Search Tip:
This is a large document, but you can search quickly and easily by clicking on the binocular icon on your toolbar or using the CTRL+F search function from your keyboard. It will then display a search box for you to type in the name of the drug you want to locate. If you do not know the correct spelling, you can start your search by entering just the first few letters of the name.

State of Arkansas Formulary
Alphabetical Index
Last Updated 10/1/2026

Drug Name	Special Code	Tier	Category
abacavir soln (ZIAGEN equiv)	-	2	ANTIVIRALS
abacavir tab (ZIAGEN equiv)	-	2	ANTIVIRALS
abacavir/lamivudine tab (EPZICOM equiv)	-	2	ANTIVIRALS
ABILIFY MAINTENA INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY MAINTENA INJ ABILIFY ASIMTUFII INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY MYCITE PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY MYCITE TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ABILIFY TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
abiraterone acetate tab 500mg (ZYTIGA equiv)	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
abiraterone tab 250mg (ZYTIGA equiv) (QL= 4 tabs/day)	QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ABRILADA INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ABRYSVO INJ (QL=1 dose/lifetime; Covered at $0 for members 60 years of age and older. Only covered at $0 for women under 60. Not covered for men under 60)	QL-VAC	$0	VACCINES
ABSORICA CAP	-	NC	DERMATOLOGICALS
ABSORICA LD CAP	-	NC	DERMATOLOGICALS
ABSTRAL SL TAB	-	NC	ANALGESICS - OPIOID
acamprosate calcium DR tab (CAMPRAL equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
acarbose tab (PRECOSE equiv)	-	1	ANTIDIABETICS
ACCOLATE TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ACCRUFER CAP	-	NC	HEMATOPOIETIC AGENTS
ACCU-CHEK GUIDE CARE METER	OTC	$0	MEDICAL DEVICES AND SUPPLIES
ACCU-CHEK GUIDE ME KIT	OTC	$0	MEDICAL DEVICES AND SUPPLIES
ACCU-CHEK GUIDE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
ACCUPRIL TAB	-	NC	ANTIHYPERTENSIVES
acebutolol cap (SECTRAL equiv)	-	1	BETA BLOCKERS
ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE TAB	-	NC	ANALGESICS - OPIOID
acetaminophen/codeine tab (TYLENOL/CODEINE equiv)	-	1	ANALGESICS - OPIOID
ACETAMINOPHEN/ISOMETHEPTENE/DICHLORAL CAP	-	NC	MIGRAINE PRODUCTS
acetaminophen/isometheptene/dichloral cap (MIDRIN equiv)	-	NC	MIGRAINE PRODUCTS
acetazolamide ER cap (DIAMOX SEQUEL equiv)	-	2	DIURETICS
acetazolamide tab	-	1	DIURETICS
acetic acid otic soln (VOSOL equiv)	-	1	OTIC AGENTS
acetic acid/hydrocortisone otic soln (VOSOL HC equiv)	-	1	OTIC AGENTS
acetylcysteine soln (MUCOMYST equiv)	-	1	COUGH/COLD/ALLERGY
ACIPHEX SPRINKLE CAP	-	NC	ULCER DRUGS
ACIPHEX TAB	-	NC	ULCER DRUGS
acitretin cap (SORIATANE equiv)	-	2	DERMATOLOGICALS
ACTEMRA ACTPEN INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ACTEMRA SC INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY

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ST	Step Therapy	VAC	Vaccine Program		

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ACTHAR GEL AUTO-INJECTOR	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ACTHAR GEL INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ACTHIB INJ, HIBERIX INJ	VAC	$0	VACCINES
ACTICLATE TAB 75MG, 150MG	-	NC	TETRACYCLINES
ACTIGALL CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
ACTIQ LOZENGE	-	NC	ANALGESICS - OPIOID
ACTIVELLA TAB	-	NC	ESTROGENS
ACTIVITE TAB	-	NC	MULTIVITAMINS
ACTONEL TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ACTOPLUS MET TAB	-	NC	ANTIDIABETICS
ACTOS TAB	-	NC	ANTIDIABETICS
ACULAR (LS) OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ACULAR (LS) OPHTH SOLN 0.4%	-	NC	OPHTHALMIC AGENTS
ACUVAIL OPHTH SOLN	-	3	OPHTHALMIC AGENTS
acyclovir cap (ZOVIRAX equiv)	-	1	ANTIVIRALS
acyclovir cream (ZOVIRAX equiv)	-	NC	DERMATOLOGICALS
acyclovir oint (ZOVIRAX equiv)	-	1	DERMATOLOGICALS
acyclovir susp (ZOVIRAX equiv)	-	1	ANTIVIRALS
acyclovir tab (ZOVIRAX equiv)	-	1	ANTIVIRALS
ADACEL/BOOSTRIX INJ	VAC	$0	TOXOIDS
ADALAT CC TAB	-	NC	CALCIUM CHANNEL BLOCKERS
ADALIMUMAB FKJP KIT INJ 20MG/0.4ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 20 MG/0.2 ML PFS (2 SYRINGE) KIT (YUFLYMA equiv) (QL= 1 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (1 PEN) KIT (YUFLYMA equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (2 PEN) KIT (YUFLYMA equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 40 MG/0.4 ML PFS (2 SYRINGE) KIT (YUFLYMA equiv) (QL= 1 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 80 MG/0.8 ML PEN (1 PEN) KIT (YUFLYMA equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-AATY 80MG/0.8ML PEN (3 PEN) KIT (YUFLYMA equiv) (QL= 1 kit/fill; 1 fill/plan year)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-ADAZ INJ (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-ADAZ INJ (HYRIMOZ equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-ADAZ INJ 10/0.1ML (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-ADAZ PFS INJ (HYRIMOZ equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-FKJP AUTO-INJECTOR KIT (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40MG/0.8ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-FKJP PFS KIT 20 MG/0.4ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-FKJP PFS KIT 40 MG/0.8ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-RYVK AUTO-INJECTOR KIT (TEVA) 80MG/0.8ML	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-RYVK AUTO-INJECTOR KIT (TEVA) 40MG/0.4ML	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-RYVK INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ADALIMUMAB-RYVK INJ (SIMLANDI equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY

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ADAPALENE SOLN	-	NC	DERMATOLOGICALS
adapalene cream (DIFFERIN equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2	DERMATOLOGICALS
adapalene gel (DIFFERIN equiv)	-	NC	DERMATOLOGICALS
adapalene gel 0.3% (DIFFERIN equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2	DERMATOLOGICALS
ADAPALENE PAD	-	NC	DERMATOLOGICALS
adapalene/benzoyl peroxide gel 0.1-2.5% (EPIDUO equiv)	-	2	DERMATOLOGICALS
adapalene/benzoyl peroxide gel 0.3-2.5% (EPIDUO FORTE equiv)	-	2	DERMATOLOGICALS
ADAPALENE/BENZOYL PEROXIDE PAD	-	NC	DERMATOLOGICALS
ADASUVE INHALER	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ADAZIN CREAM	-	NC	DERMATOLOGICALS
ADBRY INJ (QL= 2 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
ADBRY INJ (QL= 4 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
ADCIRCA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
ADDERALL TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ADDERALL XR CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ADDYI TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
adefovir dipivoxil tab (HEPSERA equiv)	-	2	ANTIVIRALS
ADEMPAS TAB (QL= 3 tabs/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
ADLARITY PATCH	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ADMELOG INJ	-	NC	ANTIDIABETICS
ADMELOG SOLOSTAR, HUMALOG TEMPO PEN	-	NC	ANTIDIABETICS
ADQUEY OINT	-	NC	DERMATOLOGICALS
ADRENACLICK INJ, EPINEPHRINE INJ	-	NC	VASOPRESSORS
ADRENALIN SOLN	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
ADVAIR DISKUS INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ADVAIR HFA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ADVATE, KOVALTRY INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ADVICOR TAB	-	NC	ANTIHYPERLIPIDEMICS
ADYNOVATE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ADZENYS ER SUSP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ADZENYS XR ODT	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
AEMCOLO TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
AEROCHAMBER	OTC	2	MEDICAL DEVICES AND SUPPLIES
AFINITOR DISPERZ TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AFINITOR TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AFLURIA INJ, FLUZONE INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
AFSTYLA KIT	-	EXC	HEMATOLOGICAL AGENTS - MISC.
AGAMREE SUSP	-	NC	CORTICOSTEROIDS

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Drug Name	Special Code	Tier	Category
AGRYLIN CAP	-	NC	HEMATOLOGICAL AGENTS - MISC.
AIMOVIG INJ (QL= 1 pack/28 days)	QL	2	MIGRAINE PRODUCTS
AIRDUO POWDER INHALER W/SENSOR	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AIRDUO RESPICLICK	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AIRSUPRA INH	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AJOVY INJ (QL= 1 pack/28 days)	QL	2	MIGRAINE PRODUCTS
AKEEGA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AKLIEF CREAM	-	NC	DERMATOLOGICALS
AKYNZEO CAP (QL= 1 cap/fill; Restricted to Oncology or Hematology Specialist)	QL-RS	2	ANTIEMETICS
ALA-SCALP LOTION	-	NC	DERMATOLOGICALS
albendazole tab (ALBENZA equiv)	-	NC	ANTHELMINTICS
ALBENZA TAB	-	NC	ANTHELMINTICS
albuterol HFA (18gm) inhaler (VENTOLIN equiv) (QL= 2 inhalers/30 days)	QL	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol HFA (6.7gm, 8.5gm) inhaler (PROAIR, PROVENTIL equiv) (QL= 2 inhalers/30 days)	QL	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol neb soln	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ALBUTEROL NEBULIZER SOLN	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol sulfate syrup	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol sulfate tab	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
albuterol/ipratropium neb soln (DUONEB equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ALCAINE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
alclometasone cream (ACLOVATE equiv)	-	2	DERMATOLOGICALS
ALCLOMETASONE OINT	-	2	DERMATOLOGICALS
alclometasone oint (ACLOVATE OINT equiv)	-	2	DERMATOLOGICALS
ALCOHOL SWABS	OTC	EXC	MEDICAL DEVICES AND SUPPLIES
ALCORTIN A GEL (iodoquinol/hydrocortisone/aloe polysaccharide gel equiv)	-	NC	DERMATOLOGICALS
ALDACTAZIDE TAB	-	NC	DIURETICS
ALDACTONE TAB	-	NC	DIURETICS
ALDARA CREAM	-	NC	DERMATOLOGICALS
ALECENSA CAP (QL= 8 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
alendronate sodium oral soln (FOSAMAX equiv)	-	3	ENDOCRINE AND METABOLIC AGENTS - MISC.
alendronate tab (FOSAMAX equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALENDRONATE TAB 40MG	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALEVICYN SOLN DERMAL	-	NC	DERMATOLOGICALS

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alfuzosin SR tab (UROXATRAL equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
ALHEMO INJ	PA-SP	4	HEMATOLOGICAL AGENTS - MISC.
ALINIA TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
aliskiren tab (TEKTURNA equiv)	-	2	ANTIHYPERTENSIVES
ALKINDI SPRINKLE CAP	-	NC	CORTICOSTEROIDS
ALKINDI SPRINKLE CAP 0.5MG	-	NC	CORTICOSTEROIDS
ALKINDI SPRINKLE CAP 1MG	-	NC	CORTICOSTEROIDS
allopurinol tab (ZYLOPRIM equiv)	-	1	GOUT AGENTS
allopurinol tab 200mg	-	NC	GOUT AGENTS
ALLZITAL TAB	-	NC	ANALGESICS - NONNARCOTIC
almotriptan tab (AXERT equiv)	-	NC	MIGRAINE PRODUCTS
ALOCRIL OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ALOGLIPTIN TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN TAB, NESINA TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN/METFORMIN TAB, KAZANO TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN-METFORMIN TAB	-	NC	ANTIDIABETICS
ALOGLIPTIN-PIOGILTAZONE TAB	-	NC	ANTIDIABETICS
ALOQUIN GEL	-	NC	DERMATOLOGICALS
ALORA PATCH	-	3	ESTROGENS
alosetron tab (LOTRONEX equiv)	-	3	GASTROINTESTINAL AGENTS - MISC.
ALPHAGAN P OPHTH SOLN 0.15%	-	NC	OPHTHALMIC AGENTS
ALPHANATE, HUMATE-P INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ALPHANINE SD INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
alprazolam ER tab (XANAX XR equiv)	-	2	ANTIANXIETY AGENTS
alprazolam ODT (NIRAVAM equiv)	-	3	ANTIANXIETY AGENTS
alprazolam tab (XANAX equiv)	-	1	ANTIANXIETY AGENTS
ALPROLIX INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ALREX OPHTH SUSP	-	2	OPHTHALMIC AGENTS
ALREX SUSP	-	NC	OPHTHALMIC AGENTS
ALTABAX OINT	-	NC	DERMATOLOGICALS
ALTACE CAP	-	NC	ANTIHYPERTENSIVES
ALTAFRIN OPHTH SOLN	-	1	OPHTHALMIC AGENTS
ALTOPREV TAB	-	NC	ANTIHYPERLIPIDEMICS
ALTRENO LOTION	-	NC	DERMATOLOGICALS
ALTUVIIIO INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ALUNBRIG PAK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALUNBRIG TAB 30MG (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALUNBRIG TAB 90MG, 180MG (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALVAIZ TAB	-	NC	HEMATOPOIETIC AGENTS
ALVESCO INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
alvimopan cap (ENTEREG equiv)	-	NC	GASTROINTESTINAL AGENTS - MISC.
ALYFTREK TAB (QL= 2 tabs/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
ALYFTREK TAB 4-20-50MG (QL= 3 tabs/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.

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ALZAIR NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
amantadine cap (SYMMETREL equiv)	-	1	ANTIPARKINSON AGENTS
amantadine soln (AMANTADINE equiv)	-	1	ANTIPARKINSON AND RELATED THERAPY AGENTS
amantadine tab	-	2	ANTIPARKINSON AGENTS
AMARYL TAB	-	NC	ANTIDIABETICS
AMBIEN CR TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
AMBIEN TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ambrisentan tab (LETAIRIS equiv) (QL= 1 tab/day)	PA-QL-SP	1	CARDIOVASCULAR AGENTS - MISC.
AMCINONIDE CREAM 0.1%	-	NC	DERMATOLOGICALS
AMCINONIDE LOTION	-	NC	DERMATOLOGICALS
AMCINONIDE OINTMENT	-	NC	DERMATOLOGICALS
amethyst tab (LYBREL equiv)	-	$0	CONTRACEPTIVES
AMICAR SOLN	-	NC	HEMOSTATICS
AMICAR TAB	-	NC	HEMOSTATICS
amiloride tab (MIDAMOR equiv)	-	1	DIURETICS
AMILORIDE/HCTZ TAB	-	1	DIURETICS
amiloride/hydrochlorothiazide tab (MODURETIC equiv)	-	1	DIURETICS
aminocaproic acid soln (AMICAR equiv)	-	2	HEMOSTATICS
aminocaproic acid tab (AMICAR equiv)	-	2	HEMOSTATICS
amiodarone tab (CORDARONE equiv)	-	1	ANTIARRHYTHMICS
AMITIZA CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
amitriptyline tab (ELAVIL equiv)	-	1	ANTIDEPRESSANTS
AMJEVITA AUTO-INJECTOR (adalimumab-atto)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
AMJEVITA INJ (adalimumab-atto)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
amlodipine tab (NORVASC equiv)	-	1	CALCIUM CHANNEL BLOCKERS
amlodipine/atorvastatin tab (CADUET equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
amlodipine/benazepril cap (LOTREL equiv)	-	1	ANTIHYPERTENSIVES
amlodipine/olmesartan tab (AZOR equiv)	-	1	ANTIHYPERTENSIVES
amlodipine/valsartan tab (EXFORGE equiv)	-	1	ANTIHYPERTENSIVES
amlodipine/valsartan/hydrochlorothiazide tab (EXFORGE HCT equiv)	-	NC	ANTIHYPERTENSIVES
ammonium lactate cream (LAC-HYDRIN equiv)	OTC	NC	DERMATOLOGICALS
ammonium lactate lotion (LAC-HYDRIN equiv)	OTC	NC	DERMATOLOGICALS
amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap (ACCUTANE equiv)	-	2	DERMATOLOGICALS
amoxapine tab (AMOXAPINE equiv)	-	1	ANTIDEPRESSANTS
amoxicillin cap (TRIMOX equiv)	-	1	PENICILLINS
AMOXICILLIN CHEW	-	1	PENICILLINS
amoxicillin susp (TRIMOX equiv)	-	1	PENICILLINS
amoxicillin tab (AMOXIL equiv)	-	1	PENICILLINS
AMOXICILLIN/CLAVULANATE CHEW TAB	-	2	PENICILLINS
amoxicillin/clavulanate susp (AUGMENTIN ES equiv)	-	1	PENICILLINS
amoxicillin/clavulanate tab (AUGMENTIN equiv)	-	1	PENICILLINS
amoxicillin/k clavulanate er tab (AMOXICILLIN/CLAVULANATE equiv)	-	3	PENICILLINS
amphetamine er odt (ADZENYS XR equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS

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AMPHETAMINE ER SUSP, DYANAVEL XR SUSP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine tab (EVEKEO equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine/dextroamphetamine ER cap (ADDERALL XR equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine/dextroamphetamine tab (ADDERALL equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5mg (MYDAYIS equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine-dextroamphetamine 3-bead cap er 24hr 25mg (MYDAYIS equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5mg (MYDAYIS equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
amphetamine-dextroamphetamine 3-bead cap er 24hr 50mg (MYDAYIS equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ampicillin cap (AMPICILLIN equiv)	-	1	PENICILLINS
AMZEEQ FOAM	-	NC	DERMATOLOGICALS
ANAFRANIL CAP	-	NC	ANTIDEPRESSANTS
anagrelide cap (AGRYLIN equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
ANALPRAM HC CREAM 2.5-1%	-	1	ANORECTAL AND RELATED PRODUCTS
ANALPRAM HC CREAM 2.5-1%	-	NC	ANORECTAL AND RELATED PRODUCTS
ANALPRAM-E KIT	-	3	ANORECTAL AGENTS
ANALPRAM-HC CREAM	-	3	ANORECTAL AND RELATED PRODUCTS
ANALPRAM-HC CREAM	-	NC	ANORECTAL AGENTS
ANAPROX TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ANASPAZ ODT	-	NC	ULCER DRUGS
ANASTIA LOTION	-	NC	DERMATOLOGICALS
anastrozole tab (ARIMIDEX equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ANCOBON CAP	-	NC	ANTIFUNGALS
ANDEMBRY INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ANDROGEL 1% 25MG	-	NC	ANDROGENS-ANABOLIC
ANDROGEL 1% 50MG, TESTIM GEL 1%	-	NC	ANDROGENS-ANABOLIC
ANDROGEL 1.62% 1.25GM	-	NC	ANDROGENS-ANABOLIC
ANDROGEL 1.62% 2.5GM	-	NC	ANDROGENS-ANABOLIC
ANDROGEL PUMP 1.62%	-	NC	ANDROGENS-ANABOLIC
ANGELIQ TAB	-	NC	ESTROGENS
ANNOVERA RING (QL= 1 ring/year)	QL	$0	CONTRACEPTIVES
ANORO ELLIPTA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ANTABUSE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ANTARA CAP, FENOFIBRATE MICRONIZED CAP	-	NC	ANTIHYPERLIPIDEMICS
ANTARA CAP, LOFIBRA CAP	-	NC	ANTIHYPERLIPIDEMICS
antipyrine/benzocaine otic soln (AURALGAN equiv)	-	NC	OTIC AGENTS
ANUCORT-HC SUPP 25MG	-	2	ANORECTAL AND RELATED PRODUCTS
ANUCORT-HC SUPP 30MG	-	2	ANORECTAL AND RELATED PRODUCTS
ANUSOL-HC CREAM	-	NC	ANORECTAL AGENTS
ANZEMET TAB (QL= 9 tabs/fill)	QL	3	ANTIEMETICS

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ANZUPGO CREAM	-	NC	DERMATOLOGICALS
APADAZ TAB	-	NC	ANALGESICS - OPIOID
APAP/CODEINE SOLN	-	2	ANALGESICS - OPIOID
APEXICON E CREAM (PSORCON E equiv)	-	NC	DERMATOLOGICALS
APIDRA INJ	-	NC	ANTIDIABETICS
APIDRA SOLOSTAR INJ	-	NC	ANTIDIABETICS
APLENZIN TAB	-	NC	ANTIDEPRESSANTS
APOKYN INJ	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
apomorphine inj (APOKYN equiv)	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
APRACLONIDINE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
apraclonidine ophth soln (IOPIDINE equiv)	-	2	OPHTHALMIC AGENTS
aprepitant cap (EMEND equiv) (QL= 3 caps/fill)	QL	2	ANTIEMETICS
aprepitant pak (EMEND equiv) (QL= 3 caps/fill)	QL	2	ANTIEMETICS
APRISO CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
APRIZIO PAK KIT	-	NC	DERMATOLOGICALS
APTIOM TAB	-	NC	ANTICONVULSANTS
APTIVUS CAP	-	2	ANTIVIRALS
AQNEURSA PACKET FOR SUSPENSION	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AQVESME TAB 100MG	-	NC	HEMATOLOGICAL AGENTS - MISC.
ARAKODA TAB	-	3	ANTIMALARIALS
ARANELLE TAB	-	$0	CONTRACEPTIVES
ARANESP INJ	-	NC	HEMATOPOIETIC AGENTS
ARAVA TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ARAZLO LOTION	-	NC	DERMATOLOGICALS
ARBLI SUSP (QL= 330mL/30 days; Prior Authorization required for members age 7 years and older)	PA-QL	3	ANTIHYPERTENSIVES
AREXVY INJ (QL= 1 dose/lifetime)	QL-VAC	$0	VACCINES
arformoterol tartrate neb soln (BROVANA equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ARICEPT TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ARICEPT TAB 23MG	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ARIKAYCE SUSP (QL= 1 vial/day)	PA-QL-SP	4	AMINOGLYCOSIDES
ARIMIDEX TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
aripiprazole ODT (ABILIFY equiv)	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole soln (ABILIFY equiv)	-	3	ANTIPSYCHOTICS/ANTIMANIC AGENTS
aripiprazole tab (ABILIFY equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ARIXTRA INJ	-	NC	ANTICOAGULANTS
ARMLUPEG INJ	-	NC	HEMATOPOIETIC AGENTS
armodafinil tab (NUVIGIL equiv) (QL= 1 tab/day)	QL	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ARMONAIR DIGITAL INHALER 113MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ARMONAIR DIGITAL INHALER 232MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS

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ARMONAIR DIGITAL INHALER 55MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ARMOUR THYROID TAB, NATURE THYROID TAB	-	NC	THYROID AGENTS
ARNUITY ELLIPTA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AROMASIN TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ARTHROTEC TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ARYNTA SOLN	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ASACOL HD TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
ASACOL HD TAB, MESALAMINE TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
asenapine maleate SL tab (SAPHRIS equiv) (QL= 2 tabs/day)	QL	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ashlyna tab, daysee tab (SEASONALE, SEASONIQUE equiv)	-	$0	CONTRACEPTIVES
ASMANEX HFA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ASMANEX INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
aspirin chew tab 81mg (Covered for female members only)	OTC	$0	ANALGESICS - NONNARCOTIC
aspirin EC tab 325mg	OTC	$0	ANALGESICS - NONNARCOTIC
ASPIRIN EC TAB 325MG	OTC	NC	ANALGESICS - NONNARCOTIC
aspirin ec tab 81mg (Covered for female members only)	OTC	$0	ANALGESICS - NONNARCOTIC
aspirin tab 325mg	OTC	$0	ANALGESICS - NONNARCOTIC
aspirin/dipyridamole cap (AGGRENOX equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
ASPIRIN/OMEPRAZOLE ER TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
ASPRUZYO SPRINKLE GRANULES	-	NC	ANTIANGINAL AGENTS
ASTAGRAF XL CAP	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
ASTAMED MYO CAP	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
ASTELIN NASAL SPRAY, ASTEPRO NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
ATACAND TAB	-	NC	ANTIHYPERTENSIVES
atazanavir cap (REYATAZ equiv)	-	2	ANTIVIRALS
atenolol tab (TENORMIN equiv)	-	1	BETA BLOCKERS
atenolol/chlorthalidone tab (TENORETIC equiv)	-	1	ANTIHYPERTENSIVES
ATIVAN TAB	-	NC	ANTIANXIETY AGENTS
ATMEKSI SUSP	-	NC	MUSCULOSKELETAL THERAPY AGENTS
atomoxetine cap (STRATTERA equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ATONCY SOLN, ATOMOXETINE HCL SOLN	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ATORVALIQ SUSP (Prior Authorization required for members age 9 years and older)	PA	3	ANTIHYPERLIPIDEMICS
atorvastatin tab (LIPITOR equiv)	-	$0	ANTIHYPERLIPIDEMICS
atovaquone susp (MEPRON equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
atovaquone/proguanil tab (MALARONE equiv)	-	1	ANTIMALARIALS
ATRALIN GEL 0.05%	-	NC	DERMATOLOGICALS
ATRIPLA TAB	-	NC	ANTIVIRALS
atropine ophth oint	-	1	OPHTHALMIC AGENTS
atropine ophth soln (ISOPTO ATROPINE equiv)	-	1	OPHTHALMIC AGENTS
ATROPINE SUL SOLN 1% OPHTH	-	NC	OPHTHALMIC AGENTS

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ATROPINE SULFATE OPHTH OINT	-	1	OPHTHALMIC AGENTS
ATROVENT HFA AERO	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ATTRUBY PACK	-	NC	CARDIOVASCULAR AGENTS - MISC.
AUBAGIO TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUGMENTIN ES-600 SUSP	-	NC	PENICILLINS
AUGMENTIN TAB	-	NC	PENICILLINS
AUGTYRO CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AUGTYRO CAP 160MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AURANOFIN CAP, RIDAURA CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
AURYXIA TAB	-	3	GASTROINTESTINAL AGENTS - MISC.
AUSTEDO TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUSTEDO TITRATION PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUSTEDO XR TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUSTEDO XR TAB TITRATION KIT	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUSTEDO XR TITRATION PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AUVELITY TAB	-	NC	ANTIDEPRESSANTS
AUVELITY TAB TITRATION PACK	-	NC	ANTIDEPRESSANTS
AUVI-Q INJ	-	NC	VASOPRESSORS
AVALIDE TAB	-	NC	ANTIHYPERTENSIVES
avanafil tab (STENDRA equiv) (QL= 6 tabs/30 days)	QL	2	CARDIOVASCULAR AGENTS - MISC.
AVAPRO TAB	-	NC	ANTIHYPERTENSIVES
AVAR AEROSOL FOAM	-	NC	DERMATOLOGICALS
AVAR CLEANSE LIQ 10-5%	-	2	DERMATOLOGICALS
AVAR PAD	-	NC	DERMATOLOGICALS
AVAR-E EMOLL CREAM	-	2	DERMATOLOGICALS
AVAR-E LS CREAM 10-2%	-	NC	DERMATOLOGICALS
AVELOX TAB	-	NC	FLUOROQUINOLONES
AVERI TAB	-	$0	CONTRACEPTIVES
AVMAPKI FAKZYNJA CO-PACK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AVODART CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
AVONEX INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
AVTOZMA INJ (QL= 2 inj/28 days)	PA-QL	4	ANALGESICS - ANTI-INFLAMMATORY
AWIQLI FLEX INJ	-	NC	ANTIDIABETICS
AXERT TAB	-	NC	MIGRAINE PRODUCTS
AXID CAP	-	NC	ULCER DRUGS
AYGESTIN TAB	-	NC	PROGESTINS
AYVAKIT TAB (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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AZASITE SOLN	-	2	OPHTHALMIC AGENTS
azathioprine tab (IMURAN equiv)	-	1	ASSORTED CLASSES
azathioprine tab 100mg (AZASAN equiv)	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
azathioprine tab 75mg (AZASAN equiv)	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
azelaic acid gel (FINACEA equiv)	-	1	DERMATOLOGICALS
azelastine nasal spray 0.1% (ASTELIN equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
azelastine nasal spray 0.15% (ASTEPRO equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
azelastine ophth soln (OPTIVAR equiv)	-	1	OPHTHALMIC AGENTS
azelastine/fluticasone nasal spray (DYMISTA equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
AZELEX CREAM	-	NC	DERMATOLOGICALS
AZENASE PAK	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
AZESCHEW TAB 13-1MG	-	NC	MULTIVITAMINS
AZESCO TAB	-	NC	MULTIVITAMINS
AZILECT TAB	-	NC	ANTIPARKINSON AGENTS
azilsartan medoxomil tab (EDARBI equiv)	-	NC	ANTIHYPERTENSIVES
azithromycin susp (ZITHROMAX equiv)	-	1	MACROLIDES
azithromycin tab (ZITHROMAX equiv)	-	1	MACROLIDES
AZOPT OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
AZOR TAB	-	NC	ANTIHYPERTENSIVES
AZSTARYS CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
AZULFIDINE EN TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
AZULFIDINE TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
BACIT/POLYMY OPHTH OINT	-	1	OPHTHALMIC AGENTS
BACITRACIN OPHTH OINT	-	2	OPHTHALMIC AGENTS
bacitracin/neomycin/polymyxin b ophth oint (NEOSPORIN equiv)	-	1	OPHTHALMIC AGENTS
bacitracin/polymyxin b ophth oint (POLYSPORIN equiv)	-	1	OPHTHALMIC AGENTS
BACLOFEN CREAM COMPOUND KIT	-	NC	DERMATOLOGICALS
BACLOFEN ORAL SOLN 10MG/5ML (Prior Authorization required for members age 9 years and older)	PA	3	MUSCULOSKELETAL THERAPY AGENTS
baclofen oral soln 10mg/5ml (BACLOFEN equiv) (Prior Authorization required for members age 9 years and older)	PA	3	MUSCULOSKELETAL THERAPY AGENTS
BACLOFEN ORAL SOLN 5 MG/5ML	-	NC	MUSCULOSKELETAL THERAPY AGENTS
baclofen oral soln 5mg/5ml (Prior Authorization required for members age 9 years and older)	PA	3	MUSCULOSKELETAL THERAPY AGENTS
baclofen susp (BACLOFEN equiv) (Prior Authorization required for members age 9 years and older)	PA	3	MUSCULOSKELETAL THERAPY AGENTS
baclofen tab (BACLOFEN equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
baclofen tab 15mg	-	NC	MUSCULOSKELETAL THERAPY AGENTS
BACTRIM DS TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
BACTROBAN CREAM	-	NC	DERMATOLOGICALS
BAFIERTAM CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
BALCOLTRA TAB	-	NC	CONTRACEPTIVES
balsalazide cap (COLAZAL equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
BALVERSA TAB 3MG (QL= 3 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BALVERSA TAB 4MG (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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BALVERSA TAB 5MG (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BANZEL SUSP	-	NC	ANTICONVULSANTS
BANZEL TAB	-	NC	ANTICONVULSANTS
BAQSIMI NASAL POWDER (QL= 2 inhalations/fill)	QL	2	ANTIDIABETICS
BARACLUDE SOLN (Prior Authorization required for members age 9 years and older)	PA	3	ANTIVIRALS
BARACLUDE TAB	-	NC	ANTIVIRALS
BASAGLAR INJ, INSULIN GLARGINE SOLOSTAR INJ	-	NC	ANTIDIABETICS
BAXDELA TAB (QL= 2 tabs/day)	PA-QL	2	FLUOROQUINOLONES
BAXFENDY TAB	-	NC	ANTIHYPERTENSIVES
BCG INJ	VAC	$0	VACCINES
B-D INSULIN SYRINGE	--OTC	1	MEDICAL DEVICES AND SUPPLIES
B-D PEN NEEDLE	-	$0	MEDICAL DEVICES AND SUPPLIES
b-donna tab (DONNATAL equiv)	-	NC	ULCER DRUGS
BECONASE AQ NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
BELBUCA FILM	-	NC	ANALGESICS - OPIOID
BELLADONNA ALKALOID/OPIUM SUPP	-	2	ULCER DRUGS
BELSOMRA TAB	-	NC	HYPNOTICS
benazepril tab (LOTENSIN equiv)	-	1	ANTIHYPERTENSIVES
benazepril/hydrochlorothiazide tab (LOTENSIN HCT equiv)	-	1	ANTIHYPERTENSIVES
BENEFIX INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
BENICAR HCT TAB	-	NC	ANTIHYPERTENSIVES
BENICAR TAB	-	NC	ANTIHYPERTENSIVES
BENLYSTA AUTO-INJECTOR (QL= 4 inj/28 day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
BENLYSTA INJ (QL= 4 inj/28 day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
BENTIVITE TAB	-	NC	HEMATOPOIETIC AGENTS
BENTYL CAP	-	NC	ULCER DRUGS
BENTYL SYRUP	-	NC	ULCER DRUGS
BENZACLIN GEL	-	NC	DERMATOLOGICALS
BENZAMYCIN GEL	-	NC	DERMATOLOGICALS
benzonatate cap (TESSALON equiv)	-	1	COUGH/COLD/ALLERGY
BENZONATATE CAP 150MG	-	NC	COUGH/COLD/ALLERGY
benzonatate cap 150mg (ZONATUSS equiv)	-	NC	COUGH/COLD/ALLERGY
BENZOYL PEROXIDE LOTION	-	NC	DERMATOLOGICALS
BENZOYL PEROXIDE/HYDROCORTISONE LOTION	-	NC	DERMATOLOGICALS
benzphetamine tab	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
benztropine tab	-	1	ANTIPARKINSON AGENTS
bepotastine ophth soln (BEPREVE equiv)	-	3	OPHTHALMIC AGENTS
BEPREVE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
BEQALZI TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BEQALZI TAB STARTER PACK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BERINERT INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
BESER KIT 0.05%	-	NC	DERMATOLOGICALS
BESIFLOXACIN OPHTH SUSP, BESIVANCE OPHTH SUSP	-	NC	OPHTHALMIC AGENTS

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BESREMI PEN INJ	-	NC/3P	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BETAGAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
betaine powder for oral solution (CYSTADANE equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
BETAMETH VALERATE LOTION	-	1	DERMATOLOGICALS
betamethasone augmented cream (DIPROLENE AF CREAM equiv)	-	1	DERMATOLOGICALS
BETAMETHASONE AUGMENTED GEL	-	2	DERMATOLOGICALS
betamethasone augmented gel	-	NC	DERMATOLOGICALS
betamethasone augmented lotion (DIPROLENE LOTION equiv)	-	2	DERMATOLOGICALS
betamethasone augmented oint (DIPROLENE OINT equiv)	-	1	DERMATOLOGICALS
betamethasone diproprionate cream (DIPROSONE CREAM equiv)	-	1	DERMATOLOGICALS
betamethasone diproprionate lotion	-	1	DERMATOLOGICALS
betamethasone diproprionate oint (DIPROSONE OINT equiv)	-	2	DERMATOLOGICALS
betamethasone valerate cream	-	1	DERMATOLOGICALS
betamethasone valerate foam (LUXIQ equiv)	-	NC	DERMATOLOGICALS
betamethasone valerate lotion	-	1	DERMATOLOGICALS
betamethasone valerate oint	-	1	DERMATOLOGICALS
BETAPACE AF TAB	-	NC	BETA BLOCKERS
BETAPACE TAB	-	NC	BETA BLOCKERS
BETASERON INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
BETAXOLOL OPHTH SOLN	-	1	OPHTHALMIC AGENTS
betaxolol ophth soln (BETOPTIC-S equiv)	-	1	OPHTHALMIC AGENTS
betaxolol tab (KERLONE equiv)	-	1	BETA BLOCKERS
bethanechol tab (URECHOLINE equiv)	-	1	URINARY ANTISPASMODICS
BETIMOL OPHTH SOLN 0.25%	-	2	OPHTHALMIC AGENTS
BETOPTIC-S OPHTH SOLN	-	2	OPHTHALMIC AGENTS
BEVESPI AEROSPHERE INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BEXAGLIFLOZN TAB	-	NC	ANTIDIABETICS
bexarotene cap (TARGRETIN equiv) (QL= 10 caps/day)	QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
bexarotene gel (TARGRETIN equiv) (QL= 60 grams/30 days)	PA-QL-SP	1	DERMATOLOGICALS
BEXSERO INJ	VAC	$0	VACCINES
BEYAZ TAB	-	NC	CONTRACEPTIVES
BEYFORTUS INJ	VAC	$0	PASSIVE IMMUNIZING AND TREATMENT AGENTS
BIAFINE EMULSION	-	NC	DERMATOLOGICALS
BIAXIN TAB	-	NC	MACROLIDES
bicalutamide tab (CASODEX equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BIDIL TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
BIFERARX TAB	-	NC	HEMATOPOIETIC AGENTS
BIJUVA CAP	-	NC	ESTROGENS
BIKTARVY TAB	-	2	ANTIVIRALS
BILTRICIDE TAB	-	NC	ANTHELMINTICS
bimatoprost ophth soln (LUMIGAN equiv) (QL= 2.5ml/30 days)	QL	2	OPHTHALMIC AGENTS
bimatoprost ophth soln (LATISSE equiv)	-	EXC	DERMATOLOGICALS

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BIMATOPROST OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
BIMZELX INJ	-	NC	DERMATOLOGICALS
BIMZELX INJ 320MG/2ML	-	NC	DERMATOLOGICALS
BIMZELX SYRINGE	-	NC	DERMATOLOGICALS
BIMZELX SYRINGE 320MG/2ML	-	NC	DERMATOLOGICALS
BINOSTO TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
bismuth/metro/tetra cap (PYLERA equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
BISOPROLOL FUMARATE TAB	-	NC	BETA BLOCKERS
bisoprolol tab (ZEBETA equiv)	-	1	BETA BLOCKERS
bisoprolol/hydrochlorothiazide tab (ZIAC equiv)	-	1	ANTIHYPERTENSIVES
BIXLENVO TAB	-	NC	ANTIVIRALS
BLANCHE CREAM	-	EXC	DERMATOLOGICALS
BLEPH-10 OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
BLUJEPA TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
BONIVA TAB 150MG	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
BONSITY INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
bosentan tab (TRACLEER equiv) (QL= 2 tabs/day)	PA-QL-SP	1	CARDIOVASCULAR AGENTS - MISC.
bosentan tab for oral susp (TRACLEER equiv) (QL= 4 tabs/day)	PA-QL-SP	1	CARDIOVASCULAR AGENTS - MISC.
BOSULIF CAP	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BOSULIF TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
bosutinib tab (BOSULIF equiv)	PA-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BP 10-1 EMU	-	NC	DERMATOLOGICALS
BRAFTOVI CAP 75MG (QL= 6 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BREKIYA INJ	-	NC	MIGRAINE PRODUCTS
BREO ELLIPTA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BREO ELLIPTA INHALER 50-25 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BREXAFEMME TAB	-	NC	ANTIFUNGALS
BREZTRI AEROSPHERE INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BRILINTA TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
brimonidine ophth soln 0.15% (ALPHAGAN P 0.15% equiv)	-	2	OPHTHALMIC AGENTS
brimonidine ophth soln 0.2%	-	1	OPHTHALMIC AGENTS
brimonidine tartrate ophth soln 0.1% (ALPHAGAN equiv)	-	2	OPHTHALMIC AGENTS
brimonidine/timolol ophth soln (COMBIGAN equiv)	-	2	OPHTHALMIC AGENTS
BRINSUPRI TAB	-	NC	RESPIRATORY AGENTS - MISC.
brinzolamide ophth susp (AZOPT equiv)	-	2	OPHTHALMIC AGENTS
BRISDELLE CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
brivaracetam inj (BRIVIACT equiv)	-	NC	ANTICONVULSANTS

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Drug Name	Special Code	Tier	Category
brivaracetam oral soln 10mg/ml (BRIVIACT equiv)	-	NC	ANTICONVULSANTS
brivaracetam tab (BRIVIACT equiv)	-	NC	ANTICONVULSANTS
BRIVIACT INJ	-	NC	ANTICONVULSANTS
BRIVIACT SOLN 10MG/ML	-	NC	ANTICONVULSANTS
BRIVIACT TAB	-	NC	ANTICONVULSANTS
bromfenac ophth soln (BROMDAY equiv)	-	2	OPHTHALMIC AGENTS
bromocriptine cap (PARLODEL equiv)	-	2	ANTIPARKINSON AGENTS
bromocriptine tab (PARLODEL equiv)	-	2	ANTIPARKINSON AGENTS
BRONCHITOL CAP	-	NC	RESPIRATORY AGENTS - MISC.
BROVANA NEB SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
BRUKINSA CAP (QL= 4 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BRUKINSA TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BRYHALI LOTION	-	NC	DERMATOLOGICALS
BRYNOVIN SOLN	-	NC	ANTIDIABETICS
B-SERENE PAD	-	NC	HEMATOPOIETIC AGENTS
BUCAPSOL CAP	-	NC	ANTIANXIETY AGENTS
budesonide ER tab (UCERIS equiv) (QL=1 tab/day)	PA-QL	3	CORTICOSTEROIDS
budesonide inh susp (PULMICORT equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
budesonide nasal spray (RHINOCORT AQUA equiv)	OTC	EXC	NASAL AGENTS - SYSTEMIC AND TOPICAL
budesonide rectal foam (UCERIS RECTAL FOAM equiv)	PA	3	ANORECTAL AND RELATED PRODUCTS
budesonide SR cap (ENTOCORT EC equiv)	-	2	CORTICOSTEROIDS
budesonide/formoterol inhaler (SYMBICORT equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
bumetanide tab (BUMEX equiv)	-	1	DIURETICS
BUNAVAIL FILM	-	NC	ANALGESICS - OPIOID
BUPHENYL POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
BUPHENYL TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
buprenorphine hcl buccal film (BELBUCA equiv)	-	NC	ANALGESICS - OPIOID
buprenorphine patch (BUTRANS equiv) (QL= 4 patches/28 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	3	ANALGESICS - OPIOID
buprenorphine SL tab (SUBUTEX equiv)	-	1	ANALGESICS - OPIOID
buprenorphine/naloxone sl film (SUBOXONE SL FILM equiv)	-	1	ANALGESICS - OPIOID
buprenorphine/naloxone SL tab (SUBOXONE equiv)	-	1	ANALGESICS - OPIOID
bupropion ER tab (WELLBUTRIN equiv)	-	1	ANTIDEPRESSANTS
bupropion SR tab (ZYBAN equiv) (Limited to 180 days/plan year)	QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
bupropion tab (WELLBUTRIN equiv)	-	1	ANTIDEPRESSANTS
bupropion XL tab (WELLBUTRIN XL equiv)	-	1	ANTIDEPRESSANTS
BUPROPION XL TAB, FORFIVO XL TAB	-	NC	ANTIDEPRESSANTS
buspirone tab (BUSPAR equiv)	-	1	ANTIANXIETY AGENTS
BUSPIRONE TAB	-	NC	ANTIANXIETY AGENTS
butalbital/acetaminophen cap	-	NC	ANALGESICS - NONNARCOTIC
butalbital/acetaminophen/caffeine soln	-	NC	ANALGESICS - NONNARCOTIC

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butalbital/acetaminophen/caffeine tab (FIORICET equiv)	-	NC	ANALGESICS - NONNARCOTIC
BUTALBITAL/ASPIRIN/CAFFEINE TAB	-	NC	ANALGESICS - NONNARCOTIC
butorphanol nasal spray (STADOL equiv) (QL= 1 bottle/fill, 2 fills/30 days)	QL	2	ANALGESICS - OPIOID
BUTRANS PATCH	-	NC	ANALGESICS - OPIOID
BYDUREON BCISE AUTO INJ	-	NC	ANTIDIABETICS
BYDUREON INJ	-	NC	ANTIDIABETICS
BYDUREON PEN INJ	-	NC	ANTIDIABETICS
BYLVAY CAP 1200MCG (QL= 5 caps/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
BYLVAY CAP 400MCG (QL= 15 caps/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
BYLVAY SPRINKLE CAP 200MCG (QL= 8 caps/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
BYLVAY SPRINKLE CAP 600MCG (QL= 4 caps/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
BYNFEZIA PEN INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
BYQLOVI OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
BYQLOVI SUSP	-	NC	OPHTHALMIC AGENTS
BYSANTI TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
BYSANTI TITRATION PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
BYSTOLIC TAB	-	NC	BETA BLOCKERS
BYVALSON TAB	-	NC	ANTIHYPERTENSIVES
CABENUVA IM SUSP (QL= 1 kit/30 days)	QL-SP	4	ANTIVIRALS
CABENUVA SUSP 600MG-900MG/3ML (QL= 1 kit/30 days)	QL-SP	4	ANTIVIRALS
cabergoline tab (DOSTINEX equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
CABOMETYX TAB (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CAFCIT INJ	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
CAFERGOT TAB, ERGOTAMINE/CAFFEINE TAB	-	NC	MIGRAINE PRODUCTS
CAFERGOT TAB, ERGOTAMINE/CAFFEINE TAB 1-100MG	-	NC	MIGRAINE PRODUCTS
caffeine citrate soln (CAFCIT equiv) (Covered for members age 11 months and younger)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
CALAN SR TAB	-	NC	CALCIUM CHANNEL BLOCKERS
calcipotriene cream (DOVONEX CREAM equiv)	-	2	DERMATOLOGICALS
calcipotriene cream (TRIONEX equiv)	-	NC	DERMATOLOGICALS
CALCIPOTRIENE FOAM	-	NC	DERMATOLOGICALS
CALCIPOTRIENE FOAM, SORILUX FOAM	-	NC	DERMATOLOGICALS
calcipotriene oint	-	2	DERMATOLOGICALS
calcipotriene soln (DOVONEX SOLN equiv)	-	2	DERMATOLOGICALS
CALCIPOTRIENE SOLN 0.005%	-	2	DERMATOLOGICALS
calcipotriene/betamethasone dipropionate susp	-	NC	DERMATOLOGICALS
calcipotriene/betamethasone oint (TACLONEX equiv)	-	NC	DERMATOLOGICALS
calcitonin inj (MIACALCIN equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
calcitonin nasal spray (MIACALCIN equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
calcitriol cap (ROCALTROL equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
CALCITRIOL INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.

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CALCITRIOL OINT	-	3	DERMATOLOGICALS
calcitriol soln (ROCALTROL equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
calcium acetate cap (PHOSLO equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
CALIBRATION LIQUID	OTC	1	MEDICAL DEVICES AND SUPPLIES
CALQUENCE TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CALSODORE PAK	-	NC	DERMATOLOGICALS
CAMBIA POWDER	-	NC	MIGRAINE PRODUCTS
CAMZYOS CAP (QL= 1 cap/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
CANASA SUPP	-	NC	GASTROINTESTINAL AGENTS - MISC.
candesartan tab (ATACAND equiv)	-	1	ANTIHYPERTENSIVES
candesartan/hydrochlorothiazide tab (ATACAND HCT equiv)	-	1	ANTIHYPERTENSIVES
capecitabine tab (XELODA equiv)	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CAPEX SHAMPOO	-	NC	DERMATOLOGICALS
CAPLYTA CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CAPRELSA TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CAPRELSA TAB 300MG (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
capsaicin/menthol topical patch (SINELEE equiv)	-	NC	DERMATOLOGICALS
captopril tab (CAPOTEN equiv)	-	1	ANTIHYPERTENSIVES
CAPVAXIVE INJ	VAC	$0	VACCINES
CARAC CREAM	-	NC	DERMATOLOGICALS
CARAFATE SUSP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
CARAFATE TAB	-	NC	ULCER DRUGS
CARBAGLU TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
carbamazepine chew tab (TEGRETOL equiv)	-	1	ANTICONVULSANTS
CARBAMAZEPINE CHEW TAB	-	NC	ANTICONVULSANTS
carbamazepine ER cap (CARBATROL equiv)	-	2	ANTICONVULSANTS
carbamazepine ER tab (TEGRETOL XR equiv)	-	2	ANTICONVULSANTS
carbamazepine susp (TEGRETOL equiv)	-	1	ANTICONVULSANTS
carbamazepine tab (TEGRETOL equiv)	-	1	ANTICONVULSANTS
CARBATROL CAP	-	NC	ANTICONVULSANTS
carbidopa tab (LODOSYN equiv)	-	2	ANTIPARKINSON AGENTS
CARBIDOPA/LEVODOPA CAP, RYTARY CAP	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
carbidopa/levodopa ER tab (SINEMET CR equiv)	-	1	ANTIPARKINSON AGENTS
carbidopa/levodopa ODT (PARCOPA equiv)	-	1	ANTIPARKINSON AGENTS
carbidopa/levodopa tab (SINEMET equiv)	-	1	ANTIPARKINSON AGENTS
CARBIDOPA/LEVODOPA/ENTACAPONE TAB (STALEVO equiv)	-	2	ANTIPARKINSON AGENTS
carbidopa-levodopa-entacapone tab (STALEVO equiv)	-	2	ANTIPARKINSON AND RELATED THERAPY AGENTS
carbinoxamine maleate tab 6mg	-	NC	ANTIHISTAMINES
CARBINOXAMINE SOLN	-	3	ANTIHISTAMINES
carbinoxamine tab (PALGIC equiv)	-	3	ANTIHISTAMINES

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CARBZAH SOLN 4MG/5ML	-	NC	ANTIHISTAMINES
CARDAMYST NASAL SPRAY	-	NC	CALCIUM CHANNEL BLOCKERS
CARDIZEM CD CAP	-	NC	CALCIUM CHANNEL BLOCKERS
CARDIZEM LA TAB	-	NC	CALCIUM CHANNEL BLOCKERS
CARDIZEM TAB	-	NC	CALCIUM CHANNEL BLOCKERS
CARDURA TAB	-	NC	ANTIHYPERTENSIVES
CARDURA XL TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
carglumic acid tab (CARBAGLU equiv)	PA-SP	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
carisoprodol tab (SOMA equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
carisoprodol tab 250mg (SOMA equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
CARISOPRODOL/ASPIRIN TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
carisoprodol/aspirin tab (SOMA COMPOUND equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
CARISOPRODOL/ASPIRIN/CODEINE TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
carisoprodol/aspirin/codeine tab (SOMA COMPOUND/CODEINE equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
CARMOL LOTION	-	NC	DERMATOLOGICALS
CARNITOR SOLN	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CARNITOR TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CAROSPIR SUSP	-	NC	DIURETICS
CARTEOLOL OPHTH SOLN	-	1	OPHTHALMIC AGENTS
carteolol ophth soln (OCUPRESS equiv)	-	1	OPHTHALMIC AGENTS
carvedilol phosphate ER cap (COREG CR equiv)	-	NC	BETA BLOCKERS
carvedilol tab (COREG equiv)	-	1	BETA BLOCKERS
CASODEX TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CATAPRES-TTS PATCH	-	NC	ANTIHYPERTENSIVES
CAVERJECT INJ (QL= 6 inj/30 days)	QL	2	CARDIOVASCULAR AGENTS - MISC.
CAVHANZA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CEFACLOR CAP	-	3	CEPHALOSPORINS
cefaclor cap (CECLOR equiv)	-	3	CEPHALOSPORINS
CEFACLOR ER TAB	-	3	CEPHALOSPORINS
CEFACLOR SUSP	-	3	CEPHALOSPORINS
cefadroxil cap (DURICEF equiv)	-	1	CEPHALOSPORINS
cefadroxil susp (DURICEF equiv)	-	1	CEPHALOSPORINS
cefadroxil tab (DURICEF equiv)	-	1	CEPHALOSPORINS
CEFADROXIL TAB	-	2	CEPHALOSPORINS
cefdinir cap (OMNICEF equiv)	-	1	CEPHALOSPORINS
cefdinir susp (OMNICEF equiv)	-	1	CEPHALOSPORINS
cefixime cap (SUPRAX equiv)	-	3	CEPHALOSPORINS
cefixime susp (SUPRAX equiv)	-	3	CEPHALOSPORINS
CEFIXIME TAB	-	NC	CEPHALOSPORINS
CEFPODOXIME PROXETIL SUSP	-	3	CEPHALOSPORINS
cefpodoxime proxetil tab (VANTIN equiv)	-	3	CEPHALOSPORINS
cefprozil susp (CEFZIL equiv)	-	1	CEPHALOSPORINS
cefprozil tab (CEFZIL equiv)	-	1	CEPHALOSPORINS

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cefuroxime tab (CEFTIN equiv)	-	1	CEPHALOSPORINS
CELEBREX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
celecoxib cap (CELEBREX equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
CELEXA TAB	-	NC	ANTIDEPRESSANTS
CELLCEPT CAP	-	NC	ASSORTED CLASSES
CELLCEPT SUSP	-	NC	ASSORTED CLASSES
CELLCEPT TAB	-	NC	ASSORTED CLASSES
CELONTIN CAP	-	NC	ANTICONVULSANTS
CENTANY OINT	-	3	DERMATOLOGICALS
cephalexin cap (KEFLEX equiv)	-	1	CEPHALOSPORINS
cephalexin cap 750mg (KEFLEX equiv)	-	NC	CEPHALOSPORINS
cephalexin susp (KEFLEX equiv)	-	1	CEPHALOSPORINS
cephalexin tab	-	NC	CEPHALOSPORINS
CEQUA (PF) OPHTH SOLN (Restricted to ophthalmology or optometry specialist)	RS	2	OPHTHALMIC AGENTS
CEQUR SIMPLICITY	-	NC	MEDICAL DEVICES AND SUPPLIES
CERDELGA CAP (QL= 2 caps/day)	PA-QL-SP	4	HEMATOPOIETIC AGENTS
CERVICAL CAP	-	EXC	MEDICAL DEVICES AND SUPPLIES
cetrorelix acetate for inj kit (CETROTIDE equiv)	INF	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CETROTIDE KIT	INF	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CETYLEV TAB	-	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
cevimeline cap (EVOXAC equiv)	-	2	MOUTH/THROAT/DENTAL AGENTS
CHANTIX STARTER PACK	SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
CHEMET CAP	-	2	ANTIDOTES
CHENODAL TAB, CTEXLI TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
chlordiazepoxide cap (LIBRIUM equiv)	-	1	ANTIANXIETY AGENTS
CHLORDIAZEPOXIDE/AMITRIPTYLINE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
CHLORDIAZEPOXIDE/CLIDINIUM CAP	-	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
chlordiazepoxide/clidinium cap (LIBRAX equiv)	-	2	ULCER DRUGS
chlorhexidine gluconate soln (PERIDEX equiv)	-	1	MOUTH/THROAT/DENTAL AGENTS
CHLOROQUINE TAB	-	1	ANTIMALARIALS
chloroquine tab (ARALEN equiv)	-	1	ANTIMALARIALS
CHLORPROMAZINE CONC	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
chlorpromazine hcl conc	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
chlorpromazine tab (THORAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
chlorthalidone tab	-	1	DIURETICS
chlorzoxazone tab	-	NC	MUSCULOSKELETAL THERAPY AGENTS
CHLORZOXAZONE TAB 250MG, LORZONE TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
chlorzoxazone tab 500mg	-	2	MUSCULOSKELETAL THERAPY AGENTS
CHOLBAM CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
cholestyramine lite powder (QUESTRAN LITE equiv)	-	1	ANTIHYPERLIPIDEMICS
cholestyramine lite powder pack (QUESTRAN LITE equiv)	-	1	ANTIHYPERLIPIDEMICS
cholestyramine powder (QUESTRAN equiv)	-	1	ANTIHYPERLIPIDEMICS

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cholestyramine powder pack (QUESTRAN equiv)	-	1	ANTIHYPERLIPIDEMICS
CIALIS TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
CIBINQO TAB (QL= 1 tab/day)	PA-QL-SP	4	DERMATOLOGICALS
CICLODAN KIT	-	NC	DERMATOLOGICALS
ciclopirox cream (LOPROX CREAM equiv)	-	1	DERMATOLOGICALS
ciclopirox gel (LOPROX GEL equiv)	-	1	DERMATOLOGICALS
ciclopirox nail soln (PENLAC equiv)	-	1	DERMATOLOGICALS
ciclopirox shampoo (LOPROX SHAMPOO equiv)	-	2	DERMATOLOGICALS
ciclopirox topical susp (LOPROX SUSP equiv)	-	1	DERMATOLOGICALS
cilostazol tab (PLETAL equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
CILOXAN OPHTH OINT	-	3	OPHTHALMIC AGENTS
CILOXAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
CIMDUO TAB	-	2	ANTIVIRALS
cimetidine soln (CIMETIDINE equiv)	-	1	ULCER DRUGS
cimetidine tab (TAGAMET equiv) (Rx Only)	-	1	ULCER DRUGS
CIMZIA INJ (QL= 1 kit/plan year)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
CIMZIA INJ (QL= 2 inj/28 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
CIMZIA INJ 200MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
cinacalcet tab (SENSIPAR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
CINRYZE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
CIPRO HC OTIC SUSP	-	3	OTIC AGENTS
CIPRO SUSP	-	3	FLUOROQUINOLONES
CIPRO TAB	-	NC	FLUOROQUINOLONES
CIPRODEX OTIC SUSP	-	NC	OTIC AGENTS
CIPROFLOXACIN 100MG TAB	-	3	FLUOROQUINOLONES
ciprofloxacin hcl otic soln (CETRAXAL equiv)	-	2	OTIC AGENTS
ciprofloxacin ophth soln (CILOXAN equiv)	-	1	OPHTHALMIC AGENTS
ciprofloxacin susp (CIPRO equiv)	-	2	FLUOROQUINOLONES
ciprofloxacin tab (CIPRO equiv)	-	1	FLUOROQUINOLONES
ciprofloxacin/dexamethasone otic susp (CIPRODEX equiv)	-	2	OTIC AGENTS
ciprofloxacin-hydrocortisone otic susp (CIPRO HC equiv)	-	3	OTIC AGENTS
CITALOPRAM CAP	-	NC	ANTIDEPRESSANTS
citalopram hydrobromide cap	-	NC	ANTIDEPRESSANTS
citalopram soln (CELEXA equiv)	-	1	ANTIDEPRESSANTS
citalopram tab (CELEXA equiv)	-	1	ANTIDEPRESSANTS
CITRANATAL CAP MEDLEY	-	NC	MULTIVITAMINS
CITRULLINE EASY TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
cladribine tab therapy pack (MAVENCLAD equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
CLARIFOAM EF FOAM	-	NC	DERMATOLOGICALS
CLARINEX SYRUP	-	EXC	ANTIHISTAMINES
CLARINEX TAB	-	EXC	ANTIHISTAMINES
CLARINEX-D TAB	-	EXC	COUGH/COLD/ALLERGY
CLARITHROMYC SUSP	-	2	MACROLIDES
clarithromycin ER tab (BIAXIN XL equiv)	-	3	MACROLIDES
clarithromycin tab (BIAXIN equiv)	-	1	MACROLIDES
CLARITIN CAP	OTC	EXC	ANTIHISTAMINES

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CLARITIN CHEW TAB	OTC	EXC	ANTIHISTAMINES
CLEMASTINE SYRUP	-	NC	ANTIHISTAMINES
CLEMASTINE TAB	-	NC	ANTIHISTAMINES
CLEMASTINE TAB, CLEMASZ TAB	-	NC	ANTIHISTAMINES
CLENIA PLUS SUSP	-	NC	DERMATOLOGICALS
CLENPIQ SOLN	-	NC	LAXATIVES
CLEOCIN CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
CLEOCIN SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
CLEOCIN VAGINAL CREAM	-	NC	VAGINAL PRODUCTS
CLEOCIN VAGINAL SUPP (QL= 3 suppositories/fill)	QL	3	VAGINAL PRODUCTS
CLEOCIN-T LOTION	-	NC	DERMATOLOGICALS
CLEOCIN-T PAD	-	NC	DERMATOLOGICALS
CLEOCIN-T SOLN	-	NC	DERMATOLOGICALS
CLIMARA PATCH	-	NC	ESTROGENS
CLIMARA PRO PATCH	-	NC	ESTROGENS
CLINDACIN KIT	-	NC	DERMATOLOGICALS
clindamycin cap (CLEOCIN equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
clindamycin foam (EVOCLIN equiv)	-	NC	DERMATOLOGICALS
clindamycin gel (CLEOCIN GEL equiv)	-	1	DERMATOLOGICALS
clindamycin lotion (CLEOCIN- T equiv)	-	1	DERMATOLOGICALS
clindamycin pad (CLEOCIN-T equiv)	-	1	DERMATOLOGICALS
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (ONEXTON equiv)	-	NC	DERMATOLOGICALS
clindamycin soln (CLEOCIN equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
clindamycin topical soln (CLEOCIN-T equiv)	-	1	DERMATOLOGICALS
clindamycin vaginal cream (CLEOCIN equiv) (QL=1 tube/fill)	QL	1	VAGINAL PRODUCTS
clindamycin/benzoyl peroxide gel (BENZACLIN equiv)	-	2	DERMATOLOGICALS
clindamycin/benzoyl peroxide gel (DUAC GEL equiv)	-	2	DERMATOLOGICALS
clindamycin/tretinoin gel (ZIANA equiv)	-	NC	DERMATOLOGICALS
CLINDAVIX KIT	-	NC	DERMATOLOGICALS
CLINDESSE VAGINAL CREAM (QL= 1 applicator/fill)	QL	2	VAGINAL AND RELATED PRODUCTS
CLINISTIX TEST STRIP	OTC	1	DIAGNOSTIC PRODUCTS
clobazam susp (ONFI equiv) (Prior Authorization required for members age 7 years and older)	PA	2	ANTICONVULSANTS
clobazam tab (ONFI equiv)	-	1	ANTICONVULSANTS
clobetasol E foam (OLUX E equiv)	-	NC	DERMATOLOGICALS
clobetasol foam (OLUX equiv)	-	2	DERMATOLOGICALS
clobetasol lotion (CLOBEX equiv)	-	2	DERMATOLOGICALS
clobetasol propionate cream (TEMOVATE equiv)	-	1	DERMATOLOGICALS
CLOBETASOL PROPIONATE CREAM, IMPOYZ CREAM	-	NC	DERMATOLOGICALS
clobetasol propionate emollient cream (TEMOVATE E equiv)	-	2	DERMATOLOGICALS
clobetasol propionate gel (TEMOVATE GEL equiv)	-	2	DERMATOLOGICALS
clobetasol propionate oint (TEMOVATE equiv)	-	1	DERMATOLOGICALS
clobetasol propionate soln (TEMOVATE equiv)	-	1	DERMATOLOGICALS
clobetasol shampoo (CLOBEX equiv)	-	2	DERMATOLOGICALS
clobetasol spray (CLOBEX equiv)	-	2	DERMATOLOGICALS
CLOBETAVIX KIT	-	NC	DERMATOLOGICALS
CLOBEX LOTION	-	NC	DERMATOLOGICALS
CLOBEX SHAMPOO	-	NC	DERMATOLOGICALS
CLOBEX SPRAY	-	NC	DERMATOLOGICALS

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CLOCORTOLONE CREAM	-	NC	DERMATOLOGICALS
CLODERM CREAM	-	NC	DERMATOLOGICALS
clomiphene citrate tab (CLOMID equiv)	INF	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CLOMIPHENE TAB	INF	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
clomipramine cap (ANAFRANIL equiv)	-	3	ANTIDEPRESSANTS
clonazepam ODT (KLONOPIN equiv)	-	3	ANTICONVULSANTS
clonazepam tab (KLONOPIN equiv)	-	1	ANTICONVULSANTS
CLONAZEPAM TAB	-	NC	ANTICONVULSANTS
clonidine ER tab (KAPVAY equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
clonidine patch (CATAPRES-TTS equiv)	-	2	ANTIHYPERTENSIVES
clonidine tab (CATAPRES equiv)	-	1	ANTIHYPERTENSIVES
CLONIDINE TAB	-	NC	ANTIHYPERTENSIVES
clopidogrel tab 75mg (PLAVIX equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
CLOPIDOGREL THERAPY PACK	-	NC	HEMATOLOGICAL AGENTS - MISC.
clorazepate tab (TRANXENE-T equiv)	-	3	ANTIANXIETY AGENTS
CLOTIC SOLN	-	NC	OTIC AGENTS
clotrimazole cream (LOTRIMIN AF equiv)	-	NC	DERMATOLOGICALS
clotrimazole soln	-	NC	DERMATOLOGICALS
clotrimazole troches (MYCELEX TROCHES equiv)	-	1	MOUTH/THROAT/DENTAL AGENTS
clotrimazole/betamethasone cream (LORTRISONE CREAM equiv)	-	1	DERMATOLOGICALS
CLOTRIMAZOLE/BETAMETHASONE LOTION	-	NC	DERMATOLOGICALS
clotrimazole/betamethasone lotion (LOTRISONE equiv)	-	NC	DERMATOLOGICALS
clozapine odt tab (CLOZAPINE, FAZACLO equiv)	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CLOZAPINE ODT, FAZACLO ODT	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
clozapine tab (CLOZARIL equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
CLOZARIL TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
COAGADEX INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
COBENFY CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
COBENFY CAP STARTER PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
COCAINE HCL SOLN	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
CODEINE SULFATE TAB	-	1	ANALGESICS - OPIOID
COLAZAL CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
colchicine cap (MITIGARE equiv)	-	NC	GOUT AGENTS
colchicine tab (COLCRYS equiv)	-	1	GOUT AGENTS
colchicine/probenecid tab (COL-BENEMID equiv)	-	1	GOUT AGENTS
COLCRYS TAB	-	NC	GOUT AGENTS
colesevelam pack (WELCHOL equiv)	-	2	ANTIHYPERLIPIDEMICS
colesevelam tab (WELCHOL equiv)	-	2	ANTIHYPERLIPIDEMICS
COLESTID GRANULE	-	NC	ANTIHYPERLIPIDEMICS
COLESTID POWDER PACK	-	NC	ANTIHYPERLIPIDEMICS
COLESTID TAB	-	NC	ANTIHYPERLIPIDEMICS
colestipol granule (COLESTID equiv)	-	3	ANTIHYPERLIPIDEMICS
colestipol powder packet (COLESTID equiv)	-	3	ANTIHYPERLIPIDEMICS
colestipol tab (COLESTID equiv)	-	1	ANTIHYPERLIPIDEMICS
colistimethate inj (COLY-MYCIN M equiv)	-	NC	ANTI-INFECTIVE AGENTS - MISC.
COLLANEX EXTERNAL POWDER	-	NC	DERMATOLOGICALS

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COLY-MYCIN S OTIC SUSP	-	2	OTIC AGENTS
COMBIGAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
COMBIPATCH	-	NC	ESTROGENS
COMBIVENT RESPIMAT INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
COMBIVIR TAB	-	NC	ANTIVIRALS
COMBOGESIC TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
COMETRIQ KIT	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COMIRNATY INJ (QL= 1 dose/17 days)	QL-VAC	$0	VACCINES
COMIRNATY INJ 30MCG/0.3ML (QL= 1 dose/17 days)	QL-VAC	$0	VACCINES
COMPLERA TAB	-	3	ANTIVIRALS
COMTAN TAB	-	NC	ANTIPARKINSON AGENTS
CONCEPT DHA CAP	-	1	MULTIVITAMINS
CONCERTA TAB, RITALIN SR TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/NOREXIANTS
CONDYLOX GEL	-	NC	DERMATOLOGICALS
CONJUPRI TAB, LEVAMLODIPINE TAB	-	NC	CALCIUM CHANNEL BLOCKERS
CONSENSI TAB	-	NC	CALCIUM CHANNEL BLOCKERS
CONTRACEPTIVE FILM	OTC	EXC	VAGINAL PRODUCTS
CONTRACEPTIVE GEL	OTC	EXC	VAGINAL PRODUCTS
CONTRACEPTIVE SUPP	OTC	EXC	VAGINAL PRODUCTS
COPIKTRA CAP (QL= 2 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CORDARONE TAB	-	NC	ANTIARRHYTHMICS
CORDRAN CREAM 0.025%	-	NC	DERMATOLOGICALS
CORDRAN OINTMENT	-	NC	DERMATOLOGICALS
CORDRAN TAPE	-	NC	DERMATOLOGICALS
COREG CR CAP	-	NC	BETA BLOCKERS
COREG TAB	-	NC	BETA BLOCKERS
CORGARD TAB	-	NC	BETA BLOCKERS
CORIFACT KIT	-	EXC	HEMATOLOGICAL AGENTS - MISC.
CORLANOR SOLN	PA	3	CARDIOVASCULAR AGENTS - MISC.
CORLANOR TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
CORPHENA ORAL SOLN, RYCLORA ORAL SOLN	-	NC	ANTIHISTAMINES
CORTANE-B OTIC SOLN	-	NC	OTIC AGENTS
CORTEF TAB	-	NC	CORTICOSTEROIDS
CORTENEMA	-	NC	ANORECTAL AGENTS
CORTIC-ND DROPS	-	NC	OTIC AGENTS
CORTIFOAM	-	3	ANORECTAL AGENTS
CORTISONE ACETATE TAB	-	2	CORTICOSTEROIDS
CORTROPHIN INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CORTROPHIN INJ GEL	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CORVITA 150 TAB	-	NC	HEMATOPOIETIC AGENTS
COSENTYX INJ (1-PACK)	-	NC	DERMATOLOGICALS
COSENTYX INJ (2-PACK)	-	NC	DERMATOLOGICALS
COSENTYX INJ 300MG/2ML	-	NC	DERMATOLOGICALS

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COSENTYX UNO INJ	-	NC	DERMATOLOGICALS
COSOPT (PF) OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
COTELLIC TAB (QL= 3 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COTEMPLA XR TAB, METHYLPHENIDATE ER TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
COUMADIN TAB	-	NC	ANTICOAGULANTS
COVARYX HS TAB	-	1	ESTROGENS
COVID-19 TEST	OTC	EXC	DIAGNOSTIC PRODUCTS
COVID-19 VACCINE INJ 5-11Y (PFIZER) (QL= 1 dose/17 days)	QL-VAC	$0	VACCINES
COVID-19 VACCINE INJ 6M-11Y (MODERNA) (QL= 1 dose/24 days)	QL-VAC	$0	VACCINES
COVID-19 VACCINE INJ 6M-4Y (PFIZER) (QL= 1 dose/17 days)	QL-VAC	$0	VACCINES
COXANTO CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
COZAAR TAB	-	NC	ANTIHYPERTENSIVES
CRENESSITY CAP (QL= 2 caps/day)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
CRENESSITY SOLN (QL= 2ml/day)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
CREON CAP	-	2	DIGESTIVE AIDS
CRESEMBA CAP	-	NC	ANTIFUNGALS
CRESTOR TAB	-	NC	ANTIHYPERLIPIDEMICS
CREXONT CAP	-	NC	ANTIPARKINSON AGENTS
CRINONE GEL	PA	2	VAGINAL PRODUCTS
cromolyn conc (GASTROCROM equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
cromolyn neb soln (INTAL equiv)	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
cromolyn ophth soln (CROLOM equiv)	-	1	OPHTHALMIC AGENTS
CROMOLYN SODIUM OPHTH SOLN	-	1	OPHTHALMIC AGENTS
CROTAN LOTION	-	NC	DERMATOLOGICALS
cryselle tab	-	$0	CONTRACEPTIVES
CUE COVID-19 INJ TEST CARTRIDGE	OTC	EXC	DIAGNOSTIC PRODUCTS
CUE HEALTH MONITOR	OTC	EXC	DIAGNOSTIC PRODUCTS
CUTAQUIG INJ	-	NC	PASSIVE IMMUNIZING AND TREATMENT AGENTS
CUTIVATE LOTION	-	NC	DERMATOLOGICALS
CUVPOSA SOLN	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
CUVRIOR TAB	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
cyanocobalamin inj	-	1	HEMATOPOIETIC AGENTS
cyanocobalamin nasal spray 500 mcg/0.1ml (NASCOBAL equiv)	-	3	HEMATOPOIETIC AGENTS
CYCLOBENZAPRINE COMPOUND KIT	-	NC	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine ER cap (AMRIX equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine tab 10mg (FLEXERIL equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine tab 5mg (FLEXERIL equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
cyclobenzaprine tab 7.5mg (FEXMID equiv)	-	3	MUSCULOSKELETAL THERAPY AGENTS
CYCLOGYL OPHTH SOLN	-	3	OPHTHALMIC AGENTS
CYCLOGYL OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
CYCLOMYDRIL OPHTH SOLN	-	2	OPHTHALMIC AGENTS

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cyclopentolate ophth soln (CYCLOGYL equiv)	-	1	OPHTHALMIC AGENTS
cyclophosphamide cap	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CYCLOPHOSPHAMIDE CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CYCLOPHOSPHAMIDE TAB	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CYCLOSERINE CAP	-	NC	ANTIMYCOBACTERIAL AGENTS
CYCLOSET TAB	-	3	ANTIDIABETICS
cyclosporine cap (SANDIMMUNE equiv)	-	2	ASSORTED CLASSES
cyclosporine modified cap (NEORAL equiv)	-	2	ASSORTED CLASSES
cyclosporine modified soln (NEORAL equiv)	-	2	ASSORTED CLASSES
cyclosporine ophth emulsion (RESTASIS equiv) (QL= 60 vials/30 days; Restricted to Ophthalmology or Optometry Specialist)	QL-RS	1	OPHTHALMIC AGENTS
CYCLOSPORINE OPHTH EMULSION 0.1%	-	NC	OPHTHALMIC AGENTS
CYFOLEX CAP	-	NC	HEMATOPOIETIC AGENTS
CYLTEZO AUTO-INJECTOR KIT (adalimumab-adbm)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
CYLTEZO INJ (adalimumab-adbm)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
CYMBALTA CAP	-	NC	ANTIDEPRESSANTS
cyproheptadine syrup	-	1	ANTIHISTAMINES
cyproheptadine tab	-	1	ANTIHISTAMINES
CYSTADANE POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
CYSTADROPS SOLN (QL = 4 bottles/28 days; Restricted to Ophthalmology Specialist)	QL-RS-SP	4	OPHTHALMIC AGENTS
CYSTAGON CAP	SP	4	GENITOURINARY AGENTS - MISCELLANEOUS
CYSTARAN OPHTH SOLN (QL= 4 bottles/28 days; Restricted to Ophthalmology or Optometry Specialist)	QL-RS-SP	4	OPHTHALMIC AGENTS
CYTOMEL TAB	-	NC	THYROID AGENTS
CYTOTEC TAB	-	NC	ULCER DRUGS
CYTRA K CRYSTALS	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
CYTRA-3 SYRUP	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
dabigatran etexilate mesylate cap (PRADAXA equiv)	-	2	ANTICOAGULANTS
dalfampridine ER tab (AMPYRA equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DALIRESP TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
danazol cap (DANOCRINE equiv)	-	2	ANDROGENS-ANABOLIC
DANTRIUM CAP	-	NC	MUSCULOSKELETAL THERAPY AGENTS
dantrolene cap (DANTRIUM equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
DANZITEN TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dapagliflozin tab (FARXIGA equiv) (QL= 1 tab/day)	QL	1	ANTIDIABETICS
dapagliflozin-metformin er tab (XIGDUO XR equiv) (QL= 1 tab/day)	QL	1	ANTIDIABETICS
dapagliflozin-metformin er tab 5-1000MG (XIGDUO XR equiv) (QL= 2 tabs/day)	QL	1	ANTIDIABETICS
dapsone gel (ACZONE equiv)	-	NC	DERMATOLOGICALS
dapsone tab	-	1	ANTI-INFECTIVE AGENTS - MISC.

