



**Clear Spring
Health**

Clear Spring Health Value Rx (PDP)

2024 Formulary

(List of Covered Drugs)

PLEASE READ:

**THIS DOCUMENT CONTAINS INFORMATION ABOUT THE DRUGS WE COVER IN
THIS PLAN**

HPMS Approved Formulary File Submission ID 00024487, Version Number 11

This formulary was updated on 02/01/2024. For more recent information or if you have questions, please call Member Services at 1-877-364-4566, (TTY: 711) or visit our website at www.clearspringhealthcare.com. We are open from October 1 – March 31, seven days a week, 8:00 am – 8:00 pm from April 1 – September 30, Monday through Friday, 8:00 am – 8:00 pm (you may leave a voicemail Saturday, Sunday, and Federal Holidays).

Important Message About What You Pay for Vaccines | Our plan covers most Part D vaccines at no cost to you, even if you haven't paid your deductible. Call Member Services for more information.

Important Message About What You Pay for Insulin - You will not pay more than \$35 for a one-month supply of each insulin product covered by our plan, no matter what cost-sharing tier it's on, even if you haven't paid your deductible.

Note to existing members: This formulary has changed since last year. Please review this document to make sure that it still contains the drugs you take.

When this drug list (formulary) refers to "we," "us", or "our," it means Clear Spring Health. When it refers to "plan" or "our plan," it means Clear Spring Health Value Rx (PDP).

This document includes list of the drugs (formulary) for our plan which is current as of March 2024. For a comprehensive updated formulary, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You must generally use network pharmacies to use your prescription drug benefit. Benefits, formulary, pharmacy network, and/or copayments/coinsurance may change on January 1, 2024, and from time to time during the year.

What is the Clear Spring Health Value Rx (PDP) Formulary?

A formulary is a list of covered drugs selected by our plan in consultation with a team of health care providers, which represents the prescription therapies believed to be a necessary part of a quality treatment program. Our plan will generally cover the drugs listed in our formulary if the drug is medically necessary, the prescription is filled at a plan network pharmacy, and other plan rules are followed. For more information on how to fill your prescriptions, please review your Evidence of Coverage.

Can the Formulary (drug list) change?

Most changes in drug coverage happen on January 1, but we may add or remove drugs on the Drug List during the year, move them to different cost-sharing tiers, or add new restrictions. We must follow the Medicare rules in making these changes.

Changes that can affect you this year: In the below cases, you will be affected by coverage changes during the year:

- **New generic drugs.** We may immediately remove a brand name drug on our Drug List if we are replacing it with a new generic drug that will appear on the same or lower cost sharing tier and with the same or fewer restrictions. Also, when adding the new generic drug, we may decide to keep the brand name drug on our Drug List, but immediately move it to a different cost-sharing tier or add new restrictions. If you are currently taking that brand name drug, we may not tell you in advance before we make that change, but we will later provide you with information about the specific change(s) we have made.
 - If we make such a change, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled "How do I request an exception to the Clear Spring Health Value Rx (PDP) Formulary?"
- **Drugs removed from the market.** If the Food and Drug Administration deems a drug on our formulary to be unsafe or the drug's manufacturer removes the drug from the market, we will immediately remove the drug from our formulary and provide notice to members who take the drug.

- **Other changes.** We may make other changes that affect members currently taking a drug. For instance, we may add a generic drug that is not new to market to replace a brand name drug currently on the formulary; or add new restrictions to the brand name drug or move it to a different cost sharing tier or both. Or we may make changes based on new clinical guidelines. If we remove drugs from our formulary, [or] add prior authorization, quantity limits and/or step therapy restrictions on a drug or move a drug to a higher cost-sharing tier, we must notify affected members of the change at least 30 days before the change becomes effective, or at the time the member requests a refill of the drug, at which time the member will receive a 30-day supply of the drug.
 - If we make these other changes, you or your prescriber can ask us to make an exception and continue to cover the brand name drug for you. The notice we provide you will also include information on how to request an exception, and you can also find information in the section below entitled “How do I request an exception to the Clear Spring Health Value Rx (PDP) Formulary?”

Changes that will not affect you if you are currently taking the drug. Generally, if you are taking a drug on our 2024 formulary that was covered at the beginning of the year, we will not discontinue or reduce coverage of the drug during the 2024 coverage year except as described above. This means these drugs will remain available at the same cost sharing and with no new restrictions for those members taking them for the remainder of the coverage year. You will not get direct notice this year about changes that do not affect you. However, on January 1 of the next year, such changes would affect you, and it is important to check the Drug List for the new benefit year for any changes to drugs.

The enclosed formulary is current as of March 2024. To get updated information about the drugs covered by our plan, please contact us. Our contact information appears on the front and back cover pages. We will update the formulary on our websites throughout the year as changes occur.

How do I use the Formulary?

There are two ways to find your drug within the formulary:

Medical Condition

The formulary begins on page 1. The drugs in this formulary are grouped into categories depending on the type of medical conditions that they are used to treat. For example, drugs used to treat a heart condition are listed under the category, “Miscellaneous Cardiovascular Agents”. If you know what your drug is used for, look for the category name in the list that begins on page 1. Then look under the category name for your drug.

Alphabetical Listing

If you are not sure what category to look under, you should look for your drug in the Index that begins on page 94. The Index provides an alphabetical list of all the drugs included in this document. Both brand name drugs and generic drugs are listed in the Index. Look in the Index and find your drug. Next to your drug, you will see the page number where you can find coverage information. Turn to the page listed in the Index and find the name of your drug in the first column of the list.

What are generic drugs?

Our plan covers both brand name drugs and generic drugs. A generic drug is approved by the FDA as having the same active ingredient as the brand name drug. Generally, generic drugs cost less than brand name drugs.

Are there any restrictions on my coverage?

Some covered drugs may have additional requirements or limits on coverage. These requirements and limits may include:

- **Prior Authorization:** Our plan requires you [or your physician] to get prior authorization for certain drugs. This means that you will need to get approval from Clear Spring Health before you fill your prescriptions. If you don't get approval, Clear Spring Health may not cover the drug.
- **Quantity Limits:** For certain drugs, our plan limits the amount of the drug that we will cover. For example, our plan provides 30 tablets per prescription for Rosuvastatin. This may be in addition to a standard one-month or three-month supply.
- **Step Therapy:** In some cases, our plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, our plan may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

You can find out if your drug has any additional requirements or limits by looking in the formulary that begins on page 1. You can also get more information about the restrictions applied to specific covered drugs by visiting our Web site. We have posted online documents that explain our prior authorization and step therapy restrictions. You may also ask us to send you a copy. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

You can ask our plan to make an exception to these restrictions or limits or for a list of other, similar drugs that may treat your health condition. See the section, "How do I request an exception to our plan formulary?" below for information about how to request an exception.

What if my drug is not on the Formulary?

If your drug is not included in this formulary (list of covered drugs), you should first contact Member Services and ask if your drug is covered.

If you learn that our plan does not cover your drug, you have two options:

- You can ask Member Services for a list of similar drugs that are covered by our plan. When you receive the list, show it to your doctor and ask him or her to prescribe a similar drug that is covered by our plan.
- You can ask our plan to make an exception and cover your drug. See section on How do I request an exception below for information about how to request an exception.

How do I request an exception to the Clear Spring Health Value Rx (PDP) Formulary?

You can ask our plan to make an exception to our coverage rules. There are several types of exceptions that you can ask us to make.

- You can ask us to cover a drug even if it is not on our formulary. If approved, this drug will be covered at a pre-determined cost-sharing level, and you would not be able to ask us to provide the drug at a lower cost-sharing level.

- You can ask us to cover a formulary drug at a lower cost-sharing level if this drug is not on the specialty tier. If approved this would lower the amount you must pay for your drug.
- You can ask us to waive coverage restrictions or limits on your drug. For example, for certain drugs, our plan limits the amount of the drug that we will cover. If your drug has a quantity limit, you can ask us to waive the limit and cover a greater amount.

Generally, our plan will only approve your request for an exception if the alternative drugs included on the plan's formulary, the lower cost-sharing drug or additional utilization restrictions would not be as effective in treating your condition and/or would cause you to have adverse medical effects.

You should contact us to ask us for an initial coverage decision for a formulary, or utilization restriction exception.

When you request a formulary or utilization restriction exception you should submit a statement from your prescriber or physician supporting your request. Generally, we must make our decision within 72 hours of getting your prescriber's supporting statement. You can request an expedited (fast) exception if you or your doctor believe that your health could be seriously harmed by waiting up to 72 hours for a decision. If your request to expedite is granted, we must give you a decision no later than 24 hours after we get a supporting statement from your doctor or other prescriber.

What do I do before I can talk to my doctor about changing my drugs or requesting an exception?

As a new or continuing member in our plan you may be taking drugs that are not on our formulary. Or, you may be taking a drug that is on our formulary but your ability to get it is limited. For example, you may need a prior authorization from us before you can fill your prescription. You should talk to your doctor to decide if you should switch to an appropriate drug that we cover or request a formulary exception so that we will cover the drug you take. While you talk to your doctor to determine the right course of action for you, we may cover your drug in certain cases during the first 90 days you are a member of our plan.

For each of your drugs that is not on our formulary or if your ability to get your drugs is limited, we will cover a temporary 30-day supply. If your prescription is written for fewer days, we'll allow refills to provide up to a maximum 30-day supply of medication. After your first 30-day supply, we will not pay for these drugs, even if you have been a member of the plan less than 90 days.

If you are a resident of a long-term care facility and you need a drug that is not on our formulary or if your ability to get your drugs is limited, but you are past the first 90 days of membership in our plan, we will cover a 31-day emergency supply of that drug while you pursue a formulary exception.

If you experience a level of care change (i.e., are admitted to a long-term care facility or discharged from a long-term care facility to home) you will also be able to obtain a 30-day emergency supply of your medication (unless you have a prescription for fewer days) until you can switch to another drug that is covered by us or you pursue a formulary exception.

For more information

For more detailed information about your our plan's prescription drug coverage, please review your Evidence of Coverage and other plan materials.

If you have questions about our plan, please contact us. Our contact information, along with the date we last updated the formulary, appears on the front and back cover pages.

If you have general questions about Medicare prescription drug coverage, please call Medicare at 1-800-MEDICARE (1-800-633-4227) 24 hours a day/7 day a week. TTY users should call 1-877-486-2048. Or visit <http://www.medicare.gov>.

Clear Spring Health's Formulary

The formulary that begins on the next page provides coverage information about the drugs covered by our plan. If you have trouble finding your drug in the list, turn to the Index that begins on page 94.

The first column of the chart lists the drug name. Brand name drugs are capitalized (e.g., ENTRESTO) and generic drugs are listed in lower-case italics (e.g., *simvastatin*).

The information in the Requirements/Limits column tells you if our plan has any special requirements for coverage of your drug.

Below is a list of abbreviations that may appear on the following pages in the Requirements/Limits column that tells you if there are any special requirements for coverage of your drug.

List of Abbreviations

B/D: This prescription drug may be covered under Medicare Part B or D depending upon the circumstances. Information may need to be submitted describing the use and setting of the drug to make the determination.

NDS: Non-extended Day Supply Drug. This prescription drug is not available for an extended days' supply.

PA: Prior Authorization. The Plan requires you or your physician to get prior authorization for certain drugs. This means that you will need to get approval before you fill your prescriptions. If you don't get approval, we may not cover the drug.

PA NSO: Prior Authorization for New Starts Only. The Prior Authorization restriction only applies if you are a new member or have not taken this drug before.

QL: Quantity Limit. For certain drugs, the Plan limits the amount of the drug that we will cover.

ST: Step Therapy. In some cases, the Plan requires you to first try certain drugs to treat your medical condition before we will cover another drug for that condition. For example, if Drug A and Drug B both treat your medical condition, we may not cover Drug B unless you try Drug A first. If Drug A does not work for you, we will then cover Drug B.

ST NSO: Step Therapy for New Starts Only. The Step Therapy restriction only applies if you are a new member or have not taken this drug before.

Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
Analgesics						
Nonsteroidal Anti-inflammatory Drugs						
<i>celecoxib capsule 100mg</i>	2	QL(60 EA per 30 days)	<i>indomethacin capsule 50mg</i>	2		
<i>celecoxib capsule 200mg</i>	2	QL(60 EA per 30 days)	<i>ketorolac tromethamine injection 15mg/ml</i>	4		
<i>celecoxib capsule 400mg</i>	3	QL(60 EA per 30 days)	<i>ketorolac tromethamine injection 30mg/ml</i>	4		
<i>celecoxib capsule 50mg</i>	2	QL(60 EA per 30 days)	<i>ketorolac tromethamine injection 30mg/ml</i>	4		
<i>diclofenac potassium tablet 50mg</i>	3		<i>ketorolac tromethamine tablet 10mg</i>	3	QL(20 EA per 30 days)	
<i>diclofenac sodium dr tablet delayed release 25mg</i>	3		<i>meloxicam tablet 15mg</i>	1		
<i>diclofenac sodium dr tablet delayed release 50mg</i>	3		<i>meloxicam tablet 7.5mg</i>	1		
<i>diclofenac sodium dr tablet delayed release 75mg</i>	3		<i>nabumetone tablet 500mg</i>	2		
<i>diclofenac sodium er tablet extended release 24 hour 100mg</i>	3		<i>nabumetone tablet 750mg</i>	2		
<i>diclofenac sodium gel 1%</i>	3	QL(1000 GM per 30 days)	<i>naproxen sodium tablet 275mg</i>	3		
<i>ec-naproxen tablet delayed release 375mg</i>	3		<i>naproxen sodium tablet 550mg</i>	3		
<i>etodolac capsule 200mg</i>	3		<i>naproxen tablet delayed release 375mg</i>	3		
<i>etodolac capsule 300mg</i>	3		<i>naproxen tablet delayed release 500mg</i>	3		
<i>etodolac tablet 400mg</i>	3		<i>naproxen tablet 250mg</i>	1		
<i>etodolac tablet 500mg</i>	3		<i>naproxen tablet 375mg</i>	1		
<i>flurbiprofen tablet 100mg</i>	3		<i>naproxen tablet 500mg</i>	1		
<i>flurbiprofen tablet 50mg</i>	3		<i>oxaprozin tablet 600mg</i>	4		
<i>ibuprofen tablet 400mg</i>	1		<i>sulindac tablet 150mg</i>	2		
<i>ibuprofen tablet 600mg</i>	1		<i>sulindac tablet 200mg</i>	2		
<i>ibuprofen tablet 800mg</i>	1		Opioid Analgesics, Long-acting			
<i>ibu tablet 400mg</i>	1		<i>buprenorphine patch weekly 10mcg/hr</i>	4	QL(4 EA per 28 days); NDS	
<i>ibu tablet 600mg</i>	1		<i>buprenorphine patch weekly 15mcg/hr</i>	4	QL(4 EA per 28 days); NDS	
<i>ibu tablet 800mg</i>	1		<i>buprenorphine patch weekly 20mcg/hr</i>	4	QL(4 EA per 28 days); NDS	
<i>indomethacin er capsule extended release 75mg</i>	4		<i>BUPRENORPHINE PATCH WEEKLY 5MCG/HR</i>	4	QL(4 EA per 28 days); NDS	
<i>indomethacin capsule 25mg</i>	2		<i>buprenorphine patch weekly 7.5mcg/hr</i>	4	QL(4 EA per 28 days); NDS	
			<i>fentanyl patch 72 hour 100mcg/hr</i>	4	QL(10 EA per 30 days); NDS	
			<i>fentanyl patch 72 hour 25mcg/hr</i>	4	QL(10 EA per 30 days); NDS	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
fentanyl patch 72 hour 50mcg/hr	4	QL(10 EA per 30 days); NDS	XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 9MG	3	NDS
fentanyl patch 72 hour 75mcg/hr	4	QL(10 EA per 30 days); NDS			
methadone hcl solution 10mg/5ml	3	NDS			
methadone hcl solution 5mg/5ml	3	NDS			
methadone hcl tablet 10mg	2	QL(120 EA per 30 days); NDS			
methadone hcl tablet 5mg	2	QL(240 EA per 30 days); NDS			
methadone hydrochloride intensol concentrate 10mg/ml	3				
methadone hydrochloride concentrate 10mg/ml	3				
morphine sulfate er tablet extended release 100mg	4	QL(120 EA per 30 days); NDS			
morphine sulfate er tablet extended release 15mg	3	QL(120 EA per 30 days); NDS			
morphine sulfate er tablet extended release 200mg	4	QL(120 EA per 30 days); NDS			
morphine sulfate er tablet extended release 30mg	3	QL(120 EA per 30 days); NDS			
morphine sulfate er tablet extended release 60mg	3	QL(120 EA per 30 days); NDS			
XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 13.5MG	3	NDS			
XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 18MG	3	NDS			
XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 27MG	3	NDS			
XTAMPZA ER CAPSULE ER 12 HOUR ABUSE-DETERRENT 36MG	3	NDS			
Opioid Analgesics, Short-acting					
acetaminophen/codeine solution 120mg/5ml; 12mg/5ml	2	QL(4500 ML per 30 days); NDS			
acetaminophen/codeine tablet 300mg; 15mg	2	QL(360 EA per 30 days); NDS			
acetaminophen/codeine tablet 300mg; 30mg	2	QL(360 EA per 30 days); NDS			
acetaminophen/codeine tablet 300mg; 60mg	2	QL(180 EA per 30 days); NDS			
endocet tablet 325mg; 10mg	3	QL(360 EA per 30 days); NDS			
endocet tablet 325mg; 2.5mg	4	QL(360 EA per 30 days); NDS			
endocet tablet 325mg; 5mg	2	QL(360 EA per 30 days); NDS			
endocet tablet 325mg; 7.5mg	3	QL(360 EA per 30 days); NDS			
fentanyl citrate oral transmucosal lozenge on a handle 1200mcg	5	QL(120 EA per 30 days); PA; NDS			
fentanyl citrate oral transmucosal lozenge on a handle 1600mcg	5	QL(120 EA per 30 days); PA; NDS			
fentanyl citrate oral transmucosal lozenge on a handle 200mcg	4	QL(120 EA per 30 days); PA; NDS			
fentanyl citrate oral transmucosal lozenge on a handle 400mcg	5	QL(120 EA per 30 days); PA; NDS			
fentanyl citrate oral transmucosal lozenge on a handle 600mcg	5	QL(120 EA per 30 days); PA; NDS			
fentanyl citrate oral transmucosal lozenge on a handle 800mcg	5	QL(120 EA per 30 days); PA; NDS			
hydrocodone bitartrate/acetaminophen solution 325mg/15ml; 7.5mg/15ml	4	QL(5550 ML per 30 days); NDS			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
hydrocodone bitartrate/acetaminophen tablet 325mg; 10mg	3	QL(360 EA per 30 days); NDS	morphine sulfate solution 10mg/5ml	3	QL(900 ML per 30 days); NDS
hydrocodone bitartrate/acetaminophen tablet 325mg; 5mg	3	QL(360 EA per 30 days); NDS	morphine sulfate solution 20mg/5ml	3	QL(900 ML per 30 days); NDS
hydrocodone/acetaminophen tablet 325mg; 7.5mg	3	QL(360 EA per 30 days); NDS	morphine sulfate solution 20mg/ml	4	QL(900 ML per 30 days); NDS
hydromorphone hcl injection 10mg/ml	4	NDS	morphine sulfate tablet 15mg	3	QL(180 EA per 30 days); NDS
hydromorphone hcl injection 1mg/ml	4	NDS	morphine sulfate tablet 30mg	3	QL(180 EA per 30 days); NDS
hydromorphone hcl injection 4mg/ml	4	NDS	oxycodone hydrochloride solution 5mg/5ml	4	QL(1200 ML per 30 days); NDS
hydromorphone hcl tablet 2mg	2	QL(180 EA per 30 days); NDS	oxycodone hydrochloride tablet 10mg	2	QL(180 EA per 30 days); NDS
hydromorphone hcl tablet 4mg	2	QL(180 EA per 30 days); NDS	oxycodone hydrochloride tablet 15mg	2	QL(180 EA per 30 days); NDS
hydromorphone hcl tablet 8mg	3	QL(180 EA per 30 days); NDS	oxycodone hydrochloride tablet 20mg	3	QL(180 EA per 30 days); NDS
hydromorphone hydrochloride dosette injection 2mg/ml	4	NDS	oxycodone hydrochloride tablet 30mg	3	QL(180 EA per 30 days); NDS
hydromorphone hydrochloride injection 1mg/ml	4	NDS	oxycodone hydrochloride tablet 5mg	2	QL(360 EA per 30 days); NDS
hydromorphone hydrochloride injection 1mg/ml	4	NDS	oxycodone/acetaminophen tablet 325mg; 10mg	3	QL(360 EA per 30 days); NDS
hydromorphone hydrochloride injection 2mg/ml	4	NDS	oxycodone/acetaminophen tablet 325mg; 2.5mg	4	QL(360 EA per 30 days); NDS
hydromorphone hydrochloride injection 50mg/5ml	4	NDS	oxycodone/acetaminophen tablet 325mg; 5mg	2	QL(360 EA per 30 days); NDS
morphine sulfate injection 10mg/ml	4	NDS	oxycodone/acetaminophen tablet 325mg; 7.5mg	3	QL(360 EA per 30 days); NDS
morphine sulfate injection 4mg/ml	4	NDS	tramadol hydrochloride/acetaminophen tablet 325mg; 37.5mg	2	QL(240 EA per 30 days); NDS
morphine sulfate injection 4mg/ml	4	NDS	tramadol hydrochloride tablet 50mg	2	QL(240 EA per 30 days); NDS
morphine sulfate injection 50mg/ml	4		Anesthetics		
			Local Anesthetics		
			lidocaine/prilocaine cream 2.5%; 2.5%	4	QL(30 GM per 30 days); PA
			lidocaine ointment 5%	4	QL(150 GM per 30 days); PA
			lidocaine patch 5%	4	QL(90 EA per 30 days); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>premium lidocaine ointment 5%</i>	4	QL(150 GM per 30 days); PA	<i>naloxone hcl injection 2mg/2ml</i>	3	
Anti-Addiction/Substance Abuse Treatment Agents					
Alcohol Deterrents/Anti-craving					
<i>acamprosate calcium dr tablet delayed release 333mg</i>	4		<i>naloxone hydrochloride injection 0.4mg/ml</i>	2	
<i>disulfiram tablet 250mg</i>	4		<i>naloxone hydrochloride injection 0.4mg/ml</i>	2	
<i>disulfiram tablet 500mg</i>	4		<i>naloxone hydrochloride liquid 4mg/0.1ml</i>	4	
<i>naltrexone hcl tablet 50mg VIVITROL INJECTION 380MG</i>	2		Smoking Cessation Agents		
Opioid Dependence					
<i>buprenorphine hcl/naloxone hcl tablet sublingual 2mg; 0.5mg</i>	2	QL(360 EA per 30 days)	<i>bupropion hydrochloride er (sr) tablet extended release 12 hour 150mg</i>	2	QL(60 EA per 30 days)
<i>buprenorphine hcl/naloxone hcl tablet sublingual 8mg; 2mg</i>	2	QL(90 EA per 30 days)	<i>NICOTROL NS SOLUTION 10MG/ML</i>	4	QL(360 ML per 365 days)
<i>buprenorphine hcl tablet sublingual 2mg</i>	2		<i>varenicline starting month box tablet therapy pack 0</i>	4	QL(504 EA per 365 days)
<i>buprenorphine hcl tablet sublingual 8mg</i>	2		<i>varenicline tartrate tablet 0.5mg</i>	4	QL(504 EA per 365 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride film 12mg; 3mg</i>	4	QL(60 EA per 30 days)	<i>varenicline tartrate tablet 1mg</i>	4	QL(504 EA per 365 days)
<i>buprenorphine hydrochloride/naloxone hydrochloride film 2mg; 0.5mg</i>	4	QL(90 EA per 30 days)	Antibacterials		
<i>buprenorphine hydrochloride/naloxone hydrochloride film 4mg; 1mg</i>	4	QL(60 EA per 30 days)	Aminoglycosides		
<i>buprenorphine hydrochloride/naloxone hydrochloride film 8mg; 2mg</i>	4	QL(90 EA per 30 days)	<i>gentamicin sulfate cream 0.1%</i>	4	
<i>buprenorphine hydrochloride/naloxone hydrochloride tablet sublingual 2mg; 0.5mg</i>	2	QL(360 EA per 30 days)	<i>GENTAMICIN SULFATE INJECTION 40MG/ML</i>	4	
Opioid Reversal Agents			<i>gentamicin sulfate ointment 0.1%</i>	3	
			<i>neomycin sulfate tablet 500mg</i>	3	
			<i>paromomycin sulfate capsule 250mg</i>	4	
			<i>streptomycin sulfate injection 1gm</i>	4	
			<i>tobramycin sulfate injection 1.2gm/30ml</i>	4	
			<i>tobramycin sulfate injection 1.2gm</i>	3	
			<i>tobramycin sulfate injection 10mg/ml</i>	4	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
tobramycin sulfate injection 40mg/ml	4		daptomycin injection 350mg	4	
tobramycin sulfate injection 80mg/2ml	4		daptomycin injection 500mg	4	
Antibacterials, Other					
aztreonam injection 1gm	4		FIRVANQ SOLUTION RECONSTITUTED 25MG/ML	4	
aztreonam injection 2gm	4		FIRVANQ SOLUTION RECONSTITUTED 50MG/ML	4	QL(450 ML per 10 days)
clindacin etz pledges swab 1%	3		IMPAVIDO CAPSULE 50MG	5	
clindacin-p swab 1%	3		linezolid injection 600mg/300ml	4	
clindamycin hcl capsule 300mg	2		linezolid suspension reconstituted 100mg/5ml	5	QL(1800 ML per 28 days)
clindamycin hydrochloride capsule 150mg	2		linezolid tablet 600mg	4	QL(56 EA per 28 days)
clindamycin hydrochloride capsule 75mg	2		methenamine hippurate tablet 1gm	4	
clindamycin palmitate hydrochloride solution reconstituted 75mg/5ml	4		metronidazole vaginal gel 0.75%	4	
clindamycin phosphate cream 2%	4		metronidazole injection 500mg/100ml	4	
clindamycin phosphate injection 300mg/2ml	4		metronidazole tablet 250mg	2	
clindamycin phosphate injection 600mg/4ml	4		metronidazole tablet 500mg	2	
clindamycin phosphate injection 900mg/6ml	4		nitrofurantoin macrocrystals capsule 100mg	3	
clindamycin phosphate swab 1%	3		nitrofurantoin macrocrystals capsule 50mg	3	
colistimethate sodium injection 150mg	4		nitrofurantoin monohydrate/macrocrys ta ls capsule 100mg	2	
daptomycin/sodium chloride injection 1000mg/100ml; 0.9%	4		nitrofurantoin monohydrate capsule 100mg	2	
daptomycin/sodium chloride injection 350mg/50ml; 0.9%	4		tinidazole tablet 250mg	3	
daptomycin/sodium chloride injection 500mg/50ml; 0.9%	4		tinidazole tablet 500mg	3	
daptomycin/sodium chloride injection 700mg/100ml; 0.9%	4		trimethoprim tablet 100mg	2	

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Drug Name	Drug Tier	Requirements/ Limits
<i>vancomycin hcl injection 10gm</i>	3	
<i>vancomycin hydrochloride capsule 125mg</i>	4	QL(120 EA per 30 days)
<i>vancomycin hydrochloride capsule 250mg</i>	4	QL(240 EA per 30 days)
<i>vancomycin hydrochloride injection 1gm</i>	4	
<i>vancomycin hydrochloride injection 250mg</i>	4	
<i>vancomycin hydrochloride injection 500mg</i>	4	
<i>vancomycin hydrochloride injection 750mg</i>	4	
<i>vancomycin hydrochloride solution reconstituted 250mg/5ml</i>	4	QL(450 ML per 10 days)
<i>vancomycin hydrochloride solution reconstituted 25mg/ml</i>	4	
Beta-lactam, Cephalosporins		
<i>cefaclor capsule 250mg</i>	3	
<i>cefaclor capsule 500mg</i>	3	
<i>cefadroxil capsule 500mg</i>	2	
<i>cefadroxil suspension reconstituted 250mg/5ml</i>	2	
<i>cefadroxil suspension reconstituted 500mg/5ml</i>	2	
<i>cefazolin sodium injection 1gm</i>	4	
CEFAZOLIN INJECTION 2GM	4	
<i>cefazolin injection 3gm</i>	4	
<i>cefdinir capsule 300mg</i>	2	
<i>cefdinir suspension reconstituted 125mg/5ml</i>	3	
<i>cefdinir suspension reconstituted 250mg/5ml</i>	3	
<i>cefpime hydrochloride injection 100gm</i>	4	
<i>cefpime hydrochloride injection 2gm</i>	4	
<i>cefpime injection 1gm/50ml</i>	4	

Drug Name	Drug Tier	Requirements/ Limits
<i>cefpime injection 1gm</i>	4	
<i>cefpime injection 2gm</i>	4	
<i>cefixime capsule 400mg</i>	4	
<i>cefotaxime sodium injection 1gm</i>	3	
<i>cefotaxime sodium injection 2gm</i>	3	
<i>cefotaxime sodium injection 500mg</i>	3	
<i>cefotetan injection 1gm</i>	4	
<i>cefotetan injection 2gm</i>	4	
<i>cefoxitin sodium injection 10gm</i>	4	
<i>cefoxitin sodium injection 1gm</i>	4	
<i>cefoxitin sodium injection 2gm</i>	4	
<i>cefpodoxime proxetil suspension reconstituted 100mg/5ml</i>	4	
<i>cefpodoxime proxetil suspension reconstituted 50mg/5ml</i>	4	
<i>cefpodoxime proxetil tablet 100mg</i>	4	
<i>cefpodoxime proxetil tablet 200mg</i>	4	
<i>ceprozil suspension reconstituted 125mg/5ml</i>	3	
<i>ceprozil suspension reconstituted 250mg/5ml</i>	3	
<i>ceprozil tablet 250mg</i>	3	
<i>ceprozil tablet 500mg</i>	3	
<i>ceftazidime/dextrose injection 2gm/50ml; 5%</i>	3	
<i>ceftazidime injection 1gm</i>	4	
<i>ceftazidime injection 2gm</i>	4	
<i>ceftazidime injection 6gm</i>	4	
<i>ceftriaxone sodium injection 10gm</i>	3	
<i>ceftriaxone sodium injection 1gm</i>	4	

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<i>ceftriaxone sodium injection 250mg</i>	4		<i>amoxicillin/clavulanate potassium suspension reconstituted 400mg/5ml; 57mg/5ml</i>	2	
<i>ceftriaxone sodium injection 2gm</i>	4		<i>amoxicillin/clavulanate potassium suspension reconstituted 600mg/5ml; 42.9mg/5ml</i>	2	
<i>ceftriaxone sodium injection 500mg</i>	4		<i>amoxicillin/clavulanate potassium tablet chewable 200mg; 28.5mg</i>	2	
<i>cefuroxime axetil tablet 250mg</i>	2		<i>amoxicillin/clavulanate potassium tablet chewable 400mg; 57mg</i>	2	
<i>cefuroxime axetil tablet 500mg</i>	2		<i>amoxicillin/clavulanate potassium tablet 250mg; 125mg</i>	4	
<i>cefuroxime sodium injection 1.5gm</i>	4		<i>amoxicillin/clavulanate potassium tablet 500mg; 125mg</i>	2	
<i>cefuroxime sodium injection 750mg</i>	4		<i>amoxicillin/clavulanate potassium tablet 875mg; 125mg</i>	2	
<i>cephalexin capsule 250mg</i>	2		<i>amoxicillin capsule 250mg</i>	2	
<i>cephalexin capsule 500mg</i>	2		<i>amoxicillin capsule 500mg</i>	2	
<i>cephalexin suspension reconstituted 125mg/5ml</i>	2		<i>amoxicillin suspension reconstituted 125mg/5ml</i>	2	
<i>cephalexin suspension reconstituted 250mg/5ml</i>	2		<i>amoxicillin suspension reconstituted 200mg/5ml</i>	2	
<i>tazicef injection 1gm</i>	4		<i>amoxicillin suspension reconstituted 250mg/5ml</i>	2	
<i>tazicef injection 1gm</i>	4		<i>amoxicillin suspension reconstituted 400mg/5ml</i>	2	
<i>tazicef injection 2gm</i>	4		<i>amoxicillin tablet chewable 125mg</i>	2	
<i>tazicef injection 6gm</i>	4		<i>amoxicillin tablet chewable 250mg</i>	2	
TEFLARO INJECTION 400MG	5		<i>amoxicillin tablet 500mg</i>	2	
TEFLARO INJECTION 600MG	5		<i>ampicillin sodium injection 10gm</i>	4	
Beta-lactam, Penicillins			<i>ampicillin sodium injection 125mg</i>	4	
<i>amoxicillin/clavulanate potassium er tablet extended release 12 hour 1000mg; 62.5mg</i>	4				
<i>amoxicillin/clavulanate potassium suspension reconstituted 200mg/5ml; 28.5mg/5ml</i>	2				
<i>amoxicillin/clavulanate potassium suspension reconstituted 250mg/5ml; 62.5mg/5ml</i>	4				

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ampicillin sodium injection 1gm	4		penicillin v potassium solution reconstituted 125mg/5ml	2	
ampicillin-sulbactam injection 10gm; 5gm	4		penicillin v potassium solution reconstituted 250mg/5ml	2	
ampicillin-sulbactam injection 1gm; 0.5gm	4		penicillin v potassium tablet 250mg	2	
ampicillin-sulbactam injection 1gm; 0.5gm	4		penicillin v potassium tablet 500mg	2	
ampicillin-sulbactam injection 2gm; 1gm	4		piperacillin sodium/tazobactam sodium injection 2gm; 0.25gm	4	
ampicillin/sulbactam injection 2gm; 1gm	4		piperacillin sodium/tazobactam sodium injection 36gm; 4.5gm	4	
ampicillin capsule 500mg	2		piperacillin sodium/tazobactam sodium injection 3gm; 0.375gm	4	
AUGMENTIN SUSPENSION RECONSTITUTED 125MG/5ML; 31.25MG/5ML	4		piperacillin sodium/tazobactam sodium injection 4gm; 0.5gm	4	
BICILLIN L-A INJECTION 1200000UNIT/2ML	4		Carbapenems		
BICILLIN L-A INJECTION 2400000UNIT/4ML	4		ertapenem sodium injection 1gm	4	
BICILLIN L-A INJECTION 600000UNIT/ML	4		ertapenem injection 1gm	4	
dicloxacillin sodium capsule 250mg	2		imipenem/cilastatin injection 250mg; 250mg	4	
dicloxacillin sodium capsule 500mg	2		imipenem/cilastatin injection 500mg; 500mg	4	
nafcillin sodium injection 10gm	4		meropenem injection 1gm	4	
nafcillin sodium injection 1gm	4		meropenem injection 2gm	4	
nafcillin sodium injection 1gm	4		meropenem injection 500mg	4	
nafcillin sodium injection 2gm	4		Macrolides		
nafcillin sodium injection 2gm	4		azithromycin injection 500mg	4	
penicillin g sodium injection 5000000unit	5		azithromycin packet 1gm	3	
			azithromycin suspension reconstituted 100mg/5ml	3	

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<i>azithromycin suspension reconstituted 200mg/5ml</i>	3		CIPRO SUSPENSION RECONSTITUTED 500MG/5ML	4	
<i>azithromycin tablet 250mg</i>	2		CIPRO SUSPENSION RECONSTITUTED 5GM/100ML	4	
<i>azithromycin tablet 250mg</i>	2		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>azithromycin tablet 500mg</i>	3		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>azithromycin tablet 500mg</i>	3		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>azithromycin tablet 600mg</i>	3		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>clarithromycin er tablet extended release 24 hour 500mg</i>	4		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>clarithromycin suspension reconstituted 125mg/5ml</i>	4		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>clarithromycin suspension reconstituted 250mg/5ml</i>	4		<i>levofloxacin in d5w injection 5%; 250mg/50ml</i>	4	
<i>clarithromycin tablet 250mg</i>	3		<i>levofloxacin in d5w injection 5%; 750mg/150ml</i>	4	
<i>clarithromycin tablet 500mg</i>	3		<i>levofloxacin injection 25mg/ml</i>	4	
DIFICID TABLET 200MG	4		<i>levofloxacin solution 25mg/ml</i>	4	
<i>erythromycin dr tablet delayed release 250mg</i>	4		<i>levofloxacin tablet 250mg</i>	2	
<i>erythromycin dr tablet delayed release 333mg</i>	4		<i>levofloxacin tablet 500mg</i>	2	
<i>erythromycin dr tablet delayed release 500mg</i>	4		<i>levofloxacin tablet 750mg</i>	2	
Quinolones			<i>moxifloxacin hydrochloride/sodium hydrochloride injection 400mg/250ml; 0.8%</i>	4	
<i>ciprofloxacin hcl tablet 100mg</i>	3		<i>moxifloxacin hydrochloride tablet 400mg</i>	3	
<i>ciprofloxacin hcl tablet 750mg</i>	2		Sulfonamides		
<i>ciprofloxacin hydrochloride tablet 250mg</i>	2		<i>sulfadiazine tablet 500mg</i>	4	
<i>ciprofloxacin hydrochloride tablet 500mg</i>	2		<i>sulfamethoxazole(trimethoprim ds tablet 800mg; 160mg</i>	2	
<i>ciprofloxacin i.v.-in d5w injection 200mg/100ml; 5%</i>	4		<i>sulfamethoxazole(trimethoprim suspension 200mg/5ml; 40mg/5ml</i>	3	
<i>ciprofloxacin i.v.-in d5w injection 400mg/200ml; 5%</i>	4		<i>sulfamethoxazole(trimethoprim tablet 400mg; 80mg</i>	2	
Tetracyclines					

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demecclocycline hcl tablet 150mg	4	
demecclocycline hcl tablet 300mg	4	
demecclocycline hydrochloride tablet 300mg	4	
doxy 100 injection 100mg	4	
doxycycline hyclate capsule 100mg	3	
doxycycline hyclate capsule 50mg	3	
doxycycline hyclate injection 100mg	4	
doxycycline hyclate tablet 100mg	2	
doxycycline monohydrate capsule 100mg	3	
doxycycline monohydrate capsule 50mg	3	
doxycycline monohydrate tablet 100mg	3	
doxycycline monohydrate tablet 50mg	3	
doxycycline suspension reconstituted 25mg/5ml	3	
minocycline hcl capsule 75mg	3	
minocycline hydrochloride capsule 100mg	3	
minocycline hydrochloride capsule 50mg	3	
monodoxine nl capsule 100mg	3	
morgidox 1x100mg capsule 100mg	3	
morgidox 2x100mg capsule 100mg	3	
tetracycline hydrochloride capsule 250mg	3	
tetracycline hydrochloride capsule 500mg	3	
Anticonvulsants		
Anticonvulsants, Other		

Drug Name	Drug Tier	Requirements/ Limits
BRIVIACT SOLUTION 10MG/ML	5	QL(600 ML per 30 days); PA NSO
BRIVIACT TABLET 100MG	5	QL(60 EA per 30 days); PA NSO
BRIVIACT TABLET 10MG	5	QL(60 EA per 30 days); PA NSO
BRIVIACT TABLET 25MG	5	QL(60 EA per 30 days); PA NSO
BRIVIACT TABLET 50MG	5	QL(60 EA per 30 days); PA NSO
BRIVIACT TABLET 75MG	5	QL(60 EA per 30 days); PA NSO
EPIDIOLEX SOLUTION 100MG/ML	5	PA NSO
EPRONTIA SOLUTION 25MG/ML	4	ST NSO
felbamate suspension 600mg/5ml	5	
felbamate tablet 400mg	4	
felbamate tablet 600mg	4	
FINTEPLA SOLUTION 2.2MG/ML	5	QL(360 ML per 30 days); PA NSO
FYCOMPA SUSPENSION 0.5MG/ML	5	QL(720 ML per 30 days); ST NSO
FYCOMPA TABLET 10MG	5	QL(30 EA per 30 days); ST NSO
FYCOMPA TABLET 12MG	5	QL(30 EA per 30 days); ST NSO
FYCOMPA TABLET 2MG	4	QL(60 EA per 30 days); ST NSO
FYCOMPA TABLET 4MG	5	QL(60 EA per 30 days); ST NSO

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
FYCOMPA TABLET 6MG	5	QL(60 EA per 30 days); ST NSO	SPRITAM TABLET DISINTEGRATING SOLUBLE 1000MG	4	QL(90 EA per 30 days)
FYCOMPA TABLET 8MG	5	QL(30 EA per 30 days); ST NSO	SPRITAM TABLET DISINTEGRATING SOLUBLE 250MG	4	QL(120 EA per 30 days)
<i>lamotrigine starter kit/blue kit 25mg</i>	4		SPRITAM TABLET DISINTEGRATING SOLUBLE 500MG	4	QL(120 EA per 30 days)
<i>lamotrigine starter kit/green kit 0</i>	4		SPRITAM TABLET DISINTEGRATING SOLUBLE 750MG	4	QL(120 EA per 30 days)
<i>lamotrigine starter kit/orange kit 0</i>	4		<i>subvenite starter kit/blue kit 25mg</i>	4	
<i>lamotrigine titration kit 0</i>	4		<i>subvenite starter kit/green kit 0</i>	4	
<i>lamotrigine titration kit 0</i>	4		<i>subvenite starter kit/orange kit 0</i>	4	
<i>lamotrigine titration kit 0</i>	4		<i>subvenite tablet 100mg</i>	2	
<i>lamotrigine tablet chewable 25mg</i>	2		<i>subvenite tablet 150mg</i>	2	
<i>lamotrigine tablet chewable 5mg</i>	2		<i>subvenite tablet 200mg</i>	2	
<i>lamotrigine tablet 100mg</i>	2		<i>subvenite tablet 25mg</i>	2	
<i>lamotrigine tablet 150mg</i>	2		<i>topiramate capsule sprinkle 15mg</i>	3	
<i>lamotrigine tablet 200mg</i>	2		<i>topiramate capsule sprinkle 25mg</i>	3	
<i>lamotrigine tablet 25mg</i>	2		<i>topiramate tablet 100mg</i>	2	
<i>levetiracetam er tablet extended release 24 hour 500mg</i>	3		<i>topiramate tablet 200mg</i>	2	
<i>levetiracetam er tablet extended release 24 hour 750mg</i>	3		<i>topiramate tablet 25mg</i>	2	
<i>levetiracetam solution 100mg/ml</i>	2		<i>topiramate tablet 50mg</i>	2	
<i>levetiracetam tablet 1000mg</i>	2		XCOPRI TABLET THERAPY PACK 0	5	QL(56 EA per 28 days); PA NSO
<i>levetiracetam tablet 250mg</i>	2		XCOPRI TABLET THERAPY PACK 0	4	QL(28 EA per 180 days); PA NSO
<i>levetiracetam tablet 500mg</i>	2		XCOPRI TABLET THERAPY PACK 0	5	QL(28 EA per 180 days); PA NSO
<i>levetiracetam tablet 750mg</i>	2		XCOPRI TABLET THERAPY PACK 0	5	QL(56 EA per 28 days); PA NSO
NAYZILAM SOLUTION 5MG/0.1ML	4	QL(10 EA per 30 days)			
<i>roweepra tablet 500mg</i>	2				

