



# Preferred Drug List (PDL)

**Health Plan of Nevada**

Effective Date: 4/1/2024



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A UnitedHealthcare Company 



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**Civil Rights Coordinator**  
**UnitedHealthcare Civil Rights Grievance**  
P.O. Box 30608  
Salt Lake City, UT 84130

Email: **UHC\_Civil\_Rights@uhc.com**

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Online: **[hhs.gov/civil-rights/filing-a-complaint/index.html](https://hhs.gov/civil-rights/filing-a-complaint/index.html)**

By mail: U.S. Department of Health and Human Services  
200 Independence Avenue SW  
Room 509F, HHH Building  
Washington, D.C. 20201

By phone: **1-800-368-1019** (TDD **1-800-537-7697**)

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**Chinese:** 注意：您可以免費獲得翻譯及其他語言協助服務。如果您需要協助，請致電上列電話號碼。

**Korean:** 참고: 번역 및 기타 언어 지원 서비스를 무료로 제공해 드립니다. 도움이 필요하시면 위에 명시된 번호로 전화해 주십시오.

**Vietnamese:** CHÚ Ý: Dịch vụ dịch thuật và hỗ trợ ngôn ngữ khác được cung cấp cho quý vị miễn phí. Nếu quý vị cần trợ giúp, vui lòng gọi số ở trên.

**Amharic:** ማሰባሰቢያ፡- የትርጉም እና ሌሎች የቋንቋ ድጋፍ አገልግሎቶችን ያለ ምንም ወጪ ማግኘት ይቻላል። እርዳታ ከፈለጉ እባክዎ ከላይ ባለው ቁጥር ይደውሉ።

**Thai:** โปรดทราบ: มีบริการแปลและบริการช่วยเหลืออื่น ๆ ด้านภาษาให้สำหรับคุณโดยไม่มีค่าใช้จ่ายใด ๆ หากคุณต้องการความช่วยเหลือ โปรดโทรติดต่อหมายเลขด้านบนนี้

**Japanese:** 注意：ほん訳やその他の言語サポートサービスを無料でご利用いただけます。サポートが必要な場合は、上記の番号までお電話ください。

**Arabic:** تنبيه: تتوفر خدمات الترجمة وخدمات المساعدة اللغوية الأخرى لك مجانًا. إذا كنت بحاجة إلى المساعدة، يُرجى الاتصال بالرقم أعلاه.

**Russian:** ВНИМАНИЕ! Услуги перевода, а также другие услуги языковой поддержки предоставляются бесплатно. Если вам требуется помощь, пожалуйста, позвоните по указанному выше номеру.

**French:** ATTENTION : la traduction et d'autres services d'assistance linguistique sont disponibles sans frais pour vous. Si vous avez besoin d'aide, veuillez appeler le numéro ci-dessus.

**Samoan:** MO LE SILAFIA: O auaunaga faaliliu upu ma isi fesoasoani i le itu tau gagana o loo mafai ona e mauaina e aunoa ma se totogi. Afai e te moomia se fesoasoani, faamolemole ia vili le numera o loo ta'ua i luga.

**German:** HINWEIS: Übersetzungs- und andere Sprachdienste stehen Ihnen kostenlos zur Verfügung. Wenn Sie Hilfe benötigen, rufen Sie bitte die obige Nummer an.

**Ilocano:** PAKAAMMO: Magun-odmo a libre ti panagipatarus ken dagiti dadduma pay a serbisio a tulong iti lengguahe. No kasapulam ti tulong, pakitawagam ti numero iti ngato.



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.



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).

STEP Drug	First-Line Agent(s)
<b>Amerge</b>	Trial at a minimum dose of 50mg of sumatriptan tablets.
<b>Aricept 23mg</b>	90 day trial of Aricept 10mg daily
<b>Calcipotriene cream &amp; oint 0.005%</b>	Trial of two medium to high potency topical corticosteroids
<b>Calcitriol 3mcg/gm DPP4 Inhibitors (Nesina, Kazano, Oseni)</b>	Trial of two topical corticosteroids At least a 90 day trial of 1500mg/day of metformin.
<b>Elidel</b>	Minimum age of 2. Trial of one topical corticosteroid.
<b>Eucria</b>	Trial of a topical corticosteroid AND one of the following: Elidel or tacrolimus ointment
<b>fenofibrate</b>	Fill of a statin or 90 days of gemfibrozil within the previous 180 days.
<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>GLP-1 Agonists (Adlyxin, Trulicity, Victoza 2-pack)</b>	At least a 90 day trial of 1500mg/day of metformin

<b>GLP-1/Insulin Combinations (Soliqua)</b>	Trial of one drug from the following classes: GLP-1 or Basal Insulin
<b>lubiprostone</b>	For opioid-induced constipation or chronic idiopathic constipation, trial of lactulose or polyethylene glycol
<b>Motegrity</b>	For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
<b>Movantik</b>	For opioid-induced constipation, trial of lactulose or polyethylene glycol and trial of lubiprostone (authorized generic of Amitiza)
<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>Optivar</b>	14 day trial of ketotifen within previous 90 days required first.
<b>Ranexa</b>	Trial of one drug from the following classes: beta blockers, calcium channel blockers, long acting nitrates
<b>Renvela</b>	8 week trial of calcium acetate
<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 EC	delayed-release (also known as enteric coated) 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**

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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>mm ibuprofen</i>	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
<i>nabumetone oral</i>	Tier 1	QL
<i>naproxen dr</i>	Tier 1	QL
<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 oral tablet</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/1hr, 12 mcg/1hr, 25 mcg/1hr, 50 mcg/1hr, 75 mcg/1hr</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>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

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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>acetaminophen oral liquid 160 mg/5ml</i>	Tier 1	QL
<i>acetaminophen oral solution 160 mg/5ml, 325 mg/10.15ml, 650 mg/20.3ml</i>	Tier 1	QL
<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>childs non-aspirin</i>	Tier 1	QL
<i>ed-apap</i>	Tier 1	QL
<b>EXCEDRIN EXTRA STRENGTH (aspirin-acetaminophen-caffeine)</b>	Tier 2	
<b>EXCEDRIN MIGRAINE (aspirin-acetaminophen-caffeine)</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>FEVERALL INFANTS (acetaminophen)</b>	Tier 2	QL
<b>FEVERALL JUNIOR STRENGTH (acetaminophen)</b>	Tier 2	QL
<i>ft 8 hour pain relief</i>	Tier 1	QL
<i>ft arthritis pain reliever</i>	Tier 1	QL
<i>ft children's pain/fever</i>	Tier 1	QL
<i>ft migraine relief</i>	Tier 1	
<i>ft pain &amp; fever childrens</i>	Tier 1	QL
<i>ft pain relief</i>	Tier 1	QL
<i>ft pain relief adult extra st</i>	Tier 1	QL
<i>ft pain reliver extra st adult</i>	Tier 1	QL
<i>headache formula</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>headache relief extra str</i>	Tier 1	
<i>headache relief oral tablet 250-250-65 mg</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 childrens</i>	Tier 1	QL
<i>mapap oral capsule</i>	Tier 1	QL
<b>MAX RELIEF JUNIOR (acetaminophen)</b>	Tier 2	QL
<i>migraine formula oral tablet 250-250-65 mg</i>	Tier 1	
<i>migraine headache relief</i>	Tier 1	
<i>migraine relief oral tablet 250-250-65 mg</i>	Tier 1	
<i>mm acetaminophen ex str</i>	Tier 1	QL
<i>mm arthritis pain</i>	Tier 1	QL
<i>m-pap</i>	Tier 1	QL
<i>non-aspirin</i>	Tier 1	QL
<i>non-aspirin 8 hour</i>	Tier 1	QL
<i>non-aspirin childrens</i>	Tier 1	QL
<i>non-aspirin extra strength</i>	Tier 1	QL
<i>non-aspirin jr strength</i>	Tier 1	QL
<i>non-aspirin pain relief</i>	Tier 1	QL
<i>pain &amp; fever child</i>	Tier 1	QL
<i>pain &amp; fever childrens oral suspension 160 mg/5ml</i>	Tier 1	QL
<i>pain &amp; fever childrens oral tablet chewable 160 mg</i>	Tier 1	QL
<i>pain &amp; fever infants oral suspension 160 mg/5ml</i>	Tier 1	QL
<i>pain relief childrens oral elixir 160 mg/5ml</i>	Tier 1	QL
<i>pain relief childrens oral suspension</i>	Tier 1	QL
<i>pain relief childrens oral tablet chewable 160 mg</i>	Tier 1	QL
<i>pain relief extra st</i>	Tier 1	QL
<i>pain relief extra strength oral capsule 500 mg</i>	Tier 1	QL
<i>pain relief extra strength oral liquid 500 mg/15ml</i>	Tier 1	
<i>pain relief extra strength oral tablet 500 mg</i>	Tier 1	QL
<i>pain relief oral liquid 500 mg/15ml</i>	Tier 1	
<i>pain relief oral tablet 325 mg, 500 mg</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>pain relief oral tablet extended release 650 mg</i>	Tier 1	QL
<i>pain relief regular strength</i>	Tier 1	QL
<i>pain relief rapid burst</i>	Tier 1	
<i>pain reliever childrens oral suspension 160 mg/5ml</i>	Tier 1	QL
<i>pain reliever ex st oral liquid 500 mg/15ml</i>	Tier 1	
<i>pain reliever ex st oral tablet 500 mg</i>	Tier 1	QL
<i>pain reliever extra strength oral tablet 250-250-65 mg</i>	Tier 1	
<i>pain reliever extra strength oral tablet 500 mg</i>	Tier 1	QL
<i>pain reliever oral tablet 325 mg, 500 mg</i>	Tier 1	QL
<i>pain reliever plus</i>	Tier 1	
<i>pain-off</i>	Tier 1	
<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 (acetaminophen)</b>	Tier 2	QL
<b>PHARBETOL EXTRA STRENGTH (acetaminophen)</b>	Tier 2	QL
<i>sb arthritis pain relief</i>	Tier 1	QL
<i>sb pain reliever childrens</i>	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>		
<i>salsalate oral</i>	Tier 1	QL
<b>Opioid Analgesics, Short-acting</b>		
<i>oxycodone hcl oral tablet</i>	Tier 1	QL; ARL
<b>Anesthetics</b>		
<b>Local Anesthetics</b>		
<b>7T LIDO EXTERNAL GEL 2 % (lidocaine hcl)</b>	Tier 2	QL
<b>ANECREAM EXTERNAL CREAM (lidocaine)</b>	Tier 2	QL
<b>ASPERFLEX LIDOCAINE EXTERNAL CREAM (lidocaine)</b>	Tier 2	QL
<i>lidocaine external cream 4 %</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>lidocaine external patch 5 %</i>	Tier 1	DX2RX; QL
<i>lidocaine hcl external cream 3 %</i>	Tier 1	QL
<i>lidocaine viscous hcl</i>	Tier 1	QL
<i>lidocaine-prilocaine external cream</i>	Tier 1	QL
<i>lidopin external cream 3 %</i>	Tier 1	QL
<i>LMX 4 (lidocaine)</i>	Tier 2	QL
<i>PROXIVOL (lidocaine hcl)</i>	Tier 2	QL
<b>Anti-Addiction/Substance Abuse Treatment Agents</b>		
<b>Alcohol Deterrents/Anti-craving</b>		
<i>acamprosate calcium</i>	Tier 1	QL
<i>disulfiram oral tablet 250 mg</i>	Tier 1	QL
<i>disulfiram oral tablet 500 mg</i>	Tier 1	
<i>naltrexone hcl oral</i>	Tier 1	
<i>VIVITROL (naltrexone)</i>	Tier 2	
<b>Opioid Dependence</b>		
<i>BRIXADI (buprenorphine)</i>	Tier 2	
<i>BRIXADI (WEEKLY) (buprenorphine)</i>	Tier 2	
<i>buprenorphine hcl-naloxone hcl</i>	Tier 1	QL
<i>LUCEMYRA (lofexidine hcl)</i>	Tier 2	QL
<i>SUBLOCADE (buprenorphine)</i>	Tier 2	
<i>ZUBSOLV (buprenorphine hcl-naloxone hcl)</i>	Tier 2	QL
<b>Opioid Reversal Agents</b>		
<i>naloxone hcl injection</i>	Tier 1	QL
<i>naloxone hcl nasal</i>	Tier 1	QL
<i>NARCAN (naloxone hcl)</i>	Tier 2	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
<i>varenicline tartrate (starter)</i>	Tier 1	PA; QL

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Drug Name	Drug Tier	Notes
<i>varenicline tartrate(continue)</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>ft nicotine</i>	Tier 1	QL
<i>mini nicotine</i>	Tier 1	QL
<b>NICORETTE (nicotine polacrilex)</b>	Tier 2	QL
<b>NICORETTE MINI (nicotine polacrilex)</b>	Tier 2	QL
<b>NICORETTE STARTER KIT (nicotine polacrilex)</b>	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
<b>THRIVE (nicotine polacrilex)</b>	Tier 2	QL
<b>Antibacterials</b>		
<b>Aminoglycosides</b>		
<i>neomycin sulfate oral</i>	Tier 1	QL
<b>Antibacterials, Other</b>		
<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
<b>FIRVANQ (vancomycin hcl)</b>	Tier 2	DX2RX; QL
<i>linezolid oral suspension reconstituted</i>	Tier 1	DX2RX; QL
<i>linezolid oral tablet</i>	Tier 1	DX2RX
<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 macrocrystal</i>	Tier 1	QL
<i>nitrofurantoin monohydrate macrocrystals</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>nitrofurantoin oral suspension 25 mg/5ml</i>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<i>tinidazole oral tablet 250 mg</i>	Tier 1	
<i>tinidazole oral tablet 500 mg</i>	Tier 1	QL
<i>trimethoprim oral</i>	Tier 1	QL
<i>vancomycin hcl oral solution reconstituted 25 mg/ml</i>	Tier 1	DX2RX; QL
<b>VANDAZOLE (metronidazole)</b>	Tier 2	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>cefpodoxime proxetil oral tablet</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 suspension reconstituted</i>	Tier 1	QL
<b>Beta-lactam, Penicillins</b>		
<i>amoxicillin</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
<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
<b>DIFICID (fidaxomicin)</b>	Tier 2	PA; QL
<b>E.E.S. 400 (erythromycin ethylsuccinate)</b>	Tier 2	QL
<b>ERYTHROCIN STEARATE (erythromycin stearate)</b>	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