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DAPTACEL INJ, INFANRIX INJ	VAC	$0	TOXOIDS
darifenacin SR tab (ENABLEX equiv)	-	2	URINARY ANTISPASMODICS
DARTISLA ODT TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
darunavir tab (PREZISTA equiv)	-	2	ANTIVIRALS
dasatinib tab (SPRYCEL equiv)	PA-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAURISMO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DAWNZERA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
DAYBUE SOLN	-	NC	NEUROMUSCULAR AGENTS
DAYBUE STIX POWDER	-	NC	NEUROMUSCULAR AGENTS
DAYBUE STIX POWDER 8000MG	-	NC	NEUROMUSCULAR AGENTS
DAYPRO TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
DAYVIGO TAB (QL= 1 tab/day)	PA-QL	3	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
DAZOMON GEL	-	EXC	DERMATOLOGICALS
DDAVP NASAL SPRAY	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
DDAVP TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
deferasirox granules packet (JADENU equiv)	SP	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferasirox tab (JADENU equiv)	SP	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferasirox tab for oral susp (EXJADE equiv)	SP	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
deferiprone tab (FERRIPROX equiv)	PA-SP	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
deflazacort susp (EMFLAZA equiv)	-	NC	CORTICOSTEROIDS
deflazacort tab (EMFLAZA equiv)	-	NC	CORTICOSTEROIDS
DEGLUDEC FLEXTOUCH INJ	-	NC	ANTIDIABETICS
DEGLUDEC INJ	-	NC	ANTIDIABETICS
DELESTROGEN INJ	-	NC	ESTROGENS
DELSTRIGO TAB	-	2	ANTIVIRALS
DELZICOL CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
demeclocycline tab (DECLOMYCIN equiv)	-	3	TETRACYCLINES
DEMSER CAP	-	NC	ANTIHYPERTENSIVES
DENAVIR CREAM	-	NC	DERMATOLOGICALS
DENGVAXIA SUSP	VAC	$0	VACCINES
DENTA 5000 CREAM PLUS ($0 copay for members age 5 years and younger; All other members covered at preferred brand copay)	-	$0	MOUTH/THROAT/DENTAL AGENTS
DEPACON INJ	-	NC	ANTICONVULSANTS
DEPAKENE CAP	-	NC	ANTICONVULSANTS
DEPAKENE SYRUP	-	NC	ANTICONVULSANTS
DEPAKOTE ER TAB	-	NC	ANTICONVULSANTS
DEPAKOTE SPRINKLE CAP	-	NC	ANTICONVULSANTS
DEPAKOTE TAB	-	NC	ANTICONVULSANTS
DEPEN TITRATAB	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
DEPLIN CAP	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
DEPO-ESTRADIOL IM	-	NC	ESTROGENS

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DEPO-MEDROL INJ	-	NC	CORTICOSTEROIDS
DEPO-MEDROL INJ, METHYLPREDNISOLONE ACE INJ	-	3	CORTICOSTEROIDS
DEPO-PROVERA INJ	-	NC	CONTRACEPTIVES
DEPO-PROVERA SC INJ 104MG (QL= 1 inj/90 days)	QL	$0	CONTRACEPTIVES
DERMACINRX CREAM	-	NC	DERMATOLOGICALS
DERMACINRX KIT	-	NC	DERMATOLOGICALS
DERMACINRX TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
DERMALID PAK	-	NC	DERMATOLOGICALS
DERMA-SMOOTH/FS OIL	-	NC	DERMATOLOGICALS
DERMOTIC OIL	-	NC	OTIC AGENTS
DESCOVY TAB	PA	$0	ANTIVIRALS
desipramine tab (NORPRAMIN equiv)	-	2	ANTIDEPRESSANTS
DESLORATADINE ODT	-	EXC	ANTIHISTAMINES
DESLORATADINE SOLN	-	EXC	ANTIHISTAMINES
desloratadine tab (CLARINEX equiv)	-	EXC	ANTIHISTAMINES
DESMODA SOLN	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
desmopressin acetate tab (DDAVP equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
DESMOPRESSIN NASAL SOLN 1.5MG/ML	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
DESMOPRESSIN NASAL SPRAY	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
DESOGEN TAB	-	NC	CONTRACEPTIVES
DESONATE GEL	-	NC	DERMATOLOGICALS
desonide cream (DESOWEN equiv)	-	2	DERMATOLOGICALS
desonide gel	-	NC	DERMATOLOGICALS
desonide lotion (DESOWEN equiv)	-	NC	DERMATOLOGICALS
desonide oint (DESOWEN equiv)	-	2	DERMATOLOGICALS
DESOWEN CREAM	-	NC	DERMATOLOGICALS
DESOWEN CREAM KIT	-	NC	DERMATOLOGICALS
DESOWEN LOTION	-	NC	DERMATOLOGICALS
DESOWEN LOTION KIT	-	NC	DERMATOLOGICALS
DESOWEN OINT	-	NC	DERMATOLOGICALS
DESOWEN OINT KIT	-	NC	DERMATOLOGICALS
desoximetasone cream (TOPICORT CREAM equiv)	-	2	DERMATOLOGICALS
desoximetasone cream 0.05% (TOPICORT equiv)	-	NC	DERMATOLOGICALS
DESOXIMETASONE GEL	-	NC	DERMATOLOGICALS
desoximetasone oint (TOPICORT equiv)	-	2	DERMATOLOGICALS
desoximetasone oint 0.05% (TOPICORT equiv)	-	NC	DERMATOLOGICALS
desvenlafaxine ER tab (PRISTIQ equiv)	-	1	ANTIDEPRESSANTS
DESVENLAFAXINE ER TAB	-	NC	ANTIDEPRESSANTS
DETROL LA CAP	-	NC	URINARY ANTISPASMODICS
DETROL TAB	-	NC	URINARY ANTISPASMODICS
DEXAMETHASONE CONC	-	1	CORTICOSTEROIDS
dexamethasone elixir	-	1	CORTICOSTEROIDS
dexamethasone pak (DEXPAK equiv)	-	NC	CORTICOSTEROIDS

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Drug Name	Special Code	Tier	Category
DEXAMETHASONE PHOSPHATE INJ	-	1	CORTICOSTEROIDS
DEXAMETHASONE SODIUM PHOSPHATE INJ	-	1	CORTICOSTEROIDS
DEXAMETHASONE SOLN	-	1	CORTICOSTEROIDS
dexamethasone tab (DECADRON equiv)	-	1	CORTICOSTEROIDS
DEXAMETHASONE TAB	-	NC	CORTICOSTEROIDS
DEXCOM G6 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
DEXCOM G6 SENSOR (QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
DEXCOM G6 TRANSMITTER (QL= 1 transmitter/90 days; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
DEXCOM G7 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
DEXCOM G7 SENSOR (QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
DEXCOM G7 SENSOR (15-DAY) (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
DEXEDRINE CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
DEXILANT DR CAP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
dexlansoprazole DR cap (DEXILANT equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
dexmethylphenidate ER cap (FOCALIN XR equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dexmethylphenidate tab (FOCALIN equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
DEXPAK TAB	-	NC	CORTICOSTEROIDS
DEXTENZA OPHTH INSERT	-	NC	OPHTHALMIC AGENTS
dextroamphetamine ER cap (DEXEDRINE equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine soln (PROCENTRA equiv)	-	3	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine sulfate tab 15mg (ZENZEDI equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine sulfate tab 2.5mg (ZENZEDI equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine sulfate tab 20mg (ZENZEDI equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine sulfate tab 30mg (ZENZEDI equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine sulfate tab 7.5mg (ZENZEDI equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
dextroamphetamine tab (DEXEDRINE equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS

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dextromethorphan hbr-quinidine sulfate cap (NUEDEXTA equiv) (QL= 2 caps/day)	PA-QL	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DHIVY TAB	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
DIABETIC METER (all other diabetic meters)	OTC	NC	MEDICAL DEVICES AND SUPPLIES
DIACOMIT CAP	PA-SP	4	ANTICONVULSANTS
DIACOMIT POWDER PACK	PA-SP	4	ANTICONVULSANTS
DIALYVITE TAB	-	1	MULTIVITAMINS
dialyvite tab (NEPHRO-VITE equiv)	-	NC	MULTIVITAMINS
DIALYVITE/ZINC TAB	-	1	MULTIVITAMINS
DIAPHRAGM	-	$0	MEDICAL DEVICES AND SUPPLIES
DIASTAT ACDL GEL	-	NC	ANTICONVULSANTS
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL	-	NC	ANTICONVULSANTS
diazepam conc (VALIUM equiv)	-	1	ANTIANXIETY AGENTS
diazepam oral soln 5mg/5ml (DIAZEPAM equiv)	-	1	ANTIANXIETY AGENTS
diazepam rectal gel (QL= 2 packs/fill)	QL	2	ANTICONVULSANTS
diazepam tab (VALIUM equiv)	-	1	ANTIANXIETY AGENTS
diazoxide susp (PROGLYCEM equiv)	-	3	ANTIDIABETICS
DIBENZYLINE CAP	-	NC	ANTIHYPERTENSIVES
dichlorphenamide tab (KEVEYIS equiv)	-	NC	DIURETICS
DICLOFENAC CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
diclofenac gel (SOLARAZE equiv) (QL= 300gm/30 days)	PA-QL	2	DERMATOLOGICALS
diclofenac gel 1% (VOLTAREN equiv)	-	NC	DERMATOLOGICALS
DICLOFENAC PATCH, FLECTOR PATCH	-	NC	DERMATOLOGICALS
diclofenac potassium (migraine) packet (CAMBIA equiv)	-	NC	MIGRAINE PRODUCTS
diclofenac potassium cap (ZIPSOR equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
diclofenac potassium tab (CATAFLAM equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
diclofenac potassium tab 25mg (DICLOFENAC equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
diclofenac sodium EC tab (VOLTAREN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
diclofenac sodium gel kit (VENNGEL equiv)	-	NC	DERMATOLOGICALS
diclofenac sodium ophth soln (VOLTAREN equiv)	-	1	OPHTHALMIC AGENTS
diclofenac sodium soln 2% (PENNSAID equiv)	-	NC	DERMATOLOGICALS
diclofenac sodium XR tab (VOLTAREN XR equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
diclofenac soln 1.5% (PENNSAID equiv) (QL= 3 bottles/fill)	QL	2	DERMATOLOGICALS
diclofenac/misoprostol DR tab (ARTHROTEC equiv)	-	3	ANALGESICS - ANTI-INFLAMMATORY
DICLONA GEL	-	NC	DERMATOLOGICALS
DICLOTREX PAK	-	NC	DERMATOLOGICALS
dicloxacillin cap (DYNAPEN equiv)	-	1	PENICILLINS
dicyclomine cap (BENTYL equiv)	-	1	ULCER DRUGS
dicyclomine soln (BENTYL equiv)	-	2	ULCER DRUGS
dicyclomine tab (BENTYL equiv)	-	1	ULCER DRUGS
DICYCLOMINE TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
DIETHYLPROPION ER TAB	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
diethylpropion tab	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
DIFFERIN CREAM	-	NC	DERMATOLOGICALS

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DIFFERIN GEL	-	NC	DERMATOLOGICALS
DIFICID SUSP (QL= 136 mL/fill; Step therapy requires trial of vancomycin cap or Firvanq solution)	QL-ST	2	MACROLIDES
DIFICID TAB	-	NC	MACROLIDES
DIFLORASONE CREAM	-	NC	DERMATOLOGICALS
DIFLORASONE CREAM, PSORCON CREAM	-	NC	DERMATOLOGICALS
diflorasone oint	-	NC	DERMATOLOGICALS
DIFLUCAN SUSP	-	NC	ANTIFUNGALS
DIFLUCAN TAB	-	NC	ANTIFUNGALS
diflunisal tab (DOLOBID equiv)	-	1	ANALGESICS - NONNARCOTIC
difluprednate ophth emulsion (DUREZOL equiv)	-	2	OPHTHALMIC AGENTS
digoxin soln (LANOXIN equiv)	-	1	CARDIOTONICS
DIGOXIN SOLN 0.05MG/ML	-	NC	CARDIOTONICS
digoxin tab (LANOXIN equiv)	-	1	CARDIOTONICS
digoxin tab 62.5mcg (LANOXIN equiv)	-	NC	CARDIOTONICS
dihydroergotamine mesylate inj (D.H.E. equiv)	-	NC	MIGRAINE PRODUCTS
dihydroergotamine mesylate nasal spray (MIGRANAL equiv)	-	NC	MIGRAINE PRODUCTS
DILACOR XR CAP	-	NC	CALCIUM CHANNEL BLOCKERS
DILANTIN CAP 100MG	-	NC	ANTICONVULSANTS
DILANTIN CAP 30MG	-	2	ANTICONVULSANTS
DILANTIN INFATABS	-	NC	ANTICONVULSANTS
DILANTIN SUSP	-	NC	ANTICONVULSANTS
DILAUDID TAB	-	NC	ANALGESICS - OPIOID
diltiazem ER cap (CARDIZEM CD equiv)	-	1	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (DILACOR XR equiv)	-	1	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (TIAZAC equiv)	-	1	CALCIUM CHANNEL BLOCKERS
diltiazem ER cap (CARDIZEM SR equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem ER tab (CARDIZEM LA equiv)	-	2	CALCIUM CHANNEL BLOCKERS
diltiazem tab (CARDIZEM equiv)	-	1	CALCIUM CHANNEL BLOCKERS
dimethyl fumarate DR cap (TECFIDERA equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
dimethyl fumarate DR starter pack (TECFIDERA STARTER PACK equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DIOVAN HCT TAB	-	NC	ANTIHYPERTENSIVES
DIOVAN TAB	-	NC	ANTIHYPERTENSIVES
DIPENTUM CAP	-	3	GASTROINTESTINAL AGENTS - MISC.
diphenhydramine inj (BENADRYL equiv)	-	NC	ANTIHISTAMINES
DIPHENOXYLATE/ATROPINE LIQUID	-	3	ANTIDIARRHEAL/PROBIOTIC AGENTS
diphenoxylate/atropine tab (LOMOTIL equiv)	-	1	ANTIDIARRHEALS
DIPROLENE AF CREAM	-	NC	DERMATOLOGICALS
DIPROLENE OINT	-	NC	DERMATOLOGICALS
DIPTHERIA/TETANUS TOXOID (PEDIATRIC) INJ	VAC	$0	TOXOIDS
dipyridamole tab (PERSANTINE equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
DISKETS TAB (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1	ANALGESICS - OPIOID
disopyramide cap (NORPACE equiv)	-	1	ANTIARRHYTHMICS
disulfiram tab (ANTABUSE equiv)	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

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disulfiram tab 500mg	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DITROPAN XL TAB	-	NC	URINARY ANTISPASMODICS
DIURIL SUSP	-	2	DIURETICS
divalproex ER tab (DEPAKOTE ER equiv)	-	1	ANTICONVULSANTS
divalproex sodium DR tab (DEPAKOTE equiv)	-	1	ANTICONVULSANTS
divalproex sprinkle cap (DEPAKOTE equiv)	-	1	ANTICONVULSANTS
DIVIGEL GEL, ESTROGEL GEL	-	NC	ESTROGENS
dofetilide cap (TIKOSYN equiv)	-	2	ANTIARRHYTHMICS
DOJOLVI ORAL LIQUID	-	NC	NUTRIENTS
DOLGIC PLUS TAB	-	NC	ANALGESICS - NONNARCOTIC
DOLOBID TAB	-	NC	ANALGESICS - NONNARCOTIC
donepezil ODT (ARICEPT equiv) (QL= 1 tab/day)	QL	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
donepezil tab (ARICEPT equiv) (QL= 2 tabs/day)	QL	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
donepezil tab 23mg (ARICEPT equiv) (QL= 1 tab/day)	QL	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DONNATAL ELIXIR, PB-BELLADONNA ELIXIR	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
DONNATAL TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
DOPTELET SPRINKLE CAP (QL= 2 caps/day)	PA-QL-SP	4	HEMATOPOIETIC AGENTS
DOPTELET TAB (QL= 2 tabs/day)	PA-QL-SP	4	HEMATOPOIETIC AGENTS
DORYX MPC TAB	-	NC	TETRACYCLINES
dorzolamide ophth soln (TRUSOPT equiv)	-	1	OPHTHALMIC AGENTS
dorzolamide/timolol (pf) ophth soln (COSOPT equiv)	-	1	OPHTHALMIC AGENTS
DORZOLAMIDE/TIMOLOL OPHTH SOLN	-	2	OPHTHALMIC AGENTS
DOVATO TAB	-	2	ANTIVIRALS
DOVONEX CREAM	-	NC	DERMATOLOGICALS
doxazosin tab (CARDURA equiv)	-	1	ANTIHYPERTENSIVES
doxepin cap (SINEQUAN equiv)	-	1	ANTIDEPRESSANTS
doxepin conc (SINEQUAN equiv)	-	1	ANTIDEPRESSANTS
DOXEPIN HCL CAP	-	1	ANTIDEPRESSANTS
DOXEPIN HCL CONC	-	1	ANTIDEPRESSANTS
doxepin hcl cream	-	NC	DERMATOLOGICALS
doxepin tab (SILENOR equiv)	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
DOXERCALCIFEROL CAP	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
doxercalciferol cap (HECTOROL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
doxycycline (rosacea) cap delayed release (ORACEA equiv)	-	NC	DERMATOLOGICALS
doxycycline hyclate cap (VIBRAMYCIN equiv)	-	1	TETRACYCLINES
DOXYCYCLINE HYCLATE CAP	-	NC	TETRACYCLINES
doxycycline hyclate DR tab (DORYX equiv)	-	NC	TETRACYCLINES
doxycycline hyclate tab (VIBRATAB equiv)	-	1	TETRACYCLINES
doxycycline hyclate tab (TARGADOX equiv)	-	NC	TETRACYCLINES

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Drug Name	Special Code	Tier	Category
doxycycline hyclate tab 75mg, 150mg	-	NC	TETRACYCLINES
doxycycline hyclate tab 75mg, 150mg (ACTICLATE equiv)	-	NC	TETRACYCLINES
doxycycline monohydrate cap (MONODOX equiv)	-	1	TETRACYCLINES
doxycycline monohydrate cap 150mg (MONODOX equiv)	-	NC	TETRACYCLINES
doxycycline monohydrate cap 75mg (MONODOX equiv)	-	NC	TETRACYCLINES
doxycycline monohydrate tab (ADOXA equiv)	-	1	TETRACYCLINES
doxycycline monohydrate tab 150mg (ADOXA equiv)	-	NC	TETRACYCLINES
doxycycline susp (VIBRAMYCIN equiv)	-	2	TETRACYCLINES
doxylamine/pyridoxine dr tab (DICLEGIS equiv)	-	NC	ANTIEMETICS
D-PENAMINE TAB	-	2	ASSORTED CLASSES
DRISDOL CAP	-	NC	VITAMINS
DRIZALMA DR CAP	-	NC	ANTIDEPRESSANTS
dronabinol cap (MARINOL equiv)	PA	2	ANTIEMETICS
DRONABINOL SOLN, SYNDROS SOLN	-	NC	ANTIEMETICS
drospirenone/ethinyl estradiol/levomefolate tab (BEYAZ equiv)	-	$0	CONTRACEPTIVES
DROXIA CAP	-	2	HEMATOPOIETIC AGENTS
droxidopa cap (NORTHERA equiv)	-	NC	VASOPRESSORS
DRYSOL SOLN	-	1	DERMATOLOGICALS
DSUVIA SL TAB	-	NC	ANALGESICS - OPIOID
DUAC GEL	-	NC	DERMATOLOGICALS
DUAKLIR INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
DUAVEE TAB	-	NC	ESTROGENS
DUETACT TAB	-	NC	ANTIDIABETICS
DULERA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
duloxetine cap 40mg (IRENKA equiv)	-	NC	ANTIDEPRESSANTS
DULOXETINE DR CAP	-	NC	ANTIDEPRESSANTS
duloxetine EC cap (CYMBALTA equiv)	-	1	ANTIDEPRESSANTS
DULOXICAINE PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
DUOBRII LOTION	-	NC	DERMATOLOGICALS
DUOPA ENTERAL SUSP	-	NC	ANTIPARKINSON AGENTS
DUOVISC KIT	-	NC	OPHTHALMIC AGENTS
DUPIXENT INJ (QL= 2 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
DUPIXENT PEN INJ (QL= 2 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
DURAVENT PE TAB	-	NC	COUGH/COLD/ALLERGY
DUREZOL OPHTH EMULSION	-	NC	OPHTHALMIC AGENTS
dutasteride cap (AVODART equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
dutasteride/tamsulosin cap (JALYN equiv)	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
DUTOPROL TAB	-	NC	ANTIHYPERTENSIVES
DUVYZAT ORAL SUSP	-	NC	NEUROMUSCULAR AGENTS
DUZALLO TAB	-	NC	GOUT AGENTS
DXEVO 11-DAY PAK	-	NC	CORTICOSTEROIDS
DYANAVEL XR CHEW	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
DYNACIN TAB	-	NC	TETRACYCLINES

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Drug Name	Special Code	Tier	Category
DYRENIUM CAP	-	NC	DIURETICS
E.E.S. TAB	-	3	MACROLIDES
EBGLYSS INJ (QL= 1 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
EBGLYSS PEN INJ (QL= 1 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
EB-N3 DR CAP	-	NC	MULTIVITAMINS
ECONASIL KIT	-	NC	DERMATOLOGICALS
econazole cream (SPECTAZOLE equiv)	-	1	DERMATOLOGICALS
ECONAZOLE NITRATE FOAM, ECOZA FOAM	-	NC	DERMATOLOGICALS
ECOZA FOAM	-	NC	DERMATOLOGICALS
EDARBI TAB	-	NC	ANTIHYPERTENSIVES
EDARBYCLOR TAB	-	NC	ANTIHYPERTENSIVES
EDECRIN TAB	-	NC	DIURETICS
EDEX INJ (QL= 6 inj/30 days)	QL	2	CARDIOVASCULAR AGENTS - MISC.
EDLUAR SL TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
EDURANT PED TAB	-	2	ANTIVIRALS
EDURANT TAB	-	2	ANTIVIRALS
efavirenz tab (SUSTIVA equiv)	-	2	ANTIVIRALS
efavirenz/emtricitabine/tenofovir df tab (ATRIPLA equiv)	-	2	ANTIVIRALS
efavirenz/lamivudine/tenofovir df (lo) tab (SYMFI (LO) equiv)	-	2	ANTIVIRALS
EFAVIRENZ/LAMIVUDINE/TENOFOVIR TAB	-	2	ANTIVIRALS
EFFER-K TAB	-	1	MINERALS & ELECTROLYTES
EFFEXOR XR CAP	-	NC	ANTIDEPRESSANTS
EFFIENT TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
EFUDEX CREAM	-	NC	DERMATOLOGICALS
EGATEN TAB	-	NC	ANTHELMINTICS
EGRIFTA INJ	-	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
EGRIFTA WR KIT	-	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
EKTERLY TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
ELDEPYRL CAP	-	NC	ANTIPARKINSON AGENTS
ELEPSIA XR TAB	-	NC	ANTICONVULSANTS
ELESTAT OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ELESTRIN GEL	-	NC	ESTROGENS
eletriptan tab (RELPAX equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS
ELIDEL CREAM	-	NC	DERMATOLOGICALS
ELIGEN B12 TAB	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
ELIMITE CREAM	-	NC	DERMATOLOGICALS
ELIPHOS TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
ELIQUIS SPRINKLE CAP	-	2	ANTICOAGULANTS
ELIQUIS TAB FOR ORAL SUSP	-	2	ANTICOAGULANTS
ELIQUIS TAB, ELIQUIS STARTER PACK	-	2	ANTICOAGULANTS
ELIXOPHYLLIN ELIXIR	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ELLA TAB	-	EXC	CONTRACEPTIVES
ELMIRON CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS

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Drug Name	Special Code	Tier	Category
ELOCON CREAM	-	NC	DERMATOLOGICALS
ELOCON OINT	-	NC	DERMATOLOGICALS
ELOCTATE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
eltrombopag olamine powder pack for susp (PROMACTA equiv) (QL= 1 packet/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
eltrombopag olamine tab (PROMACTA equiv) (QL= 1 tab/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
eltrombopag olamine tab 50MG (PROMACTA equiv) (QL= 2 tabs/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
eltrombopag olamine tab 75MG (PROMACTA equiv) (QL= 2 tabs/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
eluryng vaginal ring (NUVARING equiv)	-	$0	CONTRACEPTIVES
ELYXYB SOLN	-	NC	MIGRAINE PRODUCTS
EMBECTA INSULIN SYRINGE	--OTC	1	MEDICAL DEVICES AND SUPPLIES
EMBECTA PEN NEEDLE	OTC	$0	MEDICAL DEVICES AND SUPPLIES
EMEND CAP	-	NC	ANTIEMETICS
EMEND PAK	-	NC	ANTIEMETICS
EMEND SUSP	-	NC	ANTIEMETICS
EMFLAZA SUSP	-	NC	CORTICOSTEROIDS
EMFLAZA TAB	-	NC	CORTICOSTEROIDS
EMGALITY INJ (QL= 1 inj/28 days)	QL	2	MIGRAINE PRODUCTS
EMGALITY INJ 100MG/ML (QL= 3 inj/fill, 6 fills/year)	QL	2	MIGRAINE PRODUCTS
EMPAVELI INJ (QL= 160ml/28 days)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
EMROSI CAP	-	NC	DERMATOLOGICALS
EMSAM PATCH	-	3	ANTIDEPRESSANTS
emtricitabine cap (EMTRIVA equiv)	-	2	ANTIVIRALS
emtricitabine/tenofovir disoproxil fumarate tab (TRUVADA equiv)	-	$0	ANTIVIRALS
emtricitabine-rilpivirine-tenofovir df tab (COMPLERA equiv)	-	2	ANTIVIRALS
EMTRIVA CAP	-	NC	ANTIVIRALS
EMTRIVA SOLN	-	2	ANTIVIRALS
EMVERM TAB	-	NC	ANTHELMINTICS
ENABLEX TAB	-	NC	URINARY ANTISPASMODICS
enalapril maleate oral soln (EPANED equiv) (Prior Authorization required for members age 9 years and older)	PA	2	ANTIHYPERTENSIVES
enalapril tab (VASOTEC equiv)	-	1	ANTIHYPERTENSIVES
enalapril/hydrochlorothiazide tab (VASERETIC equiv)	-	1	ANTIHYPERTENSIVES
ENBREL INJ 25MG (QL= 8 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ENBREL INJ 50MG (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ENBREL MINI INJ (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ENBREL SURECLICK INJ 50MG (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ENBUMYST SOLN 0.5MG/0.1ML	-	NC	DIURETICS
ENDARI POWDER PACKET	-	NC	HEMATOPOIETIC AGENTS
ENDOMETRIN INSERT	PA	2	VAGINAL PRODUCTS
ENDOMETRIN SUPP	PA	2	VAGINAL AND RELATED PRODUCTS
ENFLONSIA INJ	VAC	$0	PASSIVE IMMUNIZING AND TREATMENT AGENTS
ENGERIX-B INJ, RECOMBIVAX-HB INJ	VAC	$0	VACCINES
enoxaparin inj (LOVENOX equiv)	-	2	ANTICOAGULANTS
enpresse tab (TRI-LEVELEN equiv)	-	$0	CONTRACEPTIVES
ENSACOVE CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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Drug Name	Special Code	Tier	Category
ENSACOVE CAP 100MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ENSPRYNG INJ (QL= 1 inj/28 days)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
ENSTILAR FOAM	-	NC	DERMATOLOGICALS
entacapone tab (COMTAN equiv)	-	2	ANTIPARKINSON AGENTS
ENTADFI CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
entecavir tab (BARACLUDE equiv) (QL= 1 tab/day)	QL	2	ANTIVIRALS
ENTEREG CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
ENTRESTO CAP	-	NC	CARDIOVASCULAR AGENTS - MISC.
ENTRESTO TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
ENTYVIO SC INJ (QL= 2 inj/28 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
ENVARSUS XR TAB	-	NC	ASSORTED CLASSES
EOHILIA SUSP	-	NC	CORTICOSTEROIDS
EPANED SOLN	-	NC	ANTIHYPERTENSIVES
EPCLUSA PAK	-	NC	ANTIVIRALS
EPCLUSA TAB	-	NC	ANTIVIRALS
EPIDIOLEX SOLN	PA-SP	4	ANTICONVULSANTS
EPIDUO FORTE GEL 0.3-2.5%	-	NC	DERMATOLOGICALS
EPIDUO GEL 0.1-2.5%	-	NC	DERMATOLOGICALS
EPIFOAM AEROSOL	-	2	DERMATOLOGICALS
epinastine opthth soln (ELESTAT equiv)	-	3	OPHTHALMIC AGENTS
epinephrine hcl nasal soln (ADRENALIN equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
epinephrine pen inj 0.15mg, 0.3mg (EPIPEN (JR) equiv) (QL= 2 inj/fill)	QL	1	VASOPRESSORS
EPIPEN (JR) INJ	-	NC	VASOPRESSORS
EPIVIR SOLN	-	NC	ANTIVIRALS
EPIVIR TAB	-	NC	ANTIVIRALS
eplerenone tab (INSPRA equiv)	-	1	ANTIHYPERTENSIVES
EPRONTIA SOLN	-	NC	ANTICONVULSANTS
EPSOLAY CREAM	-	NC	DERMATOLOGICALS
EPZICOM TAB	-	NC	ANTIVIRALS
EQUETRO CAP	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ERGOCAL CAP	-	NC	VITAMINS
ERGOLOID MESYLATES TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ERGOMAR SL TAB	-	NC	MIGRAINE PRODUCTS
ERIVEDGE CAP (QL= 1 cap/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERLEADA TAB (QL= 4 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERLEADA TAB 240MG (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
erlotinib tab (TARCEVA equiv)	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
erlotinib tab 25mg (TARCEVA equiv) (QL= 3 tabs/day)	PA-QL-SF-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERMEZA SOLN 150 MCG/5ML	-	NC	THYROID AGENTS
ERTACZO CREAM	-	NC	DERMATOLOGICALS
ERY PAD	-	2	DERMATOLOGICALS

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Drug Name	Special Code	Tier	Category
ERYPED SUSP	-	NC	MACROLIDES
ERYTHROMYCIN CAP DR	-	2	MACROLIDES
erythromycin DR cap (ERYC equiv)	-	2	MACROLIDES
ERYTHROMYCIN EC CAP	-	2	MACROLIDES
erythromycin ethylsuccinate susp (ERYPED equiv)	-	2	MACROLIDES
erythromycin ethylsuccinate tab (E.E.S. equiv)	-	3	MACROLIDES
erythromycin gel	-	1	DERMATOLOGICALS
erythromycin ophth oint	-	1	OPHTHALMIC AGENTS
ERYTHROMYCIN OPHTH OINT	-	NC	OPHTHALMIC AGENTS
erythromycin pad	-	1	DERMATOLOGICALS
erythromycin soln	-	1	DERMATOLOGICALS
erythromycin tab (ERYTHROMYCIN equiv) (all forms except PCE)	-	2	MACROLIDES
erythromycin tab (ERY-TAB equiv)	-	3	MACROLIDES
erythromycin/benzoyl peroxide gel (BENZAMYCIN equiv)	-	2	DERMATOLOGICALS
ESBRIET CAP	-	NC	RESPIRATORY AGENTS - MISC.
ESBRIET TAB	-	NC	RESPIRATORY AGENTS - MISC.
ESCITALOPRAM CAP	-	NC	ANTIDEPRESSANTS
escitalopram soln (LEXAPRO equiv)	-	2	ANTIDEPRESSANTS
escitalopram tab (LEXAPRO equiv)	-	1	ANTIDEPRESSANTS
ESGIC TAB	-	NC	ANALGESICS - NONNARCOTIC
ESKATA SOLN	-	NC	DERMATOLOGICALS
eslicarbazepine acetate tab (APTIOM equiv)	-	NC	ANTICONVULSANTS
esomeprazole cap (NEXIUM equiv) (Rx Only)	-	1	ULCER DRUGS
esomeprazole DR granule pack (NEXIUM equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
ESPEROCT INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
estazolam tab (PROSOM equiv)	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
esterified estrogens/methyltestosterone tab (ESTRATEST equiv)	-	1	ESTROGENS
ESTRACE TAB	-	NC	ESTROGENS
ESTRACE VAGINAL CREAM	-	NC	VAGINAL PRODUCTS
estradiol cream (ESTRACE equiv)	-	1	VAGINAL PRODUCTS
estradiol patch (CLIMARA equiv)	-	1	ESTROGENS
estradiol patch (VIVELLE-DOT, MINIVELLE equiv)	-	1	ESTROGENS
estradiol tab (ESTRACE equiv)	-	1	ESTROGENS
estradiol td gel (DIVIGEL equiv)	-	NC	ESTROGENS
estradiol vaginal tab, yuvafem vaginal tab (VAGIFEM equiv) (QL= 8 tabs/28 days, 18 tabs on first fill)	QL	2	VAGINAL PRODUCTS
estradiol valerate inj (DELESTROGEN equiv) (QL= 5ml/fill)	QL	2	ESTROGENS
estradiol/norethindrone tab (ACTIVELLA equiv)	-	1	ESTROGENS
ESTRING (3 copays per Rx)	-	2	VAGINAL PRODUCTS
estrogens, conjugated tab (PREMARIN equiv)	-	2	ESTROGENS
ESTROSTEP FE TAB	-	NC	CONTRACEPTIVES
eszopiclone tab (LUNESTA equiv) (QL= 1 tab/day)	QL	1	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
ETCAMAH TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ethacrynic tab (EDECRIN equiv)	-	2	DIURETICS

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ethambutol tab (MYAMBUTOL equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
ethosuximide cap (ZARONTIN equiv)	-	2	ANTICONVULSANTS
ethosuximide soln (ZARONTIN equiv)	-	1	ANTICONVULSANTS
etodolac cap (LODINE equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
etodolac ER tab (LODINE XL equiv)	-	3	ANALGESICS - ANTI-INFLAMMATORY
etodolac tab	-	1	ANALGESICS - ANTI-INFLAMMATORY
ETOPOSIDE CAP	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
etravirine tab (INTELENCE equiv)	-	2	ANTIVIRALS
EUCRISA OINT	-	NC	DERMATOLOGICALS
EULEXIN CAP	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EURAX CREAM	-	NC	DERMATOLOGICALS
EVAMIST SPRAY	-	NC	ESTROGENS
EVEKEO ODT	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
everolimus tab (AFINITOR equiv) (QL= 1 tab/day)	PA-QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
everolimus tab (ZORTRESS equiv)	PA	2	MISCELLANEOUS THERAPEUTIC CLASSES
everolimus tab for oral susp (AFINITOR DISPERZ equiv)	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EVISTA TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
EVIVO LIQUID	-	NC	ANTIDIARRHEALS
EVOCLIN FOAM	-	NC	DERMATOLOGICALS
EVOTAZ TAB	-	2	ANTIVIRALS
EVOXAC CAP	-	NC	MOUTH/THROAT/DENTAL AGENTS
EVRYSDI SOLN (QL= 6.67ml/day)	PA-QL-SP	4	NEUROMUSCULAR AGENTS
EVRYSDI TAB (QL= 1 tab/day)	PA-QL-SP	4	NEUROMUSCULAR AGENTS
EVZIO INJ	-	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
EVZIO INJ	-	NC	ANTIDOTES
EXELDERM CREAM, SULCONAZOLE CREAM	-	NC	DERMATOLOGICALS
EXELDERM SOLN, SULCONAZOLE SOLN	-	NC	DERMATOLOGICALS
EXELON PATCH	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
exemestane tab (AROMASIN equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EXENATIDE INJ (BYETTA INJ EQUIV)	-	NC	ANTIDIABETICS
EXFORGE TAB	-	NC	ANTIHYPERTENSIVES
EXKIVITY CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EXTAVIA INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
EXXUA TAB/EXXUA TITRATION PACK	-	NC	ANTIDEPRESSANTS
EYSUVIS OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
EZALLOR SPRINKLE CAP (Prior Authorization required for members age 7 years and older)	PA	3	ANTIHYPERLIPIDEMICS
ezetimibe tab (ZETIA equiv)	-	1	ANTIHYPERLIPIDEMICS
EZETIMIBE/ATORVASTATIN TAB	-	NC	ANTIHYPERLIPIDEMICS

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ezetimibe/simvastatin tab (VYTORIN equiv) (QL= 1 tab/day (10-80mg is Not Covered))	QL	3	ANTIHYPERLIPIDEMICS
ezetimibe/simvastatin tab 10-80mg (VYTORIN equiv) (ezetimibe/simvastatin 10-80 mg is not covered)	-	NC	ANTIHYPERLIPIDEMICS
FABHALTA CAP	-	NC	HEMATOLOGICAL AGENTS - MISC.
FABIOR AEROSOL FOAM	-	NC	DERMATOLOGICALS
FACTIVE TAB	-	NC	FLUOROQUINOLONES
FALESSA TAB	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
famciclovir tab (FAMVIR equiv)	-	2	ANTIVIRALS
famotidine susp (PEPCID equiv)	-	2	ULCER DRUGS
famotidine tab (PEPCID equiv) (Rx Only)	-	1	ULCER DRUGS
FANAPT TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FANAPT TITRATION PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FANAPT TITRATION PACK 1MG/2MG/6MG/8MG	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FARESTON TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FARXIGA TAB	-	NC	ANTIDIABETICS
FASENRA PEN INJ (QL= 1 inj/56 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
febuxostat tab (ULORIC equiv) (Step Therapy requires trial of allopurinol)	ST	1	GOUT AGENTS
FEIBA INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
felbamate susp (FELBATOL equiv)	-	2	ANTICONVULSANTS
felbamate tab (FELBATOL equiv)	-	2	ANTICONVULSANTS
FELBATOL SUSP	-	NC	ANTICONVULSANTS
FELBATOL TAB	-	NC	ANTICONVULSANTS
FELDENE CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
felodipine ER tab (PLENDIL equiv)	-	1	CALCIUM CHANNEL BLOCKERS
FEM PH GEL	-	3	VAGINAL PRODUCTS
FEMALE CONDOMS	OTC	EXC	MEDICAL DEVICES AND SUPPLIES
FEMARA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FEMCON FE CHEW TAB	-	NC	CONTRACEPTIVES
FEMHRT TAB	-	NC	ESTROGENS
FEMLYV TAB	-	$0	CONTRACEPTIVES
FEMRING (3 copays per Rx)	-	3	VAGINAL PRODUCTS
fenofibrate cap 43mg, 130mg (ANTARA equiv)	-	NC	ANTIHYPERLIPIDEMICS
fenofibrate cap 67mg, 134mg, 200mg (LOFIBRA equiv)	-	1	ANTIHYPERLIPIDEMICS
FENOFIBRATE CAP, LIPOFEN CAP	-	NC	ANTIHYPERLIPIDEMICS
FENOFIBRATE CAP, LIPOFEN CAP 50MG, 150MG	-	NC	ANTIHYPERLIPIDEMICS
fenofibrate tab 40mg, 120mg (FENOGLIDE equiv)	-	NC	ANTIHYPERLIPIDEMICS
fenofibrate tab 48mg, 54mg, 145mg, 160mg (TRICOR equiv)	-	1	ANTIHYPERLIPIDEMICS
fenofibric acid DR cap (TRILIPIX equiv)	-	1	ANTIHYPERLIPIDEMICS
FENOFIBRIC TAB	-	3	ANTIHYPERLIPIDEMICS
FENOFIBRIC TAB, FIBRICOR TAB	-	3	ANTIHYPERLIPIDEMICS
fenoprofen calcium cap (NALFON equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
FENOPROFEN CAP, NAFLON CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
FENOPROFEN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
FENOPRON CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY

Drug Name	Special Code	Tier	Category
FENTANYL BUCCAL TAB	-	NC	ANALGESICS - OPIOID
FENTANYL CITRATE LOLLIPOP	-	NC	ANALGESICS - OPIOID
fentanyl citrate lollipop (ACTIQ equiv)	-	NC	ANALGESICS - OPIOID
fentanyl patch (DURAGESIC equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	2	ANALGESICS - OPIOID
fentanyl patch 37.5mcg, 62.5mcg, 87.5mcg (FENTANYL equiv)	-	NC	ANALGESICS - OPIOID
FENTORA TAB	-	NC	ANALGESICS - OPIOID
FEONYX TAB	-	NC	HEMATOPOIETIC AGENTS
FERIVA 21/7 TAB	-	NC	HEMATOPOIETIC AGENTS
FEROTRINSIC CAP	-	1	HEMATOPOIETIC AGENTS
ferrex 150 forte cap	-	1	HEMATOPOIETIC AGENTS
ferric citrate tab	-	3	GASTROINTESTINAL AGENTS - MISC.
FERRIPROX SOLN	PA-SP	4	ANTIDOTES
FERRO-PLEX TAB	-	NC	HEMATOPOIETIC AGENTS
ferrous sulfate elixir	OTC	NC	HEMATOPOIETIC AGENTS
FERROUS SULFATE LIQUID	OTC	NC	HEMATOPOIETIC AGENTS
ferrous sulfate soln	OTC	NC	HEMATOPOIETIC AGENTS
FESILTY INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
fesoterodine fumarate ER tab (TOVIAZ equiv)	-	1	URINARY ANTISPASMODICS
FETZIMA CAP	-	NC	ANTIDEPRESSANTS
FETZIMA TITRATION PACK	-	NC	ANTIDEPRESSANTS
FIASP FLEXTOUCH INJ	-	NC	ANTIDIABETICS
FIASP INJ	-	NC	ANTIDIABETICS
FIASP PENFILL INJ, FIASP PUMP CARTRIDGE	-	NC	ANTIDIABETICS
FIBRIK CAP	-	NC	MULTIVITAMINS
fidaxomicin tab (DIFICID equiv) (QL= 20 tabs/fill; Step therapy requires trial of vancomycin cap or Firvanq solution)	QL-ST	2	MACROLIDES
FILKRI INJ	-	NC	HEMATOPOIETIC AGENTS
FILSPARI TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
FILSUVEZ GEL	-	NC	DERMATOLOGICALS
FINACEA FOAM	-	2	DERMATOLOGICALS
FINACEA GEL	-	NC	DERMATOLOGICALS
finasteride tab (PROSCAR equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
finasteride tab (PROPECIA equiv)	-	EXC	DERMATOLOGICALS
fingolimod hcl cap 0.5mg (GILENYA equiv) (QL= 1 cap/day)	QL-SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
FINTEPLA SOLN (QL= 12ml/day)	PA-QL-SP	4	ANTICONVULSANTS
FIORICET CAP	-	NC	ANALGESICS - NONNARCOTIC
FIORICET/CODEINE CAP	-	NC	ANALGESICS - OPIOID
FIORINAL CAP	-	NC	ANALGESICS - NONNARCOTIC
FIORINAL/CODEINE CAP	-	NC	ANALGESICS - OPIOID
FIRAZYR INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
FIRDAPSE TAB	PA-SP	4	ANTIMYASTHENIC/CHOLINERGIC AGENTS
FIRST METRONIDAZOLE SUSP	-	3	ANTI-INFECTIVE AGENTS - MISC.
FIRST MOUTHWASH BLM	-	3	MOUTH/THROAT/DENTAL AGENTS
FIRST OMEPRAZOLE SUSP	-	NC	ULCER DRUGS

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Drug Name	Special Code	Tier	Category
FIRST PANTOPRAZOLE SUSP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
FIRVANQ SOLN 25MG/ML	-	NC	ANTI-INFECTIVE AGENTS - MISC.
FIRVANQ SOLN 50MG/ML	-	NC	ANTI-INFECTIVE AGENTS - MISC.
FLAGYL TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
FLAREX OPHTH SUSP	-	3	OPHTHALMIC AGENTS
flavoxate tab (URISPAS equiv)	-	NC	URINARY ANTISPASMODICS
flecainide tab (TAMBOCOR equiv)	-	1	ANTIARRHYTHMICS
FLEQSUVY SUSP	-	NC	MUSCULOSKELETAL THERAPY AGENTS
FLOLIPID SUSP (Prior Authorization required for members age 9 years and older)	PA	3	ANTIHYPERLIPIDEMICS
FLOMAX CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
FLONASE SENSIMIST NASAL SPRAY	OTC	EXC	NASAL AGENTS - SYSTEMIC AND TOPICAL
FLO-PRED SUSP	-	NC	CORTICOSTEROIDS
FLORIVA CHEW TAB	-	NC	MULTIVITAMINS
FLORIVA PLUS DROPS	-	NC	MULTIVITAMINS
FLOVENT DISKUS INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLOVENT HFA INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUAD INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
FLUBLOK INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
FLUCELVAX INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
fluconazole susp (DIFLUCAN equiv)	-	1	ANTIFUNGALS
fluconazole tab (DIFLUCAN equiv)	-	1	ANTIFUNGALS
flucytosine cap (ANCOBON equiv)	-	2	ANTIFUNGALS
fludrocortisone tab (FLORINEF equiv)	-	1	CORTICOSTEROIDS
FLULAVAL INJ, FLUARIX INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
FLUMADINE TAB	-	NC	ANTIVIRALS
FLUMIST NASAL (QL= 1 dose/28 days)	QL-VAC	$0	VACCINES
flunisolide nasal soln	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
fluocinolone acetonide cream	-	1	DERMATOLOGICALS
fluocinolone acetonide oil (DERMA-SMOOTH/FS equiv)	-	2	DERMATOLOGICALS
fluocinolone acetonide oint	-	1	DERMATOLOGICALS
fluocinolone acetonide soln	-	1	DERMATOLOGICALS
fluocinolone otic oil (DERMOTIC equiv)	-	2	OTIC AGENTS
fluocinonide cream 0.05% (LIDEX equiv)	-	1	DERMATOLOGICALS
fluocinonide cream 0.1% (VANOS CREAM equiv)	-	1	DERMATOLOGICALS
fluocinonide emollient cream	-	1	DERMATOLOGICALS
fluocinonide gel	-	1	DERMATOLOGICALS
fluocinonide oint	-	1	DERMATOLOGICALS
fluocinonide soln	-	1	DERMATOLOGICALS
FLUOPAR KIT	-	NC	DERMATOLOGICALS
FLUORABON SOLN ($0 copay for members age 5 years and younger; All other members covered at preferred brand copay)	-	$0	MINERALS & ELECTROLYTES
FLUORAC CREAM	-	NC	DERMATOLOGICALS

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Drug Name	Special Code	Tier	Category
FLUORIDE CHW 0.25MG ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0	MINERALS & ELECTROLYTES
FLUORIDEX SENSITIVITY PASTE	-	1	MOUTH/THROAT/DENTAL AGENTS
fluorometholone ophth soln (FML LIQUIFILM equiv)	-	1	OPHTHALMIC AGENTS
fluorouracil cream (EFUDEX CREAM equiv)	-	1	DERMATOLOGICALS
FLUOROURACIL CREAM 0.5%	-	3	DERMATOLOGICALS
FLUOROURACIL SOLN	-	2	DERMATOLOGICALS
fluorouracil soln (FLUOROURACIL equiv)	-	2	DERMATOLOGICALS
FLUOVIX PAK	-	NC	DERMATOLOGICALS
fluoxetine cap (PROZAC equiv)	-	1	ANTIDEPRESSANTS
FLUOXETINE CAP (PMDD)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
fluoxetine soln (PROZAC equiv)	-	1	ANTIDEPRESSANTS
fluoxetine tab (PROZAC equiv)	-	1	ANTIDEPRESSANTS
FLUOXETINE TAB	-	NC	ANTIDEPRESSANTS
fluoxetine weekly cap (PROZAC equiv)	-	NC	ANTIDEPRESSANTS
fluphenazine decanoate inj	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
fluphenazine tab (PROLIXIN equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
FLURANDRENOL LOTION	-	NC	DERMATOLOGICALS
flurandrenolide cream (CORDRAN equiv)	-	NC	DERMATOLOGICALS
flurandrenolide oint (CORDRAN equiv)	-	NC	DERMATOLOGICALS
FLURAZEPAM CAP	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
FLURBIPROFEN OPHTH SOLN	-	2	OPHTHALMIC AGENTS
FLURBIPROFEN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
flurbiprofen tab (ANSAID equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
FLUTAMIDE CAP	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
flutamide cap (EULEXIN equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FLUTICASONE DISKUS INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100MCG/AC	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200MCG/AC	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE HFA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE LOTION	-	NC	DERMATOLOGICALS
fluticasone nasal spray (FLONASE equiv) (QL= 2 bottles/fill)	QL	1	NASAL AGENTS - SYSTEMIC AND TOPICAL
fluticasone propionate cream (CUTIVATE equiv)	-	1	DERMATOLOGICALS
FLUTICASONE PROPIONATE DISKUS INHALER 100MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE PROPIONATE DISKUS INHALER 250MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE PROPIONATE DISKUS INHALER 50MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS

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fluticasone propionate hfa inhal aero (FLUTICASONE equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
fluticasone propionate lotion (CUTIVATE equiv)	-	NC	DERMATOLOGICALS
fluticasone propionate oint (CUTIVATE equiv)	-	1	DERMATOLOGICALS
fluticasone/salmeterol inhaler, wixela inhaler (ADVAIR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 113-14 MCG/ACT	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 115-21 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 230-21 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 232-14 MCG/ACT	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 45-21 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-SALMETEROL INHALER 55-14 MCG/ACT	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-VILANTEROL INHALER 100-25 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FLUTICASONE-VILANTEROL INHALER 200-25 MCG/ACT	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
fluvastatin cap (LESCOL equiv)	-	2	ANTIHYPERLIPIDEMICS
fluvastatin ER tab (LESCOL XL equiv)	-	3	ANTIHYPERLIPIDEMICS
fluvoxamine ER cap (LUVOX CR equiv)	-	2	ANTIDEPRESSANTS
fluvoxamine tab (LUVOX equiv)	-	1	ANTIDEPRESSANTS
FLUZONE HIGH DOSE PF INJ (QL= 1 inj/28 days)	QL-VAC	$0	VACCINES
FML FORTE OPHTH SUSP	-	3	OPHTHALMIC AGENTS
FML LIQUIFLIM OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
FOCALIN TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
FOCALIN XR CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
FOLBEE PLUS CZ TAB	-	1	MULTIVITAMINS
folbee tab (FOLGARD RX equiv)	-	NC	HEMATOPOIETIC AGENTS
FOLGARD RX TAB	-	NC	HEMATOPOIETIC AGENTS
folic acid tab 1mg ($0 copay for female members only; All other members covered at generic copay)	-	$0	HEMATOPOIETIC AGENTS
folic acid tab 400mcg (Covered for female members only)	OTC	$0	HEMATOPOIETIC AGENTS
folic acid tab 800mcg (Covered for female members only)	OTC	$0	HEMATOPOIETIC AGENTS
FOLIKA-V TAB	-	NC	MULTIVITAMINS
FOLITE TAB	-	NC	HEMATOPOIETIC AGENTS
FOLOTYN INJ	-	NC/3P	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FOLTANX TAB	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
FOLVITE-FE TAB	-	NC	HEMATOPOIETIC AGENTS
fondaparinux inj (ARIXTRA equiv)	-	2	ANTICOAGULANTS
formoterol fumarate neb soln (PERFOROMIST equiv)	-	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS

Drug Name	Special Code	Tier	Category
FORTAMET TAB	-	NC	ANTIDIABETICS
FORTEO INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
FORTESTA GEL 2%	-	NC	ANDROGENS-ANABOLIC
FORZINITY INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
FOSAMAX TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
FOSAMAX+D TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
fosamprenavir tab (LEXIVA equiv)	-	2	ANTIVIRALS
fosfomycin tromethamine powder pack (MONUROL equiv)	-	3	ANTI-INFECTIVE AGENTS - MISC.
fosinopril tab (MONOPRIL equiv)	-	1	ANTIHYPERTENSIVES
fosinopril/hydrochlorothiazide tab (MONOPRIL HCT equiv)	-	1	ANTIHYPERTENSIVES
FOSRENOL CHEW TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
FOSRENOL POWDER PACK	-	2	GASTROINTESTINAL AGENTS - MISC.
FOTIVDA CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FOUNDAYO TAB	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
FRAGMIN INJ	-	3	ANTICOAGULANTS
FRAICHE 5000 SENSITIVE GEL	-	NC	MOUTH/THROAT/DENTAL AGENTS
FREESTYLE FREEDOM LITE METER	OTC	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE INSULINX TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
FREESTYLE LIBRE 2 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE 2 SENSOR (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE 2-PLUS SENSOR (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE 3 READER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE 3 SENSOR (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE 3-PLUS SENSOR (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LIBRE SENSOR (14-DAY) (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2	MEDICAL DEVICES AND SUPPLIES

Drug Name	Special Code	Tier	Category
FREESTYLE LITE METER	OTC	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE LITE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
FREESTYLE PRECISION NEO METER	OTC	$0	MEDICAL DEVICES AND SUPPLIES
FREESTYLE PRECISION NEO TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
FREESTYLE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
FROVA TAB	-	NC	MIGRAINE PRODUCTS
frovatriptan tab (FROVA equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	2	MIGRAINE PRODUCTS
FRUZAQLA CAP 1MG (QL= 84 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FRUZAQLA CAP 5MG (QL= 21 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FULPHILA INJ	SP	4	HEMATOPOIETIC AGENTS
FULVICIN P/G TAB	-	NC	ANTIFUNGALS
FULVICIN P/G TAB, GRISEOFULVIN ULTRA MICRO TAB	-	NC	ANTIFUNGALS
FUROSCIX KIT	-	NC	DIURETICS
FUROSCIX READYFLOW INJ	-	NC	DIURETICS
FUROSEMIDE SOLN	-	1	DIURETICS
furosemide soln (LASIX equiv)	-	1	DIURETICS
furosemide tab (LASIX equiv)	-	1	DIURETICS
FYCOMPA TAB	-	NC	ANTICONVULSANTS
FYCOMPA SUSP	-	NC	ANTICONVULSANTS
FYLNETRA INJ	-	NC	HEMATOPOIETIC AGENTS
gabapentin (once-daily) tab (GRALISE equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
gabapentin cap (NEURONTIN equiv) (QL= 9 caps/day)	QL	1	ANTICONVULSANTS
gabapentin cap 200mg (RELGAABI equiv)	-	NC	ANTICONVULSANTS
gabapentin soln (NEURONTIN equiv) (QL= 72 mls/day)	QL	2	ANTICONVULSANTS
gabapentin tab 600mg (NEURONTIN equiv) (QL= 6 tabs/day)	QL	1	ANTICONVULSANTS
gabapentin tab 800mg (NEURONTIN equiv) (QL= 4.5 tabs/day)	QL	1	ANTICONVULSANTS
GABAPENTIN/NAPROXEN CREAM COMPOUND KIT	-	NC	DERMATOLOGICALS
GABARONE TAB	-	NC	ANTICONVULSANTS
GABITRIL TAB	-	NC	ANTICONVULSANTS
GALAFOLD CAP (QL= 14 caps/28 days)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
galantamine ER cap (RAZADYNE ER equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GALANTAMINE SOLN	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
galantamine tab (RAZADYNE equiv)	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GALZIN CAP	-	NC	MINERALS & ELECTROLYTES
GARDASIL 9 INJ	VAC	$0	VACCINES
GASTROCROM CONC	-	NC	GASTROINTESTINAL AGENTS - MISC.
gatifloxacin ophth soln (ZYMAXID equiv)	-	3	OPHTHALMIC AGENTS
GATTEX KIT	-	NC	GASTROINTESTINAL AGENTS - MISC.
GAVILYTE-C SOLN (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0	LAXATIVES
GAVRETO CAP (QL= 4 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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Drug Name	Special Code	Tier	Category
GEAMETDRAY GEL	-	NC	DERMATOLOGICALS
gefitinib tab (IRESSA equiv) (QL= 1 tab/day)	PA-QL	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GELCLAIR GEL	-	NC	MOUTH/THROAT/DENTAL AGENTS
gemfibrozil tab (LOPID equiv)	-	1	ANTIHYPERLIPIDEMICS
GEMTESA TAB	-	NC	URINARY ANTISPASMODICS
GEN7T LOTION	-	NC	DERMATOLOGICALS
GEN7T PAD 3.5%	-	NC	DERMATOLOGICALS
GEN7T PLUS LOTION	-	NC	DERMATOLOGICALS
GEN7T PLUS PAD	-	NC	DERMATOLOGICALS
GENGLYCOS INJ	-	NC/3P	ENDOCRINE AND METABOLIC AGENTS - MISC.
GENOTROPIN INJ	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
GENOTROPIN INJ 5MG	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
GENTAK OPHTH OINT	-	1	OPHTHALMIC AGENTS
gentamicin ophth soln (GARAMYCIN equiv)	-	1	OPHTHALMIC AGENTS
gentamicin sulfate cream	-	1	DERMATOLOGICALS
gentamicin sulfate oint	-	1	DERMATOLOGICALS
GENVOYA TAB	-	2	ANTIVIRALS
GEODON CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
GIALAX KIT	-	NC	LAXATIVES
gianvi tab, ocella tab (YASMIN, YAZ equiv)	-	$0	CONTRACEPTIVES
GILENYA CAP 0.25MG (QL= 1 cap/day)	QL-SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GILENYA CAP 0.5MG	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GILOTRIF TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GIMOTI NASAL SPRAY	-	NC	GASTROINTESTINAL AGENTS - MISC.
glatiramer inj (COPAXONE equiv)	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
GLEOSTINE CAP	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
glimepiride tab (AMARYL equiv)	-	1	ANTIDIABETICS
GLIMEPIRIDE TAB	-	NC	ANTIDIABETICS
glipizide ER tab (GLUCOTROL XL equiv)	-	1	ANTIDIABETICS
glipizide tab (GLUCOTROL equiv)	-	1	ANTIDIABETICS
GLIPIZIDE TAB	-	NC	ANTIDIABETICS
glipizide/metformin tab (METAGLIP equiv)	-	1	ANTIDIABETICS
GLOPERBA SOLN (Prior Authorization required for members age 9 years and older)	PA	3	GOUT AGENTS
glucagon (rdna) for inj kit (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
GLUCAGON DIAGNOSTIC INJ	-	NC	DIAGNOSTIC PRODUCTS
GLUCAGON EMR INJ (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
GLUCAGON INJ KIT	-	NC	ANTIDIABETICS
GLUCOPHAGE TAB	-	NC	ANTIDIABETICS
GLUCOPHAGE XR TAB	-	NC	ANTIDIABETICS
GLUCOTROL TAB	-	NC	ANTIDIABETICS

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GLUCOTROL XL TAB	-	NC	ANTIDIABETICS
GLUMETZA TAB 1000MG	-	NC	ANTIDIABETICS
GLUMETZA TAB 500MG	-	NC	ANTIDIABETICS
GLYBURID MCR TAB	-	1	ANTIDIABETICS
glyburide tab (MICRONASE equiv)	-	1	ANTIDIABETICS
glyburide/metformin tab (GLUCOVANCE equiv)	-	1	ANTIDIABETICS
GLYCATE TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
GLYCATE TAB, GLYCOPYRROLATE TAB	-	NC	ULCER DRUGS
glycerol phenylbutyrate liquid (RAVICTI equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
glycopyrrolate oral soln (CUVPOSA equiv)	-	3	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
glycopyrrolate tab (ROBINUL equiv)	-	2	ULCER DRUGS
GLYGEST PAK	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
GLYNASE TAB	-	NC	ANTIDIABETICS
GLYXAMBI TAB	-	NC	ANTIDIABETICS
GOCOVRI CAP	-	NC	ANTIPARKINSON AGENTS
GOLYTELY SOLN (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0	LAXATIVES
GOMEKLI CAP (QL= 84 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GOMEKLI CAP 1MG (QL= 168 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GOMEKLI TAB FOR ORAL SUSP (QL= 168 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GONITRO POWDER	-	NC	ANTIANGINAL AGENTS
GRALISE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
granisetron tab (KYTRIL equiv) (QL= 14 tabs/fill)	QL	1	ANTIEMETICS
GRANIX INJ	-	NC	HEMATOPOIETIC AGENTS
GRASTEK SL TAB	-	NC	BIOLOGICALS MISC
griseofulvin micro tab (GRIFULVIN V equiv)	-	2	ANTIFUNGALS
griseofulvin susp (GRIFULVIN equiv)	-	2	ANTIFUNGALS
griseofulvin tab (GRIS-PEG equiv)	-	2	ANTIFUNGALS
GRIS-PEG TAB	-	NC	ANTIFUNGALS
GUAIFENESEN SYRUP	-	NC	COUGH/COLD/ALLERGY
guaifenesin tab (ALLFEN JR equiv)	-	NC	COUGH/COLD/ALLERGY
guaifenesin/codeine syrup (TUSSI-ORGANIDIN-S equiv)	OTC	NC	COUGH/COLD/ALLERGY
guaifenesin-DM oral liquid (ROBITUSSIN equiv)	-	NC	COUGH/COLD/ALLERGY
guanfacine ER tab (INTUNIV equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
guanfacine IR tab (TENEX equiv)	-	1	ANTIHYPERTENSIVES
GVOKE INJ (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
GVOKE INJ KIT (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
GVOKE PFS INJ (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
GWYN LO PATCH	-	NC	CONTRACEPTIVES

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Drug Name	Special Code	Tier	Category
HADLIMA INJ (adalimumab-bwwd)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HADLIMA INJ 40MG/0.8ML (adalimumab-bwwd)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HADLIMA PUSH INJ (adalimumab-bwwd)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HADLIMA PUSH INJ 40MG/0.8ML (adalimumab-bwwd)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HAEGARDA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
halcinonide cream (HALOG equiv)	-	NC	DERMATOLOGICALS
HALCINONIDE SOLN	-	NC	DERMATOLOGICALS
halcinonide soln (HALOG equiv)	-	NC	DERMATOLOGICALS
HALCION TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
HALOBETASOL AER	-	NC	DERMATOLOGICALS
HALOBETASOL AERO	-	NC	DERMATOLOGICALS
halobetasol propionate cream (ULTRAVATE equiv)	-	2	DERMATOLOGICALS
halobetasol propionate oint (ULTRAVATE equiv)	-	2	DERMATOLOGICALS
HALOG CREAM	-	NC	DERMATOLOGICALS
HALOG OINT	-	NC	DERMATOLOGICALS
HALOG SOLN	-	NC	DERMATOLOGICALS
halonate pac kit (ULTRAVATE KIT equiv)	-	NC	DERMATOLOGICALS
haloperidol decanoate inj (HALDOL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
haloperidol lactate conc (HALDOL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
haloperidol tab (HALDOL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
HARLIKU TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
HARVONI PELLET PAK	-	NC	ANTIVIRALS
HARVONI TAB	-	NC	ANTIVIRALS
HAVRIX INJ, VAQTA INJ	VAC	$0	VACCINES
HC BUTYRATE CREAM	-	NC	DERMATOLOGICALS
HC BUTYRATE SOLN	-	NC	DERMATOLOGICALS
HC PRAMOXINE CREAM 1-2.5%	-	2	DERMATOLOGICALS
HC/IODOQUIN CREAM	-	NC	DERMATOLOGICALS
HC/PRAMOXINE CREAM 1-2.35%	-	NC	DERMATOLOGICALS
HC-LIDOCAINE CREAM	-	NC	DERMATOLOGICALS
HECTOROL CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
HELIDAC PACK	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEI CS
HEMADY TAB	-	NC	CORTICOSTEROIDS
HEMANGEOL ORAL SOLN	-	NC	BETA BLOCKERS
HEMANGEOL SOLN	-	NC	BETA BLOCKERS
HEMLIBRA INJ	PA-SP	4	HEMATOLOGICAL AGENTS - MISC.
HEMOFIL M, KOATE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
heparin inj	PA	1	ANTICOAGULANTS
HEPCLUDEX INJ	-	NC	ANTIVIRALS
HEPLISAV-B INJ	VAC	$0	VACCINES
HERNEXEOS TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HETLIOZ CAP	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS

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HETLIOZ SUSP	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
HIPREX TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
HIXDEFRIMA SOLN	-	NC	DERMATOLOGICALS
HIZENTRA INJ	PA-SP	4	PASSIVE IMMUNIZING AGENTS
HOMATROPINE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
HORIZANT TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
HULIO INJ (adalimumab-fkjp)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HULIO KIT (adalimumab-fkjp)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMALOG INJ	-	1	ANTIDIABETICS
HUMALOG JR KWIKPEN INJ	-	1	ANTIDIABETICS
HUMALOG KWIKPEN INJ	-	1	ANTIDIABETICS
HUMALOG MIX INJ	-	1	ANTIDIABETICS
HUMALOG MIX KWIKPEN INJ	-	1	ANTIDIABETICS
HUMALOG PEN INJ	-	1	ANTIDIABETICS
HUMALOG TEMPO PEN	-	NC	ANTIDIABETICS
HUMATIN CAP	-	NC	AMINOGLYCOSIDES
HUMATROPE INJ, ZOMACTON INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
HUMIRA INJ 10MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ 20MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ 40MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ 80MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ PEDIATRIC UC STARTER PACK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMIRA PEN INJ 40MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HUMULIN MIX INJ	OTC	1	ANTIDIABETICS
HUMULIN MIX PEN INJ	OTC	1	ANTIDIABETICS
HUMULIN N INJ	OTC	1	ANTIDIABETICS
HUMULIN N PEN INJ	OTC	1	ANTIDIABETICS
HUMULIN R INJ	OTC	1	ANTIDIABETICS
HUMULIN R INJ U-500	-	2	ANTIDIABETICS
HUMULIN R U-500 KWIKPEN INJ	-	2	ANTIDIABETICS
HURRISEAL MIS SNAP	-	NC	MEDICAL DEVICES AND SUPPLIES
HYCAMTIN CAP	SP	4	ANTINEOPLASTICS
HYCLODEX SOLN	-	NC	DERMATOLOGICALS
HYCODAN SYRUP	-	NC	COUGH/COLD/ALLERGY
HYCOFENIX SOLN	-	NC	COUGH/COLD/ALLERGY
HYD POL/CPM SUSP (QL= 120ml/fill; 2 fills/30 days)	QL	3	COUGH/COLD/ALLERGY
hydralazine tab (APRESOLINE equiv)	-	1	ANTIHYPERTENSIVES
HYDREA CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
hydrochlorothiazide cap (MICROZIDE equiv)	-	1	DIURETICS
hydrochlorothiazide tab (HYDRODIURIL equiv)	-	1	DIURETICS
HYDROCODONE BITARTRATE ER CAP (QL= 2 caps/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2	ANALGESICS - OPIOID

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HYDROCODONE BITARTRATE ER TAB (QL= 1 tab/day; Step Therapy require step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2	ANALGESICS - OPIOID
hydrocodone bitartrate er tab (HYSINGLA equiv) (QL= 1 tab/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2	ANALGESICS - OPIOID
hydrocodone/acetaminophen soln (HYCET, LORTAB equiv)	-	1	ANALGESICS - OPIOID
hydrocodone/acetaminophen soln 10-325 mg/15ml (HYCET equiv)	-	3	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab (LORTAB equiv)	-	1	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab 10mg-300mg (XODOL equiv)	-	NC	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab 2.5-325mg (NORCO equiv)	-	3	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab 5mg-300mg (XODOL equiv)	-	NC	ANALGESICS - OPIOID
hydrocodone/acetaminophen tab 7.5mg-300mg (XODOL equiv)	-	NC	ANALGESICS - OPIOID
hydrocodone/chlorpheniramine CR susp (TUSSIONEX equiv) (QL= 120ml/fill; 2 fills/30 days)	QL	3	COUGH/COLD/ALLERGY
hydrocodone/homatropine syrup (HYCODAN equiv)	-	1	COUGH/COLD/ALLERGY
hydrocodone/ibuprofen tab (VICOPROFEN equiv)	-	3	ANALGESICS - OPIOID
HYDROCODONE/IBUPROFEN TAB 10-200MG	-	3	ANALGESICS - OPIOID
HYDROCORTISONE ACETATE CREAM, MICORT-HC CREAM	-	NC	DERMATOLOGICALS
HYDROCORTISONE ACETATE/PRAMOXINE CREAM	-	1	ANORECTAL AND RELATED PRODUCTS
hydrocortisone butyrate cream (LOCOID equiv)	-	NC	DERMATOLOGICALS
HYDROCORTISONE BUTYRATE LIPO CREAM	-	NC	DERMATOLOGICALS
hydrocortisone butyrate lipocream (LOCOID equiv)	-	NC	DERMATOLOGICALS
HYDROCORTISONE BUTYRATE OINT	-	NC	DERMATOLOGICALS
hydrocortisone butyrate oint (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone butyrate soln (LOCOID equiv)	-	NC	DERMATOLOGICALS
HYDROCORTISONE CREAM	-	1	ANORECTAL AND RELATED PRODUCTS
hydrocortisone cream (PROCTOCORT equiv)	-	1	DERMATOLOGICALS
hydrocortisone enema (CORTENEMA equiv)	-	2	ANORECTAL AGENTS
hydrocortisone lotion (HYTONE equiv)	-	1	DERMATOLOGICALS
hydrocortisone lotion (LOCOID equiv)	-	NC	DERMATOLOGICALS
hydrocortisone lotion 2% (ALA SCALP equiv)	-	NC	DERMATOLOGICALS
HYDROCORTISONE LOTION 2.5%	-	1	DERMATOLOGICALS
hydrocortisone oint	-	1	DERMATOLOGICALS
HYDROCORTISONE PAK	-	NC	DERMATOLOGICALS
hydrocortisone pramoxine cream (PRAMOSONE equiv)	-	2	DERMATOLOGICALS
hydrocortisone succinate inj 100mg (SOLU-CORTEF equiv) (QL= 2 vials/fill)	QL	2	CORTICOSTEROIDS
hydrocortisone supp (ANUSOL HC equiv)	-	2	ANORECTAL AGENTS
hydrocortisone tab (CORTEF equiv)	-	1	CORTICOSTEROIDS
hydrocortisone valerate cream (WESTCORT equiv)	-	NC	DERMATOLOGICALS
hydrocortisone valerate oint (WESTCORT equiv)	-	NC	DERMATOLOGICALS
HYDROCORTISONE/PRAMOXINE SUPP	-	NC	ANORECTAL AND RELATED PRODUCTS
hydromorphone ER tab (EXALGO TAB equiv)	-	NC	ANALGESICS - OPIOID
HYDROMORPHONE SUPP	-	NC	ANALGESICS - OPIOID
hydromorphone tab (DILAUDID equiv)	-	1	ANALGESICS - OPIOID
HYDROXYCHLOROQUINE TAB	-	1	ANTIMALARIALS
hydroxychloroquine tab (PLAQUENIL equiv)	-	1	ANTIMALARIALS
HYDROXYM GEL	-	NC	DERMATOLOGICALS
HYDROXYPROGESTERONE CAPROATE INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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hydroxyurea cap (HYDREA equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
hydroxyzine pamoate cap (VISTARIL equiv)	-	1	ANTIANXIETY AGENTS
hydroxyzine syrup (ATARAX equiv)	-	1	ANTIANXIETY AGENTS
hydroxyzine tab (ATARAX equiv)	-	1	ANTIANXIETY AGENTS
HYFTOR GEL (QL= 10 grams/30 days)	PA-QL-SP	4	DERMATOLOGICALS
HYLAMEND GEL FIRST AID	-	NC	ANTISEPTICS & DISINFECTANTS
HYLINATE LOTION	-	NC	DERMATOLOGICALS
HYMPAVZI INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
HYOPHEN TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
HYOSCYAMINE ELXIR	-	1	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
HYOSCYAMINE INJ	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
hyoscyamine sulfate CR tab (LEVBID equiv)	-	1	ULCER DRUGS
HYOSCYAMINE SULFATE ER TAB	-	1	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
hyoscyamine sulfate ODT (ANASPAZ equiv)	-	1	ULCER DRUGS
HYOSCYAMINE SULFATE SL TAB	-	1	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
hyoscyamine sulfate SL tab (LEVSIN equiv)	-	1	ULCER DRUGS
HYOSCYAMINE TAB	-	1	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
hyoscyamine tab (LEVSIN equiv)	-	1	ULCER DRUGS
HYPER-SAL NEB SOLN 7%	-	3	COUGH/COLD/ALLERGY
HYQVIA INJ	PA-SP	4	PASSIVE IMMUNIZING AGENTS
HYRIMOZ INJ (adalimumab-adaz)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HYRIMOZ PFS INJ (adalimumab-adaz)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
HYRNUO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HYSINGLA ER TAB	-	NC	ANALGESICS - OPIOID
HYZAAR TAB	-	NC	ANTIHYPERTENSIVES
ibandronate tab 150mg (BONIVA equiv) (QL= 1 tab/30 days)	QL	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
IBRANCE CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IBRANCE TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IBSRELA TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
IBTROZI CAP (QL= 3 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IBU 600-EZS KIT	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen susp (Rx ONLY) (ADVIL, MOTRIN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen tab	-	1	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen tab (RX only)	-	1	ANALGESICS - ANTI-INFLAMMATORY

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IBUPROFEN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ibuprofen-famotidine tab (DUEXIS equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ICAR-C PLUS TAB 100-250-0.025-1 MG	-	3	HEMATOPOIETIC AGENTS
icatibant inj (FIRAZYR equiv)	PA-SP	4	HEMATOLOGICAL AGENTS - MISC.
ICLUSIG TAB (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
icosapent ethyl cap (VASCEPA equiv) (QL= 4 caps/day)	QL	2	ANTIHYPERLIPIDEMICS
ICOTYDE TAB	-	NC	DERMATOLOGICALS
IDACIO INJ (adalimumab-aacf)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
IDELVION INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
IDHIFA TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IDVYNSO TAB	-	NC	ANTIVIRALS
IHEEZO GEL	-	NC	OPHTHALMIC AGENTS
ILEVRO OPHTH SUSP	-	2	OPHTHALMIC AGENTS
imatinib tab (GLEEVEC equiv)	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA CAP 140MG (QL= 3 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA CAP 70MG (QL= 1 cap/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA SUSP (QL= 6ml/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA TAB 140MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA TAB 280MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMBRUVICA TAB 420MG (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMCIVREE INJ	-	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
imipramine pamoate cap (TOFRANIL PM equiv)	-	3	ANTIDEPRESSANTS
imipramine tab (TOFRANIL equiv)	-	1	ANTIDEPRESSANTS
imiquimod cream (ALDARA equiv)	-	1	DERMATOLOGICALS
IMIQUIMOD CREAM 3.75%	-	NC	DERMATOLOGICALS
imiquimod cream 3.75% (IMIQUIMOD equiv)	-	NC	DERMATOLOGICALS
IMITREX 4MG INJ, ZEMBRACE INJ	-	NC	MIGRAINE PRODUCTS
IMITREX INJ	-	NC	MIGRAINE PRODUCTS
IMITREX TAB	-	NC	MIGRAINE PRODUCTS
IMKELDI SOLUTION	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMOVAX INJ	VAC	$0	VACCINES
IMPAVIDO CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
IMPEKLO LOTION	-	NC	DERMATOLOGICALS
IMPOYZ CREAM	-	NC	DERMATOLOGICALS
IMULDOSA SYRINGE	-	NC	DERMATOLOGICALS
IMURAN TAB	-	NC	ASSORTED CLASSES
IMVEXXY SUPP	-	NC	VAGINAL PRODUCTS
INBRIJA INH POWDER (QL= 10 caps/day)	PA-QL-SP	4	ANTIPARKINSON AND RELATED THERAPY AGENTS

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INCRELEX INJ	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
INCRUSE ELLIPTA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
indapamide tab (LOZOL equiv)	-	1	DIURETICS
INDERAL LA CAP	-	NC	BETA BLOCKERS
INDERAL XL CAP, INNOPRAN XL CAP	-	NC	BETA BLOCKERS
INDOCIN SUPP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
INDOCIN SUSP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
indomethacin cap (INDOCIN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
INDOMETHACIN CAP, TIVORBEX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
indomethacin CR cap (INDOCIN SR equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
indomethacin suppository (INDOCIN equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
indomethacin susp (INDOCIN equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
INFLATHERM PAK	-	NC	ANALGESICS - ANTI-INFLAMMATORY
INGREZZA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
INGREZZA PACK 40-80MG	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
INGREZZA SPRINKLE CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
INLURIYO TAB (QL= 2 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INLYTA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INLYTA TAB 1MG (QL= 8 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INPEFA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
INPEN INSULIN INJECTION DEVICE	-	NC	MEDICAL DEVICES AND SUPPLIES
INQOVI TAB (QL= 5 tabs/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INREBIC CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INSPRA TAB	-	NC	ANTIHYPERTENSIVES
INSULIN ASPART FLEXPEN INJ (NOVOLOG equiv)	-	NC	ANTIDIABETICS
INSULIN ASPART INJ (NOVOLOG equiv)	-	NC	ANTIDIABETICS
INSULIN ASPART MIX FLEXPEN INJ (NOVOLOG equiv)	-	NC	ANTIDIABETICS
INSULIN ASPART MIX INJ (NOVOLOG equiv)	-	NC	ANTIDIABETICS
INSULIN ASPART PENFILL INJ	-	NC	ANTIDIABETICS
INSULIN GLARGINE INJ	-	NC	ANTIDIABETICS
INSULIN GLARGINE SOLN PEN-INJ	-	2	ANTIDIABETICS
INSULIN GLARGINE-YFGN (SINGLE PEN)	-	NC	ANTIDIABETICS
INSULIN GLARGINE-YFGN PEN (CIVICA) 100UNIT/ML	-	NC	ANTIDIABETICS
INSULIN LISPRO INJ (HUMALOG equiv)	-	1	ANTIDIABETICS
INSULIN LISPRO JR KWIKPEN INJ	-	1	ANTIDIABETICS
INSULIN LISPRO KWIKPEN INJ	-	1	ANTIDIABETICS
INSULIN LISPRO PROTAMINE PEN INJ (HUMALOG equiv)	-	1	ANTIDIABETICS
INSULIN SYRINGE	OTC	NC	MEDICAL DEVICES AND SUPPLIES
INTELENCE TAB	-	2	ANTIVIRALS
INTELENCE TAB	-	NC	ANTIVIRALS

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INTENSE COUGH LIQUID	-	NC	COUGH/COLD/ALLERGY
INTERMEZZO SL TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
INTRAROSA SUPP	-	NC	VAGINAL PRODUCTS
INTUNIV TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
INVEGA INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
INVEGA TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
INVELTYS OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
INVOKAMET TAB	-	NC	ANTIDIABETICS
INVOKAMET XR TAB	-	NC	ANTIDIABETICS
INVOKANA TAB	-	NC	ANTIDIABETICS
INZIRQO SUSP (Prior Authorization required for members age 9 years and older)	PA	3	DIURETICS
IODOFLEX PAD	-	NC	ANTISEPTICS & DISINFECTANTS
IODOQUINOL/HC ALOE GEL	-	NC	DERMATOLOGICALS
iodoquinol/hydrocortisone cream 1% (VYTONE equiv)	-	NC	DERMATOLOGICALS
IODOQUINOL-HYDROCORTISONE CREAM	-	NC	DERMATOLOGICALS
iohexol inj (OMNIPAQUE equiv)	-	NC	DIAGNOSTIC PRODUCTS
IOPIDINE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
IOPIDINE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
IPOL INJ	VAC	$0	VACCINES
ipratropium bromide hfa inhaler aerosol (ATROVENT equiv)	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ipratropium nasal spray (ATROVENT equiv)	-	1	NASAL AGENTS - SYSTEMIC AND TOPICAL
ipratropium neb soln (ATROVENT equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
IQIRVO TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
irbesartan tab (AVAPRO equiv)	-	1	ANTIHYPERTENSIVES
irbesartan/hydrochlorothiazide tab (AVALIDE equiv)	-	1	ANTIHYPERTENSIVES
ISENTRESS (HD) TAB	-	2	ANTIVIRALS
ISENTRESS CHEW TAB	-	2	ANTIVIRALS
ISENTRESS POWDER PACK	-	2	ANTIVIRALS
isibloom tab, enskyce tab, apri tab (DESOGEN equiv)	-	$0	CONTRACEPTIVES
isoniazid syrup (ISONIAZID equiv)	-	3	ANTIMYCOBACTERIAL AGENTS
isoniazid tab	-	1	ANTIMYCOBACTERIAL AGENTS
ISOPTO CARPINE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ISORDIL TITRADOSE TAB	-	NC	ANTIANGINAL AGENTS
ISORDIL TITRADOSE TAB 40MG	-	NC	ANTIANGINAL AGENTS
isosorbide dinitrate tab (ISORDIL equiv)	-	1	ANTIANGINAL AGENTS
isosorbide dinitrate tab 40mg (ISORDIL equiv)	-	3	ANTIANGINAL AGENTS
isosorbide dinitrate/hydralazine hcl tab (BIDIL equiv)	-	NC	CARDIOVASCULAR AGENTS - MISC.
isosorbide mononitrate ER tab (IMDUR equiv)	-	1	ANTIANGINAL AGENTS
isosorbide mononitrate tab (MONOKET equiv)	-	1	ANTIANGINAL AGENTS
isotretinoin cap 25mg (ABSORICA equiv)	-	NC	DERMATOLOGICALS
isotretinoin cap 35mg (ABSORICA equiv)	-	NC	DERMATOLOGICALS
isradipine cap (DYNACIRC equiv)	-	1	CALCIUM CHANNEL BLOCKERS
ISTALOL OPHTH SOLN	-	2	OPHTHALMIC AGENTS
ISTALOL OPHTH SOLN 0.5%	-	NC	OPHTHALMIC AGENTS

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ISTURISA TAB (QL= 12 tabs/day)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
ITOVEBI TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
itraconazole cap (SPORANOX equiv)	-	2	ANTIFUNGALS
itraconazole soln (SPORANOX equiv)	PA	3	ANTIFUNGALS
ivabradine hcl tab (CORLANOR equiv)	PA	1	CARDIOVASCULAR AGENTS - MISC.
IVERMECTIN TAB	-	NC	ANTHELMINTICS
IVERMECTIN CREAM	-	NC	DERMATOLOGICALS
ivermectin cream (SOOLANTRA equiv)	-	NC	DERMATOLOGICALS
IVERMECTIN LOTION	-	NC	DERMATOLOGICALS
ivermectin tab (STROMECTOL equiv)	-	1	ANTHELMINTICS
IWILFIN TAB (QL= 8 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IXCHIQ INJ	VAC	EXC	VACCINES
IXIARO INJ	VAC	EXC	VACCINES
IXINITY INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
IYUZEH OPHTH DROPS	-	NC	OPHTHALMIC AGENTS
JADENU SPRINKLE	-	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
JAKAFI TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JAKAFI XR TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JANUMET TAB	-	NC	ANTIDIABETICS
JANUMET XR TAB (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
JANUVIA TAB	-	NC	ANTIDIABETICS
JARDIANCE TAB	-	NC	ANTIDIABETICS
JASCAYD TAB	-	NC	RESPIRATORY AGENTS - MISC.
JAVADIN SOLN	-	NC	ANTIHYPERTENSIVES
JAYPIRCA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JENLIVA CAP	-	NC	MULTIVITAMINS
JENTADUETO TAB (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
JENTADUETO XR TAB (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
JIDEYTRO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
jinteli tab (FEMHRT equiv)	-	1	ESTROGENS
JIVI INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
JOENJA TAB	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
JOURNAVX TAB	-	NC	ANALGESICS - NONNARCOTIC
JUBLIA SOLN	-	NC	DERMATOLOGICALS
JULUCA TAB	-	2	ANTIVIRALS
JUXTAPID CAP	-	NC	ANTIHYPERLIPIDEMICS
JYLAMVO SOLN, XATMEP SOLN (Prior Authorization required for members age 9 years and older)	PA	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JYNNEOS INJ	VAC	$0	VACCINES
K CITRATE SOLN CITR ACD	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
K/NA CITRATE SOL CITR ACD	-	1	GENITOURINARY AGENTS - MISCELLANEOUS

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Drug Name	Special Code	Tier	Category
KALETRA SOLN	-	NC	ANTIVIRALS
KALETRA TAB	-	NC	ANTIVIRALS
KALYDECO PAK (QL= 2 packets/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
KALYDECO TAB (QL= 2 tabs/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
KAPSPARGO CAP	-	NC	BETA BLOCKERS
KAPVAY TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/NOREXIANTS
KARBINAL ER SUSP	-	NC	ANTIHISTAMINES
KATERZIA SUSP (Prior Authorization required for members age 9 years and older)	PA	3	CALCIUM CHANNEL BLOCKERS
KEFLEX CAP	-	NC	CEPHALOSPORINS
KEFLEX CAP 750MG	-	NC	CEPHALOSPORINS
kelnor tab (DEMULEN equiv)	-	$0	CONTRACEPTIVES
KENALOG INJ	-	NC	CORTICOSTEROIDS
KENALOG INJ, TRIAMCINOLONE ACE INJ	-	3	CORTICOSTEROIDS
KEPPRA SOLN	-	NC	ANTICONVULSANTS
KEPPRA TAB	-	NC	ANTICONVULSANTS
KEPPRA XR TAB	-	NC	ANTICONVULSANTS
KERAFOAM	-	NC	DERMATOLOGICALS
KERALAC CREAM	-	NC	DERMATOLOGICALS
KERAMATRIX	-	NC	DERMATOLOGICALS
KERASTAT CREAM	-	NC	DERMATOLOGICALS
KERASTAT GEL	-	NC	DERMATOLOGICALS
KERENDIA TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
KERLONE TAB	-	NC	BETA BLOCKERS
KERYDIN SOLN	-	NC	DERMATOLOGICALS
KESIMPTA INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
KETAMINE HCL TROCHES	-	NC	GENERAL ANESTHETICS
ketoconazole cream (NIZORAL CREAM equiv)	-	1	DERMATOLOGICALS
ketoconazole shampoo (NIZORAL equiv)	-	1	DERMATOLOGICALS
ketoconazole tab (NIZORAL equiv)	-	1	ANTIFUNGALS
KETO-DIASTIX TEST STRIP	OTC	1	DIAGNOSTIC PRODUCTS
KETOPROFEN CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
KETOPROFEN ER CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
KETOROLAC INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ketorolac inj (TORADOL equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ketorolac inj 15mg/ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1	ANALGESICS - ANTI-INFLAMMATORY
ketorolac inj 30mg/ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1	ANALGESICS - ANTI-INFLAMMATORY
ketorolac inj 60mg/2ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1	ANALGESICS - ANTI-INFLAMMATORY
ketorolac ophth soln (ACULAR (LS) equiv)	-	1	OPHTHALMIC AGENTS
ketorolac tab (TORADOL equiv) (QL= 20 tabs/5 days)	QL	1	ANALGESICS - ANTI-INFLAMMATORY
KETOROLAC TROMETHAMINE OPHTH SOLN	-	1	OPHTHALMIC AGENTS
KETOSTIX	OTC	1	DIAGNOSTIC PRODUCTS
KEVEYIS TAB	-	NC	DIURETICS
KEVZARA INJ (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
KHINDIVI SOLN	-	NC	CORTICOSTEROIDS
KINERET INJ (QL= 1 inj/day)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY

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KINRIX INJ, QUADRACEL DTAP-IPV INJ	VAC	$0	TOXOIDS
KINRIX PREF SYRINGE, QUADRACEL PREF SYRINGE	VAC	$0	TOXOIDS
KIRSTY INJ	-	NC	ANTIDIABETICS
KISQALI PAK (QL= 91 tabs/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KISQALI TAB (QL= 63 tabs/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KITABIS PAK NEB SOLN	-	NC	AMINOGLYCOSIDES
KLARITY-B DROPS	-	NC	OPHTHALMIC AGENTS
KLARITY-L DROPS	-	NC	OPHTHALMIC AGENTS
KLARON LOTION	-	NC	DERMATOLOGICALS
KLISYRI OINT	-	NC	DERMATOLOGICALS
KLONOPIN TAB	-	NC	ANTICONVULSANTS
KLOXXADO NASAL SPRAY	-	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
KOGENATE FS INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
KOMBIGLYZE XR TAB	-	NC	ANTIDIABETICS
KOMZIFTI CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KONVOMEP SUSP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
KORLYM TAB	-	NC	ANTIDIABETICS
KOSELUGO CAP (QL= 4 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KOSELUGO CAP 10MG (QL= 8 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KOSELUGO SPRINKLE CAP (QL= 12 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KOSELUGO SPRINKLE CAP 5MG (QL= 20 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
K-PHOS NEUTRAL TAB 155-852-130MG	-	NC	MINERALS & ELECTROLYTES
K-PHOS TAB	-	NC	MINERALS & ELECTROLYTES
KRAZATI TAB (QL= 6 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KRESLADI INJ	-	NC/3P	HEMATOPOIETIC AGENTS
KRINTAFEL TAB	-	2	ANTIMALARIALS
K-TAB	-	1	MINERALS & ELECTROLYTES
KUVAN POWDER PACK	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
KUVAN TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
KYBELLA INJ	-	NC	DERMATOLOGICALS
KYGEVVI POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
KYNAMRO INJ	-	NC	ANTIHYPERLIPIDEMICS
KYNMOBI FILM	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
KYNMOBI TITRATION KIT	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
KYTRIL TAB	-	NC	ANTIEMETICS

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KYZATREX CAP	-	NC	ANDROGENS-ANABOLIC
KYZATREX CAP, JATENZO CAP, TLANDO CAP	-	NC	ANDROGENS-ANABOLIC
L.E.T. GEL	-	NC	DERMATOLOGICALS
labetalol hcl tab 400mg	-	NC	BETA BLOCKERS
labetalol tab (NORMODYNE equiv)	-	1	BETA BLOCKERS
lacosamide oral solution (VIMPAT equiv)	-	1	ANTICONVULSANTS
lacosamide tab (VIMPAT equiv)	-	1	ANTICONVULSANTS
LACRISERT OPHTH INSERT	-	NC	OPHTHALMIC AGENTS
lactulose oral crystal packet	-	NC	LAXATIVES
lactulose soln	-	1	LAXATIVES
LAGEVRIO CAP (EUA) (QL= 40 caps/fill)	QL	$0	ANTIVIRALS
LAGEVRIO CAP 200MG (QL= 40 caps/fill)	QL	2	ANTIVIRALS
LAMICTAL CHEW TAB	-	NC	ANTICONVULSANTS
LAMICTAL ODT KIT, LAMICTAL XR KIT	-	3	ANTICONVULSANTS
LAMICTAL STARTER KIT	-	NC	ANTICONVULSANTS
LAMICTAL TAB	-	NC	ANTICONVULSANTS
LAMICTAL XR TAB	-	NC	ANTICONVULSANTS
LAMISIL TAB	-	NC	ANTIFUNGALS
lamivudine soln (EPIVIR equiv)	-	2	ANTIVIRALS
lamivudine tab (EPIVIR equiv)	-	2	ANTIVIRALS
lamivudine tab 100mg (EPIVIR HBV equiv)	-	2	ANTIVIRALS
lamivudine/zidovudine tab (COMBIVIR equiv)	-	2	ANTIVIRALS
lamotrigine chew tab (LAMICTAL equiv)	-	1	ANTICONVULSANTS
lamotrigine ER tab (LAMICTAL XR equiv)	-	3	ANTICONVULSANTS
lamotrigine ODT (LAMICTAL equiv)	-	NC	ANTICONVULSANTS
lamotrigine ODT kit (LAMICTAL equiv)	-	NC	ANTICONVULSANTS
lamotrigine starter kit (LAMICTAL STARTER KIT equiv)	-	3	ANTICONVULSANTS
lamotrigine tab (LAMICTAL equiv)	-	1	ANTICONVULSANTS
LAMPIT TAB	PA	2	ANTI-INFECTIVE AGENTS - MISC.
LANCET KIT	OTC	$0	MEDICAL DEVICES AND SUPPLIES
LANCETS	OTC	$0	MEDICAL DEVICES AND SUPPLIES
LANGLARA INJ	-	NC	ANTIDIABETICS
LANOXIN INJ	-	NC	CARDIOTONICS
LANOXIN TAB	-	NC	CARDIOTONICS
LANOXIN TAB 62.5MCG	-	NC	CARDIOTONICS
lansoprazole cap (PREVACID equiv) (Rx Only)	-	1	ULCER DRUGS
lansoprazole odt (PREVACID SOLUTAB equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
LANSOPRAZOLE SUSP	-	NC	ULCER DRUGS
lansoprazole/amoxicillin/clarithromycin kit (PREVPAC equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
LANSOPRAZOLE/AMOXICILLIN/CLARITHTHROMYCIN KIT	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
lanthanum carbonate chew tab (FOSRENOL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
LANTUS INJ	-	1	ANTIDIABETICS
LANTUS SOLOSTAR INJ	-	1	ANTIDIABETICS

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lapatinib ditosylate tab (TYKERB equiv)	PA-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LASIX ONYU INJ 80MG/2.67ML	-	NC	DIURETICS
LASIX ONYU REUSABLE UNIT	-	NC	MEDICAL DEVICES AND SUPPLIES
LASIX TAB	-	NC	DIURETICS
latanoprost ophth soln (XALATAN equiv) (QL= 2.5ml/30 days)	QL	1	OPHTHALMIC AGENTS
LATISSE SOLN	-	EXC	DERMATOLOGICALS
LATUDA TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
layolis FE tab, wymzya FE tab (FEMCON FE equiv)	-	$0	CONTRACEPTIVES
LAZANDA NASAL SPRAY	-	NC	ANALGESICS - OPIOID
LAZCLUZE TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEDIPASVIR/SOFOSBUVIR TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTIVIRALS
leflunomide tab (ARAVA equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
lenalidomide cap (REVLIMID equiv) (QL= 1 cap/day; Restricted to Oncology or Hematology Specialist)	QL-RS-SP	1	MISCELLANEOUS THERAPEUTIC CLASSES
LENVIMA CAP (QL= 3 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEQEMBI IQLIK INJ 250MG/1.25ML	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LEQEMBI IQLK INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LEQSELVI TAB	-	NC	DERMATOLOGICALS
LEROCHOL SOLN	-	NC	ANTIHYPERLIPIDEMICS
LESCOL XL TAB	-	NC	ANTIHYPERLIPIDEMICS
letrozole tab (FEMARA equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEUCOVORIN CA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
leucovorin tab	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEUKERAN TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEVALBUTEROL INHALER, XOPENEX HFA INHALER (QL= 2 inhalers/fill, 2 fills/30 days)	QL	3	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
levalbuterol neb soln (XOPENEX equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
LEVAQUIN TAB	-	NC	FLUOROQUINOLONES
LEVBID ER TAB 0.375MG	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
LEVEMIR FLEXTOUCH INJ	-	2	ANTIDIABETICS
LEVEMIR INJ	-	2	ANTIDIABETICS
levetiracetam ER tab (KEPPRA XR equiv)	-	1	ANTICONVULSANTS
levetiracetam soln (KEPPRA equiv)	-	1	ANTICONVULSANTS
levetiracetam tab (KEPPRA equiv)	-	1	ANTICONVULSANTS
LEVETIRACETAM TAB FOR ORAL SUSP, SPRITAM TAB FOR ORAL SUSP	-	NC	ANTICONVULSANTS
LEVITRA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
LEVOBUNOLOL OPHTH SOLN	-	1	OPHTHALMIC AGENTS
levobunolol ophth soln (BETAGAN equiv)	-	1	OPHTHALMIC AGENTS

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levocarnitine soln (CARNITOR equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
levocarnitine tab (CARNITOR equiv)	-	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
levocetirizine soln (XYZAL equiv)	-	EXC	ANTIHISTAMINES
levocetirizine tab (XYZAL equiv)	-	EXC	ANTIHISTAMINES
levofloxacin ophth soln (QUIXIN equiv)	-	1	OPHTHALMIC AGENTS
LEVOFLOXACIN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
LEVOFLOXACIN OPHTH SOLN 0.5%	-	1	OPHTHALMIC AGENTS
levofloxacin soln (LEVAQUIN equiv)	-	1	FLUOROQUINOLONES
levofloxacin tab (LEVAQUIN equiv)	-	1	FLUOROQUINOLONES
levonorgestrel tab (PLAN B equiv)	OTC	EXC	CONTRACEPTIVES
levonorgestrel-ethinyl estradiol-fe tab (BALCOLTRA equiv)	-	$0	CONTRACEPTIVES
levorphanol tab (LEVORPHANOL equiv)	-	NC	ANALGESICS - OPIOID
LEVOTHYROXINE INJ	-	NC	THYROID AGENTS
LEVOTHYROXINE INJ 100MCG/ML	-	NC	THYROID AGENTS
levothyroxine tab (SYNTHROID equiv)	-	1	THYROID AGENTS
LEVSIN SL TAB 0.125MG	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
LEVSIN TAB 0.125MG	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
LEXAPRO TAB	-	NC	ANTIDEPRESSANTS
LEXIVA TAB	-	NC	ANTIVIRALS
LEXTOL PAK	-	NC	DERMATOLOGICALS
l-glutamine powder packet (ENDARI equiv) (QL= 6 packets/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
LIBERVANT FILM	-	NC	ANTICONVULSANTS
LIBRAX CAP	-	NC	ULCER DRUGS
LICART PATCH	-	NC	DERMATOLOGICALS
LIDO/MENTHOL SPRAY	-	NC	DERMATOLOGICALS
LIDO/RAC/TET GEL	-	NC	DERMATOLOGICALS
LIDOCAINE CREAM	-	NC	DERMATOLOGICALS
lidocaine gel (GLYDO equiv)	-	1	DERMATOLOGICALS
LIDOCAINE GEL	-	NC	DERMATOLOGICALS
LIDOCAINE JELLY 2%	-	NC	DERMATOLOGICALS
lidocaine oint (QL= 107gm/30 days)	QL	1	DERMATOLOGICALS
lidocaine oint/transparent dressing kit	-	NC	DERMATOLOGICALS
LIDOCAINE ORAL SOLN	-	NC	MOUTH/THROAT/DENTAL AGENTS
lidocaine patch (LIDODERM equiv) (QL= 3 patches/day)	QL	3	DERMATOLOGICALS
lidocaine patch 3.5% (GEN7T equiv)	OTC	NC	DERMATOLOGICALS
lidocaine patch 5% (LIDODERM equiv) (QL= 3 patches/day)	QL	2	DERMATOLOGICALS
lidocaine soln (XYLOCAINE equiv)	-	1	DERMATOLOGICALS
LIDOCAINE SUPP	-	NC	ANORECTAL AND RELATED PRODUCTS
lidocaine viscous soln (XYLOCAINE HCL (MOUTH-THROAT) equiv)	-	1	MOUTH/THROAT/DENTAL AGENTS
LIDOCAINE/HC CREAM	-	2	ANORECTAL AND RELATED PRODUCTS
LIDOCAINE/HYDROCORTISONE RECTAL CREAM KIT	-	NC	ANORECTAL AGENTS
lidocaine/prilocaine cream (EMLA equiv)	-	1	DERMATOLOGICALS
LIDOCIN GEL	-	NC	DERMATOLOGICALS

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LIDODERM PATCH	-	NC	DERMATOLOGICALS
LIDO-EP-TETR SOLN	-	NC	DERMATOLOGICALS
LIDOLOG KIT	-	NC	CORTICOSTEROIDS
LIDOSTREAM KIT	-	NC	DERMATOLOGICALS
LIDOTIN PAK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LIDOTREX GEL	-	NC	DERMATOLOGICALS
LIDOVEX CREAM	-	NC	DERMATOLOGICALS
LIFYORLI CAP DOSE PACK	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LIKMEZ SUSP (Prior Authorization required for members age 7 years and older)	PA	3	ANTI-INFECTIVE AGENTS - MISC.
LINZESS CAP (QL= 1 cap/day)	PA-QL	3	GASTROINTESTINAL AGENTS - MISC.
liothyronine tab (CYTOMEL equiv)	-	1	THYROID AGENTS
LIPFENDRA TAB	-	NC	ANTIHYPERLIPIDEMICS
LIPITOR TAB	-	NC	ANTIHYPERLIPIDEMICS
LIQREV SUSP	-	NC	CARDIOVASCULAR AGENTS - MISC.
liraglutide (weight mngmt) soln pen-inj (SAXENDA equiv)	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
liraglutide soln pen-injector (VICTOZA equiv) (QL= 9ml/30 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2	ANTIDIABETICS
lisdexamfetamine chew tab (VYVANSE equiv) (Members age 7 years and older require Prior Authorization)	PA	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
lisdexamfetamine dimesylate cap (VYVANSE equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
lisinopril tab (PRINIVIL/ZESTRIL equiv)	-	1	ANTIHYPERTENSIVES
lisinopril/hydrochlorothiazide tab (ZESTORETIC equiv)	-	1	ANTIHYPERTENSIVES
LISRAYA TAB	-	NC	DERMATOLOGICALS
LITFULO CAP	-	NC	DERMATOLOGICALS
lithium carbonate cap (ESKALITH ER equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium carbonate ER tab (LITHOBID equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium carbonate tab	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lithium oral solution (LITHIUM equiv) (Prior Authorization required for members age 7 years and older)	PA	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LITHOBID TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LITHOSTAT TAB	-	3	GENITOURINARY AGENTS - MISCELLANEOUS
LIVALO TAB	-	NC	ANTIHYPERLIPIDEMICS
LIVDELZI CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
LIVMARLI SOLN (QL= 90ml/30 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
LIVMARLI SOLN 19MG/ML (QL= 60ml/30 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
LIVMARLI TAB (QL= 2 tabs/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
LIVMARLI TAB 30MG (QL= 1 tab/day)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
LIVTENCITY TAB (QL= 4 tabs/day)	PA-QL-SP	4	ANTIVIRALS
L-METHYLFOLATE TAB	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
LO LOESTRIN TAB	-	$0	CONTRACEPTIVES
LOARGYS INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
LOCOID CREAM	-	NC	DERMATOLOGICALS

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LOCOID LIPOCREAM	-	NC	DERMATOLOGICALS
LOCOID OINT	-	NC	DERMATOLOGICALS
LOCOID SOLN	-	NC	DERMATOLOGICALS
LODOCO TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
LODOSYN TAB	-	NC	ANTIPARKINSON AGENTS
lofexidine hcl tab (LUCEMYRA equiv) (QL= 96 tabs/7 days)	PA-QL	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LOKELMA PAK (QL= 1 packet/day)	PA-QL	2	MISCELLANEOUS THERAPEUTIC CLASSES
LOKELMA PAK 10GM	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
LOKELMA PAK 5GM	PA	2	MISCELLANEOUS THERAPEUTIC CLASSES
LOKELMA PAK 5GM	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
LOMOTIL TAB	-	NC	ANTIDIARRHEALS
lomustine cap (GLEOSTINE equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LONSURF TAB	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
loperamide cap (IMODIUM equiv)	-	NC	ANTIDIARRHEALS
loperamide hcl soln (LOPERAMIDE equiv)	OTC	NC	ANTIDIARRHEAL/PROBIOTIC AGENTS
LOPID TAB	-	NC	ANTIHYPERLIPIDEMICS
lopinavir/ritonavir soln (KALETRA equiv)	-	2	ANTIVIRALS
lopinavir/ritonavir tab (KALETRA equiv)	-	2	ANTIVIRALS
LOPRESSOR SOLN (QL= 45ml/day; Prior Authorization required for members age 7 years and older)	PA-QL	3	BETA BLOCKERS
LOPRESSOR TAB	-	NC	BETA BLOCKERS
LOPROX SHAMPOO	-	NC	DERMATOLOGICALS
loratadine cap (CLARITIN equiv)	OTC	EXC	ANTIHISTAMINES
lorazepam conc (ATIVAN equiv)	-	1	ANTIANXIETY AGENTS
lorazepam tab (ATIVAN equiv)	-	1	ANTIANXIETY AGENTS
LORBRENA TAB 100MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LORBRENA TAB 25MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LOREEV XR CAP	-	NC	ANTIANXIETY AGENTS
LORTAB	-	NC	ANALGESICS - OPIOID
LORTAB ELIXIR	-	3	ANALGESICS - OPIOID
LORVATUS PHARMAPAK KIT	-	NC	MUSCULOSKELETAL THERAPY AGENTS
losartan tab (COZAAR equiv)	-	1	ANTIHYPERTENSIVES
losartan/hydrochlorothiazide tab (HYZAAR equiv)	-	1	ANTIHYPERTENSIVES
LOTEMAX GEL	-	NC	OPHTHALMIC AGENTS
LOTEMAX OPHTH OINT	-	2	OPHTHALMIC AGENTS
LOTEMAX SM GEL 0.38%	-	NC	OPHTHALMIC AGENTS
LOTENSIN HCT TAB	-	NC	ANTIHYPERTENSIVES
LOTENSIN TAB	-	NC	ANTIHYPERTENSIVES
loteprednol etabonate ophth gel (LOTEMAX equiv)	-	2	OPHTHALMIC AGENTS
loteprednol etabonate-tobramycin ophth susp (ZYLET equiv)	-	NC	OPHTHALMIC AGENTS
loteprednol ophth susp (LOTEMAX, ALREX equiv)	-	2	OPHTHALMIC AGENTS
LOTREL CAP	-	NC	ANTIHYPERTENSIVES
LOTRIMIN AF CREAM	-	NC	DERMATOLOGICALS
LOTRISONE CREAM	-	NC	DERMATOLOGICALS

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LOTRONEX TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
lovastatin tab (MEVACOR equiv)	-	$0	ANTIHYPERLIPIDEMICS
LOVAZA CAP	-	NC	ANTIHYPERLIPIDEMICS
LOVENOX INJ	-	NC	ANTICOAGULANTS
loxapine cap (LOXITANE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
lubiprostone cap (AMITIZA equiv) (QL= 2 caps/day)	QL	1	GASTROINTESTINAL AGENTS - MISC.
LUCEMYRA TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LULICONAZOLE CREAM, LUZU CREAM	-	NC	DERMATOLOGICALS
LUMAKRAS TAB (QL= 8 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUMAKRAS TAB 240MG (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUMAKRAS TAB 320MG (QL= 3 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUMIGAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
LUMRYZ PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LUMRYZ STARTER PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LUNESTA TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
LUPKYNIS CAP (QL= 6 caps/day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
LUPRON DEPOT INJ 11.25MG	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ 3.75MG	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ PED	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
LUPRON DEPOT PED INJ	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
lurasidone hcl tab (LATUDA equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
LUVIRA CAP	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
LUXIQ FOAM	-	NC	DERMATOLOGICALS
LYBALVI TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LYNAVOY TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
LYNKUET CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
LYNPARZA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYRICA CAP	-	NC	ANTICONVULSANTS
LYRICA CAP 225MG	-	NC	ANTICONVULSANTS
LYRICA CAP 300MG	-	NC	ANTICONVULSANTS
LYRICA SOLN	-	NC	ANTICONVULSANTS
LYSODREN TAB	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYSTEDA TAB	-	NC	HEMOSTATICS

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LYTGOBI THERAPY PACK (QL= 5 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LYUMJEV INJ	-	1	ANTIDIABETICS
LYUMJEV KWIKPEN INJ	-	1	ANTIDIABETICS
LYUMJEV TEMPO PEN	-	NC	ANTIDIABETICS
LYVISPAH GRANULE PACKET (Prior Authorization required for members age 9 years and older)	PA	3	MUSCULOSKELETAL THERAPY AGENTS
macitentan tab (OPSUMIT equiv) (QL= 1 tab/day)	PA-QL-SP	1	CARDIOVASCULAR AGENTS - MISC.
MACRILEN PACK	-	NC	DIAGNOSTIC PRODUCTS
MACROBID CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
MACRODANTIN CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
MAFENIDE ACETATE SOLN PACK	-	NC	DERMATOLOGICALS
MALARONE TAB	-	NC	ANTIMALARIALS
malathion lotion (OVIDE equiv) (QL= 2 bottles/fill)	QL	3	DERMATOLOGICALS
MALE CONDOMS	OTC	EXC	MEDICAL DEVICES AND SUPPLIES
maraviroc tab (SELZENTRY equiv)	-	2	ANTIVIRALS
MARINOL CAP	-	NC	ANTIEMETICS
MARPLAN TAB	-	NC	ANTIDEPRESSANTS
MATERVIA CAP	-	NC	MULTIVITAMINS
MATRONEX TAB 27-1 MG	-	NC	MULTIVITAMINS
MATULANE CAP	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MAVENCLAD THERAPY PAK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MAVIK TAB	-	NC	ANTIHYPERTENSIVES
MAVYRET PAK (QL= 5 packs/day)	PA-QL-SP	4	ANTIVIRALS
MAVYRET TAB (QL= 3 tabs/day)	QL-SP	4	ANTIVIRALS
MAXALT MLT TAB	-	NC	MIGRAINE PRODUCTS
MAXALT TAB	-	NC	MIGRAINE PRODUCTS
MAXIDEX OPHTH SOLN	-	2	OPHTHALMIC AGENTS
MAXITROL OPHTH OINT	-	NC	OPHTHALMIC AGENTS
MAXITROL OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
MAXZIDE TAB	-	NC	DIURETICS
MAYZENT TAB	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MAYZENT TAB STARTER PACK	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MECLIZINE CHEW TAB	-	NC	ANTIEMETICS
meclizine tab (ANTIVERT equiv)	-	NC	ANTIEMETICS
MECLOFENAMATE CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
MEDI-PATCH W/LIDOCAINE PATCH	-	NC	DERMATOLOGICALS
MEDROL DOSE PACK	-	NC	CORTICOSTEROIDS
MEDROL TAB	-	NC	CORTICOSTEROIDS
medroxyprogesterone inj (DEPO-PROVERA equiv) (QL= 1 inj/90 days)	QL	$0	CONTRACEPTIVES
medroxyprogesterone tab (PROVERA equiv)	-	1	PROGESTINS
mefenamic acid cap (PONSTEL equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
mefloquine tab (LARIAM equiv)	-	2	ANTIMALARIALS
megestrol ES susp (MEGACE ES equiv)	-	3	PROGESTINS

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megestrol susp (MEGACE equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEGESTROL SUSP	-	3	PROGESTINS
megestrol tab (MEGACE equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKINIST SOLN	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKINIST TAB 0.5MG (QL= 3 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKINIST TAB 2MG (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MEKTOVI TAB (QL= 6 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
meloxicam cap (VIVLODEX equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
MELOXICAM COMFORT KIT	-	NC	ANALGESICS - ANTI-INFLAMMATORY
MELOXICAM SUSP, ZYBIC SUSP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
meloxicam tab (MOBIC equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
memantine ER cap (NAMENDA XR equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
memantine hcl-donepezil hcl 24hr er cap (NAMZARIC equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
memantine soln (NAMENDA equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
memantine tab (NAMENDA equiv)	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MEMANTINE TITRATION PAK	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MENACTRA INJ	VAC	$0	VACCINES
MENEST TAB	-	3	ESTROGENS
MENOSTAR PATCH	-	NC	ESTROGENS
MENQUADFI INJ	VAC	$0	VACCINES
MENTAX CREAM	-	3	DERMATOLOGICALS
MENTHOREAL10 THERAPY PACK	-	NC	DERMATOLOGICALS
MENVEO INJ	VAC	$0	VACCINES
meperidine tab (DEMEROL equiv)	-	NC	ANALGESICS - OPIOID
MEPHYTON TAB	-	NC	VITAMINS
meprobamate tab (MILTOWN equiv)	-	NC	ANTIANXIETY AGENTS
MEPRON SUSP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
mercaptopurine susp (PURIXAN equiv) (Prior Authorization required for members age 9 years and older)	PA	3	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
mercaptopurine tab (PURINETHOL equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MERILOG INJ	-	NC	ANTIDIABETICS
MERILOG SOLOSTAR INJ	-	NC	ANTIDIABETICS
MESALAMINE DR CAP	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine DR cap (DELZICOL equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine DR tab (LIALDA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine enema (ROWASA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine ER cap (APRISO equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine ER cap (PENTASA CR equiv)	-	NC	GASTROINTESTINAL AGENTS - MISC.

