

2024

Cov Npe Tshuaj Uas Tau Txais Kev Duav Roos (Tus Qauv Tshuaj)

- UCare's MSHO
- UCare Connect + Medicare

Lus Taw Qhia

Daim ntawv no hu ua *Cov Npe Tshuaj Uas Tau Txais Kev Duav Roos* (tseem hu ua Daim Ntawv Teev Tshuaj). Nws qhia rau koj seb cov tshuaj hauv daim ntawv sau yuav tshuaj thiab cov tshuaj yuav tau tom khw muag tshuaj (OTC) twg tau txais kev duav roos los ntawm UCare's MSHO thiab UCare Connect + Medicare. Daim Ntawv Teev Tshuaj kuj qhia rau koj yog tias muaj cov cai tshwj xeeb los sis kev txwv rau cov tshuaj uas muaj los ntawm MSHO ntawm UCare thiab UCare Connect + Medicare.

Peb cov ntaub ntawv tiv tauj, nrog rau hnuv tim uas peb tau hloov kho Daim Ntawv Teev Npe Tshuaj tshiab, muaj rau ntawm nplooj ntawv qhwv pem hauv ntej thiab sab tom qab. Cov ntsiab lus tseem ceeb thiab lawv cov lus txhais tau tshwm sim hauv tshooj kawg ntawm *Phau Ntawv Qhia Rau Tswv Cuab*.

Tus qauv tshuaj no tau raug hloov pauv rau hnuv 08/20/2024.

Cov Lus Qhia Tseem Ceeb Txog Qhov Uas Koj Them rau Cov Koob Tshuaj Tiv Thaiv Kab Mob – Qee cov koob tshuaj tiv thaiv kab mob yuav muab xam tias yog cov txiaj ntsig kev pab rau fab kev kho mob. Lwm cov tshuaj txhaj tiv thaiv yog suav tias yog cov tshuaj Part D. Peb txoj phiaj xwm duav roos rau cov tshuaj txhaj tiv thaiv kab mob huav Part D feem ntau uas koj yuav tsis tau them dab tsi lawm.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Rau Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaun ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

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Tus Qauv Tshuaj Tus ID 24263, Phaum 16



Toll free 1-800-203-7225, TTY 1-800-688-2534

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ملاحظة: إذا أردت مساعدة مجانية لترجمة هذه الوثيقة، اتصل على الرقم أعلاه.

သတိ။ ဤတွဲရက်စာတမ်းအားအခမဲ့ဘာသာပြန်ပေးခြင်း အကူအညီလိုအပ်ပါက၊ အထက်ပါဖုန်းနံပါတ်ကိုခေါ်ဆိုပါ။

កំណត់សំគាល់ ។ បើអ្នកត្រូវការជំនួយក្នុងការបកប្រែឯកសារនេះដោយឥតគិតថ្លៃ សូមហៅទូរស័ព្ទតាមលេខខាងលើ ។

請注意，如果您需要免費協助傳譯這份文件，請撥打上面的電話號碼。

Attention. Si vous avez besoin d'une aide gratuite pour interpréter le présent document, veuillez appeler au numéro ci-dessus.

Thov ua twb zoo nyeem. Yog hais tias koj xav tau kev pab txhais lus rau tsab ntaub ntauv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

ဟ်သုဉ်ဟ်သးဘဉ်တက့ၢ်. ဝဲနမ့ၢ်လိဉ်ဘဉ်တၢ်မၤစၢၤကလီလၢတၢ်ကကျိးထံဝဲဒဉ်လံာ် တီလံာ်မိတခါအံၤန့ၢ်, ကိးဘဉ်လီၤဝဲစီၣ်ဂံၢ်လၢထးအံၤန့ၢ်တက့ၢ်.

알려드립니다. 이 문서에 대한 이해를 돕기 위해 무료로 제공되는 도움을 받으시려면 위의 전화번호로 연락하십시오.

ໂປຣດຊາບ. ຖ້າຫາກ ທ່ານຕ້ອງການການຊ່ວຍເຫຼືອໃນການແປເອກະສານນີ້ພຣີ, ຈົ່ງໂທໂປຣໂປຣໂຮມາຍເລກຂ້າງເທິງນີ້.

Hubachiisa. Dokumentiin kun tola akka siif hiikamu gargaarsa hoo feete, lakkoobsa gubbatti kenname bilbili.

Внимание: если вам нужна бесплатная помощь в устном переводе данного документа, позвоните по указанному выше телефону.

Digniin. Haddii aad u baahantahay caawimaad lacag-la'aan ah ee tarjumaadda (afcelinta) qoraalkan, lambarka kore wac.

Atención. Si desea recibir asistencia gratuita para interpretar este documento, llame al número indicado arriba.

Chú ý. Nếu quý vị cần được giúp đỡ dịch tài liệu này miễn phí, xin gọi số bên trên.

Civil Rights Notice

Discrimination is against the law. UCare does not discriminate on the basis of any of the following:

- race
- color
- national origin
- creed
- religion
- sexual orientation
- public assistance status
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)
- marital status
- political beliefs
- medical condition
- health status
- receipt of health care services
- claims experience
- medical history
- genetic information

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You can file a complaint and ask for help filing a complaint in person or by mail, phone, fax, or email at:

UCare

Attn: Appeals and Grievances

PO Box 52

Minneapolis, MN 55440-0052

Toll Free: 1-800-203-7225

TTY: 1-800-688-2534

Fax: 612-884-2021

Email: cag@ucare.org

Auxiliary Aids and Services: UCare provides auxiliary aids and services, like qualified interpreters or information in accessible formats, free of charge and in a timely manner to ensure an equal opportunity to participate in our health care programs. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Language Assistance Services: UCare provides translated documents and spoken language interpreting, free of charge and in a timely manner, when language assistance services are necessary to ensure limited English speakers have meaningful access to our information and services. **Contact** UCare at 612-676-3200 (voice) or 1-800-203-7225 (voice), 612-676-6810 (TTY), or 1-800-688-2534 (TTY).

Civil Rights Complaints

You have the right to file a discrimination complaint if you believe you were treated in a discriminatory way by UCare. You may also contact any of the following agencies directly to file a discrimination complaint.

U.S. Department of Health and Human Services Office for Civil Rights (OCR)

You have the right to file a complaint with the OCR, a federal agency, if you believe you have been discriminated against because of any of the following:

- race
- color
- national origin
- age
- disability
- sex
- religion (in some cases)

Contact the OCR directly to file a complaint:

Office for Civil Rights
U.S. Department of Health and Human Services
Midwest Region
233 N. Michigan Avenue, Suite 240
Chicago, IL 60601
Customer Response Center: Toll-free: 800-368-1019
TDD Toll-free: 800-537-7697
Email: ocrmail@hhs.gov

Minnesota Department of Human Rights (MDHR)

In Minnesota, you have the right to file a complaint with the MDHR if you have been discriminated against because of any of the following:

- race
- color
- national origin
- religion
- creed
- sex
- sexual orientation
- marital status
- public assistance status
- disability

Contact the **MDHR** directly to file a complaint:

Minnesota Department of Human Rights
540 Fairview Avenue North, Suite 201
St. Paul, MN 55104
651-539-1100 (voice)
800-657-3704 (toll-free)
711 or 800-627-3529 (MN Relay)
651-296-9042 (fax)
Info.MDHR@state.mn.us (email)

Minnesota Department of Human Services (DHS)

You have the right to file a complaint with DHS if you believe you have been discriminated against in our health care programs because of any of the following:

- race
- color
- national origin
- religion (in some cases)
- age
- disability (including physical or mental impairment)
- sex (including sex stereotypes and gender identity)

Complaints must be in writing and filed within 180 days of the date you discovered the alleged discrimination. The complaint must contain your name and address and describe the discrimination you are complaining about. We will review it and notify you in writing about whether we have authority to investigate. If we do, we will investigate the complaint.

DHS will notify you in writing of the investigation's outcome. You have the right to appeal if you disagree with the decision. To appeal, you must send a written request to have DHS review the investigation outcome. Be brief and state why you disagree with the decision. Include additional information you think is important.

If you file a complaint in this way, the people who work for the agency named in the complaint cannot retaliate against you. This means they cannot punish you in any way for filing a complaint. Filing a complaint in this way does not stop you from seeking out other legal or administrative actions.

Contact **DHS** directly to file a discrimination complaint:

Civil Rights Coordinator

Minnesota Department of Human Services

Equal Opportunity and Access Division

P.O. Box 64997

St. Paul, MN 55164-0997

651-431-3040 (voice) or use your preferred relay service

American Indians can continue or begin to use tribal and Indian Health Services (IHS) clinics. We will not require prior approval or impose any conditions for you to get services at these clinics. For elders age 65 years and older this includes Elderly Waiver (EW) services accessed through the tribe. If a doctor or other provider in a tribal or IHS clinic refers you to a provider in our network, we will not require you to go to your primary care provider prior to the referral.

Multi-Language Insert Multi-language Interpreter Services

English: We have free interpreter services to answer any questions you may have about our health or drug plan. To get an interpreter, just call us at **612-676-3200/1-800-203-7225**. Someone who speaks English/Language can help you. This is a free service.

Spanish: Tenemos servicios de intérprete sin costo alguno para responder cualquier pregunta que pueda tener sobre nuestro plan de salud o medicamentos. Para hablar con un intérprete, por favor llame al **612-676-3200/1-800-203-7225**. Alguien que hable español le podrá ayudar. Este es un servicio gratuito.

Chinese Mandarin: 我们提供免费的翻译服务，帮助您解答关于健康或药物保险的任何疑问。如果您需要此翻译服务，请致电 **612-676-3200/1-800-203-7225**。我们的中文工作人员很乐意帮助您。这是一项免费服务。

Chinese Cantonese: 您對我們的健康或藥物保險可能存有疑問，為此我們提供免費的翻譯服務。如需翻譯服務，請致電 **612-676-3200/1-800-203-7225**。我們講中文的人員將樂意為您提供幫助。這是一項免費服務。

Tagalog: Mayroon kaming libreng serbisyo sa pagsasalang-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasalang-wika, tawagan lamang kami sa **612-676-3200/1-800-203-7225**. Maaari kayong tulungan ng isang nakakapagsalita ng Tagalog. Ito ay libreng serbisyo.

French: Nous proposons des services gratuits d'interprétation pour répondre à toutes vos questions relatives à notre régime de santé ou d'assurance-médicaments. Pour accéder au service d'interprétation, il vous suffit de nous appeler au **612-676-3200/1-800-203-7225**. Un interlocuteur parlant Français pourra vous aider. Ce service est gratuit.

Vietnamese: Chúng tôi có dịch vụ thông dịch miễn phí để trả lời các câu hỏi về chương sức khỏe và chương trình thuốc men. Nếu quý vị cần thông dịch viên xin gọi **612-676-3200/1-800-203-7225** sẽ có nhân viên nói tiếng Việt giúp đỡ quý vị. Đây là dịch vụ miễn phí.

German: Unser kostenloser Dolmetscherservice beantwortet Ihren Fragen zu unserem Gesundheits- und Arzneimittelplan. Unsere Dolmetscher erreichen Sie unter **612-676-3200/1-800-203-7225**. Man wird Ihnen dort auf Deutsch weiterhelfen. Dieser Service ist kostenlos.

Korean: 당사는 의료 보험 또는 약품 보험에 관한 질문에 대해 드리고자 무료 통역 서비스를 제공하고 있습니다. 통역 서비스를 이용하려면 전화 **612-676-3200/1-800-203-7225** 번으로 문의해 주십시오. 한국어를 하는 담당자가 도와 드릴 것입니다. 이 서비스는 무료로 운영됩니다.

Russian: Если у вас возникнут вопросы относительно страхового или медикаментного плана, вы можете воспользоваться нашими бесплатными услугами переводчиков. Чтобы воспользоваться услугами переводчика, позвоните нам по телефону **612-676-3200/1-800-203-7225**. Вам окажет помощь сотрудник, который говорит по-русски. Данная услуга бесплатная.

Arabic: إننا نقدم خدمات المترجم الفوري المجانية للإجابة عن أي أسئلة تتعلق بالصحة أو جدول الأدوية لدينا. للحصول على مترجم فوري، ليس عليك سوى الاتصال بنا على **612-676-3200/1-800-203-7225**. سيقوم شخص ما يتحدث العربية بمساعدتك. هذه خدمة مجانية.

Hindi: हमारे स्वास्थ्य या दवा की योजना के बारे में आपके किसी भी प्रश्न के जवाब देने के लिए हमारे पास मुफ्त दुभाषिया सेवाएँ उपलब्ध हैं। एक दुभाषिया प्राप्त करने के लिए, बस हमें **612-676-3200/1-800-203-7225** र फोन करें। कोई व्यक्ति जो हिन्दी बोलता है आपकी मदद कर सकता है। यह एक मुफ्त सेवा है।

Italian: È disponibile un servizio di interpretariato gratuito per rispondere a eventuali domande sul nostro piano sanitario e farmaceutico. Per un interprete, contattare il numero **612-676-3200/1-800-203-7225**. Un nostro incaricato che parla Italianovi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Dispomos de serviços de interpretação gratuitos para responder a qualquer questão que tenha acerca do nosso plano de saúde ou de medicação. Para obter um intérprete, contacte-nos através do número **612-676-3200/1-800-203-7225**. Irá encontrar alguém que fale o idioma Português para o ajudar. Este serviço é gratuito.

French Creole: Nou genyen sèvis entèprèt gratis pou reponn tout kesyon ou ta genyen konsènan plan medikal oswa dwòg nou an. Pou jwenn yon entèprèt, jis rele nou nan **612-676-3200/1-800-203-7225**. Yon moun ki pale Kreyòl kapab ede w. Sa a se yon sèvis ki gratis.

Polish: Umożliwiamy bezpłatne skorzystanie z usług tłumacza ustnego, który pomoże w uzyskaniu odpowiedzi na temat planu zdrowotnego lub dawkowania leków. Aby skorzystać z pomocy tłumacza znającego język polski, należy zadzwonić pod numer **612-676-3200/1-800-203-7225**. Ta usługa jest bezpłatna.

Japanese: 当社の健康 健康保険と薬品 処方薬プランに関するご質問にお答えするために、無料の通訳サービスがあります。通訳をご用命になるには、**612-676-3200/1-800-203-7225** にお電話ください。日本語を話す人 者が支援いたします。これは無料のサービスです。

Daim Ntawv Teev Cov Ntsiab Lus

- A. Cov kev txwv rau lub luag hauj lwm..... 10
- B. Cov Lus Nug Uas Nquag Nug (FAQ)..... 10
 - B1. Cov tshuaj hauv daim ntawv sau yuav tshuaj twg nyob tau hauv *Cov Npe Tshuaj Uas Tau Txais Kev Duav Roos?* (Peb hu tias yog *Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos "Daim Ntawv Teev Tshuaj"* hais luv-luv)..... 10
 - B2. Daim Ntawv Teev Tshuaj puas muaj kev hloov pauv li? 11
 - B3. Yuav ua li cas thaum muaj kev hloov pauv rau Daim Ntawv Teev Tshuaj??..... 12
 - B4. Puas muaj cov kev txwv los sis txwv tsis pub muaj kev duav roos tshuaj twg los sis puas yuav tau ua kev nqis tes ua ib qho twg kom thiaj li tau qee cov tshuaj? 13
 - B5. Kuv yuav paub tau li cas tias cov tshuaj uas kuv xav tau muaj kev txwv los sis yog tias yuav tsum tau muaj qee yam yuav tsum tau ua kom tau txais cov tshuaj?..... 14
 - B6. Yuav ua li cas yog tias UCare's MSHO thiab UCare Connect + Medicare hloov pauv lawv cov cai hais txog qhov lawv duav roos qee cov tshuaj li cas ntawd (piv xam li, kev tso cai ua ntej, cov kev txwv tsis muab tshuaj ntau, thiab/los sis cov kev txwv txog cov kev kho mob raws kauj ruam)? 14
 - B7. Kuv yuav nrhiav tau tshuaj li cas hauv Daim Ntawv Teev Tshuaj? 14
 - B8. Yuav ua li cas yog tias cov tshuaj uas kuv xav noj tsis nyob rau hauv Daim Ntawv Teev Tshuaj?..... 14
 - B9. Yuav ua li cas yog kuv yog ib tug tswv cuab tshiab ntawm UCare's MSHO los sis UCare Connect + Medicare thiab nrhiav tsis tau kuv cov tshuaj nyob rau hauv Daim Ntawv Teev Tshuaj los sis muaj teeb meem kev txais kuv cov tshuaj?..... 15
 - B10. Kuv thov kom muaj kev zam los duav roos kuv cov tshuaj puas tau?..... 16
 - B11. Kuv yuav thov kev zam tau li cas?..... 16
 - B12. Nws siv sij hawm ntev npaum li cas thiaj tau txais qhov kev zam?..... 16
 - B13. Cov tshuaj yuav tau tom tej khw yog dab tsi? 17
 - B14. Cov tshuaj uas nyob saum lub txee muag khoom (over-the counter, OTC) yog dab tsi?..... 17
 - B15. UCare's MSHO thiab UCare Connect + Medicare puas duav roos cov khoom lag luam uas tsis yog tshuaj OTC? 17

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm **ucare.org**.

Daim Ntawv Teev Cov Ntsiab Lus

B16. UCare's MSHO thiab UCare Connect + Medicare puas duav roos cov khoom siv kho mob ncuaj sij hawm ntawv ntawm daim ntawv sau yuav tshuaj?	17
B17. Kuv thov kom muab cov tshuaj sau hauv daim ntawv yuav tshuaj xa tuaj rau kuv tom tsev los ntawm kuv lub khw hauv cheeb tsam puas tau?.....	17
B18. Kuv tus nqi sib koom them yog dab tsi?.....	18
C. Txheej Txheem Cej Luam ntawm Cov Npe Tshuaj Uas Tau Txais Kev Duav Roos	18
C1. Daim Ntawv Teev Tshuaj raws Cov Hom Tshuaj	19
D. Daim Phiaj Qhia Cov Tshuaj Uas Tau Txais Kev Duav Roos	236

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm **ucare.org**.

A. Cov kev txwv rau lub luag hauj lwm

Nov yog cov npe tshuaj uas cov tswv cuab tuaj yeem tau txais hauv UCare's MSHO thiab UCare Connect + Medicare.

- UCare's MSHO thiab UCare Connect + Medicare yog cov phiaj xwm duav roos kev noj qab haus huv uas muaj ntawv cog lus nrog tag nrho Medicare thiab Minnesota lub khoos kas Pab Rau Fab Kev Kho Mob (Medicaid) los muab cov txiaj ntsig kev pab rau tag nrho ob lub khoos kas rau cov neeg tuaj tso npe. Kev tso npe nyob rau UCare's MSHO thiab UCare Connect + Medicare yuav saib raws li kev rov tsim daim ntawv cog lus dua tshiab.
- *Daim Npe Tshuaj Uas Tau Txais Kev Duav Roos* thiab/los sis khw muag tshuaj thiab pab pawg koom tes ntawm kws muab kev pab cuam kho mob yuav hloov pauv thoob plaws lub xyoo li.
- Cov txiaj ntsig kev pab thiab/los sis cov nqi sib koom them yuav hloov pauv hauv Lub Ib Hlis Ntuj Tim 1 ntawm txhua xyoo.
- Koj yeej yuav kuaj tau txog UCare's MSHO los sis UCare Connect + Medicare *Daim Npe Tshuaj Uas Tau Txais Kev Duav Roos* hloov kho tshiab hauv online ntawm ucare.org los sis hu rau Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm tus naj npawb teev muaj nyob hauv qab kawg ntawm phab ntawv no.
- Koj tuaj yeem tau txais cov ntaub ntawv no dawb hauv lwm hom ntawv, xws li cov ntawv loj, ntawv su, los sis suab. Hu rau Lub Chaw Pab Cuam Cov Neeg Siv Khoom ntawm tus naj npawb teev nyob hauv qab ntawm nplooj ntawv no.
- Txhawm rau tsim los sis hloov daim ntawv thov kom tau txais daim ntawv no, tam sim no thiab yav tom ntej, ua hom lus uas tsis yog lus As Kiv los sis lwm hom ntawv, hu rau Feem Pab Cuam Rau Tus Neeg Siv Khoom ntawm tus naj npawb hauv qab ntawm nplooj ntawv no.

B. Cov Lus Nug Uas Nquag Nug (FAQ)

Nrhiav cov lus teb ntawm no rau cov lus nug uas nquag nug uas koj muaj txog *Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos* no. Koj tuaj yeem nyeem tag nrho cov lus nug uas nquag nug (FAQ) kom paub ntau ntiv los sis nrhiav cov lus nug thiab lus teb.

B1. Cov tshuaj hauv daim ntawv sau yuav tshuaj twg nyob hauv *Daim Npe Tshuaj Uas Tau Txais Kev Duav Roos*? (Peb hu tias yog *Daim Npe Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos* ua "Daim Ntawv Teev Tshuaj" hu luv-luv)

Cov tshuaj hauv *Daim Npe Tshuaj Uas Tau Txais Kev Duav Roos* uas pib nyob hauv Nqe C yog cov tshuaj uas tau txais kev duav roos los ntawm UCare's MSHO thiab UCare Connect + Medicare. Cov tshuaj muaj nyob rau ntawm cov khw muag tshuaj hauv peb pab pawg koom tes. Lub chaw muag tshuaj nyob hauv peb qhov kev koom tes yog tias peb muaj kev pom zoo nrog lawv ua hauj lwm nrog peb thiab cov kev pab cuam uas tus neeg muab kev pab cuam rau koj. Peb hu cov khw muag tshuaj no ua "cov chaw muag tshuaj hauv pab pawg koom tes." Cov tshuaj raws daim ntawv sau yuav tshuaj uas muaj nyob rau hauv *Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos* no tau txais kev duav roos los ntawm UCare's MSHO thiab UCare Connect + Medicare.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm ucare.org.

- UCare's MSHO thiab UCare Connect + Medicare yuav duav roos tag nrho cov tshuaj uas tsim nyog siv rau fab kev kho mob hauv Daim Ntawv Teev Tshuaj yog tias:
 - koj tus kws kho mob los sis lwm tus kws sau tshuaj hais tias koj yuav tsum tau muaj cov tshuaj no kom thiaj li zoo tuaj los sis nyob tau yam noj qab haus huv,
 - UCare's MSHO thiab UCare Connect + Medicare pom zoo tias hom tshuaj yeej tsim nyog siv rau fab kev kho mob rau koj lawm, **thiab**
 - koj sau daim ntawv xaj tshuaj tau ntawm UCare's MSHO thiab UCare Connect + Medicare lub khw muag tshuaj hauv pab pawg koom tes.
- Qee zaum, koj yuav tsum tau ua qee yam ua ntej koj thiaj tuaj yeem tau txais tshuaj. Mus saib hauv nqe lus nug B4 kom paub ntau ntxiv.

Tsis tas li ntawd, koj kuj yuav nrhiav tau daim ntawv teev tshuaj hloov kho tshiab lawm uas peb duav roos hauv peb lub vev xaib ntawm [ucare.org](https://www.ucare.org) los sis hu rau Cov Chaw Muab Kev Pab Cuam Tus Qhua ntawm tus naj npawb uas teev muaj nyob hauv qab kawm ntawm phab ntawv no.

B2. Daim Ntawv Teev Tshuaj puas hloov pauv li?

Yog lawm, thiab MSHO thiab UCare Connect + Medicare Ntawm UCare yuav tsum ua raws li Medicare thiab Medical Assistance cov cai thaum hloov pauv. Peb tuaj yeem ntxiv los sis tshem tawm cov tshuaj hauv Daim Ntawv Teev Tshuaj nyob rau lub xyoo.

Peb kuj tseem tuaj yeem hloov peb cov cai hais txog tshuaj. Piv txwv li, peb tuaj yeem:

- Txiaiv txim siab seb puas xav tau los sis tsis xav tau kev tso cai ua ntej rau hom tshuaj. (Kev tso cai ua ntej yog kev tso cai los ntawm UCare's MSHO los sis UCare Connect + Medicare ua ntej koj tuaj yeem tau txais cov tshuaj.)
- Ntxiv los sis hloov cov tshuaj uas koj tuaj yeem tau txais (hu ua txwv qhov ntau.)
- Ntxiv los sis hloov cov kev txwv kauj ruam kho mob ntawm cov tshuaj. (Qhov kauj ruam kho mob txhais tau tias koj yuav tsum sim ib yam tshuaj ua ntej peb yuav them rau lwm yam tshuaj.)

Yog xav paub ntxiv txog cov cai siv tshuaj no, mus saib nqe lus nug B4.

Yog tias koj noj cov tshuaj uas tau txais kev duav roos puag thaum **pib** ntawm lub xyoo lawm, feem ntau peb yuav tsis tshem tawm los sis hloov pauv kev duav roos ntawm hom tshuaj ntawd rau ncuaj sij hawm uas tseem tshuav hauv lub xyoo tshwj tsis yog tias:

- ib qho tshuaj tshiab, pheej yig dua los ntawm kev ua lag luam uas ua hauj lwm zoo ib yam li cov tshuaj hauv Daim Ntawv Teev Tshuaj tam sim no, **los sis**
- peb paub tias hom tshuaj tsis muaj kev nyab xeeb, **los sis**

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

- ib qho tshuaj raug tshem tawm ntawm lub khw.

Nqe lus nug B3 thiab B6 hauv qab no muaj cov ntaub ntawv ntxiv txog yam uas tshwm sim thaum Daim Ntawv Teev Npe Tshuaj hloov pauv.

- Koj tuaj yeem tshawb xyuas UCare's MSHO thiab UCare Connect + Medicare's Daim Ntawv Teev Tshuaj uas hloov kho tshiab lawm hauv online ntawm [ucare.org](https://www.ucare.org).
- Koj tseem tuaj yeem hu rau Lub Chaw Muab Kev Pab Cuam Cov Neeg Siv Khoom ntawm tus naj npawb teev nyob hauv qab ntawm nplooj ntawv no txhawm rau txheeb xyuas Cov Npe Teev Tshuaj tam sim no.

B3. Yuav ua li cas thaum muaj kev hloov pauv rau Daim Ntawv Teev Tshuaj?

Qee qhov kev hloov pauv rau Daim Ntawv Teev Tshuaj yuav tshwm sim tam sim ntawd. Piv txwv li:

- **Yuav pib muaj hom tshuaj uas yuav tau nthuav dav tshiab.** Qee lub sij hawm, cov tshuaj yuav tau nthuav dav tshiab nyob hauv kiab khw uas yeej siv tau ua ke nrog hom tshuaj uas muaj npe lag luam hauv Daim Ntawv Teev Tshuaj tam sim no. Thaum qhov ntawd tshwm sim, peb tuaj yeem tshem tawm cov tshuaj npe tshuaj thiab ntxiv cov yam tshuaj, tab sis koj tus nqi rau cov tshuaj tshiab yuav nyob li qub los sis yuav qis dua. Thaum peb ntxiv cov tshuaj feem dav tshiab, peb kuj tseem yuav txiav txim siab khaws cov tshuaj npe tshuaj rau hauv daim ntawv tab sis hloov nws cov cai los sis txwv.
- **Hom tshuaj raug tshem tawm ntawm kiab khw.** Yog tias Lub Chaw Tswj Xyuas Khoom Noj thiab Tshuaj (FDA) hais tias hom tshuaj uas koj tab tom noj tsis muaj kev nyab xeeb los sis hom tshuaj lub chaw tsim tshuaj muab hom tshuaj tawm hauv lub kiab khw lawm, peb yuav muab nws tawm ntawm Daim Ntawv Teev Tshuaj. Yog tias koj noj tshuaj, peb yuav qhia rau koj paub. Cov tswv cuab yuav tsum tiv tauj rau lawv tus kws kho mob los sis lub chaw muag tshuaj kom paub ntxiv.

Tej zaum peb yuav muaj lwm cov kev hloov pauv uas yuav cuam tshuaj rau cov tshuaj uas koj noj. Peb yuav qhia koj ua ntej txog cov kev hloov pauv no rau Daim Ntawv Teev Tshuaj. Tej zaum yuav muaj cov kev hloov pauv no yog tias"

- FDA muab cov lus qhia tshiab los sis muaj cov lus taw qhia fab kev kho mob tshiab hais txog hom tshuaj.
- Peb ntxiv hom tshuaj yuav tau nthuav dav uas tsis yog hom tshiab rau hauv lub kiab khw **thiab**
 - Hloov lub npe tshuaj tam sim no nyob rau hauv Daim Ntawv Teev Tshuaj **los sis**
 - Hloov pauv cov cai los sis cov kev txwv txog kev duav roos rau hom tshuaj uas muaj npe lag luam.

Thaum cov kev hloov no tshwm sim, peb yuav

- Qhia rau koj tsawg kawg 30 hnuv ua ntej peb hloov pauv rau Daim Ntawv Teev Tshuaj **los sis**
- Qhia rau koj paub thiab muab tshuaj rau koj kom siv tau ntev txog 30-hnuv tom qab koj thov ntxiv tshuaj.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

Qhov no yuav muab sij hawm rau koj mus tham nrog koj tus kws kho mob los sis lwm tus kws sau tshuaj. Lawv tuaj yeem pab koj txiav txim siab:

- Yog tias muaj ib yam tshuaj zoo sib xws hauv Daim Ntawv Teev Tshuaj koj tuaj yeem siv tau los sis
- Seb puas yuav thov kom muaj kev zam los ntawm cov kev hloov pauv no. Yog xav kawm paub ntxiv txog kev zam, qhia mus rau cov nqe lus nug B10-B12.

B4. Puas muaj kev txwv los sis txwv tsis pub siv tshuaj los sis lwm yam yuav tsum tau ua kom tau txais qee yam tshuaj?

Muaj, qee cov tshuaj muaj cov cai tswj hwm los sis muaj kev txwv ntawm tus nqi koj tuaj yeem tau txais. Qee zaum koj los sis koj tus kws kho mob los sis lwm tus kws muab tshuaj yuav tsum ua qee yam ua ntej koj thiaj tuaj yeem tau txais tshuaj. Piv txwv li:

- **Kev Tso Cai Ua Ntej:** Rau qee yam tshuaj, koj los sis koj tus kws kho mob, los sis lwm tus kws muab tshuaj yuav tsum tau txais kev tso cai los ntawm UCare's MSHO los sis UCare Connect + Medicare ua ntej koj xaj koj cov tshuaj tau. Kev tso cai ua ntej sib txawv daim ntawv xa mus kho mob. UCare's MSHO thiab UCare Connect + Medicare yuav tsis duav roos cov tshuaj yog tias koj tsis tau txais kev tso cai ua ntej.
- **Kev Txwv Kev Muab Tshuaj Ntau:** Qee zaum UCare's MSHO thiab UCare UCare Connect + Medicare txwv cov tshuaj uas koj tuaj yeem tau txais tsis pub muab ntau.
- **Kev Kho Raws Kauj Ruam:** Qee zaum UCare's MSHO thiab UCare Connect + Medicare xav kom koj ua kev kho raws cov kauj ruam. Qhov no txhais tau tias koj yuav tau sim tshuaj mus raws them zuj zus rau koj qhov zwj ceeb mob. Tej zaum koj yuav tau sim ib yam tshuaj ua ntej peb yuav them rau lwm yam tshuaj. Yog tias koj tus kws kho mob xav tias thawj hom tshuaj siv tsis tau rau koj, ces peb yuav duav roos hom thib ob.
- **Kev duav roos uas saib raws li kev qhia paub:** Yog tias UCare's MSHO thiab UCare Connect + Medicare duav roos hom tshuaj uas siv rau qee cov zwj ceeb mob nkaus xwb, ces peb yuav txheeb xyuas kom mee txog Daim Ntawv Teev Tshuaj ua ke nrog cov zwj ceeb mob tshwj xeeb uas tau txais kev duav roos.

Koj tuaj yeem nrhiav kom paub seb koj hom tshuaj puas muaj cai dab tsi los sis cov kev txwv dab tsi ntxiv los ntawm kev saib hauv kem ntawv qhia hauv Tshooj C1. Koj kuj tuaj yeem tau txais ntaub ntawv qhia paub ntau ntxiv los ntawm kev nkag mus saib hauv peb lub vev xaib ntawm ucare.org. Peb tau tshaj tawm cov ntaub ntawv online uas piav qhia txog peb qhov kev tso cai ua ntej thiab kev txwv txog kev kho mob raws kauj ruam. Koj kuj yuav thov kom peb xa ib daim ntawv theej tuaj rau koj tau.

Koj tuaj yeem thov kom tau kev zam tsis pub muaj cov kev txwv no tau. Qhov no yuav muab sij hawm rau koj mus tham nrog koj tus kws kho mob los sis lwm tus kws muab tshuaj. Lawv tuaj yeem pab koj txiav txim siab seb puas muaj hom tshuaj uas zoo sib xws ntawd nyob hauv Daim Ntawv Teev Tshuaj uas koj yuav noj tau los pauv rau los sis seb puas yuav thov txog kev zam ntawd. Thov qhia mus rau cov nqe lus nug B10-B12 kom paub ntau ntxiv txog kev zam.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm ucare.org.

B5. Kuv yuav paub tau li cas tias cov tshuaj uas kuv xav tau muaj kev txwv los sis yog tias muaj qee yam yuav tsum tau ua kom tau txais cov tshuaj?

Kem ntawv qhia hauv Daim Ntawv Npe Tshuaj raws Tus Zwj Ceeb Mob hauv tshooj C1 muaj ib kem muaj npe tias "Cov kev nqis tes ua uas tsim nyog, cov kev txwv, los sis cov kev txwv tsis pub muab siv ntau."

B6. Yuav muaj dab tsi tshwm sim yog tias MSHO thiab UCare Connect + Medicare ntawm UCare hloov lawv cov cai hais txog lawv txoj hauv kev duav roos qee yam tshuaj (piv txwv li, kev tso cai ua ntej, txwv qhov ntau tsawg, thiab/los sis cov kev txwv kev kho raws cov kauj ruam)?

Qee qhov xwm txheej, peb yuav qhia rau koj ua ntej yog tias peb ntxiv lossis hloov pauv kev tso cai ua ntej, txwv qhov ntau, thiab/los sis cov kev txwv rau cov kauj ruam kev kho mob rau cov tshuaj. Mus saib rau npe lus nug B3 kom paub ntau ntxiv hais txog daim ntawv ceeb toom ua ntej no thiab cov xwm txheej uas peb yuav tsis muaj peev xwm yuav qhia rau koj tau ua ntej txog thaum peb cov cai hais txog cov tshuaj hauv Daim Ntawv Teev Tshuaj yuav hloov pauv.

B7. Kuv yuav nrhiav hom tshuaj hauv Daim Ntawv Teev Tshuaj tau li cas?

Muaj ob txoj hau kev los nrhiav tshuaj:

- Koj yuav nrhiav tau raws li cov tsiaj ntawv, *los sis*
- Koj tuaj yeem tshawb nrhiav tau raws hom tshuaj

Yog xav tshawb nrhiav raws tus tsiaj ntawv, mus saib hauv tshooj hais tias Daim Ntawv Qhia Txog Cov Tshuaj Uas Tau Txais Kev Duav Roos. Koj pom nws tau ntawm nplooj ntawv 236. Daim Ntawv Qhia txog Cov Tshuaj Uas Tau Txais Kev Duav Roos nyob hauv daim ntawv teev npe raws tus tsiaj ntawv ntawm tag nrho cov tshuaj uas muaj nyob hauv Daim Ntawv Teev Tshuaj. Cov tshuaj muaj npe hom tshuaj thiab cov tshuaj muaj muag tom tej khw nyob rau hauv Daim Phiaj Qhia.

Txhawm rau tshawb nrhiav raws hom tshuaj, nrhiav tshooj uas muaj npe tias "Daim Ntawv Teev Tshuaj raws Hom Tshuaj" hauv Tshooj C1. Cov tshuaj hauv tshooj no yuav raug muab tso ua pawg mus ua pab pawg raws hom. Piv txwv li, yog tias koj noj tshuaj kho mob taub hau migraines, koj yuav tsum saib hauv qeb "Tshuaj Tiv Thaiv Mob Taub Hau Migraines". Qhov ntawd yog qhov uas koj yuav nrhiav tau cov tshuaj uas kho mob tau hau migraines.

B8. Yuav ua li cas yog tias hom tshuaj uas kuv xav noj tsis muaj nyob hauv Daim Ntawv Teev Tshuaj?

Yog tias koj nrhiav tsis tau koj hom tshuaj hauv Daim Ntawv Teev Tshuaj, ces hu rau Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm tus naj npawb uas teev tseg rau hauv qab kawg ntawm phab ntawv no thiab nug txog hom tshuaj ntawd. Yog tias koj paub tias UCare's MSHO thiab UCare Connect + Medicare yuav tsis duav roos hom tshuaj, koj tuaj yeem ua ib qho ntawm cov yam no:

- Nug Lub Chaw Pab Cuam Cov Neeg Siv Khoom rau cov npe tshuaj zoo li qhov koj xav noj. Tom qab ntawd qhia cov npe rau koj tus kws kho mob los sis lwm tus kws muab tshuaj. Lawv tuaj yeem sau yuav hom tshuaj hauv Daim Ntawv Teev Npe Tshuaj uas siv tau zoo ib yam hom uas koj xav noj ntawd tau.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm ucare.org.

los sis

- Koj tuaj yeem nug MSHO thiab UCare Connect + Medicare ntawm UCare kom muaj kev zam los duav roos koj cov tshuaj. Mus saib rau nqe lus nug B10–B12 kom paub ntau ntxiv hais txog cov kev zam.

B9. Yuav ua li cas yog tias kuv yog ib tug tswv cuab tshiab hauv UCare's MSHO los sis UCare Connect + Medicare thiab nrhiav tsis tau kuv hom tshuaj hauv Daim Ntawv Teev Tshuaj los sis muaj teeb meem txog kev tau txais kuv qhov tshuaj?

Peb tuaj yeem pab tau. Peb yuav duav roos koj cov tshuaj kom siv tau li 30-hnub ib nyuag ntu hauv lub sij hawm thawj 90 hnub uas koj ua tus tswv cuab ntawm UCare's MSHO los sis UCare Connect + Medicare. Qhov no yuav muab sij hawm rau koj mus tham nrog koj tus kws kho mob los sis lwm tus kws sau tshuaj. Lawv tuaj yeem pab koj txiav txim siab seb puas muaj hom tshuaj uas zoo sib xws ntawd nyob hauv Daim Ntawv Teev Tshuaj uas koj yuav noj tau los pauv rau los sis seb puas yuav thov txog kev zam ntawd.

Yog tias twb tau sau koj daim ntawv sau yuav tshuaj tau ob peb hnub lawm, peb yuav tso cai kom muab tshuaj tau ntau qhov los muab cov tshuaj kom siv tau siab kawg nkaus 30 hnub.

Peb yuav tuav pov rau 30-hnub muab koj cov tshuaj yog tias:

- koj tab tom noj tshuaj uas tsis nyob hauv peb Daim Ntawv Teev Tshuaj, *los sis*
- peb cov cai ntawm txoj phiaj xwm tsis pub kom koj tau txais cov nyiaj uas tau xaj los ntawm koj tus kws muab tshuaj, *los sis*
- cov tshuaj uas xav tau kev tso cai ua ntej los ntawm UCare's MSHO los sis UCare Connect + Medicare,

los sis

- koj tab tom noj tshuaj uas yog ib feem ntawm kev txwv hauv kev kho mob raws kauj ruam

Yog tias koj nyob hauv tsev laus los sis lwm qhov chaw saib xyuas mus sij hawm ntev thiab xav tau cov tshuaj uas tsis nyob hauv Daim Ntawv Teev Tshuaj los sis yog tias koj tsis tuaj yeem tau txais cov tshuaj uas koj xav tau yooj yim, peb tuaj yeem pab. Yog tias koj tau nyob rau hauv txoj kev npaj rau ntau tshaj 90 hnub, nyob hauv ib lub chaw tu neeg mus ntev thiab xav tau kev pab tam sim ntawd:

- Peb yuav duav roos ib qhov tshuaj uas koj xav tau ntev txog 31-hnub (tshwj tsis yog tias koj muaj ntawv sau yuav tshuaj li ob peb hnub lawm xwb), txawm tias koj yuav yog tus tswv cuab tshiab hauv UCare's MSHO los sis UCare Connect + Medicare los sis tsis yog los xij.
- Qhov no yog qhov kev ntxiv rau qhov kev muab tshuaj kom siv tau ib nyuag ntu hauv ncuaj sij hawm thawj 90 hnub uas koj nkag los ua ib tug tswv cuab ntawm UCare's MSHO los sis UCare Connect + Medicare lawm.

Yog tias koj yog tus tswv cuab tam sim no uas hloov pauv mus rau theem kev saib xyuas sib txawv, tej zaum koj yuav tau txais kev sau yuav cov tshuaj uas tsis nyob hauv peb tus qauv tshuaj tau. Thaum koj tab tom tham nrog koj tus kws kho mob kom txiav txim siab koj qhov kev ua, koj tsim nyog tau txais kev muab tshuaj rau kev hloov pauv ntev txog 31-hnub txij thaum uas koj tab tom

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnub hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

yuav hloov pauv mus rau theem kev saib xyuas sib txawv ntawd. Yog tias koj yog ib tug tswv cuab tam sim no, tau txais nkag kho mob los sis tawm los ntawm lub chaw tu neeg mus sij hawm ntev, koj yuav tau txais kev tso cai kev ntxiv tshuaj tshooj kiag uas xav tau sai los ua kom paub meej tias koj muaj kev nkag cuag tau rau kev muab koj cov tshuaj tau txaus.

B10. Kuv puas tuaj yeem thov kom muaj kev zam los tuav pov kuv cov tshuaj?

Yog. Koj tuaj yeem thov kom UCare's MSHO los sis UCare Connect + Medicare los ua kev zam los duav roos hom tshuaj uas tsis muaj nyob hauv Daim Ntawv Teev Tshuaj tau.

Koj tseem tuaj yeem hais kom peb hloov cov cai ntawm koj cov tshuaj.

- Piv xam li, UCare's MSHO los sis UCare Connect + Medicare yuav txwv tsis muab cov tshuaj uas peb yuav duav roos ntawd rau koj ntau. Yog tias koj cov tshuaj muaj qhov txwv, koj tuaj yeem hais kom peb hloov qhov txwv thiab tuav pov ntau dua.
- Lwm cov piv txwv: Koj tuaj yeem hais kom peb tso tseg kev txwv cov kauj ruam kev kho mob los sis cov tseev kom muaj kev tso cai ua ntej

B11. Kuv tuaj yeem thov kom muajkev zam li cas?

Txhawm rau thov txog kev zam, hu rau UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb), TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu tau dawb), 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Ib tus neeg sawv cev rau Lub Chaw Pab Cuam Cov Neeg Siv Khoom yuav ua hauj lwm nrog koj thiab koj tus kws kho mob los pab koj thov kom muaj kev zam. Tsis tas li ntawd, koj kuj tuaj yeem nyeem hauv Tshooj 9 ntawm *Phau Ntawv Qhia Rau Tswv Cuab* los kawm paub ntau ntxiv hais txog cov kev zam.

B12. Nws siv sij hawm ntev npaum li cas thiaj tau txais qhov kev zam?

Tom qab peb tau txais nqe lus hais qhia los ntawm koj tus kws muab tshuaj los txhawb nqa rau koj qhov kev thov txog kev zam lawm, peb yuav muab kev txiav txim siab tsis pub dhau 72 teev.

Qhov Kev Tso Cai Ua Ntej thiab cov kev thov kev zam tus qauv tshuaj los ntawm kev hu rau Navitus Health Solutions ntawm 1-833-837-4300 (qhov no yog hu dawb xwb) los sis los ntawm xa daim foos kev thov raws fev tuaj mus rau 1-855-668-8552. Cov kws muab kev pab cuam tuaj yeem xa cov lus thov los ntawm ePA.

Yog tias koj los sis koj tus kws muab tshuaj xav tias koj txoj kev noj qab haus huv tuaj yeem raug mob yog tias koj yuav tsum tau tos 72 teev rau kev txiav txim siab, koj tuaj yeem thov kom muaj kev zam sai. Qhov no yog kev txiav txim siab sai dua. Yog tias koj tus kws muab tshuaj pom zoo rau koj qhov kev thov, peb yuav muab kev txiav txim siab rau koj hauv 24 teev tom qab tau txais koj daim ntawv qhia kev txhawb nqa.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

B13. Cov tshuaj tom tej yog dab tsi?

Hom tshuaj uas yuav tau nthuav dav yog raug tsim tawm los ntawm hom tshuaj sib tov uas siv tau zoo tib yam li cov tshuaj uas muaj npe lag luam. Feem ntau lawv muaj tus nqi qis dua hom tshuaj uas muaj npe lag luam thiab feem ntau tsis muaj cov npe uas muaj neeg paub coob. Cov yam tshuaj tom tej tau pom zoo los ntawm Kev Tswj Hwm Zaub Mov thiab Tshuaj (Food and Drug Administration, FDA).

UCare's MSHO thiab UCare Connect + Medicare duav roos tag nrho hom tshuaj uas muaj npe lag luam thiab hom tshuaj uas yuav tau nthuav dav tib si.

B14. Cov tshuaj uas nyob saum lub txee muag khoom (over-the counter, OTC) yog dab tsi?

OTC sawv cev rau "lub txee muag khoom." MSHO thiab UCare Connect + Medicare ntawm UCare duav roos rau qee cov tshuaj OTC thaum koj tus kws muab kev pab cuam sau daim ntawv sau yuav tshuaj.

Koj tuaj yeem nyeem tau UCare's MSHO thiab UCare Connect + Medicare Daim Ntawv Teev Tshuaj los nrhiav kom paub txog seb cov tshuaj OTC hom twg thiaj tau txais kev duav roos.

B15. UCare's MSHO thiab UCare Connect + Medicare puas duav roos cov khoom lag luam OTC uas tsis yog tshuaj?

MSHO thiab UCare Connect + Medicare ntawm UCare duav roos rau qee yam khoom tsis yog tshuaj OTC thaum koj tus kws muab kev pab cuam sau daim ntawv sau yuav tshuaj. Koj tuaj yeem nyeem daim ntawv teev npe tshuaj hauv tshooj UCare's MSHO thiab UCare Connect + Medicare Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos los nrhiav kom paub seb cov khoom lag luam OTC uas tsis yog tshuaj puas tau txais kev duav roos. Piv txwv ntawm cov khoom uas tsis yog tshuaj OTC suav nrog cov ntaub qhwv qajj to thiab cov ntaub qhwv.

B16. Puas yog MSHO thiab UCare Connect + Medicare Ntawm UCare duav roos rau daim ntawv sau yuav tshuaj mus sij hawm ntev?

- Peb muab lub khoos kas xaj tshuaj xa raws kev xa ntawv uas pab kom koj tau txais kev ntxiv koj cov tshuaj hauv daim ntawv sau yuav tshuaj tau ntev txog 90-hnub uas muab xa ncaj qha tuaj rau tom koj tsev kiag. Ib qho khoom siv 90-hnub tau sib koom them nyiaj tib yam li cov khoom siv ib hlis.
- **Cov Khoos Kas Khw Muag Tshuaj Me 90-Hnub.** Qee lub khw muag tshuaj me kuj yuav muab cov tshuaj noj hauv daim ntawv sau yuav tshuaj uas tau txais kev duav roos ntev txog 90-hnub thiab. Ib qho khoom siv 90-hnub tau sib koom them nyiaj tib yam li cov khoom siv ib hlis.

B17. Kuv puas tuaj yeem tau txais cov tshuaj xa tuaj rau kuv lub tsev los ntawm kuv lub khw muag tshuaj hauv zos?

Koj lub khw muag tshuaj hauv zos tuaj yeem xa koj daim ntawv sau yuav tshuaj tuaj rau koj lub tsev. Koj tuaj yeem hu rau koj lub khw muag tshuaj kom paub seb lawv puas muaj kev pab cuam kev xa tshuaj tuaj rau ntawm tsev.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnub hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

B18. Kuv tus nqi them yog dab tsi?

Cov tswv cuab ntawm MSHO thiab UCare Connect + Medicare Ntawm UCare muaj kev them nyiaj sib koom them rau cov tshuaj noj yog tias tus tswv cuab ua raws li txoj cai ntawm txoj phiaj xwm. Kev qhia mus rau cov nqe lus nug B14 thiab B15 kom paub ntau ntawm txog cov tshuaj OTC thiab cov khoom tsis yog tshuaj.

