-S	2	
<i>carteolol hcl</i>	1	
<i>levobunolol hcl solution 0.5%</i>	1	
<i>timolol maleate ophthalmic gel forming</i>	1	
<i>timolol maleate solution 0.25%, 0.5%</i>	1	
TIMOPTIC OCUDOSE SOLUTION 0.25%	2	
<i>Ophthalmic Intraocular Pressure Lowering Agents, Other</i>		
ALPHAGAN P SOLUTION 0.1%	2	
<i>apraclonidine</i>	1	
<i>brimonidine tartrate</i>	1	
<i>brinzolamide</i>	1	
<i>dorzolamide hydrochloride</i>	1	
IOPIDINE SOLUTION 1%	2	
<i>methazolamide tablet</i>	1	
<i>pilocarpine hcl solution 1%, 2%, 4%</i>	1	
SIMBRINZA	2	
<i>Ophthalmic Prostaglandin and Prostamide Analogs</i>		
<i>bimatoprost</i>	1	QL(5 ML per 31 days)
<i>latanoprost solution</i>	1	QL(2.5 ML per 25 days)
LUMIGAN	2	QL(2.5 ML per 25 days)
<i>tafluprost</i>	1	
<i>travoprost</i>	1	QL(2.5 ML per 25 days)
ZIOPTAN	2	
Otic Agents		
Otic Agents		
<i>acetic acid</i>	1	
CIPRO HC	2	
CIPROFLOXACIN	1	
<i>ciprofloxacin/dexamethasone</i>	1	
<i>flac</i>	1	
<i>fluocinolone acetonide ear drops</i>	1	
<i>fluocinolone acetonide oil 0.01%</i>	1	

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Drug Name	Drug Tier	Requirements/Limits
hydrocortisone/acetic acid	1	
neomycin/polymyxin/hc	1	
neomycin/polymyxin/hydrocortisone otic suspension 1%; 3.5mg/ml; 10000unit/ml	1	
ofloxacin otic solution 0.3%	1	
Respiratory Tract/Pulmonary Agents		
<i>Anti-inflammatories, Inhaled Corticosteroids</i>		
ALVESCO AEROSOL SOLUTION 160MCG/ACT	2	QL(12.2 GM per 30 days)
ALVESCO AEROSOL SOLUTION 80MCG/ACT	2	QL(6.1 GM per 30 days)
ASMANEX TWISTHALER 120 METERED DOSES	2	QL(1 EA per 30 days)
ASMANEX TWISTHALER 14 METERED DOSES	2	QL(1 EA per 14 days)
ASMANEX TWISTHALER 30 METERED DOSES	2	QL(1 EA per 30 days)
ASMANEX TWISTHALER 60 METERED DOSES	2	QL(1 EA per 30 days)
<i>budesonide suspension 0.25mg/2ml, 0.5mg/2ml, 1mg/2ml</i>	1	B/D
FLOVENT DISKUS AEROSOL POWDER BREATH ACTIVATED 250MCG/BLIST	2	QL(240 EA per 30 days)
FLOVENT DISKUS AEROSOL POWDER BREATH ACTIVATED 100MCG/BLIST, 50MCG/BLIST	2	QL(60 EA per 30 days)
FLOVENT HFA AEROSOL 44MCG/ACT	2	QL(10.6 GM per 30 days)
FLOVENT HFA AEROSOL 110MCG/ACT	2	QL(12 GM per 30 days)
FLOVENT HFA AEROSOL 220MCG/ACT	2	QL(24 GM per 30 days)
<i>flunisolide solution 0.025%</i>	1	QL(50 ML per 31 days)
<i>fluticasone propionate suspension 50mcg/act</i>	1	QL(16 GM per 30 days)
PULMICORT FLEXHALER AEROSOL POWDER BREATH ACTIVATED 90MCG/ACT	2	QL(1 EA per 30 days)
PULMICORT FLEXHALER AEROSOL POWDER BREATH ACTIVATED 180MCG/ACT	2	QL(2 EA per 30 days)
QVAR REDIHALER	2	QL(21.2 GM per 30 days)
<i>Antihistamines</i>		
<i>azelastine hcl nasal solution 0.15%</i>	1	QL(60 ML per 31 days)
<i>azelastine hydrochloride</i>	1	QL(60 ML per 31 days)
<i>cetirizine hydrochloride solution 1mg/ml</i>	1	QL(330 ML per 31 days)
<i>ciproheptadine hcl syrup</i>	1	PA
<i>ciproheptadine hydrochloride tablet</i>	1	PA
<i>desloratadine</i>	1	QL(31 EA per 31 days)
<i>diphenhydramine hcl injection 50mg/ml</i>	1	B/D
<i>diphenhydramine hydrochloride injection</i>	1	B/D
<i>levocetirizine dihydrochloride solution</i>	1	
<i>levocetirizine dihydrochloride tablet</i>	1	QL(31 EA per 31 days)
<i>olopatadine hcl nasal solution 0.6%</i>	1	QL(30.5 GM per 31 days)
<i>Antileukotrienes</i>		
<i>montelukast sodium tablet chewable, packet, tablet</i>	1	QL(31 EA per 31 days)
<i>zafirlukast</i>	1	QL(62 EA per 31 days)

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Bronchodilators, Anticholinergic		
ATROVENT HFA	2	QL(25.8 GM per 30 days)
INCRUSE ELLIPTA	2	
<i>ipratropium bromide inhalation solution</i>	1	B/D
<i>ipratropium bromide nasal solution 0.03%</i>	1	QL(30 ML per 28 days)
<i>ipratropium bromide nasal solution 0.06%</i>	1	QL(45 ML per 30 days)
SPIRIVA HANDIHALER	2	QL(31 EA per 31 days)
SPIRIVA RESPIMAT	2	QL(4 GM per 30 days)
<i>tiotropium bromide</i>	1	QL(31 EA per 31 days)
TUDORZA PRESSAIR	2	QL(1 EA per 30 days); ST
Bronchodilators, Sympathomimetic		
ADRENALIN	1	
<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	1	QL(13.4 GM per 30 days)
<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	1	QL(17 GM per 30 days)
<i>albuterol sulfate syrup, tablet</i>	1	
<i>albuterol sulfate nebulization solution</i>	1	B/D
<i>arformoterol tartrate</i>	1	B/D
<i>epinephrine injection 1mg/ml, 30mg/30ml</i>	1	
<i>epinephrine injection 0.15mg/0.15ml, 0.15mg/0.3ml, 0.3mg/0.3ml</i>	1	QL(4 EA per 31 days)
<i>formoterol fumarate nebulization solution</i>	1	B/D
<i>levalbuterol hcl nebulization solution</i>	1	B/D
<i>levalbuterol hydrochloride nebulization solution 0.63mg/3ml</i>	1	B/D
<i>levalbuterol nebulization solution</i>	1	B/D
PERFOROMIST	3	B/D
PROAIR RESPICLICK	2	QL(2 EA per 30 days); ST
SEREVENT DISKUS	2	QL(60 EA per 30 days)
STRIVERDI RESPIMAT	2	QL(4 GM per 30 days)
SYMJEPI	2	QL(4 EA per 31 days)
<i>terbutaline sulfate injection, tablet</i>	1	
VENTOLIN HFA	2	QL(36 GM per 30 days)
XOPENEX HFA	2	QL(30 GM per 30 days); ST
Cystic Fibrosis Agents		
CAYSTON	2	QL(84 ML per 28 days); NDS
KALYDECO PACKET	2	QL(56 EA per 28 days); PA; NDS
KALYDECO TABLET	2	QL(62 EA per 31 days); PA; NDS
ORKAMBI TABLET	2	QL(124 EA per 31 days); PA; NDS
ORKAMBI PACKET	2	QL(56 EA per 28 days); PA; NDS
PULMOZYME	2	B/D; NDS
SYMDEKO	2	QL(56 EA per 28 days); PA; NDS
<i>tobramycin nebulization solution 300mg/5ml</i>	1	QL(280 ML per 28 days); B/D; NDS
TRIKAFTA THERAPY PACK	2	QL(56 EA per 28 days); PA; NDS
TRIKAFTA TABLET THERAPY PACK	2	QL(84 EA per 28 days); PA; NDS

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Drug Name	Drug Tier	Requirements/Limits
Mast Cell Stabilizers		
cromolyn sodium nebulization solution 20mg/2ml	1	B/D
Phosphodiesterase Inhibitors, Airways Disease		
DALIRESP	2	QL(31 EA per 31 days); PA
roflumilast	1	QL(31 EA per 31 days); PA
theophylline	1	
theophylline er tablet extended release 12 hour, tablet extended release 24 hour	1	
Pulmonary Antihypertensives		
ADEMPAS	2	QL(93 EA per 31 days); PA; NDS
alyq (pulmonary arterial hypertension) oral tablet 20mg	1	QL(62 EA per 31 days); PA
ambrisentan	1	QL(31 EA per 31 days); PA; NDS
bosentan	1	QL(62 EA per 31 days); PA; NDS
epoprostenol sodium	1	B/D; NDS
OPSUMIT	2	QL(31 EA per 31 days); PA; NDS
sildenafil citrate (pulmonary arterial hypertension) oral suspension reconstituted 10mg/ml	1	QL(231 ML per 31 days); PA; NDS
sildenafil citrate (pulmonary arterial hypertension) oral tablet 20mg	1	QL(93 EA per 31 days); PA
tadalafil (pulmonary arterial hypertension) oral tablet 20mg	1	QL(62 EA per 31 days); PA
TRACLEER TABLET SOLUBLE	2	QL(124 EA per 31 days); PA; NDS
treprostинil	1	PA; NDS
TYVASO	2	B/D; NDS
TYVASO DPI MAINTENANCE KIT	2	NDS
TYVASO DPI TITRATION KIT	2	NDS
TYVASO REFILL	2	B/D; NDS
TYVASO STARTER	2	B/D; NDS
UPTRAVI TITRATION PACK	2	QL(400 EA per 365 days); PA; NDS
UPTRAVI INJECTION	2	PA; NDS
UPTRAVI TABLET	2	QL(62 EA per 31 days); PA; NDS
VENTAVIS	2	B/D; NDS
Pulmonary Fibrosis Agents		
OFEV	2	QL(62 EA per 31 days); PA; NDS
pirfenidone tablet 267mg	1	QL(186 EA per 31 days); PA; NDS
pirfenidone tablet 534mg, 801mg	1	QL(93 EA per 31 days); PA; NDS
Respiratory Tract Agents, Other		
acetylcysteine solution	1	B/D
ADVAIR HFA	2	QL(12 GM per 30 days)
ANORO ELLIPTA	2	QL(60 EA per 30 days)
benzonatate capsule 100mg, 200mg	1	
BREO ELLIPTA	2	QL(60 EA per 30 days)
breyna	1	QL(10.3 GM per 30 days)
budesonide/formoterol fumarate dihydrate	1	QL(10.2 GM per 30 days)