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XCOPRI TABLET THERAPY PACK 0	5	QL(28 EA per 180 days); PA NSO	<i>clonazepam odt tablet disintegrating 2mg</i>	4	QL(300 EA per 30 days)
XCOPRI TABLET THERAPY PACK 0	5	QL(56 EA per 28 days); PA NSO	<i>clonazepam tablet 0.5mg</i>	3	QL(90 EA per 30 days)
XCOPRI TABLET 100MG	5	QL(120 EA per 30 days); PA NSO	<i>clonazepam tablet 1mg</i>	3	QL(90 EA per 30 days)
XCOPRI TABLET 150MG	5	QL(60 EA per 30 days); PA NSO	<i>clonazepam tablet 2mg</i>	3	QL(300 EA per 30 days)
XCOPRI TABLET 200MG	5	QL(60 EA per 30 days); PA NSO	DIACOMIT CAPSULE 250MG	5	PA NSO
XCOPRI TABLET 50MG	5	QL(240 EA per 30 days); PA NSO	DIACOMIT CAPSULE 500MG	5	PA NSO
Calcium Channel Modifying Agents			DIACOMIT PACKET 250MG	5	PA NSO
<i>ethosuximide capsule 250mg</i>	3		DIACOMIT PACKET 500MG	5	PA NSO
<i>ethosuximide solution 250mg/5ml</i>	4		<i>diazepam rectal gel gel 10mg</i>	4	
<i>methsuximide capsule 300mg</i>	4		<i>diazepam rectal gel gel 2.5mg</i>	4	
Gamma-aminobutyric Acid (GABA) Augmenting Agents			<i>diazepam rectal gel gel 20mg</i>	4	
<i>clobazam suspension 2.5mg/ml</i>	4	QL(480 ML per 30 days); PA NSO	<i>divalproex sodium dr tablet delayed release 125mg</i>	2	
<i>clobazam tablet 10mg</i>	4	QL(60 EA per 30 days); PA NSO	<i>divalproex sodium dr tablet delayed release 250mg</i>	2	
<i>clobazam tablet 20mg</i>	4	QL(60 EA per 30 days); PA NSO	<i>divalproex sodium dr tablet delayed release 500mg</i>	2	
<i>clonazepam odt tablet disintegrating 0.125mg</i>	4	QL(90 EA per 30 days)	<i>divalproex sodium er tablet extended release 24 hour 250mg</i>	2	
<i>clonazepam odt tablet disintegrating 0.25mg</i>	4	QL(90 EA per 30 days)	<i>divalproex sodium er tablet extended release 24 hour 500mg</i>	2	
<i>clonazepam odt tablet disintegrating 0.5mg</i>	4	QL(90 EA per 30 days)	<i>divalproex sodium capsule delayed release sprinkle 125mg</i>	3	
<i>clonazepam odt tablet disintegrating 1mg</i>	4	QL(90 EA per 30 days)	<i>gabapentin capsule 100mg</i>	2	QL(360 EA per 30 days)
			<i>gabapentin capsule 300mg</i>	2	QL(360 EA per 30 days)

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<i>gabapentin capsule 400mg</i>	2	QL(270 EA per 30 days)	VALTOCO 15 MG DOSE LIQUID THERAPY PACK 7.5MG/0.1ML	5	QL(10 EA per 30 days)	
<i>gabapentin solution 250mg/5ml</i>	4	QL(2160 ML per 30 days)	VALTOCO 20 MG DOSE LIQUID THERAPY PACK 10MG/0.1ML	5	QL(10 EA per 30 days)	
<i>gabapentin tablet 600mg</i>	2	QL(180 EA per 30 days)	VALTOCO 5 MG DOSE LIQUID 5MG/0.1ML	5	QL(10 EA per 30 days)	
<i>gabapentin tablet 800mg</i>	2	QL(150 EA per 30 days)	<i>vigabatrin packet 500mg</i>	5	QL(180 EA per 30 days); PA NSO	
<i>phenobarbital elixir 20mg/5ml</i>	4		<i>vigabatrin tablet 500mg</i>	5	QL(180 EA per 30 days); PA NSO	
<i>phenobarbital tablet 100mg</i>	4		<i>vigadronе packet 500mg</i>	5	QL(180 EA per 30 days); PA NSO	
<i>phenobarbital tablet 15mg</i>	4		<i>vigadronе tablet 500mg</i>	5	QL(180 EA per 30 days); PA NSO	
<i>phenobarbital tablet 16.2mg</i>	4		<i>vigpoder packet 500mg</i>	5	QL(180 EA per 30 days); PA NSO	
<i>phenobarbital tablet 30mg</i>	4		Sodium Channel Agents			
<i>phenobarbital tablet 32.4mg</i>	4		APTIOM TABLET 200MG	5	QL(180 EA per 30 days); ST NSO	
<i>phenobarbital tablet 60mg</i>	4		APTIOM TABLET 400MG	5	QL(90 EA per 30 days); ST NSO	
<i>phenobarbital tablet 64.8mg</i>	4		APTIOM TABLET 600MG	5	QL(60 EA per 30 days); ST NSO	
<i>phenobarbital tablet 97.2mg</i>	4		APTIOM TABLET 800MG	5	QL(60 EA per 30 days); ST NSO	
<i>primidone tablet 125mg</i>	2		<i>carbamazepine er capsule extended release 12 hour 100mg</i>	4		
<i>primidone tablet 250mg</i>	2		<i>carbamazepine er capsule extended release 12 hour 200mg</i>	4		
<i>primidone tablet 50mg</i>	2					
<i>SYMPAZAN FILM 10MG</i>	5	QL(60 EA per 30 days)				
<i>SYMPAZAN FILM 20MG</i>	5	QL(60 EA per 30 days)				
<i>SYMPAZAN FILM 5MG</i>	5	QL(60 EA per 30 days)				
<i>tiagabine hydrochloride tablet 12mg</i>	4					
<i>tiagabine hydrochloride tablet 16mg</i>	4					
<i>tiagabine hydrochloride tablet 2mg</i>	4					
<i>tiagabine hydrochloride tablet 4mg</i>	4					
<i>VALTOCO 10 MG DOSE LIQUID 10MG/0.1ML</i>	5	QL(10 EA per 30 days)				

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carbamazepine er capsule extended release 12 hour 300mg	4		phenytoin sodium extended capsule 200mg	3	
carbamazepine er tablet extended release 12 hour 100mg	4		phenytoin sodium extended capsule 300mg	3	
carbamazepine er tablet extended release 12 hour 200mg	4		phenytoin suspension 125mg/5ml	2	
carbamazepine er tablet extended release 12 hour 400mg	4		phenytoin tablet chewable 50mg	2	
carbamazepine suspension 100mg/5ml	4		rufinamide suspension 40mg/ml	5	QL(2760 ML per 30 days)
carbamazepine tablet chewable 100mg	2		rufinamide tablet 200mg	4	QL(480 EA per 30 days)
carbamazepine tablet 200mg	3		rufinamide tablet 400mg	5	QL(240 EA per 30 days)
DILANTIN CAPSULE 30MG	4		ZONISADE SUSPENSION 100MG/5ML	4	ST NSO
epitol tablet 200mg	3		zonisamide capsule 100mg	2	
lacosamide solution 10mg/ml	4	QL(1200 ML per 30 days)	zonisamide capsule 25mg	2	
lacosamide tablet 100mg	4	QL(60 EA per 30 days)	zonisamide capsule 50mg	2	
lacosamide tablet 150mg	4	QL(60 EA per 30 days)	Antidementia Agents		
lacosamide tablet 200mg	4	QL(60 EA per 30 days)	Antidementia Agents, Other		
lacosamide tablet 50mg	4	QL(120 EA per 30 days)	ergoloid mesylates tablet 1mg	4	
oxcarbazepine suspension 300mg/5ml	4		NAMZARIC CAPSULE EXTENDED RELEASE 24 HOUR 10MG; 14MG	4	QL(30 EA per 30 days); ST
oxcarbazepine tablet 150mg	2		NAMZARIC CAPSULE EXTENDED RELEASE 24 HOUR 10MG; 21MG	4	QL(30 EA per 30 days); ST
oxcarbazepine tablet 300mg	2		NAMZARIC CAPSULE EXTENDED RELEASE 24 HOUR 10MG; 28MG	4	QL(30 EA per 30 days); ST
oxcarbazepine tablet 600mg	2		NAMZARIC CAPSULE EXTENDED RELEASE 24 HOUR 10MG; 7MG	4	QL(30 EA per 30 days); ST
phenytek capsule 200mg	3		Cholinesterase Inhibitors		
phenytek capsule 300mg	3		donepezil hcl tablet disintegrating 10mg	3	
phenytoin sodium extended capsule 100mg	3		donepezil hcl tablet disintegrating 5mg	3	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
donepezil hydrochloride tablet 5mg	2		memantine hydrochloride er capsule extended release 24 hour 14mg	4	QL(30 EA per 30 days); PA	
galantamine hydrobromide er capsule extended release 24 hour 16mg	4	QL(30 EA per 30 days)	memantine hydrochloride er capsule extended release 24 hour 21mg	4	QL(30 EA per 30 days); PA	
galantamine hydrobromide er capsule extended release 24 hour 24mg	4	QL(30 EA per 30 days)	memantine hydrochloride er capsule extended release 24 hour 28mg	4	QL(30 EA per 30 days); PA	
galantamine hydrobromide er capsule extended release 24 hour 8mg	4	QL(30 EA per 30 days)	memantine hydrochloride er capsule extended release 24 hour 7mg	4	QL(30 EA per 30 days); PA	
galantamine hydrobromide solution 4mg/ml	4		memantine hydrochloride tablet 10mg	2	PA	
galantamine hydrobromide tablet 12mg	3	QL(60 EA per 30 days)	memantine hydrochloride tablet 5mg	2	PA	
galantamine hydrobromide tablet 4mg	3	QL(60 EA per 30 days)	Antidepressants			
galantamine hydrobromide tablet 8mg	3	QL(60 EA per 30 days)	Antidepressants, Other			
rivastigmine tartrate capsule 1.5mg	4	QL(60 EA per 30 days)	AUVELITY TABLET EXTENDED RELEASE 105MG; 45MG	3	QL(60 EA per 30 days); ST NSO	
rivastigmine tartrate capsule 3mg	4	QL(60 EA per 30 days)	bupropion hcl tablet 100mg	2		
rivastigmine tartrate capsule 4.5mg	4	QL(60 EA per 30 days)	bupropion hydrochloride er (sr) tablet extended release 12 hour 100mg	2	QL(90 EA per 30 days)	
rivastigmine tartrate capsule 6mg	4	QL(60 EA per 30 days)	bupropion hydrochloride er (sr) tablet extended release 12 hour 150mg	2	QL(60 EA per 30 days)	
rivastigmine transdermal system patch 24 hour 13.3mg/24hr	4		bupropion hydrochloride er (sr) tablet extended release 12 hour 200mg	2	QL(60 EA per 30 days)	
rivastigmine transdermal system patch 24 hour 4.6mg/24hr	4		bupropion hydrochloride er (xl) tablet extended release 24 hour 150mg	2	QL(90 EA per 30 days)	
rivastigmine transdermal system patch 24 hour 9.5mg/24hr	4		bupropion hydrochloride er (xl) tablet extended release 24 hour 300mg	2	QL(30 EA per 30 days)	
N-methyl-D-aspartate (NMDA) Receptor Antagonist			bupropion hydrochloride tablet 75mg	2		
memantine hcl titration pak tablet 0	2	PA	maprotiline hcl tablet 25mg	4		
			maprotiline hcl tablet 50mg	4		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
maprotiline hcl tablet 75mg	4		<i>SSRIs/SNRIs (Selective Serotonin Reuptake Inhibitors/Serotonin and Norepinephrine Reuptake Inhibitor</i>		
mirtazapine odt tablet disintegrating 15mg	3	QL(30 EA per 30 days)	citalopram hydrobromide solution 10mg/5ml	4	
mirtazapine odt tablet disintegrating 30mg	3	QL(30 EA per 30 days)	citalopram hydrobromide tablet 10mg	1	
mirtazapine odt tablet disintegrating 45mg	3	QL(30 EA per 30 days)	citalopram hydrobromide tablet 20mg	1	
mirtazapine tablet 15mg	2		citalopram hydrobromide tablet 40mg	1	
mirtazapine tablet 30mg	2		desvenlafaxine er tablet extended release 24 hour 100mg	4	QL(120 EA per 30 days)
mirtazapine tablet 45mg	2		desvenlafaxine er tablet extended release 24 hour 25mg	4	QL(30 EA per 30 days)
mirtazapine tablet 7.5mg	2		desvenlafaxine er tablet extended release 24 hour 50mg	4	QL(30 EA per 30 days)
SPRAVATO 56MG DOSE SOLUTION THERAPY PACK 0	5	PA NSO	DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 20MG	4	QL(60 EA per 30 days)
SPRAVATO 84MG DOSE SOLUTION THERAPY PACK 0	5	PA NSO	DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 30MG	4	QL(90 EA per 30 days)
ZURZUVAE CAPSULE 20MG	5	QL(28 EA per 14 days); PA NSO	DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 40MG	4	QL(90 EA per 30 days)
ZURZUVAE CAPSULE 25MG	5	QL(28 EA per 14 days); PA NSO	DRIZALMA SPRINKLE CAPSULE DELAYED RELEASE SPRINKLE 60MG	4	QL(60 EA per 30 days)
ZURZUVAE CAPSULE 30MG	5	QL(14 EA per 14 days); PA NSO	duloxetine hydrochloride capsule delayed release particles 20mg	2	QL(60 EA per 30 days)
<i>Monoamine Oxidase Inhibitors</i>			duloxetine hydrochloride capsule delayed release particles 30mg	2	QL(90 EA per 30 days)
EMSAM PATCH 24 HOUR 12MG/24HR	4	QL(30 EA per 30 days); ST NSO			
EMSAM PATCH 24 HOUR 6MG/24HR	4	QL(30 EA per 30 days); ST NSO			
EMSAM PATCH 24 HOUR 9MG/24HR	4	QL(30 EA per 30 days); ST NSO			
MARPLAN TABLET 10MG	4	QL(180 EA per 30 days)			
phenelzine sulfate tablet 15mg	3				
tranylcypromine sulfate tablet 10mg	4				

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
duloxetine hydrochloride capsule delayed release particles 60mg	2	QL(60 EA per 30 days)	nefazodone hydrochloride tablet 150mg	4	
escitalopram oxalate solution 5mg/5ml	4	QL(600 ML per 30 days)	nefazodone hydrochloride tablet 200mg	4	
escitalopram oxalate tablet 10mg	2		nefazodone hydrochloride tablet 250mg	4	
escitalopram oxalate tablet 20mg	2		nefazodone hydrochloride tablet 50mg	4	
escitalopram oxalate tablet 5mg	2		paroxetine hcl tablet 30mg	2	
FETZIMA TITRATION PACK CAPSULE ER 24 HOUR THERAPY PACK 0	4	QL(56 EA per 365 days); ST NSO	paroxetine hcl tablet 40mg	2	
FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 120MG	4	QL(30 EA per 30 days); ST NSO	paroxetine hydrochloride suspension 10mg/5ml	4	
FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 20MG	4	QL(30 EA per 30 days); ST NSO	paroxetine hydrochloride tablet 10mg	2	
FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 40MG	4	QL(30 EA per 30 days); ST NSO	paroxetine hydrochloride tablet 20mg	2	
FETZIMA CAPSULE EXTENDED RELEASE 24 HOUR 80MG	4	QL(30 EA per 30 days); ST NSO	sertraline hcl concentrate 20mg/ml	4	
fluoxetine hydrochloride capsule 10mg	1	QL(30 EA per 30 days)	sertraline hcl tablet 50mg	1	QL(60 EA per 30 days)
fluoxetine hydrochloride capsule 20mg	1		sertraline hydrochloride tablet 100mg	1	QL(60 EA per 30 days)
fluoxetine hydrochloride capsule 40mg	1		sertraline hydrochloride tablet 25mg	1	QL(30 EA per 30 days)
fluoxetine hydrochloride solution 20mg/5ml	4		trazodone hydrochloride tablet 100mg	2	
fluvoxamine maleate tablet 100mg	2	QL(90 EA per 30 days)	trazodone hydrochloride tablet 150mg	2	
fluvoxamine maleate tablet 25mg	3	QL(30 EA per 30 days)	trazodone hydrochloride tablet 50mg	2	
fluvoxamine maleate tablet 50mg	3	QL(60 EA per 30 days)	TRINTELLIX TABLET 10MG	4	QL(30 EA per 30 days)
nefazodone hydrochloride tablet 100mg	4		TRINTELLIX TABLET 20MG	4	QL(30 EA per 30 days)
			TRINTELLIX TABLET 5MG	4	QL(30 EA per 30 days)
			venlafaxine hydrochloride er capsule extended release 24 hour 150mg	2	QL(30 EA per 30 days)
			venlafaxine hydrochloride er capsule extended release 24 hour 37.5mg	2	QL(30 EA per 30 days)

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venlafaxine hydrochloride er capsule extended release 24 hour 75mg	2	QL(90 EA per 30 days)	clomipramine hydrochloride capsule 50mg	4	
venlafaxine hydrochloride tablet 100mg	2		clomipramine hydrochloride capsule 75mg	4	
venlafaxine hydrochloride tablet 25mg	2		desipramine hydrochloride tablet 100mg	4	
venlafaxine hydrochloride tablet 37.5mg	2		desipramine hydrochloride tablet 10mg	4	
venlafaxine hydrochloride tablet 50mg	2		desipramine hydrochloride tablet 150mg	4	
venlafaxine hydrochloride tablet 75mg	2		desipramine hydrochloride tablet 25mg	4	
VIIBRYD STARTER PACK KIT 0	4	QL(60 EA per 365 days)	desipramine hydrochloride tablet 50mg	4	
vilazodone hydrochloride tablet 10mg	4	QL(30 EA per 30 days)	desipramine hydrochloride tablet 75mg	4	
vilazodone hydrochloride tablet 20mg	4	QL(30 EA per 30 days)	doxepin hcl capsule 75mg	3	
vilazodone hydrochloride tablet 40mg	4	QL(30 EA per 30 days)	doxepin hcl concentrate 10mg/ml	4	
Tricyclics			doxepin hydrochloride capsule 100mg	3	
amitriptyline hcl tablet 100mg	3		doxepin hydrochloride capsule 10mg	3	
amitriptyline hcl tablet 150mg	3		doxepin hydrochloride capsule 150mg	3	
amitriptyline hcl tablet 25mg	3		doxepin hydrochloride capsule 25mg	3	
amitriptyline hcl tablet 75mg	3		doxepin hydrochloride capsule 50mg	3	
amitriptyline hydrochloride tablet 100mg	3		imipramine hcl tablet 25mg	4	
amitriptyline hydrochloride tablet 10mg	3		imipramine hcl tablet 50mg	4	
amitriptyline hydrochloride tablet 50mg	3		imipramine hydrochloride tablet 10mg	4	
amoxapine tablet 100mg	4		nortriptyline hcl capsule 25mg	2	
amoxapine tablet 150mg	4		nortriptyline hcl capsule 75mg	2	
amoxapine tablet 25mg	4				
amoxapine tablet 50mg	4				
clomipramine hydrochloride capsule 25mg	4				

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nortriptyline hcl solution 10mg/5ml	4		scopolamine patch 72 hour 1mg/3days	4	
nortriptyline hydrochloride capsule 10mg	2		Emetogenic Therapy Adjuncts		
nortriptyline hydrochloride capsule 50mg	2		aprepitant capsule 0	4	QL(6 EA per 30 days); B/D
protriptyline hcl tablet 10mg	4		aprepitant capsule 125mg	4	QL(2 EA per 30 days); B/D
protriptyline hcl tablet 5mg	4		aprepitant capsule 40mg	4	QL(1 EA per 30 days); B/D
trimipramine maleate capsule 100mg	4		aprepitant capsule 80mg	4	QL(8 EA per 30 days); B/D
trimipramine maleate capsule 25mg	4		dronabinol capsule 10mg	4	QL(60 EA per 30 days); PA
trimipramine maleate capsule 50mg	4		dronabinol capsule 2.5mg	4	QL(60 EA per 30 days); PA
Antiemetics			dronabinol capsule 5mg	4	QL(60 EA per 30 days); PA
Antiemetics, Other			ondansetron hcl solution 4mg/5ml	4	QL(450 ML per 30 days); B/D
compro suppository 25mg	4		ondansetron	4	
meclizine hcl tablet 12.5mg	3		hydrochloride injection 4mg/2ml		
meclizine hcl tablet 25mg	3		ondansetron	2	B/D
procchlorperazine edisylate injection 10mg/2ml	4		hydrochloride tablet 4mg		
procchlorperazine maleate tablet 10mg	2		ondansetron	2	B/D
procchlorperazine maleate tablet 5mg	2		hydrochloride tablet 8mg		
procchlorperazine suppository 25mg	4		ondansetron odt tablet disintegrating 4mg	3	B/D
promethazine hcl suppository 12.5mg	4		ondansetron odt tablet disintegrating 8mg	3	B/D
promethazine hcl tablet 12.5mg	3		Antifungals		
promethazine hydrochloride plain syrup 6.25mg/5ml	4		Antifungals		
promethazine hydrochloride tablet 25mg	3		ABELCET INJECTION 5MG/ML	4	B/D
promethazine hydrochloride tablet 50mg	3		amphotericin b liposome injection 50mg	5	B/D
			amphotericin b injection 50mg	4	B/D
			caspofungin acetate injection 50mg	4	
			CASPOFUNGIN ACETATE INJECTION 70MG	4	

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Drug Name	Drug Tier	Requirements/Limits
<i>clotrimazole cream 1%</i>	3	QL(45 GM per 28 days)
<i>clotrimazole troche 10mg</i>	4	
<i>econazole nitrate cream 1%</i>	3	QL(85 GM per 28 days)
<i>fluconazole in sodium chloride injection 200mg/100ml; 0.9%</i>	4	
<i>fluconazole in sodium chloride injection 400mg/200ml; 0.9%</i>	4	
<i>fluconazole suspension reconstituted 10mg/ml</i>	3	
<i>fluconazole suspension reconstituted 40mg/ml</i>	3	
<i>fluconazole tablet 100mg</i>	2	
<i>fluconazole tablet 150mg</i>	2	
<i>fluconazole tablet 200mg</i>	2	
<i>fluconazole tablet 50mg</i>	2	
<i>flucytosine capsule 250mg</i>	5	
<i>flucytosine capsule 500mg</i>	5	
<i>griseofulvin microsize suspension 125mg/5ml</i>	4	
<i>griseofulvin microsize tablet 500mg</i>	4	
<i>griseofulvin ultramicrosize tablet 125mg</i>	4	
<i>griseofulvin ultramicrosize tablet 250mg</i>	4	
<i>itraconazole capsule 100mg</i>	4	QL(120 EA per 30 days); PA
JUBLIA SOLUTION 10%	4	
<i>ketoconazole cream 2%</i>	3	QL(90 GM per 30 days)
<i>ketoconazole shampoo 2%</i>	2	QL(120 ML per 28 days)
<i>ketoconazole tablet 200mg</i>	3	
<i>klayesta powder 100000unit/gm</i>	3	QL(120 GM per 30 days)
<i>nyamyc powder 100000unit/gm</i>	3	QL(120 GM per 30 days)
<i>nystatin cream 100000unit/gm</i>	2	

Drug Name	Drug Tier	Requirements/Limits
<i>nystatin ointment 100000unit/gm</i>	2	
<i>nystatin powder 100000unit/gm</i>	3	QL(120 GM per 30 days)
<i>nystatin suspension 100000unit/ml</i>	3	
<i>nystatin tablet 500000unit</i>	4	
<i>nystop powder 100000unit/gm</i>	3	QL(120 GM per 30 days)
<i>posaconazole dr tablet delayed release 100mg</i>	4	QL(96 EA per 30 days); PA
<i>posaconazole suspension 40mg/ml</i>	5	PA
<i>terbinafine hcl tablet 250mg</i>	2	QL(84 EA per 180 days)
<i>terconazole cream 0.4%</i>	3	
<i>terconazole cream 0.8%</i>	3	
<i>voriconazole injection 200mg</i>	4	PA
<i>voriconazole suspension reconstituted 40mg/ml</i>	4	
<i>voriconazole tablet 200mg</i>	4	QL(120 EA per 30 days)
<i>voriconazole tablet 50mg</i>	4	QL(120 EA per 30 days)
Antigout Agents		
Antigout Agents		
<i>allopurinol tablet 100mg</i>	2	
<i>allopurinol tablet 300mg</i>	2	
<i>COLCHICINE TABLET 0.6MG</i>	4	
<i>febuxostat tablet 40mg</i>	4	ST
<i>febuxostat tablet 80mg</i>	4	ST
<i>probenecid/colchicine tablet 0.5mg; 500mg</i>	3	
<i>probenecid tablet 500mg</i>	4	
Antimigraine Agents		
Ergot Alkaloids		
<i>dihydroergotamine mesylate solution 4mg/ml</i>	4	QL(8 ML per 30 days); PA
<i>ergotamine tartrate/caffeine tablet 100mg; 1mg</i>	3	QL(24 EA per 28 days)
Prophylactic		

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AIMOVIG INJECTION 140MG/ML	4	QL(1 ML per 28 days); PA	<i>sumatriptan succinate injection 6mg/0.5ml</i>	4	QL(5 ML per 30 days)
AIMOVIG INJECTION 70MG/ML	4	QL(2 ML per 28 days); PA	<i>sumatriptan succinate injection 6mg/0.5ml</i>	4	QL(5 ML per 30 days)
EMGALITY INJECTION 100MG/ML	5	QL(3 ML per 28 days); PA	<i>sumatriptan succinate injection 6mg/0.5ml</i>	4	QL(5 ML per 30 days)
EMGALITY INJECTION 120MG/ML	4	QL(2 ML per 28 days); PA	<i>sumatriptan succinate injection 6mg/0.5ml</i>	4	QL(5 ML per 30 days)
EMGALITY INJECTION 120MG/ML	4	QL(2 ML per 28 days); PA	<i>sumatriptan succinate tablet 100mg</i>	2	QL(9 EA per 30 days)
NURTEC TABLET DISINTEGRATING 75MG	5	QL(18 EA per 30 days)	<i>sumatriptan succinate tablet 25mg</i>	2	QL(9 EA per 30 days)
<i>propranolol hcl tablet 40mg</i>	2		<i>sumatriptan succinate tablet 50mg</i>	2	QL(9 EA per 30 days)
<i>propranolol hydrochloride tablet 10mg</i>	2		<i>sumatriptan solution 20mg/act</i>	4	QL(12 EA per 30 days)
<i>propranolol hydrochloride tablet 20mg</i>	2		<i>sumatriptan solution 5mg/act</i>	4	QL(12 EA per 30 days)
<i>propranolol hydrochloride tablet 60mg</i>	2		<i>zolmitriptan tablet 2.5mg</i>	4	QL(12 EA per 30 days)
<i>propranolol hydrochloride tablet 80mg</i>	2		<i>zolmitriptan tablet 5mg</i>	4	QL(12 EA per 30 days)
UBRELVY TABLET 100MG	5	QL(16 EA per 30 days); PA	Antimyasthenic Agents		
UBRELVY TABLET 50MG	5	QL(16 EA per 30 days); PA	Parasympathomimetics		
Serotonin (5-HT) Receptor Agonist			<i>guanidine hcl tablet 125mg</i>	4	
<i>naratriptan hcl tablet 1mg</i>	3	QL(9 EA per 30 days)	<i>pyridostigmine bromide tablet 60mg</i>	3	
<i>naratriptan hcl tablet 2.5mg</i>	4	QL(9 EA per 30 days)	Antimycobacterials		
<i>rizatriptan benzoate odt tablet disintegrating 10mg</i>	3	QL(18 EA per 30 days)	<i>dapsone tablet 100mg</i>	3	
<i>rizatriptan benzoate odt tablet disintegrating 5mg</i>	3	QL(18 EA per 30 days)	<i>dapsone tablet 25mg</i>	3	
<i>rizatriptan benzoate tablet 10mg</i>	2	QL(18 EA per 30 days)	<i>rifabutin capsule 150mg</i>	4	
<i>rizatriptan benzoate tablet 5mg</i>	2	QL(18 EA per 30 days)	Antituberculars		
<i>sumatriptan succinate injection 4mg/0.5ml</i>	4	QL(5 ML per 30 days)	<i>cycloserine capsule 250mg</i>	5	
<i>sumatriptan succinate injection 4mg/0.5ml</i>	4	QL(5 ML per 30 days)	<i>ethambutol hydrochloride tablet 100mg</i>	3	
			<i>ethambutol hydrochloride tablet 400mg</i>	3	
			ISONIAZID INJECTION 100MG/ML	4	
			<i>isoniazid syrup 50mg/5ml</i>	4	
			<i>isoniazid tablet 100mg</i>	2	

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<i>isoniazid tablet 300mg</i>	2		ERLEADA TABLET 60MG	5	QL(120 EA per 30 days); PA NSO
<i>paser packet 4gm</i>	4		<i>flutamide capsule 125mg</i>	4	
PRIFTIN TABLET 150MG	4		<i>nilotamide tablet 150mg</i>	5	QL(60 EA per 30 days)
<i>pyrazinamide tablet 500mg</i>	4		NUBEQA TABLET 300MG	5	QL(120 EA per 30 days); PA NSO
<i>rifampin capsule 150mg</i>	4		XTANDI CAPSULE 40MG	5	QL(120 EA per 30 days); PA NSO
<i>rifampin capsule 300mg</i>	4		XTANDI TABLET 40MG	5	QL(120 EA per 30 days); PA NSO
<i>rifampin injection 600mg</i>	4		XTANDI TABLET 80MG	5	QL(60 EA per 30 days); PA NSO
SIRTURO TABLET 100MG	5		Antiangiogenic Agents		
SIRTURO TABLET 20MG	5		FOTIVDA CAPSULE 0.89MG	5	QL(21 EA per 28 days); PA NSO
TRECATOR TABLET 250MG	4		FOTIVDA CAPSULE 1.34MG	5	QL(21 EA per 28 days); PA NSO
Antineoplastics			<i>lenalidomide capsule 10mg</i>	5	PA NSO
Alkylating Agents			<i>lenalidomide capsule 15mg</i>	5	PA NSO
<i>cyclophosphamide capsule 25mg</i>	3	B/D	<i>lenalidomide capsule 2.5mg</i>	5	PA NSO
<i>cyclophosphamide capsule 50mg</i>	3	B/D	<i>lenalidomide capsule 20mg</i>	5	PA NSO
GLEOSTINE CAPSULE 100MG	4		<i>lenalidomide capsule 25mg</i>	5	PA NSO
GLEOSTINE CAPSULE 10MG	4		<i>lenalidomide capsule 5mg</i>	5	PA NSO
GLEOSTINE CAPSULE 40MG	4		POMALYST CAPSULE 1MG	5	QL(21 EA per 28 days); PA NSO
LEUKERAN TABLET 2MG	5		POMALYST CAPSULE 2MG	5	QL(21 EA per 28 days); PA NSO
MATULANE CAPSULE 50MG	5				
VALCHLOR GEL 0.016%	5	QL(60 GM per 14 days); PA NSO			
Antiandrogens					
<i>abiraterone acetate tablet 250mg</i>	4	QL(120 EA per 30 days); PA NSO			
<i>abiraterone acetate tablet 500mg</i>	4	QL(60 EA per 30 days); PA NSO			
<i>bicalutamide tablet 50mg</i>	3				
ERLEADA TABLET 240MG	5	PA NSO			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
POMALYST CAPSULE 3MG	5	QL(21 EA per 28 days); PA NSO	DROXIA CAPSULE 400MG	3	
POMALYST CAPSULE 4MG	5	QL(21 EA per 28 days); PA NSO	<i>hydroxyurea capsule 500mg mercaptopurine tablet 50mg</i>	2	
QINLOCK TABLET 50MG	5	QL(90 EA per 30 days); PA NSO	PURIXAN SUSPENSION 2000MG/100ML	5	
TABRECTA TABLET 150MG	5	QL(120 EA per 30 days); PA NSO	TABLOID TABLET 40MG	4	
TABRECTA TABLET 200MG	5	QL(120 EA per 30 days); PA NSO	Antineoplastics, Other		
THALOMID CAPSULE 100MG	5	QL(28 EA per 28 days); PA NSO	AKEEGA TABLET 500MG; 100MG	5	PA NSO
THALOMID CAPSULE 150MG	5	QL(56 EA per 28 days); PA NSO	AKEEGA TABLET 500MG; 50MG	5	PA NSO
THALOMID CAPSULE 200MG	5	QL(56 EA per 28 days); PA NSO	BESREMI INJECTION 500MCG/ML	5	PA NSO
THALOMID CAPSULE 50MG	5	QL(28 EA per 28 days); PA NSO	COLUMVI INJECTION 10MG/10ML	5	PA NSO
Antiestrogens/Modifiers			COLUMVI INJECTION 2.5MG/2.5ML	5	PA NSO
EMCYT CAPSULE 140MG	5		EPKINLY INJECTION 48MG/0.8ML	5	PA NSO
SOLTAMOX SOLUTION 10MG/5ML	4		EPKINLY INJECTION 4MG/0.8ML	5	PA NSO
<i>tamoxifen citrate tablet 10mg</i>	2		GAVRETO CAPSULE 100MG	5	QL(120 EA per 30 days); PA NSO
<i>tamoxifen citrate tablet 20mg</i>	2		IBRANCE TABLET 100MG	5	QL(21 EA per 28 days); PA NSO
<i>toremifene citrate tablet 60mg</i>	5	QL(30 EA per 30 days)	IBRANCE TABLET 125MG	5	QL(21 EA per 28 days); PA NSO
Antimetabolites			IBRANCE TABLET 75MG	5	QL(21 EA per 28 days); PA NSO
DROXIA CAPSULE 200MG	3		IDHIFA TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
DROXIA CAPSULE 300MG	3		IDHIFA TABLET 50MG	5	QL(30 EA per 30 days); PA NSO

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
INREBIC CAPSULE 100MG	5	QL(120 EA per 30 days); PA NSO	ONUREG TABLET 300MG	5	QL(14 EA per 14 days); PA NSO
IWILFIN TABLET 192MG	5	PA NSO	ORSERDU TABLET 345MG	5	PA NSO
KISQALI FEMARA 200 DOSE TABLET THERAPY PACK 2.5MG; 200MG	5	QL(49 EA per 28 days); PA NSO	ORSERDU TABLET 86MG	5	PA NSO
KISQALI FEMARA 400 DOSE TABLET THERAPY PACK 2.5MG; 200MG	5	QL(70 EA per 28 days); PA NSO	PEMAZYRE TABLET 13.5MG	5	QL(30 EA per 30 days); PA NSO
KISQALI FEMARA 600 DOSE TABLET THERAPY PACK 2.5MG; 200MG	5	QL(91 EA per 28 days); PA NSO	PEMAZYRE TABLET 4.5MG	5	QL(30 EA per 30 days); PA NSO
KRAZATI TABLET 200MG	5	PA NSO	PEMAZYRE TABLET 9MG	5	QL(30 EA per 30 days); PA NSO
LONSURF TABLET 6.14MG; 15MG	5	PA NSO	PHESGO INJECTION 2000UNIT/ML; 60MG/ML; 60MG/ML	5	PA NSO
LONSURF TABLET 8.19MG; 20MG	5	PA NSO	PHESGO INJECTION 2000UNIT/ML; 80MG/ML; 40MG/ML	5	PA NSO
LUMAKRAS TABLET 120MG	5	PA NSO	RETEVMO CAPSULE 40MG	5	QL(180 EA per 30 days); PA NSO
LUMAKRAS TABLET 320MG	5	PA NSO	RETEVMO CAPSULE 80MG	5	QL(120 EA per 30 days); PA NSO
LYTGOBI TABLET THERAPY PACK 4MG	5	PA NSO	SCEMBLIX TABLET 20MG	5	QL(60 EA per 30 days); PA NSO
LYTGOBI TABLET THERAPY PACK 4MG	5	PA NSO	SCEMBLIX TABLET 40MG	5	QL(300 EA per 30 days); PA NSO
NINLARO CAPSULE 2.3MG	5	QL(3 EA per 28 days); PA NSO	SYNRIBO INJECTION 3.5MG	5	PA NSO
NINLARO CAPSULE 3MG	5	QL(3 EA per 28 days); PA NSO	TAZVERIK TABLET 200MG	5	QL(240 EA per 30 days); PA NSO
NINLARO CAPSULE 4MG	5	QL(3 EA per 28 days); PA NSO	TRUSELTIQ CAPSULE THERAPY PACK 0	5	QL(42 EA per 21 days); PA NSO
OGSIVEO TABLET 50MG	5	PA NSO			
ONUREG TABLET 200MG	5	QL(14 EA per 14 days); PA NSO			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
TRUSELTIQ CAPSULE THERAPY PACK 100MG	5	QL(21 EA per 21 days); PA NSO	XPOVIO TABLET THERAPY PACK 40MG	5	PA NSO
TRUSELTIQ CAPSULE THERAPY PACK 25MG	5	QL(63 EA per 21 days); PA NSO	XPOVIO TABLET THERAPY PACK 50MG	5	PA NSO
TRUSELTIQ CAPSULE THERAPY PACK 25MG	5	QL(42 EA per 21 days); PA NSO	XPOVIO TABLET THERAPY PACK 60MG	5	PA NSO
TUKYSA TABLET 150MG	5	QL(120 EA per 30 days); PA NSO	ZOLINZA CAPSULE 100MG	5	PA NSO
TUKYSA TABLET 50MG	5	QL(300 EA per 30 days); PA NSO	<i>Antineoplastics</i>		
VONJO CAPSULE 100MG	5	QL(120 EA per 30 days); PA NSO	OPDUALAG INJECTION 240MG/20ML; 80MG/20ML	5	PA NSO
XPOVIO 100 MG ONCE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	<i>Aromatase Inhibitors, 3rd Generation</i>		
XPOVIO 40 MG ONCE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	<i>anastrozole tablet 1mg</i>	2	
XPOVIO 40 MG TWICE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	<i>exemestane tablet 25mg</i>	4	
XPOVIO 60 MG ONCE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	<i>letrozole tablet 2.5mg</i>	2	
XPOVIO 60 MG TWICE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	<i>Molecular Target Inhibitors</i>		
XPOVIO 80 MG ONCE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	ALECENSA CAPSULE 150MG	5	QL(240 EA per 30 days); PA NSO
XPOVIO 80 MG TWICE WEEKLY TABLET THERAPY PACK 20MG	5	PA NSO	ALUNBRIG TABLET THERAPY PACK 0	5	QL(60 EA per 365 days); PA NSO
XPOVIO TABLET THERAPY PACK 40MG	5	PA NSO	ALUNBRIG TABLET 180MG	5	QL(30 EA per 30 days); PA NSO
XPOVIO TABLET THERAPY PACK 40MG	5	PA NSO	ALUNBRIG TABLET 30MG	5	QL(120 EA per 30 days); PA NSO
			ALUNBRIG TABLET 90MG	5	QL(30 EA per 30 days); PA NSO
			AYVAKIT TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
			AYVAKIT TABLET 200MG	5	QL(30 EA per 30 days); PA NSO
			AYVAKIT TABLET 25MG	5	QL(30 EA per 30 days); PA NSO

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
AYVAKIT TABLET 300MG	5	QL(30 EA per 30 days); PA NSO	CABOMETYX TABLET 60MG	5	QL(30 EA per 30 days); PA NSO
AYVAKIT TABLET 50MG	5	QL(30 EA per 30 days); PA NSO	CALQUENCE CAPSULE 100MG	5	QL(60 EA per 30 days); PA NSO
BALVERSA TABLET 3MG	5	QL(90 EA per 30 days); PA NSO	CALQUENCE TABLET 100MG	5	PA NSO
BALVERSA TABLET 4MG	5	QL(60 EA per 30 days); PA NSO	CAPRELSA TABLET 100MG	5	QL(60 EA per 30 days); PA NSO
BALVERSA TABLET 5MG	5	QL(30 EA per 30 days); PA NSO	CAPRELSA TABLET 300MG	5	QL(30 EA per 30 days); PA NSO
BOSULIF CAPSULE 100MG	5	QL(90 EA per 30 days); PA NSO	COMETRIQ KIT 0	5	QL(112 EA per 28 days); PA NSO
BOSULIF CAPSULE 50MG	5	QL(30 EA per 30 days); PA NSO	COMETRIQ KIT 0	5	QL(56 EA per 28 days); PA NSO
BOSULIF TABLET 100MG	5	QL(90 EA per 30 days); PA NSO	COMETRIQ KIT 20MG	5	QL(84 EA per 28 days); PA NSO
BOSULIF TABLET 400MG	5	QL(30 EA per 30 days); PA NSO	COPIKTRA CAPSULE 15MG	5	QL(60 EA per 30 days); PA NSO
BOSULIF TABLET 500MG	5	QL(30 EA per 30 days); PA NSO	COPIKTRA CAPSULE 25MG	5	QL(60 EA per 30 days); PA NSO
BRAFTOVI CAPSULE 75MG	5	QL(180 EA per 30 days); PA NSO	COTELLIC TABLET 20MG	5	QL(63 EA per 28 days); PA NSO
BRUKINSA CAPSULE 80MG	5	QL(120 EA per 30 days); PA NSO	DAURISMO TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
CABOMETYX TABLET 20MG	5	QL(30 EA per 30 days); PA NSO	DAURISMO TABLET 25MG	5	QL(60 EA per 30 days); PA NSO
CABOMETYX TABLET 40MG	5	QL(30 EA per 30 days); PA NSO	ERIVEDGE CAPSULE 150MG	5	QL(30 EA per 30 days); PA NSO
<i>erlotinib hydrochloride tablet 100mg</i>			<i>erlotinib hydrochloride tablet 100mg</i>		QL(30 EA per 30 days); PA NSO