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mesalamine supp (CANASA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
mesalamine tab (ASACOL equiv)	-	3	GASTROINTESTINAL AGENTS - MISC.
mesna tab (MESNEX equiv)	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MESNEX TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MESTINON SYRUP	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
MESTINON TAB	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
MESTINON TIMESPAN TAB	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
METANX CAP	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
metaxalone tab (SKELAXIN equiv)	-	3	MUSCULOSKELETAL THERAPY AGENTS
METAXALONE TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
METDRAY GEL	-	NC	DERMATOLOGICALS
metformin ER osmotic tab (FORTAMET equiv)	-	NC	ANTIDIABETICS
metformin ER osmotic tab (GLUMETZA equiv)	-	NC	ANTIDIABETICS
metformin ER tab (GLUCOPHAGE XR equiv)	-	1	ANTIDIABETICS
metformin hcl tab 625MG	-	NC	ANTIDIABETICS
metformin hcl tab 750MG	-	NC	ANTIDIABETICS
metformin soln (RIOMET equiv)	-	3	ANTIDIABETICS
metformin tab (GLUCOPHAGE equiv)	-	1	ANTIDIABETICS
METFORMIN TAB	-	NC	ANTIDIABETICS
methadone soln (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1	ANALGESICS - OPIOID
methadone tab (DOLOPHINE equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1	ANALGESICS - OPIOID
METHADOSE CONC	-	NC	ANALGESICS - OPIOID
methadose tab (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1	ANALGESICS - OPIOID
methamphetamine hcl tab (METHAMPHETAMINE equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/NOREXIANTS
methazolamide tab (NEPTAZANE equiv)	-	2	DIURETICS
METHENAM MAN TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
methenamine hippurate tab (HIPREX equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
METHENAMINE ORAL SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
methimazole tab (TAPAZOLE equiv)	-	1	THYROID AGENTS
METHITEST TAB	PA	3	ANDROGENS-ANABOLIC
methocarbamol tab (ROBAXIN equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
methocarbamol tab 1000mg (ROBAXIN equiv)	-	NC	MUSCULOSKELETAL THERAPY AGENTS
methotrexate inj	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
METHOTREXATE INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
methotrexate tab (TREXALL equiv)	-	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
METHOXSALEN CAP	-	2	DERMATOLOGICALS
methoxsalen cap (OXSORALEN ULTRA equiv)	-	2	DERMATOLOGICALS
methscopolamine tab (PAMINE equiv)	-	3	ULCER DRUGS
methsuximide cap (CELONTIN equiv)	-	2	ANTICONVULSANTS
methyldopa tab (ALDOMET equiv)	-	1	ANTIHYPERTENSIVES

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METHYLDOPA TAB	-	3	ANTIHYPERTENSIVES
methylergonovine tab (METHERGINE equiv) (QL= 28 tabs/fill, 1 fill/365 days)	QL	2	OXYTOCICS
METHYLIN SOLN	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate CD cap (METADATE CD equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate chew tab (METHYLIN equiv) (Members age 7 years and older reuire Prior Authorization)	PA	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate ER cap (RITALIN LA equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate ER cap (APTENSIO XR equiv)	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
METHYLPHENIDATE ER TAB	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate ER tab (CONCERTA equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
METHYLPHENIDATE ER TAB 27MG	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
METHYLPHENIDATE ER TAB 36MG	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
METHYLPHENIDATE ER TAB 54MG	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate ER tab 72mg	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
METHYLPHENIDATE ER TAB, RELEXXII TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate soln (METHYLIN equiv) (Members age 7 years and older require Prior Authorization)	PA	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate tab (RITALIN equiv)	-	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylphenidate td patch (DAYTRANA equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
methylprednisolone acetate inj (DEPO-MEDROL equiv)	-	1	CORTICOSTEROIDS
methylprednisolone dose pack (MEDROL equiv)	-	1	CORTICOSTEROIDS
methylprednisolone tab (MEDROL equiv)	-	1	CORTICOSTEROIDS
methylprenisolone sod succinate inj (SOLU-MEDROL equiv)	-	1	CORTICOSTEROIDS
methyltestosterone cap	-	NC	ANDROGENS-ANABOLIC
metoclopramide soln (REGLAN equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
metoclopramide tab (REGLAN equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
metolazone tab (ZAROXOLYN equiv)	-	1	DIURETICS
metoprolol ER tab (TOPROL XL equiv)	-	1	BETA BLOCKERS
metoprolol tab (LOPRESSOR equiv)	-	1	BETA BLOCKERS
METOPROLOL TARTRATE TAB	-	NC	BETA BLOCKERS
metoprolol/hydrochlorothiazide tab (LOPRESSOR HCT equiv)	-	2	ANTIHYPERTENSIVES
METOZOLV ODT	-	NC	GASTROINTESTINAL AGENTS - MISC.
METROCREAM	-	NC	DERMATOLOGICALS
METROGEL 1%	-	NC	DERMATOLOGICALS
METROGEL VAGINAL GEL	-	NC	VAGINAL PRODUCTS
METROLOTION	-	NC	DERMATOLOGICALS
metronidazole cap (FLAGYL equiv)	-	NC	ANTI-INFECTIVE AGENTS - MISC.

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metronidazole cream (METROCREAM equiv)	-	1	DERMATOLOGICALS
metronidazole gel (METROGEL equiv)	-	2	DERMATOLOGICALS
metronidazole gel 0.75% (METROGEL equiv)	-	1	DERMATOLOGICALS
metronidazole lotion (METROLOTION equiv)	-	2	DERMATOLOGICALS
metronidazole tab (FLAGYL equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
METRONIDAZOLE TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
metronidazole vaginal gel (METROGEL equiv)	-	1	VAGINAL PRODUCTS
metyrosine cap (DEMSER equiv)	-	NC	ANTIHYPERTENSIVES
mexiletine hcl cap	-	2	ANTIARRHYTHMICS
MEXPAROX HC CREAM	-	NC	DERMATOLOGICALS
MFLUSIVA INJ (QL= 1 inj/28 days; Covered for members age 50 years and older)	QL-VAC	$0	VACCINES
MICARDIS HCT TAB	-	NC	ANTIHYPERTENSIVES
MICARDIS TAB	-	NC	ANTIHYPERTENSIVES
MICLARA LIQUID	OTC	NC	ANTIHISTAMINES
MICROVIX LP PAK	-	NC	DERMATOLOGICALS
midazolam inj (MIDAZOLAM equiv) (Restricted to Neurology Specialist)	RS	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
MIDAZOLAM INJ (QL= 1 inj/fill)	QL	2	ANTICONVULSANTS
midodrine tab (PROAMATINE equiv)	-	1	VASOPRESSORS
MIDUELLA, PARAGARD IUD	-	EXC	CONTRACEPTIVES
MIEBO OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
mifepristone tab 200mg (MIFIPREX equiv)	-	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
MIGERGOT SUPP	-	NC	MIGRAINE PRODUCTS
MIGLITOL TAB	-	3	ANTIDIABETICS
miglitol tab (MIGLITOL equiv)	-	3	ANTIDIABETICS
miglustat cap (ZAVESCA equiv) (QL= 3 caps/day)	PA-QL-SP	1	HEMATOPOIETIC AGENTS
MIGRANAL SPRAY	-	NC	MIGRAINE PRODUCTS
MILLIPRED DP PAK	-	NC	CORTICOSTEROIDS
MILLIPRED TAB	-	NC	CORTICOSTEROIDS
milnacipran hcl tab (SAVELLA equiv) (QL= 2 tabs/day)	QL	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
milnacipran hcl tab pak (SAVELLA equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
MIMRYLO INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MINASTRIN CHEW TAB	-	NC	CONTRACEPTIVES
MINIPRESS CAP	-	NC	ANTIHYPERTENSIVES
MINOCIN CAP	-	NC	TETRACYCLINES
minocycline cap (MINOCIN equiv)	-	1	TETRACYCLINES
MINOCYCLINE ER CAP	-	NC	TETRACYCLINES
minocycline ER tab (SOLODYN equiv)	-	NC	TETRACYCLINES
minocycline tab (DYNACIN equiv)	-	2	TETRACYCLINES
MINOLIRA TAB	-	NC	TETRACYCLINES
minoxidil tab (LONITEN equiv)	-	1	ANTIHYPERTENSIVES
MINT REFILL KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
MINT STARTER KIT	-	NC	MEDICAL DEVICES AND SUPPLIES

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MIPLYFFA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
mirabegron granules for oral extended release susp (MYRBETRIQ equiv)	-	NC	URINARY ANTISPASMODICS
mirabegron tab er (MYRBETRIQ equiv)	-	NC	URINARY ANTISPASMODICS
MIRAPEX ER TAB	-	NC	ANTIPARKINSON AGENTS
MIRAPEX TAB	-	NC	ANTIPARKINSON AGENTS
MIRCETTE TAB	-	NC	CONTRACEPTIVES
mirtazapine ODT (REMERON equiv)	-	1	ANTIDEPRESSANTS
mirtazapine tab (REMERON equiv)	-	1	ANTIDEPRESSANTS
MIRVASO GEL	-	EXC	DERMATOLOGICALS
misoprostol tab (CYTOTEC equiv)	-	1	ULCER DRUGS
M-M-R II INJ	VAC	$0	VACCINES
MNEXSPIKE INJ 10MCG/0.2ML (QL= 1 dose/24 days)	QL-VAC	$0	VACCINES
MOBIC TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
modafinil tab (PROVIGIL equiv) (QL= 2 tabs/day)	QL	1	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
MODEYSO CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
moexipril tab (UNIVASC equiv)	-	1	ANTIHYPERTENSIVES
MOLINDONE TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
mometasone cream (ELOCON equiv)	-	1	DERMATOLOGICALS
mometasone nasal spray (NASONEX equiv)	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
mometasone oint (ELOCON equiv)	-	1	DERMATOLOGICALS
mometasone soln (ELOCON equiv)	-	1	DERMATOLOGICALS
MONODOX CAP	-	NC	TETRACYCLINES
montelukast chew tab (SINGULAIR equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
montelukast granule pack (SINGULAIR equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
montelukast tab (SINGULAIR equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
MONUROL GRANULE PACK	-	NC	ANTI-INFECTIVE AGENTS - MISC.
MORPHABOND TAB	-	NC	ANALGESICS - OPIOID
MORPHINE SULFATE ER BEAD CAP	-	NC	ANALGESICS - OPIOID
morphine sulfate ER tab (MS CONTIN equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1	ANALGESICS - OPIOID
MORPHINE SULFATE ORAL SOLN 100MG/5ML	-	NC	ANALGESICS - OPIOID
morphine sulfate oral soln 10mg/5ml (MORPHINE SULFATE equiv)	-	1	ANALGESICS - OPIOID
morphine sulfate soln	-	1	ANALGESICS - OPIOID
MORPHINE SULFATE SOLN 20MG/5ML	-	NC	ANALGESICS - OPIOID
MORPHINE SULFATE SUPP	-	2	ANALGESICS - OPIOID
morphine sulfate tab	-	1	ANALGESICS - OPIOID
MORPHINE SULFATE TAB	-	NC	ANALGESICS - OPIOID
MOTEGRITY TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
MOTPOLY XR CAP	-	NC	ANTICONVULSANTS
MOTRIN SUSP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
MOUNJARO INJ (QL= 4 inj/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2	ANTIDIABETICS
MOVANTIK TAB (QL= 1 tab/day)	PA-QL	2	GASTROINTESTINAL AGENTS - MISC.

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MOVIPREP SOLN	-	NC	LAXATIVES
MOXATAG TAB	-	NC	PENICILLINS
MOXATAG TAB 775MG	-	NC	PENICILLINS
MOXEZA OPHTH SOLN 0.5%	-	NC	OPHTHALMIC AGENTS
MOXEZA OPHTH SOLN, MOXIFLOXACIN OPHTH SOLN, VIGAMOX OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
moxifloxacin ophth soln (VIGAMOX OPHTH SOLN equiv)	-	1	OPHTHALMIC AGENTS
MOXIFLOXACIN SOLN	-	NC	OPHTHALMIC AGENTS
moxifloxacin tab (AVELOX equiv)	-	2	FLUOROQUINOLONES
MPM PAK	-	EXC	OXYTOCICS
MRESVIA INJ (QL= 1 dose/lifetime)	QL-VAC	$0	VACCINES
MS CONTIN TAB	-	NC	ANALGESICS - OPIOID
MUCINEX LIQUID	-	NC	COUGH/COLD/ALLERGY
MULPLETA TAB	-	NC	HEMATOPOIETIC AGENTS
MULTAQ TAB	-	2	ANTIARRHYTHMICS
MULTIGEN FOLIC TAB	-	1	HEMATOPOIETIC AGENTS
MULTIGEN PLUS TAB	-	1	HEMATOPOIETIC AGENTS
MULTIGEN TAB	-	1	HEMATOPOIETIC AGENTS
MULTI-MAC TAB	-	NC	MULTIVITAMINS
MULTIPLE-VITAMIN/FL-FE DROPS	-	NC	MULTIVITAMINS
MULTIVITAMIN CHEW TAB	-	NC	MULTIVITAMINS
multivitamin/minerals tab (STROVITE equiv)	-	NC	MULTIVITAMINS
mupirocin cream (BACTROBAN equiv)	-	NC	DERMATOLOGICALS
mupirocin oint (BACTROBAN OINT equiv)	-	1	DERMATOLOGICALS
MYALEPT INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
MYAMBUTOL TAB	-	NC	ANTIMYCOBACTERIAL AGENTS
MYCAPSSA CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
MYCOBUTIN CAP	-	NC	ANTIMYCOBACTERIAL AGENTS
mycophenolate DR tab (MYFORTIC equiv)	-	2	ASSORTED CLASSES
mycophenolate mofetil cap (CELLCEPT equiv)	-	1	ASSORTED CLASSES
mycophenolate mofetil susp (CELLCEPT SUSP equiv)	-	2	ASSORTED CLASSES
mycophenolate mofetil tab (CELLCEPT equiv)	-	1	ASSORTED CLASSES
MYDAYIS CAP 12.5MG	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
MYDAYIS CAP 25MG	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
MYDAYIS CAP 37.5MG	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
MYDAYIS CAP 50MG	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
MYDCOMBI OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
MYDRIACYL OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
MYFEMBREE TAB (QL= 1 tab/day)	PA-QL	2	ESTROGENS
MYFORTIC TAB	-	NC	ASSORTED CLASSES
MYHIBBIN SUSP	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
MYLERAN TAB	SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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Drug Name	Special Code	Tier	Category
MYNATAL-Z TAB	-	3	MULTIVITAMINS
MYNEPHRON CAP	-	NC	MULTIVITAMINS
MYQORZO TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
MYRBETRIQ SUSP	-	NC	URINARY ANTISPASMODICS
MYRBETRIQ TAB	-	2	URINARY ANTISPASMODICS
MYSOLINE TAB	-	NC	ANTICONVULSANTS
MYTESI TAB	-	NC	ANTIDIARRHEALS
nabumetone tab (RELAFEN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
nadolol tab (CORGARD equiv)	-	2	BETA BLOCKERS
NAFLON CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAFTIFINE CREAM	-	3	DERMATOLOGICALS
naftifine cream (NAFTIN equiv)	-	3	DERMATOLOGICALS
naftifine hcl gel 2% (NAFTIN equiv)	-	NC	DERMATOLOGICALS
NAFTIN GEL 2%	-	NC	DERMATOLOGICALS
naloxone hcl nasal spray (NARCAN equiv)	OTC	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
naloxone inj	-	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
naloxone prefilled inj	-	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
NALOXONE PREFILLED INJ (QL= 2 inj/fill)	QL	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
naltrexone tab (REVIA equiv)	-	1	ANTIDOTES
NAMENDA TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMENDA XR CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMENDA XR TITRATION PACK	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMZARIC CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAMZARIC STARTER PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NAPRELAN CR TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAPROSYN EC TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAPROSYN EC TAB 500MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAPROSYN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAPROXEN CREAM COMPOUND KIT	-	NC	DERMATOLOGICALS
naproxen EC tab (NAPROSYN EC equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
naproxen EC tab 500mg (NAPROSYN EC equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
NAPROXEN SOD ER TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naproxen sodium CR tab (NAPRELAN CR equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naproxen sodium tab (ANAPROX equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
NAPROXEN SUSP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naproxen susp (NAPROSYN equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naproxen tab (NAPROSYN equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
naproxen/esomeprazole magnesium DR tab (VIMOVO equiv)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
naratriptan tab (AMERGE equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS
NARCAN NASAL SPRAY	OTC	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
NARDIL TAB 15MG	-	3	ANTIDEPRESSANTS
NASACORT OTC NASAL SPRAY	OTC	EXC	NASAL AGENTS - SYSTEMIC AND TOPICAL
NASCOBAL SPRAY	-	NC	HEMATOPOIETIC AGENTS
NATACYN OPHTH SUSP (QL= 15ml/fill)	QL	2	OPHTHALMIC AGENTS

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NATAZIA TAB	-	$0	CONTRACEPTIVES
nateglinide tab (STARLIX equiv)	-	2	ANTIDIABETICS
NATESTO GEL	-	NC	ANDROGENS-ANABOLIC
NATESTO NASAL GEL	-	NC	ANDROGENS-ANABOLIC
NATROBA SUSP (QL= 1 bottle/fill)	QL	3	DERMATOLOGICALS
NATROBA SUSP 0.90% (QL= 1 bottle/fill)	QL	3	DERMATOLOGICALS
NAYZILAM SPRAY (QL= 4 doses/fill)	QL	3	ANTICONVULSANTS
nebivolol hcl tab (BYSTOLIC equiv)	-	1	BETA BLOCKERS
NEBUPENT NEB SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
NEBUSAL NEB SOLN	-	2	COUGH/COLD/ALLERGY
NEFAZODONE TAB	-	NC	ANTIDEPRESSANTS
NEFFY SPRAY	-	NC	VASOPRESSORS
NEMLUVIO INJ (QL= 1 inj/56 days)	PA-QL-SP	4	DERMATOLOGICALS
NENDRUX GEL	-	NC	DERMATOLOGICALS
NEO/BAC/POLY OPHTH OINT	-	1	OPHTHALMIC AGENTS
NEO/POLY/BAC/HC OPHTH OINT	-	1	OPHTHALMIC AGENTS
neomycin tab	-	1	AMINOGLYCOSIDES
NEOMYCIN/POLYMIXIN/GRAMICIDIN OPHTH SOLN	-	1	OPHTHALMIC AGENTS
neomycin/polymixin/hydrocoritisone otic soln (CORTISPORIN equiv)	-	1	OTIC AGENTS
neomycin/polymixin/hydrocoritisone otic susp (CORTISPORIN equiv)	-	1	OTIC AGENTS
neomycin/polymyxin/dexamethasone ophth oint (MAXITROL equiv)	-	1	OPHTHALMIC AGENTS
neomycin/polymyxin/dexamethasone ophth soln (MAXITROL equiv)	-	1	OPHTHALMIC AGENTS
NEOMYCIN/POLYMYXIN/HYDROCORTISONE OPHTH SOLN	-	1	OPHTHALMIC AGENTS
NEONATAL 19 TAB	-	3	MULTIVITAMINS
NEONATAL FE TAB	-	3	MULTIVITAMINS
NEORAL CAP	-	NC	ASSORTED CLASSES
NEORAL SOLN	-	NC	ASSORTED CLASSES
NEOSALUS FOAM	-	NC	DERMATOLOGICALS
NEOSALUS LOTION	-	NC	DERMATOLOGICALS
NEOSPORIN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
NEO-SYNALAR CREAM	-	NC	DERMATOLOGICALS
NEOTUSS PLUS LIQUID	-	3	COUGH/COLD/ALLERGY
NEPHRON FA TAB	-	2	HEMATOPOIETIC AGENTS
NEPTAZANE TAB	-	NC	DIURETICS
NEREUS CAP	-	NC	ANTIEMETICS
NERLYNX TAB (QL= 6 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NEULASTA INJ	-	NC	HEMATOPOIETIC AGENTS
NEUPRO PATCH	-	3	ANTIPARKINSON AGENTS
NEURONTIN CAP	-	NC	ANTICONVULSANTS
NEURONTIN SOLN	-	NC	ANTICONVULSANTS
NEURONTIN TAB 600MG	-	NC	ANTICONVULSANTS
NEURONTIN TAB 800MG	-	NC	ANTICONVULSANTS
NEVANAC OPHTH SUSP	-	2	OPHTHALMIC AGENTS
NEVIRAPINE ER TAB	-	2	ANTIVIRALS
nevirapine ER tab (VIRAMUNE XR equiv)	-	2	ANTIVIRALS
NEVIRAPINE SUSP	-	2	ANTIVIRALS
nevirapine tab (VIRAMUNE equiv)	-	1	ANTIVIRALS
NEXICLON XR TAB	-	NC	ANTIHYPERTENSIVES

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NEXIUM CAP	-	NC	ULCER DRUGS
NEXLETOL TAB (QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2	ANTIHYPERLIPIDEMICS
NEXLIZET TAB (QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2	ANTIHYPERLIPIDEMICS
NEXPLANON IMPLANT	-	EXC	CONTRACEPTIVES
NEXTSTELLIS TAB	-	$0	CONTRACEPTIVES
NGENLA INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
niacin ER tab (NIASPAN equiv)	-	1	ANTIHYPERLIPIDEMICS
NIACOR TAB	-	NC	ANTIHYPERLIPIDEMICS
NIASPAN ER TAB	-	NC	ANTIHYPERLIPIDEMICS
nicardipine cap (CARDENE equiv)	-	3	CALCIUM CHANNEL BLOCKERS
NICODERM PATCH	OTC-SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICORETTE GUM	OTC-SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICORETTE LOZENGE	OTC-SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nicotine gum (NICORETTE equiv)	OTC-SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTINE KIT	OTC-QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nicotine lozenge (COMMIT equiv)	OTC-SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nicotine patch (NICODERM equiv) (Limited to 180 days/plan year)	OTC-QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTROL INHALER	SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
NICOTROL NASAL SPRAY	SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nifedipine cap (PROCARDIA equiv)	-	1	CALCIUM CHANNEL BLOCKERS
nifedipine ER tab (ADALAT CC equiv)	-	1	CALCIUM CHANNEL BLOCKERS
NILOTINB TAR CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NILOTINIB D-TAR CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nilotinib hcl cap (TASIGNA equiv)	PA-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NILUTAMIDE TAB	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nilutamide tab (NILANDRON equiv)	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nimodipine cap (NIMOTOP equiv)	-	3	CALCIUM CHANNEL BLOCKERS
NINLARO CAP	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
nintedanib esylate cap (OFEV equiv) (QL= 2 caps/day)	PA-QL-SP	1	RESPIRATORY AGENTS - MISC.
NIRAVAM ODT	-	NC	ANTIANXIETY AGENTS
nisoldipine ER tab (SULAR equiv)	-	3	CALCIUM CHANNEL BLOCKERS
NISOLDIPINE ER TAB 20MG, 30MG, 40MG	-	3	CALCIUM CHANNEL BLOCKERS

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nitazoxanide tab (ALINIA equiv) (QL= 6 tabs/3 days)	PA-QL	2	ANTI-INFECTIVE AGENTS - MISC.
nitisinone cap (ORFADIN equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NITRO-DUR PATCH	-	NC	ANTIANGINAL AGENTS
NITRO-DUR PATCH 0.3MG/HR, 0.8MG/HR	-	3	ANTIANGINAL AGENTS
nitrofurantoin macrocrystals cap (MACRODANTIN equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
nitrofurantoin macrocrystals cap 25mg (MACRODANTIN equiv)	-	NC	ANTI-INFECTIVE AGENTS - MISC.
nitrofurantoin monohydrate cap (MACROBID equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
nitrofurantoin susp (FURADANTIN equiv) (Prior Authorization required for members age 9 years and older)	PA	3	ANTI-INFECTIVE AGENTS - MISC.
NITROFURANTOIN SUSP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
NITROGLYCERIN ER CAP	-	1	ANTIANGINAL AGENTS
nitroglycerin lingual spray (NITROLINGUAL equiv)	-	3	ANTIANGINAL AGENTS
nitroglycerin oint	-	2	ANTIANGINAL AGENTS
nitroglycerin oint (RECTIV equiv)	-	NC	ANORECTAL AND RELATED PRODUCTS
nitroglycerin patch (NITRO-DUR equiv)	-	1	ANTIANGINAL AGENTS
nitroglycerin SL tab (NITROSTAT equiv)	-	1	ANTIANGINAL AGENTS
NITROLINGUAL PUMP SPRAY	-	NC	ANTIANGINAL AGENTS
NITROSTAT SL TAB	-	NC	ANTIANGINAL AGENTS
NITYR TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NIVESTYM INJ	SP	4	HEMATOPOIETIC AGENTS
NIZATIDINE CAP	-	1	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
nizatidine cap (AXID equiv)	-	1	ULCER DRUGS
NIZORAL SHAMPOO	-	NC	DERMATOLOGICALS
NOCDURNA SL TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NOCTIVA EMULSION SPRAY	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
NORDITROPIN INJ, NUTROPIN AQ INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
norethindrone ace-ethinyl estradiol-fe cap (TAYTULLA equiv)	-	$0	CONTRACEPTIVES
norethindrone acetate/ethinyl estradial FE chew tab (MINASTRIN equiv)	-	$0	CONTRACEPTIVES
norethindrone acetate/ethinyl estradiol tab (LOESTRIN equiv)	-	$0	CONTRACEPTIVES
norethindrone tab (NORA-QD equiv)	-	$0	CONTRACEPTIVES
norethindrone tab (AYGESTIN equiv)	-	1	PROGESTINS
norethindrone/ethinyl estradiol FE tab (LOESTRIN FE equiv)	-	$0	CONTRACEPTIVES
NORGESIC TAB FORTE	-	NC	MUSCULOSKELETAL THERAPY AGENTS
NORITATE CREAM	-	NC	DERMATOLOGICALS
NORLIQVA ORAL SOLN (Prior Authorization required for members age 9 years and older)	PA	3	CALCIUM CHANNEL BLOCKERS
NORPACE CAP	-	NC	ANTIARRHYTHMICS
NORPACE CR CAP	-	2	ANTIARRHYTHMICS
NORPRAMIN TAB	-	NC	ANTIDEPRESSANTS
NOR-QD TAB	-	NC	CONTRACEPTIVES
NORTHERA CAP	-	NC	VASOPRESSORS
nortrel 7/7/7 tab, pirmella 7/7/7 tab (TRI-NORINYL equiv)	-	$0	CONTRACEPTIVES

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nortrel tab (OVCON 35 equiv)	-	$0	CONTRACEPTIVES
nortriptyline cap (PAMELOR equiv)	-	1	ANTIDEPRESSANTS
nortriptyline oral soln (NORTRIPTYLINE equiv)	-	1	ANTIDEPRESSANTS
NORVASC TAB	-	NC	CALCIUM CHANNEL BLOCKERS
NORVIR POWDER PACK	-	2	ANTIVIRALS
NORVIR TAB	-	NC	ANTIVIRALS
NOVACORT GEL	-	NC	DERMATOLOGICALS
NOVAVAX INJ (QL= 1 dose/24 days)	QL-VAC	$0	VACCINES
NOVOEIGHT INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
NOVOFINE PEN NEEDLE	-	$0	MEDICAL DEVICES AND SUPPLIES
NOVOLIN 70/30 FLEXPEN INJ	OTC	NC	ANTIDIABETICS
NOVOLIN 70/30 FLEXPEN RELION INJ	OTC	NC	ANTIDIABETICS
NOVOLIN 70/30 INJ	OTC	NC	ANTIDIABETICS
NOVOLIN 70/30 RELION INJ	OTC	NC	ANTIDIABETICS
NOVOLIN N FLEXPEN INJ	OTC	NC	ANTIDIABETICS
NOVOLIN N INJ	OTC	NC	ANTIDIABETICS
NOVOLIN N RELION 100UNIT/ML	OTC	NC	ANTIDIABETICS
NOVOLIN R FLEXPEN INJ	OTC	NC	ANTIDIABETICS
NOVOLIN R INJ	OTC	NC	ANTIDIABETICS
NOVOLIN R RELION INJ	OTC	NC	ANTIDIABETICS
NOVOLOG FLEXPEN INJ	-	NC	ANTIDIABETICS
NOVOLOG FLEXPEN RELION INJ	-	NC	ANTIDIABETICS
NOVOLOG INJ	-	NC	ANTIDIABETICS
NOVOLOG MIX FLEXPEN INJ	-	NC	ANTIDIABETICS
NOVOLOG MIX INJ	-	NC	ANTIDIABETICS
NOVOLOG PENFILL INJ	-	NC	ANTIDIABETICS
NOVOSEVEN RT INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
NOVOTWIST PEN NEEDLE	-	$0	MEDICAL DEVICES AND SUPPLIES
NOVOTWIST/NOVOFINE PEN NEEDLE	-	$0	MEDICAL DEVICES AND SUPPLIES
NOXAFIL PAK	-	3	ANTIFUNGALS
NOXAFIL SUSP	-	NC	ANTIFUNGALS
NOXAFIL TAB	-	NC	ANTIFUNGALS
NUBEQA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NUCALA INJ (QL= 1 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
NUCARACLINPA KIT	-	NC	DERMATOLOGICALS
NUCARARXPAK KIT	-	NC	DERMATOLOGICALS
NUCYNTA ER TAB (QL= 2 tabs/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2	ANALGESICS - OPIOID
NUCYNTA TAB	-	3	ANALGESICS - OPIOID
NUEDEXTA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
nulido pad (NULIDO equiv)	-	NC	DERMATOLOGICALS
NUPLAZID CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
NUPLAZID TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
NURTEC ODT (QL= 8 tabs/fill; 6 fills/year)	PA-QL	2	MIGRAINE PRODUCTS
NUVAKAAN II KIT	-	NC	DERMATOLOGICALS
NUVARING	-	NC	CONTRACEPTIVES

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NUVIGIL TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
NUWIQ INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
NUWIQ KIT	-	EXC	HEMATOLOGICAL AGENTS - MISC.
NUZOLVENCE GRANULE PACK	-	NC	ANTI-INFECTIVE AGENTS - MISC.
NUZYRA TAB (QL= 30 tabs/180 days; Restricted to Infectious Disease or Pulmonology Specialist)	QL-RS-SP	4	TETRACYCLINES
NYMALIZE SOLN	-	NC	CALCIUM CHANNEL BLOCKERS
NYPOZI INJ	-	NC	HEMATOPOIETIC AGENTS
nystatin cream (MYCOSTATIN CREAM equiv)	-	1	DERMATOLOGICALS
nystatin oint	-	1	DERMATOLOGICALS
nystatin susp	-	1	MOUTH/THROAT/DENTAL AGENTS
NYSTATIN SUSP	-	NC	MOUTH/THROAT/DENTAL AGENTS
nystatin tab	-	1	ANTIFUNGALS
nystatin topical powder	-	1	DERMATOLOGICALS
nystatin/triamcinolone cream	-	1	DERMATOLOGICALS
nystatin/triamcinolone oint	-	1	DERMATOLOGICALS
NYVEPRIA INJ	SP	4	HEMATOPOIETIC AGENTS
OBIZUR INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
octreotide inj (SANDOSTATIN equiv)	SP	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
OCTREOTIDE INJ 100MCG	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
OCUFLOX OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ODACTRA SL TAB	PA	3	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
ODEFSEY TAB	-	2	ANTIVIRALS
ODOMZO CAP (QL= 1 cap/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OFEV CAP	-	NC	RESPIRATORY AGENTS - MISC.
ofloxacin ophth soln (OCUFLOX equiv)	-	1	OPHTHALMIC AGENTS
ofloxacin otic soln (FLOXIN equiv)	-	1	OTIC AGENTS
OFLOXACIN TAB	-	1	FLUOROQUINOLONES
OGSIVEO TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OGSIVEO TAB 50MG (QL= 6 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OHTUVAYRE SUSP	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
OJEMDA SUSP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OJEMDA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OJJAARA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
olanzapine ODT (ZYPREXA equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
olanzapine tab (ZYPREXA equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
olanzapine/fluoxetine cap (SYMBYAX equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

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OLLIZAC POWDER	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
olmesartan tab (BENICAR equiv)	-	1	ANTIHYPERTENSIVES
olmesartan/amlodipine/hydrochlorothiazide tab (TRIBENZOR equiv)	-	1	ANTIHYPERTENSIVES
olmesartan/hydrochlorothiazide tab (BENICAR HCT equiv)	-	1	ANTIHYPERTENSIVES
olopatadine nasal spray (PATANASE equiv)	-	2	NASAL AGENTS - SYSTEMIC AND TOPICAL
olopatadine ophth soln (PATANOL equiv)	-	NC	OPHTHALMIC AGENTS
OLPRUVA PACK	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
OLUMIANT TAB (QL= 1 tab/day)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
OLUX E FOAM	-	NC	DERMATOLOGICALS
OLUX FOAM	-	NC	DERMATOLOGICALS
OMEGA-3 RX PAK COMPLETE	-	NC	ANTIHYPERLIPIDEMICS
omega-3-acid ethyl esters cap (LOVAZA equiv)	-	1	ANTIHYPERLIPIDEMICS
omeprazole DR cap (PRILOSEC equiv)	-	1	ULCER DRUGS
omeprazole tab	OTC	EXC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
omeprazole/sodium bicarbonate cap (ZEGERID equiv)	-	NC	ULCER DRUGS
omeprazole/sodium bicarbonate powder pack (ZEGERID equiv)	-	NC	ULCER DRUGS
OMLONTI OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
OMLYCLO SYRINGE	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
OMLYCLO SYRINGE 150MG/ML	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
OMLYCLO SYRINGE 300MG/2ML	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
OMNARIS NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
OMNIPAQUE INJ	-	NC	DIAGNOSTIC PRODUCTS
OMNIPAQUE SOLN	-	NC	DIAGNOSTIC PRODUCTS
OMNIPOD 5 DEX G7G6 INTRO KIT (QL= 1 kit/year)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 DEX G7G6 PODS (QL= 10 pods/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 G7 KIT INTRO (QL= 1 kit/year)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 G7 MIS PODS (QL= 10 pods/30 days)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 LIBRE2 PLUS G6 INTRO KIT (QL= 1 kit/year)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 LIBRE2 PLUS G6 PODS (QL= 10 pods/30 days)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD 5 PACK PODS (QL= 10 pods/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD DASH INTRO KIT (QL= 1 kit/year)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD DASH PDM KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
OMNIPOD DASH PODS (QL= 10 pods/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD GO KIT (QL= 10 pods/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNIPOD STARTER KIT (QL= 1 kit/year)	QL	2	MEDICAL DEVICES AND SUPPLIES
OMNITROPE INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
OMVOH INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
ONAPGO INJ	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
ondansetron ODT (ZOFRAN equiv)	-	1	ANTIEMETICS
ondansetron soln (ZOFRAN equiv)	-	1	ANTIEMETICS

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ondansetron tab (ZOFRAN equiv)	-	1	ANTIEMETICS
ONDANSETRON TAB	-	NC	ANTIEMETICS
ONDANSETRON TAB ODT	-	NC	ANTIEMETICS
ONEXTON GEL 1.2-3.75%	-	NC	DERMATOLOGICALS
ONFI SUSP	-	NC	ANTICONVULSANTS
ONFI TAB	-	NC	ANTICONVULSANTS
ONGENTYS CAP (QL= 1 tab/day, 30 tabs per fill)	PA-QL	3	ANTIPARKINSON AND RELATED THERAPY AGENTS
ONGLYZA TAB	-	NC	ANTIDIABETICS
ONTRALFY ORAL SOLN	-	NC	MUSCULOSKELETAL THERAPY AGENTS
ONUREG TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ONYCHO-MED KIT	-	NC	DERMATOLOGICALS
ONYDA XR SUSP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ONZETRA XSAIL	-	NC	MIGRAINE PRODUCTS
OPANA TAB	-	NC	ANALGESICS - OPIOID
OPILL TAB	OTC	$0	CONTRACEPTIVES
OPIPZA FILM	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
OPIUM TINCTURE	-	NC	ANTIDIARRHEAL/PROBIOTIC AGENTS
OPSUMIT TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
OPSYNVI TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
OPVEE NASAL SPRAY	-	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
OPZELURA CREAM (QL= 12 tubes/year)	PA-QL	3	DERMATOLOGICALS
ORACEA CAP	-	NC	DERMATOLOGICALS
ORACIT SOLN	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
ORALAIR SL TAB	-	NC	BIOLOGICALS MISC
ORAP TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ORAPRED ODT TAB, PREDNISOLONE ODT TAB	-	3	CORTICOSTEROIDS
ORAPRED SOLN	-	NC	CORTICOSTEROIDS
ORAVIG TAB	-	NC	MOUTH/THROAT/DENTAL AGENTS
ORENCIA CLICK INJ (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 125MG/ML (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 50MG/0.4ML (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ORENCIA SC INJ 87.5MG/0.7ML (QL= 4 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
ORENITRAM TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
ORENITRAM TAB MONTH PAK	-	NC	CARDIOVASCULAR AGENTS - MISC.
ORFADIN CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORFADIN SUSP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORGOVYX TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ORIAHNN CAP (QL= 2 caps/day)	PA-QL	2	ESTROGENS
ORILISSA TAB 150MG (QL= 1 tab/day)	PA-QL	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
ORILISSA TAB 200MG (QL= 2 tabs/day)	PA-QL	2	ENDOCRINE AND METABOLIC AGENTS - MISC.

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ORKAMBI GRANULES PACKET (QL= 2 packets/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
ORKAMBI TAB (QL= 4 tabs/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
ORLADEYO CAP	-	NC	HEMATOLOGICAL AGENTS - MISC.
ORLADEYO PACK	-	NC	HEMATOLOGICAL AGENTS - MISC.
ORLYNVAH TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
orphenadrine citrate ER tab (NORFLEX equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
ORSERDU TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ORSERDU TAB 345MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ORTHO TRI-CYCLEN (LO) TAB	-	NC	CONTRACEPTIVES
ORTHO-CYCLEN TAB	-	NC	CONTRACEPTIVES
ORTIKOS ER CAP	-	NC	CORTICOSTEROIDS
ORUDIS CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
oseltamivir cap (TAMIFLU equiv) (QL= 10 caps/fill)	QL	1	ANTIVIRALS
oseltamivir cap 30mg (TAMIFLU equiv) (QL= 20 caps/fill)	QL	1	ANTIVIRALS
oseltamivir susp (TAMIFLU equiv) (QL= 250ml/fill)	QL	2	ANTIVIRALS
OSMOLEX ER TAB	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
OSMOPREP TAB	-	NC	LAXATIVES
OSPHENA TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
OTEZLA STARTER PACK (QL= 1 pack/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
OTEZLA TAB (QL= 2 tabs/day)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
OTEZLA XR TAB (QL= 1 tab/day)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
OTEZLA/OTEZLA XR STARTER PACK (QL= 1 pack/28 day)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
otomax-HC otic soln (CORTANE-B equiv)	-	NC	OTIC AGENTS
OTOVEL OTIC SOLN, CIPROFLOXACIN/FLUOCINOLONE OTIC SOLN	-	NC	OTIC AGENTS
OTULFI INJ	-	NC	DERMATOLOGICALS
OTULFI, USTEKINUMAB-AAUZ SYRINGE	-	NC	DERMATOLOGICALS
OVACE PLUS CREAM	-	3	DERMATOLOGICALS
OVACE PLUS LIQ WASH 10%	-	NC	DERMATOLOGICALS
OVACE PLUS LOTION	-	NC	DERMATOLOGICALS
OVACE PLUS SHAMPOO	-	NC	DERMATOLOGICALS
OVACE PLUS FOAM	-	NC	DERMATOLOGICALS
OVCON 35 TAB	-	NC	CONTRACEPTIVES
OVEEZA CAP	-	NC	HEMATOPOIETIC AGENTS
OVIDE LOTION	-	NC	DERMATOLOGICALS
OVIDREL INJ	INF	EXC	ENDOCRINE AND METABOLIC AGENTS - MISC.
oxaprozin tab (DAYPRO equiv)	-	2	ANALGESICS - ANTI-INFLAMMATORY
oxazepam cap (SERAX equiv)	-	2	ANTIANXIETY AGENTS
OXBRYTA TAB	-	NC	HEMATOPOIETIC AGENTS
OXBRYTA TAB FOR ORAL SUSP	-	NC	HEMATOPOIETIC AGENTS
oxcarbazepine er tab (OXTELLAR equiv)	-	NC	ANTICONVULSANTS
oxcarbazepine susp (TRILEPTAL equiv)	-	1	ANTICONVULSANTS
oxcarbazepine tab (TRILEPTAL equiv)	-	1	ANTICONVULSANTS
OXERVATE OPHTH SOLN (QL= 8 kits/affected eye/lifetime)	PA-QL-SP	4	OPHTHALMIC AGENTS
OXIANUJO CREAM	-	NC	DERMATOLOGICALS

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oxiconazole nitrate cream (OXISTAT equiv)	-	NC	DERMATOLOGICALS
OXISTAT CREAM	-	NC	DERMATOLOGICALS
OXISTAT LOTION	-	NC	DERMATOLOGICALS
OXSORALEN ULTRA CAP	-	NC	DERMATOLOGICALS
OXTELLAR XR TAB	-	NC	ANTICONVULSANTS
oxybutynin ER tab (DITROPAN XL equiv)	-	1	URINARY ANTISPASMODICS
oxybutynin syrup	-	1	URINARY ANTISPASMODICS
oxybutynin tab (DITROPAN equiv)	-	1	URINARY ANTISPASMODICS
oxybutynin tab 2.5mg	-	NC	URINARY ANTISPASMODICS
oxycodone cap (OXYIR equiv)	-	1	ANALGESICS - OPIOID
oxycodone conc (ROXICODONE equiv)	-	2	ANALGESICS - OPIOID
oxycodone soln (ROXICODONE equiv)	-	2	ANALGESICS - OPIOID
oxycodone tab (ROXICODONE equiv)	-	1	ANALGESICS - OPIOID
OXYCODONE TAB	-	NC	ANALGESICS - OPIOID
OXYCODONE/ACETAMINOPHEN SOLN	-	2	ANALGESICS - OPIOID
OXYCODONE/ACETAMINOPHEN SOLN 10-300MG/5ML, PROLATE SOLN 10-300MG/5ML	-	NC	ANALGESICS - OPIOID
oxycodone/acetaminophen tab (PERCOCET equiv)	-	1	ANALGESICS - OPIOID
OXYCODONE/ACETAMINOPHEN TAB 2.5-300MG	-	NC	ANALGESICS - OPIOID
OXYCONTIN CR TAB	-	NC	ANALGESICS - OPIOID
oxymetazoline hcl cream (RHOFADE equiv)	-	EXC	DERMATOLOGICALS
OXYMORPHONE ER TAB	-	NC	ANALGESICS - OPIOID
oxymorphone tab (OPANA equiv)	-	NC	ANALGESICS - OPIOID
OZEMPIC INJ (QL= 1 pack/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2	ANTIDIABETICS
OZEMPIC TAB, RYBELSUS TAB (QL=1 tab/day; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2	ANTIDIABETICS
PALFORZIA POWDER PACK	PA-SP	4	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
PALFORZIA SPRINKLE CAP	PA-SP	4	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
paliperidone ER tab (INVEGA equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PALSONIFY TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
PALYNZIQ INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
PAMELOR CAP	-	NC	ANTIDEPRESSANTS
PANCREAZE CAP, PERTZYE CAP	-	NC	DIGESTIVE AIDS
PANDEL CREAM	-	NC	DERMATOLOGICALS
pantoprazole EC tab (PROTONIX equiv)	-	1	ULCER DRUGS
pantoprazole sodium packet (PROTONIX equiv)	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
paramox hc gel (NOVACORT GEL equiv)	-	NC	DERMATOLOGICALS
PAREGORIC TINCTURE	-	NC	ANTIDIARRHEALS
paricalcitol cap (ZEMPLAR equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
PARLODEL CAP	-	NC	ANTIPARKINSON AGENTS
PARLODEL TAB	-	NC	ANTIPARKINSON AGENTS
PARNATE TAB	-	NC	ANTIDEPRESSANTS

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Drug Name	Special Code	Tier	Category
paroxetine cap (BRISDELLE equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
paroxetine ER tab (PAXIL CR equiv)	-	2	ANTIDEPRESSANTS
PAROXETINE SUSP	-	3	ANTIDEPRESSANTS
paroxetine tab (PAXIL equiv)	-	1	ANTIDEPRESSANTS
PATANASE NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
PAXIL CR TAB	-	NC	ANTIDEPRESSANTS
PAXIL ORAL SUSP	-	NC	ANTIDEPRESSANTS
PAXIL TAB	-	NC	ANTIDEPRESSANTS
PAXLOVID PAK (QL= 11 tabs/90 days)	QL	2	ANTIVIRALS
PAXLOVID TAB 150-100MG (QL= 20 tabs/90 days)	QL	2	ANTIVIRALS
PAXLOVID TAB 300-100MG (QL= 30 tabs/90 days)	QL	2	ANTIVIRALS
pazopanib tab (VOTRIENT equiv) (QL= 4 tabs/day)	PA-QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PAZOPANIB TAB 400MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PEAK FLOW METER	OTC	1	MEDICAL DEVICES AND SUPPLIES
PEDIARIX INJ	VAC	$0	TOXOIDS
pediatric multiple vitamins/fluoride soln	-	NC	MULTIVITAMINS
pediatric multiple vitamins/fluoride/iron soln	-	NC	MULTIVITAMINS
PEDIZOLPAK THERAPY PACK	-	NC	DERMATOLOGICALS
PEDVAXHIB INJ	VAC	$0	VACCINES
peg 3350 soln (100 gram Moviprep equiv) (MOVIPREP equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0	LAXATIVES
peg 3350/electrolytes soln (COLYTE equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0	LAXATIVES
peg 3350/electrolytes soln (NULYTELY equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0	LAXATIVES
PEGASYS INJ	SP	4	ANTIVIRALS
PEG-PREP KIT	-	NC	LAXATIVES
PELLIX SOLN	-	NC	DERMATOLOGICALS
PEMAZYRE TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PEN NEEDLE	OTC	NC	MEDICAL DEVICES AND SUPPLIES
penciclovir cream (DENAVIR equiv)	-	NC	DERMATOLOGICALS
penicillamine cap (CUPRIMINE equiv)	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
penicillamine tab (DEPEN TITRATAB equiv)	-	2	MISCELLANEOUS THERAPEUTIC CLASSES
penicillin vk tab (VEETIDS equiv)	-	1	PENICILLINS
PENICILLN VK SOLN	-	1	PENICILLINS
PENICILLN VK SOLN 125MG/5ML	-	NC	PENICILLINS
PENICILLN VK SOLN 250MG/5ML	-	NC	PENICILLINS
PENLAC SOLN	-	NC	DERMATOLOGICALS
PENMENVY INJ	VAC	$0	VACCINES
PENNSAID SOLN	-	NC	DERMATOLOGICALS
PENTACEL INJ	VAC	$0	TOXOIDS
pentamidine neb soln (NEBUPENT equiv)	-	2	ANTI-INFECTIVE AGENTS - MISC.
PENTASA CR CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
PENTAZOCINE/NALOXONE TAB	-	3	ANALGESICS - OPIOID

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pentazocine/naloxone tab (TALWIN NX equiv)	-	3	ANALGESICS - OPIOID
PENTOSAN CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
pentoxifylline ER tab (TRENTAL equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
PEPCID SUSP	-	NC	ULCER DRUGS
PEPCID TAB	-	NC	ULCER DRUGS
perampanel susp (FYCOMPA equiv)	-	NC	ANTICONVULSANTS
perampanel tab (FYCOMPA equiv)	-	NC	ANTICONVULSANTS
PERCOCET TAB	-	NC	ANALGESICS - OPIOID
PERFOROMIST NEB SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
PERIDEX SOLN	-	NC	MOUTH/THROAT/DENTAL AGENTS
PERINDOPRIL TAB	-	1	ANTIHYPERTENSIVES
perindopril tab (ACEON equiv)	-	1	ANTIHYPERTENSIVES
permethrin cream (ELIMITE CREAM equiv)	-	1	DERMATOLOGICALS
perphenazine tab (TRILAFON equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PERPHENAZINE/ AMITRIPTYLINE TAB	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
PERSERIS INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PEXEVA TAB	-	NC	ANTIDEPRESSANTS
PHEBURANE ORAL PELLETS	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
PHENAZOPYRIDINE TAB	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
phenazopyridine tab (PYRIDIUM equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
PHENDIMETRAZINE ER TAB	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
phendimetrazine tab (BONTRIL PDM equiv)	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
PHENELZINE SULFATE TAB	-	1	ANTIDEPRESSANTS
phenelzine tab (NARDIL equiv)	-	1	ANTIDEPRESSANTS
phenobarbital elixir	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL ELXIR	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
phenobarbital tab	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 100MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 15MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 16.2MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 30MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 32.4MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 60MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS

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PHENOBARBITAL TAB 64.8MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
PHENOBARBITAL TAB 97.2MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
phenoxybenzamine cap (DIBENZYLINE equiv)	-	2	ANTIHYPERTENSIVES
phenylephrine ophth soln (MYDFRIN equiv)	-	1	OPHTHALMIC AGENTS
phenytoin cap (DILANTIN equiv)	-	1	ANTICONVULSANTS
phenytoin chew tab (DILANTIN equiv)	-	2	ANTICONVULSANTS
phenytoin susp (DILANTIN equiv)	-	1	ANTICONVULSANTS
PHEXXI GEL (QL= 1 box/fill)	QL	$0	VAGINAL AND RELATED PRODUCTS
PHOSLO CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
PHOSPHA 250 NEUTRAL TAB	-	1	MINERALS & ELECTROLYTES
PHOSPHOLINE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PHOSPHO-TRIN K500 TAB	-	2	MINERALS & ELECTROLYTES
PHOTREXA OP KIT	-	NC	OPHTHALMIC AGENTS
PHYRAGO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
phytonadione tab (MEPHYTON equiv)	-	2	VITAMINS
PIFELTRO TAB	-	2	ANTIVIRALS
pilocarpine hcl ophth soln 1.25% (VUITY equiv)	-	NC	OPHTHALMIC AGENTS
pilocarpine ophth soln (ISOPTO CARPINE equiv)	-	1	OPHTHALMIC AGENTS
pilocarpine tab (SALAGEN equiv)	-	1	MOUTH/THROAT/DENTAL AGENTS
pimecrolimus cream (ELIDEL equiv)	PA	2	DERMATOLOGICALS
pimozide tab (ORAP equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
pindolol tab (VISKEN equiv)	-	1	BETA BLOCKERS
pioglitazone tab (ACTOS equiv)	-	1	ANTIDIABETICS
pioglitazone/glimepiride tab (DUETACT equiv)	-	NC	ANTIDIABETICS
pioglitazone/metformin tab (ACTOPLUS MET equiv)	-	NC	ANTIDIABETICS
PIQRAY TAB	PA-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
pirfenidone cap (ESBRIET equiv) (QL= 9 caps/day)	PA-QL-SP	1	RESPIRATORY AGENTS - MISC.
PIRFENIDONE TAB	-	NC	RESPIRATORY AGENTS - MISC.
pirfenidone tab 267mg (ESBRIET equiv) (QL= 9 tabs/day)	PA-QL-SP	1	RESPIRATORY AGENTS - MISC.
pirfenidone tab 801mg (ESBRIET equiv) (QL= 3 tabs/day)	PA-QL-SP	1	RESPIRATORY AGENTS - MISC.
piroxicam cap (FELDENE equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
pitavastatin calcium tab (LIVALO equiv)	-	NC	ANTIHYPERLIPIDEMICS
PIVOT INSULIN PUMP STARTER KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
PIVOT SUPPLY KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
PIVYA TAB	-	NC	PENICILLINS
PLAN B TAB	OTC	EXC	CONTRACEPTIVES
PLAQUENIL TAB	-	NC	ANTIMALARIALS
PLAVIX TAB 300MG	-	NC	HEMATOLOGICAL AGENTS - MISC.
PLAVIX TAB 75MG	-	NC	HEMATOLOGICAL AGENTS - MISC.
PLEGRIDY INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
PLEGRIDY PEN INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

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PLENITY CAP	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
PLENVU SOLN	-	NC	LAXATIVES
PLEXION CREAM 9.8-4.8%	-	NC	DERMATOLOGICALS
PLIAGLIS CREAM	-	NC	DERMATOLOGICALS
PLIAGLIS KIT	-	NC	DERMATOLOGICALS
PNEUMOVAX INJ	VAC	$0	VACCINES
PNV PRENATOL TAB 27-1 MG	-	NC	MULTIVITAMINS
PODIAPN CAP	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
PODOCON SOLN	-	2	DERMATOLOGICALS
podofilox gel (CONDYLOX equiv)	-	3	DERMATOLOGICALS
PODOFILOX SOLN	-	2	DERMATOLOGICALS
podofilox soln (CONDYLOX equiv)	-	2	DERMATOLOGICALS
POKONZA ORAL SOLN	-	NC	MINERALS & ELECTROLYTES
POKONZA POWDER	-	NC	MINERALS & ELECTROLYTES
POLYETHYLENE GLYCOL 8000 GRANULES	-	2	PHARMACEUTICAL ADJUVANTS
POLY-IRON CAP 150 FORTE	-	1	HEMATOPOIETIC AGENTS
polymyxin b/trimethoprim ophth soln (POLYTRIM equiv)	-	1	OPHTHALMIC AGENTS
POLYTRIM OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
POLY-TUSSIN DM SYRUP	-	NC	COUGH/COLD/ALLERGY
POLY-VI-FLOR SUSP	-	NC	MULTIVITAMINS
pomalidomide cap (POMALYST equiv) (QL= 21 caps/28 days)	PA-QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
POMALYST CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PONVORY TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
PONVORY TAB STARTER PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
posaconazole DR tab (NOXAFIL equiv)	-	3	ANTIFUNGALS
posaconazole susp (NOXAFIL equiv)	-	3	ANTIFUNGALS
potassium bicarbonate effer tab (K-LYTE equiv)	-	1	MINERALS & ELECTROLYTES
potassium chloride ER cap (MICRO-K equiv)	-	1	MINERALS & ELECTROLYTES
potassium chloride ER tab (K-TAB equiv)	-	1	MINERALS & ELECTROLYTES
potassium chloride micro tab (K-DUR equiv)	-	1	MINERALS & ELECTROLYTES
potassium chloride powder packet (KLOR-CON equiv)	-	2	MINERALS & ELECTROLYTES
potassium chloride soln	-	2	MINERALS & ELECTROLYTES
POTASSIUM CHLORIDE TAB ER	-	1	MINERALS & ELECTROLYTES
potassium citrate CR tab (UROCIT-K equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
potassium citrate/citric acid powder pack (POLYCITRA equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
POTASSIUM IODIDE ORAL SOLN	-	NC	COUGH/COLD/ALLERGY
PRADAXA CAP	-	NC	ANTICOAGULANTS
PRADAXA PELLET PACK	-	NC	ANTICOAGULANTS
pralatrexate iv inj (FOLOTYN equiv)	-	NC/3P	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
pramipexole ER tab (MIRAPEX ER equiv)	-	3	ANTIPARKINSON AGENTS

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pramipexole tab (MIRAPEX equiv)	-	1	ANTIPARKINSON AGENTS
PRAMOSONE CREAM 1-1%	-	NC	DERMATOLOGICALS
PRAMOSONE CREAM 1-2.5%	-	NC	DERMATOLOGICALS
PRAMOSONE LOTION	-	NC	DERMATOLOGICALS
PRAMOSONE OINT	-	NC	DERMATOLOGICALS
PRANDIMET TAB	-	NC	ANTIDIABETICS
prasugrel tab (EFFIENT equiv)	-	1	HEMATOLOGICAL AGENTS - MISC.
pravastatin tab (PRAVACHOL equiv)	-	$0	ANTIHYPERLIPIDEMICS
praziquantel tab (BILTRICIDE equiv)	-	2	ANTHELMINTICS
prazosin cap (MINIPRESS equiv)	-	1	ANTIHYPERTENSIVES
PRECISION XTRA KETONE TEST STRIP	OTC	NC	DIAGNOSTIC PRODUCTS
PRECISION XTRA METER	OTC	$0	MEDICAL DEVICES AND SUPPLIES
PRECISION XTRA TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0	DIAGNOSTIC PRODUCTS
PRECOSE TAB	-	NC	ANTIDIABETICS
PRED FORTE OPHTH SUSP	-	3	OPHTHALMIC AGENTS
PRED FORTE OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PRED MILD OPHTH SOLN	-	2	OPHTHALMIC AGENTS
prednisolone acetate ophth susp (PRED FORTE equiv)	-	1	OPHTHALMIC AGENTS
prednisolone ODT (ORAPRED equiv)	-	2	CORTICOSTEROIDS
PREDNISOLONE OPHTH SUSP	-	1	OPHTHALMIC AGENTS
PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN	-	1	OPHTHALMIC AGENTS
prednisolone soln	-	1	CORTICOSTEROIDS
prednisolone soln (PEDIAPRED equiv)	-	1	CORTICOSTEROIDS
PREDNISOLONE SOLN	-	3	CORTICOSTEROIDS
prednisolone tab (MILLIPRED equiv)	-	NC	CORTICOSTEROIDS
PREDNISOLONE/MOXIFLOXACIN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/KETOROLAC OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/MOXIFLOXACIN/NEPAFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISOLONE/NEPAFENAC OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
PREDNISONE DR TAB	-	NC	CORTICOSTEROIDS
PREDNISONE DR TAB, RAYOS DR TAB	-	NC	CORTICOSTEROIDS
prednisone pack	-	NC	CORTICOSTEROIDS
PREDNISONE SOLN	-	2	CORTICOSTEROIDS
prednisone tab (DELTASONE equiv)	-	1	CORTICOSTEROIDS
PREDNISONE/DIPHENHYDRAMINE KIT	-	NC	CORTICOSTEROIDS
pregabalin cap (LYRICA equiv) (QL= 3 caps/day)	QL	1	ANTICONVULSANTS
pregabalin cap 225mg (LYRICA equiv) (QL= 2 caps/day)	QL	1	ANTICONVULSANTS
pregabalin cap 300mg (LYRICA equiv) (QL= 2 caps/day)	QL	1	ANTICONVULSANTS
pregabalin ER tab (LYRICA CR equiv)	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
pregabalin soln (LYRICA equiv) (QL= 30ml/day)	QL	2	ANTICONVULSANTS
PREGEN DHA CAP	-	NC	MULTIVITAMINS
PREGENNA TAB	-	NC	MULTIVITAMINS
PREHEVBRIO SUSP	VAC	$0	VACCINES
PREMARIN TAB	-	3	ESTROGENS
PREMARIN VAGINAL CREAM	-	2	VAGINAL PRODUCTS

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PREMPHASE TAB, PREMPRO TAB	-	2	ESTROGENS
PRENARA CAP	-	NC	MULTIVITAMINS
PRENATABS RX TAB	-	1	MULTIVITAMINS
PRENATAL 19 CHEW TAB	-	1	MULTIVITAMINS
PRENATAL 19 TAB	-	1	MULTIVITAMINS
PRENATAL VITAMINS (NON-PREFERRED)	-	3	MULTIVITAMINS
PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	-	1	MULTIVITAMINS
PRENATE MAX TAB	-	NC	MULTIVITAMINS
PRENATOL-M TAB 27-1.2MG	-	NC	MULTIVITAMINS
PRENATRIX TAB	-	NC	MULTIVITAMINS
PRENATRYL TAB	-	NC	MULTIVITAMINS
PRESTALIA TAB	-	NC	ANTIHYPERTENSIVES
PRETOMANID TAB (QL= 1 tab/day)	PA-QL	2	ANTIMYCOBACTERIAL AGENTS
PREVACID CAP	-	NC	ULCER DRUGS
PREVIDENT 5000 PASTE 1.1%	-	NC	MOUTH/THROAT/DENTAL AGENTS
PREVIDENT 5000 PLUS 1.1%	-	NC	MOUTH/THROAT/DENTAL AGENTS
PREVIDENT GEL	-	NC	MOUTH/THROAT/DENTAL AGENTS
PREVIDENT SOLN 0.2%	-	NC	MOUTH/THROAT/DENTAL AGENTS
PREVNAR 20 INJ	VAC	$0	VACCINES
PREVYMIS PAK (QL= 4 packets/day; Limit 800 packets/365 days)	PA-QL-SP	4	ANTIVIRALS
PREVYMIS TAB (QL= 1 tab/day; Limit 200 tabs/365 days)	PA-QL-SP	4	ANTIVIRALS
PREZCOBIX TAB	-	2	ANTIVIRALS
PREZISTA SUSP	-	2	ANTIVIRALS
PREZISTA TAB	-	2	ANTIVIRALS
PREZISTA TAB	-	NC	ANTIVIRALS
PRIFTIN TAB	-	2	ANTIMYCOBACTERIAL AGENTS
PRILOSEC CAP	-	NC	ULCER DRUGS
primaquine tab (PRIMAQUINE equiv)	-	1	ANTIMALARIALS
PRIMAQUINE TAB	-	NC	ANTIMALARIALS
primidone tab (MYSOLINE equiv)	-	1	ANTICONVULSANTS
PRIMIDONE TAB	-	NC	ANTICONVULSANTS
PRIMLEV TAB 10-300MG	-	NC	ANALGESICS - OPIOID
PRIMLEV TAB 5-300MG	-	NC	ANALGESICS - OPIOID
PRINIVIL TAB, ZESTRIL TAB	-	NC	ANTIHYPERTENSIVES
PRIORIX INJ	VAC	$0	VACCINES
PRISTIQ TAB	-	NC	ANTIDEPRESSANTS
probenecid tab (BENEMID equiv)	-	1	GOUT AGENTS
prochlorperazine supp (COMPAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
prochlorperazine tab (COMPAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PROCRIT INJ	-	NC	HEMATOPOIETIC AGENTS
PROCTOCORT CREAM	-	NC	DERMATOLOGICALS
PROCTOCORT SUPP	-	NC	ANORECTAL AND RELATED PRODUCTS
PROCTOFOAM HC FOAM	-	2	ANORECTAL AGENTS
proctosol HC cream (ANUSOL HC equiv)	-	1	ANORECTAL AGENTS
PROCYSBI CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PROCYSBI GRANULES PACKET	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PRODRIN TAB	-	NC	MIGRAINE PRODUCTS

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Drug Name	Special Code	Tier	Category
PROFILNINE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
PROFINAC PAK	-	NC	DERMATOLOGICALS
progesterone cap (PROMETRIUM equiv)	-	1	PROGESTINS
progesterone oil inj	-	1	PROGESTINS
PROGESTERONE SUPP	PA	3	VAGINAL PRODUCTS
progesterone vaginal insert (ENDOMETRIN equiv)	PA	2	VAGINAL AND RELATED PRODUCTS
PROGLYCEM SUSP	-	NC	ANTIDIABETICS
PROGRAF CAP	-	NC	ASSORTED CLASSES
PROGRAF PACKET	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
PROLATE TAB 7.5-300MG	-	NC	ANALGESICS - OPIOID
PROLENSA OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
PROMACTA POWDER	-	NC	HEMATOPOIETIC AGENTS
PROMACTA TAB 12.5MG, 25MG	-	NC	HEMATOPOIETIC AGENTS
promethazine DM syrup	-	1	COUGH/COLD/ALLERGY
promethazine supp (PHENERGAN equiv)	-	2	ANTIHISTAMINES
promethazine syrup	-	1	ANTIHISTAMINES
promethazine tab (PHENERGAN equiv)	-	1	ANTIHISTAMINES
PROMETHAZINE VC SYRUP	-	1	COUGH/COLD/ALLERGY
promethazine VC syrup (PHENERGAN VC equiv)	-	1	COUGH/COLD/ALLERGY
PROMETHAZINE VC/CODEINE SYRUP	-	NC	COUGH/COLD/ALLERGY
promethazine VC/codeine syrup (PHENERGAN VC/CODEINE equiv)	-	NC	COUGH/COLD/ALLERGY
promethazine/codeine syrup (PHENERGAN/CODEINE equiv)	-	NC	COUGH/COLD/ALLERGY
PROMETHEGAN SUPP	-	2	ANTIHISTAMINES
PROMETRIUM CAP	-	NC	PROGESTINS
PROMISEB CREAM	-	NC	DERMATOLOGICALS
propafenone ER cap (RYTHMOL SR equiv)	-	2	ANTIARRHYTHMICS
propafenone tab (RYTHMOL equiv)	-	1	ANTIARRHYTHMICS
proparacaine ophth soln (ALCAINE equiv)	-	1	OPHTHALMIC AGENTS
propranolol ER cap (INDERAL LA equiv)	-	1	BETA BLOCKERS
propranolol hcl oral soln 20mg/5ml	-	1	BETA BLOCKERS
PROPRANOLOL SOLN	-	1	BETA BLOCKERS
PROPRANOLOL SOLN 20MG/5ML	-	1	BETA BLOCKERS
propranolol tab (INDERAL equiv)	-	1	BETA BLOCKERS
propylthiouracil tab	-	1	THYROID AGENTS
PROQUAD INJ	VAC	$0	VACCINES
PROQUIN XR TAB	-	NC	FLUOROQUINOLONES
PROSCAR TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PROSED DS TAB	-	NC	URINARY ANTI-INFECTIVES
PROTHELIAL PASTE	-	NC	MOUTH/THROAT/DENTAL AGENTS
PROTONIX EC TAB	-	NC	ULCER DRUGS
PROTOPIC OINT	-	NC	DERMATOLOGICALS
protriptyline tab (VIVACTIL equiv)	-	3	ANTIDEPRESSANTS
PROVERA TAB	-	NC	PROGESTINS
PROVIGIL TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
PROZAC CAP	-	NC	ANTIDEPRESSANTS
PROZAC WEEKLY CAP	-	NC	ANTIDEPRESSANTS
PROZENA PAD	-	NC	DERMATOLOGICALS

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prucalopride succinate tab (MOTEGRITY equiv) (QL= 1 tab/day)	QL	1	GASTROINTESTINAL AGENTS - MISC.
PULMICORT FLEXHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
PULMICORT INH SUSP	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
PULMOZYME INH SOLN	SP	4	RESPIRATORY AGENTS - MISC.
PUREFOLIX TAB	-	NC	HEMATOPOIETIC AGENTS
PYLERA CAP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
pyrazinamide tab	-	1	ANTIMYCOBACTERIAL AGENTS
PYRIDIUM TAB 100MG	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
PYRIDIUM TAB 200MG	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
pyridostigmine CR tab (MESTINON equiv)	-	2	ANTIMYASTHENIC/CHOLINERGIC AGENTS
pyridostigmine tab (MESTINON equiv)	-	1	ANTIMYASTHENIC/CHOLINERGIC AGENTS
PYRIDOSTIGMINE TAB 30MG	-	NC	ANTIMYASTHENIC/CHOLINERGIC AGENTS
pyridstigmine soln (MESTINON equiv)	-	3	ANTIMYASTHENIC/CHOLINERGIC AGENTS
pyrimethamine tab (DARAPRIM equiv) (QL= 3 tabs/day)	QL-SP	1	ANTIMALARIALS
PYRIMETHAMINE/LEUCOVORIN CAP	-	NC	ANTIMALARIALS
PYRUKYND TAB (QL= 2 tabs/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
PYRUKYND TAPER PACK (QL= 1 tab/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
PYZCHIVA INJ	-	NC	DERMATOLOGICALS
QBRELIS SOLN (Prior Authorization required for members age 9 years and older)	PA	3	ANTIHYPERTENSIVES
QBREXZA PAD	-	NC	DERMATOLOGICALS
QDOLO SOLN, TRAMADOL SOLN	-	NC	ANALGESICS - OPIOID
QELBREE ER CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
QFITLIA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
QINLOCK TAB (QL= 3 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
QLOSI OPHTH SOLN, VUITY OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
QMIIZ ODT TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
QNASL NASAL SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
QTERN TAB	-	NC	ANTIDIABETICS
QUALAQUIN CAP	-	NC	ANTIMALARIALS
QUAZEPAM TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEF AGENTS
QUDEXY XR CAP	-	NC	ANTICONVULSANTS
QUESTRAN LITE POWDER	-	NC	ANTIHYPERLIPIDEMICS
QUESTRAN POWDER	-	NC	ANTIHYPERLIPIDEMICS
QUESTRAN POWDER PACK	-	NC	ANTIHYPERLIPIDEMICS
quetiapine tab (SEROQUEL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
QUETIAPINE TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
quetiapine XR tab (SEROQUEL XR equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
QUILLICHEW ER TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS

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QUILLIVANT XR SUSP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
quinapril tab (ACCUPRIL equiv)	-	1	ANTIHYPERTENSIVES
QUINAPRIL/HCTZ TAB	-	NC	ANTIHYPERTENSIVES
quinapril/hydrochlorothiazide tab (ACCURETIC equiv)	-	NC	ANTIHYPERTENSIVES
quinidine gluconate CR tab	-	2	ANTIARRHYTHMICS
quinidine sulfate tab	-	1	ANTIARRHYTHMICS
QUINIDINE SULFATE TAB	-	NC	ANTIARRHYTHMICS
quinine sulfate cap (QUALAQUIN equiv)	-	NC	ANTIMALARIALS
QUINIXIL PAK	-	NC	DERMATOLOGICALS
QUIOFIC SOLN	-	NC	HEMATOPOIETIC AGENTS
QULIPTA TAB	-	NC	MIGRAINE PRODUCTS
QUVIVIQ TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
QVAR AERO	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
QVAR REDIHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
RABAVERT INJ	VAC	$0	VACCINES
rabeprazole EC tab (ACIPHEX equiv)	-	1	ULCER DRUGS
RAGWITEK SL TAB	-	NC	BIOLOGICALS MISC
RALDESY SOLN	-	NC	ANTIDEPRESSANTS
raloxifene tab (EVISTA equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0	ENDOCRINE AND METABOLIC AGENTS - MISC.
ramelteon tab (ROZEREM equiv) (QL= 1 tab/day)	QL	2	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
ramipril cap (ALTACE equiv)	-	1	ANTIHYPERTENSIVES
RANEXA TAB	-	NC	ANTIANGINAL AGENTS
RANITIDINE TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINER CS
ranolazine tab (RANEXA equiv)	-	1	ANTIANGINAL AGENTS
RAPAFLO CAP	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
RAPAMUNE SOLN	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
RAPAMUNE TAB	-	NC	ASSORTED CLASSES
rasagiline tab (AZILECT equiv)	-	2	ANTIPARKINSON AGENTS
RASONQUE TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RAVICTI LIQUID	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
RAYALDEE CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
RAZADYNE SOLN	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
RAZADYNE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
REBIF INJ	SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
REBINYN INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.

