

2024

Liiska dawooyinka la daboolay (Rasmiga ah)

- UCare MSHO
- UCare Connect + Medicare

Hordhaca

Dukumiintiga waxaa loo yaqaana *Liiska dawooyinka la daboolay* (sidoo kale loo yaqaan Liiska Dawooyinka). Waxay kuu sheegtaa kuwa ay yihiin dawooyinka la qoray iyo dawooyinka iyagoon la qorin la iibsada (OTC) ee ay daboolaan UCare MSHO iyo UCare Connect + Medicare.

Macluumaadkayaga xidhiidhka, oo ay la socoto taariikhda u dambaysay ee la cusboonaysiiyay Liiska Dawada, waxay ka muuqataa boggaga jaldiga xaga hore iyo xaga dambe. Shuruudaha muhiimka ah iyo qeexidooda waxay ka muuqdaan cutubka u dambeeya ee *Buug yaraha*.

Liiska rasmiga ah waxaa la cusboonaysiiyay 08/20/2024.

Farriin muhiim ah oo ku saabsan waxa aad ka bixiso tallaalada: Tallaalada qaar ayaa loo arkaa gunnooyinka caafimaad. Tallaalka kale waxaa loga fekeraa dawooyinka Qaybta D. Qorshahayagu waxa uu daboolaa badanka tallaalada Qaybta D oo aan kharash kugu joogin adiga.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macmiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo [ucare.org](https://www.ucare.org).

H2456_H5937_1549_082023_C
Lambarka aqoonsiga 24263, Nooca 16



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

Attention. If you need free help interpreting this document, call the above number.

ያስተውሉ፡ ካለምንም ክፍያ ይህንን ዶኩመንት የሚተረጎምሎ አስተርጓሚ ከፈለጉ ከላይ ወደተጻፈው የስልክ ቁጥር ይደውሉ።

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

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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 ntawv no pub dawb, ces hu rau tus najnpawb xov tooj saum toj no.

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

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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 pagsasaling-wika upang masagot ang anumang mga katanungan ninyo hinggil sa aming planong pangkalusugan o panggamot. Upang makakuha ng tagasaling-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 Italiano vi fornirà l'assistenza necessaria. È un servizio gratuito.

Portuguese: Disponimos 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。

Jadwalka Tasmada

A. Faah reeb.....	10
B. Su'aalaha inta badan la isweydiyo (FAQ)	10
B1. Dawooyinkee la qoro ayaa ku jira Liiska Dawooyinka La daboolo? (Waxaanu ugu yeedhnaa Liiska Dawooyinka la Daboolo Dawooyinka "Liiska Dawada" marka la soo gaabiyo)	10
B2. Miyaa liiska Dawadu weligii isbeddelaa?	11
B3. Maxaa dhacaya marka ay jirto isbeddelka Liiska Dawada?	12
B4. Ma jiraan wax xayiraado ama xaddidaado ah oo ku saabsan caymiska dawada ama tallaabooyinka loo baahan yahay qaadashada daawooyinka qaarkood?	13
B5. Sideen ku ogaan doonaa in dawada aan rabo ay leedahay xad ama haddii ay jiraan wax tallaabo ah oo loo baahan yahay si aan u helo daawada?.	14
B6. Maxaa dhacaya haddii MSHO ee UCare iyo UCare Connect + Medicare ay beddelaan sharciyadooda ku saabsan sida ay u daboolaan qaar dawooyinka ah (tusaale ahaan, oggolaanshaha hore, xadadka tirada, iyo/ama xayiraadaha tallaabada daawaynta)?	14
B7. Sideen ku heli karaa dawada ku jirta Liiska Dawada?	14
B8. Bal ka waran haddii dawada aan doonayo inaan qaato aanay ku jirin Liiska Dawada?	14
B9. Kawaran haddii aan ahay xubin cusub oo MSHO ee UCare ama UCare Connect + xubin Medicare oo aanan ka heli karin daawadayda Liiska Dawooyinka ama aan dhibaato kala kulmo helitaanka daawadayda?	15
B10. Ma codsan karaa ka reebis si aan u daboolo daawadayda?	16
B11. Sideen u codsan karaa reebitaan?	16
B12. Intee ayay qaadnaysaa in la helo ka reebitaanka?	16
B13. Waa maxay dawooyinka kimikada?	17
B14. Waa maxay dawooyinka iyadoon la qorin la iibsado?	17
B15. Miyay MSHO ee UCare iyo UCare Connect + Medicare daboolaan dawo aheyn kuwa aan laga iibsan Karin banaanka?	17
B16. Miyay MSHO ee UCare iyo UCare Connect + Medicare daboolaan saadka xiliga dheer ee dawo qorida	17
B17. Dawo qorida guriyayga ma la iigu soo dirayaa iyadoo ka imanaysa farmasiiga deegaanka?	17
B18. Waa maxay kharashkayga la wadaago?.	18
C. Muuqaalka guud ee Liiska Dawooyinka La daboolo	18
C1. Liiska Dawooyinka iyadoo loo eegayo Nooca Dawooyinka	19

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeega Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo **ucare.org**.

Jadwalka Tasmada

D. Tasmada Dawooyinka la daboolo	236
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Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo **ucare.org**.

A. Afeef

Kani waa liiska daawooyinka ay xubnuhu ka heli karaan MSHO ee UCare iyo UCare Connect + Medicare.

- MSHO ee UCare iyo UCare Connect + Medicare waa qorshayaal caafimaad oo qandaraas kula jira barnaamijka Medicare iyo Caawimaada Caafimaadka Minnesota (Medicaid) labadaba si ay u bixiyaan faa'idooyinka labada barnaamij isdiiwaangeliyaasha. Diiwaangelinta MSHO ee UCare Connect + Medicare waxa uu ku xidhanyahay dib-u cusboonaysiinta qandaraaska.
- *Liiska Daawooyinka la Daboolayo*/ama farmashiyaha iyo shabakadaha bixiyayaasha ayaa isbeddeli kara sanadka oo dhan.
- Faa'idooyinka iyo/ama lacag-bixinta ayaa isbeddeli kara Janaayo 1 ee sanad kasta.
- Waxaad mar walba ka eegi kartaa *Liiska u dambeeyay ee la cusbooneysiiday ee dawooyinka aanu Daboolno* onleen barta ucare.org ama ka soo wac Adeegyada Macmiilka lambarka ku qoran hoosta boggan.
- Waxaad ku heli kartaa dhokumentigan oo qaabab kale ah oo bilaash ah, sida, daabacaad wayn, qoraalka indhoolaha, ama maqal.
- Si aad u samayso ama aad u bedesho codsi joogto ah si aad u hesho dukumeentigan, hadda iyo mustaqbalka, luqad aan Ingiriisi ahayn ama qaab kale, wac Adeegga Macmiilka lambarka hoose ee boggan.

B. Su'aalaha inta badan la is waydiiyo(FAQ)

Ka hel jawaabaha halkan su'aalaha badanka la is waydiiyo ee aad qabto ee *ku saabsan Liiska Dawooyinka La daboolo*. Waxaad akhrin kartaa dhammaan Su'aalaha badanka la isweydiiyo si aad wax badan u ogaato ama raadi su'aal iyo jawaab.

B1. Dawooyinkee la qoro ayaa ku jira *Liiska Dawooyinka La daboolo*? (Waxaanu ugu yeedhnaa *Liiska Dawooyinka la Daboolo "Liiska Dawada" marka la soo gaabiyo*)

Daawooyinka ku jira *Liiska Dawooyinka La daboolo* ee ka billaabma Qaybta C waa daawooyinka ay daboolaan UCare MSHO keeda iyo UCare Connect + Medicare. Dawooyinka waxaa laga heli karaa farmasiyada ku jira shabakadayada. Farmashiye wuxuu ku jiraa shabakadayada haddii aanu kula heshiinay inay nala shaqeeyaan oo ay ku siiyaan adeegyo. Waxaan ugu yeedhnaa farmasiyadan sida "farmasiyada shabakada." Dawo qorida dawooyinka ku jira Liiskan Dawooyinka ay daboolaan UCare's MSHO iyo UCare Connect + Medicare.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macmiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo ucare.org.

- MSHO ee UCare iyo UCare Connect + Medicare ayaa dabooli doona dhammaan daawooyinka caafimaad ahaan lagama maarmaanka u ah ee ku jira Liiska Daawooyinka hadii:
 - dhakhtarkaaga ama daawo qore kale sheego inaad u baahan tahay si aad u fiicnaato ama aad caafimaad u hesho, iyo
 - MSHO ee UCare iyo UCare Connect + Medicare aqbalaan in dawada caafimaad ahaan ay adiga lama huraan kuu tahay, iyo
 - aad daawada lagu qoro ka qaadato farmashiyaha shabakada UCare ee MSHO iyo UCare Connect + Medicare.
- Xaaladaha qaarkood, waa inaad samayso shay ka hor inta aanad helin dawada. Ka eeg Qaybta B4 wixii macluumaad dheeraad ah.

Waxaad sidoo kale heli ka kartaa liiska u dambeeyay ee dawooyinka aanu ku daboolno mareegtayada **ucare.org** ama soo wac Adeegyada Macmiilka lambarka ku qoran hoosta boggan.

B2. Miyaa liiska Dawadu weligii isbeddelaa?

Haa, iyo UCare's MSHO iyo UCare Connect + Medicare waa inay raacaan sharciyada Medicare iyo Kaalmada Dawada marka ay isbeddelo samaynayaan. Waxa laga yaabaa in aan ku daro ama ka saarno dawooyinka ku jira Liiska Dawooyinka sanadka gudihiisa.

Waxaanu sidoo kale beddeli karnaa sharciyadayada ku saabsan dawooyinka. Tusaale ahaan, waxaanu karnaa:

- Go'aamisaa inaad u baahan tahay ama aadan u baahnayn ogolaansho ka hor daawada. (Oggolaanshaha hore waa oggolaansho ka socda UCare MSHO ama UCare Connect + Medicare ka hor inta aadan qaadan daawo.)
- Ku dar ama beddel qaddarka daawada aad heli karto (oo loo yaqaan xaddidnaanta tirada.)
- Ku dar ama beddel tallaabada xayiraadaha daawaynta ee dawada. (Daawaynta tallaabada macnaheedu waxa weeye waa inaad isku daydaa hal dawo ka hor inta aanaan daboolid dawo kale.)