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
erlotinib hydrochloride tablet 150mg	5	QL(30 EA per 30 days); PA NSO	GILOTRIF TABLET 20MG	5	QL(30 EA per 30 days); PA NSO
erlotinib hydrochloride tablet 25mg	5	QL(60 EA per 30 days); PA NSO	GILOTRIF TABLET 30MG	5	QL(30 EA per 30 days); PA NSO
everolimus tablet soluble 2mg	5	QL(330 EA per 30 days); PA NSO	GILOTRIF TABLET 40MG	5	QL(30 EA per 30 days); PA NSO
everolimus tablet soluble 3mg	5	QL(240 EA per 30 days); PA NSO	IBRANCE CAPSULE 100MG	5	QL(21 EA per 28 days); PA NSO
everolimus tablet soluble 5mg	5	QL(180 EA per 30 days); PA NSO	IBRANCE CAPSULE 125MG	5	QL(21 EA per 28 days); PA NSO
everolimus tablet 10mg	5	QL(30 EA per 30 days); PA NSO	IBRANCE CAPSULE 75MG	5	QL(21 EA per 28 days); PA NSO
everolimus tablet 2.5mg	5	QL(30 EA per 30 days); PA NSO	ICLUSIG TABLET 10MG	5	QL(30 EA per 30 days); PA NSO
everolimus tablet 5mg	5	QL(30 EA per 30 days); PA NSO	ICLUSIG TABLET 15MG	5	QL(30 EA per 30 days); PA NSO
everolimus tablet 7.5mg	5	QL(30 EA per 30 days); PA NSO	ICLUSIG TABLET 30MG	5	QL(30 EA per 30 days); PA NSO
EXKIVITY CAPSULE 40MG	5	QL(120 EA per 30 days)	ICLUSIG TABLET 45MG	5	QL(30 EA per 30 days); PA NSO
FARYDAK CAPSULE 10MG	5		imatinib mesylate tablet 100mg	3	QL(180 EA per 30 days); PA NSO
FARYDAK CAPSULE 15MG	5		imatinib mesylate tablet 400mg	4	QL(60 EA per 30 days); PA NSO
FARYDAK CAPSULE 20MG	5		IMBRUVICA CAPSULE 140MG	5	QL(120 EA per 30 days); PA NSO
FRUZAQLA CAPSULE 1MG	5	PA NSO	IMBRUVICA CAPSULE 70MG	5	QL(30 EA per 30 days); PA NSO
FRUZAQLA CAPSULE 5MG	5	PA NSO	IMBRUVICA SUSPENSION 70MG/ML	5	PA NSO
gefitinib tablet 250mg	5	QL(30 EA per 30 days); PA NSO			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
IMBRUICA TABLET 140MG	5	QL(30 EA per 30 days); PA NSO	KISQALI TABLET THERAPY PACK 200MG	5	QL(42 EA per 28 days); PA NSO
IMBRUICA TABLET 280MG	5	QL(30 EA per 30 days); PA NSO	KISQALI TABLET THERAPY PACK 200MG	5	QL(63 EA per 28 days); PA NSO
IMBRUICA TABLET 420MG	5	QL(30 EA per 30 days); PA NSO	KOSELUGO CAPSULE 10MG	5	PA NSO
IMBRUICA TABLET 560MG	5	QL(30 EA per 30 days); PA NSO	KOSELUGO CAPSULE 25MG	5	PA NSO
INLYTA TABLET 1MG	5	QL(180 EA per 30 days); PA NSO	<i>lapatinib ditosylate tablet</i> 250mg	5	QL(180 EA per 30 days); PA NSO
INLYTA TABLET 5MG	5	QL(120 EA per 30 days); PA NSO	LENVIMA 10 MG DAILY DOSE CAPSULE THERAPY PACK 10MG	5	PA NSO
INQOVI TABLET 100MG; 35MG	5	QL(5 EA per 28 days); PA NSO	LENVIMA 12MG DAILY DOSE CAPSULE THERAPY PACK 4MG	5	PA NSO
JAKAFI TABLET 10MG	5	QL(60 EA per 30 days); PA NSO	LENVIMA 14 MG DAILY DOSE CAPSULE THERAPY PACK 0	5	PA NSO
JAKAFI TABLET 15MG	5	QL(60 EA per 30 days); PA NSO	LENVIMA 18 MG DAILY DOSE CAPSULE THERAPY PACK 0	5	PA NSO
JAKAFI TABLET 20MG	5	QL(60 EA per 30 days); PA NSO	LENVIMA 20 MG DAILY DOSE CAPSULE THERAPY PACK 10MG	5	PA NSO
JAKAFI TABLET 25MG	5	QL(60 EA per 30 days); PA NSO	LENVIMA 24 MG DAILY DOSE CAPSULE THERAPY PACK 0	5	PA NSO
JAKAFI TABLET 5MG	5	QL(60 EA per 30 days); PA NSO	LENVIMA 4 MG DAILY DOSE CAPSULE THERAPY PACK 4MG	5	PA NSO
JAYPIRCA TABLET 100MG	5	QL(90 EA per 30 days); PA NSO	LENVIMA 8 MG DAILY DOSE CAPSULE THERAPY PACK 4MG	5	PA NSO
JAYPIRCA TABLET 50MG	5	QL(30 EA per 30 days); PA NSO	LORBRENA TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
KISQALI TABLET THERAPY PACK 200MG	5	QL(21 EA per 28 days); PA NSO	LORBRENA TABLET 25MG	5	QL(90 EA per 30 days); PA NSO

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
LYNPARZA TABLET 100MG	5	QL(120 EA per 30 days); PA NSO	REZLIDHIA CAPSULE 150MG	5	PA NSO
LYNPARZA TABLET 150MG	5	QL(120 EA per 30 days); PA NSO	ROZLYTREK CAPSULE 100MG	5	QL(150 EA per 30 days); PA NSO
MEKINIST SOLUTION RECONSTITUTED 0.05MG/ML	5	PA NSO	ROZLYTREK CAPSULE 200MG	5	QL(90 EA per 30 days); PA NSO
MEKINIST TABLET 0.5MG	5	QL(90 EA per 30 days); PA NSO	ROZLYTREK PACKET 50MG	5	PA NSO
MEKINIST TABLET 2MG	5	QL(30 EA per 30 days); PA NSO	RUBRACA TABLET 200MG	5	QL(120 EA per 30 days); PA NSO
MEKTOVI TABLET 15MG	5	QL(180 EA per 30 days); PA NSO	RUBRACA TABLET 250MG	5	QL(120 EA per 30 days); PA NSO
NERLYNX TABLET 40MG	5	QL(180 EA per 30 days); PA NSO	RUBRACA TABLET 300MG	5	QL(120 EA per 30 days); PA NSO
ODOMZO CAPSULE 200MG	5	QL(30 EA per 30 days); PA NSO	RYDAPT CAPSULE 25MG	5	QL(240 EA per 30 days); PA NSO
OJJAARA TABLET 100MG	5	PA NSO	<i>sorafenib tosylate tablet 200mg</i>	5	QL(120 EA per 30 days); PA NSO
OJJAARA TABLET 150MG	5	PA NSO	<i>sorafenib tablet 200mg</i>	5	QL(120 EA per 30 days); PA NSO
OJJAARA TABLET 200MG	5	PA NSO	SPRYCEL TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
<i>pazopanib hydrochloride tablet 200mg</i>	5	QL(120 EA per 30 days); PA NSO	SPRYCEL TABLET 140MG	5	QL(30 EA per 30 days); PA NSO
PIQRAY 200MG DAILY DOSE TABLET THERAPY PACK 200MG	5	PA NSO	SPRYCEL TABLET 20MG	5	QL(60 EA per 30 days); PA NSO
PIQRAY 250MG DAILY DOSE TABLET THERAPY PACK 0	5	PA NSO	SPRYCEL TABLET 50MG	5	QL(30 EA per 30 days); PA NSO
PIQRAY 300MG DAILY DOSE TABLET THERAPY PACK 150MG	5	PA NSO	SPRYCEL TABLET 70MG	5	QL(60 EA per 30 days); PA NSO

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SPRYCEL TABLET 80MG	5	QL(30 EA per 30 days); PA NSO	TALZENNA CAPSULE 0.75MG	5	QL(30 EA per 30 days); PA NSO
STIVARGA TABLET 40MG	5	QL(84 EA per 28 days); PA NSO	TALZENNA CAPSULE 1MG	5	QL(30 EA per 30 days); PA NSO
<i>sunitinib malate capsule 12.5mg</i>	5	QL(30 EA per 30 days); PA NSO	TASIGNA CAPSULE 150MG	5	QL(112 EA per 28 days); PA NSO
<i>sunitinib malate capsule 25mg</i>	5	QL(30 EA per 30 days); PA NSO	TASIGNA CAPSULE 200MG	5	QL(112 EA per 28 days); PA NSO
<i>sunitinib malate capsule 37.5mg</i>	5	QL(30 EA per 30 days); PA NSO	TASIGNA CAPSULE 50MG	5	QL(120 EA per 30 days); PA NSO
<i>sunitinib malate capsule 50mg</i>	5	QL(30 EA per 30 days); PA NSO	TEPMETKO TABLET 225MG	5	PA NSO
TAFINLAR CAPSULE 50MG	5	QL(120 EA per 30 days); PA NSO	TIBSOVO TABLET 250MG	5	QL(60 EA per 30 days); PA NSO
TAFINLAR CAPSULE 75MG	5	QL(120 EA per 30 days); PA NSO	TRUQAP TABLET 160MG	5	PA NSO
TAFINLAR TABLET SOLUBLE 10MG	5	PA NSO	TRUQAP TABLET 200MG	5	PA NSO
TAGRISSO TABLET 40MG	5	QL(30 EA per 30 days); PA NSO	TURALIO CAPSULE 125MG	5	PA NSO
TAGRISSO TABLET 80MG	5	QL(30 EA per 30 days); PA NSO	TURALIO CAPSULE 200MG	5	QL(120 EA per 30 days); PA NSO
TALZENNA CAPSULE 0.1MG	5	QL(30 EA per 30 days); PA NSO	VANFLYTA TABLET 17.7MG	5	PA NSO
TALZENNA CAPSULE 0.25MG	5	QL(90 EA per 30 days); PA NSO	VANFLYTA TABLET 26.5MG	5	PA NSO
TALZENNA CAPSULE 0.35MG	5	QL(30 EA per 30 days); PA NSO	VENCLEXTA STARTING PACK TABLET THERAPY PACK 0	5	QL(42 EA per 30 days); PA NSO
TALZENNA CAPSULE 0.5MG	5	QL(30 EA per 30 days); PA NSO	VENCLEXTA TABLET 100MG	5	QL(120 EA per 30 days); PA NSO
			VENCLEXTA TABLET 10MG	3	QL(60 EA per 30 days); PA NSO

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VENCLEXTA TABLET 50MG	5	QL(30 EA per 30 days); PA NSO	XALKORI CAPSULE 200MG	5	QL(60 EA per 30 days); PA NSO
VERZENIO TABLET 100MG	5	QL(60 EA per 30 days); PA NSO	XALKORI CAPSULE 250MG	5	QL(60 EA per 30 days); PA NSO
VERZENIO TABLET 150MG	5	QL(60 EA per 30 days); PA NSO	XOSPATA TABLET 40MG	5	QL(90 EA per 30 days); PA NSO
VERZENIO TABLET 200MG	5	QL(60 EA per 30 days); PA NSO	ZEJULA CAPSULE 100MG	5	QL(90 EA per 30 days); PA NSO
VERZENIO TABLET 50MG	5	QL(60 EA per 30 days); PA NSO	ZEJULA TABLET 100MG	5	QL(30 EA per 30 days); PA NSO
VITRAKVI CAPSULE 100MG	5	QL(60 EA per 30 days); PA NSO	ZEJULA TABLET 200MG	5	QL(30 EA per 30 days); PA NSO
VITRAKVI CAPSULE 25MG	5	QL(180 EA per 30 days); PA NSO	ZEJULA TABLET 300MG	5	QL(30 EA per 30 days); PA NSO
VITRAKVI SOLUTION 20MG/ML	5	QL(300 ML per 30 days); PA NSO	ZELBORAF TABLET 240MG	5	QL(240 EA per 30 days); PA NSO
VIZIMPRO TABLET 15MG	5	QL(30 EA per 30 days); PA NSO	ZYDELIG TABLET 100MG	5	QL(60 EA per 30 days); PA NSO
VIZIMPRO TABLET 30MG	5	QL(30 EA per 30 days); PA NSO	ZYDELIG TABLET 150MG	5	QL(60 EA per 30 days); PA NSO
VIZIMPRO TABLET 45MG	5	QL(30 EA per 30 days); PA NSO	ZYKADIA TABLET 150MG	5	QL(90 EA per 30 days); PA NSO
WELIREG TABLET 40MG	5	PA NSO	<i>Monoclonal Antibody/Antibody-Drug Conjugate</i>		
XALKORI CAPSULE SPRINKLE 150MG	5	QL(60 EA per 30 days); PA NSO	DARZALEX FASPRO INJECTION 1800MG/15ML; 30000UNIT/15ML	5	PA NSO
XALKORI CAPSULE SPRINKLE 20MG	5	PA NSO	KANJINTI INJECTION 150MG	5	PA NSO
XALKORI CAPSULE SPRINKLE 50MG	5	PA NSO	KANJINTI INJECTION 420MG	5	PA NSO
			LOQTORZI INJECTION 240MG/6ML	5	PA NSO

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RUXIENCE INJECTION 100MG/10ML	5	PA NSO	BENZNIDAZOLE TABLET 100MG	4	
RUXIENCE INJECTION 500MG/50ML	5	PA NSO	BENZNIDAZOLE TABLET 12.5MG	4	
TRAZIMERA INJECTION 150MG	5	PA NSO	<i>chloroquine phosphate tablet 250mg</i>	4	
TRAZIMERA INJECTION 420MG	5	PA NSO	<i>chloroquine phosphate tablet 500mg</i>	4	
Retinoids					
<i>bexarotene capsule 75mg</i>	5	PA NSO	COARTEM TABLET 20MG; 120MG	4	QL(24 EA per 30 days)
<i>bexarotene gel 1%</i>	5	PA NSO	<i>hydroxychloroquine sulfate tablet 100mg</i>	2	
PANRETIN GEL 0.1%	5	PA NSO	<i>hydroxychloroquine sulfate tablet 200mg</i>	2	
<i>tretinooin capsule 10mg</i>	5		<i>mefloquine hcl tablet 250mg</i>	3	
Treatment Adjuncts					
LEUCOVORIN CALCIUM TABLET 10MG	3		<i>nitazoxanide tablet 500mg</i>	4	
LEUCOVORIN CALCIUM TABLET 15MG	3		<i>pentamidine isethionate injection 300mg</i>	4	
LEUCOVORIN CALCIUM TABLET 25MG	3		<i>pentamidine isethionate solution reconstituted 300mg</i>	4	QL(1 EA per 28 days); B/D
LEUCOVORIN CALCIUM TABLET 5MG	3		<i>primaquine phosphate tablet 26.3mg</i>	3	
MESNEX TABLET 400MG	4		<i>pyrimethamine tablet 25mg</i>	5	PA
Antiparasitics					
Anthelmintics					
<i>albendazole tablet 200mg</i>	4		<i>benztropine mesylate tablet 0.5mg</i>	2	
<i>ivermectin tablet 3mg</i>	3	QL(20 EA per 30 days); PA	<i>benztropine mesylate tablet 1mg</i>	2	
<i>praziquantel tablet 600mg</i>	4		<i>benztropine mesylate tablet 2mg</i>	2	
Antiprotozoals					
ALINIA SUSPENSION RECONSTITUTED 100MG/5ML	4		<i>trihexyphenidyl hydrochloride tablet 2mg</i>	3	
<i>atovaquone/proguanil hcl tablet 250mg; 100mg</i>	4		<i>trihexyphenidyl hydrochloride tablet 5mg</i>	3	
<i>atovaquone/proguanil hcl tablet 62.5mg; 25mg</i>	4		Antiparkinson Agents, Other		
<i>atovaquone suspension 750mg/5ml</i>	4		<i>entacapone tablet 200mg</i>	4	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
OSMOLEX ER TABLET ER 24 HOUR THERAPY PACK 0	4	PA	<i>pramipexole dihydrochloride tablet 0.25mg</i>	2	
OSMOLEX ER TABLET EXTENDED RELEASE 24 HOUR 129MG	4	PA	<i>pramipexole dihydrochloride tablet 0.5mg</i>	2	
OSMOLEX ER TABLET EXTENDED RELEASE 24 HOUR 193MG	4	PA	<i>pramipexole dihydrochloride tablet 0.75mg</i>	2	
OSMOLEX ER TABLET EXTENDED RELEASE 24 HOUR 258MG	4	PA	<i>pramipexole dihydrochloride tablet 1.5mg</i>	2	
Dopamine Agonists			<i>pramipexole dihydrochloride tablet 1mg</i>	2	
<i>bromocriptine mesylate capsule 5mg</i>	4		<i>ropinirole hcl tablet 0.5mg</i>	2	
<i>bromocriptine mesylate tablet 2.5mg</i>	4		<i>ropinirole hcl tablet 1mg</i>	2	
KYNMOBI TITRATION KIT KIT 0	5	QL(20 EA per 365 days); PA	<i>ropinirole hcl tablet 2mg</i>	2	
<i>kynmobi film 10mg</i>	5	QL(150 EA per 30 days); PA	<i>ropinirole hcl tablet 4mg</i>	2	
KYNMOBI FILM 15MG	5	QL(150 EA per 30 days); PA	<i>ropinirole hcl tablet 5mg</i>	2	
KYNMOBI FILM 20MG	5	QL(150 EA per 30 days); PA	<i>ropinirole hydrochloride tablet 0.25mg</i>	2	
KYNMOBI FILM 25MG	5	QL(150 EA per 30 days); PA	<i>ropinirole hydrochloride tablet 3mg</i>	2	
KYNMOBI FILM 30MG	5	QL(150 EA per 30 days); PA	Dopamine Precursors and/or L-Amino Acid Decarboxylase Inhibitors		
NEUPRO PATCH 24 HOUR 1MG/24HR	4	ST	<i>carbidopa/levodopa er tablet extended release 25mg; 100mg</i>	3	
NEUPRO PATCH 24 HOUR 2MG/24HR	4	ST	<i>carbidopa/levodopa er tablet extended release 50mg; 200mg</i>	3	
NEUPRO PATCH 24 HOUR 3MG/24HR	4	ST	<i>carbidopa/levodopa odt tablet disintegrating 10mg; 100mg</i>	4	
NEUPRO PATCH 24 HOUR 4MG/24HR	4	ST	<i>carbidopa/levodopa odt tablet disintegrating 25mg; 100mg</i>	4	
NEUPRO PATCH 24 HOUR 6MG/24HR	4	ST	<i>carbidopa/levodopa odt tablet disintegrating 25mg; 250mg</i>	4	
NEUPRO PATCH 24 HOUR 8MG/24HR	4	ST	<i>carbidopa/levodopa tablet 10mg; 100mg</i>	2	
<i>pramipexole dihydrochloride tablet 0.125mg</i>	2				

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
carbidopa/levodopa tablet 25mg; 100mg	2		fluphenazine decanoate injection 25mg/ml	4	
carbidopa/levodopa tablet 25mg; 250mg	2		fluphenazine hcl concentrate 5mg/ml	4	
carbidopa tablet 25mg	4		fluphenazine hcl injection 2.5mg/ml	4	
INBRIJA CAPSULE 42MG	5	PA	fluphenazine hcl tablet 1mg	4	
Monoamine Oxidase B (MAO-B) Inhibitors					
rasagiline mesylate tablet 0.5mg	4		fluphenazine hydrochloride elixir 2.5mg/5ml	4	
rasagiline mesylate tablet 1mg	4		fluphenazine hydrochloride tablet 10mg	4	
selegiline hcl capsule 5mg	3		fluphenazine hydrochloride tablet 2.5mg	4	
selegiline hcl tablet 5mg	3		fluphenazine hydrochloride tablet 5mg	4	
Antipsychotics					
1st Generation/Typical					
chlorpromazine hcl tablet 100mg	4		haloperidol decanoate injection 100mg/ml	4	
chlorpromazine hcl tablet 10mg	4		haloperidol decanoate injection 100mg/ml	4	
chlorpromazine hcl tablet 200mg	4		haloperidol decanoate injection 50mg/ml	4	
chlorpromazine hcl tablet 25mg	4		haloperidol decanoate injection 50mg/ml	4	
chlorpromazine hcl tablet 50mg	4		haloperidol lactate injection 5mg/ml	4	
chlorpromazine hydrochloride concentrate 100mg/ml	4		haloperidol concentrate 2mg/ml	2	
chlorpromazine hydrochloride concentrate 30mg/ml	4		haloperidol tablet 0.5mg	2	
chlorpromazine hydrochloride tablet 100mg	4		haloperidol tablet 10mg	2	
chlorpromazine hydrochloride tablet 10mg	4		haloperidol tablet 1mg	2	
chlorpromazine hydrochloride tablet 200mg	4		haloperidol tablet 20mg	3	
chlorpromazine hydrochloride tablet 25mg	4		haloperidol tablet 2mg	2	
chlorpromazine hydrochloride tablet 50mg	4		haloperidol tablet 5mg	2	
			loxapine capsule 10mg	3	
			loxapine capsule 25mg	3	
			loxapine capsule 50mg	3	
			loxapine capsule 5mg	3	
			molindone hydrochloride tablet 10mg	4	
			molindone hydrochloride tablet 25mg	4	

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<i>molindone hydrochloride tablet 5mg</i>	4		<i>aripiprazole odt tablet disintegrating 10mg</i>	4	QL(60 EA per 30 days)
<i>perphenazine tablet 16mg</i>	4		<i>aripiprazole odt tablet disintegrating 15mg</i>	4	QL(60 EA per 30 days)
<i>perphenazine tablet 2mg</i>	4		<i>aripiprazole solution 1mg/ml</i>	4	QL(750 ML per 30 days)
<i>perphenazine tablet 4mg</i>	4		<i>aripiprazole tablet 10mg</i>	4	QL(30 EA per 30 days)
<i>perphenazine tablet 8mg</i>	4		<i>aripiprazole tablet 15mg</i>	4	QL(30 EA per 30 days)
<i>pimozide tablet 1mg</i>	4		<i>aripiprazole tablet 20mg</i>	4	QL(30 EA per 30 days)
<i>pimozide tablet 2mg</i>	4		<i>aripiprazole tablet 2mg</i>	4	QL(30 EA per 30 days)
<i>thioridazine hcl tablet 100mg</i>	3		<i>aripiprazole tablet 30mg</i>	4	QL(30 EA per 30 days)
<i>thioridazine hcl tablet 10mg</i>	3		<i>aripiprazole tablet 5mg</i>	4	QL(30 EA per 30 days)
<i>thioridazine hcl tablet 25mg</i>	3		ARISTADA INITIO INJECTION 675MG/2.4ML	5	
<i>thioridazine hcl tablet 50mg</i>	3		ARISTADA INJECTION 1064MG/3.9ML	5	
<i>thiothixene capsule 10mg</i>	4		ARISTADA INJECTION 441MG/1.6ML	5	
<i>thiothixene capsule 1mg</i>	4		ARISTADA INJECTION 662MG/2.4ML	5	
<i>thiothixene capsule 2mg</i>	4		ARISTADA INJECTION 882MG/3.2ML	5	
<i>thiothixene capsule 5mg</i>	4		<i>asenapine maleate sl tablet sublingual 10mg</i>	4	QL(60 EA per 30 days)
<i>trifluoperazine hcl tablet 10mg</i>	3		<i>asenapine maleate sl tablet sublingual 2.5mg</i>	4	QL(60 EA per 30 days)
<i>trifluoperazine hcl tablet 2mg</i>	3		<i>asenapine maleate sl tablet sublingual 5mg</i>	4	QL(60 EA per 30 days)
<i>trifluoperazine hcl tablet 5mg</i>	3		CAPLYTA CAPSULE 10.5MG	5	QL(30 EA per 30 days); PA NSO
<i>trifluoperazine hydrochloride tablet 1mg</i>	3		CAPLYTA CAPSULE 21MG	5	QL(30 EA per 30 days); PA NSO
2nd Generation/Atypical			CAPLYTA CAPSULE 42MG	5	QL(30 EA per 30 days); PA NSO
<i>ABILIFY ASIMTUFII INJECTION 720MG/2.4ML</i>	4				
<i>ABILIFY ASIMTUFII INJECTION 960MG/3.2ML</i>	4				
<i>ABILIFY MAINTENA INJECTION 300MG</i>	5				
<i>ABILIFY MAINTENA INJECTION 300MG</i>	5				
<i>ABILIFY MAINTENA INJECTION 400MG</i>	5				
<i>ABILIFY MAINTENA INJECTION 400MG</i>	5				

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FANAPT TITRATION PACK TABLET 0	4	QL(8 EA per 180 days); ST NSO	INVEGA TRINZA INJECTION 273MG/0.88ML	5	
FANAPT TABLET 10MG	5	QL(60 EA per 30 days); ST NSO	INVEGA TRINZA INJECTION 410MG/1.32ML	5	
FANAPT TABLET 12MG	5	QL(60 EA per 30 days); ST NSO	INVEGA TRINZA INJECTION 546MG/1.75ML	5	
FANAPT TABLET 1MG	5	QL(60 EA per 30 days); ST NSO	INVEGA TRINZA INJECTION 819MG/2.63ML	5	
FANAPT TABLET 2MG	5	QL(60 EA per 30 days); ST NSO	<i>lurasidone hydrochloride tablet 120mg</i>	4	QL(30 EA per 30 days)
FANAPT TABLET 4MG	5	QL(60 EA per 30 days); ST NSO	<i>lurasidone hydrochloride tablet 20mg</i>	4	QL(30 EA per 30 days)
FANAPT TABLET 6MG	5	QL(60 EA per 30 days); ST NSO	<i>lurasidone hydrochloride tablet 40mg</i>	4	QL(30 EA per 30 days)
FANAPT TABLET 8MG	5	QL(60 EA per 30 days); ST NSO	<i>lurasidone hydrochloride tablet 60mg</i>	4	QL(30 EA per 30 days)
INVEGA HAFYERA INJECTION 1092MG/3.5ML	5	ST NSO	<i>lurasidone hydrochloride tablet 80mg</i>	4	QL(60 EA per 30 days)
INVEGA HAFYERA INJECTION 1560MG/5ML	5	ST NSO	LYBALVI TABLET 10MG; 10MG	5	QL(30 EA per 30 days); ST NSO
INVEGA SUSTENNA INJECTION 117MG/0.75ML	5		LYBALVI TABLET 15MG; 10MG	5	QL(30 EA per 30 days); ST NSO
INVEGA SUSTENNA INJECTION 156MG/ML	5		LYBALVI TABLET 20MG; 10MG	5	QL(30 EA per 30 days); ST NSO
INVEGA SUSTENNA INJECTION 234MG/1.5ML	5		LYBALVI TABLET 5MG; 10MG	5	QL(30 EA per 30 days); ST NSO
INVEGA SUSTENNA INJECTION 39MG/0.25ML	4		NUPLAZID CAPSULE 34MG	5	QL(30 EA per 30 days); PA NSO
INVEGA SUSTENNA INJECTION 78MG/0.5ML	5		NUPLAZID TABLET 10MG	5	QL(30 EA per 30 days); PA NSO
			<i>olanzapine odt tablet disintegrating 10mg</i>	4	QL(30 EA per 30 days)
			<i>olanzapine odt tablet disintegrating 15mg</i>	4	QL(30 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
olanzapine odt tablet disintegrating 20mg	4	QL(30 EA per 30 days)	quetiapine fumarate er tablet extended release 24 hour 400mg	4	QL(60 EA per 30 days)
olanzapine odt tablet disintegrating 5mg	4	QL(30 EA per 30 days)	quetiapine fumarate er tablet extended release 24 hour 50mg	4	QL(60 EA per 30 days)
olanzapine injection 10mg	4		quetiapine fumarate tablet 100mg	2	QL(90 EA per 30 days)
olanzapine tablet 10mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 150mg	2	QL(90 EA per 30 days)
olanzapine tablet 15mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 200mg	2	QL(90 EA per 30 days)
olanzapine tablet 2.5mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 25mg	2	QL(90 EA per 30 days)
olanzapine tablet 20mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 300mg	2	QL(60 EA per 30 days)
olanzapine tablet 5mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 400mg	2	QL(60 EA per 30 days)
olanzapine tablet 7.5mg	2	QL(30 EA per 30 days)	quetiapine fumarate tablet 50mg	2	QL(90 EA per 30 days)
paliperidone er tablet extended release 24 hour 1.5mg	4	QL(30 EA per 30 days)	REXULTI TABLET 0.25MG	5	QL(30 EA per 30 days); ST NSO
paliperidone er tablet extended release 24 hour 3mg	4	QL(30 EA per 30 days)	REXULTI TABLET 0.5MG	5	QL(30 EA per 30 days); ST NSO
paliperidone er tablet extended release 24 hour 6mg	4	QL(60 EA per 30 days)	REXULTI TABLET 1MG	5	QL(30 EA per 30 days); ST NSO
paliperidone er tablet extended release 24 hour 9mg	4	QL(30 EA per 30 days)	REXULTI TABLET 2MG	5	QL(30 EA per 30 days); ST NSO
PERSERIS INJECTION 120MG	5	QL(1 EA per 30 days)	REXULTI TABLET 3MG	5	QL(30 EA per 30 days); ST NSO
PERSERIS INJECTION 90MG	5	QL(1 EA per 30 days)	REXULTI TABLET 4MG	5	QL(30 EA per 30 days); ST NSO
quetiapine fumarate er tablet extended release 24 hour 150mg	4	QL(60 EA per 30 days)	RISPERDAL CONSTA INJECTION 12.5MG	4	
quetiapine fumarate er tablet extended release 24 hour 200mg	4	QL(90 EA per 30 days)	RISPERDAL CONSTA INJECTION 25MG	5	
quetiapine fumarate er tablet extended release 24 hour 300mg	4	QL(60 EA per 30 days)	RISPERDAL CONSTA INJECTION 37.5MG	5	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
RISPERDAL CONSTA INJECTION 50MG	5		SECUADO PATCH 24 HOUR 7.6MG/24HR	5	QL(30 EA per 30 days); ST NSO
<i>risperidone er injection</i> 12.5mg	4		VRAYLAR CAPSULE THERAPY PACK 0	4	QL(14 EA per 365 days); ST NSO
<i>risperidone er injection</i> 25mg	5		VRAYLAR CAPSULE 1.5MG	5	QL(30 EA per 30 days); ST NSO
<i>risperidone er injection</i> 37.5mg	5		VRAYLAR CAPSULE 3MG	5	QL(30 EA per 30 days); ST NSO
<i>risperidone er injection</i> 50mg	5		VRAYLAR CAPSULE 4.5MG	5	QL(30 EA per 30 days); ST NSO
<i>risperidone odt tablet</i> <i>disintegrating 0.25mg</i>	4	QL(60 EA per 30 days)	VRAYLAR CAPSULE 6MG	5	QL(30 EA per 30 days); ST NSO
<i>risperidone odt tablet</i> <i>disintegrating 0.5mg</i>	4	QL(60 EA per 30 days)	<i>ziprasidone hcl capsule</i> 20mg	3	QL(60 EA per 30 days)
<i>risperidone odt tablet</i> <i>disintegrating 1mg</i>	4	QL(60 EA per 30 days)	<i>ziprasidone hcl capsule</i> 40mg	3	QL(60 EA per 30 days)
<i>risperidone odt tablet</i> <i>disintegrating 2mg</i>	4	QL(60 EA per 30 days)	<i>ziprasidone hcl capsule</i> 60mg	3	QL(60 EA per 30 days)
<i>risperidone odt tablet</i> <i>disintegrating 3mg</i>	4	QL(60 EA per 30 days)	<i>ziprasidone hcl capsule</i> 80mg	3	QL(60 EA per 30 days)
<i>risperidone odt tablet</i> <i>disintegrating 4mg</i>	4	QL(60 EA per 30 days)	<i>ziprasidone mesylate</i> <i>injection 20mg</i>	4	QL(60 EA per 30 days)
<i>risperidone solution</i> 1mg/ml	3	QL(240 ML per 30 days)	ZYPREXA RELPREVV INJECTION 210MG	4	QL(2 EA per 28 days); ST NSO
<i>risperidone tablet</i> 0.25mg	2	QL(60 EA per 30 days)	ZYPREXA RELPREVV INJECTION 300MG	5	ST NSO
<i>risperidone tablet</i> 0.5mg	2	QL(60 EA per 30 days)	ZYPREXA RELPREVV INJECTION 405MG	5	ST NSO
<i>risperidone tablet</i> 1mg	2	QL(60 EA per 30 days)	Treatment-Resistant		
<i>risperidone tablet</i> 2mg	2	QL(60 EA per 30 days)	<i>clozapine odt tablet</i> <i>disintegrating 100mg</i>	4	QL(270 EA per 30 days); ST NSO
<i>risperidone tablet</i> 3mg	2	QL(60 EA per 30 days)	<i>clozapine odt tablet</i> <i>disintegrating 12.5mg</i>	4	QL(90 EA per 30 days); ST NSO
<i>risperidone tablet</i> 4mg	2	QL(60 EA per 30 days)	<i>clozapine odt tablet</i> <i>disintegrating 150mg</i>	4	QL(180 EA per 30 days); ST NSO
SECUADO PATCH 24 HOUR 3.8MG/24HR	5	QL(30 EA per 30 days); ST NSO			
SECUADO PATCH 24 HOUR 5.7MG/24HR	5	QL(30 EA per 30 days); ST NSO			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>clozapine odt tablet disintegrating 200mg</i>	5	QL(120 EA per 30 days); ST NSO	PREVYMIS TABLET 240MG	5	
<i>clozapine odt tablet disintegrating 25mg</i>	4	QL(270 EA per 30 days); ST NSO	PREVYMIS TABLET 480MG	5	
<i>clozapine tablet 100mg</i>	4	QL(270 EA per 30 days); ST NSO	<i>valganciclovir hydrochloride solution reconstituted 50mg/ml</i>	4	
<i>clozapine tablet 200mg</i>	4	QL(120 EA per 30 days); ST NSO	<i>valganciclovir tablet 450mg</i>	3	
			<i>Anti-hepatitis B (HBV) Agents</i>		
			<i>adefovir dipivoxil tablet 10mg</i>	4	
			<i>BARACLUDE SOLUTION 0.05MG/ML</i>	5	QL(600 ML per 30 days)
			<i>entecavir tablet 0.5mg</i>	4	QL(30 EA per 30 days)
			<i>entecavir tablet 1mg</i>	4	QL(30 EA per 30 days)
			<i>lamivudine tablet 100mg</i>	3	
			<i>Anti-hepatitis C (HCV) Agents</i>		
			<i>MAVYRET PACKET 50MG; 20MG</i>	5	QL(560 EA per 365 days); PA
			<i>MAVYRET TABLET 100MG; 40MG</i>	5	QL(336 EA per 365 days); PA
			<i>ribavirin tablet 200mg</i>	3	
			<i>VOSEVI TABLET 400MG; 100MG; 100MG</i>	5	QL(84 EA per 365 days); PA
			<i>Anti-HIV Agents, Integrase Inhibitors (INSTI)</i>		
			<i>APRETEUDE INJECTION 600MG/3ML</i>	5	
			<i>BIKTARVY TABLET 30MG; 120MG; 15MG</i>	5	QL(30 EA per 30 days)
			<i>BIKTARVY TABLET 50MG; 200MG; 25MG</i>	5	QL(30 EA per 30 days)
			<i>CABENUVA INJECTION 400MG/2ML; 600MG/2ML</i>	5	
			<i>CABENUVA INJECTION 600MG/3ML; 900MG/3ML</i>	5	
			<i>DOVATO TABLET 50MG; 300MG</i>	5	QL(30 EA per 30 days)

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GENVOYA TABLET 150MG; 150MG; 200MG; 10MG	5	QL(30 EA per 30 days)	<i>efavirenz/lamivudine/tenofovir disoproxil fumarate tablet 600mg; 300mg; 300mg</i>	5	QL(30 EA per 30 days)
ISENTRESS HD TABLET 600MG	5	QL(60 EA per 30 days)	<i>efavirenz capsule 200mg</i>	4	QL(120 EA per 30 days)
ISENTRESS PACKET 100MG	5	QL(60 EA per 30 days)	<i>efavirenz capsule 50mg</i>	4	QL(180 EA per 30 days)
ISENTRESS TABLET CHEWABLE 100MG	4	QL(180 EA per 30 days)	<i>efavirenz tablet 600mg</i>	4	QL(30 EA per 30 days)
ISENTRESS TABLET CHEWABLE 25MG	4	QL(180 EA per 30 days)	<i>etravirine tablet 100mg</i>	4	QL(120 EA per 30 days)
ISENTRESS TABLET 400MG	5	QL(120 EA per 30 days)	<i>etravirine tablet 200mg</i>	5	QL(60 EA per 30 days)
JULUCA TABLET 50MG; 25MG	5	QL(30 EA per 30 days)	INTELENCE TABLET 25MG	4	QL(120 EA per 30 days)
STRIBILD TABLET 150MG; 150MG; 200MG; 300MG	5	QL(30 EA per 30 days)	<i>nevirapine er tablet extended release 24 hour 100mg</i>	4	QL(90 EA per 30 days)
TIVICAY PD TABLET SOLUBLE 5MG	4		<i>nevirapine er tablet extended release 24 hour 400mg</i>	4	QL(30 EA per 30 days)
TIVICAY TABLET 10MG	4	QL(60 EA per 30 days)	<i>nevirapine suspension 50mg/5ml</i>	4	QL(1200 ML per 30 days)
TIVICAY TABLET 25MG	5	QL(60 EA per 30 days)	<i>nevirapine tablet 200mg</i>	3	QL(60 EA per 30 days)
TIVICAY TABLET 50MG	5	QL(60 EA per 30 days)	PIFELTRO TABLET 100MG	5	QL(30 EA per 30 days)
VOCABRIA TABLET 30MG	5		Anti-HIV Agents, Non-nucleoside Reverse Transcriptase Inhibitors (NNRTI)		Anti-HIV Agents, Nucleoside and Nucleotide Reverse Transcriptase Inhibitors (NRTI)
COMPLERA TABLET 200MG; 25MG; 300MG	5	QL(30 EA per 30 days)	<i>abacavir sulfate/lamivudine/zidovudine tablet 300mg; 150mg; 300mg</i>	5	QL(60 EA per 30 days)
DELSTRIGO TABLET 100MG; 300MG; 300MG	5	QL(30 EA per 30 days)	<i>abacavir sulfate/lamivudine tablet 600mg; 300mg</i>	4	QL(30 EA per 30 days)
EDURANT TABLET 25MG	5	QL(30 EA per 30 days)	<i>abacavir sulfate tablet 300mg</i>	4	QL(60 EA per 30 days)
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate tablet 600mg; 200mg; 300mg</i>	4	QL(30 EA per 30 days)	<i>abacavir solution 20mg/ml</i>	4	QL(960 ML per 30 days)
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate tablet 400mg; 300mg; 300mg</i>	5	QL(30 EA per 30 days)	<i>abacavir tablet 300mg</i>	4	QL(60 EA per 30 days)

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CIMDUO TABLET 300MG; 300MG	5	QL(30 EA per 30 days)	TRIUMEQ PD TABLET SOLUBLE 60MG; 5MG; 30MG	5	QL(180 EA per 30 days)
DESCOVY TABLET 120MG; 15MG	5	QL(30 EA per 30 days)	TRIUMEQ TABLET 600MG; 50MG; 300MG	5	QL(30 EA per 30 days)
DESCOVY TABLET 200MG; 25MG	5	QL(30 EA per 30 days)	TRIZIVIR TABLET 300MG; 150MG; 300MG	5	QL(60 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil fumarate tablet 100mg; 150mg</i>	5	QL(30 EA per 30 days)	VIREAD POWDER 40MG/GM	5	QL(225 GM per 30 days)
<i>emtricitabine/tenofovir disoproxil fumarate tablet 133mg; 200mg</i>	5	QL(30 EA per 30 days)	VIREAD TABLET 150MG	5	QL(30 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil fumarate tablet 200mg; 300mg</i>	2	QL(30 EA per 30 days)	VIREAD TABLET 200MG	5	QL(30 EA per 30 days)
<i>emtricitabine/tenofovir disoproxil tablet 167mg; 250mg</i>	5	QL(30 EA per 30 days)	VIREAD TABLET 250MG	5	QL(30 EA per 30 days)
<i>emtricitabine capsule 200mg</i>	2	QL(30 EA per 30 days)	<i>zidovudine capsule 100mg</i>	4	QL(180 EA per 30 days)
EMTRIVA SOLUTION 10MG/ML	4	QL(680 ML per 28 days)	<i>zidovudine syrup 50mg/5ml</i>	4	QL(1680 ML per 28 days)
<i>lamivudine/zidovudine tablet 150mg; 300mg</i>	4	QL(60 EA per 30 days)	<i>zidovudine tablet 300mg</i>	3	QL(60 EA per 30 days)
<i>lamivudine solution 10mg/ml</i>	4		Anti-HIV Agents, Other		
<i>lamivudine tablet 150mg</i>	4	QL(60 EA per 30 days)	FUZEON INJECTION 90MG	5	
<i>lamivudine tablet 300mg</i>	4	QL(30 EA per 30 days)	<i>maraviroc tablet 150mg</i>	5	QL(60 EA per 30 days)
ODEFSEY TABLET 200MG; 25MG; 25MG	5	QL(30 EA per 30 days)	<i>maraviroc tablet 300mg</i>	5	QL(120 EA per 30 days)
RETROVIR IV INFUSION INJECTION 10MG/ML	4		RUKOBIA TABLET EXTENDED RELEASE 12 HOUR 600MG	5	
<i>stavudine capsule 15mg</i>	4		SELZENTRY SOLUTION 20MG/ML	5	QL(1800 ML per 30 days)
<i>stavudine capsule 20mg</i>	4		SELZENTRY TABLET 25MG	4	
<i>stavudine capsule 30mg</i>	4		SELZENTRY TABLET 75MG	5	
<i>stavudine capsule 40mg</i>	4		SUNLENCA INJECTION 463.5MG/1.5ML	5	
TEMIXYS TABLET 300MG; 300MG	5	QL(30 EA per 30 days)	SUNLENCA TABLET THERAPY PACK 300MG	5	
<i>tenofovir disoproxil fumarate tablet 300mg</i>	4	QL(30 EA per 30 days)			

