



# Preferred Drug List (PDL)

**Health Plan of  
Nevada**

**Effective Date: 1/1/2023**



**HEALTH PLAN OF NEVADA**  
A UnitedHealthcare Company





## HEALTH PLAN OF NEVADA

A UnitedHealthcare Company

# Preferred Drug List

## INTRODUCTION

Health Plan of Nevada Medicaid is pleased to provide this Preferred Drug List (**PDL**) to be used when prescribing for patients covered by the pharmacy benefit plan offered by Health Plan of Nevada Medicaid. The drugs listed in this **PDL** are intended to provide sufficient options to treat patients who require treatment with a drug from that pharmacologic or therapeutic class. The drugs listed in the Health Plan of Nevada Medicaid **PDL** have been reviewed and approved by the Pharmacy and Therapeutics Committee. The drugs have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through Health Plan of Nevada Medicaid. It is also recognized there may be occasions where an unlisted drug is desired for proper medical management of a specific patient. In those infrequent instances, the unlisted medication may be requested through the prior authorization process.

The drugs represented have been reviewed by the Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. The **PDL** is reflective of current medical practice as of the date of review.

This edition incorporates drugs added to the PDL since the last edition as well as numerous revisions to the prescribing information based on changes in pharmacotherapy. Comments and suggestions from practicing physicians have also been incorporated to ensure that the Health Plan of Nevada Medicaid PDL is reflective of current medical practice.

## NOTICE

The information contained in this PDL and its appendices is provided by Health Plan of Nevada Medicaid, solely for the convenience of medical providers. Health Plan of Nevada Medicaid does not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature.

This PDL is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in their choice of prescription drugs.

Health Plan of Nevada Medicaid assumes no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the Web sites listed in the Web site section or go to the National Guideline Clearinghouse site at <http://www.guideline.gov>.

## PREFACE

The Health Plan of Nevada Medicaid PDL is organized by sections. Each section includes therapeutic groups identified by either a drug class or disease state.

Products are listed by generic name. Brand names are included as a reference to assist in product recognition. Unless exceptions are noted, generally all applicable dosage forms and strengths of the drug cited are included in the PDL. Generics should be considered the first line of prescribing.

The Health Plan of Nevada Medicaid PDL covers selected over-the-counter (OTC) products. You are encouraged to prescribe OTC medications when clinically appropriate.

## PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The P&T Committee includes physicians and pharmacists who are not employees or agents of Health Plan of Nevada Medicaid or its affiliates. They must adhere to the Ethics Policy standards of the P&T Committee. Health Plan of Nevada Medicaid medical directors and pharmacists also participate in the P&T Committee. The P&T Committee meets quarterly to discuss a variety of issues. Those issues pertaining to pharmaceutical selection and pharmacy program management are communicated quarterly. This newsletter is distributed to all participating physicians who have received the PDL. PDL decisions are also communicated quarterly on the Health Plan of Nevada Medicaid internet site.

## **OUTPATIENT PRESCRIPTION DRUG BENEFIT-COVERED MEDICATIONS**

Medically necessary outpatient prescription drugs are covered when prescribed by a provider licensed to prescribe federal legend drugs or medicines. Some items are covered only with prior authorization. Eligibility for Outpatient Prescription Drug Benefits is based on the individual member's benefit plan.

# PRODUCT SELECTION CRITERIA

The P&T Committee considers clinical information on new-to-market drugs that are typically included in an outpatient pharmacy benefit. The evaluation includes all or part of the following:

- Safety
  - Efficacy
  - Comparison studies
  - Approved indications
  - Adverse effects
  - Contraindications/Warnings/Precautions
  - Pharmacokinetics
  - Patient administration/compliance considerations
  - Medical outcome and pharmacoeconomic studies

When a new drug is considered for PDL inclusion, it will be reviewed relative to similar drugs currently included in the Health Plan of Nevada Medicaid PDL. This review process may result in deletion of drug(s) in a particular therapeutic class in an effort to continually promote the most clinically useful and cost-effective agents.

All the information in the PDL is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

## **PDL PRODUCT DESCRIPTIONS**

To assist in understanding which specific strengths and dosage forms are covered on the PDL, examples are noted below. The general principles shown in the examples can then usually be extended to other entries in the book. Any exceptions are noted in the drug list. There may also be a statement associated with a drug list that gives additional information about which specific products or dosage forms are covered.

**Products covered include all strengths associated with the dosage form of the cited brand name product.**

carvedilol Coreg

All strengths of Coreg would be covered by this listing.  
**Extended-release and delayed-release products require their own entry.**

**diltiazem sustained release** CARDIZEM SR

**Dosage forms covered will be consistent with the category and use where listed.**

## **Neomycin/polymyxin B/ Hydrocortisone**

As listed in the OTIC section, this is limited to the otic solution and suspension. From this entry the ophthalmic solution and ointment, and the topical cream cannot be assumed to be on the list unless there are entries for these products in the OPHTHALMIC and DERMATOLOGY sections of the PDL.

**When a strength or dosage form is specified, only the specified strength and dosage form is on the PDL. Other strengths/dosage forms of the reference product are not**

**citalopram 40 mg tabs** Celexa tabs

## DRUG TIERS

The drugs listed in the PDL have different tiers. The tiers are listed in the grid below.

Tier Name	Drug Tier
Tier 1	Generic
Tier 2	Brand

## GENERIC SUBSTITUTION

The Health Plan of Nevada Medicaid PDL **requires** generic substitution on the majority of products when a generic equivalent is available.

Generic substitution is a pharmacy action whereby a generic equivalent is dispensed rather than the brand name product. The PDL indicates generic availability in the "Covered Drug" column.

If a brand name drug is medically necessary, please submit a prior authorization request.

The Health Plan of Nevada Medicaid MAC list sets a ceiling price for the reimbursement of certain multisource prescription drugs. This price will typically cover the acquisition of most generics but not branded versions of the same drug. The products selected for inclusion on the MAC list are commonly prescribed and dispensed and have usually gone through the FDA's review and approval process. An important consideration for generic substitution is the knowledge that all approvals of generic drugs by the FDA since 1984, and many generic approvals prior to 1984, have a showing of bioequivalence between the generic versions and the reference brand product. To gain FDA approval:

1. The generic drug must contain the same active ingredient(s), be the same strength and the same dosage form as the brand name product.
2. The FDA has given the generic an "A" rating compared to the branded product indicating bioequivalence, and has determined the generic is therapeutically equivalent to the reference brand. The ratings of generic drugs are available by referring to the FDA reference, Approved Drug Products with Therapeutic Equivalence Evaluations (Orange Book).

When the above two criteria are met, a generic can be substituted with the full expectation that the substituted product will produce the same clinical effect and safety profile as the prescribed product. Drug products that have a narrow therapeutic index (NTI) can also be guided by these principles. It is not necessary for the health care provider to approach any one therapeutic class of drug products (e.g., NTI drugs) differently from any other class, when there has been a determination of therapeutic equivalence by the FDA for the drug products under consideration. Also, additional clinical tests or examinations by the physician are not needed when a therapeutically equivalent generic drug product is substituted for the brand name product.

There are now many brand name products that are repackaged or distributed under a generic label. The generic label version should always be considered therapeutically equivalent and substitutable for the source branded product.

## **DRUG EFFICACY STUDY IMPLEMENTATION (DESI) DRUGS**

Drugs first marketed between 1938 and 1962 were approved as safe but required no showing of effectiveness for FDA approval. Beginning in 1962, all new drugs were required to be both safe and effective before they could be marketed. This legislation also applied retroactively to all drugs approved as safe from 1938-1962. The DESI program was established by the FDA to review the effectiveness of these pre-1962 drugs for their labeled indications, and a determination of "fully effective" was made for most of these products and they remain in the marketplace. A few DESI products remain classified as "less than fully effective" while awaiting final administrative disposition. Also, classified as DESI are many products listed as identical, similar, or related to actual DESI products. Health Plan of Nevada Medicaid's PDL does not cover DESI "less than fully effective" drug products.

## **PLAN EXCLUSIONS**

The following drug categories are excluded from coverage under the outpatient pharmacy benefit and are not part of the Health Plan of Nevada Medicaid PDL.

- DESI drugs
- Anti-obesity agents
- Experimental / research drugs

- Cosmetic drugs
- Nutritional / diet supplements
- Blood and blood plasma products
- Agents used to promote fertility
- Agents used for erectile dysfunction
- Agents used for cosmetic hair growth
- Drugs from manufacturers that do not participate in the FFS Medicaid Drug Rebate Program
- Diagnostic products
- Medical supplies and DME except as listed: insulin syringes, insulin needles, lancets, alcohol swabs, spacers, preferred diabetes test strips, peak flow meters (Astech, Assess, Peak Air brands, max two per year), vaporizer (limit of 1 per 3 years), humidifier (limit of 1 per 3 years)

## **DAYS SUPPLY DISPENSING LIMITATIONS**

Health Plan of Nevada Medicaid members may receive up to a one month supply of a specific medication per prescription order or prescription refill. A medication may be reordered or refilled when ninety percent (90%) of the medication has been utilized for a controlled substance and eighty-five percent (85%) of the medication has been utilized for a non-controlled substance. If a claim is submitted before 90% of the medication has been used for a controlled substance or before 85% of the medication has been used for a non-controlled substance, based on the original day supply submitted on the claim, the claim will reject with a "refill too soon" message.

## **MANDATORY GENERIC SUBSTITUTION**

The Health Plan of Nevada Medicaid **PDL** requires mandatory generic substitution on the vast majority of products when a generic equivalent is available; however, brand name drugs may be covered in certain situations by requesting a prior authorization. The Health Plan of Nevada Medicaid **PDL** prior authorization (PA) list does not include branded items where a generic equivalent is covered.

## **PRIOR AUTHORIZATION OF NON-PDL MEDICATIONS**

The drugs in the Health Plan of Nevada Medicaid PDL have been selected to provide the most clinically appropriate and cost-effective medications for patients who have their drug benefit administered through Health Plan of Nevada Medicaid. It is also recognized that there may be occasions where an unlisted drug is desired for the proper medical management of a specific patient. In those infrequent instances, the prior authorization process reviews requests for unlisted medications the physician may consider medically necessary for patient management.

Requests for these exceptions should be either made in writing by the physician and faxed or called into:

**Health Plan of Nevada Medicaid**  
**Fax 1-800-997-9672**  
**Phone 1-800-443-8197**

A prior authorization request form is available in the Health Plan of Nevada Medicaid provider manual and should be used for all prior authorization requests if possible.

Appropriate documentation must be provided to support the medical necessity of the non-PDL request. The Health Plan of Nevada Medicaid Pharmacy Department will respond to all requests in accordance with state requirements.

Physicians are requested to adhere to this PDL when prescribing for patients covered by their pharmacy benefit plan offered by Health Plan of Nevada Medicaid. If a pharmacist receives a prescription for a non-PDL drug, the pharmacist should contact the prescribing physician and request that the prescription be changed to a medication included in this PDL. If a PDL alternative is not appropriate the physician should then be instructed to contact the Plan for a prior authorization.

Please contact the Health Plan of Nevada Medicaid at 1-800-443-8197 with questions concerning the prior authorization process.

**NON-PDL DRUGS 4-DAY TEMPORARY SUPPLY OVERRIDES**

To ensure the use of PDL drugs, all non- PDL drugs should be discussed with the prescribing physician. **If you cannot speak to the physician immediately, and there is an immediate need for the medication, the claim processing system will accept an override to permit a one-time dispensing of a 4-day supply of the newly prescribed non-PDL drug.** The pharmacy should submit a claim for a 4 day supply, with a PA Type of 8 and Prior Authorization number of "00000000120". Please note that non-preferred drugs are available for a 4-day supply, however availability is subject to the benefit design. For assistance, pharmacies may call 1-800-443-8197.

**The pharmacy should** contact the physician to discuss a PDL drug or if a prior authorization request is warranted. If the prescribing physician feels a drug is medically necessary, the physician may fax a request for prior authorization to the Health Plan of Nevada Medicaid at 1-800-443-8197.

**QUANTITY LIMITATIONS (QL)**

Prescriptions for monthly quantities greater than the indicated limit require a prior authorization request.

**Quantity limits based on Efficient Medication Dosing**  
The Efficient Medication Dosing Program is designed to consolidate medication dosage to the most efficient daily quantity to increase adherence to therapy and also promote the efficient use of health care dollars.

The limits for the program are established based on FDA approval for dosing and the availability of the total daily

dose in the least amount of tablets or capsules daily. Quantity Limits in the prescription claims processing system will limit the dispensing to consolidate dosing. The pharmacy claims processing system will prompt the pharmacist to request a new prescription order from the physician.

**Controlled Substances**

You may fill any FOUR medications from the following classes in a 30-day period:

- benzodiazepines
- sedative hypnotic agents
- barbiturates
- select muscle relaxants

Additional fills will require prior authorization. Exceptions apply in opiate class for some diagnoses. Medications in these classes may also be subject to individual quantity limits.

Additions to the QL program drug list will be made from time to time and providers notified accordingly. As always, we recognize that a number of patient-specific variables must be taken into consideration when drug therapy is prescribed and therefore overrides will be available through the medical exception (prior authorization) process. Please contact the Health Plan of Nevada Medicaid at 1-800-443-8197 with questions.

**Specialty Pharmaceutical Management Program**

Health Plan of Nevada Medicaid is continuously looking for ways to provide high quality cost effective care for Plan members. The Specialty Pharmaceutical Management Program helps Health Plan of Nevada Medicaid to achieve these goals. Injectable medications that are part of this program require plan authorization and are not available through the retail pharmacy network.

To obtain authorization, the provider must submit the appropriate Prior Authorization form to the Health Plan of Nevada Medicaid via fax at 1-800-997-9672.

The Health Plan of Nevada Medicaid Pharmacy Department will review and respond to all requests in accordance with state requirements, and if authorized for payment, Health Plan of Nevada Medicaid will coordinate the delivery of the product to the member or provider.

Drugs that are part of this program and are on the PDL are identified in this booklet by the designation "SP".

Prior Authorization request forms can be requested by calling the Health Plan of Nevada Medicaid at 1-800-443-8197.

**MEDICATIONS REQUIRING DIAGNOSIS**

Health Plan of Nevada Medicaid requires that the diagnosis for prescriptions in certain classes match the FDA-approved use or a use supported by current published evidence. Drugs in scope will list "Diagnosis required" in the Requirements and Limits section on the PDL.

The diagnosis will be verified at the point-of-sale by the pharmacy claims processing system. If a matching

diagnosis is not found in the medical claim file or on the pharmacy drug claim, the prescription will be rejected at the pharmacy. The pharmacist may then contact the prescriber to verify the diagnosis and submit it on the claim.

If the diagnosis provided still does not match the approved use, prior authorization may be requested through the standard process by faxing a request to 866-940-7328.

### **STEP THERAPY (ST)**

The following PDL drugs are routinely covered only after a sufficient trial of an indicated first-line agent has been adequately tried and failed. These medications may also be requested through the Prior authorization process. While lower cost PDL alternatives may be appropriate in many instances, other non- PDL alternatives are available with prior authorization (PA).

<b>STEP Drug</b>	<b>First-Line Agent(s)</b>	
<b>Amerge</b>	Trial at a minimum dose of 50mg of sumatriptan tablets.	<b>GLP-1/Insulin Combinations (Soliqua)</b> Trial of one drug from the following classes: GLP-1 or Basal Insulin
<b>Aricept 23mg</b>	90 day trial of Aricept 10mg daily	<b>lubiprostone</b> For opioid-induced constipation or chronic idiopathic constipation, trial of lactulose or polyethylene glycol
<b>Calcipotriene cream &amp; oint 0.005%</b>	Trial of two medium to high potency topical corticosteroids	<b>Motegrity</b> For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
<b>Calcitriol 3mcg/gm</b> <b>DPP4 Inhibitors (Nesina, Kazano, Oseni)</b>	Trial of two topical corticosteroids At least a 90 day trial of 1500mg/day of metformin.	<b>Movantik</b> For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
<b>Elidel</b>	Minimum age of 2. Trial of one topical corticosteroid.	<b>Trulance</b> For chronic idiopathic constipation or irritable bowel syndrome-constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
<b>Eucrisa</b>	Trial of a topical corticosteroid AND one of the following: Elidel or tacrolimus ointment	<b>Optivar</b> 14 day trial of ketotifen within previous 90 days required first.
<b>fenofibrate</b>	Fill of a statin or 90 days of gemfibrozil within the previous 180 days.	<b>Ranexa</b> Trial of one drug from the following classes: beta blockers, calcium channel blockers, long acting nitrates
<b>Fluticasone propionate/ salmeterol</b>	1) 30 day trial of one inhaled corticosteroid (e.g. Arnuity Ellipta, Asmanex) OR 2) 60 day trial of a long-acting beta2- agonist (e.g. Arcapta, Striverdi) OR 60 day trial of an orally inhaled anticholinergic agent (e.g. Incruse Ellipta, Atrovent, Combivent, Anoro Ellipta).	<b>Renvela</b> 8 week trial of calcium acetate
<b>GLP-1 Agonists (Adlyxin, Trulicity, Victoza 2-pack)</b>	At least a 90 day trial of 1500mg/day of metformin	<b>SGLT-2 Inhibitors (Steglatro, Segluromet)</b> At least a 90 day trial of 1500mg/day of metformin
		<b>tacrolimus 0.03%</b> Minimum age of 2. Trial of one topical corticosteroid.
		<b>tacrolimus 0.1%</b> Minimum age of 16. Trial of one topical corticosteroid.
		<b>tolterodine</b> 30 day trial of oxybutynin immediate release. Step Therapy only applies to members less than 65 years of age.
		<b>Trospium</b> 30 day trial of oxybutynin immediate release. Step Therapy only applies to members less than 65 years of age.
		<b>Uloric</b> 8 week trial of up to 600mg of allopurinol required first.
		<b>Xopenex Respules</b> 30 day trial of Albuterol 0.083% or 0.5% respules.

### **PDL SUGGESTIONS**

Providers who wish to propose PDL suggestions should forward the information to the United Healthcare Community Plan Director of Pharmacy Services by either mail or fax.

Attn: Director of Pharmacy Services  
United Healthcare Community Plan  
2 Allegheny Center  
Suite 600  
Pittsburgh, PA 15212  
Phone: 800-310-6826  
Email: [pdl\\_management@uhc.com](mailto:pdl_management@uhc.com)

Providers should furnish adequate documentation, such as clinical studies from the medical literature, in order for the request to be considered for PDL addition. This literature should include information documenting clinical necessity as well as therapeutic advantages over current PDL products. Suggestions received by Health Plan of Nevada Medicaid will be reviewed by the Pharmacy and Therapeutics Committee at the subsequent P&T Committee meeting.

## **EDITOR**

Your comments and suggestions regarding the Health Plan of Nevada Medicaid PDL are encouraged. Your input is vital to this PDL's continued success. All responses will be reviewed and considered. Please send your comments to:

United Healthcare Community Plan  
Director of Pharmacy Services  
2 Allegheny Center  
Suite 600  
Pittsburgh, PA 15212  
Phone: 800-310-6826

## **LEGEND**

#	Only the dosage forms/strengths of the brand name products noted are on the PDL
OTC	over-the-counter
Delayed-rel	delayed-release (also known as enteric coated)
EC	enteric-coated
ext-rel	extended-release (also known as sustained-release)
PA	Prior Authorization required
QL	Quantity Limits apply
ST	Step Therapy, see pages V-VI for details
SP	Specialty Pharmaceuticals, see pages IV-V for details

## **NOTICE**

*The information contained in this document is proprietary information. The information may not be copied in whole or in part without the written permission of Health Plan of Nevada Medicaid. All rights reserved.*

*The drug names listed here are the registered and/or unregistered trademarks of third-party pharmaceutical companies unrelated to and unaffiliated with Health Plan of Nevada Medicaid. These trademarked brand names are included here for informational purposes only and are not intended to imply or suggest any affiliation between Health Plan of Nevada Medicaid and such third-party pharmaceutical companies.*

If viewing this PDL via the Internet, please be advised that the PDL is updated periodically and changes may appear prior to their effective date to allow for notification.

## Health Plan of Nevada Medicaid

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## Informational Section

Drug Name	Drug Tier	Notes
<b>Analgesics</b>		
<b>Nonsteroidal Anti-inflammatory Drugs</b>		
<b>ADVIL JUNIOR STRENGTH (ibuprofen)</b>	Tier 2	QL
<b>ADVIL ORAL TABLET (ibuprofen)</b>	Tier 2	QL
<b>ALEVE ORAL TABLET (naproxen sodium)</b>	Tier 2	QL
<b>all day pain relief</b>	Tier 1	QL
<b>all day relief</b>	Tier 1	QL
<b>celecoxib oral</b>	Tier 1	QL
<b>diclofenac potassium oral tablet 50 mg</b>	Tier 1	QL
<b>diclofenac sodium er</b>	Tier 1	QL
<b>diclofenac sodium external gel 1 %</b>	Tier 1	Brand OTC and Generic; QL
<b>diclofenac sodium external solution 1.5 %</b>	Tier 1	PA; QL
<b>diclofenac sodium oral</b>	Tier 1	QL
<b>ec-naproxen</b>	Tier 1	QL
<b>etodolac</b>	Tier 1	QL
<b>ibuprofen</b>	Tier 1	QL
<b>ibu-200</b>	Tier 1	QL
<b>ibuprofen childrens oral tablet chewable 100 mg</b>	Tier 1	QL
<b>ibuprofen ib childrens</b>	Tier 1	QL
<b>ibuprofen ib oral tablet 200 mg</b>	Tier 1	QL
<b>ibuprofen infants oral suspension 50 mg/1.25ml</b>	Tier 1	QL
<b>ibuprofen jr oral tablet 100 mg</b>	Tier 1	QL
<b>ibuprofen junior</b>	Tier 1	QL
<b>ibuprofen junior strength</b>	Tier 1	QL
<b>ibuprofen oral suspension 100 mg/5ml</b>	Tier 1	QL
<b>ibuprofen oral tablet</b>	Tier 1	QL
<b>indomethacin oral capsule 25 mg, 50 mg</b>	Tier 1	QL
<b>INFANTS ADVIL (ibuprofen)</b>	Tier 2	QL
<b>infants ibuprofen</b>	Tier 1	QL
<b>ketoprofen oral capsule 50 mg</b>	Tier 1	QL
<b>ketorolac tromethamine oral</b>	Tier 1	QL
<b>mediproxen</b>	Tier 1	QL
<b>meloxicam oral tablet</b>	Tier 1	QL
<b>MOTRIN CHILDRENS (ibuprofen)</b>	Tier 2	QL
<b>MOTRIN IB ORAL TABLET (ibuprofen)</b>	Tier 2	QL
<b>MOTRIN INFANTS DROPS (ibuprofen)</b>	Tier 2	QL
<b>nabumetone oral</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>naproxen oral suspension</i>	Tier 1	QL; AL
<i>naproxen oral tablet</i>	Tier 1	QL
<i>naproxen oral tablet delayed release</i>	Tier 1	QL
<i>naproxen sodium oral tablet 220 mg</i>	Tier 1	QL
<i>oxaprozin</i>	Tier 1	QL
<i>piroxicam oral</i>	Tier 1	QL
<i>sulindac oral</i>	Tier 1	QL
<b>Opioid Analgesics, Long-acting</b>		
<i>buprenorphine</i>	Tier 1	PA; QL
<i>fentanyl transdermal patch 72 hour 100 mcg/hr, 12 mcg/hr, 25 mcg/hr, 50 mcg/hr, 75 mcg/hr</i>	Tier 1	PA; QL
<i>morphine sulfate er oral tablet extended release</i>	Tier 1	PA; QL
<i>oxymorphone hcl er</i>	Tier 1	PA; QL
<b>Opioid Analgesics, Short-acting</b>		
<i>acetaminophen-codeine</i>	Tier 1	QL; ARL
<i>acetaminophen-codeine #2</i>	Tier 1	QL; ARL
<i>acetaminophen-codeine #3</i>	Tier 1	QL; ARL
<i>acetaminophen-codeine #4</i>	Tier 1	QL; ARL
<i>ascomp-codeine</i>	Tier 1	QL
<i>bac</i>	Tier 1	QL
<i>butalbital-acetaminophen oral tablet 50-325 mg</i>	Tier 1	QL
<i>butalbital-apap-caff-cod oral capsule 50-325-40-30 mg</i>	Tier 1	QL
<i>butalbital-apap-caffeine oral capsule 50-325-40 mg</i>	Tier 1	QL
<i>butalbital-apap-caffeine oral tablet</i>	Tier 1	QL
<i>butalbital-asa-caff-codeine</i>	Tier 1	QL
<i>butalbital-aspirin-caffeine</i>	Tier 1	QL
<i>butorphanol tartrate nasal</i>	Tier 1	QL
<i>codeine sulfate oral tablet 30 mg, 60 mg</i>	Tier 1	QL; ARL
<i>endocet oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 1	QL; ARL
<i>hydrocodone-acetaminophen oral solution 7.5-325 mg/15ml</i>	Tier 1	QL; ARL
<i>hydrocodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</i>	Tier 1	QL; ARL
<i>hydromorphone hcl oral</i>	Tier 1	QL; ARL
<i>hydromorphone hcl rectal</i>	Tier 1	QL; ARL
<i>morphine sulfate (concentrate)</i>	Tier 1	QL; ARL
<i>morphine sulfate oral</i>	Tier 1	QL; ARL
<i>morphine sulfate rectal</i>	Tier 1	QL; ARL

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Drug Name	Drug Tier	Notes
<b>oxycodone hcl oral concentrate 100 mg/5ml</b>	Tier 1	QL; ARL
<b>oxycodone hcl oral solution</b>	Tier 1	QL; ARL
OXYCODONE-ACETAMINOPHEN ORAL SOLUTION 5-325 MG/5ML	Tier 2	QL; ARL
<b>oxycodone-acetaminophen oral tablet 10-325 mg, 5-325 mg, 7.5-325 mg</b>	Tier 1	QL; ARL
<b>pentazocine-naloxone hcl</b>	Tier 1	QL; ARL
<b>TENCON (butalbital-acetaminophen)</b>	Tier 2	QL
<b>tramadol hcl oral tablet 50 mg</b>	Tier 1	QL; ARL
<b>Opioid Dependence Treatments - Antidotes/Deterrents/Protectants</b>		
<b>buprenorphine hcl sublingual</b>	Tier 1	QL
<b>Analgesics - Drugs to Treat Pain, Inflammation, and Muscle and Joint Conditions</b>		
<b>Analgesics - Miscellaneous Analgesics</b>		
<b>8 hour arthritis pain</b>	Tier 1	QL
<b>8 hour arthritis pain reliever</b>	Tier 1	QL
<b>8 hour arthritis relief</b>	Tier 1	QL
<b>8 hour pain relief oral tablet extended release 650 mg</b>	Tier 1	QL
<b>8 hour pain reliever</b>	Tier 1	QL
<b>8 hr arthritis pain relief</b>	Tier 1	QL
<b>8hr arthritis pain relief</b>	Tier 1	QL
<b>8hr muscle aches &amp; pain</b>	Tier 1	QL
<b>acetaminophen 8 hour</b>	Tier 1	QL
<b>acetaminophen 8 hours</b>	Tier 1	QL
<b>acetaminophen 8hr arth pain</b>	Tier 1	QL
<b>acetaminophen 8hr musc ache</b>	Tier 1	QL
<b>acetaminophen childrens</b>	Tier 1	QL
<b>acetaminophen childrens oral suspension 160 mg/5ml</b>	Tier 1	QL
<b>acetaminophen childrens oral tablet chewable 160 mg</b>	Tier 1	QL
<b>acetaminophen er</b>	Tier 1	QL
<b>acetaminophen ex st oral liquid 500 mg/15ml</b>	Tier 1	
<b>acetaminophen ex st oral tablet 500 mg</b>	Tier 1	QL
<b>acetaminophen extra strength</b>	Tier 1	QL
<b>acetaminophen infants</b>	Tier 1	QL
<b>acetaminophen oral liquid 160 mg/5ml</b>	Tier 1	QL
<b>acetaminophen oral liquid 500 mg/15ml</b>	Tier 1	
<b>acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>acetaminophen oral suspension 160 mg/5ml, 650 mg/20.3ml</i>	Tier 1	QL
<i>acetaminophen oral tablet 325 mg, 500 mg</i>	Tier 1	QL
<i>acetaminophen oral tablet chewable 160 mg</i>	Tier 1	QL
<i>acetaminophen rectal suppository 120 mg, 650 mg</i>	Tier 1	QL
<i>apra</i>	Tier 1	QL
<i>arthritis pain oral tablet extended release 650 mg</i>	Tier 1	QL
<i>arthritis pain relief oral tablet extended release 650 mg</i>	Tier 1	QL
<i>arthritis pain reliever oral</i>	Tier 1	QL
<i>betatemp childrens</i>	Tier 1	QL
<i>childrens acetaminophen</i>	Tier 1	QL
<i>childrens apap</i>	Tier 1	QL
<i>childrens non-aspirin</i>	Tier 1	QL
<i>childrens silapap</i>	Tier 1	QL
<i>child's non-aspirin</i>	Tier 1	QL
<i>ed-apap</i>	Tier 1	QL
<b><i>EXCEDRIN EXTRA STRENGTH (aspirin-acetaminophen-caffeine)</i></b>	Tier 2	
<b><i>EXCEDRIN MIGRAINE (aspirin-acetaminophen-caffeine)</i></b>	Tier 2	
<i>fever reducer/pain reliever</i>	Tier 1	QL
<i>fever reducing childrens</i>	Tier 1	QL
<i>feverall adults</i>	Tier 1	QL
<i>feverall childrens</i>	Tier 1	QL
<b><i>FEVERALL INFANTS (acetaminophen)</i></b>	Tier 2	QL
<b><i>FEVERALL JUNIOR STRENGTH (acetaminophen)</i></b>	Tier 2	QL
<i>headache formula</i>	Tier 1	
<i>headache relief</i>	Tier 1	
<i>headache relief extra str</i>	Tier 1	
<i>infants pain &amp; fever</i>	Tier 1	QL
<i>infants pain relief drops</i>	Tier 1	QL
<i>infants pain/fever</i>	Tier 1	QL
<i>liquid acetaminophen</i>	Tier 1	QL
<i>liquid pain relief</i>	Tier 1	QL
<i>mapap acetaminophen extra str</i>	Tier 1	
<i>mapap arthritis pain</i>	Tier 1	QL
<i>mapap childrens</i>	Tier 1	QL
<i>mapap oral capsule</i>	Tier 1	QL
<i>migraine formula</i>	Tier 1	

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Drug Name	Drug Tier	Notes
migraine headache relief	Tier 1	
migraine relief	Tier 1	
mm acetaminophen ex str	Tier 1	QL
mm arthritis pain	Tier 1	QL
m-pap	Tier 1	QL
non-aspirin	Tier 1	QL
non-aspirin 8 hour	Tier 1	QL
non-aspirin childrens	Tier 1	QL
non-aspirin extra strength	Tier 1	QL
non-aspirin jr strength	Tier 1	QL
non-aspirin pain relief	Tier 1	QL
pain & fever child	Tier 1	QL
pain & fever childrens oral suspension 160 mg/5ml	Tier 1	QL
pain & fever infants	Tier 1	QL
pain relief childrens	Tier 1	QL
pain relief childrens oral tablet chewable 160 mg	Tier 1	QL
pain relief extra st	Tier 1	QL
pain relief extra strength oral capsule 500 mg	Tier 1	QL
pain relief extra strength oral liquid 500 mg/15ml	Tier 1	
pain relief extra strength oral tablet 500 mg	Tier 1	QL
pain relief infants oral suspension 160 mg/5ml	Tier 1	QL
pain relief oral liquid 500 mg/15ml	Tier 1	
pain relief oral tablet 325 mg, 500 mg	Tier 1	QL
pain relief oral tablet extended release 650 mg	Tier 1	QL
pain relief regular st	Tier 1	QL
pain relief regular strength	Tier 1	QL
pain relief/rapid burst	Tier 1	
pain relieve child dye-free	Tier 1	QL
pain reliever childrens oral suspension 160 mg/5ml	Tier 1	QL
pain reliever ex st oral liquid 500 mg/15ml	Tier 1	
pain reliever ex st oral tablet 500 mg	Tier 1	QL
pain reliever extra strength oral tablet 250-250-65 mg	Tier 1	
pain reliever extra strength oral tablet 500 mg	Tier 1	QL
pain reliever oral tablet	Tier 1	QL
pain reliever plus	Tier 1	
pain-off	Tier 1	