Cov them yog pawg ntawm cov tshuaj hauv peb Daim Ntawv Teev Npe Tshuaj.

- Cov tshuaj Yuav Tau Nthuav Dav hauv Theem 1 muaj tus nqi sib koom them qis tshaj plaws. Tus nqi sib koom them yog txij li \$0 mus txog \$4.50, saib raws li koj qhov nyiaj khwv tau los thiab them kev muaj cai tau txais kev pab ntawm Medical Assistance.
- Cov tshuaj uas Muaj Npe Lag Luam hauv Theem 1 muaj tus nqi sib koom them siab zog. Tus nqi sib koom them yog tixj li \$0 mus txog \$11.20, saib raws li koj qhov nyiaj khwv tau los thiab them kev muaj cai tau txais kev pab ntawm Medical Assistance.
- OTCs muaj tus nqi sib koom them \$0.

Yog tias koj muaj lus nug, hu rau Lub Chaw Pab Cuam Cov Neeg Siv Khoom ntawm tus naj npawb hauv qab ntawm nplooj ntawv no. Peb tuaj yeem pab kom koj nkag siab tias koj qhov kev them nyiaj yuav yog dab tsi.

C. Txheej txheem cej luam ntawm Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos

Daim Ntawv Teev Npe Tshuaj Uas Tau Txais Kev Duav Roos yuav muab cov ntaub ntawv qhia txog cov tshuaj uas tau txais kev duav roos los ntawm UCare's MSHO thiab UCare Connect + Medicare rau koj. Yog tias koj muaj teeb meem txog kev nrhiav koj cov tshuaj nyob rau hauv daim ntawv teev npe tig mus rau Daim Phiaj Qhia txog Cov Tshuaj Uas Tau Txais Kev Dua Roos nyob rau hauv Tshooj D. Daim phiaj qhia yuav qhia raws cov tsiaj ntawv teev npe tag nrho cov tshuaj uas tau txais kev duav roos los ntawm UCare's MSHO thiab UCare Connect + Medicare.

Qhov thawj kem ntawv ntawm kem ntawv qhia teev muaj lub npe ntawm hom tshuaj. Cov tshuaj yuav tau nthuav dav tau txais kev teev qhia hauv tus niam ntawv qaij ua tus ntawv me (xws li, *azathioprine*), hom tshuaj uas muaj npe lag luam muab sau ua tus niam ntawv loj (xws li, EPIPEN), thiab cov tshuaj yuav tau tom txe (OTC) tau txais kev teev npe sib cais nws nyob nws ib qho tom qab Daim Phiaj Qhia Txog Cov Tshuaj Tau Txais Kev Duav Roos nyob tom kawg ntawm daim ntawv no. Cov ntaub ntawv qhia paub hauv kem ntawv "Cov kev nqis tes ua uas tsim nyog, cov kev txwv, los sis cov kev txwv tsis pub siv ntau" yuav qhia rau koj seb UCare's MSHO los sis UCare Connect + Medicare puas muaj cov cai twg txog kev duav roos koj yam tshuaj.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntawv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm **ucare.org**.

Ntawm nov yog cov ntsiab lus txhais ntawm cov zauv uas muab siv rau hauv kem ntawv qhia txog "Cov kev nqis tes ua tsim nyog, cov kev txwv, los sis cov kev txwv tsis pub siv ntau":

PA =	Kev tso cai ua ntej: Cov tshuaj uas yuav tsum tau muaj kev pom zoo los ntawm UCare ua ntej peb yuav duav roos nws.
PA ² =	Kev Tso Cai Ua Ntej: Cov tshuaj uas xav tau kev pom zoo yog tias koj tsis tau noj tshuaj ua ntej los dua li
PA ³ =	Kev Tso Cai Ua Ntej: Cov tshuaj uas yuav tsum tau tshuaj xyuas los txiav txim qhov kev duav roos raws li Part B los sis Part D
ST=	Kev Kho Mob Raws Kauj Ruam: Cov tshuaj uas xav kom koj sim lwm hom tshuaj ua ntej tso peb mam li yuav duav roos nws
QL =	Kev txwv qhov ntau tsawg: Muaj kev txwv rau cov tshuaj uas koj tuaj yeem tau txais ib zaug
Part B Covered =	Cov tshuaj siv rau tus mob ntshav qab zib uas tau txais kev duav roos hauv Part B qhov txiaj ntsig kev pab (kev kho mob)
VAC =	Tshuaj Txhaj Tiv Thaiv Tus Neeg Laus Part D duav roos ntawm tus nqi \$0 (tsis tau them nqi dab tsi)
VAC AGE =	Tshuaj Txhaj Tiv Thaiv Tus Neeg Laus Part D duav roos li \$0 (tsis tau them nqi dab tsi) rau cov hnuv nyoog 19 – 45 xyoos.
MFG =	Kev duav roos tshuaj yog raug txwv rau qee cov neeg tsim khoom
NDS =	Cov tshuaj txwv rau 30-hnuv muab khoom ntxiv ib zaug
LA =	Cov tshuaj uas tsuas muaj muag nyob rau ntawm cov khw muag tshuaj nkaus xwb. Yog tias koj muaj lus nug, hu rau Lub Chaw Pab Cuam Cov Neeg Siv Khoom ntawm tus naj npawb xov tooj nyob tom qab ntawm koj daim npav ID
Tier 1* =	Cov tshuaj raws daim ntawv sau yuav tshuaj tau txais kev duav roos los ntawm qhov txiaj ntsig ntawm Medicaid

C1. Daim Ntawv Teev Tshuaj los ntawm Hom Tshuaj










Cov tshuaj hauv tshooj no yuav raug muab tso ua pawg mus ua pab pawg raws hom. Piv txwv li, yog tias koj noj tshuaj kho mob taub hau migraines, koj yuav tsum saib hauv qeb "Tshuaj Tiv Thaiv Mob Taub Hau Migraines". Qhov ntawd yog qhov uas koj yuav nrhiav tau cov tshuaj uas kho mob tau hau migraines.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (qhov no yog hu dawb xwb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm [ucare.org](https://www.ucare.org).

Nplooj ntawv no txhob txwm tso tseg tsis sau dab tsi rau.

Nplooj ntawv no txhob txwm tso tseg tsis sau dab tsi rau.

UCare's Minnesota Senior Health Options (MSHO)
and UCare Connect + Medicare Formulary
(List of Covered Drugs)

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ADHD/ANTI-NARCOLEPSY/ANTI-OBESITY/ANOREXIANTS		
AMPHETAMINES		
<i>amphetamine-dextroamphet er</i>	1	
<i>amphetamine-dextroamphetamine</i>	1	
<i>lisdexamfetamine dimesylate</i> (<i>lisdexamfetamine dimesylate 10 mg cap,</i> <i>lisdexamfetamine dimesylate 20 mg cap,</i> <i>lisdexamfetamine dimesylate 30 mg cap,</i> <i>lisdexamfetamine dimesylate 40 mg cap,</i> <i>lisdexamfetamine dimesylate 50 mg cap,</i> <i>lisdexamfetamine dimesylate 60 mg cap,</i> <i>lisdexamfetamine dimesylate 70 mg cap</i>)	1	
<i>methamphetamine hcl</i>	1	
ANOREXIANTS NON-AMPHETAMINE		
<i>phentermine hcl (phentermine hcl 30 mg cap, phentermine hcl 37.5 mg cap)</i>	1*	 30 EA / 30 DAYS
<i>phentermine hcl 15 mg cap</i>	1*	 30 EA / 30 DAYS
<i>phentermine hcl 37.5 mg tab</i>	1*	 30 EA / 30 DAYS
ANTI-OBESITY AGENTS		
SAXENDA	1*	 15 ML / 30 DAYS   Non-Extended Day Supply
WEGOVY (WEGOVY 0.25 MG/0.5ML SOLN A-INJ, WEGOVY 0.5 MG/0.5ML SOLN A-INJ, WEGOVY 1 MG/0.5ML SOLN A-INJ)	1	 4 ML / 365 OVER TIME   Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
WEGOVY (WEGOVY 1.7 MG/0.75ML SOLN A-INJ, WEGOVY 2.4 MG/0.75ML SOLN A-INJ)	1	QL 3 ML / 28 DAYS PA NDS Non-Extended Day Supply
ZEPBOUND (ZEPBOUND 2.5 MG/0.5ML SOLN A-INJ, ZEPBOUND 5 MG/0.5ML SOLN A-INJ, ZEPBOUND 7.5 MG/0.5ML SOLN A-INJ, ZEPBOUND 10 MG/0.5ML SOLN A-INJ, ZEPBOUND 12.5 MG/0.5ML SOLN A-INJ, ZEPBOUND 15 MG/0.5ML SOLN A-INJ)	1*	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
ZEPBOUND 2.5 MG/0.5ML SOLUTION	1*	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
ZEPBOUND 5 MG/0.5ML SOLUTION	1*	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
ATTENTION-DEFICIT/HYPERACTIVITY DISORDER (ADHD) AGENTS		
<i>atomoxetine hcl</i>	1	QL 60 EA / 30 DAYS
<i>clonidine hcl er 0.1 mg tab er 12h</i>	1	
DOPAMINE AND NOREPINEPHRINE REUPTAKE INHIBITORS (DNRIS)		
SUNOSI	1	QL 30 EA / 30 DAYS PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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STIMULANTS - MISC.

<i>armodafinil</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 30 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #c4863d; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>methylphenidate hcl (methylphenidate hcl 5 mg tab, methylphenidate hcl 5 mg/5ml solution, methylphenidate hcl 10 mg tab, methylphenidate hcl 10 mg/5ml solution, methylphenidate hcl 20 mg tab)</i>	1	
<i>methylphenidate hcl er (la)</i>	1	
<i>methylphenidate hcl er (methylphenidate hcl er 10 mg tab er, methylphenidate hcl er 20 mg tab er)</i>	1	
<i>modafinil</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> 60 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #c4863d; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>

ALTERNATIVE MEDICINES

ALTERNATIVE MEDICINE - C'S

<i>activated charcoal</i>	OTC	
<i>coenzyme q10</i>	OTC	
<i>cranberry supplement</i>	OTC	

ALTERNATIVE MEDICINE - F'S

<i>flaxseed oil</i>	OTC	
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ALTERNATIVE MEDICINE - G'S

<i>glucosamine sulfate</i>	OTC	
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ALTERNATIVE MEDICINE - H'S

<i>melatonin</i>	OTC	
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ALTERNATIVE MEDICINE - M'S		
<i>melatonin / pyridoxine</i>	OTC	
<i>msm supplement</i>	OTC	
ALTERNATIVE MEDICINE - S'S		
<i>sam-e supplement</i>	OTC	
ALTERNATIVE MEDICINE COMBINATIONS		
<i>glucosamine / chondroitin</i>	OTC	
<i>omega-3 fatty acids (fish oil)</i>	OTC	
AMINOGLYCOSIDES		
AMINOGLYCOSIDES		
<i>amikacin sulfate</i>	1	
GENTAMICIN IN SALINE (GENTAMICIN IN SALINE 0.8-0.9 MG/ML-% SOLUTION, GENTAMICIN IN SALINE 1-0.9 MG/ML-% SOLUTION, GENTAMICIN IN SALINE 1.2-0.9 MG/ML-% SOLUTION, GENTAMICIN IN SALINE 1.6-0.9 MG/ML-% SOLUTION)	1	
<i>gentamicin sulfate (gentamicin sulfate 10 mg/ml solution, gentamicin sulfate 40 mg/ml solution)</i>	1	
<i>neomycin sulfate</i>	1	
<i>paromomycin sulfate</i>	1	
STREPTOMYCIN SULFATE	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>tobramycin 300 mg/5ml nebu soln</i>	1	<ul style="list-style-type: none"> QL 300 ML / 30 DAYS PA NDS Non-Extended Day Supply
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TOBRAMYCIN SULFATE (TOBRAMYCIN SULFATE 1.2 GM RECON SOLN, TOBRAMYCIN SULFATE 1.2 GM/30ML SOLUTION, TOBRAMYCIN SULFATE 2 GM/50ML SOLUTION, TOBRAMYCIN SULFATE 10 MG/ML SOLUTION, TOBRAMYCIN SULFATE 80 MG/2ML SOLUTION)

1

ANALGESICS - ANTI-INFLAMMATORY

ANTI-TNF-ALPHA - MONOCLONAL ANTIBODIES

HADLIMA 40 MG/0.4ML SOLN PRSYR	1	<ul style="list-style-type: none"> QL 2.4 ML / 28 DAYS PA NDS Non-Extended Day Supply
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HADLIMA 40 MG/0.8ML SOLN PRSYR	1	<ul style="list-style-type: none"> QL 4.8 ML / 28 DAYS PA NDS Non-Extended Day Supply
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HADLIMA PUSHTOUCH 40 MG/0.4ML SOLN A-INJ	1	<ul style="list-style-type: none"> QL 2.4 ML / 28 DAYS PA NDS Non-Extended Day Supply
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HADLIMA PUSHTOUCH 40 MG/0.8ML SOLN A-INJ	1	<ul style="list-style-type: none"> QL 4.8 ML / 28 DAYS PA NDS Non-Extended Day Supply
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HUMIRA (2 PEN) 40 MG/0.8ML PEN KIT	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA NDS Non-Extended Day Supply
HUMIRA (2 SYRINGE) 40 MG/0.8ML PREF SY KT	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA NDS Non-Extended Day Supply
HUMIRA 10 MG/0.1ML PREF SY KT (ABBVIE)	1	<ul style="list-style-type: none"> QL 2 EA / 28 DAYS PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA 20 MG/0.2ML PREF SY KT (ABBVIE)	1	<ul style="list-style-type: none"> QL 2 EA / 28 DAYS PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA 40 MG/0.4ML PREF SY KT (ABBVIE)	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA PEN 40 MG/0.4ML PEN KIT (ABBVIE)	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HUMIRA PEN 80 MG/0.8ML PEN KIT (ABBVIE)	1	<ul style="list-style-type: none"> QL 2 EA / 28 DAYS PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA PEN-CD/UC/HS STARTER 80 MG/0.8ML PEN KIT (ABBVIE)	1	<ul style="list-style-type: none"> QL 3 EA / 180 OVER TIME PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA PEN-PEDIATRIC UC START 80 MG/0.8ML PEN KIT (ABBVIE)	1	<ul style="list-style-type: none"> QL 4 EA / 180 OVER TIME PA MFG Drug coverage is limited to certain manufacturers NDS Non-Extended Day Supply
HUMIRA PEN-PSOR/UEIT STARTER	1	<ul style="list-style-type: none"> QL 3 EA / 180 OVER TIME PA NDS Non-Extended Day Supply
HUMIRA-CD/UC/HS STARTER	1	<ul style="list-style-type: none"> QL 6 EA / 180 OVER TIME PA NDS Non-Extended Day Supply
HUMIRA-PED<40KG CROHNS STARTER	1	<ul style="list-style-type: none"> QL 2 EA / 180 OVER TIME PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HUMIRA-PED>=40KG CROHNS START	1	<ul style="list-style-type: none"> QL 3 EA / 180 OVER TIME PA NDS Non-Extended Day Supply
HUMIRA-PS/UV/ADOL HS STARTER	1	<ul style="list-style-type: none"> QL 4 EA / 180 OVER TIME PA NDS Non-Extended Day Supply
SIMPONI (SIMPONI 100 MG/ML SOLN A-INJ, SIMPONI 100 MG/ML SOLN PRSYR)	1	<ul style="list-style-type: none"> QL 3 ML / 28 DAYS PA NDS Non-Extended Day Supply
SIMPONI (SIMPONI 50 MG/0.5ML SOLN A-INJ, SIMPONI 50 MG/0.5ML SOLN PRSYR)	1	<ul style="list-style-type: none"> QL 0.5 ML / 28 DAYS PA NDS Non-Extended Day Supply
ANTIRHEUMATIC - ENZYME INHIBITORS		
RINVOQ (RINVOQ 15 MG TAB ER 24H, RINVOQ 30 MG TAB ER 24H)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
RINVOQ 45 MG TAB ER 24H	1	<ul style="list-style-type: none"> QL 84 EA / 180 OVER TIME PA NDS Non-Extended Day Supply
XELJANZ (XELJANZ 5 MG TAB, XELJANZ 10 MG TAB)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
XELJANZ 1 MG/ML SOLUTION	1	<ul style="list-style-type: none"> QL 300 ML / 30 DAYS PA NDS Non-Extended Day Supply
XELJANZ XR	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
GOLD COMPOUNDS		
RIDAURA	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply
INTERLEUKIN-1 BLOCKERS		
ARCALYST	1	<ul style="list-style-type: none"> PA NDS Non-Extended Day Supply LA
INTERLEUKIN-6 RECEPTOR INHIBITORS		
ACTEMRA 162 MG/0.9ML SOLN PRSYR	1	<ul style="list-style-type: none"> QL 3.6 ML / 28 DAYS PA NDS Non-Extended Day Supply
ACTEMRA ACTPEN	1	<ul style="list-style-type: none"> QL 3.6 ML / 28 DAYS PA NDS Non-Extended Day Supply
KEVZARA	1	<ul style="list-style-type: none"> QL 2.28 ML / 28 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
NONSTEROIDAL ANTI-INFLAMMATORY AGENTS (NSAIDS)		
<i>celecoxib</i>	1	
<i>diclofenac potassium 50 mg tab</i>	1	
<i>diclofenac sodium (diclofenac sodium 25 mg tab dr, diclofenac sodium 50 mg tab dr, diclofenac sodium 75 mg tab dr)</i>	1	
<i>diclofenac sodium er</i>	1	
<i>ec-naproxen</i>	1	
<i>etodolac</i>	1	
<i>flurbiprofen 100 mg tab</i>	1	
<i>ibuprofen (motrin)</i>	OTC	
<i>ibuprofen (motrin) rx only</i>	1	
<i>indomethacin (indomethacin 25 mg cap, indomethacin 50 mg cap)</i>	1	
<i>ketorolac tromethamine 10 mg tab</i>	1	
<i>meloxicam (meloxicam 7.5 mg tab, meloxicam 15 mg tab)</i>	1	
<i>nabumetone</i>	1	
<i>naproxen (aleve)</i>	OTC	
<i>naproxen (naproxen 250 mg tab, naproxen 375 mg tab, naproxen 375 mg tab dr, naproxen 500 mg tab, naproxen 500 mg tab dr)</i>	1	
<i>naproxen dr</i>	1	
<i>oxaprozin 600 mg tab</i>	1	
<i>piroxicam</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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sulindac

1

PHOSPHODIESTERASE 4 (PDE4) INHIBITORS

OTEZLA 10 & 20 & 30 MG TAB THPK

1

QL 55 EA / 180 OVER TIME
PA
NDS Non-Extended Day Supply
LA

OTEZLA 30 MG TAB

1

QL 60 EA / 30 DAYS
PA
NDS Non-Extended Day Supply
LA

PYRIMIDINE SYNTHESIS INHIBITORS

leflunomide

1

SELECTIVE COSTIMULATION MODULATORS

ORENCIA 125 MG/ML SOLN PRSYR

1

QL 4 ML / 28 DAYS
PA
NDS Non-Extended Day Supply

ORENCIA 50 MG/0.4ML SOLN PRSYR

1

QL 1.6 ML / 28 DAYS
PA
NDS Non-Extended Day Supply

ORENCIA 87.5 MG/0.7ML SOLN PRSYR

1

QL 2.8 ML / 28 DAYS
PA
NDS Non-Extended Day Supply

ORENCIA CLICKJECT

1

QL 4 ML / 28 DAYS
PA
NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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SOLUBLE TUMOR NECROSIS FACTOR RECEPTOR AGENTS

ENBREL (ENBREL 25 MG/0.5ML SOLN PRSYR, ENBREL 25 MG/0.5ML SOLUTION, ENBREL 50 MG/ML SOLN PRSYR)	1	<ul style="list-style-type: none"> QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply
ENBREL MINI	1	<ul style="list-style-type: none"> QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply
ENBREL SURECLICK	1	<ul style="list-style-type: none"> QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply

ANALGESICS - NONNARCOTIC

ANALGESIC COMBINATIONS

<i>acetaminophen / caffeine / pyrilamine (midol)</i>	OTC
<i>aspirin / acetaminophen / caffeine (excedrin)</i>	OTC

ANALGESICS OTHER

<i>acetaminophen (tylenol)</i>	OTC
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SALICYLATES

<i>aspirin (bayer)</i>	OTC
<i>aspirin / buffers (bufferin)</i>	OTC
<i>aspirin / sodium bicarb / citric acid (alka-seltzer)</i>	OTC
<i>diflunisal</i>	1

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANALGESICS - OPIOID		
OPIOID AGONISTS		
<i>fentanyl (fentanyl 12 mcg/hr patch 72hr, fentanyl 25 mcg/hr patch 72hr, fentanyl 50 mcg/hr patch 72hr, fentanyl 75 mcg/hr patch 72hr, fentanyl 100 mcg/hr patch 72hr)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">10 EA / 30 DAYS</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>fentanyl citrate (fentanyl citrate 400 mcg loz handle, fentanyl citrate 600 mcg loz handle, fentanyl citrate 800 mcg loz handle, fentanyl citrate 1200 mcg loz handle, fentanyl citrate 1600 mcg loz handle)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">120 EA / 30 DAYS</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>
<i>fentanyl citrate 200 mcg loz handle</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">120 EA / 30 DAYS</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
<i>hydromorphone hcl 1 mg/ml liquid</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>2400 ML / 30 OVER TIME</div> </div>
<i>hydromorphone hcl 2 mg tab</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>450 EA / 30 DAYS</div> </div>
<i>hydromorphone hcl 4 mg tab</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>240 EA / 30 DAYS</div> </div>
<i>hydromorphone hcl 8 mg tab</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div>120 EA / 30 DAYS</div> </div>
<i>hydromorphone hcl pf (hydromorphone hcl pf 10 mg/ml solution, hydromorphone hcl pf 50 mg/5ml solution, hydromorphone hcl pf 500 mg/50ml solution)</i>	1	<div style="display: flex; align-items: center; margin-top: 10px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> </div>
<i>methadone hcl (methadone hcl 5 mg tab, methadone hcl 10 mg tab)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">360 EA / 30 DAYS</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>
METHADONE HCL 10 MG/5ML SOLUTION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8e44ad; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">1800 ML / 30 DAYS</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #f39c12; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA</div> </div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
METHADONE HCL 5 MG/5ML SOLUTION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 3600 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #c88e3d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>morphine sulfate (concentrate)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 180 ML / 30 DAYS </div>
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 180 ML / 30 DAYS </div>
<i>morphine sulfate (morphine sulfate 15 mg tab, morphine sulfate 30 mg tab)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 180 EA / 30 DAYS </div>
MORPHINE SULFATE 10 MG/5ML SOLUTION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 1800 ML / 30 DAYS </div>
MORPHINE SULFATE 20 MG/5ML SOLUTION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 900 ML / 30 DAYS </div>
<i>morphine sulfate er (morphine sulfate er 15 mg tab er, morphine sulfate er 30 mg tab er, morphine sulfate er 60 mg tab er, morphine sulfate er 100 mg tab er, morphine sulfate er 200 mg tab er)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 120 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #c88e3d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
<i>oxycodone hcl (oxycodone hcl 10 mg tab, oxycodone hcl 15 mg tab, oxycodone hcl 20 mg tab, oxycodone hcl 30 mg tab)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 180 EA / 30 DAYS </div>
<i>oxycodone hcl 100 mg/5ml conc</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 270 ML / 30 DAYS </div>
<i>oxycodone hcl 5 mg cap</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 360 EA / 30 OVER TIME </div>
<i>oxycodone hcl 5 mg tab</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 360 EA / 30 DAYS </div>
<i>oxycodone hcl 5 mg/5ml solution</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 5400 ML / 30 DAYS </div>
<i>tramadol hcl 50 mg tab</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 240 EA / 30 DAYS </div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OPIOID COMBINATIONS		
<i>acetaminophen-codeine (acetaminophen-codeine 300-15 mg tab, acetaminophen-codeine 300-30 mg tab, acetaminophen-codeine 300-60 mg tab)</i>	1	QL 390 EA / 30 DAYS
ACETAMINOPHEN-CODEINE 120-12 MG/5ML SOLUTION	1	QL 4980 ML / 30 DAYS
<i>endocet</i>	1	QL 360 EA / 30 DAYS
<i>hydrocodone-acetaminophen (hydrocodone-acetaminophen 2.5-108 mg/5ml solution, hydrocodone-acetaminophen 5-217 mg/10ml solution, hydrocodone-acetaminophen 7.5-325 mg/15ml solution)</i>	1	QL 5400 ML / 30 DAYS
<i>hydrocodone-acetaminophen (hydrocodone-acetaminophen 5-325 mg tab, hydrocodone-acetaminophen 7.5-325 mg tab, hydrocodone-acetaminophen 10-325 mg tab)</i>	1	QL 360 EA / 30 DAYS
<i>oxycodone-acetaminophen (oxycodone-acetaminophen 2.5-325 mg tab, oxycodone-acetaminophen 5-325 mg tab, oxycodone-acetaminophen 7.5-325 mg tab, oxycodone-acetaminophen 10-325 mg tab)</i>	1	QL 360 EA / 30 DAYS
<i>tramadol-acetaminophen</i>	1	QL 360 EA / 30 DAYS
OPIOID PARTIAL AGONISTS		
BELBUCA	1	QL 60 EA / 30 OVER TIME PA
<i>buprenorphine</i>	1	QL 4 EA / 28 DAYS PA



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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>buprenorphine hcl (buprenorphine hcl 2 mg sl tab, buprenorphine hcl 8 mg sl tab)</i>	1	QL 90 EA / 30 DAYS
<i>buprenorphine hcl-naloxone hcl (buprenorphine hcl-naloxone hcl 2-0.5 mg sl tab, buprenorphine hcl-naloxone hcl 4-1 mg film, buprenorphine hcl-naloxone hcl 8-2 mg film, buprenorphine hcl-naloxone hcl 8-2 mg sl tab)</i>	1	QL 90 EA / 30 DAYS
<i>buprenorphine hcl-naloxone hcl 12-3 mg film</i>	1	QL 60 EA / 30 DAYS
<i>butorphanol tartrate 10 mg/ml solution</i>	1	QL 10 ML / 30 DAYS
ANDROGENS-ANABOLIC		
ANDROGENS		
<i>danazol</i>	1	
<i>testosterone (testosterone 1.62 % gel, testosterone 20.25 mg/act (1.62%) gel, testosterone 40.5 mg/2.5gm (1.62%) gel)</i>	1	QL 150 GM / 30 DAYS PA
<i>testosterone (testosterone 12.5 mg/act (1%) gel, testosterone 25 mg/2.5gm (1%) gel, testosterone 50 mg/5gm (1%) gel)</i>	1	QL 300 GM / 30 DAYS PA
TESTOSTERONE 10 MG/ACT (2%) GEL	1	QL 120 GM / 30 DAYS PA
<i>testosterone 20.25 mg/1.25gm (1.62%) gel</i>	1	QL 75 GM / 30 DAYS PA
<i>testosterone 30 mg/act solution</i>	1	QL 180 ML / 30 DAYS PA
<i>testosterone cypionate 100 mg/ml solution</i>	1	PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
TESTOSTERONE CYPIONATE 200 MG/ML SOLUTION	1	PA
<i>testosterone cypionate 200 mg/ml solution</i>	1	PA
TESTOSTERONE ENANTHATE	1	PA
ANORECTAL AND RELATED PRODUCTS		
INTRARECTAL STEROIDS		
<i>budesonide (budesonide 2 mg foam, budesonide 2 mg/act foam)</i>	1	PA
<i>hydrocortisone 100 mg/60ml enema</i>	1	
RECTAL COMBINATIONS		
<i>hemorrhoidal cream</i>	OTC	
<i>hemorrhoidal ointment</i>	OTC	
<i>hemorrhoidal suppository</i>	OTC	
<i>phenylephrine / shark liver / petrolatum (preparation h)</i>	OTC	
RECTAL LOCAL ANESTHETICS		
<i>pramoxine (procto-foam)</i>	OTC	
RECTAL STEROIDS		
<i>hydrocortisone (perianal)</i>	1	
<i>procto-med hc</i>	1	
<i>proctosol hc</i>	1	
<i>proctozone-hc</i>	1	
VASODILATING AGENTS		
<i>nitroglycerin 0.4 % ointment</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTACIDS		
ANTACID COMBINATIONS		
<i>calcium carbonate / magnesium hydroxide (mylanta supreme)</i>	OTC	
<i>magnesium carbonate / aluminum hydroxide (gaviscon)</i>	OTC	
<i>magnesium hydroxide / aluminum hydroxide / simethicone (mylanta)</i>	OTC	
ANTACIDS - ALUMINUM SALTS		
<i>aluminum hydroxide (alternagel)</i>	OTC	
ANTACIDS - BICARBONATE		
<i>sodium bicarbonate</i>	OTC	
ANTACIDS - CALCIUM SALTS		
<i>calcium carbonate (tums)</i>	OTC	
ANTACIDS - MAGNESIUM SALTS		
<i>magnesium oxide</i>	OTC	
<i>magnesium oxide (antacid)</i>	OTC	
ANTHELMINTICS		
ANTHELMINTICS		
<i>albendazole</i>	1	 Non-Extended Day Supply
BENZNIDAZOLE	1	
<i>ivermectin 3 mg tab</i>	1	
<i>praziquantel</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTI-INFECTIVE AGENTS - MISC.		
ANTI-INFECTIVE AGENTS - MISC.		
<i>baciim</i>	1	
BACITRACIN 50000 UNIT RECON SOLN	1	
<i>metronidazole (metronidazole 250 mg tab, metronidazole 500 mg tab, metronidazole 500 mg/100ml solution)</i>	1	
METRONIDAZOLE 500 MG/100ML SOLUTION	1	
<i>pentamidine isethionate for injection solution</i>	1	
<i>pentamidine isethionate for nebulization solution</i>	1	QL 1 EA / 28 DAYS PA³
<i>tinidazole</i>	1	
TRIMETHOPRIM	1	
<i>trimethoprim</i>	1	
XIFAXAN 200 MG TAB	1	QL 9 EA / 30 OVER TIME
XIFAXAN 550 MG TAB	1	QL 90 EA / 30 DAYS PA NDS Non-Extended Day Supply
ANTI-INFECTIVE MISC. - COMBINATIONS		
<i>multivitamins / minerals</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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sulfamethoxazole-trimethoprim (sulfamethoxazole-trimethoprim 200-40 mg/5ml suspension, sulfamethoxazole-trimethoprim 400-80 mg tab, sulfamethoxazole-trimethoprim 800-160 mg tab)

1

sulfatrim pediatric

1

ANTIPROTOZOAL AGENTS

atovaquone

1

NDS Non-Extended Day Supply

nitazoxanide

1

QL 6 EA / 3 OVER TIME

NDS Non-Extended Day Supply

CARBAPENEMS

ertapenem sodium

1

imipenem-cilastatin (imipenem-cilastatin 250 mg recon soln, imipenem-cilastatin 500 mg recon soln)

1

meropenem (meropenem 1 gm recon soln, meropenem 500 mg recon soln)

1

MEROPENEM-SODIUM CHLORIDE 1 GM/50ML RECON SOLN

1

QL 30 EA / 10 OVER TIME

MEROPENEM-SODIUM CHLORIDE 500 MG/50ML RECON SOLN

1







QL 10 EA / 10 DAYS

CHLORAMPHENICOLS

CHLORAMPHENICOL SOD SUCCINATE

1

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
CYCLIC LIPOPEPTIDES		
DAPTOMYCIN 350 MG RECON SOLN	1	 Non-Extended Day Supply
<i>daptomycin 350 mg recon soln</i>	1	 Non-Extended Day Supply
<i>daptomycin 500 mg recon soln</i>	1	 Non-Extended Day Supply
GLYCOPEPTIDES		
DALVANCE	1	 Non-Extended Day Supply
<i>vancomycin hcl (vancomycin hcl 1 gm recon soln, vancomycin hcl 1.25 gm recon soln, vancomycin hcl 1.5 gm recon soln, vancomycin hcl 5 gm recon soln, vancomycin hcl 10 gm recon soln, vancomycin hcl 500 mg recon soln, vancomycin hcl 750 mg recon soln)</i>	1	
<i>vancomycin hcl (vancomycin hcl 125 mg cap, vancomycin hcl 250 mg cap)</i>	1	 120 EA / 30 DAYS
VANCOMYCIN HCL 100 GM RECON SOLN	1	 2 EA / 10 OVER TIME
VANCOMYCIN HCL IN NAACL (VANCOMYCIN HCL IN NAACL 1-0.9 GM/200ML-% SOLUTION, VANCOMYCIN HCL IN NAACL 500-0.9 MG/100ML-% SOLUTION)	1	
LEPROSTATICS		
<i>dapsone (dapsone 25 mg tab, dapsone 100 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
LINCOSAMIDES		
<i>clindamycin hcl</i>	1	
<i>clindamycin palmitate hcl</i>	1	
<i>clindamycin phosphate (clindamycin phosphate 9 gm/60ml solution, clindamycin phosphate 300 mg/2ml solution, clindamycin phosphate 600 mg/4ml solution, clindamycin phosphate 900 mg/6ml solution, clindamycin phosphate 9000 mg/60ml solution)</i>	1	
<i>clindamycin phosphate in d5w</i>	1	
CLINDAMYCIN PHOSPHATE IN NACL	1	
<i>lincomycin hcl</i>	1	
MONOBACTAMS		
<i>aztreonam</i>	1	
CAYSTON	1	<div data-bbox="1133 1142 1192 1184">QL</div> 84 ML / 28 DAYS <div data-bbox="1133 1192 1192 1234">PA</div> <div data-bbox="1133 1243 1192 1285">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1310 1192 1352">LA</div>
OXAZOLIDINONES		
<i>linezolid (linezolid 600 mg tab, linezolid 600 mg/300ml solution)</i>	1	
<i>linezolid 100 mg/5ml recon susp</i>	1	<div data-bbox="1133 1541 1192 1583">NDS</div> Non-Extended Day Supply
LINEZOLID IN SODIUM CHLORIDE	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SIVEXTRO 200 MG TAB	1	<div data-bbox="1133 317 1192 380">QL</div> 6 EA / 6 OVER TIME <div data-bbox="1133 390 1192 432">PA</div> <div data-bbox="1133 443 1192 506">NDS</div> Non-Extended Day Supply
ZYVOX 200 MG/100ML SOLUTION	1	
POLYMYXINS		
<i>colistimethate sodium (cba)</i>	1	
<i>polymyxin b sulfate</i>	1	
URINARY ANTI-INFECTIVES		
<i>fosfomicin tromethamine</i>	1	
<i>methenamine hippurate</i>	1	
<i>methenamine mandelate</i>	1	
<i>nitrofurantoin macrocrystal (nitrofurantoin macrocrystal 50 mg cap, nitrofurantoin macrocrystal 100 mg cap)</i>	1	
<i>nitrofurantoin monohyd macro</i>	1	
ANTIANGINAL AGENTS		
ANTIANGINALS-OTHER		
<i>ranolazine er</i>	1	
NITRATES		
<i>isosorbide dinitrate (isosorbide dinitrate 5 mg tab, isosorbide dinitrate 10 mg tab, isosorbide dinitrate 20 mg tab, isosorbide dinitrate 30 mg tab)</i>	1	
<i>isosorbide mononitrate</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ISOSORBIDE MONONITRATE 10 MG TAB	1	
ISOSORBIDE MONONITRATE 20 MG TAB	1	
<i>isosorbide mononitrate er</i>	1	
NITRO-BID	1	
<i>nitroglycerin (nitroglycerin 0.1 mg/hr patch 24hr, nitroglycerin 0.2 mg/hr patch 24hr, nitroglycerin 0.3 mg sl tab, nitroglycerin 0.4 mg sl tab, nitroglycerin 0.4 mg/hr patch 24hr, nitroglycerin 0.4 mg/spray solution, nitroglycerin 0.6 mg sl tab, nitroglycerin 0.6 mg/hr patch 24hr)</i>	1	
ANTI-ANXIETY AGENTS		
ANTI-ANXIETY AGENTS - MISC.		
<i>bupirone hcl (bupirone hcl 5 mg tab, bupirone hcl 7.5 mg tab, bupirone hcl 10 mg tab, bupirone hcl 15 mg tab, bupirone hcl 30 mg tab)</i>	1	
<i>hydroxyzine hcl (hydroxyzine hcl 10 mg tab, hydroxyzine hcl 25 mg tab, hydroxyzine hcl 50 mg tab)</i>	1	
<i>hydroxyzine pamoate (hydroxyzine pamoate 25 mg cap, hydroxyzine pamoate 50 mg cap)</i>	1	
BENZODIAZEPINES		
<i>alprazolam (alprazolam 0.25 mg tab, alprazolam 0.5 mg tab, alprazolam 1 mg tab)</i>	1	<div data-bbox="1133 1591 1188 1623" style="background-color: #8e44ad; color: white; padding: 2px;">QL</div> 120 EA / 30 DAYS <div data-bbox="1133 1644 1188 1675" style="background-color: #f39c12; color: white; padding: 2px;">PA²</div>
<i>alprazolam 2 mg tab</i>	1	<div data-bbox="1133 1717 1188 1749" style="background-color: #8e44ad; color: white; padding: 2px;">QL</div> 150 EA / 30 DAYS <div data-bbox="1133 1770 1188 1801" style="background-color: #f39c12; color: white; padding: 2px;">PA²</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>clorazepate dipotassium</i>	1	QL 180 EA / 30 DAYS PA²
<i>diazepam (diazepam 2 mg tab, diazepam 5 mg tab, diazepam 10 mg tab)</i>	1	QL 120 EA / 30 DAYS PA²
<i>diazepam 5 mg/5ml solution</i>	1	QL 1200 ML / 30 DAYS PA²
<i>diazepam 5 mg/ml conc</i>	1	QL 240 ML / 30 DAYS PA²
<i>diazepam intensol</i>	1	QL 240 ML / 30 DAYS PA²
<i>lorazepam (lorazepam 0.5 mg tab, lorazepam 1 mg tab, lorazepam 2 mg tab)</i>	1	QL 150 EA / 30 DAYS PA²
<i>lorazepam 2 mg/ml conc</i>	1	QL 150 ML / 30 DAYS PA²
<i>lorazepam intensol</i>	1	QL 150 ML / 30 DAYS PA²
<i>oxazepam</i>	1	QL 120 EA / 30 DAYS PA²

ANTIARRHYTHMICS

ANTIARRHYTHMICS TYPE I-A

<i>disopyramide phosphate</i>	1	
<i>quinidine gluconate er</i>	1	
QUINIDINE SULFATE 200 MG TAB	1	
<i>quinidine sulfate 300 mg tab</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
QUINIDINE SULFATE 300 MG TAB	1	
ANTIARRHYTHMICS TYPE I-B		
<i>mexiletine hcl</i>	1	
ANTIARRHYTHMICS TYPE I-C		
<i>flecainide acetate</i>	1	
<i>propafenone hcl</i>	1	
<i>propafenone hcl er</i>	1	
ANTIARRHYTHMICS TYPE III		
<i>amiodarone hcl (amiodarone hcl 100 mg tab, amiodarone hcl 200 mg tab, amiodarone hcl 400 mg tab)</i>	1	
<i>dofetilide</i>	1	
<i>pacerone</i>	1	
ANTIASTHMATIC AND BRONCHODILATOR AGENTS		
ANTI-INFLAMMATORY AGENTS		
<i>cromolyn sodium 20 mg/2ml nebu soln</i>	1	<div data-bbox="1133 1262 1192 1297">PA³</div> <div data-bbox="1133 1310 1192 1346">NDS</div> <div data-bbox="1203 1310 1477 1377">Non-Extended Day Supply</div>
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 10 MG/0.5ML SOLN PRSYR	1	<div data-bbox="1133 1486 1192 1522">PA</div>
FASENRA 30 MG/ML SOLN PRSYR	1	<div data-bbox="1133 1570 1192 1606">PA</div> <div data-bbox="1133 1619 1192 1654">NDS</div> <div data-bbox="1203 1619 1477 1686">Non-Extended Day Supply</div> <div data-bbox="1133 1692 1192 1728">LA</div>






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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
FASENRA PEN	1	PA NDS Non-Extended Day Supply LA
XOLAIR (XOLAIR 300 MG/2ML SOLN A-INJ, XOLAIR 300 MG/2ML SOLN PRSYR)	1	QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply
XOLAIR 150 MG RECON SOLN	1	QL 8 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
XOLAIR 150 MG/ML SOLN A-INJ	1	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
XOLAIR 150 MG/ML SOLN PRSYR	1	QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply LA
XOLAIR 75 MG/0.5ML SOLN A-INJ	1	QL 1 ML / 28 DAYS PA NDS Non-Extended Day Supply
XOLAIR 75 MG/0.5ML SOLN PRSYR	1	QL 1 ML / 28 DAYS PA NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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BRONCHODILATORS - ANTICHOLINERGICS

ATROVENT HFA	1	 25.8 GM / 30 DAYS
INCRUSE ELLIPTA	1	 30 EA / 30 DAYS
<i>ipratropium bromide 0.02 % solution</i>	1	
SPIRIVA HANDIHALER	1	 90 EA / 90 DAYS
SPIRIVA RESPIMAT	1	 4 GM / 30 DAYS








LEUKOTRIENE MODULATORS

<i>montelukast sodium</i>	1	
<i>zafirlukast</i>	1	

SELECTIVE PHOSPHODIESTERASE 4 (PDE4) INHIBITORS

<i>roflumilast</i>	1	
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STEROID INHALANTS

ASMANEX (120 METERED DOSES)	1	 2 EA / 30 DAYS
ASMANEX (30 METERED DOSES)	1	 1 EA / 30 DAYS
ASMANEX (60 METERED DOSES)	1	 1 EA / 30 DAYS
ASMANEX HFA	1	 13 GM / 30 DAYS
<i>budesonide (budesonide 0.25 mg/2ml suspension, budesonide 0.5 mg/2ml suspension, budesonide 1 mg/2ml suspension)</i>	1	 120 ML / 30 DAYS 
FLUTICASONE PROPIONATE HFA (FLUTICASONE PROPIONATE HFA 110 MCG/ACT AEROSOL, FLUTICASONE PROPIONATE HFA 220 MCG/ACT AEROSOL)	1	 24 GM / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
FLUTICASONE PROPIONATE HFA 44 MCG/ACT AEROSOL	1	QL 21.2 GM / 30 DAYS
QVAR REDIHALER 40 MCG/ACT AERO BA	1	QL 10.6 GM / 30 DAYS
QVAR REDIHALER 80 MCG/ACT AERO BA	1	QL 21.2 GM / 30 DAYS
SYMPATHOMIMETICS		
ADVAIR HFA	1	QL 12 GM / 30 DAYS
ALBUTEROL SULFATE (5 MG/ML) 0.5% NEBU SOLN	1	PA ³
<i>albuterol sulfate (albuterol sulfate 0.63 mg/3ml nebu soln, albuterol sulfate 1.25 mg/3ml nebu soln, albuterol sulfate (2.5 mg/3ml) 0.083% nebu soln)</i>	1	PA ³
<i>albuterol sulfate (albuterol sulfate 2 mg tab, albuterol sulfate 2 mg/5ml syrup, albuterol sulfate 4 mg tab)</i>	1	
<i>albuterol sulfate (albuterol sulfate 2.5 mg/0.5ml nebu soln, albuterol sulfate (5 mg/ml) 0.5% nebu soln)</i>	1	PA ³
<i>albuterol sulfate hfa (proair equivalent)</i>	1	QL 17 GM / 30 DAYS
<i>albuterol sulfate hfa (proventil equivalent)</i>	1	QL 13.4 GM / 30 DAYS
ALBUTEROL SULFATE HFA (VENTOLIN EQUIVALENT)	1	QL 36 GM / 30 DAYS
ANORO ELLIPTA	1	QL 60 EA / 30 DAYS
<i>arformoterol tartrate</i>	1	QL 120 ML / 30 DAYS PA ³
BREO ELLIPTA	1	QL 60 EA / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>breyna</i>	1	QL 20.6 GM / 30 DAYS
BREZTRI AEROSPHERE	1	QL 10.7 GM / 30 DAYS
<i>budesonide-formoterol fumarate</i>	1	QL 20.4 GM / 30 DAYS
COMBIVENT RESPIMAT	1	QL 8 GM / 30 DAYS
DULERA	1	QL 26 GM / 30 DAYS
<i>fluticasone-salmeterol (fluticasone-salmeterol 100-50 mcg/act aer pow ba, fluticasone-salmeterol 250-50 mcg/act aer pow ba, fluticasone-salmeterol 500-50 mcg/act aer pow ba)</i>	1	QL 60 EA / 30 DAYS
<i>formoterol fumarate</i>	1	QL 120 ML / 30 DAYS PA ³
<i>ipratropium-albuterol</i>	1	PA ³
<i>levalbuterol hcl (levalbuterol hcl 0.31 mg/3ml nebu soln, levalbuterol hcl 0.63 mg/3ml nebu soln, levalbuterol hcl 1.25 mg/0.5ml nebu soln, levalbuterol hcl 1.25 mg/3ml nebu soln)</i>	1	PA ³
LEVALBUTEROL TARTRATE	1	QL 30 GM / 30 DAYS
STIOLTO RESPIMAT	1	QL 4 GM / 30 DAYS
STRIVERDI RESPIMAT	1	QL 4 GM / 30 DAYS
<i>terbutaline sulfate (terbutaline sulfate 2.5 mg tab, terbutaline sulfate 5 mg tab)</i>	1	
TRELEGY ELLIPTA	1	QL 60 EA / 30 DAYS
VENTOLIN HFA	1	QL 36 GM / 30 DAYS


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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>wixela inhub</i>	1	QL 60 EA / 30 DAYS
XANTHINES		
<i>theophylline</i>	1	
<i>theophylline er (theophylline er 100 mg tab er 12h, theophylline er 200 mg tab er 12h, theophylline er 300 mg tab er 12h, theophylline er 400 mg tab er 24h, theophylline er 450 mg tab er 12h, theophylline er 600 mg tab er 24h)</i>	1	
ANTICOAGULANTS		
COUMARIN ANTICOAGULANTS		
<i>jantoven</i>	1	
<i>warfarin sodium</i>	1	
DIRECT FACTOR XA INHIBITORS		
ELIQUIS	1	
ELIQUIS DVT/PE STARTER PACK	1	
XARELTO (XARELTO 1 MG/ML RECON SUSP, XARELTO 2.5 MG TAB, XARELTO 10 MG TAB, XARELTO 15 MG TAB, XARELTO 20 MG TAB)	1	
XARELTO STARTER PACK	1	

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







NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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HEPARINS AND HEPARINOID-LIKE AGENTS

<i>enoxaparin sodium (enoxaparin sodium 30 mg/0.3ml soln prsyr, enoxaparin sodium 40 mg/0.4ml soln prsyr, enoxaparin sodium 60 mg/0.6ml soln prsyr, enoxaparin sodium 80 mg/0.8ml soln prsyr, enoxaparin sodium 100 mg/ml soln prsyr, enoxaparin sodium 120 mg/0.8ml soln prsyr, enoxaparin sodium 150 mg/ml soln prsyr)</i>	1	
<i>fondaparinux sodium (fondaparinux sodium 5 mg/0.4ml solution, fondaparinux sodium 7.5 mg/0.6ml solution, fondaparinux sodium 10 mg/0.8ml solution)</i>	1	 Non-Extended Day Supply
<i>fondaparinux sodium 2.5 mg/0.5ml solution</i>	1	
<i>heparin sodium (porcine) (heparin sodium (porcine) 1000 unit/ml solution, heparin sodium (porcine) 5000 unit/ml solution, heparin sodium (porcine) 10000 unit/ml solution, heparin sodium (porcine) 20000 unit/ml solution)</i>	1	
<i>heparin sodium (porcine) pf 1000 unit/ml solution</i>	1	