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RECOMBINATE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
RECORLEV TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
RECTIV OINT	-	NC	ANORECTAL AND RELATED PRODUCTS
REDEMPLO PFS INJ (QL = 1 inj/84 days)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
REDITREX INJ	-	NC	ANALGESICS - ANTI-INFLAMMATORY
REGLAN TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELAFEN DS TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
RELENZA DISKHALER (QL= 1 inhaler/fill)	QL	2	ANTIVIRALS
RELEUKO INJ	-	NC	HEMATOPOIETIC AGENTS
RELEUKO PREFILLED SYRINGE INJ	-	NC	HEMATOPOIETIC AGENTS
RELEVIA TAB 27-1MG	-	NC	MULTIVITAMINS
RELEXXI ER TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
RELISTOR INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELISTOR INJ KIT	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELISTOR TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
RELPAX TAB	-	NC	MIGRAINE PRODUCTS
RELTONE CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
REMERON SOLUTAB	-	NC	ANTIDEPRESSANTS
REMERON TAB	-	NC	ANTIDEPRESSANTS
RENACIDIN SOLN	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
RENAGEL TAB 800MG	-	NC	GASTROINTESTINAL AGENTS - MISC.
renaphro cap (NEPHROCAP equiv)	-	NC	MULTIVITAMINS
RENOVA CREAM	-	EXC	DERMATOLOGICALS
RENVELA PAK	-	NC	GASTROINTESTINAL AGENTS - MISC.
RENVELA TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
repaglinide tab (PRANDIN equiv)	-	1	ANTIDIABETICS
REPATHA INJ (QL= 2 inj/28 days; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2	ANTIHYPERLIPIDEMICS
REQUIP TAB	-	NC	ANTIPARKINSON AGENTS
REQUIP XL TAB	-	NC	ANTIPARKINSON AGENTS
RESERVAPAK SYRUP	-	NC	ALTERNATIVE MEDICINES
RESTASIS OPHTH EMULSION	-	NC	OPHTHALMIC AGENTS
RESTORIL CAP 15MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
RESTORIL CAP 22.5MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
RESTORIL CAP 30MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
RESTORIL CAP 7.5MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
RETACRIT INJ	-	2	HEMATOPOIETIC AGENTS
RETEVMO CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RETEVMO CAP 40MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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RETEVMO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RETEVMO TAB 40MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RETIN-A CREAM (Acne Only - Prior Authorization required for members age 26 years and older)	PA	1	DERMATOLOGICALS
RETIN-A GEL (Acne Only - Prior Authorization required for members age 26 years and older)	PA	1	DERMATOLOGICALS
RETIN-A MICRO GEL/GEL PUMP	-	NC	DERMATOLOGICALS
RETIN-A MICRO GEL/GEL PUMP, TRETINOIN MICROSPHERE GEL/GEL PUI	-	NC	DERMATOLOGICALS
RETROVIR CAP	-	NC	ANTIVIRALS
RETROVIR SYRUP	-	NC	ANTIVIRALS
RETROVIR TAB	-	NC	ANTIVIRALS
REVATIO SUSP	-	NC	CARDIOVASCULAR AGENTS - MISC.
REVATIO TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
REVLIMID CAP	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
REVUFORJ TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
REVUFORJ TAB 110MG (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
REVUFORJ TAB 25MG (QL= 8 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
REXAPHENAC CREAM	-	NC	DERMATOLOGICALS
REXASIL KIT	-	NC	DERMATOLOGICALS
REXULTI TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
REYATAZ CAP	-	NC	ANTIVIRALS
REYATAZ POWDER PACK	-	2	ANTIVIRALS
REYVOW TAB (QL= 8 tabs/30 days, 6 fills/year)	PA-QL	2	MIGRAINE PRODUCTS
REZDIFFRA TAB (QL= 1 tab/day)	PA-QL	2	GASTROINTESTINAL AGENTS - MISC.
REZENOPY SPRAY 10MG/0.11ML	-	NC	ANTIDOTES AND SPECIFIC ANTAGONISTS
REZLIDHIA CAP (QL= 2 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
REZUROCK TAB (QL= 1 tab/day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
REZVOGLAR INJ	-	NC	ANTIDIABETICS
REZYST CHEW TAB	-	NC	ANTIDIARRHEALS
RHAPSIDO TAB	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
RHOFADE CREAM	-	EXC	DERMATOLOGICALS
RHOPRESSA OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
RIASTAP INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
ribavirin cap (REBETOL equiv) (Restricted to Infectious Disease or Pulmonology Specialist)	RS-SP	1	ANTIVIRALS
RIBAVIRIN CAP	SP	4	ANTIVIRALS
RIBAVIRIN INH	-	NC	ANTIVIRALS
ribavirin inh soln (VIRAZOLE equiv)	-	NC	ANTIVIRALS
RIBAVIRIN TAB	SP	4	ANTIVIRALS
rifabutin cap (MYCOBUTIN equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
RIFADIN CAP	-	NC	ANTIMYCOBACTERIAL AGENTS
rifampin cap (RIFADIN equiv)	-	2	ANTIMYCOBACTERIAL AGENTS
rifapentine tab (PRIFTIN equiv)	-	2	ANTIMYCOBACTERIAL AGENTS

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Drug Name	Special Code	Tier	Category
rilpivirine hcl tab (EDURANT equiv)	-	2	ANTIVIRALS
RILUTEK TAB	-	NC	NEUROMUSCULAR AGENTS
riluzole tab (RILUTEK equiv)	-	2	NEUROMUSCULAR AGENTS
RIMANTADINE TAB	-	3	ANTIVIRALS
RINVOQ ER TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
RINVOQ ORAL SOLN	-	NC	ANALGESICS - ANTI-INFLAMMATORY
RIOMET SOLN	-	NC	ANTIDIABETICS
risedronate DR tab (ATELVIA equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
risedronate tab (ACTONEL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
RISPERDAL M ODT	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
RISPERDAL SOLN	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
RISPERDAL TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone microspheres inj (RISPERDAL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
RISPERIDONE ODT	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone ODT (RISPERDAL M equiv)	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone soln (RISPERDAL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
risperidone tab (RISPERDAL equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
RITALIN LA CAP, APTENSIO XR CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
RITALIN TAB	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ritonavir tab (NORVIR equiv)	-	2	ANTIVIRALS
rivaroxaban for susp (XARELTO equiv)	-	1	ANTICOAGULANTS
rivaroxaban tab 2.5mg (XARELTO equiv) (QL= 2 tabs/day)	QL	1	ANTICOAGULANTS
rivastigmine cap (EXELON equiv)	-	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
rivastigmine patch (EXELON equiv)	-	2	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
RIVFLOZA INJ	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
RIVFLOZA INJ 160MG	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
RIVFLOZA VIAL	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
RIVIVE, REXTOVY SPRAY	OTC	1	ANTIDOTES AND SPECIFIC ANTAGONISTS
RIXUBIS INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
RIZAFILM MIS	-	NC	MIGRAINE PRODUCTS
rizatriptan ODT (MAXALT equiv) (QL= 12 tabs/fill, 3 fills/60 days)	QL	1	MIGRAINE PRODUCTS
rizatriptan tab (MAXALT equiv) (QL= 12 tabs/fill, 3 fills/60 days)	QL	1	MIGRAINE PRODUCTS
ROAOXIA GEL	-	NC	DERMATOLOGICALS
ROBAXIN TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
ROBINUL TAB	-	NC	ULCER DRUGS
ROCALTROL CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ROCALTROL SOLN	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ROCKLATAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS

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Drug Name	Special Code	Tier	Category
roflumilast tab	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ROMVIMZA CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ropinirole ER tab (REQUIP XL equiv)	-	2	ANTIPARKINSON AGENTS
ropinirole tab (REQUIP equiv)	-	1	ANTIPARKINSON AGENTS
ROPIVICAINE/CLONIDINE/KETOROLAC INJ	-	NC	LOCAL ANESTHETICS-PARENTERAL
ROSADAN KIT	-	NC	DERMATOLOGICALS
ROSULA EMULSION	-	NC	DERMATOLOGICALS
rosuvastatin tab (CRESTOR equiv)	-	$0	ANTIHYPERLIPIDEMICS
ROSZET TAB	-	NC	ANTIHYPERLIPIDEMICS
ROSZET TAB, EZETIMIBE/ROSUVASTATIN TAB	-	NC	ANTIHYPERLIPIDEMICS
ROTARIX SUSP	VAC	$0	VACCINES
ROTATEQ INJ	VAC	$0	VACCINES
ROWASA KIT	-	NC	GASTROINTESTINAL AGENTS - MISC.
ROXICET SOLN	-	NC	ANALGESICS - OPIOID
ROXICODONE TAB	-	NC	ANALGESICS - OPIOID
ROXYBOND TAB	-	NC	ANALGESICS - OPIOID
ROZEREM TAB	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ROZLYTREK CAP (QL= 3 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ROZLYTREK PAK (QL= 6 packs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RUBRACA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RUCONEST INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
rufinamide susp (BANZEL equiv) (Prior Authorization required for members age 9 years and older)	PA	2	ANTICONVULSANTS
rufinamide tab (BANZEL equiv)	-	2	ANTICONVULSANTS
RYALTRIS SPRAY	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
RYBIX ODT	-	NC	ANALGESICS - OPIOID
RYDAPT CAP (QL= 56 caps/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RYTHMOL SR CAP	-	NC	ANTIARRHYTHMICS
SABRIL TAB	-	NC	ANTICONVULSANTS
sacubitril-valsartan tab (ENTRESTO equiv) (QL= 2 tabs/day)	QL	1	CARDIOVASCULAR AGENTS - MISC.
SAFYRAL TAB	-	$0	CONTRACEPTIVES
SAIZEN INJ, SEROSTIM INJ, ZORBTIVE INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
SALAGEN TAB	-	NC	MOUTH/THROAT/DENTAL AGENTS
SALEX LOTION KIT	-	NC	DERMATOLOGICALS
SALEX SHAMPOO	-	NC	DERMATOLOGICALS
SALICATE LIQUID	-	NC	DERMATOLOGICALS
SALICYLIC AC SOLN ER, XALIX SOLN	-	NC	DERMATOLOGICALS
SALIMEZ FORTE CREAM	-	NC	DERMATOLOGICALS
SALSALATE TAB	-	NC	ANALGESICS - NONNARCOTIC
salsalate tab (DISALCID equiv)	-	NC	ANALGESICS - NONNARCOTIC
SANCUSO PATCH (QL= 4 patches/fill)	QL	3	ANTIEMETICS

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Drug Name	Special Code	Tier	Category
SANDIMMUNE CAP	-	NC	ASSORTED CLASSES
SANDIMMUNE SOLN 100MG/ML	-	2	ASSORTED CLASSES
SANTYL OINT (QL= 90gm/30 days)	QL	2	DERMATOLOGICALS
SAPHNELO INJ	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
SAPHNELO PEN INJ	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
SAPHRIS SL TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
sapropterin dihydrochloride powder packet (KUVAN equiv)	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
sapropterin dihydrochloride soluble tab (KUVAN equiv)	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SARAFEM TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SAVAYSA TAB	-	NC	ANTICOAGULANTS
SAVELLA PAK	-	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SAVELLA TAB (QL= 2 tabs/day)	QL	3	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
saxagliptin hcl tab (ONGLYZA equiv)	-	NC	ANTIDIABETICS
saxagliptin-metformin hcl tab er 24hr (KOMBIGLYZE equiv)	-	NC	ANTIDIABETICS
SAXENDA INJ	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
SCARCIN GEL	-	NC	DERMATOLOGICALS
SCARCIN LIQUID ROLL-ON	-	NC	DERMATOLOGICALS
SCEMBLIX TAB (QL= 2 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SCEMBLIX TAB 100 MG (QL= 4 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
scopolamine patch (TRANSDERM-SCOP equiv)	-	2	ANTIEMETICS
SDAMLO SOLN	-	NC	CALCIUM CHANNEL BLOCKERS
SEASONIQUE TAB	-	NC	CONTRACEPTIVES
SECUADO PATCH	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
SEGLENTIS TAB	-	NC	ANALGESICS - OPIOID
SEGLUROMET TAB	-	NC	ANTIDIABETICS
SELARSDI INJ	-	NC	DERMATOLOGICALS
SELARSDI SYRINGE (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
SELARSDI SYRINGE 90MG/ML (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
selegiline cap (ELDEPRYL equiv)	-	1	ANTIPARKINSON AGENTS
selegiline tab (ELDEPRYL equiv)	-	1	ANTIPARKINSON AGENTS
SELENIUM SUL SHA	-	2	DERMATOLOGICALS
SELENIUM SUL SHA 2%	-	NC	DERMATOLOGICALS
SELENIUM SULFIDE LOTION	-	1	DERMATOLOGICALS
selenium sulfide lotion 2.5% (SELSUN equiv)	-	1	DERMATOLOGICALS
selenium sulfide shampoo (SELSEB equiv)	-	2	DERMATOLOGICALS
selenium sulfide shampoo 2.3% (SELRX equiv)	-	NC	DERMATOLOGICALS
SELZENTRY SOLN	-	2	ANTIVIRALS
SELZENTRY TAB	-	NC	ANTIVIRALS
SEMGLEE INJ (SINGLE PEN)	-	NC	ANTIDIABETICS
SEMGLEE INJ, INSULIN GLARGINE-YFGN INJ	-	2	ANTIDIABETICS
SEMGLEE PEN, INSULIN GLARGINE-YFGN PEN	-	2	ANTIDIABETICS

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SEMGLEE SOLN	-	NC	ANTIDIABETICS
SEMPREX-D CAP	-	EXC	COUGH/COLD/ALLERGY
SENSIPAR TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
SEPHIENCE POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
SEREVENT DISKUS INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SERNIVO SPRAY	-	NC	DERMATOLOGICALS
SEROQUEL TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
SEROQUEL XR TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
SERTRALINE CAP	-	NC	ANTIDEPRESSANTS
sertraline conc (ZOLOFT equiv)	-	1	ANTIDEPRESSANTS
sertraline hcl cap	-	NC	ANTIDEPRESSANTS
sertraline tab (ZOLOFT equiv)	-	1	ANTIDEPRESSANTS
sevelamer hydrochloride tab (RENAGEL equiv)	-	NC	GASTROINTESTINAL AGENTS - MISC.
sevelamer powder pak (RENVELA equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
sevelamer tab (RENVELA TAB equiv)	-	2	GASTROINTESTINAL AGENTS - MISC.
SEVENFACT INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
SEYSARA TAB	-	NC	TETRACYCLINES
SHINGRIX INJ (Covered for members age 19 years and older)	VAC	$0	VACCINES
SIGNIFOR INJ (QL= 2 vials/day)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SIKLOS TAB	-	NC	HEMATOPOIETIC AGENTS
SILALITE PAK MIS	-	NC	DERMATOLOGICALS
SILATRIX GEL	-	NC	MOUTH/THROAT/DENTAL AGENTS
sildenafil susp (REVATIO equiv) (Prior Authorization required for members age 9 years and older)	PA	2	CARDIOVASCULAR AGENTS - MISC.
sildenafil tab (VIAGRA equiv) (QL= 6 tabs/30 days)	QL	1	CARDIOVASCULAR AGENTS - MISC.
sildenafil tab 20mg (REVATIO equiv) (QL= 12 tabs/day)	QL	1	CARDIOVASCULAR AGENTS - MISC.
SILIPAC KIT	-	NC	DERMATOLOGICALS
SILIQ INJ	-	NC	DERMATOLOGICALS
silodosin cap (RAPAFLO equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
SILVADENE CREAM	-	NC	DERMATOLOGICALS
silver sulfadiazine cream (SILVADENE CREAM equiv)	-	1	DERMATOLOGICALS
SILVERA PAD	-	NC	DERMATOLOGICALS
SIMBRINZA OPHTH SUSP	-	2	OPHTHALMIC AGENTS
SIMCOR TAB	-	NC	ANTIHYPERLIPIDEMICS
SIMLANDI AUTO-INJECTOR KIT 40MG/0.4 ML (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMLANDI AUTO-INJECTOR KIT 80MG/0.8 ML (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMLANDI INJ (adalimumab-ryvk) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMLANDI KIT (adalimumab-ryvk) (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMPONI AUTO-INJECTOR 100MG (QL=1 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMPONI AUTO-INJECTOR 50MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
SIMPONI INJ 100MG (QL=1 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
SIMPONI INJ 50MG	-	NC	ANALGESICS - ANTI-INFLAMMATORY
simvastatin tab (ZOCOR equiv) (80mg is Not Covered)	-	$0	ANTIHYPERLIPIDEMICS
simvastatin tab 80mg (ZOCOR equiv)	-	NC	ANTIHYPERLIPIDEMICS

Drug Name	Special Code	Tier	Category
SINEMET CR TAB	-	NC	ANTIPARKINSON AGENTS
SINEMET TAB	-	NC	ANTIPARKINSON AGENTS
SINGULAIR CHEW TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SINGULAIR GRANULE PACK	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SINGULAIR TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
sirolimus soln (RAPAMUNE equiv)	-	2	MISCELLANEOUS THERAPEUTIC CLASSES
sirolimus tab (RAPAMUNE equiv)	-	2	ASSORTED CLASSES
SIRTURO TAB	-	NC	ANTIMYCOBACTERIAL AGENTS
sitagliptin phosphate tab (JANUVIA equiv) (QL= 1 tab/day)	QL	2	ANTIDIABETICS
sitagliptin phosphate-metformin hcl er tab (JANUMET equiv) (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
sitagliptin phosphate-metformin hcl tab (JANUMET equiv) (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
SITAGLIPTIN/METFORMIN TAB	-	NC	ANTIDIABETICS
SITAVIG TAB	-	NC	ANTIVIRALS
SITZMARKS CAP	-	NC	DIAGNOSTIC PRODUCTS
SIVEXTRO INJ	-	NC/3P	ANTI-INFECTIVE AGENTS - MISC.
SIVEXTRO TAB (QL= 6 tabs/fill; Restricted to Infectious Disease Specialist)	QL-RS	2	ANTI-INFECTIVE AGENTS - MISC.
SIVEXTRO TAB (QL= 6 tabs/fill; Restricted to Infectious Disease Specialist)	QL-RS	2	ANTI-INFECTIVE AGENTS - MISC.
SKELAXIN TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SKLICE LOTION	-	NC	DERMATOLOGICALS
SKYCLARYS CAP	-	NC	NEUROMUSCULAR AGENTS
SKYRIZI INJ 150MG/ML	-	NC	DERMATOLOGICALS
SKYRIZI INJ 180 MG/1.2ML	-	NC	GASTROINTESTINAL AGENTS - MISC.
SKYRIZI INJ 360MG/2.4ML	-	NC	GASTROINTESTINAL AGENTS - MISC.
SKYRIZI INJ 55MG/0.37ML	-	NC	DERMATOLOGICALS
SKYTROFA INJ	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SLYND TAB	-	$0	CONTRACEPTIVES
smz/tmp (DS) tab (BACTRIM DS equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
smz/tmp susp (BACTRIM, SEPTRA equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
SOAANZ TAB	-	NC	DIURETICS
SOD SUL/SULF LIQ 9-4.5%	-	2	DERMATOLOGICALS
SOD SUL/SULF SUSP 10-5%	-	2	DERMATOLOGICALS
SOD SUL/SULF SUSP 8-4%	-	2	DERMATOLOGICALS
sodium citrate/citric acid soln (BICITRA equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
sodium fluoride chew tab (LURIDE equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0	MINERALS & ELECTROLYTES
sodium fluoride cream (PREVIDENT equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0	MOUTH/THROAT/DENTAL AGENTS
SODIUM FLUORIDE GEL	-	1	MOUTH/THROAT/DENTAL AGENTS
SODIUM FLUORIDE PASTE	-	1	MOUTH/THROAT/DENTAL AGENTS
sodium fluoride soln (LURIDE equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0	MINERALS & ELECTROLYTES
SODIUM FLUORIDE SOLN	-	1	MOUTH/THROAT/DENTAL AGENTS
SODIUM FLUORIDE TAB ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0	MINERALS & ELECTROLYTES

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Drug Name	Special Code	Tier	Category
SODIUM IODIDE I-131 SOLN	-	NC	THYROID AGENTS
sodium oxybate oral soln (XYREM equiv) (QL= 540ml/30 days)	PA-QL-SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SODIUM OXYBATE SOLN (QL= 540ml/30 days)	PA-QL-SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
sodium phenylbutyrate powder (BUPHENYL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
sodium phenylbutyrate tab (BUPHENYL equiv)	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
sodium polystyrene powder (KAYEXALATE equiv)	-	2	ASSORTED CLASSES
sodium polystyrene susp (SPS equiv)	-	1	ASSORTED CLASSES
SODIUM SULFA LIQ WASH	-	2	DERMATOLOGICALS
sodium sulfacetamide lotion (KLARON equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide shampoo (OVACE equiv)	-	NC	DERMATOLOGICALS
sodium sulfacetamide wash (OVACE WASH equiv)	-	2	DERMATOLOGICALS
SODIUM SULFACETAMIDE WASH, OVACE PLUS GEL WASH	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sulfur cleanser 10-5% (SUMAXIN equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur cleanser 9-4.5% (SUMADAN WASH equiv)	-	2	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR CREAM 10-2%	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sulfur emulsion (ROSULA equiv)	-	2	DERMATOLOGICALS
sodium sulfacetamide/sulfur foam (CLARIFOAM EF equiv)	-	3	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR LOTION	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sulfur lotion (SULFACET R equiv)	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sulfur pad (PLEXION CLEANSING CLOTH equiv)	-	NC	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR SUSP	-	NC	DERMATOLOGICALS
SODIUM SULFACETAMIDE/SULFUR WASH	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sulfur wash (SUMAXIN equiv)	-	NC	DERMATOLOGICALS
sodium sulfacetamide/sunscreen kit (SUMADEN XLT equiv)	-	NC	DERMATOLOGICALS
sodium/magnesium/potassium soln (SUPREP equiv) ($0 copay for members age 45-75 years; All other members covered at generic copay; Limited to 2 fills/calendar year)	QL	$0	LAXATIVES
SOFDRA GEL	-	NC	DERMATOLOGICALS
SOFOSBUVIR/VELPATASVIR TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTIVIRALS
SOGROYA INJ	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SOHONOS CAP 1.5MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOHONOS CAP 10MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOHONOS CAP 1MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOHONOS CAP 2.5MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOHONOS CAP 5MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOLAICE PATCH	-	NC	DERMATOLOGICALS
SOLARAVIX PAK	-	NC	DERMATOLOGICALS
solifenacin tab (VESICARE equiv)	-	1	URINARY ANTISPASMODICS
SOLIQUA INJ (QL= 15ml/25 days)	QL	2	ANTIDIABETICS
SOLOSEC GRANULES PACKET (QL= 1 packet/fill)	PA-QL	3	AMEBICIDES
SOLU-CORTEF INJ (QL= 1 vial/fill)	QL	2	CORTICOSTEROIDS
SOLU-CORTEF INJ 100MG (QL= 2 vials/fill)	QL	3	CORTICOSTEROIDS
SOLU-MEDROL INJ	-	NC	CORTICOSTEROIDS
SOLU-MEDROL INJ 2GM	-	2	CORTICOSTEROIDS

Drug Name	Special Code	Tier	Category
SOLU-MEDROL PF INJ	-	3	CORTICOSTEROIDS
SOMA TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOMA TAB 250MG	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SOMAVERT INJ	PA-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
SOOLANTRA CREAM	-	NC	DERMATOLOGICALS
sorafenib tosylate tab (NEXAVAR equiv)	PA-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SORIATANE CAP	-	NC	DERMATOLOGICALS
sotalol AF tab (BETAPACE AF equiv)	-	1	BETA BLOCKERS
sotalol tab (BETAPACE equiv)	-	1	BETA BLOCKERS
SOTYKTU TAB	-	NC	DERMATOLOGICALS
SOTYLIZE SOLN	-	NC	BETA BLOCKERS
SOTYLIZE SOLN 5MG/ML (Prior Authorization required for members age 9 years and older)	PA	3	BETA BLOCKERS
SOVALDI PELLET PAK	-	NC	ANTIVIRALS
SOVALDI TAB	-	NC	ANTIVIRALS
SOVUNA TAB 200MG	-	NC	ANTIMALARIALS
SOVUNA TAB 300MG	-	NC	ANTIMALARIALS
SPEVIGO INJ	-	NC	DERMATOLOGICALS
SPIKEVAX INJ (QL= 1 dose/24 days)	QL-VAC	$0	VACCINES
SPIKEVAX INJ 50MCG/0.5ML (QL= 1 dose/24 days)	QL-VAC	$0	VACCINES
SPINOSAD SUSP (QL= 1 bottle/fill)	QL	2	DERMATOLOGICALS
SPIRIVA HANDIHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT (QL= 1 inhaler/30 days; Step Therapy requires trial of ADVAIR (FLUTICASONE/SALMETEROL), BREO (FLUTICASONE/VILANTEROL), DULERA (MOMETASONE/FORMOTEROL), o SYMBICORT (BUDESONIDE/FORMOTEROL))	QL-ST	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SPIRIVA RESPIMAT INHALER 2.5MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
spironolactone susp (CAROSPIR equiv) (Prior Authorization required for members age 9 years and older)	PA	3	DIURETICS
spironolactone tab (ALDACTONE equiv)	-	1	DIURETICS
spironolactone/hydrochlorothiazide tab (ALDACTAZIDE equiv)	-	1	DIURETICS
SPORANOX CAP	-	NC	ANTIFUNGALS
SPORANOX SOLN	-	NC	ANTIFUNGALS
sprintec 28 tab (ORTHO-CYCLEN equiv)	-	$0	CONTRACEPTIVES
SPRIX NASAL SPRAY	-	NC	ANALGESICS - ANTI-INFLAMMATORY
SPRYCEL TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SPS	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
STALEVO TAB	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
STARJEMZA INJ	-	NC	DERMATOLOGICALS
STARJEMZA PFS INJ	-	NC	DERMATOLOGICALS
STAVZOR CAP	-	NC	ANTICONVULSANTS
STAXYN ODT	-	NC	CARDIOVASCULAR AGENTS - MISC.
STEGLATRO TAB	-	NC	ANTIDIABETICS
STEGLUJAN TAB	-	NC	ANTIDIABETICS

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STELARA INJ	-	NC	DERMATOLOGICALS
STENDRA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
STEQEYMA INJ (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
STEQEYMA INJ 90MG (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
STEQEYMA VIAL	-	NC	DERMATOLOGICALS
STIMUFEND INJ	-	NC	HEMATOPOIETIC AGENTS
STIOLTO INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
STIVARGA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
STRATTERA CAP	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ NOREXIANTS
STRENSIQ INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
STRIANT FILM	-	NC	ANDROGENS-ANABOLIC
STRIBILD TAB	-	2	ANTIVIRALS
STRIVERDI RESPIMAT INHALER (QL= 1 inhaler/30 days)	QL	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
STROMECTOL TAB	-	NC	ANTHELMINTICS
SUBOXONE SL FILM	-	NC	ANALGESICS - OPIOID
SUBSYS SPRAY	-	NC	ANALGESICS - OPIOID
SUBVENITE SUSP	-	NC	ANTICONVULSANTS
SUCRAID SOLN	-	NC	DIGESTIVE AIDS
sucralfate susp (CARAFATE equiv)	-	2	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
sucralfate tab (CARAFATE equiv)	-	1	ULCER DRUGS
SUFLAVE SOLN	-	NC	LAXATIVES
SULAR ER TAB 17MG	-	NC	CALCIUM CHANNEL BLOCKERS
SULAR ER TAB 34MG	-	NC	CALCIUM CHANNEL BLOCKERS
SULAR ER TAB 8.5MG	-	NC	CALCIUM CHANNEL BLOCKERS
SULFACETAMIDE SOD OPHTH SOLN	-	1	OPHTHALMIC AGENTS
sulfacetamide sodium ophth soln (BLEPH-10 equiv)	-	1	OPHTHALMIC AGENTS
sulfacetamide sodium/prednisolone ophth soln (VASOCIDIN equiv)	-	1	OPHTHALMIC AGENTS
sulfacetamide sodium/sulfur cream 10-2% (AVAR-E LS equiv)	-	NC	DERMATOLOGICALS
sulfacetamide sodium/sulfur cream 10-5% (PLEXION SCT equiv)	-	2	DERMATOLOGICALS
SULFACETAMIDE SODIUM/SULFUR CREAM 9.8-4.8%	-	NC	DERMATOLOGICALS
sulfadiazine tab	-	3	SULFONAMIDES
SULFAMYLON CREAM	-	2	DERMATOLOGICALS
sulfasalazine EC tab (AZULFIDINE equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
sulfasalazine tab (AZULFIDINE equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
sulindac tab (CLINORIL equiv)	-	1	ANALGESICS - ANTI-INFLAMMATORY
SUMADAN WASH 9-4.5%	-	NC	DERMATOLOGICALS
SUMADEN XLT KIT	-	NC	DERMATOLOGICALS
SUMANSETRON PAK	-	NC	MIGRAINE PRODUCTS
sumatriptan inj (IMITREX equiv) (QL= 6 inj/fill, 3 fills/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan nasal spray (IMITREX, SUMATRIPTAN equiv) (QL= 6 sprays/fill, 3 fills/30 days)	QL	2	MIGRAINE PRODUCTS
sumatriptan tab (IMITREX equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS

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sumatriptan vial inj (IMITREX equiv) (QL= 10 vials/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS
sumatriptan/naproxen tab (TREXIMET equiv)	-	NC	MIGRAINE PRODUCTS
SUMAVEL DOSEPRO INJ	-	NC	MIGRAINE PRODUCTS
SUMAXIN WASH	-	NC	DERMATOLOGICALS
sunitinib malate cap (SUTENT equiv) (QL= 1 cap/day)	PA-QL-SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SUNOSI TAB (QL= 1 tab/day)	PA-QL	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
SUPRAX CAP	-	3	CEPHALOSPORINS
SUPRAX CAP	-	NC	CEPHALOSPORINS
SUPRAX SUSP	-	NC	CEPHALOSPORINS
SUPRAX SUSP 500MG/5ML	-	3	CEPHALOSPORINS
SUPREP BOWEL PREP PACK	-	NC	LAXATIVES
SURMONTIL CAP	-	NC	ANTIDEPRESSANTS
SUSTIVA TAB	-	NC	ANTIVIRALS
SUSTOL INJ	-	NC	ANTIEMETICS
SUTAB TAB	-	NC	LAXATIVES
SUTENT CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYLATRON INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYMBICORT INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
SYMBRAVO TAB	-	NC	MIGRAINE PRODUCTS
SYMBYAX CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SYMDEKO TAB (QL= 2 tabs/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
SYMFI (LO) TAB	-	NC	ANTIVIRALS
SYMLINPEN INJ	-	NC	ANTIDIABETICS
SYMPAZAN ORAL FILM	-	NC	ANTICONVULSANTS
SYMPROIC TAB (QL= 1 tab/day)	PA-QL	2	GASTROINTESTINAL AGENTS - MISC.
SYMTUZA TAB	-	2	ANTIVIRALS
SYNAREL NASAL SOLN	-	2	ENDOCRINE AND METABOLIC AGENTS - MISC.
SYNJARDY TAB	-	NC	ANTIDIABETICS
SYNJARDY XR TAB	-	NC	ANTIDIABETICS
SYNTHROID TAB	-	2	THYROID AGENTS
TABLOID TAB	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TABRECTA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tacrolimus cap (PROGRAF equiv)	-	1	ASSORTED CLASSES
tacrolimus cap er (ASTAGRAF XL equiv)	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
tacrolimus oint (PROTOPIC OINT equiv)	-	1	DERMATOLOGICALS
tadalafil tab (CIALIS equiv) (QL= 6 tabs/30 days)	QL	1	CARDIOVASCULAR AGENTS - MISC.
tadalafil tab (PAH) (ADCIRCA equiv) (QL= 2 tabs/day)	QL	1	CARDIOVASCULAR AGENTS - MISC.
tadalafil tab 2.5mg, 5mg (CIALIS equiv) (QL= 1 tab/day)	QL	1	CARDIOVASCULAR AGENTS - MISC.
TADLIQ SUSP (Prior Authorization required for members age 7 years and older)	PA-SP	4	CARDIOVASCULAR AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
TAFINLAR CAP (QL= 4 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAFINLAR TAB	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tafluprost preservative free (pf) ophth soln (ZIOPTAN OPHTH SOLN equiv)	-	NC	OPHTHALMIC AGENTS
TAGRISSO TAB (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAKHZYRO INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
TAKHZYRO INJ 150MG/ML	-	NC	HEMATOLOGICAL AGENTS - MISC.
TALICIA CAP	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
TALTZ INJ (QL= 1 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
TALTZ INJ 20MG/0.25ML (QL= 1 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
TALTZ INJ 40 MG/0.5ML (QL= 1 inj/28 days)	PA-QL-SP	4	DERMATOLOGICALS
TALZENNA CAP 0.1MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TALZENNA CAP 0.25MG (QL= 3 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TALZENNA CAP 0.35MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TALZENNA CAP 0.5MG, 0.75MG, 1MG (QL= 1 cap/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAMIFLU CAP	-	NC	ANTIVIRALS
TAMIFLU CAP 30MG	-	NC	ANTIVIRALS
TAMIFLU SUSP	-	NC	ANTIVIRALS
tamoxifen tab (NOLVADEX equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tamsulosin cap (FLOMAX equiv)	-	1	GENITOURINARY AGENTS - MISCELLANEOUS
TANZEUM INJ	-	NC	ANTIDIABETICS
TAPAZOLE TAB	-	NC	THYROID AGENTS
TAPENTADOL ER TAB 100MG	-	NC	ANALGESICS - OPIOID
TAPENTADOL ER TAB 150MG	-	NC	ANALGESICS - OPIOID
TAPENTADOL ER TAB 200MG	-	NC	ANALGESICS - OPIOID
TAPENTADOL ER TAB 250MG	-	NC	ANALGESICS - OPIOID
TAPENTADOL ER TAB 50MG	-	NC	ANALGESICS - OPIOID
tapentadol hcl tab (NUCYNTA equiv)	-	3	ANALGESICS - OPIOID
TAPENTADOL SOLN	-	NC	ANALGESICS - OPIOID
TARCEVA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TARGRETIN GEL	-	NC	DERMATOLOGICALS
TARPEYO CAP	-	NC	CORTICOSTEROIDS
TASCENSO ODT TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TASIGNA CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tasimelteon cap (HETLIOZ equiv)	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEF AGENTS
TASMAR TAB	-	NC	ANTIPARKINSON AGENTS

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TASOPROL CREAM KIT	-	NC	DERMATOLOGICALS
tavaborole soln (KERYDIN equiv)	-	NC	DERMATOLOGICALS
TAVALISSE TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
TAVNEOS CAP (QL= 6 caps/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
TAYTULLA CAP	-	NC	CONTRACEPTIVES
tazarotene cream 0.05% (TAZORAC equiv) (Members age 26 or older require Prior Authorization)	PA	3	DERMATOLOGICALS
tazarotene cream 0.1% (TAZORAC equiv) (Members age 26 or older require Prior Authorization)	PA	2	DERMATOLOGICALS
tazarotene gel (TAZORAC equiv)	-	NC	DERMATOLOGICALS
TECFIDERA CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TECFIDERA STARTER PACK	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TEGRETOL SUSP	-	NC	ANTICONVULSANTS
TEGRETOL TAB	-	NC	ANTICONVULSANTS
TEGRETOL XR TAB	-	NC	ANTICONVULSANTS
TEKTURNA TAB	-	NC	ANTIHYPERTENSIVES
telmisartan tab (MICARDIS equiv)	-	1	ANTIHYPERTENSIVES
TELMISARTAN/AMLODIPINE TAB	-	NC	ANTIHYPERTENSIVES
telmisartan/amlodipine tab (TWYNSTA equiv)	-	NC	ANTIHYPERTENSIVES
telmisartan/hydrochlorothiazide tab (MICARDIS HCT equiv)	-	1	ANTIHYPERTENSIVES
temazepam cap 15mg (RESTORIL equiv)	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
temazepam cap 22.5mg (RESTORIL equiv)	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
temazepam cap 30mg (RESTORIL equiv)	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
temazepam cap 7.5mg (RESTORIL equiv)	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
TEMOVATE CREAM	-	NC	DERMATOLOGICALS
TEMOVATE OINT	-	NC	DERMATOLOGICALS
temozolomide cap (TEMODAR equiv)	SP	1	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TEMPO SMART BUTTON	-	NC	MEDICAL DEVICES AND SUPPLIES
tenofovir disoproxil fumarate tab (VIREAD equiv)	-	2	ANTIVIRALS
TENORETIC TAB	-	NC	ANTIHYPERTENSIVES
TENORMIN TAB	-	NC	BETA BLOCKERS
TEPMETKO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TERAVAX CAP	-	NC	MULTIVITAMINS
TERAZOL CREAM	-	NC	VAGINAL PRODUCTS
terazosin cap (HYTRIN equiv)	-	1	ANTIHYPERTENSIVES
terbinafine tab (LAMISIL equiv)	-	1	ANTIFUNGALS
terbutaline sulfate tab (BRETHINE equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
terconazole cream (TERAZOL equiv)	-	1	VAGINAL PRODUCTS
TERCONAZOLE CREAM 0.8%	-	1	VAGINAL PRODUCTS
terconazole supp (TERAZOL equiv)	-	1	VAGINAL PRODUCTS

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teriflunomide tab (AUBAGIO equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
teriparatide (recombinant) soln pen-inj (FORTEO equiv)	SP	1	ENDOCRINE AND METABOLIC AGENTS - MISC.
TESSALON CAP	-	NC	COUGH/COLD/ALLERGY
TEST STRIP (all other test strips)	OTC	NC	DIAGNOSTIC PRODUCTS
testosterone cypionate inj (DEPO-TESTOSTERONE equiv)	-	1	ANDROGENS-ANABOLIC
TESTOSTERONE ENANTHATE INJ 200MG/ML (QL= 5ml/fill)	QL	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL 1% 25MG (QL= 1 packet/day)	PA-QL	2	ANDROGENS-ANABOLIC
testosterone gel 1% 25mg (ANDROGEL equiv) (QL= 1 packet/day)	PA-QL	2	ANDROGENS-ANABOLIC
testosterone gel 1% 50mg (ANDROGEL equiv) (QL= 2 packets/day)	PA-QL	2	ANDROGENS-ANABOLIC
testosterone gel 1% pump (VOGELXO GEL, ANDROGEL equiv) (QL= 4 bottles/30 days)	PA-QL	2	ANDROGENS-ANABOLIC
testosterone gel 1.62% 1.25gm (ANDROGEL equiv) (QL= 1 packet/day)	PA-QL	3	ANDROGENS-ANABOLIC
testosterone gel 1.62% 2.5gm (ANDROGEL equiv) (QL= 2 packets/day)	PA-QL	3	ANDROGENS-ANABOLIC
TESTOSTERONE GEL 10MG/ACT	-	NC	ANDROGENS-ANABOLIC
testosterone gel 2% (FORTESTA equiv)	-	NC	ANDROGENS-ANABOLIC
TESTOSTERONE GEL 20.25MG/1.25GM (QL= 1 packet/day)	PA-QL	3	ANDROGENS-ANABOLIC
TESTOSTERONE GEL PUMP 1% (QL= 4 bottles/30 days)	PA-QL	2	ANDROGENS-ANABOLIC
testosterone gel pump 1.62% (ANDROGEL equiv) (QL= 2 bottles/30 days)	PA-QL	2	ANDROGENS-ANABOLIC
TESTOSTERONE GEL, VOGELXO GEL	-	NC	ANDROGENS-ANABOLIC
testosterone soln (AXIRON equiv) (QL= 2 bottles/30 days)	PA-QL	2	ANDROGENS-ANABOLIC
TETANUS/DIPHTHERIA TOXOID INJ	VAC	$0	TOXOIDS
tetrabenazine tab (XENAZINE equiv)	SP	1	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
tetracaine hcl ophth soln	-	1	OPHTHALMIC AGENTS
TETRACAINE OPHTH SOLN	-	1	OPHTHALMIC AGENTS
tetracycline cap	-	3	TETRACYCLINES
TETRACYCLINE TAB	-	NC	TETRACYCLINES
TEXACORT SOLN	-	NC	DERMATOLOGICALS
TEZRULY SOLN	-	NC	ANTIHYPERTENSIVES
THALITONE TAB	-	NC	DIURETICS
THALOMID CAP	SP	4	ASSORTED CLASSES
theophylline ER tab (UNIPHYL equiv)	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline er tab (THEOPHYLLINE ER equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
theophylline soln	-	1	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
THEOPHYLLINE TAB ER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
THIOLA EC TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
thioridazine hcl tab (THIORIDAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
thiothixene cap (NAVANE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
THYQUIDITY SOLN	-	NC	THYROID AGENTS
TIAGABINE TAB	-	2	ANTICONVULSANTS
tiagabine tab (GABITRIL equiv)	-	2	ANTICONVULSANTS
TIAZAC CAP	-	NC	CALCIUM CHANNEL BLOCKERS

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TIBSOVO TAB (QL= 2 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ticagrelor tab (BRILINTA equiv)	-	2	HEMATOLOGICAL AGENTS - MISC.
TICANASE PAK	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
TICOVAC INJ	VAC	EXC	VACCINES
TIGAN CAP	-	NC	ANTIEMETICS
TIGAN INJ	-	NC	ANTIEMETICS
TIGLUTIK SUSP	-	NC	NEUROMUSCULAR AGENTS
TIKOSYN CAP	-	NC	ANTIARRHYTHMICS
timolol maleate (pf) ophth soln 0.5% (TIMOPTIC equiv)	-	3	OPHTHALMIC AGENTS
timolol maleate ophth gel (TIMOPTIC-XE equiv)	-	2	OPHTHALMIC AGENTS
timolol maleate ophth soln (TIMOPTIC equiv)	-	1	OPHTHALMIC AGENTS
timolol maleate ophth soln 0.5% (ISTALOL equiv)	-	2	OPHTHALMIC AGENTS
timolol maleate preservative free ophth soln 0.25% (TIMOPTIC equiv)	-	3	OPHTHALMIC AGENTS
TIMOLOL MALEATE TAB	-	1	BETA BLOCKERS
timolol maleate tab (BLOCADREN equiv)	-	1	BETA BLOCKERS
timolol ophth soln (BETIMOL equiv)	-	2	OPHTHALMIC AGENTS
TIMOPTIC OCUDOSE OPHTH SOLN 0.25%	-	NC	OPHTHALMIC AGENTS
TIMOPTIC OCUDOSE OPHTH SOLN 0.5%	-	NC	OPHTHALMIC AGENTS
TIMOPTIC OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
TIMOPTIC-XE OPHTH GEL	-	NC	OPHTHALMIC AGENTS
TINDAMAX TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
tinidazole tab (TINDAMAX equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
tiopronin tab (THIOLA equiv)	PA-SP	1	GENITOURINARY AGENTS - MISCELLANEOUS
tiopronin tab delayed release (THIOLA EC equiv)	PA-SP	1	GENITOURINARY AGENTS - MISCELLANEOUS
tiotropium bromide cap inhaler (SPIRIVA equiv)	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TIROSINT CAP	-	NC	THYROID AGENTS
TIROSINT-SOL (QL= 1ml/day; Prior Authorization required for members age 9 years and older)	PA-QL	3	THYROID AGENTS
TIVICAY PD TAB	-	2	ANTIVIRALS
TIVICAY TAB	-	2	ANTIVIRALS
tizanidine cap (ZANAFLEX equiv)	-	2	MUSCULOSKELETAL THERAPY AGENTS
TIZANIDINE COMFORT KIT	-	NC	MUSCULOSKELETAL THERAPY AGENTS
tizanidine tab (ZANAFLEX equiv)	-	1	MUSCULOSKELETAL THERAPY AGENTS
TOBI PODHALER	PA-SP	4	AMINOGLYCOSIDES
TOBRADEX OPHTH OINT	-	2	OPHTHALMIC AGENTS
TOBRADEX OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
TOBRADEX ST OPHTH SUSP	-	3	OPHTHALMIC AGENTS
tobramycin neb soln (TOBI equiv) (Restricted to Infectious Disease or Pulmonology Specialist)	RS-SP	1	AMINOGLYCOSIDES
tobramycin neb soln (BETHKIS equiv)	-	NC	AMINOGLYCOSIDES
tobramycin ophth soln (TOBREX equiv)	-	1	OPHTHALMIC AGENTS
tobramycin/dexamethasone ophth soln (TOBRADEX equiv)	-	1	OPHTHALMIC AGENTS
TOBREX OPHTH OINT	-	3	OPHTHALMIC AGENTS
TOBREX OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
TODAY SPONGE	OTC	EXC	VAGINAL PRODUCTS

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tofacitinib citrate ER tab (XELJANZ equiv) (QL= 1 tab/day)	PA-QL-SP	1	ANALGESICS - ANTI-INFLAMMATORY
tofacitinib citrate oral soln (XELJANZ equiv) (QL= 10ml/day)	PA-QL-SP	1	ANALGESICS - ANTI-INFLAMMATORY
tofacitinib citrate tab (XELJANZ equiv) (QL= 2 tabs/day)	PA-QL-SP	1	ANALGESICS - ANTI-INFLAMMATORY
TOFRANIL TAB	-	NC	ANTIDEPRESSANTS
tolcapone tab (TASMAR equiv)	-	3	ANTIPARKINSON AGENTS
TOLECTIN DS CAP, TOLMETIN CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
TOLMETIN TAB, TOLECTIN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
TOLMETIN, TOLECTIN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
TOLSURA CAP	-	NC	ANTIFUNGALS
tolterodine SR cap (DETROL LA equiv)	-	1	URINARY ANTISPASMODICS
tolterodine tab (DETROL equiv)	-	1	URINARY ANTISPASMODICS
tolvaptan tab (JYNARQUE equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
tolvaptan tab (SAMSCA equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
TONMYA SL TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
TOPAMAX SPRINKLE CAP	-	NC	ANTICONVULSANTS
TOPAMAX TAB	-	NC	ANTICONVULSANTS
TOPICORT CREAM	-	NC	DERMATOLOGICALS
TOPICORT CREAM 0.05%	-	NC	DERMATOLOGICALS
TOPICORT GEL	-	NC	DERMATOLOGICALS
TOPICORT OINT	-	NC	DERMATOLOGICALS
topiramate ER cap (QUDEXY equiv)	-	NC	ANTICONVULSANTS
topiramate er cap (TROKENDI XR equiv)	-	NC	ANTICONVULSANTS
topiramate oral soln (EPRONTIA equiv)	-	NC	ANTICONVULSANTS
topiramate sprinkle cap (TOPAMAX equiv)	-	1	ANTICONVULSANTS
topiramate tab (TOPAMAX equiv)	-	1	ANTICONVULSANTS
TOPROL XL TAB	-	NC	BETA BLOCKERS
toremifene tab (FARESTON equiv)	-	2	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
torsemide tab (DEMADEX equiv)	-	1	DIURETICS
TOSYMRA SOLN	-	NC	MIGRAINE PRODUCTS
TOUJEO MAX SOLOSTAR INJ	-	2	ANTIDIABETICS
TOUJEO SOLOSTAR INJ	-	2	ANTIDIABETICS
TOVET KIT	-	NC	DERMATOLOGICALS
TOVIAZ TAB	-	NC	URINARY ANTISPASMODICS
TRACLEER TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
TRADJENTA TAB (QL= 1 tab/day)	QL	2	ANTIDIABETICS
TRAMADOL COMPOUND KIT	-	NC	DERMATOLOGICALS
TRAMADOL ER CAP	-	NC	ANALGESICS - OPIOID
tramadol ER tab (ULTRAM ER equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	3	ANALGESICS - OPIOID
TRAMADOL HCL ER TAB (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	3	ANALGESICS - OPIOID
TRAMADOL HCL TAB	-	NC	ANALGESICS - OPIOID
tramadol hcl tab 100mg	-	NC	ANALGESICS - OPIOID
tramadol tab (ULTRAM equiv)	-	1	ANALGESICS - OPIOID
tramadol/acetaminophen tab (ULTRACET equiv)	-	1	ANALGESICS - OPIOID

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trandolapril tab (MAVIK equiv)	-	1	ANTIHYPERTENSIVES
TRANDOLAPRIL/VERAPAMIL ER TAB	-	NC	ANTIHYPERTENSIVES
tranexamic acid tab (LYSTEDA equiv)	-	1	HEMOSTATICS
TRANSDERM-SCOP PATCH	-	NC	ANTIEMETICS
TRANXENE-T TAB	-	NC	ANTIANXIETY AGENTS
tranylcypromine tab (PARNATE equiv)	-	2	ANTIDEPRESSANTS
TRAVATAN Z DROPS	-	NC	OPHTHALMIC AGENTS
travoprost ophth soln (TRAVATAN Z equiv) (QL= 2.5ml/30 days)	QL	2	OPHTHALMIC AGENTS
trazodone tab (DESYREL equiv)	-	1	ANTIDEPRESSANTS
TRAZODONE TAB	-	NC	ANTIDEPRESSANTS
trazodone tab 300mg (DESYREL equiv)	-	NC	ANTIDEPRESSANTS
TRECATOR TAB	-	NC	ANTIMYCOBACTERIAL AGENTS
TRELEGY ELLIPTA INHALER	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TREMFYA INDUCTION INJ 200MG/ML (QL= 2 inj/28 days; 6 inj/year)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
TREMFYA INJ (QL= 1 inj/56 days)	PA-QL-SP	4	DERMATOLOGICALS
TREMFYA INJ 200MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
TRESIBA FLEXTOUCH INJ	-	2	ANTIDIABETICS
TRESIBA INJ	-	2	ANTIDIABETICS
tretinoin cap (VESANOID equiv)	SP	1	ANTINEOPLASTICS
tretinoin cream (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2	DERMATOLOGICALS
tretinoin gel (RETIN-A GEL equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2	DERMATOLOGICALS
tretinoin gel 0.05% (ATRALIN equiv)	-	NC	DERMATOLOGICALS
tretinoin microsphere gel	-	NC	DERMATOLOGICALS
TRETTEN INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
TREXALL TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TREXIMET TAB	-	NC	MIGRAINE PRODUCTS
TREZIX CAP, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE CAP	-	NC	ANALGESICS - OPIOID
triamcinolone acetonide inj (KENALOG equiv)	-	1	CORTICOSTEROIDS
triamcinolone acetonide oint (TRIANEX equiv)	-	NC	DERMATOLOGICALS
triamcinolone cream	-	1	DERMATOLOGICALS
triamcinolone in orabase paste (KENALOG/ORABASE equiv)	-	1	MOUTH/THROAT/DENTAL AGENTS
TRIAMCINOLONE LOTION	-	1	DERMATOLOGICALS
triamcinolone oint	-	1	DERMATOLOGICALS
triamcinolone OTC nasal spray (NASACORT equiv)	OTC	EXC	NASAL AGENTS - SYSTEMIC AND TOPICAL
TRIAMCINOLONE SPRAY	-	NC	DERMATOLOGICALS
triamcinolone spray (KENALOG equiv)	-	NC	DERMATOLOGICALS
triamterene cap (DYRENIUM equiv)	-	2	DIURETICS
triamterene/hydrochlorothiazide cap (DYAZIDE equiv)	-	1	DIURETICS
triamterene/hydrochlorothiazide tab (MAXZIDE equiv)	-	1	DIURETICS
TRIAMVEX KIT	-	NC	DERMATOLOGICALS
TRIANEX OINT	-	NC	DERMATOLOGICALS
triazolam tab (HALCION equiv)	-	1	HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS
TRIBENZOR TAB	-	NC	ANTIHYPERTENSIVES
TRICHOPHYTON MENTAGROPHYTES (DIAGNOSTIC) SOLN	-	NC	DIAGNOSTIC PRODUCTS

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TRICHOPHYTON MENTAGROPHYTES SOLN	-	NC	ALLERGENIC EXTRACTS/BIOLOGICALS MISC
TRICHOSOL SOLN	-	NC	PHARMACEUTICAL ADJUVANTS
TRICOR TAB	-	NC	ANTIHYPERLIPIDEMICS
trientine cap (SYPRINE equiv)	PA-SP	1	MISCELLANEOUS THERAPEUTIC CLASSES
TRIENTINE CAP	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
trifluoperazine tab (STELAZINE equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
TRIFLURIDINE OPHTH SOLN	-	2	OPHTHALMIC AGENTS
TRIGLIDE TAB	-	NC	ANTIHYPERLIPIDEMICS
trihexyphenidyl elixir (ARTANE equiv)	-	1	ANTIPARKINSON AND RELATED THERAPY AGENTS
trihexyphenidyl tab (ARTANE equiv)	-	1	ANTIPARKINSON AGENTS
TRIJARDY XR TAB	-	NC	ANTIDIABETICS
TRIKAFTA TAB (QL= 84 tabs/28 days)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
TRIKAFTA THERAPY PACK (QL= 2 packets/day)	PA-QL-SP	4	RESPIRATORY AGENTS - MISC.
tri-legest tab (ESTROSTEP FE equiv)	-	$0	CONTRACEPTIVES
TRILEPTAL SUSP	-	NC	ANTICONVULSANTS
TRILEPTAL TAB	-	NC	ANTICONVULSANTS
TRILIPIX CAP	-	NC	ANTIHYPERLIPIDEMICS
TRILOCICLO KIT	-	NC	DERMATOLOGICALS
TRI-LUMA CREAM	-	EXC	DERMATOLOGICALS
trimethobenzamide cap (TIGAN equiv)	-	1	ANTIEMETICS
trimethobenzamide hcl inj (TIGAN equiv)	-	NC	ANTIEMETICS
trimethoprim tab (PROLOPRIM equiv)	-	1	ANTI-INFECTIVE AGENTS - MISC.
TRIMETHOPRIM TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.
trimipramine cap (SURMONTIL equiv)	-	3	ANTIDEPRESSANTS
TRI-NORINYL TAB	-	NC	CONTRACEPTIVES
TRINTELLIX TAB	-	NC	ANTIDEPRESSANTS
TRIONEX PAK	-	NC	DERMATOLOGICALS
tri-sprintec tab (ORTHO TRI-CYCLEN (LO) equiv)	-	$0	CONTRACEPTIVES
TRIUMEQ PD TAB	-	2	ANTIVIRALS
TRIUMEQ TAB	-	2	ANTIVIRALS
TRI-VITAMIN FLUORIDE DROPS	-	NC	MULTIVITAMINS
TROKENDI XR CAP	-	NC	ANTICONVULSANTS
tropicamide ophth soln (MYDRIACYL equiv)	-	1	OPHTHALMIC AGENTS
TROPICAMIDE/CYCLOPENT/KETOROLAC/PE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
trospium chloride SR cap (SANCTURA XR equiv)	-	2	URINARY ANTISPASMODICS
trospium tab (SANCTURA equiv)	-	1	URINARY ANTISPASMODICS
TRUDHESA NASAL SPRAY	-	NC	MIGRAINE PRODUCTS
TRULANCE TAB (QL= 1 tab/day)	PA-QL	2	GASTROINTESTINAL AGENTS - MISC.
TRULICITY INJ (QL= 4 pens/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2	ANTIDIABETICS
TRUMENBA INJ	VAC	$0	VACCINES
TRUQAP TAB (QL= 64 tabs/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRUQAP THERAPY PACK (QL= 64 tabs/28 days)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRUSOPT OPHTH SOLN	-	NC	OPHTHALMIC AGENTS

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TRUTAKNA INJ	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
TRUVADA TAB	-	NC	ANTIVIRALS
TRYNGOLZA INJ (QL= 1 inj/28 days)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
TRYNGOLZA INJ 50MG/0.8ML	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
TRYPTYR SOLN	-	NC	OPHTHALMIC AGENTS
TRYVIO TAB	-	NC	ANTIHYPERTENSIVES
TUDORZA PRESSAIR INHALER	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TUDRIQEV INJ	-	NC/3P	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TUKYSA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TURALIO CAP (QL= 4 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TUSSICAPS	-	NC	COUGH/COLD/ALLERGY
TUXARIN ER TAB	-	NC	COUGH/COLD/ALLERGY
TUZISTRA XR SUSP	-	NC	COUGH/COLD/ALLERGY
TWIIST REFILL KIT (QL= 1 kit/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
TWIIST STARTER KIT (QL= 1 kit/month)	QL	2	MEDICAL DEVICES AND SUPPLIES
TWINRIX INJ	VAC	$0	VACCINES
TWIRLA PATCH	-	EXC	CONTRACEPTIVES
TWYNEO CREAM	-	NC	DERMATOLOGICALS
TYBLUME TAB	-	$0	CONTRACEPTIVES
TYBOST TAB	-	2	ANTIVIRALS
TYENNE INJ (QL= 2 inj/28 days)	PA-QL-SP	4	ANALGESICS - ANTI-INFLAMMATORY
TYKERB TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TYLENOL/CODEINE TAB	-	NC	ANALGESICS - OPIOID
TYMLOS INJ	SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
TYPHIM VI INJ	VAC	EXC	VACCINES
TYRVAYA NASAL SPRAY	-	NC	OPHTHALMIC AGENTS
TYVASO DPI POWDER (QL= 4 cartridges/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO DPI POWDER 48-80MCG (QL= 224 cartridges/28 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO DPI POWDER MAINTENANCE KIT 32-48MCG (QL= 224 cartridges/2 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO DPI POWDER MAINTENANCE KIT 32-64MCG (QL= 224 cartridges/2 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO DPI POWDER MAINTENANCE KIT 48-64MCG (QL= 224 cartridges/2 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO DPI POWDER TITRATION KIT 16-32-48MCG (QL= 252 cartridges/28 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
TYVASO INH SOLN 0.6 MG/ML (QL= 1 ampule/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
UBRELVY TAB (QL= 10 tabs/30 days, 6 fills/year)	PA-QL	2	MIGRAINE PRODUCTS
UCERIS RECTAL FOAM	-	NC	ANORECTAL AND RELATED PRODUCTS
UCERIS TAB	-	NC	CORTICOSTEROIDS
UDENYCA INJ	-	NC	HEMATOPOIETIC AGENTS

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Drug Name	Special Code	Tier	Category
ULORIC TAB	-	NC	GOUT AGENTS
ULTRACET TAB	-	NC	ANALGESICS - OPIOID
ULTRAM TAB	-	NC	ANALGESICS - OPIOID
ULTRAVATE CREAM	-	NC	DERMATOLOGICALS
ULTRAVATE LOTION	-	NC	DERMATOLOGICALS
ULTRAVATE OINT	-	NC	DERMATOLOGICALS
ULTRAVATE PAC KIT	-	NC	DERMATOLOGICALS
UMECLIDINIUM ELLIPTA INHALER 62.5MCG/INH	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
UMECLIDINIUM/VILANTEROL INHALER 62.5-25MCG/ACT	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
UMECTA EMULSION	-	NC	DERMATOLOGICALS
UMECTA PD EMULSION	-	NC	DERMATOLOGICALS
UMECTA SUSP	-	NC	DERMATOLOGICALS
UPNEEQ SOLN	-	EXC	OPHTHALMIC AGENTS
UPTRAVI INJ	-	NC	CARDIOVASCULAR AGENTS - MISC.
UPTRAVI TAB (QL= 2 tabs/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
UPTRAVI THERAPY PACK (QL= 2 tabs/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
URAMAXIN CREAM	-	NC	DERMATOLOGICALS
URAMAXIN GEL	-	NC	DERMATOLOGICALS
urea cream	-	NC	DERMATOLOGICALS
urea emulsion	-	NC	DERMATOLOGICALS
urea gel (URAMAXIN equiv)	-	NC	DERMATOLOGICALS
UREA LOT	-	NC	DERMATOLOGICALS
UREA NAIL KIT	-	NC	DERMATOLOGICALS
UREA SUSP	-	NC	DERMATOLOGICALS
urea susp 40% (UMECTA equiv)	-	NC	DERMATOLOGICALS
UREA/SALICYLIC CREAM	-	NC	DERMATOLOGICALS
URECHOLINE TAB	-	NC	URINARY ANTISPASMODICS
UROCIT-K TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
UROXATRAL TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
URSO FORTE TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
ursodiol cap (ACTIGALL equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
URSODIOL CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
ursodiol tab (URSO (FORTE) equiv)	-	1	GASTROINTESTINAL AGENTS - MISC.
URSOLIGN CAP	-	NC	GASTROINTESTINAL AGENTS - MISC.
USTEKINUMAB INJ 45/0.5ML	-	NC	DERMATOLOGICALS
USTEKINUMAB INJ 90MG/ML	-	NC	DERMATOLOGICALS
USTEKINUMAB-AEKN 45MG/0.5ML	-	NC	DERMATOLOGICALS
USTEKINUMAB-AEKN 90MG/ML	-	NC	DERMATOLOGICALS
UTA CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
UZEDY INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VAFSEO TAB	PA-SP	4	HEMATOPOIETIC AGENTS
VAGIFEM TAB	-	NC	VAGINAL PRODUCTS
valacyclovir tab (VALTREX equiv)	-	1	ANTIVIRALS
VALCHLOR GEL (QL= 4 tubes/30 days)	PA-QL-SP	4	DERMATOLOGICALS
VALCYTE SOLN	-	NC	ANTIVIRALS

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VALCYTE TAB	-	NC	ANTIVIRALS
valganciclovir soln (VALCYTE equiv)	-	2	ANTIVIRALS
valganciclovir tab (VALCYTE equiv)	-	2	ANTIVIRALS
VALIUM TAB	-	NC	ANTIANXIETY AGENTS
valproate inj (DEPACON equiv)	-	NC	ANTICONVULSANTS
valproic acid cap (DEPAKENE equiv)	-	1	ANTICONVULSANTS
valproic acid syrup (DEPAKENE equiv)	-	1	ANTICONVULSANTS
valsartan oral soln (VALSARTAN equiv)	-	NC	ANTIHYPERTENSIVES
valsartan tab (DIOVAN equiv)	-	1	ANTIHYPERTENSIVES
valsartan/hydrochlorothiazide tab (DIOVAN HCT equiv)	-	1	ANTIHYPERTENSIVES
VALTOCO NASAL SPRAY (QL= 5 doses/fill)	QL	3	ANTICONVULSANTS
VALTREX TAB	-	NC	ANTIVIRALS
VALTYA 1/50 TAB	-	$0	CONTRACEPTIVES
VANCOCIN CAP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
vancomycin cap (VANCOCIN equiv) (QL= 56 caps/fill)	QL	1	ANTI-INFECTIVE AGENTS - MISC.
vancomycin hcl soln (VANCOMYCIN equiv)	-	NC	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN ORAL SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN SOLN	-	NC	ANTI-INFECTIVE AGENTS - MISC.
VANFLYTA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VANFLYTA TAB 26.5MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VANOS CREAM	-	NC	DERMATOLOGICALS
VANRAFIA TAB	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
vardenafil ODT (STAXYN equiv) (QL= 6 tabs/30 days)	QL	1	CARDIOVASCULAR AGENTS - MISC.
vardenafil tab (LEVITRA equiv) (QL= 6 tabs/30 days)	QL	1	CARDIOVASCULAR AGENTS - MISC.
VARENICLINE TAB (Limited to 180 days/plan year)	QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
varenicline tartrate tab (CHANTIX equiv) (Limited to 180 days/plan year)	QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
varenicline tartrate tab starter pack (CHANTIX equiv) (Limited to 180 days/plan year)	QL-SMKG	$0	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
VARIVAX INJ	VAC	$0	VACCINES
VARUBI TAB	-	NC	ANTIEMETICS
VASCEPA CAP	-	NC	ANTIHYPERLIPIDEMICS
VASERETIC TAB	-	NC	ANTIHYPERTENSIVES
vasolex oint (XENADERM equiv)	-	NC	DERMATOLOGICALS
VASOTEC TAB	-	NC	ANTIHYPERTENSIVES
VAXCHORA SUSP	VAC	EXC	VACCINES
VAXELIS INJ	VAC	$0	TOXOIDS
VAXNEUVANCE INJ	VAC	$0	VACCINES
V-C FORTE CAP	-	NC	MULTIVITAMINS
v-c forte cap (V-C FORTE equiv)	-	NC	MULTIVITAMINS
VECAMYL TAB	-	NC	ANTIHYPERTENSIVES
VECTICAL OINT	-	NC	DERMATOLOGICALS
VELIVET PAK	-	$0	CONTRACEPTIVES
velivet tab (CYCLESSA equiv)	-	$0	CONTRACEPTIVES
VELPHORO CHEW TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
VELSIPITY TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
VELTASSA POWDER (QL= 1 packet/day)	PA-QL	2	ASSORTED CLASSES
VELTASSA POWDER 1GM (QL= 4 packets/day)	PA-QL	2	MISCELLANEOUS THERAPEUTIC CLASSES
VEMLIDY TAB	-	2	ANTIVIRALS
VENCLEXTA STARTER PACK	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VENCLEXTA TAB	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
venlafaxine ER cap (EFFEXOR XR equiv)	-	1	ANTIDEPRESSANTS
venlafaxine ER tab	-	NC	ANTIDEPRESSANTS
venlafaxine tab (EFFEXOR equiv)	-	1	ANTIDEPRESSANTS
VENLAFAXINE TAB	-	NC	ANTIDEPRESSANTS
VENNGEL ONE KIT	-	NC	DERMATOLOGICALS
VENTAVIS INH SOLN (QL= 9 ampules/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
VEOZAH TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
VEPPANU TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VERAPAMIL CR CAP, VERELAN CAP	-	NC	CALCIUM CHANNEL BLOCKERS
VERAPAMIL ER CAP	-	NC	CALCIUM CHANNEL BLOCKERS
verapamil SR cap (VERELAN equiv)	-	1	CALCIUM CHANNEL BLOCKERS
verapamil SR tab (CALAN SR, ISOPTIN SR equiv)	-	1	CALCIUM CHANNEL BLOCKERS
verapamil tab (CALAN equiv)	-	1	CALCIUM CHANNEL BLOCKERS
VERDESO FOAM	-	NC	DERMATOLOGICALS
VERDROCET TAB 2.5MG-325MG	-	NC	ANALGESICS - OPIOID
VEREGEN OINT	-	NC	DERMATOLOGICALS
VERELAN CAP	-	NC	CALCIUM CHANNEL BLOCKERS
VERQUVO TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
VERSACLOZ SUSP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VERSAPENN AL GEL ANHYDROU	-	NC	PHARMACEUTICAL ADJUVANTS
VERZENIO TAB (QL= 2 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VESICARE LS SUSP	-	NC	URINARY ANTISPASMODICS
VESICARE TAB	-	NC	URINARY ANTISPASMODICS
VEVYE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
VFEND SUSP	-	NC	ANTIFUNGALS
VFEND TAB	-	NC	ANTIFUNGALS
V-GO INJ KIT	-	NC	MEDICAL DEVICES AND SUPPLIES
VIAGRA TAB	-	NC	CARDIOVASCULAR AGENTS - MISC.
VIBERZI TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
VIBRAMYCIN CAP	-	NC	TETRACYCLINES
VIBRAMYCIN SUSP	-	NC	TETRACYCLINES
VICOPROFEN TAB	-	NC	ANALGESICS - OPIOID
VICTOZA INJ	-	NC	ANTIDIABETICS
vienva tab, lessina tab, kurvelo tab (ALESSE equiv)	-	$0	CONTRACEPTIVES
vigabatrin powder pack (SABRIL POWDER equiv)	PA-SP	1	ANTICONVULSANTS
vigabatrin tab (SABRIL equiv)	PA-SP	1	ANTICONVULSANTS
vigadrone powder pack	PA-SP	4	ANTICONVULSANTS
VIGAFYDE SOLN	-	NC	ANTICONVULSANTS

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Drug Name	Special Code	Tier	Category
VIGAMOX OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
VIIBRYD STARTER KIT	-	NC	ANTIDEPRESSANTS
VIJOICE GRANULES PACKET	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
VIJOICE TAB (QL= 1 tab/day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
VIJOICE TAB 250MG (QL= 2 tabs/day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
vilazodone hcl tab (VIIBRYD equiv)	-	1	ANTIDEPRESSANTS
VIMKUNYA INJ	VAC	EXC	VACCINES
VIMOVO TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
VIMPAT SOLN	-	NC	ANTICONVULSANTS
VIMPAT TAB	-	NC	ANTICONVULSANTS
viorele tab, kariva tab (MIRCETTE equiv)	-	$0	CONTRACEPTIVES
VIRACEPT TAB	-	2	ANTIVIRALS
VIRAMUNE SUSP	-	NC	ANTIVIRALS
VIRAMUNE TAB	-	NC	ANTIVIRALS
VIRAMUNE XR TAB	-	NC	ANTIVIRALS
VIREAD TAB	-	2	ANTIVIRALS
VIREAD TAB	-	NC	ANTIVIRALS
VISTARIL CAP	-	NC	ANTIANXIETY AGENTS
VISTOGARD PAK	-	NC	ANTIDOTES
VITAFOL STRIPS	-	3	MULTIVITAMINS
vitamin D cap (RX strength only)	-	1	VITAMINS
vitamin D cap 1000unit	OTC	NC	VITAMINS
vitamin D cap 400unit	OTC	NC	VITAMINS
VITAMIN D TAB 400UNIT	OTC	NC	VITAMINS
VITRAKVI CAP 100MG (QL= 2 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VITRAKVI CAP 25MG (QL= 6 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VITRAKVI SOLN (QL= 10ml/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VIVELLE-DOT, MINIVELLE PATCH	-	NC	ESTROGENS
VIVITROL INJ	SP	4	ANTIDOTES
VIVJOA CAP	-	NC	ANTIFUNGALS
VIVLODEX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
VIVOTIF CAP	VAC	EXC	VACCINES
VIZIMPRO TAB (QL= 1 tab/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VIZZ OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
VOGELXO GEL PUMP 1%	-	NC	ANDROGENS-ANABOLIC
VONJO CAP (QL= 4 caps/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VONVENDI INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
VOPAC 5 CREAM	-	NC	DERMATOLOGICALS
VOPAC CREAM	-	NC	DERMATOLOGICALS
VOPAC GB CREAM	-	NC	DERMATOLOGICALS
VOQUEZNA DUAL PAK	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS

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Drug Name	Special Code	Tier	Category
VOQUEZNA TAB	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
VOQUEZNA TRIP PAK	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINEF CS
VORANIGO TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VORANIGO TAB 10MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
voriconazole susp (VFEND equiv)	-	3	ANTIFUNGALS
voriconazole tab (VFEND equiv)	-	2	ANTIFUNGALS
VOSEVI TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTIVIRALS
VOTRIENT TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VOWST CAP (QL= 12 caps/fill)	PA-QL-SP	4	GASTROINTESTINAL AGENTS - MISC.
VOXZOGO INJ (QL= 1 vial/day)	PA-QL-SP	4	ENDOCRINE AND METABOLIC AGENTS - MISC.
VOYDEYA TAB (QL= 6 tabs/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
VOYDEYA TAB THERAPY PACK (QL= 6 tabs/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
VOYXACT INJ	-	NC	GENITOURINARY AGENTS - MISCELLANEOUS
VP-PNV-DHA CAP	-	1	MULTIVITAMINS
VRAYLAR CAP	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VRAYLAR PACK	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
VSL #3 CAP	-	NC	ANTIDIARRHEALS
VTAMA CREAM	-	NC	DERMATOLOGICALS
VTOL SOLN	-	NC	ANALGESICS - NONNARCOTIC
VUITY OPHTH SOLN 1.25%	-	NC	OPHTHALMIC AGENTS
VUMERITY CAP	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
VYALEV INJ	-	NC	ANTIPARKINSON AND RELATED THERAPY AGENTS
VYBRIQUE ORAL FILM	-	NC	CARDIOVASCULAR AGENTS - MISC.
VYKAT XR TAB	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
VYKAT XR TAB 150MG	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
VYKAT XR TAB 75MG	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
VYLEESI INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
VYNDAMAX CAP (QL= 1 cap/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
VYNDAQEL CAP (QL= 4 caps/day)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
VYSCOXA SUSP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
VYTONE CREAM 1.9-1%	-	NC	DERMATOLOGICALS
VYTORIN TAB	-	NC	ANTIHYPERLIPIDEMICS
VYVANSE CAP	-	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS

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VYVANSE CHEW TAB (Members age 7 years or older require Prior Authorization)	PA	2	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
VYVGART HYTRULO INJ (QL= 4 inj/28 days)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
VYZULTA SOLN	-	NC	OPHTHALMIC AGENTS
WAINUA INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
WAKIX TAB (QL= 2 tabs/day)	PA-QL-SP	4	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
warfarin tab (COUMADIN equiv)	-	1	ANTICOAGULANTS
WASKYRA INJ	-	NC/3P	HEMATOPOIETIC AGENTS
WAYRILZ TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.
WEGOVY HD INJ 7.2MG/0.75ML	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
WEGOVY INJ	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
WEGOVY INJ 1.7MG/0.75ML	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
WEGOVY INJ 2.4MG/0.75ML	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
WEGOVY TAB	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
WELCHOL PACK	-	NC	ANTIHYPERLIPIDEMICS
WELCHOL TAB	-	NC	ANTIHYPERLIPIDEMICS
WELIREG TAB (QL= 3 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
WELLBUTRIN SR TAB	-	NC	ANTIDEPRESSANTS
WELLBUTRIN XL TAB	-	NC	ANTIDEPRESSANTS
WESTCORT OINT	-	NC	DERMATOLOGICALS
WEZLANA INJ	-	NC	DERMATOLOGICALS
WEZLANA SYRINGE	-	NC	DERMATOLOGICALS
WIDAPLIK TAB	-	NC	ANTIHYPERTENSIVES
WILATE INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
WINLEVI CREAM	-	NC	DERMATOLOGICALS
WINREVAIR INJ	PA-SP	4	CARDIOVASCULAR AGENTS - MISC.
WOUND-DRESSING GELS	-	NC	DERMATOLOGICALS
WPR PLUS	-	NC	DERMATOLOGICALS
WYNZORA CREAM	-	NC	DERMATOLOGICALS
XACIATO GEL (QL= 1 applicator/fill)	QL	2	VAGINAL AND RELATED PRODUCTS
XADAGO TAB (QL= 1 tab/day)	PA-QL	3	ANTIPARKINSON AGENTS
XALATAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
XALKORI CAP (QL= 2 caps/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XALKORI SPRINKLE CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XANAX TAB	-	NC	ANTIANXIETY AGENTS
XANAX XR TAB	-	NC	ANTIANXIETY AGENTS
XARELTO STARTER PACK	-	2	ANTICOAGULANTS
XARELTO SUSP	-	2	ANTICOAGULANTS
XARELTO TAB	-	2	ANTICOAGULANTS
XCOPRI PAK 100-150MG (QL= 2 tabs/day)	QL	2	ANTICONVULSANTS

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QL	Quantity Limit	RDX	Restricted to Diagnosis	RS	Restricted to Specialist
SF	Limited to two 15 day fills per month for first 3 months	SMKG	Smoking Cessation	SP	Available through Specialty Pharmacy Program
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Drug Name	Special Code	Tier	Category
XCOPRI PAK 150-200MG (QL= 2 tabs/day)	QL	2	ANTICONVULSANTS
XCOPRI TAB 150MG, 200MG (QL= 2 tabs/day)	QL	2	ANTICONVULSANTS
XCOPRI TAB 25MG (QL= 1 tab/day)	QL	2	ANTICONVULSANTS
XCOPRI TAB 50MG, 100MG (QL= 1 tab/day)	QL	2	ANTICONVULSANTS
XCOPRI TITRATION PAK 12.5-25MG (QL= 1 tab/day)	QL	2	ANTICONVULSANTS
XCOPRI TITRATION PAK 150-200MG (QL= 1 tab/day)	QL	2	ANTICONVULSANTS
XCOPRI TITRATION PAK 50-100MG (QL= 1 tab/day)	QL	2	ANTICONVULSANTS
XDEMVY DROP	-	NC	OPHTHALMIC AGENTS
XELJANZ ORAL SOLN	-	NC	ANALGESICS - ANTI-INFLAMMATORY
XELJANZ TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
XELJANZ XR TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
XELPROS OPHTH EMULSION	-	NC	OPHTHALMIC AGENTS
XELSTRYM PAD	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
XEMBIFY INJ	PA-SP	4	PASSIVE IMMUNIZING AND TREATMENT AGENTS
XENADERM OINT	-	NC	DERMATOLOGICALS
XENAZINE TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
XENICAL CAP	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
XEPI CREAM	-	NC	DERMATOLOGICALS
XERESE CREAM	-	NC	DERMATOLOGICALS
XERMELO TAB	-	NC	GASTROINTESTINAL AGENTS - MISC.
XHANCE NASAL EXHALER	-	NC	NASAL AGENTS - SYSTEMIC AND TOPICAL
XIFAXAN TAB 200MG (QL= 9 tabs/3 days)	QL	3	ANTI-INFECTIVE AGENTS - MISC.
XIFAXAN TAB 550MG (QL= 60 tabs/30 days)	QL	2	ANTI-INFECTIVE AGENTS - MISC.
XIGDUO XR TAB	-	NC	ANTIDIABETICS
XIGDUO XR TAB 2.5-1000 (QL= 2 tabs/day)	QL	2	ANTIDIABETICS
XIIDRA OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
XOCOVA TAB	-	NC	ANTIVIRALS
XODOL TAB 10MG-300MG	-	NC	ANALGESICS - OPIOID
XODOL TAB 5MG-300MG	-	NC	ANALGESICS - OPIOID
XODOL TAB 7.5MG-300MG	-	NC	ANALGESICS - OPIOID
XOFLUZA TAB (QL= 1 tab/fill)	QL	3	ANTIVIRALS
XOLAIR INJ (QL= 2 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLAIR INJ 150MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLAIR INJ 300MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLAIR SYRINGE (QL= 2 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLAIR SYRINGE 150MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLAIR SYRINGE 300MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOLEGEL	-	NC	DERMATOLOGICALS
XOLREMDI CAP	-	NC	HEMATOPOIETIC AGENTS

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Drug Name	Special Code	Tier	Category
XOPENEX NEB SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XOSPATA TAB (QL= 3 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XPHOZAH TAB (QL= 2 tabs/day)	PA-QL-SP	3	ENDOCRINE AND METABOLIC AGENTS - MISC.
XPOVIO PAK (QL= 32 tabs/28 days)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XROMI SOLN (Prior Authorization required for members age 9 years and older)	PA	3	HEMATOPOIETIC AGENTS
XRYLIX PAK	-	NC	DERMATOLOGICALS
XTAMPZA ER CAP (QL= 120 caps/30 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2	ANALGESICS - OPIOID
XTANDI CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XTANDI TAB 40MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XTANDI TAB 80MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XTORO OTIC SUSP	-	NC	OTIC AGENTS
XULTOPHY INJ (QL= 15ml/30 days)	QL	2	ANTIDIABETICS
XURIDEN POWDER	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
XYNTHA INJ	-	EXC	HEMATOLOGICAL AGENTS - MISC.
XYOSTED INJ	-	NC	ANDROGENS-ANABOLIC
XYREM SOLN	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
XYWAV SOLN	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
XYZAL SOLN	-	EXC	ANTIHISTAMINES
XYZAL TAB	-	EXC	ANTIHISTAMINES
XYZBAC TAB	-	EXC	DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS
YAZ TAB, YASMIN 28 TAB	-	NC	CONTRACEPTIVES
YBUPHEN TAB	-	NC	ANALGESICS - ANTI-INFLAMMATORY
YESINTEK INJ (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
YESINTEK SYRINGE (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
YESINTEK SYRINGE 90MG (QL= 1 inj/84 days)	PA-QL-SP	4	DERMATOLOGICALS
YEZTUGO INJ (QL= 2 inj/180 days)	PA-QL-SP	$0	ANTIVIRALS
YEZTUGO TAB (QL= 4 tabs/28 days)	PA-QL-SP	$0	ANTIVIRALS
YF-VAX INJ	VAC	EXC	VACCINES
YONSA TAB	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
YORVIPATH INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
YORVIPATH INJ 294MCG	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
YORVIPATH INJ 420MCG	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
YOSPRALA TAB	-	NC	HEMATOLOGICAL AGENTS - MISC.

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YUFLYMA INJ KIT (adalimumab-aaty)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
YUFLYMA KIT (adalimumab-aaty)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
YUPELRI SOLN	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
YUSIMRY INJ (adalimumab-aqvh)	-	NC	ANALGESICS - ANTI-INFLAMMATORY
YUTREPIA CAP (QL= 112 caps/28 days)	PA-QL-SP	4	CARDIOVASCULAR AGENTS - MISC.
YUVEZZI SOLN	-	NC	OPHTHALMIC AGENTS
YUVIWEL INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
zafemy patch (XULANE equiv)	-	$0	CONTRACEPTIVES
zafirlukast tab (ACCOLATE equiv)	-	2	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
zaleplon cap (SONATA equiv) (QL= 1 cap/day)	QL	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZANAFLEX CAP	-	NC	MUSCULOSKELETAL THERAPY AGENTS
ZANAFLEX TAB	-	NC	MUSCULOSKELETAL THERAPY AGENTS
ZARONTIN CAP	-	NC	ANTICONVULSANTS
ZARONTIN SOLN	-	NC	ANTICONVULSANTS
ZARXIO INJ	SP	4	HEMATOPOIETIC AGENTS
ZAVESCA CAP	-	NC	HEMATOPOIETIC AGENTS
ZAVZPRET NASAL SPRAY (QL= 6 units/fill; 60 units/365 days)	PA-QL	2	MIGRAINE PRODUCTS
ZECUITY PAD	-	NC	MIGRAINE PRODUCTS
ZEGALOGUE INJ (QL= 2 inj/fill)	QL	2	ANTIDIABETICS
ZEGERID POWDER PACK	-	NC	ULCER DRUGS
ZEJULA TAB (QL= 1 tab/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZELAPAR ODT	-	NC	ANTIPARKINSON AGENTS
ZELBORAF TAB (QL= 8 tabs/day)	PA-QL-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZELSUVMI GEL	-	NC	DERMATOLOGICALS
ZEMPLAR CAP	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZENBEXUS CAP	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZENPEP CAP	-	2	DIGESTIVE AIDS
zenzedi tab 10mg (DEXEDRINE equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
zenzedi tab 5mg (DEXEDRINE equiv)	-	NC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ZEPATIER TAB	-	NC	ANTIVIRALS
ZEPBOUND INJ	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ZEPBOUND KWIKPEN INJ	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ZEPBOUND VIAL INJ	-	EXC	ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/A NOREXIANTS
ZEPOSIA CAP (QL= 1 cap/day)	PA-QL-SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZEPOSIA STARTER PACK (QL= 1 cap/day)	PA-QL-SP	4	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
ZERVIATE OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ZESTORETIC TAB	-	NC	ANTIHYPERTENSIVES
ZETIA TAB	-	NC	ANTIHYPERLIPIDEMICS
ZIAC TAB	-	NC	ANTIHYPERTENSIVES
ZIAGEN SOLN	-	NC	ANTIVIRALS
ZIAGEN TAB	-	NC	ANTIVIRALS
ZIANA GEL	-	NC	DERMATOLOGICALS
zidovudine cap (RETROVIR equiv)	-	2	ANTIVIRALS
zidovudine syrup (RETROVIR equiv)	-	2	ANTIVIRALS
zidovudine tab (RETROVIR equiv)	-	2	ANTIVIRALS
ZIEXTENZO INJ	-	NC	HEMATOPOIETIC AGENTS
ZILACAINE PAK	-	NC	DERMATOLOGICALS
ZILBRYSQ INJ (QL= 1 inj/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
ZILBRYSQ INJ 23MG (QL= 1 inj/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
ZILBRYSQ INJ 32.4MG (QL= 1 inj/day)	PA-QL-SP	4	HEMATOLOGICAL AGENTS - MISC.
zileuton ER tab (ZYFLO CR equiv)	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ZILXI FOAM	-	NC	DERMATOLOGICALS
ZIMHI SOLN	-	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
ZINBRYTA INJ	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZINC GLUCONATE TAB	OTC	1	MINERALS & ELECTROLYTES
ZIOPTAN OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ziprasidone cap (GEODON equiv)	-	1	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ZIPSOR CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ZIRGAN OPHTH GEL	-	2	OPHTHALMIC AGENTS
ZITHROMAX POWDER PACK	-	3	MACROLIDES
ZITHROMAX SUSP	-	NC	MACROLIDES
ZITHROMAX TAB	-	NC	MACROLIDES
ZITUVIMET XR TAB	-	NC	ANTIDIABETICS
ZITUVIO TAB	-	NC	ANTIDIABETICS
ZOCOR TAB	-	NC	ANTIHYPERLIPIDEMICS
ZOCOR TAB 80MG	-	NC	ANTIHYPERLIPIDEMICS
ZOFRAN ODT	-	NC	ANTIEMETICS
ZOFRAN SOLN	-	NC	ANTIEMETICS
ZOFRAN TAB	-	NC	ANTIEMETICS
ZOKINVY CAP (QL= 4 caps/day)	PA-QL-SP	4	MISCELLANEOUS THERAPEUTIC CLASSES
ZOLINZA CAP	PA-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
zolmitriptan nasal spray (ZOLMITRIPTAN, ZOMIG equiv) (QL= 6 sprays/fill, 2 fills/30 days)	QL	3	MIGRAINE PRODUCTS
zolmitriptan ODT (ZOMIG equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS
ZOLMITRIPTAN SPRAY (QL= 6 sprays/fill, 2 fills/30 days)	QL	3	MIGRAINE PRODUCTS
ZOLMITRIPTAN SPRAY, ZOMIG SPRAY	-	NC	MIGRAINE PRODUCTS
zolmitriptan tab (ZOMIG equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1	MIGRAINE PRODUCTS
ZOLOFT CONC	-	NC	ANTIDEPRESSANTS
ZOLOFT TAB	-	NC	ANTIDEPRESSANTS
ZOLPAK KIT	-	NC	DERMATOLOGICALS

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Drug Name	Special Code	Tier	Category
ZOLPIDEM CAP	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
zolpidem ER tab (AMBIEN CR equiv) (QL= 1 tab/day)	QL	1	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
zolpidem tab (AMBIEN equiv) (QL= 1 tab/day)	QL	1	HYPNOTICS
zolpidem tartrate SL tab (INTERMEZZO equiv)	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZOLPIDEM TARTRATE SL TAB 1.75MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZOLPIDEM TARTRATE SL TAB 3.5MG	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZOLPIMIST SPRAY	-	NC	HYPNOTICS/SEDATIVES/SLEEP DISORDEI AGENTS
ZOLYMBUS OPHTH GEL	-	NC	OPHTHALMIC AGENTS
ZOMACTON INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZOMIG SPRAY (QL= 6 sprays/fill, 2 fills/30 days)	QL	3	MIGRAINE PRODUCTS
ZOMIG TAB	-	NC	MIGRAINE PRODUCTS
ZONATUSS CAP 150MG	-	NC	COUGH/COLD/ALLERGY
ZONEGRAN CAP	-	NC	ANTICONVULSANTS
ZONISADE SUSP (Prior Authorization required for members age 9 years and older)	PA	3	ANTICONVULSANTS
zonisamide cap (ZONEGRAN equiv)	-	1	ANTICONVULSANTS
ZONTIVITY TAB (Restricted to Cardiology Specialist)	RS	3	HEMATOLOGICAL AGENTS - MISC.
ZORTRESS TAB	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES
ZORVOLEX CAP	-	NC	ANALGESICS - ANTI-INFLAMMATORY
ZORYVE CREAM (QL= 60 grams/30 days)	PA-QL	2	DERMATOLOGICALS
ZORYVE CREAM 0.05%	-	NC	DERMATOLOGICALS
ZORYVE CREAM 0.15%	-	NC	DERMATOLOGICALS
ZORYVE FOAM (QL= 60 grams/30 days)	PA-QL	2	DERMATOLOGICALS
ZOVIRAX CAP	-	NC	ANTIVIRALS
ZOVIRAX CREAM	-	NC	DERMATOLOGICALS
ZOVIRAX OINT	-	NC	DERMATOLOGICALS
ZOVIRAX SUSP	-	NC	ANTIVIRALS
ZOVIRAX TAB	-	NC	ANTIVIRALS
ZTALMY SUSP (QL= 1100ml/30 days)	PA-QL-SP	4	ANTICONVULSANTS
ZUBSOLV SL TAB	-	2	ANALGESICS - OPIOID
ZUNVEYL TAB	-	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZUPLENZ SL FILM	-	NC	ANTIEMETICS
ZURAMPIC TAB	-	NC	GOUT AGENTS
ZURNAI INJ	-	2	ANTIDOTES AND SPECIFIC ANTAGONISTS
ZURZUVAE CAP 20MG, 25MG (QL= 28 caps/365 days)	PA-QL-SP	4	ANTIDEPRESSANTS
ZURZUVAE CAP 30MG (QL= 14 caps/365 days)	PA-QL-SP	4	ANTIDEPRESSANTS
ZYBAN TAB	SMKG	NC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ZYCLARA CREAM	-	NC	DERMATOLOGICALS
ZYCUBO INJ	-	NC	MINERALS & ELECTROLYTES
ZYDELIG TAB	PA-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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ZYFLO TAB	-	NC	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
ZYKADIA TAB (QL= 3 tabs/day)	PA-QL-SF-SP	4	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYLET OPHTH SUSP	-	NC	OPHTHALMIC AGENTS
ZYLOPRIM TAB	-	NC	GOUT AGENTS
ZYLOTROL-L KIT	-	NC	DERMATOLOGICALS
ZYMAXID OPHTH SOLN	-	NC	OPHTHALMIC AGENTS
ZYMFENTRA INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
ZYPITAMAG TAB	-	NC	ANTIHYPERLIPIDEMICS
ZYPREXA RELPREVV INJ	-	2	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ZYPREXA TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ZYPREXA ZYDIS TAB	-	NC	ANTIPSYCHOTICS/ANTIMANIC AGENTS
ZYRTEC CHILD CHEW ALLERGY	OTC	NC	ANTIHISTAMINES
ZYVOX SUSP	-	NC	ANTI-INFECTIVE AGENTS - MISC.
ZYVOX TAB	-	NC	ANTI-INFECTIVE AGENTS - MISC.

