



L.A. Care
PASC-SEIU

L.A. Care Health Plan

PASC-SEIU Formulary



Formulary is subject to change. All previous versions of the formulary are no longer in effect. You can view the most current drug list by going to our website at <http://www.lacare.org/members/getting-care/pharmacy-services>

For more details on available health care services, visit our website:
<http://www.lacare.org/members/welcome-la-care/member-documents/pasc-seiu-plan>

INTRODUCTION

Foreword

The L.A. Care Health Plan (L.A. Care) PASC-SEIU formulary is a preferred list of covered drugs, approved by the L.A. Care's Pharmacy Quality Oversight Committee. This formulary applies only to outpatient drugs and self-administered drugs. It does not apply to medications used in the inpatient setting or medical offices.

The formulary is a continually reviewed and revised list of preferred drugs based on safety, clinical efficacy, and cost-effectiveness. The formulary is updated on a monthly basis and is effective the first of every month. These updates may include, and are not limited to, the following: (i) removal of drugs and/or dosage forms, (ii) changes in tier placement of a drug that results in an increase in cost sharing, and (iii) any changes of utilization management restrictions, including any additions of these restrictions. Updated documents are available online at:

lacare.org/members/getting-care/pharmacy-services.

If you have questions about your pharmacy coverage, call the Customer Solutions Center at **1-844-854-7272 (TTY 711)**, available 24 hours a day, 7 days a week.

How to Use the Formulary

The formulary drug listing begins on Page 11. A prescription drug may be located by looking up the therapeutic category and class of the drug or the brand or generic name of the drug in the alphabetical index. If a generic equivalent for a brand name drug is not available or is not covered, the drug will not be separately listed by its generic name. Drugs available in generic formulations are listed by their generic names and its most common proprietary (branded) name is capitalized next to the generic name in parenthesis. Drugs that are only available in brand name formulations are listed in ALL CAPITAL letters.

The formulary can be searched by using the "Ctrl + F" function or the index. Drugs can be searched by the generic name, proprietary name, or therapeutic drug category.

The presence of a prescription drug on the formulary does not guarantee that a member will be prescribed that prescription drug by his or her prescribing provider for a particular medical condition.

Generic and Brand Name Medications

L.A. Care's PASC-SEIU Plan covers generic and brand name drugs. However, when available, Food and Drug Administration (FDA) approved generic drugs are to be used in all situations, regardless of the availability of a brand. Generic drugs generally cost less than brand name drugs. All drugs that are or become available generically are subject to review by L.A. Care's Pharmacy Quality Oversight Committee.

A prescriber may request a brand name product in lieu of an approved generic, if the prescriber determines that there is a documented medical need for the brand equivalent. This type of request for coverage may be made using the 'Medication Request Process' described on Page 7.

How Drugs Are Listed

Drugs are listed alphabetically by its brand and generic names in the therapeutic category and class to which it belongs.

The generic name of the brand name drug is included after the brand name in parenthesis and all ***bold and italicized lowercase*** letters.

If a generic equivalent for a brand name drug is available, and both the brand name and generic equivalents are covered, the generic drug will be listed separately from the brand name drug in all ***bold and italicized lowercase*** letters.

In the event a generic drug is marketed under a proprietary, trademark protected brand name, the brand name will be listed in all CAPITAL letters after the generic name in parentheses and regular typeface with first letter of each word capitalized. The description must include an example of a drug available both as a brand name drug and a generic equivalent to illustrate how such a drug is listed.

Non-Formulary Medications

Any drug not found in this formulary listing published by L.A. Care is considered a non-formulary drug.

Sometimes, the doctor may prescribe a drug that is not on the formulary. This will require that the doctor get authorization from L.A. Care. To decide if the non-formulary drug will be covered, L.A. Care may ask the doctor and/or pharmacist for more information. This type of request for coverage may be made using the 'Medication Request Process' described on Page 7.

L.A. Care will reply to the doctor and/or pharmacist within 24 hours for urgent requests or 72 hours for standard requests after getting the requested medical information. Urgent circumstances exist when a health condition may seriously jeopardize life, health, or the ability to regain maximum function or when undergoing a current course of treatment using a non-formulary drug.

L.A. Care will provide coverage pursuant to a non-urgent request for the duration of the prescription, including refills.

L.A. Care will provide coverage, including refills, pursuant to a request based on exigent circumstances for the duration of the exigency.

The doctor and/or pharmacist will let you know if the drug is approved. After approval, you can get the drug at a Plan Pharmacy. If the non-formulary drug is denied, you have the right to appeal. You can file a grievance or complaint relating to denial of a coverage request. Coverage documents provide more information on appeal rights and procedures.

Benefit Coverage and Limitations

This printed formulary does not provide information regarding the specific coverage and limitations an individual may have. The individual may have specific benefit inclusions, exclusions, and/or cost share which are not reflected in the formulary.

This formulary only applies to outpatient drugs and self-administered drugs. These would be considered to be covered under a member's outpatient drug benefit. This formulary does NOT apply to medications used in an inpatient setting or drugs that are not self-administered. These would be considered to be covered under a member's medical benefit.

Any specific questions regarding their coverage should be directed to the Customer Solutions Center at **1-844-854-7272** (TTY 711)

How to Find a Pharmacy

To find a pharmacy near you, visit the L.A. Care website at **lacare.org** to find a L.A. Care network pharmacy in your neighborhood. Click on each of the following:

1. For Members
2. Pharmacy Services
3. "Search Now" in the *Find a Pharmacy* tab

Be sure to show your L.A. Care Member ID card when you fill your prescriptions at the pharmacy.

Some medications are subject to limited distribution by the U.S. Food and Drug Administration or require special handling, provider coordination, or special education that cannot be provided at your local pharmacy. Antineoplastic and biologic agents are examples of such specialty medications and are identified in the formulary with special code SP (Specialty Pharmacy Availability), MSP (Mandatory Specialty Pharmacy), LMSP (Mandatory Lumicera Specialty Pharmacy), or KMSP (Mandatory Kroger Specialty Pharmacy). You may refer to the formulary by visiting L.A. Care's website **lacare.org/members/getting-care/pharmacy-services** for information on whether a medication must be filled at a specialty pharmacy.

Description of Coverage

L.A. Care will provide medically necessary drugs when prescribed by a licensed participating provider acting within the scope of his or her licensure and included on the L.A. Care drug formulary.

L.A. Care will provide non-formulary medications based on medical necessity. In cases where the formulary drug has a medical contraindication, a non-formulary drug will be provided. Non-formulary drugs need to be requested through a medication request process. If denied after the review, the request can be appealed through the L.A. Care Grievance and Appeals process and will be responded to within 30 days or within three days if necessary because of your medical condition.

Brand name drugs will not be provided as a plan benefit if FDA approved generic equivalents are available (unless such generic equivalents are medically contraindicated). All of the following will be provided, as medically necessary:

- Injectable medication (including insulin)
- Needles and syringes
- Diabetic supplies: insulin, insulin syringes, glucose test strips, lancets and lancet puncture devices, pen delivery systems, blood glucose monitors including monitors for the visually impaired, and ketone urine testing strips
- FDA-approved birth control pills/drugs and birth control devices on the L.A. Care formulary
- Emergency contraception
- Glucagon
- EpiPens
- Lancets and lancet puncture devices

How Much I Will Pay for My Drugs

The table below is a summary of your PASC-SEIU Plan covered pharmacy benefits:

COVERED SERVICES	MEMBER PAYS
30-day supply for covered generic drugs	\$5 per prescription
90-day supply of maintenance drugs — generic only	\$5 per prescription
Prescription drugs provided in an inpatient setting	No co-payment
Drugs administered in the doctor's office or in an outpatient facility	No co-payment
FDA-approved contraceptive drugs and devices	No co-payment
Respiratory Devices for the management and treatment of asthma	No co-payment

Note: The annual co-payment maximum amount for the PASC-SEIU program is \$1,000.

The annual copayment maximum is the highest total co-payment amount you are required to pay during one benefit year. All copayments count toward the annual maximum, including prescription drug copayments.

Restrictions on Medication Coverage

Certain covered drugs may have additional requirements or limits on coverage. These are denoted throughout the document using the following symbols:

SYMBOL	RESTRICTION	DESCRIPTION
CO	Carve-Out	Drugs carved out by the Department of Health Care Services
EXC	Exclusion	Plan exclusion
INF	Infertility	Infertility drugs
KMSP	Mandatory Kroger Specialty Pharmacy Program	All fills, including the initial fill MUST be dispensed at the specialty pharmacy provider of the plans choice
LD	Limited Distribution	Coverage is available through a limited distributor or limited number of distributors
LMSP	Mandatory Lumicera Specialty Pharmacy Program	All fills, including the initial fill MUST be dispensed at the specialty pharmacy provider of the plans choice
MSP	Mandatory Specialty Pharmacy Program	All fills, including the initial fill MUST be dispensed at the specialty pharmacy provider of the plans choice
NC	Not Covered	Drug that is non-formulary and will not be paid for by the plan without prior approval/prior authorization
OTC	Over the Counter	Coverage of OTC medication
PA	Prior Authorization	Requires specific physician request process
QL	Quantity Limit	Coverage may be limited to specific quantities per prescription and/or time period
RS	Restricted to Specialist	Coverage may be dependent on the specialty of the prescribing physician
SF	Split Fill	Limited to two 15-day fills per month for first 3 months
SMKG	Smoking Cessation	Coverage for the treatment of smoking cessation drugs, which may have specific restrictions
ST	Step Therapy	Coverage may require one or more "prerequisite" first step drugs to be tried before progressing to the second step drug
VAC	Vaccine Program	Coverage is available through a vaccine program

Please refer to the formulary listing beginning on Page 11 for details regarding specific agents.

Medication Request Process

Formulary Agents

- A. **Prior Authorization (PA):** These drugs require approval prior to being dispensed at a network pharmacy. Requests are reviewed with specific Prior Authorization guidelines. Each request will be reviewed on individual patient need. If the request does not meet the guidelines established by the Pharmacy & Therapeutics (P&T) Committee, the request will not be approved and alternative therapy may be recommended.
- B. **Quantity Limits (QL):** These drugs have quantity limits. If quantities exceeding the limit are necessary, an exception to coverage may be requested by the prescriber. Each request will be reviewed on individual patient need. Approval will be given if a documented medical need exists without compromising safety.
- C. **Step Therapy (ST):** These drugs require one or more first step drugs to be tried before progressing to the second step drug. If there is a medical need to use a second step drug without trying a first step drug, an exception to coverage may be requested by the prescriber. Each request will be reviewed on an individual patient need. If you have already tried and failed the preferred drug(s), or if you are already taking a drug that is subject to step therapy when you switch to an L.A. Care plan, you will not have to undergo step therapy and the drug will be approved for coverage when medically necessary.

Non-Formulary Agents

- A. Any drug not found on this list is considered non-formulary. Coverage for non-formulary agents may be requested by the prescriber. Each request will be reviewed on individual patient need. Approval will be given if a documented medical need exists.
- B. The 'Medication Request Process' is generally not available for drugs that are specifically excluded by benefit design. For benefit exclusions, refer to the 'General Exclusions' section below.

Please see lacare.org/providers/provider-resources/pharmacy-services/prior-authorizations for more information on the medication request process. A decision for approval or denial of the exception request or prior authorization can be made within 24 hours for urgent requests or 72 hours for standard requests. If we fail to respond within the appropriate time frames, the request is deemed granted.

Non-approved requests may be appealed. The prescriber must provide information to support the appeal on the basis of medical necessity.

General Benefit Exclusions (Not Covered)

Please note that this list is subject to change.

- A. Drugs specifically listed as not covered
- B. Any drug products used for cosmetic purposes
- C. Infertility agents
- D. Experimental drug products, or any drug product used in an experimental manner
- E. Non self-administered injectable drug products are not covered unless otherwise specified in the formulary listing
- F. Foreign drugs or drugs not approved by the United States FDA

If L.A. Care's coverage is amended to exclude a drug that we have been covering and providing to you, we will continue to provide the drug if a prescription is required by law and a Plan Physician continues to prescribe the drug for the same condition and for a use approved by the FDA.

Pharmacist and Physician Feedback

The formulary is a tool to promote cost-effective prescription drug use. L.A. Care has made every attempt to create a document that meets all therapeutic needs; however, the art of medicine makes this a formidable task. L.A. Care welcomes the participation of physicians, pharmacists, and ancillary medical providers, in this dynamic process. Physicians and pharmacists are highly encouraged to direct any suggestions or comments to L.A. Care via the Providers Solution Center at **1-866-522-2736**.

Definitions

“Brand name drug” is a drug that is marketed under a proprietary, trademark protected name. The brand name drug is listed in all CAPITAL letters.

“Coinsurance” is a percentage of the cost of a covered health care benefit that an enrollee pays after the enrollee has paid the deductible, if a deductible applies to the health care benefit, such as the prescription drug benefit.

“Copayment” is a fixed dollar amount that an enrollee pays for a covered health care benefit after the enrollee has paid the deductible, if a deductible applies to the health care benefit, such as the prescription drug benefit.

“Deductible” is the amount an enrollee pays for covered health care benefits before the enrollee’s health plan begins payment for all or part of the cost of the health care benefit under the terms of the policy.

“Drug Tier” is a group of prescription drugs that corresponds to a specified cost sharing tier in the health plan’s prescription drug coverage. The tier in which a prescription drug is placed determines the enrollee’s portion of the cost for the drug.

“Enrollee” is a person enrolled in a health plan who is entitled to receive services from the plan. All references to enrollees in this formulary template shall also include subscribers as defined in this section below.

“Exception request” is a request for coverage of a prescription drug. If an enrollee, his or her designee, or prescribing healthcare provider submits an exception request for coverage of a prescription drug, the health plan must cover the prescription drug when the drug is determined to be medically necessary to treat the enrollee’s condition.

“Exigent circumstances” are when an enrollee is suffering from a health condition that may seriously jeopardize the enrollee’s life, health, or ability to regain maximum function, or when an enrollee is undergoing a current course of treatment using a non-formulary drug.

“Formulary” is the complete list of drugs preferred for use and eligible for coverage under a health plan product, and includes all drugs covered under the outpatient prescription drug benefit of the health plan product. Formulary is also known as a prescription drug list,

“Generic drug” is the same drug as its brand name equivalent in dosage, safety, strength, how it is taken, quality, performance, and intended use. A generic drug is listed in ***bold and italicized lowercase*** letters.

“Non-formulary drug” is a prescription drug that is not listed on the health plan’s formulary.

“Out-of-pocket cost” are copayments, coinsurance, and the applicable deductible, plus all costs for health care services that are not covered by the health plan.

“Prescribing provider” is a health care provider authorized to write a prescription to treat a medical condition for a health plan enrollee.

“Prescription” is an oral, written, or electronic order by a prescribing provider for a specific enrollee that contains the name of the prescription drug, the quantity of the prescribed drug, the date of issue, the name and contact information of the prescribing provider, the signature of the prescribing provider if the prescription is in writing, and if requested by the enrollee, the medical condition or purpose for which the drug is being prescribed.

“Prescription drug” is a drug that is prescribed by the enrollee’s prescribing provider and requires a prescription under applicable law.

“Prior Authorization” is a health plan’s requirement that the enrollee or the enrollee’s prescribing provider obtain the health plan’s authorization for a prescription drug before the health plan will cover the drug. The health plan shall grant a prior authorization when it is medically necessary for the enrollee to obtain the drug.

“Step therapy” is a process specifying the sequence in which different prescription drugs for a given medical condition and medically appropriate for a particular patient are prescribed. The health plan may require the enrollee to try one or more drugs to treat the enrollee’s medical condition before the health plan will cover a particular drug for the condition pursuant to a step therapy request. If the enrollee’s prescribing provider submits a request for step therapy exception, the health plans shall make exceptions to step therapy when the criteria is met.

“Subscriber” means the person who is responsible for payment to a plan or whose employment or other status, except for family dependency, is the basis for eligibility for membership in the plan.

L.A. Care PASC-SEIU Homecare Workers Formulary

Last Updated 3/1/2023

DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS - Drugs to treat ADHD, sleep disorders, and weight loss		
AMPHETAMINES - Drugs to treat ADHD, sleep disorders, and weight loss		
<i>amphetamine/dextroamphetamine ER cap 10MG, 15MG, 20MG, 25MG, 30MG, 5MG</i> (ADDERALL XR Equiv)	F	-
<i>amphetamine/dextroamphetamine tab 10MG, 12.5MG, 15MG, 20MG, 30MG, 5MG, 7.5MG</i> (ADDERALL Equiv)	F	-
<i>dextroamphetamine ER cap 10MG, 15MG, 5MG</i> (DEXEDRINE Equiv)	F	-
<i>dextroamphetamine tab 10MG, 15MG, 20MG, 30MG, 5MG</i> (DEXEDRINE Equiv)	F	-
VYVANSE CAP 10MG, 20MG, 30MG, 40MG, 50MG, 60MG, 70MG (<i>lisdexamfetamine dimesylate</i>)	F	-
VYVANSE CHEW TAB 10MG, 20MG, 30MG, 40MG, 50MG, 60MG (<i>lisdexamfetamine dimesylate</i>)	F	-
ANOREXIANTS NON-AMPHETAMINE - Drugs to help weight loss		
<i>phentermine cap 15MG, 30MG, 37.5MG</i> (ADIPEX Equiv)	F	PA-QL QL= 1 cap/day
<i>phentermine tab 37.5MG</i> (ADIPEX Equiv)	F	PA-QL QL= 1 tab/day

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

1

NC =Not Covered		generic =small letters		BRANDS =CAPITAL LETTERS	
EXC	Plan Exclusion	INF	Infertility	KMSP	Kroger Mandatory Specialty Pharmacy Program
LD	Limited Distribution	LMSP	Lumicera Mandatory Specialty Pharmacy Program	MSP	Mandatory Specialty Pharmacy Program
OTC	Over-the-Counter	PA	Prior Authorization	QL	Quantity Limit
RDX	Restricted to Diagnosis	RS	Restricted to Specialist	SF	Limited to two 15 day fills per month for first 3 months
SMKG	Smoking Cessation	ST	Step Therapy	VAC	Vaccine Program

L.A. Care PASC-SEIU Homecare Workers Formulary

Last Updated 3/1/2023

DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
QSYMIA CAP 11.25MG-69MG, 15MG-92MG, 3.75MG-23MG, 7.5MG-46MG (<i>phentermine hcl-topiramate</i>)	F	PA-QL QL= 1 cap/day
ANTI-OBESITY AGENTS - Drugs to help weight loss		
CONTRAVE TAB 8MG-90MG (<i>naltrexone hcl-bupropion hcl</i>)	F	PA-QL QL= 4 tabs/day
IMCIVREE INJ 10MG/ML (<i>setmelanotide acetate</i>)	F	LD-PA-QL QL= 1 inj/day; Only available through PantherRx Pharmacy 855-726-8479
SAXENDA INJ 18MG/3ML (<i>liraglutide (weight management)</i>)	F	PA-QL QL= 5 pens/30 days
WEGOVY INJ .25MG/0.5ML, .5MG/0.5ML, 1MG/0.5ML (<i>semaglutide (weight management)</i>)	F	PA-QL QL= 4 pens/28 days
WEGOVY INJ 1.7MG/0.75ML 1.7MG/0.75ML (<i>semaglutide (weight management)</i>)	F	PA-QL QL= 4 pens/28 days
WEGOVY INJ 2.4MG/0.75ML 2.4MG/0.75ML (<i>semaglutide (weight management)</i>)	F	PA-QL QL= 4 pens/28 days
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS - Drugs to treat ADHD and sleep disorders		
<i>clonidine ER tab .1MG</i> (KAPVAY Equiv)	F	-
<i>guanfacine ER tab 1MG, 2MG, 3MG, 4MG</i> (INTUNIV Equiv)	F	-
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS) - drugs to treat sleep disorders		

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SMKG	Smoking Cessation	ST	Step Therapy	VAC	Vaccine Program

L.A. Care PASC-SEIU Homecare Workers Formulary

Last Updated 3/1/2023

DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
SUNOSI TAB 150MG, 75MG (<i>solriamfetol hcl</i>)	F	PA-QL QL= 1 tab/day
HISTAMINE H3-RECEPTOR ANTAGONIST/INVERSE AGONISTS - drugs to treat sleep disorders		
WAKIX TAB 17.8MG, 4.45MG (<i>pitolisant hcl</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Accredo-800-803-2523
STIMULANTS - MISC. - Miscellaneous stimulant drugs		
<i>armodafinil tab 150MG, 200MG, 250MG, 50MG</i> (NUVIGIL Equiv)	F	QL QL= 1 tab/day
<i>dexmethylphenidate ER cap 10MG, 15MG, 20MG, 25MG, 30MG, 35MG, 40MG, 5MG</i> (FOCALIN XR Equiv)	F	-
<i>dexmethylphenidate tab 10MG, 2.5MG, 5MG</i> (FOCALIN Equiv)	F	-
<i>methylphenidate CD cap 10MG, 20MG, 30MG, 40MG, 50MG, 60MG</i> (METADATE CD Equiv)	F	-
<i>methylphenidate ER cap 10MG, 20MG, 30MG, 40MG, 60MG</i> (RITALIN LA Equiv)	F	-
METHYLPHENIDATE ER TAB 18MG (<i>methylphenidate hcl</i>)	F	-
<i>methylphenidate ER tab 27MG, 36MG, 54MG</i>	F	-
<i>methylphenidate ER tab 10mg, 20mg 10MG, 20MG</i> (RITALIN Equiv)	F	-

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<i>methylphenidate soln 10MG/5ML, 5MG/5ML</i> (METHYLIN Equiv)	F	-
<i>methylphenidate tab 10MG, 20MG, 5MG</i> (RITALIN Equiv)	F	-
<i>modafinil tab 100MG, 200MG</i> (PROVIGIL Equiv)	F	QL QL= 2 tabs/day
AMINOGLYCOSIDES - Drugs to treat bacterial infections		
AMINOGLYCOSIDES - Drugs to treat infections		
<i>neomycin tab 500MG</i>	F	-
TOBI PODHALER 28MG (<i>tobramycin</i>)	F	LD-PA Only available through Walgreens 888-347-3416
<i>tobramycin neb soln 300MG/4ML, 300MG/5ML</i> (TOBI Equiv)	F	LMSP-RS Restricted to Infectious Disease or Pulmonology Specialist
ANALGESICS - ANTI-INFLAMMATORY - Drugs to treat pain and inflammation		
ANTIRHEUMATIC - ENZYME INHIBITORS - Drugs to treat disorders of the immune system		
OLUMIANT TAB 1MG, 2MG, 4MG (<i>baricitinib</i>)	F	LMSP-PA-QL QL= 1 tab/day
RINVOQ ER TAB 15MG, 30MG, 45MG (<i>upadacitinib</i>)	F	LMSP-PA-QL QL= 1 tab/day
XELJANZ SOLN 1MG/ML (<i>tofacitinib citrate</i>)	F	LMSP-PA-QL QL= 10ml/day

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XELJANZ TAB 10MG, 5MG (<i>tofacitinib citrate</i>)	F	LMSP-PA-QL QL= 2 tabs/day
XELJANZ XR TAB 11MG, 22MG (<i>tofacitinib citrate</i>)	F	LMSP-PA-QL QL= 1 tab/day
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES - Drugs to treat disorders of the immune system		
HUMIRA INJ 10MG 10MG/0.1ML, 10MG/0.2ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 2 syringes/28 days
HUMIRA INJ 20MG 20MG/0.2ML, 20MG/0.4ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 2 syringes/28 days
HUMIRA INJ 40MG 40MG/0.4ML, 40MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 2 syringes/28 days
HUMIRA INJ 80MG 80MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 2 syringes/28 days
HUMIRA INJ CROHNS/UC/HIDRADENITIS STARTER PACK 40MG/0.8ML, 80MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 1 pack/fill, 1 fill/plan year
HUMIRA INJ PEDIATRIC CROHNS STARTER PACK 40MG/0.8ML, 80MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 1 pack/fill, 1 fill/plan year
HUMIRA INJ PEDIATRIC UC STARTER PACK 80MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 1 pack/fill, 1 fill/plan year
HUMIRA INJ PSORIASIS/UVEITIS STARTER PACK 40MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 1 pack/fill, 1 fill/plan year
HUMIRA PEN INJ 40MG 40MG/0.4ML, 40MG/0.8ML (<i>adalimumab</i>)	F	LMSP-PA-QL QL= 2 pens/28 days

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
SIMPONI AUTO-INJECTOR 100MG 100MG/ML (<i>golimumab</i>)	F	LMSP-PA-QL QL=1 inj/28 days
SIMPONI INJ 100MG 100MG/ML (<i>golimumab</i>)	F	LMSP-PA-QL QL=1 inj/28 days
GOLD COMPOUNDS - Drugs to treat disorders of the immune system		
RIDAURA CAP 3MG (<i>auranofin</i>)	F	-
INTERLEUKIN-1 RECEPTOR ANTAGONIST (IL-1RA) - Drugs to treat rheumatoid arthritis		
KINERET INJ 100MG/0.67ML (<i>anakinra</i>)	F	LD-PA-QL QL= 1 inj/day; Only available through Biologics 800-850-4306
INTERLEUKIN-6 RECEPTOR INHIBITORS - Drugs to treat rheumatoid arthritis		
ACTEMRA ACTPEN INJ 162MG/0.9ML (<i>tocilizumab</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
ACTEMRA SC INJ 162MG/0.9ML (<i>tocilizumab</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
KEVZARA INJ 150MG/1.14ML, 200MG/1.14ML (<i>sarilumab</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS) - Drugs to treat pain and inflammation		
<i>celecoxib cap 100MG, 200MG, 400MG, 50MG</i> (CELEBREX Equiv)	F	-
<i>diclofenac potassium tab 50MG</i> (CATAFLAM Equiv)	F	-
<i>diclofenac sodium EC tab 25MG, 50MG, 75MG</i> (VOLTAREN Equiv)	F	-

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<i>diclofenac sodium XR tab 100MG</i> (VOLTAREN XR Equiv)	F	-
<i>etodolac cap 200MG, 300MG</i> (LODINE Equiv)	F	-
<i>etodolac tab 400MG, 500MG</i>	F	-
FLURBIPROFEN TAB 50MG (<i>flurbiprofen</i>)	F	-
<i>flurbiprofen tab 100MG, 50MG</i>	F	-
<i>ibuprofen susp (Rx ONLY) 100MG/5ML, 40MG/ML, 50MG/1.25ML</i> (ADVIL, MOTRIN Equiv)	F	-
<i>ibuprofen tab 400MG, 600MG</i>	F	-
<i>indomethacin cap 25MG, 50MG</i> (INDOCIN Equiv)	F	-
<i>indomethacin CR cap 75MG</i> (INDOCIN SR Equiv)	F	-
<i>ketorolac inj 15mg/ml 15MG/ML</i> (TORADOL Equiv)	F	QL QL= 20ml/5 days
<i>ketorolac inj 30mg/ml 30MG/ML</i> (TORADOL Equiv)	F	QL QL= 20ml/5 days
<i>ketorolac inj 60mg/2ml 30MG/ML, 60MG/2ML</i> (TORADOL Equiv)	F	QL QL= 20ml/5 days
<i>ketorolac tab 10MG</i> (TORADOL Equiv)	F	QL QL= 20 tabs/5 days
<i>meloxicam tab 15MG, 7.5MG</i> (MOBIC Equiv)	F	-
<i>nabumetone tab 500MG, 750MG</i> (RELAFEN Equiv)	F	-
<i>naproxen EC tab 375MG</i> (NAPROSYN EC Equiv)	F	-
<i>naproxen tab 250MG, 375MG, 500MG</i> (NAPROSYN Equiv)	F	-

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<i>piroxicam cap 10MG, 20MG</i> (FELDENE Equiv)	F	-
<i>sulindac tab 150MG, 200MG</i> (CLINORIL Equiv)	F	-
PHOSPHODIESTERASE 4 (PDE4) INHIBITORS - Drugs to treat disorders of the immune system		
OTEZLA STARTER PACK (<i>apremilast</i>)	F	LMSP-PA-QL QL= 1 pack/28 days
OTEZLA TAB 30MG (<i>apremilast</i>)	F	LMSP-PA-QL QL= 2 tabs/day
PYRIMIDINE SYNTHESIS INHIBITORS - Drugs to treat disorders of the immune system		
<i>leflunomide tab 10MG, 20MG</i> (ARAVA Equiv)	F	-
SELECTIVE COSTIMULATION MODULATORS - Drugs to treat disorders of the immune system		
ORENCIA CLICK INJ 125MG/ML (<i>abatacept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
ORENCIA SC INJ 125MG/ML 125MG/ML (<i>abatacept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
ORENCIA SC INJ 50MG/0.4ML 50MG/0.4ML (<i>abatacept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
ORENCIA SC INJ 87.5MG/0.7ML 87.5MG/0.7ML (<i>abatacept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS - Drugs to treat disorders of the immune system		
ENBREL INJ 25MG 25MG/0.5ML (<i>etanercept</i>)	F	LMSP-PA-QL QL= 8 inj/28 days
ENBREL INJ 50MG 50MG/ML (<i>etanercept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days

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ENBREL MINI INJ 50MG/ML (<i>etanercept</i>)	F	MSP-PA-QL QL= 4 inj/28 days
ENBREL SURECLICK INJ 50MG 50MG/ML (<i>etanercept</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
ANALGESICS - NONNARCOTIC - Drugs to treat pain		
SALICYLATES - Drugs to treat pain		
<i>aspirin chew tab 81mg 81MG</i>	\$0	OTC Covered for females (no age restriction)
<i>aspirin ec tab 81mg 81MG</i>	\$0	OTC Covered for females (no age restriction)
<i>salsalate tab 500MG, 750MG</i> (DISALCID Equiv)	F	-
ANALGESICS - OPIOID - Drugs to treat pain		
OPIOID AGONISTS - Drugs to treat pain		
CODEINE SULFATE TAB 15MG 15MG (<i>codeine sulfate</i>)	F	QL QL= 240 tabs/30 days
<i>codeine sulfate tab 15mg, 30mg 30MG</i>	F	QL QL=240 tabs/30 days
CODEINE SULFATE TAB 60MG 60MG (<i>codeine sulfate</i>)	F	QL QL=180 tabs/30 days
<i>codeine sulfate tab 60mg</i>	F	QL QL=180 tabs/30 days

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<i>fentanyl patch 100MCG/HR, 12MCG/HR, 25MCG/HR, 50MCG/HR, 75MCG/HR</i> (DURAGESIC Equiv)	F	QL QL=10 patches/30 days
<i>hydromorphone tab 2mg 2MG</i> (DILAUDID Equiv)	F	QL QL=240 tabs/30 days
<i>hydromorphone tab 4mg 4MG</i> (DILAUDID Equiv)	F	QL QL=180 tabs/30 days
<i>hydromorphone tab 8mg 8MG</i> (DILAUDID Equiv)	F	QL QL=120 tabs/30 days
<i>methadone conc 10MG/ML</i>	F	QL QL=600ml/30 days
<i>methadone soln 10mg/5ml 10MG/5ML</i>	F	QL QL=600ml/30 days
<i>methadone soln 5mg/5ml 5MG/5ML</i>	F	QL QL = 1200ml/30 days
<i>methadone tab 5MG</i> (DOLOPHINE Equiv)	F	QL QL=120/30 days
<i>methadone tablet 10mg 10MG</i> (DOLOPHINE Equiv)	F	QL QL=240/30 days
<i>morphine sulfate ER tab 100MG, 15MG, 200MG, 30MG, 60MG</i> (MS CONTIN Equiv)	F	QL QL= 90 tabs/ 30 days
MORPHINE SULFATE SOLN 20MG/5ML (<i>morphine sulfate</i>)	F	QL QL=120ml/30 days

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<i>morphine sulfate soln 100MG/5ML, 10MG/0.5ML, 10MG/5ML, 20MG/5ML, 20MG/ML, 5MG/0.25ML</i>	F	QL QL=120ml/30 days
MORPHINE SULFATE TAB (<i>morphine sulfate</i>)	F	QL QL= 180 tabs/30 days
<i>morphine sulfate tab 15MG, 30MG</i>	F	QL QL= 180 tabs/30 days
<i>oxycodone soln 5MG/5ML</i> (ROXICODONE Equiv)	F	QL QL=240ml/30 days
<i>oxycodone tab 10MG, 15MG, 20MG, 30MG, 5MG</i> (ROXICODONE Equiv)	F	QL QL= 120 tabs/30 days
<i>tramadol tab 100MG, 50MG</i> (ULTRAM Equiv)	F	QL QL=240 tabs/30 days
XTAMPZA ER CAP 13.5MG, 18MG, 27MG, 36MG, 9MG (<i>oxycodone</i>)	F	PA-QL QL= 120 caps/30 days
OPIOID COMBINATIONS - Drugs to treat pain		
<i>acetaminophen/codeine soln 12MG/5ML-120MG/5ML</i>	F	QL QL=240ml/30 days
<i>acetaminophen/codeine tab 15MG-300MG, 30MG-300MG, 60MG-300MG</i> (TYLENOL/CODEINE Equiv)	F	QL QL=180 tabs/30 days

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<i>hydrocodone/acetaminophen soln 2.5MG/5ML-108MG/5ML, 5MG/10ML-217MG/10ML, 7.5MG/15ML-325MG/15ML</i> (HYCET, LORTAB Equiv)	F	QL QL=1800ml/30 days
<i>hydrocodone/acetaminophen tab</i> (LORTAB Equiv)	F	QL QL=120 tabs/30 days
<i>oxycodone/acetaminophen tab 10MG-325MG, 2.5MG-325MG, 5MG-325MG, 7.5MG-325MG</i> (PERCOCET Equiv)	F	QL QL=120 tabs/30 days
<i>OXYCODONE/ASPIRIN TAB 4.835MG-325MG</i> (<i>oxycodone-aspirin</i>)	F	QL QL= 120 tabs/30 days
OPIOID PARTIAL AGONISTS - Drugs to treat pain		
<i>buprenorphine SL tab 2MG, 8MG</i> (SUBUTEX Equiv)	F	-
<i>buprenorphine/naloxone sl film .5MG-2MG, 1MG-4MG, 2MG-8MG, 3MG-12MG</i> (SUBOXONE SL FILM Equiv)	F	-
<i>buprenorphine/naloxone SL tab .5MG-2MG, 2MG-8MG</i> (SUBOXONE Equiv)	F	-
<i>butorphanol nasal spray 10MG/ML</i> (STADOL Equiv)	F	QL QL= 1 bottle/fill, 2 fills/30 days
ANDROGENS-ANABOLIC - Drugs to regulate male hormones		
ANABOLIC STEROIDS - Drugs used to gain weight		
<i>oxandrolone tab 10MG, 2.5MG</i> (OXANDRIN Equiv)	F	-

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
ANDROGENS - Drugs to treat low testosterone level		
ANDRODERM PATCH 2MG/24HR, 4MG/24HR (<i>testosterone</i>)	F	PA-QL QL= 1 patch/day
<i>danazol cap 100MG, 200MG, 50MG</i> (DANOCRINE Equiv)	F	-
<i>testosterone cypionate inj 100MG/ML, 200MG/ML</i> (DEPO-TESTOSTERONE Equiv)	F	-
TESTOSTERONE ENANTHATE INJ 200MG/ML 200MG/ML (<i>testosterone enanthate</i>)	F	QL QL= 5ml/fill
TESTOSTERONE GEL 1% 25MG 25MG/2.5GM (ANDROGEL Equiv) (<i>testosterone</i>)	F	PA-QL QL= 1 packet/day
<i>testosterone gel 1% 25mg 25MG/2.5GM</i> (ANDROGEL Equiv)	F	PA-QL QL= 1 packet/day
<i>testosterone gel 1% 50mg 1%, 50MG/5GM</i> (ANDROGEL Equiv)	F	PA-QL QL= 2 packets/day
<i>testosterone gel 1% pump 1%</i> (ANDROGEL Equiv)	F	PA-QL QL= 4 bottles/30 days
TESTOSTERONE GEL PUMP 1% (<i>testosterone</i>)	F	PA-QL QL= 4 bottles/30 days
<i>testosterone gel pump 1.62% 1.62%</i> (ANDROGEL Equiv)	F	PA-QL QL= 2 bottles/30 days
<i>testosterone soln 30MG/ACT</i> (AXIRON Equiv)	F	PA-QL QL= 2 bottles/30 days
ANORECTAL AGENTS - Drugs to treat problems related to the rectum		

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INTRARECTAL STEROIDS - Drugs to treat systemic swelling conditions		
<i>hydrocortisone enema 100MG/60ML</i> (CORTENEMA Equiv)	F	-
RECTAL COMBINATIONS - Drugs to treat systemic swelling conditions		
<i>hc pramoxine cream 1-1% 1%</i> (ANALPRAM HC Equiv)	F	-
<i>lidocaine/hydrocortisone cream .5%-3%</i> (ANAMANTLE Equiv)	F	-
RECTAL STEROIDS - Drugs to treat systemic swelling conditions		
<i>proctosol HC cream 1%, 2.5%</i> (ANUSOL HC Equiv)	F	-
ANTHELMINTICS - Drugs to treat worm infections		
ANTHELMINTICS - Drugs to treat parasites		
BENZNIDAZOLE TAB 100MG, 12.5MG (<i>benznidazole</i>)	F	PA
EMVERM TAB 100MG (<i>mebendazole</i>)	F	PA
<i>ivermectin tab 3MG</i> (STROMECTOL Equiv)	F	PA
<i>praziquantel tab 600MG</i> (BILTRICIDE Equiv)	F	-
ANTIANGINAL AGENTS - Drugs to treat chest pain		
ANTIANGINALS-OTHER - Drugs to treat chest pain		
<i>ranolazine tab 1000MG, 500MG</i> (RANEXA Equiv)	F	-
NITRATES - Drugs to treat chest pain		
<i>isosorbide dinitrate SL tab</i>	F	-
<i>isosorbide dinitrate tab 10MG, 20MG, 30MG, 5MG</i> (ISORDIL Equiv)	F	-

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<i>isosorbide mononitrate ER tab 120MG, 30MG, 60MG</i> (IMDUR Equiv)	F	-
ISOSORBIDE MONONITRATE TAB 10MG, 20MG (MONOKET Equiv) (<i>isosorbide mononitrate</i>)	F	-
<i>isosorbide mononitrate tab 10MG, 20MG</i> (MONOKET Equiv)	F	-
<i>nitroglycerin patch .1MG/HR, .2MG/HR, .4MG/HR, .6MG/HR</i> (NITRO-DUR Equiv)	F	-
<i>nitroglycerin SL tab .3MG, .4MG, .6MG</i> (NITROSTAT Equiv)	F	-
ANTI-ANXIETY AGENTS - Drugs to treat anxiety		
ANTI-ANXIETY AGENTS - MISC. - Miscellaneous anti-anxiety drugs		
<i>buspirone tab 10MG, 15MG, 5MG, 7.5MG</i> (BUSPAR Equiv)	F	-
<i>hydroxyzine pamoate cap 25MG, 50MG</i> (VISTARIL Equiv)	F	-
<i>hydroxyzine syrup 10MG/5ML</i> (ATARAX Equiv)	F	-
<i>hydroxyzine tab 10MG, 25MG, 50MG</i> (ATARAX Equiv)	F	-
BENZODIAZEPINES - Drugs to treat anxiety		
<i>alprazolam tab .25MG, .5MG, 1MG, 2MG</i> (XANAX Equiv)	F	QL QL= 5 tabs/day
<i>chlordiazepoxide cap 10MG, 25MG, 5MG</i> (LIBRIUM Equiv)	F	-

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<i>diazepam conc 5MG/ML</i> (VALIUM Equiv)	F	QL QL= 180ml/30 days
<i>diazepam oral soln 5mg/5ml 5MG/5ML</i> (DIAZEPAM Equiv)	F	QL QL= 180ml/30 days
<i>diazepam tab 2mg, 10mg 10MG, 2MG</i> (VALIUM Equiv)	F	QL QL= 4 tabs/day
<i>diazepam tab 5mg 5MG</i> (VALIUM Equiv)	F	QL QL= 3 tabs/day
<i>lorazepam conc 1MG/0.5ML, 2MG/ML</i> (ATIVAN Equiv)	F	-
<i>lorazepam tab .5MG, 1MG, 2MG</i> (ATIVAN Equiv)	F	-
ANTIARRHYTHMICS - Drugs to control heart rhythm		
ANTIARRHYTHMICS TYPE I-A - Drugs to control heart rhythm		
<i>disopyramide cap 100MG, 150MG</i> (NORPACE Equiv)	F	-
<i>quinidine gluconate CR tab</i>	F	-
<i>quinidine sulfate tab 200MG, 300MG</i>	F	-
ANTIARRHYTHMICS TYPE I-B - Drugs to control heart rhythm		
<i>mexiletine hcl cap 150MG, 200MG, 250MG</i>	F	-
ANTIARRHYTHMICS TYPE I-C - Drugs to control heart rhythm		
<i>flecainide tab 100MG, 150MG, 50MG</i> (TAMBOCOR Equiv)	F	-
<i>propafenone ER cap 225MG, 325MG, 425MG</i> (RYTHMOL SR Equiv)	F	-

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<i>propafenone tab 150MG, 225MG, 300MG</i> (RYTHMOL Equiv)	F	-
ANTIARRHYTHMICS TYPE III - Drugs to control heart rhythm		
<i>amiodarone tab 100MG, 200MG, 400MG</i> (CORDARONE Equiv)	F	-
<i>dofetilide cap 125MCG, 250MCG, 500MCG</i> (TIKOSYN Equiv)	F	-
MULTAQ TAB 400MG (<i>dronedarone hcl</i>)	F	-
ANTIASTHMATIC AND BRONCHODILATOR AGENTS - Drugs to treat asthma and COPD		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES - Drugs to treat asthma		
FASENRA PEN INJ 30MG/ML (<i>benralizumab</i>)	F	LD-PA-QL QL= 1 inj/56 days; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
NUCALA INJ 100MG/ML, 40MG/0.4ML (<i>mepolizumab</i>)	F	LMSP-PA-QL QL= 1 inj/28 days
ANTI-INFLAMMATORY AGENTS - Drugs to treat asthma and COPD		
<i>cromolyn neb soln 20MG/2ML</i> (INTAL Equiv)	F	-
BRONCHODILATORS - ANTICHOLINERGICS - Drugs to treat breathing disorders		
ATROVENT HFA INHALER 17MCG/ACT (<i>ipratropium bromide hfa</i>)	F	-
INCRUSE ELLIPTA INHALER 62.5MCG/INH (<i>umeclidinium bromide</i>)	F	-
<i>ipratropium neb soln .02%</i> (ATROVENT Equiv)	F	-

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SPIRIVA RESPIMAT INHALER 1.25MCG/ACT 1.25MCG/ACT (<i>tiotropium bromide monohydrate</i>)	F	QL-ST QL= 1 inhaler/30 days; Step Therapy requires trial of ADVAIR, BREO, DULERA, or FLUTICASONE/SALMETEROL
LEUKOTRIENE MODULATORS - Drugs to treat asthma and COPD		
<i>montelukast chew tab 4MG, 5MG</i> (SINGULAIR Equiv)	F	-
<i>montelukast granule pack 4MG</i> (SINGULAIR Equiv)	F	-
<i>montelukast tab 10MG</i> (SINGULAIR Equiv)	F	-
STEROID INHALANTS - Drugs to treat asthma and COPD		
ARNUITY ELLIPTA INHALER 100MCG/ACT, 200MCG/ACT, 50MCG/ACT (<i>fluticasone furoate (inhalation)</i>)	F	-
ASMANEX HFA INHALER 100MCG/ACT, 200MCG/ACT, 50MCG/ACT (<i>mometasone furoate (inhalation)</i>)	F	-
ASMANEX HFA INHALER 100MCG/ACT, 200MCG/ACT, 50MCG/ACT (<i>mometasone furoate (inhalation)</i>)	F	-
ASMANEX INHALER 110MCG/INH, 220MCG/INH (<i>mometasone furoate (inhalation)</i>)	F	-
ASMANEX INHALER 110MCG/INH, 220MCG/INH (<i>mometasone furoate (inhalation)</i>)	F	-

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<i>budesonide inh susp .25MG/2ML, .5MG/2ML, 1MG/2ML (PULMICORT Equiv)</i>	F	-
FLOVENT DISKUS INHALER 100MCG/BLIST, 250MCG/BLIST, 50MCG/BLIST (<i>fluticasone propionate (inhalation)</i>)	F	-
FLOVENT HFA INHALER 110MCG/ACT, 220MCG/ACT, 44MCG/ACT (<i>fluticasone propionate hfa</i>)	F	-
SYMPATHOMIMETICS - Drugs to treat asthma and COPD		
ADVAIR DISKUS INHALER 50MCG/ACT-100MCG/ACT, 50MCG/ACT-250MCG/ACT, 50MCG/ACT-500MCG/ACT (<i>fluticasone-salmeterol</i>)	F	-
ADVAIR HFA INHALER 21MCG/ACT-115MCG/ACT, 21MCG/ACT-230MCG/ACT, 21MCG/ACT-45MCG/ACT (<i>fluticasone-salmeterol</i>)	F	-
<i>albuterol HFA inhaler 108MCG/ACT</i> (PROAIR, PROVENTIL Equiv)	F	QL QL= 2 inhalers/30 days
<i>albuterol neb soln .083%, .5%, .63MG/3ML, 1.25MG/3ML, 2.5MG/0.5ML</i>	F	-
<i>albuterol sulfate syrup 2MG/5ML</i>	F	-
<i>albuterol sulfate tab 2MG, 4MG</i>	F	-
<i>albuterol/ipratropium neb soln .5MG/3ML-2.5MG/3ML</i> (DUONEB Equiv)	F	-

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ANORO ELLIPTA INHALER 25MCG/INH-62.5MCG/INH (<i>umeclidinium-vilanterol</i>)	F	-
BREO ELLIPTA INHALER 25MCG/INH-100MCG/INH, 25MCG/INH-200MCG/INH (<i>fluticasone furoate-vilanterol</i>)	F	-
BREZTRI AEROSPHERE INHALER 4.8MCG/ACT-9MCG/ACT-160MCG/ACT (<i>budesonide-glycopyrrolate-formoterol fumarate</i>)	F	-
COMBIVENT RESPIMAT INHALER 20MCG/ACT-100MCG/ACT (<i>ipratropium-albuterol</i>)	F	-
DULERA INHALER 5MCG/ACT-100MCG/ACT, 5MCG/ACT-200MCG/ACT, 5MCG/ACT-50MCG/ACT (<i>mometasone furoate-formoterol fumarate dihydrate</i>)	F	-
DULERA INHALER 5MCG/ACT-100MCG/ACT, 5MCG/ACT-200MCG/ACT, 5MCG/ACT-50MCG/ACT (<i>mometasone furoate-formoterol fumarate dihydrate</i>)	F	-
FLUTICASONE/SALMETEROL INHALER 14MCG/ACT-113MCG/ACT, 14MCG/ACT-232MCG/ACT, 14MCG/ACT-55MCG/ACT (<i>fluticasone-salmeterol</i>)	F	-
METAPROTERENOL SYRUP 10MG/5ML (<i>metaproterenol sulfate</i>)	F	-

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SEREVENT DISKUS INHALER 50MCG/DOSE (<i>salmeterol xinafoate</i>)	F	-
SYMBICORT INHALER 4.5MCG/ACT-160MCG/ACT, 4.5MCG/ACT-80MCG/ACT (<i>budesonide-formoterol fumarate dihydrate</i>)	F	-
<i>terbutaline sulfate tab 2.5MG, 5MG</i> (BRETHINE Equiv)	F	-
TRELEGY ELLIPTA INHALER 25MCG/INH-62.5MCG/INH-100MCG/INH, 25MCG/INH-62.5MCG/INH-200MCG/INH (<i>fluticasone-umeclidinium-vilanterol</i>)	F	-
VENTOLIN HFA INHALER 108MCG/ACT (<i>albuterol sulfate</i>)	F	QL QL= 2 inhalers/30 days
XANTHINES - Drugs to treat asthma and COPD		
ELIXOPHYLLIN ELIXIR 80MG/15ML (<i>theophylline</i>)	F	-
<i>theophylline ER tab 400MG, 600MG</i> (THEOPHYLLINE ER Equiv)	F	-
<i>theophylline soln 80MG/15ML</i>	F	-
ANTICOAGULANTS - Drugs to thin the blood		
COUMARIN ANTICOAGULANTS - Drugs to thin the blood		
<i>warfarin tab 10MG, 1MG, 2.5MG, 2MG, 3MG, 4MG, 5MG, 6MG, 7.5MG</i> (COUMADIN Equiv)	F	-
DIRECT FACTOR XA INHIBITORS - Drugs to thin the blood		

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ELIQUIS TAB, ELIQUIS STARTER PACK 2.5MG, 5MG (<i>apixaban</i>)	F	-
XARELTO STARTER PACK (<i>rivaroxaban</i>)	F	-
XARELTO SUSP 1MG/ML (<i>rivaroxaban</i>)	F	-
XARELTO TAB 10MG, 15MG, 2.5MG, 20MG (<i>rivaroxaban</i>)	F	-
HEPARINS AND HEPARINOID-LIKE AGENTS - Drugs to thin the blood		
<i>enoxaparin inj 300MG/3ML</i> (LOVENOX Equiv)	F	-
<i>fondaparinux inj 10MG/0.8ML, 2.5MG/0.5ML, 5MG/0.4ML, 7.5MG/0.6ML</i> (ARIXTRA Equiv)	F	PA
ANTICONSULSANTS - Drugs to treat seizures		
ANTICONSULSANTS - BENZODIAZEPINES - Drugs to treat seizures		
<i>clobazam susp 2.5MG/ML</i> (ONFI Equiv)	F	PA Members age 9 or older require Prior Authorization
<i>clobazam tab 10MG, 20MG</i> (ONFI Equiv)	F	PA
<i>clonazepam tab .5MG, 1MG, 2MG</i> (KLONOPIN Equiv)	F	-
DIASAT RECTAL GEL, DIAZEPAM RECTAL GEL 10MG, 2.5MG, 20MG (<i>diazepam (anticonvulsant)</i>)	F	QL QL= 2 packs/fill
ANTICONSULSANTS - MISC. - Miscellaneous anti-convulsant drugs		
<i>carbamazepine chew tab 100MG</i> (TEGRETOL Equiv)	F	-
<i>carbamazepine ER cap 100MG, 200MG, 300MG</i> (CARBATROL Equiv)	F	-

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<i>carbamazepine ER tab 100MG, 200MG, 400MG</i> (TEGRETOL XR Equiv)	F	-
<i>carbamazepine susp 100MG/5ML, 200MG/10ML</i> (TEGRETOL Equiv)	F	-
<i>carbamazepine tab 200MG</i> (TEGRETOL Equiv)	F	-
DIACOMIT CAP 250MG, 500MG (<i>stiripentol</i>)	F	LD-PA Only available through PantheRx Pharmacy 855-726-8479
DIACOMIT POWDER PACK 250MG, 500MG (<i>stiripentol</i>)	F	LD-PA Only available through PantheRx Pharmacy 855-726-8479
EPIDIOLEX SOLN 100MG/ML (<i>cannabidiol</i>)	F	LD-PA Only available through Lumicera 855-847-3553
FINTEPLA SOLN 2.2MG/ML (<i>fenfluramine hcl</i> (<i>anticonvulsant</i>))	F	LD-PA-QL QL= 12ml/day; Only available through Anovo Specialty Pharmacy 844-288-5007
<i>gabapentin cap 100MG, 300MG, 400MG</i> (NEURONTIN Equiv)	F	QL QL= 9 caps/day
<i>gabapentin soln 250MG/5ML, 300MG/6ML</i> (NEURONTIN Equiv)	F	QL QL= 72 mls/day
<i>gabapentin tab 600mg 600MG</i> (NEURONTIN Equiv)	F	QL QL= 6 tabs/day