ANTICONSULSANTS

AMPA GLUTAMATE RECEPTOR ANTAGONISTS

FYCOMPA (FYCOMPA 4 MG TAB, FYCOMPA 6 MG TAB)	1	 60 EA / 30 DAYS   Non-Extended Day Supply
FYCOMPA (FYCOMPA 8 MG TAB, FYCOMPA 10 MG TAB, FYCOMPA 12 MG TAB)	1	 30 EA / 30 DAYS   Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
FYCOMPA 0.5 MG/ML SUSPENSION	1	QL 720 ML / 30 DAYS PA² NDS Non-Extended Day Supply
FYCOMPA 2 MG TAB	1	QL 60 EA / 30 DAYS PA²
ANTICONVULSANTS - BENZODIAZEPINES		
<i>clobazam (clobazam 10 mg tab, clobazam 20 mg tab)</i>	1	QL 60 EA / 30 DAYS
<i>clobazam 2.5 mg/ml suspension</i>	1	QL 480 ML / 30 DAYS
<i>clonazepam (clonazepam 0.125 mg tab disp, clonazepam 0.25 mg tab disp, clonazepam 0.5 mg tab, clonazepam 0.5 mg tab disp, clonazepam 1 mg tab, clonazepam 1 mg tab disp)</i>	1	QL 90 EA / 30 DAYS PA²
<i>clonazepam (clonazepam 2 mg tab, clonazepam 2 mg tab disp)</i>	1	QL 300 EA / 30 DAYS PA²
DIAZEPAM (DIAZEPAM 2.5 MG GEL, DIAZEPAM 10 MG GEL, DIAZEPAM 20 MG GEL)	1	QL 10 EA / 30 OVER TIME
LIBERVANT	1	QL 10 EA / 30 DAYS PA²
NAYZILAM	1	QL 10 EA / 30 OVER TIME
SYMPAZAN (SYMPAZAN 10 MG FILM, SYMPAZAN 20 MG FILM)	1	QL 60 EA / 30 DAYS NDS Non-Extended Day Supply
SYMPAZAN 5 MG FILM	1	QL 60 EA / 30 DAYS
VALTOCO 10 MG DOSE	1	QL 10 EA / 30 OVER TIME NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VALTOCO 15 MG DOSE	1	<div data-bbox="1130 317 1192 384">QL</div> 10 EA / 30 OVER TIME <div data-bbox="1130 390 1192 457">NDS</div> Non-Extended Day Supply
VALTOCO 20 MG DOSE	1	<div data-bbox="1130 480 1192 548">QL</div> 10 EA / 30 OVER TIME <div data-bbox="1130 554 1192 621">NDS</div> Non-Extended Day Supply
VALTOCO 5 MG DOSE	1	<div data-bbox="1130 644 1192 711">QL</div> 10 EA / 30 OVER TIME <div data-bbox="1130 718 1192 785">NDS</div> Non-Extended Day Supply
ANTICONSULSANTS - MISC.		
APTIOM (APTIOM 600 MG TAB, APTIOM 800 MG TAB)	1	<div data-bbox="1130 894 1192 961">QL</div> 60 EA / 30 DAYS
APTIOM 200 MG TAB	1	<div data-bbox="1130 978 1192 1045">QL</div> 180 EA / 30 DAYS
APTIOM 400 MG TAB	1	<div data-bbox="1130 1041 1192 1108">QL</div> 90 EA / 30 DAYS
BRIVIACT (BRIVIACT 10 MG TAB, BRIVIACT 25 MG TAB, BRIVIACT 50 MG TAB, BRIVIACT 75 MG TAB, BRIVIACT 100 MG TAB)	1	<div data-bbox="1130 1119 1192 1186">QL</div> 60 EA / 30 DAYS <div data-bbox="1130 1192 1192 1260">NDS</div> Non-Extended Day Supply
BRIVIACT 10 MG/ML SOLUTION	1	<div data-bbox="1130 1278 1192 1346">QL</div> 600 ML / 30 DAYS <div data-bbox="1130 1352 1192 1419">NDS</div> Non-Extended Day Supply
<i>carbamazepine (carbamazepine 100 mg chew tab, carbamazepine 100 mg/5ml suspension, carbamazepine 200 mg tab, carbamazepine 200 mg/10ml suspension)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>carbamazepine er (carbamazepine er 100 mg cap er 12h, carbamazepine er 100 mg tab er 12h, carbamazepine er 200 mg cap er 12h, carbamazepine er 200 mg tab er 12h, carbamazepine er 300 mg cap er 12h, carbamazepine er 400 mg tab er 12h)</i>	1	
DIACOMIT	1	<div data-bbox="1133 569 1190 600">PA²</div> <div data-bbox="1133 621 1190 653">NDS</div> <div data-bbox="1198 621 1479 684">Non-Extended Day Supply</div> <div data-bbox="1133 684 1190 716">LA</div>
EPIDIOLEX	1	<div data-bbox="1133 758 1190 789">PA²</div> <div data-bbox="1133 810 1190 842">LA</div>
<i>epitol</i>	1	
EPRONTIA	1	
FINTEPLA	1	<div data-bbox="1133 989 1190 1020">QL</div> <div data-bbox="1198 989 1471 1020">360 ML / 30 DAYS</div> <div data-bbox="1133 1041 1190 1073">PA²</div> <div data-bbox="1133 1094 1190 1125">NDS</div> <div data-bbox="1198 1094 1479 1157">Non-Extended Day Supply</div> <div data-bbox="1133 1157 1190 1188">LA</div>
<i>gabapentin (gabapentin 100 mg cap, gabapentin 250 mg/5ml solution, gabapentin 300 mg cap, gabapentin 300 mg/6ml solution, gabapentin 400 mg cap, gabapentin 600 mg tab, gabapentin 800 mg tab)</i>	1	
<i>lacosamide (lacosamide 10 mg/ml solution, lacosamide 50 mg tab, lacosamide 50 mg/5ml solution, lacosamide 100 mg tab, lacosamide 100 mg/10ml solution, lacosamide 150 mg tab, lacosamide 200 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>lamotrigine (lamotrigine 5 mg chew tab, lamotrigine 25 mg chew tab, lamotrigine 25 mg tab, lamotrigine 25 mg tab disp, lamotrigine 50 mg tab disp, lamotrigine 100 mg tab, lamotrigine 100 mg tab disp, lamotrigine 150 mg tab, lamotrigine 200 mg tab, lamotrigine 200 mg tab disp)</i>	1	
<i>lamotrigine er (lamotrigine er 25 mg tab er 24h, lamotrigine er 50 mg tab er 24h, lamotrigine er 100 mg tab er 24h, lamotrigine er 200 mg tab er 24h, lamotrigine er 250 mg tab er 24h, lamotrigine er 300 mg tab er 24h)</i>	1	
<i>levetiracetam (levetiracetam 100 mg/ml solution, levetiracetam 250 mg tab, levetiracetam 500 mg tab, levetiracetam 500 mg/5ml solution, levetiracetam 750 mg tab, levetiracetam 1000 mg tab)</i>	1	
<i>levetiracetam er (levetiracetam er 500 mg tab er 24h, levetiracetam er 750 mg tab er 24h)</i>	1	
<i>oxcarbazepine (oxcarbazepine 150 mg tab, oxcarbazepine 300 mg tab, oxcarbazepine 300 mg/5ml suspension, oxcarbazepine 600 mg tab)</i>	1	
<i>pregabalin (pregabalin 20 mg/ml solution, pregabalin 25 mg cap, pregabalin 50 mg cap, pregabalin 75 mg cap, pregabalin 100 mg cap, pregabalin 150 mg cap, pregabalin 200 mg cap, pregabalin 225 mg cap, pregabalin 300 mg cap)</i>	1	
PRIMIDONE (PRIMIDONE 50 MG TAB, PRIMIDONE 125 MG TAB, PRIMIDONE 250 MG TAB)	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>roweepra 500 mg tab</i>	1	
<i>rufinamide (rufinamide 40 mg/ml suspension, rufinamide 400 mg tab)</i>	1	<div data-bbox="1133 373 1192 411">PA²</div> <div data-bbox="1133 422 1479 495">NDS Non-Extended Day Supply</div>
<i>rufinamide 200 mg tab</i>	1	<div data-bbox="1133 510 1192 548">PA²</div>
SPRITAM	1	
<i>topiramate</i>	1	
ZONISADE	1	
<i>zonisamide</i>	1	
ZTALMY	1	<div data-bbox="1133 814 1393 888">QL 1100 ML / 30 DAYS</div> <div data-bbox="1133 888 1192 926">PA²</div> <div data-bbox="1133 936 1479 1010">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1010 1192 1047">LA</div>
CARBAMATES		
<i>felbamate (felbamate 400 mg tab, felbamate 600 mg tab)</i>	1	
<i>felbamate 600 mg/5ml suspension</i>	1	<div data-bbox="1133 1241 1479 1314">NDS Non-Extended Day Supply</div>
XCOPRI (250 MG DAILY DOSE) 100 & 150 MG TAB THPK	1	<div data-bbox="1133 1335 1451 1373">QL 56 EA / 28 DAYS</div> <div data-bbox="1133 1383 1192 1421">PA²</div> <div data-bbox="1133 1432 1479 1505">NDS Non-Extended Day Supply</div>
XCOPRI (350 MG DAILY DOSE)	1	<div data-bbox="1133 1514 1451 1551">QL 56 EA / 28 DAYS</div> <div data-bbox="1133 1562 1192 1600">PA²</div> <div data-bbox="1133 1610 1479 1684">NDS Non-Extended Day Supply</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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XCOPRI (XCOPRI 14 X 12.5 MG & 14 X 25 MG TAB THPK, XCOPRI 14 X 150 MG & 14 X200 MG TAB THPK, XCOPRI 14 X 50 MG & 14 X100 MG TAB THPK)	1	<div data-bbox="1133 365 1192 401">QL</div> 28 EA / 28 DAYS <div data-bbox="1133 415 1192 451">PA²</div>
XCOPRI (XCOPRI 150 MG TAB, XCOPRI 200 MG TAB)	1	<div data-bbox="1133 531 1192 567">QL</div> 60 EA / 30 DAYS <div data-bbox="1133 581 1192 617">PA²</div> <div data-bbox="1133 632 1192 667">NDS</div> Non-Extended Day Supply
XCOPRI (XCOPRI 25 MG TAB, XCOPRI 50 MG TAB, XCOPRI 100 MG TAB)	1	<div data-bbox="1133 720 1192 756">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 770 1192 806">PA²</div> <div data-bbox="1133 821 1192 856">NDS</div> Non-Extended Day Supply

GABA MODULATORS

<i>tiagabine hcl</i>	1	
<i>vigabatrin</i>	1	<div data-bbox="1133 1037 1192 1073">PA²</div> <div data-bbox="1133 1087 1192 1123">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1138 1192 1173">LA</div>
<i>vigadrone</i>	1	<div data-bbox="1133 1226 1192 1262">PA²</div> <div data-bbox="1133 1276 1192 1312">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1327 1192 1362">LA</div>
<i>vigpoder</i>	1	<div data-bbox="1133 1415 1192 1451">PA²</div> <div data-bbox="1133 1465 1192 1501">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1516 1192 1551">LA</div>

HYDANTOINS

DILANTIN 30 MG CAP	1	
<i>phenytek</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>phenytoin (phenytoin 50 mg chew tab, phenytoin 100 mg/4ml suspension, phenytoin 125 mg/5ml suspension)</i>	1	
<i>phenytoin infatabs</i>	1	
<i>phenytoin sodium extended</i>	1	
SUCCINIMIDES		
<i>ethosuximide (ethosuximide 250 mg cap, ethosuximide 250 mg/5ml solution)</i>	1	
<i>methsuximide</i>	1	
VALPROIC ACID		
<i>divalproex sodium</i>	1	
<i>divalproex sodium er</i>	1	
<i>valproic acid (valproic acid 250 mg cap, valproic acid 250 mg/5ml solution)</i>	1	
ANTIDEPRESSANTS		
ALPHA-2 RECEPTOR ANTAGONISTS (TETRACYCLICS)		
<i>mirtazapine</i>	1	
ANTIDEPRESSANT COMBINATIONS		
AUVELITY	1	QL 60 EA / 30 DAYS
ANTIDEPRESSANTS - MISC.		
<i>bupropion hcl</i>	1	
<i>bupropion hcl er (smoking det)</i>	1	
<i>bupropion hcl er (sr) (bupropion hcl er (sr) 100 mg tab er 12h, bupropion hcl er (sr) 150 mg tab er 12h, bupropion hcl er (sr) 200 mg tab er 12h)</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>bupropion hcl er (xl) (bupropion hcl er (xl) 150 mg tab er 24h, bupropion hcl er (xl) 300 mg tab er 24h)</i>	1	
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GABA RECEPTOR MODULATOR - NEUROACTIVE STEROID

ZURZUVAE (ZURZUVAE 20 MG CAP, ZURZUVAE 25 MG CAP)	1	<div data-bbox="1133 520 1190 583">QL</div> 28 EA / 14 OVER TIME <div data-bbox="1133 594 1190 636">PA²</div> <div data-bbox="1133 646 1190 709">NDS</div> Non-Extended Day Supply
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ZURZUVAE 30 MG CAP	1	<div data-bbox="1133 730 1190 793">QL</div> 14 EA / 14 OVER TIME <div data-bbox="1133 804 1190 846">PA²</div> <div data-bbox="1133 856 1190 919">NDS</div> Non-Extended Day Supply
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MONOAMINE OXIDASE INHIBITORS (MAOIS)

EMSAM	1	<div data-bbox="1133 1014 1190 1077">NDS</div> Non-Extended Day Supply
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MARPLAN	1	
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PHENELZINE SULFATE	1	
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<i>tranylcypromine sulfate</i>	1	
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SELECTIVE SEROTONIN REUPTAKE INHIBITORS (SSRIS)

<i>citalopram hydrobromide (citalopram hydrobromide 10 mg tab, citalopram hydrobromide 10 mg/5ml solution, citalopram hydrobromide 20 mg tab, citalopram hydrobromide 40 mg tab)</i>	1	
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<i>escitalopram oxalate (escitalopram oxalate 5 mg tab, escitalopram oxalate 5 mg/5ml solution, escitalopram oxalate 10 mg tab, escitalopram oxalate 20 mg tab)</i>	1	
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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>fluoxetine hcl (fluoxetine hcl 10 mg cap, fluoxetine hcl 20 mg cap, fluoxetine hcl 20 mg/5ml solution, fluoxetine hcl 40 mg cap, fluoxetine hcl 90 mg cap dr)</i>	1	
<i>fluvoxamine maleate (fluvoxamine maleate 25 mg tab, fluvoxamine maleate 50 mg tab, fluvoxamine maleate 100 mg tab)</i>	1	
<i>fluvoxamine maleate er (fluvoxamine maleate er 100 mg cap er 24h, fluvoxamine maleate er 150 mg cap er 24h)</i>	1	
<i>paroxetine hcl (paroxetine hcl 10 mg tab, paroxetine hcl 10 mg/5ml suspension, paroxetine hcl 20 mg tab, paroxetine hcl 30 mg tab, paroxetine hcl 40 mg tab)</i>	1	
<i>paroxetine hcl er</i>	1	
<i>sertraline hcl (sertraline hcl 20 mg/ml conc, sertraline hcl 25 mg tab, sertraline hcl 50 mg tab, sertraline hcl 100 mg tab)</i>	1	

SEROTONIN MODULATORS

NEFAZODONE HCL	1	
<i>trazodone hcl (trazodone hcl 50 mg tab, trazodone hcl 100 mg tab, trazodone hcl 150 mg tab, trazodone hcl 300 mg tab)</i>	1	
TRINTELLIX	1	QL 30 EA / 30 DAYS
<i>vilazodone hcl</i>	1	QL 30 EA / 30 DAYS

SEROTONIN-NOREPINEPHRINE REUPTAKE INHIBITORS (SNRIS)

<i>desvenlafaxine succinate er</i>	1	
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>duloxetine hcl (duloxetine hcl 20 mg cp dr part, duloxetine hcl 30 mg cp dr part, duloxetine hcl 60 mg cp dr part)</i>	1	
FETZIMA	1	QL 30 EA / 30 DAYS
FETZIMA TITRATION	1	QL 28 EA / 180 OVER TIME
<i>venlafaxine hcl</i>	1	
<i>venlafaxine hcl er (venlafaxine hcl er 37.5 mg cap er 24h, venlafaxine hcl er 75 mg cap er 24h, venlafaxine hcl er 150 mg cap er 24h)</i>	1	
TRICYCLIC AGENTS		
<i>amitriptyline hcl</i>	1	
<i>amoxapine</i>	1	
<i>clomipramine hcl</i>	1	
<i>desipramine hcl</i>	1	
<i>doxepin hcl (doxepin hcl 10 mg cap, doxepin hcl 10 mg/ml conc, doxepin hcl 25 mg cap, doxepin hcl 50 mg cap, doxepin hcl 75 mg cap, doxepin hcl 100 mg cap, doxepin hcl 150 mg cap)</i>	1	
<i>imipramine hcl</i>	1	
<i>imipramine pamoate</i>	1	
<i>nortriptyline hcl (nortriptyline hcl 10 mg cap, nortriptyline hcl 10 mg/5ml solution, nortriptyline hcl 25 mg cap, nortriptyline hcl 50 mg cap, nortriptyline hcl 75 mg cap)</i>	1	
<i>protriptyline hcl</i>	1	
<i>trimipramine maleate</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTIDIABETICS		
ALPHA-GLUCOSIDASE INHIBITORS		
<i>acarbose</i>	1	
MIGLITOL	1	
ANTIDIABETIC COMBINATIONS		
<i>glipizide-metformin hcl</i>	1	
GLYXAMBI	1	QL 30 EA / 30 DAYS
INVOKAMET	1	QL 60 EA / 30 DAYS
INVOKAMET XR	1	QL 60 EA / 30 DAYS
JANUMET	1	QL 60 EA / 30 DAYS
JANUMET XR (JANUMET XR 50-1000 MG TAB ER 24H, JANUMET XR 50-500 MG TAB ER 24H)	1	QL 60 EA / 30 DAYS
JANUMET XR 100-1000 MG TAB ER 24H	1	QL 30 EA / 30 DAYS
JENTADUETO (JENTADUETO 2.5-1000 MG TAB, JENTADUETO 2.5-500 MG TAB)	1	QL 60 EA / 30 DAYS
JENTADUETO XR 2.5-1000 MG TAB ER 24H	1	QL 60 EA / 30 DAYS
JENTADUETO XR 5-1000 MG TAB ER 24H	1	QL 30 EA / 30 DAYS
<i>pioglitazone hcl-glimepiride</i>	1	
<i>pioglitazone hcl-metformin hcl</i>	1	
SOLIQUA	1	QL 90 ML / 30 DAYS
		INS \$35 Insulin

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SYNJARDY	1	QL 60 EA / 30 DAYS
SYNJARDY XR (SYNJARDY XR 5-1000 MG TAB ER 24H, SYNJARDY XR 10-1000 MG TAB ER 24H, SYNJARDY XR 12.5-1000 MG TAB ER 24H)	1	QL 60 EA / 30 DAYS
SYNJARDY XR 25-1000 MG TAB ER 24H	1	QL 30 EA / 30 DAYS
TRIJARDY XR (TRIJARDY XR 10-5-1000 MG TAB ER 24H, TRIJARDY XR 25-5-1000 MG TAB ER 24H)	1	QL 30 EA / 30 DAYS
TRIJARDY XR (TRIJARDY XR 5-2.5-1000 MG TAB ER 24H, TRIJARDY XR 12.5-2.5-1000 MG TAB ER 24H)	1	QL 60 EA / 30 DAYS
BIGUANIDES		
<i>metformin hcl (metformin hcl 500 mg tab, metformin hcl 850 mg tab, metformin hcl 1000 mg tab)</i>	1	
<i>metformin hcl er</i>	1	
DIABETIC OTHER		
<i>diazoxide</i>	1	
GLUCAGON EMERGENCY 1 MG KIT	1	
<i>glucose (dextrose)</i>	OTC	
GVOKE HYPOPEN 1-PACK	1	
GVOKE HYPOPEN 2-PACK	1	
GVOKE KIT	1	






















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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
GVOKE PFS	1	
KORLYM	1	<p>QL 120 EA / 30 DAYS</p> <p>PA</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
<i>mifepristone 300 mg tab</i>	1	<p>QL 120 EA / 30 DAYS</p> <p>PA</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
DIPEPTIDYL PEPTIDASE-4 (DPP-4) INHIBITORS		
JANUVIA	1	QL 30 EA / 30 DAYS
TRADJENTA	1	QL 30 EA / 30 DAYS
DOPAMINE RECEPTOR AGONISTS - ANTIDIABETIC		
CYCLOSET	1	QL 180 EA / 30 DAYS
INCRETIN MIMETIC AGENTS		
BYDUREON BCISE	1	<p>QL 4 ML / 28 DAYS</p> <p>PA</p>
MOUNJARO	1	<p>QL 2 ML / 28 DAYS</p> <p>PA</p>
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN	1	<p>QL 3 ML / 28 DAYS</p> <p>PA</p>
OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN	1	<p>QL 3 ML / 28 DAYS</p> <p>PA</p>
OZEMPIC (2 MG/DOSE)	1	<p>QL 3 ML / 28 DAYS</p> <p>PA</p>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
RYBELSUS	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 30 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
TRULICITY	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 2 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
VICTOZA	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> 9 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA</div> </div>
INSULIN		
HUMULIN R U-500 (CONCENTRATED)	1	<div style="display: flex; align-items: center; margin-bottom: 5px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
HUMULIN R U-500 KWIKPEN	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
INSULIN ASP PROT & ASP FLEXPEN	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
INSULIN ASPART	1	<div style="display: flex; align-items: center; margin-bottom: 5px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
INSULIN ASPART FLEXPEN	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
INSULIN ASPART PENFILL	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
INSULIN ASPART PROT & ASPART	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
LANTUS	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
LANTUS SOLOSTAR	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
NOVOLIN 70/30	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
NOVOLIN 70/30 FLEXPEN	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
NOVOLIN 70/30 FLEXPEN RELION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>
NOVOLIN 70/30 RELION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; margin-right: 5px;">INS</div> \$35 Insulin </div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
NOVOLIN N	1	 \$35 Insulin
NOVOLIN N FLEXPEN	1	 \$35 Insulin
NOVOLIN N FLEXPEN RELION	1	 \$35 Insulin
NOVOLIN N RELION	1	 \$35 Insulin
NOVOLIN R	1	 \$35 Insulin
NOVOLIN R FLEXPEN	1	 \$35 Insulin
NOVOLIN R FLEXPEN RELION	1	 \$35 Insulin
NOVOLIN R RELION	1	 \$35 Insulin
NOVOLOG	1	  \$35 Insulin
NOVOLOG 70/30 FLEXPEN RELION	1	 \$35 Insulin
NOVOLOG FLEXPEN	1	 \$35 Insulin
NOVOLOG FLEXPEN RELION	1	 \$35 Insulin
NOVOLOG MIX 70/30	1	 \$35 Insulin
NOVOLOG MIX 70/30 FLEXPEN	1	 \$35 Insulin
NOVOLOG MIX 70/30 RELION	1	 \$35 Insulin
NOVOLOG PENFILL	1	 \$35 Insulin
NOVOLOG RELION	1	  \$35 Insulin
TOUJEO MAX SOLOSTAR	1	 \$35 Insulin
TOUJEO SOLOSTAR	1	 \$35 Insulin

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
INSULIN SENSITIZING AGENTS		
<i>pioglitazone hcl</i>	1	
MEGLITINIDE ANALOGUES		
<i>nateglinide</i>	1	
<i>repaglinide</i>	1	
SODIUM-GLUCOSE CO-TRANSPORTER 2 (SGLT2) INHIBITORS		
INVOKANA	1	QL 30 EA / 30 DAYS
JARDIANCE	1	QL 30 EA / 30 DAYS
SULFONYLUREAS		
<i>glimepiride</i>	1	
<i>glipizide (glipizide 5 mg tab, glipizide 10 mg tab)</i>	1	
<i>glipizide er (glipizide er 2.5 mg tab er 24h, glipizide er 5 mg tab er 24h, glipizide er 10 mg tab er 24h)</i>	1	
<i>glipizide xl</i>	1	
ANTIDIARRHEAL/PROBIOTIC AGENTS		
ANTIDIARRHEAL/PROBIOTIC AGENTS - MISC.		
<i>bismuth subsalicylate (pepto-bismol)</i>	OTC	
ANTIPERISTALTIC AGENTS		
<i>diphenoxylate-atropine (diphenoxylate-atropine 2.5-0.025 mg tab, diphenoxylate-atropine 2.5-0.025 mg/5ml liquid)</i>	1	
<i>loperamide (immodium)</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>loperamide (immodium) rx only</i>	1	
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ANTIDOTES AND SPECIFIC ANTAGONISTS

ANTIDOTES - CHELATING AGENTS

CHEMET	1	
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<i>deferasirox (deferasirox 180 mg tab, deferasirox 360 mg tab)</i>	1	
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PA

NDS

Non-Extended Day Supply

<i>deferasirox 90 mg tab</i>	1	
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PA

<i>deferiprone</i>	1	
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PA

NDS

Non-Extended Day Supply

LA

OPIOID ANTAGONISTS

KLOXXADO	1	
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NALOXONE HCL (NALOXONE HCL 0.4 MG/ML SOLN CART, NALOXONE HCL 0.4 MG/ML SOLN PRSYR, NALOXONE HCL 0.4 MG/ML SOLUTION, NALOXONE HCL 2 MG/2ML SOLN PRSYR, NALOXONE HCL 4 MG/10ML SOLUTION)	1	
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<i>naloxone hcl 4 mg/0.1ml liquid</i>	OTC	
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<i>naltrexone hcl</i>	1	
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NARCAN	OTC	
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OPVEE	1	
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RIVIVE	OTC	
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VIVITROL	1	 Non-Extended Day Supply
ZIMHI	1	
ANTIEMETICS		
5-HT3 RECEPTOR ANTAGONISTS		
<i>granisetron hcl 1 mg tab</i>	1	 60 EA / 30 DAYS 
<i>ondansetron (ondansetron 4 mg tab disp, ondansetron 8 mg tab disp)</i>	1	
<i>ondansetron hcl (ondansetron hcl 4 mg tab, ondansetron hcl 4 mg/5ml solution)</i>	1	
<i>ondansetron hcl 8 mg tab</i>	1	
ANTIEMETICS - ANTICHOLINERGIC		
<i>dimenhydrinate (dramamine)</i>	OTC	
<i>meclizine</i>	OTC	
<i>meclizine rx only</i>	1	
<i>scopolamine</i>	1	
ANTIEMETICS - MISCELLANEOUS		
<i>doxylamine-pyridoxine</i>	1	
<i>dronabinol</i>	1	 60 EA / 30 DAYS 
SUBSTANCE P/NEUROKININ 1 (NK1) RECEPTOR ANTAGONISTS		
<i>aprepitant (aprepitant 40 mg cap, aprepitant 125 mg cap)</i>	1	 3 EA / 2 OVER TIME 

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>aprepitant (aprepitant 80 & 125 mg cap, aprepitant 80 & 125 mg misc, aprepitant 80 mg cap)</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>6 EA / 4 OVER TIME</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div>
VARUBI (180 MG DOSE)	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div>4 EA / 28 OVER TIME</div> </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div>
ANTIFUNGALS		
ANTIFUNGAL - GLUCAN SYNTHESIS INHIBITORS		
<i>casprofungin acetate 50 mg recon soln</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>
<i>casprofungin acetate 70 mg recon soln</i>	1	
<i>micafungin sodium</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>
ANTIFUNGALS		
ABELCET	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div>
AMPHOTERICIN B	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> </div>
<i>flucytosine</i>	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>
<i>griseofulvin microsize (griseofulvin microsize 125 mg/5ml suspension, griseofulvin microsize 500 mg tab)</i>	1	
<i>griseofulvin ultramicrosize</i>	1	
<i>nystatin 500000 unit tab</i>	1	
<i>terbinafine hcl 250 mg tab</i>	1	
IMIDAZOLE-RELATED ANTIFUNGALS		
CRESEMBA 372 MG RECON SOLN	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c48e3a; color: white; padding: 2px 5px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>fluconazole (fluconazole 10 mg/ml recon susp, fluconazole 40 mg/ml recon susp, fluconazole 50 mg tab, fluconazole 100 mg tab, fluconazole 150 mg tab, fluconazole 200 mg tab)</i>	1	
<i>fluconazole in sodium chloride (fluconazole in sodium chloride 100-0.9 mg/50ml-% solution, fluconazole in sodium chloride 200-0.9 mg/100ml-% solution, fluconazole in sodium chloride 400-0.9 mg/200ml-% solution)</i>	1	
<i>itraconazole (itraconazole 10 mg/ml solution, itraconazole 100 mg cap)</i>	1	PA
<i>ketoconazole 200 mg tab</i>	1	
<i>posaconazole 100 mg tab dr</i>	1	PA NDS Non-Extended Day Supply
<i>voriconazole (voriconazole 50 mg tab, voriconazole 200 mg tab)</i>	1	PA
<i>voriconazole 200 mg recon soln</i>	1	PA NDS Non-Extended Day Supply
<i>voriconazole 40 mg/ml recon susp</i>	1	PA NDS Non-Extended Day Supply

ANTIHISTAMINES

ANTIHISTAMINES - ALKYLAMINES

<i>chlorpheniramine</i>	OTC	
<i>dexbrompheniramine</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTIHISTAMINES - ETHANOLAMINES		
<i>clemastine fumarate</i>	OTC	
<i>diphenhydramine (benadryl)</i>	OTC	
<i>diphenhydramine</i>	OTC	
ANTIHISTAMINES - NON-SEDATING		
<i>cetirizine (zyrtec)</i>	OTC	
<i>cetirizine (zyrtec) rx only</i>	1	
<i>desloratadine 5 mg tab</i>	1	
<i>fexofenadine (allegra)</i>	OTC	
<i>levocetirizine (xyzal)</i>	OTC	
<i>levocetirizine (xyzal) rx only</i>	1	
<i>loratadine (claritin)</i>	OTC	
ANTIHISTAMINES - PHENOTHIAZINES		
<i>promethazine hcl (promethazine hcl 25 mg/ml solution, promethazine hcl 50 mg/ml solution)</i>	1*	
<i>promethazine hcl (promethazine hcl 6.25 mg/5ml solution, promethazine hcl 12.5 mg suppos, promethazine hcl 12.5 mg tab, promethazine hcl 25 mg suppos, promethazine hcl 25 mg tab, promethazine hcl 50 mg tab)</i>	1	
ANTIHYPERLIPIDEMICS		
ANTIHYPERLIPIDEMICS - COMBINATIONS		
<i>ezetimibe-simvastatin</i>	1	QL 30 EA / 30 DAYS



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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTIHYPERLIPIDEMICS - MISC.		
<i>icosapent ethyl</i>	1	
<i>omega-3-acid ethyl esters</i>	1	
BILE ACID SEQUESTRANTS		
<i>cholestyramine (cholestyramine 4 gm packet, cholestyramine 4 gm/dose powder)</i>	1	
<i>cholestyramine light (cholestyramine light 4 gm packet, cholestyramine light 4 gm/dose powder)</i>	1	
<i>colesevelam hcl</i>	1	
<i>colestipol hcl (colestipol hcl 1 gm tab, colestipol hcl 5 gm granules, colestipol hcl 5 gm packet)</i>	1	
<i>prevalite (prevalite 4 gm packet, prevalite 4 gm/dose powder)</i>	1	
FIBRIC ACID DERIVATIVES		
<i>fenofibrate (fenofibrate 48 mg tab, fenofibrate 54 mg tab, fenofibrate 67 mg cap, fenofibrate 134 mg cap, fenofibrate 145 mg tab, fenofibrate 160 mg tab, fenofibrate 200 mg cap)</i>	1	
<i>fenofibrate micronized (fenofibrate micronized 43 mg cap, fenofibrate micronized 67 mg cap, fenofibrate micronized 134 mg cap, fenofibrate micronized 200 mg cap)</i>	1	
<i>fenofibric acid (fenofibric acid 45 mg cap dr, fenofibric acid 135 mg cap dr)</i>	1	
<i>gemfibrozil</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HMG COA REDUCTASE INHIBITORS		
<i>atorvastatin calcium</i>	1	
<i>fluvastatin sodium</i>	1	
<i>lovastatin (lovastatin 20 mg tab, lovastatin 40 mg tab)</i>	1	QL 60 EA / 30 DAYS
<i>lovastatin 10 mg tab</i>	1	QL 30 EA / 30 DAYS
<i>pravastatin sodium</i>	1	
<i>rosuvastatin calcium</i>	1	
<i>simvastatin</i>	1	
INTESTINAL CHOLESTEROL ABSORPTION INHIBITORS		
<i>ezetimibe</i>	1	QL 30 EA / 30 DAYS
NICOTINIC ACID DERIVATIVES		
<i>niacin er (antihyperlipidemic)</i>	1	
PROPROTEIN CONVERTASE SUBTILISIN/KEXIN TYPE 9 INHIBITORS		
PRALUENT	1	QL 2 ML / 28 DAYS PA
REPATHA	1	QL 6 ML / 28 DAYS PA
REPATHA PUSHTRONEX SYSTEM	1	QL 7 ML / 28 DAYS PA
REPATHA SURECLICK	1	QL 6 ML / 28 DAYS PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTIHYPERTENSIVES		
ACE INHIBITORS		
<i>benazepril hcl</i>	1	
<i>captopril</i>	1	
<i>enalapril maleate (enalapril maleate 2.5 mg tab, enalapril maleate 5 mg tab, enalapril maleate 10 mg tab, enalapril maleate 20 mg tab)</i>	1	
<i>fosinopril sodium</i>	1	
<i>lisinopril</i>	1	
<i>moexipril hcl</i>	1	
<i>perindopril erbumine (perindopril erbumine 4 mg tab, perindopril erbumine 8 mg tab)</i>	1	
PERINDOPRIL ERBUMINE 2 MG TAB	1	
PERINDOPRIL ERBUMINE 8 MG TAB	1	
<i>quinapril hcl</i>	1	
<i>ramipril</i>	1	
<i>trandolapril</i>	1	
AGENTS FOR PHEOCHROMOCYTOMA		
<i>metyrosine</i>	1	 Non-Extended Day Supply
<i>phenoxybenzamine hcl</i>	1	 Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANGIOTENSIN II RECEPTOR ANTAGONISTS		
<i>candesartan cilexetil</i>	1	
<i>irbesartan</i>	1	
<i>losartan potassium</i>	1	
<i>olmesartan medoxomil</i>	1	
<i>telmisartan</i>	1	
<i>valsartan (valsartan 40 mg tab, valsartan 80 mg tab, valsartan 160 mg tab, valsartan 320 mg tab)</i>	1	
ANTIADRENERGIC ANTIHYPERTENSIVES		
<i>clonidine tablet</i>	1	
<i>clonidine weekly patch</i>	1	
<i>doxazosin mesylate</i>	1	
<i>guanfacine hcl (guanfacine hcl 1 mg tab, guanfacine hcl 2 mg tab)</i>	1	
<i>prazosin hcl</i>	1	
<i>terazosin hcl</i>	1	
ANTIHYPERTENSIVE COMBINATIONS		
<i>amlodipine besy-benazepril hcl</i>	1	
<i>amlodipine besylate-valsartan (amlodipine besylate-valsartan 5-160 mg tab, amlodipine besylate-valsartan 5-320 mg tab, amlodipine besylate-valsartan 10-160 mg tab, amlodipine besylate-valsartan 10-320 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>amlodipine-olmesartan (amlodipine-olmesartan 5-20 mg tab, amlodipine-olmesartan 5-40 mg tab, amlodipine-olmesartan 10-20 mg tab, amlodipine-olmesartan 10-40 mg tab)</i>	1	
<i>amlodipine-valsartan-hctz (amlodipine-valsartan-hctz 5-160-12.5 mg tab, amlodipine-valsartan-hctz 5-160-25 mg tab, amlodipine-valsartan-hctz 10-160-12.5 mg tab, amlodipine-valsartan-hctz 10-160-25 mg tab, amlodipine-valsartan-hctz 10-320-25 mg tab)</i>	1	
<i>atenolol-chlorthalidone</i>	1	
<i>benazepril-hydrochlorothiazide (benazepril-hydrochlorothiazide 5-6.25 mg tab, benazepril-hydrochlorothiazide 10-12.5 mg tab, benazepril-hydrochlorothiazide 20-12.5 mg tab, benazepril-hydrochlorothiazide 20-25 mg tab)</i>	1	
<i>bisoprolol-hydrochlorothiazide (bisoprolol-hydrochlorothiazide 2.5-6.25 mg tab, bisoprolol-hydrochlorothiazide 5-6.25 mg tab, bisoprolol-hydrochlorothiazide 10-6.25 mg tab)</i>	1	
<i>candesartan cilexetil-hctz</i>	1	
<i>enalapril-hydrochlorothiazide</i>	1	
<i>fosinopril sodium-hctz</i>	1	
<i>irbesartan-hydrochlorothiazide</i>	1	
<i>lisinopril-hydrochlorothiazide (lisinopril-hydrochlorothiazide 10-12.5 mg tab, lisinopril-hydrochlorothiazide 20-12.5 mg tab, lisinopril-hydrochlorothiazide 20-25 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>losartan potassium-hctz</i>	1	
<i>metoprolol-hydrochlorothiazide</i>	1	
<i>olmesartan medoxomil-hctz</i>	1	
<i>olmesartan-amlodipine-hctz</i>	1	
TELMISARTAN-AMLODIPINE	1	
<i>telmisartan-hctz</i>	1	
<i>valsartan-hydrochlorothiazide</i>	1	
DIRECT RENIN INHIBITORS		
<i>aliskiren fumarate</i>	1	
SELECTIVE ALDOSTERONE RECEPTOR ANTAGONISTS (SARAS)		
<i>eplerenone</i>	1	
VASODILATORS		
<i>hydralazine hcl (hydralazine hcl 10 mg tab, hydralazine hcl 25 mg tab, hydralazine hcl 50 mg tab, hydralazine hcl 100 mg tab)</i>	1	
<i>minoxidil</i>	1	
ANTIMALARIALS		
ANTIMALARIAL COMBINATIONS		
<i>atovaquone-proguanil hcl</i>	1	
COARTEM	1	
ANTIMALARIALS		
<i>chloroquine phosphate</i>	1	
<i>hydroxychloroquine sulfate 200 mg tab</i>	1	
<i>mefloquine hcl</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>primaquine phosphate</i>	1	
PRIMAQUINE PHOSPHATE 26.3 (15 BASE) MG TAB	1	
<i>pyrimethamine</i>	1	<div data-bbox="1133 474 1195 512">PA</div> <div data-bbox="1133 527 1195 585">NDS</div> <div data-bbox="1203 527 1479 590">Non-Extended Day Supply</div> <div data-bbox="1133 596 1195 634">LA</div>
<i>quinine sulfate</i>	1	<div data-bbox="1133 659 1195 697">PA</div>
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
ANTIMYASTHENIC/CHOLINERGIC AGENTS		
FIRDAPSE	1	<div data-bbox="1133 873 1195 911">PA</div> <div data-bbox="1133 926 1195 984">NDS</div> <div data-bbox="1203 926 1479 989">Non-Extended Day Supply</div>
<i>pyridostigmine bromide (pyridostigmine bromide 60 mg tab, pyridostigmine bromide 60 mg/5ml solution)</i>	1	
<i>pyridostigmine bromide er</i>	1	
ANTIMYCOBACTERIAL AGENTS		
ANTIMYCOBACTERIAL AGENTS		
<i>ethambutol hcl</i>	1	
ISONIAZID (ISONIAZID 100 MG TAB, ISONIAZID 100 MG/ML SOLUTION)	1	
<i>isoniazid 300mg tab</i>	1	
<i>isoniazid 50mg/5ml syrup</i>	1	
PASER	1	
PRIFTIN	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>pyrazinamide</i>	1	
<i>rifabutin</i>	1	
<i>rifampin</i>	1	
SIRTURO	1	<div style="display: flex; align-items: center;"> <div style="margin-right: 5px;">PA</div> <div style="margin-right: 5px;">NDS</div> <div style="margin-right: 5px;">LA</div> <div>Non-Extended Day Supply</div> </div>
TRECTOR	1	
ANTINEOPLASTICS AND ADJUNCTIVE THERAPIES		
ALKYLATING AGENTS		
CYCLOPHOSPHAMIDE (CYCLOPHOSPHAMIDE 25 MG TAB, CYCLOPHOSPHAMIDE 50 MG TAB)	1	PA ³
<i>cyclophosphamide 25 mg cap</i>	1	PA ³
<i>cyclophosphamide 50 mg cap</i>	1	PA ³
GLEOSTINE	1	NDS Non-Extended Day Supply
LEUKERAN	1	
<i>temozolomide</i>	Part B Covered	
ANTIMETABOLITES		
<i>capecitabine</i>	Part B Covered	
<i>mercaptopurine</i>	1	
<i>methotrexate sodium (methotrexate sodium 2.5 mg tab, methotrexate sodium 50 mg/2ml solution)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>methotrexate sodium (pf) 50 mg/2ml solution</i>	1	
ONUREG	1	<ul style="list-style-type: none"> QL 14 EA / 28 DAYS PA² NDS Non-Extended Day Supply
PURIXAN	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply LA
TABLOID	1	
XATMEP	1	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1 MG CAP	1	<ul style="list-style-type: none"> QL 84 EA / 28 DAYS PA² NDS Non-Extended Day Supply
FRUZAQLA 5 MG CAP	1	<ul style="list-style-type: none"> QL 21 EA / 28 DAYS PA² NDS Non-Extended Day Supply
INLYTA 1 MG TAB	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
INLYTA 5 MG TAB	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
LENVIMA (10 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LENVIMA (12 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LENVIMA (14 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LENVIMA (18 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LENVIMA (20 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LENVIMA (24 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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LENVIMA (8 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
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ANTINEOPLASTIC - ANTI-HER2 AGENTS

TUKYSA	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
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ANTINEOPLASTIC - BCL-2 INHIBITORS

VENCLEXTA 10 MG TAB	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² LA
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VENCLEXTA 100 MG TAB	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
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VENCLEXTA 50 MG TAB	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
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VENCLEXTA STARTING PACK	1	<ul style="list-style-type: none"> QL 42 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ANTINEOPLASTIC - EGFR INHIBITORS

<i>erlotinib hcl (erlotinib hcl 100 mg tab, erlotinib hcl 150 mg tab)</i>	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
<i>erlotinib hcl 25 mg tab</i>	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply
EXKIVITY	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
<i>gefitinib</i>	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
GILOTRIF	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
TAGRISSO	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
VIZIMPRO	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ANTINEOPLASTIC - HEDGEHOG PATHWAY INHIBITORS

DAURISMO	1	PA ² NDS Non-Extended Day Supply LA
ERIVEDGE	1	PA ² NDS Non-Extended Day Supply LA
ODOMZO	1	PA ² NDS Non-Extended Day Supply

ANTINEOPLASTIC - HORMONAL AND RELATED AGENTS

<i>abiraterone acetate 250 mg tab</i>	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>abiraterone acetate 500 mg tab</i>	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
AKEEGA	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>anastrozole</i>	1	
<i>bicalutamide</i>	1	
ELIGARD 22.5 MG KIT	1	QL 1 EA / 84 OVER TIME





















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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ELIGARD 30 MG KIT	1	 1 EA / 112 OVER TIME
ELIGARD 45 MG KIT	1	 1 EA / 168 OVER TIME
ELIGARD 7.5 MG KIT	1	 1 EA / 28 DAYS
EMCYT	1	 Non-Extended Day Supply
ERLEADA 240 MG TAB	1	 30 EA / 30 DAYS
		
		 Non-Extended Day Supply
		
ERLEADA 60 MG TAB	1	 120 EA / 30 DAYS
		
		 Non-Extended Day Supply
		
<i>exemestane</i>	1	
FIRMAGON	1	
FIRMAGON (240 MG DOSE)	1	
<i>letrozole</i>	1	
LUPRON DEPOT (1-MONTH) 3.75 MG KIT	1	 1 EA / 28 DAYS
		 Non-Extended Day Supply
LUPRON DEPOT (3-MONTH) 11.25 MG KIT	1	 1 EA / 84 OVER TIME
		 Non-Extended Day Supply
LYSODREN	1	 Non-Extended Day Supply 

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>megestrol acetate (megestrol acetate 20 mg tab, megestrol acetate 40 mg tab)</i>	1	PA ²
<i>megestrol acetate (megestrol acetate 40 mg/ml suspension, megestrol acetate 400 mg/10ml suspension, megestrol acetate 800 mg/20ml suspension)</i>	1	PA
<i>nilutamide</i>	1	PA ² NDS Non-Extended Day Supply
NUBEQA	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
ORGOVYX	1	QL 30 EA / 28 DAYS PA ² NDS Non-Extended Day Supply LA
ORSERDU 345 MG TAB	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
ORSERDU 86 MG TAB	1	QL 90 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
SOLTAMOX	1	NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>tamoxifen citrate</i>	1	
<i>toremifene citrate</i>	1	 Non-Extended Day Supply
TRELSTAR MIXJECT 11.25 MG RECON SUSP	1	 1 EA / 84 OVER TIME
TRELSTAR MIXJECT 22.5 MG RECON SUSP	1	 1 EA / 168 OVER TIME
TRELSTAR MIXJECT 3.75 MG RECON SUSP	1	 1 EA / 28 DAYS
XTANDI (XTANDI 40 MG CAP, XTANDI 40 MG TAB)	1	 120 EA / 30 DAYS   Non-Extended Day Supply 
XTANDI 80 MG TAB	1	 60 EA / 30 DAYS   Non-Extended Day Supply 
ANTINEOPLASTIC - HYPOXIA-INDUCIBLE FACTOR INHIBITORS		
WELIREG	1	 90 EA / 30 DAYS   Non-Extended Day Supply 
ANTINEOPLASTIC - IMMUNOMODULATORS		
POMALYST	1	 21 EA / 28 DAYS   Non-Extended Day Supply 

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ANTINEOPLASTIC - PDGFR-ALPHA INHIBITORS

AYVAKIT	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
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ANTINEOPLASTIC - XPO1 INHIBITORS

XPOVIO (100 MG ONCE WEEKLY) 50 MG TAB THPK	1	<ul style="list-style-type: none"> QL 8 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
XPOVIO (40 MG ONCE WEEKLY) 40 MG TAB THPK	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
XPOVIO (40 MG TWICE WEEKLY) 40 MG TAB THPK	1	<ul style="list-style-type: none"> QL 8 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
XPOVIO (60 MG ONCE WEEKLY) 60 MG TAB THPK	1	<ul style="list-style-type: none"> QL 4 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
XPOVIO (60 MG TWICE WEEKLY)	1	<ul style="list-style-type: none"> QL 24 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
XPOVIO (80 MG ONCE WEEKLY) 40 MG TAB THPK	1	<ul style="list-style-type: none"> QL 8 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
XPOVIO (80 MG TWICE WEEKLY)	1	<ul style="list-style-type: none"> QL 32 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
ANTINEOPLASTIC COMBINATIONS		
INQOVI	1	<ul style="list-style-type: none"> QL 5 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
KISQALI FEMARA (200 MG DOSE)	1	<ul style="list-style-type: none"> QL 49 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply
KISQALI FEMARA (400 MG DOSE)	1	<ul style="list-style-type: none"> QL 70 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply
KISQALI FEMARA (600 MG DOSE)	1	<ul style="list-style-type: none"> QL 91 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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LONSURF	1	<div data-bbox="1133 317 1192 352">PA²</div> <div data-bbox="1133 365 1477 436">NDS Non-Extended Day Supply</div> <div data-bbox="1133 443 1192 478">LA</div>
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ANTINEOPLASTIC ENZYME INHIBITORS