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DrugName	Special Code	Tier
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
amphetamine/dextroamphetamine ER cap (ADDERALL XR equiv)	-	1
amphetamine/dextroamphetamine tab (ADDERALL equiv)	-	1
dextroamphetamine ER cap (DEXEDRINE equiv)	-	1
dextroamphetamine tab (DEXEDRINE equiv)	-	1
lisdexamfetamine chew tab (VYVANSE equiv) (Members age 7 years and older require Prior Authorization)	PA	1
lisdexamfetamine dimesylate cap (VYVANSE equiv)	-	1
VYVANSE CAP	-	2
VYVANSE CHEW TAB (Members age 7 years or older require Prior Authorization)	PA	2
dextroamphetamine soln (PROCENTRA equiv)	-	3
ADDERALL TAB	-	NC
ADDERALL XR CAP	-	NC
ADZENYS ER SUSP	-	NC
ADZENYS XR ODT	-	NC
amphetamine er odt (ADZENYS XR equiv)	-	NC
AMPHETAMINE ER SUSP, DYANAVEL XR SUSP	-	NC
amphetamine tab (EVEKEO equiv)	-	NC
amphetamine-dextroamphetamine 3-bead cap er 24hr 12.5mg (MYDAYIS equiv)	-	NC
amphetamine-dextroamphetamine 3-bead cap er 24hr 25mg (MYDAYIS equiv)	-	NC
amphetamine-dextroamphetamine 3-bead cap er 24hr 37.5mg (MYDAYIS equiv)	-	NC
amphetamine-dextroamphetamine 3-bead cap er 24hr 50mg (MYDAYIS equiv)	-	NC
ARYNTA SOLN	-	NC
DEXEDRINE CAP	-	NC
dextroamphetamine sulfate tab 15mg (ZENZEDI equiv)	-	NC
dextroamphetamine sulfate tab 2.5mg (ZENZEDI equiv)	-	NC
dextroamphetamine sulfate tab 20mg (ZENZEDI equiv)	-	NC
dextroamphetamine sulfate tab 30mg (ZENZEDI equiv)	-	NC
dextroamphetamine sulfate tab 7.5mg (ZENZEDI equiv)	-	NC
DYANAVEL XR CHEW	-	NC
EVEKEO ODT	-	NC
methamphetamine hcl tab (METHAMPHETAMINE equiv)	-	NC
MYDAYIS CAP 12.5MG	-	NC
MYDAYIS CAP 25MG	-	NC
MYDAYIS CAP 37.5MG	-	NC
MYDAYIS CAP 50MG	-	NC
XELSTRYM PAD	-	NC
zenzedi tab 10mg (DEXEDRINE equiv)	-	NC
zenzedi tab 5mg (DEXEDRINE equiv)	-	NC
ANALEPTICS		
caffeine citrate soln (CAFCIT equiv) (Covered for members age 11 months and younger)	-	2
CAFCIT INJ	-	NC
ANOREXIANTS NON-AMPHETAMINE		
benzphetamine tab	-	EXC
DIETHYLPROPION ER TAB	-	EXC
diethylpropion tab	-	EXC

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ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS Cont.		
PHENDIMETRAZINE ER TAB	-	EXC
phendimetrazine tab (BONTRIL PDM equiv)	-	EXC
PLENITY CAP	-	EXC
ANTI-OBESITY AGENTS		
FOUNDAYO TAB	-	EXC
liraglutide (weight mngmt) soln pen-inj (SAXENDA equiv)	-	EXC
SAXENDA INJ	-	EXC
WEGOVY HD INJ 7.2MG/0.75ML	-	EXC
WEGOVY INJ	-	EXC
WEGOVY INJ 1.7MG/0.75ML	-	EXC
WEGOVY INJ 2.4MG/0.75ML	-	EXC
WEGOVY TAB	-	EXC
XENICAL CAP	-	EXC
ZEPBOUND INJ	-	EXC
ZEPBOUND KWIKPEN INJ	-	EXC
ZEPBOUND VIAL INJ	-	EXC
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
atomoxetine cap (STRATTERA equiv)	-	1
clonidine ER tab (KAPVAY equiv)	-	1
guanfacine ER tab (INTUNIV equiv)	-	1
ATONCY SOLN, ATOMOXETINE HCL SOLN	-	NC
INTUNIV TAB	-	NC
KAPVAY TAB	-	NC
ONYDA XR SUSP	-	NC
QELBREE ER CAP	-	NC
STRATTERA CAP	-	NC
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI TAB (QL= 1 tab/day)	PA-QL	2
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS		
WAKIX TAB (QL= 2 tabs/day)	PA-QL-SP	4
STIMULANTS - MISC.		
armodafinil tab (NUVIGIL equiv) (QL= 1 tab/day)	QL	1
dexmethylphenidate ER cap (FOCALIN XR equiv)	-	1
dexmethylphenidate tab (FOCALIN equiv)	-	1
methylphenidate chew tab (METHYLIN equiv) (Members age 7 years and older reuire Prior Authorization)	PA	1
methylphenidate ER cap (RITALIN LA equiv)	-	1
METHYLPHENIDATE ER TAB	-	1
methylphenidate ER tab (CONCERTA equiv)	-	1
METHYLPHENIDATE ER TAB 27MG	-	1
METHYLPHENIDATE ER TAB 36MG	-	1
METHYLPHENIDATE ER TAB 54MG	-	1
methylphenidate soln (METHYLIN equiv) (Members age 7 years and older require Prior Authorization)	PA	1
methylphenidate tab (RITALIN equiv)	-	1
modafinil tab (PROVIGIL equiv) (QL= 2 tabs/day)	QL	1
methylphenidate CD cap (METADATE CD equiv)	-	2

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ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS Cont.		
methylphenidate ER cap (APTENSIO XR equiv)	-	2
AZSTARYS CAP	-	NC
CONCERTA TAB, RITALIN SR TAB	-	NC
COTEMPLA XR TAB, METHYLPHENIDATE ER TAB	-	NC
FOCALIN TAB	-	NC
FOCALIN XR CAP	-	NC
METHYLIN SOLN	-	NC
methylphenidate ER tab 72mg	-	NC
METHYLPHENIDATE ER TAB, RELEXXII TAB	-	NC
methylphenidate td patch (DAYTRANA equiv)	-	NC
NUVIGIL TAB	-	NC
PROVIGIL TAB	-	NC
QUILLICHEW ER TAB	-	NC
QUILLIVANT XR SUSP	-	NC
RELEXXI ER TAB	-	NC
RITALIN LA CAP, APTENSIO XR CAP	-	NC
RITALIN TAB	-	NC
ALLERGENIC EXTRACTS/BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
ODACTRA SL TAB	PA	3
PALFORZIA POWDER PACK	PA-SP	4
PALFORZIA SPRINKLE CAP	PA-SP	4
TRICHOPHYTON MENTAGROPHYTES SOLN	-	NC
ALTERNATIVE MEDICINES		
ALTERNATIVE MEDICINE - R'S		
RESERVAPAK SYRUP	-	NC
AMEBICIDES		
AMEBICIDES		
SOLOSEC GRANULES PACKET (QL= 1 packet/fill)	PA-QL	3
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
neomycin tab	-	1
tobramycin neb soln (TOBI equiv) (Restricted to Infectious Disease or Pulmonology Specialist)	RS-SP	1
ARIKAYCE SUSP (QL= 1 vial/day)	PA-QL-SP	4
TOBI PODHALER	PA-SP	4
HUMATIN CAP	-	NC
KITABIS PAK NEB SOLN	-	NC
tobramycin neb soln (BETHKIS equiv)	-	NC
ANALGESICS - ANTI-INFLAMMATORY		
ANTIRHEUMATIC - ENZYME INHIBITORS		
tofacitinib citrate ER tab (XELJANZ equiv) (QL= 1 tab/day)	PA-QL-SP	1
tofacitinib citrate oral soln (XELJANZ equiv) (QL= 10ml/day)	PA-QL-SP	1
tofacitinib citrate tab (XELJANZ equiv) (QL= 2 tabs/day)	PA-QL-SP	1
OLUMIANT TAB (QL= 1 tab/day)	PA-QL-SP	4

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ANALGESICS - ANTI-INFLAMMATORY Cont.		
RINVOQ ER TAB	-	NC
RINVOQ ORAL SOLN	-	NC
XELJANZ ORAL SOLN	-	NC
XELJANZ TAB	-	NC
XELJANZ XR TAB	-	NC
ANTIRHEUMATIC ANTIMETABOLITES		
REDITREX INJ	-	NC
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
ADALIMUMAB FKJP KIT INJ 20MG/0.4ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 20 MG/0.2 ML PFS (2 SYRINGE) KIT (YUFLYMA equiv) (QL= 1 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (1 PEN) KIT (YUFLYMA equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (2 PEN) KIT (YUFLYMA equiv) (QL= 1 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 40 MG/0.4 ML PFS (2 SYRINGE) KIT (YUFLYMA equiv) (QL= 1 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 80 MG/0.8 ML PEN (1 PEN) KIT (YUFLYMA equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-AATY 80MG/0.8ML PEN (3 PEN) KIT (YUFLYMA equiv) (QL= 1 kit/fill; 1 fill/plan year)	PA-QL-SP	4
ADALIMUMAB-ADAZ INJ (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-ADAZ INJ (HYRIMOZ equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-ADAZ INJ 10/0.1ML (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-ADAZ PFS INJ (HYRIMOZ equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-FKJP AUTO-INJECTOR KIT (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40MG/0.8ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-FKJP PFS KIT 20 MG/0.4ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
ADALIMUMAB-FKJP PFS KIT 40 MG/0.8ML (HULIO equiv) (QL= 2 inj/28 days)	PA-QL-SP	4
SIMLANDI AUTO-INJECTOR KIT 40MG/0.4 ML (QL= 2 inj/28 days)	PA-QL-SP	4
SIMLANDI AUTO-INJECTOR KIT 80MG/0.8 ML (QL= 2 inj/28 days)	PA-QL-SP	4
SIMLANDI INJ (adalimumab-ryvk) (QL= 2 inj/28 days)	PA-QL-SP	4
SIMLANDI KIT (adalimumab-ryvk) (QL= 2 inj/28 days)	PA-QL-SP	4
SIMPONI AUTO-INJECTOR 100MG (QL=1 inj/28 days)	PA-QL-SP	4
SIMPONI INJ 100MG (QL=1 inj/28 days)	PA-QL-SP	4
ABRILADA INJ	-	NC
ADALIMUMAB-RYVK AUTO-INJECTOR KIT (TEVA) 80MG/0.8ML	-	NC
ADALIMUMAB-RYVK AUTO-INJECTOR KIT (TEVA) 40MG/0.4ML	-	NC
ADALIMUMAB-RYVK INJ	-	NC
ADALIMUMAB-RYVK INJ (SIMLANDI equiv)	-	NC
AMJEVITA AUTO-INJECTOR (adalimumab-atto)	-	NC
AMJEVITA INJ (adalimumab-atto)	-	NC
CYLTEZO AUTO-INJECTOR KIT (adalimumab-adbm)	-	NC
CYLTEZO INJ (adalimumab-adbm)	-	NC
HADLIMA INJ (adalimumab-bwwd)	-	NC
HADLIMA INJ 40MG/0.8ML (adalimumab-bwwd)	-	NC
HADLIMA PUSH INJ (adalimumab-bwwd)	-	NC
HADLIMA PUSH INJ 40MG/0.8ML (adalimumab-bwwd)	-	NC
HULIO INJ (adalimumab-fkjp)	-	NC
HULIO KIT (adalimumab-fkjp)	-	NC
HUMIRA INJ 10MG	-	NC

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ANALGESICS - ANTI-INFLAMMATORY Cont.		
HUMIRA INJ 20MG	-	NC
HUMIRA INJ 40MG	-	NC
HUMIRA INJ 80MG	-	NC
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK	-	NC
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK	-	NC
HUMIRA INJ PEDIATRIC UC STARTER PACK	-	NC
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK	-	NC
HUMIRA PEN INJ 40MG	-	NC
HYRIMOZ INJ (adalimumab-adaz)	-	NC
HYRIMOZ PFS INJ (adalimumab-adaz)	-	NC
IDACIO INJ (adalimumab-aacf)	-	NC
SIMPONI AUTO-INJECTOR 50MG	-	NC
SIMPONI INJ 50MG	-	NC
YUFLYMA INJ KIT (adalimumab-aaty)	-	NC
YUFLYMA KIT (adalimumab-aaty)	-	NC
YUSIMRY INJ (adalimumab-aqvh)	-	NC
GOLD COMPOUNDS		
AURANOFIN CAP, RIDAURA CAP	-	NC
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA)		
KINERET INJ (QL= 1 inj/day)	PA-QL-SP	4
INTERLEUKIN-6 RECEPTOR INHIBITORS		
AVTOZMA INJ (QL= 2 inj/28 days)	PA-QL	4
KEVZARA INJ (QL= 2 inj/28 days)	PA-QL-SP	4
TYENNE INJ (QL= 2 inj/28 days)	PA-QL-SP	4
ACTEMRA ACTPEN INJ	-	NC
ACTEMRA SC INJ	-	NC
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
celecoxib cap (CELEBREX equiv)	-	1
diclofenac potassium tab (CATAFLAM equiv)	-	1
diclofenac sodium EC tab (VOLTAREN equiv)	-	1
diclofenac sodium XR tab (VOLTAREN XR equiv)	-	1
etodolac cap (LODINE equiv)	-	1
etodolac tab	-	1
ibuprofen susp (Rx ONLY) (ADVIL, MOTRIN equiv)	-	1
ibuprofen tab	-	1
ibuprofen tab (RX only)	-	1
indomethacin cap (INDOCIN equiv)	-	1
indomethacin CR cap (INDOCIN SR equiv)	-	1
ketorolac inj 15mg/ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1
ketorolac inj 30mg/ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1
ketorolac inj 60mg/2ml (TORADOL equiv) (QL= 20ml/5 days)	QL	1
ketorolac tab (TORADOL equiv) (QL= 20 tabs/5 days)	QL	1
meloxicam tab (MOBIC equiv)	-	1
nabumetone tab (RELAFEN equiv)	-	1
naproxen sodium tab (ANAPROX equiv)	-	1

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ANALGESICS - ANTI-INFLAMMATORY Cont.		
naproxen tab (NAPROSYN equiv)	-	1
piroxicam cap (FELDENE equiv)	-	1
sulindac tab (CLINORIL equiv)	-	1
mefenamic acid cap (PONSTEL equiv)	-	2
naproxen EC tab (NAPROSYN EC equiv)	-	2
oxaprozin tab (DAYPRO equiv)	-	2
diclofenac/misoprostol DR tab (ARTHROTEC equiv)	-	3
etodolac ER tab (LODINE XL equiv)	-	3
ANAPROX TAB	-	NC
ARTHROTEC TAB	-	NC
CELEBREX CAP	-	NC
COMBOGESIC TAB	-	NC
COXANTO CAP	-	NC
DAYPRO TAB	-	NC
DICLOFENAC CAP	-	NC
diclofenac potassium cap (ZIPSOR equiv)	-	NC
diclofenac potassium tab 25mg (DICLOFENAC equiv)	-	NC
FELDENE CAP	-	NC
fenoprofen calcium cap (NALFON equiv)	-	NC
FENOPROFEN CAP, NAFLON CAP	-	NC
FENOPROFEN TAB	-	NC
FENOPRON CAP	-	NC
FLURBIPROFEN TAB	-	NC
flurbiprofen tab (ANSAID equiv)	-	NC
IBU 600-EZS KIT	-	NC
IBUPROFEN TAB	-	NC
ibuprofen-famotidine tab (DUEXIS equiv)	-	NC
INDOCIN SUPP	-	NC
INDOCIN SUSP	-	NC
INDOMETHACIN CAP, TIVORBEX CAP	-	NC
indomethacin suppository (INDOCIN equiv)	-	NC
indomethacin susp (INDOCIN equiv)	-	NC
INFLATHERM PAK	-	NC
KETOPROFEN CAP	-	NC
KETOPROFEN ER CAP	-	NC
KETOROLAC INJ	-	NC
ketorolac inj (TORADOL equiv)	-	NC
MECLOFENAMATE CAP	-	NC
meloxicam cap (VIVLODEX equiv)	-	NC
MELOXICAM COMFORT KIT	-	NC
MELOXICAM SUSP, ZYBIC SUSP	-	NC
MOBIC TAB	-	NC
MOTRIN SUSP	-	NC
NAFLON CAP	-	NC
NAPRELAN CR TAB	-	NC
NAPROSYN EC TAB	-	NC

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DrugName	Special Code	Tier
ANALGESICS - ANTI-INFLAMMATORY Cont.		
NAPROSYN EC TAB 500MG	-	NC
NAPROSYN TAB	-	NC
naproxen EC tab 500mg (NAPROSYN EC equiv)	-	NC
NAPROXEN SOD ER TAB	-	NC
naproxen sodium CR tab (NAPRELAN CR equiv)	-	NC
NAPROXEN SUSP	-	NC
naproxen susp (NAPROSYN equiv)	-	NC
naproxen/esomeprazole magnesium DR tab (VIMOVO equiv)	-	NC
ORUDIS CAP	-	NC
QMIIZ ODT TAB	-	NC
RELAFEN DS TAB	-	NC
SPRIX NASAL SPRAY	-	NC
TOLECTIN DS CAP, TOLMETIN CAP	-	NC
TOLMETIN TAB, TOLECTIN TAB	-	NC
TOLMETIN, TOLECTIN TAB	-	NC
VIMOVO TAB	-	NC
VIVLODEX CAP	-	NC
VYSCOXA SUSP	-	NC
YBUPHEN TAB	-	NC
ZIPSOR CAP	-	NC
ZORVOLEX CAP	-	NC
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
OTEZLA STARTER PACK (QL= 1 pack/28 days)	PA-QL-SP	4
OTEZLA TAB (QL= 2 tabs/day)	PA-QL-SP	4
OTEZLA XR TAB (QL= 1 tab/day)	PA-QL-SP	4
OTEZLA/OTEZLA XR STARTER PACK (QL= 1 pack/28 day)	PA-QL-SP	4
PYRIMIDINE SYNTHESIS INHIBITORS		
leflunomide tab (ARAVA equiv)	-	1
ARAVA TAB	-	NC
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA CLICK INJ (QL= 4 inj/28 days)	PA-QL-SP	4
ORENCIA SC INJ 125MG/ML (QL= 4 inj/28 days)	PA-QL-SP	4
ORENCIA SC INJ 50MG/0.4ML (QL= 4 inj/28 days)	PA-QL-SP	4
ORENCIA SC INJ 87.5MG/0.7ML (QL= 4 inj/28 days)	PA-QL-SP	4
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS		
ENBREL INJ 25MG (QL= 8 inj/28 days)	PA-QL-SP	4
ENBREL INJ 50MG (QL= 4 inj/28 days)	PA-QL-SP	4
ENBREL MINI INJ (QL= 4 inj/28 days)	PA-QL-SP	4
ENBREL SURECLICK INJ 50MG (QL= 4 inj/28 days)	PA-QL-SP	4
ANALGESICS - NONNARCOTIC		
ANALGESIC COMBINATIONS		
ALLZITAL TAB	-	NC
butalbital/acetaminophen cap	-	NC
butalbital/acetaminophen/caffeine soln	-	NC
butalbital/acetaminophen/caffeine tab (FIORICET equiv)	-	NC

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ANALGESICS - NONNARCOTIC Cont.		
BUTALBITAL/ASPIRIN/CAFFEINE TAB	-	NC
DOLGIC PLUS TAB	-	NC
ESGIC TAB	-	NC
FIORICET CAP	-	NC
FIORINAL CAP	-	NC
VTOL SOLN	-	NC
ANALGESICS - SODIUM CHANNEL PAIN SIGNAL INHIBITORS		
JOURNAVX TAB	-	NC
SALICYLATES		
aspirin chew tab 81mg (Covered for female members only)	OTC	$0
aspirin EC tab 325mg	OTC	$0
aspirin ec tab 81mg (Covered for female members only)	OTC	$0
aspirin tab 325mg	OTC	$0
diflunisal tab (DOLOBID equiv)	-	1
ASPIRIN EC TAB 325MG	OTC	NC
DOLOBID TAB	-	NC
SALSALATE TAB	-	NC
salsalate tab (DISALCID equiv)	-	NC
ANALGESICS - OPIOID		
OPIOID AGONISTS		
CODEINE SULFATE TAB	-	1
DISKETS TAB (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1
hydromorphone tab (DILAUDID equiv)	-	1
methadone soln (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1
methadone tab (DOLOPHINE equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1
methadose tab (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1
morphine sulfate ER tab (MS CONTIN equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	1
morphine sulfate oral soln 10mg/5ml (MORPHINE SULFATE equiv)	-	1
morphine sulfate soln	-	1
morphine sulfate tab	-	1
oxycodone cap (OXYIR equiv)	-	1
oxycodone tab (ROXICODONE equiv)	-	1
tramadol tab (ULTRAM equiv)	-	1
fentanyl patch (DURAGESIC equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	2
HYDROCODONE BITARTRATE ER CAP (QL= 2 caps/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2
HYDROCODONE BITARTRATE ER TAB (QL= 1 tab/day; Step Therapy requires step through IR opioid if opioid naïve (Opioi ER Dependency))	QL-ST	2
hydrocodone bitartrate er tab (HYSINGLA equiv) (QL= 1 tab/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2
MORPHINE SULFATE SUPP	-	2
NUCYNTA ER TAB (QL= 2 tabs/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2
oxycodone conc (ROXICODONE equiv)	-	2
oxycodone soln (ROXICODONE equiv)	-	2

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ANALGESICS - OPIOID Cont.		
XTAMPZA ER CAP (QL= 120 caps/30 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	2
NUCYNTA TAB	-	3
tapentadol hcl tab (NUCYNTA equiv)	-	3
tramadol ER tab (ULTRAM ER equiv) (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	3
TRAMADOL HCL ER TAB (Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	ST	3
ABSTRAL SL TAB	-	NC
ACTIQ LOZENGE	-	NC
DILAUDID TAB	-	NC
DSUVIA SL TAB	-	NC
FENTANYL BUCCAL TAB	-	NC
FENTANYL CITRATE LOLLIPOP	-	NC
fentanyl citrate lollipop (ACTIQ equiv)	-	NC
fentanyl patch 37.5mcg, 62.5mcg, 87.5mcg (FENTANYL equiv)	-	NC
FENTORA TAB	-	NC
hydromorphone ER tab (EXALGO TAB equiv)	-	NC
HYDROMORPHONE SUPP	-	NC
HYSINGLA ER TAB	-	NC
LAZANDA NASAL SPRAY	-	NC
levorphanol tab (LEVORPHANOL equiv)	-	NC
meperidine tab (DEMEROL equiv)	-	NC
METHADOSE CONC	-	NC
MORPHABOND TAB	-	NC
MORPHINE SULFATE ER BEAD CAP	-	NC
MORPHINE SULFATE ORAL SOLN 100MG/5ML	-	NC
MORPHINE SULFATE SOLN 20MG/5ML	-	NC
MORPHINE SULFATE TAB	-	NC
MS CONTIN TAB	-	NC
OPANA TAB	-	NC
OXYCODONE TAB	-	NC
OXYCONTIN CR TAB	-	NC
OXYMORPHONE ER TAB	-	NC
oxymorphone tab (OPANA equiv)	-	NC
QDOLO SOLN, TRAMADOL SOLN	-	NC
ROXICODONE TAB	-	NC
ROXYBOND TAB	-	NC
RYBIX ODT	-	NC
SUBSYS SPRAY	-	NC
TAPENTADOL ER TAB 100MG	-	NC
TAPENTADOL ER TAB 150MG	-	NC
TAPENTADOL ER TAB 200MG	-	NC
TAPENTADOL ER TAB 250MG	-	NC
TAPENTADOL ER TAB 50MG	-	NC
TAPENTADOL SOLN	-	NC
TRAMADOL ER CAP	-	NC
TRAMADOL HCL TAB	-	NC

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DrugName	Special Code	Tier
ANALGESICS - OPIOID Cont.		
tramadol hcl tab 100mg	-	NC
ULTRAM TAB	-	NC
OPIOID COMBINATIONS		
acetaminophen/codeine tab (TYLENOL/CODEINE equiv)	-	1
hydrocodone/acetaminophen soln (HYCET, LORTAB equiv)	-	1
hydrocodone/acetaminophen tab (LORTAB equiv)	-	1
oxycodone/acetaminophen tab (PERCOCET equiv)	-	1
tramadol/acetaminophen tab (ULTRACET equiv)	-	1
APAP/CODEINE SOLN	-	2
OXYCODONE/ACETAMINOPHEN SOLN	-	2
hydrocodone/acetaminophen soln 10-325 mg/15ml (HYCET equiv)	-	3
hydrocodone/acetaminophen tab 2.5-325mg (NORCO equiv)	-	3
hydrocodone/ibuprofen tab (VICOPROFEN equiv)	-	3
HYDROCODONE/IBUPROFEN TAB 10-200MG	-	3
LORTAB ELIXIR	-	3
ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE TAB	-	NC
APADAZ TAB	-	NC
FIORICET/CODEINE CAP	-	NC
FIORINAL/CODEINE CAP	-	NC
hydrocodone/acetaminophen tab 10mg-300mg (XODOL equiv)	-	NC
hydrocodone/acetaminophen tab 5mg-300mg (XODOL equiv)	-	NC
hydrocodone/acetaminophen tab 7.5mg-300mg (XODOL equiv)	-	NC
LORTAB	-	NC
OXYCODONE/ACETAMINOPHEN SOLN 10-300MG/5ML, PROLATE SOLN 10-300MG/5ML	-	NC
OXYCODONE/ACETAMINOPHEN TAB 2.5-300MG	-	NC
PERCOCET TAB	-	NC
PRIMLEV TAB 10-300MG	-	NC
PRIMLEV TAB 5-300MG	-	NC
PROLATE TAB 7.5-300MG	-	NC
ROXICET SOLN	-	NC
SEGLENTIS TAB	-	NC
TREZIX CAP, ACETAMINOPHEN/CAFFEINE/DIHYDROCODEINE CAP	-	NC
TYLENOL/CODEINE TAB	-	NC
ULTRACET TAB	-	NC
VERDROCET TAB 2.5MG-325MG	-	NC
VICOPROFEN TAB	-	NC
XODOL TAB 10MG-300MG	-	NC
XODOL TAB 5MG-300MG	-	NC
XODOL TAB 7.5MG-300MG	-	NC
OPIOID PARTIAL AGONISTS		
buprenorphine SL tab (SUBUTEX equiv)	-	1
buprenorphine/naloxone sl film (SUBOXONE SL FILM equiv)	-	1
buprenorphine/naloxone SL tab (SUBOXONE equiv)	-	1
butorphanol nasal spray (STADOL equiv) (QL= 1 bottle/fill, 2 fills/30 days)	QL	2
ZUBSOLV SL TAB	-	2

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ANALGESICS - OPIOID Cont.		
buprenorphine patch (BUTRANS equiv) (QL= 4 patches/28 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency))	QL-ST	3
PENTAZOCINE/NALOXONE TAB	-	3
pentazocine/naloxone tab (TALWIN NX equiv)	-	3
BELBUCA FILM	-	NC
BUNAVAIL FILM	-	NC
buprenorphine hcl buccal film (BELBUCA equiv)	-	NC
BUTRANS PATCH	-	NC
SUBOXONE SL FILM	-	NC
ANDROGENS-ANABOLIC		
ANDROGENS		
testosterone cypionate inj (DEPO-TESTOSTERONE equiv)	-	1
danazol cap (DANOCRINE equiv)	-	2
TESTOSTERONE ENANTHATE INJ 200MG/ML (QL= 5ml/fill)	QL	2
TESTOSTERONE GEL 1% 25MG (QL= 1 packet/day)	PA-QL	2
testosterone gel 1% 25mg (ANDROGEL equiv) (QL= 1 packet/day)	PA-QL	2
testosterone gel 1% 50mg (ANDROGEL equiv) (QL= 2 packets/day)	PA-QL	2
testosterone gel 1% pump (VOGELXO GEL, ANDROGEL equiv) (QL= 4 bottles/30 days)	PA-QL	2
TESTOSTERONE GEL PUMP 1% (QL= 4 bottles/30 days)	PA-QL	2
testosterone gel pump 1.62% (ANDROGEL equiv) (QL= 2 bottles/30 days)	PA-QL	2
testosterone soln (AXIRON equiv) (QL= 2 bottles/30 days)	PA-QL	2
METHITEST TAB	PA	3
testosterone gel 1.62% 1.25gm (ANDROGEL equiv) (QL= 1 packet/day)	PA-QL	3
testosterone gel 1.62% 2.5gm (ANDROGEL equiv) (QL= 2 packets/day)	PA-QL	3
TESTOSTERONE GEL 20.25MG/1.25GM (QL= 1 packet/day)	PA-QL	3
ANDROGEL 1% 25MG	-	NC
ANDROGEL 1% 50MG, TESTIM GEL 1%	-	NC
ANDROGEL 1.62% 1.25GM	-	NC
ANDROGEL 1.62% 2.5GM	-	NC
ANDROGEL PUMP 1.62%	-	NC
FORTESTA GEL 2%	-	NC
KYZATREX CAP	-	NC
KYZATREX CAP, JATENZO CAP, TLANDO CAP	-	NC
methyltestosterone cap	-	NC
NATESTO GEL	-	NC
NATESTO NASAL GEL	-	NC
STRIANT FILM	-	NC
TESTOSTERONE GEL 10MG/ACT	-	NC
testosterone gel 2% (FORTESTA equiv)	-	NC
TESTOSTERONE GEL, VOGELXO GEL	-	NC
VOGELXO GEL PUMP 1%	-	NC
XYOSTED INJ	-	NC
ANORECTAL AGENTS		
INTRARECTAL STEROIDS		
hydrocortisone enema (CORTENEMA equiv)	-	2

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DrugName	Special Code	Tier
ANORECTAL AGENTS Cont.		
CORTIFOAM	-	3
CORTENEMA	-	NC
RECTAL COMBINATIONS		
PROCTOFOAM HC FOAM	-	2
ANALPRAM-E KIT	-	3
ANALPRAM-HC CREAM	-	NC
LIDOCAINE/HYDROCORTISONE RECTAL CREAM KIT	-	NC
RECTAL STEROIDS		
proctosol HC cream (ANUSOL HC equiv)	-	1
hydrocortisone supp (ANUSOL HC equiv)	-	2
ANUSOL-HC CREAM	-	NC
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
budesonide rectal foam (UCERIS RECTAL FOAM equiv)	PA	3
UCERIS RECTAL FOAM	-	NC
RECTAL COMBINATIONS		
ANALPRAM HC CREAM 2.5-1%	-	1
HYDROCORTISONE ACETATE/PRAMOXINE CREAM	-	1
LIDOCAINE/HC CREAM	-	2
ANALPRAM-HC CREAM	-	3
ANALPRAM HC CREAM 2.5-1%	-	NC
HYDROCORTISONE/PRAMOXINE SUPP	-	NC
RECTAL LOCAL ANESTHETICS		
LIDOCAINE SUPP	-	NC
RECTAL STEROIDS		
HYDROCORTISONE CREAM	-	1
ANUCORT-HC SUPP 25MG	-	2
ANUCORT-HC SUPP 30MG	-	2
PROCTOCORT SUPP	-	NC
VASODILATING AGENTS		
nitroglycerin oint (RECTIV equiv)	-	NC
RECTIV OINT	-	NC
ANTHELMINTICS		
ANTHELMINTICS		
ivermectin tab (STROMECTOL equiv)	-	1
praziquantel tab (BILTRICIDE equiv)	-	2
albendazole tab (ALBENZA equiv)	-	NC
ALBENZA TAB	-	NC
BILTRICIDE TAB	-	NC
EGATEN TAB	-	NC
EMVERM TAB	-	NC
IVERMECTIN TAB	-	NC
STROMECTOL TAB	-	NC
ANTIANGINAL AGENTS		

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DrugName	Special Code	Tier
ANTIANGINAL AGENTS Cont.		
ANTIANGINALS-OTHER		
ranolazine tab (RANEXA equiv)	-	1
ASPRUZYO SPRINKLE GRANULES	-	NC
RANEXA TAB	-	NC
NITRATES		
isosorbide dinitrate tab (ISORDIL equiv)	-	1
isosorbide mononitrate ER tab (IMDUR equiv)	-	1
isosorbide mononitrate tab (MONOKET equiv)	-	1
NITROGLYCERIN ER CAP	-	1
nitroglycerin patch (NITRO-DUR equiv)	-	1
nitroglycerin SL tab (NITROSTAT equiv)	-	1
nitroglycerin oint	-	2
isosorbide dinitrate tab 40mg (ISORDIL equiv)	-	3
NITRO-DUR PATCH 0.3MG/HR, 0.8MG/HR	-	3
nitroglycerin lingual spray (NITROLINGUAL equiv)	-	3
GONITRO POWDER	-	NC
ISORDIL TITRADOSE TAB	-	NC
ISORDIL TITRADOSE TAB 40MG	-	NC
NITRO-DUR PATCH	-	NC
NITROLINGUAL PUMP SPRAY	-	NC
NITROSTAT SL TAB	-	NC
ANTIANXIETY AGENTS		
ANTIANXIETY AGENTS - MISC.		
buspirone tab (BUSPAR equiv)	-	1
hydroxyzine pamoate cap (VISTARIL equiv)	-	1
hydroxyzine syrup (ATARAX equiv)	-	1
hydroxyzine tab (ATARAX equiv)	-	1
BUCAPSOL CAP	-	NC
BUSPIRONE TAB	-	NC
meprobamate tab (MILTOWN equiv)	-	NC
VISTARIL CAP	-	NC
BENZODIAZEPINES		
alprazolam tab (XANAX equiv)	-	1
chlordiazepoxide cap (LIBRIUM equiv)	-	1
diazepam conc (VALIUM equiv)	-	1
diazepam oral soln 5mg/5ml (DIAZEPAM equiv)	-	1
diazepam tab (VALIUM equiv)	-	1
lorazepam conc (ATIVAN equiv)	-	1
lorazepam tab (ATIVAN equiv)	-	1
alprazolam ER tab (XANAX XR equiv)	-	2
oxazepam cap (SERAX equiv)	-	2
alprazolam ODT (NIRAVAM equiv)	-	3
clorazepate tab (TRANXENE-T equiv)	-	3
ATIVAN TAB	-	NC
LOREEV XR CAP	-	NC

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DrugName	Special Code	Tier
ANTIANXIETY AGENTS Cont.		
NIRAVAM ODT	-	NC
TRANXENE-T TAB	-	NC
VALIUM TAB	-	NC
XANAX TAB	-	NC
XANAX XR TAB	-	NC
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
disopyramide cap (NORPACE equiv)	-	1
quinidine sulfate tab	-	1
NORPACE CR CAP	-	2
quinidine gluconate CR tab	-	2
NORPACE CAP	-	NC
QUINIDINE SULFATE TAB	-	NC
ANTIARRHYTHMICS TYPE I-B		
mexiletine hcl cap	-	2
ANTIARRHYTHMICS TYPE I-C		
flecainide tab (TAMBOCOR equiv)	-	1
propafenone tab (RYTHMOL equiv)	-	1
propafenone ER cap (RYTHMOL SR equiv)	-	2
RYTHMOL SR CAP	-	NC
ANTIARRHYTHMICS TYPE III		
amiodarone tab (CORDARONE equiv)	-	1
dofetilide cap (TIKOSYN equiv)	-	2
MULTAQ TAB	-	2
CORDARONE TAB	-	NC
TIKOSYN CAP	-	NC
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA PEN INJ (QL= 1 inj/56 days)	PA-QL-SP	4
NUCALA INJ (QL= 1 inj/28 days)	PA-QL-SP	4
XOLAIR INJ (QL= 2 inj/28 days)	PA-QL-SP	4
XOLAIR INJ 150MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4
XOLAIR INJ 300MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4
XOLAIR SYRINGE (QL= 2 inj/28 days)	PA-QL-SP	4
XOLAIR SYRINGE 150MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4
XOLAIR SYRINGE 300MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4
OMLYCLO SYRINGE	-	NC
OMLYCLO SYRINGE 150MG/ML	-	NC
OMLYCLO SYRINGE 300MG/2ML	-	NC
ANTI-INFLAMMATORY AGENTS		
cromolyn neb soln (INTAL equiv)	-	NC
BRONCHODILATORS - ANTICHOLINERGICS		
ipratropium neb soln (ATROVENT equiv)	-	1
ATROVENT HFA AERO	-	2

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DrugName	Special Code	Tier
ANTIASTHMATIC AND BRONCHODILATOR AGENTS Cont.		
INCRUSE ELLIPTA INHALER	-	2
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT (QL= 1 inhaler/30 days; Step Therapy requires trial of ADVAIR (FLUTICASONE/SALMETEROL), BREO (FLUTICASONE/VILANTEROL), DULERA (MOMETASONE/FORMOTEROL), or SYMBICORT (BUDESONIDE/FORMOTEROL))	QL-ST	2
ipratropium bromide hfa inhaler aerosol (ATROVENT equiv)	-	NC
SPIRIVA HANDIHALER	-	NC
SPIRIVA RESPIMAT INHALER 2.5MCG/ACT	-	NC
tiotropium bromide cap inhaler (SPIRIVA equiv)	-	NC
TUDORZA PRESSAIR INHALER	-	NC
UMECLIDINIUM ELLIPTA INHALER 62.5MCG/INH	-	NC
YUPELRI SOLN	-	NC
LEUKOTRIENE MODULATORS		
montelukast chew tab (SINGULAIR equiv)	-	1
montelukast tab (SINGULAIR equiv)	-	1
montelukast granule pack (SINGULAIR equiv)	-	2
zafirlukast tab (ACCOLATE equiv)	-	2
ACCOLATE TAB	-	NC
SINGULAIR CHEW TAB	-	NC
SINGULAIR GRANULE PACK	-	NC
SINGULAIR TAB	-	NC
zileuton ER tab (ZYFLO CR equiv)	-	NC
ZYFLO TAB	-	NC
PHOSPHODIESTERASE 3 & 4 (PDE3 & PDE4) INHIBITORS		
OHTUVAYRE SUSP	-	NC
SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS		
roflumilast tab	-	1
DALIRESP TAB	-	NC
STEROID INHALANTS		
budesonide inh susp (PULMICORT equiv)	-	1
ALVESCO INHALER	-	2
ARNUITY ELLIPTA INHALER	-	2
ASMANEX HFA INHALER	-	2
ASMANEX INHALER	-	2
FLUTICASONE HFA INHALER	-	2
fluticasone propionate hfa inhal aero (FLUTICASONE equiv)	-	2
QVAR REDIHALER	-	2
ARMONAIR DIGITAL INHALER 113MCG/ACT	-	NC
ARMONAIR DIGITAL INHALER 232MCG/ACT	-	NC
ARMONAIR DIGITAL INHALER 55MCG/ACT	-	NC
FLOVENT DISKUS INHALER	-	NC
FLOVENT HFA INHALER	-	NC
FLUTICASONE DISKUS INHALER	-	NC
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 100MCG/ACT	-	NC
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 200MCG/ACT	-	NC
FLUTICASONE FUROATE AEROSOL POWDER BREATH ACTIV 50MCG/ACT	-	NC

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ANTIASTHMATIC AND BRONCHODILATOR AGENTS Cont.		
FLUTICASONE PROPIONATE DISKUS INHALER 100MCG/ACT	-	NC
FLUTICASONE PROPIONATE DISKUS INHALER 250MCG/ACT	-	NC
FLUTICASONE PROPIONATE DISKUS INHALER 50MCG/ACT	-	NC
PULMICORT FLEXHALER	-	NC
PULMICORT INH SUSP	-	NC
QVAR AERO	-	NC
SYMPATHOMIMETICS		
albuterol HFA (18gm) inhaler (VENTOLIN equiv) (QL= 2 inhalers/30 days)	QL	1
albuterol HFA (6.7gm, 8.5gm) inhaler (PROAIR, PROVENTIL equiv) (QL= 2 inhalers/30 days)	QL	1
albuterol neb soln	-	1
ALBUTEROL NEBULIZER SOLN	-	1
albuterol sulfate syrup	-	1
albuterol/ipratropium neb soln (DUONEB equiv)	-	1
FLUTICASONE-SALMETEROL INHALER 113-14 MCG/ACT	-	1
FLUTICASONE-SALMETEROL INHALER 232-14 MCG/ACT	-	1
FLUTICASONE-SALMETEROL INHALER 55-14 MCG/ACT	-	1
ADVAIR HFA INHALER	-	2
albuterol sulfate tab	-	2
ANORO ELLIPTA INHALER	-	2
arformoterol tartrate neb soln (BROVANA equiv)	-	2
BREO ELLIPTA INHALER	-	2
BREO ELLIPTA INHALER 50-25 MCG/ACT	-	2
BREZTRI AEROSPHERE INHALER	-	2
budesonide/formoterol inhaler (SYMBICORT equiv)	-	2
COMBIVENT RESPIMAT INHALER	-	2
DULERA INHALER	-	2
fluticasone/salmeterol inhaler, wixela inhaler (ADVAIR equiv)	-	2
FLUTICASONE-SALMETEROL INHALER 115-21 MCG/ACT	-	2
FLUTICASONE-SALMETEROL INHALER 230-21 MCG/ACT	-	2
FLUTICASONE-SALMETEROL INHALER 45-21 MCG/ACT	-	2
FLUTICASONE-VILANTEROL INHALER 100-25 MCG/ACT	-	2
FLUTICASONE-VILANTEROL INHALER 200-25 MCG/ACT	-	2
levalbuterol neb soln (XOPENEX equiv)	-	2
STIOLTO INHALER	-	2
STRIVERDI RESPIMAT INHALER (QL= 1 inhaler/30 days)	QL	2
terbutaline sulfate tab (BRETHINE equiv)	-	2
TRELEGY ELLIPTA INHALER	-	2
formoterol fumarate neb soln (PERFOROMIST equiv)	-	3
LEVALBUTEROL INHALER, XOPENEX HFA INHALER (QL= 2 inhalers/fill, 2 fills/30 days)	QL	3
ADVAIR DISKUS INHALER	-	NC
AIRDUO POWDER INHALER W/SENSOR	-	NC
AIRDUO RESPICLICK	-	NC
AIRSUPRA INH	-	NC
BEVESPI AEROSPHERE INHALER	-	NC
BROVANA NEB SOLN	-	NC
DUAKLIR INHALER	-	NC

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ANTIASTHMATIC AND BRONCHODILATOR AGENTS Cont.		
PERFOROMIST NEB SOLN	-	NC
SEREVENT DISKUS INHALER	-	NC
SYMBICORT INHALER	-	NC
UMECLIDINIUM/VILANTEROL INHALER 62.5-25MCG/ACT	-	NC
XOPENEX NEB SOLN	-	NC
XANTHINES		
theophylline ER tab (UNIPHYL equiv)	-	1
theophylline soln	-	1
ELIXOPHYLLIN ELIXIR	-	2
theophylline er tab (THEOPHYLLINE ER equiv)	-	2
THEOPHYLLINE TAB ER	-	2
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
warfarin tab (COUMADIN equiv)	-	1
COUMADIN TAB	-	NC
DIRECT FACTOR XA INHIBITORS		
rivaroxaban for susp (XARELTO equiv)	-	1
rivaroxaban tab 2.5mg (XARELTO equiv) (QL= 2 tabs/day)	QL	1
ELIQUIS SPRINKLE CAP	-	2
ELIQUIS TAB FOR ORAL SUSP	-	2
ELIQUIS TAB, ELIQUIS STARTER PACK	-	2
XARELTO STARTER PACK	-	2
XARELTO SUSP	-	2
XARELTO TAB	-	2
SAVAYSA TAB	-	NC
HEPARINS AND HEPARINOID-LIKE AGENTS		
heparin inj	PA	1
enoxaparin inj (LOVENOX equiv)	-	2
fondaparinux inj (ARIXTRA equiv)	-	2
FRAGMIN INJ	-	3
ARIXTRA INJ	-	NC
LOVENOX INJ	-	NC
THROMBIN INHIBITORS		
dabigatran etexilate mesylate cap (PRADAXA equiv)	-	2
PRADAXA CAP	-	NC
PRADAXA PELLET PACK	-	NC
ANTICONVULSANTS		
AMPA GLUTAMATE RECEPTOR ANTAGONISTS		
FYCOMPA TAB	-	NC
FYCOMPA SUSP	-	NC
perampanel susp (FYCOMPA equiv)	-	NC
perampanel tab (FYCOMPA equiv)	-	NC
ANTICONVULSANTS - BENZODIAZEPINES		
clobazam tab (ONFI equiv)	-	1

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
clonazepam tab (KLONOPIN equiv)	-	1
clobazam susp (ONFI equiv) (Prior Authorization required for members age 7 years and older)	PA	2
diazepam rectal gel (QL= 2 packs/fill)	QL	2
MIDAZOLAM INJ (QL= 1 inj/fill)	QL	2
clonazepam ODT (KLONOPIN equiv)	-	3
NAYZILAM SPRAY (QL= 4 doses/fill)	QL	3
VALTOCO NASAL SPRAY (QL= 5 doses/fill)	QL	3
CLONAZEPAM TAB	-	NC
DIASTAT ACDL GEL	-	NC
DIASTAT RECTAL GEL, DIAZEPAM RECTAL GEL	-	NC
KLONOPIN TAB	-	NC
LIBERVANT FILM	-	NC
ONFI SUSP	-	NC
ONFI TAB	-	NC
SYMPAZAN ORAL FILM	-	NC
ANTICONVULSANTS - MISC.		
carbamazepine chew tab (TEGRETOL equiv)	-	1
carbamazepine susp (TEGRETOL equiv)	-	1
carbamazepine tab (TEGRETOL equiv)	-	1
gabapentin cap (NEURONTIN equiv) (QL= 9 caps/day)	QL	1
gabapentin tab 600mg (NEURONTIN equiv) (QL= 6 tabs/day)	QL	1
gabapentin tab 800mg (NEURONTIN equiv) (QL= 4.5 tabs/day)	QL	1
lacosamide oral solution (VIMPAT equiv)	-	1
lacosamide tab (VIMPAT equiv)	-	1
lamotrigine chew tab (LAMICTAL equiv)	-	1
lamotrigine tab (LAMICTAL equiv)	-	1
levetiracetam ER tab (KEPPRA XR equiv)	-	1
levetiracetam soln (KEPPRA equiv)	-	1
levetiracetam tab (KEPPRA equiv)	-	1
oxcarbazepine susp (TRILEPTAL equiv)	-	1
oxcarbazepine tab (TRILEPTAL equiv)	-	1
pregabalin cap (LYRICA equiv) (QL= 3 caps/day)	QL	1
pregabalin cap 225mg (LYRICA equiv) (QL= 2 caps/day)	QL	1
pregabalin cap 300mg (LYRICA equiv) (QL= 2 caps/day)	QL	1
primidone tab (MYSOLINE equiv)	-	1
topiramate sprinkle cap (TOPAMAX equiv)	-	1
topiramate tab (TOPAMAX equiv)	-	1
zonisamide cap (ZONEGRAN equiv)	-	1
carbamazepine ER cap (CARBATROL equiv)	-	2
carbamazepine ER tab (TEGRETOL XR equiv)	-	2
gabapentin soln (NEURONTIN equiv) (QL= 72 mls/day)	QL	2
pregabalin soln (LYRICA equiv) (QL= 30ml/day)	QL	2
rufinamide susp (BANZEL equiv) (Prior Authorization required for members age 9 years and older)	PA	2
rufinamide tab (BANZEL equiv)	-	2
LAMICTAL ODT KIT, LAMICTAL XR KIT	-	3
lamotrigine ER tab (LAMICTAL XR equiv)	-	3

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
lamotrigine starter kit (LAMICTAL STARTER KIT equiv)	-	3
ZONISADE SUSP (Prior Authorization required for members age 9 years and older)	PA	3
DIACOMIT CAP	PA-SP	4
DIACOMIT POWDER PACK	PA-SP	4
EPIDIOLEX SOLN	PA-SP	4
FINTEPLA SOLN (QL= 12ml/day)	PA-QL-SP	4
ZTALMY SUSP (QL= 1100ml/30 days)	PA-QL-SP	4
APTIOM TAB	-	NC
BANZEL SUSP	-	NC
BANZEL TAB	-	NC
brivaracetam inj (BRIVIACT equiv)	-	NC
brivaracetam oral soln 10mg/ml (BRIVIACT equiv)	-	NC
brivaracetam tab (BRIVIACT equiv)	-	NC
BRIVIACT INJ	-	NC
BRIVIACT SOLN 10MG/ML	-	NC
BRIVIACT TAB	-	NC
CARBAMAZEPINE CHEW TAB	-	NC
CARBATROL CAP	-	NC
ELEPSIA XR TAB	-	NC
EPRONTIA SOLN	-	NC
eslicarbazepine acetate tab (APTIOM equiv)	-	NC
gabapentin cap 200mg (RELGAABI equiv)	-	NC
GABARONE TAB	-	NC
KEPPRA SOLN	-	NC
KEPPRA TAB	-	NC
KEPPRA XR TAB	-	NC
LAMICTAL CHEW TAB	-	NC
LAMICTAL STARTER KIT	-	NC
LAMICTAL TAB	-	NC
LAMICTAL XR TAB	-	NC
lamotrigine ODT (LAMICTAL equiv)	-	NC
lamotrigine ODT kit (LAMICTAL equiv)	-	NC
LEVETIRACETAM TAB FOR ORAL SUSP, SPRITAM TAB FOR ORAL SUSP	-	NC
LYRICA CAP	-	NC
LYRICA CAP 225MG	-	NC
LYRICA CAP 300MG	-	NC
LYRICA SOLN	-	NC
MOTPOLY XR CAP	-	NC
MYSOLINE TAB	-	NC
NEURONTIN CAP	-	NC
NEURONTIN SOLN	-	NC
NEURONTIN TAB 600MG	-	NC
NEURONTIN TAB 800MG	-	NC
oxcarbazepine er tab (OXTELLAR equiv)	-	NC
OXTELLAR XR TAB	-	NC
PRIMIDONE TAB	-	NC

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
QUDEXY XR CAP	-	NC
SUBVENITE SUSP	-	NC
TEGRETOL SUSP	-	NC
TEGRETOL TAB	-	NC
TEGRETOL XR TAB	-	NC
TOPAMAX SPRINKLE CAP	-	NC
TOPAMAX TAB	-	NC
topiramate ER cap (QUDEXY equiv)	-	NC
topiramate er cap (TROKENDI XR equiv)	-	NC
topiramate oral soln (EPRONTIA equiv)	-	NC
TRILEPTAL SUSP	-	NC
TRILEPTAL TAB	-	NC
TROKENDI XR CAP	-	NC
VIMPAT SOLN	-	NC
VIMPAT TAB	-	NC
ZONEGRAN CAP	-	NC
CARBAMATES		
felbamate susp (FELBATOL equiv)	-	2
felbamate tab (FELBATOL equiv)	-	2
XCOPRI PAK 100-150MG (QL= 2 tabs/day)	QL	2
XCOPRI PAK 150-200MG (QL= 2 tabs/day)	QL	2
XCOPRI TAB 150MG, 200MG (QL= 2 tabs/day)	QL	2
XCOPRI TAB 25MG (QL= 1 tab/day)	QL	2
XCOPRI TAB 50MG, 100MG (QL= 1 tab/day)	QL	2
XCOPRI TITRATION PAK 12.5-25MG (QL= 1 tab/day)	QL	2
XCOPRI TITRATION PAK 150-200MG (QL= 1 tab/day)	QL	2
XCOPRI TITRATION PAK 50-100MG (QL= 1 tab/day)	QL	2
FELBATOL SUSP	-	NC
FELBATOL TAB	-	NC
GABA MODULATORS		
vigabatrin powder pack (SABRIL POWDER equiv)	PA-SP	1
vigabatrin tab (SABRIL equiv)	PA-SP	1
TIAGABINE TAB	-	2
tiagabine tab (GABITRIL equiv)	-	2
vigadrone powder pack	PA-SP	4
GABITRIL TAB	-	NC
SABRIL TAB	-	NC
VIGAFYDE SOLN	-	NC
HYDANTOINS		
phenytoin cap (DILANTIN equiv)	-	1
phenytoin susp (DILANTIN equiv)	-	1
DILANTIN CAP 30MG	-	2
phenytoin chew tab (DILANTIN equiv)	-	2
DILANTIN CAP 100MG	-	NC
DILANTIN INFATABS	-	NC

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DrugName	Special Code	Tier
ANTICONVULSANTS Cont.		
DILANTIN SUSP	-	NC
SUCCINIMIDES		
ethosuximide soln (ZARONTIN equiv)	-	1
ethosuximide cap (ZARONTIN equiv)	-	2
methsuximide cap (CELONTIN equiv)	-	2
CELONTIN CAP	-	NC
ZARONTIN CAP	-	NC
ZARONTIN SOLN	-	NC
VALPROIC ACID		
divalproex ER tab (DEPAKOTE ER equiv)	-	1
divalproex sodium DR tab (DEPAKOTE equiv)	-	1
divalproex sprinkle cap (DEPAKOTE equiv)	-	1
valproic acid cap (DEPAKENE equiv)	-	1
valproic acid syrup (DEPAKENE equiv)	-	1
DEPACON INJ	-	NC
DEPAKENE CAP	-	NC
DEPAKENE SYRUP	-	NC
DEPAKOTE ER TAB	-	NC
DEPAKOTE SPRINKLE CAP	-	NC
DEPAKOTE TAB	-	NC
STAVZOR CAP	-	NC
valproate inj (DEPACON equiv)	-	NC
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
mirtazapine ODT (REMERON equiv)	-	1
mirtazapine tab (REMERON equiv)	-	1
REMERON SOLUTAB	-	NC
REMERON TAB	-	NC
ANTIDEPRESSANT COMBINATIONS		
AUVELITY TAB	-	NC
AUVELITY TAB TITRATION PACK	-	NC
ANTIDEPRESSANTS - MISC.		
bupropion ER tab (WELLBUTRIN equiv)	-	1
bupropion tab (WELLBUTRIN equiv)	-	1
bupropion XL tab (WELLBUTRIN XL equiv)	-	1
APLENZIN TAB	-	NC
BUPROPION XL TAB, FORFIVO XL TAB	-	NC
WELLBUTRIN SR TAB	-	NC
WELLBUTRIN XL TAB	-	NC
GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID		
ZURZUVAE CAP 20MG, 25MG (QL= 28 caps/365 days)	PA-QL-SP	4
ZURZUVAE CAP 30MG (QL= 14 caps/365 days)	PA-QL-SP	4
MONOAMINE OXIDASE INHIBITORS (MAOIS)		
PHENELZINE SULFATE TAB	-	1

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DrugName	Special Code	Tier
ANTIDEPRESSANTS Cont.		
phenelzine tab (NARDIL equiv)	-	1
tranylcypromine tab (PARNATE equiv)	-	2
EMSAM PATCH	-	3
NARDIL TAB 15MG	-	3
MARPLAN TAB	-	NC
PARNATE TAB	-	NC
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)		
citalopram soln (CELEXA equiv)	-	1
citalopram tab (CELEXA equiv)	-	1
escitalopram tab (LEXAPRO equiv)	-	1
fluoxetine cap (PROZAC equiv)	-	1
fluoxetine soln (PROZAC equiv)	-	1
fluoxetine tab (PROZAC equiv)	-	1
fluvoxamine tab (LUVOX equiv)	-	1
paroxetine tab (PAXIL equiv)	-	1
sertraline conc (ZOLOFT equiv)	-	1
sertraline tab (ZOLOFT equiv)	-	1
escitalopram soln (LEXAPRO equiv)	-	2
fluvoxamine ER cap (LUVOX CR equiv)	-	2
paroxetine ER tab (PAXIL CR equiv)	-	2
PAROXETINE SUSP	-	3
CELEXA TAB	-	NC
CITALOPRAM CAP	-	NC
citalopram hydrobromide cap	-	NC
ESCITALOPRAM CAP	-	NC
FLUOXETINE TAB	-	NC
fluoxetine weekly cap (PROZAC equiv)	-	NC
LEXAPRO TAB	-	NC
PAXIL CR TAB	-	NC
PAXIL ORAL SUSP	-	NC
PAXIL TAB	-	NC
PEXEVA TAB	-	NC
PROZAC CAP	-	NC
PROZAC WEEKLY CAP	-	NC
SERTRALINE CAP	-	NC
sertraline hcl cap	-	NC
ZOLOFT CONC	-	NC
ZOLOFT TAB	-	NC
SEROTONIN MODULATORS		
trazodone tab (DESYREL equiv)	-	1
vilazodone hcl tab (VIIBRYD equiv)	-	1
EXXUA TAB/EXXUA TITRATION PACK	-	NC
NEFAZODONE TAB	-	NC
RALDESY SOLN	-	NC
TRAZODONE TAB	-	NC

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DrugName	Special Code	Tier
ANTIDEPRESSANTS Cont.		
trazodone tab 300mg (DESYREL equiv)	-	NC
TRINTELLIX TAB	-	NC
VIIBRYD STARTER KIT	-	NC
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)		
desvenlafaxine ER tab (PRISTIQ equiv)	-	1
duloxetine EC cap (CYMBALTA equiv)	-	1
venlafaxine ER cap (EFFEXOR XR equiv)	-	1
venlafaxine tab (EFFEXOR equiv)	-	1
CYMBALTA CAP	-	NC
DESVENLAFAXINE ER TAB	-	NC
DRIZALMA DR CAP	-	NC
duloxetine cap 40mg (IRENKA equiv)	-	NC
DULOXETINE DR CAP	-	NC
EFFEXOR XR CAP	-	NC
FETZIMA CAP	-	NC
FETZIMA TITRATION PACK	-	NC
PRISTIQ TAB	-	NC
VENLAFAXINE ER TAB	-	NC
VENLAFAXINE TAB	-	NC
TRICYCLIC AGENTS		
amitriptyline tab (ELAVIL equiv)	-	1
amoxapine tab (AMOXAPINE equiv)	-	1
doxepin cap (SINEQUAN equiv)	-	1
doxepin conc (SINEQUAN equiv)	-	1
DOXEPIN HCL CAP	-	1
DOXEPIN HCL CONC	-	1
imipramine tab (TOFRANIL equiv)	-	1
nortriptyline cap (PAMELOR equiv)	-	1
nortriptyline oral soln (NORTRIPTYLINE equiv)	-	1
desipramine tab (NORPRAMIN equiv)	-	2
clomipramine cap (ANAFRANIL equiv)	-	3
imipramine pamoate cap (TOFRANIL PM equiv)	-	3
protriptyline tab (VIVACTIL equiv)	-	3
trimipramine cap (SURMONTIL equiv)	-	3
ANAFRANIL CAP	-	NC
NORPRAMIN TAB	-	NC
PAMELOR CAP	-	NC
SURMONTIL CAP	-	NC
TOFRANIL TAB	-	NC
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
acarbose tab (PRECOSE equiv)	-	1
MIGLITOL TAB	-	3
miglitol tab (MIGLITOL equiv)	-	3
PRECOSE TAB	-	NC

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ANTIDIABETICS Cont.		
ANTIDIABETIC - AMYLIN ANALOGS		
SYMLINPEN INJ	-	NC
ANTIDIABETIC COMBINATIONS		
dapagliflozin-metformin er tab (XIGDUO XR equiv) (QL= 1 tab/day)	QL	1
dapagliflozin-metformin er tab 5-1000MG (XIGDUO XR equiv) (QL= 2 tabs/day)	QL	1
glipizide/metformin tab (METAGLIP equiv)	-	1
glyburide/metformin tab (GLUCOVANCE equiv)	-	1
JANUMET XR TAB (QL= 2 tabs/day)	QL	2
JENTADUETO TAB (QL= 2 tabs/day)	QL	2
JENTADUETO XR TAB (QL= 2 tabs/day)	QL	2
sitagliptin phosphate-metformin hcl er tab (JANUMET equiv) (QL= 2 tabs/day)	QL	2
sitagliptin phosphate-metformin hcl tab (JANUMET equiv) (QL= 2 tabs/day)	QL	2
SOLIQUA INJ (QL= 15ml/25 days)	QL	2
XIGDUO XR TAB 2.5-1000 (QL= 2 tabs/day)	QL	2
XULTOPHY INJ (QL= 15ml/30 days)	QL	2
ACTOPLUS MET TAB	-	NC
ALOGLIPTIN/METFORMIN TAB, KAZANO TAB	-	NC
ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB	-	NC
ALOGLIPTIN-METFORMIN TAB	-	NC
ALOGLIPTIN-PIOGILTAZONE TAB	-	NC
DUETACT TAB	-	NC
GLYXAMBI TAB	-	NC
INVOKAMET TAB	-	NC
INVOKAMET XR TAB	-	NC
JANUMET TAB	-	NC
KOMBIGLYZE XR TAB	-	NC
pioglitazone/glimepiride tab (DUETACT equiv)	-	NC
pioglitazone/metformin tab (ACTOPLUS MET equiv)	-	NC
PRANDIMET TAB	-	NC
QTERN TAB	-	NC
saxagliptin-metformin hcl tab er 24hr (KOMBIGLYZE equiv)	-	NC
SEGLUROMET TAB	-	NC
SITAGLIPTIN/METFORMIN TAB	-	NC
STEGLUJAN TAB	-	NC
SYNJARDY TAB	-	NC
SYNJARDY XR TAB	-	NC
TRIJARDY XR TAB	-	NC
XIGDUO XR TAB	-	NC
ZITUVIMET XR TAB	-	NC
BIGUANIDES		
metformin ER tab (GLUCOPHAGE XR equiv)	-	1
metformin tab (GLUCOPHAGE equiv)	-	1
metformin soln (RIOMET equiv)	-	3
FORTAMET TAB	-	NC
GLUCOPHAGE TAB	-	NC

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
GLUCOPHAGE XR TAB	-	NC
GLUMETZA TAB 1000MG	-	NC
GLUMETZA TAB 500MG	-	NC
metformin ER osmotic tab (FORTAMET equiv)	-	NC
metformin ER osmotic tab (GLUMETZA equiv)	-	NC
metformin hcl tab 625MG	-	NC
metformin hcl tab 750MG	-	NC
METFORMIN TAB	-	NC
RIOMET SOLN	-	NC
DIABETIC OTHER		
BAQSIMI NASAL POWDER (QL= 2 inhalations/fill)	QL	2
glucagon (rdna) for inj kit (QL= 2 inj/fill)	QL	2
GLUCAGON EMR INJ (QL= 2 inj/fill)	QL	2
GVOKE INJ (QL= 2 inj/fill)	QL	2
GVOKE INJ KIT (QL= 2 inj/fill)	QL	2
GVOKE PFS INJ (QL= 2 inj/fill)	QL	2
ZEGALOGUE INJ (QL= 2 inj/fill)	QL	2
diazoxide susp (PROGLYCEM equiv)	-	3
GLUCAGON INJ KIT	-	NC
KORLYM TAB	-	NC
PROGLYCEM SUSP	-	NC
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
sitagliptin phosphate tab (JANUVIA equiv) (QL= 1 tab/day)	QL	2
TRADJENTA TAB (QL= 1 tab/day)	QL	2
ALOGLIPTIN TAB	-	NC
ALOGLIPTIN TAB, NESINA TAB	-	NC
BRYNOVIN SOLN	-	NC
JANUVIA TAB	-	NC
ONGLYZA TAB	-	NC
saxagliptin hcl tab (ONGLYZA equiv)	-	NC
ZITUVIO TAB	-	NC
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET TAB	-	3
INCRETIN MIMETIC AGENTS		
liraglutide soln pen-injector (VICTOZA equiv) (QL= 9ml/30 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
MOUNJARO INJ (QL= 4 inj/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
OZEMPIC INJ (QL= 1 pack/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
TRULICITY INJ (QL= 4 pens/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
VICTOZA INJ	-	NC
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS)		
OZEMPIC INJ (QL= 1 pack/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
OZEMPIC TAB, RYBELSUS TAB (QL=1 tab/day; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81))	QL-RDX	2
BYDUREON BCISE AUTO INJ	-	NC
BYDUREON INJ	-	NC

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
BYDUREON PEN INJ	-	NC
EXENATIDE INJ (BYETTA INJ EQUIV)	-	NC
TANZEUM INJ	-	NC
INSULIN		
HUMALOG INJ	-	1
HUMALOG JR KWIKPEN INJ	-	1
HUMALOG KWIKPEN INJ	-	1
HUMALOG MIX INJ	-	1
HUMALOG MIX KWIKPEN INJ	-	1
HUMALOG PEN INJ	-	1
HUMULIN MIX INJ	OTC	1
HUMULIN MIX PEN INJ	OTC	1
HUMULIN N INJ	OTC	1
HUMULIN N PEN INJ	OTC	1
HUMULIN R INJ	OTC	1
INSULIN LISPRO INJ (HUMALOG equiv)	-	1
INSULIN LISPRO JR KWIKPEN INJ	-	1
INSULIN LISPRO KWIKPEN INJ	-	1
INSULIN LISPRO PROTAMINE PEN INJ (HUMALOG equiv)	-	1
LANTUS INJ	-	1
LANTUS SOLOSTAR INJ	-	1
LYUMJEV INJ	-	1
LYUMJEV KWIKPEN INJ	-	1
HUMULIN R INJ U-500	-	2
HUMULIN R U-500 KWIKPEN INJ	-	2
INSULIN GLARGINE SOLN PEN-INJ	-	2
LEVEMIR FLEXTOUCH INJ	-	2
LEVEMIR INJ	-	2
SEMGLEE INJ, INSULIN GLARGINE-YFGN INJ	-	2
SEMGLEE PEN, INSULIN GLARGINE-YFGN PEN	-	2
TOUJEO MAX SOLOSTAR INJ	-	2
TOUJEO SOLOSTAR INJ	-	2
TRESIBA FLEXTOUCH INJ	-	2
TRESIBA INJ	-	2
ADMELOG INJ	-	NC
ADMELOG SOLOSTAR, HUMALOG TEMPO PEN	-	NC
APIDRA INJ	-	NC
APIDRA SOLOSTAR INJ	-	NC
AWIQLI FLEX INJ	-	NC
BASAGLAR INJ, INSULIN GLARGINE SOLOSTAR INJ	-	NC
DEGLUDEC FLEXTOUCH INJ	-	NC
DEGLUDEC INJ	-	NC
FIASP FLEXTOUCH INJ	-	NC
FIASP INJ	-	NC
FIASP PENFILL INJ, FIASP PUMP CARTRIDGE	-	NC
HUMALOG TEMPO PEN	-	NC

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
INSULIN ASPART FLEXPEN INJ (NOVOLOG equiv)	-	NC
INSULIN ASPART INJ (NOVOLOG equiv)	-	NC
INSULIN ASPART MIX FLEXPEN INJ (NOVOLOG equiv)	-	NC
INSULIN ASPART MIX INJ (NOVOLOG equiv)	-	NC
INSULIN ASPART PENFILL INJ	-	NC
INSULIN GLARGINE INJ	-	NC
INSULIN GLARGINE-YFGN (SINGLE PEN)	-	NC
INSULIN GLARGINE-YFGN PEN (CIVICA) 100UNIT/ML	-	NC
KIRSTY INJ	-	NC
LANGLARA INJ	-	NC
LYUMJEV TEMPO PEN	-	NC
MERILOG INJ	-	NC
MERILOG SOLOSTAR INJ	-	NC
NOVOLIN 70/30 FLEXPEN INJ	OTC	NC
NOVOLIN 70/30 FLEXPEN RELION INJ	OTC	NC
NOVOLIN 70/30 INJ	OTC	NC
NOVOLIN 70/30 RELION INJ	OTC	NC
NOVOLIN N FLEXPEN INJ	OTC	NC
NOVOLIN N INJ	OTC	NC
NOVOLIN N RELION 100UNIT/ML	OTC	NC
NOVOLIN R FLEXPEN INJ	OTC	NC
NOVOLIN R INJ	OTC	NC
NOVOLIN R RELION INJ	OTC	NC
NOVOLOG FLEXPEN INJ	-	NC
NOVOLOG FLEXPEN RELION INJ	-	NC
NOVOLOG INJ	-	NC
NOVOLOG MIX FLEXPEN INJ	-	NC
NOVOLOG MIX INJ	-	NC
NOVOLOG PENFILL INJ	-	NC
REZVOGLAR INJ	-	NC
SEMGLEE INJ (SINGLE PEN)	-	NC
SEMGLEE SOLN	-	NC
INSULIN SENSITIZING AGENTS		
pioglitazone tab (ACTOS equiv)	-	1
ACTOS TAB	-	NC
MEGLITINIDE ANALOGUES		
repaglinide tab (PRANDIN equiv)	-	1
nateglinide tab (STARLIX equiv)	-	2
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
dapagliflozin tab (FARXIGA equiv) (QL= 1 tab/day)	QL	1
BEXAGLIFLOZN TAB	-	NC
FARXIGA TAB	-	NC
INVOKANA TAB	-	NC
JARDIANCE TAB	-	NC
STEGLATRO TAB	-	NC

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DrugName	Special Code	Tier
ANTIDIABETICS Cont.		
SULFONYLUREAS		
glimepiride tab (AMARYL equiv)	-	1
glipizide ER tab (GLUCOTROL XL equiv)	-	1
glipizide tab (GLUCOTROL equiv)	-	1
GLYBURID MCR TAB	-	1
glyburide tab (MICRONASE equiv)	-	1
AMARYL TAB	-	NC
GLIMEPIRIDE TAB	-	NC
GLIPIZIDE TAB	-	NC
GLUCOTROL TAB	-	NC
GLUCOTROL XL TAB	-	NC
GLYNASE TAB	-	NC
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIPERISTALTIC AGENTS		
DIPHENOXYLATE/ATROPINE LIQUID	-	3
loperamide hcl soln (LOPERAMIDE equiv)	OTC	NC
OPIUM TINCTURE	-	NC
ANTIDIARRHEALS		
ANTIDIARRHEAL - CHLORIDE CHANNEL ANTAGONISTS		
MYTESI TAB	-	NC
ANTIDIARRHEAL AGENTS - MISC.		
REZYST CHEW TAB	-	NC
VSL #3 CAP	-	NC
ANTIDIARRHEAL COMBINATIONS		
EVIVO LIQUID	-	NC
ANTIPERISTALTIC AGENTS		
diphenoxylate/atropine tab (LOMOTIL equiv)	-	1
LOMOTIL TAB	-	NC
loperamide cap (IMODIUM equiv)	-	NC
PAREGORIC TINCTURE	-	NC
ANTIDOTES		
ANTIDOTES		
VISTOGARD PAK	-	NC
ANTIDOTES - CHELATING AGENTS		
CHEMET CAP	-	2
FERRIPROX SOLN	PA-SP	4
OPIOID ANTAGONISTS		
naltrexone tab (REVIA equiv)	-	1
VIVITROL INJ	SP	4
EVZIO INJ	-	NC
ANTIDOTES AND SPECIFIC ANTAGONISTS		
ANTIDOTES - CHELATING AGENTS		
deferasirox granules packet (JADENU equiv)	SP	1

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ANTIDOTES AND SPECIFIC ANTAGONISTS Cont.		
deferasirox tab (JADENU equiv)	SP	1
deferasirox tab for oral susp (EXJADE equiv)	SP	1
deferiprone tab (FERRIPROX equiv)	PA-SP	1
JADENU SPRINKLE	-	NC
ANTIDOTES AND SPECIFIC ANTAGONISTS		
CETYLEV TAB	-	NC
OPIOID ANTAGONISTS		
naloxone hcl nasal spray (NARCAN equiv)	OTC	1
naloxone inj	-	1
naloxone prefilled inj	-	1
RIVIVE, REXTOVY SPRAY	OTC	1
KLOXXADO NASAL SPRAY	-	2
NALOXONE PREFILLED INJ (QL= 2 inj/fill)	QL	2
OPVEE NASAL SPRAY	-	2
ZIMHI SOLN	-	2
ZURNAI INJ	-	2
EVZIO INJ	-	NC
NARCAN NASAL SPRAY	OTC	NC
REZENOPY SPRAY 10MG/0.11ML	-	NC
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
granisetron tab (KYTRIL equiv) (QL= 14 tabs/fill)	QL	1
ondansetron ODT (ZOFRAN equiv)	-	1
ondansetron soln (ZOFRAN equiv)	-	1
ondansetron tab (ZOFRAN equiv)	-	1
ANZEMET TAB (QL= 9 tabs/fill)	QL	3
SANCUSO PATCH (QL= 4 patches/fill)	QL	3
KYTRIL TAB	-	NC
ONDANSETRON TAB	-	NC
ONDANSETRON TAB ODT	-	NC
SUSTOL INJ	-	NC
ZOFRAN ODT	-	NC
ZOFRAN SOLN	-	NC
ZOFRAN TAB	-	NC
ZUPLENZ SL FILM	-	NC
ANTIEMETICS - ANTICHOLINERGIC		
trimethobenzamide cap (TIGAN equiv)	-	1
scopolamine patch (TRANSDERM-SCOP equiv)	-	2
MECLIZINE CHEW TAB	-	NC
meclizine tab (ANTIVERT equiv)	-	NC
TIGAN CAP	-	NC
TIGAN INJ	-	NC
TRANSDERM-SCOP PATCH	-	NC
trimethobenzamide hcl inj (TIGAN equiv)	-	NC
ANTIEMETICS - MISCELLANEOUS		

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DrugName	Special Code	Tier
ANTIEMETICS Cont.		
AKYNZEO CAP (QL= 1 cap/fill; Restricted to Oncology or Hematology Specialist)	QL-RS	2
dronabinol cap (MARINOL equiv)	PA	2
doxylamine/pyridoxine dr tab (DICLEGIS equiv)	-	NC
DRONABINOL SOLN, SYNDROS SOLN	-	NC
MARINOL CAP	-	NC
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
aprepitant cap (EMEND equiv) (QL= 3 caps/fill)	QL	2
aprepitant pak (EMEND equiv) (QL= 3 caps/fill)	QL	2
EMEND CAP	-	NC
EMEND PAK	-	NC
EMEND SUSP	-	NC
NEREUS CAP	-	NC
VARUBI TAB	-	NC
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
BREXAFEMME TAB	-	NC
ANTIFUNGALS		
nystatin tab	-	1
terbinafine tab (LAMISIL equiv)	-	1
flucytosine cap (ANCOBON equiv)	-	2
griseofulvin micro tab (GRIFULVIN V equiv)	-	2
griseofulvin susp (GRIFULVIN equiv)	-	2
griseofulvin tab (GRIS-PEG equiv)	-	2
ANCOBON CAP	-	NC
FULVICIN P/G TAB	-	NC
FULVICIN P/G TAB, GRISEOFULVIN ULTRA MICRO TAB	-	NC
GRIS-PEG TAB	-	NC
LAMISIL TAB	-	NC
IMIDAZOLE-RELATED ANTIFUNGALS		
fluconazole susp (DIFLUCAN equiv)	-	1
fluconazole tab (DIFLUCAN equiv)	-	1
ketoconazole tab (NIZORAL equiv)	-	1
itraconazole cap (SPORANOX equiv)	-	2
voriconazole tab (VFEND equiv)	-	2
itraconazole soln (SPORANOX equiv)	PA	3
NOXAFIL PAK	-	3
posaconazole DR tab (NOXAFIL equiv)	-	3
posaconazole susp (NOXAFIL equiv)	-	3
voriconazole susp (VFEND equiv)	-	3
CRESEMBA CAP	-	NC
DIFLUCAN SUSP	-	NC
DIFLUCAN TAB	-	NC
NOXAFIL SUSP	-	NC
NOXAFIL TAB	-	NC
SPORANOX CAP	-	NC

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DrugName	Special Code	Tier
ANTIFUNGALS Cont.		
SPORANOX SOLN	-	NC
TOLSURA CAP	-	NC
VFEND SUSP	-	NC
VFEND TAB	-	NC
VIVJOA CAP	-	NC
ANTIHISTAMINES		
ANTIHISTAMINES - ALKYLAMINES		
CORPHENA ORAL SOLN, RYCLORA ORAL SOLN	-	NC
MICLARA LIQUID	OTC	NC
ANTIHISTAMINES - ETHANOLAMINES		
CARBINOXAMINE SOLN	-	3
carbinoxamine tab (PALGIC equiv)	-	3
carbinoxamine maleate tab 6mg	-	NC
CARBZAH SOLN 4MG/5ML	-	NC
CLEMASTINE SYRUP	-	NC
CLEMASTINE TAB	-	NC
CLEMASTINE TAB, CLEMASZ TAB	-	NC
diphenhydramine inj (BENADRYL equiv)	-	NC
KARBINAL ER SUSP	-	NC
ANTIHISTAMINES - NON-SEDATING		
CLARINEX SYRUP	-	EXC
CLARINEX TAB	-	EXC
CLARITIN CAP	OTC	EXC
CLARITIN CHEW TAB	OTC	EXC
DESLORATADINE ODT	-	EXC
DESLORATADINE SOLN	-	EXC
desloratadine tab (CLARINEX equiv)	-	EXC
levocetirizine soln (XYZAL equiv)	-	EXC
levocetirizine tab (XYZAL equiv)	-	EXC
loratadine cap (CLARITIN equiv)	OTC	EXC
XYZAL SOLN	-	EXC
XYZAL TAB	-	EXC
ZYRTEC CHILD CHEW ALLERGY	OTC	NC
ANTIHISTAMINES - PHENOTHIAZINES		
promethazine syrup	-	1
promethazine tab (PHENERGAN equiv)	-	1
promethazine supp (PHENERGAN equiv)	-	2
PROMETHEGAN SUPP	-	2
ANTIHISTAMINES - PIPERIDINES		
cyproheptadine syrup	-	1
cyproheptadine tab	-	1
ANTIHYPERLIPIDEMICS		
ADENOSINE TRIPHOSPHATE-CITRATE LYASE (ACL) INHIBITORS		

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DrugName	Special Code	Tier
ANTIHYPERLIPIDEMICS Cont.		
NEXLETOL TAB (QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2
ANTIHYPERLIPIDEMICS - COMBINATIONS		
NEXLIZET TAB (QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2
ezetimibe/simvastatin tab (VYTORIN equiv) (QL= 1 tab/day (10-80mg is Not Covered))	QL	3
EZETIMIBE/ATORVASTATIN TAB	-	NC
ezetimibe/simvastatin tab 10-80mg (VYTORIN equiv) (ezetimibe/simvastatin 10-80 mg is not covered)	-	NC
OMEGA-3 RX PAK COMPLETE	-	NC
ROSZET TAB	-	NC
ROSZET TAB, EZETIMIBE/ROSUVASTATIN TAB	-	NC
VYTORIN TAB	-	NC
ANTIHYPERLIPIDEMICS - MISC.		
omega-3-acid ethyl esters cap (LOVAZA equiv)	-	1
icosapent ethyl cap (VASCEPA equiv) (QL= 4 caps/day)	QL	2
KYNAMRO INJ	-	NC
LOVAZA CAP	-	NC
VASCEPA CAP	-	NC
BILE ACID SEQUESTRANTS		
cholestyramine lite powder (QUESTRAN LITE equiv)	-	1
cholestyramine lite powder pack (QUESTRAN LITE equiv)	-	1
cholestyramine powder (QUESTRAN equiv)	-	1
cholestyramine powder pack (QUESTRAN equiv)	-	1
colestipol tab (COLESTID equiv)	-	1
colesevelam pack (WELCHOL equiv)	-	2
colesevelam tab (WELCHOL equiv)	-	2
colestipol granule (COLESTID equiv)	-	3
colestipol powder packet (COLESTID equiv)	-	3
COLESTID GRANULE	-	NC
COLESTID POWDER PACK	-	NC
COLESTID TAB	-	NC
QUESTRAN LITE POWDER	-	NC
QUESTRAN POWDER	-	NC
QUESTRAN POWDER PACK	-	NC
WELCHOL PACK	-	NC
WELCHOL TAB	-	NC
FIBRIC ACID DERIVATIVES		
fenofibrate cap 67mg, 134mg, 200mg (LOFIBRA equiv)	-	1
fenofibrate tab 48mg, 54mg, 145mg, 160mg (TRICOR equiv)	-	1
fenofibric acid DR cap (TRILIPIX equiv)	-	1
gemfibrozil tab (LOPID equiv)	-	1
FENOFIBRIC TAB	-	3
FENOFIBRIC TAB, FIBRICOR TAB	-	3
ANTARA CAP, FENOFIBRATE MICRONIZED CAP	-	NC
ANTARA CAP, LOFIBRA CAP	-	NC

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DrugName	Special Code	Tier
ANTIHYPERLIPIDEMICS Cont.		
fenofibrate cap 43mg, 130mg (ANTARA equiv)	-	NC
FENOFIBRATE CAP, LIPOFEN CAP	-	NC
FENOFIBRATE CAP, LIPOFEN CAP 50MG, 150MG	-	NC
fenofibrate tab 40mg, 120mg (FENOGLIDE equiv)	-	NC
LOPID TAB	-	NC
TRICOR TAB	-	NC
TRIGLIDE TAB	-	NC
TRILIPIX CAP	-	NC
HMG COA REDUCTASE INHIBITORS		
atorvastatin tab (LIPITOR equiv)	-	$0
lovastatin tab (MEVACOR equiv)	-	$0
pravastatin tab (PRAVACHOL equiv)	-	$0
rosuvastatin tab (CRESTOR equiv)	-	$0
simvastatin tab (ZOCOR equiv) (80mg is Not Covered)	-	$0
fluvastatin cap (LESCOL equiv)	-	2
ATORVALIQ SUSP (Prior Authorization required for members age 9 years and older)	PA	3
EZALLOR SPRINKLE CAP (Prior Authorization required for members age 7 years and older)	PA	3
FLOLIPID SUSP (Prior Authorization required for members age 9 years and older)	PA	3
fluvastatin ER tab (LESCOL XL equiv)	-	3
ADVICOR TAB	-	NC
ALTOPREV TAB	-	NC
CRESTOR TAB	-	NC
LESCOL XL TAB	-	NC
LIPITOR TAB	-	NC
LIVALO TAB	-	NC
pitavastatin calcium tab (LIVALO equiv)	-	NC
SIMCOR TAB	-	NC
simvastatin tab 80mg (ZOCOR equiv)	-	NC
ZOCOR TAB	-	NC
ZOCOR TAB 80MG	-	NC
ZYPITAMAG TAB	-	NC
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
ezetimibe tab (ZETIA equiv)	-	1
ZETIA TAB	-	NC
MICROSOMAL TRIGLYCERIDE TRANSFER PROTEIN (MTP) INHIBITORS		
JUXTAPID CAP	-	NC
NICOTINIC ACID DERIVATIVES		
niacin ER tab (NIASPAN equiv)	-	1
NIACOR TAB	-	NC
NIASPAN ER TAB	-	NC
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
REPATHA INJ (QL= 2 inj/28 days; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin)	QL-ST	2
LEROCHOL SOLN	-	NC
LIPFENDRA TAB	-	NC

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DrugName	Special Code	Tier
ANTIHYPERTENSIVES		
ACE INHIBITORS		
benazepril tab (LOTENSIN equiv)	-	1
captopril tab (CAPOTEN equiv)	-	1
enalapril tab (VASOTEC equiv)	-	1
fosinopril tab (MONOPRIL equiv)	-	1
lisinopril tab (PRINIVIL/ZESTRIL equiv)	-	1
moexipril tab (UNIVASC equiv)	-	1
PERINDOPRIL TAB	-	1
perindopril tab (ACEON equiv)	-	1
quinapril tab (ACCUPRIL equiv)	-	1
ramipril cap (ALTACE equiv)	-	1
trandolapril tab (MAVIK equiv)	-	1
enalapril maleate oral soln (EPANED equiv) (Prior Authorization required for members age 9 years and older)	PA	2
QBRELIS SOLN (Prior Authorization required for members age 9 years and older)	PA	3
ACCUPRIL TAB	-	NC
ALTACE CAP	-	NC
EPANED SOLN	-	NC
LOTENSIN TAB	-	NC
MAVIK TAB	-	NC
PRINIVIL TAB, ZESTRIL TAB	-	NC
VASOTEC TAB	-	NC
AGENTS FOR PHEOCHROMOCYTOMA		
phenoxybenzamine cap (DIBENZYLINE equiv)	-	2
DEMSER CAP	-	NC
DIBENZYLINE CAP	-	NC
metyrosine cap (DEMSER equiv)	-	NC
ALDOSTERONE SYNTHASE INHIBITORS		
BAXFENDY TAB	-	NC
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
candesartan tab (ATACAND equiv)	-	1
irbesartan tab (AVAPRO equiv)	-	1
losartan tab (COZAAR equiv)	-	1
olmesartan tab (BENICAR equiv)	-	1
telmisartan tab (MICARDIS equiv)	-	1
valsartan tab (DIOVAN equiv)	-	1
ARBLI SUSP (QL= 330mL/30 days; Prior Authorization required for members age 7 years and older)	PA-QL	3
ATACAND TAB	-	NC
AVAPRO TAB	-	NC
azilsartan medoxomil tab (EDARBI equiv)	-	NC
BENICAR TAB	-	NC
COZAAR TAB	-	NC
DIOVAN TAB	-	NC
EDARBI TAB	-	NC
MICARDIS TAB	-	NC
valsartan oral soln (VALSARTAN equiv)	-	NC

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DrugName	Special Code	Tier
ANTIHYPERTENSIVES Cont.		
ANTIADRENERGIC ANTIHYPERTENSIVES		
clonidine tab (CATAPRES equiv)	-	1
doxazosin tab (CARDURA equiv)	-	1
guanfacine IR tab (TENEX equiv)	-	1
methyldopa tab (ALDOMET equiv)	-	1
prazosin cap (MINIPRESS equiv)	-	1
terazosin cap (HYTRIN equiv)	-	1
clonidine patch (CATAPRES-TTS equiv)	-	2
METHYLDOPA TAB	-	3
CARDURA TAB	-	NC
CATAPRES-TTS PATCH	-	NC
CLONIDINE TAB	-	NC
JAVADIN SOLN	-	NC
MINIPRESS CAP	-	NC
NEXICLON XR TAB	-	NC
TEZRULY SOLN	-	NC
ANTIHYPERTENSIVE COMBINATIONS		
amlodipine/benazepril cap (LOTREL equiv)	-	1
amlodipine/olmesartan tab (AZOR equiv)	-	1
amlodipine/valsartan tab (EXFORGE equiv)	-	1
atenolol/chlorthalidone tab (TENORETIC equiv)	-	1
benazepril/hydrochlorothiazide tab (LOTENSIN HCT equiv)	-	1
bisoprolol/hydrochlorothiazide tab (ZIAC equiv)	-	1
candesartan/hydrochlorothiazide tab (ATACAND HCT equiv)	-	1
enalapril/hydrochlorothiazide tab (VASERETIC equiv)	-	1
fosinopril/hydrochlorothiazide tab (MONOPRIL HCT equiv)	-	1
irbesartan/hydrochlorothiazide tab (AVALIDE equiv)	-	1
lisinopril/hydrochlorothiazide tab (ZESTORETIC equiv)	-	1
losartan/hydrochlorothiazide tab (HYZAAR equiv)	-	1
olmesartan/amlodipine/hydrochlorothiazide tab (TRIBENZOR equiv)	-	1
olmesartan/hydrochlorothiazide tab (BENICAR HCT equiv)	-	1
telmisartan/hydrochlorothiazide tab (MICARDIS HCT equiv)	-	1
valsartan/hydrochlorothiazide tab (DIOVAN HCT equiv)	-	1
metoprolol/hydrochlorothiazide tab (LOPRESSOR HCT equiv)	-	2
amlodipine/valsartan/hydrochlorothiazide tab (EXFORGE HCT equiv)	-	NC
AVALIDE TAB	-	NC
AZOR TAB	-	NC
BENICAR HCT TAB	-	NC
BYVALSON TAB	-	NC
DIOVAN HCT TAB	-	NC
DUTOPROL TAB	-	NC
EDARBYCLOR TAB	-	NC
EXFORGE TAB	-	NC
HYZAAR TAB	-	NC
LOTENSIN HCT TAB	-	NC

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DrugName	Special Code	Tier
ANTIHYPERTENSIVES Cont.		
LOTREL CAP	-	NC
MICARDIS HCT TAB	-	NC
PRESTALIA TAB	-	NC
QUINAPRIL/HCTZ TAB	-	NC
quinapril/hydrochlorothiazide tab (ACCURETIC equiv)	-	NC
TELMISARTAN/AMLODIPINE TAB	-	NC
telmisartan/amlodipine tab (TWYNSTA equiv)	-	NC
TENORETIC TAB	-	NC
TRANDOLAPRIL/VERAPAMIL ER TAB	-	NC
TRIBENZOR TAB	-	NC
VASERETIC TAB	-	NC
WIDAPLIK TAB	-	NC
ZESTORETIC TAB	-	NC
ZIAC TAB	-	NC
ANTIHYPERTENSIVES - MISC.		
VECAMYL TAB	-	NC
DIRECT RENIN INHIBITORS		
aliskiren tab (TEKTURNA equiv)	-	2
TEKTURNA TAB	-	NC
ENDOTHELIN RECEPTOR ANTAGONISTS		
TRYVIO TAB	-	NC
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
eplerenone tab (INSPRA equiv)	-	1
INSPRA TAB	-	NC
VASODILATORS		
hydralazine tab (APRESOLINE equiv)	-	1
minoxidil tab (LONITEN equiv)	-	1
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
metronidazole tab (FLAGYL equiv)	-	1
tinidazole tab (TINDAMAX equiv)	-	1
trimethoprim tab (PROLOPRIM equiv)	-	1
pentamidine neb soln (NEBUPENT equiv)	-	2
XIFAXAN TAB 550MG (QL= 60 tabs/30 days)	QL	2
FIRST METRONIDAZOLE SUSP	-	3
LIKMEZ SUSP (Prior Authorization required for members age 7 years and older)	PA	3
XIFAXAN TAB 200MG (QL= 9 tabs/3 days)	QL	3
AEMCOLO TAB	-	NC
FLAGYL TAB	-	NC
IMPAVIDO CAP	-	NC
metronidazole cap (FLAGYL equiv)	-	NC
METRONIDAZOLE TAB	-	NC
NEBUPENT NEB SOLN	-	NC
NUZOLVENCE GRANULE PACK	-	NC

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DrugName	Special Code	Tier
ANTI-INFECTIVE AGENTS - MISC. Cont.		
TINDAMAX TAB	-	NC
TRIMETHOPRIM TAB	-	NC
ANTI-INFECTIVE MISC. - COMBINATIONS		
smz/tmp (DS) tab (BACTRIM DS equiv)	-	1
smz/tmp susp (BACTRIM, SEPTRA equiv)	-	1
BACTRIM DS TAB	-	NC
HYOPHEN TAB	-	NC
UTA cap	-	NC
ANTIPROTOZOAL AGENTS		
atovaquone susp (MEPRON equiv)	-	2
LAMPIT TAB	PA	2
nitazoxanide tab (ALINIA equiv) (QL= 6 tabs/3 days)	PA-QL	2
ALINIA TAB	-	NC
MEPRON SUSP	-	NC
GLYCOPEPTIDES		
vancomycin cap (VANCOCIN equiv) (QL= 56 caps/fill)	QL	1
FIRVANQ SOLN 25MG/ML	-	NC
FIRVANQ SOLN 50MG/ML	-	NC
VANCOCIN CAP	-	NC
vancomycin hcl soln (VANCOMYCIN equiv)	-	NC
VANCOMYCIN ORAL SOLN	-	NC
VANCOMYCIN SOLN	-	NC
LEPROSTATICS		
dapsone tab	-	1
LINCOSAMIDES		
clindamycin cap (CLEOCIN equiv)	-	1
clindamycin soln (CLEOCIN equiv)	-	2
CLEOCIN CAP	-	NC
CLEOCIN SOLN	-	NC
OXAZOLIDINONES		
SIVEXTRO TAB (QL= 6 tabs/fill; Restricted to Infectious Disease Specialist)	QL-RS	2
SIVEXTRO TAB (QL= 6 tabs/fill; Restricted to Infectious Disease Specialist)	QL-RS	2
ZYVOX SUSP	-	NC
ZYVOX TAB	-	NC
SIVEXTRO INJ	-	NC/3P
PENEMS		
ORLYNVAH TAB	-	NC
POLYMYXINS		
colistimethate inj (COLY-MYCIN M equiv)	-	NC
URINARY ANTI-INFECTIVES		
nitrofurantoin macrocrystals cap (MACRODANTIN equiv)	-	1
nitrofurantoin monohydrate cap (MACROBID equiv)	-	1
methenamine hippurate tab (HIPREX equiv)	-	2
fosfomycin tromethamine powder pack (MONUROL equiv)	-	3