Wixii macluumaad dheeraad ah oo ku saabsan shuruucda dawooyinka, tixraac su'aasha B4.

Haddii aad qaadanayso dawada lagu daboolay **bilowga** sanadka, guud ahaan waxaanu ka saari doonaa ama beddeli doonaa daboolida dawadaas **muddada ka hadhay sanadka** iyaddoo:

- dawo cusub, oo jaban ay timaada suuqa oo u shaqaysa siibada dawada ku qoran Liiska Dawada hadda, **ama**
- waxaanu ogaanay in dawadu badbaado aanay ahayn, **ama**

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo **ucare.org**.

- dawada waxaa laga saaray suuqa.

Su'aalaha B3 iyo B6 ee hoose waxay hayaan macluumaad dheeraad ah oo ku saabsan waxa dhacaya marka Liiska Dawooyinka la beddelo.

- Waxaad had iyo jeer ka hubin kartaa UCare MSHO iyo UCare Connect + Liiska Dawooyinka ugu casrisan ee Medicare onleen barta [ucare.org](https://www.ucare.org).
- Waxaad sidoo kale soo wici kartaa Adeega Macmiilka lambarka ku qoran xaga hoose ee boggan si loo hubiyo Liiska Dawada hadda.

B3. Maxaa dhacaya marka ay jirto isbeddelka Liiska Dawada?

Isbeddela qaarkood Liiska Dawu waxa uu dhici doonaa **isla markaaba**. Tusaale ahaan:

- **Dawada magaca kimikaad ee cusub waxaa la heli karaa.** Wakhtiyada qaarkood dawada magaca kimikaad leh ee dawada timaada suuqa oo u shaqaysa siiba dawada magaca summada sida ku qoran Liiska Dawada hadda, Marka ay taasi dhacdo, waxa laga yaabaa in aan meesha ka saarno dawada magaca leh oo aan ku darno daawada bilaa magaca shirkada ah, laakiin kharashkaaga daawada cusub waxa uu ahaan doonaa sidii hore ama wuu yaraan doonaa. Marka aanu ku darno daawada bilaa magaca shirkada ah, waxaanu sido kale go'aamin doonaa si uu u lahaad summada magaca dawada ku jirta liiska laakiin beddelka sharciyada daboolideeda ama xadidnaanta.
- **Daawo suuqa waa laga saaraa.** Haddii Maamulka Cuntadda iyo Dawada (FDA) uu sheego dawooyinka aad qaadanayso inaanu badbaado ahayn ama warshadeeyaha dawadu uu dawada suuqa ka saaro, waxaanu ka saari doonaa Liiska Dawada. Haddii aad qaadanayso dawo, waxaanu ku ogaysiin doonaa. Xubnuhu waa inay sidoo kale la xidhiidhaan dhakhtarkooda ama farmashiyaha wixii macluumaad dheeraad ah.

Waxaanu samayn karnaa isbeddelo kale oo saammeeya dawooyinka aad qaadato. Waanu kuu sheegi doonaa wakhti hore waxa ku saabsan isbeddeladan kale ee Liiska Dawooyinka. Isbeddelladan waxay dhici karaan haddii:

- FDA ay bixiso hagitaanka cusub ama ay jiraan hagitaanada caafimaad ee cusub ee ku saabsan dawada.
- Waxaanu ku darnaa dawada leh magaca kimikaad ee aan ku cusbayn suuqa iyo
 - Beddel dawada caanka ah ee hadda ku jirta Liiska Dawooyinka **ama**
 - Beddel xeerarka caymiska ama xadka dawada magaca summada.

Markay isbadeladu dhacaan, waxaan

- U sheeg ugu yaraan 30 maalmood ka hor inta aanaan isbeddelka ku samayn Liiska Dawooyinka **ama**
- Ogaysiin doonaa 30-maalmood oo dawada ah kadib markaad codsato buuxin.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeega Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeega Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo [ucare.org](https://www.ucare.org).

Tani waxay ku siin doontaa wakhti aad kula hadasho dhakhtarkaaga ama dawo qore kale. Waxay kaa caawin karaan inaad go'aan gaadho:

- Haddii ay jiraan dawo la mid ah oo ku jirta Liiska Dawada aad qaadan karto beddelkeeda ama
- Haddii la waydiinayo ka reebida isbeddeladan. Si aad u ogaato wax badan oo ku saabsan ka reebida, tixraac su'aalaha B10-B12.

B4. Ma jiraan wax xaddidaad ama xaddidaad ah oo ku saabsan caymiska dawada ama ficillada loo baahan yahay qaadashada daawooyinka qaarkood?

Haa, daawooyinka qaarkood waxay leeyihiin xeerar caymis ama waxay leeyihiin xadidnaan qadarka aad heli karto. Xaaladaha qaarkood adiga ama dhakhtarkaaga ama dhakhtarka kale ee dawada qora waa inuu sameeyaa shay ka hor inta aanad helin dawada. Tusaale ahaan:

- **Oggolaanshaha Hore:** Daawooyinka qaar, adiga ama dhakhtarkaaga, ama dawo qore kale waa inuu helaa ogolaanshaha UCare's MSHO ama UCare Connect + Medicare ka hor intaanad dib u qaadan dawada lagu qoray.
- **Xadadka Tirada:** Wakhtiyada qaarkood UCare MSHO iyo UCare UCare Connect + Medicare waxay xadidaan qaddarka dawada aad heli karto.
- **Tallaabada Daawaynta:** Mararka qaarkood UCare's MSHO iyo UCare Connect + Medicare waxay kaaga baahan yihiin inaad sameyso tallaabada daawaynta. Tani waxay la macno tahay inaad iskugu daydo daawooyinka si gaar u ah xaaladdaada caafimaad. Waxaa laga yaabaa inaad isku daydo hal daawo ka hor inta aanan daboolin daawo kale. Haddii dhakhtarkaagu uu u malaynayo dawooyinka koowaad in aanay adiga kugu habboonayn, markaa waxaanu dabooli doonnaa tan labaad.
- **Tilmaanta ku salaysan daboolida:** Haddii UCare MSHO iyo UCare Connect + Medicare ay daboolaan dawada keliya xaalada caafimaadka qaarkood, si cad waxaanu u aqoonsanaa iyadu inay ku jirto Liiska Dawada oo ay la socdaan xaaladaha dawooyinka gaarka ah ee la daboolo.

Waxaad ku ogaan kartaa haddii daawadaadu leedahay wax shuruudo dheeraad ah ama xaddidaad adoo eegaya jadwalka Qaybta C1. Waxaad sidoo kale ka heli kartaa macluumaad dheeraad ah adigoo booqanaya websaytkayaga ucare.org. Waxaan soo gelinay dhokumentiyoy onlayn ah oo sharaxaya oggolaanshahayaga hore iyo xayiradaadaha tallaabada daawaynta. Waxaad sidoo kale waydiisan kartaa in lagu soo diro koobi.

Waxaad waydiisan kartaa ka reebida xadadkan. Tani waxay ku siin doontaa wakhti aad kula hadasho dhakhtarkaaga ama dawo qore kale. Waxay kaa caawin karaan inaad go'aansato haddii ay jirto daawo la mid ah oo ku jirta Liiska Dawooyinka oo aad qaadan karto beddelkeeda ama inaad weydiisato in lagaa dhaafo. Fadlan u tixraac su'aalaha B10-B12 wixii macluumaad dheeraad ah ee ku saabsan ka reebanaanta.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo ucare.org.

B5. Sideed ku ogaan doontaa in dawada aad rabto ay leedahay xad ama haddii ay jiraan wax talaabo ah loo baahan yahay si loo helo daawada?

Jadwalka Liiska Daawooyinka ee Xaaladda Dawada gudaha qaybta C1 waxay leedahay khaanad lagu calaamadeeyay "Ficilada lagama maarmaanka ah, xayiraadaha, ama xadadka isticmaalka."

B6. Maxaa dhacaya haddii UCare's MSHO iyo UCare Connect + Medicare ay beddelaan sharciyadooda ku saabsan sida ay u daboolaan qaar dawooyinka ah (tusaale ahaan, oggolaanshaha hore, xadadka tirada, iyo/ama xayiraadaha tallaabada daawaynta)?

Xaaladaha qaarkood, waanu kuu sii sheegi doonaa haddii aan ku darno ama beddelno oggolaanshaha hore, xadka tirada, iyo/ama xadidaadaha daawaynta tillaabada ee daawada. Aad su'aasha B3 si aad u hesho macluumaad dheeraad ah oo ku saabsan ogeysiiskan hore iyo xaaladaha laga yaabo inayna hore kuugu sheegi karin marka sharciyadayada ku saabsan daawooyinka ku jira Liiska Dawooyinka ay isbeddelaan.

B7. Sideen ku heli karaa dawada ku jirta Liiska Dawada?

Waxaa jira laba siyaabood oo lagu helo daawo:

- Waxaad ku raadin kartaa alifbeeto ahaan magaca daawada, *ama*
- Waxaad ku raadin kartaa nooca daawada.

Si aad u raadiso alifbeeto ahaan, u gudub Tasmada qaybta Daawooyinka la Daboolay. Waxaad ka heli kartaa boga 236. Tasmada daawooyinka la daboolay waa liis alifbeeta ah ee dhamaan daawooyinka lagu daray Liiska Dawooyinka. Magaca summadaha leh iyo dawooyinka magaca kimikaad waxay ku taxan yihiin tasmada.

Si aad ugu raadiso nooca dawada, ka hel qaybta ku calaamadsan "Liiska Dawooyinka ee Nooca Dawada" gudaha Qaybta C1. Daawooyinka ku jira qaybtan waxa loo qaybiyaa qaybo iyadoo la fiirinayo noocooda. Tusaale ahaan, haddii aad daawo u qaadanayso dhanjafka, waa inaad eegtaa qaybta "Waxyaabaha ka hortaga dhanjafka". Halkaas ayaa ah meesha aad ka heli doonto dawooyinka daaweeya xanuunka dhanjafka.