ALECENSA	1	<div data-bbox="1133 575 1469 611">QL 240 EA / 30 DAYS</div> <div data-bbox="1133 623 1192 659">PA²</div> <div data-bbox="1133 672 1477 743">NDS Non-Extended Day Supply</div> <div data-bbox="1133 749 1192 785">LA</div>
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ALUNBRIG (ALUNBRIG 90 & 180 MG TAB THPK, ALUNBRIG 90 MG TAB, ALUNBRIG 180 MG TAB)	1	<div data-bbox="1133 806 1451 842">QL 30 EA / 30 DAYS</div> <div data-bbox="1133 854 1192 890">PA²</div> <div data-bbox="1133 903 1477 974">NDS Non-Extended Day Supply</div> <div data-bbox="1133 980 1192 1016">LA</div>
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ALUNBRIG 30 MG TAB	1	<div data-bbox="1133 1037 1469 1073">QL 120 EA / 30 DAYS</div> <div data-bbox="1133 1085 1192 1121">PA²</div> <div data-bbox="1133 1134 1477 1205">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1211 1192 1247">LA</div>
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AUGTYRO	1	<div data-bbox="1133 1268 1469 1304">QL 240 EA / 30 DAYS</div> <div data-bbox="1133 1316 1192 1352">PA²</div> <div data-bbox="1133 1365 1477 1436">NDS Non-Extended Day Supply</div>
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BALVERSA (BALVERSA 3 MG TAB, BALVERSA 4 MG TAB)	1	<div data-bbox="1133 1457 1451 1493">QL 60 EA / 30 DAYS</div> <div data-bbox="1133 1505 1192 1541">PA²</div> <div data-bbox="1133 1554 1477 1625">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1631 1192 1667">LA</div>
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
BOSULIF (BOSULIF 400 MG TAB, BOSULIF 500 MG TAB)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
BOSULIF 100 MG CAP	1	<ul style="list-style-type: none"> QL 150 EA / 30 DAYS PA² NDS Non-Extended Day Supply
BOSULIF 100 MG TAB	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
BOSULIF 50 MG CAP	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
BRAFTOVI	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
BRUKINSA	1	<ul style="list-style-type: none"> PA² NDS Non-Extended Day Supply LA
CABOMETYX	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
CALQUENCE 100 MG CAP	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
CALQUENCE 100 MG TAB	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
CAPRELSA 100 MG TAB	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
CAPRELSA 300 MG TAB	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
COMETRIQ (100 MG DAILY DOSE)	1	PA ² NDS Non-Extended Day Supply LA
COMETRIQ (140 MG DAILY DOSE)	1	PA ² NDS Non-Extended Day Supply LA
COMETRIQ (60 MG DAILY DOSE)	1	PA ² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
COPIKTRA	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
COTELLIC	1	QL 63 EA / 28 DAYS PA ² NDS Non-Extended Day Supply LA
<i>everolimus (everolimus 2.5 mg tab, everolimus 5 mg tab, everolimus 7.5 mg tab, everolimus 10 mg tab)</i>	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>everolimus 2 mg tab sol</i>	1	QL 150 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>everolimus 3 mg tab sol</i>	1	QL 90 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>everolimus 5 mg tab sol</i>	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
FOTIVDA	1	QL 21 EA / 28 DAYS PA ² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
GAVRETO	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
IBRANCE	1	<ul style="list-style-type: none"> QL 21 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply LA
ICLUSIG	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
IDHIFA	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
<i>imatinib mesylate 100 mg tab</i>	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply
<i>imatinib mesylate 400 mg tab</i>	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply
IMBRUVICA (IMBRUVICA 70 MG CAP, IMBRUVICA 280 MG TAB, IMBRUVICA 420 MG TAB)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
IMBRUVICA 140 MG CAP	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
IMBRUVICA 70 MG/ML SUSPENSION	1	<ul style="list-style-type: none"> QL 324 ML / 30 DAYS PA² NDS Non-Extended Day Supply LA
INREBIC	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
JAKAFI	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
JAYPIRCA 100 MG TAB	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
JAYPIRCA 50 MG TAB	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
KISQALI (400 MG DOSE)	1	<ul style="list-style-type: none"> QL 42 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply
KISQALI (600 MG DOSE)	1	<ul style="list-style-type: none"> QL 63 EA / 28 OVER TIME PA² NDS Non-Extended Day Supply
KOSELUGO 10 MG CAP	1	<ul style="list-style-type: none"> QL 240 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
KOSELUGO 25 MG CAP	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
KRAZATI	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
<i>lapatinib ditosylate</i>	1	<ul style="list-style-type: none"> PA² NDS Non-Extended Day Supply
LORBRENA 100 MG TAB	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
LORBRENA 25 MG TAB	1	QL 90 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
LUMAKRAS 120 MG TAB	1	QL 240 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
LUMAKRAS 320 MG TAB	1	QL 90 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
LYNPARZA	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
LYTGOBI (12 MG DAILY DOSE)	1	QL 84 EA / 28 DAYS PA ² NDS Non-Extended Day Supply
LYTGOBI (16 MG DAILY DOSE)	1	QL 112 EA / 28 DAYS PA ² NDS Non-Extended Day Supply
LYTGOBI (20 MG DAILY DOSE)	1	QL 140 EA / 28 DAYS PA ² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
MEKINIST 0.05 MG/ML RECON SOLN	1	<ul style="list-style-type: none"> QL 1200 ML / 30 DAYS PA² NDS Non-Extended Day Supply
MEKINIST 0.5 MG TAB	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply
MEKINIST 2 MG TAB	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
MEKTOVI	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
NERLYNX	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
NINLARO	1	<ul style="list-style-type: none"> QL 3 EA / 28 DAYS PA² NDS Non-Extended Day Supply LA
OGSIVEO (OGSIVEO 100 MG TAB, OGSIVEO 150 MG TAB)	1	<ul style="list-style-type: none"> QL 56 EA / 28 DAYS PA² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OGSIVEO 50 MG TAB	1	QL 180 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
OJEMDA 100 MG TAB	1	QL 24 EA / 28 DAYS PA ² NDS Non-Extended Day Supply
OJEMDA 25 MG/ML RECON SUSP	1	QL 96 ML / 28 DAYS PA ² NDS Non-Extended Day Supply
OJJAARA	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>pazopanib hcl</i>	1	PA ² NDS Non-Extended Day Supply
PEMAZYRE	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
PIQRAY (200 MG DAILY DOSE)	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
PIQRAY (250 MG DAILY DOSE)	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PIQRAY (300 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply
QINLOCK	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
RETEVMO (RETEVMO 80 MG TAB, RETEVMO 120 MG TAB, RETEVMO 160 MG TAB)	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
RETEVMO 40 MG CAP	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
RETEVMO 40 MG TAB	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
RETEVMO 80 MG CAP	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
REZLIDHIA	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ROZLYTREK 100 MG CAP	1	<ul style="list-style-type: none"> QL 150 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
ROZLYTREK 200 MG CAP	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
ROZLYTREK 50 MG PACKET	1	<ul style="list-style-type: none"> QL 336 EA / 28 DAYS PA² NDS Non-Extended Day Supply
RUBRACA	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
RYDAPT	1	<ul style="list-style-type: none"> QL 224 EA / 28 DAYS PA² NDS Non-Extended Day Supply
SCEMBLIX 100 MG TAB	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply
SCEMBLIX 20 MG TAB	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SCEMBLIX 40 MG TAB	1	QL 300 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>sorafenib tosylate</i>	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
SPRYCEL (SPRYCEL 50 MG TAB, SPRYCEL 70 MG TAB, SPRYCEL 80 MG TAB, SPRYCEL 100 MG TAB, SPRYCEL 140 MG TAB)	1	QL 30 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
SPRYCEL 20 MG TAB	1	QL 90 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
STIVARGA	1	QL 84 EA / 28 DAYS PA ² NDS Non-Extended Day Supply LA
<i>sunitinib malate</i>	1	PA ² NDS Non-Extended Day Supply
TABRECTA	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
TAFINLAR (TAFINLAR 50 MG CAP, TAFINLAR 75 MG CAP)	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
TAFINLAR 10 MG TAB SOL	1	<ul style="list-style-type: none"> QL 840 EA / 28 DAYS PA² NDS Non-Extended Day Supply
TALZENNA (TALZENNA 0.1 MG CAP, TALZENNA 0.35 MG CAP)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
TALZENNA (TALZENNA 0.5 MG CAP, TALZENNA 0.75 MG CAP, TALZENNA 1 MG CAP)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
TALZENNA 0.25 MG CAP	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
TASIGNA	1	<ul style="list-style-type: none"> PA² NDS Non-Extended Day Supply
TAZVERIK	1	<ul style="list-style-type: none"> QL 240 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
TEPMETKO	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
TIBSOVO	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
<i>torpenz</i>	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
TRUQAP	1	<ul style="list-style-type: none"> QL 64 EA / 28 DAYS PA² NDS Non-Extended Day Supply
TURALIO 125 MG CAP	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
VANFLYTA 17.7 MG TAB	1	<ul style="list-style-type: none"> QL 28 EA / 28 DAYS PA² NDS Non-Extended Day Supply
VANFLYTA 26.5 MG TAB	1	<ul style="list-style-type: none"> QL 56 EA / 28 DAYS PA² NDS Non-Extended Day Supply
VERZENIO	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VITRAKVI 100 MG CAP	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
VITRAKVI 20 MG/ML SOLUTION	1	<ul style="list-style-type: none"> QL 300 ML / 30 DAYS PA² NDS Non-Extended Day Supply LA
VITRAKVI 25 MG CAP	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
VONJO	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
XALKORI (XALKORI 20 MG CAP SPRINK, XALKORI 50 MG CAP SPRINK)	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply
XALKORI 150 MG CAP SPRINK	1	<ul style="list-style-type: none"> QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply
XALKORI 200 MG CAP	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
XALKORI 250 MG CAP	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
XOSPATA	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
ZEJULA (ZEJULA 100 MG TAB, ZEJULA 200 MG TAB, ZEJULA 300 MG TAB)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
ZEJULA 100 MG CAP	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
ZELBORAF	1	<ul style="list-style-type: none"> QL 240 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
ZOLINZA	1	<ul style="list-style-type: none"> PA² NDS Non-Extended Day Supply
ZYDELIG	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ZYKADIA	1	<p>QL 90 EA / 30 DAYS</p> <p>PA²</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
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ANTINEOPLASTICS MISC.

ACTIMMUNE	1	<p>PA²</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
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BESREMI	1	<p>QL 2 ML / 28 DAYS</p> <p>PA²</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
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<i>bexarotene 75 mg cap</i>	1	<p>PA²</p> <p>NDS Non-Extended Day Supply</p>
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<i>hydroxyurea</i>	1	
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MATULANE	1	<p>NDS Non-Extended Day Supply</p> <p>LA</p>
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SYNRIBO	1	<p>PA²</p> <p>NDS Non-Extended Day Supply</p> <p>LA</p>
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<i>tretinoin 10 mg cap</i>	1	<p>NDS Non-Extended Day Supply</p>
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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CHEMOTHERAPY RESCUE/ANTIDOTE/PROTECTIVE AGENTS

IWILFIN	1	<div data-bbox="1133 390 1192 422">QL</div> 240 EA / 30 DAYS <div data-bbox="1133 436 1192 468">PA²</div> <div data-bbox="1133 483 1192 514">NDS</div> Non-Extended Day Supply
<i>leucovorin calcium (leucovorin calcium 5 mg tab, leucovorin calcium 10 mg tab, leucovorin calcium 15 mg tab, leucovorin calcium 25 mg tab)</i>	1	
MESNEX 400 MG TAB	1	<div data-bbox="1133 747 1192 779">NDS</div> Non-Extended Day Supply

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON ADJUNCTIVE THERAPY

<i>carbidopa</i>	1	
NOURIANZ	1	<div data-bbox="1133 1041 1192 1073">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 1087 1192 1119">PA</div> <div data-bbox="1133 1134 1192 1165">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1180 1192 1211">LA</div>

ANTIPARKINSON ANTICHOLINERGICS

<i>benztropine mesylate (benztropine mesylate 0.5 mg tab, benztropine mesylate 1 mg tab, benztropine mesylate 2 mg tab)</i>	1	
<i>trihexyphenidyl hcl (trihexyphenidyl hcl 2 mg tab, trihexyphenidyl hcl 5 mg tab)</i>	1	
TRIHXYPHENIDYL HCL 0.4 MG/ML SOLUTION	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ANTIPARKINSON COMT INHIBITORS

<i>entacapone</i>	1	
<i>tolcapone</i>	1	<div data-bbox="1133 447 1195 485">PA</div> <div data-bbox="1133 495 1195 558">NDS</div> <div data-bbox="1203 495 1479 558">Non-Extended Day Supply</div>

ANTIPARKINSON DOPAMINERGICS

<i>amantadine hcl (amantadine hcl 50 mg/5ml solution, amantadine hcl 100 mg cap, amantadine hcl 100 mg tab)</i>	1	
<i>bromocriptine mesylate</i>	1	
CARBIDOPA-LEVODOPA (CARBIDOPA-LEVODOPA, CARBIDOPA-LEVODOPA 10-100 MG TAB DISP, CARBIDOPA-LEVODOPA 25-100 MG TAB DISP, CARBIDOPA-LEVODOPA 25-250 MG TAB DISP)	1	
<i>carbidopa-levodopa er</i>	1	
<i>carbidopa-levodopa-entacapone 12.5-50-200 mg tab</i>	1	
<i>carbidopa-levodopa-entacapone 18.75-75-200 mg tab</i>	1	
<i>carbidopa-levodopa-entacapone 25-100-200 mg tab</i>	1	
<i>carbidopa-levodopa-entacapone 31.25-125-200 mg tab</i>	1	
<i>carbidopa-levodopa-entacapone 37.5-150-200 mg tab</i>	1	
<i>carbidopa-levodopa-entacapone 50-200-200 mg tab</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>pramipexole dihydrochloride</i>	1	
<i>ropinirole hcl (ropinirole hcl 0.25 mg tab, ropinirole hcl 0.5 mg tab, ropinirole hcl 1 mg tab, ropinirole hcl 2 mg tab, ropinirole hcl 3 mg tab, ropinirole hcl 4 mg tab, ropinirole hcl 5 mg tab)</i>	1	
<i>ropinirole hcl er (ropinirole hcl er 2 mg tab er 24h, ropinirole hcl er 4 mg tab er 24h, ropinirole hcl er 6 mg tab er 24h, ropinirole hcl er 8 mg tab er 24h, ropinirole hcl er 12 mg tab er 24h)</i>	1	
RYTARY	1	
ANTIPARKINSON MONOAMINE OXIDASE INHIBITORS		
<i>rasagiline mesylate</i>	1	
<i>selegiline hcl</i>	1	
ANTIPSYCHOTICS/ANTIMANIC AGENTS		
ANTIMANIC AGENTS		
<i>lithium</i>	1	
LITHIUM CARBONATE (LITHIUM CARBONATE 150 MG CAP, LITHIUM CARBONATE 300 MG CAP)	1	
<i>lithium carbonate (lithium carbonate 150 mg cap, lithium carbonate 300 mg cap, lithium carbonate 300 mg tab)</i>	1	
LITHIUM CARBONATE 600 MG CAP	1	
<i>lithium carbonate er</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ANTIPSYCHOTICS - MISC.		
CAPLYTA	1	QL 30 EA / 30 DAYS PA²
<i>lurasidone hcl</i>	1	
NUPLAZID	1	QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
VRAYLAR (VRAYLAR 1.5 MG CAP, VRAYLAR 3 MG CAP, VRAYLAR 4.5 MG CAP, VRAYLAR 6 MG CAP)	1	QL 30 EA / 30 DAYS
VRAYLAR 1.5 & 3 MG CAP THPK	1	QL 7 EA / 180 OVER TIME
<i>ziprasidone hcl</i>	1	
<i>ziprasidone mesylate</i>	1	QL 60 EA / 30 DAYS
BENZISOXAZOLES		
FANAPT	1	QL 60 EA / 30 DAYS PA²
FANAPT TITRATION PACK	1	QL 8 EA / 180 OVER TIME PA²
INVEGA HAFYERA 1092 MG/3.5ML SUSP PRSYR	1	QL 3.5 ML / 180 OVER TIME NDS Non-Extended Day Supply
INVEGA HAFYERA 1560 MG/5ML SUSP PRSYR	1	QL 5 ML / 180 OVER TIME NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
INVEGA SUSTENNA 117 MG/0.75ML SUSP PRSYR	1	<p>QL 0.75 ML / 28 DAYS</p> <p>NDS Non-Extended Day Supply</p>
INVEGA SUSTENNA 156 MG/ML SUSP PRSYR	1	<p>QL 1 ML / 28 DAYS</p> <p>NDS Non-Extended Day Supply</p>
INVEGA SUSTENNA 234 MG/1.5ML SUSP PRSYR	1	<p>QL 1.5 ML / 28 DAYS</p> <p>NDS Non-Extended Day Supply</p>
INVEGA SUSTENNA 39 MG/0.25ML SUSP PRSYR	1	<p>QL 0.25 ML / 28 DAYS</p>
INVEGA SUSTENNA 78 MG/0.5ML SUSP PRSYR	1	<p>QL 0.5 ML / 28 DAYS</p> <p>NDS Non-Extended Day Supply</p>
INVEGA TRINZA 273 MG/0.88ML SUSP PRSYR	1	<p>QL 0.88 ML / 90 OVER TIME</p> <p>NDS Non-Extended Day Supply</p>
INVEGA TRINZA 410 MG/1.32ML SUSP PRSYR	1	<p>QL 1.32 ML / 90 OVER TIME</p> <p>NDS Non-Extended Day Supply</p>
INVEGA TRINZA 546 MG/1.75ML SUSP PRSYR	1	<p>QL 1.75 ML / 90 OVER TIME</p> <p>NDS Non-Extended Day Supply</p>
INVEGA TRINZA 819 MG/2.63ML SUSP PRSYR	1	<p>QL 2.63 ML / 90 OVER TIME</p> <p>NDS Non-Extended Day Supply</p>
<i>paliperidone er (paliperidone er 1.5 mg tab er 24h, paliperidone er 3 mg tab er 24h, paliperidone er 9 mg tab er 24h)</i>	1	<p>QL 30 EA / 30 DAYS</p>

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>paliperidone er 6 mg tab er 24h</i>	1	QL 60 EA / 30 DAYS
PERSERIS	1	QL 1 EA / 30 DAYS NDS Non-Extended Day Supply
<i>risperidone (risperidone 0.25 mg tab, risperidone 0.25 mg tab disp, risperidone 0.5 mg tab, risperidone 0.5 mg tab disp, risperidone 1 mg tab, risperidone 1 mg tab disp, risperidone 1 mg/ml solution, risperidone 2 mg tab, risperidone 2 mg tab disp, risperidone 3 mg tab, risperidone 3 mg tab disp, risperidone 4 mg tab, risperidone 4 mg tab disp)</i>	1	
<i>risperidone microspheres er (risperidone microspheres er 12.5 mg srer, risperidone microspheres er 25 mg srer)</i>	1	QL 2 EA / 28 DAYS
<i>risperidone microspheres er (risperidone microspheres er 37.5 mg srer, risperidone microspheres er 50 mg srer)</i>	1	QL 2 EA / 28 DAYS NDS Non-Extended Day Supply
UZEDY 100 MG/0.28ML SUSP PRSYR	1	QL 0.28 ML / 30 DAYS NDS Non-Extended Day Supply
UZEDY 125 MG/0.35ML SUSP PRSYR	1	QL 0.35 ML / 30 DAYS NDS Non-Extended Day Supply
UZEDY 150 MG/0.42ML SUSP PRSYR	1	QL 0.42 ML / 60 OVER TIME NDS Non-Extended Day Supply
UZEDY 200 MG/0.56ML SUSP PRSYR	1	QL 0.56 ML / 60 OVER TIME NDS Non-Extended Day Supply

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
UZEDY 250 MG/0.7ML SUSP PRSYR	1	<div data-bbox="1133 317 1192 380">QL</div> 0.7 ML / 60 OVER TIME <div data-bbox="1133 394 1192 457">NDS</div> Non-Extended Day Supply
UZEDY 50 MG/0.14ML SUSP PRSYR	1	<div data-bbox="1133 480 1192 543">QL</div> 0.14 ML / 30 DAYS <div data-bbox="1133 558 1192 621">NDS</div> Non-Extended Day Supply
UZEDY 75 MG/0.21ML SUSP PRSYR	1	<div data-bbox="1133 621 1192 684">QL</div> 0.21 ML / 30 DAYS <div data-bbox="1133 699 1192 762">NDS</div> Non-Extended Day Supply
BUTYROPHENONES		
<i>haloperidol</i>	1	
<i>haloperidol decanoate</i>	1	
<i>haloperidol lactate</i>	1	
DIBENZAPINES		
<i>asenapine maleate</i>	1	<div data-bbox="1133 1075 1192 1117">QL</div> 60 EA / 30 DAYS
<i>clozapine (clozapine 25 mg tab, clozapine 25 mg tab disp, clozapine 50 mg tab, clozapine 100 mg tab, clozapine 100 mg tab disp, clozapine 150 mg tab disp, clozapine 200 mg tab, clozapine 200 mg tab disp)</i>	1	
CLOZAPINE 12.5 MG TAB DISP	1	
<i>loxapine succinate</i>	1	
<i>olanzapine</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>quetiapine fumarate (quetiapine fumarate 25 mg tab, quetiapine fumarate 50 mg tab, quetiapine fumarate 100 mg tab, quetiapine fumarate 200 mg tab, quetiapine fumarate 300 mg tab, quetiapine fumarate 400 mg tab)</i>	1	
<i>quetiapine fumarate er</i>	1	
SECUADO	1	QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply
VERSACLOZ	1	NDS Non-Extended Day Supply
ZYPREXA RELPREVV 210 MG RECON SUSP	1	QL 2 EA / 28 DAYS
DIHYDROINDOLONES		
MOLINDONE HCL	1	
PHENOTHIAZINES		
<i>chlorpromazine hcl (chlorpromazine hcl 10 mg tab, chlorpromazine hcl 25 mg tab, chlorpromazine hcl 30 mg/ml conc, chlorpromazine hcl 50 mg tab, chlorpromazine hcl 100 mg tab, chlorpromazine hcl 100 mg/ml conc, chlorpromazine hcl 200 mg tab)</i>	1	
<i>compro</i>	1	
<i>fluphenazine decanoate</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>fluphenazine hcl (fluphenazine hcl 1 mg tab, fluphenazine hcl 2.5 mg tab, fluphenazine hcl 2.5 mg/5ml elixir, fluphenazine hcl 2.5 mg/ml solution, fluphenazine hcl 5 mg tab, fluphenazine hcl 5 mg/ml conc, fluphenazine hcl 10 mg tab)</i>	1	
<i>perphenazine</i>	1	
<i>prochlorperazine</i>	1	
<i>prochlorperazine maleate</i>	1	
<i>thioridazine hcl</i>	1	
<i>trifluoperazine hcl</i>	1	











QUINOLINONE DERIVATIVES

ABILIFY ASIMTUFII 720 MG/2.4ML PRSYR	1	<div data-bbox="1130 936 1192 999">QL</div> 2.4 ML / 56 OVER TIME <div data-bbox="1130 1010 1192 1073">NDS</div> Non-Extended Day Supply
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	1	<div data-bbox="1130 1104 1192 1167">QL</div> 3.2 ML / 56 OVER TIME <div data-bbox="1130 1178 1192 1241">NDS</div> Non-Extended Day Supply
ABILIFY MAINTENA	1	<div data-bbox="1130 1272 1192 1335">QL</div> 1 EA / 28 DAYS <div data-bbox="1130 1346 1192 1409">NDS</div> Non-Extended Day Supply
<i>aripiprazole (aripiprazole 1 mg/ml solution, aripiprazole 2 mg tab, aripiprazole 5 mg tab, aripiprazole 10 mg tab, aripiprazole 15 mg tab, aripiprazole 20 mg tab, aripiprazole 30 mg tab)</i>	1	
<i>aripiprazole (aripiprazole 10 mg tab disp, aripiprazole 15 mg tab disp)</i>	1	<div data-bbox="1130 1608 1192 1671">QL</div> 60 EA / 30 DAYS <div data-bbox="1130 1682 1192 1745">NDS</div> Non-Extended Day Supply














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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ARISTADA 1064 MG/3.9ML PRSYR	1	<div data-bbox="1133 317 1192 380">QL</div> 3.9 ML / 56 OVER TIME <div data-bbox="1133 390 1192 453">NDS</div> Non-Extended Day Supply
ARISTADA 441 MG/1.6ML PRSYR	1	<div data-bbox="1133 485 1192 548">QL</div> 1.6 ML / 28 DAYS <div data-bbox="1133 558 1192 621">NDS</div> Non-Extended Day Supply
ARISTADA 662 MG/2.4ML PRSYR	1	<div data-bbox="1133 621 1192 684">QL</div> 2.4 ML / 28 DAYS <div data-bbox="1133 695 1192 758">NDS</div> Non-Extended Day Supply
ARISTADA 882 MG/3.2ML PRSYR	1	<div data-bbox="1133 758 1192 821">QL</div> 3.2 ML / 28 DAYS <div data-bbox="1133 831 1192 894">NDS</div> Non-Extended Day Supply
ARISTADA INITIO	1	<div data-bbox="1133 894 1192 957">QL</div> 4.8 ML / 365 OVER TIME <div data-bbox="1133 968 1192 1031">NDS</div> Non-Extended Day Supply
REXULTI	1	<div data-bbox="1133 1062 1192 1125">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 1136 1192 1199">NDS</div> Non-Extended Day Supply
THIOXANTHENES		
<i>thiothixene</i>	1	
ANTISEPTICS & DISINFECTANTS		
ANTISEPTICS & DISINFECTANTS		
<i>hydrogen peroxide</i>	OTC	
CHLORINE ANTISEPTICS		
<i>chlorhexidine gluconate</i>	OTC	








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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
IODINE ANTISEPTICS		
<i>povidone-iodine (betadine)</i>	OTC	
ANTIVIRALS		
ANTIRETROVIRALS		
<i>abacavir sulfate (abacavir sulfate 20 mg/ml solution, abacavir sulfate 300 mg tab)</i>	1	
<i>abacavir sulfate-lamivudine</i>	1	
<i>abacavir-lamivudine-zidovudine</i>	1	 Non-Extended Day Supply
APRETUDE	1	 Non-Extended Day Supply
APTIVUS 250 MG CAP	1	 Non-Extended Day Supply
<i>atazanavir sulfate</i>	1	
BIKTARVY	1	 Non-Extended Day Supply
CABENUVA	1	 Non-Extended Day Supply
CIMDUO	1	 Non-Extended Day Supply
COMPLERA	1	
<i>darunavir</i>	1	 Non-Extended Day Supply
DELSTRIGO	1	 Non-Extended Day Supply
DESCOVY	1	 30 EA / 30 DAYS  Non-Extended Day Supply












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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
DOVATO	1	 Non-Extended Day Supply
EDURANT	1	 Non-Extended Day Supply
EFAVIRENZ (EFAVIRENZ 50 MG CAP, EFAVIRENZ 200 MG CAP, EFAVIRENZ 600 MG TAB)	1	
<i>efavirenz-emtricitab-tenofo df</i>	1	 Non-Extended Day Supply
<i>efavirenz-lamivudine-tenofovir</i>	1	 Non-Extended Day Supply
<i>emtricitabine</i>	1	
<i>emtricitabine-tenofovir df (emtricitabine-tenofovir df 100-150 mg tab, emtricitabine-tenofovir df 133-200 mg tab, emtricitabine-tenofovir df 167-250 mg tab)</i>	1	 30 EA / 30 DAYS  Non-Extended Day Supply
<i>emtricitabine-tenofovir df 200-300 mg tab</i>	1	 30 EA / 30 DAYS
EMTRIVA 10 MG/ML SOLUTION	1	
<i>etravirine</i>	1	 Non-Extended Day Supply
EVOTAZ	1	 Non-Extended Day Supply
<i>fosamprenavir calcium</i>	1	 Non-Extended Day Supply
FUZEON	1	 Non-Extended Day Supply
GENVOYA	1	 Non-Extended Day Supply
INTELENCE 25 MG TAB	1	
INVIRASE	1	 Non-Extended Day Supply













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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ISENTRESS (ISENTRESS 100 MG CHEW TAB, ISENTRESS 100 MG PACKET, ISENTRESS 400 MG TAB)	1	 Non-Extended Day Supply
ISENTRESS 25 MG CHEW TAB	1	
ISENTRESS HD	1	 Non-Extended Day Supply
JULUCA	1	 Non-Extended Day Supply
<i>lamivudine (lamivudine 10 mg/ml solution, lamivudine 150 mg tab, lamivudine 300 mg tab)</i>	1	
<i>lamivudine-zidovudine</i>	1	
LEXIVA 50 MG/ML SUSPENSION	1	
<i>lopinavir-ritonavir (lopinavir-ritonavir 100-25 mg tab, lopinavir-ritonavir 200-50 mg tab, lopinavir-ritonavir 400-100 mg/5ml solution)</i>	1	
<i>maraviroc</i>	1	 Non-Extended Day Supply
<i>nevirapine (nevirapine 50 mg/5ml suspension, nevirapine 200 mg tab)</i>	1	
<i>nevirapine er (nevirapine er 100 mg tab er 24h, nevirapine er 400 mg tab er 24h)</i>	1	
NORVIR 100 MG PACKET	1	
ODEFSEY	1	 Non-Extended Day Supply
PIFELTRO	1	 Non-Extended Day Supply
PREZCOBIX	1	 Non-Extended Day Supply


















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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PREZISTA (PREZISTA 75 MG TAB, PREZISTA 150 MG TAB)	1	
PREZISTA 100 MG/ML SUSPENSION	1	 Non-Extended Day Supply
REYATAZ 50 MG PACKET	1	 Non-Extended Day Supply
<i>ritonavir</i>	1	
RUKOBIA	1	 Non-Extended Day Supply
SELZENTRY (SELZENTRY 20 MG/ML SOLUTION, SELZENTRY 75 MG TAB)	1	 Non-Extended Day Supply
SELZENTRY 25 MG TAB	1	
STRIBILD	1	 Non-Extended Day Supply
SUNLENCA (SUNLENCA 4 X 300 MG TAB THPK, SUNLENCA 5 X 300 MG TAB THPK)	1	 Non-Extended Day Supply
SYMTUZA	1	
TEMIXYS	1	 Non-Extended Day Supply
<i>tenofovir disoproxil fumarate</i>	1	
TIVICAY (TIVICAY 25 MG TAB, TIVICAY 50 MG TAB)	1	 Non-Extended Day Supply
TIVICAY 10 MG TAB	1	
TIVICAY PD	1	 Non-Extended Day Supply
TRIUMEQ	1	 Non-Extended Day Supply
TRIUMEQ PD	1	 Non-Extended Day Supply

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
TRIZIVIR	1	 Non-Extended Day Supply
TROGARZO	1	 Non-Extended Day Supply  LA
VIRACEPT	1	 Non-Extended Day Supply
VIREAD (VIREAD 40 MG/GM POWDER, VIREAD 150 MG TAB, VIREAD 200 MG TAB, VIREAD 250 MG TAB)	1	 Non-Extended Day Supply
<i>zidovudine (zidovudine 50 mg/5ml syrup, zidovudine 100 mg cap, zidovudine 300 mg tab)</i>	1	
ANTIVIRAL COMBINATIONS		
PAXLOVID (150/100)	1	 20 EA / 5 OVER TIME  \$0 Copay
PAXLOVID (300/100)	1	 30 EA / 5 OVER TIME  \$0 Copay
CMV AGENTS		
PREVYMIS (PREVYMIS 240 MG TAB, PREVYMIS 480 MG TAB)	1	 30 EA / 30 DAYS  Non-Extended Day Supply
<i>valganciclovir hcl 450 mg tab</i>	1	
<i>valganciclovir hcl 50 mg/ml recon soln</i>	1	 Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HEPATITIS AGENTS		
<i>adefovir dipivoxil</i>	1	
BARACLUDE 0.05 MG/ML SOLUTION	1	 Non-Extended Day Supply
<i>entecavir</i>	1	 30 EA / 30 DAYS
<i>lamivudine 100 mg tab</i>	1	
LEDIPASVIR-SOFOSBUVIR	1	 28 EA / 28 DAYS   Non-Extended Day Supply
MAVYRET 100-40 MG TAB	1	 84 EA / 28 DAYS   Non-Extended Day Supply
MAVYRET 50-20 MG PACKET	1	 168 EA / 28 DAYS   Non-Extended Day Supply
PEGASYS	1	  Non-Extended Day Supply
RIBAVIRIN 200 MG CAP	1	
RIBAVIRIN 200 MG TAB	1	
SOFOSBUVIR-VELPATASVIR	1	 28 EA / 28 DAYS   Non-Extended Day Supply
VEMLIDY	1	 Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VOSEVI	1	<div data-bbox="1133 317 1192 359">QL</div> 28 EA / 28 DAYS <div data-bbox="1133 365 1192 407">PA</div> <div data-bbox="1133 413 1192 478">NDS</div> Non-Extended Day Supply
HERPES AGENTS		
<i>acyclovir (acyclovir 200 mg cap, acyclovir 200 mg/5ml suspension, acyclovir 400 mg tab, acyclovir 800 mg tab)</i>	1	
<i>acyclovir sodium</i>	1	<div data-bbox="1133 709 1192 751">PA³</div>
<i>famciclovir</i>	1	
<i>valacyclovir hcl (valacyclovir hcl 1 gm tab, valacyclovir hcl 500 mg tab)</i>	1	
INFLUENZA AGENTS		
<i>oseltamivir phosphate (oseltamivir phosphate 45 mg cap, oseltamivir phosphate 75 mg cap)</i>	1	<div data-bbox="1133 1024 1192 1087">QL</div> 42 EA / 180 OVER TIME
<i>oseltamivir phosphate 30 mg cap</i>	1	<div data-bbox="1133 1140 1192 1203">QL</div> 84 EA / 180 OVER TIME
<i>oseltamivir phosphate 6 mg/ml recon susp</i>	1	<div data-bbox="1133 1234 1192 1297">QL</div> 540 ML / 180 OVER TIME
RIMANTADINE HCL	1	
XOFLUZA (40 MG DOSE) 1 X 40 MG TAB THPK	1	
XOFLUZA (80 MG DOSE) 1 X 80 MG TAB THPK	1	
MISC. ANTIVIRALS		
LAGEVRIO	1	<div data-bbox="1133 1650 1192 1713">QL</div> 40 EA / 5 OVER TIME

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
BETA BLOCKERS		
ALPHA-BETA BLOCKERS		
<i>carvedilol</i>	1	
<i>labetalol hcl (labetalol hcl 100 mg tab, labetalol hcl 200 mg tab, labetalol hcl 300 mg tab)</i>	1	
BETA BLOCKERS CARDIO-SELECTIVE		
<i>acebutolol hcl</i>	1	
<i>atenolol</i>	1	
<i>betaxolol hcl (betaxolol hcl 10 mg tab, betaxolol hcl 20 mg tab)</i>	1	
<i>bisoprolol fumarate</i>	1	
<i>metoprolol succinate er</i>	1	
<i>metoprolol tartrate (metoprolol tartrate 25 mg tab, metoprolol tartrate 37.5 mg tab, metoprolol tartrate 50 mg tab, metoprolol tartrate 75 mg tab, metoprolol tartrate 100 mg tab)</i>	1	
<i>nebivolol hcl</i>	1	
BETA BLOCKERS NON-SELECTIVE		
<i>nadolol</i>	1	
<i>pindolol</i>	1	
<i>propranolol hcl (propranolol hcl 10 mg tab, propranolol hcl 20 mg tab, propranolol hcl 20 mg/5ml solution, propranolol hcl 40 mg tab, propranolol hcl 40 mg/5ml solution, propranolol hcl 60 mg tab, propranolol hcl 80 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>propranolol hcl er</i>	1	
<i>sorine</i>	1	
<i>sotalol hcl (af)</i>	1	
<i>sotalol hcl (sotalol hcl 80 mg tab, sotalol hcl 120 mg tab, sotalol hcl 160 mg tab, sotalol hcl 240 mg tab)</i>	1	
<i>timolol maleate (timolol maleate 5 mg tab, timolol maleate 10 mg tab, timolol maleate 20 mg tab)</i>	1	
CALCIUM CHANNEL BLOCKERS		
CALCIUM CHANNEL BLOCKERS		
<i>amlodipine besylate (amlodipine besylate 2.5 mg tab, amlodipine besylate 5 mg tab, amlodipine besylate 10 mg tab)</i>	1	
<i>cartia xt</i>	1	
<i>dilt-xr</i>	1	
<i>diltiazem hcl (diltiazem hcl 30 mg tab, diltiazem hcl 60 mg tab, diltiazem hcl 90 mg tab, diltiazem hcl 120 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>diltiazem hcl er (diltiazem hcl er 60 mg cap er 12h, diltiazem hcl er 90 mg cap er 12h, diltiazem hcl er 120 mg cap er 12h, diltiazem hcl er 120 mg cap er 24h, diltiazem hcl er 120 mg tab er 24h, diltiazem hcl er 180 mg cap er 24h, diltiazem hcl er 180 mg tab er 24h, diltiazem hcl er 240 mg cap er 24h, diltiazem hcl er 240 mg tab er 24h, diltiazem hcl er 300 mg tab er 24h, diltiazem hcl er 360 mg tab er 24h, diltiazem hcl er 420 mg tab er 24h)</i>	1	
<i>diltiazem hcl er beads</i>	1	
<i>diltiazem hcl er coated beads (diltiazem hcl er coated beads 120 mg cap er 24h, diltiazem hcl er coated beads 180 mg cap er 24h, diltiazem hcl er coated beads 240 mg cap er 24h, diltiazem hcl er coated beads 300 mg cap er 24h, diltiazem hcl er coated beads 360 mg cap er 24h)</i>	1	
<i>felodipine er</i>	1	
<i>isradipine</i>	1	
<i>matzim la</i>	1	
<i>nicardipine hcl (nicardipine hcl 20 mg cap, nicardipine hcl 30 mg cap)</i>	1	
<i>nifedipine er</i>	1	
<i>nifedipine er osmotic release</i>	1	
<i>nimodipine</i>	1	
<i>taztia xt</i>	1	
<i>tiadytl er</i>	1	
<i>verapamil hcl (verapamil hcl 40 mg tab, verapamil hcl 80 mg tab, verapamil hcl 120 mg tab)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>verapamil hcl er (verapamil hcl er 100 mg cap er 24h, verapamil hcl er 120 mg cap er 24h, verapamil hcl er 120 mg tab er, verapamil hcl er 180 mg cap er 24h, verapamil hcl er 180 mg tab er, verapamil hcl er 200 mg cap er 24h, verapamil hcl er 240 mg cap er 24h, verapamil hcl er 240 mg tab er, verapamil hcl er 300 mg cap er 24h, verapamil hcl er 360 mg cap er 24h)</i>	1	
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CARDIOTONICS

CARDIAC GLYCOSIDES

<i>digoxin (digoxin 125 mcg tab, digoxin 250 mcg tab)</i>	1	
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DIGOXIN 0.05 MG/ML SOLUTION	1	
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CARDIOVASCULAR AGENTS - MISC.

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

<i>amlodipine-atorvastatin (amlodipine-atorvastatin 2.5-10 mg tab, amlodipine-atorvastatin 2.5-20 mg tab, amlodipine-atorvastatin 2.5-40 mg tab, amlodipine-atorvastatin 5-10 mg tab, amlodipine-atorvastatin 5-20 mg tab, amlodipine-atorvastatin 5-40 mg tab, amlodipine-atorvastatin 5-80 mg tab, amlodipine-atorvastatin 10-10 mg tab, amlodipine-atorvastatin 10-20 mg tab, amlodipine-atorvastatin 10-40 mg tab, amlodipine-atorvastatin 10-80 mg tab)</i>	1	
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ENTRESTO (ENTRESTO 24-26 MG TAB, ENTRESTO 49-51 MG TAB, ENTRESTO 97-103 MG TAB)	1	
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QL 60 EA / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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PULMONARY HYPERTENSION - ENDOTHELIN RECEPTOR ANTAGONISTS

<i>ambrisentan</i>	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
<i>bosentan</i>	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
OPSUMIT	1	<ul style="list-style-type: none"> PA NDS Non-Extended Day Supply LA

PULMONARY HYPERTENSION - PHOSPHODIESTERASE INHIBITORS

<i>alyq</i>	1	<ul style="list-style-type: none"> PA NDS Non-Extended Day Supply
<i>sildenafil citrate 20 mg tab</i>	1	<ul style="list-style-type: none"> PA
<i>tadalafil (pah)</i>	1	<ul style="list-style-type: none"> PA NDS Non-Extended Day Supply

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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PULMONARY HYPERTENSION - PROSTACYCLIN RECEPTOR AGONIST

UPTRAVI (UPTRAVI 200 & 800 MCG TAB THPK, UPTRAVI 200 MCG TAB, UPTRAVI 400 MCG TAB, UPTRAVI 600 MCG TAB, UPTRAVI 800 MCG TAB, UPTRAVI 1000 MCG TAB, UPTRAVI 1200 MCG TAB, UPTRAVI 1400 MCG TAB, UPTRAVI 1600 MCG TAB)

1

PA

NDS

Non-Extended Day Supply

LA

PULMONARY HYPERTENSION - SOL GUANYLATE CYCLASE STIMULATOR

ADEMPAS

1

PA

NDS

Non-Extended Day Supply

LA

SINUS NODE INHIBITORS

CORLANOR 5 MG TAB

1

QL

60 EA / 30 DAYS

CORLANOR 5 MG/5ML SOLUTION

1

QL

450 ML / 30 DAYS

CORLANOR 7.5 MG TAB

1

QL

60 EA / 30 DAYS

ivabradine hcl

1

QL

60 EA / 30 DAYS

TRANSTHYRETIN STABILIZERS

VYNDAMAX

1

QL

30 EA / 30 DAYS

PA

LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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VASOACTIVE SOLUBLE GUANYLATE CYCLASE STIMULATOR (SGC)

VERQUVO	1	QL 30 EA / 30 DAYS
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CEPHALOSPORINS

CEPHALOSPORINS - 1ST GENERATION

<i>cefadroxil (cefadroxil 1 gm tab, cefadroxil 250 mg/5ml recon susp, cefadroxil 500 mg cap, cefadroxil 500 mg/5ml recon susp)</i>	1	
<i>cefazolin sodium (cefazolin sodium 1 gm recon soln, cefazolin sodium 10 gm recon soln, cefazolin sodium 500 mg recon soln)</i>	1	
CEFAZOLIN SODIUM 100 GM RECON SOLN	1	
CEFAZOLIN SODIUM 2 GM RECON SOLN	1	
CEFAZOLIN SODIUM 300 GM RECON SOLN	1	
CEFAZOLIN SODIUM-DEXTROSE (CEFAZOLIN SODIUM-DEXTROSE 1-4 GM-%(50ML) RECON SOLN, CEFAZOLIN SODIUM-DEXTROSE 1-4 GM/50ML-% SOLUTION, CEFAZOLIN SODIUM-DEXTROSE 2-3 GM-%(50ML) RECON SOLN)	1	
<i>cephalexin (cephalexin 125 mg/5ml recon susp, cephalexin 250 mg cap, cephalexin 250 mg/5ml recon susp, cephalexin 500 mg cap)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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CEPHALOSPORINS - 2ND GENERATION

CEFACLOR (CEFACLOR 250 MG CAP, CEFACLOR 500 MG CAP)	1	
<i>cefotetan disodium</i>	1	
CEFOTETAN DISODIUM-DEXTROSE	1	
<i>cefoxitin sodium</i>	1	
CEFOXITIN SODIUM-DEXTROSE	1	
<i>cefprozil (cefprozil 125 mg/5ml recon susp, cefprozil 250 mg tab, cefprozil 250 mg/5ml recon susp, cefprozil 500 mg tab)</i>	1	
<i>cefuroxime axetil</i>	1	
<i>cefuroxime sodium</i>	1	

CEPHALOSPORINS - 3RD GENERATION

<i>cefdinir (cefdinir 125 mg/5ml recon susp, cefdinir 250 mg/5ml recon susp, cefdinir 300 mg cap)</i>	1	
<i>cefixime (cefixime 100 mg/5ml recon susp, cefixime 200 mg/5ml recon susp, cefixime 400 mg cap)</i>	1	
<i>cefpodoxime proxetil (cefpodoxime proxetil 50 mg/5ml recon susp, cefpodoxime proxetil 100 mg tab, cefpodoxime proxetil 100 mg/5ml recon susp, cefpodoxime proxetil 200 mg tab)</i>	1	
<i>ceftazidime</i>	1	
CEFTAZIDIME AND DEXTROSE	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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CEFTRIAXONE SODIUM (CEFTRIAXONE SODIUM 1 GM RECON SOLN, CEFTRIAXONE SODIUM 2 GM RECON SOLN, CEFTRIAXONE SODIUM 10 GM RECON SOLN, CEFTRIAXONE SODIUM 100 GM RECON SOLN, CEFTRIAXONE SODIUM 250 MG RECON SOLN, CEFTRIAXONE SODIUM 500 MG RECON SOLN)	1	
CEFTRIAXONE SODIUM IN DEXTROSE	1	
CEFTRIAXONE SODIUM-DEXTROSE	1	
<i>tazicef 1 gm recon soln</i>	1	
<i>tazicef 2 gm recon soln</i>	1	
TAZICEF 6 GM RECON SOLN	1	

CEPHALOSPORINS - 4TH GENERATION

<i>cefepime hcl (cefepime hcl 1 gm recon soln, cefepime hcl 1 gm/50ml solution, cefepime hcl 2 gm recon soln, cefepime hcl 2 gm/100ml solution)</i>	1	
CEFEPIME-DEXTROSE	1	

CEPHALOSPORINS - 5TH GENERATION

TEFLARO	1	 Non-Extended Day Supply
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CONTRACEPTIVES

COMBINATION CONTRACEPTIVES - ORAL

<i>altavera</i>	1	
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>alyacen 1/35</i>	1	
<i>apri</i>	1	
<i>aranelle</i>	1	
<i>abra</i>	1	
<i>abra eq</i>	1	
<i>aviane</i>	1	
<i>blisovi 24 fe</i>	1	
<i>blisovi fe 1.5/30</i>	1	
<i>camrese</i>	1	
<i>camrese lo</i>	1	
<i>cryselle-28</i>	1	
<i>cyred</i>	1	
<i>cyred eq</i>	1	
<i>desogestrel-ethinyl estradiol (desogestrel-ethinyl estradiol 0.15-0.02/0.01 mg (21/5) tab, desogestrel-ethinyl estradiol 0.15-30 mg-mcg tab)</i>	1	
<i>drospirenone-ethinyl estradiol</i>	1	
<i>enpresse-28</i>	1	
<i>enskyce</i>	1	
<i>estarylla</i>	1	
<i>ethynodiol diac-eth estradiol</i>	1	
<i>falmina</i>	1	
<i>femynor</i>	1	
<i>hailey 24 fe</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>introvale</i>	1	
<i>isibloom</i>	1	
<i>jasmiel</i>	1	
<i>joyeaux</i>	1	
<i>juleber</i>	1	
<i>junel 1.5/30</i>	1	
<i>junel 1/20</i>	1	
<i>junel fe 1.5/30</i>	1	
<i>junel fe 1/20</i>	1	
<i>junel fe 24</i>	1	
<i>kaitlib fe</i>	1	
<i>kariva</i>	1	
<i>kelnor 1/35</i>	1	
<i>kelnor 1/50</i>	1	
<i>kurvelo</i>	1	
<i>larin 1.5/30</i>	1	
<i>larin 1/20</i>	1	
<i>larin fe 1.5/30</i>	1	
<i>larin fe 1/20</i>	1	
<i>larissia</i>	1	
<i>lessina</i>	1	
<i>levonest</i>	1	
<i>levonorg-eth estrad triphasic</i>	1	
<i>levonorgest-eth est & eth est</i>	1	