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DrugName	Special Code	Tier
ANTI-INFECTIVE AGENTS - MISC. Cont.		
nitrofurantoin susp (FURADANTIN equiv) (Prior Authorization required for members age 9 years and older)	PA	3
BLUJEPA TAB	-	NC
HIPREX TAB	-	NC
MACROBID CAP	-	NC
MACRODANTIN CAP	-	NC
METHENAM MAN TAB	-	NC
METHENAMINE ORAL SOLN	-	NC
MONUROL GRANULE PACK	-	NC
nitrofurantoin macrocrystals cap 25mg (MACRODANTIN equiv)	-	NC
NITROFURANTOIN SUSP	-	NC
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
atovaquone/proguanil tab (MALARONE equiv)	-	1
MALARONE TAB	-	NC
PYRIMETHAMINE/LEUCOVORIN CAP	-	NC
ANTIMALARIALS		
CHLOROQUINE TAB	-	1
chloroquine tab (ARALEN equiv)	-	1
HYDROXYCHLOROQUINE TAB	-	1
hydroxychloroquine tab (PLAQUENIL equiv)	-	1
primaquine tab (PRIMAQUINE equiv)	-	1
pyrimethamine tab (DARAPRIM equiv) (QL= 3 tabs/day)	QL-SP	1
KRINTAFEL TAB	-	2
mefloquine tab (LARIAM equiv)	-	2
ARAKODA TAB	-	3
PLAQUENIL TAB	-	NC
PRIMAQUINE TAB	-	NC
QUALAQUIN CAP	-	NC
quinine sulfate cap (QUALAQUIN equiv)	-	NC
SOVUNA TAB 200MG	-	NC
SOVUNA TAB 300MG	-	NC
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
pyridostigmine tab (MESTINON equiv)	-	1
pyridostigmine CR tab (MESTINON equiv)	-	2
pyridstigmine soln (MESTINON equiv)	-	3
FIRDAPSE TAB	PA-SP	4
MESTINON SYRUP	-	NC
MESTINON TAB	-	NC
MESTINON TIMESPAN TAB	-	NC
PYRIDOSTIGMINE TAB 30MG	-	NC
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
isoniazid tab	-	1

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DrugName	Special Code	Tier
ANTIMYCOBACTERIAL AGENTS Cont.		
pyrazinamide tab	-	1
ethambutol tab (MYAMBUTOL equiv)	-	2
PRETOMANID TAB (QL= 1 tab/day)	PA-QL	2
PRIFTIN TAB	-	2
rifabutin cap (MYCOBUTIN equiv)	-	2
rifampin cap (RIFADIN equiv)	-	2
rifapentine tab (PRIFTIN equiv)	-	2
isoniazid syrup (ISONIAZID equiv)	-	3
CYCLOSERINE CAP	-	NC
MYAMBUTOL TAB	-	NC
MYCOBUTIN CAP	-	NC
RIFADIN CAP	-	NC
SIRTURO TAB	-	NC
TRECATOR TAB	-	NC
ANTINEOPLASTICS		
ANTINEOPLASTICS MISC.		
tretinoin cap (VESANOID equiv)	SP	1
TOPOISOMERASE I INHIBITORS		
HYCAMTIN CAP	SP	4
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
temozolomide cap (TEMODAR equiv)	SP	1
cyclophosphamide cap	-	2
CYCLOPHOSPHAMIDE TAB	-	2
GLEOSTINE CAP	-	2
lomustine cap (GLEOSTINE equiv)	-	2
MYLERAN TAB	SP	4
CYCLOPHOSPHAMIDE CAP	-	NC
LEUKERAN TAB	-	NC
ANTIMETABOLITES		
capecitabine tab (XELODA equiv)	SP	1
methotrexate inj	-	1
methotrexate tab (TREXALL equiv)	-	1
mercaptopurine tab (PURINETHOL equiv)	-	2
TABLOID TAB	-	2
JYLAMVO SOLN, XATMEP SOLN (Prior Authorization required for members age 9 years and older)	PA	3
mercaptopurine susp (PURIXAN equiv) (Prior Authorization required for members age 9 years and older)	PA	3
METHOTREXATE INJ	-	NC
ONUREG TAB	-	NC
TREXALL TAB	-	NC
FOLOTYN INJ	-	NC/3P
pralatrexate iv inj (FOLOTYN equiv)	-	NC/3P
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA CAP 1MG (QL= 84 caps/28 days)	PA-QL-SP	4

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
FRUZAQLA CAP 5MG (QL= 21 caps/28 days)	PA-QL-SP	4
INLYTA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
INLYTA TAB 1MG (QL= 8 tabs/day)	PA-QL-SF-SP	4
LENVIMA CAP (QL= 3 caps/day)	PA-QL-SF-SP	4
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
TUKYSA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
HERNEXEOS TAB	-	NC
ANTINEOPLASTIC - BCL-2 INHIBITORS		
VENCLEXTA STARTER PACK	PA-SP	4
VENCLEXTA TAB	PA-SP	4
BEQALZI TAB	-	NC
BEQALZI TAB STARTER PACK	-	NC
ANTINEOPLASTIC - EGFR INHIBITORS		
erlotinib tab 25mg (TARCEVA equiv) (QL= 3 tabs/day)	PA-QL-SF-SP	1
gefitinib tab (IRESSA equiv) (QL= 1 tab/day)	PA-QL	1
erlotinib tab (TARCEVA equiv)	PA-SP	4
GILOTRIF TAB (QL= 1 tab/day)	PA-QL-SP	4
TAGRISSO TAB (QL= 1 tab/day)	PA-QL-SF-SP	4
VIZIMPRO TAB (QL= 1 tab/day)	PA-QL-SF-SP	4
EXKIVITY CAP	-	NC
LAZCLUZE TAB	-	NC
TARCEVA TAB	-	NC
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS		
ERIVEDGE CAP (QL= 1 cap/day)	PA-QL-SF-SP	4
ODOMZO CAP (QL= 1 cap/day)	PA-QL-SF-SP	4
DAURISMO TAB	-	NC
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
anastrozole tab (ARIMIDEX equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0
exemestane tab (AROMASIN equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0
tamoxifen tab (NOLVADEX equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0
abiraterone tab 250mg (ZYTIGA equiv) (QL= 4 tabs/day)	QL-SP	1
bicalutamide tab (CASODEX equiv)	-	1
letrozole tab (FEMARA equiv)	-	1
megestrol susp (MEGACE equiv)	-	1
megestrol tab (MEGACE equiv)	-	1
NILUTAMIDE TAB	SP	1
nilutamide tab (NILANDRON equiv)	SP	1
EULEXIN CAP	-	2
FLUTAMIDE CAP	-	2
flutamide cap (EULEXIN equiv)	-	2
toremifene tab (FARESTON equiv)	-	2
ERLEADA TAB (QL= 4 tabs/day)	PA-QL-SP	4

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ERLEADA TAB 240MG (QL= 1 tab/day)	PA-QL-SP	4
INLURIYO TAB (QL= 2 tabs/day)	PA-QL-SP	4
LUPRON DEPOT INJ 11.25MG	SP	4
LUPRON DEPOT INJ 3.75MG	SP	4
LYSODREN TAB	SP	4
NUBEQA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
abiraterone acetate tab 500mg (ZYTIGA equiv)	-	NC
AKEEGA TAB	-	NC
ARIMIDEX TAB	-	NC
AROMASIN TAB	-	NC
CASODEX TAB	-	NC
ETCAMAH TAB	-	NC
FARESTON TAB	-	NC
FEMARA TAB	-	NC
HYDROXYPROGESTERONE CAPROATE INJ	-	NC
LIFYORLI CAP DOSE PACK	-	NC
MIMRYLO INJ	-	NC
ORGOVYX TAB	-	NC
ORSERDU TAB	-	NC
ORSERDU TAB 345MG	-	NC
VEPPANU TAB	-	NC
XTANDI CAP	-	NC
XTANDI TAB 40MG	-	NC
XTANDI TAB 80MG	-	NC
YONSA TAB	-	NC
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG TAB (QL= 3 tabs/day)	PA-QL-SP	4
ANTINEOPLASTIC - IMMUNOMODULATORS		
pomalidomide cap (POMALYST equiv) (QL= 21 caps/28 days)	PA-QL-SP	1
POMALYST CAP	-	NC
ZENBEXUS CAP	-	NC
ANTINEOPLASTIC - MENIN INHIBITORS		
REVUFORJ TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
REVUFORJ TAB 110MG (QL= 4 tabs/day)	PA-QL-SF-SP	4
REVUFORJ TAB 25MG (QL= 8 tabs/day)	PA-QL-SF-SP	4
KOMZIFTI CAP	-	NC
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
AYVAKIT TAB (QL= 1 tab/day)	PA-QL-SF-SP	4
ANTINEOPLASTIC - PROTEASE ACTIVATORS		
MODEYSO CAP	-	NC
ANTINEOPLASTIC - XPO1 INHIBITORS		
XPOVIO PAK (QL= 32 tabs/28 days)	PA-QL-SF-SP	4
ANTINEOPLASTIC COMBINATIONS		
INQOVI TAB (QL= 5 tabs/28 days)	PA-QL-SP	4

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
KISQALI PAK (QL= 91 tabs/28 days)	PA-QL-SP	4
LONSURF TAB	PA-SP	4
AVMAPKI FAKZYNJA CO-PACK	-	NC
ANTINEOPLASTIC ENZYME INHIBITORS		
bosutinib tab (BOSULIF equiv)	PA-SP	1
dasatinib tab (SPRYCEL equiv)	PA-SP	1
everolimus tab (AFINITOR equiv) (QL= 1 tab/day)	PA-QL-SP	1
imatinib tab (GLEEVEC equiv)	SP	1
lapatinib ditosylate tab (TYKERB equiv)	PA-SP	1
nilotinib hcl cap (TASIGNA equiv)	PA-SP	1
pazopanib tab (VOTRIENT equiv) (QL= 4 tabs/day)	PA-QL-SP	1
sorafenib tosylate tab (NEXAVAR equiv)	PA-SP	1
sunitinib malate cap (SUTENT equiv) (QL= 1 cap/day)	PA-QL-SP	1
ALECENSA CAP (QL= 8 caps/day)	PA-QL-SP	4
ALUNBRIG TAB 30MG (QL= 4 tabs/day)	PA-QL-SF-SP	4
ALUNBRIG TAB 90MG, 180MG (QL= 1 tab/day)	PA-QL-SF-SP	4
BALVERSA TAB 3MG (QL= 3 tabs/day)	PA-QL-SF-SP	4
BALVERSA TAB 4MG (QL= 2 tabs/day)	PA-QL-SF-SP	4
BALVERSA TAB 5MG (QL= 1 tab/day)	PA-QL-SF-SP	4
BOSULIF CAP	PA-SP	4
BRAFTOVI CAP 75MG (QL= 6 caps/day)	PA-QL-SP	4
BRUKINSA CAP (QL= 4 caps/day)	PA-QL-SF-SP	4
BRUKINSA TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
CABOMETYX TAB (QL= 1 tab/day)	PA-QL-SF-SP	4
CALQUENCE TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
CAPRELSA TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
CAPRELSA TAB 300MG (QL= 2 tabs/day)	PA-QL-SF-SP	4
COMETRIQ KIT	PA-SP	4
COPIKTRA CAP (QL= 2 caps/day)	PA-QL-SP	4
COTELLIC TAB (QL= 3 tabs/day)	PA-QL-SP	4
GAVRETO CAP (QL= 4 caps/day)	PA-QL-SF-SP	4
GOMEKLI CAP (QL= 84 caps/28 days)	PA-QL-SP	4
GOMEKLI CAP 1MG (QL= 168 caps/28 days)	PA-QL-SP	4
GOMEKLI TAB FOR ORAL SUSP (QL= 168 caps/28 days)	PA-QL-SP	4
IBTROZI CAP (QL= 3 caps/day)	PA-QL-SP	4
ICLUSIG TAB (QL= 1 tab/day)	PA-QL-SF-SP	4
IDHIFA TAB (QL= 1 tab/day)	PA-QL-SP	4
IMBRUVICA CAP 140MG (QL= 3 caps/day)	PA-QL-SP	4
IMBRUVICA CAP 70MG (QL= 1 cap/day)	PA-QL-SP	4
IMBRUVICA SUSP (QL= 6ml/day)	PA-QL-SP	4
IMBRUVICA TAB 420MG (QL= 1 tab/day)	PA-QL-SP	4
JAKAFI TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
KISQALI TAB (QL= 63 tabs/28 days)	PA-QL-SP	4
KOSELUGO CAP (QL= 4 caps/day)	PA-QL-SP	4
KOSELUGO CAP 10MG (QL= 8 caps/day)	PA-QL-SP	4
KOSELUGO SPRINKLE CAP (QL= 12 caps/day)	PA-QL-SP	4

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
KOSELUGO SPRINKLE CAP 5MG (QL= 20 caps/day)	PA-QL-SP	4
KRAZATI TAB (QL= 6 tabs/day)	PA-QL-SF-SP	4
LUMAKRAS TAB (QL= 8 tabs/day)	PA-QL-SF-SP	4
LUMAKRAS TAB 240MG (QL= 4 tabs/day)	PA-QL-SF-SP	4
LUMAKRAS TAB 320MG (QL= 3 tabs/day)	PA-QL-SF-SP	4
LYNPARZA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
LYTGOBI THERAPY PACK (QL= 5 tabs/day)	PA-QL-SF-SP	4
MEKINIST TAB 0.5MG (QL= 3 tabs/day)	PA-QL-SP	4
MEKINIST TAB 2MG (QL= 1 tab/day)	PA-QL-SP	4
MEKTOVI TAB (QL= 6 tabs/day)	PA-QL-SP	4
NERLYNX TAB (QL= 6 tabs/day)	PA-QL-SF-SP	4
NINLARO CAP	PA-SP	4
OGSIVEO TAB (QL= 2 tabs/day)	PA-QL-SF-SP	4
OGSIVEO TAB 50MG (QL= 6 tabs/day)	PA-QL-SF-SP	4
PEMAZYRE TAB (QL= 1 tab/day)	PA-QL-SP	4
PIQRAY TAB	PA-SF-SP	4
QINLOCK TAB (QL= 3 tabs/day)	PA-QL-SP	4
REZLIDHIA CAP (QL= 2 caps/day)	PA-QL-SF-SP	4
ROZLYTREK CAP (QL= 3 caps/day)	PA-QL-SP	4
ROZLYTREK PAK (QL= 6 packs/day)	PA-QL-SP	4
RUBRACA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
RYDAPT CAP (QL= 56 caps/28 days)	PA-QL-SP	4
SCEMBLIX TAB (QL= 2 tabs/day)	PA-QL-SP	4
SCEMBLIX TAB 100 MG (QL= 4 tabs/day)	PA-QL-SP	4
STIVARGA TAB (QL= 4 tabs/day)	PA-QL-SF-SP	4
TAFINLAR CAP (QL= 4 caps/day)	PA-QL-SP	4
TAFINLAR TAB	PA-SP	4
TALZENNA CAP 0.25MG (QL= 3 caps/day)	PA-QL-SF-SP	4
TALZENNA CAP 0.5MG, 0.75MG, 1MG (QL= 1 cap/day)	PA-QL-SF-SP	4
TIBSOVO TAB (QL= 2 tabs/day)	PA-QL-SP	4
TRUQAP TAB (QL= 64 tabs/28 days)	PA-QL-SP	4
TRUQAP THERAPY PACK (QL= 64 tabs/28 days)	PA-QL-SP	4
TURALIO CAP (QL= 4 caps/day)	PA-QL-SF-SP	4
VERZENIO TAB (QL= 2 tabs/day)	PA-QL-SP	4
VITRAKVI CAP 100MG (QL= 2 caps/day)	PA-QL-SF-SP	4
VITRAKVI CAP 25MG (QL= 6 caps/day)	PA-QL-SF-SP	4
VITRAKVI SOLN (QL= 10ml/day)	PA-QL-SF-SP	4
VONJO CAP (QL= 4 caps/day)	PA-QL-SP	4
XALKORI CAP (QL= 2 caps/day)	PA-QL-SF-SP	4
XOSPATA TAB (QL= 3 tabs/day)	PA-QL-SF-SP	4
ZEJULA TAB (QL= 1 tab/day)	PA-QL-SP	4
ZELBORAF TAB (QL= 8 tabs/day)	PA-QL-SP	4
ZOLINZA CAP	PA-SF-SP	4
ZYDELIG TAB	PA-SP	4
ZYKADIA TAB (QL= 3 tabs/day)	PA-QL-SF-SP	4
AFINITOR DISPERZ TAB	-	NC

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
AFINITOR TAB	-	NC
ALUNBRIG PAK	-	NC
AUGTYRO CAP	-	NC
AUGTYRO CAP 160MG	-	NC
BOSULIF TAB	-	NC
CAVHANZA TAB	-	NC
DANZITEN TAB	-	NC
ENSACOVE CAP	-	NC
ENSACOVE CAP 100MG	-	NC
everolimus tab for oral susp (AFINITOR DISPERZ equiv)	-	NC
FOTIVDA CAP	-	NC
HYRNUO TAB	-	NC
IBRANCE CAP	-	NC
IBRANCE TAB	-	NC
IMBRUVICA TAB 140MG	-	NC
IMBRUVICA TAB 280MG	-	NC
IMKELDI SOLUTION	-	NC
INREBIC CAP	-	NC
ITOVEBI TAB	-	NC
JAKAFI XR TAB	-	NC
JAYPIRCA TAB	-	NC
JIDEYTRO TAB	-	NC
LORBRENA TAB 100MG	-	NC
LORBRENA TAB 25MG	-	NC
MEKINIST SOLN	-	NC
NILOTINB TAR CAP	-	NC
NILOTINIB D-TAR CAP	-	NC
OJEMDA SUSP	-	NC
OJEMDA TAB	-	NC
OJJAARA TAB	-	NC
PAZOPANIB TAB 400MG	-	NC
PHYRAGO TAB	-	NC
RASONQUE TAB	-	NC
RETEVMO CAP	-	NC
RETEVMO CAP 40MG	-	NC
RETEVMO TAB	-	NC
RETEVMO TAB 40MG	-	NC
ROMVIMZA CAP	-	NC
SPRYCEL TAB	-	NC
SUTENT CAP	-	NC
TABRECTA TAB	-	NC
TALZENNA CAP 0.1MG	-	NC
TALZENNA CAP 0.35MG	-	NC
TASIGNA CAP	-	NC
TEPMETKO TAB	-	NC
TYKERB TAB	-	NC

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DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
VANFLYTA TAB	-	NC
VANFLYTA TAB 26.5MG	-	NC
VORANIGO TAB	-	NC
VORANIGO TAB 10MG	-	NC
VOTRIENT TAB	-	NC
XALKORI SPRINKLE CAP	-	NC
ANTINEOPLASTICS MISC.		
bexarotene cap (TARGRETIN equiv) (QL= 10 caps/day)	QL-SP	1
hydroxyurea cap (HYDREA equiv)	-	1
MATULANE CAP	SP	4
HYDREA CAP	-	NC
SYLATRON INJ	-	NC
BESREMI PEN INJ	-	NC/3P
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
leucovorin tab	-	1
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
mesna tab (MESNEX equiv)	SP	1
IWILFIN TAB (QL= 8 tabs/day)	PA-QL-SF-SP	4
LEUCOVORIN CA TAB	-	NC
MESNEX TAB	-	NC
MITOTIC INHIBITORS		
ETOPOSIDE CAP	SP	4
ONCOLYTIC VIRAL AGENTS		
TUDRIQEV INJ	-	NC/3P
ANTIPARKINSON AGENTS		
ANTIPARKINSON ADJUVANTS		
carbidopa tab (LODOSYN equiv)	-	2
LODOSYN TAB	-	NC
ANTIPARKINSON ANTICHOLINERGICS		
benztropine tab	-	1
trihexyphenidyl tab (ARTANE equiv)	-	1
ANTIPARKINSON COMT INHIBITORS		
entacapone tab (COMTAN equiv)	-	2
tolcapone tab (TASMAR equiv)	-	3
COMTAN TAB	-	NC
TASMAR TAB	-	NC
ANTIPARKINSON DOPAMINERGICS		
amantadine cap (SYMMETREL equiv)	-	1
carbidopa/levodopa ER tab (SINEMET CR equiv)	-	1
carbidopa/levodopa ODT (PARCOPA equiv)	-	1
carbidopa/levodopa tab (SINEMET equiv)	-	1
pramipexole tab (MIRAPEX equiv)	-	1
ropinirole tab (REQUIP equiv)	-	1
amantadine tab	-	2

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DrugName	Special Code	Tier
ANTIPARKINSON AGENTS Cont.		
bromocriptine cap (PARLODEL equiv)	-	2
bromocriptine tab (PARLODEL equiv)	-	2
CARBIDOPA/LEVODOPA/ENTACAPONE TAB (STALEVO equiv)	-	2
ropinirole ER tab (REQUIP XL equiv)	-	2
NEUPRO PATCH	-	3
pramipexole ER tab (MIRAPEX ER equiv)	-	3
CREXONT CAP	-	NC
DUOPA ENTERAL SUSP	-	NC
GOCOVRI CAP	-	NC
MIRAPEX ER TAB	-	NC
MIRAPEX TAB	-	NC
PARLODEL CAP	-	NC
PARLODEL TAB	-	NC
REQUIP TAB	-	NC
REQUIP XL TAB	-	NC
SINEMET CR TAB	-	NC
SINEMET TAB	-	NC
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
selegiline cap (ELDEPRYL equiv)	-	1
selegiline tab (ELDEPRYL equiv)	-	1
rasagiline tab (AZILECT equiv)	-	2
XADAGO TAB (QL= 1 tab/day)	PA-QL	3
AZILECT TAB	-	NC
ELDEPYRL CAP	-	NC
ZELAPAR ODT	-	NC
ANTIPARKINSON AND RELATED THERAPY AGENTS		
ANTIPARKINSON ANTICHOLINERGICS		
trihexyphenidyl elixir (ARTANE equiv)	-	1
ANTIPARKINSON COMT INHIBITORS		
ONGENTYS CAP (QL= 1 tab/day, 30 tabs per fill)	PA-QL	3
ANTIPARKINSON DOPAMINERGICS		
amantadine soln (AMANTADINE equiv)	-	1
carbidopa-levodopa-entacapone tab (STALEVO equiv)	-	2
INBRIJA INH POWDER (QL= 10 caps/day)	PA-QL-SP	4
APOKYN INJ	-	NC
apomorphine inj (APOKYN equiv)	-	NC
CARBIDOPA/LEVODOPA CAP, RYTARY CAP	-	NC
DHIVY TAB	-	NC
KYNMOBI FILM	-	NC
KYNMOBI TITRATION KIT	-	NC
ONAPGO INJ	-	NC
OSMOLEX ER TAB	-	NC
STALEVO TAB	-	NC
VYALEV INJ	-	NC
ANTIPSYCHOTICS/ANTIMANIC AGENTS		

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DrugName	Special Code	Tier
ANTIPSYCHOTICS/ANTIMANIC AGENTS Cont.		
ANTIMANIC AGENTS		
lithium carbonate cap (ESKALITH ER equiv)	-	1
lithium carbonate ER tab (LITHOBID equiv)	-	1
lithium carbonate tab	-	1
lithium oral solution (LITHIUM equiv) (Prior Authorization required for members age 7 years and older)	PA	1
LITHOBID TAB	-	NC
ANTIPSYCHOTICS - MISC.		
lurasidone hcl tab (LATUDA equiv)	-	1
ziprasidone cap (GEODON equiv)	-	1
EQUETRO CAP	-	2
CAPLYTA CAP	-	NC
GEODON CAP	-	NC
LATUDA TAB	-	NC
NUPLAZID CAP	-	NC
NUPLAZID TAB	-	NC
VRAYLAR CAP	-	NC
VRAYLAR PACK	-	NC
BENZISOXAZOLES		
risperidone microspheres inj (RISPERDAL equiv)	-	1
risperidone soln (RISPERDAL equiv)	-	1
risperidone tab (RISPERDAL equiv)	-	1
INVEGA INJ	-	2
paliperidone ER tab (INVEGA equiv)	-	2
PERSERIS INJ	-	2
RISPERIDONE ODT	-	2
risperidone ODT (RISPERDAL M equiv)	-	2
UZEDY INJ	-	2
BYSANTI TAB	-	NC
BYSANTI TITRATION PACK	-	NC
FANAPT TAB	-	NC
FANAPT TITRATION PACK	-	NC
FANAPT TITRATION PACK 1MG/2MG/6MG/8MG	-	NC
INVEGA TAB	-	NC
RISPERDAL M ODT	-	NC
RISPERDAL SOLN	-	NC
RISPERDAL TAB	-	NC
BUTYROPHENONES		
haloperidol decanoate inj (HALDOL equiv)	-	1
haloperidol lactate conc (HALDOL equiv)	-	1
haloperidol tab (HALDOL equiv)	-	1
DIBENZAPINES		
loxapine cap (LOXITANE equiv)	-	1
olanzapine tab (ZYPREXA equiv)	-	1
quetiapine tab (SEROQUEL equiv)	-	1
quetiapine XR tab (SEROQUEL XR equiv)	-	1

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DrugName	Special Code	Tier
ANTIPSYCHOTICS/ANTIMANIC AGENTS Cont.		
asenapine maleate SL tab (SAPHRIS equiv) (QL= 2 tabs/day)	QL	2
clozapine tab (CLOZARIL equiv)	-	2
olanzapine ODT (ZYPREXA equiv)	-	2
ZYPREXA RELPREVV INJ	-	2
ADASUVE INHALER	-	NC
clozapine odt tab (CLOZAPINE, FAZACLO equiv)	-	NC
CLOZAPINE ODT, FAZACLO ODT	-	NC
CLOZARIL TAB	-	NC
QUETIAPINE TAB	-	NC
SAPHRIS SL TAB	-	NC
SECUADO PATCH	-	NC
SEROQUEL TAB	-	NC
SEROQUEL XR TAB	-	NC
VERSACLOZ SUSP	-	NC
ZYPREXA TAB	-	NC
ZYPREXA ZYDIS TAB	-	NC
DIHYDROINDOLONES		
MOLINDONE TAB	-	NC
MUSCARINIC AGENTS		
COBENFY CAP	-	NC
COBENFY CAP STARTER PACK	-	NC
PHENOTHIAZINES		
chlorpromazine tab (THORAZINE equiv)	-	1
fluphenazine decanoate inj	-	1
fluphenazine tab (PROLIXIN equiv)	-	1
perphenazine tab (TRILAFON equiv)	-	1
prochlorperazine supp (COMPAZINE equiv)	-	1
prochlorperazine tab (COMPAZINE equiv)	-	1
thioridazine hcl tab (THIORIDAZINE equiv)	-	1
trifluoperazine tab (STELAZINE equiv)	-	1
CHLORPROMAZINE CONC	-	NC
chlorpromazine hcl conc	-	NC
QUINOLINONE DERIVATIVES		
aripiprazole tab (ABILIFY equiv)	-	1
ABILIFY MAINTENA INJ	-	2
ABILIFY MAINTENA INJ ABILIFY ASIMTUFII INJ	-	2
aripiprazole soln (ABILIFY equiv)	-	3
ABILIFY MYCITE PACK	-	NC
ABILIFY MYCITE TAB	-	NC
ABILIFY TAB	-	NC
aripiprazole ODT (ABILIFY equiv)	-	NC
OPIPZA FILM	-	NC
REXULTI TAB	-	NC
THIOXANTHENES		
thiothixene cap (NAVANE equiv)	-	1

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DrugName	Special Code	Tier
ANTISEPTICS & DISINFECTANTS		
ANTISEPTICS & DISINFECTANTS		
HYLAMEND GEL FIRST AID	-	NC
IODINE ANTISEPTICS		
IODOFLEX PAD	-	NC
ANTIVIRALS		
ANTIRETROVIRALS		
DESCOVY TAB	PA	$0
emtricitabine/tenofovir disoproxil fumarate tab (TRUVADA equiv)	-	$0
YEZTUGO INJ (QL= 2 inj/180 days)	PA-QL-SP	$0
YEZTUGO TAB (QL= 4 tabs/28 days)	PA-QL-SP	$0
nevirapine tab (VIRAMUNE equiv)	-	1
abacavir soln (ZIAGEN equiv)	-	2
abacavir tab (ZIAGEN equiv)	-	2
abacavir/lamivudine tab (EPZICOM equiv)	-	2
APTIVUS CAP	-	2
atazanavir cap (REYATAZ equiv)	-	2
BIKTARVY TAB	-	2
CIMDUO TAB	-	2
darunavir tab (PREZISTA equiv)	-	2
DELSTRIGO TAB	-	2
DOVATO TAB	-	2
EDURANT PED TAB	-	2
EDURANT TAB	-	2
efavirenz tab (SUSTIVA equiv)	-	2
efavirenz/emtricitabine/tenofovir df tab (ATRIPLA equiv)	-	2
efavirenz/lamivudine/tenofovir df (lo) tab (SYMFI (LO) equiv)	-	2
EFAVIRENZ/LAMIVUDINE/TENOFOVIR TAB	-	2
emtricitabine cap (EMTRIVA equiv)	-	2
emtricitabine-rilpivirine-tenofovir df tab (COMPLERA equiv)	-	2
EMTRIVA SOLN	-	2
etravirine tab (INTELENCE equiv)	-	2
EVOTAZ TAB	-	2
fosamprenavir tab (LEXIVA equiv)	-	2
GENVOYA TAB	-	2
INTELENCE TAB	-	2
ISENTRESS (HD) TAB	-	2
ISENTRESS CHEW TAB	-	2
ISENTRESS POWDER PACK	-	2
JULUCA TAB	-	2
lamivudine soln (EPIVIR equiv)	-	2
lamivudine tab (EPIVIR equiv)	-	2
lamivudine/zidovudine tab (COMBIVIR equiv)	-	2
lopinavir/ritonavir soln (KALETRA equiv)	-	2
lopinavir/ritonavir tab (KALETRA equiv)	-	2
maraviroc tab (SELZENTRY equiv)	-	2

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DrugName	Special Code	Tier
ANTIVIRALS Cont.		
NEVIRAPINE ER TAB	-	2
nevirapine ER tab (VIRAMUNE XR equiv)	-	2
NEVIRAPINE SUSP	-	2
NORVIR POWDER PACK	-	2
ODEFSEY TAB	-	2
PIFELTRO TAB	-	2
PREZCOBIX TAB	-	2
PREZISTA SUSP	-	2
PREZISTA TAB	-	2
REYATAZ POWDER PACK	-	2
rilpivirine hcl tab (EDURANT equiv)	-	2
ritonavir tab (NORVIR equiv)	-	2
SELZENTRY SOLN	-	2
STRIBILD TAB	-	2
SYMTUZA TAB	-	2
tenofovir disoproxil fumarate tab (VIREAD equiv)	-	2
TIVICAY PD TAB	-	2
TIVICAY TAB	-	2
TRIUMEQ PD TAB	-	2
TRIUMEQ TAB	-	2
TYBOST TAB	-	2
VIRACEPT TAB	-	2
VIREAD TAB	-	2
zidovudine cap (RETROVIR equiv)	-	2
zidovudine syrup (RETROVIR equiv)	-	2
zidovudine tab (RETROVIR equiv)	-	2
COMPLERA TAB	-	3
CABENUVA IM SUSP (QL= 1 kit/30 days)	QL-SP	4
CABENUVA SUSP 600MG-900MG/3ML (QL= 1 kit/30 days)	QL-SP	4
ATRIPLA TAB	-	NC
BIXLENVO TAB	-	NC
COMBIVIR TAB	-	NC
EMTRIVA CAP	-	NC
EPIVIR SOLN	-	NC
EPIVIR TAB	-	NC
EPZICOM TAB	-	NC
IDVYNSO TAB	-	NC
INTELENCE TAB	-	NC
KALETRA SOLN	-	NC
KALETRA TAB	-	NC
LEXIVA TAB	-	NC
NORVIR TAB	-	NC
PREZISTA TAB	-	NC
RETROVIR CAP	-	NC
RETROVIR SYRUP	-	NC
RETROVIR TAB	-	NC

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DrugName	Special Code	Tier
ANTIVIRALS Cont.		
REYATAZ CAP	-	NC
SELZENTRY TAB	-	NC
SUSTIVA TAB	-	NC
SYMFI (LO) TAB	-	NC
TRUVADA TAB	-	NC
VIRAMUNE SUSP	-	NC
VIRAMUNE TAB	-	NC
VIRAMUNE XR TAB	-	NC
VIREAD TAB	-	NC
ZIAGEN SOLN	-	NC
ZIAGEN TAB	-	NC
ANTIVIRAL COMBINATIONS		
PAXLOVID PAK (QL= 11 tabs/90 days)	QL	2
PAXLOVID TAB 150-100MG (QL= 20 tabs/90 days)	QL	2
PAXLOVID TAB 300-100MG (QL= 30 tabs/90 days)	QL	2
CMV AGENTS		
valganciclovir soln (VALCYTE equiv)	-	2
valganciclovir tab (VALCYTE equiv)	-	2
LIVTENCITY TAB (QL= 4 tabs/day)	PA-QL-SP	4
PREVYMIS PAK (QL= 4 packets/day; Limit 800 packets/365 days)	PA-QL-SP	4
PREVYMIS TAB (QL= 1 tab/day; Limit 200 tabs/365 days)	PA-QL-SP	4
VALCYTE SOLN	-	NC
VALCYTE TAB	-	NC
HEPATITIS AGENTS		
ribavirin cap (REBETOL equiv) (Restricted to Infectious Disease or Pulmonology Specialist)	RS-SP	1
adefovir dipivoxil tab (HEPSERA equiv)	-	2
entecavir tab (BARACLUDE equiv) (QL= 1 tab/day)	QL	2
lamivudine tab 100mg (EPIVIR HBV equiv)	-	2
VEMLIDY TAB	-	2
BARACLUDE SOLN (Prior Authorization required for members age 9 years and older)	PA	3
LEDIPASVIR/SOFOSBUVIR TAB (QL= 1 tab/day)	PA-QL-SP	4
MAVYRET PAK (QL= 5 packs/day)	PA-QL-SP	4
MAVYRET TAB (QL= 3 tabs/day)	QL-SP	4
PEGASYS INJ	SP	4
RIBAVIRIN CAP	SP	4
RIBAVIRIN TAB	SP	4
SOFOSBUVIR/VELPATASVIR TAB (QL= 1 tab/day)	PA-QL-SP	4
VOSEVI TAB (QL= 1 tab/day)	PA-QL-SP	4
BARACLUDE TAB	-	NC
EPCLUSA PAK	-	NC
EPCLUSA TAB	-	NC
HARVONI PELLET PAK	-	NC
HARVONI TAB	-	NC
HEPCLUDEX INJ	-	NC
SOVALDI PELLET PAK	-	NC

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DrugName	Special Code	Tier
ANTIVIRALS Cont.		
SOVALDI TAB	-	NC
ZEPATIER TAB	-	NC
HERPES AGENTS		
acyclovir cap (ZOVIRAX equiv)	-	1
acyclovir susp (ZOVIRAX equiv)	-	1
acyclovir tab (ZOVIRAX equiv)	-	1
valacyclovir tab (VALTREX equiv)	-	1
famciclovir tab (FAMVIR equiv)	-	2
SITAVIG TAB	-	NC
VALTREX TAB	-	NC
ZOVIRAX CAP	-	NC
ZOVIRAX SUSP	-	NC
ZOVIRAX TAB	-	NC
INFLUENZA AGENTS		
oseltamivir cap (TAMIFLU equiv) (QL= 10 caps/fill)	QL	1
oseltamivir cap 30mg (TAMIFLU equiv) (QL= 20 caps/fill)	QL	1
oseltamivir susp (TAMIFLU equiv) (QL= 250ml/fill)	QL	2
RELENZA DISKHALER (QL= 1 inhaler/fill)	QL	2
RIMANTADINE TAB	-	3
XOFLUZA TAB (QL= 1 tab/fill)	QL	3
FLUMADINE TAB	-	NC
TAMIFLU CAP	-	NC
TAMIFLU CAP 30MG	-	NC
TAMIFLU SUSP	-	NC
MISC. ANTIVIRALS		
LAGEVRIO CAP (EUA) (QL= 40 caps/fill)	QL	$0
LAGEVRIO CAP 200MG (QL= 40 caps/fill)	QL	2
XOCOVA TAB	-	NC
RESPIRATORY SYNCYTIAL VIRUS (RSV) AGENTS		
RIBAVIRIN INH	-	NC
ribavirin inh soln (VIRAZOLE equiv)	-	NC
ASSORTED CLASSES		
CHELATING AGENTS		
D-PENAMINE TAB	-	2
IMMUNOMODULATORS		
THALOMID CAP	SP	4
IMMUNOSUPPRESSIVE AGENTS		
azathioprine tab (IMURAN equiv)	-	1
mycophenolate mofetil cap (CELLCEPT equiv)	-	1
mycophenolate mofetil tab (CELLCEPT equiv)	-	1
tacrolimus cap (PROGRAF equiv)	-	1
cyclosporine cap (SANDIMMUNE equiv)	-	2
cyclosporine modified cap (NEORAL equiv)	-	2
cyclosporine modified soln (NEORAL equiv)	-	2

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ASSORTED CLASSES Cont.		
mycophenolate DR tab (MYFORTIC equiv)	-	2
mycophenolate mofetil susp (CELLCEPT SUSP equiv)	-	2
SANDIMMUNE SOLN 100MG/ML	-	2
sirolimus tab (RAPAMUNE equiv)	-	2
CELLCEPT CAP	-	NC
CELLCEPT SUSP	-	NC
CELLCEPT TAB	-	NC
ENVARSUS XR TAB	-	NC
IMURAN TAB	-	NC
MYFORTIC TAB	-	NC
NEORAL CAP	-	NC
NEORAL SOLN	-	NC
PROGRAF CAP	-	NC
RAPAMUNE TAB	-	NC
SANDIMMUNE CAP	-	NC
POTASSIUM REMOVING RESINS		
sodium polystyrene susp (SPS equiv)	-	1
sodium polystyrene powder (KAYEXALATE equiv)	-	2
VELTASSA POWDER (QL= 1 packet/day)	PA-QL	2
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
carvedilol tab (COREG equiv)	-	1
labetalol tab (NORMODYNE equiv)	-	1
carvedilol phosphate ER cap (COREG CR equiv)	-	NC
COREG CR CAP	-	NC
COREG TAB	-	NC
labetalol hcl tab 400mg	-	NC
BETA BLOCKERS CARDIO-SELECTIVE		
acebutolol cap (SECTRAL equiv)	-	1
atenolol tab (TENORMIN equiv)	-	1
betaxolol tab (KERLONE equiv)	-	1
bisoprolol tab (ZEBETA equiv)	-	1
metoprolol ER tab (TOPROL XL equiv)	-	1
metoprolol tab (LOPRESSOR equiv)	-	1
nebivolol hcl tab (BYSTOLIC equiv)	-	1
LOPRESSOR SOLN (QL= 45ml/day; Prior Authorization required for members age 7 years and older)	PA-QL	3
BISOPROLOL FUMARATE TAB	-	NC
BYSTOLIC TAB	-	NC
KAPSPARGO CAP	-	NC
KERLONE TAB	-	NC
LOPRESSOR TAB	-	NC
METOPROLOL TARTRATE TAB	-	NC
TENORMIN TAB	-	NC
TOPROL XL TAB	-	NC
BETA BLOCKERS NON-SELECTIVE		

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DrugName	Special Code	Tier
BETA BLOCKERS Cont.		
pindolol tab (VISKEN equiv)	-	1
propranolol ER cap (INDERAL LA equiv)	-	1
propranolol hcl oral soln 20mg/5ml	-	1
PROPRANOLOL SOLN	-	1
PROPRANOLOL SOLN 20MG/5ML	-	1
propranolol tab (INDERAL equiv)	-	1
sotalol AF tab (BETAPACE AF equiv)	-	1
sotalol tab (BETAPACE equiv)	-	1
TIMOLOL MALEATE TAB	-	1
timolol maleate tab (BLOCADREN equiv)	-	1
nadolol tab (CORGARD equiv)	-	2
SOTYLIZE SOLN 5MG/ML (Prior Authorization required for members age 9 years and older)	PA	3
BETAPACE AF TAB	-	NC
BETAPACE TAB	-	NC
CORGARD TAB	-	NC
HEMANGEOL ORAL SOLN	-	NC
HEMANGEOL SOLN	-	NC
INDERAL LA CAP	-	NC
INDERAL XL CAP, INNOPRAN XL CAP	-	NC
SOTYLIZE SOLN	-	NC
BIOLOGICALS MISC		
ALLERGENIC EXTRACTS		
GRASTEK SL TAB	-	NC
ORALAIR SL TAB	-	NC
RAGWITEK SL TAB	-	NC
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKER COMBINATIONS		
CONSENSI TAB	-	NC
CALCIUM CHANNEL BLOCKERS		
amlodipine tab (NORVASC equiv)	-	1
diltiazem ER cap (CARDIZEM CD equiv)	-	1
diltiazem ER cap (DILACOR XR equiv)	-	1
diltiazem ER cap (TIAZAC equiv)	-	1
diltiazem tab (CARDIZEM equiv)	-	1
felodipine ER tab (PLENDIL equiv)	-	1
isradipine cap (DYNACIRC equiv)	-	1
nifedipine cap (PROCARDIA equiv)	-	1
nifedipine ER tab (ADALAT CC equiv)	-	1
verapamil SR cap (VERELAN equiv)	-	1
verapamil SR tab (CALAN SR, ISOPTIN SR equiv)	-	1
verapamil tab (CALAN equiv)	-	1
diltiazem ER cap (CARDIZEM SR equiv)	-	2
diltiazem ER tab (CARDIZEM LA equiv)	-	2
KATERZIA SUSP (Prior Authorization required for members age 9 years and older)	PA	3
nicardipine cap (CARDENE equiv)	-	3

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DrugName	Special Code	Tier
CALCIUM CHANNEL BLOCKERS Cont.		
nimodipine cap (NIMOTOP equiv)	-	3
nisoldipine ER tab (SULAR equiv)	-	3
NISOLDIPINE ER TAB 20MG, 30MG, 40MG	-	3
NORLIQVA ORAL SOLN (Prior Authorization required for members age 9 years and older)	PA	3
ADALAT CC TAB	-	NC
CALAN SR TAB	-	NC
CARDAMYST NASAL SPRAY	-	NC
CARDIZEM CD CAP	-	NC
CARDIZEM LA TAB	-	NC
CARDIZEM TAB	-	NC
CONJUPRI TAB, LEVAMLODIPINE TAB	-	NC
DILACOR XR CAP	-	NC
NORVASC TAB	-	NC
NYMALIZE SOLN	-	NC
SDAMLO SOLN	-	NC
SULAR ER TAB 17MG	-	NC
SULAR ER TAB 34MG	-	NC
SULAR ER TAB 8.5MG	-	NC
TIAZAC CAP	-	NC
VERAPAMIL CR CAP, VERELAN CAP	-	NC
VERAPAMIL ER CAP	-	NC
VERELAN CAP	-	NC
CARDIOTONICS		
CARDIAC GLYCOSIDES		
digoxin soln (LANOXIN equiv)	-	1
digoxin tab (LANOXIN equiv)	-	1
DIGOXIN SOLN 0.05MG/ML	-	NC
digoxin tab 62.5mcg (LANOXIN equiv)	-	NC
LANOXIN INJ	-	NC
LANOXIN TAB	-	NC
LANOXIN TAB 62.5MCG	-	NC
CARDIOVASCULAR AGENTS - MISC.		
CARDIAC MYOSIN INHIBITORS		
CAMZYOS CAP (QL= 1 cap/day)	PA-QL-SP	4
MYQORZO TAB	-	NC
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS		
sacubitril-valsartan tab (ENTRESTO equiv) (QL= 2 tabs/day)	QL	1
amlodipine/atorvastatin tab (CADUET equiv)	-	NC
BIDIL TAB	-	NC
ENTRESTO CAP	-	NC
ENTRESTO TAB	-	NC
isosorbide dinitrate/hydralazine hcl tab (BIDIL equiv)	-	NC
OPSYNVI TAB	-	NC
CARDIOVASCULAR ANTI-INFLAMMATORY/IMMUNE MODULATORS		
LODOCO TAB	-	NC

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DrugName	Special Code	Tier
CARDIOVASCULAR AGENTS - MISC. Cont.		
CARDIOVASCULAR SODIUM-GLUCOSE CO-TRANSPORTER 2 INHIBITORS		
INPEFA TAB	-	NC
IMPOTENCE AGENTS		
sildenafil tab (VIAGRA equiv) (QL= 6 tabs/30 days)	QL	1
tadalafil tab (CIALIS equiv) (QL= 6 tabs/30 days)	QL	1
tadalafil tab 2.5mg, 5mg (CIALIS equiv) (QL= 1 tab/day)	QL	1
vardenafil ODT (STAXYN equiv) (QL= 6 tabs/30 days)	QL	1
vardenafil tab (LEVITRA equiv) (QL= 6 tabs/30 days)	QL	1
avanafil tab (STENDRA equiv) (QL= 6 tabs/30 days)	QL	2
CAVERJECT INJ (QL= 6 inj/30 days)	QL	2
EDEX INJ (QL= 6 inj/30 days)	QL	2
CIALIS TAB	-	NC
LEVITRA TAB	-	NC
STAXYN ODT	-	NC
STENDRA TAB	-	NC
VIAGRA TAB	-	NC
VYBRIQUE ORAL FILM	-	NC
PROSTAGLANDIN VASODILATORS		
TYVASO DPI POWDER (QL= 4 cartridges/day)	PA-QL-SP	4
TYVASO DPI POWDER 48-80MCG (QL= 224 cartridges/28 days)	PA-QL-SP	4
TYVASO DPI POWDER MAINTENANCE KIT 32-48MCG (QL= 224 cartridges/28 days)	PA-QL-SP	4
TYVASO DPI POWDER MAINTENANCE KIT 32-64MCG (QL= 224 cartridges/28 days)	PA-QL-SP	4
TYVASO DPI POWDER MAINTENANCE KIT 48-64MCG (QL= 224 cartridges/28 days)	PA-QL-SP	4
TYVASO DPI POWDER TITRATION KIT 16-32-48MCG (QL= 252 cartridges/28 days)	PA-QL-SP	4
TYVASO INH SOLN 0.6 MG/ML (QL= 1 ampule/day)	PA-QL-SP	4
VENTAVIS INH SOLN (QL= 9 ampules/day)	PA-QL-SP	4
YUTREPIA CAP (QL= 112 caps/28 days)	PA-QL-SP	4
ORENITRAM TAB	-	NC
ORENITRAM TAB MONTH PAK	-	NC
PULMONARY HYPERTENSION - ACTIVIN SIGNALING INHIBITOR		
WINREVAIR INJ	PA-SP	4
PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS		
ambrisentan tab (LETAIRIS equiv) (QL= 1 tab/day)	PA-QL-SP	1
bosentan tab (TRACLEER equiv) (QL= 2 tabs/day)	PA-QL-SP	1
bosentan tab for oral susp (TRACLEER equiv) (QL= 4 tabs/day)	PA-QL-SP	1
macitentan tab (OPSUMIT equiv) (QL= 1 tab/day)	PA-QL-SP	1
OPSUMIT TAB	-	NC
TRACLEER TAB	-	NC
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS		
sildenafil tab 20mg (REVATIO equiv) (QL= 12 tabs/day)	QL	1
tadalafil tab (PAH) (ADCIRCA equiv) (QL= 2 tabs/day)	QL	1
sildenafil susp (REVATIO equiv) (Prior Authorization required for members age 9 years and older)	PA	2
TADLIQ SUSP (Prior Authorization required for members age 7 years and older)	PA-SP	4
ADCIRCA TAB	-	NC
LIQREV SUSP	-	NC

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DrugName	Special Code	Tier
CARDIOVASCULAR AGENTS - MISC. Cont.		
REVATIO SUSP	-	NC
REVATIO TAB	-	NC
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI TAB (QL= 2 tabs/day)	PA-QL-SP	4
UPTRAVI THERAPY PACK (QL= 2 tabs/day)	PA-QL-SP	4
UPTRAVI INJ	-	NC
PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR		
ADEMPAS TAB (QL= 3 tabs/day)	PA-QL-SP	4
SINUS NODE INHIBITORS		
ivabradine hcl tab (CORLANOR equiv)	PA	1
CORLANOR SOLN	PA	3
CORLANOR TAB	-	NC
TRANSTHYRETIN STABILIZERS		
VYNDAMAX CAP (QL= 1 cap/day)	PA-QL-SP	4
VYNDAQEL CAP (QL= 4 caps/day)	PA-QL-SP	4
ATTRUBY PACK	-	NC
VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)		
VERQUVO TAB	-	NC
CEPHALOSPORINS		
CEPHALOSPORINS - 1ST GENERATION		
cefadroxil cap (DURICEF equiv)	-	1
cefadroxil susp (DURICEF equiv)	-	1
cefadroxil tab (DURICEF equiv)	-	1
cephalexin cap (KEFLEX equiv)	-	1
cephalexin susp (KEFLEX equiv)	-	1
CEFADROXIL TAB	-	2
cephalexin cap 750mg (KEFLEX equiv)	-	NC
cephalexin tab	-	NC
KEFLEX CAP	-	NC
KEFLEX CAP 750MG	-	NC
CEPHALOSPORINS - 2ND GENERATION		
cefprozil susp (CEFZIL equiv)	-	1
cefprozil tab (CEFZIL equiv)	-	1
cefuroxime tab (CEFTIN equiv)	-	1
CEFACLOR CAP	-	3
cefaclor cap (CECLOR equiv)	-	3
CEFACLOR ER TAB	-	3
CEFACLOR SUSP	-	3
CEPHALOSPORINS - 3RD GENERATION		
cefdinir cap (OMNICEF equiv)	-	1
cefdinir susp (OMNICEF equiv)	-	1
cefixime cap (SUPRAX equiv)	-	3
cefixime susp (SUPRAX equiv)	-	3
CEFPODOXIME PROXETIL SUSP	-	3

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DrugName	Special Code	Tier
CEPHALOSPORINS Cont.		
cefpodoxime proxetil tab (VANTIN equiv)	-	3
SUPRAX CAP	-	3
SUPRAX SUSP 500MG/5ML	-	3
CEFIXIME TAB	-	NC
SUPRAX CAP	-	NC
SUPRAX SUSP	-	NC
CONTRACEPTIVES		
COMBINATION CONTRACEPTIVES - ORAL		
amethyst tab (LYBREL equiv)	-	$0
ARANELLE TAB	-	$0
ashlyna tab, daysee tab (SEASONALE, SEASONIQUE equiv)	-	$0
AVERI TAB	-	$0
cryselle tab	-	$0
drospirenone/ethinyl estradiol/levomefolate tab (BEYAZ equiv)	-	$0
enpresse tab (TRI-LEVELEN equiv)	-	$0
FEMLYV TAB	-	$0
gianvi tab, ocella tab (YASMIN, YAZ equiv)	-	$0
isibloom tab, enskyce tab, apri tab (DESOGEN equiv)	-	$0
kelnor tab (DEMULEN equiv)	-	$0
layolis FE tab, wymzya FE tab (FEMCON FE equiv)	-	$0
levonorgestrel-ethinyl estradiol-fe tab (BALCOLTRA equiv)	-	$0
LO LOESTRIN TAB	-	$0
NATAZIA TAB	-	$0
NEXTSTELLIS TAB	-	$0
norethindrone ace-ethinyl estradiol-fe cap (TAYTULLA equiv)	-	$0
norethindrone acetate/ethinyl estradial FE chew tab (MINASTRIN equiv)	-	$0
norethindrone acetate/ethinyl estradiol tab (LOESTRIN equiv)	-	$0
norethindrone/ethinyl estradiol FE tab (LOESTRIN FE equiv)	-	$0
nortrel 7/7/7 tab, pirmella 7/7/7 tab (TRI-NORINYL equiv)	-	$0
nortrel tab (OVCON 35 equiv)	-	$0
SAFYRAL TAB	-	$0
sprintec 28 tab (ORTHO-CYCLEN equiv)	-	$0
tri-legest tab (ESTROSTEP FE equiv)	-	$0
tri-sprintec tab (ORTHO TRI-CYCLEN (LO) equiv)	-	$0
TYBLUME TAB	-	$0
VALTYA 1/50 TAB	-	$0
VELIVET PAK	-	$0
velivet tab (CYCLESSA equiv)	-	$0
vienva tab, lessina tab, kurvelo tab (ALESSE equiv)	-	$0
viorele tab, kariva tab (MIRCETTE equiv)	-	$0
BALCOLTRA TAB	-	NC
BEYAZ TAB	-	NC
DESOGEN TAB	-	NC
ESTROSTEP FE TAB	-	NC
FEMCON FE CHEW TAB	-	NC

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DrugName	Special Code	Tier
CONTRACEPTIVES Cont.		
MINASTRIN CHEW TAB	-	NC
MIRCETTE TAB	-	NC
ORTHO TRI-CYCLEN (LO) TAB	-	NC
ORTHO-CYCLEN TAB	-	NC
OVCON 35 TAB	-	NC
SEASONIQUE TAB	-	NC
TAYTULLA CAP	-	NC
TRI-NORINYL TAB	-	NC
YAZ TAB, YASMIN 28 TAB	-	NC
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
zafemy patch (XULANE equiv)	-	$0
TWIRLA PATCH	-	EXC
GWYN LO PATCH	-	NC
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA RING (QL= 1 ring/year)	QL	$0
eluryng vaginal ring (NUVARING equiv)	-	$0
NUVARING	-	NC
COPPER CONTRACEPTIVES - IUD		
MIDUELLA, PARAGARD IUD	-	EXC
EMERGENCY CONTRACEPTIVES		
ELLA TAB	-	EXC
levonorgestrel tab (PLAN B equiv)	OTC	EXC
PLAN B TAB	OTC	EXC
PROGESTIN CONTRACEPTIVES - IMPLANTS		
NEXPLANON IMPLANT	-	EXC
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA SC INJ 104MG (QL= 1 inj/90 days)	QL	$0
medroxyprogesterone inj (DEPO-PROVERA equiv) (QL= 1 inj/90 days)	QL	$0
DEPO-PROVERA INJ	-	NC
PROGESTIN CONTRACEPTIVES - ORAL		
norethindrone tab (NORA-QD equiv)	-	$0
OPILL TAB	OTC	$0
SLYND TAB	-	$0
NOR-QD TAB	-	NC
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
DEXAMETHASONE CONC	-	1
dexamethasone elixir	-	1
DEXAMETHASONE PHOSPHATE INJ	-	1
DEXAMETHASONE SODIUM PHOSPHATE INJ	-	1
DEXAMETHASONE SOLN	-	1
dexamethasone tab (DECADRON equiv)	-	1
hydrocortisone tab (CORTEF equiv)	-	1
methylprednisolone acetate inj (DEPO-MEDROL equiv)	-	1

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DrugName	Special Code	Tier
CORTICOSTEROIDS Cont.		
methylprednisolone dose pack (MEDROL equiv)	-	1
methylprednisolone tab (MEDROL equiv)	-	1
methylprenisolone sod succinate inj (SOLU-MEDROL equiv)	-	1
prednisolone soln	-	1
prednisolone soln (PEDIAPRED equiv)	-	1
prednisone tab (DELTASONE equiv)	-	1
triamcinolone acetonide inj (KENALOG equiv)	-	1
budesonide SR cap (ENTOCORT EC equiv)	-	2
CORTISONE ACETATE TAB	-	2
hydrocortisone succinate inj 100mg (SOLU-CORTEF equiv) (QL= 2 vials/fill)	QL	2
prednisolone ODT (ORAPRED equiv)	-	2
PREDNISONE SOLN	-	2
SOLU-CORTEF INJ (QL= 1 vial/fill)	QL	2
SOLU-MEDROL INJ 2GM	-	2
budesonide ER tab (UCERIS equiv) (QL=1 tab/day)	PA-QL	3
DEPO-MEDROL INJ, METHYLPREDNISOLONE ACE INJ	-	3
KENALOG INJ, TRIAMCINOLONE ACE INJ	-	3
ORAPRED ODT TAB, PREDNISOLONE ODT TAB	-	3
PREDNISOLONE SOLN	-	3
SOLU-CORTEF INJ 100MG (QL= 2 vials/fill)	QL	3
SOLU-MEDROL PF INJ	-	3
AGAMREE SUSP	-	NC
ALKINDI SPRINKLE CAP	-	NC
ALKINDI SPRINKLE CAP 0.5MG	-	NC
ALKINDI SPRINKLE CAP 1MG	-	NC
CORTEF TAB	-	NC
deflazacort susp (EMFLAZA equiv)	-	NC
deflazacort tab (EMFLAZA equiv)	-	NC
DEPO-MEDROL INJ	-	NC
dexamethasone pak (DEXPAK equiv)	-	NC
DEXAMETHASONE TAB	-	NC
DEXPAK TAB	-	NC
DXEVO 11-DAY PAK	-	NC
EMFLAZA SUSP	-	NC
EMFLAZA TAB	-	NC
EOHILIA SUSP	-	NC
FLO-PRED SUSP	-	NC
HEMADY TAB	-	NC
KENALOG INJ	-	NC
KHINDIVI SOLN	-	NC
LIDOLOG KIT	-	NC
MEDROL DOSE PACK	-	NC
MEDROL TAB	-	NC
MILLIPRED DP PAK	-	NC
MILLIPRED TAB	-	NC
ORAPRED SOLN	-	NC

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CORTICOSTEROIDS Cont.		
ORTIKOS ER CAP	-	NC
prednisolone tab (MILLIPRED equiv)	-	NC
PREDNISONE DR TAB	-	NC
PREDNISONE DR TAB, RAYOS DR TAB	-	NC
prednisone pack	-	NC
PREDNISONE/DIPHENHYDRAMINE KIT	-	NC
SOLU-MEDROL INJ	-	NC
TARPEYO CAP	-	NC
UCERIS TAB	-	NC
MINERALOCORTICOIDS		
fludrocortisone tab (FLORINEF equiv)	-	1
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
benzonatate cap (TESSALON equiv)	-	1
hydrocodone/homatropine syrup (HYCODAN equiv)	-	1
BENZONATATE CAP 150MG	-	NC
benzonatate cap 150mg (ZONATUSS equiv)	-	NC
HYCODAN SYRUP	-	NC
TESSALON CAP	-	NC
ZONATUSS CAP 150MG	-	NC
COUGH/COLD/ALLERGY COMBINATIONS		
promethazine DM syrup	-	1
PROMETHAZINE VC SYRUP	-	1
promethazine VC syrup (PHENERGAN VC equiv)	-	1
HYD POL/CPM SUSP (QL= 120ml/fill; 2 fills/30 days)	QL	3
hydrocodone/chlorpheniramine CR susp (TUSSIONEX equiv) (QL= 120ml/fill; 2 fills/30 days)	QL	3
NEOTUSS PLUS LIQUID	-	3
CLARINEX-D TAB	-	EXC
SEMPREX-D CAP	-	EXC
DURAVENT PE TAB	-	NC
guaifenesin/codeine syrup (TUSSI-ORGANIDIN-S equiv)	OTC	NC
guaifenesin-DM oral liquid (ROBITUSSIN equiv)	-	NC
HYCOFENIX SOLN	-	NC
INTENSE COUGH LIQUID	-	NC
MUCINEX LIQUID	-	NC
POLY-TUSSIN DM SYRUP	-	NC
PROMETHAZINE VC/CODEINE SYRUP	-	NC
promethazine VC/codeine syrup (PHENERGAN VC/CODEINE equiv)	-	NC
promethazine/codeine syrup (PHENERGAN/CODEINE equiv)	-	NC
TUSSICAPS	-	NC
TUXARIN ER TAB	-	NC
TUZISTRA XR SUSP	-	NC
EXPECTORANTS		
GUAIFENESEN SYRUP	-	NC
guaifenesin tab (ALLFEN JR equiv)	-	NC

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DrugName	Special Code	Tier
COUGH/COLD/ALLERGY Cont.		
POTASSIUM IODIDE ORAL SOLN	-	NC
MISC. RESPIRATORY INHALANTS		
NEBUSAL NEB SOLN	-	2
HYPER-SAL NEB SOLN 7%	-	3
MUCOLYTICS		
acetylcysteine soln (MUCOMYST equiv)	-	1
DERMATOLOGICALS		
ACNE PRODUCTS		
clindamycin gel (CLEOCIN GEL equiv)	-	1
clindamycin lotion (CLEOCIN- T equiv)	-	1
clindamycin pad (CLEOCIN-T equiv)	-	1
clindamycin topical soln (CLEOCIN-T equiv)	-	1
ERYTHROMYCIN GEL	-	1
erythromycin pad	-	1
erythromycin soln	-	1
RETIN-A CREAM (Acne Only - Prior Authorization required for members age 26 years and older)	PA	1
RETIN-A GEL (Acne Only - Prior Authorization required for members age 26 years and older)	PA	1
adapalene cream (DIFFERIN equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2
adapalene gel 0.3% (DIFFERIN equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2
adapalene/benzoyl peroxide gel 0.1-2.5% (EPIDUO equiv)	-	2
adapalene/benzoyl peroxide gel 0.3-2.5% (EPIDUO FORTE equiv)	-	2
amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap (ACCUTANE equiv)	-	2
AVAR CLEANSE LIQ 10-5%	-	2
AVAR-E EMOLL CREAM	-	2
clindamycin/benzoyl peroxide gel (BENZACLIN equiv)	-	2
clindamycin/benzoyl peroxide gel (DUAC GEL equiv)	-	2
ERY PAD	-	2
erythromycin/benzoyl peroxide gel (BENZAMYCIN equiv)	-	2
SOD SUL/SULF LIQ 9-4.5%	-	2
SOD SUL/SULF SUSP 10-5%	-	2
SOD SUL/SULF SUSP 8-4%	-	2
sodium sulfacetamide lotion (KLARON equiv)	-	2
sodium sulfacetamide/sulfur cleanser 10-5% (SUMAXIN equiv)	-	2
sodium sulfacetamide/sulfur cleanser 9-4.5% (SUMADAN WASH equiv)	-	2
sodium sulfacetamide/sulfur emulsion (ROSULA equiv)	-	2
sulfacetamide sodium/sulfur cream 10-5% (PLEXION SCT equiv)	-	2
tretinoin cream (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2
tretinoin gel (RETIN-A GEL equiv) (Acne Only - Prior Authorization required for members age 26 years and older)	PA	2
sodium sulfacetamide/sulfur foam (CLARIFOAM EF equiv)	-	3
ABSORICA CAP	-	NC
ABSORICA LD CAP	-	NC
ADAPALENE SOLN	-	NC
adapalene gel (DIFFERIN equiv)	-	NC
ADAPALENE PAD	-	NC
ADAPALENE/BENZOYL PEROXIDE PAD	-	NC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
AKLIEF CREAM	-	NC
ALTRENO LOTION	-	NC
AMZEEQ FOAM	-	NC
ARAZLO LOTION	-	NC
ATRALIN GEL 0.05%	-	NC
AVAR AEROSOL FOAM	-	NC
AVAR PAD	-	NC
AVAR-E LS CREAM 10-2%	-	NC
AZELEX CREAM	-	NC
BENZACLIN GEL	-	NC
BENZAMYCIN GEL	-	NC
BENZOYL PEROXIDE LOTION	-	NC
BENZOYL PEROXIDE/HYDROCORTISONE LOTION	-	NC
BP 10-1 EMU	-	NC
CLARIFOAM EF FOAM	-	NC
CLENIA PLUS SUSP	-	NC
CLEOCIN-T LOTION	-	NC
CLEOCIN-T PAD	-	NC
CLEOCIN-T SOLN	-	NC
CLINDACIN KIT	-	NC
clindamycin foam (EVOCLIN equiv)	-	NC
clindamycin phosphate-benzoyl peroxide gel 1.2-3.75% (ONEXTON equiv)	-	NC
clindamycin/tretinoin gel (ZIANA equiv)	-	NC
CLINDAVIX KIT	-	NC
dapsone gel (ACZONE equiv)	-	NC
DIFFERIN CREAM	-	NC
DIFFERIN GEL	-	NC
DUAC GEL	-	NC
EPIDUO FORTE GEL 0.3-2.5%	-	NC
EPIDUO GEL 0.1-2.5%	-	NC
EPSOLAY CREAM	-	NC
EVOCLIN FOAM	-	NC
FABIOR AEROSOL FOAM	-	NC
isotretinoin cap 25mg (ABSORICA equiv)	-	NC
isotretinoin cap 35mg (ABSORICA equiv)	-	NC
KLARON LOTION	-	NC
NUCARACLINPA KIT	-	NC
NUCARARXPAK KIT	-	NC
ONEXTON GEL 1.2-3.75%	-	NC
PLEXION CREAM 9.8-4.8%	-	NC
RETIN-A MICRO GEL/GEL PUMP	-	NC
RETIN-A MICRO GEL/GEL PUMP, TRETINOIN MICROSPHERE GEL/GEL PUMP	-	NC
ROSULA EMULSION	-	NC
SODIUM SULFACETAMIDE/SULFUR CREAM 10-2%	-	NC
SODIUM SULFACETAMIDE/SULFUR LOTION	-	NC
sodium sulfacetamide/sulfur lotion (SULFACET R equiv)	-	NC

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DERMATOLOGICALS Cont.		
sodium sulfacetamide/sulfur pad (PLEXION CLEANSING CLOTH equiv)	-	NC
SODIUM SULFACETAMIDE/SULFUR SUSP	-	NC
SODIUM SULFACETAMIDE/SULFUR WASH	-	NC
sodium sulfacetamide/sulfur wash (SUMAXIN equiv)	-	NC
sodium sulfacetamide/sunscreen kit (SUMADEN XLT equiv)	-	NC
sulfacetamide sodium/sulfur cream 10-2% (AVAR-E LS equiv)	-	NC
SULFACETAMIDE SODIUM/SULFUR CREAM 9.8-4.8%	-	NC
SUMADAN WASH 9-4.5%	-	NC
SUMADEN XLT KIT	-	NC
SUMAXIN WASH	-	NC
tretinoin gel 0.05% (ATRALIN equiv)	-	NC
tretinoin microsphere gel	-	NC
TWYNEO CREAM	-	NC
WINLEVI CREAM	-	NC
ZIANA GEL	-	NC
AGENTS FOR EXTERNAL GENITAL AND PERIANAL WARTS		
VEREGEN OINT	-	NC
AGENTS FOR WRINKLES/LIPOATROPHY/OTHER AESTHETIC USES		
RENOVA CREAM	-	EXC
KYBELLA INJ	-	NC
ANALGESICS - TOPICAL		
BACLOFEN CREAM COMPOUND KIT	-	NC
TRAMADOL COMPOUND KIT	-	NC
ANTIBIOTICS - TOPICAL		
gentamicin sulfate cream	-	1
gentamicin sulfate oint	-	1
mupirocin oint (BACTROBAN OINT equiv)	-	1
CENTANY OINT	-	3
ALTABAX OINT	-	NC
BACTROBAN CREAM	-	NC
mupirocin cream (BACTROBAN equiv)	-	NC
NEO-SYNALAR CREAM	-	NC
XEPI CREAM	-	NC
ANTIFUNGALS - TOPICAL		
ciclopirox cream (LOPROX CREAM equiv)	-	1
ciclopirox gel (LOPROX GEL equiv)	-	1
ciclopirox nail soln (PENLAC equiv)	-	1
ciclopirox topical susp (LOPROX SUSP equiv)	-	1
clotrimazole/betamethasone cream (LORTRISONE CREAM equiv)	-	1
econazole cream (SPECTAZOLE equiv)	-	1
ketoconazole cream (NIZORAL CREAM equiv)	-	1
ketoconazole shampoo (NIZORAL equiv)	-	1
nystatin cream (MYCOSTATIN CREAM equiv)	-	1
nystatin oint	-	1
nystatin topical powder	-	1

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DERMATOLOGICALS Cont.		
nystatin/triamcinolone cream	-	1
nystatin/triamcinolone oint	-	1
ciclopirox shampoo (LOPROX SHAMPOO equiv)	-	2
MENTAX CREAM	-	3
NAFTIFINE CREAM	-	3
naftifine cream (NAFTIN equiv)	-	3
ALCORTIN A GEL (iodoquinol/hydrocortisone/aloe polysaccharide gel equiv)	-	NC
ALOQUIN GEL	-	NC
CICLODAN KIT	-	NC
clotrimazole cream (LOTRIMIN AF equiv)	-	NC
clotrimazole soln	-	NC
CLOTRIMAZOLE/BETAMETHASONE LOTION	-	NC
clotrimazole/betamethasone lotion (LOTRISONE equiv)	-	NC
ECONASIL KIT	-	NC
ECONAZOLE NITRATE FOAM, ECOZA FOAM	-	NC
ECOZA FOAM	-	NC
ERTACZO CREAM	-	NC
EXELDERM CREAM, SULCONAZOLE CREAM	-	NC
EXELDERM SOLN, SULCONAZOLE SOLN	-	NC
HC/IODOQUIN CREAM	-	NC
HIXDEFRIMA SOLN	-	NC
IODOQUINOL/HC ALOE GEL	-	NC
iodoquinol/hydrocortisone cream 1% (VYTONE equiv)	-	NC
IODOQUINOL-HYDROCORTISONE CREAM	-	NC
JUBLIA SOLN	-	NC
KERYDIN SOLN	-	NC
LOPROX SHAMPOO	-	NC
LOTRIMIN AF CREAM	-	NC
LOTRISONE CREAM	-	NC
LULICONAZOLE CREAM, LUZU CREAM	-	NC
naftifine hcl gel 2% (NAFTIN equiv)	-	NC
NAFTIN GEL 2%	-	NC
NIZORAL SHAMPOO	-	NC
ONYCHO-MED KIT	-	NC
oxiconazole nitrate cream (OXISTAT equiv)	-	NC
OXISTAT CREAM	-	NC
OXISTAT LOTION	-	NC
PEDIZOLPAK THERAPY PACK	-	NC
PENLAC SOLN	-	NC
tavaborole soln (KERYDIN equiv)	-	NC
VYTONE CREAM 1.9-1%	-	NC
XOLEGEL	-	NC
ZOLPAK KIT	-	NC
ANTI-INFLAMMATORY AGENTS - TOPICAL		
diclofenac soln 1.5% (PENNSAID equiv) (QL= 3 bottles/fill)	QL	2
diclofenac gel 1% (VOLTAREN equiv)	-	NC

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DERMATOLOGICALS Cont.		
DICLOFENAC PATCH, FLECTOR PATCH	-	NC
diclofenac sodium gel kit (VENNGEL equiv)	-	NC
diclofenac sodium soln 2% (PENNSAID equiv)	-	NC
DICLONA GEL	-	NC
DICLOTREX PAK	-	NC
GABAPENTIN/NAPROXEN CREAM COMPOUND KIT	-	NC
LEXTOL PAK	-	NC
LICART PATCH	-	NC
NAPROXEN CREAM COMPOUND KIT	-	NC
PENNSAID SOLN	-	NC
PROFINAC PAK	-	NC
REXAPHENAC CREAM	-	NC
VENNGEL ONE KIT	-	NC
VOPAC 5 CREAM	-	NC
VOPAC CREAM	-	NC
VOPAC GB CREAM	-	NC
XRYLIX PAK	-	NC
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
bexarotene gel (TARGRETIN equiv) (QL= 60 grams/30 days)	PA-QL-SP	1
fluorouracil cream (EFUDEX CREAM equiv)	-	1
diclofenac gel (SOLARAZE equiv) (QL= 300gm/30 days)	PA-QL	2
FLUOROURACIL SOLN	-	2
fluorouracil soln (FLUOROURACIL equiv)	-	2
FLUOROURACIL CREAM 0.5%	-	3
VALCHLOR GEL (QL= 4 tubes/30 days)	PA-QL-SP	4
CARAC CREAM	-	NC
EFUDEX CREAM	-	NC
FLUORAC CREAM	-	NC
KLISYRI OINT	-	NC
ROAOXIA GEL	-	NC
SOLARAVIX PAK	-	NC
TARGRETIN GEL	-	NC
ANTIPRURITICS - TOPICAL		
doxepin hcl cream	-	NC
ANTIPSORIATICS		
acitretin cap (SORIATANE equiv)	-	2
calcipotriene cream (DOVONEX CREAM equiv)	-	2
calcipotriene oint	-	2
calcipotriene soln (DOVONEX SOLN equiv)	-	2
CALCIPOTRIENE SOLN 0.005%	-	2
METHOXSALEN CAP	-	2
methoxsalen cap (OXSORALEN ULTRA equiv)	-	2
tazarotene cream 0.1% (TAZORAC equiv) (Members age 26 or older require Prior Authorization)	PA	2
CALCITRIOL OINT	-	3
tazarotene cream 0.05% (TAZORAC equiv) (Members age 26 or older require Prior Authorization)	PA	3

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DERMATOLOGICALS Cont.		
SELARSDI SYRINGE (QL= 1 inj/84 days)	PA-QL-SP	4
SELARSDI SYRINGE 90MG/ML (QL= 1 inj/84 days)	PA-QL-SP	4
STEQEYMA INJ (QL= 1 inj/84 days)	PA-QL-SP	4
STEQEYMA INJ 90MG (QL= 1 inj/84 days)	PA-QL-SP	4
TALTZ INJ (QL= 1 inj/28 days)	PA-QL-SP	4
TALTZ INJ 20MG/0.25ML (QL= 1 inj/28 days)	PA-QL-SP	4
TALTZ INJ 40 MG/0.5ML (QL= 1 inj/28 days)	PA-QL-SP	4
TREMFYA INJ (QL= 1 inj/56 days)	PA-QL-SP	4
YESINTEK INJ (QL= 1 inj/84 days)	PA-QL-SP	4
YESINTEK SYRINGE (QL= 1 inj/84 days)	PA-QL-SP	4
YESINTEK SYRINGE 90MG (QL= 1 inj/84 days)	PA-QL-SP	4
BIMZELX INJ	-	NC
BIMZELX INJ 320MG/2ML	-	NC
BIMZELX SYRINGE	-	NC
BIMZELX SYRINGE 320MG/2ML	-	NC
calcipotriene cream (TRIONEX equiv)	-	NC
CALCIPOTRIENE FOAM	-	NC
CALCIPOTRIENE FOAM, SORILUX FOAM	-	NC
CALSODORE PAK	-	NC
COSENTYX INJ (1-PACK)	-	NC
COSENTYX INJ (2-PACK)	-	NC
COSENTYX INJ 300MG/2ML	-	NC
COSENTYX UNO INJ	-	NC
DOVONEX CREAM	-	NC
ICOTYDE TAB	-	NC
IMULDOSA SYRINGE	-	NC
OTULFI INJ	-	NC
OTULFI, USTEKINUMAB-AAUZ SYRINGE	-	NC
OXSORALEN ULTRA CAP	-	NC
PELLIX SOLN	-	NC
PYZCHIVA INJ	-	NC
SELARSDI INJ	-	NC
SILIQ INJ	-	NC
SKYRIZI INJ 150MG/ML	-	NC
SKYRIZI INJ 55MG/0.37ML	-	NC
SORIATANE CAP	-	NC
SOTYKTU TAB	-	NC
SPEVIGO INJ	-	NC
STARJEMZA INJ	-	NC
STARJEMZA PFS INJ	-	NC
STELARA INJ	-	NC
STEQEYMA VIAL	-	NC
tazarotene gel (TAZORAC equiv)	-	NC
TRIONEX PAK	-	NC
USTEKINUMAB INJ 45/0.5ML	-	NC
USTEKINUMAB INJ 90MG/ML	-	NC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
USTEKINUMAB-AEKN 45MG/0.5ML	-	NC
USTEKINUMAB-AEKN 90MG/ML	-	NC
VECTICAL OINT	-	NC
VTAMA CREAM	-	NC
WEZLANA INJ	-	NC
WEZLANA SYRINGE	-	NC
ANTISEBORRHEIC PRODUCTS		
SELENIUM SULFIDE LOTION	-	1
selenium sulfide lotion 2.5% (SELSUN equiv)	-	1
SELENIUM SUL SHA	-	2
selenium sulfide shampoo (SELSEB equiv)	-	2
SODIUM SULFA LIQ WASH	-	2
sodium sulfacetamide wash (OVACE WASH equiv)	-	2
OVACE PLUS CREAM	-	3
ESKATA SOLN	-	NC
OVACE PLUS LIQ WASH 10%	-	NC
OVACE PLUS LOTION	-	NC
OVACE PLUS SHAMPOO	-	NC
OVACE PLUS FOAM	-	NC
PROMISEB CREAM	-	NC
SELENIUM SUL SHA 2%	-	NC
selenium sulfide shampoo 2.3% (SELRX equiv)	-	NC
sodium sulfacetamide shampoo (OVACE equiv)	-	NC
SODIUM SULFACETAMIDE WASH, OVACE PLUS GEL WASH	-	NC
ANTIVIRALS - TOPICAL		
acyclovir oint (ZOVIRAX equiv)	-	1
acyclovir cream (ZOVIRAX equiv)	-	NC
DENAVIR CREAM	-	NC
penciclovir cream (DENAVIR equiv)	-	NC
XERESE CREAM	-	NC
ZELSUVMI GEL	-	NC
ZOVIRAX CREAM	-	NC
ZOVIRAX OINT	-	NC
BURN PRODUCTS		
silver sulfadiazine cream (SILVADENE CREAM equiv)	-	1
SULFAMYLON CREAM	-	2
MAFENIDE ACETATE SOLN PACK	-	NC
SILVADENE CREAM	-	NC
CORTICOSTEROIDS - TOPICAL		
BETAMETH VALERATE LOTION	-	1
betamethasone augmented cream (DIPROLENE AF CREAM equiv)	-	1
betamethasone augmented oint (DIPROLENE OINT equiv)	-	1
betamethasone diproprionate cream (DIPROSONE CREAM equiv)	-	1
betamethasone diproprionate lotion	-	1
betamethasone valerate cream	-	1

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DERMATOLOGICALS Cont.		
betamethasone valerate lotion	-	1
betamethasone valerate oint	-	1
clobetasol propionate cream (TEMOVATE equiv)	-	1
clobetasol propionate oint (TEMOVATE equiv)	-	1
clobetasol propionate soln (TEMOVATE equiv)	-	1
fluocinolone acetonide cream	-	1
fluocinolone acetonide oint	-	1
fluocinolone acetonide soln	-	1
fluocinonide cream 0.05% (LIDEX equiv)	-	1
fluocinonide cream 0.1% (VANOS CREAM equiv)	-	1
fluocinonide emollient cream	-	1
fluocinonide gel	-	1
fluocinonide oint	-	1
fluocinonide soln	-	1
fluticasone propionate cream (CUTIVATE equiv)	-	1
fluticasone propionate oint (CUTIVATE equiv)	-	1
hydrocortisone cream (PROCTOCORT equiv)	-	1
hydrocortisone lotion (HYTONE equiv)	-	1
HYDROCORTISONE LOTION 2.5%	-	1
hydrocortisone oint	-	1
mometasone cream (ELOCON equiv)	-	1
mometasone oint (ELOCON equiv)	-	1
mometasone soln (ELOCON equiv)	-	1
triamcinolone cream	-	1
triamcinolone lotion	-	1
triamcinolone oint	-	1
alclometasone cream (ACLOVATE equiv)	-	2
ALCLOMETASONE OINT	-	2
alclometasone oint (ACLOVATE OINT equiv)	-	2
BETAMETHASONE AUGMENTED GEL	-	2
betamethasone augmented lotion (DIPROLENE LOTION equiv)	-	2
betamethasone diproprionate oint (DIPROSONE OINT equiv)	-	2
clobetasol foam (OLUX equiv)	-	2
clobetasol lotion (CLOBEX equiv)	-	2
clobetasol propionate emollient cream (TEMOVATE E equiv)	-	2
clobetasol propionate gel (TEMOVATE GEL equiv)	-	2
clobetasol shampoo (CLOBEX equiv)	-	2
clobetasol spray (CLOBEX equiv)	-	2
desonide cream (DESOWEN equiv)	-	2
desonide oint (DESOWEN equiv)	-	2
desoximetasone cream (TOPICORT CREAM equiv)	-	2
desoximetasone oint (TOPICORT equiv)	-	2
EPIFOAM AEROSOL	-	2
fluocinolone acetonide oil (DERMA-SMOOTH/FS equiv)	-	2
halobetasol propionate cream (ULTRAVATE equiv)	-	2
halobetasol propionate oint (ULTRAVATE equiv)	-	2

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
HC PRAMOXINE CREAM 1-2.5%	-	2
hydrocortisone pramoxine cream (PRAMOSONE equiv)	-	2
ALA-SCALP LOTION	-	NC
AMCINONIDE CREAM 0.1%	-	NC
AMCINONIDE LOTION	-	NC
AMCINONIDE OINTMENT	-	NC
APEXICON E CREAM (PSORCON E equiv)	-	NC
BESER KIT 0.05%	-	NC
betamethasone augmented gel	-	NC
betamethasone valerate foam (LUXIQ equiv)	-	NC
BRYHALI LOTION	-	NC
calcipotriene/betamethasone dipropionate susp	-	NC
calcipotriene/betamethasone oint (TACLONEX equiv)	-	NC
CAPEX SHAMPOO	-	NC
clobetasol E foam (OLUX E equiv)	-	NC
CLOBETASOL PROPIONATE CREAM, IMPOYZ CREAM	-	NC
CLOBETAVIX KIT	-	NC
CLOBEX LOTION	-	NC
CLOBEX SHAMPOO	-	NC
CLOBEX SPRAY	-	NC
CLOCORTOLONE CREAM	-	NC
CLODERM CREAM	-	NC
CORDRAN CREAM 0.025%	-	NC
CORDRAN OINTMENT	-	NC
CORDRAN TAPE	-	NC
CUTIVATE LOTION	-	NC
DERMACINRX KIT	-	NC
DERMA-SMOOTH/FS OIL	-	NC
DESONATE GEL	-	NC
desonide gel	-	NC
desonide lotion (DESOWEN equiv)	-	NC
DESOWEN CREAM	-	NC
DESOWEN CREAM KIT	-	NC
DESOWEN LOTION	-	NC
DESOWEN LOTION KIT	-	NC
DESOWEN OINT	-	NC
DESOWEN OINT KIT	-	NC
desoximetasone cream 0.05% (TOPICORT equiv)	-	NC
DESOXIMETASONE GEL	-	NC
desoximetasone oint 0.05% (TOPICORT equiv)	-	NC
DIFLORASONE CREAM	-	NC
DIFLORASONE CREAM, PSORCON CREAM	-	NC
diflorasone oint	-	NC
DIPROLENE AF CREAM	-	NC
DIPROLENE OINT	-	NC
DUOBRII LOTION	-	NC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
ELOCON CREAM	-	NC
ELOCON OINT	-	NC
ENSTILAR FOAM	-	NC
FLUOPAR KIT	-	NC
FLUOVIX PAK	-	NC
FLURANDRENOL LOTION	-	NC
flurandrenolide cream (CORDRAN equiv)	-	NC
flurandrenolide oint (CORDRAN equiv)	-	NC
FLUTICASONE LOTION	-	NC
fluticasone propionate lotion (CUTIVATE equiv)	-	NC
halcinonide cream (HALOG equiv)	-	NC
HALCINONIDE SOLN	-	NC
halcinonide soln (HALOG equiv)	-	NC
HALOBETASOL AER	-	NC
HALOBETASOL AERO	-	NC
HALOG CREAM	-	NC
HALOG OINT	-	NC
HALOG SOLN	-	NC
halonate pac kit (ULTRAVATE KIT equiv)	-	NC
HC BUTYRATE CREAM	-	NC
HC BUTYRATE SOLN	-	NC
HC/PRAMOXINE CREAM 1-2.35%	-	NC
HC-LIDOCAINE CREAM	-	NC
HYDROCORTISONE ACETATE CREAM, MICORT-HC CREAM	-	NC
hydrocortisone butyrate cream (LOCOID equiv)	-	NC
HYDROCORTISONE BUTYRATE LIPO CREAM	-	NC
hydrocortisone butyrate lipocream (LOCOID equiv)	-	NC
HYDROCORTISONE BUTYRATE OINT	-	NC
hydrocortisone butyrate oint (LOCOID equiv)	-	NC
hydrocortisone butyrate soln (LOCOID equiv)	-	NC
hydrocortisone lotion (LOCOID equiv)	-	NC
hydrocortisone lotion 2% (ALA SCALP equiv)	-	NC
HYDROCORTISONE PAK	-	NC
hydrocortisone valerate cream (WESTCORT equiv)	-	NC
hydrocortisone valerate oint (WESTCORT equiv)	-	NC
HYDROXYM GEL	-	NC
IMPEKLO LOTION	-	NC
IMPOYZ CREAM	-	NC
LOCOID CREAM	-	NC
LOCOID LIPOCREAM	-	NC
LOCOID OINT	-	NC
LOCOID SOLN	-	NC
LUXIQ FOAM	-	NC
MEXPAROX HC CREAM	-	NC
NOVACORT GEL	-	NC
OLUX E FOAM	-	NC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
OLUX FOAM	-	NC
PANDEL CREAM	-	NC
paramox hc gel (NOVACORT GEL equiv)	-	NC
PRAMOSONE CREAM 1-1%	-	NC
PRAMOSONE CREAM 1-2.5%	-	NC
PRAMOSONE LOTION	-	NC
PRAMOSONE OINT	-	NC
PROCTOCORT CREAM	-	NC
QUINIXIL PAK	-	NC
SERNIVO SPRAY	-	NC
SILALITE PAK MIS	-	NC
TASOPROL CREAM KIT	-	NC
TEMOVATE CREAM	-	NC
TEMOVATE OINT	-	NC
TEXACORT SOLN	-	NC
TOPICORT CREAM	-	NC
TOPICORT CREAM 0.05%	-	NC
TOPICORT GEL	-	NC
TOPICORT OINT	-	NC
TOVET KIT	-	NC
triamcinolone acetonide oint (TRIANEX equiv)	-	NC
TRIAMCINOLONE SPRAY	-	NC
triamcinolone spray (KENALOG equiv)	-	NC
TRIAMVEX KIT	-	NC
TRIANEX OINT	-	NC
TRILOCICLO KIT	-	NC
ULTRAVATE CREAM	-	NC
ULTRAVATE LOTION	-	NC
ULTRAVATE OINT	-	NC
ULTRAVATE PAC KIT	-	NC
VANOS CREAM	-	NC
VERDESO FOAM	-	NC
WESTCORT OINT	-	NC
WYNZORA CREAM	-	NC
DERMATOMYOSITIS AGENTS		
LISRAYA TAB	-	NC
ECZEMA AGENTS		
OPZELURA CREAM (QL= 12 tubes/year)	PA-QL	3
ADBRY INJ (QL= 2 inj/28 days)	PA-QL-SP	4
ADBRY INJ (QL= 4 inj/28 days)	PA-QL-SP	4
CIBINQO TAB (QL= 1 tab/day)	PA-QL-SP	4
DUPIXENT INJ (QL= 2 inj/28 days)	PA-QL-SP	4
DUPIXENT PEN INJ (QL= 2 inj/28 days)	PA-QL-SP	4
EBGLYSS INJ (QL= 1 inj/28 days)	PA-QL-SP	4
EBGLYSS PEN INJ (QL= 1 inj/28 days)	PA-QL-SP	4