B8. Bal ka waran haddii dawada aan doonayo inaan qaato aanay ku jirin Liiska Dawada?

Haddii aad ka heli waydo dawadaada Liiska Dawooyinka, ka wac Adeegga Macmiilka lambarka ku yaal dhanka hoose ee boggan oo weydii. Haddii aad ogaato in MSHO ee UCare iyo UCare Connect + Medicare aysan dabooli doonin daawada, waxaad samayn kartaa mid ka mid ah waxyaalahan:

- Weydii Adeegga Macmiilka liiska daawooyinka sida midka aad rabto inaad qaadato. Kadibna tus liiska dhakhtarkaaga ama daawo qore kale. Waxay kuu qori karaan daawo ku jirta Liiska Daawooyinka taas oo ah sida mida aad rabto inaad qaadato.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macmiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo [ucare.org](https://www.ucare.org).

ama

- Waxaad waydiin karaa UCare's MSHO iyo UCare Connect + Medicare si ay u sameeyaan ka reebida si loo daboolo dawooyinkaaga. Fadlan u tixraac su'aalaha B10–B12 wixii macluumaad dheeraad ah ee ku saabsan ka reebanaanta.

B9. Kawaran haddii aan ahay xubin cusub oo MSHO ee UCare ama UCare Connect + xubin Medicare oo aanan ka heli karin daawadayda Liiska Dawooyinka ama aan dhibaato kala kulmo helitaanka daawadayda?

Waan ku caawin karnaa. Waxaa laga yaabaa inaan daboolno sahayda daawadaada 30-maalmood oo ku meel gaar ah inta lagu jiro 90-ka maalmood ee ugu horreeya ee aad xubin ka tahay MSHO ee UCare ama UCare Connect + Medicare. Tani waxay ku siin doontaa wakhti aad kula hadasho dhakhtarkaaga ama dawo qore kale. Waxay kaa caawin karaan inaad go'aansato haddii ay jirto daawo la mid ah oo ku jirta Liiska Dawooyinka oo aad qaadan karto beddelkeeda ama inaad weydiisato in lagaa dhaafo.

Haddii dawadaada la qoray dhowr maalmood, waxaanu oggolaan doonaa dib u buuxinta badan si loo buuxiyo inta ugu badan ee 30 maalmood ee dawada ah.

Waxaanu dabooli doonaa sahayda daawadaada 30-maalmood haddii:

- aad qaadanayso daawo aan ku jirin Liiska Dawooyinka, *ama*
- sharciyadayada qorshaha kuuma oggolaadaan helitaanka qadarka uu dalbaday dawo qorahu, *ama*
- daawadu waxay u baahan tahay ogolaansho hore ee MSHO ee UCare ama UCare Connect + Medicare, *ama*
- aad qaadanayso daawo qayb ka ah xakamaynta daawaynta tillaabada.

Hadii aad ku jirto guriga dadka lagu xanaaneeyo ama xarumaha kale ee daryeelka muddada-dheer oo aad u baahan tahay daawo aan ku jirin Liiska Dawooyinka ama haddii aadan si fudud u heli karin daawada aad u baahan tahay, waan ku caawin karnaa. Haddii aad qorshaha ku jirtay in ka badan 90 maalmood, ku noolow xarun daryeel waqti-dheer, oo aad isla markiiba u baahan tahay sahay:

- Waxaan dabooli doonaa hal 31-maalmood oo ah sahayda daawada aad u baahan tahay (haddii aanad haysan warqad daawo qoris oo maalmo yar ah), haddii aad tahay xubin cusub oo ah MSHO ee UCare ama UCare Connect + Medicare.
- Tani waxaa u dheer saadka ku meel gaadhka ah inta lagu jiro 90-ka maalmood ee ugu horreeya ee aad xubin ka tahay MSHO ee UCare ama UCare Connect + Medicare.

Haddii aad tahay xubin hadda u gudbaysa heer daryeel oo ka duwan, waxaa laga yaabaa in lagu qoro dawooyin aan ku jirin liiskayaga. Markaad la hadlayso dhakhtarkaaga si aad u go'aamiso habka tallaabadada, waxaad xaq u leedahay inaad hesho sahayda kala-guurka ah ee 31-maalmood ah maadaama aad tahay

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo ucare.org.

u wareegga heer daryeel oo ka duwan. Haddii aad tahay xubin hadda kamid ah, la dhigay cusbitaal ama lagaa fasaxay xarunta daryeelka xiliga dheer, waxaa lagu oggolaan doonaa inaad degdeg u buuxiso oo ka hor imaansho ah si loo xaqiijiyo inaad heli karto saadka ku habboon daawooyinkaaga.

B10. Ma codsan karaa ka reebis si aan u daboolo daawadayda?

Haa. Waxaad waydiisan kartaa UCare MSHO ama UCare Connect + Medicare si ay u sameeyaan ka reebidda si loo daboolo dawada aanan ku jirin Liiska Dawada.

Waxaad sidoo kale na weydiisan kartaa inaan bedelno sharciyada daawadaada.

- Tusaale ahaan, UCare MSHO ama UCare Connect + Medicare waxay xaddidi karaan qaddarka dawada aanu dabooli doonno. Haddii dawadaadu leedahay xad, waxaad na waydiin kartaa inaan bedelno xadka oo aan wax badan daboolno.
- Tusaalooyinka kale: Waxaad nawaydiin kartaa anaga inaan dhigno xayiraadaha tallaabada daawaynta ama shuruudaha oggolaanshaha hore

B11. Sideen u waydiisan karaa reebitaan?

SI loo waydiisto ka reebida, soo wac UCare's MSHO Adeega macmiilka 612-676-6868/ 1-866-280-7202 (wicitaankan waa bilaash), ama soo wac UCare Connect + Medicare Adeega Macmiilka lambarka 612-676-3310 ama 1-855-260-9707 (wicitaankan waa bilaash), TTY 612-676-6810 ama 1-800-688-2534 (tani Waa lacag la'aan), 8 am – 8 pm, todobo maalmood todobaadki. Wakiilka Adeegga Macmiilka ayaa kula shaqayn doona adiga iyo bixiyahaaga si uu kaaga caawiyo inaad codsato ka reebitaanka. Waxa kale oo aad akhrin kartaa cutubka 9 ee *Buug-gacmeedka Xubinta* si aad wax badan uga barato waxyaabaha ka reeban.

B12. Intee ayay qaadanaysaa in la helo ka dhaafitaan?

Ka dib marka aanu warbixin ka helno dhakhtarkaaga qora dawada ee taageeraysa codsigaaga ka reebida, waxa aanu kugu sin doonnaa go'aan 72 saacadood gudaheed.

Oggolaanshaha Hore iyo codsiyada liiska ka reeban waxaa la billaabi karaa iyadoo laga soo wacayo Navitus Health Solutions lambarka 1-833-837-4300 (wicitaankan waa bilaash) ama fakis ugu soo dirida foomka codsiga lambarka 1-855-668-8552. Adeeg bixiyayaashu sidoo kale waxay ku soo gudbiyaan codsiga dhexda ePA.

Haddii adiga ama dhakhtarkaagu u maleeyo in caafimaadkaaga dhaawac loo geysto haddii ay tahay inaad sugto 72 saacadood go'aanka, waxaad codsan kartaa ka reebitaan degdeg ah. Tani waa go'aan dhakhso ah. Haddii dhakhtarkaagu uu taageero codsigaaga, waxaanu ku siin doonaa go'aan 24 saacadood gudahooda markaad hesho bayaanka taageerada dhakhtarkaaga.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macmiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wicitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo [ucare.org](https://www.ucare.org).

B13. Waa maxay dawooyinka kimikaad?

Daawooyinka macmalka ah waxay ka kooban yihiin maaddooyin firfircoon oo la mid ah daawooyinka asalka ah. Badana qiimahoodu waa wax ka yar dawada asalka oo badanaa ma laha magacyo si fiican loo yaqaan. Badanaa qiimahoodu waa wax ka yar dawada asalka oo badanaa ma laha magacyo si fiican loo yaqaan.

UCare MSHO iyo UCare Connect + Medicare waxay daboolaan dawooyinka asalka ah iyo dawooyinka macmalka ah labadaba.

B14. Waa maxay dawooyinka iyaddoon la qorin la iibsado?

OTC waxay u taagan tahay "dawada aan la qorin." UCare's MSHO iyo UCare Connect + Medicare waxay daboolaan qaar dawooyinka OTC marka adeeg bixiyahaaga u qoro sidii dawo qorid ahaan.

Waxaad akhriyi kartaa Liiska Dawada ee UCare's MSHO iyo UCare Connect + Medicare si loo ogaado dawooyinka OTC ee la daboolo.

B15. Miyuu UCare MSHO iyo UCare Connect + Medicare daboolaa alaabaha aan dawada farmashiga laga gato ahayn?

UCare's MSHO iyo UCare Connect + Medicare waxay daboolaan qaar alaabta OTC ee aan dawada ahayn marka uu adeeg bixiyahaagu u qoro sidii dawo qorida. Waxaad akhriyi kartaa qaybta liiska dawada ee UCare MSHO iyo UCare Connect + Medicare Liiska Dawooyinka La daboolo si loo helo waxa aan ahayn dawada alaabta OTC ee la daboolo. Tusaalooyinka alaabta aan dawooyinka OTC ahayn waxaa ka mid ah gooska iyo baandheejyada.

B16. Miyay UCare's MSHO iyo UCare Connect + Medicare daboolaan saadka xiliga dheer ee dawo qorida?

- Waxaan bixinnaa barnaamij dalabka boostada kaas oo kuu oggolaanaya inaad hesho illaa 90 maalmood oo ah sahayda daawada lagu qoray oo si toos ah gurigaaga loogu soo diray. Saadka 90 maalmood waxa uu leeyahay kharash bixin isku mid ah sida saadka halka bil.
- **90-Maalmood Barnaamijyada Farmasiiga Tafaariiqda ah.** Qaar farmasiiyada tafaariiqda ah sidoo kale waxay bixiyaan illaa 90 maalmood saadka la daboolo ee dawo qorida. Saadka 90 maalmood waxa uu leeyahay kharash bixin isku mid ah sida saadka halka bil.