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Drug Name	Drug Tier	Notes
<b>PANADOL CHILDRENS (acetaminophen)</b>	Tier 2	QL
<b>PANADOL EXTRA STRENGTH (acetaminophen)</b>	Tier 2	QL
<b>PANADOL INFANTS (acetaminophen)</b>	Tier 2	QL
<b>PHARBETOL EXTRA STRENGTH (acetaminophen)</b>	Tier 2	QL
<b>PHARBETOL ORAL TABLET 325 MG (acetaminophen)</b>	Tier 2	QL
<b>sb arthritis pain relief</b>	Tier 1	QL
<b>sb pain reliever childrens</b>	Tier 1	QL
<b>TYLENOL FOR CHILDREN + ADULTS (acetaminophen)</b>	Tier 2	QL
<b>TYLENOL ORAL SUSPENSION 160 MG/5ML (acetaminophen)</b>	Tier 2	QL
<b>TYLENOL ORAL TABLET 325 MG, 500 MG (acetaminophen)</b>	Tier 2	QL
<b>TYLENOL ORAL TABLET CHEWABLE 160 MG (acetaminophen)</b>	Tier 2	QL
<b>TYLENOL ORAL TABLET EXTENDED RELEASE 650 MG (acetaminophen)</b>	Tier 2	QL
<b>Nonsteroidal Anti-Inflammatory Drugs - Pain/Anti-Inflammatory Drugs</b>		
<b>salsalate oral</b>	Tier 1	QL
<b>Opioid Analgesics, Short-acting</b>		
<b>oxycodone hcl oral tablet</b>	Tier 1	QL; ARL
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
<b>anecream external cream</b>	Tier 1	QL
<b>blue tube/ aloe</b>	Tier 1	QL
<b>lidocaine external cream 4 %</b>	Tier 1	QL
<b>lidocaine external patch 5 %</b>	Tier 1	DX2RX; QL
<b>lidocaine hcl external cream 3 %</b>	Tier 1	QL
<b>lidocaine hcl urethral/mucosal external gel</b>	Tier 1	QL
<b>lidocaine viscous hcl</b>	Tier 1	QL
<b>lidocaine-prilocaine external cream</b>	Tier 1	QL
<b>lidopin external cream 3 %</b>	Tier 1	QL
<b>LMX 4 (lidocaine)</b>	Tier 2	QL
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
<b>acamprosate calcium</b>	Tier 1	QL
<b>disulfiram oral tablet 250 mg</b>	Tier 1	QL
<b>disulfiram oral tablet 500 mg</b>	Tier 1	
<b>naltrexone hcl oral</b>	Tier 1	
<b>Opioid Dependence</b>		

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Drug Name	Drug Tier	Notes
<i>buprenorphine hcl-naloxone hcl sublingual film 2-0.5 mg, 8-2 mg</i>	Tier 1	QL
<i>buprenorphine hcl-naloxone hcl sublingual tablet sublingual</i>	Tier 1	QL
<b>Opioid Reversal Agents</b>		
<i>naloxone hcl injection</i>	Tier 1	QL
<i>naloxone hcl nasal</i>	Tier 1	QL
<b>Smoking Cessation Agents</b>		
<i>habitrol</i>	Tier 1	QL
<i>NICODERM CQ (nicotine)</i>	Tier 2	QL
<i>nicotine step 1</i>	Tier 1	QL
<i>nicotine step 2</i>	Tier 1	QL
<i>nicotine step 3</i>	Tier 1	QL
<i>nicotine transdermal patch 24 hour 14 mg/24hr, 21 mg/24hr, 7 mg/24hr</i>	Tier 1	QL
<i>nicotine transdermal system</i>	Tier 1	QL
<i>varenicline tartrate</i>	Tier 1	PA; QL
<b>Anti-Addiction/Substance Abuse Treatment Agents - Drugs for Overdose or Deterrence</b>		
<b>Smoking Cessation Agents - Deterrents</b>		
<i>mini nicotine</i>	Tier 1	QL
<i>NICORETTE (nicotine polacrilex)</i>	Tier 2	QL
<i>NICORETTE MINI (nicotine polacrilex)</i>	Tier 2	QL
<i>NICORETTE STARTER KIT (nicotine polacrilex)</i>	Tier 2	QL
<i>nicotine gum mouth/throat gum 2 mg, 4 mg</i>	Tier 1	QL
<i>nicotine gum mouth/throat lozenge 2 mg, 4 mg</i>	Tier 1	QL
<i>nicotine mini</i>	Tier 1	QL
<i>nicotine mouth/throat gum 2 mg, 4 mg</i>	Tier 1	QL
<i>nicotine mouth/throat lozenge 2 mg, 4 mg</i>	Tier 1	QL
<i>nicotine polacrilex mini</i>	Tier 1	QL
<i>nicotine polacrilex mouth/throat</i>	Tier 1	QL
<i>quit2</i>	Tier 1	QL
<i>quit4</i>	Tier 1	QL
<i>THRIVE (nicotine polacrilex)</i>	Tier 2	QL
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
<i>neomycin sulfate oral</i>	Tier 1	QL
<i>paromomycin sulfate oral</i>	Tier 1	QL
<b>Antibacterials, Other</b>		

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Drug Name	Drug Tier	Notes
<i>clindamycin hcl oral capsule 150 mg, 300 mg</i>	Tier 1	QL
<i>clindamycin palmitate hcl</i>	Tier 1	QL
<i>clindamycin phosphate vaginal</i>	Tier 1	QL
<i>FIRVANQ (vancomycin hcl)</i>	Tier 2	DX2RX; QL
<i>linezolid oral suspension reconstituted</i>	Tier 1	PA; QL
<i>linezolid oral tablet</i>	Tier 1	PA
<i>methenamine hippurate</i>	Tier 1	QL
<i>metronidazole external</i>	Tier 1	QL
<i>metronidazole oral tablet</i>	Tier 1	QL
<i>metronidazole vaginal</i>	Tier 1	QL
<i>nitrofurantoin</i>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<i>nitrofurantoin macrocrystal</i>	Tier 1	QL
<i>nitrofurantoin monohydrate macrocrystals</i>	Tier 1	QL
<i>rosadan external cream</i>	Tier 1	QL
<i>rosadan external gel</i>	Tier 1	QL
<i>trimethoprim oral</i>	Tier 1	QL
<i>vandazole</i>	Tier 1	QL
<b>Beta-lactam, Cephalosporins</b>		
<i>cefaclor oral capsule</i>	Tier 1	QL
<i>cefadroxil</i>	Tier 1	QL
<i>cefdinir</i>	Tier 1	QL
<i>cefixime oral capsule</i>	Tier 1	QL
<i>cefprozil</i>	Tier 1	QL
<i>cefuroxime axetil</i>	Tier 1	QL
<i>cephalexin oral capsule 250 mg, 500 mg</i>	Tier 1	QL
<i>cephalexin oral capsule 750 mg</i>	Tier 1	
<i>cephalexin oral suspension reconstituted</i>	Tier 1	QL
<b>Beta-lactam, Penicillins</b>		
<i>amoxicillin oral capsule</i>	Tier 1	QL
<i>amoxicillin oral suspension reconstituted</i>	Tier 1	QL
<i>amoxicillin oral tablet 875 mg</i>	Tier 1	QL
<i>amoxicillin oral tablet chewable</i>	Tier 1	QL
<i>amoxicillin-potassium clavulanate</i>	Tier 1	QL
<i>ampicillin</i>	Tier 1	QL
<i>dicloxacillin sodium</i>	Tier 1	QL
<i>penicillin v potassium</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>Macrolides</b>		
<i>azithromycin oral suspension reconstituted</i>	Tier 1	QL
<i>azithromycin oral tablet</i>	Tier 1	QL
<i>clarithromycin er</i>	Tier 1	QL
<i>clarithromycin oral</i>	Tier 1	QL
<i>DIFICID (fidaxomicin)</i>	Tier 2	PA; QL
<i>E.E.S. 400 (erythromycin ethylsuccinate)</i>	Tier 2	QL
<i>ERYTHROCIN STEARATE (erythromycin stearate)</i>	Tier 2	QL
<i>erythromycin base oral</i>	Tier 1	QL
<i>erythromycin ethylsuccinate oral</i>	Tier 1	QL
<i>erythromycin oral</i>	Tier 1	QL
<b>Quinolones</b>		
<i>CIPRO ORAL SUSPENSION RECONSTITUTED (ciprofloxacin)</i>	Tier 2	QL
<i>ciprofloxacin hcl oral</i>	Tier 1	QL
<i>levofloxacin oral tablet</i>	Tier 1	QL
<i>ofloxacin oral</i>	Tier 1	QL
<b>Sulfonamides</b>		
<i>sulfamethoxazole-trimethoprim oral</i>	Tier 1	QL
<i>sulfatrim pediatric</i>	Tier 1	QL
<b>Tetracyclines</b>		
<i>doxycycline hyclate oral capsule</i>	Tier 1	QL
<i>doxycycline hyclate oral tablet 100 mg</i>	Tier 1	QL
<i>doxycycline monohydrate oral capsule 100 mg, 50 mg</i>	Tier 1	QL
<i>LYMEPAK (doxycycline hyclate)</i>	Tier 2	QL
<i>minocycline hcl oral capsule 100 mg, 50 mg</i>	Tier 1	QL
<i>monodoxine nl</i>	Tier 1	QL
<i>NUZYRA ORAL (omadacycline tosylate)</i>	Tier 2	PA; QL
<b>Antibacterials - Drugs to Treat Bacterial Infections</b>		
<b>Antibacterials, Other - Antibiotics</b>		
<i>antibiotic</i>	Tier 1	QL
<i>antiseptic</i>	Tier 1	
<i>BETADINE EXTERNAL SOLUTION 10 % (povidone-iodine)</i>	Tier 2	
<i>first aid antibiotic external ointment 3.5-400-5000 , 3.5-400-5000 mg-unit</i>	Tier 1	QL
<i>first aid antiseptic external solution 10 %</i>	Tier 1	
<i>medi-first triple antibiotic</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>NEOSPORIN ORIGINAL (neomycin-bacitracin-polymyxin)</b>	Tier 2	QL
<b>povidone iodine</b>	Tier 1	
<b>povidone-iodine external solution</b>	Tier 1	
<b>SCRUB CARE POVIDONE-IODINE (povidone-iodine)</b>	Tier 2	
<b>triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000</b>	Tier 1	QL
<b>triple antibiotic original</b>	Tier 1	QL
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		
<b>felbamate oral suspension</b>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<b>felbamate oral tablet</b>	Tier 1	QL
<b>lamotrigine oral tablet</b>	Tier 1	QL
<b>lamotrigine oral tablet chewable</b>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<b>lamotrigine starter kit-blue</b>	Tier 1	QL
<b>lamotrigine starter kit-green</b>	Tier 1	QL
<b>lamotrigine starter kit-orange</b>	Tier 1	QL
<b>levetiracetam oral solution</b>	Tier 1	Maximum age of 9 years for solution; QL; AL
<b>levetiracetam oral tablet</b>	Tier 1	QL
<b>roweepra</b>	Tier 1	QL
<b>subvenite</b>	Tier 1	QL
<b>subvenite starter kit-blue</b>	Tier 1	QL
<b>subvenite starter kit-green</b>	Tier 1	QL
<b>subvenite starter kit-orange</b>	Tier 1	QL
<b>topiramate oral capsule sprinkle</b>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<b>topiramate oral tablet</b>	Tier 1	QL
<b>valproic acid oral</b>	Tier 1	QL
<b>Calcium Channel Modifying Agents</b>		
<b>CELONTIN (methsuximide)</b>	Tier 2	QL
<b>ethosuximide oral</b>	Tier 1	QL
<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
<b>clobazam</b>	Tier 1	DX2RX; QL
<b>diazepam rectal</b>	Tier 1	QL
<b> gabapentin oral capsule</b>	Tier 1	QL
<b> gabapentin oral tablet 600 mg, 800 mg</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>NAYZILAM (midazolam (anticonvulsant))</b>	Tier 2	PA; QL
<b>phenobarbital oral</b>	Tier 1	QL
<b>primidone oral</b>	Tier 1	QL
<b>tiagabine hcl</b>	Tier 1	PA; QL; AL
<b>vigabatrin oral packet</b>	Tier 1	PA; SP; QL
<b>vigadron</b>	Tier 1	PA; SP; QL
<b>Sodium Channel Agents</b>		
<b>carbamazepine er</b>	Tier 1	QL
<b>carbamazepine oral</b>	Tier 1	QL
<b>DILANTIN ORAL CAPSULE 30 MG (phenytoin sodium extended)</b>	Tier 2	
<b>epitol</b>	Tier 1	QL
<b>lacosamide oral tablet</b>	Tier 1	PA; QL; AL
<b>oxcarbazepine oral suspension</b>	Tier 1	Maximum age of 9 years for solution; QL; AL
<b>oxcarbazepine oral tablet</b>	Tier 1	QL
<b>phenytoin infatabs</b>	Tier 1	QL
<b>phenytoin oral suspension 125 mg/5ml</b>	Tier 1	QL
<b>phenytoin oral tablet chewable</b>	Tier 1	QL
<b>phenytoin sodium extended</b>	Tier 1	QL
<b>rufinamide</b>	Tier 1	DX2RX; QL
<b>TEGRETOL ORAL SUSPENSION (carbamazepine)</b>	Tier 2	QL
<b>zonisamide oral</b>	Tier 1	QL
<b>Antidementia Agents</b>		
<b>Cholinesterase Inhibitors</b>		
<b>donepezil hcl oral tablet 10 mg, 5 mg</b>	Tier 1	Members <18 years of age will require PA; QL; AL
<b>donepezil hcl oral tablet 23 mg</b>	Tier 1	ST; Members <18 years of age will require PA; QL; AL
<b>galantamine hydrobromide oral solution</b>	Tier 1	QL; AL
<b>galantamine hydrobromide oral tablet 12 mg, 8 mg</b>	Tier 1	QL; AL
<b>galantamine hydrobromide oral tablet 4 mg</b>	Tier 1	Members <18 years of age will require PA; QL; AL
<b>rivastigmine</b>	Tier 1	Members <18 years of age will require PA; QL; AL
<b>rivastigmine tartrate</b>	Tier 1	QL; AL
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
<b>memantine hcl oral solution</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>memantine hcl oral tablet</i>	Tier 1	Members <18 years of age will require PA; QL; AL
<b>Antidepressants</b>		
<b>Antidepressants, Other</b>		
<i>bupropion hcl er (sr)</i>	Tier 1	QL
<i>bupropion hcl er (xl) oral tablet extended release 24 hour 150 mg, 300 mg</i>	Tier 1	QL
<i>bupropion hcl oral</i>	Tier 1	QL
<i>mirtazapine oral tablet 15 mg, 30 mg</i>	Tier 1	Tabs (not soltabs); QL
<i>mirtazapine oral tablet 45 mg, 7.5 mg</i>	Tier 1	QL
<i>perphenazine-amitriptyline oral tablet 2-10 mg, 4-10 mg, 4-25 mg, 4-50 mg</i>	Tier 1	
<i>perphenazine-amitriptyline oral tablet 2-25 mg</i>	Tier 1	QL
<b>Monoamine Oxidase Inhibitors</b>		
<i>tranylcypromine sulfate</i>	Tier 1	QL
<b>SSRI/SNRI (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitors)</b>		
<i>citalopram hydrobromide oral solution</i>	Tier 1	QL
<i>citalopram hydrobromide oral tablet</i>	Tier 1	QL
<i>escitalopram oxalate oral tablet</i>	Tier 1	QL
<i>fluoxetine hcl oral capsule 10 mg, 20 mg</i>	Tier 1	QL
<i>fluoxetine hcl oral capsule 40 mg</i>	Tier 1	
<i>fluoxetine hcl oral solution</i>	Tier 1	QL
<i>fluvoxamine maleate</i>	Tier 1	QL
<i>paroxetine hcl oral tablet</i>	Tier 1	QL
<i>sertraline hcl oral concentrate</i>	Tier 1	QL
<i>sertraline hcl oral tablet</i>	Tier 1	QL
<i>trazodone hcl oral tablet 100 mg, 150 mg, 50 mg</i>	Tier 1	QL
<i>venlafaxine hcl</i>	Tier 1	QL
<i>venlafaxine hcl er oral capsule extended release 24 hour</i>	Tier 1	QL
<b>Tricyclics</b>		
<i>amitriptyline hcl oral</i>	Tier 1	QL
<i>amoxapine</i>	Tier 1	QL
<i>desipramine hcl oral</i>	Tier 1	QL
<i>doxepin hcl oral capsule</i>	Tier 1	QL
<i>doxepin hcl oral concentrate</i>	Tier 1	QL
<i>imipramine hcl oral</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>nortriptyline hcl oral</i>	Tier 1	QL
<b>Antiemetics</b>		
<b>Antiemetics, Other</b>		
<i>BONINE (meclizine hcl)</i>	Tier 2	
<i>compro</i>	Tier 1	QL
<i>driminate</i>	Tier 1	
<i>meclizine hcl oral tablet</i>	Tier 1	QL
<i>meclizine hcl oral tablet chewable</i>	Tier 1	
<i>metoclopramide hcl oral solution</i>	Tier 1	QL
<i>metoclopramide hcl oral tablet</i>	Tier 1	QL
<i>motion sickness oral tablet 50 mg</i>	Tier 1	
<i>motion sickness relief oral tablet 50 mg</i>	Tier 1	
<i>motion sickness relief oral tablet chewable 25 mg</i>	Tier 1	
<i>motion-time</i>	Tier 1	
<i>perphenazine oral</i>	Tier 1	QL
<i>prochlorperazine</i>	Tier 1	QL
<i>prochlorperazine maleate oral</i>	Tier 1	QL
<i>promethazine hcl oral</i>	Tier 1	QL
<i>promethazine hcl rectal</i>	Tier 1	QL
<i>promethegan</i>	Tier 1	QL
<i>travel ease</i>	Tier 1	
<i>trimethobenzamide hcl oral</i>	Tier 1	QL
<b>Emetogenic Therapy Adjuncts</b>		
<i>aprepitant</i>	Tier 1	QL
<i>dronabinol</i>	Tier 1	PA; QL
<i>ondansetron hcl oral tablet 4 mg, 8 mg</i>	Tier 1	QL
<i>ondansetron odt</i>	Tier 1	QL
<b>Antiemetics - Drugs to Treat Nausea and Vomiting</b>		
<b>Antiemetics, Other - Nausea and Vomiting Drugs</b>		
<i>anti-nausea</i>	Tier 1	
<i>EMETROL (fructose-dextrose-phosphor acd)</i>	Tier 2	
<i>nausea control</i>	Tier 1	
<i>nausea relief</i>	Tier 1	
<b>Antifungals</b>		
<i>3 day</i>	Tier 1	
<i>clotrimazole mouth/throat troche 10 mg</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>fluconazole oral</i>	Tier 1	QL
<i>griseofulvin microsize oral</i>	Tier 1	QL
<i>griseofulvin ultramicrosize</i>	Tier 1	QL
<i>itraconazole oral</i>	Tier 1	PA; QL
<i>ketoconazole oral</i>	Tier 1	QL
<i>miconazole 3</i>	Tier 1	QL
<i>miconazole 3 applicator vaginal kit 200 &amp; 2 mg-% (9gm)</i>	Tier 1	QL
<i>miconazole 3 combo pack app</i>	Tier 1	QL
<i>miconazole 3 combo pack vaginal kit 200 &amp; 2 mg-% (9gm)</i>	Tier 1	QL
<i>miconazole 7 day treatment</i>	Tier 1	QL
<i>miconazole 7 vaginal cream 2 %</i>	Tier 1	QL
<i>miconazole 7 vaginal suppository 100 mg</i>	Tier 1	
<i>miconazole nitrate vaginal</i>	Tier 1	QL
<i>nystatin mouth/throat</i>	Tier 1	QL
<i>nystatin oral</i>	Tier 1	QL
<i>terbinafine hcl oral</i>	Tier 1	QL
<i>terconazole vaginal cream</i>	Tier 1	QL
<i>voriconazole oral tablet</i>	Tier 1	PA; QL

#### Antifungals - Drugs to Treat Fungal Infections

#### Antifungals - Fungal Infection Drugs

<i>3 day vaginal</i>	Tier 1	
<i>3-day vaginal vaginal cream 2 %</i>	Tier 1	
<i>antifungal external cream</i>	Tier 1	
<i>antifungal external powder</i>	Tier 1	QL
<i>antifungal foot care</i>	Tier 1	QL
<i>antifungal miconazole</i>	Tier 1	
<i>athletes foot</i>	Tier 1	
<i>athletes foot (terbinafine)</i>	Tier 1	QL
<i>athletes foot external aerosol powder 2 %</i>	Tier 1	
<i>athletes foot external cream 1 %</i>	Tier 1	QL
<i>athletes foot external powder 2 %</i>	Tier 1	QL
<i>athletes foot powder spray external aerosol powder 2 %</i>	Tier 1	
<i>athletes foot spray external aerosol 2 %</i>	Tier 1	
<i>CAVILON (miconazole nitrate)</i>	Tier 2	
<i>clotrimazole 3</i>	Tier 1	
<i>clotrimazole 7</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>clotrimazole vaginal</i>	Tier 1	QL
<i>clotrimazole vaginal cream 1 %</i>	Tier 1	QL
<i>CRUEX PRESCRIPTION STRENGTH (miconazole nitrate)</i>	Tier 2	
<i>DESENEX EXTERNAL POWDER (miconazole nitrate)</i>	Tier 2	QL
<i>DESENEX JOCK ITCH (miconazole nitrate)</i>	Tier 2	
<i>foot care (terbinafine)</i>	Tier 1	QL
<i>GYNE-LOTRIMIN (clotrimazole)</i>	Tier 2	QL
<i>GYNE-LOTRIMIN 3 (clotrimazole)</i>	Tier 2	
<i>jock itch external cream 1 %</i>	Tier 1	QL
<i>LAMISIL AT EXTERNAL CREAM (terbinafine hcl)</i>	Tier 2	QL
<i>LAMISIL AT JOCK ITCH (terbinafine hcl)</i>	Tier 2	QL
<i>micaderm</i>	Tier 1	
<i>MICATIN (miconazole nitrate)</i>	Tier 2	
<i>miconazole antifungal</i>	Tier 1	
<i>miconazole nitrate external cream</i>	Tier 1	
<i>miconazorb af</i>	Tier 1	QL
<i>MICOTRIN AP (miconazole nitrate)</i>	Tier 2	QL
<i>MYCOZYL AP (miconazole nitrate)</i>	Tier 2	QL
<i>terbinafine hcl external</i>	Tier 1	QL
<i>terbinafine hydrochloride external cream 1 %</i>	Tier 1	QL
<i>ZEASORB-AF (miconazole nitrate)</i>	Tier 2	QL
<b>Antigout Agents</b>		
<i>allopurinol oral tablet 100 mg, 300 mg</i>	Tier 1	QL
<i>febuxostat</i>	Tier 1	ST; QL
<i>MITIGARE (colchicine)</i>	Tier 2	QL
<i>probenecid</i>	Tier 1	QL
<b>Antimigraine Agents</b>		
<b>Ergot Alkaloids</b>		
<i>dihydroergotamine mesylate injection</i>	Tier 1	QL
<i>MIGERGOT (ergotamine-caffeine)</i>	Tier 2	QL
<b>Prophylactic</b>		
<i>AIMOVIG (erenumab-aooe)</i>	Tier 2	PA; QL
<i>EMGALITY (galcanezumab-gnlm)</i>	Tier 2	PA; QL
<i>EMGALITY (300 MG DOSE) (galcanezumab-gnlm)</i>	Tier 2	PA; QL
<b>Antimigraine Agents - Drugs to Treat Migraines</b>		
<b>Calcitonin Gene-Related Peptide (CGRP) Receptor Antagonist - Migraine Drugs</b>		

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Drug Name	Drug Tier	Notes
<b>NURTEC (rimegepant sulfate)</b>	Tier 2	PA; QL
<b>Serotonin (5-HT) Receptor Agonists - Migraine Drugs</b>		
<i>naratriptan hcl</i>	Tier 1	ST; QL
<i>rizatriptan benzoate</i>	Tier 1	QL
<i>sumatriptan nasal</i>	Tier 1	QL
<i>sumatriptan succinate oral</i>	Tier 1	QL
<i>sumatriptan succinate refill</i>	Tier 1	QL
<i>sumatriptan succinate subcutaneous</i>	Tier 1	QL
<b>Antimyasthenic Agents</b>		
<b>Parasympathomimetics</b>		
<i>pyridostigmine bromide er</i>	Tier 1	QL
<i>pyridostigmine bromide oral solution</i>	Tier 1	QL
<i>pyridostigmine bromide oral tablet 60 mg</i>	Tier 1	QL
<b>Antimycobacterials</b>		
<b>Antimycobacterials, Other</b>		
<i>dapsone oral</i>	Tier 1	QL
<i>rifabutin</i>	Tier 1	QL
<b>Antituberculars</b>		
<i>cycloserine oral</i>	Tier 1	QL
<i>ethambutol hcl oral tablet 100 mg</i>	Tier 1	
<i>ethambutol hcl oral tablet 400 mg</i>	Tier 1	QL
<i>isoniazid oral</i>	Tier 1	QL
<i>PASER (aminosalicylic acid)</i>	Tier 2	QL
<i>PRIFTIN (rifapentine)</i>	Tier 2	QL
<i>pyrazinamide oral</i>	Tier 1	QL
<i>rifampin oral</i>	Tier 1	QL
<i>SIRTURO (bedaquiline fumarate)</i>	Tier 2	QL
<i>TRECATOR (ethionamide)</i>	Tier 2	QL
<b>Antineoplastics</b>		
<b>Alkylating Agents</b>		
<i>cyclophosphamide oral capsule</i>	Tier 1	
CYCLOPHOSPHAMIDE ORAL TABLET	Tier 2	
<i>LEUKERAN (chlorambucil)</i>	Tier 2	
<i>MATULANE (procarbazine hcl)</i>	Tier 2	SP
<i>MYLERAN (busulfan)</i>	Tier 2	
<i>temozolomide</i>	Tier 1	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>Antiandrogens</b>		
<i>abiraterone acetate oral tablet 250 mg</i>	Tier 1	PA; SP; QL
<i>bicalutamide</i>	Tier 1	QL
<i>ERLEADA (apalutamide)</i>	Tier 2	PA; SP; QL
<i>flutamide</i>	Tier 1	QL
<i>NUBEQA (darolutamide)</i>	Tier 2	PA; SP; QL
<b>Antiangiogenic Agents</b>		
<i>lenalidomide</i>	Tier 1	PA; SP; QL
<i>POMALYST (pomalidomide)</i>	Tier 2	PA; SP; QL
<i>REVLIMID (lenalidomide)</i>	Tier 2	PA; SP; QL
<i>THALOMID (thalidomide)</i>	Tier 2	PA; SP; QL
<b>Antiestrogens/Modifiers</b>		
<i>tamoxifen citrate oral</i>	Tier 1	QL
<i>toremifene citrate</i>	Tier 1	QL
<b>Antimetabolites</b>		
<i>hydroxyurea oral</i>	Tier 1	QL
<i>mercaptopurine oral</i>	Tier 1	QL
<i>TABLOID (thioguanine)</i>	Tier 2	SP
<b>Antineoplastics, Other</b>		
<i>IDHIFA (enasidenib mesylate)</i>	Tier 2	PA; SP; QL
<i>LONSURF (trifluridine-tipiracil)</i>	Tier 2	PA; SP; QL
<i>NINLARO (ixazomib citrate)</i>	Tier 2	PA; SP; QL
<i>ZOLINZA (vorinostat)</i>	Tier 2	PA; SP; QL
<b>Aromatase Inhibitors, 3rd Generation</b>		
<i>anastrozole oral</i>	Tier 1	QL
<i>exemestane</i>	Tier 1	QL
<i>letrozole oral</i>	Tier 1	QL
<b>Enzyme Inhibitors</b>		
<i>etoposide oral</i>	Tier 1	
<i>HYCAMTIN ORAL (topotecan hcl)</i>	Tier 2	PA; SP
<b>Molecular Target Inhibitors</b>		
<i>BALVERSA ORAL TABLET 4 MG (erdafitinib)</i>	Tier 2	PA; SP; QL
<i>COTELLIC (cobimetinib fumarate)</i>	Tier 2	PA; SP; QL
<i>DAURISMO (glasdegib maleate)</i>	Tier 2	PA; SP; QL
<i>ERIVEDGE (vismodegib)</i>	Tier 2	PA; SP; QL
<i>everolimus oral tablet 10 mg, 2.5 mg, 5 mg</i>	Tier 1	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>everolimus oral tablet soluble</b>	Tier 1	PA; SP; QL
<b>IBRANCE (palbociclib)</b>	Tier 2	PA; SP; QL
<b>JAKAFI (ruxolitinib phosphate)</b>	Tier 2	PA; SP; QL
<b>KISQALI FEMARA (400 MG DOSE) (ribociclib-letrozole)</b>	Tier 2	PA; SP; QL
<b>KISQALI FEMARA (600 MG DOSE) (ribociclib-letrozole)</b>	Tier 2	PA; SP; QL
<b>KISQALI FEMARA(200 MG DOSE) (ribociclib-letrozole)</b>	Tier 2	PA; SP; QL
<b>LYNPARZA (olaparib)</b>	Tier 2	PA; SP; QL
<b>MEKINIST (trametinib dimethyl sulfoxide)</b>	Tier 2	PA; SP; QL
<b>ODOMZO (sonidegib phosphate)</b>	Tier 2	PA; SP; QL
<b>PIQRAY (200 MG DAILY DOSE) (alpelisib)</b>	Tier 2	PA; SP; QL
<b>PIQRAY (250 MG DAILY DOSE) (alpelisib)</b>	Tier 2	PA; SP; QL
<b>PIQRAY (300 MG DAILY DOSE) (alpelisib)</b>	Tier 2	PA; SP; QL
<b>ROZLYTREK (entrectinib)</b>	Tier 2	PA; SP; QL
<b>RUBRACA ORAL TABLET 200 MG, 300 MG (rucaparib camsylate)</b>	Tier 2	PA; SP; QL
<b>RYDAPT (midostaurin)</b>	Tier 2	PA; SP; QL
<b>sorafenib tosylate</b>	Tier 1	PA; SP; QL
<b>STIVARGA (regorafenib)</b>	Tier 2	PA; SP; QL
<b>sunitinib malate oral capsule 12.5 mg, 25 mg, 50 mg</b>	Tier 1	PA; SP; QL
<b>sunitinib malate oral capsule 37.5 mg</b>	Tier 1	PA; SP
<b>TAFINLAR (dabrafenib mesylate)</b>	Tier 2	PA; SP; QL
<b>TIBSOVO (ivosidenib)</b>	Tier 2	PA; SP; QL
<b>VENCLEXTA (venetoclax)</b>	Tier 2	PA; SP; QL
<b>VENCLEXTA STARTING PACK (venetoclax)</b>	Tier 2	PA; SP; QL
<b>VERZENIO (abemaciclib)</b>	Tier 2	PA; SP; QL
<b>VITRAKVI (larotrectinib sulfate)</b>	Tier 2	PA; SP; QL
<b>ZEJULA (niraparib tosylate)</b>	Tier 2	PA; SP; QL
<b>ZELBORAF (vemurafenib)</b>	Tier 2	PA; SP; QL
<b>ZYDELIG (idelalisib)</b>	Tier 2	PA; SP; QL
<b>Retinoids</b>		
<b>bexarotene</b>	Tier 1	PA; SP
<b>PANRETIN (alitretinoin)</b>	Tier 2	PA
<b>tretinoin oral</b>	Tier 1	SP
<b>Treatment Adjuncts</b>		
<b>leucovorin calcium oral tablet 10 mg</b>	Tier 1	
<b>leucovorin calcium oral tablet 15 mg, 25 mg, 5 mg</b>	Tier 1	QL
<b>MESNEX ORAL (mesna)</b>	Tier 2	SP