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COMBIVENT RESPIMAT	2	QL(8 GM per 30 days)
DULERA	2	QL(13 GM per 30 days); PA
FASENRA	2	QL(1 ML per 28 days); PA; NDS
FASENRA PEN	2	QL(1 ML per 28 days); PA; NDS
<i>fluticasone propionate/salmeterol diskus</i>	1	QL(60 EA per 30 days)
<i>fluticasone propionate/salmeterol aerosol powder breath activated 500mcg/act; 50mcg/act</i>	1	QL(60 EA per 30 days)
<i>fluticasone propionate/salmeterol aerosol powder breath activated 113mcg/act; 14mcg/act, 232mcg/act; 14mcg/act, 55mcg/act; 14mcg/act</i>	2	QL(1 EA per 30 days)
<i>ipratropium bromide/albuterol sulfate</i>	1	B/D
NUCALA INJECTION 40MG/0.4ML	2	QL(0.4 ML per 28 days); PA; NDS
NUCALA INJECTION 100MG	2	QL(3 EA per 28 days); PA; NDS
NUCALA INJECTION 100MG/ML	2	QL(3 ML per 28 days); PA; NDS
<i>promethazine dm</i>	1	
<i>promethazine hydrochloride/dextromethorphan hydrobromide</i>	1	
<i>promethazine vc</i>	1	PA
<i>promethazine vc/codeine</i>	1	NDS
<i>promethazine/codeine syrup</i>	1	NDS
<i>promethazine/dextromethorphan syrup</i>	1	
<i>promethazine/phenylephrine</i>	1	PA
<i>promethazine/phenylephrine/codeine</i>	1	NDS
STIOLTO RESPIMAT	2	QL(4 GM per 30 days)
SYMBICORT	2	QL(10.2 GM per 30 days)
TRELEGY ELLIPTA	2	QL(60 EA per 30 days)
wixela inhba	1	QL(60 EA per 30 days)
Skeletal Muscle Relaxants		
Skeletal Muscle Relaxants		
<i>chlorzoxazone tablet 500mg</i>	1	PA
<i>cyclobenzaprine hydrochloride tablet 10mg, 5mg</i>	1	PA
Sleep Disorder Agents		
Sleep Promoting Agents		
BELSOMRA	2	QL(31 EA per 31 days)
DAYVIGO	2	QL(31 EA per 31 days)
<i>eszopiclone</i>	1	QL(31 EA per 31 days); PA
HETLIOZ	2	QL(31 EA per 31 days); PA; NDS
<i>ramelteon</i>	1	QL(31 EA per 31 days)
<i>tasimelteon</i>	1	QL(31 EA per 31 days); PA; NDS
<i>temazepam</i>	1	QL(31 EA per 31 days); PA
<i>zaleplon capsule 5mg</i>	1	QL(31 EA per 31 days)
<i>zaleplon capsule 10mg</i>	1	QL(62 EA per 31 days)
<i>zolpidem tartrate tablet</i>	1	QL(31 EA per 31 days); PA
Wakefulness Promoting Agents		

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<i>armodafinil</i>	1	QL(31 EA per 31 days); PA
<i>modafinil tablet 100mg</i>	1	QL(31 EA per 31 days); PA
<i>modafinil tablet 200mg</i>	1	QL(62 EA per 31 days); PA
XYREM	2	QL(540 ML per 30 days); PA; NDS

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OTC products

Drug Name	Drug Tier	Requirements/Limits
Respiratory Tract/Pulmonary Agents		
<i>Respiratory Tract Agents, Other</i>		
<i>codeine/guaifenesin solution</i>	1	NDS
<i>g tussin ac</i>	1	NDS
<i>guaiatussin ac</i>	1	NDS
<i>guaifenesin ac syrup</i>	1	NDS
<i>guaifenesin/codeine solution</i>	1	NDS
<i>m-clear wc</i>	1	NDS
<i>maxi-tuss ac</i>	1	NDS
<i>virtussin a/c</i>	1	NDS
<i>virtussin ac/alc</i>	1	NDS
<i>virtussin dac solution 10mg/5ml; 100mg/5ml; 30mg/5ml; 70%</i>	1	NDS

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<i>abacavir</i>	29	<i>albendazole</i>	25
<i>abacavir sulfate/lamivudine</i>	29	<i>albuterol sulfate</i>	78
<i>abacavir sulfate/lamivudine/zidovudine</i>	29	<i>albuterol sulfate hfa</i>	78
<i>ABELCET</i>	13	<i>alclometasone dipropionate</i>	47
<i>ABILITY MAINTENA</i>	26	<i>alcohol prep pads</i>	73
<i>abiraterone acetate</i>	16	<i>ALDACTAZIDE</i>	41
<i>ABRAXANE</i>	18	<i>ALDURAZYME</i>	56
<i>ABRYSVO</i>	70	<i>ALECENSA</i>	20
<i>acamprosate calcium dr</i>	4	<i>alendronate sodium</i>	72
<i>acarbose</i>	32	<i>alfuzosin hcl er</i>	58
<i>acebutolol hydrochloride</i>	39	<i>ALIMTA</i>	17
<i>acetaminophen/codeine</i>	2	<i>ALIQOPA</i>	20
<i>acetazolamide</i>	41	<i>aliskiren</i>	41
<i>acetazolamide er</i>	41	<i>allopurinol</i>	14
<i>acetazolamide sodium</i>	41	<i>allopurinol sodium</i>	14
<i>acetic acid</i>	76	<i>almotriptan</i>	14
<i>ACETIC ACID 0.25%</i>	59	<i>almotriptan malate</i>	14
<i>acetylcysteine</i>	79	<i>ALOCRIL</i>	74
<i>acitretin</i>	47	<i>ALOMIDE</i>	74
<i>ACTEMRA</i>	68	<i>alosetron hydrochloride</i>	55
<i>ACTEMRA ACTPEN</i>	68	<i>ALPHAGAN P</i>	76
<i>ACTHAR</i>	59	<i>alprazolam</i>	31
<i>ACTHIB</i>	70	<i>ALREX</i>	75
<i>ACTIMMUNE</i>	69	<i>altavera</i>	60
<i>acyclovir</i>	31	<i>ALUNBRIG</i>	20
<i>acyclovir sodium</i>	31	<i>ALVESCO</i>	77
<i>ADACEL</i>	70	<i>alyacen 1/35</i>	60
<i>ADAKVEO</i>	37	<i>alyacen 7/7/7</i>	60
<i>adapalene</i>	47	<i>alyq</i>	79
<i>adapalene pump</i>	47	<i>amabelz</i>	60
<i>ADCETRIS</i>	23	<i>amantadine hcl</i>	25
<i>adefovir dipivoxil</i>	28	<i>AMBISOME</i>	13
<i>ADEMPAS</i>	79	<i>ambrisentan</i>	79
<i>adenosine</i>	39	<i>amethia</i>	60
<i>ADRENALIN</i>	78	<i>amethyst</i>	60
<i>adriamycin</i>	18	<i>amikacin sulfate</i>	4
<i>ADSTILADRIN</i>	18	<i>amiloride hcl</i>	42
<i>ADVAIR HFA</i>	79	<i>amiloride/hydrochlorothiazide</i>	41
<i>afirmelle</i>	60	<i>aminocaproic acid</i>	37
<i>AIMOVIG</i>	15	<i>AMINOSYN II</i>	50
<i>AJOVY</i>	15	<i>AMINOSYN-PF</i>	50
<i>AKEEGA</i>	18	<i>AMINOSYN-PF 7%</i>	50
<i>ak-poly-bac</i>	75	<i>amiodarone hcl</i>	39
<i>ala-cort</i>	47	<i>amiodarone hydrochloride</i>	39
		<i>AMITIZA</i>	55
		<i>amitriptyline hcl</i>	12
		<i>amitriptyline hydrochloride</i>	12

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<i>amlodipine besylate/atorvastatin calcium</i>	41	ARMOUR THYROID	66
<i>amlodipine besylate/benazepril hydrochloride</i>	41	<i>arsenic trioxide</i>	18
<i>amlodipine besylate/valsartan</i>	41	ARZERRA	23
<i>amlodipine/olmesartan medoxomil</i>	41	<i>asenapine maleate sl</i>	26
<i>amlodipine/valsartan/hydrochlorothiazide ammonium lactate</i>	41	<i>ashlynna</i>	61
<i>amnesteem</i>	47	ASMANEX TWISTHALER 120 METERED DOSES	77
<i>amoxapine</i>	12	ASMANEX TWISTHALER 14 METERED DOSES	77
<i>amoxicillin</i>	6	ASMANEX TWISTHALER 30 METERED DOSES	77
<i>amoxicillin/clavulanate potassium</i>	6	ASMANEX TWISTHALER 60 METERED DOSES	77
<i>amoxicillin/clavulanate potassium er</i>	6		
<i>amphetamine/dextroamphetamine amphotericin b</i>	44	ASPARLAS	18
<i>amphotericin b liposome</i>	13	<i>aspirin/dipyridamole er</i>	38
<i>ampicillin</i>	13	<i>atazanavir</i>	30
<i>ampicillin sodium</i>	6	<i>atazanavir sulfate</i>	30
<i>ampicillin/sulbactam</i>	6	<i>atenolol</i>	39
<i>ampicillin-sulbactam</i>	6	<i>atenolol/chlorthalidone</i>	41
<i>anagrelide hydrochloride</i>	37	ATGAM	67
<i>anastrozole</i>	20	<i>atomoxetine</i>	44
ANDRODERM	60	<i>atomoxetine hydrochloride</i>	44
ANORO ELLIPTA	79	<i>atorvastatin calcium</i>	43
APIDRA	35	<i>atovaquone</i>	25
APIDRA SOLOSTAR	35	<i>atovaquone/proguanil hcl</i>	25
<i>apomorphine hydrochloride</i>	25	<i>atropine sulfate</i>	74
<i>apraclonidine</i>	76	ATROVENT HFA	78
<i>aprepitant</i>	13	AUBAGIO	45
APRETUDE	28	<i>aubra</i>	61
<i>apri</i>	60	<i>aubra eq</i>	61
APTIOM	10	<i>aurovela 1.5/30</i>	61
APТИВУС	30	<i>aurovela 1/20</i>	61
AQUASTAT	73	<i>aurovela 24 fe</i>	61
ARALAST NP	56	<i>aurovela fe 1.5/30</i>	61
<i>aranelle</i>	61	<i>aurovela fe 1/20</i>	61
ARANESP ALBUMIN FREE	37	AUVELITY	11
ARCALYST	68	AVASTIN	23
AREXVY	70	<i>aviane</i>	61
<i>arformoterol tartrate</i>	78	AVONEX	45
<i>argyle sterile saline</i>	54	AVONEX PEN	45
<i>argyle sterile water 100ml</i>	73	<i>ayuna</i>	61
ARIKAYCE	4	AYVAKIT	20
<i>ariPIPrazole</i>	26	<i>azacitidine</i>	17
<i>ariPIPrazole odt</i>	26	AZASITE	75
ARISTADA	26	<i>azathioprine</i>	69
ARISTADA INITIO	26	<i>azelaic acid</i>	47

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<i>azelastine hcl</i>	77	<i>betamethasone dipropionate</i>	47
<i>azelastine hydrochloride</i>	77	<i>betamethasone dipropionate augmented</i>	47
<i>azithromycin</i>	7	<i>betamethasone sodium</i>	59
<i>aztreonam</i>	5	<i>phosphate/betamethasone acetate</i>	
<i>azurette</i>	61	<i>betamethasone valerate</i>	47
<i>bacitracin</i>	75	BETASERON	45
<i>bacitracin/polymyxin b</i>	75	<i>betaxolol hcl</i>	39
<i>baclofen</i>	28	<i>betaxolol hcl</i>	76
BACTERIOSTATIC WATER FOR INJECTION/BENZYL ALCOHOL	73	<i>bethanechol chloride</i>	59
<i>balsalazide disodium</i>	71	BETOPTIC-S	76
BALVERSA	20	<i>bexarotene</i>	24
<i>balziva</i>	61	BEXSERO	70
BAQSIMI ONE PACK	34	<i>bicalutamide</i>	16
BAQSIMI TWO PACK	34	BICILLIN C-R	6
BARACLUEDE	28	BICILLIN L-A	7
BAVENCIO	23	BIKTARVY	28
BCG VACCINE	70	<i>bimatoprost</i>	76
<i>bd insulin syringe safetyglide/1ml/29g x 1/2"</i>	73	<i>bisoprolol fumarate</i>	39
<i>b-d insulin syringe ultrafine ii/0.3ml/31g x 5/16"</i>	73	<i>bisoprolol fumarate/hydrochlorothiazide</i>	41
<i>bd insulin syringe ultra-fine/0.5ml/30g x 12.7mm</i>	73	BIVIGAM	67
<i>bd insulin syringe ultra-fine/1ml/31g x 8mm</i>	73	<i>bleomycin sulfate</i>	18
<i>bd pen needle/original/ultra-fine/29g x 12.7mm</i>	73	BLEPHAMIDE	74
<i>bd posiflush</i>	73	<i>blephamide s.o.p.</i>	74
BELEODAQ	20	BLINCYTO	23
BELRAPZO	15	<i>blisovi 24 fe</i>	61
BELSOMRA	80	<i>blisovi fe 1.5/30</i>	61
<i>benazepril hcl</i>	38	<i>blisovi fe 1/20</i>	61
<i>benazepril hcl/hydrochlorothiazide</i>	41	BOOSTRIX	70
<i>benazepril hydrochloride</i>	38	BORTEZOMIB	18
<i>benazepril</i>	41	<i>bosentan</i>	79
<i>hydrochloride/hydrochlorothiazide</i>		BOSULIF	20
BENDAMUSTINE HYDROCHLORIDE	15	BOTOX	28
BENDEKA	15	BRAFTOVI	20
BENLYSTA	68	BREO ELLIPTA	79
BENZNIDAZOLE	25	<i>breyna</i>	79
<i>benzonatate</i>	79	<i>briellyn</i>	61
<i>benztropine mesylate</i>	25	BRILINTA	38
BERINERT	67	<i>brimonidine tartrate</i>	76
BESIVANCE	75	<i>brimonidine tartrate/timolol maleate</i>	74
BESPONSA	23	<i>brinzolamide</i>	76
BESREMI	69	BRIVIACT	8
		<i>bromfenac</i>	75
		<i>bromocriptine mesylate</i>	25
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		<i>budesonide</i>	77