B17. Dawo qorida guriyayga ma la iigu soo dirayaa iyaddoo ka imanaysa farmasiiga deegaanka?

Farmasiigaaga maxaliga ah waxay awoodi doonaan inay dawo qoridaada kuugu soo diraan gurigaaga. Waxaad soo waci kartaa farmasiigaaga si aadu ogaato haddii ay bixiyaan u soo dirida guriga.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo ucare.org.

B18. Waa maxay kharashka la wadaago?

UCare's MSHO iyo UCare Connect + Medicare xubnaha waxay leeyihiin kharashka la wada bixiyo ee dawooyinka la qoro ilaa inta xubinta ay ka raacayso sharciyada qorshaha. Tixraac su'aalaha B14 iyo B15 wixii ah macluumaadka dheeraadka ah ee ku saabsan dawooyinka OTC iyo alaabta aan dawooyinka ahayn.

Safafku waa kooxaha dawooyinka ku jira Liiska Dawada.

- Safka 1 Daawooyinka guud ayaa leh lacagta ugu yar ee la bixiyo. Kharashka la wada bixiyo laga bilaabo \$0 ilaa \$4.50, iyadoo ku xidhan dakhligaaga iyo heerka u qalmida Kaalmada Caafimaadka.
- Dawooyinka heerka 1 aad waxay leeyihiin lacag-bixin wadaag ah oo badan. Kharashka la wada bixiyo laga bilaabo \$0 ilaa \$11.20, iyadoo ku xidhan dakhligaaga iyo heerka u qalmida Kaalmada Caafimaadka.
- OTC-yadu waxay leeyihiin \$0 lacag la wada bixiyo ah.

Haddii aad hayso su'aalo, wac Adeegga Macmiilka lambarka xagga hoose ee boggan. Waxaanu kaa caawin karnaa inaad fahanto waxa kharashkaaga la wada bixiyaa uu noqon doono.

C. Muuqaalka guud ee Liiska Dawooyinka La daboolo

Liiska Dawooyinka La Daboolo waxa uu macluumaad ku saabsan dawooyinka la daboolo ee UCare MSHO iyo UCare Connect + Medicare. Haddii ay dhib kaa haysato helida liiskaaga dawada ku soo noqo Tasmada Dawooyinka La daboolo ee Qaybta D. Tusaha alifbeeto ahaan waxaa uu qoraa dhammaan dawooyinka ay daboolen UCare MSHO iyo UCare Connect + Medicare.

Tiirka kowaad ee shaxda waxaa ku qoran magaca dawada. Dwooyinka macmalka ah waxay ku qoran yihiin xarfo dadban (tusaale. *azathioprine*), dawooyinka magaca summadda waxay ku qoran yihiin xarfo waweyn (tusaale. EPIPEN). Daawooyinka aan la qorin (OTC) si gooni ah ayaa loo taxay kadib Tasmada Dawooyinka La Daboolay ee dhammaadka dukumeentiga. Macluumaadka ku tiirka “Tallaabooyinka lama huraanka ah, xayiraadaha, ama xadidka isticmaalka” waxay kuu sheegaan haddii UCare MSHO ama UCare Connect + Medicare ay leedahay wax sharciyo ah oo daboolaya dawadaada.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo **ucare.org**.

Waa kuwan micnayaasha baaq sireedyada lagu isticmaalo tiirka "Tallaabooyinka lama huraanka ah, xayiraadaha, ama xaddidaadaha isticmaalka":

PA =	Oggolaanshaha Hore: Dawooyinka uga baahan oggolaanshe UCare ka hor inta aanan daboolin.
PA ² =	Oggolaanshaha Hore: Dawooyinka u baahan oggolaanshe haddii aanad hore u qaadan dawooyinka
PA ³ =	Oggolaanshaha Hore: Dawooyinka u baahan in dib loo eego si go'aan looga gaadho daboolida hoosta Qaybta B ama Qaybta D
ST=	Step Terapy (Daawaynta Tallaabooyinka): Daawooyinka u baahan inaad isku daydo daawo kale ka hor inta aanan daboolin
QL =	(Quantity limit) Xadka tirada: Waxaa jira xadadka tirada dawada aad hesho buuxin kasta
Part B Covered=	Saadka cudurka sonkorta lagu daboolay eek u jira Qaybta B (caafimaad ahaan) dheefta
VAC =	Qaybta D Tallaalka qofka Wayn ee lagu daboolo \$0 (kharash la'aan)
VAC AGE =	Qaybta D Tallaalka Qofka wayn ee lagu daboolo \$0 (kharash la'aan) ee da'aja 19 – 45.
MFG =	Daboolid dawada waxay ku xadidan tahay shirkada warshadeeya qaarkood
NDS =	Dawooyinka lagu xadiday 30 maalin saad mar qaadashadaba
LA =	Dawooyinka keliya laga heli karo farmasiyo gaar ah. Haddii aad qabto su'aalo, soo wac Adeega Macmiilka lambarka dhabarka ku qoran kaadhkaaga Aqoonsiga xubinta.
Tier 1* =	Dawooyinka la qoray ee lagu daboolo dheefaha Medicaid

C1. Liiska Dawooyinka iyadoo loo eegayo Nooca Dawooyinka










Daawooyinka ku jira qaybtan waxa loo qaybiyaa qaybo iyadoo la fiirinayo noocooda. Tusaale ahaan, haddii aad daawo u qaadanayso dhanjafka, waa inaad eegtaa qaybta "Waxyaabaha ka hortaga dhanjafka". Halkaas ayaa ah meesha aad ka heli doonto dawooyinka daaweeya xanuunka dhanjafka.

Si aad u hesho macluumaad cusub ama su'aalo kale, nagala soo xidhiidh Adeegga Macmiilka ee MSHO ee UCare 612-676-6868 ama 1-866-280-7202 (taleefan bilaash ah), Adeegga Macaamiilka UCare Connect + Medicare 612-676-3310 ama 1-855-260-9707 (taleefan bilaash ah). TTY 612-676-6810 ama 1-800-688-2534 (wacitaankan waa bilaash), 8 subaxnimo - 8 habeenimo, toddoba maalmood usbuucii. Ama booqo [ucare.org](https://www.ucare.org).

Boggani si u kas ah ayaa looga dhigay mid maran.

Boggani si u kas ah ayaa looga dhigay mid maran.

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	<ul style="list-style-type: none"> 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*	<ul style="list-style-type: none"> QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
ZEPBOUND 2.5 MG/0.5ML SOLUTION	1*	<ul style="list-style-type: none"> QL 2 ML / 28 DAYS PA NDS Non-Extended Day Supply
ZEPBOUND 5 MG/0.5ML SOLUTION	1*	<ul style="list-style-type: none"> 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	<ul style="list-style-type: none"> 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: #c48e4a; 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: #c48e4a; 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	
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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

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
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	QL 10 EA / 30 DAYS PA
<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	QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply
<i>fentanyl citrate 200 mcg loz handle</i>	1	QL 120 EA / 30 DAYS PA
<i>hydromorphone hcl 1 mg/ml liquid</i>	1	QL 2400 ML / 30 OVER TIME
<i>hydromorphone hcl 2 mg tab</i>	1	QL 450 EA / 30 DAYS
<i>hydromorphone hcl 4 mg tab</i>	1	QL 240 EA / 30 DAYS
<i>hydromorphone hcl 8 mg tab</i>	1	QL 120 EA / 30 DAYS
<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	PA³
<i>methadone hcl (methadone hcl 5 mg tab, methadone hcl 10 mg tab)</i>	1	QL 360 EA / 30 DAYS PA
METHADONE HCL 10 MG/5ML SOLUTION	1	QL 1800 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
METHADONE HCL 5 MG/5ML SOLUTION	1	QL 3600 ML / 30 DAYS PA
<i>morphine sulfate (concentrate)</i>	1	QL 180 ML / 30 DAYS
MORPHINE SULFATE (CONCENTRATE) 100 MG/5ML SOLUTION	1	QL 180 ML / 30 DAYS
<i>morphine sulfate (morphine sulfate 15 mg tab, morphine sulfate 30 mg tab)</i>	1	QL 180 EA / 30 DAYS
MORPHINE SULFATE 10 MG/5ML SOLUTION	1	QL 1800 ML / 30 DAYS
MORPHINE SULFATE 20 MG/5ML SOLUTION	1	QL 900 ML / 30 DAYS
<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	QL 120 EA / 30 DAYS PA
<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	QL 180 EA / 30 DAYS
<i>oxycodone hcl 100 mg/5ml conc</i>	1	QL 270 ML / 30 DAYS
<i>oxycodone hcl 5 mg cap</i>	1	QL 360 EA / 30 OVER TIME
<i>oxycodone hcl 5 mg tab</i>	1	QL 360 EA / 30 DAYS
<i>oxycodone hcl 5 mg/5ml solution</i>	1	QL 5400 ML / 30 DAYS
<i>tramadol hcl 50 mg tab</i>	1	QL 240 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
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 1188 1192 1230">PA</div> <div data-bbox="1133 1234 1192 1297">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1302 1192 1344">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 1604">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="1130 317 1192 380">QL</div> 6 EA / 6 OVER TIME <div data-bbox="1130 390 1192 432">PA</div> <div data-bbox="1130 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	<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> 180 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>diazepam (diazepam 2 mg tab, diazepam 5 mg tab, diazepam 10 mg tab)</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> 120 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>diazepam 5 mg/5ml solution</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> 1200 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>diazepam 5 mg/ml conc</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> 240 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>diazepam intensol</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> 240 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>lorazepam (lorazepam 0.5 mg tab, lorazepam 1 mg tab, lorazepam 2 mg tab)</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> 150 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>lorazepam 2 mg/ml conc</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> 150 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>lorazepam intensol</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> 150 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>
<i>oxazepam</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> 120 EA / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 2px;"> <div style="background-color: #8b572a; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA²</div> </div>