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<i>gabapentin tab 800mg 800MG</i> (NEURONTIN Equiv)	F	QL QL= 4.5 tabs/day
<i>lacosamide oral solution 10MG/ML</i> (VIMPAT Equiv)	F	-
<i>lacosamide tab 100MG, 150MG, 200MG, 50MG</i> (VIMPAT Equiv)	F	-
<i>lamotrigine chew tab 25MG, 5MG</i> (LAMICTAL Equiv)	F	-
<i>lamotrigine tab 100MG, 150MG, 200MG, 25MG</i> (LAMICTAL Equiv)	F	-
<i>levetiracetam ER tab 500MG, 750MG</i> (KEPPRA XR Equiv)	F	-
<i>levetiracetam soln 100MG/ML, 500MG/5ML</i> (KEPPRA Equiv)	F	-
<i>levetiracetam tab 1000MG, 250MG, 500MG, 750MG</i> (KEPPRA Equiv)	F	-
<i>oxcarbazepine susp 300MG/5ML, 60MG/ML</i> (TRILEPTAL Equiv)	F	-
<i>oxcarbazepine tab 150MG, 300MG, 600MG</i> (TRILEPTAL Equiv)	F	-
<i>pregabalin cap 100MG, 150MG, 200MG, 25MG, 50MG, 75MG</i> (LYRICA Equiv)	F	QL QL= 3 caps/day
<i>pregabalin cap 225mg 225MG</i> (LYRICA Equiv)	F	QL QL= 2 caps/day
<i>pregabalin cap 300mg 300MG</i> (LYRICA Equiv)	F	QL QL= 2 caps/day

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<i>pregabalin soln 20MG/ML</i> (LYRICA Equiv)	F	QL QL= 30ml/day
<i>primidone tab 250MG, 50MG</i> (MYSOLINE Equiv)	F	-
<i>rufinamide susp 40MG/ML</i> (BANZEL Equiv)	F	PA
<i>rufinamide tab 200MG, 400MG</i> (BANZEL TAB Equiv)	F	PA
<i>topiramate sprinkle cap 15MG, 25MG</i> (TOPAMAX Equiv)	F	-
<i>topiramate tab 100MG, 200MG, 25MG, 50MG</i> (TOPAMAX Equiv)	F	-
<i>zonisamide cap 100MG, 25MG, 50MG</i> (ZONEGRAN Equiv)	F	-
ZTALMY SUSP 50MG/ML (<i>ganaxolone</i>)	F	LD-PA-QL QL= 1100ml/30 days; Only available through Orsini 800-410-8575
CARBAMATES - Drugs to treat seizures		
<i>felbamate susp 600MG/5ML</i> (FELBATOL Equiv)	F	-
<i>felbamate tab 400MG, 600MG</i> (FELBATOL Equiv)	F	-
XCOPRI PAK 100-150MG (<i>cenobamate</i>)	F	QL QL= 2 tabs/day
XCOPRI PAK 150-200MG (<i>cenobamate</i>)	F	QL QL= 2 tabs/day
XCOPRI PAK 50-200MG (<i>cenobamate</i>)	F	QL QL= 2 tabs/day

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XCOPRI TAB 150MG, 200MG 150MG, 200MG (<i>cenobamate</i>)	F	QL QL= 2 tabs/day
XCOPRI TAB 50MG, 100MG 100MG, 50MG (<i>cenobamate</i>)	F	QL QL= 1 tab/day
XCOPRI TITRATION PAK 12.5-25MG (<i>cenobamate</i>)	F	QL QL= 1 tab/day
XCOPRI TITRATION PAK 150-200MG (<i>cenobamate</i>)	F	QL QL= 1 tab/day
XCOPRI TITRATION PAK 50-100MG (<i>cenobamate</i>)	F	QL QL= 1 tab/day
GABA MODULATORS - Drugs to treat seizures		
<i>tiagabine tab 12MG, 16MG, 2MG, 4MG</i> (GABITRIL Equiv)	F	-
<i>vigabatrin powder pack 500MG</i> (SABRIL POWDER Equiv)	F	LD-PA Only available through Lumicera 855-847-3553
<i>vigabatrin tab 500MG</i> (SABRIL Equiv)	F	LD-PA Only available through Lumicera 855-847-3553
<i>vigadrone powder pack 500MG</i>	F	LD-PA Only available through PantheRx 855-726-8479
HYDANTOINS - Drugs to treat seizures		

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DILANTIN CAP 30MG 30MG (<i>phenytoin sodium extended</i>)	F	-
<i>phenytoin cap 100MG, 200MG, 300MG</i> (DILANTIN Equiv)	F	-
<i>phenytoin chew tab 50MG</i> (DILANTIN Equiv)	F	-
<i>phenytoin susp 100MG/4ML, 125MG/5ML</i> (DILANTIN Equiv)	F	-
SUCCINIMIDES - Drugs to treat seizures		
CELONTIN CAP 300MG (<i>methsuximide</i>)	F	-
<i>ethosuximide cap 250MG</i> (ZARONTIN Equiv)	F	-
<i>ethosuximide soln 250MG/5ML</i> (ZARONTIN Equiv)	F	-
VALPROIC ACID - Drugs to treat seizures		
<i>divalproex ER tab 250MG, 500MG</i> (DEPAKOTE ER Equiv)	F	-
<i>divalproex sodium DR tab 125MG, 250MG, 500MG</i> (DEPAKOTE Equiv)	F	-
<i>divalproex sprinkle cap 125MG</i> (DEPAKOTE Equiv)	F	-
<i>valproic acid cap 250MG</i> (DEPAKENE Equiv)	F	-
<i>valproic acid syrup 250MG/5ML</i> (DEPAKENE Equiv)	F	-
ANTIDEPRESSANTS - Drugs to treat depression disorder		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS) - Drugs to treat depression		
<i>mirtazapine ODT 15MG, 30MG, 45MG</i> (REMERON Equiv)	F	-

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<i>mirtazapine tab 15MG, 30MG, 45MG, 7.5MG</i> (REMERON Equiv)	F	-
ANTIDEPRESSANTS - MISC. - Miscellaneous anti-depressant drugs		
<i>bupropion ER tab 100MG, 150MG, 200MG</i> (WELLBUTRIN Equiv)	F	-
<i>bupropion tab 100MG, 75MG</i> (WELLBUTRIN Equiv)	F	-
<i>bupropion XL tab 150MG, 300MG</i> (WELLBUTRIN XL Equiv)	F	-
MAPROTILINE TAB 25MG, 50MG, 75MG (<i>maprotiline hcl</i>)	F	-
MONOAMINE OXIDASE INHIBITORS (MAOIS) - Drugs to treat depression		
MARPLAN TAB 10MG (<i>isocarboxazid</i>)	F	-
PHENELZINE SULFATE TAB 15MG (<i>phenelzine sulfate</i>)	F	-
<i>phenelzine tab 15MG</i> (NARDIL Equiv)	F	-
<i>tranylcypromine tab 10MG</i> (PARNATE Equiv)	F	-
SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS) - Drugs to treat depression		
<i>citalopram soln 10MG/5ML</i> (CELEXA Equiv)	F	-
<i>citalopram tab 10MG, 20MG, 40MG</i> (CELEXA Equiv)	F	-
<i>escitalopram soln 5MG/5ML</i> (LEXAPRO Equiv)	F	-
<i>escitalopram tab 10MG, 20MG, 5MG</i> (LEXAPRO Equiv)	F	-
<i>fluoxetine cap 10MG, 20MG, 40MG</i> (PROZAC Equiv)	F	-
<i>fluoxetine soln 20MG/5ML</i> (PROZAC Equiv)	F	-

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<i>fluoxetine tab 60mg 60MG</i>	F	-
<i>fluvoxamine ER cap 100MG, 150MG</i> (LUVOX CR Equiv)	F	ST Step Therapy requires trial of citalopram, escitalopram, sertraline, fluoxetine, fluvoxamine or paroxetine
<i>fluvoxamine tab 100MG, 25MG, 50MG</i> (LUVOX Equiv)	F	-
<i>paroxetine ER tab 12.5MG, 25MG, 37.5MG</i> (PAXIL CR Equiv)	F	-
<i>paroxetine tab 10MG, 20MG, 30MG, 40MG</i> (PAXIL Equiv)	F	-
<i>sertraline conc 20MG/ML</i> (ZOLOFT Equiv)	F	-
<i>sertraline tab 100MG, 25MG, 50MG</i> (ZOLOFT Equiv)	F	-
SEROTONIN MODULATORS - Drugs to treat depression		
NEFAZODONE TAB 100MG, 150MG, 200MG, 250MG, 50MG (<i>nefazodone hcl</i>)	F	-
<i>nefazodone tab 50mg, 250mg</i>	F	-
<i>trazodone tab 100MG, 150MG, 50MG</i> (DESYREL Equiv)	F	-
SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS) - Drugs to treat depression		
<i>desvenlafaxine ER tab 100MG, 25MG, 50MG</i> (PRISTIQ Equiv)	F	-
<i>duloxetine EC cap 20MG, 30MG, 60MG</i> (CYMBALTA Equiv)	F	-

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<i>venlafaxine ER cap 150MG, 37.5MG, 75MG</i> (EFFEXOR XR Equiv)	F	-
<i>venlafaxine tab 100MG, 25MG, 37.5MG, 50MG, 75MG</i> (EFFEXOR Equiv)	F	-
TRICYCLIC AGENTS - Drugs to treat depression		
<i>amitriptyline tab 100MG, 10MG, 150MG, 25MG, 50MG, 75MG</i> (ELAVIL Equiv)	F	-
AMOXAPINE TAB 100MG, 150MG, 25MG, 50MG (<i>amoxapine</i>)	F	-
<i>desipramine tab</i> (NORPRAMIN Equiv)	F	-
<i>doxepin cap 100MG, 10MG, 150MG, 25MG, 50MG, 75MG</i> (SINEQUAN Equiv)	F	-
<i>doxepin conc 10MG/ML</i> (SINEQUAN Equiv)	F	-
<i>imipramine tab 10MG, 25MG, 50MG</i> (TOFRANIL Equiv)	F	-
<i>nortriptyline cap 10MG, 25MG, 50MG, 75MG</i> (PAMELOR Equiv)	F	-
<i>nortriptyline oral soln</i> (NORTRIPTYLINE Equiv)	F	-
NORTRIPTYLINE SOLN 10MG/5ML (<i>nortriptyline hcl</i>)	F	-
ANTIDIABETICS - Drugs to regulate blood sugar		
ALPHA-GLUCOSIDASE INHIBITORS - Drugs to regulate blood sugar		
<i>acarbose tab 100MG, 25MG, 50MG</i> (PRECOSE Equiv)	F	-

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ANTIDIABETIC COMBINATIONS - Drugs to regulate blood sugar		
ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB 12.5MG-45MG (<i>alogliptin-pioglitazone</i>)	F	QL QL= 1 tab/day
ALOGLIPTIN-METFORMIN TAB 12.5MG-1000MG, 12.5MG-500MG (<i>alogliptin-metformin hcl</i>)	F	QL QL= 2 tabs/day
ALOGLIPTIN-PIOGLITAZONE TAB 12.5MG-15MG, 12.5MG-30MG, 15MG-25MG, 25MG-30MG, 25MG-45MG (<i>alogliptin-pioglitazone</i>)	F	QL QL= 1 tab/day
<i>glipizide/metformin tab 2.5MG-250MG, 2.5MG-500MG, 5MG-500MG</i> (METAGLIP Equiv)	F	-
<i>glyburide/metformin tab 1.25MG-250MG, 2.5MG-500MG, 5MG-500MG</i> (GLUCOVANCE Equiv)	F	-
JANUMET TAB 50MG-1000MG, 50MG-500MG (<i>sitagliptin-metformin hcl</i>)	F	QL QL= 2 tabs/day
JANUMET XR TAB 100MG-1000MG, 50MG-1000MG, 50MG-500MG (<i>sitagliptin-metformin hcl</i>)	F	QL QL= 2 tabs/day
SYNJARDY TAB 12.5MG-1000MG, 12.5MG-500MG, 5MG-1000MG, 5MG-500MG (<i>empagliflozin-metformin hcl</i>)	F	QL QL= 2 tabs/day
SYNJARDY XR TAB 10-1000MG, 25-1000MG 10MG-1000MG, 25MG-1000MG (<i>empagliflozin-metformin hcl</i>)	F	QL QL= 1 tab/day

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SYNJARDY XR TAB 5-1000MG, 12.5-1000MG 12.5MG-1000MG, 5MG-1000MG (<i>empagliflozin-metformin hcl</i>)	F	QL QL= 2 tabs/day
XIGDUO XR TAB 2.5-1000MG, 5-1000MG 2.5MG-1000MG, 5MG-1000MG (<i>dapagliflozin-metformin hcl</i>)	F	QL QL= 2 tabs/day
XIGDUO XR TAB 5-500MG, 10-500MG, 10-1000MG 10MG-1000MG, 10MG-500MG, 5MG-500MG (<i>dapagliflozin-metformin hcl</i>)	F	QL QL= 1 tab/day
BIGUANIDES - Drugs to regulate blood sugar		
<i>metformin ER tab 500MG, 750MG</i> (GLUCOPHAGE XR Equiv)	F	-
<i>metformin tab 1000MG, 500MG, 850MG</i> (GLUCOPHAGE Equiv)	F	-
DIABETIC OTHER - Drugs to regulate blood sugar		
BAQSIMI NASAL POWDER 3MG/DOSE (<i>glucagon</i>)	F	QL QL= 2 inhalations/fill
GLUCAGEN HYPOKIT INJ 1MG (<i>glucagon hcl (rdna)</i>)	F	QL QL= 2 inj/fill
<i>glucagon (rdna) for inj kit 1MG</i> (GLUCAGON Equiv)	F	QL QL= 2 inj/fill
GLUCAGON EMR INJ 1MG/ML (<i>glucagon hcl</i>)	F	QL QL= 2 inj/fill

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GLUCAGON INJ KIT 1MG (<i>glucagon (rdna)</i>)	F	QL QL= 2 inj/fill
GVOKE INJ .5MG/0.1ML, 1MG/0.2ML (<i>glucagon</i>)	F	QL QL= 2 inj/fill
GVOKE INJ KIT 1MG/0.2ML (<i>glucagon</i>)	F	QL QL= 2 inj/fill
GVOKE PFS INJ .5MG/0.1ML, 1MG/0.2ML (<i>glucagon</i>)	F	QL QL= 2 inj/fill
KORLYM TAB 300MG (<i>mifepristone (hyperglycemia)</i>)	F	LD-PA-QL QL= 4 tabs/day; Only available through Korlym SPARK program 855-4Korlym (855-456-7596)
ZEGALOGUE INJ .6MG/0.6ML (<i>dasiglucagon hcl</i>)	F	QL QL= 2 inj/fill
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS - Drugs to regulate blood sugar		
ALOGLIPTIN TAB 12.5MG, 25MG, 6.25MG (<i>alogliptin benzoate</i>)	F	QL QL= 1 tab/day
JANUVIA TAB 100MG, 25MG, 50MG (<i>sitagliptin phosphate</i>)	F	QL QL= 1 tab/day
INCRETIN MIMETIC AGENTS ***		
OZEMPIC INJ 2MG/3ML (<i>semaglutide</i>)	F	QL QL= 1 pack/28 days
INCRETIN MIMETIC AGENTS (GLP-1 RECEPTOR AGONISTS) - Drugs to regulate blood sugar		

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BYDUREON BCISE AUTO INJ 2MG/0.85ML (<i>exenatide</i>)	F	QL-RDX QL= 4 inj/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
BYDUREON INJ (<i>exenatide</i>)	F	QL-RDX QL= 4 inj/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
BYDUREON PEN INJ 2MG (<i>exenatide</i>)	F	QL-RDX QL= 4 inj/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
MOUNJARO INJ 10MG/0.5ML, 12.5MG/0.5ML, 15MG/0.5ML, 2.5MG/0.5ML, 5MG/0.5ML, 7.5MG/0.5ML (<i>tirzepatide</i>)	F	QL-RDX QL= 4 inj/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
OZEMPIC INJ 2MG/1.5ML, 4MG/3ML, 5.5MG/ML-8MG/3ML-14MG/ML (<i>semaglutide</i>)	F	QL-RDX QL= 1 pack/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
RYBELSUS TAB 14MG, 3MG, 7MG (<i>semaglutide</i>)	F	QL-RDX QL=1 tab/day; Diagnosis Restricted – Type 2 Diabetes (E11)
TRULICITY INJ .75MG/0.5ML, 1.5MG/0.5ML, 3MG/0.5ML, 4.5MG/0.5ML (<i>dulaglutide</i>)	F	QL-RDX QL= 4 pens/28 days; Diagnosis Restricted – Type 2 Diabetes (E11)
VICTOZA INJ 18MG/3ML (<i>liraglutide</i>)	F	QL-RDX QL= 9ml/30 days; Diagnosis Restricted – Type 2 Diabetes (E11)
INSULIN - Drugs to regulate blood sugar		

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FIASP FLEXTOUCH INJ 100UNIT/ML (<i>insulin aspart (with niacinamide)</i>)	F	-
FIASP INJ 100UNIT/ML (<i>insulin aspart (with niacinamide)</i>)	F	-
FIASP PENFILL INJ 20.8MG/ML-100UNIT/ML (<i>insulin aspart (with niacinamide)</i>)	F	-
HUMULIN R INJ U-500 500UNIT/ML (<i>insulin regular (human)</i>)	F	-
HUMULIN R U-500 KWIKPEN INJ 500UNIT/ML (<i>insulin regular (human)</i>)	F	-
INSULIN ASPART FLEXPEN INJ 100UNIT/ML (NOVOLOG Equiv) (<i>insulin aspart</i>)	F	-
INSULIN ASPART INJ 100UNIT/ML (NOVOLOG Equiv) (<i>insulin aspart</i>)	F	-
INSULIN ASPART MIX FLEXPEN INJ 30UNIT/ML-70UNIT/ML (NOVOLOG Equiv) (<i>insulin aspart protamine & aspart (human)</i>)	F	-
INSULIN ASPART MIX INJ 30%-70%, 30UNIT/ML-70UNIT/ML (NOVOLOG Equiv) (<i>insulin aspart protamine & aspart (human)</i>)	F	-
INSULIN ASPART PENFILL INJ 100UNIT/ML (NOVOLOG Equiv) (<i>insulin aspart</i>)	F	-

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NOVOLIN 70/30 FLEXPEN INJ 30UNIT/ML-70UNIT/ML (<i>insulin nph isophane & reg (human)</i>)	F	OTC
NOVOLIN 70/30 INJ 30UNIT/ML-70UNIT/ML (<i>insulin nph isophane & reg (human)</i>)	F	OTC
NOVOLIN N FLEXPEN INJ 100UNIT/ML (<i>insulin nph (human) (isophane)</i>)	F	OTC
NOVOLIN N INJ 100UNIT/ML (<i>insulin nph (human) (isophane)</i>)	F	OTC
NOVOLIN R FLEXPEN INJ 100UNIT/ML (<i>insulin regular (human)</i>)	F	OTC
NOVOLIN R INJ 100UNIT/ML (<i>insulin regular (human)</i>)	F	OTC
NOVOLOG FLEXPEN INJ 100UNIT/ML (<i>insulin aspart</i>)	F	-
NOVOLOG INJ 100UNIT/ML (<i>insulin aspart</i>)	F	-
NOVOLOG MIX FLEXPEN INJ 30UNIT/ML-70UNIT/ML (<i>insulin aspart protamine & aspart (human)</i>)	F	-
NOVOLOG MIX INJ 30UNIT/ML-70UNIT/ML (<i>insulin aspart protamine & aspart (human)</i>)	F	-
NOVOLOG PENFILL INJ 100UNIT/ML (<i>insulin aspart</i>)	F	-

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SEMGLEE INJ, INSULIN GLARGINE-YFGN INJ 100UNIT/ML (<i>insulin glargine-yfgn</i>)	F	-
SEMGLEE PEN, INSULIN GLARGINE-YFGN PEN 100UNIT/ML (<i>insulin glargine-yfgn</i>)	F	-
INSULIN SENSITIZING AGENTS - Drugs to regulate blood sugar		
AVANDIA TAB 2MG, 4MG (<i>rosiglitazone maleate</i>)	F	-
<i>pioglitazone tab 15MG, 30MG, 45MG</i> (ACTOS TAB Equiv)	F	-
MEGLITINIDE ANALOGUES - Drugs to regulate blood sugar		
<i>nateglinide tab 120MG, 60MG</i> (STARLIX Equiv)	F	-
<i>repaglinide tab .5MG, 1MG, 2MG</i> (PRANDIN Equiv)	F	-
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS - Drugs to regulate blood sugar		
FARXIGA TAB 10MG, 5MG (<i>dapagliflozin propanediol</i>)	F	QL QL= 1 tab/day
JARDIANCE TAB 10MG, 25MG (<i>empagliflozin</i>)	F	QL QL= 1 tab/day
SULFONYLUREAS - Drugs to regulate blood sugar		
<i>glimepiride tab 1MG, 2MG, 4MG</i> (AMARYL Equiv)	F	-
<i>glipizide ER tab 10MG, 2.5MG, 5MG</i> (GLUCOTROL XL Equiv)	F	-
<i>glipizide tab 10MG, 5MG</i> (GLUCOTROL Equiv)	F	-
<i>glyburide micronized tab 1.5MG, 3MG, 6MG</i> (GLYNASE Equiv)	F	-

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<i>glyburide tab 1.25MG, 2.5MG, 5MG</i> (MICRONASE Equiv)	F	-
TOLAZAMIDE TAB 250MG (<i>tolazamide</i>)	F	-
TOLBUTAMIDE TAB 500MG (<i>tolbutamide</i>)	F	-
ANTIDIARRHEAL/PROBIOTIC AGENTS - Drugs to treat diarrhea		
ANTIPERISTALTIC AGENTS - Drugs to treat diarrhea		
DIPHENOXYLATE/ATROPINE LIQUID .025MG/5ML-2.5MG/5ML (<i>diphenoxylate w/ atropine</i>)	F	-
ANTIDIARRHEALS - Drugs to treat diarrhea		
ANTIPERISTALTIC AGENTS - Drugs to treat diarrhea		
<i>diphenoxylate/atropine tab .025MG-2.5MG</i> (LOMOTIL Equiv)	F	-
ANTIDOTES - Drugs to treat overdose or toxicity		
ANTIDOTES - CHELATING AGENTS - Drugs to treat overdose or toxicity		
CHEMET CAP 100MG (<i>succimer</i>)	F	-
FERRIPROX SOLN 100MG/ML (<i>deferiprone</i>)	F	LD-PA Only available through Ferriprox Total Care 866-758-7071
OPIOID ANTAGONISTS - Drugs to treat opioid overdose or toxicity		
<i>naltrexone tab 50MG</i> (REVIA Equiv)	F	-
ANTIDOTES AND SPECIFIC ANTAGONISTS - Drugs to treat overdose or toxicity		
ANTIDOTES - CHELATING AGENTS - Drugs to treat overdose or toxicity		

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<i>deferasirox granules packet 180MG, 360MG, 90MG</i> (JADENU Equiv)	F	LMSP
<i>deferasirox tab 125MG, 250MG, 500MG</i> (EXJADE Equiv)	F	LMSP
<i>deferasirox tab 180mg 180MG</i> (JADENU Equiv)	F	LMSP
<i>deferasirox tab 90mg, 360mg 360MG, 90MG</i> (JADENU Equiv)	F	LMSP
<i>deferiprone tab 1000MG, 500MG</i> (FERRIPROX Equiv)	F	LD-PA Only available through Lumicera 855-847-3553
OPIOID ANTAGONISTS - Drugs to treat opioid overdose or toxicity		
KLOXXADO NASAL SPRAY 8MG/0.1ML (<i>naloxone hcl</i>)	F	-
<i>naloxone hcl nasal spray 4MG/0.1ML</i> (NARCAN Equiv)	F	-
<i>naloxone inj .4MG/ML, 4MG/10ML</i>	F	-
NALOXONE PREFILLED INJ .4MG/ML (<i>naloxone hcl</i>)	\$0	-
<i>naloxone prefilled inj 2MG/2ML</i>	\$0	-
ZIMHI SOLN 5MG/0.5ML (<i>naloxone hcl</i>)	F	-
ANTIEMETICS - Drugs to treat nausea and vomiting		
5-HT3 RECEPTOR ANTAGONISTS - Drugs to treat nausea and vomiting		
<i>granisetron tab 1MG</i> (KYTRIL Equiv)	F	QL QL= 9 tabs/fill

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<i>ondansetron ODT 4MG, 8MG</i> (ZOFRAN Equiv)	F	-
<i>ondansetron soln 4MG/5ML</i> (ZOFRAN Equiv)	F	-
ONDANSETRON TAB 24MG (<i>ondansetron hcl</i>)	F	-
<i>ondansetron tab 24MG, 4MG, 8MG</i>	F	-
ANTIEMETICS - ANTICHOLINERGIC - Drugs to treat nausea and vomiting		
<i>meclizine chew tab 25MG</i> (BONINE Equiv)	F	OTC
<i>meclizine tab 12.5MG, 25MG</i> (ANTIVERT Equiv)	F	OTC
<i>scopolamine patch 1.5MG, 1MG/3DAYS</i> (TRANSDERM-SCOP Equiv)	F	-
<i>trimethobenzamide cap 300MG</i> (TIGAN Equiv)	F	-
ANTIEMETICS - MISCELLANEOUS - Miscellaneous anti-emetics		
AKYNZEO CAP .5MG-300MG (<i>netupitant-palonosetron</i>)	F	QL-RS QL= 1 cap/fill; Restricted to Oncology or Hematology Specialist
<i>dronabinol cap 10MG, 2.5MG, 5MG</i> (MARINOL Equiv)	F	PA
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS - Drugs to treat nausea and vomiting		
<i>aprepitant cap 125MG, 40MG, 80MG</i> (EMEND Equiv)	F	QL-RS QL= 3 caps/fill; Restricted to Oncology or Hematology Specialist
<i>aprepitant pak</i> (EMEND Equiv)	F	QL-RS QL= 3 caps/fill; Restricted to Oncology or Hematology Specialist

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VARUBI TAB 90MG (<i>rolapitant hcl</i>)	F	QL-RS QL= 2 tabs/day; Restricted to Oncology or Hematology Specialist
ANTIFUNGALS - Drugs to treat fungal infection		
ANTIFUNGALS - Drugs to treat fungal infection		
<i>flucytosine cap 250MG, 500MG</i> (ANCOBON Equiv)	F	-
<i>griseofulvin micro tab 500MG</i> (GRIFULVIN V Equiv)	F	-
<i>griseofulvin susp 125MG/5ML</i> (GRIFULVIN Equiv)	F	-
<i>griseofulvin tab 125MG, 250MG</i> (GRIS-PEG Equiv)	F	-
<i>nystatin powder</i>	F	-
<i>nystatin tab 500000UNIT</i>	F	-
<i>terbinafine tab 250MG</i> (LAMISIL Equiv)	F	-
IMIDAZOLE-RELATED ANTIFUNGALS - Drugs to treat fungal infections		
<i>fluconazole susp 10MG/ML, 40MG/ML</i> (DIFLUCAN Equiv)	F	-
<i>fluconazole tab 100MG, 150MG, 200MG, 50MG</i> (DIFLUCAN Equiv)	F	-
<i>itraconazole cap 100MG</i> (SPORANOX Equiv)	F	-
<i>ketoconazole tab 200MG</i> (NIZORAL Equiv)	F	-
<i>voriconazole tab 200MG, 50MG</i> (VFEND Equiv)	F	-
ANTIHIISTAMINES - Drugs to treat allergies		
ANTIHIISTAMINES - ETHANOLAMINES - Drugs to treat cough, cold, and allergy symptoms		
<i>diphenhydramine cap 50mg 50MG</i> (BENADRYL Equiv)	F	Only 50mg covered

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ANTIHISTAMINES - NON-SEDATING - Drugs to treat cough, cold, and allergy symptoms		
<i>cetirizine syrup 1MG/ML, 5MG/5ML</i> (ZYRTEC Equiv)	F	OTC
<i>cetirizine tab 10MG, 5MG</i> (ZYRTEC Equiv)	F	OTC
<i>loratadine chew tab 5MG</i> (CLARITIN Equiv)	F	OTC
<i>loratadine ODT 10MG</i> (CLARITIN Equiv)	F	OTC
<i>loratadine syrup 5MG/5ML</i> (CLARITIN Equiv)	F	OTC
<i>loratadine tab 10MG</i> (CLARITIN Equiv)	F	OTC
ANTIHISTAMINES - PHENOTHIAZINES - Drugs to treat cough, cold, and allergy symptoms		
<i>promethazine supp 12.5MG, 25MG, 50MG</i> (PHENERGAN Equiv)	F	-
<i>promethazine syrup 6.25MG/5ML</i>	F	-
<i>promethazine tab 12.5MG, 25MG, 50MG</i> (PHENERGAN Equiv)	F	-
PROMETHEGAN SUPP 50MG (<i>promethazine hcl</i>)	F	-
ANTIHISTAMINES - PIPERIDINES - Drugs to treat cough, cold, and allergy symptoms		
<i>cyproheptadine syrup 2MG/5ML</i>	F	-
<i>cyproheptadine tab 4MG</i>	F	-
ANTIHYPERLIPIDEMICS - Drugs to treat high cholesterol		
ANTIHYPERLIPIDEMICS - MISC. - Miscellaneous anti-hyperlipidemics		
<i>omega-3-acid ethyl esters cap 1GM-375MG-465MG</i> (LOVAZA Equiv)	F	-
BILE ACID SEQUESTRANTS - Drugs to treat high cholesterol		
<i>cholestyramine lite powder 4GM/DOSE</i> (QUESTAN LITE Equiv)	F	-

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<i>cholestyramine lite powder pack 4GM</i> (QUESTRAN LITE Equiv)	F	-
<i>cholestyramine powder 4GM/DOSE</i> (QUESTRAN Equiv)	F	-
<i>cholestyramine powder pack 4GM</i> (QUESTRAN Equiv)	F	-
<i>colesevelam pack 3.75GM</i> (WELCHOL Equiv)	F	-
<i>colesevelam tab 625MG</i> (WELCHOL Equiv)	F	-
<i>colestipol tab 1GM</i> (COLESTID Equiv)	F	-
FIBRIC ACID DERIVATIVES - Drugs to treat high cholesterol		
<i>fenofibrate cap 67mg, 134mg, 200mg 134MG, 200MG, 67MG</i> (LOFIBRA Equiv)	F	-
<i>fenofibrate tab 48mg, 54mg, 145mg, 160mg 145MG, 160MG, 48MG, 54MG</i> (TRICOR Equiv)	F	-
<i>fenofibric acid DR cap 135MG, 45MG</i> (TRILIPIX Equiv)	F	-
<i>gemfibrozil tab 600MG</i> (LOPID Equiv)	F	-
HMG COA REDUCTASE INHIBITORS - Drugs to treat high cholesterol		
<i>atorvastatin tab 10MG, 20MG, 40MG, 80MG</i> (LIPITOR Equiv)	\$0	-
<i>lovastatin tab 10MG, 20MG, 40MG</i> (MEVACOR Equiv)	\$0	-
<i>pravastatin tab 10MG, 20MG, 40MG, 80MG</i> (PRAVACHOL Equiv)	\$0	-

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<i>rosuvastatin tab 10MG, 20MG, 40MG, 5MG</i> (CRESTOR Equiv)	\$0	-
<i>simvastatin tab 10MG, 20MG, 40MG, 5MG</i> (ZOCOR Equiv)	\$0	80mg is Not Covered
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS - Drugs to treat high cholesterol		
<i>ezetimibe tab 10MG</i> (ZETIA Equiv)	F	-
NICOTINIC ACID DERIVATIVES - Drugs to treat high cholesterol		
<i>niacin ER tab 1000MG, 500MG, 750MG</i> (NIASPAN Equiv)	F	-
PROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS - Drugs to treat high cholesterol		
REPATHA INJ 140MG/ML (<i>evolocumab</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
REPATHA PUSHTRONEX INJ 420MG/3.5ML (<i>evolocumab</i>)	F	LMSP-PA-QL QL= 1 inj/28 days
ANTIHYPERTENSIVES - Drugs to treat high blood pressure		
ACE INHIBITORS - Drugs to treat high blood pressure		
<i>benazepril tab 10MG, 20MG, 40MG, 5MG</i> (LOTENSIN Equiv)	F	-
<i>captopril tab 100MG, 12.5MG, 25MG, 50MG</i> (CAPOTEN Equiv)	F	-
<i>enalapril tab 10MG, 2.5MG, 20MG, 5MG</i> (VASOTEC Equiv)	F	-

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<i>fosinopril tab 10MG, 20MG, 40MG</i> (MONOPRIL Equiv)	F	-
<i>lisinopril tab 10MG, 2.5MG, 20MG, 30MG, 40MG, 5MG</i> (PRINIVIL/ZESTRIL Equiv)	F	-
<i>quinapril tab 10MG, 20MG, 40MG, 5MG</i> (ACCUPRIL Equiv)	F	-
<i>ramipril cap 1.25MG, 10MG, 2.5MG, 5MG</i> (ALTACE Equiv)	F	-
AGENTS FOR PHEOCHROMOCYTOMA - Drugs to treat high blood pressure		
<i>phenoxybenzamine cap 10MG</i> (DIBENZYLINE Equiv)	F	LMSP
ANGIOTENSIN II RECEPTOR ANTAGONISTS - Drugs to treat high blood pressure		
<i>irbesartan tab 150MG, 300MG, 75MG</i> (AVAPRO Equiv)	F	-
<i>losartan tab 100MG, 25MG, 50MG</i> (COZAAR Equiv)	F	-
<i>olmesartan tab 20MG, 40MG, 5MG</i> (BENICAR Equiv)	F	-
<i>telmisartan tab 20MG, 40MG, 80MG</i> (MICARDIS Equiv)	F	-
<i>valsartan tab 160MG, 320MG, 40MG, 80MG</i> (DIOVAN Equiv)	F	-
ANTIADRENERGIC ANTIHYPERTENSIVES - Drugs to treat high blood pressure		
<i>clonidine patch .1MG/24HR, .2MG/24HR, .3MG/24HR</i> (CATAPRES-TTS Equiv)	F	-
<i>clonidine tab .1MG, .2MG, .3MG</i> (CATAPRES Equiv)	F	-

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<i>doxazosin tab 1MG, 2MG, 4MG, 8MG</i> (CARDURA Equiv)	F	-
<i>guanfacine IR tab 1MG, 2MG</i> (TENEX Equiv)	F	-
METHYLDOPA TAB 250MG, 500MG (ALDOMET Equiv) (<i>methyldopa</i>)	F	-
<i>methyldopa tab 250MG, 500MG</i> (ALDOMET Equiv)	F	-
<i>prazosin cap</i> (MINIPRESS Equiv)	F	-
<i>terazosin cap 10MG, 1MG, 2MG, 5MG</i> (HYTRIN Equiv)	F	-
ANTIHYPERTENSIVE COMBINATIONS - Drugs to treat high blood pressure		
<i>amlodipine/benazepril cap 10MG-20MG, 10MG-40MG, 2.5MG-10MG, 5MG-10MG, 5MG-20MG, 5MG-40MG</i> (LOTREL Equiv)	F	-
<i>amlodipine/olmesartan tab 10MG-20MG, 10MG-40MG, 5MG-20MG, 5MG-40MG</i> (AZOR TAB Equiv)	F	-
<i>amlodipine/valsartan tab 10MG-160MG, 10MG-320MG, 5MG-160MG, 5MG-320MG</i> (EXFORGE Equiv)	F	-
<i>amlodipine/valsartan/hydrochlorothiazide tab 10MG-12.5MG-160MG, 10MG-25MG-160MG, 10MG-25MG-320MG, 5MG-12.5MG-160MG, 5MG-25MG-160MG</i> (EXFORGE HCT Equiv)	F	-

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<i>atenolol/chlorthalidone tab 25MG-100MG, 25MG-50MG</i> (TENORETIC Equiv)	F	-
<i>benazepril/hydrochlorothiazide tab 10MG-12.5MG, 12.5MG-20MG, 20MG-25MG, 5MG-6.25MG</i> (LOTENSIN HCT Equiv)	F	-
<i>bisoprolol/hydrochlorothiazide tab 2.5MG-6.25MG, 5MG-6.25MG, 6.25MG-10MG</i> (ZIAC Equiv)	F	-
<i>enalapril/hydrochlorothiazide tab 10MG-25MG, 5MG-12.5MG</i> (VASERETIC Equiv)	F	-
<i>fosinopril/hydrochlorothiazide tab 10MG-12.5MG, 12.5MG-20MG</i> (MONOPRIL HCT Equiv)	F	-
<i>irbesartan/hydrochlorothiazide tab 12.5MG-150MG, 12.5MG-300MG</i> (AVALIDE Equiv)	F	-
<i>lisinopril/hydrochlorothiazide tab 10MG-12.5MG, 12.5MG-20MG, 20MG-25MG</i> (ZESTORETIC Equiv)	F	-
<i>losartan/hydrochlorothiazide tab 12.5MG-100MG, 12.5MG-50MG, 25MG-100MG</i> (HYZAAR Equiv)	F	-
METHYLDOPA/HYDROCHLOROTHIAZIDE TAB 15MG-250MG, 25MG-250MG (<i>methyldopa & hydrochlorothiazide</i>)	F	-
<i>metoprolol/hydrochlorothiazide tab 25MG-100MG, 25MG-50MG, 50MG-100MG</i> (LOPRESSOR HCT Equiv)	F	-

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<i>olmesartan/hydrochlorothiazide tab 12.5MG-20MG, 12.5MG-40MG, 25MG-40MG</i> (BENICAR HCT Equiv)	F	-
PROPRANOLOL/HYDROCHLOROTHIAZIDE TAB 25MG-40MG, 25MG-80MG (<i>propranolol & hydrochlorothiazide</i>)	F	-
<i>quinapril/hydrochlorothiazide tab 10MG-12.5MG, 12.5MG-20MG, 20MG-25MG</i> (ACCURETIC Equiv)	F	-
<i>valsartan/hydrochlorothiazide tab 12.5MG-160MG, 12.5MG-320MG, 12.5MG-80MG, 25MG-160MG, 25MG-320MG</i> (DIOVAN HCT Equiv)	F	-
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS) - Drugs to treat high blood pressure		
<i>eplerenone tab 25MG, 50MG</i> (INSPIRA Equiv)	F	-
VASODILATORS - Drugs to treat high blood pressure		
<i>hydralazine tab 100MG, 10MG, 25MG, 50MG</i> (APRESOLINE Equiv)	F	-
<i>minoxidil tab 10MG, 2.5MG</i> (LONITEN Equiv)	F	-
ANTI-INFECTIVE AGENTS - MISC. - Miscellaneous anti-infective drugs		
ANTI-INFECTIVE AGENTS - MISC. - Miscellaneous anti-infective drugs		
IMPAVIDO CAP 50MG (<i>miltefosine</i>)	F	PA
<i>metronidazole tab 250MG, 500MG</i> (FLAGYL Equiv)	F	-
<i>pentamidine neb soln 300MG</i> (NEBUPENT Equiv)	F	LMSP
<i>tinidazole tab 250MG, 500MG</i> (TINDAMAX Equiv)	F	-
TRIMETHOPRIM TAB 100MG (<i>trimethoprim</i>)	F	-

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<i>trimethoprim tab</i>	F	-
XIFAXAN TAB 550MG 550MG (<i>rifaximin</i>)	F	QL QL= 60 tabs/30 days
ANTI-INFECTIVE MISC. - COMBINATIONS - Miscellaneous anti-infective drug combinations		
<i>smz/tmp (DS) tab 160MG-800MG, 80MG-400MG</i> (BACTRIM DS Equiv)	F	-
<i>smz/tmp susp 40MG/5ML-200MG/5ML</i> (BACTRIM, SEPTRA Equiv)	F	-
ANTIPROTOZOAL AGENTS - Drugs to treat protozoan infections		
ALINIA SUSP 100MG/5ML (<i>nitazoxanide</i>)	F	PA-QL QL= 60ml/3 days
<i>atovaquone susp 750MG/5ML</i> (MEPRON Equiv)	F	-
LAMPIT TAB 120MG, 30MG (<i>nifurtimox</i>)	F	PA
<i>nitazoxanide tab 500MG</i> (ALINIA Equiv)	F	PA-QL QL= 6 tabs/3 days
GLYCOPEPTIDES - Drugs to treat bacterial infections		
FIRVANQ SOLN 25MG/ML, 50MG/ML (<i>vancomycin hcl</i>)	F	-
<i>vancomycin cap 125MG, 250MG</i> (VANCOCIN Equiv)	F	QL QL= 56 caps/fill
LEPROSTATICS - Drugs to treat Leprosy (bacterial infections)		
<i>dapsone tab 100MG, 25MG</i>	F	-
LINCOSAMIDES - Drugs to treat bacterial infections		

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<i>clindamycin cap 150MG, 300MG, 75MG</i> (CLEOCIN Equiv)	F	-
MONOBACTAMS - Drugs to treat bacterial infections		
CAYSTON INH SOLN 75MG (<i>aztreonam lysine</i>)	F	KMSP-RS Restricted to Infectious Disease or Pulmonology Specialist
OXAZOLIDINONES - Drugs to treat bacterial infections		
<i>linezolid susp 100MG/5ML</i> (ZYVOX Equiv)	F	RS Restricted to Infectious Disease Specialist
<i>linezolid tab 600MG</i> (ZYVOX Equiv)	F	RS Restricted to Infectious Disease Specialist
SIVEXTRO TAB 200MG (<i>tedizolid phosphate</i>)	F	QL-RS QL= 6 tabs/fill; Restricted to Infectious Disease Specialist
SIVEXTRO TAB 200MG (<i>tedizolid phosphate</i>)	F	QL-RS QL= 6 tabs/fill; Restricted to Infectious Disease Specialist
PLEUROMUTILINS - drugs to treat infections		
XENLETA TAB 600MG (<i>lefamulin acetate</i>)	F	QL-RS QL= 14 tabs/180 days; Restricted to Infectious Disease Specialist
URINARY ANTI-INFECTIVES - Drugs to treat bladder/kidney infections		

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
<i>methenamine hippurate tab 1GM</i> (HIPREX Equiv)	F	-
<i>nitrofurantoin macrocrystals cap 100MG, 50MG</i> (MACRODANTIN Equiv)	F	-
<i>nitrofurantoin monohydrate cap 100MG</i> (MACROBID Equiv)	F	-
ANTIMALARIALS - Drugs to treat malaria (parasitic infections)		
ANTIMALARIAL COMBINATIONS - Drugs to treat malaria (parasitic infections)		
<i>atovaquone/proguanil tab 100MG-250MG, 25MG-62.5MG</i> (MALARONE Equiv)	F	-
ANTIMALARIALS - Drugs to treat malaria (parasitic infections)		
<i>chloroquine tab 250MG, 500MG</i> (ARALEN Equiv)	F	-
<i>hydroxychloroquine tab 100MG, 200MG, 300MG, 400MG</i> (PLAQUENIL Equiv)	F	-
KRINTAFEL TAB 150MG (<i>tafenoquine succinate</i>)	F	-
<i>mefloquine tab 250MG</i> (LARIAM Equiv)	F	-
<i>primaquine tab 26.3MG</i> (PRIMAQUINE Equiv)	F	-
<i>pyrimethamine tab 25MG</i> (DARAPRIM Equiv)	F	LD-PA-QL QL= 3 tabs/day; Only available through Walgreens 888-347-3416
ANTIMYASTHENIC/CHOLINERGIC AGENTS - Drugs to treat neurological disorders		
ANTIMYASTHENIC/CHOLINERGIC AGENTS - Drugs to treat neurological disorders		
FIRDAPSE TAB 10MG (<i>amifampridine phosphate</i>)	F	LD-PA Only available through AnovoRx 844-288-5007

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<i>pyridostigmine CR tab 180MG</i> (MESTINON Equiv)	F	-
<i>pyridostigmine tab 60MG</i> (MESTINON Equiv)	F	-
ANTIMYCOBACTERIAL AGENTS - Drugs to treat Tuberculosis (bacterial infections)		
ANTI TB COMBINATIONS - Drugs to treat Tuberculosis (bacterial infections)		
RIFAMATE CAP 150MG-300MG (<i>isoniazid & rifampin</i>)	F	-
ANTIMYCOBACTERIAL AGENTS - Drugs to treat Tuberculosis (bacterial infections)		
<i>ethambutol tab 100MG, 400MG</i> (MYAMBUTOL Equiv)	F	-
ISONIAZID SYRUP 50MG/5ML (<i>isoniazid</i>)	F	-
ISONIAZID TAB 100MG (<i>isoniazid</i>)	F	-
<i>isoniazid tab 100MG, 300MG</i>	F	-
PRETOMANID TAB 200MG (<i>pretomanid</i>)	F	QL-RS QL= 1 tab/day; Restricted to Infectious Disease Specialist
PRIFTIN TAB 150MG (<i>rifapentine</i>)	F	-
<i>pyrazinamide tab 500MG</i>	F	-
<i>rifabutin cap 150MG</i> (MYCOBUTIN Equiv)	F	-
<i>rifampin cap 150MG, 300MG</i> (RIFADIN Equiv)	F	-
ANTINEOPLASTICS - Drugs to treat cancer		
ALKYLATING AGENTS - Drugs to treat cancer		
HEXALEN CAP (<i>altretamine</i>)	F	LMSP
LEUKERAN TAB 2MG (<i>chlorambucil</i>)	F	LMSP
ANTIMETABOLITES - Drugs to treat cancer		

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<i>mercaptopurine tab 50MG</i> (PURINETHOL Equiv)	F	-
<i>methotrexate tab 2.5MG</i> (Trexall Equiv)	F	-
TABLOID TAB 40MG (<i>thioguanine</i>)	F	-
ANTINEOPLASTIC ENZYME INHIBITORS - Drugs to treat cancer		
ZOLINZA CAP 100MG (<i>vorinostat</i>)	F	LMSP-PA-SF
ANTINEOPLASTICS MISC. - Miscellaneous drugs to treat cancer		
ACTIMMUNE INJ 2000000UNIT/0.5ML (<i>interferon gamma-1b</i>)	F	LD-PA Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
ALFERON-N INJ 5000000UNIT/ML (<i>interferon alfa-n3</i>)	F	LMSP
<i>hydroxyurea cap 500MG</i> (HYDREA Equiv)	F	-
INTRON-A INJ 10000000UNIT, 18000000UNIT, 50000000UNIT (<i>interferon alfa-2b</i>)	F	KMSP
MATULANE CAP 50MG (<i>procarbazine hcl</i>)	F	-
<i>tretinoin cap 10MG</i> (VESANOID Equiv)	F	LMSP
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS - Drugs to protect against chemotherapy drugs		
<i>leucovorin tab 10MG, 15MG, 25MG, 5MG</i>	F	-
MESNEX TAB 400MG (<i>mesna</i>)	F	LMSP
TOPOISOMERASE I INHIBITORS - Drugs to treat cancer		
HYCANTIN CAP .25MG, 1MG (<i>topotecan hcl</i>)	F	LMSP-PA
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES - Drugs to treat cancer		
ALKYLATING AGENTS - Drugs to treat cancer		

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<i>cyclophosphamide cap 25MG, 50MG</i>	F	-
CYCLOPHOSPHAMIDE TAB 25MG, 50MG (<i>cyclophosphamide</i>)	F	-
GLEOSTINE/LOMUSTINE CAP 100MG, 10MG, 40MG (<i>lomustine</i>)	F	-
<i>melphalan tab 2MG</i> (ALKERAN Equiv)	F	LMSP
MYLERAN TAB 2MG (<i>busulfan</i>)	F	LMSP
<i>temozolomide cap 100MG, 140MG, 180MG, 20MG, 250MG, 5MG</i> (TEMODAR Equiv)	F	LMSP
ANTIMETABOLITES - Drugs to treat cancer		
<i>capecitabine tab 150MG, 500MG</i> (XELODA Equiv)	F	LMSP
<i>methotrexate inj 1GM</i>	F	-
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS - Drugs to treat cancer		
INLYTA TAB 1MG, 5MG (<i>axitinib</i>)	F	KMSP-PA-QL-SF QL= 8 tabs/day
LENVIMA CAP 10MG, 4MG (<i>lenvatinib mesylate</i>)	F	LD-PA-QL QL= 3 caps/day; Only available through Optum 877-445-6874
ANTINEOPLASTIC - ANTI-HER2 AGENTS - Drugs to treat cancer		
TUKYSA TAB 150MG, 50MG (<i>tucatinib</i>)	F	LD-PA-QL-SF QL= 4 tabs/day; Only available through Biologics 800-850-4306
ANTINEOPLASTIC - BCL-2 INHIBITORS - Drugs to treat cancer		

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VENCLEXTA STARTER PACK (<i>venetoclax</i>)	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118
VENCLEXTA TAB 100MG, 10MG, 50MG (<i>venetoclax</i>)	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118
ANTINEOPLASTIC - EGFR INHIBITORS - Drugs to treat cancer		
<i>erlotinib tab 100MG, 150MG, 25MG</i> (TARCEVA Equiv)	F	LMSP-PA-SF
EXKIVITY CAP 40MG (<i>mobocertinib succinate</i>)	F	LD-PA-QL-SF QL= 4 caps/day; Only available through Biologics 800-850-4306
GILOTRIF TAB 20MG, 30MG, 40MG (<i>afatinib dimaleate</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Accredo 800-803-2523
IRESSA TAB 250MG (<i>gefitinib</i>)	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118
TAGRISSO TAB 40MG, 80MG (<i>osimertinib mesylate</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through Diplomat Pharmacy 877-977-9118
VIZIMPRO TAB 15MG, 30MG, 45MG (<i>dacomitinib</i>)	F	KMSP-PA-QL-SF QL= 1 tab/day
ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS - Drugs to treat cancer		
ERIVEDGE CAP 150MG (<i>vismodegib</i>)	F	LMSP-PA-SF

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ODOMZO CAP 200MG (<i>sonidegib phosphate</i>)	F	LMSP-PA-SF
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS - Drugs to treat cancer		
<i>abiraterone tab 250mg 250MG</i> (ZYTIGA Equiv)	F	LMSP-QL QL= 4 tabs/day
<i>anastrozole tab 1MG</i> (ARIMIDEX Equiv)	\$0	Covered at \$0 for women 35 years or older; All other members covered at generic copay
<i>bicalutamide tab 50MG</i> (CASODEX Equiv)	F	-
EMCYT CAP 140MG (<i>estramustine phosphate sodium</i>)	F	-
ERLEADA TAB 240MG, 60MG (<i>apalutamide</i>)	F	LMSP-PA-QL QL= 4 tabs/day
EULEXIN CAP 125MG (<i>flutamide</i>)	F	-
<i>exemestane tab 25MG</i> (AROMASIN Equiv)	\$0	Covered at \$0 for women 35 years or older; All other members covered at generic copay
FLUTAMIDE CAP 125MG (<i>flutamide</i>)	F	-
<i>flutamide cap 125MG</i>	F	-
<i>letrozole tab 2.5MG</i> (FEMARA Equiv)	F	-
LYSODREN TAB 500MG (<i>mitotane</i>)	F	LD Only available through Walgreens 888-347-3416
<i>megestrol susp 400MG/10ML, 40MG/ML, 800MG/20ML</i> (MEGACE Equiv)	F	-

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<i>megestrol tab 20MG, 40MG</i> (MEGACE Equiv)	F	-
<i>nilutamide tab 150MG</i> (NILANDRON Equiv)	F	LMSP
NUBEQA TAB 300MG (<i>darolutamide</i>)	F	MSP-PA-QL-SF QL= 4 tabs/day
ORGOVYX TAB 120MG (<i>relugolix</i>)	F	LD-PA-QL QL= 30 tabs/28 days; Only available through Biologics 800-850-4306
<i>tamoxifen tab 10MG, 20MG</i> (NOLVADEX Equiv)	\$0	Covered at \$0 for women 35 years or older; All other members covered at generic copay
<i>toremifene tab 60MG</i> (FARESTON Equiv)	F	-
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS- Drugs to treat tumors		
WELIREG TAB 40MG (<i>belzutifan</i>)	F	LD-PA-QL QL= 3 tabs/day; Only available through Biologics 800-850-4306
ANTINEOPLASTIC - IMMUNOMODULATORS - Drugs to treat cancer		
POMALYST CAP 1MG, 2MG, 3MG, 4MG (<i>pomalidomide</i>)	F	KMSP-PA-QL QL= 21 caps/28 days
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS - Drugs to treat cancer		
AYVAKIT TAB 100MG, 200MG, 25MG, 300MG, 50MG (<i>avapritinib</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through Biologics 800-850-4306
ANTINEOPLASTIC - XPO1 INHIBITORS - Drugs to treat cancer		