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Drug Name	Drug Tier	Notes
<b>Antineoplastics - Drugs to Treat Cancer</b>		
<b>Alkylating Agents - Chemotherapy Agents</b>		
<i>melphalan</i>	Tier 1	
<b>Antimetabolites - Chemotherapy Agents</b>		
<i>capecitabine</i>	Tier 1	SP
<b>Antineoplastics, Other - Chemotherapy Agents</b>		
<b>Antineoplastics - Drugs to Treat Cancer</b>		
<i>ZYKADIA (ceritinib)</i>	Tier 2	PA; SP; QL
<b>Antiparasitics</b>		
<b>Anthelmintics</b>		
<i>albendazole oral</i>	Tier 1	DX2RX; QL
<i>ivermectin oral</i>	Tier 1	DX2RX; QL
<i>praziquantel oral</i>	Tier 1	DX2RX; QL
<b>Antiprotozoals</b>		
<i>atovaquone</i>	Tier 1	PA; QL
BENZNIDAZOLE	Tier 2	DX2RX; QL
<i>chloroquine phosphate oral</i>	Tier 1	QL
<i>hydroxychloroquine sulfate oral tablet 200 mg</i>	Tier 1	QL
<i>KRINTAFEL (tafenoquine succinate)</i>	Tier 2	QL
<i>mefloquine hcl</i>	Tier 1	QL
<i>nitazoxanide oral</i>	Tier 1	DX2RX; QL
<i>pentamidine isethionate inhalation</i>	Tier 1	
<i>primaquine phosphate</i>	Tier 1	
<i>pyrimethamine oral</i>	Tier 1	PA; SP; QL
<b>Antiparasitics - Drugs to Treat Parasitic Infections</b>		
<b>Pediculicides/Scabicides - Scabies and Lice Drugs</b>		
<i>lice killing</i>	Tier 1	
<i>lice killing max st external shampoo 0.33-4 %</i>	Tier 1	
<i>lice killing max strength</i>	Tier 1	
<i>lice killing maximum strength</i>	Tier 1	
<i>lice maximum strength</i>	Tier 1	
<i>lice treatment external shampoo 0.33-4 %</i>	Tier 1	
<i>RID LICE KILLING SHAMPOO (pyrethrins-piperonyl butoxide)</i>	Tier 2	
<i>sb lice killing max st</i>	Tier 1	
<b>Antiparkinson Agents</b>		

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Drug Name	Drug Tier	Notes
<b>Anticholinergics</b>		
<i>benztropine mesylate oral</i>	Tier 1	QL
<i>trihexyphenidyl hcl</i>	Tier 1	QL
<b>Antiparkinson Agents, Other</b>		
<i>amantadine hcl oral capsule</i>	Tier 1	QL
<i>entacapone</i>	Tier 1	QL
<i>tolcapone</i>	Tier 1	QL
<b>Dopamine Agonists</b>		
<i>pramipexole dihydrochloride oral tablet 0.125 mg, 0.25 mg, 0.5 mg, 1 mg, 1.5 mg</i>	Tier 1	QL
<i>pramipexole dihydrochloride oral tablet 0.75 mg</i>	Tier 1	
<i>ropinirole hcl</i>	Tier 1	QL
<b>Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors</b>		
<i>carbidopa-levodopa er</i>	Tier 1	QL
<i>carbidopa-levodopa oral tablet</i>	Tier 1	QL
<i>DHIVY (carbidopa-levodopa)</i>	Tier 2	QL
<b>Monoamine Oxidase B (MAO-B) Inhibitors</b>		
<i>selegiline hcl oral</i>	Tier 1	QL
<b>Antipsychotics</b>		
<b>1st Generation/Typical</b>		
<i>chlorpromazine hcl oral tablet</i>	Tier 1	QL
<i>fluphenazine decanoate injection</i>	Tier 1	QL
<i>fluphenazine hcl injection</i>	Tier 1	
<i>fluphenazine hcl oral concentrate</i>	Tier 1	
<i>fluphenazine hcl oral elixir</i>	Tier 1	
<i>fluphenazine hcl oral tablet</i>	Tier 1	QL
<i>haloperidol decanoate intramuscular</i>	Tier 1	QL
<i>haloperidol oral</i>	Tier 1	QL
<i>loxapine succinate</i>	Tier 1	QL
<i>pimozide</i>	Tier 1	QL; AL
<i>thioridazine hcl oral</i>	Tier 1	QL
<i>thiothixene</i>	Tier 1	QL
<i>trifluoperazine hcl</i>	Tier 1	QL
<b>2nd Generation/Atypical</b>		
<i>ABILITY MAINTENA (aripiprazole)</i>	Tier 2	DX2RX; ST; QL; AL
<i>aripiprazole oral tablet</i>	Tier 1	DX2RX; QL; AL

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Drug Name	Drug Tier	Notes
<b>ARISTADA (aripiprazole lauroxil)</b>	Tier 2	DX2RX; ST; QL; AL
<b>INVEGA HAFYERA (paliperidone palmitate)</b>	Tier 2	PA; QL; AL
<b>INVEGA SUSTENNA (paliperidone palmitate)</b>	Tier 2	DX2RX; ST; QL; AL
<b>INVEGA TRINZA (paliperidone palmitate)</b>	Tier 2	PA; QL; AL
<b>olanzapine oral tablet</b>	Tier 1	QL; AL
<b>PERSERIS (risperidone)</b>	Tier 2	DX2RX; ST; QL; AL
<b>quetiapine fumarate oral tablet 100 mg, 200 mg, 25 mg, 300 mg, 400 mg, 50 mg</b>	Tier 1	QL; AL
<b>RISPERDAL CONSTA (risperidone microspheres)</b>	Tier 2	DX2RX; ST; QL; AL
<b>risperidone oral solution</b>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<b>risperidone oral tablet</b>	Tier 1	QL; AL
<b>ziprasidone hcl</b>	Tier 1	QL; AL
<b>Treatment-Resistant</b>		
<b>clozapine oral tablet 100 mg, 25 mg, 50 mg</b>	Tier 1	QL; AL
<b>Antispasticity Agents</b>		
<b>baclofen oral tablet</b>	Tier 1	QL
<b>dantrolene sodium oral</b>	Tier 1	QL
<b>tizanidine hcl oral tablet</b>	Tier 1	QL
<b>Antivirals</b>		
<b>Anti-cytomegalovirus (CMV) Agents</b>		
<b>valganciclovir hcl oral tablet</b>	Tier 1	QL
<b>Anti-hepatitis B (HBV) Agents</b>		
<b>BARACLUDE ORAL SOLUTION (entecavir)</b>	Tier 2	SP; QL
<b>entecavir</b>	Tier 1	SP; QL
<b>EPIVIR HBV ORAL SOLUTION (lamivudine)</b>	Tier 2	SP; QL
<b>lamivudine oral tablet 100 mg</b>	Tier 1	SP; QL
<b>Anti-hepatitis C (HCV) Agents</b>		
<b>EPCLUSA ORAL TABLET 200-50 MG (sofosbuvir-velpatasvir)</b>	Tier 2	PA; SP; QL
<b>MAVYRET ORAL PACKET (glecaprevir-pibrentasvir)</b>	Tier 2	PA; SP; QL
<b>MAVYRET ORAL TABLET (glecaprevir-pibrentasvir)</b>	Tier 2	PA; Preferred for Genotypes 1, 2, 3, 4, 5,& 6; SP; QL
<b>ribavirin oral</b>	Tier 1	PA; QL
<b>SOFOSBUVIR-VELPATASVIR</b>	Tier 2	PA; SP; QL
<b>ZEPATIER (elbasvir-grazoprevir)</b>	Tier 2	PA; SP; QL
<b>Antiherpetic Agents</b>		
<b>acyclovir oral</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>valacyclovir hcl oral</i>	Tier 1	QL
<b>Anti-HIV Agents, Integrase Inhibitors (INSTI)</b>		
<i>BIKTARVY ORAL TABLET 30-120-15 MG (bictegravir-emtricitab-tenofovir)</i>	Tier 2	DX2RX
<i>BIKTARVY ORAL TABLET 50-200-25 MG (bictegravir-emtricitab-tenofovir)</i>	Tier 2	QL
<i>DOVATO (dolutegravir-lamivudine)</i>	Tier 2	QL
<i>GENVOYA (elviteg-cobic-emtricit-tenofaf)</i>	Tier 2	QL
<i>ISENTRESS HD (raltegravir potassium)</i>	Tier 2	QL
<i>ISENTRESS ORAL PACKET (raltegravir potassium)</i>	Tier 2	Members >= 2 years of age will require PA; QL; AL
<i>ISENTRESS ORAL TABLET (raltegravir potassium)</i>	Tier 2	QL
<i>ISENTRESS ORAL TABLET CHEWABLE (raltegravir potassium)</i>	Tier 2	QL
<i>JULUCA (dolutegravir-rilpivirine)</i>	Tier 2	QL
<i>STRIBILD (elviteg-cobic-emtricit-tenofdf)</i>	Tier 2	QL
<i>TIVICAY (dolutegravir sodium)</i>	Tier 2	QL
<i>TIVICAY PD (dolutegravir sodium)</i>	Tier 2	QL; AL
<b>Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)</b>		
<i>COMPLERA (emtricitab-rilpivir-tenofovir)</i>	Tier 2	QL
<i>DELSTRIGO (doravirin-lamivudin-tenofov df)</i>	Tier 2	QL
<i>EDURANT (rilpivirine hcl)</i>	Tier 2	QL
<i>efavirenz</i>	Tier 1	QL
<i>efavirenz-emtricitab-tenofovir oral tablet 600-200-300 mg</i>	Tier 1	DX2RX; QL
<i>efavirenz-lamivudine-tenofovir</i>	Tier 1	QL
<i>etravirine</i>	Tier 1	QL
<i>INTELENCE ORAL TABLET 25 MG (etrvirine)</i>	Tier 2	QL
<i>nevirapine</i>	Tier 1	QL
<i>nevirapine er</i>	Tier 1	QL
<i>PIFELTRO (doravirine)</i>	Tier 2	QL
<b>Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)</b>		
<i>abacavir sulfate</i>	Tier 1	QL
<i>abacavir sulfate-lamivudine</i>	Tier 1	QL
<i>CIMDUO (lamivudine-tenofovir)</i>	Tier 2	QL
<i>emtricitabine</i>	Tier 1	QL
<i>emtricitabine-tenofovir df</i>	Tier 1	DX2RX; QL
<i>EMTRIVA ORAL SOLUTION (emtricitabine)</i>	Tier 2	QL
<i>lamivudine oral solution</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>lamivudine oral tablet 150 mg, 300 mg</i>	Tier 1	QL
<i>lamivudine-zidovudine</i>	Tier 1	QL
<i>ODEFSEY (emtricitab-rilpivir-tenofovir af)</i>	Tier 2	QL
<i>stavudine oral capsule 40 mg</i>	Tier 1	QL
<i>tenofovir disoproxil fumarate</i>	Tier 1	QL
<i>TRIUMEQ (abacavir-dolutegravir-lamivud)</i>	Tier 2	QL
<i>TRIUMEQ PD (abacavir-dolutegravir-lamivud)</i>	Tier 2	DX2RX; QL
<i>TRIZIVIR (abacavir-lamivudine-zidovudine)</i>	Tier 2	QL
<i>VIREAD ORAL POWDER (tenofovir disoproxil fumarate)</i>	Tier 2	QL
<i>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG (tenofovir disoproxil fumarate)</i>	Tier 2	QL
<i>zidovudine</i>	Tier 1	QL
<b>Anti-HIV Agents, Other</b>		
<i>FUZEON (enfuvirtide)</i>	Tier 2	QL
<i>maraviroc</i>	Tier 1	QL
<i>SELZENTRY ORAL SOLUTION (maraviroc)</i>	Tier 2	QL
<i>SELZENTRY ORAL TABLET 25 MG, 75 MG (maraviroc)</i>	Tier 2	QL
<i>TYBOST (cobicistat)</i>	Tier 2	QL
<b>Anti-HIV Agents, Protease Inhibitors (PI)</b>		
<i>APТИVUS (tipranavir)</i>	Tier 2	QL
<i>atazanavir sulfate</i>	Tier 1	QL
<i>EVOTAZ (atazanavir-cobicistat)</i>	Tier 2	QL
<i>fosamprenavir calcium</i>	Tier 1	QL
<i>LEXIVA ORAL SUSPENSION (fosamprenavir calcium)</i>	Tier 2	QL
<i>lopinavir-ritonavir</i>	Tier 1	QL
<i>NORVIR ORAL PACKET (ritonavir)</i>	Tier 2	QL
<i>NORVIR ORAL SOLUTION (ritonavir)</i>	Tier 2	QL
<i>PREZCOBIX (darunavir-cobicistat)</i>	Tier 2	QL
<i>REYATAZ ORAL PACKET (atazanavir sulfate)</i>	Tier 2	Members >= 8 years of age will require PA; QL; AL
<i>ritonavir</i>	Tier 1	QL
<i>SYMTUZA (darun-cobic-emtricit-tenofaf)</i>	Tier 2	QL
<i>VIRACEPT (nelfinavir mesylate)</i>	Tier 2	QL
<b>Anti-influenza Agents</b>		
<i>oseltamivir phosphate oral capsule</i>	Tier 1	QL
<i>oseltamivir phosphate oral suspension reconstituted</i>	Tier 1	QL; AL
<i>RELENZA DISKHALER (zanamivir)</i>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<i>rimantadine hcl</i>	Tier 1	QL
<b>Antivirals - Drugs to Treat Viral Infections</b>		
<b>Antivirals</b>		
<i>LAGEVRIO (molnupiravir)</i>	Tier 2	QL
<i>PAXLOVID (150/100) (nirmatrelvir-ritonavir)</i>	Tier 2	QL
<i>PAXLOVID (300/100) (nirmatrelvir-ritonavir)</i>	Tier 2	QL
<b>Anxiolytics</b>		
<b>Anxiolytics, Other</b>		
<i>buspirone hcl oral</i>	Tier 1	QL
<i>hydroxyzine hcl oral</i>	Tier 1	QL
<i>hydroxyzine pamoate oral</i>	Tier 1	QL
<b>Benzodiazepines</b>		
<i>alprazolam oral tablet</i>	Tier 1	QL
<i>chlordiazepoxide hcl</i>	Tier 1	QL
<i>clonazepam oral tablet</i>	Tier 1	QL
<i>clorazepate dipotassium</i>	Tier 1	QL
<i>diazepam oral solution</i>	Tier 1	QL
<i>diazepam oral tablet</i>	Tier 1	QL
<i>lorazepam oral tablet</i>	Tier 1	QL
<i>oxazepam</i>	Tier 1	QL
<b>Bipolar Agents</b>		
<b>Mood Stabilizers</b>		
<i>divalproex sodium oral capsule delayed release sprinkle</i>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<i>divalproex sodium oral tablet delayed release</i>	Tier 1	Minimum age of 2 years; QL
<i>lithium carbonate er</i>	Tier 1	QL
<i>lithium carbonate oral</i>	Tier 1	QL
<b>Blood Glucose Regulators</b>		
<b>Antidiabetic Agents</b>		
<i>acarbose oral</i>	Tier 1	QL
<i>ADLYXIN (lixisenatide)</i>	Tier 2	ST; QL
<i>ADLYXIN STARTER PACK (lixisenatide)</i>	Tier 2	ST; QL
<i>ALOGLIPTIN BENZOATE</i>	Tier 2	ST; QL
<i>ALOGLIPTIN-METFORMIN HCL</i>	Tier 2	ST; QL
<i>ALOGLIPTIN-PIOGLITAZONE</i>	Tier 2	ST; QL
<i>FARXIGA (dapagliflozin propanediol)</i>	Tier 2	PA; QL

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Drug Name	Drug Tier	Notes
<b>glimepiride</b>	Tier 1	QL
<b>glipizide er</b>	Tier 1	QL
<b>glipizide ir</b>	Tier 1	QL
<b>glipizide xl</b>	Tier 1	QL
<b>glyburide micronized</b>	Tier 1	QL
<b>glyburide oral</b>	Tier 1	QL
<b>glyburide-metformin</b>	Tier 1	QL
<b>metformin hcl er (osm)</b>	Tier 1	PA; QL
<b>metformin hcl er oral tablet extended release 24 hour 500 mg</b>	Tier 1	QL
<b>metformin hcl er oral tablet extended release 24 hour 750 mg</b>	Tier 1	
<b>metformin hcl oral tablet 1000 mg, 500 mg, 850 mg</b>	Tier 1	QL
<b>nateglinide</b>	Tier 1	QL
<b>pioglitazone hcl</b>	Tier 1	QL
<b>repaglinide</b>	Tier 1	QL
<b>SEGLUROMET (ertugliflozin-metformin hcl)</b>	Tier 2	ST; QL
<b>SOLIQUA (insulin glargine-lixisenatide)</b>	Tier 2	ST; QL
<b>STEGLATRO (ertugliflozin l-pyroglutamicac)</b>	Tier 2	ST; QL
<b>SYMLINPEN 120 (pramlintide acetate)</b>	Tier 2	PA; QL
<b>SYMLINPEN 60 (pramlintide acetate)</b>	Tier 2	PA; QL
<b>TRULICITY (dulaglutide)</b>	Tier 2	ST; QL
<b>VICTOZA (liraglutide)</b>	Tier 2	ST; QL
<b>Glycemic Agents</b>		
<b>BAQSIMI ONE PACK (glucagon)</b>	Tier 2	QL
<b>BAQSIMI TWO PACK (glucagon)</b>	Tier 2	QL
<b>GLUCAGEN HYPOKIT (glucagon hcl (rdna))</b>	Tier 2	QL
<b>glucagon emergency injection kit</b>	Tier 1	QL
GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED	Tier 2	QL
<b>GVOKE HYPOPEN 1-PACK (glucagon)</b>	Tier 2	QL
<b>GVOKE HYPOPEN 2-PACK (glucagon)</b>	Tier 2	QL
<b>GVOKE KIT (glucagon)</b>	Tier 2	QL
<b>GVOKE PFS (glucagon)</b>	Tier 2	QL
<b>Insulins</b>		
<b>ADMELOG (insulin lispro)</b>	Tier 2	QL
<b>ADMELOG SOLOSTAR (insulin lispro)</b>	Tier 2	PA; QL
<b>BASAGLAR KWIKPEN (insulin glargine)</b>	Tier 2	QL
<b>HUMALOG MIX 50/50 (insulin lispro prot &amp; lispro)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<i>HUMALOG MIX 75/25 (insulin lispro prot &amp; lispro)</i>	Tier 2	QL
<i>HUMULIN 70/30 VIAL (insulin nph isophane &amp; regular)</i>	Tier 2	QL
<i>HUMULIN N VIAL (insulin nph human (isophane))</i>	Tier 2	QL
<i>HUMULIN R VIAL (insulin regular human)</i>	Tier 2	QL
INSULIN ASPART PROT & ASPART	Tier 2	QL
INSULIN GLARGINE-YFGN	Tier 2	QL
<i>NOVOLIN 70/30 RELION (insulin nph isophane &amp; regular)</i>	Tier 2	QL
<i>NOVOLIN 70/30 VIAL (insulin nph isophane &amp; regular)</i>	Tier 2	QL
<i>NOVOLIN N RELION (insulin nph human (isophane))</i>	Tier 2	QL
<i>NOVOLIN N VIAL (insulin nph human (isophane))</i>	Tier 2	QL
<i>NOVOLIN R RELION (insulin regular human)</i>	Tier 2	QL
<i>NOVOLIN R VIAL (insulin regular human)</i>	Tier 2	QL
<i>NOVOLOG FLEXPEN RELION (insulin aspart)</i>	Tier 2	QL
<i>NOVOLOG RELION (insulin aspart)</i>	Tier 2	QL
<b>Blood Glucose Regulators - Drugs to Regulate Blood Sugar</b>		
<b>Glycemic Agents - Diabetic Drugs</b>		
<i>glucose oral tablet chewable 4 gm</i>	Tier 1	QL
<i>soft glucose</i>	Tier 1	QL
<i>TRUEPLUS GLUCOSE ON THE GO (dextrose (diabetic use))</i>	Tier 2	QL
<i>TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE (dextrose (diabetic use))</i>	Tier 2	QL
<b>Insulins - Diabetic Drugs</b>		
<i>MONOJECT HYPODERMIC NEEDLE 18G X 1" (needle (disp))</i>	Tier 2	QL
<b>Blood Products and Modifiers</b>		
<b>Anticoagulants</b>		
<i>ELIQUIS (apixaban)</i>	Tier 2	QL
<i>ELIQUIS DVT/PE STARTER PACK (apixaban)</i>	Tier 2	QL
<i>enoxaparin sodium</i>	Tier 1	QL
<i>heparin sodium (porcine)</i>	Tier 1	
<i>heparin sodium (porcine) pf</i>	Tier 1	
<i>jantoven oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 7.5 mg</i>	Tier 1	QL
<i>jantoven oral tablet 6 mg</i>	Tier 1	
<i>SAVAYSA (edoxaban tosylate)</i>	Tier 2	QL
<i>warfarin sodium oral tablet 1 mg, 10 mg, 2 mg, 2.5 mg, 3 mg, 4 mg, 5 mg, 7.5 mg</i>	Tier 1	QL
<i>warfarin sodium oral tablet 6 mg</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<b>Blood Products and Modifiers, Other</b>		
<i>anagrelide hcl</i>	Tier 1	
<b>ARANESP (ALBUMIN FREE) INJECTION SOLUTION (darbepoetin alfa)</b>	Tier 2	PA; SP
<b>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 10 MCG/0.4ML (darbepoetin alfa)</b>	Tier 2	PA; SP; QL
<b>ARANESP (ALBUMIN FREE) INJECTION SOLUTION PREFILLED SYRINGE 100 MCG/0.5ML, 150 MCG/0.3ML, 200 MCG/0.4ML, 25 MCG/0.42ML, 300 MCG/0.6ML, 40 MCG/0.4ML, 500 MCG/ML, 60 MCG/0.3ML (darbepoetin alfa)</b>	Tier 2	PA; SP
<b>DROXIA ORAL CAPSULE 200 MG, 300 MG (hydroxyurea)</b>	Tier 2	
<b>DROXIA ORAL CAPSULE 400 MG (hydroxyurea)</b>	Tier 2	QL
<b>LEUKINE (sargramostim)</b>	Tier 2	PA; SP
<b>MOZOBIL (plerixafor)</b>	Tier 2	PA; SP; QL
<b>MULPLETA (lusutrombopag)</b>	Tier 2	PA; SP; QL
<b>NEULASTA (pegfilgrastim)</b>	Tier 2	PA; SP; QL
<b>NEULASTA ONPRO (pegfilgrastim)</b>	Tier 2	PA; SP
<b>PROMACTA ORAL PACKET 25 MG (eltrombopag olamine)</b>	Tier 2	PA; SP; QL
<b>PROMACTA ORAL TABLET (eltrombopag olamine)</b>	Tier 2	PA; SP; QL
<b>RETACRIT (epoetin alfa-epbx)</b>	Tier 2	PA; SP
<b>ZARXIO (filgrastim-sndz)</b>	Tier 2	PA; SP
<b>ZIEXTENZO (pegfilgrastim-bmez)</b>	Tier 2	PA; SP
<b>Hemostasis Agents</b>		
<b>aminocaproic acid oral</b>	Tier 1	QL
<b>tranexamic acid oral</b>	Tier 1	DX2RX; QL
<b>Platelet Modifying Agents</b>		
<b>BRILINTA (ticagrelor)</b>	Tier 2	DX2RX; QL
<b>CABLIVI (caplacizumab-yhdp)</b>	Tier 2	PA; SP; QL
<b>cilostazol</b>	Tier 1	QL
<b>clopidogrel bisulfate oral</b>	Tier 1	QL
<b>dipyridamole oral</b>	Tier 1	QL
<b>prasugrel hcl</b>	Tier 1	DX2RX; QL
<b>Blood Products/Modifiers/Volume Expanders - Drugs to Treat Blood Disorders</b>		
<b>Hemostasis Agents - Drugs to Stop Bleeding</b>		
<b>HEMLIBRA (emicizumab-kxwh)</b>	Tier 2	PA; SP; QL
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
<b>clonidine hcl oral</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>guanfacine hcl</i>	Tier 1	QL
<i>midodrine hcl</i>	Tier 1	QL
<b>Alpha-adrenergic Blocking Agents</b>		
<i>doxazosin mesylate oral</i>	Tier 1	QL
<i>prazosin hcl oral</i>	Tier 1	QL
<b>Angiotensin II Receptor Antagonists</b>		
<i>losartan potassium oral</i>	Tier 1	QL
<i>olmesartan medoxomil oral</i>	Tier 1	QL
<b>Angiotensin-converting Enzyme (ACE) Inhibitors</b>		
<i>benazepril hcl oral</i>	Tier 1	QL
<i>captopril oral</i>	Tier 1	QL
<i>enalapril maleate oral solution</i>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<i>enalapril maleate oral tablet</i>	Tier 1	QL
<i>fosinopril sodium</i>	Tier 1	QL
<i>lisinopril oral</i>	Tier 1	QL
<i>quinapril hcl</i>	Tier 1	QL
<i>ramipril</i>	Tier 1	QL
<i>trandolapril</i>	Tier 1	QL
<b>Antiarrhythmics</b>		
<i>amiodarone hcl oral tablet 200 mg, 400 mg</i>	Tier 1	QL
<i>disopyramide phosphate</i>	Tier 1	QL
<i>dofetilide</i>	Tier 1	QL
<i>flecainide acetate</i>	Tier 1	QL
<i>mexiletine hcl oral</i>	Tier 1	QL
<i>NORPACE CR (disopyramide phosphate)</i>	Tier 2	
<i>propafenone hcl</i>	Tier 1	QL
<i>quinidine gluconate er</i>	Tier 1	QL
<i>quinidine sulfate</i>	Tier 1	QL
<i>sotalol hcl (af)</i>	Tier 1	QL
<i>sotalol hcl oral</i>	Tier 1	QL
<b>Beta-adrenergic Blocking Agents</b>		
<i>acebutolol hcl oral</i>	Tier 1	QL
<i>atenolol oral</i>	Tier 1	QL
<i>betaxolol hcl oral</i>	Tier 1	QL
<i>bisoprolol fumarate oral</i>	Tier 1	QL
<i>carvedilol</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>labetalol hcl oral</i>	Tier 1	QL
<i>metoprolol succinate er</i>	Tier 1	QL
<i>metoprolol tartrate oral tablet 100 mg, 25 mg, 50 mg</i>	Tier 1	QL
<i>propranolol hcl er</i>	Tier 1	DX2RX; QL
<i>propranolol hcl oral solution 20 mg/5ml</i>	Tier 1	QL
<i>propranolol hcl oral solution 40 mg/5ml</i>	Tier 1	
<i>propranolol hcl oral tablet</i>	Tier 1	QL
<b>Calcium Channel Blocking Agents, Dihydropyridines</b>		
<i>amlodipine besylate oral</i>	Tier 1	QL
<i>felodipine er</i>	Tier 1	QL
<i>nifedipine er</i>	Tier 1	QL
<i>nifedipine er osmotic release</i>	Tier 1	QL
<i>nifedipine oral</i>	Tier 1	QL
<i>nimodipine oral</i>	Tier 1	QL
<i>NYMALIZE (nimodipine)</i>	Tier 2	QL
<b>Calcium Channel Blocking Agents, Nondihydropyridines</b>		
<i>cartia xt</i>	Tier 1	QL
<i>diltiazem hcl er</i>	Tier 1	QL
<i>diltiazem hcl er beads</i>	Tier 1	QL
<i>diltiazem hcl er coated beads oral capsule extended release 24 hour</i>	Tier 1	QL
<i>diltiazem hcl oral</i>	Tier 1	QL
<i>dilt-xr</i>	Tier 1	QL
<i>taztia xt</i>	Tier 1	QL
<i>tiadylt er</i>	Tier 1	QL
<i>verapamil hcl er oral capsule extended release 24 hour 120 mg, 180 mg, 240 mg, 360 mg</i>	Tier 1	QL
<i>verapamil hcl er oral tablet extended release</i>	Tier 1	QL
<i>verapamil hcl oral</i>	Tier 1	QL
<b>Cardiovascular Agents, Other</b>		
<i>acetazolamide er</i>	Tier 1	QL
<i>acetazolamide oral</i>	Tier 1	QL
<i>amiloride-hydrochlorothiazide</i>	Tier 1	QL
<i>atenolol-chlorthalidone</i>	Tier 1	QL
<i>benazepril-hydrochlorothiazide</i>	Tier 1	QL
<i>bisoprolol-hydrochlorothiazide</i>	Tier 1	QL
<i>digitek</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>digoxin oral solution</i>	Tier 1	
<i>digoxin oral tablet 125 mcg, 250 mcg</i>	Tier 1	QL
<i>enalapril-hydrochlorothiazide</i>	Tier 1	QL
<i>ENTRESTO (sacubitril-valsartan)</i>	Tier 2	PA; QL
<i>fosinopril sodium-hctz</i>	Tier 1	QL
<i>lisinopril-hydrochlorothiazide</i>	Tier 1	QL
<i>losartan potassium-hctz</i>	Tier 1	QL
<i>pentoxifylline er</i>	Tier 1	QL
<i>quinapril-hydrochlorothiazide</i>	Tier 1	QL
<i>ranolazine er</i>	Tier 1	ST; QL
<i>spironolactone-hctz</i>	Tier 1	QL
<i>triamterene-hctz</i>	Tier 1	QL
<b>Diuretics, Loop</b>		
<i>bumetanide oral</i>	Tier 1	QL
<i>furosemide oral solution 10 mg/ml</i>	Tier 1	QL
<i>furosemide oral tablet</i>	Tier 1	QL
<i>SOAANZ ORAL TABLET 20 MG (torsemide)</i>	Tier 2	QL
<i>torsemide</i>	Tier 1	QL
<b>Diuretics, Potassium-sparing</b>		
<i>amiloride hcl oral</i>	Tier 1	QL
<i>spironolactone oral</i>	Tier 1	QL
<b>Diuretics, Thiazide</b>		
<i>chlorthalidone</i>	Tier 1	QL
<i>DIURIL (chlorothiazide)</i>	Tier 2	QL
<i>hydrochlorothiazide oral capsule</i>	Tier 1	QL
<i>hydrochlorothiazide oral tablet 12.5 mg</i>	Tier 1	
<i>hydrochlorothiazide oral tablet 25 mg, 50 mg</i>	Tier 1	QL
<i>indapamide</i>	Tier 1	QL
<i>metolazone</i>	Tier 1	QL
<b>Dyslipidemics, Fibric Acid Derivatives</b>		
<i>fenofibrate micronized oral capsule 134 mg, 200 mg, 67 mg</i>	Tier 1	ST; QL
<i>fenofibrate oral capsule 134 mg, 200 mg, 67 mg</i>	Tier 1	ST; QL
<i>fenofibrate oral tablet 145 mg</i>	Tier 1	PA; QL
<i>fenofibrate oral tablet 160 mg, 54 mg</i>	Tier 1	ST; QL
<i>gemfibrozil oral</i>	Tier 1	QL
<b>Dyslipidemics, HMG CoA Reductase Inhibitors</b>		