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budesonide/formoterol fumarate dihydrate	79	carbidopa/levodopa odt	26
bumetanide	42	carbidopa/levodopa/entacapone	25
buprenorphine	1	carboplatin	16
buprenorphine hcl	4	CARDIZEM LA	40
buprenorphine hcl/naloxone hcl	4	carglumic acid	50
buprenorphine hydrochloride	4	carmustine	16
buprenorphine hydrochloride/naloxone	4	carteolol hcl	76
hydrochloride		cartia xt	40
bupropion hcl	11	carvedilol	39
bupropion hydrochloride	11	caspofungin acetate	13
bupropion hydrochloride er (sr)	4	cavarest	50
bupropion hydrochloride er (sr)	11	CAYSTON	78
bupropion hydrochloride er (xl)	11	caziant	61
buspirone hcl	31	cefaclor	6
buspirone hydrochloride	31	cefadroxil	6
busulfan	15	CEFAZOLIN	6
butorphanol tartrate	2	cefazolin sodium	6
BYDUREON BCISE	32	cefazolin sodium/dextrose	6
BYDUREON PEN	32	cefdinir	6
BYETTA	32	cefepime	6
byooviz	74	cefepime hydrochloride	6
CABENUVA	28	cefepime/dextrose	6
cabergoline	66	cefixime	6
CABLIVI	38	cefotaxime sodium	6
CABOMETYX	20	cefoxitin sodium	6
calcipotriene	48	cefpododoxime proxetil	6
calcipotriene/betamethasone dipropionate	48	cefprozil	6
calcitonin-salmon	72	ceftazidime	6
CALCITRIOL	48	ceftazidime/dextrose	6
calcitriol	72	ceftriaxone in iso-osmotic dextrose	6
calcium acetate	54	ceftriaxone sodium	6
CALQUENCE	20	ceftriaxone/dextrose	6
camila	65	cefuroxime axetil	6
camrese	61	cefuroxime sodium	6
camrese lo	61	celecoxib	1
candesartan cilexetil	38	CELONTIN	9
candesartan cilexetil/hydrochlorothiazide	41	cephalexin	6
CAPASTAT SULFATE	15	CEPROTIN	36
CAPLYTA	26	CEQUA	74
CAPRELSA	20	CERDELGA	57
captopril	38	CEREZYME	57
captopril/hydrochlorothiazide	41	cetirizine hydrochloride	77
carbamazepine	10	cevimeline hydrochloride	46
carbamazepine er	10	chateal	61
carbidopa	26	chateal eq	61
carbidopa/levodopa	26	CHEMET	54

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chenodal	56	clindamycin phosphate in d5w	5
chloramphenicol sodium succinate	5	clindamycin phosphate/benzoyl peroxide	47
chlordiazepoxide hcl	31	clindamycin phosphate/dextrose	5
chlordiazepoxide hydrochloride	31	clindamycin/benzoyl peroxide	47
chlordiazepoxide/amitriptyline	11	clindamycin/sodium chloride	5
chlorhexidine gluconate	46	CLINIMIX 4.25%/DEXTROSE 10%	50
chloroquine phosphate	25	CLINIMIX 4.25%/DEXTROSE 5%	50
chlorpromazine hcl	26	CLINIMIX 5%/DEXTROSE 15%	50
chlorpromazine hydrochloride	26	CLINIMIX 5%/DEXTROSE 20%	50
chlorthalidone	42	CLINIMIX 6/5	50
chlorzoxazone	80	CLINIMIX 8/10	50
CHOLBAM	57	CLINIMIX 8/14	50
cholestyramine	43	CLINIMIX E 2.75%/DEXTROSE 5%	50
cholestyramine light	43	CLINIMIX E 4.25%/DEXTROSE 10%	50
ciclodan	49	CLINIMIX E 4.25%/DEXTROSE 5%	50
ciclopirox	49	CLINIMIX E 5%/DEXTROSE 15%	50
ciclopirox nail lacquer	49	CLINIMIX E 5%/DEXTROSE 20%	50
ciclopirox olamine	49	CLINIMIX E 8/10	50
cidofovir	28	CLINIMIX E 8/14	50
cilostazol	38	clinpro 5000	50
CILOXAN	75	clobazam	9
CIMDUO	29	clobetasol propionate	47
cimetidine	56	clobetasol propionate e	47
cimetidine hcl	56	clobetasol propionate emollient	47
cimetidine hydrochloride	56	clodan	47
CIMZIA	69	clofarabine	17
CIMZIA STARTER KIT	69	clomipramine hydrochloride	12
cinacalcet hydrochloride	72	clonazepam	31
CINRYZE	67	clonazepam odt	31
CIPRO HC	76	clonidine hcl	38
CIPROFLOXACIN	76	clonidine hydrochloride	38
ciprofloxacin hcl	7	clonidine hydrochloride er	44
ciprofloxacin hydrochloride	7	clopidogrel	38
ciprofloxacin hydrochloride	75	clorazepate dipotassium	31
ciprofloxacin i.v.-in d5w	7	clotrimazole	14
ciprofloxacin/dexamethasone	76	clotrimazole	49
cisplatin	16	clotrimazole/betamethasone dipropionate	48
citalopram hydrobromide	11	clozapine	27
cladribine	17	clozapine odt	27
claravis	47	COARTEM	25
clarithromycin	7	CODEINE SULFATE	2
clarithromycin er	7	codeine/guaifenesin	82
clindamycin hcl	5	colchicine	14
clindamycin hydrochloride	5	colesevelam hydrochloride	43
clindamycin palmitate hcl	5	colestipol hcl	43
clindamycin phosphate	5	colistimethate sodium	5
clindamycin phosphate	49	COLUMVI	23

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COMBIPATCH	61	<i>cytarabine aqueous</i>	17
COMBIVENT RESPIMAT	80	<i>dabigatran etexilate</i>	36
COMETRIQ	20	<i>dacarbazine</i>	16
COMPLERA	29	<i>dactinomycin</i>	18
<i>compro</i>	13	<i>dalfampridine er</i>	45
<i>constulose</i>	55	DALIRESP	79
COPIKTRA	20	<i>danazol</i>	60
CORLANOR	41	<i>dantrolene sodium</i>	28
COSENTYX	68	DANYELZA	23
COSENTYX SENSOREADY PEN	68	<i>dapsone</i>	15
COSENTYX UNOREADY	68	DAPTACEL	70
COTELLIC	20	<i>daptomycin</i>	5
CREON	57	<i>darifenacin hydrobromide er</i>	58
CRESEMBIA	14	<i>darunavir</i>	30
CRINONE	65	DARZALEX	23
CRIXIVAN	30	DARZALEX FASPRO	23
<i>cromolyn sodium</i>	57	<i>dasetta 1/35</i>	61
<i>cromolyn sodium</i>	74	<i>dasetta 7/7/7</i>	61
<i>cromolyn sodium</i>	79	DAUNORUBICIN HYDROCHLORIDE	18
<i>cryselle-28</i>	61	DAURISMO	20
CRYSVITA	57	<i>daysee</i>	61
<i>curity gauze pads 2"x2"</i>	73	DAYVIGO	80
<i>curity sterile saline</i>	54	<i>deblitane</i>	65
<i>cyclafem 1/35</i>	61	<i>decitabine</i>	18
<i>cyclafem 7/7/7</i>	61	<i>deferasirox</i>	54
cyclobenzaprine hydrochloride	80	<i>deferiprone</i>	54
<i>cyclophosphamide</i>	16	<i>deferoxamine mesylate</i>	54
CYCLOPHOSPHAMIDE	16	DELSTRIGO	29
MONOHYDRATE		<i>delyla</i>	61
<i>cycloserine</i>	15	<i>demeclacycline hcl</i>	8
<i>cyclosporine</i>	69	DEM SER	41
<i>cyclosporine</i>	74	DENAVIR	31
<i>cyclosporine modified</i>	69	DENGVAXIA	70
CYLTEZO	69	<i>denta 5000 plus</i>	51
CYLTEZO STARTER PACKAGE FOR	69	<i>dentagel</i>	51
CROHNS DISEASE/UC/HS		<i>depo-estradiol</i>	61
CYLTEZO STARTER PACKAGE FOR	69	DEPO-MEDROL	59
PSORIASIS		DEPO-SUBQ PROVERA 104	65
<i>cyproheptadine hcl</i>	77	DESCOZY	29
<i>cyproheptadine hydrochloride</i>	77	<i>desipramine hydrochloride</i>	12
CYRAMZA	20	<i>desloratadine</i>	77
<i>cyred</i>	61	<i>desmopressin acetate</i>	59
<i>cyred eq</i>	61	<i>desogestrel/ethinyl estradiol</i>	61
CYSTADROPS	74	<i>desonide</i>	47
CYSTAGON	57	<i>desoximetasone</i>	47
CYSTARAN	74	DESVENLAFAKINE ER	11
<i>cytarabine</i>	17	<i>dexamethasone</i>	59

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<i>dexamethasone sodium phosphate</i>	59	<i>diltiazem hcl</i>	40
<i>dexamethasone sodium phosphate</i>	75	<i>diltiazem hcl cd</i>	40
<i>dexamethylphenidate hcl</i>	44	<i>diltiazem hcl er</i>	40
<i>dexamethylphenidate hydrochloride</i>	44	<i>diltiazem hydrochloride</i>	40
<i>dexrazoxane</i>	24	<i>diltiazem hydrochloride er</i>	40
<i>dextroamphetamine sulfate</i>	44	<i>dilt-xr</i>	40
<i>dextroamphetamine sulfate er</i>	44	<i>dimethyl fumarate</i>	46
DEXTROSE 10%/NACL 0.45%	51	<i>dimethyl fumarate starterpack</i>	46
DEXTROSE 5% /ELECTROLYTE #48	51	DIPENTUM	72
VIAFLEX		<i>diphenhydramine hcl</i>	77
<i>dextrose 10%</i>	51	<i>diphenhydramine hydrochloride</i>	77
DEXTROSE 10%/NACL 0.2%	51	<i>diphenoxylate hydrochloride/atropine sulfate</i>	55
<i>dextrose 2.5%/nacl 0.45%</i>	51	<i>diphenoxylate/atropine</i>	55
DEXTROSE 25%	51	DIPHThERIA/TETANUS TOXOIDS	70
<i>dextrose 5%</i>	51	ADSORBED PEDIATRIC	
DEXTROSE 5%/LACTATED RINGERS	51	<i>dipyridamole</i>	38
DEXTROSE 5%/NACL 0.2%	51	<i>disulfiram</i>	4
<i>dextrose 5%/nacl 0.3%</i>	51	<i>divalproex sodium</i>	32
DEXTROSE 5%/NACL 0.33%	51	<i>divalproex sodium dr</i>	32
<i>dextrose 5%/nacl 0.45%</i>	51	<i>divalproex sodium er</i>	32
<i>dextrose 5%/nacl 0.9%</i>	51	DIVIGEL	61
DEXTROSE 50%	51	<i>docetaxel</i>	18
DEXTROSE 70%	51	<i>dofetilide</i>	39
<i>dextrose/sodium chloride</i>	51	<i>dolishale</i>	61
DIACOMIT	9	<i>donepezil hcl</i>	10
<i>diazepam</i>	32	<i>donepezil hydrochloride</i>	10
<i>diazepam intensol</i>	31	<i>donepezil hydrochloride odt</i>	10
<i>diazepam rectal gel</i>	9	<i>dorzolamide hcl/timolol maleate</i>	74
<i>diazoxide</i>	34	<i>dorzolamide hydrochloride</i>	76
<i>diclofenac potassium</i>	1	<i>dotti</i>	61
<i>diclofenac sodium</i>	1	DOVATO	28
<i>diclofenac sodium</i>	48	<i>doxazosin mesylate</i>	38
<i>diclofenac sodium</i>	75	<i>doxepin hcl</i>	12
<i>diclofenac sodium dr</i>	1	<i>doxepin hydrochloride</i>	12
<i>diclofenac sodium er</i>	1	<i>doxepin hydrochloride</i>	47
<i>diclofenac sodium/misoprostol</i>	1	<i>doxercalciferol</i>	72
<i>dicloxacillin sodium</i>	7	<i>doxorubicin hcl</i>	18
<i>dicyclomine hcl</i>	55	<i>doxorubicin hydrochloride</i>	18
<i>dicyclomine hydrochloride</i>	55	<i>doxorubicin hydrochloride liposomal</i>	18
DIFICID	7	<i>doxy 100</i>	8
<i>diflunisal</i>	1	<i>doxycycline</i>	8
<i>difluprednate</i>	75	<i>doxycycline hyclate</i>	8
<i>digitek</i>	41	DRIZALMA SPRINKLE	45
<i>digox</i>	41	<i>dronabinol</i>	13
<i>digoxin</i>	41	<i>drospirenone/ethinyl estradiol</i>	61
<i>dihydroergotamine mesylate</i>	15	DROXIA	17
<i>dilantin</i>	10		