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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>levonorgest-eth estrad 91-day</i>	1	
<i>levonorgest-eth estradiol-iron</i>	1	
<i>levonorgestrel-ethinyl estrad (levonorgestrel-ethinyl estrad 0.1-20 mg-mcg tab, levonorgestrel-ethinyl estrad 0.15-30 mg-mcg tab, levonorgestrel-ethinyl estrad 90-20 mcg tab)</i>	1	
<i>levora 0.15/30 (28)</i>	1	
<i>loryna</i>	1	
<i>low-ogestrel</i>	1	
<i>lutra</i>	1	
<i>marlissa</i>	1	
<i>melodetta 24 fe</i>	1	
<i>mibelas 24 fe</i>	1	
<i>microgestin 1.5/30</i>	1	
<i>microgestin 1/20</i>	1	
<i>microgestin fe 1.5/30</i>	1	
<i>microgestin fe 1/20</i>	1	
<i>mili</i>	1	
<i>nikki</i>	1	
<i>norethin ace-eth estrad-fe 1-20 mg-mcg tab</i>	1	
<i>norethindrone acet-ethinyl est 1-20 mg-mcg tab</i>	1	
<i>norgestim-eth estrad triphasic</i>	1	
<i>norgestimate-eth estradiol</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>nortrel 0.5/35 (28)</i>	1	
<i>nortrel 1/35 (21)</i>	1	
<i>nortrel 1/35 (28)</i>	1	
<i>nortrel 7/7/7</i>	1	
<i>nylia 1/35</i>	1	
<i>pimtrea</i>	1	
<i>pirmella 1/35</i>	1	
<i>portia-28</i>	1	
<i>reclipsen</i>	1	
<i>setlakin</i>	1	
<i>sprintec 28</i>	1	
<i>sronyx</i>	1	
<i>syeda</i>	1	
<i>tarina 24 fe</i>	1	
<i>tarina fe 1/20</i>	1	
<i>tarina fe 1/20 eq</i>	1	
<i>tilia fe</i>	1	
<i>tri femynor</i>	1	
<i>tri-estarylla</i>	1	
<i>tri-legest fe</i>	1	
<i>tri-lo-estarylla</i>	1	
<i>tri-lo-sprintec</i>	1	
<i>tri-mili</i>	1	
<i>tri-sprintec</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>tri-vylibra</i>	1	
<i>trivora (28)</i>	1	
<i>turqoz</i>	1	
TYBLUME	1	
<i>tydemy</i>	1	
VELIVET	1	
<i>vestura</i>	1	
<i>vienva</i>	1	
<i>vyfemla</i>	1	
<i>vylibra</i>	1	
<i>wymzya fe</i>	1	
<i>zovia 1/35 (28)</i>	1	
<i>zovia 1/35e (28)</i>	1	
COMBINATION CONTRACEPTIVES - TRANSDERMAL		
<i>norelgestromin-eth estradiol</i>	1	
<i>xulane</i>	1	
<i>zafemy</i>	1	
COMBINATION CONTRACEPTIVES - VAGINAL		
ANNOVERA	1	 1 EA / 365 OVER TIME
<i>eluryng</i>	1	
<i>enilloring</i>	1	
<i>etonogestrel-ethinyl estradiol</i>	1	
<i>haloette</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
EMERGENCY CONTRACEPTIVES		
<i>levonorgestrel (plan b)</i>	OTC	
PROGESTIN CONTRACEPTIVES - INJECTABLE		
DEPO-SUBQ PROVERA 104	1	
<i>medroxyprogesterone acetate (medroxyprogesterone acetate 150 mg/ml susp prsyr, medroxyprogesterone acetate 150 mg/ml suspension)</i>	1	
PROGESTIN CONTRACEPTIVES - ORAL		
<i>camila</i>	1	
<i>deblitane</i>	1	
<i>emzahh</i>	1	
<i>errin</i>	1	
<i>heather</i>	1	
<i>incassia</i>	1	
<i>jencycla</i>	1	
<i>lyleq</i>	1	
<i>lyza</i>	1	
<i>nora-be</i>	1	
<i>norethindrone</i>	1	
<i>norlyda</i>	1	
<i>norlyroc</i>	1	
OPILL	OTC	
<i>sharobel</i>	1	
SLYND	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>tulana</i>	1	
CORTICOSTEROIDS		
GLUCOCORTICOSTEROIDS		
<i>budesonide 3 mg cp dr part</i>	1	
<i>budesonide er</i>	1	<div data-bbox="1133 579 1190 615">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 632 1190 667">PA</div> <div data-bbox="1133 684 1190 720">NDS</div> Non-Extended Day Supply
<i>decadron (decadron 0.5 mg tab, decadron 0.75 mg tab)</i>	1	
<i>dexamethasone (dexamethasone 0.5 mg tab, dexamethasone 0.75 mg tab, dexamethasone 1 mg tab, dexamethasone 1.5 mg tab, dexamethasone 2 mg tab, dexamethasone 4 mg tab, dexamethasone 6 mg tab)</i>	1	
DEXAMETHASONE INTENSOL	1	
DEXAMETHASONE SOD PHOS +RFID	1	
<i>dexamethasone sodium phosphate (dexamethasone sodium phosphate 4 mg/ml soln prsyr, dexamethasone sodium phosphate 4 mg/ml solution)</i>	1	
<i>hydrocortisone (hydrocortisone 5 mg tab, hydrocortisone 10 mg tab, hydrocortisone 20 mg tab)</i>	1	
<i>methylprednisolone (methylprednisolone 4 mg tab, methylprednisolone 8 mg tab, methylprednisolone 16 mg tab, methylprednisolone 32 mg tab)</i>	1	<div data-bbox="1133 1633 1190 1669">PA³</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>methylprednisolone 4 mg tab thpk</i>	1	
<i>prednisolone 15 mg/5ml solution</i>	1	PA ³
<i>prednisolone sodium phosphate (prednisolone sodium phosphate 6.7 (5 base) mg/5ml solution, prednisolone sodium phosphate 20 mg/5ml solution, prednisolone sodium phosphate 25 mg/5ml solution)</i>	1	PA ³
<i>prednisolone sodium phosphate 15 mg/5ml solution</i>	1	PA ³
PREDNISON (PREDNISON 1 MG TAB, PREDNISON 2.5 MG TAB, PREDNISON 5 MG TAB, PREDNISON 5 MG/5ML SOLUTION, PREDNISON 10 MG TAB, PREDNISON 20 MG TAB, PREDNISON 50 MG TAB)	1	PA ³
<i>prednisone (prednisone 5 mg (21) tab thpk, prednisone 5 mg (48) tab thpk, prednisone 10 mg (21) tab thpk, prednisone 10 mg (48) tab thpk)</i>	1	
PREDNISON INTENSOL	1	PA ³
SOLU-CORTEF	1	
SOLU-MEDROL (PF)	1	
SOLU-MEDROL 1000 MG RECON SOLN	1	
SOLU-MEDROL 2 GM RECON SOLN	1	
SOLU-MEDROL 500 MG RECON SOLN	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
MINERALOCORTICOIDS		
<i>fludrocortisone acetate</i>	1	
COUGH/COLD/ALLERGY		
ANTITUSSIVES		
<i>benzonatate</i>	1*	
<i>dextromethorphan (robitussin)</i>	OTC	
COUGH/COLD/ALLERGY COMBINATIONS		
<i>cetirizine / pseudoephedrine (zyrtec – d)</i>	OTC	
<i>chlorpheniramine / phenylephrine / acetaminophen</i>	OTC	
<i>chlorpheniramine / phenylephrine / aspirin</i>	OTC	
<i>dextromethorphan / acetaminophen / chlorpheniramine</i>	OTC	
<i>dextromethorphan / phenylephrine / acetaminophen</i>	OTC	
<i>diphenhydramine / phenylephrine / acetaminophen</i>	OTC	
<i>doxylamine / dextromethorphan</i>	OTC	
<i>ephedrine / guaifenesin</i>	OTC	
<i>g tussin ac</i>	OTC	
<i>guaiaatussin ac</i>	OTC	
<i>guaifenesin / dextromethorphan (mucinex dm)</i>	OTC	
<i>guaifenesin / dextromethorphan / phenylephrine</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>guaifenesin / dextromethorphan / pseudoephedrine</i>	OTC	
<i>guaifenesin ac</i>	OTC	
<i>guaifenesin-codeine (guaifenesin-codeine 100-10 mg/5ml solution, guaifenesin-codeine 200-20 mg/10ml solution)</i>	OTC	
<i>loratadine / pseudoephedrine (claritin – d)</i>	OTC	
<i>maxi-tuss ac</i>	OTC	
<i>phenylephrine / acetaminophen</i>	OTC	
<i>phenylephrine / bropheniramine / dextromethorphan</i>	OTC	
<i>phenylephrine / chlorpheniramine / dextromethorphan</i>	OTC	
<i>phenylephrine / chlorpheniramine / dextromethorphan / acetaminophen</i>	OTC	
<i>phenylephrine / dextromethorphan</i>	OTC	
<i>phenylephrine / dextromethorphan / guaifenesin / acetaminophen</i>	OTC	
<i>phenylephrine / doxylamine / dextromethorphan / acetaminophen</i>	OTC	
<i>phenylephrine / guaifenesin</i>	OTC	
<i>pseudoephedrine / acetaminophen</i>	OTC	
<i>pseudoephedrine / guaifenesin</i>	OTC	
<i>pseudoephedrine / ibuprofen</i>	OTC	
<i>virtussin a/c</i>	OTC	
<i>virtussin ac w/alc</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
EXPECTORANTS		
<i>guaifenesin (mucinex)</i>	OTC	
MISC. RESPIRATORY INHALANTS		
<i>camphor</i>	OTC	
<i>camphor / eucalyptus / menthol</i>	OTC	
<i>sodium chloride nasal spray</i>	OTC	
MUCOLYTICS		
<i>acetylcysteine (acetylcysteine 10 % solution, acetylcysteine 20 % solution)</i>	1	PA ³
DERMATOLOGICALS		
ACNE PRODUCTS		
<i>accutane</i>	1	
<i>amnestem</i>	1	
<i>avita 0.025 % cream</i>	1	QL 45 GM / 30 DAYS PA
<i>benzoyl peroxide</i>	OTC	
<i>claravis</i>	1	
<i>clindamycin phosphate (clindamycin phosphate 1 % lotion, clindamycin phosphate 1 % solution)</i>	1	QL 60 ML / 30 DAYS
<i>clindamycin phosphate 1 % gel</i>	1	QL 75 GM / 30 DAYS
ERY	1	QL 60 EA / 30 DAYS
<i>erythromycin 2 % solution</i>	1	QL 60 ML / 30 DAYS
<i>isotretinoin</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>sulfacetamide sodium (acne)</i>	1	QL 118 ML / 30 DAYS
<i>tretinoin (tretinoin 0.01 % gel, tretinoin 0.025 % cream, tretinoin 0.025 % gel, tretinoin 0.05 % cream, tretinoin 0.05 % gel, tretinoin 0.1 % cream)</i>	1	QL 45 GM / 30 DAYS PA
<i>zenatane</i>	1	
ANTI-INFLAMMATORY AGENTS - TOPICAL		
<i>aleve arthritis pain</i>	OTC	
<i>arthritis pain reliever 1 % gel</i>	OTC	
<i>aspercreme arthritis pain</i>	OTC	
<i>cvs diclofenac sodium</i>	OTC	
<i>diclofenac 1% gel</i>	OTC	
<i>diclofenac 1% gel rx only</i>	1	QL 1000 GM / 30 DAYS
<i>diclofenac sodium 1 % gel</i>	OTC	
<i>eq arthritis pain 1 % gel</i>	OTC	
<i>eq arthritis pain reliever</i>	OTC	
<i>ft arthritis pain</i>	OTC	
<i>gnp arthritis pain</i>	OTC	
<i>gnp diclofenac sodium</i>	OTC	
<i>goodsense arthritis pain 1 % gel</i>	OTC	
<i>kls arthritis pain relief</i>	OTC	
<i>kls diclofenac sodium</i>	OTC	
<i>mm arthritis pain reliever</i>	OTC	
<i>motrin arthritis pain</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>pharmacist choice diclofenac</i>	OTC	
<i>qc diclofenac sodium</i>	OTC	
<i>sm arthritis pain</i>	OTC	
ANTIBIOTICS - TOPICAL		
<i>bacitracin</i>	OTC	
<i>bacitracin / polymyxin b (polysporin)</i>	OTC	
<i>bacitracin zinc</i>	OTC	
<i>gentamicin sulfate 0.1 % cream</i>	1	QL 30 GM / 30 DAYS
<i>gentamicin sulfate 0.1 % ointment</i>	1	QL 120 GM / 30 DAYS
<i>mupirocin 2% ointment</i>	1	QL 220 GM / 30 DAYS
<i>neomycin / bacitracin / polymixin (neosporin)</i>	OTC	
<i>neomycin / bacitracin / polymixin / pramoxine (neosporin plus)</i>	OTC	
ANTIFUNGALS - TOPICAL		
<i>ciclopirox 0.77 % gel</i>	1	QL 100 GM / 30 DAYS
<i>ciclopirox 1 % shampoo</i>	1	QL 120 ML / 30 DAYS
<i>ciclopirox 8 % solution</i>	1	QL 13.2 ML / 30 DAYS
<i>ciclopirox olamine 0.77 % cream</i>	1	QL 90 GM / 30 DAYS
<i>ciclopirox olamine 0.77 % suspension</i>	1	QL 60 ML / 30 DAYS
<i>clotrimazole (lotrimin)</i>	OTC	
<i>clotrimazole cream (lotrimin) rx only</i>	1	QL 45 GM / 30 DAYS
<i>clotrimazole solution (lotrimin) rx only</i>	1	QL 30 ML / 28 OVER TIME

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>clotrimazole-betamethasone 1-0.05 % cream</i>	1	QL 90 GM / 30 DAYS
<i>econazole nitrate</i>	1	QL 85 GM / 30 DAYS
<i>ketconazole 2 % cream</i>	1	QL 120 GM / 30 DAYS
<i>ketconazole 2 % shampoo</i>	1	QL 240 ML / 30 DAYS
<i>klayesta</i>	1	QL 60 GM / 30 DAYS
<i>miconazole (micatin)</i>	OTC	
<i>nyamyc</i>	1	QL 60 GM / 30 DAYS
<i>nystatin (nystatin 100000 unit/gm cream, nystatin 100000 unit/gm ointment)</i>	1	QL 30 GM / 30 DAYS
<i>nystatin 100000 unit/gm powder</i>	1	QL 60 GM / 30 DAYS
<i>nystatin-triamcinolone</i>	1	QL 60 GM / 30 DAYS
<i>nystop</i>	1	QL 60 GM / 30 DAYS
<i>terbinafine (lamisil)</i>	OTC	
<i>tolnaftate (tinactin)</i>	OTC	
ANTIHISTAMINES-TOPICAL		
<i>diphenhydramine</i>	OTC	
<i>diphenhydramine / zinc</i>	OTC	
ANTINEOPLASTIC OR PREMALIGNANT LESION AGENTS - TOPICAL		
<i>bexarotene 1 % gel</i>	1	QL 60 GM / 30 DAYS PA ² NDS Non-Extended Day Supply
<i>diclofenac sodium 3 % gel</i>	1	QL 100 GM / 30 DAYS PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
FLUOROURACIL (FLUOROURACIL 2 % SOLUTION, FLUOROURACIL 5 % SOLUTION)	1	QL 10 ML / 30 DAYS
<i>fluorouracil 5 % cream</i>	1	QL 40 GM / 30 DAYS
PANRETIN	1	PA ² NDS Non-Extended Day Supply
VALCHLOR	1	QL 240 GM / 30 DAYS PA ² NDS Non-Extended Day Supply LA

ANTIPRURITICS - TOPICAL

<i>anti-itch 0.5-0.5 % lotion</i>	OTC	
<i>cvs anti-itch 0.5-0.5 % lotion</i>	OTC	
<i>gnp anti-itch 0.5-0.5 % lotion</i>	OTC	
<i>men-phor</i>	OTC	

ANTIPSORIATICS

<i>acitretin</i>	1	
<i>calcipotriene (calcipotriene 0.005 % cream, calcipotriene 0.005 % ointment)</i>	1	QL 120 GM / 30 DAYS
CALCIPOTRIENE 0.005 % SOLUTION	1	QL 120 ML / 30 DAYS
CALCITRIOL 3 MCG/GM OINTMENT	1	
METHOXSALLEN RAPID	1	NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SKYRIZI 150 MG/ML SOLN PRSYR	1	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
SKYRIZI PEN	1	QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
STELARA (STELARA 45 MG/0.5ML SOLN PRSYR, STELARA 45 MG/0.5ML SOLUTION)	1	QL 0.5 ML / 28 DAYS PA NDS Non-Extended Day Supply
STELARA 90 MG/ML SOLN PRSYR	1	QL 1 ML / 28 DAYS PA NDS Non-Extended Day Supply
TALTZ (TALTZ 80 MG/ML SOLN A-INJ, TALTZ 80 MG/ML SOLN PRSYR)	1	QL 1 ML / 28 DAYS PA NDS Non-Extended Day Supply LA
<i>tazarotene (tazarotene 0.05 % gel, tazarotene 0.1 % cream, tazarotene 0.1 % gel)</i>	1	QL 60 GM / 30 DAYS PA
ANTISEBORRHEIC PRODUCTS		
<i>selenium sulfide 2.5 % lotion</i>	1	
ANTIVIRALS - TOPICAL		
<i>acyclovir 5 % ointment</i>	1	QL 30 GM / 30 DAYS
<i>penciclovir</i>	1	QL 5 GM / 7 OVER TIME

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
BATH PRODUCTS		
<i>bath oil</i>	OTC	
<i>body wash</i>	OTC	
<i>emollient</i>	OTC	
MOISTURIZING CREAM (VANICREAM)	OTC	
BURN PRODUCTS		
<i>silver sulfadiazine</i>	1	
<i>ssd</i>	1	
SULFAMYLON 85 MG/GM CREAM	1	QL 453.6 GM / 30 DAYS
CORTICOSTEROIDS - TOPICAL		
<i>betamethasone dipropionate (betamethasone dipropionate 0.05 % cream, betamethasone dipropionate 0.05 % ointment)</i>	1	QL 90 GM / 30 DAYS
<i>betamethasone dipropionate 0.05 % lotion</i>	1	QL 120 ML / 30 DAYS
<i>betamethasone dipropionate aug (betamethasone dipropionate aug 0.05 % cream, betamethasone dipropionate aug 0.05 % gel, betamethasone dipropionate aug 0.05 % ointment)</i>	1	QL 100 GM / 30 DAYS
<i>betamethasone dipropionate aug 0.05 % lotion</i>	1	QL 120 ML / 30 DAYS
<i>betamethasone valerate (betamethasone valerate 0.1 % cream, betamethasone valerate 0.1 % ointment)</i>	1	QL 180 GM / 30 DAYS
<i>betamethasone valerate 0.1 % lotion</i>	1	QL 120 ML / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>clobetasol prop emollient base</i>	1	QL 120 GM / 30 DAYS
<i>clobetasol propionate (clobetasol propionate 0.05 % cream, clobetasol propionate 0.05 % gel, clobetasol propionate 0.05 % ointment)</i>	1	QL 120 GM / 30 DAYS
<i>clobetasol propionate 0.05 % foam</i>	1	QL 100 GM / 30 DAYS
<i>clobetasol propionate 0.05 % lotion</i>	1	QL 118 ML / 30 DAYS
<i>clobetasol propionate 0.05 % shampoo</i>	1	QL 236 ML / 30 DAYS
<i>clobetasol propionate 0.05 % solution</i>	1	QL 100 ML / 30 DAYS
<i>clobetasol propionate e</i>	1	QL 120 GM / 30 DAYS
<i>clodan 0.05 % shampoo</i>	1	QL 236 ML / 30 DAYS
<i>desonide (desonide 0.05 % cream, desonide 0.05 % ointment)</i>	1	QL 120 GM / 30 DAYS
<i>fluocinolone acetonide 0.01 % solution</i>	1	QL 90 ML / 30 DAYS
<i>fluocinolone acetonide 0.025 % ointment</i>	1	QL 120 GM / 30 DAYS
<i>fluocinolone acetonide body</i>	1	QL 120 ML / 30 DAYS
<i>fluocinolone acetonide scalp</i>	1	QL 120 ML / 30 DAYS
<i>fluocinonide (fluocinonide 0.05 % cream, fluocinonide 0.05 % ointment)</i>	1	QL 60 GM / 30 DAYS
FLUOCINONIDE 0.05 % GEL	1	QL 60 GM / 30 DAYS
<i>fluocinonide 0.05 % solution</i>	1	QL 60 ML / 30 DAYS
<i>halobetasol propionate 0.05 % cream</i>	1	
<i>halobetasol propionate 0.05 % ointment</i>	1	QL 50 GM / 30 DAYS
<i>hydrocortisone</i>	OTC	
HYDROCORTISONE 2.5 % LOTION	1	QL 118 ML / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>hydrocortisone cream</i>	1	QL 240 GM / 30 DAYS
<i>mometasone furoate (mometasone furoate 0.1 % cream, mometasone furoate 0.1 % ointment)</i>	1	QL 180 GM / 30 DAYS
<i>mometasone furoate 0.1 % solution</i>	1	QL 180 ML / 30 DAYS
<i>triamcinolone acetonide (triamcinolone acetonide 0.025 % cream, triamcinolone acetonide 0.025 % ointment, triamcinolone acetonide 0.1 % cream, triamcinolone acetonide 0.1 % ointment, triamcinolone acetonide 0.5 % cream)</i>	1	QL 454 GM / 30 DAYS
<i>triamcinolone acetonide (triamcinolone acetonide 0.025 % lotion, triamcinolone acetonide 0.1 % lotion)</i>	1	QL 120 ML / 30 DAYS
<i>triamcinolone acetonide 0.5 % ointment</i>	1	QL 120 GM / 30 DAYS
<i>triderm</i>	1	QL 454 GM / 30 DAYS

DIAPER RASH PRODUCTS

<i>diaper rash products</i>	OTC	
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ECZEMA AGENTS

ADBRY 150 MG/ML SOLN PRSYR	1	QL 6 ML / 28 DAYS PA NDS Non-Extended Day Supply LA
DUPIXENT (DUPIXENT 200 MG/1.14ML SOLN PEN, DUPIXENT 200 MG/1.14ML SOLN PRSYR)	1	QL 4.56 ML / 28 DAYS PA NDS Non-Extended Day Supply
DUPIXENT (DUPIXENT 300 MG/2ML SOLN PEN, DUPIXENT 300 MG/2ML SOLN PRSYR)	1	QL 8 ML / 28 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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DUPIXENT 100 MG/0.67ML SOLN PRSYR

1

QL 1.34 ML / 28 DAYS
PA
NDS Non-Extended Day Supply

EMOLLIENT/KERATOLYTIC AGENTS

urea 10% and 20% (carmol)

OTC

EMOLLIENTS

ammonium lactate (amlactin)

OTC

ammonium lactate (amlactin) rx only

1

glycerin

OTC

mineral oil / petrolatum

OTC

vitamin a

OTC

vitamin a / vitamin d

OTC

ENZYMES - TOPICAL

SANTYL

1

QL 180 GM / 30 OVER TIME

IMMUNOMODULATING AGENTS - TOPICAL

imiquimod 5 % cream

1

QL 24 EA / 30 DAYS

IMMUNOSUPPRESSIVE AGENTS - TOPICAL

pimecrolimus

1

QL 100 GM / 30 DAYS

tacrolimus (tacrolimus 0.03 % ointment, tacrolimus 0.1 % ointment)

1

QL 100 GM / 30 DAYS

KERATOLYTIC/ANTIMITOTIC AGENTS

PODOFILOX 0.5 % SOLUTION

1

QL 7 ML / 30 DAYS



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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>salicylic acid</i>	OTC	
LINIMENTS		
<i>camphor / menthol / methyl salicylate (salonpas)</i>	OTC	
<i>methyl salicylate / menthol</i>	OTC	
<i>trolamine salicylate (myoflex)</i>	OTC	
LOCAL ANESTHETICS - TOPICAL		
<i>capsaicin (zostrix)</i>	OTC	
<i>capsaicin / menthol (salonpas)</i>	OTC	
<i>lidocaine hcl 4 % solution</i>	1	QL 50 ML / 30 DAYS
LIDOCAINE HCL URETHRAL/MUCOSAL (LIDOCAINE HCL URETHRAL/MUCOSAL 2 % GEL, LIDOCAINE HCL URETHRAL/MUCOSAL 2 % PRSYR)	1	QL 60 ML / 7 OVER TIME
<i>lidocaine ointment rx only</i>	1	QL 107 GM / 30 DAYS
<i>lidocaine patches</i>	OTC	
<i>lidocaine patches rx only</i>	1	QL 90 EA / 30 DAYS PA
<i>lidocaine-prilocaine 2.5-2.5 % cream</i>	1	QL 30 GM / 30 DAYS
<i>pramoxine / calamine</i>	OTC	
MISC. TOPICAL		
<i>calamine</i>	OTC	
<i>calamine / zinc oxide</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>dimethicone</i>	OTC	
DIMETHICONE CREAM	OTC	
DRYSOL	1*	
<i>eyelid cleansers</i>	OTC	
<i>lanolin / petrolatum</i>	OTC	
<i>lanolin/mineral oil/white petrolatum (eucerin)</i>	OTC	
<i>menthol / zinc oxide</i>	OTC	
<i>mineral oil</i>	OTC	
SKIN OIL (JOHNSONS BABY OIL)	OTC	
<i>skin oils</i>	OTC	
<i>sodium chloride</i>	OTC	
<i>witch hazel</i>	OTC	
<i>zinc oxide (desitin)</i>	OTC	
ROSACEA AGENTS		
<i>azelaic acid</i>	1	QL 50 GM / 30 DAYS
<i>ivermectin 1 % cream</i>	1	QL 60 GM / 30 OVER TIME
<i>metronidazole (metronidazole 0.75 % cream, metronidazole 0.75 % gel)</i>	1	QL 45 GM / 30 DAYS
<i>metronidazole 0.75 % lotion</i>	1	QL 59 ML / 30 DAYS
<i>metronidazole 1 % gel</i>	1	QL 60 GM / 30 DAYS
SCABICIDES PEDICULICIDES		
LINDANE	1	
<i>malathion</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>permethrin (nix)</i>	OTC	
<i>permethrin (nix) rx only</i>	1	
<i>piperonyl / pyrethrins (rid)</i>	OTC	
TAR PRODUCTS		
<i>coal tar</i>	OTC	
WOUND CARE PRODUCTS		
REGANEX	1	 Non-Extended Day Supply
<i>wound care supplies</i>	OTC	
DIAGNOSTIC PRODUCTS		
DIAGNOSTIC TESTS		
<i>covid-19 test kit</i>	OTC	 8 EA / 30 DAYS
ONETOUCH ULTRA	Part B Covered	
ONETOUCH ULTRA TEST	Part B Covered	
ONETOUCH VERIO STRIP	Part B Covered	
DIETARY PRODUCTS/DIETARY MANAGEMENT PRODUCTS		
DIETARY MANAGEMENT PRODUCTS		
I-methylfolate	OTC	
I-methylfolate combinations	OTC	
NUTRITIONAL SUPPLEMENTS		
<i>nutritional supplements</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
DIGESTIVE AIDS		
DIGESTIVE ENZYMES		
CREON	1	
<i>lactase (lactaid)</i>	OTC	
SUCRAID	1	<div data-bbox="1133 577 1193 615">PA</div> <div data-bbox="1133 632 1193 672">NDS</div> <div data-bbox="1203 632 1477 695">Non-Extended Day Supply</div> <div data-bbox="1133 699 1193 737">LA</div>
DIURETICS		
CARBONIC ANHYDRASE INHIBITORS		
<i>acetazolamide</i>	1	
<i>acetazolamide er</i>	1	
<i>methazolamide (methazolamide 25 mg tab, methazolamide 50 mg tab)</i>	1	
DIURETIC COMBINATIONS		
AMILORIDE- HYDROCHLOROTHIAZIDE	1	
<i>spironolactone-hctz</i>	1	
<i>triamterene-hctz</i>	1	
LOOP DIURETICS		
<i>bumetanide (bumetanide 0.25 mg/ml solution, bumetanide 0.5 mg tab, bumetanide 1 mg tab, bumetanide 2 mg tab)</i>	1	
<i>ethacrynic acid</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>furosemide (furosemide 8 mg/ml solution, furosemide 10 mg/ml solution, furosemide 20 mg tab, furosemide 40 mg tab, furosemide 80 mg tab)</i>	1	
<i>torseamide</i>	1	
POTASSIUM SPARING DIURETICS		
<i>amiloride hcl</i>	1	
<i>spironolactone (spironolactone 25 mg tab, spironolactone 50 mg tab, spironolactone 100 mg tab)</i>	1	
THIAZIDES AND THIAZIDE-LIKE DIURETICS		
<i>chlorthalidone</i>	1	
<i>hydrochlorothiazide (hydrochlorothiazide 12.5 mg cap, hydrochlorothiazide 12.5 mg tab, hydrochlorothiazide 25 mg tab, hydrochlorothiazide 50 mg tab)</i>	1	
<i>indapamide</i>	1	
<i>metolazone (metolazone 2.5 mg tab, metolazone 5 mg tab, metolazone 10 mg tab)</i>	1	
ENDOCRINE AND METABOLIC AGENTS - MISC.		
BONE DENSITY REGULATORS		
<i>alendronate sodium (alendronate sodium 10 mg tab, alendronate sodium 35 mg tab, alendronate sodium 70 mg tab, alendronate sodium 70 mg/75ml solution)</i>	1	
<i>calcitonin (salmon) 200 unit/act solution</i>	1	
<i>ibandronate sodium 150 mg tab</i>	1	QL 1 EA / 30 DAYS

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>risedronate sodium</i>	1	
<i>teriparatide</i>	1	QL 2.48 ML / 28 DAYS PA NDS Non-Extended Day Supply
TERIPARATIDE (RECOMBINANT) (TERIPARATIDE (RECOMBINANT) 600 MCG/2.4ML SOLN PEN, TERIPARATIDE (RECOMBINANT) 620 MCG/2.48ML SOLN PEN)	1	QL 2.48 ML / 28 DAYS PA NDS Non-Extended Day Supply
XGEVA	1	QL 1.7 ML / 28 DAYS PA NDS Non-Extended Day Supply
GROWTH HORMONE RECEPTOR ANTAGONISTS		
SOMAVERT	1	PA NDS Non-Extended Day Supply LA
GROWTH HORMONES		
OMNITROPE (OMNITROPE 5 MG/1.5ML SOLN CART, OMNITROPE 5.8 MG RECON SOLN, OMNITROPE 10 MG/1.5ML SOLN CART)	1	PA NDS Non-Extended Day Supply
SKYTROFA	1	PA NDS Non-Extended Day Supply LA

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HORMONE RECEPTOR MODULATORS		
OSPHENA	1	
<i>raloxifene hcl</i>	1	
INSULIN-LIKE GROWTH FACTORS (SOMATOMEDINS)		
INCRELEX	1	<div data-bbox="1133 579 1192 615">PA</div> <div data-bbox="1133 632 1192 667">NDS</div> <div data-bbox="1203 632 1479 695">Non-Extended Day Supply</div> <div data-bbox="1133 705 1192 741">LA</div>
METABOLIC MODIFIERS		
<i>betaine</i>	1	<div data-bbox="1133 846 1192 882">NDS</div> <div data-bbox="1203 846 1479 909">Non-Extended Day Supply</div> <div data-bbox="1133 919 1192 955">LA</div>
<i>calcitriol (calcitriol 0.25 mcg cap, calcitriol 0.5 mcg cap, calcitriol 1 mcg/ml solution)</i>	1	
<i>carglumic acid</i>	1	<div data-bbox="1133 1077 1192 1113">PA</div> <div data-bbox="1133 1129 1192 1165">NDS</div> <div data-bbox="1203 1129 1479 1192">Non-Extended Day Supply</div> <div data-bbox="1133 1203 1192 1239">LA</div>
<i>cinacalcet hcl</i>	1	<div data-bbox="1133 1266 1192 1302">PA</div>
<i>doxercalciferol (doxercalciferol 0.5 mcg cap, doxercalciferol 1 mcg cap, doxercalciferol 2.5 mcg cap)</i>	1	
<i>levocarnitine (levocarnitine 1 gm/10ml solution, levocarnitine 330 mg tab)</i>	1	
<i>levocarnitine sf</i>	1	
NEXVIAZYME	1	<div data-bbox="1133 1623 1192 1659">PA</div> <div data-bbox="1133 1675 1192 1711">NDS</div> <div data-bbox="1203 1675 1479 1738">Non-Extended Day Supply</div> <div data-bbox="1133 1749 1192 1785">LA</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>nitisinone</i>	1	<div data-bbox="1133 317 1192 352">PA</div> <div data-bbox="1133 365 1192 401">NDS</div> Non-Extended Day Supply
OPFOLDA	1	<div data-bbox="1133 453 1192 489">QL</div> 8 EA / 28 DAYS
<i>paricalcitol (paricalcitol 1 mcg cap, paricalcitol 2 mcg cap, paricalcitol 4 mcg cap)</i>	1	
<i>sapropterin dihydrochloride (sapropterin dihydrochloride 100 mg packet, sapropterin dihydrochloride 500 mg packet)</i>	1	<div data-bbox="1133 653 1192 688">PA</div> <div data-bbox="1133 701 1192 737">NDS</div> Non-Extended Day Supply <div data-bbox="1133 770 1192 806">LA</div>
<i>sodium phenylbutyrate 500 mg tab</i>	1	<div data-bbox="1133 840 1192 875">PA</div> <div data-bbox="1133 888 1192 924">NDS</div> Non-Extended Day Supply
MINERALOCORTICOID RECEPTOR ANTAGONISTS		
KERENDIA	1	<div data-bbox="1133 1050 1192 1085">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 1098 1192 1134">PA</div>
POSTERIOR PITUITARY HORMONES		
<i>desmopressin ace spray refrig</i>	1	
<i>desmopressin acetate (desmopressin acetate 0.1 mg tab, desmopressin acetate 0.2 mg tab)</i>	1	
<i>desmopressin acetate spray</i>	1	
PROLACTIN INHIBITORS		
<i>cabergoline</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SOMATOSTATIC AGENTS		
<i>octreotide acetate (octreotide acetate 50 mcg/ml solution, octreotide acetate 100 mcg/ml solution, octreotide acetate 200 mcg/ml solution, octreotide acetate 500 mcg/ml solution, octreotide acetate 1000 mcg/ml solution)</i>	1	PA
SIGNIFOR	1	QL 60 ML / 30 DAYS PA NDS Non-Extended Day Supply LA
ESTROGENS		
ESTROGEN COMBINATIONS		
<i>estradiol-norethindrone acet</i>	1	
<i>fyavolv</i>	1	
<i>jinteli</i>	1	
<i>norethindrone-eth estradiol</i>	1	
ESTROGENS		
<i>dotti</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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estradiol (estradiol 0.025 mg/24hr patch tw, estradiol 0.025 mg/24hr patch wk, estradiol 0.0375 mg/24hr patch tw, estradiol 0.0375 mg/24hr patch wk, estradiol 0.05 mg/24hr patch tw, estradiol 0.05 mg/24hr patch wk, estradiol 0.06 mg/24hr patch wk, estradiol 0.075 mg/24hr patch tw, estradiol 0.075 mg/24hr patch wk, estradiol 0.1 mg/24hr patch tw, estradiol 0.1 mg/24hr patch wk, estradiol 0.5 mg tab, estradiol 1 mg tab, estradiol 2 mg tab)

1

estradiol valerate

1

lyllana

1

MENEST

1

FLUOROQUINOLONES

FLUOROQUINOLONES

ciprofloxacin hcl (ciprofloxacin hcl 100 mg tab, ciprofloxacin hcl 250 mg tab, ciprofloxacin hcl 500 mg tab, ciprofloxacin hcl 750 mg tab)

1

ciprofloxacin in d5w

1

levofloxacin (levofloxacin 25 mg/ml solution, levofloxacin 250 mg tab, levofloxacin 500 mg tab, levofloxacin 750 mg tab)

1

levofloxacin in d5w

1

MOXIFLOXACIN HCL (MOXIFLOXACIN HCL 400 MG TAB, MOXIFLOXACIN HCL 400 MG/250ML SOLUTION)

1

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
MOXIFLOXACIN HCL IN NAACL	1	
OFLOXACIN (OFLOXACIN 300 MG TAB, OFLOXACIN 400 MG TAB)	1	
GASTROINTESTINAL AGENTS - MISC.		
ANTIFLATULENTS		
<i>simethicone (mylicon)</i>	OTC	
GALLSTONE SOLUBILIZING AGENTS		
RELTONE	1	PA
<i>ursodiol (ursodiol 250 mg tab, ursodiol 300 mg cap, ursodiol 500 mg tab)</i>	1	
GASTROINTESTINAL ANTIALLERGY AGENTS		
<i>cromolyn sodium 100 mg/5ml conc</i>	1	
GASTROINTESTINAL CHLORIDE CHANNEL ACTIVATORS		
<i>lubiprostone</i>	1	
GASTROINTESTINAL STIMULANTS		
<i>metoclopramide hcl (metoclopramide hcl 5 mg tab, metoclopramide hcl 5 mg/5ml solution, metoclopramide hcl 10 mg tab, metoclopramide hcl 10 mg/10ml solution)</i>	1	
INFLAMMATORY BOWEL AGENTS		
<i>balsalazide disodium</i>	1	
DIPENTUM	1	NDS Non-Extended Day Supply

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>mesalamine (mesalamine 1.2 gm tab dr, mesalamine 4 gm enema, mesalamine 400 mg cap dr, mesalamine 1000 mg suppos)</i>	1	
MESALAMINE 800 MG TAB DR	1	
<i>mesalamine er</i>	1	
<i>mesalamine-cleanser</i>	1	
SKYRIZI 180 MG/1.2ML SOLN CART	1	<div data-bbox="1133 632 1187 695">QL</div> 1.2 ML / 56 OVER TIME <div data-bbox="1133 705 1187 747">PA</div> <div data-bbox="1133 758 1187 821">NDS</div> Non-Extended Day Supply
SKYRIZI 360 MG/2.4ML SOLN CART	1	<div data-bbox="1133 846 1187 909">QL</div> 2.4 ML / 56 OVER TIME <div data-bbox="1133 919 1187 961">PA</div> <div data-bbox="1133 972 1187 1035">NDS</div> Non-Extended Day Supply
<i>sulfasalazine (sulfasalazine 500 mg tab, sulfasalazine 500 mg tab dr)</i>	1	
INTESTINAL ACIDIFIERS		
<i>enulose</i>	1	
<i>generlac</i>	1	
<i>lactulose encephalopathy</i>	1	
IRRITABLE BOWEL SYNDROME (IBS) AGENTS		
<i>alosetron hcl</i>	1	<div data-bbox="1133 1476 1187 1539">NDS</div> Non-Extended Day Supply
LINZESS	1	<div data-bbox="1133 1566 1187 1608">QL</div> 30 EA / 30 DAYS
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK	1	<div data-bbox="1133 1698 1187 1740">QL</div> 30 EA / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
RELISTOR 12 MG/0.6ML SOLUTION	1	<ul style="list-style-type: none"> QL 18 ML / 30 DAYS PA NDS Non-Extended Day Supply
RELISTOR 8 MG/0.4ML SOLUTION	1	<ul style="list-style-type: none"> QL 12 ML / 30 DAYS PA NDS Non-Extended Day Supply
PHOSPHATE BINDER AGENTS		
<i>calcium acetate (phos binder)</i>	1	
<i>calcium acetate 667 mg tab</i>	1	
<i>lanthanum carbonate</i>	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply
<i>sevelamer carbonate</i>	1	
TRYPTOPHAN HYDROXYLASE INHIBITORS		
XERMELO	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
GENITOURINARY AGENTS - MISCELLANEOUS		
ACIDIFIERS		
K-PHOS NO 2	1	
ALKALINIZERS		
<i>potassium citrate</i>	OTC	
<i>potassium citrate / sodium citrate (cytra-3)</i>	OTC	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>potassium citrate er</i>	1	
<i>sodium citrate</i>	OTC	
CYSTINOSIS AGENTS		
CYSTAGON	1	<div data-bbox="1133 506 1195 548">PA</div> <div data-bbox="1133 554 1195 596">LA</div>
GENITOURINARY IRRIGANTS		
<i>acetic acid 0.25 % solution</i>	1	
RENACIDIN	1	
<i>sodium chloride 0.9 % solution</i>	1	
INTERSTITIAL CYSTITIS AGENTS		
ELMIRON	1	
PROSTATIC HYPERTROPHY AGENTS		
<i>alfuzosin hcl er</i>	1	
<i>dutasteride</i>	1	
<i>dutasteride-tamsulosin hcl</i>	1	
<i>finasteride 5 mg tab</i>	1	
<i>silodosin</i>	1	
<i>tamsulosin hcl</i>	1	
URINARY ANALGESICS		
<i>phenazopyridine (azo)</i>	OTC	
URINARY STONE AGENTS		
LITHOSTAT	1	
<i>tiopronin 100 mg tab</i>	1	<div data-bbox="1133 1688 1195 1730">PA</div> <div data-bbox="1133 1736 1195 1778">NDS</div> <div data-bbox="1203 1736 1479 1803">Non-Extended Day Supply</div> <div data-bbox="1133 1806 1195 1848">LA</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
GOUT AGENTS		
GOUT AGENT COMBINATIONS		
<i>colchicine-probenecid</i>	1	
GOUT AGENTS		
<i>allopurinol (allopurinol 100 mg tab, allopurinol 300 mg tab)</i>	1	
<i>colchicine 0.6 mg tab</i>	1	
<i>febuxostat</i>	1	
URICOSURICS		
<i>probenecid</i>	1	
HEMATOLOGICAL AGENTS - MISC.		
BRADYKININ B2 RECEPTOR ANTAGONISTS		
<i>icatibant acetate</i>	1	<div data-bbox="1133 1079 1192 1115">PA</div> <div data-bbox="1133 1129 1192 1188">NDS</div> <div data-bbox="1198 1129 1479 1188">Non-Extended Day Supply</div> <div data-bbox="1133 1203 1192 1239">LA</div>
<i>sajazir</i>	1	<div data-bbox="1133 1268 1192 1304">PA</div> <div data-bbox="1133 1318 1192 1377">NDS</div> <div data-bbox="1198 1318 1479 1377">Non-Extended Day Supply</div> <div data-bbox="1133 1392 1192 1428">LA</div>
COMPLEMENT INHIBITORS		
CINRYZE	1	<div data-bbox="1133 1530 1192 1566">PA</div> <div data-bbox="1133 1581 1192 1640">NDS</div> <div data-bbox="1198 1581 1479 1640">Non-Extended Day Supply</div> <div data-bbox="1133 1654 1192 1690">LA</div>
HAEGARDA	1	<div data-bbox="1133 1719 1192 1755">PA</div> <div data-bbox="1133 1770 1192 1829">NDS</div> <div data-bbox="1198 1770 1479 1829">Non-Extended Day Supply</div> <div data-bbox="1133 1843 1192 1879">LA</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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RUCONEST

1

PA

NDS

Non-Extended Day Supply

LA

HEMATORHEOLOGIC AGENTS

pentoxifylline er

1

PLATELET AGGREGATION INHIBITORS

anagrelide hcl

1

aspirin-dipyridamole er

1

BRILINTA

1

cilostazol

1

clopidogrel bisulfate 75 mg tab

1

dipyridamole (dipyridamole 25 mg tab, dipyridamole 50 mg tab, dipyridamole 75 mg tab)

1

prasugrel hcl

1

HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

CERDELGA

1

QL

60 EA / 30 DAYS

PA

NDS

Non-Extended Day Supply

LA

miglustat

1

PA

NDS

Non-Extended Day Supply

LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>yargesa</i>	1	<div data-bbox="1133 317 1195 352">PA</div> <div data-bbox="1133 369 1477 436">NDS Non-Extended Day Supply</div> <div data-bbox="1133 443 1195 474">LA</div>
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AGENTS FOR SICKLE CELL DISEASE

DROXIA	1	
l-glutamine 5 gm packet	1	<div data-bbox="1133 632 1477 667">QL 180 EA / 30 DAYS</div> <div data-bbox="1133 680 1195 716">PA</div> <div data-bbox="1133 730 1477 798">NDS Non-Extended Day Supply</div> <div data-bbox="1133 804 1195 837">LA</div>

COBALAMINS

<i>cyanocobalmin (vitamin b12)</i>	OTC
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FOLIC ACID/FOLATES

<i>folic acid</i>	OTC
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HEMATOPOIETIC GROWTH FACTORS

PROMACTA (PROMACTA 12.5 MG PACKET, PROMACTA 25 MG PACKET)	1	<div data-bbox="1133 1201 1195 1236">PA</div> <div data-bbox="1133 1251 1477 1318">NDS Non-Extended Day Supply</div>
PROMACTA (PROMACTA 12.5 MG TAB, PROMACTA 25 MG TAB)	1	<div data-bbox="1133 1339 1477 1375">QL 30 EA / 30 DAYS</div> <div data-bbox="1133 1388 1195 1423">PA</div> <div data-bbox="1133 1438 1477 1503">NDS Non-Extended Day Supply</div>
PROMACTA (PROMACTA 50 MG TAB, PROMACTA 75 MG TAB)	1	<div data-bbox="1133 1524 1477 1560">QL 60 EA / 30 DAYS</div> <div data-bbox="1133 1572 1195 1608">PA</div> <div data-bbox="1133 1623 1477 1686">NDS Non-Extended Day Supply</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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RETACRIT (RETACRIT 2000 UNIT/ML SOLUTION, RETACRIT 3000 UNIT/ML SOLUTION, RETACRIT 4000 UNIT/ML SOLUTION, RETACRIT 10000 UNIT/ML SOLUTION, RETACRIT 20000 UNIT/ML SOLUTION)	1	PA
RETACRIT 40000 UNIT/ML SOLUTION	1	PA NDS Non-Extended Day Supply
UDENYCA	1	NDS Non-Extended Day Supply
ZARXIO	1	NDS Non-Extended Day Supply
ZIEXTENZO	1	NDS Non-Extended Day Supply

HEMATOPOIETIC MIXTURES

<i>chewable iron</i>	OTC
<i>cyanocobalmin (vitamin b12) / folic acid</i>	OTC
<i>ferraplus 90</i>	OTC
FERREX	OTC
<i>ferrex 150 forte</i>	OTC
<i>ferrex 150 forte plus</i>	OTC
<i>ferrex 150 plus</i>	OTC
<i>ferrex 28</i>	OTC
<i>ferrous fumarate / folic acid</i>	OTC
<i>ferrous fumarate / vitamin b12 / vitamin c</i>	OTC
<i>ferrous fumarate / vitamin c / vitamin b12 / folic acid</i>	OTC