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Drug Name	Drug Tier	Notes
<i>atorvastatin calcium oral</i>	Tier 1	QL
<i>lovastatin oral</i>	Tier 1	QL; AL
<i>pravastatin sodium</i>	Tier 1	QL
<i>rosuvastatin calcium</i>	Tier 1	QL
<i>simvastatin oral</i>	Tier 1	QL
<b>Dyslipidemics, Other</b>		
<i>cholestyramine light oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered; QL
<i>cholestyramine oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered; QL
<i>ezetimibe</i>	Tier 1	QL
<i>niacin er (antihyperlipidemic)</i>	Tier 1	QL
<i>omega-3-acid ethyl esters</i>	Tier 1	PA; QL
<i>PRALUENT (alirocumab)</i>	Tier 2	PA; NDC starting w/72733 Preferred w/PA; SP; QL
<i>prevalte oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered; QL
<i>REPATHA (evolocumab)</i>	Tier 2	PA; NDC starting w/72511 Preferred w/PA; SP; QL
<b>Vasodilators, Direct-acting Arterial</b>		
<i>hydralazine hcl oral</i>	Tier 1	QL
<i>minoxidil oral</i>	Tier 1	QL
<b>Vasodilators, Direct-acting Arterial/Venous</b>		
<i>isosorbide dinitrate</i>	Tier 1	QL
<i>isosorbide mononitrate</i>	Tier 1	QL
<i>isosorbide mononitrate er</i>	Tier 1	QL
<i>NITRO-BID (nitroglycerin)</i>	Tier 2	QL
<i>NITRO-DUR (nitroglycerin)</i>	Tier 2	QL
<i>nitroglycerin sublingual</i>	Tier 1	QL
<i>nitroglycerin transdermal</i>	Tier 1	QL
<i>nitroglycerin translingual</i>	Tier 1	QL
<i>RECTIV (nitroglycerin)</i>	Tier 2	DX2RX; QL
<b>Central Nervous System Agents</b>		
<b>Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines</b>		
<i>atomoxetine hcl</i>	Tier 1	QL; AL
<i>dexmethylphenidate hcl</i>	Tier 1	DX2RX; QL; AL

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Drug Name	Drug Tier	Notes
<i>dexamethylphenidate hcl er</i>	Tier 1	DX2RX; QL; AL
<i>guanfacine hcl er</i>	Tier 1	QL; AL
<i>methylphenidate hcl er (cd)</i>	Tier 1	QL; AL
<i>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 30 mg, 40 mg</i>	Tier 1	QL; AL
<i>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg</i>	Tier 1	QL; AL
<i>methylphenidate hcl er oral tablet extended release</i>	Tier 1	QL; AL
<i>methylphenidate hcl er oral tablet extended release 24 hour</i>	Tier 1	Mallinckrodt and Kremers Urban labelers; QL; AL
<i>methylphenidate hcl oral tablet</i>	Tier 1	QL; AL
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
<i>amphetamine-dextroamphetamine</i>	Tier 1	QL; AL
<i>amphetamine-dextroamphetamine er</i>	Tier 1	QL; AL
<b>Central Nervous System, Other</b>		
<i>AUSTEDO (deutetabenazine)</i>	Tier 2	PA; SP; QL
<i>caffeine citrate oral</i>	Tier 1	QL; AL
<i>INGREZZA ORAL CAPSULE 40 MG, 80 MG (valbenazine tosylate)</i>	Tier 2	PA; SP; QL
<i>INGREZZA ORAL CAPSULE THERAPY PACK (valbenazine tosylate)</i>	Tier 2	PA; SP; QL
<i>NUEDEXTA (dextromethorphan-quinidine)</i>	Tier 2	DX2RX; QL
<i>riluzole</i>	Tier 1	QL
<i>tetrabenazine</i>	Tier 1	DX2RX; SP; QL
<b>Fibromyalgia Agents</b>		
<i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i>	Tier 1	QL
<i>pregabalin</i>	Tier 1	QL
<b>Multiple Sclerosis Agents</b>		
<i>AUBAGIO (teriflunomide)</i>	Tier 2	DX2RX; SP; QL
<i>COPAXONE (glatiramer acetate)</i>	Tier 2	DX2RX; SP; QL
<i>dimethyl fumarate oral</i>	Tier 1	DX2RX; SP; QL
<i>dimethyl fumarate starter pack</i>	Tier 1	DX2RX; SP; QL
<i> fingolimod hcl</i>	Tier 1	DX2RX; SP; QL
<i> glatiramer acetate</i>	Tier 1	DX2RX; SP; QL
<i> glatopa</i>	Tier 1	DX2RX; SP; QL
<i>MAYZENT ORAL TABLET 0.25 MG, 2 MG (siponimod fumarate)</i>	Tier 2	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG (siponimod fumarate)</b>	Tier 2	PA; SP; QL
<b>PLEGRIDY INTRAMUSCULAR (peginterferon beta-1a)</b>	Tier 2	SP; QL
<b>PLEGRIDY STARTER PACK (peginterferon beta-1a)</b>	Tier 2	DX2RX; SP; QL
<b>PLEGRIDY SUBCUTANEOUS (peginterferon beta-1a)</b>	Tier 2	DX2RX; SP; QL
<b>Dental and Oral Agents</b>		
<i>chlorhexidine gluconate mouth/throat</i>	Tier 1	QL
<i>oralone</i>	Tier 1	QL
<i>periogard</i>	Tier 1	QL
<i>pilocarpine hcl oral tablet 5 mg</i>	Tier 1	QL
<i>pilocarpine hcl oral tablet 7.5 mg</i>	Tier 1	
<i>triamcinolone acetonide mouth/throat</i>	Tier 1	QL
<b>Dermatological Agents</b>		
<b>Acne and Rosacea Agents</b>		
<i>accutane</i>	Tier 1	PA; QL
<i>acitretin</i>	Tier 1	PA; QL
<i>amnesteem</i>	Tier 1	PA; QL
<b>AVITA EXTERNAL CREAM (tretinooin)</b>	Tier 2	ST; QL; AL
<i>azelaic acid external</i>	Tier 1	QL
<i>claravis</i>	Tier 1	PA; QL
<b>DIFFERIN EXTERNAL GEL 0.1 % (adapalene)</b>	Tier 2	QL
<i>isotretinoin oral</i>	Tier 1	PA; QL
<i>myorisan</i>	Tier 1	PA; QL
<i>tretinooin external cream</i>	Tier 1	ST; QL; AL
<i>zenatane</i>	Tier 1	PA; QL
<b>Dermatitis and Pruritus Agents</b>		
<i>ala-cort</i>	Tier 1	QL
<b>aclometasone dipropionate external ointment</b>	Tier 1	QL
<i>ammonium lactate external</i>	Tier 1	QL
<i>anti-itch aloe</i>	Tier 1	QL
<i>anti-itch intensive heal</i>	Tier 1	QL
<i>anti-itch intensive healing</i>	Tier 1	QL
<b>anti-itch maximum strength external cream 1 %</b>	Tier 1	QL
<i>betamethasone dipropionate aug</i>	Tier 1	QL
<i>betamethasone dipropionate external lotion</i>	Tier 1	
<b>betamethasone dipropionate external ointment</b>	Tier 1	QL
<i>betamethasone valerate external cream</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>betamethasone valerate external lotion</i>	Tier 1	
<i>betamethasone valerate external ointment</i>	Tier 1	QL
<i>clobetasol prop emollient base</i>	Tier 1	QL
<i>clobetasol propionate e</i>	Tier 1	QL
<i>clobetasol propionate external cream</i>	Tier 1	QL
<i>clobetasol propionate external ointment</i>	Tier 1	QL
<i>clobetasol propionate external solution</i>	Tier 1	QL
<i>cortisone intense healing</i>	Tier 1	QL
<i>cortisone maximum strength external cream</i>	Tier 1	QL
<i>eczema anti-itch</i>	Tier 1	QL
<i>EUCRISA (crisaborole)</i>	Tier 2	ST; QL
<i>fluocinolone acetonide body</i>	Tier 1	QL
<i>fluocinolone acetonide external cream 0.025 %</i>	Tier 1	QL
<i>fluocinolone acetonide external ointment</i>	Tier 1	QL
<i>fluocinolone acetonide external solution</i>	Tier 1	QL
<i>fluocinolone acetonide scalp</i>	Tier 1	QL
<i>fluocinonide emulsified base</i>	Tier 1	QL
<i>fluocinonide external cream</i>	Tier 1	QL
<i>fluocinonide external solution</i>	Tier 1	QL
<i>fluticasone propionate external cream</i>	Tier 1	QL
<i>fluticasone propionate external ointment</i>	Tier 1	
<i>halobetasol propionate external cream</i>	Tier 1	QL
<i>hydrocortisone anti-itch</i>	Tier 1	QL
<i>hydrocortisone butyrate external ointment</i>	Tier 1	QL
<i>hydrocortisone butyrate external solution</i>	Tier 1	QL
<i>hydrocortisone external cream 0.5 %, 1 %, 2.5 %</i>	Tier 1	QL
<i>hydrocortisone external lotion 2.5 %</i>	Tier 1	QL
<i>hydrocortisone external ointment 0.5 %</i>	Tier 1	
<i>hydrocortisone external ointment 1 %, 2.5 %</i>	Tier 1	QL
<i>hydrocortisone max st external cream</i>	Tier 1	QL
<i>hydrocortisone max st/12 moist</i>	Tier 1	QL
<i>hydrocortisone plus 12</i>	Tier 1	QL
<i>hydrocortisone plus external cream 1 %</i>	Tier 1	QL
<i>hydrocortisone/aloë</i>	Tier 1	QL
<i>hydrocortisone/aloë max str</i>	Tier 1	QL
<i>hydrocortisone-aloë max st</i>	Tier 1	QL
<i>instacort 5</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>LAC-HYDRIN FIVE (ammonium lactate)</b>	Tier 2	QL
<b>MEDPURA HYDROCORTISONE (hydrocortisone)</b>	Tier 2	QL
<b>mometasone furoate external</b>	Tier 1	QL
<b>pimecrolimus</b>	Tier 1	ST; Minimum age of 2 years; QL; AL
<b>PREPARATION H EXTERNAL CREAM 1 % (hydrocortisone)</b>	Tier 2	QL
<b>selenium sulfide external lotion</b>	Tier 1	QL
<b>tacrolimus external ointment 0.03 %</b>	Tier 1	ST; Minimum age of 2 years; QL; AL
<b>tacrolimus external ointment 0.1 %</b>	Tier 1	ST; Minimum age of 16 years; QL; AL
<b>triamcinolone acetonide external cream</b>	Tier 1	QL
<b>triamcinolone acetonide external lotion 0.025 %</b>	Tier 1	
<b>triamcinolone acetonide external lotion 0.1 %</b>	Tier 1	QL
<b>triamcinolone acetonide external ointment 0.025 %, 0.1 %, 0.5 %</b>	Tier 1	QL
<b>triderm</b>	Tier 1	QL
<b>Dermatological Agents, Other</b>		
<b>calcipotriene external cream</b>	Tier 1	ST; QL
<b>calcipotriene external ointment</b>	Tier 1	ST; QL
<b>calcipotriene external solution</b>	Tier 1	QL
<b>calcitriol external</b>	Tier 1	ST; QL
<b>clotrimazole-betamethasone</b>	Tier 1	QL
<b>fluorouracil external cream 5 %</b>	Tier 1	QL
<b>fluorouracil external solution</b>	Tier 1	
<b>imiquimod external cream 5 %</b>	Tier 1	QL
<b>methoxsalen rapid</b>	Tier 1	
<b>podofilox external</b>	Tier 1	QL
<b>silver sulfadiazine external</b>	Tier 1	QL
<b>ssd</b>	Tier 1	QL
<b>Pediculicides/Scabicides</b>		
<b>crotan</b>	Tier 1	QL
<b>lice killing</b>	Tier 1	
<b>lice treatment creme rinse</b>	Tier 1	
<b>lice treatment external liquid 1 %</b>	Tier 1	
<b>lice treatment external lotion 1 %</b>	Tier 1	
<b>malathion</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>permethrin external</i>	Tier 1	QL
<i>spinosad</i>	Tier 1	QL
<b>Topical Anti-infectives</b>		
<i>ciclodan</i>	Tier 1	QL
<i>ciclopirox external solution</i>	Tier 1	QL
<i>clindacin etz external swab</i>	Tier 1	QL
<i>clindacin-p</i>	Tier 1	QL
<i>clindamycin phosphate external gel</i>	Tier 1	QL
<i>clindamycin phosphate external lotion</i>	Tier 1	QL
<i>clindamycin phosphate external solution</i>	Tier 1	QL
<i>clindamycin phosphate external swab</i>	Tier 1	QL
<i>clotrimazole external cream 1 %</i>	Tier 1	QL
<i>clotrimazole external solution 1 %</i>	Tier 1	QL
<i>erythromycin external</i>	Tier 1	QL
<i>gentamicin sulfate external</i>	Tier 1	QL
<i>ketoconazole external cream</i>	Tier 1	QL
<i>ketoconazole external shampoo</i>	Tier 1	QL
<i>mupirocin external</i>	Tier 1	QL
<i>nyamyc</i>	Tier 1	QL
<i>nystatin external</i>	Tier 1	QL
<i>nystop</i>	Tier 1	QL
<b>Dermatological Agents - Drugs to Treat Skin Conditions</b>		
<i>advanced healing external ointment</i>	Tier 1	
<i>alum sulfate-ca acetate</i>	Tier 1	
<i>astringent solution</i>	Tier 1	
<i>AVAR-E EMOLlient (sulfacetamide sodium-sulfur)</i>	Tier 2	
<i>AVAR-E GREEN (sulfacetamide sodium-sulfur)</i>	Tier 2	
<i>baby basics diaper rash</i>	Tier 1	QL
<i>beauty 360 pure glycerin</i>	Tier 1	
<i>beauty 360 soothing bath</i>	Tier 1	
<i>boro-packs</i>	Tier 1	
<i>boudreauxs butt paste ointment 40 % external</i>	Tier 1	QL
<i>BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL (zinc oxide)</i>	Tier 2	QL
<i>bp 10-1</i>	Tier 1	
<i>diaper rash external ointment</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>DR SMITHS ADULT BARRIER (zinc oxide)</b>	Tier 2	QL
<b>DR SMITHS DIAPER QUICK RELIEF (zinc oxide)</b>	Tier 2	QL
<b>glycerin external</b>	Tier 1	
<b>glycerin external liquid 99.5 %</b>	Tier 1	
<b>hydrolatum</b>	Tier 1	
<b>hydraphor</b>	Tier 1	
<b>ointment base</b>	Tier 1	
<b>renewal soothing bath</b>	Tier 1	
<b>sss 10-5 external cream</b>	Tier 1	
<b>sulfacetamide sodium-sulfur external cream 10-5 %</b>	Tier 1	
<b>sulfacetamide sodium-sulfur external liquid 9-4.5 %</b>	Tier 1	QL
<b>sulfacetamide sod-sulfur wash external liquid 9-4.5 %</b>	Tier 1	QL
<b>sulfamez wash</b>	Tier 1	
<b>SUMADAN WASH (sulfacetamide sodium-sulfur)</b>	Tier 2	QL
<b>zinc oxide external ointment 40 %</b>	Tier 1	QL
<b>Dermatological Agents - Skin Agents</b>		
<b>ABREVA (docosanol)</b>	Tier 2	QL
<b>calamine external lotion , 8-8 %</b>	Tier 1	
<b>calamine-zinc oxide external lotion</b>	Tier 1	
<b>cerovel</b>	Tier 1	QL
<b>docosanol external</b>	Tier 1	QL
<b>gormel</b>	Tier 1	QL
<b>gormel 10</b>	Tier 1	QL
<b>hemorrhoidal rectal suppository 0.25-3-85.5 %</b>	Tier 1	
<b>NUTRAPLUS (urea)</b>	Tier 2	QL
<b>urea 20 intensive hydrating</b>	Tier 1	QL
<b>urea external lotion</b>	Tier 1	QL
<b>ureacin-10</b>	Tier 1	QL
<b>ureacin-20</b>	Tier 1	QL
<b>Diabetes - Glucose Monitoring</b>		
<b>ACCU-CHEK AVIVA DEVICE (blood glucose calibration)</b>	Tier 2	QL
<b>ACCU-CHEK GUIDE CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>ACCU-CHEK SMARTVIEW CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>ACCU-TREND GLUCOSE CONTROL (blood glucose calibration)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>BD AUTOSHIELD DUO PEN NEEDLES (insulin pen needle)</b>	Tier 2	QL
<b>BD ULTRA-FINE INSULIN SYRINGES (insulin syringe/needle u-500)</b>	Tier 2	QL
<b>BD ULTRA-FINE PEN NEEDLES (insulin pen needle)</b>	Tier 2	QL
<b>CARETOUCH CONTROL SOL LEVEL 2 (blood glucose calibration)</b>	Tier 2	QL
<b>CHEMSTRIP 10 MD (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP 10/SG (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP 2 GP (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP 5 OB (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP 7 (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP 9 (multiple urine tests)</b>	Tier 2	
<b>CHEMSTRIP K (acetone (urine) test)</b>	Tier 2	QL
<b>CHEMSTRIP UGK (urine glucose-ketones test)</b>	Tier 2	QL
<b>DEXCOM G6 RECEIVER (continuous blood gluc receiver)</b>	Tier 2	PA; QL
<b>DEXCOM G6 SENSOR (continuous blood gluc sensor)</b>	Tier 2	PA; QL
<b>EASYMAX 15 LEVEL 2 CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>EASYMAX 15 LEVEL 2-3 CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>GLUCOSE CONTROL SOLUTIONS (blood glucose calibration)</b>	Tier 2	QL
<b>FREESTYLE LIBRE 14 DAY READER (continuous blood gluc receiver)</b>	Tier 2	PA; QL
<b>FREESTYLE LIBRE 14 DAY SENSOR (continuous blood gluc sensor)</b>	Tier 2	PA; QL
<b>FREESTYLE LIBRE READER (continuous blood gluc receiver)</b>	Tier 2	PA; QL
<b>GLUCOSE CONTROL SOLUTION IN VITRO SOLUTION (blood glucose calibration)</b>	Tier 2	QL
<b>KETO-DIASTIX (urine glucose-ketones test)</b>	Tier 2	QL
<b>KETONE CARE (urine glucose-ketones test)</b>	Tier 2	QL
<b>KETONE TEST</b>	Tier 2	QL
<b>KETOSTIX (acetone (urine) test)</b>	Tier 2	QL
<b>LANCETS (lancets)</b>	Tier 2	QL
<b>MEDISENSE GLUCOSE KETONE CONTR (blood glucose calibration)</b>	Tier 2	QL
<b>MEDISENSE HI/MID/LOW CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>MULTISTIX 10 SG (multiple urine tests)</b>	Tier 2	

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Drug Name	Drug Tier	Notes
<b>NEUTEK 2TEK CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>ONETOUCH ULTRA TEST STRIPS (glucose blood)</b>	Tier 2	QL for non-insulin dependent members: allow twice daily testing; QL
<b>ONETOUCH ULTRA 2 KIT W/DEVICE (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH ULTRA CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>ONETOUCH ULTRA MINI KIT W/DEVICE (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH VERIO KIT W/DEVICE (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH VERIO FLEX SYSTEM (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH VERIO IN VITRO SOLUTION (blood glucose calibration)</b>	Tier 2	QL
<b>ONETOUCH VERIO TEST STRIPS (glucose blood)</b>	Tier 2	QL for non-insulin dependent members: allow twice daily testing; QL
<b>ONETOUCH VERIO IQ SYSTEM (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH VERIO REFLECT KIT W/DEVICE (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>PIP GLUCOSE CONTROL SOLUTION (blood glucose calibration)</b>	Tier 2	QL
<b>PRECISION GLUCOSE KETONE CONTR (blood glucose calibration)</b>	Tier 2	QL
<b>QUINTET CONTROL HIGH/NORMAL (blood glucose calibration)</b>	Tier 2	QL
<b>TRUECONTROL GLUCOSE CONT LEV 0 (blood glucose calibration)</b>	Tier 2	QL
<b>TRUECONTROL GLUCOSE CONT LEV 1 (blood glucose calibration)</b>	Tier 2	QL
<b>Electrolytes/Minerals/Metals/Vitamins</b>		
<b>Electrolyte/Mineral Replacement</b>		
<b>carglumic acid</b>	Tier 1	PA; SP
<b>cavarest</b>	Tier 1	
<b>DENTA 5000 PLUS (sodium fluoride)</b>	Tier 2	QL
<b>DENTAGEL (sodium fluoride)</b>	Tier 2	
<b>easygel</b>	Tier 1	
<b>JUST RIGHT 5000 DENTAL GEL (sodium fluoride)</b>	Tier 2	
<b>klor-con</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>klor-con 10</i>	Tier 1	QL
<i>klor-con m10</i>	Tier 1	QL
<i>klor-con m20</i>	Tier 1	QL
<i>potassium chloride crys er oral tablet extended release 10 meq, 20 meq</i>	Tier 1	QL
<i>potassium chloride er oral capsule extended release 10 meq</i>	Tier 1	QL
<i>potassium chloride er oral tablet extended release</i>	Tier 1	QL
<i>potassium chloride oral packet</i>	Tier 1	QL
<i>potassium chloride oral solution 20 meq/15ml (10%), 40 meq/15ml (20%)</i>	Tier 1	QL
<i>potassium citrate er oral tablet extended release 10 meq (1080 mg)</i>	Tier 1	QL
<i>potassium citrate er oral tablet extended release 15 meq (1620 mg), 5 meq (540 mg)</i>	Tier 1	
<i>PREVIDENT (sodium fluoride)</i>	Tier 2	
<i>PREVIDENT 5000 DRY MOUTH (sodium fluoride)</i>	Tier 2	
<i>PREVIDENT 5000 PLUS (sodium fluoride)</i>	Tier 2	QL
<i>sf</i>	Tier 1	
<i>sf 5000 plus</i>	Tier 1	QL
<i>sodium fluoride 5000 plus</i>	Tier 1	QL
<i>sodium fluoride 5000 ppm dental cream</i>	Tier 1	QL
<i>sodium fluoride 5000 ppm dental gel</i>	Tier 1	
<i>sodium fluoride dental cream</i>	Tier 1	QL
<i>sodium fluoride dental gel</i>	Tier 1	
<i>sodium fluoride mouth/throat</i>	Tier 1	
<i>sodium fluoride oral solution 1.1 (0.5 f) mg/ml</i>	Tier 1	QL
<i>sodium fluoride oral tablet chewable</i>	Tier 1	QL
<b>Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs</b>		
<i>BPROTECTED PEDIA IRON (ferrous sulfate)</i>	Tier 2	QL
<i>cal mag zinc +d3</i>	Tier 1	QL
<i>calcium 500/vitamin d3</i>	Tier 1	
<i>calcium 600/vit d/minerals oral tablet 600-200 mg-unit</i>	Tier 1	QL
<i>calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit</i>	Tier 1	
<i>calcium 600/vitamin d</i>	Tier 1	QL
<i>calcium 600/vitamin d-3</i>	Tier 1	QL
<i>calcium 600+d oral tablet 600-10 mg-mcg, 600-200 mg-unit</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>calcium carb-cholecalciferol oral tablet 600-10 mg-mcg, 600-5 mg-mcg</i>	Tier 1	QL
<i>calcium cit plus vit d-3</i>	Tier 1	
<i>calcium citrate + d3 maximum</i>	Tier 1	
<i>calcium citrate +d3</i>	Tier 1	
<i>calcium citrate oral tablet 950 (200 ca) mg</i>	Tier 1	
<i>calcium citrate plus vit d</i>	Tier 1	QL
<i>calcium citrate+d oral tablet 315-6.25 mg-mcg</i>	Tier 1	
<i>calcium citrate+d3 oral tablet</i>	Tier 1	QL
<i>calcium citrate+d3 w/magne</i>	Tier 1	QL
<i>calcium citrate-vit d</i>	Tier 1	QL
<i>calcium citrate-vitamin d oral tablet 315-5 mg-mcg</i>	Tier 1	QL
<i>calcium high potency/vitamin d</i>	Tier 1	QL
<i>calcium plus vitamin d</i>	Tier 1	QL
<i>calcium plus vitamin d3</i>	Tier 1	QL
<i>calcium/minerals/vitamin d</i>	Tier 1	
<i>calcium-magnesium-zinc oral tablet 333-133-5 mg, 333.33-133.33-5 mg</i>	Tier 1	
<i>electrolyte solution</i>	Tier 1	QL
<i>ENFAMIL ENFALYTE (oral electrolytes)</i>	Tier 2	QL
<i>EZFE 200 (polysaccharide iron complex)</i>	Tier 2	
<i>ferate</i>	Tier 1	
<i>FER-IN-SOL (ferrous sulfate)</i>	Tier 2	QL
<i>ferosul</i>	Tier 1	QL
<i>ferretts</i>	Tier 1	
<i>ferrex 150 capsule 150 mg oral</i>	Tier 1	
<i>FERREX 150 CAPSULE 150 MG ORAL (polysaccharide iron complex)</i>	Tier 2	
<i>FERRIC X-150</i>	Tier 2	
<i>ferrous fumarate oral tablet 324 (106 fe) mg</i>	Tier 1	
<i>ferrous gluconate oral tablet 240 (27 fe) mg, 324 (37.5 fe) mg</i>	Tier 1	
<i>ferrous gluconate oral tablet 324 (38 fe) mg</i>	Tier 1	QL
<i>ferrous sulfate oral elixir</i>	Tier 1	
<i>ferrous sulfate oral solution 75 (15 fe) mg/ml</i>	Tier 1	QL
<i>ferrous sulfate oral tablet 325 (65 fe) mg</i>	Tier 1	QL
<i>ferrous sulfate oral tablet delayed release</i>	Tier 1	QL
<i>fe-vite iron</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
hi cal	Tier 1	QL
iferex 150	Tier 1	
iron infant/toddler	Tier 1	QL
iron oral tablet 240 (27 fe) mg	Tier 1	
iron oral tablet 325 (65 fe) mg	Tier 1	QL
iron supplement childrens	Tier 1	QL
iron supplement oral elixir	Tier 1	
K-PHOS (potassium phosphate monobasic)	Tier 2	QL
magnesium oral tablet 500 mg	Tier 1	
magnesium oxide oral tablet 400 (240 mg) mg, 500 mg	Tier 1	
magnesium-oxide	Tier 1	
NU-IRON (polysaccharide iron complex)	Tier 2	
OS-CAL CALCIUM + D3 (calcium carb-cholecalciferol)	Tier 2	QL
oysco 500+d	Tier 1	QL
oyster shell calcium + d oral tablet 500-10 mg-mcg	Tier 1	
oyster shell calcium + d3	Tier 1	
oyster shell calcium plus d	Tier 1	QL
oyster shell calcium w/d	Tier 1	QL
oyster shell calcium/vit d	Tier 1	
oyster shell calcium/vit d3	Tier 1	
oyster shell calcium/vitamin d oral tablet 500-5 mg-mcg	Tier 1	QL
oyster shell calcium-vit d	Tier 1	QL
ped electrolyte freeze pop	Tier 1	QL
PEDIALYTE FREEZER POPS (oral electrolytes)	Tier 2	QL
PEDIALYTE ORAL SOLUTION (oral electrolytes)	Tier 2	QL
PEDIALYTE SINGLES (oral electrolytes)	Tier 2	QL
pediatric electrolyte oral solution	Tier 1	QL
PHOSPHA 250 NEUTRAL (k phos mono-sod phos di & mono)	Tier 2	QL
phosphorous	Tier 1	QL
phospho-trin 250 neutral	Tier 1	QL
PHOSPHO-TRIN K500 (potassium phosphate monobasic)	Tier 2	QL
poly-iron 150	Tier 1	
polysaccharide iron complex	Tier 1	
polysaccharide-iron complex	Tier 1	
potassium citrate-citric acid	Tier 1	
REHYDRALYTE (oral electrolytes)	Tier 2	QL

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Drug Name	Drug Tier	Notes
<i>sod citrate-citric acid</i>	Tier 1	
<i>zinc gluconate oral tablet 50 mg</i>	Tier 1	QL
<i>zinc oral tablet 50 mg</i>	Tier 1	QL
<b>Electrolyte/Mineral/Metal Modifiers</b>		
<i>CHEMET (succimer)</i>	Tier 2	QL
<i>deferasirox granules</i>	Tier 1	PA; SP; QL
<i>deferasirox oral packet</i>	Tier 1	PA; SP; QL
<i>deferasirox oral tablet</i>	Tier 1	PA; SP; QL
<i>deferasirox oral tablet soluble</i>	Tier 1	PA; SP
<b>Phosphate Binders</b>		
<i>calcium acetate (phos binder) oral tablet</i>	Tier 1	QL
<i>calcium acetate oral tablet 667 mg</i>	Tier 1	QL
<i>sevelamer carbonate oral tablet</i>	Tier 1	ST; QL
<b>Potassium Binders</b>		
<i>LOKELMA (sodium zirconium cyclosilicate)</i>	Tier 2	PA; QL
<i>sps</i>	Tier 1	QL
<i>VELTASSA (patiromer sorbitex calcium)</i>	Tier 2	PA; QL
<b>Vitamins</b>		
<i>a-25</i>	Tier 1	QL
<i>AMLADEX (multiple vitamin)</i>	Tier 2	
<i>aqueous vitamin d</i>	Tier 1	QL
<i>b complex</i>	Tier 1	QL
<i>b complex vitamins</i>	Tier 1	QL
<i>b-complex oral tablet</i>	Tier 1	
<i>b-complex with b-12</i>	Tier 1	
<i>b-complex/b-12 oral</i>	Tier 1	
<i>BPROTECTED PEDIA D-VITE (cholecalciferol)</i>	Tier 2	QL
<i>CENTRUM SPECIALIST PRENATAL (prenatal mv-min-fe fum-fa-dha)</i>	Tier 2	
<i>classic prenatal</i>	Tier 1	QL
<i>COMPLETENATE</i>	Tier 2	QL
<i>CO-NATAL FA (prenatal vit-fe fumarate-fa)</i>	Tier 2	QL
<i>d3 high potency oral capsule 25 mcg (1000 ut)</i>	Tier 1	
<i>d3 oral capsule 10 mcg (400 unit), 50 mcg (2000 ut)</i>	Tier 1	QL
<i>d3 oral capsule 125 mcg (5000 ut), 25 mcg (1000 ut)</i>	Tier 1	
<i>d-3-5</i>	Tier 1	

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Drug Name	Drug Tier	Notes
d3-50	Tier 1	QL
<b>daily multiple vitamins</b>	Tier 1	
<b>daily vitamins</b>	Tier 1	
<b>daily vite</b>	Tier 1	
<b>daily-vites</b>	Tier 1	
<b>daily-vite</b>	Tier 1	
<b>DECARA ORAL CAPSULE 1.25 MG (50000 UT) (cholecalciferol)</b>	Tier 2	QL
<b>DECARA ORAL CAPSULE 625 MCG (25000 UT) (cholecalciferol)</b>	Tier 2	
<b>DIALYVITE 800 ORAL TABLET (b complex-c-folic acid)</b>	Tier 2	QL
<b>DIALYVITE VITAMIN D 5000 (cholecalciferol)</b>	Tier 2	
<b>D-VI-SOL (cholecalciferol)</b>	Tier 2	QL
<b>d-vite pediatric</b>	Tier 1	QL
<b>ENFAMIL EXPECTA (prenatal mv-min-fe fum-fa-dha)</b>	Tier 2	QL
<b>essential one daily</b>	Tier 1	
<b>essentials</b>	Tier 1	
<b>full spectrum b/vitamin c</b>	Tier 1	QL
<b>GENICIN VITA-Q (multiple vitamin)</b>	Tier 2	
<b>healthy hair/skin/nails</b>	Tier 1	
<b>M-NATAL PLUS</b>	Tier 2	QL
<b>multi vitamin</b>	Tier 1	
<b>multi vitamin w/d-3</b>	Tier 1	
<b>multiple vitamin-folic acid</b>	Tier 1	
<b>multiple vitamins essential</b>	Tier 1	
<b>multi-vitamin</b>	Tier 1	
<b>multi-vitamin/fluoride</b>	Tier 1	QL
<b>multivitamin/fluoride tablet chewable 0.25 mg oral (rx)</b>	Tier 1	QL
<b>multivitamin/fluoride tablet chewable 0.5 mg oral (rx)</b>	Tier 1	
<b>multivitamin/fluoride tablet chewable 1 mg oral (rx)</b>	Tier 1	
<b>multi-vitamin/fluoride/iron</b>	Tier 1	QL
<b>mynephrocaps oral capsule 1 mg</b>	Tier 1	
<b>MYNEPHRON (b complex-c-folic acid)</b>	Tier 2	
<b>NEOMULTIVITE (multiple vitamin)</b>	Tier 2	
<b>NEONATAL PLUS (prenatal vit-fe fumarate-fa)</b>	Tier 2	QL
<b>nephro vitamins</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>NEPHRO-VITE (b complex-c-folic acid)</b>	Tier 2	QL
<b>niacin er oral capsule extended release 250 mg</b>	Tier 1	QL
<b>niacin er oral capsule extended release 500 mg</b>	Tier 1	
<b>niacin er oral tablet extended release</b>	Tier 1	
<b>niacin oral tablet 100 mg, 250 mg, 50 mg</b>	Tier 1	
<b>NIVA-PLUS (prenatal vit-fe fumarate-fa)</b>	Tier 2	QL
<b>OBSTETRIX DHA (prenatal-fecbn-fa-dss-omega 3)</b>	Tier 2	
<b>once daily</b>	Tier 1	
<b>one daily</b>	Tier 1	
ONE VITE WOMENS	Tier 2	QL
ONE VITE WOMENS PLUS	Tier 2	QL
<b>one-daily multi vitamins</b>	Tier 1	
<b>one-daily multi-vitamin</b>	Tier 1	
<b>phytonadione oral</b>	Tier 1	QL
<b>prenatal 19 oral tablet</b>	Tier 1	QL
<b>prenatal 19 oral tablet chewable 29-1 mg</b>	Tier 1	QL
<b>prenatal formula oral tablet 28-0.8 mg</b>	Tier 1	QL
<b>prenatal gummy oral tablet chewable 0.4-25 mg</b>	Tier 1	QL
<b>prenatal multi+dha</b>	Tier 1	QL
<b>prenatal multivitamins</b>	Tier 1	QL
<b>prenatal oral tablet 27-0.8 mg, 27-1 mg, 28-0.8 mg</b>	Tier 1	QL
<b>prenatal vitamin plus low iron</b>	Tier 1	QL
<b>prenatal vitamins oral tablet 28-0.8 mg</b>	Tier 1	QL
<b>prenatal/iron</b>	Tier 1	QL
<b>PRONUTRIENTS VITAMIN D3 (cholecalciferol)</b>	Tier 2	
<b>QUFLORA PEDIATRIC ORAL SOLUTION 0.5 MG/ML (pediatric multivitamins-fl)</b>	Tier 2	QL
<b>radiance platinum vitamin d3</b>	Tier 1	
<b>RENAL (b complex-c-folic acid)</b>	Tier 2	
<b>renal-vite</b>	Tier 1	QL
<b>rena-vite</b>	Tier 1	QL
SE-NATAL 19	Tier 2	QL
<b>SLO-NIACIN (niacin)</b>	Tier 2	
<b>stress formula</b>	Tier 1	
<b>tab-a-vite/beta carotene</b>	Tier 1	
<b>THERA (multiple vitamin)</b>	Tier 2	