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XPOVIO PAK 20MG, 40MG, 50MG, 60MG (<i>selinexor</i>)	F	LD-PA-QL-SF QL= 32 tabs/28 days; Only available through Biologics 800-850-4306
ANTINEOPLASTIC COMBINATIONS - Drugs to treat cancer		
INQOVI TAB 35MG-100MG (<i>decitabine-cedazuridine</i>)	F	MSP-PA-QL QL= 5 tabs/28 days
LONSURF TAB 6.14MG-15MG, 8.19MG-20MG (<i>trifluridine-tipiracil</i>)	F	MSP-PA
ANTINEOPLASTIC ENZYME INHIBITORS - Drugs to treat cancer		
ALECENSA CAP 150MG (<i>alectinib hcl</i>)	F	LMSP-PA-QL QL= 8 caps/day
ALUNBRIG TAB 30MG 30MG (<i>brigatinib</i>)	F	LD-PA-QL-SF QL= 4 tabs/day; Only available through Biologics 800-850-4306
ALUNBRIG TAB 90MG, 180MG 180MG, 90MG (<i>brigatinib</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through Biologics 800-850-4306
BALVERSA TAB 3MG 3MG (<i>erdafitinib</i>)	F	LD-PA-QL-SF QL= 3 tabs/day; Only available through CVS Specialty 800-237-2767
BALVERSA TAB 4MG 4MG (<i>erdafitinib</i>)	F	LD-PA-QL-SF QL= 2 tabs/day; Only available through CVS Specialty 800-237-2767

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BALVERSA TAB 5MG 5MG (<i>erdafitinib</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through CVS Specialty 800-237-2767
BOSULIF TAB 100MG, 400MG, 500MG (<i>bosutinib</i>)	F	KMSP-PA-SF
BRAFTOVI CAP 75MG 75MG (<i>encorafenib</i>)	F	LD-PA-QL QL= 6 caps/day; Only available through Diplomat Pharmacy 877-977-9118
BRUKINSA CAP 80MG (<i>zanubrutinib</i>)	F	LD-PA-QL-SF QL= 4 caps/day; Only available through Biologics 800-850-4306
CABOMETYX TAB 20MG, 40MG, 60MG (<i>cabozantinib s-malate</i>)	F	MSP-PA-QL-SF QL= 1 tab/day
CALQUENCE CAP 100MG (<i>acalabrutinib</i>)	F	LD-PA-QL-SF QL= 2 caps/day; Only available through Diplomat Pharmacy 877-977-9118
CALQUENCE TAB 100MG (<i>acalabrutinib maleate</i>)	F	LD-PA-QL-SF QL= 2 tabs/day; Only available through Diplomat Pharmacy 877-977-9118
CAPRELSA TAB 100MG, 300MG (<i>vandetanib</i>)	F	LD-PA Only available through Biologics 800-850-4306
COMETRIQ KIT 20MG (<i>cabozantinib s-malate</i>)	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118

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COPIKTRA CAP 15MG, 25MG (<i>duvelisib</i>)	F	LD-PA-QL QL= 2 caps/day; Only available through Diplomat Pharmacy 877-977-9118
COTELLIC TAB 20MG (<i>cobimetinib fumarate</i>)	F	LMSP-PA-QL QL= 3 tabs/day
<i>everolimus tab 10MG, 2.5MG, 5MG, 7.5MG</i> (AFINITOR Equiv)	F	LMSP-PA-QL QL= 1 tab/day
<i>everolimus tab for oral susp 2MG, 3MG, 5MG</i> (AFINITOR DISPERZ Equiv)	F	LMSP-PA-QL QL= 1 tab/day
FOTIVDA CAP .89MG, 1.34MG (<i>tivozanib hcl</i>)	F	LD-PA-QL QL= 21 caps/28 days; Only available through Biologics 800-850-4306
GAVRETO CAP 100MG (<i>pralsetinib</i>)	F	LD-PA-QL-SF QL= 4 caps/day; Only available through Lumicera 855-847-3553
IBRANCE CAP 100MG, 125MG, 75MG (<i>palbociclib</i>)	F	KMSP-PA-QL QL= 21 caps/28 days
IBRANCE TAB 100MG, 125MG, 75MG (<i>palbociclib</i>)	F	KMSP-PA-QL QL= 21 caps/28 days
ICLUSIG TAB 10MG, 15MG, 30MG, 45MG (<i>ponatinib hcl</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through AcariaHealth 800-511-5144
IDHIFA TAB 100MG, 50MG (<i>enasidenib mesylate</i>)	F	MSP-PA-QL QL= 1 tab/day

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<i>imatinib tab 100MG, 400MG</i> (GLEEVEC Equiv)	F	LMSP-PA-QL QL= 3 tabs/day
IMBRUVICA CAP 140MG 140MG (<i>ibrutinib</i>)	F	LD-PA-QL QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118
IMBRUVICA CAP 70MG 70MG (<i>ibrutinib</i>)	F	LD-PA-QL QL= 1 cap/day; Only available through Diplomat Pharmacy 877-977-9118
IMBRUVICA SUSP 70MG/ML (<i>ibrutinib</i>)	F	LD-PA-QL QL= 6ml/day; Only available through Diplomat Pharmacy 877-977-9118
IMBRUVICA TAB 420MG, 560MG 420MG, 560MG (<i>ibrutinib</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Diplomat Pharmacy 877-977-9118
JAKAFI TAB 10MG, 15MG, 20MG, 25MG, 5MG (<i>ruxolitinib phosphate</i>)	F	MSP-PA-QL-SF QL= 2 tabs/day
KOSELUGO CAP 25MG (<i>selumetinib sulfate</i>)	F	LD-PA-QL QL= 4 caps/day; Only available through Onco360 877-662-6633
KOSELUGO CAP 10MG 10MG (<i>selumetinib sulfate</i>)	F	LD-PA-QL QL= 8 caps/day; Only available through Onco360 877-662-6633
<i>lapatinib ditosylate tab 250MG</i> (TYKERB Equiv)	F	LMSP-PA
LORBRENA TAB 100MG 100MG (<i>lorlatinib</i>)	F	KMSP-PA-QL-SF QL= 1 tab/day

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LORBRENA TAB 25MG 25MG (<i>lorlatinib</i>)	F	KMSP-PA-QL-SF QL= 3 tabs/day
LUMAKRAS TAB 120MG (<i>sotorasib</i>)	F	LD-PA-QL-SF QL= 8 tabs/day; Only available through Biologics 800-850-4306
LYNPARZA CAP (<i>olaparib</i>)	F	LD-PA-QL-SF Only available through Biologics 800-850-4306, QL= 16 caps/day
LYNPARZA TAB 100MG, 150MG (<i>olaparib</i>)	F	LD-PA-QL-SF Only available through Biologics 800-850-4306, QL= 4 tabs/day
MEKINIST TAB 0.5MG .5MG (<i>trametinib dimethyl sulfoxide</i>)	F	LMSP-PA-QL QL= 3 tabs/day
MEKINIST TAB 2MG 2MG (<i>trametinib dimethyl sulfoxide</i>)	F	LMSP-PA-QL QL= 1 tab/day
MEKTOVI TAB 15MG (<i>binimetinib</i>)	F	MSP-PA-QL QL= 6 tabs/day
NERLYNX TAB 40MG (<i>neratinib maleate</i>)	F	LD-PA-QL-SF QL= 6 tabs/day; Only available through Diplomat Pharmacy 877-977-9118
NINLARO CAP 2.3MG, 3MG, 4MG (<i>ixazomib citrate</i>)	F	LD-PA Only available through Diplomat 877-977-9118, Walgreens 888-347-3416, Walmart Specialty 877-453-4566

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PEMAZYRE TAB 13.5MG, 4.5MG, 9MG (<i>pemigatinib</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Biologics 800-850-4306
PIQRAY TAB 150MG, 200MG (<i>alpelisib</i>)	F	LMSP-PA-SF
QINLOCK TAB 50MG (<i>ripretinib</i>)	F	LD-PA-QL QL= 3 tabs/day; Only available through Biologics 800-850-4306
RETEVMO CAP 40MG, 80MG (<i>selpercatinib</i>)	F	LMSP-PA-QL-SF QL= 4 caps/day
ROZLYTREK CAP 100MG, 200MG (<i>entrectinib</i>)	F	LMSP-PA-QL QL= 3 caps/day
RUBRACA TAB 200MG, 250MG, 300MG (<i>rucaparib camsylate</i>)	F	LD-PA-QL-SF QL= 4 tabs/day; Only available through Optum 877-445-6874
RYDAPT CAP 25MG (<i>midostaurin</i>)	F	LMSP-PA-QL QL= 56 caps/28 days
<i>sorafenib tosylate tab 200MG</i> (NEXAVAR Equiv)	F	LMSP-PA-SF
SPRYCEL TAB 100MG, 140MG, 20MG, 50MG, 70MG, 80MG (<i>dasatinib</i>)	F	LMSP-PA-SF
STIVARGA TAB 40MG (<i>regorafenib</i>)	F	MSP-PA-QL-SF QL= 4 tabs/day
<i>sunitinib malate cap 12.5MG, 25MG, 37.5MG, 50MG</i> (SUTENT Equiv)	F	LMSP-PA-SF
TABRECTA TAB 150MG, 200MG (<i>capmatinib hcl</i>)	F	LMSP-PA-QL-SF QL= 4 tabs/day

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TAFINLAR CAP 50MG, 75MG (<i>dabrafenib mesylate</i>)	F	LMSP-PA-QL QL= 4 caps/day
TALZENNA CAP 0.25MG .25MG (<i>talazoparib tosylate</i>)	F	KMSP-PA-QL-SF QL= 3 caps/day
TALZENNA CAP 0.5MG, 0.75MG, 1MG .5MG, .75MG, 1MG (<i>talazoparib tosylate</i>)	F	KMSP-PA-QL-SF QL= 1 cap/day
TASIGNA CAP 150MG, 200MG, 50MG (<i>nilotinib hcl</i>)	F	LMSP-PA-SF
TAZVERIK TAB 200MG (<i>tazemetostat hbr</i>)	F	LD-PA-QL QL= 8 tabs/day; Only available through Onco360 877-662-6633
TEPMETKO TAB 225MG (<i>tepotinib hcl</i>)	F	LD-PA-QL-SF QL= 2 tabs/day; Only available through Biologics 800-850-4306
TIBSOVO TAB 250MG (<i>ivosidenib</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Biologics 800-850-4306
TURALIO CAP 125MG, 200MG (<i>pexidartinib hcl</i>)	F	LD-PA-QL-SF QL= 4 caps/day; Only available through Biologics 800-850-4306
VERZENIO TAB 100MG, 150MG, 200MG, 50MG (<i>abemaciclib</i>)	F	LMSP-PA-QL QL= 2 tabs/day
VITRAKVI CAP 100MG 100MG (<i>larotrectinib sulfate</i>)	F	LD-PA-QL-SF QL= 2 caps/day; Only available through Accredo 800-803-2523

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VITRAKVI CAP 25MG 25MG (<i>larotrectinib sulfate</i>)	F	LD-PA-QL-SF QL= 6 caps/day; Only available through Accredo 800-803-2523
VITRAKVI SOLN 20MG/ML (<i>larotrectinib sulfate</i>)	F	LD-PA-QL-SF QL= 10ml/day; Only available through Accredo 800-803-2523
VONJO CAP 100MG (<i>pacritinib citrate</i>)	F	LD-PA-QL QL= 4 caps/day; Only available through Biologics 800-850-4306
VOTRIENT TAB 200MG (<i>pazopanib hcl</i>)	F	LMSP-PA-SF
XALKORI CAP 200MG, 250MG (<i>crizotinib</i>)	F	KMSP-PA-QL-SF QL= 2 caps/day
XOSPATA TAB 40MG (<i>gilteritinib fumarate</i>)	F	LD-PA-QL-SF QL= 3 tabs/day; Only available through Biologics 800-850-4306
ZEJULA CAP 100MG (<i>niraparib tosylate</i>)	F	LD-PA-QL-SF QL= 3 caps/day; Only available through Diplomat Pharmacy 877-977-9118
ZELBORAF TAB 240MG (<i>vemurafenib</i>)	F	LMSP-PA-QL QL= 8 tabs/day
ZYDELIG TAB 100MG, 150MG (<i>idelalisib</i>)	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118
ZYKADIA CAP 150MG (<i>ceritinib</i>)	F	LMSP-PA-QL-SF QL= 3 caps/day

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ZYKADIA TAB 150MG (<i>ceritinib</i>)	F	LMSP-PA-QL-SF QL= 3 tabs/day
ANTINEOPLASTICS MISC. - Miscellaneous drugs to treat cancer		
<i>bexarotene cap 75MG</i> (TARGRETIN Equiv)	F	LMSP-PA-SF
MITOTIC INHIBITORS - Drugs to treat cancer		
ETOPOSIDE CAP 50MG (<i>etoposide</i>)	F	LMSP
ANTIPARKINSON AGENTS - Drugs to treat Parkinson's disease		
ANTIPARKINSON ADJUVANTS - Drugs to treat parkinson's disease		
<i>carbidopa tab 25MG</i> (LODOSYN Equiv)	F	-
ANTIPARKINSON ANTICHOLINERGICS - Drugs to treat parkinson's disease		
<i>benztropine tab .5MG, 1MG, 2MG</i>	F	-
<i>trihexyphenidyl tab 2MG, 5MG</i> (ARTANE Equiv)	F	-
ANTIPARKINSON COMT INHIBITORS - Drugs to treat parkinson's disease		
<i>entacapone tab 200MG</i> (COMTAN Equiv)	F	-
ANTIPARKINSON DOPAMINERGICS - Drugs to treat parkinson's disease		
<i>amantadine cap 100MG</i> (SYMMETREL Equiv)	F	-
<i>amantadine syrup</i> (SYMMETREL Equiv)	F	-
<i>amantadine tab 100MG</i>	F	-
<i>bromocriptine cap 5MG</i> (PARLODEL Equiv)	F	-
<i>bromocriptine tab 2.5MG</i> (PARLODEL Equiv)	F	-
<i>carbidopa/levodopa ER tab 25MG-100MG, 50MG-200MG</i> (SINEMET CR Equiv)	F	-
<i>carbidopa/levodopa ODT 10MG-100MG, 25MG-100MG, 25MG-250MG</i> (PARCOPA Equiv)	F	-

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<i>carbidopa/levodopa tab 10MG-100MG, 25MG-100MG, 25MG-250MG</i> (SINEMET Equiv)	F	-
<i>pramipexole tab .125MG, .25MG, .5MG, .75MG, 1.5MG, 1MG</i> (MIRAPEX Equiv)	F	-
<i>ropinirole ER tab 12MG, 2MG, 4MG, 6MG, 8MG</i> (REQUIP XL Equiv)	F	-
<i>ropinirole tab .25MG, .5MG, 1MG, 2MG, 3MG, 4MG, 5MG</i> (REQUIP Equiv)	F	-
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS - Drugs to treat parkinson's disease		
<i>rasagiline tab .5MG, 1MG</i> (AZILECT Equiv)	F	-
<i>selegiline cap 5MG</i> (ELDEPRYL Equiv)	F	-
<i>selegiline tab 5MG</i> (ELDEPRYL Equiv)	F	-
ANTIPARKINSON AND RELATED THERAPY AGENTS - Drugs to treat Parkinson's disease		
ANTIPARKINSON ANTICHOLINERGICS - Drugs to treat parkinson's disease		
<i>trihexyphenidyl elixir .4MG/ML</i> (ARTANE Equiv)	F	-
TRIHEXYPHENIDYL SOLN .4MG/ML (<i>trihexyphenidyl hcl</i>)	F	-
ANTIPARKINSON COMT INHIBITORS - Drugs to treat parkinson's disease		
ONGENTYS CAP 25MG, 50MG (<i>opicapone</i>)	F	PA-QL QL= 1 tab/day, 30 tabs per fill
ANTIPARKINSON DOPAMINERGICS - Drugs to treat parkinson's disease		
CARBIDOPA/LEVODOPA ODT 10MG-100MG, 25MG-100MG, 25MG-250MG (<i>carbidopa-levodopa</i>)	F	-

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<i>carbidopa-levodopa-entacapone tab 12.5MG-50MG-200MG, 18.75MG-75MG-200MG, 25MG-100MG-200MG, 31.25MG-125MG-200MG, 37.5MG-150MG-200MG, 50MG-200MG (STALEVO Equiv)</i>	F	-
ANTIPSYCHOTICS/ANTIMANIC AGENTS - Drugs to treat mood disorders		
ANTIMANIC AGENTS - Drugs to treat mental and emotional conditions		
<i>lithium carbonate cap (ESKALITH ER Equiv)</i>	F	-
<i>lithium carbonate ER tab 300MG, 450MG (LITHOBID Equiv)</i>	F	-
<i>lithium carbonate tab 300MG</i>	F	-
ANTIPSYCHOTICS - MISC. - Miscellaneous anti-psychotic drugs		
<i>EQUETRO CAP (carbamazepine (antipsychotic))</i>	F	-
<i>lurasidone hcl tab 120MG, 20MG, 40MG, 60MG, 80MG (LATUDA TAB Equiv)</i>	F	QL QL= 1 tab/day
<i>ziprasidone cap 20MG, 40MG, 60MG, 80MG (GEODON Equiv)</i>	F	-
BENZISOXAZOLES - Drugs to treat mood disorders		
<i>paliperidone ER tab 1.5MG, 3MG, 6MG, 9MG (INVEGA Equiv)</i>	F	-
<i>RISPERIDONE ODT .25MG (RISPERDAL M Equiv) (risperidone)</i>	F	-
<i>risperidone ODT .5MG, 1MG, 2MG, 3MG, 4MG (RISPERDAL M Equiv)</i>	F	-

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<i>risperidone soln 1MG/ML</i> (RISPERDAL Equiv)	F	-
<i>risperidone tab .25MG, .5MG, 1MG, 2MG, 3MG, 4MG</i> (RISPERDAL Equiv)	F	-
BUTYROPHENONES - Drugs to treat mood disorders		
<i>haloperidol lactate conc 2MG/ML</i> (HALDOL Equiv)	F	-
<i>haloperidol tab .5MG, 10MG, 1MG, 20MG, 2MG, 5MG</i> (HALDOL Equiv)	F	-
DIBENZAPINES - Drugs to treat mood disorders		
<i>asenapine maleate SL tab 10MG, 2.5MG, 5MG</i> (SAPHRIS Equiv)	F	QL QL= 2 tabs/day
<i>clozapine tab 100MG, 200MG, 25MG, 50MG</i> (CLOZARIL Equiv)	F	-
<i>loxapine cap 10MG, 25MG, 50MG, 5MG</i> (LOXITANE Equiv)	F	-
<i>olanzapine ODT 10MG, 15MG, 20MG, 5MG</i> (ZYPREXA Equiv)	F	-
<i>olanzapine tab 10MG, 15MG, 2.5MG, 20MG, 5MG, 7.5MG</i> (ZYPREXA Equiv)	F	-
<i>quetiapine tab 100MG, 200MG, 25MG, 300MG, 400MG, 50MG</i> (SEROQUEL Equiv)	F	-
<i>quetiapine XR tab 150MG, 200MG, 300MG, 400MG, 50MG</i> (SEROQUEL XR Equiv)	F	-
PHENOTHIAZINES - Drugs to treat mood disorders		

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<i>chlorpromazine tab 100MG, 10MG, 200MG, 25MG, 50MG</i> (THORAZINE Equiv)	F	-
<i>fluphenazine tab 10MG, 1MG, 2.5MG, 5MG</i> (PROLIXIN Equiv)	F	-
<i>perphenazine tab 16MG, 2MG, 4MG, 8MG</i> (TRILAFON Equiv)	F	-
<i>prochlorperazine supp 25MG</i> (COMPAZINE Equiv)	F	-
<i>prochlorperazine tab 10MG, 5MG</i> (COMPAZINE Equiv)	F	-
<i>thioridazine tab 100MG, 10MG, 25MG, 50MG</i> (MELLARIL Equiv)	F	-
<i>trifluoperazine tab 10MG, 1MG, 2MG, 5MG</i> (STELAZINE Equiv)	F	-
QUINOLINONE DERIVATIVES - Drugs to treat mood disorders		
<i>aripiprazole tab 10MG, 15MG, 20MG, 2MG, 30MG, 5MG</i> (ABILIFY Equiv)	F	-
THIOXANTHENES - Drugs to treat mood disorders		
<i>thiothixene cap 10MG, 1MG, 2MG, 5MG</i> (NAVANE Equiv)	F	-
ANTIVIRALS - Drugs to treat viral infection		
ANTIRETROVIRALS - Drugs to treat viral infections		
<i>abacavir soln 20MG/ML</i> (ZIAGEN Equiv)	F	-
<i>abacavir tab 300MG</i> (ZIAGEN Equiv)	F	-

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<i>abacavir/lamivudine tab 300MG-600MG</i> (EPZICOM Equiv)	F	-
<i>abacavir/lamivudine/zidovudine tab 150MG-300MG</i> (TRIZIVIR Equiv)	F	-
APTIVUS CAP 250MG (<i>tipranavir</i>)	F	-
APTIVUS SOLN 100MG/ML (<i>tipranavir</i>)	F	-
<i>atazanavir cap 150MG, 200MG, 300MG</i> (REYATAZ Equiv)	F	-
BIKTARVY TAB 15MG-30MG-120MG, 25MG-50MG-200MG (<i>bictegravir-emtricitabine-tenofovir alafenamide fumarate</i>)	F	QL QL= 1 tab/ day
CIMDUO TAB 300MG (<i>lamivudine-tenofovir disoproxil fumarate</i>)	F	QL QL= 1 tab/day
COMPLERA TAB 25MG-200MG-300MG (<i>emtricitabine-rilpivirine-tenofovir disoproxil fumarate</i>)	F	QL QL= 1 tab/day
CRIXIVAN CAP 200MG, 400MG (<i>indinavir sulfate</i>)	F	MSP
DELSTRIGO TAB 100MG-300MG (<i>doravirine-lamivudine-tenofovir disoproxil fumarate</i>)	F	QL QL= 1 tab/day
DESCOVY TAB 15MG-120MG, 25MG-200MG (<i>emtricitabine-tenofovir alafenamide fumarate</i>)	\$0	-
<i>didanosine DR cap 250MG, 400MG</i> (VIDEX EC Equiv)	F	-

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DOVATO TAB 50MG-300MG (<i>dolutegravir sodium-lamivudine</i>)	F	QL QL= 1 tab/day
EDURANT TAB 25MG (<i>rilpivirine hcl</i>)	F	-
<i>efavirenz cap 200MG, 50MG</i> (SUSTIVA Equiv)	F	-
<i>efavirenz tab 600MG</i> (SUSTIVA Equiv)	F	-
<i>efavirenz/emtricitabine/tenofovir df tab 200MG-300MG-600MG</i> (ATRIPLA Equiv)	F	QL QL= 1 tab/day
<i>efavirenz/lamivudine/tenofovir df (lo) tab 300MG-400MG, 300MG-600MG</i> (SYMFI (LO) Equiv)	F	QL QL= 1 tab/day
<i>emtricitabine cap 200MG</i> (EMTRIVA Equiv)	F	-
<i>emtricitabine/tenofovir disoproxil fumarate tab 100MG-150MG, 133MG-200MG, 167MG-250MG, 200MG-300MG</i> (TRUVADA Equiv)	\$0	-
EMTRIVA SOLN 10MG/ML (<i>emtricitabine</i>)	F	-
<i>etravirine tab 100MG, 200MG</i> (INTELENCE Equiv)	F	-
EVOTAZ TAB 150MG-300MG (<i>atazanavir sulfate-cobicistat</i>)	F	-
<i>fosamprenavir tab 700MG</i> (LEXIVA Equiv)	F	-
FUZEON INJ 90MG (<i>enfuvirtide</i>)	F	-
GENVOYA TAB 10MG-150MG-200MG (<i>elvitegravir-cobicistat-emtricitabine-tenofovir alafenamide</i>)	F	QL QL= 1 tab/day
INTELENCE TAB 100MG, 200MG, 25MG (<i>etravirine</i>)	F	-
INVIRASE CAP (<i>saquinavir mesylate</i>)	F	-

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L.A. Care PASC-SEIU Homecare Workers Formulary

Last Updated 3/1/2023

DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
INVIRASE TAB 500MG (<i>saquinavir mesylate</i>)	F	-
ISENTRESS (HD) TAB 400MG, 600MG (<i>raltegravir potassium</i>)	F	-
ISENTRESS CHEW TAB 100MG, 25MG (<i>raltegravir potassium</i>)	F	-
ISENTRESS POWDER PACK 100MG (<i>raltegravir potassium</i>)	F	-
JULUCA TAB 25MG-50MG (<i>dolutegravir sodium-rilpivirine hcl</i>)	F	QL QL= 1 tab/ day
<i>lamivudine soln 10MG/ML</i> (EPIVIR Equiv)	F	-
<i>lamivudine tab 150MG, 300MG</i> (EPIVIR Equiv)	F	-
<i>lamivudine/zidovudine tab 150MG-300MG</i> (COMBIVIR Equiv)	F	-
LEXIVA SUSP 50MG/ML (<i>fosamprenavir calcium</i>)	F	-
<i>lopinavir/ritonavir soln 100MG/5ML-400MG/5ML</i> (KALETRA Equiv)	F	-
<i>lopinavir/ritonavir tab 25MG-100MG, 50MG-200MG</i> (KALETRA Equiv)	F	-
<i>maraviroc tab 150MG, 300MG</i> (SELZENTRY Equiv)	F	-
NEVIRAPINE ER TAB 100MG (VIRAMUNE XR Equiv) (<i>nevirapine</i>)	F	-
<i>nevirapine ER tab 100MG, 400MG</i> (VIRAMUNE XR Equiv)	F	-
NEVIRAPINE SUSP 50MG/5ML (<i>nevirapine</i>)	F	-

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<i>nevirapine tab 200MG</i> (VIRAMUNE Equiv)	F	-
NORVIR CAP (<i>ritonavir</i>)	F	-
NORVIR POWDER PACK 100MG (<i>ritonavir</i>)	F	-
NORVIR SOLN 80MG/ML (<i>ritonavir</i>)	F	-
ODEFSEY TAB 25MG-200MG (<i>emtricitabine-rilpivirine-tenofovir alafenamide fumarate</i>)	F	QL QL= 1 tab/day
PIFELTRO TAB 100MG (<i>doravirine</i>)	F	QL QL= 1 tab/day
PREZCOBIX TAB 150MG-800MG (<i>darunavir-cobicistat</i>)	F	-
PREZISTA SUSP 100MG/ML (<i>darunavir</i>)	F	-
PREZISTA TAB 150MG, 600MG, 75MG, 800MG (<i>darunavir</i>)	F	-
RESCRIPTOR TAB 200MG (<i>delavirdine mesylate</i>)	F	-
REYATAZ POWDER PACK 50MG (<i>atazanavir sulfate</i>)	F	-
<i>ritonavir tab 100MG</i> (NORVIR Equiv)	F	-
RUKOBIA ER TAB 600MG (<i>fostemsavir tromethamine</i>)	F	-
SELZENTRY SOLN 20MG/ML (<i>maraviroc</i>)	F	-
SELZENTRY TAB 150MG, 25MG, 300MG, 75MG (<i>maraviroc</i>)	F	-

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STAVUDINE CAP 15MG, 20MG, 30MG, 40MG (stavudine)	F	-
stavudine cap 15MG, 20MG, 30MG, 40MG	F	-
STRIBILD TAB 150MG-200MG-300MG (elvitegravir-cobicistat-emtricitabine-tenofovir df)	F	QL QL= 1 tab/day
SYMTUZA TAB 10MG-150MG-200MG-800MG (darunavir-cobicistat-emtricitabine-tenofovir alafenamide)	F	-
tenofovir disoproxil fumarate tab 300mg 300MG (VIREAD Equiv)	F	-
TIVICAY PD TAB 5MG (dolutegravir sodium)	F	-
TIVICAY TAB 10MG, 25MG, 50MG (dolutegravir sodium)	F	-
TRIUMEQ PD TAB 5MG-30MG-60MG (abacavir-dolutegravir-lamivudine)	F	QL QL= 1 tab/day
TRIUMEQ TAB 50MG-300MG-600MG (abacavir-dolutegravir-lamivudine)	F	QL QL= 1 tab/day
TRIZIVIR TAB 150MG-300MG (abacavir sulfate-lamivudine-zidovudine)	F	-
VIDEX SOLN 2GM, 4GM (didanosine)	F	-
VIRACEPT TAB 250MG, 625MG (nelfinavir mesylate)	F	-
VIREAD TAB 150MG, 200MG, 250MG 150MG, 200MG, 250MG (tenofovir disoproxil fumarate)	F	-

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<i>zidovudine cap 100MG</i> (RETROVIR Equiv)	F	-
<i>zidovudine syrup 50MG/5ML</i> (RETROVIR Equiv)	F	-
<i>zidovudine tab 300MG</i> (RETROVIR Equiv)	F	-
ANTIVIRAL COMBINATIONS ***		
PAXLOVID TAB 100MG-150MG (<i>nirmatrelvir-ritonavir</i>)	\$0	QL QL= 20 tabs/fill
CMV AGENTS - Drugs to treat viral infections		
LIVTENCITY TAB 200MG (<i>maribavir</i>)	F	LD-PA-QL QL= 4 tabs/day; Only available through Biologics 800-850-4306
PREVYMIS TAB 240MG, 480MG (<i>letermovir</i>)	F	LMSP-PA-QL QL= 1 tab/day; Limit 100 tabs/6 months
<i>valganciclovir soln 50MG/ML</i> (VALCYTE Equiv)	F	-
<i>valganciclovir tab 450MG</i> (VALCYTE Equiv)	F	-
HEPATITIS AGENTS - Drugs to treat viral infections		
<i>adefovir dipivoxil tab 10MG</i> (HEPSERA Equiv)	F	LMSP
<i>entecavir tab .5MG, 1MG</i> (BARACLUDE Equiv)	F	LMSP-QL QL= 1 tab/day
EPIVIR HBV SOLN 5MG/ML (<i>lamivudine (hbv)</i>)	F	-
<i>lamivudine tab 100mg 100MG</i> (EPIVIR HBV Equiv)	F	-
LEDIPASVIR/SOFOSBUVIR TAB 90MG-400MG (<i>ledipasvir-sofosbuvir</i>)	F	LMSP-PA-QL QL= 1 tab/ day

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MAVYRET PAK 20MG-50MG (glecaprevir-pibrentasvir)	F	LMSP-PA-QL QL= 5 packs/day
MAVYRET TAB 40MG-100MG (glecaprevir-pibrentasvir)	F	LMSP-PA-QL QL= 3 tabs/day
PEGASYS INJ 180MCG/0.5ML (peginterferon alfa-2a)	F	LMSP
PEG-INTRON INJ 50MCG/0.5ML (peginterferon alfa-2b)	F	LMSP
REBETOL SOLN 40MG/ML (ribavirin (hepatitis c))	F	LMSP
ribavirin cap 200MG (REBETOL Equiv)	F	LMSP
ribavirin tab 200MG (COPEGUS Equiv)	F	LMSP
SOFOSBUVIR/VELPATASVIR TAB 100MG-400MG (sofosbuvir-velpatasvir)	F	LMSP-PA-QL QL= 1 tab/ day
VEMLIDY TAB 25MG (tenofovir alafenamide fumarate)	F	LMSP
VOSEVI TAB 100MG-400MG (sofosbuvir-velpatasvir-voxilaprevir)	F	LMSP-PA-QL QL= 1 tab/day
HERPES AGENTS - Drugs to treat viral infections		
acyclovir cap 200MG (ZOVIRAX Equiv)	F	-
acyclovir susp 200MG/5ML (ZOVIRAX Equiv)	F	-
acyclovir tab 400MG, 800MG (ZOVIRAX Equiv)	F	-
famciclovir tab 125MG, 250MG, 500MG (FAMVIR Equiv)	F	-

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<i>valacyclovir tab 1000MG, 1GM, 500MG</i> (VALTREX Equiv)	F	-
INFLUENZA AGENTS - Drugs to treat viral infections		
<i>oseltamivir cap 45MG, 75MG</i> (TAMIFLU Equiv)	F	QL QL= 10 caps/fill
<i>oseltamivir cap 30mg 30MG</i> (TAMIFLU Equiv)	F	QL QL= 20 caps/fill
<i>oseltamivir susp 6MG/ML</i> (TAMIFLU Equiv)	F	QL QL= 250ml/fill
RELENZA DISKHALER 5MG/BLISTER (<i>zanamivir</i>)	F	QL QL= 1 inhaler/fill
RIMANTADINE TAB 100MG (<i>rimantadine hydrochloride</i>)	F	-
MISC. ANTIVIRALS ***		
MOLNUPIRAVIR CAP 200MG (<i>molnupiravir</i>)	\$0	QL QL= 40 caps/fill
ASSORTED CLASSES - Drugs to treat assorted conditions		
CHELATING AGENTS - Drugs to treat overdose or toxicity		
D-PENAMINE TAB 125MG (<i>penicillamine</i>)	F	-
IMMUNOMODULATORS - Drugs to treat rheumatoid arthritis, multiple sclerosis, etc.		
THALOMID CAP 100MG, 150MG, 200MG, 50MG (<i>thalidomide</i>)	F	KMSP-PA
IMMUNOSUPPRESSIVE AGENTS - Drugs to treat disorders of the immune system		
<i>azathioprine tab 50MG</i> (IMURAN Equiv)	F	-

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<i>cyclosporine cap 100MG, 25MG</i> (SANDIMMUNE Equiv)	F	-
<i>cyclosporine modified cap 100MG, 25MG, 50MG</i> (NEORAL Equiv)	F	-
<i>cyclosporine modified soln 100MG/ML</i> (NEORAL Equiv)	F	-
<i>mycophenolate DR tab 180MG, 360MG</i> (MYFORTIC Equiv)	F	-
<i>mycophenolate mofetil cap 250MG</i> (CELLCEPT Equiv)	F	-
<i>mycophenolate mofetil susp 200MG/ML</i> (CELLCEPT SUSP Equiv)	F	-
<i>mycophenolate mofetil tab 500MG</i> (CELLCEPT Equiv)	F	-
SANDIMMUNE SOLN 100MG/ML 100MG/ML (<i>cyclosporine</i>)	F	-
<i>sirolimus tab .5MG, 1MG, 2MG</i> (RAPAMUNE Equiv)	F	-
<i>tacrolimus cap .5MG, 1MG, 5MG</i> (PROGRAF Equiv)	F	-
POTASSIUM REMOVING RESINS - Drugs to manage potassium levels		
<i>sodium polystyrene powder 100%</i> (KAYEXALATE Equiv)	F	-
<i>sodium polystyrene susp 15GM/60ML</i> (SPS Equiv)	F	-
BETA BLOCKERS - Drugs to treat high blood pressure		
ALPHA-BETA BLOCKERS - Drugs to treat high blood pressure		

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<i>carvedilol tab 12.5MG, 25MG, 3.125MG, 6.25MG</i> (COREG Equiv)	F	-
<i>labetalol tab 100MG, 200MG, 300MG</i> (NORMODYNE Equiv)	F	-
BETA BLOCKERS CARDIO-SELECTIVE - Drugs to treat high blood pressure		
<i>acebutolol cap 200MG, 400MG</i> (SECTRAL Equiv)	F	-
<i>atenolol tab 100MG, 25MG, 50MG</i> (TENORMIN Equiv)	F	-
<i>bisoprolol tab 10MG, 5MG</i> (ZEBETA Equiv)	F	-
<i>metoprolol ER tab 100MG, 200MG, 25MG, 50MG</i> (TOPROL XL Equiv)	F	-
<i>metoprolol tab 100MG, 25MG, 37.5MG, 50MG, 75MG</i> (LOPRESSOR Equiv)	F	-
<i>nebivolol hcl tab 10MG, 2.5MG, 20MG, 5MG</i> (BYSTOLIC Equiv)	F	-
BETA BLOCKERS NON-SELECTIVE - Drugs to treat high blood pressure		
<i>nadolol tab 20MG, 40MG, 80MG</i> (CORCARD Equiv)	F	-
<i>pindolol tab 10MG, 5MG</i> (VISKEN Equiv)	F	-
<i>propranolol ER cap 120MG, 160MG, 60MG, 80MG</i> (INDERAL LA Equiv)	F	-
<i>propranolol oral soln 20mg/5ml 20MG/5ML</i> (PROPRANOLOL Equiv)	F	-
PROPRANOLOL SOLN 40MG/5ML (<i>propranolol hcl</i>)	F	-

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<i>propranolol tab 10MG, 20MG, 40MG, 60MG, 80MG</i> (INDERAL Equiv)	F	-
<i>sotalol AF tab 120MG, 160MG, 80MG</i> (BETAPACE AF Equiv)	F	-
<i>sotalol tab 120MG, 160MG, 240MG, 80MG</i> (BETAPACE Equiv)	F	-
<i>timolol maleate tab 10MG, 20MG, 5MG</i> (BLOCADREN Equiv)	F	-
CALCIUM CHANNEL BLOCKERS - Drugs to treat high blood pressure		
CALCIUM CHANNEL BLOCKERS - Drugs to treat heart disease		
<i>amlodipine tab 10MG, 2.5MG, 5MG</i> (NORVASC Equiv)	F	-
<i>diltiazem ER cap 120MG, 180MG, 240MG</i> (TIAZAC Equiv)	F	-
<i>diltiazem tab 120MG, 30MG, 60MG, 90MG</i> (CARDIZEM Equiv)	F	-
<i>felodipine ER tab 10MG, 2.5MG, 5MG</i> (PLENDIL Equiv)	F	-
<i>nifedipine cap 10MG, 20MG</i> (PROCARDIA Equiv)	F	-
<i>nifedipine ER tab 30MG, 60MG, 90MG</i> (ADALAT CC Equiv)	F	-
<i>verapamil SR cap 120MG, 180MG, 200MG, 240MG</i> (VERELAN Equiv)	F	-
VERAPAMIL SR CAP 360mg 360MG (<i>verapamil hcl</i>)	F	-

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<i>verapamil tab 120MG, 40MG, 80MG</i> (CALAN Equiv)	F	-
CARDIOTONICS - Drugs to treat heart failure and abnormal heart rhythm		
CARDIAC GLYCOSIDES - Drugs to treat heart failure and abnormal heart rhythm		
DIGOXIN SOLN (LANOXIN Equiv) (<i>digoxin</i>)	F	-
<i>digoxin soln .05MG/ML</i> (LANOXIN Equiv)	F	-
<i>digoxin tab</i> (LANOXIN Equiv)	F	-
CARDIOVASCULAR AGENTS - MISC. - Drugs to treat heart and circulation conditions		
CARDIAC MYOSIN INHIBITORS - Drugs to treat cardiomyopathy		
CAMZYOS CAP 10MG, 15MG, 2.5MG, 5MG (<i>mavacamten</i>)	F	LD-PA-QL QL= 1 cap/day; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
CARDIOVASCULAR AGENTS MISC. - COMBINATIONS - Miscellaneous cardiovascular combination drugs		
<i>amlodipine/atorvastatin tab 10MG, 10MG-20MG, 10MG-40MG, 10MG-80MG, 2.5MG-10MG, 2.5MG-20MG, 2.5MG-40MG, 5MG-10MG, 5MG-20MG, 5MG-40MG, 5MG-80MG</i> (CADUET Equiv)	F	-
IMPOTENCE AGENTS - drugs to treat erectile dysfunction		
<i>sildenafil tab 100MG, 25MG, 50MG</i> (VIAGRA Equiv)	F	QL QL=6 tabs/30 days
<i>tadalafil tab 10MG, 20MG</i> (CIALIS Equiv)	F	QL QL= 6 tabs/30 days

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<i>tadalafil tab 2.5mg, 5mg 2.5MG, 5MG</i> (CIALIS Equiv)	F	QL QL= 6 tabs/30 days
PROSTAGLANDIN VASODILATORS - Drugs to treat pulmonary hypertension		
TYVASO DPI POWDER 16MCG, 32MCG, 48MCG, 64MCG (<i>treprostinil</i>)	F	LD-PA-QL Only available through Accredo 800-803-2523; QL= 4 cartridges/day
TYVASO DPI POWDER MAINTENANCE KIT 32-48MCG (<i>treprostinil</i>)	F	LD-PA-QL Only available through Accredo 800-803-2523; QL= 224 cartridges/28 days
TYVASO DPI POWDER TITRATION KIT 16-32-48MCG (<i>treprostinil</i>)	F	LD-PA-QL QL= 252 cartridges/28 days; Only available through Accredo 800-803-2523
TYVASO DPI POWDER TITRATION KIT 16-32MCG (<i>treprostinil</i>)	F	LD-PA-QL QL= 196 cartridges/28 days; Only available through Accredo 800-803-2523
TYVASO INH SOLN .6MG/ML (<i>treprostinil</i>)	F	LD-PA-QL QL= 1 ampule/day; Only available through Accredo 800-803-2523
VENTAVIS INH SOLN 10MCG/ML, 20MCG/ML (<i>iloprost</i>)	F	LD-PA-QL QL= 9 ampules/day; Only available through Accredo 800-803-2523

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PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS - Drugs to treat pulmonary hypertension		
<i>ambrisentan tab 10MG, 5MG</i> (LETAIRIS Equiv)	F	LMSP-PA-QL QL= 1 tab/day
<i>bosentan tab 125MG, 62.5MG</i> (TRACLEER Equiv)	F	LMSP-PA-QL QL= 2 tabs/day
OPSUMIT TAB 10MG (<i>macitentan</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Accredo 800-803-2523
TRACLEER TAB 32MG 32MG (<i>bosentan</i>)	F	LD-PA-QL QL=4 tabs/day; Only available through Accredo 800-803-2523
PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS - Drugs to treat pulmonary hypertension		
<i>sildenafil susp 10MG/ML</i> (REVATIO Equiv)	F	PA Members age 9 or older require Prior Authorization
<i>sildenafil tab 20mg 20MG</i> (REVATIO Equiv)	F	PA
<i>tadalafil tab (PAH) 20MG</i> (ADCIRCA Equiv)	F	LMSP-PA
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST - Drugs to treat pulmonary hypertension		
UPTRAVI TAB 1000MCG, 1200MCG, 1400MCG, 1600MCG, 200MCG, 400MCG, 600MCG, 800MCG (<i>selexipag</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Accredo 800-803-2523

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PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR - Drugs to treat pulmonary hypertension		
ADEMPAS TAB .5MG, 1.5MG, 1MG, 2.5MG, 2MG (<i>riociguat</i>)	F	LD-PA-QL QL= 3 tabs/day; Only available through Accredo 800-803-2523
TRANSTHYRETIN STABILIZERS - drugs to treat heart problems due to transthyretin amyloidosis		
VYNDAMAX CAP 61MG (<i>tafamidis</i>)	F	LD-PA-QL QL= 1 cap/day; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
VYNDAQEL CAP 20MG (<i>tafamidis meglumine (cardiac)</i>)	F	LD-PA-QL QL= 4 caps/day; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
CEPHALOSPORINS - Drugs to treat bacterial infections		
CEPHALOSPORINS - 1ST GENERATION - Drugs to treat bacterial infections		
<i>cephalexin cap 250MG, 500MG</i> (KEFLEX Equiv)	F	-
<i>cephalexin susp 125MG/5ML, 250MG/5ML</i> (KEFLEX Equiv)	F	-
CEPHALOSPORINS - 2ND GENERATION - Drugs to treat bacterial infections		
<i>cefuroxime tab 250MG, 500MG</i> (CEFTIN Equiv)	F	-
CEPHALOSPORINS - 3RD GENERATION - Drugs to treat bacterial infections		
<i>cefdinir cap 300MG</i> (OMNICEF Equiv)	F	-

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<i>cefdinir susp 125MG/5ML, 250MG/5ML</i> (OMNICEF Equiv)	F	-
CONTRACEPTIVES - Drugs to prevent pregnancy		
COMBINATION CONTRACEPTIVES - ORAL - Drugs to prevent pregnancy		
<i>amethyst tab 20MCG-90MCG</i> (LYBREL Equiv)	\$0	-
<i>ashlyna tab, daysee tab .03MG-.15MG</i> (SEASONALE, SEASONIQUE Equiv)	\$0	-
<i>BALCOLTRA TAB .1MG-20MCG-36.5MG</i> (<i>levonorgestrel-ethinyl estradiol-ferrous bisglycinate</i>)	\$0	-
<i>cryselle tab .3MG-30MCG</i>	\$0	-
<i>drospirenone/ethinyl estradiol/levomefolate tab .02MG-.451MG-3MG, .03MG-.451MG-3MG</i> (BEYAZ Equiv)	\$0	-
<i>enpresse tab</i> (TRI-LEVELLEN Equiv)	\$0	-
<i>gianvi tab, ocella tab .02MG-3MG, .03MG-3MG</i> (YASMIN, YAZ Equiv)	\$0	-
<i>isibloom tab, enskyce tab, apri tab .03MG-.15MG, .15MG-30MCG</i> (DESOGEN Equiv)	\$0	-
<i>kelnor tab 1MG-35MCG, 1MG-50MCG</i> (DEMULEN Equiv)	\$0	-
<i>layolis FE tab, wymzya FE tab .4MG-35MCG, .8MG-25MCG-75MG</i> (FEMCON FE Equiv)	\$0	-

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LO LOESTRIN TAB 1MG-10MCG-75MG (<i>norethindrone acetate-ethinyl estradiol-fe fum (biphasic)</i>)	\$0	-
NATAZIA TAB (<i>estradiol valerate-dienogest</i>)	\$0	-
NEXTSTELLIS TAB 3MG-14.2MG (<i>drospirenone-estetrol</i>)	\$0	-
<i>norethindrone ace-ethinyl estradiol-fe cap 1MG-20MCG-75MG</i> (TAYTULLA Equiv)	\$0	-
<i>norethindrone acetate/ethinyl estradiol FE chew tab 1MG-20MCG-75MG</i> (MINASTRIN Equiv)	\$0	-
<i>norethindrone acetate/ethinyl estradiol tab 1.5MG-30MCG, 1MG-20MCG</i> (LOESTRIN Equiv)	\$0	-
<i>norethindrone/ethinyl estradiol FE tab 1.5MG-30MCG-75MG, 1MG-20MCG-75MG</i> (LOESTRIN FE Equiv)	\$0	-
<i>nortrel 7/7/7 tab, pirmella 7/7/7 tab</i> (TRI-NORINYL Equiv)	\$0	-
<i>nortrel tab .4MG-35MCG, .5MG-35MCG, 1MG-35MCG</i> (OVCON 35 Equiv)	\$0	-
<i>sprintec 28 tab .25MG-35MCG</i> (ORTHO-CYCLEN Equiv)	\$0	-
<i>tri-legest tab 1MG-75MG</i> (ESTROSTEP FE Equiv)	\$0	-
<i>tri-sprintec tab</i> (ORTHO TRI-CYCLEN (LO) Equiv)	\$0	-

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TYBLUME TAB .1MG-20MCG (<i>levonorgestrel & eth estradiol</i>)	\$0	-
VELIVET PAK (<i>desogestrel-ethinyl estradiol (triphasic)</i>)	\$0	-
<i>velivet tab</i> (CYCLESSA Equiv)	\$0	-
<i>vienva tab, lessina tab, kurvelo tab .03MG-.15MG, .15MG-30MCG, .1MG-20MCG</i> (ALESSE Equiv)	\$0	-
<i>viorele tab, kariva tab</i> (MIRCETTE Equiv)	\$0	-
COMBINATION CONTRACEPTIVES - TRANSDERMAL - Drugs to prevent pregnancy		
TWIRLA PATCH 30MCG/24HR-120MCG/24HR (<i>levonorgestrel-ethinyl estradiol</i>)	\$0	-
<i>zafemy patch 35MCG/24HR-150MCG/24HR</i> (XULANE Equiv)	\$0	-
COMBINATION CONTRACEPTIVES - VAGINAL - Drugs to prevent pregnancy		
ANNOVERA RING .013MG/24HR-.15MG/24HR (<i>segesterone acetate-ethinyl estradiol</i>)	\$0	QL QL= 1 ring/year
NUVARING .015MG/24HR-.12MG/24HR (<i>etonogestrel-ethinyl estradiol</i>)	\$0	-
EMERGENCY CONTRACEPTIVES - Drugs to prevent pregnancy		
ELLA TAB 30MG (<i>ulipristal acetate</i>)	\$0	-
<i>levonorgestrel tab 1.5MG</i> (PLAN B Equiv)	\$0	OTC
PLAN B TAB 1.5MG (<i>levonorgestrel (emergency oc)</i>)	\$0	OTC
PROGESTIN CONTRACEPTIVES - IMPLANTS - Devices to prevent pregnancy		
NEXPLANON IMPLANT 68MG (<i>etonogestrel</i>)	EXC	-

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NEXPLANON IMPLANT 68MG (<i>etonogestrel</i>)	EXC	-
PROGESTIN CONTRACEPTIVES - INJECTABLE - Drugs to replace female hormones		
DEPO-PROVERA INJ 150MG/ML (<i>medroxyprogesterone acetate (contraceptive)</i>)	EXC	-
PROGESTIN CONTRACEPTIVES - ORAL - Drugs to replace female hormones		
<i>norethindrone tab</i> (NORA-QD Equiv)	\$0	-
SLYND TAB 4MG (<i>drospirenone</i>)	\$0	-
CORTICOSTEROIDS - Drugs to treat systemic swelling conditions		
GLUCOCORTICOSTEROIDS - Drugs to treat systemic swelling conditions		
<i>budesonide SR cap 3MG</i> (ENTOCORT EC Equiv)	F	-
DEXAMETHASONE CONC 1MG/ML (<i>dexamethasone</i>)	F	-
<i>dexamethasone elixir .5MG/5ML</i>	F	-
<i>dexamethasone sodium phosphate inj 100MG/10ML, 10MG/ML, 120MG/30ML, 20MG/5ML, 4MG/ML</i>	F	-
DEXAMETHASONE SOLN .5MG/5ML (<i>dexamethasone</i>)	F	-
<i>dexamethasone tab .5MG, .75MG, 1.5MG, 2MG, 4MG, 6MG</i> (DECADRON Equiv)	F	-
<i>hydrocortisone tab 10MG, 20MG, 5MG</i> (CORTEF Equiv)	F	-
<i>methylprednisolone dose pack 4MG</i> (MEDROL Equiv)	F	-
<i>methylprednisolone tab 16MG, 32MG, 4MG, 8MG</i> (MEDROL Equiv)	F	-

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<i>methylprednisolone sod succinate inj 1000MG, 125MG, 40MG, 500MG</i> (SOLU-MEDROL Equiv)	F	-
<i>prednisolone ODT 10MG, 15MG, 30MG</i> (ORAPRED Equiv)	F	-
PREDNISOLONE ODT TAB 10MG, 15MG, 30MG (<i>prednisolone sodium phosphate</i>)	F	-
<i>prednisolone soln 10MG/5ML, 15MG/5ML, 20MG/5ML, 5MG/5ML, 6.7MG/5ML</i>	F	-
PREDNISONE SOLN 5MG/5ML (<i>prednisone</i>)	F	-
<i>prednisone tab 10MG, 1MG, 2.5MG, 20MG, 50MG, 5MG</i> (DELTASONE Equiv)	F	-
SOLU-CORTEF INJ 1000MG, 250MG, 500MG (<i>hydrocortisone sod succinate</i>)	F	QL QL= 1 vial/fill
SOLU-CORTEF INJ 100MG 100MG (<i>hydrocortisone sod succinate</i>)	F	QL QL= 2 vials/fill
SOLU-MEDROL INJ 2GM 2GM (<i>methylprednisolone sod succ</i>)	F	-
MINERALOCORTICOIDS - Drugs to treat systemic swelling conditions		
<i>fludrocortisone tab .1MG</i> (FLORINEF Equiv)	F	-
COUGH/COLD/ALLERGY - Drugs to treat cough, cold, and allergy symptoms		
ANTITUSSIVES - Drugs to treat cough		
<i>benzonatate cap 100mg, 200mg 100MG, 200MG</i> (TESSALON Equiv)	F	-