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<i>droxidopa</i>	38	ENBREL SURECLICK	69
DULERA	80	<i>endocet</i>	2
<i>duloxetine hcl</i>	45	ENGERIX-B	70
<i>duloxetine hydrochloride</i>	45	ENHERTU	23
DUPIXENT	68	<i>enilloring</i>	62
DURAMORPH	2	ENJAYMO	68
<i>dutasteride</i>	58	<i>enoxaparin sodium</i>	36
<i>dutasteride/tamsulosin hydrochloride</i>	58	<i>enpresse-28</i>	62
<i>ec-naproxen</i>	1	<i>enskyce</i>	62
<i>econazole nitrate</i>	49	ENSPRYNG	69
EDURANT	29	<i>entacapone</i>	25
<i>efavirenz</i>	29	<i>entecavir</i>	28
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	29	ENTRESTO	41
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	29	ENTYVIO	68
<i>effer-k</i>	51	<i>enulose</i>	55
ELAHERE	23	EPCLUSA	28
ELAPRASE	57	EPIDIOLEX	8
ELELYSO	57	<i>epinastine hcl</i>	74
<i>eletiptan hydrobromide</i>	14	<i>epinephrine</i>	78
ELIGARD	66	<i>epirubicin hcl</i>	18
<i>elimest</i>	61	<i>epitol</i>	10
ELIQUIS	36	EPIVIR HBV	28
ELIQUIS STARTER PACK	36	EPKINLY	23
ELITEK	24	<i>eplerenone</i>	42
ELLA	65	<i>epoprostenol sodium</i>	79
ELLENCE	18	EPRONTIA	8
ELMIRON	59	EQUETRO	32
ELREXFIO	18	ERBITUX	23
<i>eluryng</i>	61	<i>ergoloid mesylates</i>	10
ELZONRIS	18	<i>ergotamine tartrate/caffeine</i>	15
EMCYT	17	ERIVEDGE	20
EMGALITY	15	ERLEADA	16
<i>emoquette</i>	62	<i>erlotinib hydrochloride</i>	20
EMPAVELI	68	<i>errin</i>	65
EMPLICITI	23	<i>ertapenem</i>	7
EMSAM	11	ERWINASE	18
<i>emtricitabine</i>	29	<i>ery</i>	49
<i>emtricitabine/tenofovir disoproxil fumarate</i>	29	<i>erythrocin lactobionate</i>	7
<i>emtricitabine/tenofovir disoproxil fumarate</i>	29	<i>erythromycin</i>	7
EMTRIVA	29	<i>erythromycin</i>	49
<i>emverm</i>	25	<i>erythromycin</i>	75
<i>enalapril maleate</i>	38	<i>erythromycin base</i>	7
<i>enalapril maleate/hydrochlorothiazide</i>	41	<i>erythromycin dr</i>	7
ENBREL	69	<i>erythromycin ethylsuccinate</i>	7
ENBREL MINI	69	<i>erythromycin lactobionate</i>	7
		<i>erythromycin/benzoyl peroxide</i>	47
		<i>escitalopram oxalate</i>	11

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<i>estarrylla</i>	62	fentanyl	1
<i>estradiol</i>	62	FENTANYL CITRATE	2
<i>estradiol valerate</i>	62	<i>fentanyl citrate oral transmucosal</i>	2
<i>estradiol/norethindrone acetate</i>	62	FERRIPROX	54
ESTRING	62	FERRIPROX TWICE-A-DAY	54
<i>eszopiclone</i>	80	FETZIMA	11
<i>ethacrynic acid</i>	42	FETZIMA TITRATION PACK	11
<i>ethambutol hydrochloride</i>	15	<i>finasteride 5mg</i>	58
<i>ethosuximide</i>	9	<i>fingolimod</i>	46
<i>ethynodiol diacetate/ethinyl estradiol</i>	62	FINTEPLA	8
<i>etodolac</i>	1	FIRDAPSE	45
<i>etodolac er</i>	1	FIRMAGON	66
<i>etonogestrel/ethinyl estradiol</i>	62	FIRST-MOUTHWASH BLM	46
ETOPOPHOS	20	<i>flac</i>	76
<i>etoposide</i>	20	FLAREX	75
<i>etravirine</i>	29	<i>flavoxate hcl</i>	58
EUTHYROX	66	FLEBOGAMMA DIF	67
EVAMIST	62	<i>flecainide acetate</i>	39
<i>everolimus</i>	20	FLOVENT DISKUS	77
<i>everolimus</i>	69	FLOVENT HFA	77
EVOTAZ	30	<i>flouxuridine</i>	17
EVRYSDI	57	<i>fluconazole</i>	14
<i>exemestane</i>	20	<i>fluconazole in sodium chloride</i>	14
EXKIVITY	21	<i>flucytosine</i>	14
EXTAVIA	46	<i>fludarabine phosphate</i>	18
EYLEA	74	<i>fludrocortisone acetate</i>	59
<i>ezetimibe</i>	43	<i>flunisolide</i>	77
<i>ezetimibe/simvastatin</i>	43	<i>fluocinolone acetonide</i>	47
FABRAZYME	57	<i>fluocinolone acetonide</i>	76
<i>falmina</i>	62	<i>fluocinolone acetonide body</i>	47
<i>famciclovir</i>	31	<i>fluocinolone acetonide ear drops</i>	76
<i>famotidine</i>	56	<i>fluocinolone acetonide scalp</i>	47
<i>famotidine premixed</i>	56	<i>fluocinolone acetonide topical</i>	47
FANAPT	26	<i>fluocinonide</i>	48
FANAPT TITRATION PACK	26	<i>fluocinonide emulsified base</i>	48
FARYDAK	21	<i>fluoride</i>	51
FASENRA	80	<i>fluoridex daily defense</i>	51
FASENRA PEN	80	<i>fluoridex enhanced whitening</i>	51
<i>fayosim</i>	62	<i>fluoridex sensitivity relief/sls free</i>	51
<i>febuxostat</i>	14	<i>fluorimax 5000</i>	51
<i>felbamate</i>	8	<i>fluorimax 5000 sensitive</i>	51
<i>felodipine er</i>	40	<i>fluorometholone</i>	75
FEMRING	62	<i>fluorouracil</i>	17
<i>femynor</i>	62	<i>fluorouracil</i>	48
<i>fenofibrate</i>	42	<i>fluoxetine dr</i>	11
<i>fenofibrate micronized</i>	42	<i>fluoxetine hcl</i>	11
<i>fenofibric acid dr</i>	43	<i>fluoxetine hydrochloride</i>	12

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<i>fluphenazine decanoate</i>	26	<i>ganciclovir</i>	28
<i>fluphenazine hcl</i>	26	GARDASIL 9	70
<i>fluphenazine hydrochloride</i>	26	<i>gatifloxacin</i>	75
<i>flurbiprofen</i>	1	GATTEX	56
<i>flurbiprofen sodium</i>	75	<i>gavilyte-c</i>	56
<i>flutamide</i>	16	<i>gavilyte-g</i>	56
<i>fluticasone propionate</i>	48	<i>gavilyte-n/flavor pack</i>	56
<i>fluticasone propionate</i>	77	GAVRETO	21
<i>fluticasone propionate/salmeterol</i>	80	GAZYVA	23
<i>fluticasone propionate/salmeterol diskus</i>	80	<i>gefitinib</i>	21
<i>fluvastatin</i>	43	<i>gemcitabine hcl</i>	17
<i>fluvoxamine maleate</i>	12	GEMCITABINE HYDROCHLORIDE	17
<i>fluvoxamine maleate er</i>	12	<i>gemfibrozil</i>	43
<i>FML</i>	75	<i>generlac</i>	55
<i>FML FORTE</i>	75	<i>gengraf</i>	69
<i>FOLOTYN</i>	17	GENOTROPIN	60
<i>fondaparinux sodium</i>	36	GENOTROPIN MINIQUICK	59
<i>formoterol fumarate</i>	78	<i>gentak</i>	75
<i>FORTEO</i>	72	<i>gentamicin sulfate</i>	4
<i>fosamprenavir calcium</i>	30	<i>gentamicin sulfate</i>	49
<i>fosaprepitant dimeglumine</i>	13	<i>gentamicin sulfate</i>	75
<i>fosinopril sodium</i>	38	<i>gentamicin sulfate pediatric</i>	4
<i>fosinopril sodium/hydrochlorothiazide</i>	41	<i>gentamicin sulfate/0.9% sodium chloride</i>	4
<i>fosphenytoin sodium</i>	10	GENVOYA	28
<i>FOSRENOL</i>	54	<i>gianvi</i>	62
<i>FOTIVDA</i>	17	GILENYA	46
<i>FREAMINE III</i>	51	GILOTrif	21
<i>frovatriptan succinate</i>	14	GIVLAARI	57
<i>fulphila</i>	37	GLASSIA	57
<i>fulvestrant</i>	17	<i>glatiramer acetate</i>	46
<i>furosemide</i>	42	<i>glatopa</i>	46
<i>FUZEON</i>	30	GLEOSTINE	16
<i>FYARRO</i>	21	<i>glimepiride</i>	32
<i>fyavolv</i>	62	<i>glipizide</i>	32
<i>FYCOMPA</i>	8	<i>glipizide er</i>	32
<i>g tussin ac</i>	82	<i>glipizide xl</i>	32
<i>gabapentin</i>	9	<i>glipizide/metformin hydrochloride</i>	32
<i>galantamine hydrobromide</i>	10	GLUCAGEN HYPOKIT	34
<i>galantamine hydrobromide er</i>	10	<i>glucagon emergency kit</i>	34
<i>GAMASTAN</i>	67	<i>glucagon emergency kit for low blood sugar</i>	34
<i>GAMIFANT</i>	68	<i>glyburide</i>	33
<i>GAMMAGARD LIQUID</i>	67	<i>glyburide micronized</i>	32
<i>GAMMAGARD S/D IGA LESS THAN 1MCG/ML</i>	67	<i>glyburide/metformin hydrochloride</i>	33
<i>GAMMAKED</i>	67	<i>glycopyrrrolate</i>	55
<i>GAMMAPLEX</i>	67	GLYXAMBI	33
<i>GAMUNEX-C</i>	67	<i>granisetron hydrochloride</i>	13
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<i>griseofulvin ultramicrosize</i>	14	HUMALOG MIX 75/25	35
<i>guaiatussin ac</i>	82	HUMALOG MIX 75/25 KWIKPEN	35
<i>guaiifenesin ac</i>	82	HUMATROPE	60
<i>guaifenesin/codeine</i>	82	HUMIRA	69
<i>guanfacine er</i>	44	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK	69
<i>guanfacine hydrochloride</i>	44	HUMIRA PEN	69
GVOKE HYPOOPEN 1-PACK	34	HUMIRA PEN-CD/UC/HS STARTER	69
GVOKE HYPOOPEN 2-PACK	35	HUMIRA PEN-PEDIATRIC UC STARTER PACK	69
GVOKE KIT	35	HUMIRA PEN-PS/UV STARTER	69
GVOKE PFS	35	HUMULIN 70/30	35
<i>hailey 1.5/30</i>	62	HUMULIN 70/30 KWIKPEN	35
<i>hailey 24 fe</i>	62	HUMULIN N	35
<i>hailey fe 1.5/30</i>	62	HUMULIN N KWIKPEN	35
<i>hailey fe 1/20</i>	62	HUMULIN R	35
HALAVEN	18	HUMULIN R U-500 (CONCENTRATED)	35
<i>halobetasol propionate</i>	48	HUMULIN R U-500 KWIKPEN	35
<i>haloette</i>	62	<i>hydralazine hcl</i>	44
<i>haloperidol</i>	26	<i>hydralazine hydrochloride</i>	44
<i>haloperidol decanoate</i>	26	<i>hydrochlorothiazide</i>	42
<i>haloperidol lactate</i>	26	<i>hydrocodone bitartrate/acetaminophen</i>	2
HARVONI	28	<i>hydrocodone/acetaminophen</i>	2
HAVRIX	70	<i>hydrocortisone</i>	48
<i>heather</i>	65	<i>hydrocortisone</i>	59
HEMADY	59	<i>hydrocortisone</i>	72
<i>heparin lock flush</i>	73	<i>hydrocortisone butyrate</i>	48
HEPARIN SODIUM	36	<i>hydrocortisone butyrate (lipid)</i>	48
<i>heparin sodium lock flush</i>	73	<i>hydrocortisone butyrate (lipophilic)</i>	48
HEPARIN SODIUM/D5W	36	<i>hydrocortisone valerate</i>	48
HEPARIN SODIUM/DEXTROSE	36	<i>hydrocortisone/acetic acid</i>	77
HEPARIN SODIUM/NACL 0.45%	36	<i>hydromorphone hcl</i>	2
HEPARIN SODIUM/SODIUM CHLORIDE	36	HYDROMORPHONE	3
<i>heparin sodium/sodium chloride 0.9%</i>	36	HYDROCHLORIDE	
<i>heparin sodium/sodium chloride 0.9%</i>	36	<i>hydromorphone hydrochloride dosette</i>	3
<i>premix</i>		<i>hydroxychloroquine sulfate</i>	25
HEPATAMINE	51	<i>hydroxyprogesterone caproate</i>	65
HEPLISAV-B	70	<i>hydroxyurea</i>	17
HERCEPTIN	23	<i>hydroxyzine hcl</i>	31
HERCEPTIN HYLECTA	23	<i>hydroxyzine hydrochloride</i>	31
HETLIOZ	80	HYPERRHO S/D	67
HIBERIX	71	HYPERRHO S/D MINI-DOSE	67
HIZENTRA	67	HYQVIA	67
HUMALOG	35	<i>ibandronate sodium</i>	72
HUMALOG JUNIOR KWIKPEN	35	IBRANCE	21
HUMALOG KWIKPEN	35	<i>ibu</i>	1
HUMALOG MIX 50/50	35		