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SUNLENCA TABLET THERAPY PACK 300MG	5		PREZISTA SUSPENSION 100MG/ML	5	QL(360 ML per 30 days)
TROGARZO INJECTION 200MG/1.33ML	5		PREZISTA TABLET 150MG	4	QL(240 EA per 30 days)
TYBOST TABLET 150MG	4	QL(30 EA per 30 days)	PREZISTA TABLET 75MG	4	QL(420 EA per 30 days)
Anti-HIV Agents, Protease Inhibitors (PI)					
APTIVUS CAPSULE 250MG	5	QL(120 EA per 30 days)	REYATAZ PACKET 50MG <i>ritonavir tablet 100mg</i>	5	
APTIVUS SOLUTION 100MG/ML	5		SYMTUZA TABLET 150MG; 800MG; 200MG; 10MG	3	QL(360 EA per 30 days)
<i>atazanavir sulfate capsule 300mg</i>	4	QL(30 EA per 30 days)	VIRACEPT TABLET 250MG	5	QL(30 EA per 30 days)
<i>atazanavir capsule 150mg</i>	4	QL(60 EA per 30 days)	VIRACEPT TABLET 625MG	5	QL(270 EA per 30 days)
<i>atazanavir capsule 200mg</i>	4	QL(60 EA per 30 days)	Anti-influenza Agents		
<i>darunavir tablet 600mg</i>	5	QL(60 EA per 30 days)	<i>amantadine hcl capsule 100mg</i>	3	
<i>darunavir tablet 800mg</i>	5	QL(30 EA per 30 days)	<i>amantadine hcl solution 50mg/5ml</i>	2	
EVOTAZ TABLET 300MG; 150MG	5	QL(30 EA per 30 days)	<i>oseltamivir phosphate capsule 30mg</i>	3	QL(168 EA per 365 days)
<i>fosamprenavir calcium tablet 700mg</i>	5	QL(120 EA per 30 days)	<i>oseltamivir phosphate capsule 45mg</i>	3	QL(84 EA per 365 days)
INVIRASE TABLET 500MG	5		<i>oseltamivir phosphate capsule 75mg</i>	3	QL(110 EA per 365 days)
LEXIVA SUSPENSION 50MG/ML	4	QL(1575 ML per 28 days)	<i>oseltamivir phosphate suspension reconstituted 6mg/ml</i>	3	QL(1080 ML per 365 days)
<i>lopinavir/ritonavir solution 400mg/5ml; 100mg/5ml</i>	4	QL(400 ML per 30 days)	XOFLUZA TABLET THERAPY PACK 20MG	4	QL(4 EA per 365 days)
<i>lopinavir/ritonavir tablet 100mg; 25mg</i>	4		XOFLUZA TABLET THERAPY PACK 40MG	4	QL(4 EA per 365 days)
<i>lopinavir/ritonavir tablet 200mg; 50mg</i>	4	QL(150 EA per 30 days)	XOFLUZA TABLET THERAPY PACK 40MG	4	QL(4 EA per 365 days)
NORVIR PACKET 100MG	4	QL(360 EA per 30 days)	XOFLUZA TABLET THERAPY PACK 80MG	4	QL(2 EA per 365 days)
NORVIR SOLUTION 80MG/ML	4		Antiherpetic Agents		
PREZCOBIX TABLET 150MG; 800MG	5	QL(30 EA per 30 days)	<i>acyclovir sodium injection 50mg/ml</i>	4	B/D
			<i>acyclovir capsule 200mg</i>	2	

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<i>acyclovir suspension 200mg/5ml</i>	4		<i>diazepam intensol concentrate 5mg/ml</i>	4	QL(240 ML per 30 days)
<i>acyclovir tablet 400mg</i>	2		<i>diazepam concentrate 5mg/ml</i>	4	QL(240 ML per 30 days)
<i>acyclovir tablet 800mg</i>	2		<i>diazepam injection 5mg/ml</i>	4	
<i>famciclovir tablet 125mg</i>	3		<i>diazepam solution 5mg/5ml</i>	4	
<i>famciclovir tablet 250mg</i>	3		<i>diazepam tablet 10mg</i>	3	QL(120 EA per 30 days)
<i>famciclovir tablet 500mg</i>	3		<i>diazepam tablet 2mg</i>	3	QL(300 EA per 30 days)
<i>valacyclovir hydrochloride tablet 1gm</i>	3	QL(120 EA per 30 days)	<i>diazepam tablet 5mg</i>	3	QL(240 EA per 30 days)
<i>valacyclovir hydrochloride tablet 500mg</i>	3	QL(120 EA per 30 days)	<i>lorazepam intensol concentrate 2mg/ml</i>	3	QL(150 ML per 30 days)
Anxiolytics			<i>lorazepam tablet 0.5mg</i>	3	QL(90 EA per 30 days)
Anxiolytics, Other			<i>lorazepam tablet 1mg</i>	3	QL(90 EA per 30 days)
<i>buspirone hcl tablet 15mg</i>	2		<i>lorazepam tablet 2mg</i>	3	QL(150 EA per 30 days)
<i>buspirone hydrochloride tablet 10mg</i>	2		Bipolar Agents		
<i>buspirone hydrochloride tablet 30mg</i>	3		Mood Stabilizers		
<i>buspirone hydrochloride tablet 5mg</i>	2		<i>lithium carbonate er tablet extended release 300mg</i>	2	
<i>buspirone hydrochloride tablet 7.5mg</i>	3		<i>lithium carbonate er tablet extended release 450mg</i>	2	
<i>hydroxyzine pamoate capsule 100mg</i>	4		<i>lithium carbonate capsule 150mg</i>	2	
<i>hydroxyzine pamoate capsule 25mg</i>	4		<i>lithium carbonate capsule 300mg</i>	2	
<i>hydroxyzine pamoate capsule 50mg</i>	4		<i>lithium carbonate tablet 300mg</i>	2	
Benzodiazepines			<i>lithium solution 8meq/5ml</i>	2	
<i>alprazolam tablet 0.25mg</i>	2	QL(120 EA per 30 days)	<i>valproic acid capsule 250mg</i>	2	
<i>alprazolam tablet 0.5mg</i>	2	QL(120 EA per 30 days)	<i>valproic acid solution 250mg/5ml</i>	2	
<i>alprazolam tablet 1mg</i>	2	QL(120 EA per 30 days)	Blood Glucose Regulators		
<i>alprazolam tablet 2mg</i>	2	QL(150 EA per 30 days)	Antidiabetic Agents		
<i>clorazepate dipotassium tablet 15mg</i>	4	QL(180 EA per 30 days)			
<i>clorazepate dipotassium tablet 3.75mg</i>	4	QL(720 EA per 30 days)			
<i>clorazepate dipotassium tablet 7.5mg</i>	4	QL(360 EA per 30 days)			

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acarbose tablet 100mg	2	QL(90 EA per 30 days)	glipizide tablet 5mg	1	QL(240 EA per 30 days)
acarbose tablet 25mg	2	QL(360 EA per 30 days)	glyburide/metformin hydrochloride tablet 1.25mg; 250mg	2	
acarbose tablet 50mg	2	QL(180 EA per 30 days)	glyburide/metformin hydrochloride tablet 2.5mg; 500mg	2	
BYDUREON BCISE INJECTION 2MG/0.85ML	4	QL(3.4 ML per 28 days); PA	glyburide/metformin hydrochloride tablet 5mg; 500mg	2	
FARXIGA TABLET 10MG	3		glyburide tablet 1.25mg	2	
FARXIGA TABLET 5MG	3		glyburide tablet 2.5mg	2	
glimepiride tablet 1mg	1		glyburide tablet 5mg	2	
glimepiride tablet 2mg	1		GLYXAMBI TABLET 10MG; 5MG	3	QL(30 EA per 30 days)
glimepiride tablet 4mg	1	QL(60 EA per 30 days)	GLYXAMBI TABLET 25MG; 5MG	3	QL(30 EA per 30 days)
glipizide er tablet extended release 24 hour 10mg	1	QL(60 EA per 30 days)	JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 100MG	3	QL(30 EA per 30 days)
glipizide er tablet extended release 24 hour 2.5mg	1	QL(240 EA per 30 days)	JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 1000MG; 50MG	3	QL(60 EA per 30 days)
glipizide er tablet extended release 24 hour 5mg	1	QL(120 EA per 30 days)	JANUMET XR TABLET EXTENDED RELEASE 24 HOUR 500MG; 50MG	3	QL(60 EA per 30 days)
glipizide xl tablet extended release 24 hour 10mg	1	QL(60 EA per 30 days)	JANUMET TABLET 1000MG; 50MG	3	QL(60 EA per 30 days)
glipizide xl tablet extended release 24 hour 2.5mg	1	QL(240 EA per 30 days)	JANUMET TABLET 500MG; 50MG	3	QL(60 EA per 30 days)
glipizide xl tablet extended release 24 hour 5mg	1	QL(120 EA per 30 days)	JANUVIA TABLET 100MG	3	QL(30 EA per 30 days)
glipizide/metformin hydrochloride tablet 2.5mg; 250mg	3	QL(240 EA per 30 days)	JANUVIA TABLET 25MG	3	QL(30 EA per 30 days)
glipizide/metformin hydrochloride tablet 2.5mg; 500mg	3	QL(120 EA per 30 days)	JANUVIA TABLET 50MG	3	QL(30 EA per 30 days)
glipizide/metformin hydrochloride tablet 5mg; 500mg	3	QL(120 EA per 30 days)	JARDIANCE TABLET 10MG	3	QL(30 EA per 30 days)
glipizide tablet 10mg	1	QL(120 EA per 30 days)	JARDIANCE TABLET 25MG	3	QL(30 EA per 30 days)
glipizide tablet 2.5mg	1				

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JENTADUETO XR TABLET EXTENDED RELEASE 24 HOUR 2.5MG; 1000MG	3		<i>nateglinide tablet 120mg</i>	4	QL(90 EA per 30 days)
JENTADUETO XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 1000MG	3		<i>nateglinide tablet 60mg</i>	4	QL(180 EA per 30 days)
JENTADUETO TABLET 2.5MG; 1000MG	3		OZEMPIC INJECTION 2MG/1.5ML	3	QL(1.5 ML per 28 days); PA
JENTADUETO TABLET 2.5MG; 500MG	3		OZEMPIC INJECTION 2MG/1.5ML	3	QL(3 ML per 28 days); PA
JENTADUETO TABLET 2.5MG; 850MG	3		OZEMPIC INJECTION 2MG/3ML	3	QL(3 ML per 28 days); PA
<i>metformin hydrochloride er tablet extended release 24 hour 500mg</i>	1	QL(120 EA per 30 days)	OZEMPIC INJECTION 4MG/3ML	3	QL(3 ML per 28 days); PA
<i>metformin hydrochloride er tablet extended release 24 hour 750mg</i>	1	QL(60 EA per 30 days)	OZEMPIC INJECTION 8MG/3ML	3	QL(3 ML per 28 days); PA
<i>metformin hydrochloride tablet 1000mg</i>	1	QL(75 EA per 30 days)	<i>pioglitazone hcl/metformin hcl tablet 500mg; 15mg</i>	3	
<i>metformin hydrochloride tablet 500mg</i>	1	QL(150 EA per 30 days)	<i>pioglitazone hcl/metformin hcl tablet 850mg; 15mg</i>	3	
<i>metformin hydrochloride tablet 850mg</i>	1	QL(90 EA per 30 days)	<i>pioglitazone hcl tablet 45mg</i>	1	QL(30 EA per 30 days)
MOUNJARO INJECTION 10MG/0.5ML	3	QL(2 ML per 28 days); PA	<i>pioglitazone hydrochloride tablet 15mg</i>	1	QL(30 EA per 30 days)
MOUNJARO INJECTION 12.5MG/0.5ML	3	QL(2 ML per 28 days); PA	<i>pioglitazone hydrochloride tablet 30mg</i>	1	QL(30 EA per 30 days)
MOUNJARO INJECTION 15MG/0.5ML	3	QL(2 ML per 28 days); PA	<i>repaglinide tablet 0.5mg</i>	3	QL(960 EA per 30 days)
MOUNJARO INJECTION 2.5MG/0.5ML	3	QL(2 ML per 28 days); PA	<i>repaglinide tablet 1mg</i>	3	QL(480 EA per 30 days)
MOUNJARO INJECTION 5MG/0.5ML	3	QL(2 ML per 28 days); PA	<i>repaglinide tablet 2mg</i>	3	QL(240 EA per 30 days)
MOUNJARO INJECTION 7.5MG/0.5ML	3	QL(2 ML per 28 days); PA	RYBELSUS TABLET 14MG	3	QL(30 EA per 30 days); PA
			RYBELSUS TABLET 3MG	3	QL(60 EA per 365 days); PA
			RYBELSUS TABLET 7MG	3	QL(30 EA per 30 days); PA
			SOLIQUA 100/33 INJECTION 100UNIT/ML; 33MCG/ML	3	QL(90 ML per 30 days); PA
			SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 1000MG	3	QL(60 EA per 30 days)

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SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 12.5MG; 1000MG	3	QL(60 EA per 30 days)	TRULICITY INJECTION 4.5MG/0.5ML	3	QL(2 ML per 28 days); PA
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 25MG; 1000MG	3	QL(30 EA per 30 days)	XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 1000MG	3	
SYNJARDY XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 1000MG	3	QL(60 EA per 30 days)	XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 500MG	3	
SYNJARDY TABLET 12.5MG; 1000MG	3	QL(60 EA per 30 days)	XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 1000MG	3	
SYNJARDY TABLET 12.5MG; 500MG	3	QL(60 EA per 30 days)	XIGDUO XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 500MG	3	
SYNJARDY TABLET 5MG; 1000MG	3	QL(60 EA per 30 days)	Glycemic Agents		
SYNJARDY TABLET 5MG; 500MG	3	QL(60 EA per 30 days)	BAQSIMI ONE PACK POWDER 3MG/DOSE	3	
TRADJENTA TABLET 5MG	3	QL(30 EA per 30 days)	BAQSIMI TWO PACK POWDER 3MG/DOSE	3	
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 10MG; 5MG; 1000MG	3	QL(30 EA per 30 days)	<i>diazoxide suspension</i> 50mg/ml	4	
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 12.5MG; 2.5MG; 1000MG	3	QL(60 EA per 30 days)	GLUCAGEN HYPOKIT INJECTION 1MG	4	ST
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 25MG; 5MG; 1000MG	3	QL(30 EA per 30 days)	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR INJECTION 1MG/ML	3	
TRIJARDY XR TABLET EXTENDED RELEASE 24 HOUR 5MG; 2.5MG; 1000MG	3	QL(60 EA per 30 days)	GLUCAGON EMERGENCY KIT FOR LOW BLOOD SUGAR INJECTION 1MG	4	
TRULICITY INJECTION 0.75MG/0.5ML	3	QL(2 ML per 28 days); PA	GLUCAGON EMERGENCY KIT INJECTION 1MG	4	
TRULICITY INJECTION 1.5MG/0.5ML	3	QL(2 ML per 28 days); PA	GVOKE HYPOOPEN 1-PACK INJECTION 0.5MG/0.1ML	3	
TRULICITY INJECTION 3MG/0.5ML	3	QL(2 ML per 28 days); PA			

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GVOKE HYPOOPEN 1-PACK INJECTION 1MG/0.2ML	3		HUMULIN 70/30 KWIKPEN INJECTION 30UNIT/ML; 70UNIT/ML	3	
GVOKE HYPOOPEN 2-PACK INJECTION 0.5MG/0.1ML	3		HUMULIN 70/30 INJECTION 30UNIT/ML; 70UNIT/ML	3	
GVOKE HYPOOPEN 2-PACK INJECTION 1MG/0.2ML	3		HUMULIN N KWIKPEN INJECTION 100UNIT/ML	3	
GVOKE KIT INJECTION 1MG/0.2ML	3		HUMULIN N INJECTION 100UNIT/ML	3	
GVOKE PFS INJECTION 0.5MG/0.1ML	3		HUMULIN R U-500 (CONCENTRATED) INJECTION 500UNIT/ML	3	
GVOKE PFS INJECTION 1MG/0.2ML	3		HUMULIN R U-500 KWIKPEN INJECTION 500UNIT/ML	3	
Insulins			HUMULIN R INJECTION 100UNIT/ML	3	
HUMALOG JUNIOR KWIKPEN INJECTION 100UNIT/ML	3		LANTUS SOLOSTAR INJECTION 100UNIT/ML	3	
HUMALOG KWIKPEN INJECTION 100UNIT/ML	3		LANTUS INJECTION 100UNIT/ML	3	
HUMALOG KWIKPEN INJECTION 200UNIT/ML	3		LYUMJEV KWIKPEN INJECTION 100UNIT/ML	3	
HUMALOG MIX 50/50 KWIKPEN INJECTION 50UNIT/ML; 50UNIT/ML	3		LYUMJEV KWIKPEN INJECTION 200UNIT/ML	3	
HUMALOG MIX 50/50 INJECTION 50UNIT/ML; 50UNIT/ML	3		LYUMJEV INJECTION 100UNIT/ML	3	
HUMALOG MIX 75/25 KWIKPEN INJECTION 25UNIT/ML; 75UNIT/ML	3		NOVOLIN 70/30 FLEXPEN INJECTION 30UNIT/ML; 70UNIT/ML	3	
HUMALOG MIX 75/25 INJECTION 25UNIT/ML; 75UNIT/ML	3		TOUJEO MAX SOLOSTAR INJECTION 300UNIT/ML	3	
HUMALOG INJECTION 100UNIT/ML	3				
HUMALOG INJECTION 100UNIT/ML	3				

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TOUJEO SOLOSTAR INJECTION 300UNIT/ML	3		<i>heparin sodium injection 5000unit/ml</i>	3	
TRESIBA FLEXTOUCH INJECTION 100UNIT/ML	3		<i>jantoven tablet 10mg</i>	1	
TRESIBA FLEXTOUCH INJECTION 200UNIT/ML	3		<i>jantoven tablet 1mg</i>	1	
TRESIBA INJECTION 100UNIT/ML	3		<i>jantoven tablet 2.5mg</i>	1	
Blood Products and Modifiers			<i>jantoven tablet 2mg</i>	1	
Anticoagulants			<i>jantoven tablet 3mg</i>	1	
ELIQUIS STARTER PACK TABLET THERAPY PACK 5MG	3	QL(148 EA per 365 days)	<i>jantoven tablet 4mg</i>	1	
ELIQUIS TABLET 2.5MG	3	QL(60 EA per 30 days)	<i>jantoven tablet 5mg</i>	1	
ELIQUIS TABLET 5MG	3	QL(90 EA per 30 days)	<i>jantoven tablet 6mg</i>	1	
<i>enoxaparin sodium injection 100mg/ml</i>	4	QL(35 ML per 90 days)	<i>jantoven tablet 7.5mg</i>	1	
<i>enoxaparin sodium injection 120mg/0.8ml</i>	4	QL(28 ML per 90 days)	<i>warfarin sodium tablet 10mg</i>	1	
<i>enoxaparin sodium injection 150mg/ml</i>	4	QL(35 ML per 90 days)	<i>warfarin sodium tablet 1mg</i>	1	
<i>enoxaparin sodium injection 300mg/3ml</i>	4	QL(105 ML per 90 days)	<i>warfarin sodium tablet 2.5mg</i>	1	
<i>enoxaparin sodium injection 30mg/0.3ml</i>	4	QL(10.5 ML per 90 days)	<i>warfarin sodium tablet 2mg</i>	1	
<i>enoxaparin sodium injection 40mg/0.4ml</i>	4	QL(14 ML per 90 days)	<i>warfarin sodium tablet 3mg</i>	1	
<i>enoxaparin sodium injection 60mg/0.6ml</i>	4	QL(21 ML per 90 days)	<i>warfarin sodium tablet 4mg</i>	1	
<i>enoxaparin sodium injection 80mg/0.8ml</i>	4	QL(28 ML per 90 days)	<i>warfarin sodium tablet 5mg</i>	1	
<i>fondaparinux sodium injection 10mg/0.8ml</i>	4	QL(28 ML per 90 days)	<i>warfarin sodium tablet 6mg</i>	1	
<i>fondaparinux sodium injection 2.5mg/0.5ml</i>	4	QL(17.5 ML per 90 days)	<i>warfarin sodium tablet 7.5mg</i>	1	
<i>fondaparinux sodium injection 5mg/0.4ml</i>	4	QL(14 ML per 90 days)	XARELTO STARTER PACK TABLET THERAPY PACK 0	3	QL(102 EA per 365 days)
<i>fondaparinux sodium injection 7.5mg/0.6ml</i>	4	QL(21 ML per 90 days)	XARELTO TABLET 10MG	3	QL(30 EA per 30 days)
Blood Products and Modifiers, Other			XARELTO TABLET 15MG	3	QL(60 EA per 30 days)
			XARELTO TABLET 2.5MG	3	QL(60 EA per 30 days)
			XARELTO TABLET 20MG	3	QL(30 EA per 30 days)
			<i>anagrelide hydrochloride capsule 0.5mg</i>	3	

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<i>anagrelide hydrochloride capsule 1mg</i>	3		PYRUKYND TABLET 50MG	5	QL(120 EA per 30 days); PA
NEULASTA ONPRO KIT INJECTION 6MG/0.6ML	5	PA	PYRUKYND TABLET 5MG	5	QL(60 EA per 30 days); PA
NEULASTA INJECTION 6MG/0.6ML	5	PA	RETACRIT INJECTION 10000UNIT/ML	4	PA
OXBRYTA TABLET 300MG	5	QL(240 EA per 30 days); PA	RETACRIT INJECTION 20000UNIT/2ML	4	PA
PROCRI ^T INJECTION 10000UNIT/ML	5	PA	RETACRIT INJECTION 20000UNIT/ML	4	PA
PROCRI ^T INJECTION 20000UNIT/ML	4	PA	RETACRIT INJECTION 2000UNIT/ML	4	PA
PROCRI ^T INJECTION 2000UNIT/ML	4	PA	RETACRIT INJECTION 3000UNIT/ML	4	PA
PROCRI ^T INJECTION 3000UNIT/ML	4	PA	RETACRIT INJECTION 40000UNIT/ML	4	PA
PROCRI ^T INJECTION 40000UNIT/ML	5	PA	RETACRIT INJECTION 4000UNIT/ML	4	PA
PROCRI ^T INJECTION 4000UNIT/ML	4	PA	UDENYCA ONBODY INJECTION 6MG/0.6ML	5	PA
PROMACTA PACKET 12.5MG	5	QL(180 EA per 30 days); PA	UDENYCA INJECTION 6MG/0.6ML	5	PA
PROMACTA PACKET 25MG	5	PA	UDENYCA INJECTION 6MG/0.6ML	5	PA
PROMACTA TABLET 12.5MG	5	QL(30 EA per 30 days); PA	ZARXIO INJECTION 300MCG/0.5ML	5	
PROMACTA TABLET 25MG	5	QL(30 EA per 30 days); PA	ZARXIO INJECTION 480MCG/0.8ML	5	
PROMACTA TABLET 50MG	5	QL(30 EA per 30 days); PA	Hemostasis Agents		
PROMACTA TABLET 75MG	5	QL(30 EA per 30 days); PA	<i>tranexamic acid tablet 650mg</i>	3	
PYRUKYND TAPER PACK TABLET THERAPY PACK 0	5	QL(30 EA per 30 days); PA	Platelet Modifying Agents		
PYRUKYND TAPER PACK TABLET THERAPY PACK 0	5	QL(30 EA per 30 days); PA	ASPIRIN/DIPYRIDAMOLE ER CAPSULE EXTENDED RELEASE 12 HOUR 25MG; 200MG	4	
PYRUKYND TAPER PACK TABLET THERAPY PACK 5MG	5	QL(30 EA per 30 days); PA	<i>aspirin/dipyridamole capsule extended release 12 hour 25mg; 200mg</i>	4	
PYRUKYND TABLET 20MG	5	QL(60 EA per 30 days); PA	BRILINTA TABLET 60MG	4	QL(60 EA per 30 days)
			BRILINTA TABLET 90MG	4	QL(60 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits
CABLIVI INJECTION 11MG	5	QL(30 EA per 30 days); PA
<i>cilostazol tablet 100mg</i>	2	
<i>cilostazol tablet 50mg</i>	2	
<i>clopidogrel tablet 300mg</i>	2	
<i>clopidogrel tablet 75mg</i>	2	QL(30 EA per 30 days)
DOPTELET TABLET 20MG	5	PA
DOPTELET TABLET 20MG	5	PA
DOPTELET TABLET 20MG	5	PA
<i>prasugrel tablet 10mg</i>	4	
<i>prasugrel tablet 5mg</i>	4	
Cardiovascular Agents		
Alpha-adrenergic Agonists		
<i>clonidine hcl patch weekly 0.1mg/24hr</i>	4	
<i>clonidine hcl patch weekly 0.2mg/24hr</i>	4	
<i>clonidine hcl patch weekly 0.3mg/24hr</i>	4	
<i>clonidine hydrochloride tablet 0.1mg</i>	2	
<i>clonidine hydrochloride tablet 0.2mg</i>	2	
<i>clonidine hydrochloride tablet 0.3mg</i>	2	
<i>droxidopa capsule 100mg</i>	4	PA
<i>droxidopa capsule 200mg</i>	4	PA
<i>droxidopa capsule 300mg</i>	4	PA
<i>guanfacine hydrochloride tablet 1mg</i>	4	
<i>guanfacine hydrochloride tablet 2mg</i>	4	
<i>methyldopa tablet 250mg</i>	4	
<i>methyldopa tablet 500mg</i>	4	
<i>midodrine hcl tablet 10mg</i>	3	
<i>midodrine hcl tablet 2.5mg</i>	3	
<i>midodrine hcl tablet 5mg</i>	3	
Alpha-adrenergic Blocking Agents		

Drug Name	Drug Tier	Requirements/Limits
<i>prazosin hydrochloride capsule 1mg</i>	2	
<i>prazosin hydrochloride capsule 2mg</i>	2	
<i>prazosin hydrochloride capsule 5mg</i>	2	
<i>terazosin hcl capsule 10mg</i>	2	
<i>terazosin hcl capsule 1mg</i>	2	
<i>terazosin hcl capsule 5mg</i>	2	
<i>terazosin hydrochloride capsule 2mg</i>	2	
Angiotensin II Receptor Antagonists		
<i>candesartan cilexetil tablet 16mg</i>	3	QL(60 EA per 30 days)
<i>candesartan cilexetil tablet 32mg</i>	3	QL(30 EA per 30 days)
<i>candesartan cilexetil tablet 4mg</i>	3	QL(60 EA per 30 days)
<i>candesartan cilexetil tablet 8mg</i>	3	QL(60 EA per 30 days)
<i>irbesartan tablet 150mg</i>	1	QL(30 EA per 30 days)
<i>irbesartan tablet 300mg</i>	1	QL(30 EA per 30 days)
<i>irbesartan tablet 75mg</i>	1	QL(30 EA per 30 days)
<i>losartan potassium tablet 100mg</i>	1	
<i>losartan potassium tablet 25mg</i>	1	
<i>losartan potassium tablet 50mg</i>	1	
<i>olmesartan medoxomil tablet 20mg</i>	2	
<i>olmesartan medoxomil tablet 40mg</i>	2	
<i>olmesartan medoxomil tablet 5mg</i>	2	
<i>telmisartan tablet 20mg</i>	3	QL(30 EA per 30 days)
<i>telmisartan tablet 40mg</i>	3	QL(30 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>telmisartan tablet 80mg</i>	3	QL(30 EA per 30 days)	<i>quinapril hydrochloride tablet 10mg</i>	1	
<i>valsartan tablet 160mg</i>	2	QL(30 EA per 30 days)	<i>quinapril hydrochloride tablet 20mg</i>	1	
<i>valsartan tablet 320mg</i>	2	QL(30 EA per 30 days)	<i>quinapril hydrochloride tablet 40mg</i>	1	
<i>valsartan tablet 40mg</i>	2	QL(90 EA per 30 days)	<i>quinapril hydrochloride tablet 5mg</i>	1	
<i>valsartan tablet 80mg</i>	2	QL(90 EA per 30 days)	<i>ramipril capsule 1.25mg</i>	1	
Angiotensin-converting Enzyme (ACE) Inhibitors					
<i>benazepril hcl tablet 10mg</i>	1		<i>ramipril capsule 10mg</i>	1	
<i>benazepril hcl tablet 40mg</i>	1		<i>ramipril capsule 2.5mg</i>	1	
<i>benazepril hcl tablet 5mg</i>	1		<i>ramipril capsule 5mg</i>	1	
<i>benazepril hydrochloride tablet 20mg</i>	1		<i>trandolapril tablet 1mg</i>	2	
<i>enalapril maleate tablet 10mg</i>	1		<i>trandolapril tablet 2mg</i>	2	
<i>enalapril maleate tablet 2.5mg</i>	1		<i>trandolapril tablet 4mg</i>	2	
<i>enalapril maleate tablet 20mg</i>	1		Antiarrhythmics		
<i>enalapril maleate tablet 5mg</i>	1		<i>amiodarone hydrochloride tablet 100mg</i>	4	
<i>fosinopril sodium tablet 10mg</i>	2		<i>amiodarone hydrochloride tablet 200mg</i>	2	
<i>fosinopril sodium tablet 20mg</i>	2		<i>amiodarone hydrochloride tablet 400mg</i>	4	
<i>fosinopril sodium tablet 40mg</i>	2		<i>digitek tablet 0.125mg</i>	2	
<i>lisinopril tablet 10mg</i>	1		<i>digitek tablet 0.25mg</i>	2	
<i>lisinopril tablet 2.5mg</i>	1		<i>digoxin solution 0.05mg/ml</i>	4	
<i>lisinopril tablet 20mg</i>	1		<i>digoxin tablet 125mcg</i>	2	
<i>lisinopril tablet 30mg</i>	1		<i>digoxin tablet 250mcg</i>	2	
<i>lisinopril tablet 40mg</i>	1		<i>digoxin tablet 62.5mcg</i>	2	
<i>lisinopril tablet 5mg</i>	1		<i>digox tablet 125mcg</i>	2	
<i>moexipril hcl tablet 15mg</i>	3		<i>digox tablet 250mcg</i>	2	
<i>moexipril hcl tablet 7.5mg</i>	3		<i>dofetilide capsule 125mcg</i>	4	
<i>perindopril erbumine tablet 2mg</i>	3		<i>dofetilide capsule 250mcg</i>	4	
<i>perindopril erbumine tablet 4mg</i>	3		<i>dofetilide capsule 500mcg</i>	4	
<i>perindopril erbumine tablet 8mg</i>	3		<i>flecainide acetate tablet 100mg</i>	2	

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
<i>mexiletine hcl capsule 250mg</i>	4		<i>sotalol hydrochloride tablet 160mg</i>	2		
<i>pacerone tablet 100mg</i>	4		<i>sotalol hydrochloride tablet 80mg</i>	2		
<i>pacerone tablet 200mg</i>	2		Beta-adrenergic Blocking Agents			
<i>pacerone tablet 400mg</i>	4		<i>acebutolol hcl capsule 400mg</i>	2		
<i>propafenone hcl tablet 150mg</i>	2		<i>acebutolol hydrochloride capsule 200mg</i>	2		
<i>propafenone hcl tablet 225mg</i>	2		<i>acebutolol hydrochloride capsule 400mg</i>	2		
<i>propafenone hcl tablet 300mg</i>	2		<i>atenolol tablet 100mg</i>	1		
<i>propafenone hydrochloride er capsule extended release 12 hour 225mg</i>	4		<i>atenolol tablet 25mg</i>	1		
<i>propafenone hydrochloride er capsule extended release 12 hour 325mg</i>	4		<i>atenolol tablet 50mg</i>	1		
<i>propafenone hydrochloride er capsule extended release 12 hour 425mg</i>	4		<i>betaxolol hcl tablet 10mg</i>	3		
QUINIDINE SULFATE TABLET 200MG	3		<i>betaxolol hcl tablet 20mg</i>	3		
QUINIDINE SULFATE TABLET 300MG	3		<i>bisoprolol fumarate tablet 10mg</i>	2		
<i>sorine tablet 120mg</i>	2		<i>bisoprolol fumarate tablet 5mg</i>	2		
<i>sorine tablet 160mg</i>	2		<i>carvedilol tablet 12.5mg</i>	1		
<i>sorine tablet 240mg</i>	2		<i>carvedilol tablet 25mg</i>	1		
<i>sorine tablet 80mg</i>	2		<i>carvedilol tablet 3.125mg</i>	1		
<i>sotalol hcl tablet 120mg</i>	2		<i>carvedilol tablet 6.25mg</i>	1		
<i>sotalol hcl tablet 160mg</i>	2		<i>labetalol hydrochloride tablet 100mg</i>	2		
<i>sotalol hcl tablet 240mg</i>	2		<i>labetalol hydrochloride tablet 200mg</i>	2		
<i>sotalol hcl tablet 80mg</i>	2		<i>labetalol hydrochloride tablet 300mg</i>	2		
<i>sotalol hydrochloride (af) tablet 120mg</i>	2		<i>metoprolol succinate er tablet extended release 24 hour 100mg</i>	2		
<i>sotalol hydrochloride (af) tablet 160mg</i>	2		<i>metoprolol succinate er tablet extended release 24 hour 200mg</i>	2		
<i>sotalol hydrochloride (af) tablet 80mg</i>	2		<i>metoprolol succinate er tablet extended release 24 hour 25mg</i>	2		
<i>sotalol hydrochloride tablet 120mg</i>	2		<i>metoprolol succinate er tablet extended release 24 hour 50mg</i>	2		
			<i>metoprolol tartrate tablet 100mg</i>	1		

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits																																																						
metoprolol tartrate tablet 25mg	1		felodipine er tablet extended release 24 hour 2.5mg	2																																																							
metoprolol tartrate tablet 37.5mg	1		felodipine er tablet extended release 24 hour 5mg	2																																																							
metoprolol tartrate tablet 50mg	1		nifedipine er tablet extended release 24 hour 30mg	3																																																							
metoprolol tartrate tablet 75mg	2		nifedipine er tablet extended release 24 hour 30mg	3																																																							
nadolol tablet 20mg	4		nifedipine er tablet extended release 24 hour 60mg	3																																																							
nadolol tablet 40mg	4		nifedipine er tablet extended release 24 hour 60mg	3																																																							
nadolol tablet 80mg	4		nifedipine er tablet extended release 24 hour 90mg	3																																																							
nebivolol hydrochloride tablet 10mg	4		nifedipine er tablet extended release 24 hour 90mg	3																																																							
nebivolol hydrochloride tablet 2.5mg	4		nimodipine capsule 30mg	4																																																							
nebivolol hydrochloride tablet 20mg	4		nebivolol hydrochloride tablet 5mg	4		Calcium Channel Blocking Agents, Nondihydropyridines			propranolol hcl er capsule extended release 24 hour 120mg	3		cartia xt capsule extended release 24 hour 120mg	2		propranolol hcl er capsule extended release 24 hour 160mg	3		cartia xt capsule extended release 24 hour 180mg	2		propranolol hydrochloride er capsule extended release 24 hour 60mg	3		cartia xt capsule extended release 24 hour 240mg	2		propranolol hydrochloride er capsule extended release 24 hour 80mg	3		cartia xt capsule extended release 24 hour 300mg	2		Calcium Channel Blocking Agents, Dihydropyridines			dilt-xr capsule extended release 24 hour 120mg	2		amlodipine besylate tablet 10mg	1		dilt-xr capsule extended release 24 hour 180mg	2		amlodipine besylate tablet 2.5mg	1		dilt-xr capsule extended release 24 hour 240mg	2		amlodipine besylate tablet 5mg	1		diltiazem hcl cd capsule extended release 24 hour 360mg	2		felodipine er tablet extended release 24 hour 10mg	2	
nebivolol hydrochloride tablet 5mg	4		Calcium Channel Blocking Agents, Nondihydropyridines																																																								
propranolol hcl er capsule extended release 24 hour 120mg	3		cartia xt capsule extended release 24 hour 120mg	2																																																							
propranolol hcl er capsule extended release 24 hour 160mg	3		cartia xt capsule extended release 24 hour 180mg	2																																																							
propranolol hydrochloride er capsule extended release 24 hour 60mg	3		cartia xt capsule extended release 24 hour 240mg	2																																																							
propranolol hydrochloride er capsule extended release 24 hour 80mg	3		cartia xt capsule extended release 24 hour 300mg	2																																																							
Calcium Channel Blocking Agents, Dihydropyridines			dilt-xr capsule extended release 24 hour 120mg	2																																																							
amlodipine besylate tablet 10mg	1		dilt-xr capsule extended release 24 hour 180mg	2																																																							
amlodipine besylate tablet 2.5mg	1		dilt-xr capsule extended release 24 hour 240mg	2																																																							
amlodipine besylate tablet 5mg	1		diltiazem hcl cd capsule extended release 24 hour 360mg	2																																																							
felodipine er tablet extended release 24 hour 10mg	2																																																										

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
diltiazem hcl er capsule extended release 12 hour 120mg	4		diltiazem hydrochloride er capsule extended release 24 hour 300mg	2	
diltiazem hcl er capsule extended release 12 hour 60mg	4		diltiazem hydrochloride er capsule extended release 24 hour 300mg	2	
diltiazem hcl er capsule extended release 12 hour 90mg	4		diltiazem hydrochloride er capsule extended release 24 hour 360mg	2	
diltiazem hcl er capsule extended release 24 hour 120mg	2		diltiazem hydrochloride er capsule extended release 24 hour 360mg	2	
diltiazem hcl er capsule extended release 24 hour 180mg	2		diltiazem hydrochloride er capsule extended release 24 hour 360mg	2	
diltiazem hcl er capsule extended release 24 hour 240mg	2		diltiazem hydrochloride er capsule extended release 24 hour 360mg	2	
diltiazem hcl er capsule extended release 24 hour 420mg	2		diltiazem hydrochloride tablet 120mg	2	
diltiazem hcl tablet 30mg	2		taztia xt capsule extended release 24 hour 120mg	2	
diltiazem hcl tablet 60mg	2		taztia xt capsule extended release 24 hour 180mg	2	
diltiazem hcl tablet 90mg	2		taztia xt capsule extended release 24 hour 240mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 120mg	2		taztia xt capsule extended release 24 hour 300mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 120mg	2		taztia xt capsule extended release 24 hour 360mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 180mg	2		tiadylt er capsule extended release 24 hour 120mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 180mg	2		tiadylt er capsule extended release 24 hour 180mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 240mg	2		tiadylt er capsule extended release 24 hour 240mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 240mg	2		tiadylt er capsule extended release 24 hour 300mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 240mg	2		tiadylt er capsule extended release 24 hour 360mg	2	
diltiazem hydrochloride er capsule extended release 24 hour 240mg	2		tiadylt er capsule extended release 24 hour 420mg	2	
			verapamil hcl er tablet extended release 120mg	2	

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
verapamil hcl er tablet extended release 240mg	2		amlodipine besylate/benazepril hydrochloride capsule 5mg; 10mg	1	QL(45 EA per 30 days)
verapamil hcl sr capsule extended release 24 hour 120mg	4		amlodipine besylate/benazepril hydrochloride capsule 5mg; 20mg	1	QL(45 EA per 30 days)
verapamil hcl sr capsule extended release 24 hour 180mg	4		amlodipine besylate/benazepril hydrochloride capsule 5mg; 40mg	1	QL(30 EA per 30 days)
verapamil hcl sr capsule extended release 24 hour 360mg	4		amlodipine besylate/valsartan tablet 10mg; 160mg	3	
verapamil hcl tablet 40mg	2		amlodipine besylate/valsartan tablet 10mg; 320mg	3	
verapamil hcl tablet 80mg	2		amlodipine besylate/valsartan tablet 5mg; 160mg	3	
verapamil hydrochloride er tablet extended release 180mg	2		amlodipine besylate/valsartan tablet 5mg; 320mg	3	
verapamil hydrochloride tablet 120mg	2		atenolol/chlorthalidone tablet 100mg; 25mg	2	
Cardiovascular Agents, Other			atenolol/chlorthalidone tablet 50mg; 25mg	2	
acetazolamide tablet 125mg	4		benazepril hydrochloride/hydrochlorothiazide tablet 10mg; 12.5mg	3	
acetazolamide tablet 250mg	4		benazepril hydrochloride/hydrochlorothiazide tablet 20mg; 12.5mg	3	
aliskiren tablet 150mg	4		benazepril hydrochloride/hydrochlorothiazide tablet 20mg; 25mg	3	
aliskiren tablet 300mg	4		benazepril hydrochloride/hydrochlorothiazide tablet 5mg; 6.25mg	3	
amiloride/hydrochlorothiazide tablet 5mg; 50mg	3				
amlodipine besylate/benazepril hydrochloride capsule 10mg; 20mg	1	QL(30 EA per 30 days)			
amlodipine besylate/benazepril hydrochloride capsule 10mg; 40mg	1	QL(30 EA per 30 days)			
amlodipine besylate/benazepril hydrochloride capsule 2.5mg; 10mg	1	QL(45 EA per 30 days)			

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
bisoprolol fumarate/hydrochlorothiazide tablet 10mg; 6.25mg	2		irbesartan/hydrochlorothiazide tablet 12.5mg; 300mg	3	QL(30 EA per 30 days)
bisoprolol fumarate/hydrochlorothiazide tablet 2.5mg; 6.25mg	2		KERENDIA TABLET 10MG	4	QL(30 EA per 30 days); PA
bisoprolol fumarate/hydrochlorothiazide tablet 5mg; 6.25mg	2		KERENDIA TABLET 20MG	4	QL(30 EA per 30 days); PA
candesartan cilexetil/hydrochlorothiazide tablet 16mg; 12.5mg	2	QL(30 EA per 30 days)	lisinopril/hydrochlorothiazide tablet 12.5mg; 10mg	1	
candesartan cilexetil/hydrochlorothiazide tablet 32mg; 12.5mg	2	QL(30 EA per 30 days)	lisinopril/hydrochlorothiazide tablet 12.5mg; 20mg	1	
candesartan cilexetil/hydrochlorothiazide tablet 32mg; 25mg	2	QL(30 EA per 30 days)	lisinopril/hydrochlorothiazide tablet 25mg; 20mg	1	
CORLANOR TABLET 5MG	4	QL(60 EA per 30 days); PA	losartan potassium/hydrochlorothiazide tablet 12.5mg; 100mg	1	
CORLANOR TABLET 7.5MG	4	QL(60 EA per 30 days); PA	losartan potassium/hydrochlorothiazide tablet 25mg; 100mg	1	
enalapril maleate/hydrochlorothiazide tablet 10mg; 25mg	1		metyrosine capsule 250mg	5	PA
enalapril maleate/hydrochlorothiazide tablet 5mg; 12.5mg	1		olmesartan medoxomil/hydrochlorothiazide tablet 12.5mg; 20mg	2	
ENTRESTO TABLET 24MG; 26MG	3	QL(60 EA per 30 days)	olmesartan medoxomil/hydrochlorothiazide tablet 12.5mg; 40mg	2	
ENTRESTO TABLET 49MG; 51MG	3	QL(60 EA per 30 days)	olmesartan medoxomil/hydrochlorothiazide tablet 25mg; 40mg	2	
ENTRESTO TABLET 97MG; 103MG	3	QL(60 EA per 30 days)	pentoxifylline er tablet extended release 400mg	3	
fosinopril sodium/hydrochlorothiazide tablet 10mg; 12.5mg	3		quinapril/hydrochlorothiazide tablet 12.5mg; 10mg	3	
fosinopril sodium/hydrochlorothiazide tablet 20mg; 12.5mg	3		quinapril/hydrochlorothiazide tablet 12.5mg; 20mg	3	
irbesartan/hydrochlorothiazide tablet 12.5mg; 150mg	3	QL(30 EA per 30 days)	quinapril/hydrochlorothiazide tablet 25mg; 20mg	3	
			ranolazine er tablet extended release 12 hour 1000mg	4	QL(60 EA per 30 days)