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<i>hydrocodone/homatropine syrup</i> 1.5MG/5ML-5MG/5ML (HYCODAN Equiv)	F	-
COUGH/COLD/ALLERGY COMBINATIONS - Drugs to treat cough, cold, and allergy symptoms		
<i>cetirizine/pseudoephedrine 12-hour tab</i> 5MG-120MG (Zyrtec Equiv)	F	OTC
<i>guaifenesin/codeine soln</i> 7.5MG/5ML-225MG/5ML (BRONTEX Equiv)	F	OTC
GUAIFENESIN/CODEINE SYRUP 6.33MG/5ML-100MG/5ML (TUSSI-ORGANIDIN-S Equiv) (<i>guaifenesin-codeine</i>)	F	OTC-QL QL= 240ml/fill
<i>guaifenesin/codeine syrup</i> 10MG/5ML-100MG/5ML (TUSSI-ORGANIDIN-S Equiv)	F	OTC-QL QL= 240ml/fill
<i>loratadine/pseudoephedrine 12-hour tab</i> 5MG-120MG (CLARITIN-D Equiv)	F	OTC
<i>loratadine/pseudoephedrine 24-hour tab</i> 10MG-240MG (CLARITIN-D Equiv)	F	OTC
<i>promethazine VC syrup</i> 5MG/5ML-6.25MG/5ML (PHENERGAN VC Equiv)	F	-
<i>promethazine VC/codeine syrup</i> 5MG/5ML-6.25MG/5ML-10MG/5ML (PHENERGAN VC/CODEINE Equiv)	F	-
<i>promethazine/codeine syrup</i> 6.25MG/5ML-10MG/5ML (PHENERGAN/CODEINE Equiv)	F	-

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MISC. RESPIRATORY INHALANTS - Miscellaneous respiratory inhalants		
NEBUSAL NEB SOLN 3.5%, 6% (<i>sodium chloride (inhalant)</i>)	F	-
<i>sodium chloride neb soln .9%, 10%, 3%, 7%</i> (HYPER-SAL Equiv)	F	-
MUCOLYTICS - Drugs to treat cough, cold, and allergy symptoms		
<i>acetylcysteine soln 10%, 20%</i> (MUCOMYST Equiv)	F	-
DERMATOLOGICALS - Drugs to treat skin conditions		
ACNE PRODUCTS - Drugs to treat skin conditions		
<i>adapalene cream .1%</i> (DIFFERIN Equiv)	F	PA Acne Only – members age 35 or older require Prior Authorization
<i>adapalene gel .1%, .3%</i> (DIFFERIN Equiv)	F	PA Acne Only – members age 35 or older require Prior Authorization
<i>adapalene/benzoyl peroxide gel 0.1-2.5% .1%-2.5%</i> (EPIDUO Equiv)	F	PA Acne Only – members age 35 or older require Prior Authorization
<i>adapalene/benzoyl peroxide gel 0.3-2.5% .3%-2.5%</i> (EPIDUO FORTE Equiv)	F	PA Acne Only – members age 35 or older require Prior Authorization
<i>amnesteem cap, claravis cap, isotretinoin cap, myorisan cap, zenatane cap 10MG, 20MG, 30MG, 40MG</i> (ACCUTANE Equiv)	F	-

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<i>clindamycin gel 1%</i> (CLEOCIN GEL Equiv)	F	-
<i>clindamycin lotion 1%</i> (CLEOCIN- T Equiv)	F	-
<i>clindamycin pad 1%</i> (CLEOCIN-T Equiv)	F	-
<i>clindamycin topical soln 1%</i> (CLEOCIN-T Equiv)	F	-
ERY PAD 2% (<i>erythromycin (acne aid)</i>)	F	-
<i>erythromycin gel 2%</i>	F	-
<i>erythromycin pad 2%</i>	F	-
<i>erythromycin soln 2%</i>	F	-
<i>sodium sulfacetamide/sulfur emulsion 10-5%</i>	F	-
<i>sodium sulfacetamide/sulfur wash 9-4.5% 4.5%-9%</i>	F	-
<i>tretinoin cream .025%, .05%, .1%</i>	F	PA Acne Only – members age 35 or older require Prior Authorization
<i>tretinoin gel .04%, .1%</i>	F	PA Acne Only – members age 35 or older require Prior Authorization
AGENTS FOR WRINKLES/LIPOATROPHY/OTHER AESTHETIC USES - drugs for cosmetic uses		
RENOVA CREAM .02%, .05% (<i>tretinoin (facial wrinkles)</i>)	EXC	-
ANTIBIOTICS - TOPICAL - Drugs to treat bacterial infections		
<i>gentamicin sulfate cream</i>	F	-
<i>gentamicin sulfate oint .1%</i>	F	-
<i>mupirocin oint 2%</i> (BACTROBAN OINT Equiv)	F	-
ANTIFUNGALS - TOPICAL - Drugs to treat fungal infections		

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<i>ciclopirox cream .77%</i> (LOPROX CREAM Equiv)	F	-
<i>ciclopirox gel .77%</i> (LOPROX GEL Equiv)	F	-
<i>ciclopirox nail soln 8%</i> (PENLAC Equiv)	F	-
<i>ciclopirox shampoo 1%</i> (LOPROX SHAMPOO Equiv)	F	-
<i>ciclopirox topical susp .77%</i> (LOPROX SUSP Equiv)	F	-
<i>clotrimazole/betamethasone cream .05%-1%</i> (LORTRISONE CREAM Equiv)	F	-
<i>clotrimazole/betamethasone lotion .05%-1%</i> (LOTTRISONE LOTION Equiv)	F	-
<i>econazole cream 1%</i> (SPECTAZOLE Equiv)	F	-
<i>ketconazole cream 2%</i> (NIZORAL CREAM Equiv)	F	-
<i>ketconazole shampoo 2%</i> (NIZORAL SHAMPOO Equiv)	F	-
NIZORAL A-D SHAMPOO 1% (NIZORAL Equiv) (<i>ketconazole (topical)</i>)	EXC	OTC
<i>nizoral a-d shampoo 1%</i> (NIZORAL Equiv)	EXC	OTC
<i>nystatin cream 100000UNIT/GM</i> (MYCOSTATIN CREAM Equiv)	F	-
<i>nystatin oint 100000UNIT/GM</i>	F	-
<i>nystatin topical powder 100000UNIT/GM</i>	F	-
<i>nystatin/triamcinolone cream .1%-100000UNIT/GM, 1MG/GM-100000UNIT/GM</i>	F	-
<i>nystatin/triamcinolone oint .1%-100000UNIT/GM</i>	F	-
ANTI-INFLAMMATORY AGENTS - TOPICAL - Drugs to treat pain and inflammation		

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<i>diclofenac gel 1% 1%</i> (VOLTAREN Equiv)	F	OTC-QL QL= 5 tubes/fill
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL - Drugs to treat cancer		
<i>bexarotene gel 1%</i> (TARGRETIN Equiv)	F	LMSP-PA
<i>diclofenac gel 3%</i> (SOLARAZE Equiv)	F	PA-QL QL= 300gm/30 days
<i>fluorouracil cream 5%</i> (EFUDEX CREAM Equiv)	F	-
FLUOROURACIL SOLN 2%, 5% (<i>fluorouracil (topical)</i>)	F	-
VALCHLOR GEL .016% (<i>mechlorethamine hcl (topical)</i>)	F	LD-PA-QL QL= 4 tubes/30 days; Only available through Optum Pharmacy 877-445-6874
ANTIPSORIATICS - Drugs to treat psoriasis		
<i>acitretin cap 10MG, 17.5MG, 25MG</i> (SORIATANE Equiv)	F	LMSP
<i>calcipotriene cream .005%</i> (DOVONEX CREAM Equiv)	F	QL QL= 120gm/30 days
<i>calcipotriene oint .005%</i>	F	-
<i>calcipotriene soln .005%</i> (DOVONEX SOLN Equiv)	F	-
METHOXSALEN CAP 10MG (<i>methoxsalen rapid</i>)	F	LMSP
<i>methoxsalen cap 10MG</i>	F	LMSP
SKYRIZI INJ 150MG/ML 150MG/ML (<i>risankizumab-rzaa</i>)	F	LMSP-PA-QL QL= 1 inj/84 days

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
SKYRIZI INJ 75MG/0.83ML 75MG/0.83ML (<i>risankizumab-rzaa</i>)	F	LMSP-PA-QL QL= 2 inj/84 days
STELARA INJ 45MG/0.5ML, 90MG/ML (<i>ustekinumab</i>)	F	LMSP-PA-QL QL= 1 inj/84 days
TALTZ INJ 80MG/ML (<i>ixekizumab</i>)	F	LMSP-PA-QL QL= 1 inj/28 days
<i>tazarotene cream 0.1% .1%</i> (TAZORAC Equiv)	F	-
TREMFYA INJ 100MG/ML (<i>guselkumab</i>)	F	LMSP-PA-QL QL= 1 inj/56 days
ANTISEBORRHEIC PRODUCTS - Drugs to treat skin conditions		
<i>selenium sulfide shampoo 2.25%</i> (SELSEB Equiv)	F	-
ANTIVIRALS - TOPICAL - Drugs to treat viral infections		
<i>acyclovir oint 5%</i> (ZOVIRAX OINT Equiv)	F	-
BURN PRODUCTS - Drugs to treat burns		
<i>silver sulfadiazine cream 1%</i> (SILVADENE CREAM Equiv)	F	-
SULFAMYLLON CREAM 85MG/GM (<i>mafenide acetate</i>)	F	-
CORTICOSTEROIDS - TOPICAL - Drugs to treat itching and inflammation		
<i>alclometasone cream .05%</i> (ACLOVATE Equiv)	F	-
<i>alclometasone oint .05%</i> (ACLOVATE OINT Equiv)	F	-
<i>betamethasone augmented cream .05%</i> (DIPROLENE AF CREAM Equiv)	F	-

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BETAMETHASONE AUGMENTED GEL .05% (betamethasone dipropionate augmented)	F	-
<i>betamethasone augmented gel</i>	F	-
<i>betamethasone augmented lotion .05%</i> (DIPROLENE LOTION Equiv)	F	-
<i>betamethasone augmented oint .05%</i> (DIPROLENE OINT Equiv)	F	-
<i>betamethasone dipropionate cream .05%</i> (DIPROSONE CREAM Equiv)	F	-
<i>betamethasone dipropionate lotion .05%</i>	F	-
<i>betamethasone dipropionate oint .05%</i> (DIPROSONE OINT Equiv)	F	-
<i>betamethasone valerate cream .1%</i>	F	-
<i>betamethasone valerate lotion .1%</i>	F	-
<i>betamethasone valerate oint .1%</i>	F	-
<i>clobetasol propionate cream .05%</i> (TEMOVATE Equiv)	F	-
<i>clobetasol propionate emollient cream .05%</i> (TEMOVATE E Equiv)	F	-
<i>clobetasol propionate gel .05%</i> (TEMOVATE GEL Equiv)	F	-
<i>clobetasol propionate oint .05%</i> (TEMOVATE Equiv)	F	-
<i>desoximetasone cream .25%</i> (TOPICORT CREAM Equiv)	F	-
<i>desoximetasone oint .25%</i> (TOPICORT Equiv)	F	-

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EPIFOAM AEROSOL 1% (<i>pramoxine-hc</i>)	F	-
<i>fluocinolone acetonide cream .01%, .025%</i>	F	-
<i>fluocinolone acetonide oint .025%</i>	F	-
<i>fluocinolone acetonide soln .01%</i>	F	-
<i>fluocinonide cream 0.05% .05% (LIDEX Equiv)</i>	F	-
<i>fluocinonide cream 0.1% .1% (VANOS CREAM Equiv)</i>	F	-
<i>fluocinonide emollient cream .05%</i>	F	-
<i>fluocinonide gel .05%</i>	F	-
<i>fluocinonide oint .05%</i>	F	-
<i>fluocinonide soln .05%</i>	F	-
<i>fluticasone propionate cream .05% (CUTIVATE Equiv)</i>	F	-
<i>fluticasone propionate oint .005% (CUTIVATE Equiv)</i>	F	-
<i>halobetasol propionate cream .05% (ULTRAVATE Equiv)</i>	F	-
<i>halobetasol propionate oint .05% (ULTRAVATE Equiv)</i>	F	PA
<i>hydrocortisone cream .5%, 1%, 2.5% (PROCTOCORT Equiv)</i>	F	-
<i>hydrocortisone lotion 1%, 2.5% (HYTONE Equiv)</i>	F	-
<i>hydrocortisone oint .5%, 1%, 2.5%</i>	F	-
<i>mometasone cream .1% (ELOCON Equiv)</i>	F	-
<i>mometasone oint .1% (ELOCON Equiv)</i>	F	-
<i>mometasone soln .1% (ELOCON Equiv)</i>	F	-
PREDNICARBATE CREAM .1% (<i>prednicarbate</i>)	F	-
PREDNICARBATE OIN .1% (<i>prednicarbate</i>)	F	-

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<i>triamcinolone cream .025%, .1%, .5%</i>	F	-
<i>triamcinolone lotion .025%, .1%</i>	F	-
<i>triamcinolone oint .025%, .1%, .5%</i>	F	-
ECZEMA AGENTS - Drugs to treat eczema		
ADBRY INJ 150MG/ML (<i>tralokinumab-ldrm</i>)	F	LMSP-PA-QL QL= 4 inj/28 days
CIBINQO TAB 100MG, 200MG, 50MG (<i>abrocitinib</i>)	F	LMSP-PA-QL QL= 1 tab/day
DUPIXENT INJ 100MG/0.67ML, 200MG/1.14ML, 300MG/2ML (<i>dupilumab</i>)	F	LMSP-PA-QL QL= 2 inj/ 28 days
DUPIXENT PEN INJ 200MG/1.14ML, 300MG/2ML (<i>dupilumab</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
EMOLLIENTS - Drugs to treat skin conditions		
<i>ammonium lactate lotion 10%, 12%, 5%</i> (LAC-HYDRIN Equiv)	EXC	OTC
LACTIC ACID LOTION 10%, 5% (<i>lactic acid</i> (<i>ammonium lactate</i>))	F	-
ENZYMES - TOPICAL - Drugs to treat skin conditions		
SANTYL OINT 250UNIT/GM (<i>collagenase</i>)	F	QL QL= 90gm/30 days
HAIR GROWTH AGENTS - drugs to grow hair		
<i>bimatoprost ophth soln .03%</i>	EXC	-
<i>finasteride tab 1MG</i> (PROPECIA Equiv)	EXC	-
HAIR REDUCTION AGENTS - drugs to remove hair		

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VANIQA CREAM 13.9% (<i>eflornithine hcl</i>)	EXC	-
IMMUNOMODULATING AGENTS - TOPICAL - Drugs to treat disorders of the immune system		
<i>imiquimod cream</i> 5% (ALDARA Equiv)	F	-
IMMUNOSUPPRESSIVE AGENTS - TOPICAL - Drugs to treat disorders of the immune system		
<i>tacrolimus oint</i> .03%, .1% (PROTOPIC OINT Equiv)	F	-
KERATOLYTIC/ANTIMITOTIC AGENTS - Drugs to treat skin conditions		
PODOCON SOLN 25% (<i>podophyllum resin</i>)	F	-
<i>podofilox soln</i> .5% (CONDYLOX Equiv)	F	-
LOCAL ANESTHETICS - TOPICAL - Drugs for numbing		
<i>lidocaine cream</i> 3% 3%, 4% (LIDAMANTLE Equiv)	F	-
<i>lidocaine gel</i> 2% (XYLOCAINE Equiv)	F	-
<i>lidocaine oint</i>	F	QL QL= 107gm/30 days
<i>lidocaine patch</i> 5% 5% (LIDODERM Equiv)	F	QL QL= 3 patches/day
<i>lidocaine soln</i> 4% (XYLOCAINE Equiv)	F	-
<i>lidocaine/prilocaine cream</i> 2.5% (EMLA Equiv)	F	-
MISC. TOPICAL - Miscellaneous topical products		
DRYSOL SOLN 20% (<i>aluminum chloride</i>)	F	-
PIGMENTING-DEPIGMENTING AGENTS - drugs to treat skin discoloration		
<i>hydroquinone cream</i> 4% (LUSTRA Equiv)	EXC	-
TRI-LUMA CREAM .01%-.05%-4% (<i>fluocinolone-hydroquinone-tretinoin</i>)	EXC	-
ROSACEA AGENTS - Drugs to treat skin conditions		

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<i>azelaic acid gel 15%</i> (FINACEA Equiv)	F	-
<i>brimonidine tartrate gel .33%</i> (MIRVASO Equiv)	EXC	-
<i>metronidazole cream .75%</i> (METROCREAM Equiv)	F	-
<i>metronidazole gel 1%</i> (METROGEL Equiv)	F	-
<i>metronidazole gel 0.75% .75%</i> (METROGEL Equiv)	F	-
<i>metronidazole lotion .75%</i> (METROLOTION Equiv)	F	-
MIRVASO GEL .33% (<i>brimonidine tartrate (topical)</i>)	EXC	-
RHOFADE CREAM 1% (<i>oxymetazoline hcl (topical)</i>)	EXC	-
SCABICIDES & PEDICULICIDES - Drugs to treat skin conditions		
<i>malathion lotion .5%</i> (OVIDE Equiv)	F	QL
<i>permethrin cream 5%</i> (ELIMITE CREAM Equiv)	F	-
SPINOSAD SUSP .9% (<i>spinosad</i>)	F	QL QL= 1 bottle/fill
WOUND CARE PRODUCTS - Drugs to treat diabetic ulcers		
REGRANEX GEL .01% (<i>becaplermin</i>)	F	QL QL= 30gm/fill
VENELEX OINT 87MG/GM-788MG/GM (<i>balsam peru-castor oil</i>)	F	-
DIAGNOSTIC PRODUCTS - Miscellaneous diagnostic test products		
DIAGNOSTIC TESTS - Miscellaneous diagnostic test products		
COVID-19 TEST (<i>covid-19 at home test</i>)	\$0	OTC-QL QL= 8 tests/30 days
CUE COVID-19 INJ TEST CARTRIDGE (<i>covid-19 at home test</i>)	\$0	OTC-QL QL= 8 cartridges/30 days

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CUE HEALTH MONITOR <i>(covid-19 at home test)</i>	\$0	OTC-QL QL= 1 kit/year
KETO-DIASTIX TEST STRIP <i>(urine glucose-ketones test)</i>	F	OTC
KETOSTIX <i>(acetone (urine) test)</i>	F	OTC
ONETOUCH TEST STRIP <i>(glucose blood)</i>	F	OTC
ONETOUCH VERIO TEST STRIP <i>(glucose blood)</i>	F	OTC
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS - Drugs to treat nutrition condition		
DIETARY MANAGEMENT PRODUCTS - Drugs to treat nutritional deficiency		
ASTAMED MYO CAP <i>(astaxanthin-tocotrienol-zinc-cholecalciferol)</i>	EXC	-
DEPLIN CAP <i>(l-methylfolate-algae)</i>	EXC	-
ELIGEN B12 TAB <i>(cyanocobalamin-salcaprozate sodium)</i>	EXC	-
FALESSA TAB <i>(levomefolate glucosamine)</i>	EXC	-
GLYGEST PAK <i>(2-fucosyllactose & lacto-n-neotetraose)</i>	EXC	-
L-METHYLFOLATE TAB <i>(l-methylfolate)</i>	EXC	-
LUVIRA CAP <i>(omega-3-acid ethyl esters (dietary management))</i>	EXC	-
METANX CAP <i>(l-methylfolate w/ algae-vitamin b12-vitamin b6)</i>	EXC	-
OLLIZAC POWDER <i>(2-fucosyllactose & lacto-n-neotetraose)</i>	EXC	-

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PODIAPN CAP (<i>l-methylfolate w/ vitamin b6-vitamin b12</i>)	EXC	-
XAQUIL XR TAB (<i>levomefolate glucosamine</i>)	EXC	-
XYZBAC TAB (<i>dietary management product</i>)	EXC	-
INFANT FOODS		
INFANT FORMULA LIQUID (<i>infant foods</i>)	F	OTC-PA
INFANT FORMULA POWDER (<i>infant foods</i>)	F	OTC-PA
NUTRITIONAL SUPPLEMENTS - Drugs to treat nutrition deficiency		
NUTRITIONAL SUPPLEMENT LIQUID (<i>nutritional supplements</i>)	F	OTC-PA
NUTRITIONAL SUPPLEMENT POWDER (<i>nutritional supplements</i>)	F	OTC-PA
DIGESTIVE AIDS - Drugs to treat low digestive enzymes		
DIGESTIVE ENZYMES - Drugs to treat low digestive enzymes		
CREON CAP 12000UNIT-38000UNIT-60000UNIT, 24000UNIT-76000UNIT-120000UNIT, 3000UNIT-9500UNIT-15000UNIT, 36000UNIT-114000UNIT-180000UNIT, 6000UNIT-19000UNIT-30000UNIT (<i>pancrelipase (lipase-protease-amylase)</i>)	F	-
DIURETICS - Drugs to treat heart, circulation conditions, and blood pressure		
CARBONIC ANHYDRASE INHIBITORS - Drugs to treat high blood pressure		
acetazolamide ER cap 500MG (DIAMOX SEQUEL Equiv)	F	-

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<i>acetazolamide tab</i>	F	-
<i>methazolamide tab 25MG, 50MG</i> (NEPTAZANE Equiv)	F	-
DIURETIC COMBINATIONS - Drugs to treat heart, circulation conditions, and blood pressure		
<i>amiloride/hydrochlorothiazide tab 5MG-50MG</i> (MODURETIC Equiv)	F	-
<i>spironolactone/hydrochlorothiazide tab 25MG</i> (ALDACTAZIDE Equiv)	F	-
<i>triamterene/hydrochlorothiazide cap 25MG-37.5MG</i> (DYAZIDE Equiv)	F	-
<i>triamterene/hydrochlorothiazide tab 25MG-37.5MG, 50MG-75MG</i> (MAXZIDE Equiv)	F	-
LOOP DIURETICS - Drugs to treat heart, circulation conditions, and blood pressure		
<i>bumetanide tab .5MG, 1MG, 2MG</i> (BUMEX Equiv)	F	-
<i>ethacrynic tab 25MG</i> (EDECRIN Equiv)	F	-
FUROSCIX KIT 80MG/10ML (<i>furosemide</i>)	F	LD-QL QL= 8 inj/fill; Only available through BioMatrix Specialty Pharmacy 855-359-9679
FUROSEMIDE SOLN 40MG/5ML, 8MG/ML (LASIX Equiv) (<i>furosemide</i>)	F	-
<i>furosemide soln 10MG/ML</i> (LASIX Equiv)	F	-
<i>furosemide tab 20MG, 40MG, 80MG</i> (LASIX Equiv)	F	-

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<i>torsemide tab 100MG, 10MG, 20MG, 5MG</i> (DEMADEX Equiv)	F	-
POTASSIUM SPARING DIURETICS - Drugs to treat heart, circulation conditions, and blood pressure		
<i>amiloride tab 5MG</i> (MIDAMOR Equiv)	F	-
<i>spironolactone tab 100MG, 25MG, 50MG</i> (ALDACTONE Equiv)	F	-
THIAZIDES AND THIAZIDE-LIKE DIURETICS - Drugs to treat heart, circulation conditions, and blood pressure		
CHLOROTHIAZIDE TAB 250MG, 500MG (DIURIL Equiv) (<i>chlorothiazide</i>)	F	-
<i>chlorothiazide tab 500MG</i> (DIURIL Equiv)	F	-
<i>chlorthalidone tab 25MG, 50MG</i>	F	-
DIURIL SUSP 250MG/5ML (<i>chlorothiazide</i>)	F	-
<i>hydrochlorothiazide cap 12.5MG</i> (MICROZIDE Equiv)	F	-
<i>hydrochlorothiazide tab 12.5MG, 25MG, 50MG</i> (HYDRODIURIL Equiv)	F	-
<i>indapamide tab 1.25MG, 2.5MG</i> (LOZOL Equiv)	F	-
<i>metolazone tab 10MG, 2.5MG, 5MG</i> (ZAROXOLYN Equiv)	F	-
ENDOCRINE AND METABOLIC AGENTS - MISC. - Drugs to treat bone disease and regulate hormones		
BONE DENSITY REGULATORS - Drugs to treat bone disease		
<i>alendronate tab 10MG, 35MG, 5MG, 70MG</i> (FOSAMAX Equiv)	F	-

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ALENDRONATE TAB 40MG 40MG, 5MG (<i>alendronate sodium</i>)	F	-
<i>calcitonin nasal spray 200UNIT/ACT</i> (MIACALCIN Equiv)	F	-
FORTEO INJ 600MCG/2.4ML (<i>teriparatide (recombinant)</i>)	F	LMSP
<i>ibandronate tab 150mg 150MG</i> (BONIVA Equiv)	F	QL-ST QL= 1 tab/30 days; Step Therapy requires trial of alendronate
NATPARA INJ 100MCG, 25MCG, 50MCG, 75MCG (<i>parathyroid hormone (recombinant)</i>)	F	LD-PA Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
<i>risedronate tab 150MG, 30MG, 35MG, 5MG</i> (ACTONEL Equiv)	F	ST Step Therapy requires trial of alendronate
TYMLOS INJ 3120MCG/1.56ML (<i>abaloparatide</i>)	F	LMSP
CORTICOTROPIN ***		
ACTHAR GEL INJ 80UNIT/ML (<i>corticotropin</i>)	F	LD-PA-QL QL= 4 vials/fill; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
FERTILITY REGULATORS - Drugs to regulate fertility		
CLOMID TAB 50MG (<i>clomiphene citrate</i>)	EXC	INF

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CLOMIPHENE TAB 50MG (<i>clomiphene citrate</i>)	EXC	INF
OVIDREL INJ 250MCG/0.5ML (<i>choriogonadotropin alfa</i>)	EXC	INF
GNRH/LHRH ANTAGONISTS - Drugs to treat endometriosis		
<i>cetrorelix acetate for inj kit .25MG</i> (CETROTIDE Equiv)	EXC	INF
CETROTIDE INJ KIT .25MG (<i>cetrorelix acetate</i>)	EXC	INF
ORILISSA TAB 150MG 150MG (<i>elagolix sodium</i>)	F	PA-QL QL= 1 tab/day
ORILISSA TAB 200MG 200MG (<i>elagolix sodium</i>)	F	PA-QL QL= 2 tabs/day
GROWTH HORMONE RECEPTOR ANTAGONISTS - Drugs to regulate hormones		
SOMAVERT INJ 10MG, 15MG, 20MG, 25MG, 30MG (<i>pegvisomant</i>)	F	LD-PA Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
GROWTH HORMONE RELEASING HORMONES (GHRH) - Drugs to treat abnormal fat distribution		
EGRIFTA INJ 1MG, 2MG (<i>tesamorelin acetate</i>)	EXC	-
GROWTH HORMONES - Drugs to regulate hormones		
GENOTROPIN INJ .2MG, .4MG, .6MG, .8MG, 1.2MG, 1.4MG, 1.6MG, 1.8MG, 1MG, 2MG (<i>somatropin</i>)	F	LMSP-PA
SKYTROFA INJ 11MG, 13.3MG, 3.6MG, 3MG, 4.3MG, 5.2MG, 6.3MG, 7.6MG, 9.1MG (<i>lonapegsomatropin-tcgd</i>)	F	LMSP-PA

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HORMONE RECEPTOR MODULATORS - Drugs to regulate hormones		
<i>raloxifene tab 60MG</i> (EVISTA Equiv)	\$0	Covered at \$0 for women 35 years or older; All other members covered at generic copay
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS) - Drugs to regulate hormones		
INCRELEX INJ 40MG/4ML (<i>mecasermin</i>)	F	LD Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS - Drugs to regulate hormones		
SYNAREL NASAL SOLN 2MG/ML (<i>nafarelin acetate</i>)	F	LMSP
METABOLIC MODIFIERS - Drugs to regulate metabolism or hormones		
<i>calcitriol cap .25MCG, .5MCG</i> (ROCALtrol Equiv)	F	-
<i>calcitriol soln 1MCG/ML</i> (ROCALtrol Equiv)	F	-
<i>carglumic acid tab 200MG</i> (CARBAGLU Equiv)	F	LD-PA Only available through Accredo 888-773-7376
<i>cinacalcet tab 30MG, 60MG, 90MG</i> (SENSIPAR Equiv)	F	LMSP
<i>doxercalciferol cap .5MCG, 1MCG, 2.5MCG</i> (HECTOROL Equiv)	F	-
<i>levocarnitine soln 1GM/10ML</i> (CARNITOR Equiv)	F	-
<i>levocarnitine tab 330MG</i> (CARNITOR Equiv)	F	-

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PALYNZIQ INJ 10MG/0.5ML, 2.5MG/0.5ML, 20MG/ML (<i>pegvaliase-pqpz</i>)	F	LD-PA-QL-SF QL= 1 inj/day; Only available through Accredo 800-803-2523
<i>paricalcitol cap 1MCG, 2MCG, 4MCG</i> (ZEMPLAR Equiv)	F	-
PHEBURANE ORAL PELLETS 483MG/GM (<i>sodium phenylbutyrate</i>)	F	LD Only available through Accredo 800-803-2523
<i>sapropterin dihydrochloride powder packet 100MG, 500MG</i> (KUVAN Equiv)	F	LMSP-PA
<i>sapropterin dihydrochloride soluble tab 100MG</i> (KUVAN Equiv)	F	LMSP-PA
STRENSIQ INJ 18MG/0.45ML, 28MG/0.7ML, 40MG/ML, 80MG/0.8ML (<i>asfotase alfa</i>)	F	LD-PA Only available through PantherRx Pharmacy 855-726-8479
NATRIURETIC PEPTIDES ***		
VOXZOGO INJ .4MG, .56MG, 1.2MG (<i>vosoritide</i>)	F	LD-PA-QL QL= 1 vial/day; Only available through Accredo 888-773-7376
POSTERIOR PITUITARY HORMONES - Drugs to regulate hormones		
<i>desmopressin acetate inj 4MCG/ML</i> (DDAVP Equiv)	F	-
<i>desmopressin acetate tab .1MG, .2MG</i> (DDAVP Equiv)	F	-
STIMATE NASAL SOLN 1.5MG/ML (<i>desmopressin acetate</i>)	F	LMSP

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PROGESTERONE RECEPTOR ANTAGONISTS ***		
<i>mifepristone tab 200MG</i> (MIFIPREX Equiv)	EXC	-
MIFIPREX TAB 200MG (<i>mifepristone</i>)	EXC	-
PROLACTIN INHIBITORS - Drugs to regulate hormones		
<i>cabergoline tab .5MG</i> (DOSTINEX Equiv)	F	-
SOMATOSTATIC AGENTS - Drugs to regulate hormones		
<i>octreotide inj 1000MCG/5ML, 1000MCG/ML, 100MCG/ML, 200MCG/ML, 500MCG/ML</i> (SANDOSTATIN Equiv)	F	LMSP
OCTREOTIDE INJ 100MCG 100MCG/ML, 500MCG/ML, 50MCG/ML (<i>octreotide acetate</i>)	F	LMSP
SIGNIFOR INJ .3MG/ML, .6MG/ML, .9MG/ML (<i>pasireotide diaspertate</i>)	F	LD-PA-QL QL= 2 vials/day; Only available through Anovo Specialty Pharmacy 844-288-5007
VASOPRESSIN RECEPTOR ANTAGONISTS - Drugs to regulate hormones		
JYNARQUE PAK 15MG (<i>tolvaptan</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Walgreens 888-347-3416
JYNARQUE TAB 15MG, 30MG (<i>tolvaptan</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Walgreens 888-347-3416
ESTROGENS - Drugs to replace female hormones		
ESTROGEN COMBINATIONS - Drugs to replace female hormones		

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<i>estradiol/norethindrone tab .1MG-.5MG, .5MG-1MG</i> (ACTIVELLA Equiv)	F	-
<i>jinteli tab .5MG-2.5MCG, 1MG-5MCG</i> (FEMHRT Equiv)	F	-
MYFEMBREE TAB .5MG-1MG-40MG (<i>relugolix-estradiol-norethindrone acetate</i>)	F	PA-QL QL= 1 tab/day
ORIAHNN CAP .5MG-1MG-300MG (<i>elagolix sodium-estradiol-norethindrone acetate</i>)	F	PA-QL QL= 2 caps/day
PREMPHASE TAB, PREMPRO TAB .3MG-1.5MG, .45MG-1.5MG, .625MG-2.5MG, .625MG-5MG (<i>conjugated estrogens-medroxyprogesterone acetate</i>)	F	-
ESTROGENS - Drugs used for contraception		
<i>estradiol patch .025MG/24HR, .0375MG/24HR, .05MG/24HR, .075MG/24HR, .1MG/24HR</i> (CLIMARA Equiv)	F	-
<i>estradiol tab .5MG, 1MG, 2MG</i> (ESTRACE Equiv)	F	-
<i>estradiol valerate inj 10MG/ML, 20MG/ML, 40MG/ML</i> (DELESTROGEN Equiv)	F	QL QL= 5ml/fill
PREMARIN TAB .3MG, .45MG, .625MG, .9MG, 1.25MG (<i>estrogens, conjugated</i>)	F	-
FLUOROQUINOLONES - Drugs to treat bacterial infections		
FLUOROQUINOLONES - Drugs to treat bacterial infections		
<i>ciprofloxacin susp 500MG/5ML</i> (CIPRO Equiv)	F	-

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<i>ciprofloxacin tab 250MG, 500MG, 750MG</i> (CIPRO Equiv)	F	-
<i>levofloxacin soln 25MG/ML</i> (LEVAQUIN Equiv)	F	-
<i>levofloxacin tab 250MG, 500MG, 750MG</i> (LEVAQUIN Equiv)	F	-
<i>moxifloxacin tab 400MG</i> (AVELOX Equiv)	F	-
<i>ofloxacin tab 400MG</i> (FLOXIN Equiv)	F	-
GASTROINTESTINAL AGENTS - MISC. - Miscellaneous gastrointestinal drugs		
AGENTS FOR CHRONIC IDIOPATHIC CONSTIPATION (CIC) - drugs to treat constipation		
TRULANCE TAB 3MG (<i>plecanatide</i>)	F	PA
BILE ACID SYNTHESIS DISORDER AGENTS - Drugs to treat bile acid disorders		
CHOLBAM CAP 250MG, 50MG (<i>cholic acid</i>)	F	LD-PA Only available through Dohmen LSS 844-246-5226
FARNESOID X RECEPTOR (FXR) AGONISTS - Drugs to treat primary biliary cholangitis		
OCALIVA TAB 10MG, 5MG (<i>obeticholic acid</i>)	F	LD-PA-QL-SF QL= 1 tab/day; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
GALLSTONE SOLUBILIZING AGENTS - Drugs to treat bowel, intestine, and stomach conditions		
<i>ursodiol cap 300MG</i> (ACTIGALL Equiv)	F	-
<i>ursodiol tab 250MG, 500MG</i> (URSO (FORTE) Equiv)	F	-
GASTROINTESTINAL ANTIALLERGY AGENTS - Drugs to treat bowel, intestine, and stomach conditions		

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<i>cromolyn conc 100MG/5ML</i> (GASTROCROM Equiv)	F	-
GASTROINTESTINAL STIMULANTS - Drugs to treat bowel, intestine, and stomach conditions		
<i>metoclopramide soln 10MG/10ML, 5MG/5ML</i> (REGLAN Equiv)	F	-
<i>metoclopramide tab 10MG, 5MG</i> (REGLAN Equiv)	F	-
ILEAL BILE ACID TRANSPORTER (IBAT) INHIBITORS - Drugs to treat itching due to liver conditions		
BYLVAY CAP 1200MCG 1200MCG (<i>odevixibat</i>)	F	LD-PA-QL QL= 5 caps/day; Only available through PantheRx Pharmacy 855-726-8479
BYLVAY CAP 400MCG 400MCG (<i>odevixibat</i>)	F	LD-PA-QL QL= 15 caps/day; Only available through PantheRx Pharmacy 855-726-8479
BYLVAY SPRINKLE CAP 200MCG 200MCG (<i>odevixibat</i>)	F	LD-PA-QL QL= 8 caps/day; Only available through PantheRx Pharmacy 855-726-8479
BYLVAY SPRINKLE CAP 600MCG 600MCG (<i>odevixibat</i>)	F	LD-PA-QL QL= 4 caps/day; Only available through PantheRx Pharmacy 855-726-8479
LIVMARLI SOLN 9.5MG/ML (<i>maralixibat chloride</i>)	F	LD-PA-QL QL= 90ml/30 days; Only available through Eversana 866-849-4481
INFLAMMATORY BOWEL AGENTS - Drugs to treat disorders of the immune system		

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<i>balsalazide cap 750MG</i> (COLAZAL Equiv)	F	-
CIMZIA INJ 200MG (<i>certolizumab pegol</i>)	F	LMSP-PA-QL QL= 2 inj/28 days
CIMZIA STARTER INJ KIT 200MG/ML (<i>certolizumab pegol</i>)	F	LMSP-PA-QL QL= 1 kit/plan year
<i>mesalamine enema 4GM</i> (ROWASA Equiv)	F	-
<i>mesalamine ER cap .375GM</i> (APRISO Equiv)	F	-
<i>mesalamine supp 1000MG</i> (CANASA Equiv)	F	-
SKYRIZI INJ 180 MG/1.2ML 180MG/1.2ML (<i>risankizumab-rzaa (crohn's)</i>)	F	LMSP-PA-QL QL= 1 inj/56 days
SKYRIZI INJ 360MG/2.4ML 360MG/2.4ML (<i>risankizumab-rzaa (crohn's)</i>)	F	LMSP-PA-QL QL= 1 inj/56 days
<i>sulfasalazine EC tab 500MG</i> (AZULFIDINE Equiv)	F	-
<i>sulfasalazine tab 500MG</i> (AZULFIDINE Equiv)	F	-
INTESTINAL ACIDIFIERS - Drugs to treat bowel, intestine, and stomach conditions		
<i>lactulose soln 10GM/15ML</i>	F	-
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS - Drugs to treat overdose or toxicity		
SYMPROIC TAB .2MG (<i>naldemedine tosylate</i>)	F	PA
SYMPROIC TAB .2MG (<i>naldemedine tosylate</i>)	F	PA
PHOSPHATE BINDER AGENTS - Drugs to regulate calcium and phosphorus levels		
<i>calcium acetate cap 667MG</i> (PHOSLO Equiv)	F	-
FOSRENOL POWDER PACK 1000MG, 750MG (<i>lanthanum carbonate</i>)	F	-

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<i>lanthanum carbonate chew tab 1000MG, 500MG, 750MG</i> (FOSRENOL Equiv)	F	-
PHOSLYRA SOLN 667MG/5ML (<i>calcium acetate (phosphate binder)</i>)	F	-
<i>sevelamer powder pak .8GM, 2.4GM</i> (RENVELA Equiv)	F	-
<i>sevelamer tab 800MG</i> (RENVELA TAB Equiv)	F	-
GENITOURINARY AGENTS - MISCELLANEOUS - Miscellaneous genitourinary drugs		
ALKALINIZERS - Drugs to treat low pH		
CYTRA K CRYSTALS 1002MG-3300MG (<i>potassium citrate-citric acid</i>)	F	-
CYTRA-3 SYRUP 334MG/5ML-500MG/5ML-550MG/5ML (<i>pot & sod citrates w/citric ac</i>)	F	-
ORACIT SOLN 490MG/5ML-640MG/5ML (<i>sodium citrate & citric acid</i>)	F	-
<i>potassium citrate CR tab 1080MG, 10MEQ, 15MEQ, 1620MG, 540MG</i> (UROCIT-K TAB Equiv)	F	-
<i>potassium citrate/citric acid powder pack 1002MG-3300MG</i> (POLYCITRA Equiv)	F	-
<i>potassium citrate/citric acid soln 334MG/5ML-1100MG/5ML</i> (POLYCITRA-K Equiv)	F	-
<i>sodium citrate/citric acid soln 334MG/5ML-500MG/5ML</i> (BICITRA Equiv)	F	-

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<i>tricitrates soln</i> 334MG/5ML-500MG/5ML-550MG/5ML (POLYCITRA-LC Equiv)	F	-
CYSTINOSIS AGENTS - Drugs to treat enzyme deficiencies		
CYSTAGON CAP 150MG, 50MG (<i>cysteamine bitartrate</i>)	F	LD-PA Only available through CVS Specialty 800-238-7828
GENITOURINARY IRRIGANTS - Drugs to treat the urinary system		
<i>sodium chloride 0.9% irr soln .9%</i>	F	-
INTERSTITIAL CYSTITIS AGENTS - Drugs to treat urinary incontinence		
ELMIRON CAP 100MG (<i>pentosan polysulfate sodium</i>)	F	-
PROSTATIC HYPERTROPHY AGENTS - Drugs to treat enlarged prostate		
<i>alfuzosin SR tab 10MG</i> (UROXATRAL Equiv)	F	-
<i>dutasteride cap .5MG</i> (AVODART Equiv)	F	-
<i>finasteride tab 5MG</i> (PROSCAR Equiv)	F	-
<i>tamsulosin cap .4MG</i> (FLOMAX Equiv)	F	-
URINARY ANALGESICS - Drugs to treat urinary pain		
<i>phenazopyridine tab 100MG, 200MG</i> (PYRIDIUM Equiv)	F	-
URINARY STONE AGENTS - Drugs to prevent kidney stones		
<i>tiopronin tab 100MG</i> (THIOLA Equiv)	F	LMSP-PA
GOUT AGENTS - Drugs to treat gout		
GOUT AGENT COMBINATIONS - Drugs to treat gout		

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
<i>colchicine/probenecid tab .5MG-500MG</i> (COL-BENEMID Equiv)	F	-
GOUT AGENTS - Drugs to treat gout		
<i>allopurinol tab</i> (ZYLOPRIM Equiv)	F	-
<i>colchicine tab .6MG</i> (COLCRYS Equiv)	F	-
<i>febuxostat tab 40MG, 80MG</i> (ULORIC Equiv)	F	ST Step Therapy requires trial of allopurinol
URICOSURICS - Drugs to treat gout		
<i>probenecid tab 500MG</i> (BENEMID Equiv)	F	-
HEMATOLOGICAL AGENTS - MISC. - Drugs to treat blood disorders		
ANTIHEMOPHILIC PRODUCTS - Drugs to treat hemophilia		
HEMLIBRA INJ 105MG/0.7ML, 150MG/ML, 30MG/ML, 60MG/0.4ML (<i>emicizumab-kxwh</i>)	F	LMSP-PA
COMPLEMENT INHIBITORS - Drugs to treat blood disorders		
EMPAVELI INJ 1080MG/20ML (<i>pegcetacoplan</i>)	F	LD-PA-QL QL= 160ml/28 days; Only available through PantheRx 855-726-8479
TAVNEOS CAP 10MG (<i>avacopan</i>)	F	LD-PA-QL QL= 6 caps/day; Only available through PantheRx 855-726-8479
HEMATAOLOGIC - TYROSINE KINASE INHIBITORS - Drugs to treat blood disorders		

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EXC	Plan Exclusion	INF	Infertility	KMSP	Kroger Mandatory Specialty Pharmacy Program
LD	Limited Distribution	LMSP	Lumicera Mandatory Specialty Pharmacy Program	MSP	Mandatory Specialty Pharmacy Program
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RDX	Restricted to Diagnosis	RS	Restricted to Specialist	SF	Limited to two 15 day fills per month for first 3 months
SMKG	Smoking Cessation	ST	Step Therapy	VAC	Vaccine Program

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TAVALISSE TAB 100MG, 150MG (<i>fostamatinib disodium</i>)	F	LD-PA-QL-SF QL= 2 tab/day; Only available through Biologics 800-850-4306
HEMATORHEOLOGIC AGENTS - Drugs to treat circulation disorders		
<i>pentoxifylline ER tab 400MG</i> (TRENTAL Equiv)	F	-
PLASMA KALLIKREIN INHIBITORS - Drugs to treat systemic swelling conditions		
TAKHZYRO INJ 300MG/2ML (<i>lanadelumab-flyo</i>)	F	LD-PA-QL QL= 2 inj/28 days; Only available through Accredo 800-803-2523
TAKHZYRO INJ 150MG/ML 150MG/ML (<i>lanadelumab-flyo</i>)	F	LD-PA-QL QL= 2 inj/28 days; Only available through Accredo 800-803-2523
PLATELET AGGREGATION INHIBITORS - Drugs to thin the blood		
<i>anagrelide cap .5MG, 1MG</i> (AGRYLIN Equiv)	F	-
BRILINTA TAB 60MG, 90MG (<i>ticagrelor</i>)	F	-
CABLIVI INJ KIT 11MG (<i>caplacizumab-yhdp</i>)	F	LD-PA-QL QL= 1 vial/day; Only available through Biologics 800-850-4306
<i>cilostazol tab 100MG, 50MG</i> (PLETAL Equiv)	F	-
<i>clopidogrel tab 75mg 75MG</i> (PLAVIX Equiv)	F	-
<i>dipyridamole tab 25MG, 50MG, 75MG</i> (PERSANTINE Equiv)	F	-
<i>prasugrel tab 10MG, 5MG</i> (EFFIENT Equiv)	F	-

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HEMATOLOGICAL AGENTS - MISC.- PYRUVATE KINASE ACTIVATORS- Drugs to treat pyruvate kinase deficiency		
PYRUKYND TAB 20MG, 50MG, 5MG (<i>mitapivat sulfate</i>)	F	LD-PA-QL QL= 2 tabs/day; Only available through Biologics 800-850-4306
PYRUKYND TAPER PACK 5MG (<i>mitapivat sulfate</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Biologics 800-850-4306
HEMATOPOIETIC AGENTS - Drugs to treat blood disorders		
AGENTS FOR GAUCHER DISEASE - Drugs to treat blood disorders		
CERDELGA CAP 84MG (<i>eliglustat tartrate</i>)	F	MSP-PA
<i>miglustat cap 100MG</i> (ZAVESCA Equiv)	F	LD-PA Only available through Accredo 800-803-2523
AGENTS FOR SICKLE CELL ANEMIA - Drugs to treat blood disorders		
DROXIA CAP 200MG, 300MG, 400MG (<i>hydroxyurea (sickle cell disease)</i>)	F	-
ENDARI POWDER PACK 5GM (<i>glutamine (sickle cell)</i>)	F	LMSP-PA-QL QL= 6 packets/day
AGENTS FOR SICKLE CELL DISEASE-Drugs to treat blood disorders		
OXBRYTA TAB FOR ORAL SUSP 300MG (<i>voxelotor</i>)	F	LD-PA-QL QL= 5 tabs/day; Only available through CVS Specialty 800-237-2767
COBALAMINS - Drugs to treat vitamin deficiency		

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<i>cyanocobalamin inj 1000MCG/ML</i>	F	-
FOLIC ACID/FOLATES - Drugs to treat vitamin deficiency		
<i>folic acid tab 1mg 1MG</i>	\$0	Covered at \$0 for females only; All other members covered at generic copay
<i>folic acid tab 400mcg 400MCG</i>	\$0	OTC Covered for females only
<i>folic acid tab 800mcg 800MCG</i>	\$0	OTC Covered for females only
HEMATOPOIETIC GROWTH FACTORS - Drugs to treat blood disorders		
<i>DOPTELET TAB 20MG (avatrombopag maleate)</i>	F	KMSP-PA-QL QL= 2 tabs/day
<i>FULPHILA INJ 6MG/0.6ML (pegfilgrastim-jmdb)</i>	F	LMSP
<i>NIVESTYM INJ 300MCG/0.5ML, 480MCG/0.8ML (filgrastim-aafi)</i>	F	LMSP
<i>PROMACTA TAB 12.5MG, 25MG, 50MG, 75MG (eltrombopag olamine)</i>	F	LMSP-PA
<i>RETACRIT INJ 10000UNIT/ML, 20000UNIT/2ML, 20000UNIT/ML, 2000UNIT/ML, 3000UNIT/ML, 4000UNIT/ML (epoetin alfa-epbx)</i>	F	LMSP
<i>RETACRIT INJ 40000UNIT/ML (epoetin alfa-epbx)</i>	F	LMSP
<i>ZARXIO INJ 300MCG/0.5ML, 480MCG/0.8ML (filgrastim-sndz)</i>	F	LMSP
<i>ZIEXTENZO INJ 6MG/0.6ML (pegfilgrastim-bmez)</i>	F	LMSP

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HEMATOPOIETIC MIXTURES - Drugs to treat blood disorders		
<i>ferrex 150 forte cap 1MG-25MCG-150MG</i>	F	-
<i>folbee tab 1MG-2.5MG-25MG</i>	F	-
MULTIGEN FOLIC TAB 1MG-2MG-10MCG-70MG-75MG-150MG (<i>fe asparto gly-succinic acid-vit c-threonic acid-vit b12-fa</i>)	F	-
MULTIGEN PLUS TAB .8MG-1MG-10MCG-50MG-60MG-101MG (<i>fe asparto gly-fe fumarate-succ acid-c-threonic acid-b12-fa</i>)	F	-
MULTIGEN TAB 2MG-10MCG-50MG-70MG-75MG-150MG (<i>fe asparto gly-succin ac-c-threonic ac-b12-des stom subst</i>)	F	-
NEPHRON FA TAB 1MG-1.5MG-1.7MG-6MCG-10MG-20MG-40MG-75MG-200MG-300MCG (<i>ferrous fumarate w/ fa-dss-b complex-vit c</i>)	F	-
<i>tricon cap .5MG-15MCG-75MG-110MG-240MG</i> (TRINSICON Equiv)	F	-
HEMOSTATICS - Drugs to stop bleeding/treat blood disorders		
HEMOSTATICS - SYSTEMIC - Drugs to thin the blood		
<i>aminocaproic acid soln .25GM/ML</i> (AMICAR Equiv)	F	-

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<i>aminocaproic acid tab 1000MG, 500MG</i> (AMICAR Equiv)	F	-
<i>tranexamic acid tab 650MG</i> (LYSTEDA Equiv)	F	-
HYPNOTICS - Drugs to treat insomnia		
NON-BARBITURATE HYPNOTICS - Drugs to treat insomnia		
<i>zolpidem tab 10MG, 5MG</i> (AMBIEN Equiv)	F	QL QL= 1 tab/day
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS - Drugs to treat insomnia		
ANTIHISTAMINE HYPNOTICS - Drugs to treat insomnia		
<i>diphenhydramine cap 50mg 50MG</i> (BENADRYL Equiv)	F	Only 50mg covered
BARBITURATE HYPNOTICS - Drugs to treat insomnia		
<i>phenobarbital elixir 20MG/5ML</i>	F	-
<i>phenobarbital tab 100MG, 15MG, 16.2MG, 30MG, 32.4MG, 60MG, 64.8MG, 97.2MG</i>	F	-
NON-BARBITURATE HYPNOTICS - Drugs to treat insomnia		
<i>estazolam tab 1MG, 2MG</i> (PROSOM Equiv)	F	-
<i>eszopiclone tab 1MG, 2MG, 3MG</i> (LUNESTA Equiv)	F	QL QL= 1 tab/day
<i>FLURAZEPAM CAP 15MG, 30MG</i> (<i>flurazepam hcl</i>)	F	-
<i>midazolam inj 10MG/10ML, 10MG/2ML, 25MG/5ML, 2MG/2ML, 50MG/10ML, 5MG/5ML, 5MG/ML</i> (MIDAZOLAM Equiv)	F	RS Restricted to Neurology Specialist
<i>temazepam cap 15mg 15MG</i> (RESTORIL Equiv)	F	-

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<i>temazepam cap 30mg 30MG</i> (RESTORIL Equiv)	F	-
<i>triazolam tab .125MG, .25MG</i> (HALCION Equiv)	F	-
<i>zaleplon cap 10MG, 5MG</i> (SONATA Equiv)	F	QL QL= 1 cap/day
<i>zolpidem ER tab 12.5MG, 6.25MG</i> (AMBIEN CR Equiv)	F	QL QL= 1 tab/day
SELECTIVE MELATONIN RECEPTOR AGONISTS - Drugs to treat insomnia		
<i>ramelteon tab 8MG</i> (ROZEREM Equiv)	F	QL QL= 1 tab/day
LAXATIVES - Drugs to treat constipation		
LAXATIVE COMBINATIONS - Drugs to treat constipation		
CLENPIQ SOLN 3.5GM/160ML-10MG/160ML-12GM/160ML (<i>sodium picosulfate-magnesium oxide-anhydrous citric acid</i>)	F	-
GOLYTELY SOLN 2.97GM-5.86GM-6.74GM-22.74GM-236GM, 2.98GM-5.84GM-6.72GM-22.72GM-240GM (<i>peg 3350-kcl-sod bicarb-sod chloride-sod sulfate</i>)	\$0	QL Covered at \$0 for members 45-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay