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Drug Name	Drug Tier	Notes
<b>Quinolones</b>		
<b>CIPRO ORAL SUSPENSION RECONSTITUTED (ciprofloxacin)</b>	Tier 2	QL
<i>ciprofloxacin hcl oral</i>	Tier 1	QL
<i>levofloxacin oral tablet</i>	Tier 1	QL
<i>moxifloxacin hcl oral</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>minocycline hcl oral capsule 100 mg, 50 mg</i>	Tier 1	QL
<i>mondoxyne nl</i>	Tier 1	QL
<b>NUZYRA ORAL (omadacycline tosylate)</b>	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	
<b>BETADINE EXTERNAL SOLUTION 10 % (povidone-iodine)</b>	Tier 2	
<i>first aid antibiotic external ointment , 3.5-400-5000</i>	Tier 1	QL
<i>first aid antiseptic external solution 10 %</i>	Tier 1	
<i>medi-first triple antibiotic</i>	Tier 1	QL
<b>NEOSPORIN ORIGINAL (neomycin-bacitracin-polymyxin)</b>	Tier 2	QL
<i>povidone iodine</i>	Tier 1	
<i>povidone-iodine external solution</i>	Tier 1	
<b>SCRUB CARE POVIDONE-IODINE (povidone-iodine)</b>	Tier 2	
<i>triple antibiotic external ointment , 3.5-400-5000 , 5-400-5000 , 5-400-5000 mg-unit</i>	Tier 1	QL
<i>triple antibiotic original</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<b>Anticonvulsants</b>		
<b>Anticonvulsants, Other</b>		
<i>felbamate oral suspension</i>	Tier 1	Members >= 8 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>felbamate oral tablet</i>	Tier 1	QL
<i>lamotrigine oral tablet</i>	Tier 1	QL
<i>lamotrigine oral tablet chewable</i>	Tier 1	Members >= 8 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>lamotrigine starter kit-blue</i>	Tier 1	QL
<i>lamotrigine starter kit-green</i>	Tier 1	QL
<i>lamotrigine starter kit-orange</i>	Tier 1	QL
<i>levetiracetam oral solution</i>	Tier 1	Maximum age of 9 years for solution  Available for an extended day(s) supply; QL; AL
<i>levetiracetam oral tablet</i>	Tier 1	QL
<i>roweepra</i>	Tier 1	QL
<i>subvenite</i>	Tier 1	QL
<i>subvenite starter kit-blue</i>	Tier 1	QL
<i>subvenite starter kit-green</i>	Tier 1	QL
<i>subvenite starter kit-orange</i>	Tier 1	QL
<i>topiramate oral capsule sprinkle</i>	Tier 1	Members >= 8 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>topiramate oral tablet</i>	Tier 1	QL
<i>valproic acid oral</i>	Tier 1	QL
<b>Calcium Channel Modifying Agents</b>		
<i>ethosuximide oral</i>	Tier 1	QL
<i>methsuximide</i>	Tier 1	QL
<b>Gamma-aminobutyric Acid (GABA) Augmenting Agents</b>		
<i>clobazam</i>	Tier 1	DX2RX; QL
<i>diazepam rectal</i>	Tier 1	QL
<i>gabapentin oral capsule</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>gabapentin oral tablet 600 mg, 800 mg</i>	Tier 1	QL
<i>NAYZILAM (midazolam (anticonvulsant))</i>	Tier 2	PA; QL
<i>phenobarbital oral</i>	Tier 1	QL
<i>primidone oral tablet 250 mg, 50 mg</i>	Tier 1	QL
<i>tiagabine hcl</i>	Tier 1	PA; QL; AL
<i>vigabatrin oral packet</i>	Tier 1	PA; SP; QL
<i>vigadrone oral packet</i>	Tier 1	PA; SP; QL
<i>vigpoder</i>	Tier 1	PA; SP; QL
<b>Sodium Channel Agents</b>		
<i>carbamazepine er</i>	Tier 1	QL
<i>carbamazepine oral</i>	Tier 1	QL
<i>DILANTIN ORAL CAPSULE 30 MG (phenytoin sodium extended)</i>	Tier 2	
<i>epitol</i>	Tier 1	QL
<i>lacosamide oral tablet</i>	Tier 1	PA; QL; AL
<i>oxcarbazepine oral suspension</i>	Tier 1	Maximum age of 9 years for solution  Available for an extended day(s) supply; QL; AL
<i>oxcarbazepine oral tablet</i>	Tier 1	QL
<i>phenytek</i>	Tier 1	QL
<i>phenytoin infatabs</i>	Tier 1	QL
<i>phenytoin oral suspension 125 mg/5ml</i>	Tier 1	QL
<i>phenytoin oral tablet chewable</i>	Tier 1	QL
<i>phenytoin sodium extended</i>	Tier 1	QL
<i>rufinamide</i>	Tier 1	DX2RX; QL
<i>TEGRETOL ORAL SUSPENSION (carbamazepine)</i>	Tier 2	QL
<i>zonisamide oral</i>	Tier 1	QL
<b>Antidementia Agents</b>		
<b>Cholinesterase Inhibitors</b>		
<i>donepezil hcl oral tablet 10 mg, 5 mg</i>	Tier 1	Members <18 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>donepezil hcl oral tablet 23 mg</i>	Tier 1	ST; Members <18 years of age will require PA  Available for an extended day(s) supply; QL; AL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>galantamine hydrobromide oral solution</i>	Tier 1	QL; AL
<i>galantamine hydrobromide oral tablet 12 mg, 8 mg</i>	Tier 1	QL; AL
<i>galantamine hydrobromide oral tablet 4 mg</i>	Tier 1	Available for an extended day(s) supply  Members <18 years of age will require PA; QL; AL
<i>rivastigmine</i>	Tier 1	Members <18 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>rivastigmine tartrate</i>	Tier 1	QL; AL
<b>N-methyl-D-aspartate (NMDA) Receptor Antagonist</b>		
<i>memantine hcl oral solution</i>	Tier 1	QL
<i>memantine hcl oral tablet</i>	Tier 1	Members <18 years of age will require PA  Available for an extended day(s) supply; 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)  Available for an extended day(s) supply; 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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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>clomipramine hcl oral</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
<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>ft motion sickness oral tablet 50 mg</i>	Tier 1	
<i>meclizine hcl oral tablet 12.5 mg, 25 mg</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 syrup 6.25 mg/5ml</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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>anti-nausea relief</i>	Tier 1	
<i>EMETROL ORAL SOLUTION (fructose-dextrose-phosphor acid)</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
<i>fluconazole oral</i>	Tier 1	QL
<i>ft miconazole 7</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 vaginal kit 200 &amp; 2 mg-% (9gm)</i>	Tier 1	QL
<i>miconazole 7 day treatment vaginal cream 2 %</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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>terconazole vaginal cream</i>	Tier 1	QL
<i>voriconazole oral tablet</i>	Tier 1	PA; QL
<b>Antifungals - Drugs to Treat Fungal Infections</b>		
<b>Antifungals - Fungal Infection Drugs</b>		
<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>athlete's foot</i>	Tier 1	
<i>athlete's foot (terbinafine)</i>	Tier 1	QL
<i>athlete's foot external aerosol powder 2 %</i>	Tier 1	
<i>athlete's foot external cream 1 %</i>	Tier 1	QL
<i>athlete's foot external powder 2 %</i>	Tier 1	QL
<i>athlete's foot powder spray external aerosol powder 2 %</i>	Tier 1	
<i>athlete's foot spray external aerosol 2 %</i>	Tier 1	
<i>baza antifungal</i>	Tier 1	
<i>clotrimazole 3</i>	Tier 1	
<i>clotrimazole 7</i>	Tier 1	QL
<i>clotrimazole vaginal</i>	Tier 1	QL
<i>clotrimazole vaginal cream 1 %</i>	Tier 1	QL
<i>CRITIC-AID CLEAR AF (miconazole nitrate)</i>	Tier 2	
<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>ft antifungal external cream 2 %</i>	Tier 1	
<i>ft athlete's foot (terbinafine)</i>	Tier 1	QL
<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	

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Drug Name	Drug Tier	Notes
<i>miconazorb af</i>	Tier 1	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>colchicine oral tablet</i>	Tier 1	QL
<i>febuxostat</i>	Tier 1	ST; 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>AJOVY (fremanezumab-vfrm)</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>		
<i>NURTEC (rimegepant sulfate)</i>	Tier 2	PA; QL
<i>UBRELVY (ubrogepant)</i>	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

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Drug Name	Drug Tier	Notes
<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>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>TRECTOR (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
<b>Antiandrogens</b>		
<i>abiraterone acetate oral tablet 250 mg</i>	Tier 1	PA; SP; QL
<i>bicalutamide</i>	Tier 1	QL
<i>ERLEADA ORAL TABLET 240 MG (apalutamide)</i>	Tier 2	SP; QL
<i>ERLEADA ORAL TABLET 60 MG (apalutamide)</i>	Tier 2	PA; SP; QL
<i>EULEXIN (flutamide)</i>	Tier 2	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

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Drug Name	Drug Tier	Notes
<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
<b>TABLOID (thioguanine)</b>	Tier 2	SP
<b>Antineoplastics, Other</b>		
<b>IDHIFA (enasidenib mesylate)</b>	Tier 2	PA; SP; QL
<b>LONSURF (trifluridine-tipiracil)</b>	Tier 2	PA; SP; QL
<b>NINLARO (ixazomib citrate)</b>	Tier 2	PA; SP; QL
<b>ZOLINZA (vorinostat)</b>	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	
<b>HYCAMTIN ORAL (topotecan hcl)</b>	Tier 2	PA; SP
<b>Molecular Target Inhibitors</b>		
<b>BALVERSA ORAL TABLET 4 MG (erdafitinib)</b>	Tier 2	PA; SP; QL
<b>COTELLIC (cobimetinib fumarate)</b>	Tier 2	PA; SP; QL
<b>DAURISMO (glasdegib maleate)</b>	Tier 2	PA; SP; QL
<b>ERIVEDGE (vismodegib)</b>	Tier 2	PA; SP; QL
<b>everolimus oral tablet 10 mg, 2.5 mg, 5 mg</b>	Tier 1	PA; SP; QL
<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 (200 MG DOSE) (ribociclib-letrozole)</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>LYNPARZA (olaparib)</b>	Tier 2	PA; SP; QL
<b>MEKINIST ORAL SOLUTION RECONSTITUTED (trametinib dimethyl sulfoxide)</b>	Tier 2	SP; QL
<b>MEKINIST ORAL TABLET (trametinib dimethyl sulfoxide)</b>	Tier 2	PA; SP; QL
<b>ODOMZO (sonidegib phosphate)</b>	Tier 2	PA; SP; QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>PIQRAY (200 MG DAILY DOSE) (alpelisib)</i>	Tier 2	PA; SP; QL
<i>PIQRAY (250 MG DAILY DOSE) (alpelisib)</i>	Tier 2	PA; SP; QL
<i>PIQRAY (300 MG DAILY DOSE) (alpelisib)</i>	Tier 2	PA; SP; QL
<i>ROZLYTREK ORAL CAPSULE (entrectinib)</i>	Tier 2	PA; SP; QL
<i>ROZLYTREK PACKET 50 MG ORAL (entrectinib)</i>	Tier 2	PA; SP; QL
<i>ROZLYTREK PACKET 50 MG ORAL (entrectinib)</i>	Tier 2	PA; SP; QL; AL
<i>RUBRACA ORAL TABLET 200 MG, 300 MG (rucaparib camsylate)</i>	Tier 2	PA; SP; QL
<i>RYDAPT (midostaurin)</i>	Tier 2	PA; SP; QL
<i>sorafenib tosylate</i>	Tier 1	PA; SP; QL
<i>STIVARGA (regorafenib)</i>	Tier 2	PA; SP; QL
<i>sunitinib malate oral capsule 12.5 mg, 25 mg, 50 mg</i>	Tier 1	PA; SP; QL
<i>sunitinib malate oral capsule 37.5 mg</i>	Tier 1	PA; SP
<i>TAFINLAR ORAL CAPSULE (dabrafenib mesylate)</i>	Tier 2	PA; SP; QL
<i>TAFINLAR ORAL TABLET SOLUBLE (dabrafenib mesylate)</i>	Tier 2	SP; QL
<i>TIBSOVO (ivosidenib)</i>	Tier 2	PA; SP; QL
<i>VENCLEXTA (venetoclax)</i>	Tier 2	PA; SP; QL
<i>VENCLEXTA STARTING PACK (venetoclax)</i>	Tier 2	PA; SP; QL
<i>VERZENIO (abemaciclib)</i>	Tier 2	PA; SP; QL
<i>VITRAKVI (larotrectinib sulfate)</i>	Tier 2	PA; SP; QL
<i>ZEJULA (niraparib tosylate)</i>	Tier 2	PA; SP; QL; AL
<i>ZELBORAF (vemurafenib)</i>	Tier 2	PA; SP; QL
<i>ZYDELIG (idelalisib)</i>	Tier 2	PA; SP; QL
<b>Retinoids</b>		
<i>bexarotene</i>	Tier 1	PA; SP
<i>tretinoin oral</i>	Tier 1	SP
<b>Treatment Adjuncts</b>		
<i>leucovorin calcium oral tablet 10 mg</i>	Tier 1	
<i>leucovorin calcium oral tablet 15 mg, 25 mg, 5 mg</i>	Tier 1	QL
<i>MESNEX ORAL (mesna)</i>	Tier 2	SP
<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

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Drug Name	Drug Tier	Notes
<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
<i>atovaquone-proguanil hcl</i>	Tier 1	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 external shampoo 4-0.33 %</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 killing shampoo max str</i>	Tier 1	
<i>lice maximum strength</i>	Tier 1	
<i>lice treatment external shampoo 0.33-4 %</i>	Tier 1	
<i>sb lice killing max st</i>	Tier 1	
<b>Antiparkinson Agents</b>		
<b>Anticholinergics</b>		
<i>benztropine mesylate oral</i>	Tier 1	QL
<i>trihexyphenidyl hcl</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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>ABILIFY ASIMTUFII (aripiprazole)</i>	Tier 2	PA; QL; AL
<i>ABILIFY MAINTENA (aripiprazole)</i>	Tier 2	DX2RX; ST; QL; AL
<i>aripiprazole oral tablet</i>	Tier 1	QL; AL
<i>ARISTADA (aripiprazole lauroxil)</i>	Tier 2	DX2RX; ST; QL; AL

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Drug Name	Drug Tier	Notes
<i>INVEGA HAFYERA (paliperidone palmitate)</i>	Tier 2	PA; QL; AL
<i>INVEGA SUSTENNA (paliperidone palmitate)</i>	Tier 2	DX2RX; ST; QL; AL
<i>INVEGA TRINZA (paliperidone palmitate)</i>	Tier 2	PA; QL; AL
<i>lurasidone hcl</i>	Tier 1	QL; AL
<i>olanzapine oral tablet</i>	Tier 1	QL; AL
<i>PERSERIS (risperidone)</i>	Tier 2	DX2RX; ST; QL; AL
<i>quetiapine fumarate</i>	Tier 1	QL; AL
<i>quetiapine fumarate er</i>	Tier 1	QL; AL
<i>risperidone microspheres er</i>	Tier 1	DX2RX; ST; QL; AL
<i>risperidone oral solution</i>	Tier 1	Members >= 8 years of age will require PA; QL; AL
<i>risperidone oral tablet</i>	Tier 1	QL; AL
<i>ziprasidone hcl</i>	Tier 1	QL; AL
<b>Treatment-Resistant</b>		
<i>clozapine oral tablet</i>	Tier 1	QL; AL
<b>Antispasticity Agents</b>		
<i>baclofen oral tablet 10 mg, 20 mg, 5 mg</i>	Tier 1	QL
<i>dantrolene sodium oral</i>	Tier 1	QL
<i>tizanidine hcl oral tablet</i>	Tier 1	QL
<b>Antivirals</b>		
<b>Anti-cytomegalovirus (CMV) Agents</b>		
<i>valganciclovir hcl oral tablet</i>	Tier 1	QL
<b>Anti-hepatitis B (HBV) Agents</b>		
<i>BARACLUDE ORAL SOLUTION (entecavir)</i>	Tier 2	QL
<i>entecavir</i>	Tier 1	QL
<i>lamivudine oral tablet 100 mg</i>	Tier 1	QL
<b>Anti-hepatitis C (HCV) Agents</b>		
<i>EPCLUSA ORAL TABLET 200-50 MG (sofosbuvir-velpatasvir)</i>	Tier 2	PA; SP; QL
<i>MAVYRET ORAL PACKET (glecaprevir-pibrentasvir)</i>	Tier 2	PA; SP; QL
<i>MAVYRET ORAL TABLET (glecaprevir-pibrentasvir)</i>	Tier 2	PA; Preferred for Genotypes 1, 2, 3, 4, 5,& 6; SP; QL
<i>ribavirin oral</i>	Tier 1	QL
<i>SOFOSBUVIR-VELPATASVIR</i>	Tier 2	PA; SP; QL
<i>SOVALDI (sofosbuvir)</i>	Tier 2	SP; QL
<i>ZEPATIER (elbasvir-grazoprevir)</i>	Tier 2	PA; SP; QL

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Drug Name	Drug Tier	Notes
<b>Antitherpetic Agents</b>		
<i>acyclovir oral</i>	Tier 1	QL
<i>valacyclovir hcl oral</i>	Tier 1	QL
<b>Anti-HIV Agents, Integrase Inhibitors (INSTI)</b>		
<i>BIKTARVY (bictegravir-emtricitab-tenofov)</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 oral tablet</i>	Tier 1	QL
<i>efavirenz-emtricitab-tenofo df</i>	Tier 1	QL
<i>efavirenz-lamivudine-tenofovir</i>	Tier 1	QL
<i>etravirine</i>	Tier 1	QL
<i>INTELENCE ORAL TABLET 25 MG (etravirine)</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>DESCOVY (emtricitabine-tenofovir af)</i>	Tier 2	QL
<i>emtricitabine</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<i>emtricitabine-tenofovir df</i>	Tier 1	QL
<b>EMTRIVA ORAL SOLUTION (emtricitabine)</b>	Tier 2	QL
<i>lamivudine oral solution</i>	Tier 1	QL
<i>lamivudine oral tablet 150 mg, 300 mg</i>	Tier 1	QL
<i>lamivudine-zidovudine</i>	Tier 1	QL
<b>ODEFSEY (emtricitab-rilpivir-tenofovir af)</b>	Tier 2	QL
<i>tenofovir disoproxil fumarate</i>	Tier 1	QL
<b>TRIUMEQ (abacavir-dolutegravir-lamivudine)</b>	Tier 2	QL
<b>TRIUMEQ PD (abacavir-dolutegravir-lamivudine)</b>	Tier 2	DX2RX; QL
<b>VIREAD ORAL POWDER (tenofovir disoproxil fumarate)</b>	Tier 2	QL
<b>VIREAD ORAL TABLET 150 MG, 200 MG, 250 MG (tenofovir disoproxil fumarate)</b>	Tier 2	QL
<i>zidovudine</i>	Tier 1	QL
<b>Anti-HIV Agents, Other</b>		
<b>FUZEON (enfuvirtide)</b>	Tier 2	QL
<i>maraviroc</i>	Tier 1	QL
<b>RUKOBIA (fostemsavir tromethamine)</b>	Tier 2	QL
<b>SELZENTRY ORAL SOLUTION (maraviroc)</b>	Tier 2	QL
<b>TYBOST (cobicistat)</b>	Tier 2	QL
<b>Anti-HIV Agents, Protease Inhibitors (PI)</b>		
<b>APTIVUS (tipranavir)</b>	Tier 2	QL
<i>atazanavir sulfate</i>	Tier 1	QL
<b>EVOTAZ (atazanavir-cobicistat)</b>	Tier 2	QL
<i>fosamprenavir calcium</i>	Tier 1	QL
<i>lopinavir-ritonavir</i>	Tier 1	QL
<b>NORVIR ORAL PACKET (ritonavir)</b>	Tier 2	QL
<b>PREZCOBIX (darunavir-cobicistat)</b>	Tier 2	QL
<b>REYATAZ ORAL PACKET (atazanavir sulfate)</b>	Tier 2	Members >= 8 years of age will require PA; QL; AL
<i>ritonavir</i>	Tier 1	QL
<b>SYMTUZA (darun-cobic-emtricit-tenofaf)</b>	Tier 2	QL
<b>VIRACEPT (nelfinavir mesylate)</b>	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
<b>RELENZA DISKHALER (zanamivir)</b>	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>bupirone 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  Available for an extended day(s) supply; QL; AL
<i>divalproex sodium oral tablet delayed release</i>	Tier 1	Minimum age of 2 years  Available for an extended day(s) supply; QL
<i>lithium</i>	Tier 1	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
ALOGLIPTIN BENZOATE	Tier 2	ST; QL
ALOGLIPTIN-METFORMIN HCL	Tier 2	ST; QL