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
ANZUPGO CREAM	-	NC
EMOLLIENT/KERATOLYTIC AGENTS		
CARMOL LOTION	-	NC
KERAFOAM	-	NC
KERALAC CREAM	-	NC
UMECTA EMULSION	-	NC
UMECTA PD EMULSION	-	NC
UMECTA SUSP	-	NC
URAMAXIN CREAM	-	NC
URAMAXIN GEL	-	NC
urea cream	-	NC
UREA EMULSION	-	NC
urea gel (URAMAXIN equiv)	-	NC
UREA LOT	-	NC
UREA NAIL KIT	-	NC
UREA SUSP	-	NC
urea susp 40% (UMECTA equiv)	-	NC
EMOLLIENTS		
ammonium lactate cream (LAC-HYDRIN equiv)	OTC	NC
ammonium lactate lotion (LAC-HYDRIN equiv)	OTC	NC
HYLINATE LOTION	-	NC
ENZYMES - TOPICAL		
SANTYL OINT (QL= 90gm/30 days)	QL	2
vasolex oint (XENADERM equiv)	-	NC
XENADERM OINT	-	NC
HAIR GROWTH AGENTS		
bimatoprost ophth soln (LATISSE equiv)	-	EXC
finasteride tab (PROPECIA equiv)	-	EXC
LATISSE SOLN	-	EXC
LEQSELVI TAB	-	NC
LITFULO CAP	-	NC
IMMUNOMODULATING AGENTS - SYSTEMIC		
NEMLUVIO INJ (QL= 1 inj/56 days)	PA-QL-SP	4
IMMUNOMODULATING AGENTS - TOPICAL		
imiquimod cream (ALDARA equiv)	-	1
ALDARA CREAM	-	NC
IMIQUIMOD CREAM 3.75%	-	NC
imiquimod cream 3.75% (IMIQUIMOD equiv)	-	NC
ZYCLARA CREAM	-	NC
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
tacrolimus oint (PROTOPIC OINT equiv)	-	1
pimecrolimus cream (ELIDEL equiv)	PA	2
HYFTOR GEL (QL= 10 grams/30 days)	PA-QL-SP	4
ELIDEL CREAM	-	NC

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DERMATOLOGICALS Cont.		
OXIANUJO CREAM	-	NC
PROTOPIC OINT	-	NC
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOCON SOLN	-	2
PODOFILOX SOLN	-	2
podofilox soln (CONDYLOX equiv)	-	2
podofilox gel (CONDYLOX equiv)	-	3
GEAMETDRAY GEL	-	NC
METDRAY GEL	-	NC
SALEX LOTION KIT	-	NC
SALEX SHAMPOO	-	NC
SALICATE LIQUID	-	NC
SALICYLIC AC SOLN ER, XALIX SOLN	-	NC
SALIMEZ FORTE CREAM	-	NC
UREA/SALICYLIC CREAM	-	NC
KERATOLYTIC/ANTIMITOTIC/VESICANT AGENTS		
CONDYLOX GEL	-	NC
LOCAL ANESTHETICS - TOPICAL		
lidocaine gel (GLYDO equiv)	-	1
lidocaine oint (QL= 107gm/30 days)	QL	1
lidocaine soln (XYLOCAINE equiv)	-	1
lidocaine/prilocaine cream (EMLA equiv)	-	1
lidocaine patch 5% (LIDODERM equiv) (QL= 3 patches/day)	QL	2
lidocaine patch (LIDODERM equiv) (QL= 3 patches/day)	QL	3
ADAZIN CREAM	-	NC
ANASTIA LOTION	-	NC
APRIZIO PAK KIT	-	NC
capsaicin/menthol topical patch (SINELEE equiv)	-	NC
DERMALID PAK	-	NC
GEN7T LOTION	-	NC
GEN7T PAD 3.5%	-	NC
GEN7T PLUS LOTION	-	NC
GEN7T PLUS PAD	-	NC
L.E.T. GEL	-	NC
LIDO/MENTHOL SPRAY	-	NC
LIDO/RAC/TET GEL	-	NC
LIDOCAINE CREAM	-	NC
LIDOCAINE GEL	-	NC
LIDOCAINE JELLY 2%	-	NC
lidocaine oint/transparent dressing kit	-	NC
lidocaine patch 3.5% (GEN7T equiv)	OTC	NC
LIDOCIN GEL	-	NC
LIDODERM PATCH	-	NC
LIDO-EP-TETR SOLN	-	NC
LIDOSTREAM KIT	-	NC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
LIDOTREX GEL	-	NC
LIDOVEX CREAM	-	NC
MEDI-PATCH W/LIDOCAINE PATCH	-	NC
MENTHOREAL10 THERAPY PACK	-	NC
MICROVIX LP PAK	-	NC
NENDRUX GEL	-	NC
nulido pad (NULIDO equiv)	-	NC
NUVAKAAN II KIT	-	NC
PLIAGLIS CREAM	-	NC
PLIAGLIS KIT	-	NC
PROZENA PAD	-	NC
SILVERA PAD	-	NC
SOLAICE PATCH	-	NC
WPR PLUS	-	NC
ZILACAINE PAK	-	NC
ZYLOTROL-L KIT	-	NC
MISC. DERMATOLOGICAL PRODUCTS		
NEOSALUS FOAM	-	NC
NEOSALUS LOTION	-	NC
MISC. TOPICAL		
DRYSOL SOLN	-	1
DERMACINRX CREAM	-	NC
HYCLODEX SOLN	-	NC
QBREXZA PAD	-	NC
SOFDRA GEL	-	NC
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - TOPICAL		
ZORYVE CREAM (QL= 60 grams/30 days)	PA-QL	2
ZORYVE FOAM (QL= 60 grams/30 days)	PA-QL	2
ADQUEY OINT	-	NC
EUCRISA OINT	-	NC
ZORYVE CREAM 0.05%	-	NC
ZORYVE CREAM 0.15%	-	NC
PIGMENTING-DEPIGMENTING AGENTS		
BLANCHE CREAM	-	EXC
TRI-LUMA CREAM	-	EXC
ROSACEA AGENTS		
azelaic acid gel (FINACEA equiv)	-	1
metronidazole cream (METROCREAM equiv)	-	1
metronidazole gel 0.75% (METROGEL equiv)	-	1
FINACEA FOAM	-	2
metronidazole gel (METROGEL equiv)	-	2
metronidazole lotion (METROLOTION equiv)	-	2
DAZOMON GEL	-	EXC
MIRVASO GEL	-	EXC
oxymetazoline hcl cream (RHOFADE equiv)	-	EXC

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DrugName	Special Code	Tier
DERMATOLOGICALS Cont.		
RHOFADE CREAM	-	EXC
doxycycline (rosacea) cap delayed release (ORACEA equiv)	-	NC
EMROSI CAP	-	NC
FINACEA GEL	-	NC
IVERMECTIN CREAM	-	NC
ivermectin cream (SOOLANTRA equiv)	-	NC
METROCREAM	-	NC
METROGEL 1%	-	NC
METROLOTION	-	NC
NORITATE CREAM	-	NC
ORACEA CAP	-	NC
ROSADAN KIT	-	NC
SOOLANTRA CREAM	-	NC
ZILXI FOAM	-	NC
SCABICIDES & PEDICULICIDES		
permethrin cream (ELIMITE CREAM equiv)	-	1
SPINOSAD SUSP (QL= 1 bottle/fill)	QL	2
malathion lotion (OVIDE equiv) (QL= 2 bottles/fill)	QL	3
NATROBA SUSP (QL= 1 bottle/fill)	QL	3
NATROBA SUSP 0.90% (QL= 1 bottle/fill)	QL	3
CROTAN LOTION	-	NC
ELIMITE CREAM	-	NC
EURAX CREAM	-	NC
IVERMECTIN LOTION	-	NC
OVIDE LOTION	-	NC
SKLICE LOTION	-	NC
SCAR TREATMENT PRODUCTS		
SCARCIN GEL	-	NC
SCARCIN LIQUID ROLL-ON	-	NC
SILIPAC KIT	-	NC
WOUND CARE PRODUCTS		
ALEVICYN SOLN DERMAL	-	NC
BIAFINE EMULSION	-	NC
COLLANEX EXTERNAL POWDER	-	NC
FILSUVEZ GEL	-	NC
KERAMATRIX	-	NC
KERASTAT CREAM	-	NC
KERASTAT GEL	-	NC
REXASIL KIT	-	NC
WOUND-DRESSING GELS	-	NC
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC BIOLOGICALS		
TRICHOPHYTON MENTAGROPHYTES (DIAGNOSTIC) SOLN	-	NC
DIAGNOSTIC DRUGS		
GLUCAGON DIAGNOSTIC INJ	-	NC

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DrugName	Special Code	Tier
DIAGNOSTIC PRODUCTS Cont.		
MACRILEN PACK	-	NC
DIAGNOSTIC PRODUCTS, MISC.		
FREESTYLE LITE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
DIAGNOSTIC TESTS		
ACCU-CHEK GUIDE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
FREESTYLE INSULINX TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
FREESTYLE PRECISION NEO TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
FREESTYLE TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
PRECISION XTRA TEST STRIP (QL= 153 strips/30 days)	OTC-QL	$0
CLINISTIX TEST STRIP	OTC	1
KETO-DIASTIX TEST STRIP	OTC	1
KETOSTIX	OTC	1
COVID-19 TEST	OTC	EXC
CUE COVID-19 INJ TEST CARTRIDGE	OTC	EXC
CUE HEALTH MONITOR	OTC	EXC
PRECISION XTRA KETONE TEST STRIP	OTC	NC
TEST STRIP (all other test strips)	OTC	NC
RADIOGRAPHIC CONTRAST MEDIA		
iohexol inj (OMNIPAQUE equiv)	-	NC
OMNIPAQUE INJ	-	NC
OMNIPAQUE SOLN	-	NC
SITZMARKS CAP	-	NC
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
DIETARY MANAGEMENT PRODUCTS		
ASTAMED MYO CAP	-	EXC
DEPLIN CAP	-	EXC
ELIGEN B12 TAB	-	EXC
FALESSA TAB	-	EXC
FOLTANX TAB	-	EXC
GLYGEST PAK	-	EXC
L-METHYLFOLATE TAB	-	EXC
LUVIRA CAP	-	EXC
METANX CAP	-	EXC
OLLIZAC POWDER	-	EXC
PODIAPN CAP	-	EXC
XYZBAC TAB	-	EXC
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON CAP	-	2
ZENPEP CAP	-	2
PANCREAZE CAP, PERTZYE CAP	-	NC
SUCRAID SOLN	-	NC
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		

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DrugName	Special Code	Tier
DIURETICS Cont.		
acetazolamide tab	-	1
acetazolamide ER cap (DIAMOX SEQUEL equiv)	-	2
methazolamide tab (NEPTAZANE equiv)	-	2
dichlorphenamide tab (KEVEYIS equiv)	-	NC
KEVEYIS TAB	-	NC
NEPTAZANE TAB	-	NC
DIURETIC COMBINATIONS		
AMILORIDE/HCTZ TAB	-	1
amiloride/hydrochlorothiazide tab (MODURETIC equiv)	-	1
spironolactone/hydrochlorothiazide tab (ALDACTAZIDE equiv)	-	1
triamterene/hydrochlorothiazide cap (DYAZIDE equiv)	-	1
triamterene/hydrochlorothiazide tab (MAXZIDE equiv)	-	1
ALDACTAZIDE TAB	-	NC
MAXZIDE TAB	-	NC
LOOP DIURETICS		
bumetanide tab (BUMEX equiv)	-	1
FUROSEMIDE SOLN	-	1
furosemide soln (LASIX equiv)	-	1
furosemide tab (LASIX equiv)	-	1
torsemide tab (DEMADEX equiv)	-	1
ethacrynic tab (EDECRIN equiv)	-	2
EDECRIN TAB	-	NC
ENBUMYST SOLN 0.5MG/0.1ML	-	NC
FUROSCIX KIT	-	NC
FUROSCIX READYFLOW INJ	-	NC
LASIX ONYU INJ 80MG/2.67ML	-	NC
LASIX TAB	-	NC
SOAANZ TAB	-	NC
POTASSIUM SPARING DIURETICS		
amiloride tab (MIDAMOR equiv)	-	1
spironolactone tab (ALDACTONE equiv)	-	1
triamterene cap (DYRENIUM equiv)	-	2
spironolactone susp (CAROSPIR equiv) (Prior Authorization required for members age 9 years and older)	PA	3
ALDACTONE TAB	-	NC
CAROSPIR SUSP	-	NC
DYRENIUM CAP	-	NC
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
chlorthalidone tab	-	1
hydrochlorothiazide cap (MICROZIDE equiv)	-	1
hydrochlorothiazide tab (HYDRODIURIL equiv)	-	1
indapamide tab (LOZOL equiv)	-	1
metolazone tab (ZAROXOLYN equiv)	-	1
DIURIL SUSP	-	2
INZIRQO SUSP (Prior Authorization required for members age 9 years and older)	PA	3
THALITONE TAB	-	NC

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DrugName	Special Code	Tier
ENDOCRINE AND METABOLIC AGENTS - MISC.		
ADRENAL STEROID INHIBITORS		
ISTURISA TAB (QL= 12 tabs/day)	PA-QL-SP	4
RECORLEV TAB	-	NC
BONE DENSITY REGULATORS		
alendronate tab (FOSAMAX equiv)	-	1
ibandronate tab 150mg (BONIVA equiv) (QL= 1 tab/30 days)	QL	1
teriparatide (recombinant) soln pen-inj (FORTEO equiv)	SP	1
ALENDRONATE TAB 40MG	-	2
calcitonin nasal spray (MIACALCIN equiv)	-	2
risedronate tab (ACTONEL equiv)	-	2
alendronate sodium oral soln (FOSAMAX equiv)	-	3
TYMLOS INJ	SP	4
ACTONEL TAB	-	NC
BINOSTO TAB	-	NC
BONIVA TAB 150MG	-	NC
BONSITY INJ	-	NC
calcitonin inj (MIACALCIN equiv)	-	NC
FORTEO INJ	-	NC
FOSAMAX TAB	-	NC
FOSAMAX+D TAB	-	NC
risedronate DR tab (ATELVIA equiv)	-	NC
CORTICOTROPIN		
ACTHAR GEL AUTO-INJECTOR	-	NC
ACTHAR GEL INJ	-	NC
CORTROPHIN INJ	-	NC
CORTROPHIN INJ GEL	-	NC
CORTICOTROPIN-RELEASING FACTOR (CRF) RECEPTOR ANTAGONISTS		
CRENESSITY CAP (QL= 2 caps/day)	PA-QL-SP	4
CRENESSITY SOLN (QL= 2ml/day)	PA-QL-SP	4
FERTILITY REGULATORS		
clomiphene citrate tab (CLOMID equiv)	INF	EXC
CLOMIPHENE TAB	INF	EXC
OVIDREL INJ	INF	EXC
GNRH/LHRH ANTAGONISTS		
ORILISSA TAB 150MG (QL= 1 tab/day)	PA-QL	2
ORILISSA TAB 200MG (QL= 2 tabs/day)	PA-QL	2
cetrorelix acetate for inj kit (CETROTIDE equiv)	INF	EXC
CETROTIDE KIT	INF	EXC
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT INJ	PA-SP	4
GROWTH HORMONE RELEASING HORMONES (GHRH)		
EGRIFTA INJ	-	EXC
EGRIFTA WR KIT	-	EXC
GROWTH HORMONES		

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ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
GENOTROPIN INJ	PA-SP	4
GENOTROPIN INJ 5MG	PA-SP	4
SKYTROFA INJ	PA-SP	4
SOGROYA INJ	PA-SP	4
HUMATROPE INJ, ZOMACTON INJ	-	NC
NGENLA INJ	-	NC
NORDITROPIN INJ, NUTROPIN AQ INJ	-	NC
OMNITROPE INJ	-	NC
SAIZEN INJ, SEROSTIM INJ, ZORBTIVE INJ	-	NC
ZOMACTON INJ	-	NC
HORMONE RECEPTOR MODULATORS		
raloxifene tab (EVISTA equiv) ($0 copay for female members only age 35 years and older; All other members covered at generic copay)	-	$0
EVISTA TAB	-	NC
OSPHENA TAB	-	NC
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX INJ	SP	4
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
SYNAREL NASAL SOLN	-	2
LUPRON DEPOT INJ PED	SP	4
LUPRON DEPOT PED INJ	SP	4
MENOPAUSAL SYMPTOMS SUPPRESSANTS		
LYNKUET CAP	-	NC
VEOZAH TAB	-	NC
METABOLIC MODIFIERS		
calcitriol cap (ROCALTROL equiv)	-	1
calcitriol soln (ROCALTROL equiv)	-	1
carglumic acid tab (CARBAGLU equiv)	PA-SP	1
levocarnitine soln (CARNITOR equiv)	-	1
levocarnitine tab (CARNITOR equiv)	-	1
cinacalcet tab (SENSIPAR equiv)	-	2
DOXERCALCIFEROL CAP	-	2
doxercalciferol cap (HECTOROL equiv)	-	2
paricalcitol cap (ZEMPLAR equiv)	-	2
sodium phenylbutyrate powder (BUPHENYL equiv)	-	2
sodium phenylbutyrate tab (BUPHENYL equiv)	-	2
XPHOZAH TAB (QL= 2 tabs/day)	PA-QL-SP	3
GALAFOLD CAP (QL= 14 caps/28 days)	PA-QL-SP	4
PHEBURANE ORAL PELLETS	SP	4
REDEMPLO PFS INJ (QL = 1 inj/84 days)	PA-QL-SP	4
sapropterin dihydrochloride powder packet (KUVAN equiv)	PA-SP	4
sapropterin dihydrochloride soluble tab (KUVAN equiv)	PA-SP	4
TRYNGOLZA INJ (QL= 1 inj/28 days)	PA-QL-SP	4
IMCIVREE INJ	-	EXC
betaine powder for oral solution (CYSTADANE equiv)	-	NC

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DrugName	Special Code	Tier
ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
BUPHENYL POWDER	-	NC
BUPHENYL TAB	-	NC
CALCITRIOL INJ	-	NC
CARBAGLU TAB	-	NC
CARNITOR SOLN	-	NC
CARNITOR TAB	-	NC
CITRULLINE EASY TAB	-	NC
CYSTADANE POWDER	-	NC
FORZINITY INJ	-	NC
glycerol phenylbutyrate liquid (RAVICTI equiv)	-	NC
HARLIKU TAB	-	NC
HECTOROL CAP	-	NC
KUVAN POWDER PACK	-	NC
KUVAN TAB	-	NC
KYGEVVI POWDER	-	NC
LOARGYS INJ	-	NC
MYALEPT INJ	-	NC
nitisinone cap (ORFADIN equiv)	-	NC
NITYR TAB	-	NC
OLPRUVA PACK	-	NC
ORFADIN CAP	-	NC
ORFADIN SUSP	-	NC
PALYNZIQ INJ	-	NC
RAVICTI LIQUID	-	NC
RAYALDEE CAP	-	NC
ROCALTROL CAP	-	NC
ROCALTROL SOLN	-	NC
SENSIPAR TAB	-	NC
SEPHIENCE POWDER	-	NC
STRENSIQ INJ	-	NC
TRYNGOLZA INJ 50MG/0.8ML	-	NC
VYKAT XR TAB	-	NC
VYKAT XR TAB 150MG	-	NC
VYKAT XR TAB 75MG	-	NC
XURIDEN POWDER	-	NC
YORVIPATH INJ	-	NC
YORVIPATH INJ 294MCG	-	NC
YORVIPATH INJ 420MCG	-	NC
ZEMPLAR CAP	-	NC
GENGLYCOS INJ	-	NC/3P
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA TAB	-	NC
NATRIURETIC PEPTIDES		
VOXZOGO INJ (QL= 1 vial/day)	PA-QL-SP	4
YUVIWEL INJ	-	NC

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DrugName	Special Code	Tier
ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
POSTERIOR PITUITARY HORMONES		
desmopressin acetate tab (DDAVP equiv)	-	2
DESMOPRESSIN NASAL SOLN 1.5MG/ML	-	2
DESMOPRESSIN NASAL SPRAY	-	2
DDAVP NASAL SPRAY	-	NC
DDAVP TAB	-	NC
DESMODA SOLN	-	NC
NOCDURNA SL TAB	-	NC
NOCTIVA EMULSION SPRAY	-	NC
PROGESTERONE RECEPTOR ANTAGONISTS		
mifepristone tab 200mg (MIFIPREX equiv)	-	EXC
PROLACTIN INHIBITORS		
cabergoline tab (DOSTINEX equiv)	-	1
SOMATOSTATIC AGENTS		
octreotide inj (SANDOSTATIN equiv)	SP	1
OCTREOTIDE INJ 100MCG	SP	4
SIGNIFOR INJ (QL= 2 vials/day)	PA-QL-SP	4
BYNFEZIA PEN INJ	-	NC
MYCAPSSA CAP	-	NC
PALSONIFY TAB	-	NC
VASOPRESSIN RECEPTOR ANTAGONISTS		
tolvaptan tab (JYNARQUE equiv)	-	NC
tolvaptan tab (SAMSCA equiv)	-	NC
ESTROGENS		
ESTROGEN COMBINATIONS		
COVARYX HS TAB	-	1
esterified estrogens/methyltestosterone tab (ESTRATEST equiv)	-	1
estradiol/norethindrone tab (ACTIVELLA equiv)	-	1
jinteli tab (FEMHRT equiv)	-	1
MYFEMBREE TAB (QL= 1 tab/day)	PA-QL	2
ORIAHNN CAP (QL= 2 caps/day)	PA-QL	2
PREMPHASE TAB, PREMPRO TAB	-	2
ACTIVELLA TAB	-	NC
ANGELIQ TAB	-	NC
BIJUVA CAP	-	NC
CLIMARA PRO PATCH	-	NC
COMBIPATCH	-	NC
DUAVEE TAB	-	NC
FEMHRT TAB	-	NC
ESTROGENS		
estradiol patch (CLIMARA equiv)	-	1
estradiol patch (VIVELLE-DOT, MINIVELLE equiv)	-	1
estradiol tab (ESTRACE equiv)	-	1
estradiol valerate inj (DELESTROGEN equiv) (QL= 5ml/fill)	QL	2

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DrugName	Special Code	Tier
ESTROGENS Cont.		
estrogens, conjugated tab (PREMARIN equiv)	-	2
ALORA PATCH	-	3
MENEST TAB	-	3
PREMARIN TAB	-	3
CLIMARA PATCH	-	NC
DELESTROGEN INJ	-	NC
DEPO-ESTRADIOL IM	-	NC
DIVIGEL GEL, ESTROGEL GEL	-	NC
ELESTRIN GEL	-	NC
ESTRACE TAB	-	NC
estradiol td gel (DIVIGEL equiv)	-	NC
EVAMIST SPRAY	-	NC
MENOSTAR PATCH	-	NC
VIVELLE-DOT, MINIVELLE PATCH	-	NC
FLUOROQUINOLONES		
FLUOROQUINOLONES		
ciprofloxacin tab (CIPRO equiv)	-	1
levofloxacin soln (LEVAQUIN equiv)	-	1
levofloxacin tab (LEVAQUIN equiv)	-	1
OFLOXACIN TAB	-	1
BAXDELA TAB (QL= 2 tabs/day)	PA-QL	2
ciprofloxacin susp (CIPRO equiv)	-	2
moxifloxacin tab (AVELOX equiv)	-	2
CIPRO SUSP	-	3
CIPROFLOXACIN 100MG TAB	-	3
AVELOX TAB	-	NC
CIPRO TAB	-	NC
FACTIVE TAB	-	NC
LEVAQUIN TAB	-	NC
PROQUIN XR TAB	-	NC
GASTROINTESTINAL AGENTS - MISC.		
5-HT4 RECEPTOR AGONISTS		
prucalopride succinate tab (MOTEGRITY equiv) (QL= 1 tab/day)	QL	1
MOTEGRITY TAB	-	NC
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC)		
TRULANCE TAB (QL= 1 tab/day)	PA-QL	2
BILE ACID SYNTHESIS DISORDER AGENTS		
CHENODAL TAB, CTEXLI TAB	-	NC
CHOLBAM CAP	-	NC
GALLSTONE SOLUBILIZING AGENTS		
ursodiol cap (ACTIGALL equiv)	-	1
ursodiol tab (URSO (FORTE) equiv)	-	1
ACTIGALL CAP	-	NC
CHENODAL TAB, CTEXLI TAB	-	NC

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DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
RELTONE CAP	-	NC
URSO FORTE TAB	-	NC
URSODIOL CAP	-	NC
URSOLIGN CAP	-	NC
GASTROINTESTINAL ANTIALLERGY AGENTS		
cromolyn conc (GASTROCROM equiv)	-	2
GASTROCROM CONC	-	NC
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
lubiprostone cap (AMITIZA equiv) (QL= 2 caps/day)	QL	1
AMITIZA CAP	-	NC
GASTROINTESTINAL STIMULANTS		
metoclopramide soln (REGLAN equiv)	-	1
metoclopramide tab (REGLAN equiv)	-	1
GIMOTI NASAL SPRAY	-	NC
METOZOLV ODT	-	NC
REGLAN TAB	-	NC
HEPATOTROPICS		
REZDIFFRA TAB (QL= 1 tab/day)	PA-QL	2
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS		
BYLVAY CAP 1200MCG (QL= 5 caps/day)	PA-QL-SP	4
BYLVAY CAP 400MCG (QL= 15 caps/day)	PA-QL-SP	4
BYLVAY SPRINKLE CAP 200MCG (QL= 8 caps/day)	PA-QL-SP	4
BYLVAY SPRINKLE CAP 600MCG (QL= 4 caps/day)	PA-QL-SP	4
LIVMARLI SOLN (QL= 90ml/30 days)	PA-QL-SP	4
LIVMARLI SOLN 19MG/ML (QL= 60ml/30 days)	PA-QL-SP	4
LIVMARLI TAB (QL= 2 tabs/day)	PA-QL-SP	4
LIVMARLI TAB 30MG (QL= 1 tab/day)	PA-QL-SP	4
LYNAVOY TAB	-	NC
INFLAMMATORY BOWEL AGENTS		
balsalazide cap (COLAZAL equiv)	-	1
sulfasalazine EC tab (AZULFIDINE equiv)	-	1
sulfasalazine tab (AZULFIDINE equiv)	-	1
MESALAMINE DR CAP	-	2
mesalamine DR cap (DELZICOL equiv)	-	2
mesalamine DR tab (LIALDA equiv)	-	2
mesalamine enema (ROWASA equiv)	-	2
mesalamine ER cap (APRISO equiv)	-	2
mesalamine supp (CANASA equiv)	-	2
DIPENTUM CAP	-	3
mesalamine tab (ASACOL equiv)	-	3
CIMZIA INJ (QL= 1 kit/plan year)	PA-QL-SP	4
CIMZIA INJ (QL= 2 inj/28 days)	PA-QL-SP	4
CIMZIA INJ 200MG/ML (QL= 2 inj/28 days)	PA-QL-SP	4
ENTYVIO SC INJ (QL= 2 inj/28 days)	PA-QL-SP	4
TREMFYA INDUCTION INJ 200MG/ML (QL= 2 inj/28 days; 6 inj/year)	PA-QL-SP	4

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DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
TREMFYA INJ 200MG/2ML (QL= 1 inj/28 days)	PA-QL-SP	4
APRISO CAP	-	NC
ASACOL HD TAB	-	NC
ASACOL HD TAB, MESALAMINE TAB	-	NC
AZULFIDINE EN TAB	-	NC
AZULFIDINE TAB	-	NC
CANASA SUPP	-	NC
COLAZAL CAP	-	NC
DELZICOL CAP	-	NC
mesalamine ER cap (PENTASA CR equiv)	-	NC
OMVOH INJ	-	NC
PENTASA CR CAP	-	NC
ROWASA KIT	-	NC
SKYRIZI INJ 180 MG/1.2ML	-	NC
SKYRIZI INJ 360MG/2.4ML	-	NC
VELSIPITY TAB	-	NC
ZYMFENTRA INJ	-	NC
INTESTINAL ACIDIFIERS		
lactulose soln	-	1
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
alosetron tab (LOTRONEX equiv)	-	3
LINZESS CAP (QL= 1 cap/day)	PA-QL	3
IBSRELA TAB	-	NC
LOTRONEX TAB	-	NC
VIBERZI TAB	-	NC
LIVE FECAL MICROBIOTA		
VOWST CAP (QL= 12 caps/fill)	PA-QL-SP	4
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK TAB (QL= 1 tab/day)	PA-QL	2
SYMPROIC TAB (QL= 1 tab/day)	PA-QL	2
alvimopan cap (ENTEREG equiv)	-	NC
ENTEREG CAP	-	NC
RELISTOR INJ	-	NC
RELISTOR INJ KIT	-	NC
RELISTOR TAB	-	NC
PEROXISOME PROLIFERATOR-ACTIVATED RECEPTOR(PPAR) AGONISTS		
IQIRVO TAB	-	NC
LIVDELZI CAP	-	NC
PHOSPHATE BINDER AGENTS		
calcium acetate cap (PHOSLO equiv)	-	1
FOSRENOL POWDER PACK	-	2
lanthanum carbonate chew tab (FOSRENOL equiv)	-	2
sevelamer powder pak (RENVELA equiv)	-	2
sevelamer tab (RENVELA TAB equiv)	-	2
AURYXIA TAB	-	3

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DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
ferric citrate tab	-	3
ELIPHOS TAB	-	NC
FOSRENOL CHEW TAB	-	NC
PHOSLO CAP	-	NC
RENAGEL TAB 800MG	-	NC
RENVELA PAK	-	NC
RENVELA TAB	-	NC
sevelamer hydrochloride tab (RENAGEL equiv)	-	NC
VELPHORO CHEW TAB	-	NC
SHORT BOWEL SYNDROME (SBS) AGENTS		
GATTEX KIT	-	NC
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO TAB	-	NC
GENERAL ANESTHETICS		
ANESTHETICS - MISC.		
KETAMINE HCL TROCHES	-	NC
GENITOURINARY AGENTS - MISCELLANEOUS		
ALKALINIZERS		
CYTRA K CRYSTALS	-	1
CYTRA-3 SYRUP	-	1
K CITRATE SOLN CITR ACD	-	1
K/NA CITRATE SOL CITR ACD	-	1
ORACIT SOLN	-	1
potassium citrate CR tab (UROCIT-K equiv)	-	1
potassium citrate/citric acid powder pack (POLYCITRA equiv)	-	1
sodium citrate/citric acid soln (BICITRA equiv)	-	1
UROCIT-K TAB	-	NC
CYSTINOSIS AGENTS		
CYSTAGON CAP	SP	4
PROCYSBI CAP	-	NC
PROCYSBI GRANULES PACKET	-	NC
GENITOURINARY IRRIGANTS		
RENACIDIN SOLN	-	NC
HYPEROXALURIA AGENTS		
RIVFLOZA INJ	-	NC
RIVFLOZA INJ 160MG	-	NC
RIVFLOZA VIAL	-	NC
IGA NEPHROPATHY (IGAN) AGENTS		
FILSPARI TAB	-	NC
TRUTAKNA INJ	-	NC
VANRAFIA TAB	-	NC
VOYXACT INJ	-	NC
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON CAP	-	NC

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GENITOURINARY AGENTS - MISCELLANEOUS Cont.		
PENTOSAN CAP	-	NC
PROSTATIC HYPERTROPHY AGENTS		
alfuzosin SR tab (UROXATRAL equiv)	-	1
dutasteride cap (AVODART equiv)	-	1
finasteride tab (PROSCAR equiv)	-	1
silodosin cap (RAPAFLO equiv)	-	1
tamsulosin cap (FLOMAX equiv)	-	1
AVODART CAP	-	NC
CARDURA XL TAB	-	NC
dutasteride/tamsulosin cap (JALYN equiv)	-	NC
ENTADFI CAP	-	NC
FLOMAX CAP	-	NC
PROSCAR TAB	-	NC
RAPAFLO CAP	-	NC
UROXATRAL TAB	-	NC
URINARY ANALGESICS		
PHENAZOPYRIDINE TAB	-	1
phenazopyridine tab (PYRIDIUM equiv)	-	1
PYRIDIUM TAB 100MG	-	NC
PYRIDIUM TAB 200MG	-	NC
URINARY STONE AGENTS		
tiopronin tab (THIOLA equiv)	PA-SP	1
tiopronin tab delayed release (THIOLA EC equiv)	PA-SP	1
LITHOSTAT TAB	-	3
THIOLA EC TAB	-	NC
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
colchicine/probenecid tab (COL-BENEMID equiv)	-	1
DUZALLO TAB	-	NC
GOUT AGENTS		
allopurinol tab (ZYLOPRIM equiv)	-	1
colchicine tab (COLCRYS equiv)	-	1
febuxostat tab (ULORIC equiv) (Step Therapy requires trial of allopurinol)	ST	1
GLOPERBA SOLN (Prior Authorization required for members age 9 years and older)	PA	3
allopurinol tab 200mg	-	NC
colchicine cap (MITIGARE equiv)	-	NC
COLCRYS TAB	-	NC
ULORIC TAB	-	NC
ZURAMPIC TAB	-	NC
ZYLOPRIM TAB	-	NC
URICOSURICS		
probenecid tab (BENEMID equiv)	-	1
HEMATOLOGICAL AGENTS - MISC.		
ANTIHEMOPHILIC PRODUCTS		

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DrugName	Special Code	Tier
HEMATOLOGICAL AGENTS - MISC. Cont.		
ALHEMO INJ	PA-SP	4
HEMLIBRA INJ	PA-SP	4
ADVATE, KOVALTRY INJ	-	EXC
ADYNOVATE INJ	-	EXC
AFSTYLA KIT	-	EXC
ALPHANATE, HUMATE-P INJ	-	EXC
ALPHANINE SD INJ	-	EXC
ALPROLIX INJ	-	EXC
ALTUVIIIO INJ	-	EXC
BENEFIX INJ	-	EXC
COAGADEX INJ	-	EXC
CORIFACT KIT	-	EXC
ELOCTATE INJ	-	EXC
ESPEROCT INJ	-	EXC
FEIBA INJ	-	EXC
FESILTY INJ	-	EXC
HEMOFIL M, KOATE INJ	-	EXC
IDELVION INJ	-	EXC
IXINITY INJ	-	EXC
JIVI INJ	-	EXC
KOGENATE FS INJ	-	EXC
NOVOEIGHT INJ	-	EXC
NOVOSEVEN RT INJ	-	EXC
NUWIQ INJ	-	EXC
NUWIQ KIT	-	EXC
OBIZUR INJ	-	EXC
PROFILNINE INJ	-	EXC
REBINYN INJ	-	EXC
RECOMBINATE INJ	-	EXC
RIASTAP INJ	-	EXC
RIXUBIS INJ	-	EXC
SEVENFACT INJ	-	EXC
TRETTEN INJ	-	EXC
VONVENDI INJ	-	EXC
WILATE INJ	-	EXC
XYNTHA INJ	-	EXC
HYMPAVZI INJ	-	NC
QFITLIA INJ	-	NC
BRADYKININ B2 RECEPTOR ANTAGONISTS		
icatibant inj (FIRAZYR equiv)	PA-SP	4
FIRAZYR INJ	-	NC
COMPLEMENT INHIBITORS		
EMPAVELI INJ (QL= 160ml/28 days)	PA-QL-SP	4
TAVNEOS CAP (QL= 6 caps/day)	PA-QL-SP	4
VOYDEYA TAB (QL= 6 tabs/day)	PA-QL-SP	4

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DrugName	Special Code	Tier
HEMATOLOGICAL AGENTS - MISC. Cont.		
VOYDEYA TAB THERAPY PACK (QL= 6 tabs/day)	PA-QL-SP	4
ZILBRYSQ INJ (QL= 1 inj/day)	PA-QL-SP	4
ZILBRYSQ INJ 23MG (QL= 1 inj/day)	PA-QL-SP	4
ZILBRYSQ INJ 32.4MG (QL= 1 inj/day)	PA-QL-SP	4
BERINERT INJ	-	NC
CINRYZE INJ	-	NC
FABHALTA CAP	-	NC
HAEGARDA INJ	-	NC
RUCONEST INJ	-	NC
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS		
TAVALISSE TAB	-	NC
WAYRILZ TAB	-	NC
HEMATORHEOLOGIC AGENTS		
pentoxifylline ER tab (TRENTAL equiv)	-	1
PLASMA FACTOR XIIA INHIBITORS		
ANDEMBRY INJ	-	NC
PLASMA KALLIKREIN INHIBITORS		
EKTERLY TAB	-	NC
ORLADEYO CAP	-	NC
ORLADEYO PACK	-	NC
TAKHZYRO INJ	-	NC
TAKHZYRO INJ 150MG/ML	-	NC
PLATELET AGGREGATION INHIBITORS		
anagrelide cap (AGRYLIN equiv)	-	1
cilostazol tab (PLETAL equiv)	-	1
clopidogrel tab 75mg (PLAVIX equiv)	-	1
dipyridamole tab (PERSANTINE equiv)	-	1
prasugrel tab (EFFIENT equiv)	-	1
aspirin/dipyridamole cap (AGGRENOX equiv)	-	2
ticagrelor tab (BRILINTA equiv)	-	2
ZONTIVITY TAB (Restricted to Cardiology Specialist)	RS	3
AGRYLIN CAP	-	NC
ASPIRIN/OMEPRAZOLE ER TAB	-	NC
BRILINTA TAB	-	NC
CLOPIDOGREL THERAPY PACK	-	NC
EFFIENT TAB	-	NC
PLAVIX TAB 300MG	-	NC
PLAVIX TAB 75MG	-	NC
YOSPRALA TAB	-	NC
PREKALLIKREIN-DIRECTED ANTISENSE OLIGONUCLEOTIDES (ASO)		
DAWNZERA INJ	-	NC
PYRUVATE KINASE ACTIVATORS		
PYRUKYND TAB (QL= 2 tabs/day)	PA-QL-SP	4
PYRUKYND TAPER PACK (QL= 1 tab/day)	PA-QL-SP	4

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DrugName	Special Code	Tier
HEMATOLOGICAL AGENTS - MISC. Cont.		
AQVESME TAB 100MG	-	NC
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
miglustat cap (ZAVESCA equiv) (QL= 3 caps/day)	PA-QL-SP	1
CERDELGA CAP (QL= 2 caps/day)	PA-QL-SP	4
ZAVESCA CAP	-	NC
AGENTS FOR SICKLE CELL ANEMIA		
DROXIA CAP	-	2
OXBRYTA TAB	-	NC
SIKLOS TAB	-	NC
AGENTS FOR SICKLE CELL DISEASE		
l-glutamine powder packet (ENDARI equiv) (QL= 6 packets/day)	PA-QL-SP	1
XROMI SOLN (Prior Authorization required for members age 9 years and older)	PA	3
ENDARI POWDER PACKET	-	NC
OXBRYTA TAB FOR ORAL SUSP	-	NC
COBALAMINS		
cyanocobalamin inj	-	1
cyanocobalamin nasal spray 500 mcg/0.1ml (NASCOBAL equiv)	-	3
NASCOBAL SPRAY	-	NC
FOLIC ACID/FOLATES		
folic acid tab 1mg ($0 copay for female members only; All other members covered at generic copay)	-	$0
folic acid tab 400mcg (Covered for female members only)	OTC	$0
folic acid tab 800mcg (Covered for female members only)	OTC	$0
QUIOFIC SOLN	-	NC
HEMATOPOIETIC GENE THERAPY		
KRESLADI INJ	-	NC/3P
WASKYRA INJ	-	NC/3P
HEMATOPOIETIC GROWTH FACTORS		
eltrombopag olamine powder pack for susp (PROMACTA equiv) (QL= 1 packet/day)	PA-QL-SP	1
eltrombopag olamine tab (PROMACTA equiv) (QL= 1 tab/day)	PA-QL-SP	1
eltrombopag olamine tab 50MG (PROMACTA equiv) (QL= 2 tabs/day)	PA-QL-SP	1
eltrombopag olamine tab 75MG (PROMACTA equiv) (QL= 2 tabs/day)	PA-QL-SP	1
RETACRIT INJ	-	2
DOPTELET SPRINKLE CAP (QL= 2 caps/day)	PA-QL-SP	4
DOPTELET TAB (QL= 2 tabs/day)	PA-QL-SP	4
FULPHILA INJ	SP	4
NIVESTYM INJ	SP	4
NYVEPRIA INJ	SP	4
VAFSEO TAB	PA-SP	4
ZARXIO INJ	SP	4
ALVAIZ TAB	-	NC
ARANESP INJ	-	NC
ARMLUPEG INJ	-	NC
FILKRI INJ	-	NC

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HEMATOPOIETIC AGENTS Cont.		
FYLNETRA INJ	-	NC
GRANIX INJ	-	NC
MULPLETA TAB	-	NC
NEULASTA INJ	-	NC
NYPOZI INJ	-	NC
PROCRIT INJ	-	NC
PROMACTA POWDER	-	NC
PROMACTA TAB 12.5MG, 25MG	-	NC
RELEUKO INJ	-	NC
RELEUKO PREFILLED SYRINGE INJ	-	NC
STIMUFEND INJ	-	NC
UDENYCA INJ	-	NC
ZIEXTENZO INJ	-	NC
HEMATOPOIETIC MIXTURES		
FEROTRINSIC CAP	-	1
ferrex 150 forte cap	-	1
MULTIGEN FOLIC TAB	-	1
MULTIGEN PLUS TAB	-	1
MULTIGEN TAB	-	1
POLY-IRON CAP 150 FORTE	-	1
NEPHRON FA TAB	-	2
ICAR-C PLUS TAB 100-250-0.025-1 MG	-	3
BENTIVITE TAB	-	NC
BIFERARX TAB	-	NC
B-SERENE PAD	-	NC
CORVITA 150 TAB	-	NC
CYFOLEX CAP	-	NC
FEONYX TAB	-	NC
FERIVA 21/7 TAB	-	NC
FERRO-PLEX TAB	-	NC
folbee tab (FOLGARD RX equiv)	-	NC
FOLGARD RX TAB	-	NC
FOLITE TAB	-	NC
FOLVITE-FE TAB	-	NC
OVEEZA CAP	-	NC
PUREFOLIX TAB	-	NC
IRON		
ACCRUFER CAP	-	NC
ferrous sulfate elixir	OTC	NC
FERROUS SULFATE LIQUID	OTC	NC
ferrous sulfate soln	OTC	NC
STEM CELL MOBILIZERS		
XOLREMDI CAP	-	NC

HEMOSTATICS

HEMOSTATICS - SYSTEMIC

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DrugName	Special Code	Tier
HEMOSTATICS Cont.		
tranexamic acid tab (LYSTEDA equiv)	-	1
aminocaproic acid soln (AMICAR equiv)	-	2
aminocaproic acid tab (AMICAR equiv)	-	2
AMICAR SOLN	-	NC
AMICAR TAB	-	NC
LYSTEDA TAB	-	NC
HYPNOTICS		
NON-BARBITURATE HYPNOTICS		
zolpidem tab (AMBIEN equiv) (QL= 1 tab/day)	QL	1
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA TAB	-	NC
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
phenobarbital elixir	-	1
PHENOBARBITAL ELXIR	-	1
phenobarbital tab	-	1
PHENOBARBITAL TAB 100MG	-	NC
PHENOBARBITAL TAB 15MG	-	NC
PHENOBARBITAL TAB 16.2MG	-	NC
PHENOBARBITAL TAB 30MG	-	NC
PHENOBARBITAL TAB 32.4MG	-	NC
PHENOBARBITAL TAB 60MG	-	NC
PHENOBARBITAL TAB 64.8MG	-	NC
PHENOBARBITAL TAB 97.2MG	-	NC
HYPNOTICS - TRICYCLIC AGENTS		
doxepin tab (SILENOR equiv)	-	NC
NON-BARBITURATE HYPNOTICS		
estazolam tab (PROSOM equiv)	-	1
eszopiclone tab (LUNESTA equiv) (QL= 1 tab/day)	QL	1
midazolam inj (MIDAZOLAM equiv) (Restricted to Neurology Specialist)	RS	1
temazepam cap 15mg (RESTORIL equiv)	-	1
temazepam cap 30mg (RESTORIL equiv)	-	1
triazolam tab (HALCION equiv)	-	1
zaleplon cap (SONATA equiv) (QL= 1 cap/day)	QL	1
zolpidem ER tab (AMBIEN CR equiv) (QL= 1 tab/day)	QL	1
AMBIEN CR TAB	-	NC
AMBIEN TAB	-	NC
EDLUAR SL TAB	-	NC
FLURAZEPAM CAP	-	NC
HALCION TAB	-	NC
INTERMEZZO SL TAB	-	NC
LUNESTA TAB	-	NC
QUAZEPAM TAB	-	NC
RESTORIL CAP 15MG	-	NC

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DrugName	Special Code	Tier
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS Cont.		
RESTORIL CAP 22.5MG	-	NC
RESTORIL CAP 30MG	-	NC
RESTORIL CAP 7.5MG	-	NC
temazepam cap 22.5mg (RESTORIL equiv)	-	NC
temazepam cap 7.5mg (RESTORIL equiv)	-	NC
ZOLPIDEM CAP	-	NC
zolpidem tartrate SL tab (INTERMEZZO equiv)	-	NC
ZOLPIDEM TARTRATE SL TAB 1.75MG	-	NC
ZOLPIDEM TARTRATE SL TAB 3.5MG	-	NC
ZOLPIMIST SPRAY	-	NC
OREXIN RECEPTOR ANTAGONISTS		
DAYVIGO TAB (QL= 1 tab/day)	PA-QL	3
QUVIVIQ TAB	-	NC
SELECTIVE MELATONIN RECEPTOR AGONISTS		
ramelteon tab (ROZEREM equiv) (QL= 1 tab/day)	QL	2
HETLIOZ CAP	-	NC
HETLIOZ SUSP	-	NC
ROZEREM TAB	-	NC
tasimelteon cap (HETLIOZ equiv)	-	NC
LAXATIVES		
LAXATIVE COMBINATIONS		
GAVILYTE-C SOLN (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0
GOLYTELY SOLN (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0
peg 3350 soln (100 gram Moviprep equiv) (MOVIPREP equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0
peg 3350/electrolytes soln (COLYTE equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0
peg 3350/electrolytes soln (NULYTELY equiv) (QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay)	QL	$0
sodium/magnesium/potassium soln (SUPREP equiv) ($0 copay for members age 45-75 years; All other members covered at generic copay; Limited to 2 fills/calendar year)	QL	$0
CLENPIQ SOLN	-	NC
MOVIPREP SOLN	-	NC
PEG-PREP KIT	-	NC
PLENVU SOLN	-	NC
SUFLAVE SOLN	-	NC
SUPREP BOWEL PREP PACK	-	NC
SUTAB TAB	-	NC
LAXATIVES - MISCELLANEOUS		
lactulose soln	-	1
GIALAX KIT	-	NC
lactulose oral crystal packet	-	NC
SALINE LAXATIVES		

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DrugName	Special Code	Tier
LAXATIVES Cont.		
OSMOPREP TAB	-	NC
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETIC COMBINATIONS		
ROPIVICAINE/CLONIDINE/KETOROLAC INJ	-	NC
MACROLIDES		
AZITHROMYCIN		
azithromycin susp (ZITHROMAX equiv)	-	1
azithromycin tab (ZITHROMAX equiv)	-	1
ZITHROMAX POWDER PACK	-	3
ZITHROMAX SUSP	-	NC
ZITHROMAX TAB	-	NC
CLARITHROMYCIN		
clarithromycin tab (BIAXIN equiv)	-	1
CLARITHROMYC SUSP	-	2
clarithromycin ER tab (BIAXIN XL equiv)	-	3
BIAXIN TAB	-	NC
ERYTHROMYCINS		
ERYTHROMYCIN CAP DR	-	2
erythromycin DR cap (ERYC equiv)	-	2
ERYTHROMYCIN EC CAP	-	2
erythromycin ethylsuccinate susp (ERYPED equiv)	-	2
erythromycin tab (ERYTHROMYCIN equiv) (all forms except PCE)	-	2
E.E.S. TAB	-	3
erythromycin ethylsuccinate tab (E.E.S. equiv)	-	3
erythromycin tab (ERY-TAB equiv)	-	3
ERYPED SUSP	-	NC
FIDAXOMICIN		
DIFICID SUSP (QL= 136 mL/fill; Step therapy requires trial of vancomycin cap or Firvanq solution)	QL-ST	2
fidaxomicin tab (DIFICID equiv) (QL= 20 tabs/fill; Step therapy requires trial of vancomycin cap or Firvanq solution)	QL-ST	2
DIFICID TAB	-	NC
MEDICAL DEVICES AND SUPPLIES		
CONTRACEPTIVES		
DIAPHRAGM	-	$0
CERVICAL CAP	-	EXC
FEMALE CONDOMS	OTC	EXC
MALE CONDOMS	OTC	EXC
DIABETIC SUPPLIES		
ACCU-CHEK GUIDE CARE METER	OTC	$0
ACCU-CHEK GUIDE ME KIT	OTC	$0
DEXCOM G6 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0
DEXCOM G6 TRANSMITTER (QL= 1 transmitter/90 days; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0

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MEDICAL DEVICES AND SUPPLIES Cont.		
DEXCOM G7 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0
FREESTYLE FREEDOM LITE METER	OTC	$0
FREESTYLE LIBRE 2 RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0
FREESTYLE LIBRE 3 READER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0
FREESTYLE LIBRE RECEIVER (QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	$0
FREESTYLE LITE METER	OTC	$0
FREESTYLE PRECISION NEO METER	OTC	$0
LANCET KIT	OTC	$0
LANCETS	OTC	$0
PRECISION XTRA METER	OTC	$0
CALIBRATION LIQUID	OTC	1
DEXCOM G6 SENSOR (QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
DEXCOM G7 SENSOR (QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
DEXCOM G7 SENSOR (15-DAY) (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin)	QL-ST	2
FREESTYLE LIBRE 2 SENSOR (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
FREESTYLE LIBRE 2-PLUS SENSOR (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
FREESTYLE LIBRE 3 SENSOR (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
FREESTYLE LIBRE 3-PLUS SENSOR (QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
FREESTYLE LIBRE SENSOR (14-DAY) (QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans)	QL-ST	2
OMNIPOD 5 DEX G7G6 INTRO KIT (QL= 1 kit/year)	QL	2
OMNIPOD 5 DEX G7G6 PODS (QL= 10 pods/month)	QL	2
OMNIPOD 5 G7 KIT INTRO (QL= 1 kit/year)	QL	2
OMNIPOD 5 G7 MIS PODS (QL= 10 pods/30 days)	QL	2
OMNIPOD 5 LIBRE2 PLUS G6 INTRO KIT (QL= 1 kit/year)	QL	2
OMNIPOD 5 LIBRE2 PLUS G6 PODS (QL= 10 pods/30 days)	QL	2
OMNIPOD 5 PACK PODS (QL= 10 pods/month)	QL	2
OMNIPOD DASH INTRO KIT (QL= 1 kit/year)	QL	2
OMNIPOD DASH PODS (QL= 10 pods/month)	QL	2
OMNIPOD GO KIT (QL= 10 pods/month)	QL	2
OMNIPOD STARTER KIT (QL= 1 kit/year)	QL	2
TWIIST REFILL KIT (QL= 1 kit/month)	QL	2
TWIIST STARTER KIT (QL= 1 kit/month)	QL	2
DIABETIC METER (all other diabetic meters)	OTC	NC
MINT REFILL KIT	-	NC
MINT STARTER KIT	-	NC
OMNIPOD DASH PDM KIT	-	NC

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MEDICAL DEVICES AND SUPPLIES Cont.		
PIVOT INSULIN PUMP STARTER KIT	-	NC
PIVOT SUPPLY KIT	-	NC
TEMPO SMART BUTTON	-	NC
V-GO INJ KIT	-	NC
MISC. DEVICES		
ALCOHOL SWABS	OTC	EXC
ORAL HYGIENE PRODUCTS		
HURRISEAL MIS SNAP	-	NC
PARENTERAL THERAPY SUPPLIES		
B-D PEN NEEDLE	-	$0
EMBECTA PEN NEEDLE	OTC	$0
NOVOFINE PEN NEEDLE	-	$0
NOVOTWIST PEN NEEDLE	-	$0
NOVOTWIST/NOVOFINE PEN NEEDLE	-	$0
B-D INSULIN SYRINGE	--OTC	1
EMBECTA INSULIN SYRINGE	--OTC	1
CEQUR SIMPLICITY	-	NC
INPEN INSULIN INJECTION DEVICE	-	NC
INSULIN SYRINGE	OTC	NC
LASIX ONYU REUSABLE UNIT	-	NC
PEN NEEDLE	OTC	NC
RESPIRATORY THERAPY SUPPLIES		
PEAK FLOW METER	OTC	1
AEROCHAMBER	OTC	2
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG INJ (QL= 1 pack/28 days)	QL	2
AJOVY INJ (QL= 1 pack/28 days)	QL	2
EMGALITY INJ (QL= 1 inj/28 days)	QL	2
EMGALITY INJ 100MG/ML (QL= 3 inj/fill, 6 fills/year)	QL	2
NURTEC ODT (QL= 8 tabs/fill; 6 fills/year)	PA-QL	2
UBRELVY TAB (QL= 10 tabs/30 days, 6 fills/year)	PA-QL	2
ZAVZPRET NASAL SPRAY (QL= 6 units/fill; 60 units/365 days)	PA-QL	2
QULIPTA TAB	-	NC
MIGRAINE COMBINATIONS		
ACETAMINOPHEN/ISOMETHEPTENE/DICHLORAL CAP	-	NC
acetaminophen/isometheptene/dichloral cap (MIDRIN equiv)	-	NC
CAFERGOT TAB, ERGOTAMINE/CAFFEINE TAB	-	NC
CAFERGOT TAB, ERGOTAMINE/CAFFEINE TAB 1-100MG	-	NC
MIGERGOT SUPP	-	NC
PRODRIN TAB	-	NC
SUMANSETRON PAK	-	NC
sumatriptan/naproxen tab (TREXIMET equiv)	-	NC
SYMBRAVO TAB	-	NC

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DrugName	Special Code	Tier
MIGRAINE PRODUCTS Cont.		
TREXIMET TAB	-	NC
MIGRAINE PRODUCTS		
BREKIYA INJ	-	NC
dihydroergotamine mesylate inj (D.H.E. equiv)	-	NC
dihydroergotamine mesylate nasal spray (MIGRANAL equiv)	-	NC
ERGOMAR SL TAB	-	NC
MIGRANAL SPRAY	-	NC
TRUDHESA NASAL SPRAY	-	NC
MIGRAINE PRODUCTS - MONOCLONAL ANTIBODIES		
AIMOVIG INJ (QL= 1 pack/28 days)	QL	2
MIGRAINE PRODUCTS - NSAIDS		
CAMBIA POWDER	-	NC
diclofenac potassium (migraine) packet (CAMBIA equiv)	-	NC
ELYXYB SOLN	-	NC
SEROTONIN AGONISTS		
eletriptan tab (RELPAX equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1
naratriptan tab (AMERGE equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1
rizatriptan ODT (MAXALT equiv) (QL= 12 tabs/fill, 3 fills/60 days)	QL	1
rizatriptan tab (MAXALT equiv) (QL= 12 tabs/fill, 3 fills/60 days)	QL	1
sumatriptan tab (IMITREX equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1
sumatriptan vial inj (IMITREX equiv) (QL= 10 vials/fill, 2 fills/30 days)	QL	1
zolmitriptan ODT (ZOMIG equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1
zolmitriptan tab (ZOMIG equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	1
frovatriptan tab (FROVA equiv) (QL= 9 tabs/fill, 2 fills/30 days)	QL	2
REYVOW TAB (QL= 8 tabs/30 days, 6 fills/year)	PA-QL	2
sumatriptan inj (IMITREX equiv) (QL= 6 inj/fill, 3 fills/30 days)	QL	2
sumatriptan nasal spray (IMITREX, SUMATRIPTAN equiv) (QL= 6 sprays/fill, 3 fills/30 days)	QL	2
zolmitriptan nasal spray (ZOLMITRIPTAN, ZOMIG equiv) (QL= 6 sprays/fill, 2 fills/30 days)	QL	3
ZOLMITRIPTAN SPRAY (QL= 6 sprays/fill, 2 fills/30 days)	QL	3
ZOMIG SPRAY (QL= 6 sprays/fill, 2 fills/30 days)	QL	3
almotriptan tab (AXERT equiv)	-	NC
AXERT TAB	-	NC
FROVA TAB	-	NC
IMITREX 4MG INJ, ZEMBRACE INJ	-	NC
IMITREX INJ	-	NC
IMITREX TAB	-	NC
MAXALT MLT TAB	-	NC
MAXALT TAB	-	NC
ONZETRA XSAIL	-	NC
RELPAX TAB	-	NC
RIZAFILM MIS	-	NC
SUMAVEL DOSEPRO INJ	-	NC
TOSYMRA SOLN	-	NC
ZECUITY PAD	-	NC
ZOLMITRIPTAN SPRAY, ZOMIG SPRAY	-	NC

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DrugName	Special Code	Tier
MIGRAINE PRODUCTS Cont.		
ZOMIG TAB	-	NC
MINERALS & ELECTROLYTES		
FLUORIDE		
FLUORABON SOLN ($0 copay for members age 5 years and younger; All other members covered at preferred brand copay)	-	$0
FLUORIDE CHW 0.25MG ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0
sodium fluoride chew tab (LURIDE equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0
sodium fluoride soln (LURIDE equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0
SODIUM FLUORIDE TAB ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0
PHOSPHATE		
PHOSPHA 250 NEUTRAL TAB	-	1
PHOSPHO-TRIN K500 TAB	-	2
K-PHOS NEUTRAL TAB 155-852-130MG	-	NC
K-PHOS TAB	-	NC
POTASSIUM		
EFFER-K TAB	-	1
K-TAB	-	1
potassium bicarbonate effer tab (K-LYTE equiv)	-	1
potassium chloride ER cap (MICRO-K equiv)	-	1
potassium chloride ER tab (K-TAB equiv)	-	1
potassium chloride micro tab (K-DUR equiv)	-	1
POTASSIUM CHLORIDE TAB ER	-	1
potassium chloride powder packet (KLOR-CON equiv)	-	2
potassium chloride soln	-	2
POKONZA ORAL SOLN	-	NC
POKONZA POWDER	-	NC
TRACE MINERALS		
ZYCUBO INJ	-	NC
ZINC		
ZINC GLUCONATE TAB	OTC	1
GALZIN CAP	-	NC
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
trientine cap (SYPRINE equiv)	PA-SP	1
penicillamine tab (DEPEN TITRATAB equiv)	-	2
CUVRIOR TAB	-	NC
DEPEN TITRATAB	-	NC
penicillamine cap (CUPRIMINE equiv)	-	NC
TRIENTINE CAP	-	NC
IMMUNOMODULATORS		
lenalidomide cap (REVLIMID equiv) (QL= 1 cap/day; Restricted to Oncology or Hematology Specialist)	QL-RS-SP	1
REZUROCK TAB (QL= 1 tab/day)	PA-QL-SP	4

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DrugName	Special Code	Tier
MISCELLANEOUS THERAPEUTIC CLASSES Cont.		
VYVGART HYTRULO INJ (QL= 4 inj/28 days)	PA-QL-SP	4
JOENJA TAB	-	NC
REVLIMID CAP	-	NC
RHAPSIDO TAB	-	NC
IMMUNOSUPPRESSIVE AGENTS		
everolimus tab (ZORTRESS equiv)	PA	2
sirolimus soln (RAPAMUNE equiv)	-	2
ENSPRYNG INJ (QL= 1 inj/28 days)	PA-QL-SP	4
LUPKYNIS CAP (QL= 6 caps/day)	PA-QL-SP	4
ASTAGRAF XL CAP	-	NC
azathioprine tab 100mg (AZASAN equiv)	-	NC
azathioprine tab 75mg (AZASAN equiv)	-	NC
MYHIBBIN SUSP	-	NC
PROGRAF PACKET	-	NC
RAPAMUNE SOLN	-	NC
tacrolimus cap er (ASTAGRAF XL equiv)	-	NC
ZORTRESS TAB	-	NC
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS		
VIJOICE TAB (QL= 1 tab/day)	PA-QL-SP	4
VIJOICE TAB 250MG (QL= 2 tabs/day)	PA-QL-SP	4
VIJOICE GRANULES PACKET	-	NC
POTASSIUM REMOVING AGENTS		
LOKELMA PAK (QL= 1 packet/day)	PA-QL	2
LOKELMA PAK 5GM	PA	2
VELTASSA POWDER 1GM (QL= 4 packets/day)	PA-QL	2
LOKELMA PAK 10GM	-	NC
LOKELMA PAK 5GM	-	NC
SPS	-	NC
PROGERIA TREATMENT AGENTS		
ZOKINVY CAP (QL= 4 caps/day)	PA-QL-SP	4
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA AUTO-INJECTOR (QL= 4 inj/28 day)	PA-QL-SP	4
BENLYSTA INJ (QL= 4 inj/28 day)	PA-QL-SP	4
SAPHNELO INJ	-	NC
SAPHNELO PEN INJ	-	NC
MOUTH/THROAT/DENTAL AGENTS		
ANESTHETICS TOPICAL ORAL		
lidocaine viscous soln (XYLOCAINE HCL (MOUTH-THROAT) equiv)	-	1
FIRST MOUTHWASH BLM	-	3
LIDOCAINE ORAL SOLN	-	NC
ANTI-INFECTIVES - THROAT		
clotrimazole troches (MYCELEX TROCHES equiv)	-	1
nystatin susp	-	1
NYSTATIN SUSP	-	NC

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DrugName	Special Code	Tier
MOUTH/THROAT/DENTAL AGENTS Cont.		
ORAVIG TAB	-	NC
ANTISEPTICS - MOUTH/THROAT		
chlorhexidine gluconate soln (PERIDEX equiv)	-	1
PERIDEX SOLN	-	NC
DENTAL PRODUCTS		
DENTA 5000 CREAM PLUS ($0 copay for members age 5 years and younger; All other members covered at preferred brand copay)	-	$0
sodium fluoride cream (PREVIDENT equiv) ($0 copay for members age 5 years and younger; All other members covered at generic copay)	-	$0
FLUORIDEX SENSITIVITY PASTE	-	1
SODIUM FLUORIDE GEL	-	1
SODIUM FLUORIDE PASTE	-	1
SODIUM FLUORIDE SOLN	-	1
FRAICHE 5000 SENSITIVE GEL	-	NC
PREVIDENT 5000 PASTE 1.1%	-	NC
PREVIDENT 5000 PLUS 1.1%	-	NC
PREVIDENT GEL	-	NC
PREVIDENT SOLN 0.2%	-	NC
STEROIDS - MOUTH/THROAT		
triamcinolone in orabase paste (KENALOG/ORABASE equiv)	-	1
THROAT PRODUCTS - MISC.		
pilocarpine tab (SALAGEN equiv)	-	1
cevimeline cap (EVOXAC equiv)	-	2
EVOXAC CAP	-	NC
GELCLAIR GEL	-	NC
PROTHELIAL PASTE	-	NC
SALAGEN TAB	-	NC
SILATRIX GEL	-	NC
MULTIVITAMINS		
B-COMPLEX VITAMINS		
EB-N3 DR CAP	-	NC
B-COMPLEX W/ FOLIC ACID		
DIALYVITE TAB	-	1
DIALYVITE/ZINC TAB	-	1
FOLBEE PLUS CZ TAB	-	1
ACTIVITE TAB	-	NC
dialyvite tab (NEPHRO-VITE equiv)	-	NC
FIBRIK CAP	-	NC
MYNEPHRON CAP	-	NC
renaphro cap (NEPHROCAP equiv)	-	NC
TERAVAX CAP	-	NC
MULTIPLE VITAMINS W/ MINERALS		
multivitamin/minerals tab (STROVITE equiv)	-	NC
V-C FORTE CAP	-	NC

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MULTIVITAMINS Cont.		
v-c forte cap (V-C FORTE equiv)	-	NC
MULTIVITAMINS		
FOLIKA-V TAB	-	NC
PED MULTI VITAMINS W/FL & FE		
MULTIPLE-VITAMIN/FL-FE DROPS	-	NC
pediatric multiple vitamins/fluoride/iron soln	-	NC
PED MV W/ FLUORIDE		
FLORIVA PLUS DROPS	-	NC
MULTIVITAMIN CHEW TAB	-	NC
pediatric multiple vitamins/fluoride soln	-	NC
POLY-VI-FLOR SUSP	-	NC
TRI-VITAMIN FLUORIDE DROPS	-	NC
PEDIATRIC MULTIPLE VITAMINS & MINERALS W/ FLUORIDE		
FLORIVA CHEW TAB	-	NC
PRENATAL VITAMINS		
CONCEPT DHA CAP	-	1
PRENATABS RX TAB	-	1
PRENATAL 19 CHEW TAB	-	1
PRENATAL 19 TAB	-	1
PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS)	-	1
VP-PNV-DHA CAP	-	1
MYNATAL-Z TAB	-	3
NEONATAL 19 TAB	-	3
NEONATAL FE TAB	-	3
PRENATAL VITAMINS (NON-PREFERRED)	-	3
VITAFOL STRIPS	-	3
AZESCHEW TAB 13-1MG	-	NC
AZESCO TAB	-	NC
CITRANATAL CAP MEDLEY	-	NC
JENLIVA CAP	-	NC
MATERVIA CAP	-	NC
MATRONEX TAB 27-1 MG	-	NC
MULTI-MAC TAB	-	NC
PNV PRENATOL TAB 27-1 MG	-	NC
PREGEN DHA CAP	-	NC
PREGENNA TAB	-	NC
PRENARA CAP	-	NC
PRENATE MAX TAB	-	NC
PRENATOL-M TAB 27-1.2MG	-	NC
PRENATRIX TAB	-	NC
PRENATRYL TAB	-	NC
RELEVIA TAB 27-1MG	-	NC
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		

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MUSCULOSKELETAL THERAPY AGENTS Cont.		
baclofen tab (BACLOFEN equiv)	-	1
carisoprodol tab (SOMA equiv)	-	1
cyclobenzaprine tab 10mg (FLEXERIL equiv)	-	1
cyclobenzaprine tab 5mg (FLEXERIL equiv)	-	1
methocarbamol tab (ROBAXIN equiv)	-	1
orphenadrine citrate ER tab (NORFLEX equiv)	-	1
tizanidine tab (ZANAFLEX equiv)	-	1
chlorzoxazone tab 500mg	-	2
tizanidine cap (ZANAFLEX equiv)	-	2
BACLOFEN ORAL SOLN 10MG/5ML (Prior Authorization required for members age 9 years and older)	PA	3
baclofen oral soln 10mg/5ml (BACLOFEN equiv) (Prior Authorization required for members age 9 years and older)	PA	3
baclofen oral soln 5mg/5ml (Prior Authorization required for members age 9 years and older)	PA	3
baclofen susp (BACLOFEN equiv) (Prior Authorization required for members age 9 years and older)	PA	3
cyclobenzaprine tab 7.5mg (FEXMID equiv)	-	3
LYVISPAH GRANULE PACKET (Prior Authorization required for members age 9 years and older)	PA	3
metaxalone tab (SKELAXIN equiv)	-	3
ATMEKSI SUSP	-	NC
BACLOFEN ORAL SOLN 5 MG/5ML	-	NC
baclofen tab 15mg	-	NC
carisoprodol tab 250mg (SOMA equiv)	-	NC
chlorzoxazone tab	-	NC
CHLORZOXAZONE TAB 250MG, LORZONE TAB	-	NC
CYCLOBENZAPRINE COMPOUND KIT	-	NC
cyclobenzaprine ER cap (AMRIX equiv)	-	NC
FLEQSUVY SUSP	-	NC
METAXALONE TAB	-	NC
methocarbamol tab 1000mg (ROBAXIN equiv)	-	NC
ONTRALFY ORAL SOLN	-	NC
ROBAXIN TAB	-	NC
SKELAXIN TAB	-	NC
SOMA TAB	-	NC
SOMA TAB 250MG	-	NC
ZANAFLEX CAP	-	NC
ZANAFLEX TAB	-	NC
DIRECT MUSCLE RELAXANTS		
dantrolene cap (DANTRIUM equiv)	-	2
DANTRIUM CAP	-	NC
FIBRODYSPLASIA OSSIFICANS PROGRESSIVA (FOP) AGENTS		
SOHONOS CAP 1.5MG	-	NC
SOHONOS CAP 10MG	-	NC
SOHONOS CAP 1MG	-	NC
SOHONOS CAP 2.5MG	-	NC
SOHONOS CAP 5MG	-	NC
MUSCLE RELAXANT COMBINATIONS		
CARISOPRODOL/ASPIRIN TAB	-	NC

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DrugName	Special Code	Tier
MUSCULOSKELETAL THERAPY AGENTS Cont.		
carisoprodol/aspirin tab (SOMA COMPOUND equiv)	-	NC
CARISOPRODOL/ASPIRIN/CODEINE TAB	-	NC
carisoprodol/aspirin/codeine tab (SOMA COMPOUND/CODEINE equiv)	-	NC
LORVATUS PHARMAPAK KIT	-	NC
NORGESIC TAB FORTE	-	NC
TIZANIDINE COMFORT KIT	-	NC
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL AGENT COMBINATIONS		
azelastine/fluticasone nasal spray (DYMISTA equiv)	-	NC
AZENASE PAK	-	NC
RYALTRIS SPRAY	-	NC
NASAL AGENTS - MISC.		
ALZAIR NASAL SPRAY	-	NC
TICANASE PAK	-	NC
NASAL ANESTHETICS		
COCAINE HCL SOLN	-	NC
NASAL ANTIALLERGY		
olopatadine nasal spray (PATANASE equiv)	-	2
ASTELIN NASAL SPRAY, ASTEPRO NASAL SPRAY	-	NC
azelastine nasal spray 0.1% (ASTELIN equiv)	-	NC
azelastine nasal spray 0.15% (ASTEPRO equiv)	-	NC
PATANASE NASAL SPRAY	-	NC
NASAL ANTICHOLINERGICS		
ipratropium nasal spray (ATROVENT equiv)	-	1
NASAL STEROIDS		
fluticasone nasal spray (FLONASE equiv) (QL= 2 bottles/fill)	QL	1
budesonide nasal spray (RHINOCORT AQUA equiv)	OTC	EXC
FLONASE SENSIMIST NASAL SPRAY	OTC	EXC
NASACORT OTC NASAL SPRAY	OTC	EXC
triamcinolone OTC nasal spray (NASACORT equiv)	OTC	EXC
BECONASE AQ NASAL SPRAY	-	NC
flunisolide nasal soln	-	NC
mometasone nasal spray (NASONEX equiv)	-	NC
OMNARIS NASAL SPRAY	-	NC
QNASL NASAL SPRAY	-	NC
XHANCE NASAL EXHALER	-	NC
SYMPATHOMIMETIC DECONGESTANTS		
ADRENALIN SOLN	-	NC
epinephrine hcl nasal soln (ADRENALIN equiv)	-	NC
NEUROMUSCULAR AGENTS		
ALS AGENTS		
riluzole tab (RILUTEK equiv)	-	2
RILUTEK TAB	-	NC
TIGLUTIK SUSP	-	NC

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NEUROMUSCULAR AGENTS Cont.		
FRIEDRICH'S ATAXIA AGENTS		
SKYCLARYS CAP	-	NC
MUSCULAR DYSTROPHY AGENTS		
DUVYZAT ORAL SUSP	-	NC
RETT SYNDROME AGENTS		
DAYBUE SOLN	-	NC
DAYBUE STIX POWDER	-	NC
DAYBUE STIX POWDER 8000MG	-	NC
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
EVRYSDI SOLN (QL= 6.67ml/day)	PA-QL-SP	4
EVRYSDI TAB (QL= 1 tab/day)	PA-QL-SP	4
NUTRIENTS		
LIPIDS		
DOJOLVI ORAL LIQUID	-	NC
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
LACRISERT OPHTH INSERT	-	NC
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL OPHTH SOLN	-	1
betaxolol ophth soln (BETOPTIC-S equiv)	-	1
CARTEOLOL OPHTH SOLN	-	1
carteolol ophth soln (OCUPRESS equiv)	-	1
dorzolamide/timolol (pf) ophth soln (COSOPT equiv)	-	1
LEVOBUNOLOL OPHTH SOLN	-	1
levobunolol ophth soln (BETAGAN equiv)	-	1
timolol maleate ophth soln (TIMOPTIC equiv)	-	1
BETIMOL OPHTH SOLN 0.25%	-	2
BETOPTIC-S OPHTH SOLN	-	2
brimonidine/timolol ophth soln (COMBIGAN equiv)	-	2
DORZOLAMIDE/TIMOLOL OPHTH SOLN	-	2
ISTALOL OPHTH SOLN	-	2
timolol maleate ophth gel (TIMOPTIC-XE equiv)	-	2
timolol maleate ophth soln 0.5% (ISTALOL equiv)	-	2
timolol ophth soln (BETIMOL equiv)	-	2
timolol maleate (pf) ophth soln 0.5% (TIMOPTIC equiv)	-	3
timolol maleate preservative free ophth soln 0.25% (TIMOPTIC equiv)	-	3
BETAGAN OPHTH SOLN	-	NC
COMBIGAN OPHTH SOLN	-	NC
COSOPT (PF) OPHTH SOLN	-	NC
ISTALOL OPHTH SOLN 0.5%	-	NC
TIMOPTIC OCUDOSE OPHTH SOLN 0.25%	-	NC
TIMOPTIC OCUDOSE OPHTH SOLN 0.5%	-	NC
TIMOPTIC OPHTH SOLN	-	NC
TIMOPTIC-XE OPHTH GEL	-	NC

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OPHTHALMIC AGENTS Cont.

DrugName	Special Code	Tier
CHOLINERGIC AGONISTS		
TYRVAYA NASAL SPRAY	-	NC
CYCLOPLEGIC MYDRIATICS		
ALTAFRIN OPHTH SOLN	-	1
atropine ophth oint	-	1
atropine ophth soln (ISOPTO ATROPINE equiv)	-	1
ATROPINE SULFATE OPHTH OINT	-	1
cyclopentolate ophth soln (CYCLOGYL equiv)	-	1
phenylephrine ophth soln (MYDFRIN equiv)	-	1
tropicamide ophth soln (MYDRIACYL equiv)	-	1
CYCLOMYDRIL OPHTH SOLN	-	2
HOMATROPINE OPHTH SOLN	-	2
CYCLOGYL OPHTH SOLN	-	3
ATROPINE SUL SOLN 1% OPHTH	-	NC
CYCLOGYL OPHTH SOLN	-	NC
MYDCOMBI OPHTH SOLN	-	NC
MYDRIACYL OPHTH SOLN	-	NC
TROPICAMIDE/CYCLOPENT/KETOROLAC/PE OPHTH SOLN	-	NC
MIOTICS		
pilocarpine ophth soln (ISOPTO CARPINE equiv)	-	1
ISOPTO CARPINE OPHTH SOLN	-	NC
PHOSPHOLINE OPHTH SOLN	-	NC
pilocarpine hcl ophth soln 1.25% (VUITY equiv)	-	NC
QLOSI OPHTH SOLN, VUITY OPHTH SOLN	-	NC
VIZZ OPHTH SOLN	-	NC
VUITY OPHTH SOLN 1.25%	-	NC
YUVEZZI SOLN	-	NC
OPHTHALMIC ADRENERGIC AGENTS		
brimonidine ophth soln 0.2%	-	1
APRACLONIDINE OPHTH SOLN	-	2
apraclonidine ophth soln (IOPIDINE equiv)	-	2
brimonidine ophth soln 0.15% (ALPHAGAN P 0.15% equiv)	-	2
brimonidine tartrate ophth soln 0.1% (ALPHAGAN equiv)	-	2
IOPIDINE OPHTH SOLN	-	2
SIMBRINZA OPHTH SUSP	-	2
ALPHAGAN P OPHTH SOLN 0.15%	-	NC
IOPIDINE OPHTH SOLN	-	NC
OPHTHALMIC ANTI-INFECTIVES		
BACIT/POLYMY OPHTH OINT	-	1
bacitracin/neomycin/polymyxin b ophth oint (NEOSPORIN equiv)	-	1
bacitracin/polymyxin b ophth oint (POLYSPORIN equiv)	-	1
ciprofloxacin ophth soln (CILOXAN equiv)	-	1
erythromycin ophth oint	-	1
GENTAK OPHTH OINT	-	1
gentamicin ophth soln (GARAMYCIN equiv)	-	1

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DrugName	Special Code	Tier
OPHTHALMIC AGENTS Cont.		
levofloxacin ophth soln (QUIXIN equiv)	-	1
LEVOFLOXACIN OPHTH SOLN 0.5%	-	1
moxifloxacin ophth soln (VIGAMOX OPHTH SOLN equiv)	-	1
NEO/BAC/POLY OPHTH OINT	-	1
NEOMYCIN/POLYMIXIN/GRAMICIDIN OPHTH SOLN	-	1
ofloxacin ophth soln (OCUFLOX equiv)	-	1
polymyxin b/trimethoprim ophth soln (POLYTRIM equiv)	-	1
SULFACETAMIDE SOD OPHTH SOLN	-	1
sulfacetamide sodium ophth soln (BLEPH-10 equiv)	-	1
tobramycin ophth soln (TOBREX equiv)	-	1
AZASITE SOLN	-	2
BACITRACIN OPHTH OINT	-	2
NATACYN OPHTH SUSP (QL= 15ml/fill)	QL	2
TRIFLURIDINE OPHTH SOLN	-	2
ZIRGAN OPHTH GEL	-	2
CILOXAN OPHTH OINT	-	3
gatifloxacin ophth soln (ZYMAXID equiv)	-	3
TOBREX OPHTH OINT	-	3
BESIFLOXACIN OPHTH SUSP, BESIVANCE OPHTH SUSP	-	NC
BLEPH-10 OPHTH SOLN	-	NC
CILOXAN OPHTH SOLN	-	NC
ERYTHROMYCIN OPHTH OINT	-	NC
LEVOFLOXACIN OPHTH SOLN	-	NC
MOXEZA OPHTH SOLN 0.5%	-	NC
MOXEZA OPHTH SOLN, MOXIFLOXACIN OPHTH SOLN, VIGAMOX OPHTH SOLN	-	NC
MOXIFLOXACIN SOLN	-	NC
NEOSPORIN OPHTH SOLN	-	NC
OCUFLOX OPHTH SOLN	-	NC
POLYTRIM OPHTH SOLN	-	NC
TOBREX OPHTH SOLN	-	NC
VIGAMOX OPHTH SOLN	-	NC
XDEMVY DROP	-	NC
ZYMAXID OPHTH SOLN	-	NC
OPHTHALMIC IMMUNOMODULATORS		
cyclosporine ophth emulsion (RESTASIS equiv) (QL= 60 vials/30 days; Restricted to Ophthalmology or Optometry Specialist)	QL-RS	1
CEQUA (PF) OPHTH SOLN (Restricted to ophthalmology or optometry specialist)	RS	2
CYCLOSPORINE OPHTH EMULSION 0.1%	-	NC
RESTASIS OPHTH EMULSION	-	NC
VEVYE OPHTH SOLN	-	NC
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA OPHTH SOLN	-	NC
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA OPHTH SOLN	-	NC
ROCKLATAN OPHTH SOLN	-	NC

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OPHTHALMIC AGENTS Cont.		
OPHTHALMIC LOCAL ANESTHETICS		
proparacaine ophth soln (ALCAINE equiv)	-	1
tetracaine hcl ophth soln	-	1
TETRACAINE OPHTH SOLN	-	1
ALCAINE OPHTH SOLN	-	NC
IHEEZO GEL	-	NC
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE OPHTH SOLN (QL= 8 kits/affected eye/lifetime)	PA-QL-SP	4
OPHTHALMIC PHOTOENHANCERS		
PHOTREXA OP KIT	-	NC
OPHTHALMIC STEROIDS		
fluorometholone ophth soln (FML LIQUIFILM equiv)	-	1
NEO/POLY/BAC/HC OPHTH OINT	-	1
neomycin/polymyxin/dexamethasone ophth oint (MAXITROL equiv)	-	1
neomycin/polymyxin/dexamethasone ophth soln (MAXITROL equiv)	-	1
NEOMYCIN/POLYMYXIN/HYDROCORTISONE OPHTH SOLN	-	1
prednisolone acetate ophth susp (PRED FORTE equiv)	-	1
PREDNISOLONE OPHTH SUSP	-	1
PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN	-	1
sulfacetamide sodium/prednisolone ophth soln (VASOCIDIN equiv)	-	1
tobramycin/dexamethasone ophth soln (TOBRADEX equiv)	-	1
ALREX OPHTH SUSP	-	2
difluprednate ophth emulsion (DUREZOL equiv)	-	2
LOTEMAX OPHTH OINT	-	2
loteprednol etabonate ophth gel (LOTEMAX equiv)	-	2
loteprednol ophth susp (LOTEMAX, ALREX equiv)	-	2
MAXIDEX OPHTH SOLN	-	2
PRED MILD OPHTH SOLN	-	2
TOBRADEX OPHTH OINT	-	2
FLAREX OPHTH SUSP	-	3
FML FORTE OPHTH SUSP	-	3
PRED FORTE OPHTH SUSP	-	3
TOBRADEX ST OPHTH SUSP	-	3
ALREX SUSP	-	NC
BYQLOVI OPHTH SUSP	-	NC
BYQLOVI SUSP	-	NC
DEXTENZA OPHTH INSERT	-	NC
DUREZOL OPHTH EMULSION	-	NC
EYSUVIS OPHTH SUSP	-	NC
FML LIQUIFLIM OPHTH SUSP	-	NC
INVELTYS OPHTH SUSP	-	NC
KLARITY-B DROPS	-	NC
KLARITY-L DROPS	-	NC
LOTEMAX GEL	-	NC
LOTEMAX SM GEL 0.38%	-	NC

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OPHTHALMIC AGENTS Cont.		
loteprednol etabonate-tobramycin ophth susp (ZYLET equiv)	-	NC
MAXITROL OPHTH OINT	-	NC
MAXITROL OPHTH SUSP	-	NC
PRED FORTE OPHTH SUSP	-	NC
PREDNISOLONE/MOXIFLOXACIN OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN OPHTH SUSP	-	NC
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN/BROMFENAC OPHTH SUSP	-	NC
PREDNISOLONE/MOXIFLOXACIN/KETOROLAC OPHTH SOLN	-	NC
PREDNISOLONE/MOXIFLOXACIN/NEPAFENAC OPHTH SUSP	-	NC
PREDNISOLONE/NEPAFENAC OPHTH SUSP	-	NC
TOBRADEX OPHTH SOLN	-	NC
ZYLET OPHTH SUSP	-	NC
OPHTHALMIC SURGICAL AIDS		
DUOVISC KIT	-	NC
OPHTHALMICS - MISC.		
azelastine ophth soln (OPTIVAR equiv)	-	1
cromolyn ophth soln (CROLOM equiv)	-	1
CROMOLYN SODIUM OPHTH SOLN	-	1
diclofenac sodium ophth soln (VOLTAREN equiv)	-	1
dorzolamide ophth soln (TRUSOPT equiv)	-	1
ketorolac ophth soln (ACULAR (LS) equiv)	-	1
KETOROLAC TROMETHAMINE OPHTH SOLN	-	1
brinzolamide ophth susp (AZOPT equiv)	-	2
bromfenac ophth soln (BROMDAY equiv)	-	2
FLURBIPROFEN OPHTH SOLN	-	2
ILEVRO OPHTH SUSP	-	2
NEVANAC OPHTH SUSP	-	2
ACUVAIL OPHTH SOLN	-	3
bepotastine ophth soln (BEPREVE equiv)	-	3
epinastine opthth soln (ELESTAT equiv)	-	3
CYSTADROPS SOLN (QL = 4 bottles/28 days; Restricted to Ophthalmology Specialist)	QL-RS-SP	4
CYSTARAN OPHTH SOLN (QL= 4 bottles/28 days; Restricted to Ophthalmology or Optometry Specialist)	QL-RS-SP	4
UPNEEQ SOLN	-	EXC
ACULAR (LS) OPHTH SOLN	-	NC
ACULAR (LS) OPHTH SOLN 0.4%	-	NC
ALOCRIL OPHTH SOLN	-	NC
AZOPT OPHTH SUSP	-	NC
BEPREVE OPHTH SOLN	-	NC
ELESTAT OPHTH SOLN	-	NC
MIEBO OPHTH SOLN	-	NC
olopatadine ophth soln (PATANOL equiv)	-	NC
OMLONTI OPHTH SOLN	-	NC
PROLENSA OPHTH SOLN	-	NC
TRUSOPT OPHTH SOLN	-	NC

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DrugName	Special Code	Tier
OPHTHALMIC AGENTS Cont.		
TRYPTYR SOLN	-	NC
ZERVIATE OPHTH SOLN	-	NC
PROSTAGLANDINS - OPHTHALMIC		
latanoprost ophth soln (XALATAN equiv) (QL= 2.5ml/30 days)	QL	1
bimatoprost ophth soln (LUMIGAN equiv) (QL= 2.5ml/30 days)	QL	2
travoprost ophth soln (TRAVATAN Z equiv) (QL= 2.5ml/30 days)	QL	2
BIMATOPROST OPHTH SOLN	-	NC
IYUZEH OPHTH DROPS	-	NC
LUMIGAN OPHTH SOLN	-	NC
tafluprost preservative free (pf) ophth soln (ZIOPTAN OPHTH SOLN equiv)	-	NC
TRAVATAN Z DROPS	-	NC
VYZULTA SOLN	-	NC
XALATAN OPHTH SOLN	-	NC
XELPROS OPHTH EMULSION	-	NC
ZIOPTAN OPHTH SOLN	-	NC
ZOLYMBUS OPHTH GEL	-	NC
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
acetic acid otic soln (VOSOL equiv)	-	1
OTIC ANTIFUNGALS		
CLOTIC SOLN	-	NC
OTIC ANTI-INFECTIVES		
ofloxacin otic soln (FLOXIN equiv)	-	1
ciprofloxacin hcl otic soln (CETRAXAL equiv)	-	2
XTORO OTIC SUSP	-	NC
OTIC COMBINATIONS		
neomycin/polymixin/hydrocoritisone otic soln (CORTISPORIN equiv)	-	1
neomycin/polymixin/hydrocoritisone otic susp (CORTISPORIN equiv)	-	1
ciprofloxacin/dexamethasone otic susp (CIPRODEX equiv)	-	2
COLY-MYCIN S OTIC SUSP	-	2
CIPRO HC OTIC SUSP	-	3
ciprofloxacin-hydrocortisone otic susp (CIPRO HC equiv)	-	3
antipyrine/benzocaine otic soln (AURALGAN equiv)	-	NC
CIPRODEX OTIC SUSP	-	NC
CORTANE-B OTIC SOLN	-	NC
CORTIC-ND DROPS	-	NC
otomax-HC otic soln (CORTANE-B equiv)	-	NC
OTOVEL OTIC SOLN, CIPROFLOXACIN/FLUOCINOLONE OTIC SOLN	-	NC
OTIC STEROIDS		
acetic acid/hydrocortisone otic soln (VOSOL HC equiv)	-	1
fluocinolone otic oil (DERMOTIC equiv)	-	2
DERMOTIC OIL	-	NC
OXYTOCICS		
ABORTIFACIENTS/AGENTS FOR CERVICAL RIPENING		

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DrugName	Special Code	Tier
OXYTOCICS Cont.		
MPM PAK	-	EXC
OXYTOCICS		
methylergonovine tab (METHERGINE equiv) (QL= 28 tabs/fill, 1 fill/365 days)	QL	2
PASSIVE IMMUNIZING AGENTS		
IMMUNE SERUMS		
HIZENTRA INJ	PA-SP	4
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA INJ	PA-SP	4
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
HIZENTRA INJ	PA-SP	4
XEMBIFY INJ	PA-SP	4
CUTAQUIG INJ	-	NC
MONOCLONAL ANTIBODIES		
BEYFORTUS INJ	VAC	$0
ENFLONSIA INJ	VAC	$0
PENICILLINS		
AMIDINOPENICILLINS		
PIVYA TAB	-	NC
AMINOPENICILLINS		
amoxicillin cap (TRIMOX equiv)	-	1
AMOXICILLIN CHEW	-	1
amoxicillin susp (TRIMOX equiv)	-	1
amoxicillin tab (AMOXIL equiv)	-	1
ampicillin cap (AMPICILLIN equiv)	-	1
MOXATAG TAB	-	NC
MOXATAG TAB 775MG	-	NC
NATURAL PENICILLINS		
penicillin vk tab (VEETIDS equiv)	-	1
PENICILLN VK SOLN	-	1
PENICILLN VK SOLN 125MG/5ML	-	NC
PENICILLN VK SOLN 250MG/5ML	-	NC
PENICILLIN COMBINATIONS		
amoxicillin/clavulanate susp (AUGMENTIN ES equiv)	-	1
amoxicillin/clavulanate tab (AUGMENTIN equiv)	-	1
AMOXICILLIN/CLAVULANATE CHEW TAB	-	2
amoxicillin/k clavulanate er tab (AMOXICILLIN/CLAVULANATE equiv)	-	3
AUGMENTIN ES-600 SUSP	-	NC
AUGMENTIN TAB	-	NC
PENICILLINASE-RESISTANT PENICILLINS		
dicloxacillin cap (DYNAPEN equiv)	-	1
PHARMACEUTICAL ADJUVANTS		
LIQUID VEHICLES		