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<i>ibutilide fumarate</i>	39	<i>irbesartan/hydrochlorothiazide</i>	41
<i>icatibant acetate</i>	67	<i>IRESSA</i>	21
<i>iclevia</i>	62	<i>irinotecan</i>	18
ICLUSIG	21	<i>irinotecan hydrochloride</i>	18
<i>icosapent ethyl</i>	43	ISENTRESS	29
<i>idarubicin hcl</i>	18	ISENTRESS HD	28
IDHIFA	18	<i>isibloom</i>	62
IFOSFAMIDE	16	ISOLYTE-P/DEXTROSE 5%	51
IGALMI	73	ISOLYTE-S	52
ILARIS	68	ISOLYTE-S PH 7.4	52
ILEVRO	75	<i>isoniazid</i>	15
<i>imatinib mesylate</i>	21	<i>isosorbide dinitrate</i>	43
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IMFINZI	23	<i>isosorbide mononitrate</i>	43
<i>imipenem/cilastatin</i>	7	<i>isosorbide mononitrate er</i>	43
<i>imipramine hcl</i>	12	<i>isotonic gentamicin</i>	4
<i>imipramine hydrochloride</i>	12	<i>isotretinoin</i>	47
<i>imipramine pamoate</i>	12	<i>isradipine</i>	40
<i>imiquimod</i>	48	ISTODAX	18
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IOPIDINE	76	<i>junel 1.5/30</i>	62
IPOL INACTIVATED IPV	71	<i>junel 1/20</i>	62
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KADCYLA	23	KYNMOBI	25
<i>kalliga</i>	62	KYNMOBI TITRATION KIT	25
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<i>kanjinti</i>	23	<i>labetalol hydrochloride</i>	39
KANUMA	57	<i>lacosamide</i>	10
<i>kariva</i>	63	LACRISERT	74
KCL 0.075%/D5W/NACL 0.45%	52	<i>lactated ringers</i>	52
KCL 0.15%/D5W/NACL 0.2%	52	LACTATED RINGERS IRRIGATION	52
<i>kcl 0.15%/d5w/nacl 0.225%</i>	52	<i>lactulose</i>	55
KCL 0.15%/D5W/NACL 0.45%	52	<i>lagevrio</i>	73
KCL 0.15%/D5W/NACL 0.9%	52	<i>lamivudine</i>	28
KCL 0.3%/D5W/NACL 0.45%	52	<i>lamivudine</i>	29
KCL 0.3%/D5W/NACL 0.9%	52	<i>lamivudine/zidovudine</i>	29
<i>kelnor 1/35</i>	63	<i>lamotrigine</i>	8
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KEPIVANCE	24	<i>lamotrigine odt</i>	8
KERENDIA	41	<i>lamotrigine starter kit/blue</i>	8
KESIMPTA	46	<i>lamotrigine starter kit/green</i>	8
<i>ketoconazole</i>	14	<i>lamotrigine starter kit/orange</i>	8
<i>ketoconazole</i>	49	LAMPIT	25
<i>ketorolac tromethamine</i>	1	LANREOTIDE ACETATE	66
<i>ketorolac tromethamine</i>	75	<i>lansoprazole</i>	56
KEYTRUDA	23	<i>lanthanum carbonate</i>	55
KIMMTRAK	18	LANTUS	35
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LENVIMA 24 MG DAILY DOSE	21	<i>lisdexamfetamine dimesylate</i>	44
LENVIMA 4 MG DAILY DOSE	21	<i>lisinopril</i>	38
LENVIMA 8 MG DAILY DOSE	21	<i>lisinopril/hydrochlorothiazide</i>	42
<i>lessina</i>	63	LITHIUM	32
<i>letrozole</i>	20	<i>lithium carbonate</i>	32
<i>leucovorin calcium</i>	24	<i>lithium carbonate er</i>	32
LEUKERAN	16	LIVTENCITY	28
LEUKINE	37	<i>lojaimiess</i>	63
<i>leuprolide acetate</i>	66	LOKELMA	55
<i>levalbuterol</i>	78	LONSURF	18
<i>levalbuterol hcl</i>	78	<i>loperamide hcl</i>	55
<i>levalbuterol hydrochloride</i>	78	<i>lopinavir/ritonavir</i>	30
LEVEMIR	35	LOPREEZA	63
LEVEMIR FLEXPEN	35	LORAZEPAM	32
LEVEMIR FLEXTOUCH	35	<i>lorazepam intensol</i>	32
<i>levetiracetam</i>	8	LORBRENA	21
<i>levetiracetam er</i>	8	<i>loryna</i>	63
<i>levetiracetam/sodium chloride</i>	8	<i>losartan potassium</i>	38
<i>levobunolol hcl</i>	76	<i>losartan potassium/hydrochlorothiazide</i>	42
LEVOCARNITINE	57	LOTEMAX	75
<i>levocetirizine dihydrochloride</i>	77	LOTEMAX SM	75
<i>levofloxacin</i>	7	<i>loteprednol etabonate</i>	76
<i>levofloxacin in d5w</i>	7	<i>lovastatin</i>	43
<i>levoleucovorin</i>	24	<i>low-ogestrel</i>	63
<i>levoleucovorin calcium</i>	24	<i>loxapine</i>	26
<i>levonest</i>	63	<i>lo-zumandimine</i>	63
<i>levonorgestrel and ethinyl estradiol</i>	63	<i>lubiprostone</i>	55
<i>levonorgestrel/ethinyl estradiol</i>	63	LUCENTIS	74
<i>levora 0.15/30-28</i>	63	LUMAKRAS	19
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<i>lidocaine</i>	3	LUPRON DEPOT (1-MONTH)	66
<i>lidocaine hcl</i>	3	LUPRON DEPOT (3-MONTH)	66
<i>lidocaine hcl</i>	39	LUPRON DEPOT (4-MONTH)	66
<i>lidocaine hcl jelly</i>	3	LUPRON DEPOT (6-MONTH)	66
<i>lidocaine hydrochloride</i>	3	<i>LUPRON DEPOT-PED</i>	66
<i>lidocaine hydrochloride viscous</i>	3	LUPRON DEPOT-PED (1-MONTH)	66
<i>lidocaine viscous</i>	3	LUPRON DEPOT-PED (3-MONTH)	66
<i>lidocaine/epinephrine</i>	3	<i>lurasidone hydrochloride</i>	27
<i>lidocaine/prilocaine</i>	3	<i>lutera</i>	63
<i>lidocaine-prilocaine-cream base</i>	3	<i>lyleq</i>	65
<i>lillow</i>	63	<i>yllana</i>	63