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Drug Name	Drug Tier	Notes
ALOGLIPTIN-PIOGLITAZONE	Tier 2	ST; QL
DAPAGLIFLOZIN PROPANEDIOL	Tier 2	PA; QL
<b>FARXIGA (dapagliflozin propanediol)</b>	Tier 2	PA; QL
<b>glimepiride</b>	Tier 1	QL
<b>glipizide er</b>	Tier 1	QL
<b>glipizide oral tablet 10 mg, 5 mg</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>OZEMPIC (semaglutide)</b>	Tier 2	PA; QL
<b>OZEMPIC (2 MG/DOSE) (semaglutide)</b>	Tier 2	PA; QL
<b>pioglitazone hcl</b>	Tier 1	QL
<b>repaglinide</b>	Tier 1	QL
<b>RYBELSUS (semaglutide)</b>	Tier 2	PA; QL
<b>saxagliptin hcl</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>VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS (liraglutide)</b>	Tier 2	PA; QL
<b>VICTOZA SOLUTION PEN-INJECTOR 18 MG/3ML SUBCUTANEOUS (liraglutide)</b>	Tier 2	PA; 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
<b>GLUCAGON EMERGENCY INJECTION SOLUTION RECONSTITUTED</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<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>HUMALOG MIX 50/50 (insulin lispro prot &amp; lispro)</b>	Tier 2	QL
<b>HUMULIN 70/30 VIAL (insulin nph isophane &amp; regular)</b>	Tier 2	QL
<b>HUMULIN N VIAL (insulin nph human (isophane))</b>	Tier 2	QL
<b>HUMULIN R VIAL (insulin regular human)</b>	Tier 2	QL
INSULIN ASPART PROT & ASPART	Tier 2	QL
INSULIN LISPRO	Tier 2	QL
INSULIN LISPRO (1 UNIT DIAL)	Tier 2	ST; QL
INSULIN LISPRO JUNIOR KWIKPEN	Tier 2	ST; QL
INSULIN LISPRO PROT & LISPRO	Tier 2	QL
<b>LANTUS SOLOSTAR (insulin glargine)</b>	Tier 2	QL
<b>LANTUS U-100 VIAL (insulin glargine)</b>	Tier 2	QL
<b>NOVOLIN 70/30 RELION (insulin nph isophane &amp; regular)</b>	Tier 2	QL
<b>NOVOLIN 70/30 VIAL (insulin nph isophane &amp; regular)</b>	Tier 2	QL
<b>NOVOLIN N RELION (insulin nph human (isophane))</b>	Tier 2	QL
<b>NOVOLIN N VIAL (insulin nph human (isophane))</b>	Tier 2	QL
<b>NOVOLIN R RELION (insulin regular human)</b>	Tier 2	QL
<b>NOVOLIN R VIAL (insulin regular human)</b>	Tier 2	QL
<b>NOVOLOG FLEXPEN RELION (insulin aspart)</b>	Tier 2	QL
<b>NOVOLOG RELION (insulin aspart)</b>	Tier 2	QL
<b>Blood Glucose Regulators - Drugs to Regulate Blood Sugar</b>		
<b>Glycemic Agents - Diabetic Drugs</b>		
<b>GLUCO TO GO (dextrose (diabetic use))</b>	Tier 2	QL
<b>glucose oral tablet chewable 4 gm</b>	Tier 1	QL
<b>soft glucose</b>	Tier 1	QL
<b>TRUEPLUS GLUCOSE ON THE GO (dextrose (diabetic use))</b>	Tier 2	QL
<b>TRUEPLUS GLUCOSE ORAL TABLET CHEWABLE (dextrose (diabetic use))</b>	Tier 2	QL
<b>Insulins - Diabetic Drugs</b>		
CAREPOINT POLY HUB NEEDLE 18G X 1"	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>MONOJECT HYPODERMIC NEEDLE 18G X 1" (needle (disp))</b>	Tier 2	QL
<b>NOKOR VENTED NEEDLE (needle (disp))</b>	Tier 2	QL
<b>REZVOGLAR KWIKPEN (insulin glargine-aglr)</b>	Tier 2	QL
<b>Blood Products and Modifiers</b>		
<b>Anticoagulants</b>		
<b>ELIQUIS (apixaban)</b>	Tier 2	QL
<b>ELIQUIS DVTIPE STARTER PACK (apixaban)</b>	Tier 2	QL
<b>enoxaparin sodium</b>	Tier 1	QL
<b>heparin sodium (porcine)</b>	Tier 1	
<b>heparin sodium (porcine) pf injection solution 5000 unit/0.5ml, 5000 unit/ml</b>	Tier 1	
<b>jantoven</b>	Tier 1	QL
<b>SAVAYSA (edoxaban tosylate)</b>	Tier 2	QL
<b>warfarin sodium oral</b>	Tier 1	QL
<b>Blood Products and Modifiers, Other</b>		
<b>anagrelide hcl</b>	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/1ML, 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>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>plerixafor</b>	Tier 1	PA; SP; QL
<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>UDENYCA (pegfilgrastim-cbqv)</b>	Tier 2	PA; SP
<b>ZARXIO (filgrastim-sndz)</b>	Tier 2	PA; SP

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Drug Name	Drug Tier	Notes
<b>Hemostasis Agents</b>		
<i>aminocaproic acid oral</i>	Tier 1	QL
<i>tranexamic acid oral</i>	Tier 1	DX2RX; QL
<b>Platelet Modifying Agents</b>		
<i>BRILINTA ORAL TABLET 60 MG (ticagrelor)</i>	Tier 2	QL
<i>BRILINTA ORAL TABLET 90 MG (ticagrelor)</i>	Tier 2	DX2RX; QL
<i>CABLIVI (caplacizumab-yhdp)</i>	Tier 2	PA; SP; QL
<i>cilostazol</i>	Tier 1	QL
<i>clopidogrel bisulfate oral</i>	Tier 1	QL
<i>dipyridamole oral</i>	Tier 1	QL
<i>prasugrel hcl</i>	Tier 1	DX2RX; QL
<b>Blood Products/Modifiers/Volume Expanders - Drugs to Treat Blood Disorders</b>		
<b>Hemostasis Agents - Drugs to Stop Bleeding</b>		
<i>HEMLIBRA SUBCUTANEOUS SOLUTION 105 MG/0.7ML, 150 MG/1ML, 30 MG/0.4ML (emicizumab-kxwh)</i>	Tier 2	PA; SP; QL
<i>HEMLIBRA SUBCUTANEOUS SOLUTION 300 MG/2ML (emicizumab-kxwh)</i>	Tier 2	PA; QL
<b>Cardiovascular Agents</b>		
<b>Alpha-adrenergic Agonists</b>		
<i>clonidine hcl oral</i>	Tier 1	QL
<i>guanfacine hcl</i>	Tier 1	QL
METHYLDOPA	Tier 2	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	Available for an extended day(s) supply  Members >= 8 years of age will require PA; QL; AL

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Drug Name	Drug Tier	Notes
<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
<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>metoprolol tartrate oral tablet 37.5 mg, 75 mg</i>	Tier 1	
<i>nadolol oral</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

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Drug Name	Drug Tier	Notes
<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
<b>NYMALIZE (nimodipine)</b>	Tier 2	QL
<b>Calcium Channel Blocking Agents, Nondihydropyridines</b>		
<i>cartia xt</i>	Tier 1	QL
<i>diltiazem hcl er beads</i>	Tier 1	QL
<i>diltiazem hcl er coated beads</i>	Tier 1	QL
<i>diltiazem hcl er oral capsule extended release 12 hour</i>	Tier 1	QL
<i>diltiazem hcl er 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>		
<b>ACCURETIC ORAL TABLET 10-12.5 MG (quinapril-hydrochlorothiazide)</b>	Tier 2	QL
<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>captopril-hydrochlorothiazide oral tablet 25-15 mg, 50-15 mg</i>	Tier 1	QL
<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
<b>ENTRESTO (sacubitril-valsartan)</b>	Tier 2	PA; QL
<i>fosinopril sodium-hctz</i>	Tier 1	QL
<i>lisinopril-hydrochlorothiazide</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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	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
<b>SOAANZ ORAL TABLET 20 MG (torsemide)</b>	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 tablet</i>	Tier 1	QL
<b>Diuretics, Thiazide</b>		
<i>chlorthalidone</i>	Tier 1	QL
<b>DIURIL (chlorothiazide)</b>	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>		
<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

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Drug Name	Drug Tier	Notes
<b>Dyslipidemics, Other</b>		
<i>cholestyramine light oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered  Available for an extended day(s) supply; QL
<i>cholestyramine oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered  Available for an extended day(s) supply; 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
<b>PRALUENT (alirocumab)</b>	Tier 2	PA; NDC starting w/72733 Preferred w/PA; SP; QL
<i>prevalite oral powder</i>	Tier 1	Only the bulk products are covered (cans) Individual packets are not covered  Available for an extended day(s) supply; QL
<b>REPATHA (evolocumab)</b>	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
<b>NITRO-BID (nitroglycerin)</b>	Tier 2	QL
<i>nitroglycerin sublingual</i>	Tier 1	QL
<i>nitroglycerin translingual</i>	Tier 1	QL
<b>RECTIV (nitroglycerin)</b>	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	DX2RX; Diagnosis required for 18 years of age and older; QL; AL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>CONCERTA (methylphenidate hcl)</b>	Tier 2	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>dexmethylphenidate hcl</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>dexmethylphenidate hcl er</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>guanfacine hcl er</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older  Available for an extended day(s) supply; QL; AL
<b>methylphenidate hcl er</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>methylphenidate hcl er (cd)</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>methylphenidate hcl er (la) oral capsule extended release 24 hour 20 mg, 40 mg</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>methylphenidate hcl er (la) oral capsule extended release 24 hour 30 mg</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; AL
<b>methylphenidate hcl er (osm) oral tablet extended release 18 mg, 27 mg, 36 mg, 54 mg</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>methylphenidate hcl oral tablet</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>RELEXXII ORAL TABLET EXTENDED RELEASE 18 MG, 27 MG, 36 MG, 54 MG (methylphenidate hcl)</b>	Tier 2	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>Attention Deficit Hyperactivity Disorder Agents, Amphetamines</b>		
<b>ADDERALL XR (amphetamine-dextroamphetamine)</b>	Tier 2	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b>amphetamine-dextroamphetamine</b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b><i>amphetamine-dextroamphetamine er oral capsule extended release 24 hour 10 mg, 15 mg, 20 mg, 30 mg, 5 mg</i></b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b><i>dextroamphetamine sulfate er</i></b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b><i>dextroamphetamine sulfate oral tablet 10 mg, 5 mg</i></b>	Tier 1	DX2RX; Diagnosis required for 18 years of age and older; QL; AL
<b><i>lisdexamfetamine dimesylate oral capsule</i></b>	Tier 1	DX2RX; ST; Diagnosis required for 18 years of age and older; QL; AL
<b><i>VYVANSE ORAL CAPSULE (lisdexamfetamine dimesylate)</i></b>	Tier 2	DX2RX; ST; Diagnosis required for 18 years of age and older; QL; AL
<b>Central Nervous System, Other</b>		
<b><i>AUSTEDO (deutetrabenazine)</i></b>	Tier 2	PA; SP; QL
<b><i>caffeine citrate oral</i></b>	Tier 1	QL; AL
<b><i>INGREZZA ORAL CAPSULE 40 MG, 80 MG (valbenazine tosylate)</i></b>	Tier 2	PA; SP; QL
<b><i>INGREZZA ORAL CAPSULE THERAPY PACK (valbenazine tosylate)</i></b>	Tier 2	PA; SP; QL
<b><i>NUDEXTA (dextromethorphan-quinidine)</i></b>	Tier 2	QL
<b><i>riluzole</i></b>	Tier 1	QL
<b><i>tetrabenazine</i></b>	Tier 1	DX2RX; SP; QL
<b>Fibromyalgia Agents</b>		
<b><i>duloxetine hcl oral capsule delayed release particles 20 mg, 30 mg, 60 mg</i></b>	Tier 1	QL
<b><i>pregabalin oral</i></b>	Tier 1	QL
<b>Multiple Sclerosis Agents</b>		
<b><i>COPAXONE (glatiramer acetate)</i></b>	Tier 2	DX2RX; SP; QL
<b><i>dalfampridine er</i></b>	Tier 1	DX2RX; SP; QL
<b><i>dimethyl fumarate oral</i></b>	Tier 1	DX2RX; SP; QL
<b><i>dimethyl fumarate starter pack</i></b>	Tier 1	DX2RX; SP; QL
<b><i>fingolimod hcl</i></b>	Tier 1	DX2RX; SP; QL
<b><i>GILENYA ORAL CAPSULE 0.25 MG (fingolimod hcl)</i></b>	Tier 2	PA; SP; QL
<b><i>glatiramer acetate</i></b>	Tier 1	DX2RX; SP; QL
<b><i>glatopa</i></b>	Tier 1	DX2RX; SP; QL

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Drug Name	Drug Tier	Notes
<i>MAYZENT ORAL TABLET 0.25 MG, 2 MG (siponimod fumarate)</i>	Tier 2	PA; SP; QL
<i>MAYZENT STARTER PACK ORAL TABLET THERAPY PACK 12 X 0.25 MG (siponimod fumarate)</i>	Tier 2	PA; SP; QL
<i>PLEGRIDY INTRAMUSCULAR (peginterferon beta-1a)</i>	Tier 2	SP; QL
<i>PLEGRIDY STARTER PACK (peginterferon beta-1a)</i>	Tier 2	DX2RX; SP; QL
<i>PLEGRIDY SUBCUTANEOUS (peginterferon beta-1a)</i>	Tier 2	DX2RX; SP; QL
<i>teriflunomide</i>	Tier 1	DX2RX; SP; QL
<b>Dental and Oral Agents</b>		
<i>chlorhexidine gluconate mouth/throat</i>	Tier 1	QL
<i>kourzeq</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>amneesteem</i>	Tier 1	PA; QL
<i>azelaic acid external</i>	Tier 1	QL
<i>claravis</i>	Tier 1	PA; QL
<i>DIFFERIN EXTERNAL GEL 0.1 % (adapalene)</i>	Tier 2	QL
<i>isotretinoin oral</i>	Tier 1	PA; QL
<i>tretinoin external cream</i>	Tier 1	ST; QL; AL
<i>zenatane</i>	Tier 1	PA; QL
<b>Dermatitis and Pruitus Agents</b>		
<i>ala-cort</i>	Tier 1	QL
<i>alclometasone dipropionate external ointment</i>	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 max str external cream 1 %</i>	Tier 1	QL
<i>anti-itch maximum strength external cream 1 %</i>	Tier 1	QL
<i>betamethasone dipropionate aug</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>betamethasone dipropionate external lotion</i>	Tier 1	
<i>betamethasone dipropionate external ointment</i>	Tier 1	QL
<i>betamethasone valerate external cream</i>	Tier 1	QL
<i>betamethasone valerate external lotion</i>	Tier 1	QL
<i>betamethasone valerate external ointment</i>	Tier 1	QL
<i>clobetasol prop emollient base external cream 0.05 %</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 maximum strength external cream</i>	Tier 1	QL
<b>EUCRISA (crisaborole)</b>	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</i>	Tier 1	QL
<i>hydrocortisone ultra-moisture</i>	Tier 1	QL
<i>hydrocortisone/aloe</i>	Tier 1	QL
<i>hydrocortisone/aloe max str</i>	Tier 1	QL