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<i>ranolazine er tablet extended release 12 hour 500mg</i>	4	QL(120 EA per 30 days)	<i>furosemide tablet 80mg</i>	1	
<i>spironolactone/hydrochlorothiazide tablet 25mg; 25mg</i>	3		<i>torsemide tablet 100mg</i>	2	
<i>telmisartan/hydrochlorothiazide tablet 12.5mg; 40mg</i>	2	QL(30 EA per 30 days)	<i>torsemide tablet 20mg</i>	2	
<i>telmisartan/hydrochlorothiazide tablet 12.5mg; 80mg</i>	2	QL(30 EA per 30 days)	<i>torsemide tablet 5mg</i>	2	
<i>telmisartan/hydrochlorothiazide tablet 25mg; 80mg</i>	2	QL(30 EA per 30 days)	Diuretics, Potassium-sparing		
<i>triamterene/hydrochlorothiazide capsule 25mg; 37.5mg</i>	1		<i>amiloride hcl tablet 5mg</i>	2	
<i>triamterene/hydrochlorothiazide tablet 25mg; 37.5mg</i>	1		<i>eplerenone tablet 25mg</i>	3	
<i>triamterene/hydrochlorothiazide tablet 50mg; 75mg</i>	1		<i>eplerenone tablet 50mg</i>	3	
<i>valsartan/hydrochlorothiazide tablet 12.5mg; 160mg</i>	2	QL(30 EA per 30 days)	<i>spironolactone tablet 100mg</i>	2	
<i>valsartan/hydrochlorothiazide tablet 12.5mg; 320mg</i>	2	QL(30 EA per 30 days)	<i>spironolactone tablet 25mg</i>	2	
<i>valsartan/hydrochlorothiazide tablet 12.5mg; 80mg</i>	2	QL(30 EA per 30 days)	<i>spironolactone tablet 50mg</i>	2	
<i>valsartan/hydrochlorothiazide tablet 25mg; 160mg</i>	2	QL(30 EA per 30 days)	Diuretics, Thiazide		
<i>valsartan/hydrochlorothiazide tablet 25mg; 320mg</i>	2	QL(30 EA per 30 days)	<i>chlorthalidone tablet 25mg</i>	2	
<i>VYNDAMAX CAPSULE 61MG</i>	5	QL(30 EA per 30 days); PA	<i>chlorthalidone tablet 50mg</i>	2	
Diuretics, Loop			<i>hydrochlorothiazide capsule 12.5mg</i>	1	
<i>bumetanide injection 0.25mg/ml</i>	2		<i>hydrochlorothiazide tablet 12.5mg</i>	1	
<i>bumetanide tablet 0.5mg</i>	3		<i>hydrochlorothiazide tablet 25mg</i>	1	
<i>bumetanide tablet 1mg</i>	3		<i>hydrochlorothiazide tablet 50mg</i>	1	
<i>bumetanide tablet 2mg</i>	3		<i>indapamide tablet 1.25mg</i>	2	
<i>furosemide injection 10mg/ml</i>	4		<i>indapamide tablet 2.5mg</i>	2	
<i>furosemide tablet 20mg</i>	1		<i>metolazone tablet 10mg</i>	3	
<i>furosemide tablet 40mg</i>	1		<i>metolazone tablet 2.5mg</i>	3	
			<i>metolazone tablet 5mg</i>	3	
Dyslipidemics, Fibrin Acid Derivatives			Dyslipidemics, Fibrin Acid Derivatives		
<i>fenofibrate micronized capsule 134mg</i>	2		<i>fenofibrate micronized capsule 134mg</i>	2	
<i>fenofibrate micronized capsule 200mg</i>	2		<i>fenofibrate micronized capsule 200mg</i>	2	
<i>fenofibrate micronized capsule 67mg</i>	2		<i>fenofibrate capsule 67mg</i>	2	
<i>fenofibrate tablet 145mg</i>	2	QL(30 EA per 30 days)	<i>fenofibrate tablet 145mg</i>	2	QL(30 EA per 30 days)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
<i>fenofibrate tablet 160mg</i>	2		<i>rosuvastatin calcium tablet 10mg</i>	1	QL(30 EA per 30 days)
<i>fenofibrate tablet 48mg</i>	2	QL(60 EA per 30 days)	<i>rosuvastatin calcium tablet 20mg</i>	1	QL(30 EA per 30 days)
<i>fenofibrate tablet 54mg</i>	2		<i>rosuvastatin calcium tablet 40mg</i>	1	QL(30 EA per 30 days)
<i>fenofibric acid dr capsule delayed release 135mg</i>	4		<i>rosuvastatin calcium tablet 5mg</i>	1	QL(30 EA per 30 days)
<i>fenofibric acid dr capsule delayed release 45mg</i>	4		<i>simvastatin tablet 10mg</i>	1	QL(30 EA per 30 days)
<i>gemfibrozil tablet 600mg</i>	2		<i>simvastatin tablet 20mg</i>	1	QL(30 EA per 30 days)
Dyslipidemics, HMG CoA Reductase Inhibitors					
<i>atorvastatin calcium tablet 10mg</i>	1	QL(30 EA per 30 days)	<i>simvastatin tablet 40mg</i>	1	QL(30 EA per 30 days)
<i>atorvastatin calcium tablet 20mg</i>	1	QL(30 EA per 30 days)	<i>simvastatin tablet 5mg</i>	1	QL(30 EA per 30 days)
<i>atorvastatin calcium tablet 40mg</i>	1	QL(30 EA per 30 days)	<i>simvastatin tablet 80mg</i>	1	QL(30 EA per 30 days)
<i>atorvastatin calcium tablet 80mg</i>	1	QL(30 EA per 30 days)	Dyslipidemics, Other		
<i>fluvastatin capsule 20mg</i>	4		<i>cholestyramine light packet 4gm</i>	4	
<i>fluvastatin capsule 40mg</i>	4		<i>cholestyramine light powder 4gm/dose</i>	4	
<i>LIVALO TABLET 1MG</i>	4	ST	<i>cholestyramine packet 4gm</i>	4	
<i>LIVALO TABLET 2MG</i>	4	ST	<i>cholestyramine powder 4gm/dose</i>	4	
<i>LIVALO TABLET 4MG</i>	4	ST	<i>colesevelam hydrochloride tablet 625mg</i>	4	
<i>lovastatin tablet 10mg</i>	1	QL(30 EA per 30 days)	<i>colestipol hcl granules 5gm</i>	4	
<i>lovastatin tablet 20mg</i>	1	QL(60 EA per 30 days)	<i>colestipol hcl packet 5gm</i>	4	
<i>lovastatin tablet 40mg</i>	1	QL(60 EA per 30 days)	<i>colestipol hcl tablet 1gm</i>	4	
<i>pitavastatin calcium tablet 1mg</i>	4		<i>ezetimibe/simvastatin tablet 10mg; 10mg</i>	4	
<i>pitavastatin calcium tablet 2mg</i>	4		<i>ezetimibe/simvastatin tablet 10mg; 20mg</i>	4	
<i>pitavastatin calcium tablet 4mg</i>	4		<i>ezetimibe/simvastatin tablet 10mg; 40mg</i>	4	
<i>pravastatin sodium tablet 10mg</i>	1	QL(30 EA per 30 days)	<i>ezetimibe/simvastatin tablet 10mg; 80mg</i>	4	
<i>pravastatin sodium tablet 20mg</i>	1	QL(30 EA per 30 days)	<i>ezetimibe tablet 10mg</i>	2	
<i>pravastatin sodium tablet 40mg</i>	1	QL(30 EA per 30 days)	<i>icosapent ethyl capsule 0.5gm</i>	4	
<i>pravastatin sodium tablet 80mg</i>	1	QL(30 EA per 30 days)			

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icosapent ethyl capsule 1gm	4		NITRO-BID OINTMENT 2%	3	
niacin er tablet extended release 1000mg	4		nitroglycerin transdermal patch 24 hour 0.1mg/hr	2	
niacin er tablet extended release 500mg	4		nitroglycerin transdermal patch 24 hour 0.2mg/hr	2	
niacin er tablet extended release 750mg	4		nitroglycerin transdermal patch 24 hour 0.4mg/hr	2	
omega-3-acid ethyl esters capsule 375mg; 465mg; 1gm	3		nitroglycerin transdermal patch 24 hour 0.6mg/hr	2	
prevalite packet 4gm	4		nitroglycerin tablet sublingual 0.3mg	2	
prevalite powder 4gm/dose	4		nitroglycerin tablet sublingual 0.4mg	2	
REPATHA PUSHTRONEX SYSTEM INJECTION 420MG/3.5ML	3	QL(7 ML per 28 days); PA	nitroglycerin tablet sublingual 0.6mg	2	
REPATHA SURECLICK INJECTION 140MG/ML	3	QL(3 ML per 28 days); PA	VERQUVO TABLET 10MG	3	QL(30 EA per 30 days); PA
REPATHA INJECTION 140MG/ML	3	QL(3 ML per 28 days); PA	VERQUVO TABLET 2.5MG	3	QL(30 EA per 30 days); PA
Vasodilators, Direct-acting Arterial/Venous					
isosorbide dinitrate tablet 10mg	3		VERQUVO TABLET 5MG	3	QL(30 EA per 30 days); PA
isosorbide dinitrate tablet 20mg	3		Vasodilators, Direct-acting Arterial		
isosorbide dinitrate tablet 30mg	3		hydralazine hcl tablet 10mg	2	
isosorbide dinitrate tablet 5mg	3		hydralazine hydrochloride tablet 100mg	2	
isosorbide mononitrate er tablet extended release 24 hour 120mg	2		hydralazine hydrochloride tablet 25mg	2	
isosorbide mononitrate er tablet extended release 24 hour 30mg	2		hydralazine hydrochloride tablet 50mg	2	
isosorbide mononitrate er tablet extended release 24 hour 60mg	2		minoxidil tablet 10mg	3	
isosorbide mononitrate tablet 10mg	2		minoxidil tablet 2.5mg	3	
isosorbide mononitrate tablet 20mg	2		Central Nervous System Agents		
Attention Deficit Hyperactivity Disorder Agents, Amphetamines					
amphetamine/dextroamphetamine capsule extended release 24 hour 1.25mg; 1.25mg; 1.25mg; 1.25mg			amphetamine/dextroamphetamine capsule extended release 24 hour 1.25mg; 1.25mg; 1.25mg; 1.25mg	4	QL(60 EA per 30 days); Extended-release capsule 5mg

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amphetamine/dextroamphetamine capsule extended release 24 hour 2.5mg; 2.5mg; 2.5mg; 2.5mg	4	QL(60 EA per 30 days); Extended-release capsule 10mg	amphetamine/dextroamphetamine tablet 5mg; 5mg; 5mg; 5mg	3	QL(90 EA per 30 days)
amphetamine/dextroamphetamine capsule extended release 24 hour 3.75mg; 3.75mg; 3.75mg; 3.75mg	4	QL(60 EA per 30 days); Extended-release capsule 15mg	amphetamine/dextroamphetamine tablet 7.5mg; 7.5mg; 7.5mg	3	QL(90 EA per 30 days)
amphetamine/dextroamphetamine capsule extended release 24 hour 5mg; 5mg; 5mg; 5mg	4	QL(60 EA per 30 days); Extended-release capsule 20mg	dextroamphetamine sulfate tablet 10mg	4	QL(180 EA per 30 days)
amphetamine/dextroamphetamine capsule extended release 24 hour 6.25mg; 6.25mg; 6.25mg; 6.25mg	4	QL(60 EA per 30 days); Extended-release capsule 25mg	dextroamphetamine sulfate tablet 5mg	4	QL(90 EA per 30 days)
amphetamine/dextroamphetamine capsule extended release 24 hour 7.5mg; 7.5mg; 7.5mg; 7.5mg	4	QL(60 EA per 30 days); Extended-release capsule 30mg	Attention Deficit Hyperactivity Disorder Agents, Non-amphetamines		
amphetamine/dextroamphetamine tablet 1.25mg; 1.25mg; 1.25mg; 1.25mg	3	QL(90 EA per 30 days)	atomoxetine hydrochloride capsule 10mg	4	QL(60 EA per 30 days)
amphetamine/dextroamphetamine tablet 1.875mg; 1.875mg; 1.875mg; 1.875mg	3	QL(90 EA per 30 days)	atomoxetine hydrochloride capsule 25mg	4	QL(30 EA per 30 days)
amphetamine/dextroamphetamine tablet 2.5mg; 2.5mg; 2.5mg; 2.5mg	3	QL(90 EA per 30 days)	atomoxetine capsule 100mg	4	QL(30 EA per 30 days)
amphetamine/dextroamphetamine tablet 3.125mg; 3.125mg; 3.125mg; 3.125mg	3	QL(90 EA per 30 days)	atomoxetine capsule 18mg	4	QL(30 EA per 30 days)
amphetamine/dextroamphetamine tablet 3.75mg; 3.75mg; 3.75mg; 3.75mg	3	QL(90 EA per 30 days)	atomoxetine capsule 40mg	4	QL(30 EA per 30 days)
			atomoxetine capsule 60mg	4	QL(30 EA per 30 days)
			atomoxetine capsule 80mg	4	QL(30 EA per 30 days)
			guanfacine er tablet extended release 24 hour 2mg	3	
			guanfacine hydrochloride tablet extended release 24 hour 1mg	3	
			guanfacine hydrochloride tablet extended release 24 hour 3mg	3	
			guanfacine hydrochloride tablet extended release 24 hour 4mg	3	
			methylphenidate hydrochloride solution 10mg/5ml	4	
			methylphenidate hydrochloride solution 5mg/5ml	4	

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methylphenidate hydrochloride tablet 10mg	2	QL(90 EA per 30 days)	SAVELLA TABLET 100MG	3	QL(60 EA per 30 days)
methylphenidate hydrochloride tablet 20mg	2	QL(90 EA per 30 days)	SAVELLA TABLET 12.5MG	3	QL(60 EA per 30 days)
methylphenidate hydrochloride tablet 5mg	2	QL(90 EA per 30 days)	SAVELLA TABLET 25MG	3	QL(60 EA per 30 days)
Central Nervous System, Other			SAVELLA TABLET 50MG	3	QL(60 EA per 30 days)
AUSTEDO TABLET 12MG	5	QL(120 EA per 30 days); PA	Multiple Sclerosis Agents		
AUSTEDO TABLET 6MG	5	QL(120 EA per 30 days); PA	BAFIERTAM CAPSULE DELAYED RELEASE 95MG	5	QL(120 EA per 30 days); PA
AUSTEDO TABLET 9MG	5	QL(120 EA per 30 days); PA	BETASERON INJECTION 0.3MG	5	QL(15 EA per 30 days); PA
NUEDEXTA CAPSULE 20MG; 10MG	4	PA	dalfampridine er tablet extended release 12 hour 10mg	3	QL(60 EA per 30 days); PA
riluzole tablet 50mg	4		dimethyl fumarate starterpack capsule delayed release therapy pack 0	4	QL(120 EA per 365 days); PA
tetrabenazine tablet 12.5mg	4	QL(240 EA per 30 days); PA	dimethyl fumarate capsule delayed release 120mg	4	QL(60 EA per 30 days); PA
tetrabenazine tablet 25mg	4	QL(120 EA per 30 days); PA	dimethyl fumarate capsule delayed release 240mg	4	QL(60 EA per 30 days); PA
ZTALMY SUSPENSION 50MG/ML	5	PA NSO	fingolimod capsule 0.5mg	5	QL(30 EA per 30 days); PA
Fibromyalgia Agents			glatiramer acetate injection 20mg/ml	5	QL(30 ML per 30 days); PA
pregabalin capsule 100mg	2	QL(90 EA per 30 days)	glatiramer acetate injection 40mg/ml	5	QL(12 ML per 28 days); PA
pregabalin capsule 150mg	2	QL(90 EA per 30 days)	KESIMPTA INJECTION 20MG/0.4ML	5	QL(0.4 ML per 28 days); PA
pregabalin capsule 200mg	2	QL(90 EA per 30 days)	TYSABRI INJECTION 300MG/15ML	5	PA
pregabalin capsule 225mg	2	QL(90 EA per 30 days)	Dental and Oral Agents		
pregabalin capsule 25mg	2	QL(90 EA per 30 days)	chlorhexidine gluconate solution 0.12%	2	
pregabalin capsule 300mg	2	QL(60 EA per 30 days)	doxycycline hyclate tablet 20mg	3	
pregabalin capsule 50mg	2	QL(90 EA per 30 days)	kourzeq paste 0.1%	3	
pregabalin capsule 75mg	2	QL(90 EA per 30 days)	lidocaine hydrochloride viscous solution 2%	2	
pregabalin solution 20mg/ml	4	QL(900 ML per 30 days)			
SAVELLA TITRATION PACK	3	QL(110 EA per 365 days)			
MISCELLANEOUS 0					

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<i>lidocaine viscous solution 2%</i>	2	
<i>periogard solution 0.12%</i>	2	
<i>pilocarpine hydrochloride tablet 5mg</i>	4	
<i>pilocarpine hydrochloride tablet 7.5mg</i>	4	
<i>triamcinolone acetonide dental paste paste 0.1%</i>	3	
Dermatological Agents		
Acne and Rosacea Agents		
<i>acitretin capsule 10mg</i>	4	PA
<i>acitretin capsule 17.5mg</i>	4	PA
<i>acitretin capsule 25mg</i>	4	PA
<i>amnesteem capsule 10mg</i>	4	
<i>amnesteem capsule 20mg</i>	4	
<i>amnesteem capsule 40mg</i>	4	
<i>azelaic acid gel 15%</i>	4	
<i>claravis capsule 10mg</i>	4	
<i>claravis capsule 20mg</i>	4	
<i>claravis capsule 30mg</i>	4	
<i>claravis capsule 40mg</i>	4	
<i>erythromycin/benzoyl peroxide gel 5%; 3%</i>	4	
<i>FINACEA FOAM 15%</i>	4	QL(50 GM per 30 days)
<i>isotretinoin capsule 10mg</i>	4	
<i>isotretinoin capsule 20mg</i>	4	
<i>isotretinoin capsule 30mg</i>	4	
<i>isotretinoin capsule 40mg</i>	4	
<i>metronidazole cream 0.75%</i>	4	
<i>metronidazole gel 0.75%</i>	4	
<i>metronidazole gel 1%</i>	4	
<i>myorisan capsule 10mg</i>	4	
<i>myorisan capsule 20mg</i>	4	
<i>myorisan capsule 30mg</i>	4	
<i>myorisan capsule 40mg</i>	4	
<i>rosadan cream 0.75%</i>	4	
<i>rosadan gel 0.75%</i>	4	
<i>TAZAROTENE CREAM 0.1%</i>	4	
<i>tretinoin cream 0.025%</i>	3	PA
<i>tretinoin cream 0.05%</i>	4	PA

Drug Name	Drug Tier	Requirements/ Limits
<i>tretinoin cream 0.1%</i>	4	PA
<i>zenatane capsule 10mg</i>	4	
<i>zenatane capsule 20mg</i>	4	
<i>zenatane capsule 30mg</i>	4	
<i>zenatane capsule 40mg</i>	4	
Dermatitis and Pruitus Agents		
<i>ala-cort cream 2.5%</i>	2	
<i>alclometasone</i>	3	
<i>dipropionate cream 0.05%</i>		
<i>alclometasone</i>	3	
<i>dipropionate ointment 0.05%</i>		
<i>ammonium lactate cream 12%</i>	3	
<i>ammonium lactate lotion 12%</i>	3	
<i>betamethasone</i>	2	
<i>dipropionate augmented cream 0.05%</i>		
<i>betamethasone</i>	4	
<i>dipropionate augmented ointment 0.05%</i>		
<i>betamethasone</i>	4	
<i>dipropionate cream 0.05%</i>		
<i>betamethasone</i>	3	
<i>dipropionate lotion 0.05%</i>		
<i>betamethasone</i>	4	
<i>dipropionate ointment 0.05%</i>		
<i>betamethasone valerate cream 0.1%</i>	3	
<i>betamethasone valerate lotion 0.1%</i>	3	
<i>betamethasone valerate ointment 0.1%</i>	3	
<i>clobetasol propionate e cream 0.05%</i>	4	QL(120 GM per 28 days)
<i>clobetasol propionate cream 0.05%</i>	4	QL(120 GM per 28 days)
<i>clobetasol propionate gel 0.05%</i>	4	QL(120 GM per 28 days)
<i>clobetasol propionate ointment 0.05%</i>	4	QL(120 GM per 28 days)

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clobetasol propionate solution 0.05%	3	QL(100 ML per 28 days)	mometasone furoate cream 0.1%	2	
desonide cream 0.05%	3		mometasone furoate ointment 0.1%	2	
desonide ointment 0.05%	4	QL(120 GM per 30 days)	mometasone furoate solution 0.1%	3	
EUCRISA OINTMENT 2%	4	PA	selenium sulfide lotion 2.5%	2	
fluocinolone acetonide cream 0.01%	4		tacrolimus ointment 0.03%	4	QL(100 GM per 30 days)
fluocinolone acetonide cream 0.025%	4		tacrolimus ointment 0.1%	4	QL(100 GM per 30 days)
fluocinolone acetonide ointment 0.025%	4		triamcinolone acetonide cream 0.025%	2	
fluocinolone acetonide solution 0.01%	4		triamcinolone acetonide cream 0.1%	2	
fluocinonide cream 0.05%	3		triamcinolone acetonide cream 0.5%	2	
fluocinonide cream 0.1%	3	QL(120 GM per 30 days)	triamcinolone acetonide lotion 0.025%	3	
fluocinonide gel 0.05%	4	QL(120 GM per 30 days)	triamcinolone acetonide lotion 0.1%	2	
fluocinonide ointment 0.05%	4	QL(120 GM per 30 days)	triamcinolone acetonide ointment 0.025%	2	
fluocinonide solution 0.05%	4	QL(120 ML per 30 days)	triamcinolone acetonide ointment 0.1%	2	
fluticasone propionate cream 0.05%	3		triamcinolone acetonide ointment 0.5%	2	
fluticasone propionate ointment 0.005%	3		triderm cream 0.1%	2	
halobetasol propionate ointment 0.05%	4		triderm cream 0.5%	2	
hydrocortisone valerate cream 0.2%	3	QL(60 GM per 30 days)	Dermatological Agents, Other		
hydrocortisone cream 1%	2		calcipotriene cream	4	QL(120 GM per 30 days)
hydrocortisone cream 2.5%	2		calcipotriene ointment	4	QL(120 GM per 30 days)
hydrocortisone cream 2.5%	2		calcipotriene solution	3	QL(60 ML per 30 days)
hydrocortisone lotion 2.5%	2		clotrimazole/betamethasone dipropionate cream 0.05%; 1%	2	QL(45 GM per 28 days)
hydrocortisone ointment 1%	2		diclofenac sodium gel 3%	4	QL(300 GM per 30 days); ST
hydrocortisone ointment 2.5%	2		fluorouracil cream 5%	4	QL(40 GM per 30 days)

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<i>fluorouracil solution 2%</i>	3	
<i>fluorouracil solution 5%</i>	3	
<i>imiquimod cream 5%</i>	3	
KLISYRI OINTMENT 1%	5	ST
<i>nystatin/triamcinolone cream 100000unit/gm; 1mg/gm</i>	3	QL(60 GM per 28 days)
<i>nystatin/triamcinolone ointment 100000unit/gm; 0.1%</i>	3	
OTEZLA TABLET 30MG	5	QL(60 EA per 30 days); PA
PICATO GEL 0.015%	5	
PICATO GEL 0.05%	5	
<i>podofilox solution 0.5%</i>	4	
SANTYL OINTMENT 250UNIT/GM	4	QL(180 GM per 30 days)
<i>silver sulfadiazine cream 1%</i>	2	
<i>ssd cream 1%</i>	2	
<i>urea lotion 40%</i>	4	
Pediculicides/Scabicides		
<i>malathion lotion 0.5%</i>	4	
<i>permethrin cream 5%</i>	3	
Topical Anti-infectives		
<i>acyclovir ointment 5%</i>	3	
<i>ciclodan solution 8%</i>	3	PA
<i>ciclopirox nail lacquer solution 8%</i>	3	PA
<i>ciclopirox olamine cream 0.77%</i>	2	QL(90 GM per 28 days)
<i>ciclopirox gel 0.77%</i>	3	QL(45 GM per 28 days)
<i>ciclopirox shampoo 1%</i>	3	QL(120 ML per 28 days)
<i>ciclopirox suspension 0.77%</i>	3	QL(60 ML per 28 days)
<i>clindamycin phosphate solution 1%</i>	3	QL(60 ML per 30 days)
<i>ery pad 2%</i>	3	
<i>erythromycin gel 2%</i>	4	
<i>erythromycin solution 2%</i>	4	

Drug Name	Drug Tier	Requirements/Limits
<i>mupirocin ointment 2%</i>	2	QL(110 GM per 30 days)
Electrolytes/Minerals/Metals/Vitamins		
Electrolyte/Mineral Replacement		
AMINOSYN II INJECTION	4	B/D
107.6MEQ/L; 1490MG/100ML; 1527MG/100ML; 1050MG/100ML; 1107MG/100ML; 750MG/100ML; 450MG/100ML; 990MG/100ML; 1500MG/100ML; 1575MG/100ML; 258MG/100ML; 405MG/100ML; 447MG/100ML; 1083MG/100ML; 795MG/100ML; 50MEQ/L; 600MG/100ML; 300MG/100ML; 750MG/100ML		
<i>carglumic acid tablet soluble 200mg</i>	5	
<i>dextrose 5%/nacl 0.45% injection 5%; 0.45%</i>	4	
<i>dextrose 5%/nacl 0.9% injection 5%; 0.9%</i>	4	
<i>dextrose 5% injection 5%</i>	2	
<i>effer-k tablet effervescent 25meq</i>	2	
<i>klor-con 10 tablet extended release 10meq</i>	2	
<i>klor-con 8 tablet extended release 8meq</i>	2	
<i>klor-con m10 tablet extended release 10meq</i>	2	
<i>klor-con m15 tablet extended release 15meq</i>	3	
<i>klor-con m20 tablet extended release 20meq</i>	2	

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klor-con/ef tablet effervescent 25meq	2		potassium chloride er tablet extended release 20meq	2		
klor-con packet 20meq	4		potassium chloride er tablet extended release 20meq	2		
magnesium sulfate injection 50%	4		potassium chloride er tablet extended release 8meq	2		
magnesium sulfate injection 50%	4		potassium chloride sr tablet extended release 8meq	2		
PLENAMINE INJECTION 147.4MEQ/L; 2.17GM/100ML; 1.47GM/100ML; 434MG/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 749MG/100ML; 1.04GM/100ML; 1.18GM/100ML; 749MG/100ML; 1.04GM/100ML; 894MG/100ML; 592MG/100ML; 749MG/100ML; 250MG/100ML; 39MG/100ML; 960MG/100ML	4	B/D	potassium chloride packet 20meq	4		
potassium chloride er capsule extended release 10meq	2		potassium chloride solution 10%	4		
potassium chloride er capsule extended release 8meq	2		potassium chloride solution 20%	4		
potassium chloride er tablet extended release 10meq	2		potassium citrate er tablet extended release 1080mg	4		
potassium chloride er tablet extended release 10meq	2		potassium citrate er tablet extended release 15meq	4		
potassium chloride er tablet extended release 10meq	2		potassium citrate er tablet extended release 540mg	4		
potassium chloride er tablet extended release 15meq	3		sodium chloride 0.45% injection 0.45%	4		
			sodium chloride injection 0.45%	4		
			sodium chloride injection 0.9%	4		
			Electrolyte/Mineral/Metal Modifiers			
			CHEMET CAPSULE 100MG	5		
			CLOVIQUE CAPSULE 250MG	5	PA	
			deferasirox packet 180mg	5	PA	
			deferasirox packet 360mg	5	PA	
			deferasirox packet 90mg	5	PA	
			deferasirox tablet soluble 125mg	4	PA	
			deferasirox tablet soluble 250mg	5	PA	
			deferasirox tablet soluble 500mg	5	PA	

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deferasirox tablet 180mg	3	PA	enulose solution 10gm/15ml	2	
deferasirox tablet 360mg	4	PA	generlac solution 10gm/15ml	2	
deferasirox tablet 90mg	3	PA	lactulose solution 10gm/15ml	2	
sodium polystyrene sulfonate powder 0	3		lactulose solution 10gm/15ml	2	
trientine hydrochloride capsule 250mg	5	PA	LINZESS CAPSULE 145MCG	3	QL(30 EA per 30 days)
trientine hydrochloride capsule 500mg	5	PA	LINZESS CAPSULE 290MCG	3	QL(30 EA per 30 days)
Phosphate Binders			LINZESS CAPSULE 72MCG	3	QL(30 EA per 30 days)
calcium acetate capsule 667mg	3	QL(360 EA per 30 days)	LUBIPROSTONE CAPSULE 24MCG	3	QL(60 EA per 30 days)
calcium acetate tablet 667mg	3	QL(360 EA per 30 days)	LUBIPROSTONE CAPSULE 8MCG	3	QL(60 EA per 30 days)
sevelamer carbonate packet 0.8gm	4	QL(180 EA per 30 days)	MOTEGRITY TABLET 1MG	3	QL(30 EA per 30 days)
sevelamer carbonate packet 2.4gm	4	QL(90 EA per 30 days)	MOTEGRITY TABLET 2MG	3	QL(30 EA per 30 days)
sevelamer carbonate tablet 800mg	4	QL(270 EA per 30 days)	RELISTOR INJECTION 12MG/0.6ML	5	QL(18 ML per 30 days); ST
Potassium Binders			RELISTOR INJECTION 12MG/0.6ML	5	QL(18 ML per 30 days); ST
LOKELMA PACKET 10GM	3		RELISTOR INJECTION 8MG/0.4ML	5	QL(12 ML per 30 days); ST
LOKELMA PACKET 5GM	3		RELISTOR TABLET 150MG	5	QL(90 EA per 30 days); ST
sps suspension 15gm/60ml	3		Anti-Diarrheal Agents		
VELTASSA PACKET 16.8GM	4		alosetron hydrochloride tablet 0.5mg	4	QL(60 EA per 30 days); PA
VELTASSA PACKET 25.2GM	4		alosetron hydrochloride tablet 1mg	5	QL(60 EA per 30 days); PA
VELTASSA PACKET 8.4GM	4		diphenoxylate hydrochloride/atropine sulfate tablet 0.025mg; 2.5mg	4	
Vitamins			loperamide hcl capsule 2mg	3	
prenatal tablet 120mg; 0; 200mg; 10mcg; 2mg; 12mcg; 27mg; 1mg; 20mg; 10mg; 1200mcg; 3mg; 1.84mg; 10mg; 25mg	2		XERMELO TABLET 250MG	5	QL(90 EA per 30 days); PA
Gastrointestinal Agents			Antispasmodics, Gastrointestinal		
Anti-Constipation Agents					
constulose solution 10gm/15ml	2				

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<i>dicyclomine hydrochloride capsule 10mg</i>	2		RECTIV OINTMENT 0.4%	4	
<i>dicyclomine hydrochloride tablet 20mg</i>	2		SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE SOLUTION 1.6GM/177ML; 3.13GM/177ML; 17.5GM/177ML	3	
<i>glycopyrrolate tablet 1mg</i>	3	PA	SUTAB TABLET 225MG; 188MG; 1479MG	3	
<i>glycopyrrolate tablet 2mg</i>	3	PA	<i>ursodiol tablet 250mg</i>	3	
Gastrointestinal Agents, Other			<i>ursodiol tablet 500mg</i>	3	
CLENPIQ SOLUTION 12GM/160ML; 3.5GM/160ML; 10MG/160ML	3		XIFAXAN TABLET 200MG	4	QL(9 EA per 30 days); PA
CLENPIQ SOLUTION 12GM/175ML; 3.5GM/175ML; 10MG/175ML	3		XIFAXAN TABLET 550MG	5	QL(90 EA per 30 days); PA
<i>gavilyte-c solution reconstituted 240gm; 2.98gm; 6.72gm; 5.84gm; 22.72gm</i>	2		Histamine2 (H2) Receptor Antagonists		
<i>gavilyte-g solution reconstituted 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	2		<i>famotidine tablet 20mg</i>	2	
<i>gavilyte-n/flavor pack solution reconstituted 420gm; 1.48gm; 5.72gm; 11.2gm</i>	2		<i>famotidine tablet 40mg</i>	2	
<i>metoclopramide hcl solution 5mg/5ml</i>	2		<i>nizatidine capsule 150mg</i>	4	
<i>metoclopramide hcl tablet 5mg</i>	2		<i>nizatidine capsule 300mg</i>	4	
<i>metoclopramide hydrochloride injection 5mg/ml</i>	2		<i>nizatidine solution 15mg/ml</i>	4	
<i>metoclopramide hydrochloride tablet 10mg</i>	2		Protectants		
<i>peg-3350/electrolytes solution reconstituted 236gm; 2.97gm; 6.74gm; 5.86gm; 22.74gm</i>	2		<i>misoprostol tablet 100mcg</i>	3	
<i>peg-3350/nacl/nabicarbonate/kcl solution reconstituted 420gm; 1.48gm; 5.72gm; 11.2gm</i>	2		<i>misoprostol tablet 200mcg</i>	3	
			<i>sucralfate tablet 1gm</i>	3	
Proton Pump Inhibitors			Proton Pump Inhibitors		
			<i>esomeprazole magnesium capsule delayed release 20mg</i>	3	QL(60 EA per 30 days)
			<i>esomeprazole magnesium capsule delayed release 40mg</i>	3	QL(60 EA per 30 days)
			<i>lansoprazole capsule delayed release 15mg</i>	2	QL(60 EA per 30 days)
			<i>lansoprazole capsule delayed release 30mg</i>	2	QL(60 EA per 30 days)
			<i>omeprazole dr capsule delayed release 10mg</i>	2	QL(60 EA per 30 days)
			<i>omeprazole capsule delayed release 10mg</i>	2	QL(60 EA per 30 days)

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<i>omeprazole capsule delayed release 20mg</i>	2	QL(60 EA per 30 days)	CREON CAPSULE DELAYED RELEASE PARTICLES 60000UNIT; 12000UNIT; 38000UNIT	3	
<i>omeprazole capsule delayed release 40mg</i>	2	QL(60 EA per 30 days)	<i>cromolyn sodium concentrate 100mg/5ml</i>	4	
<i>pantoprazole sodium tablet delayed release 20mg</i>	2	QL(60 EA per 30 days)	CYSTAGON CAPSULE 150MG	4	
<i>pantoprazole sodium tablet delayed release 40mg</i>	2	QL(60 EA per 30 days)	CYSTAGON CAPSULE 50MG	4	
<i>rabeprozole sodium tablet delayed release 20mg</i>	3	QL(60 EA per 30 days)	ELAPRASE INJECTION 6MG/3ML	5	PA
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment			ENDARI PACKET 5GM	5	PA
Genetic or Enzyme or Protein Disorder: Replacement, Modifiers, Treatment			EVRYSDI SOLUTION RECONSTITUTED 0.75MG/ML	5	QL(240 ML per 30 days); PA
<i>ALDURAZYME INJECTION 2.9MG/5ML</i>	5	PA	FABRAZYME INJECTION 35MG	5	
<i>betaine anhydrous powder 0</i>	5		FABRAZYME INJECTION 5MG	5	
<i>CERDELGA CAPSULE 84MG</i>	5	PA	KANUMA INJECTION 20MG/10ML	5	PA
<i>CHOLBAM CAPSULE 250MG</i>	5	PA	LUMIZYME INJECTION 50MG	5	PA
<i>CHOLBAM CAPSULE 50MG</i>	5	PA	<i>miglustat capsule 100mg</i>	5	PA
<i>CREON CAPSULE DELAYED RELEASE PARTICLES 120000UNIT; 24000UNIT; 76000UNIT</i>	3		NAGLAZYME INJECTION 1MG/ML	5	PA
<i>CREON CAPSULE DELAYED RELEASE PARTICLES 15000UNIT; 3000UNIT; 9500UNIT</i>	3		<i>nitisinone capsule 10mg</i>	5	
<i>CREON CAPSULE DELAYED RELEASE PARTICLES 180000UNIT; 36000UNIT; 114000UNIT</i>	3		<i>nitisinone capsule 20mg</i>	5	
<i>CREON CAPSULE DELAYED RELEASE PARTICLES 30000UNIT; 6000UNIT; 19000UNIT</i>	3		<i>nitisinone capsule 2mg</i>	5	
			<i>nitisinone capsule 5mg</i>	5	
			PROLASTIN-C INJECTION 1000MG	5	PA
			REVCovi INJECTION 2.4MG/1.5ML	5	
			<i>sapropterin dihydrochloride packet 100mg</i>	5	PA
			<i>sapropterin dihydrochloride packet 500mg</i>	5	PA
			<i>sapropterin dihydrochloride tablet 100mg</i>	5	PA

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sodium phenylbutyrate powder 3gm/tsp	5		ZENPEP CAPSULE DELAYED RELEASE PARTICLES 252600UNIT; 60000UNIT; 189600UNIT	3		
STRENSIQ INJECTION 18MG/0.45ML	5	PA	ZENPEP CAPSULE DELAYED RELEASE PARTICLES 42000UNIT; 10000UNIT; 32000UNIT	3		
STRENSIQ INJECTION 28MG/0.7ML	5	PA	ZENPEP CAPSULE DELAYED RELEASE PARTICLES 63000UNIT; 15000UNIT; 47000UNIT	3		
STRENSIQ INJECTION 40MG/ML	5	PA	ZENPEP CAPSULE DELAYED RELEASE PARTICLES 84000UNIT; 20000UNIT; 63000UNIT	3		
STRENSIQ INJECTION 80MG/0.8ML	5	PA	ZOKINVY CAPSULE 50MG	5	QL(120 EA per 30 days); PA	
SUCRAID SOLUTION 8500UNIT/ML	5		ZOKINVY CAPSULE 75MG	5	QL(120 EA per 30 days); PA	
TEGSEDI INJECTION 284MG/1.5ML	5		Genitourinary Agents			
VIMIZIM INJECTION 5MG/5ML	5	PA	Antispasmodics, Urinary			
VIOKACE TABLET 39150UNIT; 10440UNIT; 39150UNIT	4		GEMTESA TABLET 75MG	4		
VIOKACE TABLET 78300UNIT; 20880UNIT; 78300UNIT	4		MYRBETRIQ SUSPENSION RECONSTITUTED ER 8MG/ML	3		
VYNDAQEL CAPSULE 20MG	5	QL(120 EA per 30 days)	MYRBETRIQ TABLET EXTENDED RELEASE 24 HOUR 25MG	3		
yargesa capsule 100mg	5	PA	MYRBETRIQ TABLET EXTENDED RELEASE 24 HOUR 50MG	3		
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 105000UNIT; 25000UNIT; 79000UNIT	3		oxybutynin chloride er tablet extended release 24 hour 10mg	2		
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 14000UNIT; 3000UNIT; 10000UNIT	3		oxybutynin chloride er tablet extended release 24 hour 15mg	2		
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 168000UNIT; 40000UNIT; 126000UNIT	3		oxybutynin chloride er tablet extended release 24 hour 5mg	2		
ZENPEP CAPSULE DELAYED RELEASE PARTICLES 24000UNIT; 5000UNIT; 17000UNIT	3					

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<i>oxybutynin chloride solution 5mg/5ml</i>	2		<i>bethanechol chloride tablet 5mg</i>	3	
<i>oxybutynin chloride tablet 5mg</i>	2		<i>d-penamine tablet 125mg</i>	5	
<i>tolterodine tartrate er capsule extended release 24 hour 2mg</i>	4		ELMIRON CAPSULE 100MG	4	
<i>tolterodine tartrate er capsule extended release 24 hour 4mg</i>	4		<i>penicillamine tablet 250mg</i>	5	
<i>tolterodine tartrate tablet 1mg</i>	4		Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>tolterodine tartrate tablet 2mg</i>	4		Hormonal Agents, Stimulant/Replacement/Modifying (Adrenal)		
<i>trospium chloride tablet 20mg</i>	3		<i>dexamethasone elixir 0.5mg/5ml</i>	3	
Benign Prostatic Hypertrophy Agents			<i>dexamethasone solution 0.5mg/5ml</i>	3	
<i>alfuzosin hcl er tablet extended release 24 hour 10mg</i>	2		<i>dexamethasone tablet 0.5mg</i>	2	
<i>doxazosin mesylate tablet 1mg</i>	2		<i>dexamethasone tablet 0.75mg</i>	2	
<i>doxazosin mesylate tablet 2mg</i>	2		<i>dexamethasone tablet 1.5mg</i>	2	
<i>doxazosin mesylate tablet 4mg</i>	2		<i>dexamethasone tablet 1mg</i>	2	
<i>doxazosin mesylate tablet 8mg</i>	2		<i>dexamethasone tablet 2mg</i>	2	
<i>dutasteride capsule 0.5mg</i>	3		<i>dexamethasone tablet 4mg</i>	2	
<i>finasteride tablet 5mg</i>	2		<i>dexamethasone tablet 6mg</i>	2	
<i>silodosin capsule 4mg</i>	3		<i>fludrocortisone acetate tablet 0.1mg</i>	2	
<i>silodosin capsule 8mg</i>	3		<i>hydrocortisone tablet 10mg</i>	2	
<i>tamsulosin hydrochloride capsule 0.4mg</i>	2		<i>hydrocortisone tablet 20mg</i>	2	
Genitourinary Agents, Other			<i>hydrocortisone tablet 5mg</i>	2	
<i>acetic acid 0.25% solution 0.25%</i>	2		<i>methylprednisolone dose pack tablet therapy pack 4mg</i>	2	
<i>bethanechol chloride tablet 10mg</i>	3		<i>methylprednisolone tablet 16mg</i>	2	
<i>bethanechol chloride tablet 25mg</i>	3		<i>methylprednisolone tablet 32mg</i>	2	
<i>bethanechol chloride tablet 50mg</i>	3		<i>methylprednisolone tablet 4mg</i>	2	
			<i>methylprednisolone tablet 8mg</i>	2	