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DrugName	Special Code	Tier
PHARMACEUTICAL ADJUVANTS Cont.		
TRICHOSOL SOLN	-	NC
SEMI SOLID VEHICLES		
POLYETHYLENE GLYCOL 8000 GRANULES	-	2
VERSAPENN AL GEL ANHYDROU	-	NC
PROGESTINS		
PROGESTINS		
medroxyprogesterone tab (PROVERA equiv)	-	1
norethindrone tab (AYGESTIN equiv)	-	1
progesterone cap (PROMETRIUM equiv)	-	1
progesterone oil inj	-	1
megestrol ES susp (MEGACE ES equiv)	-	3
MEGESTROL SUSP	-	3
AYGESTIN TAB	-	NC
PROMETRIUM CAP	-	NC
PROVERA TAB	-	NC
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
disulfiram tab (ANTABUSE equiv)	-	1
acamprosate calcium DR tab (CAMPRAL equiv)	-	2
lofexidine hcl tab (LUCEMYRA equiv) (QL= 96 tabs/7 days)	PA-QL	3
ANTABUSE TAB	-	NC
disulfiram tab 500mg	-	NC
LUCEMYRA TAB	-	NC
ANTI-CATAPLECTIC AGENTS		
sodium oxybate oral soln (XYREM equiv) (QL= 540ml/30 days)	PA-QL-SP	1
SODIUM OXYBATE SOLN (QL= 540ml/30 days)	PA-QL-SP	4
LUMRYZ PACK	-	NC
LUMRYZ STARTER PACK	-	NC
XYREM SOLN	-	NC
XYWAV SOLN	-	NC
ANTIDEMENTIA AGENTS		
donepezil ODT (ARICEPT equiv) (QL= 1 tab/day)	QL	1
donepezil tab (ARICEPT equiv) (QL= 2 tabs/day)	QL	1
galantamine tab (RAZADYNE equiv)	-	1
memantine tab (NAMENDA equiv)	-	1
MEMANTINE TITRATION PAK	-	1
rivastigmine cap (EXELON equiv)	-	1
donepezil tab 23mg (ARICEPT equiv) (QL= 1 tab/day)	QL	2
galantamine ER cap (RAZADYNE ER equiv)	-	2
GALANTAMINE SOLN	-	2
memantine ER cap (NAMENDA XR equiv)	-	2
memantine soln (NAMENDA equiv)	-	2
NAMENDA XR TITRATION PACK	-	2
rivastigmine patch (EXELON equiv)	-	2

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PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
ADLARITY PATCH	-	NC
ARICEPT TAB	-	NC
ARICEPT TAB 23MG	-	NC
EXELON PATCH	-	NC
LEQEMBI IQLIK INJ 250MG/1.25ML	-	NC
LEQEMBI IQLK INJ	-	NC
memantine hcl-donepezil hcl 24hr er cap (NAMZARIC equiv)	-	NC
NAMENDA TAB	-	NC
NAMENDA XR CAP	-	NC
NAMZARIC CAP	-	NC
NAMZARIC STARTER PACK	-	NC
RAZADYNE SOLN	-	NC
RAZADYNE TAB	-	NC
ZUNVEYL TAB	-	NC
COMBINATION PSYCHOTHERAPEUTICS		
PERPHENAZINE/ AMITRIPTYLINE TAB	-	1
olanzapine/fluoxetine cap (SYMBYAX equiv)	-	2
CHLORDIAZEPOXIDE/AMITRIPTYLINE TAB	-	NC
DULOXICAINE PACK	-	NC
LYBALVI TAB	-	NC
SYMBYAX CAP	-	NC
FIBROMYALGIA AGENTS		
milnacipran hcl tab (SAVELLA equiv) (QL= 2 tabs/day)	QL	2
milnacipran hcl tab pak (SAVELLA equiv)	-	2
SAVELLA PAK	-	3
SAVELLA TAB (QL= 2 tabs/day)	QL	3
TONMYA SL TAB	-	NC
HYPOACTIVE SEXUAL DESIRE DISORDER (HSDD) AGENTS		
ADDYI TAB	-	NC
VYLEESI INJ	-	NC
MOVEMENT DISORDER DRUG THERAPY		
tetrabenazine tab (XENAZINE equiv)	SP	1
AUSTEDO TAB	-	NC
AUSTEDO TITRATION PACK	-	NC
AUSTEDO XR TAB	-	NC
AUSTEDO XR TAB TITRATION KIT	-	NC
AUSTEDO XR TITRATION PACK	-	NC
INGREZZA CAP	-	NC
INGREZZA PACK 40-80MG	-	NC
INGREZZA SPRINKLE CAP	-	NC
XENAZINE TAB	-	NC
MULTIPLE SCLEROSIS AGENTS		
cladribine tab therapy pack (MAVENCLAD equiv)	SP	1
dalfampridine ER tab (AMPYRA equiv)	SP	1
dimethyl fumarate DR cap (TECFIDERA equiv)	SP	1

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PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
dimethyl fumarate DR starter pack (TECFIDERA STARTER PACK equiv)	SP	1
fingolimod hcl cap 0.5mg (GILENYA equiv) (QL= 1 cap/day)	QL-SP	1
teriflunomide tab (AUBAGIO equiv)	SP	1
AVONEX INJ	SP	4
BETASERON INJ	SP	4
GILENYA CAP 0.25MG (QL= 1 cap/day)	QL-SP	4
glatiramer inj (COPAXONE equiv)	SP	4
KESIMPTA INJ	SP	4
MAYZENT TAB	SP	4
MAYZENT TAB STARTER PACK	SP	4
PLEGRIDY INJ	SP	4
PLEGRIDY PEN INJ	SP	4
REBIF INJ	SP	4
ZEPOSIA CAP (QL= 1 cap/day)	PA-QL-SP	4
ZEPOSIA STARTER PACK (QL= 1 cap/day)	PA-QL-SP	4
AUBAGIO TAB	-	NC
BAFIERTAM CAP	-	NC
EXTAVIA INJ	-	NC
GILENYA CAP 0.5MG	-	NC
MAVENCLAD THERAPY PAK	-	NC
PONVORY TAB	-	NC
PONVORY TAB STARTER PACK	-	NC
TASCENSO ODT TAB	-	NC
TECFIDERA CAP	-	NC
TECFIDERA STARTER PACK	-	NC
VUMERITY CAP	-	NC
ZINBRYTA INJ	-	NC
POSTHERPETIC NEURALGIA (PHN)/NEUROPATHIC PAIN AGENTS		
gabapentin (once-daily) tab (GRALISE equiv)	-	NC
GRALISE TAB	-	NC
LIDOTIN PAK	-	NC
pregabalin ER tab (LYRICA CR equiv)	-	NC
PREMENSTRUAL DYSPHORIC DISORDER (PMDD) AGENTS		
FLUOXETINE CAP (PMDD)	-	NC
SARAFEM TAB	-	NC
PSEUDOBULBAR AFFECT (PBA) AGENTS		
dextromethorphan hbr-quinidine sulfate cap (NUEDEXTA equiv) (QL= 2 caps/day)	PA-QL	2
NUEDEXTA CAP	-	NC
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
pimozide tab (ORAP equiv)	-	2
AQNEURSA PACKET FOR SUSPENSION	-	NC
ERGOLOID MESYLATES TAB	-	NC
MIPLYFFA CAP	-	NC
ORAP TAB	-	NC
RESTLESS LEG SYNDROME (RLS) AGENTS		

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DrugName	Special Code	Tier
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
HORIZANT TAB	-	NC
SMOKING DETERRENTS		
bupropion SR tab (ZYBAN equiv) (Limited to 180 days/plan year)	QL-SMKG	$0
NICOTINE KIT	OTC-QL-SMKG	$0
nicotine patch (NICODERM equiv) (Limited to 180 days/plan year)	OTC-QL-SMKG	$0
VARENICLINE TAB (Limited to 180 days/plan year)	QL-SMKG	$0
varenicline tartrate tab (CHANTIX equiv) (Limited to 180 days/plan year)	QL-SMKG	$0
varenicline tartrate tab starter pack (CHANTIX equiv) (Limited to 180 days/plan year)	QL-SMKG	$0
CHANTIX STARTER PACK	SMKG	NC
NICODERM PATCH	OTC-SMKG	NC
NICORETTE GUM	OTC-SMKG	NC
NICORETTE LOZENGE	OTC-SMKG	NC
nicotine gum (NICORETTE equiv)	OTC-SMKG	NC
nicotine lozenge (COMMIT equiv)	OTC-SMKG	NC
NICOTROL INHALER	SMKG	NC
NICOTROL NASAL SPRAY	SMKG	NC
ZYBAN TAB	SMKG	NC
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
WAINUA INJ	-	NC
VASOMOTOR SYMPTOM AGENTS		
BRISDELLE CAP	-	NC
paroxetine cap (BRISDELLE equiv)	-	NC
RESPIRATORY AGENTS - MISC.		
CYSTIC FIBROSIS AGENTS		
ALYFTREK TAB (QL= 2 tabs/day)	PA-QL-SP	4
ALYFTREK TAB 4-20-50MG (QL= 3 tabs/day)	PA-QL-SP	4
KALYDECO PAK (QL= 2 packets/day)	PA-QL-SP	4
KALYDECO TAB (QL= 2 tabs/day)	PA-QL-SP	4
ORKAMBI GRANULES PACKET (QL= 2 packets/day)	PA-QL-SP	4
ORKAMBI TAB (QL= 4 tabs/day)	PA-QL-SP	4
PULMOZYME INH SOLN	SP	4
SYMDEKO TAB (QL= 2 tabs/day)	PA-QL-SP	4
TRIKAFTA TAB (QL= 84 tabs/28 days)	PA-QL-SP	4
TRIKAFTA THERAPY PACK (QL= 2 packets/day)	PA-QL-SP	4
BRONCHITOL CAP	-	NC
PULMONARY FIBROSIS AGENTS		
nintedanib esylate cap (OFEV equiv) (QL= 2 caps/day)	PA-QL-SP	1
pirfenidone cap (ESBRIET equiv) (QL= 9 caps/day)	PA-QL-SP	1
pirfenidone tab 267mg (ESBRIET equiv) (QL= 9 tabs/day)	PA-QL-SP	1
pirfenidone tab 801mg (ESBRIET equiv) (QL= 3 tabs/day)	PA-QL-SP	1
ESBRIET CAP	-	NC
ESBRIET TAB	-	NC
JASCAYD TAB	-	NC
OFEV CAP	-	NC
PIRFENIDONE TAB	-	NC

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DrugName	Special Code	Tier
RESPIRATORY AGENTS - MISC. Cont.		
RESPIRATORY AGENTS - MISC.		
BRINSUPRI TAB	-	NC
SULFONAMIDES		
SULFONAMIDES		
sulfadiazine tab	-	3
TETRACYCLINES		
AMINOMETHYLCYCLINES		
NUZYRA TAB (QL= 30 tabs/180 days; Restricted to Infectious Disease or Pulmonology Specialist)	QL-RS-SP	4
TETRACYCLINES		
doxycycline hyclate cap (VIBRAMYCIN equiv)	-	1
doxycycline hyclate tab (VIBRATAB equiv)	-	1
doxycycline monohydrate cap (MONODOX equiv)	-	1
doxycycline monohydrate tab (ADOXA equiv)	-	1
minocycline cap (MINOCIN equiv)	-	1
doxycycline susp (VIBRAMYCIN equiv)	-	2
minocycline tab (DYNACIN equiv)	-	2
demeclocycline tab (DECLOMYCIN equiv)	-	3
tetracycline cap	-	3
ACTICLATE TAB 75MG, 150MG	-	NC
DORYX MPC TAB	-	NC
DOXYCYCLINE HYCLATE CAP	-	NC
doxycycline hyclate DR tab (DORYX equiv)	-	NC
doxycycline hyclate tab (TARGADOX equiv)	-	NC
doxycycline hyclate tab 75mg, 150mg	-	NC
doxycycline hyclate tab 75mg, 150mg (ACTICLATE equiv)	-	NC
doxycycline monohydrate cap 150mg (MONODOX equiv)	-	NC
doxycycline monohydrate cap 75mg (MONODOX equiv)	-	NC
doxycycline monohydrate tab 150mg (ADOXA equiv)	-	NC
DYNACIN TAB	-	NC
MINOCIN CAP	-	NC
MINOCYCLINE ER CAP	-	NC
minocycline ER tab (SOLODYN equiv)	-	NC
MINOLIRA TAB	-	NC
MONODOX CAP	-	NC
SEYSARA TAB	-	NC
TETRACYCLINE TAB	-	NC
VIBRAMYCIN CAP	-	NC
VIBRAMYCIN SUSP	-	NC
THYROID AGENTS		
ANTITHYROID AGENTS		
methimazole tab (TAPAZOLE equiv)	-	1
propylthiouracil tab	-	1
SODIUM IODIDE I-131 SOLN	-	NC
TAPAZOLE TAB	-	NC

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DrugName	Special Code	Tier
THYROID AGENTS Cont.		
THYROID HORMONES		
levothyroxine tab (SYNTHROID equiv)	-	1
liothyronine tab (CYTOMEL equiv)	-	1
SYNTHROID TAB	-	2
TIROSINT-SOL (QL= 1ml/day; Prior Authorization required for members age 9 years and older)	PA-QL	3
ARMOUR THYROID TAB, NATURE THYROID TAB	-	NC
CYTOMEL TAB	-	NC
ERMEZA SOLN 150 MCG/5ML	-	NC
LEVOTHYROXINE INJ	-	NC
LEVOTHYROXINE INJ 100MCG/ML	-	NC
THYQUIDITY SOLN	-	NC
TIROSINT CAP	-	NC
TOXOIDS		
TOXOID COMBINATIONS		
ADACEL/BOOSTRIX INJ	VAC	$0
DAPTACEL INJ, INFANRIX INJ	VAC	$0
DIPTHERIA/TETANUS TOXOID (PEDIATRIC) INJ	VAC	$0
KINRIX INJ, QUADRACEL DTAP-IPV INJ	VAC	$0
KINRIX PREF SYRINGE, QUADRACEL PREF SYRINGE	VAC	$0
PEDIARIX INJ	VAC	$0
PENTACEL INJ	VAC	$0
TETANUS/DIPHTHERIA TOXOID INJ	VAC	$0
VAXELIS INJ	VAC	$0
ULCER DRUGS		
ANTISPASMODICS		
dicyclomine cap (BENTYL equiv)	-	1
dicyclomine tab (BENTYL equiv)	-	1
hyoscyamine sulfate CR tab (LEVBID equiv)	-	1
hyoscyamine sulfate ODT (ANASPAZ equiv)	-	1
hyoscyamine sulfate SL tab (LEVSIN equiv)	-	1
hyoscyamine tab (LEVSIN equiv)	-	1
BELLADONNA ALKALOID/OPIUM SUPP	-	2
chlordiazepoxide/clidinium cap (LIBRAX equiv)	-	2
dicyclomine soln (BENTYL equiv)	-	2
glycopyrrolate tab (ROBINUL equiv)	-	2
methscopolamine tab (PAMINE equiv)	-	3
ANASPAZ ODT	-	NC
b-donna tab (DONNATAL equiv)	-	NC
BENTYL CAP	-	NC
BENTYL SYRUP	-	NC
GLYCATE TAB, GLYCOPYRROLATE TAB	-	NC
LIBRAX CAP	-	NC
ROBINUL TAB	-	NC
H-2 ANTAGONISTS		
cimetidine soln (CIMETIDINE equiv)	-	1

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DrugName	Special Code	Tier
ULCER DRUGS Cont.		
cimetidine tab (TAGAMET equiv) (Rx Only)	-	1
famotidine tab (PEPCID equiv) (Rx Only)	-	1
nizatidine cap (AXID equiv)	-	1
famotidine susp (PEPCID equiv)	-	2
AXID CAP	-	NC
PEPCID SUSP	-	NC
PEPCID TAB	-	NC
MISC. ANTI-ULCER		
sucralfate tab (CARAFATE equiv)	-	1
CARAFATE TAB	-	NC
PROTON PUMP INHIBITORS		
esomeprazole cap (NEXIUM equiv) (Rx Only)	-	1
lansoprazole cap (PREVACID equiv) (Rx Only)	-	1
omeprazole DR cap (PRILOSEC equiv)	-	1
pantoprazole EC tab (PROTONIX equiv)	-	1
rabeprazole EC tab (ACIPHEX equiv)	-	1
ACIPHEX SPRINKLE CAP	-	NC
ACIPHEX TAB	-	NC
FIRST OMEPRAZOLE SUSP	-	NC
LANSOPRAZOLE SUSP	-	NC
NEXIUM CAP	-	NC
PREVACID CAP	-	NC
PRILOSEC CAP	-	NC
PROTONIX EC TAB	-	NC
ULCER DRUGS - PROSTAGLANDINS		
misoprostol tab (CYTOTEC equiv)	-	1
CYTOTEC TAB	-	NC
ULCER THERAPY COMBINATIONS		
omeprazole/sodium bicarbonate cap (ZEGERID equiv)	-	NC
omeprazole/sodium bicarbonate powder pack (ZEGERID equiv)	-	NC
ZEGERID POWDER PACK	-	NC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
HYOSCYAMINE ELXIR	-	1
HYOSCYAMINE SULFATE ER TAB	-	1
HYOSCYAMINE SULFATE SL TAB	-	1
HYOSCYAMINE TAB	-	1
CHLORDIAZEPOXIDE/CLIDINIUM CAP	-	2
glycopyrrolate oral soln (CUVPOSA equiv)	-	3
CUVPOSA SOLN	-	NC
DARTISLA ODT TAB	-	NC
DERMACINRX TAB	-	NC
DICYCLOMINE TAB	-	NC
DONNATAL ELIXIR, PB-BELLADONNA ELIXIR	-	NC
DONNATAL TAB	-	NC

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ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS Cont.		
GLYCATE TAB	-	NC
HYOSCYAMINE INJ	-	NC
LEVBID ER TAB 0.375MG	-	NC
LEVSIN SL TAB 0.125MG	-	NC
LEVSIN TAB 0.125MG	-	NC
H-2 ANTAGONISTS		
NIZATIDINE CAP	-	1
RANITIDINE TAB	-	NC
MISC. ANTI-ULCER		
sucralfate susp (CARAFATE equiv)	-	2
CARAFATE SUSP	-	NC
PROTON PUMP INHIBITORS		
omeprazole tab	OTC	EXC
DEXILANT DR CAP	-	NC
dexlansoprazole DR cap (DEXILANT equiv)	-	NC
esomeprazole DR granule pack (NEXIUM equiv)	-	NC
FIRST PANTOPRAZOLE SUSP	-	NC
lansoprazole odt (PREVACID SOLUTAB equiv)	-	NC
pantoprazole sodium packet (PROTONIX equiv)	-	NC
VOQUEZNA TAB	-	NC
ULCER THERAPY COMBINATIONS		
bismuth/metro/tetra cap (PYLERA equiv)	-	NC
HELIDAC PACK	-	NC
KONVOMEP SUSP	-	NC
lansoprazole/amoxicillin/clarithromycin kit (PREVPAC equiv)	-	NC
LANSOPRAZOLE/AMOXICILLIN/CLARITHTHROMYCIN KIT	-	NC
PYLERA CAP	-	NC
TALICIA CAP	-	NC
VOQUEZNA DUAL PAK	-	NC
VOQUEZNA TRIP PAK	-	NC
URINARY ANTI-INFECTIVES		
URINARY ANTI-INFECTIVE COMBINATIONS		
PROSED DS TAB	-	NC
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLIN) (NEW)		
trospium chloride SR cap (SANCTURA XR equiv)	-	2
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
fesoterodine fumarate ER tab (TOVIAZ equiv)	-	1
oxybutynin ER tab (DITROPAN XL equiv)	-	1
oxybutynin syrup	-	1
oxybutynin tab (DITROPAN equiv)	-	1
solifenacin tab (VESICARE equiv)	-	1
tolterodine SR cap (DETROL LA equiv)	-	1
tolterodine tab (DETROL equiv)	-	1

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DrugName	Special Code	Tier
URINARY ANTISPASMODICS Cont.		
trospium tab (SANCTURA equiv)	-	1
darifenacin SR tab (ENABLEX equiv)	-	2
DETROL LA CAP	-	NC
DETROL TAB	-	NC
DITROPAN XL TAB	-	NC
ENABLEX TAB	-	NC
oxybutynin tab 2.5mg	-	NC
TOVIAZ TAB	-	NC
VESICARE LS SUSP	-	NC
VESICARE TAB	-	NC
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
MYRBETRIQ TAB	-	2
GEMTESA TAB	-	NC
mirabegron granules for oral extended release susp (MYRBETRIQ equiv)	-	NC
mirabegron tab er (MYRBETRIQ equiv)	-	NC
MYRBETRIQ SUSP	-	NC
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
bethanechol tab (URECHOLINE equiv)	-	1
URECHOLINE TAB	-	NC
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS (NEW)		
flavoxate tab (URISPAS equiv)	-	NC
VACCINES		
BACTERIAL VACCINES		
ACTHIB INJ, HIBERIX INJ	VAC	$0
BCG INJ	VAC	$0
BEXSERO INJ	VAC	$0
CAPVAXIVE INJ	VAC	$0
MENACTRA INJ	VAC	$0
MENQUADFI INJ	VAC	$0
MENVEO INJ	VAC	$0
PEDVAXHIB INJ	VAC	$0
PENMENVY INJ	VAC	$0
PNEUMOVAX INJ	VAC	$0
PREVNAR 20 INJ	VAC	$0
TRUMENBA INJ	VAC	$0
VAXNEUVANCE INJ	VAC	$0
TYPHIM VI INJ	VAC	EXC
VAXCHORA SUSP	VAC	EXC
VIVOTIF CAP	VAC	EXC
VIRAL VACCINES		
ABRYSVO INJ (QL=1 dose/lifetime; Covered at $0 for members 60 years of age and older. Only covered at $0 for women under 60. Not covered for men under 60)	QL-VAC	$0
AFLURIA INJ, FLUZONE INJ (QL= 1 inj/28 days)	QL-VAC	$0
AREXVY INJ (QL= 1 dose/lifetime)	QL-VAC	$0
COMIRNATY INJ (QL= 1 dose/17 days)	QL-VAC	$0

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DrugName	Special Code	Tier
VACCINES Cont.		
COMIRNATY INJ 30MCG/0.3ML (QL= 1 dose/17 days)	QL-VAC	$0
COVID-19 VACCINE INJ 5-11Y (PFIZER) (QL= 1 dose/17 days)	QL-VAC	$0
COVID-19 VACCINE INJ 6M-11Y (MODERNA) (QL= 1 dose/24 days)	QL-VAC	$0
COVID-19 VACCINE INJ 6M-4Y (PFIZER) (QL= 1 dose/17 days)	QL-VAC	$0
DENGVAXIA SUSP	VAC	$0
ENGERIX-B INJ, RECOMBIVAX-HB INJ	VAC	$0
FLUAD INJ (QL= 1 inj/28 days)	QL-VAC	$0
FLUBLOK INJ (QL= 1 inj/28 days)	QL-VAC	$0
FLUCELVAX INJ (QL= 1 inj/28 days)	QL-VAC	$0
FLULAVAL INJ, FLUARIX INJ (QL= 1 inj/28 days)	QL-VAC	$0
FLUMIST NASAL (QL= 1 dose/28 days)	QL-VAC	$0
FLUZONE HIGH DOSE PF INJ (QL= 1 inj/28 days)	QL-VAC	$0
GARDASIL 9 INJ	VAC	$0
HAVRIX INJ, VAQTA INJ	VAC	$0
HEPLISAV-B INJ	VAC	$0
IMOVAX INJ	VAC	$0
IPOL INJ	VAC	$0
JYNNEOS INJ	VAC	$0
MFLUSIVA INJ (QL= 1 inj/28 days; Covered for members age 50 years and older)	QL-VAC	$0
M-M-R II INJ	VAC	$0
MNEXSPIKE INJ 10MCG/0.2ML (QL= 1 dose/24 days)	QL-VAC	$0
MRESVIA INJ (QL= 1 dose/lifetime)	QL-VAC	$0
NOVAVAX INJ (QL= 1 dose/24 days)	QL-VAC	$0
PREHEVBRIO SUSP	VAC	$0
PRIORIX INJ	VAC	$0
PROQUAD INJ	VAC	$0
RABAVERT INJ	VAC	$0
ROTARIX SUSP	VAC	$0
ROTATEQ INJ	VAC	$0
SHINGRIX INJ (Covered for members age 19 years and older)	VAC	$0
SPIKEVAX INJ (QL= 1 dose/24 days)	QL-VAC	$0
SPIKEVAX INJ 50MCG/0.5ML (QL= 1 dose/24 days)	QL-VAC	$0
TWINRIX INJ	VAC	$0
VARIVAX INJ	VAC	$0
IXCHIQ INJ	VAC	EXC
IXIARO INJ	VAC	EXC
TICOVAC INJ	VAC	EXC
VIMKUNYA INJ	VAC	EXC
YF-VAX INJ	VAC	EXC
VAGINAL AND RELATED PRODUCTS		
VAGINAL ANTI-INFECTIVES		
CLINDESSE VAGINAL CREAM (QL= 1 applicator/fill)	QL	2
XACIATO GEL (QL= 1 applicator/fill)	QL	2
VAGINAL CONTRACEPTIVE - PH MODULATORS		
PHEXXI GEL (QL= 1 box/fill)	QL	$0

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DrugName	Special Code	Tier
VAGINAL AND RELATED PRODUCTS Cont.		
VAGINAL PROGESTINS		
ENDOMETRIN SUPP	PA	2
progesterone vaginal insert (ENDOMETRIN equiv)	PA	2
VAGINAL PRODUCTS		
MISCELLANEOUS VAGINAL PRODUCTS		
FEM PH GEL	-	3
INTRAROSA SUPP	-	NC
SPERMICIDES		
CONTRACEPTIVE FILM	OTC	EXC
CONTRACEPTIVE GEL	OTC	EXC
CONTRACEPTIVE SUPP	OTC	EXC
TODAY SPONGE	OTC	EXC
VAGINAL ANTI-INFECTIVES		
clindamycin vaginal cream (CLEOCIN equiv) (QL=1 tube/fill)	QL	1
metronidazole vaginal gel (METROGEL equiv)	-	1
terconazole cream (TERAZOL equiv)	-	1
TERCONAZOLE CREAM 0.8%	-	1
terconazole supp (TERAZOL equiv)	-	1
CLEOCIN VAGINAL SUPP (QL= 3 suppositories/fill)	QL	3
CLEOCIN VAGINAL CREAM	-	NC
METROGEL VAGINAL GEL	-	NC
TERAZOL CREAM	-	NC
VAGINAL ESTROGENS		
estradiol cream (ESTRACE equiv)	-	1
estradiol vaginal tab, yuvafem vaginal tab (VAGIFEM equiv) (QL= 8 tabs/28 days, 18 tabs on first fill)	QL	2
ESTRING (3 copays per Rx)	-	2
PREMARIN VAGINAL CREAM	-	2
FEMRING (3 copays per Rx)	-	3
ESTRACE VAGINAL CREAM	-	NC
IMVEXXY SUPP	-	NC
VAGIFEM TAB	-	NC
VAGINAL PROGESTINS		
CRINONE GEL	PA	2
ENDOMETRIN INSERT	PA	2
PROGESTERONE SUPP	PA	3
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
epinephrine pen inj 0.15mg, 0.3mg (EPIPEN (JR) equiv) (QL= 2 inj/fill)	QL	1
ADRENACLICK INJ, EPINEPHRINE INJ	-	NC
AUVI-Q INJ	-	NC
EPIPEN (JR) INJ	-	NC
NEFFY SPRAY	-	NC
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
droxidopa cap (NORTHERA equiv)	-	NC

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DrugName	Special Code	Tier
VASOPRESSORS Cont.		
NORTHERA CAP	-	NC
VASOPRESSORS		
midodrine tab (PROAMATINE equiv)	-	1
VITAMINS		
OIL SOLUBLE VITAMINS		
vitamin D cap (RX strength only)	-	1
phytonadione tab (MEPHYTON equiv)	-	2
DRISDOL CAP	-	NC
ERGOCAL CAP	-	NC
MEPHYTON TAB	-	NC
vitamin D cap 1000unit	OTC	NC
vitamin D cap 400unit	OTC	NC
VITAMIN D TAB 400UNIT	OTC	NC

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State of Arkansas Formulary
Prior Authorization Drug List
Last Updated* 10/1/2026

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
ADALIMUMAB FKJP KIT INJ 20MG/0.4ML	4
ADALIMUMAB-AATY 20 MG/0.2 ML PFS (2 SYRINGE) KIT	4
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (1 PEN) KIT	4
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (2 PEN) KIT	4
ADALIMUMAB-AATY 40 MG/0.4 ML PFS (2 SYRINGE) KIT	4
ADALIMUMAB-AATY 80 MG/0.8 ML PEN (1 PEN) KIT	4
ADALIMUMAB-AATY 80MG/0.8ML PEN (3 PEN) KIT	4
ADALIMUMAB-ADAZ INJ	4
ADALIMUMAB-ADAZ INJ 10/0.1ML	4
ADALIMUMAB-ADAZ PFS INJ	4
ADALIMUMAB-FKJP AUTO-INJECTOR KIT	4
ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40MG/0.8ML	4
ADALIMUMAB-FKJP PFS KIT 20 MG/0.4ML	4
ADALIMUMAB-FKJP PFS KIT 40 MG/0.8ML	4
adapalene cream	2
adapalene gel 0.3%	2
ADBRY INJ	4
ADEMPAS TAB	4
ALECENSA CAP	4
ALHEMO INJ	4
ALUNBRIG TAB 30MG	4
ALUNBRIG TAB 90MG, 180MG	4
ALYFTREK TAB	4
ALYFTREK TAB 4-20-50MG	4
ambrisentan tab	1
ARBLI SUSP	3
ARIKAYCE SUSP	4
ATORVALIQ SUSP	3
AVTOZMA INJ	4
AYVAKIT TAB	4
baclofen oral soln 10mg/5ml	3
baclofen oral soln 5mg/5ml	3
baclofen susp	3
BALVERSA TAB 3MG	4
BALVERSA TAB 4MG	4
BALVERSA TAB 5MG	4
BARACLUDE SOLN	3
BAXDELA TAB	2
BENLYSTA AUTO-INJECTOR	4
BENLYSTA INJ	4
bexarotene gel	1

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
bosentan tab	1
bosentan tab for oral susp	1
BOSULIF CAP	4
bosutinib tab	1
BRAFTOVI CAP 75MG	4
BRUKINSA CAP	4
BRUKINSA TAB	4
budesonide ER tab	3
budesonide rectal foam	3
BYLVAY CAP 1200MCG	4
BYLVAY CAP 400MCG	4
BYLVAY SPRINKLE CAP 200MCG	4
BYLVAY SPRINKLE CAP 600MCG	4
CABOMETYX TAB	4
CALQUENCE TAB	4
CAMZYOS CAP	4
CAPRELSA TAB	4
CAPRELSA TAB 300MG	4
carglumic acid tab	1
CERDELGA CAP	4
CIBINQO TAB	4
CIMZIA INJ	4
CIMZIA INJ 200MG/ML	4
clobazam susp	2
COMETRIQ KIT	4
COPIKTRA CAP	4
CORLANOR SOLN	3
COTELLIC TAB	4
CRENESSITY CAP	4
CRENESSITY SOLN	4
CRINONE GEL	2
dasatinib tab	1
DAYVIGO TAB	3
deferiprone tab	1
DESCOVY TAB	$0
dextromethorphan hbr-quinidine sulfate cap	2
DIACOMIT CAP	4
DIACOMIT POWDER PACK	4
diclofenac gel	2
DOPTELET SPRINKLE CAP	4
DOPTELET TAB	4

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dronabinol cap	2
DUPIXENT INJ	4
DUPIXENT PEN INJ	4
EBGLYSS INJ	4
EBGLYSS PEN INJ	4
eltrombopag olamine powder pack for susp	1
eltrombopag olamine tab	1
eltrombopag olamine tab 50MG	1
eltrombopag olamine tab 75MG	1
EMPAVELI INJ	4
enalapril maleate oral soln	2
ENBREL INJ 25MG	4
ENBREL INJ 50MG	4
ENBREL MINI INJ	4
ENBREL SURECLICK INJ 50MG	4
ENDOMETRIN INSERT	2
ENDOMETRIN SUPP	2
ENSPRYNG INJ	4
ENTYVIO SC INJ	4
EPIDIOLEX SOLN	4
ERIVEDGE CAP	4
ERLEADA TAB	4
ERLEADA TAB 240MG	4
erlotinib tab	4
erlotinib tab 25mg	1
everolimus tab	1
everolimus tab (ZORTRESS equiv)	2
EVRYSDI SOLN	4
EVRYSDI TAB	4
EZALLOR SPRINKLE CAP	3
FASENRA PEN INJ	4
FERRIPROX SOLN	4
FINTEPLA SOLN	4
FIRDAPSE TAB	4
FLOLIPID SUSP	3
FRUZAQLA CAP 1MG	4
FRUZAQLA CAP 5MG	4
GALAFOLD CAP	4
GAVRETO CAP	4
gefitinib tab	1
GENOTROPIN INJ	4

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
GENOTROPIN INJ 5MG	4
GILOTRIF TAB	4
GLOPERBA SOLN	3
GOMEKLI CAP	4
GOMEKLI CAP 1MG	4
GOMEKLI TAB FOR ORAL SUSP	4
HEMLIBRA INJ	4
heparin inj	1
HIZENTRA INJ	4
HYFTOR GEL	4
HYQVIA INJ	4
IBTROZI CAP	4
icatibant inj	4
ICLUSIG TAB	4
IDHIFA TAB	4
IMBRUVICA CAP 140MG	4
IMBRUVICA CAP 70MG	4
IMBRUVICA SUSP	4
IMBRUVICA TAB 420MG	4
INBRIJA INH POWDER	4
INLURIYO TAB	4
INLYTA TAB	4
INLYTA TAB 1MG	4
INQOVI TAB	4
INZIRQO SUSP	3
ISTURISA TAB	4
itraconazole soln	3
ivabradine hcl tab	1
IWILFIN TAB	4
JAKAFI TAB	4
JYLAMVO SOLN, XATMEP SOLN	3
KALYDECO PAK	4
KALYDECO TAB	4
KATERZIA SUSP	3
KEVZARA INJ	4
KINERET INJ	4
KISQALI PAK	4
KISQALI TAB	4
KOSELUGO CAP	4
KOSELUGO CAP 10MG	4
KOSELUGO SPRINKLE CAP	4

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
KOSELUGO SPRINKLE CAP 5MG	4
KRAZATI TAB	4
LAMPIT TAB	2
lapatinib ditosylate tab	1
LEDIPASVIR/SOFOSBUVIR TAB	4
LENVIMA CAP	4
l-glutamine powder packet	1
LIKMEZ SUSP	3
LINZESS CAP	3
lisdexamfetamine chew tab	1
lithium oral solution	1
LIVMARLI SOLN	4
LIVMARLI SOLN 19MG/ML	4
LIVMARLI TAB	4
LIVMARLI TAB 30MG	4
LIVTENCITY TAB	4
lofexidine hcl tab	3
LOKELMA PAK	2
LOKELMA PAK 5GM	2
LONSURF TAB	4
LOPRESSOR SOLN	3
LUMAKRAS TAB	4
LUMAKRAS TAB 240MG	4
LUMAKRAS TAB 320MG	4
LUPKYNIS CAP	4
LYNPARZA TAB	4
LYTGOBI THERAPY PACK	4
LYVISPAH GRANULE PACKET	3
macitentan tab	1
MAVYRET PAK	4
MEKINIST TAB 0.5MG	4
MEKINIST TAB 2MG	4
MEKTOVI TAB	4
mercaptopurine susp	3
METHITEST TAB	3
methylphenidate chew tab	1
methylphenidate soln	1
miglustat cap	1
MOVANTIK TAB	2
MYFEMBREE TAB	2
NEMLUVIO INJ	4

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
NERLYNX TAB	4
nilotinib hcl cap	1
NINLARO CAP	4
nintedanib esylate cap	1
nitazoxanide tab	2
nitrofurantoin susp	3
NORLIQVA ORAL SOLN	3
NUBEQA TAB	4
NUCALA INJ	4
NURTEC ODT	2
ODACTRA SL TAB	3
ODOMZO CAP	4
OGSIVEO TAB	4
OGSIVEO TAB 50MG	4
OLUMIANT TAB	4
ONGENTYS CAP	3
OPZELURA CREAM	3
ORENCIA CLICK INJ	4
ORENCIA SC INJ 125MG/ML	4
ORENCIA SC INJ 50MG/0.4ML	4
ORENCIA SC INJ 87.5MG/0.7ML	4
ORIAHNN CAP	2
ORILISSA TAB 150MG	2
ORILISSA TAB 200MG	2
ORKAMBI GRANULES PACKET	4
ORKAMBI TAB	4
OTEZLA STARTER PACK	4
OTEZLA TAB	4
OTEZLA XR TAB	4
OTEZLA/OTEZLA XR STARTER PACK	4
OXERVATE OPHTH SOLN	4
PALFORZIA POWDER PACK	4
PALFORZIA SPRINKLE CAP	4
pazopanib tab	1
PEMAZYRE TAB	4
pimecrolimus cream	2
PIQRAY TAB	4
pirfenidone cap	1
pirfenidone tab 267mg	1
pirfenidone tab 801mg	1
pomalidomide cap	1

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
PRETOMANID TAB	2
PREVYMIS PAK	4
PREVYMIS TAB	4
PROGESTERONE SUPP	3
progesterone vaginal insert	2
PYRUKYND TAB	4
PYRUKYND TAPER PACK	4
QBRELIS SOLN	3
QINLOCK TAB	4
REDEMPLO PFS INJ	4
RETIN-A CREAM	1
RETIN-A GEL	1
REVUFORJ TAB	4
REVUFORJ TAB 110MG	4
REVUFORJ TAB 25MG	4
REYVOW TAB	2
REZDIFFRA TAB	2
REZLIDHIA CAP	4
REZUROCK TAB	4
ROZLYTREK CAP	4
ROZLYTREK PAK	4
RUBRACA TAB	4
rufinamide susp	2
RYDAPT CAP	4
sapropterin dihydrochloride powder packet	4
sapropterin dihydrochloride soluble tab	4
SCEMBLIX TAB	4
SCEMBLIX TAB 100 MG	4
SELARSDI SYRINGE	4
SELARSDI SYRINGE 90MG/ML	4
SIGNIFOR INJ	4
sildenafil susp	2
SIMLANDI AUTO-INJECTOR KIT 40MG/0.4 ML	4
SIMLANDI AUTO-INJECTOR KIT 80MG/0.8 ML	4
SIMLANDI INJ (adalimumab-ryvk)	4
SIMLANDI KIT (adalimumab-ryvk)	4
SIMPONI AUTO-INJECTOR 100MG	4
SIMPONI INJ 100MG	4
SKYTROFA INJ	4
sodium oxybate oral soln	1
SODIUM OXYBATE SOLN	4

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
SOFOSBUVIR/VELPATASVIR TAB	4
SOGROYA INJ	4
SOLOSEC GRANULES PACKET	3
SOMAVERT INJ	4
sorafenib tosylate tab	1
SOTYLIZE SOLN 5MG/ML	3
spironolactone susp	3
STEQEYMA INJ	4
STEQEYMA INJ 90MG	4
STIVARGA TAB	4
sunitinib malate cap	1
SUNOSI TAB	2
SYMDEKO TAB	4
SYMPROIC TAB	2
TADLIQ SUSP	4
TAFINLAR CAP	4
TAFINLAR TAB	4
TAGRISSO TAB	4
TALTZ INJ	4
TALTZ INJ 20MG/0.25ML	4
TALTZ INJ 40 MG/0.5ML	4
TALZENNA CAP 0.25MG	4
TALZENNA CAP 0.5MG, 0.75MG, 1MG	4
TAVNEOS CAP	4
tazarotene cream 0.05%	3
tazarotene cream 0.1%	2
TESTOSTERONE GEL 1% 25MG	2
testosterone gel 1% 50mg	2
testosterone gel 1% pump	2
testosterone gel 1.62% 1.25gm	3
testosterone gel 1.62% 2.5gm	3
TESTOSTERONE GEL 20.25MG/1.25GM	3
TESTOSTERONE GEL PUMP 1%	2
testosterone gel pump 1.62%	2
testosterone soln	2
TIBSOVO TAB	4
tiopronin tab	1
tiopronin tab delayed release	1
TIROSINT-SOL	3
TOBI PODHALER	4
tofacitinib citrate ER tab	1

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
tofacitinib citrate oral soln	1
tofacitinib citrate tab	1
TREMFYA INDUCTION INJ 200MG/ML	4
TREMFYA INJ	4
TREMFYA INJ 200MG/2ML	4
tretinoin cream	2
tretinoin gel	2
trientine cap	1
TRIKAFTA TAB	4
TRIKAFTA THERAPY PACK	4
TRULANCE TAB	2
TRUQAP TAB	4
TRUQAP THERAPY PACK	4
TRYNGOLZA INJ	4
TUKYSA TAB	4
TURALIO CAP	4
TYENNE INJ	4
TYVASO DPI POWDER	4
TYVASO DPI POWDER 48-80MCG	4
TYVASO DPI POWDER MAINTENANCE KIT 32-48MCG	4
TYVASO DPI POWDER MAINTENANCE KIT 32-64MCG	4
TYVASO DPI POWDER MAINTENANCE KIT 48-64MCG	4
TYVASO DPI POWDER TITRATION KIT 16-32-48MCG	4
TYVASO INH SOLN 0.6 MG/ML	4
UBRELVY TAB	2
UPTRAVI TAB	4
UPTRAVI THERAPY PACK	4
VAFSEO TAB	4
VALCHLOR GEL	4
VELTASSA POWDER	2
VELTASSA POWDER 1GM	2
VENCLEXTA STARTER PACK	4
VENCLEXTA TAB	4
VENTAVIS INH SOLN	4
VERZENIO TAB	4
vigabatrin powder pack	1
vigabatrin tab	1
vigadrone powder pack	4
VIJOICE TAB	4
VIJOICE TAB 250MG	4
VITRAKVI CAP 100MG	4

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

State of Arkansas Formulary cont.
Prior Authorization Drug List
Last Updated* 10/1/2026

Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
VITRAKVI CAP 25MG	4
VITRAKVI SOLN	4
VIZIMPRO TAB	4
VONJO CAP	4
VOSEVI TAB	4
VOWST CAP	4
VOXZOGO INJ	4
VOYDEYA TAB	4
VOYDEYA TAB THERAPY PACK	4
VYNDAMAX CAP	4
VYNDAQEL CAP	4
VYVANSE CHEW TAB	2
VYVGART HYTRULO INJ	4
WAKIX TAB	4
WELIREG TAB	4
WINREVAIR INJ	4
XADAGO TAB	3
XALKORI CAP	4
XEMBIFY INJ	4
XOLAIR INJ	4
XOLAIR INJ 150MG/ML	4
XOLAIR INJ 300MG/2ML	4
XOLAIR SYRINGE	4
XOLAIR SYRINGE 150MG/ML	4
XOLAIR SYRINGE 300MG/2ML	4
XOSPATA TAB	4
XPHOZAH TAB	3
XPOVIO PAK	4
XROMI SOLN	3
YESINTEK INJ	4
YESINTEK SYRINGE	4
YESINTEK SYRINGE 90MG	4
YEZTUGO INJ	$0
YEZTUGO TAB	$0
YUTREPIA CAP	4
ZAVZPRET NASAL SPRAY	2
ZEJULA TAB	4
ZELBORAF TAB	4
ZEPOSIA CAP	4
ZEPOSIA STARTER PACK	4
ZILBRYSQ INJ	4

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Some products on the Formulary are only covered with a prior authorization approval. Drug products requiring prior authorization are listed below. The pharmacy will also alert members if the medication prescribed requires prior authorization. Please call Customer Service if you have further questions regarding prior authorizations.

Drug Name	Tier # for Drug Copay (if prior auth is approved)
ZILBRYSQ INJ 23MG	4
ZILBRYSQ INJ 32.4MG	4
ZOKINVY CAP	4
ZOLINZA CAP	4
ZONISADE SUSP	3
ZORYVE CREAM	2
ZORYVE FOAM	2
ZTALMY SUSP	4
ZURZUVAE CAP 20MG, 25MG	4
ZURZUVAE CAP 30MG	4
ZYDELIG TAB	4
ZYKADIA TAB	4

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• The following OTC drugs are a covered benefit with a prescription

Over-the-Counter (OTC) Medications

ACCU-CHEK GUIDE CARE METER	ACCU-CHEK GUIDE ME KIT	ACCU-CHEK GUIDE TEST STRIP	AEROCHAMBER
aspirin chew tab 81mg	aspirin EC tab 325mg	aspirin ec tab 81mg	aspirin tab 325mg
B-D INSULIN SYRINGE	CALIBRATION LIQUID	CLINISTIX TEST STRIP	EMBECTA INSULIN SYRINGE
EMBECTA PEN NEEDLE	folic acid tab 400mcg	folic acid tab 800mcg	FREESTYLE FREEDOM LITE METER
FREESTYLE INSULINX TEST STRIP	FREESTYLE LITE METER	FREESTYLE LITE TEST STRIP	FREESTYLE PRECISION NEO METER
FREESTYLE PRECISION NEO TEST STRIP	FREESTYLE TEST STRIP	HUMULIN MIX INJ	HUMULIN MIX PEN INJ
HUMULIN N INJ	HUMULIN N PEN INJ	HUMULIN R INJ	KETO-DIASTIX TEST STRIP
KETOSTIX	LANCET KIT	LANCETS	naloxone hcl nasal spray
NICOTINE KIT	nicotine patch	OPILL TAB	PEAK FLOW METER
PRECISION XTRA METER	PRECISION XTRA TEST STRIP	RIVIVE, REXTOVY SPRAY	ZINC GLUCONATE TAB

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• The following drugs are covered on the formulary with a Step Therapy.

Step Therapy (ST) Medications

Drug Name	Step Therapy Requirements
buprenorphine patch	QL= 4 patches/28 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)
DEXCOM G6 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not curren utilizing insulin
DEXCOM G6 SENSOR	QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
DEXCOM G6 TRANSMITTER	QL= 1 transmitter/90 days; Prior authorization (exception) required if member is not currently utilizing insulin
DEXCOM G7 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not curren utilizing insulin
DEXCOM G7 SENSOR	QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
DEXCOM G7 SENSOR (15-DAY)	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin
DIFICID SUSP	QL= 136 mL/fill; Step therapy requires trial of vancomycin cap or Firvanq solution
DISKETS TAB	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependenc
febuxostat tab	Step Therapy requires trial of allopurinol
fentanyl patch	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependenc
fidaxomicin tab	QL= 20 tabs/fill; Step therapy requires trial of vancomycin cap or Firvanq solution
FREESTYLE LIBRE 2 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not curren utilizing insulin
FREESTYLE LIBRE 2 SENSOR	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 2-PLUS SENSOR	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 3 READER	QL= 1 receiver/year; Prior authorization (exception) required if member is not curren utilizing insulin
FREESTYLE LIBRE 3 SENSOR	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 3-PLUS SENSOR	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not curren utilizing insulin

• The following drugs are covered on the formulary with a Step Therapy.

Step Therapy (ST) Medications

Drug Name	Step Therapy Requirements
FREESTYLE LIBRE SENSOR (14-DAY)	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
HYDROCODONE BITARTRATE ER CAP	QL= 2 caps/day; Step Therapy requires step through IR opioid if opioid naïve (Opioic ER Dependency)
hydrocodone bitartrate er tab	QL= 1 tab/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid I Dependency)
methadone soln	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
methadone tab	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
methadose tab	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
morphine sulfate ER tab	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
NEXLETOL TAB	QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
NEXLIZET TAB	QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
NUCYNTA ER TAB	QL= 2 tabs/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)
REPATHA INJ	QL= 2 inj/28 days; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT	QL= 1 inhaler/30 days; Step Therapy requires trial of ADVAIR (FLUTICASONE/SALMETEROL), BREO (FLUTICASONE/VILANTEROL), DULERA (MOMETASONE/FORMOTEROL), or SYMBICORT (BUDESONIDE/FORMOTEROL
tramadol ER tab	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
TRAMADOL HCL ER TAB	Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency
XTAMPZA ER CAP	QL= 120 caps/30 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)

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State of Arkansas Formulary
Smoking Cessation Agents
Last Updated* 10/1/2026

Drug Name	Tier # for Drug Copay
bupropion SR tab(Limited to 180 days/plan year)	$0
CHANTIX STARTER PACK	NC
NICODERM PATCH	NC
NICORETTE GUM	NC
NICORETTE LOZENGE	NC
NICOTINE GUM	NC
NICOTINE KIT	$0
NICOTINE LOZENGE	NC
nicotine patch(Limited to 180 days/plan year)	$0
NICOTROL INHALER	NC
NICOTROL NASAL SPRAY	NC
VARENICLINE TAB(Limited to 180 days/plan year)	$0
varenicline tartrate tab(Limited to 180 days/plan year)	$0
varenicline tartrate tab starter pack(Limited to 180 days/plan year)	$0
ZYBAN TAB	NC

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State of Arkansas Formulary
Infertility Drug List
Last Updated* 10/1/2026

Drug Name	Tier # for Drug Copay
cetrorelix acetate for inj kit	EXC
CETROTIDE KIT	EXC
clomiphene citrate tab	EXC
CLOMIPHENE TAB	EXC
OVIDREL INJ	EXC

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
abiraterone tab 250mg	QL= 4 tabs/day
ABRYSVO INJ	QL=1 dose/lifetime; Covered at $0 for members 60 years of age and older. Only covered at $0 for women under 60. Not covered for men under 60
ACCU-CHEK GUIDE TEST STRIP	QL= 153 strips/30 days
ADALIMUMAB FKJP KIT INJ 20MG/0.4ML	QL= 2 inj/28 days
ADALIMUMAB-AATY 20 MG/0.2 ML PFS (2 SYRINGE) KIT	QL= 1 inj/28 days
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (1 PEN) KIT	QL= 2 inj/28 days
ADALIMUMAB-AATY 40 MG/0.4 ML PEN (2 PEN) KIT	QL= 1 inj/28 days
ADALIMUMAB-AATY 40 MG/0.4 ML PFS (2 SYRINGE) KIT	QL= 1 inj/28 days
ADALIMUMAB-AATY 80 MG/0.8 ML PEN (1 PEN) KIT	QL= 2 inj/28 days
ADALIMUMAB-AATY 80MG/0.8ML PEN (3 PEN) KIT	QL= 1 kit/fill; 1 fill/plan year
ADALIMUMAB-ADAZ INJ	QL= 2 inj/28 days
ADALIMUMAB-ADAZ INJ 10/0.1ML	QL= 2 inj/28 days
ADALIMUMAB-ADAZ PFS INJ	QL= 2 inj/28 days
ADALIMUMAB-FKJP AUTO-INJECTOR KIT	QL= 2 inj/28 days
ADALIMUMAB-FKJP AUTO-INJECTOR KIT 40MG/0.8ML	QL= 2 inj/28 days
ADALIMUMAB-FKJP PFS KIT 20 MG/0.4ML	QL= 2 inj/28 days
ADALIMUMAB-FKJP PFS KIT 40 MG/0.8ML	QL= 2 inj/28 days
ADBRY INJ	QL= 4 inj/28 days
ADEMPAS TAB	QL= 3 tabs/day
AFLURIA INJ, FLUZONE INJ	QL= 1 inj/28 days
AIMOVIG INJ	QL= 1 pack/28 days
AJOVY INJ	QL= 1 pack/28 days
AKYNZEO CAP	QL= 1 cap/fill; Restricted to Oncology or Hematology Specialist
albuterol HFA (18gm) inhaler	QL= 2 inhalers/30 days
albuterol HFA (6.7gm, 8.5gm) inhaler	QL= 2 inhalers/30 days
ALECENSA CAP	QL= 8 caps/day
ALUNBRIG TAB 30MG	QL= 4 tabs/day
ALUNBRIG TAB 90MG, 180MG	QL= 1 tab/day
ALYFTREK TAB	QL= 2 tabs/day
ALYFTREK TAB 4-20-50MG	QL= 3 tabs/day
ambrisentan tab	QL= 1 tab/day
ANNOVERA RING	QL= 1 ring/year

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
ANZEMET TAB	QL= 9 tabs/fill
aprepitant cap	QL= 3 caps/fill
aprepitant pak	QL= 3 caps/fill
ARBLI SUSP	QL= 330mL/30 days; Prior Authorization required for members age 7 years and older
AREXVY INJ	QL= 1 dose/lifetime
ARIKAYCE SUSP	QL= 1 vial/day
armodafinil tab	QL= 1 tab/day
asenapine maleate SL tab	QL= 2 tabs/day
avanafil tab	QL= 6 tabs/30 days
AVTOZMA INJ	QL= 2 inj/28 days
AYVAKIT TAB	QL= 1 tab/day
BALVERSA TAB 3MG	QL= 3 tabs/day
BALVERSA TAB 4MG	QL= 2 tabs/day
BALVERSA TAB 5MG	QL= 1 tab/day
BAQSIMI NASAL POWDER	QL= 2 inhalations/fill
BAXDELA TAB	QL= 2 tabs/day
BENLYSTA AUTO-INJECTOR	QL= 4 inj/28 day
BENLYSTA INJ	QL= 4 inj/28 day
bexarotene cap	QL= 10 caps/day
bexarotene gel	QL= 60 grams/30 days
bimatoprost ophth soln	QL= 2.5ml/30 days
bosentan tab	QL= 2 tabs/day
bosentan tab for oral susp	QL= 4 tabs/day
BRAFTOVI CAP 75MG	QL= 6 caps/day
BRUKINSA CAP	QL= 4 caps/day
BRUKINSA TAB	QL= 2 tabs/day
budesonide ER tab	QL=1 tab/day
buprenorphine patch	QL= 4 patches/28 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)
bupropion SR tab	Limited to 180 days/plan year
butorphanol nasal spray	QL= 1 bottle/fill, 2 fills/30 days
BYLVAY CAP 1200MCG	QL= 5 caps/day
BYLVAY CAP 400MCG	QL= 15 caps/day
BYLVAY SPRINKLE CAP 200MCG	QL= 8 caps/day
BYLVAY SPRINKLE CAP 600MCG	QL= 4 caps/day
CABENUVA IM SUSP	QL= 1 kit/30 days
CABENUVA SUSP 600MG-900MG/3ML	QL= 1 kit/30 days
CABOMETYX TAB	QL= 1 tab/day
CALQUENCE TAB	QL= 2 tabs/day
CAMZYOS CAP	QL= 1 cap/day
CAPRELSA TAB	QL= 2 tabs/day
CAPRELSA TAB 300MG	QL= 2 tabs/day

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
CAVERJECT INJ	QL= 6 inj/30 days
CERDELGA CAP	QL= 2 caps/day
CIBINQO TAB	QL= 1 tab/day
CIMZIA INJ	QL= 1 kit/plan year
CIMZIA INJ 200MG/ML	QL= 2 inj/28 days
CLEOCIN VAGINAL SUPP	QL= 3 suppositories/fill
clindamycin vaginal cream	QL=1 tube/fill
CLINDESSE VAGINAL CREAM	QL= 1 applicator/fill
COMIRNATY INJ	QL= 1 dose/17 days
COMIRNATY INJ 30MCG/0.3ML	QL= 1 dose/17 days
COPIKTRA CAP	QL= 2 caps/day
COTELLIC TAB	QL= 3 tabs/day
COVID-19 VACCINE INJ 5-11Y (PFIZER)	QL= 1 dose/17 days
COVID-19 VACCINE INJ 6M-11Y (MODERNA)	QL= 1 dose/24 days
COVID-19 VACCINE INJ 6M-4Y (PFIZER)	QL= 1 dose/17 days
CRENESSITY CAP	QL= 2 caps/day
CRENESSITY SOLN	QL= 2ml/day
cyclosporine ophth emulsion	QL= 60 vials/30 days; Restricted to Ophthalmology or Optometry Specialist
CYSTADROPS SOLN	QL = 4 bottles/28 days; Restricted to Ophthalmology Specialist
CYSTARAN OPHTH SOLN	QL= 4 bottles/28 days; Restricted to Ophthalmology or Optometry Specialist
dapagliflozin tab	QL= 1 tab/day
dapagliflozin-metformin er tab	QL= 1 tab/day
dapagliflozin-metformin er tab 5-1000MG	QL= 2 tabs/day
DAYVIGO TAB	QL= 1 tab/day
DEPO-PROVERA SC INJ 104MG	QL= 1 inj/90 days
DEXCOM G6 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin
DEXCOM G6 SENSOR	QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
DEXCOM G6 TRANSMITTER	QL= 1 transmitter/90 days; Prior authorization (exception) required if member is not currently utilizing insulin
DEXCOM G7 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin
DEXCOM G7 SENSOR	QL= 3 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
DEXCOM G7 SENSOR (15-DAY)	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin
dextromethorphan hbr-quinidine sulfate cap	QL= 2 caps/day
diazepam rectal gel	QL= 2 packs/fill

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
diclofenac gel	QL= 300gm/30 days
diclofenac soln 1.5%	QL= 3 bottles/fill
DIFICID SUSP	QL= 136 mL/fill; Step therapy requires trial of vancomycin cap or Firvanq solution
donepezil ODT	QL= 1 tab/day
donepezil tab	QL= 2 tabs/day
donepezil tab 23mg	QL= 1 tab/day
DOPTELET SPRINKLE CAP	QL= 2 caps/day
DOPTELET TAB	QL= 2 tabs/day
DUPIXENT INJ	QL= 2 inj/28 days
DUPIXENT PEN INJ	QL= 2 inj/28 days
EBGLYSS INJ	QL= 1 inj/28 days
EBGLYSS PEN INJ	QL= 1 inj/28 days
EDEX INJ	QL= 6 inj/30 days
eletriptan tab	QL= 9 tabs/fill, 2 fills/30 days
eltrombopag olamine powder pack for susp	QL= 1 packet/day
eltrombopag olamine tab	QL= 1 tab/day
eltrombopag olamine tab 50MG	QL= 2 tabs/day
eltrombopag olamine tab 75MG	QL= 2 tabs/day
EMGALITY INJ	QL= 1 inj/28 days
EMGALITY INJ 100MG/ML	QL= 3 inj/fill, 6 fills/year
EMPAVELI INJ	QL= 160ml/28 days
ENBREL INJ 25MG	QL= 8 inj/28 days
ENBREL INJ 50MG	QL= 4 inj/28 days
ENBREL MINI INJ	QL= 4 inj/28 days
ENBREL SURECLICK INJ 50MG	QL= 4 inj/28 days
ENSPRYNG INJ	QL= 1 inj/28 days
entecavir tab	QL= 1 tab/day
ENTYVIO SC INJ	QL= 2 inj/28 days
epinephrine pen inj 0.15mg, 0.3mg	QL= 2 inj/fill
ERIVEDGE CAP	QL= 1 cap/day
ERLEADA TAB	QL= 4 tabs/day
ERLEADA TAB 240MG	QL= 1 tab/day
erlotinib tab 25mg	QL= 3 tabs/day
estradiol vaginal tab, yuvafem vaginal tab	QL= 8 tabs/28 days, 18 tabs on first fill
estradiol valerate inj	QL= 5ml/fill
eszopiclone tab	QL= 1 tab/day
everolimus tab	QL= 1 tab/day
EVRYSDI SOLN	QL= 6.67ml/day
EVRYSDI TAB	QL= 1 tab/day
ezetimibe/simvastatin tab	QL= 1 tab/day (10-80mg is Not Covered)
FASENRA PEN INJ	QL= 1 inj/56 days
fidaxomicin tab	QL= 20 tabs/fill; Step therapy requires trial of vancomycin cap or Firvanq solution

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.

• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
fingolimod hcl cap 0.5mg	QL= 1 cap/day
FINTEPLA SOLN	QL= 12ml/day
FLUAD INJ	QL= 1 inj/28 days
FLUBLOK INJ	QL= 1 inj/28 days
FLUCELVAX INJ	QL= 1 inj/28 days
FLULAVAL INJ, FLUARIX INJ	QL= 1 inj/28 days
FLUMIST NASAL	QL= 1 dose/28 days
fluticasone nasal spray	QL= 2 bottles/fill
FLUZONE HIGH DOSE PF INJ	QL= 1 inj/28 days
FREESTYLE INSULINX TEST STRIP	QL= 153 strips/30 days
FREESTYLE LIBRE 2 RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin
FREESTYLE LIBRE 2 SENSOR	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 2-PLUS SENSOR	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 3 READER	QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin
FREESTYLE LIBRE 3 SENSOR	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE 3-PLUS SENSOR	QL= 2 sensors/30 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LIBRE RECEIVER	QL= 1 receiver/year; Prior authorization (exception) required if member is not currently utilizing insulin
FREESTYLE LIBRE SENSOR (14-DAY)	QL= 2 sensors/28 days; Prior authorization (exception) required if member is not currently utilizing insulin; Dexcom sensors have a $40 copay/month if step therapy criteria met, applies to all plans
FREESTYLE LITE TEST STRIP	QL= 153 strips/30 days
FREESTYLE PRECISION NEO TEST STRIP	QL= 153 strips/30 days
FREESTYLE TEST STRIP	QL= 153 strips/30 days
frovatriptan tab	QL= 9 tabs/fill, 2 fills/30 days
FRUZAQLA CAP 1MG	QL= 84 caps/28 days
FRUZAQLA CAP 5MG	QL= 21 caps/28 days
gabapentin cap	QL= 9 caps/day
gabapentin soln	QL= 72 mls/day
gabapentin tab 600mg	QL= 6 tabs/day
gabapentin tab 800mg	QL= 4.5 tabs/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
GALAFOLD CAP	QL= 14 caps/28 days
GAVILYTE-C SOLN	QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay
GAVRETO CAP	QL= 4 caps/day
gefitinib tab	QL= 1 tab/day
GILENYA CAP 0.25MG	QL= 1 cap/day
GILOTRIF TAB	QL= 1 tab/day
glucagon (rdna) for inj kit	QL= 2 inj/fill
GLUCAGON EMR INJ	QL= 2 inj/fill
GOLYTELY SOLN	QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay
GOMEKLI CAP	QL= 84 caps/28 days
GOMEKLI CAP 1MG	QL= 168 caps/28 days
GOMEKLI TAB FOR ORAL SUSP	QL= 168 caps/28 days
granisetron tab	QL= 14 tabs/fill
GVOKE INJ	QL= 2 inj/fill
GVOKE INJ KIT	QL= 2 inj/fill
GVOKE PFS INJ	QL= 2 inj/fill
HYD POL/CPM SUSP	QL= 120ml/fill; 2 fills/30 days
HYDROCODONE BITARTRATE ER CAP	QL= 2 caps/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)
hydrocodone bitartrate er tab	QL= 1 tab/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid E Dependency)
hydrocodone/chlorpheniramine CR susp	QL= 120ml/fill; 2 fills/30 days
hydrocortisone succinate inj 100mg	QL= 2 vials/fill
HYFTOR GEL	QL= 10 grams/30 days
ibandronate tab 150mg	QL= 1 tab/30 days
IBTROZI CAP	QL= 3 caps/day
ICLUSIG TAB	QL= 1 tab/day
icosapent ethyl cap	QL= 4 caps/day
IDHIFA TAB	QL= 1 tab/day
IMBRUVICA CAP 140MG	QL= 3 caps/day
IMBRUVICA CAP 70MG	QL= 1 cap/day
IMBRUVICA SUSP	QL= 6ml/day
IMBRUVICA TAB 420MG	QL= 1 tab/day
INBRIJA INH POWDER	QL= 10 caps/day
INLURIYO TAB	QL= 2 tabs/day
INLYTA TAB	QL= 4 tabs/day
INLYTA TAB 1MG	QL= 8 tabs/day
INQOVI TAB	QL= 5 tabs/28 days
ISTURISA TAB	QL= 12 tabs/day
IWILFIN TAB	QL= 8 tabs/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
JAKAFI TAB	QL= 2 tabs/day
JANUMET XR TAB	QL= 2 tabs/day
JENTADUETO TAB	QL= 2 tabs/day
JENTADUETO XR TAB	QL= 2 tabs/day
KALYDECO PAK	QL= 2 packets/day
KALYDECO TAB	QL= 2 tabs/day
ketorolac inj 15mg/ml	QL= 20ml/5 days
ketorolac inj 30mg/ml	QL= 20ml/5 days
ketorolac inj 60mg/2ml	QL= 20ml/5 days
ketorolac tab	QL= 20 tabs/5 days
KEVZARA INJ	QL= 2 inj/28 days
KINERET INJ	QL= 1 inj/day
KISQALI PAK	QL= 91 tabs/28 days
KISQALI TAB	QL= 63 tabs/28 days
KOSELUGO CAP	QL= 4 caps/day
KOSELUGO CAP 10MG	QL= 8 caps/day
KOSELUGO SPRINKLE CAP	QL= 12 caps/day
KOSELUGO SPRINKLE CAP 5MG	QL= 20 caps/day
KRAZATI TAB	QL= 6 tabs/day
LAGEVRIO CAP (EUA)	QL= 40 caps/fill
LAGEVRIO CAP 200MG	QL= 40 caps/fill
latanoprost ophth soln	QL= 2.5ml/30 days
LEDIPASVIR/SOFOSBUVIR TAB	QL= 1 tab/day
lenalidomide cap	QL= 1 cap/day; Restricted to Oncology or Hematology Specialist
LENVIMA CAP	QL= 3 caps/day
LEVALBUTEROL INHALER, XOPENEX HF INHALER	QL= 2 inhalers/fill, 2 fills/30 days
l-glutamine powder packet	QL= 6 packets/day
LIDOCAINE OINT	QL= 107gm/30 days
lidocaine patch	QL= 3 patches/day
lidocaine patch 5%	QL= 3 patches/day
LINZESS CAP	QL= 1 cap/day
liraglutide soln pen-injector	QL= 9ml/30 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81)
LIVMARLI SOLN	QL= 90ml/30 days
LIVMARLI SOLN 19MG/ML	QL= 60ml/30 days
LIVMARLI TAB	QL= 2 tabs/day
LIVMARLI TAB 30MG	QL= 1 tab/day
LIVTENCITY TAB	QL= 4 tabs/day
lofexidine hcl tab	QL= 96 tabs/7 days
LOKELMA PAK	QL= 1 packet/day
LOPRESSOR SOLN	QL= 45ml/day; Prior Authorization required for members age 7 years and older

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
lubiprostone cap	QL= 2 caps/day
LUMAKRAS TAB	QL= 8 tabs/day
LUMAKRAS TAB 240MG	QL= 4 tabs/day
LUMAKRAS TAB 320MG	QL= 3 tabs/day
LUPKYNIS CAP	QL= 6 caps/day
LYNPARZA TAB	QL= 4 tabs/day
LYTGOBI THERAPY PACK	QL= 5 tabs/day
macitentan tab	QL= 1 tab/day
malathion lotion	QL= 2 bottles/fill
MAVYRET PAK	QL= 5 packs/day
MAVYRET TAB	QL= 3 tabs/day
medroxyprogesterone inj	QL= 1 inj/90 days
MEKINIST TAB 0.5MG	QL= 3 tabs/day
MEKINIST TAB 2MG	QL= 1 tab/day
MEKTOVI TAB	QL= 6 tabs/day
methylergonovine tab	QL= 28 tabs/fill, 1 fill/365 days
MFLUSIVA INJ	QL= 1 inj/28 days; Covered for members age 50 years and older
MIDAZOLAM INJ	QL= 1 inj/fill
miglustat cap	QL= 3 caps/day
milnacipran hcl tab	QL= 2 tabs/day
MNEXSPIKE INJ 10MCG/0.2ML	QL= 1 dose/24 days
modafinil tab	QL= 2 tabs/day
MOUNJARO INJ	QL= 4 inj/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81)
MOVANTIK TAB	QL= 1 tab/day
MRESVIA INJ	QL= 1 dose/lifetime
MYFEMBREE TAB	QL= 1 tab/day
NALOXONE PREFILLED INJ	QL= 2 inj/fill
naratriptan tab	QL= 9 tabs/fill, 2 fills/30 days
NATACYN OPHTH SUSP	QL= 15ml/fill
NATROBA SUSP	QL= 1 bottle/fill
NATROBA SUSP 0.90%	QL= 1 bottle/fill
NAYZILAM SPRAY	QL= 4 doses/fill
NEMLUVIO INJ	QL= 1 inj/56 days
NERLYNX TAB	QL= 6 tabs/day
NEXLETOL TAB	QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
NEXLIZET TAB	QL= 1 tab/day; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
NICOTINE KIT	
nicotine patch	Limited to 180 days/plan year
nintedanib esylate cap	QL= 2 caps/day

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Quantity Limit (QL) Medications

Drug Name	Quantity Limit
nitazoxanide tab	QL= 6 tabs/3 days
NOVAVAX INJ	QL= 1 dose/24 days
NUBEQA TAB	QL= 4 tabs/day
NUCALA INJ	QL= 1 inj/28 days
NUCYNTA ER TAB	QL= 2 tabs/day; Step Therapy requires step through IR opioid if opioid naïve (Opioid E Dependency)
NURTEC ODT	QL= 8 tabs/fill; 6 fills/year
NUZYRA TAB	QL= 30 tabs/180 days; Restricted to Infectious Disease or Pulmonology Specialist
ODOMZO CAP	QL= 1 cap/day
OGSIVEO TAB	QL= 2 tabs/day
OGSIVEO TAB 50MG	QL= 6 tabs/day
OLUMIANT TAB	QL= 1 tab/day
OMNIPOD 5 DEX G7G6 INTRO KIT	QL= 1 kit/year
OMNIPOD 5 DEX G7G6 PODS	QL= 10 pods/month
OMNIPOD 5 G7 KIT INTRO	QL= 1 kit/year
OMNIPOD 5 G7 MIS PODS	QL= 10 pods/30 days
OMNIPOD 5 LIBRE2 PLUS G6 INTRO KIT	QL= 1 kit/year
OMNIPOD 5 LIBRE2 PLUS G6 PODS	QL= 10 pods/30 days
OMNIPOD 5 PACK PODS	QL= 10 pods/month
OMNIPOD DASH INTRO KIT	QL= 1 kit/year
OMNIPOD DASH PODS	QL= 10 pods/month
OMNIPOD GO KIT	QL= 10 pods/month
OMNIPOD STARTER KIT	QL= 1 kit/year
ONGENTYS CAP	QL= 1 tab/day, 30 tabs per fill
OPZELURA CREAM	QL= 12 tubes/year
ORENCIA CLICK INJ	QL= 4 inj/28 days
ORENCIA SC INJ 125MG/ML	QL= 4 inj/28 days
ORENCIA SC INJ 50MG/0.4ML	QL= 4 inj/28 days
ORENCIA SC INJ 87.5MG/0.7ML	QL= 4 inj/28 days
ORIAHNN CAP	QL= 2 caps/day
ORILISSA TAB 150MG	QL= 1 tab/day
ORILISSA TAB 200MG	QL= 2 tabs/day
ORKAMBI GRANULES PACKET	QL= 2 packets/day
ORKAMBI TAB	QL= 4 tabs/day
oseltamivir cap	QL= 10 caps/fill
oseltamivir cap 30mg	QL= 20 caps/fill
oseltamivir susp	QL= 250ml/fill
OTEZLA STARTER PACK	QL= 1 pack/28 days
OTEZLA TAB	QL= 2 tabs/day
OTEZLA XR TAB	QL= 1 tab/day
OTEZLA/OTEZLA XR STARTER PACK	QL= 1 pack/28 day
OXERVATE OPHTH SOLN	QL= 8 kits/affected eye/lifetime

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
OZEMPIC INJ	QL= 1 pack/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81)
OZEMPIC TAB, RYBELSUS TAB	QL=1 tab/day; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81)
PAXLOVID PAK	QL= 11 tabs/90 days
PAXLOVID TAB 150-100MG	QL= 20 tabs/90 days
PAXLOVID TAB 300-100MG	QL= 30 tabs/90 days
pazopanib tab	QL= 4 tabs/day
peg 3350 soln (100 gram Moviprep equiv)	QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay
peg 3350/electrolytes soln	QL= 2 fills/365 days; $0 copay for members age 45-75 years; All other members covered at generic copay
PEMAZYRE TAB	QL= 1 tab/day
PHEXXI GEL	QL= 1 box/fill
pirfenidone cap	QL= 9 caps/day
pirfenidone tab 267mg	QL= 9 tabs/day
pirfenidone tab 801mg	QL= 3 tabs/day
pomalidomide cap	QL= 21 caps/28 days
PRECISION XTRA TEST STRIP	QL= 153 strips/30 days
pregabalin cap	QL= 3 caps/day
pregabalin cap 225mg	QL= 2 caps/day
pregabalin cap 300mg	QL= 2 caps/day
pregabalin soln	QL= 30ml/day
PRETOMANID TAB	QL= 1 tab/day
PREVYMIS PAK	QL= 4 packets/day; Limit 800 packets/365 days
PREVYMIS TAB	QL= 1 tab/day; Limit 200 tabs/365 days
prucalopride succinate tab	QL= 1 tab/day
pyrimethamine tab	QL= 3 tabs/day
PYRUKYND TAB	QL= 2 tabs/day
PYRUKYND TAPER PACK	QL= 1 tab/day
QINLOCK TAB	QL= 3 tabs/day
ramelteon tab	QL= 1 tab/day
REDEMPLO PFS INJ	QL = 1 inj/84 days
RELENZA DISKHALER	QL= 1 inhaler/fill
REPATHA INJ	QL= 2 inj/28 days; Step Therapy requires trial of atorvastatin, fluvastatin, lovastatin, pravastatin, rosuvastatin, or simvastatin
REVUFORJ TAB	QL= 2 tabs/day
REVUFORJ TAB 110MG	QL= 4 tabs/day
REVUFORJ TAB 25MG	QL= 8 tabs/day
REYVOW TAB	QL= 8 tabs/30 days, 6 fills/year
REZDIFFRA TAB	QL= 1 tab/day
REZLIDHIA CAP	QL= 2 caps/day
REZUROCK TAB	QL= 1 tab/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
rivaroxaban tab 2.5mg	QL= 2 tabs/day
rizatriptan ODT	QL= 12 tabs/fill, 3 fills/60 days
rizatriptan tab	QL= 12 tabs/fill, 3 fills/60 days
ROZLYTREK CAP	QL= 3 caps/day
ROZLYTREK PAK	QL= 6 packs/day
RUBRACA TAB	QL= 4 tabs/day
RYDAPT CAP	QL= 56 caps/28 days
sacubitril-valsartan tab	QL= 2 tabs/day
SANCUSO PATCH	QL= 4 patches/fill
SANTYL OINT	QL= 90gm/30 days
SAVELLA TAB	QL= 2 tabs/day
SCEMBLIX TAB	QL= 2 tabs/day
SCEMBLIX TAB 100 MG	QL= 4 tabs/day
SELARSDI SYRINGE	QL= 1 inj/84 days
SELARSDI SYRINGE 90MG/ML	QL= 1 inj/84 days
SIGNIFOR INJ	QL= 2 vials/day
sildenafil tab	QL= 6 tabs/30 days
sildenafil tab 20mg	QL= 12 tabs/day
SIMLANDI AUTO-INJECTOR KIT 40MG/0.4 ML	QL= 2 inj/28 days
SIMLANDI AUTO-INJECTOR KIT 80MG/0.8 ML	QL= 2 inj/28 days
SIMLANDI INJ (adalimumab-ryvk)	QL= 2 inj/28 days
SIMLANDI KIT (adalimumab-ryvk)	QL= 2 inj/28 days
SIMPONI AUTO-INJECTOR 100MG	QL=1 inj/28 days
SIMPONI INJ 100MG	QL=1 inj/28 days
sitagliptin phosphate tab	QL= 1 tab/day
sitagliptin phosphate-metformin hcl er tab	QL= 2 tabs/day
sitagliptin phosphate-metformin hcl tab	QL= 2 tabs/day
SIVEXTRO TAB	QL= 6 tabs/fill; Restricted to Infectious Disease Specialist
sodium oxybate oral soln	QL= 540ml/30 days
SODIUM OXYBATE SOLN	QL= 540ml/30 days
sodium/magnesium/potassium soln	$0 copay for members age 45-75 years; All other members covered at generic copay; Limited to 2 fills/calendar year
SOFOSBUVIR/VELPATASVIR TAB	QL= 1 tab/day
SOLIQUA INJ	QL= 15ml/25 days
SOLOSEC GRANULES PACKET	QL= 1 packet/fill
SOLU-CORTEF INJ	QL= 1 vial/fill
SOLU-CORTEF INJ 100MG	QL= 2 vials/fill
SPIKEVAX INJ	QL= 1 dose/24 days
SPIKEVAX INJ 50MCG/0.5ML	QL= 1 dose/24 days
SPINOSAD SUSP	QL= 1 bottle/fill

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
SPIRIVA RESPIMAT INHALER 1.25MCG/ACT	QL= 1 inhaler/30 days; Step Therapy requires trial of ADVAIR (FLUTICASONE/SALMETEROL), BREO (FLUTICASONE/VILANTEROL), DULERA (MOMETASONE/FORMOTEROL), or SYMBICORT (BUDESONIDE/FORMOTEROL)
STEQEYMA INJ	QL= 1 inj/84 days
STEQEYMA INJ 90MG	QL= 1 inj/84 days
STIVARGA TAB	QL= 4 tabs/day
STRIVERDI RESPIMAT INHALER	QL= 1 inhaler/30 days
sumatriptan inj	QL= 6 inj/fill, 3 fills/30 days
sumatriptan nasal spray	QL= 6 sprays/fill, 3 fills/30 days
sumatriptan tab	QL= 9 tabs/fill, 2 fills/30 days
sumatriptan vial inj	QL= 10 vials/fill, 2 fills/30 days
sunitinib malate cap	QL= 1 cap/day
SUNOSI TAB	QL= 1 tab/day
SYMDEKO TAB	QL= 2 tabs/day
SYMPROIC TAB	QL= 1 tab/day
tadalafil tab	QL= 6 tabs/30 days
tadalafil tab (PAH)	QL= 2 tabs/day
tadalafil tab 2.5mg, 5mg	QL= 1 tab/day
TAFINLAR CAP	QL= 4 caps/day
TAGRISSO TAB	QL= 1 tab/day
TALTZ INJ	QL= 1 inj/28 days
TALTZ INJ 20MG/0.25ML	QL= 1 inj/28 days
TALTZ INJ 40 MG/0.5ML	QL= 1 inj/28 days
TALZENNA CAP 0.25MG	QL= 3 caps/day
TALZENNA CAP 0.5MG, 0.75MG, 1MG	QL= 1 cap/day
TAVNEOS CAP	QL= 6 caps/day
TESTOSTERONE ENANTHATE INJ 200MG/ML	QL= 5ml/fill
testosterone gel 1% 25mg	QL= 1 packet/day
testosterone gel 1% 50mg	QL= 2 packets/day
testosterone gel 1% pump	QL= 4 bottles/30 days
testosterone gel 1.62% 1.25gm	QL= 1 packet/day
testosterone gel 1.62% 2.5gm	QL= 2 packets/day
TESTOSTERONE GEL 20.25MG/1.25GM	QL= 1 packet/day
TESTOSTERONE GEL PUMP 1%	QL= 4 bottles/30 days
testosterone gel pump 1.62%	QL= 2 bottles/30 days
testosterone soln	QL= 2 bottles/30 days
TIBSOVO TAB	QL= 2 tabs/day
TIROSINT-SOL	QL= 1ml/day; Prior Authorization required for members age 9 years and older
tofacitinib citrate ER tab	QL= 1 tab/day
tofacitinib citrate oral soln	QL= 10ml/day
tofacitinib citrate tab	QL= 2 tabs/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
TRADJENTA TAB	QL= 1 tab/day
travoprost ophth soln	QL= 2.5ml/30 days
TREMFYA INDUCTION INJ 200MG/ML	QL= 2 inj/28 days; 6 inj/year
TREMFYA INJ	QL= 1 inj/56 days
TREMFYA INJ 200MG/2ML	QL= 1 inj/28 days
TRIKAFTA TAB	QL= 84 tabs/28 days
TRIKAFTA THERAPY PACK	QL= 2 packets/day
TRULANCE TAB	QL= 1 tab/day
TRULICITY INJ	QL= 4 pens/28 days; Diagnosis Restricted- Type 2 Diabetes (E11) or MASH/NASH (K75.81)
TRUQAP TAB	QL= 64 tabs/28 days
TRUQAP THERAPY PACK	QL= 64 tabs/28 days
TRYNGOLZA INJ	QL= 1 inj/28 days
TUKYSA TAB	QL= 4 tabs/day
TURALIO CAP	QL= 4 caps/day
TWIIST REFILL KIT	QL= 1 kit/month
TWIIST STARTER KIT	QL= 1 kit/month
TYENNE INJ	QL= 2 inj/28 days
TYVASO DPI POWDER	QL= 4 cartridges/day
TYVASO DPI POWDER 48-80MCG	QL= 224 cartridges/28 days
TYVASO DPI POWDER MAINTENANCE KIT 32-48MCG	QL= 224 cartridges/28 days
TYVASO DPI POWDER MAINTENANCE KIT 32-64MCG	QL= 224 cartridges/28 days
TYVASO DPI POWDER MAINTENANCE KIT 48-64MCG	QL= 224 cartridges/28 days
TYVASO DPI POWDER TITRATION KIT 16-32-48MCG	QL= 252 cartridges/28 days
TYVASO INH SOLN 0.6 MG/ML	QL= 1 ampule/day
UBRELVY TAB	QL= 10 tabs/30 days, 6 fills/year
UPTRAVI TAB	QL= 2 tabs/day
UPTRAVI THERAPY PACK	QL= 2 tabs/day
VALCHLOR GEL	QL= 4 tubes/30 days
VALTOCO NASAL SPRAY	QL= 5 doses/fill
vancomycin cap	QL= 56 caps/fill
vardenafil ODT	QL= 6 tabs/30 days
vardenafil tab	QL= 6 tabs/30 days
VARENICLINE TAB	Limited to 180 days/plan year
varenicline tartrate tab	Limited to 180 days/plan year
varenicline tartrate tab starter pack	Limited to 180 days/plan year
VELTASSA POWDER	QL= 1 packet/day
VELTASSA POWDER 1GM	QL= 4 packets/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
VENTAVIS INH SOLN	QL= 9 ampules/day
VERZENIO TAB	QL= 2 tabs/day
VIJOICE TAB	QL= 1 tab/day
VIJOICE TAB 250MG	QL= 2 tabs/day
VITRAKVI CAP 100MG	QL= 2 caps/day
VITRAKVI CAP 25MG	QL= 6 caps/day
VITRAKVI SOLN	QL= 10ml/day
VIZIMPRO TAB	QL= 1 tab/day
VONJO CAP	QL= 4 caps/day
VOSEVI TAB	QL= 1 tab/day
VOWST CAP	QL= 12 caps/fill
VOXZOGO INJ	QL= 1 vial/day
VOYDEYA TAB	QL= 6 tabs/day
VOYDEYA TAB THERAPY PACK	QL= 6 tabs/day
VYNDAMAX CAP	QL= 1 cap/day
VYNDAQEL CAP	QL= 4 caps/day
VYVGART HYTRULO INJ	QL= 4 inj/28 days
WAKIX TAB	QL= 2 tabs/day
WELIREG TAB	QL= 3 tabs/day
XACIATO GEL	QL= 1 applicator/fill
XADAGO TAB	QL= 1 tab/day
XALKORI CAP	QL= 2 caps/day
XCOPRI PAK 100-150MG	QL= 2 tabs/day
XCOPRI PAK 150-200MG	QL= 2 tabs/day
XCOPRI TAB 150MG, 200MG	QL= 2 tabs/day
XCOPRI TAB 25MG	QL= 1 tab/day
XCOPRI TAB 50MG, 100MG	QL= 1 tab/day
XCOPRI TITRATION PAK 12.5-25MG	QL= 1 tab/day
XCOPRI TITRATION PAK 150-200MG	QL= 1 tab/day
XCOPRI TITRATION PAK 50-100MG	QL= 1 tab/day
XIFAXAN TAB 200MG	QL= 9 tabs/3 days
XIFAXAN TAB 550MG	QL= 60 tabs/30 days
XIGDUO XR TAB 2.5-1000	QL= 2 tabs/day
XOFLUZA TAB	QL= 1 tab/fill
XOLAIR INJ	QL= 2 inj/28 days
XOLAIR INJ 150MG/ML	QL= 2 inj/28 days
XOLAIR INJ 300MG/2ML	QL= 1 inj/28 days
XOLAIR SYRINGE	QL= 2 inj/28 days
XOLAIR SYRINGE 150MG/ML	QL= 2 inj/28 days
XOLAIR SYRINGE 300MG/2ML	QL= 1 inj/28 days
XOSPATA TAB	QL= 3 tabs/day
XPHOZAH TAB	QL= 2 tabs/day

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• The following drugs are covered on the formulary with a Quantity Limit.

Quantity Limit (QL) Medications

Drug Name	Quantity Limit
XPOVIO PAK	QL= 32 tabs/28 days
XTAMPZA ER CAP	QL= 120 caps/30 days; Step Therapy requires step through IR opioid if opioid naïve (Opioid ER Dependency)
XULTOPHY INJ	QL= 15ml/30 days
YESINTEK INJ	QL= 1 inj/84 days
YESINTEK SYRINGE	QL= 1 inj/84 days
YESINTEK SYRINGE 90MG	QL= 1 inj/84 days
YEZTUGO INJ	QL= 2 inj/180 days
YEZTUGO TAB	QL= 4 tabs/28 days
YUTREPIA CAP	QL= 112 caps/28 days
zaleplon cap	QL= 1 cap/day
ZAVZPRET NASAL SPRAY	QL= 6 units/fill; 60 units/365 days
ZEGALOGUE INJ	QL= 2 inj/fill
ZEJULA TAB	QL= 1 tab/day
ZELBORAF TAB	QL= 8 tabs/day
ZEPOSIA CAP	QL= 1 cap/day
ZEPOSIA STARTER PACK	QL= 1 cap/day
ZILBRYSQ INJ	QL= 1 inj/day
ZILBRYSQ INJ 23MG	QL= 1 inj/day
ZILBRYSQ INJ 32.4MG	QL= 1 inj/day
ZOKINVY CAP	QL= 4 caps/day
zolmitriptan nasal spray	QL= 6 sprays/fill, 2 fills/30 days
zolmitriptan ODT	QL= 9 tabs/fill, 2 fills/30 days
ZOLMITRIPTAN SPRAY	QL= 6 sprays/fill, 2 fills/30 days
zolmitriptan tab	QL= 9 tabs/fill, 2 fills/30 days
zolpidem ER tab	QL= 1 tab/day
zolpidem tab	QL= 1 tab/day
ZOMIG SPRAY	QL= 6 sprays/fill, 2 fills/30 days
ZORYVE CREAM	QL= 60 grams/30 days
ZORYVE FOAM	QL= 60 grams/30 days
ZTALMY SUSP	QL= 1100ml/30 days
ZURZUVAE CAP 20MG, 25MG	QL= 28 caps/365 days
ZURZUVAE CAP 30MG	QL= 14 caps/365 days
ZYKADIA TAB	QL= 3 tabs/day

Coverage of medications, including those not otherwise identified by qualifiers such as QL, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.** Products listed may not be all inclusive and are subject to change.