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	

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
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 1479 1377">Non-Extended Day Supply</div>
ANTIASTHMATIC - MONOCLONAL ANTIBODIES		
FASENRA 10 MG/0.5ML SOLN PRSYR	1	<div data-bbox="1133 1488 1192 1524">PA</div>
FASENRA 30 MG/ML SOLN PRSYR	1	<div data-bbox="1133 1572 1192 1608">PA</div> <div data-bbox="1133 1621 1192 1656">NDS</div> <div data-bbox="1203 1621 1479 1688">Non-Extended Day Supply</div> <div data-bbox="1133 1694 1192 1730">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

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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
ANTICONVULSANTS - 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	

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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 604">PA²</div> <div data-bbox="1133 615 1190 651">NDS</div> <div data-bbox="1198 615 1477 684">Non-Extended Day Supply</div> <div data-bbox="1133 684 1190 720">LA</div>
EPIDIOLEX	1	<div data-bbox="1133 751 1190 787">PA²</div> <div data-bbox="1133 798 1190 833">LA</div>
<i>epitol</i>	1	
EPRONTIA	1	
FINTEPLA	1	<div data-bbox="1133 978 1190 1014">QL</div> <div data-bbox="1198 978 1471 1014">360 ML / 30 DAYS</div> <div data-bbox="1133 1024 1190 1060">PA²</div> <div data-bbox="1133 1071 1190 1106">NDS</div> <div data-bbox="1198 1071 1477 1140">Non-Extended Day Supply</div> <div data-bbox="1133 1150 1190 1186">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	

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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 898 1192 936">PA²</div> <div data-bbox="1133 947 1479 1020">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1031 1192 1068">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 1245 1479 1318">NDS Non-Extended Day Supply</div>
XCOPRI (250 MG DAILY DOSE) 100 & 150 MG TAB THPK	1	<div data-bbox="1133 1329 1451 1367">QL 56 EA / 28 DAYS</div> <div data-bbox="1133 1377 1192 1415">PA²</div> <div data-bbox="1133 1425 1479 1499">NDS Non-Extended Day Supply</div>
XCOPRI (350 MG DAILY DOSE)	1	<div data-bbox="1133 1518 1451 1556">QL 56 EA / 28 DAYS</div> <div data-bbox="1133 1566 1192 1604">PA²</div> <div data-bbox="1133 1614 1479 1688">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	QL 28 EA / 28 DAYS PA²
XCOPRI (XCOPRI 150 MG TAB, XCOPRI 200 MG TAB)	1	QL 60 EA / 30 DAYS PA² NDS Non-Extended Day Supply
XCOPRI (XCOPRI 25 MG TAB, XCOPRI 50 MG TAB, XCOPRI 100 MG TAB)	1	QL 30 EA / 30 DAYS PA² NDS Non-Extended Day Supply

GABA MODULATORS

<i>tiagabine hcl</i>	1	
<i>vigabatrin</i>	1	PA² NDS Non-Extended Day Supply LA
<i>vigadrone</i>	1	PA² NDS Non-Extended Day Supply LA
<i>vigpoder</i>	1	PA² NDS Non-Extended Day Supply LA

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	

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>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
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

MONOAMINE OXIDASE INHIBITORS (MAOIS)

EMSAM	1	<div data-bbox="1133 1014 1190 1077">NDS</div> Non-Extended Day Supply
MARPLAN	1	
PHENELZINE SULFATE	1	
<i>tranylcypromine sulfate</i>	1	

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	
<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	
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<i>fluvoxamine maleate (fluvoxamine maleate 25 mg tab, fluvoxamine maleate 50 mg tab, fluvoxamine maleate 100 mg tab)</i>	1	
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<i>fluvoxamine maleate er (fluvoxamine maleate er 100 mg cap er 24h, fluvoxamine maleate er 150 mg cap er 24h)</i>	1	
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<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	
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<i>paroxetine hcl er</i>	1	
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<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	
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SEROTONIN MODULATORS

NEFAZODONE HCL	1	
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<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	
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TRINTELLIX	1	QL 30 EA / 30 DAYS
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<i>vilazodone hcl</i>	1	QL 30 EA / 30 DAYS
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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

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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	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
<i>mifepristone 300 mg tab</i>	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
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	<ul style="list-style-type: none"> QL 4 ML / 28 DAYS PA
MOUNJARO	1	<ul style="list-style-type: none"> QL 2 ML / 28 DAYS PA
OZEMPIC (0.25 OR 0.5 MG/DOSE) 2 MG/3ML SOLN PEN	1	<ul style="list-style-type: none"> QL 3 ML / 28 DAYS PA
OZEMPIC (1 MG/DOSE) 4 MG/3ML SOLN PEN	1	<ul style="list-style-type: none"> QL 3 ML / 28 DAYS PA
OZEMPIC (2 MG/DOSE)	1	<ul style="list-style-type: none"> QL 3 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
RYBELSUS	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: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; 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; border-radius: 3px; margin-right: 5px;">QL</div> 2 ML / 28 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; 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; border-radius: 3px; margin-right: 5px;">QL</div> 9 ML / 30 DAYS </div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="background-color: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; 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: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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: #8b5722; color: white; padding: 2px 5px; border-radius: 3px; margin-right: 5px;">PA³</div> </div> <div style="display: flex; align-items: center;"> <div style="background-color: #003366; color: white; padding: 2px 5px; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; 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; border-radius: 3px; margin-right: 5px;">INS</div> \$35 Insulin </div>

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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

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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	

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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>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	<div data-bbox="1133 577 1193 615">PA</div> <div data-bbox="1133 625 1477 699">NDS Non-Extended Day Supply</div>
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<i>deferasirox 90 mg tab</i>	1	<div data-bbox="1133 714 1193 751">PA</div>
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<i>deferiprone</i>	1	<div data-bbox="1133 777 1193 814">PA</div> <div data-bbox="1133 825 1477 898">NDS Non-Extended Day Supply</div> <div data-bbox="1133 909 1193 947">LA</div>
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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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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 

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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: #8b572a; 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: #8b572a; 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: #8b572a; 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: #8b572a; 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: #8b572a; 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: #8b572a; 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: #8b572a; 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: #8b572a; color: white; padding: 2px 5px; margin-right: 5px;">NDS</div> <div>Non-Extended Day Supply</div> </div>

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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

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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	

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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: 10px;"> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA</div> <div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">NDS</div> <div style="background-color: #0070C0; color: white; padding: 2px 5px; border-radius: 3px;">LA</div> </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	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA³</div>
<i>cyclophosphamide 25 mg cap</i>	1	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA³</div>
<i>cyclophosphamide 50 mg cap</i>	1	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">PA³</div>
GLEOSTINE	1	<div style="background-color: #8B4513; color: white; padding: 2px 5px; border-radius: 3px;">NDS</div> 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	QL 14 EA / 28 DAYS PA² NDS Non-Extended Day Supply
PURIXAN	1	NDS Non-Extended Day Supply LA
TABLOID	1	
XATMEP	1	
ANTINEOPLASTIC - ANGIOGENESIS INHIBITORS		
FRUZAQLA 1 MG CAP	1	QL 84 EA / 28 DAYS PA² NDS Non-Extended Day Supply
FRUZAQLA 5 MG CAP	1	QL 21 EA / 28 DAYS PA² NDS Non-Extended Day Supply
INLYTA 1 MG TAB	1	QL 180 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
INLYTA 5 MG TAB	1	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
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	QL 1 EA / 112 OVER TIME
ELIGARD 45 MG KIT	1	QL 1 EA / 168 OVER TIME
ELIGARD 7.5 MG KIT	1	QL 1 EA / 28 DAYS
EMCYT	1	NDS Non-Extended Day Supply
ERLEADA 240 MG TAB	1	QL 30 EA / 30 DAYS
		PA²
		NDS Non-Extended Day Supply LA
ERLEADA 60 MG TAB	1	QL 120 EA / 30 DAYS
		PA²
		NDS Non-Extended Day Supply
		LA
<i>exemestane</i>	1	
FIRMAGON	1	PA²
FIRMAGON (240 MG DOSE)	1	PA²
<i>letrozole</i>	1	
LUPRON DEPOT (1-MONTH) 3.75 MG KIT	1	QL 1 EA / 28 DAYS
		NDS Non-Extended Day Supply
LUPRON DEPOT (3-MONTH) 11.25 MG KIT	1	QL 1 EA / 84 OVER TIME
		NDS Non-Extended Day Supply
LYSODREN	1	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>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 573 1469 609">QL 240 EA / 30 DAYS</div> <div data-bbox="1133 621 1192 657">PA²</div> <div data-bbox="1133 669 1477 741">NDS Non-Extended Day Supply</div> <div data-bbox="1133 747 1192 783">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 804 1453 840">QL 30 EA / 30 DAYS</div> <div data-bbox="1133 852 1192 888">PA²</div> <div data-bbox="1133 900 1477 972">NDS Non-Extended Day Supply</div> <div data-bbox="1133 978 1192 1014">LA</div>
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ALUNBRIG 30 MG TAB	1	<div data-bbox="1133 1035 1469 1071">QL 120 EA / 30 DAYS</div> <div data-bbox="1133 1083 1192 1119">PA²</div> <div data-bbox="1133 1131 1477 1203">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1209 1192 1245">LA</div>
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AUGTYRO	1	<div data-bbox="1133 1266 1469 1302">QL 240 EA / 30 DAYS</div> <div data-bbox="1133 1314 1192 1350">PA²</div> <div data-bbox="1133 1362 1477 1434">NDS Non-Extended Day Supply</div>
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BALVERSA (BALVERSA 3 MG TAB, BALVERSA 4 MG TAB)	1	<div data-bbox="1133 1455 1453 1491">QL 60 EA / 30 DAYS</div> <div data-bbox="1133 1503 1192 1539">PA²</div> <div data-bbox="1133 1551 1477 1623">NDS Non-Extended Day Supply</div> <div data-bbox="1133 1629 1192 1665">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	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
IMBRUVICA 70 MG/ML SUSPENSION	1	QL 324 ML / 30 DAYS PA ² NDS Non-Extended Day Supply LA
INREBIC	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
JAKAFI	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
JAYPIRCA 100 MG TAB	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
JAYPIRCA 50 MG TAB	1	QL 30 EA / 30 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
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	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LUMAKRAS 120 MG TAB	1	<ul style="list-style-type: none"> QL 240 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LUMAKRAS 320 MG TAB	1	<ul style="list-style-type: none"> QL 90 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LYNPARZA	1	<ul style="list-style-type: none"> QL 120 EA / 30 DAYS PA² NDS Non-Extended Day Supply LA
LYTGOBI (12 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 84 EA / 28 DAYS PA² NDS Non-Extended Day Supply
LYTGOBI (16 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 112 EA / 28 DAYS PA² NDS Non-Extended Day Supply
LYTGOBI (20 MG DAILY DOSE)	1	<ul style="list-style-type: none"> QL 140 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
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