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<i>prednisolone sodium phosphate solution 15mg/5ml</i>	2		GENOTROPIN MINIQUICK INJECTION 0.8MG	5	PA	
<i>prednisolone solution 15mg/5ml</i>	2		GENOTROPIN MINIQUICK INJECTION 1.2MG	5	PA	
<i>prednisone solution 5mg/5ml</i>	4		GENOTROPIN MINIQUICK INJECTION 1.4MG	5	PA	
<i>prednisone tablet therapy pack 10mg</i>	2		GENOTROPIN MINIQUICK INJECTION 1.6MG	5	PA	
<i>prednisone tablet therapy pack 10mg</i>	2		GENOTROPIN MINIQUICK INJECTION 1.8MG	5	PA	
<i>prednisone tablet therapy pack 5mg</i>	2		GENOTROPIN MINIQUICK INJECTION 1MG	5	PA	
<i>prednisone tablet therapy pack 5mg</i>	2		GENOTROPIN MINIQUICK INJECTION 2MG	5	PA	
<i>prednisone tablet 10mg</i>	2		GENOTROPIN INJECTION 12MG	5	PA	
<i>prednisone tablet 1mg</i>	2		GENOTROPIN INJECTION 5MG	5	PA	
<i>prednisone tablet 2.5mg</i>	2		INCRELEX INJECTION 40MG/4ML	5	PA	
<i>prednisone tablet 20mg</i>	2		Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)			
<i>prednisone tablet 50mg</i>	2		Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)			
<i>prednisone tablet 5mg</i>	2		<i>desmopressin acetate solution 0.01%</i>	4		
Hormonal Agents, Stimulant/Replacement/Modifying (Pituitary)			<i>desmopressin acetate solution 0.01%</i>	4		
<i>desmopressin acetate tablet 0.1mg</i>	3		<i>desmopressin acetate tablet 0.1mg</i>	3		
<i>desmopressin acetate tablet 0.2mg</i>	3		<i>desmopressin acetate tablet 0.2mg</i>	3		
<i>GENOTROPIN MINIQUICK INJECTION 0.2MG</i>	5	PA	<i>GENOTROPIN MINIQUICK INJECTION 0.4MG</i>	5	PA	
<i>GENOTROPIN MINIQUICK INJECTION 0.6MG</i>	5	PA	<i>GENOTROPIN MINIQUICK INJECTION 0.6MG</i>	5	PA	
Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)				Hormonal Agents, Stimulant/Replacement/Modifying (Prostaglandins)		
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)				<i>KORLYM TABLET 300MG</i>	5 QL(120 EA per 30 days); PA	
Androgens				<i>mifepristone tablet 200mg</i>	4	
				<i>MIFEPRISTONE TABLET 300MG</i>	5 QL(120 EA per 30 days); PA	
Hormonal Agents, Stimulant/Replacement/Modifying (Sex Hormones/Modifiers)				<i>danazol capsule 100mg</i>	4	
				<i>danazol capsule 200mg</i>	4	
				<i>danazol capsule 50mg</i>	4	
				<i>testosterone cypionate injection 100mg/ml</i>	2 PA	

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<i>testosterone cypionate injection 200mg/ml</i>	2	PA	<i>ayuna tablet 0.03mg; 0.15mg</i>	4	
<i>testosterone cypionate injection 200mg/ml</i>	2	PA	<i>ayuna tablet 0.03mg; 0.15mg</i>	4	
<i>testosterone enanthate injection 200mg/ml</i>	3	PA	<i>azurette tablet 0; 0</i>	4	
TESTOSTERONE PUMP GEL 1%	4	QL(300 GM per 30 days); PA	<i>balziva tablet 35mcg; 0.4mg</i>	3	
<i>testosterone pump gel 1.62%</i>	4	QL(150 GM per 30 days); PA	<i>blisovi fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	4	
TESTOSTERONE GEL 25MG/2.5GM	4	QL(300 GM per 30 days); PA	<i>blisovi fe 1/20 tablet 20mcg; 75mg; 1mg</i>	4	
TESTOSTERONE GEL 50MG/5GM	4	QL(300 GM per 30 days); PA	<i>briellyn tablet 35mcg; 0.4mg</i>	3	
Estrogens			<i>camrese lo tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>afirmelle tablet 20mcg; 0.1mg</i>	4		<i>camrese tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>altavera tablet 30mcg; 0.15mg</i>	4		<i>chateal eq tablet 30mcg; 0.15mg</i>	4	
<i>alyacen 1/35 tablet 35mcg; 1mg</i>	3		<i>chateal tablet 0.03mg; 0.15mg</i>	4	
<i>alyacen 7/7/7 tablet 0; 0</i>	4		CLIMARA PRO PATCH WEEKLY 0.045MG/DAY; 0.015MG/DAY	4	
<i>amethia tablet 0; 0</i>	4	QL(91 EA per 91 days)	<i>cryselle-28 tablet 30mcg; 0.3mg</i>	4	
<i>amethyst tablet 20mcg; 90mcg</i>	4		<i>cyclafem 1/35 tablet 35mcg; 1mg</i>	3	
<i>amethyst tablet 20mcg; 90mcg</i>	4		<i>cyclafem 7/7/7 tablet 0; 0</i>	4	
<i>ashlyna tablet 0; 0</i>	4	QL(91 EA per 91 days)	<i>dasetta 1/35 tablet 35mcg; 1mg</i>	3	
<i>aubra eq tablet 20mcg; 0.1mg</i>	4		<i>dasetta 7/7/7 tablet 0; 0</i>	4	
<i>aubra tablet 20mcg; 0.1mg</i>	4		<i>daysee tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>aurovela 1.5/30 tablet 30mcg; 1.5mg</i>	4		<i>delyla tablet 20mcg; 0.1mg</i>	4	
<i>aurovela 1/20 tablet 20mcg; 1mg</i>	4		<i>desogestrel/ethinyl estradiol tablet 0; 0</i>	4	
<i>aurovela fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	4		<i>dolishale tablet 20mcg; 90mcg</i>	4	
<i>aurovela fe 1/20 tablet 20mcg; 75mg; 1mg</i>	4		<i>dotti patch twice weekly 0.025mg/24hr</i>	4	
<i>aviane tablet 20mcg; 0.1mg</i>	4				

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dotti patch twice weekly 0.0375mg/24hr	4		estradiol patch weekly 0.075mg/24hr	4	QL(4 EA per 28 days)
dotti patch twice weekly 0.05mg/24hr	4		estradiol patch weekly 0.1mg/24hr	4	QL(4 EA per 28 days)
dotti patch twice weekly 0.075mg/24hr	4		estradiol patch weekly 37.5mcg/24hr	4	QL(4 EA per 28 days)
dotti patch twice weekly 0.1mg/24hr	4		estradiol tablet 0.5mg	2	
elinest tablet 30mcg; 0.3mg	4		estradiol tablet 1mg	2	
eluryng ring 0.015mg/24hr; 0.12mg/24hr	4		estradiol tablet 2mg	2	
enilloring ring 0.015mg/24hr; 0.12mg/24hr	4		estradiol tablet 10mcg	4	
enpresse-28 tablet 0; 0	4		ESTRING RING 7.5MCG/24HR	4	QL(1 EA per 90 days)
estarrylla tablet 35mcg; 0.25mg	4		ethynodiol diacetate/ethinyl estradiol tablet 35mcg; 1mg	4	
estradiol cream 0.1mg/gm	4		ethynodiol diacetate/ethinyl estradiol tablet 50mcg; 1mg	4	
estradiol gel 0.25mg/0.25gm	4		ETONOGESTREL/ETHI NYL ESTRADIOL RING 0.015MG/24HR; 0.12MG/24HR	4	
estradiol gel 0.5mg/0.5gm	4		falmina tablet 20mcg; 0.1mg	4	
estradiol gel 0.75mg/0.75gm	4		fayosim tablet 0; 0	4	QL(91 EA per 91 days)
estradiol gel 1.25mg/1.25gm	4		femynor tablet 35mcg; 0.25mg	4	
estradiol gel 1mg/gm	4		fyavolv tablet 2.5mcg; 0.5mg	4	
estradiol patch twice weekly 0.025mg/24hr	4		fyavolv tablet 5mcg; 1mg	3	
estradiol patch twice weekly 0.0375mg/24hr	4		hailey 1.5/30 tablet 30mcg; 1.5mg	4	
estradiol patch twice weekly 0.05mg/24hr	4		hailey fe 1.5/30 tablet 30mcg; 75mg; 1.5mg	4	
estradiol patch twice weekly 0.075mg/24hr	4		hailey fe 1.5/30 tablet 30mcg; 75mg; 1.5mg	4	
estradiol patch twice weekly 0.1mg/24hr	4		hailey fe 1/20 tablet 20mcg; 75mg; 1mg	4	
estradiol patch weekly 0.025mg/24hr	4	QL(4 EA per 28 days)	haloette ring 0.015mg/24hr; 0.12mg/24hr	4	
estradiol patch weekly 0.05mg/24hr	4	QL(4 EA per 28 days)	iclevia tablet 0.03mg; 0.15mg	4	QL(91 EA per 91 days)
estradiol patch weekly 0.06mg/24hr	4	QL(4 EA per 28 days)			

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<i>introvale tablet 0.03mg; 0.15mg</i>	4	QL(91 EA per 91 days)	<i>levonorgestrel/ethinyl estradiol tablet 0.03mg; 0.15mg</i>	4	QL(91 EA per 91 days)
<i>jaimiess tablet 0; 0</i>	4	QL(91 EA per 91 days)	<i>levonorgestrel/ethinyl estradiol tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>jintelii tablet 5mcg; 1mg</i>	3		<i>levonorgestrel/ethinyl estradiol tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>jolessa tablet 0.03mg; 0.15mg</i>	4	QL(91 EA per 91 days)	<i>levonorgestrel/ethinyl estradiol tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>junel 1.5/30 tablet 30mcg; 1.5mg</i>	4		<i>levonorgestrel/ethinyl estradiol tablet 0; 0</i>	4	
<i>junel 1/20 tablet 20mcg; 1mg</i>	4		<i>levonorgestrel/ethinyl estradiol tablet 20mcg; 0.1mg</i>	4	
<i>junel fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	4		<i>levora 0.15/30-28 tablet 0.03mg; 0.15mg</i>	4	
<i>junel fe 1/20 tablet 20mcg; 75mg; 1mg</i>	4		<i>lillow tablet 30mcg; 0.15mg</i>	4	
<i>kariva tablet 0; 0</i>	4		<i>lojaimiess tablet 0; 0</i>	4	QL(91 EA per 91 days)
<i>kelnor 1/35 tablet 35mcg; 1mg</i>	4		<i>low-ogestrel tablet 30mcg; 0.3mg</i>	4	
<i>kelnor 1/50 tablet 50mcg; 1mg</i>	4		<i>lutera tablet 20mcg; 0.1mg</i>	4	
<i>kurvelo tablet 0.03mg; 0.15mg</i>	4		<i>lyllana patch twice weekly 0.025mg/24hr</i>	4	
<i>larin 1.5/30 tablet 30mcg; 1.5mg</i>	4		<i>lyllana patch twice weekly 0.0375mg/24hr</i>	4	
<i>larin 1/20 tablet 20mcg; 1mg</i>	4		<i>lyllana patch twice weekly 0.05mg/24hr</i>	4	
<i>larin fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	4		<i>lyllana patch twice weekly 0.075mg/24hr</i>	4	
<i>larin fe 1/20 tablet 20mcg; 75mg; 1mg</i>	4		<i>lyllana patch twice weekly 0.1mg/24hr</i>	4	
<i>larissia tablet 20mcg; 0.1mg</i>	4		<i>marlissa tablet 0.03mg; 0.15mg</i>	4	
<i>lessina tablet 20mcg; 0.1mg</i>	4		MENEST TABLET 2.5MG	4	
<i>levonest tablet 0; 0</i>	4		<i>microgestin 1.5/30 tablet 30mcg; 1.5mg</i>	4	
<i>levonorgestrel and ethinyl estradiol tablet 0; 0</i>	4	QL(91 EA per 91 days)	<i>microgestin 1/20 tablet 20mcg; 1mg</i>	4	
<i>levonorgestrel and ethinyl estradiol tablet 20mcg; 90mcg</i>	4		<i>microgestin fe 1.5/30 tablet 30mcg; 75mg; 1.5mg</i>	4	
<i>levonorgestrel/ethinyl estradiol tablet 0.03mg; 0.15mg</i>	4				

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Drug Name	Drug Tier	Requirements/ Limits
microgestin fe 1/20 tablet 20mcg; 75mg; 1mg	4	
mini tablet 35mcg; 0.25mg	4	
mono-linyah tablet 35mcg; 0.25mg	4	
necon 0.5/35-28 tablet 35mcg; 0.5mg	3	
norethindrone acetate/ethinyl estradiol/ferrous fumarate tablet 20mcg; 75mg; 1mg	4	
norethindrone acetate/ethinyl estradiol/ferrous fumarate tablet 30mcg; 75mg; 1.5mg	4	
norethindrone acetate/ethinyl estradiol tablet 2.5mcg; 0.5mg	4	
norethindrone acetate/ethinyl estradiol tablet 20mcg; 1mg	4	
norethindrone acetate/ethinyl estradiol tablet 30mcg; 1.5mg	4	
norethindrone acetate/ethinyl estradiol tablet 5mcg; 1mg	3	
norgestimate/ethinyl estradiol tablet 0; 0	4	
norgestimate/ethinyl estradiol tablet 35mcg; 0.25mg	4	
nortrel 0.5/35 (28) tablet 35mcg; 0.5mg	3	
nortrel 1/35 tablet 35mcg; 1mg	3	
nortrel 1/35 tablet 35mcg; 1mg	3	
nortrel 7/7/7 tablet 0; 0	4	
nylia 1/35 tablet 35mcg; 1mg	3	
nylia 7/7/7 tablet 0; 0	4	

Drug Name	Drug Tier	Requirements/ Limits
nymyo tablet 35mcg; 0.25mg	4	
orsythia tablet 20mcg; 0.1mg	4	
philith tablet 35mcg; 0.4mg	3	
pimtrea tablet 0; 0	4	
pirmella 1/35 tablet 35mcg; 1mg	3	
pirmella 7/7/7 tablet 0; 0	4	
portia-28 tablet 0.03mg; 0.15mg	4	
PREMARIN CREAM 0.625MG/GM	4	
PREMARIN TABLET 0.3MG	4	
PREMARIN TABLET 0.45MG	4	
PREMARIN TABLET 0.625MG	4	
PREMARIN TABLET 0.9MG	4	
PREMARIN TABLET 1.25MG	4	
PREMPHASE TABLET 0.625MG; 5MG	4	
PREMPRO TABLET 0.3MG; 1.5MG	4	
PREMPRO TABLET 0.45MG; 1.5MG	4	
PREMPRO TABLET 0.625MG; 2.5MG	4	
PREMPRO TABLET 0.625MG; 5MG	4	
previfem tablet 35mcg; 0.25mg	4	
rivelsa tablet 0; 0	4	QL(91 EA per 91 days)
setlakin tablet 0.03mg; 0.15mg	4	QL(91 EA per 91 days)
simliya tablet 0; 0	4	
simpesse tablet 0; 0	4	QL(91 EA per 91 days)

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits	
simpesse tablet 0; 0	4	QL(91 EA per 91 days)	jencycla tablet 0.35mg	4		
sprintec 28 tablet 35mcg; 0.25mg	4		lyleq tablet 0.35mg	4		
sronyx tablet 20mcg; 0.1mg	4		lyza tablet 0.35mg	4		
tarina fe 1/20 eq tablet 20mcg; 75mg; 1mg	4		medroxyprogesterone acetate injection 150mg/ml	4	QL(1 ML per 90 days)	
tarina fe 1/20 tablet 20mcg; 75mg; 1mg	4		medroxyprogesterone acetate injection 150mg/ml	4	QL(1 ML per 90 days)	
tri-femynor tablet 0; 0	4		medroxyprogesterone acetate tablet 10mg	1		
tri-estarrylla tablet 0; 0	4		medroxyprogesterone acetate tablet 2.5mg	1		
tri-linyah tablet 0; 0	4		medroxyprogesterone acetate tablet 5mg	1		
tri-mili tablet 0; 0	4		megestrol acetate suspension 40mg/ml	4	PA	
tri-nymyo tablet 0; 0	4		megestrol acetate suspension 625mg/5ml	4	PA	
tri-previfem tablet 0; 0	4		megestrol acetate tablet 20mg	3	PA NSO	
tri-sprintec tablet 0; 0	4		megestrol acetate tablet 40mg	3	PA NSO	
tri-vylibra tablet 0; 0	4		nora-be tablet 0.35mg	4		
trivora-28 tablet 0; 0	4		norethindrone acetate tablet 5mg	2		
turqoz tablet 30mcg; 0.3mg	4		norethindrone tablet 0.35mg	4		
vienna tablet 20mcg; 0.1mg	4		norlyda tablet 0.35mg	4		
viorele tablet 0; 0	4		norlyroc tablet 0.35mg	4		
volnea tablet 0; 0	4		sharobel tablet 0.35mg	4		
vyfemla tablet 35mcg; 0.4mg	3		tulana tablet 0.35mg	4		
vylibra tablet 35mcg; 0.25mg	4		Selective Estrogen Receptor Modifying Agents			
wera tablet 35mcg; 0.5mg	3		OSPHENA TABLET	4	QL(30 EA per 30 days); PA	
yuvafem tablet 10mcg	4		raloxifene hydrochloride tablet 60mg	3	QL(30 EA per 30 days)	
zovia 1/35e tablet 35mcg; 1mg	4		Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)			
zovia 1/35 tablet 35mcg; 1mg	4		Hormonal Agents, Stimulant/Replacement/Modifying (Thyroid)			
Progestins			euthyrox tablet 100mcg	1		
camila tablet 0.35mg	4		euthyrox tablet 112mcg	1		
deblitane tablet 0.35mg	4		euthyrox tablet 125mcg	1		
DEPO-SUBQ PROVERA 104 INJECTION 104MG/0.65ML	4	QL(0.65 ML per 90 days)				
errin tablet 0.35mg	4					
heather tablet 0.35mg	4					
incassia tablet 0.35mg	4					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits	
euthyrox tablet 137mcg	1		LEVOXYL TABLET 200MCG	3		
euthyrox tablet 150mcg	1		LEVOXYL TABLET 25MCG	3		
euthyrox tablet 175mcg	1		LEVOXYL TABLET 50MCG	3		
euthyrox tablet 200mcg	1		LEVOXYL TABLET 75MCG	3		
euthyrox tablet 25mcg	1		LEVOXYL TABLET 88MCG	3		
euthyrox tablet 50mcg	1		liothyronine sodium tablet 25mcg	3		
euthyrox tablet 75mcg	1		liothyronine sodium tablet 50mcg	3		
euthyrox tablet 88mcg	1		liothyronine sodium tablet 5mcg	3		
levothyroxine sodium tablet 100mcg	2		Hormonal Agents, Suppressant (Adrenal)			
levothyroxine sodium tablet 112mcg	2		Hormonal Agents, Suppressant (Adrenal)			
levothyroxine sodium tablet 125mcg	2		ISTURISA TABLET 10MG	5	QL(180 EA per 30 days); PA	
levothyroxine sodium tablet 137mcg	2		ISTURISA TABLET 1MG	5	QL(240 EA per 30 days); PA	
levothyroxine sodium tablet 150mcg	2		ISTURISA TABLET 5MG	5	QL(60 EA per 30 days); PA	
levothyroxine sodium tablet 175mcg	2		LYSODREN TABLET 500MG	3		
levothyroxine sodium tablet 200mcg	2		Hormonal Agents, Suppressant (Pituitary)			
levothyroxine sodium tablet 25mcg	2		Hormonal Agents, Suppressant (Pituitary)			
levothyroxine sodium tablet 300mcg	2		cabergoline tablet 0.5mg	3		
levothyroxine sodium tablet 50mcg	2		FIRMAGON INJECTION 120MG/VIAL	5	QL(4 EA per 365 days); PA NSO	
levothyroxine sodium tablet 75mcg	2		FIRMAGON INJECTION 80MG	4	QL(1 EA per 28 days); PA NSO	
levothyroxine sodium tablet 88mcg	2		lanreotide acetate injection 120mg/0.5ml	5	PA NSO	
LEVOXYL TABLET 100MCG	3		leuprolide acetate injection 1mg/0.2ml	5	PA NSO	
LEVOXYL TABLET 112MCG	3		LUPRON DEPOT (1-MONTH) INJECTION 3.75MG	5	QL(1 EA per 28 days); PA NSO	
LEVOXYL TABLET 125MCG	3		LUPRON DEPOT (1-MONTH) INJECTION 7.5MG	5	QL(1 EA per 28 days); PA NSO	
LEVOXYL TABLET 137MCG	3					
LEVOXYL TABLET 150MCG	3					
LEVOXYL TABLET 175MCG	3					

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LUPRON DEPOT (3-MONTH) INJECTION 11.25MG	5	QL(1 EA per 84 days); PA NSO	SOMAVERT INJECTION 20MG	5	QL(30 EA per 30 days); PA
LUPRON DEPOT (3-MONTH) INJECTION 22.5MG	5	QL(1 EA per 84 days); PA NSO	SOMAVERT INJECTION 25MG	5	QL(30 EA per 30 days); PA
LUPRON DEPOT (4-MONTH) INJECTION 30MG	5	QL(1 EA per 112 days); PA NSO	SOMAVERT INJECTION 30MG	5	QL(30 EA per 30 days); PA
LUPRON DEPOT (6-MONTH) INJECTION 45MG	5	QL(1 EA per 168 days); PA NSO	TRELSTAR MIXJECT INJECTION 11.25MG	4	QL(1 EA per 84 days); PA NSO
<i>octreotide acetate injection 1000mcg/ml</i>	4	PA	TRELSTAR MIXJECT INJECTION 22.5MG	4	QL(1 EA per 168 days); PA NSO
<i>octreotide acetate injection 100mcg/ml</i>	4	PA	TRIPTODUR INJECTION 22.5MG	5	QL(1 EA per 168 days); PA
<i>octreotide acetate injection 200mcg/ml</i>	4	PA	Hormonal Agents, Suppressant (Thyroid)		
<i>octreotide acetate injection 500mcg/ml</i>	4	PA	Antithyroid Agents		
<i>octreotide acetate injection 50mcg/ml</i>	4	PA	<i>methimazole tablet 10mg</i>	2	
ORGOVYX TABLET 120MG	5	QL(30 EA per 28 days); PA NSO	<i>methimazole tablet 5mg</i>	2	
SIGNIFOR INJECTION 0.3MG/ML	5	QL(60 ML per 30 days); PA	<i>propylthiouracil tablet 50mg</i>	3	
SIGNIFOR INJECTION 0.6MG/ML	5	QL(60 ML per 30 days); PA	Immunological Agents		
SIGNIFOR INJECTION 0.9MG/ML	5	QL(60 ML per 30 days); PA	Angioedema Agents		
SOMATULINE DEPOT INJECTION 120MG/0.5ML	5	PA NSO	CINRYZE INJECTION 500UNIT	5	PA
SOMATULINE DEPOT INJECTION 60MG/0.2ML	5	PA	<i>icatibant acetate injection 30mg/3ml</i>	5	PA
SOMATULINE DEPOT INJECTION 90MG/0.3ML	5	PA	<i>sajazir injection 30mg/3ml</i>	5	PA
SOMAVERT INJECTION 10MG	5	QL(30 EA per 30 days); PA	Immunoglobulins		
SOMAVERT INJECTION 15MG	5	QL(30 EA per 30 days); PA	BIVIGAM INJECTION 10%	5	PA
			BIVIGAM INJECTION 5GM/50ML	5	PA
			CUVITRU INJECTION 10GM/50ML	5	PA
			CUVITRU INJECTION 1GM/5ML	5	PA
			CUVITRU INJECTION 2GM/10ML	5	PA
			CUVITRU INJECTION 4GM/20ML	5	PA
			CUVITRU INJECTION 8GM/40ML	5	PA
			CUVITRU INJECTION 8GM/40ML	5	PA

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GAMASTAN INJECTION 0	3	PA	COSENTYX SENSOREADY PEN INJECTION 150MG/ML	5	PA
GAMASTAN INJECTION 0	3	PA	COSENTYX SENSOREADY PEN INJECTION 150MG/ML	5	PA
GAMASTAN INJECTION 0	3	PA	COSENTYX UNOREADY INJECTION 300MG/2ML	5	PA
HIZENTRA INJECTION 1GM/5ML	5	PA	COSENTYX INJECTION 125MG/5ML	5	PA
HIZENTRA INJECTION 2GM/10ML	5	PA	COSENTYX INJECTION 150MG/ML	5	PA
HIZENTRA INJECTION 4GM/20ML	5	PA	COSENTYX INJECTION 150MG/ML	5	PA
HYPERHEP B INJECTION 110UNIT/0.5ML	4	B/D	COSENTYX INJECTION 75MG/0.5ML	5	PA
HYPERHEP B INJECTION 220UNIT/ML	4	B/D	DUPIXENT INJECTION 100MG/0.67ML	5	QL(1.34 ML per 28 days); PA
HYPERHEP B INJECTION 220UNIT/ML	4	B/D	DUPIXENT INJECTION 200MG/1.14ML	5	QL(4.56 ML per 28 days); PA
NABI-HB INJECTION 312UNIT/ML	3	B/D	DUPIXENT INJECTION 200MG/1.14ML	5	QL(4.56 ML per 28 days); PA
PRIVIGEN INJECTION 10GM/100ML	5	PA	DUPIXENT INJECTION 300MG/2ML	5	QL(8 ML per 28 days); PA
PRIVIGEN INJECTION 20GM/200ML	5	PA	DUPIXENT INJECTION 300MG/2ML	5	QL(8 ML per 28 days); PA
PRIVIGEN INJECTION 40GM/400ML	5	PA	EMPAVELI INJECTION 1080MG/20ML	5	
PRIVIGEN INJECTION 5GM/50ML	5	PA	ENJAYMO INJECTION 1100MG/22ML	5	PA
SYNAGIS INJECTION 100MG/ML	5		KINERET INJECTION 100MG/0.67ML	5	PA
SYNAGIS INJECTION 50MG/0.5ML	5		ORENCIA CLICKJECT INJECTION 125MG/ML	5	PA NSO
VARIZIG INJECTION 125UNIT/1.2ML	3	PA	ORENCIA INJECTION 125MG/ML	5	PA NSO
Immunological Agents, Other			ORENCIA INJECTION 50MG/0.4ML	5	PA NSO
BENLYSTA INJECTION 200MG/ML	5	PA	ORENCIA INJECTION 87.5MG/0.7ML	5	PA NSO
BENLYSTA INJECTION 200MG/ML	5	PA			

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OTEZLA TABLET THERAPY PACK 0	5	QL(110 EA per 365 days); PA	XOLAIR INJECTION 150MG/ML	5	QL(8 ML per 28 days); PA
RINVOQ TABLET EXTENDED RELEASE 24 HOUR 15MG	5	QL(30 EA per 30 days); PA	XOLAIR INJECTION 150MG	5	QL(8 EA per 28 days); PA
RINVOQ TABLET EXTENDED RELEASE 24 HOUR 30MG	5	QL(30 EA per 30 days); PA	XOLAIR INJECTION 75MG/0.5ML	5	QL(1 ML per 28 days); PA
RINVOQ TABLET EXTENDED RELEASE 24 HOUR 45MG	5	QL(30 EA per 30 days); PA	Immunostimulants		
SKYRIZI PEN INJECTION 150MG/ML	5	QL(2 ML per 28 days); PA	ACTIMMUNE INJECTION 2000000UNIT/0.5ML	5	PA NSO
SKYRIZI INJECTION 150MG/ML	5	QL(2 ML per 28 days); PA	INTRON A INJECTION 10000000UNIT/ML	5	PA NSO
SKYRIZI INJECTION 180MG/1.2ML	5	PA	INTRON A INJECTION 10000000UNIT	5	PA NSO
SKYRIZI INJECTION 360MG/2.4ML	5	PA	INTRON A INJECTION 18000000UNIT	5	PA NSO
SKYRIZI INJECTION 600MG/10ML	5	PA	INTRON A INJECTION 50000000UNIT	5	PA NSO
SKYRIZI INJECTION 75MG/0.83ML	5	PA	INTRON A INJECTION 6000000UNIT/ML	5	PA NSO
STELARA INJECTION 130MG/26ML	5	PA	PEGASYS INJECTION 180MCG/0.5ML	5	QL(2 ML per 28 days); PA
STELARA INJECTION 45MG/0.5ML	5	QL(3 ML per 84 days); PA	PEGASYS INJECTION 180MCG/ML	5	QL(4 ML per 28 days); PA
STELARA INJECTION 45MG/0.5ML	5	QL(3 ML per 84 days); PA	Immunosuppressants		
STELARA INJECTION 90MG/ML	5	QL(3 ML per 84 days); PA	ASTAGRAF XL CAPSULE EXTENDED RELEASE 24 HOUR 0.5MG	4	B/D
XELJANZ XR TABLET EXTENDED RELEASE 24 HOUR 11MG	5	QL(30 EA per 30 days); PA	ASTAGRAF XL CAPSULE EXTENDED RELEASE 24 HOUR 1MG	4	B/D
XELJANZ XR TABLET EXTENDED RELEASE 24 HOUR 22MG	5	QL(30 EA per 30 days); PA	ASTAGRAF XL CAPSULE EXTENDED RELEASE 24 HOUR 5MG	4	B/D
XELJANZ SOLUTION 1MG/ML	5	QL(300 ML per 30 days); PA	<i>azathioprine tablet 50mg</i>	3	B/D
XELJANZ TABLET 10MG	5	QL(60 EA per 30 days); PA	<i>cyclosporine modified capsule 100mg</i>	4	B/D
XELJANZ TABLET 5MG	5	QL(60 EA per 30 days); PA	<i>cyclosporine modified capsule 25mg</i>	4	B/D
			<i>cyclosporine modified capsule 50mg</i>	4	B/D

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cyclosporine modified solution 100mg/ml	4	B/D	ENVARSUS XR TABLET EXTENDED RELEASE 24 HOUR 4MG	5	B/D
cyclosporine capsule 100mg	4	B/D	everolimus tablet 0.25mg	4	B/D
cyclosporine capsule 25mg	4	B/D	everolimus tablet 0.5mg	5	B/D
CYLTEZO STARTER PACKAGE FOR CROHNS DISEASE/UC/HS INJECTION 40MG/0.8ML	5	QL(6 EA per 28 days); PA	everolimus tablet 0.75mg	5	B/D
CYLTEZO STARTER PACKAGE FOR PSORIASIS INJECTION 40MG/0.8ML	5	QL(6 EA per 28 days); PA	everolimus tablet 1mg	5	QL(60 EA per 30 days); B/D
CYLTEZO INJECTION 10MG/0.2ML	5	QL(2 EA per 28 days); PA	gengraf capsule 100mg	4	B/D
CYLTEZO INJECTION 20MG/0.4ML	5	QL(2 EA per 28 days); PA	gengraf capsule 25mg	4	B/D
CYLTEZO INJECTION 40MG/0.8ML	5	QL(6 EA per 28 days); PA	gengraf solution 100mg/ml	4	B/D
CYLTEZO INJECTION 40MG/0.8ML	5	QL(6 EA per 28 days); PA	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 0	5	QL(2 EA per 180 days); PA
ENBREL MINI INJECTION 50MG/ML	5	QL(8 ML per 28 days); PA	HUMIRA PEDIATRIC CROHNS DISEASE STARTER PACK INJECTION 80MG/0.8ML	5	QL(3 EA per 180 days); PA
ENBREL SURECLICK INJECTION 50MG/ML	5	QL(8 ML per 28 days); PA	HUMIRA PEN-CD/UC/HS STARTER INJECTION 40MG/0.8ML	5	QL(6 EA per 180 days); PA
ENBREL INJECTION 25MG/0.5ML	5	QL(8 ML per 28 days); PA	HUMIRA PEN-CD/UC/HS STARTER INJECTION 80MG/0.8ML	5	QL(3 EA per 180 days); PA
ENBREL INJECTION 25MG/0.5ML	5	QL(8 ML per 28 days); PA	HUMIRA PEN-PEDIATRIC UC STARTER PACK INJECTION 80MG/0.8ML	5	QL(4 EA per 180 days); PA
ENBREL INJECTION 25MG	5	PA	HUMIRA PEN-PS/UV STARTER INJECTION 0	5	QL(3 EA per 180 days); PA
ENBREL INJECTION 50MG/ML	5	QL(8 ML per 28 days); PA	HUMIRA PEN-PS/UV STARTER INJECTION 40MG/0.8ML	5	QL(4 EA per 180 days); PA
ENVARSUS XR TABLET EXTENDED RELEASE 24 HOUR 0.75MG	4	B/D	HUMIRA PEN INJECTION 40MG/0.4ML	5	QL(4 EA per 28 days); PA
ENVARSUS XR TABLET EXTENDED RELEASE 24 HOUR 1MG	4	B/D			

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HUMIRA PEN INJECTION 40MG/0.8ML	5	QL(4 EA per 28 days); PA	<i>mycophenolic acid dr tablet delayed release 360mg</i>	4	B/D
HUMIRA PEN INJECTION 80MG/0.8ML	5	QL(2 EA per 28 days); PA	ORENCIA INJECTION 250MG	5	PA NSO
HUMIRA INJECTION 10MG/0.1ML	5	QL(2 EA per 28 days); PA	PROGRAF PACKET 0.2MG	4	B/D
HUMIRA INJECTION 20MG/0.2ML	5	QL(2 EA per 28 days); PA	PROGRAF PACKET 1MG	4	B/D
HUMIRA INJECTION 40MG/0.4ML	5	QL(4 EA per 28 days); PA	REZUROCK TABLET 200MG	5	QL(60 EA per 30 days); PA
HUMIRA INJECTION 40MG/0.8ML	5	QL(4 EA per 28 days); PA	SANDIMMUNE SOLUTION 100MG/ML	4	B/D
JYLAMVO SOLUTION 2MG/ML	4		<i>sirolimus solution 1mg/ml</i>	4	B/D
<i>leflunomide tablet 10mg</i>	3	QL(30 EA per 30 days)	<i>sirolimus tablet 0.5mg</i>	4	B/D
<i>leflunomide tablet 20mg</i>	3	QL(30 EA per 30 days)	<i>sirolimus tablet 1mg</i>	4	B/D
<i>methotrexate sodium injection 1gm/40ml</i>	2		<i>sirolimus tablet 2mg</i>	4	B/D
<i>methotrexate sodium injection 250mg/10ml</i>	2		<i>tacrolimus capsule 0.5mg</i>	4	B/D
<i>methotrexate sodium injection 250mg/10ml</i>	2		<i>tacrolimus capsule 1mg</i>	4	B/D
<i>methotrexate sodium injection 50mg/2ml</i>	2		<i>tacrolimus capsule 5mg</i>	4	B/D
<i>methotrexate sodium tablet 2.5mg</i>	2		XATMEP SOLUTION 2.5MG/ML	4	
<i>methotrexate injection 50mg/2ml</i>	2		YUFLYMA 1-PEN KIT INJECTION 40MG/0.4ML	5	QL(6 EA per 28 days); PA
<i>mycophenolate mofetil capsule 250mg</i>	3	B/D	YUFLYMA 2-PEN KIT INJECTION 40MG/0.4ML	5	QL(6 EA per 28 days); PA
<i>mycophenolate mofetil suspension reconstituted 200mg/ml</i>	4	B/D	YUFLYMA 2-SYRINGE KIT INJECTION 40MG/0.4ML	5	QL(6 EA per 28 days); PA
<i>mycophenolate mofetil tablet 500mg</i>	4	B/D	YUFLYMA CD/UC/HS STARTER INJECTION 80MG/0.8ML	5	QL(3 EA per 28 days); PA
<i>mycophenolic acid dr tablet delayed release 180mg</i>	4	B/D	YUFLYMA INJECTION 80MG/0.8ML	5	QL(3 EA per 28 days); PA
Vaccines					
ABRYSVO INJECTION 120MCG/0.5ML					
ACTHIB INJECTION 0					
ADACEL INJECTION 2LF/0.5ML; 15.5MCG/0.5ML; 5LF/0.5ML					

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Drug Name	Drug Tier	Requirements/ Limits	Drug Name	Drug Tier	Requirements/ Limits
ADACEL INJECTION 2LF/0.5ML; 15.5MCG/0.5ML; 5LF/0.5ML	3		HIBERIX INJECTION 10MCG	3	
AREXVY INJECTION 120MCG/0.5ML	3		IMOVOX RABIES (H.D.C.V.) INJECTION 2.5UNIT/ML	3	B/D
BCG VACCINE INJECTION 50MG	3		INFANRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 10LFU/0.5ML	3	
BEXSERO INJECTION 0	3		IPOL INACTIVATED IPV INJECTION 0	3	
BOOSTRIX INJECTION 2.5LF/0.5ML; 18.5MCG/0.5ML; 5LF/0.5ML	3		IXCHIQ INJECTION 0	3	
BOOSTRIX INJECTION 2.5LF/0.5ML; 18.5MCG/0.5ML; 5LF/0.5ML	3		IXIARO INJECTION 0	3	
DAPTACEL INJECTION 15LF/0.5ML; 23MCG/0.5ML; 5LF/0.5ML	3		JYNNEOS INJECTION 0.5ML	3	
DENGVAXIA INJECTION 0	3		KINRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	3	
<i>diphtheria/tetanus toxoids adsorbed pediatric injection 25lfu/0.5ml; 5lfu/0.5ml</i>	3		KINRIX INJECTION 25LFU/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	3	
ENGERIX-B INJECTION 10MCG/0.5ML	3	B/D	M-M-R II INJECTION 0; 0; 0	3	
ENGERIX-B INJECTION 20MCG/ML	3	B/D	MENACTRA INJECTION 0	3	
ENGERIX-B INJECTION 20MCG/ML	3	B/D	<i>menquadfi injection 0</i>	3	
GARDASIL 9 INJECTION 0	3		MENVEO INJECTION 0	3	
GARDASIL 9 INJECTION 0	3		MENVEO INJECTION 0	3	
HAVRIX INJECTION 1440ELU/ML	3		PEDIARIX INJECTION 25LFU/0.5ML; 10MCG/0.5ML; 58MCG/0.5ML; 0; 10LFU/0.5ML	3	
HAVRIX INJECTION 720ELU/0.5ML	3		PEDVAX HIB INJECTION 7.5MCG/0.5ML	3	
HEPLISAV-B INJECTION 20MCG/0.5ML	3	B/D	PENBRAYA INJECTION 0; 0	3	
			PENTACEL INJECTION 15LFU/0.5ML; 0; 48MCG/0.5ML; 0; 5LFU/0.5ML	3	

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PREHEVBRI INJECTION 10MCG/ML	3	B/D	TDVAX INJECTION 2LF/0.5ML; 2LF/0.5ML	3	
PRIORIX INJECTION 0; 0; 0	3		TENIVAC INJECTION 2LFU; 5LFU	3	
PROQUAD INJECTION 0; 0; 0; 0	3		TENIVAC INJECTION 2LFU; 5LFU	3	
QUADRACEL INJECTION 15LFU/0.5ML; 48MCG/0.5ML; 0; 5LFU/0.5ML	3		TETANUS/DIPHTHERI A TOXOIDS- ADSORBED ADULT INJECTION 2LF/0.5ML; 2LF/0.5ML	3	
QUADRACEL INJECTION 15LFU/0.5ML; 48MCG/0.5ML; 0; 5LFU/0.5ML	3		TICOVAC INJECTION 1.2MCG/0.25ML	3	
QUADRACEL INJECTION 15LFU/0.5ML; 48MCG/0.5ML; 0; 5LFU/0.5ML	3		TICOVAC INJECTION 2.4MCG/0.5ML	3	
RABAVERT INJECTION 0	3	B/D	TRUMENBA INJECTION 0	3	
RECOMBIVAX HB INJECTION 10MCG/ML	3	B/D	TWINRIX INJECTION 720ELU/ML; 20MCG/ML	3	
RECOMBIVAX HB INJECTION 10MCG/ML	3	B/D	TYPHIM VI INJECTION 25MCG/0.5ML	3	
RECOMBIVAX HB INJECTION 40MCG/ML	3	B/D	TYPHIM VI INJECTION 25MCG/0.5ML	3	
RECOMBIVAX HB INJECTION 5MCG/0.5ML	3	B/D	VAQTA INJECTION 25UNIT/0.5ML	3	
RECOMBIVAX HB INJECTION 5MCG/0.5ML	3	B/D	VAQTA INJECTION 25UNIT/0.5ML	3	
ROTARIX SUSPENSION RECONSTITUTED 0	3		VAQTA INJECTION 50UNIT/ML	3	
ROTARIX SUSPENSION 0	3		VAQTA INJECTION 50UNIT/ML	3	
ROTATEQ SOLUTION 0	3		VARIVAX INJECTION 1350PFU/0.5ML	3	
SHINGRIX INJECTION 50MCG/0.5ML	3		VAXELIS INJECTION 0; 0; 0; 0; 0; 0	3	
STAMARIL INJECTION 0	3		VAXELIS INJECTION 0; 0; 0; 0; 0; 0	3	
Inflammatory Bowel Disease Agents					
Aminosalicylates					
<i>balsalazide disodium capsule 750mg</i>			4		