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>ferrous fumarate polysaccharide complex</i>	OTC	
FERROUS SULFATE	OTC	
<i>ferrous sulfate combination</i>	OTC	
<i>folic acid / vitamin b6 / vitamin b12</i>	OTC	
<i>folic acid / vitamin b6 / vitamin b12 / omega-3</i>	OTC	
<i>folic acid / vitamin d</i>	OTC	
<i>hemetab</i>	OTC	
<i>iron / folic acid / vitamin c / vitamin b6 / vitamin b12 / zinc</i>	OTC	
<i>iron / vitamin c / vitamin b12 / folic acid</i>	OTC	
<i>iron combinations</i>	OTC	
<i>iron polysaccharide complex</i>	OTC	
<i>multigen</i>	OTC	
<i>multigen folic</i>	OTC	
<i>multigen plus</i>	OTC	
MULTIGEN TABLET	OTC	
<i>taron forte</i>	OTC	
<i>vitamin c / iron (vitron-c)</i>	OTC	
IRON		
<i>carbonyl iron</i>	OTC	
<i>ferrous fumarate</i>	OTC	
<i>ferrous gluconate</i>	OTC	
<i>ferrous sulfate</i>	OTC	
<i>polysaccharide iron complex</i>	OTC	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HEMOSTATICS		
HEMOSTATICS - SYSTEMIC		
<i>tranexamic acid 650 mg tab</i>	1	
HYPNOTICS/SEDATIVES/SLEEP DISORDER AGENTS		
BARBITURATE HYPNOTICS		
<i>phenobarbital (phenobarbital 15 mg tab, phenobarbital 16.2 mg tab, phenobarbital 20 mg/5ml elixir, phenobarbital 20 mg/5ml solution, phenobarbital 30 mg tab, phenobarbital 32.4 mg tab, phenobarbital 60 mg tab, phenobarbital 64.8 mg tab, phenobarbital 97.2 mg tab, phenobarbital 100 mg tab)</i>	1	
HYPNOTICS - TRICYCLIC AGENTS		
<i>doxepin hcl (doxepin hcl 3 mg tab, doxepin hcl 6 mg tab)</i>	1	QL 30 EA / 30 DAYS
NON-BARBITURATE HYPNOTICS		
<i>eszopiclone</i>	1	QL 30 EA / 30 DAYS
<i>temazepam (temazepam 15 mg cap, temazepam 30 mg cap)</i>	1	QL 30 EA / 30 DAYS PA²
<i>zaleplon 10 mg cap</i>	1	QL 60 EA / 30 DAYS
<i>zaleplon 5 mg cap</i>	1	QL 30 EA / 30 DAYS
<i>zolpidem tartrate 10 mg tab</i>	1	QL 30 EA / 30 DAYS
<i>zolpidem tartrate 5 mg tab</i>	1	QL 60 EA / 30 DAYS
<i>zolpidem tartrate er</i>	1	QL 30 EA / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OREXIN RECEPTOR ANTAGONISTS		
BELSOMRA	1	QL 30 EA / 30 DAYS
DAYVIGO	1	QL 30 EA / 30 DAYS
SELECTIVE MELATONIN RECEPTOR AGONISTS		
HETLIOZ	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
<i>ramelteon</i>	1	QL 30 EA / 30 DAYS
<i>tasimelteon</i>	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
LAXATIVES		
BULK LAXATIVES		
<i>benefiber on the go powder</i>	OTC	
<i>calcium polycarbophil (fiber laxative)</i>	OTC	
<i>cellulose (unifiber)</i>	OTC	
<i>clear soluble fiber</i>	OTC	
<i>eq fiber powder</i>	OTC	
<i>eql fiber supplement</i>	OTC	
<i>eql fiber supplement (wheat)</i>	OTC	
<i>gnp best fiber</i>	OTC	
<i>goodsense best fiber</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>methylcellulose (citrucel)</i>	OTC	
<i>psyllium (metamucil)</i>	OTC	
LAXATIVE COMBINATIONS		
GAVILYTE-C	1	
<i>gavilyte-g</i>	1	
<i>gavilyte-n with flavor pack</i>	1	
GOLYTELY	1	
<i>na sulfate-k sulfate-mg sulf</i>	1	
<i>peg 3350-kcl-na bicarb-nacl</i>	1	
<i>peg-3350/electrolytes</i>	1	
<i>peg-3350/electrolytes/ascorbat</i>	1	
<i>peg-kcl-nacl-nasulf-na asc-c</i>	1	
<i>senna / docusate sodium (peri-colace)</i>	OTC	
SUFLAVE	1	
LAXATIVES - MISCELLANEOUS		
<i>constulose</i>	1	
<i>glycerin suppository</i>	OTC	
<i>lactulose (lactulose 10 gm/15ml solution, lactulose 20 gm/30ml solution)</i>	1	
<i>polyethylene glycol 3350 (miralax)</i>	OTC	
<i>sorbitol solution</i>	OTC	
SALINE LAXATIVES		
<i>enema</i>	OTC	
<i>magnesium citrate solution (citroma)</i>	OTC	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>magnesium hydroxide (phillips' milk of magnesia)</i>	OTC	
STIMULANT LAXATIVES		
<i>bisacodyl (dulcolax)</i>	OTC	
<i>sennosides</i>	OTC	
SURFACTANT LAXATIVES		
<i>docusate calcium (surfak)</i>	OTC	
<i>docusate sodium (colace)</i>	OTC	
MACROLIDES		
AZITHROMYCIN		
<i>azithromycin (azithromycin 1 gm packet, azithromycin 100 mg/5ml recon susp, azithromycin 200 mg/5ml recon susp, azithromycin 250 mg tab, azithromycin 500 mg recon soln, azithromycin 500 mg tab, azithromycin 600 mg tab)</i>	1	
CLARITHROMYCIN		
CLARITHROMYCIN (CLARITHROMYCIN 125 MG/5ML RECON SUSP, CLARITHROMYCIN 250 MG TAB, CLARITHROMYCIN 250 MG/5ML RECON SUSP, CLARITHROMYCIN 500 MG TAB)	1	
<i>clarithromycin er</i>	1	
ERYTHROMYCINS		
<i>ery-tab</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ERYTHROCIN STEARATE	1	
<i>erythromycin (erythromycin 250 mg tab dr, erythromycin 333 mg tab dr, erythromycin 500 mg tab dr)</i>	1	
<i>erythromycin base (erythromycin base 250 mg tab, erythromycin base 250 mg tab dr, erythromycin base 333 mg tab dr, erythromycin base 500 mg tab, erythromycin base 500 mg tab dr)</i>	1	
ERYTHROMYCIN BASE 250 MG CP DR PART	1	
<i>erythromycin ethylsuccinate (erythromycin ethylsuccinate 200 mg/5ml recon susp, erythromycin ethylsuccinate 400 mg tab, erythromycin ethylsuccinate 400 mg/5ml recon susp)</i>	1	
FIDAXOMICIN		
DIFICID 200 MG TAB	1	QL 20 EA / 10 OVER TIME
DIFICID 40 MG/ML RECON SUSP	1	QL 136 ML / 10 OVER TIME
MEDICAL DEVICES AND SUPPLIES		
AUDITORY SUPPLIES		
<i>hearing aid batteries</i>	OTC	
BANDAGES-DRESSINGS-TAPE		
GAUZE PADS	1	
<i>gauze pads and dressings</i>	1	





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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
CONTRACEPTIVES		
<i>female condoms</i>	OTC	
<i>male condoms</i>	OTC	
DIABETIC SUPPLIES		
<i>blood glucose monitoring supplies</i>	Part B Covered	
DEXCOM G5 MOB/G4 PLAT SENSOR	Part B Covered	PA
DEXCOM G5 MOBILE RECEIVER	Part B Covered	PA
DEXCOM G5 MOBILE TRANSMITTER	Part B Covered	PA
DEXCOM G5 RECEIVER KIT	Part B Covered	PA
DEXCOM G6 RECEIVER	Part B Covered	QL 1 EA / 274 OVER TIME PA
DEXCOM G6 SENSOR	Part B Covered	QL 3 EA / 30 DAYS PA
DEXCOM G6 TRANSMITTER	Part B Covered	QL 1 EA / 68 OVER TIME PA
DEXCOM G7 RECEIVER	Part B Covered	QL 1 EA / 275 OVER TIME PA
DEXCOM G7 SENSOR	Part B Covered	QL 3 EA / 30 DAYS PA
FREESTYLE LIBRE 14 DAY READER	Part B Covered	QL 1 EA / 274 OVER TIME PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
FREESTYLE LIBRE 14 DAY SENSOR	Part B Covered	QL 2 EA / 28 DAYS PA
FREESTYLE LIBRE 2 READER	Part B Covered	QL 1 EA / 274 OVER TIME PA
FREESTYLE LIBRE 2 SENSOR	Part B Covered	QL 2 EA / 28 DAYS PA
FREESTYLE LIBRE 3 PLUS SENSOR	Part B Covered	QL 2 EA / 30 DAYS PA
FREESTYLE LIBRE 3 READER	Part B Covered	QL 1 EA / 274 OVER TIME PA
FREESTYLE LIBRE 3 SENSOR	Part B Covered	QL 2 EA / 28 DAYS PA
FREESTYLE LIBRE READER	Part B Covered	QL 1 EA / 274 OVER TIME PA
FREESTYLE LIBRE SENSOR SYSTEM	Part B Covered	QL 2 EA / 20 DAYS PA
<i>lancet device</i>	Part B Covered	
<i>lancets</i>	Part B Covered	
OMNIPOD 5 G6 INTRO (GEN 5)	1	QL 1 EA / 275 OVER TIME
OMNIPOD 5 G6 PODS (GEN 5)	1	QL 15 EA / 30 DAYS
OMNIPOD 5 G7 INTRO (GEN 5)	1	QL 1 EA / 275 OVER TIME
OMNIPOD 5 G7 PODS (GEN 5)	1	QL 15 EA / 30 DAYS
OMNIPOD 5 PACK	1	QL 15 EA / 30 DAYS

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OMNIPOD CLASSIC PDM (GEN 3)	1	 1 EA / 275 OVER TIME
OMNIPOD DASH INTRO (GEN 4)	1	 1 EA / 275 OVER TIME
OMNIPOD DASH PDM (GEN 4)	1	 1 EA / 275 OVER TIME
OMNIPOD DASH PODS (GEN 4)	1	 15 EA / 30 DAYS
GI-GU OSTOMY & IRRIGATION SUPPLIES		
<i>catheter</i>	OTC	
<i>incontinence supplies</i>	OTC	
INFANT CARE PRODUCTS		
<i>diapers</i>	OTC	
MISC. DEVICES		
<i>alcohol swabs</i>	1	
ALCOHOL SWABS 1X1	1	
OPTICAL AND OPHTHALMIC SUPPLIES		
<i>optical supplies</i>	OTC	
PARENTERAL THERAPY SUPPLIES		
INSULIN PEN NEEDLE	1	
INSULIN SYRINGE (DISP) U-100 0.3 ML	1	
INSULIN SYRINGE (DISP) U-100 1 ML	1	
INSULIN SYRINGE (DISP) U-100 1/2 ML	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
MONOJECT SYRINGES	1*	
<i>needles and syringes</i>	1	
<i>needles and syringes</i>	OTC	
<i>needles and syringes rx only</i>	OTC	
RESPIRATORY THERAPY SUPPLIES		
AEROCHAMBER HOLDING CHAMBER	1*	
AEROCHAMBER MINI CHAMBER	1*	
AEROCHAMBER MV	1*	
AEROCHAMBER PLS FLOVU MTHPIECE	1*	
AEROCHAMBER PLUS FLO-VU	1*	
AEROCHAMBER PLUS FLO-VU INTERM	OTC	
AEROCHAMBER PLUS FLO-VU LARGE	1*	
AEROCHAMBER PLUS FLO-VU MEDIUM	1*	
AEROCHAMBER PLUS FLO-VU SMALL	1*	
AEROCHAMBER PLUS FLO-VU W/MASK	1*	
AEROCHAMBER PLUS FLOW VU	1*	
AEROCHAMBER W/FLOWSIGNAL	1*	
AEROCHAMBER Z-STAT PLUS	1*	
AEROCHAMBER Z-STAT PLUS CHAMBR	1*	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
AEROCHAMBER Z-STAT PLUS/LARGE	1*	
AEROCHAMBER Z-STAT PLUS/MEDIUM	1*	
AEROCHAMBER Z-STAT PLUS/SMALL	1*	
AEROVENT PLUS	1*	
AIRIAL CHAMBER	OTC	
AIRZONE PEAK FLOW METER	OTC	
ASSESS FULL RANGE PEAK METER	OTC	
ASSESS LOW RANGE PEAK METER	OTC	
ASSESS PEAK FLOW METER	OTC	
ASTHMA CHECK METER-ZONE SYSTEM	OTC	
ASTHMAMENTOR	OTC	
BREATHE COMFORT CHAMBER/ADULT	OTC	
BREATHE COMFORT CHAMBER/CHILD	OTC	
BREATHE EASE LARGE	1*	
BREATHE EASE MEDIUM	1*	
BREATHE EASE PEAK FLOW METER	OTC	
BREATHE EASE SMALL	1*	
BREATHERITE	1*	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
BREATHERITE COLL SPACER ADULT	1*	
BREATHERITE COLL SPACER CHILD	1*	
BREATHERITE COLL SPACER INFANT	1*	
BREATHERITE RIGID SPACER/MASK	1*	
BREATHERITE SPACER NEONATE	1*	
BREATHERITE SPACER SMALL CHILD	1*	
BREATHERITE VALVED MDI CHAMBER	1*	
BREATHERITE/LARGE MASK	1*	
BREATHERITE/MEDIUM MASK	1*	
BREATHERITE/SMALL MASK	1*	
CLEVER CHOICE HOLDING CHAMBER	OTC	
CLEVER CHOICE PEAK FLOW METER	OTC	
COMPACT SPACE CHAMBER	1*	
COMPACT SPACE CHAMBER/LG MASK	1*	
COMPACT SPACE CHAMBER/MED MASK	1*	
COMPACT SPACE CHAMBER/SM MASK	1*	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
EASIVENT	1*	
EASIVENT MASK LARGE	1*	
EASIVENT MASK MEDIUM	1*	
EASIVENT MASK SMALL	1*	
EQ SPACE CHAMBER ANTI-STATIC	1*	
EQ SPACE CHAMBER ANTI-STATIC L	1*	
EQ SPACE CHAMBER ANTI-STATIC M	1*	
EQ SPACE CHAMBER ANTI-STATIC S	1*	
FLEXICHAMBER	1*	
INSPIRACHAMBER/LARGE	1*	
INSPIRACHAMBER/MEDIUM	1*	
INSPIRACHAMBER/MOUTHPIECE	1*	
INSPIRACHAMBER/SMALL	1*	
INSPIREASE	1*	
LITEAIRE	1*	
LUNG PERFORM PEAK FLOW METER	OTC	
MICROCHAMBER	1*	
MICROLIFE DIGITAL PEAK FLOW	OTC	
MICROSPACER	1*	
MINI WRIGHT PEAK FLOW METER	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OPTICHAMBER ADVANTAGE-LG MASK	1*	
OPTICHAMBER ADVANTAGE-MED MASK	1*	
OPTICHAMBER ADVANTAGE-SM MASK	1*	
OPTICHAMBER DIAMOND	1*	
OPTICHAMBER DIAMOND-LG MASK	1*	
OPTICHAMBER DIAMOND-MD MASK	1*	
OPTICHAMBER DIAMOND-SM MASK	1*	
OPTICHAMBER FACE MASK-LARGE	OTC	
OPTICHAMBER FACE MASK-MEDIUM	OTC	
OPTICHAMBER FACE MASK-SMALL	OTC	
OPTIHALER	1*	
PEAK A-I-R FLOW METER	OTC	
PEAK AIR PEAK FLOW METER	OTC	
PEAK FLOW METER UNIVERSAL RANG	OTC	
PERSONAL BEST FULL RANGE	OTC	
PERSONAL BEST LOW RANGE	OTC	
PIKO 1	OTC	
POCKET CHAMBER	1*	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
POCKET PEAK FLOW METER	OTC	
POCKET SPACER	1*	
POCKETPEAK PEAK FLOW METER	OTC	
PRIMEAIRE HOLDING CHAMBER	1*	
PRO COMFORT SPACER ADULT	OTC	
PRO COMFORT SPACER CHILD	OTC	
PRO COMFORT SPACER INFANT	OTC	
PROCARE SPACER/ADULT MASK	OTC	
PROCARE SPACER/CHILD MASK	OTC	
PROCHAMBER VHC	1*	
PURE COMFORT FLOW METER ADULT	OTC	
PURE COMFORT FLOW METER CHILD	OTC	
PURE COMFORT SPACER CHAMBER	OTC	
<i>respiratory therapy supplies</i>	OTC	
RITEFLO	1*	
STRIVE DUAL ZONE PEAK FLOW MTR	1*	
TRUZONE PEAK FLOW METER	1*	
VORTEX HOLD CHMBR/MASK/CHILD	1*	
VORTEX HOLD CHMBR/MASK/TODDLER	1*	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VORTEX HOLDING CHAMBER/MASK	1*	
VORTEX VALVED HOLDING CHAMBER	1*	
WATCHHALER	1*	
MIGRAINE PRODUCTS		
CALCITONIN GENE-RELATED PEPTIDE (CGRP) RECEPTOR ANTAG		
AIMOVIG	1	QL 1 ML / 30 DAYS PA
AJOVY	1	QL 1.5 ML / 30 DAYS PA
EMGALITY	1	QL 2 ML / 30 DAYS PA
EMGALITY (300 MG DOSE)	1	QL 3 ML / 30 DAYS PA
NURTEC	1	QL 16 EA / 30 DAYS PA
MIGRAINE COMBINATIONS		
ERGOTAMINE-CAFFEINE	1	
MIGERGOT	1	
<i>sumatriptan-naproxen sodium</i>	1	QL 18 EA / 30 OVER TIME
MIGRAINE PRODUCTS		
<i>dihydroergotamine mesylate 4 mg/ml solution</i>	1	QL 16 ML / 30 DAYS PA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SEROTONIN AGONISTS		
<i>eletriptan hydrobromide</i>	1	QL 18 EA / 30 OVER TIME
<i>naratriptan hcl</i>	1	QL 18 EA / 30 OVER TIME
<i>rizatriptan benzoate</i>	1	QL 36 EA / 28 OVER TIME
<i>sumatriptan</i>	1	QL 12 EA / 30 OVER TIME
<i>sumatriptan succinate (sumatriptan succinate 25 mg tab, sumatriptan succinate 50 mg tab, sumatriptan succinate 100 mg tab)</i>	1	QL 18 EA / 30 OVER TIME
<i>sumatriptan succinate (sumatriptan succinate 4 mg/0.5ml soln a-inj, sumatriptan succinate 6 mg/0.5ml soln a-inj, sumatriptan succinate 6 mg/0.5ml solution)</i>	1	QL 8 ML / 28 DAYS
<i>sumatriptan succinate refill</i>	1	QL 8 ML / 28 DAYS
<i>zolmitriptan (zolmitriptan 2.5 mg tab, zolmitriptan 2.5 mg tab disp, zolmitriptan 5 mg tab, zolmitriptan 5 mg tab disp)</i>	1	QL 18 EA / 30 OVER TIME
<i>zomig (zomig 2.5 mg tab, zomig 5 mg tab)</i>	1	QL 18 EA / 30 OVER TIME
MINERALS ELECTROLYTES		
CALCIUM		
<i>calcium / magnesium / vitamin d</i>	OTC	
<i>calcium / magnesium / zinc</i>	OTC	
<i>calcium / phosphorus / vitamin d</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>calcium / vitamin c / vitamin d</i>	OTC	
<i>calcium / vitamin d / vitamin k</i>	OTC	
<i>calcium carbonate</i>	OTC	
<i>calcium carbonate / folic acid / vitamin d</i>	OTC	
<i>calcium carbonate / vitamin d</i>	OTC	
<i>calcium carbonate / vitamin d / minerals</i>	OTC	
<i>calcium citrate</i>	OTC	
<i>calcium citrate / vitamin d</i>	OTC	
<i>calcium gluconate 10 % solution</i>	1	
ELECTROLYTE MIXTURES		
DEXTROSE-SODIUM CHLORIDE (DEXTROSE-SODIUM CHLORIDE 10-0.2 % SOLUTION, DEXTROSE-SODIUM CHLORIDE 10-0.45 % SOLUTION)	1	PA ³
<i>dextrose-sodium chloride (dextrose-sodium chloride 5-0.2 % solution, dextrose-sodium chloride 5-0.45 % solution, dextrose-sodium chloride 5-0.9 % solution)</i>	1	
DEXTROSE-SODIUM CHLORIDE 2.5-0.45 % SOLUTION	1	
<i>electrolyte solution</i>	OTC	
KCL (0.149%) IN NAACL	1	
KCL (0.298%) IN NAACL	1	
<i>kcl in dextrose-nacl (kcl in dextrose-nacl, kcl in dextrose-nacl 20-5-0.225 meq/l-%-% solution, kcl in dextrose-nacl 40-5-0.9 meq/l-%-% solution)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
KCL-LACTATED RINGERS-D5W	1	
LACTATED RINGERS	1	
<i>potassium chloride in dextrose 20-5 meq/l-% solution</i>	1	
<i>potassium chloride in nacl 20-0.45 meq/l-% solution</i>	1	
<i>potassium chloride in nacl 20-0.9 meq/l-% solution</i>	1	
<i>potassium chloride in nacl 40-0.9 meq/l-% solution</i>	1	
<i>ringers</i>	1*	
FLUORIDE		
<i>sodium fluoride</i>	1	
<i>sodium fluoride chewable tablet</i>	1	
MAGNESIUM		
<i>magnesium</i>	OTC	
<i>magnesium chloride</i>	OTC	
<i>magnesium gluconate</i>	OTC	
<i>magnesium sulfate 50 % solution</i>	1	
PHOSPHATE		
K-PHOS	1	
<i>phosphorus supplement</i>	OTC	
<i>potassium / sodium phosphate</i>	OTC	
POTASSIUM		
<i>klor-con</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>klor-con 10</i>	1	
<i>klor-con m10</i>	1	
<i>klor-con m15</i>	1	
<i>klor-con m20</i>	1	
POTASSIUM CHLORIDE (POTASSIUM CHLORIDE 10 MEQ/100ML SOLUTION, POTASSIUM CHLORIDE 10 MEQ/50ML SOLUTION, POTASSIUM CHLORIDE 20 MEQ/100ML SOLUTION, POTASSIUM CHLORIDE 20 MEQ/50ML SOLUTION, POTASSIUM CHLORIDE 40 MEQ/100ML SOLUTION)	1	
<i>potassium chloride 2 meq/ml solution</i>	1	
<i>potassium chloride 20 meq packet</i>	1	
<i>potassium chloride 20 meq/15ml (10%) solution</i>	1	
<i>potassium chloride 40 meq/15ml (20%) solution</i>	1	
<i>potassium chloride crys er (potassium chloride crys er 10 meq tab er, potassium chloride crys er 20 meq tab er)</i>	1	
<i>potassium chloride er (potassium chloride er 8 meq cap er, potassium chloride er 8 meq tab er, potassium chloride er 10 meq cap er, potassium chloride er 10 meq tab er, potassium chloride er 20 meq tab er)</i>	1	
<i>potassium gluconate</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
SODIUM		
<i>sodium chloride rx only</i>	1	
TRACE MINERALS		
<i>chromium</i>	OTC	
<i>selenium</i>	OTC	
ZINC		
<i>zinc</i>	OTC	
<i>zinc gluconate</i>	OTC	
<i>zinc sulfate</i>	OTC	
MISCELLANEOUS THERAPEUTIC CLASSES		
CHELATING AGENTS		
<i>penicillamine 250 mg tab</i>	1	<div data-bbox="1133 1031 1192 1066">PA</div> <div data-bbox="1133 1079 1192 1115">NDS</div> <div data-bbox="1203 1079 1479 1150">Non-Extended Day Supply</div>
<i>trientine hcl 250 mg cap</i>	1	<div data-bbox="1133 1165 1192 1201">PA</div> <div data-bbox="1133 1213 1192 1249">NDS</div> <div data-bbox="1203 1213 1479 1285">Non-Extended Day Supply</div>
IMMUNOMODULATORS		
<i>lenalidomide</i>	1	<div data-bbox="1133 1373 1192 1409">QL</div> <div data-bbox="1203 1373 1451 1409">28 EA / 28 DAYS</div> <div data-bbox="1133 1421 1192 1457">PA²</div> <div data-bbox="1133 1470 1192 1505">NDS</div> <div data-bbox="1203 1470 1479 1541">Non-Extended Day Supply</div> <div data-bbox="1133 1541 1192 1577">LA</div>
REVLIMID	1	<div data-bbox="1133 1606 1192 1642">QL</div> <div data-bbox="1203 1606 1451 1642">30 EA / 30 DAYS</div> <div data-bbox="1133 1654 1192 1690">PA²</div> <div data-bbox="1133 1703 1192 1738">NDS</div> <div data-bbox="1203 1703 1479 1774">Non-Extended Day Supply</div> <div data-bbox="1133 1774 1192 1810">LA</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
REZUROCK	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
THALOMID (THALOMID 150 MG CAP, THALOMID 200 MG CAP)	1	QL 60 EA / 30 DAYS NDS Non-Extended Day Supply LA
THALOMID (THALOMID 50 MG CAP, THALOMID 100 MG CAP)	1	QL 30 EA / 30 DAYS NDS Non-Extended Day Supply LA
IMMUNOSUPPRESSIVE AGENTS		
<i>azathioprine 50 mg tab</i>	1	PA ³
<i>cyclosporine (cyclosporine 25 mg cap, cyclosporine 100 mg cap)</i>	1	PA ³
<i>cyclosporine modified (cyclosporine modified 25 mg cap, cyclosporine modified 50 mg cap, cyclosporine modified 100 mg cap, cyclosporine modified 100 mg/ml solution)</i>	1	PA ³
ENVARUSUS XR (ENVARUSUS XR 0.75 MG TAB ER 24H, ENVARUSUS XR 1 MG TAB ER 24H)	1	PA ³
ENVARUSUS XR 4 MG TAB ER 24H	1	PA ³ NDS Non-Extended Day Supply
<i>everolimus (everolimus 0.25 mg tab, everolimus 0.5 mg tab, everolimus 0.75 mg tab, everolimus 1 mg tab)</i>	1	PA ³ NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>gengraf (gengraf 25 mg cap, gengraf 100 mg cap, gengraf 100 mg/ml solution)</i>	1	PA ³
<i>mycophenolate mofetil (mycophenolate mofetil 250 mg cap, mycophenolate mofetil 500 mg tab)</i>	1	PA ³
<i>mycophenolate mofetil 200 mg/ml recon susp</i>	1	PA ³ NDS Non-Extended Day Supply
<i>mycophenolate sodium</i>	1	PA ³
<i>mycophenolic acid</i>	1	PA ³
PROGRAF (PROGRAF 0.2 MG PACKET, PROGRAF 1 MG PACKET)	1	PA ³
<i>sirolimus (sirolimus 0.5 mg tab, sirolimus 1 mg tab, sirolimus 2 mg tab)</i>	1	PA ³
<i>sirolimus 1 mg/ml solution</i>	1	PA ³ NDS Non-Extended Day Supply
<i>tacrolimus (tacrolimus 0.5 mg cap, tacrolimus 1 mg cap, tacrolimus 5 mg cap)</i>	1	PA ³
IRRIGATION SOLUTIONS		
<i>ringers irrigation</i>	1*	
<i>tis-u-sol</i>	1*	
MISC NATURAL PRODUCTS		
<i>miscellaneous natural products</i>	OTC	
PIK3CA-RELATED OVERGROWTH SPECTRUM (PROS) AGENTS		
VIJOICE (VIJOICE 50 MG TAB THPK, VIJOICE 125 MG TAB THPK)	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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VIJOICE 200 & 50 MG TAB THPK	1	<div data-bbox="1133 317 1192 352">QL</div> 60 EA / 30 DAYS <div data-bbox="1133 365 1192 401">PA</div> <div data-bbox="1133 413 1192 480">NDS</div> Non-Extended Day Supply
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POTASSIUM REMOVING AGENTS

<i>kionex</i>	1	
LOKELMA	1	
<i>sodium polystyrene sulfonate (sodium polystyrene sulfonate powder, sodium polystyrene sulfonate 15 gm/60ml suspension)</i>	1	
<i>sps</i>	1	
VELTASSA	1	

SYSTEMIC LUPUS ERYTHEMATOSUS AGENTS

BENLYSTA (BENLYSTA 200 MG/ML SOLN A-INJ, BENLYSTA 200 MG/ML SOLN PRSYR)	1	<div data-bbox="1133 1062 1192 1098">QL</div> 4 ML / 28 DAYS <div data-bbox="1133 1110 1192 1146">PA</div> <div data-bbox="1133 1159 1192 1226">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1236 1192 1266">LA</div>
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MOUTH/THROAT/DENTAL AGENTS

ANESTHETICS TOPICAL ORAL

LIDOCAINE HCL 4 % SOLUTION	1	QL	50 ML / 30 DAYS
<i>lidocaine viscous hcl</i>	1		

ANTI-INFECTIVES - THROAT

<i>clotrimazole 10 mg troche</i>	1		
<i>hydrogen peroxide / benzyl alcohol</i>	OTC		

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
NYSTATIN 100000 UNIT/ML SUSPENSION	1	
<i>nystatin 100000 unit/ml suspension</i>	1	
ANTISEPTICS - MOUTH/THROAT		
<i>chlorhexidine gluconate 0.12 % solution</i>	1	
<i>periogard</i>	1	
DENTAL PRODUCTS		
<i>cavarest</i>	1	
<i>clinpro 5000</i>	1	
<i>denta 5000 plus</i>	1	
<i>dentagel</i>	1	
<i>fluoridex</i>	1	
<i>fluoridex enhanced whitening</i>	1	
<i>fluorimax 5000</i>	1	
<i>just right 5000</i>	1	
PREVIDENT 5000 ENAMEL PROTECT	1	
PREVIDENT 5000 SENSITIVE	1	
<i>sf</i>	1	
<i>sf 5000 plus</i>	1	
<i>sod fluoride-potassium nitrate</i>	1	
<i>sodium fluoride (sodium fluoride 1.1 % cream, sodium fluoride 1.1 % gel)</i>	1	
<i>sodium fluoride 5000 enamel</i>	1	
<i>sodium fluoride 5000 plus</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>sodium fluoride 5000 ppm (sodium fluoride 5000 ppm 1.1 % cream, sodium fluoride 5000 ppm 1.1 % gel, sodium fluoride 5000 ppm 1.1 % paste)</i>	1	
<i>sodium fluoride 5000 sensitive</i>	1	
LOZENGES		
<i>menthol</i>	OTC	
<i>throat lozenge</i>	OTC	
<i>throat lozenges</i>	OTC	
STEROIDS - MOUTH/THROAT/DENTAL		
<i>kourzeq</i>	1	
<i>triamcinolone acetonide 0.1 % paste</i>	1	
THROAT PRODUCTS - MISC.		
<i>cevimeline hcl</i>	1	
<i>pilocarpine hcl (pilocarpine hcl 5 mg tab, pilocarpine hcl 7.5 mg tab)</i>	1	
MULTIVITAMINS		
B-COMPLEX VITAMINS		
<i>vitamin b complex</i>	OTC	
<i>vitamin b complex combinations</i>	OTC	
B-COMPLEX W/ C		
<i>vitamin b complex / vitamin c</i>	OTC	
<i>vitamin b complex / vitamin c / calcium</i>	OTC	
<i>vitamin b complex / vitamin c / vitamin e / zinc</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
B-COMPLEX W/ FOLIC ACID		
<i>vitamin b complex / biotin / folic acid</i>	OTC	
<i>vitamin b complex / folic acid</i>	OTC	
<i>vitamin b complex / vitamin c / biotin / minerals / folic acid</i>	OTC	
<i>vitamin b complex / vitamin c / folic acid</i>	OTC	
<i>vitamin b complex / vitamin c / vitamin e / folic acid</i>	OTC	
<i>vitamin b complex / vitamin c / zinc / folic acid</i>	OTC	
VITAMIN B COMPLEX COMBINATIONS	OTC	
B-COMPLEX W/ IRON		
<i>vitamin b complex / iron</i>	OTC	
B-COMPLEX W/ MINERALS		
<i>vitamin b complex / minerals</i>	OTC	
BIOFLAVONOID PRODUCTS		
<i>bioflavonoids</i>	OTC	
MULTIPLE VITAMINS W/ CALCIUM		
<i>multivitamins / calcium</i>	OTC	
MULTIPLE VITAMINS W/ IRON		
<i>multivitamins / iron</i>	OTC	
MULTIVITAMINS		
<i>multivitamins</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PED MULTI VITAMINS W/FL & FE		
<i>pediatric multiple vitamins / fluoride / iron</i>	OTC	
<i>pediatric multivitamin combinations</i>	OTC	
PED MULTIPLE VITAMINS W/ MINERALS		
<i>pediatric multiple vitamins / minerals</i>	OTC	
PEDIATRIC MULTIVITAMIN COMBINATIONS	OTC	
PED MV W/ FLUORIDE		
<i>pediatric multiple vitamins / fluoride</i>	OTC	
<i>pediatric multiple vitamins / vitamin a / vitamin c / vitamin d / fluoride</i>	OTC	
PED MV W/ IRON		
<i>pediatric multiple vitamins / iron</i>	OTC	
PEDIATRIC MULTIPLE VITAMINS		
<i>pediatric multiple vitamins</i>	OTC	
PEDIATRIC VITAMINS		
<i>pediatric vitamins</i>	OTC	
PRENATAL VITAMINS		
<i>prenatal vitamin</i>	OTC	
<i>prenatal vitamin rx only</i>	1	
PRENATAL VITAMIN WITH MINERALS AND FOLIC ACID GREATER THAN 0.8 MG ORAL TABLET	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VITAMIN MIXTURES		
<i>niacin</i>	OTC	
<i>vitamin a / vitamin c / vitamin d</i>	OTC	
<i>vitamin d / vitamin k</i>	OTC	
VITAMINS W/ LIPOTROPICS		
<i>vitamins / lipotropics</i>	OTC	
MUSCULOSKELETAL THERAPY AGENTS		
CENTRAL MUSCLE RELAXANTS		
<i>baclofen (baclofen 5 mg tab, baclofen 10 mg tab, baclofen 20 mg tab)</i>	1	
<i>chlorzoxazone 500 mg tab</i>	1	
<i>cyclobenzaprine hcl (cyclobenzaprine hcl 5 mg tab, cyclobenzaprine hcl 10 mg tab)</i>	1	
<i>methocarbamol (methocarbamol 500 mg tab, methocarbamol 750 mg tab)</i>	1	
<i>tizanidine hcl (tizanidine hcl 2 mg tab, tizanidine hcl 4 mg tab)</i>	1	
DIRECT MUSCLE RELAXANTS		
<i>dantrolene sodium (dantrolene sodium 25 mg cap, dantrolene sodium 50 mg cap, dantrolene sodium 100 mg cap)</i>	1	
NASAL AGENTS - SYSTEMIC AND TOPICAL		
NASAL ANTIALLERGY		
<i>azelastine hcl (azelastine hcl 0.1 % solution, azelastine hcl 137 mcg/spray solution)</i>	1	


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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>cromolyn (nasalcrom)</i>	OTC	
<i>olopatadine hcl 0.6 % solution</i>	1	
NASAL ANTICHOLINERGICS		
<i>ipratropium bromide (ipratropium bromide 0.03 % solution, ipratropium bromide 0.06 % solution)</i>	1	
NASAL STEROIDS		
<i>flunisolide</i>	1	QL 50 ML / 30 DAYS
<i>fluticasone propionate 50 mcg/act suspension</i>	1	QL 32 GM / 30 DAYS
<i>mometasone furoate 50 mcg/act suspension</i>	1	QL 34 GM / 30 DAYS
<i>triamcinolone acetonide (nasacort)</i>	OTC	
SYMPATHOMIMETIC DECONGESTANTS		
<i>oxymetazoline (afrin)</i>	OTC	
<i>phenylephrine (neo-synephrine)</i>	OTC	
<i>phenylephrine (sudafed pe)</i>	OTC	
<i>pseudoephedrine (sudafed)</i>	OTC	
NEUROMUSCULAR AGENTS		
ALS AGENTS		
RADICAVA ORS	1	QL 70 ML / 28 DAYS PA NDS Non-Extended Day Supply LA

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>riluzole</i>	1	PA
NUTRIENTS		
CARBOHYDRATES		
<i>dextrose 10 % solution</i>	1	PA ³
<i>dextrose 5 % solution</i>	1	
MISC. NUTRITIONAL SUBSTANCES		
<i>pyridoxine (vitamin b6)</i>	OTC	
PROTEINS		
CLINIMIX/DEXTROSE (4.25/10)	1	PA ³
CLINIMIX/DEXTROSE (4.25/5)	1	PA ³
CLINIMIX/DEXTROSE (5/15)	1	PA ³
CLINIMIX/DEXTROSE (5/20)	1	PA ³
<i>plenamine</i>	1	PA ³
OPHTHALMIC AGENTS		
ARTIFICIAL TEARS AND LUBRICANTS		
<i>artificial tear drops</i>	OTC	
<i>dextran 70/he-cell drops (genteal tears)</i>	OTC	
<i>lubricant eye drops</i>	OTC	
<i>lubricant eye ointment</i>	OTC	
<i>polyethylene glycol drops</i>	OTC	
<i>polyvinyl alcohol / povidone drops (refresh)</i>	OTC	
<i>polyvinyl alcohol drops (hypotears)</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
BETA-BLOCKERS - OPHTHALMIC		
BETAXOLOL HCL 0.5 % SOLUTION	1	
<i>brimonidine tartrate-timolol</i>	1	
CARTEOLOL HCL	1	
<i>dorzolamide hcl-timolol mal</i>	1	
<i>dorzolamide hcl-timolol mal pf</i>	1	
LEVOBUNOLOL HCL	1	
<i>timolol maleate (timolol maleate 0.25 % solution, timolol maleate 0.5 % solution)</i>	1	
CYCLOPLEGIC MYDRIATICS		
ATROPINE SULFATE 1 % SOLUTION	1	
<i>atropine sulfate 1 % solution</i>	1	
MIOTICS		
PHOSPHOLINE IODIDE	1	 Non-Extended Day Supply
<i>pilocarpine hcl (pilocarpine hcl 1 % solution, pilocarpine hcl 2 % solution, pilocarpine hcl 4 % solution)</i>	1	
OPHTHALMIC ADRENERGIC AGENTS		
APRACLONIDINE HCL 0.5 % SOLUTION	1	
<i>brimonidine tartrate (brimonidine tartrate 0.1 % solution, brimonidine tartrate 0.15 % solution, brimonidine tartrate 0.2 % solution)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OPHTHALMIC ANTI-INFECTIVES		
<i>ak-poly-bac</i>	1	QL 7 GM / 7 OVER TIME
BACITRACIN 500 UNIT/GM OINTMENT	1	
<i>bacitracin-polymyxin b</i>	1	QL 7 GM / 7 OVER TIME
<i>ciprofloxacin hcl 0.3 % solution</i>	1	QL 60 ML / 30 OVER TIME
<i>erythromycin 5 mg/gm ointment</i>	1	QL 7 GM / 7 OVER TIME
<i>gatifloxacin</i>	1	QL 5 ML / 7 OVER TIME
<i>gentamicin sulfate 0.3 % solution</i>	1	QL 10 ML / 7 OVER TIME
LEVOFLOXACIN 0.5 % SOLUTION	1	QL 60 ML / 30 OVER TIME
LEVOFLOXACIN 1.5 % SOLUTION	1	
MOXIFLOXACIN HCL (2X DAY)	1	
<i>moxifloxacin hcl 0.5 % solution</i>	1	QL 6 ML / 7 OVER TIME
NATACYN	1	QL 15 ML / 7 OVER TIME
<i>neomycin-bacitracin zn-polymyx</i>	1	QL 7 GM / 7 OVER TIME
NEOMYCIN-POLYMYXIN-GRAMICIDIN	1	QL 10 ML / 7 OVER TIME
<i>ofloxacin 0.3 % solution</i>	1	QL 60 ML / 30 OVER TIME

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>polymyxin b-trimethoprim</i>	1	QL 10 ML / 7 OVER TIME
SULFACETAMIDE SODIUM 10 % OINTMENT	1	
<i>sulfacetamide sodium 10 % solution</i>	1	QL 15 ML / 7 OVER TIME
<i>tobramycin 0.3 % solution</i>	1	QL 60 ML / 30 OVER TIME
TRIFLURIDINE	1	QL 15 ML / 7 OVER TIME
XDEMVIY	1	QL 10 ML / 42 DAYS PA NDS Non-Extended Day Supply
ZIRGAN	1	

OPHTHALMIC DECONGESTANTS

<i>naphazoline /pheniramine drops (naphcon-a)</i>	OTC	
<i>tetrahydrazoline drops (visine)</i>	OTC	

OPHTHALMIC IMMUNOMODULATORS

<i>cyclosporine 0.05 % emulsion</i>	1	QL 60 EA / 30 DAYS
RESTASIS	1	QL 60 EA / 30 DAYS
RESTASIS MULTIDOSE	1	QL 5.5 ML / 30 DAYS
VERKAZIA	1	QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
OPHTHALMIC INTEGRIN ANTAGONISTS		
XIIDRA	1	QL 60 EA / 30 DAYS
OPHTHALMIC KINASE INHIBITORS		
RHOPRESSA	1	
ROCKLATAN	1	
OPHTHALMIC LOCAL ANESTHETICS		
<i>altacaine</i>	1*	
<i>tetracaine hcl 0.5 % solution</i>	1*	
OPHTHALMIC NERVE GROWTH FACTORS		
OXERVATE	1	QL 112 ML / 365 OVER TIME PA NDS Non-Extended Day Supply LA
OPHTHALMIC STEROIDS		
<i>bacitra-neomycin-polymyxin-hc</i>	1	
DEXAMETHASONE SODIUM PHOSPHATE 0.1 % SOLUTION	1	
<i>fluorometholone</i>	1	
<i>loteprednol etabonate (loteprednol etabonate 0.5 % gel, loteprednol etabonate 0.5 % suspension)</i>	1	
<i>neomycin-polymyxin-dexameth (neomycin-polymyxin-dexameth 3.5-10000-0.1 ointment, neomycin-polymyxin-dexameth 3.5-10000-0.1 suspension)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
NEOMYCIN-POLYMYXIN-HC 3.5-10000-1 SUSPENSION	1	
PREDNISOLONE ACETATE	1	
PREDNISOLONE SODIUM PHOSPHATE 1 % SOLUTION	1	
SULFACETAMIDE-PREDNISOLONE	1	
<i>tobramycin-dexamethasone</i>	1	
OPHTHALMICS - MISC.		
<i>azelastine hcl 0.05 % solution</i>	1	
<i>balanced salt</i>	1*	
CROMOLYN SODIUM 4 % SOLUTION	1	
CYSTARAN	1	<div style="display: flex; flex-direction: column; align-items: flex-start;"> <div style="display: flex; align-items: center; margin-bottom: 2px;"> <div style="background-color: #6a3d9a; color: white; padding: 2px 5px; border-radius: 3px;">QL</div> <div style="margin-left: 5px;">60 ML / 28 DAYS</div> </div> <div style="display: flex; align-items: center; margin-bottom: 2px;"> <div style="background-color: #8b572d; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="margin-left: 5px;"></div> </div> <div style="display: flex; align-items: center; margin-bottom: 2px;"> <div style="background-color: #c85134; color: white; padding: 2px 5px; border-radius: 3px;">NDS</div> <div style="margin-left: 5px;">Non-Extended Day Supply</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #0070c0; color: white; padding: 2px 5px; border-radius: 3px;">LA</div> <div style="margin-left: 5px;"></div> </div> </div>
<i>diclofenac sodium 0.1 % solution</i>	1	
<i>dorzolamide hcl</i>	1	
<i>epinastine hcl</i>	1	
FLURBIPROFEN SODIUM	1	
<i>ketorolac tromethamine (ketorolac tromethamine 0.4 % solution, ketorolac tromethamine 0.5 % solution)</i>	1	
<i>ketotifen drops (zaditor)</i>	OTC	
<i>olopatadine</i>	OTC	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>olopatadine rx only</i>	1	
<i>sodium chloride eye products (muro 128)</i>	OTC	
PROSTAGLANDINS - OPHTHALMIC		
<i>bimatoprost</i>	1	QL 5 ML / 30 DAYS
<i>latanoprost</i>	1	QL 5 ML / 30 DAYS
LUMIGAN	1	
<i>travoprost (bak free)</i>	1	QL 5 ML / 30 DAYS
OTIC AGENTS		
OTIC AGENTS - MISCELLANEOUS		
<i>acetic acid 2 % solution</i>	1	
<i>carbamide peroxide (debrox)</i>	OTC	
OTIC ANTI-INFECTIVES		
CIPROFLOXACIN HCL 0.2 % SOLUTION	1	
OTIC COMBINATIONS		
<i>ciprofloxacin-dexamethasone</i>	1	
<i>neomycin-polymyxin-hc (neomycin-polymyxin-hc 1 % solution, neomycin-polymyxin-hc 3.5-10000-1 solution)</i>	1	
<i>neomycin-polymyxin-hc 3.5-10000-1 suspension</i>	1	
OTIC STEROIDS		
<i>flac</i>	1	
<i>fluocinolone acetonide 0.01 % oil</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>hydrocortisone-acetic acid</i>	1	
HYDROCORTISONE-ACETIC ACID	1	
PASSIVE IMMUNIZING AND TREATMENT AGENTS		
IMMUNE SERUMS		
GAMMAKED 1 GM/10ML SOLUTION	1	<div data-bbox="1133 617 1192 653">PA</div> <div data-bbox="1133 667 1192 703">NDS</div> <div data-bbox="1203 667 1479 730">Non-Extended Day Supply</div>
GAMUNEX-C 1 GM/10ML SOLUTION	1	<div data-bbox="1133 758 1192 793">PA</div> <div data-bbox="1133 808 1192 844">NDS</div> <div data-bbox="1203 808 1479 871">Non-Extended Day Supply</div>
PRIVIGEN 20 GM/200ML SOLUTION	1	<div data-bbox="1133 898 1192 934">PA</div> <div data-bbox="1133 949 1192 984">NDS</div> <div data-bbox="1203 949 1479 1012">Non-Extended Day Supply</div>
VARIZIG	1	<div data-bbox="1133 1037 1192 1073">VAC</div> <div data-bbox="1203 1037 1425 1100">\$0 Part D Adult Vaccine</div>
MONOCLONAL ANTIBODIES		
BEYFORTUS	1	
PASSIVE IMMUNIZING AGENTS - COMBINATIONS		
HYQVIA	1	<div data-bbox="1133 1325 1192 1360">PA</div> <div data-bbox="1133 1375 1192 1411">NDS</div> <div data-bbox="1203 1375 1479 1438">Non-Extended Day Supply</div> <div data-bbox="1133 1444 1192 1480">LA</div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PENICILLINS		
AMINOPENICILLINS		
<i>amoxicillin (amoxicillin 125 mg chew tab, amoxicillin 125 mg/5ml recon susp, amoxicillin 200 mg/5ml recon susp, amoxicillin 250 mg cap, amoxicillin 250 mg chew tab, amoxicillin 250 mg/5ml recon susp, amoxicillin 400 mg/5ml recon susp, amoxicillin 500 mg cap, amoxicillin 500 mg tab, amoxicillin 875 mg tab)</i>	1	
AMOXICILLIN 400 MG/5ML RECON SUSP	1	
<i>ampicillin</i>	1	
AMPICILLIN SODIUM (AMPICILLIN SODIUM 2 GM RECON SOLN, AMPICILLIN SODIUM 125 MG RECON SOLN)	1	
<i>ampicillin sodium 1 gm recon soln</i>	1	
<i>ampicillin sodium 10 gm recon soln</i>	1	
NATURAL PENICILLINS		
BICILLIN L-A	1	
<i>penicillin g potassium</i>	1	
PENICILLIN G PROCAINE	1	
PENICILLIN G SODIUM	1	
PENICILLIN V POTASSIUM (PENICILLIN V POTASSIUM 125 MG/5ML RECON SOLN, PENICILLIN V POTASSIUM 250 MG TAB, PENICILLIN V POTASSIUM 250 MG/5ML RECON SOLN, PENICILLIN V POTASSIUM 500 MG TAB)	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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PFIZERPEN	1	
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PENICILLIN COMBINATIONS

AMOXICILLIN-POT CLAVULANATE (AMOXICILLIN- POT CLAVULANATE 200-28.5 MG CHEW TAB, AMOXICILLIN-POT CLAVULANATE 200-28.5 MG/5ML RECON SUSP, AMOXICILLIN- POT CLAVULANATE 250-125 MG TAB, AMOXICILLIN-POT CLAVULANATE 250-62.5 MG/5ML RECON SUSP, AMOXICILLIN- POT CLAVULANATE 400-57 MG CHEW TAB, AMOXICILLIN-POT CLAVULANATE 400-57 MG/5ML RECON SUSP, AMOXICILLIN- POT CLAVULANATE 500-125 MG TAB, AMOXICILLIN-POT CLAVULANATE 600-42.9 MG/5ML RECON SUSP, AMOXICILLIN- POT CLAVULANATE 875-125 MG TAB)	1	
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AMOXICILLIN-POT CLAVULANATE ER	1	
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<i>ampicillin-sulbactam sodium 1.5 (1-0.5) gm recon soln</i>	1	
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<i>ampicillin-sulbactam sodium 15 (10-5) gm recon soln</i>	1	
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<i>ampicillin-sulbactam sodium 3 (2-1) gm recon soln</i>	1	
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<i>piperacillin sod-tazobactam so</i>	1	
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You can find information on what the symbols and abbreviations on this table mean by going to the beginning of this table.