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LYTGOBI	21	METHADOSE	1
<i>lyza</i>	65	METHADOSE SUGAR-FREE	1
MAGNESIUM SULFATE	52	<i>methazolamide</i>	76
<i>malathion</i>	49	<i>methenamine hippurate</i>	5
<i>maraviroc</i>	30	<i>methenamine mandelate</i>	5
MARGENZA	24	<i>methimazole</i>	67
<i>marlissa</i>	63	<i>methotrexate</i>	70
MARPLAN	11	<i>methotrexate sodium</i>	70
MARQIBO	19	<i>methoxsalen</i>	48
MATULANE	16	<i>methsuximide</i>	9
<i>matzim la</i>	40	<i>methyldopa</i>	38
MAVYRET	28	<i>methylphenidate hydrochloride</i>	45
MAXIDEX	76	<i>methylphenidate hydrochloride cd</i>	44
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MAYZENT	46	<i>methylprednisolone</i>	59
MAYZENT STARTER PACK	46	<i>methylprednisolone acetate</i>	59
<i>m-clear wc</i>	82	<i>methylprednisolone dose pack</i>	59
<i>meclizine hcl</i>	13	<i>methylprednisolone sodium succinate</i>	59
<i>medroxyprogesterone acetate</i>	65	<i>methylprednisolone sodiumsuccinate</i>	59
<i>mefloquine hcl</i>	25	<i>metoclopramide hcl</i>	13
<i>megestrol acetate</i>	65	<i>metoclopramide hydrochloride</i>	13
MEKINIST	22	<i>metolazone</i>	42
MEKTOVI	22	<i>metoprolol succinate er</i>	39
<i>meloxicam</i>	1	<i>metoprolol tartrate</i>	39
<i>melphalan hydrochloride</i>	16	<i>metoprolol/hydrochlorothiazide</i>	42
MEMANTINE HCL TITRATION PAK	10	<i>metronidazole</i>	5
<i>memantine hydrochloride</i>	10	<i>metronidazole vaginal</i>	5
<i>memantine hydrochloride er</i>	10	<i>metyrosine</i>	42
MENACTRA	71	<i>mexiletine hcl</i>	39
<i>menest</i>	63	<i>micafungin</i>	14
MENOSTAR	63	MICRHOGAM ULTRA-FILTERED PLUS	67
MENQUADFI	71	<i>microgestin 1.5/30</i>	63
MENVEO	71	<i>microgestin 1/20</i>	63
MEPSEVII	57	<i>microgestin 24 fe</i>	63
<i>mercaptopurine</i>	17	<i>microgestin fe 1.5/30</i>	63
<i>meropenem</i>	7	<i>microgestin fe 1/20</i>	63
<i>meropenem/sodium chloride</i>	7	<i>midodrine hcl</i>	38
<i>mesalamine</i>	72	<i>mifepristone</i>	60
<i>mesalamine dr</i>	72	<i> miglitol</i>	33
<i>mesalamine er</i>	72	<i> miglustat</i>	57
<i>mesna</i>	24	<i> mili</i>	63
MESNEX	24	<i> millipred</i>	59
<i>metformin hydrochloride</i>	33	<i> mimvey</i>	63
<i>metformin hydrochloride er</i>	33	<i> minitran</i>	43
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<i>minocycline hydrochloride</i>	8	<i>nafrinse</i>	52
<i> minoxidil</i>	44	<i>NAGLAZYME</i>	57
<i> mirtazapine</i>	11	<i>nalbuphine hcl</i>	3
<i> mirtazapine odt</i>	11	<i> naloxone hcl</i>	4
<i> misoprostol</i>	56	<i>naloxone hydrochloride</i>	4
<i> mitigo</i>	1	<i> naltrexone hcl</i>	4
<i> mitomycin</i>	19	<i> naproxen</i>	1
<i> mitoxantrone hcl</i>	19	<i>naproxen sodium</i>	1
<i> M-M-R II</i>	71	<i>naratriptan hcl</i>	14
<i> modafinil</i>	81	<i>NARCAN</i>	4
<i> moexipril hcl</i>	38	<i>NATACYN</i>	75
<i>molindone hydrochloride</i>	26	<i>nateglinide</i>	33
<i> mometasone furoate</i>	48	<i>NATPARA</i>	72
<i> MONJUVI</i>	24	<i>NAYZILAM</i>	9
<i>monoject pharma grade flush syringe</i>	73	<i>nebivolol hydrochloride</i>	39
<i> monoject sodium chloride flush</i>	73	<i> necon 0.5/35-28</i>	63
<i> mono-linyah</i>	63	<i>nefazodone hydrochloride</i>	12
<i> montelukast sodium</i>	77	<i> nelarabine</i>	19
<i> morgidox 1x100mg</i>	8	<i> neomycin sulfate</i>	4
<i> morgidox 2x100mg</i>	8	<i>neomycin/bacitracin/polymyxin</i>	75
<i>MORPHINE SULFATE</i>	3	<i> neomycin/polymyxin/bacitracin</i>	75
<i> morphine sulfate er</i>	2	<i>neomycin/polymyxin/bacitracin/hydrocortis</i>	74
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<i> MOVANTIK</i>	55	<i>neomycin/polymyxin/dexamethasone</i>	74
<i>moxifloxacin hydrochloride/sodium</i>	7	<i> neomycin/polymyxin/gramicidin</i>	75
<i> hydrochloride</i>		<i> neomycin/polymyxin/hc</i>	77
<i> moxifloxacin hydrochloride</i>	8	<i>neomycin/polymyxin/hydrocortisone</i>	74
<i> moxifloxacin hydrochloride</i>	75	<i>neomycin/polymyxin/hydrocortisone</i>	77
<i> MOZOBIL</i>	37	<i>NERLYNX</i>	22
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<i>multiple electrolytes injection type 1</i>	52	<i>NEULASTA</i>	37
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<i> mutamycin</i>	19	<i>NEUPOGEN</i>	37
<i> MYALEPT</i>	56	<i> NEUPRO</i>	25
<i>mycophenolate mofetil</i>	70	<i> NEVANAC</i>	76
<i>mycophenolic acid dr</i>	70	<i> nevirapine</i>	29
<i> MYFEMBREE</i>	66	<i> nevirapine er</i>	29
<i> MYLOTARG</i>	24	<i> niacin er</i>	43
<i> myorisan</i>	47	<i> niacor</i>	43
<i> MYRBETRIQ</i>	58	<i> nicardipine hcl</i>	40
<i> MYTESI</i>	55	<i>NICOTROL INHALER</i>	4
<i> NABI-HB</i>	67	<i> NICOTROL NS</i>	4
<i> nabumetone</i>	1	<i> nifedipine er</i>	40
<i> nadolol</i>	39	<i> nikki</i>	63
<i> nafcillin</i>	7	<i> nilutamide</i>	16

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<i>nisoldipine er</i>	40	NOVOLOG MIX 70/30 PREFILLED	35
<i>nitazoxanide</i>	25	FLEXPEN	
<i>nitisinone</i>	57	NOVOLOG MIX 70/30 PREFILLED	35
<i>nitro-bid</i>	43	FLEXPEN RELION	
<i>nitrofurantoin</i>	5	NOVOLOG MIX 70/30 RELION	36
<i>nitrofurantoin macrocrystals</i>	5	NOVOLOG PENFILL	36
<i>nitrofurantoin monohydrate/macrocrys</i>	5	NOVOLOG RELION	36
<i>nitroglycerin</i>	43	NOXAFL	14
<i>nitroglycerin lingual</i>	43	<i>np thyroid</i> 120	66
<i>nitroglycerin transdermal</i>	43	<i>np thyroid</i> 15	66
<i>nivestym</i>	37	<i>np thyroid</i> 30	66
<i>nizatidine</i>	56	<i>np thyroid</i> 60	66
<i>nora-be</i>	65	<i>np thyroid</i> 90	66
NORDITROPIN FLEXPRO	60	NPLATE	37
<i>norethindrone</i>	65	NUBEQA	16
<i>norethindrone acetate</i>	65	NUCALA	80
<i>norethindrone acetate/ethinyl estradiol</i>	63	NUEDEXTA	45
<i>norethindrone acetate/ethinyl estradiol/ferrous fumarate</i>	63	NULIBRY	57
<i>norgestimate/ethinyl estradiol</i>	64	NULOJIX	68
<i>norlyda</i>	65	NUPLAZID	27
<i>norlyroc</i>	65	NURTEC	15
<i>normal saline i.v. flush</i>	73	NUTROPIN AQ NUSPIN 10	60
<i>nortrel 0.5/35 (28)</i>	64	NUTROPIN AQ NUSPIN 20	60
<i>nortrel 1/35</i>	64	NUTROPIN AQ NUSPIN 5	60
<i>nortrel 7/7/7</i>	64	<i>nyamyc</i>	49
<i>nortriptyline hcl</i>	13	<i>nylia 1/35</i>	64
<i>nortriptyline hydrochloride</i>	13	<i>nylia 7/7/7</i>	64
<i>NORVIR</i>	30	<i>nymyo</i>	64
<i>NOURIANZ</i>	25	<i>nystatin</i>	14
<i>NOVAREL</i>	60	<i>nystatin</i>	49
<i>NOVOLIN 70/30</i>	35	<i>nystatin/triamcinolone</i>	48
<i>NOVOLIN 70/30 FLEXPEN</i>	35	<i>nystop</i>	49
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<i>olanzapine odt</i>	27	<i>orsythia</i>	64
<i>olanzapine/fluoxetine</i>	11	<i>oseltamivir phosphate</i>	31
<i>olmesartan medoxomil</i>	38	OSENI	34
<i>olmesartan</i>	42	OSPHENA	65
<i>medoxomil/amlodipine/hydrochlorothiazide</i>		OTEZLA	68
<i>olmesartan medoxomil/hydrochlorothiazide</i>	42	OXACILLIN SODIUM	7
<i>olopatadine hcl</i>	74	<i>oxaliplatin</i>	16
<i>olopatadine hcl</i>	77	<i>oxandrolone</i>	60
<i>olopatadine hydrochloride</i>	75	<i>oxaprozin</i>	1
<i>omega-3-acid ethyl esters</i>	43	<i>oxazepam</i>	32
<i>omeprazole</i>	56	<i>oxcarbazepine</i>	10
<i>omeprazole dr</i>	56	OXERVATE	74
<i>omnipod 5 g6 intro kit (gen 5)</i>	73	OXLUMO	57
<i>omnipod 5 g6 pods (gen 5)</i>	73	<i>oxybutynin chloride</i>	58
<i>omnipod classic pdm starter kit (gen 3)</i>	73	<i>oxybutynin chloride er</i>	58
<i>omnipod classic pods (gen 3)</i>	73	<i>oxycodone hcl</i>	3
<i>omnipod dash intro kit (gen 4)</i>	73	<i>oxycodone hydrochloride</i>	3
<i>omnipod dash pdm kit (gen 4)</i>	73	<i>oxycodone/acetaminophen</i>	3
<i>omnipod dash pods (gen 4)</i>	73	<i>oxymorphone hydrochloride</i>	3
<i>omnipod go 10 units/day</i>	73	<i>oxymorphone hydrochloride er</i>	2
<i>omnipod go 15 units/day</i>	73	<i>oxymorphone hydrochlorideer</i>	2
<i>omnipod go 20 units/day</i>	73	OZEMPIC	34
<i>omnipod go 25 units/day</i>	73	OZURDEX	76
<i>omnipod go 30 units/day</i>	73	<i>pacerone</i>	39
<i>omnipod go 35 units/day</i>	73	<i>paclitaxel</i>	19
<i>omnipod go 40 units/day</i>	73	<i>paclitaxel protein-bound particles</i>	19
OMNITROPE	60	PADCEV	24
ONCASPAR	19	<i>paliperidone er</i>	27
<i>ondansetron hcl</i>	13	PALYNZIQ	57
<i>ondansetron hydrochloride</i>	13	PANCREAZE	57
<i>ondansetron odt</i>	13	PANRETIN	24
ONGENTYS	25	<i>pantoprazole sodium</i>	56
ONLYZA	34	<i>pantoprazole sodium dr</i>	56
ONIVYDE	19	PANZYGA	67
ONPATTRO	57	<i>paraplatin</i>	16
ONUREG	17	<i>paricalcitol</i>	72
OPDIVO	24	<i>paroex</i>	46
OPDUALAG	24	<i>paramomycin sulfate</i>	4
OPSUMIT	79	<i>paroxetine hcl</i>	12
ORACIT	52	<i>paroxetine hcl er</i>	12
ORENCIA	68	<i>paroxetine hydrochloride</i>	12
ORENCIA CLICKJECT	68	<i>paser</i>	15
ORFADIN	57	<i>paxlovid</i>	73
ORGOVYX	66	PEDIARIX	71
ORIAHNN	66	PEDVAX HIB	71

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<i>peg-3350/electrolytes</i>	56	<i>pioglitazone hcl-glimepiride</i>	34
<i>peg-3350/nacl/na bicarbonate/kcl</i>	56	<i>pioglitazone hydrochloride</i>	34
PEGANONE	10	<i>piperacillin sodium/tazobactam sodium</i>	7
PEGASYS	69	<i>PIQRAY 200MG DAILY DOSE</i>	22
PEMAZYRE	19	<i>PIQRAY 250MG DAILY DOSE</i>	22
PEMETREXED	17	<i>PIQRAY 300MG DAILY DOSE</i>	22
<i>pemetrexed disodium</i>	17	<i>pirfenidone</i>	79
<i>penciclovir</i>	31	<i>pirmella 1/35</i>	64
<i>penicillamine</i>	59	<i>pirmella 7/7/7</i>	64
<i>penicillin g potassium</i>	7	<i>piroxicam</i>	1
PENICILLIN G POTASSIUM IN ISO- OSMOTIC DEXTROSE	7	<i>PLASMA-LYTE A</i>	52
<i>penicillin g procaine</i>	7	<i>PLASMA-LYTE-148</i>	52
<i>penicillin g sodium</i>	7	<i>PLEGRIDY</i>	46
<i>penicillin v potassium</i>	7	<i>PLEGRIDY STARTER PACK</i>	46
PENTACEL	71	<i>plenamine</i>	52
<i>pentamidine isethionate</i>	25	<i>plerixafor</i>	37
PENTASA	72	<i>podofilox</i>	48
<i>pentobarbital sodium</i>	9	<i>POLIVY</i>	24
<i>pentoxifylline er</i>	42	<i>polycin</i>	75
PERFOROMIST	78	<i>polymyxin b sulfate(trimethoprim sulfate)</i>	75
<i>perindopril erbumine</i>	38	<i>POMALYST</i>	17
<i>periogard</i>	46	<i>portia-28</i>	64
PERJETA	24	<i>PORTRAZZA</i>	24
<i>permethrin</i>	49	<i>posaconazole</i>	14
<i>perphenazine</i>	13	<i>posaconazole dr</i>	14
<i>perphenazine/amitriptyline</i>	11	<i>potassium chloride</i>	53
<i>phenelzine sulfate</i>	11	<i>potassium chloride cr</i>	52
<i>phenobarbital</i>	9	<i>potassium chloride er</i>	52
<i>phenobarbital sodium</i>	9	POTASSIUM CHLORIDE/DEXTROSE	53
<i>phenoxybenzamine hydrochloride</i>	38	POTASSIUM	52
<i>phenytoin</i>	10	CHLORIDE/DEXTROSE/LACTATED	
<i>phenytoin sodium</i>	10	RINGERS	
<i>phenytoin sodium extended</i>	10	POTASSIUM	53
PHESGO	24	CHLORIDE/DEXTROSE/SODIUM	
<i>philith</i>	64	CHLORIDE	
PHOSLYRA	55	POTASSIUM CHLORIDE/SODIUM	53
<i>phytonadione</i>	55	CHLORIDE	
PIFELTRO	29	<i>potassium citrate er</i>	53
<i>pilocarpine hcl</i>	76	<i>POTELIGEO</i>	24
<i>pilocarpine hydrochloride</i>	46	<i>PRADAXA</i>	36
<i>pimecrolimus</i>	48	<i>PRALUENT</i>	43
<i>pimozide</i>	26	<i>pramipexole dihydrochloride</i>	25
<i>pimtrea</i>	64	<i>pramipexole dihydrochloride er</i>	25
<i>pindolol</i>	39	<i>prasugrel</i>	38
<i>pioglitazone hcl</i>	34	<i>pravastatin sodium</i>	43
<i>pioglitazone hcl/metformin hcl</i>	34	<i>praziquantel</i>	25
		<i>prazosin hydrochloride</i>	38