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mesalamine dr tablet delayed release 1.2gm	4		CINACALCET HYDROCHLORIDE TABLET 30MG	4	QL(60 EA per 30 days)
mesalamine er capsule extended release 24 hour 0.375gm	4	QL(120 EA per 30 days)	<i>cinacalcet hydrochloride tablet 60mg</i>	4	QL(60 EA per 30 days)
mesalamine enema 4gm	4		<i>cinacalcet hydrochloride tablet 90mg</i>	4	QL(120 EA per 30 days)
mesalamine kit 4gm	4		FORTEO INJECTION 600MCG/2.4ML	5	PA
mesalamine suppository 1000mg	4		<i>ibandronate sodium tablet 150mg</i>	2	QL(1 EA per 28 days)
SFROWASA ENEMA 4GM/60ML	4		<i>paricalcitol capsule 1mcg</i>	4	
sulfasalazine tablet delayed release 500mg	2		<i>paricalcitol capsule 2mcg</i>	4	
sulfasalazine tablet 500mg	2		<i>paricalcitol capsule 4mcg</i>	4	
Glucocorticoids			PROLIA INJECTION 60MG/ML	4	QL(2 ML per 365 days)
budesonide er tablet extended release 24 hour 9mg	4		<i>teriparatide injection 600mcg/2.4ml</i>	5	PA
budesonide capsule delayed release particles 3mg	4		TERIPARATIDE INJECTION 620MCG/2.48ML	5	QL(2.48 ML per 28 days); PA
hydrocortisone enema 100mg/60ml	4		TYMLOS INJECTION 3120MCG/1.56ML	5	PA
procto-med hc cream 2.5%	2		XGEVA INJECTION 120MG/1.7ML	5	QL(1.7 ML per 28 days); PA
proctosol hc cream 2.5%	2		Miscellaneous Therapeutic Agents		
proctozone-hc cream 2.5%	2		Miscellaneous Therapeutic Agents		
Metabolic Bone Disease Agents			ALCOHOL PREP PADS PAD 70%	3	
Metabolic Bone Disease Agents			AUGTYRO CAPSULE 40MG	5	PA NSO
alendronate sodium solution 70mg/75ml	4		B-D INSULIN SYRINGE ULTRAFINE II/0.3ML/31G X 5/16" MISCELLANEOUS	3	QL(200 EA per 30 days)
alendronate sodium tablet 10mg	2	QL(30 EA per 30 days)	BD INSULIN SYRINGE SAFETYGLIDE/1ML/29 G X 1/2" MISCELLANEOUS	3	QL(200 EA per 30 days)
alendronate sodium tablet 35mg	2	QL(4 EA per 28 days)	BD INSULIN SYRINGE ULTRA-FINE/0.5ML/30G X 12.7MM MISCELLANEOUS	3	QL(200 EA per 30 days)
alendronate sodium tablet 5mg	2				
alendronate sodium tablet 70mg	2	QL(4 EA per 28 days)			
calcitonin-salmon solution 200unit/act	3	QL(3.7 ML per 30 days)			
calcitriol capsule 0.25mcg	2				
calcitriol capsule 0.5mcg	2				

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BD INSULIN SYRINGE ULTRA-FINE/1ML/31G X 8MM MISCELLANEOUS	3	QL(200 EA per 30 days)	OMNIPOD DASH PDM KIT (GEN 4) KIT	3	QL(1 EA per 365 days)
BD INSULIN SYRINGE/1ML/29G X 12.7MM MISCELLANEOUS	3	QL(200 EA per 30 days)	OMNIPOD DASH PODS (GEN 4) MISCELLANEOUS	3	QL(30 EA per 30 days)
BD PEN NEEDLE/ORIGINAL/UL TRA-FINE/29G X 12.7MM MISCELLANEOUS	3	QL(200 EA per 30 days)	OMNIPOD GO 10 UNITS/DAY KIT	3	QL(10 EA per 30 days)
BD VEO INSULIN SYRINGE ULTRA-FINE/0.3ML/31G X 6MM MISCELLANEOUS	3	QL(200 EA per 30 days)	OMNIPOD GO 15 UNITS/DAY KIT	3	QL(10 EA per 30 days)
CURITY GAUZE PADS 2"X2" 12 PLY PAD	3		OMNIPOD GO 20 UNITS/DAY KIT	3	QL(10 EA per 30 days)
ELLA TABLET 30MG	3		OMNIPOD GO 25 UNITS/DAY KIT	3	QL(10 EA per 30 days)
IGALMI FILM 120MCG	4	PA NSO	OMNIPOD GO 30 UNITS/DAY KIT	3	QL(10 EA per 30 days)
IGALMI FILM 180MCG	4	PA NSO	OMNIPOD GO 35 UNITS/DAY KIT	3	QL(10 EA per 30 days)
LAGEVRIA CAPSULE 200MG	4	QL(40 EA per 5 days)	OMNIPOD GO 40 UNITS/DAY KIT	3	QL(10 EA per 30 days)
<i>nutrilipid injection 20gm/100ml</i>	4	B/D	PAXLOVID TABLET THERAPY PACK 150MG; 100MG	3	QL(20 EA per 5 days)
OMNIPOD 5 G6 INTRO KIT (GEN 5) KIT	3	QL(1 EA per 365 days)	PAXLOVID TABLET THERAPY PACK 150MG; 100MG	3	QL(30 EA per 5 days)
OMNIPOD 5 G6 PODS (GEN 5) MISCELLANEOUS	3	QL(30 EA per 30 days)	SKYCLARYS CAPSULE 50MG	5	QL(90 EA per 30 days); PA
OMNIPOD 5 G7 INTRO KIT (GEN 5) KIT	3	QL(1 EA per 365 days)	<i>sodium chloride 0.9% solution 0.9%</i>	2	
OMNIPOD 5 G7 PODS (GEN 5) MISCELLANEOUS	3	QL(30 EA per 30 days)	V-GO 20 KIT	3	
OMNIPOD CLASSIC PDM STARTER KIT (GEN 3) KIT	3	QL(1 EA per 365 days)	V-GO 30 KIT	3	
OMNIPOD CLASSIC PODS (GEN 3) MISCELLANEOUS	3	QL(30 EA per 30 days)	V-GO 40 KIT	3	
OMNIPOD DASH INTRO KIT (GEN 4) KIT	3	QL(1 EA per 365 days)	VISTOGARD PACKET 10GM	5	
Ophthalmic Agents					
Ophthalmic Agents, Other					
<i>atropine sulfate solution 1%</i>					
<i>bacitracin/polymyxin b ointment 500unit/gm; 10000unit/gm</i>					

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<i>brimonidine tartrate/timolol maleate solution 0.2%; 0.5%</i>	4		RESTASIS MULTIDOSE EMULSION 0.05%	3		
COMBIGAN SOLUTION 0.2%; 0.5%	4		RESTASIS EMULSION 0.05%	3		
<i>cyclosporine emulsion 0.05%</i>	3		ROCKLATAN SOLUTION 0.005%; 0.02%	4	QL(2.5 ML per 25 days)	
CYSTARAN SOLUTION 0.44%	5	QL(60 ML per 28 days)	SIMBRINZA SUSPENSION 0.2%; 1%	3		
<i>dorzolamide hcl/timolol maleate solution 22.3mg/ml; 6.8mg/ml</i>	3		<i>sulfacetamide sodium/prednisolone sodium phosphate solution 0.23%; 10%</i>	2		
<i>neo-polycin hc ointment 400unit/gm; 1%; 3.5mg/gm; 10000unit/gm</i>	3		TOBRADEX ST SUSPENSION 0.05%; 0.3%	4		
<i>neo-polycin ointment 400unit/gm; 3.5mg/gm; 10000unit/gm</i>	3		TOBRADEX OINTMENT 0.1%; 0.3%	4		
<i>neomycin/bacitracin/poly myxin ointment 400unit/gm; 5mg/gm; 10000unit/gm</i>	3		<i>tobramycin/dexamethasone suspension 0.1%; 0.3%</i>	4		
<i>neomycin/polymyxin/bacitracin/hydrocortisone ointment 400unit/gm; 1%; 0.5%; 10000unit/gm</i>	3		XIIDRA SOLUTION 5%	4	QL(60 EA per 30 days)	
<i>neomycin/polymyxin/dexamethasone ointment 0.1%; 3.5mg/gm; 10000unit/gm</i>	2		ZYLET SUSPENSION 0.5%; 0.3%	4		
<i>neomycin/polymyxin/dexamethasone suspension 0.1%; 3.5mg/ml; 10000unit/ml</i>	2		<i>Ophthalmic Anti-allergy Agents</i>			
<i>neomycin/polymyxin/gramicidin solution 0.025mg/ml; 1.75mg/ml; 10000unit/ml</i>	3		<i>azelastine hcl solution 0.05%</i>	3		
<i>polycin ointment 500unit/gm; 10000unit/gm</i>	3		<i>cromolyn sodium solution 4%</i>	2		
<i>polymyxin b sulfate(trimethoprim sulfate) solution 10000unit/ml; 0.1%</i>	2		<i>olopatadine hcl solution 0.1%</i>	3		
			<i>olopatadine hydrochloride solution 0.2%</i>	3		
			<i>Ophthalmic Anti-Infectives</i>			
			<i>bacitracin ointment 500unit/gm</i>	4		
			<i>BESIVANCE SUSPENSION 0.6%</i>	4		
			<i>ciprofloxacin hydrochloride solution 0.3%</i>	2		
			<i>erythromycin ointment 5mg/gm</i>	2		
			<i>gatifloxacin solution 0.5%</i>	4		

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gentak ointment 0.3%	3	
gentamicin sulfate solution 0.3%	2	QL(70 ML per 30 days)
levofloxacin solution 0.5%	3	
moxifloxacin hydrochloride solution 0.5%	3	
NATACYN SUSPENSION 5%	4	
ofloxacin solution 0.3%	2	
sulfacetamide sodium ointment 10%	3	
sulfacetamide sodium solution 10%	3	
tobramycin solution 0.3%	2	
trifluridine solution 1%	4	
ZIRGAN GEL 0.15%	4	
Ophthalmic Anti-inflammatories		
dexamethasone sodium phosphate solution 0.1%	3	
diclofenac sodium solution 0.1%	3	
FLAREX SUSPENSION 0.1%	4	
fluorometholone suspension 0.1%	4	
flurbiprofen sodium solution 0.03%	2	
ketorolac tromethamine solution 0.4%	3	
ketorolac tromethamine solution 0.5%	2	
LOTEMAX SM GEL 0.38%	4	QL(20 GM per 365 days)
prednisolone acetate suspension 1%	3	
PROLENSA SOLUTION 0.07%	4	QL(12 ML per 365 days)
Ophthalmic Beta-Adrenergic Blocking Agents		
betaxolol hcl solution 0.5%	3	
carteolol hcl solution 1%	2	
levobunolol hcl solution 0.5%	2	

Drug Name	Drug Tier	Requirements/Limits
timolol maleate solution 0.25%	2	
timolol maleate solution 0.5%	2	
Ophthalmic Intraocular Pressure Lowering Agents, Other		
acetazolamide er capsule extended release 12 hour 500mg	4	
ALPHAGAN P SOLUTION 0.1%	3	
brimonidine tartrate solution 0.1%	3	
brimonidine tartrate solution 0.2%	2	
brinzolamide suspension 1%	4	
dorzolamide hydrochloride solution 2%	3	
pilocarpine hcl solution 1%	3	
pilocarpine hcl solution 2%	3	
pilocarpine hcl solution 4%	3	
RHOPRESSA SOLUTION 0.02%	4	QL(2.5 ML per 25 days)
Ophthalmic Prostaglandin and Prostamide Analogs		
latanoprost solution 0.005%	1	
LUMIGAN SOLUTION 0.01%	3	QL(2.5 ML per 25 days)
VYZULTA SOLUTION 0.024%	4	QL(5 ML per 25 days)
Otic Agents		
Otic Agents		
acetic acid solution 2%	2	
ciprofloxacin/dexamethasone suspension 0.3%; 0.1%	4	
ciprofloxacin solution 0.2%	4	

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neomycin/polymyxin/hc solution 1%; 3.5mg/ml; 10000unit/ml	4		ASMANEX TWISTHALER 30 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 110MCG/INH	4	QL(1 EA per 30 days)
neomycin/polymyxin/hydrocortisone suspension 1%; 3.5mg/ml; 10000unit/ml	4		ASMANEX TWISTHALER 30 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	4	QL(1 EA per 30 days)
ofloxacin solution 0.3%	3		ASMANEX TWISTHALER 60 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	4	QL(1 EA per 30 days)
Respiratory Tract/Pulmonary Agents					
Anti-inflammatories, Inhaled Corticosteroids					
ARNUITY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT	3	QL(30 EA per 30 days)	ASMANEX TWISTHALER 7 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 110MCG/INH	4	QL(1 EA per 30 days)
ARNUITY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 200MCG/ACT	3	QL(30 EA per 30 days)	BREZTRI AEROSPHERE AEROSOL	4	QL(23.6 GM per 28 days)
ARNUITY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 50MCG/ACT	3	QL(30 EA per 30 days)	160MCG/ACT; 4.8MCG/ACT; 9MCG/ACT		
ASMANEX HFA AEROSOL 100MCG/ACT	4	QL(13 GM per 30 days)	budesonide suspension 0.25mg/2ml	4	QL(120 ML per 30 days); B/D
ASMANEX HFA AEROSOL 200MCG/ACT	4	QL(13 GM per 30 days)	budesonide suspension 0.5mg/2ml	4	QL(120 ML per 30 days); B/D
ASMANEX HFA AEROSOL 50MCG/ACT	4	QL(13 GM per 30 days)	budesonide suspension 1mg/2ml	4	QL(120 ML per 30 days); B/D
ASMANEX TWISTHALER 120 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	4	QL(1 EA per 30 days)	fluticasone propionate suspension 50mcg/act	2	
ASMANEX TWISTHALER 14 METERED DOSES AEROSOL POWDER BREATH ACTIVATED 220MCG/INH	4	QL(1 EA per 30 days)	mometasone furoate suspension 50mcg/act	4	QL(34 GM per 30 days)
Antihistamines					
azelastine hcl solution 0.15%				3	QL(60 ML per 30 days)

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<i>azelastine hydrochloride/fluticasone propionate suspension 137mcg/act; 50mcg/act</i>	4	QL(23 GM per 30 days)	<i>ipratropium bromide solution 0.06%</i>	3	
<i>azelastine hydrochloride solution 0.1%</i>	2	QL(60 ML per 30 days)	SPIRIVA HANDIHALER CAPSULE 18MCG	3	QL(30 EA per 30 days)
<i>cyproheptadine hydrochloride tablet 4mg</i>	4		SPIRIVA RESPIMAT AEROSOL SOLUTION 1.25MCG/ACT	3	QL(8 GM per 30 days)
<i>diphenhydramine hcl injection 50mg/ml</i>	4		SPIRIVA RESPIMAT AEROSOL SOLUTION 2.5MCG/ACT	3	QL(4 GM per 30 days)
<i>diphenhydramine hydrochloride injection 50mg/ml</i>	4		TIOTROPIUM BROMIDE CAPSULE 18MCG	3	QL(30 EA per 30 days)
<i>hydroxyzine hcl tablet 50mg</i>	4		Bronchodilators, Sympathomimetic		
<i>hydroxyzine hydrochloride syrup 10mg/5ml</i>	4		<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	2	QL(48 GM per 30 days)
<i>hydroxyzine hydrochloride tablet 10mg</i>	4		<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	2	QL(17 GM per 30 days)
<i>hydroxyzine hydrochloride tablet 25mg</i>	4		<i>albuterol sulfate hfa aerosol solution 108mcg/act</i>	2	QL(13.4 GM per 30 days)
<i>levocetirizine dihydrochloride tablet 5mg</i>	2	QL(30 EA per 30 days)	<i>albuterol sulfate nebulization solution 0.083%</i>	2	QL(525 ML per 30 days); B/D
Antileukotrienes			<i>albuterol sulfate nebulization solution 2.5mg/0.5ml</i>	2	QL(100 EA per 30 days); B/D
<i>montelukast sodium tablet chewable 4mg</i>	2	QL(30 EA per 30 days)	<i>arformoterol tartrate nebulization solution 15mcg/2ml</i>	4	QL(120 ML per 30 days); PA
<i>montelukast sodium tablet chewable 5mg</i>	2	QL(30 EA per 30 days)	<i>epinephrine injection 0.15mg/0.15ml</i>	3	QL(2 EA per 30 days)
<i>montelukast sodium tablet 10mg</i>	1		<i>epinephrine injection 0.15mg/0.3ml</i>	3	QL(2 EA per 30 days)
<i>zafirlukast tablet 10mg</i>	4	QL(60 EA per 30 days)	<i>epinephrine injection 0.3mg/0.3ml</i>	3	QL(2 EA per 30 days)
<i>zafirlukast tablet 20mg</i>	4	QL(60 EA per 30 days)			
Bronchodilators, Anticholinergic					
<i>ATROVENT HFA AEROSOL SOLUTION 17MCG/ACT</i>	4	QL(25.8 GM per 30 days)			
<i>ipratropium bromide solution 0.02%</i>	3	QL(312.5 ML per 30 days); B/D			
<i>ipratropium bromide solution 0.03%</i>	3				

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<i>epinephrine injection 0.3mg/0.3ml</i>	3	QL(2 EA per 30 days); Applies to product manufactured by Mylan Specialty L.P. Only	<i>tobramycin nebulization solution 300mg/5ml</i>	5	QL(280 ML per 28 days); B/D
<i>levalbuterol tartrate hfa aerosol 45mcg/act</i>	4	QL(30 GM per 30 days)	Mast Cell Stabilizers		
PROAIR RESPICLICK AEROSOL POWDER BREATH ACTIVATED 108MCG/ACT	3	QL(2 EA per 30 days)	<i>cromolyn sodium nebulization solution 20mg/2ml</i>	5	B/D
SEREVENT DISKUS AEROSOL POWDER BREATH ACTIVATED 50MCG/DOSE	3	QL(60 EA per 30 days)	Phosphodiesterase Inhibitors, Airways Disease		
VENTOLIN HFA AEROSOL SOLUTION 108MCG/ACT	3	QL(36 GM per 30 days)	<i>roflumilast tablet 250mcg</i>	4	PA
Cystic Fibrosis Agents			<i>roflumilast tablet 500mcg</i>	4	PA
CAYSTON SOLUTION RECONSTITUTED 75MG	5	QL(84 ML per 28 days); PA	<i>theophylline er tablet extended release 12 hour 300mg</i>	4	
KALYDECO PACKET 13.4MG	5		<i>theophylline er tablet extended release 12 hour 450mg</i>	4	
KALYDECO PACKET 25MG	5		<i>theophylline er tablet extended release 24 hour 400mg</i>	3	
KALYDECO PACKET 5.8MG	5		<i>theophylline er tablet extended release 24 hour 600mg</i>	3	
KALYDECO PACKET 50MG	5		Pulmonary Antihypertensives		
KALYDECO PACKET 75MG	5		ADEMPAS TABLET 0.5MG	5	QL(90 EA per 30 days); PA
KALYDECO TABLET 150MG	5		ADEMPAS TABLET 1.5MG	5	QL(90 EA per 30 days); PA
ORKAMBI TABLET 125MG; 100MG	5	QL(112 EA per 28 days); PA	ADEMPAS TABLET 1MG	5	QL(90 EA per 30 days); PA
ORKAMBI TABLET 125MG; 200MG	5	QL(112 EA per 28 days); PA	ADEMPAS TABLET 2.5MG	5	QL(90 EA per 30 days); PA
PULMOZYME SOLUTION 2.5MG/2.5ML	5	PA	ADEMPAS TABLET 2MG	5	QL(90 EA per 30 days); PA
			<i>alyq tablet 20mg</i>	4	QL(60 EA per 30 days); PA
			<i>bosentan tablet 125mg</i>	5	QL(60 EA per 30 days)
			<i>bosentan tablet 62.5mg</i>	5	QL(60 EA per 30 days)
			<i>epoprostenol sodium injection 0.5mg</i>	4	PA
			<i>epoprostenol sodium injection 1.5mg</i>	5	PA
			OPSUMIT TABLET 10MG	5	QL(30 EA per 30 days); PA

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Drug Name	Drug Tier	Requirements/Limits	Drug Name	Drug Tier	Requirements/Limits
sildenafil citrate tablet 20mg	3	QL(90 EA per 30 days); PA	ADVAIR HFA AEROSOL 45MCG/ACT; 21MCG/ACT	3	QL(12 GM per 30 days)
tadalafil tablet 20mg	4	QL(60 EA per 30 days); PA	ANORO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 62.5MCG/ACT; 25MCG/ACT	3	QL(60 EA per 30 days)
VENTAVIS SOLUTION 10MCG/ML	5	QL(270 ML per 30 days); PA	BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 25MCG/ACT	3	QL(60 EA per 30 days)
VENTAVIS SOLUTION 20MCG/ML	5	QL(270 ML per 30 days); PA	BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 200MCG/INH; 25MCG/INH	3	QL(60 EA per 30 days)
Pulmonary Fibrosis Agents			BREO ELLIPTA AEROSOL POWDER BREATH ACTIVATED 50MCG/INH; 25MCG/INH	3	QL(60 EA per 30 days)
OFEV CAPSULE 100MG	5	QL(60 EA per 30 days); PA	BRONCHITOL CAPSULE 40MG	5	QL(560 EA per 28 days); PA
OFEV CAPSULE 150MG	5	QL(60 EA per 30 days); PA	COMBIVENT RESPIMAT AEROSOL SOLUTION 100MCG/ACT; 20MCG/ACT	3	QL(8 GM per 30 days)
pirfenidone capsule 267mg	5	PA	DULERA AEROSOL 5MCG/ACT; 100MCG/ACT	4	QL(17.6 GM per 30 days); PA
pirfenidone tablet 267mg	5	PA	DULERA AEROSOL 5MCG/ACT; 200MCG/ACT	4	QL(17.6 GM per 30 days); PA
pirfenidone tablet 534mg	5	PA	DULERA AEROSOL 5MCG/ACT; 50MCG/ACT	4	QL(13 GM per 30 days); PA
pirfenidone tablet 801mg	5	PA	FASENRA PEN INJECTION 30MG/ML	5	PA
Respiratory Tract Agents, Other			FASENRA INJECTION 30MG/ML	5	PA
ADVAIR DISKUS AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 50MCG/ACT	3	QL(60 EA per 30 days)			
ADVAIR DISKUS AEROSOL POWDER BREATH ACTIVATED 250MCG/ACT; 50MCG/ACT	3	QL(60 EA per 30 days)			
ADVAIR DISKUS AEROSOL POWDER BREATH ACTIVATED 500MCG/ACT; 50MCG/ACT	3	QL(60 EA per 30 days)			
ADVAIR HFA AEROSOL 115MCG/ACT; 21MCG/ACT	3	QL(12 GM per 30 days)			
ADVAIR HFA AEROSOL 230MCG/ACT; 21MCG/ACT	3	QL(12 GM per 30 days)			

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<i>ipratropium bromide/albuterol sulfate solution 2.5mg/3ml; 0.5mg/3ml</i>	3	QL(540 ML per 30 days); B/D	<i>eszopiclone tablet 3mg</i>	3	QL(30 EA per 30 days)
STIOLTO RESPIMAT AEROSOL SOLUTION 2.5MCG/ACT; 2.5MCG/ACT	3	QL(24 GM per 30 days)	<i>ramelteon tablet 8mg</i>	4	QL(30 EA per 30 days)
TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 100MCG/ACT; 62.5MCG/ACT; 25MCG/ACT	3	QL(60 EA per 30 days)	<i>temazepam capsule 15mg</i>	2	QL(30 EA per 30 days)
TRELEGY ELLIPTA AEROSOL POWDER BREATH ACTIVATED 200MCG/INH; 62.5MCG/INH; 25MCG/INH	3	QL(60 EA per 30 days)	<i>temazepam capsule 30mg</i>	2	QL(30 EA per 30 days)
Skeletal Muscle Relaxants					
Skeletal Muscle Relaxants					
<i>cyclobenzaprine hydrochloride tablet 10mg</i>	3		<i>zaleplon capsule 10mg</i>	3	QL(60 EA per 30 days)
<i>cyclobenzaprine hydrochloride tablet 5mg</i>	3		<i>zaleplon capsule 5mg</i>	3	QL(30 EA per 30 days)
<i>orphenadrine citrate er tablet extended release 12 hour 100mg</i>	3		<i>zolpidem tartrate tablet 10mg</i>	2	QL(30 EA per 30 days)
Sleep Disorder Agents					
Sleep Promoting Agents					
<i>BELSOMRA TABLET 10MG</i>	3	QL(30 EA per 30 days)	<i>zolpidem tartrate tablet 5mg</i>	2	QL(30 EA per 30 days)
<i>BELSOMRA TABLET 15MG</i>	3	QL(30 EA per 30 days)	Wakefulness Promoting Agents		
<i>BELSOMRA TABLET 20MG</i>	3	QL(30 EA per 30 days)	<i>armodafinil tablet 150mg</i>	3	QL(30 EA per 30 days); PA
<i>BELSOMRA TABLET 5MG</i>	3	QL(30 EA per 30 days)	<i>armodafinil tablet 200mg</i>	3	QL(30 EA per 30 days); PA
<i>eszopiclone tablet 1mg</i>	3	QL(30 EA per 30 days)	<i>armodafinil tablet 250mg</i>	3	QL(30 EA per 30 days); PA
<i>eszopiclone tablet 2mg</i>	3	QL(30 EA per 30 days)	<i>armodafinil tablet 50mg</i>	3	QL(60 EA per 30 days); PA
			<i>modafinil tablet 100mg</i>	3	QL(30 EA per 30 days); PA
			<i>modafinil tablet 200mg</i>	3	QL(30 EA per 30 days); PA
			<i>sodium oxybate solution 500mg/ml</i>	5	QL(540 ML per 30 days); PA

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<i>abacavir</i>	40	<i>ALINIA</i>	32
<i>abacavir sulfate</i>	40	<i>aliskiren</i>	55
<i>abacavir sulfate/lamivudine</i>	40	<i>allopurinol</i>	20
<i>abacavir sulfate/lamivudine/zidovudine</i>	40	<i>alosetron hydrochloride</i>	66
<i>ABELCET</i>	19	<i>ALPHAGAN P</i>	88
<i>ABILITY ASIMTUFII</i>	35	<i>alprazolam</i>	43
<i>ABILITY MAINTENA</i>	35	<i>altavera</i>	72
<i>abiraterone acetate</i>	22	<i>ALUNBRIG</i>	25
<i>ABRYSVO</i>	82	<i>alyacen 1/35</i>	72
<i>acamprosate calcium dr</i>	4	<i>alyacen 7/77</i>	72
<i>acarbose</i>	44	<i>alyq</i>	91
<i>acebutolol hcl</i>	52	<i>amantadine hcl</i>	42
<i>acebutolol hydrochloride</i>	52	<i>amethia</i>	72
<i>acetaminophen/codeine</i>	2	<i>amethyst</i>	72
<i>acetazolamide</i>	55	<i>amiloride hcl</i>	57
<i>acetazolamide er</i>	88	<i>amiloride/hydrochlorothiazide</i>	55
<i>acetic acid</i>	88	<i>AMINOSYN II</i>	64
<i>acetic acid 0.25%</i>	70	<i>amiodarone hydrochloride</i>	51
<i>acitretin</i>	62	<i>amitriptyline hcl</i>	18
<i>ACTHIB</i>	82	<i>amitriptyline hydrochloride</i>	18
<i>ACTIMMUNE</i>	80	<i>amlodipine besylate</i>	53
<i>acyclovir</i>	42	<i>amlodipine besylate/benazepril</i>	55
<i>acyclovir</i>	64	<i>hydrochloride</i>	
<i>acyclovir sodium</i>	42	<i>amlodipine besylate/valsartan</i>	55
<i>ADACEL</i>	82	<i>ammonium lactate</i>	62
<i>adefovir dipivoxil</i>	39	<i>amnesteem</i>	62
<i>ADEMPAS</i>	91	<i>amoxapine</i>	18
<i>ADVAIR DISKUS</i>	92	<i>amoxicillin</i>	7
<i>ADVAIR HFA</i>	92	<i>amoxicillin/clavulanate potassium</i>	7
<i>afirmelle</i>	72	<i>amoxicillin/clavulanate potassium er</i>	7
<i>AIMOVIG</i>	21	<i>amphetamine/dextroamphetamine</i>	59
<i>AKEEGA</i>	23	<i>amphotericin b</i>	19
<i>ala-cort</i>	62	<i>amphotericin b liposome</i>	19
<i>albendazole</i>	32	<i>ampicillin</i>	8
<i>albuterol sulfate</i>	90	<i>ampicillin sodium</i>	7
<i>albuterol sulfate hfa</i>	90	<i>ampicillin/sulbactam</i>	8
<i>alclometasone dipropionate</i>	62	<i>ampicillin-sulbactam</i>	8
<i>ALCOHOL PREP PADS</i>	85	<i>anagrelide hydrochloride</i>	48
<i>ALDURAZYME</i>	68	<i>anastrozole</i>	25
<i>ALECENSA</i>	25	<i>ANORO ELLIPTA</i>	92
<i>alendronate sodium</i>	85	<i>aprepitant</i>	19
<i>alfuzosin hcl er</i>	70	<i>APRETUDE</i>	39
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<i>arformoterol tartrate</i>	90	<i>ayuna</i>	72
<i>ariPIPRAZOLE</i>	35	<i>AYVAKIT</i>	25
<i>ariPIPRAZOLE odt</i>	35	<i>azathioprine</i>	80
ARISTADA	35	<i>azelaic acid</i>	62
ARISTADA INITIO	35	<i>azelastine hcl</i>	87
<i>armodafinil</i>	93	<i>azelastine hcl</i>	89
ARNUTITY ELLIPTA	89	<i>azelastine hydrochloride</i>	90
<i>asenapine maleate sl</i>	35	<i>azelastine hydrochloride/fluticasone</i>	90
<i>ashlyna</i>	72	<i>propionate</i>	
ASMANEX HFA	89	<i>azithromycin</i>	8
ASMANEX TWISTHALER 120	89	<i>aztreonam</i>	5
METERED DOSES		<i>azurette</i>	72
ASMANEX TWISTHALER 14 METERED	89	<i>bacitracin</i>	87
DOSES		<i>bacitracin/polymyxin b</i>	86
ASMANEX TWISTHALER 30 METERED	89	<i>baclofen</i>	39
DOSES		BAFIERTAM	61
ASMANEX TWISTHALER 60 METERED	89	<i>balsalazide disodium</i>	84
DOSES		<i>BALVERSA</i>	26
ASMANEX TWISTHALER 7 METERED	89	<i>balziva</i>	72
DOSES		<i>BAQSIMI ONE PACK</i>	46
<i>aspirin/dipyridamole</i>	49	<i>BAQSIMI TWO PACK</i>	46
ASPIRIN/DIPYRIDAMOLE ER	49	BARACLUDE	39
ASTAGRAF XL	80	BCG VACCINE	83
<i>atazanavir</i>	42	BD INSULIN SYRINGE	85
<i>atazanavir sulfate</i>	42	SAFETYGLIDE/1ML/29G X 1/2"	
<i>atenolol</i>	52	B-D INSULIN SYRINGE ULTRAFINE	85
<i>atenolol/chlorthalidone</i>	55	II/0.3ML/31G X 5/16"	
<i>atomoxetine</i>	60	BD INSULIN SYRINGE ULTRA-	85
<i>atomoxetine hydrochloride</i>	60	FINE/0.5ML/30G X 12.7MM	
<i>atorvastatin calcium</i>	58	BD INSULIN SYRINGE ULTRA-	86
<i>atovaquone</i>	32	FINE/1ML/31G X 8MM	
<i>atovaquone/proguanil hcl</i>	32	BD INSULIN SYRINGE/1ML/29G X	86
<i>atropine sulfate</i>	86	12.7MM	
ATROVENT HFA	90	BD PEN NEEDLE/ORIGINAL/ULTRA-	86
<i>aubra</i>	72	FINE/29G X 12.7MM	
<i>aubra eq</i>	72	BD VEO INSULIN SYRINGE ULTRA-	86
AUGMENTIN	8	FINE/0.3ML/31G X 6MM	
AUGTYRO	85	BELSOMRA	93
<i>aurovela 1.5/30</i>	72	<i>benazepril hcl</i>	51
<i>aurovela 1/20</i>	72	<i>benazepril hydrochloride</i>	51
<i>aurovela fe 1.5/30</i>	72	<i>benazepril</i>	55
<i>aurovela fe 1/20</i>	72	<i>hydrochloride/hydrochlorothiazide</i>	
AUSTEDO	61	BENLYSTA	79
AUVELITY	15	BENZNIDAZOLE	32
<i>aviane</i>	72	<i>benztropine mesylate</i>	32

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BESREMI	23	bupropion hydrochloride er (sr)	4
<i>betaine anhydrous</i>	68	bupropion hydrochloride er (sr)	15
<i>betamethasone dipropionate</i>	62	bupropion hydrochloride er (xl)	15
<i>betamethasone dipropionate augmented</i>	62	<i>buspirone hcl</i>	43
<i>betamethasone valerate</i>	62	<i>buspirone hydrochloride</i>	43
BETASERON	61	BYDUREON BCISE	44
<i>betaxolol hcl</i>	52	CABENUVA	39
<i>betaxolol hcl</i>	88	<i>cabergoline</i>	77
<i>bethanechol chloride</i>	70	CABLIVI	50
<i>bexarotene</i>	32	CABOMETYX	26
BEXSERO	83	<i>calcipotriene</i>	63
<i>bicalutamide</i>	22	<i>calcitonin-salmon</i>	85
BICILLIN L-A	8	<i>calcitriol</i>	85
BIKTARVY	39	<i>calcium acetate</i>	66
<i>bisoprolol fumarate</i>	52	CALQUENCE	26
<i>bisoprolol fumarate/hydrochlorothiazide</i>	56	<i>camila</i>	76
BIVIGAM	78	<i>camrese</i>	72
<i>blisovi fe 1.5/30</i>	72	<i>camrese lo</i>	72
<i>blisovi fe 1/20</i>	72	<i>candesartan cilexetil</i>	50
BOOSTRIX	83	<i>candesartan cilexetil/hydrochlorothiazide</i>	56
<i>bosentan</i>	91	CAPLYTA	35
BOSULIF	26	CAPRELSA	26
BRAFTOVI	26	<i>carbamazepine</i>	14
BREO ELLIPTA	92	<i>carbamazepine er</i>	13
BREZTRI AEROSPHERE	89	<i>carbidopa</i>	34
<i>brielllyn</i>	72	<i>carbidopa/levodopa</i>	33
BRILINTA	49	<i>carbidopa/levodopa er</i>	33
<i>brimonidine tartrate</i>	88	<i>carbidopa/levodopa odt</i>	33
<i>brimonidine tartrate/timolol maleate</i>	87	<i>carglumic acid</i>	64
<i>brinzolamide</i>	88	<i>carteolol hcl</i>	88
BRIVIACT	10	<i>cartia xt</i>	53
<i>bromocriptine mesylate</i>	33	<i>carvedilol</i>	52
BRONCHITOL	92	<i>caspofungin acetate</i>	19
BRUKINSA	26	CAYSTON	91
<i>budesonide</i>	85	<i>cefaclor</i>	6
<i>budesonide</i>	89	<i>cefadroxil</i>	6
<i>budesonide er</i>	85	CEFAZOLIN	6
<i>bumetanide</i>	57	<i>cefazolin sodium</i>	6
<i>buprenorphine</i>	1	<i>cefdinir</i>	6
<i>buprenorphine hcl</i>	4	<i>cefepime</i>	6
<i>buprenorphine hcl/naloxone hcl</i>	4	<i>cefepime hydrochloride</i>	6
<i>buprenorphine hydrochloride/naloxone</i>	4	<i>cefixime</i>	6
<i>hydrochloride</i>		<i>cefotaxime sodium</i>	6
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<i>cefpodoxime proxetil</i>	6	<i>clindamycin hcl</i>	5
<i>cefprozil</i>	6	<i>clindamycin hydrochloride</i>	5
<i>ceftazidime</i>	6	<i>clindamycin palmitate hydrochloride</i>	5
<i>ceftazidime/dextrose</i>	6	<i>clindamycin phosphate</i>	5
<i>ceftriaxone sodium</i>	6	<i>clindamycin phosphate</i>	64
<i>cefuroxime axetil</i>	7	<i>clobazam</i>	12
<i>cefuroxime sodium</i>	7	<i>clobetasol propionate</i>	62
<i>celecoxib</i>	1	<i>clobetasol propionate e</i>	62
<i>cephalexin</i>	7	<i>clomipramine hydrochloride</i>	18
CERDELGA	68	<i>clonazepam</i>	12
<i>chateal</i>	72	<i>clonazepam odt</i>	12
<i>chateal eq</i>	72	<i>clonidine hcl</i>	50
CHEMET	65	<i>clonidine hydrochloride</i>	50
<i>chlorhexidine gluconate</i>	61	<i>clopidogrel</i>	50
<i>chloroquine phosphate</i>	32	<i>clorazepate dipotassium</i>	43
<i>chlorpromazine hcl</i>	34	<i>clotrimazole</i>	20
<i>chlorpromazine hydrochloride</i>	34	<i>clotrimazole/betamethasone dipropionate</i>	63
<i>chlorthalidone</i>	57	CLOVIQUE	65
CHOLBAM	68	<i>clozapine</i>	39
<i>cholestyramine</i>	58	<i>clozapine odt</i>	38
<i>cholestyramine light</i>	58	COARTEM	32
<i>cyclodan</i>	64	COLCHICINE	20
<i>ciclopirox</i>	64	<i>colesevelam hydrochloride</i>	58
<i>ciclopirox nail lacquer</i>	64	<i>colestipol hcl</i>	58
<i>ciclopirox olamine</i>	64	<i>colistimethate sodium</i>	5
<i>cidofovir</i>	39	COLUMVI	23
<i>cilostazol</i>	50	COMBIGAN	87
CIMDUO	41	COMBIVENT RESPIMAT	92
CINACALCET HYDROCHLORIDE	85	COMETRIQ	26
CINRYZE	78	COMPLERA	40
CIPRO	9	<i>compro</i>	19
<i>ciprofloxacin</i>	88	<i>constulose</i>	66
<i>ciprofloxacin hcl</i>	9	COPIKTRA	26
<i>ciprofloxacin hydrochloride</i>	9	CORLANOR	56
<i>ciprofloxacin hydrochloride</i>	87	COSENTYX	79
<i>ciprofloxacin i.v.-in d5w</i>	9	COSENTYX SENSOREADY PEN	79
<i>ciprofloxacin/dexamethasone</i>	88	COSENTYX UNOREADY	79
<i>citalopram hydrobromide</i>	16	COTELLIC	26
<i>claravil</i>	62	CREON	68
<i>clarithromycin</i>	9	<i>cromolyn sodium</i>	68
<i>clarithromycin er</i>	9	<i>cromolyn sodium</i>	87
CLENPIQ	67	<i>cromolyn sodium</i>	91
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<i>clindacin etz pledges</i>	5	CURITY GAUZE PADS 2"X2" 12 PLY	86

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<i>cyclafem 1/35</i>	72	<i>dextroamphetamine sulfate</i>	60
<i>cyclafem 7/7/7</i>	72	<i>dextrose 5%</i>	64
<i>cyclobenzaprine hydrochloride</i>	93	<i>dextrose 5%/nacl 0.45%</i>	64
<i>cyclophosphamide</i>	22	<i>dextrose 5%/nacl 0.9%</i>	64
<i>cycloserine</i>	21	DIACOMIT	12
<i>cyclosporine</i>	81	<i>diazepam</i>	43
<i>cyclosporine</i>	87	<i>diazepam intensol</i>	43
<i>cyclosporine modified</i>	80	<i>diazepam rectal gel</i>	12
CYLTEZO	81	<i>diazoxide</i>	46
CYLTEZO STARTER PACKAGE FOR	81	<i>diclofenac potassium</i>	1
CROHNS DISEASE/UC/HS		<i>diclofenac sodium</i>	1
CYLTEZO STARTER PACKAGE FOR	81	<i>diclofenac sodium</i>	63
PSORIASIS		<i>diclofenac sodium</i>	88
<i>cyproheptadine hydrochloride</i>	90	<i>diclofenac sodium dr</i>	1
CYSTAGON	68	<i>diclofenac sodium er</i>	1
CYSTARAN	87	<i>dicloxacillin sodium</i>	8
<i>dalfampridine er</i>	61	<i>dicyclomine hydrochloride</i>	67
<i>danazol</i>	71	DIFICID	9
<i>dantrolene sodium</i>	39	<i>digitek</i>	51
<i>dapsone</i>	21	<i>digox</i>	51
DAPTACEL	83	<i>digoxin</i>	51
<i>daptomycin</i>	5	<i>dihydroergotamine mesylate</i>	20
<i>daptomycin/sodium chloride</i>	5	DILANTIN	14
<i>darunavir</i>	42	<i>diltiazem hcl</i>	54
DARZALEX FASPRO	31	<i>diltiazem hcl cd</i>	53
<i>dasetta 1/35</i>	72	<i>diltiazem hcl er</i>	54
<i>dasetta 7/7/7</i>	72	<i>diltiazem hydrochloride</i>	54
DAURISMO	26	<i>diltiazem hydrochloride er</i>	54
<i>daysee</i>	72	<i>dilt-xr</i>	53
<i>deblitane</i>	76	<i>dimethyl fumarate</i>	61
<i>deferasirox</i>	65	<i>dimethyl fumarate starterpack</i>	61
DELSTRIGO	40	<i>diphenhydramine hcl</i>	90
<i>delyla</i>	72	<i>diphenhydramine hydrochloride</i>	90
<i>demecclocycline hcl</i>	10	<i>diphenoxylate hydrochloride/atropine sulfate</i>	66
<i>demecclocycline hydrochloride</i>	10	<i>diphtheria/tetanus toxoids adsorbed pediatric</i>	83
DENGVAXIA	83	<i>disulfiram</i>	4
DEPO-SUBQ PROVERA 104	76	<i>divalproex sodium</i>	12
DESCOVY	41	<i>divalproex sodium dr</i>	12
<i>desipramine hydrochloride</i>	18	<i>divalproex sodium er</i>	12
<i>desmopressin acetate</i>	71	<i>dofetilide</i>	51
<i>desogestrel/ethinyl estradiol</i>	72	<i>dolishale</i>	72
<i>desonide</i>	63	<i>donepezil hcl</i>	14
<i>desvenlafaxine er</i>	16		
<i>dexamethasone</i>	70		