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PENICILLINASE-RESISTANT PENICILLINS		
<i>dicloxacillin sodium</i>	1	
<i>nafcillin sodium (nafcillin sodium 1 gm recon soln, nafcillin sodium 2 gm recon soln)</i>	1	
<i>nafcillin sodium 10 gm recon soln</i>	1	 Non-Extended Day Supply
NAFCILLIN SODIUM IN DEXTROSE	1	
<i>oxacillin sodium</i>	1	
OXACILLIN SODIUM IN DEXTROSE	1	
PHARMACEUTICAL ADJUVANTS		
LIQUID VEHICLES		
BACTERIOSTATIC WATER(BENZ ALC)	1*	
<i>flavor syrup</i>	OTC	
<i>saline bacteriostatic</i>	1*	
<i>sodium chloride bacteriostatic</i>	1*	
<i>sterile water for injection</i>	1*	
SEMI SOLID VEHICLES		
<i>petrolatum (vaseline)</i>	OTC	


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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PROGESTINS		
PROGESTINS		
<i>medroxyprogesterone acetate</i> (<i>medroxyprogesterone acetate 2.5 mg tab,</i> <i>medroxyprogesterone acetate 5 mg tab,</i> <i>medroxyprogesterone acetate 10 mg tab</i>)	1	
MEGESTROL ACETATE 625 MG/5ML SUSPENSION	1	PA
<i>norethindrone acetate</i>	1	
<i>progesterone (progesterone 100 mg cap,</i> <i>progesterone 200 mg cap)</i>	1	
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
AGENTS FOR CHEMICAL DEPENDENCY		
<i>acamprosate calcium</i>	1	
<i>disulfiram 250 mg tab</i>	1	
DISULFIRAM 500 MG TAB	1	
ANTI-CATAPLECTIC AGENTS		
SODIUM OXYBATE	1	QL 540 ML / 30 DAYS PA NDS Non-Extended Day Supply LA
XYWAV	1	QL 540 ML / 30 DAYS PA NDS Non-Extended Day Supply LA










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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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ANTIDEMENTIA AGENTS

<i>donepezil hcl (donepezil hcl 5 mg tab disp, donepezil hcl 10 mg tab disp, donepezil hcl 23 mg tab)</i>	1	 30 EA / 30 DAYS
<i>donepezil hcl (donepezil hcl 5 mg tab, donepezil hcl 10 mg tab)</i>	1	
<i>galantamine hydrobromide (galantamine hydrobromide 4 mg tab, galantamine hydrobromide 4 mg/ml solution, galantamine hydrobromide 8 mg tab, galantamine hydrobromide 12 mg tab)</i>	1	
<i>galantamine hydrobromide er</i>	1	
<i>memantine hcl (memantine hcl 2 mg/ml solution, memantine hcl 5 mg tab, memantine hcl 10 mg tab, memantine hcl 10 mg/5ml solution)</i>	1	
<i>memantine hcl er</i>	1	
<i>rivastigmine</i>	1	
<i>rivastigmine tartrate</i>	1	

MOVEMENT DISORDER DRUG THERAPY

AUSTEDO (AUSTEDO 9 MG TAB, AUSTEDO 12 MG TAB)	1	 120 EA / 30 DAYS   Non-Extended Day Supply
AUSTEDO 6 MG TAB	1	 60 EA / 30 DAYS   Non-Extended Day Supply
AUSTEDO XR (AUSTEDO XR 12 MG TAB ER 24H, AUSTEDO XR 24 MG TAB ER 24H)	1	 60 EA / 30 DAYS   Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
AUSTEDO XR (AUSTEDO XR 30 MG TAB ER 24H, AUSTEDO XR 36 MG TAB ER 24H, AUSTEDO XR 42 MG TAB ER 24H, AUSTEDO XR 48 MG TAB ER 24H)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
AUSTEDO XR 6 MG TAB ER 24H	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA NDS Non-Extended Day Supply
AUSTEDO XR PATIENT TITRATION 6 & 12 & 24 MG TBER THPK	1	<ul style="list-style-type: none"> QL 42 EA / 28 DAYS PA NDS Non-Extended Day Supply
INGREZZA (INGREZZA 40 MG CAP, INGREZZA 40 MG CAP SPRINK, INGREZZA 60 MG CAP, INGREZZA 60 MG CAP SPRINK, INGREZZA 80 MG CAP, INGREZZA 80 MG CAP SPRINK)	1	<ul style="list-style-type: none"> QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
INGREZZA 40 & 80 MG CAP THPK	1	<ul style="list-style-type: none"> QL 28 EA / 28 DAYS PA NDS Non-Extended Day Supply
<i>tetrabenazine</i>	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply
MULTIPLE SCLEROSIS AGENTS		
AVONEX PEN	1	<ul style="list-style-type: none"> QL 1 EA / 28 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
AVONEX PREFILLED	1	QL 1 EA / 28 DAYS PA NDS Non-Extended Day Supply
<i>dalfampridine er</i>	1	QL 60 EA / 30 DAYS PA
<i>dimethyl fumarate 120 mg cap dr</i>	1	QL 14 EA / 30 DAYS PA NDS Non-Extended Day Supply
<i>dimethyl fumarate 240 mg cap dr</i>	1	QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply
<i>dimethyl fumarate starter pack</i>	1	QL 120 EA / 180 DAYS PA NDS Non-Extended Day Supply
<i>fingolimod hcl</i>	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
<i>glatiramer acetate 20 mg/ml soln prsyr</i>	1	QL 30 ML / 30 DAYS PA NDS Non-Extended Day Supply
<i>glatiramer acetate 40 mg/ml soln prsyr</i>	1	QL 12 ML / 28 DAYS PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>glatopa 20 mg/ml soln prsy</i>	1	<ul style="list-style-type: none"> QL 30 ML / 30 DAYS PA NDS Non-Extended Day Supply
<i>glatopa 40 mg/ml soln prsy</i>	1	<ul style="list-style-type: none"> QL 12 ML / 28 DAYS PA NDS Non-Extended Day Supply
KESIMPTA	1	<ul style="list-style-type: none"> QL 1.6 ML / 28 DAYS PA NDS Non-Extended Day Supply
PLEGRIDY	1	<ul style="list-style-type: none"> QL 1 ML / 28 DAYS PA NDS Non-Extended Day Supply LA
REBIF	1	<ul style="list-style-type: none"> QL 6 ML / 28 DAYS PA NDS Non-Extended Day Supply
REBIF REBIDOSE	1	<ul style="list-style-type: none"> QL 6 ML / 28 DAYS PA NDS Non-Extended Day Supply
REBIF REBIDOSE TITRATION PACK	1	<ul style="list-style-type: none"> QL 4.2 ML / 180 OVER TIME PA NDS Non-Extended Day Supply
REBIF TITRATION PACK	1	<ul style="list-style-type: none"> QL 4.2 ML / 180 OVER TIME PA NDS Non-Extended Day Supply

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>teriflunomide</i>	1	<div data-bbox="1133 317 1190 359">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 369 1190 411">PA</div> <div data-bbox="1133 422 1190 464">NDS</div> Non-Extended Day Supply
VUMERITY	1	<div data-bbox="1133 506 1190 548">QL</div> 120 EA / 30 DAYS <div data-bbox="1133 558 1190 600">PA</div> <div data-bbox="1133 611 1190 653">NDS</div> Non-Extended Day Supply <div data-bbox="1133 663 1190 705">LA</div>
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA	1	<div data-bbox="1133 810 1190 852">PA</div> <div data-bbox="1133 863 1190 905">NDS</div> Non-Extended Day Supply
PSYCHOTHERAPEUTIC AND NEUROLOGICAL AGENTS - MISC.		
ERGOLOID MESYLATES	1	
PIMOZIDE	1	
SMOKING DETERRENTS		
<i>nicotine gum / lozenge</i>	OTC	
<i>nicotine patch (nicoderm)</i>	OTC	
NICOTROL	1	
<i>varenicline tartrate</i>	1	
<i>varenicline tartrate (starter)</i>	1	
<i>varenicline tartrate(continue)</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
RESPIRATORY AGENTS - MISC.		
CYSTIC FIBROSIS AGENTS		
BRONCHITOL	1	QL 560 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
BRONCHITOL TOLERANCE TEST	1	QL 560 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
KALYDECO (KALYDECO 25 MG PACKET, KALYDECO 50 MG PACKET, KALYDECO 75 MG PACKET)	1	QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
KALYDECO 13.4 MG PACKET	1	QL 56 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
KALYDECO 5.8 MG PACKET	1	QL 56 EA / 28 DAYS PA NDS Non-Extended Day Supply
ORKAMBI (ORKAMBI 100-125 MG PACKET, ORKAMBI 150-188 MG PACKET)	1	QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply LA

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
ORKAMBI (ORKAMBI 100-125 MG TAB, ORKAMBI 200-125 MG TAB)	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
ORKAMBI 75-94 MG PACKET	1	<ul style="list-style-type: none"> QL 56 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
PULMOZYME	1	<ul style="list-style-type: none"> QL 150 ML / 30 DAYS PA^s NDS Non-Extended Day Supply
TRIKAFTA (TRIKAFTA 80-40-60 & 59.5 MG THER PACK, TRIKAFTA 100-50-75 & 75 MG THER PACK)	1	<ul style="list-style-type: none"> QL 56 EA / 28 DAYS PA NDS Non-Extended Day Supply LA
TRIKAFTA 100-50-75 & 150 MG TAB THPK	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
TRIKAFTA 50-25-37.5 & 75 MG TAB THPK	1	<ul style="list-style-type: none"> QL 84 EA / 28 DAYS PA NDS Non-Extended Day Supply LA

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PULMONARY FIBROSIS AGENTS		
OFEV	1	<ul style="list-style-type: none"> QL 60 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
<i>pirfenidone (pirfenidone 267 mg cap, pirfenidone 267 mg tab)</i>	1	<ul style="list-style-type: none"> QL 270 EA / 30 DAYS PA NDS Non-Extended Day Supply
<i>pirfenidone 801 mg tab</i>	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA NDS Non-Extended Day Supply
SULFONAMIDES		
SULFONAMIDES		
SULFADIAZINE	1	
TETRACYCLINES		
GLYCYLCYCLINES		
TIGECYCLINE	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply
<i>tigecycline 50 mg recon soln</i>	1	<ul style="list-style-type: none"> NDS Non-Extended Day Supply
TETRACYCLINES		
<i>demeclocycline hcl</i>	1	
<i>doxy 100</i>	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>doxycycline hyclate (doxycycline hyclate 20 mg tab, doxycycline hyclate 50 mg cap, doxycycline hyclate 100 mg cap, doxycycline hyclate 100 mg recon soln, doxycycline hyclate 100 mg tab)</i>	1	
<i>doxycycline monohydrate (doxycycline monohydrate 25 mg/5ml recon susp, doxycycline monohydrate 50 mg cap, doxycycline monohydrate 50 mg tab, doxycycline monohydrate 75 mg tab, doxycycline monohydrate 100 mg cap, doxycycline monohydrate 100 mg tab)</i>	1	
<i>minocycline hcl</i>	1	
<i>tetracycline hcl (tetracycline hcl 250 mg cap, tetracycline hcl 500 mg cap)</i>	1	
THYROID AGENTS		
ANTITHYROID AGENTS		
<i>methimazole (methimazole 5 mg tab, methimazole 10 mg tab)</i>	1	
<i>propylthiouracil</i>	1	
THYROID HORMONES		
<i>euthyrox</i>	1	




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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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<i>levothyroxine sodium (levothyroxine sodium 25 mcg tab, levothyroxine sodium 50 mcg tab, levothyroxine sodium 75 mcg tab, levothyroxine sodium 88 mcg tab, levothyroxine sodium 100 mcg tab, levothyroxine sodium 112 mcg tab, levothyroxine sodium 125 mcg tab, levothyroxine sodium 137 mcg tab, levothyroxine sodium 150 mcg tab, levothyroxine sodium 175 mcg tab, levothyroxine sodium 200 mcg tab, levothyroxine sodium 300 mcg tab)</i>	1	
<i>levoxl</i>	1	
<i>liothyronine sodium (liothyronine sodium 5 mcg tab, liothyronine sodium 25 mcg tab, liothyronine sodium 50 mcg tab)</i>	1	
SYNTHROID	1	
<i>unithroid</i>	1	

TOXOIDS

TOXOID COMBINATIONS

ADACEL	1	 \$0 Part D Adult Vaccine
BOOSTRIX	1	 \$0 Part D Adult Vaccine
DAPTACEL	1	
DIPHtheria-TETANUS TOXOIDS DT	1	
INFANRIX	1	
KINRIX	1	
PEDIARIX	1	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PENTACEL	1	
QUADRACEL	1	
TDVAX	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c07040; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
TENIVAC	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c07040; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
TETANUS-DIPHThERIA TOXOIDS TD	1	<div style="display: flex; align-items: center;"> <div style="background-color: #c07040; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
ULCER DRUGS/ANTISPASMODICS/ANTICHOLINERGICS		
ANTISPASMODICS		
<i>dicyclomine hcl (dicyclomine hcl 10 mg cap, dicyclomine hcl 10 mg/5ml solution, dicyclomine hcl 20 mg tab)</i>	1	
<i>glycopyrrolate (glycopyrrolate 1 mg tab, glycopyrrolate 2 mg tab)</i>	1	
H-2 ANTAGONISTS		
<i>cimetidine</i>	1	
<i>famotidine (pepcid)</i>	OTC	
<i>famotidine (pepcid) rx only</i>	1	
MISC. ANTI-ULCER		
<i>sucralfate (sucralfate 1 gm tab, sucralfate 1 gm/10ml suspension)</i>	1	

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
PROTON PUMP INHIBITORS		
<i>esomeprazole magnesium (esomeprazole magnesium 20 mg cap dr, esomeprazole magnesium 40 mg cap dr)</i>	1	
<i>lansoprazole (prevacid)</i>	OTC	
<i>lansoprazole (prevacid) rx only</i>	1	
<i>omeprazole (prilosec)</i>	OTC	
<i>omeprazole (prilosec) rx only</i>	1	
<i>pantoprazole sodium (pantoprazole sodium 20 mg tab dr, pantoprazole sodium 40 mg tab dr)</i>	1	
<i>rabeprazole sodium 20 mg tab dr</i>	1	
ULCER DRUGS - PROSTAGLANDINS		
<i>misoprostol</i>	1	
ULCER THERAPY COMBINATIONS		
<i>bis subcit-metronid-tetracyc</i>	1	
<i>bismuth/metronidaz/tetracyclin</i>	1	
URINARY ANTISPASMODICS		
URINARY ANTISPASMODIC - ANTIMUSCARINICS (ANTICHOLINERGIC)		
<i>darifenacin hydrobromide er</i>	1	
<i>oxybutynin chloride (oxybutynin chloride 5 mg tab, oxybutynin chloride 5 mg/5ml solution)</i>	1	
<i>oxybutynin chloride er</i>	1	
<i>solifenacin succinate</i>	1	
















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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>tolterodine tartrate</i>	1	
<i>tolterodine tartrate er</i>	1	
<i>trospium chloride</i>	1	
<i>trospium chloride er</i>	1	
URINARY ANTISPASMODICS - BETA-3 ADRENERGIC AGONISTS		
GEMTESA	1	
MYRBETRIQ (MYRBETRIQ 25 MG TAB ER 24H, MYRBETRIQ 50 MG TAB ER 24H)	1	
MYRBETRIQ 8 MG/ML SRER	1	
URINARY ANTISPASMODICS - CHOLINERGIC AGONISTS		
<i>bethanechol chloride</i>	1	
URINARY ANTISPASMODICS - DIRECT MUSCLE RELAXANTS		
<i>flavoxate hcl</i>	1	
VACCINES		
BACTERIAL VACCINES		
ACTHIB	1	
BCG VACCINE	1	VAC \$0 Part D Adult Vaccine
BEXSERO	1	VAC \$0 Part D Adult Vaccine
CAPVAXIVE	Part B Covered	
HIBERIX	1	
MENACTRA	1	VAC \$0 Part D Adult Vaccine

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
MENQUADFI	1	VAC \$0 Part D Adult Vaccine
MENVEO (MENVEO RECON SOLN, MENVEO SOLUTION)	1	VAC \$0 Part D Adult Vaccine
PEDVAX HIB	1	
PENBRAYA	1	VAC \$0 Part D Adult Vaccine
PNEUMOVAX 23	Part B Covered	
PREVNAR 20	Part B Covered	
TRUMENBA	1	VAC \$0 Part D Adult Vaccine
TYPHIM VI	1	VAC \$0 Part D Adult Vaccine
VAXCHORA	1	INS \$0 Part D Adult Vaccine
VAXNEUVANCE	Part B Covered	
VIRAL VACCINES		
ABRYSVO	1	VAC \$0 Part D Adult Vaccine
AREXVY	1	VAC \$0 Part D Adult Vaccine
COVID-19 VACCINES	Part B Covered	
ENGERIX-B	1	PA ³ VAC \$0 Part D Adult Vaccine
ERVEBO	1	
GARDASIL 9	1	VAC-AGE \$0 Part D Adult Vaccine (ages 19 – 45)

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
HAVRIX 1440 EL U/ML SUSPENSION	1	 \$0 Part D Adult Vaccine
HAVRIX 720 EL U/0.5ML SUSPENSION	1	
HEPLISAV-B	1	  \$0 Part D Adult Vaccine
IMOVAX RABIES	1	  \$0 Part D Adult Vaccine
IPOL	1	 \$0 Part D Adult Vaccine
IXCHIQ	1	 \$0 Part D Adult Vaccine
IXIARO	1	 \$0 Part D Adult Vaccine
JYNNEOS	1	 \$0 Part D Adult Vaccine
M-M-R II	1	 \$0 Part D Adult Vaccine
MRESVIA	1	
PREHEVBRIO	1	  \$0 Part D Adult Vaccine
PRIORIX	1	 \$0 Part D Adult Vaccine
PROQUAD	1	
QUADRIVALENT INFLUENZA VACCINES	Part B Covered	
RABAVERT	1	  \$0 Part D Adult Vaccine

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
RECOMBIVAX HB (RECOMBIVAX HB 10 MCG/ML SUSP PRSYR, RECOMBIVAX HB 10 MCG/ML SUSPENSION, RECOMBIVAX HB 40 MCG/ML SUSPENSION)	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
RECOMBIVAX HB 5 MCG/0.5ML SUSP PRSYR	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
RECOMBIVAX HB 5 MCG/0.5ML SUSPENSION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; margin-right: 5px;">PA³</div> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
ROTARIX	1	
ROTATEQ	1	
SHINGRIX	1	<div style="display: flex; align-items: center;"> <div style="background-color: #6A329F; color: white; padding: 2px 5px; margin-right: 5px;">QL</div> <div style="margin-right: 5px;">2 EA / 365 OVER TIME</div> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
STAMARIL	1	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
TICOVAC 1.2 MCG/0.25ML SUSP PRSYR	1	
TICOVAC 2.4 MCG/0.5ML SUSP PRSYR	1	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
TWINRIX	1	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
VAQTA 25 UNIT/0.5ML SUSPENSION	1	
VAQTA 50 UNIT/ML SUSPENSION	1	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>
VARIVAX	1	<div style="display: flex; align-items: center;"> <div style="background-color: #333; color: white; padding: 2px 5px; margin-right: 5px;">VAC</div> <div>\$0 Part D Adult Vaccine</div> </div>

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
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YF-VAX

1



\$0 Part D Adult Vaccine

VAGINAL AND RELATED PRODUCTS

SPERMICIDES

contraceptive sponge / gel OTC

VAGINAL ANTI-INFECTIVES

clindamycin phosphate 2 % cream 1

clotrimazole (gyne-lotrimin) OTC

metronidazole vaginal gel 0.75 % 1

miconazole (monistat) OTC

povidone-iodine (summers eve) OTC

terconazole (terconazole 0.4 % cream, terconazole 0.8 % cream, terconazole 80 mg suppos) 1

tioconazole (vagistat) OTC

VANDAZOLE 1

VAGINAL ESTROGENS

estradiol (estradiol 0.1 mg/gm cream, estradiol 10 mcg tab) 1

ESTRING 1

PREMARIN 0.625 MG/GM CREAM 1

yuvafem 1

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

NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VASOPRESSORS		
ANAPHYLAXIS THERAPY AGENTS		
<i>epinephrine 0.15/3ml, 0.30/3ml auto-injector (teva and mylan only)</i>	1	<div data-bbox="1130 457 1192 527">QL</div> 2 EA / 30 OVER TIME <div data-bbox="1130 533 1192 627">MFG</div> Drug coverage is limited to certain manufacturers
SYMJEPI	1	<div data-bbox="1130 653 1192 722">QL</div> 2 EA / 30 OVER TIME
NEUROGENIC ORTHOSTATIC HYPOTENSION (NOH) - AGENTS		
<i>droxidopa</i>	1	<div data-bbox="1130 814 1192 856">PA</div> <div data-bbox="1130 863 1192 932">NDS</div> Non-Extended Day Supply
<i>midodrine hcl</i>	1	
VITAMINS		
OIL SOLUBLE VITAMINS		
<i>beta-carotene</i>	OTC	
<i>phytonadione (phytonadione 1 mg/0.5ml solution, phytonadione 5 mg tab, phytonadione 10 mg/ml solution)</i>	1*	
<i>vitamin d</i>	OTC	
<i>vitamin e</i>	OTC	
<i>vitamin k1</i>	1*	
WATER SOLUBLE VITAMINS		
<i>biotin</i>	OTC	
<i>calcium ascorbate</i>	OTC	

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>calcium panthothenate</i>	OTC	
<i>niacinamide</i>	OTC	
<i>riboflavin (vitamin b2)</i>	OTC	
<i>thiamine (vitamin b1)</i>	OTC	
<i>vitamin c</i>	OTC	

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

Index

A		
abacavir sulfate	121	AEROCHAMBER MINI
abacavir sulfate-lamivudine	121	CHAMBER
abacavir-lamivudine-		184
zidovudine	121	AEROCHAMBER MV
ABELCET	72	184
ABILIFY ASIMTUFII	119	AEROCHAMBER PLS FLOVU
ABILIFY MAINTENA	119	MTHPIECE
abiraterone acetate	87	184
ABRYSVO	230	AEROCHAMBER PLUS FLO-
acamprosate calcium	216	VU
acarbose	64	184
accutane	147	AEROCHAMBER PLUS FLO-
acebutolol hcl	128	VU INTERM
acetaminophen (tylenol)	33	184
acetaminophen / caffeine /		AEROCHAMBER PLUS FLO-
pyrilamine (midol)	33	VU SMALL
acetaminophen-codeine	36	184
ACETAMINOPHEN-		AEROCHAMBER
CODEINE	36	W/FLOWSIGNAL
acetazolamide	160	184
acetazolamide er	160	AEROCHAMBER Z-STAT
acetic acid	170,211	PLUS
acetylcysteine	147	184
acitretin	151	AEROCHAMBER Z-STAT
ACTEMRA	30	PLUS/LARGE
ACTEMRA ACTPEN	30	185
ACTHIB	229	AEROCHAMBER Z-STAT
ACTIMMUNE	110	PLUS/MEDIUM
activated charcoal	24	185
acyclovir	127,152	AEROVENT PLUS
acyclovir sodium	127	185
ADACEL	226	AIMOVIQ
ADBRY	155	190
adefovir dipivoxil	126	AIRIAL CHAMBER
ADEMPAS	133	185
ADVAIR HFA	50	AIRZONE PEAK FLOW
AEROCHAMBER HOLDING		METER
CHAMBER	184	185
		AJOVY
		190
		ak-poly-bac
		207
		AKEEGA
		87
		albendazole
		39
		ALBUTEROL SULFATE
		50
		albuterol sulfate
		50
		albuterol sulfate hfa (proair
		equivalent)
		50
		albuterol sulfate hfa (proventil
		equivalent)
		50
		albuterol sulfate hfa (Ventolin
		Equivalent)
		50
		alcohol swabs
		183
		ALCOHOL SWABS 1x1
		183
		ALECENSA
		93
		alendronate sodium
		161
		aleve arthritis pain
		148
		alfuzosin hcl er
		170
		aliskiren fumarate
		80
		allopurinol
		171
		alosepron hcl
		168
		alprazolam
		45
		altacaine
		209
		altavera
		136
		aluminum hydroxide
		(alternagel)
		39
		ALUNBRIG
		93
		alyacen 1/35
		137
		alyq
		132
		amantadine hcl
		112
		ambrisentan
		132
		amikacin sulfate
		25
		amiloride hcl
		161
		AMILORIDE-
		HYDROCHLOROTHIAZIDE
		160
		amiodarone hcl
		47
		amitriptyline hcl
		63
		amlodipine besy-benazepril hcl
		78
		amlodipine besylate
		129
		amlodipine besylate-valsartan
		78
		amlodipine-atorvastatin
		131
		amlodipine-olmesartan
		79
		amlodipine-valsartan-hctz
		79
		ammonium lactate (amlactin)
		156
		ammonium lactate (amlactin) rx
		only
		156

amnesteam	147	aripiprazole	119	aubra	137
amoxapine	63	ARISTADA	120	aubra eq	137
amoxicillin	213	ARISTADA INITIO	120	AUGTYRO	93
AMOXICILLIN	213	armodafinil	24	AUSTEDO	217
AMOXICILLIN-POT		arthritis pain reliever	148	AUSTEDO XR	217,218
CLAVULANATE	214	artificial tear drops	205	AUSTEDO XR PATIENT	
AMOXICILLIN-POT		asenapine maleate	117	TITRATION	218
CLAVULANATE ER	214	ASMANEX (120 METERED		AUVELITY	60
amphetamine-dextroamphet		DOSES)	49	aviane	137
er	22	ASMANEX (30 METERED		avita	147
amphetamine-		DOSES)	49	AVONEX PEN	218
dextroamphetamine	22	ASMANEX (60 METERED		AVONEX PREFILLED	219
AMPHOTERICIN B	72	DOSES)	49	AYVAKIT	91
ampicillin	213	ASMANEX HFA	49	azathioprine	196
AMPICILLIN SODIUM	213	aspercreme arthritis pain	148	azelaic acid	158
ampicillin sodium 1 gm recon		aspirin (bayer)	33	azelastine hcl	203,210
soln	213	aspirin / acetaminophen /		azithromycin	179
ampicillin sodium 10 gm recon		caffeine (excedrin)	33	aztreonam	43
soln	213	aspirin / buffers (bufferin)	33		
ampicillin-sulbactam sodium 1.5		aspirin / sodium bicarb / citric		B	
(1-0.5) gm recon soln	214	acid (alka-seltzer)	33	baciim	40
ampicillin-sulbactam sodium 15		aspirin-dipyridamole er	172	bacitra-neomycin-polymyxin-	
(10-5) gm recon soln	214	ASSESS FULL RANGE PEAK		hc	209
ampicillin-sulbactam sodium 3		METER	185	BACITRACIN	40,207
(2-1) gm recon soln	214	ASSESS LOW RANGE PEAK		bacitracin	149
anagrelide hcl	172	METER	185	bacitracin / polymyxin b	
anastrozole	87	ASSESS PEAK FLOW		(polysporin)	149
ANNOVERA	141	METER	185	bacitracin zinc	149
ANORO ELLIPTA	50	ASTHMA CHECK METER-		bacitracin-polymyxin b	207
anti-itch	151	ZONE SYSTEM	185	baclofen	203
APRACLONIDINE HCL 0.5 %		ASTHMAMENTOR	185	BACTERIOSTATIC	
SOLUTION	206	atazanavir sulfate	121	WATER(BENZ ALC)	215
aprepitant	71,72	atenolol	128	balanced salt	210
APRETUDE	121	atenolol-chlorthalidone	79	balsalazide disodium	167
apri	137	atomoxetine hcl	23	BALVERSA	93,94
APTIOM	55	atorvastatin calcium	76	BARACLUDGE	126
APTIVUS	121	atovaquone	41	bath oil	153
aranelle	137	atovaquone-proguanil hcl	80	BCG VACCINE	229
ARCALYST	30	ATROPINE SULFATE	206	BELBUCA	36
AREXVY	230	atropine sulfate	206	BELSOMRA	177
arformoterol tartrate	50	ATROVENT HFA	49	benazepril hcl	77

benazepril-	body wash	153	BRIVIACT	55	
hydrochlorothiazide	79	BOOSTRIX	226	bromocriptine mesylate	112
benefiber on the go	177	bosentan	132	BRONCHITOL	222
BENLYSTA	198	BOSULIF	94	BRONCHITOL TOLERANCE	
BENZNIDAZOLE	39	BRAFTOVI	94	TEST	222
benzonatate	145	BREATHE COMFORT		BRUKINSA	94
benzoyl peroxide	147	CHAMBER/ADULT	185	budesonide	38,49,143
benztropine mesylate	111	BREATHE COMFORT		budesonide er	143
BESREMI	110	CHAMBER/CHILD	185	budesonide-formoterol	
beta-carotene	234	BREATHE EASE LARGE	185	fumarate	51
betaine	163	BREATHE EASE MEDIUM	185	bumetanide	160
betamethasone		BREATHE EASE PEAK FLOW		buprenorphine	36
dipropionate	153	METER	185	buprenorphine hcl	37
betamethasone dipropionate		BREATHE EASE SMALL	185	buprenorphine hcl-naloxone	
aug	153	BREATHERITE	185	hcl	37
betamethasone valerate	153	BREATHERITE COLL SPACER		bupropion hcl	60
betaxolol hcl	128	ADULT	186	bupropion hcl er (smoking det)	60
BETAXOLOL HCL	206	BREATHERITE COLL SPACER		bupropion hcl er (sr)	60
bethanechol chloride	229	CHILD	186	bupropion hcl er (xl)	61
bexarotene	110,150	BREATHERITE COLL SPACER		bupirone hcl	45
BEXSERO	229	INFANT	186	butorphanol tartrate	37
BEYFORTUS	212	BREATHERITE RIGID		BYDUREON BCISE	66
bicalutamide	87	SPACER/MASK	186		
BICILLIN L-A	213	BREATHERITE SPACER		C	
BIKTARVY	121	NEONATE	186	CABENUVA	121
bimatoprost	211	BREATHERITE SPACER		cabergoline	164
bioflavonoids	201	SMALL CHILD	186	CABOMETYX	94
biotin	234	BREATHERITE VALVED MDI		calamine	157
bis subcit-metronid-tetracyc	228	CHAMBER	186	calamine / zinc oxide	157
bisacodyl (dulcolax)	179	BREATHERITE/LARGE		calcipotriene	151
bismuth subsalicylate (pepto-		MASK	186	CALCIPOTRIENE	151
bismol)	69	BREATHERITE/MEDIUM		calcitonin (salmon)	161
bismuth/metronidaz/tetracyclin	28	MASK	186	CALCITRIOL	151
28		BREATHERITE/SMALL		calcitriol	163
bisoprolol fumarate	128	MASK	186	calcium / magnesium / vitamin	
bisoprolol-		BREO ELLIPTA	50	d	191
hydrochlorothiazide	79	breyna	51	calcium / magnesium / zinc	191
blisovi 24 fe	137	BREZTRI AEROSPHERE	51	calcium / phosphorus / vitamin	
blisovi fe 1.5/30	137	BRILINTA	172	d	191
blood glucose monitoring		brimonidine tartrate	206	calcium / vitamin c / vitamin d	192
supplies	181	brimonidine tartrate-timolol	206	calcium / vitamin d / vitamin k	192

calcium acetate.....	169	carbamide peroxide (debrox)211	CEFEPIME-DEXTROSE.....	136	
calcium acetate (phos binder).....	169	carbidopa.....	cefixime.....	135	
calcium ascorbate.....	234	CARBIDOPA-LEVODOPA...112	cefotetan disodium.....	135	
calcium carbonate.....	192	carbidopa-levodopa er.....	112	CEFOTETAN DISODIUM-DEXTROSE.....	135
calcium carbonate (tums)....	39	carbidopa-levodopa-entacapone 12.5-50-200 mg tab.....	112	cefoxitin sodium.....	135
calcium carbonate / folic acid / vitamin d.....	192	carbidopa-levodopa-entacapone 18.75-75-200 mg tab.....	112	CEFOXITIN SODIUM-DEXTROSE.....	135
calcium carbonate / magnesium hydroxide (mylanta supreme)39		carbidopa-levodopa-entacapone 25-100-200 mg tab.....	112	cefpodoxime proxetil.....	135
calcium carbonate / vitamin d.....	192	carbidopa-levodopa-entacapone 31.25-125-200 mg tab.....	112	cefprozil.....	135
calcium carbonate / vitamin d / minerals.....	192	carbidopa-levodopa-entacapone 37.5-150-200 mg tab.....	112	ceftazidime.....	135
calcium citrate.....	192	carbidopa-levodopa-entacapone 50-200-200 mg tab.....	112	CEFTAZIDIME AND DEXTROSE.....	135
calcium citrate / vitamin d...192		carbonyl iron.....	175	CEFTRIAXONE SODIUM.....	136
calcium gluconate.....	192	carglumic acid.....	163	CEFTRIAXONE SODIUM IN DEXTROSE.....	136
calcium panthothenate.....	235	CARTEOLOL HCL.....	206	CEFTRIAXONE SODIUM-DEXTROSE.....	136
calcium polycarbophil (fiber laxative).....	177	cartia xt.....	129	cefuroxime axetil.....	135
CALQUENCE.....	95	carvedilol.....	128	cefuroxime sodium.....	135
camila.....	142	casprofungin acetate 50 mg recon soln.....	72	celecoxib.....	31
camphor.....	147	casprofungin acetate 70 mg recon soln.....	72	cellulose (unifiber).....	177
camphor / eucalyptus / menthol.....	147	catheter.....	183	cephalexin.....	134
camphor / menthol / methyl salicylate (salonpas).....	157	cavarest.....	199	CERDELGA.....	172
camrese.....	137	CAYSTON.....	43	cetirizine (zyrtec).....	74
camrese lo.....	137	CEFACLOR.....	135	cetirizine (zyrtec) rx only.....	74
candesartan cilexetil.....	78	cefadroxil.....	134	cetirizine / pseudoephedrine (zyrtec – d).....	145
candesartan cilexetil-hctz....	79	cefazolin sodium.....	134	cevimeline hcl.....	200
capecitabine.....	82	CEFAZOLIN SODIUM 100 GM RECON SOLN.....	134	CHEMET.....	70
CAPLYTA.....	114	CEFAZOLIN SODIUM 2 GM RECON SOLN.....	134	chewable iron.....	174
CAPRELSA.....	95	CEFAZOLIN SODIUM 300 GM RECON SOLN.....	134	CHLORAMPHENICOL SOD SUCCINATE.....	41
capsaicin (zostrix).....	157	CEFAZOLIN SODIUM-DEXTROSE.....	134	chlorhexidine gluconate..	120,199
capsaicin / menthol (salonpas).....	157	cefdinir.....	135	chloroquine phosphate.....	80
captopril.....	77	cefepime hcl.....	136	chlorpheniramine.....	73
CAPVAXIVE.....	229			chlorpheniramine / phenylephrine / acetaminophen.....	145
carbamazepine.....	55			chlorpheniramine / phenylephrine / aspirin.....	145
carbamazepine er.....	56			chlorpromazine hcl.....	118

chlorthalidone.....	161	CLINIMIX/DEXTROSE	COMETRIQ (60 MG DAILY
chlorzoxazone.....	203	(5/20).....	DOSE).....
cholestyramine.....	75	clinpro 5000.....	95
cholestyramine light.....	75	clobazam.....	COMPACT SPACE
chromium.....	195	clobetasol prop emollient	CHAMBER.....
ciclopirox.....	149	base.....	186
ciclopirox olamine.....	149	clobetasol propionate.....	COMPACT SPACE
cilostazol.....	172	clobetasol propionate e.....	CHAMBER/LG MASK.....
CIMDUO.....	121	clodan.....	186
cimetidine.....	227	clomipramine hcl.....	COMPACT SPACE
cinacalcet hcl.....	163	clonazepam.....	CHAMBER/MED MASK.....
CINRYZE.....	171	clonidine hcl er.....	186
ciprofloxacin hcl.....	166,207	clonidine tablet.....	COMPLERA.....
CIPROFLOXACIN HCL.....	211	clonidine weekly patch.....	121
ciprofloxacin in d5w.....	166	clopidogrel bisulfate.....	compro.....
ciprofloxacin-		clorazepate dipotassium.....	118
dexamethasone.....	211	clotrimazole.....	constulose.....
citalopram hydrobromide.....	61	clotrimazole (gyne-lotrimin).....	178
claravis.....	147	clotrimazole (lotrimin).....	contraceptive sponge / gel.....
CLARITHROMYCIN.....	179	clotrimazole cream (lotrimin) rx	233
clarithromycin er.....	179	only.....	COPIKTRA.....
clear soluble fiber.....	177	clotrimazole solution (lotrimin) rx	96
clemastine fumarate.....	74	only.....	CORLANOR.....
CLEVER CHOICE HOLDING		clotrimazole-betamethasone.....	133
CHAMBER.....	186	clozapine.....	COTELLIC.....
CLEVER CHOICE PEAK		CLOZAPINE 12.5 MG TAB	96
FLOW METER.....	186	DISP.....	96
clindamycin hcl.....	43	coal tar.....	159
clindamycin palmitate hcl.....	43	COARTEM.....	80
clindamycin		coenzyme q10.....	24
phosphate.....	43,147,233	colchicine.....	171
clindamycin phosphate in		colchicine-probenecid.....	171
d5w.....	43	colesevelam hcl.....	75
CLINDAMYCIN PHOSPHATE		colestipol hcl.....	75
IN NACL.....	43	colistimethate sodium (cba).....	44
CLINIMIX/DEXTROSE		COMBIVENT RESPIMAT.....	51
(4.25/10).....	205	COMETRIQ (100 MG DAILY	
CLINIMIX/DEXTROSE		DOSE).....	95
(4.25/5).....	205	COMETRIQ (140 MG DAILY	
CLINIMIX/DEXTROSE		DOSE).....	95
(5/15).....	205		
			170

CYSTARAN.....	210	DEXAMETHASONE	diaper rash products.....	155
D		INTENSOL.....	diapers.....	183
dalfampridine er.....	219	DEXAMETHASONE SOD	diazepam.....	46
DALVANCE.....	42	PHOS +RFID.....	DIAZEPAM.....	54
danazol.....	37	dexamethasone sodium	diazepam intensol.....	46
dantrolene sodium.....	203	phosphate.....	diazoxide.....	65
dapsone.....	42	DEXAMETHASONE SODIUM	diclofenac 1% gel.....	148
DAPTACEL.....	226	PHOSPHATE.....	diclofenac 1% gel rx only.....	148
DAPTOMYCIN.....	42	dexbropheniramine.....	diclofenac potassium.....	31
daptomycin 350 mg recon		DEXCOM G5 MOB/G4 PLAT	diclofenac sodium31,148,150,210	
soln.....	42	SENSOR.....	diclofenac sodium er.....	31
daptomycin 500 mg recon		DEXCOM G5 MOBILE	dicloxacillin sodium.....	215
soln.....	42	RECEIVER.....	dicyclomine hcl.....	227
darifenacin hydrobromide er	228	DEXCOM G5 MOBILE	DIFICID.....	180
darunavir.....	121	TRANSMITTER.....	diflunisal.....	33
DAURISMO.....	87	DEXCOM G5 RECEIVER	digoxin.....	131
DAYVIGO.....	177	KIT.....	DIGOXIN 0.05 MG/ML	
deblitane.....	142	DEXCOM G6 RECEIVER.....	SOLUTION.....	131
decadron.....	143	DEXCOM G6 SENSOR.....	dihydroergotamine mesylate..	190
deferasirox.....	70	DEXCOM G6	DILANTIN.....	59
deferiprone.....	70	TRANSMITTER.....	dilt-xr.....	129
DELSTRIGO.....	121	DEXCOM G7 RECEIVER.....	diltiazem hcl.....	129
demeclocycline hcl.....	224	DEXCOM G7 SENSOR.....	diltiazem hcl er.....	130
denta 5000 plus.....	199	dextran 70/he-cell drops	diltiazem hcl er beads.....	130
dentagel.....	199	(gentel tears).....	diltiazem hcl er coated beads..	130
DEPO-SUBQ PROVERA		dextromethorphan	dimenhydrinate (dramamine)..	71
104.....	142	(robitussin).....	dimethicone.....	158
DESCOVY.....	121	dextromethorphan /	DIMETHICONE CREAM.....	158
desipramine hcl.....	63	acetaminophen /	dimethyl fumarate.....	219
desloratadine.....	74	chlorpheniramine.....	dimethyl fumarate starter	
desmopressin ace spray		dextromethorphan /	pack.....	219
refrig.....	164	phenylephrine /	DIPENTUM.....	167
desmopressin acetate.....	164	acetaminophen.....	diphenhydramine.....	150
desmopressin acetate		dextrose.....	diphenhydramine (benadryl)..	74
spray.....	164	DEXTROSE-SODIUM	diphenhydramine / phenylephrine	
desogestrel-ethinyl estradiol	137	CHLORIDE.....	/ acetaminophen.....	145
desonide.....	154	dextrose-sodium chloride....	diphenhydramine / zinc.....	150
desvenlafaxine succinate er.	62	DEXTROSE-SODIUM	diphenoxylate-atropine.....	69
dexamethasone.....	143	CHLORIDE 2.5-0.45 %	diphenhydramine.....	74
		SOLUTION.....	DIPHThERIA-TETANUS	
		DIACOMIT.....	TOXOIDS DT.....	226

dipyridamole.....	172	EASIVENT MASK SMALL... 187	enulose.....	168	
disopyramide phosphate.....	46	ec-naproxen.....	31	ENVARBUS XR.....	196
disulfiram 250 mg tab.....	216	econazole nitrate.....	150	ephedrine / guaifenesin.....	145
DISULFIRAM 500 MG TAB.....	216	EDURANT.....	122	EPIDIOLEX.....	56
divalproex sodium.....	60	EFAVIRENZ.....	122	epinastine hcl.....	210
divalproex sodium er.....	60	efavirenz-emtricitab-tenofo df.....	122	epinephrine 0.15/3ml, 0.30/3ml auto-injector (teva and mylan only).....	234
docusate calcium (surfak).....	179	efavirenz-lamivudine- tenofovir.....	122	epitol.....	56
docusate sodium (colace).....	179	electrolyte solution.....	192	eplerenone.....	80
dofetilide.....	47	eletriptan hydrobromide.....	191	EPRONTIA.....	56
donepezil hcl.....	217	ELIGARD.....	87,88	eq arthritis pain.....	148
dorzolamide hcl.....	210	ELIQUIS.....	52	eq arthritis pain reliever.....	148
dorzolamide hcl-timolol mal.....	206	ELIQUIS DVT/PE STARTER PACK.....	52	eq fiber powder.....	177
dorzolamide hcl-timolol mal pf.....	206	ELMIRON.....	170	EQ SPACE CHAMBER ANTI- STATIC.....	187
dotti.....	165	eluryng.....	141	EQ SPACE CHAMBER ANTI- STATIC L.....	187
DOVATO.....	122	EMCYT.....	88	EQ SPACE CHAMBER ANTI- STATIC M.....	187
doxazosin mesylate.....	78	EMGALITY.....	190	EQ SPACE CHAMBER ANTI- STATIC S.....	187
doxepin hcl.....	63,176	EMGALITY (300 MG DOSE).....	190	eql fiber supplement.....	177
doxercalciferol.....	163	emollient.....	153	eql fiber supplement (wheat).....	177
doxy 100.....	224	EMSAM.....	61	ERGOLOID MESYLATES.....	221
doxycycline hyclate.....	225	emtricitabine.....	122	ERGOTAMINE-CAFFEINE.....	190
doxycycline monohydrate.....	225	emtricitabine-tenofovir df.....	122	ERIVEDGE.....	87
doxylamine / dextromethorphan.....	145	EMTRIVA.....	122	ERLEADA.....	88
doxylamine-pyridoxine.....	71	emzahn.....	142	erlotinib hcl.....	86
dronabinol.....	71	enalapril maleate.....	77	errin.....	142
drospirenone-ethinyl estradiol.....	137	enalapril-hydrochlorothiazide.....	79	ertapenem sodium.....	41
DROXIA.....	173	ENBREL.....	33	ERVEBO.....	230
droxidopa.....	234	ENBREL MINI.....	33	ERY.....	147
DRYSOL.....	158	ENBREL SURECLICK.....	33	ery-tab.....	179
DULERA.....	51	endocet.....	36	ERYTHROCIN STEARATE.....	180
duloxetine hcl.....	63	enema.....	178	erythromycin.....	147,180,207
DUPIXENT.....	155,156	ENGERIX-B.....	230	erythromycin base.....	180
dutasteride.....	170	enilloring.....	141	ERYTHROMYCIN BASE 250 MG CP DR PART.....	180
dutasteride-tamsulosin hcl.....	170	enoxaparin sodium.....	53	erythromycin ethylsuccinate.....	180
E		enpresse-28.....	137	escitalopram oxalate.....	61
EASIVENT.....	187	enskyce.....	137		
EASIVENT MASK LARGE.....	187	entacapone.....	112		
EASIVENT MASK MEDIUM.....	187	entecavir.....	126		
		ENTRESTO.....	131		

esomeprazole magnesium	228	fentanyl	34	fluocinolone acetonide body	154
estarylla	137	fentanyl citrate	34	fluocinolone acetonide scalp	154
estradiol	166,233	ferraplus 90	174	fluocinonide	154
estradiol valerate	166	FERREX	174	FLUOCINONIDE 0.05 % GEL	154
estradiol-norethindrone acet	165	ferrex 150 forte	174	fluoridex	199
ESTRING	233	ferrex 150 forte plus	174	fluoridex enhanced whitening	199
eszopiclone	176	ferrex 150 plus	174	fluorimax 5000	199
ethacrynic acid	160	ferrex 28	174	fluorometholone	209
ethambutol hcl	81	ferrous fumarate	175	FLUOROURACIL	151
ethosuximide	60	ferrous fumarate / folic acid	174	fluorouracil	151
ethynodiol diac-eth estradiol	137	ferrous fumarate / vitamin b12 /		fluoxetine hcl	62
etodolac	31	vitamin c	174	fluphenazine decanoate	118
etonogestrel-ethinyl		ferrous fumarate / vitamin c /		fluphenazine hcl	119
estradiol	141	vitamin b12 / folic acid	174	flurbiprofen	31
etravirine	122	ferrous fumarate polysaccharide		FLURBIPROFEN SODIUM	210
euthyrox	225	complex	175	fluticasone propionate	204
everolimus	96,196	ferrous gluconate	175	FLUTICASONE PROPIONATE	
EVOTAZ	122	FERROUS SULFATE	175	HFA	49,50
exemestane	88	ferrous sulfate	175	fluticasone-salmeterol	51
EXKIVITY	86	ferrous sulfate combination	175	fluvastatin sodium	76
eyelid cleansers	158	FETZIMA	63	fluvoxamine maleate	62
ezetimibe	76	FETZIMA TITRATION	63	fluvoxamine maleate er	62
ezetimibe-simvastatin	74	fexofenadine (allegra)	74	folic acid	173
		finasteride	170	folic acid / vitamin b6 / vitamin	
F		fingolimod hcl	219	b12	175
falmina	137	FINTEPLA	56	folic acid / vitamin b6 / vitamin	
famciclovir	127	FIRDAPSE	81	b12 / omega-3	175
famotidine (pepcid)	227	FIRMAGON	88	folic acid / vitamin d	175
famotidine (pepcid) rx only	227	FIRMAGON (240 MG DOSE)	88	fondaparinux sodium	53
FANAPT	114	flac	211	formoterol fumarate	51
FANAPT TITRATION PACK	114	flavor syrup	215	fosamprenavir calcium	122
FASENRA	47	flavoxate hcl	229	fosfomycin tromethamine	44
FASENRA PEN	48	flaxseed oil	24	fosinopril sodium	77
febuxostat	171	flecainide acetate	47	fosinopril sodium-hctz	79
felbamate	58	FLEXICHAMBER	187	FOTIVDA	96
felodipine er	130	fluconazole	73	FREESTYLE LIBRE 14 DAY	
female condoms	181	fluconazole in sodium chloride	73	READER	181
femynor	137	flucytosine	72	FREESTYLE LIBRE 14 DAY	
fenofibrate	75	fludrocortisone acetate	145	SENSOR	182
fenofibrate micronized	75	flunisolide	204	FREESTYLE LIBRE 2	
fenofibric acid	75	fluocinolone acetonide	154,211	READER	182