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

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Drug Name	Drug Tier	Notes
<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>klayesta</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>astringent</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
<b>BOUDREAUXS BUTT PASTE OINTMENT 40 % EXTERNAL (zinc oxide)</b>	Tier 2	QL
<i>bp 10-1</i>	Tier 1	
<i>diaper rash external ointment</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>DR SMITHS DIAPER (zinc oxide)</b>	Tier 2	QL
<i>glycerin external</i>	Tier 1	
<i>glycerin external liquid 99.5 %</i>	Tier 1	
<i>hydrolatum</i>	Tier 1	
<i>hydrophor</i>	Tier 1	
<i>ointment base</i>	Tier 1	
<i>renewal soothing bath</i>	Tier 1	
<i>sss 10-5 external cream</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external cream 10-5 %</i>	Tier 1	
<i>sulfacetamide sodium-sulfur external liquid 9-4.5 %</i>	Tier 1	QL
<i>sulfacetamide sod-sulfur wash external liquid 9-4.5 %</i>	Tier 1	QL
<i>sulfamez wash</i>	Tier 1	
<b>SUMADAN WASH (sulfacetamide sodium-sulfur)</b>	Tier 2	QL
<i>zinc oxide external ointment 40 %</i>	Tier 1	QL
<b>Dermatological Agents - Skin Agents</b>		
<b>ABREVA (docosanol)</b>	Tier 2	QL
<i>calamine external lotion , 8-8 %</i>	Tier 1	
<i>calamine-zinc oxide external lotion</i>	Tier 1	
<i>cerovel external lotion 40 %</i>	Tier 1	QL
<i>docosanol external</i>	Tier 1	QL
<i>ft docosanol</i>	Tier 1	QL
<i>gormel</i>	Tier 1	QL
<i>gormel 10</i>	Tier 1	QL
<i>hemorrhoidal rectal suppository 0.25-3-85.5 %</i>	Tier 1	
<b>NUTRAPLUS (urea)</b>	Tier 2	QL
<i>urea 20 intensive hydrating</i>	Tier 1	QL
<i>urea external cream 10 %, 20 %</i>	Tier 1	QL
<i>urea external lotion</i>	Tier 1	QL
<i>ureacin-10</i>	Tier 1	QL
<i>ureacin-20</i>	Tier 1	QL
<b>XERAC AC (aluminum chloride in alcohol)</b>	Tier 2	
<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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>ACCUTREND GLUCOSE CONTROL (blood glucose calibration)</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>CARESENS CONTROL SOLUTION A/B (blood glucose calibration)</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 glucose receiver)</b>	Tier 2	PA; QL
<b>DEXCOM G6 SENSOR (continuous glucose sensor)</b>	Tier 2	PA; QL
<b>DEXCOM G7 RECEIVER (continuous glucose receiver)</b>	Tier 2	PA; QL
<b>DEXCOM G7 SENSOR (continuous glucose 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 glucose receiver)</b>	Tier 2	PA; QL
<b>FREESTYLE LIBRE 14 DAY SENSOR (continuous glucose sensor)</b>	Tier 2	PA; QL
<b>FREESTYLE LIBRE READER (continuous glucose receiver)</b>	Tier 2	PA; 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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>MEDISENSE GLUCOSE KETONE CONTR (blood glucose calibration)</b>	Tier 2	QL
<b>MEDISENSE HIIMID/LOW CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>NEUTEK 2TEK CONTROL (blood glucose calibration)</b>	Tier 2	QL
<b>ONETOUCH ULTRA 2 KIT WIDEVICE (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH ULTRA IN VITRO LIQUID (blood glucose calibration)</b>	Tier 2	QL
<b>ONETOUCH ULTRA IN VITRO STRIP (glucose blood)</b>	Tier 2	QL for non-insulin dependent members: allow twice daily testing  Available for an extended day(s) supply; QL
<b>ONETOUCH ULTRA TEST (glucose blood)</b>	Tier 2	QL for non-insulin dependent members: allow twice daily testing  Available for an extended day(s) supply; QL
<b>ONETOUCH VERIO FLEX SYSTEM KIT (blood glucose monitoring suppl)</b>	Tier 2	QL
<b>ONETOUCH VERIO IN VITRO LIQUID (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  Available for an extended day(s) supply; QL
<b>ONETOUCH VERIO REFLECT KIT WIDEVICE (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>DENTA 5000 PLUS (sodium fluoride)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>DENTAGEL (sodium fluoride)</b>	Tier 2	
<i>easygel</i>	Tier 1	
<i>klor-con</i>	Tier 1	QL
<i>klor-con 10</i>	Tier 1	QL
<i>klor-con m10</i>	Tier 1	QL
<i>klor-con m20</i>	Tier 1	QL
<b>potassium chloride crys er oral tablet extended release 10 meq, 20 meq</b>	Tier 1	QL
<b>potassium chloride er oral capsule extended release 10 meq</b>	Tier 1	QL
<b>potassium chloride er oral tablet extended release 10 meq, 20 meq, 8 meq</b>	Tier 1	QL
<b>potassium chloride oral</b>	Tier 1	QL
<b>potassium citrate er oral tablet extended release 10 meq (1080 mg)</b>	Tier 1	QL
<b>potassium citrate er oral tablet extended release 15 meq (1620 mg), 5 meq (540 mg)</b>	Tier 1	
<b>PREVIDENT (sodium fluoride)</b>	Tier 2	
<b>PREVIDENT 5000 DRY MOUTH (sodium fluoride)</b>	Tier 2	
<b>PREVIDENT 5000 PLUS (sodium fluoride)</b>	Tier 2	QL
<i>sf</i>	Tier 1	
<i>sf 5000 plus</i>	Tier 1	QL
<b>sodium fluoride 5000 plus</b>	Tier 1	QL
<b>sodium fluoride 5000 ppm dental cream</b>	Tier 1	QL
<b>sodium fluoride dental cream</b>	Tier 1	QL
<b>sodium fluoride dental gel</b>	Tier 1	
<b>sodium fluoride oral solution</b>	Tier 1	QL
<b>sodium fluoride oral tablet chewable</b>	Tier 1	QL
<b>Electrolyte/Mineral Replacement - Vitamin, Mineral and Body Fluid Deficiency Drugs</b>		
<b>BIOLYTE (oral electrolytes)</b>	Tier 2	QL
<b>BPROTECTED PEDIA IRON (ferrous sulfate)</b>	Tier 2	QL
<b>cal mag zinc +d3</b>	Tier 1	QL
<b>calcium + vitamin d3 oral tablet 500-5 mg-mcg</b>	Tier 1	QL
<b>calcium 500/vitamin d3</b>	Tier 1	
<b>calcium 600/vit d/minerals oral tablet 600-200 mg-unit</b>	Tier 1	QL
<b>calcium 600/vit d/minerals oral tablet chewable 600-400 mg-unit</b>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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</i>	Tier 1	QL
<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
<b>ENFAMIL ENFALYTE (oral electrolytes)</b>	Tier 2	QL
<b>EZFE 200 (polysaccharide iron complex)</b>	Tier 2	
<i>ferate</i>	Tier 1	
<b>FER-IN-SOL (ferrous sulfate)</b>	Tier 2	QL
<i>ferosul</i>	Tier 1	QL
<i>ferretts</i>	Tier 1	
<i>ferrex 150 capsule 150 mg oral</i>	Tier 1	
<b>FERREX 150 CAPSULE 150 MG ORAL (polysaccharide iron complex)</b>	Tier 2	
FERRIC X-150	Tier 2	
<i>ferrous fumarate oral tablet 324 (106 fe) mg, 324 mg</i>	Tier 1	
<i>ferrous gluconate</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

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

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Drug Name	Drug Tier	Notes
<i>phosphorous</i>	Tier 1	QL
<i>phospho-trin 250 neutral</i>	Tier 1	QL
<b>PHOSPHO-TRIN K500 (potassium phosphate monobasic)</b>	Tier 2	QL
<i>poly-iron 150</i>	Tier 1	
<i>polysaccharide iron complex</i>	Tier 1	
<i>polysaccharide-iron complex</i>	Tier 1	
<i>potassium citrate-citric acid</i>	Tier 1	
<b>REHYDRALYTE (oral electrolytes)</b>	Tier 2	QL
<i>sod citrate-citric acid oral solution 500-334 mg/5ml</i>	Tier 1	
TRUE FERROUS SULFATE	Tier 2	QL
TRUE MAGNESIUM OXIDE	Tier 2	
TRUELYTE	Tier 2	QL
<i>ultra calcium + vitamin d3</i>	Tier 1	QL
<i>wes-phos 250 neutral</i>	Tier 1	QL
<i>zinc gluconate</i>	Tier 1	QL
<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>		
<b>CHEMET (succimer)</b>	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)</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>		
<b>LOKELMA (sodium zirconium cyclosilicate)</b>	Tier 2	PA; QL
<b>SPS (sodium polystyrene sulfonate)</b>	Tier 2	QL
<b>VELTASSA (patiromer sorbitex calcium)</b>	Tier 2	PA; QL
<b>Vitamins</b>		
<b>a-25</b>	Tier 1	QL
<b>AMLADEX (multiple vitamin)</b>	Tier 2	
<b>aqueous vitamin d</b>	Tier 1	QL
<b>b complex</b>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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	
<b>BPROTECTED PEDIA D-VITE (cholecalciferol)</b>	Tier 2	QL
<b>CENTRUM SPECIALIST PRENATAL (prenatal mv-min-fe fum-fa-dha)</b>	Tier 2	
<i>classic prenatal</i>	Tier 1	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), 250 mcg</i>	Tier 1	
<i>d-3-5</i>	Tier 1	
<i>d3-50</i>	Tier 1	QL
<i>daily multiple vitamins</i>	Tier 1	
<i>daily vitamins</i>	Tier 1	
<i>daily vite</i>	Tier 1	
<i>daily vites</i>	Tier 1	
<i>daily-vite</i>	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
<i>d-vite pediatric</i>	Tier 1	QL
<b>ENFAMIL EXPECTA (prenatal mv-min-fe fum-fa-dha)</b>	Tier 2	QL
<i>essential one daily</i>	Tier 1	
<i>essentials</i>	Tier 1	
<b>FOLCYTEINE (multiple vitamin)</b>	Tier 2	
<i>full spectrum b/vitamin c</i>	Tier 1	QL
<b>GENICIN VITA-Q ORAL TABLET (multiple vitamin)</b>	Tier 2	
<i>healthy hair/skin/nails</i>	Tier 1	
M-NATAL PLUS	Tier 2	QL
<i>multi vitamin</i>	Tier 1	
<i>multi vitamin w/d-3</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>multiple vitamin-folic acid</i>	Tier 1	
<i>multiple vitamins essential</i>	Tier 1	
<i>multi-vitamin</i>	Tier 1	
<b>NEOMULTIVITE (multiple vitamin)</b>	Tier 2	
<b>NEONATAL PLUS (prenatal vit-fe fumarate-fa)</b>	Tier 2	QL
<i>nephro vitamins</i>	Tier 1	QL
<b>NEPHRO-VITE (b complex-c-folic acid)</b>	Tier 2	QL
<i>niacin er oral capsule extended release 250 mg</i>	Tier 1	QL
<i>niacin er oral capsule extended release 500 mg</i>	Tier 1	
<i>niacin er oral tablet extended release 1000 mg, 250 mg, 500 mg</i>	Tier 1	
<i>niacin oral tablet 100 mg, 250 mg, 50 mg</i>	Tier 1	
<b>NIVA-PLUS (prenatal vit-fe fumarate-fa)</b>	Tier 2	QL
<b>OBSTETRIX DHA (prenatal mv-min-fe cbn-fa-dha)</b>	Tier 2	QL
<i>once daily</i>	Tier 1	
<i>one daily</i>	Tier 1	
<b>ONE VITE DAILY MULTIVITAMIN (multiple vitamin)</b>	Tier 2	
ONE VITE WOMENS	Tier 2	QL
ONE VITE WOMENS PLUS	Tier 2	QL
<i>one-daily multi vitamins</i>	Tier 1	
<i>one-daily multi-vitamin</i>	Tier 1	
<i>phytonadione oral</i>	Tier 1	QL
<i>prenatal formula</i>	Tier 1	
<i>prenatal formula oral tablet 28-0.8 mg</i>	Tier 1	QL
<i>prenatal gummy oral tablet chewable 0.4-25 mg</i>	Tier 1	QL
<i>prenatal multi+dha</i>	Tier 1	QL
<i>prenatal multivitamins</i>	Tier 1	QL
<i>prenatal oral tablet 27-0.8 mg, 27-1 mg, 28-0.8 mg</i>	Tier 1	QL
<i>prenatal vitamins</i>	Tier 1	QL
<i>prenatalliron</i>	Tier 1	QL
<b>PRONUTRIENTS VITAMIN D3 (cholecalciferol)</b>	Tier 2	
<i>radiance platinum vitamin d3</i>	Tier 1	
<i>rena-vite</i>	Tier 1	QL
<b>SLO-NIACIN (niacin)</b>	Tier 2	
<i>stress formula</i>	Tier 1	
<i>tab-a-vitel/beta carotene</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<b>Thera (multiple vitamin)</b>	Tier 2	
<b>thera-tabs</b>	Tier 1	
<b>thiamine mononitrate oral</b>	Tier 1	QL
TM-DAILY VITE	Tier 2	
<b>tri-vite pediatric</b>	Tier 1	QL
TRUE MULTIVITAMIN	Tier 2	
TRUE VITAMIN A ORAL CAPSULE 8000 UNIT	Tier 2	QL
TRUE VITAMIN B1 ORAL TABLET 100 MG	Tier 2	QL
TRUE VITAMIN B3 ORAL TABLET 100 MG, 250 MG, 50 MG	Tier 2	
TRUE VITAMIN D3 ORAL CAPSULE 1.25 MG (50000 UT), 10 MCG (400 UNIT)	Tier 2	QL
TRUE VITAMIN D3 ORAL CAPSULE 125 MCG (5000 UT), 25 MCG (1000 UT), 250 MCG (10000 UT)	Tier 2	
TRUE VITAMIN D3 ORAL TABLET 10 MCG (400 UNIT)	Tier 2	QL
TRUE VITAMIN D3 ORAL TABLET 125 MCG (5000 UT), 25 MCG (1000 UT)	Tier 2	
<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 complex oral capsule</b>	Tier 1	QL
<b>vitamin b complex wlb-12</b>	Tier 1	
<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, 50 mcg (2000 ut)</b>	Tier 1	QL
<b>vitamin d3 oral capsule 1000 unit, 125 mcg (5000 ut), 25 mcg (1000 ut), 250 mcg (10000 ut)</b>	Tier 1	
<b>vitamin d-3 oral capsule 125 mcg (5000 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	

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Drug Name	Drug Tier	Notes
<i>vitamin d3 oral tablet chewable 10 mcg (400 unit), 25 mcg (1000 ut)</i>	Tier 1	
<i>vitamin d-400 oral tablet 10 mcg (400 unit)</i>	Tier 1	QL
<i>vitamin-b complex</i>	Tier 1	
<i>weekly-d</i>	Tier 1	QL
WESTAB PLUS	Tier 2	QL
<i>womens prenatal+dha</i>	Tier 1	QL
<b>Gastrointestinal Agents</b>		
<b>Anti-Constipation Agents</b>		
<i>constulose</i>	Tier 1	QL
<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
<i>lubiprostone capsule 24 mcg oral</i>	Tier 1	DX2RX; QL
<i>lubiprostone capsule 24 mcg oral</i>	Tier 1	DX2RX; ST; QL
<i>lubiprostone capsule 8 mcg oral</i>	Tier 1	DX2RX; QL
<i>lubiprostone capsule 8 mcg oral</i>	Tier 1	DX2RX; ST; 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 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>ft anti-diarrheal oral tablet</i>	Tier 1	
<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	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	

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Drug Name	Drug Tier	Notes
<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 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>ft acid reducer oral tablet</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	
<i>TAGAMET HB 200 (cimetidine)</i>	Tier 2	
<b>Protectants</b>		
<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  Available for an extended day(s) supply; 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  Available for an extended day(s) supply; QL; AL
<i>ft acid reducer oral capsule delayed release</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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  Available for an extended day(s) supply; QL; AL
<b>NEXIUM ORAL PACKET 2.5 MG, 5 MG (esomeprazole magnesium)</b>	Tier 2	Members >= 2 years of age will require PA  Available for an extended day(s) supply; QL; AL
<i>omeprazole magnesium</i>	Tier 1	QL
<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
<b>PREVACID 24HR (lansoprazole)</b>	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	
<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>alum &amp; mag hydroxide-simeth</i>	Tier 1	QL
<i>antacid &amp; anti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/5ml</i>	Tier 1	QL
<i>antacid &amp; antigas oral suspension 2400-2400-240 mg/30ml</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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>antacid anti-gas</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 str</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 oral suspension 400-400-40 mg/5ml</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</i>	Tier 1	QL
<i>antacid ultra strength</i>	Tier 1	
<i>antacid ultra strength oral tablet chewable 1000 mg</i>	Tier 1	
<i>antacid/lantigas</i>	Tier 1	QL
<i>antacid/lanti-gas max st</i>	Tier 1	QL
<i>antacid/lanti-gas oral suspension 200-200-20 mg/5ml, 400-400-40 mg/10ml, 400-400-40 mg/5ml</i>	Tier 1	QL
<i>antacid/gas relief max st</i>	Tier 1	QL
<i>anti-diarr/lant-gas</i>	Tier 1	
<i>anti-diarrheal anti-gas oral tablet 2-125 mg</i>	Tier 1	
<i>anti-diarrheal oral suspension 262 mg/15ml</i>	Tier 1	
<i>anti-diarrheallanti-gas</i>	Tier 1	
<i>anti-gas oral capsule 180 mg</i>	Tier 1	
<i>biotinex</i>	Tier 1	
<i>bismuth</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>bismuth subsalicylate oral</i>	Tier 1	QL
<i>BOLSITOL (lactobacillus)</i>	Tier 2	
<i>calcium antacid ex st oral tablet chewable 750 mg</i>	Tier 1	
<i>calcium antacid extra strength</i>	Tier 1	
<i>calcium antacid oral tablet chewable 500 mg</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</i>	Tier 1	
<i>FLEET ENEMA (sodium phosphates)</i>	Tier 2	
<i>FLEET PEDIATRIC (sodium phosphates)</i>	Tier 2	
<i>FLORA VANCE (probiotic product)</i>	Tier 2	QL
<i>floranex tablet oral</i>	Tier 1	
<i>FLORANEX TABLET ORAL (lactobacillus)</i>	Tier 2	
<i>FLORASTOR (saccharomyces boulardii)</i>	Tier 2	
<i>foaming antacid oral tablet chewable 80-20 mg</i>	Tier 1	
<i>freeze dried acidophilus</i>	Tier 1	
<i>ft antacid &amp; antigas</i>	Tier 1	QL
<i>ft antacid extra strength</i>	Tier 1	
<i>ft antacid regular strength</i>	Tier 1	
<i>ft anti-diarrheallanti-gas</i>	Tier 1	
<i>ft gas relief</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>ft gas relief extra strength</i>	Tier 1	
<i>ft gas relief infants</i>	Tier 1	
<i>ft gas relief ultra strength</i>	Tier 1	
<i>ft milk of magnesia</i>	Tier 1	
<i>ft stomach relief oral suspension</i>	Tier 1	
<i>ft stomach relief oral tablet chewable</i>	Tier 1	QL
<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 oral suspension 40 mg/0.6ml</i>	Tier 1	
<i>gas relief infants oral suspension 20 mg/0.3ml</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 maximum strength</i>	Tier 1	QL
<i>geri-lanta oral suspension 200-200-20 mg/5ml</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>IMODIUM MULTI-SYMPTOM RELIEF (loperamide-simethicone)</b>	Tier 2	
<i>infant gas relief</i>	Tier 1	
<i>infants gas relief</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>intestinex</i>	Tier 1	
<b>KAOPECTATE ORAL SUSPENSION (bismuth subsalicylate)</b>	Tier 2	
<i>lactobacillus oral tablet</i>	Tier 1	
<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>magnesium-aluminum-simethicone</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>mintox maximum strength</i>	Tier 1	QL
<i>mintox plus</i>	Tier 1	
<b>MYLICON INFANTS GAS RELIEF (simethicone)</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 ultra str</i>	Tier 1	
<i>pink-bismuth</i>	Tier 1	QL
<b>PROBIOMAX SERENITY (lactobacillus)</b>	Tier 2	
<i>probiotic blend</i>	Tier 1	QL
<i>probiotic colon care</i>	Tier 1	QL
<i>probiotic complex</i>	Tier 1	QL
<i>probiotic extra strength</i>	Tier 1	
<i>probiotic maximum strength</i>	Tier 1	QL
<i>probiotic oral capsule</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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	
<i>REPHRESH PRO-B (lactobacillus)</i>	Tier 2	
<i>RESTORA (probiotic product)</i>	Tier 2	QL
<i>RISAQUAD (probiotic product)</i>	Tier 2	QL
<i>RISAQUAD-2 (probiotic product)</i>	Tier 2	QL
<i>saccharomyces boulardii</i>	Tier 1	
<i>saline enema</i>	Tier 1	
<i>senior probiotic</i>	Tier 1	QL
<i>simeped</i>	Tier 1	
<i>simethicone drops infants</i>	Tier 1	
<i>simethicone oral</i>	Tier 1	
<i>simethicone ultra strength</i>	Tier 1	
<i>smooth antacid ex st oral tablet chewable 750 mg</i>	Tier 1	
<i>smooth antacid extra st</i>	Tier 1	
<i>smooth antacid extra strength</i>	Tier 1	
<i>sodium bicarbonate oral tablet</i>	Tier 1	
<i>soothe maximum strength</i>	Tier 1	
<i>soothe oral suspension</i>	Tier 1	
<i>soothe oral tablet chewable</i>	Tier 1	QL
<i>STABLEGI (saccharomyces boulardii)</i>	Tier 2	
<i>stomach relief extra strength</i>	Tier 1	
<i>stomach relief max st oral suspension 525 mg/15ml</i>	Tier 1	
<i>stomach relief oral suspension 1050 mg/30ml, 262 mg/15ml, 525 mg/15ml, 525 mg/30ml, 527 mg/30ml</i>	Tier 1	
<i>stomach relief oral tablet 262 mg</i>	Tier 1	
<i>stomach relief oral tablet chewable 262 mg</i>	Tier 1	QL
<i>stomach relief plus</i>	Tier 1	
<i>stomach relief ultra oral suspension 525 mg/15ml</i>	Tier 1	
TEENY TUMMY GAS RELIEF DROPS	Tier 2	
<i>TUMS (calcium carbonate antacid)</i>	Tier 2	
<i>TUMS CHEWY BITES (calcium carbonate antacid)</i>	Tier 2	
<i>TUMS E-X 750 (calcium carbonate antacid)</i>	Tier 2	
<i>TUMS EXTRA STRENGTH 750 (calcium carbonate antacid)</i>	Tier 2	
<i>TUMS LASTING EFFECTS (calcium carbonate antacid)</i>	Tier 2	