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Drug Name	Drug Tier	Notes
<b>thera-tabs</b>	Tier 1	
<b>thiamine mononitrate oral</b>	Tier 1	QL
THRIVITE RX	Tier 2	QL
TRINATAL RX 1	Tier 2	QL
<b>triphrocaps</b>	Tier 1	
<b>tri-vite pediatric</b>	Tier 1	QL
<b>VINATE ONE (prenatal vit-fe fumarate-fa)</b>	Tier 2	QL
<b>virt-caps</b>	Tier 1	
<b>vitachew vitamin d3</b>	Tier 1	
<b>vitamin a oral capsule 2400 mcg (8000 ut), 3 mg (10000 ut)</b>	Tier 1	QL
<b>vitamin b-1 oral tablet 100 mg</b>	Tier 1	QL
<b>vitamin d (cholecalciferol) oral tablet 10 mcg (400 unit)</b>	Tier 1	QL
<b>vitamin d (cholecalciferol) oral tablet 25 mcg (1000 ut)</b>	Tier 1	
<b>vitamin d oral capsule 25 mcg (1000 ut)</b>	Tier 1	
<b>vitamin d oral liquid</b>	Tier 1	QL
<b>vitamin d oral tablet chewable 10 mcg (400 unit)</b>	Tier 1	
<b>vitamin d3 oral capsule 1.25 mg (50000 ut), 50 mcg (2000 ut)</b>	Tier 1	QL
<b>vitamin d-3 oral capsule 125 mcg (5000 ut)</b>	Tier 1	
<b>vitamin d3 oral capsule 125 mcg (5000 ut), 25 mcg (1000 ut), 250 mcg (10000 ut)</b>	Tier 1	
<b>vitamin d-3 oral capsule 50 mcg (2000 ut)</b>	Tier 1	QL
<b>vitamin d3 oral liquid 10 mcg/ml</b>	Tier 1	QL
<b>vitamin d3 oral tablet 10 mcg (400 unit), 50 mcg (2000 ut)</b>	Tier 1	QL
<b>vitamin d3 oral tablet 125 mcg (5000 ut), 25 mcg (1000 ut)</b>	Tier 1	
<b>vitamin d-3 oral tablet 25 mcg (1000 ut)</b>	Tier 1	
<b>vitamin d3 oral tablet chewable 10 mcg (400 unit), 25 mcg, 25 mcg (1000 ut)</b>	Tier 1	
<b>vitamin d-400</b>	Tier 1	QL
<b>vitamin-b complex</b>	Tier 1	
<b>weekly-d</b>	Tier 1	QL
<b>wescaps</b>	Tier 1	
WESTAB PLUS	Tier 2	QL
<b>womens prenatal+dha</b>	Tier 1	QL
<b>Gastrointestinal Agents</b>		
<b>Anti-Constipation Agents</b>		
<b>constulose</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>enulose</i>	Tier 1	QL
<i>generlac</i>	Tier 1	QL
<i>lactulose encephalopathy</i>	Tier 1	QL
<i>lactulose oral solution</i>	Tier 1	QL
LUBIPROSTONE	Tier 2	DX2RX; QL
<i>MOTEGRITY (prucalopride succinate)</i>	Tier 2	DX2RX; QL
<i>MOVANTIK (naloxegol oxalate)</i>	Tier 2	DX2RX; QL
<b>Anti-Diarrheal Agents</b>		
<i>anti-diarrheal oral liquid 1 mg/5ml</i>	Tier 1	
<i>anti-diarrheal oral tablet 2 mg</i>	Tier 1	
<i>diamode</i>	Tier 1	
<i>diphenoxylate-atropine oral liquid</i>	Tier 1	
<i>diphenoxylate-atropine oral tablet</i>	Tier 1	QL
<i>IMODIUM A-D ORAL TABLET (loperamide hcl)</i>	Tier 2	
<i>loperamide hcl oral capsule</i>	Tier 1	QL
<i>loperamide hcl oral tablet</i>	Tier 1	
<i>meijer anti-diarrheal</i>	Tier 1	
<i>MYTESI (crofelemer)</i>	Tier 2	DX2RX; QL
<b>Antispasmodics, Gastrointestinal</b>		
<i>dicyclomine hcl oral capsule</i>	Tier 1	QL
<i>dicyclomine hcl oral solution</i>	Tier 1	
<i>dicyclomine hcl oral tablet</i>	Tier 1	QL
<i>glycopyrrolate oral tablet 1 mg, 2 mg</i>	Tier 1	
<b>Gastrointestinal Agents, Other</b>		
<i>GATTEX (teduglutide (rdna))</i>	Tier 2	PA; SP; QL
<i>gavilyte-c</i>	Tier 1	QL
<i>gavilyte-g</i>	Tier 1	QL
<i>peg 3350-kcl-na bicarb-nacl</i>	Tier 1	QL
<i>peg-3350/electrolytes</i>	Tier 1	QL
<i>ursodiol oral capsule 300 mg</i>	Tier 1	QL
<i>ursodiol oral tablet</i>	Tier 1	
<b>Histamine2 (H2) Receptor Antagonists</b>		
<i>acid controller</i>	Tier 1	QL
<i>acid reducer oral tablet 10 mg</i>	Tier 1	QL
<i>acid reducer oral tablet 200 mg</i>	Tier 1	
<i>cimetidine hcl</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>cimetidine oral tablet 200 mg</i>	Tier 1	
<i>cimetidine oral tablet 300 mg, 400 mg, 800 mg</i>	Tier 1	QL
<i>famotidine acid reducer oral tablet 10 mg</i>	Tier 1	QL
<i>famotidine oral suspension reconstituted</i>	Tier 1	QL; AL
<i>famotidine oral tablet</i>	Tier 1	QL
<i>famotidine orig st</i>	Tier 1	QL
<i>heartburn prevention oral tablet 10 mg</i>	Tier 1	QL
<i>heartburn relief oral tablet 10 mg</i>	Tier 1	QL
<i>heartburn relief oral tablet 200 mg</i>	Tier 1	
<b>Protectants</b>		
<i>CYTOTEC (misoprostol)</i>	Tier 2	QL
<i>misoprostol oral</i>	Tier 1	QL
<i>sucralfate oral suspension</i>	Tier 1	Members 10 years of age up to 65 years of age will require PA; QL
<i>sucralfate oral tablet</i>	Tier 1	QL
<b>Proton Pump Inhibitors</b>		
<i>acid reducer oral capsule delayed release 20.6 (20 base) mg</i>	Tier 1	QL
<i>esomeprazole magnesium oral packet</i>	Tier 1	Members >= 2 years of age will require PA; QL; AL
<i>lansoprazole oral capsule delayed release 15 mg, 30 mg</i>	Tier 1	QL
<i>lansoprazole oral tablet delayed release dispersible 15 mg</i>	Tier 1	Members >= 2 years of age will require PA; QL; AL
<i>NEXIUM ORAL PACKET 2.5 MG, 5 MG (esomeprazole magnesium)</i>	Tier 2	Members >= 2 years of age will require PA; QL; AL
<i>omeprazole magnesium oral capsule delayed release</i>	Tier 1	QL
<i>omeprazole oral capsule delayed release 10 mg, 20 mg, 20.6 (20 base) mg, 40 mg</i>	Tier 1	QL
<i>pantoprazole sodium oral tablet delayed release</i>	Tier 1	QL
<i>PREVACID 24HR (lansoprazole)</i>	Tier 2	QL
<b>Gastrointestinal Agents - Drugs to Treat Bowel, Intestine and Stomach Conditions</b>		
<b>Gastrointestinal Agents, Other - Miscellaneous Gastrointestinal Drugs</b>		
<i>abatinex</i>	Tier 1	
<i>acid gone</i>	Tier 1	
<i>acidophilus lactobacillus oral</i>	Tier 1	
<i>acidophilus oral capsule , 10 mg</i>	Tier 1	
<i>acidophilus probiotic oral capsule 10 mg</i>	Tier 1	
<i>acidophilus probiotic oral tablet , 0.5 mg</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>acidophilus/l-sporogenes</i>	Tier 1	
<i>adult 50+ probiotic</i>	Tier 1	QL
<i>adult probiotic</i>	Tier 1	QL
<i>advanced antacid</i>	Tier 1	QL
<i>almacone double strength</i>	Tier 1	QL
<i>antacid &amp; anti-gas oral suspension 200-200-20 mg/5ml, 400-400 mg/5ml</i>	Tier 1	QL
<i>antacid &amp; gas relief</i>	Tier 1	QL
<i>antacid advanced</i>	Tier 1	QL
<i>antacid advanced max st oral suspension 400-400-40 mg/5ml</i>	Tier 1	QL
<i>antacid anti-gas</i>	Tier 1	QL
<i>antacid anti-gas ex st oral suspension 400-400-40 mg/5ml</i>	Tier 1	QL
<i>antacid anti-gas max strength</i>	Tier 1	QL
<i>antacid calcium</i>	Tier 1	
<i>antacid calcium rich</i>	Tier 1	
<i>antacid extra strength oral suspension</i>	Tier 1	QL
<i>antacid extra strength oral tablet chewable 160-105 mg, 750 mg</i>	Tier 1	
<i>antacid fast relief</i>	Tier 1	QL
<i>antacid i</i>	Tier 1	QL
<i>antacid iii</i>	Tier 1	QL
<i>antacid kids</i>	Tier 1	
<i>antacid liquid</i>	Tier 1	QL
<i>antacid m</i>	Tier 1	QL
<i>antacid maximum</i>	Tier 1	
<i>antacid maximum strength</i>	Tier 1	QL
<i>antacid maximum strength oral tablet chewable 1000 mg</i>	Tier 1	
<i>antacid oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml</i>	Tier 1	QL
<i>antacid oral tablet chewable 1000 mg, 500 mg, 750 mg</i>	Tier 1	
<i>antacid plus antigas</i>	Tier 1	QL
<i>antacid regular strength oral suspension</i>	Tier 1	QL
<i>antacid regular strength oral tablet chewable</i>	Tier 1	
<i>antacid ultra strength oral tablet chewable 1000 mg</i>	Tier 1	
<i>antacid/antigas</i>	Tier 1	QL
<i>antacid/anti-gas</i>	Tier 1	QL
<i>antacid/anti-gas max st</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>antacid/gas relief max st</i>	Tier 1	QL
<i>anti-diarr/ant-gas</i>	Tier 1	
<i>anti-diarrheal anti-gas</i>	Tier 1	
<i>anti-diarrheal oral suspension 262 mg/15ml</i>	Tier 1	
<i>anti-diarrheal/anti-gas</i>	Tier 1	
<i>anti-gas oral capsule 180 mg</i>	Tier 1	
<i>biotinex</i>	Tier 1	
<i>bismatrol oral tablet chewable</i>	Tier 1	QL
<i>bismuth</i>	Tier 1	QL
<i>bismuth subsalicylate oral</i>	Tier 1	QL
<i>calcium antacid</i>	Tier 1	
<i>calcium antacid ex st</i>	Tier 1	
<i>calcium antacid extra strength</i>	Tier 1	
<i>calcium carbonate antacid oral suspension</i>	Tier 1	QL
<i>calcium carbonate antacid oral tablet</i>	Tier 1	
<i>calcium carbonate antacid oral tablet chewable</i>	Tier 1	
<i>cal-gest antacid</i>	Tier 1	
<i>chewy not chalky flavor</i>	Tier 1	
<i>childrens soothe</i>	Tier 1	
<i>comfort gel</i>	Tier 1	QL
<i>comfort gel antacid anti-gas oral suspension 400-400-40 mg/5ml</i>	Tier 1	QL
<i>digestive probiotic capsule oral</i>	Tier 1	QL
<i>diarrhea</i>	Tier 1	
<i>diarrhea relief</i>	Tier 1	
<i>digestive probiotic oral capsule 250 mg</i>	Tier 1	
<i>diotame instydose</i>	Tier 1	
<i>enema</i>	Tier 1	
<i>enema disposable</i>	Tier 1	
<i>enema ready-to-use</i>	Tier 1	
<i>enema rectal enema 16-6 gm/133ml, 19-7 gm/118ml</i>	Tier 1	
<i>FLEET ENEMA (sodium phosphates)</i>	Tier 2	
<i>FLEET PEDIATRIC (sodium phosphates)</i>	Tier 2	
<i>floranex tablet oral</i>	Tier 1	
<i>FLORANEX TABLET ORAL (lactobacillus)</i>	Tier 2	

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Drug Name	Drug Tier	Notes
<i>foaming antacid oral tablet chewable 80-20 mg</i>	Tier 1	
<i>freeze dried acidophilus</i>	Tier 1	
<i>gas relief antiflatuent</i>	Tier 1	
<i>gas relief drops infants</i>	Tier 1	
<i>gas relief extra strength</i>	Tier 1	
<i>gas relief extstrength</i>	Tier 1	
<i>gas relief infants</i>	Tier 1	
<i>gas relief infants drops</i>	Tier 1	
<i>gas relief infants oral suspension</i>	Tier 1	
<i>gas relief oral capsule 125 mg, 180 mg</i>	Tier 1	
<i>gas relief oral tablet chewable 125 mg, 80 mg</i>	Tier 1	
<i>gas relief ultra strength</i>	Tier 1	
<i>gas relief ultstrength</i>	Tier 1	
<b>GAS-X EXTRA STRENGTH ORAL CAPSULE (simethicone)</b>	Tier 2	
<b>GAS-X EXTRA STRENGTH ORAL TABLET CHEWABLE (simethicone)</b>	Tier 2	
<b>GAS-X ULTRA STRENGTH (simethicone)</b>	Tier 2	
<b>GAVISCON (alum hydroxide-mag carbonate)</b>	Tier 2	
<b>GAVISCON EXTRA RELIEF FORMULA (alum hydroxide-mag carbonate)</b>	Tier 2	
<b>GAVISCON EXTRA STRENGTH (alum hydroxide-mag carbonate)</b>	Tier 2	
<b>GELUSIL (alum &amp; mag hydroxide-simeth)</b>	Tier 2	
<i>geri-lanta</i>	Tier 1	QL
<i>geri-mox</i>	Tier 1	QL
<i>heartburn antacid</i>	Tier 1	
<i>heartburn antacid ex st</i>	Tier 1	
<i>heartburn relief ex st</i>	Tier 1	
<i>heartburn relief oral tablet chewable 160-105 mg</i>	Tier 1	
<i>heartland gas relief</i>	Tier 1	
<b>IDEAL BOWEL SUPPORT</b>	Tier 2	
<b>IMODIUM MULTI-SYMPOTOM RELIEF (loperamide-simethicone)</b>	Tier 2	
<i>infant gas relief</i>	Tier 1	
<i>infants gas relief</i>	Tier 1	
<i>lactobacillus oral tablet , 0.2-0.2 mg</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>lacto-pectin</i>	Tier 1	QL
<i>long lasting antacid</i>	Tier 1	
<i>loperamide-simethicone</i>	Tier 1	
<b>MAALOX CHILDRENS (calcium carbonate antacid)</b>	Tier 2	
<b>MAALOX MAX ORAL SUSPENSION (alum &amp; mag hydroxide-simeth)</b>	Tier 2	QL
<b>MAALOX MULTI SYMPTOM MAX ST (alum &amp; mag hydroxide-simeth)</b>	Tier 2	QL
<i>mag-al plus</i>	Tier 1	QL
<i>mag-al plus xs</i>	Tier 1	QL
<i>mega probiotic</i>	Tier 1	QL
<i>meijer antacid</i>	Tier 1	QL
<i>milk of magnesia</i>	Tier 1	
<i>milk of magnesia oral suspension 1200 mg/15ml</i>	Tier 1	
<i>mintox maximum strength</i>	Tier 1	QL
<i>mintox plus</i>	Tier 1	
<b>MYLICON INFANTS GAS RELIEF (simethicone)</b>	Tier 2	
<b>NEWFLORA PROBIOTIC</b>	Tier 2	
<b>PEPTO-BISMOL ORAL SUSPENSION 524 MG/30ML (bismuth subsalicylate)</b>	Tier 2	
<b>PHAZYME (simethicone)</b>	Tier 2	
<b>PHAZYME ULTRA STRENGTH (simethicone)</b>	Tier 2	
<i>pink bismuth maximum strength</i>	Tier 1	
<i>pink bismuth oral suspension 262 mg/15ml, 525 mg/15ml</i>	Tier 1	
<i>pink bismuth oral tablet 262 mg</i>	Tier 1	
<i>pink bismuth oral tablet chewable 262 mg</i>	Tier 1	QL
<i>pink-bismuth</i>	Tier 1	QL
<i>probiotic blend</i>	Tier 1	QL
<i>probiotic colon care</i>	Tier 1	QL
<i>probiotic complex</i>	Tier 1	QL
<i>probiotic maximum strength</i>	Tier 1	QL
<i>probiotic oral capsule</i>	Tier 1	QL
<i>probiotic oral capsule 250 mg</i>	Tier 1	
<i>probiotic pearls ex st</i>	Tier 1	QL
<i>ready-to-use enema rectal enema</i>	Tier 1	
<b>REJUVAFLOR</b>	Tier 2	
<b>RESTORA (probiotic product)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>RISAQUAD (probiotic product)</b>	Tier 2	QL
<b>RISAQUAD-2 (probiotic product)</b>	Tier 2	QL
<b>saccharomyces boulardii</b>	Tier 1	
<b>saline enema</b>	Tier 1	
<b>senior probiotic</b>	Tier 1	QL
<b>simeped</b>	Tier 1	
<b>simethicone drops infants</b>	Tier 1	
<b>simethicone oral</b>	Tier 1	
<b>simethicone ultra strength</b>	Tier 1	
<b>smooth antacid ex st oral tablet chewable 750 mg</b>	Tier 1	
<b>smooth antacid extra st</b>	Tier 1	
<b>smooth antacid extra strength</b>	Tier 1	
<b>sodium bicarbonate oral tablet</b>	Tier 1	
<b>soothe maximum strength</b>	Tier 1	
<b>soothe oral suspension</b>	Tier 1	
<b>soothe oral tablet</b>	Tier 1	
<b>soothe oral tablet chewable</b>	Tier 1	QL
<b>stomach relief extra strength</b>	Tier 1	
<b>stomach relief max st oral suspension 525 mg/15ml</b>	Tier 1	
<b>stomach relief oral suspension 1050 mg/30ml, 262 mg/15ml, 525 mg/15ml, 525 mg/30ml, 527 mg/30ml</b>	Tier 1	
<b>stomach relief oral tablet 262 mg</b>	Tier 1	
<b>stomach relief oral tablet chewable 262 mg</b>	Tier 1	QL
<b>stomach relief plus</b>	Tier 1	
<b>stomach relief ultra</b>	Tier 1	
<b>TUMS (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS CHEWY BITES (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS E-X 750 (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS EXTRA STRENGTH 750 (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS LASTING EFFECTS (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS SMOOTHIES (calcium carbonate antacid)</b>	Tier 2	
<b>TUMS ULTRA 1000 (calcium carbonate antacid)</b>	Tier 2	
<b>VISBIOME HIGH POTENCY ORAL CAPSULE (probiotic product)</b>	Tier 2	QL
<b>Laxatives - Bowel Treatment Drugs</b>		
<b>clearlax oral powder 17 gm/scoop</b>	Tier 1	ONLY powder bottle; QL

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Drug Name	Drug Tier	Notes
<i>daily fiber oral capsule 0.52 gm</i>	Tier 1	
<i>enema mineral oil</i>	Tier 1	
<i>EVAC (psyllium)</i>	Tier 2	
<i>fiber laxative oral capsule 0.52 gm</i>	Tier 1	
<i>fiber oral capsule 0.52 gm</i>	Tier 1	
<i>fiber oral powder 28.3 %</i>	Tier 1	QL
<i>fiber oral powder 48.57 %, 58.6 %</i>	Tier 1	
<i>fiber therapy oral capsule 0.52 gm</i>	Tier 1	
<i>fiber therapy oral powder 28.3 %</i>	Tier 1	QL
<i>FLEET OIL (mineral oil)</i>	Tier 2	
<i>gavilax oral powder</i>	Tier 1	ONLY powder bottle; QL
<i>gentlelax</i>	Tier 1	ONLY powder bottle; QL
<i>glycolax</i>	Tier 1	ONLY powder bottle; QL
<i>konsyl daily fiber oral powder 28.3 %</i>	Tier 1	QL
<i>laxaclear</i>	Tier 1	ONLY powder bottle; QL
<i>laxative oral powder 17 gm/scoop</i>	Tier 1	ONLY powder bottle; QL
<i>mineral oil enema</i>	Tier 1	
<i>mineral oil heavy oral</i>	Tier 1	
<i>mineral oil oral oil</i>	Tier 1	
<i>mineral oil rectal enema</i>	Tier 1	
<i>MIRALAX ORAL POWDER (polyethylene glycol 3350)</i>	Tier 2	ONLY powder bottle; QL
<i>mm clearlax</i>	Tier 1	ONLY powder bottle; QL
<i>natural daily fiber</i>	Tier 1	
<i>natural fiber laxative oral powder 58.6 %</i>	Tier 1	
<i>natural fiber oral capsule 0.52 gm</i>	Tier 1	
<i>natural fiber oral powder 28.3 %</i>	Tier 1	QL
<i>natural fiber oral powder 48.57 %, 58.6 %</i>	Tier 1	
<i>natural fiber supplement</i>	Tier 1	
<i>natural vegetable</i>	Tier 1	
<i>natural vegetable fiber</i>	Tier 1	
<i>natura-lax</i>	Tier 1	ONLY powder bottle; QL
<i>peg 3350 oral powder</i>	Tier 1	ONLY powder bottle; QL
<i>polyethylene glycol 3350 oral powder</i>	Tier 1	ONLY powder bottle; QL
<i>polyethylene glycol 3350-grx oral powder</i>	Tier 1	ONLY powder bottle; QL
<i>purelax oral powder</i>	Tier 1	ONLY powder bottle; QL
<i>smooth lax oral powder</i>	Tier 1	ONLY powder bottle; QL

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Drug Name	Drug Tier	Notes
<i>sorbitol oral</i>	Tier 1	
<b>Laxatives - Drugs to treat Constipation</b>		
<b>AVEDANA GLYCERIN (ADULT) (glycerin (laxative))</b>	Tier 2	
<i>citroma</i>	Tier 1	QL
<b>CITRUCEL (methylcellulose (laxative))</b>	Tier 2	
<b>COLACE (docusate sodium)</b>	Tier 2	QL
<b>col-rite oral capsule 250 mg</b>	Tier 1	QL
<i>docu</i>	Tier 1	QL
<i>docu liquid</i>	Tier 1	QL
<b>docusate calcium</b>	Tier 1	
<b>docusate mini</b>	Tier 1	QL
<b>docusate sodium oral capsule</b>	Tier 1	QL
<b>docusate sodium oral liquid 100 mg/10ml, 50 mg/5ml</b>	Tier 1	QL
<b>docusate sodium oral syrup</b>	Tier 1	
<b>DOCUSOL MINI (docusate sodium)</b>	Tier 2	QL
<i>docuzen</i>	Tier 1	
<i>dss</i>	Tier 1	QL
<i>easy-lax plus</i>	Tier 1	
<b>ENEMEEZ MINI (docusate sodium)</b>	Tier 2	QL
<b>EX-LAX MAXIMUM STRENGTH (sennosides)</b>	Tier 2	
<b>fiber laxative</b>	Tier 1	
<b>fiber laxative + calcium</b>	Tier 1	
<b>fiber laxative oral tablet 500 mg</b>	Tier 1	
<b>fiber oral tablet 500 mg, 625 mg</b>	Tier 1	
<b>fiber therapy oral tablet 500 mg, 625 mg</b>	Tier 1	
<b>fiber-caps</b>	Tier 1	
<b>fiber-lax</b>	Tier 1	
<b>geri-kot</b>	Tier 1	
<b>glycerin (adult) rectal suppository 2 gm</b>	Tier 1	
<b>glycerin (infants &amp; children) rectal suppository 1 gm</b>	Tier 1	
<b>glycerin adult rectal suppository 2 gm</b>	Tier 1	
<b>glycerin child rectal suppository 1 gm, 1.2 gm</b>	Tier 1	
<b>glycerin childrens</b>	Tier 1	
<b>glycerin pediatric rectal suppository 1.2 gm</b>	Tier 1	
<b>laxacin</b>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>laxative max str</i>	Tier 1	
<i>laxative maximum strength oral tablet 25 mg</i>	Tier 1	
<i>laxative pills</i>	Tier 1	
<i>laxative pills max st</i>	Tier 1	
<i>laxative pills oral tablet 25 mg</i>	Tier 1	
<i>laxative regular strength</i>	Tier 1	
<i>magnesium citrate oral solution</i>	Tier 1	QL
<i>mm stool softener laxative</i>	Tier 1	QL
<i>natural laxative</i>	Tier 1	
<i>natural senna laxative</i>	Tier 1	
<i>natural vegetable laxative oral tablet 8.6 mg</i>	Tier 1	
<i>ONELAX MAGNESIUM CITRATE (magnesium citrate)</i>	Tier 2	QL
<i>ONELAX SENNA (sennosides)</i>	Tier 2	
<i>p col-rite</i>	Tier 1	
<i>PEDIA-LAX ORAL LIQUID (docusate sodium)</i>	Tier 2	
<i>PERDIEM OVERNIGHT RELIEF (sennosides)</i>	Tier 2	
<i>sb docusate sodium/senna</i>	Tier 1	
<i>senexon-s</i>	Tier 1	
<i>senna lax</i>	Tier 1	
<i>senna laxative</i>	Tier 1	
<i>senna oral liquid</i>	Tier 1	
<i>senna oral syrup</i>	Tier 1	
<i>senna oral tablet</i>	Tier 1	
<i>senna plus oral tablet</i>	Tier 1	
<i>senna s</i>	Tier 1	
<i>senna smooth</i>	Tier 1	
<i>senna-docusate sodium</i>	Tier 1	
<i>senna-lax</i>	Tier 1	
<i>senna-plus</i>	Tier 1	
<i>senna-s</i>	Tier 1	
<i>senna-tabs</i>	Tier 1	
<i>senna-time</i>	Tier 1	
<i>senna-time s</i>	Tier 1	
<i>sennazon</i>	Tier 1	
<i>SENOKOT (sennosides)</i>	Tier 2	

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Drug Name	Drug Tier	Notes
<b>SENOKOT S (sennosides-docusate sodium)</b>	Tier 2	
<b>soluble fiber therapy</b>	Tier 1	
<b>stimulant laxative oral tablet 8.6-50 mg</b>	Tier 1	
<b>stool softener laxative oral capsule</b>	Tier 1	QL
<b>stool softener oral capsule 100 mg, 250 mg</b>	Tier 1	QL
<b>stool softener oral capsule 240 mg, 50 mg</b>	Tier 1	
<b>stool softener pls laxative</b>	Tier 1	
<b>stool softener plus laxative</b>	Tier 1	
<b>stool softener/laxative</b>	Tier 1	
<b>stool softener/laxative oral tablet</b>	Tier 1	
<b>vegetable lax+stool softener</b>	Tier 1	
<b>vegetable laxative</b>	Tier 1	
<b>Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment</b>		
<b>CHOLBAM (cholic acid)</b>	Tier 2	PA; SP; QL
<b>CREON (pancrelipase (lip-prot-amyl))</b>	Tier 2	
<b>CYSTAGON (cysteamine bitartrate)</b>	Tier 2	QL
<b>NITYR (nitisinone)</b>	Tier 2	DX2RX; SP; QL
<b>RAVICTI (glycerol phenylbutyrate)</b>	Tier 2	PA; SP; QL
<b>sapropterin dihydrochloride</b>	Tier 1	DX2RX; SP; QL
<b>sodium phenylbutyrate oral powder</b>	Tier 1	DX2RX; SP
<b>STRENSIQ (asfotase alfa)</b>	Tier 2	PA; SP
<b>TEGSEDI (inotersen sodium)</b>	Tier 2	PA; SP; QL
<b>VYNDAMAX (tafamidis)</b>	Tier 2	PA; SP; QL
<b>VYNDAQEL (tafamidis meglumine (cardiac))</b>	Tier 2	PA; SP; QL
<b>Genitourinary Agents</b>		
<b>Antispasmodics, Urinary</b>		
<b>oxybutynin chloride er</b>	Tier 1	QL
<b>oxybutynin chloride oral</b>	Tier 1	QL
<b>tolterodine tartrate</b>	Tier 1	ST; QL
<b>trospium chloride</b>	Tier 1	ST; QL
<b>Benign Prostatic Hypertrophy Agents</b>		
<b>alfuzosin hcl er</b>	Tier 1	QL
<b>finasteride oral tablet 5 mg</b>	Tier 1	QL
<b>tamsulosin hcl</b>	Tier 1	QL
<b>terazosin hcl</b>	Tier 1	QL
<b>Genitourinary Agents, Other</b>		