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NULYTELY SOLN 1.48GM-5.72GM-11.2GM-420GM (<i>peg 3350-potassium chloride-sod bicarbonate-sod chloride</i>)	\$0	QL Covered at \$0 for members 45-75 years, all other members covered at generic copay; Limited to 2 fills/calendar year
<i>peg 3350/electrolytes soln</i> 2.97GM-5.86GM-6.74GM-22.74GM-236GM, 2.98GM-5.84GM-6.72GM-22.72GM-240GM (COLYTE Equiv)	\$0	QL Covered at \$0 for members 45-75 years-Limited to 2 fills/calendar year; All other members covered at generic copay
<i>trilyte soln 1.48GM-5.72GM-11.2GM-420GM</i> (NULYTELY Equiv)	\$0	QL Covered at \$0 for members 45-75 years, all other members covered at generic copay; Limited to 2 fills/calendar year
LAXATIVES - MISCELLANEOUS - Drugs to treat constipation		
<i>lactulose soln</i>	F	-
MACROLIDES - Drugs to treat bacterial infections		
AZITHROMYCIN - Drugs to treat bacterial infections		
<i>azithromycin susp 100MG/5ML, 200MG/5ML</i> (ZITHROMAX Equiv)	F	-
<i>azithromycin tab 250MG, 500MG, 600MG</i> (ZITHROMAX Equiv)	F	-
CLARITHROMYCIN - Drugs to treat bacterial infections		

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CLARITHROMYC SUSP 125MG/5ML, 250MG/5ML (<i>clarithromycin</i>)	F	-
<i>clarithromycin tab 250MG, 500MG</i> (BIAXIN Equiv)	F	-
ERYTHROMYCINS - Drugs to treat bacterial infections		
ERYTHROMYCIN EC CAP 250MG (<i>erythromycin base</i>)	F	-
<i>erythromycin ethylsuccinate susp 200MG/5ML, 400MG/5ML</i> (ERYPED Equiv)	F	-
FIDAXOMICIN - drugs to treat infections		
DIFICID SUSP 40MG/ML (<i>fidaxomicin</i>)	F	QL-ST QL= 136 mL/fill; Step Therapy requires trial of vancomycin cap, FIRST-VANCOMYCIN SOLN, or FIRVANQ SOLN
DIFICID TAB 200MG (<i>fidaxomicin</i>)	F	QL-ST QL= 20 tabs/fill; Step Therapy requires trial of vancomycin cap, FIRST-VANCOMYCIN SOLN, or FIRVANQ SOLN
MEDICAL DEVICES AND SUPPLIES - Drugs for miscellaneous use		
CONTRACEPTIVES - Devices to prevent pregnancy		
CERVICAL CAP (<i>cervical caps</i>)	\$0	-
DIAPHRAGM (<i>diaphragm arc-spring</i>)	\$0	-

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FEMALE CONDOMS (<i>condoms - female</i>)	\$0	OTC-QL QL= 12 condoms/fill
MALE CONDOMS (<i>condoms latex non-lubricated - male</i>)	\$0	OTC-QL QL= 12 condoms/fill
DIABETIC SUPPLIES - Devices to assist with diabetes		
CALIBRATION LIQUID (<i>blood glucose calibration</i>)	F	OTC
DEXCOM G6 RECEIVER (<i>continuous blood glucose system receiver</i>)	F	PA-QL QL= 1 receiver/year
DEXCOM G6 SENSOR (<i>continuous blood glucose system sensor</i>)	F	PA-QL QL= 3 sensors/28 days
DEXCOM G6 TRANSMITTER (<i>continuous blood glucose system transmitter</i>)	F	PA-QL QL= 1 transmitter/90 days
FREESTYLE LIBRE 2 RECEIVER (<i>continuous blood glucose system receiver</i>)	F	PA-QL QL= 1 receiver/year
FREESTYLE LIBRE 2 SENSOR (<i>continuous blood glucose system sensor</i>)	F	PA-QL QL= 2 sensors/28 days
FREESTYLE LIBRE 3 SENSOR (<i>continuous blood glucose system sensor</i>)	F	PA-QL QL= 2 sensors/28 days
FREESTYLE LIBRE RECEIVER (<i>continuous blood glucose system receiver</i>)	F	PA-QL QL= 1 receiver/year
FREESTYLE LIBRE SENSOR (10-DAY) (<i>continuous blood glucose system sensor</i>)	F	PA-QL QL= 3 sensors/30 days
FREESTYLE LIBRE SENSOR (14-DAY) (<i>continuous blood glucose system sensor</i>)	F	PA-QL QL= 2 sensors/28 days

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LANCET KIT (<i>lancets misc.</i>)	F	OTC
LANCETS (<i>lancets</i>)	F	OTC
OMNIPOD 5 INTRO KIT (<i>insulin infusion disposable pump</i>)	F	QL QL= 1 kit/year
OMNIPOD 5 PACK PODS (<i>insulin infusion disposable pump</i>)	F	QL QL= 10 pods/month
OMNIPOD DASH INTRO KIT (<i>insulin infusion disposable pump</i>)	F	QL QL= 1 kit/year
OMNIPOD DASH PODS (<i>insulin infusion disposable pump</i>)	F	QL QL= 10 pods/month
OMNIPOD STARTER KIT (<i>insulin infusion disposable pump</i>)	F	QL QL= 1 kit/year
ONETOUCH METER (<i>blood glucose monitoring supplies</i>)	\$0	OTC
ONETOUCH VERIO FLEX METER (<i>blood glucose monitoring supplies</i>)	\$0	OTC
ONETOUCH VERIO IQ METER (<i>blood glucose monitoring supplies</i>)	\$0	OTC
ONETOUCH VERIO METER (<i>blood glucose monitoring supplies</i>)	\$0	OTC
ONETOUCH VERIO REFLECT METER (<i>blood glucose monitoring supplies</i>)	\$0	OTC
V-GO INJ KIT (<i>insulin infusion disposable pump</i>)	F	QL QL= 1 kit/day

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MISC. DEVICES - Drugs for miscellaneous use		
ALCOHOL SWABS 70% (<i>alcohol swabs</i>)	F	OTC
PARENTERAL THERAPY SUPPLIES - Miscellaneous supplies		
B-D INSULIN SYRINGE U-500 (<i>insulin syringe/needle u-500</i>)	F	-
B-D PEN AUTOSHIELD DUO PEN NEEDLE (<i>insulin pen needle</i>)	F	OTC
CARETOUCH MIS (<i>needle (disp) 27 g</i>)	F	OTC
TECHLITE INSULIN SYRINGE (<i>insulin syringe/needle u-100</i>)	F	OTC
TECHLITE PEN NEEDLE (<i>insulin pen needle</i>)	F	OTC
TRUEPLUS INSULIN SYRINGE (<i>insulin syringe/needle u-100</i>)	F	OTC
TRUEPLUS PEN NEEDLE (<i>insulin pen needle</i>)	F	-
RESPIRATORY THERAPY SUPPLIES - Devices to assist with lung disorders		
AEROCHAMBER (<i>spacer/aerosol-holding chambers</i>)	F	OTC
PEAK FLOW METER (<i>peak flow meter</i>)	F	OTC
MIGRAINE PRODUCTS - Drugs to treat migraine headaches		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG - Drugs to treat migraine or other types of headache		
AJOVY INJ 225MG/1.5ML (<i>fremanezumab-vfrm</i>)	F	PA-QL QL= 1 pack/28 days
MIGRAINE PRODUCTS - MONOCLONAL ANTIBODIES - Drugs to treat migraine headaches		

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
AIMOVIG INJ 140MG/ML, 70MG/ML (<i>erenumab-aooe</i>)	F	PA-QL QL= 1 pack/28 days
AJOVY INJ 225MG/1.5ML (<i>fremanezumab-vfrm</i>)	F	PA-QL QL= 1 pack/28 days
EMGALITY INJ 120MG/ML (<i>galcanezumab-gnlm</i>)	F	PA-QL QL= 1 inj/28 days
EMGALITY INJ 100MG/ML 100MG/ML (<i>galcanezumab-gnlm</i>)	F	PA-QL QL= 3 inj/fill, 6 fills/year
UBRELVIY TAB 100MG, 50MG (<i>ubrogepant</i>)	F	PA-QL QL= 10 tabs/30 days, 6 fills/year
SEROTONIN AGONISTS - Drugs to treat migraine headaches		
REYVOW TAB 100MG, 50MG (<i>lasmiditan succinate</i>)	F	PA-QL QL= 8 tabs/30 days, 6 fills/year
<i>rizatriptan ODT 10MG, 5MG</i> (MAXALT Equiv)	F	QL QL= 12 tabs/fill, 3 fills/60 days
<i>rizatriptan tab 10MG, 5MG</i> (MAXALT Equiv)	F	QL QL= 12 tabs/fill, 3 fills/60 days
SUMATRIPTAN INJ 4MG/0.5ML, 6MG/0.5ML (IMITREX Equiv) (<i>sumatriptan succinate</i>)	F	QL QL= 4 inj/fill, 2 fills/30 days
<i>sumatriptan inj 4MG/0.5ML, 6MG/0.5ML</i> (IMITREX Equiv)	F	QL QL= 4 inj/fill, 2 fills/30 days
SUMATRIPTAN INJ 6MG/0.5ML 6MG/0.5ML (<i>sumatriptan succinate</i>)	F	QL QL= 4 inj/fill, 2 fills/30 days

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<i>sumatriptan tab 100MG, 25MG, 50MG</i> (IMITREX Equiv)	F	QL QL= 9 tabs/fill, 2 fills/30 days
<i>zolmitriptan tab 2.5MG, 5MG</i> (ZOMIG Equiv)	F	QL QL= 9 tabs/fill, 2 fills/30 days
MINERALS & ELECTROLYTES - Drugs to treat electrolyte disorders		
FLUORIDE - Drugs to treat mineral deficiency		
<i>sodium fluoride chew tab .25MG, .5MG, 1.1MG, 1MG, 2.2MG</i> (LURIDE Equiv)	\$0	Covered at \$0 for members 5 years or younger; All other members covered at generic copay
<i>sodium fluoride soln .125MG/DROP, .5MG/ML</i> (LURIDE Equiv)	\$0	Covered at \$0 for members 5 years or younger; All other members covered at generic copay
<i>SODIUM FLUORIDE TAB .5MG, 1MG (sodium fluoride)</i>	\$0	Covered at \$0 for members 5 years or younger; All other members covered at generic copay
PHOSPHATE - Drugs to treat electrolyte deficiency		
<i>phospha 250 neutral tab</i> (K-PHOS NEUTRAL Equiv)	F	-
<i>potassium phosphate monobasic tab 500MG</i> (K-PHOS Equiv)	F	-
POTASSIUM - Drugs to treat electrolyte disorders		
<i>potassium bicarbonate effier tab 25MEQ</i> (K-LYTE Equiv)	F	-
<i>potassium chloride ER cap 10MEQ, 8MEQ</i> (MICRO-K Equiv)	F	-

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<i>potassium chloride ER tab 10MEQ, 20MEQ, 8MEQ</i> (K-TAB Equiv)	F	-
<i>potassium chloride micro tab 10MEQ, 15MEQ, 20MEQ</i> (K-DUR Equiv)	F	-
<i>potassium chloride powder packet 20MEQ</i> (KLOR-CON Equiv)	F	-
<i>potassium chloride soln 10%, 20%</i>	F	-
ZINC - Drugs to treat mineral deficiency		
GALZIN CAP 25MG, 50MG (<i>zinc acetate (oral)</i>)	F	-
<i>zinc sulfate cap 220MG</i>	F	-
MISCELLANEOUS THERAPEUTIC CLASSES - Drugs to treat assorted conditions		
CHELATING AGENTS - Drugs to treat overdose or toxicity		
<i>penicillamine tab 250MG</i> (DEPEN TITRATAB Equiv)	F	-
IMMUNOMODULATORS - Drugs to treat rheumatoid arthritis, multiple sclerosis, etc.		
<i>lenalidomide cap 10MG, 15MG, 2.5MG, 20MG, 25MG, 5MG</i> (REVLIMID Equiv)	F	KMSP-PA-QL QL= 1 cap/day
REVLIMID CAP 10MG, 15MG, 2.5MG, 20MG, 25MG, 5MG (<i>lenalidomide</i>)	F	LD-QL-RS QL= 1 cap/day; Only available through Walgreens 888-347-3416; Restricted to Oncology or Hematology Specialist
REZUROCK TAB 200MG (<i>belumosudil mesylate</i>)	F	LD-PA-QL QL= 1 tab/day; Only available through Lumicera 855-847-3553
IMMUNOSUPPRESSIVE AGENTS - Drugs to treat disorders of the immune system		

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ENSPRYNG INJ 120MG/ML (<i>satralizumab-mwge</i>)	F	LMSP-PA-QL QL= 1 inj/28 days
<i>everolimus tab .25MG, .5MG, .75MG, 1MG</i> (ZORTRESS Equiv)	F	LMSP-PA
LUPKYNIS CAP 7.9MG (<i>voclosporin</i>)	F	LD-PA-QL QL= 6 caps/day; Only available through Biologics 800-850-4306 or PantheRx Pharmacy 855-726-8479
<i>sirolimus soln 1MG/ML</i> (RAPAMUNE Equiv)	F	-
POTASSIUM REMOVING AGENTS - Drugs to manage potassium levels		
LOKELMA PAK 10GM, 5GM (<i>sodium zirconium cyclosilicate</i>)	F	LMSP-PA
SPS SUSP 15GM/60ML (<i>sodium polystyrene sulfonate</i>)	F	-
PROGERIA TREATMENT AGENTS ***		
ZOKINVY CAP 50MG, 75MG (<i>lonafarnib</i>)	F	LD-PA-QL QL= 4 caps/day; Only available through CVS Specialty 800-237-2767
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS - Drugs to treat disorders of the immune system		
BENLYSTA AUTO-INJECTOR 200MG/ML (<i>belimumab</i>)	F	LMSP-PA-QL QL= 4 inj/28 day
BENLYSTA INJ 200MG/ML (<i>belimumab</i>)	F	LMSP-PA-QL QL= 4 inj/28 day
MOUTH/THROAT/DENTAL AGENTS - Drugs to treat problems related to mouth/throat/teeth		

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ANESTHETICS TOPICAL ORAL - Drugs for numbing		
<i>lidocaine viscous soln 2%</i> (XYLOCAINE HCL (MOUTH-THROAT) Equiv)	F	-
ANTI-INFECTIVES - THROAT - Drugs to treat throat infections		
<i>clotrimazole troches 10MG</i> (MYCELEX TROCHES Equiv)	F	-
<i>nystatin susp 100000UNIT/ML</i>	F	-
ANTISEPTICS - MOUTH/THROAT - Drugs to treat bacterial infections in the mouth and throat		
<i>chlorhexidine gluconate soln</i> (PERIDEX Equiv)	F	-
DENTAL PRODUCTS - Drugs to prevent cavities		
FLUORIDEX SENSITIVITY PASTE 1.1%-5% (<i>sodium fluoride-potassium nitrate</i>)	F	-
<i>sodium fluoride cream 1.1%</i> (PREVIDENT Equiv)	\$0	Covered at \$0 for members 5 years or younger; All other members covered at generic copay
<i>sodium fluoride gel 1.1%</i> (PREVIDENT Equiv)	F	-
<i>sodium fluoride paste 1.1%</i> (PREVIDENT Equiv)	F	-
<i>sodium fluoride rinse .02%, .022%, .05%, .2%</i> (PREVIDENT Equiv)	F	-
<i>sodium fluoride/potassium nitrate paste 1.1%-5%</i> (PREVIDENT Equiv)	F	-
STEROIDS - MOUTH/THROAT - Drugs to treat throat swelling		
<i>triamcinolone in orabase paste .1%</i> (KENALOG/ORABASE Equiv)	F	-

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THROAT PRODUCTS - MISC. - Miscellaneous drugs to treat the throat		
<i>cevimeline cap 30MG</i> (EVOXAC Equiv)	F	-
<i>pilocarpine tab 5MG, 7.5MG</i> (SALAGEN Equiv)	F	-
MULTIVITAMINS - Drugs to treat vitamin deficiency		
B-COMPLEX W/ FOLIC ACID - Drugs to treat vitamin deficiency		
DIALYVITE TAB (<i>b-complex w/ c-biotin-e-minerals & folic acid</i>)	F	-
DIALYVITE/ZINC TAB (<i>b-complex w/ c-zn & folic acid</i>)	F	-
FOLBEE PLUS CZ TAB (<i>b-complex w/ c-biotin-minerals & folic acid</i>)	F	-
<i>renaphro cap</i> (NEPHROCAP Equiv)	F	-
MULTIPLE VITAMINS W/ MINERALS - Drugs to treat vitamin and mineral deficiency		
<i>multivitamin/minerals tab</i> (STROVITE Equiv)	F	-
PED MULTI VITAMINS W/FL & FE - Drugs to treat vitamin deficiency		
<i>pediatric multiple vitamins/fluoride/iron soln</i>	F	-
PED MV W/ FLUORIDE - Drugs to treat vitamin deficiency		
FLORIVA PLUS DROPS (<i>pediatric multivitamins w/fl</i>)	F	-
MULTIVITAMIN/FLOURIDE CHEW 0.25MG (<i>pediatric multivitamins w/fl</i>)	F	-
MULTIVITAMIN/FLOURIDE CHEW 1MG (<i>pediatric multivitamins w/fl</i>)	F	-

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MULTIVITAMIN/FLUORIDE CHEW TAB (<i>pediatric multivitamins w/fl</i>)	F	-
<i>pediatric multiple vitamins/fluoride chew tab</i>	F	-
<i>pediatric multiple vitamins/fluoride soln</i>	F	-
PRENATAL VITAMINS - Drugs to treat and prevent vitamin deficiency		
PRENATAL VITAMINS (PRENATAL PLUS, PREPLUS, PRENAPLUS) (<i>prenatal vit w/ ferrous fumarate-folic acid</i>)	F	-
MUSCULOSKELETAL THERAPY AGENTS - Drugs to treat spasms		
CENTRAL MUSCLE RELAXANTS - Drugs to treat muscle spasms		
<i>baclofen tab 10MG, 20MG, 5MG</i> (BACLOFEN Equiv)	F	-
<i>carisoprodol tab 350MG</i> (SOMA Equiv)	F	QL QL=120 tabs/30 days
<i>chlorzoxazone tab 500mg 500MG</i>	F	-
<i>cyclobenzaprine tab 10mg 10MG</i> (FLEXERIL Equiv)	F	-
<i>cyclobenzaprine tab 5mg 5MG</i> (FLEXERIL Equiv)	F	-
<i>methocarbamol tab</i> (ROBAXIN Equiv)	F	-
<i>tizanidine tab 2MG, 4MG</i> (ZANAFLEX Equiv)	F	-
DIRECT MUSCLE RELAXANTS - Drugs to treat muscle spasms		
<i>dantrolene cap 100MG, 25MG, 50MG</i> (DANTRIUM Equiv)	F	-
NASAL AGENTS - SYSTEMIC AND TOPICAL - Drugs to treat the nose or sinus		
NASAL AGENTS - MISC. - Miscellaneous nasal agents		
ALCOHOL SWABS 62% (<i>alcohol (nasal)</i>)	F	OTC

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NASAL ANTIALLERGY - Drugs to treat cough, cold, and allergy symptoms		
<i>azelastine nasal spray 0.1% .1%, 137MCG/SPRAY</i> (ASTELIN Equiv)	F	-
NASAL ANTICHOLINERGICS - Drugs to treat cough, cold, and allergy symptoms		
<i>ipratropium nasal spray .03%, .06%</i> (ATROVENT Equiv)	F	-
NASAL STEROIDS - Drugs to treat cough, cold, and allergy symptoms		
<i>fluticasone nasal spray 50MCG/ACT</i> (FLONASE Equiv)	F	QL QL= 2 bottles/fill
<i>triamcinolone OTC nasal spray 55MCG/ACT</i> (NASACORT Equiv)	F	OTC-QL QL= 2 bottles/fill
NEUROMUSCULAR AGENTS - Drugs to relax/paralyze muscles		
ALS AGENTS - Drugs to treat ALS		
RADICAVA ORS STARTER KIT 105MG/5ML (<i>edaravone</i>)	F	LD-PA-QL QL= 70ml/365 days; Only available through Accredo 800-803-2523
RADICAVA ORS SUSP 105MG/5ML (<i>edaravone</i>)	F	LD-PA-QL QL= 50mL/28 days; Only available through Accredo 800-803-2523
<i>riluzole tab 50MG</i> (RILUTEK Equiv)	F	-
SPINAL MUSCULAR ATROPHY AGENTS (SMA) - Drugs to treat spinal muscular atrophy		
EVRYSDI SOLN .75MG/ML (<i>risdiplam</i>)	F	LD-PA-QL QL= 6.67ml/day; Only available through Accredo 800-803-2523

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NUTRIENTS - Drugs to treat nutrient disorders		
LIPIDS - Drugs to treat nutrient disorders		
LIQUIGEN (<i>medium chain triglycerides</i>)	F	OTC-PA
MCT OIL (<i>medium chain triglycerides</i>)	F	OTC-PA
MISC. NUTRITIONAL SUBSTANCES - Miscellaneous nutritional substances		
CREATINE PACKET 5000MG (<i>creatine</i>)	F	OTC-PA
PROTEINS - Drugs to treat nutrient disorders		
CITRULLINE PACKET (<i>citrulline</i>)	F	OTC-PA
<i>phlexy-10 tab</i>	F	OTC-PA
<i>pro-stat liquid</i>	F	OTC-PA
OPHTHALMIC AGENTS - Drugs to treat eye conditions		
BETA-BLOCKERS - OPTHALMIC - Drugs to treat glaucoma		
<i>brimonidine/timolol ophth soln .2%-.5% (COMBIGAN Equiv)</i>	F	-
<i>dorzolamide/timolol ophth soln .5%-2%, 5MG/ML-20MG/ML, 6.8MG/ML-22.3MG/ML (COSOPT Equiv)</i>	F	-
LEVOBUNOLOL OPTH SOLN .5% (BETAGAN Equiv) (<i>levobunolol hcl</i>)	F	-
<i>levobunolol ophth soln .5% (BETAGAN Equiv)</i>	F	-
<i>timolol maleate ophth gel .25%, .5% (TIMOPTIC-XE Equiv)</i>	F	-
<i>timolol maleate ophth soln .25%, .5% (TIMOPTIC Equiv)</i>	F	-

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CYCLOPLEGIC MYDRIATICS - Drugs to treat eye conditions		
<i>atropine ophth oint 1%</i>	F	-
<i>atropine ophth soln 1%</i> (ISOPTO ATROPINE Equiv)	F	-
CYCLOMYDRIL OPTH SOLN .2%-1% (<i>cyclopentolate w/ phenylephrine</i>)	F	-
<i>cyclopentolate ophth soln .5%, 1%, 2%</i> (CYCLOGYL Equiv)	F	-
HOMATROPINE OPTH SOLN 5% (<i>homatropine hbr</i>)	F	-
<i>phenylephrine ophth soln 10%, 2.5%</i> (MYDFRIN Equiv)	F	-
<i>tropicamide ophth soln .5%, 1%</i> (MYDRIACYL Equiv)	F	-
MIOTICS - Drugs to treat eye conditions		
ISOPTO CARBACHOL OPTH SOLN (<i>carbachol ophth</i>)	F	-
<i>pilocarpine ophth soln 1%, 2%, 4%</i> (ISOPTO CARPINE Equiv)	F	-
OPHTHALMIC ADRENERGIC AGENTS - Drugs to treat eye conditions		
<i>apraclonidine ophth soln .5%</i> (IOPIDINE Equiv)	F	-
<i>brimonidine ophth soln 0.15% .15%</i> (ALPHAGAN P 0.15% Equiv)	F	-
<i>brimonidine ophth soln 0.2% .2%</i>	F	-
IOPIDINE OPTH SOLN 1% 1% (<i>apraclonidine hcl</i>)	F	-

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SIMBRINZA OPTH SUSP .2%-1% (brinzolamide-brimonidine tartrate)	F	-
OPHTHALMIC ANTI-INFECTIVES - Drugs to treat eye infections		
AZASITE SOLN 1% (azithromycin (ophth))	F	-
BACITRACIN OPTH OINT 500UNIT/GM (bacitracin (ophthalmic))	F	-
bacitracin/neomycin/polymyxin b ophth oint 3.5MG/GM-400UNIT/GM-10000UNIT/GM, 5MG/GM-400UNIT/GM-10000UNIT/GM (NEOSPORIN Equiv)	F	-
bacitracin/polymyxin b ophth oint 500UNIT/GM-10000UNIT/GM (POLYSPORIN Equiv)	F	-
ciprofloxacin ophth soln .3% (CILOXAN Equiv)	F	-
erythromycin ophth oint 5MG/GM	F	-
GENTAK OPTH OINT .3% (gentamicin sulfate (ophth))	F	-
gentamicin ophth soln .3% (GARAMYCIN Equiv)	F	-
levofloxacin ophth soln .5% (QUIXIN Equiv)	F	-
moxifloxacin ophth soln .5% (VIGAMOX OPTH SOLN Equiv)	F	-
NATACYN OPTH SUSP 5% (natamycin)	F	QL QL= 15ml/fill

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
NEOMYCIN/POLYMIXIN/GRAMICIDIN OPTH SOLN .025MG/ML-1.75MG/ML-10000UNIT/ML (<i>neomycin-polymyxin-gramicidin</i>)	F	-
<i>ofloxacin ophth soln .3%</i> (OCUFLOX Equiv)	F	-
<i>polymyxin b/trimethoprim ophth soln .1%-10000UNIT/ML</i> (POLYTRIM Equiv)	F	-
<i>sulfacetamide sodium ophth soln 10%</i> (BLEPH-10 Equiv)	F	-
<i>tobramycin ophth soln .3%</i> (TOBREX Equiv)	F	-
TRIFLURIDINE OPTH SOLN 1% (<i>trifluridine</i>)	F	-
ZIRGAN OPTH GEL .15% (<i>ganciclovir ophthalmic</i>)	F	-
OPHTHALMIC IMMUNOMODULATORS - Drugs to treat dry eyes		
RESTASIS OPTH EMULSION .05% (<i>cyclosporine ophth</i>)	F	RS Restricted to Ophthalmology or Optometry Specialist
OPHTHALMIC LOCAL ANESTHETICS - Drugs for numbing		
<i>proparacaine ophth soln .5%</i> (ALCAINE Equiv)	F	-
OPHTHALMIC STEROIDS - Drugs to treat inflammation		
<i>bacitracin/polymyxin/neomycin/hydrocortisone ophth oint .5%-1%-400UNIT/GM-10000UNIT/GM, 1%-3.5MG/GM-400UNIT/GM-10000UNIT/GM</i> (CORTISPORIN Equiv)	F	-
DEXAMETHASONE OPTH SOLN .1% (<i>dexamethasone sodium phosphate ophth</i>)	F	-

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<i>difluprednate ophth emulsion .05%</i> (DUREZOL Equiv)	F	-
<i>fluorometholone ophth soln</i> (FML LIQUIFILM Equiv)	F	-
LOTEMAX OPHTH GEL .5% (<i>loteprednol etabonate</i>)	F	-
LOTEMAX OPHTH OINT .5% (<i>loteprednol etabonate</i>)	F	-
<i>loteprednol etabonate ophth gel .5%</i> (LOTEMAX Equiv)	F	-
<i>loteprednol ophth susp .5%</i> (LOTEMAX Equiv)	F	-
MAXIDEX OPHTH SOLN .1%, 9% (<i>dexamethasone ophth</i>))	F	-
<i>neomycin/polymyxin/dexamethasone ophth oint .1%-3.5MG/GM-10000UNIT/GM</i> (MAXITROL Equiv)	F	-
<i>neomycin/polymyxin/dexamethasone ophth soln .1%-3.5MG/ML-10000UNIT/ML</i> (MAXITROL Equiv)	F	-
NEOMYCIN/POLYMYXIN/HYDROCORTISONE OPHTH SOLN 1%-3.5MG/ML-10000UNIT/ML (<i>neomycin-polymyxin-hc ophth</i>))	F	-
PRED MILD OPHTH SOLN .12% (<i>prednisolone acetate ophth</i>))	F	-
PRED-G OPHTH SOLN .3%-1% (<i>gentamicin-prednisolone acetate</i>)	F	-
PREDNISOLONE OPHTH SUSP 1% (<i>prednisolone acetate ophth</i>))	F	-
PREDNISOLONE OPHTH SUSP 1% (<i>prednisolone acetate ophth</i>))	F	-

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PREDNISOLONE SODIUM PHOSPHATE OPHTH SOLN 1% (<i>prednisolone sodium phosphate (ophth)</i>)	F	-
<i>sulfacetamide sodium/prednisolone ophth soln</i> (VASOCIDIN Equiv)	F	-
TOBRADEX OPHTH OINT .1%-.3% (<i>tobramycin-dexamethasone</i>)	F	-
<i>tobramycin/dexamethasone ophth soln .1%-.3%</i> (TOBRADEX Equiv)	F	-
ZYLET OPHTH SUSP .3%-.5% (<i>loteprednol etabonate-tobramycin</i>)	F	QL QL= 5ml/fill (10ml bottle is Not Covered)
OPHTHALMICS - MISC. - Miscellaneous eye agents		
ALOCRILOPHTH SOLN 2% (<i>nedocromil sodium (ophth)</i>)	F	-
ALOMIDE OPHTH SOLN .1% (<i>lodoxamide tromethamine</i>)	F	-
<i>azelastine ophth soln .05%</i> (OPTIVAR Equiv)	F	-
<i>brinzolamide ophth susp 1%</i> (AZOPT Equiv)	F	-
<i>bromfenac ophth soln .09%</i> (BROMDAY Equiv)	F	-
<i>cromolyn ophth soln 4%</i> (CROLOM Equiv)	F	-

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CYSTADROPS SOLN .37% (<i>cysteamine hcl</i>)	F	LD-QL-RS QL = 4 bottles/28 days; Restricted to Ophthalmology Specialist; Only available through Anovo Specialty Pharmacy 844-288-5007
CYSTARAN OPTH SOLN .44% (<i>cysteamine hcl</i>)	F	LD-QL-RS QL= 4 bottles/28 days; Restricted to Ophthalmology or Optometry Specialist; Only available through Walgreens 888-347-3416
<i>diclofenac sodium ophth soln .1%</i> (VOLTAREN Equiv)	F	-
<i>dorzolamide ophth soln 2%</i> (TRUSOPT Equiv)	F	-
FLURBIPROFEN OPTH SOLN .03% (<i>flurbiprofen sodium</i>)	F	-
ILEVRO OPTH SUSP .3% (<i>nepafenac</i>)	F	-
<i>ketorolac ophth soln .4%, .5%</i> (ACULAR (LS) Equiv)	F	-
<i>ketotifen ophth soln .025%</i> (ZADITOR Equiv)	F	OTC OTC covered only
NEVANAC OPTH SUSP .1% (<i>nepafenac</i>)	F	-
<i>olopatadine ophth soln 0.1% .1%</i> (PATANOL Equiv)	F	OTC
<i>olopatadine ophth soln 0.2% .2%</i> (PATADAY Equiv)	F	OTC-QL QL= 2.5ml/30 days
PROLENSA OPTH SOLN .07% (<i>bromfenac sodium (ophth)</i>)	F	-

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UPNEEQ SOLN .1% (<i>oxymetazoline hcl (blepharoptosis)</i>)	EXC	-
PROSTAGLANDINS - OPTHALMIC - Drugs to treat glaucoma		
<i>bimatoprost ophth soln .03%</i>	F	QL QL= 2.5ml/30 days
<i>latanoprost ophth soln .005%</i> (XALATAN Equiv)	F	QL QL= 2.5ml/30 days
LUMIGAN OPTH SOLN .01% (<i>bimatoprost</i>)	F	QL QL= 2.5ml/30 days
OTIC AGENTS - Drugs to treat ear infection		
OTIC AGENTS - MISCELLANEOUS - Miscellaneous ear agents		
<i>acetic acid otic soln 2%</i> (VOSOL Equiv)	F	-
OTIC ANTI-INFECTIVES - Drugs to treat ear infections		
CIPROFLOXACIN OTIC SOLN .2% (<i>ciprofloxacin hcl (otic)</i>)	F	-
OTIC COMBINATIONS - Drugs to treat ear conditions		
<i>ciprofloxacin/dexamethasone otic susp .1%-.3%</i> (CIPRODEX Equiv)	F	-
COLY-MYCIN S OTIC SUSP .5MG/ML-3MG/ML-3.3MG/ML-10MG/ML (<i>neomycin-colistin-hc-thonzonium</i>)	F	-
<i>neomycin/polymixin/hydrocortisone otic soln 1%-3.5MG/ML-10000UNIT/ML</i> (CORTISPORIN Equiv)	F	-

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<i>neomycin/polymixin/hydrocortisone otic susp 1%-3.5MG/ML-10000UNIT/ML (CORTISPORIN Equiv)</i>	F	-
OTIC STEROIDS - Drugs to treat ear swelling		
<i>acetic acid/hydrocortisone otic soln 1%-2% (VOSOL HC Equiv)</i>	F	-
<i>fluocinolone otic oil .01% (DERMOTIC Equiv)</i>	F	-
OXYTOCICS - Drugs to prevent/control uterine bleeding		
OXYTOCICS - Drugs to prevent/control uterine bleeding		
<i>methylergonovine tab .2MG (METHERGINE Equiv)</i>	F	QL QL= 28 tabs/fill, 1 fill/365 days
PASSIVE IMMUNIZING AGENTS - Antibody drugs to treat low immune system		
IMMUNE SERUMS - Antibody drugs to treat low immune system		
<i>HIZENTRA INJ 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML (immune globulin (human) subcutaneous)</i>	F	KMSP-PA
PASSIVE IMMUNIZING AGENTS - COMBINATIONS - Drugs to treat immune deficiency		
<i>HYQVIA INJ 10GM/100ML-800UNIT/5ML, 2.5GM/25ML-200UNT/1.25ML, 20GM/200ML-1600UNIT/10ML, 30GM/300ML-2400UNIT/15ML, 5GM/50ML-400UNIT/2.5ML (immune globulin (human)-hyaluronidase (human recombinant))</i>	F	KMSP-PA
PASSIVE IMMUNIZING AND TREATMENT AGENTS - Antibody drugs to treat low immune system		

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IMMUNE SERUMS - Antibody drugs to treat low immune system		
HIZENTRA INJ 1GM/5ML, 2GM/10ML, 4GM/20ML <i>(immune globulin (human) subcutaneous)</i>	F	KMSP-PA
XEMBIFY INJ 10GM/50ML, 1GM/5ML, 2GM/10ML, 4GM/20ML <i>(immune globulin (human)-klhw)</i>	F	LD-PA Only available through Diplomat Pharmacy 877-977-9118
PENICILLINS - Drugs to treat bacterial infections		
AMINOPENICILLINS - Drugs to treat infections		
<i>amoxicillin cap 250MG, 500MG</i> (TRIMOX Equiv)	F	-
AMOXICILLIN CHEW TAB 125MG, 250MG <i>(amoxicillin)</i>	F	-
<i>amoxicillin susp 125MG/5ML, 200MG/5ML, 250MG/5ML, 400MG/5ML</i> (TRIMOX Equiv)	F	-
<i>amoxicillin tab 500MG, 875MG</i> (AMOXIL Equiv)	F	-
NATURAL PENICILLINS - Drugs to treat bacterial infections		
<i>penicillin vk tab 250MG, 500MG</i> (VEETIDS Equiv)	F	-
PENICILLIN COMBINATIONS - Drugs to treat bacterial infections		
<i>amoxicillin/clavulanate susp 28.5MG/5ML-200MG/5ML, 42.9MG/5ML-600MG/5ML, 57MG/5ML-400MG/5ML, 62.5MG/5ML-250MG/5ML</i> (AUGMENTIN ES Equiv)	F	-

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<i>amoxicillin/clavulanate tab 500-125mg, 875-125mg 125MG-500MG, 125MG-875MG</i> (AUGMENTIN Equiv)	F	-
PENICILLINASE-RESISTANT PENICILLINS - Drugs to treat bacterial infections		
<i>dicloxacillin cap 250MG, 500MG</i> (DYNAPEN Equiv)	F	-
PHARMACEUTICAL ADJUVANTS - Drugs to enhance primary drug effects		
SEMI SOLID VEHICLES - Miscellaneous compounding ingredients		
POLYETHYLENE GLYCOL 8000 GRANULES (polyethylene glycol 8000)	F	-
PROGESTINS - Drugs to replace female hormones		
PROGESTINS - Drugs used for contraception		
<i>hydroxyprogesterone inj 250MG/ML</i> (MAKENA Equiv)	F	LMSP-PA
<i>medroxyprogesterone tab 10MG, 2.5MG, 5MG</i> (PROVERA Equiv)	F	-
<i>norethindrone tab 5MG</i> (AYGESTIN Equiv)	F	-
<i>progesterone cap 100MG, 200MG</i> (PROMETRIUM Equiv)	F	-
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Drugs to treat mental and emotional conditions		
AGENTS FOR CHEMICAL DEPENDENCY - Drugs to treat chemical dependency		
<i>acamprosate calcium DR tab 333MG</i> (CAMPRAL Equiv)	F	-
<i>disulfiram tab 250MG, 500MG</i> (ANTABUSE Equiv)	F	-

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ANTI-CATAPLECTIC AGENTS - Drugs to treat sleep disorders		
SODIUM OXYBATE SOLN 500MG/ML (<i>sodium oxybate</i>)	F	LD-PA-QL QL= 540ml/30 days; Only available through Xyrem Certified Pharmacy 1-866-997-3688
ANTIDEMENTIA AGENTS - Drugs to treat dementia and memory loss		
<i>donepezil ODT 10MG, 5MG</i> (ARICEPT Equiv)	F	QL QL= 1 tab/day
<i>donepezil tab 10MG, 5MG</i> (ARICEPT Equiv)	F	QL QL= 2 tabs/day
<i>donepezil tab 23mg 23MG</i> (ARICEPT Equiv)	F	QL QL= 1 tab/day
<i>galantamine ER cap 16MG, 24MG, 8MG</i> (RAZADYNE ER Equiv)	F	-
<i>galantamine tab 12MG, 4MG, 8MG</i> (RAZADYNE Equiv)	F	-
<i>memantine ER cap 14MG, 21MG, 28MG, 7MG</i> (NAMENDA XR Equiv)	F	ST Step Therapy requires trial of memantine tab
<i>memantine soln 10MG/5ML, 2MG/ML</i> (NAMENDA Equiv)	F	-
<i>memantine tab 10MG, 5MG</i> (NAMENDA Equiv)	F	-
<i>rivastigmine cap 1.5MG, 3MG, 4.5MG, 6MG</i> (EXELON Equiv)	F	-

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<i>rivastigmine patch 13.3MG/24HR, 4.6MG/24HR, 9.5MG/24HR</i> (EXELON Equiv)	F	ST Step Therapy requires trial of rivastigmine cap
COMBINATION PSYCHOTHERAPEUTICS - Drugs to treat psychoses		
CHLORDIAZEPOXIDE/AMITRIPTYLINE TAB 10MG-25MG, 5MG-12.5MG (<i>chlordiazepoxide-amitriptyline</i>)	F	-
<i>olanzapine/fluoxetine cap 12MG-25MG, 12MG-50MG, 3MG-25MG, 6MG-25MG, 6MG-50MG</i> (SYMBYAX Equiv)	F	-
PERPHENAZINE/ AMITRIPTYLINE TAB 2MG-10MG, 2MG-25MG, 4MG-10MG, 4MG-25MG, 4MG-50MG (<i>perphenazine-amitriptyline</i>)	F	-
FIBROMYALGIA AGENTS - Drugs to treat widespread muscle pain		
SAVELLA PAK (<i>milnacipran hcl</i>)	F	-
SAVELLA TAB 100MG, 12.5MG, 25MG, 50MG (<i>milnacipran hcl</i>)	F	QL QL= 2 tabs/day
MOVEMENT DISORDER DRUG THERAPY - Drugs to treat movement disorders		
INGREZZA CAP 40MG, 60MG, 80MG (<i>valbenazine tosylate</i>)	F	LD-PA-QL QL= 1 cap/day; Only available through Garfield Pharmacy 323-295-5585
<i>tetrabenazine tab 12.5MG, 25MG</i> (XENAZINE Equiv)	F	LMSP-PA
MULTIPLE SCLEROSIS AGENTS - Drugs to treat multiple sclerosis (MS)		
AUBAGIO TAB 14MG, 7MG (<i>teriflunomide</i>)	F	LMSP

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AVONEX INJ 30MCG/0.5ML (<i>interferon beta-1a</i>)	F	LMSP
<i>dalfampridine ER tab 10MG</i> (AMPYRA Equiv)	F	LMSP-PA-QL QL= 2 tabs/day
<i>dimethyl fumarate DR cap 120MG, 240MG</i> (TECFIDERA Equiv)	F	LMSP
<i>dimethyl fumarate DR starter pack</i> (TECFIDERA STARTER PACK Equiv)	F	LMSP
EXTAVIA INJ .3MG (<i>interferon beta-1b</i>)	F	LMSP
<i>fingolimod hcl cap 0.5mg .5MG</i> (GILENYA Equiv)	F	LMSP-QL QL= 1 cap/day
GILENYA CAP 0.25MG .25MG (<i>fingolimod hcl</i>)	F	LMSP-QL QL= 1 cap/day
<i>glatiramer inj 20MG/ML, 40MG/ML</i> (COPAXONE Equiv)	F	LMSP
KESIMPTA INJ 20MG/0.4ML (<i>ofatumumab (ms)</i>)	F	LMSP
MAYZENT TAB .25MG, 1MG, 2MG (<i>siponimod fumarate</i>)	F	LMSP
MAYZENT TAB STARTER PACK .25MG (<i>siponimod fumarate</i>)	F	LMSP
PLEGRIDY INJ 125MCG/0.5ML (<i>peginterferon beta-1a</i>)	F	LMSP
PLEGRIDY PEN INJ 125MCG/0.5ML (<i>peginterferon beta-1a</i>)	F	LMSP

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ZEPOSIA CAP .92MG (<i>ozanimod hcl</i>)	F	LMSP-PA-QL QL= 1 cap/day
ZEPOSIA STARTER PACK (<i>ozanimod hcl</i>)	F	LMSP-PA-QL QL= 1 cap/day
PSEUDOBULBAR AFFECT (PBA) AGENTS - Drugs to treat nervous system disorders		
NUEDEXTA CAP 10MG-20MG (<i>dextromethorphan hbr-quinidine sulfate</i>)	F	PA-QL QL= 2 caps/day
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. - Miscellaneous psychotherapeutic and neurological drugs		
PIMOZIDE TAB 1MG, 2MG (<i>pimozide</i>)	F	-
SMOKING DETERRENTS - Drugs to treat smoking urges		
<i>bupropion SR tab 150MG</i> (ZYBAN Equiv)	\$0	QL-SMKG Limited to 180 days/plan year
<i>nicotine gum 2MG, 4MG</i> (NICORETTE Equiv)	\$0	OTC-QL-SMKG Limited to 180 days/plan year
NICOTINE KIT (<i>nicotine</i>)	\$0	OTC-QL-SMKG
<i>nicotine lozenge 2MG, 4MG</i> (COMMIT Equiv)	\$0	OTC-QL-SMKG Limited to 180 days/plan year
<i>nicotine patch 14MG/24HR, 21MG/24HR, 7MG/24HR</i> (NICODERM Equiv)	\$0	OTC-QL-SMKG Limited to 182 days/plan year
NICOTROL INHALER 10MG (<i>nicotine</i>)	\$0	QL-SMKG Limited to 180 days/plan year
NICOTROL NASAL SPRAY 10MG/ML (<i>nicotine</i>)	\$0	QL-SMKG Limited to 180 days/plan year

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VARENICLINE PAK (<i>varenicline tartrate</i>)	\$0	QL-SMKG Limited to 168 days/plan year
VARENICLINE TAB 1MG (<i>varenicline tartrate</i>)	\$0	QL-SMKG Limited to 168 days/plan year
<i>varenicline tartrate tab .5MG, 1MG</i> (VARENICLINE Equiv)	\$0	QL-SMKG Limited to 168 days/plan year
TRANSTHYRETIN AMYLOIDOSIS AGENTS - Drugs to treat nerve problems associated with transthyretin amyloidosis		
TEGSEDI INJ 284MG/1.5ML (<i>inotersen sodium</i>)	F	LD-PA-QL QL= 4 inj/28 days; Only available through Accredo 800-803-2523
RESPIRATORY AGENTS - MISC. - Drugs to treat lung conditions		
CYSTIC FIBROSIS AGENTS - Drugs to treat cystic fibrosis conditions		
KALYDECO PAK 25MG, 50MG, 75MG (<i>ivacaftor</i>)	F	KMSP-PA-QL-SF QL= 2 packets/day
KALYDECO TAB 150MG (<i>ivacaftor</i>)	F	KMSP-PA-QL-SF QL= 2 tabs/day
ORKAMBI GRANULES PACKET 100MG-125MG, 150MG-188MG, 75MG-94MG (<i>lumacaftor-ivacaftor</i>)	F	KMSP-PA-QL-SF QL= 2 packets/day
ORKAMBI TAB 100MG-125MG, 125MG-200MG (<i>lumacaftor-ivacaftor</i>)	F	KMSP-PA-QL-SF QL= 4 tabs/day
PULMOZYME INH SOLN 2.5MG/2.5ML (<i>dornase alfa</i>)	F	LMSP

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SYMDEKO TAB 100MG-150MG, 50MG-75MG (<i>tezacaftor-ivacaftor</i>)	F	KMSP-PA-QL-SF QL= 2 tabs/day
TRIKAFTA TAB 25MG-50MG, 50MG-100MG (<i>elexacaftor-tezacaftor-ivacaftor</i>)	F	KMSP-PA-QL QL= 84 tabs/28 days
PULMONARY FIBROSIS AGENTS - Drugs to treat pulmonary fibrosis		
OFEV CAP 100MG, 150MG (<i>nintedanib esylate</i>)	F	LD-PA-QL-SF QL= 2 caps/day; Only available through Accredo 800-803-2523 or Walgreens 888-347-3416
<i>pirfenidone cap 267MG</i> (ESBRIET Equiv)	F	LMSP-PA-QL-SF QL= 9 caps/day
<i>pirfenidone tab 267mg 267MG</i> (ESBRIET Equiv)	F	LMSP-PA-QL-SF QL= 9 tabs/day
<i>pirfenidone tab 801mg 801MG</i> (ESBRIET Equiv)	F	LMSP-PA-QL-SF QL= 3 tabs/day
TETRACYCLINES - Drugs to treat bacterial infections		
TETRACYCLINES - Drugs to treat infections		
<i>doxycycline hyclate cap 100MG, 50MG</i> (VIBRAMYCIN Equiv)	F	-
<i>doxycycline hyclate tab 100MG, 20MG</i> (VIBRATAB Equiv)	F	-
<i>doxycycline monohydrate cap 100mg 100MG</i> (MONODOX Equiv)	F	-

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<i>doxycycline monohydrate cap 50mg 50MG</i> (MONODOX Equiv)	F	-
<i>doxycycline monohydrate tab 100MG, 50MG, 75MG</i> (ADOXA Equiv)	F	-
<i>doxycycline susp 25MG/5ML</i> (VIBRAMYCIN Equiv)	F	-
<i>minocycline cap 100MG, 50MG, 75MG</i> (MINOCIN Equiv)	F	-
THYROID AGENTS - Drugs to regulate thyroid hormones		
ANTITHYROID AGENTS - Drugs to treat high thyroid level		
<i>methimazole tab</i> (TAPAZOLE Equiv)	F	-
<i>propylthiouracil tab 50MG</i>	F	-
THYROID HORMONES - Drugs to regulate thyroid hormones		
ARMOUR THYROID TAB, NATURE THROID TAB 113.75MG, 120MG, 130MG, 146.25MG, 15MG, 16.25MG, 162.5MG, 180MG, 195MG, 240MG, 260MG, 300MG, 30MG, 32.5MG, 325MG, 48.75MG, 60MG, 65MG, 81.25MG, 90MG, 97.5MG (<i>thyroid</i>)	F	-
<i>levothyroxine tab 100MCG, 112MCG, 125MCG, 137MCG, 150MCG, 175MCG, 200MCG, 25MCG, 300MCG, 50MCG, 75MCG, 88MCG</i> (SYNTHROID Equiv)	F	-
<i>liothyronine tab 25MCG, 50MCG, 5MCG</i> (CYTOMEL Equiv)	F	-

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<i>np thyroid tab 120MG, 15MG, 30MG, 60MG, 90MG</i> (ARMOUR THYROID, NATURE THROID Equiv)	F	-
THYROLAR TAB (<i>liotrix (t3-t4)</i>)	F	-
TOXOIDS - Drugs to prevent infection		
TOXOID COMBINATIONS - Drugs to prevent infection		
ADACEL/BOOSTRIX INJ 2.5LF/0.5ML-5LF/0.5ML-18.5MCG/0.5ML (<i>tetanus toxoid-diphtheria-acellular pertussis adsorb (tdap)</i>)	EXC	VAC
KINRIX INJ, QUADRACEL DTAP-IPV INJ 10LFU/0.5ML-25LFU/0.5ML-58MCG/0.5ML, 5LFU/0.5ML-15LFU/0.5ML-48MCG/0.5ML (<i>diph-tetanus tox ad-acell pertussis & polio virus, ipv vac</i>)	EXC	VAC
KINRIX PREF SYRINGE, QUADRACEL PREF SYRINGE 10LFU/0.5ML-25LFU/0.5ML-58MCG/0.5ML, 5LFU/0.5ML-15LFU/0.5ML-48MCG/0.5ML (<i>diph-tetanus tox ad-acell pertussis & polio virus, ipv vac</i>)	EXC	VAC
PEDIARIX INJ (<i>diph-tetanus tox-acell pert-hepatitis b recomb-polio ipv vac</i>)	EXC	VAC
PENTACEL INJ 5LFU/0.5ML-15LFU/0.5ML-48MCG/0.5ML (<i>diph-ac pert-tet tox ad-polio ipv-haemophil b poly vac</i>)	EXC	VAC

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ULCER DRUGS - Drugs to treat bowel, intestine, and stomach conditions		
ANTISPASMODICS - Drugs to treat diarrhea		
<i>dicyclomine cap 10MG</i> (BENTYL Equiv)	F	-
<i>dicyclomine soln 10MG/5ML</i> (BENTYL Equiv)	F	-
<i>dicyclomine tab 20MG</i> (BENTYL Equiv)	F	-
<i>glycopyrrolate tab 1MG, 2MG</i> (ROBINUL Equiv)	F	-
<i>hyoscyamine sulfate CR tab .375MG</i> (LEVVID Equiv)	F	-
<i>hyoscyamine sulfate elixir .125MG/5ML</i> (LEVSIN Equiv)	F	-
<i>hyoscyamine sulfate ODT .125MG</i> (ANASPAZ Equiv)	F	-
<i>hyoscyamine sulfate SL tab .125MG</i> (LEVSIN Equiv)	F	-
<i>hyoscyamine tab .125MG</i> (LEVSIN Equiv)	F	-
H-2 ANTAGONISTS - Drugs to treat bowel, intestine, and stomach conditions		
<i>famotidine susp 40MG/5ML</i> (PEPCID Equiv)	F	-
<i>famotidine tab 10MG, 20MG, 40MG</i> (PEPCID Equiv)	F	-
MISC. ANTI-ULCER - Miscellaneous anti-ulcer drugs		
<i>sucralfate tab 1GM</i> (CARAFATE Equiv)	F	-
PROTON PUMP INHIBITORS - Drugs to treat acid reflux		
<i>esomeprazole cap 20MG, 40MG</i> (NEXIUM Equiv)	F	OTC
<i>lansoprazole cap 15MG, 30MG</i> (PREVACID Equiv)	F	Rx Only
<i>omeprazole DR cap 10MG, 20MG, 40MG</i> (PRILOSEC Equiv)	F	-
<i>pantoprazole EC tab 20MG, 40MG</i> (PROTONIX Equiv)	F	-

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<i>rabeprazole EC tab 20MG</i> (ACIPHEX Equiv)	F	-
ULCER DRUGS - PROSTAGLANDINS - Drugs to treat bowel, intestine, and stomach conditions		
<i>misoprostol tab 100MCG, 200MCG</i> (CYTOTEC Equiv)	F	-
ULCER THERAPY COMBINATIONS - Drugs to treat bowel, intestine, and stomach conditions		
ZEGERID CAP OTC (<i>omeprazole-sodium bicarbonate</i>)	F	OTC
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS - Drugs to treat ulcers		
MISC. ANTI-ULCER - Miscellaneous anti-ulcer drugs		
<i>sucralfate susp 1GM/10ML</i> (CARAFATE Equiv)	F	-
PROTON PUMP INHIBITORS - Drugs to treat acid reflux		
<i>omeprazole tab 20MG</i>	F	OTC
ULCER THERAPY COMBINATIONS - Drugs to treat bowel, intestine, and stomach conditions		
ZEGERID CAP OTC 20MG-1100MG (<i>omeprazole-sodium bicarbonate</i>)	F	OTC
URINARY ANTISPASMODICS - Drugs to treat miscellaneous bladder spasms		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC) - Drugs to treat miscellaneous bladder spasms		
<i>fesoterodine fumarate ER tab 4MG, 8MG</i> (TOVIAZ Equiv)	F	-
<i>oxybutynin ER tab 10MG, 15MG, 5MG</i> (DITROPAN XL Equiv)	F	-
<i>oxybutynin syrup 5MG/5ML</i>	F	-
<i>oxybutynin tab 5MG</i> (DITROPAN Equiv)	F	-
OXYTROL PATCH (OTC) 3.9MG/24HR (<i>oxybutynin</i>)	F	OTC

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<i>solifenacin tab 10MG, 5MG</i> (VESICARE Equiv)	F	-
<i>tolterodine SR cap 2MG, 4MG</i> (DETROL LA Equiv)	F	-
<i>tolterodine tab 1MG, 2MG</i> (DETROL Equiv)	F	-
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS - Drugs to treat miscellaneous bladder spasms		
MYRBETRIQ TAB 25MG, 50MG (<i>mirabegron</i>)	F	-
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS - Drugs to treat urinary retention		
<i>bethanechol tab 10MG, 25MG, 50MG, 5MG</i> (URECHOLINE Equiv)	F	-
VACCINES - Drugs to prevent infection		
BACTERIAL VACCINES - Drugs to prevent infection		
ACTHIB INJ, HIBERIX INJ 10MCG (<i>haemophilus b polysac conj vac</i>)	EXC	VAC
PEDVAXHIB INJ 7.5MCG/0.5ML (<i>haemophilus b polysac conj vac</i>)	EXC	VAC
PNEUMOVAX INJ 25MCG/0.5ML (<i>pneumococcal vac polyvalent</i>)	\$0	VAC
PREVNAR 13 INJ (<i>pneumococcal 13-valent conjugate vaccine</i>)	\$0	PA-QL-VAC QL=1 vaccine/lifetime; Covered for members age 19 years or older, Prior authorization required if member less than 19 years.