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Drug Name	Drug Tier	Notes
<i>TUMS SMOOTHIES (calcium carbonate antacid)</i>	Tier 2	
<i>TUMS ULTRA 1000 (calcium carbonate antacid)</i>	Tier 2	
<i>VISBIOME HIGH POTENCY ORAL CAPSULE (probiotic product)</i>	Tier 2	QL
<b>Laxatives - Bowel Treatment Drugs</b>		
<i>clearlax oral powder 17 gm/scoop</i>	Tier 1	ONLY powder bottle; QL
<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>ft clearlax</i>	Tier 1	ONLY powder bottle; QL
<i>ft mineral oil</i>	Tier 1	
<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 oral powder 48.57 %, 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 58.6 %</i>	Tier 1	
<i>natural fiber supplement</i>	Tier 1	
<i>natural vegetable</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<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
<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
<i>col-rite oral capsule 250 mg</i>	Tier 1	QL
<i>docusate calcium</i>	Tier 1	
<i>docusate mini</i>	Tier 1	QL
<i>docusate sodium oral capsule</i>	Tier 1	QL
<i>docusate sodium oral liquid</i>	Tier 1	QL
<i>docusate sodium oral syrup</i>	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	
<i>fiber laxative</i>	Tier 1	
<i>fiber laxative + calcium</i>	Tier 1	
<i>fiber laxative oral tablet 500 mg</i>	Tier 1	
<i>fiber oral tablet 500 mg, 625 mg</i>	Tier 1	
<i>fiber therapy oral tablet 500 mg, 625 mg</i>	Tier 1	
<i>fiber-caps</i>	Tier 1	
<i>fiber-lax</i>	Tier 1	
<b>FRESKARO MAGNESIUM CITRATE (magnesium citrate)</b>	Tier 2	QL
<i>ft fiber laxative</i>	Tier 1	
<i>ft magnesium citrate</i>	Tier 1	QL
<i>ft senna laxatives</i>	Tier 1	QL
<i>ft senna-s</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>ft stool softener oral capsule</i>	Tier 1	QL
<i>ft stool softener oral tablet 50-8.6 mg</i>	Tier 1	
<i>geri-kot</i>	Tier 1	QL
<i>glycerin (adult) rectal suppository 2 gm</i>	Tier 1	
<i>glycerin (infants &amp; children) rectal suppository 1 gm</i>	Tier 1	
<i>glycerin adult rectal suppository 2 gm</i>	Tier 1	
<i>glycerin child rectal suppository 1 gm, 1.2 gm</i>	Tier 1	
<i>glycerin childrens</i>	Tier 1	
<i>glycerin pediatric rectal suppository 1.2 gm</i>	Tier 1	
<i>laxacin</i>	Tier 1	
<i>laxative max str</i>	Tier 1	
<i>laxative maximum strength oral tablet 25 mg</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 senna laxative</i>	Tier 1	QL
<i>natural vegetable laxative oral tablet 8.6 mg</i>	Tier 1	QL
<b>ONELAX DOCUSATE SODIUM (docusate sodium)</b>	Tier 2	QL
<b>ONELAX MAGNESIUM CITRATE (magnesium citrate)</b>	Tier 2	QL
<b>ONELAX SENNA (sennosides)</b>	Tier 2	
<i>p col-rite</i>	Tier 1	
<b>PEDIA-LAX ORAL LIQUID (docusate sodium)</b>	Tier 2	
<b>PERDIEM OVERNIGHT RELIEF (sennosides)</b>	Tier 2	
<i>sb docusate sodium/senna</i>	Tier 1	
<i>senexon-s</i>	Tier 1	
<i>senna lax</i>	Tier 1	QL
<i>senna laxative</i>	Tier 1	QL
<i>senna oral liquid</i>	Tier 1	
<i>senna oral syrup</i>	Tier 1	
<i>senna oral tablet</i>	Tier 1	QL
<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	

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Drug Name	Drug Tier	Notes
<i>senna-lax</i>	Tier 1	QL
<i>senna-plus</i>	Tier 1	
<i>senna-s</i>	Tier 1	
<i>senna-tabs</i>	Tier 1	QL
<i>senna-time</i>	Tier 1	QL
<i>senna-time s</i>	Tier 1	
<i>sennazon</i>	Tier 1	
<b>SENOKOT (sennosides)</b>	Tier 2	QL
<b>SENOKOT S (sennosides-docusate sodium)</b>	Tier 2	
<i>soluble fiber therapy</i>	Tier 1	
<i>stimulant lax plus</i>	Tier 1	
<i>stimulant laxative</i>	Tier 1	
<i>stool softener laxative oral capsule</i>	Tier 1	QL
<i>stool softener oral capsule 100 mg, 250 mg</i>	Tier 1	QL
<i>stool softener oral capsule 240 mg, 50 mg</i>	Tier 1	
<i>stool softener pls laxative</i>	Tier 1	
<i>stool softener plus laxative</i>	Tier 1	
<i>stool softenerllaxative</i>	Tier 1	
<i>stool softenerllaxative oral tablet</i>	Tier 1	
<i>vegetable lax+stool softener</i>	Tier 1	
<i>vegetable laxative</i>	Tier 1	QL
<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
<i>sapropterin dihydrochloride</i>	Tier 1	DX2RX; SP; QL
<i>sodium phenylbutyrate oral powder</i>	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

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Drug Name	Drug Tier	Notes
<b>Genitourinary Agents</b>		
<b>Antispasmodics, Urinary</b>		
<i>oxybutynin chloride er</i>	Tier 1	QL
<i>oxybutynin chloride oral tablet 5 mg</i>	Tier 1	QL
<i>solifenacin succinate</i>	Tier 1	QL
<i>tolterodine tartrate</i>	Tier 1	ST; QL
<i>tolterodine tartrate er</i>	Tier 1	PA; QL
<i>tropium chloride</i>	Tier 1	QL
<b>Benign Prostatic Hypertrophy Agents</b>		
<i>alfuzosin hcl er</i>	Tier 1	QL
<i>finasteride oral tablet 5 mg</i>	Tier 1	QL
<i>tamsulosin hcl</i>	Tier 1	QL
<i>terazosin hcl</i>	Tier 1	QL
<b>Genitourinary Agents, Other</b>		
<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	
<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 intensol</i>	Tier 1	
<i>dexamethasone oral elixir</i>	Tier 1	QL
<i>dexamethasone oral solution</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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
<b>MEDROL ORAL TABLET 2 MG (methylprednisolone)</b>	Tier 2	
<i>methylprednisolone oral</i>	Tier 1	QL
<i>prednisolone oral solution</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>		
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
<b>EGRIFTA SV (tesamorelin acetate)</b>	Tier 2	DX2RX; SP; QL
<b>INCRELEX (mecasermin)</b>	Tier 2	PA; SP
<b>NOCDURNA (desmopressin acetate)</b>	Tier 2	PA; QL
<b>NORDITROPIN FLEXPRO (somatropin)</b>	Tier 2	PA; SP
<b>NOVAREL (chorionic gonadotropin)</b>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<b>NUTROPIN AQ NUSPIN 10 (somatropin)</b>	Tier 2	PA; SP
<b>NUTROPIN AQ NUSPIN 20 (somatropin)</b>	Tier 2	PA; SP
<b>NUTROPIN AQ NUSPIN 5 (somatropin)</b>	Tier 2	PA; SP
<b>PREGNYL (chorionic gonadotropin)</b>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion

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Drug Name	Drug Tier	Notes
<b>ZOMACTON SUBCUTANEOUS SOLUTION RECONSTITUTED 5 MG (somatropin)</b>	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>		
<b>OVIDREL (choriogonadotropin alfa)</b>	Tier 2	DX2RX; Diagnosis Required for Hypogonadism or Cryptorchidism; Infertility diagnosis is a Plan Exclusion
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)</b>		
<b>KORLYM (mifepristone)</b>	Tier 2	PA; SP; QL
<b>methergine</b>	Tier 1	QL
<b>methylergonovine maleate oral</b>	Tier 1	QL
<b>mifepristone oral tablet 300 mg</b>	Tier 1	PA; SP; QL
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) - Drugs to Regulate Hormones</b>		
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins) - Hormone Replacement/Modifying Drugs</b>		
<b>mifepristone oral tablet 200 mg</b>	Tier 1	Coverage based on benefit; QL
<b>Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)</b>		
<b>Androgens</b>		
<b>danazol oral</b>	Tier 1	QL
<b>DEPO-TESTOSTERONE SOLUTION 200 MG/ML INTRAMUSCULAR (testosterone cypionate)</b>	Tier 2	QL
<b>testosterone cypionate intramuscular</b>	Tier 1	QL
<b>testosterone enanthate intramuscular</b>	Tier 1	QL
<b>testosterone transdermal gel 12.5 mg/lact (1%), 25 mg/2.5gm (1%), 50 mg/5gm (1%)</b>	Tier 1	PA; QL
<b>Estrogens</b>		
<b>afirmelle</b>	Tier 1	QL; GE
<b>altavera</b>	Tier 1	QL; GE
<b>alyacen 1/35</b>	Tier 1	QL; GE
<b>alyacen 7/7/7</b>	Tier 1	QL; GE

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>amethia oral tablet 0.15-0.03 &amp; 0.01 mg</i>	Tier 1	QL
<i>apri</i>	Tier 1	QL; GE
<i>aranelle</i>	Tier 1	QL; GE
<i>ashlyna</i>	Tier 1	QL
<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 24 fe</i>	Tier 1	QL
<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 24 fe</i>	Tier 1	QL
<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>camrese</i>	Tier 1	QL
<i>camrese lo</i>	Tier 1	QL
<i>charlotte 24 fe</i>	Tier 1	QL; GE
<i>chateal eq</i>	Tier 1	QL; GE
<i>cryselle-28</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>daysee</i>	Tier 1	QL
<i>delyla</i>	Tier 1	QL; GE
<i>DEPO-ESTRADIOL (estradiol cypionate)</i>	Tier 2	QL
<i>desogestrel-ethinyl estradiol oral tablet 0.15-0.02/0.01 mg (21/5)</i>	Tier 1	QL; GE
<i>dotti</i>	Tier 1	QL
<i>drospirenone-ethinyl estradiol</i>	Tier 1	QL
<i>DUAVEE (conj estrogens-bazedoxifene)</i>	Tier 2	QL
<i>elinest</i>	Tier 1	QL; GE
<i>eluryng</i>	Tier 1	QL; GE

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<i>enilloring</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
<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-ethinyl estradiol</i>	Tier 1	QL; GE
<i>falmina</i>	Tier 1	QL; GE
<i>finzala</i>	Tier 1	QL; GE
<i>hailey 1.5/30</i>	Tier 1	QL; GE
<i>hailey 24 fe</i>	Tier 1	QL
<i>hailey fe 1.5/30</i>	Tier 1	QL; GE
<i>hailey fe 1/20</i>	Tier 1	QL; GE
<i>haloette</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>jaimiess</i>	Tier 1	QL
<i>jasmiel</i>	Tier 1	QL
<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(24)</i>	Tier 1	QL
<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 24 fe</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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>levonorgest-eth estrad 91-day</i>	Tier 1	QL
<i>levonorgestrel-ethinyl estrad oral tablet 0.1-20 mg-mcg, 0.15-30 mg-mcg</i>	Tier 1	QL; GE
<i>levonorg-eth estrad triphasic</i>	Tier 1	QL; GE
<i>levora 0.15/30 (28)</i>	Tier 1	QL; GE
<i>lojaimiess</i>	Tier 1	QL
<i>loryna</i>	Tier 1	QL
<i>low-ogestrel</i>	Tier 1	QL; GE
<i>lo-zumandimine</i>	Tier 1	QL
<i>lutra</i>	Tier 1	QL; GE
<i>lyllana</i>	Tier 1	QL
<i>marlissa</i>	Tier 1	QL; GE
<i>mibelas 24 fe</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 24 fe</i>	Tier 1	QL
<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-lynyah</i>	Tier 1	QL; GE
<i>necon 0.5/35 (28)</i>	Tier 1	QL; GE
<i>nikki</i>	Tier 1	QL
<i>norelgestromin-eth estradiol</i>	Tier 1	QL; GE
<i>norethin ace-eth estrad-fe oral tablet</i>	Tier 1	QL; GE
<i>norethin ace-eth estrad-fe oral tablet chewable</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>norethin-eth estradiol-fe oral tablet chewable 0.4-35 mg-mcg</i>	Tier 1	QL
<i>norgestimate-eth estradiol</i>	Tier 1	QL; GE
<i>norgestimate-ethinyl estradiol triphasic</i>	Tier 1	QL; GE

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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>ocella</i>	Tier 1	QL
<i>philith</i>	Tier 1	QL; GE
<i>pimtrea</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-medroxyprogest ace)</i>	Tier 2	QL
<i>PREMPRO (conj estrog-medroxyprogest 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>simpesse</i>	Tier 1	QL
<i>sprintec 28</i>	Tier 1	QL; GE
<i>sronyx</i>	Tier 1	QL; GE
<i>syeda</i>	Tier 1	QL
<i>tarina 24 fe</i>	Tier 1	QL
<i>tarina fe 1/20 eq</i>	Tier 1	QL; GE
<i>tilia fe</i>	Tier 1	QL; GE
<i>tri-estarylla</i>	Tier 1	QL; GE
<i>tri-legest fe</i>	Tier 1	QL; GE
<i>tri-linyah</i>	Tier 1	QL; GE
<i>tri-lo-estarylla</i>	Tier 1	QL; GE
<i>tri-lo-marzia</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>tri-vylibra lo</i>	Tier 1	QL; GE
<i>turqoz</i>	Tier 1	QL; GE

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Drug Name	Drug Tier	Notes
<b>TYBLUME (levonorgestrel-ethinyl estrad)</b>	Tier 2	QL; GE
<i>velivet</i>	Tier 1	QL
<i>vestura</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>wymzya fe</i>	Tier 1	QL
<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
<i>zumandimine</i>	Tier 1	QL
<b>Progestins</b>		
<i>camila</i>	Tier 1	QL; GE
<i>deblitane</i>	Tier 1	QL; GE
<b>ELLA (ulipristal acetate)</b>	Tier 2	QL
<i>errin</i>	Tier 1	QL; GE
<i>heather</i>	Tier 1	QL; GE
<i>incassia</i>	Tier 1	QL; GE
<i>jencycla</i>	Tier 1	QL; GE
<i>lyleq</i>	Tier 1	QL; GE
<i>lyza</i>	Tier 1	QL; GE
<b>medroxyprogesterone acetate intramuscular</b>	Tier 1	QL; GE
<b>medroxyprogesterone acetate oral</b>	Tier 1	QL
<b>megestrol acetate oral suspension 40 mg/ml</b>	Tier 1	QL
<b>megestrol acetate oral tablet 20 mg</b>	Tier 1	
<b>megestrol acetate oral tablet 40 mg</b>	Tier 1	QL
<i>nora-be</i>	Tier 1	QL; GE
<b>norethindrone acetate oral</b>	Tier 1	QL
<b>norethindrone oral</b>	Tier 1	QL; GE
<i>norlyroc</i>	Tier 1	QL; GE
<b>progesterone oral</b>	Tier 1	DX2RX; QL
<i>sharobel</i>	Tier 1	QL; GE

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Drug Name	Drug Tier	Notes
<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>curae</i>	Tier 1	QL; GE
<i>econtra one-step</i>	Tier 1	QL; GE
<i>her style</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
<b>PLAN B ONE-STEP (levonorgestrel)</b>	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>		
<b>LYSODREN (mitotane)</b>	Tier 2	QL
<b>Hormonal Agents, Suppressant (Pituitary)</b>		
<i>cabergoline</i>	Tier 1	QL
<i>leuprolide acetate injection</i>	Tier 1	PA; SP
<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

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Drug Name	Drug Tier	Notes
<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>LUPRON DEPOT-PED (6-MONTH) (leuprolide acetate (6 month))</b>	Tier 2	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 diaspertate)</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 SUBCUTANEOUS SOLUTION AUTO-INJECTOR 150 MG/ML (secukinumab)</b>	Tier 2	PA; SP; QL
<b>COSENTYX SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML (secukinumab)</b>	Tier 2	PA; SP; QL
<b>COSENTYX UNOREADY (secukinumab)</b>	Tier 2	PA; QL
<b>DUPIXENT (dupilumab)</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