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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

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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

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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

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VITRAKVI 100 MG CAP	1	QL 60 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
VITRAKVI 20 MG/ML SOLUTION	1	QL 300 ML / 30 DAYS PA ² NDS Non-Extended Day Supply LA
VITRAKVI 25 MG CAP	1	QL 180 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
VONJO	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply LA
XALKORI (XALKORI 20 MG CAP SPRINK, XALKORI 50 MG CAP SPRINK)	1	QL 120 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
XALKORI 150 MG CAP SPRINK	1	QL 180 EA / 30 DAYS PA ² NDS Non-Extended Day Supply
XALKORI 200 MG CAP	1	QL 60 EA / 30 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
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	QL 240 EA / 30 DAYS PA² NDS 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	NDS Non-Extended Day Supply

ANTIPARKINSON AND RELATED THERAPY AGENTS

ANTIPARKINSON ADJUNCTIVE THERAPY

<i>carbidopa</i>	1	
NOURIANZ	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply LA

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	

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
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>

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>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

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
UZEDY 250 MG/0.7ML SUSP PRSYR	1	<div data-bbox="1133 317 1190 380">QL</div> 0.7 ML / 60 OVER TIME <div data-bbox="1133 390 1190 453">NDS</div> Non-Extended Day Supply
UZEDY 50 MG/0.14ML SUSP PRSYR	1	<div data-bbox="1133 485 1190 548">QL</div> 0.14 ML / 30 DAYS <div data-bbox="1133 558 1190 621">NDS</div> Non-Extended Day Supply
UZEDY 75 MG/0.21ML SUSP PRSYR	1	<div data-bbox="1133 621 1190 684">QL</div> 0.21 ML / 30 DAYS <div data-bbox="1133 695 1190 758">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 1083 1190 1146">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	

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>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="1133 936 1192 999">QL</div> 2.4 ML / 56 OVER TIME <div data-bbox="1133 1010 1192 1073">NDS</div> Non-Extended Day Supply
ABILIFY ASIMTUFII 960 MG/3.2ML PRSYR	1	<div data-bbox="1133 1098 1192 1161">QL</div> 3.2 ML / 56 OVER TIME <div data-bbox="1133 1171 1192 1234">NDS</div> Non-Extended Day Supply
ABILIFY MAINTENA	1	<div data-bbox="1133 1262 1192 1325">QL</div> 1 EA / 28 DAYS <div data-bbox="1133 1335 1192 1398">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="1133 1612 1192 1675">QL</div> 60 EA / 30 DAYS <div data-bbox="1133 1686 1192 1749">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

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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

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
VOSEVI	1	<div data-bbox="1133 310 1192 352">QL</div> 28 EA / 28 DAYS <div data-bbox="1133 359 1192 401">PA</div> <div data-bbox="1133 407 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 703 1192 745">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 1134 1192 1197">QL</div> 84 EA / 180 OVER TIME
<i>oseltamivir phosphate 6 mg/ml recon susp</i>	1	<div data-bbox="1133 1228 1192 1291">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 1644 1192 1707">QL</div> 40 EA / 5 OVER TIME

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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	

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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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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)

1

CARDIOTONICS

CARDIAC GLYCOSIDES

digoxin (digoxin 125 mcg tab, digoxin 250 mcg tab)

1

DIGOXIN 0.05 MG/ML SOLUTION

1

CARDIOVASCULAR AGENTS - MISC.

CARDIOVASCULAR AGENTS MISC. - COMBINATIONS

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)

1

ENTRESTO (ENTRESTO 24-26 MG TAB, ENTRESTO 49-51 MG TAB, ENTRESTO 97-103 MG TAB)

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
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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

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 - 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>aubra</i>	1	
<i>aubra 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 1192 617">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 632 1192 669">PA</div> <div data-bbox="1133 684 1192 722">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 1192 1671">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
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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	PA² NDS Non-Extended Day Supply
VALCHLOR	1	QL 240 GM / 30 DAYS PA² 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
DUPIXENT 100 MG/0.67ML SOLN PRSYR	1	<div data-bbox="1133 317 1192 359">QL</div> 1.34 ML / 28 DAYS <div data-bbox="1133 365 1192 407">PA</div> <div data-bbox="1133 413 1192 478">NDS</div> Non-Extended Day Supply
EMOLLIENT/KERATOLYTIC AGENTS		
<i>urea 10% and 20% (carmol)</i>	OTC	
EMOLLIENTS		
<i>ammonium lactate (amlactin)</i>	OTC	
<i>ammonium lactate (amlactin) rx only</i>	1	
<i>glycerin</i>	OTC	
<i>mineral oil / petrolatum</i>	OTC	
<i>vitamin a</i>	OTC	
<i>vitamin a / vitamin d</i>	OTC	
ENZYMES - TOPICAL		
SANTYL	1	<div data-bbox="1133 1125 1192 1190">QL</div> 180 GM / 30 OVER TIME
IMMUNOMODULATING AGENTS - TOPICAL		
<i>imiquimod 5 % cream</i>	1	<div data-bbox="1133 1293 1192 1335">QL</div> 24 EA / 30 DAYS
IMMUNOSUPPRESSIVE AGENTS - TOPICAL		
<i>pimecrolimus</i>	1	<div data-bbox="1133 1423 1192 1465">QL</div> 100 GM / 30 DAYS
<i>tacrolimus (tacrolimus 0.03 % ointment, tacrolimus 0.1 % ointment)</i>	1	<div data-bbox="1133 1499 1192 1541">QL</div> 100 GM / 30 DAYS
KERATOLYTIC/ANTIMITOTIC AGENTS		
PODOFILOX 0.5 % SOLUTION	1	<div data-bbox="1133 1648 1192 1690">QL</div> 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		
REGRANEX	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

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>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
<i>XGEVA</i>	1	QL 1.7 ML / 28 DAYS PA NDS Non-Extended Day Supply
GROWTH HORMONE RECEPTOR ANTAGONISTS		
<i>SOMAVERT</i>	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
<i>SKYTROFA</i>	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
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 701 1192 737">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 915 1192 951">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 1199 1192 1234">LA</div>
<i>cinacalcet hcl</i>	1	<div data-bbox="1133 1262 1192 1297">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 1619 1192 1654">PA</div> <div data-bbox="1133 1671 1192 1707">NDS</div> <div data-bbox="1203 1671 1479 1734">Non-Extended Day Supply</div> <div data-bbox="1133 1740 1192 1776">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 1195 359">PA</div> <div data-bbox="1133 369 1195 432">NDS</div> Non-Extended Day Supply
OPFOLDA	1	<div data-bbox="1133 453 1195 495">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 1195 695">PA</div> <div data-bbox="1133 705 1195 768">NDS</div> <div data-bbox="1133 779 1195 821">LA</div> Non-Extended Day Supply
<i>sodium phenylbutyrate 500 mg tab</i>	1	<div data-bbox="1133 842 1195 884">PA</div> <div data-bbox="1133 894 1195 957">NDS</div> Non-Extended Day Supply

MINERALOCORTICOID RECEPTOR ANTAGONISTS

KERENDIA	1	<div data-bbox="1133 1052 1195 1094">QL</div> <div data-bbox="1133 1104 1195 1146">PA</div> 30 EA / 30 DAYS
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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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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
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

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
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

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>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 688">QL</div> 1.2 ML / 56 OVER TIME <div data-bbox="1133 705 1187 741">PA</div> <div data-bbox="1133 758 1187 814">NDS</div> Non-Extended Day Supply
SKYRIZI 360 MG/2.4ML SOLN CART	1	<div data-bbox="1133 846 1187 903">QL</div> 2.4 ML / 56 OVER TIME <div data-bbox="1133 919 1187 955">PA</div> <div data-bbox="1133 972 1187 1029">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 1533">NDS</div> Non-Extended Day Supply
LINZESS	1	<div data-bbox="1133 1568 1187 1625">QL</div> 30 EA / 30 DAYS
PERIPHERAL OPIOID RECEPTOR ANTAGONISTS		
MOVANTIK	1	<div data-bbox="1133 1703 1187 1759">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	

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>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 1477 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 1477 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 1477 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 1477 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	<div data-bbox="1130 317 1195 352">PA</div> <div data-bbox="1130 365 1479 432">NDS Non-Extended Day Supply</div> <div data-bbox="1130 443 1195 474">LA</div>
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HEMATORHEOLOGIC AGENTS

<i>pentoxifylline er</i>	1	
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PLATELET AGGREGATION INHIBITORS

<i>anagrelide hcl</i>	1	
<i>aspirin-dipyridamole er</i>	1	
BRILINTA	1	
<i>cilostazol</i>	1	
<i>clopidogrel bisulfate 75 mg tab</i>	1	
<i>dipyridamole (dipyridamole 25 mg tab, dipyridamole 50 mg tab, dipyridamole 75 mg tab)</i>	1	
<i>prasugrel hcl</i>	1	