FREESTYLE LIBRE 2	gentamicin sulfate . . .	25,149,207	GVOKE HYPOPEN 2-PACK . . .	65
SENSOR	GENVOYA	182	GVOKE KIT	65
FREESTYLE LIBRE 3 PLUS	GILOTRIF	86	GVOKE PFS	66
SENSOR	glatiramer acetate	219		
FREESTYLE LIBRE 3	glatopa	220	H	
READER	GLEOSTINE	82	HADLIMA	26
FREESTYLE LIBRE 3	glimepiride	69	HADLIMA PUSHTOUCH	26
SENSOR	glipizide	69	HAEGARDA	171
FREESTYLE LIBRE	glipizide er	69	hailey 24 fe	137
READER	glipizide xl	69	halobetasol propionate	154
FREESTYLE LIBRE SENSOR	glipizide-metformin hcl	64	haloette	141
SYSTEM	GLUCAGON EMERGENCY	65	haloperidol	117
FRUZAQLA	glucosamine / chondroitin	25	haloperidol decanoate	117
ft arthritis pain	glucosamine sulfate	24	haloperidol lactate	117
furosemide	glucose (dextrose)	65	HAVRIX	231
FUZEON	glycerin	156	hearing aid batteries	180
fyavolv	glycerin suppository	178	heather	142
FYCOMPA	glycopyrrolate	227	hemetab	175
	GLYXAMBI	64	hemorrhoidal cream	38
G	gnp anti-itch	151	hemorrhoidal ointment	38
g tussin ac	gnp arthritis pain	148	hemorrhoidal suppository	38
gabapentin	gnp best fiber	177	heparin sodium (porcine)	53
galantamine hydrobromide	gnp diclofenac sodium	148	heparin sodium (porcine) pf	53
galantamine hydrobromide	GOLYTELY	178	HEPLISAV-B	231
er	goodsense arthritis pain	148	HETLIOZ	177
GAMMAKED	goodsense best fiber	177	HIBERIX	229
GAMUNEX-C	granisetron hcl	71	HUMIRA (2 PEN)	27
GARDASIL 9	griseofulvin microsize	72	HUMIRA (2 SYRINGE)	27
gatifloxacin	griseofulvin ultramicrosize	72	HUMIRA 10 MG/0.1ML PREF SY	
GAUZE PADS	guaifenesin ac	145	KT (ABBVIE)	27
gauze pads and dressings	guaifenesin (mucinex)	147	HUMIRA 20 MG/0.2ML PREF SY	
GAVILYTE-C	guaifenesin / dextromethorphan		KT (ABBVIE)	27
gavilyte-g	(mucinex dm)	145	HUMIRA 40 MG/0.4ML PREF SY	
gavilyte-n with flavor pack	guaifenesin / dextromethorphan		KT (ABBVIE)	27
GAVRETO	/ phenylephrine	145	HUMIRA PEN 40 MG/0.4ML PEN	
gefitinib	guaifenesin / dextromethorphan		KIT (ABBVIE)	27
gemfibrozil	/ pseudoephedrine	146	HUMIRA PEN 80 MG/0.8ML PEN	
GEMTESA	guaifenesin ac	146	KIT (ABBVIE)	28
generlac	guaifenesin-codeine	146	HUMIRA PEN-CD/UC/HS	
gengraf	guanfacine hcl	78	STARTER 80 MG/0.8ML PEN	
GENTAMICIN IN SALINE	GVOKE HYPOPEN 1-PACK	65	KIT (ABBVIE)	28

HUMIRA PEN-PEDIATRIC UC START 80 MG/0.8ML PEN KIT (ABBVIE)	28	IBRANCE	97	INSULIN SYRINGE (DISP) U-100 0.3 ML	183
HUMIRA PEN-PSOR/UEVIT STARTER	28	ibuprofen (motrin)	31	INSULIN SYRINGE (DISP) U-100 1 ML	183
HUMIRA-CD/UC/HS STARTER	28	ibuprofen (motrin) rx only	31	INSULIN SYRINGE (DISP) U-100 1/2 ML	183
HUMIRA-PED<40KG CROHNS STARTER	28	icatibant acetate	171	INTELENCE	122
HUMIRA-PED>=40KG CROHNS START	29	ICLUSIG	97	introvale	138
HUMIRA-PS/UV/ADOL HS STARTER	29	icosapent ethyl	75	INVEGA HAFYERA	114
HUMULIN R U-500 (CONCENTRATED)	67	IDHIFA	97	INVEGA SUSTENNA	115
HUMULIN R U-500 KWIKPEN	67	imatinib mesylate	97	INVEGA TRINZA	115
hydralazine hcl	80	IMBRUVICA	97,98	INVIRASE	122
hydrochlorothiazide	161	imipenem-cilastatin	41	INVOKAMET	64
hydrocodone-acetaminophen	36	imipramine hcl	63	INVOKAMET XR	64
hydrocortisone	38,143,154	imipramine pamoate	63	INVOKANA	69
hydrocortisone (perianal)	38	imiquimod	156	IPOL	231
HYDROCORTISONE 2.5 % LOTION	154	IMOVAX RABIES	231	ipratropium bromide	49,204
hydrocortisone cream	155	incassia	142	ipratropium-albuterol	51
hydrocortisone-acetic acid	212	incontinence supplies	183	irbesartan	78
HYDROCORTISONE-ACETIC ACID	212	INCRELEX	163	irbesartan-hydrochlorothiazide	79
hydrogen peroxide	120	INCRUSE ELLIPTA	49	iron / folic acid / vitamin c / vitamin b6 / vitamin b12 / zinc	175
hydrogen peroxide / benzyl alcohol	198	indapamide	161	iron / vitamin c / vitamin b12 / folic acid	175
hydromorphone hcl	34	indomethacin	31	iron combinations	175
hydromorphone hcl pf	34	INDANRIX	226	iron polysaccharide complex	175
hydroxychloroquine sulfate	80	INGREZZA	218	ISENTRESS	123
hydroxyurea	110	INLYTA	83	ISENTRESS HD	123
hydroxyzine hcl	45	INQOVI	92	isibloom	138
hydroxyzine pamoate	45	INREBIC	98	ISONIAZID	81
HYQVIA	212	INSPIRACHAMBER/LARGE	187	isoniazid 300mg tab	81
ibandronate sodium	161	INSPIRACHAMBER/MEDIUM	187	isoniazid 50mg/5ml syrup	81
		INSPIRACHAMBER/MOUTHPIECE	187	isosorbide dinitrate	44
		INSPIRACHAMBER/SMALL	187	isosorbide mononitrate	44
		INSPIREASE	187	ISOSORBIDE MONONITRATE 10 MG TAB	45
		INSULIN ASP PROT & ASP	67	ISOSORBIDE MONONITRATE 20 MG TAB	45
		FLEXPEN	67	isosorbide mononitrate er	45
		INSULIN ASPART	67	isotretinoin	147
		INSULIN ASPART FLEXPEN	67	isradipine	130
		INSULIN ASPART PENFILL	67		
		INSULIN ASPART PROT & ASPART	67		
		INSULIN PEN NEEDLE	183		

itraconazole	73	KCL-LACTATED RINGERS-	lacosamide	56
ivabradine hcl	133	D5W	lactase (lactaid)	160
ivermectin	39	kelnor 1/35	LACTATED RINGERS	193
ivermectin 1 % cream	158	kelnor 1/50	lactulose	178
IWILFIN	111	KERENDIA	lactulose encephalopathy	168
IXCHIQ	231	KESIMPTA	LAGEVRIO	127
IXIARO	231	ketoconazole	lamivudine	123,126
		ketorolac tromethamine	lamivudine-zidovudine	123
		ketotifen drops (zaditor)	lamotrigine	57
J		KEVZARA	lamotrigine er	57
JAKAFI	98	KINRIX	lancet device	182
jantoven	52	kionex	lancets	182
JANUMET	64	KISQALI (200 MG DOSE)	lanolin / petrolatum	158
JANUMET XR	64	KISQALI (400 MG DOSE)	lanolin/mineral oil/white	
JANUVIA	66	KISQALI (600 MG DOSE)	petrolatum (eucerin)	158
JARDIANCE	69	KISQALI FEMARA (200 MG	lansoprazole (prevacid)	228
jasmiel	138	DOSE)	lansoprazole (prevacid) rx	
JAYPIRCA	98	KISQALI FEMARA (400 MG	only	228
jencycla	142	DOSE)	lanthanum carbonate	169
JENTADUETO	64	KISQALI FEMARA (600 MG	LANTUS	67
JENTADUETO XR	64	DOSE)	LANTUS SOLOSTAR	67
jinteli	165	klayesta	lapatinib ditosylate	99
joyeaux	138	klor-con	larin 1.5/30	138
juleber	138	klor-con 10	larin 1/20	138
JULUCA	123	klor-con m10	larin fe 1.5/30	138
junel 1.5/30	138	klor-con m15	larin fe 1/20	138
junel 1/20	138	klor-con m20	larissia	138
junel fe 1.5/30	138	KLOXXADO	latanoprost	211
junel fe 1/20	138	kls arthritis pain relief	LEDIPASVIR-SOFOSBUVIR	126
junel fe 24	138	kls diclofenac sodium	leflunomide	32
just right 5000	199	KORLYM	lenalidomide	195
JYNNEOS	231	KOSELUGO	LENVIMA (10 MG DAILY	
		kourzeq	DOSE)	84
		KRAZATI	LENVIMA (12 MG DAILY	
K-PHOS	193	kurvelo	DOSE)	84
K-PHOS NO 2	169	L	LENVIMA (14 MG DAILY	
kaitlib fe	138	l-glutamine	DOSE)	84
KALYDECO	222	l-methylfolate	LENVIMA (18 MG DAILY	
kariva	138	l-methylfolate combinations	DOSE)	84
KCL (0.149%) IN NACL	192	labetalol hcl	LENVIMA (20 MG DAILY	
KCL (0.298%) IN NACL	192		DOSE)	84
kcl in dextrose-nacl	192			

LENVIMA (24 MG DAILY DOSE).....	84	LIBERVANT.....	54	losartan potassium.....	78
LENVIMA (4 MG DAILY DOSE).....	85	lidocaine hcl.....	157	losartan potassium-hctz.....	80
LENVIMA (8 MG DAILY DOSE).....	85	LIDOCAINE HCL.....	198	loteprednol etabonate.....	209
lessina.....	138	LIDOCAINE HCL		lovastatin.....	76
letrozole.....	88	URETHRAL/MUCOSAL.....	157	low-ogestrel.....	139
leucovorin calcium.....	111	lidocaine ointment rx only.....	157	loxapine succinate.....	117
LEUKERAN.....	82	lidocaine patches.....	157	lubiprostone.....	167
levabuterol hcl.....	51	lidocaine patches rx only.....	157	lubricant eye drops.....	205
LEVALBUTEROL		lidocaine viscous hcl.....	198	lubricant eye ointment.....	205
TARTRATE.....	51	lidocaine-prilocaine.....	157	LUMAKRAS.....	100
levetiracetam.....	57	lincomycin hcl.....	43	LUMIGAN.....	211
levetiracetam er.....	57	LINDANE.....	158	LUNG PERFORM PEAK FLOW	
LEVOBUNOLOL HCL.....	206	linezolid.....	43	METER.....	187
levocarnitine.....	163	LINEZOLID IN SODIUM		LUPRON DEPOT (1-MONTH).....	88
levocarnitine sf.....	163	CHLORIDE.....	43	LUPRON DEPOT (3-MONTH).....	88
levocetirizine (xyzal).....	74	LINZESS.....	168	lurasidone hcl.....	114
levocetirizine (xyzal) rx only.....	74	liothyronine sodium.....	226	lutera.....	139
levofloxacin.....	166	lisdexamphetamine dimesylate.....	22	lyleq.....	142
LEVOFLOXACIN.....	207	lisinopril.....	77	lyllana.....	166
LEVOFLOXACIN 0.5 %		lisinopril-hydrochlorothiazide.....	79	LYNPARZA.....	100
SOLUTION.....	207	LITEAIRE.....	187	LYSODREN.....	88
levofloxacin in d5w.....	166	lithium.....	113	LYTGOBI (12 MG DAILY	
levonest.....	138	LITHIUM CARBONATE.....	113	DOSE).....	100
levonorg-eth estrad		lithium carbonate.....	113	LYTGOBI (16 MG DAILY	
triphasic.....	138	LITHIUM CARBONATE 600 MG		DOSE).....	100
levonorgest-eth est & eth		CAP.....	113	LYTGOBI (20 MG DAILY	
est.....	138	lithium carbonate er.....	113	DOSE).....	100
levonorgest-eth estrad 91-		LITHOSTAT.....	170	lyza.....	142
day.....	139	LOKELMA.....	198		
levonorgest-eth estradiol-		LONSURF.....	93		
iron.....	139	loperamide (immodium).....	69		
levonorgestrel (plan b).....	142	loperamide (immodium) rx			
levonorgestrel-ethinyl		only.....	70		
estrad.....	139	lopinavir-ritonavir.....	123		
levora 0.15/30 (28).....	139	loratadine (claritin).....	74		
levothyroxine sodium.....	226	loratadine / pseudoephedrine			
levoxyl.....	226	(claritin – d).....	146		
LEXIVA.....	123	lorazepam.....	46		
		lorazepam intensol.....	46		
		LORBRENA.....	99,100		
		loryna.....	139		

M

M-M-R II.....	231
magnesium.....	193
magnesium carbonate /	
aluminum hydroxide (gaviscon).....	39
magnesium chloride.....	193
magnesium citrate solution	
(citroma).....	178
magnesium gluconate.....	193
magnesium hydroxide (phillips'	
milk of magnesia).....	179

magnesium hydroxide / aluminum hydroxide / simethicone (mylanta).....	39	mesalamine.....	168	miconazole (monistat).....	233
magnesium oxide.....	39	MESALAMINE 800 MG TAB DR.....	168	MICROCHAMBER.....	187
magnesium oxide (antacid).....	39	mesalamine er.....	168	microgestin 1.5/30.....	139
magnesium sulfate.....	193	mesalamine-cleanser.....	168	microgestin 1/20.....	139
malathion.....	158	MESNEX.....	111	microgestin fe 1.5/30.....	139
male condoms.....	181	metformin hcl.....	65	microgestin fe 1/20.....	139
maraviroc.....	123	metformin hcl er.....	65	MICROLIFE DIGITAL PEAK FLOW.....	187
marlissa.....	139	methadone hcl.....	34	MICROSPACER.....	187
MARPLAN.....	61	METHADONE HCL.....	34,35	midodrine hcl.....	234
MATULANE.....	110	methamphetamine hcl.....	22	mifepristone.....	66
matzim la.....	130	methazolamide.....	160	MIGERGOT.....	190
MAVYRET.....	126	methenamine hippurate.....	44	MIGLITOL.....	64
maxi-tuss ac.....	146	methenamine mandelate.....	44	miglustat.....	172
meclizine.....	71	methimazole.....	225	mili.....	139
meclizine rx only.....	71	methocarbamol.....	203	mineral oil.....	158
medroxyprogesterone acetate.....	142,216	methotrexate sodium.....	82	mineral oil / petrolatum.....	156
mefloquine hcl.....	80	methotrexate sodium (pf).....	83	MINI WRIGHT PEAK FLOW METER.....	187
megestrol acetate.....	89	METHOXSALEN RAPID.....	151	minocycline hcl.....	225
MEGESTROL ACETATE.....	216	methsuximide.....	60	minoxidil.....	80
MEKINIST.....	101	methyl salicylate / menthol.....	157	mirtazapine.....	60
MEKTOVI.....	101	methylcellulose (citrucel).....	178	miscellaneous natural products.....	197
melatonin.....	24	methylphenidate hcl.....	24	misoprostol.....	228
melatonin / pyridoxine.....	25	methylphenidate hcl er.....	24	mm arthritis pain reliever.....	148
melodetta 24 fe.....	139	methylphenidate hcl er (la).....	24	modafinil.....	24
meloxicam.....	31	methylprednisolone.....	143,144	moexipril hcl.....	77
memantine hcl.....	217	metoclopramide hcl.....	167	MOISTURIZING CREAM (VANICREAM).....	153
memantine hcl er.....	217	metolazone.....	161	MOLINDONE HCL.....	118
men-phor.....	151	metoprolol succinate er.....	128	mometasone furoate.....	155,204
MENACTRA.....	229	metoprolol tartrate.....	128	Monoject Syringes.....	184
MENEST.....	166	metoprolol-hydrochlorothiazide.....	80	montelukast sodium.....	49
MENQUADFI.....	230	metronidazole.....	40,158	morphine sulfate.....	35
menthol.....	200	METRONIDAZOLE.....	40	morphine sulfate (concentrate).....	35
menthol / zinc oxide.....	158	metronidazole vaginal gel 0.75 %.....	233	MORPHINE SULFATE (CONCENTRATE).....	35
MENVEO.....	230	metyrosine.....	77	MORPHINE SULFATE 10 MG/5ML SOLUTION.....	35
mercaptapurine.....	82	mexiletine hcl.....	47		
meropenem.....	41	mibelas 24 fe.....	139		
MEROPENEM-SODIUM CHLORIDE.....	41	micalfungin sodium.....	72		
		miconazole (micatin).....	150		

MORPHINE SULFATE 20	naproxen (aleve).....	31	nilutamide.....	89
MG/5ML SOLUTION.....	naproxen dr.....	35	nimodipine.....	130
morphine sulfate er.....	naratriptan hcl.....	35	NINLARO.....	101
motrin arthritis pain.....	NARCAN.....	148	nitazoxanide.....	41
MOUNJARO.....	NATACYN.....	66	nitisinone.....	164
MOVANTIK.....	nateglinide.....	168	NITRO-BID.....	45
MOXIFLOXACIN HCL.....	NAYZILAM.....	166	nitrofurantoin macrocrystal.....	44
moxifloxacin hcl.....	neбиволol hcl.....	207	nitrofurantoin monohyd macro.....	44
MOXIFLOXACIN HCL (2X	needles and syringes.....	207	nitroglycerin.....	38,45
DAY).....	needles and syringes rx only.....	207	nora-be.....	142
MOXIFLOXACIN HCL IN	NEFAZODONE HCL.....	167	norelgestromin-eth estradiol.....	141
NACL.....	neomycin / bacitracin / polymixin	167	norethin ace-eth estrad-fe.....	139
MRESVIA.....	(neosporin).....	231	norethindrone.....	142
msm supplement.....	neomycin / bacitracin / polymixin	25	norethindrone acet-ethinyl est.....	139
multigen.....	/ pramoxine (neosporin plus).....	175	norethindrone acetate.....	216
multigen folic.....	neomycin sulfate.....	175	norethindrone-eth estradiol.....	165
multigen plus.....	neomycin-bacitracin zn-	175	norgestim-eth estrad triphasic.....	139
MULTIGEN TABLET.....	polymyx.....	175	norgestimate-eth estradiol.....	139
multivitamins.....	neomycin-polymyxin-	201	norlyda.....	142
multivitamins / calcium.....	dexameth.....	201	norlyroc.....	142
multivitamins / iron.....	NEOMYCIN-POLYMYXIN-	201	nortrel 0.5/35 (28).....	140
multivitamins / minerals.....	GRAMICIDIN.....	40	nortrel 1/35 (21).....	140
mupirocin 2% ointment.....	NEOMYCIN-POLYMYXIN-	149	nortrel 1/35 (28).....	140
mycophenolate mofetil.....	HC.....	197	nortrel 7/7/7.....	140
mycophenolate sodium.....	neomycin-polymyxin-hc.....	197	nortriptyline hcl.....	63
mycophenolic acid.....	neomycin-polymyxin-hc 3.5-	197	NORVIR.....	123
MYRBETRIQ.....	10000-1 suspension.....	229	NOURIANZ.....	111
	NERLYNX.....		NOVOLIN 70/30.....	67
	nevirapine.....		NOVOLIN 70/30 FLEXPEN.....	67
na sulfate-k sulfate-mg sulf.....	nevirapine er.....	178	NOVOLIN 70/30 FLEXPEN	
nabumetone.....	NEXVIAZYME.....	31	RELION.....	67
nadolol.....	niacin.....	128	NOVOLIN 70/30 RELION.....	67
nafcillin sodium.....	niacin er (antihyperlipidemic).....	215	NOVOLIN N.....	68
NAFCILLIN SODIUM IN	niacinamide.....	215	NOVOLIN N FLEXPEN.....	68
DEXTROSE.....	nicardipine hcl.....	215	NOVOLIN N FLEXPEN	
NALOXONE HCL.....	nicotine gum / lozenge.....	70	RELION.....	68
naloxone hcl.....	nicotine patch (nicoderm).....	70	NOVOLIN N RELION.....	68
naltrexone hcl.....	NICOTROL.....	70	NOVOLIN R.....	68
naphazoline /pheniramine	nifedipine er.....		NOVOLIN R FLEXPEN.....	68
drops (naphcon-a).....	nifedipine er osmotic release.....	208	NOVOLIN R FLEXPEN	
naproxen.....	nikki.....	31	RELION.....	68

NOVOLIN R RELION	68	olopatadine hcl	204	OPTICHAMBER DIAMOND-LG MASK	188
NOVOLOG	68	olopatadine rx only	211	OPTICHAMBER DIAMOND-MD MASK	188
NOVOLOG 70/30 FLEXPEN RELION	68	omega-3 fatty acids (fish oil)	25	OPTICHAMBER DIAMOND-SM MASK	188
NOVOLOG FLEXPEN	68	omega-3-acid ethyl esters	75	OPTICHAMBER FACE MASK-LARGE	188
NOVOLOG FLEXPEN RELION	68	omeprazole (prilosec)	228	OPTICHAMBER FACE MASK-MEDIUM	188
NOVOLOG MIX 70/30	68	omeprazole (prilosec) rx only	228	OPTICHAMBER FACE MASK-SMALL	188
NOVOLOG MIX 70/30 FLEXPEN	68	OMNIPOD 5 G6 INTRO (GEN 5)	182	OPTIHALER	188
NOVOLOG MIX 70/30 RELION	68	OMNIPOD 5 G6 PODS (GEN 5)	182	OPVEE	70
NOVOLOG PENFILL	68	OMNIPOD 5 G7 INTRO (GEN 5)	182	ORENCIA	32
NOVOLOG RELION	68	OMNIPOD 5 G7 PODS (GEN 5)	182	ORENCIA CLICKJECT	32
NUBEQA	89	OMNIPOD 5 PACK	182	ORGOVYX	89
NUDEXTA	221	OMNIPOD CLASSIC PDM (GEN 3)	183	ORKAMBI	222,223
NUPLAZID	114	OMNIPOD DASH INTRO (GEN 4)	183	ORSERDU	89
NURTEC	190	OMNIPOD DASH PDM (GEN 4)	183	oseltamivir phosphate	127
nutritional supplements	159	OMNIPOD DASH PODS (GEN 4)	183	OSPHENA	163
nyamyc	150	OMNIPOD DASH PDM (GEN 4)	183	OTEZLA	32
nylia 1/35	140	OMNITROPE	162	oxacillin sodium	215
nystatin	72,150,199	ondansetron	71	OXACILLIN SODIUM IN DEXTROSE	215
NYSTATIN	199	ondansetron hcl	71	oxaprozin	31
nystatin-triamcinolone	150	ONETOUCH ULTRA	159	oxazepam	46
nystop	150	ONETOUCH ULTRA TEST	159	oxcarbazepine	57
O		ONETOUCH VERIO	159	OXERVATE	209
octreotide acetate	165	ONUREG	83	oxybutynin chloride	228
ODEFSEY	123	OPFOLDA	164	oxybutynin chloride er	228
ODOMZO	87	OPILL	142	oxycodone hcl	35
OFEV	224	OPSUMIT	132	oxycodone-acetaminophen	36
OFLOXACIN	167	optical supplies	183	oxymetazoline (afrin)	204
ofloxacin	207	OPTICHAMBER ADVANTAGE-LG MASK	188	OZEMPIC (0.25 OR 0.5 MG/DOSE)	66
OGSIVEO	101,102	OPTICHAMBER ADVANTAGE-MED MASK	188	OZEMPIC (1 MG/DOSE)	66
OJEMDA	102	OPTICHAMBER ADVANTAGE-SM MASK	188	OZEMPIC (2 MG/DOSE)	66
OJJAARA	102	OPTICHAMBER DIAMOND	188	P	
olanzapine	117			pacerone	47
olmesartan medoxomil	78				
olmesartan medoxomil-hctz	80				
olmesartan-amlodipine-hctz	80				
olopatadine	210				

paliperidone er.....	115,116	PEGASYS.....	126	phenylephrine /	
PANRETIN.....	151	PEMAZYRE.....	102	acetaminophen.....	146
pantoprazole sodium.....	228	PENBRAYA.....	230	phenylephrine / bropheniramine /	
paricalcitol.....	164	peniclovir.....	152	dextromethorphan.....	146
paromomycin sulfate.....	25	penicillamine.....	195	phenylephrine / chlorpheniramine	
paroxetine hcl.....	62	penicillin g potassium.....	213	/ dextromethorphan.....	146
paroxetine hcl er.....	62	PENICILLIN G PROCAINE..	213	phenylephrine / chlorpheniramine	
PASER.....	81	PENICILLIN G SODIUM....	213	/ dextromethorphan /	
PAXLOVID (150/100).....	125	PENICILLIN V POTASSIUM.	213	acetaminophen.....	146
PAXLOVID (300/100).....	125	PENTACEL.....	227	phenylephrine /	
pazopanib hcl.....	102	pentamidine isethionate for		dextromethorphan.....	146
PEAK A-I-R FLOW METER.	188	injection solution.....	40	phenylephrine /	
PEAK AIR PEAK FLOW		pentamidine isethionate for		dextromethorphan / guaifenesin /	
METER.....	188	nebulization solution.....	40	acetaminophen.....	146
PEAK FLOW METER		pentoxifylline er.....	172	phenylephrine / doxylamine /	
UNIVERSAL RANG.....	188	perindopril erbumine.....	77	dextromethorphan /	
PEDIARIX.....	226	PERINDOPRIL ERBUMINE 2		acetaminophen.....	146
pediatric multiple vitamins..	202	MG TAB.....	77	phenylephrine / guaifenesin..	146
pediatric multiple vitamins /		PERINDOPRIL ERBUMINE 8		phenylephrine / shark liver /	
fluoride.....	202	MG TAB.....	77	petrolatum (preparation h).....	38
pediatric multiple vitamins /		periogard.....	199	phenytek.....	59
fluoride / iron.....	202	permethrin (nix).....	159	phenytoin.....	60
pediatric multiple vitamins /		permethrin (nix) rx only.....	159	phenytoin infatabs.....	60
iron.....	202	perphenazine.....	119	phenytoin sodium extended...	60
pediatric multiple vitamins /		PERSERIS.....	116	PHOSPHOLINE IODIDE.....	206
minerals.....	202	PERSONAL BEST FULL		phosphorus supplement.....	193
pediatric multiple vitamins /		RANGE.....	188	phytonadione.....	234
vitamin a / vitamin c / vitamin d /		PERSONAL BEST LOW		PIFELTRO.....	123
fluoride.....	202	RANGE.....	188	PIKO 1.....	188
pediatric multivitamin		petrolatum (vaseline).....	215	pilocarpine hcl.....	200,206
combinations.....	202	PFIZERPEN.....	214	pimecrolimus.....	156
PEDIATRIC MULTIVITAMIN		pharmacist choice diclofenac	149	PIMOZIDE.....	221
COMBINATIONS.....	202	phenazopyridine (azo).....	170	pimtrea.....	140
pediatric vitamins.....	202	PHENELZINE SULFATE.....	61	pindolol.....	128
PEDVAX HIB.....	230	phenobarbital.....	176	pioglitazone hcl.....	69
peg 3350-kcl-na bicarb-nacl	178	phenoxybenzamine hcl.....	77	pioglitazone hcl-glimepiride...	64
peg-3350/electrolytes.....	178	phentermine hcl.....	22	pioglitazone hcl-metformin hcl.	64
peg-		phenylephrine (neo-		piperacillin sod-tazobactam	
3350/electrolytes/ascorbat..	178	synephrine).....	204	so.....	214
peg-kcl-nacl-nasulf-na asc-		phenylephrine (sudafed pe)..	204	piperonyl / pyrethrins (rid)....	159
c.....	178				

PIQRAY (200 MG DAILY DOSE).....	102	potassium chloride 20 meq/15ml (10%) solution.....	194	PREMARIN.....	233
PIQRAY (250 MG DAILY DOSE).....	102	potassium chloride 40 meq/15ml (20%) solution.....	194	prenatal vitamin.....	202
PIQRAY (300 MG DAILY DOSE).....	103	potassium chloride crys er.....	194	prenatal vitamin rx only.....	202
pirfenidone.....	224	potassium chloride er.....	194	PRENATAL VITAMIN WITH MINERALS AND FOLIC ACID GREATER THAN 0.8 MG ORAL TABLET.....	202
pirmella 1/35.....	140	potassium chloride in dextrose.....	193	prevalite.....	75
piroxicam.....	31	potassium chloride in nacl 20-0.45 meq/l-% solution.....	193	PREVIDENT 5000 ENAMEL PROTECT.....	199
PLEGRIDY.....	220	potassium chloride in nacl 20-0.9 meq/l-% solution.....	193	PREVIDENT 5000 SENSITIVE.....	199
plenamine.....	205	potassium chloride in nacl 40-0.9 meq/l-% solution.....	193	PREVNAR 20.....	230
PNEUMOVAX 23.....	230	potassium citrate.....	169	PREVYMIS.....	125
POCKET CHAMBER.....	188	potassium citrate / sodium citrate (cytra-3).....	169	PREZCOBIX.....	123
POCKET PEAK FLOW METER.....	189	potassium citrate er.....	170	PREZISTA.....	124
POCKET SPACER.....	189	potassium gluconate.....	194	PRIFTIN.....	81
POCKETPEAK PEAK FLOW METER.....	189	povidone-iodine (betadine).....	121	primaquine phosphate.....	81
PODOFILOX 0.5 % SOLUTION.....	156	povidone-iodine (summers eve).....	233	PRIMAQUINE PHOSPHATE 26.3 (15 BASE) MG TAB.....	81
polyethylene glycol 3350 (miralax).....	178	PRALUENT.....	76	PRIMEAIRE HOLDING CHAMBER.....	189
polyethylene glycol drops.....	205	pramipexole dihydrochloride.....	113	PRIMIDONE.....	57
polymyxin b sulfate.....	44	pramoxine (procto-foam).....	38	PRIORIX.....	231
polymyxin b-trimethoprim.....	208	pramoxine / calamine.....	157	PRIVIGEN.....	212
polysaccharide iron complex.....	175	prasugrel hcl.....	172	PRO COMFORT SPACER ADULT.....	189
polyvinyl alcohol / povidone drops (refresh).....	205	pravastatin sodium.....	76	PRO COMFORT SPACER CHILD.....	189
polyvinyl alcohol drops (hypotears).....	205	praziquantel.....	39	PRO COMFORT SPACER INFANT.....	189
POMALYST.....	90	prazosin hcl.....	78	probenecid.....	171
portia-28.....	140	prednisolone.....	144	PROCARE SPACER/ADULT MASK.....	189
posaconazole.....	73	PREDNISOLONE ACETATE.....	210	PROCARE SPACER/CHILD MASK.....	189
potassium / sodium phosphate.....	193	prednisolone sodium phosphate.....	144	PROCHAMBER VHC.....	189
POTASSIUM CHLORIDE.....	194	PREDNISOLONE SODIUM PHOSPHATE.....	210	prochlorperazine.....	119
potassium chloride 2 meq/ml solution.....	194	PREDNISON.....	144	prochlorperazine maleate.....	119
potassium chloride 20 meq packet.....	194	prednisone.....	144	procto-med hc.....	38
		PREDNISON INTENSOL.....	144	proctosol hc.....	38
		pregabalin.....	57		
		PREHEVBRIO.....	231		

proctozone-hc.....	38	quetiapine fumarate er.....	118	RETACRIT.....	174
progesterone.....	216	quinapril hcl.....	77	RETEVMO.....	103
PROGRAF.....	197	quinidine gluconate er.....	46	REVLIMID.....	195
PROMACTA.....	173	quinidine sulfate.....	46	REXULTI.....	120
promethazine hcl.....	74	QUINIDINE SULFATE 200 MG		REYATAZ.....	124
propafenone hcl.....	47	TAB.....	46	REZLIDHIA.....	103
propafenone hcl er.....	47	QUINIDINE SULFATE 300 MG		REZUROCK.....	196
propranolol hcl.....	128	TAB.....	47	RHOPRESSA.....	209
propranolol hcl er.....	129	quinine sulfate.....	81	RIBAVIRIN 200 MG CAP.....	126
propylthiouracil.....	225	QVAR REDIHALER.....	50	RIBAVIRIN 200 MG TAB.....	126
PROQUAD.....	231	R		riboflavin (vitamin b2).....	235
protriptyline hcl.....	63	RABAVERT.....	231	RIDAURA.....	30
pseudoephedrine (sudafed).....	204	rabeprazole sodium.....	228	rifabutin.....	82
pseudoephedrine /		RADICAVA ORS.....	204	rifampin.....	82
acetaminophen.....	146	RADICAVA ORS STARTER		riluzole.....	205
pseudoephedrine /		KIT.....	205	RIMANTADINE HCL.....	127
guaifenesin.....	146	raloxifene hcl.....	163	ringers.....	193
pseudoephedrine /		ramelteon.....	177	ringers irrigation.....	197
ibuprofen.....	146	ramipril.....	77	RINVOQ.....	29
psyllium (metamucil).....	178	ranolazine er.....	44	risedronate sodium.....	162
PULMOZYME.....	223	rasagiline mesylate.....	113	risperidone.....	116
PURE COMFORT FLOW		REBIF.....	220	risperidone microspheres er..	116
METER ADULT.....	189	REBIF REBIDOSE.....	220	RITEFLO.....	189
PURE COMFORT FLOW		REBIF REBIDOSE TITRATION		ritonavir.....	124
METER CHILD.....	189	PACK.....	220	rivastigmine.....	217
PURE COMFORT SPACER		REBIF TITRATION PACK.....	220	rivastigmine tartrate.....	217
CHAMBER.....	189	reclipsen.....	140	RIVIVE.....	70
PURIXAN.....	83	RECOMBIVAX HB.....	232	rizatriptan benzoate.....	191
pyrazinamide.....	82	REGRANEX.....	159	ROCKLATAN.....	209
pyridostigmine bromide.....	81	RELISTOR.....	169	roflumilast.....	49
pyridostigmine bromide er.....	81	RELTONE.....	167	ropinirole hcl.....	113
pyridoxine (vitamin b6).....	205	RENACIDIN.....	170	ropinirole hcl er.....	113
pyrimethamine.....	81	repaglinide.....	69	rosuvastatin calcium.....	76
Q		REPATHA.....	76	ROTARIX.....	232
qc diclofenac sodium.....	149	REPATHA PUSHTRONEX		ROTATEQ.....	232
QINLOCK.....	103	SYSTEM.....	76	roweepra.....	58
QUADRACEL.....	227	REPATHA SURECLICK.....	76	ROZLYTREK.....	104
Quadrivalent Influenza		respirtatory therapy supplies.....	189	RUBRACA.....	104
Vaccines.....	231	RESTASIS.....	208	RUCONEST.....	172
quetiapine fumarate.....	118	RESTASIS MULTIDOSE.....	208	rufinamide.....	58
				RUKOBIA.....	124

RYBELSUS	67	skin oils	158	sotalol hcl	129
RYDAPT	104	SKYRIZI	152,168	sotalol hcl (af)	129
RYTARY	113	SKYRIZI PEN	152	SPIRIVA HANDIHALER	49
S		SKYTROFA	162	SPIRIVA RESPIMAT	49
sajazir	171	SLYND	142	spironolactone	161
salicylic acid	157	sm arthritis pain	149	spironolactone-hctz	160
saline bacteriostatic	215	sod fluoride-potassium		sprintec 28	140
sam-e supplement	25	nitrate	199	SPRITAM	58
SANTYL	156	sodium bicarbonate	39	SPRYCEL	105
sapropterin dihydrochloride	164	sodium chloride	158,170	sps	198
SAXENDA	22	sodium chloride		sronyx	140
SCEMBLIX	104,105	bacteriostatic	215	ssd	153
scopolamine	71	sodium chloride eye products		STAMARIL	232
SECUADO	118	(muro 128)	211	STELARA	152
selegiline hcl	113	sodium chloride nasal spray	147	sterile water for injection	215
selenium	195	sodium chloride rx only	195	STIOLTO RESPIMAT	51
selenium sulfide	152	sodium citrate	170	STIVARGA	105
SELZENTRY	124	sodium fluoride	193,199	STREPTOMYCIN SULFATE	25
senna / docusate sodium (peri-		sodium fluoride 5000 enamel	199	STRIBILD	124
colace)	178	sodium fluoride 5000 plus	199	STRIVE DUAL ZONE PEAK	
sennosides	179	sodium fluoride 5000 ppm	200	FLOW MTR	189
sertraline hcl	62	sodium fluoride 5000		STRIVERDI RESPIMAT	51
setlakin	140	sensitive	200	SUCRAID	160
sevelamer carbonate	169	sodium fluoride chewable		sucrafate	227
sf	199	tablet	193	SUFLAVE	178
sf 5000 plus	199	SODIUM OXYBATE	216	SULFACETAMIDE SODIUM	208
sharobel	142	sodium phenylbutyrate	164	sulfacetamide sodium	208
SHINGRIX	232	sodium polystyrene		sulfacetamide sodium (acne)	148
SIGNIFOR	165	sulfonate	198	SULFACETAMIDE-	
sildenafil citrate	132	SOFOSBUVIR-		PREDNISOLONE	210
silodosin	170	VELPATASVIR	126	SULFADIAZINE	224
silver sulfadiazine	153	solifenacin succinate	228	sulfamethoxazole-trimethoprim	41
simethicone (mylicon)	167	SOLQUA	64	SULFAMYLON	153
SIMPONI	29	SOLTAMOX	89	sulfasalazine	168
simvastatin	76	SOLU-CORTEF	144	sulfatrim pediatric	41
sirolimus	197	SOLU-MEDROL	144	sulindac	32
SIRTURO	82	SOLU-MEDROL (PF)	144	sumatriptan	191
SIVEXTRO	44	SOMAVERT	162	sumatriptan succinate	191
SKIN OIL (JOHNSONS BABY		sorafenib tosylate	105	sumatriptan succinate refill	191
OIL)	158	sorbitol solution	178	sumatriptan-naproxen sodium	190
		sorine	129	sunitinib malate	105

SUNLENCA	124	TEMIXYS	124	TIBSOVO	107
SUNOSI	23	temozolomide	82	TICOVAC	232
syeda	140	TENIVAC	227	TIGECYCLINE	224
SYMJEPI	234	tenofovir disoproxil fumarate	124	tigecycline 50 mg recon soln	224
SYMPAZAN	54	TEPMETKO	106	tilia fe	140
SYMTUZA	124	terazosin hcl	78	timolol maleate	129,206
SYNJARDY	65	terbinafine (lamisil)	150	tinidazole	40
SYNJARDY XR	65	terbinafine hcl	72	tioconazole (vagistat)	233
SYNRIBO	110	terbutaline sulfate	51	tiopronin	170
SYNTHROID	226	terconazole	233	tis-u-sol	197
		teriflunomide	221	TIVICAY	124
		teriparatide	162	TIVICAY PD	124
T		TERIPARATIDE		tizanidine hcl	203
TABLOID	83	(RECOMBINANT)	162	tobramycin	26,208
TABRECTA	105	testosterone	37	TOBRAMYCIN SULFATE	26
tacrolimus	156,197	TESTOSTERONE	37	tobramycin-dexamethasone	210
tadalafil (pah)	132	TESTOSTERONE		tolcapone	112
TAFINLAR	105,106	CYPIONATE	38	tolnaftate (tinactin)	150
TAGRISSO	86	testosterone cypionate 100		tolterodine tartrate	229
TALTZ	152	mg/ml solution	37	tolterodine tartrate er	229
TALZENNA	106	testosterone cypionate 200		topiramate	58
tamoxifen citrate	90	mg/ml solution	38	toremifene citrate	90
tamsulosin hcl	170	TESTOSTERONE		torpenz	107
tarina 24 fe	140	ENANTHATE	38	torse mide	161
tarina fe 1/20	140	TETANUS-DIPHThERIA		TOUJEO MAX SOLOSTAR	68
tarina fe 1/20 eq	140	TOXOIDS TD	227	TOUJEO SOLOSTAR	68
taron forte	175	tetrabenazine	218	TRADJENTA	66
TASIGNA	106	tetracaine hcl	209	tramadol hcl	35
tasimelteon	177	tetracycline hcl	225	tramadol-acetaminophen	36
tazarotene	152	tetrahydrazoline drops		trandolapril	77
TAZICEF	136	(visine)	208	tranexamic acid	176
tazicef 1 gm recon soln	136	THALOMID	196	tranylcypro mine sulfate	61
tazicef 2 gm recon soln	136	theophylline	52	travoprost (bak free)	211
taztia xt	130	theophylline er	52	trazodone hcl	62
TAZVERIK	106	thiamine (vitamin b1)	235	TRECATOR	82
TDVAX	227	thioridazine hcl	119	TRELEGY ELLIPTA	51
TEFLARO	136	thiothixene	120	TRELSTAR MIXJECT	90
telmisartan	78	throat lozenge	200	tretinoin	110,148
TELMISARTAN-		throat lozenges	200	tri femynor	140
AMLODIPINE	80	tiadylt er	130	tri-estarylla	140
telmisartan-hctz	80	tiagabine hcl	59	tri-legest fe	140
temazepam	176				

tri-lo-estarylla	140	TWINRIX	232	VENCLEXTA	85
tri-lo-sprintec	140	TYBLUME	141	VENCLEXTA STARTING	
tri-mili	140	tydemy	141	PACK	85
tri-sprintec	140	TYPHIM VI	230	venlafaxine hcl	63
tri-vylibra	141			venlafaxine hcl er	63
triamcinolone		U		VENTOLIN HFA	51
acetonide	155,200	UDENYCA	174	verapamil hcl	130
triamcinolone acetonide		unithroid	226	verapamil hcl er	131
(nasacort)	204	UPTRAVI	133	VERKAZIA	208
triamterene-hctz	160	urea 10% and 20% (carmol)	156	VERQUVO	134
triderm	155	ursodiol	167	VERSACLOZ	118
trientine hcl	195	UZEDY	116,117	VERZENIO	107
trifluoperazine hcl	119	V		vestura	141
TRIFLURIDINE	208	valacyclovir hcl	127	VICTOZA	67
trihexyphenidyl hcl	111	VALCHLOR	151	vienva	141
TRIHXYPHENIDYL HCL 0.4		valganciclovir hcl	125	vigabatrin	59
MG/ML SOLUTION	111	valproic acid	60	vigadrone	59
TRIJARDY XR	65	valsartan	78	vigpoder	59
TRIKAFTA	223	valsartan-hydrochlorothiazide	80	VIJOICE	197,198
TRIMETHOPRIM	40	VALTOCO 10 MG DOSE	54	vilazodone hcl	62
trimethoprim	40	VALTOCO 15 MG DOSE	55	VIRACEPT	125
trimipramine maleate	63	VALTOCO 20 MG DOSE	55	VIREAD	125
TRINTELLIX	62	VALTOCO 5 MG DOSE	55	virtussin a/c	146
TRIUMEQ	124	vancomycin hcl	42	virtussin ac w/alc	146
TRIUMEQ PD	124	VANCOMYCIN HCL	42	vitamin a	156
trivora (28)	141	VANCOMYCIN HCL IN NAACL	42	vitamin a / vitamin c / vitamin	
TRIZIVIR	125	VANDAZOLE	233	d	203
TROGARZO	125	VANFLYTA	107	vitamin a / vitamin d	156
trolamine salicylate		VAQTA	232	vitamin b complex	200
(myoflex)	157	varenicline tartrate	221	vitamin b complex / biotin / folic	
tropium chloride	229	varenicline tartrate (starter)	221	acid	201
tropium chloride er	229	varenicline tartrate(continue)	221	vitamin b complex / folic acid	201
TRULICITY	67	VARIVAX	232	vitamin b complex / iron	201
TRUMENBA	230	VARIZIG	212	vitamin b complex / minerals	201
TRUQAP	107	VARUBI (180 MG DOSE)	72	vitamin b complex / vitamin c	200
TRUZONE PEAK FLOW		VAXCHORA	230	vitamin b complex / vitamin c /	
METER	189	VAXNEUVANCE	230	biotin / minerals / folic acid	201
TUKYSA	85	VELIVET	141	vitamin b complex / vitamin c /	
tulana	143	VELTASSA	198	calcium	200
TURALIO	107	VEMLIDY	126	vitamin b complex / vitamin c /	
turqoz	141			folic acid	201

vitamin b complex / vitamin c / vitamin e / folic acid.....	201	W	XPOVIO (60 MG TWICE WEEKLY).....	91	
vitamin b complex / vitamin c / vitamin e / zinc.....	200	warfarin sodium.....	52	XPOVIO (80 MG ONCE WEEKLY).....	92
vitamin b complex / vitamin c / zinc / folic acid.....	201	WATCHHALER.....	190	XPOVIO (80 MG TWICE WEEKLY).....	92
vitamin b complex combinations.....	200	WEGOVI.....	22,23	WELIREG.....	90
VITAMIN B COMPLEX COMBINATIONS.....	201	witch hazel.....	158	XTANDI.....	90
vitamin c.....	235	wixela inhub.....	52	xulane.....	141
vitamin c / iron (vitron-c).....	175	wound care supplies.....	159	XYWAV.....	216
vitamin d.....	234	wymzya fe.....	141	Y	
vitamin d / vitamin k.....	203	X		yargesa.....	173
vitamin e.....	234	XALKORI.....	108,109	YF-VAX.....	233
vitamin k1.....	234	XARELTO.....	52	yuvafem.....	233
vitamins / lipotropics.....	203	XARELTO STARTER PACK.....	52	Z	
VITRAKVI.....	108	XATMEP.....	83	zafemy.....	141
VIVITROL.....	71	XCOPRI.....	59	zafirlukast.....	49
VIZIMPRO.....	86	XCOPRI (250 MG DAILY DOSE).....	58	zaleplon.....	176
VONJO.....	108	XCOPRI (350 MG DAILY DOSE).....	58	ZARXIO.....	174
voriconazole.....	73	XDEMVI.....	208	ZEJULA.....	109
voriconazole 200 mg recon soln.....	73	XELJANZ.....	29,30	ZELBORAF.....	109
voriconazole 40 mg/ml recon susp.....	73	XELJANZ XR.....	30	zenatane.....	148
VORTEX HOLD CHMBR/MASK/CHILD.....	189	XERMELO.....	169	ZEPBOUND.....	23
VORTEX HOLD CHMBR/MASK/TODDLER.....	189	XGEVA.....	162	zidovudine.....	125
VORTEX HOLDING CHAMBER/MASK.....	190	XIFAXAN.....	40	ZIEXTENZO.....	174
VORTEX VALVED HOLDING CHAMBER.....	190	XIIDRA.....	209	ZIMHI.....	71
VOSEVI.....	127	XOFLUZA (40 MG DOSE).....	127	zinc.....	195
VRAYLAR.....	114	XOFLUZA (80 MG DOSE).....	127	zinc gluconate.....	195
VUMERITY.....	221	XOLAIR.....	48	zinc oxide (desitin).....	158
vyfemla.....	141	XOSPATA.....	109	zinc sulfate.....	195
vylibra.....	141	XPOVIO (100 MG ONCE WEEKLY).....	91	ziprasidone hcl.....	114
VYNDAMAX.....	133	XPOVIO (40 MG ONCE WEEKLY).....	91	ziprasidone mesylate.....	114
		XPOVIO (60 MG ONCE WEEKLY).....	91	ZIRGAN.....	208
				ZOLINZA.....	109
				zolmitriptan.....	191
				zolpidem tartrate.....	176
				zolpidem tartrate er.....	176
				zomig.....	191
				ZONISADE.....	58
				zonisamide.....	58

zovia 1/35 (28).....	141
zovia 1/35e (28).....	141
ZTALMY.....	58
ZURZUVAE.....	61
ZYDELIG.....	109
ZYKADIA.....	110
ZYPREXA RELPREVV.....	118
ZYVOX.....	44

Tus qauv tshuaj no tau raug hloov pauv rau hnuv 08/20/2024.

Cov Lus Qhia Tseem Ceeb Txog Qhov Uas Koj Them rau Cov Koob Tshuaj Tiv Thaiv Kab Mob – Qee cov koob tshuaj tiv thaiv kab mob yuav muab xam tias yog cov txiaj ntsig kev pab rau fab kev kho mob. Lwm cov tshuaj txhaj tiv thaiv yog suav tias yog cov tshuaj Part D. Peb txoj phiaj xwm duav roos rau cov tshuaj txhaj tiv thaiv kab mob huav Part D feem ntau uas koj yuav tsis tau them dab tsi lawm.

Yog xav paub ntau ntawv qhia paub tsis ntev los no ntau ntxiv los sis muaj lwm yam lus nug, tiv tauj peb tau ntawm UCare's MSHO Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-6868 los sis 1-866-280-7202 (qhov no yog hu dawb xwb), UCare Connect + Medicare Lub Chaw Muab Kev Pab Cuam Tus Qhua ntawm 612-676-3310 los sis 1-855-260-9707 (tus xov tooj no yog hu dawb). TTY 612-676-6810 los sis 1-800-688-2534 (qhov no yog hu dawb xwb). 8 teev sawv ntxov – 8 teev tsaus ntuj, xya hnuv hauv ib lub lim tiam. Los sis mus saib peb ntawm **ucare.org**.



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