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Drug Name	Drug Tier	Notes
<b>SYNAGIS (palivizumab)</b>	Tier 2	PA; SP
<b>XOLAIR SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 150 MG/ML, 75 MG/0.5ML (omalizumab)</b>	Tier 2	PA; SP; QL
<b>Immunostimulants</b>		
<b>ACTIMMUNE (interferon gamma-1b)</b>	Tier 2	PA; SP
<b>PEGASYS (peginterferon alfa-2a)</b>	Tier 2	SP; QL
<b>Immunosuppressants</b>		
<b>azathioprine oral tablet 50 mg</b>	Tier 1	QL
<b>CIMZIA VIAL KIT (certolizumab pegol)</b>	Tier 2	PA; SP; QL
<b>CIMZIA SUBCUTANEOUS PREFILLED SYRINGE KIT 2 X 200 MG/ML, 6 X 200 MG/ML (certolizumab pegol)</b>	Tier 2	PA; SP; QL
<b>cyclosporine modified oral capsule 100 mg, 25 mg</b>	Tier 1	QL
<b>cyclosporine modified oral capsule 50 mg</b>	Tier 1	
<b>cyclosporine modified oral solution</b>	Tier 1	QL
<b>cyclosporine oral</b>	Tier 1	QL
<b>ENBREL (etanercept)</b>	Tier 2	PA; SP; QL
<b>everolimus oral tablet 0.25 mg, 0.5 mg, 0.75 mg, 1 mg</b>	Tier 1	QL
<b>gengraf oral capsule</b>	Tier 1	QL
<b>leflunomide oral</b>	Tier 1	QL
<b>methotrexate sodium</b>	Tier 1	
<b>methotrexate sodium (pf)</b>	Tier 1	
<b>mycophenolate mofetil oral</b>	Tier 1	QL
<b>mycophenolate sodium</b>	Tier 1	QL
<b>mycophenolic acid</b>	Tier 1	QL
<b>sirolimus oral solution</b>	Tier 1	
<b>sirolimus oral tablet 0.5 mg, 1 mg</b>	Tier 1	QL
<b>sirolimus oral tablet 2 mg</b>	Tier 1	
<b>tacrolimus oral capsule 0.5 mg, 5 mg</b>	Tier 1	
<b>tacrolimus oral capsule 1 mg</b>	Tier 1	QL
<b>Vaccines</b>		
<b>ACTHIB (haemophilus b polysac conj vac)</b>	Tier 2	
<b>ADACEL (tetanus-diphth-acell pertussis)</b>	Tier 2	QL
<b>BEXSERO (meningococcal b recomb omv adj)</b>	Tier 2	QL
<b>BOOSTRIX INTRAMUSCULAR SUSPENSION (tetanus-diphth-acell pertussis)</b>	Tier 2	QL
<b>DAPTACEL (diphth-acell pertussis-tetanus)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>ENGERIX-B (hepatitis b vac recombinant)</b>	Tier 2	QL
<b>GARDASIL 9 (hvp 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 (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
<b>PREHEVBRIO (hepatitis b vac 3-antigen rcmb)</b>	Tier 2	QL
<b>PRIORIX (measles, mumps &amp; rubella vac)</b>	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>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
<b>TETANUS-DIPHTHERIA TOXOIDS TD</b>	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
<b>FLUCELVAX QUADRIVALENT (influenza vac subunit quad)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<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
<b>NOVAVAX COVID-19 VACCINE</b>	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>Inflammatory Bowel Disease Agents</b>		
<b>Aminosalicylates</b>		
<b>balsalazide disodium</b>	Tier 1	QL
<b>mesalamine oral capsule delayed release 400 mg</b>	Tier 1	QL
<b>mesalamine rectal</b>	Tier 1	QL
<b>SFROWASA (mesalamine)</b>	Tier 2	QL
<b>sulfasalazine oral</b>	Tier 1	QL
<b>Glucocorticoids</b>		
<b>budesonide oral</b>	Tier 1	DX2RX; QL
<b>hydrocortisone (perianal) external cream 2.5 %</b>	Tier 1	QL
<b>hydrocortisone rectal enema 100 mg/60ml</b>	Tier 1	QL
<b>procto-med hc</b>	Tier 1	QL
<b>proctosol hc</b>	Tier 1	QL
<b>proctozone-hc</b>	Tier 1	QL
<b>Metabolic Bone Disease Agents</b>		
<b>alendronate sodium oral solution</b>	Tier 1	QL
<b>alendronate sodium oral tablet 10 mg, 35 mg, 70 mg</b>	Tier 1	QL
<b>calcitonin (salmon) nasal</b>	Tier 1	QL
<b>calcitriol oral capsule</b>	Tier 1	QL
<b>calcitriol oral solution</b>	Tier 1	Members >= 8 years of age will require PA  Available for an extended day(s) supply; AL
<b>cinacalcet hcl</b>	Tier 1	PA; QL
<b>TYMLOS (abaloparatide)</b>	Tier 2	PA; SP; QL
<b>Miscellaneous Therapeutic Agents</b>		
<b>ABRYSVO (rsv pre-fusion f a&amp;b vac rcmb)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<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>acne treatment external cream 10 %</i>	Tier 1	
ADALIMUMAB-ADB (2 PEN)	Tier 2	PA; SP; QL
ADALIMUMAB-ADB (2 SYRINGE)	Tier 2	PA; SP; QL
ADALIMUMAB-ADB(CD/UC/HS STRT)	Tier 2	PA; SP; QL
ADALIMUMAB-ADB(PS/UV STARTER)	Tier 2	PA; SP; QL
ADALIMUMAB-FKJP	Tier 2	PA; SP; QL
<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>AMJEVITA SOLUTION AUTO-INJECTOR 40 MG/0.8ML SUBCUTANEOUS (adalimumab-atto)</b>	Tier 2	PA; NDC(s) starting w/72511 Preferred w/PA; SP; QL
<b>AMJEVITA SUBCUTANEOUS SOLUTION AUTO-INJECTOR 40 MG/0.4ML, 80 MG/0.8ML (adalimumab-atto)</b>	Tier 2	PA; SP; QL
<b>AMJEVITA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 40 MG/0.4ML (adalimumab-atto)</b>	Tier 2	PA; SP; QL
<b>AMJEVITA-PED 15KG TO &lt;30KG SUBCUTANEOUS SOLUTION PREFILLED SYRINGE 20 MG/0.2ML (adalimumab-atto)</b>	Tier 2	PA; SP; QL
<b>ANASPAZ (hyoscyamine sulfate)</b>	Tier 2	QL
<i>antibiotic</i>	Tier 1	QL
<i>antifungal (tolnaftate)</i>	Tier 1	QL
<i>antifungal tolinaftate</i>	Tier 1	QL
<b>AREXVY (rsvpref3 vac recomb adjuvanted)</b>	Tier 2	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 oral tablet 325 mg</i>	Tier 1	QL
<i>aspirin ec oral tablet delayed release 325 mg, 81 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	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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>athletes foot relief</i>	Tier 1	
<i>AXONA (dietary management product)</i>	Tier 2	
<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
<i>BAYER ASPIRIN (aspirin)</i>	Tier 2	QL
<i>BAYER LOW DOSE ORAL TABLET CHEWABLE (aspirin)</i>	Tier 2	QL
<i>BD ECLIPSE NEEDLE 25G X 5/8" (needle (disp))</i>	Tier 2	QL
<i>BD ULTRA-FINE INSULIN SYRINGES 31G X 5/16" 0.3 ML (insulin syringe-needle u-100)</i>	Tier 2	QL
<i>BD ULTRA-FINE PEN NEEDLES 31G X 5 MM (insulin pen needle)</i>	Tier 2	QL
<i>BENZAC AC WASH (benzoyl peroxide)</i>	Tier 2	QL
<i>bisacodyl ec</i>	Tier 1	QL
<i>bisacodyl laxative</i>	Tier 1	QL
<i>bisacodyl oral</i>	Tier 1	QL
<i>bisacodyl rectal</i>	Tier 1	QL
<i>bp wash external liquid 2.5 %</i>	Tier 1	
<i>BREATHE COMFORT HUMIDIFIER (humidifiers)</i>	Tier 2	QL
<i>calamine external lotion</i>	Tier 1	
<i>CALQUENCE (acalabrutinib maleate)</i>	Tier 2	SP; QL
<i>capsaicin external cream 0.025 %, 0.1 %</i>	Tier 1	QL
<i>capsaicin hp</i>	Tier 1	QL
<i>capsaicin pain relief</i>	Tier 1	QL
<i>CAPZASIN-HP (capsaicin)</i>	Tier 2	QL
<i>capzix</i>	Tier 1	QL
<i>CAREPOINT POLY HUB NEEDLE 25G X 5/8"</i>	Tier 2	QL
<i>CAREPOINT SAFETY 1ST NEEDLE 25G X 5/8"</i>	Tier 2	QL
<i>CARETOUCH HYPODERMIC NEEDLE 25G X 5/8" (needle (disp))</i>	Tier 2	QL
<i>CASTIVA WARMING (capsaicin)</i>	Tier 2	QL
<i>CAYA (diaphragm arc-spring)</i>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<b>CENTRUM FLAVOR BURST KIDS (pediatric multivit-minerals)</b>	Tier 2	QL
<b>CENTRUM KIDS (pediatric multivit-minerals)</b>	Tier 2	QL
<b>childrens aspirin oral tablet chewable 81 mg</b>	Tier 1	QL
<b>c-lax laxative</b>	Tier 1	QL
<b>clearskin</b>	Tier 1	
<b>COMIRNATY (covid-19 mrna virus vaccine)</b>	Tier 2	QL
<b>CONDOMS</b>	Tier 2	QL
<b>COOL MIST HUMIDIFER</b>	Tier 2	QL
<b>COOL MIST HUMIDIFIER</b>	Tier 2	QL
<b>corn &amp; callus remover</b>	Tier 1	
<b>corn and callus remover</b>	Tier 1	
<b>daily acne wash</b>	Tier 1	
<b>darunavir</b>	Tier 1	QL
<b>DERMELEVE ADVANCED FORMULA (aluminum acetate)</b>	Tier 2	
<b>DEXCOM G6 TRANSMITTER (continuous glucose transmitter)</b>	Tier 2	PA; QL
<b>double antibiotic external ointment 500-10000 unit/gm</b>	Tier 1	
<b>DROPSAFE ALCOHOL PREP (alcohol swabs)</b>	Tier 2	QL
<b>DUREX EXTRA SENSITIVE THIN (condoms latex lubricated)</b>	Tier 2	QL
<b>EASIVENT (spacer/aero-holding chambers)</b>	Tier 2	QL
<b>EASIVENT MASK LARGE (spacer/aero-holding chambers)</b>	Tier 2	QL
<b>EASIVENT MASK MEDIUM (spacer/aero-holding chambers)</b>	Tier 2	QL
<b>EASIVENT MASK SMALL (spacer/aero-holding chambers)</b>	Tier 2	QL
<b>enteric aspirin</b>	Tier 1	QL
<b>EX-LAX ULTRA (bisacodyl)</b>	Tier 2	QL
<b>fast relief laxative</b>	Tier 1	QL
<b>FLEET BISACODYL (bisacodyl)</b>	Tier 2	QL
<b>FLINTSTONES COMPLETE ORAL TABLET CHEWABLE (pediatric multivit-minerals)</b>	Tier 2	QL
<b>FLINTSTONES GUMMIES-IMMUNITY (pediatric multivit-minerals)</b>	Tier 2	QL
<b>FLINTSTONES-IMMUNITY SUPPORT (pediatric multivit-minerals)</b>	Tier 2	QL
<b>folic acid oral tablet 1 mg, 800 mcg</b>	Tier 1	QL
<b>folic acid oral tablet 400 mcg</b>	Tier 1	
<b>foot &amp; sneaker</b>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>ft antifungal external cream 1 %</i>	Tier 1	QL
<i>ft aspirin</i>	Tier 1	QL
<i>ft aspirin low dose</i>	Tier 1	QL
<i>ft enteric coated aspirin</i>	Tier 1	QL
<i>ft gentle laxative</i>	Tier 1	QL
<i>ft laxative</i>	Tier 1	QL
<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>gummy dinos</i>	Tier 1	QL
<i>gummy multivitamin kids</i>	Tier 1	QL
<i>HADLIMA (adalimumab-bwwd)</i>	Tier 2	PA; SP; QL
<i>HADLIMA PUSH TOUCH (adalimumab-bwwd)</i>	Tier 2	PA; SP; QL
<i>h-e-b aspirin</i>	Tier 1	QL
<i>hydrocodone bit-homatrop mbr</i>	Tier 1	QL; AL
<i>hydromet</i>	Tier 1	QL; AL
<i>hyoscyamine sulfate oral</i>	Tier 1	QL
<i>hyoscyamine sulfate sl sublingual tablet sublingual 0.125 mg</i>	Tier 1	QL
<i>hyoscyamine sulfate sublingual</i>	Tier 1	QL
<i>hyosyne</i>	Tier 1	QL
<i>HYRIMOZ-CROHNS/UC STARTER (adalimumab-adaz)</i>	Tier 2	PA; SP; QL
<i>INSPIREASE (spacer/aero-holding chambers)</i>	Tier 2	QL
<i>INSPIREASE RESERVOIR BAGS (spacer/aero-hold chamber bags)</i>	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
<i>liquid corn &amp; callus rem</i>	Tier 1	
<i>liquid wart remover</i>	Tier 1	
<i>liquid wart remover max st</i>	Tier 1	
<i>magnesium oxide oral tablet 400 mg, 420 mg</i>	Tier 1	
<i>MAOX (magnesium oxide)</i>	Tier 2	
<i>MASK VORTEX/CHILDIFROG (spacer/aero-hold chamber mask)</i>	Tier 2	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>MASK VORTEX/TODDLER/LADYBUG (spacer/aero-hold chamber mask)</b>	Tier 2	QL
<b>medicated spot</b>	Tier 1	
<b>medi-first aspirin</b>	Tier 1	QL
<b>medique aspirin</b>	Tier 1	QL
<b>mm aspirin</b>	Tier 1	QL
<b>MODERNA COVID-19 VAC 6M-11Y (covid-19 mrna virus vaccine)</b>	Tier 2	QL
<b>MOUNJARO (tirzepatide)</b>	Tier 2	PA; QL
<b>NEODOT THERMOMETER</b>	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>PANOXYL (benzoyl peroxide)</b>	Tier 2	
<b>PENBRAYA (mening acyw(tet conj)-b(rcmb))</b>	Tier 2	QL
<b>PFIZER COVID-19 VAC-TRIS 5-11Y (covid-19 mrna virus vaccine)</b>	Tier 2	QL
<b>PFIZER COVID-19 VAC-TRIS 6M-4Y</b>	Tier 2	QL
<b>poly bacitracin</b>	Tier 1	
<b>POLYSPORIN (bacitracin-polymyxin b)</b>	Tier 2	
<b>PREZISTA ORAL SUSPENSION (darunavir)</b>	Tier 2	QL
<b>PREZISTA ORAL TABLET 150 MG, 75 MG (darunavir)</b>	Tier 2	QL
<b>PRO-CRITIC</b>	Tier 2	
<b>scalp relief external liquid 3 %</b>	Tier 1	
<b>sodium sulfacetamide wash</b>	Tier 1	
<b>SPIKEVAX (covid-19 mrna virus vaccine)</b>	Tier 2	QL
<b>ST JOSEPH LOW DOSE ORAL TABLET CHEWABLE (aspirin)</b>	Tier 2	QL
<b>STRIVE DUAL ZONE PEAK FLOW MTR (peak flow meter)</b>	Tier 2	QL
<b>sulfacetamide sodium external</b>	Tier 1	
<b>SUNLENCA ORAL (lenacapavir sodium)</b>	Tier 2	QL; AL
<b>sure result sr relief</b>	Tier 1	QL
<b>the magic bullet</b>	Tier 1	QL