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Drug Name	Drug Tier	Notes
<i>bethanechol chloride oral</i>	Tier 1	
<i>ELMIRON (pentosan polysulfate sodium)</i>	Tier 2	DX2RX; QL
<i>penicillamine oral tablet</i>	Tier 1	DX2RX; SP; QL
<b>Genitourinary Agents - Drugs to Treat Bladder, Genital and Kidney Conditions</b>		
<b>Genitourinary Agents, Other - Miscellaneous Bladder, Genital, and Kidney Conditions Drugs</b>		
<i>azo</i>	Tier 1	
<i>phenazo oral tablet 200 mg</i>	Tier 1	QL
<i>phenazo oral tablet 95 mg</i>	Tier 1	
<i>phenazopyridine hcl oral tablet 100 mg, 200 mg</i>	Tier 1	QL
<i>PYRIDIUM (phenazopyridine hcl)</i>	Tier 2	QL
<i>urinary pain relief oral tablet 95 mg</i>	Tier 1	
<i>VCF VAGINAL CONTRACEPTIVE VAGINAL FOAM (nonoxynol-9)</i>	Tier 2	GE
<b>Glycemic Agents - Diabetic Drugs</b>		
<b>Blood Glucose Regulators - Drugs to Regulate Blood Sugar</b>		
<i>ZEGALOGUE (dasiglucagon hcl)</i>	Tier 2	QL
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)</b>		
<i>dexamethasone intenso</i>	Tier 1	
<i>dexamethasone oral elixir</i>	Tier 1	QL
<i>dexamethasone oral solution</i>	Tier 1	QL
<i>dexamethasone oral tablet 0.5 mg, 0.75 mg, 1 mg, 2 mg</i>	Tier 1	
<i>dexamethasone oral tablet 1.5 mg, 4 mg, 6 mg</i>	Tier 1	QL
<i>fludrocortisone acetate oral</i>	Tier 1	QL
<i>hydrocortisone oral tablet 10 mg, 20 mg, 5 mg</i>	Tier 1	QL
<i>MEDROL ORAL TABLET 2 MG (methylprednisolone)</i>	Tier 2	
<i>methylprednisolone oral</i>	Tier 1	QL
<i>prednisolone oral</i>	Tier 1	QL
<i>prednisolone sodium phosphate oral solution 15 mg/5ml</i>	Tier 1	
<i>prednisolone sodium phosphate oral solution 6.7 (5 base) mg/5ml</i>	Tier 1	QL
<i>prednisone oral solution</i>	Tier 1	QL
<i>prednisone oral tablet</i>	Tier 1	QL
<i>prednisone oral tablet therapy pack 10 mg (21)</i>	Tier 1	QL
<i>prednisone oral tablet therapy pack 10 mg (48), 5 mg (21), 5 mg (48)</i>	Tier 1	
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)</b>		

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Drug Name	Drug Tier	Notes
CHORIONIC GONADOTROPIN INTRAMUSCULAR	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<i>desmopressin ace spray refrig</i>	Tier 1	QL
<i>desmopressin acetate oral</i>	Tier 1	QL
<i>desmopressin acetate spray</i>	Tier 1	QL
<i>EGRIFTA SV (tesamorelin acetate)</i>	Tier 2	DX2RX; SP; QL
<i>INCRELEX (mecasermin)</i>	Tier 2	PA; SP
<i>NOCDURNA (desmopressin acetate)</i>	Tier 2	PA; QL
<i>NORDITROPIN FLEXPRO (somatropin)</i>	Tier 2	PA; SP
<i>NOVAREL (chorionic gonadotropin)</i>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<i>PREGNYL (chorionic gonadotropin)</i>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<i>ZOMACTON (somatropin)</i>	Tier 2	PA; SP
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Drugs to Regulate Hormones</b>		
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary) - Hormone Replacement/Modifying Drugs</b>		
<i>OVIDREL (choriogonadotropin alfa)</i>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</b>		
<i>KORLYM (mifepristone)</i>	Tier 2	PA; SP; QL
<i>methergine</i>	Tier 1	QL
<i>methylergonovine maleate oral</i>	Tier 1	QL
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
<b>Androgens</b>		
<i>danazol oral</i>	Tier 1	QL
<i>DEPO-TESTOSTERONE SOLUTION 200 MG/ML INTRAMUSCULAR (testosterone cypionate)</i>	Tier 2	QL
<i>testosterone cypionate intramuscular</i>	Tier 1	QL
<i>testosterone enanthate intramuscular</i>	Tier 1	QL
<i>testosterone transdermal gel 12.5 mg/act (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</i>	Tier 1	PA; QL

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Drug Name	Drug Tier	Notes
<b>Estrogens</b>		
<i>afirmelle</i>	Tier 1	QL; GE
<i>altavera</i>	Tier 1	QL; GE
<i>alyacen 1/35</i>	Tier 1	QL; GE
<i>alyacen 7/7/7</i>	Tier 1	QL; GE
<i>apri</i>	Tier 1	QL; GE
<i>aranelle</i>	Tier 1	QL; GE
<i>aubra</i>	Tier 1	QL; GE
<i>aubra eq</i>	Tier 1	QL; GE
<i>aurovela 1.5/30</i>	Tier 1	QL; GE
<i>aurovela 1/20</i>	Tier 1	QL; GE
<i>aurovela fe 1.5/30</i>	Tier 1	QL; GE
<i>aurovela fe 1/20</i>	Tier 1	QL; GE
<i>aviane</i>	Tier 1	QL; GE
<i>ayuna</i>	Tier 1	QL; GE
<i>azurette</i>	Tier 1	QL; GE
<i>balziva</i>	Tier 1	QL; GE
<i>blisovi fe 1.5/30</i>	Tier 1	QL; GE
<i>blisovi fe 1/20</i>	Tier 1	QL; GE
<i>briellyn</i>	Tier 1	QL; GE
<i>chateal</i>	Tier 1	QL; GE
<i>chateal eq</i>	Tier 1	QL; GE
<i>cryselle-28</i>	Tier 1	QL; GE
<i>cyred</i>	Tier 1	QL; GE
<i>cyred eq</i>	Tier 1	QL; GE
<i>dasetta 1/35</i>	Tier 1	QL; GE
<i>dasetta 7/7/7</i>	Tier 1	QL; GE
<i>delyla</i>	Tier 1	QL; GE
<b>DEPO-ESTRADIOL (estradiol cypionate)</b>	Tier 2	QL
<i>desogestrel-ethinyl estradiol</i>	Tier 1	QL; GE
<i>dotti</i>	Tier 1	QL
<b>DUAVEE (conj estrogens-bazedoxifene)</b>	Tier 2	QL
<i>elinest</i>	Tier 1	QL; GE
<i>eluryng</i>	Tier 1	QL; GE
<i>enpresse-28</i>	Tier 1	QL; GE
<i>enskyce</i>	Tier 1	QL; GE
<i>estarylla</i>	Tier 1	QL; GE

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Drug Name	Drug Tier	Notes
<i>estradiol oral</i>	Tier 1	QL
<i>estradiol transdermal patch twice weekly</i>	Tier 1	QL
<i>estradiol transdermal patch weekly</i>	Tier 1	QL
<i>estradiol vaginal</i>	Tier 1	QL
<i>ethynodiol diac-eth estradiol</i>	Tier 1	QL; GE
<i>etonogestrel-ethynodiol estradiol</i>	Tier 1	QL; GE
<i>falmina</i>	Tier 1	QL; GE
<i>femynor</i>	Tier 1	QL; GE
<i>hailey 1.5/30</i>	Tier 1	QL; GE
<i>hailey fe 1.5/30</i>	Tier 1	QL; GE
<i>hailey fe 1/20</i>	Tier 1	QL; GE
<i>iclevia</i>	Tier 1	QL
<i>introvale</i>	Tier 1	QL
<i>isibloom</i>	Tier 1	QL; GE
<i>jolessa</i>	Tier 1	QL
<i>juleber</i>	Tier 1	QL; GE
<i>junel 1.5/30</i>	Tier 1	QL; GE
<i>junel 1/20</i>	Tier 1	QL; GE
<i>junel fe oral tablet 1-20 mg-mcg, 1.5-30 mg-mcg</i>	Tier 1	QL; GE
<i>kalliga</i>	Tier 1	QL; GE
<i>kariva</i>	Tier 1	QL; GE
<i>kelnor 1/35</i>	Tier 1	QL; GE
<i>kelnor 1/50</i>	Tier 1	QL; GE
<i>kurvelo</i>	Tier 1	QL; GE
<i>larin 1.5/30</i>	Tier 1	QL; GE
<i>larin 1/20</i>	Tier 1	QL; GE
<i>larin fe 1.5/30</i>	Tier 1	QL; GE
<i>larin fe 1/20</i>	Tier 1	QL; GE
<i>leena</i>	Tier 1	QL; GE
<i>lessina</i>	Tier 1	QL; GE
<i>levonest</i>	Tier 1	QL; GE
<i>levonorgestrel-estradiol 91-day oral tablet 0.15-0.03 mg</i>	Tier 1	QL
<i>levonorgestrel-ethynodiol estradiol oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</i>	Tier 1	QL; GE
<i>levonorgestrel-estradiol triphasic</i>	Tier 1	QL; GE
<i>levora 0.15/30 (28)</i>	Tier 1	QL; GE
<i>low-ogestrel</i>	Tier 1	QL; GE

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Drug Name	Drug Tier	Notes
<i>lutera</i>	Tier 1	QL; GE
<i>lyllana</i>	Tier 1	QL
<i>marlissa</i>	Tier 1	QL; GE
<i>microgestin 1.5/30</i>	Tier 1	QL; GE
<i>microgestin 1/20</i>	Tier 1	QL; GE
<i>microgestin fe 1.5/30</i>	Tier 1	QL; GE
<i>microgestin fe 1/20</i>	Tier 1	QL; GE
<i>mili</i>	Tier 1	QL; GE
<i>mono-linyah</i>	Tier 1	QL; GE
<i>necon 0.5/35 (28)</i>	Tier 1	QL; GE
<i>norethin ace-eth estrad-fe oral tablet</i>	Tier 1	QL; GE
<i>norethindrone acet-ethinyl est</i>	Tier 1	QL; GE
<i>norethindron-ethinyl estrad-fe</i>	Tier 1	QL; GE
<i>norgestimate-eth estradiol</i>	Tier 1	QL; GE
<i>norgestimate-ethinyl estradiol triphasic oral tablet 0.18/0.215/0.25 mg-35 mcg</i>	Tier 1	QL; GE
<i>nortrel 0.5/35 (28)</i>	Tier 1	QL; GE
<i>nortrel 1/35 (21)</i>	Tier 1	QL; GE
<i>nortrel 1/35 (28)</i>	Tier 1	QL; GE
<i>nortrel 7/7/7</i>	Tier 1	QL; GE
<i>nylia 1/35</i>	Tier 1	QL; GE
<i>nylia 7/7/7</i>	Tier 1	QL; GE
<i>nymyo</i>	Tier 1	QL; GE
<i>philith</i>	Tier 1	QL; GE
<i>pimtrea</i>	Tier 1	QL; GE
<i>pirmella 1/35</i>	Tier 1	QL; GE
<i>pirmella 7/7/7</i>	Tier 1	QL; GE
<i>portia-28</i>	Tier 1	QL; GE
<i>PREMARIN ORAL (estrogens conjugated)</i>	Tier 2	QL
<i>PREMPHASE (conj estrog-medroxyprogester ace)</i>	Tier 2	QL
<i>PREMPRO (conj estrog-medroxyprogester ace)</i>	Tier 2	QL
<i>reclipsen</i>	Tier 1	QL; GE
<i>setlakin</i>	Tier 1	QL
<i>simliya</i>	Tier 1	QL; GE
<i>sprintec 28</i>	Tier 1	QL; GE
<i>sronyx</i>	Tier 1	QL; GE
<i>tarina fe 1/20</i>	Tier 1	QL; GE

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Drug Name	Drug Tier	Notes
<i>tarina fe 1/20 eq</i>	Tier 1	QL; GE
<i>tilia fe</i>	Tier 1	QL; GE
<i>tri-estarrylla</i>	Tier 1	QL; GE
<i>tri-legest fe</i>	Tier 1	QL; GE
<i>tri-linyah</i>	Tier 1	QL; GE
<i>tri-mili</i>	Tier 1	QL; GE
<i>tri-nymyo</i>	Tier 1	QL; GE
<i>tri-sprintec</i>	Tier 1	QL; GE
<i>trivora (28)</i>	Tier 1	QL; GE
<i>tri-vylibra</i>	Tier 1	QL; GE
<i>tyblume</i>	Tier 1	QL; GE
<i>velivet</i>	Tier 1	QL
<i>vienva</i>	Tier 1	QL; GE
<i>viorele</i>	Tier 1	QL; GE
<i>volnea</i>	Tier 1	QL; GE
<i>vyfemla</i>	Tier 1	QL; GE
<i>vylibra</i>	Tier 1	QL; GE
<i>wera</i>	Tier 1	QL; GE
<i>xulane</i>	Tier 1	QL; GE
<i>yuvafem</i>	Tier 1	QL
<i>zafemy</i>	Tier 1	QL; GE
<i>zovia 1/35 (28)</i>	Tier 1	QL; GE
<b>Progestins</b>		
<i>camila</i>	Tier 1	QL; GE
<i>deblitane</i>	Tier 1	QL; GE
<i>errin</i>	Tier 1	QL; GE
<i>heather</i>	Tier 1	QL; GE
<i>hydroxyprogesterone caproate intramuscular oil</i>	Tier 1	SP; QL
<i>incassia</i>	Tier 1	QL; GE
<i>jencycla</i>	Tier 1	QL; GE
<i>lyeq</i>	Tier 1	QL; GE
<i>lyza</i>	Tier 1	QL; GE
<i>MAKENA (hydroxyprogesterone caproate)</i>	Tier 2	SP; QL
<i>medroxyprogesterone acetate intramuscular</i>	Tier 1	QL; GE
<i>medroxyprogesterone acetate oral</i>	Tier 1	QL
<i>megestrol acetate oral suspension 40 mg/ml</i>	Tier 1	QL
<i>megestrol acetate oral tablet 20 mg</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>megestrol acetate oral tablet 40 mg</i>	Tier 1	QL
<i>nora-be</i>	Tier 1	QL; GE
<i>norethindrone acetate oral</i>	Tier 1	QL
<i>norethindrone oral</i>	Tier 1	QL; GE
<i>norlyroc</i>	Tier 1	QL; GE
<i>progesterone oral</i>	Tier 1	DX2RX; QL
<i>sharobel</i>	Tier 1	QL; GE
<b>Selective Estrogen Receptor Modifying Agents</b>		
<i>raloxifene hcl</i>	Tier 1	QL
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers) - Drugs to Regulate Hormones</b>		
<b>Progestins - Hormone Replacement/Modifying Drugs</b>		
<i>aftera</i>	Tier 1	QL; GE
<i>econtra ez</i>	Tier 1	QL; GE
<i>econtra one-step</i>	Tier 1	QL; GE
<i>levonorgestrel</i>	Tier 1	QL; GE
<i>my choice</i>	Tier 1	QL; GE
<i>my way</i>	Tier 1	QL; GE
<i>new day</i>	Tier 1	QL; GE
<i>opcicon one-step</i>	Tier 1	QL; GE
<i>option 2</i>	Tier 1	QL; GE
<i>PLAN B ONE-STEP (levonorgestrel)</i>	Tier 2	QL; GE
<i>react</i>	Tier 1	QL; GE
<i>take action</i>	Tier 1	QL; GE
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)</b>		
<i>euthyrox</i>	Tier 1	QL
<i>levo-t</i>	Tier 1	QL
<i>levothyroxine sodium oral tablet</i>	Tier 1	QL
<i>levoxyl</i>	Tier 1	QL
<i>liothyronine sodium oral</i>	Tier 1	QL
<i>unithroid</i>	Tier 1	QL
<b>Hormonal Agents, Suppressant (Adrenal)</b>		
<i>LYSODREN (mitotane)</i>	Tier 2	QL
<b>Hormonal Agents, Suppressant (Pituitary)</b>		
<i>cabergoline</i>	Tier 1	QL
<i>leuprolide acetate injection</i>	Tier 1	PA; SP
<i>LEUPROLIDE ACETATE INTRAMUSCULAR</i>	Tier 2	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>LUPRON DEPOT (1-MONTH) (leuprolide acetate)</b>	Tier 2	PA; SP; QL
<b>LUPRON DEPOT (3-MONTH) (leuprolide acetate (3 month))</b>	Tier 2	PA; SP; QL
<b>LUPRON DEPOT (4-MONTH) INTRAMUSCULAR KIT 30MG (leuprolide acetate (4 month))</b>	Tier 2	PA; SP; QL
<b>LUPRON DEPOT (6-MONTH) INTRAMUSCULAR KIT 45MG (leuprolide acetate (6 month))</b>	Tier 2	PA; SP; QL
<b>LUPRON DEPOT-PED (1-MONTH) (leuprolide acetate)</b>	Tier 2	PA; SP; QL
<b>LUPRON DEPOT-PED (3-MONTH) (leuprolide acetate (3 month))</b>	Tier 2	PA; SP; QL
<b>octreotide acetate injection solution 100 mcg/ml, 200 mcg/ml, 50 mcg/ml</b>	Tier 1	SP
<b>octreotide acetate injection solution 1000 mcg/ml, 500 mcg/ml</b>	Tier 1	SP; QL
<b>ORILISSA (elagolix sodium)</b>	Tier 2	PA; QL
<b>SIGNIFOR (pasireotide diaspartate)</b>	Tier 2	PA; SP; QL
<b>SOMAVERT (pegvisomant)</b>	Tier 2	PA; SP; QL
<b>Hormonal Agents, Suppressant (Thyroid)</b>		
<b>Antithyroid Agents</b>		
<b>methimazole oral</b>	Tier 1	QL
<b>propylthiouracil oral</b>	Tier 1	QL
<b>Immunological Agents</b>		
<b>Angioedema Agents</b>		
<b>HAEGARDA (c1 esterase inhibitor (human))</b>	Tier 2	PA; SP; QL
<b>icatibant acetate</b>	Tier 1	PA; SP; QL
<b>RUCONEST (c1 esterase inhibitor (recomb))</b>	Tier 2	PA; SP; QL
<b>sajazir</b>	Tier 1	PA; SP; QL
<b>Immunological Agents, Other</b>		
<b>COSENTYX (secukinumab)</b>	Tier 2	PA; SP; QL
<b>ILARIS (canakinumab)</b>	Tier 2	PA; SP; QL
<b>ILUMYA (tildrakizumab-asmn)</b>	Tier 2	PA; SP; QL
<b>KEVZARA (sarilumab)</b>	Tier 2	PA; SP; QL
<b>KINERET (anakinra)</b>	Tier 2	PA; SP; QL
<b>OLUMIANT ORAL TABLET 1 MG, 2 MG (baricitinib)</b>	Tier 2	PA; SP; QL
<b>OTEZLA (apremilast)</b>	Tier 2	PA; SP; QL
<b>SYNAGIS (palivizumab)</b>	Tier 2	PA; SP
<b>Immunostimulants</b>		
<b>ACTIMMUNE (interferon gamma-1b)</b>	Tier 2	PA; SP
<b>INTRON A (interferon alfa-2b)</b>	Tier 2	PA; SP

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Drug Name	Drug Tier	Notes
<b>PEGASYS SUBCUTANEOUS SOLUTION (peginterferon alfa-2a)</b>	Tier 2	PA; SP; QL
<b>Immunosuppressants</b>		
<i>azathioprine oral tablet 50 mg</i>	Tier 1	QL
<i>CIMZIA (certolizumab pegol)</i>	Tier 2	PA; SP; QL
<i>cyclosporine modified oral capsule 100 mg, 25 mg</i>	Tier 1	QL
<i>cyclosporine modified oral capsule 50 mg</i>	Tier 1	
<i>cyclosporine modified oral solution</i>	Tier 1	QL
<i>cyclosporine oral</i>	Tier 1	QL
<i>ENBREL (etanercept)</i>	Tier 2	PA; SP; QL
<i>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg</i>	Tier 1	QL
<i>everolimus oral tablet 1 mg</i>	Tier 1	
<i>gengraf oral capsule</i>	Tier 1	QL
<i>HUMIRA PEN-PEDIATRIC UC START (adalimumab)</i>	Tier 2	PA; SP; QL
<i>HUMIRA PEN-PSOR/UVEIT STARTER (adalimumab)</i>	Tier 2	PA; SP; QL
<i>HUMIRA SUBCUTANEOUS PEN-INJECTOR KIT 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML (adalimumab)</i>	Tier 2	PA; SP; QL
<i>HUMIRA SUBCUTANEOUS PREFILLED SYRINGE KIT 10 MG/0.1ML, 20 MG/0.2ML, 40 MG/0.4ML, 40 MG/0.8ML, 80 MG/0.8ML, 80 MG/0.8ML &amp; 40MG/0.4ML (adalimumab)</i>	Tier 2	PA; SP; QL
<i>leflunomide oral</i>	Tier 1	QL
<i>methotrexate oral</i>	Tier 1	
<i>methotrexate sodium</i>	Tier 1	
<i>methotrexate sodium (pf)</i>	Tier 1	
<i>mycophenolate mofetil oral</i>	Tier 1	QL
<i>mycophenolate sodium</i>	Tier 1	QL
<i>sirolimus oral solution</i>	Tier 1	
<i>sirolimus oral tablet 0.5 mg, 1 mg</i>	Tier 1	QL
<i>sirolimus oral tablet 2 mg</i>	Tier 1	
<i>tacrolimus oral capsule 0.5 mg, 5 mg</i>	Tier 1	
<i>tacrolimus oral capsule 1 mg</i>	Tier 1	QL
<b>Vaccines</b>		
<i>ACTHIB (haemophilus b polysac conj vac)</i>	Tier 2	
<i>ADACEL (tetanus-diphth-acell pertussis)</i>	Tier 2	QL
<i>BEXSERO (meningococcal b recomb omv adj)</i>	Tier 2	QL
<i>BOOSTRIX INTRAMUSCULAR SUSPENSION (tetanus-diphth-acell pertussis)</i>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>DAPTACEL (diphth-acell pertussis-tetanus)</b>	Tier 2	QL
DIPHTHERIA-TETANUS TOXOIDS DT	Tier 2	QL
<b>ENGERIX-B (hepatitis b vac recombinant)</b>	Tier 2	QL
<b>GARDASIL 9 (hpv 9-valent recomb vaccine)</b>	Tier 2	QL
<b>HAVRIX (hepatitis a vaccine)</b>	Tier 2	QL
<b>HIBERIX (haemophilus b polysac conj vac)</b>	Tier 2	
<b>INFANRIX (diphth-acell pertussis-tetanus)</b>	Tier 2	QL
<b>IPOL (poliovirus vaccine inactivated)</b>	Tier 2	
<b>MENVEO INTRAMUSCULAR SOLUTION RECONSTITUTED (meningococcal a c y&amp;w-135 olig)</b>	Tier 2	QL
<b>M-M-R II (measles, mumps &amp; rubella vac)</b>	Tier 2	QL
<b>PEDIARIX (dtap-hepatitis b recomb-ipv)</b>	Tier 2	QL
<b>PEDVAX HIB (haemophilus b polysac conj vac)</b>	Tier 2	
<b>PENTACEL (dtap-ipv-hib vaccine)</b>	Tier 2	QL
PREHEVBRIOS	Tier 2	QL
<b>PROQUAD (measles-mumps-rubella-varicell)</b>	Tier 2	QL
<b>QUADRACEL INTRAMUSCULAR SUSPENSION (dtap-ipv vaccine)</b>	Tier 2	QL
<b>RECOMBIVAX HB (hepatitis b vac recombinant)</b>	Tier 2	QL
<b>ROTARIX (rotavirus vaccine live oral)</b>	Tier 2	
<b>ROTATEQ (rotavirus vac live pentavalent)</b>	Tier 2	
<b>SHINGRIX (zoster vac recomb adjuvanted)</b>	Tier 2	QL; AL
<b>TDVAX (tetanus-diphtheria toxoids td)</b>	Tier 2	QL
<b>TENIVAC (tetanus-diphtheria toxoids td)</b>	Tier 2	QL
TETANUS-DIPHTHERIA TOXOIDS TD	Tier 2	QL
<b>TRUMENBA (meningococcal b vac (recomb))</b>	Tier 2	QL
<b>TWINRIX (hepatitis a-hep b recomb vac)</b>	Tier 2	QL
<b>VAQTA (hepatitis a vaccine)</b>	Tier 2	QL
<b>VARIVAX (varicella virus vaccine live)</b>	Tier 2	QL
<b>VAXNEUVANCE (pneumococcal 15-val conj vacc)</b>	Tier 2	QL
<b>Immunological Agents - Drugs that Stimulate or Suppress the Immune System</b>		
<b>Vaccines</b>		
<b>AFLURIA QUADRIVALENT (influenza vac split quad)</b>	Tier 2	QL
<b>DENGVAXIA (dengue virus vaccine live tetr)</b>	Tier 2	QL
<b>FLUAD QUADRIVALENT (influenza vac a&amp;b sa adj quad)</b>	Tier 2	QL
<b>FLUARIX QUADRIVALENT (influenza vac split quad)</b>	Tier 2	QL
<b>FLUBLOK QUADRIVALENT (influenza vac recomb ha quad)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>FLUCELVAX QUADRIVALENT (influenza vac subunit quad)</b>	Tier 2	QL
<b>FLULAVAL QUADRIVALENT (influenza vac split quad)</b>	Tier 2	QL
<b>FLUMIST QUADRIVALENT (influenza virus vac live quad)</b>	Tier 2	QL
<b>FLUZONE HIGH-DOSE QUADRIVALENT (influenza vac high-dose quad)</b>	Tier 2	QL
<b>FLUZONE QUADRIVALENT (influenza vac split quad)</b>	Tier 2	QL
<b>HEPLISAV-B (hepatitis b vac recomb adj)</b>	Tier 2	QL; AL
MODERNA COVID-19 VACCINE	Tier 2	QL
NOVAVAX COVID-19 VACCINE	Tier 2	QL
PFIZER COVID-19 VAC-TRIS 5-11Y	Tier 2	QL
PFIZER-BIONTECH COVID-19 VACC	Tier 2	QL
<b>PNEUMOVAX 23 (pneumococcal vac polyvalent)</b>	Tier 2	QL
<b>PREVNAR 13 (pneumococcal 13-val conj vacc)</b>	Tier 2	QL
<b>PREVNAR 20 (pneumococcal 20-val conj vacc)</b>	Tier 2	QL
<b>SPIKEVAX COVID-19 VACCINE (covid-19 mrna virus vaccine)</b>	Tier 2	QL
<b>Inflammatory Bowel Disease Agents</b>		
<b>Aminosalicylates</b>		
<i>balsalazide disodium</i>	Tier 1	QL
<i>mesalamine oral capsule delayed release 400 mg</i>	Tier 1	QL
<i>mesalamine rectal</i>	Tier 1	QL
<i>SFROWASA (mesalamine)</i>	Tier 2	QL
<i>sulfasalazine oral</i>	Tier 1	QL
<b>Glucocorticoids</b>		
<i>budesonide oral</i>	Tier 1	DX2RX; QL
<i>hydrocortisone (perianal) external cream 2.5 %</i>	Tier 1	QL
<i>hydrocortisone rectal enema 100 mg/60ml</i>	Tier 1	QL
<i>procto-med hc</i>	Tier 1	QL
<i>proctosol hc</i>	Tier 1	QL
<i>proctozone-hc</i>	Tier 1	QL
<b>Metabolic Bone Disease Agents</b>		
<i>alendronate sodium oral solution</i>	Tier 1	QL
<i>alendronate sodium oral tablet 10 mg, 35 mg, 70 mg</i>	Tier 1	QL
<i>calcitonin (salmon) nasal</i>	Tier 1	QL
<i>calcitriol oral capsule</i>	Tier 1	QL
<i>calcitriol oral solution</i>	Tier 1	Members >= 8 years of age will require PA; AL
<i>cinacalcet hcl</i>	Tier 1	PA; QL

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Drug Name	Drug Tier	Notes
<b>TYMLOS (abaloparatide)</b>	Tier 2	PA; SP; QL
<b>Miscellaneous Therapeutic Agents</b>		
<i>acne</i>	Tier 1	
<i>acne control cleanser</i>	Tier 1	
<i>acne medication 10 external lotion</i>	Tier 1	QL
<i>acne medication 5 external lotion</i>	Tier 1	
<i>adv acne spot treatment</i>	Tier 1	
<i>advanced acne spot treat</i>	Tier 1	
ALCOHOL PREP PADS PAD , 70 %	Tier 2	QL
<b>ANASPAZ (hyoscyamine sulfate)</b>	Tier 2	QL
<i>antibiotic</i>	Tier 1	QL
<i>antifungal (tolnaftate)</i>	Tier 1	QL
<i>anti-fungal external powder</i>	Tier 1	
<i>antifungal tolnaftate</i>	Tier 1	QL
<i>arthritis pain relieving</i>	Tier 1	QL
<i>aspirin adults</i>	Tier 1	QL
<i>aspirin childrens</i>	Tier 1	QL
<i>aspirin ec</i>	Tier 1	QL
<i>aspirin ec oral tablet 325 mg</i>	Tier 1	QL
<i>aspirin oral tablet 325 mg</i>	Tier 1	QL
<i>aspirin oral tablet chewable 81 mg</i>	Tier 1	QL
<i>aspirin oral tablet delayed release 325 mg, 81 mg</i>	Tier 1	QL
<b>ASPIRIN ORAL TABLET DELAYED RELEASE 81 MG (aspirin)</b>	Tier 2	QL
<i>aspirin rectal suppository 300 mg</i>	Tier 1	
<i>aspirin regimen</i>	Tier 1	QL
<i>athletes foot (tolnaftate) external aerosol powder 1 %</i>	Tier 1	
<i>athletes foot (tolnaftate) external cream 1 %</i>	Tier 1	QL
<i>athletes foot powder spray external aerosol powder 1 %</i>	Tier 1	
<i>bacitracin external</i>	Tier 1	QL
<i>bacitracin zinc external</i>	Tier 1	QL
<i>bacitracin zinc first aid</i>	Tier 1	QL
<i>bacitracin zinc-aloe</i>	Tier 1	QL
<b>BAYER ASPIRIN (aspirin)</b>	Tier 2	QL
<b>BAYER LOW DOSE ORAL TABLET CHEWABLE (aspirin)</b>	Tier 2	QL
<b>BENZAC AC WASH (benzoyl peroxide)</b>	Tier 2	QL
<i>bisacodyl ec</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
bisacodyl laxative	Tier 1	QL
bisacodyl oral tablet delayed release 5 mg	Tier 1	QL
bisacodyl rectal	Tier 1	QL
bp wash external liquid 2.5 %	Tier 1	
BREATHE COMFORT HUMIDIFIER (humidifiers)	Tier 2	QL
calamine external lotion	Tier 1	
CALQUENCE ORAL TABLET (acalabrutinib maleate)	Tier 2	SP; QL
capsaicin external cream	Tier 1	QL
capsaicin hp	Tier 1	QL
capsaicin pain relief	Tier 1	QL
capzix	Tier 1	QL
CARETOUCH HYPODERMIC NEEDLE 25G X 5/8" (needle (disp))	Tier 2	QL
CASTIVA WARMING (capsaicin)	Tier 2	QL
CAYA (diaphragm arc-spring)	Tier 2	QL
childrens aspirin oral tablet chewable 81 mg	Tier 1	QL
c-lax laxative	Tier 1	QL
clearskin	Tier 1	
COMIRNATY (covid-19 mrna virus vaccine)	Tier 2	QL
CONDOMS	Tier 2	QL
COOL MIST HUMIDIFER	Tier 2	QL
corn & callus remover	Tier 1	
corn and callus remover	Tier 1	
daily acne wash	Tier 1	
DERMACINRX ATRIX ANTIBAC WASH (salicylic acid)	Tier 2	
DERMACINRX ATRIX CLARIFY TONER (salicylic acid)	Tier 2	
DERMACINRX PENETRAL (capsaicin)	Tier 2	QL
DERMELEVE ADVANCED FORMULA (aluminum acetate)	Tier 2	
DEXCOM G6 TRANSMITTER (continuous blood gluc transmit)	Tier 2	PA; QL
double antibiotic external ointment 500-10000 unit/gm	Tier 1	
DROPSAFE ALCOHOL PREP (alcohol swabs)	Tier 2	QL
EASIVENT (spacer/aero-holding chambers)	Tier 2	QL
EASIVENT MASK LARGE (spacer/aero-holding chambers)	Tier 2	QL
EASIVENT MASK MEDIUM (spacer/aero-holding chambers)	Tier 2	QL
EASIVENT MASK SMALL (spacer/aero-holding chambers)	Tier 2	QL
ED-SPAZ	Tier 2	QL