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PREVNAR 20 INJ (<i>pneumococcal 20-valent conjugate vaccine</i>)	\$0	QL-VAC QL= 1 vaccine/lifetime; Covered for members age 19 years or older
VAXNEUVANCE INJ (<i>pneumococcal 15-valent conjugate vaccine</i>)	\$0	QL-VAC QL= 1 vaccine/lifetime
VIVOTIF CAP (<i>typhoid vaccine</i>)	EXC	VAC
VIRAL VACCINES - Drugs to prevent infection		
AFLURIA INJ (<i>influenza virus vaccine split preservative free</i>)	\$0	QL-VAC QL= 1 inj/28 days
AFLURIA INJ, FLUZONE INJ (<i>influenza virus vaccine split</i>)	\$0	QL-VAC QL= 1 inj/28 days
COVID-19 VACCINE BIVALENT BOOSTER INJ (MODERNA) 50MCG/0.5ML (<i>covid-19 mrna bivalent virus vaccine (moderna)</i>)	\$0	QL QL= 1 inj/fill
COVID-19 VACCINE BIVALENT BOOSTER INJ (PFIZER) 30MCG/0.3ML (<i>covid-19 mrna bivalent virus vaccine (pfizer)</i>)	\$0	QL QL= 1 inj/fill
COVID-19 VACCINE BIVALENT BOOSTER INJ 5-11Y (PFIZER) 10MCG/0.2ML (<i>covid-19 mrna bivalent virus vaccine (pfizer)</i>)	\$0	QL QL= 1 inj/fill
COVID-19 VACCINE BIVALENT BOOSTER INJ 6M-4Y (PFIZER) 3MCG/0.2ML (<i>covid-19 mrna bivalent virus vaccine (pfizer)</i>)	\$0	QL QL= 1 inj/fill

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COVID-19 VACCINE BIVALENT BOOSTER INJ 6M-5Y (MODERNA) 10MCG/0.2ML (<i>covid-19 mrna bivalent virus vaccine (moderna)</i>)	\$0	QL QL= 1 inj/fill
COVID-19 VACCINE BOOSTER INJ (MODERNA) 50MCG/0.5ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 inj/fill
COVID-19 VACCINE INJ (JANSSEN) .5ML (<i>covid-19 (sars-cov-2) adenovirus vaccine</i>)	\$0	QL QL= 1 dose/45 days
COVID-19 VACCINE INJ (MODERNA) 100MCG/0.5ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/24 days
COVID-19 VACCINE INJ (NOVAVAX) 5MCG/0.5ML (<i>covid-19 (sars-cov-2) subunit (spike) protein virus vaccine</i>)	\$0	QL QL= 1 dose/17 days
COVID-19 VACCINE INJ (PFIZER) 30MCG/0.3ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/17 days
COVID-19 VACCINE INJ 5-11Y (PFIZER) 10MCG/0.2ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/17 days
COVID-19 VACCINE INJ 6-11Y (MODERNA) 50MCG/0.5ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/24 days

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COVID-19 VACCINE INJ 6M-4Y (PFIZER) 3MCG/0.2ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/17 days
COVID-19 VACCINE INJ 6M-5Y (MODERNA) 25MCG/0.25ML (<i>covid-19 (sars-cov-2) mrna virus vaccine</i>)	\$0	QL QL= 1 dose/24 days
DENGVAXIA SUSP (<i>dengue virus vaccine live tetravalent</i>)	EXC	VAC
ENGRIX-B INJ, RECOMBIVAX-HB INJ 10MCG/0.5ML, 10MCG/ML, 20MCG/ML, 5MCG/0.5ML (<i>hepatitis b vaccine (recomb)</i>)	EXC	VAC
FLUAD INJ (<i>influenza virus vaccine types a & b surface antigen adjuvant</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUAD QUAD INJ .5ML (<i>influenza virus vacc types a & b surf antigen adjuvant quad</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUBLOK INJ (<i>influenza virus vaccine recombinant hemagglutinin (ha)</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUBLOK QUAD PF INJ (<i>influenza virus vac recomb hemagglutinin (ha) quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUCELVAX QUAD INJ (<i>influenza virus vaccine tissue-cultured subunit quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLULAVAL QUAD INJ, FLUZONE QUAD INJ (<i>influenza virus vaccine split quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days

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FLUMIST QUADRIVALENT NASAL SUSP (<i>influenza virus vaccine live quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUVIRIN INJ (<i>influenza virus vaccine types a & b surface antigen</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUZONE HD PF INJ (<i>influenza virus vac split high-dose quad preservative free</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUZONE HIGH DOSE PF INJ (<i>influenza virus vaccine split high-dose preservative free</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUZONE QUAD INJ (<i>influenza virus vaccine split quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days
FLUZONE/FLUARIX QUAD INJ (<i>influenza virus vaccine split quadrivalent</i>)	\$0	QL-VAC QL= 1 inj/28 days
IPOLE INJ (<i>poliovirus vaccine, ipv</i>)	EXC	VAC
PREHEVBRIO SUSP 10MCG/ML (<i>hepatitis b vaccine 3-antigen recombinant</i>)	EXC	VAC
PRIORIX INJ (<i>measles, mumps & rubella virus vaccines</i>)	EXC	VAC
ROTARIX SUSP (<i>rotavirus vaccine, live oral</i>)	EXC	VAC
ROTATEQ INJ (<i>rotavirus vaccine, live oral pentavalent</i>)	EXC	VAC
SHINGRIX INJ 50MCG/0.5ML (<i>zoster vaccine recombinant adjuvanted</i>)	EXC	VAC
TICOVAC INJ 1.2MCG/0.25ML, 2.4MCG/0.5ML (<i>tick-borne encephalitis virus vaccine, inactivated</i>)	EXC	VAC

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L.A. Care PASC-SEIU Homecare Workers Formulary

Last Updated 3/1/2023

DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
VAGINAL AND RELATED PRODUCTS - Drugs to treat vaginal infections		
VAGINAL AND RELATED PRODUCTS - VAGINAL CONTRACEPTIVE - PH MODULATORS - Drugs that prevent pregnancy		
PHEXXI GEL .4%-1%-1.8% (<i>lactic acid-citric acid-potassium bitartrate</i>)	\$0	QL QL= 1 box/fill
VAGINAL PRODUCTS - Drugs to treat vaginal infections and low hormones		
SPERMICIDES - Drugs to prevent pregnancy		
CONTRACEPTIVE FILM 28% (<i>nonoxynol-9</i>)	\$0	OTC
CONTRACEPTIVE FOAM 12.5% (<i>nonoxynol-9</i>)	\$0	OTC
CONTRACEPTIVE GEL 2%, 3%, 4% (<i>nonoxynol-9</i>)	\$0	OTC
TODAY SPONGE 1000MG (<i>nonoxynol-9</i>)	\$0	OTC
VAGINAL ANTI-INFECTIVES - Drugs to treat vaginal infections		
<i>clindamycin vaginal cream 2%</i> (CLEOCIN Equiv)	F	-
<i>metronidazole vaginal gel .75%</i> (METROGEL Equiv)	F	-
<i>terconazole cream .4%, .8%</i> (TERAZOL Equiv)	F	-
TERCONAZOLE CREAM 0.8% .8% (<i>terconazole vaginal</i>)	F	-
<i>terconazole supp 80MG</i> (TERAZOL Equiv)	F	-
VAGINAL ESTROGENS - Drugs to treat low hormones		
<i>estradiol cream .1MG/GM</i> (ESTRACE Equiv)	F	-
<i>estradiol vaginal tab, yuvafem vaginal tab 10MCG</i> (VAGIFEM Equiv)	F	QL QL= 8 tabs/28 days, 18 tabs on first fill
ESTRING 2MG (<i>estradiol vaginal</i>)	F	-

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PREMARIN VAGINAL CREAM .625MG/GM (<i>estrogens, conjugated vaginal</i>)	F	-
VAGINAL PROGESTINS - Drugs to treat low hormones		
CRINONE GEL 4%, 8% (<i>progesterone (vaginal)</i>)	F	PA
ENDOMETRIN INSERT 100MG (<i>progesterone (vaginal)</i>)	F	PA
VASOPRESSORS - Drugs to treat heart and circulation conditions		
ANAPHYLAXIS THERAPY AGENTS - Drugs to treat systemic swelling conditions		
<i>epinephrine pen inj 0.15mg, 0.3mg .15MG/0.3ML, .3MG/0.3ML</i> (EPIPEN (JR) Equiv)	F	QL QL= 2 inj/fill
SYMJEPI INJ .15MG/0.3ML, .3MG/0.3ML (<i>epinephrine (anaphylaxis)</i>)	F	QL QL= 2 inj/fill
VIRAL VACCINES - Drugs to prevent infection		
<i>midodrine tab</i> (PROAMATINE Equiv)	F	-
VITAMINS - Drugs to treat vitamin deficiency		
OIL SOLUBLE VITAMINS - Drugs to treat vitamin deficiency		
<i>phytonadione tab 100MCG, 5MG</i> (MEPHYTON Equiv)	F	-
<i>vitamin D cap 1.25MG, 50000UNIT</i>	F	RX strength only
<i>vitamin D cap 1000unit 1000UNIT, 25MCG</i>	\$0	OTC
<i>vitamin D cap 400unit 400UNIT</i>	\$0	OTC
VITAMIN D TAB 400UNIT 400UNIT (<i>ergocalciferol</i>)	\$0	OTC Covered for members 65 years or older
WATER SOLUBLE VITAMINS - Drugs to treat vitamin deficiency		
<i>niacin cap 250MG, 500MG</i>	F	OTC

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L.A. Care PASC-SEIU Homecare Workers Formulary

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DRUG NAME Name of drug	DRUG TIER What the drug will cost you (tier level)	REQUIREMENTS/LIMITS Necessary actions, restrictions, or limits on use
<i>niacin CR tab 250MG, 500MG, 750MG</i> (SLO-NIACIN Equiv)	F	OTC
<i>niacin tab 100MG, 250MG, 500MG, 50MG</i>	F	OTC
NIACIN TR TAB 1000MG (<i>niacin</i>)	F	OTC
<i>niacinamide tab 100MG, 500MG</i>	F	OTC

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ALPHABETICAL LISTING OF DRUGS

A		acyclovir cap	77	albuterol/ipratropium neb	19
abacavir soln	70	acyclovir oint	96	soln	
abacavir tab	70	acyclovir susp	77	alclometasone cream	96
abacavir/lamivudine tab	71	acyclovir tab	77	alclometasone oint	96
abacavir/lamivudine/zidovudine tab	71	ADACEL/BOOSTRIX INJ	155	ALCOHOL SWABS	128
abiraterone tab 250mg	56	adapalene cream	92	ALECENSA CAP	58
acamprosate calcium DR tab	147	adapalene gel	92	alendronate tab	105
acarbose tab	30	adapalene/benzoyl peroxide gel 0.1-2.5%	92	ALENDRONATE TAB 40MG	106
acebutolol cap	80	adapalene/benzoyl peroxide gel 0.3-2.5%	92	ALFERON-N INJ	53
acetaminophen/codeine soln	11	ADBRY INJ	99	alfuzosin SR tab	116
acetaminophen/codeine tab	11	adefovir dipivoxil tab	76	ALINIA SUSP	49
acetazolamide ER cap	103	ADEMPAS TAB	85	allopurinol tab	117
acetazolamide tab	104	ADVAIR DISKUS INHALER	19	ALOCRILOPHTH SOLN	142
acetic acid otic soln	144	ADVAIR HFA INHALER	19	ALOGLIPTIN TAB	33
acetic acid/hydrocortisone otic soln	145	AEROCHAMBER	128	ALOGLIPTIN/PIOGLITAZONE TAB, OSENI TAB	31
acetylcysteine soln	92	AFLURIA INJ	159	ALOGLIPTIN-METFORMIN TAB	31
acitretin cap	95	AFLURIA INJ, FLUZONE INJ	159	ALOGLIPTIN-PIOGLITAZONE TAB	31
ACTEMRA ACTPEN INJ	6	AIMOVIG INJ	129	ALOMIDE OPHTH SOLN	142
ACTEMRA SC INJ	6	AJOVY INJ	128	alprazolam tab	15
ACTHAR GEL INJ	106	AKYNZEO CAP	40	ALUNBRIG TAB 30MG	58
ACTHIB INJ, HIBERIX INJ	158	albuterol HFA inhaler	19	ALUNBRIG TAB 90MG, 180MG	58
ACTIMMUNE INJ	53	albuterol neb soln	19	amantadine cap	66
		albuterol sulfate syrup	19	amantadine syrup	66
		albuterol sulfate tab	19		

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ALPHABETICAL LISTING OF DRUGS

amantadine tab	66	amoxicillin/clavulanate	146	ASMANEX HFA	18
ambrisentan tab	84	susp		INHALER	
amethyst tab	86	amoxicillin/clavulanate tab	147	ASMANEX INHALER	18
amiloride tab	105	500-125mg, 875-125mg		aspirin chew tab 81mg	9
amiloride/hydrochlorothia	104	amphetamine/dextroamphe	1	aspirin ec tab 81mg	9
zide tab		tamine ER cap		ASTAMED MYO CAP	102
aminocaproic acid soln	121	amphetamine/dextroamphe	1	atazanavir cap	71
aminocaproic acid tab	122	tamine tab		atenolol tab	80
amiodarone tab	17	anagrelide cap	118	atenolol/chlorthalidone tab	47
amitriptyline tab	30	anastrozole tab	56	atorvastatin tab	43
amlodipine tab	81	ANDRODERM PATCH	13	atovaquone susp	49
amlodipine/atorvastatin tab	82	ANNOVERA RING	88	atovaquone/proguanil tab	51
amlodipine/benazepril cap	46	ANORO ELLIPTA	20	atropine ophth oint	138
amlodipine/olmesartan tab	46	INHALER		atropine ophth soln	138
amlodipine/valsartan tab	46	apraclonidine ophth soln	138	ATROVENT HFA	17
amlodipine/valsartan/hydro	46	aprepitant cap	40	INHALER	
chlorothiazide tab		aprepitant pak	40	AUBAGIO TAB	149
ammonium lactate lotion	99	APTIVUS CAP	71	AVANDIA TAB	37
amnestem cap, claravis	92	APTIVUS SOLN	71	AVONEX INJ	150
cap, isotretinoin cap,		aripiprazole tab	70	AYVAKIT TAB	57
myorisan cap, zenatane cap		armodafinil tab	3	AZASITE SOLN	139
AMOXAPINE TAB	30	ARMOUR THYROID	154	azathioprine tab	78
amoxicillin cap	146	TAB, NATURE THROID		azelaic acid gel	101
AMOXICILLIN CHEW	146	TAB		azelastine nasal spray 0.1%	136
TAB		ARNUITY ELLIPTA	18	azelastine ophth soln	142
amoxicillin susp	146	INHALER		azithromycin susp	124
amoxicillin tab	146	asenapine maleate SL tab	69	azithromycin tab	124
		ashlyna tab, daysee tab	86		

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ALPHABETICAL LISTING OF DRUGS

BACITRACIN OPTH OINT	139	benzonatate cap 100mg, 200mg	90	bimatoprost ophth soln	99
bacitracin/neomycin/poly myxin b ophth oint	139	benztropine tab	66	bisoprolol tab	80
bacitracin/polymyxin b ophth oint	139	betamethasone augmented cream	96	bisoprolol/hydrochlorothia zide tab	47
bacitracin/polymyxin/neo mycin/hydrocortisone ophth oint	140	betamethasone augmented gel	97	bosentan tab	84
baclofen tab	135	betamethasone augmented lotion	97	BOSULIF TAB	59
BALCOLTRA TAB	86	betamethasone augmented oint	97	BRAFTOVI CAP 75MG	59
balsalazide cap	114	betamethasone dipropionate cream	97	BREO ELLIPTA INHALER	20
BALVERSA TAB 3MG	58	betamethasone dipropionate lotion	97	BREZTRI AEROSPHERE INHALER	20
BALVERSA TAB 4MG	58	betamethasone dipropionate oint	97	BRILINTA TAB	118
BALVERSA TAB 5MG	59	betamethasone valerate cream	97	brimonidine ophth soln 0.15%	138
BAQSIMI NASAL POWDER	32	betamethasone valerate lotion	97	brimonidine ophth soln 0.2%	138
B-D INSULIN SYRINGE U-500	128	bethanechol tab	158	brimonidine tartrate gel	101
B-D PEN AUTOSHIELD DUO PEN NEEDLE	128	bexarotene cap	66	brimonidine/timolol ophth soln	137
benazepril tab	44	bexarotene gel	95	brinzolamide ophth susp	142
benazepril/hydrochlorothia zide tab	47	bicalutamide tab	56	bromfenac ophth soln	142
BENLYSTA	132	BIKTARVY TAB	71	bromocriptine cap	66
AUTO-INJECTOR				bromocriptine tab	66
BENLYSTA INJ	132			BRUKINSA CAP	59
BENZNIDAZOLE TAB	14			budesonide inh susp	19
				budesonide SR cap	89
				bumetanide tab	104
				buprenorphine SL tab	12

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ALPHABETICAL LISTING OF DRUGS

buprenorphine/naloxone sl film	12	calcitriol cap	108	cefdinir susp	86
buprenorphine/naloxone SL tab	12	calcitriol soln	108	cefuroxime tab	85
bupropion ER tab	28	calcium acetate cap	114	celecoxib cap	6
bupropion SR tab	151	CALIBRATION LIQUID	126	CELONTIN CAP	27
bupropion tab	28	CALQUENCE CAP	59	cephalexin cap	85
bupropion XL tab	28	CALQUENCE TAB	59	cephalexin susp	85
buspirone tab	15	CAMZYOS CAP	82	CERDELGA CAP	119
butorphanol nasal spray	12	capecitabine tab	54	CERVICAL CAP	125
BYDUREON BCISE AUTO INJ	34	CAPRELSA TAB	59	cetirizine syrup	42
BYDUREON INJ	34	captopril tab	44	cetirizine tab	42
BYDUREON PEN INJ	34	carbamazepine chew tab	22	cetirizine/pseudoephedrine 12-hour tab	91
BYLVAY CAP 1200MCG	113	carbamazepine ER cap	22	cetrorelix acetate for inj kit	107
BYLVAY CAP 400MCG	113	carbamazepine ER tab	23	CETROTIDE INJ KIT	107
BYLVAY SPRINKLE CAP 200MCG	113	carbamazepine susp	23	cevimeline cap	134
BYLVAY SPRINKLE CAP 600MCG	113	carbamazepine tab	23	CHEMET CAP	38
		carbidopa tab	66	chlordiazepoxide cap	15
		carbidopa/levodopa ER tab	66	CHLORDIAZEPOXIDE/A MITRIPTYLINE TAB	149
		CARBIDOPA/LEVODOPA ODT	66	chlorhexidine gluconate soln	133
		carbidopa/levodopa tab	67	chloroquine tab	51
		carbidopa-levodopa-entacapon tab	68	CHLOROTHIAZIDE TAB	105
		CARETOUCH MIS	128	chlorpromazine tab	70
		carglumic acid tab	108	chlorthalidone tab	105
		carisoprodol tab	135	chlorzoxazone tab 500mg	135
		carvedilol tab	80	CHOLBAM CAP	112
		CAYSTON INH SOLN	50		
		cefdinir cap	85		

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ALPHABETICAL LISTING OF DRUGS

cholestyramine lite powder	42	CITRULLINE PACKET	137	clotrimazole/betamethason e lotion	94
cholestyramine lite powder pack	43	CLARITHROMYC SUSP	125	clozapine tab	69
cholestyramine powder	43	clarithromycin tab	125	CODEINE SULFATE TAB 15MG	9
cholestyramine powder pack	43	CLENPIQ SOLN	123	codeine sulfate tab 15mg, 30mg	9
CIBINQO TAB	99	clindamycin cap	50	CODEINE SULFATE TAB 60MG	9
ciclopirox cream	94	clindamycin gel	93	colchicine tab	117
ciclopirox gel	94	clindamycin lotion	93	colchicine/probenecid tab	117
ciclopirox nail soln	94	clindamycin pad	93	colesevelam pack	43
ciclopirox shampoo	94	clindamycin topical soln	93	colesevelam tab	43
ciclopirox topical susp	94	clindamycin vaginal cream	163	colestipol tab	43
cilostazol tab	118	clobazam susp	22	COLY-MYCIN S OTIC SUSP	144
CIMDUO TAB	71	clobazam tab	22	COMBIVENT RESPIMAT INHALER	20
CIMZIA INJ	114	clobetasol propionate cream	97	COMETRIQ KIT	59
CIMZIA STARTER INJ KIT	114	clobetasol propionate gel	97	COMPLERA TAB	71
cinacalcet tab	108	clobetasol propionate oint	97	CONTRACEPTIVE FILM	163
ciprofloxacin ophth soln	139	CLOMID TAB	106	CONTRACEPTIVE FOAM	163
CIPROFLOXACIN OTIC SOLN	144	CLOMIPHENE TAB	107	CONTRACEPTIVE GEL	163
ciprofloxacin susp	111	clonazepam tab	22	CONTRAVE TAB	2
ciprofloxacin tab	112	clonidine ER tab	2	COPIKTRA CAP	60
ciprofloxacin/dexamethasone otic susp	144	clonidine patch	45	COTELLIC TAB	60
citalopram soln	28	clonidine tab	45	COVID-19 TEST	101
citalopram tab	28	clopidogrel tab 75mg	118		
		clotrimazole troches	133		
		clotrimazole/betamethason e cream	94		

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ALPHABETICAL LISTING OF DRUGS

COVID-19 VACCINE	159	COVID-19 VACCINE INJ	160	cyclosporine modified cap	79
BIVALENT BOOSTER INJ (MODERNA)		6-11Y (MODERNA)		cyclosporine modified soln	79
COVID-19 VACCINE	159	COVID-19 VACCINE INJ	161	cycloheptadine syrup	42
BIVALENT BOOSTER INJ (PFIZER)		6M-4Y (PFIZER)		cycloheptadine tab	42
COVID-19 VACCINE	159	COVID-19 VACCINE INJ	161	CYSTADROPS SOLN	143
BIVALENT BOOSTER INJ 5-11Y (PFIZER)		6M-5Y (MODERNA)		CYSTAGON CAP	116
COVID-19 VACCINE	159	CREATINE PACKET	137	CYSTARAN OPTH	143
BIVALENT BOOSTER INJ 5-11Y (PFIZER)		5000MG		SOLN	
COVID-19 VACCINE	159	CREON CAP	103	CYTRA K CRYSTALS	115
BIVALENT BOOSTER INJ 6M-4Y (PFIZER)		CRINONE GEL	164	CYTRA-3 SYRUP	115
COVID-19 VACCINE	160	CRIVIVAN CAP	71		
BIVALENT BOOSTER INJ 6M-5Y (MODERNA)		cromolyn conc	113	D	
COVID-19 VACCINE	160	cromolyn neb soln	17	dalfampridine ER tab	150
BIVALENT BOOSTER INJ 6M-5Y (MODERNA)		cromolyn ophth soln	142	danazol cap	13
COVID-19 VACCINE	160	cryselle tab	86	dantrolene cap	135
BOOSTER INJ (MODERNA)		CUE COVID-19 INJ TEST	101	dapsone tab	49
COVID-19 VACCINE INJ (JANSSEN)	160	CARTRIDGE		deferasirox granules	39
COVID-19 VACCINE INJ (MODERNA)	160	CUE HEALTH MONITOR	102	packet	
COVID-19 VACCINE INJ (NOVAVAX)	160	cyanocobalamin inj	120	deferasirox tab	39
COVID-19 VACCINE INJ (PFIZER)	160	cyclobenzaprine tab 10mg	135	deferasirox tab 180mg	39
COVID-19 VACCINE INJ 5-11Y (PFIZER)	160	cyclobenzaprine tab 5mg	135	deferasirox tab 90mg, 360mg	39
		CYCLOMYDRIL OPTH SOLN	138	deferiprone tab	39
		cyclopentolate ophth soln	138	DELSTRIGO TAB	71
		cyclophosphamide cap	54	DENG VAXIA SUSP	161
		CYCLOPHOSPHAMIDE TAB	54	DEPLIN CAP	102
		cyclosporine cap	79	DEPO-PROVERA INJ	89
				DESCOVY TAB	71

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ALPHABETICAL LISTING OF DRUGS

desipramine tab	30	DIACOMIT POWDER	23	DIGOXIN SOLN	82
desmopressin acetate inj	109	PACK		digoxin tab	82
desmopressin acetate tab	109	DIALYVITE TAB	134	DILANTIN CAP 30MG	27
desoximetasone cream	97	DIALYVITE/ZINC TAB	134	diltiazem ER cap	81
desoximetasone oint	97	DIAPHRAGM	125	diltiazem tab	81
desvenlafaxine ER tab	29	DIASTAT RECTAL GEL,	22	dimethyl fumarate DR cap	150
DEXAMETHASONE	89	DIAZEPAM RECTAL GEL		dimethyl fumarate DR	150
CONC		diazepam conc	16	starter pack	
dexamethasone elixir	89	diazepam oral soln	16	diphenhydramine cap	41
DEXAMETHASONE	140	5mg/5ml		50mg	
OPHTH SOLN		diazepam tab 2mg, 10mg	16	DIPHENOXYLATE/ATRO	38
dexamethasone sodium	89	diazepam tab 5mg	16	PINE LIQUID	
phosphate inj		diclofenac gel	95	diphenoxylate/atropine tab	38
DEXAMETHASONE	89	diclofenac gel 1%	95	dipyridamole tab	118
SOLN		diclofenac potassium tab	6	disopyramide cap	16
dexamethasone tab	89	diclofenac sodium EC tab	6	disulfiram tab	147
DEXCOM G6 RECEIVER	126	diclofenac sodium ophth	143	DIURIL SUSP	105
DEXCOM G6 SENSOR	126	soln		divalproex ER tab	27
DEXCOM G6	126	diclofenac sodium XR tab	7	divalproex sodium DR tab	27
TRANSMITTER		dicloxacillin cap	147	divalproex sprinkle cap	27
dexmethylphenidate ER	3	dicyclomine cap	156	dofetilide cap	17
cap		dicyclomine soln	156	donepezil ODT	148
dexmethylphenidate tab	3	dicyclomine tab	156	donepezil tab	148
dextroamphetamine ER	1	didanosine DR cap	71	donepezil tab 23mg	148
cap		DIFICID SUSP	125	DOPTELET TAB	120
dextroamphetamine tab	1	DIFICID TAB	125	dorzolamide ophth soln	143
DIACOMIT CAP	23	difluprednate ophth	141	dorzolamide/timolol ophth	137
		emulsion		soln	

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ALPHABETICAL LISTING OF DRUGS

DOVATO TAB	72	efavirenz cap	72	ENBREL MINI INJ	9
doxazosin tab	46	efavirenz tab	72	ENBREL SURECLICK	9
doxepin cap	30	efavirenz/emtricitabine/ten	72	INJ 50MG	
doxepin conc	30	ofovir df tab		ENDARI POWDER PACK	119
doxercalciferol cap	108	efavirenz/lamivudine/tenof	72	ENDOMETRIN INSERT	164
doxycycline hyclate cap	153	ovir df (lo) tab		ENERGIX-B INJ,	161
doxycycline hyclate tab	153	EGRIFTA INJ	107	RECOMBIVAX-HB INJ	
doxycycline monohydrate	153	ELIGEN B12 TAB	102	enoxaparin inj	22
cap 100mg		ELIQUIS TAB, ELIQUIS	22	enpresse tab	86
doxycycline monohydrate	154	STARTER PACK		ENSPRYNG INJ	132
cap 50mg		ELIXOPHYLLIN ELIXIR	21	entacapone tab	66
doxycycline monohydrate	154	ELLA TAB	88	entecavir tab	76
tab		ELMIRON CAP	116	EPIDIOLEX SOLN	23
doxycycline susp	154	EMCYT CAP	56	EPIFOAM AEROSOL	98
D-PENAMINE TAB	78	EMGALITY INJ	129	epinephrine pen inj	164
dronabinol cap	40	EMGALITY INJ	129	0.15mg, 0.3mg	
drospirenone/ethinyl	86	100MG/ML		EPIVIR HBV SOLN	76
estradiol/levomefolate tab		EMPAVELI INJ	117	eplerenone tab	48
DROXIA CAP	119	emtricitabine cap	72	EQUETRO CAP	68
DRYSOL SOLN	100	emtricitabine/tenofovir	72	ERIVEDGE CAP	55
DULERA INHALER	20	disoproxil fumarate tab		ERLEADA TAB	56
duloxetine EC cap	29	EMTRIVA SOLN	72	erlotinib tab	55
DUPIXENT INJ	99	EMVERM TAB	14	ERY PAD	93
DUPIXENT PEN INJ	99	enalapril tab	44	ERYTHROMYCIN EC	125
dutasteride cap	116	enalapril/hydrochlorothiaz	47	CAP	
E		de tab		erythromycin	125
econazole cream	94	ENBREL INJ 25MG	8	ethylsuccinate susp	
EDURANT TAB	72	ENBREL INJ 50MG	8	erythromycin gel	93

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ALPHABETICAL LISTING OF DRUGS

erythromycin ophth oint	139	EVOTAZ TAB	72	FIASP FLEXTOUCH INJ	35
erythromycin pad	93	EVRYSDI SOLN	136	FIASP INJ	35
erythromycin soln	93	exemestane tab	56	FIASP PENFILL INJ	35
escitalopram soln	28	EXKIVITY CAP	55	finasteride tab	99
escitalopram tab	28	EXTAVIA INJ	150	fingolimod hcl cap 0.5mg	150
esomeprazole cap	156	ezetimibe tab	44	FINTEPLA SOLN	23
estazolam tab	122	F		FIRDAPSE TAB	51
estradiol cream	163	FALESSA TAB	102	FIRVANQ SOLN	49
estradiol patch	111	famciclovir tab	77	flecainide tab	16
estradiol tab	111	famotidine susp	156	FLORIVA PLUS DROPS	134
estradiol vaginal tab,	163	famotidine tab	156	FLOVENT DISKUS	19
yuvaferm vaginal tab		FARXIGA TAB	37	INHALER	
estradiol valerate inj	111	FASENRA PEN INJ	17	FLOVENT HFA INHALER	19
estradiol/norethindrone tab	111	febuxostat tab	117	FLUAD INJ	161
ESTRING	163	felbamate susp	25	FLUAD QUAD INJ	161
eszopiclone tab	122	felbamate tab	25	FLUBLOK INJ	161
ethacrynic tab	104	felodipine ER tab	81	FLUBLOK QUAD PF INJ	161
ethambutol tab	52	FEMALE CONDOMS	126	FLUCELVAX QUAD INJ	161
ethosuximide cap	27	fenofibrate cap 67mg,	43	fluconazole susp	41
ethosuximide soln	27	134mg, 200mg		fluconazole tab	41
etodolac cap	7	fenofibrate tab 48mg,	43	flucytosine cap	41
etodolac tab	7	54mg, 145mg, 160mg		fludrocortisone tab	90
ETOPOSIDE CAP	66	fenofibric acid DR cap	43	FLULAVAL QUAD INJ,	161
etravirine tab	72	fenofibril patch	10	FLUZONE QUAD INJ	
EULEXIN CAP	56	ferrex 150 forte cap	121	FLUMIST	162
everolimus tab	60	FERRIPROX SOLN	38	QUADRIVALENT NASAL	
everolimus tab for oral	60	fesoterodine fumarate ER	157	SUSP	
susp		tab			

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ALPHABETICAL LISTING OF DRUGS

fluocinolone acetonide cream	98	FLUTAMIDE CAP	56	FOSRENOL POWDER	114
fluocinolone acetonide oint	98	fluticasone nasal spray	136	PACK	
fluocinolone acetonide soln	98	fluticasone propionate cream	98	FOTIVDA CAP	60
fluocinolone otic oil	145	fluticasone propionate oint	98	FREESTYLE LIBRE 2	126
fluocinonide cream 0.05%	98	FLUTICASONE/SALMET	20	RECEIVER	
fluocinonide cream 0.1%	98	EROL INHALER		FREESTYLE LIBRE 2	126
fluocinonide emollient cream	98	FLUVIRIN INJ	162	SENSOR	
fluocinonide gel	98	fluvoxamine ER cap	29	FREESTYLE LIBRE 3	126
fluocinonide oint	98	fluvoxamine tab	29	SENSOR	
fluocinonide soln	98	FLUZONE HD PF INJ	162	FREESTYLE LIBRE	126
FLUORIDEX	133	FLUZONE HIGH DOSE	162	RECEIVER	
SENSITIVITY PASTE		PF INJ		FREESTYLE LIBRE	126
fluorometholone ophth soln	141	FLUZONE QUAD INJ	162	SENSOR (10-DAY)	
fluorouracil cream	95	FLUZONE/FLUARIX	162	FREESTYLE LIBRE	126
FLUOROURACIL SOLN	95	QUAD INJ		SENSOR (14-DAY)	
fluoxetine cap	28	FOLBEE PLUS CZ TAB	134	FULPHILA INJ	120
fluoxetine soln	28	folbee tab	121	FUROSCIX KIT	104
fluoxetine tab 60mg	29	folic acid tab 1mg	120	FUROSEMIDE SOLN	104
fluphenazine tab	70	folic acid tab 400mcg	120	furosemide tab	104
FLURAZEPAM CAP	122	folic acid tab 800mcg	120	FUZEON INJ	72
FLURBIPROFEN OPTH SOLN	143	fondaparinux inj	22	G	
FLURBIPROFEN TAB	7	FORTEO INJ	106	gabapentin cap	23
		fosamprenavir tab	72	gabapentin soln	23
		fosinopril tab	45	gabapentin tab 600mg	23
		fosinopril/hydrochlorothiazide tab	47	gabapentin tab 800mg	24
				galantamine ER cap	148
				galantamine tab	148
				GALZIN CAP	131

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ALPHABETICAL LISTING OF DRUGS

GAVRETO CAP	60	GOLYTELY SOLN	123	HUMIRA INJ 80MG	5
gemfibrozil tab	43	granisetron tab	39	HUMIRA INJ	5
GENOTROPIN INJ	107	griseofulvin micro tab	41	CROHNS/UC/HIDRADEN	
GENTAK OPHTH OINT	139	griseofulvin susp	41	ITIS STARTER PACK	
gentamicin ophth soln	139	griseofulvin tab	41	HUMIRA INJ PEDIATRIC	5
gentamicin sulfate cream	93	guaifenesin/codeine soln	91	CROHNS STARTER PACK	
gentamicin sulfate oint	93	guaifenesin/codeine syrup	91	HUMIRA INJ PEDIATRIC	5
GENVOYA TAB	72	guanfacine ER tab	2	UC STARTER PACK	
gianvi tab, ocella tab	86	guanfacine IR tab	46	HUMIRA INJ	5
GILENYA CAP 0.25MG	150	GVOKE INJ	33	PSORIASIS/UVEITIS	
GILOTRIF TAB	55	GVOKE INJ KIT	33	STARTER PACK	
glatiramer inj	150	GVOKE PFS INJ	33	HUMIRA PEN INJ 40MG	5
GLEOSTINE/LOMUSTIN	54			HUMULIN R INJ U-500	35
E CAP		H		HUMULIN R U-500	35
glimepiride tab	37	halobetasol propionate	98	KWIKPEN INJ	
glipizide ER tab	37	cream		HYCAMTIN CAP	53
glipizide tab	37	halobetasol propionate	98	hydralazine tab	48
glipizide/metformin tab	31	ointment		hydrochlorothiazide cap	105
GLUCAGEN HYPOKIT	32	haloperidol lactate conc	69	hydrochlorothiazide tab	105
INJ		haloperidol tab	69	hydrocodone/acetaminoph	12
glucagon (rdna) for inj kit	32	hc pramoxine cream 1-1%	14	en soln	
GLUCAGON EMR INJ	32	HEMLIBRA INJ	117	hydrocodone/acetaminoph	12
GLUCAGON INJ KIT	33	HEXALEN CAP	52	en tab	
glyburide micronized tab	37	HIZENTRA INJ	145	hydrocodone/homatropine	91
glyburide tab	38	HOMATROPINE OPHTH	138	syrup	
glyburide/metformin tab	31	SOLN		hydrocortisone cream	98
glycopyrrolate tab	156	HUMIRA INJ 10MG	5	hydrocortisone enema	14
GLYGEST PAK	102	HUMIRA INJ 20MG	5	hydrocortisone lotion	98
		HUMIRA INJ 40MG	5		

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hydrocortisone oint	98	imatinib tab	61	INSULIN ASPART MIX	35
hydrocortisone tab	89	IMBRUVICA CAP 140MG	61	INJ	
hydromorphone tab 2mg	10	IMBRUVICA CAP 70MG	61	INSULIN ASPART	35
hydromorphone tab 4mg	10	IMBRUVICA SUSP	61	PENFILL INJ	
hydromorphone tab 8mg	10	IMBRUVICA TAB	61	INTELENCE TAB	72
hydroquinone cream	100	420MG, 560MG		INTRON-A INJ	53
hydroxychloroquine tab	51	IMCIVREE INJ	2	INVIRASE CAP	72
hydroxyprogesterone inj	147	imipramine tab	30	INVIRASE TAB	73
hydroxyurea cap	53	imiquimod cream	100	IOPIDINE OPTH SOLN	138
hydroxyzine pamoate cap	15	IMPAVIDO CAP	48	1%	
hydroxyzine syrup	15	INCRELEX INJ	108	IPOL INJ	162
hydroxyzine tab	15	INCRUSE ELLIPTA	17	ipratropium nasal spray	136
hyoscyamine sulfate CR	156	INHALER		ipratropium neb soln	17
tab		indapamide tab	105	irbesartan tab	45
hyoscyamine sulfate elixir	156	indomethacin cap	7	irbesartan/hydrochlorothia	47
hyoscyamine sulfate ODT	156	indomethacin CR cap	7	zide tab	
hyoscyamine sulfate SL tab	156	INFANT FORMULA	103	IRESSA TAB	55
hyoscyamine tab	156	LIQUID		ISENTRESS (HD) TAB	73
HYQVIA INJ	145	INFANT FORMULA	103	ISENTRESS CHEW TAB	73
I		POWDER		ISENTRESS POWDER	73
ibandronate tab 150mg	106	INGREZZA CAP	149	PACK	
IBRANCE CAP	60	INLYTA TAB	54	isibloom tab, enskyce tab,	86
IBRANCE TAB	60	INQOVI TAB	58	apri tab	
ibuprofen susp (Rx ONLY)	7	INSULIN ASPART	35	ISONIAZID SYRUP	52
ibuprofen tab	7	FLEXPEN INJ		isoniazid tab	52
ICLUSIG TAB	60	INSULIN ASPART INJ	35	ISOPTO CARBACHOL	138
IDHIFA TAB	60	INSULIN ASPART MIX	35	OPHTH SOLN	
ILEVRO OPTH SUSP	143	FLEXPEN INJ		isosorbide dinitrate SL tab	14

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isosorbide dinitrate tab	14	ketorolac inj 15mg/ml	7	lamivudine tab	73
isosorbide mononitrate ER tab	15	ketorolac inj 30mg/ml	7	lamivudine tab 100mg	76
ISOSORBIDE	15	ketorolac inj 60mg/2ml	7	lamivudine/zidovudine tab	73
MONONITRATE TAB		ketorolac ophth soln	143	lamotrigine chew tab	24
itraconazole cap	41	ketorolac tab	7	lamotrigine tab	24
ivermectin tab	14	KETOSTIX	102	LAMPIT TAB	49
J		ketotifen ophth soln	143	LANCET KIT	127
JAKAFI TAB	61	KEVZARA INJ	6	LANCETS	127
JANUMET TAB	31	KINERET INJ	6	lansoprazole cap	156
JANUMET XR TAB	31	KINRIX INJ,	155	lanthanum carbonate chew tab	115
JANUVIA TAB	33	QUADRACEL DTAP-IPV INJ		lapatinib ditosylate tab	61
JARDIANCE TAB	37	KINRIX PREF SYRINGE,	155	latanoprost ophth soln	144
jinteli tab	111	QUADRACEL PREF SYRINGE		layolis FE tab, wymzya FE tab	86
JULUCA TAB	73	KLOXXADO NASAL SPRAY	39	LEDIPASVIR/SOFOSBUV IR TAB	76
JYNARQUE PAK	110	KORLYM TAB	33	leflunomide tab	8
JYNARQUE TAB	110	KOSELUGO CAP	61	lenalidomide cap	131
K		KOSELUGO CAP 10MG	61	LENVIMA CAP	54
KALYDECO PAK	152	KRINTAFEL TAB	51	letrozole tab	56
KALYDECO TAB	152				
kelnor tab	86	L		leucovorin tab	53
KESIMPTA INJ	150	labetalol tab	80	LEUKERAN TAB	52
ketoconazole cream	94	lacosamide oral solution	24	levetiracetam ER tab	24
ketoconazole shampoo	94	lacosamide tab	24	levetiracetam soln	24
ketoconazole tab	41	LACTIC ACID LOTION	99	levetiracetam tab	24
KETO-DIASTIX TEST STRIP	102	lactulose soln	114	LEVOBUNOLOL OPHTH SOLN	137
		lamivudine soln	73		

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levocarnitine soln	108	LIVTENCITY TAB	76	loxapine cap	69
levocarnitine tab	108	L-METHYLFOLATE TAB	102	LUMAKRAS TAB	62
levofloxacin ophth soln	139	LO LOESTRIN TAB	87	LUMIGAN OPHTH SOLN	144
levofloxacin soln	112	LOKELMA PAK	132	LUPKYNIS CAP	132
levofloxacin tab	112	LONSURF TAB	58	lurasidone hcl tab	68
levonorgestrel tab	88	lopinavir/ritonavir soln	73	LUVIRA CAP	102
levothyroxine tab	154	lopinavir/ritonavir tab	73	LYNPARZA CAP	62
LEXIVA SUSP	73	loratadine chew tab	42	LYNPARZA TAB	62
lidocaine cream 3%	100	loratadine ODT	42	LYSODREN TAB	56
lidocaine gel	100	loratadine syrup	42	M	
lidocaine oint	100	loratadine tab	42	malathion lotion	101
lidocaine patch 5%	100	loratadine/pseudoephedrin	91	MALE CONDOMS	126
lidocaine soln	100	e 12-hour tab		MAPROTILINE TAB	28
lidocaine viscous soln	133	loratadine/pseudoephedrin	91	maraviroc tab	73
lidocaine/hydrocortisone	14	e 24-hour tab		MARPLAN TAB	28
cream		lorazepam conc	16	MATULANE CAP	53
lidocaine/prilocaine cream	100	lorazepam tab	16	MAVYRET PAK	77
linezolid susp	50	LORBRENA TAB 100MG	61	MAVYRET TAB	77
linezolid tab	50	LORBRENA TAB 25MG	62	MAXIDEX OPHTH SOLN	141
liothyronine tab	154	losartan tab	45	MAYZENT TAB	150
LIQUIGEN	137	losartan/hydrochlorothiazide	47	MAYZENT TAB STARTER	150
lisinopril tab	45	de tab		PACK	
lisinopril/hydrochlorothiazide	47	LOTEMAX OPHTH GEL	141	MCT OIL	137
tab		LOTEMAX OPHTH OINT	141	meclizine chew tab	40
lithium carbonate cap	68	loteprednol etabonate	141	meclizine tab	40
lithium carbonate ER tab	68	ophth gel		medroxyprogesterone tab	147
lithium carbonate tab	68	loteprednol ophth susp	141	mefloquine tab	51
LIVMARLI SOLN	113	lovastatin tab	43	megestrol susp	56

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megestrol tab	57	methotrexate inj	54	metronidazole gel	101
MEKINIST TAB 0.5MG	62	methotrexate tab	53	metronidazole gel 0.75%	101
MEKINIST TAB 2MG	62	methoxsalen cap	95	metronidazole lotion	101
MEKTOVI TAB	62	METHYLDOPA TAB	46	metronidazole tab	48
meloxicam tab	7	METHYLDOPA/HYDROC	47	metronidazole vaginal gel	163
melphalan tab	54	HLOROTHIAZIDE TAB		mexiletine hcl cap	16
memantine ER cap	148	methylergonovine tab	145	midazolam inj	122
memantine soln	148	methylphenidate CD cap	3	midodrine tab	164
memantine tab	148	methylphenidate ER cap	3	mifepristone tab	110
mercaptopurine tab	53	METHYLPHENIDATE ER	3	MIFIPREX TAB	110
mesalamine enema	114	TAB		miglustat cap	119
mesalamine ER cap	114	methylphenidate ER tab	3	minocycline cap	154
mesalamine supp	114	10mg, 20mg		minoxidil tab	48
MESNEX TAB	53	methylphenidate soln	4	mirtazapine ODT	27
METANX CAP	102	methylphenidate tab	4	mirtazapine tab	28
METAPROTERENOL	20	methylprednisolone dose	89	MIRVASO GEL	101
SYRUP		pack		misoprostol tab	157
metformin ER tab	32	methylprednisolone tab	89	modafinil tab	4
metformin tab	32	methylprenisolone sod	90	MOLNUPIRAVIR CAP	78
methadone conc	10	succinate inj		mometasone cream	98
methadone soln 10mg/5ml	10	metoclopramide soln	113	mometasone oint	98
methadone soln 5mg/5ml	10	metoclopramide tab	113	mometasone soln	98
methadone tab	10	metolazone tab	105	montelukast chew tab	18
methadone tablet 10mg	10	metoprolol ER tab	80	montelukast granule pack	18
methazolamide tab	104	metoprolol tab	80	montelukast tab	18
methenamine hippurate tab	51	metoprolol/hydrochlorothi	47	morphine sulfate ER tab	10
methimazole tab	154	azide tab		MORPHINE SULFATE	10
methocarbamol tab	135	metronidazole cream	101	SOLN	

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ALPHABETICAL LISTING OF DRUGS

morphine sulfate tab	11	naloxone hcl nasal spray	39	NEOMYCIN/POLYMYXI	141
MOUNJARO INJ	34	naloxone inj	39	N/HYDROCORTISONE	
moxifloxacin ophth soln	139	NALOXONE PREFILLED	39	OPHTH SOLN	
moxifloxacin tab	112	INJ		NEPHRON FA TAB	121
MULTAQ TAB	17	naltrexone tab	38	NERLYNX TAB	62
MULTIGEN FOLIC TAB	121	naproxen EC tab	7	NEVANAC OPHTH SUSP	143
MULTIGEN PLUS TAB	121	naproxen tab	7	nevirapine ER tab	73
MULTIGEN TAB	121	NATACYN OPHTH SUSP	139	NEVIRAPINE SUSP	73
MULTIVITAMIN/FLOURI	134	NATAZIA TAB	87	nevirapine tab	74
DE CHEW 0.25MG		nateglinide tab	37	NEXPLANON IMPLANT	88
MULTIVITAMIN/FLOURI	134	NATPARA INJ	106	NEXTSTELLIS TAB	87
DE CHEW 1MG		nebivolol hcl tab	80	niacin cap	164
MULTIVITAMIN/FLUORI	135	NEBUSAL NEB SOLN	92	niacin CR tab	165
DE CHEW TAB		NEFAZODONE TAB	29	niacin ER tab	44
multivitamin/minerals tab	134	nefazodone tab 50mg,	29	niacin tab	165
mupirocin oint	93	250mg		NIACIN TR TAB	165
mycophenolate DR tab	79	neomycin tab	4	niacinamide tab	165
mycophenolate mofetil	79	NEOMYCIN/POLYMIXIN	140	nicotine gum	151
cap		/GRAMICIDIN OPHTH		NICOTINE KIT	151
mycophenolate mofetil	79	SOLN		nicotine lozenge	151
susp		neomycin/polymixin/hydro	144	nicotine patch	151
mycophenolate mofetil tab	79	coritisone otic soln		NICOTROL INHALER	151
MYFEMBREE TAB	111	neomycin/polymixin/hydro	145	NICOTROL NASAL	151
MYLERAN TAB	54	coritisone otic susp		SPRAY	
MYRBETRIQ TAB	158	neomycin/polymyxin/dexa	141	nifedipine cap	81
N		methasone ophth oint		nifedipine ER tab	81
nabumetone tab	7	neomycin/polymyxin/dexa	141	nilutamide tab	57
nadolol tab	80	methasone ophth soln		NINLARO CAP	62