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PRED-G	74	<i>progesterone</i>	65
PRED-G S.O.P.	74	PROGRAF	70
<i>prednicarbate</i>	48	PROLASTIN-C	57
<i>prednisolone</i>	59	PROLENSA	76
<i>prednisolone acetate</i>	76	PROLIA	72
<i>prednisolone sodium phosphate</i>	59	PROMACTA	37
<i>prednisolone sodium phosphate</i>	76	<i>promethazine dm</i>	80
<i>prednisone</i>	59	<i>promethazine hcl</i>	13
<i>prednisone intensol</i>	59	<i>promethazine hcl plain</i>	13
<i>pregabalin</i>	45	<i>promethazine hydrochloride</i>	13
PREHEVBRIO	71	<i>promethazine</i>	80
PREMARIN	64	<i>hydrochloride/dextromethorphan</i>	
<i>premasol</i>	53	<i>hydrobromide</i>	
<i>premium lidocaine</i>	3	<i>promethazine vc</i>	80
<i>prenatal</i>	55	<i>promethazine vc/codeine</i>	80
<i>prevalite</i>	43	<i>promethazine/codeine</i>	80
<i>prevident 5000 booster plus</i>	53	<i>promethazine/dextromethorphan</i>	80
<i>prevident 5000 dry mouth</i>	53	<i>promethazine/phenylephrine</i>	80
<i>prevident 5000 enamel protect</i>	53	<i>promethazine/phenylephrine/codeine</i>	80
<i>prevident 5000 ortho defense</i>	53	<i>promethegan</i>	13
<i>prevident 5000 plus</i>	53	<i>propafenone hcl</i>	39
<i>prevident 5000 sensitive</i>	53	<i>propafenone hydrochloride er</i>	39
<i>prevident fluoride</i>	53	<i>propranolol hcl</i>	40
<i>prevident rinse</i>	53	<i>propranolol hcl er</i>	39
<i>previfem</i>	64	<i>propranolol hydrochloride</i>	40
PREVYMIS	28	<i>propranolol hydrochloride er</i>	40
PREZCOBIX	30	<i>propylthiouracil</i>	67
PREZISTA	30	PROQUAD	71
PRIFTIN	15	PROSOL	53
<i>primaquine phosphate</i>	25	<i>protriptyline hcl</i>	13
<i>primidone</i>	9	PULMICORT FLEXHALER	77
PRIORIX	71	PULMOZYME	78
PRIVIGEN	67	PURIXAN	18
PROAIR RESPICLICK	78	<i>pyrazinamide</i>	15
<i>probencid</i>	14	<i>pyridostigmine bromide</i>	15
<i>probencid/colchicine</i>	14	<i>pyridostigmine bromide er</i>	15
<i>procainamide hcl</i>	39	<i>pyrimethamine</i>	25
<i>procainamide hydrochloride</i>	39	PYRUKYND	37
PROCALAMINE	53	PYRUKYND TAPER PACK	37
<i>prochlorperazine</i>	13	QINLOCK	17
<i>prochlorperazine edisylate</i>	13	QUADRACEL	71
<i>prochlorperazine maleate</i>	13	<i>quetiapine fumarate</i>	27
PROCRT	37	<i>quetiapine fumarate er</i>	27
<i>procto-med hc</i>	72	<i>quinapril hcl</i>	39
<i>procto-pak</i>	72	<i>quinapril hydrochloride</i>	39
<i>proctosol hc</i>	72	<i>quinapril/hydrochlorothiazide</i>	42

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<i>quinidine gluconate er</i>	39	<i>riluzole</i>	45
<i>quinidine sulfate</i>	39	<i>rimantadine hydrochloride</i>	31
<i>quinine sulfate</i>	25	RINGERS INJECTION	53
QVAR REDIHALER	77	RINGERS IRRIGATION	53
RABAVERT	71	RINVOQ	68
RADICAVA	45	<i>risedronate sodium</i>	72
RADICAVA ORS	45	<i>risedronate sodium dr</i>	72
RADICAVA ORS STARTER KIT	45	RISPERDAL CONSTA	27
<i>raloxifene hydrochloride</i>	65	<i>risperidone</i>	27
<i>ramelteon</i>	80	<i>risperidone odt</i>	27
<i>ramipril</i>	39	<i>ritonavir</i>	31
<i>ranolazine er</i>	42	RITUXAN	24
<i>rasagiline mesylate</i>	26	<i>rivastigmine tartrate</i>	10
RAVICTI	57	<i>rivastigmine transdermal system</i>	10
REBIF	46	<i>rivelsa</i>	64
REBIF REBIDOSE	46	<i>rizatriptan benzoate</i>	14
REBIF REBIDOSE TITRATION PACK	46	<i>rizatriptan benzoate odt</i>	14
REBIF TITRATION PACK	46	<i>roflumilast</i>	79
REBLOZYL	37	ROMIDEPSIN	19
<i>reclipsen</i>	64	<i>ropinirole er</i>	25
RECOMBIVAX HB	71	<i>ropinirole hcl</i>	25
RECTIV	43	<i>ropinirole hydrochloride</i>	25
REGRANEX	48	<i>rosadan</i>	5
RELENZA DISKHALER	31	<i>rosuvastatin calcium</i>	43
RELISTOR	55	ROTARIX	71
REMDESIVIR	73	ROTATEQ	71
REMICADE	70	<i>roweepra</i>	8
RENACIDIN	59	ROZLYTREK	22
<i>renflexis</i>	70	RUBRACA	22
<i>repaglinide</i>	34	<i>rufinamide</i>	10
REPATHA	43	RUKOBIA	30
REPATHA PUSHTRONEX SYSTEM	43	RYBELSUS	34
REPATHA SURECLICK	43	RYBREVANT	24
<i>retacrit</i>	37	RYDAPT	22
RETEVMO	19	RYLAZE	19
RETROVIR IV INFUSION	29	<i>saline flush</i>	73
REVCovi	57	<i>saline flush zr/sterile field</i>	73
REVLIMID	17	<i>salsalate</i>	1
REXULTI	27	SANCUSO	13
REYATAZ	31	SANDIMMUNE	70
REZLIDHIA	22	SANDOSTATIN LAR DEPOT	67
REZUROCK	70	SANTYL	48
RHOGAM ULTRA-FILTERED PLUS	67	<i>sapropterin dihydrochloride</i>	57
<i>ribavirin</i>	28	SARCLISA	24
RIDAURA	68	SAVELLA	45
<i>rifabutin</i>	15	SAVELLA TITRATION PACK	45

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saxagliptin hydrochloride	34	sodium phenylacetate/sodium benzoate	58
saxagliptin hydrochloride/metformin hydrochloride er	34	sodium polystyrene sulfonate	55
SCEMBLIX	22	SOLIQUA 100/33	34
scopolamine	13	SOLIRIS	68
SECUADO	27	SOLTAMOX	17
selegiline hcl	26	SOLU-CORTEF	59
selenium sulfide	48	SOLU-MEDROL	59
SELZENTRY	30	SOMATULINE DEPOT	67
SEREVENT DISKUS	78	SOMAVERT	67
SEROSTIM	60	sorafenib	22
sertraline hcl	12	sorafenib tosylate	22
sertraline hydrochloride	12	sorine	39
setlakin	64	sotalol hcl	39
sevelamer carbonate	55	sotalol hydrochloride	39
sevelamer hydrochloride sf	55	sotalol hydrochloride (af)	39
sf 5000 plus	53	SOTYLIZE	39
SFROWASA	72	SPIRIVA HANDIHALER	78
sharobel	65	SPIRIVA RESPIMAT	78
SHINGRIX	71	spironolactone	42
SIGNIFOR	67	spironolactone/hydrochlorothiazide	42
sildenafil citrate	79	SPRAVATO 56MG DOSE	11
silver sulfadiazine	48	SPRAVATO 84MG DOSE	11
SIMBRINZA	76	sprintec 28	64
simliya	64	SPRITAM	8
simpesse	64	SPRYCEL	22
SIMPONI	70	sps	55
SIMULECT	68	sronyx	64
simvastatin	43	SSD	48
sirolimus	70	stamaril	71
SIRTURO	15	stavudine	29
SKYCLARYS	45	STELARA	68
SKYRIZI	68	sterile water for injection	74
SKYRIZI PEN	68	STERILE WATER FOR IRRIGATION	74
SODIUM CHLORIDE	53	STIOLTO RESPIMAT	80
sodium chloride 0.45%	53	STIVARGA	22
SODIUM CHLORIDE 0.9%	53	STRENSIQ	58
sodium chloride flush	73	streptomycin sulfate	4
sodium citrate/citric acid	53	STRIBILD	29
sodium fluoride	54	STRIVERDI RESPIMAT	78
sodium fluoride 1.1	53	subvenite	9
sodium fluoride 5000 plus	54	subvenite starter kit/blue	9
sodium fluoride 5000 ppm	54	subvenite starter kit/green	9
sodium fluoride 5000 ppm dry mouth	54	subvenite starter kit/orange	9
sodium fluoride 5000 ppm enamel protect	54	SUCRAID	58
sodium fluoride 5000 ppm sensitive	54	sucralfate	56
		sulfacetamide sodium	49
		sulfacetamide sodium	75