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<b>TINACTIN EXTERNAL CREAM (tolnaftate)</b>	Tier 2	QL
<i>tolnaftate antifungal external cream</i>	Tier 1	QL
<i>tolnaftate external cream</i>	Tier 1	QL
<i>tolnaftate external powder</i>	Tier 1	
TRUE FOLIC ACID ORAL TABLET 1 MG	Tier 2	QL
TRUE FOLIC ACID ORAL TABLET 400 MCG	Tier 2	
VAPORIZER WARM STEAM	Tier 2	QL
<b>VAXELIS (dtap-ipv-hib-hepatitis b recmb)</b>	Tier 2	QL
<i>vitachew multiple vitamin</i>	Tier 1	QL
<i>wart remover external liquid 17 %</i>	Tier 1	
<i>wart remover maximum strength external liquid</i>	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
<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
<i>womans laxative</i>	Tier 1	QL
<i>womens gentle laxative</i>	Tier 1	QL
<i>womens laxative</i>	Tier 1	QL
<b>ZOSTRIX HP (capsaicin)</b>	Tier 2	QL
<b>Molecular Target Inhibitors - Chemotherapy Agents</b>		
<b>Antineoplastics - Drugs to Treat Cancer</b>		
<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>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>gefitinib</b>	Tier 1	PA; SP; QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>GILOTRIF (afatinib dimaleate)</i>	Tier 2	PA; SP; QL
<i>ICLUSIG ORAL TABLET 15 MG, 45 MG (ponatinib hcl)</i>	Tier 2	PA; SP; QL
<i>imatinib mesylate</i>	Tier 1	PA; SP; QL
<i>IMBRUVICA ORAL CAPSULE (ibrutinib)</i>	Tier 2	PA; SP; QL
<i>IMBRUVICA ORAL SUSPENSION (ibrutinib)</i>	Tier 2	SP; QL
<i>IMBRUVICA ORAL TABLET (ibrutinib)</i>	Tier 2	PA; SP; QL
<i>INLYTA (axitinib)</i>	Tier 2	PA; SP; QL
<i>lapatinib ditosylate</i>	Tier 1	PA; SP; QL
<i>LENVIMA (10 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (12 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (14 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (18 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (20 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (24 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (4 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>LENVIMA (8 MG DAILY DOSE) (lenvatinib mesylate)</i>	Tier 2	PA; SP; QL
<i>pazopanib hcl</i>	Tier 1	PA; SP; QL
<i>SPRYCEL (dasatinib)</i>	Tier 2	PA; SP; QL
<i>TASIGNA (nilotinib hcl)</i>	Tier 2	PA; SP; QL
<i>TURALIO (pexidartinib hcl)</i>	Tier 2	PA; SP; QL; AL
<i>XALKORI (crizotinib)</i>	Tier 2	PA; SP; QL
<b>Ophthalmic Agents</b>		
<b>Ophthalmic Prostaglandin and Prostanamide Analogs</b>		
<i>latanoprost ophthalmic</i>	Tier 1	QL
<b>Ophthalmic Agents, Other</b>		
<i>altafrin</i>	Tier 1	
<i>atropine sulfate ophthalmic ointment</i>	Tier 1	
<i>atropine sulfate ophthalmic solution 1 %</i>	Tier 1	QL
<i>cyclopentolate hcl ophthalmic</i>	Tier 1	QL
<i>CYSTARAN (cysteamine hcl)</i>	Tier 2	DX2RX; SP; QL
<i>dorzolamide hcl-timolol mal</i>	Tier 1	QL
<i>neomycin-polymyxin-dexameth ophthalmic ointment</i>	Tier 1	QL
<i>neomycin-polymyxin-dexameth ophthalmic suspension 3.5-10000-0.1</i>	Tier 1	QL
<i>phenylephrine hcl ophthalmic</i>	Tier 1	
<i>sulfacetamide-prednisolone</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<b>TOBRADEX (tobramycin-dexamethasone)</b>	Tier 2	QL
<i>tobramycin-dexamethasone</i>	Tier 1	QL
<b>XIIDRA (lifitegrast)</b>	Tier 2	PA; QL
<b>Ophthalmic Anti-allergy Agents</b>		
<i>azelastine hcl ophthalmic</i>	Tier 1	ST
<i>cromolyn sodium ophthalmic</i>	Tier 1	QL
<i>olopatadine hcl ophthalmic</i>	Tier 1	QL
<b>PATADAY OPHTHALMIC SOLUTION 0.1 %, 0.2 % (olopatadine hcl)</b>	Tier 2	QL
<b>Ophthalmic Anti-Infectives</b>		
<i>bacitracin ophthalmic</i>	Tier 1	QL
<i>bacitracin-polymyxin b</i>	Tier 1	QL
<i>ciprofloxacin hcl ophthalmic</i>	Tier 1	QL
<i>erythromycin ophthalmic</i>	Tier 1	QL
<i>gentamicin sulfate ophthalmic</i>	Tier 1	QL
<i>moxifloxacin hcl (2x day)</i>	Tier 1	QL
<i>moxifloxacin hcl 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
PREDNISOLONE ACETATE P-F	Tier 2	QL
<i>prednisolone sodium phosphate ophthalmic</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<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 solution 0.15 %, 0.2 %</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
<i>PHOSPHOLINE IODIDE (echothiophate iodide)</i>	Tier 2	
<i>pilocarpine hcl ophthalmic</i>	Tier 1	
<b>Ophthalmic Agents - Drugs to Treat Eye Conditions</b>		
<b>Ophthalmic Agents, Other - Miscellaneous Eye Drugs</b>		
<i>altachlore ophthalmic ointment</i>	Tier 1	
<i>altachlore ophthalmic solution</i>	Tier 1	QL
<i>altalube</i>	Tier 1	QL
<i>artificial tears ophthalmic solution</i>	Tier 1	
<i>astringent eye drops</i>	Tier 1	QL
<i>BIOLLE TEARS (carboxymethylcellulose sodium)</i>	Tier 2	
<i>BION TEARS PF (dextran 70-hypromellose)</i>	Tier 2	
<i>carboxymethylcellulose sodium ophthalmic solution</i>	Tier 1	QL
<i>dry-eye relief nighttime</i>	Tier 1	QL
<i>eye drops adv relief</i>	Tier 1	QL
<i>eye drops advanced relief</i>	Tier 1	QL
<i>eye drops long lasting</i>	Tier 1	QL
<i>eye drops ophthalmic solution 0.05 %</i>	Tier 1	
<i>eye drops ophthalmic solution 0.05-0.1-1-1 %, 0.05-0.25 %</i>	Tier 1	QL
<i>eye irritation relief drops</i>	Tier 1	QL
<i>eye lubricant</i>	Tier 1	QL
<i>eye lubricant nighttime</i>	Tier 1	QL
<i>for sty relief</i>	Tier 1	QL
<i>ft eye drops</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>ft lubricant eye drops ophthalmic solution 0.5 %</i>	Tier 1	
<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
<i>lubricant drops fast act</i>	Tier 1	QL
<i>lubricant drops ophthalmic gel 0.25-0.3 %</i>	Tier 1	QL
<i>lubricant drops ophthalmic solution</i>	Tier 1	QL
<i>lubricant eye drops (pf) ophthalmic solution 0.4-0.3 %</i>	Tier 1	QL
<i>lubricant eye drops (pf) ophthalmic solution 0.5 %</i>	Tier 1	
<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 pm</i>	Tier 1	QL
<i>lubricating eye drop</i>	Tier 1	
<i>lubricating eye drops</i>	Tier 1	QL
<i>lubricating eyelovernight</i>	Tier 1	QL
<i>lubricating plus eye drops</i>	Tier 1	
<i>lubricating plus ophthalmic solution 0.5 %</i>	Tier 1	
<i>lubricating plus pf</i>	Tier 1	
<i>lubricating tears ophthalmic solution 0.4-0.3 %</i>	Tier 1	QL
<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>nighttime relief lub eye</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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
SENTIA	Tier 2	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
<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
<i>ultra fresh</i>	Tier 1	QL
<i>ultra fresh pm</i>	Tier 1	QL
<i>ultra lubricant drop</i>	Tier 1	QL
<i>ultra lubricating eye drops</i>	Tier 1	QL
<i>ultra lubricating eye drops pf</i>	Tier 1	QL
VENTIVA TEARS	Tier 2	QL
<b>Ophthalmic Anti-allergy Agents - Allergy, Infection and Inflammation Drugs</b>		
<b>NAPHCON-A (naphazoline-pheniramine)</b>	Tier 2	
<b>VISINE (naphazoline-pheniramine)</b>	Tier 2	

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Drug Name	Drug Tier	Notes
<b>Ophthalmic Anti-Inflammatories - Allergy, Infection and Inflammation Drugs</b>		
<i>ALAWAY (ketotifen fumarate)</i>	Tier 2	QL
<i>ALAWAY CHILDRENS ALLERGY (ketotifen fumarate)</i>	Tier 2	QL
<i>allergy eye drops</i>	Tier 1	QL
<i>eye itch relief ophthalmic solution 0.035 %</i>	Tier 1	QL
<i>ketotifen fumarate ophthalmic</i>	Tier 1	QL
<i>ZADITOR (ketotifen fumarate)</i>	Tier 2	QL
<b>Otic Agents</b>		
<i>acetic acid otic</i>	Tier 1	QL
<i>ciprofloxacin-dexamethasone</i>	Tier 1	DX2RX; QL
<i>hydrocortisone-acetic acid</i>	Tier 1	QL
<i>neomycin-polymyxin-hc otic</i>	Tier 1	QL
<i>ofloxacin otic</i>	Tier 1	QL
<b>Otic Agents - Drugs to Treat Ear Conditions</b>		
<b>Otic Agents - Drugs for the Ear</b>		
<i>CLEARCANAL EARWAX SOFTENER (carbamide peroxide)</i>	Tier 2	
<i>CLINERE EARWAX REMOVAL KIT OTIC SOLUTION (carbamide peroxide)</i>	Tier 2	
<i>ear drops</i>	Tier 1	
<i>ear wax kit</i>	Tier 1	
<i>ear wax removal</i>	Tier 1	
<i>ear wax removal system</i>	Tier 1	
<i>earwax removal drops</i>	Tier 1	
<i>earwax removal kit otic solution 6.5 %</i>	Tier 1	
<i>earwax removal otic solution 6.5 %</i>	Tier 1	
<i>ft earwax removal</i>	Tier 1	
<i>ft 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 medicine</i>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<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 reliefindoor/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
<b>BENADRYL ALLERGY ULTRATABS (diphenhydramine hcl)</b>	Tier 2	QL
<i>cetirizine allergy relief</i>	Tier 1	QL
<i>cetirizine hcl oral solution</i>	Tier 1	QL
<i>cetirizine hcl oral tablet</i>	Tier 1	QL
<i>childrens allergy oral liquid 12.5 mg/5ml</i>	Tier 1	QL
<i>clemastine fumarate oral tablet</i>	Tier 1	QL
<i>complete allergy</i>	Tier 1	QL
<i>complete allergy medicine</i>	Tier 1	QL
<i>complete allergy medicine oral capsule</i>	Tier 1	QL
<i>complete allergy relief</i>	Tier 1	QL
<i>cyproheptadine hcl oral</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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>diphenhydramine hcl childrens</b>	Tier 1	QL
<b>diphenhydramine hcl oral</b>	Tier 1	QL
<b>ft all day allergy</b>	Tier 1	QL
<b>ft all day allergy 24 hour</b>	Tier 1	QL
<b>ft allergy relief childrens oral liquid</b>	Tier 1	QL
<b>ft allergy relief oral capsule</b>	Tier 1	QL
<b>ft allergy relief oral tablet 25 mg</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>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 (mometasone furoate)</b>	Tier 2	PA; Members >= 8 years of age will require PA  Available for an extended day(s) supply; QL
<b>ASMANEX HFA INHALATION AEROSOL 200 MCG/ACT (mometasone furoate)</b>	Tier 2	PA; Members >= 8 years of age will require PA  Available for an extended day(s) supply; QL; AL

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Drug Name	Drug Tier	Notes
<b>ASMANEX HFA INHALATION AEROSOL 50 MCG/ACT (mometasone furoate)</b>	Tier 2	PA; Members >= 8 years of age will require PA; QL
<b>budesonide inhalation</b>	Tier 1	Members >= 5 years of age will require PA  Available for an extended day(s) supply; QL; AL
FLUTICASONE PROPIONATE HFA	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/lact inhalation</b>	Tier 1	QL
ALBUTEROL SULFATE HFA AEROSOL SOLUTION 108 (90 BASE) MCG/ACT INHALATION	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 1	QL
ALBUTEROL SULFATE NEBULIZATION SOLUTION (5 MG/ML) 0.5% INHALATION	Tier 2	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>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

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b>ORKAMBI ORAL TABLET (lumacaftor-ivacaftor)</b>	Tier 2	PA; SP; QL
<b>PULMOZYME (dornase alfa)</b>	Tier 2	DX2RX; SP; QL
<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 ORAL TABLET THERAPY PACK (elexacaftor-tezacaftor-ivacaft)</b>	Tier 2	PA; SP; QL
<b>TRIKAFTA ORAL THERAPY PACK (elexacaftor-tezacaftor-ivacaft)</b>	Tier 2	PA; SP; QL; AL
<b>Mast Cell Stabilizers</b>		
<b>cromolyn sodium inhalation</b>	Tier 1	QL
<b>Phosphodiesterase Inhibitors, Airways Disease</b>		
<b>elixophyllin</b>	Tier 1	QL
<b>THEO-24 (theophylline)</b>	Tier 2	
<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>theophylline oral</b>	Tier 1	QL
<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>OFEV (nintedanib esylate)</b>	Tier 2	PA; SP; QL
<b>pirfenidone oral capsule</b>	Tier 1	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

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Drug Name	Drug Tier	Notes
<b>NUCALA SUBCUTANEOUS SOLUTION PREFILLED SYRINGE (mepolizumab)</b>	Tier 2	PA; SP; QL
<i>promethazine vc</i>	Tier 1	QL; AL
<b>Respiratory Tract/Pulmonary Agents - Drugs to Treat Allergies, Cough, Cold and Lung Conditions</b>		
<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	
<i>altamist spray</i>	Tier 1	
<i>altarussin</i>	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>BROMFED DM (pseudoeph-bromphen-dm)</b>	Tier 2	QL; AL
<b>BUCKLEYS CHEST CONGESTION (guaifenesin)</b>	Tier 2	QL; AL
<i>chest congestion relief child</i>	Tier 1	QL; AL
<i>chest congestion relief oral liquid</i>	Tier 1	QL; AL
<i>chest congestion relief oral tablet</i>	Tier 1	
<b>CORICIDIN HBP COUGH/COLD (chlorpheniramine-dm)</b>	Tier 2	AL
<i>cough &amp; cold</i>	Tier 1	AL
<i>cough &amp; cold hbp</i>	Tier 1	AL
<i>cough relief oral syrup 15 mg/5ml</i>	Tier 1	AL
<i>cough/cold hbp</i>	Tier 1	AL
<i>deep sea nasal spray</i>	Tier 1	
<i>ed bron gp</i>	Tier 1	AL
<i>ephrine nose drops</i>	Tier 1	
<i>ft chest congestion relief</i>	Tier 1	
<i>ft mucus relief 12hr oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>ft nasal decongestant pe</i>	Tier 1	
<i>ft tussin adult</i>	Tier 1	QL; AL
<i>geri-tussin oral liquid</i>	Tier 1	QL; AL
<i>guaifenesin er oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>guaifenesin oral liquid</i>	Tier 1	QL; AL
<i>guaifenesin oral tablet 400 mg</i>	Tier 1	
<b>MAX TUSSIN MUCUS &amp; CHEST CONG (guaifenesin)</b>	Tier 2	QL; AL
<i>maxi-tuss pe max</i>	Tier 1	AL

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Drug Name	Drug Tier	Notes
<i>medifin 400</i>	Tier 1	
<i>medifin mucus relief child</i>	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
<i>mucus er maximum str</i>	Tier 1	QL; AL
<i>mucus er oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>mucus extended release oral tablet extended release 12 hour 1200 mg</i>	Tier 1	QL; AL
<i>mucus relief 12 hour max st</i>	Tier 1	QL; AL
<i>mucus relief chest oral tablet 400 mg</i>	Tier 1	
<i>mucus relief childrens oral liquid 100 mg/5ml</i>	Tier 1	QL; AL
<i>mucus relief er</i>	Tier 1	QL; AL
<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	
<b>NASAL MOIST NASAL SOLUTION (saline)</b>	Tier 2	
<i>nasal moisturizing spray</i>	Tier 1	
<i>nasal spray fast acting</i>	Tier 1	
<i>nasal spray nasal solution 1 %</i>	Tier 1	
<i>nasal spray saline</i>	Tier 1	
<b>NEO-SYNEPHRINE COLD/ALLERGY EXT (phenylephrine hcl)</b>	Tier 2	
<i>non-pseudo sinus decongestant</i>	Tier 1	
<i>nose drops extstrength</i>	Tier 1	
<i>nose drops nasal solution 1 %</i>	Tier 1	
<b>OCEAN FOR KIDS (saline)</b>	Tier 2	
<b>OCEAN NASAL SPRAY (saline)</b>	Tier 2	
<i>pharbinex</i>	Tier 1	

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Drug Name	Drug Tier	Notes
<i>phenylephrine hcl oral</i>	Tier 1	
<i>pseudoephedrine-bromphen-dm</i>	Tier 1	QL; AL
<i>refenesen 400</i>	Tier 1	
<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 extra strength</i>	Tier 1	
<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 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 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>		
<b>12 hour allergy-d</b>	Tier 1	QL; AL
<b>all day allergy d</b>	Tier 1	QL; AL
<b>all day allergy-d oral tablet extended release 12 hour 5-120 mg</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 oral tablet extended release 12 hour 5-120 mg</b>	Tier 1	QL; AL

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Drug Name	Drug Tier	Notes
<i>allergy reliefnasal 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
<i>ft all day allergy-d</i>	Tier 1	QL; AL
<i>ft tussin cf adult</i>	Tier 1	AL
<i>nohist-lq</i>	Tier 1	QL; AL
ROBAFEN CF MULTI-SYMPTOM COLD	Tier 2	AL
<b>ROBITUSSIN PEAK COLD MULTI-SYM (phenylephrine-dm-gg)</b>	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
<b>ZYRTEC-D ALLERGY &amp; CONGESTION (cetirizine-pseudoephedrine)</b>	Tier 2	QL; AL
<b>ZYRTEC-D ALLERGY &amp; SINUS (cetirizine-pseudoephedrine)</b>	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
<b>ALLEGRA ALLERGY (fexofenadine hcl)</b>	Tier 2	QL
<b>ALLEGRA HIVES 24HR (fexofenadine hcl)</b>	Tier 2	QL
<i>allerclear</i>	Tier 1	QL
<i>aller-ease oral tablet 180 mg</i>	Tier 1	QL
<i>aller-fex</i>	Tier 1	QL
<i>allerg rel child (lorat)</i>	Tier 1	QL
<i>allerg relief child (lorat)</i>	Tier 1	QL
<i>allergy 24-hr</i>	Tier 1	QL
<i>allergy childrens oral solution</i>	Tier 1	QL
<i>allergy rel child (loratadine)</i>	Tier 1	QL
<i>allergy relief (loratadine) oral tablet</i>	Tier 1	QL
<i>allergy relief child</i>	Tier 1	QL
<i>allergy relief childrens oral solution 5 mg/5ml</i>	Tier 1	QL