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ALPHABETICAL LISTING OF DRUGS

nitazoxanide tab	49	NORVIR SOLN	74	nystatin oint	94
nitrofurantoin	51	NOVOLIN 70/30	36	nystatin powder	41
macrocrystals cap		FLEXPEN INJ		nystatin susp	133
nitrofurantoin	51	NOVOLIN 70/30 INJ	36	nystatin tab	41
monohydrate cap		NOVOLIN N FLEXPEN	36	nystatin topical powder	94
nitroglycerin patch	15	INJ		nystatin/triamcinolone	94
nitroglycerin SL tab	15	NOVOLIN N INJ	36	cream	
NIVESTYM INJ	120	NOVOLIN R FLEXPEN	36	nystatin/triamcinolone oint	94
nizoral a-d shampoo	94	INJ		O	
norethindrone ace-ethinyl	87	NOVOLIN R INJ	36	OALIVA TAB	112
estradiol-fe cap		NOVOLOG FLEXPEN	36	octreotide inj	110
norethindrone	87	INJ		OCTREOTIDE INJ	110
acetate/ethinyl estradiol FE		NOVOLOG INJ	36	100MCG	
chew tab		NOVOLOG MIX	36	ODEFSEY TAB	74
norethindrone	87	FLEXPEN INJ		ODOMZO CAP	56
acetate/ethinyl estradiol		NOVOLOG MIX INJ	36	OFEV CAP	153
tab		NOVOLOG PENFILL INJ	36	ofloxacin ophth soln	140
norethindrone tab	89	np thyroid tab	155	ofloxacin tab	112
norethindrone/ethinyl	87	NUBEQA TAB	57	olanzapine ODT	69
estradiol FE tab		NUCALA INJ	17	olanzapine tab	69
nortrel 7/7/7 tab, pirmella	87	NUEDEXTA CAP	151	olanzapine/fluoxetine cap	149
7/7/7 tab		NULYTELY SOLN	124	OLLIZAC POWDER	102
nortrel tab	87	NUTRITIONAL	103	olmesartan tab	45
nortriptyline cap	30	SUPPLEMENT LIQUID		olmesartan/hydrochlorothi	48
nortriptyline oral soln	30	NUTRITIONAL	103	azide tab	
NORTRIPTYLINE SOLN	30	SUPPLEMENT POWDER		olopatadine ophth soln	143
NORVIR CAP	74	NUVARING	88	0.1%	
NORVIR POWDER PACK	74	nystatin cream	94		

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ALPHABETICAL LISTING OF DRUGS

olopatadine ophth soln 0.2%	143	ONGENTYS CAP	67	oxybutynin ER tab	157
OLUMIANT TAB	4	OPSUMIT TAB	84	oxybutynin syrup	157
omega-3-acid ethyl esters cap	42	ORACIT SOLN	115	oxybutynin tab	157
omeprazole DR cap	156	ORENCIA CLICK INJ	8	oxycodone soln	11
omeprazole tab	157	ORENCIA SC INJ	8	oxycodone tab	11
OMNIPOD 5 INTRO KIT	127	125MG/ML		oxycodone/acetaminophen tab	12
OMNIPOD 5 PACK PODS	127	ORENCIA SC INJ	8	OXYCODONE/ASPIRIN TAB	12
OMNIPOD DASH INTRO KIT	127	50MG/0.4ML		OXYTROL PATCH (OTC)	157
OMNIPOD DASH PODS	127	ORENCIA SC INJ	8	OZEMPIC INJ	33
OMNIPOD STARTER KIT	127	87.5MG/0.7ML			
ondansetron ODT	40	ORGOVYX TAB	57	P	
ondansetron soln	40	ORIAHNN CAP	111	paliperidone ER tab	68
ONDANSETRON TAB	40	ORILISSA TAB 150MG	107	PALYNZIQ INJ	109
ONETOUCH METER	127	ORILISSA TAB 200MG	107	pantoprazole EC tab	156
ONETOUCH TEST STRIP	102	ORKAMBI GRANULES	152	paricalcitol cap	109
ONETOUCH VERIO	127	PACKET		paroxetine ER tab	29
FLEX METER		ORKAMBI TAB	152	paroxetine tab	29
ONETOUCH VERIO IQ	127	oseltamivir cap	78	PAXLOVID TAB	76
METER		oseltamivir cap 30mg	78	PEAK FLOW METER	128
ONETOUCH VERIO	127	oseltamivir susp	78	PEDIARIX INJ	155
METER		OTEZLA STARTER PACK	8	pediatric multiple	135
ONETOUCH VERIO	127	OTEZLA TAB	8	vitamins/fluoride chew tab	
REFLECT METER		OVIDREL INJ	107	pediatric multiple	135
ONETOUCH VERIO TEST STRIP	102	oxandrolone tab	12	vitamins/fluoride soln	
		OXBRYTA TAB FOR	119	pediatric multiple	134
		ORAL SUSP		vitamins/fluoride/iron soln	
		oxcarbazepine susp	24	PEDVAXHIB INJ	158
		oxcarbazepine tab	24		

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ALPHABETICAL LISTING OF DRUGS

peg 3350/electrolytes soln	124	PHEXXI GEL	163	POMALYST CAP	57
PEGASYS INJ	77	phlexy-10 tab	137	potassium bicarbonate	130
PEG-INTRON INJ	77	PHOSLYRA SOLN	115	effer tab	
PEMAZYRE TAB	63	phospha 250 neutral tab	130	potassium chloride ER cap	130
penicillamine tab	131	phytonadione tab	164	potassium chloride ER tab	131
penicillin vk tab	146	PIFELTRO TAB	74	potassium chloride micro	131
PENTACEL INJ	155	pilocarpine ophth soln	138	tab	
pentamidine neb soln	48	pilocarpine tab	134	potassium chloride powder	131
pentoxifylline ER tab	118	PIMOZIDE TAB	151	packet	
permethrin cream	101	pindolol tab	80	potassium chloride soln	131
perphenazine tab	70	pioglitazone tab	37	potassium citrate CR tab	115
PERPHENAZINE/	149	PIQRAY TAB	63	potassium citrate/citric	115
AMITRIPTYLINE TAB		pirfenidone cap	153	acid powder pack	
PHEBURANE ORAL	109	pirfenidone tab 267mg	153	potassium citrate/citric	115
PELLETS		pirfenidone tab 801mg	153	acid soln	
phenazopyridine tab	116	piroxicam cap	8	potassium phosphate	130
PHENELZINE SULFATE	28	PLAN B TAB	88	monobasic tab	
TAB		PLEGRIDY INJ	150	pramipexole tab	67
phenelzine tab	28	PLEGRIDY PEN INJ	150	prasugrel tab	118
phenobarbital elixir	122	PNEUMOVAX INJ	158	pravastatin tab	43
phenobarbital tab	122	PODIAPN CAP	103	praziquantel tab	14
phenoxybenzamine cap	45	ODOCON SOLN	100	prazosin cap	46
phentermine cap	1	podofilox soln	100	PRED MILD OPHTH	141
phentermine tab	1	POLYETHYLENE	147	SOLN	
phenylephrine ophth soln	138	GLYCOL 8000		PRED-G OPHTH SOLN	141
phenytoin cap	27	GRANULES		PREDNICARBATE	98
phenytoin chew tab	27	polymyxin b/trimethoprim	140	CREAM	
phenytoin susp	27	ophth soln		PREDNICARBATE OIN	98

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ALPHABETICAL LISTING OF DRUGS

prednisolone ODT	90	PREZCOBIX TAB	74	propranolol oral soln	80
PREDNISOLONE ODT	90	PREZISTA SUSP	74	20mg/5ml	
TAB		PREZISTA TAB	74	PROPRANOLOL SOLN	80
PREDNISOLONE OPHTH	141	PRIFTIN TAB	52	propranolol tab	81
SUSP		primaquine tab	51	PROPRANOLOL/HYDRO	48
PREDNISOLONE	142	primidone tab	25	CHLOROTHIAZIDE TAB	
SODIUM PHOSPHATE		PRIORIX INJ	162	propylthiouracil tab	154
OPHTH SOLN		probenecid tab	117	pro-stat liquid	137
prednisolone soln	90	prochlorperazine supp	70	PULMOZYME INH SOLN	152
PREDNISONE SOLN	90	prochlorperazine tab	70	pyrazinamide tab	52
prednisone tab	90	proctosol HC cream	14	pyridostigmine CR tab	52
pregabalin cap	24	progesterone cap	147	pyridostigmine tab	52
pregabalin cap 225mg	24	PROLENSA OPHTH	143	pyrimethamine tab	51
pregabalin cap 300mg	24	SOLN		PYRUKYND TAB	119
pregabalin soln	25	PROMACTA TAB	120	PYRUKYND TAPER	119
PREHEVBRIO SUSP	162	promethazine supp	42	PACK	
PREMARIN TAB	111	promethazine syrup	42	Q	
PREMARIN VAGINAL	164	promethazine tab	42	QINLOCK TAB	63
CREAM		promethazine VC syrup	91	QSYMIA CAP	2
PREMPHASE TAB,	111	promethazine VC/codeine	91	quetiapine tab	69
PREMPRO TAB		syrup		quetiapine XR tab	69
PRENATAL VITAMINS	135	promethazine/codeine	91	quinapril tab	45
(PRENATAL PLUS,		syrup		quinapril/hydrochlorothiaz	48
PREPLUS, PRENAPLUS)		PROMETHEGAN SUPP	42	ide tab	
PRETOMANID TAB	52	propafenone ER cap	16	quinidine gluconate CR tab	16
PREVNAR 13 INJ	158	propafenone tab	17	quinidine sulfate tab	16
PREVNAR 20 INJ	159	proparacaine ophth soln	140		
PREVYMIS TAB	76	propranolol ER cap	80	R	

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rabeprazole EC tab	157	RHOFADE CREAM	101	RUKOBIA ER TAB	74
RADICAVA ORS	136	ribavirin cap	77	RYBELSUS TAB	34
STARTER KIT		ribavirin tab	77	RYDAPT CAP	63
RADICAVA ORS SUSP	136	RIDAURA CAP	6	S	
raloxifene tab	108	rifabutin cap	52	salsalate tab	9
ramelteon tab	123	RIFAMATE CAP	52	SANDIMMUNE SOLN	79
ramipril cap	45	rifampin cap	52	100MG/ML	
ranolazine tab	14	riluzole tab	136	SANTYL OINT	99
rasagiline tab	67	RIMANTADINE TAB	78	sapropterin	109
REBETOL SOLN	77	RINVOQ ER TAB	4	dihydrochloride powder	
REGRANEX GEL	101	risedronate tab	106	packet	
RELENZA DISKHALER	78	risperidone ODT	68	sapropterin	109
renaphro cap	134	risperidone soln	69	dihydrochloride soluble	
RENOVA CREAM	93	risperidone tab	69	tab	
repaglinide tab	37	ritonavir tab	74	SAVELLA PAK	149
REPATHA INJ	44	rivastigmine cap	148	SAVELLA TAB	149
REPATHA PUSHTRONEX	44	rivastigmine patch	149	SAXENDA INJ	2
INJ		rizatriptan ODT	129	scopolamine patch	40
RESCRIPTOR TAB	74	rizatriptan tab	129	selegiline cap	67
RESTASIS OPHTH	140	ropinirole ER tab	67	selegiline tab	67
EMULSION		ropinirole tab	67	selenium sulfide shampoo	96
RETACRIT INJ	120	rosuvastatin tab	44	SELZENTRY SOLN	74
RETEVMO CAP	63	ROTARIX SUSP	162	SELZENTRY TAB	74
REVLIMID CAP	131	ROTATEQ INJ	162	SEMGLEE INJ, INSULIN	37
REYATAZ POWDER	74	ROZLYTREK CAP	63	GLARGINE-YFGN INJ	
PACK		RUBRACA TAB	63	SEMGLEE PEN, INSULIN	37
REYVOW TAB	129	rufinamide susp	25	GLARGINE-YFGN PEN	
REZUROCK TAB	131	rufinamide tab	25		

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SEREVENT DISKUS	21	SKYTROFA INJ	107	sodium	93
INHALER		SLYND TAB	89	sulfacetamide/sulfur wash	
sertraline conc	29	smz/tmp (DS) tab	49	9-4.5%	
sertraline tab	29	smz/tmp susp	49	SOFOBUBVIR/VELPATAS	77
sevelamer powder pak	115	sodium chloride 0.9% irr	116	VIR TAB	
sevelamer tab	115	soln		solifenacin tab	158
SHINGRIX INJ	162	sodium chloride neb soln	92	SOLU-CORTEF INJ	90
SIGNIFOR INJ	110	sodium citrate/citric acid	115	SOLU-CORTEF INJ	90
sildenafil susp	84	soln		100MG	
sildenafil tab	82	sodium fluoride chew tab	130	SOLU-MEDROL INJ	90
sildenafil tab 20mg	84	sodium fluoride cream	133	2GM	
silver sulfadiazine cream	96	sodium fluoride gel	133	SOMAVERT INJ	107
SIMBRINZA OPTH	139	sodium fluoride paste	133	sorafenib tosylate tab	63
SUSP		sodium fluoride rinse	133	sotalol AF tab	81
SIMPONI	6	sodium fluoride soln	130	sotalol tab	81
AUTO-INJECTOR 100MG		SODIUM FLUORIDE TAB	130	SPINOSAD SUSP	101
SIMPONI INJ 100MG	6	sodium fluoride/potassium	133	SPIRIVA RESPIMAT	18
simvastatin tab	44	nitrate paste		INHALER 1.25MCG/ACT	
sirolimus soln	132	SODIUM OXYBATE	148	spironolactone tab	105
sirolimus tab	79	SOLN		spironolactone/hydrochlor	104
SIVEXTRO TAB	50	sodium polystyrene	79	othiazide tab	
SKYRIZI INJ 150MG/ML	95	powder		sprintec 28 tab	87
SKYRIZI INJ 180	114	sodium polystyrene susp	79	SPRYCEL TAB	63
MG/1.2ML		sodium	93	SPS SUSP	132
SKYRIZI INJ	114	sulfacetamide/sulfur		stavudine cap	75
360MG/2.4ML		emulsion 10-5%		STELARA INJ	96
SKYRIZI INJ	96			STIMATE NASAL SOLN	109
75MG/0.83ML				STIVARGA TAB	63

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STRENSIQ INJ	109	SYNJARDY XR TAB	32	TECHLITE INSULIN	128
STRIBILD TAB	75	5-1000MG,		SYRINGE	
sucralfate susp	157	12.5-1000MG		TECHLITE PEN NEEDLE	128
sucralfate tab	156			TEGSEDI INJ	152
sulfacetamide sodium	140	T		telmisartan tab	45
ophth soln		TABLOID TAB	53	temazepam cap 15mg	122
sulfacetamide	142	TABRECTA TAB	63	temazepam cap 30mg	123
sodium/prednisolone		tacrolimus cap	79	temozolomide cap	54
ophth soln		tacrolimus oint	100	tenofovir disoproxil	75
SULFAMYLLON CREAM	96	tadalafil tab	82	fumarate tab 300mg	
sulfasalazine EC tab	114	tadalafil tab (PAH)	84	TEPMETKO TAB	64
sulfasalazine tab	114	tadalafil tab 2.5mg, 5mg	83	terazosin cap	46
sulindac tab	8	TAFINLAR CAP	64	terbinafine tab	41
SUMATRIPTAN INJ	129	TAGRISSO TAB	55	terbutaline sulfate tab	21
SUMATRIPTAN INJ	129	TAKHZYRO INJ	118	terconazole cream	163
6MG/0.5ML		TAKHZYRO INJ	118	TERCONAZOLE CREAM	163
sumatriptan tab	130	150MG/ML		0.8%	
sunitinib malate cap	63	TALTZ INJ	96	terconazole supp	163
SUNOSI TAB	3	TALZENNA CAP 0.25MG	64	testosterone cypionate inj	13
SYMBICORT INHALER	21	TALZENNA CAP 0.5MG,	64	TESTOSTERONE	13
SYMDEKO TAB	153	0.75MG, 1MG		ENANTHATE INJ	
SYMJEPI INJ	164	tamoxifen tab	57	200MG/ML	
SYMPROIC TAB	114	tamsulosin cap	116	TESTOSTERONE GEL 1%	13
SYMTUZA TAB	75	TASIGNA CAP	64	25MG	
SYNAREL NASAL SOLN	108	TAVALISSE TAB	118	testosterone gel 1% 50mg	13
SYNJARDY TAB	31	TAVNEOS CAP	117	testosterone gel 1% pump	13
SYNJARDY XR TAB	31	tazarotene cream 0.1%	96	TESTOSTERONE GEL	13
10-1000MG, 25-1000MG		TAZVERIK TAB	64	PUMP	

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ALPHABETICAL LISTING OF DRUGS

testosterone gel pump 1.62%	13	TODAY SPONGE	163	triamterene/hydrochloroth iazide cap	104
testosterone soln	13	TOLAZAMIDE TAB	38	triamterene/hydrochloroth iazide tab	104
tetrabenazine tab	149	TOLBUTAMIDE TAB	38	triazolam tab	123
THALOMID CAP	78	tolterodine SR cap	158	tricitrates soln	116
theophylline ER tab	21	tolterodine tab	158	tricon cap	121
theophylline soln	21	topiramate sprinkle cap	25	trifluoperazine tab	70
thioridazine tab	70	topiramate tab	25	TRIFLURIDINE OPHTH SOLN	140
thiothixene cap	70	toremifene tab	57	trihexyphenidyl elixir	67
THYROLAR TAB	155	torsemide tab	105	TRIHEXYPHENIDYL	67
tiagabine tab	26	TRACLEER TAB 32MG	84	SOLN	
TIBSOVO TAB	64	tramadol tab	11	trihexyphenidyl tab	66
TICOVAC INJ	162	tranexamic acid tab	122	TRIKAFTA TAB	153
timolol maleate ophth gel	137	tranylcypramine tab	28	tri-legest tab	87
timolol maleate ophth soln	137	trazodone tab	29	TRI-LUMA CREAM	100
timolol maleate tab	81	TRELEGY ELLIPTA INHALER	21	trilyte soln	124
tinidazole tab	48	TREMFYA INJ	96	trimethobenzamide cap	40
tiopronin tab	116	tretinoin cap	53	trimethoprim tab	48
TIVICAY PD TAB	75	tretinoin cream	93	tri-sprintec tab	87
TIVICAY TAB	75	tretinoin gel	93	TRIUMEQ PD TAB	75
tizanidine tab	135	triamcinolone cream	99	TRIUMEQ TAB	75
TOBI PODHALER	4	triamcinolone in orabase paste	133	TRIZIVIR TAB	75
TOBRADEX OPHTH OINT	142	triamcinolone lotion	99	tropicamide ophth soln	138
tobramycin neb soln	4	triamcinolone oint	99	TRUEPLUS INSULIN SYRINGE	128
tobramycin ophth soln	140	triamcinolone OTC nasal spray	136		
tobramycin/dexamethason e ophth soln	142				

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NC =Not Covered		generic =small letters		BRANDS =CAPITAL LETTERS	
EXC	Plan Exclusion	INF	Infertility	KMSP	Kroger Mandatory Specialty Pharmacy Program
LD	Limited Distribution	LMSP	Lumicera Mandatory Specialty Pharmacy Program	MSP	Mandatory Specialty Pharmacy Program
OTC	Over-the-Counter	PA	Prior Authorization	QL	Quantity Limit
RDX	Restricted to Diagnosis	RS	Restricted to Specialist	SF	Limited to two 15 day fills per month for first 3 months
SMKG	Smoking Cessation	ST	Step Therapy	VAC	Vaccine Program

ALPHABETICAL LISTING OF DRUGS

TRUEPLUS PEN	128	valacyclovir tab	78	verapamil SR cap	81
NEEDLE		VALCHLOR GEL	95	VERAPAMIL SR CAP	81
TRULANCE TAB	112	valganciclovir soln	76	360mg	
TRULICITY INJ	34	valganciclovir tab	76	verapamil tab	82
TUKYSA TAB	54	valproic acid cap	27	VERZENIO TAB	64
TURALIO CAP	64	valproic acid syrup	27	V-GO INJ KIT	127
TWIRLA PATCH	88	valsartan tab	45	VICTOZA INJ	34
TYBLUME TAB	88	valsartan/hydrochlorothiazide tab	48	VIDEX SOLN	75
TYMLOS INJ	106	vancomycin cap	49	vienva tab, lessina tab,	88
TYVASO DPI POWDER	83	VANIQA CREAM	100	kurvelo tab	
TYVASO DPI POWDER	83	VARENICLINE PAK	152	vigabatrin powder pack	26
MAINTENANCE KIT		VARENICLINE TAB	152	vigabatrin tab	26
32-48MCG		varenicline tartrate tab	152	vigadrone powder pack	26
TYVASO DPI POWDER	83	VARUBI TAB	41	viorele tab, kariva tab	88
TITRATION KIT		VAXNEUVANCE INJ	159	VIRACEPT TAB	75
16-32-48MCG		VELIVET PAK	88	VIREAD TAB 150MG,	75
TYVASO DPI POWDER	83	velivet tab	88	200MG, 250MG	
TITRATION KIT		VEMLIDY TAB	77	vitamin D cap	164
16-32MCG		VENCLEXTA STARTER	55	vitamin D cap 1000unit	164
TYVASO INH SOLN	83	PACK		vitamin D cap 400unit	164
U		VENCLEXTA TAB	55	VITAMIN D TAB	164
UBRELVY TAB	129	VENELEX OINT	101	400UNIT	
UPNEEQ SOLN	144	venlafaxine ER cap	30	VITRAKVI CAP 100MG	64
UPTRAVI TAB	84	venlafaxine tab	30	VITRAKVI CAP 25MG	65
ursodiol cap	112	VENTAVIS INH SOLN	83	VITRAKVI SOLN	65
ursodiol tab	112	VENTOLIN HFA	21	VIVOTIF CAP	159
V		INHALER		VIZIMPRO TAB	55
				VONJO CAP	65

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ALPHABETICAL LISTING OF DRUGS

voriconazole tab	41	XCOPRI PAK	25	Z	
VOSEVI TAB	77	150-200MG		zafemy patch	88
VOTRIENT TAB	65	XCOPRI PAK 50-200MG	25	zaleplon cap	123
VOXZOGO INJ	109	XCOPRI TAB 150MG,	26	ZARXIO INJ	120
VYNDAMAX CAP	85	200MG		ZEGALOGUE INJ	33
VYNDAQEL CAP	85	XCOPRI TAB 50MG,	26	ZEGERID CAP OTC	157
VYVANSE CAP	1	100MG		ZEJULA CAP	65
VYVANSE CHEW TAB	1	XCOPRI TITRATION PAK	26	ZELBORAF TAB	65
W		12.5-25MG		ZEPOSIA CAP	151
WAKIX TAB	3	XCOPRI TITRATION PAK	26	ZEPOSIA STARTER PACK	151
warfarin tab	21	150-200MG		zidovudine cap	76
WEGOVY INJ	2	XCOPRI TITRATION PAK	26	zidovudine syrup	76
WEGOVY INJ	2	50-100MG		zidovudine tab	76
1.7MG/0.75ML		XELJANZ SOLN	4	ZIEXTENZO INJ	120
WEGOVY INJ	2	XELJANZ TAB	5	ZIMHI SOLN	39
2.4MG/0.75ML		XELJANZ XR TAB	5	zinc sulfate cap	131
WELIREG TAB	57	XEMBIFY INJ	146	ziprasidone cap	68
X		XENLETA TAB	50	ZIRGAN OPHTH GEL	140
XALKORI CAP	65	XIFAXAN TAB 550MG	49	ZOKINVY CAP	132
XAQUIL XR TAB	103	XIGDUO XR TAB	32	ZOLINZA CAP	53
XARELTO STARTER	22	2.5-1000MG, 5-1000MG		zolmitriptan tab	130
PACK		XIGDUO XR TAB	32	zolpidem ER tab	123
XARELTO SUSP	22	5-500MG, 10-500MG,		zolpidem tab	122
XARELTO TAB	22	10-1000MG		zonisamide cap	25
XCOPRI PAK	25	XOSPATA TAB	65	ZTALMY SUSP	25
100-150MG		XPOVIO PAK	58	ZYDELIG TAB	65
		XTAMPZA ER CAP	11	ZYKADIA CAP	65
		XYZBAC TAB	103	ZYKADIA TAB	66

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SMKG	Smoking Cessation	ST	Step Therapy	VAC	Vaccine Program

ALPHABETICAL LISTING OF DRUGS

ZYLET OPHTH SUSP 142

You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

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L.A. CARE HOME INFUSION DRUG LIST

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Search Tip:

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

NC =Not Covered

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BRANDS =CAPITAL LETTERS

Coverage of medications, including those not otherwise identified by qualifiers such as QL/PA/ST, may be subject to safety screenings and other clinical edits in the course of claims transaction processing.

** Products listed may not be all inclusive and are subject to change.

***Products are limited to the L.A. Care Home Infusion Network Pharmacies.

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Drug Name	Special Code	Tier	Category
ABECMA INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ABELCET INJ	-	F	ANTIFUNGALS
ABRAXANE INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ACTEMRA INJ	PA	F	ANALGESICS - ANTI-INFLAMMATORY
ACTHAR HP GEL INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
acyclovir sodium IV soln	-	F	ANTIVIRALS
ADAKVEO INJ	PA	F	HEMATOPOIETIC AGENTS
ADCETRIS INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
adriamycin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ADUHELM INJ	-	EXC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ADVATE INJ, KOVALTRY INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ADYNOVATE INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
AFSTYLA KIT	-	NC	HEMATOLOGICAL AGENTS - MISC.
A-HYDROCORT INJ, SOLU-CORTEF INJ	-	F	CORTICOSTEROIDS
AKYNZEO INJ	-	NC	ANTIEMETICS
ALBUMINAR INJ	-	F	HEMATOLOGICAL AGENTS - MISC.
ALDURAZYME INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
ALIMTA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ALIQOPA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
allopurinol inj	-	F	GOUT AGENTS
ALOXI IV SOLN	-	F	ANTIEMETICS
ALPHANATE INJ, HUMATE-P INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ALPHANATE/VWF COMPLEX/HUMAN INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
ALPHANINE SD INJ, MONONINE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ALPROLIX INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
amikacin inj	-	F	AMINOGLYCOSIDES
aminophylline inj	-	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
AMINOSYN II INJ	-	F	NUTRIENTS
AMINOSYN-RF INJ	-	F	NUTRIENTS
amiodarone inj	-	F	ANTIARRHYTHMICS

Symbols and abbreviations are defined on page 1.

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Drug Name	Special Code	Tier	Category
AMONDYS 45 INJ	-	EXC	NEUROMUSCULAR AGENTS
AMPHOTERICIN INJ	-	F	ANTIFUNGALS
ampicillin inj	-	F	PENICILLINS
ampicillin/sulbactam inj	-	F	PENICILLINS
AMVUTTRA SOLN (QL=1 syringe/90 days)	PA-QL	F	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
APRETUDE SUSP (QL=7 inj/year)	QL	F	ANTIVIRALS
ARALAST NP INJ	PA	F	RESPIRATORY AGENTS - MISC.
argatroban inj	-	F	ANTICOAGULANTS
ARRANON INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
arsenic trioxide inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ARZERRA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ASPARLAS INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ATGAM INJ	-	F	MISCELLANEOUS THERAPEUTIC CLASSES
ATROPINE SULFATE INJ	-	F	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
ATROPINE SULFATE INJ	-	NC	ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS
atropine sulfate iv soln	-	F	ULCER DRUGS
AVASTIN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AVSOLA INJ	PA	F	GASTROINTESTINAL AGENTS - MISC.
AVYCAZ INJ	-	F	CEPHALOSPORINS
azacitidine inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
AZATHIOPRINE INJ	-	F	MISCELLANEOUS THERAPEUTIC CLASSES
AZEDRA INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
azithromycin inj	-	F	MACROLIDES
aztreonam inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
BACTOCILL/DEXTROSE INJ	-	F	PENICILLINS

Symbols and abbreviations are defined on page 1.

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Drug Name	Special Code	Tier	Category
BALEODAQ INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BAVENCIO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BAXDELA INJ	-	F	FLUOROQUINOLONES
bendamustine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BENDEKA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BENEFIX INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
BENLYSTA IV SOLN	PA	F	ASSORTED CLASSES
benztropine inj	-	F	ANTIPARKINSON AGENTS
BEOVU INJ (QL= Starting Dose: 1 vial/28 days for first 3 fills; Maintenance Dose: 1 vial/56 days)	PA-QL	F	OPHTHALMIC AGENTS
BERINERT INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
BESPONSA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BICILLIN C-R INJ	-	F	PENICILLINS
BLENREP INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
bleomycin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BLINCYTO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BONIVA INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
bortezomib inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BORTEZOMIB INJ	PA--	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BOTOX COSMETIC INJ	-	EXC	DERMATOLOGICALS
BOTOX INJ	PA	F	NEUROMUSCULAR AGENTS
BREYANZI INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BRINEURA KIT (QL=4 kits/28 days)	PA-QL	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
busulfan inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
BUTORPHANOL INJ	-	F	ANALGESICS - OPIOID
BYOOVIZ INJ	PA	F	OPHTHALMIC AGENTS

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Drug Name	Special Code	Tier	Category
CABENUVA SUSP (QL=1 kit/month)	QL	F	ANTIVIRALS
CALCIUM GLUCONATE INJ	-	F	MINERALS & ELECTROLYTES
CAMPATH INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CANCIDAS INJ	-	F	ANTIFUNGALS
CAPASTAT INJ	-	F	ANTIMYCOBACTERIAL AGENTS
carboplatin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CARDENE INJ	-	F	CALCIUM CHANNEL BLOCKERS
CARIMUNE NANOFILTERED INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
carmustine inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CARMUSTINE INJ	PA--	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CARVYKTI INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
caspofungin acetate iv soln	-	F	ANTIFUNGALS
CATHFLO ACTIVASE INJ	-	F	HEMATOLOGICAL AGENTS - MISC.
CEFAZOLIN INJ	-	F	CEPHALOSPORINS
CEFAZOLIN/DEXTROSE SOLN	-	F	CEPHALOSPORINS
CEFEPIME INJ	-	F	CEPHALOSPORINS
CEFEPIME IV SOLN	-	F	CEPHALOSPORINS
cefotaxime inj	-	F	CEPHALOSPORINS
CEFOTETAN INJ	-	F	CEPHALOSPORINS
CEFOXITIN INJ	-	F	CEPHALOSPORINS
CEFTAZIDIME INJ	-	F	CEPHALOSPORINS
ceftriaxone inj	-	F	CEPHALOSPORINS
CEFTRIAZONE/DEXTROSE INJ	-	F	CEPHALOSPORINS
cefuroxime inj	-	F	CEPHALOSPORINS
CEREZYME INJ	PA	F	HEMATOPOIETIC AGENTS
CHLORAMPHENICOL INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
chlorothiazide inj (DIURIL IV INJ equiv)	-	F	DIURETICS
CHROMIUM CHLORIDE INJ	-	F	MINERALS & ELECTROLYTES
cidofovir inj	-	F	ANTIVIRALS
cilastatin/imipenem inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
CIMERLI INJ	PA	F	OPHTHALMIC AGENTS
CINQAIR INJ	PA	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
CINRYZE INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.

Symbols and abbreviations are defined on page 1.

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Drug Name	Special Code	Tier	Category
CINVANTI INJ	-	F	ANTIEMETICS
ciprofloxacin inj	-	F	FLUOROQUINOLONES
cisplatin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
cladribine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CLAFORAN INJ	-	F	CEPHALOSPORINS
CLEOCIN INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
clindamycin inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
CLINIMIX E INJ	-	F	NUTRIENTS
CLINIMIX INJ	-	F	NUTRIENTS
clofarabine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
COAGADEX INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
colistimethate inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
colistimethate inj	-	NC	ANTI-INFECTIVE AGENTS - MISC.
CORIFACT KIT	-	NC	HEMATOLOGICAL AGENTS - MISC.
COSELA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
CRYSVITA INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
CUPRIC CHLORIDE INJ	-	F	MINERALS & ELECTROLYTES
cyclophosphamide inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
cyclosporine inj	-	F	ASSORTED CLASSES
CYRAMZA INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
cytarabine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
D5W/LYTES INJ	-	F	MINERALS & ELECTROLYTES
dacarbazine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dactinomycin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DALVANCE INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
DANYELZA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
daptomycin inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
DAPTOMYCIN IV SOLN	-	F	ANTI-INFECTIVE AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
DARZALEX SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
DARZALEX SOLN FASPRO	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
daunorubicin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
decitabine inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
deferoxamine mesylate inj	-	F	ANTIDOTES
DEPO-MEDROL INJ	-	F	CORTICOSTEROIDS
DEPO-PROVERA SC INJ	-	F	CONTRACEPTIVES
DEXAMETHASONE INJ	-	F	CORTICOSTEROIDS
dexamethasone sodium phosphate inj	-	F	CORTICOSTEROIDS
dexrazoxane inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dextrose 5% in lactated ringers	-	F	MINERALS & ELECTROLYTES
dextrose inj	-	F	NUTRIENTS
dextrose w/ nacl inj	-	F	MINERALS & ELECTROLYTES
DEXTROSE W/NACL INJ	-	F	MINERALS & ELECTROLYTES
DEXTROSE/SODIUM CHLORIDE INJ	-	F	MINERALS & ELECTROLYTES
diazepam inj	-	F	ANTI-ANXIETY AGENTS
DILAUDID PF INJ	-	F	ANALGESICS - OPIOID
diltiazem inj	-	F	CALCIUM CHANNEL BLOCKERS
diphenhydramine inj	-	F	ANTI-HISTAMINES
DOBUTAMINE/D5W INJ	-	F	CARDIOTONICS
DOCETAXEL INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
docetaxel IV soln	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
dopamine inj	-	F	CARDIOTONICS
doxercalciferol inj (HECTOROL INJ equiv)	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
doxorubicin hcl inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
doxycycline hyclate inj	-	F	TETRACYCLINES
DUROLANE	PA	F	MUSCULOSKELETAL THERAPY AGENTS
DYSPORT	PA	F	NEUROMUSCULAR AGENTS
ELAPRASE INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.

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Drug Name	Special Code	Tier	Category
ELELYSO INJ	PA	F	HEMATOPOIETIC AGENTS
ELITEK INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ELOCTATE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ELZONRIS SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EMEND INJ	-	F	ANTIEMETICS
ENHERTU INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ENTYVIO INJ	PA	F	GASTROINTESTINAL AGENTS - MISC.
epinephrine inj	-	F	VASOPRESSORS
EPINEPHRINE INJ	-	NC	VASOPRESSORS
EPINEPHRINE IV SOLN	-	F	VASOPRESSORS
epirubicin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
epoprostenol inj	PA	F	CARDIOVASCULAR AGENTS - MISC.
ERAXIS INJ	-	F	ANTIFUNGALS
ERBITUX INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ertapenem inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
ERWINAZE INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ERYTHROCIN INJ	-	NC	MACROLIDES
erythromycin inj	-	F	MACROLIDES
esomeprazole inj (NEXIUM IV equiv)	-	F	ULCER DRUGS/ANTISPASMODICS/ANTICHO LINERGICS
ESPEROCT INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
ETOPOPHOS INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
etoposide inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
EUFLEXXA	-	NC	MUSCULOSKELETAL THERAPY AGENTS
EVENITY INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
EVKEEZA INJ	PA	F	ANTIHYPERTENSIVES
EXONDYS 51 SOLN	-	EXC	NEUROMUSCULAR AGENTS
FABRAZYME INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.

Symbols and abbreviations are defined on page 1.

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Drug Name	Special Code	Tier	Category
FAMOTIDINE INJ	-	F	ULCER DRUGS
famotidine inj (PEPCID equiv)	-	F	ULCER DRUGS
FASENRA INJ	PA	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
FEIBA INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
FERAHEME INJ	-	NC	HEMATOPOIETIC AGENTS
ferric gluconate IV soln	-	F	HEMATOPOIETIC AGENTS
FERRLECIT INJ	-	NC	HEMATOPOIETIC AGENTS
ferumoxytol inj	-	F	HEMATOPOIETIC AGENTS
FIBRYGA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
FIRMAGON INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FIRMAGON INJ 120MG (QL=2 vials/fill)	PA-QL	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FIRMAGON INJ 80MG (QL=1 vial/28 days)	PA-QL	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
FLEBOGAMMA INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
FLOLAN INJ, VELETRI INJ	-	NC	CARDIOVASCULAR AGENTS - MISC.
fluconazole/nacl inj	-	F	ANTIFUNGALS
fludarabine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
fluorouracil inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
folic acid inj	-	F	HEMATOPOIETIC AGENTS
fomepizole inj	-	F	ANTIDOTES
FORTAZ INJ	-	F	CEPHALOSPORINS
fosaprepitant dimeglumine soln	-	F	ANTIEMETICS
foscarnet sodium inj	-	F	ANTIVIRALS
FOSCAVIR INJ	-	NC	ANTIVIRALS
fosphenytoin inj	-	F	ANTICONSULSANTS
fulvestrant inj (Restricted to Oncology or Hematology Specialist)	RS	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
furosemide inj	-	F	DIURETICS
FYARRO SUSP	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GAMASTAN INJ	-	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
GAMIFANT INJ	-	NC	MISCELLANEOUS THERAPEUTIC CLASSES

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Drug Name	Special Code	Tier	Category
GAMMAGARD INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
GAMMAGARD SD INJ	PA	F	PASSIVE IMMUNIZING AGENTS
GAMMAPLEX INJ	PA	F	PASSIVE IMMUNIZING AGENTS
GANCICLOVIR INJ	-	F	ANTIVIRALS
GAZYVA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
GEL-ONE	-	NC	MUSCULOSKELETAL THERAPY AGENTS
GELSYN-3	-	NC	MUSCULOSKELETAL THERAPY AGENTS
gemcitabine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
gentamicin inj	-	F	AMINOGLYCOSIDES
gentamicin/ nacl inj	-	F	AMINOGLYCOSIDES
GENTAMICIN/NACL INJ	-	F	AMINOGLYCOSIDES
GENVISC 850	-	NC	MUSCULOSKELETAL THERAPY AGENTS
GIVLAARI INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
GLASSIA INJ	PA	F	RESPIRATORY AGENTS - MISC.
GLYRX-PF SOLN	-	F	ULCER DRUGS/ANTISPASMODICS/ANTICHO LINERGICS
granisetron HCl inj (KYTRIL INJ equiv)	-	F	ANTIEMETICS
HAEGARDA INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
HALAVEN INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HECTOROL INJ	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
HEMOFIL M INJ, KOATE-DVI INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
HEPAGAM B INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
HEPARIN LOCK FLUSH IV SOLN	-	F	ANTICOAGULANTS
heparin lock flush soln	-	F	ANTICOAGULANTS
heparin sodium inj	-	F	ANTICOAGULANTS
HEPARIN SODIUM/D5W INJ	-	F	ANTICOAGULANTS
heparin sodium/nacl inj	-	F	ANTICOAGULANTS
HERCEPTIN HYLECTA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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HERCEPTIN INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HERZUMA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
HUMATE-P INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
HYALGAN	-	NC	MUSCULOSKELETAL THERAPY AGENTS
hydralazine inj	-	F	ANTIHYPERTENSIVES
hydromorphone inj	-	F	ANALGESICS - OPIOID
hydroxyprogesterone capro inj	-	NC	PROGESTINS
HYMOVIS	-	NC	MUSCULOSKELETAL THERAPY AGENTS
HYPERHEP B INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
ibandronate sodium inj (BONIVA equiv)	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
idarubicin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IDELVION SOLN	-	NC	HEMATOLOGICAL AGENTS - MISC.
IFEX INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ifosfamide inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ILARIS INJ	PA	F	ANALGESICS - ANTI-INFLAMMATORY
ILUMYA SOLN	-	NC	DERMATOLOGICALS
ILUVIEN IMPLANT (QL=2 inj/36 months)	QL	F	OPHTHALMIC AGENTS
IMFINZI INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMJUDO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IMLYGIC INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INFED INJ	-	F	HEMATOPOIETIC AGENTS
INFLECTRA INJ 100MG	-	NC	GASTROINTESTINAL AGENTS - MISC.
INFLIXIMAB INJ	PA	F	GASTROINTESTINAL AGENTS - MISC.
INFUGEM SOLN	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
INFUVITE INJ	-	F	MULTIVITAMINS
INJECTAFER INJ	-	F	HEMATOPOIETIC AGENTS
INTRALIPID INJ	-	F	NUTRIENTS

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INVEGA HAFYERA INJ	-	F	ANTIPSYCHOTICS/ANTIMANIC AGENTS
IONOSOL-MB INJ D5W	-	F	MINERALS & ELECTROLYTES
IRINOTECAN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ISOLYTE-P/ D5W INJ	-	F	MINERALS & ELECTROLYTES
ISOLYTE-S INJ	-	F	MINERALS & ELECTROLYTES
ISTODAX (OVERFILL) INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IXEMPRA KIT INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
IXINITY INJ, RIXUBIS INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
JELMYTO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JEMPERLI SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JEUVEAU INJ	-	EXC	DERMATOLOGICALS
JEVTANA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
JIVI INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
KADCYLA IV SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KALBITOR INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
KANJINTI INJ (Restricted to Oncology or Hematology Specialist)	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KANUMA INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
KCENTRA KIT	-	NC	HEMATOLOGICAL AGENTS - MISC.
kcl/ d5w inj	-	F	MINERALS & ELECTROLYTES
kcl/ d5w/ nacl inj	-	F	MINERALS & ELECTROLYTES
kcl/ nacl inj	-	F	MINERALS & ELECTROLYTES
KCL/D5W/LR INJ	-	F	MINERALS & ELECTROLYTES
KCL/DEXTROSE/NACL INJ	-	F	MINERALS & ELECTROLYTES
KCL/NACL INJ	-	NC	MINERALS & ELECTROLYTES
KEPIVANCE INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KEYTRUDA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KEYTRUDA IV SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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KHAPZORY SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KIMMTRAK SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KOGENATE FS INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
KORSUVA INJ	PA	F	MISCELLANEOUS THERAPEUTIC CLASSES
KRYSTEXXA INJ	PA	F	GOUT AGENTS
KYMRIAH SUSP	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
KYPROLIS SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
labetalol inj	-	F	BETA BLOCKERS
lacosamide iv inj	-	F	ANTICONVULSANTS
LACTATED RINGERS INJ	-	F	MINERALS & ELECTROLYTES
LARTRUVO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LEMTRADA INJ	PA	F	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
LEUCOVORIN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
levetiracetam inj	-	F	ANTICONVULSANTS
levofloxacin inj	-	F	FLUOROQUINOLONES
levofloxacin/d5w inj	-	F	FLUOROQUINOLONES
LEVOLEUCOVORIN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
levothyroxine inj	-	F	THYROID AGENTS
LIBTAYO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
lidocaine inj	-	F	LOCAL ANESTHETICS-PARENTERAL
lincomycin inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
linezolid IV soln	-	F	ANTI-INFECTIVE AGENTS - MISC.
liothyronine inj (TRIOSTAT equiv)	-	F	THYROID AGENTS
lipodox inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LIPOSYN	-	F	NUTRIENTS
lorazepam inj	-	F	ANTI-ANXIETY AGENTS
LUMOXITI INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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Drug Name	Special Code	Tier	Category
LUPRON DEPO-PED INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
LUPRON DEPOT INJ 22.5MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ 30MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ 45MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ 7.5MG	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT INJ/ELIGARD INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUPRON DEPOT PEDIATRIC INJ/LUPRON DEPOT INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
LUTATHERA SOLN	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
LUXTURNA SUSP (QL=1 kit per eye, per lifetime)	PA-QL	F	OPHTHALMIC AGENTS
magnesium sulfate inj	-	F	MINERALS & ELECTROLYTES
magnesium sulfate/d5w inj	-	F	MINERALS & ELECTROLYTES
MANGANESE SULFATE INJ	-	F	MINERALS & ELECTROLYTES
mannitol inj	-	F	DIURETICS
MARGENZA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MARQIBO INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
medroxyprogesterone inj	-	F	CONTRACEPTIVES
melphalan inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
meropenem inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
mesna inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
methylprednisolone acetate inj (DEPO-MEDROL INJ equiv)	-	F	CORTICOSTEROIDS
methylprednisolone inj (SOLU-MEDROL INJ equiv)	-	F	CORTICOSTEROIDS
METHYLPREDNISOLONE POWDER	-	F	CORTICOSTEROIDS
metoclopramide inj	-	F	GASTROINTESTINAL AGENTS - MISC.
metoprolol inj	-	F	BETA BLOCKERS
METOPROLOL TARTRATE CARTRIDGE	-	F	BETA BLOCKERS
metronidazole/ nacl inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
miconazole inj	-	F	ANTIFUNGALS

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Drug Name	Special Code	Tier	Category
milrinone inj	-	F	CARDIOTONICS
MINOCIN INJ	-	F	TETRACYCLINES
MIRCERA INJ	-	NC	HEMATOPOIETIC AGENTS
mitomycin inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
mitoxantron inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MONJUVI INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MONOFERRIC INJ	-	F	HEMATOPOIETIC AGENTS
MONOVISC	-	NC	MUSCULOSKELETAL THERAPY AGENTS
MORPHINE SULFATE 10MG/ML PF INJ	-	F	ANALGESICS - OPIOID
morphine sulfate inj	-	F	ANALGESICS - OPIOID
MOXIFLOXACIN INJ	-	F	FLUOROQUINOLONES
MOZOBIL INJ	-	F	HEMATOPOIETIC AGENTS
MVASI INJ (Restricted to Oncology, Ophthalmology or Hematology Specialist)	RS	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
mycophenolate inj	-	F	MISCELLANEOUS THERAPEUTIC CLASSES
MYLOTARG INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
MYOZYME/LUMIZYME INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
nafcillin inj	-	F	PENICILLINS
NAFCILLIN SODIUM IN DEXTROSE INJ	-	F	PENICILLINS
NAGLAZYME INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
nelarabine iv soln	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NEXTERONE INJ/AMIODARONE INJ	-	F	ANTIARRHYTHMICS
NEXVIAZYME INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
nicardipine inj	-	F	CALCIUM CHANNEL BLOCKERS
NIPENT INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
NITROGLYCERIN IV SOLN	-	F	ANTIANGINAL AGENTS
NORMOSOL- R/D5W INJ	-	F	MINERALS & ELECTROLYTES
NORMOSOL-M/D5W INJ	-	F	MINERALS & ELECTROLYTES
NORMOSOL-R INJ	-	F	MINERALS & ELECTROLYTES

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NOVOEIGHT INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
NOVOSEVEN RT INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
NPLATE INJ	PA	F	HEMATOPOIETIC AGENTS
NUCALA INJ	PA	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
NULIBRY INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
NULOJIX INJ	-	F	ASSORTED CLASSES
NUWIQ INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
OBIZUR INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
OCREVUS INJ	PA	F	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
OCTAGAM INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
OGIVRI INJ (Restricted to Oncology or Hematology Specialist)	RS	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ONCASPAR INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ondansetron (ZOFTRAN) inj	-	NC	ANTIEMETICS
ondansetron inj	-	F	ANTIEMETICS
ONIVYDE INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ONPATTRO SOLN	PA	F	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ONTRUZANT INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OPDIVO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
OPDUALAG SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ORENCIA INJ	PA	F	ANALGESICS - ANTI-INFLAMMATORY
ORTHOVISC	-	NC	MUSCULOSKELETAL THERAPY AGENTS
ORTHOVISC INJ	-	NC	MUSCULOSKELETAL THERAPY AGENTS
OSMITROL INJ	-	F	DIURETICS
oxacillin inj	-	F	PENICILLINS
oxaliplatin inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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OXLUMO INJ	PA	F	GENITOURINARY AGENTS - MISCELLANEOUS
OZURDEX IMPLANT (QL=2 inj/180 days)	QL	F	OPHTHALMIC AGENTS
paclitaxel inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PADCEV INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
palonosetron inj	-	F	ANTIEMETICS
palonosetron inj (Restricted to Oncology or Hematology specialist)	--RS	F	ANTIEMETICS
pamidronate inj	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
PAMIDRONATE INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
pantoprazole inj (PROTONIX INJ equiv)	-	F	ULCER DRUGS/ANTISPASMODICS/ANTICHO LINERGICS
PANZYGA INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
paricalcitol inj	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
PARSABIV INJ	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
pemetrexed disodium for iv soln	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PENICILLIN G PROCAINE INJ	-	F	PENICILLINS
PENICILLIN G SODIUM INJ	-	F	PENICILLINS
penicillin gk inj	-	F	PENICILLINS
PENICILLIN GK/DEXTROSE INJ	-	F	PENICILLINS
pentamidine inj	-	NC	ANTI-INFECTIVE AGENTS - MISC.
PEPAXTO INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PERJETA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PFIZERPEN-G INJ	-	F	PENICILLINS
PHENYTOIN INJ	-	F	ANTICONVULSANTS
PHOTOFRIN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
piperacillin/tazobactam inj	-	F	PENICILLINS
PLASMA-LYTE INJ	-	F	MINERALS & ELECTROLYTES

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PLASMA-LYTE-A INJ	-	F	MINERALS & ELECTROLYTES
PLUVICTO INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
POLIVY INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
polymyxin b inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
PORTRAZZA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
POTASSIUM CHLORIDE INJ	-	F	MINERALS & ELECTROLYTES
POTASSIUM CHLORIDE INJ	-	NC	MINERALS & ELECTROLYTES
POTASSIUM CHLORIDE/NACL INJ	-	F	MINERALS & ELECTROLYTES
POTASSIUM PHOSPHATE INJ	-	F	MINERALS & ELECTROLYTES
POTELIGEO INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
premasol inj	-	F	NUTRIENTS
PRIMAXIN INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
PRIVIGEN INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
PROCAINAMIDE INJ	-	F	ANTIARRHYTHMICS
prochlorperazine inj	-	F	ANTIPSYCHOTICS/ANTIMANIC AGENTS
PROFILNINE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
progesterone IM inj	-	F	PROGESTINS
PROGRAF INJ	-	F	MISCELLANEOUS THERAPEUTIC CLASSES
PROLASTIN-C INJ	-	NC	RESPIRATORY AGENTS - MISC.
PROLASTIN-C INJ, ZEMAIRA INJ	-	NC	RESPIRATORY AGENTS - MISC.
PROLEUKIN INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
PROLIA SOLN	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
propranolol inj	-	F	BETA BLOCKERS
PROVENGE INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
QUADRAMET INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RADICAVA INJ	-	NC	NEUROMUSCULAR AGENTS
REBINYN SOL	-	NC	HEMATOLOGICAL AGENTS - MISC.
REBLOZYL INJ	-	NC	HEMATOPOIETIC AGENTS

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RECLAST INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
RECOMBINATE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
REMICADE INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
REMODULIN INJ	-	NC	CARDIOVASCULAR AGENTS - MISC.
RENFLEXIS INJ	-	NC	GASTROINTESTINAL AGENTS - MISC.
RETISERT IMPLANT	-	NC	OPHTHALMIC AGENTS
REVCovi INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
RIABNI SOLN	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
rifampin inj	-	F	ANTIMYCOBACTERIAL AGENTS
ringers inj	-	F	MINERALS & ELECTROLYTES
RITUXAN HYCELA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RITUXAN INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
romidepsin for iv inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ROMIDEPSIN INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RUCONEST INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
RUXIENCE INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RYBREVANT SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RYLAZE INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
RYPLAZIM SOLN	PA	F	HEMATOLOGICAL AGENTS - MISC.
SANDOSTATIN LAR DEPOT KIT (QL=1 kit every 4 weeks)	PA-QL	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
SAPHNELO SOLN (QL=2ml/28 days)	PA-QL	F	MISCELLANEOUS THERAPEUTIC CLASSES
SARCLISA SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SCENESSE IMP (QL=1 implant/56 days)	-	EXC	DERMATOLOGICALS
SELENIUM INJ	-	F	MINERALS & ELECTROLYTES
SEVENFACT INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
SIGNIFOR LAR INJ (QL=1 kit/28 days)	PA-QL	F	ENDOCRINE AND METABOLIC AGENTS - MISC.