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Drug Name	Drug Tier	Notes
<i>enteric aspirin</i>	Tier 1	QL
<b>EX-LAX ULTRA (bisacodyl)</b>	Tier 2	QL
<i>fast relief laxative</i>	Tier 1	QL
<b>FLEET BISACODYL (bisacodyl)</b>	Tier 2	QL
<i>folic acid oral tablet 1 mg</i>	Tier 1	QL
<i>folic acid oral tablet 400 mcg, 800 mcg</i>	Tier 1	
<i>foot &amp; sneaker</i>	Tier 1	
<b>FORMULA 3 THE TREATMENT (tolnaftate)</b>	Tier 2	
<b>FORMULA 7 THE SOLUTION (tolnaftate)</b>	Tier 2	
<i>fungi-guard</i>	Tier 1	QL
<i>gentle laxative</i>	Tier 1	QL
<i>gentle laxative womens</i>	Tier 1	QL
<i>genuine aspirin</i>	Tier 1	QL
<i>h-e-b aspirin</i>	Tier 1	QL
<b>hydrocodone bit-homatrop mbr</b>	Tier 1	QL; AL
<i>hydromet</i>	Tier 1	QL; AL
<i>hyoscyamine sulfate er</i>	Tier 1	QL
<i>hyoscyamine sulfate oral</i>	Tier 1	QL
<i>hyoscyamine sulfate sl</i>	Tier 1	QL
<i>hyoscyamine sulfate sublingual</i>	Tier 1	QL
<i>hyosyne</i>	Tier 1	QL
<b>INSPIREASE (spacer/aero-holding chambers)</b>	Tier 2	QL
<b>INSPIREASE RESERVOIR BAGS (spacer/aero-hold chamber bags)</b>	Tier 2	QL
<i>jock itch max st</i>	Tier 1	
<i>jock itch spray powder</i>	Tier 1	
<i>laxative oral tablet delayed release 5 mg</i>	Tier 1	QL
<i>laxative rectal suppository 10 mg</i>	Tier 1	QL
<b>LEVIBID (hyoscyamine sulfate)</b>	Tier 2	QL
<i>magnesium oxide (antacid) oral tablet</i>	Tier 1	
<i>magnesium oxide oral tablet 400 mg</i>	Tier 1	
<b>MASK VORTEX/CHILD/FROG (spacer/aero-hold chamber mask)</b>	Tier 2	QL
<b>MASK VORTEX/TODDLER/LADYBUG (spacer/aero-hold chamber mask)</b>	Tier 2	QL
<i>medicated spot</i>	Tier 1	
<b>MICOTRIN AL (tolnaftate)</b>	Tier 2	

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Drug Name	Drug Tier	Notes
<i>mm aspirin</i>	Tier 1	QL
MODERNA COVID-19 VACC 6M-5Y	Tier 2	QL
<b>MYCOZYL AL (tolnaftate)</b>	Tier 2	
NEODOT THERMOMETER	Tier 2	QL
<b>NEUTROGENA OIL-FREE ACNE WASH (salicylic acid)</b>	Tier 2	
<b>NULEV (hyoscyamine sulfate)</b>	Tier 2	QL
<b>OMNIFLEX DIAPHRAGM (diaphragms)</b>	Tier 2	QL; GE
<b>ONELAX (bisacodyl)</b>	Tier 2	QL
<b>OVACE PLUS WASH EXTERNAL LIQUID (sulfacetamide sodium)</b>	Tier 2	
<b>OVACE WASH (sulfacetamide sodium)</b>	Tier 2	
<b>oyster shell calcium/vit d3 oral tablet 500-5 mg-mcg</b>	Tier 1	QL
<b>PANOXYL (benzoyl peroxide)</b>	Tier 2	
PFIZER COVID-19 VAC BIVAL 5-11	Tier 2	
PFIZER COVID-19 VAC BIVALENT	Tier 2	
PFIZER COVID-19 VAC-TRIS 6M-4Y	Tier 2	QL
PFIZER-BIONT COVID-19 VAC-TRIS	Tier 2	QL
<b>poly bacitracin</b>	Tier 1	
<b>POLYSPORIN (bacitracin-polymyxin b)</b>	Tier 2	
<b>PREZISTA (darunavir)</b>	Tier 2	QL
<b>sodium sulfacetamide wash</b>	Tier 1	
<b>ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE (aspirin)</b>	Tier 2	QL
<b>sulfacetamide sodium external</b>	Tier 1	
<b>sure result sr relief</b>	Tier 1	QL
<b>the magic bullet</b>	Tier 1	QL
<b>TINACTIN EXTERNAL CREAM (tolnaftate)</b>	Tier 2	QL
<b>tinaspore</b>	Tier 1	
<b>tolnaftate antifungal</b>	Tier 1	QL
<b>tolnaftate external cream</b>	Tier 1	QL
<b>tolnaftate external powder</b>	Tier 1	
VAPORIZER WARM STEAM	Tier 2	QL
<b>wart remover external liquid 17 %</b>	Tier 1	
<b>wart remover maximum strength external liquid</b>	Tier 1	
<b>WIDE-SEAL DIAPHRAGM 60 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 65 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 70 (diaphragm wide seal)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>WIDE-SEAL DIAPHRAGM 75 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 80 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 85 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 90 (diaphragm wide seal)</b>	Tier 2	QL
<b>WIDE-SEAL DIAPHRAGM 95 (diaphragm wide seal)</b>	Tier 2	QL
<b>womans laxative</b>	Tier 1	QL
<b>womens gentle laxative</b>	Tier 1	QL
<b>womens laxative</b>	Tier 1	QL
<b>ZOSTRIX HP (capsaicin)</b>	Tier 2	QL

### Molecular Target Inhibitors - Chemotherapy Agents

#### Antineoplastics - Drugs to Treat Cancer

<b>ALECENSA (alectinib hcl)</b>	Tier 2	PA; SP; QL
<b>ALUNBRIG (brigatinib)</b>	Tier 2	PA; SP; QL
<b>BOSULIF (bosutinib)</b>	Tier 2	PA; SP; QL
<b>BRUKINSA (zanubrutinib)</b>	Tier 2	PA; SP; QL
<b>CABOMETYX (cabozantinib s-malate)</b>	Tier 2	PA; SP; QL
<b>CALQUENCE ORAL CAPSULE (acalabrutinib)</b>	Tier 2	PA; SP; QL
<b>CAPRELSA (vandetanib)</b>	Tier 2	PA; SP; QL
<b>COMETRIQ (100 MG DAILY DOSE) (cabozantinib s-malate)</b>	Tier 2	PA; SP; QL
<b>COMETRIQ (140 MG DAILY DOSE) (cabozantinib s-malate)</b>	Tier 2	PA; SP; QL
<b>COMETRIQ (60 MG DAILY DOSE) (cabozantinib s-malate)</b>	Tier 2	PA; SP; QL
<b>erlotinib hcl</b>	Tier 1	PA; SP; QL
<b>GILOTrif (afatinib dimaleate)</b>	Tier 2	PA; SP; QL
<b>ICLUSIG ORAL TABLET 15 MG, 45 MG (ponatinib hcl)</b>	Tier 2	PA; SP; QL
<b>imatinib mesylate</b>	Tier 1	PA; SP; QL
<b>IMBRUVICA ORAL CAPSULE (ibrutinib)</b>	Tier 2	PA; SP; QL
<b>IMBRUVICA ORAL SUSPENSION (ibrutinib)</b>	Tier 2	SP; QL
<b>IMBRUVICA ORAL TABLET (ibrutinib)</b>	Tier 2	PA; SP; QL
<b>INLYTA (axitinib)</b>	Tier 2	PA; SP; QL
<b>IRESSA (gefitinib)</b>	Tier 2	PA; SP; QL
<b>lapatinib ditosylate</b>	Tier 1	PA; SP; QL
<b>LENVIMA (10 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (12 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (14 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (18 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (20 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (24 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>LENVIMA (4 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>LENVIMA (8 MG DAILY DOSE) (lenvatinib mesylate)</b>	Tier 2	PA; SP; QL
<b>SPRYCEL (dasatinib)</b>	Tier 2	PA; SP; QL
<b>TASIGNA (nilotinib hcl)</b>	Tier 2	PA; SP; QL
<b>TURALIO (pexidartinib hcl)</b>	Tier 2	PA; SP; QL
<b>VOTRIENT (pazopanib hcl)</b>	Tier 2	PA; SP; QL
<b>XALKORI (crizotinib)</b>	Tier 2	PA; SP; QL
<b>Ophthalmic Agents</b>		
<b>Ophthalmic Prostaglandin and Prostamide Analogs</b>		
<b>Iatanoprost ophthalmic</b>	Tier 1	QL
<b>Ophthalmic Agents, Other</b>		
<b>altafrin</b>	Tier 1	
<b>atropine sulfate ophthalmic ointment</b>	Tier 1	
<b>atropine sulfate ophthalmic solution 1 %</b>	Tier 1	QL
<b>cyclopentolate hcl ophthalmic solution 1 %</b>	Tier 1	QL
<b>CYSTARAN (cysteamine hcl)</b>	Tier 2	DX2RX; SP; QL
<b>dorzolamide hcl-timolol mal</b>	Tier 1	QL
<b>ISOPTO ATROPINE (atropine sulfate)</b>	Tier 2	QL
<b>neomycin-polymyxin-dexameth ophthalmic ointment</b>	Tier 1	QL
<b>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</b>	Tier 1	QL
<b>phenylephrine hcl ophthalmic</b>	Tier 1	
<b>PRED-G S.O.P. (gentamicin-prednisolone acet)</b>	Tier 2	
<b>sulfacetamide-prednisolone</b>	Tier 1	
<b>TOBRADEX OPHTHALMIC OINTMENT (tobramycin-dexamethasone)</b>	Tier 2	QL
<b>tobramycin-dexamethasone</b>	Tier 1	QL
<b>XIIDRA (lifitegrast)</b>	Tier 2	PA; QL
<b>Ophthalmic Anti-allergy Agents</b>		
<b>azelastine hcl ophthalmic</b>	Tier 1	ST
<b>cromolyn sodium ophthalmic</b>	Tier 1	QL
<b>olopatadine hcl ophthalmic</b>	Tier 1	QL
<b>PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 % (olopatadine hcl)</b>	Tier 2	QL
<b>Ophthalmic Anti-Infectives</b>		
<b>ak-poly-bac</b>	Tier 1	QL
<b>bacitracin ophthalmic</b>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>bacitracin-polymyxin b ophthalmic</i>	Tier 1	QL
<i>ciprofloxacin hcl ophthalmic</i>	Tier 1	QL
<i>erythromycin ophthalmic</i>	Tier 1	QL
<i>gentak</i>	Tier 1	QL
<i>gentamicin sulfate ophthalmic</i>	Tier 1	QL
<i>neomycin-bacitracin zn-polymyx</i>	Tier 1	
<i>neomycin-polymyxin-gramicidin</i>	Tier 1	QL
<i>neo-polycin</i>	Tier 1	
<i>ofloxacin ophthalmic</i>	Tier 1	QL
<i>polycin</i>	Tier 1	QL
<i>polymyxin b-trimethoprim</i>	Tier 1	QL
<i>sulfacetamide sodium ophthalmic</i>	Tier 1	QL
<i>tobramycin ophthalmic</i>	Tier 1	QL
<i>trifluridine</i>	Tier 1	QL
<b>Ophthalmic Anti-inflammatories</b>		
<i>dexamethasone sodium phosphate ophthalmic</i>	Tier 1	
<i>diclofenac sodium ophthalmic</i>	Tier 1	QL
<i>fluorometholone</i>	Tier 1	QL
<i>flurbiprofen sodium</i>	Tier 1	QL
<i>ketorolac tromethamine ophthalmic solution 0.4 %</i>	Tier 1	
<i>ketorolac tromethamine ophthalmic solution 0.5 %</i>	Tier 1	QL
<i>prednisolone acetate ophthalmic</i>	Tier 1	QL
<i>prednisolone acetate p-f</i>	Tier 1	QL
<i>prednisolone sodium phosphate ophthalmic</i>	Tier 1	
<b>Ophthalmic Beta-Adrenergic Blocking Agents</b>		
<i>betaxolol hcl ophthalmic</i>	Tier 1	QL
<i>carteolol hcl</i>	Tier 1	
<i>levobunolol hcl</i>	Tier 1	QL
<i>timolol maleate (once-daily)</i>	Tier 1	QL
<i>timolol maleate ophthalmic solution</i>	Tier 1	QL
<b>Ophthalmic Intraocular Pressure Lowering Agents, Other</b>		
<i>apraclonidine hcl</i>	Tier 1	QL
<i>brimonidine tartrate ophthalmic</i>	Tier 1	QL
DORZOLAMIDE HCL SOLUTION 2 % OPHTHALMIC	Tier 2	QL
<i>dorzolamide hcl solution 2 % ophthalmic</i>	Tier 1	QL
<i>methazolamide oral</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>PHOSPHOLINE IODIDE (echothiophate iodide)</b>	Tier 2	
<b>pilocarpine hcl ophthalmic</b>	Tier 1	
<b>Ophthalmic Agents - Drugs to Treat Eye Conditions</b>		
<b>Ophthalmic Agents, Other - Miscellaneous Eye Drugs</b>		
<b>altachlore ophthalmic ointment</b>	Tier 1	
<b>altachlore ophthalmic solution</b>	Tier 1	QL
<b>altalube</b>	Tier 1	QL
<b>artificial eye</b>	Tier 1	QL
<b>artificial tears ophthalmic ointment</b>	Tier 1	QL
<b>artificial tears ophthalmic solution , 1.4 %</b>	Tier 1	
<b>astringent eye drops</b>	Tier 1	QL
<b>BIOLLE TEARS (carboxymethylcellulose sodium)</b>	Tier 2	
<b>carboxymethylcellulose sodium ophthalmic solution</b>	Tier 1	QL
<b>dry eye relief ophthalmic gel 0.4-0.3 %</b>	Tier 1	QL
<b>dry-eye relief nighttime</b>	Tier 1	QL
<b>eye drops advanced relief</b>	Tier 1	QL
<b>eye drops long lasting</b>	Tier 1	QL
<b>eye drops ophthalmic solution 0.05 %</b>	Tier 1	
<b>eye drops ophthalmic solution 0.05-0.1-1-1 %, 0.05-0.25 %</b>	Tier 1	QL
<b>eye lubricant</b>	Tier 1	QL
<b>for sty relief</b>	Tier 1	QL
<b>GENTEAL SEVERE (hypromellose)</b>	Tier 2	QL
<b>GENTEAL TEARS MODERATE PF (dextran 70-hypromellose)</b>	Tier 2	
<b>GENTEAL TEARS NIGHT-TIME (white petrolatum-mineral oil)</b>	Tier 2	QL
<b>GENTEAL TEARS OPHTHALMIC SOLUTION 0.1-0.2-0.3 % (artificial tear solution)</b>	Tier 2	
<b>GENTEAL TEARS PF (dextran 70-hypromellose)</b>	Tier 2	
<b>GENTEAL TEARS SEVERE DAY/NIGHT (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>HYPOTEARS (white petrolatum-mineral oil)</b>	Tier 2	QL
<b>lubricant drops fast act</b>	Tier 1	QL
<b>lubricant drops long last</b>	Tier 1	QL
<b>lubricant drops ophthalmic gel 0.25-0.3 %</b>	Tier 1	QL
<b>lubricant drops ophthalmic solution</b>	Tier 1	QL
<b>lubricant eye drops (pf) ophthalmic solution 0.4-0.3 %</b>	Tier 1	QL
<b>lubricant eye drops (pf) ophthalmic solution 0.5 %</b>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>lubricant eye drops ophthalmic solution 0.4-0.3 %, 0.5 %, 0.6 %</i>	Tier 1	QL
<i>lubricant eye drops pf</i>	Tier 1	
<i>lubricant eye nighttime</i>	Tier 1	QL
<i>lubricant eye ophthalmic solution 0.4-0.3 %</i>	Tier 1	QL
<i>lubricant eye pm</i>	Tier 1	QL
<i>lubricant pm</i>	Tier 1	QL
<i>lubricating eye drop</i>	Tier 1	
<i>lubricating eye drops</i>	Tier 1	QL
<i>lubricating eye/overnight</i>	Tier 1	QL
<i>lubricating plus</i>	Tier 1	
<i>lubricating plus eye drops</i>	Tier 1	
<i>lubricating tears</i>	Tier 1	QL
<i>lubricating tears eye drops</i>	Tier 1	
<i>lubrifresh p.m.</i>	Tier 1	QL
<b>MURO 128 OPHTHALMIC OINTMENT (sodium chloride (hypertonic))</b>	Tier 2	
<b>MURO 128 OPHTHALMIC SOLUTION 5 % (sodium chloride (hypertonic))</b>	Tier 2	QL
<i>natural tears pf</i>	Tier 1	
<i>nighttime dry-eye relief</i>	Tier 1	QL
<i>polyvinyl alcohol ophthalmic</i>	Tier 1	
<i>pure &amp; gentle lubricant</i>	Tier 1	
<b>REFRESH LACRI-LUBE (white petrolatum-mineral oil)</b>	Tier 2	QL
<b>REFRESH PLUS (carboxymethylcellulose sodium)</b>	Tier 2	
<b>REFRESH TEARS (carboxymethylcellulose sodium)</b>	Tier 2	QL
<i>relief eye drops</i>	Tier 1	QL
<i>restore plus lubricant eye</i>	Tier 1	
<i>restore pm</i>	Tier 1	QL
<i>sod chloride hypertonicity</i>	Tier 1	
<i>sodium chloride (hypertonic) ophthalmic ointment</i>	Tier 1	
<i>sodium chloride (hypertonic) ophthalmic solution</i>	Tier 1	QL
<i>sodium chloride ophthalmic ointment 5 %</i>	Tier 1	
<i>sodium chloride ophthalmic solution 5 %</i>	Tier 1	QL
<b>SYSTANE (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>SYSTANE BALANCE (propylene glycol)</b>	Tier 2	QL
<b>SYSTANE COMPLETE (propylene glycol)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>SYSTANE CONTACTS (artificial tear solution)</b>	Tier 2	
<b>SYSTANE HYDRATION PF (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>SYSTANE NIGHTTIME (white petrolatum-mineral oil)</b>	Tier 2	QL
<b>SYSTANE PRESERVATIVE FREE (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>SYSTANE ULTRA (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>SYSTANE ULTRA PF (polyethyl glycol-propyl glycol)</b>	Tier 2	QL
<b>ultra fresh</b>	Tier 1	QL
<b>ultra fresh pm</b>	Tier 1	QL
<b>ultra lubricant drop</b>	Tier 1	QL
<b>ultra lubricating eye drops</b>	Tier 1	QL
<b>ultra lubricating eye drops pf</b>	Tier 1	QL
<b>Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs</b>		
<b>NAPHCON-A (naphazoline-pheniramine)</b>	Tier 2	
<b>redness relief ophthalmic solution 0.012-0.2 %</b>	Tier 1	QL
<b>VISINE (naphazoline-pheniramine)</b>	Tier 2	
<b>Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs</b>		
<b>ALAWAY (ketotifen fumarate)</b>	Tier 2	QL
<b>ALAWAY CHILDRENS ALLERGY (ketotifen fumarate)</b>	Tier 2	QL
<b>allergy eye drops</b>	Tier 1	QL
<b>CLARITIN EYE (ketotifen fumarate)</b>	Tier 2	QL
<b>eye itch relief ophthalmic solution 0.025 %</b>	Tier 1	QL
<b>ketotifen fumarate ophthalmic</b>	Tier 1	QL
<b>ZADITOR (ketotifen fumarate)</b>	Tier 2	QL
<b>Otic Agents</b>		
<b>acetic acid otic</b>	Tier 1	QL
<b>ciprofloxacin-dexamethasone</b>	Tier 1	DX2RX; QL
<b>hydrocortisone-acetic acid</b>	Tier 1	QL
<b>neomycin-polymyxin-hc otic</b>	Tier 1	QL
<b>ofloxacin otic</b>	Tier 1	QL
<b>Otic Agents - Drugs to Treat Ear Conditions</b>		
<b>Otic Agents - Drugs for the Ear</b>		
<b>CLEARCANAL EARWAX SOFTENER (carbamide peroxide)</b>	Tier 2	
<b>CLINERE EARWAX REMOVAL KIT OTIC SOLUTION (carbamide peroxide)</b>	Tier 2	
<b>ear drops</b>	Tier 1	
<b>ear wax kit</b>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>ear wax removal</i>	Tier 1	
<i>ear wax removal system</i>	Tier 1	
<i>earwax removal</i>	Tier 1	
<i>earwax removal drops</i>	Tier 1	
<i>earwax removal kit</i>	Tier 1	
<b>Respiratory Tract/Pulmonary Agents</b>		
<b>Antihistamines</b>		
<i>all day allergy oral tablet 10 mg</i>	Tier 1	QL
<i>allergy (cetirizine)</i>	Tier 1	QL
<i>allergy 24hour indoor/outdoor</i>	Tier 1	QL
<i>allergy childrens oral liquid</i>	Tier 1	QL
<i>allergy medication</i>	Tier 1	QL
<i>allergy oral capsule 25 mg</i>	Tier 1	QL
<i>allergy oral liquid 12.5 mg/5ml</i>	Tier 1	QL
<i>allergy oral tablet 25 mg</i>	Tier 1	QL
<i>allergy relief (cetirizine) oral tablet 10 mg</i>	Tier 1	QL
<i>allergy relief adult</i>	Tier 1	QL
<i>allergy relief cetirizine</i>	Tier 1	QL
<i>allergy relief childrens oral liquid 12.5 mg/5ml</i>	Tier 1	QL
<i>allergy relief childrens oral tablet chewable 12.5 mg</i>	Tier 1	QL
<i>allergy relief max st</i>	Tier 1	QL
<i>allergy relief oral capsule 25 mg</i>	Tier 1	QL
<i>allergy relief oral liquid 25 mg/10ml</i>	Tier 1	QL
<i>allergy relief oral tablet 25 mg</i>	Tier 1	QL
<i>allergy relief oral tablet chewable 12.5 mg</i>	Tier 1	QL
<i>allergy relief(cetirizine)</i>	Tier 1	QL
<i>allergy relief/indoor/outdoor oral tablet 10 mg</i>	Tier 1	QL
<i>aller-tec</i>	Tier 1	QL
<i>anti-hist allergy</i>	Tier 1	QL
<i>azelastine hcl nasal solution 0.1 %, 137 mcg/spray</i>	Tier 1	QL
<i>banophen oral capsule 25 mg</i>	Tier 1	QL
<i>banophen oral tablet</i>	Tier 1	QL
<b>BENADRYL ALLERGY CHILDRENS ORAL LIQUID (diphenhydramine hcl)</b>	Tier 2	QL
<b>BENADRYL ALLERGY CHILDRENS ORAL TABLET CHEWABLE (diphenhydramine hcl)</b>	Tier 2	QL
<b>BENADRYL ALLERGY ORAL TABLET (diphenhydramine hcl)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>BENADRYL ALLERGY ULTRATABS (diphenhydramine hcl)</b>	Tier 2	QL
<b>cetirizine allergy relief</b>	Tier 1	QL
<b>cetirizine hcl oral solution 1 mg/ml</b>	Tier 1	QL
<b>cetirizine hcl oral tablet</b>	Tier 1	QL
<b>childrens allergy oral liquid 12.5 mg/5ml</b>	Tier 1	QL
<b>clemastine fumarate oral tablet 2.68 mg</b>	Tier 1	QL
<b>complete allergy</b>	Tier 1	QL
<b>complete allergy medicine oral capsule 25 mg</b>	Tier 1	QL
<b>complete allergy relief</b>	Tier 1	QL
<b>cyproheptadine hcl oral</b>	Tier 1	QL
<b>DAYHIST ALLERGY 12 HOUR RELIEF (clemastine fumarate)</b>	Tier 2	QL
<b>diphedryl allergy</b>	Tier 1	QL
<b>diphen</b>	Tier 1	QL
<b>diphenhist</b>	Tier 1	QL
<b>diphenhydramine hcl oral</b>	Tier 1	QL
<b>geri-dryl</b>	Tier 1	QL
<b>h-e-b childrens allergy</b>	Tier 1	QL
<b>indoor/outdoor allergy rlf</b>	Tier 1	QL
<b>levocetirizine dihydrochloride oral tablet</b>	Tier 1	QL
<b>liquid allergy relief</b>	Tier 1	QL
<b>m-dryl</b>	Tier 1	QL
<b>MM ALLER-BEN (diphenhydramine hcl)</b>	Tier 2	QL
<b>NARAMIN (diphenhydramine hcl)</b>	Tier 2	QL
<b>pharbedryl</b>	Tier 1	QL
<b>siladryl allergy</b>	Tier 1	QL
<b>SOMINEX NIGHTTIME SLEEP-AID (diphenhydramine hcl)</b>	Tier 2	QL
<b>total allergy</b>	Tier 1	QL
<b>total allergy medicine</b>	Tier 1	QL
<b>ZYRTEC ALLERGY ORAL TABLET (cetirizine hcl)</b>	Tier 2	QL
<b>Anti-inflammatories, Inhaled Corticosteroids</b>		
<b>ASMANEX (120 METERED DOSES) (mometasone furoate)</b>	Tier 2	PA; QL
<b>ASMANEX (14 METERED DOSES) (mometasone furoate)</b>	Tier 2	PA; QL
<b>ASMANEX (30 METERED DOSES) (mometasone furoate)</b>	Tier 2	PA; QL
<b>ASMANEX (60 METERED DOSES) (mometasone furoate)</b>	Tier 2	PA; QL
<b>ASMANEX HFA INHALATION AEROSOL 100 MCG/ACT, 50 MCG/ACT (mometasone furoate)</b>	Tier 2	PA; Members >= 8 years of age will require PA; QL

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Drug Name	Drug Tier	Notes
<b>ASMANEX HFA INHALATION AEROSOL 200 MCG/ACT (mometasone furoate)</b>	Tier 2	PA; Members >= 8 years of age will require PA; QL; AL
<b>budesonide inhalation</b>	Tier 1	Members >= 5 years of age will require PA; QL; AL
<b>FLUTICASONE PROPIONATE HFA</b>	Tier 2	QL
<b>fluticasone propionate nasal</b>	Tier 1	QL
<b>Antileukotrienes</b>		
<b>montelukast sodium oral</b>	Tier 1	QL
<b>Bronchodilators, Anticholinergic</b>		
<b>ATROVENT HFA (ipratropium bromide hfa)</b>	Tier 2	QL
<b>INCRUSE ELLIPTA (umeclidinium bromide)</b>	Tier 2	QL
<b>ipratropium bromide inhalation</b>	Tier 1	QL
<b>ipratropium bromide nasal</b>	Tier 1	QL
<b>Bronchodilators, Sympathomimetic</b>		
<b>albuterol sulfate hfa aerosol solution 108 (90 base) mcg/act inhalation</b>	Tier 1	QL
<b>ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION</b>	Tier 2	QL
<b>albuterol sulfate inhalation nebulization solution (2.5 mg/3ml) 0.083%, 2.5 mg/0.5ml</b>	Tier 1	QL
<b>albuterol sulfate inhalation nebulization solution 0.63 mg/3ml, 1.25 mg/3ml</b>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<b>ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION</b>	Tier 2	QL
<b>albuterol sulfate nebulization solution (5 mg/ml) 0.5% inhalation</b>	Tier 1	QL
<b>albuterol sulfate oral syrup</b>	Tier 1	QL
<b>epinephrine injection solution auto-injector</b>	Tier 1	QL
<b>levalbuterol hcl inhalation</b>	Tier 1	ST; QL
<b>STRIVERDI RESPIMAT (olodaterol hcl)</b>	Tier 2	QL
<b>SYMJEPI (epinephrine)</b>	Tier 2	QL
<b>Cystic Fibrosis Agents</b>		
<b>CAYSTON (aztreonam lysine)</b>	Tier 2	DX2RX; SP; QL
<b>KALYDECO (ivacaftor)</b>	Tier 2	PA; SP; QL
<b>ORKAMBI ORAL PACKET 100-125 MG, 150-188 MG (lumacaftor-ivacaftor)</b>	Tier 2	PA; SP; QL
<b>ORKAMBI ORAL PACKET 75-94 MG (lumacaftor-ivacaftor)</b>	Tier 2	SP; QL
<b>ORKAMBI ORAL TABLET (lumacaftor-ivacaftor)</b>	Tier 2	PA; SP; QL
<b>PULMOZYME (dornase alfa)</b>	Tier 2	DX2RX; SP; QL

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Drug Name	Drug Tier	Notes
<b>SYMDEKO (tezacaftor-ivacaftor)</b>	Tier 2	PA; SP; QL
<b>tobramycin inhalation nebulization solution 300 mg/4ml</b>	Tier 1	DX2RX; SP; QL
<b>TRIKAFTA (elexacaftor-tezacaftor-ivacafit)</b>	Tier 2	PA; SP; QL
<b>Mast Cell Stabilizers</b>		
<b>cromolyn sodium inhalation</b>	Tier 1	QL
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
<b>elizophyllin</b>	Tier 1	QL
<b>THEO-24 (theophylline)</b>	Tier 2	
<b>theophylline</b>	Tier 1	QL
<b>theophylline er oral tablet extended release 12 hour 300 mg</b>	Tier 1	QL
<b>theophylline er oral tablet extended release 12 hour 450 mg</b>	Tier 1	
<b>theophylline er oral tablet extended release 24 hour 400 mg</b>	Tier 1	QL
<b>theophylline er oral tablet extended release 24 hour 600 mg</b>	Tier 1	
<b>Pulmonary Antihypertensives</b>		
<b>ADEMPAS (riociguat)</b>	Tier 2	DX2RX; SP; QL
<b>ambrisentan</b>	Tier 1	DX2RX; SP; QL
<b>bosentan</b>	Tier 1	DX2RX; SP; QL
<b>OPSUMIT (macitentan)</b>	Tier 2	DX2RX; SP; QL
<b>sildenafil citrate oral suspension reconstituted</b>	Tier 1	DX2RX; SP
<b>sildenafil citrate oral tablet 20 mg</b>	Tier 1	DX2RX; SP; QL
<b>TRACLEER 32 MG (bosentan)</b>	Tier 2	DX2RX; SP; QL; AL
<b>Pulmonary Fibrosis Agents</b>		
<b>ESBRIET ORAL CAPSULE (pirfenidone)</b>	Tier 2	PA; SP; QL
<b>OFEV (nintedanib esylate)</b>	Tier 2	PA; SP; QL
<b>pirfenidone oral tablet 267 mg, 801 mg</b>	Tier 1	PA; SP; QL
<b>Respiratory Tract Agents, Other</b>		
<b>acetylcysteine inhalation solution 10 %</b>	Tier 1	QL
<b>acetylcysteine inhalation solution 20 %</b>	Tier 1	
<b>FASENRA PEN (benralizumab)</b>	Tier 2	PA; SP; QL
<b>NUCALA SUBCUTANEOUS SOLUTION AUTO-INJECTOR (mepolizumab)</b>	Tier 2	PA; SP; QL
<b>NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 100 MG/ML (mepolizumab)</b>	Tier 2	PA; SP; QL
<b>promethazine vc</b>	Tier 1	QL; AL
<b>promethazine-phenylephrine</b>	Tier 1	QL; AL
<b>Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions</b>		