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Drug Name	Drug Tier	Notes
<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 indoor/outdoor oral tablet 180 mg</i>	Tier 1	QL
<i>childrens loratadine</i>	Tier 1	QL
<b>CLARITIN ALLERGY CHILDRENS (loratadine)</b>	Tier 2	QL
<b>CLARITIN ORAL TABLET (loratadine)</b>	Tier 2	QL
<b>CLARITIN REDITABS JUNIORS (loratadine)</b>	Tier 2	QL
<b>CLARITIN REDITABS ORAL TABLET DISPERSIBLE 10 MG (loratadine)</b>	Tier 2	QL
<i>ed chlorped jr</i>	Tier 1	QL
<i>fexofenadine hcl</i>	Tier 1	QL
<i>fexofenadine hcl oral</i>	Tier 1	QL
<i>ft all day allergy relief</i>	Tier 1	QL
<i>ft allergy childrens</i>	Tier 1	QL
<i>ft allergy relief 12 hour</i>	Tier 1	QL
<i>ft allergy relief 24 hour</i>	Tier 1	QL
<i>loradamed</i>	Tier 1	QL
<i>loratadine allergy relief oral tablet 10 mg</i>	Tier 1	QL
<i>loratadine allergy relief oral tablet dispersible 10 mg</i>	Tier 1	QL
<i>loratadine childrens oral solution</i>	Tier 1	QL
<i>loratadine oral solution</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>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/lact</i>	Tier 1	QL
<i>nasal allergy spray</i>	Tier 1	QL
<i>triamcinolone acetonide nasal</i>	Tier 1	QL
<b>Bronchodilators, Sympathomimetic - Asthma/Lung Drugs</b>		
<b>ANORO ELLIPTA (umeclidinium-vilanterol)</b>	Tier 2	QL

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Drug Name	Drug Tier	Notes
<i>breyna</i>	Tier 1	PA; QL
<i>budesonide-formoterol fumarate</i>	Tier 1	PA; ST; QL
<b>COMBIVENT RESPIMAT (ipratropium-albuterol)</b>	Tier 2	QL
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 100-25 MCG/ACT	Tier 2	PA; QL
FLUTICASONE FUROATE-VILANTEROL INHALATION AEROSOL POWDER BREATH ACTIVATED 200-25 MCG/ACT	Tier 2	PA; QL; AL
<b>fluticasone-salmeterol inhalation aerosol powder breath activated 100-50 mcg/act, 250-50 mcg/act, 500-50 mcg/act</b>	Tier 1	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 inhub</i>	Tier 1	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
<b>AFRIN ALLERGY SINUS (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN NODRIP CHILDRENS (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN NODRIP EXTRA MOISTURE (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN NODRIP NIGHT (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN NODRIP ORIGINAL (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN NODRIP SEVERE CONGEST (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN ORIGINAL (oxymetazoline hcl)</b>	Tier 2	
<b>AFRIN SEVERE CONGESTION (oxymetazoline hcl)</b>	Tier 2	
<b>ALAVERT ALLERGY/SINUS (loratadine-pseudoephedrine)</b>	Tier 2	QL; AL
<i>allerclear d-12hr</i>	Tier 1	QL; AL
<i>allerclear d-24hr</i>	Tier 1	QL; AL
<b>allergy &amp; congestion oral tablet extended release 24 hour 10-240 mg</b>	Tier 1	QL; AL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>allergy &amp; congestion relief</i>	Tier 1	QL; AL
<i>allergy nasal mist no drip</i>	Tier 1	
<i>allergy relief d-12</i>	Tier 1	QL; AL
<i>allergy relief d-24</i>	Tier 1	QL; AL
<i>allergy relief nasal decong</i>	Tier 1	QL; AL
<i>allergy reliefnasal decong</i>	Tier 1	QL; AL
<i>allergy reliefnasal decongest oral tablet extended release 24 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>allergy relief-d oral tablet extended release 24 hour 10-240 mg</i>	Tier 1	QL; AL
<i>allergy relief-d12</i>	Tier 1	QL; AL
<i>allergy/congestion relief</i>	Tier 1	QL; AL
<i>altarussin dm</i>	Tier 1	QL; AL
<i>anefrin spray</i>	Tier 1	
<i>APRODINE (triprolidine-pseudoephedrine)</i>	Tier 2	AL
<i>benzonatate oral capsule 100 mg, 200 mg</i>	Tier 1	QL; AL
<i>chest congest/cough child</i>	Tier 1	
<i>chest congestion relief dm oral syrup</i>	Tier 1	QL; AL
<i>childrens cold &amp; allergy</i>	Tier 1	AL
<i>childrens cough</i>	Tier 1	
<i>childrens mucus relief cough</i>	Tier 1	
<i>CLARITIN-D 12 HOUR (loratadine-pseudoephedrine)</i>	Tier 2	QL; AL
<i>CLARITIN-D 24 HOUR (loratadine-pseudoephedrine)</i>	Tier 2	QL; AL
<i>cold &amp; allergy</i>	Tier 1	AL
<i>cold &amp; allergy childrens oral elixir 1-15 mg/5ml</i>	Tier 1	AL
<i>cold &amp; cough childrens oral liquid 1-5-2.5 mg/5ml, 2.5-1-5 mg/5ml</i>	Tier 1	QL; AL
<i>cold &amp; sinus</i>	Tier 1	AL
<i>cold &amp; sinus relief oral tablet 30-200 mg</i>	Tier 1	AL
<i>cold/cough</i>	Tier 1	QL; AL
<i>cold/cough childrens</i>	Tier 1	QL; AL
<i>cold/cough dm childrens oral liquid 2.5-1-5 mg/5ml</i>	Tier 1	QL; AL
<i>cold/cough dm oral liquid 2.5-1-5 mg/5ml</i>	Tier 1	QL; AL
<i>cough &amp; chest congestion</i>	Tier 1	
<i>cough childrens</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>cough dm childrens oral suspension extended release 30 mg/5ml</i>	Tier 1	QL; AL
<i>cough dm er</i>	Tier 1	QL; AL
<i>cough dm oral suspension extended release 30 mg/5ml</i>	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
<i>dextromethorphan polistirex er</i>	Tier 1	QL; AL
<i>dextromethorphan-guaifenesin oral liquid 5-100 mg/5ml</i>	Tier 1	
<i>dextromethorphan-guaifenesin oral syrup</i>	Tier 1	QL; AL
<i>dibromm childrens cold/cgh</i>	Tier 1	QL; AL
<i>dimaphen dm cold/cough</i>	Tier 1	QL; AL
<i>dm maximum adult</i>	Tier 1	
<b>ENDACOF-DM (phenylephrine-bromphen-dm)</b>	Tier 2	QL; AL
<i>ft 12 hour cough relief</i>	Tier 1	QL; AL
<i>ft allergy relief-d</i>	Tier 1	QL; AL
<i>ft mucus relief d 12 hour</i>	Tier 1	AL
<i>ft mucus relief dm oral tablet extended release 12 hour 30-600 mg</i>	Tier 1	QL; AL
<i>ft nasal decongestant max str oral tablet</i>	Tier 1	QL
<i>ft nasal decongestant max str oral tablet extended release 12 hour</i>	Tier 1	
<i>ft nasal spray</i>	Tier 1	
<i>ft tussin dm max adult</i>	Tier 1	
<i>g tussin ac</i>	Tier 1	QL; AL
<i>geri-tussin dm oral syrup</i>	Tier 1	QL; AL
<i>giltuss severe sinus</i>	Tier 1	
<i>guaifenesin ac oral syrup 100-10 mg/5ml</i>	Tier 1	QL; AL
<i>guaifenesin-codeine</i>	Tier 1	QL; AL
<i>guaifenesin-dm oral syrup</i>	Tier 1	QL; AL
<b>HYPERSAL INHALATION NEBULIZATION SOLUTION 7 % (sodium chloride)</b>	Tier 2	
<i>ibuprofen cold &amp; sinus</i>	Tier 1	AL

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Drug Name	Drug Tier	Notes
<i>ibuprofen cold/sinus oral tablet 30-200 mg</i>	Tier 1	AL
<i>ibu-profen cold/sinus oral tablet 30-200 mg</i>	Tier 1	AL
<i>long acting nasal spray</i>	Tier 1	
<i>long lasting nasal spray</i>	Tier 1	
<i>lorata-d</i>	Tier 1	QL; AL
<i>lorata-dine d</i>	Tier 1	QL; AL
<i>loratadine d 12hr</i>	Tier 1	QL; AL
<i>loratadine-d</i>	Tier 1	QL; AL
<i>loratadine-d 12hr</i>	Tier 1	QL; AL
<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>meijer allergy relief-d</i>	Tier 1	QL; AL
<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/ALLERGY (oxymetazoline hcl)</b>	Tier 2	
<i>mucus &amp; cough relief child</i>	Tier 1	
<i>mucus d</i>	Tier 1	AL
<i>mucus d extended release</i>	Tier 1	AL
<i>mucus d max strength</i>	Tier 1	AL
<i>mucus dm</i>	Tier 1	QL; AL
<i>mucus dm extended release oral tablet extended release 12 hour 30-600 mg</i>	Tier 1	QL; AL
<i>mucus relief cough childrens</i>	Tier 1	
<i>mucus relief d max strength</i>	Tier 1	AL
<i>mucus relief d oral tablet extended release 12 hour 120-1200 mg, 60-600 mg</i>	Tier 1	AL
<i>mucus relief dm max oral liquid 20-400 mg/20ml, 5-100 mg/5ml</i>	Tier 1	
<i>mucus relief dm oral liquid 20-400 mg/20ml</i>	Tier 1	

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<b><i>mucus relief dm oral tablet extended release 12 hour 30-600 mg</i></b>	Tier 1	QL; AL
<b><i>mucus-dm</i></b>	Tier 1	QL; AL
<b><i>nasal decongestant 12hr</i></b>	Tier 1	
<b><i>nasal decongestant max st</i></b>	Tier 1	QL
<b><i>nasal decongestant oral tablet 30 mg</i></b>	Tier 1	QL
<b><i>nasal decongestant oral tablet extended release 12 hour 120 mg</i></b>	Tier 1	
<b><i>nasal decongestant pe oral tablet 30 mg</i></b>	Tier 1	QL
<b><i>nasal decongestant spray</i></b>	Tier 1	
<b><i>nasal mist nasal solution</i></b>	Tier 1	
<b><i>nasal mist no drip</i></b>	Tier 1	
<b><i>nasal relief</i></b>	Tier 1	
<b><i>nasal spray 12 hour</i></b>	Tier 1	
<b><i>nasal spray extra moist</i></b>	Tier 1	
<b><i>nasal spray extra moisturizing</i></b>	Tier 1	
<b><i>nasal spray nasal solution 0.05 %</i></b>	Tier 1	
<b><i>nasal spray no drip</i></b>	Tier 1	
<b><i>nasal spray sinus</i></b>	Tier 1	
<b><i>NEBUSAL INHALATION NEBULIZATION SOLUTION 3 % (sodium chloride)</i></b>	Tier 2	
<b><i>no drip extra moisturizing</i></b>	Tier 1	
<b><i>no drip nasal relief</i></b>	Tier 1	
<b><i>no drip nasal spray</i></b>	Tier 1	
<b><i>no drip original 12 hours</i></b>	Tier 1	
<b><i>promethazine vclcodeine</i></b>	Tier 1	QL; AL
<b><i>promethazine-codeine oral solution</i></b>	Tier 1	QL; AL
<b><i>promethazine-dm</i></b>	Tier 1	QL; AL
<b><i>pseudoephedrine hcl 12 hr</i></b>	Tier 1	
<b><i>pseudoephedrine hcl er</i></b>	Tier 1	
<b><i>pseudoephedrine hcl oral tablet 30 mg</i></b>	Tier 1	QL
<b><i>pseudoephedrine-guaifenesin er</i></b>	Tier 1	AL
<b><i>PULMOSAL (sodium chloride)</i></b>	Tier 2	
<b><i>ROBITUSSIN 12 HOUR COUGH (dextromethorphan polistirex)</i></b>	Tier 2	QL; AL
<b><i>ROBITUSSIN 12 HOUR COUGH CHILD (dextromethorphan polistirex)</i></b>	Tier 2	QL; AL

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Drug Name	Drug Tier	Notes
<b>ROBITUSSIN COUGH+CHEST CONG DM ORAL LIQUID 20-400 MG/20ML (dextromethorphan-guaifenesin)</b>	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>sinus 12 hour</i>	Tier 1	
<i>sinus 12-hour</i>	Tier 1	
<i>sinus congestion max strength</i>	Tier 1	QL
<i>sinus nasal spray</i>	Tier 1	
<i>sodium chloride inhalation nebulization solution 0.9 %</i>	Tier 1	QL
<i>sodium chloride inhalation nebulization solution 10 %, 3 %, 7 %</i>	Tier 1	
<i>SUDAFED (pseudoephedrine hcl)</i>	Tier 2	QL
<i>SUDAFED SINUS CONGESTION (pseudoephedrine hcl)</i>	Tier 2	QL
<i>SUDAFED SINUS CONGESTION 12HR (pseudoephedrine hcl)</i>	Tier 2	
<i>sudogest 12 hour</i>	Tier 1	
<i>sudogest maximum strength</i>	Tier 1	QL
<i>sudogest oral tablet 30 mg</i>	Tier 1	QL
<i>suphedrine 12hour</i>	Tier 1	
<i>suphedrine maximum strength</i>	Tier 1	
<i>suphedrine oral tablet 30 mg</i>	Tier 1	QL
<i>suphedrine oral tablet extended release 12 hour 120 mg</i>	Tier 1	
<i>tussin cf oral liquid 30-10-100 mg/5ml</i>	Tier 1	
<i>tussin cough dm sugar free</i>	Tier 1	QL; AL
<i>tussin cough/ chest congest oral syrup 100-10 mg/5ml</i>	Tier 1	QL; AL
<i>tussin cough/ chest dm max oral liquid 10-200 mg/5ml</i>	Tier 1	AL
<i>tussin cough/ chest dm max oral liquid 20-400 mg/20ml</i>	Tier 1	
<i>tussin dm cough + chest oral liquid 20-400 mg/20ml</i>	Tier 1	
<i>tussin dm cough/ chest cong</i>	Tier 1	QL; AL
<i>tussin dm cough/ chest oral syrup 10-100 mg/5ml</i>	Tier 1	QL; AL
<i>tussin dm max adult</i>	Tier 1	
<i>tussin dm max daytime</i>	Tier 1	
<i>tussin dm max oral liquid 20-400 mg/20ml</i>	Tier 1	
<i>tussin dm max st</i>	Tier 1	
<i>tussin dm oral syrup 100-10 mg/5ml</i>	Tier 1	QL; AL

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Drug Name	Drug Tier	Notes
<b>Skeletal Muscle Relaxants</b>		
<i>chlorzoxazone oral tablet 250 mg, 500 mg</i>	Tier 1	QL
<i>cyclobenzaprine hcl oral tablet 10 mg, 5 mg</i>	Tier 1	QL
<i>methocarbamol oral</i>	Tier 1	QL
<i>orphenadrine citrate er</i>	Tier 1	QL
<b>Sleep Disorder Agents</b>		
<b>Sleep Promoting Agents</b>		
<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 er</i>	Tier 1	
<i>zolpidem tartrate oral tablet</i>	Tier 1	QL
<b>Wakefulness Promoting Agents</b>		
<i>armodafinil</i>	Tier 1	DX2RX; QL; AL
<i>modafinil oral</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>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/IFE (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</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

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Drug Name	Drug Tier	Notes
<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>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
<i>childrens chewablesliron</i>	Tier 1	QL
<i>childrens complete oral tablet chewable 18 mg</i>	Tier 1	QL
<i>childrens vitaminsliron</i>	Tier 1	QL
<i>daily multivitaminsliron</i>	Tier 1	QL
<i>effer-k oral tablet effervescent 25 meq</i>	Tier 1	QL
<i>ergocalciferol oral capsule</i>	Tier 1	QL
<b>FLINTSTONES PLUS EXTRA IRON (pediatric multivitamins-iron)</b>	Tier 2	QL
FOLAGENT DHA	Tier 2	
FOLAMED DHA	Tier 2	
<i>fruity c</i>	Tier 1	QL
<i>klor-conlef</i>	Tier 1	QL
<i>k-prime</i>	Tier 1	QL
<b>LIVITA ADULTS (multiple vitamins-minerals)</b>	Tier 2	QL
<i>lysiplex plus oral tablet</i>	Tier 1	QL
<b>MENATROL (multiple vitamins-minerals)</b>	Tier 2	
<i>multiple vitaminsliron</i>	Tier 1	QL
MULTIPRO	Tier 2	
<i>multivitamin infant &amp; toddler oral solution</i>	Tier 1	QL
<i>multi-vitaminliron</i>	Tier 1	QL
<i>nutrifac zx</i>	Tier 1	QL
<b>OBTREX (prenatal vit-dss-fe cbn-fa)</b>	Tier 2	
<b>OCUVEL (multiple vitamins-minerals)</b>	Tier 2	
<i>one-daily multi-vitaminliron</i>	Tier 1	QL
<i>one-dailyliron</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

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>POLY-VI-SOL (pediatric multiple vitamins)</b>	Tier 2	QL
POLY-VITE PEDIATRIC	Tier 2	QL
<b>prenatal gummy oral tablet chewable 0.4-113.5 mg</b>	Tier 1	
<b>stress formulaliron</b>	Tier 1	QL
SUPPORT	Tier 2	QL
TRUE VITAMIN C	Tier 2	QL
<b>v-c forte</b>	Tier 1	
<b>vic-forte</b>	Tier 1	
<b>vit clrose hips</b>	Tier 1	QL
<b>vita s forte</b>	Tier 1	QL
<b>vitacel</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 clacerola</b>	Tier 1	QL
<b>vitamin clrose hips oral tablet 1000 mg, 500 mg</b>	Tier 1	QL
<b>vitamin c-rose hips</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 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
TRUE VITAMIN B6 ORAL TABLET 100 MG, 25 MG, 50 MG	Tier 2	QL
TRUE VITAMIN E ORAL CAPSULE 180 MG	Tier 2	QL
<b>vitamin b1</b>	Tier 1	QL
<b>vitamin b-1 oral tablet 250 mg</b>	Tier 1	QL

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<b>Drug Name</b>	<b>Drug Tier</b>	<b>Notes</b>
<i>vitamin b-12 er oral tablet extended release 1000 mcg</i>	Tier 1	
<i>vitamin b12 oral tablet extended release 1000 mcg</i>	Tier 1	
<i>vitamin b-12 tr oral tablet extended release 1000 mcg</i>	Tier 1	
<i>vitamin b-6</i>	Tier 1	QL
<i>vitamin b-6 er</i>	Tier 1	QL
<i>vitamin e oral capsule 180 mg (400 unit)</i>	Tier 1	QL

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