HEMATOPOIETIC AGENTS

AGENTS FOR GAUCHER DISEASE

CERDELGA	1	<div data-bbox="1130 1339 1451 1371">QL 60 EA / 30 DAYS</div> <div data-bbox="1130 1388 1195 1419">PA</div> <div data-bbox="1130 1436 1479 1503">NDS Non-Extended Day Supply</div> <div data-bbox="1130 1514 1195 1545">LA</div>
<i>miglustat</i>	1	<div data-bbox="1130 1577 1195 1608">PA</div> <div data-bbox="1130 1625 1479 1692">NDS Non-Extended Day Supply</div> <div data-bbox="1130 1703 1195 1734">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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<i>yargesa</i>	1	<div data-bbox="1133 317 1195 352">PA</div> <div data-bbox="1133 369 1479 436">NDS Non-Extended Day Supply</div> <div data-bbox="1133 443 1195 478">LA</div>
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AGENTS FOR SICKLE CELL DISEASE

DROXIA	1	
l-glutamine 5 gm packet	1	<div data-bbox="1133 632 1471 667">QL 180 EA / 30 DAYS</div> <div data-bbox="1133 684 1195 720">PA</div> <div data-bbox="1133 737 1479 804">NDS Non-Extended Day Supply</div> <div data-bbox="1133 810 1195 846">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 1253 1479 1320">NDS Non-Extended Day Supply</div>
PROMACTA (PROMACTA 12.5 MG TAB, PROMACTA 25 MG TAB)	1	<div data-bbox="1133 1337 1451 1373">QL 30 EA / 30 DAYS</div> <div data-bbox="1133 1390 1195 1425">PA</div> <div data-bbox="1133 1442 1479 1509">NDS Non-Extended Day Supply</div>
PROMACTA (PROMACTA 50 MG TAB, PROMACTA 75 MG TAB)	1	<div data-bbox="1133 1524 1451 1560">QL 60 EA / 30 DAYS</div> <div data-bbox="1133 1577 1195 1612">PA</div> <div data-bbox="1133 1629 1479 1696">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	

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
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	

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>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
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<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> Non-Extended Day Supply
<i>trientine hcl 250 mg cap</i>	1	<div data-bbox="1133 1171 1192 1207">PA</div> <div data-bbox="1133 1220 1192 1255">NDS</div> Non-Extended Day Supply
IMMUNOMODULATORS		
<i>lenalidomide</i>	1	<div data-bbox="1133 1381 1192 1417">QL</div> 28 EA / 28 DAYS <div data-bbox="1133 1430 1192 1465">PA²</div> <div data-bbox="1133 1478 1192 1514">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1547 1192 1583">LA</div>
REVLIMID	1	<div data-bbox="1133 1612 1192 1648">QL</div> 30 EA / 30 DAYS <div data-bbox="1133 1661 1192 1696">PA²</div> <div data-bbox="1133 1709 1192 1745">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1778 1192 1814">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 354">QL</div> 60 EA / 30 DAYS <div data-bbox="1133 365 1192 403">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 1058 1192 1096">QL</div> 4 ML / 28 DAYS <div data-bbox="1133 1106 1192 1144">PA</div> <div data-bbox="1133 1155 1192 1213">NDS</div> Non-Extended Day Supply <div data-bbox="1133 1224 1192 1262">LA</div>
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MOUTH/THROAT/DENTAL AGENTS

ANESTHETICS TOPICAL ORAL

LIDOCAINE HCL 4 % SOLUTION	1	<div data-bbox="1133 1434 1192 1472">QL</div> 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
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<i>polymyxin b-trimethoprim</i>	1	 10 ML / 7 OVER TIME
SULFACETAMIDE SODIUM 10 % OINTMENT	1	
<i>sulfacetamide sodium 10 % solution</i>	1	 15 ML / 7 OVER TIME
<i>tobramycin 0.3 % solution</i>	1	 60 ML / 30 OVER TIME
TRIFLURIDINE	1	 15 ML / 7 OVER TIME
XDEMVIY	1	 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	 60 EA / 30 DAYS
RESTASIS	1	 60 EA / 30 DAYS
RESTASIS MULTIDOSE	1	 5.5 ML / 30 DAYS
VERKAZIA	1	 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: #8b572a; 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: #c85130; 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	

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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	

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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 1446 1192 1482">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	


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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










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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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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

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NAME OF DRUG	WHAT THE DRUG WILL COST YOU (TIER LEVEL)	NECESSARY ACTIONS, RESTRICTIONS, OR LIMITS ON USE
<i>teriflunomide</i>	1	QL 30 EA / 30 DAYS PA NDS Non-Extended Day Supply
VUMERITY	1	QL 120 EA / 30 DAYS PA NDS Non-Extended Day Supply LA
PSEUDOBULBAR AFFECT (PBA) AGENTS		
NUEDEXTA	1	PA NDS 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

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
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

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
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	

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>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	




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>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	

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
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	
















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>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	

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 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 LARGE
acetaminophen-codeine	36	184
ACETAMINOPHEN-		AEROCHAMBER PLUS FLO-
CODEINE	36	VU MEDIUM
acetazolamide	160	184
acetazolamide er	160	AEROCHAMBER PLUS FLO-
acetic acid	170,211	VU SMALL
acetylcysteine	147	184
acitretin	151	AEROCHAMBER PLUS FLO-
ACTEMRA	30	VU W/MASK
ACTEMRA ACTPEN	30	184
ACTHIB	229	AEROCHAMBER PLUS FLOW
ACTIMMUNE	110	VU
activated charcoal	24	184
acyclovir	127,152	AEROCHAMBER
acyclovir sodium	127	W/FLOWSIGNAL
ADACEL	226	184
ADBRY	155	AEROCHAMBER Z-STAT
adefovir dipivoxil	126	PLUS
ADEMPAS	133	184
ADVAIR HFA	50	AEROCHAMBER Z-STAT PLUS
AEROCHAMBER HOLDING		CHAMBR
CHAMBER	184	184
		AEROCHAMBER Z-STAT
		PLUS/LARGE
		185
		AEROCHAMBER Z-STAT
		PLUS/MEDIUM
		185
		AEROCHAMBER Z-STAT
		PLUS/SMALL
		185
		AEROVENT PLUS
		185
		AIMOVIG
		190
		AIRIAL CHAMBER
		185
		AIRZONE PEAK FLOW
		METER
		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
		alosetron 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

amnesteem.....	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	CEFTRIAAXONE SODIUM.....	136
calcium gluconate.....	192	carglumic acid.....	163	CEFTRIAAXONE SODIUM IN DEXTROSE.....	136
calcium panthothenate.....	235	CARTEOLOL HCL.....	206	CEFTRIAAXONE 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	clodogrel 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 coated beads..	130
dentagel.....	199	(gentel tears).....	dimenhydrinate (dramamine)..	71
DEPO-SUBQ PROVERA		dextromethorphan	dimethicone.....	158
104.....	142	(robitussin).....	DIMETHICONE CREAM.....	158
DESCOVY.....	121	dextromethorphan /	dimethyl fumarate.....	219
desipramine hcl.....	63	acetaminophen /	dimethyl fumarate starter	
desloratadine.....	74	chlorpheniramine.....	pack.....	219
desmopressin ace spray		dextromethorphan /	DIPENTUM.....	167
refrig.....	164	phenylephrine /	diphenhydramine.....	150
desmopressin acetate.....	164	acetaminophen.....	diphenhydramine (benadryl)..	74
desmopressin acetate		dextrose.....	diphenhydramine / phenylephrine	
spray.....	164	DEXTROSE-SODIUM	/ acetaminophen.....	145
desogestrel-ethinyl estradiol	137	CHLORIDE.....	diphenhydramine / zinc.....	150
desonide.....	154	dextrose-sodium chloride....	diphenoxylate-atropine.....	69
desvenlafaxine succinate er.	62	DEXTROSE-SODIUM	diphenhydramine.....	74
dexamethasone.....	143	CHLORIDE 2.5-0.45 %	DIPHThERIA-TETANUS	
		SOLUTION.....	TOXOIDS DT.....	226
		DIACOMIT.....		