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<i>sulfacetamide sodium/prednisolone sodium phosphate</i>	74	<i>tasimelteon</i>	80
<i>sulfadiazine</i>	8	<i>tazarotene</i>	47
<i>sulfamethoxazole(trimethoprim</i>	8	<i>tazicef</i>	6
<i>sulfamethoxazole(trimethoprim ds</i>	8	TAZORAC	47
SULFAMYLON	49	<i>taztia xt</i>	40
<i>sulfasalazine</i>	72	TAZVERIK	19
<i>sulfatrim pediatric</i>	8	TDVAX	71
<i>sulindac</i>	1	TECENTRIQ	24
<i>sumatriptan</i>	14	TECVAYLI	19
<i>sumatriptan succinate</i>	15	TEFLARO	6
<i>sumatriptan succinate refill</i>	14	<i>telmisartan</i>	38
<i>sunitinib malate</i>	22	<i>telmisartan/amlodipine</i>	42
SUNLENCA	30	<i>telmisartan/hydrochlorothiazide</i>	42
<i>swabflush saline flush</i>	74	<i>temazepam</i>	80
<i>syeda</i>	64	TEMIXYS	30
SYFOVRE	74	TEMODAR	16
SYMBICORT	80	<i>temsirolimus</i>	22
SYMDEKO	78	TENIVAC	71
SYMJEPI	78	<i>tenofovir disoproxil fumarate</i>	30
SYMLINPEN 120	34	TEPEZZA	68
SYMLINPEN 60	34	TEPMETKO	22
SYMPAZAN	9	<i>terazosin hcl</i>	58
SYMTUZA	31	<i>terazosin hydrochloride</i>	58
SYNAGIS	68	<i>terbinafine hcl</i>	14
SYNAREL	67	<i>terbutaline sulfate</i>	78
SYNERCID	5	<i>terconazole</i>	14
SYNJARDY	34	<i>teriflunomide</i>	46
SYNJARDY XR	34	TERIPARATIDE	72
SYNRIBO	19	<i>testosterone</i>	60
TABLOID	18	<i>testosterone cypionate</i>	60
TABRECTA	17	<i>testosterone enanthate</i>	60
<i>tacrolimus</i>	48	<i>testosterone pump</i>	60
<i>tacrolimus</i>	70	<i>tetrabenazine</i>	45
<i>tadalafil</i>	58	<i>tetracycline hydrochloride</i>	8
<i>tadalafil</i>	79	THALOMID	17
TAFINLAR	22	<i>theophylline</i>	79
<i>tafluprost</i>	76	<i>theophylline er</i>	79
TAGRISSO	22	THIOLA EC	59
TALVEY	19	<i>thioridazine hcl</i>	26
TALZENNA	22	<i>thiotepa</i>	16
<i>tamoxifen citrate</i>	17	<i>thiothixene</i>	26
<i>tamsulosin hydrochloride</i>	58	THYMOGLOBULIN	67
<i>tarina 24 fe</i>	64	<i>tiadylt er</i>	40
<i>tarina fe 1/20</i>	64	<i>tiagabine hydrochloride</i>	9
<i>tarina fe 1/20 eq</i>	64	TIBSOVO	22
TASIGNA	22	TICE BCG	19
		TICOVAC	71

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<i>tilia fe</i>	64	TRELSTAR MIXJECT	67
<i>timolol maleate</i>	15	<i>treprostinil</i>	79
<i>timolol maleate</i>	76	TRESIBA	36
<i>timolol maleate ophthalmic gel forming</i>	76	TRESIBA FLEXTOUCH	36
TIMOPTIC OCUDOSE	76	<i>tretinoin</i>	24
<i>tinidazole</i>	5	<i>tretinoin</i>	47
<i>tiopronin</i>	59	<i>tri-femynor</i>	64
<i>tiotropium bromide</i>	78	<i>triamcinolone acetonide</i>	48
TIVDAK	24	<i>triamcinolone acetonide</i>	59
TIVICAY	29	<i>triamcinolone acetonide dental paste</i>	46
TIVICAY PD	29	<i>triamterene/hydrochlorothiazide</i>	42
<i>tizanidine hcl</i>	28	<i>trientine hydrochloride</i>	54
<i>tizanidine hydrochloride</i>	28	<i>tri-estarrylla</i>	64
TOBRADEX	74	<i>trifluoperazine hcl</i>	26
<i>tobramycin</i>	75	<i>trifluoperazine hydrochloride</i>	26
<i>tobramycin</i>	78	<i>trifluridine</i>	75
<i>tobramycin sulfate</i>	4	<i>trihexyphenidyl hcl</i>	25
<i>tobramycin/dexamethasone</i>	74	<i>trihexyphenidyl hydrochloride</i>	25
TOBREX	75	TRIJARDY XR	34
<i>tolcapone</i>	25	TRIKAFTA	78
<i>tolterodine tartrate</i>	58	<i>tri-legest fe</i>	64
<i>tolterodine tartrate er</i>	58	<i>tri-linyah</i>	64
<i>tolvaptan</i>	54	<i>tri-lo-estarrylla</i>	64
<i>topiramate</i>	9	<i>tri-lo-marzia</i>	64
<i>toposar</i>	20	<i>tri-lo-mili</i>	64
<i>topotecan hcl</i>	20	<i>tri-lo-sprintec</i>	64
<i>toremifene citrate</i>	17	<i>trilyte</i>	56
<i>torsemide</i>	42	<i>trimethoprim</i>	5
TOUJEO MAX SOLOSTAR	36	<i>trimethoprim sulfate/polymyxin b sulfate</i>	75
TOUJEO SOLOSTAR	36	<i>tri-mili</i>	64
<i>tovet</i>	48	<i>trimipramine maleate</i>	13
TRACLEER	79	TRINTELLIX	12
TRADJENTA	34	<i>tri-nymyo</i>	64
<i>tramadol hcl</i>	3	<i>tri-previfem</i>	64
<i>tramadol hcl er</i>	2	<i>tri-sprintec</i>	64
<i>tramadol hydrochloride er</i>	2	TRIUMEQ	30
<i>tramadol hydrochloride/acetaminophen</i>	3	TRIUMEQ PD	30
<i>trandolapril</i>	39	<i>trivora-28</i>	65
<i>trandolapril/verapamil hcl er</i>	42	<i>tri-vylibra</i>	64
<i>tranexamic acid</i>	38	<i>tri-vylibra lo</i>	65
<i>tranylcypromine sulfate</i>	11	TRIZIVIR	30
TRAVASOL	54	TRODELVY	24
<i>travoprost</i>	76	TROGARZO	30
<i>trazodone hydrochloride</i>	12	TROPHAMINE	54
TREANDA	16	<i>trospium chloride</i>	58
TRECATOR	15	<i>trospium chloride er</i>	58

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TRUMENBA	71	<i>varenicline starting month box</i>	4
TRUSELTIQ	19	<i>varenicline tartrate</i>	4
TUDORZA PRESSAIR	78	VARIVAX	71
TUKYSA	19	VARIZIG	67
<i>tulana</i>	65	VASCEPA	43
TURALIO	22	VECTIBIX	24
TWINRIX	71	VEKLURY	74
TYBOST	30	VELCADE	19
TYMLOS	72	<i>velivet</i>	65
TYPHIM VI	71	VELTASSA	55
TYSABRI	46	VEMLIDY	28
TYVASO	79	VENCLEXTA	22
TYVASO DPI MAINTENANCE KIT	79	VENCLEXTA STARTING PACK	22
TYVASO DPI TITRATION KIT	79	VENLAFAKINE BESYLATE ER	12
TYVASO REFILL	79	<i>venlafaxine hcl er</i>	12
TYVASO STARTER	79	<i>venlafaxine hydrochloride</i>	12
UDENYCA	37	<i>venlafaxine hydrochloride er</i>	12
UKONIQ	22	VENTAVIS	79
UNITHROID	66	VENTOLIN HFA	78
UNITUXIN	24	<i>verapamil hcl</i>	40
UPTRAVI	79	VERAPAMIL HCL ER	40
UPTRAVI TITRATION PACK	79	VERAPAMIL HCL SR	40
<i>ursodiol</i>	56	<i>verapamil hydrochloride</i>	41
UVADEX	19	VERAPAMIL HYDROCHLORIDE ER	41
<i>valacyclovir hcl</i>	31	VERQUVO	43
<i>valacyclovir hydrochloride</i>	31	VERSACLOZ	28
VALCHLOR	16	VERZENIO	23
<i>valganciclovir</i>	28	<i>vestura</i>	65
<i>valganciclovir hydrochloride</i>	28	<i>v-go 20</i>	74
<i>valproate sodium</i>	9	<i>v-go 30</i>	74
<i>valproic acid</i>	9	<i>v-go 40</i>	74
<i>valrubicin</i>	19	VICTOZA	34
<i>valsartan</i>	38	<i>vienna</i>	65
<i>valsartan/hydrochlorothiazide</i>	42	<i>vigabatrin</i>	9
VALTOCO 10 MG DOSE	9	<i>vigadrone</i>	9
VALTOCO 15 MG DOSE	9	VIIBRYD STARTER PACK	12
VALTOCO 20 MG DOSE	9	<i>vilazodone hydrochloride</i>	12
VALTOCO 5 MG DOSE	9	VIMIZIM	58
VANCOMYCIN	5	VIMPAT	10
VANCOMYCIN HCL	5	<i>vinblastine sulfate</i>	19
<i>vancomycin hydrochloride</i>	5	<i>vincasar pfs</i>	19
VANCOMYCIN	5	<i>vincristine sulfate</i>	19
HYDROCHLORIDE/DEXTROSE		<i>vinorelbine tartrate</i>	19
VANDAZOLE	5	VIOKACE	58
VANFLYTA	22	<i>viorele</i>	65
VANTAS	67	VIRACEPT	31

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VIREAD	30	XOPENEX HFA	78
<i>virtussin a/c</i>	82	XOSPATA	23
<i>virtussin ac/alc</i>	82	XPOVIO	20
<i>virtussin dac</i>	82	XPOVIO 100 MG ONCE WEEKLY	19
VISTOGARD	24	XPOVIO 40 MG ONCE WEEKLY	19
<i>vitamin d</i>	55	XPOVIO 40 MG TWICE WEEKLY	19
VITRAKVI	23	XPOVIO 60 MG ONCE WEEKLY	19
VIVIMUSTA	16	XPOVIO 60 MG TWICE WEEKLY	19
VIVITROL	4	XPOVIO 80 MG ONCE WEEKLY	19
VIZIMPRO	23	XPOVIO 80 MG TWICE WEEKLY	20
VOCABRIA	29	XTANDI	16
<i>volnea</i>	65	<i>xulane</i>	65
VONJO	19	XULTOPHY 100/3.6	34
<i>voriconazole</i>	14	XURIDEN	58
VOSEVI	28	<i>xylocaine dental</i>	4
VOTRIENT	23	XYREM	81
VOWST	56	<i>yargesa</i>	58
VRAYLAR	27	YERVOY	24
<i>vyfemla</i>	65	YF-VAX	71
VYJUVEK	49	YONDELIS	16
<i>vylbra</i>	65	YONSA	17
VYNDAQEL	58	<i>yuflyma 1-pen kit</i>	70
VYVANSE	44	<i>yuflyma 2-pen kit</i>	70
VYXEOS	19	YUFLYMA 2-SYRINGE KIT	70
<i>warfarin sodium</i>	36	<i>yuvafem</i>	65
WELIREG	23	<i>zafemy</i>	65
<i>wera</i>	65	<i>zafirlukast</i>	77
WESNATAL DHA COMPLETE	55	<i>zaleplon</i>	80
WINRHO SDF	67	ZALTRAP	20
<i>wixela inhub</i>	80	ZANOSAR	16
XALKORI	23	<i>zarah</i>	65
XARELTO	36	<i>zarxio</i>	37
XARELTO STARTER PACK	36	ZEJULA	23
XATMEP	70	ZELBORAF	23
XCOPRI	9	ZEMAIRA	58
XELJANZ	68	<i>zenatane</i>	47
XELJANZ XR	68	ZENPEP	58
XENPOZYME	54	ZEPOSIA	46
XENPOZYME	58	ZEPOSIA 7-DAY STARTER PACK	46
<i>xeomin</i>	28	ZEPOSIA STARTER KIT	46
XERMELO	55	ZEPZELCA	16
XGEVA	73	ZEVALIN Y-90	24
XIAFLEX	58	<i>zidovudine</i>	30
XIFAXAN	6	<i>ziextenzo</i>	37
XiIDRA	74	ZINPLAVA	56
XOFLUZA	31	ZIOPTAN	76
XOLAIR	68	<i>ziprasidone hcl</i>	27

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ZIRGAN	28
ZOKINVY	58
ZOLADEX	67
<i>zoledronic acid</i>	73
ZOLINZA	20
<i>zolmitriptan</i>	15
<i>zolmitriptan odt</i>	15
<i>zolpidem tartrate</i>	80
ZONISADE	10
<i>zonisamide</i>	10
<i>zovia 1/35</i>	65
<i>zovia 1/35e</i>	65
ZTALMY	10
<i>zumandimine</i>	65
ZYDELIG	23
ZYKADIA	23
ZYLET	74
ZYNLONTA	24
ZYNYZ	24
ZYPREXA RELPREVV	27

This formulary was updated on December 1, 2023. For more recent information or other questions, please contact us, **UAW Trust Medicare Advantage Service Center**, at 1-888-322-5616 or, for TTY users 711, Monday through Friday, 8 a.m. to 7 p.m. Eastern time or visit www.bcbsm.com/medicare.

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