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<i>donepezil hydrochloride</i>	14	<i>emtricitabine/tenofovir disoproxil fumarate</i>	41
DOPTELET	50	EMTRIVA	41
<i>dorzolamide hcl/timolol maleate</i>	87	<i>enalapril maleate</i>	51
<i>dorzolamide hydrochloride</i>	88	<i>enalapril maleate/hydrochlorothiazide</i>	56
<i>dotti</i>	72	ENBREL	81
DOVATO	39	ENBREL MINI	81
<i>doxazosin mesylate</i>	70	ENBREL SURECLICK	81
<i>doxepin hcl</i>	18	ENDARI	68
<i>doxepin hydrochloride</i>	18	<i>endocet</i>	2
<i>doxy 100</i>	10	ENGERIX-B	83
<i>doxycycline</i>	10	<i>enilloring</i>	73
<i>doxycycline hyclate</i>	10	ENJAYMO	79
<i>doxycycline hyclate</i>	61	<i>enoxaparin sodium</i>	48
<i>doxycycline monohydrate</i>	10	<i>enpresse-28</i>	73
<i>d-penamine</i>	70	<i>entacapone</i>	32
DRIZALMA SPRINKLE	16	<i>entecavir</i>	39
<i>dronabinol</i>	19	ENTRESTO	56
DROXIA	23	<i>enulose</i>	66
<i>droxidopa</i>	50	ENVARSUS XR	81
DULERA	92	EPIDIOLEX	10
<i>duloxetine hydrochloride</i>	16	<i>epinephrine</i>	90
DUPIXENT	79	<i>epitol</i>	14
<i>dutasteride</i>	70	EPKINLY	23
<i>ec-naproxen</i>	1	<i>eplerenone</i>	57
<i>econazole nitrate</i>	20	<i>epoprostenol sodium</i>	91
EDURANT	40	EPRONTIA	10
<i>efavirenz</i>	40	<i>ergoloid mesylates</i>	14
<i>efavirenz/emtricitabine/tenofovir disoproxil fumarate</i>	40	<i>ergotamine tartrate/caffeine</i>	20
<i>efavirenz/lamivudine/tenofovir disoproxil fumarate</i>	40	ERIVEDGE	26
<i>effer-k</i>	64	ERLEADA	22
ELAPRASE	68	<i>erlotinib hydrochloride</i>	26
<i>elinest</i>	73	<i>errin</i>	76
ELIQUIS	48	<i>ertapenem</i>	8
ELIQUIS STARTER PACK	48	<i>ertapenem sodium</i>	8
ELLA	86	<i>ery</i>	64
ELMIRON	70	<i>erythromycin</i>	64
<i>eluryng</i>	73	<i>erythromycin</i>	87
EMCYT	23	<i>erythromycin dr</i>	9
EMGALITY	21	<i>erythromycin/benzoyl peroxide</i>	62
EMPAVELI	79	<i>escitalopram oxalate</i>	17
EMSAM	16	<i>esomeprazole magnesium</i>	67
<i>emtricitabine</i>	41	<i>estarrylla</i>	73
<i>emtricitabine/tenofovir disoproxil</i>	41	<i>estradiol</i>	73
		<i>ESTRING</i>	73
		<i>eszopiclone</i>	93

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<i>ethambutol hydrochloride</i>	21	FLAREX	88
<i>ethosuximide</i>	12	<i>flecainide acetate</i>	51
<i>ethynodiol diacetate/ethinyl estradiol</i>	73	<i>fluconazole</i>	20
<i>etodolac</i>	1	<i>fluconazole in sodium chloride</i>	20
ETONOGESTREL/ETHINYL ESTRADIOL	73	<i>flucytosine</i>	20
<i>etravirine</i>	40	<i>fludrocortisone acetate</i>	70
EUCRISA	63	<i>fluocinolone acetonide</i>	63
<i>euthyrox</i>	76	<i>fluocinonide</i>	63
<i>everolimus</i>	27	<i>fluorometholone</i>	88
<i>everolimus</i>	81	<i>fluorouracil</i>	63
EVOTAZ	42	<i>fluoxetine hydrochloride</i>	17
EVRYSDI	68	<i>fluphenazine decanoate</i>	34
<i>exemestane</i>	25	<i>fluphenazine hcl</i>	34
EXKIVITY	27	<i>fluphenazine hydrochloride</i>	34
<i>ezetimibe</i>	58	<i>flurbiprofen</i>	1
<i>ezetimibe/simvastatin</i>	58	<i>flurbiprofen sodium</i>	88
FABRAZYME	68	<i>flutamide</i>	22
<i>falmina</i>	73	<i>fluticasone propionate</i>	63
<i>famciclovir</i>	43	<i>fluticasone propionate</i>	89
<i>famotidine</i>	67	<i>fluvastatin</i>	58
FANAPT	36	<i>fluvoxamine maleate</i>	17
FANAPT TITRATION PACK	36	<i>fondaparinux sodium</i>	48
FARXIGA	44	FORTEO	85
FARYDAK	27	<i>fosamprenavir calcium</i>	42
FASENRA	92	<i>fosinopril sodium</i>	51
FASENRA PEN	92	<i>fosinopril sodium/hydrochlorothiazide</i>	56
<i>fayosim</i>	73	FOTIVDA	22
<i>febuxostat</i>	20	FRUZAQLA	27
<i>felbamate</i>	10	<i>furosemide</i>	57
<i>felodipine er</i>	53	FUZEON	41
<i>femynor</i>	73	<i>fyavolv</i>	73
<i>fenofibrate</i>	57	FYCOMPA	10
<i>fenofibrate micronized</i>	57	<i>gabapentin</i>	12
<i>fenofibric acid dr</i>	58	<i>galantamine hydrobromide</i>	15
<i>fentanyl</i>	1	<i>galantamine hydrobromide er</i>	15
<i>fentanyl citrate oral transmucosal</i>	2	GAMASTAN	79
FETZIMA	17	<i>ganciclovir</i>	39
FETZIMA TITRATION PACK	17	GARDASIL 9	83
FINACEA	62	<i>gatifloxacin</i>	87
<i>finasteride</i>	70	<i>gavilyte-c</i>	67
<i> fingolimod</i>	61	<i>gavilyte-g</i>	67
FINTEPLA	10	<i>gavilyte-n/flavor pack</i>	67
FIRMAGON	77	GAVRETO	23
FIRVANQ	5	<i>gefitinib</i>	27
		<i>gemfibrozil</i>	58

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generlac	66	HEPLISAV-B	83
gengraf	81	HIBERIX	83
GENOTROPIN	71	HIZENTRA	79
GENOTROPIN MINIQUICK	71	HUMALOG	47
gentak	88	HUMALOG JUNIOR KWIKPEN	47
gentamicin sulfate	4	HUMALOG KWIKPEN	47
gentamicin sulfate	88	HUMALOG MIX 50/50	47
GENVOYA	40	HUMALOG MIX 50/50 KWIKPEN	47
GILOTrif	27	HUMALOG MIX 75/25	47
glatiramer acetate	61	HUMALOG MIX 75/25 KWIKPEN	47
GLEOSTINE	22	HUMIRA	82
glimepiride	44	HUMIRA PEDIATRIC CROHNS	81
glipizide	44	DISEASE STARTER PACK	
glipizide er	44	HUMIRA PEN	81
glipizide xl	44	HUMIRA PEN-CD/UC/HS STARTER	81
glipizide/metformin hydrochloride	44	HUMIRA PEN-PEDIATRIC UC	81
GLUCAGEN HYPOKIT	46	STARTER PACK	
GLUCAGON EMERGENCY KIT	46	HUMIRA PEN-PS/UV STARTER	81
GLUCAGON EMERGENCY KIT FOR	46	HUMULIN 70/30	47
LOW BLOOD SUGAR	46	HUMULIN 70/30 KWIKPEN	47
glyburide	44	HUMULIN N	47
glyburide/metformin hydrochloride	44	HUMULIN N KWIKPEN	47
glycopyrrrolate	67	HUMULIN R	47
GLYXAMBI	44	HUMULIN R U-500 (CONCENTRATED)	47
griseofulvin microsize	20	HUMULIN R U-500 KWIKPEN	47
griseofulvin ultramicrosize	20	hydralazine hcl	59
guanfacine er	60	hydralazine hydrochloride	59
guanfacine hydrochloride	50	hydrochlorothiazide	57
guanfacine hydrochloride	60	hydrocodone bitartrate/acetaminophen	2
guanidine hcl	21	hydrocodone/acetaminophen	3
GVOKE HYPOOPEN 1-PACK	46	hydrocortisone	63
GVOKE HYPOOPEN 2-PACK	47	hydrocortisone	70
GVOKE KIT	47	hydrocortisone	85
GVOKE PFS	47	hydrocortisone valerate	63
hailey 1.5/30	73	hydromorphone hcl	3
hailey fe 1.5/30	73	hydromorphone hydrochloride	3
hailey fe 1/20	73	hydromorphone hydrochloride dosette	3
halobetasol propionate	63	hydroxychloroquine sulfate	32
haloette	73	hydroxyurea	23
haloperidol	34	hydroxyzine hcl	90
haloperidol decanoate	34	hydroxyzine hydrochloride	90
haloperidol lactate	34	hydroxyzine pamoate	43
HAVRIX	83	HYPERHEP B	79
heather	76	ibandronate sodium	85

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IBRANCE	27	<i>isotretinoin</i>	62
<i>ibu</i>	1	ISTURISA	77
<i>ibuprofen</i>	1	<i>itraconazole</i>	20
<i>icatibant acetate</i>	78	<i>ivermectin</i>	32
<i>iclevia</i>	73	IWILFIN	24
ICLUSIG	27	IXCHIQ	83
<i>icosapent ethyl</i>	58	IXIARO	83
IDHIFA	23	<i>jaimiess</i>	74
IGALMI	86	JAKAFI	28
<i>imatinib mesylate</i>	27	<i>jantoven</i>	48
IMBRUVICA	27	JANUMET	44
<i>imipenem/cilastatin</i>	8	JANUMET XR	44
<i>imipramine hcl</i>	18	JANUVIA	44
<i>imipramine hydrochloride</i>	18	JARDIANCE	44
<i>imiquimod</i>	64	JAYPIRCA	28
IMOVAX RABIES (H.D.C.V.)	83	<i>jencycla</i>	76
IMPAVIDO	5	JENTADUETO	45
INBRIJA	34	JENTADUETO XR	45
<i>incassia</i>	76	<i>jinteli</i>	74
INCRELEX	71	<i>jolessa</i>	74
<i>indapamide</i>	57	JUBLIA	20
<i>indomethacin</i>	1	JULUCA	40
<i>indomethacin er</i>	1	<i>junel 1.5/30</i>	74
INFANRIX	83	<i>junel 1/20</i>	74
INLYTA	28	<i>junel fe 1.5/30</i>	74
INQOVI	28	<i>junel fe 1/20</i>	74
INREBIC	24	JYLAMVO	82
INTELENCE	40	JYNNEOS	83
INTRON A	80	KALYDECO	91
<i>introvale</i>	74	KANJINTI	31
INVEGA HAFYERA	36	KANUMA	68
INVEGA SUSTENNA	36	<i>kariva</i>	74
INVEGA TRINZA	36	<i>kelnor 1/35</i>	74
INVIRASE	42	<i>kelnor 1/50</i>	74
IPOL INACTIVATED IPV	83	KERENDIA	56
<i>ipratropium bromide</i>	90	KESIMPTA	61
<i>ipratropium bromide/albuterol sulfate</i>	93	<i>ketoconazole</i>	20
<i>irbesartan</i>	50	<i>ketorolac tromethamine</i>	1
<i>irbesartan/hydrochlorothiazide</i>	56	<i>ketorolac tromethamine</i>	88
ISENTRESS	40	KINERET	79
ISENTRESS HD	40	KINRIX	83
ISONIAZID	21	KISQALI	28
<i>isosorbide dinitrate</i>	59	KISQALI FEMARA 200 DOSE	24
<i>isosorbide mononitrate</i>	59	KISQALI FEMARA 400 DOSE	24

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KISQALI FEMARA 600 DOSE	24	LENVIMA 18 MG DAILY DOSE	28
<i>klayesta</i>	20	LENVIMA 20 MG DAILY DOSE	28
<i>KLISYRI</i>	64	LENVIMA 24 MG DAILY DOSE	28
<i>klor-con</i>	65	LENVIMA 4 MG DAILY DOSE	28
<i>klor-con 10</i>	64	LENVIMA 8 MG DAILY DOSE	28
<i>klor-con 8</i>	64	<i>lessina</i>	74
<i>klor-con m10</i>	64	<i>letrozole</i>	25
<i>klor-con m15</i>	64	LEUCOVORIN CALCIUM	32
<i>klor-con m20</i>	64	LEUKERAN	22
<i>klor-con/ef</i>	65	<i>leuprolide acetate</i>	77
<i>KORLYM</i>	71	<i>levalbuterol tartrate hfa</i>	91
<i>KOSELUGO</i>	28	<i>levetiracetam</i>	11
<i>kourzeq</i>	61	<i>levetiracetam er</i>	11
<i>KRAZATI</i>	24	<i>levobunolol hcl</i>	88
<i>kurvelo</i>	74	<i>levocetirizine dihydrochloride</i>	90
<i>kymobi</i>	33	<i>levofloxacin</i>	9
KYNMOBI TITRATION KIT	33	<i>levofloxacin</i>	88
<i>labetalol hydrochloride</i>	52	<i>levofloxacin in d5w</i>	9
<i>lacosamide</i>	14	<i>levonest</i>	74
<i>lactulose</i>	66	<i>levonorgestrel and ethinyl estradiol</i>	74
<i>LAGEVRIO</i>	86	<i>levonorgestrel/ethinyl estradiol</i>	74
<i>lamivudine</i>	39	<i>levora 0.15/30-28</i>	74
<i>lamivudine</i>	41	<i>levothyroxine sodium</i>	77
<i>lamivudine/zidovudine</i>	41	<i>LEVOXYL</i>	77
<i>lamotrigine</i>	11	<i>LEXIVA</i>	42
<i>lamotrigine starter kit/blue</i>	11	<i>lidocaine</i>	3
<i>lamotrigine starter kit/green</i>	11	<i>lidocaine hydrochloride viscous</i>	61
<i>lamotrigine starter kit/orange</i>	11	<i>lidocaine viscous</i>	62
<i>lamotrigine titration</i>	11	<i>lidocaine/prilocaine</i>	3
<i>lanreotide acetate</i>	77	<i>lillow</i>	74
<i>lansoprazole</i>	67	<i>linezolid</i>	5
<i>LANTUS</i>	47	<i>LINZESS</i>	66
<i>LANTUS SOLOSTAR</i>	47	<i>liothyronine sodium</i>	77
<i>lapatinib ditosylate</i>	28	<i>lisinopril</i>	51
<i>larin 1.5/30</i>	74	<i>lisinopril/hydrochlorothiazide</i>	56
<i>larin 1/20</i>	74	<i>lithium</i>	43
<i>larin fe 1.5/30</i>	74	<i>lithium carbonate</i>	43
<i>larin fe 1/20</i>	74	<i>lithium carbonate er</i>	43
<i>larissia</i>	74	<i>LIVALO</i>	58
<i>latanoprost</i>	88	<i>lojaimiess</i>	74
<i>leflunomide</i>	82	<i>LOKELMA</i>	66
<i>lenalidomide</i>	22	<i>LONSURF</i>	24
LENVIMA 10 MG DAILY DOSE	28	<i>loperamide hcl</i>	66
LENVIMA 12MG DAILY DOSE	28	<i>lopinavir/ritonavir</i>	42
LENVIMA 14 MG DAILY DOSE	28	<i>LOQTORZI</i>	31

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<i>lorazepam intensol</i>	43	MENACTRA	83
LORBRENA	28	MENEST	74
<i>losartan potassium</i>	50	<i>menquadfi</i>	83
<i>losartan potassium/hydrochlorothiazide</i>	56	MENVEO	83
LOTEMAX SM	88	<i>mercaptopurine</i>	23
<i>lovastatin</i>	58	<i>meropenem</i>	8
<i>low-ogestrel</i>	74	<i>mesalamine</i>	85
<i>loxapine</i>	34	<i>mesalamine dr</i>	85
LUBIPROSTONE	66	<i>mesalamine er</i>	85
LUMAKRAS	24	MESNEX	32
LUMIGAN	88	<i>metformin hydrochloride</i>	45
LUMIZYME	68	<i>metformin hydrochloride er</i>	45
LUPRON DEPOT (1-MONTH)	77	<i>methadone hcl</i>	2
LUPRON DEPOT (3-MONTH)	78	<i>methadone hydrochloride</i>	2
LUPRON DEPOT (4-MONTH)	78	<i>methadone hydrochloride intensol</i>	2
LUPRON DEPOT (6-MONTH)	78	<i>methenamine hippurate</i>	5
<i>lurasidone hydrochloride</i>	36	<i>methimazole</i>	78
<i>lutera</i>	74	<i>methotrexate</i>	82
LYBALVI	36	<i>methotrexate sodium</i>	82
<i>lyleq</i>	76	<i>metsuximide</i>	12
<i>lyllana</i>	74	<i>methyldopa</i>	50
LYNPARZA	29	<i>methylphenidate hydrochloride</i>	60
LYSODREN	77	<i>methylprednisolone</i>	70
LYTGOBI	24	<i>methylprednisolone dose pack</i>	70
LYUMJEV	47	<i>metoclopramide hcl</i>	67
LYUMJEV KWIKPEN	47	<i>metoclopramide hydrochloride</i>	67
<i>lyza</i>	76	<i>metolazone</i>	57
<i>magnesium sulfate</i>	65	<i>metoprolol succinate er</i>	52
<i>malathion</i>	64	<i>metoprolol tartrate</i>	52
<i>maprotiline hcl</i>	15	<i>metronidazole</i>	5
<i>maraviroc</i>	41	<i>metronidazole</i>	62
<i>marlissa</i>	74	<i>metronidazole vaginal</i>	5
MARPLAN	16	<i>metyrosine</i>	56
MATULANE	22	<i>mexiletine hcl</i>	51
MAVYRET	39	<i>microgestin 1.5/30</i>	74
<i>meclizine hcl</i>	19	<i>microgestin 1/20</i>	74
<i>medroxyprogesterone acetate</i>	76	<i>microgestin fe 1.5/30</i>	74
<i>mefloquine hcl</i>	32	<i>microgestin fe 1/20</i>	75
<i>megestrol acetate</i>	76	<i>midodrine hcl</i>	50
MEKINIST	29	<i>mifepristone</i>	71
MEKTOVI	29	<i>miglustat</i>	68
<i>meloxicam</i>	1	<i>mili</i>	75
<i>memantine hcl titration pak</i>	15	<i>minocycline hcl</i>	10
<i>memantine hydrochloride</i>	15	<i>minocycline hydrochloride</i>	10

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<i>mirtazapine</i>	16	<i>nefazodone hydrochloride</i>	17
<i>mirtazapine odt</i>	16	<i>neomycin sulfate</i>	4
<i>misoprostol</i>	67	<i>neomycin/bacitracin/polymyxin</i>	87
<i>M-M-R II</i>	83	<i>neomycin/polymyxin/bacitracin/hydrocortisone</i>	87
<i>modafinil</i>	93		
<i>moexipril hcl</i>	51	<i>neomycin/polymyxin/dexamethasone</i>	87
<i>molindone hydrochloride</i>	34	<i>neomycin/polymyxin/gramicidin</i>	87
<i>mometasone furoate</i>	63	<i>neomycin/polymyxin/hc</i>	89
<i>mometasone furoate</i>	89	<i>neomycin/polymyxin/hydrocortisone</i>	89
<i>monodoxine nl</i>	10		
<i>mono-linyah</i>	75	<i>neo-polycin</i>	87
<i>montelukast sodium</i>	90	<i>neo-polycin hc</i>	87
<i>morgidox 1x100mg</i>	10	<i>NERLYNX</i>	29
<i>morgidox 2x100mg</i>	10	<i>NEULASTA</i>	49
<i>morphine sulfate</i>	3	<i>NEULASTA ONPRO KIT</i>	49
<i>morphine sulfate er</i>	2		
<i>MOTEGRITY</i>	66	<i>NEUPRO</i>	33
<i>MOUNJARO</i>	45		
<i>moxifloxacin hydrochloride/sodium hydrochloride</i>	9	<i>nevirapine</i>	40
<i>moxifloxacin hydrochloride</i>	9	<i>nevirapine er</i>	40
<i>moxifloxacin hydrochloride</i>	88	<i>niacin er</i>	59
<i>mupirocin</i>	64	<i>NICOTROL NS</i>	4
<i>mycophenolate mofetil</i>	82	<i>nifedipine er</i>	53
<i>mycophenolic acid dr</i>	82	<i>nilutamide</i>	22
<i>myorisan</i>	62	<i>nimodipine</i>	53
<i>MYRBETRIQ</i>	69	<i>NINLARO</i>	24
<i>NABI-HB</i>	79		
<i>nabumetone</i>	1	<i>nitazoxanide</i>	32
<i>nadolol</i>	53	<i>nitisinone</i>	68
<i>nafcillin sodium</i>	8	<i>NITRO-BID</i>	59
<i>NAGLAZYME</i>	68		
<i>naloxone hcl</i>	4	<i>nitrofurantoin macrocrystals</i>	5
<i>naloxone hydrochloride</i>	4	<i>nitrofurantoin monohydrate</i>	5
<i>naltrexone hcl</i>	4	<i>nitrofurantoin monohydrate/macrocrys</i>	5
<i>NAMZARIC</i>	14	<i>nitroglycerin</i>	59
<i>naproxen</i>	1		
<i>naproxen sodium</i>	1	<i>nitroglycerin transdermal</i>	59
<i>naratriptan hcl</i>	21	<i>nizatidine</i>	67
<i>NATACYN</i>	88		
<i>nateglinide</i>	45	<i>nora-be</i>	76
<i>NAYZILAM</i>	11		
<i>nebivolol</i>	53	<i>norethindrone</i>	76
<i>nebivolol hydrochloride</i>	53	<i>norethindrone acetate</i>	76

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<i>nortriptyline hcl</i>	18	OMNIPOD GO 20 UNITS/DAY	86
<i>nortriptyline hydrochloride</i>	19	OMNIPOD GO 25 UNITS/DAY	86
NORVIR	42	OMNIPOD GO 30 UNITS/DAY	86
NOVOLIN 70/30 FLEXPEN	47	OMNIPOD GO 35 UNITS/DAY	86
NUBEQA	22	OMNIPOD GO 40 UNITS/DAY	86
NUEDEXTA	61	<i>ondansetron hcl</i>	19
NUPLAZID	36	<i>ondansetron hydrochloride</i>	19
NURTEC	21	<i>ondansetron odt</i>	19
<i>nutrilipid</i>	86	ONUREG	24
<i>nyamyc</i>	20	OPDUALAG	25
<i>nylia 1/35</i>	75	OPSUMIT	91
<i>nylia 7/7/7</i>	75	ORENCIA	79
<i>nymyo</i>	75	ORENCIA	82
<i>nystatin</i>	20	ORENCIA CLICKJECT	79
<i>nystatin/triamcinolone</i>	64	ORGOVYX	78
<i>nystop</i>	20	ORKAMBI	91
<i>octreotide acetate</i>	78	<i>orphenadrine citrate er</i>	93
ODEFSEY	41	ORSERDU	24
ODOMZO	29	<i>orsythia</i>	75
OFEV	92	<i>oseltamivir phosphate</i>	42
<i>ofloxacin</i>	88	OSMOLEX ER	33
<i>ofloxacin</i>	89	OSPHENA	76
OGSIVEO	24	OTEZLA	64
OJJAARA	29	OTEZLA	80
<i>olanzapine</i>	37	<i>oxaprozin</i>	1
<i>olanzapine odt</i>	36	OXBRYTA	49
<i>olmesartan medoxomil</i>	50	<i>oxcarbazepine</i>	14
<i>olmesartan medoxomil/hydrochlorothiazide</i>	56	<i>oxybutynin chloride</i>	70
<i>olopatadine hcl</i>	87	<i>oxybutynin chloride er</i>	69
<i>olopatadine hydrochloride</i>	87	<i>oxycodone hydrochloride</i>	3
<i>omega-3-acid ethyl esters</i>	59	<i>oxycodone/acetaminophen</i>	3
<i>omeprazole</i>	67	OZEMPIC	45
<i>omeprazole dr</i>	67	<i>pacerone</i>	52
OMNIPOD 5 G6 INTRO KIT (GEN 5)	86	<i>paliperidone er</i>	37
OMNIPOD 5 G6 PODS (GEN 5)	86	PANRETIN	32
OMNIPOD 5 G7 INTRO KIT (GEN 5)	86	<i>pantoprazole sodium</i>	68
OMNIPOD 5 G7 PODS (GEN 5)	86	<i>paricalcitol</i>	85
OMNIPOD CLASSIC PDM STARTER	86	<i>paramomycin sulfate</i>	4
KIT (GEN 3)		<i>paroxetine hcl</i>	17
OMNIPOD CLASSIC PODS (GEN 3)	86	<i>paroxetine hydrochloride</i>	17
OMNIPOD DASH INTRO KIT (GEN 4)	86	<i>paser</i>	22
OMNIPOD DASH PDM KIT (GEN 4)	86	PAXLOVID	86
OMNIPOD DASH PODS (GEN 4)	86	<i>pazopanib hydrochloride</i>	29
OMNIPOD GO 10 UNITS/DAY	86	PEDIARIX	83
OMNIPOD GO 15 UNITS/DAY	86	PEDVAX HIB	83

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<i>peg-3350/electrolytes</i>	67	<i>portia-28</i>	75
<i>peg-3350/nacl/na bicarbonate/kcl</i>	67	<i>posaconazole</i>	20
PEGASYS	80	<i>posaconazole dr</i>	20
PEMAZYRE	24	<i>potassium chloride</i>	65
PENBRAYA	83	<i>potassium chloride er</i>	65
<i>penicillamine</i>	70	<i>potassium chloride sr</i>	65
<i>penicillin g sodium</i>	8	<i>potassium citrate er</i>	65
<i>penicillin v potassium</i>	8	<i>pramipexole dihydrochloride</i>	33
PENTACEL	83	<i>prasugrel</i>	50
<i>pentamidine isethionate</i>	32	<i>pravastatin sodium</i>	58
<i>pentoxifylline er</i>	56	<i>praziquantel</i>	32
<i>perindopril erbumine</i>	51	<i>prazosin hydrochloride</i>	50
<i>periogard</i>	62	<i>prednisolone</i>	71
<i>permethrin</i>	64	<i>prednisolone acetate</i>	88
<i>perphenazine</i>	35	<i>prednisolone sodium phosphate</i>	71
PERSERIS	37	<i>prednisone</i>	71
<i>phenelzine sulfate</i>	16	<i>pregabalin</i>	61
<i>phenobarbital</i>	13	PREHEVBARIO	84
<i>phenytek</i>	14	PREMARIN	75
<i>phenytoin</i>	14	<i>premium lidocaine</i>	4
<i>phenytoin sodium extended</i>	14	PREMPHASE	75
PHESGO	24	PREMPRO	75
<i>philith</i>	75	<i>prenatal</i>	66
PICATO	64	<i>prevalite</i>	59
PIFELTRO	40	<i>previfem</i>	75
<i>pilocarpine hcl</i>	88	PREVYTMIS	39
<i>pilocarpine hydrochloride</i>	62	PREZCOBIX	42
<i>pimozide</i>	35	PREZISTA	42
<i>pintrea</i>	75	PRIFTIN	22
<i>pioglitazone hcl</i>	45	<i>primaquine phosphate</i>	32
<i>pioglitazone hcl/metformin hcl</i>	45	<i>primidone</i>	13
<i>pioglitazone hydrochloride</i>	45	PRIORIX	84
<i>piperacillin sodium/tazobactam sodium</i>	8	PRIVIGEN	79
PIQRAY 200MG DAILY DOSE	29	PROAIR RESPICLICK	91
PIQRAY 250MG DAILY DOSE	29	<i>probenecid</i>	20
PIQRAY 300MG DAILY DOSE	29	<i>probenecid/colchicine</i>	20
<i>pirfenidone</i>	92	<i>prochlorperazine</i>	19
<i>pirmella 1/35</i>	75	<i>prochlorperazine edisylate</i>	19
<i>pirmella 7/7/7</i>	75	<i>prochlorperazine maleate</i>	19
<i>pitavastatin calcium</i>	58	PROCRT	49
PLENAMINE	65	<i>procto-med hc</i>	85
<i>podofilox</i>	64	<i>proctosol hc</i>	85
<i>polycin</i>	87	<i>protozone-hc</i>	85
<i>polymyxin b sulfate(trimethoprim sulfate</i>	87	PROGRAF	82
POMALYST	22	PROLASTIN-C	68

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PROLENSA	88	RESTASIS MULTIDOSE	87
PROLIA	85	RETACRIT	49
PROMACTA	49	RETEVMO	24
<i>promethazine hcl</i>	19	RETROVIR IV INFUSION	41
<i>promethazine hydrochloride</i>	19	REVCovi	68
<i>promethazine hydrochloride plain</i>	19	REXULTI	37
<i>propafenone hcl</i>	52	REYATAZ	42
<i>propafenone hydrochloride er</i>	52	REZLIDHIA	29
<i>propranolol hcl</i>	21	REZUROCK	82
<i>propranolol hcl er</i>	53	RHOPRESA	88
<i>propranolol hydrochloride</i>	21	ribavirin	39
<i>propranolol hydrochloride er</i>	53	rifabutin	21
<i>propylthiouracil</i>	78	rifampin	22
PROQUAD	84	riluzole	61
<i>protriptyline hcl</i>	19	RINVOQ	80
PULMOZYME	91	RISPERDAL CONSTA	37
PURIXAN	23	risperidone	38
<i>pyrazinamide</i>	22	risperidone er	38
<i>pyridostigmine bromide</i>	21	risperidone odt	38
<i>pyrimethamine</i>	32	ritonavir	42
PYRUKYND	49	rivastigmine tartrate	15
PYRUKYND TAPER PACK	49	rivastigmine transdermal system	15
QINLOCK	23	rivelsa	75
QUADRACEL	84	rizatriptan benzoate	21
<i>quetiapine fumarate</i>	37	rizatriptan benzoate odt	21
<i>quetiapine fumarate er</i>	37	ROCKLATAN	87
<i>quinapril hydrochloride</i>	51	roflumilast	91
<i>quinapril/hydrochlorothiazide</i>	56	ropinirole hcl	33
QUINIDINE SULFATE	52	ropinirole hydrochloride	33
QUININE SULFATE	32	rosadan	62
RABAVERT	84	rosuvastatin calcium	58
<i>rabeprazole sodium</i>	68	ROTARIX	84
<i>raloxifene hydrochloride</i>	76	ROTATEQ	84
<i>ramelteon</i>	93	roweepra	11
<i>ramipril</i>	51	ROZLYTREK	29
<i>ranolazine er</i>	56	RUBRACA	29
<i>rasagiline mesylate</i>	34	rufinamide	14
RECOMBIVAX HB	84	RUKOBIA	41
RECTIV	67	RUXIENCE	32
RELISTOR	66	RYBELSUS	45
<i>repaglinide</i>	45	RYDAPT	29
REPATHA	59	sajazir	78
REPATHA PUSHTRONEX SYSTEM	59	SANDIMMUNE	82
REPATHA SURECLICK	59	SANTYL	64
RESTASIS	87	sapropterin dihydrochloride	68

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SAVELLA	61	<i>sotalol hydrochloride</i>	52
SAVELLA TITRATION PACK	61	<i>sotalol hydrochloride (af)</i>	52
SCEMBLIX	24	SPIRIVA HANDIHALER	90
<i>scopolamine</i>	19	SPIRIVA RESPIMAT	90
SECUADO	38	<i>spironolactone</i>	57
<i>selegiline hcl</i>	34	<i>spironolactone/hydrochlorothiazide</i>	57
<i>selenium sulfide</i>	63	SPRAVATO 56MG DOSE	16
SELZENTRY	41	SPRAVATO 84MG DOSE	16
SEREVENT DISKUS	91	<i>sprintec</i> 28	76
<i>sertraline hcl</i>	17	SPRITAM	11
<i>sertraline hydrochloride</i>	17	SPRYCEL	29
<i>setlakin</i>	75	<i>sps</i>	66
<i>sevelamer carbonate</i>	66	<i>sronyx</i>	76
SFROWASA	85	<i>ssd</i>	64
<i>sharobel</i>	76	STAMARIL	84
SHINGRIX	84	<i>stavudine</i>	41
SIGNIFOR	78	STELARA	80
<i>sildenafil citrate</i>	92	STIOLTO RESPIMAT	93
<i>silodosin</i>	70	STIVARGA	30
<i>silver sulfadiazine</i>	64	STRENSIQ	69
SIMBRINZA	87	<i>streptomycin sulfate</i>	4
<i>simliya</i>	75	STRIBILD	40
<i>simpesse</i>	75	<i>subvenite</i>	11
<i>simvastatin</i>	58	<i>subvenite starter kit/blue</i>	11
<i>sirolimus</i>	82	<i>subvenite starter kit/green</i>	11
SIRTURO	22	<i>subvenite starter kit/orange</i>	11
SKYCLARYS	86	SUCRAID	69
SKYRIZI	80	<i>sucralfate</i>	67
SKYRIZI PEN	80	<i>sulfacetamide sodium</i>	88
<i>sodium chloride</i>	65	<i>sulfacetamide sodium/prednisolone sodium</i>	87
<i>sodium chloride 0.45%</i>	65	<i>phosphate</i>	
<i>sodium chloride 0.9%</i>	86	<i>sulfadiazine</i>	9
<i>sodium oxybate</i>	93	<i>sulfamethoxazole/trimethoprim</i>	9
<i>sodium phenylbutyrate</i>	69	<i>sulfamethoxazole/trimethoprim ds</i>	9
<i>sodium polystyrene sulfonate</i>	66	<i>sulfasalazine</i>	85
SODIUM SULFATE/POTASSIUM SULFATE/MAGNESIUM SULFATE	67	<i>sulindac</i>	1
SOLIQUA 100/33	45	<i>sumatriptan</i>	21
SOLTAMOX	23	<i>sumatriptan succinate</i>	21
SOMATULINE DEPOT	78	<i>sunitinib malate</i>	30
SOMAVERT	78	SUNLENCA	41
<i>sorafenib</i>	29	SUTAB	67
<i>sorafenib tosylate</i>	29	SYMPAZAN	13
<i>sorine</i>	52	SYMTUZA	42
<i>sotalol hcl</i>	52	SYNAGIS	79
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SYNJARDY XR	45	thiothixene	35
SYNROBO	24	tiadylt er	54
TABLOID	23	tiagabine hydrochloride	13
TABRECTA	23	TIBSOVO	30
<i>tacrolimus</i>	63	TICOVAC	84
<i>tacrolimus</i>	82	<i>timolol maleate</i>	88
<i>tadalafil</i>	92	<i>tinidazole</i>	5
TAFINLAR	30	TIOTROPIUM BROMIDE	90
TAGRISSO	30	TIVICAY	40
TALZENNA	30	TIVICAY PD	40
<i>tamoxifen citrate</i>	23	<i>tizanidine hcl</i>	39
<i>tamsulosin hydrochloride</i>	70	<i>tizanidine hydrochloride</i>	39
<i>tarina fe 1/20</i>	76	TOBRADEX	87
<i>tarina fe 1/20 eq</i>	76	TOBRADEX ST	87
TASIGNA	30	<i>tobramycin</i>	88
TAZAROTENE	62	<i>tobramycin</i>	91
<i>tazicef</i>	7	<i>tobramycin sulfate</i>	4
<i>taztia xt</i>	54	<i>tobramycin/dexamethasone</i>	87
TAZVERIK	24	<i>tolterodine tartrate</i>	70
TDVAX	84	<i>tolterodine tartrate er</i>	70
TEFLARO	7	<i>topiramate</i>	11
TEGSEDI	69	<i>toremifene citrate</i>	23
telmisartan	50	<i>torsemide</i>	57
telmisartan/hydrochlorothiazide	57	TOUJEO MAX SOLOSTAR	47
temazepam	93	TOUJEO SOLOSTAR	48
TEMIXYS	41	TRADJENTA	46
TENIVAC	84	<i>tramadol hydrochloride</i>	3
tenofovir disoproxil fumarate	41	<i>tramadol hydrochloride/acetaminophen</i>	3
TEPMETKO	30	<i>trandolapril</i>	51
terazosin hcl	50	<i>tranexamic acid</i>	49
terazosin hydrochloride	50	<i>tranylcypromine sulfate</i>	16
terbinafine hcl	20	TRAZIMERA	32
terconazole	20	<i>trazodone hydrochloride</i>	17
teriparatide	85	TRECATOR	22
TESTOSTERONE	72	<i>TRELEGY ELLIPTA</i>	93
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testosterone enanthate	72	TRESIBA	48
TESTOSTERONE PUMP	72	TRESIBA FLEXTOUCH	48
TETANUS/DIPHTHERIA TOXOIDS- ADSORBED ADULT	84	<i>tretinoi</i> n	32
tetrabenazine	61	<i>tretinoi</i> n	62
tetracycline hydrochloride	10	<i>tri femynor</i>	76
THALOMID	23	<i>triamcinolone acetonide</i>	63
theophylline er	91	<i>triamcinolone acetonide dental paste</i>	62
thioridazine hcl	35	<i>triamterene/hydrochlorothiazide</i>	57
		<i>triderm</i>	63

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<i>tri-estarrylla</i>	76	<i>valsartan</i>	51
<i>trifluoperazine hcl</i>	35	<i>valsartan/hydrochlorothiazide</i>	57
<i>trifluoperazine hydrochloride</i>	35	VALTOCO 10 MG DOSE	13
<i>trifluridine</i>	88	VALTOCO 15 MG DOSE	13
<i>trihexyphenidyl hydrochloride</i>	32	VALTOCO 20 MG DOSE	13
TRIJARDY XR	46	VALTOCO 5 MG DOSE	13
<i>tri-linyah</i>	76	<i>vancomycin hcl</i>	6
<i>trimethoprim</i>	5	<i>vancomycin hydrochloride</i>	6
<i>tri-mili</i>	76	VANFLYTA	30
<i>trimipramine maleate</i>	19	VAQTA	84
TRINTELLIX	17	varenicline starting month box	4
<i>tri-nymyo</i>	76	varenicline tartrate	4
<i>tri-previfem</i>	76	VARIVAX	84
TRIPTODUR	78	VARIZIG	79
<i>tri-sprintec</i>	76	VAXELIS	84
TRIUMEQ	41	VELTASSA	66
TRIUMEQ PD	41	VENCLEXTA	30
<i>trivora-28</i>	76	VENCLEXTA STARTING PACK	30
<i>tri-vylibra</i>	76	<i>venlafaxine hydrochloride</i>	18
TRIZIVIR	41	<i>venlafaxine hydrochloride er</i>	17
TROGARZO	42	VENTAVIS	92
<i>trospium chloride</i>	70	VENTOLIN HFA	91
TRULICITY	46	<i>verapamil hcl</i>	55
TRUMENBA	84	<i>verapamil hcl er</i>	54
TRUQAP	30	<i>verapamil hcl sr</i>	55
TRUSELTIQ	24	<i>verapamil hydrochloride</i>	55
TUKYSA	25	<i>verapamil hydrochloride er</i>	55
<i>tulana</i>	76	VERQUVO	59
TURALIO	30	VERSACLOZ	39
<i>turqoz</i>	76	VERZENIO	31
TWINRIX	84	V-GO 20	86
TYBOST	42	V-GO 30	86
TYMLOS	85	V-GO 40	86
TYPHIM VI	84	<i>vienna</i>	76
TYSABRI	61	<i>vigabatrin</i>	13
UBRELVY	21	<i>vigadrone</i>	13
UDENYCA	49	<i>vigpoder</i>	13
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<i>urea</i>	64	<i>vilazodone hydrochloride</i>	18
<i>ursodiol</i>	67	VIMIZIM	69
<i>valacyclovir hydrochloride</i>	43	VIOKACE	69
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VOCABRIA	40	YUFLYMA 2-SYRINGE KIT	82
<i>volnea</i>	76	YUFLYMA CD/UC/HS STARTER	82
<i>VONJO</i>	25	<i>yuvafem</i>	76
<i>voriconazole</i>	20	<i>zafirlukast</i>	90
<i>VOSEVI</i>	39	<i>zaleplon</i>	93
<i>VRAYLAR</i>	38	<i>ZARXIO</i>	49
<i>vyfemla</i>	76	<i>ZEJULA</i>	31
<i>VYJUVEK</i>	86	<i>ZELBORAF</i>	31
<i>vylbra</i>	76	<i>zenatane</i>	62
<i>VYNDAMAX</i>	57	<i>ZENPEP</i>	69
<i>VYNDAQEL</i>	69	<i>zidovudine</i>	41
<i>VYZULTA</i>	88	<i>ziprasidone hcl</i>	38
<i>warfarin sodium</i>	48	<i>ziprasidone mesylate</i>	38
<i>WELIREG</i>	31	<i>ZIRGAN</i>	88
<i>wera</i>	76	<i>ZOKINVY</i>	69
<i>XALKORI</i>	31	<i>ZOLINZA</i>	25
<i>XARELTO</i>	48	<i>zolmitriptan</i>	21
<i>XARELTO STARTER PACK</i>	48	<i>zolpidem tartrate</i>	93
<i>XATMEP</i>	82	<i>ZONISADE</i>	14
<i>XCOPRI</i>	11	<i>zonisamide</i>	14
<i>XELJANZ</i>	80	<i>zovia 1/35</i>	76
<i>XELJANZ XR</i>	80	<i>zovia 1/35e</i>	76
<i>XERMELO</i>	66	<i>ZTALMY</i>	61
<i>XGEVA</i>	85	<i>ZURZUVAE</i>	16
<i>XIFAXAN</i>	67	<i>ZYDELIG</i>	31
<i>XIGDUO XR</i>	46	<i>ZYKADIA</i>	31
<i>XXIIDRA</i>	87	<i>ZYLET</i>	87
<i>XOFLUZA</i>	42	<i>ZYPREXA RELPREVV</i>	38
<i>XOLAIR</i>	80		
<i>XOSPATA</i>	31		
<i>XPOVIO</i>	25		
<i>XPOVIO 100 MG ONCE WEEKLY</i>	25		
<i>XPOVIO 40 MG ONCE WEEKLY</i>	25		
<i>XPOVIO 40 MG TWICE WEEKLY</i>	25		
<i>XPOVIO 60 MG ONCE WEEKLY</i>	25		
<i>XPOVIO 60 MG TWICE WEEKLY</i>	25		
<i>XPOVIO 80 MG ONCE WEEKLY</i>	25		
<i>XPOVIO 80 MG TWICE WEEKLY</i>	25		
<i>XTAMPZA ER</i>	2		
<i>XTANDI</i>	22		
<i>yargesa</i>	69		

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You can find information on what the symbols and abbreviations in this table mean by going to the introduction pages of this document.