dipyridamole.....	172	EASIVENT MASK SMALL... 187	enulose.....	168	
disopyramide phosphate.....	46	ec-naproxen.....	31	ENVARUSUS 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
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 SENSOR.....	182	gentamicin sulfate... 25,149,207	GVOKE HYPOPEN 2-PACK... 65
FREESTYLE LIBRE 3 PLUS SENSOR.....	182	GENVOYA.....122	GVOKE KIT.....65
FREESTYLE LIBRE 3 READER.....	182	GILOTRIF.....86	GVOKE PFS.....66
FREESTYLE LIBRE 3 SENSOR.....	182	glatiramer acetate.....219	
FREESTYLE LIBRE READER.....	182	glatopa.....220	H
FREESTYLE LIBRE SENSOR SYSTEM.....	182	GLEOSTINE.....82	HADLIMA.....26
FRUZAQLA.....	83	glimepiride.....69	HADLIMA PUSHTOUCH.....26
ft arthritis pain.....	148	glipizide.....69	HAEGARDA.....171
furosemide.....	161	glipizide er.....69	hailey 24 fe.....137
FUZEON.....	122	glipizide xl.....69	halobetasol propionate.....154
fyavolv.....	165	glipizide-metformin hcl.....64	haloette.....141
FYCOMPA.....	53,54	GLUCAGON EMERGENCY...65	haloperidol.....117
		glucosamine / chondroitin...25	haloperidol decanoate.....117
		glucosamine sulfate.....24	haloperidol lactate.....117
		glucose (dextrose).....65	HAVRIX.....231
		glycerin.....156	hearing aid batteries.....180
		glycerin suppository.....178	heather.....142
		glycopyrrolate.....227	hemetab.....175
		GLYXAMBI.....64	hemorrhoidal cream.....38
		gnp anti-itch.....151	hemorrhoidal ointment.....38
		gnp arthritis pain.....148	hemorrhoidal suppository.....38
		gnp best fiber.....177	heparin sodium (porcine).....53
		gnp diclofenac sodium.....148	heparin sodium (porcine) pf...53
		GOLYTELY.....178	HEPLISAV-B.....231
		goodsense arthritis pain....148	HETLIOZ.....177
		goodsense best fiber.....177	HIBERIX.....229
		granisetron hcl.....71	HUMIRA (2 PEN).....27
		griseofulvin microsize.....72	HUMIRA (2 SYRINGE).....27
		griseofulvin ultramicrosize...72	HUMIRA 10 MG/0.1ML PREF SY
		guaifenesin.....145	KT (ABBVIE).....27
		guaifenesin (mucinex).....147	HUMIRA 20 MG/0.2ML PREF SY
		guaifenesin / dextromethorphan	KT (ABBVIE).....27
		(mucinex dm).....145	HUMIRA 40 MG/0.4ML PREF SY
		guaifenesin / dextromethorphan	KT (ABBVIE).....27
		/ phenylephrine.....145	HUMIRA PEN 40 MG/0.4ML PEN
		guaifenesin / dextromethorphan	KIT (ABBVIE).....27
		/ pseudoephedrine.....146	HUMIRA PEN 80 MG/0.8ML PEN
		guaifenesin ac.....146	KIT (ABBVIE).....28
		guaifenesin-codeine.....146	HUMIRA PEN-CD/UC/HS
		guanfacine hcl.....78	STARTER 80 MG/0.8ML PEN
		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.....	97,98	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	indomethacin.....	31	iron polysaccharide complex.....	175
hydroxychloroquine sulfate.....	80	INFANRIX.....	226	ISENTRESS.....	123
hydroxyurea.....	110	INGREZZA.....	218	ISENTRESS HD.....	123
hydroxyzine hcl.....	45	INLYTA.....	83	isibloom.....	138
hydroxyzine pamoate.....	45	INQOVI.....	92	ISONIAZID.....	81
HYQVIA.....	212	INREBIC.....	98	isoniazid 300mg tab.....	81
ibandronate sodium.....	161	INSPIRACHAMBER/LARGE.....	187	isoniazid 50mg/5ml syrup.....	81
		INSPIRACHAMBER/MEDIUM.....	187	isosorbide dinitrate.....	44
		INSPIRACHAMBER/MOUTHPIECE.....	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)	LIBERVANT	54	losartan potassium	78
LENVIMA (4 MG DAILY DOSE)	lidocaine hcl	157	losartan potassium-hctz	80
LENVIMA (8 MG DAILY DOSE)	LIDOCAINE HCL	198	loteprednol etabonate	209
lessina	LIDOCAINE HCL		lovastatin	76
letrozole	URETHRAL/MUCOSAL	157	low-ogestrel	139
leucovorin calcium	lidocaine ointment rx only	157	loxapine succinate	117
LEUKERAN	lidocaine patches	157	lubiprostone	167
levabuterol hcl	lidocaine patches rx only	157	lubricant eye drops	205
LEVALBUTEROL	lidocaine viscous hcl	198	lubricant eye ointment	205
TARTRATE	lidocaine-prilocaine	157	LUMAKRAS	100
levetiracetam	lincomycin hcl	43	LUMIGAN	211
levetiracetam er	LINDANE	158	LUNG PERFORM PEAK FLOW	
LEVOBUNOLOL HCL	linezolid	43	METER	187
levocarnitine	LINEZOLID IN SODIUM		LUPRON DEPOT (1-MONTH)	88
levocarnitine sf	CHLORIDE	43	LUPRON DEPOT (3-MONTH)	88
levocetirizine (xyzal)	LINZESS	168	lurasidone hcl	114
levocetirizine (xyzal) rx only	liothyronine sodium	226	lutera	139
levofloxacin	lisdexamphetamine dimesylate	22	lyleq	142
LEVOFLOXACIN	lisinopril	77	lyllana	166
LEVOFLOXACIN 0.5 % SOLUTION	lisinopril-hydrochlorothiazide	79	LYNPARZA	100
levofloxacin in d5w	LITEAIRE	187	LYSODREN	88
levonest	lithium	113	LYTGOBI (12 MG DAILY DOSE)	100
levonorg-eth estrad triphasic	LITHIUM CARBONATE	113	LYTGOBI (16 MG DAILY DOSE)	100
levonorgest-eth est & eth est	lithium carbonate	113	LYTGOBI (20 MG DAILY DOSE)	100
levonorgest-eth estrad 91-day	CAP	113	lyza	142
levonorgest-eth estradiol-iron	lithium carbonate er	113		
levonorgestrel (plan b)	LITHOSTAT	170		
levonorgestrel-ethinyl estrad	LOKELMA	198		
levora 0.15/30 (28)	LONSURF	93		
levothyroxine sodium	loperamide (immodium)	69		
levoxyl	loperamide (immodium) rx only	70		
LEXIVA	lopinavir-ritonavir	123		
	loratadine (claritin)	74		
	loratadine / pseudoephedrine (claritin – d)	146		
	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.....
pantoprazole sodium.....	228	PENBRAYA.....	230	phenylephrine / bropheniramine /
paricalcitol.....	164	penciclovir.....	152	dextromethorphan.....
paromomycin sulfate.....	25	penicillamine.....	195	phenylephrine / chlorpheniramine
paroxetine hcl.....	62	penicillin g potassium.....	213	/ dextromethorphan.....
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.....
PAXLOVID (300/100).....	125	PENTACEL.....	227	phenylephrine /
pazopanib hcl.....	102	pentamidine isethionate for		dextromethorphan.....
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.....
PEAK FLOW METER		pentoxifylline er.....	172	phenylephrine / doxylamine /
UNIVERSAL RANG.....	188	perindopril erbumine.....	77	dextromethorphan /
PEDIARIX.....	226	PERINDOPRIL ERBUMINE 2		acetaminophen.....
pediatric multiple vitamins..	202	MG TAB.....	77	phenylephrine / guaifenesin..
pediatric multiple vitamins /		PERINDOPRIL ERBUMINE 8		phenylephrine / shark liver /
fluoride.....	202	MG TAB.....	77	petrolatum (preparation h).....
pediatric multiple vitamins /		periogard.....	199	phenytek.....
fluoride / iron.....	202	permethrin (nix).....	159	phenytoin.....
pediatric multiple vitamins /		permethrin (nix) rx only.....	159	phenytoin infatabs.....
iron.....	202	perphenazine.....	119	phenytoin sodium extended... 60
pediatric multiple vitamins /		PERSERIS.....	116	PHOSPHOLINE IODIDE.....
minerals.....	202	PERSONAL BEST FULL		phosphorus supplement.....
pediatric multiple vitamins /		RANGE.....	188	phytonadione.....
vitamin a / vitamin c / vitamin d /		PERSONAL BEST LOW		PIFELTRO.....
fluoride.....	202	RANGE.....	188	PIKO 1.....
pediatric multivitamin		petrolatum (vaseline).....	215	pilocarpine hcl.....
combinations.....	202	PFIZERPEN.....	214	pimecrolimus.....
PEDIATRIC MULTIVITAMIN		pharmacist choice diclofenac	149	PIMOZIDE.....
COMBINATIONS.....	202	phenazopyridine (azo).....	170	pimtrea.....
pediatric vitamins.....	202	PHENELZINE SULFATE.....	61	pindolol.....
PEDVAX HIB.....	230	phenobarbital.....	176	pioglitazone hcl.....
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.....
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	PREDNISONE.....	144	prochlorperazine maleate.....	119
potassium chloride 20 meq packet.....	194	prednisone.....	144	procto-med hc.....	38
		PREDNISONE 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
SCSEMBLIX	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
T		teriparatide.....	162	TIVICAY PD.....	124
TABLOID.....	83	TERIPARATIDE		tizanidine hcl.....	203
TABRECTA.....	105	(RECOMBINANT).....	162	tobramycin.....	26,208
tacrolimus.....	156,197	testosterone.....	37	TOBRAMYCIN SULFATE.....	26
tadalafil (pah).....	132	TESTOSTERONE.....	37	tobramycin-dexamethasone.....	210
TAFINLAR.....	105,106	TESTOSTERONE		tolcapone.....	112
TAGRISSO.....	86	CYPIONATE.....	38	tolnaftate (tinactin).....	150
TALTZ.....	152	testosterone cypionate 100		tolterodine tartrate.....	229
TALZENNA.....	106	mg/ml solution.....	37	tolterodine tartrate er.....	229
tamoxifen citrate.....	90	testosterone cypionate 200		topiramate.....	58
tamsulosin hcl.....	170	mg/ml solution.....	38	toremifene citrate.....	90
tarina 24 fe.....	140	TESTOSTERONE		torpenz.....	107
tarina fe 1/20.....	140	ENANTHATE.....	38	torsemide.....	161
tarina fe 1/20 eq.....	140	TETANUS-DIPHThERIA		TOUJEO MAX SOLOSTAR.....	68
taron forte.....	175	TOXOIDS TD.....	227	TOUJEO SOLOSTAR.....	68
TASIGNA.....	106	tetrabenazine.....	218	TRADJENTA.....	66
tasimelteon.....	177	tetracaine hcl.....	209	tramadol hcl.....	35
tazarotene.....	152	tetracycline hcl.....	225	tramadol-acetaminophen.....	36
TAZICEF.....	136	tetrahydrazoline drops		trandolapril.....	77
tazicef 1 gm recon soln.....	136	(visine).....	208	tranexamic acid.....	176
tazicef 2 gm recon soln.....	136	THALOMID.....	196	tranylcypromine sulfate.....	61
taztia xt.....	130	theophylline.....	52	travoprost (bak free).....	211
TAZVERIK.....	106	theophylline er.....	52	trazodone hcl.....	62
TDVAX.....	227	thiamine (vitamin b1).....	235	TRECATOR.....	82
TEFLARO.....	136	thioridazine hcl.....	119	TRELEGY ELLIPTA.....	51
telmisartan.....	78	thiothixene.....	120	TRELSTAR MIXJECT.....	90
TELMISARTAN-		throat lozenge.....	200	tretinoin.....	110,148
AMLODIPINE.....	80	throat lozenges.....	200	tri femynor.....	140
telmisartan-hctz.....	80	tiadylt er.....	130	tri-estarylla.....	140
temazepam.....	176	tiagabine hcl.....	59	tri-legest fe.....	140

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

Liiska rasmiga ah waxaa la cusboonaysiiyay 08/20/2024.

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