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Drug Name	Drug Tier	Notes
<b>4-WAY FAST ACTING (phenylephrine hcl)</b>	Tier 2	
<b>4-WAY MENTHOL (phenylephrine hcl)</b>	Tier 2	
<b>AFRIN SALINE NASAL MIST (saline)</b>	Tier 2	
<b>altamist spray</b>	Tier 1	
<b>altarussin</b>	Tier 1	QL; AL
<b>AYR (saline)</b>	Tier 2	
<b>AYR SALINE NASAL DROPS (saline)</b>	Tier 2	
<b>BABY AYR SALINE (saline)</b>	Tier 2	
<b>BUCKLEY'S CHEST CONGESTION (guaifenesin)</b>	Tier 2	QL; AL
<b>chest congestion childrens</b>	Tier 1	QL; AL
<b>chest congestion relief oral liquid</b>	Tier 1	QL; AL
<b>chest congestion relief oral tablet</b>	Tier 1	
<b>CORICIDIN HBP COUGH/COLD (chlorpheniramine-dm)</b>	Tier 2	AL
<b>cough &amp; cold</b>	Tier 1	AL
<b>cough &amp; cold hbp</b>	Tier 1	AL
<b>cough relief oral syrup 15 mg/5ml</b>	Tier 1	AL
<b>cough/cold hbp</b>	Tier 1	AL
<b>deep sea nasal spray</b>	Tier 1	
<b>ed bron gp</b>	Tier 1	AL
<b>ephrine nose drops</b>	Tier 1	
<b>geri-tussin</b>	Tier 1	QL; AL
<b>guaifenesin oral liquid</b>	Tier 1	QL; AL
<b>guaifenesin oral tablet 400 mg</b>	Tier 1	
<b>maxi-tuss pe max</b>	Tier 1	AL
<b>medifin 400</b>	Tier 1	
<b>medifin mucus relief child</b>	Tier 1	QL; AL
<b>MUCINEX FAST-MAX CHEST CONG MS (guaifenesin)</b>	Tier 2	QL; AL
<b>MUCINEX MAXIMUM STRENGTH (guaifenesin)</b>	Tier 2	QL; AL
<b>mucus &amp; chest congestion</b>	Tier 1	QL; AL
<b>mucus er maximum str</b>	Tier 1	QL; AL
<b>mucus er oral tablet extended release 12 hour 1200 mg</b>	Tier 1	QL; AL
<b>mucus extended release oral tablet extended release 12 hour 1200 mg</b>	Tier 1	QL; AL
<b>mucus relief 12 hour max st</b>	Tier 1	QL; AL
<b>mucus relief chest oral tablet 400 mg</b>	Tier 1	
<b>mucus relief childrens oral liquid 100 mg/5ml</b>	Tier 1	QL; AL

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Drug Name	Drug Tier	Notes
<i>mucus relief er oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>mucus relief max st</i>	Tier 1	QL; AL
<i>mucus relief max strength oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>mucus relief oral tablet 400 mg</i>	Tier 1	
<i>mucus relief oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>mucus+chest congestion</i>	Tier 1	QL; AL
<i>mucus-er oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>nasal decongestant pe max st</i>	Tier 1	
<i>nasal decongestant pe oral tablet 10 mg</i>	Tier 1	
<i>nasal four</i>	Tier 1	
<i>nasal four spray</i>	Tier 1	
<i>NASAL MOIST NASAL SOLUTION (saline)</i>	Tier 2	
<i>nasal moisturizing spray</i>	Tier 1	
<i>nasal spray fast acting</i>	Tier 1	
<i>nasal spray saline</i>	Tier 1	
<i>NEO-SYNEPHRINE COLD/ALLRGY EXT (phenylephrine hcl)</i>	Tier 2	
<i>non-pseudo sinus decongestant</i>	Tier 1	
<i>nose drops extstrength</i>	Tier 1	
<i>nose drops nasal decongest</i>	Tier 1	
<i>nose drops nasal solution 1 %</i>	Tier 1	
<i>OCEAN FOR KIDS (saline)</i>	Tier 2	
<i>OCEAN NASAL SPRAY (saline)</i>	Tier 2	
<i>pharbinex</i>	Tier 1	
<i>phenylephrine hcl oral</i>	Tier 1	
<i>pseudoephedrine-bromphen-dm</i>	Tier 1	QL; AL
<i>refenesen 400</i>	Tier 1	
<i>robafen mucus/chest congestion</i>	Tier 1	QL; AL
<i>saline mist spray</i>	Tier 1	
<i>saline nasal spray</i>	Tier 1	
<i>sb mucus relief</i>	Tier 1	
<i>siltussin sa</i>	Tier 1	QL; AL
<i>sinus pe decongestant</i>	Tier 1	
<i>sinus relief ext st</i>	Tier 1	
<i>sinus relief extra strength</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>sinus/congestion relief pe</i>	Tier 1	
<b>SUDAFED PE CONGESTION ORAL TABLET 10 MG (phenylephrine hcl)</b>	Tier 2	
<b>SUDAFED PE SINUS CONGESTION (phenylephrine hcl)</b>	Tier 2	
<i>tab tussin</i>	Tier 1	
<i>tusnel-ex</i>	Tier 1	QL; AL
<i>tussin adult chest congest</i>	Tier 1	QL; AL
<i>tussin chest congestion oral liquid 100 mg/5ml</i>	Tier 1	QL; AL
<i>tussin cough long acting</i>	Tier 1	AL
<i>tussin cough long-acting</i>	Tier 1	AL
<i>tussin cough oral syrup</i>	Tier 1	AL
<i>tussin expectorant adult</i>	Tier 1	QL; AL
<i>tussin maximum strength oral syrup 15 mg/5ml</i>	Tier 1	AL
<i>tussin mucus &amp; chest cong</i>	Tier 1	QL; AL
<i>tussin mucus &amp; chest congest</i>	Tier 1	QL; AL
<i>tussin mucus/chest congest</i>	Tier 1	QL; AL
<i>tussin mucus/congestion</i>	Tier 1	QL; AL
<i>tussin mucus+chest congest</i>	Tier 1	QL; AL
<i>tussin mucus+chest congest sf</i>	Tier 1	QL; AL
<i>tussin mucus+chest congestion</i>	Tier 1	QL; AL
<i>tussin oral liquid 100 mg/5ml</i>	Tier 1	QL; AL
<b>XPECT (guaifenesin)</b>	Tier 2	
<b>Antihistamines - Allergy Drugs</b>		
<i>12 hour allergy-d</i>	Tier 1	QL; AL
<i>all day allergy d</i>	Tier 1	QL; AL
<i>all day allergy-d oral tablet extended release 12 hour 5-120 mg</i>	Tier 1	QL; AL
<i>allergy relief d oral tablet extended release 12 hour</i>	Tier 1	QL; AL
<i>allergy relief oral tablet extended release 12 hour 5-120 mg</i>	Tier 1	QL; AL
<i>allergy relief/nasal decongest oral tablet extended release 12 hour</i>	Tier 1	QL; AL
<i>allergy relief-d oral tablet extended release 12 hour 5-120 mg</i>	Tier 1	QL; AL
<i>aller-tec d</i>	Tier 1	QL; AL
<i>cetiri-d</i>	Tier 1	QL; AL
<i>cetirizine-pseudoephedrine er</i>	Tier 1	QL; AL
<i>desgen dm oral liquid</i>	Tier 1	AL
<b>ED A-HIST ORAL LIQUID (chlorpheniramine-phenylephrine)</b>	Tier 2	QL; AL

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Drug Name	Drug Tier	Notes
<i>nohist-lq</i>	Tier 1	QL; AL
<i>robafen cf multi-symptom cold</i>	Tier 1	AL
<i>ROBITUSSIN PEAK COLD MULTI-SYM (phenylephrine-dm-gg)</i>	Tier 2	AL
<i>tussin cf oral liquid 5-10-100 mg/5ml</i>	Tier 1	AL
<i>tussin multi-symptom cold cf</i>	Tier 1	AL
<i>ZYRTEC-D ALLERGY &amp; CONGESTION (cetirizine-pseudoephedrine)</i>	Tier 2	QL; AL
<b>Antihistamines - Drugs to Treat Allergies</b>		
<i>12hr allergy relief</i>	Tier 1	QL
<i>24hr allergy relief</i>	Tier 1	QL
<i>all day allergy relief oral tablet 10 mg</i>	Tier 1	QL
<i>ALLEGRA ALLERGY (fexofenadine hcl)</i>	Tier 2	QL
<i>allerclear</i>	Tier 1	QL
<i>aller-ease</i>	Tier 1	QL
<i>aller-fex</i>	Tier 1	QL
<i>allergy 24-hr</i>	Tier 1	QL
<i>allergy childrens oral syrup</i>	Tier 1	QL
<i>allergy rel child (loratadine)</i>	Tier 1	QL
<i>allergy relief (loratadine)</i>	Tier 1	QL
<i>allergy relief childrens oral syrup 5 mg/5ml</i>	Tier 1	QL
<i>allergy relief oral tablet 10 mg, 180 mg, 60 mg</i>	Tier 1	QL
<i>allergy relief oral tablet dispersible 10 mg</i>	Tier 1	QL
<i>allergy relief oral tablet extended release 12 mg</i>	Tier 1	QL
<i>allergy relief/indoor/outdoor oral tablet 180 mg</i>	Tier 1	QL
<i>childrens loratadine</i>	Tier 1	QL
<i>chlorpheniramine maleate er</i>	Tier 1	QL
<i>CHLOR-TRIMETON ALLERGY (chlorpheniramine maleate)</i>	Tier 2	QL
<i>CHLOR-TRIMETON ORAL SYRUP (chlorpheniramine maleate)</i>	Tier 2	QL
<i>CLARITIN ALLERGY CHILDRENS (loratadine)</i>	Tier 2	QL
<i>CLARITIN ORAL TABLET (loratadine)</i>	Tier 2	QL
<i>CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG (loratadine)</i>	Tier 2	QL
<i>ed chlorped jr</i>	Tier 1	QL
<i>fexofenadine hcl oral</i>	Tier 1	QL
<i>loradamed</i>	Tier 1	QL
<i>loratadine allergy relief oral tablet 10 mg</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>loratadine allergy relief oral tablet dispersible 10 mg</i>	Tier 1	QL
<i>loratadine childrens oral solution 5 mg/5ml</i>	Tier 1	QL
<i>loratadine childrens oral syrup</i>	Tier 1	QL
<i>loratadine oral syrup</i>	Tier 1	QL
<i>loratadine oral tablet</i>	Tier 1	QL
<i>loratadine oral tablet dispersible</i>	Tier 1	QL
<b>TRIAMINIC ALLERCHEWS (loratadine)</b>	Tier 2	QL
<b>Anti-Inflammatories, Inhaled Corticosteroids - Asthma/Lung Drugs</b>		
<i>24 hour nasal allergy</i>	Tier 1	QL
<i>aller-cort</i>	Tier 1	QL
<i>allergy spray 24 hour nasal aerosol</i>	Tier 1	QL
<b>NASACORT ALLERGY 24HR (triamcinolone acetonide)</b>	Tier 2	QL
<i>nasal allergy 24 hour</i>	Tier 1	QL
<i>nasal allergy nasal aerosol 55 mcg/act</i>	Tier 1	QL
<i>nasal allergy spray</i>	Tier 1	QL
<b>Bronchodilators, Sympathomimetic - Asthma/Lung Drugs</b>		
<b>ANORO ELLIPTA (umeclidinium-vilanterol)</b>	Tier 2	QL
<b>BUDESONIDE-FORMOTEROL FUMARATE</b>	Tier 2	PA; ST; QL
<b>COMBIVENT RESPIMAT (ipratropium-albuterol)</b>	Tier 2	QL
<b>FLUTICASONE FUROATE-VILANTEROL</b>	Tier 2	PA; QL
<b>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</b>	Tier 1	PA; QL
FLUTICASONE-SALMETEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 113-14 MCG/ACT, 232-14 MCG/ACT, 55-14 MCG/ACT	Tier 2	QL
<i>ipratropium-albuterol</i>	Tier 1	QL
<b>STIOLTO RESPIMAT (tiotropium bromide-olodaterol)</b>	Tier 2	QL
<i>wixela inh</i>	Tier 1	PA; QL
<b>Mast Cell Stabilizers - Drugs for the Lungs</b>		
<i>cromolyn sodium nasal</i>	Tier 1	QL
<b>NASALCROM (cromolyn sodium)</b>	Tier 2	QL
<b>Respiratory Tract Agents, Other - Asthma/Lung Drugs</b>		
<i>12 hour decongestant</i>	Tier 1	
<i>12 hour nasal decongestant</i>	Tier 1	
<i>12 hour nasal relief spray</i>	Tier 1	
<i>12 hour nasal spray</i>	Tier 1	
<b>ADVIL COLD/SINUS (pseudoephedrine-ibuprofen)</b>	Tier 2	AL

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Drug Name	Drug Tier	Notes
<b>AFRIN NODRIP ORIGINAL (oxymetazoline hcl)</b>	Tier 2	
<b>ALAVERT ALLERGY/SINUS (loratadine-pseudoephedrine)</b>	Tier 2	QL; AL
<b>allerclear d-12hr</b>	Tier 1	QL; AL
<b>allerclear d-24hr</b>	Tier 1	QL; AL
<b>allergy &amp; congestion</b>	Tier 1	QL; AL
<b>allergy &amp; congestion relief</b>	Tier 1	QL; AL
<b>allergy relief d-12</b>	Tier 1	QL; AL
<b>allergy relief d-24</b>	Tier 1	QL; AL
<b>allergy relief/nasal decong</b>	Tier 1	QL; AL
<b>allergy relief/nasal decong</b>	Tier 1	QL; AL
<b>allergy relief/nasal decongest oral tablet extended release 24 hour</b>	Tier 1	QL; AL
<b>allergy relief-d oral tablet extended release 12 hour 5-120 mg</b>	Tier 1	QL; AL
<b>allergy relief-d oral tablet extended release 24 hour 10-240 mg</b>	Tier 1	QL; AL
<b>allergy relief-d12</b>	Tier 1	QL; AL
<b>allergy/congestion relief</b>	Tier 1	QL; AL
<b>altarussin dm</b>	Tier 1	QL; AL
<b>anefrin spray</b>	Tier 1	
<b>aprodine</b>	Tier 1	AL
<b>benzonataate oral capsule 100 mg, 200 mg</b>	Tier 1	QL; AL
<b>chest congest/cough child</b>	Tier 1	
<b>chest congestion relief dm oral syrup</b>	Tier 1	QL; AL
<b>childrens cold &amp; allergy</b>	Tier 1	AL
<b>childrens cough</b>	Tier 1	
<b>childrens mucus relief cough</b>	Tier 1	
<b>CLARITIN-D 12 HOUR (loratadine-pseudoephedrine)</b>	Tier 2	QL; AL
<b>cold &amp; allergy</b>	Tier 1	AL
<b>cold &amp; allergy childrens oral elixir 1-15 mg/5ml</b>	Tier 1	AL
<b>cold &amp; cough childrens oral liquid 2.5-1-5 mg/5ml</b>	Tier 1	QL; AL
<b>cold &amp; sinus</b>	Tier 1	AL
<b>cold &amp; sinus relief oral tablet 30-200 mg</b>	Tier 1	AL
<b>cold/cough</b>	Tier 1	QL; AL
<b>cold/cough childrens</b>	Tier 1	QL; AL
<b>cold/cough dm childrens oral liquid 2.5-1-5 mg/5ml</b>	Tier 1	QL; AL
<b>cold/cough dm oral liquid 2.5-1-5 mg/5ml</b>	Tier 1	QL; AL
<b>cough &amp; chest congestion</b>	Tier 1	

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Drug Name	Drug Tier	Notes
cough childrens	Tier 1	
cough dm childrens	Tier 1	QL; AL
cough dm er	Tier 1	QL; AL
cough dm oral suspension extended release 30 mg/5ml	Tier 1	QL; AL
<b>DELSYM CGH/CHEST CONG DM CHILD (dextromethorphan-guaifenesin)</b>	Tier 2	
<b>DELSYM COUGH CHILDRENS (dextromethorphan polistirex)</b>	Tier 2	QL; AL
<b>DELSYM COUGH/CHEST CONGEST DM (dextromethorphan-guaifenesin)</b>	Tier 2	
<b>DELSYM ORAL SUSPENSION EXTENDED RELEASE (dextromethorphan polistirex)</b>	Tier 2	QL; AL
dextromethorphan polistirex er	Tier 1	QL; AL
dextromethorphan-guaifenesin oral syrup	Tier 1	QL; AL
dibromm childrens cold/cgh	Tier 1	QL; AL
dimaphen dm cold/cough	Tier 1	QL; AL
dm maximum adult	Tier 1	
<b>ENDACOF-DM (phenylephrine-bromphen-dm)</b>	Tier 2	QL; AL
g tussin ac	Tier 1	QL; AL
geri-tussin dm	Tier 1	QL; AL
giltuss severe sinus	Tier 1	
guaiatussin ac	Tier 1	QL; AL
guaicon dms	Tier 1	QL; AL
guaifenesin ac	Tier 1	QL; AL
guaifenesin/pseudoephedrine	Tier 1	AL
guaifenesin-codeine	Tier 1	QL; AL
guaifenesin-dm oral syrup	Tier 1	QL; AL
<b>HYPERSAL INHALATION NEBULIZATION SOLUTION 7 % (sodium chloride)</b>	Tier 2	
ibuprofen cold & sinus	Tier 1	AL
ibuprofen cold/sinus oral tablet 30-200 mg	Tier 1	AL
ibu-profen cold/sinus oral tablet 30-200 mg	Tier 1	AL
long acting nasal spray	Tier 1	
long lasting nasal spray	Tier 1	
lorata-d	Tier 1	QL; AL
lorata-dine d	Tier 1	QL; AL
loratadine d 12hr	Tier 1	QL; AL
loratadine-d	Tier 1	QL; AL
loratadine-d 12hr	Tier 1	QL; AL

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Drug Name	Drug Tier	Notes
<i>loratadine-d 24hr</i>	Tier 1	QL; AL
<i>maxi-tuss ac</i>	Tier 1	QL; AL
<i>maxi-tuss gmx</i>	Tier 1	AL
<i>m-clear wc</i>	Tier 1	QL; AL
<i>meijer allergy relief-d</i>	Tier 1	QL; AL
<b>MUCINEX CHILDRENS FREEFROM ORAL LIQUID 5-100 MG/5ML (dextromethorphan-guaifenesin)</b>	Tier 2	
<b>MUCINEX CHILDRENS STUFFY NOSE (oxymetazoline hcl)</b>	Tier 2	
<b>MUCINEX COUGH CHILDRENS (dextromethorphan-guaifenesin)</b>	Tier 2	
<b>MUCINEX D (pseudoephedrine-guaifenesin)</b>	Tier 2	AL
<b>MUCINEX D MAX STRENGTH (pseudoephedrine-guaifenesin)</b>	Tier 2	AL
<b>MUCINEX DM (dextromethorphan-guaifenesin)</b>	Tier 2	QL; AL
<b>MUCINEX FAST-MAX DM MAX (dextromethorphan-guaifenesin)</b>	Tier 2	
<b>MUCINEX SINUS-MAX CLEAR &amp; COOL (oxymetazoline hcl)</b>	Tier 2	
<b>MUCINEX SINUS-MAX SINUS/ALLRGY (oxymetazoline hcl)</b>	Tier 2	
<b>mucus &amp; cough relief child</b>	Tier 1	
<b>mucus d</b>	Tier 1	AL
<b>mucus d extended release</b>	Tier 1	AL
<b>mucus d max st er</b>	Tier 1	AL
<b>mucus dm</b>	Tier 1	QL; AL
<b>mucus dm extended release oral tablet extended release 12 hour 30-600 mg</b>	Tier 1	QL; AL
<b>mucus relief cough children oral liquid 5-100 mg/5ml</b>	Tier 1	
<b>mucus relief cough childrens</b>	Tier 1	
<b>mucus relief d max strength</b>	Tier 1	AL
<b>mucus relief d oral tablet extended release 12 hour 120-1200 mg, 60-600 mg</b>	Tier 1	AL
<b>mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml</b>	Tier 1	
<b>mucus relief dm oral liquid 20-400 mg/20ml</b>	Tier 1	
<b>mucus relief dm oral tablet extended release 12 hour 30-600 mg</b>	Tier 1	QL; AL
<b>mucus-d</b>	Tier 1	AL
<b>mucus-dm</b>	Tier 1	QL; AL
<b>nasal decongestant 12 hour</b>	Tier 1	
<b>nasal decongestant 12hr</b>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>nasal decongestant max st</i>	Tier 1	QL
<i>nasal decongestant oral tablet 30 mg</i>	Tier 1	QL
<i>nasal decongestant oral tablet extended release 12 hour 120 mg</i>	Tier 1	
<i>nasal decongestant pe oral tablet 30 mg</i>	Tier 1	QL
<i>nasal decongestant spray</i>	Tier 1	
<i>nasal mist nasal solution</i>	Tier 1	
<i>nasal relief</i>	Tier 1	
<i>nasal spray</i>	Tier 1	
<i>nasal spray 12 hour</i>	Tier 1	
<i>nasal spray extra moist</i>	Tier 1	
<i>nasal spray extra moisturizing</i>	Tier 1	
<i>nasal spray moisturizing</i>	Tier 1	
<i>nasal spray no drip</i>	Tier 1	
<i>nasal spray sinus</i>	Tier 1	
<i>nebusal inhalation nebulization solution 3 %</i>	Tier 1	
<i>no drip nasal relief</i>	Tier 1	
<i>no drip nasal spray</i>	Tier 1	
<i>promethazine vc/codeine</i>	Tier 1	QL; AL
<i>promethazine-codeine</i>	Tier 1	QL; AL
<i>promethazine-dm</i>	Tier 1	QL; AL
<i>promethazine-phenyleph-codeine</i>	Tier 1	QL; AL
<i>pseudoephedrine hcl 12 hr</i>	Tier 1	
<i>pseudoephedrine hcl er</i>	Tier 1	
<i>pseudoephedrine hcl oral tablet 30 mg</i>	Tier 1	QL
<i>pseudoephedrine-guaifenesin er</i>	Tier 1	AL
<i>pulmosal</i>	Tier 1	
<i>ROBITUSSIN 12 HOUR COUGH (dextromethorphan polistirex)</i>	Tier 2	QL; AL
<i>ROBITUSSIN 12 HOUR COUGH CHILD (dextromethorphan polistirex)</i>	Tier 2	QL; AL
<i>ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML (dextromethorphan-guaifenesin)</i>	Tier 2	
<i>rynex dm</i>	Tier 1	QL; AL
<i>rynex pe</i>	Tier 1	AL
<i>rynex pse</i>	Tier 1	AL
<i>siltussin-dm alcohol free</i>	Tier 1	QL; AL

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Drug Name	Drug Tier	Notes
<b>sinus 12 hour</b>	Tier 1	
<b>sinus 12-hour</b>	Tier 1	
<b>sinus congestion max strength</b>	Tier 1	QL
<b>sinus nasal spray</b>	Tier 1	
<b>sodium chloride inhalation nebulization solution 0.9 %</b>	Tier 1	QL
<b>sodium chloride inhalation nebulization solution 10 %, 3 %, 7 %</b>	Tier 1	
<b>SUDAFED (pseudoephedrine hcl)</b>	Tier 2	QL
<b>SUDAFED CHILDRENS (pseudoephedrine hcl)</b>	Tier 2	QL
<b>SUDAFED SINUS CONGESTION (pseudoephedrine hcl)</b>	Tier 2	QL
<b>SUDAFED SINUS CONGESTION 12HR (pseudoephedrine hcl)</b>	Tier 2	
<b>sudogest 12 hour</b>	Tier 1	
<b>sudogest maximum strength</b>	Tier 1	QL
<b>sudogest oral tablet 30 mg</b>	Tier 1	QL
<b>suphedrine 12hour</b>	Tier 1	
<b>suphedrine maximum strength</b>	Tier 1	
<b>suphedrine oral tablet 30 mg</b>	Tier 1	QL
<b>suphedrine oral tablet extended release 12 hour 120 mg</b>	Tier 1	
<b>tussin cf oral liquid 30-10-100 mg/5ml</b>	Tier 1	
<b>tussin cough dm sugar free</b>	Tier 1	QL; AL
<b>tussin cough/chest congest oral syrup 100-10 mg/5ml</b>	Tier 1	QL; AL
<b>tussin cough/chest dm max oral liquid 10-200 mg/5ml</b>	Tier 1	AL
<b>tussin dm cough/chest cong</b>	Tier 1	QL; AL
<b>tussin dm cough/chest oral syrup 10-100 mg/5ml</b>	Tier 1	QL; AL
<b>tussin dm max</b>	Tier 1	
<b>tussin dm max adult</b>	Tier 1	
<b>tussin dm max daytime</b>	Tier 1	
<b>tussin dm max st</b>	Tier 1	
<b>tussin dm oral syrup 100-10 mg/5ml</b>	Tier 1	QL; AL
<b>Skeletal Muscle Relaxants</b>		
<b>chlorzoxazone oral tablet 500 mg</b>	Tier 1	QL
<b>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</b>	Tier 1	QL
<b>methocarbamol oral tablet 500 mg, 750 mg</b>	Tier 1	QL
<b>orphenadrine citrate er</b>	Tier 1	QL
<b>Sleep Disorder Agents</b>		
<b>Sleep Promoting Agents</b>		

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Drug Name	Drug Tier	Notes
<i>temazepam oral capsule 15 mg, 30 mg</i>	Tier 1	QL
<i>triazolam</i>	Tier 1	QL
<i>zaleplon</i>	Tier 1	QL
<i>zolpidem tartrate oral</i>	Tier 1	QL
<b>Wakefulness Promoting Agents</b>		
<i>armodafinil</i>	Tier 1	DX2RX; QL; AL
<i>modafinil</i>	Tier 1	DX2RX; QL; AL
<b>Therapeutic Nutrients/Minerals/Electrolytes - Drugs to Treat Vitamin, Mineral and Body Fluid Deficiencies</b>		
<b>Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs</b>		
<i>adc/f (0.5mg/ml)</i>	Tier 1	
<i>animal shapes complete</i>	Tier 1	QL
<i>ascorbic acid oral tablet 500 mg</i>	Tier 1	QL
<i>biocel</i>	Tier 1	QL
<i>b-plex plus</i>	Tier 1	QL
<i>BPROTECTED PEDIA POLY-VITE (pediatric multiple vitamins)</i>	Tier 2	QL
<i>BPROTECTED PEDIA POLY-VITE/FE (pediatric multivitamins-iron)</i>	Tier 2	QL
<i>BPROTECTED VITAMIN C (ascorbic acid)</i>	Tier 2	QL
<i>calcium 600 oral tablet 1500 (600 ca) mg</i>	Tier 1	QL
<i>calcium 600+d oral tablet 600-5 mg-mcg</i>	Tier 1	QL
<i>calcium carbonate oral tablet 1500 (600 ca) mg</i>	Tier 1	QL
<i>calcium carbonate oral tablet chewable 1250 (500 ca) mg</i>	Tier 1	QL
<i>calcium fast dissolution</i>	Tier 1	QL
<i>calcium high potency</i>	Tier 1	QL
<i>calcium oral tablet 1500 (600 ca) mg</i>	Tier 1	QL
<i>calcium oyster shell oral tablet 1250 (500 ca) mg</i>	Tier 1	QL
<i>calcium soft chews oral tablet chewable 500-200-40 mg-unt-mcg</i>	Tier 1	
<i>CENTRUM FLAVOR BURST KIDS (pediatric multivit-minerals-c)</i>	Tier 2	QL
<i>CENTRUM KIDS (pediatric multivit-minerals-c)</i>	Tier 2	QL
<i>cerovite jr</i>	Tier 1	QL
<i>chewable c</i>	Tier 1	QL
<i>chewable c with rose hips</i>	Tier 1	QL
<i>chewable childrens vitamin</i>	Tier 1	QL
<i>childrens animal shapes</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>childrens chewables/iron</i>	Tier 1	QL
<i>childrens complete oral tablet chewable 18 mg</i>	Tier 1	QL
<i>childrens vitamins/iron</i>	Tier 1	QL
<i>daily multivitamins/iron</i>	Tier 1	QL
<i>daily vitamin formula+iron</i>	Tier 1	QL
<i>effer-k oral tablet effervescent 25 meq</i>	Tier 1	QL
<i>ergocalciferol oral capsule</i>	Tier 1	QL
FOLAGENT DHA	Tier 2	
FOLAMED DHA	Tier 2	
<i>fruity c</i>	Tier 1	QL
<i>gummy dinos</i>	Tier 1	QL
<i>gummy multivitamin kids</i>	Tier 1	QL
<i>klor-con/ef</i>	Tier 1	QL
<i>k-prime</i>	Tier 1	QL
<i>liquid c</i>	Tier 1	QL
<i>lysiplex plus oral tablet</i>	Tier 1	QL
<i>multiple vitamins/iron</i>	Tier 1	QL
MULTIPRO	Tier 2	
<i>multivitamin infant &amp; toddler oral solution</i>	Tier 1	QL
<i>multi-vitamin/iron</i>	Tier 1	QL
<i>nutrifac zx</i>	Tier 1	QL
<i>OBSTETRIX EC (prenatal vit-dss-fe cbn-fa)</i>	Tier 2	
<i>OBTREX (prenatal vit-dss-fe cbn-fa)</i>	Tier 2	
<i>OCUVEL (multiple vitamins-minerals)</i>	Tier 2	
<i>one-daily multi-vitamin/iron</i>	Tier 1	QL
<i>one-daily/iron</i>	Tier 1	QL
<i>oyster shell calcium 500 + d</i>	Tier 1	QL
<i>oyster shell calcium oral tablet 500 mg</i>	Tier 1	QL
<i>oyster shell calcium/d oral tablet 250-3.125 mg-mcg</i>	Tier 1	QL
<i>oyster shell calcium/vitamin d oral tablet 250-3.125 mg-mcg</i>	Tier 1	QL
<i>POLY-VI-SOL (pediatric multiple vitamins)</i>	Tier 2	QL
POLY-VITE PEDIATRIC	Tier 2	QL
<i>prenatal gummy oral tablet chewable 0.4-113.5 mg</i>	Tier 1	
<i>stress formula/iron</i>	Tier 1	QL
<i>tri-vite/fluoride oral solution 0.25 mg/ml</i>	Tier 1	QL
<i>tri-vite/fluoride oral solution 0.5 mg/ml</i>	Tier 1	

Tier 1: Preferred Generic; Tier 2: Preferred Brand; AL: Limited to members of a certain age; ARL: Quantity limits may vary depending on age; DX2RX: Diagnosis Required; GE: Gender Limit; PA: Prior Auth Required; QL: Quantity Limit; SP: Specialty Medication; ST: Step Therapy

Drug Name	Drug Tier	Notes
<b>v-c forte</b>	Tier 1	
<b>vic-forte</b>	Tier 1	
<b>vit c/rose hips</b>	Tier 1	QL
<b>vita s forte</b>	Tier 1	QL
<b>vitace1</b>	Tier 1	QL
<b>vitachew multiple vitamin</b>	Tier 1	QL
<b>vitamin c cr oral tablet extended release 500 mg</b>	Tier 1	QL
<b>vitamin c er oral tablet extended release 1500 mg</b>	Tier 1	QL
<b>vitamin c oral liquid 500 mg/5ml</b>	Tier 1	QL
<b>vitamin c oral tablet 1000 mg, 250 mg, 500 mg</b>	Tier 1	QL
<b>vitamin c oral tablet chewable 100 mg, 250 mg, 500 mg</b>	Tier 1	QL
<b>vitamin c/acerola</b>	Tier 1	QL
<b>vitamin c/rose hips oral tablet 1000 mg, 500 mg</b>	Tier 1	QL
<b>vitamin c-rose hips oral tablet</b>	Tier 1	QL
<b>vitamin d (ergocalciferol) oral capsule 1.25 mg (50000 ut), 50000 unit</b>	Tier 1	QL
<b>vitamins acd-fluoride</b>	Tier 1	QL
<b>vitamins complete childrens</b>	Tier 1	QL
<b>zinc oral tablet 50 mg</b>	Tier 1	QL
<b>Vitamins - Vitamin, Mineral and Body Fluid Deficiency Drugs</b>		
<b>b-1</b>	Tier 1	QL
<b>b6</b>	Tier 1	QL
<b>cyanocobalamin injection solution 1000 mcg/ml</b>	Tier 1	QL
<b>DODEX (cyanocobalamin)</b>	Tier 2	QL
<b>pyridoxine hcl oral</b>	Tier 1	QL
<b>thiamine hcl oral</b>	Tier 1	QL
<b>vitamin b1</b>	Tier 1	QL
<b>vitamin b-1 oral tablet 250 mg</b>	Tier 1	QL
<b>vitamin b-12 er oral tablet extended release 1000 mcg</b>	Tier 1	
<b>vitamin b12 oral tablet extended release 1000 mcg</b>	Tier 1	
<b>vitamin b-12 tr oral tablet extended release 1000 mcg</b>	Tier 1	
<b>vitamin b-6</b>	Tier 1	QL
<b>vitamin b-6 er</b>	Tier 1	QL
<b>vitamin e oral capsule 180 mg (400 unit)</b>	Tier 1	QL
<b>Vaccines</b>		
<b>Immunological Agents - Drugs that Stimulate or Suppress the Immune System</b>		
JANSSEN COVID-19 VACCINE	Tier 2	QL

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