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SIMPONI ARIA INJ	PA	F	ANALGESICS - ANTI-INFLAMMATORY
SIMULECT INJ	-	F	ASSORTED CLASSES
SKYRIZI SOLN (QL=1 vial per 28 days with up to 3PA-QL fills per 6 months)	PA-QL	F	GASTROINTESTINAL AGENTS - MISC.
SKYSONA INJ	-	EXC	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
SMOFLIPID EMULSION	-	F	NUTRIENTS
SODIUM PHOSPHATE INJ	-	F	MINERALS & ELECTROLYTES
sodium bicarbonate inj	-	F	MINERALS & ELECTROLYTES
sodium chloride inj	-	F	MINERALS & ELECTROLYTES
sodium phosphate inj	-	F	MINERALS & ELECTROLYTES
SODIUM THIOSULFATE INJ	-	F	ANTIDOTES
SOLIRIS IV SOLN	PA	F	HEMATOLOGICAL AGENTS - MISC.
SOLU-MEDROL INJ	-	F	CORTICOSTEROIDS
SOMATULINE INJ (QL=1 syringe/28 days)	PA-QL	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
SOTALOL INJ	-	F	BETA BLOCKERS
SPEVIGO INJ (QL=2 vials/fill, 4 vials/month)	PA-QL	F	DERMATOLOGICALS
SPINRAZA INJ	PA	F	NEUROMUSCULAR AGENTS
SPRAVATO SOLN	PA	F	ANTIDEPRESSANTS
STELARA IV INJ	PA	F	GASTROINTESTINAL AGENTS - MISC.
STERILE DILUENT SOLN	-	F	PHARMACEUTICAL ADJUVANTS
sterile water for inj	-	F	PHARMACEUTICAL ADJUVANTS
STREPTOMYCIN INJ	-	F	AMINOGLYCOSIDES
STRONTIUM INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
sulfamethoxazole/trimethoprim inj	-	F	ANTI-INFECTIVE AGENTS - MISC.
SUPARTZ FX INJ	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SUPPRELIN LA KIT	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
SUSVIMO INJ	PA	F	OPHTHALMIC AGENTS
SYLATRON KIT	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYLVANT INJ	PA	F	MISCELLANEOUS THERAPEUTIC CLASSES
SYNAGIS INJ	PA	F	PASSIVE IMMUNIZING AND TREATMENT AGENTS
SYNERCID INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.

Symbols and abbreviations are defined on page 1.

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Drug Name	Special Code	Tier	Category
SYNRIBO INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
SYNVISC	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SYNVISC INJ	-	NC	MUSCULOSKELETAL THERAPY AGENTS
SYNVISC ONE	-	NC	MUSCULOSKELETAL THERAPY AGENTS
TAXOL INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TAXOTERE INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TECARTUS SUSP	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TECENTRIQ INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TECVAYLI INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TEFLARO INJ	-	F	CEPHALOSPORINS
TEMODAR IV INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
temsirolimus soln	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TEPEZZA INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
terbutaline inj (BRETHINE INJ equiv)	-	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
TESTOPEL MIS	-	NC	ANDROGENS-ANABOLIC
TESTOSTERONE ENANTHATE INJ	-	F	ANDROGENS-ANABOLIC
TEZSPIRE SOLN (QL=1 inj/28 days)	PA-QL	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
thiotepa inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
THYMOGLOBULIN INJ	-	F	ASSORTED CLASSES
THYROGEN INJ	PA	F	DIAGNOSTIC PRODUCTS
tigecycline inj	-	F	TETRACYCLINES
TIVDAK INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
tobramycin inj	-	F	AMINOGLYCOSIDES

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Drug Name	Special Code	Tier	Category
topotecan inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TPN ELECTROL INJ	-	F	MINERALS & ELECTROLYTES
tranexamic acid inj	-	F	HEMOSTATICS
TRAZIMERA INJ (Restricted to Oncology or Hematology Specialist)	RS	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRELSTAR INJ 11.25MG (QL=1 kit/84 days)	PA-QL	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRELSTAR INJ 22.5MG (QL=1 kit/168 days)	PA-QL	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TRELSTAR INJ 3.75MG (QL=1 kit/28 days)	PA-QL	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
treprostinil inj	PA	F	CARDIOVASCULAR AGENTS - MISC.
TRETEN INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
triamcinolone acetonide inj	-	F	CORTICOSTEROIDS
TRIESENCE INJ (QL=2 inj/fill)	QL	F	OPHTHALMIC AGENTS
TRILURON	-	NC	MUSCULOSKELETAL THERAPY AGENTS
TRIPTODUR SUSP (QL=1 inj every 24 weeks)	PA-QL	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
TRIVISC	-	NC	MUSCULOSKELETAL THERAPY AGENTS
TRODELVY SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TROGARZO INJ (Restricted to Infectious Disease Specialist; QL= Loading Dose: 10 vials (13.3ml); Maintenance: 4 vials (5.32 ml) every 14 days)	QL-RS	F	ANTIVIRALS
TRUXIMA INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
TYSABRI INJ	PA	F	PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.
ULTOMIRIS INJ	PA	F	HEMATOLOGICAL AGENTS - MISC.
UNITUXIN INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
UPLIZNA SOLN	PA	F	MISCELLANEOUS THERAPEUTIC CLASSES
UPTRAVI INJ	-	EXC	CARDIOVASCULAR AGENTS - MISC.
valproate inj	-	F	ANTICONVULSANTS
valrubicin inj	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES

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Drug Name	Special Code	Tier	Category
VANCOMYCIN INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN/DEXTROSE INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
VANCOMYCIN/NACL INJ	-	F	ANTI-INFECTIVE AGENTS - MISC.
VECTIBIX IV SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VELCADE INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VELCADE INJ, BORTEZOMIB INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VENOFER INJ	-	F	HEMATOPOIETIC AGENTS
verapamil inj	-	F	CALCIUM CHANNEL BLOCKERS
VIDAZA INJ	-	NC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VILTEPSO SOLN	-	EXC	NEUROMUSCULAR AGENTS
VIMIZIM INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
VINBLASTINE INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
vincristine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
vinorelbine inj	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
VISCO-3	-	NC	MUSCULOSKELETAL THERAPY AGENTS
VISUDYNE INJ	PA	F	OPHTHALMIC AGENTS
vitamin K1 inj	-	F	VITAMINS
VONVENDI INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
voriconazole inj	-	F	ANTIFUNGALS
VPRIV INJ	PA	F	HEMATOPOIETIC AGENTS
VYONDYS 53 SOLN	-	EXC	NEUROMUSCULAR AGENTS
VYVGART INJ	PA	F	MISCELLANEOUS THERAPEUTIC CLASSES
VYXEOS INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
WILATE INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
XENPOZYME SOLN	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
XEOMIN INJ	PA	F	NEUROMUSCULAR AGENTS
XERAVA INJ	-	F	TETRACYCLINES

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Drug Name	Special Code	Tier	Category
XGEVA INJ	PA	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
XIPERE INJ (QL=2 inj/fill)	QL	F	OPHTHALMIC AGENTS
XOFIGO INJ	-	EXC	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
XOLAIR INJ	PA	F	ANTIASTHMATIC AND BRONCHODILATOR AGENTS
XYNTHA INJ	-	NC	HEMATOLOGICAL AGENTS - MISC.
YERVOY INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
YONDELIS INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
YUTIQ IMPLANT (QL=2 inj/36 months)	QL	F	OPHTHALMIC AGENTS
ZALTRAP INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZANOSAR INJ	-	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZEMDRI INJ	-	F	AMINOGLYCOSIDES
ZEPZELCA SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZERBAXA INJ	-	F	CEPHALOSPORINS
ZINC CHLORIDE INJ	-	F	MINERALS & ELECTROLYTES
ZIRABEV INJ (Restricted to Oncology, Ophthalmology or Hematology Specialist)	RS	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZOLADEX INJ	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
zoledronic acid inj (ZOMETA INJ equiv)	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
zoledronic acid IV soln (RECLAST INJ equiv)	-	F	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZOLGENSMA INJ	PA	F	NEUROMUSCULAR AGENTS
ZOMETA INJ	-	NC	ENDOCRINE AND METABOLIC AGENTS - MISC.
ZOSYN/ DEXTROSE INJ	-	F	PENICILLINS
ZYNLONTA SOLN	PA	F	ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES
ZYNTÉGLO INJ	-	EXC	HEMATOPOIETIC AGENTS
ZYVOX IV SOLN	-	F	ANTI-INFECTIVE AGENTS - MISC.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
amikacin inj	-	F
gentamicin inj	-	F
gentamicin/ nacl inj	-	F
GENTAMICIN/NACL INJ	-	F
STREPTOMYCIN INJ	-	F
tobramycin inj	-	F
ZEMDRI INJ	-	F
ANALGESICS - ANTI-INFLAMMATORY		
ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES		
SIMPONI ARIA INJ	PA	F
INTERLEUKIN-1BETA BLOCKERS		
ILARIS INJ	PA	F
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA INJ	PA	F
SELECTIVE COSTIMULATION MODULATORS		
ORENCIA INJ	PA	F
ANALGESICS - OPIOID		
OPIOID AGONISTS		
DILAUDID PF INJ	-	F
hydromorphone inj	-	F
MORPHINE SULFATE 10MG/ML PF INJ	-	F
morphine sulfate inj	-	F
OPIOID PARTIAL AGONISTS		
butorphanol inj	-	F
ANDROGENS-ANABOLIC		
ANDROGENS		
TESTOSTERONE ENANTHATE INJ	-	F
TESTOPEL MIS	-	NC
ANTIANGINAL AGENTS		
NITRATES		
NITROGLYCERIN IV SOLN	-	F
ANTIANXIETY AGENTS		
BENZODIAZEPINES		
diazepam inj	-	F
lorazepam inj	-	F
ANTIARRHYTHMICS		
ANTIARRHYTHMICS TYPE I-A		
PROCAINAMIDE INJ	-	F
ANTIARRHYTHMICS TYPE III		
amiodarone inj	-	F

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTIARRHYTHMICS Cont.		
NEXTERONE INJ/AMIODARONE INJ	-	F
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
CINQAIR INJ	PA	F
FASENRA INJ	PA	F
NUCALA INJ	PA	F
TEZSPIRE SOLN (QL=1 inj/28 days)	PA-QL	F
XOLAIR INJ	PA	F
SYMPATHOMIMETICS		
terbutaline inj (BRETHINE INJ equiv)	-	F
XANTHINES		
aminophylline inj	-	F
ANTICOAGULANTS		
HEPARINS AND HEPARINOID-LIKE AGENTS		
HEPARIN LOCK FLUSH IV SOLN	-	F
heparin lock flush soln	-	F
heparin sodium inj	-	F
HEPARIN SODIUM/D5W INJ	-	F
heparin sodium/nacl inj	-	F
THROMBIN INHIBITORS		
argatroban inj	-	F
ANTICONVULSANTS		
ANTICONVULSANTS - MISC.		
lacosamide iv inj	-	F
levetiracetam inj	-	F
HYDANTOINS		
fosphenytoin inj	-	F
PHENYTOIN INJ	-	F
VALPROIC ACID		
valproate inj	-	F
ANTIDEPRESSANTS		
N-METHYL-D-ASPARTIC ACID (NMDA) RECEPTOR ANTAGONISTS		
SPRAVATO SOLN	PA	F
ANTIDOTES		
ANTIDOTES		
deferoxamine mesylate inj	-	F
fomepizole inj	-	F
SODIUM THIOSULFATE INJ	-	F
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
ALOXI IV SOLN	-	F

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTIEMETICS Cont.		
granisetron HCl inj (KYTRIL INJ equiv)	-	F
ondansetron inj	-	F
palonosetron inj	-	F
palonosetron inj (Restricted to Oncology or Hematology specialist)	--RS	F
ondansetron (ZOFTRAN) inj	-	NC
ANTIEMETICS - MISCELLANEOUS		
AKYNZEO INJ	-	NC
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
CINVANTI INJ	-	F
EMEND INJ	-	F
fosaprepitant dimeglumine soln	-	F
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS (ECHINOCANDINS)		
CANCIDAS INJ	-	F
caspofungin acetate iv soln	-	F
ERAXIS INJ	-	F
micafungin inj	-	F
ANTIFUNGALS		
ABELCET INJ	-	F
AMPHOTERICIN INJ	-	F
IMIDAZOLE-RELATED ANTIFUNGALS		
fluconazole/nacl inj	-	F
voriconazole inj	-	F
ANTIHIISTAMINES		
ANTIHIISTAMINES - ETHANOLAMINES		
diphenhydramine inj	-	F
ANTIHYPERLIPIDEMICS		
ANGIOPOIETIN-LIKE PROTEIN INHIBITORS		
EVKEEZA INJ	PA	F
ANTIHYPERTENSIVES		
VASODILATORS		
hydralazine inj	-	F
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
metronidazole/ nacl inj	-	F
colistimethate inj	-	NC
pentamidine inj	-	NC
ANTI-INFECTIVE MISC. - COMBINATIONS		
sulfamethoxazole/trimethoprim inj	-	F
CARBAPENEMS		
cilastatin/imipenem inj	-	F

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTI-INFECTIVE AGENTS - MISC. Cont.		
ertapenem inj	-	F
meropenem inj	-	F
PRIMAXIN INJ	-	F
CHLORAMPHENICOLS		
CHLORAMPHENICOL INJ	-	F
CYCLIC LIPOPEPTIDES		
daptomycin inj	-	F
DAPTOMYCIN IV SOLN	-	F
GLYCOPEPTIDES		
DALVANCE INJ	-	F
VANCOMYCIN INJ	-	F
VANCOMYCIN/DEXTROSE INJ	-	F
VANCOMYCIN/NACL INJ	-	F
LINCOSAMIDES		
CLEOCIN INJ	-	F
clindamycin inj	-	F
lincomycin inj	-	F
MONOBACTAMS		
aztreonam inj	-	F
OXAZOLIDINONES		
LINEZOLID IV SOLN	-	F
ZYVOX IV SOLN	-	F
POLYMYXINS		
colistimethate inj	-	F
polymyxin b inj	-	F
STREPTOGRAMINS		
SYNERCID INJ	-	F
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
CAPASTAT INJ	-	F
rifampin inj	-	F
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
bendamustine inj	-	F
BENDEKA INJ	PA	F
busulfan inj	-	F
carboplatin inj	-	F
carmustine inj	PA	F
CISPLATIN INJ	-	F
cyclophosphamide inj	-	F
IFEX INJ	-	F

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ifosfamide inj	-	F
melphalan inj	-	F
oxaliplatin inj	-	F
TEMODAR IV INJ	PA	F
thiotepa inj	-	F
YONDELIS INJ	PA	F
ZANOSAR INJ	-	F
ZEPZELCA SOLN	PA	F
CARMUSTINE INJ	-	NC
PEPAXTO INJ	-	NC
ANTIMETABOLITES		
azacitidine inj	PA	F
cladribine inj	-	F
clofarabine inj	-	F
cytarabine inj	-	F
decitabine inj	PA	F
fludarabine inj	-	F
fluorouracil inj	-	F
gemcitabine inj	-	F
nelarabine iv soln	PA	F
pemetrexed disodium for iv soln	PA	F
ALIMTA INJ	-	NC
ARRANON INJ	-	NC
INFUGEM SOLN	-	NC
VIDAZA INJ	-	NC
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
AVASTIN INJ	-	F
CYRAMZA INJ	-	F
MVASI INJ (Restricted to Oncology, Ophthalmology or Hematology Specialist)	RS	F
ZALTRAP INJ	PA	F
ZIRABEV INJ (Restricted to Oncology, Ophthalmology or Hematology Specialist)	RS	F
ANTINEOPLASTIC - ANTIBODIES		
TECVAYLI INJ	-	EXC
ADCETRIS INJ	PA	F
ARZERRA INJ	PA	F
BAVENCIO INJ	PA	F
BESPONSA INJ	PA	F
BLINCYTO INJ	PA	F
DARZALEX SOLN	PA	F
ENHERTU INJ	PA	F

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
GAZYVA INJ	PA	F
IMFINZI INJ	PA	F
IMJUDO INJ	PA	F
JEMPERLI SOLN	PA	F
KADCYLA IV SOLN	PA	F
KEYTRUDA INJ	PA	F
KEYTRUDA IV SOLN	PA	F
KIMMTRAK SOLN	PA	F
LIBTAYO INJ	PA	F
LUMOXITI INJ	PA	F
MONJUVI INJ	PA	F
MYLOTARG INJ	PA	F
OPDIVO INJ	PA	F
PADCEV INJ	PA	F
POLIVY INJ	PA	F
RUXIENCE INJ	PA	F
RYBREVA NT SOLN	PA	F
SARCLISA SOLN	PA	F
TECENTRIQ INJ	PA	F
TIVDAK INJ	PA	F
TRUXIMA INJ	PA	F
YERVOY INJ	PA	F
ZYNLONTA SOLN	PA	F
BLENREP INJ	-	NC
CAMPATH INJ	-	NC
DANYELZA INJ	-	NC
POTELIGEO INJ	-	NC
RIABNI SOLN	-	NC
RITUXAN INJ	-	NC
UNITUXIN INJ	-	NC
ANTINEOPLASTIC - ANTI-HER2 AGENTS		
MARGENZA INJ	PA	F
OGIVRI INJ (Restricted to Oncology or Hematology Specialist)	RS	F
PERJETA INJ	PA	F
TRAZIMERA INJ (Restricted to Oncology or Hematology Specialist)	RS	F
HERCEPTIN INJ	-	NC
HERZUMA INJ	-	NC
KANJINTI INJ (Restricted to Oncology or Hematology Specialist)	-	NC
ONTRUZANT INJ	-	NC
ANTINEOPLASTIC - CELLULAR IMMUNOTHERAPY		

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ABECMA INJ	-	EXC
CARVYKTI INJ	-	EXC
KYMRIAH SUSP	-	EXC
PROVENGE INJ	-	EXC
TECARTUS SUSP	-	EXC
BREYANZI INJ	-	NC
ANTINEOPLASTIC - EGFR INHIBITORS		
ERBITUX INJ	PA	F
PORTRAZZA INJ	PA	F
VECTIBIX IV SOLN	PA	F
ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS		
FIRMAGON INJ 120MG (QL=2 vials/fill)	PA-QL	F
FIRMAGON INJ 80MG (QL=1 vial/28 days)	PA-QL	F
fulvestrant inj (Restricted to Oncology or Hematology Specialist)	RS	F
LUPRON DEPOT INJ/ELIGARD INJ	PA	F
TRELSTAR INJ 11.25MG (QL=1 kit/84 days)	PA-QL	F
TRELSTAR INJ 22.5MG (QL=1 kit/168 days)	PA-QL	F
TRELSTAR INJ 3.75MG (QL=1 kit/28 days)	PA-QL	F
ZOLADEX INJ	PA	F
FIRMAGON INJ	-	NC
LUPRON DEPOT INJ 22.5MG	-	NC
LUPRON DEPOT INJ 30MG	-	NC
LUPRON DEPOT INJ 45MG	-	NC
LUPRON DEPOT INJ 7.5MG	-	NC
ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS		
LARTRUVO INJ	PA	F
ANTINEOPLASTIC ANTIBIOTICS		
adriamycin inj	-	F
bleomycin inj	-	F
dactinomycin inj	-	F
daunorubicin inj	-	F
doxorubicin hcl inj	-	F
epirubicin inj	-	F
idarubicin inj	-	F
JELMYTO INJ	PA	F
lipodox inj	-	F
mitomycin inj	PA	F
mitoxantron inj	-	F
valrubicin inj	PA	F
ANTINEOPLASTIC COMBINATIONS		

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
DARZALEX SOLN FASPRO	PA	F
OPDUALAG SOLN	PA	F
VYXEOS INJ	PA	F
HERCEPTIN HYLECTA INJ	-	NC
RITUXAN HYCELA INJ	-	NC
ANTINEOPLASTIC ENZYME INHIBITORS		
BALEODAQ INJ	PA	F
bortezomib inj	PA	F
FYARRO SUSP	PA	F
KYPROLIS SOLN	PA	F
romidepsin for iv inj	PA	F
ROMIDEPSIN INJ	PA	F
temsirolimus soln	-	F
ALIQOPA INJ	-	NC
BORTEZOMIB INJ	-	NC
ISTODAX (OVERFILL) INJ	-	NC
VELCADE INJ	-	NC
VELCADE INJ, BORTEZOMIB INJ	-	NC
ANTINEOPLASTIC ENZYMES		
ERWINAZE INJ	-	EXC
ASPARLAS INJ	PA	F
ONCASPAR INJ	PA	F
RYLAZE INJ	-	NC
ANTINEOPLASTIC RADIOPHARMACEUTICALS		
AZEDRA INJ	-	EXC
LUTATHERA SOLN	-	EXC
PLUVICTO INJ	-	EXC
QUADRAMET INJ	-	EXC
STRONTIUM INJ	-	EXC
XOFIGO INJ	-	EXC
ANTINEOPLASTICS MISC.		
arsenic trioxide inj	PA	F
dacarbazine inj	-	F
ELZONRIS SOLN	PA	F
NIPENT INJ	PA	F
PHOTOFRIN INJ	-	F
PROLEUKIN INJ	-	F
SYLATRON KIT	-	F
SYNRIBO INJ	PA	F
CHEMOTHERAPY ADJUNCTS		

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES Cont.		
ELITEK INJ	-	F
KEPIVANCE INJ	-	F
CHEMOTHERAPY RESCUE/ANTIDOTE AGENTS		
dexrazoxane inj	-	F
KHAPZORY SOLN	PA	F
leucovorin inj	-	F
LEVOLEUCOVORIN INJ	-	F
mesna inj	-	F
CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS		
LEUCOVORIN INJ	-	F
COSELA INJ	-	NC
MITOTIC INHIBITORS		
ABRAXANE INJ	PA	F
docetaxel inj	-	F
docetaxel IV soln	-	F
ETOPOPHOS INJ	-	F
etoposide inj	-	F
HALAVEN INJ	PA	F
IXEMPRA KIT INJ	PA	F
JEVTANA INJ	PA	F
paclitaxel inj	-	F
TAXOL INJ	-	F
TAXOTERE INJ	-	F
VINBLASTINE INJ	-	F
vincristine inj	-	F
vinorelbine inj	-	F
MARQIBO INJ	-	NC
ONCOLYTIC VIRAL AGENTS		
IMLYGIC INJ	-	EXC
TOPOISOMERASE I INHIBITORS		
IRINOTECAN INJ	-	F
ONIVYDE INJ	PA	F
topotecan inj	-	F
TRODELVY SOLN	PA	F
ANTIPARKINSON AGENTS		
ANTIPARKINSON ANTICHOLINERGICS		
benztropine inj	-	F
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
BENZISOXAZOLES		
INVEGA HAFYERA INJ	-	F
PHENOTHIAZINES		

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ANTIPSYCHOTICS/ANTIMANIC AGENTS Cont.		
prochlorperazine inj	-	F
ANTIVIRALS		
ANTIRETROVIRALS		
APRETUDE SUSP (QL=7 inj/year)	QL	F
CABENUVA SUSP (QL=1 kit/month)	QL	F
TROGARZO INJ (Restricted to Infectious Disease Specialist; QL= Loading Dose: 10QL-RS vials (13.3ml); Maintenance: 4 vials (5.32 ml) every 14 days)		F
CMV AGENTS		
cidofovir inj	-	F
foscarnet sodium inj	-	F
ganciclovir inj	-	F
FOSCAVIR INJ	-	NC
HERPES AGENTS		
acyclovir sodium IV soln	-	F
ASSORTED CLASSES		
IMMUNOSUPPRESSIVE AGENTS		
cyclosporine inj	-	F
NULOJIX INJ	-	F
SIMULECT INJ	-	F
THYMOGLOBULIN INJ	-	F
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
BENLYSTA IV SOLN	PA	F
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
labetalol inj	-	F
BETA BLOCKERS CARDIO-SELECTIVE		
metoprolol inj	-	F
METOPROLOL TARTRATE CARTRIDGE	-	F
BETA BLOCKERS NON-SELECTIVE		
propranolol inj	-	F
SOTALOL INJ	-	F
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
CARDENE INJ	-	F
diltiazem inj	-	F
nicardipine inj	-	F
verapamil inj	-	F
CARDIOTONICS		
INOTROPES		
DOBUTAMINE/D5W INJ	-	F
dopamine inj	-	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
CARDIOTONICS Cont.		
milrinone inj	-	F
CARDIOVASCULAR AGENTS - MISC.		
PROSTAGLANDIN VASODILATORS		
epoprostenol inj	PA	F
treprostinil inj	PA	F
FLOLAN INJ, VELETRI INJ	-	NC
REMODULIN INJ	-	NC
PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST		
UPTRAVI INJ	-	EXC
CEPHALOSPORINS		
CEPHALOSPORIN COMBINATIONS		
AVYCAZ INJ	-	F
ZERBAXA INJ	-	F
CEPHALOSPORINS - 1ST GENERATION		
cefazolin inj	-	F
CEFAZOLIN/DEXTROSE SOLN	-	F
CEPHALOSPORINS - 2ND GENERATION		
cefotetan inj	-	F
cefoxitin inj	-	F
cefuroxime inj	-	F
CEPHALOSPORINS - 3RD GENERATION		
cefotaxime inj	-	F
ceftazidime inj	-	F
CEFTRIAZONE INJ	-	F
CEFTRIAZONE/DEXTROSE INJ	-	F
CLAFORAN INJ	-	F
FORTAZ INJ	-	F
CEPHALOSPORINS - 4TH GENERATION		
cefepime inj	-	F
CEFEPIME IV SOLN	-	F
CEPHALOSPORINS - 5TH GENERATION		
TEFLARO INJ	-	F
CONTRACEPTIVES		
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-PROVERA SC INJ	-	F
medroxyprogesterone inj	-	F
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
A-HYDROCORT INJ, SOLU-CORTEF INJ	-	F
DEPO-MEDROL INJ	-	F
DEXAMETHASONE INJ	-	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
CORTICOSTEROIDS Cont.		
dexamethasone sodium phosphate inj	-	F
methylprednisolone acetate inj (DEPO-MEDROL INJ equiv)	-	F
methylprednisolone inj (SOLU-MEDROL INJ equiv)	-	F
METHYLPREDNISOLONE POWDER	-	F
SOLU-MEDROL INJ	-	F
triamcinolone acetonide inj	-	F
DERMATOLOGICALS		
ANTIPSORIATICS		
SPEVIGO INJ (QL=2 vials/fill, 4 vials/month)	PA-QL	F
ILUMYA SOLN	-	NC
GLABELLAR LINES (FROWN LINES) AGENTS		
BOTOX COSMETIC INJ	-	EXC
JEUVEAU INJ	-	EXC
PROTECTIVES AGAINST UV RADIATION		
SCENESSE IMP (QL=1 implant/56 days)	-	EXC
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC DRUGS		
THYROGEN INJ	PA	F
DIURETICS		
LOOP DIURETICS		
furosemide inj	-	F
OSMOTIC DIURETICS		
mannitol inj	-	F
OSMITROL INJ	-	F
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
chlorothiazide inj (DIURIL IV INJ equiv)	-	F
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
EVENITY INJ	PA	F
PAMIDRONATE INJ	-	F
PROLIA SOLN	PA	F
XGEVA INJ	PA	F
zoledronic acid inj (ZOMETA INJ equiv)	-	F
zoledronic acid IV soln (RECLAST INJ equiv)	-	F
BONIVA INJ	-	NC
ibandronate sodium inj (BONIVA equiv)	-	NC
PAMIDRONATE INJ	-	NC
RECLAST INJ	-	NC
ZOMETA INJ	-	NC
CORTICOTROPIN		
ACTHAR HP GEL INJ	-	NC

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ENDOCRINE AND METABOLIC AGENTS - MISC. Cont.		
INSULIN-LIKE GROWTH FACTOR RECEPTOR INHIBITORS		
TEPEZZA INJ	PA	F
LHRH/GNRH AGONIST ANALOG PITUITARY SUPPRESSANTS		
LUPRON DEPO-PED INJ	PA	F
LUPRON DEPOT PEDIATRIC INJ/LUPRON DEPOT INJ	PA	F
TRIPTODUR SUSP (QL=1 inj every 24 weeks)	PA-QL	F
SUPPRELIN LA KIT	-	NC
METABOLIC MODIFIERS		
ALDURAZYME INJ	PA	F
BRINEURA KIT (QL=4 kits/28 days)	PA-QL	F
CRYSVITA INJ	PA	F
doxercalciferol inj (HECTOROL INJ equiv)	-	F
ELAPRASE INJ	PA	F
FABRAZYME INJ	PA	F
HECTOROL INJ	-	F
KANUMA INJ	PA	F
MYOZYME/LUMIZYME INJ	PA	F
NAGLAZYME INJ	PA	F
NEXVIAZYME INJ	PA	F
NULIBRY INJ	PA	F
paricalcitol inj	-	F
PARSABIV INJ	-	F
REVCovi INJ	PA	F
VIMIZIM INJ	PA	F
XENPOZYME SOLN	PA	F
SOMATOSTATIC AGENTS		
SANDOSTATIN LAR DEPOT KIT (QL=1 kit every 4 weeks)	PA-QL	F
SIGNIFOR LAR INJ (QL=1 kit/28 days)	PA-QL	F
SOMATULINE INJ (QL=1 syringe/28 days)	PA-QL	F
FLUOROQUINOLONES		
FLUOROQUINOLONES		
BAXDELA INJ	-	F
ciprofloxacin inj	-	F
levofloxacin inj	-	F
levofloxacin/d5w inj	-	F
MOXIFLOXACIN INJ	-	F
GASTROINTESTINAL AGENTS - MISC.		
GASTROINTESTINAL STIMULANTS		
metoclopramide inj	-	F
INFLAMMATORY BOWEL AGENTS		
AVSOLA INJ	PA	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
GASTROINTESTINAL AGENTS - MISC. Cont.		
ENTYVIO INJ	PA	F
INFLIXIMAB INJ	PA	F
SKYRIZI SOLN (QL=1 vial per 28 days with up to 3 fills per 6 months)	PA-QL	F
STELARA IV INJ	PA	F
INFLECTRA INJ 100MG	-	NC
REMICADE INJ	-	NC
RENFLEXIS INJ	-	NC
GENITOURINARY AGENTS - MISCELLANEOUS		
<u>HYPEROXALURIA AGENTS</u>		
OXLUMO INJ	PA	F
GOUT AGENTS		
<u>GOUT AGENTS</u>		
allopurinol inj	-	F
KRYSTEXXA INJ	PA	F
HEMATOLOGICAL AGENTS - MISC.		
<u>AMINOLEVULINATE SYNTHASE 1-DIRECTED SIRNA</u>		
GIVLAARI INJ	PA	F
<u>ANTIHEMOPHILIC PRODUCTS</u>		
ADYNOVATE INJ	PA	F
ALPHANATE/VWF COMPLEX/HUMAN INJ	PA	F
FEIBA INJ	PA	F
HUMATE-P INJ	PA	F
NOVOSEVEN RT INJ	PA	F
SEVENFACT INJ	PA	F
ADVATE INJ, KOVALTRY INJ	-	NC
AFSTYLA KIT	-	NC
ALPHANATE INJ, HUMATE-P INJ	-	NC
ALPHANINE SD INJ, MONONINE INJ	-	NC
ALPROLIX INJ	-	NC
BENEFIX INJ	-	NC
COAGADEX INJ	-	NC
CORIFACT KIT	-	NC
ELOCTATE INJ	-	NC
ESPEROCT INJ	-	NC
FIBRYGA INJ	-	NC
HEMOFIL M INJ, KOATE-DVI INJ	-	NC
IDELVION SOLN	-	NC
IXINITY INJ, RIXUBIS INJ	-	NC
JIVI INJ	-	NC
KCENTRA KIT	-	NC
KOGENATE FS INJ	-	NC

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
HEMATOLOGICAL AGENTS - MISC. Cont.		
NOVOEIGHT INJ	-	NC
NUWIQ INJ	-	NC
OBIZUR INJ	-	NC
PROFILNINE INJ	-	NC
REBINYN SOL	-	NC
RECOMBINATE INJ	-	NC
TRETEN INJ	-	NC
VONVENDI INJ	-	NC
WILATE INJ	-	NC
XYNTHA INJ	-	NC
COMPLEMENT INHIBITORS		
BERINERT INJ	PA	F
CINRYZE INJ	PA	F
HAEGARDA INJ	PA	F
RUCONEST INJ	PA	F
SOLIRIS IV SOLN	PA	F
ULTOMIRIS INJ	PA	F
PLASMA KALLIKREIN INHIBITORS		
KALBITOR INJ	PA	F
PLASMA PROTEINS		
ALBUMINAR INJ	-	F
RYPLAZIM SOLN	PA	F
THROMBOLYTIC ENZYMES		
CATHFLO ACTIVASE INJ	-	F
HEMATOPOIETIC AGENTS		
AGENTS FOR GAUCHER DISEASE		
CEREZYME INJ	PA	F
ELELYSO INJ	PA	F
VPRIV INJ	PA	F
AGENTS FOR SICKLE CELL DISEASE		
ADAKVEO INJ	PA	F
FOLIC ACID/FOLATES		
folic acid inj	-	F
HEMATOPOIETIC GENE THERAPY		
ZYNTGLO INJ	-	EXC
HEMATOPOIETIC GROWTH FACTORS		
NPLATE INJ	PA	F
MIRCERA INJ	-	NC
REBLOZYL INJ	-	NC
IRON		
ferric gluconate IV soln	-	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
HEMATOPOIETIC AGENTS Cont.		
ferumoxytol inj	-	F
INFED INJ	-	F
INJECTAFER INJ	-	F
MONOFERRIC INJ	-	F
VENOFER INJ	-	F
FERAHEME INJ	-	NC
FERRLECIT INJ	-	NC
STEM CELL MOBILIZERS		
MOZOBIL INJ	-	F
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
tranexamic acid inj	-	F
LOCAL ANESTHETICS-PARENTERAL		
LOCAL ANESTHETICS - AMIDES		
lidocaine inj	-	F
MACROLIDES		
AZITHROMYCIN		
azithromycin inj	-	F
ERYTHROMYCINS		
erythromycin inj	-	F
ERYTHROCIN INJ	-	NC
MINERALS & ELECTROLYTES		
BICARBONATES		
sodium bicarbonate inj	-	F
CALCIUM		
CALCIUM GLUCONATE INJ	-	F
ELECTROLYTE MIXTURES		
D5W/LYTES INJ	-	F
dextrose 5% in lactated ringers	-	F
dextrose w/ nacl inj	-	F
DEXTROSE W/NACL INJ	-	F
DEXTROSE/SODIUM CHLORIDE INJ	-	F
IONOSOL-MB INJ D5W	-	F
ISOLYTE-P/ D5W INJ	-	F
ISOLYTE-S INJ	-	F
kcl/ d5w inj	-	F
kcl/ d5w/ nacl inj	-	F
kcl/ nacl inj	-	F
KCL/D5W/LR INJ	-	F
KCL/DEXTROSE/NACL INJ	-	F
LACTATED RINGERS INJ	-	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
MINERALS & ELECTROLYTES Cont.		
NORMOSOL- R/D5W INJ	-	F
NORMOSOL-M/D5W INJ	-	F
NORMOSOL-R INJ	-	F
PLASMA-LYTE INJ	-	F
PLASMA-LYTE-A INJ	-	F
POTASSIUM CHLORIDE INJ	-	F
POTASSIUM CHLORIDE/NACL INJ	-	F
ringers inj	-	F
TPN ELECTROL INJ	-	F
KCL/NACL INJ	-	NC
MAGNESIUM		
magnesium sulfate inj	-	F
magnesium sulfate/d5w inj	-	F
MANGANESE		
MANGANESE SULFATE INJ	-	F
PHOSPHATE		
potassium phosphate inj	-	F
SODIUM PHOSPHATE INJ	-	F
sodium phosphate inj	-	F
POTASSIUM		
POTASSIUM CHLORIDE INJ	-	F
POTASSIUM CHLORIDE INJ	-	NC
SODIUM		
sodium chloride inj	-	F
TRACE MINERALS		
CHROMIUM CHLORIDE INJ	-	F
CUPRIC CHLORIDE INJ	-	F
SELENIUM INJ	-	F
ZINC		
ZINC CHLORIDE INJ	-	F
MISCELLANEOUS THERAPEUTIC CLASSES		
IMMUNOMODULATORS		
VYVGART INJ	PA	F
IMMUNOSUPPRESSIVE AGENTS		
ATGAM INJ	-	F
AZATHIOPRINE INJ	-	F
mycophenolate inj	-	F
PROGRAF INJ	-	F
UPLIZNA SOLN	PA	F
GAMIFANT INJ	-	NC
LYMPHATIC AGENTS		

Note: Unless otherwise specifically noted, all strengths and forms of products listed in the formulary are covered.

Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
MISCELLANEOUS THERAPEUTIC CLASSES Cont.		
SYLVANT INJ	PA	F
SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS		
SAPHNELO SOLN (QL=2ml/28 days)	PA-QL	F
UREMIC PRURITUS AGENTS		
KORSUVA INJ	PA	F
MULTIVITAMINS		
MULTIVITAMINS		
INFUVITE INJ	-	F
PEDIATRIC MULTIPLE VITAMINS		
INFUVITE INJ	-	F
MUSCULOSKELETAL THERAPY AGENTS		
VISCOSUPPLEMENTS		
DUROLANE	PA	F
EUFLEXXA	-	NC
GEL-ONE	-	NC
GELSYN-3	-	NC
GENVISC 850	-	NC
HYALGAN	-	NC
HYMOVIS	-	NC
MONOVISC	-	NC
ORTHOVISC	-	NC
ORTHOVISC INJ	-	NC
SUPARTZ FX INJ	-	NC
SYNVISC	-	NC
SYNVISC INJ	-	NC
SYNVISC ONE	-	NC
TRILURON	-	NC
TRIVISC	-	NC
VISCO-3	-	NC
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA INJ	-	NC
MUSCULAR DYSTROPHY AGENTS		
AMONDYS 45 INJ	-	EXC
EXONDYS 51 SOLN	-	EXC
VILTEPSO SOLN	-	EXC
VYONDYS 53 SOLN	-	EXC
NEUROMUSCULAR BLOCKING AGENT - NEUROTOXINS		
BOTOX INJ	PA	F
DYSFORT	PA	F
XEOMIN INJ	PA	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
NEUROMUSCULAR AGENTS Cont.		
SPINAL MUSCULAR ATROPHY AGENTS (SMA)		
SPINRAZA INJ	PA	F
ZOLGENSMA INJ	PA	F
NUTRIENTS		
CARBOHYDRATES		
dextrose inj	-	F
LIPIDS		
INTRALIPID INJ	-	F
LIPOSYN	-	F
SMOFLIPID EMULSION	-	F
PROTEINS		
AMINOSYN II INJ	-	F
AMINOSYN-RF INJ	-	F
CLINIMIX E INJ	-	F
CLINIMIX INJ	-	F
premasol inj	-	F
OPHTHALMIC AGENTS		
OPHTHALMIC - ANGIOGENESIS INHIBITORS		
BEOVU INJ (QL= Starting Dose: 1 vial/28 days for first 3 fills; Maintenance Dose: 1 vial/56 days)	PA-QL	F
BYOOVIZ INJ	PA	F
CIMERLI INJ	PA	F
SUSVIMO INJ	PA	F
OPHTHALMIC GENE THERAPY		
LUXTURN A SUSP (QL=1 kit per eye, per lifetime)	PA-QL	F
OPHTHALMIC PHOTODYNAMIC THERAPY AGENTS		
VISUDYNE INJ	PA	F
OPHTHALMIC STEROIDS		
ILUVIEN IMPLANT (QL=2 inj/36 months)	QL	F
OZURDEX IMPLANT (QL=2 inj/180 days)	QL	F
TRIESENCE INJ (QL=2 inj/fill)	QL	F
XIPERE INJ (QL=2 inj/fill)	QL	F
YUTIQ IMPLANT (QL=2 inj/36 months)	QL	F
RETISERT IMPLANT	-	NC
PASSIVE IMMUNIZING AGENTS		
IMMUNE SERUMS		
CARIMUNE NANOFILTERED INJ	PA	F
GAMMAGARD INJ	PA	F
GAMMAGARD SD INJ	PA	F
GAMMAPLEX INJ	PA	F
PRIVIGEN INJ	PA	F

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
CARIMUNE NANOFILTERED INJ	PA	F
FLEBOGAMMA INJ	PA	F
GAMASTAN INJ	-	F
GAMMAGARD INJ	PA	F
GAMMAGARD SD INJ	PA	F
HEPAGAM B INJ	PA	F
HYPERHEP B INJ	PA	F
OCTAGAM INJ	PA	F
PANZYGA INJ	PA	F
PRIVIGEN INJ	PA	F
MONOCLONAL ANTIBODIES		
SYNAGIS INJ	PA	F
PENICILLINS		
AMINOPENICILLINS		
ampicillin inj	-	F
NATURAL PENICILLINS		
PENICILLIN G PROCAINE INJ	-	F
PENICILLIN G SODIUM INJ	-	F
penicillin gk inj	-	F
PENICILLIN GK/DEXTROSE INJ	-	F
PFIZERPEN-G INJ	-	F
PENICILLIN COMBINATIONS		
ampicillin/sulbactam inj	-	F
BICILLIN C-R INJ	-	F
piperacillin/tazobactam inj	-	F
ZOSYN/ DEXTROSE INJ	-	F
PENICILLINASE-RESISTANT PENICILLINS		
BACTOCILL/DEXTROSE INJ	-	F
nafcillin inj	-	F
NAFCILLIN SODIUM IN DEXTROSE INJ	-	F
oxacillin inj	-	F
PHARMACEUTICAL ADJUVANTS		
LIQUID VEHICLES		
STERILE DILUENT SOLN	-	F
sterile water for inj	-	F
PROGESTINS		
PROGESTINS		
progesterone IM inj	-	F
hydroxyprogesterone capro inj	-	NC
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC. Cont.		
ANTIDEMENTIA AGENTS		
ADUHELM INJ	-	EXC
CEREBRAL ADRENOLEUKODYSTROPHY (CALD) AGENTS		
SKYSONA INJ	-	EXC
MULTIPLE SCLEROSIS AGENTS		
LEMTRADA INJ	PA	F
OCREVUS INJ	PA	F
TYSABRI INJ	PA	F
TRANSTHYRETIN AMYLOIDOSIS AGENTS		
AMVUTTRA SOLN (QL=1 syringe/90 days)	PA-QL	F
ONPATTRO SOLN	PA	F
RESPIRATORY AGENTS - MISC.		
ALPHA-PROTEINASE INHIBITOR (HUMAN)		
ARALAST NP INJ	PA	F
GLASSIA INJ	PA	F
PROLASTIN-C INJ	-	NC
PROLASTIN-C INJ, ZEMAIRA INJ	-	NC
TETRACYCLINES		
FLUOROCYCLINES		
XERAVA INJ	-	F
GLYCYLCYCLINES		
tigecycline inj	-	F
TETRACYCLINES		
doxycycline hyclate inj	-	F
MINOCIN INJ	-	F
THYROID AGENTS		
THYROID HORMONES		
levothyroxine inj	-	F
liothyronine inj (TRIOSTAT equiv)	-	F
ULCER DRUGS		
ANTISPASMODICS		
atropine sulfate iv soln	-	F
H-2 ANTAGONISTS		
FAMOTIDINE INJ	-	F
famotidine inj (PEPCID equiv)	-	F
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
ATROPINE SULFATE INJ	-	F
GLYRX-PF SOLN	-	F
ATROPINE SULFATE INJ	-	NC
PROTON PUMP INHIBITORS		

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Symbols and abbreviations are defined on page 1.

DrugName	Special Code	Tier
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS Cont.		
esomeprazole inj (NEXIUM IV equiv)	-	F
pantoprazole inj (PROTONIX INJ equiv)	-	F
VASOPRESSORS		
VASOPRESSORS		
EPINEPHRINE INJ	-	F
EPINEPHRINE IV SOLN	-	F
EPINEPHRINE INJ	-	NC
VITAMINS		
OIL SOLUBLE VITAMINS		
vitamin K1 inj	-	F

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Symbols and abbreviations are defined on page 1.

**L.A. Care Home Infusion List
Prior Authorization Drug List
Last Updated* 3/1/2023**

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

Drug Name	Tier # for Drug Copay (if prior auth is approved)
ABRAXANE INJ	F
ACTEMRA INJ	F
ADAKVEO INJ	F
ADCETRIS INJ	F
ADYNOVATE INJ	F
ALDURAZYME INJ	F
ALPHANATE/VWF COMPLEX/HUMAN INJ	F
AMVUTTRA SOLN	F
ARALAST NP INJ	F
arsenic trioxide inj	F
ARZERRA INJ	F
ASPARLAS INJ	F
AVSOLA INJ	F
azacitidine inj	F
BALEODAQ INJ	F
BAVENCIO INJ	F
BENDEKA INJ	F
BENLYSTA IV SOLN	F
BEOVU INJ	F
BERINERT INJ	F
BESPONSA INJ	F
BLINCYTO INJ	F
bortezomib inj	F
BOTOX INJ	F
BRINEURA KIT	F
BYOOVIZ INJ	F
CARIMUNE NANOFILTERED INJ	F
carmustine inj	F
CEREZYME INJ	F
CIMERLI INJ	F
CINQAIR INJ	F
CINRYZE INJ	F
CRYSVITA INJ	F
DARZALEX SOLN	F
DARZALEX SOLN FASPRO	F
decitabine inj	F
DUROLANE	F

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**L.A. Care Home Infusion List cont.
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Drug Name	Tier # for Drug Copay (if prior auth is approved)
DYSPORT	F
ELAPRASE INJ	F
ELELYSO INJ	F
ELZONRIS SOLN	F
ENHERTU INJ	F
ENTYVIO INJ	F
epoprostenol inj	F
ERBITUX INJ	F
EVENITY INJ	F
EVKEEZA INJ	F
FABRAZYME INJ	F
FASENRA INJ	F
FEIBA INJ	F
FIRMAGON INJ 120MG	F
FIRMAGON INJ 80MG	F
FLEBOGAMMA INJ	F
FYARRO SUSP	F
GAMMAGARD INJ	F
GAMMAGARD SD INJ	F
GAMMAPLEX INJ	F
GAZYVA INJ	F
GIVLAARI INJ	F
GLASSIA INJ	F
HAEGARDA INJ	F
HALAVEN INJ	F
HEPAGAM B INJ	F
HUMATE-P INJ	F
HYPERHEP B INJ	F
ILARIS INJ	F
IMFINZI INJ	F
IMJUDO INJ	F
INFLIXIMAB INJ	F
IXEMPRA KIT INJ	F
JELMYTO INJ	F
JEMPERLI SOLN	F
JEVTANA INJ	F
KADCYLA IV SOLN	F

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Drug Name	Tier # for Drug Copay (if prior auth is approved)
KALBITOR INJ	F
KANUMA INJ	F
KEYTRUDA INJ	F
KEYTRUDA IV SOLN	F
KHAPZORY SOLN	F
KIMMTRAK SOLN	F
KORSUVA INJ	F
KRYSTEXXA INJ	F
KYPROLIS SOLN	F
LARTRUVO INJ	F
LEMTRADA INJ	F
LIBTAYO INJ	F
LUMOXITI INJ	F
LUPRON DEPO-PED INJ	F
LUPRON DEPOT INJ/ELIGARD INJ	F
LUPRON DEPOT PEDIATRIC INJ/LUPRON DEPOT INJ	F
LUXTURNA SUSP	F
MARGENZA INJ	F
mitomycin inj	F
MONJUVI INJ	F
MYLOTARG INJ	F
MYOZYME/LUMIZYME INJ	F
NAGLAZYME INJ	F
nelarabine iv soln	F
NEXVIAZYME INJ	F
NIPENT INJ	F
NOVOSEVEN RT INJ	F
NPLATE INJ	F
NUCALA INJ	F
NULIBRY INJ	F
OCREVUS INJ	F
OCTAGAM INJ	F
ONCASPAR INJ	F
ONIVYDE INJ	F
ONPATTRO SOLN	F
OPDIVO INJ	F
OPDUALAG SOLN	F

Symbols and abbreviations are defined on page 1.

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

Drug Name	Tier # for Drug Copay (if prior auth is approved)
ORENCIA INJ	F
OXLUMO INJ	F
PADCEV INJ	F
PANZYGA INJ	F
pemetrexed disodium for iv soln	F
PERJETA INJ	F
POLIVY INJ	F
PORTRAZZA INJ	F
PRIVIGEN INJ	F
PROLIA SOLN	F
REVCovi INJ	F
romidepsin for iv inj	F
ROMIDEPSIN INJ	F
RUCONEST INJ	F
RUXIENCE INJ	F
RYBREVAnt SOLN	F
RYPLAZIM SOLN	F
SANDOSTATIN LAR DEPOT KIT	F
SAPHNELO SOLN	F
SARCLISA SOLN	F
SEVENFACT INJ	F
SIGNIFOR LAR INJ	F
SIMPONI ARIA INJ	F
SKYRIZI SOLN	F
SOLIRIS IV SOLN	F
SOMATULINE INJ	F
SPEVIGO INJ	F
SPINRAZA INJ	F
SPRAVATO SOLN	F
STELARA IV INJ	F
SUSVIMO INJ	F
SYLVANT INJ	F
SYNAGIS INJ	F
SYNRIBO INJ	F
TECENTRIQ INJ	F
TEMODAR IV INJ	F
TEPEZZA INJ	F

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

Drug Name	Tier # for Drug Copay (if prior auth is approved)
TEZSPIRE SOLN	F
THYROGEN INJ	F
TIVDAK INJ	F
TRELSTAR INJ 11.25MG	F
TRELSTAR INJ 22.5MG	F
TRELSTAR INJ 3.75MG	F
treprostinil inj	F
TRIPTODUR SUSP	F
TRODELVY SOLN	F
TRUXIMA INJ	F
TYSABRI INJ	F
ULTOMIRIS INJ	F
UPLIZNA SOLN	F
valrubicin inj	F
VECTIBIX IV SOLN	F
VIMIZIM INJ	F
VISUDYNE INJ	F
VPRIV INJ	F
VYVGART INJ	F
VYXEOS INJ	F
XENPOZYME SOLN	F
XEOMIN INJ	F
XGEVA INJ	F
XOLAIR INJ	F
YERVOY INJ	F
YONDELIS INJ	F
ZALTRAP INJ	F
ZEPZELCA SOLN	F
ZOLADEX INJ	F
ZOLGENSMA INJ	F
ZYNLONTA SOLN	F

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L.A. Care Home Infusion List**Last Updated* 3/1/2023****Quantity Limit (QL)**

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

<u>Quantity Limit (QL) Medications</u>	
Drug Name	Quantity Limit
AMVUTTRA SOLN	QL=1 syringe/90 days
APRETUDE SUSP	QL=7 inj/year
BEOVU INJ	QL= Starting Dose: 1 vial/28 days for first 3 fills; Maintenance Dose: 1 vial/56 days
BRINEURA KIT	QL=4 kits/28 days
CABENUVA SUSP	QL=1 kit/month
FIRMAGON INJ 120MG	QL=2 vials/fill
FIRMAGON INJ 80MG	QL=1 vial/28 days
ILUVIEN IMPLANT	QL=2 inj/36 months
LUXTURN A SUSP	QL=1 kit per eye, per lifetime
OZURDEX IMPLANT	QL=2 inj/180 days
SANDOSTATIN LAR DEPOT KIT	QL=1 kit every 4 weeks
SAPHNELO SOLN	QL=2ml/28 days
SIGNIFOR LAR INJ	QL=1 kit/28 days
SKYRIZI SOLN	QL=1 vial per 28 days with up to 3 fills per 6 months
SOMATULINE INJ	QL=1 syringe/28 days
SPEVIGO INJ	QL=2 vials/fill, 4 vials/month
TEZSPIRE SOLN	QL=1 inj/28 days
TRELSTAR INJ 11.25MG	QL=1 kit/84 days
TRELSTAR INJ 22.5MG	QL=1 kit/168 days
TRELSTAR INJ 3.75MG	QL=1 kit/28 days
TRIESENCE INJ	QL=2 inj/fill
TRIPTODUR SUSP	QL=1 inj every 24 weeks
TROGARZO INJ	Restricted to Infectious Disease Specialist; QL= Loading Dose: 10 vials (13.3ml); Maintenance: 4 vials (5.32 ml) every 14 days
XIPERE INJ	QL=2 inj/fill
YUTIQ IMPLANT	QL=2 inj/36 months

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